

Readmission Rates within Multi-Hospitals Rural Hospitals within the United States

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Abstract:

Background: Healthcare represents nearly 18% of the entire U.S. economy and currently is one of the few bright spots in terms of job growth. The rural healthcare system serves about 20 percent of the population in the U.S. However, they experience considerable inequality in access to healthcare personnel and infrastructure, which impedes the distribution of fair care. The COVID-19 pandemic also revealed more flaws with rural territories in the U.S. and around the world, including Ecuador, attempting to perform testing and vaccination, but not being able to do so due to insufficient funds.

Objective: This presentation explores the role of hospitals and MHS in the U.S. healthcare system, particularly the issues encountered by their rural hospitals, including infrastructure issues effect of readmission rates.

Methods: The research question is to examine the effect of rural hospitals' organizational structure—as measured by level of centralization, i.e., centralized, decentralized and moderately centralized—on patients' quality of care. The specific research questions examined are: how does the organizational structure of rural hospitals affect 30-day readmission and mortality rate for patients previously treated for or heart attack (acute myocardial infarction, AMI), congestive heart failure (CHF), and pneumonia.

The data for this study were obtained directly from the American Hospital Association (AHA) Annual Survey and the American Hospital Directory (AHD) dataset. A total of 1984 member hospitals within the AHA annual survey met the selection criteria. These hospitals were classified as located in a rural area; there were no hospitals located in an urban area. Rural standalone hospitals and those that are part of a multi-hospital system were selected.

Results: This study found a significant association between the quality indicator "30-day readmission rate for heart failure." Within this study, centralized MHS was found to have the lowest 30-Day readmission rate for heart failure, a rate of 23.65%. This is compared to 24.75% for moderately centralized and 24.65% for decentralized MHS.

Keywords:

Readmission Rates, Rural Hospitals, Multi-Hospitals Systems.