

Burden of Heart Failure

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Background on U.S. Heart Failure

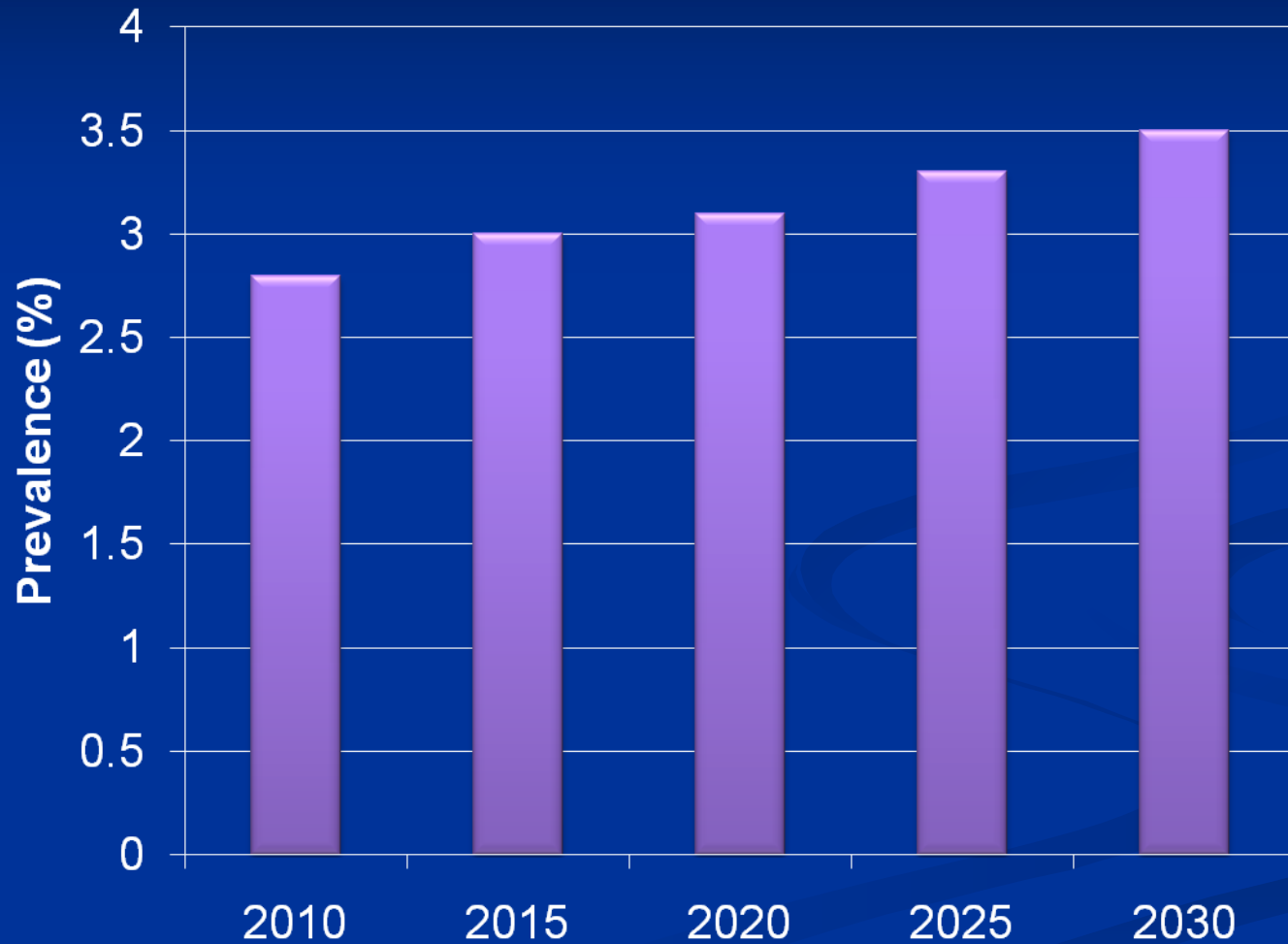
Population Group	Prevalence	Incidence	Mortality	Hospital Discharges	Cost
Total population	5,300,000	660,000	284,965	1,084,000	\$34.8 billion

VA prevalence near 140,000 or **2.6%**

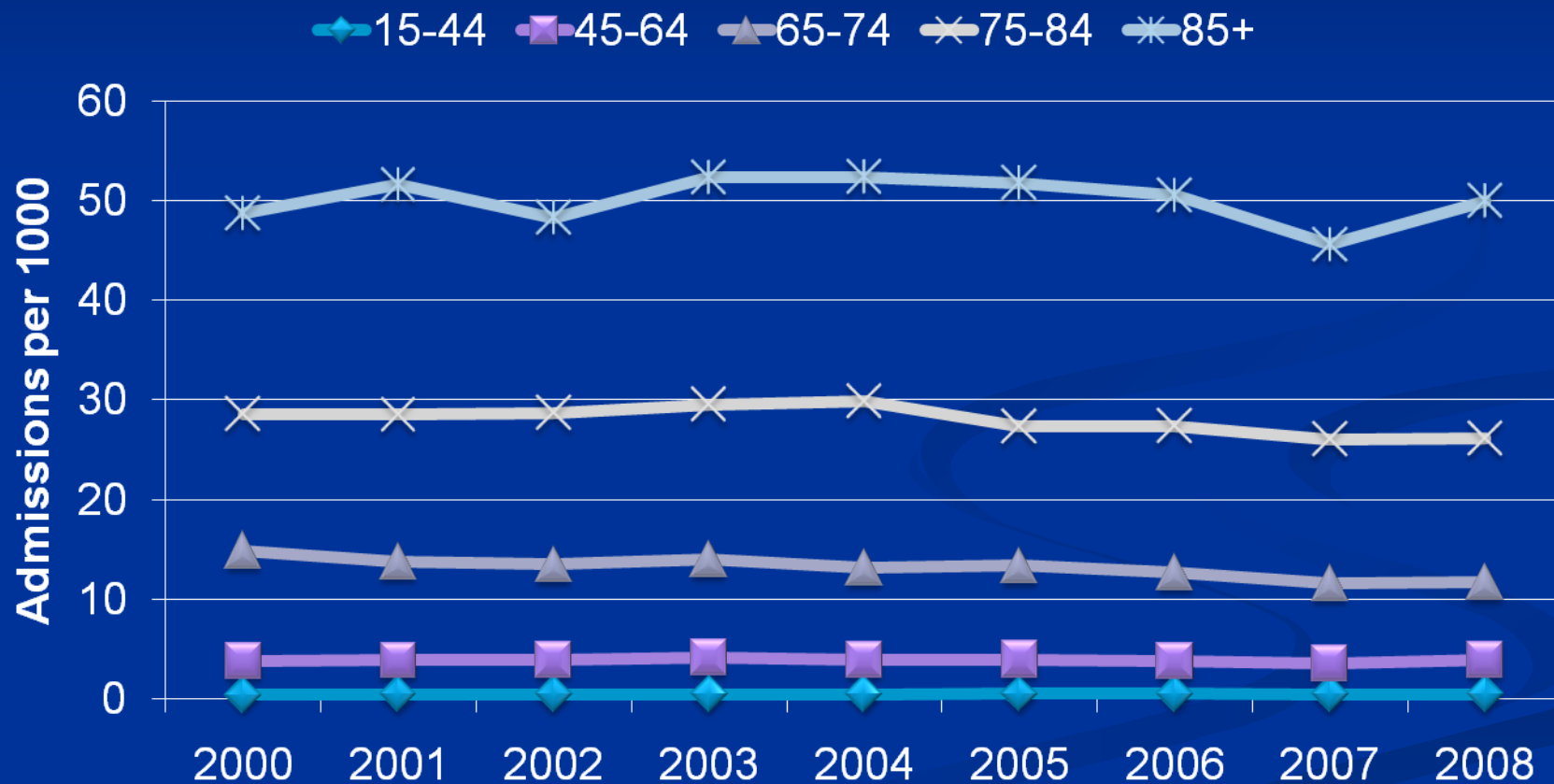
¹American Heart Association. *2008 Heart and Stroke Statistical Update*. Dallas, TX: American Heart Association; 2008.

²Hunt SA et al. ACC/AHA guidelines for the evaluation and management of chronic heart failure in the adult. 2001.

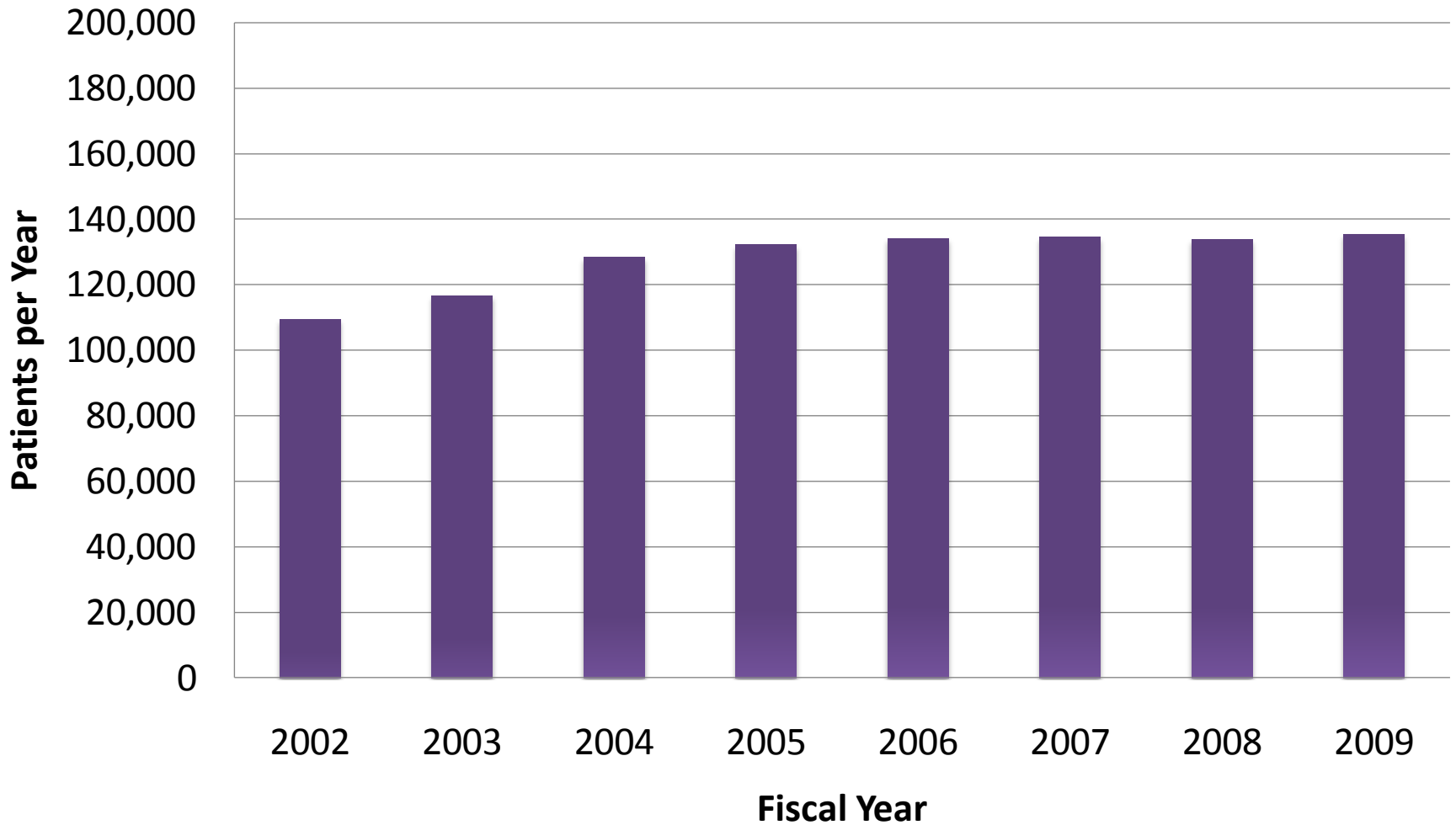
Projected Prevalence of Heart Failure



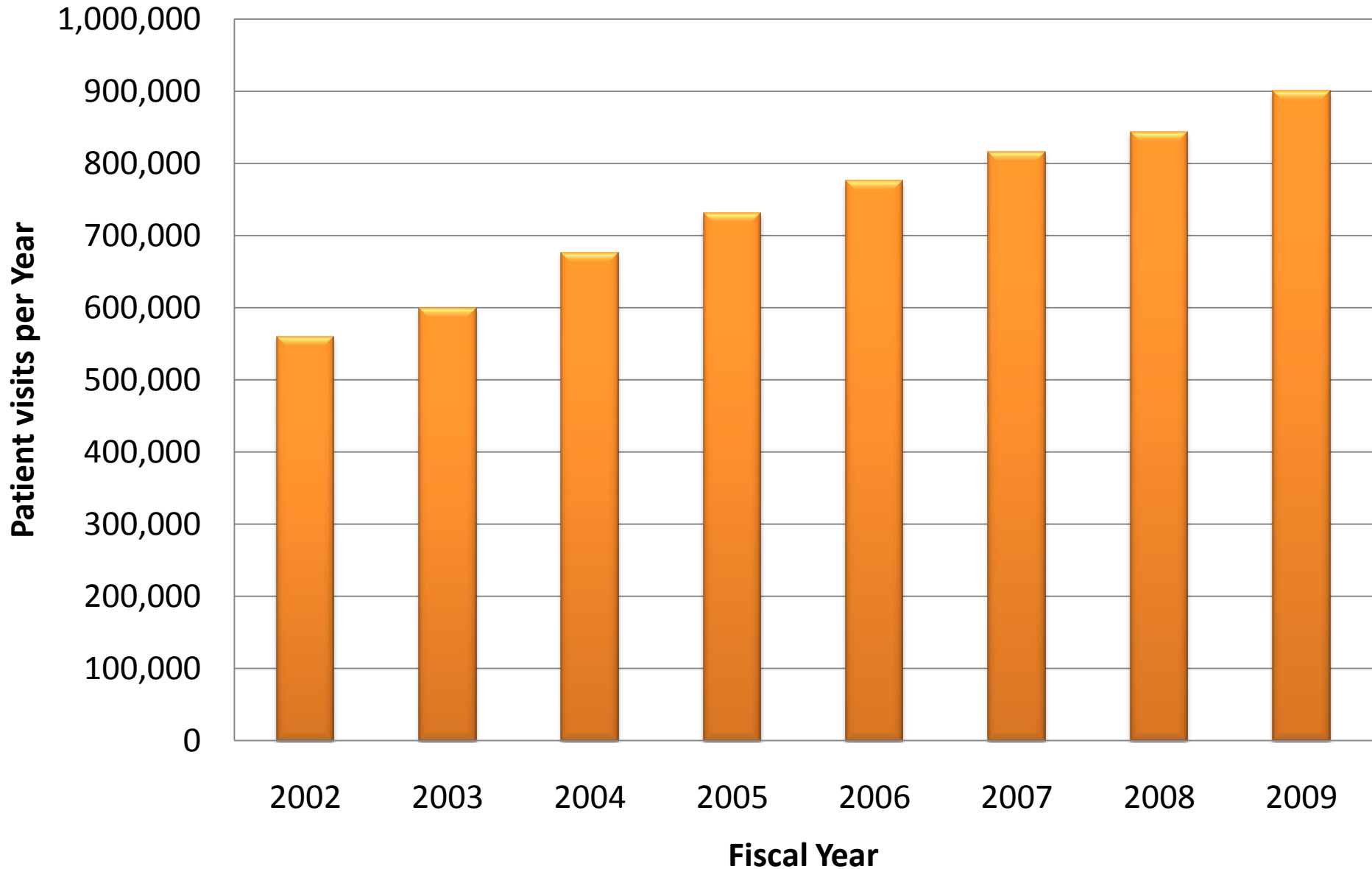
U.S. HF Hospitalization Rate Principal Diagnosis



