

Utilization Indicators Calendar Year 2000

ABOUT THIS REPORT ON UTILIZATION INDICATORS

The charts in this publication are intended to provide aggregate and comparative data on the utilization trends of the District of Columbia hospital community for calendar year 2000. Trend data for five-year periods have been provided where available.

The source of the data is the District of Columbia Hospital Association's (DCHA) Monthly Utilization Survey and Quarterly Bed Capacity and Census Survey (self-reported by individual hospitals). The graphs in this report describe utilization trends in the aggregate for the District's 11 acute care non-federal hospitals:

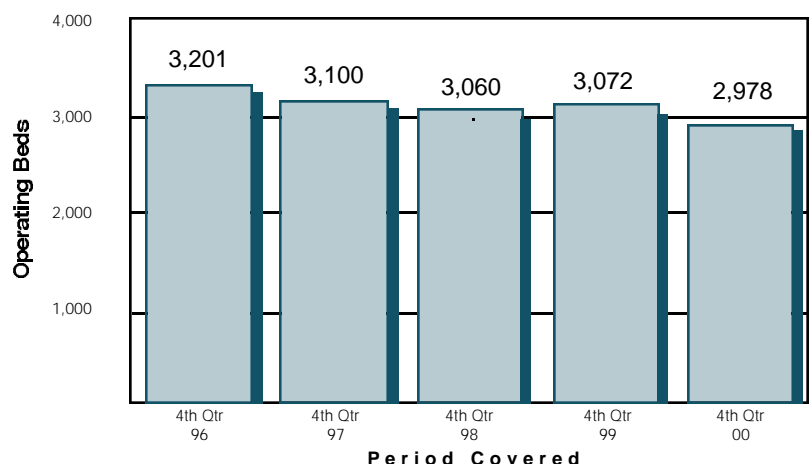
- Children's National Medical Center
- Columbia Hospital for Women Medical Center
- District of Columbia General Hospital
- George Washington University Hospital
- Georgetown University Hospital
- Greater Southeast Community Hospital
- Hadley Memorial Hospital
- Howard University Hospital
- Providence Hospital
- Sibley Memorial Hospital
- Washington Hospital Center

Specific utilization data for the eighteen Year 2000 DCHA member hospitals are provided in table form.

Operating Bed Capacity District of Columbia Acute Care Hospitals Five-Year Trend: 1996 - 2000

From the fourth quarter of 1996 through the fourth quarter of 2000, the District's 11 acute care non-federal hospitals decreased the number of operating beds from 3,201 to 2,978, a decrease of 223 beds or 6.97 percent.

- Note:** Calculations are based on reported utilization figures for the 11 District of Columbia acute care non-federal hospitals.
- Definition:** Bed Capacity – The average number of beds (staffed beds) during the reporting period.
- Source:** DCHA Quarterly Occupancy and Bed Capacity Survey



