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August 14, 2018

John Dreyzehner, MD, MPH, FACEOM  
Commissioner, Tennessee Department of Health  
5th Floor Andrew Johnson Tower  
710 James Robertson Parkway  
Nashville, Tennessee 37243

Dear Commissioner Dreyzehner,

Pursuant to Section 6.04(c) of the Tennessee Terms of Certification, we hereby submit Ballad Health's FY18 Fourth Quarter Report and the COPA Compliance Office FY18 Fourth Quarter Report. These reports cover the timeframe of April 1, 2018 through June 30, 2018.

As always, we welcome any questions or comments that you may have.

Sincerely,

A handwritten signature in blue ink that reads "Gary Miller".

Gary Miller  
Senior Vice President  
Ballad Health  
Interim COPA Compliance Officer

Cc: M. Norman Oliver, MD, MA  
Acting Commissioner, Virginia Department of Health

Cc by e-mail only: Janet Kleinfelter, Deputy Attorney General  
Jeff Ockerman, Director, Division of Health Planning  
Allyson Tysinger, Sr. Assistant Attorney General/Chief  
Erik Bodin, Director, Office of Licensure and

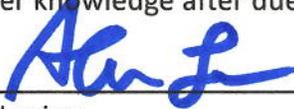
## Quarterly Report for FY18 4<sup>th</sup> Quarter

Covering 04/01/2018 – 06/30/2018 (“Reporting Period”)

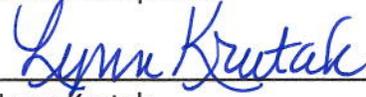
Submitted pursuant to the Terms of Certification Governing the Certificate of Public Advantage Issued to Ballad Health Pursuant to the Master Affiliation Agreement and Plan of Integration by and between Wellmont Health System and Mountain State Health Alliance Approved on September 19, 2017 and Issued on January 31, 2018 (“TOC”) and the Virginia Order and Letter Authorizing a Cooperative Agreement dated October 30, 2017 (“CA”).

### CERTIFICATION OF COMPLIANCE WITH THE TOC AND THE CA

Pursuant to section 6.04(a) of the TOC and Conditions 39 and 40 of the CA, the undersigned hereby certify the following report and its attachments are true and correct to the best of his/her knowledge after due inquiry and are accurate and complete.



\_\_\_\_\_  
Alan Levine  
Executive Chairman  
Chief Executive Officer  
Ballad Health



\_\_\_\_\_  
Lynn Krutak  
Executive Vice President  
Chief Financial Officer  
Ballad Health

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## QUARTERLY REPORT

1. Requirements. Section 6.04 of the TOC and Condition 40 of the CA require the quarterly submission of the items listed on Exhibit G attached to the TOC. The section of Exhibit G relevant to Quarterly Reports is attached hereto as Attachment 1a. A copy of Condition 40 is attached as Attachment 1b.
  
2. Description of Process. In compiling the information and materials for this Quarterly Report, the Ballad Health COPA Compliance Office (“CCO”) reevaluated the departments responsible for gathering and preparing these materials. Leaders of the departments were identified and given responsibility to submit the required materials and information (“Responsible Parties”). The CCO revised the spreadsheets, as necessary, assigning sections of the TOC and the Conditions of the CA to the appropriate Responsible Parties. The CCO resubmitted the spreadsheets to all Responsible Parties to allow them to certify, to their knowledge and belief after due inquiry, that Ballad Health is in compliance with the requirements of the TOC and CA. In instances where Responsible Parties had a question about the interpretation of the requirements or whether there might be concerns regarding compliance, they could make notes or provide qualifications.
  
3. Deliverables. Deliverables that were due to the State and the Commonwealth during this Reporting Period were submitted by the required times. As part of the process described above, the Responsible Parties certified to the completion of those submissions.

For reference, those previous submissions are listed below:

**Table A**

ITEM	STATUS	PURSUANT TO TOC AND CA
List of Entities Ballad Health does not exercise control or influence over managed care contracting	5/31/2018: Ballad Health submitted this list.	TOC Addendum 1, Section 4
Payment Indices : 1. Inpatient 2. Outpatient 3. Physician Clinics 4. Ambulatory Surgery Centers	5/31/2018: Ballad submitted the Inpatient piece of the Payment Indices along with a request for extension to complete the remaining pieces after a revised edition of Addendum 1 is complete.	TOC Addendum 1, Section 9.1(b)
Never Contracted Percentage	5/31/2018: Ballad Health submitted a request for additional time to discuss an alternate way for Ballad to track these payors separately with Ken Connor and the COPA Monitor.	TOC Addendum 1, Section 12(f)

TJC Notification	6/5/18: Ballad submitted notification from TJC regarding Franklin Woods Community Hospital, Sycamore Shoals Hospital and Johnston Memorial Hospital	TOC 4.02(a) and CA Condition 13
CMS Notification	6/6/18: Ballad submitted a notification from CMS regarding Unicoi County Nursing Home	TOC 4.02(a)(i)(B) and CA Condition 13
Establish Base Charity Care Amount	6/20/2018: Ballad submitted a request to Mr. Fitzgerald for a written addendum/revision to the TOC to revise charity reporting to a fiscal year basis to coincide with Ballad's reporting methodology. Additionally, Ballad requested that the due date coincide with the IRS Form 990 due date of May 15, 2019.	TOC 4.03(f)
CMS Notification	6/21/18: Ballad submitted a notification from CMS regarding Lonesome Pine Hospital	TOC 4.02(a)(i) and CA Condition 13
Baseline Spending Calculations	As of 6/26/2018, the estimated baseline spending amounts set forth in TOC Exhibit B – Page 1 reflect the current best estimates of the baseline spending amounts.	TOC Article 3 and Exhibit B
Health Services Plan Drafts	6/30/2018: Ballad submitted the plan drafts for Behavioral Health, Children's Health, Rural Health and Population Health Services	CA Conditions 33-36
Equalization Plan	6/30/2018: Ballad submitted the plan.	TOC 3.08(b) and CA Condition 19
COPA Compliance Training Plan	6/30/2018: Ballad submitted this plan.	

4. Pursuant to § 6.04 of the TOC and Condition 40 of the CA, Ballad Health is pleased to report as follows (using the outline of requirements on Exhibit G):

a. Any revisions to Charity Care Policy – TOC:4.03(e) / CA:14,39:

- Discussion regarding revisions to Ballad Health's Charity Care Policy is ongoing based upon questions in a memo from Ward Nelson and Ken Conner dated June 22, 2018 regarding Tennessee and Virginia Comments on Ballad Health 1/31/18 Draft Policies

for Financial Assistance and Credit and Collections. A meeting has been scheduled for August 17<sup>th</sup> with Ward Nelson, Ken Conner, Larry Fitzgerald and Ballad's key leadership.

- b. Report on Population Health and Social Responsibility Committee meetings and member attendance at meetings – TOC:4.04(e), Exhibit G / CA:38
  - Summary and attendance sheet, Attachment 2
- c. Key Financial Metrics and comparison of performance against the same quarter in the prior year, prior quarter and year to date – TOC:6.04(c) / CA:40
  - Balance Sheet, Attachment 3
  - Statements of Income, Attachment 4
  - Statement of Cash Flow, Attachment 5
- d. Year-to-Date Community Benefit Spending: By Category, compared to commitment spending – TOC: Exhibit G
  - Progress towards distributing grants – Nothing to report at this time.
  - Internal Spending, Attachment 6
- e. Quality Metrics reported to CMS – TOC: Exhibit G / CA:12
  - Ballad Health Public Reporting – July 2018, Attachment 7a
  - Tennessee Year-to-date, Attachment 7b
  - Virginia Year-to-date, Attachment 7c
  - Ballad Health Fiscal Year, Attachment 7d
  - Ballad Health by Quarter, Attachment 7e
  - Ballad Health by Month, Attachment 7f
- f. Ancillary and Post-Acute Services offered by competitors (with respect to each hospital) – TOC:5.04 / CA:5
  - In a memo from Ward Nelson and Ken Conner dated June 22, 2018 regarding Tennessee and Virginia Comments on Ballad Health 3/31/18 Quarterly Report the following was noted:

*“Item 4f. and Attachment 8a –*

*The Smyth County report on Ancillary and Post-Acute providers lists Southwest Virginia Inpatient Rehab in the “All Other” affiliation. The address for this Rehab entity is Smyth County Community Hospital. Our question is whether this entity is a competing provider. The rehab unit is treated as a subprovider of the hospital for Medicare purposes. A similar situation exists at Norton and Takoma. Further, there is*

*no distinction when shown on the Ballard website -  
<https://www.balladhealth.org/medical-services/inpatient-rehabilitation>.*

- *Is this part of the larger rehab relationship with HealthSouth? If so, does the website need clarification?*
- *Please explain the relationship at each of the three hospitals (Smyth, Norton and Takoma) and the rehab units.*
- *Please confirm how managed care contracts are negotiated for the subproviders at each of the three hospitals.”*

Ballad Health’s response to this inquiry follows. Ballad Health Leadership will also discuss this item in the meeting scheduled for August 17<sup>th</sup> with Mr. Nelson and Mr. Conner.

*Ballad Ownership:*

- *Southwest Virginia Inpatient Rehab (SCCH Inpatient Rehab) – this is a Ballad entity for which there are 14 rehab beds located inside Smyth County Community Hospital; the unit name is technically SW VA Inpatient Rehab but we have noted that it is also known SCCH IP Rehab in case there was any confusion*
- *Norton Community Hospital Inpatient Rehab is an 11 bed unit located inside the hospital as is labeled as having the hospital name*
- *Takoma Inpatient Rehab is also Ballad owned and is an 11 bed unit inside Takoma Regional Hospital in Greeneville and is labeled as such*

*Other Inpatient Rehab with Ballad affiliation:*

- *Ballad has joint venture agreements with HealthSouth locations in Bristol and Johnson City for which Ballad is a minority owner. These facilities, The Rehabilitation Hospital of SW Virginia (Bristol) and Quillen Rehabilitation Hospital (Johnson City), appear in the “All Other” category in their respective areas. The HealthSouth location in Kingsport is fully owned by HealthSouth and has no Ballad ownership at this time as is labeled as “All Other” as well.*

*In terms of managed care negotiations, the three units that are Ballad owned (SCCH, NCH, and Takoma) fall underneath the managed care agreements that have been negotiated for either legacy MSHA or legacy Wellmont at this point. Managed care contracts are not negotiated specifically for these unique services. As for the HealthSouth managed care agreements, HealthSouth has ownership of those contracts and Ballad does not have any part of that process.*

- The updated Ancillary Lists are attached as follows:
  - Bristol Regional Medical Center, Attachment 8a
  - Dickenson County Hospital, Attachment 8b
  - Franklin Wood Community Hospital, Attachment 8c
  - Hancock County Hospital, Attachment 8d
  - Hawkins County Memorial Hospital, Attachment 8e
  - Holston Valley Medical Center, Attachment 8f

- Indian Path Medical Center, Attachment 8g
  - Johnson County Community Hospital, Attachment 8h
  - Johnson City Medical Center, Attachment 8i
  - Johnston Memorial Hospital, Attachment 8j
  - Laughlin Memorial Hospital, Attachment 8k
  - Lonesome Pine Hospital, Attachment 8l
  - Mountain View Regional Medical Center, Attachment 8m
  - Norton Community Hospital, Attachment 8n
  - Russell County Medical Center, Attachment 8o
  - Smyth County Community Hospital, Attachment 8p
  - Sycamore Shoals Hospital, Attachment 8q
  - Takoma Regional Hospital, Attachment 8r
  - Unicoi County Memorial Hospital, Attachment 8s
- g. Status of any outstanding Cures, Corrective Actions, or other remedial actions – TOC: Exhibit G / CA:17
- As of the end of this Reporting Period, Ballad Health does not have any outstanding Cures, Corrective Actions, or other remedial actions.
- h. Any requirements or commitments outlined in the TOC or in the Index which Ballad Health will not meet or anticipates it will not meet:
- TOC 4.02(c)(vi), Exhibit C & D, 6.04(b)(xvi), 7.01(c)&(d): Per correspondence dated August 9, 2018 to Mr. Ockerman and Mr. Bodin, Ballad Health has requested to continue meetings with the states on data collection and measurement design in order to resolve several outstanding issues.
- i. Closures/Opening:
- IPMC Cardiac Catheterization Laboratory Closure: As part of the plan for gaining efficiencies, improving continuity of services, and reducing duplication and cost in the Kingsport market, the Indian Path Medical Center (IPMC) Cardiac Catheterization Laboratory is planned for closure effective August 31, 2018, pending approval from the Tennessee Department of Health. Holston Valley Medical Center, with 5 Cardiac Catheterization Laboratories in operation, has the capacity to absorb the interventional cardiology and cardiac implant procedures currently performed at IPMC. All IPMC Team Members have been offered employment elsewhere in Ballad Health to fill existing vacancies effective the date of the closure. The interventional cardiologist who has been practicing at IPMC also has hospital privileges at Johnson City Medical Center and plans to shift his practice to that location.

5. Status report on recruiting and convening of the Accountable Care Community pursuant to Section 3.04(d) of the TOC and Condition 36 of the CA:
  - The Accountable Care Community Steering Committee has been convened and the first meeting was held on April 20, 2018.
6. Quality reporting via Ballad Health website to the public pursuant to Section 4.02(d)(ii) of the TOC and Condition 12 of the CA:
  - A link to Hospital Compare Data was made available on the Ballad Health website as of February 2018.
  - Public Reporting was posted the end of June 2018.
7. Participation in quarterly teleconference with DMAS pursuant to Condition 47 of the CA:
  - Ballad Health participated in the Quarterly Teleconference with DMAS on June 5, 2018.

## **ATTACHMENT 1**

### **QUARTERLY REPORT CONTENTS**

- TOC, Exhibit G, Page 3 – 1a
- CA, Condition 40 – 1b

### TOC, Exhibit G, Page 3

The Department reserves the right to change these quarterly reporting requirements upon adequate notice.

- Any revisions to Charity Care Policy; Section 4.03(e).
- Report of Population Health and Social Responsibility Committee meetings and member attendance at meeting; Section 4.04(e).
- Key Financial Metrics (comparing each to same quarter in prior year and the quarter prior to the quarter in question); Section 6.04(c).
  - o Balance sheet
  - o Statements of income and cash flow
- YTD Community Benefit Spending
  - o By Category, compared to commitment spending
    - Progress towards distributing grants
    - Internal spending
- Quality Metrics reported to CMS
- Once, within thirty (30) days of the Issue Date: a List of Ancillary and Post-Acute Services offered by competitors (with respect to each COPA Hospital); Section 5.04(a).
  - o Includes but is not limited to: SNF; home health providers; diagnostic service providers; imaging centers; ambulatory surgery centers; physicians and other providers; etc.
  - o Include at least three competitors for each category of service.
- Compliance Office Quarterly Reports
  - o Complaints by type
  - o Resolution of complaints
- Status of any outstanding Cures, Corrective Actions, or other remedial actions.
- Any requirements or commitments outlined in the Terms of Certification or in the Index which the New Health System is not meeting or anticipates it will not meet
- Closures / Openings
  - o Plans. Update on plans to close or open any Service Lines or facilities.
  - o Progress. Update on the status of any closures or openings of facilities or Service Lines.

**CA, Condition 40**

The New Health System shall provide information on a quarterly basis of the key financial metrics and the balance sheet comparing performance to the similar prior year period and year to date. This information shall be provided on the same timetable as what is publicly reported through Electronic Municipal Market Access.

**ATTACHMENT 2**

**POPULATION HEALTH AND SOCIAL RESPONSIBILITY COMMITTEE MEETING SUMMARY**

BALLAD HEALTH COMMUNITY BENEFIT & POPULATION HEALTH COMMITTEE  
**EXECUTIVE SUMMARY FROM UNAPPROVED MINUTES**  
 BALLAD HEALTH EXECUTIVE BOARDROOM  
 JUNE 21, 2018

Members:									
P	Barbara Allen	P	Sue Cantrell	P	Marvin Eichorn	P*	Rachel Fowlkes	P	Joanne Gilmer
P	Tony Keck	P	Martin Kent	P	Steve Kilgore	P*	Alan Levine	P	Matt Luff
P	Gary Miller	P	Rick Moulton	A	Roger Mowen	P	Todd Norris	A	Donnie Ratliff
P*	Scott Richards	P	Allison Rogers	P	Suzanne Rollins	P	Doug Springer, Chair	A	Randy Wykoff
Staff:									
P	Andy Hall	P	Cathi Snodgrass	A	Jan Ponder	P	Melanie Stanton	A	Jerry Blackwell
P	Taylor Hamilton	P	Eric Deaton	P	Lynn Krutak	P*	Linda Edwards		
Guests:									

P = Present, P\* = Via Phone, A = Absent

TOPIC	DISCUSSION	ACTION/APPROVAL
<b>CALL TO ORDER</b>	The meeting was called to order at 4:05 pm.	Dr. Doug Springer
<b>A. DECLARATION</b>		
<b>1. Quorum</b>		Dr. Doug Springer declared a quorum with 17 members present.  The CEO and COO were in attendance as required.
<b>2. Conflict(s) of Interest</b>		Dr. Doug Springer declared no conflicts of interest.

BALLAD HEALTH COMMUNITY BENEFIT & POPULATION HEALTH COMMITTEE

<p><b>B. Consent Agenda</b></p>	<p>Dr. Doug Springer asked if there were any questions, comments or corrections to the Community Benefit and Population Health March 21<sup>st</sup> meeting minutes.</p>	<p>ACTION: <i>Approve March 21, 2018 minutes.</i></p> <p>APPROVAL: <b>Approved</b></p>
<p><b>C. Action Items</b></p>		
<p><b>1. Guidelines for Community Benefit/Charitable Contributions Policy</b></p>	<p>Mr. Tony Keck walked through each section of guidelines for community benefit/charitable contributions policy and the committee provided feedback.</p> <p>Mr. Keck stated that the annual budget for community benefit will be will presented at the next regular meeting. This committee will be provided an update on the status of all contributions. The Department of Strategy and Value-Based Services will manage the budget governed by these guidelines, including those funds designated for use by individual markets or hospitals.</p>	<p>ACTION : <i>Approve Guidelines for Community Benefit / Charitable Contributions Policy</i></p> <p>APPROVAL: <b>Approved</b></p>
<p><b>2. Community Health Needs Assessment</b></p>	<p>Ms. Allison Rogers gave an overview of the process for Community Health Needs Assessments as well as the IRS regulatory requirements. A CHNA must completed for each hospital in the system every three years. Eleven assessments for LMSHA hospitals were made available prior to the meeting for the committees review. LWHS CHNAs are due June 30, 2019. She noted that this year the process included consideration of the COPA/CA population health sub-index measures. A grid comparing the identified priorities of each hospital was discussed with the committee.</p> <p>Mr. Keck noted that Ballad had been asked to serve on a new Virginia Hospital and Healthcare Association-Virginia Department of Health taskforce to improve hospital-public health collaboration, including closer collaboration on CHNAs.</p> <p>The next steps for the 2018 CHNA reports is to present the recommendation of this committee to the Ballad Health Board of Directors on June 28<sup>th</sup> for final adoption, and to post individual hospital needs assessment reports on the health system website by June 30,</p>	<p>ACTION: <i>Approve each of the eleven Community Health Needs Assessments currently due according to federal requirements.</i></p> <p>APPROVAL: <b>Approved</b></p>

BALLAD HEALTH COMMUNITY BENEFIT & POPULATION HEALTH COMMITTEE

	<p>2018. The system must then develop and finalize implementation plans for the prioritized health needs by November 15, 2018.</p> <p>The goal is to align all Ballad hospitals on the same CHNA completion and submission schedule in 2021.</p>	
<p>D. Reports/Education/Discussion</p>		
	<p>Mr. Tony Keck previewed the draft 3-year Population Health Plan for the State of Virginia and answered questions from the committee. It consists of the Population Health plan overview, the strategic approach and the implementation roadmap.</p> <p>Ballad is proposing a population health model of change based on the Expanded Chronic Care Model. This model leads Ballad to three areas of focus for population health improvement: develop health infrastructure within the health system and community, redesign Ballad as a community health improvement organization, and enable community resources and sound health policy.</p> <p>The implementation roadmap consists of a phased 3-year plan: Year one is dedicated to building a foundation; year two is focused on community engagement and pilot testing, and year three begins intense implementation. Milestones and Metrics are laid out quarterly for year one and annually for years two and three of the plan. In the 4<sup>th</sup> quarter of each year, the Department of Population Health will submit new quarterly milestones and metrics for the following year. These quarterly milestones will be reviewed with the both states each quarter in a process being developed with the states for “light” dives by report twice each year, and face to face “deep” dives twice each year.</p>	<p>Mr. Tony Keck</p>
<p><b>ADJOURN</b></p>	<p>Dr. Springer adjourned the meeting at 5:59 p.m.</p>	<p>Dr. Doug Springer</p>

**ATTACHMENT 3**

**BALANCE SHEET**

**Ballad Health  
Comparative Balance Sheet  
TN COPA Requirements**

	30-Jun 2018	31-Mar 2018	Quarter Activity	30-Jun 2017	Year Activity
<b>ASSETS</b>					
<b>CURRENT ASSETS</b>					
Cash and Cash Equivalents	86,843,707	139,862,177	(53,018,470)	165,983,656	(79,139,949)
Current Portion AWUIL	8,526,640	10,643,212	(2,116,572)	22,945,146	(14,418,506)
Accounts Receivable (Net)	286,805,399	290,819,591	(4,014,192)	275,383,549	11,421,850
Other Receivables	35,253,326	30,620,745	4,632,580	35,852,778	(599,452)
Due From Affiliates	127,226,985	1,258,648	125,968,337	957,075	126,269,910
Due From Third Party Payors	(0)	0	(1)	0	(1)
Inventories	48,439,110	49,948,786	(1,509,676)	47,716,743	722,367
Prepaid Expense	18,204,271	22,205,353	(4,001,082)	22,020,682	(3,816,412)
	611,299,436	545,358,512	65,940,924	570,859,629	40,439,807

**ASSETS WHOSE USE IS LIMITED**

	59,143,475	58,095,285	1,048,190	59,967,682	(824,207)
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**OTHER INVESTMENTS**

	1,202,838,071	1,172,464,536	30,373,535	1,139,009,273	63,828,797
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**PROPERTY, PLANT AND EQUIPMENT**

Land, Buildings and Equipment	3,187,775,819	3,145,971,951	41,803,868	3,100,553,254	87,222,564
Less Allowances for Depreciation	1,879,790,112	1,848,402,485	31,387,627	1,772,646,437	107,143,676
	1,307,985,706	1,297,569,466	10,416,241	1,327,906,818	(19,921,111)

**OTHER ASSETS**

Pledges Receivable	824,392	888,953	(64,561)	1,570,953	(746,561)
Long Term Compensation Investment	32,211,612	31,679,559	532,053	29,889,225	2,322,387
Investments in Unconsolidated Subsidiaries	17,562,549	17,428,849	133,701	17,052,118	510,432
Land / Equipment Held for Resale	6,646,369	6,646,369	0	6,646,369	(0)
Assets Held for Expansion	11,361,384	11,361,384	0	11,361,384	0
Investments in Subsidiaries	(0)	0	(0)	0	(0)
Goodwill	209,602,215	209,712,914	(110,699)	209,998,929	(396,713)
Deferred Charges and Other	12,329,037	10,492,061	1,836,976	9,130,171	3,198,866
	290,537,558	288,210,087	2,327,471	285,649,149	4,888,409

**TOTAL ASSETS**

	3,471,804,247	3,361,697,886	110,106,360	3,383,392,550	88,411,696
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**LIABILITIES AND NET ASSETS**

**CURRENT LIABILITIES**

Accounts Payable and Accrued Expense	137,487,665	146,266,502	(8,778,838)	153,937,494	(16,449,829)
Accrued Salaries, Benefits, and PTO	105,687,610	105,793,840	(106,230)	107,865,842	(2,178,232)
Claims Payable	1,953,448	1,896,224	57,224	1,896,224	57,224
Accrued Interest	9,486,141	9,563,248	(77,107)	17,265,331	(7,779,190)
Due to Affiliates	126,192,674	278,633	125,914,041	(0)	126,192,674
Due to Third Party Payors	14,608,326	21,741,179	(7,132,853)	18,688,574	(4,080,248)
Call Option Liability	0	0	0	0	0
Current Portion of Long Term Debt	13,410,686	45,565,851	(32,155,165)	44,446,032	(31,035,346)
	408,826,548	331,105,477	77,721,071	344,099,496	64,727,052

**OTHER NON CURRENT LIABILITIES**

Long Term Compensation Payable	16,318,189	16,333,400	(15,211)	14,706,956	1,611,233
Long Term Debt	1,342,354,827	1,283,309,484	59,045,343	1,353,309,720	(10,954,893)
Estimated Fair Value of Interest Rate Swaps	8,949,730	17,416,944	(8,467,214)	9,709,747	(760,017)
Deferred Income	6,819,324	11,965,232	(5,145,908)	8,918,008	(2,098,683)
Professional Liability Self-Insurance and Other	49,507,823	60,567,119	(11,059,296)	55,862,482	(6,354,659)
	1,423,949,894	1,389,592,180	34,357,715	1,442,506,913	(18,557,019)

**TOTAL LIABILITIES**

	1,832,776,442	1,720,697,657	112,078,785	1,786,606,409	46,170,033
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**NET ASSETS**

Restricted Net Assets	20,612,107	21,842,570	(1,230,463)	23,536,818	(2,924,711)
Unrestricted Net Assets	1,376,510,689	1,384,074,955	(7,564,266)	1,351,483,092	25,027,597
Noncontrolling Interests in Subsidiaries	241,905,009	235,082,704	6,822,305	221,766,231	20,138,778
	1,639,027,805	1,641,000,229	(1,972,425)	1,596,786,142	42,241,663

**TOTAL LIABILITIES AND NET ASSETS**

	3,471,804,247	3,361,697,886	110,106,361	3,383,392,550	88,411,696
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**Ballad Health  
Comparative Balance Sheet  
VA COPA Requirements**

	30-Jun 2018	30-Jun 2017	Year Activity	Year to Date 2018
<b>ASSETS</b>				
<b>CURRENT ASSETS</b>				
Cash and Cash Equivalents	86,843,707	165,983,656	(79,139,949)	86,843,707
Current Portion AWUIL	8,526,640	22,945,146	(14,418,506)	8,526,640
Accounts Receivable (Net)	286,805,399	275,383,549	11,421,850	286,805,399
Other Receivables	35,253,326	35,852,778	(599,452)	35,253,326
Due From Affiliates	127,226,985	957,075	126,269,910	127,226,985
Due From Third Party Payors	(0)	0	(1)	(0)
Inventories	48,439,110	47,716,743	722,367	48,439,110
Prepaid Expense	18,204,271	22,020,682	(3,816,412)	18,204,271
	611,299,436	570,859,629	40,439,807	611,299,436

<b>ASSETS WHOSE USE IS LIMITED</b>	59,143,475	59,967,682	(824,207)	59,143,475
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<b>OTHER INVESTMENTS</b>	1,202,838,071	1,139,009,273	63,828,797	1,202,838,071
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<b>PROPERTY, PLANT AND EQUIPMENT</b>	3,187,775,819	3,100,553,254	87,222,564	3,187,775,819
Less Allowances for Depreciation	1,879,790,112	1,772,646,437	107,143,676	1,879,790,112
	1,307,985,706	1,327,906,818	(19,921,111)	1,307,985,706

<b>OTHER ASSETS</b>	824,392	1,570,953	(746,561)	824,392
Long Term Compensation Investment	32,211,612	29,889,225	2,322,387	32,211,612
Investments in Unconsolidated Subsidiaries	17,562,549	17,052,118	510,432	17,562,549
Land / Equipment Held for Resale	6,646,369	6,646,369	(0)	6,646,369
Assets Held for Expansion	11,361,384	11,361,384	0	11,361,384
Investments in Subsidiaries	(0)	0	(0)	0
Goodwill	209,602,215	209,998,929	(396,713)	209,602,215
Deferred Charges and Other	12,329,037	9,130,171	3,198,866	12,329,037
	290,537,558	285,649,149	4,888,409	290,537,558

<b>TOTAL ASSETS</b>	3,471,804,247	3,383,392,550	88,411,696	3,471,804,247
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<b>LIABILITIES AND NET ASSETS</b>				
<b>CURRENT LIABILITIES</b>				
Accounts Payable and Accrued Expense	137,487,665	153,937,494	(16,449,829)	137,487,665
Accrued Salaries, Benefits, and PTO	105,687,610	107,865,842	(2,178,232)	105,687,610
Claims Payable	1,953,448	1,896,224	57,224	1,953,448
Accrued Interest	9,486,141	17,265,331	(7,779,190)	9,486,141
Due to Affiliates	126,192,674	(0)	126,192,674	126,192,674
Due to Third Party Payors	14,608,326	18,688,574	(4,080,248)	14,608,326
Call Option Liability	0	0	0	0
Current Portion of Long Term Debt	13,410,686	44,446,032	(31,035,346)	13,410,686
	408,826,548	344,099,496	64,727,052	408,826,548

<b>OTHER NON CURRENT LIABILITIES</b>	16,318,189	14,706,956	1,611,233	16,318,189
Long Term Compensation Payable	1,342,354,827	1,353,309,720	(10,954,893)	1,342,354,827
Estimated Fair Value of Interest Rate Swaps	8,949,730	9,709,747	(760,017)	8,949,730
Deferred Income	6,819,324	8,918,008	(2,098,683)	6,819,324
Professional Liability Self-Insurance and Other	49,507,823	55,862,482	(6,354,659)	49,507,823
	1,423,949,894	1,442,506,913	(18,557,019)	1,423,949,894

<b>TOTAL LIABILITIES</b>	1,832,776,442	1,786,606,409	46,170,033	1,832,776,442
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<b>NET ASSETS</b>	20,612,107	23,536,818	(2,924,711)	20,612,107
Unrestricted Net Assets	1,376,510,689	1,351,483,092	25,027,597	1,376,510,689
Noncontrolling Interests in Subsidiaries	241,905,009	221,766,231	20,138,778	241,905,009
	1,639,027,805	1,596,786,142	42,241,663	1,639,027,805

<b>TOTAL LIABILITIES AND NET ASSETS</b>	3,471,804,247	3,383,392,550	88,411,696	3,471,804,247
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**ATTACHMENT 4**

**STATEMENT OF INCOME**

**Ballad Health**  
**Statement of Revenue and Expense**  
**As of June 30, 2018 and June 30, 2017**

*TN COPA Requirements*

**Revenue, Gains and Support**

Patient service revenue, net of contractual allowances and discounts  
Provision for bad debts

**Net patient service revenue**

Other operating revenue

**TOTAL REVENUE, GAINS AND SUPPORT**

**Expenses:**

Salaries and wages  
Physician salaries and wages  
Contract Labor  
Employee Benefits  
Fees  
Supplies  
Utilities  
Medical Costs  
Other Expense  
Depreciation  
Amortization  
Interest & Taxes

**TOTAL EXPENSES**

**OPERATING INCOME**

**Nonoperating gains (losses):**

Interest and dividend income  
Net realized gains (losses) on the sale of securities  
Change in net unrealized gains on securities  
Derivative related income  
Loss on extinguishment of LTD / derivatives  
Change in estimated fair value of derivatives  
Gain (loss) on discontinued operations  
Other nonoperating gains (losses)  
Noncontrolling interests in subsidiaries

**NET NONOPERATING GAINS**

**EXCESS OF REVENUE, GAINS AND SUPPORT  
OVER EXPENSES AND LOSSES**

**EBITDA**

Quarter 4 Jun 2018	Quarter 3 Mar 2018	Quarter 4 Jun 2017
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543,833,140	556,877,144	540,406,549
(35,541,555)	(48,414,314)	(45,462,910)
508,291,586	508,462,830	494,943,640

20,350,178	13,248,948	23,472,352
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528,641,764	521,711,779	518,415,992
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194,522,925	200,343,328	190,705,541
22,872,615	21,751,703	20,245,992
11,855,188	12,274,091	9,348,875
43,400,311	41,153,635	38,277,017
60,994,804	52,225,540	53,776,992
102,536,795	101,170,428	93,894,711
7,488,982	8,029,774	7,321,437
0	0	0
27,975,917	38,002,938	40,607,418
32,847,321	34,789,865	32,132,484
507,730	492,302	631,277
12,823,320	12,908,632	13,018,963
517,825,909	523,142,234	499,960,707
10,815,855	(1,430,456)	18,455,286

8,281,549	4,179,656	7,962,857
4,170,918	2,532,597	4,644,608
265,428	(7,258,754)	16,350,273
744,616	743,373	813,586
(24,382,188)	0	(184,211)
8,385,715	(9,963,580)	8,470,061
0	0	(100,000)
(8,725,204)	(1,081,492)	(2,642,143)
(7,219,244)	(2,824,847)	(6,805,322)
(18,478,411)	(13,673,046)	28,509,710

(7,662,557)	(15,103,502)	46,964,996
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54,246,861	50,309,629	68,111,597
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**Ballad Health**  
**Statement of Revenue and Expense**  
**As of June 30, 2018 and June 30, 2017**

*VA COPA Requirements*

Quarter 4 Jun 2018	Quarter 4 Jun 2017	Year to Date Jun 2018
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543,833,140	540,406,549	2,190,888,731
(35,541,555)	(45,462,910)	(172,431,193)
508,291,586	494,943,640	2,018,457,539

20,350,178	23,472,352	58,704,603
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528,641,764	518,415,992	2,077,162,142
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194,522,925	190,705,541	783,753,200
22,872,615	20,245,992	86,974,110
11,855,188	9,348,875	47,876,088
43,400,311	38,277,017	160,460,557
60,994,804	53,776,992	221,208,467
102,536,795	93,894,711	402,352,670
7,488,982	7,321,437	31,671,860
0	0	0
27,975,917	40,607,418	144,499,380
32,847,321	32,132,484	135,945,374
507,730	631,277	1,920,970
12,823,320	13,018,963	50,476,717
517,825,909	499,960,707	2,067,139,394
10,815,855	18,455,286	10,022,748

8,281,549	7,962,857	26,275,068
4,170,918	4,644,608	19,076,248
265,428	16,350,273	27,266,229
744,616	813,586	2,790,494
(24,382,188)	(184,211)	(24,812,173)
8,385,715	8,470,061	411,452
0	(100,000)	0
(8,725,204)	(2,642,143)	(16,223,717)
(7,219,244)	(6,805,322)	(21,010,765)
(18,478,411)	28,509,710	13,772,837

(7,662,557)	46,964,996	23,795,585
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54,246,861	68,111,597	209,273,138
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**ATTACHMENT 5**

**STATEMENT OF CASH FLOW**

**Ballad Health**  
**Statement of Cash Flows**  
**As of June 30, 2018 and June 30, 2017**

	Quarter 4 Jun 2018	Quarter 3 Mar 2018	Quarter 4 Jun 2017
<b><u>CASH FLOWS FROM OPERATING ACTIVITIES</u></b>			
Increase / (Decrease) in Unrestricted Net Assets	(8,794,729)	(15,407,947)	145,984,809
<b><u>Adjustments to Reconcile Increase in Net Assets to Net Cash Provided by Operating Activities</u></b>			
Provision for Depreciation	32,847,321	34,789,865	32,132,484
Provision for Amortization	507,730	492,302	631,277
Net Realized (Gain) / Loss on Sales of Securities	(4,170,918)	(2,532,597)	(4,644,608)
Net Loss on Early Extinguishment of Debt	24,382,188	0	184,211
Change in Estimated Fair Value of Derivatives	(8,385,715)	9,963,580	(8,470,061)
Equity in Net Income of Joint Ventures	(376,898)	(248,560)	(504,759)
(Gain) / Loss on Sale of Assets Held for Resale and Disposal of Assets	(27,794)	16,471	44,971
Net Amounts Received on Interest Rate Swap Settlements	(3,361,710)	(3,718,331)	163,485
Minority Interest in Consolidated Subsidiaries Income	6,822,305	2,601,478	4,440,476
Change in Net Unrealized Gains on Investments	(265,428)	7,258,754	(16,350,273)
Increase / (Decrease) in Cash due to Change in:			
Net Patient Accounts Receivable	4,014,192	(6,746,531)	(12,867,425)
Other Receivables (Net)	(4,632,580)	6,632,014	(5,651,144)
Inventories and Prepaid Expenses	5,510,758	2,342,842	(4,349,543)
Other Assets	(2,304,468)	2,616,000	(1,185,235)
Accrued Interest Payable (incl Capital Appreciation Bond Accretion)	(77,107)	(10,281,059)	8,937,664
Accounts Payable and Accrued Expenses	(8,775,910)	5,368,701	22,123,361
Accrued Salaries, Compensated Absences, and Amounts Withheld	(106,230)	20,635,826	8,455,507
Estimated Amounts due from/to Third Party Payors (Net)	(7,132,854)	4,265,725	2,127,839
Other Long-Term Liabilities	(5,161,119)	1,686,774	(9,911,809)
Professional Liability Self Insurance and Other	(11,059,296)	1,811,014	(17,748,459)
Total Adjustments	18,246,468	76,954,266	(2,442,040)
Net Cash Provided by Operating Activities	9,451,738	61,546,319	143,542,770
<b><u>CASH FLOWS FROM INVESTING ACTIVITIES</u></b>			
Purchases of Property, Plant, and Equipment, Property Held for Resale, and Property Held for Expansion (Net)	(43,263,562)	(24,436,831)	(86,196,313)
Additions to Goodwill	110,699	111,100	58,310
Purchases of Investments (Net)	(26,255,427)	22,983,316	(39,049,701)
Net Decrease / (Increase) in Assets Limited as to Use	1,068,382	3,076,986	(13,649,416)
Net Cash Used in Investing Activities	(68,339,908)	1,734,571	(138,837,120)
<b><u>CASH FLOWS FROM FINANCING ACTIVITIES</u></b>			
Payments on Long-Term Debt and Capital Lease Obligations (incl Deposits to Escrow)	2,507,990	(27,180,747)	(1,255,711)
Net Amounts Received on Interest Rate Swap Settlements	3,361,710	3,718,331	(163,485)
Net Cash Used in Financing Activities	5,869,700	(23,462,415)	(1,419,197)
<b><u>NET INCREASE / (DECREASE) IN CASH AND CASH EQUIVALENTS</u></b>	(53,018,470)	39,818,475	3,286,453
<b><u>CASH AND CASH EQUIVALENTS - BEG OF PERIOD</u></b>	139,862,177	100,043,702	162,697,203
<b><u>CASH AND CASH EQUIVALENTS - END OF PERIOD</u></b>	86,843,707	139,862,177	165,983,656

## ATTACHMENT 6

### YEAR-TO-DATE COMMUNITY BENEFIT SPENDING

- Progress toward distributing grants – Nothing to report at this time.
- Internal spending

Ballad Health TOC Exhibit G as of June 30, 2018  
 Internal Spending Report

990, line 7:	
a. Financial assistance (charity) (a)	35,991,088
b. Medicaid and TennCare	44,020,765
c. Other means-tested gov't programs (TennCare included in line 7b)	-
e. Community health improvements **	8,269,832
f. Health professions education:	
Medicare-approved programs (c)	
College/university students	
Total Health professions education	23,727,550
g. Subsidized health services	9,731,946
h. Research	208,694
i. Cash and in-kind contributions	<u>1,826,710</u>
<b>Total</b>	<b>140,991,307</b>

## ATTACHMENT 7

### QUALITY METRICS

- Ballad Health Public Reporting – 7a
- Tennessee Year-to-date – 7b
- Virginia Year-to-date – 7c
- Ballad Health Fiscal Year – 7d
- Ballad Health by Quarter – 7e
- Ballad Health by Month – 7f