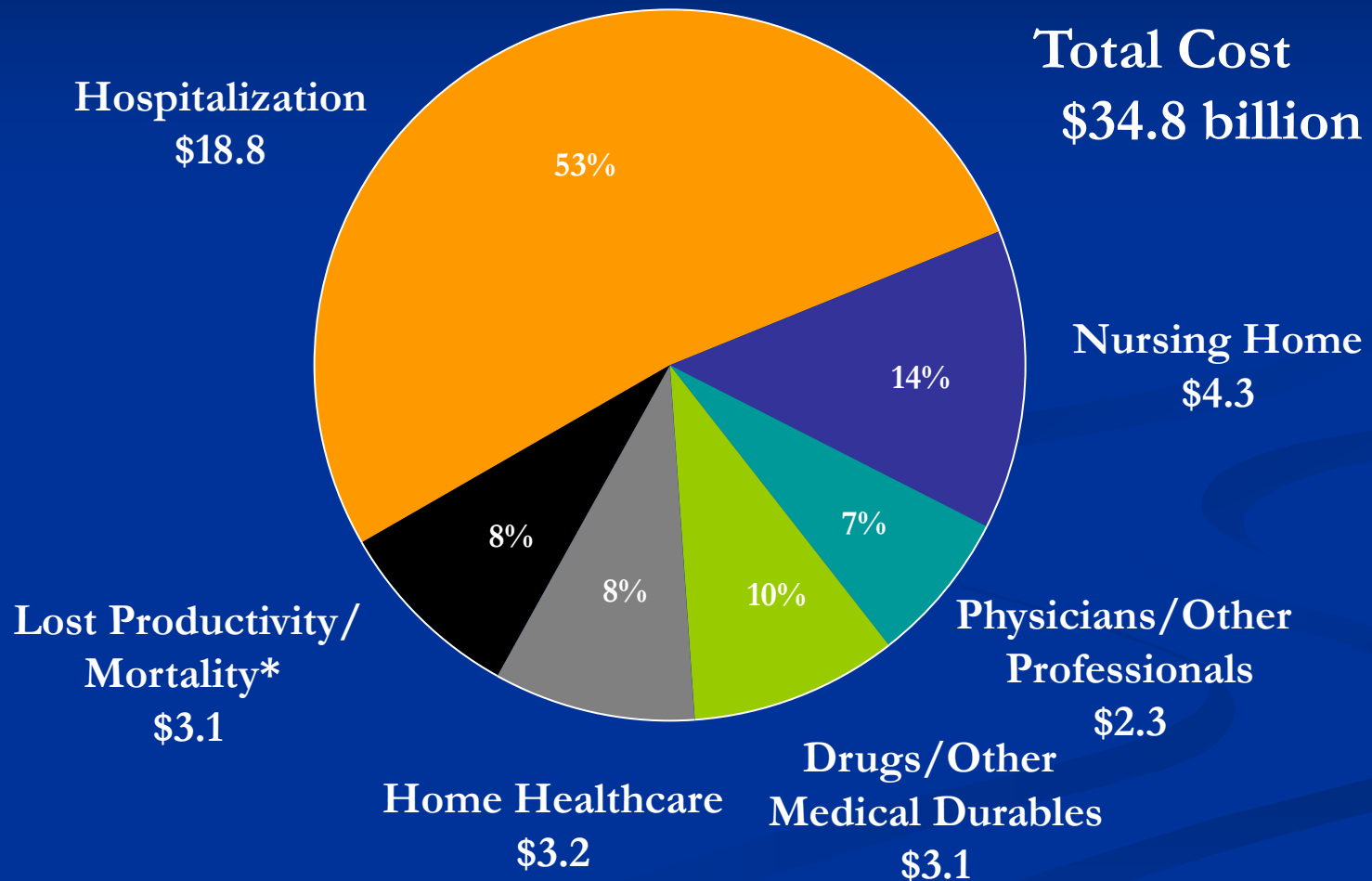
Stable Number of Veteran Outpatients with Heart Failure



Increasing VA Burden: Outpatient Encounters for Heart Failure

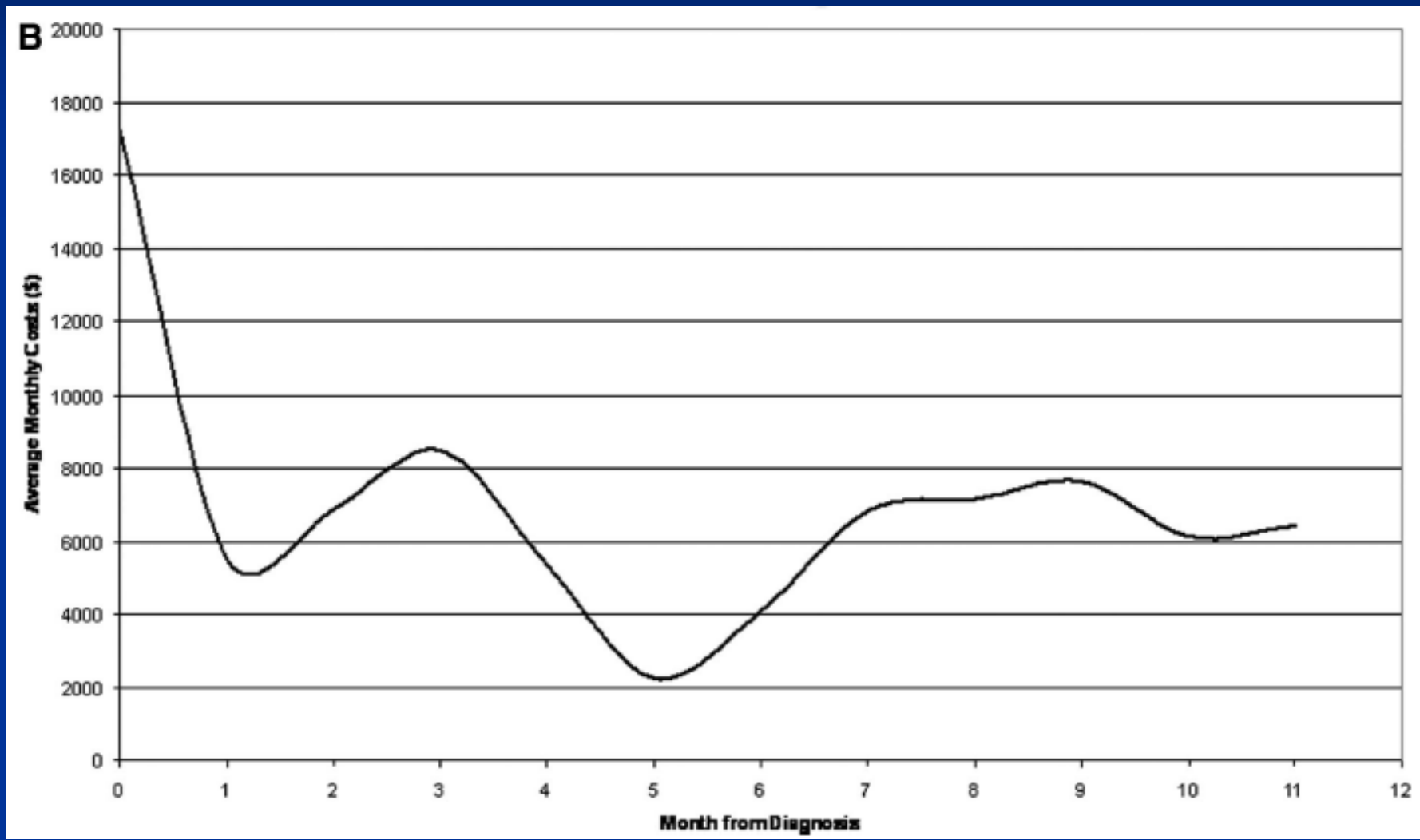


Estimated Direct and Indirect Costs of HF in US

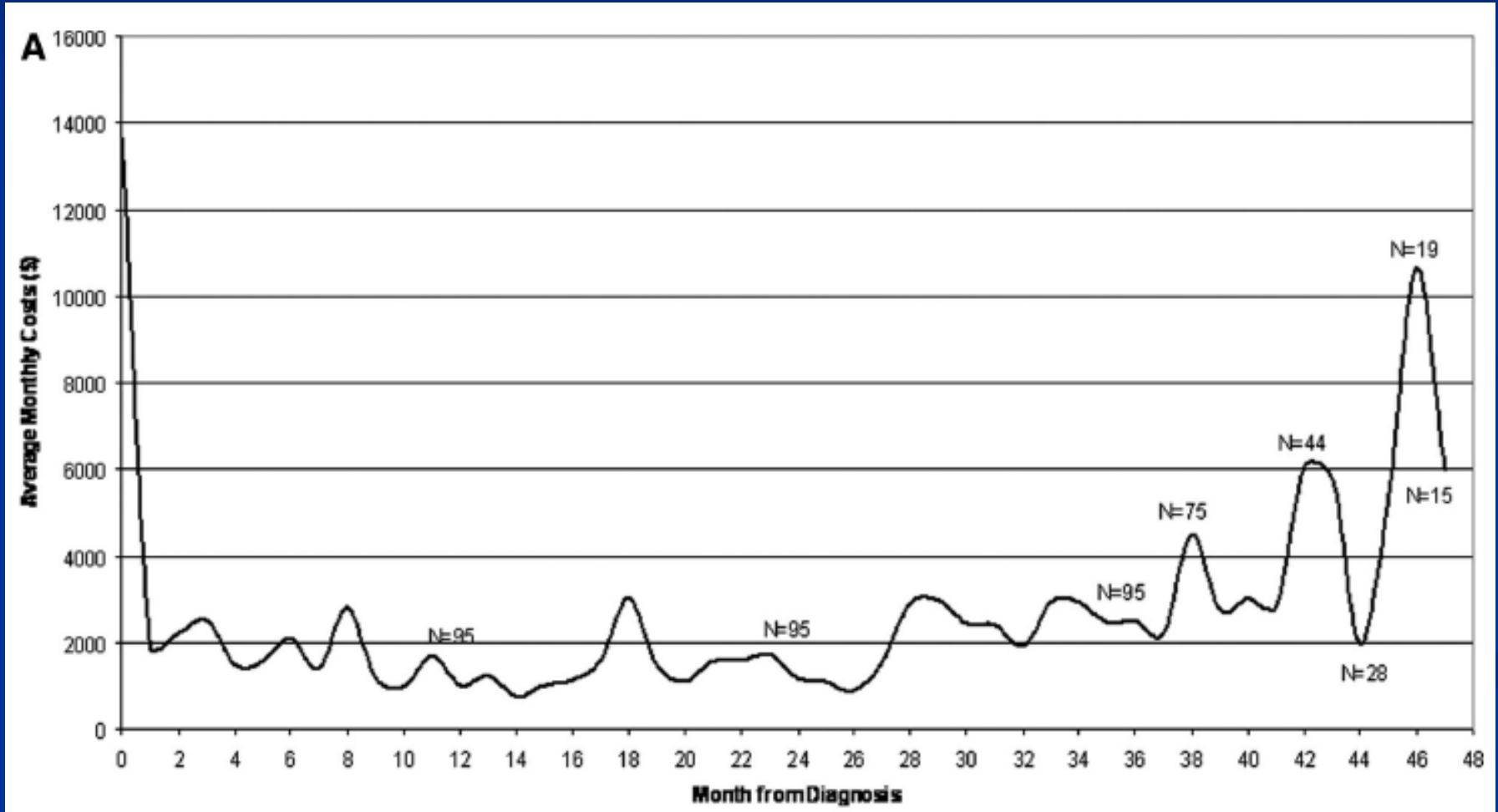


*Lost future earnings of persons who will die in 2008, discounted by 3%
AHA. *Heart Disease and Stroke Statistics—2008 Update*

