



Anatomy of a Peer Group

INDEX Comparative Analytics

Utilizing Benchmarks from 'True' Peers

The Hospital Strength INDEX® offers a unique lens into how rural providers are performing when compared to all 2,200 rural hospitals (Critical Access and Rural PPS) in the United States. Through the INDEX, rural hospital leadership teams and frontline decision makers can better understand facility performance across eight pillars of performance.

Tracking and measuring rural hospitals across 50 rural-relevant indicators, the INDEX Comparative Analytics Program offers the ability to monitor and measure hospital performance across all 50 indicators and ***against those of an unblinded, customized peer group.***

Which Characteristics Matter Most?

When it comes to constructing peer groups for the purpose of benchmarking performance, the best peers aren't always local or regional competitors. We believe that the peer groups which yield the most value are those based on common characteristics and levels of performance. We build peer groups with clients that extend beyond county and state boundaries to include facilities of:

- Similar size (e.g. bed size, number of discharges, net patient revenue)
- Common service lines (e.g. OB, ortho)
- Market dynamics (e.g. large number of retirees or seasonal population)
- INDEX-based Top 100/Top 20 performance

An Approach that Delivers Results

Recently CCRH developed a peer group for a coastal Top 100 Critical Access Hospital with aspirations of attaining Top 20 status. Rather than constructing a peer group of in-state rural hospitals of varying degrees of performance and similarity, we concentrated our efforts on identifying facilities:

1. Serving coastal or tourist-dependent communities
2. Showing similar volumes for:
 - Discharges
 - Births
 - Inpatient Surgeries
 - ER visits
3. Offering Joint Replacement surgery
4. Operating above the 80th percentile (overall) in the INDEX
5. Recognized as a Top 20 CAH
 - Minimum of two times (since 2011)
6. Operating independently or part of a health system

With this approach, CCRH was able to develop a peer group of established top performers stretching from coast to coast which will provide important aspirational targets (i.e. Top 20 CAH performance) for key operational and financial indicators such as Process of Care Measures, MBQIP and Cost and Charge.

At the same time, the knowledge that each peer group hospital is a 'true' peer will help drive staff engagement and prevent data denial. Data buy-in is critical to any benchmarking/performance improvement initiative. If internal staff believe a peer group consists of hospitals which are '*not like ours*,' it won't be long before improvement efforts sputter and stall.

Comparative Analytics – Three Times a Year

Unblinded, the INDEX Comparative Analytics Program tracks performance across the INDEX's eight pillars (inpatient market share, outpatient market share, quality, outcomes, patient perspective, cost, charge and financial stability) as well as offers deep-dive comparisons with invaluable market, value and finance analytics.

Reports are refreshed three times each year (Winter, Summer, Fall) and in addition to the data, CCRH team members will conduct a conference call review session with hospital leadership with each INDEX release. To learn more about the program email inquiry@iVantageHealth.com.

The Chartis Group® (Chartis) provides comprehensive advisory services and analytics to the healthcare industry. With an unparalleled depth of expertise in strategic planning, performance excellence, informatics and technology, and health analytics, Chartis helps leading academic medical centers, integrated delivery networks, children's hospitals and healthcare service organizations achieve transformative results. The Chartis Center for Rural Health (CCRH) was formed in 2016 to offer tailored services, performance management solutions, research and education to rural hospitals and facilities.