	For Discharges Between	National Hospital Compare	FWCH 440184	JCMC 40063	HVMC 440017	IPMC 440176	NCH 490001	DCH 491303	HCMH 440032	LPH 490114	HCH 441313
<b>Target Quality Measures Rate</b>											
Pressure Ulcer Rate	Oct 1, 2015 - June 30, 2017	As Compared to National Benchmark	Same As National	Same As National	Worse Than National	Same As National	Same As National	Not Applicable	Same As National	Same As National	Not Applicable
Iatrogenic Pneumothorax Rate	Oct 1, 2015 - June 30, 2017	As Compared to National Benchmark	Same As National	Same As National	Same As National	Same As National	Same As National	Not Applicable	Same As National	Same As National	Not Applicable
Central Venous CatheterRelated Blood Stream Infection Rate	Oct 1, 2015 - June 30, 2017	As Compared to National Benchmark									
In-Hospital Fall With Hip Fracture Rate (previously Postoperative Hip Fracture Rate)	Oct 1, 2015 - June 30, 2017	As Compared to National Benchmark	Same As National	Same As National	Same As National	Same As National	Same As National	Not Applicable	Same As National	Same As National	Not Applicable
PSI 09 Perioperative Hemorrhage or Hematoma Rate	Oct 1, 2015 - June 30, 2017	As Compared to National Benchmark	Same As National	Same As National	Same As National	Same As National	Same As National	Not Applicable	Not Applicable	Same As National	Not Applicable
PSI 10 Postoperative Physiologic and Metabolic Derangement Rate	Oct 1, 2015 - June 30, 2017	As Compared to National Benchmark	Same As National	Same As National	Same As National	Same As National	Same As National	Not Applicable	Not Applicable	Same As National	Not Applicable
PSI 11 Postoperative Respiratory Failure Rate	Oct 1, 2015 - June 30, 2017	As Compared to National Benchmark	Same As National	Worse Than National	Same As National	Same As National	Same As National	Not Applicable	Not Applicable	Same As National	Not Applicable
PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	Oct 1, 2015 - June 30, 2017	As Compared to National Benchmark	Same As National	Same As National	Same As National	Same As National	Same As National	Not Applicable	Not Applicable	Same As National	Not Applicable
PSI 13 Postoperative Sepsis Rate	Oct 1, 2015 - June 30, 2017	As Compared to National Benchmark	Same As National	Same As National	Same As National	Same As National	Same As National	Not Applicable	Not Applicable	Same As National	Not Applicable
PSI 14 Postoperative Wound Dehiscence Rate	Oct 1, 2015 - June 30, 2017	As Compared to National Benchmark	Same As National	Same As National	Same As National	Same As National	Same As National	Not Applicable	Not Applicable	Same As National	Not Applicable
PSI 15 Accidental Puncture or Laceration Rate* (Measure modified)	Oct 1, 2015 - June 30, 2017	As Compared to National Benchmark	Same As National	Same As National	Same As National	Same As National	Same As National	Not Applicable	Not Applicable	Same As National	Not Applicable
CLABSI	Oct 1, 2016 - Sept 31, 2017	As Compared to National Benchmark	Not Applicable	Same As National	Coming Soon	Same As National	Same As National	Not Applicable	Not Applicable	Not Applicable	Not Applicable
CAUTI	Oct 1, 2016 - Sept 31, 2017	As Compared to National Benchmark	Same As National	Same As National	Coming Soon	Same As National	Same As National	Not Applicable	Not Applicable	Same As National	Not Applicable
SSI COLON Surgical Site Infection	Oct 1, 2016 - Sept 31, 2017	As Compared to National Benchmark	Same As National	Same As National	Coming Soon	Same As National	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable
SSI HYST Surgical Site Infection	Oct 1, 2016 - Sept 31, 2017	As Compared to National Benchmark	Same As National	Not Applicable	Coming Soon	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable
MRSA	Oct 1, 2016 - Sept 31, 2017	As Compared to National Benchmark	Same As National	Same As National	Coming Soon	Same As National	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable
CDIFF	Oct 1, 2016 - Sept 31, 2017	As Compared to National Benchmark	Same As National	Better Than National	Coming Soon	Worse Than National	Same As National	Not Applicable	Same As National	Same As National	Not Applicable
<b>General Information-Structural Measures</b>											
SMPART NURSE Nursing Care Registry	Jan 1, 2016 - Dec 31, 2016	Survey Question	Yes	Yes	Coming Soon	Yes	No	No	No	No	Not Applicable
SMPART GENSURG General Surgery Registry	Jan 1, 2016 - Dec 31, 2016	Survey Question	Yes	Yes	Coming Soon	Yes	Yes	No* (not applicable)	No	No	Not Applicable



	For Discharges Between	National Hospital Compare	BRMC 440012	JMH 490053	SCCH 490038	RCMC 490002	SSH 440018	UCMH 440001	JCCH 441304	LMH 440025	Takoma 440050
<b>Target Quality Measures Rate</b>											
Pressure Ulcer Rate	Oct 1, 2015 - June 30, 2017	As Compared to National Benchmark	Worse Than National	Same As National	Same As National	Same As National	Same As National	Same As National	Not Applicable	Same As National	Same As National
Iatrogenic Pneumothorax Rate	Oct 1, 2015 - June 30, 2017	As Compared to National Benchmark	Same As National	Same As National	Same As National	Same As National	Same As National	Same As National	Not Applicable	Same As National	Same As National
Central Venous CatheterRelated Blood Stream Infection Rate	Oct 1, 2015 - June 30, 2017	As Compared to National Benchmark									
In-Hospital Fall With Hip Fracture Rate (previously Postoperative Hip Fracture Rate)	Oct 1, 2015 - June 30, 2017	As Compared to National Benchmark	Same As National	Same As National	Same As National	Same As National	Same As National	Same As National	Not Applicable	Same As National	Same As National
PSI 09 Perioperative Hemorrhage or Hematoma Rate	Oct 1, 2015 - June 30, 2017	As Compared to National Benchmark	Same As National	Same As National	Same As National	Not Applicable	Same As National	Not Applicable	Not Applicable	Same As National	Same As National
PSI 10 Postoperative Physiologic and Metabolic Derangement Rate	Oct 1, 2015 - June 30, 2017	As Compared to National Benchmark	Same As National	Same As National	Same As National	Not Applicable	Same As National	Not Applicable	Not Applicable	Same As National	Same As National
PSI 11 Postoperative Respiratory Failure Rate	Oct 1, 2015 - June 30, 2017	As Compared to National Benchmark	Worse Than National	Same As National	Same As National	Not Applicable	Same As National	Not Applicable	Not Applicable	Same As National	Same As National
PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	Oct 1, 2015 - June 30, 2017	As Compared to National Benchmark	Same As National	Same As National	Same As National	Same As National	Same As National	Not Applicable	Not Applicable	Same As National	Same As National
PSI 13 Postoperative Sepsis Rate	Oct 1, 2015 - June 30, 2017	As Compared to National Benchmark	Same As National	Same As National	Same As National	Not Applicable	Same As National	Not Applicable	Not Applicable	Same As National	Same As National
PSI 14 Postoperative Wound Dehiscence Rate	Oct 1, 2015 - June 30, 2017	As Compared to National Benchmark	Same As National	Same As National	Not Applicable	Not Applicable	Same As National	Not Applicable	Not Applicable	Same As National	Same As National
PSI 15 Accidental Puncture or Laceration Rate* (Measure modified)	Oct 1, 2015 - June 30, 2017	As Compared to National Benchmark	Same As National	Same As National	Same As National	Same As National	Same As National	Not Applicable	Not Applicable	Same As National	Same As National
CLABSI	Oct 1, 2016 - Sept 31, 2017	As Compared to National Benchmark	Coming Soon	Same As National	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Coming Soon
CAUTI	Oct 1, 2016 - Sept 31, 2017	As Compared to National Benchmark	Coming Soon	Same As National	Not Applicable	Not Applicable	Same As National	Not Applicable	Not Applicable	Same As National	Coming Soon
SSI COLON Surgical Site Infection	Oct 1, 2016 - Sept 31, 2017	As Compared to National Benchmark	Coming Soon	Same As National	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Same As National	Coming Soon
SSI HYST Surgical Site Infection	Oct 1, 2016 - Sept 31, 2017	As Compared to National Benchmark	Coming Soon	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Coming Soon
MRSA	Oct 1, 2016 - Sept 31, 2017	As Compared to National Benchmark	Coming Soon	Same As National	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Coming Soon
CDIFF	Oct 1, 2016 - Sept 31, 2017	As Compared to National Benchmark	Coming Soon	Same As National	Same As National	Same As National	Same As National	Not Applicable	Not Applicable	Same As National	Coming Soon
<b>General Information-Structural Measures</b>											
SMPART NURSE Nursing Care Registry	Jan 1, 2016 - Dec 31, 2016	Survey Question	Coming Soon	No	No	No	Yes	No	Not Applicable	Yes	No
SMPART GENSURG General Surgery Registry	Jan 1, 2016 - Dec 31, 2016	Survey Question	Coming Soon	Yes	Yes	No* (not applicable)	Yes	No* (not applicable)	Not Applicable	No	No

	For Discharges Between	National Hospital Compare	FWCH 440184	JCMC 40063	HVMC 440017	IPMC 440176	NCH 490001	DCH 491303	HCMH 440032	LPH 490114	HCH 441313
OP12 HIT Ability electronically receive lab results	Jan 1, 2016 - Dec 31, 2016	Survey Question	Yes	Yes	Coming Soon	Yes	Yes	Not Applicable	No	Coming Soon	Coming Soon
OP17 Tracking Clinical Results Between Visits	Jan 1, 2016 - Dec 31, 2016	Survey Question	Yes	Yes	Coming Soon	Yes	Yes	Not Applicable	Yes	Coming Soon	Coming Soon
OP25 Outpatient Safe Surgery Checklist	Jan 1, 2016 - Dec 31, 2016	Survey Question	Yes	Yes	Coming Soon	Yes	Yes	Not Applicable	Yes	Coming Soon	Coming Soon
SMSSCHECK Safe Surgery Checklist	Jan 1, 2016 - Dec 31, 2016	Survey Question	Yes	Yes	Coming Soon	Yes	Yes	Yes	Yes	Yes	Not Applicable
<b>Survey of Patient's Experiences - Hospital Consumer Assessment of Healthcare Providers and Systems Survey (HCAHPS) %</b>											
<b>HCOMP1A P Patients who reported that their nurses "Always" communicated well</b>	<b>Oct 1, 2016 - Sept 31, 2017</b>	<b>80</b>	<b>83</b>	<b>80</b>	Coming Soon	<b>79</b>	<b>84</b>	Not Applicable	<b>83</b>	<b>82</b>	Not Applicable
<b>Category Star Rating</b>			★★★★	★★★		★★★★	★★★★		★★★★	★★★★	
HCOMP1U P Patients who reported that their nurses "Usually" communicated well	Oct 1, 2016 - Sept 31, 2017	16	14	15		17	12	Not Applicable	13	12	Not Applicable
HCOMP1 SNP Patients who reported that their nurses "Sometimes" or "Never" communicated well	Oct 1, 2016 - Sept 31, 2017	4	3	5		4	4	Not Applicable	4	6	Not Applicable
<b>HCOMP2A P Patients who reported that their doctors "Always" communicated well</b>	<b>Oct 1, 2016 - Sept 31, 2017</b>	<b>82</b>	<b>82</b>	<b>77</b>	Coming Soon	<b>83</b>	<b>84</b>	Not Applicable	<b>85</b>	<b>83</b>	Not Applicable
<b>Category Star Rating</b>			★★★	★★★		★★★★	★★★★		★★★★	★★★	
HCOMP2U P Patients who reported that their doctors "Usually" communicated well	Oct 1, 2016 - Sept 31, 2017	14	14	16		14	12	Not Applicable	10	13	Not Applicable
HCOMP2 SNP Patients who reported that their doctors "Sometimes" or "Never" communicated well	Oct 1, 2016 - Sept 31, 2017	4	4	7		3	4	Not Applicable	5	4	Not Applicable
<b>HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted</b>	<b>Oct 1, 2016 - Sept 31, 2017</b>	<b>70</b>	<b>70</b>	<b>68</b>	Coming Soon	<b>63</b>	<b>72</b>	Not Applicable	<b>81</b>	<b>77</b>	Not Applicable
<b>Category Star Rating</b>			★★★★	★★★		★★★	★★★★		★★★★★	★★★★	
HCOMP3U P Patients who reported that they "Usually" received help as soon as they wanted	Oct 1, 2016 - Sept 31, 2017	22	24	22		27	202	Not Applicable	14	17	Not Applicable
HCOMP3 SNP Patients who reported that they "Sometimes" or "Never" received help as soon as they wanted	Oct 1, 2016 - Sept 31, 2017	8	6	10		10	8	Not Applicable	5	6	Not Applicable
HCOMP4A P Patients who reported that their pain was "Always" well controlled	Oct 1, 2016 - Sept 31, 2017										
HCOMP4U P Patients who reported that their pain was "Usually" well controlled	Oct 1, 2016 - Sept 31, 2017										
HCOMP4 SNP Patients who reported that their pain was "Sometimes" or "Never" well controlled	Oct 1, 2016 - Sept 31, 2017										
<b>HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them</b>	<b>Oct 1, 2016 - Sept 31, 2017</b>	<b>66</b>	<b>70</b>	<b>70</b>	Coming Soon	<b>63</b>	<b>67</b>	Not Applicable	<b>72</b>	<b>72</b>	Not Applicable
<b>Category Star Rating</b>			★★★★	★★★		★★★	★★★		★★★★	★★★★	
HCOMP5U P Patients who reported that staff "Usually" explained about medicines before giving it to them	Oct 1, 2016 - Sept 31, 2017	17	15	12		19	16	Not Applicable	13	16	Not Applicable

	For Discharges Between	National Hospital Compare	BRMC 440012	JMH 490053	SCCH 490038	RCMC 490002	SSH 440018	UCMH 440001	JCCH 441304	LMH 440025	Takoma 440050
OP12 HIT Ability electronically receive lab results	Jan 1, 2016 - Dec 31, 2016	Survey Question	Coming Soon	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Coming Soon
OP17 Tracking Clinical Results Between Visits	Jan 1, 2016 - Dec 31, 2016	Survey Question	Coming Soon	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Coming Soon
OP25 Outpatient Safe Surgery Checklist	Jan 1, 2016 - Dec 31, 2016	Survey Question	Coming Soon	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
SMSSCHECK Safe Surgery Checklist	Jan 1, 2016 - Dec 31, 2016	Survey Question	Coming Soon	Yes	Yes	Yes	Yes	Yes	Not Applicable	Yes	Yes
<b>Survey of Patient's Experiences - Hospital Consumer Assessment of Healthcare Providers and Systems Su</b>											
HCOMP1A P Patients who reported that their nurses "Always" communicated well	Oct 1, 2016 - Sept 31, 2017	80	Coming Soon	76	86	88	82	87	Not Applicable	78	Coming Soon
Category Star Rating				★★★	★★★★★	★★★★★	★★★★★	too few srnys		★★★	
HCOMP1U P Patients who reported that their nurses "Usually" communicated well	Oct 1, 2016 - Sept 31, 2017	16		18	13	8	14	9	Not Applicable	17	
HCOMP1 SNP Patients who reported that their nurses "Sometimes" or "Never" communicated well	Oct 1, 2016 - Sept 31, 2017	4		6	1	4	4	4	Not Applicable	5	
HCOMP2A P Patients who reported that their doctors "Always" communicated well	Oct 1, 2016 - Sept 31, 2017	82	Coming Soon	77	87	93	83	90	Not Applicable	84	Coming Soon
Category Star Rating				★★★	★★★★★	★★★★★	★★★★★	too few srnys		★★★★★	
HCOMP2U P Patients who reported that their doctors "Usually" communicated well	Oct 1, 2016 - Sept 31, 2017	14		17	10	6	12	5	Not Applicable	12	
HCOMP2 SNP Patients who reported that their doctors "Sometimes" or "Never" communicated well	Oct 1, 2016 - Sept 31, 2017	4		6	3	1	5	5	Not Applicable	4	
HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	Oct 1, 2016 - Sept 31, 2017	70	Coming Soon	57	78	74	74	76	Not Applicable	72	Coming Soon
Category Star Rating				★★	★★★★★	★★★★★	★★★★★	too few srnys		★★★★★	
HCOMP3U P Patients who reported that they "Usually" received help as soon as they wanted	Oct 1, 2016 - Sept 31, 2017	22		29	18	21	18	15	Not Applicable	22	
HCOMP3 SNP Patients who reported that they "Sometimes" or "Never" received help as soon as they wanted	Oct 1, 2016 - Sept 31, 2017	8		14	4	5	8	9	Not Applicable	6	
HCOMP4A P Patients who reported that their pain was "Always" well controlled	Oct 1, 2016 - Sept 31, 2017										
HCOMP4U P Patients who reported that their pain was "Usually" well controlled	Oct 1, 2016 - Sept 31, 2017										
HCOMP4 SNP Patients who reported that their pain was "Sometimes" or "Never" well controlled	Oct 1, 2016 - Sept 31, 2017										
HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them	Oct 1, 2016 - Sept 31, 2017	66	Coming Soon	60	69	63	66	78	Not Applicable	63	Coming Soon
Category Star Rating				★★	★★★★★	★★★	★★★	too few srnys		★★★	
HCOMP5U P Patients who reported that staff "Usually" explained about medicines before giving it to them	Oct 1, 2016 - Sept 31, 2017	17		18	18	15	15	9	Not Applicable	22	

	For Discharges Between	National Hospital Compare	FWCH 440184	JCMC 40063	HVMC 440017	IPMC 440176	NCH 490001	DCH 491303	HCMH 440032	LPH 490114	HCH 441313
HCOMP5 SNP Patients who reported that staff "Sometimes" or "Never" explained about medicines before giving it to them	Oct 1, 2016 - Sept 31, 2017	17	15	18		18	17	Not Applicable	15	12	Not Applicable
HCLEAN HSPAP Patients who reported that their room and bathroom were "Always" clean	Oct 1, 2016 - Sept 31, 2017	75	82	64	Coming Soon	78	71	Not Applicable	81	79	Not Applicable
Category Star Rating			★★★★	★★		★★★★	★★★		4	★★★	
HCLEAN HSPUP Patients who reported that their room and bathroom were "Usually" clean	Oct 1, 2016 - Sept 31, 2017	17	14	22		17	21	Not Applicable	51	13	Not Applicable
HCLEAN HPSNP Patients who reported that their room and bathroom were "Sometimes" or "Never" clean	Oct 1, 2016 - Sept 31, 2017	8	4	14		5	8	Not Applicable	4	8	Not Applicable
HQUIETHSP AP Patients who reported that the area around their room was "Always" quiet at night	Oct 1, 2016 - Sept 31, 2017	62	72	55	Coming Soon	62	58	Not Applicable	73	69	Not Applicable
Category Star Rating			★★★★	★★		★★★	★★★		4	★★★★	
HQUIETHSP UP Patients who reported that the area around their room was "Usually" quiet at night	Oct 1, 2016 - Sept 31, 2017	29	24	31		30	33	Not Applicable	22	24	Not Applicable
HQUIETHSP SNP Patients who reported that the area around their room was "Sometimes" or "Never" quiet at night	Oct 1, 2016 - Sept 31, 2017	9	4	14		8	9	Not Applicable	5	7	Not Applicable
HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	Oct 1, 2016 - Sept 31, 2017	87	87	86	Coming Soon	88	85	Not Applicable	91	87	Not Applicable
Category Star Rating			★★★	★★★		★★★	★★★		★★★★	★★★	
HCOMP6N P Patients who reported that NO, they were not given information about what to do during their recovery at home	Oct 1, 2016 - Sept 31, 2017	13	13	14		12	15	Not Applicable	9	13	Not Applicable
HCOMP7SA Patients who "Strongly Agree" they understood their care when they left the hospital	Oct 1, 2016 - Sept 31, 2017	53	61	51	Coming Soon	54	55	Not Applicable	55	52	Not Applicable
Category Star Rating			★★★★	★★★		★★★★	★★★		★★★★	★★★	
HCOMP7A Patients who "Agree" they understood their care when they left the hospital	Oct 1, 2016 - Sept 31, 2017	42	34	43		42	39	Not Applicable	40	43	Not Applicable
HCOMP7D SD Patients who "Disagree" or "Strongly Disagree" they understood their care when they left the hospital	Oct 1, 2016 - Sept 31, 2017	5	5	6		4	6	Not Applicable	5	5	Not Applicable
HHSP RATING06 Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)	Oct 1, 2016 - Sept 31, 2017	73	82	67	Coming Soon	74	73	Not Applicable	84	73	Not Applicable
Category Star Rating			★★★★★	★★		★★★	★★★		★★★★	★★★	
HHSP RATING78 Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)	Oct 1, 2016 - Sept 31, 2017	20	13	21		19	17	Not Applicable	9	18	Not Applicable
HHSP RATING910 Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	Oct 1, 2016 - Sept 31, 2017	7	5	12		7	10	Not Applicable	7	9	Not Applicable

	For Discharges Between	National Hospital Compare	BRMC 440012	JMH 490053	SCCH 490038	RCMC 490002	SSH 440018	UCMH 440001	JCCH 441304	LMH 440025	Takoma 440050
HCOMP5 SNP Patients who reported that staff "Sometimes" or "Never" explained about medicines before giving it to them	Oct 1, 2016 - Sept 31, 2017	17		22	13	22	19	13	Not Applicable	15	
HCLEAN HSPAP Patients who reported that their room and bathroom were "Always" clean	Oct 1, 2016 - Sept 31, 2017	75	Coming Soon	69	85	82	81	83	Not Applicable	67	Coming Soon
Category Star Rating				★★	★★★★★	★★★★★	★★★★★	too few snys		★★	
HCLEAN HSPUP Patients who reported that their room and bathroom were "Usually" clean	Oct 1, 2016 - Sept 31, 2017	17		20	12	14	14	14	Not Applicable	21	
HCLEAN HSPSNP Patients who reported that their room and bathroom were "Sometimes" or "Never" clean	Oct 1, 2016 - Sept 31, 2017	8		11	3	4	5	3	Not Applicable	12	
HQUIETHSP AP Patients who reported that the area around their room was "Always" quiet at night	Oct 1, 2016 - Sept 31, 2017	62	Coming Soon	59	70	65	68	72	Not Applicable	58	Coming Soon
Category Star Rating				★★★	★★★★★	★★★★★	★★★★★	too few snys		★★★	
HQUIETHSP UP Patients who reported that the area around their room was "Usually" quiet at night	Oct 1, 2016 - Sept 31, 2017	29		31	26	31	27	25	Not Applicable	34	
HQUIETHSP SNP Patients who reported that the area around their room was "Sometimes" or "Never" quiet at night	Oct 1, 2016 - Sept 31, 2017	9		10	4	4	5	3	Not Applicable	8	
HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	Oct 1, 2016 - Sept 31, 2017	87	Coming Soon	85	91	85	87	89	Not Applicable	87	Coming Soon
Category Star Rating				★★★	★★★★★	★★★	★★★	too few snys		★★★	
HCOMP6N P Patients who reported that NO, they were not given information about what to do during their recovery at home	Oct 1, 2016 - Sept 31, 2017	13		15	9	15	13	11	Not Applicable	13	
HCOMP7SA Patients who "Strongly Agree" they understood their care when they left the hospital	Oct 1, 2016 - Sept 31, 2017	53	Coming Soon	47	55	55	53	56	Not Applicable	49	Coming Soon
Category Star Rating				★★	★★★★★	★★★★★	★★★	too few surveys		★★★	
HCOMP7A Patients who "Agree" they understood their care when they left the hospital	Oct 1, 2016 - Sept 31, 2017	42		46	41	42	42	39	Not Applicable	46	
HCOMP7D SD Patients who "Disagree" or "Strongly Disagree" they understood their care when they left the hospital	Oct 1, 2016 - Sept 31, 2017	5		7	4	3	5	5	Not Applicable	5	
HHSP RATING06 Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)	Oct 1, 2016 - Sept 31, 2017	73	Coming Soon	68	76	75	76	70	Not Applicable	73	Coming Soon
Category Star Rating				★★	★★★★★	★★★★★	★★★★★	too few snys		★★★★★	
HHSP RATING78 Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)	Oct 1, 2016 - Sept 31, 2017	20		20	19	19	17	20	Not Applicable	20	
HHSP RATING910 Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	Oct 1, 2016 - Sept 31, 2017	7		12	5	6	7	10	Not Applicable	7	

	For Discharges Between	National Hospital Compare	FWCH 440184	JCMC 40063	HVMC 440017	IPMC 440176	NCH 490001	DCH 491303	HCMH 440032	LPH 490114	HCH 441313
HRECMND DY Patients who reported YES, they would definitely recommend the hospital	Oct 1, 2016 - Sept 31, 2017	72	85	67	Coming Soon	77	72	Not Applicable	75	71	Not Applicable
Category Star Rating			★★★★	★★★		★★★★	★★★		★★★	★★★	
HRECMND PY Patients who reported YES, they would probably recommend the hospital	Oct 1, 2016 - Sept 31, 2017	23	12	26		18	22	Not Applicable	19	24	Not Applicable
HRECMND DN Patients who reported NO, they would probably not or definitely not recommend the hospital	Oct 1, 2016 - Sept 31, 2017	5	3	7		5	6	Not Applicable	6	5	Not Applicable
<b>Timely &amp; Effective care Cataract Surgery Outcome %</b>											
OP31 Cataracts Improvement	Jan 1, 2017 - Dec 31, 2017	Optional									
<b>Timely &amp; Effective care Colonoscopy follow-up %</b>											
OP29 Avg Risk Polyp Surveillance	Jan 1, 2017 - Dec 31, 2017	85%	31%	64%	89%	93%	11%		100%	Coming Soon	
OP30 High risk Polyp Surveillance	Jan 1, 2017 - Dec 31, 2017	90%	33%	87%	64%	82%	100%		80%	Coming Soon	
<b>Timely &amp; Effective Care Heart Attack</b>											
OP2 Fibrinolytic Therapy 30 minutes	Oct 1, 2016 - Sept 31, 2017	59%	N/A (Too Few To Rpt)		N/A (Too Few To Rpt)	Coming Soon	Coming Soon				
OP3b Median Time to Transfer AMI (Minutes)	Oct 1, 2016 - Sept 31, 2017	57	N/A (Too Few To Rpt)		N/A (Too Few To Rpt)	Coming Soon	Coming Soon				
OP4 Aspirin at Arrival AMI Chest Pain	Oct 1, 2016 - Sept 31, 2017	95%	96%	N/A (Too Few To Rpt)	N/A (Too Few To Rpt)	88%	97%		98%	Coming Soon	Coming Soon
OP5 Median Time to ECG AMI and Chest Pain (Minutes)	Oct 1, 2016 - Sept 31, 2017	7	8	N/A (Too Few To Rpt)	N/A (Too Few To Rpt)	10	10		10	Coming Soon	Coming Soon
<b>Timely &amp; Effective Care Stroke Care %</b>											
STK4 Thrombolytic Therapy											
<b>Timely &amp; Effective Care- Emergency Department (ED) Throughput</b>											
EDV Emergency Department Volume Category	Oct 1, 2016 - Sept 31, 2017	Not Applicable	Medium	Very High	Very High	Medium	Medium	Low	Low	Medium	Coming Soon
ED1b ED Door to Transport (Minutes)	Oct 1, 2016 - Sept 31, 2017	All Categories = 253 Low Vol = 197 Medium Vol = 228 High Vol = 268 Very High Vol = 315	240	254	392*	212	227	165	199	234	Coming Soon
ED2b ED Decision to Transport (Minutes)	Oct 1, 2016 - Sept 31, 2017	All Categories = 81 Low Vol = 55 Medium Vol = 70 High Vol = 91 Very High Vol = 124	75	82	143*	68	66	12	41	53	Coming Soon
OP18b Avg time ED arrival to discharge (Minutes)	Oct 1, 2016 - Sept 31, 2017	All Categories = 133 Low Vol = 114 Medium Vol = 137 High Vol = 160 Very High Vol = 158	145	139	164	112	142		90	Coming Soon	Coming Soon

	For Discharges Between	National Hospital Compare	BRMC 440012	JMH 490053	SCCH 490038	RCMC 490002	SSH 440018	UCMH 440001	JCCH 441304	LMH 440025	Takoma 440050
HRECMND DY Patients who reported YES, they would definitely recommend the hospital	Oct 1, 2016 - Sept 31, 2017	72	Coming Soon	63	68	69	77	73	Not Applicable	74	Coming Soon
Category Star Rating				★★	★★★	★★★	★★★★	too few snys		★★★★	
HRECMND PY Patients who reported YES, they would probably recommend the hospital	Oct 1, 2016 - Sept 31, 2017	23		30	30	28	18	19	Not Applicable	23	
HRECMND DN Patients who reported NO, they would probably not or definitely not recommend the hospital	Oct 1, 2016 - Sept 31, 2017	5		7	2	3	5	8	Not Applicable	3	
<b>Timely &amp; Effective care Cataract Surgery Outcome %</b>											
OP31 Cataracts Improvement	Jan 1, 2017 - Dec 31, 2017	Optional									
<b>Timely &amp; Effective care Colonoscopy follow-up %</b>											
OP29 Avg Risk Polyp Surveillance	Jan 1, 2017 - Dec 31, 2017	85%	76%	100%	100%	16%	100%	N/A (Too Few To Rpt)		94%	88%
OP30 High risk Polyp Surveillance	Jan 1, 2017 - Dec 31, 2017	90%	52%	100%	100%	82%	88%	N/A (Too Few To Rpt)		95%	84%
<b>Timely &amp; Effective Care Heart Attack</b>											
OP2 Fibrinolytic Therapy 30 minutes	Oct 1, 2016 - Sept 31, 2017	59%	N/A (Too Few To Rpt)								
OP3b Median Time to Transfer AMI (Minutes)	Oct 1, 2016 - Sept 31, 2017	57	N/A (Too Few To Rpt)	44	75						
OP4 Aspirin at Arrival AMI Chest Pain	Oct 1, 2016 - Sept 31, 2017	95%	N/A (Too Few To Rpt)	100%	100%	97%	97%	96%	100%	100%	100%
OP5 Median Time to ECG AMI and Chest Pain (Minutes)	Oct 1, 2016 - Sept 31, 2017	7	N/A (Too Few To Rpt)	2	4	6	6	8	7	7	10
<b>Timely &amp; Effective Care Stroke Care %</b>											
STK4 Thrombolytic Therapy											
<b>Timely &amp; Effective Care- Emergency Department (ED) Throughput</b>											
EDV Emergency Department Volume Category	Oct 1, 2016 - Sept 31, 2017	Not Applicable	High	High	Low	Low	Medium	Low	Low	Medium	Coming Soon
ED1b ED Door to Transport (Minutes)	Oct 1, 2016 - Sept 31, 2017	All Categories = 253 Low Vol = 197 Medium Vol = 228 High Vol = 268 Very High Vol = 315	293*	274	174	159	201	203		196	228
ED2b ED Decision to Transport (Minutes)	Oct 1, 2016 - Sept 31, 2017	All Categories = 81 Low Vol = 55 Medium Vol = 70 High Vol = 91 Very High Vol = 124	91*	99	44	40	70	48		58	46
OP18b Avg time ED arrival to discharge (Minutes)	Oct 1, 2016 - Sept 31, 2017	All Categories = 133 Low Vol = 114 Medium Vol = 137 High Vol = 160 Very High Vol = 158	156	142	91	83	112	116	75	106	140

		For Discharges Between	National Hospital Compare	FWCH 440184	JCMC 40063	HVMC 440017	IPMC 440176	NCH 490001	DCH 491303	HCMH 440032	LPH 490114	HCH 441313
OP20 Door to Diagnostic Evaluation (Minutes)	Oct 1, 2016 - Sept 31, 2017	All Categories = 16 Low Vol = 20 Medium Vol = 22 High Vol = 14 Very High Vol = 24		12	13	41	14	12		15	Coming Soon	Coming Soon
OP21 Time to pain medication for long bone fractures (Minutes)	Oct 1, 2016 - Sept 31, 2017	48	42	36	67	48	59			39	Coming Soon	Coming Soon
OP22 Left without being seen	Oct 1, 2016 - Sept 31, 2017	2%	1%	1%	1%	1%	1%			1%	Coming Soon	Coming Soon
OP23 Head CT stroke patients	Oct 1, 2016 - Sept 31, 2017	73%	N/A (Too Few To Rpt)	N/A (Too Few To Rpt)	91%	N/A (Too Few To Rpt)	N/A (Too Few To Rpt)			N/A (Too Few To Rpt)	Coming Soon	Coming Soon
<b>Timely &amp; Effective Care Preventive Care %</b>												
IMM2 Immunization for Influenza	Oct 1, 2016 - Sept 31, 2017	93%	99%	97%	97%*	100%	99%	100%	99%	99%	99%	Coming Soon
IMM3OP27 FACADHPCT HCW Influenza Vaccination	Oct 1, 2016 - Sept 31, 2017	88%	99%	98%	96%*	97%	97%	100%	99%	99%	Coming Soon	Coming Soon
<b>Timely &amp; Effective Care Blood Clot Prevention &amp; Treatment %</b>												
VTE5 Warfarin Therapy at Discharge												
VTE6 HAC VTE	Oct 1, 2016 - Sept 31, 2017	2.0%	20.0%	2.0%	0%*	N/A (Too Few To Rpt)	N/A (Too Few To Rpt)			N/A (Too Few To Rpt)	N/A (Too Few To Rpt)	Coming Soon
<b>Timely &amp; Effective Care Pregnancy &amp; delivery care %</b>												
PC01 Elective Delivery	Oct 1, 2016 - Sept 31, 2017	2.0%	0.0%	0.0%	5%*	0.0%	11.0%	Not Applicable	Not Applicable	0.0%	0.0%	Coming Soon
<b>Complications - Surgical Complications Rate</b>												
Hip and Knee Complications	Apr 2, 2014 - Mar 31, 2017	As Compared to National Benchmark	Not Applicable	Same As National	Same As National	Same As National	Same As National	Same As National	Not Applicable	Not Applicable	Not Applicable	Coming Soon
PSI90 Complications / patient safety for selected indicators	Oct 1, 2015 - June 30, 2017	As Compared to National Benchmark	Same As National	Same As National	Same As National	Same As National	Same As National	Same As National	Not Applicable	Same As National	Same As National	Coming Soon
PSI4SURG COMP Death rate among surgical patients with serious treatable complications	Oct 1, 2015 - June 30, 2017	As Compared to National Benchmark	Same As National	Same As National	Same As National	Same As National	Same As National	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Coming Soon
<b>Readmissions &amp; deaths 30 day rates of readmission %</b>												
READM30 COPD Chronic obstructive pulmonary disease 30day readmission rate	July 2014 - June 2017	As Compared to National Benchmark	Same As National	Same As National	Same As National	Same As National	Same As National	Same As National	Not Applicable	Same As National	Same As National	Not Applicable
READM30 AMI Acute myocardial infarction (AMI) 30day readmission rate	July 2014 - June 2017	As Compared to National Benchmark	Not Applicable	Same As National	Same As National	Same As National	Same As National	Not Applicable	Not Applicable	Not Applicable	Same As National	Not Applicable
READM30HF Heart Failure 30Day readmissions rate	July 2014 - June 2017	As Compared to National Benchmark	Same As National	Same As National	Same As National	Same As National	Same As National	Same As National	Not Applicable	Same As National	Same As National	Not Applicable
READM30PN Pneumonia 30day readmission rate	July 2014 - June 2017	As Compared to National Benchmark	Same As National	Same As National	Same As National	Same As National	Same As National	Same As National	Not Applicable	Same As National	Same As National	Not Applicable

	For Discharges Between	National Hospital Compare	BRMC 440012	JMH 490053	SCCH 490038	RCMC 490002	SSH 440018	UCMH 440001	JCCH 441304	LMH 440025	Takoma 440050
OP20 Door to Diagnostic Evaluation (Minutes)	Oct 1, 2016 - Sept 31, 2017	All Categories = 16 Low Vol = 20 Medium Vol = 22 High Vol = 14 Very High Vol = 24	26	10	8	6	9	10	4	18	22
OP21 Time to pain medication for long bone fractures (Minutes)	Oct 1, 2016 - Sept 31, 2017	48	58	26	21	20	37	33	26	56	78
OP22 Left without being seen	Oct 1, 2016 - Sept 31, 2017	2%	2%	0%	0%	0%	1%	1%	1%	1%	2%
OP23 Head CT stroke patients	Oct 1, 2016 - Sept 31, 2017	73%	100%	54%	N/A (Too Few To Rpt)	N/A (Too Few To Rpt)	50%	N/A (Too Few To Rpt)	N/A (Too Few To Rpt)	100%	N/A (Too Few To Rpt)
<b>Timely &amp; Effective Care Preventive Care %</b>											
IMM2 Immunization for Influenza	Oct 1, 2016 - Sept 31, 2017	93%	98%*	99%	100%	100%	99%	84%		100%	94%
IMM3OP27 FACADHPCT HCW Influenza Vaccination	Oct 1, 2016 - Sept 31, 2017	88%	99%*	99%	98%	98%	99%	98%		97%	93%
<b>Timely &amp; Effective Care Blood Clot Prevention &amp; Treatment %</b>											
VTE5 Warfarin Therapy at Discharge											
VTE6 HAC VTE	Oct 1, 2016 - Sept 31, 2017	2.0%	0%*	N/A (Too Few To Rpt)		N/A (Too Few To Rpt)	N/A (Too Few To Rpt)	N/A (Too Few To Rpt)		N/A (Too Few To Rpt)	N/A (Too Few To Rpt)
<b>Timely &amp; Effective Care Pregnancy &amp; delivery care %</b>											
PC01 Elective Delivery	Oct 1, 2016 - Sept 31, 2017	2.0%	0%*	0.0%	Not Applicable	Not Applicable	Not Applicable	Not Applicable		0.0%	0.0%
<b>Complications - Surgical Complications Rate</b>											
Hip and Knee Complications	Apr 2, 2014 - Mar 31, 2017	As Compared to National Benchmark	Same As National	Same As National	Same As National	Not Applicable	Same As National	Not Applicable	Not Applicable	Same As National	Same As National
PSI90 Complications / patient safety for selected indicators	Oct 1, 2015 - June 30, 2017	As Compared to National Benchmark	Worse Than National	Same As National	Not Applicable	Same As National	Same As National				
PSI4SURG COMP Death rate among surgical patients with serious treatable complications	Oct 1, 2015 - June 30, 2017	As Compared to National Benchmark	Same As National	Same As National	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Same As National	Not Applicable
<b>Readmissions &amp; deaths 30 day rates of readmission %</b>											
READM30 COPD Chronic obstructive pulmonary disease 30day readmission rate	July 2014 - June 2017	As Compared to National Benchmark	Same As National	Same As National	Same As National	Same As National	Same As National	Same As National	Not Applicable	Same As National	Same As National
READM30 AMI Acute myocardial infarction (AMI) 30day readmission rate	July 2014 - June 2017	As Compared to National Benchmark	Same As National	Same As National	Not Applicable	Not Applicable	Same As National	Not Applicable	Not Applicable	Same As National	Not Applicable
READM30HF Heart Failure 30Day readmissions rate	July 2014 - June 2017	As Compared to National Benchmark	Same As National	Worse Than National	Same As National	Same As National	Same As National	Same As National	Not Applicable	Same As National	Same As National
READM30PN Pneumonia 30day readmission rate	July 2014 - June 2017	As Compared to National Benchmark	Same As National	Worse Than National	Same As National	Same As National	Same As National	Same As National	Not Applicable	Same As National	Same As National

