

Study calls for closer examination of transitional care management program effectiveness

January 15 2016, by Elizabeth Adams

Reducing excessive medical costs associated with high hospital readmission rates is a pillar of health care reform. From 2007 to 2011, as many as 19 percent of patients in the United States returned to hospitals less than a month after discharge, accounting for an estimated \$15 million in preventable hospitalization costs.

In an effort to prevent adverse outcomes for chronically ill and aging patients and reduce the burden of cost on the government, Medicare providers have implemented transitional care management programs (TCMs) as a bundled component of Medicare payment plans. TCMs comprise a broad set of services and interventions designed to ease the transition from a hospital to community-based care and prevent the recurrence of hospital admission for patients with complex medical needs. Beginning in 2013, patients became eligible for Medicare reimbursement for TCM services, such as outpatient visits and adherence to treatment assessments.

A systematic review conducted by faculty members in the University of Kentucky Division of Community Medicine of the Department of Family and Community Medicine found that the majority of TCM programs are ineffective in meeting criteria to serve the needs of the patients intended to receive transitional services. Led by first author Karen Roper and senior investigator Roberto Cardarelli, chief of the Division of Community Medicine, the research team culled peer-

reviewed journal articles reporting the [readmission rates](#) of adults receiving the TCM bundle of services and published between 2004 and 2015. The purpose of the study was to assess the state of research monitoring the effectiveness of fully reimbursable TCM visits in reducing [hospital readmission](#) rates.

The research team identified 969 studies reporting readmission rates for TCM service recipients, but 77 of those studies met the inclusion criteria to be considered relevant for transitional care and appropriateness of population and setting. Only three articles incorporated all required elements of TCM service. Although two of the three TCM studies were improvement designs and none were randomized controlled studies, each reported success reducing readmission rates, contributing limited evidence that TCMs are effective in reducing hospital readmission. Based on these results, the researchers called for additional studies examining the implementation of TCMS.

"The few identified studies through our systematic review show promising efficacy data on the impact of TCM visits on hospital readmission rates. However, it also highlights that effectiveness studies are needed to further understand its impact in real-world settings and what attributes of the TCM process cause this impact," Cardarelli said.

The results were published in an article appearing in the January issue of the *American Journal of Medical Quality*.

More information: K. L. Roper et al. Systematic Review of Ambulatory Transitional Care Management (TCM) Visits on Hospital 30-Day Readmission Rates, *American Journal of Medical Quality* (2015). [DOI: 10.1177/1062860615615426](https://doi.org/10.1177/1062860615615426)

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