



Overcoming the Long Minnesota Goodbye A Patient-Centered Approach to Timely Hospital Discharge

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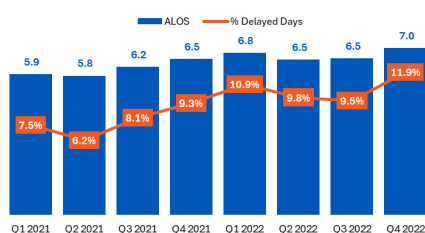
BACKGROUND & OBJECTIVE

BACKGROUND

Extended hospital stays can lead to delayed recovery or adverse events and prevent the hospital from delivering care to other patients in need.

Following the pandemic, length of stay rose to unprecedented levels. While an expanded population of procedural patients were successfully transitioning to same day discharge, patients who remained in the hospital continued to see their stays extended as external resources for the next level of care dwindled. While case mix was also trending up, the primary drivers of the increased length of stay included delayed discharges, difficulty with external placement, and a culture that promoted holding patients in the hospital beyond medical readiness for discharge.

Delay Impact on Total ALOS



OBJECTIVE

Develop and disseminate actionable data-driven insights to the care team to ensure timely, efficient, and safe patient discharge.

Instill Accountability

Increase Transparency

Improve Communication

Drive patient-centered and medically relevant decision making

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METHODS

PLANNING & RESEARCH

In late 2022 and early 2023, nearly 12% of our average daily census consisted of patients who did not have a medical reason to remain in the hospital. While we were tracking and reporting on discharge delays daily, existing processes limited our ability to assess causes and duration of delays, nor were we able to proactively identify patients at risk for delay. Select practices within the hospital were leveraging an optional field in the EHR intended to capture discharge readiness data from the EHR. The data was transformed into meaningful clinical insights, enabling various teams from the command center to individual practice groups, services and nursing units to take informed actions.

IMPLEMENTATION

The team embarked on a journey to formalize the use of Medically Ready for Discharge Date (MRDD) and surface detailed insights to the care team on extended stays using an Opportunity Days metric. The hospital data and analytics team collaborated with practice stakeholders to extract discharge readiness data from the EHR. The data was transformed into meaningful clinical insights, enabling various teams from the command center to individual practice groups, services and nursing units to take informed actions.



Initial Data Barriers to Overcome:

- Timeliness
- Consistency
- Completeness
- Accuracy

New and/or Redesigned Processes:

- ✓ Assigning accountable roles for data capture and accuracy
- ✓ Defining consistent criteria to assess medical readiness
- ✓ Multidisciplinary discussions around discharge readiness and any barriers for timely discharge
- ✓ Establishing daily review of medical readiness and delays for every patient



RESULTS

Assessing data from June to November 2024 versus a corresponding baseline period from 2022, numerous notable impacts are observed:

- Total Opportunity Days decreased by 20%
- Opportunity Days per patient decreased by nearly 45%
- Overall hospital average length of stay decreased 7.5% (0.5 days)
- Estimated \$12.5 million savings in unreimbursed days for government payer patients in 2024



Saved an average of 24 beds per day to accommodate incremental patient growth



DISCUSSION

- Exposure of actionable data about the process provides clarity into the opportunity to change and generates practice buy-in and accountability, leading to meaningful outcomes.
- To influence lasting change, stay committed to the end goal, even when the initial results do not signal improvement.
- The future of health care includes analytics as a member of the care team.
- A patient-centric "opportunity day" discharge strategy can yield positive financial outcomes.

CONCLUSIONS

Formalizing processes to capture MRDD and reporting the resulting outcome as an Opportunity Days measure has helped support discharge planning efforts and improve visibility into discharge delays and impact on hospital capacity to target resources. Enhancing a patient centric approach to discharge using data and analytics has yielded operational benefits, improving timeliness of discharges for patients ready to transition to the next phase of their recovery, and as a result, creating capacity for patients in need of acute hospital care.