

HEALTH AND HOSPITALS CORPORATION

Dr. Ramanathan Raju, President/Chief Executive Officer



WHAT WE DO

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.

FOCUS ON EQUITY

HHC's mission "to extend equally to all New Yorkers, regardless of their ability to pay, comprehensive health services of the highest quality in an atmosphere of humane care, dignity and respect" underscores HHC's commitment to equity. An affirmation of HHC's mission is in the continuous work to reduce healthcare disparities among New Yorkers who experience the greatest challenges accessing equitable, inclusive, patient-centered and welcoming healthcare. HHC is working to obtain Healthcare Equality Index (HEI) Leadership status at all facilities. All HEI Equality Leaders must document adoption of foundational policies and practices to ensure lesbian, gay, bisexual, and transgender (LGBT) patient-centered care. In August 2014 nine of 11 HHC hospitals and one of six Diagnostic and Treatment Centers achieved HEI Equality Leadership status from the Human Rights Campaign Foundation. HHC collaborates with disability advocates to increase access to primary care for women with disabilities by renovating patient care areas, redesigning exam rooms, purchasing specialized equipment and training of staff at eight HHC facilities.

OUR SERVICES AND GOALS

SERVICE 1 Provide medical, mental health and substance abuse services to New York City residents regardless of their ability to pay.

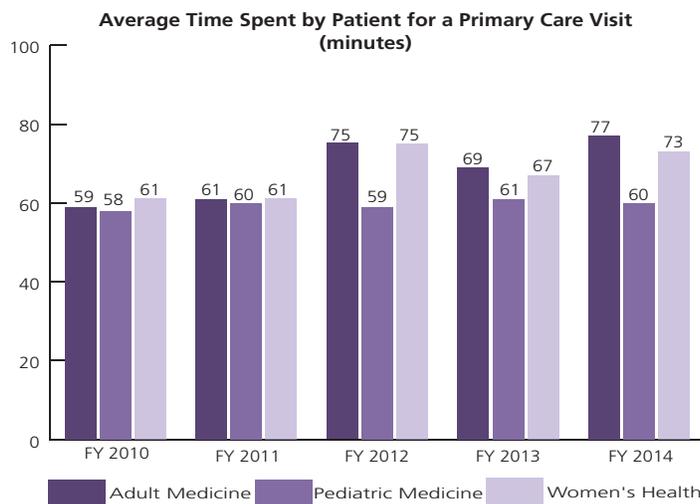
- Goal 1a Improve access to outpatient services.
- Goal 1b Expand enrollment in insurance programs.
- Goal 1c Achieve/surpass local and national performance standards for specific health interventions and efficient delivery of health services.
- Goal 1d Reduce unnecessary emergency room visits and re-hospitalizations.

HOW WE PERFORMED IN FISCAL 2014

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.

The percentage of prenatal patients retained in care through delivery decreased from 83 percent to 81.4 percent from Fiscal 2013 to Fiscal 2014. There is a time lag in the facility reporting of this indicator and the data included are from July 2012 to June 2013 for clinic data and July 2012 to March 2014 for deliveries. The time period for reporting these data includes the three or more months that Bellevue and Coney Island Hospital were closed or offering limited services following Hurricane Sandy. Additionally, the obstetrics/gynecology service at North Central Bronx Hospital temporarily closed in September 2013 and is scheduled to re-open in September 2014. With the effects of Hurricane Sandy diminishing and the re-opening of the obstetrics/gynecology service at North Central Bronx Hospital, we expect the percentage of prenatal patients retained in care to increase in Fiscal 2015.



In Fiscal 2014 the percent of HIV patients retained in care increased to 86.6 percent from 84.3 percent in Fiscal 2013 when several HHC facilities were negatively impacted by Hurricane Sandy. However, the percent of HIV patients slightly decreased from 87.4 percent in Fiscal 2012. Despite this decrease over the past several years, retention in care for HIV patients is a crucial indicator within the National AIDS Strategy and the Governor's commitment for New York to end AIDS by 2020. It is a key indicator of the success of medical services in treating HIV. HHC's retention-in-care rate far exceeds the current State average of 57 percent and the national average of 37 percent. The federal retention-in-care target for only a subset of HIV patients (those newly diagnosed) is 85 percent, and HHC currently meets and exceeds this target for all HIV patients. This success has been hard won and is based on the consistent, careful use of data and research to guide the targets for HHC's work.

