

# Safety-net hospitals have higher costs, worse outcomes

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(HealthDay)—Intrinsic qualities of safety-net hospitals, rather than patient characteristics, lead to inferior surgical outcomes and increased costs across nine elective surgical procedures, according to a study published online Oct. 14 in *JAMA Surgery*.

Richard S. Hoehn, M.D., from the University of Cincinnati, and colleagues examined the effect of patient and [hospital](#) factors on surgical outcomes and costs at safety-net hospitals using data from the University HealthSystem Consortium database from Jan. 1, 2009, through Dec. 31, 2012 (231 hospitals with 12,638,166 Medicaid and uninsured patient hospitalizations).

The researchers found that for the nine procedures examined, [patients](#) at hospitals with high safety-net burden (HBHs) were more likely to be

young, black, and of the lowest socioeconomic status and to have the highest severity of illness and the highest cost for surgical care compared with patients at hospitals with low and medium safety-net burdens. For seven of nine procedures, the highest proportion of emergent cases and longest length of stay were seen at HBHs. Even when the researchers controlled for patient characteristics and center volume, HBHs still had higher odds of mortality for three procedures (odds ratios [ORs], 1.81 to 2.08), readmission for two procedures (ORs, 1.19 to 1.3), and the highest cost of care associated with seven of nine procedures (risk ratios, 1.23 to 1.35).

"These outcomes are likely owing to hospital resources and not necessarily patient factors," write the authors.

**More information:** [Abstract](#)  
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