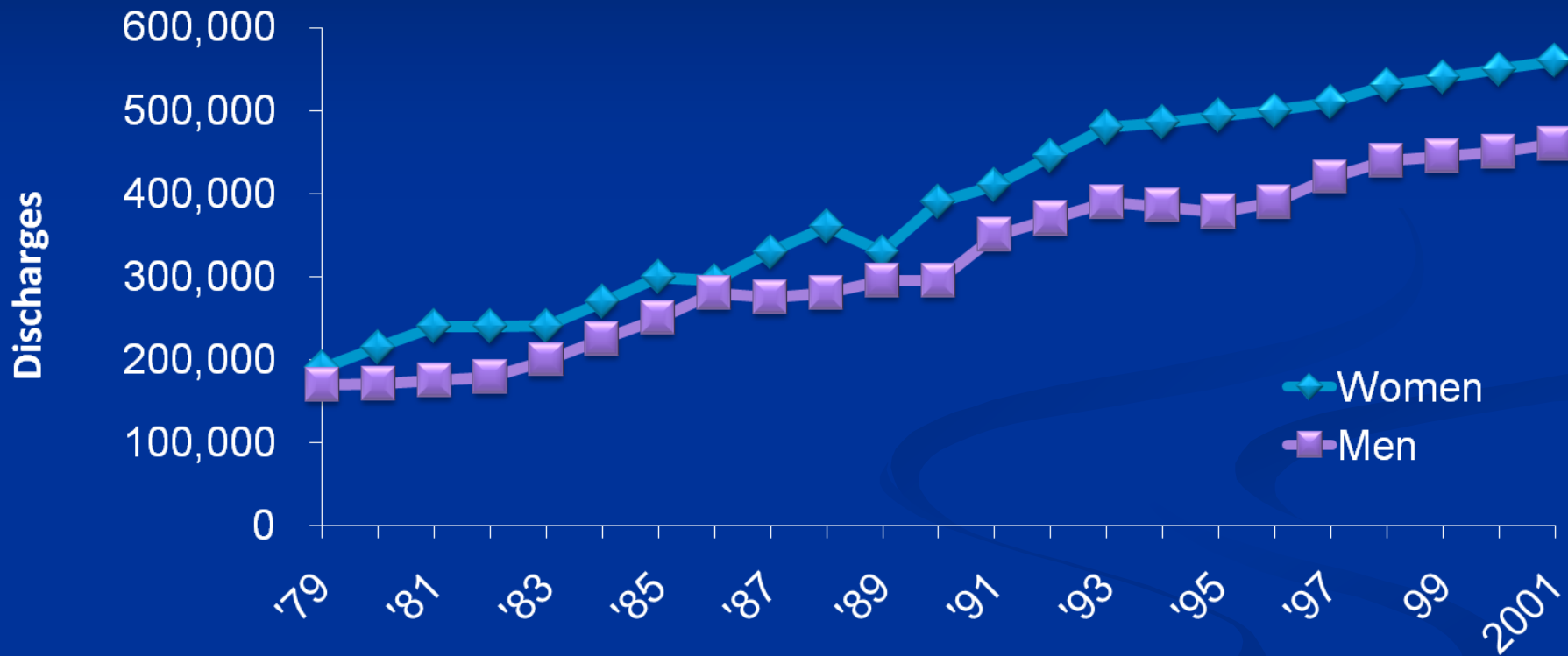
Cost Following HF Diagnosis: Surviving < 12 months



Cost Following Diagnosis: Long Term Survivors

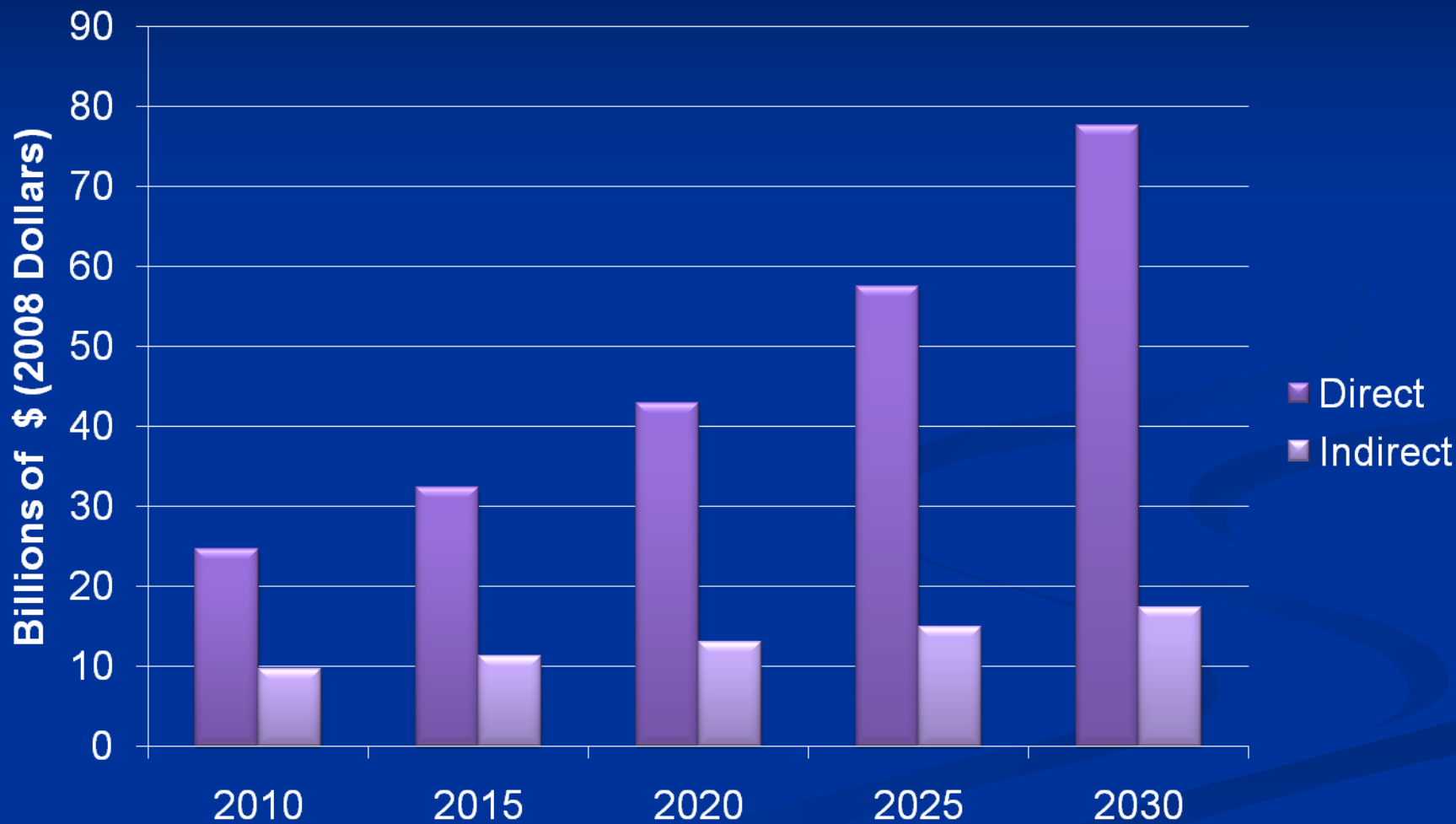


Increasing Burden of Heart Failure in the U.S.

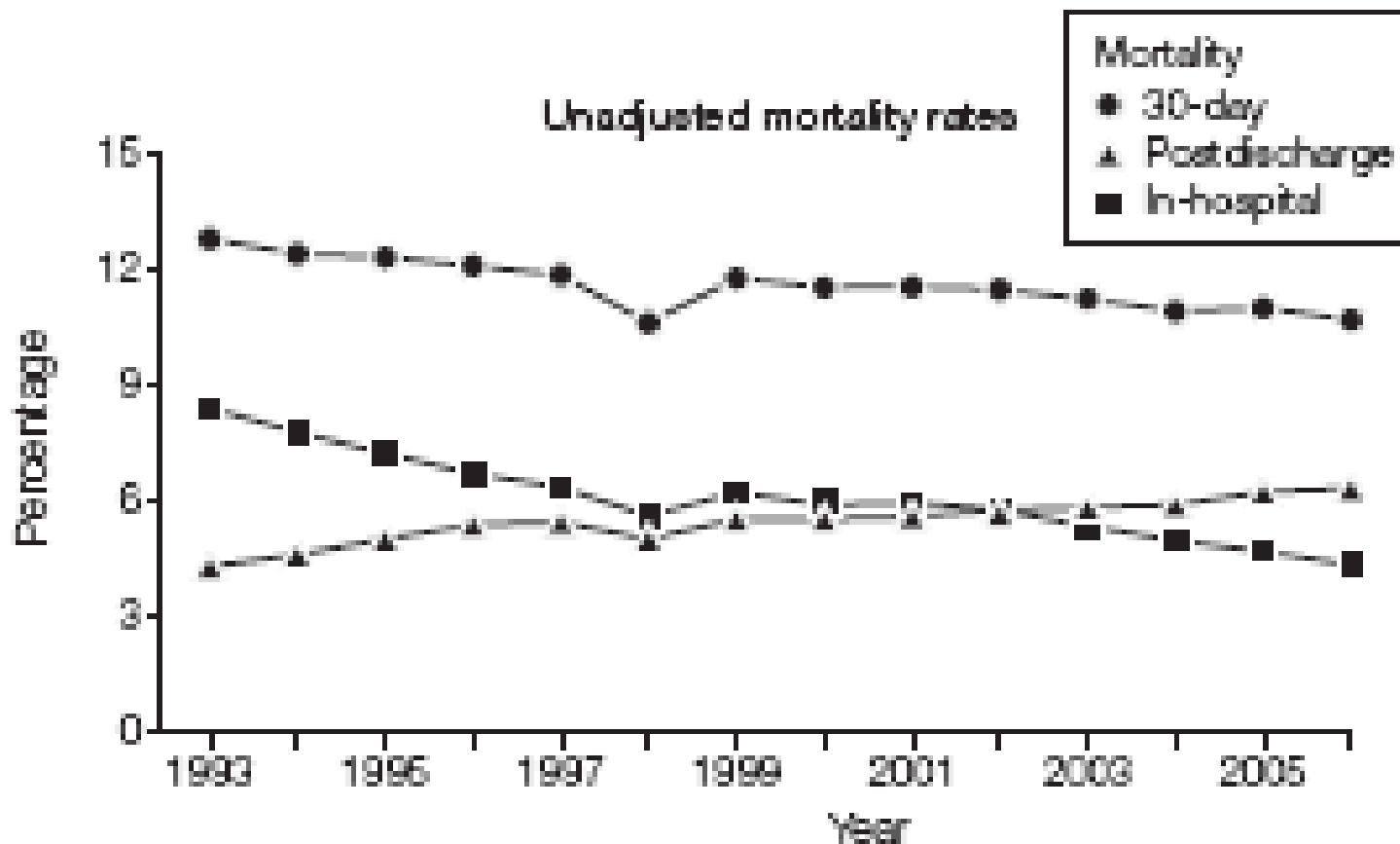


AHA, 1998 Heart and Statistical Update
NCHS, National Center for Health Statistics

