

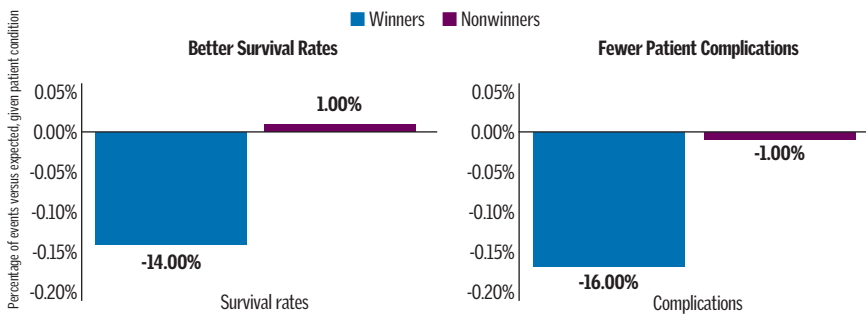
FACTFILE

Health System Performance

The Truven Health Analytics™ 15 Top Health Systems study identifies U.S. health system leadership teams that have most effectively aligned outstanding performance across their organizations, and achieved more reliable outcomes in every member hospital. The study measures relative balanced performance across a range of organizational key performance indicators including care quality, use of evidence-based medicine, postdischarge outcomes, operational efficiency, and patient perception of care. Just as evidence-based medicine is key to exceptional patient care, evidenced-based management is key to the well-being and success of health systems. **3**

BETTER PATIENT OUTCOMES

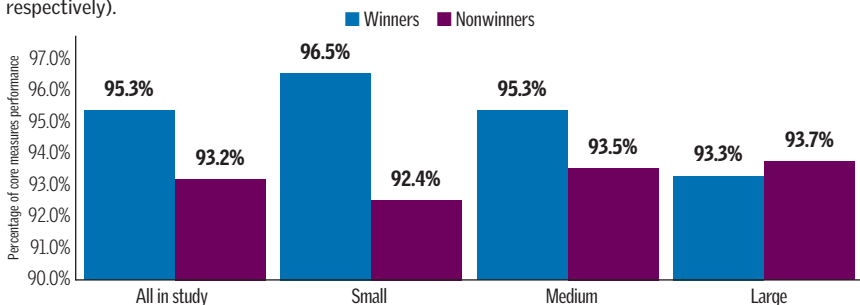
The 15 Top Health System winners posted better survival rates and fewer patient complications. The winners had nearly 15% fewer in-hospital deaths than their nonwinning peers, considering patient severity. Patients treated at the winning systems' member hospitals had significantly fewer complications. Their rates were 15% lower than at nonwinning system hospitals, considering patient severity.



SOURCE: Truven Health Analytics.

BETTER CARE PROTOCOL

The top health systems focused on two new groups of core measures: stroke and blood clot prevention, which challenged healthcare organizations to address basic standards of care, and is evident by the somewhat lower performance on these new measures. Overall, the winning systems' higher core measures mean percentage of 95.3 was more than 2 percentage points better than nonwinning peers. Small winning health systems showed both best overall core measures performance (96.5%) and the greatest difference between winners and nonwinners (more than 4 percentage points). Large health system winners lagged behind their peers in core measures compliance (93.3% and 93.7%, respectively).



SOURCE: Truven Health Analytics.

ABOUT THE DATA: The 15 Top Health Systems study is an ongoing study that is adjusted as changes occur in the health-care environment, new public data and metrics become available, and managerial practices evolve. The 15 Top Health Systems study is uniquely focused on objectively measuring the impact of managerial excellence, and providing valuable guidance to health system leaders 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. 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. The end result is distinctive: a comprehensive analysis of the improvement, resultant performance, and alignment of America's health systems. Additional findings are available in the full study overview at <http://100tophospitals.com/studies-winners/15-top-health-systems>.

Total U.S. Medicare Beneficiaries

The total number of Medicare beneficiaries in the United States, including beneficiaries in U.S. territories, is 55.5 million. By state, the number of Medicare beneficiaries ranges from a high of 5.6 million in California to a low of 83,863 in Alaska. Of the Medicare beneficiaries residing in U.S. territories, Puerto Rico has the most beneficiaries at 756,971, and the Northern Mariana Islands have the least at 2,075.

