

The risk-adjusted rate is the estimate of how a hospital would perform on an indicator for an average case mix of patients, rather than its own case mix. This rate can be found in the provider-level reports from the Windows or SAS QI programs. See the other B tools for more information (B1 explains what the rates mean; B2a and B2b show how to use the software with your data and obtain these rates).

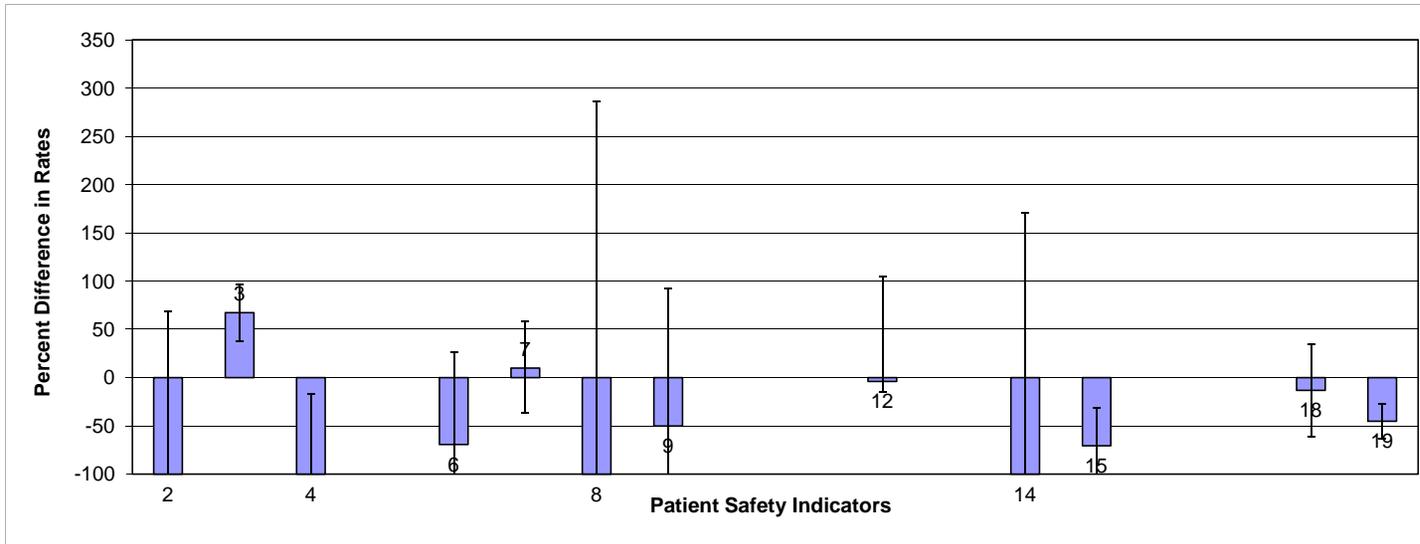
The confidence interval of the risk adjusted rate is identified in the SAS output as the lower CL (lower confidence limit) and upper CL (upper confidence limit). When creating provider-level reports using the Windows QI software, the user must specify that the confidence levels be included in the report. See Tools B2a and B2b for more information.

The benchmark is the rate used as a comparison point. You may choose your State's rate, the national rate, or any other rate that you may wish to use as a comparison. See Tool B5 for more information about benchmarking.

