Utah Hospital Comparison Report For Hip and Knee Surgeries and Conditions 2003-2005





Welcome to the Utah Hospital Comparison Report for Hip Surgeries and Conditions, 2003-2005. If you or someone you know has had a hip fracture or needs a hip or knee replacement, you may find this report helpful when considering 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 of Care

See the tables in this report for information on the following:

- ✓ Hip Fracture Deaths
- ✓ Hip Replacement 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-than-expected mortality rates but still may be providing good quality care.

Other quality measures can be found at websites for Hospital Compare and HealthInsight.

See the online report for more about the following:

- Hip fracture
- Hip replacement

Read more about methods and measures used for the hospital quality of care section in this report in Methods and Measures.

Hospital Patient Safety

The following conditions are a few (but not all) of the complications that might occur after any surgery, such as a hip or knee joint replacement or repair of a hip fracture.

See Additional Resources for more information about risks after surgery (postoperative):

- Blood clot in lung (pulmonary embolism)
- Blood clot in vein deep within the body (deep vein thrombosis or DVT)
- Infection after surgery

Hospital Charges

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

- ✓ Hip Joint Replacement
- ✓ Knee Joint Replacement
- ✓ Hip and Femur Procedures for Trauma (Except Joint Replacement)
- ✓ Knee, Lower Leg and Ankle Procedures
- ✓ Fracture of Femur
- ✓ Bilateral Knee or Hip Joint Replacement

Note: Fracture of Femur - Most hip fractures involve a break in the upper end of the femur (thigh bone) near where it fits into a socket in the pelvis.

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.

<u>Note</u>: 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 (<u>http://www.utpricepoint.org</u>).

See the online report for more about the following:

- ✓ Hip joint replacement
- ✓ Knee joint replacement
- ✓ Hip fracture or fracture of femur
- ✓ Minimally invasive joint replacement

Read more about methods and measures used for the hospital quality of care section in this report in Methods and Measures.

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 hospitals overall did about as expected compared to similar adult inpatients nationwide for hip replacement and hip fracture. Utah overall means all Utah hospitals combined. Measures used are in parentheses. For more details, see the Technical Document.

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

- 12 out of 5,439 hip replacement patients died (AHRQ IQI 14).
- 163 out of 5,005 hip fracture patients died (AHRO IQI 19).

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

- All Utah hospitals had about the same percentage of in-hospital hip replacement deaths as expected for their patients' age, gender and how ill the patients were). 15 hospitals that treated at least 30 heart failure patients had no in-hospital deaths among these patients from 2003 through 2005.
- Most hospitals had about the same percentage of in-hospital hip fracture deaths for their patient's age, sex and how sick the patients were. One hospital had a lower than expected percentage and one hospital had a higher than expected percentage. Two additional hospitals treated at least 30 hip fracture patients and had no in-hospital deaths among these patients from 2003 through 2005.

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 charges among adult inpatients for the knee or hip procedures and conditions in this report differed widely in 2005. Measures used are in parentheses. For more details, see the Technical Document. For patients at the minor/moderate illness level, average hospital charges ranged from:

• \$14,154 to \$37,189 among 26 Utah hospitals that reported charges for hip joint replacement patients (APR-DRG 301).

- \$18,020 to \$41,645 among 28 Utah hospitals that reported charges for knee joint replacement (APR-DRG 302).
- \$1,550 to \$20,337 among 28 Utah hospitals that reported charges for fracture of femur (APR-DRG 340). Most hip fractures are actually breaks in the femur's neck, near where it fits into a cup in the pelvis.

As expected, average hospital charge for inpatients treated at the major/extreme illness level and for bilateral joint replacements (both joints replaced during the same hospital stay) was higher.

- 342 patients had bilateral knee joint replacement or about 6% of all knee replacement patients.
- 9 patients had bilateral hip joint replacement or about 0.3% of all hip replacement patients.

Read more about bilateral hip and knee joint replacement in the Technical Document.

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



Why is this report important to me?

If you or someone you know has had a hip fracture or needs a hip or knee replacement, 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 evaluating hospitals, along with other sources including doctor recommendations.

Why are you producing this report?

The 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. Read more at 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 biostatisticians assisted in selecting the appropriate statistical method for comparing hospital performance.



