

TAHOE HEALTHCARE SYSTEMS

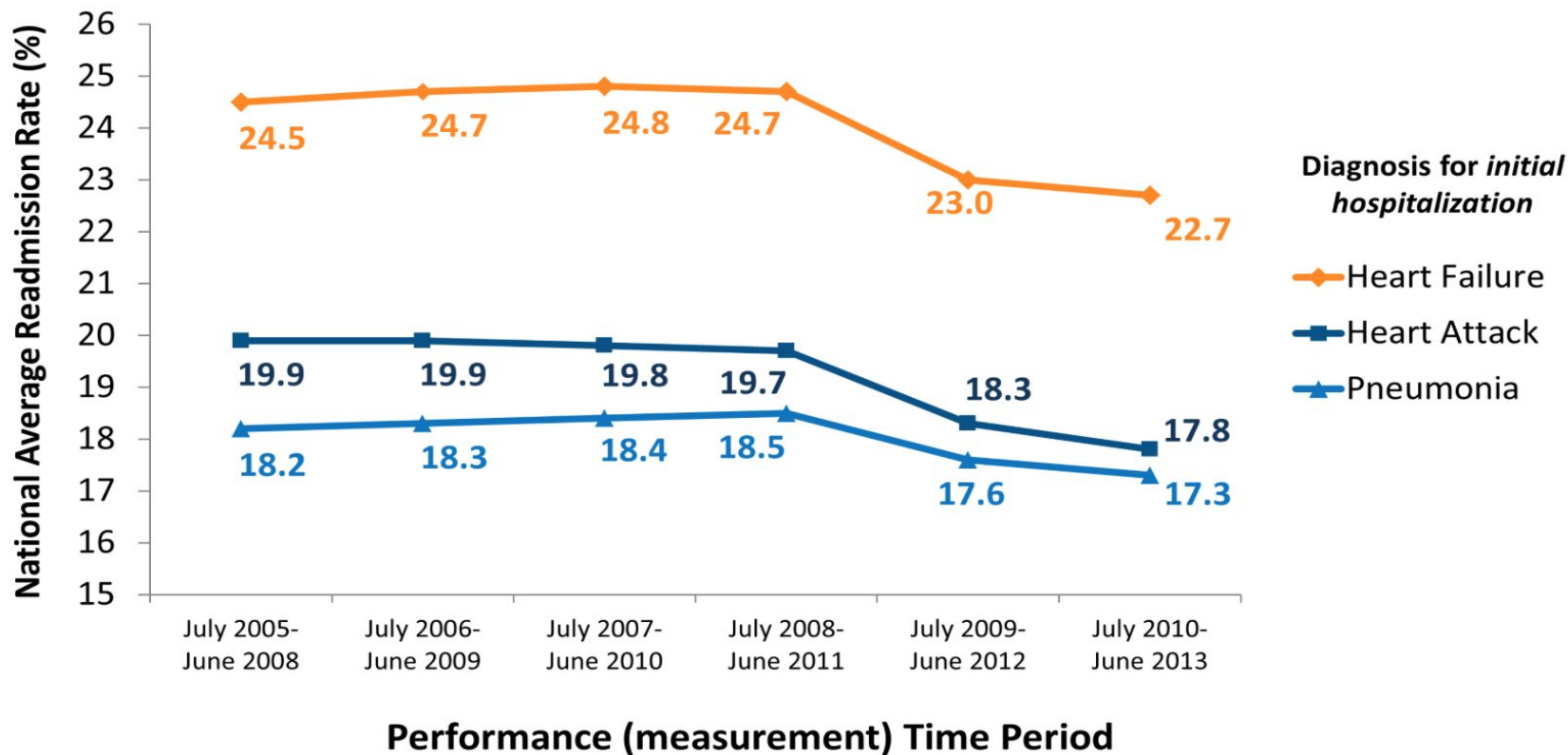


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INTRODUCTION

- Integrated health care provider , operates 14 hospitals in the pacific northwest
- 18 percent revenue from insurance reimbursements
- Reimbursements from medicare covered by HRRP(Hospital readmissions reduction program)

