

++

Breaking the Pattern:
Driving Initiatives
to Safely Transition
Patients Across the
Care Continuum

Contents **Highlight**

01

**Understanding the
Current State of the
Issues**

02

**Quantifying the
Problem and
Improvement Goals**

03

**Noting Reasons
for Delay in Patient
Transitions**

04

**Celebrating Project
Outcomes and Data**

05

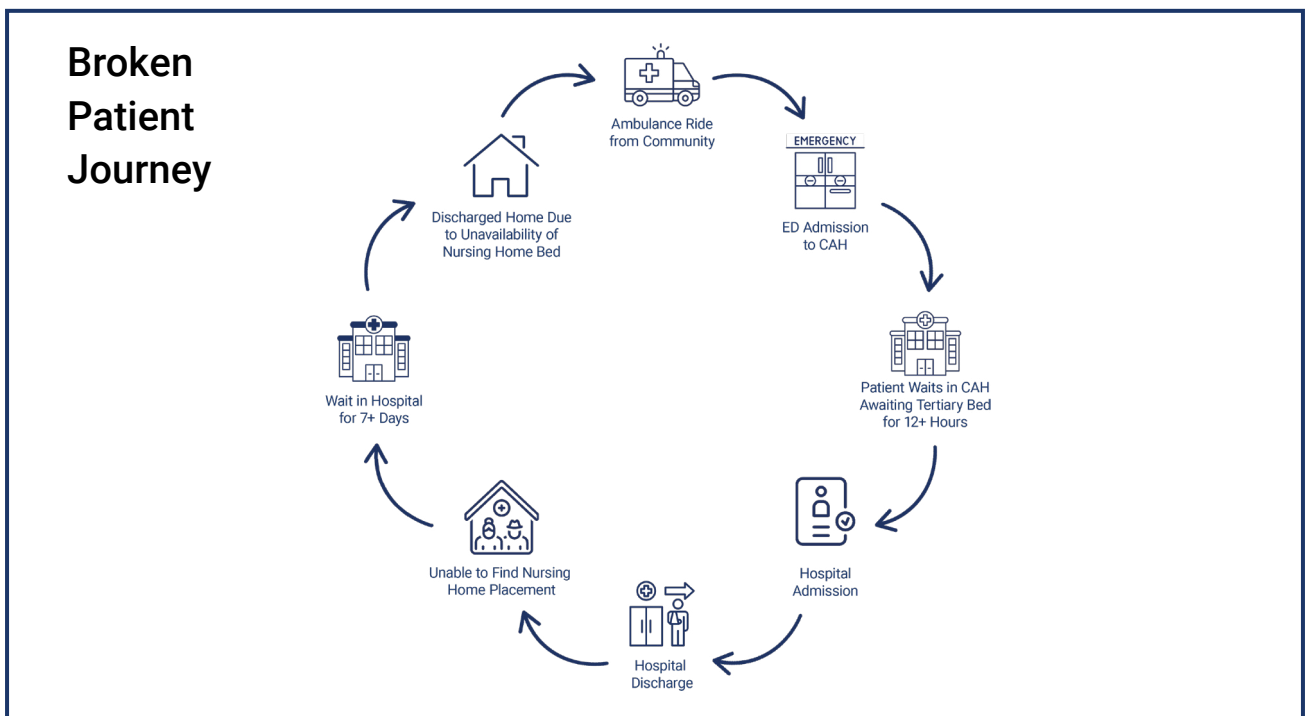
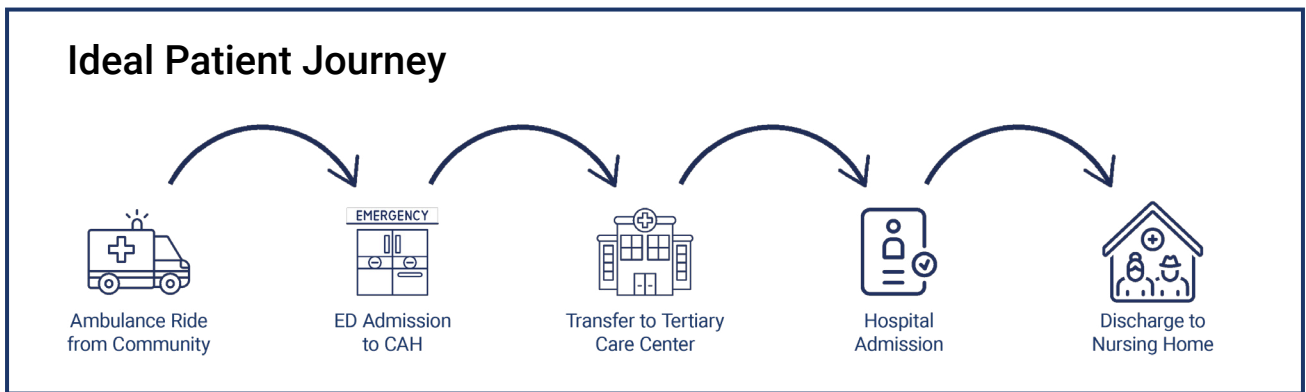
Planning Next Steps

