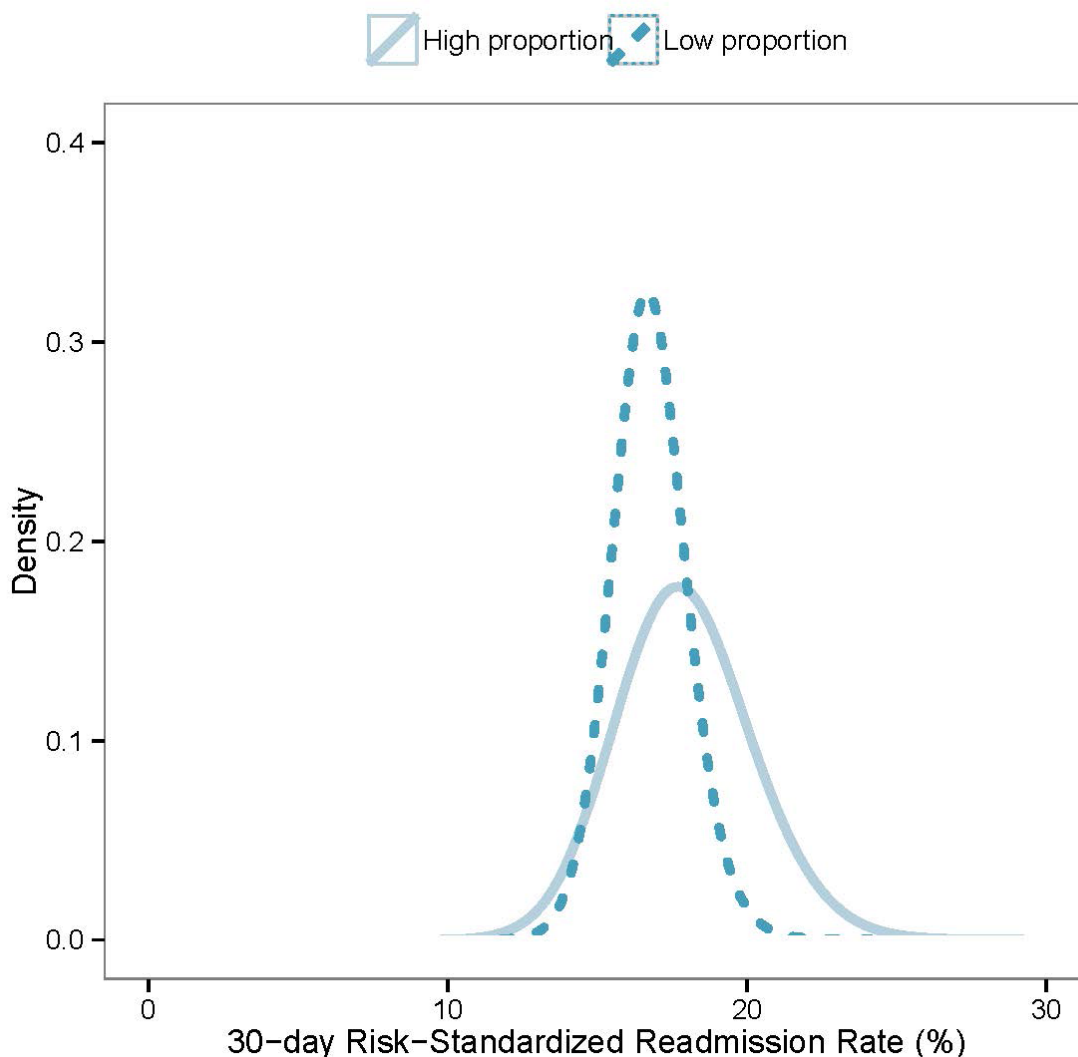


► **Performance on the pneumonia readmission measure:** Hospitals that serve high and low proportions of African-American patients.

The Centers for Medicare & Medicaid Services (CMS) periodically investigates select hospital practices that may impact a hospital’s performance on the following readmission measure: hospital-level 30-day risk-standardized readmission rate (RSRR) following pneumonia [1]. The pneumonia readmission measure includes Medicare fee-for-service (FFS) beneficiaries aged 65 or older and assesses the occurrence of unplanned readmission for any cause within 30 days after the date of discharge from hospitalization for pneumonia [2]. The pneumonia readmission measure has been publicly reported on [Hospital Compare](#) since 2009 and has been included in the Hospital Readmissions Reduction Program (HRRP) since 2012 [3, 4]. For 2016 public reporting, the pneumonia readmission measure cohort has been expanded to include aspiration pneumonia and non-severe sepsis patients [2].

FIGURE I. Distributions of pneumonia RSRRs (%) for hospitals with the lowest and highest proportions of African-American patients, July 2012-June 2015.



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Variation in RSRRs reflects differences in performance among hospitals; lower RSRRs suggest better quality and higher RSRRs suggest worse quality. To understand how caring for African-American patients might impact a hospital's RSRR, we examined RSRRs among hospitals with high and low proportions of African-American patients. We compared the pneumonia RSRRs for the 850 hospitals with the lowest overall proportion of African-American Medicare FFS patients (0% of a hospital's Medicare FFS patients) to the 428 hospitals with the highest proportion of African-American Medicare FFS patients ($\geq 21.9\%$ of a hospital's Medicare FFS patients) for the July 2012 – June 2015 reporting period. We defined hospitals with the lowest and highest proportions of African-American patients as those that fall within the lowest and highest deciles of all hospitals with 25 or more qualifying admissions. The proportion of African-American Medicare FFS patients for each hospital was determined using the Medicare Part A Inpatient Claims from 2014. All hospitals with 0% African-American patients were included in the lowest decile. To ensure accurate assessment of each hospital, the pneumonia readmission measure uses a statistical model to adjust for key differences in patient risk factors that are clinically relevant and that have a strong relationship with the readmission outcome [2].

TABLE I. Distributions of pneumonia RSRRs (%) for hospitals with the lowest and highest proportions of African-American patients, July 2012-June 2015.

	Pneumonia RSRR (%)	
	Lowest proportion (0%) African-American patients; n=850	Highest proportion ($\geq 21.9\%$) African-American patients; n=428
Maximum	22.2	24.7
90%	18.0	20.1
75%	17.3	18.8
Median (50%)	16.7	17.7
25%	16.2	16.9
10%	15.7	16.0
Minimum	13.3	14.5

The median pneumonia RSRR for hospitals with the lowest proportion of African-American patients was 16.7% (interquartile range [IQR]: 16.2%-17.3%; Figure 1 and Table 1). The median pneumonia RSRR for hospitals with the highest proportion of African-American patients was 17.7% (IQR: 16.9%-18.8%; Figure 1 and Table 1).

Hospitals with the lowest proportion of African-American patients had a median pneumonia RSRR that was 1.0 percentage points lower than hospitals with the highest proportion.

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