		Enter your data here.				These calculate automatically.				
Indicator	Risk-Adjusted Rate	Risk-Adjusted (Lower Confidence Interval Bound)	Risk-Adjusted (Upper Confidence Interval Bound)	Benchmark	Percent Difference in Rates	Percent Difference in Rates (Lower Bound)	Percent Difference in Rates (Upper Bound)	Chart Label	How does your hospital compare to benchmark?	
2 Death in low-mortality DRGs	0	0	0.000717	0.000425	-100	0	168.705882	2	No Statistically Significant Difference	
3 Pressure ulcer	0.042752	0.03529	0.050213	0.025572	67.1828562	29.1803535	29.176443	3	Statistically Higher	
4 Death among surgical inpatients	0	0	0.094956	0.114	-100	0	83.2947368	4	Statistically Lower	
5 Foreign body left during procedure				0.000086						
6 Iatrogenic pneumothorax	0.000187	0	0.000769	0.000606	-69.141914	30.8580858	96.039604	6	No Statistically Significant Difference	
7 Central venous catheter-related bloodstream infections	0.002408	0.00139	0.003477	0.002194	9.7538742	46.3992707	48.7237922	7	No Statistically Significant Difference	
8 Postoperative hip fracture	0	0	0.001185	0.000307	-100	0	385.993485	8	No Statistically Significant Difference	
9 Postoperative hemorrhage or hematoma	0.001197	0	0.004631	0.002401	-50.145773	49.8542274	143.02374	9	No Statistically Significant Difference	
10 Postoperative physiologic and metabolic derangements				0.00042						
11 Postoperative respiratory failure				0.010392						
12 Postoperative pulmonary embolism or deep vein thrombosis	0.010752	0.009533	0.022906	0.011181	-3.8368661	10.9024238	108.702263	12	No Statistically Significant Difference	
13 Postoperative sepsis				0.015061						
14 Postoperative wound dehiscence	0	0	0.007122	0.002633	-100	0	270.489935	14	No Statistically Significant Difference	
15 Accidental puncture or laceration	0.001349	0	0.003125	0.004574	-70.507215	29.4927853	38.8281592	15	Statistically Lower	
16 Transfusion reaction				0.000004						
17 Birth trauma - injury to neonate				0.001583						
18 Obstetric trauma - vaginal with instrument	0.139241	0.062898	0.215583	0.16055	-13.272501	47.5509187	47.5502959	18	No Statistically Significant Difference	
19 Obstetric trauma - vaginal without instrument	0.019846	0.013427	0.0262639	0.036203	-45.181339	17.7305748	17.7275364	19	Statistically Lower	

Note: Rates provided are per 1,000 cases.

Your Hospital's Performance Relative to National Benchmarks



The risk-adjusted rate is the estimate of how a hospital would perform on an indicator for an average case mix of patients, rather than its own case mix. This rate can be found in the provider-level reports from the Windows or SAS QI programs. See the other B tools for more information (B1 explains what the rates mean; B2a and B2b show how to use the software with your data and obtain these rates).

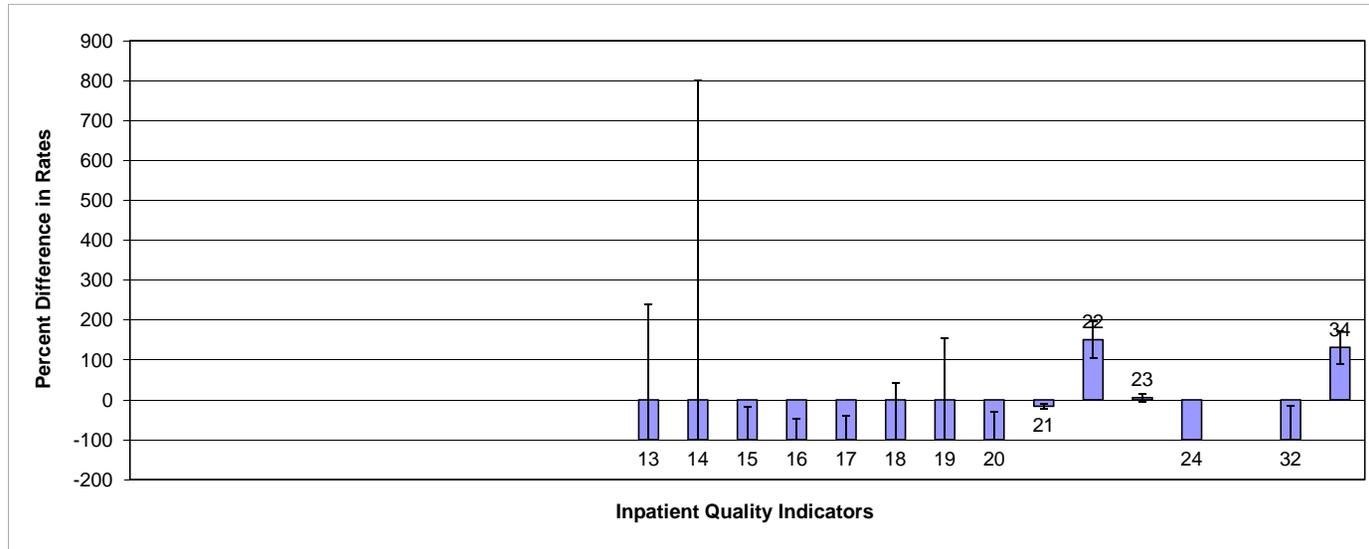
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The benchmark is the rate used as a comparison point. You may choose your State's rate, the national rate, or any other rate that you may wish to use as a comparison. See Tool B5 for more information about benchmarking.