Care Continuum Journey

Patients across Nebraska are unable to be discharged from hospitals to the appropriate level of care – after being medically cleared for discharge

The Nebraska Hospital Association and its members have identified challenges with post-acute patient placement. Delays in patient discharges to the post-acute care setting have become increasingly challenging for Nebraska hospitals. While difficult to place patients is not a new issue, the COVID-19 pandemic exacerbated the situation and created a high rates of patients who are ready for discharge from hospitals but cannot find a bed at the appropriate post-acute care setting.

Patients being held in hospitals results in an ineffective system that cannot serve communities appropriately. It affects hospitals of all sizes and puts patients at risk for unsafe transitions that lead to longer stays and a higher chance for poor patient outcomes..



Addressing patient transfer delays and optimizing hospital efficiencies is an ongoing priority for the NHA and Nebraska hospitals. The Nebraska Hospital Association created this report to provide an in depth look at the engagement and improvements from partners across the state assisting in appropriate high quality and safe patient transfers.

Quantifying the **Problem**

In January 2022, the NHA Transitions of Care Council was developed with key stakeholders from across the care continuum. Representatives from large systems, critical access hospitals, rural hospitals, nursing homes, rural health clinics, assisted living facilities, and Nebraska DHHS joined together to collaborate and drive improvement efforts.

The NHA has been surveying hospitals monthly to understand and quantify patient transition challenges. A monthly throughput survey was distributed to all members with an 82% average response rate collecting valuable information from September 2022 to September 2024. The data shows that on average there are **161 patients** per day waiting greater than 7 days for post-acute placement. While hospitals provide safe and effective care to all patients, it often is not the most appropriate setting for patients to be in. This issue drives increased health care costs while creating inefficiencies in care and causes backup for hospital emergency department's and admissions.

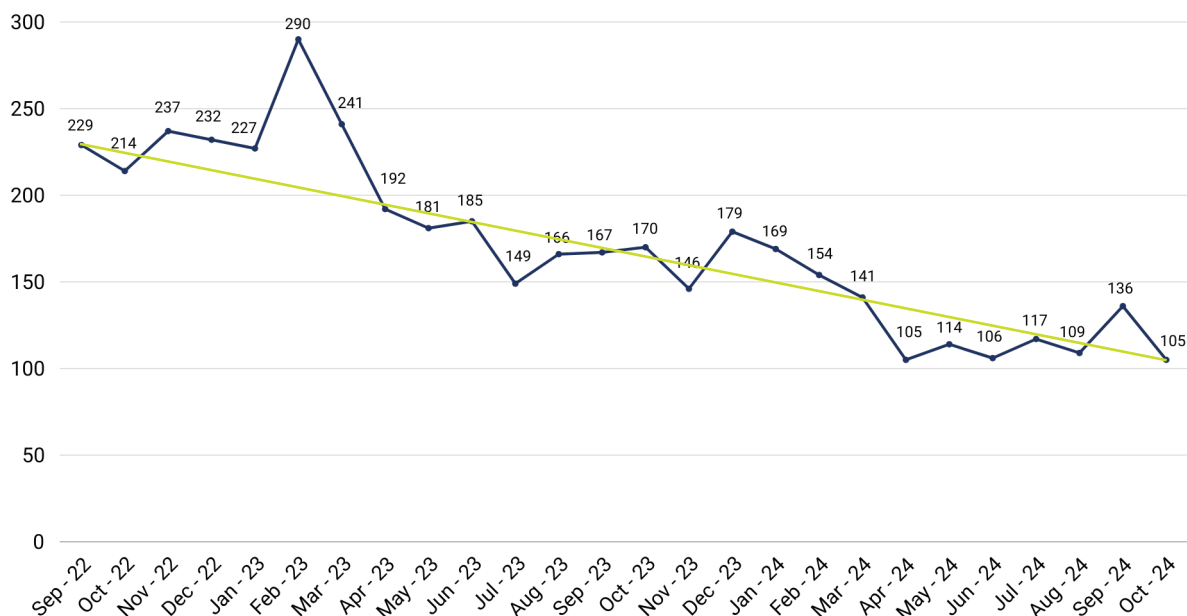
Over the past 2 years, 4,356 patients have been held in hospitals after being medically cleared for discharge.

