



*For PBS Use Only*

Site ID

Svkey

## Community Hospitals



- Please try to report all of your data (financial and other) for the same fiscal year or other recent 12-month period.
- Please indicate currency units if not U.S. Dollars: \_\_\_\_\_
- If you operate more than one hospital, please provide data for each hospital separately.

### Hospital Contact Person

Contact Person: \_\_\_\_\_

Company Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/Town: \_\_\_\_\_

State/Province: \_\_\_\_\_

Country/Postal Code: \_\_\_\_\_

Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

E-Mail: \_\_\_\_\_

**Please return this questionnaire, and direct any questions to:**

MMTC

Attn: Performance Benchmarking Service

47911 Halyard

Plymouth, MI 48170

(P) 888-414-6682

(F) 734-451-4202

E-mail [pbs@mmtc.org](mailto:pbs@mmtc.org)

<http://www.mmtc.org/pbs>

### Hospital Location (if Different)

City/Town: \_\_\_\_\_

State/Province: \_\_\_\_\_

**Please keep a copy of this questionnaire in the event we need to contact you for clarification. Thanks.**

# MMTC Community Hospital Annual Benchmarking Survey

Hospital: \_\_\_\_\_

Answers are for the most recent fiscal year, which ended \_\_\_/\_\_\_/ 200\_\_ (day/month/year).

## Service Volume & Mix:

- |  |       |
|--|-------|
| 4. Average Daily Inpatient Census              | _____ |
| 5. Average Daily Outpatient Visits             | _____ |
| 6. Number of Discharges                        | _____ |
| 7. All-Payer Case Mix Index (Medicare weights) | _____ |
| 8. Case Mix-Adjusted Equivalent Discharges     | _____ |

## Payer Mix (% of net patient service revenue):

- |                      |       |
|----------------------|-------|
| 9. Medicare          | ____% |
| 10. Medicaid         | ____% |
| 11. Other Government | ____% |
| 12. Commercial       | ____% |
| 13. Client Self-Pay  | ____% |
| Total                | 100%  |

## Net Patient Service Revenue: 14. \$\_\_\_\_\_

- |                |            |
|----------------|------------|
| 15. Inpatient  | ____.____% |
| 16. Outpatient | ____.____% |
| 17. Rehab Unit | ____.____% |
| 18. Pharmacy   | ____.____% |
| 19. Other      | ____.____% |
| Total          | 100.0%     |

## Expenses: 20. \$\_\_\_\_\_

- |   |            |
|---|------------|
| 21. Employee salaries, wages, & fringes   | ____.____% |
| 22. Contractual labor services, including contracts for non-employed physicians | ____.____% |
| 23. Supplies  | ____.____% |
| 24. Medications   | ____.____% |
| 25. Utilities   | ____.____% |
| 26. All other outside non-labor purchases                                       | ____.____% |
| 27. Building & equipment depreciation, rent, & lease expense                    | ____.____% |
| 28. Interest expense  | ____.____% |
| 29. Bad debt net of charity care writeoffs                                      | ____.____% |
| Total expenses:   | 100.0%     |

## Average Inventory Stocks: 30. \$\_\_\_\_\_

Average Patient Accounts Receivable (AR): 31. \$\_\_\_\_\_ or 32. \_\_\_\_\_ days

**Capacity, Utilization, & Throughput:**

- Facility Size

- 33. Patient Care Areas \_\_\_\_\_ sq ft
- 34. All Other Areas \_\_\_\_\_ sq ft
- 35. Total \_\_\_\_\_ sq ft

- 36. Number of Licensed Beds \_\_\_\_\_
- 37. Number of Staffed Beds \_\_\_\_\_
- 38. Occupancy Rate, Staffed Beds \_\_\_\_\_%

- 39. Number of OR Suites \_\_\_\_\_
- 40. Mean Hours per Week Booked for Surgical Procedures \_\_\_\_\_ hrs
- 41. % of Booked OR Hours “Cut & Sew Time” (from first incision to close) \_\_\_\_\_%

- 42. Average Length of Stay (ALOS), Unadjusted \_\_\_\_\_ days
- 43. Average Length of Stay (ALOS), Adjusted for Case Mix \_\_\_\_\_ days

- 44. Mean ED Time, Door-to-Physician \_\_\_\_\_  hrs  mins
- 45. Mean Outpatient Door-to-Door Time \_\_\_\_\_  hrs  mins

- 46. Mean Troponin Lab Test Turnaround Time \_\_\_\_\_  hrs  mins
- 47. Mean Radiology Film Turnaround Time (from test order entered to transcription complete) \_\_\_\_\_  hrs  mins

**Employment** (For both employees and contractual personnel, please answer in FTEs, based on a 2080-hour work-year.) *We only need **Total FTEs***, but the worksheet below may be useful.

<b>Employed FTEs:</b>
Physicians
Physicians’ Assistants
RNs
LPNs
Nurse Practitioners
Technicians & All Other Clinical Staff
Administrative Staff
Facilities & Other Staff
<b>Contractual FTEs:</b>
Non-employed Physicians
All Other Contractual Personnel
<b>48. Total FTEs</b>

**Registration / Admitting and Discharge:**

- 49. % Inpatient Admissions After 6 PM \_\_\_\_\_%
- 50. % Discharges Before Noon \_\_\_\_\_%

**Clinical Quality Practice:**

- 51. Hospital-wide mortality index \_\_\_\_\_
- 52. % patients with **unscheduled returns to ED** within 72 hours \_\_\_\_\_%
- 53. % patients with **acute readmission** within 31 days \_\_\_\_\_%
- 54. % patients with **unscheduled returns to OR within same stay** \_\_\_\_\_%

### Acute myocardial infarction (AMI)

*For patients without contraindications ...*

55. % AMI patients receiving aspirin within 24 hours of arrival \_\_\_\_\_%
56. % AMI patients prescribed aspirin at discharge \_\_\_\_\_%
57. % AMI patients with left ventricular systolic dysfunction (LVSD) prescribed an ACEI or ARB at discharge \_\_\_\_\_%
58. % AMI patients prescribed a beta blocker within 24 hours of arrival \_\_\_\_\_%
59. % AMI patients prescribed a beta blocker at discharge \_\_\_\_\_%

### Heart Failure

60. % heart failure patients whose hospital record documents assessment of left ventricular function (LVF) \_\_\_\_\_%
61. *For patients without contraindications ...*  
% heart failure patients with LVSD prescribed an ACEI or ARB at discharge \_\_\_\_\_%

### Pneumonia

62. % pneumonia patients receiving antibiotics within 4 hours of arrival \_\_\_\_\_%
63. % pneumonia patients age 65 and older administered pneumococcal vaccine prior to discharge, unless already vaccine-current \_\_\_\_\_%
64. % pneumonia patients with arterial oxygenation assessed within 24 hours of arrival via arterial blood gas measurement or pulse oximetry \_\_\_\_\_%

Please indicate whether or not your facility has each of the following policies.

- No-lift policy: To avoid staff and patient injury, our policy is to use lifts to raise up patients. 65.  Yes  No
- Needleless policy: To reduce needle use and its associated health risks, it is our policy to administer meds without needles whenever possible. 66.  Yes  No
- Latex-free policy: To avoid allergic reactions, our policy is to keep the facility free of latex supplies. 67.  Yes  No

*Thank you for submitting data. We look forward to generating your confidential, customized benchmarking report.*