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 two IQIs for in-hospital deaths, one for hip fracture and the other for hip replacement. 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 hip, knee and leg 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 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
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

Hospitals in Utah (continued)

	Hospital	Location	Phone
County Name	Name	City, State, Zip	Number
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

Hip Fracture Deaths in Utah Hospitals (1QI 19)						
Adults 18 Years and Over: 2003-2005						
Hospital	Total Hip Fracture Patients	Actual Deaths	Expected Deaths	Statistical Rating		
Utah Overall	5,005	3.26%	3.36%	* *		
Ashley Valley Hospital	47	0.00%	2.11%	* * *		
Healthsouth Rehabilitation Hospital	174	0.00%	5.65%	* * *		
Uintah Basin Medical Center	32	0.00%	0.71%	* * *		
Alta View Hospital	199	2.01%	4.09%	* *		
American Fork Hospital	146	2.74%	2.43%	* *		
Brigham City Community Hospital	77	2.60%	2.27%	* *		
Castleview Hospital	79	3.80%	3.51%	* *		
Cottonwood Hospital	250	2.40%	4.36%	* *		
Davis Hospital	66	7.58%	3.38%	* *		
Dixie Regional Medical Center	478	2.30%	3.05%	* *		
Jordan Valley Hospital	64	4.69%	2.53%	* *		
Lakeview Hospital	200	2.50%	2.73%	* *		
LDS Hospital	390	2.31%	3.66%	* *		
Logan Regional Hospital	199	3.02%	3.77%	* *		
McKay-Dee Hospital	392	4.08%	3.73%	* *		

Most Utah hospitals in this table had about as many deaths as expected compared to similar hospitals in the U.S. Three Utah hospitals had fewer than expected. One hospital had more than expected. Hospitals that had no deaths of these patients during this time period also received a threestar rating.

The following hospitals treated at least one patient but less than 30 patients: Allen Memorial Hosiptal, Bear River Valley Hospital, Beaver Valley Hospital, Cache Valley Specialty Hospital, Central Valley Hospital, Gunnison Valley Hospital, Heber Valley Hospital, Primary Children's Medical Center, Sanpete Valley Hospital, Sevier Valley Hospital and The Orthopedic Specialty Hospital.

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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

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.

Expected deaths: percentage of patients who were expected to die at this hospital if it performed the same as other U.S. hospitals that treated similar patients (age, gender, how ill the patients were).

Hip Fracture Deaths in Utah Hospitals (IQI 19) Adults 18 Years and Over: 2003-2005							
-	- CONTINUED -						
Total HipTotal HipFractureActualExpectedStatisticalHospitalPatientsDeathsRating							
Utah Overall	5,005	3.26%	3.36%	* *			
Mountain View Hospital	119	5.88%	4.01%	* *			
Mountain West Hospital	51	1.96%	4.12%	* *			
Ogden Regional Medical Center	180	2.78%	2.72%	* *			
Pioneer Valley Hospital	58	1.72%	2.66%	* *			
Salt Lake Regional Hospital	37	5.41%	2.47%	* *			
St. Mark's Hospital	536	2.61%	2.95%	* *			
University Health Care	293	3.41%	2.54%	* *			
Utah Valley Regional Medical Center	456	4.61%	3.27%	* *			
Valley View Hospital	151	2.65%	2.14%	* *			
Veterans Administration Medical Center	120	7.50%	5.02%	* *			
Timpanogos Regional Hospital	109	12.84%	5.05%	*			

Most Utah hospitals in this table had about as many deaths as expected compared to similar hospitals in the U.S. Three Utah hospitals had fewer than expected. One hospital had more than expected. Hospitals that had no deaths of these patients during this time period also received a threestar rating.

The following hospitals treated at least one patient but less than 30 patients: Allen Memorial Hosiptal, Bear River Valley Hospital, Beaver Valley Hospital, Cache Valley Specialty Hospital, Central Valley Hospital, Gunnison Valley Hospital, Heber Valley Hospital, Primary Children's Medical Center, Sanpete Valley Hospital, Sevier Valley Hospital and The Orthopedic Specialty 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.

Expected deaths: percentage of patients who were expected to die at this hospital if it performed the same as other U.S. hospitals that treated similar patients (age, gender, how ill the patients were).

