

The Facts About... New York State Hospital Quality Reports

Hospital Quality Performance Measurement: Mortality Rates, 1998 How NYS Hospitals Compare With National Peers

	← Best to Worst →			
	A	B	C	D
Nonteaching Hospitals	9	17	31	50
Major Teaching Hospitals	3	9	18	19
Minor Teaching Hospitals	3	4	9	27
Total Hospitals	15	30	58	96

Mortality rates and average lengths of stay are the key quality measurements in a national performance review of about 5,000 acute care hospitals throughout the United States by the Center for Healthcare Industry Performance Studies. Mortality was defined as a ratio of observed mortality to expected mortality, adjusted for severity of the patient cases. Lengths of stay were based on the ratio of observed length of stay to expected length of stay, adjusted for case severity. Lower lengths of stay are considered measurements of quality because they reflect cooperative relationships between hospitals and physicians. A letter grade of “A” indicates that a hospital was in the best quartile among peer hospitals nationwide; letter grades of “D” were among the worst. Data was based on the Health Care Financing Administration’s “MEDPAR” file.

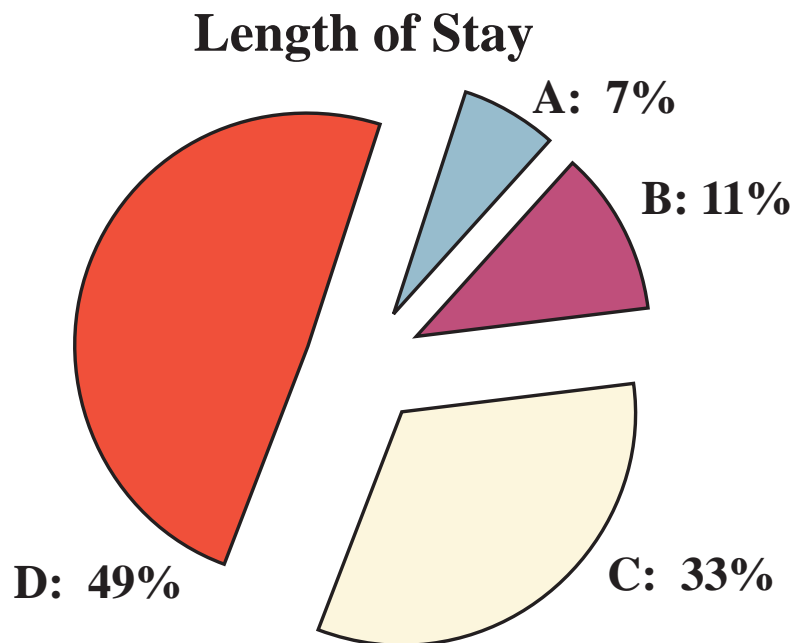
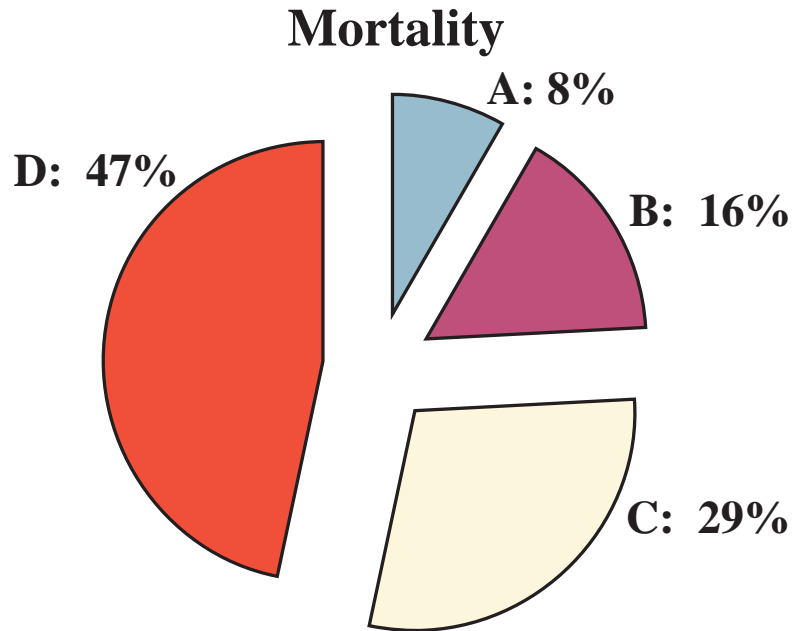
Hospital Quality Performance Measurement: Average Length of Stay, 1998 How NYS Hospitals Compare With National Peers

	← Best to Worst →			
	A	B	C	D
Nonteaching Hospitals	7	12	35	52
Major Teaching Hospitals	1	1	8	39
Minor Teaching Hospitals	1	0	8	34
Total Hospitals	9	13	51	125

Source: Center for Healthcare Industry Performance Studies, “The 2000 Performance Review--A Guide to U.S. Hospitals,” 2000 Ingenix Publishing Group.

