Utah Hospital Comparison Report For Heart Surgeries and Conditions 2003-2005

Introduction •



Welcome to the 2007 Utah Hospital Comparison Report for Heart Surgeries and Conditions. If you or an adult family member has heart-related problems, you may find this report to be helpful as you consider where to receive treatment. The Utah Health Data Committee has provided this information to help you choose a hospital and make other decisions about your health care.

Hospital Quality and Safety

See the tables in this report for information comparing Utah's hospitals on the following indicators:

- Heart Bypass Surgery Deaths
- **Balloon Angioplasty Deaths**
- Heart Attack Deaths
- Heart Failure Deaths

Many factors affect a hospital's performance on quality measures. Read the online report for more information.

Note: The data include patients with do not resuscitate (DNR) orders and palliative care patients (terminally ill patients requesting comfort care only). Hospitals that treat a larger share of these patients may have higher-thanexpected mortality rates but still may be providing good quality care.

See the online report for more about the following:

- **Heart Bypass Surgery**
- **Balloon Angioplasty**
- Heart Attack
- Heart Failure

More information about quality indicators can be found at the Agency for Healthcare Research and Quality (AHRQ) web site (http://www.ahrq.gov).

National hospital rankings for easy-to-read quality measures such as heart attack and heart failure can be found at websites for Hospital Compare and HealthInsight.

Hospital Charges

See the tables in this report for information on comparing Utah's hospitals for the following surgeries or conditions:

- Heart Failure
- Heart Attack

- Coronary Bypass (CABG) with and without cardiac catheterization
- Balloon Angioplasty with and without heart attack
- Heart Catheterization for ischemic disease and except ischemic disease
- Heart Valve Procedures with and without heart catheterization

Your charges may be higher or lower than the average charges shown in the above tables. It is important to remember that "charge" is not the same as "total cost" or "total payment" to the hospital.

Note: Many factors will affect the cost for your hospital stay. Read more in the "About the Report" section later in this report. You can also find more information about these factors at the Utah PricePoint website (http://www.utpricepoint.org).

See the online report for more about the following:

- Heart Failure
- Heart Bypass Surgery
- Coronary Angioplasty
- **Heart Catheterization**
- Heart Valve Surgery
- Quality of Heart Attack and Heart Failure Treatments in Utah Hospitals

Please be aware that information in this report is neither intended nor implied to be a substitute for professional medical advice. Always ask questions and seek the advice of your physician or other qualified health provider prior to starting any new treatment.

CALL YOUR HEALTHCARE PROVIDER IMMEDIATELY IF YOU THINK YOU MAY HAVE A MEDICAL EMERGENCY.

Key Findings



How did Utah quality of care compare with the nation in 2003 through 2005?

For in-hospital deaths, Utah overall had fewer adult heart failure deaths than expected compared to similar patients nationwide. Utah overall had about as many deaths as expected for heart bypass surgery, balloon angioplasty and heart attacks compared to similar patients nationwide. Utah overall means all Utah hospitals combined. For more details, see the Technical Document.

From 2003 through 2005, in Utah hospitals that treated at least 30 patients with this procedure or condition:

- 202 out of 5,335 heart bypass surgery patients died (AHRQ IQI 12).
- 231 out of 14,722 balloon angioplasty patients died (AHRQ IQI 30).

- 442 out of 6,466 heart attack patients died (AHRQ IQI 32)
- 438 out of 10,319 heart failure patients died (AHRQ IQI 16).

When the patients at each Utah hospital are compared to similar patients nationwide (based on a statistical test, the Exact 95% Confidence Interval):

- Most hospitals had about the same percentage of in-hospital heart failure deaths as expected. Four hospitals had a lower percentage and two hospitals had a higher percentage than expected. Three additional hospitals treated at least 30 heart failure patients and had no deaths among their heart failure inpatients from 2003 through 2005.
- All Utah hospitals had about the same percentage of in-hospital adult heart patient deaths as expected for heart bypass, balloon angioplasty and heart attacks.

Note that many factors can affect in-hospital deaths at a particular hospital. Read more in "About the Report".

How did hospital charges differ among Utah hospitals?

Average hospital charge among adult inpatients for the heart procedures and conditions in this report differed widely in 2005. For more details, see the Technical Document. For patients at the minor/moderate illness level, average hospital charge ranged from:

- \$2,492 to \$15,518 among 39 Utah hospitals that reported charges for heart failure patients (APR-DRG 194).
- \$8,756 to \$16,340 among 15 Utah hospitals that reported charges for heart catheterization for ischemic disease (APR-DRG 192).
- \$54,636 to \$94,976 among 8 Utah hospitals that reported charges for heart valve procedures with heart catheterization (APR-DRG 162).

As expected, average hospital charge for patients treated at the major/extreme illness level was higher.

Note that many factors will affect hospital charges. Read more in "About the Report".

CMS treatment process measures

The Centers for Medicaid and Medicare Services (CMS) have created a web site. This site shows consumers how often hospitals throughout the nation use accepted treatment for heart patients and other kinds of patients. Read more at the HospitalCompare website.

About the Report

Why is this report important to me?

If you or someone you know has heart problems, you may find this report helpful when considering where to receive treatment. Hospitals can vary, sometimes quite a bit, in terms of what they charge and their quality and safety for patients.

This report is not intended to be anyone's sole source of information about hospital quality, safety and charges in Utah. Rather, it is designed to provide helpful information that can play an important role in choosing hospitals, along with other sources including doctor recommendations.

Why are you producing this report?

The 2007 Utah Hospital Comparison Report for Heart Surgeries and Conditions is one of a series of health care consumer reports that the Office of Health Care Statistics (OHCS) has developed in response to Senate Bill 132 (see http://www.le.state.ut.us/~2005/bills/sbillenr/sb0132.htm).

Consumers are encouraged to use the information in these reports to ask questions of their provider, hospital or insurance representative. Let them know you plan to take an active role in your health care decisions.

What is the purpose of the Utah Health Data Committee?

The Utah Health Data Committee was established by the Utah Legislature in 1990 to collect, analyze and distribute state Health Care data. Since December 2005, the Committee has released a series of consumer reports comparing health care in Utah's hospitals. Read more at http://www.health.utah.gov/hda/.

Who else helped to shape this report?

Utah citizens continually review our consumer reports to make sure they are understandable and easy to read. Public input helps us to create user-friendly reports for people who are not medical experts yet need useful health care information. Read more at http://health.utah.gov/myhealthcare/evaluation.html.

Leading physicians and health educators reviewed the report's medical information. Five bio-statisticians assisted in selecting the appropriate statistical method for comparing hospital performance.

About the Data



Where do the data come from?

Most of the data in this report come from inpatient hospital claim records. Utah hospitals are required by law to submit a standard set of information about each patient who spends at least one night in the hospital to the Office of Health Care Statistics, Utah Department of Health, for the Utah Hospital Discharge Database. The Agency for Health Care Research and Quality (AHRQ), a federal agency in charge of quality of care, provided

national information. Read more at http://www.ahrq.gov.

Have the data been verified by others?

Yes, Utah hospitals review the data for accuracy during a 30-day review period while the report is being developed. They review the completed report before it is released. Hospitals may submit comments to be posted on online as part of the report.

Why use these indicators/measures?

AHRQ developed the Inpatient Quality Indicators (IQIs) for in-hospital deaths used in this report. The IQIs allow comparison among Utah hospitals with similar patients nationwide. This report shows four IQIs for inhospital deaths, two common heart conditions and two common heart procedures. Read more at http://www.qualityindicators.ahrq.gov/.

The measure for average charge is an All Patient Refined Diagnosis Related Group (APR-DRG) for similar, though not identical, conditions and procedures. Read more at http://solutions.3m.com/wps/portal/3M/en_US/3MHIS/HealthInformationSystems/products-services/product-list/apr-drg-classification.

What are limitations of quality comparisons in the report?

Many factors affect a hospital's performance on quality and safety measures. Such factors include the hospital's size, the number of heart cases, available specialists, teaching status and especially how ill the hospital's patients are. Hospitals that treat high-risk (very ill) patients may have higher percentages of deaths than hospitals that transfer these patients. Hospitals that treat patients with do not resuscitate (DNR) orders or other terminally ill patients receiving palliative care (comfort care) only may have higher percentages of deaths. Hospitals may report patient diagnosis codes differently which could impact the comparison of quality measurement among hospitals. The quality indicators adjust for how ill each hospital's patients are, but the adjustment may not capture the full complexity of the patient's condition. The Utah Hospital Discharge Database includes up to nine diagnoses and up to six procedures for each patient. Some patients have additional diagnoses and procedures that are not included in this database. As a result, the measures of patient illness may not be complete. See the report's Glossary and Technical Document.

What are limitations of the charge comparisons in the report?

