

# Care management for complex needs may not cut readmissions

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(HealthDay)—Among patients with very high use of health care

services, readmission rates were not lower for those assigned to a care-transition program compared with usual care, according to a study published in the Jan. 9 issue of the *New England Journal of Medicine*.

Amy Finkelstein, Ph.D., from the Massachusetts Institute of Technology in Cambridge, and colleagues randomly assigned 800 hospitalized patients with medically and socially complex conditions and at least one additional hospitalization in the preceding six months to a care-transition program or to usual care. The evaluation measured the impact of the Camden Coalition's care management program (Camden Core Model) on the 180-day hospital readmission rate.

The researchers found that the 180-day readmission rate was 62.3 percent in the [intervention group](#) and 61.7 percent in the [control group](#); the adjusted between-group difference was not significant (0.82 percentage points; 95 percent confidence interval, -5.97 to 7.61). A comparison of the intervention-group admissions during the six months before and after enrollment misleadingly suggested a 38-percentage-point decline in admissions; but this comparison did not account for the similar decline in the control group.

"This study confirms what our care teams see every day—care management that focuses solely on [health care](#) is insufficient," Kathleen Noonan, chief executive officer of the Camden Coalition, said in a statement. "People with lifetimes of trauma and complexity are best supported by high-quality resources in the community and a health care environment designed to meet their needs."

**More information:** [Abstract/Full Text \(subscription or payment may be required\)](#)

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