

**Bureau of Managed Care
Managed Care Organizations
Policy / Procedures**

General Contract Monitoring

Hospital Readmission

Pursuant to [89 Ill. Adm. Code 152.300](#), related to Adjustment for Potentially Preventable Readmissions, the Department is requiring the MCOs to update their current readmission policies. In addition to the readmission criteria defined in 89 Ill. Adm. Code 152.300 (d), the Department is providing the attached written guidance regarding what is to be included in the MCOs readmission policies.

Hospital Readmission Guidelines

The MCO shall utilize the following in developing their Hospital Readmission Policies:

1. Definition of a readmission: A readmission is defined as a subsequent inpatient readmission within 30 days after discharge, or as specified by state regulations or provider contracts, that is clinically related to the initial admission and is determined to be a Potential Preventable Readmission;
2. Process MCO shall use to conduct a readmission review, including adjudication and adjustment of claims, for applicable hospital stays when a readmission occurs at the same hospital within 30 days;
3. Limit readmissions to those occurring at the same hospital or within the same hospital system;
4. Prohibit deeming a hospital stay a readmission due to shared responsibilities, such as inadequate care coordination and poor discharge planning; and
5. Exclude from readmissions criteria all the conditions excluded under the FFS PPR policy: patient left AMA, planned readmissions, metastatic malignancy, multiple traumas, burns, neonatal and obstetrical, sickle cell anemia, certain HIV DRGs, alcohol or drug detoxification, behavioral health related primary diagnosis at discharge, non-acute admissions (SNF, IRF, LTACH), and transfers from one acute care hospital to another (89 Ill. Adm. 152.300(d)(2)).

Policy History
General Contract Monitoring
Reporting the Death of a Member

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MCO Policy Guidance
MCO Policy Update

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Revision Approved

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