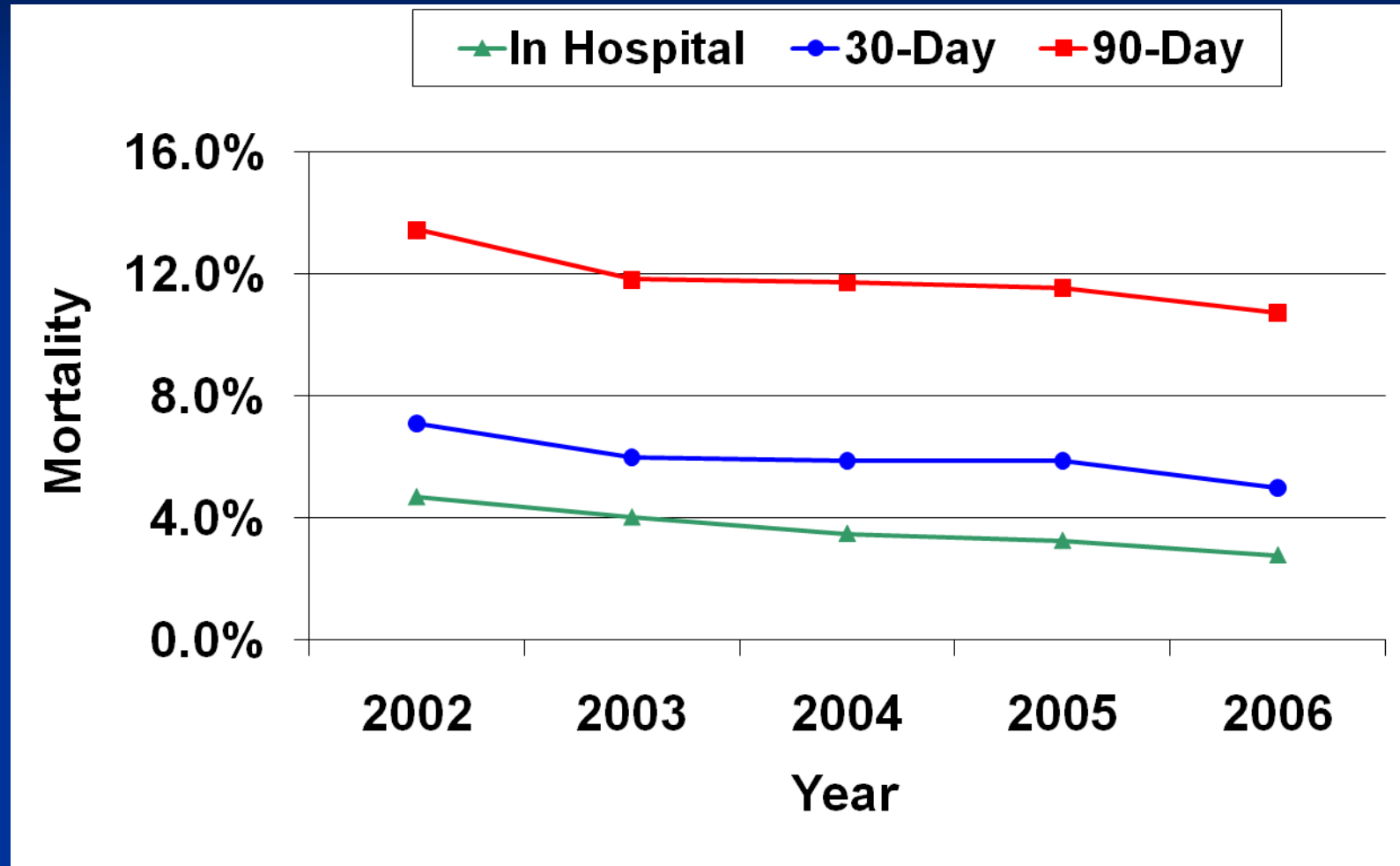
Projected Costs of Heart Failure



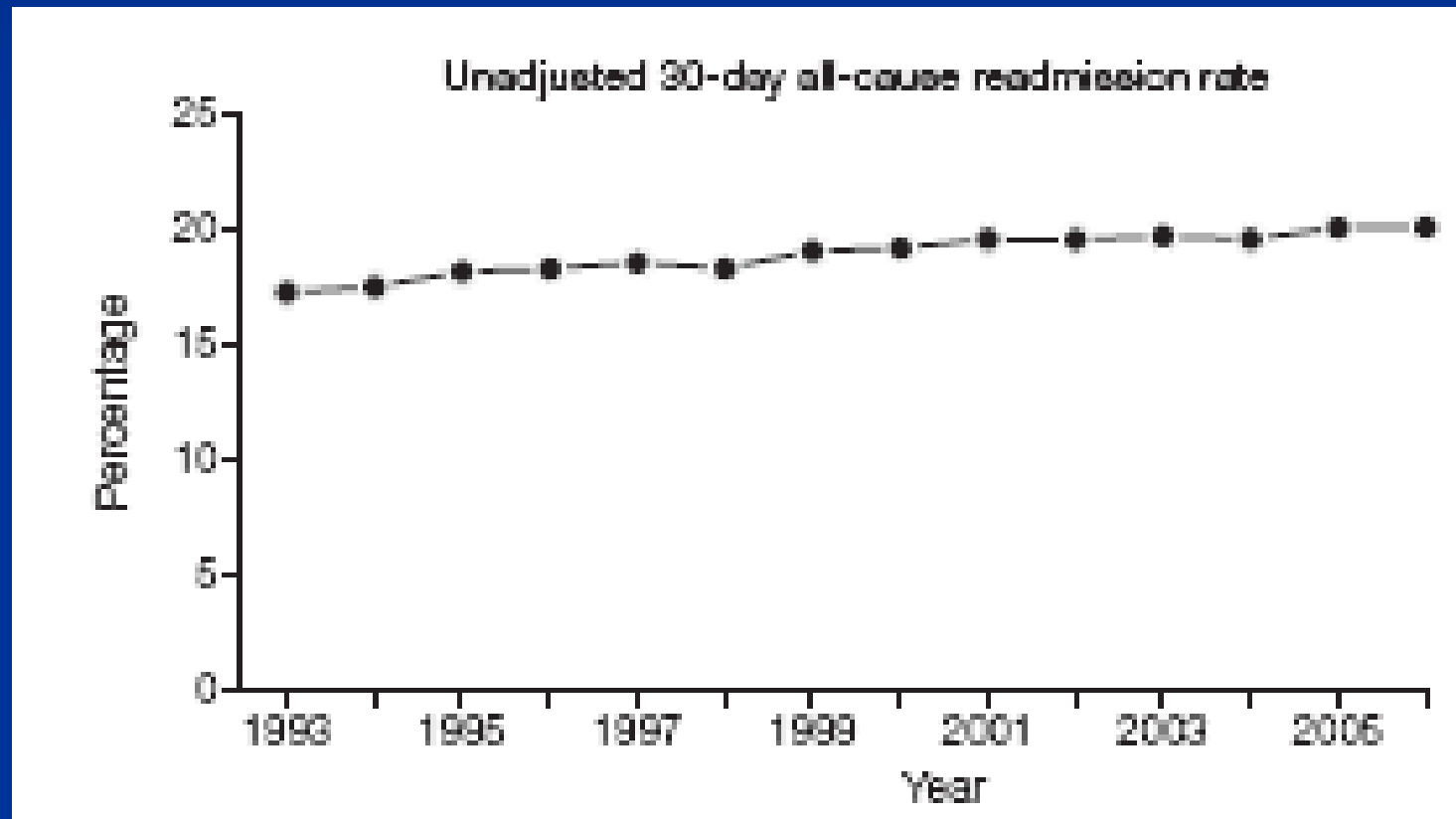
Mortality: US Medicare



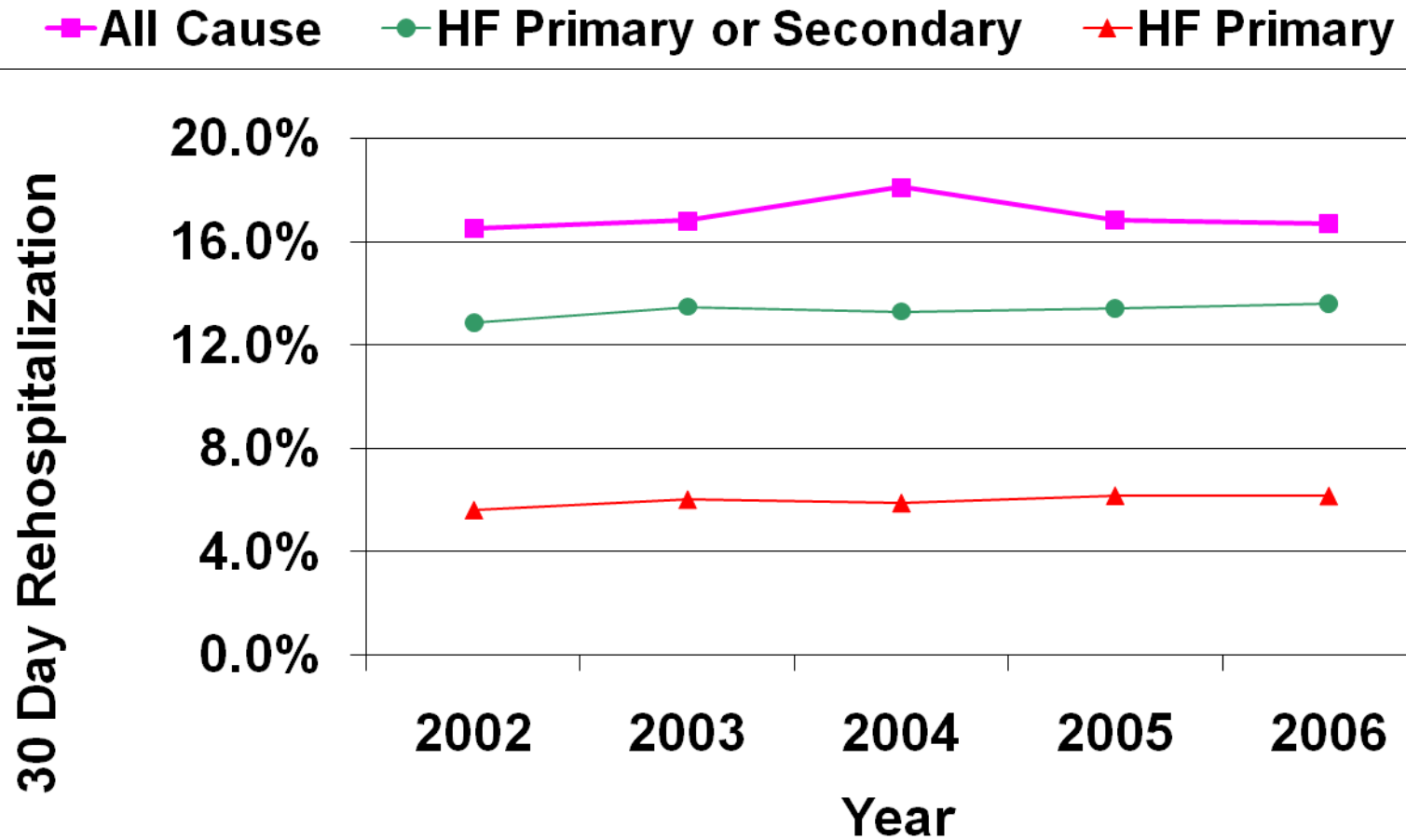
VA Trends in Mortality



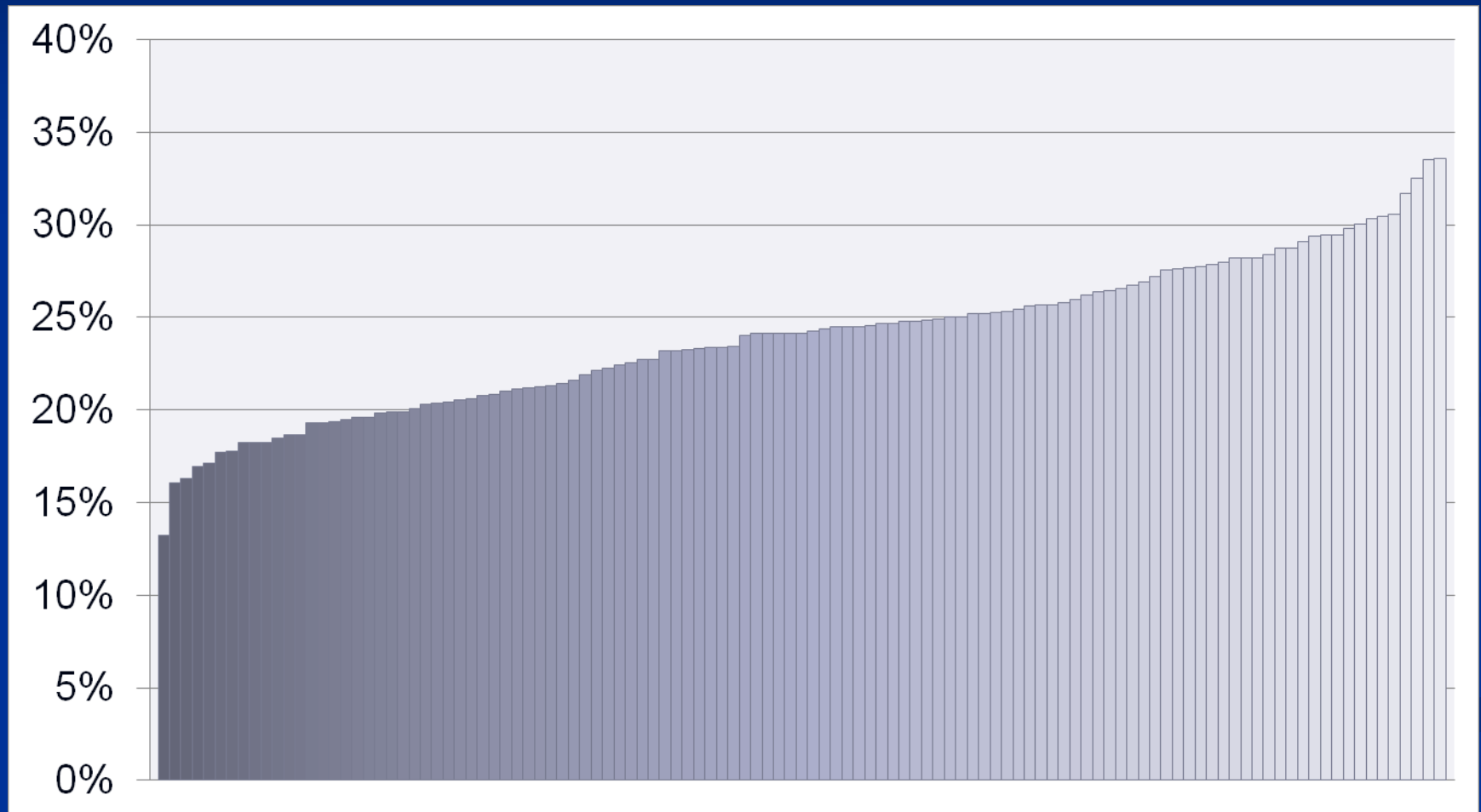
30-Day Readmission Rate: US Medicare



VA Trends in Readmission

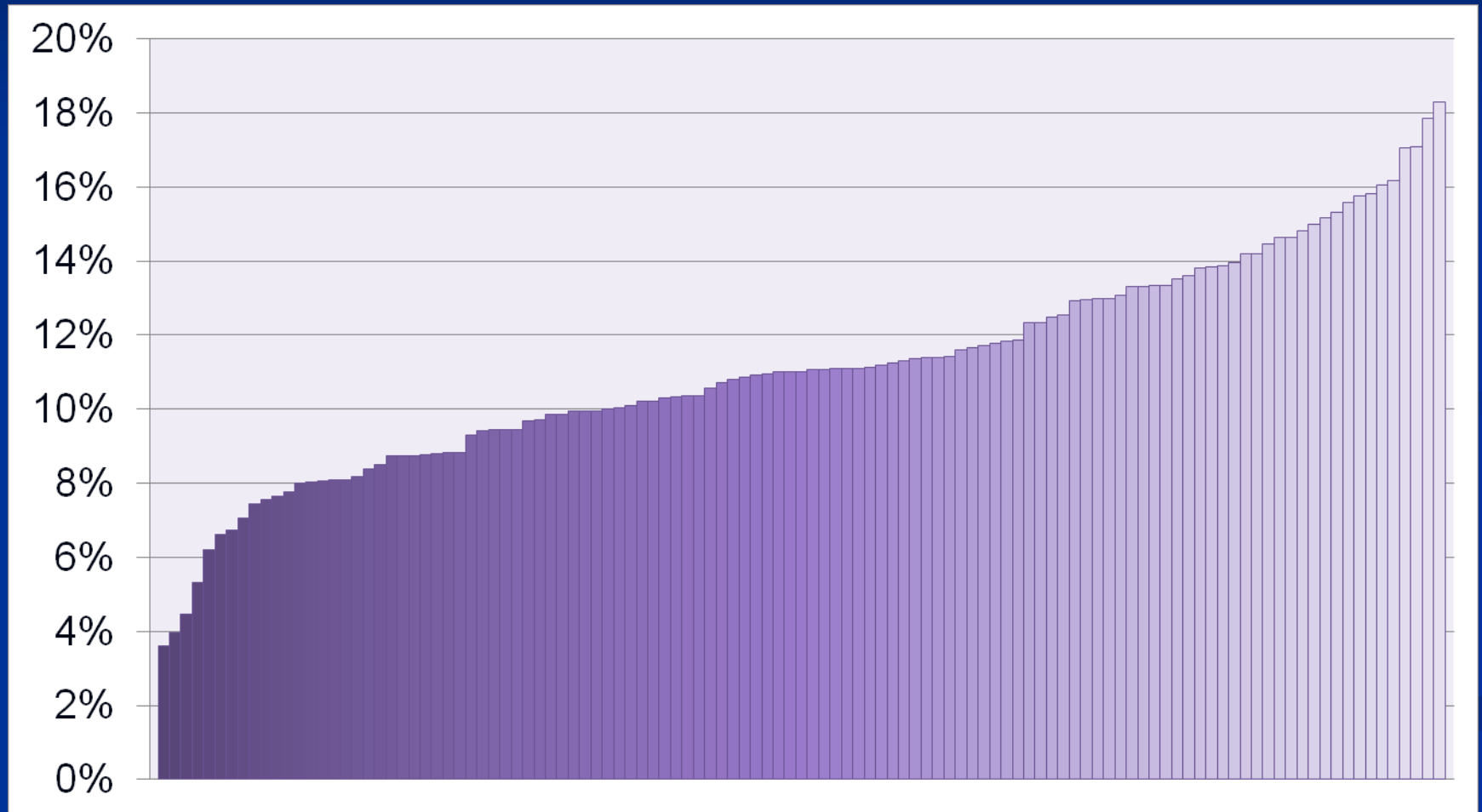


30-Day Readmissions (All Cause) Distribution for VA Facilities



