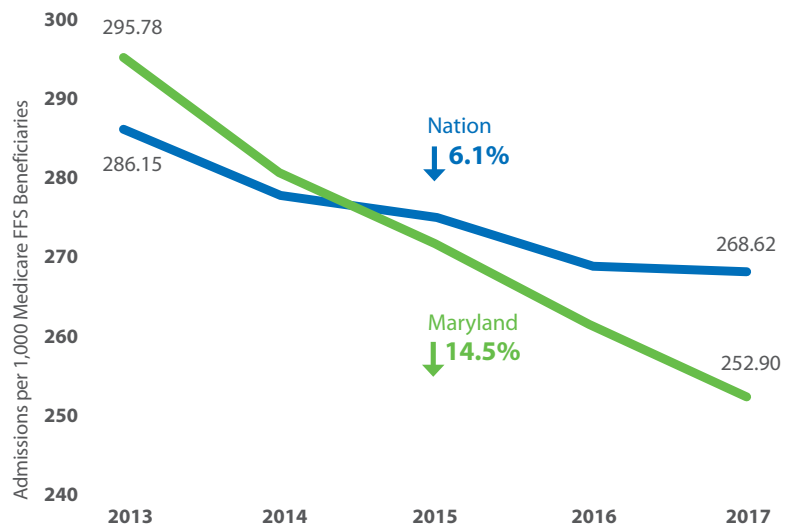


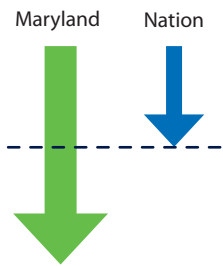
Maryland's Hospitals Reduce Admissions and Readmissions Faster Than the Nation

Maryland's hospitals are leading efforts to transform care across the state. They help individuals manage chronic conditions as outpatients and coordinate continuing care with skilled nursing facilities and other non-acute care providers. Importantly, hospitals also have successfully lowered the number of Medicare fee-for-service beneficiaries who die within 30 days of admission. *All statistics here refer to Medicare fee-for-service beneficiaries; Maryland has more than 950,000.*

Reducing Medicare Inpatient Admissions



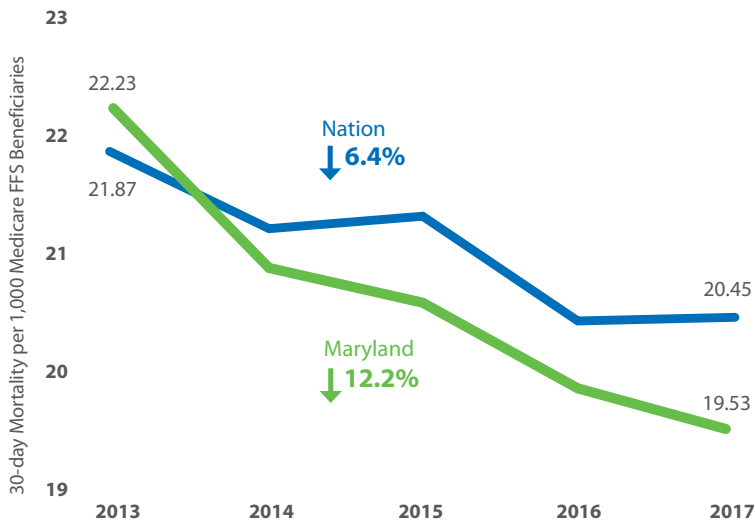
SOURCE: MHA Analysis of Medicare FFS Claims, CMS Chronic Conditions Data Warehouse (CCW)



Maryland's hospitals and health systems reduced inpatient admissions more than two times faster than the nation.

Decreasing Mortality

The percentage of Maryland beneficiaries who died within 30 days of admission declined twice as quickly as the nation.

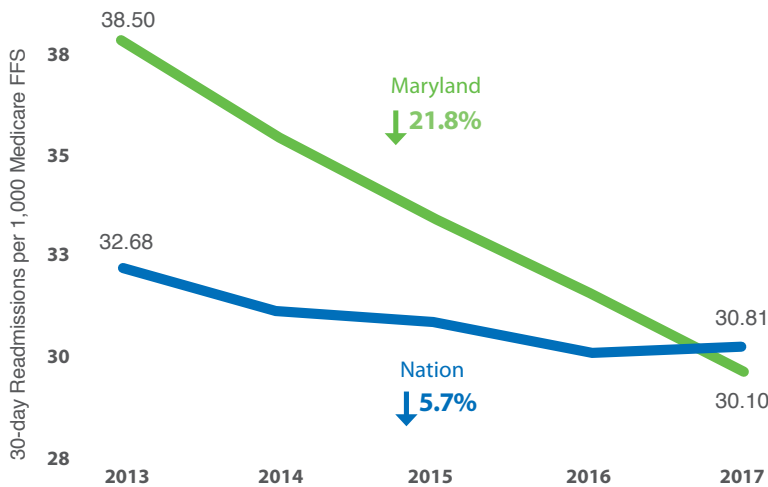


SOURCE: MHA Analysis of Medicare FFS Claims, CMS Chronic Conditions Data Warehouse (CCW)
*30 day mortality is defined as death from any cause within 30 days after the index admission date

