FACTFILE

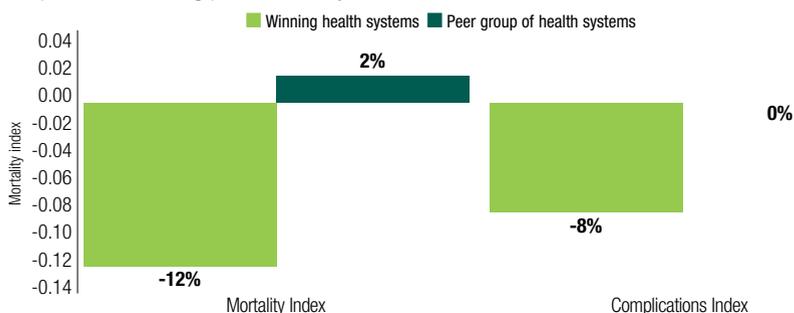## Top-Performing Health Systems

The Truven Health Analytics™ 15 Top Health Systems study is an ongoing research project that is adjusted as changes occur in the healthcare environment, newly public data and metrics become available, and managerial practices evolve. The Truven Health Analytics™ 15 Top Health Systems measures relative balanced performance across a range of organizational key performance indicators—reflecting care quality, use of evidence-based medicine, postdischarge outcomes, operational efficiency, and customer perception of care. The 2017 study analyzed 337 health systems and 2,415 hospitals that are members of health systems. The goal is simple: To inform U.S. health system leaders of relative long-term improvement rates, resultant performance, and the achievement of "systemness" of the top-performing organizations versus national peers. This analysis provides valuable guidance to health system boards and executives who use these critical, quantitative performance insights to adjust continuous improvement targets, ensure the collaboration of member hospitals, and achieve systemwide alignment on common performance goals.

BETTER PATIENT OUTCOMES — MORTALITY AND COMPLICATIONS

The top health systems had better survival rates. The winners had 13.4% fewer in-hospital deaths than their non-winning peers, considering patient severity. The top health systems also had fewer patient complications. Patients treated at the winning systems' member hospitals had significantly fewer complications. Their rates were 8.5% lower than at non-winning system hospitals, considering patient severity.
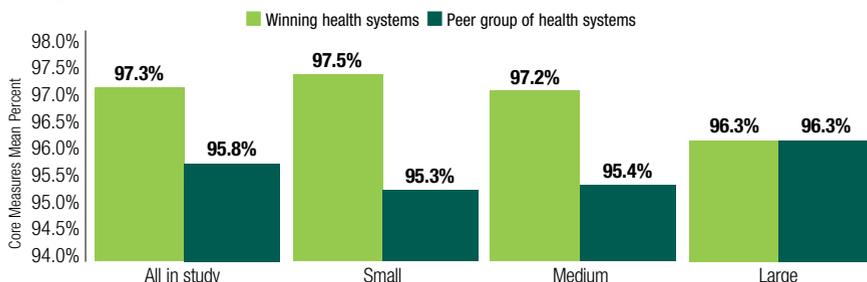

Mortality and complications based on present-on-admission (POA)-enabled risk models applied to MEDPAR 2014 and 2015 data (ALOS 2015 only).

SOURCE: *Truven Health Analytics.*

MIXED RESULTS FOR CARE COMPLIANCE AS MEASURED BY CORE MEASURES ADHERENCE

Overall, the winning systems' higher core measures mean percentage of 97.3 is 1.5 percentage points better than nonwinning peers. Small winning health systems showed both best overall core measures performance (97.5%) and the greatest difference between winners and nonwinners. There was no difference between large health system winners and nonwinners, with both having 96.3% compliance.

Core measures data from CMS Hospital Compare Jan. 1, 2015—Dec. 31, 2015 data set.