	For Discharges Between	National Hospital Compare	FWCH 440184	JCMC 40063	HVMC 440017	IPMC 440176	NCH 490001	DCH 491303	HCMH 440032	LPH 490114	HCH 441313
READM30 STK Stroke 30day readmission rate	July 2014 - June 2017	As Compared to National Benchmark	Not Applicable	Same As National	Same As National	Same As National	Same As National	Not Applicable	Not Applicable	Not Applicable	Not Applicable
READM30 CABG Coronary artery bypass graft (CABG) surgery 30day readmission rate2	July 2014 - June 2017	As Compared to National Benchmark	Not Applicable	Same As National	Same As National	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable
READM30 HIPKNEE 30day readmission rate following elective THA / TKA	July 2014 - June 2017	As Compared to National Benchmark	Not Applicable	Same As National	Same As National	Same As National	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable
READM30 HOSPWIDE 30day hospitalwide allcause unplanned readmission	July 1, 2016 - June 2017	As Compared to National Benchmark	Same As National	Same As National	Same As National	Same As National	Same As National	Not Applicable	Same As National	Same As National	Not Applicable
<b>Readmissions &amp; deaths 30 day death (mortality) rates %</b>											
MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate	July 2014 - June 2017	As Compared to National Benchmark	Not Applicable	Same As National	Same As National	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable
MORT30 COPD 30day mortality rate COPD patients	July 2014 - June 2017	As Compared to National Benchmark	Same As National	Same As National	Same As National	Same As National	Same As National	Not Applicable	Same As National	Same As National	Not Applicable
MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate	July 2014 - June 2017	As Compared to National Benchmark	Not Applicable	Same As National	Same As National	Same As National	Same As National	Not Applicable	Not Applicable	Same As National	Not Applicable
MORT30HF Heart failure 30day mortality rate	July 2014 - June 2017	As Compared to National Benchmark	Same As National	Same As National	Same As National	Same As National	Better Than National	Not Applicable	Same As National	Same As National	Not Applicable
MORT30PN Pneumonia 30day mortality rate	July 2014 - June 2017	As Compared to National Benchmark	Same As National	Worse Than National	Same As National	Same As National	Same As National	Not Applicable	Same As National	Same As National	Not Applicable
MORT30STK Stroke 30day mortality rate	July 2014 - June 2017	As Compared to National Benchmark	Not Applicable	Same As National	Same As National	Same As National	Same As National	Not Applicable	Not Applicable	Same As National	Not Applicable
<b>Use of medical imaging Outpatient imaging efficiency %</b>											
↕ OP8 MRI Lumbar Spine for Low Back Pain	Jul 1, 2016 - Jun 30, 2017	39.3%	51.0%	31.9%	40.8%	Not Applicable (Too Few Cases)	Not Applicable (Too Few Cases)		Not Applicable (Too Few Cases)	Coming Soon	Coming Soon
↕ OP9 Mammography Followup Rates	Jul 1, 2016 - Jun 30, 2017	8.9%	Not Applicable (Too Few Cases)	6.3%	3.4%	8.2%	11.6%		5.0%	Coming Soon	Coming Soon
↕ OP10 Abdomen CT Use of Contrast Material	Jul 1, 2016 - Jun 30, 2017	7.8%	14.7%	6.1%	13.6%	7.8%	5.1%		11.3%	Coming Soon	Coming Soon
↕ OP11 Thorax CT Use of Contrast Material	Jul 1, 2016 - Jun 30, 2017	1.5%	0.0%	0.3%	0.1%	0.0%	0.0%		2.6%	Coming Soon	Coming Soon
↕ OP13 Outpatients who got cardiac imaging stress tests before lowrisk outpatient surgery	Jul 1, 2016 - Jun 30, 2017	4.6%	8.2%	2.8%	4.5%	1.4%	3.1%		Not Applicable (Too Few Cases)	Coming Soon	Coming Soon
↕ OP14 Outpatients with brain CT scans who got a sinus CT scan at the same time	Jul 1, 2016 - Jun 30, 2017	1.1%	1.0%	1.4%	1.1%	Not Applicable (Too Few Cases)	Not Applicable (Too Few Cases)		0.0%	Coming Soon	Coming Soon

	For Discharges Between	National Hospital Compare	BRMC 440012	JMH 490053	SCCH 490038	RCMC 490002	SSH 440018	UCMH 440001	JCCH 441304	LMH 440025	Takoma 440050
READM30 STK Stroke 30day readmission rate	July 2014 - June 2017	As Compared to National Benchmark	Same As National	Same As National	Same As National	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Same As National	Same As National
READM30 CABG Coronary artery bypass graft (CABG) surgery 30day readmission rate2	July 2014 - June 2017	As Compared to National Benchmark	Same As National	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable
READM30 HIPKNEE 30day readmission rate following elective THA / TKA	July 2014 - June 2017	As Compared to National Benchmark	Same As National	Same As National	Same As National	Not Applicable	Same As National	Not Applicable	Not Applicable	Same As National	Same As National
READM30 HOSPWIDE 30day hospitalwide allcause unplanned readmission	July 1, 2016 - June 2017	As Compared to National Benchmark	Same As National	Worse Than National	Same As National	Same As National	Same As National	Same As National	Not Applicable	Same As National	Same As National
<b>Readmissions &amp; deaths 30 day death (mortality) rates %</b>											
MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate	July 2014 - June 2017	As Compared to National Benchmark	Same As National	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable
MORT30 COPD 30day mortality rate COPD patients	July 2014 - June 2017	As Compared to National Benchmark	Same As National	Same As National	Same As National	Same As National	Same As National	Same As National	Not Applicable	Same As National	Same As National
MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate	July 2014 - June 2017	As Compared to National Benchmark	Same As National	Same As National	Same As National	Same As National	Same As National	Not Applicable	Not Applicable	Same As National	Not Applicable
MORT30HF Heart failure 30day mortality rate	July 2014 - June 2017	As Compared to National Benchmark	Same As National	Same As National	Same As National	Same As National	Same As National	Same As National	Not Applicable	Same As National	Same As National
MORT30PN Pneumonia 30day mortality rate	July 2014 - June 2017	As Compared to National Benchmark	Same As National	Same As National	Same As National	Same As National	Same As National	Same As National	Not Applicable	Worse Than National	Same As National
MORT30STK Stroke 30day mortality rate	July 2014 - June 2017	As Compared to National Benchmark	Same As National	Same As National	Same As National	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Same As National	Same As National
<b>Use of medical imaging Outpatient imaging efficiency %</b>											
OP8 MRI Lumbar Spine for Low Back Pain	Jul 1, 2016 - Jun 30, 2017	39.3%	45.2%	40.0%	35.6%	Not Applicable (Too Few Cases)	Not Applicable (Too Few Cases)		Not Applicable (Too Few Cases)	46.7%	Not Applicable (Too Few Cases)
OP9 Mammography Followup Rates	Jul 1, 2016 - Jun 30, 2017	8.9%	8.4%	3.3%	6.1%	6.4%	7.0%	6.1%	6.9%	14.3%	Not Applicable (Too Few Cases)
OP10 Abdomen CT Use of Contrast Material	Jul 1, 2016 - Jun 30, 2017	7.8%	6.2%	2.3%	1.5%	2.3%	7.4%	9.0%	15.7%	8.3%	1.6%
OP11 Thorax CT Use of Contrast Material	Jul 1, 2016 - Jun 30, 2017	1.5%	0.4%	0.3%	0.0%	1.9%	0.0%	0.0%	0.0%	3.3%	0.8%
OP13 Outpatients who got cardiac imaging stress tests before lowrisk outpatient surgery	Jul 1, 2016 - Jun 30, 2017	4.6%	5.1%	7.1%	5.5%	Not Applicable (Too Few Cases)	4.7%	Not Applicable (Too Few Cases)	0.0%	4.4%	3.5%
OP14 Outpatients with brain CT scans who got a sinus CT scan at the same time	Jul 1, 2016 - Jun 30, 2017	1.1%	0.9%	0.8%	1.0%	Not Applicable (Too Few Cases)	1.6%	1.0%			

**Target Quality Measures Rate**

↓	Pressure Ulcer Rate	0.44	0.59
↓	Iatrogenic Pneumothorax Rate	0.40	0.15
↓	Central Venous CatheterRelated Blood Stream Infection Rate	0.14	0.00
↓	Postoperative Hip Fracture Rate	0.06	0.08
↓	PSI 09 Perioperative Hemorrhage or Hematoma Rate	4.49	1.29
↓	PSI 10 Postoperative Physiologic and Metabolic Derangement Rate	1.05	0.51
↓	PSI 11 Postoperative Respiratory Failure Rate	13.08	7.95
↓	PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	5.52	2.76
↓	PSI 13 Postoperative Sepsis Rate	8.60	4.82
↓	PSI 14 Postoperative Wound Dehiscence Rate	2.22	0.82
↓	PSI 15 Accidental Puncture or Laceration Rate	1.48	0.75
↓	CLABSI	0.386	0.634
↓	CAUTI	0.319	0.395
↓	SSI COLON Surgical Site Infection	1.148	2.376
↓	SSI HYST Surgical Site Infection	1.469	0.120
↓	MRSA	0.031	0.032
↓	CDIFF	0.423	0.559

**General Information-Structural Measures**

Yes	SMPART NURSE Nursing Care Registry	Yes	Yes
Yes	ACS REGISTRY	Yes	Yes
Yes	SMPART GENSURG General Surgery Registry	Yes	Yes
Yes	OP12 HIT Ability electronically receive lab results	Yes	Yes
Yes	OP17 Tracking Clinical Results Between Visits	Yes	Yes
Yes	OP25 Outpatient Safe Surgery Checklist	Yes	Yes
Yes	SMSSCHECK Safe Surgery Checklist	Yes	Yes

**Survey of Patient's Experiences - Hospital Consumer Assessment of Healthcare Providers and Systems**
**Survey (HCAHPS) %**

↑	HCOMP1A P Patients who reported that their nurses "Always" communicated well	82.8%	78.2%
↓	HCOMP1U P Patients who reported that their nurses "Usually" communicated well	13.9%	11.4%
↓	HCOMP1 SNP Patients who reported that their nurses "Sometimes" or "Never" communicated well	3.3%	4.3%
↑	HCOMP2A P Patients who reported that their doctors "Always" communicated well	84.1%	82.6%
↓	HCOMP2U P Patients who reported that their doctors "Usually" communicated well	12.0%	11.9%
↓	HCOMP2 SNP Patients who reported that their doctors "Sometimes" or "Never" communicated well	3.8%	5.5%
↑	HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	73.5%	75.9%
↓	HCOMP3U P Patients who reported that they "Usually" received help as soon as they wanted	20.5%	17.6%
↓	HCOMP3 SNP Patients who reported that they "Sometimes" or "Never" received help as soon as they wanted	6.0%	6.7%
↑	HCOMP4A P Patients who reported that their pain was "Always" well controlled	74.5%	70.9%
↓	HCOMP4U P Patients who reported that their pain was "Usually" well controlled	19.3%	19.3%
↓	HCOMP4 SNP Patients who reported that their pain was "Sometimes" or "Never" well controlled	5.7%	9.8%
↑	HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them	67.8%	71.6%
↓	HCOMP5U P Patients who reported that staff "Usually" explained about medicines before giving it to them	17.3%	19.2%
↓	HCOMP5 SNP Patients who reported that staff "Sometimes" or "Never" explained about medicines before giving it to them	15.7%	21.3%

**FYTD2018 March 2018**

	Baseline	FYTD18
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↑	HCLEAN HSPAP Patients who reported that their room and bathroom were “Always” clean	74.5%	80.5%
↓	HCLEAN HSPUP Patients who reported that their room and bathroom were “Usually” clean	17.0%	12.3%
↓	HCLEAN HSPSNP Patients who reported that their room and bathroom were “Sometimes” or “Never” clean	8.5%	7.4%
↑	HQUIETHSP AP Patients who reported that the area around their room was “Always” quiet at night	67.4%	72.0%
↓	HQUIETHSP UP Patients who reported that the area around their room was “Usually” quiet at night	26.3%	20.8%
↓	HQUIETHSP SNP Patients who reported that the area around their room was “Sometimes” or “Never” quiet at night	6.4%	7.2%
↑	HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	87.1%	88.4%
↓	HCOMP6N P Patients who reported that NO, they were not given information about what to do during their recovery at home	12.9%	11.6%
↑	HCOMP7SA Patients who “Strongly Agree” they understood their care when they left the hospital	55.3%	53.7%
↓	HCOMP7A Patients who “Agree” they understood their care when they left the hospital	39.0%	38.4%
↓	HCOMP7D SD Patients who “Disagree” or “Strongly Disagree” they understood their care when they left the hospital	4.8%	4.5%
↓	HHSP RATING06 Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)	7.5%	7.0%
↓	HHSP RATING78 Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)	17.4%	16.1%
↑	HHSP RATING910 Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	75.1%	72.2%
↑	HRECMND DY Patients who reported YES, they would definitely recommend the hospital	75.9%	77.9%
↓	HRECMND PY Patients who reported YES, they would probably recommend the hospital	19.5%	18.9%
↓	HRECMND DN Patients who reported NO, they would probably not or definitely not recommend the hospital	4.6%	4.6%
<b>Timely &amp; Effective care Cataract Surgery Outcome %</b>			
↑	OP31 Cataracts Improvement	--	--
<b>Timely &amp; Effective care Colonoscopy follow-up %</b>			
↑	OP29 Avg Risk Polyp Surveillance	82.3%	89.4%
↑	OP30 High risk Polyp Surveillance	76.8%	91.3%
<b>Timely &amp; Effective Care Heart Attack</b>			
↓	OP3b Median Time to Transfer AMI	65.0	64.5
↓	OP5 Median Time to ECG AMI and Chest Pain	7.1	9.4
↑	OP2 Fibrinolytic Therapy 30 minutes	--	--
↑	OP4 Aspirin at Arrival AMI Chest Pain	97.5%	99.3%
<b>Timely &amp; Effective Care Stroke Care %</b>			
↑	STK4 Thrombolytic Therapy	83.0%	92.9%
<b>Timely &amp; Effective Care- Emergency Department (ED) Throughput</b>			
↓	EDV Emergency Department Volume	21.67	21.667
↓	ED1b ED Door to Transport	231.5	207.2
↓	ED2b ED Decision to Transport	90.0	48.4
↓	OP18b Avg time ED arrival to discharge	128.9	124.3
↓	OP20 Door to Diagnostic Evaluation	19.7	7.1
↓	OP21 Time to pain medication for long bone fractures2	49.0	31.3
↓	OP22 Left without being seen	0.9%	1.1%
↑	OP23 Head CT stroke patients	44.4%	83.6%
<b>Timely &amp; Effective Care Preventive Care %</b>			
↑	IMM2 Immunization for Influenza	96.9%	98.2%
↑	IMM3OP27 FACADHPCT HCW Influenza Vaccination	97.0%	99.0%

	Baseline	FYTD18
<b>Timely &amp; Effective Care Blood Clot Prevention &amp; Treatment %</b>		
↑ VTE5 Warfarin Therapy at Discharge	55.5%	--
↓ VTE6 HAC VTE	1.4%	4.0%
<b>Timely &amp; Effective Care Pregnancy &amp; delivery care %</b>		
↓ PC01 Elective Delivery	0.00%	0.00%
<b>Complications - Surgical Complications Rate</b>		
↓ Hip and Knee Complications <sup>2</sup>	0.0	0.0
↓ PSI90 Complications / patient safety for selected indicators	0.92	0.89
↓ PSI4SURG COMP Death rate among surgical patients with serious treatable complications	135.72	133.74
<b>Readmissions &amp; deaths 30 day rates of readmission %</b>		
↓ READM30 COPD Chronic obstructive pulmonary disease 30day readmission rate	17.8%	16.2%
↓ READM30 AMI Acute myocardial infarction (AMI) 30day readmission rate	12.6%	12.0%
↓ READM30HF Heart Failure 30Day readmissions rate	19.7%	16.8%
↓ READM30PN Pneumonia 30day readmission rate	17.0%	12.1%
↓ READM30 STK Stroke 30day readmission rate	9.4%	7.5%
↓ READM30 CABG Coronary artery bypass graft (CABG) surgery 30day readmission rate <sup>2</sup>	8.9%	11.0%
↓ READM30 HIPKNEE 30day readmission rate following elective THA / TKA	3.4%	3.9%
↓ READM30 HOSPWIDE 30day hospitalwide allcause unplanned readmission	12.3%	10.2%
<b>Readmissions &amp; deaths 30 day death (mortality) rates %</b>		
↓ MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate	2.0%	3.0%
↓ MORT30 COPD 30day mortality rate COPD patients	2.8%	1.8%
↓ MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate	7.1%	4.0%
↓ MORT30HF Heart failure 30day mortality rate	5.3%	2.3%
↓ MORT30PN Pneumonia 30day mortality rate	7.2%	4.6%
↓ MORT30STK Stroke 30day mortality rate	10.4%	3.1%
<b>Use of medical imaging Outpatient imaging efficiency %</b>		
↕ OP8 MRI Lumbar Spine for Low Back Pain	40.7%	43.2%
↕ OP9 Mammography Followup Rates	8.3%	9.1%
↕ OP10 Abdomen CT Use of Contrast Material	7.1%	4.0%
↕ OP11 Thorax CT Use of Contrast Material	0.9%	0.2%
↕ OP13 Outpatients who got cardiac imaging stress tests before lowrisk outpatient surgery	3.5%	4.0%
↕ OP14 Outpatients with brain CT scans who got a sinus CT scan at the same time	1.4%	0.8%

<b>Target Quality Measures Rate</b>		
↓	Pressure Ulcer Rate	0.69 0.00
↓	Iatrogenic Pneumothorax Rate	0.38 0.15
↓	Central Venous CatheterRelated Blood Stream Infection Rate	0.15 0.00
↓	Postoperative Hip Fracture Rate	0.06 0.04
↓	PSI 09 Perioperative Hemorrhage or Hematoma Rate	4.71 0.24
↓	PSI 10 Postoperative Physiologic and Metabolic Derangement Rate	1.16 0.00
↓	PSI 11 Postoperative Respiratory Failure Rate	13.85 2.70
↓	PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	4.55 75.64
↓	PSI 13 Postoperative Sepsis Rate	15.52 50.00
↓	PSI 14 Postoperative Wound Dehiscence Rate	2.36 0.00
↓	PSI 15 Accidental Puncture or Laceration Rate	1.31 0.00
↓	CLABSI	0.000 1.600
↓	CAUTI	0.000 0.347
↓	SSI COLON Surgical Site Infection	4.167 0.000
↓	SSI HYST Surgical Site Infection	1.389 0.000
↓	MRSA	0.000 0.000
↓	CDIFF	0.461 0.486
<b>General Information-Structural Measures</b>		
Yes	SMPART NURSE Nursing Care Registry	Yes Yes
Yes	ACS REGISTRY	Yes Yes
Yes	SMPART GENSURG General Surgery Registry	Yes Yes
Yes	OP12 HIT Ability electronically receive lab results	Yes Yes
Yes	OP17 Tracking Clinical Results Between Visits	Yes Yes
Yes	OP25 Outpatient Safe Surgery Checklist	Yes Yes
Yes	SMSSCHECK Safe Surgery Checklist	Yes Yes
<b>Survey of Patient's Experiences - Hospital Consumer Assessment of Healthcare Providers and Systems Survey (HCAHPS) %</b>		
↑	HCOMP1A P Patients who reported that their nurses "Always" communicated well	82.8% 80.9%
↓	HCOMP1U P Patients who reported that their nurses "Usually" communicated well	12.8% 15.3%
↓	HCOMP1 SNP Patients who reported that their nurses "Sometimes" or "Never" communicated well	4.4% 3.7%
↑	HCOMP2A P Patients who reported that their doctors "Always" communicated well	84.8% 86.7%
↓	HCOMP2U P Patients who reported that their doctors "Usually" communicated well	11.0% 9.6%
↓	HCOMP2 SNP Patients who reported that their doctors "Sometimes" or "Never" communicated well	4.2% 3.7%
↑	HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	71.2% 74.2%
↓	HCOMP3U P Patients who reported that they "Usually" received help as soon as they wanted	20.8% 18.4%
↓	HCOMP3 SNP Patients who reported that they "Sometimes" or "Never" received help as soon as they wanted	8.0% 7.4%
↑	HCOMP4A P Patients who reported that their pain was "Always" well controlled	73.2% 75.2%
↓	HCOMP4U P Patients who reported that their pain was "Usually" well controlled	20.4% 17.9%
↓	HCOMP4 SNP Patients who reported that their pain was "Sometimes" or "Never" well controlled	6.4% 6.8%
↑	HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them	68.8% 71.8%
↓	HCOMP5U P Patients who reported that staff "Usually" explained about medicines before giving it to them	14.6% 13.4%
↓	HCOMP5 SNP Patients who reported that staff "Sometimes" or "Never" explained about medicines before giving it to them	16.6% 14.3%
↑	HCLEAN HSPAP Patients who reported that their room and bathroom were "Always" clean	72.5% 82.7%
↓	HCLEAN HSPUP Patients who reported that their room and bathroom were "Usually" clean	15.8% 12.1%

	Baseline	FYTD18
↓ HCLEAN HSPSNP Patients who reported that their room and bathroom were “Sometimes” or “Never” clean	11.8%	5.5%
↑ HQUIETHSP AP Patients who reported that the area around their room was “Always” quiet at night	64.6%	70.5%
↓ HQUIETHSP UP Patients who reported that the area around their room was “Usually” quiet at night	28.2%	23.5%
↓ HQUIETHSP SNP Patients who reported that the area around their room was “Sometimes” or “Never” quiet at night	7.2%	6.1%
↑ HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	87.4%	87.9%
↓ HCOMP6N P Patients who reported that NO, they were not given information about what to do during their recovery at home	12.6%	12.1%
↑ HCOMP7SA Patients who “Strongly Agree” they understood their care when they left the hospital	52.8%	48.0%
↓ HCOMP7A Patients who “Agree” they understood their care when they left the hospital	43.0%	44.2%
↓ HCOMP7D SD Patients who “Disagree” or “Strongly Disagree” they understood their care when they left the hospital	4.2%	5.1%
↓ HHSP RATING06 Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)	8.2%	9.3%
↓ HHSP RATING78 Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)	22.4%	15.8%
↑ HHSP RATING910 Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	69.4%	74.9%
↑ HRECMND DY Patients who reported YES, they would definitely recommend the hospital	68.8%	71.9%
↓ HRECMND PY Patients who reported YES, they would probably recommend the hospital	26.0%	23.8%
↓ HRECMND DN Patients who reported NO, they would probably not or definitely not recommend the hospital	5.2%	4.2%
<b>Timely &amp; Effective care Cataract Surgery Outcome %</b>		
↑ OP31 Cataracts Improvement	--	--
<b>Timely &amp; Effective care Colonoscopy follow-up %</b>		
↑ OP29 Avg Risk Polyp Surveillance	48.8%	68.2%
↑ OP30 High risk Polyp Surveillance	90.0%	80.9%
<b>Timely &amp; Effective Care Heart Attack</b>		
↓ OP3b Median Time to Transfer AMI	48.0	--
↓ OP5 Median Time to ECG AMI and Chest Pain	5.6	--
↑ OP2 Fibrinolytic Therapy 30 minutes	--	0.0%
↑ OP4 Aspirin at Arrival AMI Chest Pain	97.4%	99.1%
<b>Timely &amp; Effective Care Stroke Care %</b>		
↑ STK4 Thrombolytic Therapy	--	--
<b>Timely &amp; Effective Care- Emergency Department (ED) Throughput</b>		
↓ EDV Emergency Department Volume	16.67	16.667
↓ ED1b ED Door to Transport	214.6	--
↓ ED2b ED Decision to Transport	63.6	--
↓ OP18b Avg time ED arrival to discharge	120.8	--
↓ OP20 Door to Diagnostic Evaluation	13.2	--
↓ OP21 Time to pain medication for long bone fractures2	38.0	--
↓ OP22 Left without being seen	0.8%	0.3%
↑ OP23 Head CT stroke patients	46.4%	65.6%
<b>Timely &amp; Effective Care Preventive Care %</b>		
↑ IMM2 Immunization for Influenza	98.4%	98.8%
↑ IMM3OP27 FACADHPCT HCW Influenza Vaccination	98.4%	--
<b>Timely &amp; Effective Care Blood Clot Prevention &amp; Treatment %</b>		
↑ VTE5 Warfarin Therapy at Discharge	88.0%	--
↓ VTE6 HAC VTE	0.0%	0.0%
<b>Timely &amp; Effective Care Pregnancy &amp; delivery care %</b>		
↓ PC01 Elective Delivery	1.67%	0.00%

<b>Complications - Surgical Complications Rate</b>			
↓	Hip and Knee Complications2	0.0	0.0
↓	PSI90 Complications / patient safety for selected indicators	0.85	0.92
↓	PSI4SURG COMP Death rate among surgical patients with serious treatable complications	147.36	89.09
<b>Readmissions &amp; deaths 30 day rates of readmission %</b>			
↓	READM30 COPD Chronic obstructive pulmonary disease 30day readmission rate	19.2%	18.0%
↓	READM30 AMI Acute myocardial infarction (AMI) 30day readmission rate	13.9%	17.0%
↓	READM30HF Heart Failure 30Day readmissions rate	22.5%	22.7%
↓	READM30PN Pneumonia 30day readmission rate	19.0%	13.7%
↓	READM30 STK Stroke 30day readmission rate	9.7%	4.7%
↓	READM30 CABG Coronary artery bypass graft (CABG) surgery 30day readmission rate2	--	--
↓	READM30 HIPKNEE 30day readmission rate following elective THA / TKA	3.5%	5.6%
↓	READM30 HOSPWIDE 30day hospitalwide allcause unplanned readmission	12.4%	12.2%
<b>Readmissions &amp; deaths 30 day death (mortality) rates %</b>			
↓	MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate	--	--
↓	MORT30 COPD 30day mortality rate COPD patients	1.0%	2.2%
↓	MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate	3.7%	3.8%
↓	MORT30HF Heart failure 30day mortality rate	3.7%	3.1%
↓	MORT30PN Pneumonia 30day mortality rate	2.6%	3.7%
↓	MORT30STK Stroke 30day mortality rate	6.0%	3.5%
<b>Use of medical imaging Outpatient imaging efficiency %</b>			
↕	OP8 MRI Lumbar Spine for Low Back Pain	42.0%	--
↕	OP9 Mammography Followup Rates	3.4%	--
↕	OP10 Abdomen CT Use of Contrast Material	4.0%	--
↕	OP11 Thorax CT Use of Contrast Material	1.3%	--
↕	OP13 Outpatients who got cardiac imaging stress tests before lowrisk outpatient surgery	4.1%	--
↕	OP14 Outpatients with brain CT scans who got a sinus CT scan at the same time	0.7%	--



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	Ballad Health		Franklin Woods Community Hospital		Johnson City Medical Center		Dickenson County Hospital		Hancock County Hospital	
	Baseline	FYTD18	Baseline	FYTD18	Baseline	FYTD18	Baseline	FYTD18	Baseline	FYTD18
<b>Target Quality Measures Rate</b>										
↓ Pressure Ulcer Rate	0.71	0.90	0.30	0.00	0.26	0.00	--	--	--	0.00
↓ Iatrogenic Pneumothorax Rate	0.38	0.25	0.38	0.00	0.26	0.28	--	--	--	0.00
↓ Central Venous CatheterRelated Blood Stream Infection Rate	0.15	0.00	0.15	--	0.10	0.00	--	--	--	0.00
↓ Postoperative Hip Fracture Rate	0.06	0.28	0.06	0.33	0.06	0.00	--	--	--	0.00
↓ PSI 09 Perioperative Hemorrhage or Hematoma Rate	4.15	1.87	4.37	1.58	3.60	1.01	--	--	--	--
↓ PSI 10 Postoperative Physiologic and Metabolic Derangement Rate	1.00	0.28	1.09	0.00	1.08	0.58	--	--	--	--
↓ PSI 11 Postoperative Respiratory Failure Rate	14.79	7.99	12.09	22.28	11.98	3.69	--	--	--	--
↓ PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	5.42	3.18	4.36	1.50	5.85	4.16	--	--	--	--
↓ PSI 13 Postoperative Sepsis Rate	8.81	3.39	0.00	13.55	14.88	1.75	--	--	--	--
↓ PSI 14 Postoperative Wound Dehiscence Rate	2.22	1.12	2.15	2.29	2.35	2.12	--	--	--	--
↓ PSI 15 Accidental Puncture or Laceration Rate	1.34	0.92	1.45	1.13	1.34	0.50	--	--	--	--
↓ CLABSI	0.774	0.694	0.000	1.138	1.080	1.207	--	--	--	--
↓ CAUTI	0.613	0.592	0.428	0.545	0.997	1.333	--	--	--	--
↓ SSI COLON Surgical Site Infection	1.17	2.006	1.50	4.545	1.91	1.163	--	--	--	--
↓ SSI HYST Surgical Site Infection	1.00	0.231	0.00	0.840	2.50	0.000	--	--	--	--
↓ MRSA	0.040	0.043	0.039	0.000	0.055	0.064	--	--	--	--
↓ CDIIF	0.585	0.711	0.259	0.319	0.531	0.575	--	--	--	--
<b>General Information-Structural Measures</b>										
Yes SMPART NURSE Nursing Care Registry	--	--	Yes	Yes	Yes	Yes	--	--	--	--
Yes ACS REGISTRY	--	--	Yes	Yes	Yes	Yes	--	--	--	--
Yes SMPART GENSURG General Surgery Registry	--	--	Yes	Yes	Yes	Yes	--	--	--	--
Yes OP12 HIT Ability electronically receive lab results	--	--	Yes	Yes	Yes	Yes	--	--	--	--
Yes OP17 Tracking Clinical Results Between Visits	--	--	Yes	Yes	Yes	Yes	--	--	--	--
Yes OP25 Outpatient Safe Surgery Checklist	--	--	Yes	Yes	Yes	Yes	--	--	--	--
Yes SMSSCHECK Safe Surgery Checklist	Yes	Yes	Yes	Yes	Yes	Yes	--	--	--	--
<b>Survey of Patient's Experiences - Hospital Consumer Assessment of Healthcare Providers and Systems Survey (HCAHPS) %</b>										
↑ HCOMP1A P Patients who reported that their nurses "Always" communicated well	82.1%	77.1%	84.0%	82.6%	77.0%	77.6%	--	66.7%	90.0%	90.9%
↓ HCOMP1U P Patients who reported that their nurses "Usually" communicated well	13.1%	14.1%	13.0%	13.5%	17.0%	16.6%	--	33.3%	8.0%	4.5%
↓ HCOMP1 SNP Patients who reported that their nurses "Sometimes" or "Never" communicated well	4.6%	5.3%	3.0%	3.9%	6.0%	5.8%	--	0.0%	2.0%	4.5%
↑ HCOMP2A P Patients who reported that their doctors "Always" communicated well	80.0%	79.9%	84.0%	81.6%	77.0%	75.8%	--	100.0%	92.0%	82.1%
↓ HCOMP2U P Patients who reported that their doctors "Usually" communicated well	13.6%	14.2%	15.0%	14.2%	18.0%	17.6%	--	0.0%	6.0%	11.9%
↓ HCOMP2 SNP Patients who reported that their doctors "Sometimes" or "Never" communicated well	6.3%	5.9%	4.0%	4.2%	5.0%	6.6%	--	0.0%	2.0%	6.0%
↑ HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	67.6%	66.8%	72.0%	70.6%	66.0%	63.1%	--	100.0%	95.0%	96.9%
↓ HCOMP3U P Patients who reported that they "Usually" received help as soon as they wanted	25.8%	23.5%	21.0%	22.1%	25.0%	25.6%	--	0.0%	4.0%	3.1%
↓ HCOMP3 SNP Patients who reported that they "Sometimes" or "Never" received help as soon as they wanted	9.1%	9.9%	7.0%	7.3%	9.0%	11.3%	--	0.0%	1.0%	0.0%
↑ HCOMP4A P Patients who reported that their pain was "Always" well controlled	68.4%	69.7%	76.0%	73.1%	66.0%	65.0%	--	100.0%	89.0%	33.3%
↓ HCOMP4U P Patients who reported that their pain was "Usually" well controlled	22.7%	22.1%	19.0%	22.2%	25.0%	25.7%	--	0.0%	5.0%	25.0%
↓ HCOMP4 SNP Patients who reported that their pain was "Sometimes" or "Never" well controlled	9.3%	8.3%	5.0%	4.7%	9.0%	9.3%	--	0.0%	1.0%	41.7%
↑ HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them	64.1%	64.3%	68.0%	68.3%	60.0%	60.1%	--	100.0%	77.0%	85.7%
↓ HCOMP5U P Patients who reported that staff "Usually" explained about medicines before giving it to them	19.9%	16.5%	16.0%	15.9%	18.0%	18.0%	--	0.0%	18.0%	4.8%
↓ HCOMP5 SNP Patients who reported that staff "Sometimes" or "Never" explained about medicines before giving it to them	18.7%	19.0%	16.0%	15.6%	22.0%	21.9%	--	0.0%	5.0%	9.5%
↑ HCLEAN HSPAP Patients who reported that their room and bathroom were "Always" clean	73.6%	72.6%	83.0%	83.4%	62.0%	65.1%	--	100.0%	86.0%	96.0%
↓ HCLEAN HSPUP Patients who reported that their room and bathroom were "Usually" clean	16.4%	16.8%	13.0%	11.1%	24.0%	20.2%	--	0.0%	14.0%	0.0%
↓ HCLEAN HSPSNP Patients who reported that their room and bathroom were "Sometimes" or "Never" clean	10.5%	10.6%	4.0%	5.6%	14.0%	14.7%	--	0.0%	0.0%	4.5%



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		Ballad Health		Hawkins County Memorial Hospital		Holston Valley Medical Center		Indian Path Medical Center		Lonesome Pine Hospital	
		Baseline	FYTD18	Baseline	FYTD18	Baseline	FYTD18	Baseline	FYTD18	Baseline	FYTD18
<b>Target Quality Measures Rate</b>											
↓	Pressure Ulcer Rate	0.71	0.90	0.45	0.00	1.07	2.91	0.23	0.00	1.29	0.00
↓	Iatrogenic Pneumothorax Rate	0.38	0.25	0.40	0.00	0.57	0.48	0.45	0.33	0.38	0.00
↓	Central Venous Catheter-Related Blood Stream Infection Rate	0.15	0.00	0.17	0.00	0.16	0.00	0.14	--	0.16	0.00
↓	Postoperative Hip Fracture Rate	0.06	0.28	--	0.00	0.06	0.09	0.06	0.00	0.06	0.00
↓	PSI 09 Perioperative Hemorrhage or Hematoma Rate	4.15	1.87	--	0.00	4.04	1.77	4.78	0.00	4.69	0.00
↓	PSI 10 Postoperative Physiologic and Metabolic Derangement Rate	1.00	0.28	--	0.00	0.87	0.43	1.10	0.00	1.12	0.00
↓	PSI 11 Postoperative Respiratory Failure Rate	14.79	7.99	--	0.00	16.84	4.62	12.36	6.29	10.64	0.00
↓	PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	5.42	3.18	--	0.00	6.14	3.29	5.38	2.70	4.61	0.00
↓	PSI 13 Postoperative Sepsis Rate	8.81	3.39	--	0.00	9.47	3.08	9.09	6.19	5.82	0.00
↓	PSI 14 Postoperative Wound Dehiscence Rate	2.22	1.12	--	0.00	2.42	1.30	2.20	0.00	2.26	0.00
↓	PSI 15 Accidental Puncture or Laceration Rate	1.34	0.92	1.36	0.00	1.62	1.34	1.38	0.00	1.34	0.00
↓	CLABSI	0.774	0.694	0.000	0.000	0.682	0.324	0.000	0.000	0.000	0.000
↓	CAUTI	0.613	0.592	0.000	0.000	0.938	0.464	0.000	0.000	0.000	1.733
↓	SSI COLON Surgical Site Infection	1.17	2.006	0.00	0.000	1.36	1.250	0.00	2.222	0.00	0.000
↓	SSI HYST Surgical Site Infection	1.00	0.231	--	--	0.64	0.000	7.14	0.000	5.56	0.000
↓	MRSA	0.040	0.043	0.000	0.000	0.012	0.030	0.080	0.068	0.000	0.000
↓	CDIFF	0.585	0.711	0.000	0.341	0.741	1.108	0.813	0.790	0.315	0.482
<b>General Information-Structural Measures</b>											
Yes	SMPART NURSE Nursing Care Registry	--	--	No	No	Yes	Yes	Yes	Yes	Yes	Yes
Yes	ACS REGISTRY	--	--	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Yes	SMPART GENSURG General Surgery Registry	--	--	No	No	Yes	Yes	Yes	Yes	Yes	Yes
Yes	OP12 HIT Ability electronically receive lab results	--	--	Yes	No	Yes	No	Yes	Yes	Yes	No
Yes	OP17 Tracking Clinical Results Between Visits	--	--	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Yes	OP25 Outpatient Safe Surgery Checklist	--	--	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Yes	SMSSCHECK Safe Surgery Checklist	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
<b>Survey of Patient's Experiences - Hospital Consumer Assessment of Healthcare Providers and Systems Survey (HCAHPS) %</b>											
↑	HCOMP1A P Patients who reported that their nurses "Always" communicated well	82.1%	77.1%	87.0%	81.5%	81.0%	80.9%	82.0%	79.8%	83.0%	83.7%
↓	HCOMP1U P Patients who reported that their nurses "Usually" communicated well	13.1%	14.1%	11.0%	11.9%	16.0%	12.8%	14.0%	15.6%	12.0%	8.8%
↓	HCOMP1 SNP Patients who reported that their nurses "Sometimes" or "Never" communicated well	4.6%	5.3%	2.0%	6.7%	3.0%	6.3%	4.0%	4.5%	5.0%	7.4%
↑	HCOMP2A P Patients who reported that their doctors "Always" communicated well	80.0%	79.9%	92.0%	77.2%	82.0%	80.3%	85.0%	82.1%	82.0%	82.8%
↓	HCOMP2U P Patients who reported that their doctors "Usually" communicated well	13.6%	14.2%	7.0%	11.7%	15.0%	12.5%	10.0%	13.5%	13.0%	10.5%
↓	HCOMP2 SNP Patients who reported that their doctors "Sometimes" or "Never" communicated well	6.3%	5.9%	1.0%	11.1%	3.0%	7.2%	5.0%	4.4%	5.0%	6.6%
↑	HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	67.6%	66.8%	78.0%	75.4%	66.0%	64.6%	65.0%	66.2%	72.0%	79.6%
↓	HCOMP3U P Patients who reported that they "Usually" received help as soon as they wanted	25.8%	23.5%	20.0%	16.1%	26.0%	24.7%	25.0%	24.3%	20.0%	12.3%
↓	HCOMP3 SNP Patients who reported that they "Sometimes" or "Never" received help as soon as they wanted	9.1%	9.9%	2.0%	8.5%	8.0%	10.7%	10.0%	9.5%	8.0%	8.0%
↑	HCOMP4A P Patients who reported that their pain was "Always" well controlled	68.4%	69.7%	81.0%	67.5%	73.0%	71.7%	72.0%	74.6%	75.0%	78.5%
↓	HCOMP4U P Patients who reported that their pain was "Usually" well controlled	22.7%	22.1%	13.0%	18.4%	21.0%	20.4%	22.0%	21.0%	18.0%	11.5%
↓	HCOMP4 SNP Patients who reported that their pain was "Sometimes" or "Never" well controlled	9.3%	8.3%	6.0%	14.0%	6.0%	7.9%	6.0%	4.4%	7.0%	9.6%
↑	HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them	64.1%	64.3%	83.0%	65.6%	63.0%	68.0%	63.0%	62.9%	71.0%	74.7%
↓	HCOMP5U P Patients who reported that staff "Usually" explained about medicines before giving it to them	19.9%	16.5%	10.0%	16.8%	17.0%	15.0%	18.0%	17.6%	13.0%	9.2%
↓	HCOMP5 SNP Patients who reported that staff "Sometimes" or "Never" explained about medicines before giving it to them	18.7%	19.0%	7.0%	17.6%	20.0%	17.0%	19.0%	19.5%	16.0%	13.0%
↑	HCLEAN HSPAP Patients who reported that their room and bathroom were "Always" clean	73.6%	72.6%	86.0%	82.7%	66.0%	67.7%	74.0%	80.9%	72.0%	81.1%
↓	HCLEAN HSPUP Patients who reported that their room and bathroom were "Usually" clean	16.4%	16.8%	9.0%	12.2%	21.0%	19.1%	16.0%	14.7%	17.0%	13.0%
↓	HCLEAN HSPSNP Patients who reported that their room and bathroom were "Sometimes" or "Never" clean	10.5%	10.6%	5.0%	5.8%	13.0%	13.4%	10.0%	4.4%	11.0%	8.3%