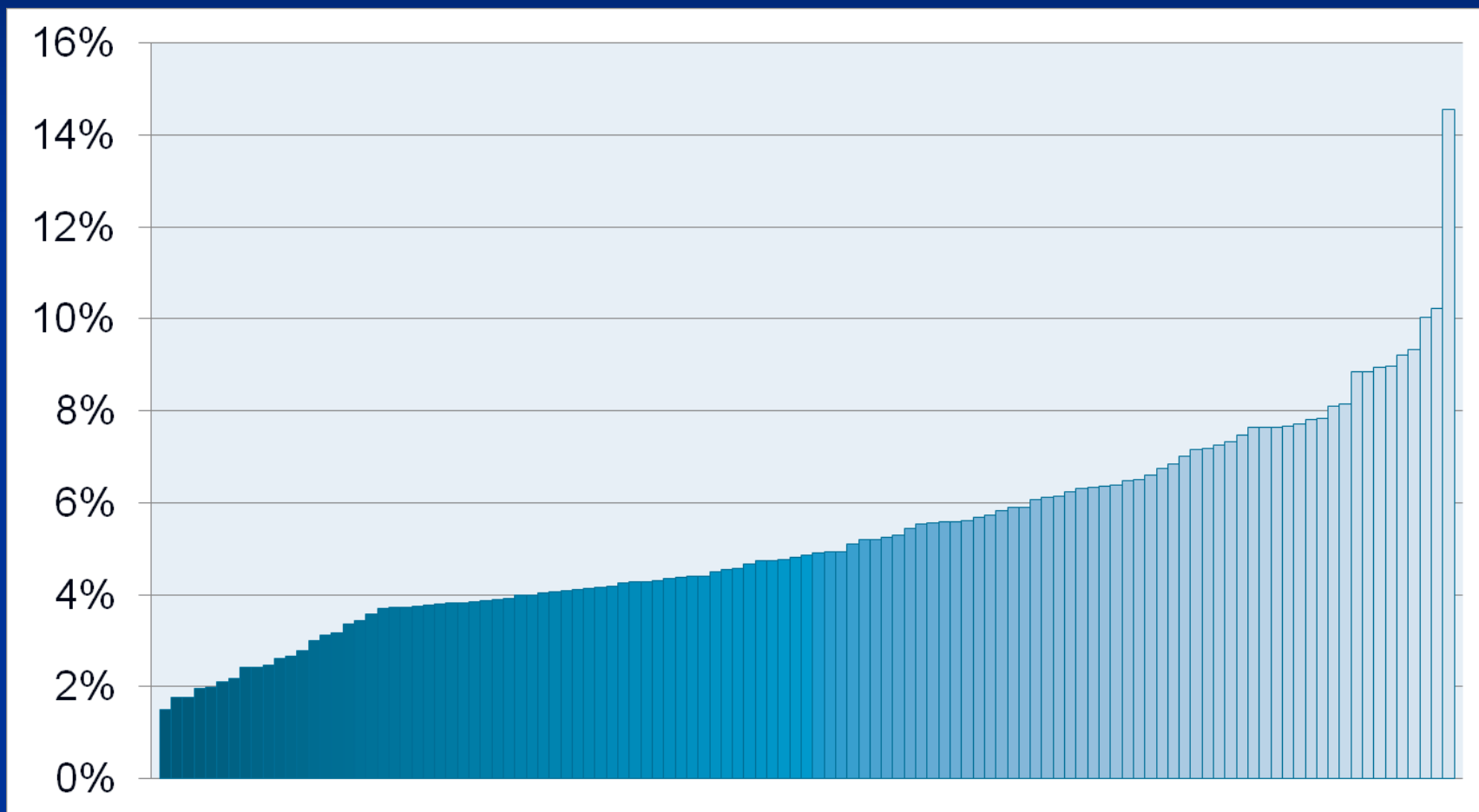
Excludes Facilities with < 100 HF discharges over 2 years.

30-Day Readmissions (HF Principal Dx) Distribution for VA Facilities



Excludes Facilities with < 100 HF discharges over 2 years.

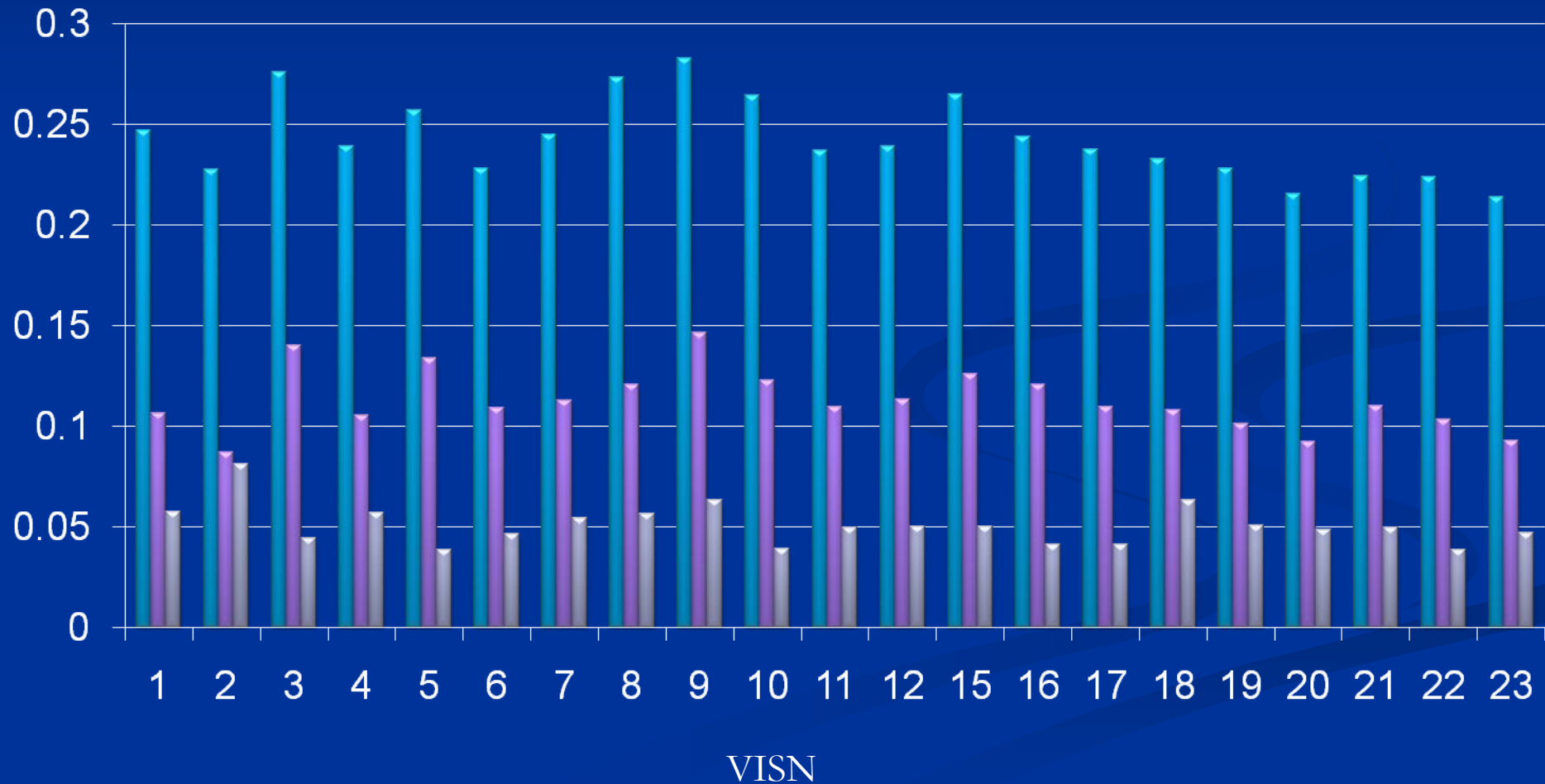
30-Day Mortality Distribution for VA Facilities



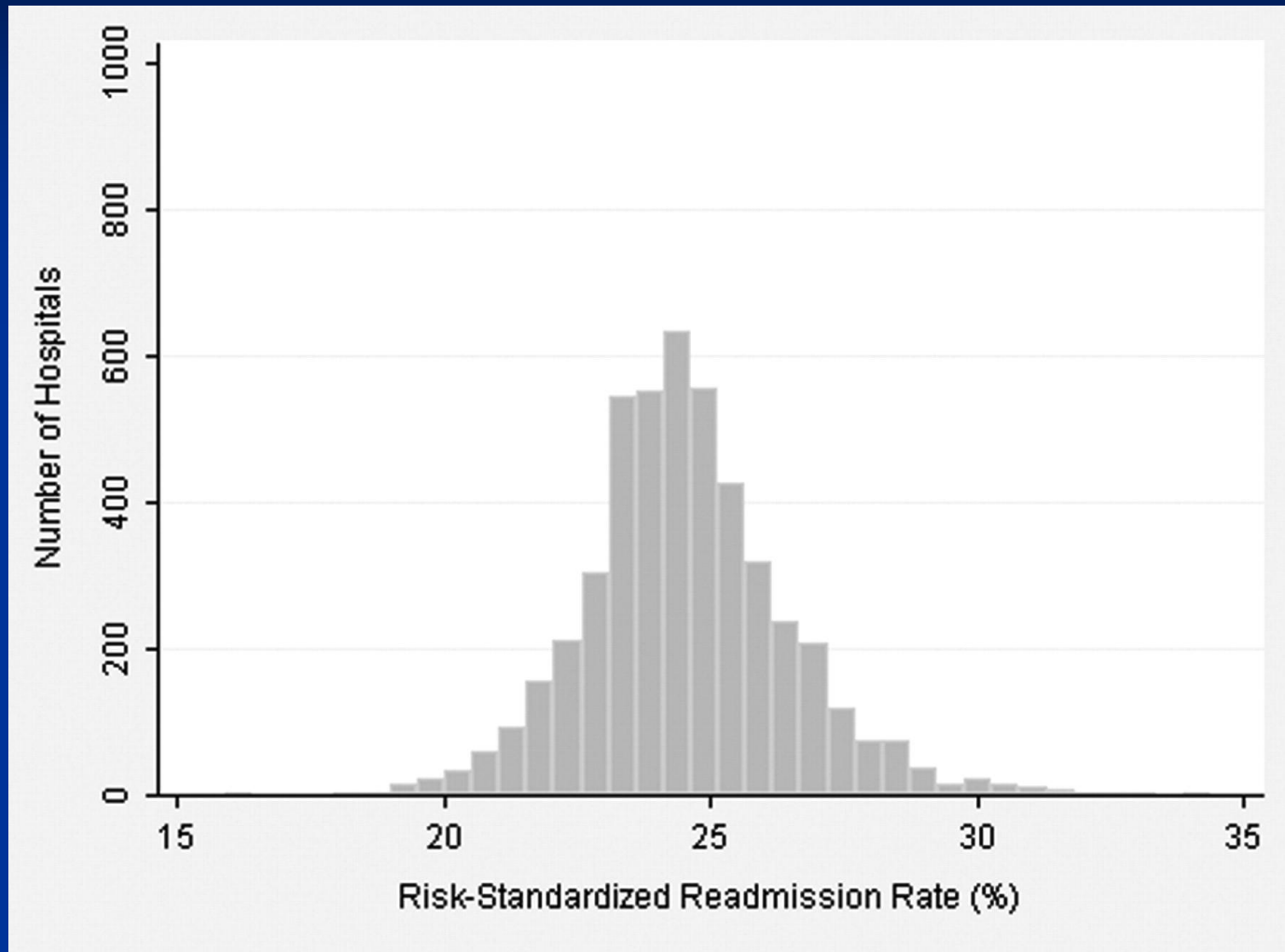
Excludes Facilities with < 100 HF discharges over 2 years.