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New York's Nonteaching Hospitals



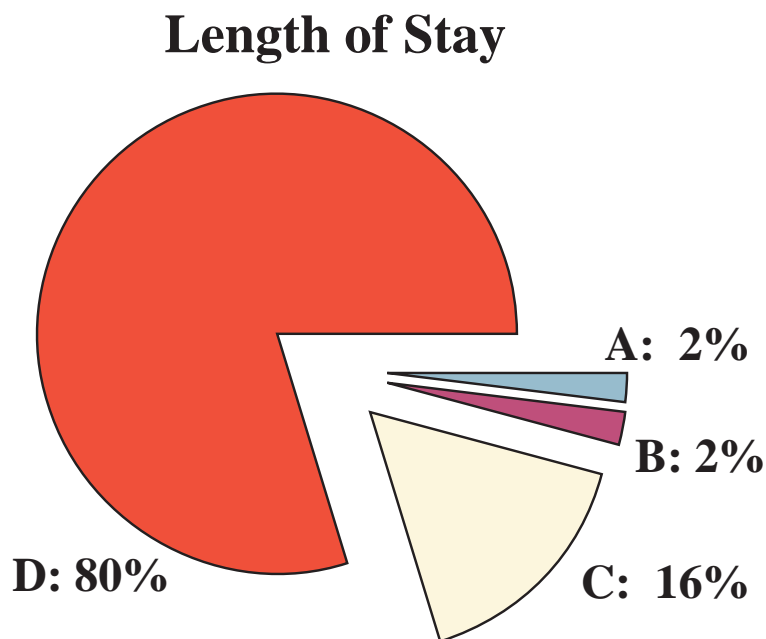
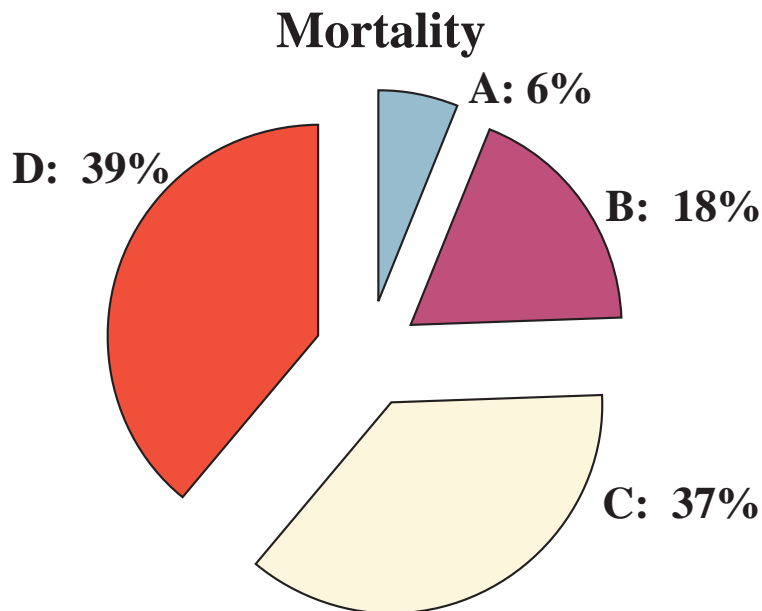
A=Best U.S. Quartile
C=2nd Worst U.S. Quartile

B=2nd Best U.S. Quartile
D=Worst U.S. Quartile

Source: Center for Healthcare Industry Performance Studies, "The 2000 Performance Review--A Guide to U.S. Hospitals," 2000 Ingenix Publishing Group.

