

Readmissions

Hospital Readmission Review

In order to ensure that the care delivered to our members is of the highest possible quality, VIVA HEALTH will perform readmission reviews on all admissions to an acute, general, or short-term hospital occurring less than 31 calendar days from the date of discharge from the same or another acute, general, or short-term hospital.

Viva Health reviews the following readmission categories:

- Same day readmission for a related condition (see section below for more information);
- Same day readmission for an unrelated condition;
- Planned readmission/leave of absence; and
- Unplanned readmission in less than 31 days following the prior discharge.

Denial of the readmission may occur for, but is not limited to, the following reasons:

- If the readmission was medically unnecessary;
- If the readmission resulted from a premature discharge from the same hospital; or
- If the patient was readmitted for care that could have been provided during the first admission.

Same Day Readmission: If readmission of a patient to a hospital occurs on the date of discharge for symptoms related to or for evaluation and management of the prior stay's medical condition, the hospital should combine the original and subsequent stays into a single claim.

VIVA HEALTH has adopted a 30 day review policy that is consistent with CMS guidance, and the QIO Manual. As such, the following factors related to clinical instability and discharge planning may be considered in determining whether a discharge was premature, or a readmission preventable.

ⓧ Premature Discharge of Patient That Results in Subsequent Readmission of Patient to Same Hospital -- This prohibited action occurs when a patient is discharged even though he/she should have remained in the hospital for further testing or treatment or was not medically stable at the time of discharge. A patient is not medically stable when, in your judgment, the patient's condition is such that it is medically unsound to discharge or transfer the patient. Evidence such as elevated temperature, postoperative wound draining or bleeding, or abnormal laboratory studies on the day of discharge indicate that a patient may have been prematurely discharged from the hospital.

ⓧ Readmission of Patient to Hospital for Care That Could Have Been Provided During First Admission -- This prohibited action occurs when a patient is readmitted to a hospital for care that, pursuant to professionally recognized standards of health care, could have been provided during the first admission.

This action does not include circumstances in which it is not medically appropriate to provide the care during the first admission.

[QIO Manual Chapter 4; Section 4255]

Additionally, in accordance with CMS guidance, and per §482.43 CMS State Operations Manual, thorough and appropriate discharge planning is the expectation of VIVA HEALTH.

The discharge plan should consider the individual needs of the member and caregiver, and consider the availability of services. A readmission review will consider the index admission, and whether the following basic elements were present:

- A follow up appointment with the PCP or specialist within 30 days of discharge, clearly documented in the record to include the physician, date, and time of the appointment.
- A thorough medication reconciliation including clearly indicated changes to the pre-admission medications, documented in the medical record.
- The signs and symptoms to watch out for post-discharge, and the action plan in the event of their occurrence, clearly documented in the record.

Upon identification of a readmission, the facility will be notified of the denial, and given three (3) business days to provide complete records from the index admission, and to demonstrate that the patient was not prematurely discharged at that time, as well as the documentation of an appropriate discharge plan, as described above.

If records are not provided within 3 business days, the readmission will be denied, and the opportunity to provide such records will be afforded during the appeals process. Appeals may be submitted to:

- Viva Health

ATTENTION: PROVIDER APPEALS

417 20th Street North, Suite 1100

Birmingham, Alabama 35203

Appeals may also be faxed to the attention of Provider Appeals at (205) 449-7542.

Providers with secure e-mail delivery, to protect Protected Health Information (PHI), may also e-mail appeals to vivaproviderservices@uabmc.edu. However, it is recommended that appeals with large amounts of documentation, such as medical records, NOT be faxed or e-mailed.