September 2022-September 2024

Statewide dedicated efforts have indicated a 41% improvement rate in patient discharge delays since September 2022.

Average number of patients awaiting discharge >7 days in Nebraska Hospitals

September 2022-September 2024 | point in time data

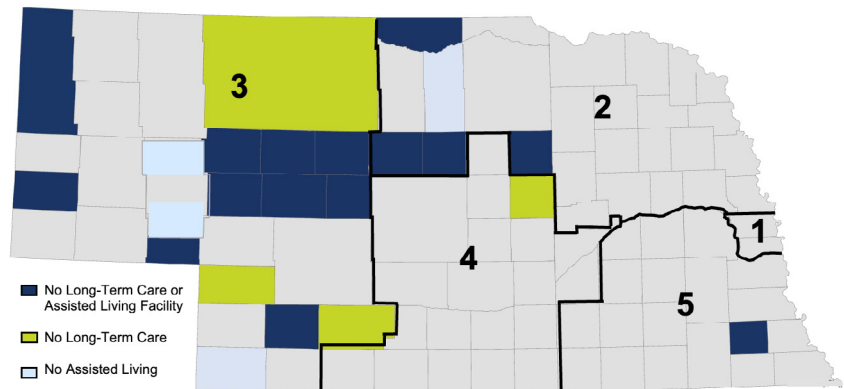


Percent of Patients Awaiting Discharge for more than 7 days by post-acute care setting.

September 2022 – September 2024

Placement Disosition	September 2022 - September 2024	YOY % Difference
Skilled Nursing Facility	40%	17% Improvement
Long-Term Care	34%	9% Worsening
Behavioral Health	6%	No Change
Home Health	5%	20% Improvement
Assisted Living Facility	6%	40% Worsening
Long-Term Care Hospital	5%	20% Worsening
Acute Rehab	5%	No Change
Other	6%	33% Improvement

Post-acute closures across Nebraska are perpetuating the significant concern of post-acute deserts. In 2024, two Nebraska nursing homes and five Nebraska assisted living facilities have closed. The complexity of these closures is difficult to navigate, and the negative impact is the far reaching - forcing patients and families to drive hundreds of miles to visit their loved ones that live in nursing homes in other communities.

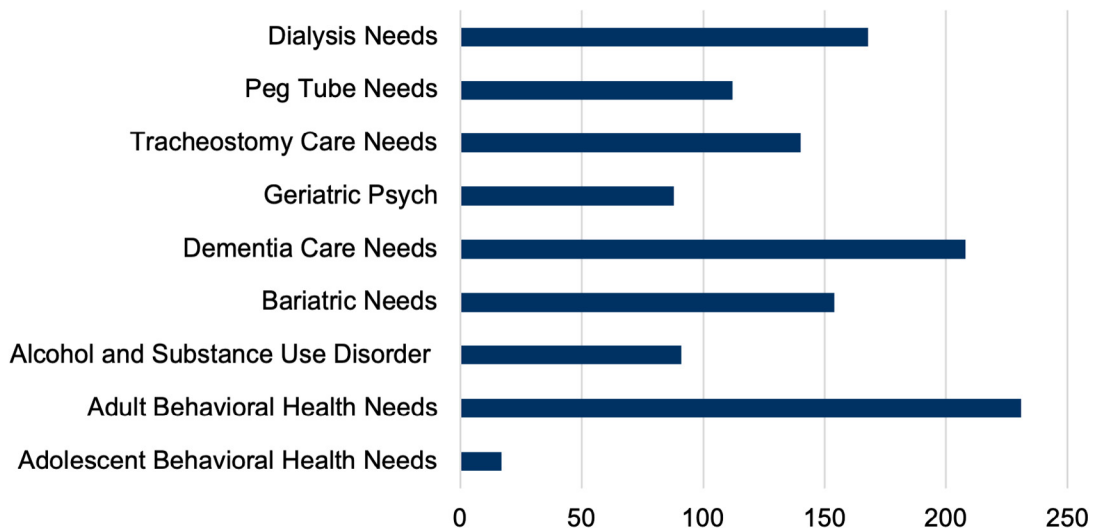


71% of patients awaiting placement need skilled nursing or long-term care.