		Enter your data here.				These calculate automatically.				
	Indicator	Risk-Adjusted Rate	Risk-Adjusted (Lower Confidence Interval Bound)	Risk-Adjusted (Upper Confidence Interval Bound)	Benchmark	Percent Difference in Rates	Percent Difference in Rates (Lower Bound)	Percent Difference in Rates (Upper Bound)	Chart Label	How does your hospital compare to benchmark on this indicator?
1	Esophageal resection volume									
2	Pancreatic resection volume									
4	Abdominal aortic aneurysm (AAA) repair volume									
5	Coronary artery bypass graft (CABG) volume				0.224827					
6	Percutaneous transluminal coronary angioplasty (PTCA) volume				0.661808					
7	Carotid endarterectomy mortality									
8	Esophageal resection mortality				0.083574					
9	Pancreatic resection mortality				0.047589					
11	Abdominal aortic aneurysm (AAA) repair mortality				0.064448					
12	Coronary artery bypass graft (CABG) mortality				0.024376					
13	Craniotomy mortality	0	0	0.217772	0.063984	-100	0	340.353838	13	No Statistically Significant Difference
14	Hip replacement mortality	0	0	0.0148536	0.001651	-100	0	899.672925	14	No Statistically Significant Difference
15	Acute myocardial infarction (AMI) mortality	0	0	0.0611616	0.073047	-100	0	83.7291059	15	Significantly Lower
16	Congestive heart failure (CHF) mortality	0	0	0.0173928	0.032713	-100	0	53.1678538	16	Significantly Lower
17	Acute stroke mortality	0	0	0.0601213	0.099597	-100	0	60.3645692	17	Significantly Lower
18	Gastrointestinal (GI) hemorrhage mortality	0	0	0.0312235	0.021786	-100	0	143.319104	18	No Statistically Significant Difference
19	Hip fracture mortality	0	0	0.0637962	0.024944	-100	0	255.757697	19	No Statistically Significant Difference
20	Pneumonia mortality	0	0	0.0313046	0.044862	-100	0	69.7797691	20	Significantly Lower
21	Cesarean delivery rate	0.238506	0.2209536	0.2561676	0.28322	-15.787727	6.19744368	6.23600028	21	Significantly Lower
22	Vaginal birth after C-section (VBAC) rate, uncomplicated	0.2464589	0.2015022	0.2914156	0.098288	150.75177	45.7397648	45.7397648	22	Significantly Higher
23	Laparoscopic cholecystectomy rate	0.8493151	0.7672489	0.9313812	0.80782	5.13667649	10.1589711	10.1589587	23	No Statistically Significant Difference
24	Incidental appendectomy rate among elderly	0	0	0	0.021465	-100	0	0	24	Significantly Lower
25	Bilateral cardiac catheterization rate				0.047916					
32	AMI mortality without transfer	0	0	0.0674293	0.079899	-100	0	84.3931714	32	Significantly Lower
34	VBAC, all	0.2237443	0.1847144	0.2627742	0.096808	131.121705	40.3168127	40.3168127	34	Significantly Higher

Note: Rates provided are per 1,000 cases.

