Peer-Review Report

Peer Review of "The Association of Shared Care Networks With 30-Day Heart Failure Excessive Hospital Readmissions: Longitudinal Observational Study"

Peng Zhao, MS, PhD

Institute for Data Science and Informatics, University of Missouri, Columbia, MO, United States

Related Articles:

Preprint (medRxiv): <u>https://www.medrxiv.org/content/10.1101/2021.04.07.21255061v1</u> Preprint (JMIR Preprints): <u>https://preprints.jmir.org/preprint/30777</u> Authors' Response to Peer-Review Reports: <u>https://med.jmirx.org/2022/2/e37005/</u> Published Article: <u>https://med.jmirx.org/2022/2/e30777/</u>

Abstract

(JMIRx Med 2022;3(2):e37057) doi: 10.2196/37057

KEYWORDS

patient readmission; quality assurance; health care; catchment area; health; community networks; regional medical programs

This is a peer-review report submitted for the paper "The Association of Shared Care Networks With 30-Day Heart Failure Excessive Hospital Readmissions: Longitudinal Observational Study."

General Comments

Thank you for the opportunity to review this study [1] of the association of shared care networks with heart failure (HF) excessive hospital readmissions. Hospital readmission is a very current topic. Nonetheless, several issues should be noted.

Specific Comments

Major Comments

 In "study population and design" in "methods," the authors mentioned, "hospitals with less than 2 repeated measures of higher-than-expected HF readmission in the HRRP (Hospital Reduction Readmission Program) or without

Conflicts of Interest

None declared.

Reference

 Pinheiro D, Hartman R, Mai J, Romero E, Soroya S, Bastos-Filho C, et al. The association of shared care networks with 30-day heart failure excessive hospital readmissions: longitudinal observational study. JMIRx Med 2022;3(2):e30777 [FREE Full text]

Abbreviations

ERR: excessive readmission ratio

```
https://med.jmirx.org/2022/2/e37057
```

RenderX

discharge data in the OSHPD (Office of Statewide Health Planning and Development) were excluded." Does this mean this study only considered hospitals with repeated higher-than-expected HF readmission? Ignoring hospitals without repeated higher-than-expected HF readmission may introduce bias to the analysis. Please clarify why you have chosen this data inclusion criterion.

- 2. In "data sources" in "methods," the authors collected excessive readmission ratio (ERR) data from 2012 to 2017. In almost every year, the HRRP updated the inclusion criteria of HF readmission (eg, lists of eligible diagnosis codes and procedure codes in the planned readmission algorithm). In this case, how did you fairly compare the ERR across different years?
- 3. Is the "Uncovering Shared Care Areas and Localization Index from Hospital-Patient Discharge Data" in "methods" a literature review of other studies or the method the authors used in this study? Please clarify. If it is a literature review, it should go in the "introduction."

HF: heart failureHRRP: Hospital Reduction Readmission ProgramOSHPD: Office of Statewide Health Planning and Development

Edited by E Meinert; this is a non-peer-reviewed article. Submitted 04.02.22; accepted 04.02.22; published 06.04.22. <u>Please cite as:</u> Zhao P Peer Review of "The Association of Shared Care Networks With 30-Day Heart Failure Excessive Hospital Readmissions: Longitudinal Observational Study" JMIRx Med 2022;3(2):e37057 URL: https://med.jmirx.org/2022/2/e37057 doi: 10.2196/37057 PMID:

©Peng Zhao. Originally published in JMIRx Med (https://med.jmirx.org), 06.04.2022. This is an open-access article distributed under the terms of the Creative Commons Attribution License (https://creativecommons.org/licenses/by/4.0/), which permits unrestricted use, distribution, and reproduction in any medium, provided the original work, first published in JMIRx Med, is properly cited. The complete bibliographic information, a link to the original publication on https://med.jmirx.org/, as well as this copyright and license information must be included.