Hip Replacement Deaths in Utah Hospitals (IQI 14)				
Adults 18	Years and Over	r: 2003-2005		
Hospital	Total Hip Replacement Patients	Actual Deaths	Expected Deaths	Statistical Rating
Utah Overall	5,439	0.22%	0.19%	* *
Alta View Hospital	99	0.00%	0.17%	* * *
American Fork Hospital	90	0.00%	0.20%	* * *
Cache Valley Specialty Hospital	106	0.00%	0.26%	* * *
Castleview Hospital	51	0.00%	0.16%	* * *
Cottonwood Hospital	127	0.00%	0.08%	* * *
Davis Hospital	49	0.00%	0.06%	* * *
Logan Regional Hospital	121	0.00%	0.21%	* * *
Mountain View Hospital	124	0.00%	0.31%	* * *
Ogden Regional Medical Center	125	0.00%	0.09%	* * *
Pioneer Valley Hospital	42	0.00%	0.08%	* * *
The Orthopedic Specialty Hospital	570	0.00%	0.11%	* * *
Timpanogos Regional Hospital	113	0.00%	0.30%	* * *
Uintah Basin Hospital	33	0.00%	0.12%	* * *
Valley View Hospital	110	0.00%	0.07%	* * *
Veterans Administration Medical Center	78	0.00%	0.39%	* * *
Dixie Regional Medical Center	496	0.40%	0.23%	* *
Lakeview Hospital	165	0.61%	0.14%	* *
LDS Hospital	999	0.10%	0.14%	* *
McKay-Dee Hospital	416	0.48%	0.28%	* *
St. Mark's Hospital	535	0.19%	0.16%	* *
University Health Care	544	0.37%	0.20%	* *
Utah Valley Regional	371	0.81%	0.42%	* *

All Utah hospitals in this table had about as many deaths as expected compared statistically to similar hospitals in the U.S. Hospitals that had no deaths of these patients during this time period received a three-star rating.

The following hospitals treated at least one patient but less than 30 patients: Ashley Valley Hospital, Brigham City Community Hospital, Jordan Valley Hospital, Mountain West Hospital and Salt Lake 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

Click here to read Data Limitations.

NOTE: Hospitals are listed alphabetically within each star rating.

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

Expected deaths: percentage of patients who were expected to die at this hospital if it performed the same as other U.S. hospitals that treated similar patients (age, gender, how ill the patients were).

Bilateral Knee Joint Replacement

(APR-DRG 302, ICD-9-CM Procedure Code 81.54)

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

	Level of Illness			
	Minor/Moderate		Major/Extrem	
	Average			Average
Hospital	Patients	Charge	Patients	Charge
Utah Overall, Include High Outliers	317	\$43,593	25	\$59,454

State average hospital length of stay

Minor/Moderate is 4.6 days with outliers

Major/Extreme is 8.0 days with outliers

Some patients can have bilateral knee joint replacements, that is, both right and left knee joint replacement surgeries during a single hospital stay. Read More in Technical Document

Bilateral Hip Joint Replacement

(APR-DRG 301, ICD-9-CM Procedure Code 81.51)

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, Include High Outliers	4	\$40,393	5	\$56,393	

State average hospital length of stay

Minor/Moderate is 4.8 days with outliers

Major/Extreme is 7.8 days with outliers

Though less common than bilateral knee joint replacement, some patients can have bilateral hip joint replacements, that is, both right and left hip joint replacement surgeries during a single hospital stay. Read More in Technical Document

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 hip and knee problems and other serious conditions that require more complex treatment.