The average charge shown in this report differs from "costs," "reimbursement," "price" and "payment." Different payers have different arrangements with each hospital for payment. Many factors will affect the cost for your hospital stay, including whether you have health insurance, the type of insurance and the billing procedures at the hospital. This report excludes outlier (unusually high) charge cases and length of stay cases from the calculation of average charge (see Glossary). The indicators used in this report do <u>not</u> distinguish between patients expected to recover and patients with do not resuscitate (DNR) orders or other patients receiving only palliative care (comfort care).

Hospitals in Utah

County Name	Hospital Name	Location City, State, Zip	Phone Number	Open heart surgery	Cardiac catheterization
Beaver	Beaver Valley Hospital	Beaver, UT 84713	(435) 438-7100		
Beaver	Milford Valley Memorial Hospital	Milford, UT 84751	(435) 387-2411		
Box Elder	Bear River Valley Hospital	Tremonton, UT 84337	(435) 257-7441		
Box Elder	Brigham City Community Hospital	Brigham City, UT 84302	(435) 734-9471		
Cache	Cache Valley Specialty Hospital	North Logan, UT 84341	(435) 713-9700		
Cache	Logan Regional Hospital	Logan, UT 84341	(435) 716-1000		*
Carbon	Castleview Hospital	Price, UT 84501	(435) 637-4800		
Davis	Davis Hospital & Medical Center	Layton, UT 84041	(801) 807-1000		☆
Davis	Lakeview Hospital	Bountiful, UT 84010	(801) 299-2200		☆
Duchesne	Uintah Basin Medical Center	Roosevelt, UT 84066	(435) 722-4691		
Garfield	Garfield Memorial Hospital	Panguitch, UT 84759	(435) 676-8811		
Grand	Allen Memorial Hospital	Moab, UT 84532	(435) 259-7191		
Iron	Valley View Medical Center	Cedar City, UT 84720	(435) 868-5000		
Juab	Central Valley Medical Center	Nephi, UT 84648	(435) 623-3000		
Kane	Kane County Hospital	Kanab, UT 84741	(435) 644-5811		
Millard	Delta Community Medical Center	Delta, UT 84624	(435) 864-5591		
Millard	Fillmore Community Medical Center	Fillmore, UT 84631	(435) 743-5591		
Salt Lake	Alta View Hospital	Sandy, UT 84094	(801) 501-2600		*
Salt Lake	Cottonwood Hospital	Murray, UT 84107	(801) 314-5300		*
Salt Lake	Jordan Valley Hospital	West Jordan, UT 84088	(801) 561-8888		*
Salt Lake	LDS Hospital	Salt Lake City, UT 84143	(801) 408-1100	*	*
Salt Lake	Orthopedic Specialty Hospital	Salt Lake City, UT 84107	(801) 314-4100		

Hospitals in Utah (continued)

County Name	Hospital Name	Location City, State, Zip	Phone Number	Open heart surgery	Cardiac catheterization
Salt Lake	Pioneer Valley Hospital	West Valley City, UT 84120	(801) 964-3100		*
Salt Lake	Primary Children's Medical Center	Salt Lake City, UT 84113	(801) 662-1000	☆	*
Salt Lake	Salt Lake Regional Medical Center	Salt Lake City, UT 84102	(801) 350-4111	☆	*
Salt Lake	St. Mark's Hospital	Salt Lake City, UT 84124	(801) 268-7700	☆	☆
Salt Lake	University of Utah Hospital	Salt Lake City, UT 84132	(801) 581-2121	☆	☆
Salt Lake	Veteran's Medical Center	Salt Lake City, UT 84148	(801) 582-1565	☆	☆
San Juan	San Juan Hospital	Monticello, UT 84535	(435) 587-2116		
Sanpete	Gunnison Valley Hospital	Gunnison, UT 84634	(435) 528-7246		
Sanpete	Sanpete Valley Hospital	Mount Pleasant, UT 84647	(435) 462-2441		
Sevier	Sevier Valley Hospital	Richfield, UT 84701	(435) 896-8271		
Tooele	Mountain West Medical Center	Tooele, UT 84074	(435) 843-3600		
Uintah	Ashley Valley Medical Center	Vernal, UT 84078	(435) 789-3342		
Utah	American Fork Hospital	American Fork, UT 84003	(801) 855-3300		
Utah	Mountain View Hospital	Payson, UT 84651	(801) 465-7000		☆
Utah	Orem Community Hospital	Orem, UT 84057	(801) 224-4080		
Utah	Timpanogos Regional Hospital	Orem, UT 84057	(801) 714-6000	☆	☆
Utah	Utah Valley Regional Medical	Provo, UT 84603	(801) 373-7850	☆	☆
Wasatch	Heber Valley Medical Center	Heber City, UT 84032	(435) 654-2500		
Washington	Dixie Regional Medical Center	St. George, UT 84790	(435) 251-1000	☆	☆
Weber	McKay-Dee Hospital Center	Ogden, UT 84403	(801) 387-2800	☆	☆
Weber	Ogden Regional Medical Center	Ogden, UT 84405	(801) 479-2111	☆	☆

Balloon Angioplasty Deaths in Utah Hospitals (IQI 30)

Adults Age 40 Years and Over: 2003-2005

Hospital	Patients	Actual Deaths	Expected Deaths	Statistical Rating
Utah Overall	14,722	1.57%	1.61%	* *
Cottonwood Hospital	407	2.70%	1.80%	* *
Davis Hospital	357	2.24%	1.74%	* *
Dixie Regional Medical Center	1,658	1.39%	1.61%	* *
Lakeview Hospital	218	3.21%	1.84%	* *
LDS Hospital	3,249	1.20%	1.46%	* *
McKay-Dee Hospital	1,311	1.75%	1.92%	* *
Mountain View Hospital	322	1.86%	1.37%	* *
Ogden Regional	433	0.92%	1.97%	* *
Pioneer Valley Hospital	432	1.85%	2.01%	* *
Salt Lake Regional Medical Center	312	3.21%	2.32%	* *
St. Mark's Hospital	1,704	1.64%	1.33%	* *
Timpanogos Regional Hospital	361	1.66%	1.48%	* *
University Health Care	608	1.48%	1.97%	* *
Utah Valley Regional Medical Center	2,816	1.46%	1.58%	* *
Veterans Administration Medical Center	534	1.50%	1.27%	* *

All Utah hospitals had about as many deaths as expected compared to similar patients in the U.S.

The following hospital treated at least one patient but less than 30 patients: (none)

Statistical Rating: based on the Exact 95% Confidence Interval test of statistical significance, except hospitals with no deaths from 2003 through 2005 have three stars.

Click here to read Data Limitations.

Actual deaths: percentage of patients who received care for this condition or procedure and died in this hospital.

Heart Attack Deaths in Utah Hospitals (IQI 32)

Adults Age 18 Years or Over, Without Transfers: 2003-2005

Hospital	Patients	Actual Deaths	Expected Deaths	Statistical Rating
Utah Overall	6,466	6.84%	6.68%	* *
Cottonwood Hospital	404	6.93%	7.01%	* *
Davis Hospital	280	6.79%	4.14%	* *
Dixie Regional Medical Center	735	6.39%	7.59%	* *
Lakeview Hospital	220	6.36%	5.53%	* *
LDS Hospital	1,189	5.38%	6.47%	* *
Logan Regional Hospital	65	10.77%	11.63%	* *
McKay-Dee Hospital	664	5.72%	6.28%	* *
Mountain View Hospital	108	12.04%	7.89%	* *
Ogden Regional	272	4.78%	6.18%	* *
Pioneer Valley Hospital	343	7.00%	6.18%	* *
Salt Lake Regional Medical Center	234	5.56%	6.05%	* *
St. Mark's Hospital	605	8.26%	7.20%	* *
Timpanogos Regional	95	10.53%	7.81%	* *
University Health Care	558	6.09%	5.53%	* *
Utah Valley Regional Medical Center	508	7.09%	5.71%	* *

All Utah hospitals had about as many deaths as expected compared to similar patients in the U.S.

The following hospitals treated at least one patient but less than 30 patients:

Allen Memorial Hospital, Alta View Hospital, American Fork Hospital, Ashley Valley Hospital, Bear River Valley Hospital, Beaver Valley Hospital, Brigham City Community Hospital, Castleview Hospital, Central Valley Hospital, Delta Community Hospital, Garfield Memorial Hospital, Gunnison Valley Hospital, Heber Valley Hospital, Jordan Valley Hospital, Kane County Hospital, Mountain West Hospital, San Juan Hospital, Sanpete Valley Hospital, Sevier Valley Hospital, Uintah Basin Medical Center and Valley View Medical Center.

Statistical Rating: based on the Exact 95% Confidence Interval test of statistical significance, except hospitals with no deaths from 2003 through 2005 have three stars.

