

Executive summary

Readmissions hold a large burden on the healthcare system, costing the U.S. \$15-20 billion annually. The Centers for Medicare & Medicaid Services (CMS) established the Hospital Readmissions Reduction Program (HRRP) in 2012 to address the issue, which financially penalizes hospitals that exhibit higher than expected readmission rates for key conditions. The Mobile Pharmacy Unit (MPU) is proposed as a non-traditional solution to reduce remissions through a pharmacist and radiology technician team during post-discharge care.

The MPU is designed to serve high-risk patients recently discharged, and is responsible for comprehensive medication reconciliation, adherence assessments, chronic disease evaluation, lab value collection, sample collection, imaging, and patient education. The MPU addresses a gap in care often left by traditional follow-up by scheduling appointments within two days of discharge. The service can accomplish this through its high mobility, being well equipped with mobile diagnostic tools, as well as interprofessional collaboration with technicians and providers.

Effective implementation of the service involves planning with hospital leadership, compliance with state and federal regulatory standards, and physician and staff education. The initiative will require an initial investment in equipment including a mobile medical van, Mobile X-ray machine, and others. Since the pharmacist will be operating in an expanded care role, training on effective sample and lab collection is also included in the initial investment. Projected startup costs range from \$294,500 to \$425,000, and annual operating costs are estimated between \$265,000 and \$330,000.