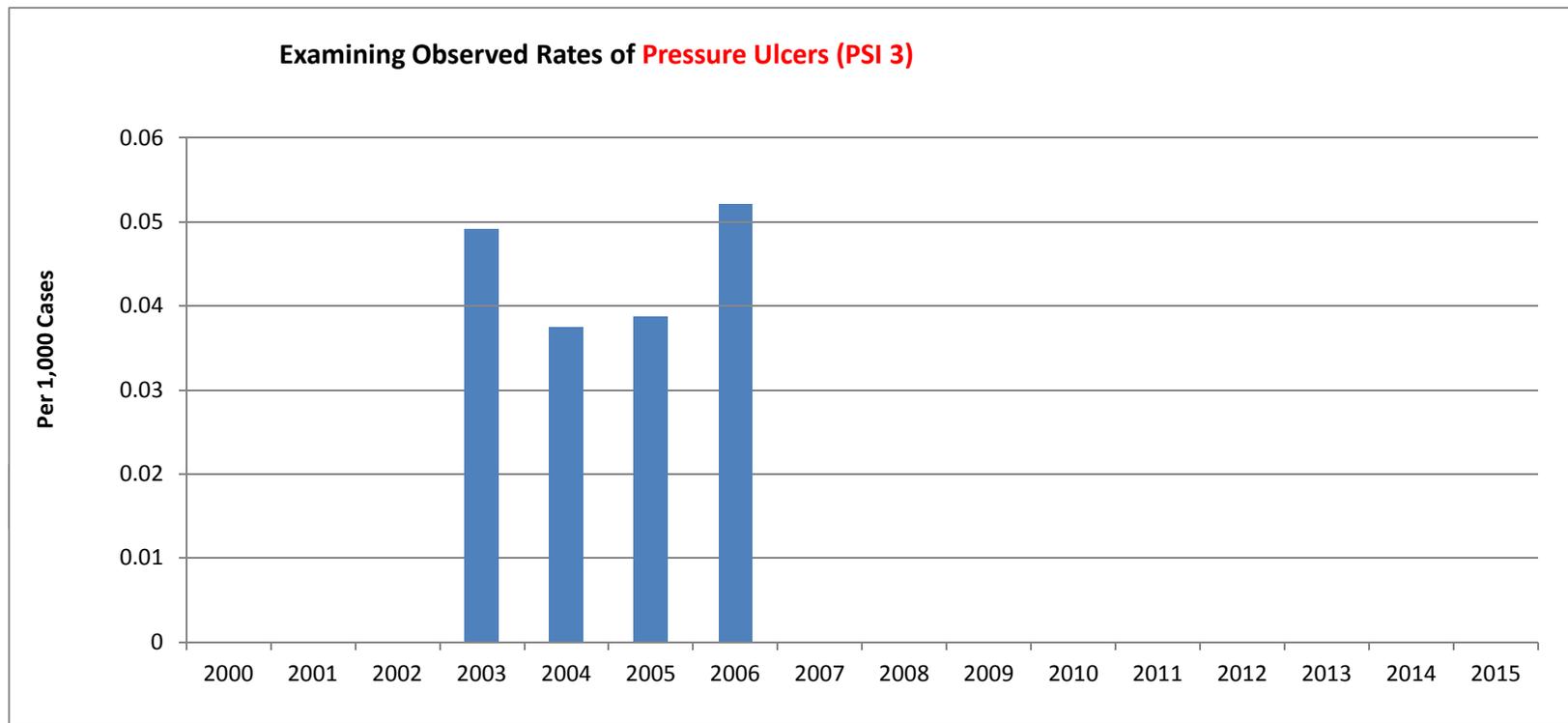
Your Hospital's Performance Relative to National Benchmarks



