



**ALLEGHENY
VALLEY HOSPITAL**

WEST PENN ALLEGHENY HEALTH SYSTEM

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November 30, 1999

(By FAX 717-232-3821)

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

RE: DRGs 089, 127, and 478

Mr. Volavka:

Having reviewed the data for Allegheny Valley Hospital (AVH) in the Pennsylvania Health Care Cost Containment Council's "1998 Hospital Performance Report - 15 Common Medical Procedures and Treatments," I would like to share with you our observations relative to the DRGs that are being reported as having a mortality rate "significantly greater than expected."

DRG 089 Adult Pneumonia: AVH had 211 patients included in the data. Twenty-two (10.4%) died and the expected mortality for this group was 6.0%. The average age of the 22 patients was 85.1. They had an average admission severity of 3.0 compared to the overall severity of 2.3 for this DRG 089. Eighteen (82%) had "Do Not Resuscitate" orders which would, by definition, have limited the amount of diagnostic testing conducted on these patients. In addition, this population of patients also had co-morbid conditions including cardiac disease, diabetes, and renal failure.

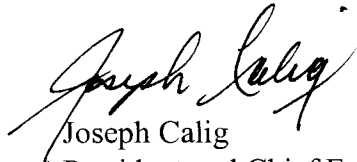
DRG 127 Heart Failure and Shock: AVH had 452 patients in this DRG. The actual mortality rate was 6.2% (29 patients) and the expected rate was 4.1%. The average age of the 29 patients was 83.9 years. The average admission severity for these patients was 2.8 compared to the overall DRG admission severity of 2.3. Seventy-three percent (73%) of these patients had "Do Not Resuscitate" orders, and these patients were complicated cases with multiple disease processes occurring.

DRG 478 Vascular Operations Except Heart: AVH had 59 patients in this data with an expected mortality of 3.0%. They had an actual mortality rate of 8.5% or five deaths. The average age of these patients was 81.2 years. Two of the five patients were over 90 years old. Four of the five patients had "Do Not Resuscitate" orders. These patients also were complicated by co-morbid conditions.

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In conclusion, it is the opinion of the AVH Medical Quality Group that there were no quality of care issues, clinical care process issues, or individual practitioner competency questions identified that contributed to the deaths. All patients were found to have been treated appropriately and detailed case reviews revealed no lapses in care or unexpected outcomes.

Sincerely,

A handwritten signature in black ink, appearing to read "Joseph Calig". The signature is fluid and cursive, with a large initial "J" and "C".

Joseph Calig
President and Chief Executive Officer

JC/mes