An Analysis of Psychosis Readmissions: Payer Class Differences

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Psychosis is a category of psychiatric symptoms and disorders characterized by “a loss of contact with reality.” A small proportion of the population in the United States is affected by psychosis; however, it accounts for the second largest number of hospital readmissions (unexpected returns to the hospital within 30 days of discharge) for individuals under the age of 65, after childbirth-related readmissions. Hospital readmission data provides information that can be used for quality improvement. Little research has been completed to investigate the cause of high rates of psychosis-related readmissions, but it is a known problem in the mental health field that needs to be addressed. The purpose of this study is to identify associations for the high readmission rates for patients diagnosed with psychosis. Preventable admissions data was obtained from a hospital system in the south and analyzed using SAS frequency analyses to investigate insurance provider, admission source, disease severity, and discharge disposition. The study identified a significant relationship between a patient’s insurance provider and disease severity in the sample. Medicare admissions were found to have higher levels of disease severity than Medicaid patients. This was unexpected due to the requirements of each program. Because the Medicare program provides incentives for early discharge, this may lead to an increased risk of readmissions for Medicare patients. Future research should address the causal relationships between these findings and identify possible solutions within the mental health care system to help improve quality of care for patients.

Research advisor Steven Witz says, “The Regenstrief Center for Healthcare Engineering at Purdue University is pleased to have had the opportunity to work with Haylei Lorca. Her interests have extended our research in preventable hospitalization to include behavioral health conditions, and her research illustrates the importance of care coordination within the healthcare delivery system to improve patient outcomes and reduce repeated hospitalizations.”


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