

OUTCOMES & REHOSPITALIZATIONS FAQs

How common is rehospitalization among older patients?

According to a 2009 study in the New England Journal of Medicine, “One in five elderly patients is readmitted to the hospital 30 days after leaving, resulting in \$17 billion in annual Medicare costs.”

What is crucial to preventing rehospitalization cases at my agency?

One way for home health agencies to differentiate themselves in the new world of PDGM (Patient Driven Groupings Model) is by demonstrating significant patient outcomes for functional improvement and having lower rehospitalization rates.

How can our agency help our patients create better outcomes?

Analysis shows physical therapy is a vital partner in the provision of home health services for patients with functional impairments. A study from 2011 demonstrated that, “Patients who receive rehabilitation at home have improved outcomes and lower utilization of costly health services.”

How can therapy assist our agency with prevention?

For one, therapists can take vital signs before, during and after physical activity. They can determine the impact of their interventions on the patient’s physiological response and they can analyze when those vital signs are counterintuitive to performing any strenuous physical activity. Also, a therapist can be integral in the home assessment of whether the home environment is conducive to active healing and movement toward independence.

What are some best practices our therapists should perform in order to have successful outcomes for our patients?

Ensure your therapists are familiar with proper scoring and are collaborating effectively as well as timely for the OASIS items on the Home Health Quality Measures list. In addition, they should perform evidence-based therapy interventions that will create a positive outcome for the patient in the proper areas of functional performance.

What is durability of response?

Determining whether or not the patient can maintain the gains achieved while in therapy when their therapist is not present for cuing or adjustments.

Is it important to involve the therapy team in the primary diagnosis analysis?

Yes. By involving the therapy team in discussions surrounding the primary diagnosis of home care intervention, the team is more in tune to analyzing the patient’s response to treatment, documentation to the primary diagnosis and more alert to possible exacerbations that would result in a rehospitalization.

Questions about this information? Contact AskAtHome@AegisTherapies.com or visit our Resource Center for more information at [AegisTherapies.com/Resources](https://www.AegisTherapies.com/Resources).