Fracture of Femur (Thigh Bone) (APR-DRG 340)

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

	Level of Illness				
	Minor/N	Minor/Moderate		Extreme	
Hospital	Patients	Average Charge	Patients	Average Charge	
Utah Overall	96	\$6,317	44	\$9,157	
Allen Memorial Hospital	<5	\$3,105	0	\$0	
Alta View Hospital	<5	\$7,339	6	\$7,064	
American Fork Hospital	8	\$6,271	0	\$0	
Ashley Valley Medical Center	0	\$ 0	<5	\$2,435	
Bear River Valley Hospital	<5	\$2,867	0	\$0	
Beaver Valley Hospital	<5	\$2,165	0	\$0	
Brigham City Community Hospital	<5	\$2,437	<5	\$4,362	
Castleview Hospital	<5	\$20,337	<5	\$3,747	
Central Valley Medical Center	<5	\$5,946	0	\$0	
Cottonwood Hospital	8	\$6,113	<5	\$7,620	
Davis Hospital & Medical Center	6	\$6,748	0	\$0	
Dixie Regional Medical Center	8	\$4,711	<5	\$5,263	
Gunnison Valley Hospital	<5	\$1,550	0	\$0	
Heber Valley Medical Center	<5	\$5,772	<5	\$3,110	
Jordan Valley Hospital	<5	\$5,640	0	\$0	
Lakeview Hospital	<5	\$11,302	6	\$8,447	
LDS Hospital	<5	\$6,721	<5	\$11,282	
Logan Regional Hospital	<5	\$5,536	0	\$0	
McKay-Dee Hospital	7	\$5,749	<5	\$12,469	
Mountain View Hospital	<5	\$5,442	<5	\$12,128	
Mountain West Medical Center	<5	\$10,428	<5	\$20,477	
Ogden Regional Medical Center	<5	\$6,035	<5	\$5,364	
Pioneer Valley Hospital	<5	\$8,232	<5	\$3,355	

Note: Most hip fractures occur in the femur just below its upper end.

Table Legend

< 5 = 1 to 4 patients

State average hospital length of stay Minor/Moderate is 2.6 days Major/Extreme is 3.1 days

Click here to read Data Limitations.

Continued on Next Page

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 femur fractures and other serious conditions that require more complex treatment.

Fracture of Femur (Thigh Bone) (APR-DRG 340)							
Average Hospital Charges for Adults 18 Years and Over, Utah: 2005							
-	- CONTINUED -						
Level of Illness							
	Minor/I	Moderate	Major/	Extreme			
	Average Average						
Hospital	Patients	Charge	Patients	Charge			
Utah Overall	96	\$6,317	44	\$9,157			
Salt Lake Regional Medical Center	0	\$0	<5	\$20,862			
San Juan Hospital	<5	\$1,657	0	\$0			
Sevier Valley Hospital	<5	\$4,249	0	\$0			
St. Mark's Hospital	6	\$6,360	<5	\$9,115			
Timpanogos Regional Hospital	0	\$0	<5	\$13,942			
University Health Care	10	\$6,559	<5	\$10,015			
Utah Valley Regional Medical Center	<5	\$7,484	0	\$0			
Valley View Medical Center	<5	\$8,716	0	\$0			
Veterans Administration Medical Center	<5	Not available	0	Not available			

Note: Most hip fractures occur in the femur just below its upper end.

Table Legend

< 5 = 1 to 4 patients

State average hospital length of stay Minor/Moderate is 2.6 days Major/Extreme is 3.1 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 femur fractures and other serious conditions that require more complex treatment.

Hip and Femur (Thigh Bone) Procedures for Injury Except Joint Replacement (APR-DRG 308)

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

	Level of Illness				
	Minor/N	Moderate	Major/	Extreme	
Hospital	Patients	Average Charge	Patients	Average Charge	
Utah Overall	896	\$17,906	374		
Allen Memorial Hospital	<5	\$15,923	0	\$0	
Alta View Hospital	23	\$11,280	15	\$21,516	
American Fork Hospital	25	\$16,723	8	\$18,182	
Ashley Valley Medical Center	8	\$17,177	<5	\$33,027	
Bear River Valley Hospital	<5	\$9,047	0	\$0	
Brigham City Community Hospital	9	\$11,445	<5	\$20,491	
Cache Valley Specialty Hospital	6	\$15,182	<5	\$10,554	
Castleview Hospital	9	\$21,556	<5	\$29,199	
Cottonwood Hospital	46	\$14,212	15	\$18,947	
Davis Hospital & Medical Center	22	\$21,339	5	\$35,044	
Dixie Regional Medical Center	81	\$14,453	20	\$24,138	
Heber Valley Medical Center	5	\$12,981	<5	\$18,661	
Jordan Valley Hospital	26	\$22,711	10	\$35,196	
Lakeview Hospital	39	\$16,595	10	\$26,570	
LDS Hospital	75	\$22,287	49	\$34,755	
Logan Regional Hospital	38	\$13,858	14	\$17,316	
McKay-Dee Hospital	78	\$15,085	35	\$27,453	
Mountain View Hospital	13	\$18,329	11	\$22,604	
Mountain West Medical Center	11	\$24,622	<5	\$45,448	
Ogden Regional Medical Center	32	\$20,407	9	\$32,742	
Orthopedic Specialty Hospital	<5	\$20,657	<5	\$16,678	
Pioneer Valley Hospital	5	\$20,478	4	\$33,018	
Salt Lake Regional Medical Center	18	\$25,018	7	\$32,397	
St. Mark's Hospital	100	\$21,256	24	\$34,523	
Timpanogos Regional Hospital	9	\$19,925	11	\$37,724	