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	Ballad Health		Norton Community Hospital		Bristol Regional Medical Center		Johnston Memorial Hospital		Smyth County Community Hospital		Russell County Medical Center	
	Baseline	FYTD18	Baseline	FYTD18	Baseline	FYTD18	Baseline	FYTD18	Baseline	FYTD18	Baseline	FYTD18
<b>Target Quality Measures Rate</b>												
↓ Pressure Ulcer Rate	0.71	0.90	0.33	0.00	0.80	1.80	1.08	0.00	0.35	0.00	0.41	0.00
↓ Iatrogenic Pneumothorax Rate	0.38	0.25	0.38	0.54	0.32	0.10	0.34	0.20	0.39	0.00	0.40	0.00
↓ Central Venous Catheter-Related Blood Stream Infection Rate	0.15	0.00	0.15	0.00	0.09	0.00	0.13	0.00	0.16	0.00	0.17	0.00
↓ Postoperative Hip Fracture Rate	0.06	0.28	0.06	0.00	0.06	0.23	0.06	0.22	0.06	0.00	--	0.00
↓ PSI 09 Perioperative Hemorrhage or Hematoma Rate	4.15	1.87	4.96	0.00	4.72	4.65	4.50	1.18	4.69	0.00	--	0.00
↓ PSI 10 Postoperative Physiologic and Metabolic Derangement Rate	1.00	0.28	1.10	0.00	0.97	2.57	1.29	0.00	1.12	0.00	--	0.00
↓ PSI 11 Postoperative Respiratory Failure Rate	14.79	7.99	12.33	0.00	16.50	13.14	16.39	13.51	16.04	0.00	--	0.00
↓ PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	5.42	3.18	4.14	0.00	4.25	1.82	5.25	3.21	4.21	0.00	--	375.00
↓ PSI 13 Postoperative Sepsis Rate	8.81	3.39	35.72	0.00	8.88	3.38	10.75	0.00	9.79	0.00	--	250.00
↓ PSI 14 Postoperative Wound Dehiscence Rate	2.22	1.12	2.79	0.00	1.95	0.00	2.11	0.00	2.29	0.00	--	0.00
↓ PSI 15 Accidental Puncture or Laceration Rate	1.34	0.92	1.74	0.00	1.38	2.27	0.64	0.00	1.46	0.00	1.39	0.00
↓ CLABSI	0.774	0.694	0.000	0.000	1.202	0.693	0.000	0.000	0.000	0.000	0.000	8.000
↓ CAUTI	0.613	0.592	0.000	0.000	0.824	0.986	0.000	0.000	0.000	0.000	0.000	0.000
↓ SSI COLON Surgical Site Infection	1.17	2.006	0.00	0.000	0.00	1.852	0.00	0.000	16.67	--	--	--
↓ SSI HYST Surgical Site Infection	1.00	0.231	0.00	0.000	0.00	0.000	0.00	0.000	0.00	0.000	--	--
↓ MRSA	0.040	0.043	0.000	0.000	0.056	0.072	0.000	0.000	0.000	0.000	0.000	0.000
↓ CDIFF	0.585	0.711	0.265	0.493	0.719	0.816	1.052	0.539	0.174	0.424	0.498	0.493
<b>General Information-Structural Measures</b>												
Yes SMPART NURSE Nursing Care Registry	--	--	No	No	No	No	Yes	Yes	No	No	No	No
Yes ACS REGISTRY	--	--	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Yes SMPART GENSURG General Surgery Registry	--	--	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Yes OP12 HIT Ability electronically receive lab results	--	--	Yes	Yes	No	No	Yes	Yes	Yes	Yes	Yes	Yes
Yes OP17 Tracking Clinical Results Between Visits	--	--	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Yes OP25 Outpatient Safe Surgery Checklist	--	--	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Yes SMSSCHECK Safe Surgery Checklist	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
<b>Survey of Patient's Experiences - Hospital Consumer Assessment of Healthcare Providers and Systems Survey (HCAHPS) %</b>												
↑ HCOMP1A P Patients who reported that their nurses "Always" communicated well	82.1%	77.1%	82.0%	82.7%	82.0%	84.6%	77.0%	76.2%	85.0%	86.5%	87.0%	89.8%
↓ HCOMP1U P Patients who reported that their nurses "Usually" communicated well	13.1%	14.1%	14.0%	13.6%	14.0%	10.2%	17.0%	18.0%	12.0%	10.8%	9.0%	7.4%
↓ HCOMP1 SNP Patients who reported that their nurses "Sometimes" or "Never" communicated well	4.6%	5.3%	4.0%	3.7%	4.0%	5.2%	6.0%	5.8%	3.0%	2.7%	4.0%	2.8%
↑ HCOMP2A P Patients who reported that their doctors "Always" communicated well	80.0%	79.9%	85.0%	81.3%	84.0%	82.9%	80.0%	78.2%	88.0%	88.7%	89.0%	89.0%
↓ HCOMP2U P Patients who reported that their doctors "Usually" communicated well	13.6%	14.2%	11.0%	15.6%	14.0%	10.7%	14.0%	16.0%	9.0%	8.4%	8.0%	7.1%
↓ HCOMP2 SNP Patients who reported that their doctors "Sometimes" or "Never" communicated well	6.3%	5.9%	4.0%	3.1%	2.0%	6.4%	6.0%	5.8%	3.0%	2.9%	3.0%	3.9%
↑ HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	67.6%	66.8%	70.0%	65.8%	69.0%	71.8%	60.0%	54.9%	76.0%	72.3%	78.0%	72.4%
↓ HCOMP3U P Patients who reported that they "Usually" received help as soon as they wanted	25.8%	23.5%	22.0%	24.0%	23.0%	21.0%	27.0%	31.3%	18.0%	19.3%	17.0%	23.3%
↓ HCOMP3 SNP Patients who reported that they "Sometimes" or "Never" received help as soon as they wanted	9.1%	9.9%	8.0%	10.2%	8.0%	9.0%	13.0%	13.8%	6.0%	8.3%	5.0%	4.3%
↑ HCOMP4A P Patients who reported that their pain was "Always" well controlled	68.4%	69.7%	71.0%	60.3%	74.0%	74.2%	68.0%	62.5%	73.0%	79.6%	79.0%	70.6%
↓ HCOMP4U P Patients who reported that their pain was "Usually" well controlled	22.7%	22.1%	22.0%	31.1%	21.0%	16.8%	23.0%	26.1%	22.0%	17.1%	17.0%	21.6%
↓ HCOMP4 SNP Patients who reported that their pain was "Sometimes" or "Never" well controlled	9.3%	8.3%	7.0%	8.6%	5.0%	9.0%	9.0%	11.5%	5.0%	3.3%	4.0%	7.8%
↑ HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them	64.1%	64.3%	66.0%	67.6%	67.0%	67.3%	61.0%	59.9%	73.0%	67.1%	73.0%	61.4%
↓ HCOMP5U P Patients who reported that staff "Usually" explained about medicines before giving it to them	19.9%	16.5%	14.0%	16.4%	17.0%	14.1%	16.0%	19.6%	16.0%	13.7%	14.0%	21.7%
↓ HCOMP5 SNP Patients who reported that staff "Sometimes" or "Never" explained about medicines before giving it to them	18.7%	19.0%	20.0%	16.0%	16.0%	18.6%	23.0%	20.5%	11.0%	19.3%	13.0%	16.9%
↑ HCLEAN HSPAP Patients who reported that their room and bathroom were "Always" clean	73.6%	72.6%	71.0%	77.6%	62.0%	67.0%	68.0%	71.5%	75.0%	85.4%	76.0%	80.9%
↓ HCLEAN HSPUP Patients who reported that their room and bathroom were "Usually" clean	16.4%	16.8%	18.0%	15.0%	22.0%	17.9%	20.0%	19.9%	8.0%	10.1%	16.0%	14.9%
↓ HCLEAN HSPSNP Patients who reported that their room and bathroom were "Sometimes" or "Never" clean	10.5%	10.6%	11.0%	7.5%	16.0%	15.1%	12.0%	8.7%	17.0%	4.5%	8.0%	4.3%



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		Ballad Health		Sycamore Shoals Hospital		Johnson County Community Hospital		Unicoi County Memorial Hospital		Laughlin Memorial Hospital		Takoma Regional Hospital	
		Baseline	FYTD18	Baseline	FYTD18	Baseline	FYTD18	Baseline	FYTD18	Baseline	FYTD18	Baseline	FYTD18
<b>Target Quality Measures Rate</b>													
↓	Pressure Ulcer Rate	0.71	0.90	0.31	0.00	--	--	0.40	--	0.27	--	0.34	--
↓	Iatrogenic Pneumothorax Rate	0.38	0.25	0.44	0.00	--	--	0.40	--	0.37	--	0.45	--
↓	Central Venous Catheter-Related Blood Stream Infection Rate	0.15	0.00	0.16	0.00	--	--	0.17	--	0.15	--	0.15	--
↓	Postoperative Hip Fracture Rate	0.06	0.28	0.06	0.00	--	--	0.06	--	0.06	--	0.06	--
↓	PSI 09 Perioperative Hemorrhage or Hematoma Rate	4.15	1.87	4.66	0.00	--	--	4.75	--	4.52	--	4.98	--
↓	PSI 10 Postoperative Physiologic and Metabolic Derangement Rate	1.00	0.28	1.11	0.00	--	--	--	--	1.10	--	1.11	--
↓	PSI 11 Postoperative Respiratory Failure Rate	14.79	7.99	13.37	5.65	--	--	--	--	8.98	--	12.51	--
↓	PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	5.42	3.18	5.23	5.88	--	--	4.76	--	6.16	--	7.58	--
↓	PSI 13 Postoperative Sepsis Rate	8.81	3.39	0.00	5.78	--	--	--	--	9.38	--	9.48	--
↓	PSI 14 Postoperative Wound Dehiscence Rate	2.22	1.12	2.26	0.00	--	--	--	--	2.22	--	2.24	--
↓	PSI 15 Accidental Puncture or Laceration Rate	1.34	0.92	1.35	0.00	--	--	1.26	--	2.17	--	1.49	--
↓	CLABSI	0.774	0.694	0.900	1.585	--	--	0.000	0.000	0.000	0.000	0.000	1.397
↓	CAUTI	0.613	0.592	0.000	0.627	--	--	0.000	0.000	0.000	0.000	0.000	0.000
↓	SSI COLON Surgical Site Infection	1.17	2.006	3.23	5.000	--	--	--	--	2.33	2.128	0.00	3.226
↓	SSI HYST Surgical Site Infection	1.00	0.231	0.00	0.000	--	--	--	--	--	--	0.00	0.000
↓	MRSA	0.040	0.043	0.067	0.087	--	--	0.000	0.000	0.000	0.000	0.000	0.000
↓	CDIFF	0.585	0.711	0.604	0.871	--	--	0.000	0.000	0.441	0.199	0.124	0.568
<b>General Information-Structural Measures</b>													
Yes	SMPART NURSE Nursing Care Registry	--	--	Yes	Yes	--	--	No	No	Yes	Yes	No	No
Yes	ACS REGISTRY	--	--	Yes	Yes	--	--	Yes	No	Yes	Yes	Yes	Yes
Yes	SMPART GENSURG General Surgery Registry	--	--	Yes	Yes	--	--	Yes	Yes	Yes	Yes	No	No
Yes	OP12 HIT Ability electronically receive lab results	--	--	Yes	Yes	Yes	Yes	--	--	Yes	Yes	Yes	Yes
Yes	OP17 Tracking Clinical Results Between Visits	--	--	Yes	Yes	Yes	Yes	--	--	Yes	Yes	Yes	Yes
Yes	OP25 Outpatient Safe Surgery Checklist	--	--	Yes	Yes	--	--	--	--	Yes	Yes	Yes	Yes
Yes	SMSSCHECK Safe Surgery Checklist	Yes	Yes	Yes	Yes	--	--	Yes	Yes	Yes	Yes	Yes	Yes
<b>Survey of Patient's Experiences - Hospital Consumer Assessment of Healthcare Providers and Systems Survey (HCAHPS) %</b>													
↑	HCOMP1A P Patients who reported that their nurses "Always" communicated well	82.1%	77.1%	85.0%	11.3%	--	100.0%	79.0%	85.6%	81.0%	--	83.0%	85.1%
↓	HCOMP1U P Patients who reported that their nurses "Usually" communicated well	13.1%	14.1%	12.0%	17.1%	--	0.0%	18.0%	13.4%	16.0%	--	14.0%	9.6%
↓	HCOMP1 SNP Patients who reported that their nurses "Sometimes" or "Never" communicated well	4.6%	5.3%	3.0%	4.6%	--	0.0%	3.0%	1.0%	3.0%	--	3.0%	5.3%
↑	HCOMP2A P Patients who reported that their doctors "Always" communicated well	80.0%	79.9%	86.0%	79.3%	--	100.0%	80.0%	83.9%	85.0%	--	78.0%	83.4%
↓	HCOMP2U P Patients who reported that their doctors "Usually" communicated well	13.6%	14.2%	11.0%	15.4%	--	0.0%	12.0%	13.2%	13.0%	--	11.0%	10.1%
↓	HCOMP2 SNP Patients who reported that their doctors "Sometimes" or "Never" communicated well	6.3%	5.9%	3.0%	5.3%	--	0.0%	8.0%	2.9%	2.0%	--	7.0%	6.5%
↑	HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	67.6%	66.8%	82.0%	68.5%	--	100.0%	71.0%	77.8%	73.0%	--	71.0%	79.6%
↓	HCOMP3U P Patients who reported that they "Usually" received help as soon as they wanted	25.8%	23.5%	13.0%	22.7%	--	0.0%	23.0%	19.8%	22.0%	--	24.0%	14.6%
↓	HCOMP3 SNP Patients who reported that they "Sometimes" or "Never" received help as soon as they wanted	9.1%	9.9%	5.0%	8.7%	--	0.0%	6.0%	2.5%	5.0%	--	5.0%	6.2%
↑	HCOMP4A P Patients who reported that their pain was "Always" well controlled	68.4%	69.7%	75.0%	66.9%	--	100.0%	71.0%	80.0%	70.0%	--	73.0%	73.0%
↓	HCOMP4U P Patients who reported that their pain was "Usually" well controlled	22.7%	22.1%	19.0%	25.7%	--	0.0%	25.0%	20.0%	22.0%	--	20.0%	17.0%
↓	HCOMP4 SNP Patients who reported that their pain was "Sometimes" or "Never" well controlled	9.3%	8.3%	6.0%	7.4%	--	0.0%	4.0%	0.0%	8.0%	--	7.0%	9.8%
↑	HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them	64.1%	64.3%	73.0%	64.6%	--	100.0%	68.0%	76.1%	61.0%	--	63.0%	68.8%
↓	HCOMP5U P Patients who reported that staff "Usually" explained about medicines before giving it to them	19.9%	16.5%	14.0%	16.8%	--	66.7%	21.0%	13.4%	20.0%	--	21.0%	12.1%
↓	HCOMP5 SNP Patients who reported that staff "Sometimes" or "Never" explained about medicines before giving it to them	18.7%	19.0%	13.0%	18.6%	--	66.7%	20.0%	10.4%	19.0%	--	16.0%	19.1%
↑	HCLEAN HSPAP Patients who reported that their room and bathroom were "Always" clean	73.6%	72.6%	82.0%	81.3%	--	100.0%	72.0%	85.3%	70.0%	--	77.0%	76.6%
↓	HCLEAN HSPUP Patients who reported that their room and bathroom were "Usually" clean	16.4%	16.8%	13.0%	13.8%	--	0.0%	23.0%	11.8%	18.0%	--	14.0%	14.6%
↓	HCLEAN HSPSNP Patients who reported that their room and bathroom were "Sometimes" or "Never" clean	10.5%	10.6%	5.0%	4.9%	--	0.0%	5.0%	2.9%	12.0%	--	9.0%	9.7%



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	Ballad Health		Franklin Woods Community Hospital		Johnson City Medical Center		Dickenson County Hospital		Hancock County Hospital	
	Baseline	FYTD18	Baseline	FYTD18	Baseline	FYTD18	Baseline	FYTD18	Baseline	FYTD18
↑ HQUIETHSP AP Patients who reported that the area around their room was "Always" quiet at night	64.7%	62.0%	74.0%	72.9%	52.0%	50.9%	--	100.0%	79.0%	79.2%
↓ HQUIETHSP UP Patients who reported that the area around their room was "Usually" quiet at night	24.4%	28.5%	22.0%	22.9%	37.0%	35.0%	--	0.0%	18.0%	20.8%
↓ HQUIETHSP SNP Patients who reported that the area around their room was "Sometimes" or "Never" quiet at night	10.6%	9.6%	4.0%	4.2%	11.0%	14.1%	--	0.0%	3.0%	0.0%
↑ HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	85.9%	86.0%	88.0%	86.3%	84.0%	85.5%	--	100.0%	92.0%	82.9%
↓ HCOMP6N P Patients who reported that NO, they were not given information about what to do during their recovery at home	14.2%	12.5%	12.0%	13.7%	16.0%	14.5%	--	0.0%	8.0%	17.1%
↑ HCOMP7SA Patients who "Strongly Agree" they understood their care when they left the hospital	52.1%	50.5%	61.0%	57.8%	48.0%	47.1%	--	52.4%	70.0%	60.0%
↓ HCOMP7A Patients who "Agree" they understood their care when they left the hospital	41.2%	41.4%	34.0%	33.5%	47.0%	42.8%	--	38.9%	22.0%	31.7%
↓ HCOMP7D SD Patients who "Disagree" or "Strongly Disagree" they understood their care when they left the hospital	6.1%	5.3%	5.0%	5.2%	5.0%	6.6%	--	5.6%	8.0%	8.3%
↓ HHSP RATING06 Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)	9.2%	9.5%	4.0%	6.3%	10.0%	12.6%	--	16.7%	13.0%	9.1%
↓ HHSP RATING78 Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)	19.5%	19.2%	14.0%	13.4%	24.0%	22.8%	--	0.0%	7.0%	4.5%
↑ HHSP RATING910 Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	70.7%	68.8%	82.0%	80.3%	66.0%	64.6%	--	83.3%	80.0%	86.4%
↑ HRECMND DY Patients who reported YES, they would definitely recommend the hospital	71.3%	71.3%	85.0%	84.2%	65.0%	63.9%	--	83.3%	81.0%	77.3%
↓ HRECMND PY Patients who reported YES, they would probably recommend the hospital	22.2%	23.1%	13.0%	11.5%	29.0%	28.3%	--	16.7%	9.0%	9.1%
↓ HRECMND DN Patients who reported NO, they would probably not or definitely not recommend the hospital	6.5%	6.2%	2.0%	4.3%	6.0%	7.8%	--	0.0%	10.0%	4.5%
<b>Timely &amp; Effective care Cataract Surgery Outcome %</b>										
↑ OP31 Cataracts Improvement	--	--	--	--	--	--	--	--	--	--
<b>Timely &amp; Effective care Colonoscopy follow-up %</b>										
↑ OP29 Avg Risk Polyp Surveillance	73.0%	83.3%	78.0%	100.0%	67.0%	100.0%	--	--	--	--
↑ OP30 High risk Polyp Surveillance	83.0%	89.0%	100.0%	100.0%	68.0%	100.0%	--	--	--	--
<b>Timely &amp; Effective Care Heart Attack</b>										
↓ OP3b Median Time to Transfer AMI	47.4	47.5	--	--	--	--	--	--	--	--
↓ OP5 Median Time to ECG AMI and Chest Pain	5.2	11.3	8.0	--	--	--	--	--	--	--
↑ OP2 Fibrinolytic Therapy 30 minutes	--	--	--	--	--	--	--	--	--	--
↑ OP4 Aspirin at Arrival AMI Chest Pain	97.0%	98.1%	98.0%	96.4%	--	100.0%	--	100.0%	--	100.0%
<b>Timely &amp; Effective Care Stroke Care %</b>										
↑ STK4 Thrombolytic Therapy	--	--	--	--	--	--	--	--	--	--
<b>Timely &amp; Effective Care- Emergency Department (ED) Throughput</b>										
↓ EDV Emergency Department Volume	--	--	MEDIUM	MEDIUM	#####	#####	LOW	LOW	MEDIUM	MEDIUM
↓ ED1b ED Door to Transport	227.3	277.8	234.0	--	245.0	--	--	--	--	--
↓ ED2b ED Decision to Transport	124.5	95.7	106.4	--	95.0	--	--	--	102.0	--
↓ OP18b Avg time ED arrival to discharge	124.53	131.820	130.00	--	152.00	--	--	--	--	--
↓ OP20 Door to Diagnostic Evaluation	15.09	16.490	16.00	--	19.00	--	--	--	--	--
↓ OP21 Time to pain medication for long bone fractures2	37.84	56.060	36.00	--	35.00	--	--	--	--	--
↓ OP22 Left without being seen	0.9%	0.9%	1.0%	0.6%	1.0%	0.8%	1.0%	0.6%	1.0%	0.5%
↑ OP23 Head CT stroke patients	63.2%	76.8%	66.7%	100.0%	0.0%	50.0%	25.0%	100.0%	--	--
<b>Timely &amp; Effective Care Preventive Care %</b>										
↑ IMM2 Immunization for Influenza	97.4%	98.2%	99.0%	99.5%	96.0%	98.1%	--	100.0%	--	--
↑ IMM3OP27 FACADHPCT HCW Influenza Vaccination	97.0%	98.0%	99.0%	--	98.0%	--	--	--	100.0%	--
<b>Timely &amp; Effective Care Blood Clot Prevention &amp; Treatment %</b>										
↑ VTE5 Warfarin Therapy at Discharge	--	--	--	--	--	--	--	--	--	--
↓ VTE6 HAC VTE	1.7%	3.2%	--	25.0%	0.0%	3.0%	--	--	--	--
<b>Timely &amp; Effective Care Pregnancy &amp; delivery care %</b>										
↓ PC01 Elective Delivery	0.00	0.000	0.00	0.000	0.00	0.000	--	--	--	--
<b>Complications - Surgical Complications Rate</b>										



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		Ballad Health		Hawkins County Memorial Hospital		Holston Valley Medical Center		Indian Path Medical Center		Lonesome Pine Hospital	
		Baseline	FYTD18	Baseline	FYTD18	Baseline	FYTD18	Baseline	FYTD18	Baseline	FYTD18
↑	HQUIETHSP AP Patients who reported that the area around their room was "Always" quiet at night	64.7%	62.0%	74.0%	78.1%	63.0%	64.3%	66.0%	65.7%	66.0%	73.6%
↓	HQUIETHSP UP Patients who reported that the area around their room was "Usually" quiet at night	24.4%	28.5%	23.0%	14.2%	29.0%	24.7%	28.0%	26.7%	27.0%	17.9%
↓	HQUIETHSP SNP Patients who reported that the area around their room was "Sometimes" or "Never" quiet at night	10.6%	9.6%	3.0%	7.7%	8.0%	11.0%	6.0%	7.6%	7.0%	8.5%
↑	HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	85.9%	86.0%	92.0%	85.8%	87.0%	90.4%	86.0%	86.6%	86.0%	85.3%
↓	HCOMP6N P Patients who reported that NO, they were not given information about what to do during their recovery at home	14.2%	12.5%	8.0%	14.2%	13.0%	9.6%	14.0%	13.4%	14.0%	14.7%
↑	HCOMP7SA Patients who "Strongly Agree" they understood their care when they left the hospital	52.1%	50.5%	55.0%	52.8%	54.0%	54.3%	55.0%	50.3%	51.0%	46.6%
↓	HCOMP7A Patients who "Agree" they understood their care when they left the hospital	41.2%	41.4%	41.0%	42.7%	40.0%	41.9%	40.0%	38.8%	44.0%	47.7%
↓	HCOMP7D SD Patients who "Disagree" or "Strongly Disagree" they understood their care when they left the hospital	6.1%	5.3%	4.0%	4.5%	6.0%	3.8%	5.0%	5.8%	5.0%	5.7%
↓	HHSP RATING06 Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)	9.2%	9.5%	5.0%	10.8%	7.0%	7.4%	8.0%	7.9%	7.0%	7.7%
↓	HHSP RATING78 Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)	19.5%	19.2%	21.0%	20.3%	19.0%	18.3%	19.0%	16.2%	23.0%	24.2%
↑	HHSP RATING910 Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	70.7%	68.8%	74.0%	68.9%	74.0%	74.4%	73.0%	75.9%	70.0%	68.1%
↑	HRECMND DY Patients who reported YES, they would definitely recommend the hospital	71.3%	71.3%	76.0%	67.8%	78.0%	78.9%	78.0%	79.3%	70.0%	73.0%
↓	HRECMND PY Patients who reported YES, they would probably recommend the hospital	22.2%	23.1%	21.0%	26.6%	19.0%	16.8%	17.0%	15.5%	24.0%	20.8%
↓	HRECMND DN Patients who reported NO, they would probably not or definitely not recommend the hospital	6.5%	6.2%	3.0%	5.6%	3.0%	4.3%	5.0%	5.2%	6.0%	6.2%
<b>Timely &amp; Effective care Cataract Surgery Outcome %</b>											
↑	OP31 Cataracts Improvement	--	--	--	--	--	--	--	--	--	--
<b>Timely &amp; Effective care Colonoscopy follow-up %</b>											
↑	OP29 Avg Risk Polyp Surveillance	73.0%	83.3%	97.0%	100.0%	--	73.7%	--	100.0%	31.0%	41.2%
↑	OP30 High risk Polyp Surveillance	83.0%	89.0%	95.0%	96.6%	62.0%	95.7%	73.0%	100.0%	70.0%	64.7%
<b>Timely &amp; Effective Care Heart Attack</b>											
↓	OP3b Median Time to Transfer AMI	47.4	47.5	--	--	--	--	--	--	--	--
↓	OP5 Median Time to ECG AMI and Chest Pain	5.2	11.3	9.0	--	--	--	4.0	--	10.0	--
↑	OP2 Fibrinolytic Therapy 30 minutes	--	--	--	--	--	--	--	--	--	--
↑	OP4 Aspirin at Arrival AMI Chest Pain	97.0%	98.1%	100.0%	100.0%	--	100.0%	93.0%	100.0%	95.0%	100.0%
<b>Timely &amp; Effective Care Stroke Care %</b>											
↑	STK4 Thrombolytic Therapy	--	--	--	--	83.0%	85.7%	--	--	--	--
<b>Timely &amp; Effective Care- Emergency Department (ED) Throughput</b>											
↓	EDV Emergency Department Volume	--	--	LOW	LOW	#####	VERY HIGH	MEDIUM	MEDIUM	MEDIUM	MEDIUM
↓	ED1b ED Door to Transport	227.3	277.8	175.0	--	340.0	--	220.0	--	213.0	--
↓	ED2b ED Decision to Transport	124.5	95.7	49.0	--	186.0	--	78.0	--	53.0	--
↓	OP18b Avg time ED arrival to discharge	124.53	131.820	80.00	--	153.00	--	121.00	--	120.00	--
↓	OP20 Door to Diagnostic Evaluation	15.09	16.490	14.00	--	24.00	--	18.00	--	23.00	--
↓	OP21 Time to pain medication for long bone fractures2	37.84	56.060	38.00	--	52.00	--	32.00	--	64.00	--
↓	OP22 Left without being seen	0.9%	0.9%	0.0%	2.2%	1.0%	2.0%	1.0%	0.9%	0.0%	0.3%
↑	OP23 Head CT stroke patients	63.2%	76.8%	50.0%	--	78.6%	86.7%	--	57.1%	54.5%	50.0%
<b>Timely &amp; Effective Care Preventive Care %</b>											
↑	IMM2 Immunization for Influenza	97.4%	98.2%	97.0%	100.0%	95.0%	98.1%	99.0%	99.5%	96.0%	98.1%
↑	IMM3OP27 FACADHPCT HCW Influenza Vaccination	97.0%	98.0%	99.0%	--	94.0%	--	97.0%	--	99.0%	--
<b>Timely &amp; Effective Care Blood Clot Prevention &amp; Treatment %</b>											
↑	VTE5 Warfarin Therapy at Discharge	--	--	--	--	56.0%	--	--	--	88.0%	--
↓	VTE6 HAC VTE	1.7%	3.2%	1.0%	--	3.0%	3.6%	0.0%	0.0%	--	--
<b>Timely &amp; Effective Care Pregnancy &amp; delivery care %</b>											
↓	PC01 Elective Delivery	0.00	0.000	--	--	0.00	0.000	0.00	0.000	0.05	0.000
<b>Complications - Surgical Complications Rate</b>											



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		Ballad Health		Norton Community Hospital		Bristol Regional Medical Center		Johnston Memorial Hospital		Smyth County Community Hospital		Russell County Medical Center	
		Baseline	FYTD18	Baseline	FYTD18	Baseline	FYTD18	Baseline	FYTD18	Baseline	FYTD18	Baseline	FYTD18
↑	HQUIETHSP AP Patients who reported that the area around their room was "Always" quiet at night	64.7%	62.0%	61.0%	57.7%	65.0%	66.9%	60.0%	60.2%	72.0%	68.6%	64.0%	62.8%
↓	HQUIETHSP UP Patients who reported that the area around their room was "Usually" quiet at night	24.4%	28.5%	28.0%	32.4%	28.0%	22.8%	32.0%	31.3%	24.0%	27.3%	30.0%	31.9%
↓	HQUIETHSP SNP Patients who reported that the area around their room was "Sometimes" or "Never" quiet at night	10.6%	9.6%	11.0%	9.9%	7.0%	10.4%	8.0%	8.5%	4.0%	4.1%	6.0%	5.3%
↑	HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	85.9%	86.0%	88.0%	82.9%	88.0%	89.9%	86.0%	87.4%	91.0%	89.9%	86.0%	81.8%
↓	HCOMP6N P Patients who reported that NO, they were not given information about what to do during their recovery at home	14.2%	12.5%	12.0%	17.1%	12.0%	9.9%	14.0%	12.6%	9.0%	10.1%	14.0%	18.2%
↑	HCOMP7SA Patients who "Strongly Agree" they understood their care when they left the hospital	52.1%	50.5%	53.0%	45.4%	53.0%	55.7%	49.0%	43.7%	61.0%	55.4%	50.0%	44.6%
↓	HCOMP7A Patients who "Agree" they understood their care when they left the hospital	41.2%	41.4%	42.0%	46.3%	42.0%	40.8%	45.0%	46.6%	37.0%	37.8%	47.0%	47.9%
↓	HCOMP7D SD Patients who "Disagree" or "Strongly Disagree" they understood their care when they left the hospital	6.1%	5.3%	5.0%	5.4%	5.0%	3.4%	6.0%	6.3%	2.0%	3.2%	3.0%	4.6%
↓	HHSP RATING06 Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)	9.2%	9.5%	8.0%	9.2%	7.0%	6.9%	12.0%	11.9%	5.0%	5.1%	9.0%	5.3%
↓	HHSP RATING78 Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)	19.5%	19.2%	19.0%	20.2%	16.0%	17.3%	20.0%	21.1%	18.0%	11.2%	32.0%	18.1%
↑	HHSP RATING910 Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	70.7%	68.8%	73.0%	70.5%	77.0%	75.8%	68.0%	66.9%	77.0%	83.7%	59.0%	76.6%
↑	HRECMND DY Patients who reported YES, they would definitely recommend the hospital	71.3%	71.3%	73.0%	66.0%	78.0%	79.4%	65.0%	64.7%	75.0%	76.5%	61.0%	68.1%
↓	HRECMND PY Patients who reported YES, they would probably recommend the hospital	22.2%	23.1%	21.0%	28.5%	19.0%	16.7%	28.0%	27.5%	22.0%	20.9%	35.0%	28.7%
↓	HRECMND DN Patients who reported NO, they would probably not or definitely not recommend the hospital	6.5%	6.2%	6.0%	5.6%	3.0%	4.0%	7.0%	7.8%	3.0%	2.6%	4.0%	3.2%
<b>Timely &amp; Effective care Cataract Surgery Outcome %</b>													
↑	OP31 Cataracts Improvement	--	--	--	--	--	--	--	--	--	--	--	--
<b>Timely &amp; Effective care Colonoscopy follow-up %</b>													
↑	OP29 Avg Risk Polyp Surveillance	73.0%	83.3%	13.0%	100.0%	57.0%	72.7%	100.0%	100.0%	100.0%	100.0%	0.0%	0.0%
↑	OP30 High risk Polyp Surveillance	83.0%	89.0%	--	--	46.0%	70.0%	100.0%	--	100.0%	92.3%	--	85.7%
<b>Timely &amp; Effective Care Heart Attack</b>													
↓	OP3b Median Time to Transfer AMI	47.4	47.5	--	--	--	--	--	--	48.0	--	--	--
↓	OP5 Median Time to ECG AMI and Chest Pain	5.2	11.3	9.0	--	--	--	0.0	--	3.0	--	6.0	--
↑	OP2 Fibrinolytic Therapy 30 minutes	--	--	--	0.0%	--	--	--	--	--	--	--	--
↑	OP4 Aspirin at Arrival AMI Chest Pain	97.0%	98.1%	94.0%	96.6%	--	100.0%	100.0%	100.0%	99.0%	100.0%	99.0%	98.1%
<b>Timely &amp; Effective Care Stroke Care %</b>													
↑	STK4 Thrombolytic Therapy	--	--	--	--	83.0%	100.0%	--	--	--	--	--	--
<b>Timely &amp; Effective Care- Emergency Department (ED) Throughput</b>													
↓	EDV Emergency Department Volume	--	--	MEDIUM	MEDIUM	HIGH	HIGH	HIGH	HIGH	LOW	LOW	LOW	LOW
↓	ED1b ED Door to Transport	227.3	277.8	244.0	--	255.0	--	272.0	--	176.0	--	168.0	--
↓	ED2b ED Decision to Transport	124.5	95.7	74.0	--	96.0	--	112.0	--	40.0	--	39.0	--
↓	OP18b Avg time ED arrival to discharge	124.53	131.820	154.00	--	147.00	--	143.00	--	97.00	--	90.00	--
↓	OP20 Door to Diagnostic Evaluation	15.09	16.490	14.00	--	23.00	--	11.00	--	11.00	--	7.00	--
↓	OP21 Time to pain medication for long bone fractures2	37.84	56.060	53.00	--	43.00	--	28.00	--	25.00	--	20.00	--
↓	OP22 Left without being seen	0.9%	0.9%	1.0%	0.3%	1.0%	1.4%	1.0%	0.2%	1.0%	0.3%	1.0%	0.2%
↑	OP23 Head CT stroke patients	63.2%	76.8%	66.7%	66.7%	60.0%	100.0%	57.1%	60.0%	75.0%	66.7%	0.0%	50.0%
<b>Timely &amp; Effective Care Preventive Care %</b>													
↑	IMM2 Immunization for Influenza	97.4%	98.2%	99.0%	99.2%	96.0%	99.6%	97.0%	96.2%	100.0%	100.0%	100.0%	99.6%
↑	IMM3OP27 FACADHPCT HCW Influenza Vaccination	97.0%	98.0%	97.0%	--	99.0%	99.0%	99.0%	--	99.0%	--	98.0%	--
<b>Timely &amp; Effective Care Blood Clot Prevention &amp; Treatment %</b>													
↑	VTE5 Warfarin Therapy at Discharge	--	--	--	--	55.0%	--	--	--	--	--	--	--
↓	VTE6 HAC VTE	1.7%	3.2%	--	--	3.0%	0.0%	0.0%	0.0%	--	--	--	--
<b>Timely &amp; Effective Care Pregnancy &amp; delivery care %</b>													
↓	PC01 Elective Delivery	0.00	0.000	0.00	0.000	0.00	0.000	0.00	0.000	--	--	--	--
<b>Complications - Surgical Complications Rate</b>													



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		Ballad Health		Sycamore Shoals Hospital		Johnson County Community Hospital		Unicoi County Memorial Hospital		Laughlin Memorial Hospital		Takoma Regional Hospital	
		Baseline	FYTD18	Baseline	FYTD18	Baseline	FYTD18	Baseline	FYTD18	Baseline	FYTD18	Baseline	FYTD18
↑	HQUIETHSP AP Patients who reported that the area around their room was "Always" quiet at night	64.7%	62.0%	73.0%	64.4%	--	100.0%	68.0%	73.1%	61.0%	--	66.0%	76.3%
↓	HQUIETHSP UP Patients who reported that the area around their room was "Usually" quiet at night	24.4%	28.5%	23.0%	29.2%	--	0.0%	23.0%	17.9%	30.0%	--	28.0%	14.8%
↓	HQUIETHSP SNP Patients who reported that the area around their room was "Sometimes" or "Never" quiet at night	10.6%	9.6%	4.0%	6.4%	--	0.0%	9.0%	9.0%	9.0%	--	6.0%	8.9%
↑	HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	85.9%	86.0%	86.0%	87.1%	--	100.0%	76.0%	85.7%	88.0%	--	91.0%	91.9%
↓	HCOMP6N P Patients who reported that NO, they were not given information about what to do during their recovery at home	14.2%	12.5%	14.0%	12.9%	--	0.0%	24.0%	14.3%	12.0%	--	9.0%	8.1%
↑	HCOMP7SA Patients who "Strongly Agree" they understood their care when they left the hospital	52.1%	50.5%	59.0%	47.2%	--	58.3%	47.0%	53.8%	50.0%	--	56.0%	53.3%
↓	HCOMP7A Patients who "Agree" they understood their care when they left the hospital	41.2%	41.4%	38.0%	41.8%	--	33.3%	40.0%	38.7%	45.0%	--	40.0%	36.4%
↓	HCOMP7D SD Patients who "Disagree" or "Strongly Disagree" they understood their care when they left the hospital	6.1%	5.3%	3.0%	6.5%	--	0.0%	4.0%	2.0%	5.0%	--	3.0%	3.1%
↓	HHSP RATING06 Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)	9.2%	9.5%	4.0%	8.2%	--	0.0%	12.0%	0.7%	6.0%	--	7.0%	7.6%
↓	HHSP RATING78 Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)	19.5%	19.2%	17.0%	20.8%	--	25.0%	21.0%	5.6%	17.0%	--	16.0%	13.1%
↑	HHSP RATING910 Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	70.7%	68.8%	79.0%	71.0%	--	100.0%	67.0%	18.2%	77.0%	--	77.0%	79.3%
↑	HRECMND DY Patients who reported YES, they would definitely recommend the hospital	71.3%	71.3%	78.0%	71.7%	--	100.0%	62.0%	76.8%	76.0%	--	78.0%	77.6%
↓	HRECMND PY Patients who reported YES, they would probably recommend the hospital	22.2%	23.1%	18.0%	22.5%	--	25.0%	28.0%	20.3%	22.0%	--	19.0%	16.0%
↓	HRECMND DN Patients who reported NO, they would probably not or definitely not recommend the hospital	6.5%	6.2%	4.0%	5.8%	--	0.0%	10.0%	2.9%	2.0%	--	3.0%	6.4%
<b>Timely &amp; Effective care Cataract Surgery Outcome %</b>													
↑	OP31 Cataracts Improvement	--	--	--	--	--	--	--	--	--	--	--	--
<b>Timely &amp; Effective care Colonoscopy follow-up %</b>													
↑	OP29 Avg Risk Polyp Surveillance	73.0%	83.3%	100.0%	100.0%	--	--	--	--	86.0%	89.6%	91.0%	68.3%
↑	OP30 High risk Polyp Surveillance	83.0%	89.0%	75.0%	75.0%	--	--	--	--	89.0%	87.9%	83.0%	96.3%
<b>Timely &amp; Effective Care Heart Attack</b>													
↓	OP3b Median Time to Transfer AMI	47.4	47.5	--	--	--	--	--	64.5	47.0	--	79.0	--
↓	OP5 Median Time to ECG AMI and Chest Pain	5.2	11.3	5.0	--	--	--	8.0	9.4	7.0	--	9.0	--
↑	OP2 Fibrinolytic Therapy 30 minutes	--	--	--	--	--	--	--	--	--	--	--	--
↑	OP4 Aspirin at Arrival AMI Chest Pain	97.0%	98.1%	--	95.7%	--	100.0%	--	100.0%	--	100.0%	99.0%	100.0%
<b>Timely &amp; Effective Care Stroke Care %</b>													
↑	STK4 Thrombolytic Therapy	--	--	--	--	--	--	--	--	--	--	--	--
<b>Timely &amp; Effective Care- Emergency Department (ED) Throughput</b>													
↓	EDV Emergency Department Volume	--	--	MEDIUM	MEDIUM	LOW	LOW	LOW	LOW	MEDIUM	MEDIUM	MEDIUM	MEDIUM
↓	ED1b ED Door to Transport	227.3	277.8	210.0	--	--	--	209.0	207.2	206.0	--	221.0	--
↓	ED2b ED Decision to Transport	124.5	95.7	69.0	--	--	--	--	48.4	--	--	29.0	--
↓	OP18b Avg time ED arrival to discharge	124.53	131.820	124.00	--	--	--	119.00	124.333	124.00	--	139.00	--
↓	OP20 Door to Diagnostic Evaluation	15.09	16.490	14.00	--	--	--	18.00	7.111	25.00	--	26.00	--
↓	OP21 Time to pain medication for long bone fractures2	37.84	56.060	63.00	--	--	--	56.00	31.286	65.00	--	70.00	--
↓	OP22 Left without being seen	0.9%	0.9%	0.0%	0.6%	1.0%	0.7%	1.0%	0.5%	1.0%	0.5%	2.0%	2.5%
↑	OP23 Head CT stroke patients	63.2%	76.8%	0.0%	75.0%	--	100.0%	0.0%	--	100.0%	100.0%	--	--
<b>Timely &amp; Effective Care Preventive Care %</b>													
↑	IMM2 Immunization for Influenza	97.4%	98.2%	98.0%	99.6%	--	100.0%	93.0%	92.3%	96.0%	98.1%	100.0%	95.2%
↑	IMM3OP27 FACADHPCT HCW Influenza Vaccination	97.0%	98.0%	99.0%	--	--	--	99.0%	--	96.0%	--	87.0%	--
<b>Timely &amp; Effective Care Blood Clot Prevention &amp; Treatment %</b>													
↑	VTE5 Warfarin Therapy at Discharge	--	--	--	--	--	--	--	--	--	--	--	--
↓	VTE6 HAC VTE	1.7%	3.2%	--	0.0%	--	--	--	--	--	0.0%	--	0.0%
<b>Timely &amp; Effective Care Pregnancy &amp; delivery care %</b>													
↓	PC01 Elective Delivery	0.00	0.000	--	--	--	--	--	--	--	0.000	0.00	0.000
<b>Complications - Surgical Complications Rate</b>													



