



ON DEMAND HOSPITAL INFORMATION NETWORK - ODHIN

NEW DATA PORTAL FOR ASHNHA MEMBERS



WHO:

C-Suite, Quality Directors, Business Development, Chief Strategy Officers, CMOs, CNOs

WHAT:

Quality comparisons, financial and utilization trends, population health, market share, market leakage and retention data.

WHY:

Make more informed decisions about capital investment, patient safety/quality initiatives, community needs and investment in or exit from service offerings.

Hospital Utilization Comparison Table

Facility Name	Average Length of Stay	Average of Total Charges	Total IP Visits	Total OP Visits	Total Surgeries	Acute IP Visits	Non-Admit ED Visits	ASC Visits	OBS Visits	Long-Term IP Visits
Cordova Community Medical Center	2.71		62	3,736	1	34	436		24	28
Kanakanak Hospital - Bristol Bay Area Health Corp	3.51		300	3,837	490	300	3,571	484	144	
Manila Health Center	9.46		703	40,673	408	597	5,942	380	254	106
Norton Sound Regional Hospital - NSHC	2.64		1,180	40,097	359	788	7,332	359	58	
PeaceHealth Ketchikan Medical Center	3.35		1,434	34,685	1,896	1,370	8,054	1,557	438	64
Petersburg Medical Center	3.01		154	10,901	49	96	494	49	102	53
Providence Kodiak Island Medical Center	2.51		705	17,377	698	668	3,449	638	234	37
Providence Seward Medical Center	2.66		138	5,955	20	103	2,080	16	117	35
Providence Valdez Medical Center	2.65		215	6,252	63	178	1,271	56	82	37
Samuel Simmonds Memorial Hospital - ASNA	2.05		232	47,091	652	182	12,318	651	19	40
Sitka Community Hospital	2.89		208	10,983	228	149	1,364	220	57	59
South Peninsula Hospital	2.71		941	24,593	2,687	889	4,011	2,400	438	52
Total	3.62		6,272	246,180	7,551	5,354	50,322	6,810	1,967	511

% Change from Same Month Last Year

Trend

Current Quarter Totals



ABOUT

ASHNHA is collaborating with the Colorado Hospital Association to provide access to a robust data analysis and visualization tool. On Demand Hospital Information Network (ODHIN) is available at no cost to all ASHNHA member hospitals and health systems.

This tool offers customizable dashboards for individuals based on their role at an organization, including executive and patient quality/safety views. Built in is a vast array of data including: utilization data, payer mix, potentially avoidable care, community health care patterns and social determinants of health.

Additional features allow participants to create customizable peer groups to see how their organization compares to others based on the available metrics or slice the data by a number of different characteristics such as patient ZIP code or service line.

To sign up and take advantage of this complimentary and customizable tool, contact Jeannie Monk at jeannie@ashnha.com