September 2024 data

Most Common Reasons for Delay in Placement

September 2022-September 2024 data



Additional Reasons for Delay in Patient Transitions

Workforce Shortages

Workforce shortages in health care continue to create barriers and have emerged as a critical challenge, significantly impacting patient care and system efficiency. The demand for health care services continues to rise due to an aging population and an increase in chronic diseases, yet the supply of qualified professionals is dwindling. Factors such as burnout, inadequate staffing levels, and educational bottlenecks contribute to this imbalance. Moreover, rural and underserved areas face more acute shortages, exacerbating health disparities.

Hemodialysis

The complexity of managing hemodialysis patients, including addressing their comorbidities and ensuring proper care coordination, underscores the need for a well-resourced health care system. Hemodialysis is a critical component of life saving health care for individuals. The growing prevalence of diabetes and hypertension contributes to an increased need for this service. With the limited number of Nebraska of dialysis treatment centers, finding a dialysis schedule that is suitable for patients is challenging. Post-acute facilities are faced with the difficult task of organizing patient appointments and transportation to ensure needs are met.

Transportation

Transportation needs in health care are crucial for ensuring patients access to necessary medical services, particularly for those in underserved or rural areas. Health care organizations, patients, and communities are facing barriers to transportation that are impacting patient access and outcomes. This issue affects all health care entities: pre-hospital transport, inter-facility transport, post-acute transport, with the goal of getting patients where they need to be in a timely and efficient manner.

Post-Acute Facility Closures

Nebraska post-acute care closures raise significant concerns regarding the availability of essential services for patients recovering from hospital stays. Facilities such as skilled nursing homes, rehabilitation centers, and long-term care facilities have faced financial pressures, regulatory burden and staffing shortages, leading to closures or reduced capacity. These closures create a gap in care for individuals who require continued support after hospitalization, often forcing them to travel greater distances for services or to remain in hospitals longer than necessary. This exacerbates the challenges faced by vulnerable populations, including the elderly and those with complex medical needs.



NINE Nebraska nursing homes closed in 2022 which was the **SECOND** highest closure rate in the nation



TWO Nebraska nursing homes and **FIVE** assisted living facilities closed in 2024.

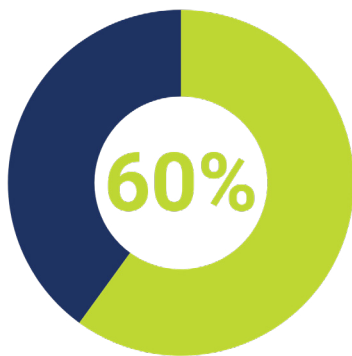
Prior Authorization Delays

Prior authorization delays for nursing homes pose significant obstacles in the timely access to care for patients requiring long-term support. These delays occur when insurance providers require extensive documentation and approval before covering services, often leading to prolonged stays in hospitals or instability in care transitions. Families and health care providers face considerable frustration as they navigate the intricate bureaucracy, sometimes waiting weeks for approvals that are critical for securing nursing home placements. This not only impacts patient well-being, but also strains hospital resources, contributing to overcrowding and increased health care costs.

Medicaid-Pending

Medicaid application delays significantly impact hospital discharges to nursing homes, creating challenges for both patients and health care facilities. When a patient is discharged from the hospital, but the Medicaid application is still pending, it can lead to prolonged stays in the hospital. Nursing homes often rely on Medicaid approval for coverage before accepting a patient into their facility, however this process often takes several months to be approved. Additionally, families may face heightened stress and uncertainty as they navigate the complexities of the application process. Addressing these delays can ensure timely access to necessary care and enhance overall health outcomes for individuals transitioning to nursing facilities.

60% of Nebraska nursing home residents rely on Medicaid to pay for their care.



