Partnership for Quality Measurement
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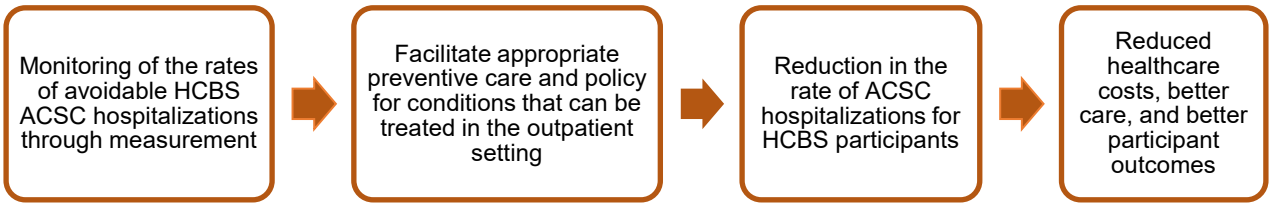
Full Measure Submission to Partnership for Quality Measurement

Attach a logic model and provide a description of the relationship between structures and processes and the desired outcome.*



Evidence indicates that there are approximately 3.5 million potentially avoidable hospital admissions every year, which account for $33.7 billion in aggregate hospital costs (McDermott & Jiang, 2020). The HCBS ACSC measure will help monitor rates of avoidable hospitalizations for ambulatory care sensitive conditions among HCBS participants.

Appropriate primary care may also prevent the development or worsening of various chronic conditions and prevent individuals from returning to emergency or inpatient care settings for treatment. Continuity of care improvement efforts, such as increasing the average primary care visits to an optimal rate (generally three or four visits, annually, depending on health status and condition-specific needs), has been shown to reduce the risk of hospitalizations for ambulatory care sensitive conditions (Kao et al., 2019).

Reduced hospital admissions and effective care coordination have the potential to contribute to healthcare cost savings as well as improve quality of care.

References:

Kao, Y., Lin, W., Chen, W., Wu, S., & Tseng, T. (2019). Continuity of outpatient care and avoidable hospitalizations: A systematic review. *American Journal of Managed Care, 25*(4), 126-134. http://ajmc.s3.amazonaws.com/_media/_pdf/AJMC_04_2019_Kao_final.pdf

McDermott, K. W., & Jiang, H. J. (2020). Characteristics and costs of potentially preventable inpatient stays, 2017. Healthcare Cost and Utilization Project: Agency for Healthcare Research and Quality. https://www.hcup-us.ahrq.gov/reports/statbriefs/sb259-Potentially-Preventable-Hospitalizations-2017.jsp