Table Legend

< 5 = 1 to 4 patients

State average hospital length of stay

Minor/Moderate is 4.2 days Major/Extreme is 6.3 days

Click here to read Data Limitations.

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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 hip and femur problems and other serious conditions that require more complex treatment.

Hip and Femur (Thigh Bone) Procedures for Injury Except Joint Replacement (APR-DRG 308)

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

- CONTINUED -

	Level of Illness				
	Minor/1	Moderate	Major/Extreme		
Hospital	Patients	Average Charge	Patients	Average Charge	
Utah Overall	896	\$17,906	374	\$28,674	
Uintah Basin Medical Center	12	\$12,485	0	\$0	
University Health Care	88	\$21,658	46	\$35,332	
Utah Valley Regional Medical Center	67	\$15,273	49	\$23,459	
Valley View Medical Center	28	\$13,398	<5	\$18,803	
Veterans Administration Medical Center	17	Not available	9	Not available	

Table Legend

State average hospital length of stay

< 5 = 1 to 4 patients

Minor/Moderate is 4.2 days Major/Extreme is 6.3 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 hip and femur problems and other serious conditions that require more complex treatment.

Hip Joint Replacement (APR-DRG 301)

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

	Level of Illness			
	Minor/Mo		Major/Extreme	
Hospital	Patients	Average Charge	Patients	Average Charge
Utah Overall	1,639	\$24,791	1,351	\$28,482
Alta View Hospital	41	\$26,360	28	\$27,963
American Fork Hospital	31	\$22,401	18	\$23,192
Ashley Valley Medical Center	<5	\$37,189	5	\$38,536
Bear River Valley Hospital	<5	\$14,154	0	\$ 0
Brigham City Community Hospital	17	\$20,343	6	\$23,322
Cache Valley Specialty Hospital	21	\$32,588	9	\$33,615
Castleview Hospital	18	\$28,851	13	\$30,761
Cottonwood Hospital	45	\$23,811	24	\$30,013
Davis Hospital & Medical Center	24	\$35,743	22	\$37,043
Dixie Regional Medical Center	168	\$20,415	111	\$24,399
Jordan Valley Hospital	15	\$32,496	5	\$37,759
Lakeview Hospital	54	\$19,680	30	\$24,320
LDS Hospital	218	\$26,195	241	\$30,361
Logan Regional Hospital	36	\$20,444	32	\$26,020
McKay-Dee Hospital	119	\$25,627	108	\$27,796
Mountain View Hospital	33	\$23,545	28	\$24,793
Mountain West Medical Center	0	\$ 0	<5	\$51,698
Ogden Regional Medical Center	61	\$26,547	19	\$29,358
Pioneer Valley Hospital	13	\$35,081	9	\$36,393
Salt Lake Regional Medical Center	10	\$37,156	15	\$44,280
St. Mark's Hospital	195	\$26,662	111	\$31,173
The Orthopedic Specialty Hospital	128	\$22,383	130	\$23,065
Timpanogos Regional Hospital	18	\$30,180	27	\$35,959
Uintah Basin Medical Center	23	\$24,981	5	\$23,400
University Health Care	181	\$25,283	161	\$31,126
Utah Valley Regional Medical Center	87	\$23,276	141	\$26,659

Table Legend

< 5 = 1 to 4 patients

State average hospital length of stay

Minor/Moderate is 3.6 days Major/Extreme is 4.1 days.