SOURCE: *Truven Health Analytics.*

JUNE 2017

Outperforming Top 15 Health Systems: How They Did It

The 2017 winners of the 15 Top Health Systems award outperformed their peers in many ways.
They:

- Saved 66,000 more lives and caused 43,000 fewer patient complications
- Followed industry-recommended standards of care more closely (97.3% versus 95.8%)
- Released patients from the hospital a half day sooner
- Readmitted patients less frequently and experienced fewer deaths within 30 days of admission
- Had nearly 18% shorter wait times in their emergency departments
- Had over 5% lower Medicare beneficiary cost per 30-day episode of care
- Scored nearly 7 points higher on patient overall rating of care

Data source

Only impartial, public data sources are used for calculating study metrics. This eliminates bias, ensures inclusion of as many health systems as possible, and guarantees uniformity of definitions and data. At the heart of the 15 Top Health Systems research is the methodology used for the Truven Health 100 Top Hospitals national balanced scorecard. This proven scorecard and its peer-reviewed, risk-adjusted methodologies are the foundation for the comparison of health system-to-peer rate of improvement and performance. The 15 Top Health Systems scorecard also goes beyond these insights by adding a third measurement dimension—alignment. The alignment factor is particularly useful to health system leaders as they work to empirically assess the degree of consistency achieved across system facilities and develop action plans to strengthen it.
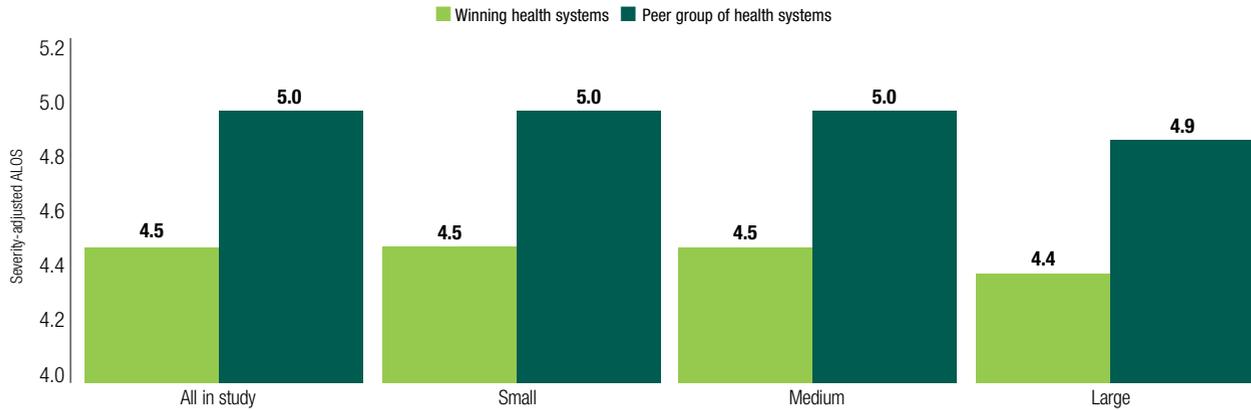
Upcoming Topic:
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SHORTER LENGTH OF STAY – WINNING SYSTEMS' PATIENTS RETURNED HOME SOONER

Patients treated at hospitals in the winning health systems returned home sooner. Winning systems had a median average length of stay (ALOS) of 4.5 days, half a day shorter than their peers' median of 5 days. ALOS difference between winners and nonwinners was consistent across all comparison groups, with benchmark systems discharging patients one-half day sooner.
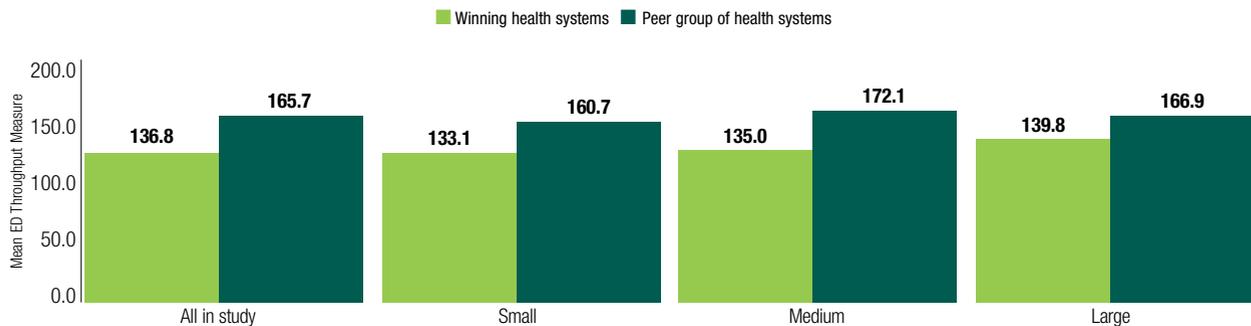
■ Winning health systems ■ Peer group of health systems

	All in study	Small	Medium	Large
Winning	4.5	4.5	4.5	4.4
Peer	5.0	5.0	5.0	4.9

Average length of stay (ALOS) based on present-on-admission (POA)-enabled risk models applied to MEDPAR 2014 and 2015 data (ALOS 2015 only).