Average length for Medicaid application approval process in Nebraska = **42 days**



Patient Factors

The complexities of patients awaiting post-acute placement can significantly influence safe transitions from hospitals to the post-acute setting. Individual characteristics such as age, behavioral health needs, cognitive function, and mobility level affect the appropriateness of different post-acute care settings. Patients with multiple chronic conditions require specialized services and support systems that impact their readiness for discharge and the appropriate post-acute setting that can meet their needs. These diverse patient factors are essential to ensure the patients are being supported in their care journey across the care continuum and are successful upon hospital discharge.

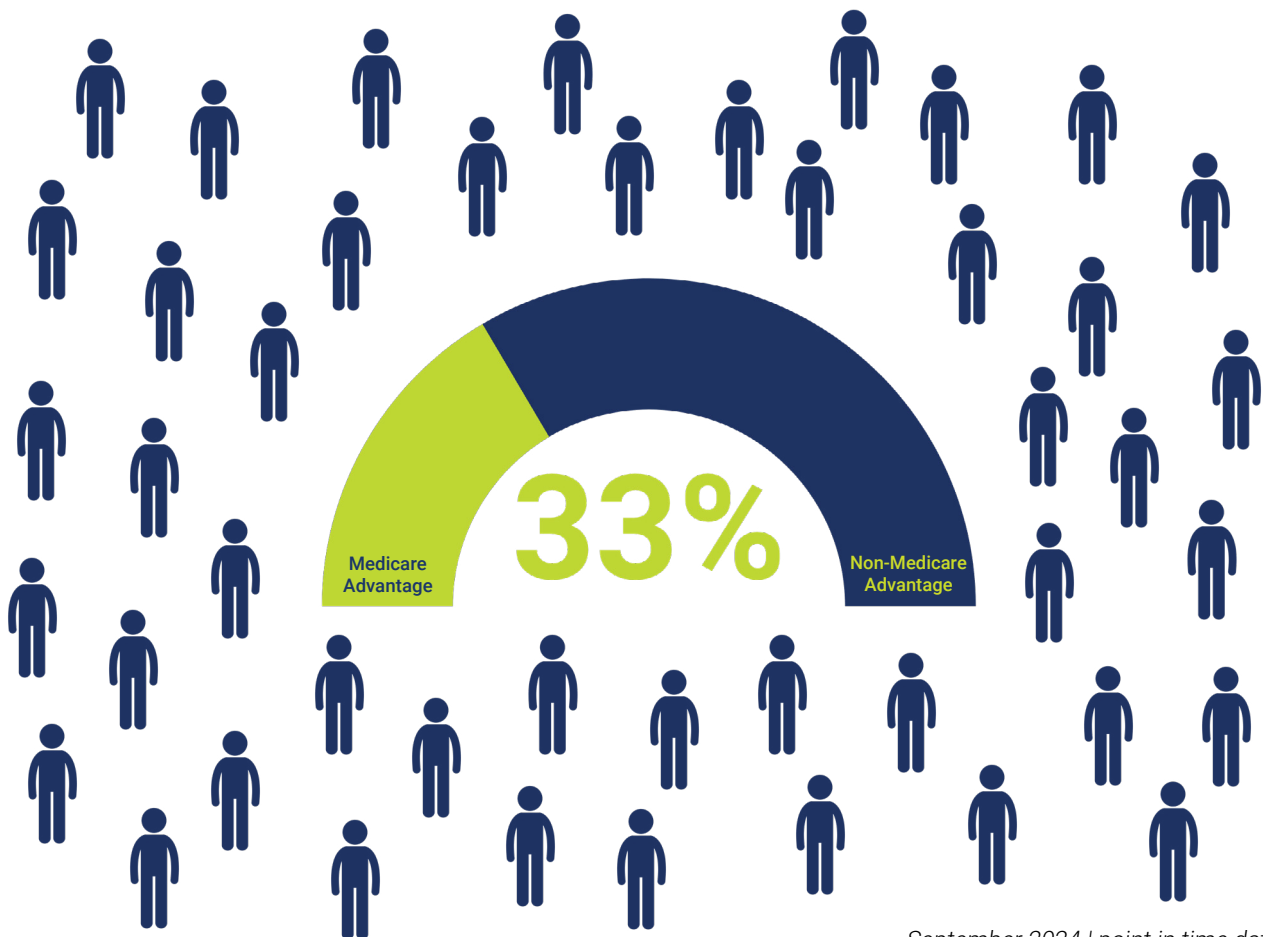
Medicare Advantage

What is Holding Us Back? Medicare Advantage in Nebraska

Medicare Advantage plans in Nebraska present significant challenges for beneficiaries navigating their health care options. These plans can vary widely in terms of coverage, costs, and provider networks. For many seniors, the array of choices can be overwhelming, as plans may have different rules regarding referrals, copayments, and out-of-pocket maximums. Furthermore, the nuances of plan benefits can lead to confusion about what services are covered, particularly for those with chronic conditions requiring specialized care.

