

Cost of a Standard Hospital Stay

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| Name | Cost of a Standard Hospital Stay |
| Short /Other Names | CSHS; also known in other CIHI publications as "cost per weighted case (CPWC)" |
| Description | This indicator measures the ratio of a hospital's total acute inpatient care expenses to the number of acute inpatient weighted cases related to the inpatients for which the hospital provided care. |
| Interpretation | Cost of a standard hospital stay is an indicator that measures the relative cost-efficiency of a hospital's ability to provide acute inpatient care. This indicator compares a hospital's total acute inpatient care expenses to the number of acute inpatient weighted cases related to the inpatients that it provided care for. The result is the hospital's average full cost of treating the average acute inpatient. A high cost of a standard hospital stay indicates a relatively high cost of treating the average acute inpatient; a low cost of a standard hospital stay indicates that the cost of treating the average acute inpatient is relatively low. |
| Health System Framework Dimension | Health System Outputs: Efficiently delivered |
| Areas of Need | Getting Better |
| Geographic Coverage | Newfoundland and Labrador, Prince Edward Island, New Brunswick, Nova Scotia, Quebec, Ontario, Manitoba, Saskatchewan, Alberta, British Columbia, Yukon, Northwest Territories |
| Reporting Level /Disaggregation | National, Province/Territory, Region, Facility, Others: This indicator is calculated at the hospital level and aggregated to the regional, provincial and national levels. |
| Indicator or Results | Accessing Indicator Results on Your Health System: In Depth |
| Identifying Information | |
| Name | Cost of a Standard Hospital Stay |
| Short/Other Names | CSHS; also known in other CIHI publications as "cost per weighted case (CPWC)" |
| Indicator Description and Calculation | |
| Description | This indicator measures the ratio of a hospital's total acute inpatient care expenses to the number of acute inpatient weighted cases related to the inpatients for which the hospital provided care. The indicator is calculated by dividing the facility's total inpatient cost by its total acute inpatient weighted cases (obtained from the Discharge Abstract Database), excluding day procedures. |
| Calculation: Description | Unit of Analysis: An acute inpatient weighted case The indicator is expressed as the total inpatient expenses incurred to produce a weighted case. The indicator is calculated by fiscal year. |
| Calculation: Geographic Assignment | Place of service |
| Calculation: Type of Measurement | Ratio |
| Calculation: Adjustment Applied | The following covariates are used in risk adjustment: See Cost of a Standard Hospital Stay Methodology document for the methodology for determining total inpatient expense. |
| Calculation: Method of Adjustment | The range of acceptable values is 1st quartile (25th percentile) $1.5 \times$ IQR to 3rd quartile (75th percentile) $+ 1.5 \times$ IQR, where IQR stands for the interquartile range. Values outside of this range are removed from regional, provincial and national averages. |
| Denominator | Description: The denominator includes total acute inpatient weighted cases (obtained from the Discharge Abstract Database), excluding day procedures. Exclusions: Day procedures |
| Numerator | Description: The numerator is the total inpatient cost for the facility. The methodology for determining the total inpatient cost is found in the Cost of a Standard Hospital Stay Methodology document. |
| Background, Interpretation and Benchmarks | |
| | The indicator was developed to increase cost-efficiency in hospitals. |
| Ratio | The four factors that influence indicator results are organizational structure, components of CSHS, methodological issues and data quality. |
| nale | The indicator can provide insight into the total cost to treat an average inpatient with a Resource Intensity Weight (RIW) of 1, to improve cost-efficiency. |

Interpretation
 Cost of a standard hospital stay is an indicator that measures the relative cost-efficiency of a hospital's ability to provide acute inpatient care. This indicator compares a hospital's total acute inpatient care expenses to the number of acute inpatient weighted cases related to the inpatients that it provided care for. The result is the hospital's average full cost of treating the average acute inpatient. A high cost of a standard hospital stay indicates a relatively high cost of treating the average acute inpatient; a low cost of a standard hospital stay indicates that the cost of treating the average acute inpatient is relatively low.

HSP Framework
 Health System Outputs: Efficiently delivered

Dimension
 Areas of Getting Better
 Need

Targets
 Not applicable

References
 Not applicable

Availability of Data Sources and Results

Data Sources
 CMDB, DAD

Type of Year:

Fiscal

Available Data Years
First Available Year:

2013

Last Available Year:

2017

Geographic Coverage
 Newfoundland and Labrador, Prince Edward Island, New Brunswick, Nova Scotia, Quebec, Ontario, Manitoba, Saskatchewan, Alberta, British Columbia, Yukon, Northwest Territories

Reporting Level / Disaggregation
 National, Province/Territory, Region, Facility, Others: This indicator is calculated at the hospital level and aggregated to the regional, provincial and national levels.

Result Updates

Update Frequency
 Every year

Web Tool:

Your Health System: In Depth

Indicator Results

URL:

[Accessing Indicator Results on Your Health System: In Depth](#)

Updates

Not applicable

Quality Statement

Caveats and Limitations
 This indicator does not account for variances in labour rates across jurisdictions, which decreases comparability across jurisdictions.

Trending Issues

Not applicable

Indicator results are also available on

Comments

- Your Health System: In Brief (<http://yourhealthsystem.cihi.ca/inbrief/?lang=en#!/indicators/015/cost-of-a-standard-hospital-stay>)