Location	Total Medicare Beneficiaries
United States	55,504,005
Alabama	968,010
Alaska	83,863
Arizona	1,134,774
Arkansas	594,596
California	5,644,384
Colorado	785,398
Connecticut	630,333
Delaware	180,529
District of Columbia	88,421
Florida	4,024,223
Georgia	1,519,461
Hawaii	244,364
Idaho	282,024
Illinois	2,066,376
Indiana	1,150,553
Iowa	571,956
Kansas	487,086
Kentucky	862,887
Louisiana	793,159
Maine	306,420
Maryland	930,088
Massachusetts	1,218,036
Michigan	1,895,558
Minnesota	912,285
Mississippi	560,344
Missouri	1,136,382
Montana	201,359
Nebraska	313,703
Nevada	453,032
New Hampshire	266,210
New Jersey	1,492,066
New Mexico	372,685
New York	3,343,349
North Carolina	1,769,074
North Dakota	118,883
Ohio	2,154,337
Oklahoma	678,763
Oregon	754,402
Pennsylvania	2,533,515
Rhode Island	203,289
South Carolina	941,169
South Dakota	156,127
Tennessee	1,235,157
Texas	3,633,785
Utah	345,340
Vermont	131,381
Virginia	1,349,115
Washington	1,190,127
West Virginia	416,820
Wisconsin	1,050,020
Wyoming	95,055
American Samoa	4,375
Guam	14,928
Northern Mariana Islands	2,075
Puerto Rico	756,971
U.S. Virgin Islands	19,291

NOTES: Data include aged and/or disabled individuals enrolled in Medicare Part A and/or B through Original Medicare or Medicare Advantage and other health plans during the calendar year specified. Medicare enrollment is based on the Centers for Medicare & Medicaid Services administrative enrollment data and are calculated using a person-year methodology. Data may not sum to total due to rounding. For more information, please see CMS Program Statistics Data Source and Methodology. In 2015, the U.S. total includes Medicare beneficiaries residing in the following territories: American Samoa, Guam, the Northern Mariana Islands, Puerto Rico, and the U.S. Virgin Islands. Additionally, 432,840 Medicare beneficiaries residing in foreign countries and other outlying areas and 3,256 beneficiaries in unknown areas of residence are also included in this total.

SOURCE: Kaiser State Health Facts, Total Number of Medicare Beneficiaries, <http://kff.org/medicare/state-indicator/total-medicare-beneficiaries/>; CMS, CMS Program Statistics, accessed March 2016.

Upcoming Topic:

> Impact of Consumer-Directed Health Plans

FACT FILE PARTNER:



NATIONAL HEALTH SYSTEM PERFORMANCE

The 2016 winners of the Truven Health 15 Top Health Systems outperformed their peers in a number of ways. They saved more lives and caused fewer patient complications, followed industry-recommended standards of care more closely, released patients from the hospital a half-day sooner, readmitted patients less frequently and experienced fewer deaths within 30 days of admission, had over 12% shorter wait times in their emergency departments, had nearly 5% lower Medicare beneficiary cost per 30-day episode of care, and scored over 7 points higher on patient overall rating of care.

Performance measure	Winning Benchmark Health Systems (median)	Nonwinning Peer Group of U.S. Health Systems (median)	Actual Difference	Impact
Mortality index ¹	0.86	1.01	-0.15	Lower mortality
Complications index ¹	0.84	0.99	-0.15	Fewer complications
Core measures mean percent ²	95.3	93.2	2.14	Greater care compliance
30-day mortality rate (%) ³	11.8	12.0	-0.14	Lower 30-day mortality
30-day readmission rate (%) ³	15.0	15.7	-0.78	Lower 30-day readmissions
Average length of stay (LOS) (days) ¹	4.5	5.0	-0.51	Shorter stays
Emergency department (ED) measure mean minutes ⁴	146.0	166.4	-20.41	Less time-to-service
Medicare spend per beneficiary (MSPB) index ⁴	0.94	0.99	-0.05	Lower episode cost
HCAHPS score ⁴	269.5	262.4	7.09	Better patient care