According to the NHA throughput survey data from September 2024, there were **46 patients** across the state who had delayed discharges due to Medicare Advantage.

This accounts for **33%** of total patients awaiting post-acute placement.



September 2024 | point in time data

This barrier is compounded by the need for ongoing education and support, as beneficiaries may struggle to understand the intricacies of each plan and how to best utilize their benefits. As a result, improving access to clear, comprehensive information about Medicare Advantage options is essential for empowering Nebraskans to make informed health care decisions that best suit their needs.

Solutions that are Driving Effective Change

Transitions of Care Council

In January of 2022, the Nebraska Hospital Association formed a Transitions of Care Council aimed to enhance the continuity and quality of patient care as patients move across the health care continuum. This Council was developed using a multidisciplinary team of health care providers including executive leaders, physicians, nurses, care managers, quality leaders, clinic managers, post-acute representatives, state representatives, and many leaders that are passionate about improving care transitions. This group aimed to address the complexities of patient transitions, particularly for those with chronic conditions or those transitioning from hospital to home or post-acute care facilities. By fostering collaboration and communication among team members, the Council developed standardized processes and surveys to help quantify the issues and drive effective change. Additionally, the Council has identified multiple barriers that affect transitions and has enabled key stakeholders to collaboratively find solutions. This Council has promoted and coordinated safe approaches to care, implemented processes to ensure patients are receiving the appropriate care in the appropriate setting, and has enhanced the overall patient experience. This diverse group of individuals has been successful in implementing effective and efficient changes in Nebraska.

Nebraska Advocacy: An Influential Voice for Nebraska Health Care

LB227 – Change provisions relating to public health and welfare.

LB434 – Require the Department of Health and Human Services to enroll long-term care hospitals as providers under the medical assistance program and submission of a state plan amendment of waiver.

LB157 – Provide for appointment of temporary guardians.

LB517 – Require the Department of Health and Human Services to pay discharge incentives to post-acute placement facilities.



Change provisions relating to public health and welfare.

Sen. Hansen

Effective Date: September 2, 2023

Requires the state Department of Health and Human Services to provide Medicaid reimbursement to a hospitals at 100% of the statewide average nursing facility per diem rate when a Medicaid enrollee:

- Has been admitted as an inpatient to such hospital;
- No longer requires acute inpatient care and discharge planning;
- Requires nursing facility level of care upon discharge; and
- Is unable to be transferred to a nursing facility due to a lack of available nursing facility beds or where the transfer requires a public guardian and the State is unable to appoint a public guardian.

Require the Department of Health and Human Services to enroll long-term care hospitals as providers under the medical assistance program and submission of a state plan amendment of waiver.

Sen. Jacobsen

Effective Date: June 6, 2023

Requires DHHS to enroll long-term care hospitals as providers under Medicaid. Two Nebraska hospitals will be impacted by this change.

Provide for appointment of temporary guardians.

Sen. DeBoer

Effective Date: September 2, 2023

Creates a temporary guardianship for the limited purpose of assisting a person in applying for private or government benefits to which such person may be entitled. It also creates a procedure for appointing and compensating a limited temporary guardian in the event the Public Guardian is unable to accept the appointment created.

Require the Department of Health and Human Services to pay discharge incentives to post-acute placement facilities.

Sen. Walz

Effective Date: September 2, 2023

Requires DHHS to implement a pilot program to facilitate the transfer of patients with complex health needs from eligible acute care hospitals to appropriate post-acute care settings. The amendment includes \$1 million to carry out the pilot program.

LB227 Pilot Project Awarded Facilities

The LB227 pilot program offers financial incentives to post-acute care facilities for accepting patients with complex health needs during periods when hospitals are at or near capacity. The primary objective is to facilitate timely transitions for these patients from acute care hospitals to appropriate post-acute care settings, ensuring they receive the necessary level of care. A total of 32 proposals were submitted by post-acute facilities statewide, and the following organizations have been awarded funding. These facilities are dedicated to improving their services to better support complex patients and addressing gaps in care to ensure that patients receive the right care, at the right time, and in the right setting.

