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Marc P. Volavka, Executive Director
Pennsylvania Health Care Cost Containment Council
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Dear Mr. Volavka:

I am submitting this formal comment regarding the 2006 PHC4 Hospital acquired infection report. Due to the use of the Medmined surveillance and data collection methodology versus traditional chart review, the reported infection rate for Memorial Hospital provides an inaccurate comparison.

Memorial Hospital is committed to providing our patients with the best and safest care possible. We proactively look for ways to improve our service delivery by analyzing care processes and outcomes in an effort to improve quality.

In 2006, PHC4 and the Highmark Foundation awarded Memorial Hospital a grant to purchase Medmined for electronic surveillance of healthcare associated infections. This surveillance begins with positive cultures collected 72 hours after admission and up to 14 days after discharge. The culture results are analyzed using a computer algorithm to sort out contaminants and non-pathogens. The result of the analyzed data is called a Nosocomial Infection Marker (NIM), which is an indicator of a possible healthcare-associated infection.

Medmined electronic surveillance is able to identify many more NIMs (Infection Markers), which represent objective data analysis, than the traditional subjective surveillance using prescribed PHC4 or CDC definitions. Due to this automated method of data collection, the PHC4 Hospital-Acquired Infection Report portrays an inaccurate comparison of Medmined reporting hospitals (14 within Pennsylvania). The fourth quarter of 2006 is the first quarter Memorial Hospital began using the NIM to report to PHC4 and the variance in data collection methodologies results in what appears to be a significant increase in infection rates at Memorial. In reality this increase is related to the changed surveillance activities, not a drop in quality as may be perceived by consumers reading the report.

Memorial Hospital has recognized the value of using technology to enhance our ability to decrease healthcare-associated infections. Medmined surveillance system enables the Infection Control Department to concentrate

Memorial Family
of Health Services

Memorial Hospital

Greenbriar Medical Center

HomeCare of York

Industrial Resource Center

MRI of York

Memorial Behavioral Health

Memorial Primary Care

Surgical Center of York

White Rose Home Health

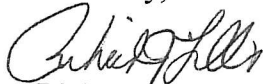
White Rose Hospice

its efforts on intervention, performance improvement and education instead of intensive chart review and data entry.

Memorial Hospital supports reporting transparency and the public release of meaningful data. Continued education and discussion about the data may become useful for consumers and purchasers of care in evaluating healthcare providers however including Medmined and traditional surveillance hospitals in the same report may add more misperceptions than clarity. I respectfully request that an explanation of the Medmined program be included in the report with appropriate notation to Memorial Hospital data or in best case scenario that Medmined hospitals be reported separately.

Memorial Hospital welcomes all opportunities to discuss our quality of care and initiatives for safety. More information about care at Memorial Hospital is available on our website at www.mhyork.org.

Sincerely,



Richard J. Lillo

Chief Operating Officer

Cc: Carolyn Scanlan, Hospital and Healthsystem Association of Pennsylvania
Roger Mecum, Pennsylvania Medical Society