SOURCE: *Truven Health Analytics.*

LESS TIME TO SERVICE IN THE EMERGENCY DEPARTMENT – MEAN EMERGENCY DEPARTMENT THROUGHPUT COMPOSITE SCORE

The mean emergency department (ED) throughput composite metric measures the amount of time spent in the ED. The mean of three reported wait time measures was used: median minutes to admission, to discharge from the ED, and to receipt of pain medication for long bone fracture. Overall, winning systems had a significantly shorter ED wait time than nonwinners with a 17.4% difference. The most dramatic difference between winning systems and their peers was in the medium health system comparison group. Medium system winners averaged 37.1 minutes less wait time per patient visit than nonwinners, nearly a 22% difference. The range of time saved was between 27.1 and 37.1 minutes.
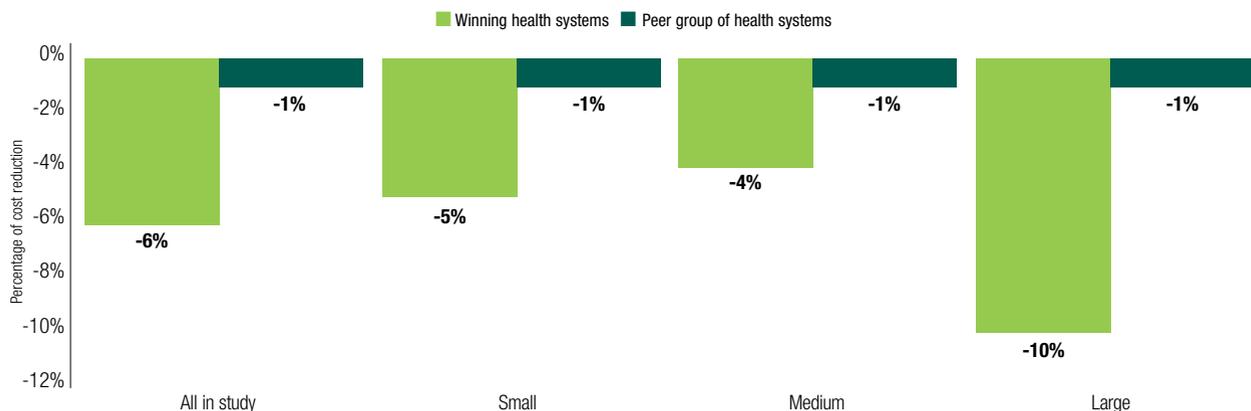
■ Winning health systems ■ Peer group of health systems

	All in study	Small	Medium	Large
Winning	136.8	133.1	135.0	139.8
Peer	165.7	160.7	172.1	166.9

ED measure. MSPB and HCAHPS data from CMS Hospital Compare Jan. 1, 2015—Dec. 31, 2015 data set.

SOURCE: *Truven Health Analytics.*

LOWER EPISODE COST – MEDICARE SPEND PER BENEFICIARY INDEX

Medicare Beneficiary Episode-of-Care costs were lower for patients discharged from winning health systems. Overall, winning systems had a 5.2% lower Medicare spending per beneficiary (MSPB) index than nonwinners. Large health system winners had the greatest difference between winners and nonwinners with a 9.7% lower MSPB index.

■ Winning health systems ■ Peer group of health systems

	All in study	Small	Medium	Large
Winning	-6%	-5%	-4%	-10%
Peer	-1%	-1%	-1%	-1%

MSPB data from CMS Hospital Compare Jan. 1, 2015—Dec. 31, 2015 data set.

SOURCE: *Truven Health Analytics.*