Awarded Facilities

Ambassador Health | Dialysis (Lincoln)

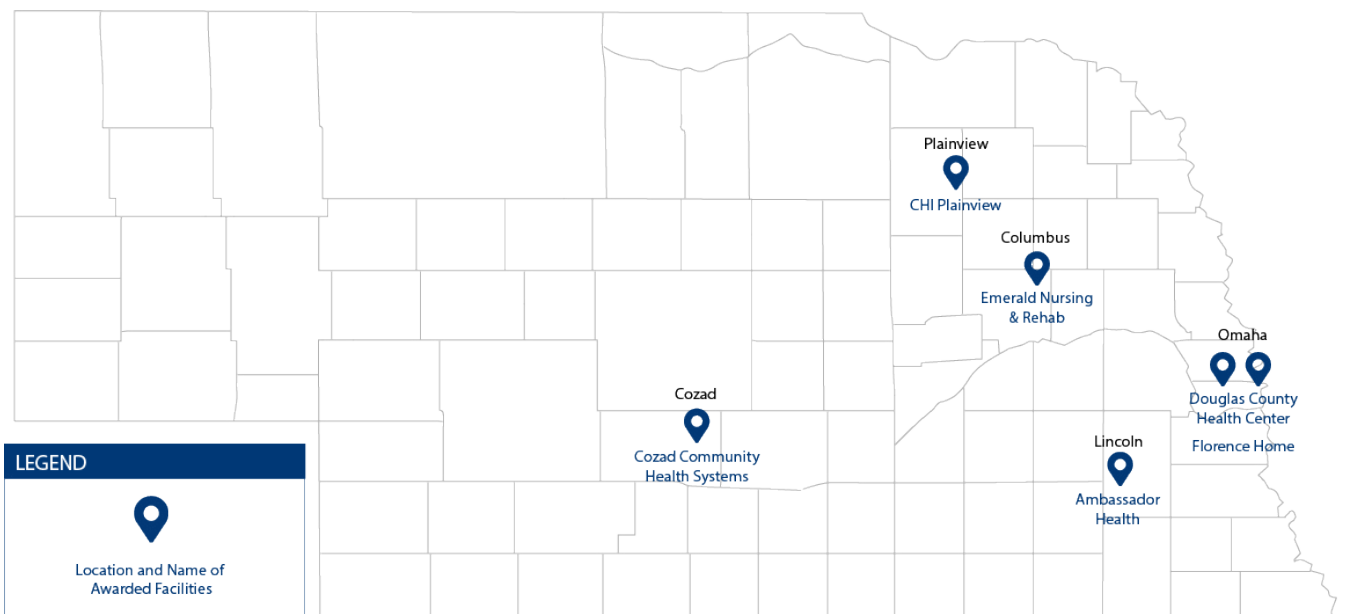
CHI Plainview | Bariatric (Plainview)

Cozad Community Health System | Bariatric (Cozad)

Douglas County Health Center | Bariatric and Dialysis (Omaha)

Emerald Nursing & Rehab | Bariatric and Complex Wounds (Columbus)

Florence Home | Clinically Complex Needs and End-of-Life Care (Omaha)



Key Drivers for Improvement

Regional Case Management Collaborative Calls

Monthly case management calls have been piloted in two of Nebraska's health care coalition regions. The Tri-Cities Medical Response System (TRIMRS) and the Southeast Nebraska Health Care Coalition (SENHCC) have held monthly calls to collaborate on discharge planning for complex patients. These discussions facilitate proactive interventions, such as coordinating additional services or providing additional support, which can significantly enhance patient outcomes and satisfaction. The collaborative nature of these calls fosters stronger relationships among team members, promoting a culture of communication and teamwork essential for effective care delivery.

Reverse Transfers

Often, Nebraska's large health systems are working at capacity and Critical Access Hospitals are unable to transfer critical patients to them due to bed capacity or workforce issues. To ensure appropriate care is received, hospitals continuously work together to ensure patients are able to be at the correct level of care. Reverse transfers from large hospitals to smaller facilities play a crucial role in optimizing patient care and resource management. This process typically occurs when patients no longer require the specialized services provided by larger hospitals and can be safely moved to smaller facilities for ongoing care or rehabilitation. Reverse transfers have helped alleviate overcrowding in urban hospitals, allowing them to focus on patients with more acute needs while providing smaller hospitals the opportunity to manage patients requiring less intensive care. These transfers have enhanced patient flow, overall efficiency, and better utilization of resources which ultimately leads to improved health outcomes for individuals across various care settings.