Click here to read Data Limitations.

Actual deaths: percentage of patients who received care for this condition or procedure and died in this hospital.

Heart Bypass Surgery Deaths in Utah Hospitals (IQI 19)

Adults Age 40 Years and Over: 2003-2005

Hospital	Patients	Actual Deaths	Expected Deaths	Statistical Rating
Utah Overall	5,335	3.79%	3.71%	* *
Dixie Regional Medical Center	535	2.24%	2.76%	* *
LDS Hospital	1,444	5.40%	5.38%	* *
McKay-Dee Hospital	724	2.35%	2.77%	* *
Ogden Regional Hospital	172	2.33%	2.55%	* *
Salt Lake Regional Medical Center	168	4.17%	1.78%	* *
St. Mark's Hospital	939	3.19%	3.26%	* *
University Health Care	403	4.71%	4.00%	* *
Utah Valley Regional Medical Center	680	3.82%	3.47%	* *
Veterans Administration Medical Center	265	3.40%	2.93%	* *

All Utah hospitals had about as many deaths as expected compared to similar patients in the U.S.

The following hospital treated at least one patient but less than 30 patients: Timpanogos Regional Hospital.

Statistical Rating: based on the Exact 95% Confidence Interval test of statistical significance, except hospitals with no deaths from 2003 through 2005 have three stars.

* * * Fewer deaths than expected (better)	* * Same as expected	* More deaths than expected
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Click here to read Data Limitations.

Actual deaths: percentage of patients who received care for this condition or procedure and died in this hospital.

Heart Failure Deaths in Utah Hospitals (IQI 16)

Adults Age 18 Years or Over: 2003-2005

Hospital	Patients	Actual Deaths	Expected Deaths	Statistical Rating
Utah Overall	10,319	4.24%	5.12%	* * *
Allen Memorial Hospital	32	0.00%	2.67%	* * *
Alta View Hospital	210	3.81%	8.35%	* * *
Garfield Memorial	40	0.00%	4.04%	* * *
LDS Hospital	1249	4.40%	6.00%	* * *
Ogden Regional	385	1.82%	5.21%	* * *
Sanpete Valley Hospital	40	0.00%	5.91%	* * *
St. Mark's Hospital	1087	3.13%	5.21%	* * *
American Fork Hospital	224	4.46%	4.18%	* *
Ashley Valley Hospital	97	2.06%	3.60%	* *
Beaver Valley Hospital	83	1.20%	3.63%	* *
Castleview Hospital	149	6.71%	5.64%	* *
Central Valley Hospital	60	6.67%	5.01%	* *
Cottonwood Hospital	407	5.16%	6.85%	* *
Dixie Regional	645	4.34%	5.54%	* *
Gunnison Valley Hospital	68	4.41%	1.71%	* *
Jordan Valley Hospital	173	5.20%	5.25%	* *
Kane County Hospital	46	2.17%	2.18%	* *
Lakeview Hospital	279	4.66%	5.17%	* *

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Most Utah hospitals had about as many deaths as expected compared to similar patients in the U.S.

The following hospitals treated at least one patient but less than 30 patients:

Bear River Valley Hospital, Brigham City Community Hospital, Cache Valley Specialty Hospital, Delta Community Hospital, Healthsouth Rehabilitation Hospital, Heber Valley Hospital, Milford Valley Hospital, Primary Children's Medical Center, Salt Lake Specialty Hospital (Promise) and San Juan Hospital.

Statistical Rating: based on the Exact 95% Confidence Interval test of statistical significance, except hospitals with no deaths from 2003 through 2005 have three stars.

NOTE: Hospitals are listed alphabetically within each star rating.

Click here to read Data Limitations.

Actual deaths: percentage of patients who received care for this condition or procedure and died in this hospital.

Heart Failure Deaths in Utah Hospitals (IQI 16)

For Years 2003-2005

Hospital	Patients	Actual Deaths	Expected Deaths	Rating
Utah Overall	10,319	4.24%	5.12%	0
Logan Regional Hospital	237	3.38%	4.04%	* *
McKay-Dee Hospital	804	3.73%	5.03%	* *
Mountain View Hospital	147	6.12%	4.93%	* *
Mountain West Hospital	141	2.13%	5.65%	* *
Pioneer Valley Hospital	315	2.86%	4.72%	* *
Salt Lake Regional	301	2.66%	4.89%	* *
Sevier Valley Hospital	103	8.74%	5.19%	* *
Timpanogos Regional Hospital	183	7.65%	4.85%	* *
Uintah Basin Hospital	57	7.02%	1.97%	* *
University Health Care	663	4.52%	4.29%	* *
Utah Valley Regional	911	4.94%	5.18%	* *
Valley View Medical Center	101	2.97%	3.67%	* *
Veterans Administration Medical Center	614	4.07%	4.89%	* *
Davis Hospital	280	7.50%	3.79%	*
Fillmore Community Medical Center	35	20.00%	4.54%	*

Most Utah hospitals had about as many deaths as expected compared to similar patients in the U.S.

The following hospitals treated at least one patient but less than 30 patients:

Bear River Valley Hospital, Brigham City Community Hospital, Cache Valley Specialty Hospital, Delta Community Hospital, Healthsouth Rehabilitation Hospital, Heber Valley Hospital, Milford Valley Hospital, Primary Children's Medical Center, Salt Lake Specialty Hospital (Promise) and San Juan Hospital.

Statistical Rating: based on the Exact 95% Confidence Interval test of statistical significance, except hospitals with no deaths from 2003 through 2005 have three stars.

NOTE: Hospitals are listed alphabetically within each star rating.

<u>Click here to read Data Limitations.</u>

Actual deaths: percentage of patients who received care for this condition or procedure and died in this hospital.

Balloon Angioplasty with Heart Attack (APR-DRG 174)

Average Hospital Charges for Adults 18 Years and Over, Utah: 2005

	Level of Illness				
	Mino	or/Moderate	Major/Extreme		
		Average		Average	
Hospital	Patients	Charge	Patients	Charge	
Utah Overall	1,281	\$32,622	370	\$51,584	
Cottonwood Hospital Medical Center	76	\$26,720	18	\$38,896	
Davis Hospital & Medical Center	65	\$43,704	10	\$60,972	
Dixie Regional Medical Center	138	\$31,540	46	\$54,848	
Lakeview Hospital	40	\$25,103	10	\$35,052	
LDS Hospital	216	\$27,871	82	\$53,380	
McKay-Dee Hospital Center	147	\$31,097	40	\$43,971	
Mountain View Hospital	20	\$33,186	7	\$42,106	
Ogden Regional Medical Center	33	\$42,113	14	\$57,211	
Pioneer Valley Hospital	77	\$43,131	27	\$52,458	
Salt Lake Regional Medical Center	38	\$38,763	9	\$45,766	
St. Mark's Hospital	94	\$44,444	19	\$67,270	
Timpanogos Regional Hospital	17	\$35,475	<5	\$63,146	
University Health Care	100	\$29,167	26	\$52,037	
Utah Valley Regional Medical Center	183	\$28,512	48	\$50,899	
Veterans Administration Medical Center	37	Not available	10	Not available	

Hospitals with heart catheterization and heart surgery programs: Dixie Regional Medical Center, LDS Hospital, McKay-Dee Hospital Center, Ogden Regional Medical Center, Salt Lake Regional Medical Center, St. Mark's Hospital, Timpanogos Medical Center, University Health Care, Utah Valley Regional Medical Center and Veterans Administration Medical Center.

Hospitals providing heart catheterization services but not open heart surgery: Cottonwood Hospital, Davis Hospital and Medical Center, Lakeview Hospital, Mountain View Hospital and Pioneer Valley Hospital.

Table Legend

< 5 = 1 to 4 patients

State average hospital length of stay

Minor/Moderate is 2.5 days Major/Extreme is 5.6 days

Click here to read Data Limitations.

Level of Illness: Compared to patients with minor/moderate level of illness, patients with major/extreme level of illness are likely to have more serious heart problems and other serious conditions that require more complex treatment.