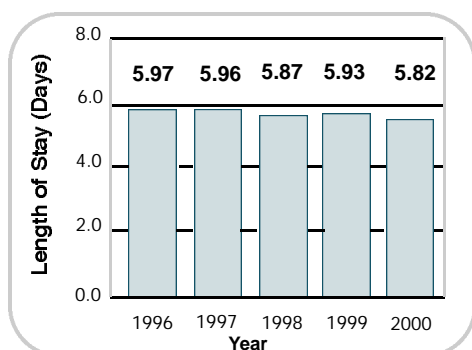
Operating Bed Capacity

DCHA Member Hospitals, 2000

	Beds In Operation		
	4 th Quarter 2000	4 th Quarter 1996	Percent Change
Acute Care			
Children's National Medical Center	188	188	0.00%
Columbia Hospital for Women Medical Center	110	110	0.00%
District of Columbia General Hospital	150	265	-43.40%
George Washington University Hospital	231	277	-16.61%
Georgetown University Hospital	283	359	-21.17%
Greater Southeast Community Hospital	278	296	-6.08%
Hadley Memorial Hospital	54	71	-23.94%
Howard University Hospital	294	309	-4.85%
Providence Hospital	330	316	4.43%
Sibley Memorial Hospital	226	235	-3.83%
Washington Hospital Center	834	775	7.61%
ACUTE TOTAL	2,978	3,201	-6.97%
Other Specialty			
National Rehabilitation Hospital	128	160	-20.00%
Psychiatric			
Psychiatric Institute of Washington, D.C.	104	99	5.05%
Saint Elizabeths Hospital/CMHS	609	817	-25.46%
Federal			
Veterans Affairs Medical Center	171	257	-33.46%
Walter Reed Army Medical Center	235	474	-50.42%
Malcolm Grow Medical Center, AAFB	60	N/A	N/A
National Naval Medical Center, Bethesda	203	N/A	N/A
SUBTOTAL - DC ONLY	4,225	5,008	-15.63%
GRAND TOTAL	4,428	N/A	N/A

Definition: Capacity – The average number of operating beds (staffed beds) during the reporting period.

Source: DCHA Quarterly Occupancy and Bed Capacity Survey



Average Length of Stay

District of Columbia Acute Care Hospitals
Five-Year Trend: 1996 - 2000

Average length of stay declined 2.57 percent between 1996 and 2000 for District acute care hospitals to 5.82 days. This continues to be a national trend due in large part to technological advances in medicine that have moved many procedures to the outpatient side, as well as to managed care that has required earlier discharges.

Source: Calculations are based on reported utilization figures for the 11 District of Columbia acute care non-federal hospitals.

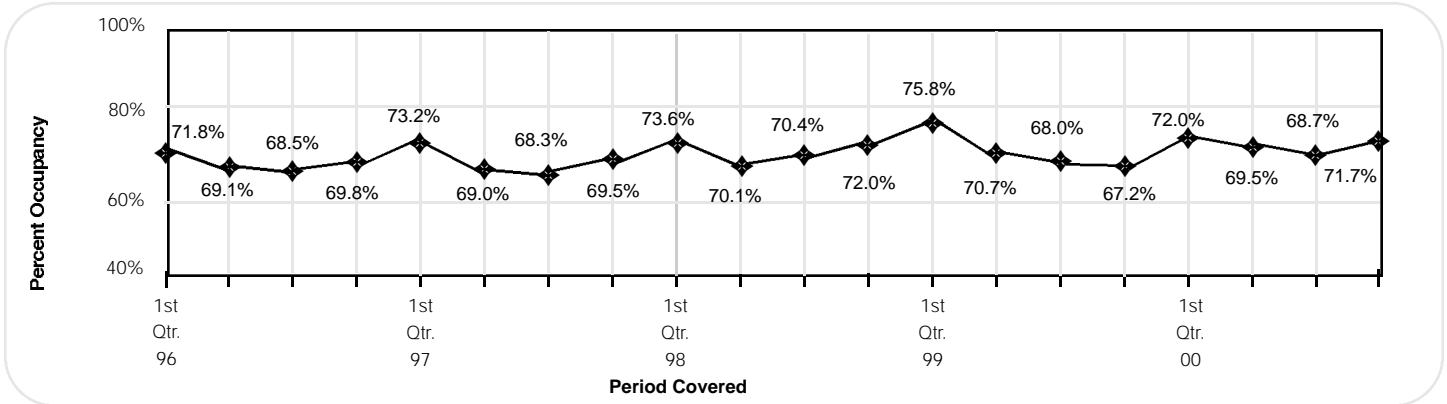
Definition: Average Length of Stay (ALOS) – average number of days per inpatient admission. Derived by dividing the number of inpatient days by the number of admissions. The primary purpose of the ALOS calculation is to display trends and should not be confused with hospital internal LOS calculations that are defined as patient days/discharges.

Source: DCHA Monthly Utilization Survey

Occupancy Rate

District of Columbia Acute Care Hospitals Five-Year Trend: 1996 – 2000

Occupancy rate continues to be higher than most other states, where the rate is about 60 percent. This reflects the ongoing demand for tertiary services, as well as the hospitals' commitment to care for the uninsured, who are hospitalized at higher rates than the insured population.



