

HEALTH AND HOSPITALS CORPORATION Alan D. Aviles, President

Key Public Service Areas

 Provide comprehensive medical, mental health and substance abuse services to New York City residents regardless of their ability to pay.

Scope of Agency Operations

The Health and Hospitals Corporation (HHC), the largest municipal hospital and health care system in the country, is a \$7 billion public benefit corporation. It provides medical, mental health and substance abuse services through its 11 acute care hospitals, four skilled nursing facilities, six large diagnostic and treatment centers and more than 70 community and school-based clinics. HHC also provides specialized services such as trauma, high risk neonatal and obstetric care and burn care. HHC acute care hospitals serve as major teaching hospitals. HHC operates a certified home health agency and a health maintenance organization, MetroPlus. HHC is the single largest provider of health care to uninsured New Yorkers. One in every six New Yorkers receives health services at an HHC facility.

Critical Objectives

- Improve health outcomes.
- Achieve/surpass local and national performance for specific health interventions and efficient delivery of health services.
- Reduce unnecessary emergency room visits and rehospitalizations.
- Improve access to outpatient services.
- Expand enrollment in insurance programs.

Performance Report

- ✓ Provide comprehensive medical, mental health and substance abuse services to New York City residents regardless of their ability to pay.
- HHC considers life-saving screenings to be the lynchpin in its strategy to intervene early and aggressively in the treatment of cancer. Efforts to increase cancer screening have had a dramatic and positive impact on the lives of New Yorkers. In Fiscal 2012, HHC continued to surpass the target of 70 percent for the percentage of eligible women ages 40 to 70 receiving a mammogram with an achievement of 73 percent. HHC puts a premium on taking steps to help women prevent illness or diagnose it as early as possible, when treatment can be most successful. Wide-scale public awareness campaigns and materials in 11 languages alert women 40 and over to get a mammogram. Outreach efforts such as the "Give your Mother a Gift" mammogram campaign which provides mammograms at no cost to eligible patients is offered every year during the month of May.
- As a result of HHC's case management initiative that focuses on real time monitoring of length of stay, the general care average length of stay (excluding psychiatry and rehabilitation) continues to meet the corporate target of 4.7 days. HHC continues to enhance process improvements in admissions and discharge planning to sustain operational efficiencies which contribute to length of stay reductions.
- Another priority for HHC is reducing psychiatric re-admissions of patients with psychiatric conditions. The number of adult psychiatric patients that have been re-hospitalized within 15 days of discharge has decreased for the third consecutive year. The most recent decrease is from 4.8 percent in Fiscal 2011 to 4.6 percent in Fiscal 2012. HHC attributes this steady decrease to effective discharge planning and transitioning of patients from the hospital to the community. HHC provides a post-hospitalization treatment and discharge plan for each psychiatric patient; and relies on linkages with community support and housing programs to help psychiatric patients remain engaged in outpatient care within their communities.
- HHC continues to provide state-of-the-art treatment for adults, adolescent and children with HIV/AIDS. Research shows that patients

with HIV who are treated by providers who are experts in HIV care have better health outcomes than those who are not. In Fiscal 2012, 99.3 percent of HIV positive patients in care at HHC acute care hospitals were treated in dedicated HIV clinics. These clinics are monitored following HIV specific indicators set by the New York State Department of Health (NYS DOH). HHC's HIV Services continue to meet the Corporate goal with a utilization rate of over 99 percent. HHC serves more than 19,000 HIV/AIDS patients or nearly one fifth of the 100,000 plus people known to be living with HIV/AIDS in New York City, and is committed to improving the quality of life for these patients.

- In Fiscal 2012, the average cycle time for pediatric primary care services was 59 minutes, surpassing the corporate target of 60 minutes by one minute. However, the average cycle time for women's health primary care clinic visits and adult medicine were both above the target at 75 minutes. Last year, HHC primary care clinics received Patient Centered Medical Home (PCMH) designations from the National Committee for Quality Assurance (NCQA) for their quality service and as a result were required to implement new activities (including staff training) which contributed to the increase in cycle time for adult medicine and women's health. Once these activities are completed, HHC expects the average cycle time for these primary care visits to be on target.
- In Fiscal 2012, HHC continued to focus on services to address the health needs of specific populations, including women's health services. Through targeted efforts to enhance community outreach and patient education, HHC was able to retain 86 percent of prenatal patients through delivery. HHC delivers approximately 23,000 New York City babies each year and now many of them begin their lives in one of HHC's modern and welcoming birthing centers.
- As a result of HHC's continued efforts to enroll uninsured patients into public health insurance, the number of individuals enrolled in public health insurance has steadily risen since 2008 and surpassed 2012 enrollment targets. The Corporation expects that this trend will continue and has revised its enrollment targets for 2013.