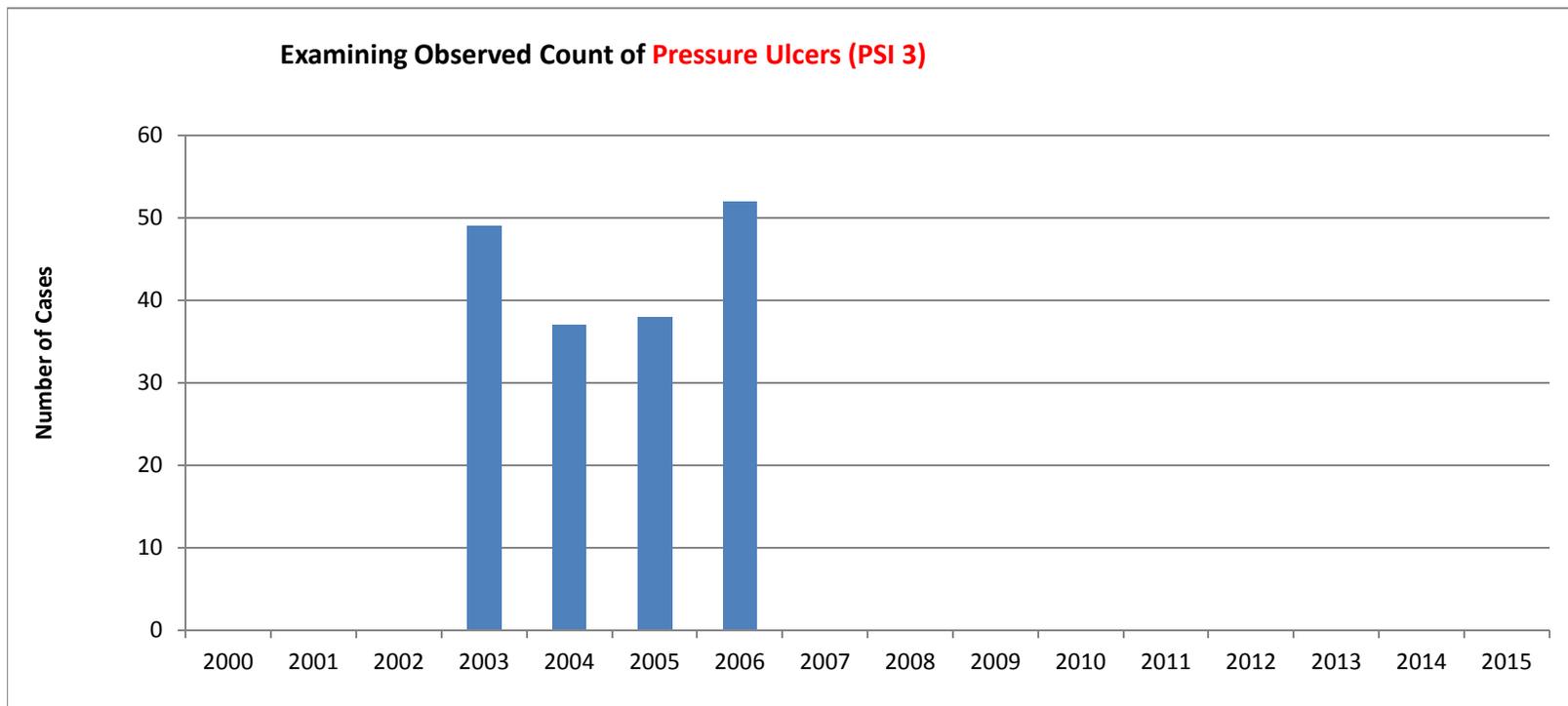
Enter Your Data Here		
Year	Observed Rate	Observed Count
2000		
2001		
2002		
2003	0.0491368	49
2004	0.0374269	37
2005	0.0387779	38
2006	0.0521654	52
2007		
2008		
2009		
2010		
2011		
2012		
2013		
2014		
2015		

The **observed rate** is the actual rate at which events measured by the indicator occurred in your hospital. This can be acquired from the SAS output, or the Windows QI output from the Quick Report. If another organization provides these data for you, you may also obtain it from them.

See the other B tools for more information (B1 explains what the rates mean; B2a and B2b show how to use the software with your data and obtain these rates).



Directions: Add your data into the yellow cells beside the relevant year. Remove the "Pressure Ulcers" part of the title and revise it to reflect your PSI or IQI of interest.

