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Who Has Avoidable Hospitalizations and Who Pays the Cost?

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This study focused on potentially avoidable hospitalizations (PAHs), which according to Kate Archambault and Amelia Nell, are “conditions that can be typically prevented with access to high quality outpatient care that provides early intervention and limits complications and disease severity.” Archambault and Nell note that “[t]he prevalence of PAHs in a community commonly serves as an indicator of individuals’ access to effective primary care and care coordination services” and that the presence of PAHs “impose[s] unnecessary costs on both public and private payers.”

Archambault and Nell modeled their research on a national study to examine differences in the occurrence of PAHs by primary payer. Importantly, they focused only on non-pregnancy related discharges from Virginia hospitals for adults ages 18 – 64 in 2015. They found that PAHs accounted for nearly 12% of Virginia hospitalizations and \$951 million in charges. In addition, they found that about 37% of “all avoidable hospitalizations among 18-64 year-olds were to Medicaid and uninsured patients.” Contrary to the national study results, they also found that about “1/7th of all hospitalizations for Medicaid patients aged 18-64 were avoidable” compared to only about 1/12th of all hospitalizations for privately insured patients of the same age. Finally, they found that the “rate of avoidable hospitalizations per 100,000 population was 2.5 times higher for Medicaid patients than for the uninsured.”