■ FY 2008 ■ FY 2009 ■ FY 2010 ■ FY 2011 ■ FY 2012





| | | | Actual | Target | | 5-Yr. Trend | | |
|---|-------|-------|--------|--------|-------|-------------|-------|---------|
| Performance Statistics | FY08 | FY09 | FY10 | FY11 | FY12 | FY12 | FY13 | |
| \star Percentage of prenatal patients retained in care through delivery | 89.0% | 89.2% | 86.5% | 86.4% | 85.8% | 90.0% | 90.0% | Neutral |
| ★ Percent of eligible women aged 40-70 receiving a mammogram screening from HHC | 70.9% | 71.0% | 72.8% | 72.0% | 73.0% | 70.0% | 70.0% | Neutral |
| \star Percent of HIV patients using dedicated HIV clinics | 99.0% | 99.3% | 99.2% | 99.2% | 99.3% | 99.0% | 99.0% | Neutral |
| Percent of two-year olds immunized | 97.0% | 97.0% | 96.5% | 97.0% | NA | 98.0% | 98.0% | NA |
| ★ General Care average length of stay (days) | 4.7 | 4.6 | 4.6 | 4.6 | 4.7 | 4.7 | 4.7 | Neutral |
| ★ Emergency room revisits for adult asthma patients (%) | 5.2% | 4.7% | 5.1% | 5.1% | 5.4% | 5.0% | 5.0% | Neutral |
| ★ Emergency room revisits for pediatric asthma patients (%) | 3.1% | 3.3% | 3.2% | 2.7% | 3.7% | 3.2% | 3.2% | Neutral |
| Percent of adult patients discharged with a principal psychiatry diagnosis who are readmitted within 15 days | 4.6% | 5.2% | 5.1% | 4.8% | 4.6% | 5.0% | 5.0% | Neutral |
| ★ Average time spent by patient for a primary care visit at hospitals and diagnostic and treatment centers (minutes) - Adult medicine | 66.0 | 60.0 | 59.0 | 61.0 | 75.0 | 60.0 | 60.0 | Upward |

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| | Actual | | | | | Target | | 5-Yr. Trend |
|---|---------|---------|---------|---------|---------|---------|---------|-------------|
| Performance Statistics | FY08 | FY09 | FY10 | FY11 | FY12 | FY12 | FY13 | |
| ★ Average time spent by patient for a primary care visit at hospitals and diagnostic and treatment centers (minutes) - Pediatric medicine | 59.0 | 61.0 | 58.0 | 60.0 | 59.0 | 60.0 | 60.0 | Neutral |
| ★ Average time spent by patient for a primary care visit at hospitals and diagnostic and treatment centers (minutes) - Women's health | 59.0 | 60.0 | 61.0 | 61.0 | 75.0 | 60.0 | 60.0 | Upward |
| ★ Uninsured patients served | 413,294 | 448,705 | 452,576 | 477,957 | NA | * | * | NA |
| Total Medicaid Managed Care, Child Health Plus and Family Health Plus enrollees | 373,284 | 436,526 | 474,118 | 498,324 | 521,434 | 450,000 | 513,400 | Upward |
| - MetroPlus Medicaid, Child Health Plus and Family Health Plus enrollees | 323,746 | 355,172 | 383,797 | 401,967 | 420,459 | 370,000 | 446,932 | Upward |
| ★ Net days of revenue for accounts receivable | 59.2 | 56.3 | 55.5 | 52.3 | 56.4 | 56.0 | 56.0 | Neutral |
| ★ Critical Indicator "NA" - means Not Available in this report | | | | | | | | |

Agency Resources

| | | Actual | | | | | Plan ¹ | | |
|--|-----------|-----------|-----------|-----------|-----------|-----------|-------------------|---------|--|
| Resource Statistics | FY08 | FY09 | FY10 | FY11 | FY12 | FY12 | FY13 | | |
| Expenditures (\$ millions) ² | \$5,823.5 | \$5,955.4 | \$6,113.4 | \$6,294.7 | \$6,554.7 | \$6,719.0 | \$6,850.4 | Upward | |
| Revenues (\$ millions) | \$6,702.8 | \$6,188.8 | \$6,478.7 | \$6,847.9 | \$7,015.2 | \$7,221.7 | \$6,978.0 | Neutral | |
| Personnel | 40,522 | 40,834 | 39,872 | 38,898 | 38,387 | 38,129 | 37,748 | Neutral | |
| Overtime paid (\$ millions) | \$106.5 | \$107.0 | \$123.1 | \$125.9 | \$128.5 | \$124.0 | \$120.3 | Upward | |
| Capital commitments (\$ millions) ³ | \$178.7 | \$229.5 | \$124.4 | \$147.4 | \$272.7 | \$219.3 | \$124.5 | Upward | |
| 'Authorized Budget Level "NA" - Not Available in this report | | | | | | | | | |

*Expenditures include all funds. ³To view the FY 2013 September Capital Commitment Plan upon its release, see www.nyc.gov/omb.

Noteworthy Changes, Additions or Deletions

- Beginning in Fiscal 2013, the Mayor's Management Report will be restructured to focus on the goals that the agency intends to achieve during the fiscal year. Each goal will be accompanied by a performance measure or measures that will quantify the agency's progress toward achieving that goal. For Fiscal 2013, the department's services and goals are:
 - Service 1: Provide medical, mental health and substance abuse services to New York City residents regardless of their ability to pay.
 - Goal 1a: Improve access to outpatient services.
 - Goal 1b: Expand enrollment in insurance programs.
 - Goal 1c: Achieve/surpass local and national performance standards for specific health interventions and efficient delivery of health services.
 - Goal 1d: Reduce unnecessary emergency room visits and re-hospitalizations.

For more information please visit the website at: www.nyc.gov/hhc