

Hospital mortality rates may be linked to performance on publicly reported medical conditions

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Hospital performance on publicly reported conditions (acute myocardial infarction [heart attack], congestive heart failure, and pneumonia), may potentially be used as a signal of overall hospital mortality rates, according to a study by Marta L. McCrum, M.D., of Harvard School of Public Health, Boston, and colleagues.

Using national [Medicare data](#) from 2,322 acute care hospitals, the authors examined whether mortality -rates for publicly reported medical conditions are correlated with hospitals' overall performance. The sample included 6,670,859 hospitalizations for Medicare fee-for-service beneficiaries from 2008 through 2009.

Hospitals at the top quartile of performance on publicly reported conditions had a 3.6 percent lower absolute risk-adjusted mortality rate on the combined medical-surgical composite than those in the bottom quartile. These top performers on publicly reported conditions had five times greater odds of being in the top quartile on the overall combined composite risk-adjusted mortality rate. Mortality rates for the conditions were predictive of medical and surgical performance when these groups were considered separately. Large size and teaching status showed weaker relationships with overall [hospital mortality rates](#), according to the study results.

"This finding has important implications for national quality improvement efforts that have focused on these three conditions and whose utility rests on the ability of these metrics to reflect broader hospital performance...understanding the systems and leadership characteristics common to hospitals that perform well on publicly reported conditions may help identify components of a truly good hospital that can be used to improve mortality rates at lower-performing institutions," the study

concludes.

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