

# Study finds tailored post-hospital visits lower risk of readmission for Medicare Advantage patients

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Medicare Advantage patients who had tailored post-hospital visits with primary care clinicians, known as POSH visits, were less likely to experience hospital readmission than those who did not have an outpatient visit, according to a Kaiser Permanente study published today in *JAMA Internal Medicine*.

Tailored POSH visits are scheduled for the patient while he or she is still in the hospital and focus on following up on treatment plans after discharge. In comparison, regular primary care clinician outpatient visits may focus on routine care and not cover specific issues related to a patient's recent hospitalization.

Researchers found that Medicare Advantage patients who had one or more outpatient visits with primary care clinicians within seven days of being discharged from the hospital to their homes were 12 to 24 percent less likely to experience [hospital readmission](#) than those who did not have an outpatient visit. And patients who had a POSH visit were 28 percent less likely to experience hospital readmission, compared to those completing any other type of outpatient visit.

"While other studies had mixed results regarding the effectiveness of post-hospitalization visits, our study highlights the value of both routine and more tailored POSH visits in ensuring continuity of care once a patient transitions from hospital to home," said Ernest Shen, PhD,

research scientist biostatistician at the Kaiser Permanente Southern California Department of Research & Evaluation. "Although any [primary care](#) clinician outpatient visit appeared to reduce readmission risk compared to no outpatient visit, the POSH visit provides the added benefit of the care team being alerted to, and therefore better prepared to address, patients' post-discharge needs."

The study examined the electronic health records of more than 71,000 Medicare Advantage patients who were discharged to home from Kaiser Permanente hospitals between January 1, 2011 and December 31, 2014. To address the potential bias that patients who had an outpatient visit may have been less sick than those who did not, the researchers accounted for several important factors, including severity of the condition during hospitalization, underlying illnesses and functional status.

Provided by Kaiser Permanente

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