The average time spent by patients for a primary care visit increased from 69 minutes in Fiscal 2013 to 77 minutes in Fiscal 2014 for adult medicine and 67 minutes in Fiscal 2013 to 73 minutes in Fiscal 2014 for women's health. Pediatric medicine visit time decreased slightly from 61 minutes to 60 minutes during the same time period. HHC is in the midst of a 24-month, system-wide effort to improve outpatient access, begun in February 2013, to address these increases.

Performance Indicators	Actual					Target		Desired Direction	5yr Trend
	FY10	FY11	FY12	FY13	FY14	FY14	FY15		
★ Prenatal patients retained in care through delivery (%)	86.5%	86.4%	85.8%	83.0%	81.4%	90.0%	90.0%	Up	Neutral
★ HIV patients retained in care (%)	87.1%	87.4%	87.4%	84.3%	86.6%	85.0%	85.0%	Up	Neutral
★ Average time spent by patient for a primary care visit at hospitals and diagnostic and treatment centers (minutes) - Adult medicine	59.0	61.0	75.0	69.0	77.0	60.0	60.0	Down	Up
★ Average time spent by patient for a primary care visit at hospitals and diagnostic and treatment centers (minutes) - Pediatric medicine	58.0	60.0	59.0	61.0	60.0	60.0	60.0	Down	Neutral
★ Average time spent by patient for a primary care visit at hospitals and diagnostic and treatment centers (minutes) - Women's health	61.0	61.0	75.0	67.0	73.0	60.0	60.0	Down	Up

★ Critical Indicator "NA" - means Not Available in this report ↕ shows desired direction

Goal 1b Expand enrollment in insurance programs.

In Fiscal 2014, the number of uninsured patients served at HHC hospitals declined as more New Yorkers enrolled in health insurance programs offered through health insurance exchanges. The number of uninsured patients served declined from 475,627 in Fiscal 2013 to 469,239 in Fiscal 2014, a decrease of 1.3 percent.

The total number of individuals enrolled in Medicaid Managed Care, Child Health Plus and Family Health Plus and the individuals enrolled in MetroPlus Medicaid, Child Health Plus and Family Health Plus has decreased by 1.3 percent and 1.2 percent, respectively, from Fiscal 2013 to Fiscal 2014. However, the data reported for Fiscal 2014 is not reflective of the entire fiscal year and are reported through January 2014 only. HHC expects that when the data for the entire fiscal year are available, there will be an increase in the number of enrollees from Fiscal 2013 to Fiscal 2014.

Performance Indicators	Actual					Target		Desired Direction	5yr Trend
	FY10	FY11	FY12	FY13	FY14	FY14	FY15		
★ Uninsured patients served	452,576	477,957	478,731	475,627	469,239	↓	↓	Down	Neutral
Total Medicaid Managed Care, Child Health Plus and Family Health Plus enrollees	474,118	498,324	521,434	525,804	518,969	513,400	513,400	Up	Neutral
- MetroPlus Medicaid, Child Health Plus and Family Health Plus enrollees	383,797	401,967	420,459	413,893	408,926	446,932	446,932	Up	Neutral

★ Critical Indicator "NA" - means Not Available in this report ↓↑ shows desired direction

Goal 1c Achieve/surpass local and national performance standards for specific health interventions and efficient delivery of health services.

The percent of eligible women aged 40 to 70 receiving a mammogram screening has increased from 73.9 percent in Fiscal 2013 to 75.6 percent in Fiscal 2014, well above the Corporate target of 70.0 percent. HHC facilities continue to promote cancer awareness and education and also conduct outreach and campaigns such as the "Give Your Mother a Gift" Mother's Day Cancer Screening.

