

Continuity of Care for Newborns

*Louisiana Department of Health Response to Act 311
of the 2013 Regular Legislative Session*

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Quality Improvement and Innovation Section

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Introduction

The Louisiana Department of Health (LDH) submits the following report in response to ongoing reporting provisions of Act 311 of the 2013 Regular Louisiana Legislative Session. This report is the sixth in a series produced and submitted to the House and Senate Committees on Health and Welfare.

The focus of Act 311 – the monitoring and assurance of continuity of care for newborns enrolled in Medicaid managed care – is in keeping with the deliverables and layers of oversight that LDH has outlined in its contracts with the managed care organizations (MCOs) that deliver services through the Healthy Louisiana program.

This report contains data from the Office of Public Health Vital Records and Medicaid, compiled through the University of Louisiana at Monroe contractor resource. Gestational age from Vital Records and Medicaid claims data/MCO encounter data received from the five MCOs and stored in the Molina Data Warehouse were used to identify premature births and the primary discharge diagnoses that triggered the rehospitalizations.

The rehospitalization rate, defined as readmission to the hospital within thirty days of discharge, for infants born premature at less than 37 weeks gestational age and who are within the first six months of life is 4.85 percent. The chart below shows the progress of rehospitalization rates since the first Continuity of Care for Newborns report.

Publication Date	Year of Infants' Birth	Rehospitalization Rate
2014	2012	7.39
2015	2013	5.24
2016	2014	4.98
2017	2015	4.71
2018	2016	4.79
2019	2017	4.85

Reporting Requirements

Act 311 requires an assessment of the incidence and causes of all rehospitalizations of infants born premature at less than 37 weeks gestational age and who are within the first six months of life.

Definitions

Premature Infant An infant born at less than 37 weeks gestational age

Rehospitalization Readmission to the hospital within 30 days of discharge

Data Sources

The report utilizes Vital Records data obtained from the Office of Public Health for establishing gestational age and Medicaid claims data/MCO encounter data stored in the Molina Data Warehouse for identifying the primary discharge diagnoses that triggered the rehospitalizations.

Report Findings

The rehospitalization rate for infants born during calendar year 2017 who were born premature at less than 37 weeks gestational age and are in their first six months of life is 4.85 percent. The calendar year 2016 rehospitalization rate was 4.79 percent. This indicates that the rehospitalization rate in this group of newborns has remained fairly stable over the past two reporting years.

Methods for Data Collection¹

Denominator: Discharges for premature infants born from 1/1/2017 to 12/31/2017.

- Step 1** Identify all acute inpatient stays with a discharge date on or between infant's birthday and six months of life.
- Step 2** Consider acute-to-acute transfers as a single hospital stay, where the admission date is set as the original stay's admission date and the discharge date is set as the transfer's discharge date.
- Step 3** Exclude hospital stays of one day or less (where the admission date is the same as the discharge date).
- Step 4** Exclude any acute inpatient stay with a discharge date in the 30 days prior to the index admission date.
- Step 5** Exclude inpatient stays with discharges for death.
- Step 6** Include only infants who were continuously eligible for Medicaid and who did not have dual eligibility and/or third-party coverage from birthday to seven months of life.

Numerator: Admissions for premature infants within 30 days of a discharge.

- Step 1** Identify all acute inpatient stays with an admission date on or between infant's birthday and seven months of life.
- Step 2** Consider acute-to-acute transfers as a single hospital stay, where the admission date is set as the original stay's admission date and the discharge date is set as the transfer's discharge date.
- Step 3** For each admission in the denominator, determine if any of the acute inpatient stays have an admission date within 30 days after the index discharge date.

¹ The methodology used to generate this report was adapted from the HEDIS Plan All-Cause Readmissions measure, which adds an additional 30 days to the numerator to identify readmissions.

Causes of Rehospitalization Based on the Rehospitalization Discharge Diagnosis

Diagnosis Code	Diagnosis Description	Number of Rehospitalizations
P59.9	Neonatal Jaundice, Unspecified	14
J21.0	Acute Bronchiolitis Due to Respiratory Syncytial Virus	13
K21.9	Gastro-Esophageal Reflux Disease without Esophagitis	11
J96.01	Acute Respiratory Failure with Hypoxia	10
P59.0	Neonatal Jaundice Associated with Preterm Delivery	9
J18.9	Pneumonia, Unspecified Organism	9
P28.4	Other Apnea of Newborn	6
J21.9	Acute Bronchiolitis, Unspecified	5
Q40.0	Congenital Hypertrophic Pyloric Stenosis	5
P78.83	Newborn Esophageal Reflux	5
R06.81	Apnea, Not Elsewhere Classified	4
P92.6	Failure to Thrive in Newborn	4
P55.1	ABO Isoimmunization of Newborn	3
J96.22	Acute and Chronic Respiratory Failure with Hypercapnia	3
J21.8	Acute Bronchiolitis Due to Other Specified Organisms	3
P27.1	Bronchopulmonary Dysplasia Originating in the Perinatal Period	3
P81.9	Disturbance of Temperature Regulation of Newborn, Unspecified	3
R63.3	Feeding Difficulties	3
P59.8	Neonatal Jaundice from Other Specified Causes	3
P92.8	Other Feeding Problems of Newborn	3
A41.89	Other Specified Sepsis	3
J12.1	Respiratory Syncytial Virus Pneumonia	3
R63.4	Abnormal Weight Loss	2
R68.13	Apparent Life Threatening Event in Infant (ALTE)	2
R78.81	Bacteremia	2
P36.9	Bacterial Sepsis of Newborn, Unspecified	2
K40.20	Bilateral Inguinal Hernia, without Obstruction or Gangrene, Not Specified as Recurrent	2
P23.9	Congenital Pneumonia, Unspecified	2
P90	Convulsions of Newborn	2
P07.03	Extremely Low Birth Weight Newborn, 750-999 Grams	2
R62.51	Failure to Thrive (Child)	2
R50.9	Fever, Unspecified	2
S02.0XXA	Fracture of Vault of Skull, Initial Encounter for Closed Fracture	2
P80.9	Hypothermia Of Newborn, Unspecified	2
P39.3	Neonatal Urinary Tract Infection	2

Diagnosis Code	Diagnosis Description	Number of Rehospitalizations
P96.89	Other Conditions Originating in the Perinatal Period	2
Z38.01	Single Liveborn Infant, Delivered By Cesarean	2
R06.82	Tachypnea, Not Elsewhere Classified	2
N39.0	Urinary Tract Infection, Site Not Specified	2
	Other*	60

*Other includes discharge diagnoses associated with only one rehospitalization, for example, neonatal bradycardia (P29.12); food in respiratory tract, part unspecified, causing asphyxiation, initial encounter (T17.920A); hyperkalemia (E87.5) and other disorders of bilirubin metabolism (E80.6).

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