Bree Complex Discharge from Hospitals  
May 18th, 2023

Discharge Data Around WA State

Health Care Authority:
Barriers to discharge, client-specific data, responsible MCO, the enrollee’s discharge plan, MCO interventions, discharge location, discharge date, HCS involvement, date of admit, date of admin day start, medical stability

Washington State Hospital Association:
Current total number of hospitals days, number of hospital avoidable days, prior patient care setting, HCS eligibility, type of service, primary coverage, carrier name, discharge plan/placement location, primary, secondary, and other barrier.

Sample Metrics for Avoidable Stays:

• Length of Stay:
  o Individual: length of time between a patient’s hospital admittance and discharge.
  o Average: Total number days from all inpatients during a single year divided by the number of admissions OR discharges.

• Avoidable Days:
  o Portion of an individual’s inpatient length of stay accounted for by an avoidable delay in discharge (medical error, insufficient care delivery, lack of coordination.
  o Length of time a patient remains in acute care despite not meeting medical necessity for care.

Sample Data for Patient Characteristics:

• Patient demographics
• Primary payer/insurer
• Prior patient care setting
• Discharge plan/placement location
Sample Data for Discharge Barriers:

- Medical:
  - Alzheimer’s/dementia/TBI
  - Bariatric status
  - High Care Needs
  - Hemodialysis/Dialysis Availability
  - Wound Care
- Behavioral:
  - Complex behavioral need
  - SUD (Current or history)
  - Lack of psych support/services
- Social Needs:
  - Housing/homelessness
  - Undocumented
  - Lack of family support/cooperation
- Legal:
  - Guardianship
  - CPS/APS
  - Prior conviction (esp. sex offender/arson/violence)
- Process:
  - Delayed insurance authorization/prior authorization
  - DME coverage
  - COPES
  - DDA Delays
  - Delays from HCS
  - Transfer to Eastern/Western

Sample Data for Efficient Discharge

- Efficiency of discharge process
  - Documentation of assigned roles and responsibilities for discharge process as well as written discharge procedures.
  - Documentation of discharge assessments, plans, actions, and outcomes
  - Descriptions or written procedures for communicating discharge plan between stakeholders in the hospital and outside
- Timeliness of discharge planning
  - Time between commencement of discharge planning activities and hospitalization date (may be different metrics for planned vs. unplanned hospitalizations).
- Stakeholder satisfaction
  - Measures of satisfaction with the discharge plan and intended post-acute care environment from hospital staff, post-acute care staff, and patients.
- Impediments to discharge (see metrics for discharge barriers, above)