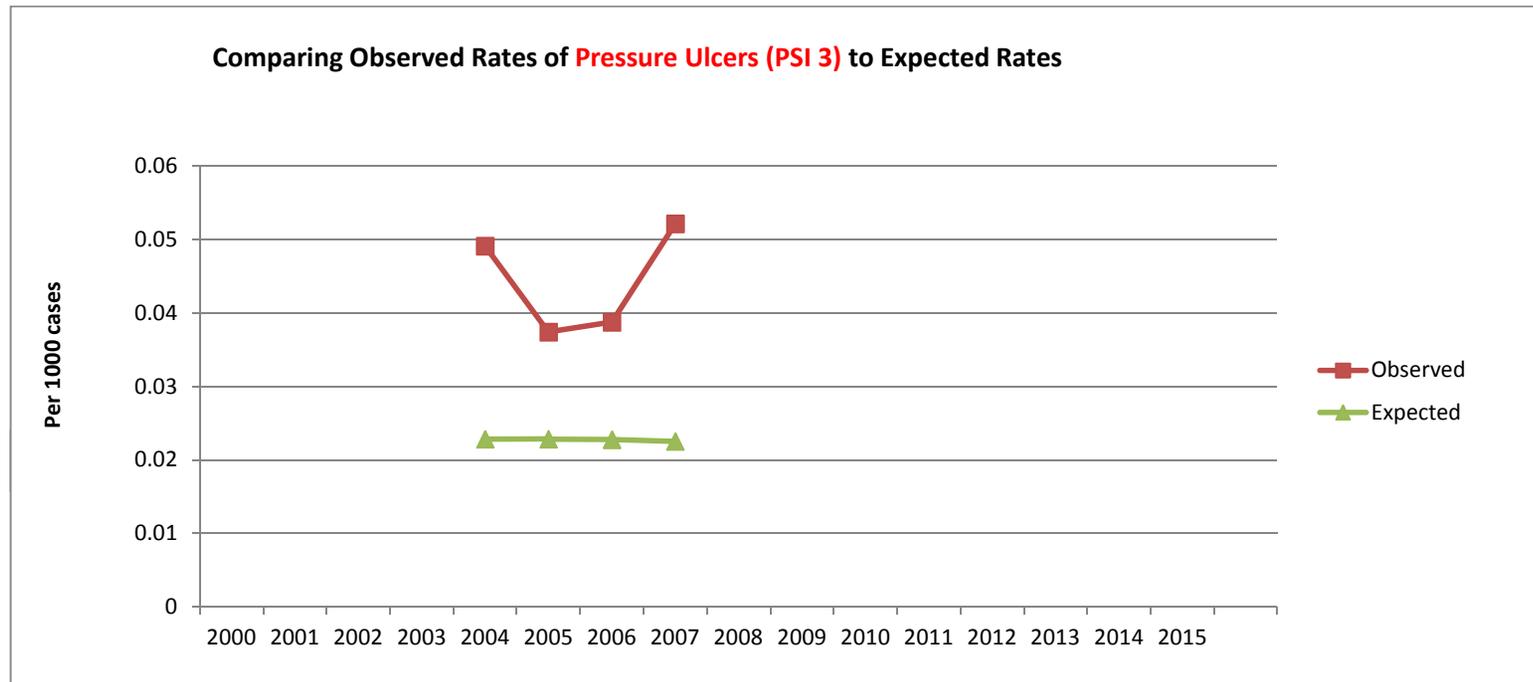


Enter Your Data Here		
Year	Observed	Expected
2000		
2001		
2002		
2003	0.0491368	0.0228119
2004	0.0374269	0.02283
2005	0.0387779	0.0227609
2006	0.0521654	0.02251
2007		
2008		
2009		
2010		
2011		
2012		
2013		
2014		
2015		

The **observed rate** is the actual rate at which events measured by the indicator occurred in your hospital. This can be acquired from the SAS output, or the Windows QI output from the Quick Report. If another organization provides these data for you, you may also obtain it from them.

The **expected rate** is the rate a hospital would have if it had average performance on a QI, as calculated in a reference population but accounting for the hospital's actual case mix. This can be acquired from the SAS output or the Windows QI output from the Provider Report.