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	Ballad Health		Franklin Woods Community Hospital		Johnson City Medical Center		Dickenson County Hospital		Hancock County Hospital	
	Baseline	FYTD18	Baseline	FYTD18	Baseline	FYTD18	Baseline	FYTD18	Baseline	FYTD18
↓ Hip and Knee Complications2	0.0	0.0	--	--	0.0	0.0	--	--	--	--
↓ PSI90 Complications / patient safety for selected indicators	0.83	--	0.82	--	0.89	--	--	--	--	1.00
↓ PSI4SURG COMP Death rate among surgical patients with serious treatable complications	140.60	176.72	--	27.03	153.53	192.16	--	--	--	--
<b>Readmissions &amp; deaths 30 day rates of readmission %</b>										
↓ READM30 COPD Chronic obstructive pulmonary disease 30day readmission rate	18.2%	19.4%	10.1%	15.4%	20.1%	16.9%	--	--	--	30.8%
↓ READM30 AMI Acute myocardial infarction (AMI) 30day readmission rate	12.9%	12.9%	--	0.0%	13.5%	12.5%	--	--	--	--
↓ READM30HF Heart Failure 30Day readmissions rate	20.5%	23.6%	9.7%	19.6%	22.6%	24.4%	--	--	--	0.0%
↓ READM30PN Pneumonia 30day readmission rate	17.7%	16.7%	16.3%	9.5%	18.8%	16.0%	--	--	17.0%	0.0%
↓ READM30 STK Stroke 30day readmission rate	9.3%	10.4%	0.0%	0.0%	9.4%	8.4%	--	--	--	--
↓ READM30 CABG Coronary artery bypass graft (CABG) surgery 30day readmission rate2	8.7%	12.5%	--	--	8.7%	11.3%	--	--	--	--
↓ READM30 HIPKNEE 30day readmission rate following elective THA / TKA	3.8%	3.8%	--	--	3.0%	2.8%	--	--	--	--
↓ READM30 HOSPWIDE 30day hospitalwide allcause unplanned readmission	12.0%	13.1%	4.6%	7.1%	10.6%	12.2%	--	--	15.6%	11.1%
<b>Readmissions &amp; deaths 30 day death (mortality) rates %</b>										
↓ MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate	2.0%	3.0%	--	--	1.2%	3.2%	--	--	--	--
↓ MORT30 COPD 30day mortality rate COPD patients	1.8%	2.6%	2.6%	1.4%	2.3%	4.2%	--	--	--	0.0%
↓ MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate	4.7%	4.9%	--	0.0%	4.8%	6.9%	--	--	--	--
↓ MORT30HF Heart failure 30day mortality rate	3.9%	3.0%	2.1%	1.9%	4.2%	4.6%	--	--	--	0.0%
↓ MORT30PN Pneumonia 30day mortality rate	4.7%	5.5%	2.0%	1.9%	5.1%	8.7%	--	--	16.9%	2.9%
↓ MORT30STK Stroke 30day mortality rate	8.2%	5.4%	--	0.0%	7.7%	10.2%	--	--	--	--
<b>Use of medical imaging Outpatient imaging efficiency %</b>										
↕ OP8 MRI Lumbar Spine for Low Back Pain	38.0%	34.1%	33.9%	--	35.4%	--	--	--	--	--
↕ OP9 Mammography Followup Rates	8.0%	6.9%	--	--	5.8%	--	--	--	--	--
↕ OP10 Abdomen CT Use of Contrast Material	6.0%	7.0%	12.7%	--	4.6%	--	--	--	--	--
↕ OP11 Thorax CT Use of Contrast Material	1.0%	0.7%	0.0%	--	0.2%	--	--	--	--	--
↕ OP13 Outpatients who got cardiac imaging stress tests before lowrisk outpatient surgery	3.0%	3.8%	1.6%	--	2.9%	--	--	--	--	--
↕ OP14 Outpatients with brain CT scans who got a sinus CT scan at the same time	2.0%	1.0%	--	--	2.8%	--	--	--	--	--



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	Ballad Health		Hawkins County Memorial Hospital		Holston Valley Medical Center		Indian Path Medical Center		Lonesome Pine Hospital	
	Baseline	FYTD18	Baseline	FYTD18	Baseline	FYTD18	Baseline	FYTD18	Baseline	FYTD18
↓ Hip and Knee Complications2	0.0	0.0	--	--	0.0	0.0	0.0	0.0	--	0.0
↓ PSI90 Complications / patient safety for selected indicators	0.83	--	0.88	0.96	1.07	0.80	0.87	--	0.89	0.92
↓ PSI4SURG COMP Death rate among surgical patients with serious treatable complications	140.60	176.72	--	--	130.24	185.19	135.61	68.18	--	0.00
<b>Readmissions &amp; deaths 30 day rates of readmission %</b>										
↓ READM30 COPD Chronic obstructive pulmonary disease 30day readmission rate	18.2%	19.4%	18.6%	12.5%	19.7%	20.1%	18.4%	11.9%	28.4%	16.8%
↓ READM30 AMI Acute myocardial infarction (AMI) 30day readmission rate	12.9%	12.9%	--	50.0%	8.5%	13.3%	10.4%	8.5%	17.2%	14.3%
↓ READM30HF Heart Failure 30Day readmissions rate	20.5%	23.6%	21.1%	16.0%	21.6%	22.2%	18.1%	18.9%	32.5%	32.8%
↓ READM30PN Pneumonia 30day readmission rate	17.7%	16.7%	16.8%	11.6%	19.4%	16.6%	14.8%	12.0%	24.8%	26.3%
↓ READM30 STK Stroke 30day readmission rate	9.3%	10.4%	--	12.5%	14.6%	10.1%	6.2%	8.7%	--	0.0%
↓ READM30 CABG Coronary artery bypass graft (CABG) surgery 30day readmission rate2	8.7%	12.5%	--	--	8.0%	8.5%	--	--	--	--
↓ READM30 HIPKNEE 30day readmission rate following elective THA / TKA	3.8%	3.8%	--	--	4.2%	4.2%	3.4%	1.6%	--	11.1%
↓ READM30 HOSPWIDE 30day hospitalwide allcause unplanned readmission	12.0%	13.1%	14.6%	14.4%	12.7%	12.0%	9.5%	9.7%	16.5%	11.7%
<b>Readmissions &amp; deaths 30 day death (mortality) rates %</b>										
↓ MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate	2.0%	3.0%	--	--	1.4%	2.7%	--	--	--	--
↓ MORT30 COPD 30day mortality rate COPD patients	1.8%	2.6%	0.0%	0.0%	1.4%	2.0%	2.0%	2.2%	1.2%	3.0%
↓ MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate	4.7%	4.9%	--	0.0%	4.5%	2.5%	4.5%	7.1%	2.8%	0.0%
↓ MORT30HF Heart failure 30day mortality rate	3.9%	3.0%	0.0%	1.7%	3.8%	2.7%	2.2%	1.6%	6.1%	0.0%
↓ MORT30PN Pneumonia 30day mortality rate	4.7%	5.5%	2.6%	1.0%	2.6%	6.0%	2.0%	6.8%	2.1%	2.9%
↓ MORT30STK Stroke 30day mortality rate	8.2%	5.4%	--	0.0%	17.4%	3.4%	3.3%	0.0%	14.5%	0.0%
<b>Use of medical imaging Outpatient imaging efficiency %</b>										
↕ OP8 MRI Lumbar Spine for Low Back Pain	38.0%	34.1%	--	--	43.1%	--	--	--	47.7%	--
↕ OP9 Mammography Followup Rates	8.0%	6.9%	3.7%	--	2.9%	--	5.6%	--	5.2%	--
↕ OP10 Abdomen CT Use of Contrast Material	6.0%	7.0%	6.0%	--	14.3%	--	7.9%	--	9.4%	--
↕ OP11 Thorax CT Use of Contrast Material	1.0%	0.7%	3.2%	--	0.0%	--	0.0%	--	3.9%	--
↕ OP13 Outpatients who got cardiac imaging stress tests before lowrisk outpatient surgery	3.0%	3.8%	--	--	4.4%	--	1.5%	--	5.5%	--
↕ OP14 Outpatients with brain CT scans who got a sinus CT scan at the same time	2.0%	1.0%	--	--	1.0%	--	--	--	1.4%	--



FYTD2018 March 2018

	Ballad Health		Norton Community Hospital		Bristol Regional Medical Center		Johnston Memorial Hospital		Smyth County Community Hospital		Russell County Medical Center	
	Baseline	FYTD18	Baseline	FYTD18	Baseline	FYTD18	Baseline	FYTD18	Baseline	FYTD18	Baseline	FYTD18
↓ Hip and Knee Complications2	0.0	0.0	--	--	0.0	0.0	0.0	0.0	0.0	0.0	--	--
↓ PSI90 Complications / patient safety for selected indicators	0.83	--	0.89	--	0.81	0.81	0.75	--	0.83	--	0.89	--
↓ PSI4SURG COMP Death rate among surgical patients with serious treatable complications	140.60	176.72	--	150.00	123.34	204.92	147.36	206.35	--	0.00	--	--
<b>Readmissions &amp; deaths 30 day rates of readmission %</b>												
↓ READM30 COPD Chronic obstructive pulmonary disease 30day readmission rate	18.2%	19.4%	14.8%	16.9%	20.1%	20.3%	16.6%	23.2%	18.5%	15.6%	17.6%	17.3%
↓ READM30 AMI Acute myocardial infarction (AMI) 30day readmission rate	12.9%	12.9%	2.4%	5.9%	8.9%	11.6%	12.1%	7.9%	17.9%	0.0%	20.0%	57.1%
↓ READM30HF Heart Failure 30Day readmissions rate	20.5%	23.6%	20.1%	14.3%	22.6%	23.1%	22.1%	26.3%	18.8%	20.0%	19.0%	20.0%
↓ READM30PN Pneumonia 30day readmission rate	17.7%	16.7%	16.1%	12.4%	14.7%	17.2%	18.9%	14.1%	16.3%	9.2%	18.7%	6.7%
↓ READM30 STK Stroke 30day readmission rate	9.3%	10.4%	10.0%	4.0%	13.4%	9.7%	9.9%	14.4%	11.8%	5.0%	7.1%	0.0%
↓ READM30 CABG Coronary artery bypass graft (CABG) surgery 30day readmission rate2	8.7%	12.5%	--	--	10.0%	13.0%	--	--	--	--	--	--
↓ READM30 HIPKNEE 30day readmission rate following elective THA / TKA	3.8%	3.8%	0.0%	0.0%	1.8%	3.5%	7.3%	1.0%	3.1%	10.2%	--	--
↓ READM30 HOSPWIDE 30day hospitalwide allcause unplanned readmission	12.0%	13.1%	9.2%	11.8%	13.1%	12.0%	11.5%	13.9%	9.7%	10.2%	15.0%	13.2%
<b>Readmissions &amp; deaths 30 day death (mortality) rates %</b>												
↓ MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate	2.0%	3.0%	--	--	3.3%	3.1%	--	--	--	--	--	--
↓ MORT30 COPD 30day mortality rate COPD patients	1.8%	2.6%	0.7%	0.7%	0.0%	2.3%	0.7%	5.1%	1.5%	0.0%	0.9%	2.0%
↓ MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate	4.7%	4.9%	8.9%	11.8%	3.8%	3.5%	3.0%	7.3%	0.0%	0.0%	--	0.0%
↓ MORT30HF Heart failure 30day mortality rate	3.9%	3.0%	1.4%	3.9%	3.7%	1.9%	2.3%	4.3%	5.5%	1.7%	3.4%	5.4%
↓ MORT30PN Pneumonia 30day mortality rate	4.7%	5.5%	1.6%	2.3%	3.4%	4.6%	4.2%	5.8%	2.8%	3.8%	2.1%	3.8%
↓ MORT30STK Stroke 30day mortality rate	8.2%	5.4%	2.5%	5.9%	15.0%	3.3%	2.4%	6.3%	4.5%	5.3%	--	0.0%
<b>Use of medical imaging Outpatient imaging efficiency %</b>												
↕ OP8 MRI Lumbar Spine for Low Back Pain	38.0%	34.1%	42.9%	--	43.2%	43.2%	35.4%	--	--	--	--	--
↕ OP9 Mammography Followup Rates	8.0%	6.9%	3.2%	--	9.1%	9.1%	3.4%	--	3.8%	--	1.4%	--
↕ OP10 Abdomen CT Use of Contrast Material	6.0%	7.0%	4.7%	--	4.0%	4.0%	2.0%	--	0.5%	--	3.3%	--
↕ OP11 Thorax CT Use of Contrast Material	1.0%	0.7%	0.8%	--	0.2%	0.2%	0.8%	--	0.0%	--	1.1%	--
↕ OP13 Outpatients who got cardiac imaging stress tests before lowrisk outpatient surgery	3.0%	3.8%	2.6%	--	4.0%	4.0%	4.7%	--	3.7%	--	3.8%	--
↕ OP14 Outpatients with brain CT scans who got a sinus CT scan at the same time	2.0%	1.0%	0.5%	--	0.8%	0.8%	1.0%	--	0.0%	--	--	--



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	<b>Ballad Health</b>		<b>Sycamore Shoals Hospital</b>		<b>Johnson County Community Hospital</b>		<b>Unicoi County Memorial Hospital</b>		<b>Laughlin Memorial Hospital</b>		<b>Takoma Regional Hospital</b>	
	Baseline	FYTD18	Baseline	FYTD18	Baseline	FYTD18	Baseline	FYTD18	Baseline	FYTD18	Baseline	FYTD18
↓ Hip and Knee Complications2	0.0	0.0	0.0	0.0	--	--	--	--	--	--	--	--
↓ PSI90 Complications / patient safety for selected indicators	0.83	--	0.87	--	--	--	0.82	--	1.09	--	1.05	--
↓ PSI4SURG COMP Death rate among surgical patients with serious treatable complications	140.60	176.72	--	125.00	--	--	--	--	135.88	--	--	--
<b>Readmissions &amp; deaths 30 day rates of readmission %</b>												
↓ READM30 COPD Chronic obstructive pulmonary disease 30day readmission rate	18.2%	19.4%	14.6%	14.7%	--	--	--	--	19.8%	--	19.1%	3.2%
↓ READM30 AMI Acute myocardial infarction (AMI) 30day readmission rate	12.9%	12.9%	17.5%	0.0%	--	--	--	--	16.6%	--	--	0.0%
↓ READM30HF Heart Failure 30Day readmissions rate	20.5%	23.6%	16.1%	18.4%	--	--	--	--	24.2%	--	21.3%	8.6%
↓ READM30PN Pneumonia 30day readmission rate	17.7%	16.7%	--	13.3%	--	--	--	--	18.3%	--	17.1%	12.2%
↓ READM30 STK Stroke 30day readmission rate	9.3%	10.4%	7.2%	10.5%	--	--	--	--	12.1%	--	12.2%	0.0%
↓ READM30 CABG Coronary artery bypass graft (CABG) surgery 30day readmission rate2	8.7%	12.5%	--	--	--	--	--	--	--	--	--	--
↓ READM30 HIPKNEE 30day readmission rate following elective THA / TKA	3.8%	3.8%	3.3%	3.9%	--	--	--	--	3.8%	--	4.5%	7.4%
↓ READM30 HOSPWIDE 30day hospitalwide allcause unplanned readmission	12.0%	13.1%	10.4%	9.6%	--	--	--	--	16.3%	--	15.2%	3.9%
<b>Readmissions &amp; deaths 30 day death (mortality) rates %</b>												
↓ MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate	2.0%	3.0%	--	--	--	--	--	--	--	--	--	--
↓ MORT30 COPD 30day mortality rate COPD patients	1.8%	2.6%	0.7%	2.0%	--	--	--	--	6.9%	--	8.9%	--
↓ MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate	4.7%	4.9%	10.0%	7.7%	--	--	--	--	14.7%	--	--	--
↓ MORT30HF Heart failure 30day mortality rate	3.9%	3.0%	3.5%	3.8%	--	--	--	--	15.4%	--	12.5%	--
↓ MORT30PN Pneumonia 30day mortality rate	4.7%	5.5%	3.8%	5.0%	--	--	--	--	19.9%	--	14.1%	--
↓ MORT30STK Stroke 30day mortality rate	8.2%	5.4%	0.0%	5.0%	--	--	--	--	14.1%	--	15.1%	--
<b>Use of medical imaging Outpatient imaging efficiency %</b>												
↕ OP8 MRI Lumbar Spine for Low Back Pain	38.0%	34.1%	--	--	--	--	--	--	47.8%	--	--	--
↕ OP9 Mammography Followup Rates	8.0%	6.9%	7.2%	--	--	--	4.7%	--	17.7%	--	17.7%	--
↕ OP10 Abdomen CT Use of Contrast Material	6.0%	7.0%	3.2%	--	--	--	4.7%	--	7.1%	--	6.9%	--
↕ OP11 Thorax CT Use of Contrast Material	1.0%	0.7%	0.5%	--	--	--	0.0%	--	3.2%	--	1.3%	--
↕ OP13 Outpatients who got cardiac imaging stress tests before lowrisk outpatient surgery	3.0%	3.8%	0.0%	--	--	--	--	--	4.1%	--	9.4%	--
↕ OP14 Outpatients with brain CT scans who got a sinus CT scan at the same time	2.0%	1.0%	1.2%	--	--	--	0.7%	--	2.0%	--	--	--



**Ballad Health**  
FYTD2018 March 2018

		Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18
<b>Target Quality Measures</b>						
↓	Pressure Ulcer Rate	0.71	0.00	1.63	1.00	0.90
↓	Iatrogenic Pneumothorax Rate	0.38	0.40	0.15	0.20	0.25
↓	Central Venous CatheterRelated Blood Stream Infection Rate	0.15	0.00	0.00	0.00	0.00
↓	Postoperative Hip Fracture Rate	0.06	0.89	0.00	0.00	0.28
↓	PSI 09 Perioperative Hemorrhage or Hematoma Rate	4.15	2.35	1.95	1.34	1.87
↓	PSI 10 Postoperative Physiologic and Metabolic Derangement Rate	1.00	0.89	0.00	0.00	0.28
↓	PSI 11 Postoperative Respiratory Failure Rate	14.79	6.73	9.07	8.03	7.99
↓	PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	5.42	3.21	3.83	2.49	3.18
↓	PSI 13 Postoperative Sepsis Rate	8.81	4.65	3.39	2.19	3.39
↓	PSI 14 Postoperative Wound Dehiscence Rate	2.22	0.98	1.52	0.80	1.12
↓	PSI 15 Accidental Puncture or Laceration Rate	1.34	1.60	0.69	0.72	0.92
↓	CLABSI	0.774	0.721	0.601	0.770	0.694
↓	CAUTI	0.613	0.658	0.738	0.379	0.592
↓	SSI COLON Surgical Site Infection	1.166	2.510	2.174	1.117	2.006
↓	SSI HYST Surgical Site Infection	0.996	0.000	0.526	0.000	0.231
↓	MRSA	0.040	0.037	0.054	0.040	0.043
↓	CDIFF	0.585	0.705	0.608	0.888	0.711
<b>General Information-Structural Measures</b>						
Yes	SMPART NURSE Nursing Care Registry	--	--	--	--	--
Yes	ACS REGISTRY	--	--	--	--	--
Yes	SMPART GENSURG General Surgery Registry	--	--	--	--	--
Yes	OP12 HIT Ability electronically receive lab results	--	--	--	--	--
Yes	OP17 Tracking Clinical Results Between Visits	--	--	--	--	--
Yes	OP25 Outpatient Safe Surgery Checklist	--	--	--	--	--
Yes	SMSSCHECK Safe Surgery Checklist	Yes	Yes	Yes	Yes	Yes
<b>Survey of Patient's Experiences - Hospital Consumer Assessment of Healthcare Providers and Systems Survey (HCAHPS)</b>						
↑	HCOMP1A P Patients who reported that their nurses "Always" communicated well	82.1%	77.5%	76.8%	77.0%	77.1%
↓	HCOMP1U P Patients who reported that their nurses "Usually" communicated well	13.1%	14.1%	13.9%	14.4%	14.1%
↓	HCOMP1 SNP Patients who reported that their nurses "Sometimes" or "Never" communicated well	4.6%	5.2%	5.4%	5.3%	5.3%
↑	HCOMP2A P Patients who reported that their doctors "Always" communicated well	80.0%	79.6%	80.1%	80.0%	79.9%
↓	HCOMP2U P Patients who reported that their doctors "Usually" communicated well	13.6%	14.1%	14.7%	13.9%	14.2%
↓	HCOMP2 SNP Patients who reported that their doctors "Sometimes" or "Never" communicated well	6.3%	6.3%	5.3%	6.1%	5.9%
↑	HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	67.6%	66.5%	68.0%	65.9%	66.8%
↓	HCOMP3U P Patients who reported that they "Usually" received help as soon as they wanted	25.8%	23.3%	23.5%	23.8%	23.5%
↓	HCOMP3 SNP Patients who reported that they "Sometimes" or "Never" received help as soon as they wanted	9.1%	9.7%	9.7%	10.3%	9.9%
↑	HCOMP4A P Patients who reported that their pain was "Always" well controlled	68.4%	68.6%	70.9%	--	69.7%
↓	HCOMP4U P Patients who reported that their pain was "Usually" well controlled	22.7%	23.1%	21.0%	--	22.1%
↓	HCOMP4 SNP Patients who reported that their pain was "Sometimes" or "Never" well controlled	9.3%	8.7%	7.8%	--	8.3%
↑	HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them	64.1%	64.9%	65.0%	63.3%	64.3%
↓	HCOMP5U P Patients who reported that staff "Usually" explained about medicines before giving it to them	19.9%	16.4%	16.1%	17.0%	16.5%



**Franklin Woods Community Hospital**

**Johnson City Medical Center**

**FYTD2018 March 2018**

	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18
<b>Target Quality Measures</b>										
↓ Pressure Ulcer Rate	0.30	0.00	0.00	0.00	0.00	0.26	0.00	0.00	0.00	0.00
↓ Iatrogenic Pneumothorax Rate	0.38	0.00	0.00	0.00	0.00	0.26	0.67	0.17	0.00	0.28
↓ Central Venous CatheterRelated Blood Stream Infection Rate	0.15	--	--	--	--	0.10	0.00	0.00	--	0.00
↓ Postoperative Hip Fracture Rate	0.06	0.00	0.98	0.00	0.33	0.06	0.00	0.00	0.00	0.00
↓ PSI 09 Perioperative Hemorrhage or Hematoma Rate	4.37	0.00	0.00	4.44	1.58	3.60	0.80	0.73	1.49	1.01
↓ PSI 10 Postoperative Physiologic and Metabolic Derangement Rate	1.09	0.00	0.00	0.00	0.00	1.08	1.88	0.00	0.00	0.58
↓ PSI 11 Postoperative Respiratory Failure Rate	12.09	35.40	16.13	16.39	22.28	11.98	0.00	8.26	2.17	3.69
↓ PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	4.36	0.00	0.00	4.27	1.50	5.85	2.93	5.98	3.42	4.16
↓ PSI 13 Postoperative Sepsis Rate	0.00	34.48	0.00	7.58	13.55	14.88	1.91	1.65	1.71	1.75
↓ PSI 14 Postoperative Wound Dehiscence Rate	2.15	0.00	0.00	7.04	2.29	2.35	3.37	2.95	0.00	2.12
↓ PSI 15 Accidental Puncture or Laceration Rate	1.45	3.64	0.00	0.00	1.13	1.34	1.54	0.00	0.00	0.50
↓ CLABSI	0.000	0.000	3.922	0.000	1.138	1.080	0.623	1.456	1.620	1.207
↓ CAUTI	0.428	1.538	0.000	0.000	0.545	0.997	1.281	1.875	0.573	1.333
↓ SSI COLON Surgical Site Infection	1.504	8.824	2.778	0.000	4.545	1.911	0.000	2.778	0.000	1.163
↓ SSI HYST Surgical Site Infection	0.000	0.000	1.754	0.000	0.840	2.500	0.000	0.000	0.000	0.000
↓ MRSA	0.039	0.000	0.000	0.000	0.000	0.055	0.057	0.058	0.085	0.064
↓ CDIFF	0.259	0.868	0.000	0.000	0.319	0.531	0.552	0.599	--	0.575
<b>General Information-Structural Measures</b>										
Yes SMPART NURSE Nursing Care Registry	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Yes ACS REGISTRY	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Yes SMPART GENSURG General Surgery Registry	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Yes OP12 HIT Ability electronically receive lab results	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Yes OP17 Tracking Clinical Results Between Visits	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Yes OP25 Outpatient Safe Surgery Checklist	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Yes SMSSCHECK Safe Surgery Checklist	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
<b>Survey of Patient's Experiences - Hospital Consumer Assessment of Healthcare Providers and Systems Sur</b>										
↑ HCOMP1A P Patients who reported that their nurses "Always" communicated well	84.0%	83.5%	81.8%	82.7%	82.6%	77.0%	78.4%	77.0%	77.4%	77.6%
↓ HCOMP1U P Patients who reported that their nurses "Usually" communicated well	13.0%	13.3%	14.0%	13.1%	13.5%	17.0%	15.7%	16.6%	17.4%	16.6%
↓ HCOMP1 SNP Patients who reported that their nurses "Sometimes" or "Never" communicated well	3.0%	3.2%	4.2%	4.2%	3.9%	6.0%	5.9%	6.4%	5.3%	5.8%
↑ HCOMP2A P Patients who reported that their doctors "Always" communicated well	84.0%	82.5%	79.9%	82.4%	81.6%	77.0%	76.7%	75.1%	75.6%	75.8%
↓ HCOMP2U P Patients who reported that their doctors "Usually" communicated well	15.0%	12.8%	15.2%	14.6%	14.2%	18.0%	16.0%	19.4%	17.5%	17.6%
↓ HCOMP2 SNP Patients who reported that their doctors "Sometimes" or "Never" communicated well	4.0%	4.6%	4.9%	3.0%	4.2%	5.0%	7.4%	5.5%	6.9%	6.6%
↑ HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	72.0%	71.2%	70.0%	70.7%	70.6%	66.0%	63.6%	62.8%	63.0%	63.1%
↓ HCOMP3U P Patients who reported that they "Usually" received help as soon as they wanted	21.0%	22.8%	22.4%	21.0%	22.1%	25.0%	24.5%	26.1%	26.2%	25.6%
↓ HCOMP3 SNP Patients who reported that they "Sometimes" or "Never" received help as soon as they wanted	7.0%	6.0%	7.5%	8.3%	7.3%	9.0%	11.8%	11.1%	10.8%	11.3%
↑ HCOMP4A P Patients who reported that their pain was "Always" well controlled	76.0%	74.1%	72.0%	--	73.1%	66.0%	63.5%	66.9%	--	65.0%
↓ HCOMP4U P Patients who reported that their pain was "Usually" well controlled	19.0%	21.6%	22.9%	--	22.2%	25.0%	26.6%	24.6%	--	25.7%
↓ HCOMP4 SNP Patients who reported that their pain was "Sometimes" or "Never" well controlled	5.0%	4.3%	5.0%	--	4.7%	9.0%	10.0%	8.5%	--	9.3%
↑ HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them	68.0%	70.7%	65.4%	68.6%	68.3%	60.0%	59.8%	61.3%	59.3%	60.1%
↓ HCOMP5U P Patients who reported that staff "Usually" explained about medicines before giving it to them	16.0%	15.5%	18.2%	14.4%	15.9%	18.0%	17.9%	17.2%	18.7%	18.0%



**Dickenson County Hospital**

**Hancock County Hospital**

**FYTD2018 March 2018**

		Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18
<b>Target Quality Measures</b>											
↓	Pressure Ulcer Rate	--	--	--	--	--	--	0.00	0.00	0.00	0.00
↓	Iatrogenic Pneumothorax Rate	--	--	--	--	--	--	0.00	0.00	0.00	0.00
↓	Central Venous CatheterRelated Blood Stream Infection Rate	--	--	--	--	--	--	0.00	0.00	0.00	0.00
↓	Postoperative Hip Fracture Rate	--	--	--	--	--	--	0.00	0.00	0.00	0.00
↓	PSI 09 Perioperative Hemorrhage or Hematoma Rate	--	--	--	--	--	--	--	--	--	--
↓	PSI 10 Postoperative Physiologic and Metabolic Derangement Rate	--	--	--	--	--	--	--	--	--	--
↓	PSI 11 Postoperative Respiratory Failure Rate	--	--	--	--	--	--	--	--	--	--
↓	PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	--	--	--	--	--	--	--	--	--	--
↓	PSI 13 Postoperative Sepsis Rate	--	--	--	--	--	--	--	--	--	--
↓	PSI 14 Postoperative Wound Dehiscence Rate	--	--	--	--	--	--	--	--	--	--
↓	PSI 15 Accidental Puncture or Laceration Rate	--	--	--	--	--	--	--	--	--	--
↓	CLABSI	--	--	--	--	--	--	--	--	--	--
↓	CAUTI	--	--	--	--	--	--	--	--	--	--
↓	SSI COLON Surgical Site Infection	--	--	--	--	--	--	--	--	--	--
↓	SSI HYST Surgical Site Infection	--	--	--	--	--	--	--	--	--	--
↓	MRSA	--	--	--	--	--	--	--	--	--	--
↓	CDIFF	--	--	--	--	--	--	--	--	--	--
<b>General Information-Structural Measures</b>											
Yes	SMPART NURSE Nursing Care Registry	--	--	--	--	--	--	--	--	--	--
Yes	ACS REGISTRY	--	--	--	--	--	--	--	--	--	--
Yes	SMPART GENSURG General Surgery Registry	--	--	--	--	--	--	--	--	--	--
Yes	OP12 HIT Ability electronically receive lab results	--	--	--	--	--	--	--	--	--	--
Yes	OP17 Tracking Clinical Results Between Visits	--	--	--	--	--	--	--	--	--	--
Yes	OP25 Outpatient Safe Surgery Checklist	--	--	--	--	--	--	--	--	--	--
Yes	SMSSCHECK Safe Surgery Checklist	--	--	--	--	--	--	--	--	--	--
<b>Survey of Patient's Experiences - Hospital Consumer Assessment of Healthcare Providers and Systems Sun</b>											
↑	HCOMP1A P Patients who reported that their nurses "Always" communicated well	--	100.0%	100.0%	0.0%	66.7%	90.0%	77.8%	95.5%	91.4%	90.9%
↓	HCOMP1U P Patients who reported that their nurses "Usually" communicated well	--	0.0%	0.0%	100.0%	33.3%	8.0%	11.1%	4.5%	2.9%	4.5%
↓	HCOMP1 SNP Patients who reported that their nurses "Sometimes" or "Never" communicated well	--	0.0%	0.0%	0.0%	0.0%	2.0%	11.1%	0.0%	5.7%	4.5%
↑	HCOMP2A P Patients who reported that their doctors "Always" communicated well	--	100.0%	100.0%	100.0%	100.0%	92.0%	77.8%	69.6%	91.4%	82.1%
↓	HCOMP2U P Patients who reported that their doctors "Usually" communicated well	--	0.0%	0.0%	0.0%	0.0%	6.0%	22.2%	21.7%	2.9%	11.9%
↓	HCOMP2 SNP Patients who reported that their doctors "Sometimes" or "Never" communicated well	--	0.0%	0.0%	0.0%	0.0%	2.0%	0.0%	8.7%	5.7%	6.0%
↑	HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	--	100.0%	100.0%	100.0%	100.0%	95.0%	100.0%	100.0%	94.1%	96.9%
↓	HCOMP3U P Patients who reported that they "Usually" received help as soon as they wanted	--	0.0%	0.0%	0.0%	0.0%	4.0%	0.0%	0.0%	5.9%	3.1%
↓	HCOMP3 SNP Patients who reported that they "Sometimes" or "Never" received help as soon as they wanted	--	0.0%	0.0%	0.0%	0.0%	1.0%	0.0%	0.0%	0.0%	0.0%
↑	HCOMP4A P Patients who reported that their pain was "Always" well controlled	--	100.0%	100.0%	--	100.0%	89.0%	33.3%	33.3%	--	33.3%
↓	HCOMP4U P Patients who reported that their pain was "Usually" well controlled	--	0.0%	0.0%	--	0.0%	5.0%	33.3%	16.7%	--	25.0%
↓	HCOMP4 SNP Patients who reported that their pain was "Sometimes" or "Never" well controlled	--	0.0%	0.0%	--	0.0%	1.0%	33.3%	50.0%	--	41.7%
↑	HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them	--	100.0%	100.0%	--	100.0%	77.0%	50.0%	100.0%	90.9%	85.7%
↓	HCOMP5U P Patients who reported that staff "Usually" explained about medicines before giving it to them	--	0.0%	0.0%	--	0.0%	18.0%	0.0%	0.0%	9.1%	4.8%



**Hawkins County Memorial Hospital**

**Holston Valley Medical Center**

**FYTD2018 March 2018**

	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18
<b>Target Quality Measures</b>										
↓ Pressure Ulcer Rate	0.45	0.00	0.00	0.00	0.00	1.07	0.00	4.72	3.45	2.91
↓ Iatrogenic Pneumothorax Rate	0.40	0.00	0.00	0.00	0.00	0.57	0.48	0.24	0.71	0.48
↓ Central Venous CatheterRelated Blood Stream Infection Rate	0.17	0.00	0.00	0.00	0.00	0.16	0.00	0.00	0.00	0.00
↓ Postoperative Hip Fracture Rate	--	0.00	0.00	0.00	0.00	0.06	0.00	0.00	0.26	0.09
↓ PSI 09 Perioperative Hemorrhage or Hematoma Rate	--	0.00	0.00	0.00	0.00	4.04	4.10	1.44	0.00	1.77
↓ PSI 10 Postoperative Physiologic and Metabolic Derangement Rate	--	0.00	0.00	0.00	0.00	0.87	1.40	0.00	0.00	0.43
↓ PSI 11 Postoperative Respiratory Failure Rate	--	0.00	0.00	0.00	0.00	16.84	3.85	8.10	1.68	4.62
↓ PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	--	0.00	0.00	0.00	0.00	6.14	4.46	4.73	0.70	3.29
↓ PSI 13 Postoperative Sepsis Rate	--	0.00	0.00	0.00	0.00	9.47	5.78	2.47	1.29	3.08
↓ PSI 14 Postoperative Wound Dehiscence Rate	--	0.00	0.00	0.00	0.00	2.42	0.00	3.37	0.00	1.30
↓ PSI 15 Accidental Puncture or Laceration Rate	1.36	0.00	0.00	0.00	0.00	1.62	4.27	0.00	1.68	1.34
↓ CLABSI	0.000	0.000	0.000	0.000	0.000	0.682	0.667	0.000	0.304	0.324
↓ CAUTI	0.000	0.000	0.000	0.000	0.000	0.938	0.307	0.530	0.535	0.464
↓ SSI COLON Surgical Site Infection	0.000	0.000	0.000	0.000	0.000	1.364	1.754	1.724	0.000	1.250
↓ SSI HYST Surgical Site Infection	--	--	--	--	--	0.641	0.000	0.000	0.000	0.000
↓ MRSA	0.000	0.000	0.000	0.000	0.000	0.012	0.000	0.091	0.000	0.030
↓ CDIFF	0.000	0.000	1.025	0.000	0.341	0.741	0.688	0.997	1.610	1.108
<b>General Information-Structural Measures</b>										
Yes SMPART NURSE Nursing Care Registry	No	No	No	No	No	Yes	Yes	Yes	Yes	Yes
Yes ACS REGISTRY	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Yes SMPART GENSURG General Surgery Registry	No	No	No	No	No	Yes	Yes	Yes	Yes	Yes
Yes OP12 HIT Ability electronically receive lab results	Yes	No	No	No	No	Yes	No	No	No	No
Yes OP17 Tracking Clinical Results Between Visits	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Yes OP25 Outpatient Safe Surgery Checklist	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Yes SMSSCHECK Safe Surgery Checklist	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
<b>Survey of Patient's Experiences - Hospital Consumer Assessment of Healthcare Providers and Systems Sur</b>										
↑ HCOMP1A P Patients who reported that their nurses "Always" communicated well	87.0%	81.4%	84.8%	78.3%	81.5%	81.0%	80.8%	81.6%	80.3%	80.9%
↓ HCOMP1U P Patients who reported that their nurses "Usually" communicated well	11.0%	10.9%	8.6%	15.9%	11.9%	16.0%	13.8%	11.4%	13.1%	12.8%
↓ HCOMP1 SNP Patients who reported that their nurses "Sometimes" or "Never" communicated well	2.0%	7.7%	6.6%	5.7%	6.7%	3.0%	5.4%	7.0%	6.6%	6.3%
↑ HCOMP2A P Patients who reported that their doctors "Always" communicated well	92.0%	78.6%	81.7%	71.3%	77.2%	82.0%	80.2%	80.8%	79.9%	80.3%
↓ HCOMP2U P Patients who reported that their doctors "Usually" communicated well	7.0%	8.8%	11.8%	14.6%	11.7%	15.0%	13.3%	12.0%	12.0%	12.5%
↓ HCOMP2 SNP Patients who reported that their doctors "Sometimes" or "Never" communicated well	1.0%	12.6%	6.5%	14.0%	11.1%	3.0%	6.4%	7.2%	8.1%	7.2%
↑ HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	78.0%	73.4%	80.3%	73.4%	75.4%	66.0%	65.8%	66.7%	61.1%	64.6%
↓ HCOMP3U P Patients who reported that they "Usually" received help as soon as they wanted	20.0%	19.0%	15.2%	13.9%	16.1%	26.0%	23.5%	23.2%	27.7%	24.7%
↓ HCOMP3 SNP Patients who reported that they "Sometimes" or "Never" received help as soon as they wanted	2.0%	7.6%	4.5%	12.7%	8.5%	8.0%	10.7%	10.1%	11.2%	10.7%
↑ HCOMP4A P Patients who reported that their pain was "Always" well controlled	81.0%	70.0%	63.6%	--	67.5%	73.0%	71.9%	71.5%	--	71.7%
↓ HCOMP4U P Patients who reported that their pain was "Usually" well controlled	13.0%	15.7%	22.7%	--	18.4%	21.0%	18.8%	22.1%	--	20.4%
↓ HCOMP4 SNP Patients who reported that their pain was "Sometimes" or "Never" well controlled	6.0%	14.3%	13.6%	--	14.0%	6.0%	9.3%	6.4%	--	7.9%
↑ HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them	83.0%	66.7%	77.8%	55.3%	65.6%	63.0%	71.4%	69.4%	63.1%	68.0%
↓ HCOMP5U P Patients who reported that staff "Usually" explained about medicines before giving it to them	10.0%	11.9%	8.3%	27.7%	16.8%	17.0%	12.5%	14.6%	18.0%	15.0%



