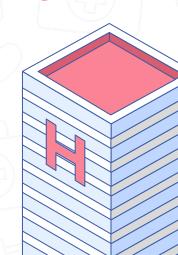


HARMONY HEALTHCARE FEATURE SELECTION

Hibah Arshad Samantha Nadler Thomas Walsh



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- Pines, Jesse M., et al. "Variation in Emergency Department Admission Rates across the United States." Medical Care Research and Review: MCRR, vol. 70, no. 2, 2013, pp. 218–31, https://doi.org/10.1177/1077558712470565.
 - Marissa B. Esser, Nimi Idaikkadar, Aaron Kite-Powell, Craig Thomas, Kurt J. Greenlund, Trends in emergency department visits related to acute alcohol consumption before and during the COVID-19 pandemic in the United States, 2018–2020, Drug and Alcohol Dependence Reports, Volume 3, 2022, 100049, ISSN 2772-7246, https://doi.org/10.1016/j.dadr.2022.100049.

UNITED STATES EMERGENCY ROOM TRENDS

- 16.3% of emergency room patients were resulted in admission
- In 2018, the average rate of alcohol related ER admissions was 163.4 visits per 10,000 visits (1.63%)
- In 2020, that number increased to 184.8 (1.85%)





EMERGENCY ROOM READMISSION TRENDS

10.5%

percent of patients readmit themselves to an emergency room within 30 days.

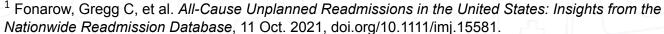
45+

Readmission within 30 days is more common in patients ages 45 and older.

MOST COMMON FACTORS

Heart failure and septicaemia were the most frequent factors causing readmission.



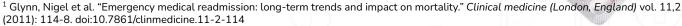






MOST COMMON READMISSION CAUSES

- Respiratory-related (22%)
- Nervous-related (17.3%)
- Cardiovascular-related (16.7%)
- Digestive-related (11.5%)
- Covid-19 (9.3%)



²⁾ Abolfazl Akbari, Amirhossein Fathabadi, Mahya Razmi, Ahmadreza Zarifian, Mahdi Amiri, Alireza Ghodsi, Elnaz Vafadar Moradi, Characteristics, risk factors, and outcomes associated with readmission in COVID-19 patients: A systematic review and meta-analysis, The American Journal of Emergency Medicine, Volume 52, 2022, Pages 166-173, ISSN 0735-6757, https://doi.org/10.1016/j.ajem.2021.12.012.



RESEARCH QUESTION

What factors contribute the greatest to a patient getting readmitted to the emergency room?

- Feature engineering
- Build models to test variable correlation





MODELS WE CONSIDERED USING



LASSO METHOD

 Feature selection and regularization performed simultaneously

LOGISTIC REGRESSION

 Models log-odds of events as linear combinations of variables

XGBOOST

 Iteratively builds decision trees to determine an average prediction















LASSO METHOD

 Feature selection and regularization performed simultaneously

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Dataset cleanedDatasetV2.csv has no missing values:

- Categorical data all is lowercase to standardize text, replaced missing values with mode
- Numerical to binary to make predictions, replaces missing with mean
- Labels were converted to "Yes" or "No" to address imbalanced dataset

LASSO REGRESSION

(Least Absolute Shrinkage and Selection Operator)

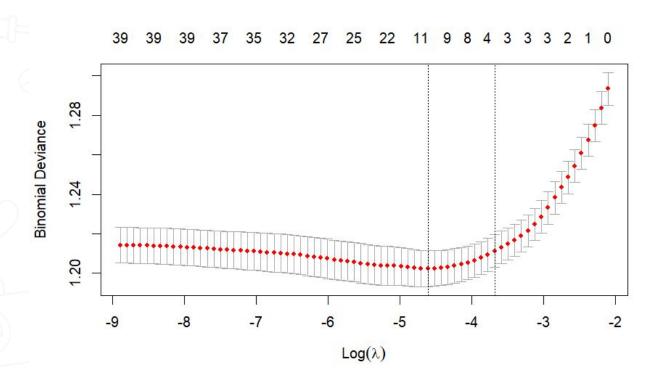
```
y ← HH_Data$Admission
x ← HH_Data %>%
  select(where(is.numeric), -Admission) %>%
  as.matrix()
library(glmnet)
set.seed(42)
lasso_model \leftarrow cv.glmnet(x, y, alpha = 1, family = "binomial")
best_lambda ← lasso_model$lambda.min
cat("Best lambda (from cross-validation): ", best_lambda, "\n")
plot(lasso_model)
```







LASSO REGRESSION





- Patient.HCC.Risk.Total.Risk: -0.0446898215
- Active.Medications: 0.0443919593
- Primary.Care.Encounter.Count: 0.0331995417
- SDOH.Assessment.Count: 0.0146984831
- Patient.Appointment.No.Show.Rate..: 0.0146875578
- Depression.Screening.Count.Past.Yr: 0.0086325980
- eGFR.Result: 0.0067602679
- Most.Recent.BMI.Value: 0.0037749693
- UDS.Qualifying.Encounter.Count: 0.0032103970
- COVID.19.Immunization.Code: -0.0006886961
- Fasting.Glucose.Test.Result: -0.0006487510

FUTURE STEPS / LIMITATIONS

USE OTHER PREDICTIVE MODELS

Consider using logistic regression and/or XGBoost

CONSIDER MORE RECENT DATA

Dataset only contained one week's worth of data

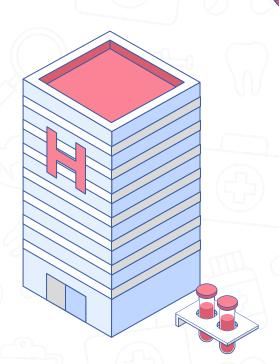
GET FIXED AGES

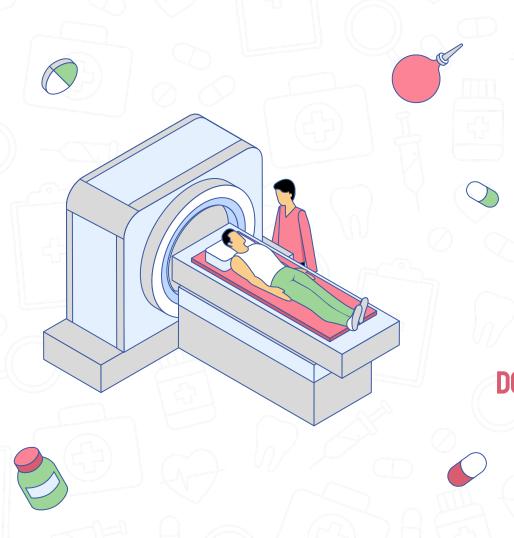
 Not on us, but age column got corrupted and produces ages all ending in "1900"











THANK YOU!

DOES ANYONE HAVE ANY QUESTIONS?