Balloon Angioplasty without Heart Attack (APR-DRG 175)

Average Hospital Charges for Adults 18 Years and Over, Utah: 2005

	Level of Illness				
	Minor/M	oderate	Major/Extreme		
Hospital	Patients	Average Charge	Patients	Average Charge	
Utah Overall	3,267	\$27,807	447	\$40,724	
Cottonwood Hospital Medical Center	91	\$23,579	5	\$31,025	
Davis Hospital & Medical Center	31	\$38,007	5	\$43,227	
Dixie Regional Medical Center	477	\$28,099	39	\$38,950	
Lakeview Hospital	17	\$23,249	0	\$0	
LDS Hospital	797	\$24,372	121	\$35,392	
McKay-Dee Hospital Center	304	\$26,347	32	\$38,491	
Mountain View Hospital	48	\$28,980	8	\$44,084	
Ogden Regional Medical Center	45	\$39,463	8	\$63,484	
Pioneer Valley Hospital	64	\$39,407	16	\$52,486	
Salt Lake Regional Medical Center	51	\$31,529	14	\$49,113	
St. Mark's Hospital	398	\$35,209	44	\$57,482	
Timpanogos Regional Hospital	104	\$25,482	16	\$42,866	
University Health Care	87	\$30,117	31	\$32,639	
Utah Valley Regional Medical Center	611	\$25,792	82	\$38,115	
Veterans Administration Medical Center	142	Not available	26	Not available	

Hospitals with heart catheterization and heart surgery programs: Dixie Regional Medical Center, LDS Hospital, McKay-Dee Hospital Center, Ogden Regional Medical Center, Salt Lake Regional Medical Center, St. Mark's Hospital, Timpanogos Medical Center, University Health Care, Utah Valley Regional Medical Center and Veterans Administration Medical Center.

Hospitals providing heart catheterization services but not open heart surgery: Cottonwood Hospital, Davis Hospital and Medical Center, Lakeview Hospital, Mountain View Hospital and Pioneer Valley Hospital.

Table Legend

< 5 = 1 to 4 patients

State average hospital length of stay

Minor/Moderate is 1.5 days Major/Extreme is 4.2 days

Click here to read Data Limitations.

Level of Illness: Compared to patients with minor/moderate level of illness, patients with major/extreme level of illness are likely to have more serious heart problems and other serious conditions that require more complex treatment.

Coronary Bypass With Cardiac Catheterization (APR-DRG 165)

Average Hospital Charges for Adults 18 Years and Over, Utah: 2005

	Minor/Moderate		Major/Extreme	
		Average		Average
Hospital	Patients	Charge	Patients	Charge
Utah Overall	432	\$52,294	272	\$81,497
Dixie Regional Medical Center	100	\$47,099	56	\$73,166
LDS Hospital	64	\$50,566	45	\$96,757
McKay-Dee Hospital Center	78	\$49,084	54	\$72,822
Ogden Regional Medical Center	24	\$66,262	12	\$92,082
Salt Lake Regional Medical Center	10	\$71,612	10	\$90,086
St. Mark's Hospital	46	\$63,079	31	\$86,423
Timpanogos Regional Hospital	<5	\$71,567	<5	\$63,333
University Health Care	22	\$53,828	18	\$81,706
Utah Valley Regional Medical Center	79	\$49,558	36	\$78,635
Veterans Administration Medical Center	7	Not available	9	Not available

The hospitals in this table have heart catheterization and heart surgery programs.

Table Legend

< 5 = 1 to 4 patients

State average hospital length of stay

Minor/Moderate is 7.1 days Major/Extreme is 11.5 days

Click here to read Data Limitations.

Level of Illness: Compared to patients with minor/moderate level of illness, patients with major/extreme level of illness are likely to have more serious heart problems and other serious conditions that require more complex treatment.

Heart Bypass Surgery Without Heart Catheterization

(APR-DRG 166)

Average Hospital Charges for Adults 18 Years and Over, Utah: 2005

	Level of Illness				
	Minor/M	loderate	Major/Extreme		
		Average		Average	
Hospital	Patients	Charge	Patients	Charge	
Utah Overall	454	\$43,967	176	\$73,304	
Dixie Regional Medical Center	55	\$35,551	11	\$53,285	
LDS Hospital	75	\$41,573	39	\$76,908	
McKay-Dee Hospital Center	61	\$37,164	16	\$56,635	
Ogden Regional Medical Center	13	\$52,774	8	\$59,703	
Salt Lake Regional Medical Center	10	\$57,961	6	\$82,463	
St. Mark's Hospital	120	\$51,910	45	\$75,829	
Timpanogos Regional Hospital	<5	\$44,756	0	\$0	
University Health Care	50	\$44,553	19	\$87,874	
Utah Valley Regional Medical Center	40	\$39,447	11	\$74,189	
Veterans Administration Medical Center	28	Not available	21	Not available	

The hospitals in this table have heart catheterization and heart surgery programs.

Table Legend

< 5 = 1 to 4 patients

State average hospital length of stay

Minor/Moderate is 5.5 days Major/Extreme is 9.8 days

Click here to read Data Limitations.

Level of Illness: Compared to patients with minor/moderate level of illness, patients with major/extreme level of illness are likely to have more serious heart problems and other serious conditions that require more complex treatment.

Average Hospital Charges, Utah: 2005

	Level of Illness					
	Minor/Mo	derate	Major/Extreme			
Hospital	Patients	Average Charge		Average Charge		
Utah Overall	471	\$11,448	250	\$19,841		
Allen Memorial Hospital	<5	\$8,805	0	\$0		
Alta View Hospital	13	\$5,836	6	\$8,093		
American Fork Hospital	14	\$4,500	<5	\$11,448		
Ashley Valley Medical Center	6	\$7,304	0	\$0		
Bear River Valley Hospital	5	\$2,595	0	\$0		
Beaver Valley Hospital	<5	\$3,700	<5	\$2,677		
Castleview Hospital	8	\$4,737	<5	\$12,266		
Central Valley Medical Center	<5	\$6,412	0	\$0		
Cottonwood Hospital Medical Center	33	\$9,119	23	\$15,943		
Davis Hospital & Medical Center	8	\$14,333	9	\$22,284		
Delta Community Medical Center	<5	\$3,935	0	\$0		

Hospitals with heart catheterization and heart surgery programs: Dixie Regional Medical Center, LDS Hospital, McKay-Dee Hospital Center, Ogden Regional Medical Center, Salt Lake Regional Medical Center, St. Mark's Hospital, Timpanogos Medical Center, University Health Care, Utah Valley Regional Medical Center and Veterans Administration Medical Center.

Hospitals providing heart catheterization services but not open heart surgery: Cottonwood Hospital, Davis Hospital and Medical Center, Lakeview Hospital, Mountain View Hospital and Pioneer Valley Hospital.

The remaining hospitals do not have either a heart catheterization or heart surgery program.

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Table Legend

< 5 = 1 to 4 patients

State average hospital length of stay

Minor/Moderate is 2.2 days Major/Extreme is 4.3 days

Click here to read Data Limitations.

Level of Illness: Compared to patients with minor/moderate level of illness, patients with major/extreme level of illness are likely to have more serious heart problems and other serious conditions that require more complex treatment.

Average Hospital Charges, Utah: 2005

- CONTINUED -

	Level of Illness				
	Minor/Mo	derate	Major/F	Extreme	
		Average		Average	
Hospital	Patients	Charge	Patients	Charge	
Utah Overall	471	\$11,448	250	\$19,841	
Dixie Regional Medical Center	47	\$13,026	26	\$22,255	
Fillmore Community Medical Center	<5	\$4,704	0	\$0	
Garfield Memorial Hospital	<5	\$5,037	<5	\$18,062	
Gunnison Valley Hospital	<5	\$3,753	0	\$0	
Heber Valley Medical Center	0	\$0	<5	\$10,450	
Jordan Valley Hospital	17	\$11,516	< 5	\$42,339	
Lakeview Hospital	18	\$11,582	14	\$20,681	
LDS Hospital	41	\$12,455	29	\$19,173	
Logan Regional Hospital	24	\$8,951	10	\$15,683	
McKay-Dee Hospital Center	26	\$13,464	23	\$21,129	

Hospitals with heart catheterization and heart surgery programs: Dixie Regional Medical Center, LDS Hospital, McKay-Dee Hospital Center, Ogden Regional Medical Center, Salt Lake Regional Medical Center, St. Mark's Hospital, Timpanogos Medical Center, University Health Care, Utah Valley Regional Medical Center and Veterans Administration Medical Center.

Hospitals providing heart catheterization services but not open heart surgery: Cottonwood Hospital, Davis Hospital and Medical Center, Lakeview Hospital, Mountain View Hospital and Pioneer Valley Hospital.

The remaining hospitals do not have either a heart catheterization or heart surgery program.

Continued on Next Page

Table Legend

< 5 = 1 to 4 patients

State average hospital length of stay

Minor/Moderate is 2.2 days Major/Extreme is 4.3 days

Click here to read Data Limitations.

Level of Illness: Compared to patients with minor/moderate level of illness, patients with major/extreme level of illness are likely to have more serious heart problems and other serious conditions that require more complex treatment.

