



The University of Michigan Hospitals and Health Centers (76)

This document presents the measures evaluated in the 2007 UHC Quality and Accountability ranking. This scorecard provides a comparison of your organization's performance with that of other academic medical centers. The data was obtained from existing UHC data resources, including the Clinical Data Base (Q3 2006 – Q2 2007), Core Measures Data Base (Q2 2006 – Q1 2007), Operational Data Base (Q3 2006 – Q2 2007), and HCAHPS patient satisfaction data (Q4 2006 – Q2 2007).

The goal of the Quality and Accountability ranking is to assess organizational performance across a broad spectrum of high-priority dimensions of patient care. The 2007 scoring and ranking covers the domains of mortality, effectiveness, safety, and equity, using measures developed by national organizations or the federal government. To obtain a balanced view of the organizations, efficiency and patient centeredness measures are also included for your consideration.

Overall Composite Performance	Rating	Composite Score	Top Performer Score	Group Median
Overall (Based on Clinical Domain Performance)	★★★★★	71.2	73.2	63.5
Clinical Domain Performance	Rank (* denotes tie)	Domain Score	Top Performer Score	Group Median
Mortality (35%)	35	60.3%	71.6%	58.5%
Includes UHC O/E mortality rate for the following selected product lines: bone marrow transplant, burns, cardiology, cardio-thoracic surgery, gastroenterology, gynecology, heart/lung transplant, HIV, kidney/pancreas transplant, liver transplant, medical oncology, medicine general, neonatology, neurology, neurosurgery, obstetrics, orthopedics, otolaryngology, pediatrics, plastic surgery, rheumatology, surgical oncology, surgery general, trauma, urology, vascular surgery, ventilator support, spinal surgery.				
Effectiveness (35%)	3*	77.5%	82.5%	62.5%
Related-readmission rate within 30 days of discharge. TJC Hospital Core Measures composite score measures for AMI, HF, PN, and SIP: percentage of patients receiving all of the care they were eligible to receive.				
Safety (20%)	6*	65.0%	70.0%	58.7%
Includes PSI metrics: death in low-mortality DRGs, failure to rescue, iatrogenic pneumothorax, selected infections due to medical care, postoperative hip fracture, postoperative pulmonary embolism or deep vein thrombosis, accidental puncture or laceration, birth trauma, obstetric trauma—vaginal with instrument obstetric trauma—vaginal without instrument.				
Equity (10%)	1*	100.0%	100.0%	100.0%
TJC Hospital Core Measures composite scores for AMI, HF, PN, and SIP, testing for statistically significant difference in outcomes based on 3 equity-based divisions: gender (male vs. female), race (white vs. nonwhite), and socioeconomic status (Medicaid, self-pay, uninsured, and charity vs. all others).				
Additional Domains for Organizational Success (not included in overall composite performance rating)				
Efficiency	68*	46.9%	75.0%	56.3%
LOS O/E, total cost per CMI-adjusted discharge, supply cost per CMI-adjusted discharge, labor cost per CMI-adjusted discharge.				
Patient Centeredness	8*	62.5%	75.0%	62.5%
HCAHPS question 21: percentage of respondents that give an overall hospital rating of 9 or 10. Domain score represents the percentage of points awarded out of the 8-point scale; it does not reflect the actual metric percent.				

