

Every day spent in the hospital, readmission likelihood increases by 2.9 percent in rural cities

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Hospital readmissions, cost hospitals about \$26 billion annually. Systems like the Hospital Readmission Reduction Program (HRRP) within the Affordable Care Act penalize hospitals with higher readmission rates for targeted diagnoses. Healthcare data reveals that healthcare facilities located in rural Southern Appalachia show readmission rates that are above the national average, which results in penalties to hospitals within this region. In order to assess and prevent the causes of these frequent hospital readmission, researchers performed a retrospective review of rural Southern Appalachia.

Researchers reviewed 15,500 patients admitted to rural Southern Appalachia hospitals from January 1, 2014 to October 31, 2017. In order to determine associations with readmission, univariate analyses and regression modeling were conducted on potential associated variables such as length of stay, age, gender, healthcare payor, discharge month/day/time, tobacco use, smoking cessation education, medication reconciliation upon discharge, and presence of comorbid diagnoses like diabetes mellitus, hypertension chronic renal failure, and psychiatric disorders.

The authors found that every day spent in the [hospital](#), readmission likelihood increases by 2.9%. Individuals discharged between 0100—1300 were less likely to be readmitted compared to those discharged between 1300—0100 (p

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