Average Hospital Charges, Utah: 2005

- CONTINUED -

	Level of Illness				
	Minor/Mo	derate	Major/F	Extreme	
		Average		Average	
Hospital	Patients	Charge	Patients	Charge	
Utah Overall	471	\$11,448	250	\$19,841	
Mountain View Hospital	6	\$12,278	<5	\$16,531	
Mountain West Medical Center	<5	\$6,751	0	\$0	
Ogden Regional Medical Center	15	\$17,258	7	\$17,767	
Pioneer Valley Hospital	27	\$18,741	23	\$23,280	
Salt Lake Regional Medical Center	7	\$15,639	7	\$33,083	
San Juan Hospital	<5	\$5,478	0	\$0	
Sanpete Valley Hospital	<5	\$6,544	<5	\$16,137	
Sevier Valley Hospital	<5	\$4,184	0	\$0	
St. Mark's Hospital	33	\$16,551	18	\$19,515	

Hospitals with heart catheterization and heart surgery programs: Dixie Regional Medical Center, LDS Hospital, McKay-Dee Hospital Center, Ogden Regional Medical Center, Salt Lake Regional Medical Center, St. Mark's Hospital, Timpanogos Medical Center, University Health Care, Utah Valley Regional Medical Center and Veterans Administration Medical Center.

Hospitals providing heart catheterization services but not open heart surgery: Cottonwood Hospital, Davis Hospital and Medical Center, Lakeview Hospital, Mountain View Hospital and Pioneer Valley Hospital.

The remaining hospitals do not have either a heart catheterization or heart surgery program.

Continued on Next Page

Table Legend

< 5 = 1 to 4 patients

State average hospital length of stay

Minor/Moderate is 2.2 days Major/Extreme is 4.3 days

Click here to read Data Limitations.

Level of Illness: Compared to patients with minor/moderate level of illness, patients with major/extreme level of illness are likely to have more serious heart problems and other serious conditions that require more complex treatment.

Average Hospital Charges, Utah: 2005

- CONTINUED -

	Level of Illness				
	Minor/Mo	derate	Major/I	Extreme	
		Average		Average	
Hospital	Patients	Charge	Patients	Charge	
Utah Overall	471	\$11,448	250	\$19,841	
Timpanogos Regional Hospital	5	\$11,388	5	\$10,158	
Uintah Basin Medical Center	6	\$5,999	<5	\$9,962	
University Health Care	14	\$15,592	10	\$22,812	
Utah Valley Regional Medical Center	32	\$10,596	13	\$23,283	
Valley View Medical Center	12	\$4,283	<5	\$8,837	
Veterans Administration Medical Center	27	Not available	9	Not available	

Hospitals with heart catheterization and heart surgery programs: Dixie Regional Medical Center, LDS Hospital, McKay-Dee Hospital Center, Ogden Regional Medical Center, Salt Lake Regional Medical Center, St. Mark's Hospital, Timpanogos Medical Center, University Health Care, Utah Valley Regional Medical Center and Veterans Administration Medical Center.

Hospitals providing heart catheterization services but not open heart surgery: Cottonwood Hospital, Davis Hospital and Medical Center, Lakeview Hospital, Mountain View Hospital and Pioneer Valley Hospital.

The remaining hospitals do not have either a heart catheterization or heart surgery program.

Table Legend

< 5 = 1 to 4 patients

State average hospital length of stay

Minor/Moderate is 2.2 days Major/Extreme is 4.3 days

Click here to read Data Limitations.

Level of Illness: Compared to patients with minor/moderate level of illness, patients with major/extreme level of illness are likely to have more serious heart problems and other serious conditions that require more complex treatment.

Heart Catheterization - for Ischemic Disease (APR-DRG 192)

Average Hospital Charges for Adults 18 Years and Over, Utah: 2005

	Level of Illness				
	Minor/M	oderate	Major/Extreme		
Hospital	Patients	Average Charge	Patients	Average Charge	
Utah Overall	1,485	\$11,298	147	\$16,175	
Cottonwood Hospital Medical Center	96	\$8,756	7	\$12,062	
Davis Hospital & Medical Center	32	\$14,313	3	\$16,503	
Dixie Regional Medical Center	241	\$9,182	16	\$15,019	
Lakeview Hospital	14	\$13,543	0	\$0	
LDS Hospital	186	\$9,755	22	\$13,944	
Logan Regional Hospital	61	\$8,861	6	\$12,378	
McKay-Dee Hospital Center	118	\$10,918	10	\$17,015	
Mountain View Hospital	50	\$13,968	3	\$15,733	
Ogden Regional Medical Center	66	\$12,850	6	\$19,854	
Pioneer Valley Hospital	100	\$16,340	12	\$23,765	
Salt Lake Regional Medical Center	45	\$14,357	5	\$16,843	
St. Mark's Hospital	181	\$14,518	12	\$22,566	
Timpanogos Regional Hospital	32	\$12,708	1	\$15,281	
University Health Care	66	\$10,630	10	\$14,812	
Utah Valley Regional Medical Center	147	\$8,886	20	\$12,795	
Veterans Administration Medical Center	50	Not available	14	Not available	

Hospitals with heart catheterization and heart surgery programs: Dixie Regional Medical Center, LDS Hospital, McKay-Dee Hospital Center, Ogden Regional Medical Center, Salt Lake Regional Medical Center, St. Mark's Hospital, Timpanogos Medical Center, University Health Care, Utah Valley Regional Medical Center and Veterans Administration Medical Center.

Hospitals providing heart catheterization services but not open heart surgery: Cottonwood Hospital, Davis Hospital and Medical Center, Lakeview Hospital, Mountain View Hospital and Pioneer Valley Hospital.

Table Legend State average hospital length of stay Minor/Moderate is 1.5 days Major/Extreme is 3.0 days

Click here to read Data Limitations.

Level of Illness: Compared to patients with minor/moderate level of illness, patients with major/extreme level of illness are likely to have more serious heart problems and other serious conditions that require more complex treatment.

Heart Catheterization - with Circulatory Disorder Except Ischemic Heart Disease (APR-DRG 191)

Average Hospital Charges for Adults 18 Years and Over, Utah: 2005

	Level of Illness				
	Minor/N	Moderate	Major/Extreme		
		Average		Average	
Hospital	Patients	Charge	Patients	Charge	
Utah Overall	316	\$13,631	442	\$22,057	
Cottonwood Hospital Medical Center	20	\$9,848	25	\$15,131	
Davis Hospital & Medical Center	6	\$14,377	17	\$24,682	
Dixie Regional Medical Center	36	\$11,695	53	\$21,691	
Garfield Memorial Hospital	< 5	\$8,596	0	\$0	
Lakeview Hospital	< 5	\$18,767	< 5	\$24,405	
LDS Hospital	68	\$12,682	81	\$23,682	
Logan Regional Hospital	< 5	\$12,820	10	\$12,360	
McKay-Dee Hospital Center	30	\$12,882	24	\$18,923	
Mountain View Hospital	9	\$18,650	6	\$19,470	
Ogden Regional Medical Center	9	\$17,383	17	\$22,671	
Pioneer Valley Hospital	9	\$20,994	23	\$26,769	
Salt Lake Regional Medical Center	8	\$19,379	13	\$23,319	
St. Mark's Hospital	30	\$17,240	42	\$26,824	
Timpanogos Regional Hospital	<5	\$12,619	7	\$31,580	
University Health Care	27	\$14,338	37	\$22,605	
Utah Valley Regional Medical Center	31	\$10,773	48	\$17,359	
Veterans Administration Medical Center	22	Not available	36	Not available	

Hospitals with heart catheterization and heart surgery programs: Dixie Regional Medical Center, LDS Hospital, McKay-Dee Hospital Center, Ogden Regional Medical Center, Salt Lake Regional Medical Center, St. Mark's Hospital, Timpanogos Medical Center, University Health Care, Utah Valley Regional Medical Center and Veterans Administration Medical Center.

Hospitals providing heart catheterization services but not open heart surgery: Cottonwood Hospital, Davis Hospital and Medical Center, Lakeview Hospital, Mountain View Hospital and Pioneer Valley Hospital.

Table Legend

< 5 = 1 to 4 patients

State average hospital length of stay

Minor/Moderate is 2.5 days Major/Extreme is 5.0 days

Click here to read Data Limitations.

Level of Illness: Compared to patients with minor/moderate level of illness, patients with major/extreme level of illness are likely to have more serious heart problems and other serious conditions that require more complex treatment.