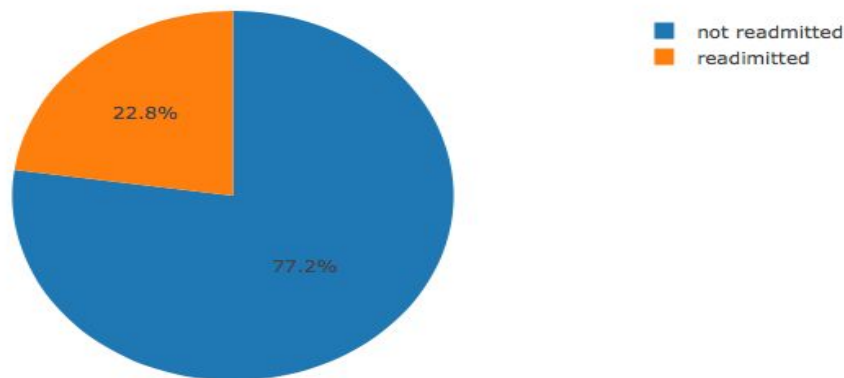
National Medicare Readmission Rates Started to Fall in 2012



Data Insight

- Has Six predictors and two events
- Total of 4382 patients over the period of a year
- No missing values

readmitted vs not readmitted



Problem

- Paid \$750,000 as readmission rate exceeded risk-adjusted targets
- Current HRRP penalty rates would cost \$8000 per patient
- Implementing CareTracker at \$1200 per patient ?
- High rate of readmission



GOAL

- **Build a model to reduce readmission rates**
- **Identify target patients for CareTracker**
- **Cost Implications of the model created**

Assumptions

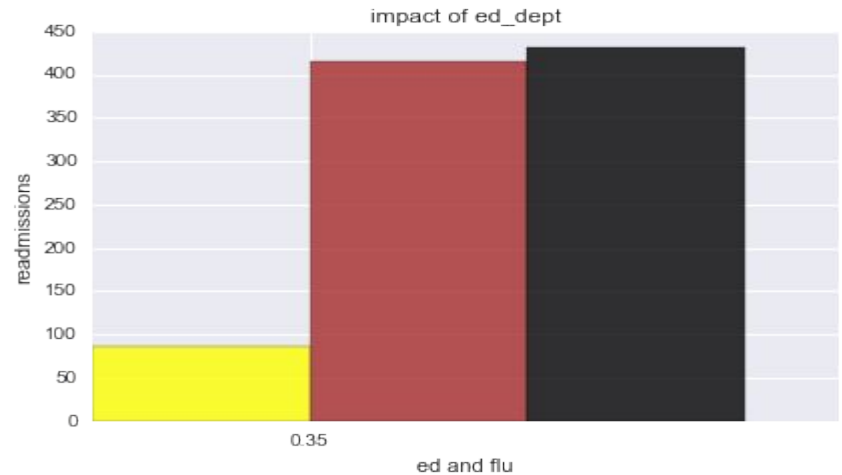
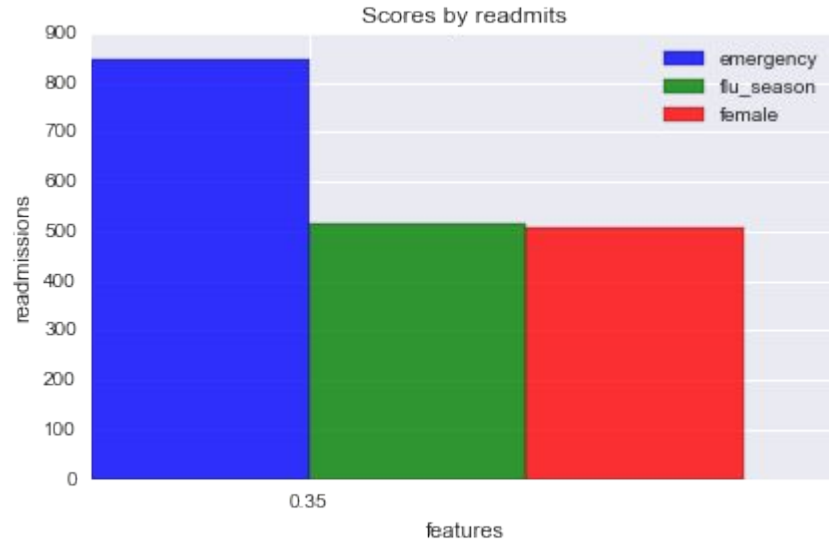
- **Treatment cost per patient is \$16000**
- **Managerial segregation of readmission ERA risk groups**
- **Selecting important features**