In Fiscal 2014, the general care average length of stay remains slightly above the Corporate target of 4.7 days. HHC is working to enhance process improvements in admission and discharge planning to sustain operational efficiencies which will reduce length of stay.

Performance Indicators	Actual					Target		Desired Direction	5yr Trend
	FY10	FY11	FY12	FY13	FY14	FY14	FY15		
Two-year olds immunized (%)	96.5%	97.0%	97.0%	97.0%	NA	98.0%	98.0%	Up	NA
★ Eligible women, aged 40-70, receiving a mammogram screening from HHC (%)	72.8%	72.0%	73.0%	73.9%	75.6%	70.0%	70.0%	Up	Neutral
★ General care average length of stay (days)	4.6	4.6	4.7	5.0	5.0	4.7	4.7	Down	Up
★ Net days of revenue for accounts receivable	55.5	52.3	56.4	NA	NA	56.0	56.0	Down	NA

★ Critical Indicator "NA" - means Not Available in this report ↓↑ shows desired direction

Goal 1d Reduce unnecessary emergency room visits and re-hospitalizations.

HHC continues to encourage adult and pediatric patients to use primary care clinics instead of the emergency room and continues to work with patients to develop an Asthma Action Plan which includes instructions on how to assess their breathing, take their medications as instructed and maintain contact with their health care providers. Emergency room revisits for adult asthma patients have decreased from six percent in Fiscal 2013 to 5.5 percent in Fiscal 2014, and emergency room revisits for pediatric asthma patients decreased from 3.8 percent in Fiscal 2013 to 3.1 percent in Fiscal 2014, below the Corporate target of 3.2 percent.

Performance Indicators	Actual					Target		Desired Direction	5yr Trend
	FY10	FY11	FY12	FY13	FY14	FY14	FY15		
★Emergency room revisits for adult asthma patients (%)	5.1%	5.1%	5.4%	6.0%	5.5%	5.0%	5.0%	Down	Up
★Emergency room revisits for pediatric asthma patients (%)	3.2%	2.7%	3.7%	3.8%	3.1%	3.2%	3.2%	Down	Up
Adult patients discharged with a principal psychiatry diagnosis who are readmitted within 30 days (%)	9.4%	8.7%	7.0%	6.5%	7.4%	*	*	Down	Down

★ Critical Indicator "NA" - means Not Available in this report ↕↑ shows desired direction

AGENCY RESOURCES

Resource Indicators	Actual					Plan ¹		5-year Trend
	FY10	FY11	FY12	FY13	FY14	FY14	FY15	
Expenditures (\$000,000) ²	\$6,113.4	\$6,294.7	\$6,554.7	\$6,314.8	\$6,444.7	\$7,150.0	\$7,643.5	Neutral
Revenues (\$000,000)	\$6,478.7	\$6,847.9	\$7,015.2	\$6,603.2	\$6,696.3	\$7,590.1	\$7,807.0	Neutral
Personnel	39,872	38,898	38,387	37,435	37,857	37,949	37,916	Neutral
Overtime paid (\$000,000)	\$123.1	\$125.9	\$128.5	\$133.0	\$136.7	\$129.9	\$134.9	Up
Capital commitments (\$000,000)	\$124.4	\$147.4	\$272.7	\$307.9	\$242.2	\$1,067.0	\$413.4	Up

¹Authorized Budget Level "NA" - Not Available in this report ²Expenditures include all funds.

NOTEWORTHY CHANGES, ADDITIONS OR DELETIONS

- Data for the 'Percent of two year olds immunized' for Fiscal 2014 will not be available until mid-November 2014.
- Data for 'Net days of revenue for accounts receivable' will not be available until early October 2014.
- The indicator 'Percent of adult patients discharged with a principal psychiatry diagnosis who are readmitted after 15 days' has been revised to include readmissions after 30 days. The change to a 30-day readmission rate is a better indicator of community linkage and reflects the benchmark used by many other behavioral health provider systems.

ADDITIONAL RESOURCES

For more information on the agency, please visit: www.nyc.gov/hhc.