Despite patient complexity rising by 7.5%, hospitals reduced admissions and mortality rates

Dropping Readmissions

Since the inception of the Maryland Model in 2014, the state's hospitals have cut readmissions for all payers. Readmission rates fell four times faster than the nation.

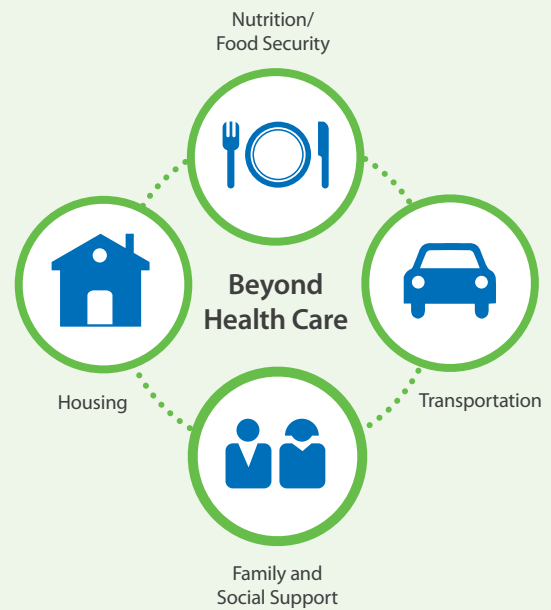


SOURCE: MHA Analysis of Medicare FFS Claims, CMS Chronic Conditions Data Warehouse (CCW)

Looking Ahead: Unmet Needs

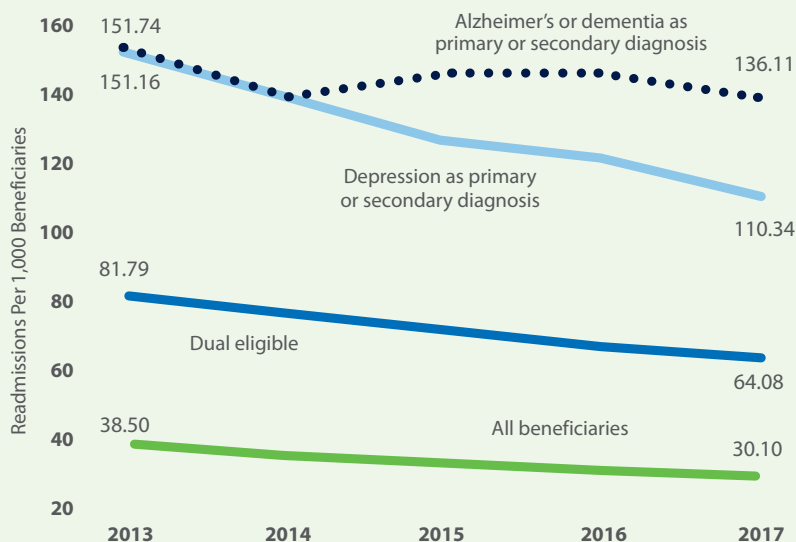
Higher readmission rates for subgroups reveal some needs are not being met.

To make the Maryland Model even more successful, hospitals now look to expand partnerships to support the health of people having complex medical or social needs. Vulnerable Medicare beneficiaries, such as those who are also eligible for Medicaid (dual eligibles) and people with primary or co-occurring mental health conditions, often need additional care and wrap-around supports not readily available to all.



Opportunities with Complex Patients

Even though readmission rates are declining across Maryland, rates for people who experience mental health conditions and those who are dually eligible remain high.



SOURCE: MHA Analysis of Medicare FFS Claims, CMS Chronic Conditions Data Warehouse (CCW). Dual-eligibility status was obtained from the MBSF - Base (A/B/C/D) and condition categories (Alzheimer's/dementia and depression) were obtained from the MBSF - Chronic Conditions Segment

All sectors share responsibility for attacking the root causes:

- Find new ways for payers, hospitals, doctors, state and local government, and community partners to work together to address the non-medical needs impacting patients' health
- Consider the unmet medical and social needs of subpopulations when measuring performance and setting targets