	Annualized Occupancy Rate		% Change
	2000	1996	
Acute Care			
Children's National Medical Center	80.51%	86.11%	-6.51%
Columbia Hospital for Women Medical Center	37.45%	52.56%	-28.75%
District of Columbia General Hospital	65.51%	67.02%	-2.25%
George Washington University Hospital	67.77%	74.23%	-8.71%
Georgetown University Hospital	63.72%	71.01%	-10.26%
Greater Southeast Community Hospital	66.40%	76.15%	-12.81%
Hadley Memorial Hospital	50.95%	66.08%	-22.89%
Howard University Hospital	80.06%	60.49%	32.35%
Providence Hospital	74.56%	73.02%	2.10%
Sibley Memorial Hospital	72.55%	69.55%	4.31%
Washington Hospital Center	74.45%	67.73%	9.92%
ACUTE TOTAL	70.67%	69.79%	1.27%
Other Specialty			
National Rehabilitation Hospital	83.31%	68.16%	22.24%
Psychiatric			
Psychiatric Institute of Washington, D.C.	65.32%	52.13%	25.32%
Saint Elizabeths Hospital/CMHS	96.77%	96.44%	0.34%
Federal			
Veterans Affairs Medical Center	72.38%	70.50%	2.67%
Walter Reed Army Medical Center	82.74%	75.06%	10.23%
Malcolm Grow Medical Center, AAFB	53.48%	N/A	N/A
National Naval Medical Center, Bethesda	45.64%	N/A	N/A
SUBTOTAL - DC ONLY	75.08%	74.25%	1.28%
GRAND TOTAL	73.50%	N/A	N/A

Note: Calculations are based on reported utilization figures for the 11 District of Columbia acute care non-federal hospitals.

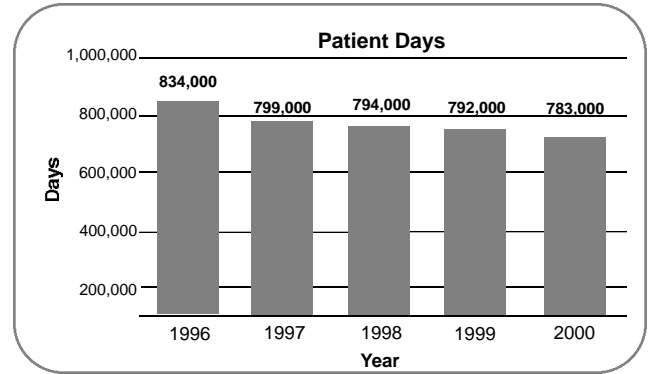
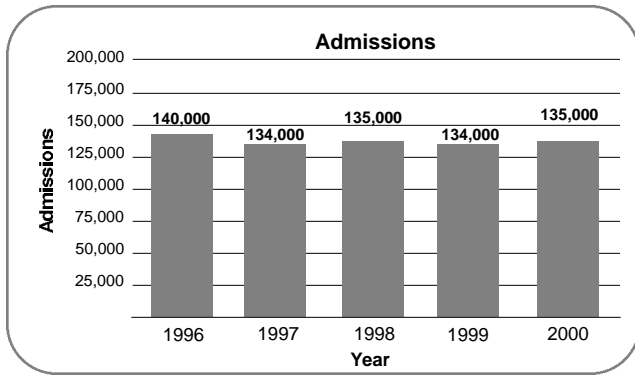
Definition: Occupancy percentages are calculated based on the number of operating beds. Percent occupancy is defined as the average daily census divided by the number of operating beds.

