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**FROM THE 2009 LEAPFROG HOSPITAL SURVEY:
QUALITY NOT ADEQUATE &
WASTE A MAJOR PROBLEM**

Results emphasize the advantages of employers and other group purchasers demanding change

WASHINGTON, DC, April 13, 2010 – According to new results from the 2009 Leapfrog Hospital Survey released today at the World Health Congress in Washington, DC, hospital quality needs significant improvement and waste remains rampant. One encouraging sign: steady improvements over time, supporting the value of hundreds of purchasers' growing efforts to use Leapfrog performance data in decision-making, contracting, pay for performance, and benefits design. Nonetheless, overall quality remains challenged, with fewer than half of hospitals achieving adequate quality standards.

"There is significant improvement in performance, for which we commend hospitals as well as the hundreds of purchasers using Leapfrog data to improve quality of care for employees," said Leapfrog CEO Leah Binder, "Still, at most half of hospitals ever achieve acceptable standards for mortality, and that's very concerning."

The Leapfrog Group (www.leapfroggroup.org) uses the collective leverage of large purchasers of health care to initiate breakthrough improvements in the safety, quality, and affordability of health care for Americans. The Leapfrog Group was founded in November 2000 by the Business Roundtable and is now independently operated with support from its members.

Of the 1,244 hospitals that completed the 2009 Leapfrog Hospital Survey, 53.5% met Leapfrog's quality standard for heart bypass surgery, compared to only 43% in 2008. Similarly, this year 44% of hospitals met Leapfrog's quality standard for heart angioplasty, compared to only 35% last year.

Waste also emerges as a problem in the Leapfrog Survey, despite strong advocacy during the health reform debate around "bending the cost curve." In 2009, there was a 56% difference between the highest and lowest performing hospitals in terms of resource use for heart bypass surgery. For heart angioplasty, there was a 79% difference between the highest and lowest performers.

To gauge waste, Leapfrog's resource use measure is based on risk-adjusted mean length of stay tempered by readmission rates. Length of stay is a strong determinant of cost.

"The variations in resource use among hospitals performing the same type of surgery highlight the opportunities that exist for significantly cutting the costs of care. Employers and other large purchasers of care need to be assertive in demanding hospitals reduce this waste and improve their Leapfrog performance," said Binder.

Binder added, "This year's data points to the value of using Leapfrog data for strategic improvements in employee benefits programs. In states like Maine, where participation and performance in the Leapfrog Hospital Survey is financially rewarded in the benefits package of one of the state's largest purchasers, we see larger margins of improvement year over year on both quality and resource use measures. Overall, where purchasers are active using Leapfrog data, we see real change."

In 2009, less than 50% of hospitals met Leapfrog's outcome, volume, and process standards for six high-risk procedures and conditions. Research suggests that following nationally endorsed and evidence-based guidelines for these procedures and conditions is known to save lives:

High-risk Surgery	% of reporting hospitals that fully met Leapfrog's standard in 2009
Aortic Valve Replacement	11.8%
Abdominal Aortic Aneurism Repair	36.1%
Pancreatic Resection	33.5%
Esophageal Resection	31.5%
Weight-loss (Bariatric) Surgery	36.6%
High-risk Deliveries	29.9%

The voluntary Leapfrog Hospital Survey results are as of March 28, 2010, and include 1,244 hospitals in 45 states. Individual hospital results can be viewed and compared at <http://www.leagfroggroup.org/cp>.

The annual Leapfrog Hospital Survey is the gold standard for comparing hospitals' performance on the national standards of safety, quality, and efficiency that are most relevant to consumers and purchasers of care. Results are always made transparent by hospital, and Leapfrog's purchaser members use survey results to inform their employees and purchasing strategies. Leapfrog uses a panel of experts to select measures that are evidence-based in peer-reviewed literature and have the most dramatic impact on patient outcomes and cost-effectiveness.
