



30-Day Readmission Payment Policy Effective February 1, 2027

Home State Health and Ambetter from Home State Health are implementing a **30-Day Readmission Payment Policy (CC.PP.501)**. The policy establishes reimbursement guidelines for certain hospital readmissions occurring within 30 days following discharge.

When a subsequent admission(s) occurs within 30 days of discharge from the initial admission and is determined to be both clinically related and potentially preventable, the Readmission(s) is considered a continuation of the initial inpatient episode of care for reimbursement purposes. The Health Plan may deny separate reimbursement for Related Readmission(s) with reimbursement limited to the initial admission subject to applicable contractual requirements.

Home State Health may review claims, medical records, clinical information, discharge planning, care coordination, follow-up care, transitions of care, and other relevant documentation when making this determination.

This review is for reimbursement purposes to determine whether the readmission(s) meets the criteria outlined in the policy and is not a determination of the medical necessity of either admission.

For complete criteria and exclusions, providers should refer to **CC.PP.501 – 30 Day Readmission: [Medicaid Payment Policies](#) [Ambetter Payment Policies](#)**

Note: A readmission to another hospital within the same hospital system will be subject to the policy when the hospitals operate under the same hospital agreement and/or share the same tax identification number.