Heart Failure (APR-DRG 194)

Average Hospital Charges for Adults 18 Years and Over, Utah: 2005

	Level of Illness				
	Minor/Mo	oderate	Major/Extreme		
		Average		Average	
Hospital	Patients	Charge	Patients	Charge	
Utah Overall	1,779	\$9,350		\$16,195	
Allen Memorial Hospital	10	\$5,061	0	\$0	
Alta View Hospital	37	\$7,128	45	\$11,162	
American Fork Hospital	77	\$9,169	12	\$9,395	
Ashley Valley Medical Center	19	\$6,288	<5	\$7,212	
Bear River Valley Hospital	6	\$4,317	<5	\$4,414	
Beaver Valley Hospital	25	\$3,888	6	\$5,034	
Brigham City Community Hospital	7	\$5,070	<5	\$7,210	
Cache Valley Specialty Hospital	<5	\$4,426	0	\$0	
Castleview Hospital	26	\$8,341	21	\$10,823	
Central Valley Medical Center	12	\$7,153	7	\$12,799	
Cottonwood Hospital Medical Center	69	\$8,421	52	\$12,911	
Davis Hospital & Medical Center	63	\$10,852	16	\$19,907	
Delta Community Medical Center	13	\$5,389	<5	\$5,590	
Dixie Regional Medical Center	82	\$9,323	52	\$17,346	
Fillmore Community Medical Center	13	\$3,656	5	\$7,628	
Garfield Memorial Hospital	9	\$7,696	5	\$10,448	

Hospitals with heart catheterization and heart surgery programs: Dixie Regional Medical Center, LDS Hospital, McKay-Dee Hospital Center, Ogden Regional Medical Center, Salt Lake Regional Medical Center, St. Mark's Hospital, Timpanogos Medical Center, University Health Care, Utah Valley Regional Medical Center and Veterans Administration Medical Center.

Hospitals providing heart catheterization services but not open heart surgery: Cottonwood Hospital, Davis Hospital and Medical Center, Lakeview Hospital, Mountain View Hospital and Pioneer Valley Hospital.

The remaining hospitals do not have either a heart catheterization or heart surgery program.

Continued on Next Page

Table Legend

< 5 = 1 to 4 patients

State average hospital length of stay

Minor/Moderate is 3.2 days Major/Extreme is 5.1 days

Click here to read Data Limitations.

Level of Illness: Compared to patients with minor/moderate level of illness, patients with major/extreme level of illness are likely to have more serious heart problems and other serious conditions that require more complex treatment.

Heart Failure (APR-DRG 194)

Average Hospital Charges for Adults 18 Years and Over, Utah: 2005

- CONTINUED -

		Level of Illness				
	Minor/Mo	oderate	Major/Extreme			
		Average		Average		
Hospital	Patients	Charge	Patients	Charge		
Utah Overall	1,779	\$9,350	967	\$16,195		
Gunnison Valley Hospital	39	\$5,304	<5	\$1,832		
Heber Valley Medical Center	6	\$5,462	<5	\$25,702		
Jordan Valley Hospital	57	\$11,656	40	\$19,210		
Kane County Hospital	12	\$5,133	0	\$0		
Lakeview Hospital	62	\$10,113	35	\$17,509		
LDS Hospital	128	\$10,325	98	\$17,721		
Logan Regional Hospital	35	\$8,122	21	\$11,358		
McKay-Dee Hospital Center	149	\$9,452	92	\$15,986		
Milford Valley Memorial Hospital	<5	\$2,492	0	\$0		
Mountain View Hospital	33	\$10,329	20	\$13,369		
Mountain West Medical Center	22	\$14,446	11	\$16,288		

Hospitals with heart catheterization and heart surgery programs: Dixie Regional Medical Center, LDS Hospital, McKay-Dee Hospital Center, Ogden Regional Medical Center, Salt Lake Regional Medical Center, St. Mark's Hospital, Timpanogos Medical Center, University Health Care, Utah Valley Regional Medical Center and Veterans Administration Medical Center.

Hospitals providing heart catheterization services but not open heart surgery: Cottonwood Hospital, Davis Hospital and Medical Center, Lakeview Hospital, Mountain View Hospital and Pioneer Valley Hospital.

The remaining hospitals do not have either a heart catheterization or heart surgery program.

Continued on Next Page

Table Legend

< 5 = 1 to 4 patients

State average hospital length of stay

Minor/Moderate is 3.2 days Major/Extreme is 5.1 days

Click here to read Data Limitations.

Level of Illness: Compared to patients with minor/moderate level of illness, patients with major/extreme level of illness are likely to have more serious heart problems and other serious conditions that require more complex treatment.

Heart Failure (APR-DRG 194)

Average Hospital Charges for Adults 18 Years and Over, Utah: 2005

- CONTINUED -

	Level of Illness			
	Minor/Mo	oderate	Major/Extreme	
		Average		Average
Hospital	Patients	Charge	Patients	Charge
Utah Overall	1,779	\$9,350	967	\$16,195
Ogden Regional Medical Center	79	\$9,161	53	\$14,646
Pioneer Valley Hospital	61	\$13,124	37	\$22,608
Salt Lake Regional Medical Center	46	\$11,184	19	\$17,524
San Juan Hospital	<5	\$3,429	<5	\$17,147
Sanpete Valley Hospital	8	\$9,191	5	\$7,760
Sevier Valley Hospital	13	\$6,445	7	\$9,565
St. Mark's Hospital	171	\$10,407	93	\$18,396
Timpanogos Regional Hospital	26	\$11,325	19	\$22,812
Uintah Basin Medical Center	15	\$5,390	<5	\$17,980
University Health Care	111	\$9,113	39	\$16,900
Utah Valley Regional Medical Center	122	\$9,940	75	\$18,423
Valley View Medical Center	27	\$6,367	9	\$11,026
Veterans Administration Medical Center	84	Not available	59	Not available

Hospitals with heart catheterization and heart surgery programs: Dixie Regional Medical Center, LDS Hospital, McKay-Dee Hospital Center, Ogden Regional Medical Center, Salt Lake Regional Medical Center, St. Mark's Hospital, Timpanogos Medical Center, University Health Care, Utah Valley Regional Medical Center and Veterans Administration Medical Center.

Hospitals providing heart catheterization services but not open heart surgery: Cottonwood Hospital, Davis Hospital and Medical Center, Lakeview Hospital, Mountain View Hospital and Pioneer Valley Hospital.

The remaining hospitals do not have either a heart catheterization or heart surgery program.

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< 5 = 1 to 4 patients

State average hospital length of stay

Minor/Moderate is 3.2 days Major/Extreme is 5.1 days

Click here to read Data Limitations.

Level of Illness: Compared to patients with minor/moderate level of illness, patients with major/extreme level of illness are likely to have more serious heart problems and other serious conditions that require more complex treatment.

Heart Valve Procedures With Heart Catheterization (APR-DRG 162)

Average Hospital Charges for Adults 18 Years and Over, Utah: 2005

	Level of Illness				
	Minor/Moderate Major/Extreme				
		Average		Average	
Hospital	Patients	Charge	Patients	Charge	
Utah Overall	92	\$64,310	124	\$112,787	
Dixie Regional Medical Center	20	\$54,636	10	\$86,648	
LDS Hospital	36	\$58,728	49	\$111,966	
McKay-Dee Hospital Center	11	\$75,420	14	\$91,269	
Ogden Regional Medical Center	<5	\$94,976	<5	\$158,955	
Salt Lake Regional Medical Center	<5	\$81,613	<5	\$180,617	
St. Mark's Hospital	9	\$85,006	19	\$120,256	
University Health Care	<5	\$71,064	6	\$109,107	
Utah Valley Regional Medical Center	11	\$64,364	21	\$123,765	
Veterans Administration Medical Center	<5	Not available	0	Not available	

The hospitals in this table have heart catheterization and heart surgery programs.

Table Legend

< 5 = 1 to 4 patients

State average hospital length of stay

Minor/Moderate is 7.4 days Major/Extreme is 14.3 days

Click here to read Data Limitations.

Level of Illness: Compared to patients with minor/moderate level of illness, patients with major/extreme level of illness are likely to have more serious heart problems and other serious conditions that require more complex treatment.

Heart Valve Procedures Without Heart Catheterization (APR-DRG 163)

Average Hospital Charges for Adults 18 Years and Over, Utah: 2005

		Level of Illness				
	Minor/Moderate Major/Extreme					
Hospital	Patients	Average Charge	Patients	Average Charge		
Utah Overall	317					
Dixie Regional Medical Center	43	\$48,160	20	\$63,735		
LDS Hospital	79	\$53,791	65	\$105,605		
McKay-Dee Hospital Center	32	\$63,092	32	\$89,296		
Ogden Regional Medical Center	<5	\$68,295	0	\$0		
Salt Lake Regional Medical Center	<5	\$70,040	5	\$105,349		
St. Mark's Hospital	75	\$59,180	45	\$97,092		
University Health Care	60	\$52,419	25	\$91,185		
Utah Valley Regional Medical Center	17	\$59,232	27	\$77,640		
Veterans Administration Medical Center	7	Not available	14	Not available		

The hospitals in this table have heart catheterization and heart surgery programs.

Table Legend

< 5 = 1 to 4 patients

State average hospital length of stay

Minor/Moderate is 5.5 days Major/Extreme is 10.9 days

Click here to read Data Limitations.

