

Zing Health

TITLE: 30-DAY READMISSION PROCESS

POLICY #: UM008_30 Day Readmission Process
EFFECTIVE DATE: 10/1/2021
POLICY DEPARTMENT: Utilization Management
AFFILIATED DEPARTMENTS: Claims
AUTHORIZED OWNER: VP, Clinical Operations

POLICY STATEMENT: Zing Health seeks to promote clinically effective, cost efficient, and improved health care through appropriate and safe discharges of our members

PURPOSE: The purpose of this policy is to establish guidelines and define a process to reduce avoidable readmissions within 30 days after inpatient hospital discharge. As part of the Affordable Care Act (ACA), Congress mandated that Centers for Medicare and Medicaid Services (CMS) reduce hospital readmissions through certain payment initiatives. Preventable readmissions put our members at risk for iatrogenic and other unnecessary complications, including death, create hardships for members and caregivers, and serve as one marker of poor healthcare outcomes.

SCOPE: All Medicare Advantage Prescription Drug (MAPD) and Special Needs Plans (SNP)

APPLICATIONS: Salesforce/Health Rules Payor

DEFINITIONS:

- **Index Admission** - The initial hospital admission from which the readmission is measured.
- **Medicare Advantage Prescription Drug (MAPD) Plans** - All-in-one alternative to Original Medicare, combining Medicare Parts A and B (hospital and medical coverage) with Part D (prescription drug coverage).
- **Readmission** - The subsequent acute admission for the same patient within the defined period from the time of discharge from the index admission, with at least one day between the discharge and the new admission. Readmission occurs when a member is readmitted to the same or related facility within the defined timeframe from the index or previous admission for the same or similar symptoms/conditions, or for evaluation and management of the prior medical condition/symptoms.
- **Special Needs Plan (SNP)** - Provides benefits and services to people with specific severe and chronic diseases, certain health care needs, or who also have Medicaid.

- **Lifetime Limit** - Medicare has a lifetime limit of 190 days for inpatient care in a psychiatric hospital. This 190-day limit is for psychiatric hospitals specifically and does not apply to psychiatric care provided in a psychiatric unit within a general hospital. For care in a general hospital, there is no lifetime limit on the number of benefit periods, though standard coinsurance and lifetime reserve days rules still apply.

PROCEDURES: The health plan may review admission claims on a concurrent or post-service basis for acute care facility admissions which occur within the defined timeframe:

- After discharge from the same, or another facility within the same hospital system
- To another hospital operating under the same tax identification number as the first hospital
- For contracted and non-contract facilities
- When the readmission is for the same, similar, or related diagnosis as the initial admission

Once the potential readmission review is determined to be clinically related to the initial admission, further evaluation is performed to determine whether the readmission was potentially preventable. To determine if the readmission was potentially preventable, the Medical Director will consider multiple factors including medical necessity criteria, behavioral health issues, and if standards of care were completed post discharge. Members who have met their 190-day lifetime psychiatric benefit limit will have psychiatric services denied at a psychiatric hospital.

Concurrent Review:

The clinician examines the dates of a member's prior admissions and discharges to determine if readmission criteria are met. Medical records will be requested from both the initial and subsequent readmission. Zing Health makes reasonable efforts to gather all information needed to make accurate determinations of whether readmission is warranted. The plan documents all requests for information and maintains documentation within the case file. Zing Health will make at least two (2) attempts to obtain information from the provider on behalf of the enrollee. If it is determined that the stays are related, the plan will provide written notification of this to the admitting facility.

Notice of Action Requirements:

Zing Health provides the hospital with written notification of any decision to deny, in whole or in part, a service.

The Notice of Action must be in writing and must include:

- The action that Zing Health has taken or intends to take, and the effective date of that action
- The specific reason for the action, customized to the members circumstances
- A reference to the benefit provision, guideline, or protocol or other similar criterion on which the denial decision was based.
- Notification that, upon request, the hospital will be provided with additional resources to obtain information upon which the decision was based

- Notification will include instructions for reconsiderations, practitioner/provider appeal process, and other appropriate information regarding the decision.

SPECIAL INSTRUCTIONS:

Exclusions:

- Readmission unrelated to the initial symptoms/condition
- Readmission due to an unavoidable complication
- Admissions where member signs out Against Medical Advice (AMA) from the index admission
- Readmission due to unavoidable member non-compliance with the discharge plan
- Maternity related stays
- Planned readmissions to complete a course of treatment such as chemotherapy, or planned, staged, surgical admissions
- Behavioral health stays where the readmission was unavoidable

REFERENCES:

CMS/MMCM:	Affordable Care Act Section 3025 Social Security Act Section 1886(q)
CFR:	N/A
State Administrative Codes:	N/A
Contract Requirements:	N/A
Related Policies:	N/A
Related Desk Level Procedures or Job Aids:	N/A

POLICY HISTORY:

Policy Section (List the specific area or aspect of the policy being reviewed.)	Status of Change (Indicate whether there has been a change made or if no change is observed in the policy.)	Review & Update Date (Document the date when the policy was last reviewed and updated.)
N/A	N/A	10/1/2022
N/A	N/A	10/1/2023
N/A	N/A	10/1/2024

N/A	N/A	9/22/2025
All sections	Updated psychiatric admission procedures	9/29/2025

POLICY ATTACHMENTS: N/A