**Indian Path Medical Center** **Lonesome Pine Hospital**

**FYTD2018 March 2018** Baseline FY18Q1 FY18Q2 FY18Q3 FYTD18 Baseline FY18Q1 FY18Q2 FY18Q3 FYTD18

<b>Target Quality Measures</b>											
↓	Pressure Ulcer Rate	0.23	0.00	0.00	0.00	0.00	1.29	0.00	0.00	0.00	0.00
↓	Iatrogenic Pneumothorax Rate	0.45	0.00	0.00	0.94	0.33	0.38	0.00	0.00	0.00	0.00
↓	Central Venous CatheterRelated Blood Stream Infection Rate	0.14	--	--	--	--	0.16	0.00	0.00	0.00	0.00
↓	Postoperative Hip Fracture Rate	0.06	0.00	0.00	0.00	0.00	0.06	0.00	0.00	0.00	0.00
↓	PSI 09 Perioperative Hemorrhage or Hematoma Rate	4.78	0.00	0.00	0.00	0.00	4.69	0.00	0.00	0.00	0.00
↓	PSI 10 Postoperative Physiologic and Metabolic Derangement Rate	1.10	0.00	0.00	0.00	0.00	1.12	0.00	0.00	0.00	0.00
↓	PSI 11 Postoperative Respiratory Failure Rate	12.36	0.00	9.52	9.62	6.29	10.64	0.00	0.00	0.00	0.00
↓	PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	5.38	0.00	4.17	4.15	2.70	4.61	0.00	0.00	0.00	0.00
↓	PSI 13 Postoperative Sepsis Rate	9.09	8.85	9.35	0.00	6.19	5.82	0.00	0.00	0.00	0.00
↓	PSI 14 Postoperative Wound Dehiscence Rate	2.20	0.00	0.00	0.00	0.00	2.26	0.00	0.00	0.00	0.00
↓	PSI 15 Accidental Puncture or Laceration Rate	1.38	0.00	0.00	0.00	0.00	1.34	0.00	0.00	0.00	0.00
↓	CLABSI	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
↓	CAUTI	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	3.891	1.733
↓	SSI COLON Surgical Site Infection	0.000	0.000	6.667	0.000	2.222	0.000	--	--	0.000	0.000
↓	SSI HYST Surgical Site Infection	7.143	0.000	0.000	0.000	0.000	5.556	0.000	0.000	--	0.000
↓	MRSA	0.080	0.000	0.000	0.261	0.068	0.000	0.000	0.000	0.000	0.000
↓	CDIFF	0.813	0.640	0.918	--	0.790	0.315	1.529	0.000	0.000	0.482
<b>General Information-Structural Measures</b>											
Yes	SMPART NURSE Nursing Care Registry	Yes									
Yes	ACS REGISTRY	Yes									
Yes	SMPART GENSURG General Surgery Registry	Yes									
Yes	OP12 HIT Ability electronically receive lab results	Yes	Yes	Yes	Yes	Yes	Yes	No	No	No	No
Yes	OP17 Tracking Clinical Results Between Visits	Yes									
Yes	OP25 Outpatient Safe Surgery Checklist	Yes									
Yes	SMSSCHECK Safe Surgery Checklist	Yes									
<b>Survey of Patient's Experiences - Hospital Consumer Assessment of Healthcare Providers and Systems Sur</b>											
↑	HCOMP1A P Patients who reported that their nurses "Always" communicated well	82.0%	79.7%	81.0%	78.8%	79.8%	83.0%	83.6%	82.0%	85.7%	83.7%
↓	HCOMP1U P Patients who reported that their nurses "Usually" communicated well	14.0%	16.4%	14.8%	15.8%	15.6%	12.0%	9.6%	10.3%	6.2%	8.8%
↓	HCOMP1 SNP Patients who reported that their nurses "Sometimes" or "Never" communicated well	4.0%	3.9%	4.2%	5.4%	4.5%	5.0%	6.8%	7.6%	8.1%	7.4%
↑	HCOMP2A P Patients who reported that their doctors "Always" communicated well	85.0%	82.1%	82.1%	82.0%	82.1%	82.0%	82.0%	85.0%	81.7%	82.8%
↓	HCOMP2U P Patients who reported that their doctors "Usually" communicated well	10.0%	13.8%	14.1%	12.5%	13.5%	13.0%	11.7%	9.3%	10.3%	10.5%
↓	HCOMP2 SNP Patients who reported that their doctors "Sometimes" or "Never" communicated well	5.0%	4.1%	3.8%	5.5%	4.4%	5.0%	6.3%	6.2%	7.3%	6.6%
↑	HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	65.0%	68.4%	69.2%	60.9%	66.2%	72.0%	78.6%	80.6%	79.3%	79.6%
↓	HCOMP3U P Patients who reported that they "Usually" received help as soon as they wanted	25.0%	25.3%	21.4%	26.2%	24.3%	20.0%	15.1%	9.2%	12.1%	12.3%
↓	HCOMP3 SNP Patients who reported that they "Sometimes" or "Never" received help as soon as they wanted	10.0%	6.3%	9.4%	12.9%	9.5%	8.0%	6.3%	9.2%	8.6%	8.0%
↑	HCOMP4A P Patients who reported that their pain was "Always" well controlled	72.0%	70.4%	79.8%	--	74.6%	75.0%	77.4%	79.3%	--	78.5%
↓	HCOMP4U P Patients who reported that their pain was "Usually" well controlled	22.0%	24.7%	16.4%	--	21.0%	18.0%	9.5%	13.5%	--	11.5%
↓	HCOMP4 SNP Patients who reported that their pain was "Sometimes" or "Never" well controlled	6.0%	4.9%	3.8%	--	4.4%	7.0%	13.1%	6.0%	--	9.6%
↑	HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them	63.0%	63.0%	62.1%	63.5%	62.9%	71.0%	77.4%	72.3%	73.3%	74.7%
↓	HCOMP5U P Patients who reported that staff "Usually" explained about medicines before giving it to them	18.0%	19.5%	16.8%	16.5%	17.6%	13.0%	9.4%	7.7%	10.0%	9.2%



**Norton Community Hospital**

**Bristol Regional Medical Center**

FYTD2018 March 2018

	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18
<b>Target Quality Measures</b>										
↓ Pressure Ulcer Rate	0.33	0.00	0.00	0.00	0.00	0.80	0.00	3.64	1.57	1.80
↓ Iatrogenic Pneumothorax Rate	0.38	0.00	1.66	0.00	0.54	0.32	0.29	0.00	0.00	0.10
↓ Central Venous CatheterRelated Blood Stream Infection Rate	0.15	0.00	0.00	--	0.00	0.09	0.00	0.00	0.00	0.00
↓ Postoperative Hip Fracture Rate	0.06	0.00	0.00	0.00	0.00	0.06	0.00	0.34	0.32	0.23
↓ PSI 09 Perioperative Hemorrhage or Hematoma Rate	4.96	0.00	0.00	0.00	0.00	4.72	3.58	6.89	3.45	4.65
↓ PSI 10 Postoperative Physiologic and Metabolic Derangement Rate	1.10	0.00	0.00	0.00	0.00	0.97	7.45	0.00	0.00	2.57
↓ PSI 11 Postoperative Respiratory Failure Rate	12.33	0.00	0.00	0.00	0.00	16.50	9.15	11.36	19.18	13.14
↓ PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	4.14	0.00	0.00	0.00	0.00	4.25	2.17	2.19	1.09	1.82
↓ PSI 13 Postoperative Sepsis Rate	35.72	0.00	0.00	0.00	0.00	8.88	0.00	6.17	4.10	3.38
↓ PSI 14 Postoperative Wound Dehiscence Rate	2.79	0.00	0.00	0.00	0.00	1.95	0.00	0.00	0.00	0.00
↓ PSI 15 Accidental Puncture or Laceration Rate	1.74	0.00	0.00	0.00	0.00	1.38	0.00	3.44	1.67	2.27
↓ CLABSI	0.000	0.000	0.000	0.000	0.000	1.202	1.338	0.000	0.834	0.693
↓ CAUTI	0.000	0.000	0.000	0.000	0.000	0.824	1.301	1.047	0.573	0.986
↓ SSI COLON Surgical Site Infection	0.000	0.000	0.000	0.000	0.000	0.000	2.500	0.000	2.857	1.852
↓ SSI HYST Surgical Site Infection	0.000	0.000	0.000	--	0.000	0.000	0.000	0.000	0.000	0.000
↓ MRSA	0.000	0.000	0.000	0.000	0.000	0.056	0.109	0.108	0.000	0.072
↓ CDIFF	0.265	0.782	0.279	0.402	0.493	0.719	1.191	0.505	0.757	0.816
<b>General Information-Structural Measures</b>										
Yes SMPART NURSE Nursing Care Registry	No	No	No	No	No	No	No	No	No	No
Yes ACS REGISTRY	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Yes SMPART GENSURG General Surgery Registry	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Yes OP12 HIT Ability electronically receive lab results	Yes	Yes	Yes	Yes	Yes	No	No	No	No	No
Yes OP17 Tracking Clinical Results Between Visits	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Yes OP25 Outpatient Safe Surgery Checklist	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Yes SMSSCHECK Safe Surgery Checklist	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
<b>Survey of Patient's Experiences - Hospital Consumer Assessment of Healthcare Providers and Systems Sur</b>										
↑ HCOMP1A P Patients who reported that their nurses "Always" communicated well	82.0%	83.3%	84.3%	80.6%	82.7%	82.0%	83.4%	85.7%	84.8%	84.6%
↓ HCOMP1U P Patients who reported that their nurses "Usually" communicated well	14.0%	12.8%	12.6%	15.2%	13.6%	14.0%	10.8%	9.6%	10.1%	10.2%
↓ HCOMP1 SNP Patients who reported that their nurses "Sometimes" or "Never" communicated well	4.0%	3.8%	3.1%	4.2%	3.7%	4.0%	5.8%	4.7%	5.1%	5.2%
↑ HCOMP2A P Patients who reported that their doctors "Always" communicated well	85.0%	80.4%	87.1%	76.9%	81.3%	84.0%	82.5%	83.5%	82.8%	82.9%
↓ HCOMP2U P Patients who reported that their doctors "Usually" communicated well	11.0%	15.4%	11.2%	19.9%	15.6%	14.0%	11.5%	10.7%	10.1%	10.7%
↓ HCOMP2 SNP Patients who reported that their doctors "Sometimes" or "Never" communicated well	4.0%	4.2%	1.7%	3.3%	3.1%	2.0%	6.0%	5.9%	7.3%	6.4%
↑ HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	70.0%	70.4%	61.1%	65.6%	65.8%	69.0%	65.5%	81.4%	70.9%	71.8%
↓ HCOMP3U P Patients who reported that they "Usually" received help as soon as they wanted	22.0%	19.3%	28.6%	24.4%	24.0%	23.0%	23.5%	21.5%	18.2%	21.0%
↓ HCOMP3 SNP Patients who reported that they "Sometimes" or "Never" received help as soon as they wanted	8.0%	10.4%	10.3%	9.9%	10.2%	8.0%	7.6%	8.4%	10.9%	9.0%
↑ HCOMP4A P Patients who reported that their pain was "Always" well controlled	71.0%	56.7%	63.4%	--	60.3%	74.0%	72.5%	76.3%	--	74.2%
↓ HCOMP4U P Patients who reported that their pain was "Usually" well controlled	22.0%	32.0%	30.4%	--	31.1%	21.0%	19.2%	13.8%	--	16.8%
↓ HCOMP4 SNP Patients who reported that their pain was "Sometimes" or "Never" well controlled	7.0%	11.3%	6.3%	--	8.6%	5.0%	8.3%	9.8%	--	9.0%
↑ HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them	66.0%	71.2%	70.0%	63.0%	67.6%	67.0%	68.0%	66.2%	67.5%	67.3%
↓ HCOMP5U P Patients who reported that staff "Usually" explained about medicines before giving it to them	14.0%	15.4%	12.9%	19.3%	16.4%	17.0%	14.1%	14.5%	13.9%	14.1%



**Johnston Memorial Hospital**      **Smyth County Community Hospital**

**FYTD2018 March 2018**    Baseline    FY18Q1    FY18Q2    FY18Q3    FYTD18    Baseline    FY18Q1    FY18Q2    FY18Q3    FYTD18

<b>Target Quality Measures</b>											
↓	Pressure Ulcer Rate	1.08	0.00	0.00	0.00	0.00	0.35	0.00	0.00	0.00	0.00
↓	Iatrogenic Pneumothorax Rate	0.34	0.55	0.00	0.00	0.20	0.39	0.00	0.00	0.00	0.00
↓	Central Venous CatheterRelated Blood Stream Infection Rate	0.13	0.00	0.00	--	0.00	0.16	0.00	0.00	--	0.00
↓	Postoperative Hip Fracture Rate	0.06	0.00	0.00	0.67	0.22	0.06	0.00	0.00	0.00	0.00
↓	PSI 09 Perioperative Hemorrhage or Hematoma Rate	4.50	3.28	0.00	0.00	1.18	4.69	0.00	0.00	0.00	0.00
↓	PSI 10 Postoperative Physiologic and Metabolic Derangement Rate	1.29	0.00	0.00	0.00	0.00	1.12	0.00	0.00	0.00	0.00
↓	PSI 11 Postoperative Respiratory Failure Rate	16.39	23.26	15.15	0.00	13.51	16.04	0.00	0.00	0.00	0.00
↓	PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	5.25	5.92	0.00	3.29	3.21	4.21	0.00	0.00	0.00	0.00
↓	PSI 13 Postoperative Sepsis Rate	10.75	0.00	0.00	0.00	0.00	9.79	0.00	0.00	0.00	0.00
↓	PSI 14 Postoperative Wound Dehiscence Rate	2.11	0.00	0.00	0.00	0.00	2.29	0.00	0.00	0.00	0.00
↓	PSI 15 Accidental Puncture or Laceration Rate	0.64	0.00	0.00	0.00	0.00	1.46	0.00	0.00	0.00	0.00
↓	CLABSI	0.000	0.000	0.000	--	0.000	0.000	0.000	0.000	0.000	0.000
↓	CAUTI	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
↓	SSI COLON Surgical Site Infection	0.000	0.000	0.000	0.000	0.000	16.667	--	--	--	--
↓	SSI HYST Surgical Site Infection	0.000	0.000	0.000	0.000	0.000	0.000	0.000	--	--	0.000
↓	MRSA	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
↓	CDIFF	1.052	0.782	0.279	--	0.539	0.174	0.000	0.000	1.185	0.424
<b>General Information-Structural Measures</b>											
Yes	SMPART NURSE Nursing Care Registry	Yes	Yes	Yes	Yes	Yes	No	No	No	No	No
Yes	ACS REGISTRY	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Yes	SMPART GENSURG General Surgery Registry	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Yes	OP12 HIT Ability electronically receive lab results	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Yes	OP17 Tracking Clinical Results Between Visits	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Yes	OP25 Outpatient Safe Surgery Checklist	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Yes	SMSSCHECK Safe Surgery Checklist	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
<b>Survey of Patient's Experiences - Hospital Consumer Assessment of Healthcare Providers and Systems Sur</b>											
↑	HCOMP1A P Patients who reported that their nurses "Always" communicated well	77.0%	75.6%	76.3%	76.7%	76.2%	85.0%	90.0%	85.7%	84.1%	86.5%
↓	HCOMP1U P Patients who reported that their nurses "Usually" communicated well	17.0%	18.4%	17.8%	17.7%	18.0%	12.0%	7.4%	11.3%	13.4%	10.8%
↓	HCOMP1 SNP Patients who reported that their nurses "Sometimes" or "Never" communicated well	6.0%	5.9%	5.9%	5.6%	5.8%	3.0%	2.6%	3.0%	2.5%	2.7%
↑	HCOMP2A P Patients who reported that their doctors "Always" communicated well	80.0%	72.9%	80.9%	81.4%	78.2%	88.0%	87.5%	91.5%	87.1%	88.7%
↓	HCOMP2U P Patients who reported that their doctors "Usually" communicated well	14.0%	19.1%	14.6%	14.0%	16.0%	9.0%	9.4%	7.0%	9.0%	8.4%
↓	HCOMP2 SNP Patients who reported that their doctors "Sometimes" or "Never" communicated well	6.0%	8.0%	4.5%	4.6%	5.8%	3.0%	3.1%	1.5%	4.0%	2.9%
↑	HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	60.0%	54.4%	54.7%	55.5%	54.9%	76.0%	77.3%	76.2%	63.7%	72.3%
↓	HCOMP3U P Patients who reported that they "Usually" received help as soon as they wanted	27.0%	30.1%	33.2%	30.8%	31.3%	18.0%	12.4%	17.8%	27.5%	19.3%
↓	HCOMP3 SNP Patients who reported that they "Sometimes" or "Never" received help as soon as they wanted	13.0%	15.5%	12.0%	13.6%	13.8%	6.0%	10.3%	5.9%	8.8%	8.3%
↑	HCOMP4A P Patients who reported that their pain was "Always" well controlled	68.0%	60.6%	64.6%	--	62.5%	73.0%	74.3%	84.6%	--	79.6%
↓	HCOMP4U P Patients who reported that their pain was "Usually" well controlled	23.0%	28.3%	23.5%	--	26.1%	22.0%	23.0%	11.5%	--	17.1%
↓	HCOMP4 SNP Patients who reported that their pain was "Sometimes" or "Never" well controlled	9.0%	11.1%	11.9%	--	11.5%	5.0%	2.7%	3.8%	--	3.3%
↑	HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them	61.0%	58.3%	64.3%	57.8%	59.9%	73.0%	60.8%	67.8%	71.8%	67.1%
↓	HCOMP5U P Patients who reported that staff "Usually" explained about medicines before giving it to them	16.0%	21.6%	18.1%	18.9%	19.6%	16.0%	18.9%	11.1%	11.8%	13.7%



**Russell County Medical Center**

**Sycamore Shoals Hospital**

**FYTD2018 March 2018**

	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18
<b>Target Quality Measures</b>										
↓ Pressure Ulcer Rate	0.41	0.00	0.00	0.00	0.00	0.31	0.00	0.00	0.00	0.00
↓ Iatrogenic Pneumothorax Rate	0.40	0.00	0.00	0.00	0.00	0.44	0.00	0.00	0.00	0.00
↓ Central Venous CatheterRelated Blood Stream Infection Rate	0.17	0.00	0.00	--	0.00	0.16	0.00	0.00	--	0.00
↓ Postoperative Hip Fracture Rate	--	0.00	0.00	0.00	0.00	0.06	0.00	0.00	0.00	0.00
↓ PSI 09 Perioperative Hemorrhage or Hematoma Rate	--	0.00	0.00	0.00	0.00	4.66	0.00	0.00	0.00	0.00
↓ PSI 10 Postoperative Physiologic and Metabolic Derangement Rate	--	0.00	0.00	0.00	0.00	1.11	0.00	0.00	0.00	0.00
↓ PSI 11 Postoperative Respiratory Failure Rate	--	0.00	0.00	0.00	0.00	13.37	0.00	0.00	17.24	5.65
↓ PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	--	0.00	333.33	--	375.00	5.23	9.80	0.00	8.93	5.88
↓ PSI 13 Postoperative Sepsis Rate	--	0.00	1000.00	--	250.00	0.00	0.00	0.00	17.54	5.78
↓ PSI 14 Postoperative Wound Dehiscence Rate	--	0.00	0.00	0.00	0.00	2.26	0.00	0.00	0.00	0.00
↓ PSI 15 Accidental Puncture or Laceration Rate	1.39	0.00	0.00	0.00	0.00	1.35	0.00	0.00	0.00	0.00
↓ CLABSI	0.000	16.667	0.000	0.000	8.000	0.900	0.000	5.051	0.000	1.585
↓ CAUTI	0.000	0.000	0.000	0.000	0.000	0.000	0.000	2.000	0.000	0.627
↓ SSI COLON Surgical Site Infection	--	--	--	--	--	3.226	0.000	0.000	20.000	5.000
↓ SSI HYST Surgical Site Infection	--	--	--	--	--	0.000	0.000	0.000	0.000	0.000
↓ MRSA	0.000	0.000	0.000	0.000	0.000	0.067	0.000	0.000	0.249	0.087
↓ CDIFF	0.498	0.000	1.410	0.000	0.493	0.604	0.295	1.722	0.497	0.871
<b>General Information-Structural Measures</b>										
Yes SMPART NURSE Nursing Care Registry	No	No	No	No	No	Yes	Yes	Yes	Yes	Yes
Yes ACS REGISTRY	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Yes SMPART GENSURG General Surgery Registry	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Yes OP12 HIT Ability electronically receive lab results	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Yes OP17 Tracking Clinical Results Between Visits	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Yes OP25 Outpatient Safe Surgery Checklist	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Yes SMSSCHECK Safe Surgery Checklist	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
<b>Survey of Patient's Experiences - Hospital Consumer Assessment of Healthcare Providers and Systems Sur</b>										
↑ HCOMP1A P Patients who reported that their nurses "Always" communicated well	87.0%	93.3%	86.5%	91.2%	89.8%	85.0%	5.5%	3.1%	25.9%	11.3%
↓ HCOMP1U P Patients who reported that their nurses "Usually" communicated well	9.0%	1.7%	9.9%	7.9%	7.4%	12.0%	18.3%	16.5%	16.6%	17.1%
↓ HCOMP1 SNP Patients who reported that their nurses "Sometimes" or "Never" communicated well	4.0%	5.0%	3.6%	0.9%	2.8%	3.0%	5.5%	3.1%	5.3%	4.6%
↑ HCOMP2A P Patients who reported that their doctors "Always" communicated well	89.0%	91.2%	86.5%	90.4%	89.0%	86.0%	79.3%	78.3%	80.5%	79.3%
↓ HCOMP2U P Patients who reported that their doctors "Usually" communicated well	8.0%	8.8%	9.0%	4.4%	7.1%	11.0%	14.7%	16.3%	15.2%	15.4%
↓ HCOMP2 SNP Patients who reported that their doctors "Sometimes" or "Never" communicated well	3.0%	0.0%	4.5%	5.3%	3.9%	3.0%	6.0%	5.4%	4.3%	5.3%
↑ HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	78.0%	91.3%	58.8%	78.6%	72.4%	82.0%	67.2%	71.5%	66.7%	68.5%
↓ HCOMP3U P Patients who reported that they "Usually" received help as soon as they wanted	17.0%	8.7%	31.4%	21.4%	23.3%	13.0%	23.4%	20.5%	24.4%	22.7%
↓ HCOMP3 SNP Patients who reported that they "Sometimes" or "Never" received help as soon as they wanted	5.0%	0.0%	9.8%	0.0%	4.3%	5.0%	9.4%	8.0%	8.9%	8.7%
↑ HCOMP4A P Patients who reported that their pain was "Always" well controlled	79.0%	78.9%	65.6%	--	70.6%	75.0%	68.2%	65.4%	--	66.9%
↓ HCOMP4U P Patients who reported that their pain was "Usually" well controlled	17.0%	21.1%	21.9%	--	21.6%	19.0%	24.7%	26.8%	--	25.7%
↓ HCOMP4 SNP Patients who reported that their pain was "Sometimes" or "Never" well controlled	4.0%	0.0%	12.5%	--	7.8%	6.0%	7.1%	7.8%	--	7.4%
↑ HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them	73.0%	76.9%	70.0%	50.0%	61.4%	73.0%	60.9%	64.6%	67.6%	64.6%
↓ HCOMP5U P Patients who reported that staff "Usually" explained about medicines before giving it to them	14.0%	15.4%	13.3%	30.0%	21.7%	14.0%	14.5%	19.3%	15.9%	16.8%



**Johnson County Community Hospital**      **Unicoi County Memorial Hospital**

FYTD2018 March 2018    Baseline    FY18Q1    FY18Q2    FY18Q3    FYTD18    Baseline    FY18Q1    FY18Q2    FY18Q3    FYTD18

Target Quality Measures											
↓	Pressure Ulcer Rate	--	--	--	--	--	0.40	--	--	--	--
↓	Iatrogenic Pneumothorax Rate	--	--	--	--	--	0.40	--	--	--	--
↓	Central Venous CatheterRelated Blood Stream Infection Rate	--	--	--	--	--	0.17	--	--	--	--
↓	Postoperative Hip Fracture Rate	--	--	--	--	--	0.06	--	--	--	--
↓	PSI 09 Perioperative Hemorrhage or Hematoma Rate	--	--	--	--	--	4.75	--	--	--	--
↓	PSI 10 Postoperative Physiologic and Metabolic Derangement Rate	--	--	--	--	--	--	--	--	--	--
↓	PSI 11 Postoperative Respiratory Failure Rate	--	--	--	--	--	--	--	--	--	--
↓	PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	--	--	--	--	--	4.76	--	--	--	--
↓	PSI 13 Postoperative Sepsis Rate	--	--	--	--	--	--	--	--	--	--
↓	PSI 14 Postoperative Wound Dehiscence Rate	--	--	--	--	--	--	--	--	--	--
↓	PSI 15 Accidental Puncture or Laceration Rate	--	--	--	--	--	1.26	--	--	--	--
↓	CLABSI	--	--	--	--	--	0.000	0.000	0.000	0.000	0.000
↓	CAUTI	--	--	--	--	--	0.000	0.000	0.000	0.000	0.000
↓	SSI COLON Surgical Site Infection	--	--	--	--	--	--	--	--	--	--
↓	SSI HYST Surgical Site Infection	--	--	--	--	--	--	--	--	--	--
↓	MRSA	--	--	--	--	--	0.000	0.000	0.000	0.000	0.000
↓	CDIFF	--	--	--	--	--	0.000	0.000	0.000	0.000	0.000
General Information-Structural Measures											
Yes	SMPART NURSE Nursing Care Registry	--	--	--	--	--	No	No	No	No	No
Yes	ACS REGISTRY	--	--	--	--	--	Yes	No	No	No	No
Yes	SMPART GENSURG General Surgery Registry	--	--	--	--	--	Yes	Yes	Yes	Yes	Yes
Yes	OP12 HIT Ability electronically receive lab results	Yes	Yes	Yes	Yes	Yes	--	--	--	--	--
Yes	OP17 Tracking Clinical Results Between Visits	Yes	Yes	Yes	Yes	Yes	--	--	--	--	--
Yes	OP25 Outpatient Safe Surgery Checklist	--	--	--	--	--	--	--	--	--	--
Yes	SMSSCHECK Safe Surgery Checklist	--	--	--	--	--	Yes	Yes	Yes	Yes	Yes
Survey of Patient's Experiences - Hospital Consumer Assessment of Healthcare Providers and Systems Sur											
↑	HCOMP1A P Patients who reported that their nurses "Always" communicated well	--	100.0%	100.0%	100.0%	100.0%	79.0%	95.0%	88.0%	74.2%	85.6%
↓	HCOMP1U P Patients who reported that their nurses "Usually" communicated well	--	0.0%	0.0%	0.0%	0.0%	18.0%	5.0%	12.0%	22.7%	13.4%
↓	HCOMP1 SNP Patients who reported that their nurses "Sometimes" or "Never" communicated well	--	0.0%	0.0%	0.0%	0.0%	3.0%	0.0%	0.0%	3.0%	1.0%
↑	HCOMP2A P Patients who reported that their doctors "Always" communicated well	--	100.0%	100.0%	100.0%	100.0%	80.0%	94.7%	79.8%	79.7%	83.9%
↓	HCOMP2U P Patients who reported that their doctors "Usually" communicated well	--	0.0%	0.0%	0.0%	0.0%	12.0%	1.8%	16.7%	18.8%	13.2%
↓	HCOMP2 SNP Patients who reported that their doctors "Sometimes" or "Never" communicated well	--	0.0%	0.0%	0.0%	0.0%	8.0%	3.5%	3.6%	1.6%	2.9%
↑	HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	--	100.0%	100.0%	100.0%	100.0%	71.0%	83.3%	78.1%	72.0%	77.8%
↓	HCOMP3U P Patients who reported that they "Usually" received help as soon as they wanted	--	0.0%	0.0%	0.0%	0.0%	23.0%	16.7%	15.6%	28.0%	19.8%
↓	HCOMP3 SNP Patients who reported that they "Sometimes" or "Never" received help as soon as they wanted	--	0.0%	0.0%	0.0%	0.0%	6.0%	0.0%	6.3%	0.0%	2.5%
↑	HCOMP4A P Patients who reported that their pain was "Always" well controlled	--	100.0%	100.0%	--	100.0%	71.0%	81.8%	78.6%	--	80.0%
↓	HCOMP4U P Patients who reported that their pain was "Usually" well controlled	--	0.0%	0.0%	--	0.0%	25.0%	18.2%	21.4%	--	20.0%
↓	HCOMP4 SNP Patients who reported that their pain was "Sometimes" or "Never" well controlled	--	0.0%	0.0%	--	0.0%	4.0%	0.0%	0.0%	--	0.0%
↑	HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them	--	100.0%	100.0%	100.0%	100.0%	68.0%	88.9%	76.0%	66.7%	76.1%
↓	HCOMP5U P Patients who reported that staff "Usually" explained about medicines before giving it to them	--	100.0%	100.0%	0.0%	66.7%	21.0%	11.1%	12.0%	16.7%	13.4%



**Laughlin Memorial Hospital**

**Takoma Regional Hospital**

**FYTD2018 March 2018**

	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18
<b>Target Quality Measures</b>										
↓ Pressure Ulcer Rate	0.27	--	--	--	--	0.34	0.34	0.34	--	--
↓ Iatrogenic Pneumothorax Rate	0.37	--	--	--	--	0.45	--	--	--	--
↓ Central Venous CatheterRelated Blood Stream Infection Rate	0.15	--	--	--	--	0.15	0.15	0.15	--	--
↓ Postoperative Hip Fracture Rate	0.06	--	--	--	--	0.06	0.06	0.06	--	--
↓ PSI 09 Perioperative Hemorrhage or Hematoma Rate	4.52	--	--	--	--	4.98	4.98	4.98	--	--
↓ PSI 10 Postoperative Physiologic and Metabolic Derangement Rate	1.10	--	--	--	--	1.11	1.11	1.11	--	--
↓ PSI 11 Postoperative Respiratory Failure Rate	8.98	--	--	--	--	12.51	12.51	12.51	--	--
↓ PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	6.16	--	--	--	--	7.58	7.58	7.58	--	--
↓ PSI 13 Postoperative Sepsis Rate	9.38	--	--	--	--	9.48	9.48	9.48	--	--
↓ PSI 14 Postoperative Wound Dehiscence Rate	2.22	--	--	--	--	2.24	2.24	2.24	--	--
↓ PSI 15 Accidental Puncture or Laceration Rate	2.17	2.17	2.17	--	--	1.49	1.49	1.49	--	--
↓ CLABSI	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	3.891	1.397
↓ CAUTI	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
↓ SSI COLON Surgical Site Infection	2.326	5.263	0.000	0.000	2.128	0.000	0.000	9.091	0.000	3.226
↓ SSI HYST Surgical Site Infection	--	--	--	--	--	0.000	0.000	--	--	0.000
↓ MRSA	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
↓ CDIFF	0.441	0.320	0.000	0.300	0.199	0.124	0.000	0.000	1.437	0.568
<b>General Information-Structural Measures</b>										
Yes SMPART NURSE Nursing Care Registry	Yes	Yes	Yes	Yes	Yes	No	No	No	No	No
Yes ACS REGISTRY	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Yes SMPART GENSURG General Surgery Registry	Yes	Yes	Yes	Yes	Yes	No	No	No	No	No
Yes OP12 HIT Ability electronically receive lab results	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Yes OP17 Tracking Clinical Results Between Visits	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Yes OP25 Outpatient Safe Surgery Checklist	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Yes SMSSCHECK Safe Surgery Checklist	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
<b>Survey of Patient's Experiences - Hospital Consumer Assessment of Healthcare Providers and Systems Sur</b>										
↑ HCOMP1A P Patients who reported that their nurses "Always" communicated well	81.0%	--	--	--	--	83.0%	86.0%	80.8%	87.8%	85.1%
↓ HCOMP1U P Patients who reported that their nurses "Usually" communicated well	16.0%	--	--	--	--	14.0%	10.4%	12.4%	6.7%	9.6%
↓ HCOMP1 SNP Patients who reported that their nurses "Sometimes" or "Never" communicated well	3.0%	--	--	--	--	3.0%	3.6%	6.8%	5.5%	5.3%
↑ HCOMP2A P Patients who reported that their doctors "Always" communicated well	85.0%	--	--	--	--	78.0%	83.3%	79.3%	86.9%	83.4%
↓ HCOMP2U P Patients who reported that their doctors "Usually" communicated well	13.0%	--	--	--	--	11.0%	11.2%	14.1%	5.8%	10.1%
↓ HCOMP2 SNP Patients who reported that their doctors "Sometimes" or "Never" communicated well	2.0%	--	--	--	--	7.0%	5.4%	6.6%	7.3%	6.5%
↑ HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	73.0%	--	--	--	--	71.0%	79.1%	73.5%	84.4%	79.6%
↓ HCOMP3U P Patients who reported that they "Usually" received help as soon as they wanted	22.0%	--	--	--	--	24.0%	16.3%	15.4%	12.5%	14.6%
↓ HCOMP3 SNP Patients who reported that they "Sometimes" or "Never" received help as soon as they wanted	5.0%	6.0%	6.0%	--	--	5.0%	4.7%	11.6%	3.1%	6.2%
↑ HCOMP4A P Patients who reported that their pain was "Always" well controlled	70.0%	--	--	--	--	73.0%	74.1%	71.6%	--	73.0%
↓ HCOMP4U P Patients who reported that their pain was "Usually" well controlled	22.0%	--	--	--	--	20.0%	14.8%	19.2%	--	17.0%
↓ HCOMP4 SNP Patients who reported that their pain was "Sometimes" or "Never" well controlled	8.0%	--	--	--	--	7.0%	11.1%	8.5%	--	9.8%
↑ HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them	61.0%	--	--	--	--	63.0%	70.8%	62.1%	71.7%	68.8%
↓ HCOMP5U P Patients who reported that staff "Usually" explained about medicines before giving it to them	20.0%	--	--	--	--	21.0%	12.3%	10.3%	13.0%	12.1%



FYTD2018 March 2018

		<b>Ballad Health</b>				
		Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18
↓	HCOMP5 SNP Patients who reported that staff "Sometimes" or "Never" explained about medicines before giving it to them	18.7%	18.7%	18.8%	19.5%	19.0%
↑	HCLEAN HSPAP Patients who reported that their room and bathroom were "Always" clean	73.6%	72.2%	73.5%	72.2%	72.6%
↓	HCLEAN HSPUP Patients who reported that their room and bathroom were "Usually" clean	16.4%	16.6%	16.6%	17.1%	16.8%
↓	HCLEAN HSPSNP Patients who reported that their room and bathroom were "Sometimes" or "Never" clean	10.5%	11.3%	9.8%	10.8%	10.6%
↑	HQUIETHSP AP Patients who reported that the area around their room was "Always" quiet at night	64.7%	62.2%	64.0%	58.9%	62.0%
↓	HQUIETHSP UP Patients who reported that the area around their room was "Usually" quiet at night	24.4%	27.5%	27.4%	31.5%	28.5%
↓	HQUIETHSP SNP Patients who reported that the area around their room was "Sometimes" or "Never" quiet at night	10.6%	10.3%	9.0%	9.6%	9.6%
↑	HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	85.9%	87.1%	87.8%	83.3%	86.0%
↓	HCOMP6N P Patients who reported that NO, they were not given information about what to do during their recovery at home	14.2%	12.9%	12.2%	12.6%	12.5%
↑	HCOMP7SA Patients who "Strongly Agree" they understood their care when they left the hospital	52.1%	51.0%	51.4%	49.1%	50.5%
↓	HCOMP7A Patients who "Agree" they understood their care when they left the hospital	41.2%	40.7%	41.0%	42.5%	41.4%
↓	HCOMP7D SD Patients who "Disagree" or "Strongly Disagree" they understood their care when they left the hospital	6.1%	5.5%	5.0%	5.3%	5.3%
↓	HHSP RATING06 Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)	9.2%	9.6%	9.1%	9.6%	9.5%
↓	HHSP RATING78 Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)	19.5%	19.2%	18.5%	20.0%	19.2%
↑	HHSP RATING910 Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	70.7%	68.8%	70.0%	66.9%	68.8%
↑	HRECMND DY Patients who reported YES, they would definitely recommend the hospital	71.3%	71.4%	72.4%	69.4%	71.3%
↓	HRECMND PY Patients who reported YES, they would probably recommend the hospital	22.2%	22.9%	22.4%	24.3%	23.1%
↓	HRECMND DN Patients who reported NO, they would probably not or definitely not recommend the hospital	6.5%	6.6%	5.9%	6.3%	6.2%
<b>Timely &amp; Effective care Cataract Surgery Outcome</b>						
↑	OP31 Cataracts Improvement	--	--	--	--	--
<b>Timely &amp; Effective care Colonoscopy follow-up</b>						
↑	OP29 Avg Risk Polyp Surveillance	73.0%	84.8%	78.3%	95.0%	83.3%
↑	OP30 High risk Polyp Surveillance	83.0%	90.7%	86.3%	90.0%	89.0%
<b>Timely &amp; Effective Care Heart Attack</b>						
↓	OP3b Median Time to Transfer AMI	47.4	24.7	25.4	--	47.5
↓	OP5 Median Time to ECG AMI and Chest Pain	5.2	--	--	--	11.3
↑	OP2 Fibrinolytic Therapy 30 minutes	--	--	--	--	--
↑	OP4 Aspirin at Arrival AMI Chest Pain	97.0%	97.2%	99.1%	--	98.1%
<b>Timely &amp; Effective Care Stroke Care</b>						
↑	STK4 Thrombolytic Therapy	--	--	--	--	--
<b>Timely &amp; Effective Care- Emergency Department (ED) Throughput</b>						
↓	EDV Emergency Department Volume	--	--	--	--	--
↓	ED1b ED Door to Transport	227.3	824.2	274.4	--	277.8
↓	ED2b ED Decision to Transport	124.5	82.4	89.7	89.7	95.7
↓	OP18b Avg time ED arrival to discharge	124.5	122.2	96.6	--	131.8
↓	OP20 Door to Diagnostic Evaluation	15.1	21.1	16.4	--	16.5
↓	OP21 Time to pain medication for long bone fracture	37.8	54.0	49.3	49.3	56.1
↓	OP22 Left without being seen	0.9%	1.1%	0.8%	0.5%	0.9%



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	Franklin Woods Community Hospital					Johnson City Medical Center				
	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18
↓ HCOMP5 SNP Patients who reported that staff "Sometimes" or "Never" explained about medicines before giving it to them	16.0%	12.7%	18.3%	15.8%	15.6%	22.0%	22.3%	21.5%	22.0%	21.9%
↑ HCLEAN HSPAP Patients who reported that their room and bathroom were "Always" clean	83.0%	84.4%	83.0%	82.8%	83.4%	62.0%	65.2%	65.1%	65.1%	65.1%
↓ HCLEAN HSPUP Patients who reported that their room and bathroom were "Usually" clean	13.0%	10.8%	9.5%	12.8%	11.1%	24.0%	19.1%	22.0%	19.5%	20.2%
↓ HCLEAN HSPSNP Patients who reported that their room and bathroom were "Sometimes" or "Never" clean	4.0%	4.7%	7.6%	4.4%	5.6%	14.0%	15.7%	13.0%	15.4%	14.7%
↑ HQUIETHSP AP Patients who reported that the area around their room was "Always" quiet at night	74.0%	72.7%	71.7%	74.4%	72.9%	52.0%	51.5%	53.2%	48.2%	50.9%
↓ HQUIETHSP UP Patients who reported that the area around their room was "Usually" quiet at night	22.0%	23.9%	23.9%	20.9%	22.9%	37.0%	33.1%	33.2%	38.5%	35.0%
↓ HQUIETHSP SNP Patients who reported that the area around their room was "Sometimes" or "Never" quiet at night	4.0%	3.5%	4.4%	4.7%	4.2%	11.0%	15.4%	13.6%	13.3%	14.1%
↑ HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	88.0%	85.4%	87.4%	86.1%	86.3%	84.0%	85.8%	84.9%	85.8%	85.5%
↓ HCOMP6N P Patients who reported that NO, they were not given information about what to do during their recovery at home	12.0%	14.6%	12.6%	13.9%	13.7%	16.0%	14.2%	15.1%	14.2%	14.5%
↑ HCOMP7SA Patients who "Strongly Agree" they understood their care when they left the hospital	61.0%	57.5%	57.0%	59.0%	57.8%	48.0%	48.0%	47.7%	45.8%	47.1%
↓ HCOMP7A Patients who "Agree" they understood their care when they left the hospital	34.0%	32.7%	34.0%	33.8%	33.5%	47.0%	41.6%	43.2%	43.6%	42.8%
↓ HCOMP7D SD Patients who "Disagree" or "Strongly Disagree" they understood their care when they left the hospital	5.0%	5.7%	5.6%	4.4%	5.2%	5.0%	6.8%	5.8%	7.1%	6.6%
↓ HHSP RATING06 Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)	4.0%	5.4%	6.9%	6.5%	6.3%	10.0%	13.4%	12.5%	11.9%	12.6%
↓ HHSP RATING78 Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)	14.0%	14.5%	11.9%	13.9%	13.4%	24.0%	23.3%	20.0%	24.9%	22.8%
↑ HHSP RATING910 Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	82.0%	80.1%	81.1%	79.6%	80.3%	66.0%	63.2%	67.5%	63.1%	64.6%
↑ HRECMND DY Patients who reported YES, they would definitely recommend the hospital	85.0%	83.9%	85.1%	83.5%	84.2%	65.0%	63.4%	65.0%	63.5%	63.9%
↓ HRECMND PY Patients who reported YES, they would probably recommend the hospital	13.0%	12.3%	10.5%	11.8%	11.5%	29.0%	28.0%	27.5%	29.1%	28.3%
↓ HRECMND DN Patients who reported NO, they would probably not or definitely not recommend the hospital	2.0%	3.8%	4.4%	4.7%	4.3%	6.0%	8.5%	7.5%	7.3%	7.8%
<b>Timely &amp; Effective care Cataract Surgery Outcome</b>										
↑ OP31 Cataracts Improvement	--	--	--	--	--	--	--	--	--	--
<b>Timely &amp; Effective care Colonoscopy follow-up</b>										
↑ OP29 Avg Risk Polyp Surveillance	78.0%	100.0%	100.0%	--	100.0%	67.0%	100.0%	100.0%	--	100.0%
↑ OP30 High risk Polyp Surveillance	100.0%	100.0%	100.0%	100.0%	100.0%	68.0%	100.0%	100.0%	100.0%	100.0%
<b>Timely &amp; Effective Care Heart Attack</b>										
↓ OP3b Median Time to Transfer AMI	--	--	38.0	--	--	--	--	--	--	--
↓ OP5 Median Time to ECG AMI and Chest Pain	8.0	9.2	27.3	--	--	--	7.0	--	--	--
↑ OP2 Fibrinolytic Therapy 30 minutes	--	--	--	--	--	--	--	--	--	--
↑ OP4 Aspirin at Arrival AMI Chest Pain	98.0%	96.4%	93.8%	100.0%	96.4%	--	100.0%	--	--	100.0%
<b>Timely &amp; Effective Care Stroke Care</b>										
↑ STK4 Thrombolytic Therapy	--	--	--	--	--	--	--	--	--	--
<b>Timely &amp; Effective Care- Emergency Department (ED) Throughput</b>										
↓ EDV Emergency Department Volume	MEDIUM	MEDIUM	MEDIUM	MEDIUM	MEDIUM	VERY HIGH	VERY HIGH	VERY HIGH	VERY HIGH	VERY HIGH
↓ ED1b ED Door to Transport	234.0	260.0	231.0	--	--	245.0	255.3	257.0	--	--
↓ ED2b ED Decision to Transport	106.4	79.0	66.0	--	--	95.0	75.5	96.5	--	--
↓ OP18b Avg time ED arrival to discharge	130.0	147.0	134.5	--	--	152.0	152.0	148.0	--	--
↓ OP20 Door to Diagnostic Evaluation	16.0	11.0	11.0	--	--	19.0	5.0	4.0	--	--
↓ OP21 Time to pain medication for long bone fracture	36.0	49.5	43.0	--	--	35.0	40.0	37.0	--	--
↓ OP22 Left without being seen	1.0%	0.8%	0.3%	0.6%	0.6%	1.0%	0.9%	0.7%	0.8%	0.8%