Source: DCHA Quarterly Occupancy and Bed Capacity Survey

Inpatient Admissions and Patient Days

District of Columbia Acute Care Hospitals
Five-Year Trend: 1996 – 2000

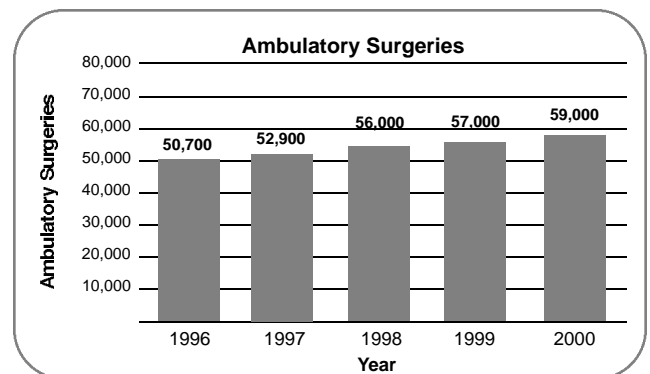
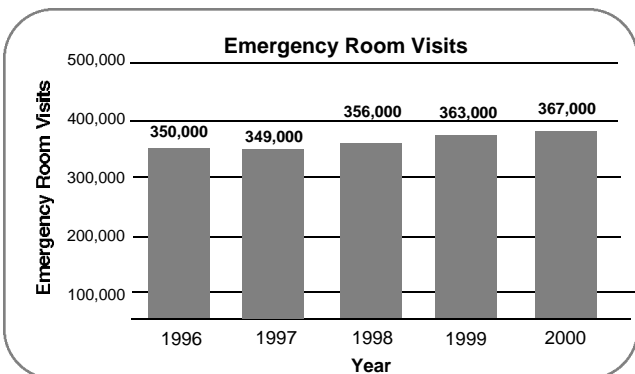
As predicted, managed care and advanced technology have caused inpatient hospital admissions and patient days to decrease. However, the past four years have seen admission rates level off. In contrast, patient days continue to decline at a steady rate.



Emergency Room Visits and Ambulatory Surgeries

District of Columbia Acute Care Hospitals
Five-Year Trend: 1996 – 2000

Emergency room visits increased 4.63 percent, and ambulatory surgeries increased 14.07 percent over the past five years. The increase in emergency care is part of a national trend, which is not yet understood. The increase in ambulatory surgeries has encouraged hospitals to develop satellite facilities throughout the entire metropolitan area.



Note: Calculations are based on reported utilization figures for the 11 District of Columbia acute care non-federal hospitals.

Definition:

- Ambulatory Surgeries - The number of scheduled surgical services provided to patients who do not remain in the hospital overnight.
- Emergency Room Visits - The number of visits to the hospital's emergency unit, including those resulting in admissions.
- Inpatient Admissions - The number of patients, excluding newborns, accepted for inpatient services during the entire reporting period.

Source: DCHA Monthly Utilization Survey

Inpatient Admissions and Patient Days

DCHA Member Hospitals, 2000

Among the District's 11 acute care non-federal hospitals, inpatient utilization has declined over the past five years. Between 1996 and 2000, admissions decreased 3.65 percent and inpatient days decreased 6.15 percent. The overall decrease is indicative of increased managed care and improving technology. However, the rate of decline in inpatient admissions and patient days has dropped from over four percent a year to less than one percent, with admissions recently increasing slightly, as patients presenting are older and sicker.

For specialty hospitals – rehabilitation and psychiatric facilities – rates of admissions and patient days are mixed over the past year. At smaller, private facilities, rates are increasing. At the public psychiatric hospital, rates are decreasing.

DCHA has just begun to collect data for all four federal hospitals, so no trends can be determined.

	Admissions			Patient Days		
	1999	2000	% Change	1999	2000	% Change
Acute Care						
Children's National Medical Center	9,240	9,618	3.93%	53,918	55,394	2.66%
Columbia Hospital for Women Medical	5,843	5,182	-12.76%	18,412	15,078	-22.11%
District of Columbia General Hospital	10,129	9,627	-5.21%	59,782	56,046	-6.67%
George Washington University Hospital	11,485	11,824	2.87%	60,199	57,295	-5.07%
Georgetown University Hospital	13,402	12,363	-8.40%	75,667	66,465	-13.84%
Greater Southeast Community Hospital	9,767	9,391	-4.00%	66,803	65,373	-2.19%
Hadley Memorial Hospital	1,534	1,583	3.10%	12,056	11,329	-6.42%
Howard University Hospital	11,407	11,799	3.32%	82,037	84,535	2.95%
Providence Hospital	11,963	12,398	3.51%	83,567	87,184	4.15%
Sibley Memorial Hospital	10,584	11,233	5.78%	57,705	58,285	1.00%
Washington Hospital Center	38,197	39,526	3.36%	221,956	225,953	1.77%
ACUTE TOTAL	133,551	134,544	0.74%	792,102	782,937	-1.17%
Other Specialty						
National Rehabilitation Hospital	1,679	1,717	2.21%	36,280	39,031	7.05%
Psychiatric						
Psychiatric Institute of Washington, D.C.	1,401	1,726	18.83%	23,811	24,864	4.24%
Saint Elizabeths Hospital/CMHS	2,084	2,064	-0.97%	234,570	221,707	-5.80%
Federal						
Veterans Affairs Medical Center	6,105	6,399	4.59%	47,615	45,566	-4.50%
Walter Reed Army Medical Center	10,518	10,448	-0.67%	65,147	74,421	12.46%
Malcolm Grow Medical Center, AAFB	N/A	3,222	N/A	N/A	11,745	N/A
National Naval Medical Center	N/A	7,627	N/A	N/A	33,907	N/A
SUBTOTAL – DC ONLY	155,338	156,898	0.99%	1,199,525	1,188,526	-0.93%
GRAND TOTAL	N/A	166,747	N/A	N/A	1,234,178	N/A

