

# Hospital Readmission Reduction Program Excess Readmission Ratio

## Specifications

### 2026 Report Year

Topic	Description
<b>Summary of Changes</b>	Starting in October 1, 2026, the Centers for Medicare & Medicaid Services (CMS) is changing readmission measure performance period from three to two years.
<b>Description</b>	<p>The Centers for Medicare &amp; Medicaid Services (CMS) Hospital Readmission Reduction Program (HRRP) was developed to reduce unplanned rehospitalizations and cost by tying payment to excess readmissions in prospective payment system (PPS) hospitals.</p> <p>Excess readmissions are calculated as the ratio of predicted readmissions to expected readmissions.</p> <p>The composite rate is calculated by the Minnesota Department of Health using results from HRRP.</p>
<b>Methodology</b>	Specifications for individual measures are located on QualityNet. The details of HRRP are contained in the CMS inpatient prospective payment system (IPPS) finalrule.
<b>Measurement Period</b>	<p>Data will be submitted on an annual basis on the following schedule:</p> <p>Final results are released by CMS in the beginning of the fiscal year (FY) which for FY 2026 starts with October 1, 2025 discharges and ends with September 30, 2026 discharges. A final table of results is published on the 2025 IPPS rule page. It contains the excess readmission ratio for each condition for each hospital. This will be the source for data submission of the individual measures listed below.</p> <p>Final results are planned to be published annually on Hospital Compare.</p> <p>The composite measure will be calculated using these results.</p>
<b>Denominator</b>	<p>Sum of the number of cases for each of the readmission measures included in the HRRP if the hospital has 25 or more eligible discharges for that condition</p> <p>AMI Cases + Pneumonia Cases + Heart Failure Cases + Hip/Knee Cases + COPD Cases + CABG Cases</p>
<b>Allowable Exclusions</b>	If a hospital has fewer than 25 eligible discharges for a condition, that measure is not included in the composite measure.
<b>Numerator</b>	<p>Number of readmission measures with excess readmissions (number of 1 or greater) for FY 2026 which includes data from July 1, 2021 to June 30, 2023</p> <p>(AMI Cases x excess ratio) + (Pneumonia Cases x excess ratio) + (Heart Failure Cases x excess ratio) + (Hip/Knee Cases x excess ratio) + (COPD Cases x excess ratio) + (CABG Cases x excess ratio)</p>
<b>Individual Measures Contained in the Composite Measure</b>	<ul style="list-style-type: none"> <li>• 30-day Readmissions Acute Myocardial Infarction (AMI)</li> <li>• 30-day Readmissions Heart Failure (HF)</li> <li>• 30-day Readmissions Pneumonia (PN) <i>Resumed beginning with the FY 2024 program year</i></li> <li>• 30-day Readmissions Chronic Obstructive Pulmonary Disease (COPD)</li> <li>• 30-day Readmissions Elective Total Hip Arthroplasty (THA) and Total Knee Arthroplasty (TKA)</li> <li>• 30 day Readmissions Coronary Artery Bypass Graft (CABG) surgery</li> </ul>