The Comparative Health System Performance (CHSP) Initiative is a $58-million, 5-year AHRQ effort that began in fall 2015. The initiative involves obtaining, enhancing, and disseminating data related to health systems; conducting research and analyses about what works in delivering health care by health systems; and disseminating findings to a wide variety of audiences.

**Goals**

The CHSP Initiative aims to identify, classify, and compare health systems with the goal of accelerating the dissemination of evidence to improve the performance of health systems. This includes the dissemination of patient-centered outcomes research (PCOR).

The CHSP Initiative seeks to understand and spread the answers to the following questions:

- What are the differences in performance between institutions?
- What health system characteristics are associated with better performance?
- Do high-performing health systems adopt PCOR findings? What factors affect the effective adoption and use of PCOR evidence?
- What lessons can be learned? Can they be applied to other health systems?

**Process**

To accomplish these activities and goals, AHRQ has established—

- Three Centers of Excellence at—
  - Dartmouth/Berkeley
  - National Bureau of Economic Research
  - RAND/Penn State
- A Coordinating Center through a contract with Mathematica Policy Research to facilitate collaboration among the Centers of Excellence and AHRQ and to provide analytic support

**Results**

A major product of this initiative is the “Compendium of U.S. Health Systems,” a database that documents health systems in the United States. Thus far, the health services research community has lacked a publicly available data resource that might shed light on the Nation’s health systems and the role they play in areas such as health care quality and patient safety. AHRQ’s Compendium seeks to fill this gap.

The initial release of the Compendium shows—

- The United States has 626 private health systems that account for a substantial majority of private, acute care providers
- About 70 percent of U.S. non-Federal general acute care hospitals are in health systems
- Hospitals in health systems account for roughly 88 percent of U.S. hospital beds and 92 percent of U.S. hospital discharges
- Nearly 45 percent of U.S. physicians are in these systems
The data also show considerable variations in the size of health systems. About half include fewer than 3 hospitals and 250 physicians. A small number of systems, meanwhile, are characterized by many more hospitals and physicians.

The Compendium will evolve over time. The initial release provides a 2016 list of health systems with more than 25 organizational attributes developed with data from sources that cover the entire United States. AHRQ plans to refine and update the Compendium with new information.

**Promoting Learning Health System Capabilities**
The CHSP Initiative seeks to identify the characteristics of health systems that are associated with better outcomes. Via the Compendium, the Initiative provides data to analysts so that new evidence can be produced about what works in delivering efficient, high-quality health care. On a parallel track, evidence will be created and disseminated to decision makers in the continuous cycle of learning, implementing, and assessing care delivery.

**For More Information**
www.ahrq.gov/chsp/index.html