**Program:** Enhanced Care Coordination

**Situation:** From 2005-2010 Texas received over $44 Billion in charges for potentially preventable hospitalizations. Currently there are 1,149 Nursing Homes in Texas and an aging population according to the 2010 Census of over 2.6 million. Common ambulatory care sensitive (ACS) medical conditions are bacterial pneumonia, UTI, COPD/Asthma, CHF, & dehydration. Several studies have analyzed ACS and projected 37-45% of these admissions could have been prevented. Residents in nursing homes deserve coordination of care to avoid preventable hospitalizations, to participate in personal care decisions, and improve quality of life.

**Assumptions** although it is ideal for seniors to “age in place” nursing homes are often needed for temporary or long term residential placement. Nursing homes share a mission of respecting residents preferences while maintain optimum function and quality of life. Therefore, partnering with other stakeholders to prevent avoidable hospitalizations is logical.

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**External Factors** include (1) regulatory issues related to billing and avoidable hospitalizations (2) nursing home(s) reputation or perceived reputation (3) ability to attract qualified staff with the education necessary to function at a high level of autonomy with exceptional communication and assessment skills (4) nursing homes are not able to compete with hospital salaries and benefits (5) limited data collection/EMAR that connect with outside facilities (hospitals, provider offices).