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	Dickenson County Hospital					Hancock County Hospital				
	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18
↓ HCOMP5 SNP Patients who reported that staff "Sometimes" or "Never" explained about medicines before giving it to them	--	0.0%	--	0.0%	0.0%	5.0%	50.0%	0.0%	0.0%	9.5%
↑ HCLEAN HSPAP Patients who reported that their room and bathroom were "Always" clean	--	100.0%	100.0%	100.0%	100.0%	86.0%	100.0%	87.5%	100.0%	96.0%
↓ HCLEAN HSPUP Patients who reported that their room and bathroom were "Usually" clean	--	0.0%	0.0%	0.0%	0.0%	14.0%	0.0%	0.0%	0.0%	0.0%
↓ HCLEAN HSPSNP Patients who reported that their room and bathroom were "Sometimes" or "Never" clean	--	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	12.5%	0.0%	4.5%
↑ HQUIETHSP AP Patients who reported that the area around their room was "Always" quiet at night	--	100.0%	100.0%	100.0%	100.0%	79.0%	66.7%	62.5%	92.3%	79.2%
↓ HQUIETHSP UP Patients who reported that the area around their room was "Usually" quiet at night	--	0.0%	0.0%	0.0%	0.0%	18.0%	33.3%	37.5%	7.7%	20.8%
↓ HQUIETHSP SNP Patients who reported that the area around their room was "Sometimes" or "Never" quiet at night	--	0.0%	0.0%	0.0%	0.0%	3.0%	0.0%	0.0%	0.0%	0.0%
↑ HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	--	100.0%	100.0%	100.0%	100.0%	92.0%	50.0%	83.3%	89.5%	82.9%
↓ HCOMP6N P Patients who reported that NO, they were not given information about what to do during their recovery at home	--	0.0%	0.0%	0.0%	0.0%	8.0%	50.0%	16.7%	10.5%	17.1%
↑ HCOMP7SA Patients who "Strongly Agree" they understood their care when they left the hospital	--	77.8%	33.3%	33.3%	52.4%	70.0%	50.0%	65.2%	58.6%	60.0%
↓ HCOMP7A Patients who "Agree" they understood their care when they left the hospital	--	22.2%	33.3%	66.7%	38.9%	22.0%	25.0%	21.7%	41.4%	31.7%
↓ HCOMP7D SD Patients who "Disagree" or "Strongly Disagree" they understood their care when they left the hospital	--	0.0%	33.3%	0.0%	5.6%	8.0%	25.0%	13.0%	0.0%	8.3%
↓ HHSP RATING06 Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)	--	33.3%	0.0%	0.0%	16.7%	13.0%	33.3%	12.5%	0.0%	9.1%
↓ HHSP RATING78 Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)	--	0.0%	0.0%	0.0%	0.0%	7.0%	0.0%	0.0%	9.1%	4.5%
↑ HHSP RATING910 Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	--	66.7%	100.0%	100.0%	83.3%	80.0%	66.7%	87.5%	90.9%	86.4%
↑ HRECMND DY Patients who reported YES, they would definitely recommend the hospital	--	100.0%	100.0%	50.0%	83.3%	81.0%	66.7%	57.1%	91.7%	77.3%
↓ HRECMND PY Patients who reported YES, they would probably recommend the hospital	--	0.0%	0.0%	50.0%	16.7%	9.0%	0.0%	14.3%	8.3%	9.1%
↓ HRECMND DN Patients who reported NO, they would probably not or definitely not recommend the hospital	--	0.0%	0.0%	0.0%	0.0%	10.0%	33.3%	0.0%	0.0%	4.5%
<b>Timely &amp; Effective care Cataract Surgery Outcome</b>										
↑ OP31 Cataracts Improvement	--	--	--	--	--	--	--	--	--	--
<b>Timely &amp; Effective care Colonoscopy follow-up</b>										
↑ OP29 Avg Risk Polyp Surveillance	--	--	--	--	--	--	--	--	--	--
↑ OP30 High risk Polyp Surveillance	--	--	--	--	--	--	--	--	--	--
<b>Timely &amp; Effective Care Heart Attack</b>										
↓ OP3b Median Time to Transfer AMI	--	--	--	--	--	--	--	--	--	--
↓ OP5 Median Time to ECG AMI and Chest Pain	--	11.7	11.6	--	--	--	8.5	21.0	--	--
↑ OP2 Fibrinolytic Therapy 30 minutes	--	--	--	--	--	--	--	--	--	--
↑ OP4 Aspirin at Arrival AMI Chest Pain	--	100.0%	100.0%	100.0%	100.0%	--	100.0%	100.0%	100.0%	100.0%
<b>Timely &amp; Effective Care Stroke Care</b>										
↑ STK4 Thrombolytic Therapy	--	--	--	--	--	--	--	--	--	--
<b>Timely &amp; Effective Care- Emergency Department (ED) Throughput</b>										
↓ EDV Emergency Department Volume	LOW	LOW	LOW	LOW	LOW	MEDIUM	MEDIUM	MEDIUM	MEDIUM	MEDIUM
↓ ED1b ED Door to Transport	--	96.0	88.5	--	--	--	--	--	--	--
↓ ED2b ED Decision to Transport	--	2.0	8.0	--	--	102.0	--	--	--	--
↓ OP18b Avg time ED arrival to discharge	--	93.5	104.5	--	--	--	118.0	117.0	--	--
↓ OP20 Door to Diagnostic Evaluation	--	3.7	5.0	--	--	--	28.0	22.0	--	--
↓ OP21 Time to pain medication for long bone fracture	--	71.5	49.0	--	--	--	37.0	57.0	--	--
↓ OP22 Left without being seen	1.0%	0.4%	0.8%	0.7%	0.6%	1.0%	0.3%	0.7%	--	0.5%



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	Hawkins County Memorial Hospital					Holston Valley Medical Center				
	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18
↓ HCOMP5 SNP Patients who reported that staff "Sometimes" or "Never" explained about medicines before giving it to them	7.0%	21.4%	13.9%	17.0%	17.6%	20.0%	16.1%	16.0%	18.9%	17.0%
↑ HCLEAN HSPAP Patients who reported that their room and bathroom were "Always" clean	86.0%	82.7%	84.3%	81.1%	82.7%	66.0%	68.2%	66.5%	68.5%	67.7%
↓ HCLEAN HSPUP Patients who reported that their room and bathroom were "Usually" clean	9.0%	13.5%	13.7%	9.4%	12.2%	21.0%	18.0%	19.3%	21.8%	19.1%
↓ HCLEAN HSPSNP Patients who reported that their room and bathroom were "Sometimes" or "Never" clean	5.0%	5.8%	2.0%	9.4%	5.8%	13.0%	13.8%	14.2%	12.1%	13.4%
↑ HQUIETHSP AP Patients who reported that the area around their room was "Always" quiet at night	74.0%	79.2%	77.6%	77.4%	78.1%	63.0%	61.2%	66.5%	65.4%	64.3%
↓ HQUIETHSP UP Patients who reported that the area around their room was "Usually" quiet at night	23.0%	15.1%	12.2%	15.1%	14.2%	29.0%	24.5%	25.1%	24.6%	24.7%
↓ HQUIETHSP SNP Patients who reported that the area around their room was "Sometimes" or "Never" quiet at night	3.0%	5.7%	10.2%	7.5%	7.7%	8.0%	14.2%	8.5%	10.0%	11.0%
↑ HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	92.0%	83.3%	89.5%	84.8%	85.8%	87.0%	88.7%	90.7%	92.0%	90.4%
↓ HCOMP6N P Patients who reported that NO, they were not given information about what to do during their recovery at home	8.0%	16.7%	10.5%	15.2%	14.2%	13.0%	11.3%	9.3%	8.0%	9.6%
↑ HCOMP7SA Patients who "Strongly Agree" they understood their care when they left the hospital	55.0%	56.8%	53.0%	48.6%	52.8%	54.0%	55.0%	56.2%	51.4%	54.3%
↓ HCOMP7A Patients who "Agree" they understood their care when they left the hospital	41.0%	39.0%	43.2%	45.8%	42.7%	40.0%	41.8%	39.1%	44.9%	41.9%
↓ HCOMP7D SD Patients who "Disagree" or "Strongly Disagree" they understood their care when they left the hospital	4.0%	4.1%	3.8%	5.6%	4.5%	6.0%	3.2%	4.7%	3.7%	3.8%
↓ HHSP RATING06 Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)	5.0%	10.2%	14.3%	8.0%	10.8%	7.0%	6.6%	7.7%	7.9%	7.4%
↓ HHSP RATING78 Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)	21.0%	16.3%	16.3%	28.0%	20.3%	19.0%	21.5%	16.8%	16.1%	18.3%
↑ HHSP RATING910 Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	74.0%	73.5%	69.4%	64.0%	68.9%	74.0%	71.8%	75.6%	76.0%	74.4%
↑ HRECMND DY Patients who reported YES, they would definitely recommend the hospital	76.0%	66.0%	75.6%	62.5%	67.8%	78.0%	79.5%	79.0%	78.2%	78.9%
↓ HRECMND PY Patients who reported YES, they would probably recommend the hospital	21.0%	26.0%	17.8%	35.4%	26.6%	19.0%	16.8%	17.2%	16.5%	16.8%
↓ HRECMND DN Patients who reported NO, they would probably not or definitely not recommend the hospital	3.0%	8.0%	6.7%	2.1%	5.6%	3.0%	3.8%	3.8%	5.4%	4.3%
<b>Timely &amp; Effective care Cataract Surgery Outcome</b>										
↑ OP31 Cataracts Improvement	--	--	--	--	--	--	--	--	--	--
<b>Timely &amp; Effective care Colonoscopy follow-up</b>										
↑ OP29 Avg Risk Polyp Surveillance	97.0%	100.0%	100.0%	100.0%	100.0%	--	50.0%	76.9%	100.0%	73.7%
↑ OP30 High risk Polyp Surveillance	95.0%	90.9%	100.0%	100.0%	96.6%	62.0%	90.0%	100.0%	100.0%	95.7%
<b>Timely &amp; Effective Care Heart Attack</b>										
↓ OP3b Median Time to Transfer AMI	--	26.0	171.0	--	--	--	--	--	--	--
↓ OP5 Median Time to ECG AMI and Chest Pain	9.0	9.5	13.0	--	--	--	--	--	--	--
↑ OP2 Fibrinolytic Therapy 30 minutes	--	--	--	--	--	--	--	--	--	--
↑ OP4 Aspirin at Arrival AMI Chest Pain	100.0%	100.0%	100.0%	--	100.0%	--	--	--	100.0%	100.0%
<b>Timely &amp; Effective Care Stroke Care</b>										
↑ STK4 Thrombolytic Therapy	--	--	--	--	--	83.0%	83.3%	83.3%	100.0%	85.7%
<b>Timely &amp; Effective Care- Emergency Department (ED) Throughput</b>										
↓ EDV Emergency Department Volume	LOW	LOW	LOW	LOW	LOW	VERY HIGH	VERY HIGH	VERY HIGH	VERY HIGH	VERY HIGH
↓ ED1b ED Door to Transport	175.0	222.0	207.0	--	--	340.0	352.0	431.0	--	--
↓ ED2b ED Decision to Transport	49.0	37.0	49.0	--	--	186.0	111.0	130.0	--	--
↓ OP18b Avg time ED arrival to discharge	80.0	--	--	--	--	153.0	--	--	--	--
↓ OP20 Door to Diagnostic Evaluation	14.0	13.0	14.0	--	--	24.0	--	--	--	--
↓ OP21 Time to pain medication for long bone fracture	38.0	--	--	--	--	52.0	--	--	--	--
↓ OP22 Left without being seen	0.0%	2.7%	1.8%	--	2.2%	1.0%	2.3%	1.7%	--	2.0%



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	Indian Path Medical Center					Lonesome Pine Hospital				
	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18
↓ HCOMP5 SNP Patients who reported that staff "Sometimes" or "Never" explained about medicines before giving it to them	19.0%	17.5%	21.1%	20.0%	19.5%	16.0%	13.2%	10.5%	16.7%	13.0%
↑ HCLEAN HSPAP Patients who reported that their room and bathroom were "Always" clean	74.0%	82.3%	79.7%	80.8%	80.9%	72.0%	82.6%	86.5%	73.6%	81.1%
↓ HCLEAN HSPUP Patients who reported that their room and bathroom were "Usually" clean	16.0%	12.2%	17.0%	14.8%	14.7%	17.0%	8.7%	8.3%	16.7%	13.0%
↓ HCLEAN HSPSNP Patients who reported that their room and bathroom were "Sometimes" or "Never" clean	10.0%	5.5%	3.3%	4.4%	4.4%	11.0%	8.7%	5.2%	11.0%	8.3%
↑ HQUIETHSP AP Patients who reported that the area around their room was "Always" quiet at night	66.0%	64.6%	65.7%	66.9%	65.7%	66.0%	71.8%	75.5%	73.9%	73.6%
↓ HQUIETHSP UP Patients who reported that the area around their room was "Usually" quiet at night	28.0%	29.8%	26.0%	24.2%	26.7%	27.0%	19.7%	16.3%	17.4%	17.9%
↓ HQUIETHSP SNP Patients who reported that the area around their room was "Sometimes" or "Never" quiet at night	6.0%	5.5%	8.3%	9.0%	7.6%	7.0%	8.5%	8.2%	8.7%	8.5%
↑ HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	86.0%	88.4%	87.9%	83.5%	86.6%	86.0%	85.8%	85.9%	83.9%	85.3%
↓ HCOMP6N P Patients who reported that NO, they were not given information about what to do during their recovery at home	14.0%	11.6%	12.1%	16.5%	13.4%	14.0%	14.2%	14.1%	16.1%	14.7%
↑ HCOMP7SA Patients who "Strongly Agree" they understood their care when they left the hospital	55.0%	53.8%	51.4%	46.0%	50.3%	51.0%	49.1%	45.7%	44.4%	46.6%
↓ HCOMP7A Patients who "Agree" they understood their care when they left the hospital	40.0%	36.1%	37.2%	43.0%	38.8%	44.0%	45.3%	50.2%	48.4%	47.7%
↓ HCOMP7D SD Patients who "Disagree" or "Strongly Disagree" they understood their care when they left the hospital	5.0%	4.7%	6.4%	6.3%	5.8%	5.0%	5.7%	4.1%	7.2%	5.7%
↓ HHSP RATING06 Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)	8.0%	6.7%	6.5%	10.5%	7.9%	7.0%	8.7%	5.3%	9.0%	7.7%
↓ HHSP RATING78 Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)	19.0%	16.2%	13.6%	18.8%	16.2%	23.0%	25.2%	25.5%	21.3%	24.2%
↑ HHSP RATING910 Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	73.0%	77.1%	79.9%	70.7%	75.9%	70.0%	66.1%	69.1%	69.7%	68.1%
↑ HRECNDMND DY Patients who reported YES, they would definitely recommend the hospital	78.0%	79.9%	82.3%	75.7%	79.3%	70.0%	71.4%	78.0%	69.8%	73.0%
↓ HRECNDMND PY Patients who reported YES, they would probably recommend the hospital	17.0%	16.2%	12.7%	17.7%	15.5%	24.0%	21.4%	17.6%	23.3%	20.8%
↓ HRECNDMND DN Patients who reported NO, they would probably not or definitely not recommend the hospital	5.0%	3.9%	5.0%	6.6%	5.2%	6.0%	7.1%	4.4%	7.0%	6.2%
<b>Timely &amp; Effective care Cataract Surgery Outcome</b>										
↑ OP31 Cataracts Improvement	--	--	--	--	--	--	--	--	--	--
<b>Timely &amp; Effective care Colonoscopy follow-up</b>										
↑ OP29 Avg Risk Polyp Surveillance	--	100.0%	100.0%	--	100.0%	31.0%	43.5%	30.0%	100.0%	41.2%
↑ OP30 High risk Polyp Surveillance	73.0%	100.0%	100.0%	--	100.0%	70.0%	73.3%	57.1%	60.0%	64.7%
<b>Timely &amp; Effective Care Heart Attack</b>										
↓ OP3b Median Time to Transfer AMI	--	--	--	--	--	--	--	--	--	--
↓ OP5 Median Time to ECG AMI and Chest Pain	4.0	30.0	58.0	--	--	10.0	--	--	--	--
↑ OP2 Fibrinolytic Therapy 30 minutes	--	--	--	--	--	--	--	--	--	--
↑ OP4 Aspirin at Arrival AMI Chest Pain	93.0%	100.0%	100.0%	100.0%	100.0%	95.0%	100.0%	100.0%	100.0%	100.0%
<b>Timely &amp; Effective Care Stroke Care</b>										
↑ STK4 Thrombolytic Therapy	--	--	--	--	--	--	--	--	--	--
<b>Timely &amp; Effective Care- Emergency Department (ED) Throughput</b>										
↓ EDV Emergency Department Volume	MEDIUM	MEDIUM	MEDIUM	MEDIUM	MEDIUM	MEDIUM	MEDIUM	MEDIUM	MEDIUM	MEDIUM
↓ ED1b ED Door to Transport	220.0	217.0	205.5	--	--	213.0	--	--	--	--
↓ ED2b ED Decision to Transport	78.0	72.2	63.0	--	--	53.0	--	--	--	--
↓ OP18b Avg time ED arrival to discharge	121.0	132.0	122.0	--	--	120.0	--	--	--	--
↓ OP20 Door to Diagnostic Evaluation	18.0	10.0	7.0	--	--	23.0	--	--	--	--
↓ OP21 Time to pain medication for long bone fracture	32.0	47.0	40.0	--	--	64.0	--	--	--	--
↓ OP22 Left without being seen	1.0%	1.2%	0.8%	0.7%	0.9%	0.0%	0.3%	0.3%	--	0.3%



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	Norton Community Hospital					Bristol Regional Medical Center				
	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18
↓ HCOMP5 SNP Patients who reported that staff "Sometimes" or "Never" explained about medicines before giving it to them	20.0%	13.5%	17.1%	17.6%	16.0%	16.0%	18.0%	19.3%	18.6%	18.6%
↑ HCLEAN HSPAP Patients who reported that their room and bathroom were "Always" clean	71.0%	74.7%	85.4%	72.8%	77.6%	62.0%	65.2%	71.0%	65.2%	67.0%
↓ HCLEAN HSPUP Patients who reported that their room and bathroom were "Usually" clean	18.0%	13.7%	9.4%	21.4%	15.0%	22.0%	19.1%	14.8%	19.4%	17.9%
↓ HCLEAN HSPSNP Patients who reported that their room and bathroom were "Sometimes" or "Never" clean	11.0%	11.6%	5.2%	5.8%	7.5%	16.0%	15.7%	14.2%	15.4%	15.1%
↑ HQUIETHSP AP Patients who reported that the area around their room was "Always" quiet at night	61.0%	56.7%	61.7%	54.9%	57.7%	65.0%	65.2%	66.7%	68.6%	66.9%
↓ HQUIETHSP UP Patients who reported that the area around their room was "Usually" quiet at night	28.0%	33.0%	28.7%	35.3%	32.4%	28.0%	22.9%	25.5%	20.2%	22.8%
↓ HQUIETHSP SNP Patients who reported that the area around their room was "Sometimes" or "Never" quiet at night	11.0%	10.3%	9.6%	9.8%	9.9%	7.0%	11.9%	7.8%	11.2%	10.4%
↑ HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	88.0%	83.6%	83.8%	81.5%	82.9%	88.0%	91.1%	91.3%	87.6%	89.9%
↓ HCOMP6N P Patients who reported that NO, they were not given information about what to do during their recovery at home	12.0%	16.4%	16.3%	18.5%	17.1%	12.0%	8.9%	8.2%	12.4%	9.9%
↑ HCOMP7SA Patients who "Strongly Agree" they understood their care when they left the hospital	53.0%	45.2%	47.3%	43.7%	45.4%	53.0%	55.5%	56.9%	54.7%	55.7%
↓ HCOMP7A Patients who "Agree" they understood their care when they left the hospital	42.0%	44.1%	44.9%	49.5%	46.3%	42.0%	40.8%	40.3%	41.2%	40.8%
↓ HCOMP7D SD Patients who "Disagree" or "Strongly Disagree" they understood their care when they left the hospital	5.0%	7.1%	4.9%	4.2%	5.4%	5.0%	3.1%	2.8%	4.2%	3.4%
↓ HHSP RATING06 Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)	8.0%	12.5%	4.3%	10.7%	9.2%	7.0%	7.5%	6.0%	7.1%	6.9%
↓ HHSP RATING78 Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)	19.0%	18.8%	23.7%	18.4%	20.2%	16.0%	18.7%	16.2%	16.8%	17.3%
↑ HHSP RATING910 Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	73.0%	68.8%	72.0%	70.9%	70.5%	77.0%	73.8%	77.8%	76.1%	75.8%
↑ HRECMND DY Patients who reported YES, they would definitely recommend the hospital	73.0%	58.5%	70.7%	68.6%	66.0%	78.0%	76.6%	80.0%	81.5%	79.4%
↓ HRECMND PY Patients who reported YES, they would probably recommend the hospital	21.0%	34.0%	25.0%	26.5%	28.5%	19.0%	19.6%	15.5%	14.8%	16.7%
↓ HRECMND DN Patients who reported NO, they would probably not or definitely not recommend the hospital	6.0%	7.4%	4.3%	4.9%	5.6%	3.0%	3.8%	4.5%	3.7%	4.0%
<b>Timely &amp; Effective care Cataract Surgery Outcome</b>										
↑ OP31 Cataracts Improvement	--	--	--	--	--	--	--	--	--	--
<b>Timely &amp; Effective care Colonoscopy follow-up</b>										
↑ OP29 Avg Risk Polyp Surveillance	13.0%	100.0%	100.0%	100.0%	100.0%	57.0%	--	88.9%	0.0%	72.7%
↑ OP30 High risk Polyp Surveillance	--	--	--	--	--	46.0%	--	75.0%	50.0%	70.0%
<b>Timely &amp; Effective Care Heart Attack</b>										
↓ OP3b Median Time to Transfer AMI	--	130.0	--	--	--	--	--	--	--	--
↓ OP5 Median Time to ECG AMI and Chest Pain	9.0	10.8	7.1	--	--	--	--	2.0	--	--
↑ OP2 Fibrinolytic Therapy 30 minutes	--	0.0%	--	--	0.0%	--	--	--	--	--
↑ OP4 Aspirin at Arrival AMI Chest Pain	94.0%	92.3%	100.0%	100.0%	96.6%	--	--	100.0%	100.0%	100.0%
<b>Timely &amp; Effective Care Stroke Care</b>										
↑ STK4 Thrombolytic Therapy	--	--	--	--	--	83.0%	100.0%	100.0%	100.0%	100.0%
<b>Timely &amp; Effective Care- Emergency Department (ED) Throughput</b>										
↓ EDV Emergency Department Volume	MEDIUM	MEDIUM	MEDIUM	MEDIUM	MEDIUM	HIGH	HIGH	HIGH	HIGH	HIGH
↓ ED1b ED Door to Transport	244.0	216.0	224.0	--	--	255.0	289.0	270.0	--	--
↓ ED2b ED Decision to Transport	74.0	69.0	60.0	--	--	96.0	82.0	80.0	--	--
↓ OP18b Avg time ED arrival to discharge	154.0	146.5	151.0	--	--	147.0	156.0	144.0	--	--
↓ OP20 Door to Diagnostic Evaluation	14.0	7.0	9.0	--	--	23.0	42.0	23.0	--	--
↓ OP21 Time to pain medication for long bone fracture	53.0	67.5	58.0	--	--	43.0	61.0	60.0	--	--
↓ OP22 Left without being seen	1.0%	0.2%	0.3%	0.3%	0.3%	1.0%	1.7%	1.1%	--	1.4%



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	Johnston Memorial Hospital					Smyth County Community Hospital				
	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18
↓ HCOMP5 SNP Patients who reported that staff "Sometimes" or "Never" explained about medicines before giving it to them	23.0%	20.1%	17.7%	23.4%	20.5%	11.0%	20.3%	21.1%	16.5%	19.3%
↑ HCLEAN HSPAP Patients who reported that their room and bathroom were "Always" clean	68.0%	68.5%	74.1%	72.3%	71.5%	75.0%	87.5%	85.3%	83.3%	85.4%
↓ HCLEAN HSPUP Patients who reported that their room and bathroom were "Usually" clean	20.0%	22.1%	19.8%	17.5%	19.9%	8.0%	6.3%	10.3%	13.6%	10.1%
↓ HCLEAN HSPSNP Patients who reported that their room and bathroom were "Sometimes" or "Never" clean	12.0%	9.3%	6.2%	10.2%	8.7%	17.0%	6.3%	4.4%	3.0%	4.5%
↑ HQUIETHSP AP Patients who reported that the area around their room was "Always" quiet at night	60.0%	57.8%	59.9%	63.0%	60.2%	72.0%	74.2%	65.7%	66.2%	68.6%
↓ HQUIETHSP UP Patients who reported that the area around their room was "Usually" quiet at night	32.0%	33.7%	30.8%	29.1%	31.3%	24.0%	22.6%	29.9%	29.2%	27.3%
↓ HQUIETHSP SNP Patients who reported that the area around their room was "Sometimes" or "Never" quiet at night	8.0%	8.5%	9.3%	7.9%	8.5%	4.0%	3.2%	4.5%	4.6%	4.1%
↑ HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	86.0%	83.4%	89.3%	89.6%	87.4%	91.0%	93.3%	89.8%	86.6%	89.9%
↓ HCOMP6N P Patients who reported that NO, they were not given information about what to do during their recovery at home	14.0%	16.6%	10.7%	10.4%	12.6%	9.0%	6.7%	10.2%	13.4%	10.1%
↑ HCOMP7SA Patients who "Strongly Agree" they understood their care when they left the hospital	49.0%	42.9%	44.9%	43.6%	43.7%	61.0%	55.9%	59.7%	50.8%	55.4%
↓ HCOMP7A Patients who "Agree" they understood their care when they left the hospital	45.0%	45.2%	46.4%	48.1%	46.6%	37.0%	38.8%	32.8%	41.7%	37.8%
↓ HCOMP7D SD Patients who "Disagree" or "Strongly Disagree" they understood their care when they left the hospital	6.0%	8.4%	4.9%	5.4%	6.3%	2.0%	2.1%	4.0%	3.5%	3.2%
↓ HHSP RATING06 Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)	12.0%	11.5%	12.6%	11.8%	11.9%	5.0%	3.1%	6.0%	6.2%	5.1%
↓ HHSP RATING78 Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)	20.0%	22.6%	19.9%	20.7%	21.1%	18.0%	9.4%	11.9%	12.3%	11.2%
↑ HHSP RATING910 Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	68.0%	65.9%	67.5%	67.5%	66.9%	77.0%	87.5%	82.1%	81.5%	83.7%
↑ HRECMND DY Patients who reported YES, they would definitely recommend the hospital	65.0%	61.9%	68.6%	64.0%	64.7%	75.0%	79.7%	74.2%	75.8%	76.5%
↓ HRECMND PY Patients who reported YES, they would probably recommend the hospital	28.0%	29.4%	24.8%	28.1%	27.5%	22.0%	18.8%	22.7%	21.2%	20.9%
↓ HRECMND DN Patients who reported NO, they would probably not or definitely not recommend the hospital	7.0%	8.7%	6.6%	7.9%	7.8%	3.0%	1.6%	3.0%	3.0%	2.6%
<b>Timely &amp; Effective care Cataract Surgery Outcome</b>										
↑ OP31 Cataracts Improvement	--	--	--	--	--	--	--	--	--	--
<b>Timely &amp; Effective care Colonoscopy follow-up</b>										
↑ OP29 Avg Risk Polyp Surveillance	100.0%	--	--	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
↑ OP30 High risk Polyp Surveillance	100.0%	--	--	--	--	100.0%	100.0%	90.3%	--	92.3%
<b>Timely &amp; Effective Care Heart Attack</b>										
↓ OP3b Median Time to Transfer AMI	--	--	23.0	--	--	48.0	89.0	101.0	--	--
↓ OP5 Median Time to ECG AMI and Chest Pain	0.0	13.7	3.0	--	--	3.0	12.5	3.5	--	--
↑ OP2 Fibrinolytic Therapy 30 minutes	--	--	--	--	--	--	--	--	--	--
↑ OP4 Aspirin at Arrival AMI Chest Pain	100.0%	100.0%	100.0%	100.0%	100.0%	99.0%	100.0%	100.0%	100.0%	100.0%
<b>Timely &amp; Effective Care Stroke Care</b>										
↑ STK4 Thrombolytic Therapy	--	--	--	--	--	--	--	--	--	--
<b>Timely &amp; Effective Care- Emergency Department (ED) Throughput</b>										
↓ EDV Emergency Department Volume	HIGH	HIGH	HIGH	HIGH	HIGH	LOW	LOW	LOW	LOW	LOW
↓ ED1b ED Door to Transport	272.0	271.0	242.5	--	--	176.0	190.0	180.0	--	--
↓ ED2b ED Decision to Transport	112.0	97.5	83.0	--	--	40.0	40.0	43.0	--	--
↓ OP18b Avg time ED arrival to discharge	143.0	164.0	147.0	--	--	97.0	91.0	95.0	--	--
↓ OP20 Door to Diagnostic Evaluation	11.0	16.0	16.0	--	--	11.0	11.0	12.0	--	--
↓ OP21 Time to pain medication for long bone fracture	28.0	26.0	26.0	--	--	25.0	22.7	32.3	--	--
↓ OP22 Left without being seen	1.0%	0.4%	0.1%	0.2%	0.2%	1.0%	0.3%	0.3%	0.4%	0.3%



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	Russell County Medical Center					Sycamore Shoals Hospital				
	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18
↓ HCOMP5 SNP Patients who reported that staff "Sometimes" or "Never" explained about medicines before giving it to them	13.0%	7.7%	16.7%	20.0%	16.9%	13.0%	24.6%	16.0%	16.5%	18.6%
↑ HCLEAN HSPAP Patients who reported that their room and bathroom were "Always" clean	76.0%	80.0%	77.8%	84.2%	80.9%	82.0%	81.8%	80.1%	82.0%	81.3%
↓ HCLEAN HSPUP Patients who reported that their room and bathroom were "Usually" clean	16.0%	15.0%	22.2%	7.9%	14.9%	13.0%	13.6%	16.3%	11.3%	13.8%
↓ HCLEAN HSPSNP Patients who reported that their room and bathroom were "Sometimes" or "Never" clean	8.0%	5.0%	0.0%	7.9%	4.3%	5.0%	4.5%	3.5%	6.8%	4.9%
↑ HQUIETHSP AP Patients who reported that the area around their room was "Always" quiet at night	64.0%	75.0%	56.8%	62.2%	62.8%	73.0%	64.9%	63.8%	64.4%	64.4%
↓ HQUIETHSP UP Patients who reported that the area around their room was "Usually" quiet at night	30.0%	20.0%	32.4%	37.8%	31.9%	23.0%	29.1%	30.5%	28.0%	29.2%
↓ HQUIETHSP SNP Patients who reported that the area around their room was "Sometimes" or "Never" quiet at night	6.0%	5.0%	10.8%	0.0%	5.3%	4.0%	6.0%	5.7%	7.6%	6.4%
↑ HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	86.0%	80.8%	86.0%	78.3%	81.8%	86.0%	87.9%	85.5%	88.2%	87.1%
↓ HCOMP6N P Patients who reported that NO, they were not given information about what to do during their recovery at home	14.0%	19.2%	14.0%	21.7%	18.2%	14.0%	12.1%	14.5%	11.8%	12.9%
↑ HCOMP7SA Patients who "Strongly Agree" they understood their care when they left the hospital	50.0%	48.3%	46.7%	40.7%	44.6%	59.0%	44.2%	49.8%	47.6%	47.2%
↓ HCOMP7A Patients who "Agree" they understood their care when they left the hospital	47.0%	40.0%	45.8%	54.0%	47.9%	38.0%	43.4%	39.4%	42.8%	41.8%
↓ HCOMP7D SD Patients who "Disagree" or "Strongly Disagree" they understood their care when they left the hospital	3.0%	5.0%	4.7%	4.4%	4.6%	3.0%	7.8%	6.4%	5.3%	6.5%
↓ HHSP RATING06 Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)	9.0%	0.0%	8.3%	5.3%	5.3%	4.0%	9.1%	9.4%	6.0%	8.2%
↓ HHSP RATING78 Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)	32.0%	25.0%	25.0%	7.9%	18.1%	17.0%	21.2%	16.7%	24.8%	20.8%
↑ HHSP RATING910 Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	59.0%	75.0%	66.7%	86.8%	76.6%	79.0%	69.7%	73.9%	69.2%	71.0%
↑ HRECMND DY Patients who reported YES, they would definitely recommend the hospital	61.0%	75.0%	62.2%	70.3%	68.1%	78.0%	72.9%	73.0%	69.2%	71.7%
↓ HRECMND PY Patients who reported YES, they would probably recommend the hospital	35.0%	25.0%	32.4%	27.0%	28.7%	18.0%	20.2%	21.9%	25.4%	22.5%
↓ HRECMND DN Patients who reported NO, they would probably not or definitely not recommend the hospital	4.0%	0.0%	5.4%	2.7%	3.2%	4.0%	7.0%	5.1%	5.4%	5.8%
<b>Timely &amp; Effective care Cataract Surgery Outcome</b>										
↑ OP31 Cataracts Improvement	--	--	--	--	--	--	--	--	--	--
<b>Timely &amp; Effective care Colonoscopy follow-up</b>										
↑ OP29 Avg Risk Polyp Surveillance	0.0%	--	0.0%	--	0.0%	100.0%	--	100.0%	100.0%	100.0%
↑ OP30 High risk Polyp Surveillance	--	100.0%	66.7%	--	85.7%	75.0%	100.0%	66.7%	--	75.0%
<b>Timely &amp; Effective Care Heart Attack</b>										
↓ OP3b Median Time to Transfer AMI	--	315.0	62.0	--	--	--	139.0	57.0	--	--
↓ OP5 Median Time to ECG AMI and Chest Pain	6.0	6.1	8.4	--	--	5.0	6.9	5.3	--	--
↑ OP2 Fibrinolytic Therapy 30 minutes	--	--	--	--	--	--	--	--	--	--
↑ OP4 Aspirin at Arrival AMI Chest Pain	99.0%	100.0%	100.0%	93.8%	98.1%	--	93.5%	96.3%	97.4%	95.7%
<b>Timely &amp; Effective Care Stroke Care</b>										
↑ STK4 Thrombolytic Therapy	--	--	--	--	--	--	--	--	--	--
<b>Timely &amp; Effective Care- Emergency Department (ED) Throughput</b>										
↓ EDV Emergency Department Volume	LOW	LOW	LOW	LOW	LOW	MEDIUM	MEDIUM	MEDIUM	MEDIUM	MEDIUM
↓ ED1b ED Door to Transport	168.0	164.7	163.5	--	--	210.0	207.7	222.0	--	--
↓ ED2b ED Decision to Transport	39.0	38.7	36.0	--	--	69.0	73.0	79.0	--	--
↓ OP18b Avg time ED arrival to discharge	90.0	95.0	93.0	--	--	124.0	129.0	125.0	--	--
↓ OP20 Door to Diagnostic Evaluation	7.0	8.0	10.0	--	--	14.0	0.5	0.0	--	--
↓ OP21 Time to pain medication for long bone fracture	20.0	21.0	16.0	--	--	63.0	20.0	23.0	--	--
↓ OP22 Left without being seen	1.0%	0.2%	0.3%	0.1%	0.2%	0.0%	0.7%	0.6%	0.4%	0.6%