Definition:

- Inpatient Admissions – The number of patients, excluding newborns, accepted for inpatient services during the entire reporting period.
- Inpatient Days – The number of adult and pediatric days of care, excluding newborn days of care, rendered during the entire reporting period.

Source: DCHA Monthly Utilization Survey

Emergency Room and Ambulatory Surgeries

DCHA Member Hospitals, 2000

The pattern of emergency room visits reflects the mix of the recent increase in insurance coverage for children under the federal Children's Health Insurance Program, and the increased need for services for the growing elderly population. The continuing increase in ambulatory surgeries demonstrates improved clinical practice to provide care on the outpatient side.

	Emergency Room Visits			Ambulatory Surgeries		
	1999	2000	% Change	1999	2000	% Change
Acute Care						
Children's National Medical Center	48,863	41,302	-18.31%	4,116	5,189	20.68%
Columbia Hospital for Women Medical Center	N/A	N/A	N/A	3,981	3,679	-8.21%
District of Columbia General Hospital	51,956	51,491	-0.90%	2,173	3,325	34.65%
George Washington University Hospital	43,439	44,854	3.15%	5,740	5,323	-7.83%
Georgetown University Hospital	21,777	21,756	-0.10%	8,495	8,259	-2.86%
Greater Southeast Community Hospital	37,302	37,429	0.34%	2,865	2,557	-12.05%
Hadley Memorial Hospital	8,172	9,487	13.86%	1,287	891	-44.44%
Howard University Hospital	41,116	43,784	6.09%	4,669	4,858	3.89%
Providence Hospital	33,054	34,629	4.55%	6,746	6,250	-7.94%
Sibley Memorial Hospital	22,047	23,115	4.62%	6,240	7,261	14.06%
Washington Hospital Center	55,513	58,826	5.63%	11,047	11,071	0.22%
ACUTE TOTAL	363,239	366,673	0.94%	57,359	58,663	2.22%
Federal						
Veterans Affairs Medical Center	13,540	14,520	6.75%	2,965	3,120	4.97%
Walter Reed Army Medical Center	19,532	20,195	3.28%	11,605	11,088	-4.66%
Malcolm Grow Medical Center, AAFB	N/A	28,440	N/A	N/N	2,967	N/A
National Naval Medical Center, Bethesda	N/A	19,521	N/A	N/A	N/A	N/A
SUBTOTAL – DC ONLY	396,111	401,388	1.26%	71,929	72,871	1.29%
GRAND TOTAL	N/A	449,349	N/A	N/A	N/A	N/A

Note: Includes data for all hospitals providing emergency room services and ambulatory surgeries.

Definition:

- Ambulatory Surgeries – The number of scheduled surgical services provided to patients who do not remain in the hospital overnight.
- Emergency Room Visits – The number of visits to the hospital's emergency unit, including those resulting in admissions.

Source: DCHA Monthly Utilization Survey



District of Columbia Hospital Association

1250 Eye Street, N.W., Suite 700

Washington, D.C. 20005

202-682-1581 • FAX 202-371-8151

www.dcha.org