Click here to read Data Limitations.

Continued on Next Page

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 hip problems and other serious conditions that require more complex treatment.

Hip Joint Replacement (APR-DRG 301)

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

	Level of Illness			
	Minor/Moderate Major/Extreme			Extreme
		Average		Average
Hospital	Patients	Charge	Patients	Charge
Utah Overall	1,639	\$24,791	1,351	\$28,482
Valley View Medical Center	42	\$20,001	34	\$23,006
Veterans Administration Medical Center	36	Not available	17	Not available

Table Legend

< 5 = 1 to 4 patients

State average hospital length of stay Minor/Moderate is 3.6 days

Major/Extreme is 4.1 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 hip problems and other serious conditions that require more complex treatment.

Knee, Lower Leg & Ankle Procedures (APR-DRG 313)					
Average Hospital Charges for Adults 18 Years and Over, Utah: 2005					
	Level of Illness				
	Minor/N	Aoderate	Major/Extreme		
		Average		Average	
Hospital	Patients	Charge	Patients	Charge	
Utah Overall	1,576	\$14,014	200	\$28,605	
Allen Memorial Hospital	<5	\$13,391	0	\$0	
Alta View Hospital	51	\$9,368	5	\$20,732	
American Fork Hospital	31	\$10,877	<5	\$14,056	
Ashley Valley Medical Center	8	\$10,970	0	\$ 0	
Bear River Valley Hospital	<5	\$6,047	0	\$ 0	
Brigham City Community Hospital	6	\$11,355	0	\$ 0	
Cache Valley Specialty Hospital	21	\$12,213	<5	\$18,482	
Castleview Hospital	20	\$19,404	<5	\$25,012	
Cottonwood Hospital	70	\$9,717	13	\$21,233	
Davis Hospital & Medical Center	31	\$17,179	<5	\$40,110	
Dixie Regional Medical Center	132	\$11,387	20	\$19,357	
Heber Valley Medical Center	15	\$9,117	0	\$0	
Jordan Valley Hospital	30	\$16,711	<5	\$24,717	
Lakeview Hospital	37	\$14,408	<5	\$26,994	
LDS Hospital	178	\$16,375	28	\$40,203	
Logan Regional Hospital	32	\$11,245	6	\$16,311	
McKay-Dee Hospital	98	\$11,819	10	\$32,242	
Mountain View Hospital	35	\$15,150	5	\$41,967	
Mountain West Medical Center	13	\$21,721	<5	\$31,276	
Ogden Regional Medical Center	31	\$16,791	<5	\$23,099	
Orthopedic Specialty Hospital	103	\$12,336	12	\$18,665	
Pioneer Valley Hospital	27	\$16,893	<5	\$27,220	
Salt Lake Regional Medical Center	14	\$21,726	<5	\$30,100	
St. Mark's Hospital	92	\$14,399	10	\$42,308	
Timpanogos Regional Hospital	15	\$13,381	<5	\$31,411	
Uintah Basin Medical Center	8	\$13,928	<5	\$7,009	

Click here to read Data Limitations.

Continued on Next Page

Table Legend

< 5 = 1 to 4 patients

State average hospital length of stay
Minor/Moderate is 2.7 days
Major/Extreme is 6.2 days

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 hip and femur problems and other serious conditions that require more complex treatment.

Knee, Lower Leg & Ankle Procedures (APR-DRG 313)				
Average Hospital Charges for Adults 18 Years and Over, Utah: 2005				
- CONTINUED -				
	Level of Illness			
	Minor/Moderate Major/Extreme			Extreme
TT	Average Average			0
Hospital	Patients	Charge	Patients	Charge
Utah Overall	1,576	. ,	200	. ,
University Health Care	284		36	\$32,175
Utah Valley Regional Medical Center	147	\$13,231	13	\$24,471
Valley View Medical Center	24	\$9,208	<5	\$14,193
Veterans Administration Medical Center	21	Not available	<5	Not available

Table Legend

< 5 = 1 to 4 patients

State average hospital length of stay Minor/Moderate is 2.7 days Major/Extreme is 6.2 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 knee, lower leg and ankle problems and other serious conditions that require more complex treatment.