METHODOLOGY

- **Feature Importance**
- **Deploy best fit Model**
- **Medical Acumen**
- **ERA - AMI risk group segregation**

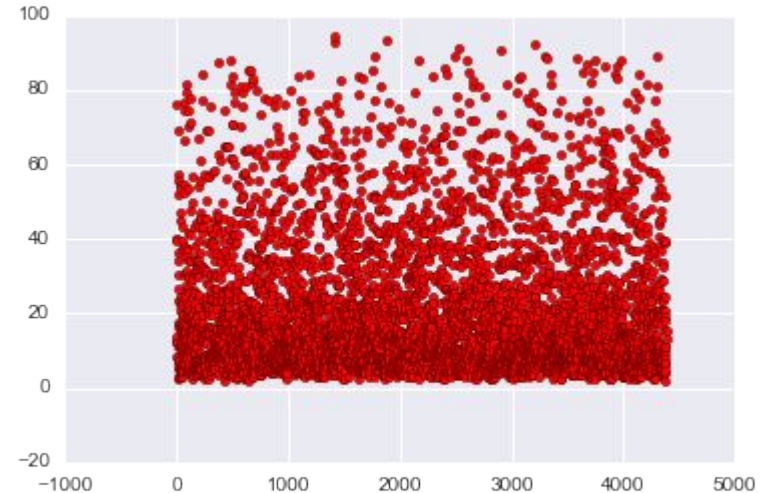
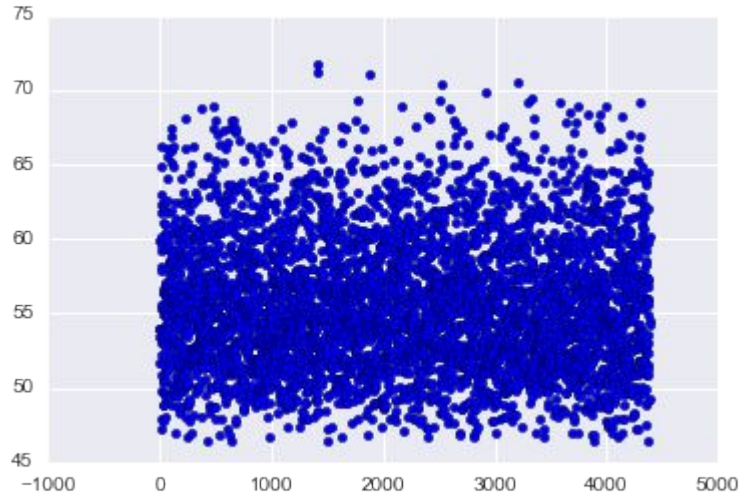
Feature Importance

- admitted in flu_season
- admitted into emergency department
- admitted into emergency during flu_season



Model

- ElasticNetCV(ridge) vs Penalized Logistic regression(ridge)
- Scatter plot of patients and their readmission risk percentage



MEDICAL ACUMEN

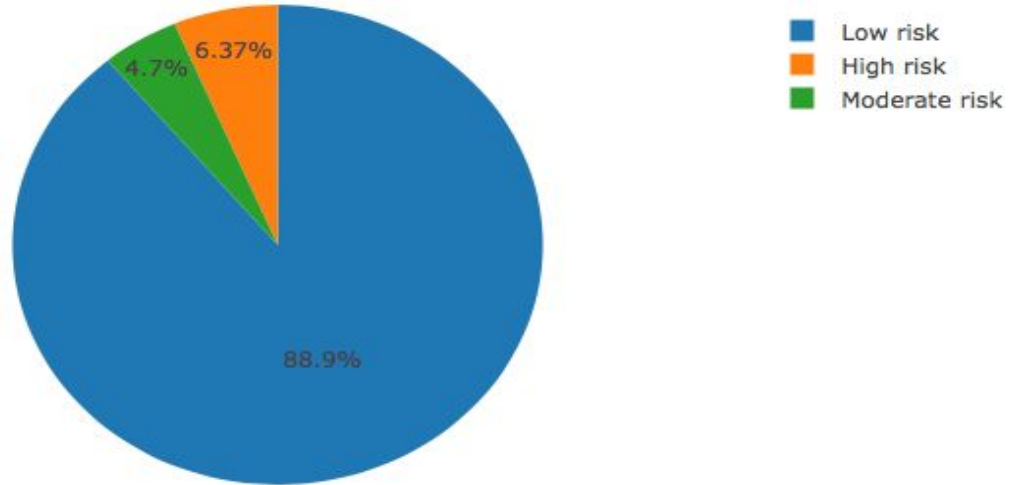
- Patient's ERA Percentage risk of readmission(AMI) = $(\exp(\text{patient's risk score}) \div (1 + \exp(\text{patient's risk score}))) * 100$
- Where patient's risk score = $\text{intercept} + (b_{\text{ed_admit}} \times \text{ed_admit}) + (b_{\text{severity_score}} \times \text{severity score}) + (b_{\text{comorbidity_score}} \times \text{comorbidity score})$
- ERA (Elders Risk Assessment) percentage risk groups
- Low risk less than 50 (Green)
- Moderate risk 50 to 60 (Orange)
- High risk above 60 (Red)