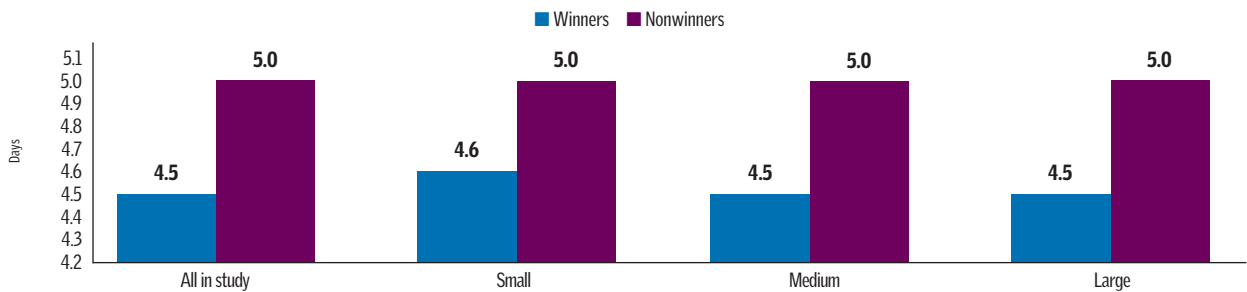
NOTES:

1. Mortality, complications, and average LOS based on present on admission (POA)-enabled risk models applied to MedPAR 2013 and 2014 data (average LOS 2014 only).
2. Core measures data from CMS Hospital Compare October 1, 2013–September 30, 2014 data set.
3. 30-day rates from CMS Hospital Compare July 1, 2011–June 30, 2014 data set.
4. ED measure, MSPB, and HCAHPS data from CMS Hospital Compare January 1, 2014–December 31, 2014 data set.

SOURCE: Truven Health Analytics.

SHORTER LENGTHS OF STAY

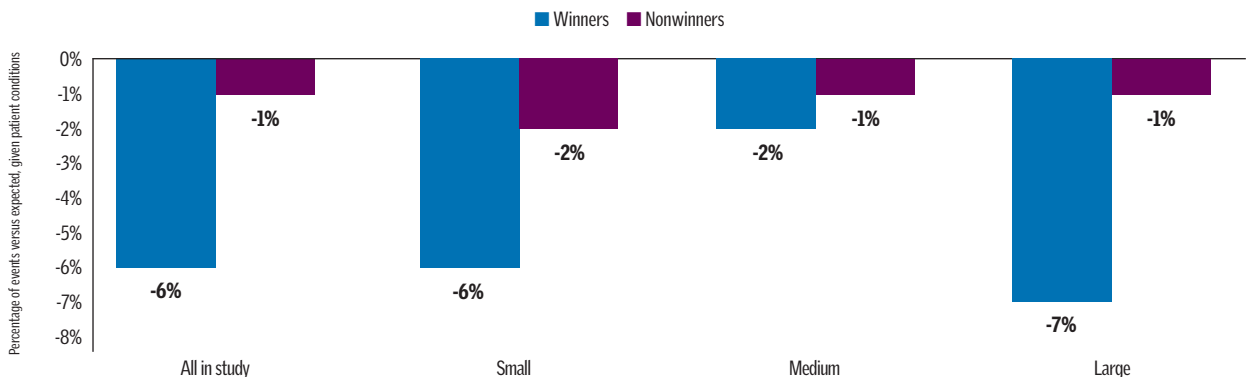
Patients treated at hospitals in the winning health systems returned home sooner. Winning systems had a median average LOS of 4.5 days, which is half a day shorter than their peers' median of 5.0 days. Average LOS difference between winners and nonwinners was consistent across all comparison groups, with benchmark systems discharging patients one-half day sooner.



SOURCE: Truven Health Analytics.

LOWER MEDICARE COST PER EPISODE

Medicare beneficiary episode-of-care costs were lower for patients discharged from winning health systems. Overall, winning systems had a 4.9% lower MSPB index than nonwinners. Large health system winners had the best performance with an MSPB index of 0.93 and outperformed their nonwinner peers by the widest margin—6.0%.



SOURCE: Truven Health Analytics.