Knee Joint Replacement (APR-DRG 302)

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	5,307	\$25,001	226	\$34,142
Alta View Hospital	183	\$25,854	12	\$28,775
American Fork Hospital	61	\$19,768	0	\$0
Ashley Valley Medical Center	17	\$33,207	<5	\$45,778
Brigham City Community Hospital	50	\$19,259	0	\$ 0
Cache Valley Specialty Hospital	154	\$29,077	<5	\$34,622
Castleview Hospital	57	\$26,442	<5	\$31,586
Cottonwood Hospital	135	\$22,477	<5	\$30,733
Davis Hospital & Medical Center	98	\$35,187	<5	\$36,071
Dixie Regional Medical Center	513	\$20,092	12	\$24,746
Heber Valley Medical Center	71	\$21,557	0	\$ 0
Jordan Valley Hospital	29	\$36,480	<5	\$43,120
Lakeview Hospital	269	\$19,036	7	\$33,353
LDS Hospital	562	\$28,301	32	\$38,963
Logan Regional Hospital	141	\$26,531	10	\$42,105
McKay-Dee Hospital	410	\$24,824	12	\$33,772
Mountain View Hospital	174	\$23,718	10	\$32,732
Mountain West Medical Center	10	\$41,645	<5	\$58,767
Ogden Regional Medical Center	79	\$27,762	6	\$35,360
The Orthopedic Specialty Hospital	614	\$25,029	14	\$29,522
Pioneer Valley Hospital	67	\$33,252	<5	\$42,037
Salt Lake Regional Medical Center	17	\$36,584	0	\$ 0
St. Mark's Hospital	478	\$28,289	19	\$37,051
Timpanogos Regional Hospital	89	\$30,819	10	\$41,865
Uintah Basin Medical Center	45	\$23,905	<5	\$28,477
University Health Care	386	\$24,098	16	\$44,018
Utah Valley Regional Medical Center	343	\$23,316	40	\$26,392

Table Legend

< 5 = 1 to 4 patients

State average hospital length of stay

Minor/Moderate is 3.4 days Major/Extreme is 4.8 days.

Click here to read Data Limitations.

Continued on Next Page

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 knee problems and other serious conditions that require more complex treatment.

Knee Joint Replacement (APR-DRG 302)				
Average Hospital Charges for Adults 18 Years and Over, Utah: 2005				
- CONTINUED -				
	Level of Illness			
	Minor/Moderate Major/Extreme			/Extreme
	Average Aver			Average
Hospital	Patients	Charge	Patients	Charge
Utah Overall	5,307	\$25,001	226	\$34,142
Valley View Medical Center	152	\$18,020	0	\$0
Veterans Administration Medical Center	103	Not available	7	Not available
Table Legend		State average hospital length of stay		

Click here to read Data Limitations.

< 5 = 1 to 4 patients

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 hip and femur problems and other serious conditions that require more complex treatment.

Minor/Moderate is 3.4 days

Major/Extreme is 4.8 days.

Become an Informed Health Care 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. Don't wait until you have a medical emergency to learn about your health plan coverage.

Plan Ahead. 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 knowledgeable

- Learn how your hips and knees work and what they need to stay healthy. The more you know, the more likely you are to prevent problems and know when to see your doctor.
- Stay active learn ways to maintain or increase your activity level. Inactivity can lead to excess weight or osteoporosis. Excess weight strains your hips and knees and can make arthritis pain worse.
- **Osteoporosis** (weakening bones) makes fractures more likely. Hip fractures are especially dangerous.
- Learn how to protect your hips and knees from injury.
- 90% of hip fractures result from falls in the home. Learn how to prevent falls.
- Learn more at the American Association of Orthopedic Surgeons 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. Read more at http://health.utah.gov/genomics/familyhistory/toolkit.html.
- Questions to ask your doctor during an office visit. Read more at http://www.aahks.org/index.asp/fuseaction/patients.tips.
- Your rights and responsibilities as a patient. Read more at http://www.aha.org/aha/content/2003/pdf/pcp_english_030730.pdf.
- The rules of your insurance plan before you use medical services.

