

Report notes gains in Virginia cardiac care

Amy Trent | Posted: Saturday, March 26, 2016 9:34 pm

A new report shows overall cardiac care in Virginia has improved in the last five years, including at Lynchburg-based Centra Health.

The report — released last week from Virginia Health Information, a nonprofit that gathers and reports on healthcare data in the commonwealth — shows mortality rates and 30-day readmission rates have steadily declined since 2010.

According to the group, statewide mortality rates have decreased 20 percent and re-admission rates have declined 8 percent.

“Reasons for these declines may include better control of high blood pressure, effective use of medications and more regular follow-up care after hospitalization. It is these and other factors that are providing great opportunity for continued quality of care improvements,” VHI said in a news release.

Centra’s ratings show readmissions in medical cardiology and coronary artery bypass graft (CABG) surgery are better than expected, and “as expected” in every other area save one — CABG mortality rates, which are higher than expected.

The surgery, also called coronary artery bypass surgery, heart bypass or bypass surgery, is a procedure performed to relieve angina and reduce the risk of death from coronary artery disease. Arteries and/or veins from elsewhere in the patient’s body are grafted from the aorta to the coronary arteries to get around build-up and improve the blood supply to the coronary circulation supplying the heart muscle.

This is the first time since 2010 those mortality rates were deemed by VHI to be higher than expected. That rate has been labeled “as expected” every other year.

Out of 21 hospitals statewide that provide the surgery, according to VHI, Riverside Regional Medical Center in Newport News was the only other provider to have a higher-than-expected mortality rate, according to the report. The remaining facilities had “as expected” rates.

None had a better-than-expected rate, and of those same facilities Centra was the only one to have a better-than-expected readmission rating — meaning Centra’s patients did not have to go back to the hospital in the month following surgery because of health problems related to the procedure.

VHI determined the expected mortality rate was 0.79 percent for Centra Lynchburg General Hospital in 2014, while the actual mortality rate was 2.5 percent for 200 patients.

In 2013, when VHI gave Centra an “as expected” rating, the expected mortality rate was 0.84 percent and the actual mortality rate was 0.98 percent on 204 patients.

The Society for Thoracic Surgeons (STS) ranks Centra’s Lynchburg General Hospital just slightly behind

its peers on CABG mortality rates. Centra scored a 97.4 for “absence of mortality” in 2014, while the participant mean for comparable systems is 98.8.

Overall, according to the Society of Thoracic Surgery, the risk-adjusted rate of complication and death combined at Centra is 5.6 percent, and much lower than similar hospitals nationwide, where the risk-adjusted rate of complication and death is 13 percent.

Those numbers, the most recent available, are based on surgeries performed at Centra and like hospitals in 2014. STS ranks Lynchburg General as a three-star hospital — the highest ranking available — based on those 2014 numbers.

Michelle Cabell, Centra’s managing director of cardiovascular, endovascular and neuroscience services and a registered nurse, said Friday the VHI survey has merit and is a good launching point for those evaluating where to receive care.

“I do think it’s helpful because you can see a comparison between the systems,” Cabell said, adding consumers should do more investigation to get down to the details of the numbers on a website such as Hospital Compare (www.medicare.gov/hospitalcompare/), which is run by the Centers for Medicare and Medicaid Services and provides an in-depth look at services of every healthcare provider in the country.

Cabell said Centra’s better-than-expected readmission rating is part of an “across the board” downward trend in that category at Centra, a result of “preventative care and working hard to partner with the patient, empowering them in their care.”

“As a nation everyone’s focused on 30-day readmission and keeping costs low,” she said.

Following the implementation of the Affordable Care Act, healthcare providers and the government have kept close track of readmissions, because they are so costly to the system.

In 2010, CMS calculated that readmissions cost the country \$17.5 billion in inpatient spending. In 2012 the federal government began penalizing hospitals on a sliding scale for readmitting patients within 30 days of discharge.

Michael T. Lundberg, executive director of VHI, said the report empowers consumers to make more informed healthcare decisions, and reveals valuable insight to healthcare professionals and hospitals for possible quality improvement opportunities.

“With five years of Cardiac Care information available, consumers and healthcare providers can see how heart care is improving in hospitals, by region and Virginia,” Lundberg said.