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Marc P. Volavka, PHC4 Executive Director Pennsylvania Health Care Cost Containment Council 225 Market Street, Suite 400, Harrisburg, PA 17101

September 12, 2005

Dear Mr. Volavka:

Thank you for the opportunity to comment on the FFY2004 Hospital Performance Report. We at Mount Nittany Medical Center support the use of comparative reports in identifying opportunities for improvement in the health care system. We analyze comparative data on a regular basis throughout the year as one part of our internal performance improvement process.

Overall, our Medical Center compares favorably with other hospitals. We are pleased that two conditions, abnormal heartbeat and kidney and urinary tract infections, showed significantly lower than expected readmission rates for complications or infections.

We would like to comment on the two conditions with mortality rates greater than expected. We reviewed the care of each patient in both diagnosis groups, congestive heart failure and aspiration pneumonia. During this thorough review we looked at many aspects of care including length of stay, treatments and pharmacology interventions, patient and family wishes regarding end-of-life decisions, and concurrent diagnoses and conditions. We believe that these deaths were anticipated given the severity of the patients' illnesses and the expressed wishes of the patients and family. For example, the majority of patients who expired in each group expressed wishes for no resuscitation (DNR, Do Not Resuscitate) at the time of their admission to the Medical Center. However, we continue to evaluate care to these patient populations through attention to evidence-based performance measures and individual case review.

This review is only one aspect of our performance improvement program. We are participants in the Joint Commission on Accreditation of Health Care Organizations (JCAHO) and the Center for Medicare and Medicaid Services (CMS) hospital quality initiatives regarding pneumonia, heart failure, and acute myocardial infarction (heart attack). We are also participants in the Institute for Healthcare Improvement 100,000 Lives Campaign. This initiative is designed to help hospitals across the country implement changes in care that have been proven to prevent avoidable deaths.

We welcome information that helps us to improve our care to our patients and we thank the Council for providing regular comparative reports.

Sincerely,

Francis X. Speidel, M.D.

Senior Vice President for Medical Affairs

Mount Nittany Medical Center