NEWS Release

Hospital of Saint Raphael

Yale-New Haven Hospital

Agency on Aging of South Central Connecticut

For Immediate Release

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Partnership of two New Haven hospitals and Agency on Aging of South Central Connecticut receives award to help reduce hospital readmissions

NEW HAVEN, CT – April 25, 2012 – A local coalition called the Greater New Haven Coalition for Safe Transitions and Readmission Reductions (GNH CoSTARR) is one of 30 community-based programs across the United States to date to receive an award from the Centers for Medicare & Medicaid Services (CMS) to improve the quality of care for Medicare patients and keep them from being readmitted to hospitals.

GNH CoSTARR is a partnership between Yale-New Haven Hospital (YNHH), the Hospital of Saint Raphael (HSR) and the Agency on Aging of South Central Connecticut (AASCC) that was formed in summer 2011. One of GNH CoSTARR's goals is to reduce the number of Medicare patients who are readmitted to the hospital within 30 days of a previous admission. Grace Jenq, MD, medical director of the YNHH East Pavilion, was applicant program director.

Building off past efforts, GNH CoSTARR will implement special care transition teams with registered nurses as care coordinators at YNHH and HSR and social workers from the Agency on Aging. Teams will be housed within the two hospitals and develop holistic, patient-tailored discharge planning to help the patient recover successfully upon discharge. The teams will work to improve communications between the hospitals and nursing homes, home health agencies, and primary care providers in greater New Haven, as well as support patients through their post-hospital transition, and also inform them about community resources.

"With better coordination and improved discharge planning and follow-up, patients are more likely to avoid readmission," said Thomas Balcezak, MD, YNHH chief quality officer and vice president, performance management. "This is a great example of how public-private partnerships can help improve the quality, safety and affordability of health care," he added. The Partnership for Patients is a CMS initiative which incorporates the Community-based Care Transitions Program, mandated by Section 3026 of the Affordable Care Act of 2010.

CMS hopes to reduce preventable errors in hospital settings by 40 percent and reduce hospital readmissions by 20 percent over a three-year period. Achieving these goals has the potential to save up to 60,000 lives, prevent millions of injuries and unnecessary complications in patient care, and save up to $50 billion for Medicare over 10 years.

"GNH CoSTARR can greatly help us improve the transitions from the hospital to post-hospital care," said Alan Kliger, MD, senior vice president and chief medical officer and chief quality officer at HSR. "This is a very positive step in how we care for patients and it is the direction health care is moving in this country."

"Successful transitions require the teamwork of the medical professionals and the community-based supports working with the older adult and their caregivers. The Agency on Aging is excited to be a part of this important initiative," added Neysa Guerino, executive director, Agency on Aging of South Central Connecticut.

The dedicated care transition teams will work with Medicare patients age 64 or older who have had a 30-day readmission or non-elective hospitalization in the last six months or have received their care at HSR's or YNHH's Primary Care Centers, Cornell Scott Hill Health Center, Fair Haven Community Health Center or a Project ElderCare Clinic. Other eligible patients include those who have no primary care physician, come from skilled nursing facilities or primary care practices with higher than average readmission rates.

As part of its two-year agreement with CMS, GNH CoSTARR will be paid a flat fee per beneficiary for helping to coordinate patient care after a hospital stay for each Medicare beneficiary who is at high risk for readmission.

For more information, visit: http://www.healthcare.gov/partnershipforpatients or http://go.cms.gov/caretransitions.

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GNH CoSTARR, *Greater New Haven Coalition for Safe Transitions and Readmission Reductions, is a partnership between Yale-New Haven Hospital, the Hospital of Saint Raphael and the Agency on Aging of South Central Connecticut, all based in New Haven, to reduce hospital Medicare readmissions. GNH CoSTARR partners have a long history of serving the area's vulnerable Medicare population and include many community-based groups on their advisory council: community health centers, skilled nursing facilities, adult day care centers, hospice care, senior housing.*

Yale-New Haven Hospital *is a 1,008-bed, not-for-profit hospital serving as the primary teaching hospital for the Yale School of Medicine. Yale-New Haven includes Yale-New Haven Children's Hospital, Yale-New Haven Psychiatric Hospital and Smilow Cancer Hospital. www.ynhh.org*

The Hospital of Saint Raphael *is a 511-bed community teaching hospital in New Haven affiliated with Yale School of Medicine. Since 1907, Saint Raphael's experienced physicians and other clinicians have offered the Greater New Haven community state-of-the-art technology, the most advanced procedures, and a comprehensive array of services. www.srhs.org*

The Agency on Aging of South *Central Connecticut is a private nonprofit organization incorporated in 1974 as one of five regional agencies on aging in Connecticut responsible for planning, coordination, advocacy and allocation of funds to social services and nutrition programs designed to meet the needs of those age 60 and older. www.aoapartnerships.org*