

# Hospitals performing expensive heart procedures are more costly for all patients

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Hospitals that perform expensive, invasive cardiovascular procedures on a disproportionate number of patients are more costly for all heart failure patients, including those treated with noninvasive methods, according to a new Yale study.

Most [heart failure](#) patients are cared for without the use of [invasive procedures](#) like cardiac catheterization, notes the study published in *Circulation: Cardiovascular Quality and Outcomes*; but the rates of invasive procedures used for heart failure patients vary across hospitals. The study authors represent the NIH Heart, Lung, and Blood Institute Center for [Cardiovascular Outcomes](#) Research (CCOR) at Yale University as well as the Yale University School of Medicine and Baystate Medical Center.

The authors found that patients who were hospitalized with a diagnosis of heart failure and who did not receive an invasive procedure had a median cost per hospitalization of \$5,259 at hospitals that performed few invasive procedures, but their median cost was \$6,965 at hospitals that do many invasive procedures. This cost difference was not explained by the length of stay and was not attributable to higher spending in any one area such as laboratory testing, [diagnostic imaging](#), or medication use. Rather, length of stay was similar between groups, and spending at high-procedure hospitals was higher in most categories.

"This study highlights that the high cost of high-procedure hospitals is not only the result of doing more invasive procedures," said lead author

Serene I. Chen. "Instead, it may be that hospitals that have an intensive style of practice — those that do more procedures — also do more of everything else, such as imaging studies, medication administration, and laboratory testing, even for heart failure patients who are medically managed."

The investigators reported that hospitals that performed fewer invasive procedures tended to be smaller, non-teaching institutions, whereas those that performed a higher volume of invasive procedures tended to be urban teaching hospitals that cared for a higher volume of [heart failure patients](#).

Chen, a second-year student at the Yale University School of Medicine, has been nominated for an American Heart Association's Quality of Care and Outcomes Research (QCOR) Young Investigator Abstract Award, and the publication of the paper "Procedure Intensity and the Cost of Care" is timed to coincide with her presentation at the QCOR meeting.

**More information:** [DOI: 10.1161/CIRCOUTCOMES.112.966069](https://doi.org/10.1161/CIRCOUTCOMES.112.966069)

Provided by Yale University

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