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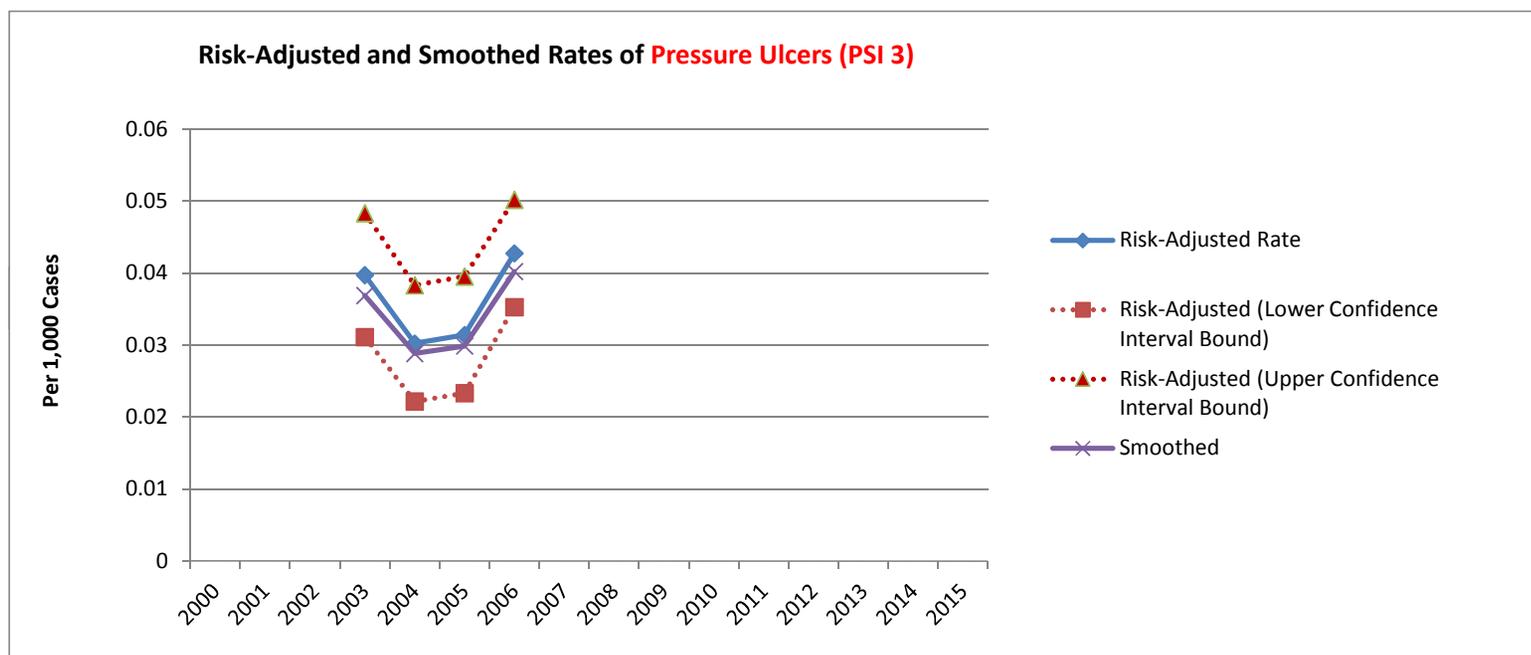
Enter Your Data Here				
Year	Risk-Adjusted Rate	Risk-Adjusted (Lower Confidence Interval Bound)	Risk-Adjusted (Upper Confidence Interval Bound)	Smoothed
2000				
2001				
2002				
2003	0.0397357	0.0311275	0.0483439	0.0368993
2004	0.0302422	0.0221701	0.0383142	0.0288377
2005	0.031429	0.023324	0.039534	0.0298721
2006	0.042752	0.03529	0.050213	0.040235
2007				
2008				
2009				
2010				
2011				
2012				
2013				
2014				
2015				

The **risk-adjusted** rate is the estimate of how a hospital would perform on an indicator for an average case mix of patients, rather than its own case mix. This rate can be found in the provider-level reports from the Windows or SAS QI programs.

The **confidence interval of the risk-adjusted rate** is identified in the SAS output as the lower CL (lower confidence limit) and upper CL (upper confidence limit). When creating provider-level reports using the Windows QI software, the user must specify that the confidence levels be included in the report.

The **smoothed rate** is a weighted average of the hospital's risk-adjusted rate and the reference population rate, where the weight reflects the reliability of the hospital's risk-adjusted rate. This can be found in the SAS output or the Windows QI Provider Report.

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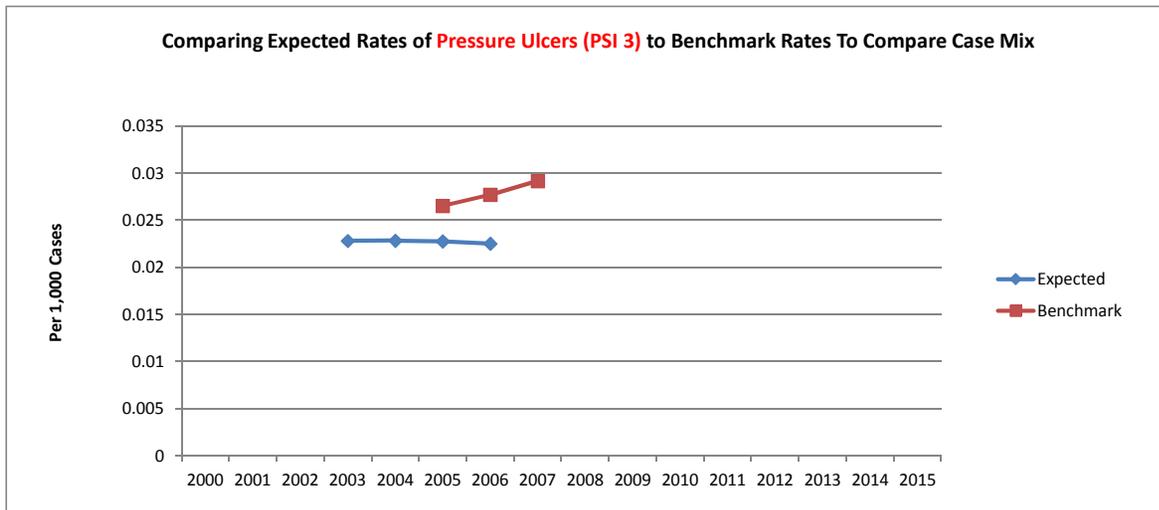
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The **expected rate** is the rate a hospital would have if it had average performance on a QI, as calculated in a reference population but accounting for the hospital's actual case mix. This can be acquired from the SAS output or the Windows QI output from the Provider Report.