VISN 30-Day Outcome Following a Heart Failure Discharge

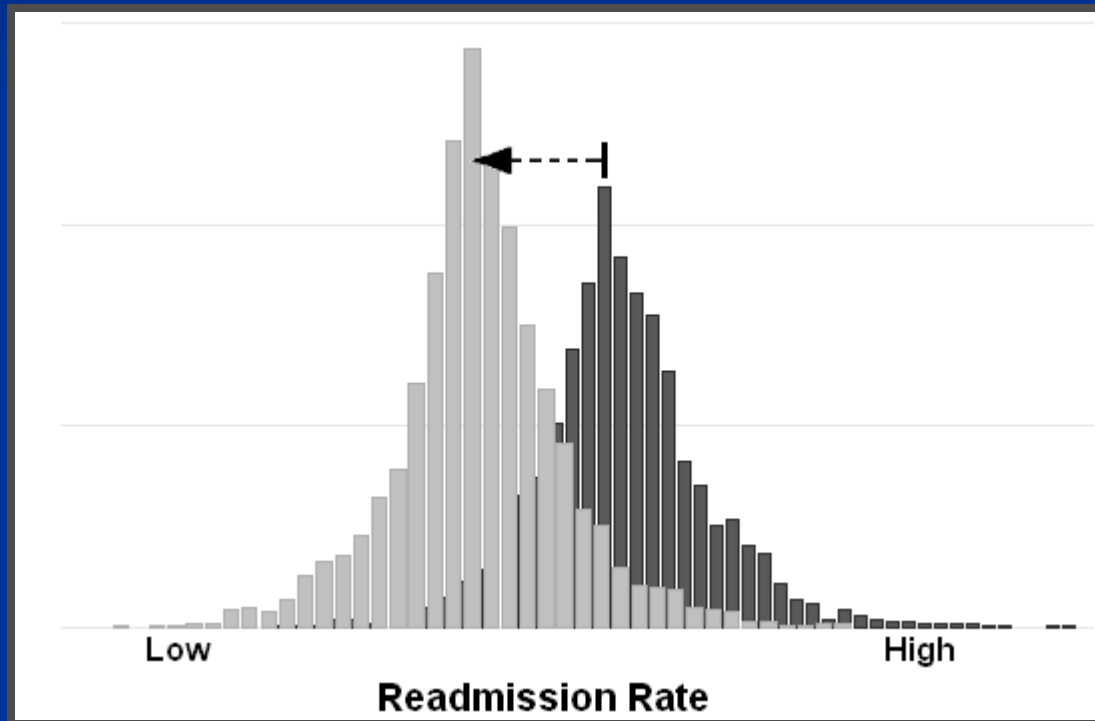
■ Any Readmission ■ HF Readmission ■ Mortality



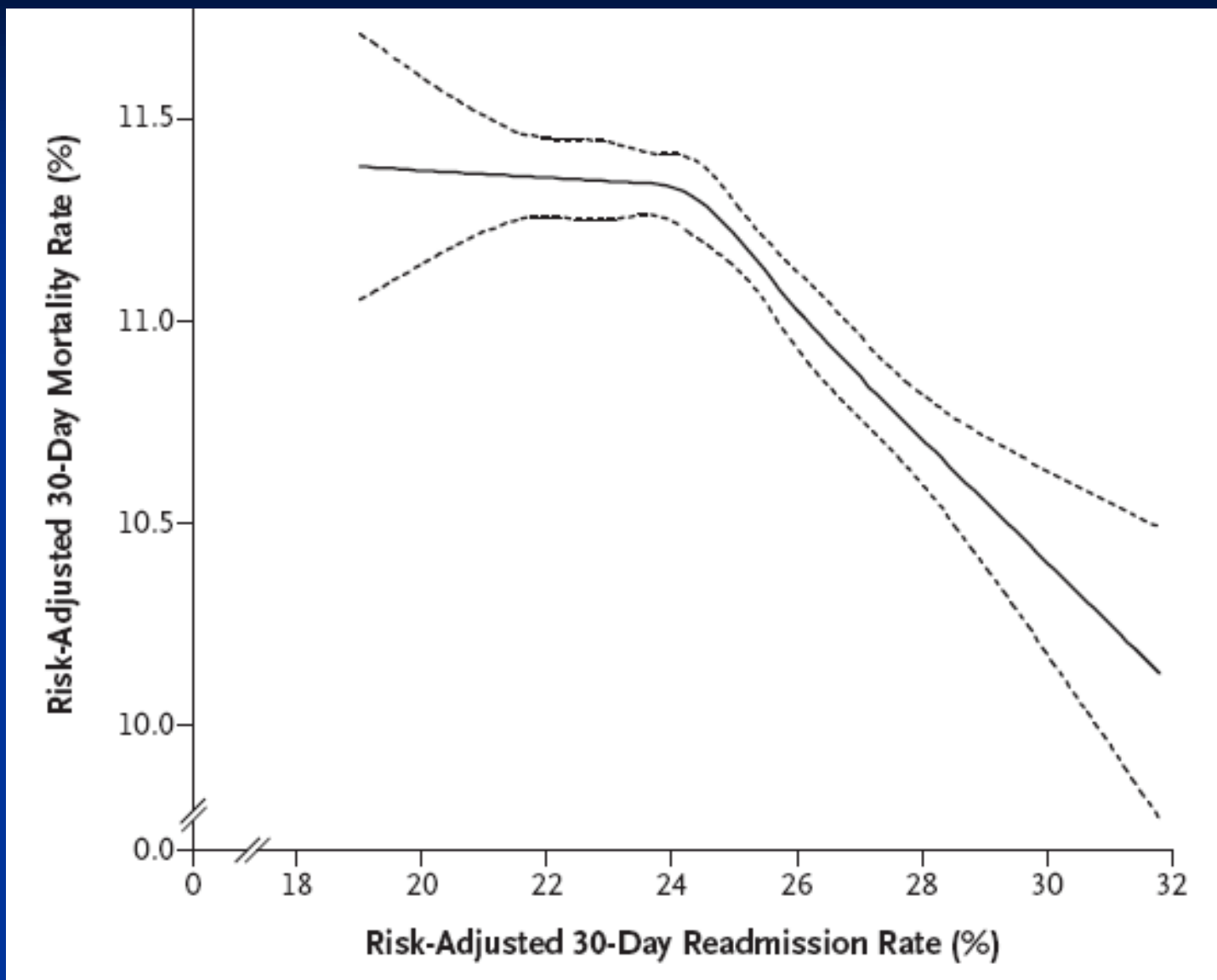
Heart failure 30-day Risk-Standardized Readmission Rate Distribution



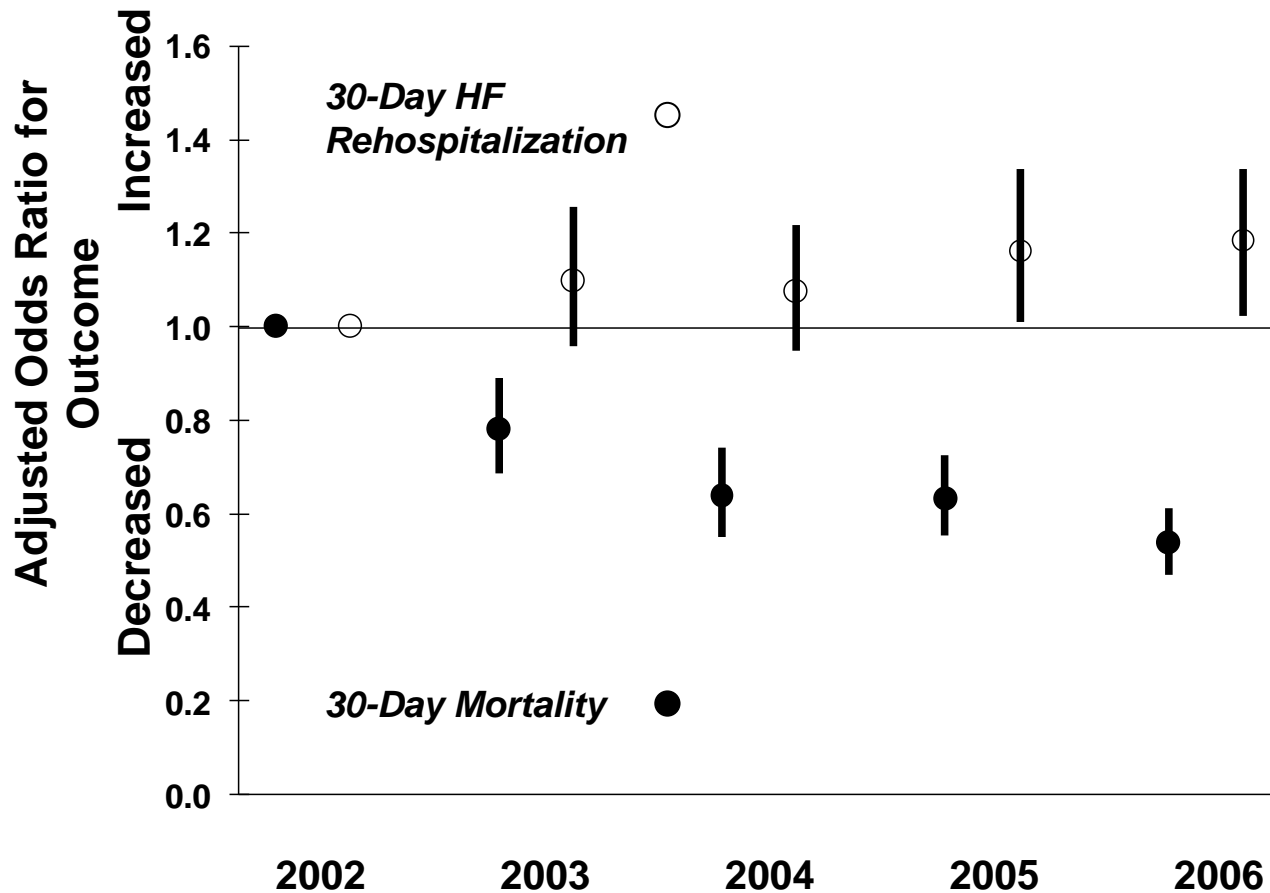
Goal



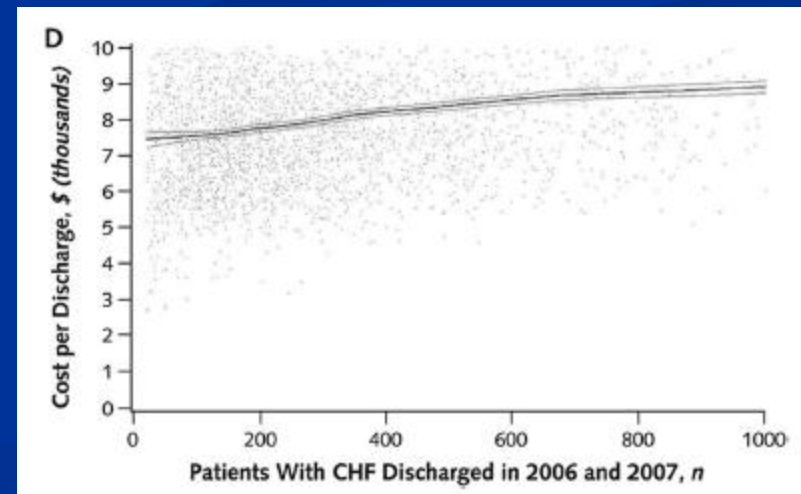
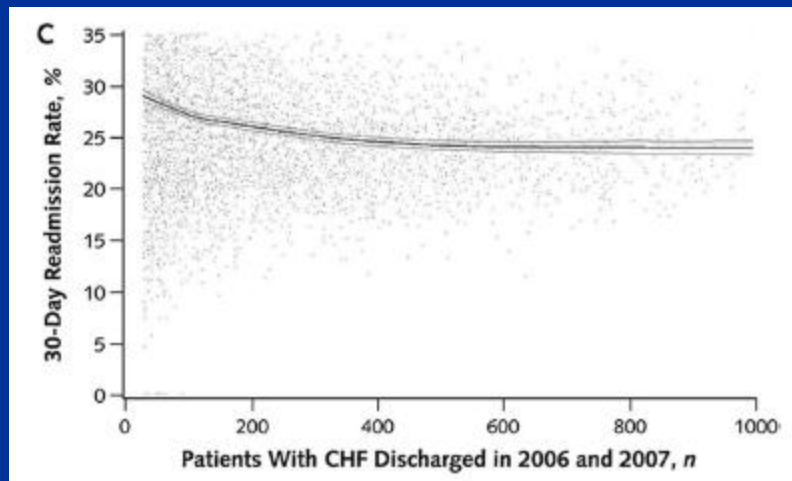
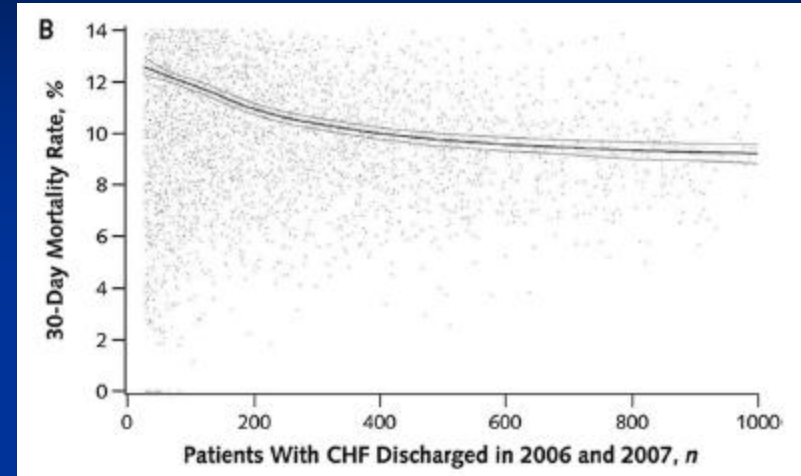
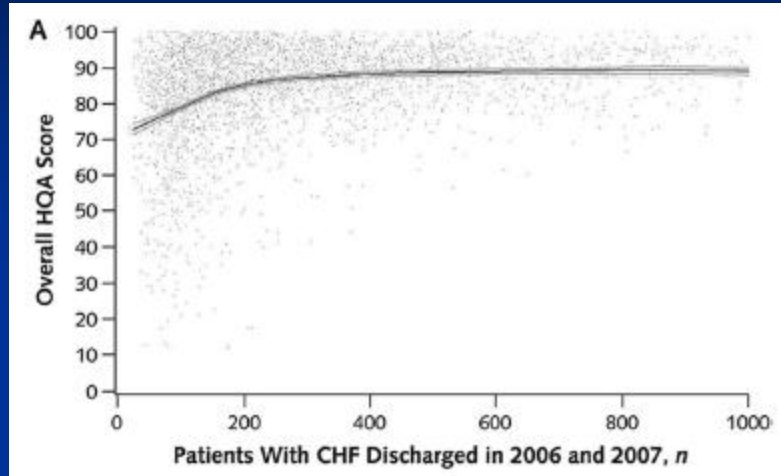
Mortality and Readmissions



