



Thomson Reuters Announces Top Health Systems

15 Highest Performing Hospital Systems Improve Quality, Have Lower 30-Day Mortality Rate

Ann Arbor, MI January 16, 2012 — Thomson Reuters today released its fourth annual study identifying the top U.S. health systems based on balanced system-wide clinical performance.

The *Thomson Reuters 15 Top Health Systems* study culled data from more than 300 organizations and singled out 15 hospital systems that achieved superior clinical outcomes based on a composite score of eight measures of quality, patient perception of care and efficiency.

“This year we are seeing stronger system-wide performance and increased rates of improvement, particularly among the 15 Top Health Systems award winners. Health system performance is beginning to reflect aspirations to provide more consistent outcomes across communities served,” said Jean Chenoweth, senior vice president for performance improvement and 100 Top Hospitals® program at Thomson Reuters. “Healthcare reform appears to have stimulated the increased rate of improvement at the system level.”

Among the key findings in the study were the following:

- **Lower 30-Day Mortality Rates:** 15 Top Health Systems held post-discharge 30 day mortality rates steady, while peer health systems demonstrated a significant increase in post discharge mortality.
- **Better Survival Rates:** Winning hospitals had 17 percent fewer deaths than expected considering patient severity, while non-winning hospitals had 4 percent more deaths than expected.
- **Fewer Complications:** Patients of the winning health systems had 19 percent fewer complications.
- **Shorter Hospital Stays:** Patients treated in the winning system hospitals have a median average length of stay of 4.7 days, nearly half a day shorter than their peers’ median of 5.1 days.
- **Better Patient Safety and Core Measure Adherence:** Top health systems had 23 percent fewer adverse patient safety events than expected and had better adherence to core measures of care than their peers.

The study divides the top health systems into three comparison groups based on total operating expense of the member hospitals. The winners are as follows:

Large Health Systems (more than \$1.5 billion total operating expense)

- Banner Health, Phoenix, AZ
- CareGroup Healthcare System, Boston, MA
- Main Line Health, Bryn Mawr, PA
- Memorial Hermann Healthcare System, Houston, TX
- St. Vincent Health, Indianapolis, IN

Medium Health Systems (\$750 million–\$1.5 billion)

- Baystate Health, Springfield, MA



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- Geisinger Health System, Danville, PA
- HCA Central and West Texas Division, Austin, TX
- Mission Health System, Asheville, NC
- Prime Healthcare Services, Ontario, CA

Small Health Systems (less than \$750 million)

- Baptist Health, Montgomery, AL
- Maury Regional Healthcare System, Columbia, TN
- Poudre Valley Health System, Fort Collins, CO
- Saint Joseph Regional Health System, Mishawaka, IN
- Tanner Health System, Carrollton, GA

U.S. health systems with two or more short-term, general, non-federal hospitals; cardiac and orthopedic hospitals; and critical access hospitals were assessed in the study. Researchers looked at eight metrics that gauge clinical quality and efficiency: mortality, medical complications, patient safety, average length of stay, 30-day mortality rate, 30-day readmission rate, adherence to clinical standards of care (evidence-based core measures published by the Centers for Medicare and Medicaid Services), and HCAHPS patient survey score (part of a national initiative sponsored by the United States Department of Health and Human Services to measure the quality of care in hospitals).

The study relied on public data from the 2010 Medicare Provider Analysis and Review (MedPAR) data and the CMS Hospital Compare data sets.

Researchers from the Thomson Reuters 100 Top Hospitals program have analyzed and reported on the performance of individual hospitals since 1993.

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