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Solventum™ Potentially Preventable Returns to the Hospital (PPRH) Classification System

- Identifies potentially preventable unscheduled returns to the hospital that occur after an inpatient stay for all patient populations
- Informs value-based care, quality initiatives and performance-based payment
- Enables government health programs, health plans and health systems to make fair performance assessments

Defining a return to the hospital

The Solventum PPRH Classification System identifies encounters that meet these criteria:

- An unscheduled hospital readmission, emergency department (ED) visit or ED observation stay
- Clinically related to a prior admission
- Potentially preventable
- Occurs within a user-defined window (e.g., 7, 15 or 30 days after discharge)

The challenge: Incomplete post-discharge visibility

Traditionally, healthcare organizations have used preventable hospital readmissions to measure the quality of inpatient care, but this metric tells only part of the story. ED revisits and observation stays are also critical drivers of resource utilization and outcomes. Solventum analysis shows that factoring in unscheduled ED stays tends to double the average preventable hospital readmission rate, though results vary by payer. Without this broader view, organizations can miss opportunities to improve quality, enhance the patient experience, improve patient safety and reduce avoidable high-cost events.

The solution: One metric that reveals drivers of avoidable hospital use

The Solventum PPRH Classification System uses clinically precise criteria to identify returns to acute care that could potentially have been prevented through better inpatient care, discharge planning and follow-up coordination. To do this, the system uses diagnoses and procedure data to determine whether a readmission, ED revisit or ED observation stay is clinically related to a prior admission. Solventum PPRH preserves detailed views of inpatient readmissions and ED visits for deeper analysis.

Solventum PPRH provides plans, government health programs and health systems with a comprehensive, clear and actionable view of post-discharge performance. Results can be compared across health systems, regions or plans to support fair reporting and help develop value-based payment models. Hospitals and health systems can also look at performance across departments and discharge types to identify improvement opportunities.

Integration with Solventum solutions

Customers of **Solventum™ Grouper Plus Content Services (GPCS)** and **Solventum™ Core Grouping Software (CGS)** can have Solventum PPRH information delivered to their system or database application.

The Solventum PPRH model builds on the foundation of the **Solventum™ All Patient Refined Diagnosis Related Groups (APR DRGs) Classification System** for its logic, specifications and risk-adjustment methods.

Gain additional insights into potentially preventable events by combining with:

- **Solventum™ Potentially Preventable Complications (PPCs) Classification System**, which identifies potentially preventable inpatient complications
- **Solventum™ Population-focused Preventables (PFPs) Classification System**, which identifies potentially avoidable hospital admissions, ancillary services and ED visits at a population level

Features

- Reflects all patient populations, including pediatric and maternity
- Offers advanced risk adjustment based on discharge conditions and additional risk factors related to age, mental health or substance abuse
- Accommodates a wide range of conditions
- Allows users to define the post-discharge window (e.g., 7, 15 or 30 days)
- Provides reason codes that explain whether or not an event was considered potentially preventable
- Enables the creation of standard or customer-specific benchmarks for fair, credible comparisons

Benefits

- **Comprehensive:** Plans, health systems and regulators can gain a complete post-discharge picture of all potentially preventable returns to the hospital.
- **Actionable:** The ability to identify specific drivers of avoidable utilization informs targeted interventions, quality improvement initiatives and value-based contracts.
- **Fair and defensible:** A single, unified metric for adverse post-discharge events enables defensible benchmarking and accurate performance comparisons at the hospital, service line or plan level.

Contact Solventum today

For more information about Solventum PPRH or to activate these insights in your solution, contact your Solventum sales representative or call us at 800-367-2447. Visit us online at **Solventum.com**.

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