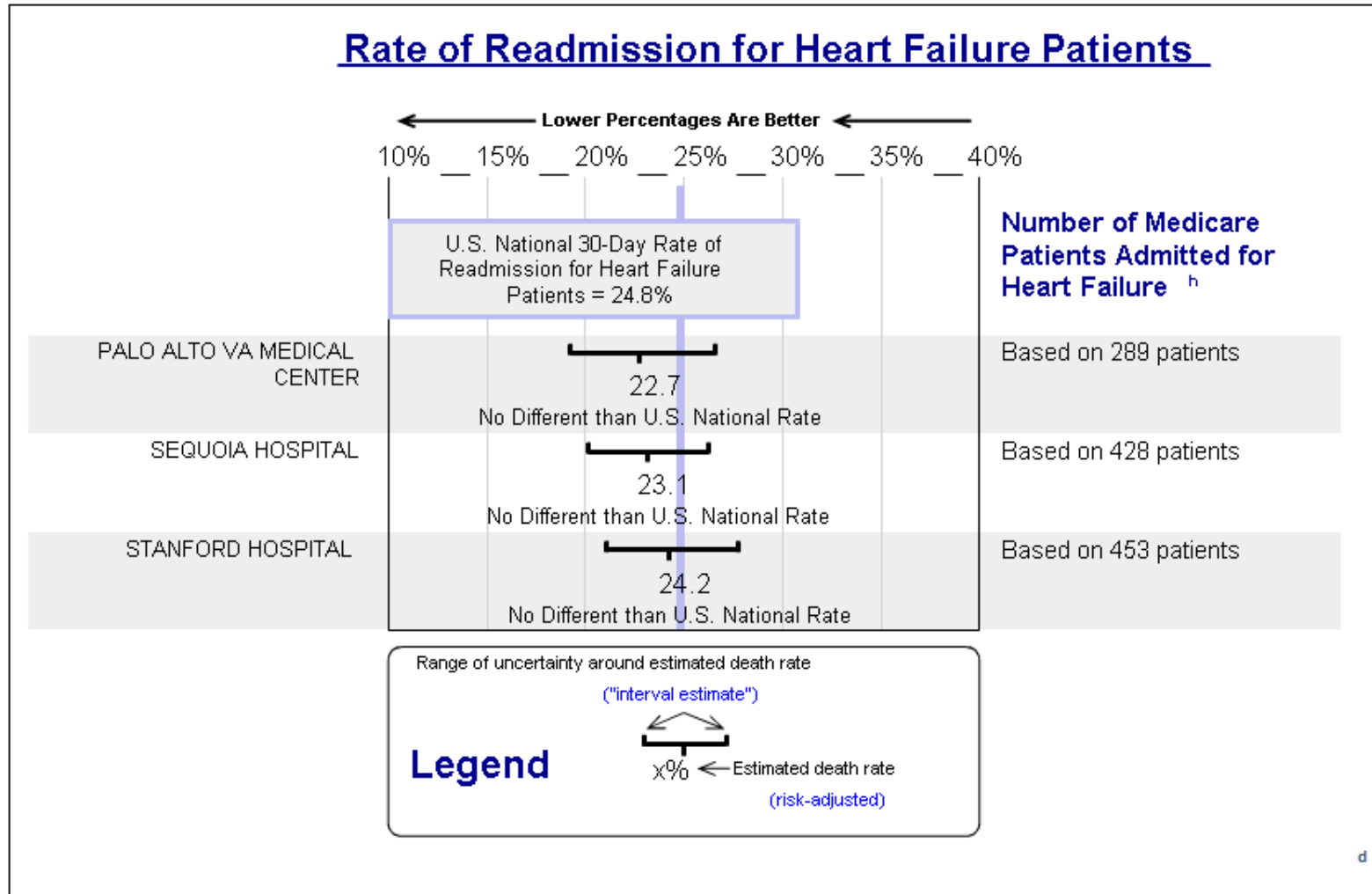
Mortality vs. Readmissions



Hospital HF Volume, Outcome, Cost



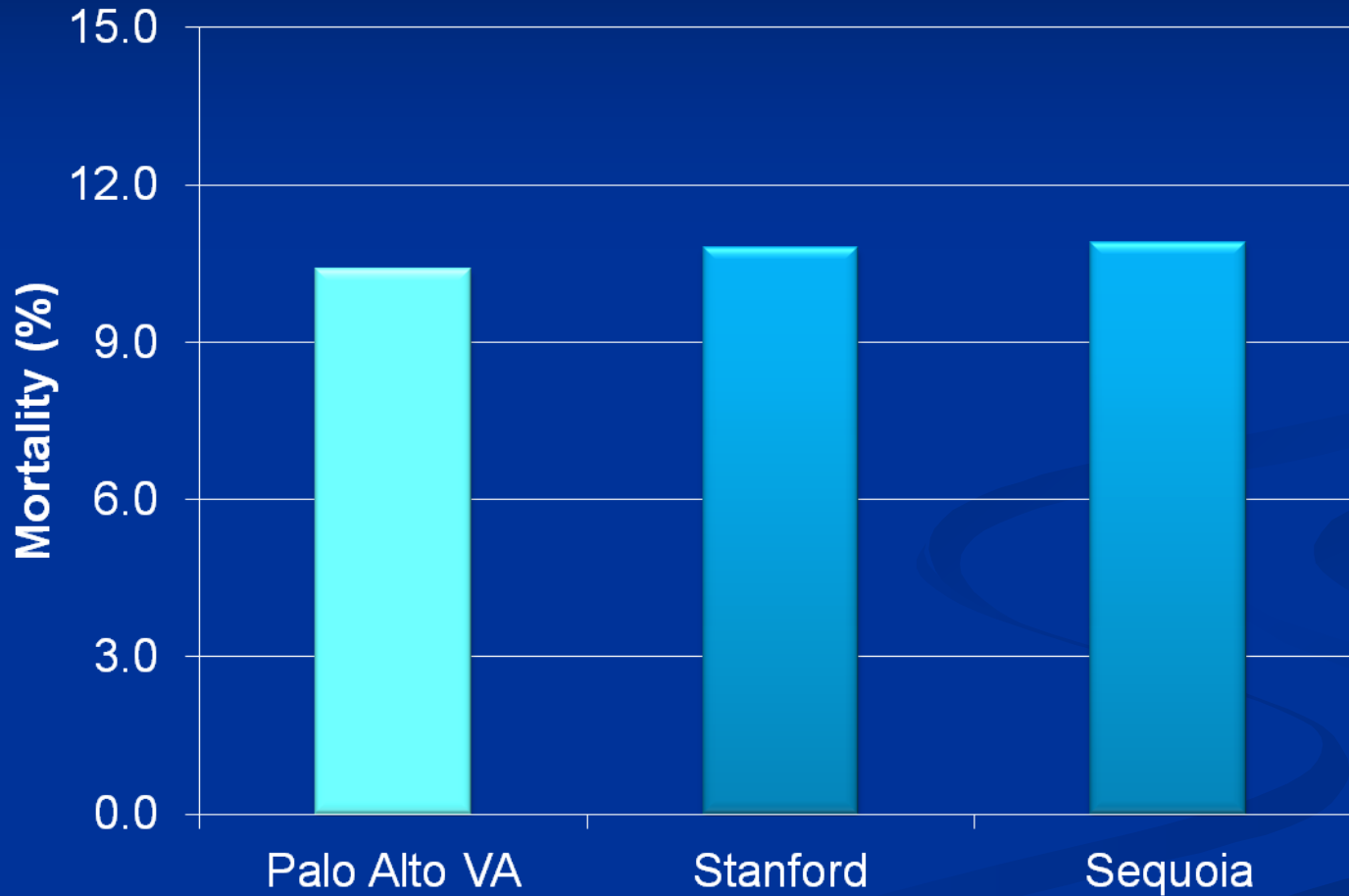
These percentages were calculated from Medicare data on patients discharged between July 01, 2007 and June 30, 2010. They don't include people in Medicare Advantage Plans (like an HMO or PPO) or people who don't have Medicare.



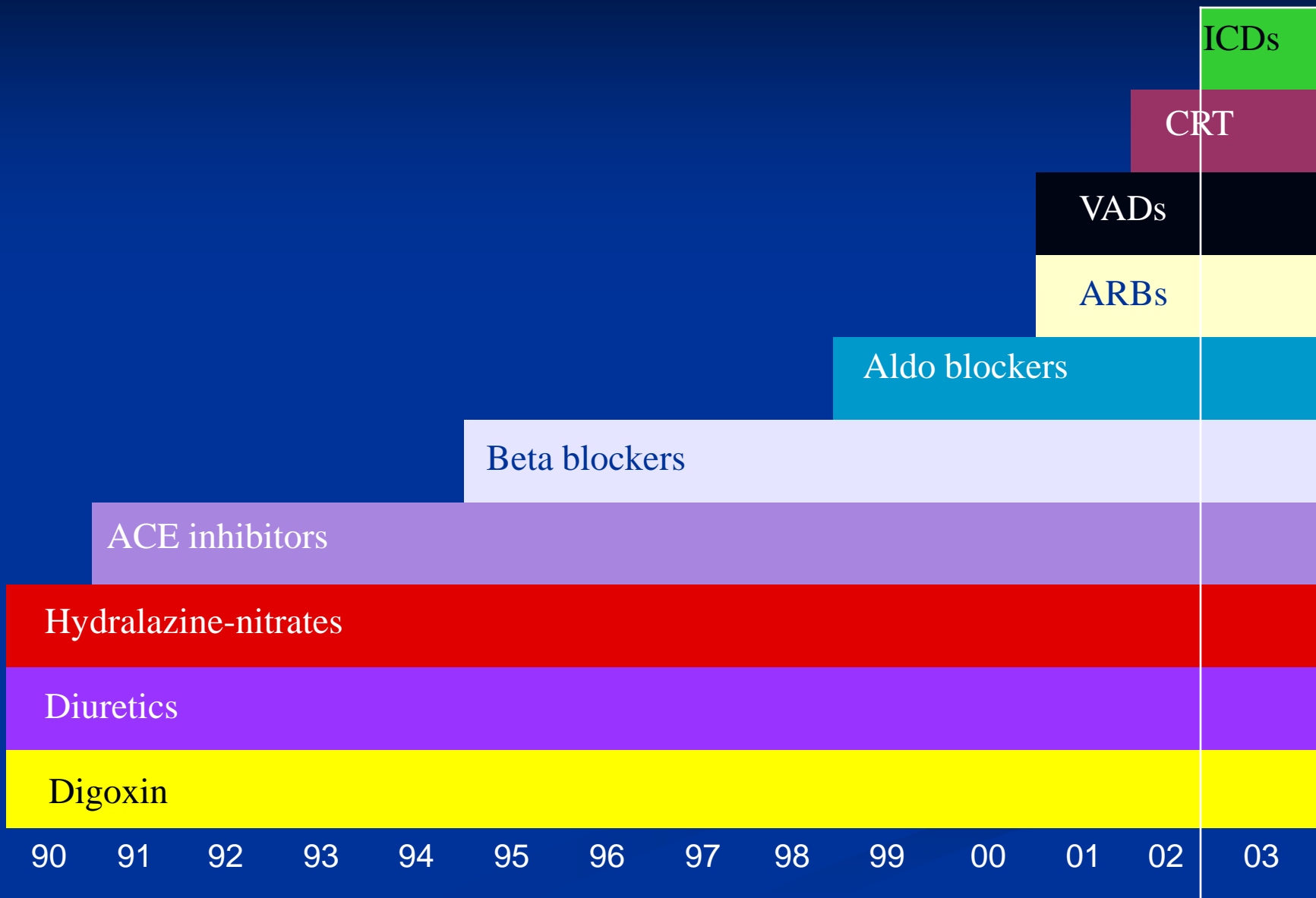
^hThis column shows the number of patients with Original Medicare who were admitted to the hospital for Rate of Readmission for Heart Failure Patients. The hospital may also have treated additional Medicare patients in Medicare health plans (like an HMO or PPO).