The **benchmark** is the rate used as a comparison point. You may choose your State's rate, the national rate, or any other rate that you may wish to use as a comparison.

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Enter Your Data Here		
Year	Expected	Benchmark
2000		
2001		
2002		
2003	0.0228119	
2004	0.02283	
2005	0.0227609	0.02653
2006	0.02251	0.02771
2007		0.02918
2008		
2009		
2010		
2011		
2012		
2013		
2014		
2015		



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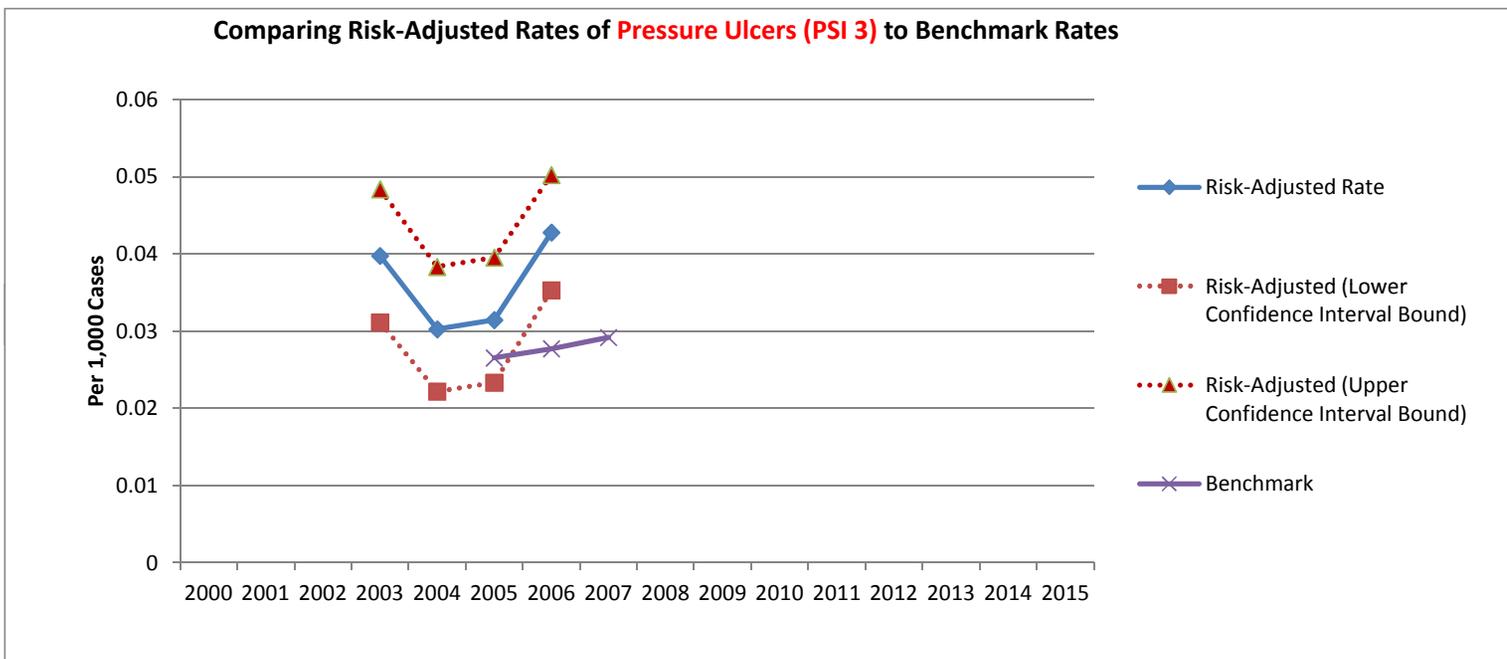
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2006	0.042752	0.03529	0.050213	0.02771
2007				0.02918
2008				
2009				
2010				
2011				
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