



Hospitalization for Potentially Preventable Complications (HPC)

Definition

For patients age 67 and older, the rate of discharges for ambulatory care sensitive conditions (ACSC) per 1,000 patients and the risk-adjusted ratio of observed to expected discharges for ACSC by chronic and acute conditions within the measurement year.

A lower rate constitutes a better score for this measure.

Plans Affected	Quality Programs Affected	Collections and Reporting Method
Medicare Advantage	CMS Star Ratings	Administrative Claim/Encounter Data

This is a quick reference tool to help you with documentation of Medicare Star Rating measures that close care gaps

Acute or chronic ACSCs can be managed or treated in an outpatient setting.

- Measure is based on discharges and not members so each admission is counted
- For exclusions that include multiple events, codes must be on the same claim
- Ensure accurate inpatient and outpatient coding of ambulatory care sensitive conditions in the medical record
- Code burden of illness for targeted conditions as accurately as possible and to the highest specificity



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Quality care is a team effort.
Thank you for playing a starring role!



The ambulatory care conditions included in this measure and tips:

Chronic	Tips and Best Practices
Diabetes complications	<ul style="list-style-type: none"> • Encourage patients to keep all of their appointments • Get your diabetic patients used to taking off their shoes at the beginning of their appointment for examination. • Educate patients on the use of the Nurse Advice Line printed on their insurance card. • Ensure after-hours access to your practice and know what services are available in your area so patients can be referred to pharmacy chain based clinics, urgent care centers, and emergency rooms as needed.
Uncontrolled diabetes	
Lower-extremity amputation among patients with diabetes	
COPD	
Asthma	
Hypertension	
Heart Failure	
Acute	<ul style="list-style-type: none"> • Educate patients on when it's appropriate to use urgent care or emergent care. • Prescribe exercise and self-management programs that address education, how to actively identify challenges and solve problems associated with their illness.
Bacterial pneumonia	
Urinary tract infection	
Cellulitis	
Pressure ulcer	

Tips and Best Practices to Close Care Gaps After Hospitalization:

Facilitate a safe discharge plan that includes:

- Clear post-discharge instruction
- Medication reconciliation that includes the patient's pre- and post-admission medications
- Ensure patients understand their medications and their medication instructions
- Schedule the patient's seven-day follow-up before leaving the hospital
- Implement a robust home health care program engaging the patient and family/caregivers
- Ensure a smooth transition of care
- Complete a post-discharge call within a specified time frame to assess their condition and answer any questions

At the seven-day follow-up appointment

- Review the instruction given at discharge
- Review medications, any changes and instructions
- Make sure the patient has filled their post-discharge prescriptions
- Ensure the patient schedules their next follow-up appointment



For more information about Medicare Star Ratings measures, go to the provider portal. For National Committee for Quality Assurance (NCQA) HEDIS® technical specifications information, visit ncqa.org.

- Nurse Advice Line **1-800-919-8807**
- If you have any questions about WellCare's Care Management Services, please call WellCare at **1-855-538-0454**.

