

September 2023 Barriers to Discharge Report

In hospitals across New Hampshire, there are patients in an inpatient bed medically cleared for discharge but unable to leave the hospital. These lengthy, non-medically necessary hospital stays are caused by a number of **barriers to discharge**. These barriers impact not only patients unable to leave the hospital but also patients whose care may be delayed due to lack of inpatient bed availability. Understanding why patients remain in an acute care setting longer than is medically necessary helps identify areas where improvements can be made to reduce the number of patients affected.

This September 2023 report is a snapshot of all patients on a single day during the first week of the month medically ready to be discharged but could not leave the hospital. This report summarizes the number of patients, how long they have been waiting, where they need to go, and what is causing delays. The data is derived from a survey of case management directors in New Hampshire hospitals. The intent is to provide insight into inefficiencies in the system to aid in policy and other efforts to remove these barriers to care.

September 2023 Summary



19 Hospitals Reporting



8,451 Medically unnecessary or "extra" days spent in the hospital ranging from 1 to **600** days per patient¹

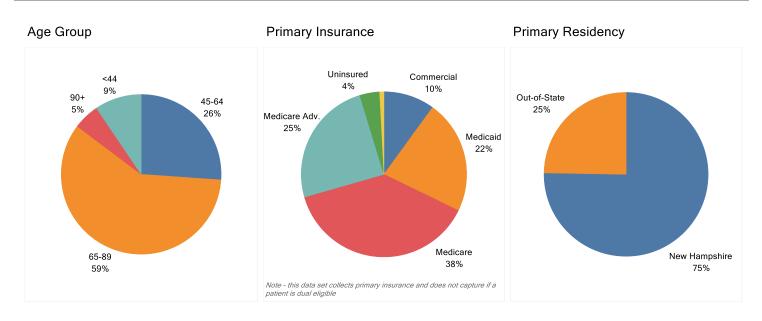


130 Patients in hospital after medical clearance for discharge



47 Patients in the ED waiting for an inpatient bed²

Demographics

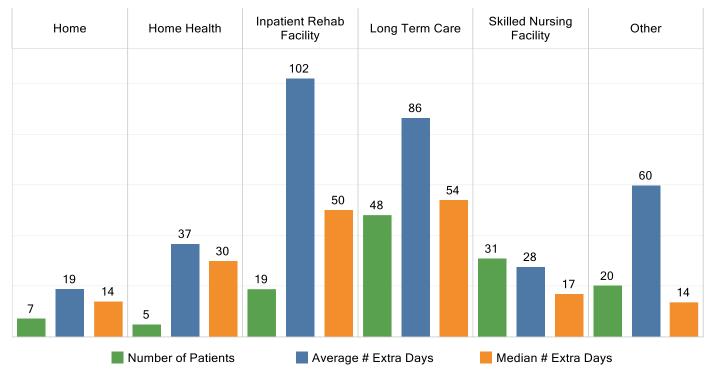


¹ Represents the current, cumulative "extra" days of the 130 patients included in this report.

² Source: Juvare. Represents average daily non-behavioral health ED holds among the participating hospitals.

Discharge Disposition

Hospitals will not discharge a patient until the patient is able to relocate to a setting that will meet their care needs.



Discharge Disposition

Barriers to Discharge

Each patient's experience is unique, but the most common barriers to discharge are reported below. Note, patients could be reported as having multiple barriers to discharge.

Barriers to Discharge by Median Extra Days in Hospital

Barrier Category	Barrier to Discharge	Patients						Med	ian D	ays				
11	Homeless	14								55				
Housing Concerns	Family/caregiver unwilling/unable	38							48					
Concerns	Home modification needed	3				27								
	Insurer does not provide post-acute coverage	2								e	63			
	Waiting on Medicaid Determination	32								54				
	Other Insurance	12				22								
Insurance	Inadquate post-acute network	1		1	4									
	Denial of request for authorization from insurer	4		9										
	Delayed response from insurance	5	5											
	Lack of Secondary Insurance	1	3											
	Bariatric	4												98
Need for	High acuity (e.g. one-to-one)	4					3	9						
Specialized Services	Dialysis	6					32							
Octvices	Specialized BH/SUD services	11				27								
Other	Lack of guardianship/ conservatorship/ healthcare	30								54				
	Lack of access to necessary community services	31						40						
	Staffing/capacity contraints at post-acute care facilit.	. 44				25								
	Transportation Unavailable	5		11										
			0	10	20	30	40)	50	60	70	80	90	100

Insurance and Discharge Disposition

A patient's insurance status and associated policies can have an impact on the length of stay at a hospital.

Insurance	Disposition	Patients					Med	dian "Ext	tra" Da	ys in H	ospital				
Commercial	Inpatient Rehab Facility	1				60									
	Long Term Care	4				59									
	Other	2	9												
	Skilled Nursing Facility	6			39										
Medicaid	Home	4	8												
	Home Health	2				56									
	Inpatient Rehab Facility	8			40										
	Long Term Care	10				6	7								
	Other	3	8												
	Skilled Nursing Facility	2		2	28										
Medicare	Home	3		2	7										
	Home Health	2		2	29										
	Inpatient Rehab Facility	6								135					
	Long Term Care	17			32										
	Other	12		23											
Medicare Adv.	Inpatient Rehab Facility	4						96							
	Long Term Care	13		15											
	Other	3	1	1											
	Skilled Nursing Facility	10		20											
Uninsured	Home Health	1		15											
	Long Term Care	3												2	23
	Skilled Nursing Facility	12		15											
VA	Long Term Care	1	5												
	Skilled Nursing Facility	1	6												
			0 2	20	40	60	80	100	120	140	160	180	200	220	240

Insurance and Discharge Disposition

Patient Abandonment

Hospitals report an increase in "patient abandonment" in which a friend or family member leaves a patient at the Emergency Department and refuses further involvement.

A Snapshot of Abandoned Patients