What does this show you? "Readmission" is when patients who have had a recent hospital stay need to go back into a hospital again. Medicare looks at how many Heart Failure patients need to be readmitted to the hospital within 30 days of their discharge. The information above tells you how the hospitals

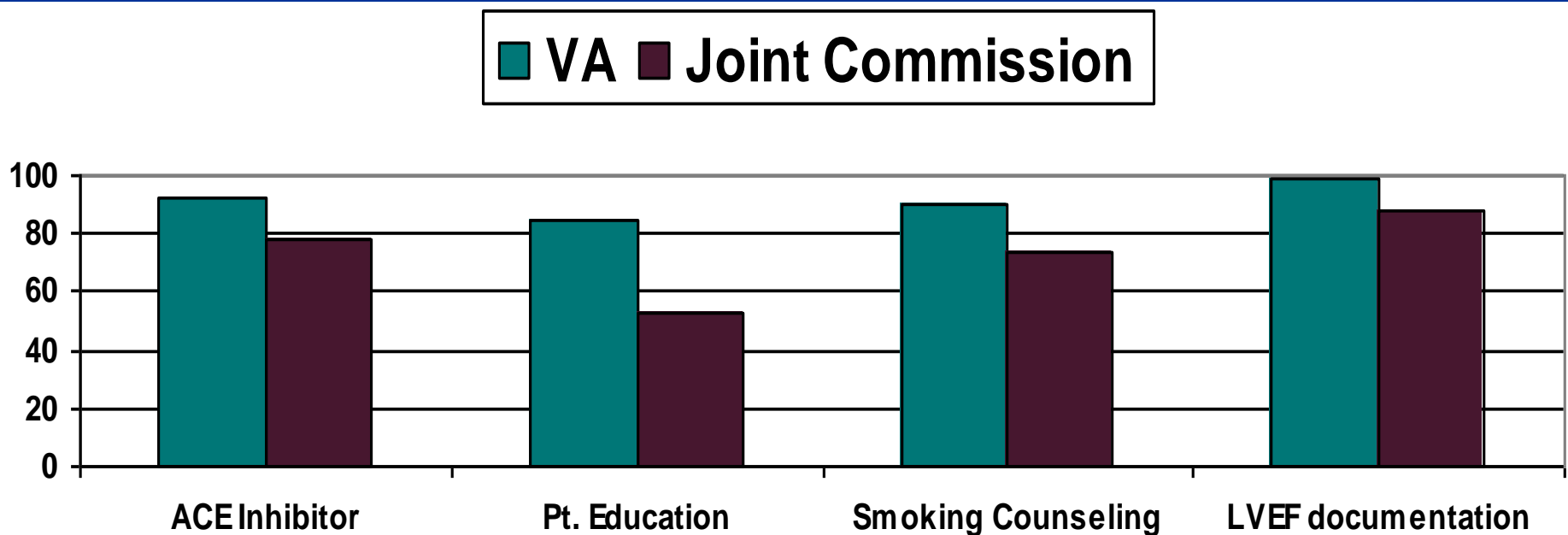
Mortality at 30 Days



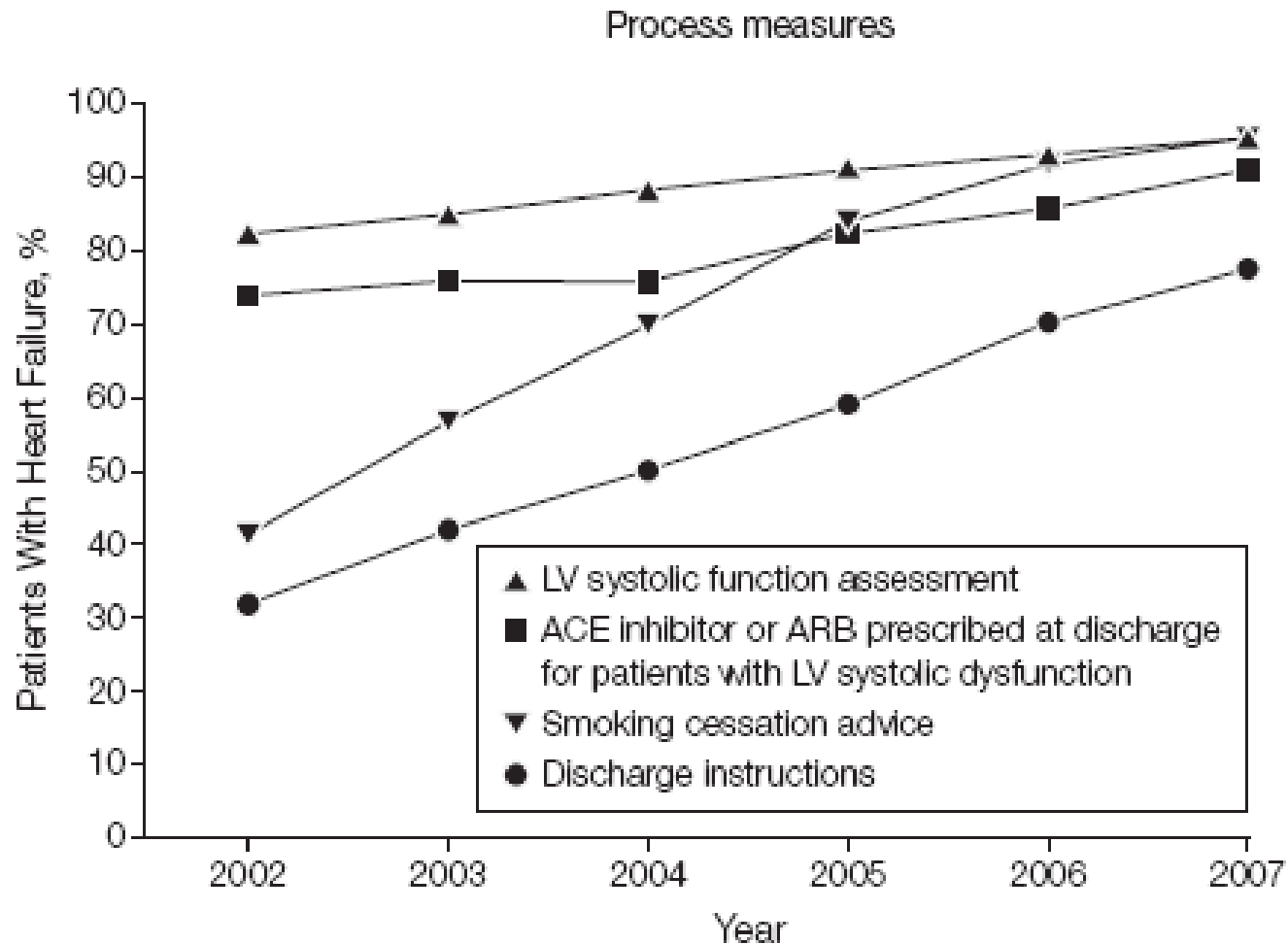
Treatments for Heart Failure



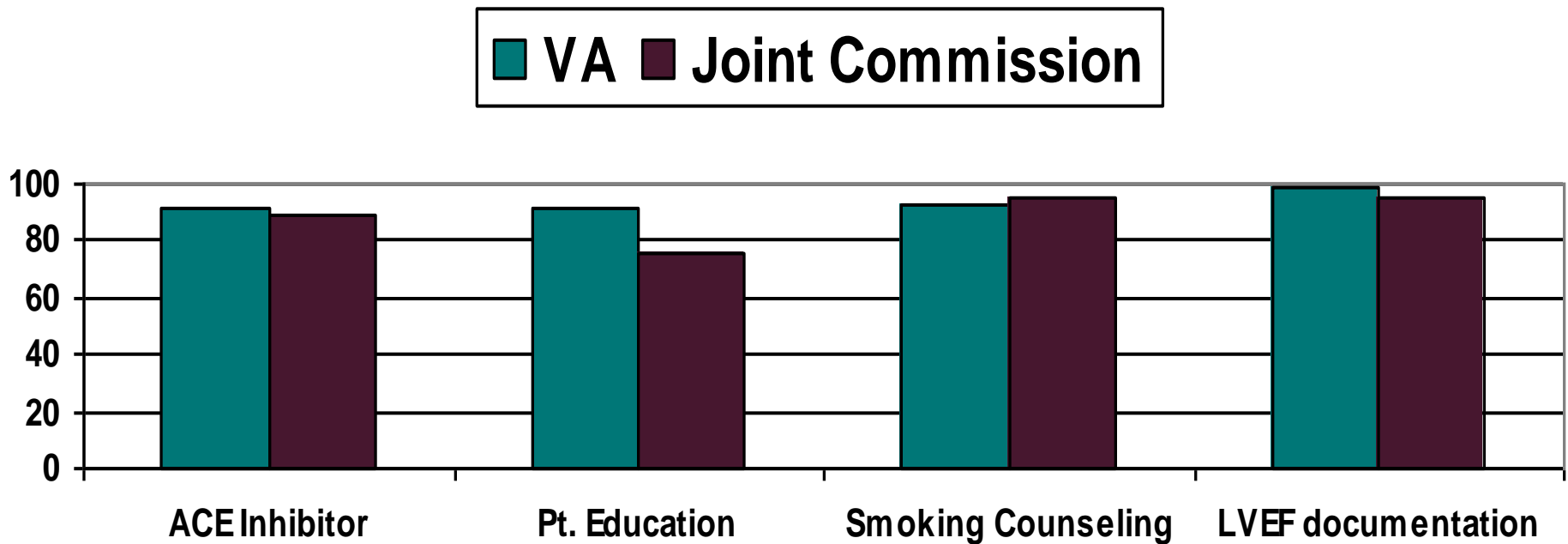
2005 Performance data for VA and Non-VA (Joint Commission mean) for Heart Failure Mission Critical Measures.



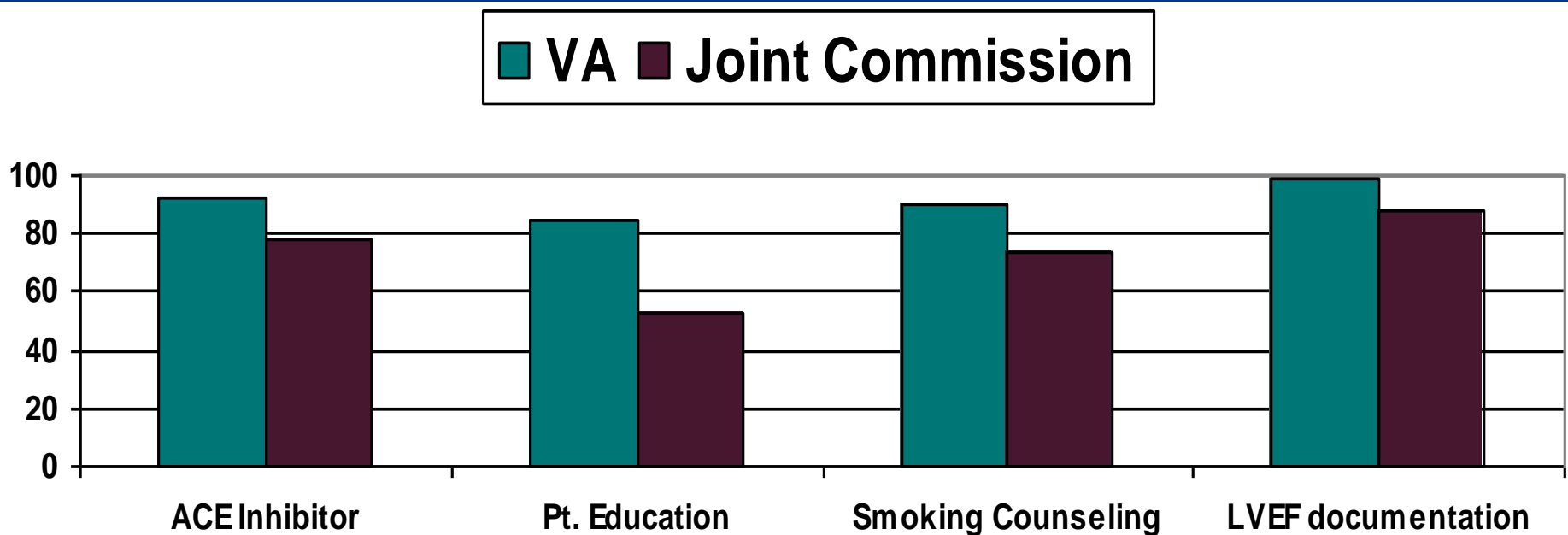
Improvement in Medicare Process of Care



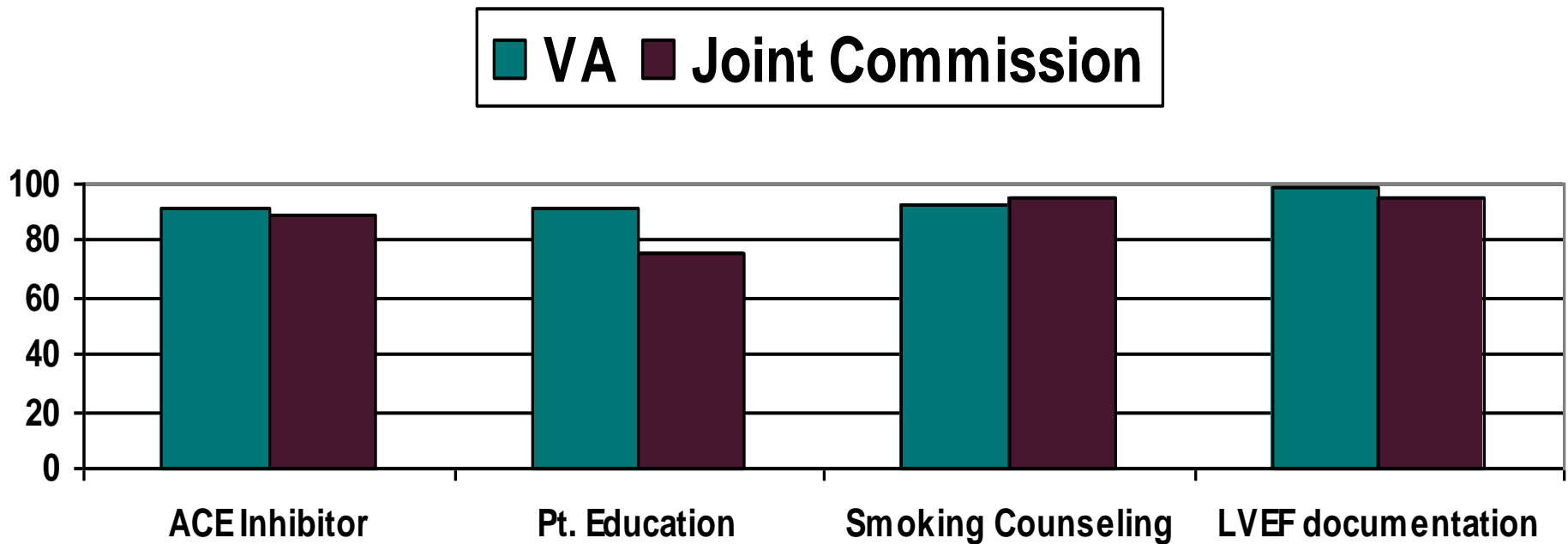
2007 Performance Data for VA and the Non-VA (Joint Commission mean) for HF Mission Critical Measures.



2005 Performance data for VA and Non-VA (Joint Commission mean) for Heart Failure Mission Critical Measures.



2007 Performance Data for VA and the Non-VA (Joint Commission mean) for HF Mission Critical Measures.



Summary

- VA burden of heart failure care is growing
- Aging of the population will likely continue/accelerate this growth
- VA led in process of care but the rest of the country has caught up.
- Finding “preventable” costs/admissions is increasingly difficult