Level of Illness: Compared to patients with minor/moderate level of illness, patients with major/extreme level of illness are likely to have more serious heart problems and other serious conditions that require more complex treatment.

Become an Informed Healthcare Consumer



Take responsibility for your health

Be proactive in your family's health care. You have some control over many health conditions through your own lifestyle choices.

- **Learn how your heart works** and what it needs to stay healthy. The more you know, the more likely you are to prevent problems and know when to see your doctor.
- Stay active. Inactivity may lead to excess weight. Excess weight leads to strain on your heart, increase in blood pressure and cholesterol, and risk of diabetes. Discuss with your doctor what level and type of activity would be best for you.
- **Develop and maintain a healthy diet** that is high in fruits, vegetables, whole grains, lean meats and low in saturated fats.
- **Learn to manage your stress**. When not dealt with, stress can cause physical problems that damage your heart.
- **Don't avoid the doctor**. Keep your doctor informed of your personal and family medical history. Keep your physical exams up to date, especially if you have risk factors.
- **Learn about your medical coverage** before you have a medical emergency.

Be informed

Learn about your own and your family's illnesses. Consider yourself a partner in your care and treatment.

- **Learn the signs of a heart attack and what steps to take**, you can save a life maybe your own.
- **Understand medications used to treat heart conditions** and get details on them.
- **Properly manage your medications** by ordering a free Medication Management Checkbook --- courtesy of the Utah Department of Health. See http://www.checkyourhealth.org/materials/med_management.htm.
- **Remember, kids are at risk for heart disease too.** Be sure to teach and provide them what they need to live heart healthy lives.
- Ask the right questions of your health care provider. Take control of your own health!

Plan ahead

Learn how to select a health plan that meets your needs before you become ill or need medical services. Select doctors and hospitals you trust. Check that they will work with your insurance company and are reasonably priced.

Be certain to protect your wishes. If you and your family decide on do not resuscitate (DNR) orders or end of life care, discuss this with your doctor and the hospital.

• Take care of legal documents before you or a family member needs medical treatment. The Department of Aging and Adult Services provides free copies of Living Will and Power of Attorney for Health Care (Advance Directives) forms. See their website at http://daas.utah.gov/ for more information.

Be knowledgeable

Learn about your health insurance plan or medical benefits. Many companies offer several insurance plans such as preferred provider organizations (PPOs) or health maintenance organizations (HMOs). Each plan differs in what it covers, its limits of coverage, and the rules that apply to the plan. Read more about the quality and cost of health plans in Utah on the MyHealthCare (http://health.utah.gov/myhealthcare) website.

Know your personal and family medical history

- The Utah Department of Health provides an easy-to-use Family Health History Toolkit so you can get started today. See at: http://health.utah.gov/genomics/familyhistory/toolkit.html.
- Know your rights and responsibilities as a patient.
- Know the rules of your insurance plan before you use medical services.

If you need treatment

- **Review your options**. The American Heart Association helps you to review treatment options, possible side effects, success rates and questions to ask your healthcare provider.
- **Develop a treatment plan.** It takes a team to develop and maintain a successful health program.
- **Follow medication directions**. If you are prescribed medications, take them exactly as directed. Maintain open discussion with your doctor about medications that might be beneficial to you if you discover arising problems.
- **Speak up!** No one knows more about you than you do! Tell your doctor about your symptoms and what you think may be causing them. Ask what types of treatments are available and why your health care professionals are suggesting one treatment rather than another.

See Additional Resources for more information

Please be aware that information in this report is neither intended nor implied to be a substitute for professional medical advice. Always ask questions and seek the advice of your physician or other qualified health provider prior to starting any new treatment.

CALL YOUR HEALTHCARE PROVIDER IMMEDIATELY IF YOU THINK YOU MAY HAVE A MEDICAL EMERGENCY.

Why use these indicators/measures?



APR-DRGs

Measures for average hospital charge are All Patient Refined Diagnosis Related Groups (APR-DRGs) for similar, though not identical, kinds of heart conditions and procedures in this report's quality of care section. APR-DRG software, widely used in health care research, organizes about 20,000 clinical diagnoses and procedures into about 300 groups.

Each APR-DRG has four severity of illness levels. This report shows average hospital charge for minor and moderate severity of illness levels combined and average hospital charge for major and extreme severity of illness levels combined. This report uses APR-DRG version 20.0, because the Agency for Healthcare Research and Quality (AHRQ) uses it for expected rate and risk-adjusted rate in the Inpatient Quality Indicators (IQIs).

Note that other Utah Department of Health reports that include average charge information use APR-DRG Version 15.0 for data from 2004 and earlier.

AHRQ Inpatient Quality Indicators

The Agency for Health Care Research and Quality (AHRQ), a federal agency in charge of quality of care, developed the Inpatient Quality Indicators (IQIs) used in this report. The IQIs allow comparison among Utah patients and other U.S. hospitals that treated similar patients based on the State Inpatient Databases 2004 through the expected rate. These databases represent about 90% of all inpatients in the U.S. from 38 participating states in 2004. The Health Care Cost and Utilization Project (HCUP) collects these data every year.

The AHRQ IQIs are nationally recognized indicators, in compliance with the mandates of Senate Bill 132, the Health Care Consumer's Report Bill passed in 2005.

AHRQ Patient Safety Indicators

The Agency for Health Care Research and Quality (AHRQ), a federal agency in charge of quality of care, developed the Patient Safety Indicators (PSIs) used for the hospital comparison reports when applicable. The PSIs allow comparison among Utah patients and other U.S. hospitals that treated similar patients based on the State Inpatient Databases 2004 through the expected rate. These databases represent about 90% of all inpatients in the U.S. from 38 participating states in 2004. The Health Care Cost and Utilization Project (HCUP) collects these data every year. Read more at http://hcupnet.ahrq.gov/

The Patient Safety Indicators (PSIs) are used as a tool to help identify potential adverse events occurring during hospitalization. Adverse events are undesirable and unintended injuries due to medical care or omission of necessary medical care. Widespread consensus exists that health care organizations can reduce patient injuries by improving the environment for safety. Read more at http://www.qualityindicators.ahrq.gov/

The AHRO PSIs are nationally recognized indicators, in compliance with the mandates of Senate Bill 132, the Health Care Consumer's Report Bill passed in 2005.

General Terms Used in This Report



Actual death percentage: the actual number of deaths per 100 patients with a certain condition or procedure. Actual death percentage does not adjust for the hospital's case mix. Other name: observed death rate per 100 patients. Some measures exclude transfer patients.

Actual Rate: The actual rate is the number of events that occurred for every 100 patients for some indicators and for every 1,000 patients for other indicators. This rate is not risk-adjusted.

Agency for Health Care Research and Quality (AHRQ): a federal agency that develops indicators of patient safety and quality of care and engages in other related activities.

Allergic reaction: swollen glands, trouble breathing and other body reactions that can be life threatening.

APR-DRG: stands for All Patient Refined Diagnosis Related Group, software widely used in health services research. The APR-DRG software organizes about 20,000 clinical diagnoses and procedures into about 300 groups. Each APR-DRG has four levels for severity of illness. This report combines the Minor and Moderate levels and combines the Major and Extreme levels for the average hospital charge tables. This report uses APR-DRG version 20.0. Read more at www.3m.com/us/healthcare/his/products/coding/refined_drg.jhtml

Average charge: the average dollars for hospital services for which patients were billed at a particular hospital. The charge does not include physicians' professional fees or patient personal costs. The charge may differ from actual payment that the hospital receives. For this report high outlier charges were excluded from each hospital's average charge. A high outlier (unusually high) charge is over 2.5 standard deviations higher than the state mean for each of four subclasses of severity of illness per APR-DRG.

Expected death percentage: the number of deaths expected per 100 patients with a certain condition or procedure based on similar patients nationwide in the Health Care Cost and Utilization Project (HCUP) State Inpatient Databases for 2003. Expected death percentage adjusts for the hospital's case mix (patients' age, gender and how ill the patients are). Read more at www.qualityindicators.ahrq.gov/downloads/iqi/iqi_guide_v31.pdf.

Expected Rate: the number of patients expected for every 100 patients for some indicators and for every 1,000 patients for other indicators with a certain condition or procedure based on similar patients nationwide in the Health Care Cost and Utilization Project (HCUP) State Inpatient Databases for 2003. Expected rate adjusts for the hospital's case mix (patients' age, gender and how ill the patients are). Read more at www.qualityindicators.ahrq.gov/downloads/iqi/iqi guide v31.pdf.