Medicaid Workgroup

The Nebraska Hospital Association and the Nebraska Department of Health and Human Services have formed a collaborative platform for stakeholders to address challenges and identify improvement opportunities across Nebraska. This group focuses on streamlining services and ensuring the program meets the diverse needs of Nebraskans. By fostering open dialogue and sharing insights, this group aims to identify best practices and develop innovative solutions to issues such as Medicaid enrollment processes, care coordination, health disparities, and education.

Improving Guardianship Efforts

The Nebraska Office of Public Guardianship received funding through the American Rescue Plan Act (ARPA) to enhance its capacity to support individuals in need of guardianship services. These funds were intended to address the growing demand for public guardianship, particularly for vulnerable populations such as the elderly and individuals with disabilities who may lack adequate support systems. With ARPA funds, the office has been able to improve staffing levels, expand training for guardians, and implement technology solutions to streamline operations and improve service delivery. This investment was aimed at enhancing the quality of care and support provided to those under guardianship, ensuring their rights and needs are prioritized. Overall, the funding represents a critical step toward strengthening the safety net for Nebraskans who require guardianship services, ultimately promoting their well-being and dignity.

Moving Forward: **Additional Needs**

Increase Access to Long-Term Care and Behavioral Health Services

There is a need to expand funding for community-based programs creating more local resources, reducing reliance on institutional care and allowing individuals to receive support in familiar environments. Enhancing telehealth services can improve access to behavioral health support, particularly for rural populations, making it easier for individuals to access needed care. Additionally, investing in workforce development initiatives can help recruit and retain health care professionals in long-term and behavioral health fields, ensuring adequate staffing to meet demands. Increasing public awareness and education about available services can also empower families to seek help earlier. Finally, fostering partnerships between health care systems, community organizations, and government agencies can create integrated care models that address both long-term and behavioral health needs, ensuring comprehensive support for individuals and families across Nebraska.

Enhance Transportation Access

Access to transportation is a common issue across Nebraska, particularly in rural and underserved areas. Increasing funding for public transit systems can expand routes, enhance frequency, and improve overall service quality. On-demand transportation options, such as ride-sharing programs or community shuttles, can provide flexible solutions tailored to local needs. A collaborative approach within communities can develop transportation partnerships and ensure individuals have access to vital services to receive timely medical care.

Improve Processes to Expedite the Medicaid Application Process

Medicaid application process can be intimidating for individuals and health care professionals who assist individuals with the process. Allowing for a user-friendly application with clear guidance and resources to effectively submit a comprehensive application allows for a more timely review of the application. Increasing staff training and resources at local Medicaid offices reduces processing times and improves customer service. Establishing partnerships across the care continuum enhances outreach and support for individuals applying for Medicaid and provides incentives to apply for Medicaid prior to hospitalization.

Conclusion

This report highlights the critical challenges Nebraska hospitals face in safely transitioning patients across the care continuum, emphasizing the impact of delayed discharges and post-acute placement issues. Through collaborative efforts by the Nebraska Hospital Association, state agencies, and health care partners, significant progress has been made—realizing a 41% improvement in discharge delays since 2022. However, systemic barriers like workforce shortages, post-acute facility closures, and Medicaid delays persist, underscoring the need for continued advocacy, innovation, and strategic partnerships. Moving forward, expanding access to long-term care, improving behavioral health services, streamlining Medicaid processes, and enhancing transportation infrastructure will be essential to building a more resilient, patient-centered healthcare system. The work outlined in this report serves as a foundation for future initiatives, ensuring that Nebraska hospitals can effectively serve their communities and provide safe, timely care transitions.

<p>41% improvement in patients awaiting post-acute placement</p>	<p>20% of patients needing long-term care placement are waiting >6 months</p>
<p>40% improvement in patients awaiting a skilled nursing facility</p>	<p>37% of patients needing skilled nursing placement are waiting >30 days</p>
<p>29% improvement in patients awaiting a long-term care facility</p>	<p>70% of patients needing long-term care placement are waiting >30 days</p>
<p>73% improvement in patients boarded in Emergency Departments</p>	

NHA | NEBRASKA
HOSPITALS

Contact Us

Web :
nebraskahospitals.org

Phone :
(402) 742-8140