ERA-AMI based segregation

	patient risk score	ERA-AMI(percentage)	readmission risk groups
0	-0.39936	40.1466	C
1	-1.94362	12.5251	C
2	-1.84902	13.5988	C
3	-2.40481	8.2807	C
4	-1.97185	12.219	C
5	-0.427529	39.4717	C
6	1.15488	76.0401	A
7	0.794662	68.8832	A
8	0.28429	57.0598	B
9	-1.56729	17.2603	C
10	-2.96404	4.90773	C
11	-3.58275	2.70471	C
12	-2.72175	6.17019	C
13	-1.61771	16.5521	C
14	-0.82175	30.5392	C
15	-3.40766	3.2057	C
16	-2.0655	11.2496	C
17	0.235038	55.849	B

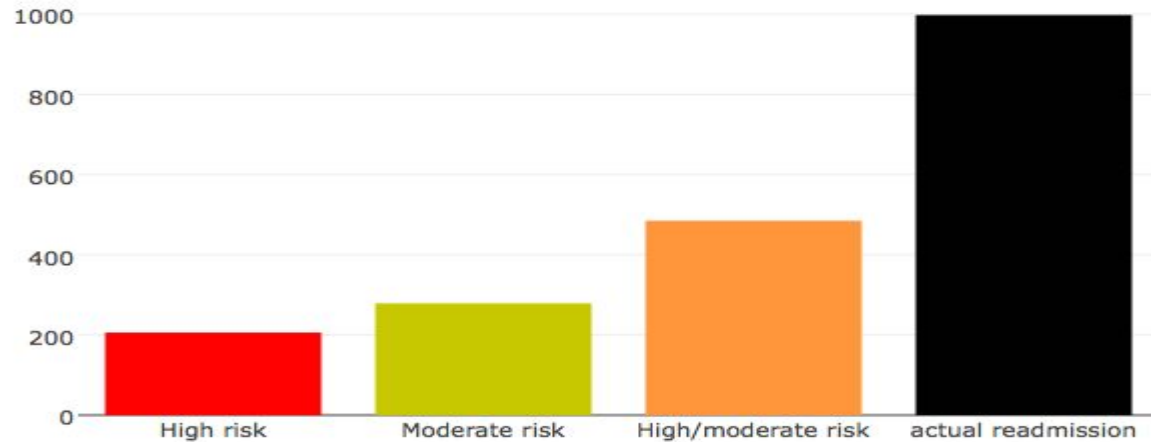
Distribution of risk groups

readmission risk groups



Results

- Comparison to actual readmitted patients



Cost Implications

	Caretracker	No Caretracker
Readmitted	76100000	78096000
High risk	71786000	72344000
high/medium risk	73022000	73992000

Conclusion

- **Model reduced the readmission rate by 70 percent (only High risk)**
- **Model reduced the readmission rate by 50 percent (High / moderate risk)**
- **Deploying CareTracker to assumed readmits from the data \$76100000**
- **Deploying CareTracker to only high risk patients \$71786000**
- **Cost savings = \$4314000**

Future Work

- Making the model generic to all conditions(illness)
- Using natural language processing to interpret written notes and other documents (forms , doctor's notes , discharge summary)

Thank You