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New York's Major Teaching Hospitals



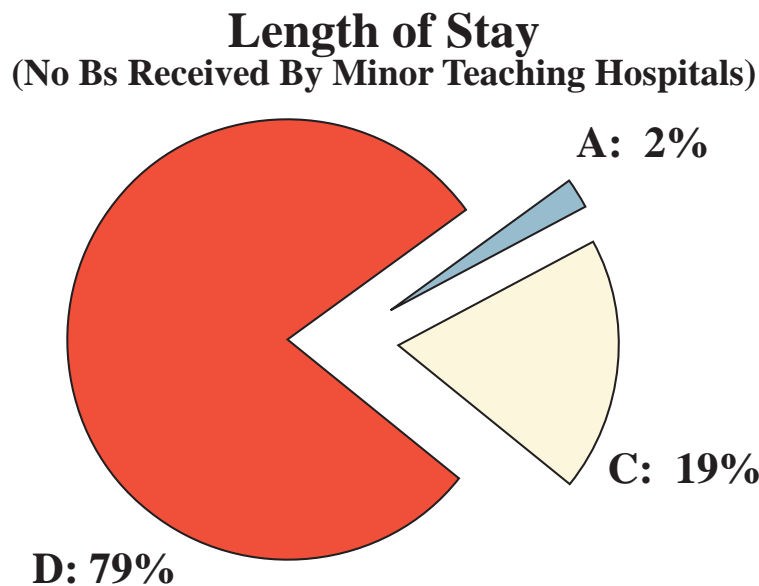
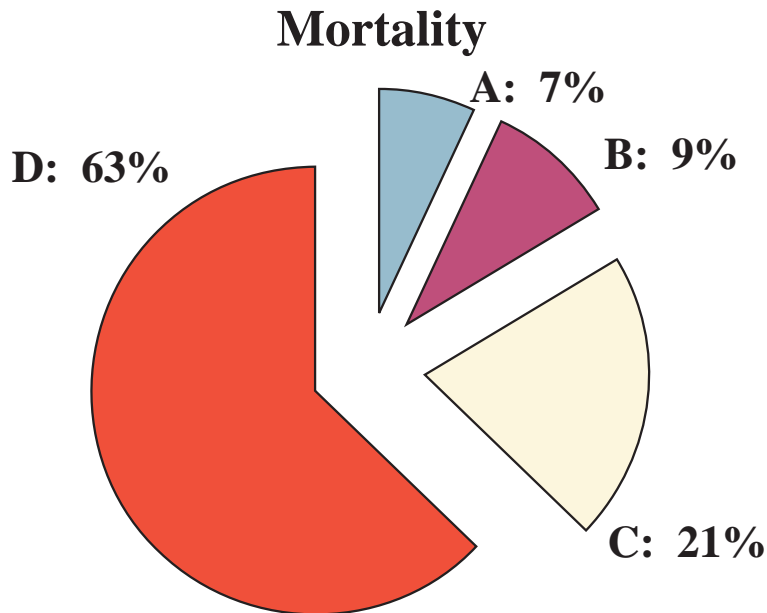
A=Best U.S. Quartile
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Source: Center for Healthcare Industry Performance Studies, "The 2000 Performance Review--A Guide to U.S. Hospitals," 2000 Ingenix Publishing Group.

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New York's Minor Teaching Hospitals



A=Best U.S. Quartile
C=2nd Worst U.S. Quartile

B=2nd Best U.S. Quartile
D=Worst U.S. Quartile

Source: Center for Healthcare Industry Performance Studies, "The 2000 Performance Review--A Guide to U.S. Hospitals," 2000 Ingenix Publishing Group.

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Coronary Artery Bypass Surgery Death Rates in New York State

The mortality rate for coronary bypass surgery in New York State hospitals was 2.24 per 100 patients in 1999, according to the Department of Health. A total of 18,116 coronary bypass surgeries were performed statewide in 1998. Risk adjusted mortality rates ranged from 0.68% to 7.00%. Risk adjusted rates take into account differences in the complexity of cases in evaluating outcomes of patients. In 1999, there were 33 hospitals approved by the department to perform open heart surgery. The performance report was issued in September 2002, which includes outcomes measurements for the hospitals and the surgeons. [Click here for a copy of "Coronary Artery Bypass Surgery in New York State, 1997-1999."](#)



Angioplasty Death Rates in New York State

From 1998 through 2000, there were 108,282 angioplasty procedures performed in New York with a survival rate of more than 99 percent, according to the Department of Health. Angioplasty is a procedure used to clear blocked coronary arteries. New York's mortality rate of 0.79 percent for angioplasties applied to 36 New York hospitals that were approved by the department to perform the procedure. Risk-adjusted mortality rates for individual hospitals ranged from 0 to 2.18 percent in 2000. Adjustments were calculated by taking into account each patient's health history, including more than 40 personal and medical factors that can increase the risk of dying from the procedure. [Click here for a copy of "Angioplasty in New York State: 1998-2000."](#)



NYS Hospitals Don't Make "The 100 Top Hospitals" List

No hospital in New York State made the annual top 100 list of high-quality hospitals in the U.S. in 2000, as graded by Solucient Leadership Institute. The "100 Top Hospitals Benchmarks for Success" studies use empirical, publicly available performance data on 6,000 acute care and specialty hospitals to identify those that excel in clinical practices, operations and financial management. The measurements used risk-adjusted mortality and complications indices, severity-adjusted average lengths of stay, expenses per adjusted discharge that are case-mix and wage-adjusted, along with other factors.