If you need treatment

- **If you are uninsured**, read some great tips on finding health insurance coverage in Utah. Read more at http://covertheuninsured.org/stateguides/.
- **Properly manage your medications** by ordering a free Medication Management Checkbook --- courtesy of the Utah Department of Health. Read more at http://www.checkyourhealth.org/materials/med_management.htm .
- Find out about the latest treatments and alternatives to surgery.
- If you are considering surgery, ask your doctor if **minimally-invasive techniques** are right for you. Read more at http://www.aahks.org/pdf/MIS_Patients.pdf
- Consider yourself a partner in your care and treatment.
- **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.
- **Don't avoid the doctor.** Keep your doctor informed of your personal and family medical history and keep your physical exams up to date, especially if you have risk factors, like arthritis or osteoporosis (weakening bones).
- Any surgery has risks, including surgery for joint replacement or repair of a hip fracture. Be sure to speak with your doctor before and after your surgery about your personal risks for complications.
- **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.
- **Follow instructions** during and after your hospital stay. Read more about activities after a hip or knee replacement in Additional Resources.

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 hip 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. Read more at http://solutions.3m.com/wps/portal/3M/en_US/3MHIS/HealthInformationSystems.

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. Read more at http://www.qualityindicators.ahrq.gov/.

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. Read more at http://www.le.state.ut.us/%7E2005/bills/sbillenr/sb0132.htm.

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://www.qualityindicators.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.

The AHRQ PSIs are nationally recognized indicators, in compliance with the mandates of Senate Bill 132, the Health Care Consumer's Report Bill passed in 2005. Read more at http://www.le.state.ut.us/%7E2005/bills/sbillenr/sb0132.htm.

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 <u>www.qualityindicators.ahrq.gov/downloads/iqi/iqi_guide_v31.pdf</u>.

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 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 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.

Hip and Knee Related Terms

Femur: Thigh bone.

Fracture of femur: includes fractures (breaks) of the thigh bone at its neck (upper end), bottom (near the knee) and shaft (along its length). For the definition of the indicators used, see the Technical Document for this hip and knee report.

Hip fracture: A hip fracture usually is a break of the neck of the femur, just below where it fits into the pelvis, the bones in the lower part of the body. For the definition of the indicators used, see the Technical Document for this hip and knee report. Read more at http://orthoinfo.aaos.org/fact/thr_report.cfm?Thread_ID=229&topcategory=Hip

Hip replacement or hip joint replacement: in the Utah Hospital Comparison report includes total, partial and revised hip joint replacement. For the definition of the indicators used, see the Technical Document for this hip and knee report. Read more at http://orthoinfo.aaos.org/fact/thr_report.cfm?Thread_ID=504&topcategory=Hip

Knee replacement or knee joint replacement: in the Utah Hospital Comparison report includes total and revised hip joint replacement. For the definition of the indicators used, see the Technical Document for this hip and knee report. Read more at http://orthoinfo.aaos.org/fact/thr_report.cfm?Thread_ID=513&topcategory=Knee).

Medical terms for the hip and knee surgeries and conditions are based on the American Academy of Orthopedic Surgeons, http://orthoinfo.aaos.org/category.cfm?topcategory=hip

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

Obesity in Utah - Did you know that more than HALF of all Utahns are overweight or obese? Your weight directly affects the amount of stress put on your joints. This website 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 Department of Health Arthritis Program - created to improve the quality of life for people affected by arthritis; provide family and patient education; and increase participation in programs proven to help people with arthritis. http://www.health.utah.gov/arthritis/

National

American Academy of Orthopaedic Surgeons (AAOS) - Information on orthopaedic conditions and treatments, injury prevention, wellness and exercise, and more. http://orthoinfo.aaos.org/main.cfm

American Association of Hip and Knee Surgeons - search for an orthopedic specialist in your area, view a list of other educational websites, and find out what you need to know during your next doctor visit. http://www.aahks.org/index.asp/fuseaction/patients.main

Arthritis Foundation - national not-for-profit organization that supports the more than 100 types of arthritis and related conditions with advocacy, programs, services and research. http://www.arthritis.org/

Clinical Guidelines and Performance Measures (AAOS) - valuable tools that will allow you to advance the physician-patient communications process and enhance the diagnosis and treatment of musculoskeletal conditions. http://www.aaos.org/Research/guidelines/guide.asp

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/

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.