Inpatient Quality Indicators (IQI): were developed by the Agency for Health Care Research and Quality (AHRQ), a federal agency, to be used on inpatient hospital discharge data. AHRQ IQI definitions and methods were used to calculate the actual and expected deaths rates conditions and procedures in this report. AHRQ IQI limitations include possible differences in hospital coding practices and possible inadequacy of the risk adjustment method for expected death percentage. The AHRQ IQIs and APR-DRGs in Utah Hospital Comparison reports are similar but not identical. See this report's Technical Document. Read more at www.qualityindicators.ahrq.gov/downloads/iqi/iqi_guide_v31.pdf

Outlier charge: a charge by a specified hospital that is more than 2.5 standard deviations higher than the state average by APR-DRG and severity of illness level. This report excludes outlier charge cases. See the Technical Document.

Patient Safety Indicators (PSIs): Patient safety is quality improvement of health care to reduce medical injuries (e.g., injuries to patients in a health care setting such as a hospital). The Agency for Healthcare Research and Quality (AHRQ), a federal agency, has developed a set of indicators of patient safety based on the inpatient hospital discharge data. Although hospital discharge data do have some limitations, research shows that PSIs may serve as proxies for patient safety-related performance. AHRQ PSI definitions and analytical methods were used to calculate the three indicators. Read more at www.qualityindicators.ahrq.gov/ **Severity of illness:** Utah Hospital Comparison reports use two levels of illness based on the APR-DRG's four subclasses for severity of illness (SOI): Minor/Moderate and Major/Severe. Read more in the Technical Document.

Star rating system: Utah Hospital Comparison reports use star rating based on a test of statistical significance, the exact 95% confidence interval. For the Heart Surgeries and Conditions Report and the Hip and Knee Surgeries and Conditions Report, this test shows whether the difference between a hospital's actual death percentage and expected death percentage is real (statistically significant, p < 0.05) or just due to chance. We calculated the upper and lower exact 95% confidence interval limits for each hospital's actual death rate for each indicator. If the expected death percentage is between the lower and higher limits for the actual death percentage, then we are 95% confident that the actual death rate and the expected death rate are essentially the same. If the higher limit for the actual death percentage is lower than the expected death percentage, then we are 95% confident that the actual death percentage is really lower than the expected death rate. If the lower limit for the actual death percentage is higher than the expected death percentage, then we are 95% confident that the actual death rate is really higher than the expected death rate. See the Technical Document.

State Inpatient Databases (SID) 2003: a national sample that represents about 90% of all inpatients from 38 participating states in 2003. The Health Care Cost and Utilization Project (HCUP) collects these data every year. For this report, the percentage of expected deaths for the quality indicators is adjusted using the SID 2003. Read more at www.hcup-us.ahrq.gov/sidoverview.jsp#What.

Statistically significant difference: the star ratings in the AHRQ IQI tables use exact 95% confidence intervals to show whether differences are statistically significant (p < 0.05). Read more in the Technical Document.

Utah overall: for each specified condition or procedure and severity of illness group (Minor/Moderate or Major/Extreme), all adult cases treated at all Utah hospitals, except some specialty hospitals such as Primary Children's Medical Center. Utah overall average charge is the sum of all reported hospital charges billed to all patients treated at Utah hospitals divided by the number of Utah overall cases except the Veterans Administration. The AHRQ IQI tables include only Utah residents. The APR-DRGs tables include Utah resident and non-resident patients.

Heart Related Terms Used in This Report



Acute myocardial infarction, acute MI, AMI, myocardial infarction or MI: see heart attack.

Angioplasty: see balloon angioplasty.

Balloon angioplasty: a balloon catheter is used to open narrowed or blocked blood vessels of the heart. The balloon catheter is a thin flexible tube with a tiny balloon near its end. The balloon is filled and emptied to open the artery so blood can flow through it. Other names: angioplasty; coronary angioplasty; coronary artery angioplasty; cardiac angioplasty; percutaneous coronary intervention (PCI); percutaneous transluminal coronary angioplasty (PTCA); heart artery dilation, heart angioplasty, heart artery angioplasty. For the definition of the indicators used, see the Technical Document for this heart report.

Cardiac catheterization, heart catheterization: a doctor threads a catheter (thin flexible tube) from an artery or vein in the neck, arm or thigh into the heart arteries or inside the heart. For the definition of the indicators used, see the Technical Document for this heart report.

Cardiac valve procedure, heart valve procedure: repair or replacement of diseased or damaged heart valves. For the definition of the indicators used, see the Technical Document for this heart report.

Cholesterol: a waxy fatty material that can build up in arteries and cause heart disease.

Coronary angioplasty, coronary artery angioplasty: see balloon angioplasty.

Coronary artery bypass graft (CABG) surgery, coronary bypass surgery: see heart bypass surgery.

Diabetes: a long-term disease marked by high levels of sugar in the blood. It can cause permanent damage throughout the body and result in death if not treated properly. People with diabetes are at higher risk for heart disease than people without diabetes.

Heart artery dilation: See balloon angioplasty.

Heart attack: blood clots, plaques (fat deposits) or artery spasms block a heart artery. This causes tissue damage or death to the heart muscle. Other names: myocardial infarction; MI; acute MI. For the definition of the indicators used, see the Technical Document for this heart report.

Heart bypass: creates new routes around narrowed or blocked heart arteries. The doctor moves blood vessels from other parts of your body onto your heart. Other names: Other names: Heart artery bypass surgery, coronary artery bypass graft (CABG). For the definition of the indicators used, see the Technical Document for this heart report.

Heart failure: the heart cannot pump enough blood. This causes fluid to build up in your legs, arms, digestive tract, lungs and liver. Heart failure is usually a chronic condition (develops over time). Other names: congestive heart failure, ischemic heart disease, ischemic cardiomyopathy. For the definition of the indicators used, see the Technical Document for this heart report.

High blood pressure: usually 140 systolic over 90 diastolic blood pressure or higher. Systolic is the pressure when the heart beats (squeezes blood into the body). Diastolic is the pressure between heart beats. Other name: hypertension.

Ischemic: the heart muscle does not get enough blood and oxygen.

Percutaneous cardiovascular procedure: catheters threaded through arteries to the heart to look for and treat heart problems.

Percutaneous transluminal coronary angioplasty (PTCA): see balloon angioplasty.

Note: Medical terms for the heart surgeries and conditions are based on:

Healthfinder: http://www.healthfinder.gov/library/ and

MedlinePlus: http://www.nlm.nih.gov/medlineplus/encyclopedia.html

State and National Resources



Utah

Check Your Health - for personal weight loss, nutrition, and/or physical activity information. www.checkyourhealth.org

Indicator Based Information System for Public Health (IBIS) - provides information on the health status of Utahns, the state of the health care system, and Utah public health activities. http://health.utah.gov/ibis-ph

Multicultural Health Program - find consumer-friendly resources on heart disease written in both English and Spanish. For example, the DASH eating plan booklet is used by clinics and insurance companies to help patients lower their blood pressure. The Spanish version includes many recipes which follow a more traditional Hispanic diet. http://www.health.utah.gov/cmh/multilinguallibrary/topic/heartdisease.htm

Obesity in Utah - offers information about how obesity is affecting people in Utah and the steps being taken to combat its advance. http://health.utah.gov/obesity/

Utah Cardiovascular Health Program - working to improve the health and quality of life of all Utahns by improving healthcare systems, worksites, schools, and communities to be more supportive of heart health. http://www.hearthighway.org

Utah Tobacco Control Program – good place to find smoking cessation resources, educational materials and tobacco laws. http://www.tobaccofreeutah.org

National

American Heart Association – national organization devoted to the reduction of disability and death from cardiovascular diseases and stroke. Good consumer resources. www.americanheart.org

Healthfinder® - your guide to reliable health information, sponsored by the Office of Disease Prevention and Health Promotion. http://www.healthfinder.gov

National Library of Medicine (MedlinePlus) - extensive information about drugs, an illustrated medical encyclopedia, interactive patient tutorials, and latest health news http://medlineplus.gov/

National Lung Association – primary mission is to prevent lung disease and promote lung health. Site offers a variety of smoking control and prevention programs targeted to specific groups. http://www.lungusa.org/

National Heart Lung and Blood Institute (Act in Time site) – designed to increase awareness of the need to act fast when someone may be having a heart attack. http://www.nhlbi.nih.gov/actintime/index.htm

Society of Thoracic Surgeons – patient information on cardiac topics such as coronary artery bypass grafting, what to expect after heart surgery and pulmonary embolism. http://www.sts.org/sections/patientinformation/adultcardiacsurgery/

Please be aware that information in this report is neither intended nor implied to be a substitute for professional medical advice. Always ask questions and seek the advice of your physician or other qualified health provider prior to starting any new treatment.

CALL YOUR HEALTHCARE PROVIDER IMMEDIATELY IF YOU THINK YOU MAY HAVE A MEDICAL EMERGENCY.