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Joseph Martin, Executive Director
Pennsylvania Health Care Cost Containment Council
225 Market Street
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Dear Mr. Martin,

We would like to offer the following comments regarding the upcoming PHC4 Cardiac Surgery Report.

While the report includes guidelines and compares hospitals using the same criteria including charge data, its analysis is based on a limited patient population within the state who are undergoing the same procedures. This limited view certainly influences the reported outcomes, as we have seen evidenced when comparing all patients and payors in other registries in which we participate.

It further simplifies the care of an entire surgical patient population into three categories: Mortality, Length of Stay and Readmissions. To encompass all of the variables associated with the complex care of an Open Heart Surgery patient into 3 broad groups and report these results demands clear explanations and delineation of these categories. The goal should be that not only will the outcomes be reported, but that the public who review the report will appreciate and understand the complexity that goes into providing excellent care and achieving those outcomes.

The complexity of these patients frequently demands the attention of more than one specialist as well as the primary care physician. While these specialists are providing appropriate care for the patient, they also have an impact on mortality, length of stay and readmissions. These areas are further impacted by the level of care provided by supportive institutions in that community, the economics of the community, and the individual patient's attitude toward self-care and recovery, as well as family support.

The Washington Hospital is an active participant in multiple regional and national outcome projects and data registries. We include these outcomes in our ongoing evaluation of our surgical program to determine ways to improve care to patients in the future. Assessment of outcomes is a complex process and The Washington Hospital has committed both expertise and resources to sustain and continuously improve the quality and safety of our cardiac surgery program.

We thank you for providing the opportunity to comment on this report.

Sincerely,

Paul T. Cullen, MD
Vice President, Medical Affairs
The Washington Hospital