According to Solucient, the top hospitals had sicker patients than the national average, but the quality of care was superior. If all hospitals performed at the benchmark level, the study said, "the number of complications could have been reduced by over 58,000 and the number of deaths by nearly 87,000. Benchmark hospitals have done more with less. They have fewer staff but are nearly twice as profitable." If all U.S. acute care hospitals were to operate like the benchmark hospitals, "expenses would decline by an aggregate \$12 billion a year," it estimated. [Click here to review the summary.](#)

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NYS Top Heart Hospitals

New York State has 5 hospitals named on the “100 Top Cardiovascular Benchmark Hospitals” list for 2000 by Solucient. Rochester General Hospital, St. Peter’s Hospital, Lenox Hill Hospital, Maimonides Medical Center and North Shore University Hospital were named. The firm said that if all hospitals performed at the level of these top facilities, an additional 4,400 cardiovascular patients could survive each year. And, the U.S. health care system could save \$880 million annually, an average savings of more than \$1,400 in costs per cardiology case. [Click here for the report.](#)



Average Length of Stay in New York State Hospitals

New York State hospitals have among the longest average lengths of stay for patients in the country, even adjusting for the severe patient cases. Most national health-care quality consulting groups view low average lengths of stay as a key measurement for quality because shorter stays reflect greater cooperation and coordination between hospitals and physicians for safe patient discharges. New York hospitals are reducing their lengths of stay, but current levels continue to be significantly longer than national averages. The following table illustrates the most recent data available on New York State, its local regions and the national average. [For further details on New York’s average lengths of stay, click here.](#) [For details on national average lengths of stay, click here.](#)

Average Lengths of Stay in Hospitals United States and New York State 2000			
Geographic Region	Age Group		
	All Ages	65+ Years	<65 Years
United States	5.2	6.1	4.6
New York State	6.2	8.1	5.0
<i>Regions Within New York State:</i>			
Western	6.0	7.6	4.6
Finger Lakes	5.7	7.2	5.0
Central	5.4	7.1	4.0
New York-Penn.	5.7	7.3	4.0
Northeastern New York	5.6	7.1	4.3
Mid Hudson	6.6	8.2	6.0
New York City	6.4	8.7	6.5
Long Island	6.1	8.3	4.4

Source: New York State Department of Health, Statewide Planning and Research Cooperative System (SPARCS), 2000 Annual Report Table I. U.S. Centers for Medicare and Medicaid Services, based on data reported by the American Hospital Association.

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Adverse Incidents in New York State Hospitals

Hospitals in New York State, since 1985, are required to report unintended adverse and undesirable developments in individual patients' conditions to the Department of Health. According to the Institute of Medicine's Committee on Quality of Health Care in America, about 15,000 to 20,000 reports are filed each year by New York hospitals, and there is a list of more than 40 types of reportable events. The narrative reports on incidents and investigations are confidential, but the state can release aggregate data by hospital, including the number of reports submitted.

In February 2001, State Health Commissioner Antonia Novello chastised the state's hospitals, particularly in the New York City area, for failing to report adverse incidents as it issued the New York Patient Occurrence and Tracking System (Ne) Annual Report for 1999. The report concluded that hospitals are significantly under-reporting adverse incidents. For example, the department found that hospitals had reported on only 167 of 1,030 cases of patient deaths. Novello is seeking tougher fines to ensure greater compliance with reporting. Because the reporting frequency of adverse events is three times greater in one part of the state than in others, health officials believe there is a lack of compliance in reporting by hospitals. The findings can be viewed at the Department of Health's web site.



Other Hospital Quality Measurements Available

The New York State Health Department issues its quality reports on coronary artery bypass surgery and angioplasty death rates, but they are based on procedures that were conducted years ago. Most quality measurement reports are done privately. Two examples cited among these fact sheets are from the Center for Healthcare Industry Performance Studies and the Solucient Leadership Institute.

Other sites that provide measurements of hospital quality include:

- [Center for Medical Consumers](#)
- [myHealthFinder.com](#)
- [HealthGrades.com](#)
- [Hospital Comparison Tool from Excellus](#)