

Holiday Impact on Inpatient Admissions

INTRODUCTION

The winter holidays can often be disruptive to a patient's continuity of care, particularly to patients living with chronic wounds who often require regular and consistent visits and/or procedures. While many may think that skipping a few visits or postponing care for a few weeks is harmless, analysis on claims data from The Centers for Medicare and Medicaid Services (CMS) suggests skipping visits increases the risk of being admitted into the hospital.

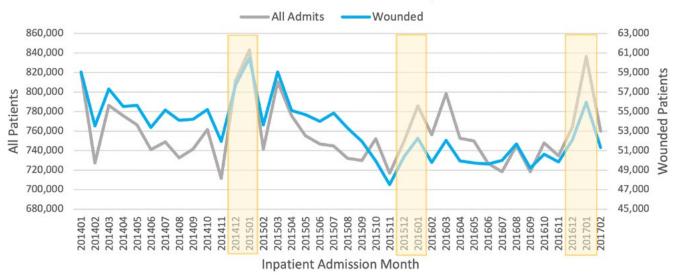
METHODS

Patients with a wound diagnosis in inpatient and outpatient CMS facility claims from January 2014 to February 2017 were identified. The number of unique patients admitted each month was quantified. Additionally, patients who received an outpatient wound care procedure (e.g., skin substitutes, compressions, excisional debridement, hyperbaric oxygen treatment, open wound (selective) debridement) were identified as well as the time between their subsequent wound care procedure(s).

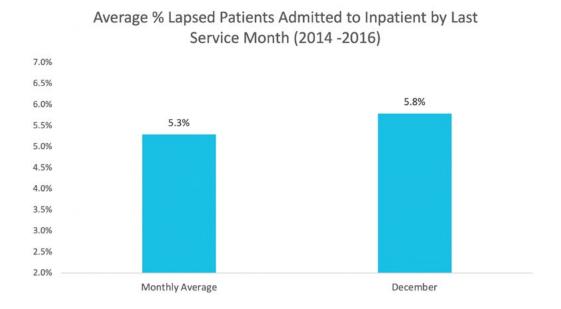
RESULTS

When examining the overall number of patients admitted in a given month, there are noticeable spikes in January each year. This trend is similar for patients with wounds.

Number of Patients Admitted by Month



We also examined outpatient wounded patients who appear to have lapsed or discontinued wound care (defined by having a gap of 30 or more days between wound care procedures) and grouped them by the month of their last service prior to the lapse. Within these patients, those whose last wound care procedure was in December had a significantly higher percentage (p < 0.01) of those admitted to inpatient care within 10 to 30 days of their most recent service compared to those who lapsed in other months. This is especially concerning considering the percent of patients that quit treatment for non-medical reasons in Healogics $^{\circ}$ Wound Care Centers $^{\circ}$ is typically the highest in December, averaging a rate of 10.0% versus 8.9% for the remaining months of the year (averages from 2015 to 2018; statistically significant at p < 0.01).



DISCUSSION

The winter holidays present a unique combination of factors that can impact patients' continuity of care. Patients with wounds require follow-up care but many factors cause them to miss appointments, including vacations, travel, family obligations, provider vacations, reduced transportation availability, cost and reduced cash flow during holidays. Social determinants of health also factor into a patient's path to healing, which includes characteristics such as socioeconomic status, education, neighborhood and physical environment, employment and social support networks.

There is evidence to suggest that, regardless of cause, more patients are admitted to acute care during this time, and this is especially true in wounded patients who have ceased wound care during this critical period.

To avoid patients being admitted to the hospital and miss time with loved ones, we must focus on helping patients keep their appointments at the end of the year, with as few disruptions to their care as possible.

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