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	Johnson County Community Hospital					Unicoi County Memorial Hospital				
	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18
↓ HCOMP5 SNP Patients who reported that staff "Sometimes" or "Never" explained about medicines before giving it to them	--	100.0%	100.0%	0.0%	66.7%	20.0%	0.0%	12.0%	16.7%	10.4%
↑ HCLEAN HSPAP Patients who reported that their room and bathroom were "Always" clean	--	100.0%	100.0%	100.0%	100.0%	72.0%	90.0%	81.5%	85.7%	85.3%
↓ HCLEAN HSPUP Patients who reported that their room and bathroom were "Usually" clean	--	0.0%	0.0%	0.0%	0.0%	23.0%	10.0%	11.1%	14.3%	11.8%
↓ HCLEAN HSPSNP Patients who reported that their room and bathroom were "Sometimes" or "Never" clean	--	0.0%	0.0%	0.0%	0.0%	5.0%	0.0%	7.4%	0.0%	2.9%
↑ HQUIETHSP AP Patients who reported that the area around their room was "Always" quiet at night	--	100.0%	100.0%	100.0%	100.0%	68.0%	78.9%	70.4%	71.4%	73.1%
↓ HQUIETHSP UP Patients who reported that the area around their room was "Usually" quiet at night	--	0.0%	0.0%	0.0%	0.0%	23.0%	21.1%	18.5%	14.3%	17.9%
↓ HQUIETHSP SNP Patients who reported that the area around their room was "Sometimes" or "Never" quiet at night	--	0.0%	0.0%	0.0%	0.0%	9.0%	0.0%	11.1%	14.3%	9.0%
↑ HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	--	100.0%	100.0%	100.0%	100.0%	76.0%	87.1%	88.1%	81.3%	85.7%
↓ HCOMP6N P Patients who reported that NO, they were not given information about what to do during their recovery at home	--	0.0%	0.0%	0.0%	0.0%	24.0%	12.9%	11.9%	18.8%	14.3%
↑ HCOMP7SA Patients who "Strongly Agree" they understood their care when they left the hospital	--	0.0%	83.3%	66.7%	58.3%	47.0%	61.4%	45.6%	57.1%	53.8%
↓ HCOMP7A Patients who "Agree" they understood their care when they left the hospital	--	100.0%	0.0%	33.3%	33.3%	40.0%	31.6%	44.3%	38.1%	38.7%
↓ HCOMP7D SD Patients who "Disagree" or "Strongly Disagree" they understood their care when they left the hospital	--	0.0%	0.0%	0.0%	0.0%	4.0%	1.8%	2.5%	1.6%	2.0%
↓ HHSP RATING06 Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)	--	0.0%	0.0%	0.0%	0.0%	12.0%	0.0%	2.0%	0.0%	0.7%
↓ HHSP RATING78 Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)	--	100.0%	0.0%	0.0%	25.0%	21.0%	5.4%	6.9%	4.3%	5.6%
↑ HHSP RATING910 Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	--	100.0%	100.0%	100.0%	100.0%	67.0%	16.3%	18.6%	19.6%	18.2%
↑ HRECMND DY Patients who reported YES, they would definitely recommend the hospital	--	100.0%	100.0%	100.0%	100.0%	62.0%	84.2%	67.9%	81.8%	76.8%
↓ HRECMND PY Patients who reported YES, they would probably recommend the hospital	--	0.0%	0.0%	100.0%	25.0%	28.0%	15.8%	25.0%	18.2%	20.3%
↓ HRECMND DN Patients who reported NO, they would probably not or definitely not recommend the hospital	--	0.0%	0.0%	0.0%	0.0%	10.0%	0.0%	7.1%	0.0%	2.9%
<b>Timely &amp; Effective care Cataract Surgery Outcome</b>										
↑ OP31 Cataracts Improvement	--	--	--	--	--	--	--	--	--	--
<b>Timely &amp; Effective care Colonoscopy follow-up</b>										
↑ OP29 Avg Risk Polyp Surveillance	--	--	--	--	--	--	--	--	--	--
↑ OP30 High risk Polyp Surveillance	--	--	--	--	--	--	--	--	--	--
<b>Timely &amp; Effective Care Heart Attack</b>										
↓ OP3b Median Time to Transfer AMI	--	--	70.0	--	--	--	--	56.0	73.0	64.5
↓ OP5 Median Time to ECG AMI and Chest Pain	--	4.5	9.2	--	--	8.0	12.8	10.4	5.0	9.4
↑ OP2 Fibrinolytic Therapy 30 minutes	--	--	--	--	--	--	--	--	--	--
↑ OP4 Aspirin at Arrival AMI Chest Pain	--	100.0%	100.0%	100.0%	100.0%	--	100.0%	100.0%	100.0%	100.0%
<b>Timely &amp; Effective Care Stroke Care</b>										
↑ STK4 Thrombolytic Therapy	--	--	--	--	--	--	--	--	--	--
<b>Timely &amp; Effective Care- Emergency Department (ED) Throughput</b>										
↓ EDV Emergency Department Volume	LOW	LOW	LOW	LOW	LOW	LOW	LOW	LOW	LOW	LOW
↓ ED1b ED Door to Transport	--	166.0	178.8	--	--	209.0	183.0	197.0	241.8	207.2
↓ ED2b ED Decision to Transport	--	53.0	28.0	--	--	--	42.0	47.0	56.1	48.4
↓ OP18b Avg time ED arrival to discharge	--	92.8	98.5	--	--	119.0	119.3	107.5	146.2	124.3
↓ OP20 Door to Diagnostic Evaluation	--	4.7	5.2	--	--	18.0	7.5	6.5	7.3	7.1
↓ OP21 Time to pain medication for long bone fracture	--	39.0	24.8	--	--	56.0	53.5	25.5	20.3	31.3
↓ OP22 Left without being seen	1.0%	0.9%	0.6%	0.6%	0.7%	1.0%	0.5%	0.4%	0.5%	0.5%



FYTD2018 March 2018

	Laughlin Memorial Hospital					Takoma Regional Hospital				
	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18
↓ HCOMP5 SNP Patients who reported that staff "Sometimes" or "Never" explained about medicines before giving it to them	19.0%	--	--	--	--	16.0%	16.9%	27.6%	15.2%	19.1%
↑ HCLEAN HSPAP Patients who reported that their room and bathroom were "Always" clean	70.0%	--	--	--	--	77.0%	76.1%	77.3%	76.4%	76.6%
↓ HCLEAN HSPUP Patients who reported that their room and bathroom were "Usually" clean	18.0%	--	--	--	--	14.0%	17.4%	8.0%	18.0%	14.6%
↓ HCLEAN HSPSNP Patients who reported that their room and bathroom were "Sometimes" or "Never" clean	12.0%	--	--	--	--	9.0%	6.5%	14.8%	8.2%	9.7%
↑ HQUIETHSP AP Patients who reported that the area around their room was "Always" quiet at night	61.0%	--	--	--	--	66.0%	82.8%	76.7%	70.4%	76.3%
↓ HQUIETHSP UP Patients who reported that the area around their room was "Usually" quiet at night	30.0%	--	--	--	--	28.0%	8.6%	16.7%	18.5%	14.8%
↓ HQUIETHSP SNP Patients who reported that the area around their room was "Sometimes" or "Never" quiet at night	9.0%	--	--	--	--	6.0%	8.6%	6.7%	11.1%	8.9%
↑ HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	88.0%	--	--	--	--	91.0%	93.8%	90.4%	91.5%	91.9%
↓ HCOMP6N P Patients who reported that NO, they were not given information about what to do during their recovery at home	12.0%	--	--	--	--	9.0%	6.3%	9.6%	8.5%	8.1%
↑ HCOMP7SA Patients who "Strongly Agree" they understood their care when they left the hospital	50.0%	--	--	--	--	56.0%	56.7%	51.4%	51.9%	53.3%
↓ HCOMP7A Patients who "Agree" they understood their care when they left the hospital	45.0%	--	--	--	--	40.0%	40.9%	45.3%	25.6%	36.4%
↓ HCOMP7D SD Patients who "Disagree" or "Strongly Disagree" they understood their care when they left the hospital	5.0%	--	--	--	--	3.0%	2.4%	3.3%	3.6%	3.1%
↓ HHSP RATING06 Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)	6.0%	--	--	--	--	7.0%	7.5%	6.8%	8.3%	7.6%
↓ HHSP RATING78 Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)	17.0%	--	--	--	--	16.0%	10.8%	17.0%	11.9%	13.1%
↑ HHSP RATING910 Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	77.0%	--	--	--	--	77.0%	81.7%	76.1%	79.8%	79.3%
↑ HRECMND DY Patients who reported YES, they would definitely recommend the hospital	76.0%	--	--	--	--	78.0%	82.2%	70.2%	79.4%	77.6%
↓ HRECMND PY Patients who reported YES, they would probably recommend the hospital	22.0%	--	--	--	--	19.0%	12.2%	23.8%	13.1%	16.0%
↓ HRECMND DN Patients who reported NO, they would probably not or definitely not recommend the hospital	2.0%	--	--	--	--	3.0%	5.6%	6.0%	7.5%	6.4%
<b>Timely &amp; Effective care Cataract Surgery Outcome</b>										
↑ OP31 Cataracts Improvement	--	--	--	--	--	--	--	--	--	--
<b>Timely &amp; Effective care Colonoscopy follow-up</b>										
↑ OP29 Avg Risk Polyp Surveillance	86.0%	88.6%	91.3%	--	89.6%	91.0%	88.4%	25.0%	--	68.3%
↑ OP30 High risk Polyp Surveillance	89.0%	88.5%	85.0%	--	87.9%	83.0%	95.1%	100.0%	--	96.3%
<b>Timely &amp; Effective Care Heart Attack</b>										
↓ OP3b Median Time to Transfer AMI	47.0	122.7	122.7	--	--	79.0	76.3	146.0	--	--
↓ OP5 Median Time to ECG AMI and Chest Pain	7.0	7.3	7.3	--	--	9.0	--	--	--	--
↑ OP2 Fibrinolytic Therapy 30 minutes	--	--	--	--	--	--	--	--	--	--
↑ OP4 Aspirin at Arrival AMI Chest Pain	--	100.0%	100.0%	--	100.0%	99.0%	100.0%	100.0%	--	100.0%
<b>Timely &amp; Effective Care Stroke Care</b>										
↑ STK4 Thrombolytic Therapy	--	--	--	--	--	--	--	--	--	--
<b>Timely &amp; Effective Care- Emergency Department (ED) Throughput</b>										
↓ EDV Emergency Department Volume	MEDIUM	MEDIUM	MEDIUM	MEDIUM	MEDIUM	MEDIUM	MEDIUM	MEDIUM	MEDIUM	MEDIUM
↓ ED1b ED Door to Transport	206.0	--	--	--	--	221.0	--	--	--	--
↓ ED2b ED Decision to Transport	--	--	--	--	--	29.0	--	--	--	--
↓ OP18b Avg time ED arrival to discharge	124.0	97.3	97.3	--	--	139.0	139.0	139.0	--	--
↓ OP20 Door to Diagnostic Evaluation	25.0	18.7	18.7	--	--	26.0	26.0	26.0	--	--
↓ OP21 Time to pain medication for long bone fracture	65.0	64.3	64.3	--	--	70.0	70.0	70.0	--	--
↓ OP22 Left without being seen	1.0%	0.4%	0.6%	--	0.5%	2.0%	2.7%	2.2%	--	2.5%



**Ballad Health**

**FYTD2018 March 2018**

	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18
↑ OP23 Head CT stroke patients	63.2%	88.9%	80.0%	55.0%	76.8%
<b>Timely &amp; Effective Care Preventive Care</b>					
↑ IMM2 Immunization for Influenza	97.4%	--	98.2%	98.1%	98.2%
↑ IMM3OP27 FACADHPCT HCW Influenza Vaccination	97.0%	98.0%	98.0%	98.0%	98.0%
<b>Timely &amp; Effective Care Blood Clot Prevention &amp; Treatment</b>					
↑ VTE5 Warfarin Therapy at Discharge	--	--	--	--	--
↓ VTE6 HAC VTE	1.7%	4.5%	2.6%	0.0%	3.2%
<b>Timely &amp; Effective Care Pregnancy &amp; delivery care</b>					
↓ PC01 Elective Delivery	0.30%	0.00%	0.00%	0.00%	0.00%
<b>Complications - Surgical Complications</b>					
↓ Hip and Knee Complications2	0.0	0.0	0.0	0.0	0.0
↓ PSI90 Complications / patient safety for selected indicators	0.8	--	--	--	--
↓ PSI4SURG COMP Death rate among surgical patients with serious treatable complications	140.6	164.3	192.6	169.6	176.7
<b>Readmissions &amp; deaths 30 day rates of readmission</b>					
↓ READM30 COPD Chronic obstructive pulmonary disease 30day readmission rate	18.2%	19.6%	19.4%	18.9%	19.4%
↓ READM30 AMI Acute myocardial infarction (AMI) 30day readmission rate	12.9%	13.7%	12.7%	10.4%	12.9%
↓ READM30HF Heart Failure 30Day readmissions rate	20.5%	24.9%	23.0%	21.8%	23.6%
↓ READM30PN Pneumonia 30day readmission rate	17.7%	17.5%	17.3%	14.6%	16.7%
↓ READM30 STK Stroke 30day readmission rate	9.3%	11.1%	11.3%	5.7%	10.4%
↓ READM30 HIPKNEE 30day readmission rate following elective THA / TKA	3.8%	3.7%	3.9%	3.9%	3.8%
↓ READM30 HOSPWIDE 30day hospitalwide allcause unplanned readmission	12.0%	12.9%	13.1%	13.6%	13.1%
↓ READM30 CABG Coronary artery bypass graft (CABG) surgery 30day readmission rate2	8.7%	12.1%	12.4%	14.8%	12.5%
<b>Readmissions &amp; deaths 30 day death (mortality) rates</b>					
↓ MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate	2.0%	2.1%	5.2%	1.8%	3.0%
↓ MORT30 COPD 30day mortality rate COPD patients	1.8%	2.5%	2.3%	2.9%	2.6%
↓ MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate	4.7%	4.2%	5.0%	5.6%	4.9%
↓ MORT30HF Heart failure 30day mortality rate	3.9%	2.5%	2.7%	3.9%	3.0%
↓ MORT30PN Pneumonia 30day mortality rate	4.7%	4.0%	5.9%	5.8%	5.5%
↓ MORT30STK Stroke 30day mortality rate	8.2%	5.1%	7.0%	4.3%	5.4%
<b>Use of medical imaging Outpatient imaging efficiency</b>					
↕ OP8 MRI Lumbar Spine for Low Back Pain	38.0%	34.0%	34.0%	--	34.1%
↕ OP9 Mammography Followup Rates	8.0%	--	--	--	6.9%
↕ OP10 Abdomen CT Use of Contrast Material	6.0%	7.0%	7.0%	6.8%	7.0%
↕ OP11 Thorax CT Use of Contrast Material	1.0%	1.0%	1.0%	--	0.7%
↕ OP13 Outpatients who got cardiac imaging stress tests before lowrisk outpatient surgery	3.0%	4.0%	4.0%	--	3.8%
↕ OP14 Outpatients with brain CT scans who got a sinus CT scan at the same time	2.0%	1.0%	1.0%	--	1.0%



FYTD2018 March 2018

**Franklin Woods Community Hospital**

**Johnson City Medical Center**

	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18
↑ OP23 Head CT stroke patients	66.7%	100.0%	--	--	100.0%	0.0%	100.0%	--	0.0%	50.0%
<b>Timely &amp; Effective Care Preventive Care</b>										
↑ IMM2 Immunization for Influenza	99.0%	--	99.6%	99.4%	99.5%	96.0%	--	98.2%	97.8%	98.1%
↑ IMM3OP27 FACADHPCT HCW Influenza Vaccination	99.0%	99.0%	99.0%	--	--	98.0%	98.0%	98.0%	--	--
<b>Timely &amp; Effective Care Blood Clot Prevention &amp; Treatment</b>										
↑ VTE5 Warfarin Therapy at Discharge	--	--	--	--	--	--	--	--	--	--
↓ VTE6 HAC VTE	--	33.3%	0.0%	--	25.0%	0.0%	7.7%	0.0%	0.0%	3.0%
<b>Timely &amp; Effective Care Pregnancy &amp; delivery care</b>										
↓ PC01 Elective Delivery	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
<b>Complications - Surgical Complications</b>										
↓ Hip and Knee Complications2	--	--	--	--	--	0.0	0.0	0.0	0.0	0.0
↓ PSI90 Complications / patient safety for selected indicators	0.8	1.1	1.1	--	--	0.9	1.1	1.0	--	--
↓ PSI4SURG COMP Death rate among surgical patients with serious treatable complications	--	71.4	0.0	0.0	27.0	153.5	130.4	231.6	197.8	192.2
<b>Readmissions &amp; deaths 30 day rates of readmission</b>										
↓ READM30 COPD Chronic obstructive pulmonary disease 30day readmission rate	10.1%	14.8%	7.7%	23.5%	15.4%	20.1%	20.2%	13.8%	16.0%	16.9%
↓ READM30 AMI Acute myocardial infarction (AMI) 30day readmission rate	--	--	0.0%	0.0%	0.0%	13.5%	12.7%	12.6%	12.3%	12.5%
↓ READM30HF Heart Failure 30Day readmissions rate	9.7%	25.0%	15.8%	20.0%	19.6%	22.6%	24.1%	22.8%	26.3%	24.4%
↓ READM30PN Pneumonia 30day readmission rate	16.3%	10.5%	5.0%	11.9%	9.5%	18.8%	15.3%	17.2%	15.6%	16.0%
↓ READM30 STK Stroke 30day readmission rate	0.0%	0.0%	--	0.0%	0.0%	9.4%	4.1%	15.6%	6.8%	8.4%
↓ READM30 HIPKNEE 30day readmission rate following elective THA / TKA	--	--	--	--	--	3.0%	1.6%	3.0%	3.9%	2.8%
↓ READM30 HOSPWIDE 30day hospitalwide allcause unplanned readmission	4.6%	7.3%	5.9%	7.9%	7.1%	10.6%	11.8%	12.4%	12.4%	12.2%
↓ READM30 CABG Coronary artery bypass graft (CABG) surgery 30day readmission rate2	--	--	--	--	--	8.7%	15.5%	7.8%	9.8%	11.3%
<b>Readmissions &amp; deaths 30 day death (mortality) rates</b>										
↓ MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate	--	--	--	--	--	1.2%	3.3%	3.8%	2.4%	3.2%
↓ MORT30 COPD 30day mortality rate COPD patients	2.6%	0.0%	3.0%	1.5%	1.4%	2.3%	3.5%	4.2%	5.1%	4.2%
↓ MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate	--	--	0.0%	0.0%	0.0%	4.8%	6.8%	6.4%	7.5%	6.9%
↓ MORT30HF Heart failure 30day mortality rate	2.1%	0.0%	0.0%	4.8%	1.9%	4.2%	2.1%	4.8%	6.6%	4.6%
↓ MORT30PN Pneumonia 30day mortality rate	2.0%	1.7%	2.4%	1.6%	1.9%	5.1%	6.5%	7.9%	10.4%	8.7%
↓ MORT30STK Stroke 30day mortality rate	--	0.0%	--	0.0%	0.0%	7.7%	9.3%	15.9%	6.4%	10.2%
<b>Use of medical imaging Outpatient imaging efficiency</b>										
↕ OP8 MRI Lumbar Spine for Low Back Pain	33.9%	33.9%	33.9%	--	--	35.4%	35.4%	35.4%	--	--
↕ OP9 Mammography Followup Rates	--	--	--	--	--	5.8%	5.8%	5.8%	--	--
↕ OP10 Abdomen CT Use of Contrast Material	12.7%	12.7%	12.7%	--	--	4.6%	4.6%	4.6%	--	--
↕ OP11 Thorax CT Use of Contrast Material	0.0%	0.0%	0.0%	--	--	0.2%	0.2%	0.2%	--	--
↕ OP13 Outpatients who got cardiac imaging stress tests before lowrisk outpatient surgery	1.6%	1.6%	1.6%	--	--	2.9%	2.9%	2.9%	--	--
↕ OP14 Outpatients with brain CT scans who got a sinus CT scan at the same time	--	--	--	--	--	2.8%	2.8%	2.8%	--	--



FYTD2018 March 2018

		Dickenson County Hospital					Hancock County Hospital				
		Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18
↑	OP23 Head CT stroke patients	25.0%	100.0%	100.0%	100.0%	100.0%	--	--	--	--	--
<b>Timely &amp; Effective Care Preventive Care</b>											
↑	IMM2 Immunization for Influenza	--	--	100.0%	100.0%	100.0%	--	--	--	--	--
↑	IMM3OP27 FACADHPCT HCW Influenza Vaccination	--	--	--	--	--	100.0%	100.0%	100.0%	--	--
<b>Timely &amp; Effective Care Blood Clot Prevention &amp; Treatment</b>											
↑	VTE5 Warfarin Therapy at Discharge	--	--	--	--	--	--	--	--	--	--
↓	VTE6 HAC VTE	--	--	--	--	--	--	--	--	--	--
<b>Timely &amp; Effective Care Pregnancy &amp; delivery care</b>											
↓	PC01 Elective Delivery	--	--	--	--	--	--	--	--	--	--
<b>Complications - Surgical Complications</b>											
↓	Hip and Knee Complications2	--	--	--	--	--	--	--	--	--	--
↓	PSI90 Complications / patient safety for selected indicators	--	--	--	--	--	--	1.0	1.0	1.0	1.0
↓	PSI4SURG COMP Death rate among surgical patients with serious treatable complications	--	--	--	--	--	--	--	--	--	--
<b>Readmissions &amp; deaths 30 day rates of readmission</b>											
↓	READM30 COPD Chronic obstructive pulmonary disease 30day readmission rate	--	--	--	--	--	--	0.0%	75.0%	20.0%	30.8%
↓	READM30 AMI Acute myocardial infarction (AMI) 30day readmission rate	--	--	--	--	--	--	--	--	--	--
↓	READM30HF Heart Failure 30Day readmissions rate	--	--	--	--	--	--	0.0%	0.0%	0.0%	0.0%
↓	READM30PN Pneumonia 30day readmission rate	--	--	--	--	--	17.0%	0.0%	0.0%	0.0%	0.0%
↓	READM30 STK Stroke 30day readmission rate	--	--	--	--	--	--	--	--	--	--
↓	READM30 HIPKNEE 30day readmission rate following elective THA / TKA	--	--	--	--	--	--	--	--	--	--
↓	READM30 HOSPWIDE 30day hospitalwide allcause unplanned readmission	--	--	--	--	--	15.6%	18.2%	16.3%	2.3%	11.1%
↓	READM30 CABG Coronary artery bypass graft (CABG) surgery 30day readmission rate2	--	--	--	--	--	--	--	--	--	--
<b>Readmissions &amp; deaths 30 day death (mortality) rates</b>											
↓	MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate	--	--	--	--	--	--	--	--	--	--
↓	MORT30 COPD 30day mortality rate COPD patients	--	--	--	--	--	--	0.0%	0.0%	0.0%	0.0%
↓	MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate	--	--	--	--	--	--	--	--	--	--
↓	MORT30HF Heart failure 30day mortality rate	--	--	--	--	--	--	0.0%	0.0%	0.0%	0.0%
↓	MORT30PN Pneumonia 30day mortality rate	--	--	--	--	--	16.9%	16.7%	0.0%	0.0%	2.9%
↓	MORT30STK Stroke 30day mortality rate	--	--	--	--	--	--	--	--	--	--
<b>Use of medical imaging Outpatient imaging efficiency</b>											
↕	OP8 MRI Lumbar Spine for Low Back Pain	--	--	--	--	--	--	--	--	--	--
↕	OP9 Mammography Followup Rates	--	--	--	--	--	--	--	--	--	--
↕	OP10 Abdomen CT Use of Contrast Material	--	--	--	--	--	--	--	--	--	--
↕	OP11 Thorax CT Use of Contrast Material	--	--	--	--	--	--	--	--	--	--
↕	OP13 Outpatients who got cardiac imaging stress tests before lowrisk outpatient surgery	--	--	--	--	--	--	--	--	--	--
↕	OP14 Outpatients with brain CT scans who got a sinus CT scan at the same time	--	--	--	--	--	--	--	--	--	--



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**Hawkins County Memorial Hospital**

**Holston Valley Medical Center**

	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18
↑ OP23 Head CT stroke patients	50.0%	--	--	--	--	78.6%	100.0%	90.0%	0.0%	86.7%
<b>Timely &amp; Effective Care Preventive Care</b>										
↑ IMM2 Immunization for Influenza	97.0%	--	100.0%	100.0%	100.0%	95.0%	--	98.2%	97.8%	98.1%
↑ IMM3OP27 FACADHPCT HCW Influenza Vaccination	99.0%	99.0%	99.0%	--	--	94.0%	96.0%	96.0%	--	--
<b>Timely &amp; Effective Care Blood Clot Prevention &amp; Treatment</b>										
↑ VTE5 Warfarin Therapy at Discharge	--	--	--	--	--	56.0%	--	--	--	--
↓ VTE6 HAC VTE	1.0%	--	--	--	--	3.0%	0.0%	10.0%	0.0%	3.6%
<b>Timely &amp; Effective Care Pregnancy &amp; delivery care</b>										
↓ PC01 Elective Delivery	--	--	--	--	--	0.00%	0.00%	0.00%	0.00%	0.00%
<b>Complications - Surgical Complications</b>										
↓ Hip and Knee Complications2	--	--	--	--	--	0.0	0.0	0.0	--	0.0
↓ PSI90 Complications / patient safety for selected indicators	0.9	1.0	1.0	1.0	1.0	1.1	0.9	1.0	0.6	0.8
↓ PSI4SURG COMP Death rate among surgical patients with serious treatable complications	--	--	--	--	--	130.2	200.0	229.5	117.6	185.2
<b>Readmissions &amp; deaths 30 day rates of readmission</b>										
↓ READM30 COPD Chronic obstructive pulmonary disease 30day readmission rate	18.6%	13.6%	4.2%	22.2%	12.5%	19.7%	17.8%	21.0%	21.3%	20.1%
↓ READM30 AMI Acute myocardial infarction (AMI) 30day readmission rate	--	0.0%	100.0%	0.0%	50.0%	8.5%	9.6%	15.4%	15.0%	13.3%
↓ READM30HF Heart Failure 30Day readmissions rate	21.1%	25.0%	14.3%	10.0%	16.0%	21.6%	24.5%	18.9%	23.8%	22.2%
↓ READM30PN Pneumonia 30day readmission rate	16.8%	8.3%	12.5%	11.9%	11.6%	19.4%	15.3%	16.6%	17.3%	16.6%
↓ READM30 STK Stroke 30day readmission rate	--	0.0%	0.0%	50.0%	12.5%	14.6%	13.0%	8.5%	9.1%	10.1%
↓ READM30 HIPKNEE 30day readmission rate following elective THA / TKA	--	--	--	--	--	4.2%	3.3%	4.2%	5.0%	4.2%
↓ READM30 HOSPWIDE 30day hospitalwide allcause unplanned readmission	14.6%	12.1%	12.4%	18.2%	14.4%	12.7%	12.0%	11.8%	12.3%	12.0%
↓ READM30 CABG Coronary artery bypass graft (CABG) surgery 30day readmission rate2	--	--	--	--	--	8.0%	5.2%	12.3%	8.2%	8.5%
<b>Readmissions &amp; deaths 30 day death (mortality) rates</b>										
↓ MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate	--	--	--	--	--	1.4%	1.7%	3.3%	3.2%	2.7%
↓ MORT30 COPD 30day mortality rate COPD patients	0.0%	0.0%	0.0%	0.0%	0.0%	1.4%	2.6%	1.8%	1.7%	2.0%
↓ MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate	--	0.0%	0.0%	0.0%	0.0%	4.5%	1.1%	3.1%	3.3%	2.5%
↓ MORT30HF Heart failure 30day mortality rate	0.0%	0.0%	0.0%	4.3%	1.7%	3.8%	3.0%	3.6%	1.2%	2.7%
↓ MORT30PN Pneumonia 30day mortality rate	2.6%	0.0%	2.6%	0.0%	1.0%	2.6%	4.8%	6.0%	6.6%	6.0%
↓ MORT30STK Stroke 30day mortality rate	--	0.0%	0.0%	0.0%	0.0%	17.4%	3.6%	4.0%	2.6%	3.4%
<b>Use of medical imaging Outpatient imaging efficiency</b>										
↕ OP8 MRI Lumbar Spine for Low Back Pain	--	--	--	--	--	43.1%	43.1%	43.1%	--	--
↕ OP9 Mammography Followup Rates	3.7%	3.7%	3.7%	--	--	2.9%	2.9%	2.9%	--	--
↕ OP10 Abdomen CT Use of Contrast Material	6.0%	6.0%	6.0%	--	--	14.3%	14.3%	14.3%	--	--
↕ OP11 Thorax CT Use of Contrast Material	3.2%	3.2%	3.2%	--	--	0.0%	0.0%	0.0%	--	--
↕ OP13 Outpatients who got cardiac imaging stress tests before lowrisk outpatient surgery	--	--	--	--	--	4.4%	4.4%	4.4%	--	--
↕ OP14 Outpatients with brain CT scans who got a sinus CT scan at the same time	--	--	--	--	--	1.0%	1.0%	1.0%	--	--



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	Indian Path Medical Center					Lonesome Pine Hospital				
	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18
↑ OP23 Head CT stroke patients	--	66.7%	66.7%	0.0%	57.1%	54.5%	66.7%	--	0.0%	50.0%
<b>Timely &amp; Effective Care Preventive Care</b>										
↑ IMM2 Immunization for Influenza	99.0%	--	99.2%	100.0%	99.5%	96.0%	--	97.5%	100.0%	98.1%
↑ IMM3OP27 FACADHPCT HCW Influenza Vaccination	97.0%	97.0%	97.0%	--	--	99.0%	99.0%	99.0%	--	--
<b>Timely &amp; Effective Care Blood Clot Prevention &amp; Treatment</b>										
↑ VTE5 Warfarin Therapy at Discharge	--	--	--	--	--	88.0%	--	--	--	--
↓ VTE6 HAC VTE	0.0%	0.0%	0.0%	0.0%	0.0%	--	--	--	--	--
<b>Timely &amp; Effective Care Pregnancy &amp; delivery care</b>										
↓ PC01 Elective Delivery	0.00%	0.00%	0.00%	0.00%	0.00%	5.00%	0.00%	0.00%	0.00%	0.00%
<b>Complications - Surgical Complications</b>										
↓ Hip and Knee Complications2	0.0	0.0	0.0	0.0	0.0	--	0.0	0.0	--	0.0
↓ PSI90 Complications / patient safety for selected indicators	0.9	1.1	1.0	--	--	0.9	1.0	1.0	1.0	0.9
↓ PSI4SURG COMP Death rate among surgical patients with serious treatable complications	135.6	125.0	66.7	0.0	68.2	--	0.0	0.0	--	0.0
<b>Readmissions &amp; deaths 30 day rates of readmission</b>										
↓ READM30 COPD Chronic obstructive pulmonary disease 30day readmission rate	18.4%	15.6%	7.9%	11.5%	11.9%	28.4%	10.2%	24.5%	17.1%	16.8%
↓ READM30 AMI Acute myocardial infarction (AMI) 30day readmission rate	10.4%	9.1%	10.0%	6.1%	8.5%	17.2%	33.3%	0.0%	0.0%	14.3%
↓ READM30HF Heart Failure 30Day readmissions rate	18.1%	14.3%	19.6%	21.7%	18.9%	32.5%	40.0%	43.8%	23.3%	32.8%
↓ READM30PN Pneumonia 30day readmission rate	14.8%	14.8%	10.9%	11.8%	12.0%	24.8%	26.3%	31.3%	21.6%	26.3%
↓ READM30 STK Stroke 30day readmission rate	6.2%	10.0%	11.8%	0.0%	8.7%	--	0.0%	0.0%	0.0%	0.0%
↓ READM30 HIPKNEE 30day readmission rate following elective THA / TKA	3.4%	0.0%	1.8%	3.6%	1.6%	--	0.0%	20.0%	--	11.1%
↓ READM30 HOSPWIDE 30day hospitalwide allcause unplanned readmission	9.5%	10.1%	9.7%	9.3%	9.7%	16.5%	10.5%	12.8%	11.9%	11.7%
↓ READM30 CABG Coronary artery bypass graft (CABG) surgery 30day readmission rate2	--	--	--	--	--	--	--	--	--	--
<b>Readmissions &amp; deaths 30 day death (mortality) rates</b>										
↓ MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate	--	--	--	--	--	--	--	--	--	--
↓ MORT30 COPD 30day mortality rate COPD patients	2.0%	2.2%	5.0%	0.0%	2.2%	1.2%	3.1%	0.0%	6.0%	3.0%
↓ MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate	4.5%	8.3%	4.8%	8.6%	7.1%	2.8%	0.0%	0.0%	0.0%	0.0%
↓ MORT30HF Heart failure 30day mortality rate	2.2%	0.0%	0.0%	4.2%	1.6%	6.1%	0.0%	0.0%	0.0%	0.0%
↓ MORT30PN Pneumonia 30day mortality rate	2.0%	2.9%	12.0%	3.9%	6.8%	2.1%	2.1%	1.8%	4.5%	2.9%
↓ MORT30STK Stroke 30day mortality rate	3.3%	0.0%	0.0%	0.0%	0.0%	14.5%	0.0%	0.0%	0.0%	0.0%
<b>Use of medical imaging Outpatient imaging efficiency</b>										
↕ OP8 MRI Lumbar Spine for Low Back Pain	--	--	--	--	--	47.7%	47.7%	47.7%	--	--
↕ OP9 Mammography Followup Rates	5.6%	5.6%	5.6%	--	--	5.2%	5.2%	5.2%	--	--
↕ OP10 Abdomen CT Use of Contrast Material	7.9%	7.9%	7.9%	--	--	9.4%	9.4%	9.4%	--	--
↕ OP11 Thorax CT Use of Contrast Material	0.0%	0.0%	0.0%	--	--	3.9%	3.9%	3.9%	--	--
↕ OP13 Outpatients who got cardiac imaging stress tests before lowrisk outpatient surgery	1.5%	1.5%	1.5%	--	--	5.5%	5.5%	5.5%	--	--
↕ OP14 Outpatients with brain CT scans who got a sinus CT scan at the same time	--	--	--	--	--	1.4%	1.4%	1.4%	--	--



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		Norton Community Hospital					Bristol Regional Medical Center				
		Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18
↑	OP23 Head CT stroke patients	66.7%	100.0%	50.0%	--	66.7%	60.0%	--	100.0%	100.0%	100.0%
<b>Timely &amp; Effective Care Preventive Care</b>											
↑	IMM2 Immunization for Influenza	99.0%	--	100.0%	97.8%	99.2%	96.0%	--	100.0%	98.9%	99.6%
↑	IMM3OP27 FACADHPCT HCW Influenza Vaccination	97.0%	97.0%	97.0%	--	--	99.0%	99.0%	99.0%	--	99.0%
<b>Timely &amp; Effective Care Blood Clot Prevention &amp; Treatment</b>											
↑	VTE5 Warfarin Therapy at Discharge	--	--	--	--	--	55.0%	--	--	--	--
↓	VTE6 HAC VTE	--	--	--	--	--	3.0%	0.0%	0.0%	--	0.0%
<b>Timely &amp; Effective Care Pregnancy &amp; delivery care</b>											
↓	PC01 Elective Delivery	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
<b>Complications - Surgical Complications</b>											
↓	Hip and Knee Complications2	--	--	--	--	--	0.0	0.0	0.0	--	0.0
↓	PSI90 Complications / patient safety for selected indicators	0.9	1.1	1.1	--	--	0.8	0.9	0.9	1.0	0.8
↓	PSI4SURG COMP Death rate among surgical patients with serious treatable complications	--	500.0	0.0	83.3	150.0	123.3	218.8	215.7	179.5	204.9
<b>Readmissions &amp; deaths 30 day rates of readmission</b>											
↓	READM30 COPD Chronic obstructive pulmonary disease 30day readmission rate	14.8%	22.0%	20.0%	8.1%	16.9%	20.1%	23.7%	17.8%	19.7%	20.3%
↓	READM30 AMI Acute myocardial infarction (AMI) 30day readmission rate	2.4%	0.0%	0.0%	33.3%	5.9%	8.9%	10.0%	8.3%	16.2%	11.6%
↓	READM30HF Heart Failure 30Day readmissions rate	20.1%	10.3%	13.8%	19.2%	14.3%	22.6%	25.2%	26.0%	17.8%	23.1%
↓	READM30PN Pneumonia 30day readmission rate	16.1%	17.4%	12.5%	11.0%	12.4%	14.7%	20.6%	18.8%	14.1%	17.2%
↓	READM30 STK Stroke 30day readmission rate	10.0%	0.0%	0.0%	12.5%	4.0%	13.4%	11.0%	3.9%	13.4%	9.7%
↓	READM30 HIPKNEE 30day readmission rate following elective THA / TKA	0.0%	0.0%	--	--	0.0%	1.8%	2.3%	5.0%	3.0%	3.5%
↓	READM30 HOSPWIDE 30day hospitalwide allcause unplanned readmission	9.2%	12.5%	12.8%	10.3%	11.8%	13.1%	11.9%	11.7%	12.3%	12.0%
↓	READM30 CABG Coronary artery bypass graft (CABG) surgery 30day readmission rate2	--	--	--	--	--	10.0%	13.0%	9.3%	16.4%	13.0%
<b>Readmissions &amp; deaths 30 day death (mortality) rates</b>											
↓	MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate	--	--	--	--	--	3.3%	1.4%	8.2%	0.0%	3.1%
↓	MORT30 COPD 30day mortality rate COPD patients	0.7%	0.0%	0.0%	2.6%	0.7%	0.0%	0.6%	3.1%	2.9%	2.3%
↓	MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate	8.9%	14.3%	0.0%	25.0%	11.8%	3.8%	1.6%	8.1%	0.7%	3.5%
↓	MORT30HF Heart failure 30day mortality rate	1.4%	5.3%	0.0%	7.1%	3.9%	3.7%	0.6%	2.5%	2.6%	1.9%
↓	MORT30PN Pneumonia 30day mortality rate	1.6%	3.4%	3.0%	1.2%	2.3%	3.4%	2.8%	5.6%	4.9%	4.6%
↓	MORT30STK Stroke 30day mortality rate	2.5%	0.0%	0.0%	11.1%	5.9%	15.0%	3.7%	3.7%	2.3%	3.3%
<b>Use of medical imaging Outpatient imaging efficiency</b>											
↕	OP8 MRI Lumbar Spine for Low Back Pain	42.9%	42.9%	42.9%	--	--	43.2%	43.2%	43.2%	--	43.2%
↕	OP9 Mammography Followup Rates	3.2%	3.2%	3.2%	--	--	9.1%	9.1%	9.1%	--	9.1%
↕	OP10 Abdomen CT Use of Contrast Material	4.7%	4.7%	4.7%	--	--	4.0%	4.0%	4.0%	--	4.0%
↕	OP11 Thorax CT Use of Contrast Material	0.8%	0.8%	0.8%	--	--	0.2%	0.2%	0.2%	--	0.2%
↕	OP13 Outpatients who got cardiac imaging stress tests before lowrisk outpatient surgery	2.6%	2.6%	2.6%	--	--	4.0%	4.0%	4.0%	4.0%	4.0%
↕	OP14 Outpatients with brain CT scans who got a sinus CT scan at the same time	0.5%	0.5%	0.5%	--	--	0.8%	0.8%	0.8%	0.8%	0.8%



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		Johnston Memorial Hospital					Smyth County Community Hospital				
		Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18
↑	OP23 Head CT stroke patients	57.1%	100.0%	66.7%	40.0%	60.0%	75.0%	50.0%	100.0%	--	66.7%
<b>Timely &amp; Effective Care Preventive Care</b>											
↑	IMM2 Immunization for Influenza	97.0%	--	97.5%	94.3%	96.2%	100.0%	--	100.0%	100.0%	100.0%
↑	IMM3OP27 FACADHPCT HCW Influenza Vaccination	99.0%	99.0%	99.0%	--	--	99.0%	98.0%	98.0%	--	--
<b>Timely &amp; Effective Care Blood Clot Prevention &amp; Treatment</b>											
↑	VTE5 Warfarin Therapy at Discharge	--	--	--	--	--	--	--	--	--	--
↓	VTE6 HAC VTE	0.0%	0.0%	0.0%	0.0%	0.0%	--	--	--	--	--
<b>Timely &amp; Effective Care Pregnancy &amp; delivery care</b>											
↓	PC01 Elective Delivery	0.00%	0.00%	0.00%	0.00%	0.00%	--	--	--	--	--
<b>Complications - Surgical Complications</b>											
↓	Hip and Knee Complications2	0.0	0.0	0.0	0.0	0.0	0.0	0.1	0.0	0.0	0.0
↓	PSI90 Complications / patient safety for selected indicators	0.8	1.1	1.1	--	--	0.8	1.0	1.0	--	--
↓	PSI4SURG COMP Death rate among surgical patients with serious treatable complications	147.4	190.5	136.4	300.0	206.3	--	0.0	--	--	0.0
<b>Readmissions &amp; deaths 30 day rates of readmission</b>											
↓	READM30 COPD Chronic obstructive pulmonary disease 30day readmission rate	16.6%	25.2%	22.4%	21.3%	23.2%	18.5%	9.7%	21.4%	16.2%	15.6%
↓	READM30 AMI Acute myocardial infarction (AMI) 30day readmission rate	12.1%	10.9%	3.8%	9.1%	7.9%	17.9%	0.0%	0.0%	0.0%	0.0%
↓	READM30HF Heart Failure 30Day readmissions rate	22.1%	27.4%	25.3%	25.9%	26.3%	18.8%	0.0%	13.6%	36.4%	20.0%
↓	READM30PN Pneumonia 30day readmission rate	18.9%	14.4%	15.8%	12.6%	14.1%	16.3%	7.4%	6.3%	12.0%	9.2%
↓	READM30 STK Stroke 30day readmission rate	9.9%	15.6%	16.7%	9.1%	14.4%	11.8%	0.0%	20.0%	0.0%	5.0%
↓	READM30 HIPKNEE 30day readmission rate following elective THA / TKA	7.3%	2.9%	0.0%	0.0%	1.0%	3.1%	12.5%	3.4%	21.4%	10.2%
↓	READM30 HOSPWIDE 30day hospitalwide allcause unplanned readmission	11.5%	14.7%	14.4%	12.3%	13.9%	9.7%	6.5%	10.3%	12.8%	10.2%
↓	READM30 CABG Coronary artery bypass graft (CABG) surgery 30day readmission rate2	--	--	--	--	--	--	--	--	--	--
<b>Readmissions &amp; deaths 30 day death (mortality) rates</b>											
↓	MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate	--	--	--	--	--	--	--	--	--	--
↓	MORT30 COPD 30day mortality rate COPD patients	0.7%	5.8%	1.3%	6.9%	5.1%	1.5%	0.0%	0.0%	0.0%	0.0%
↓	MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate	3.0%	5.3%	1.9%	16.3%	7.3%	0.0%	0.0%	0.0%	0.0%	0.0%
↓	MORT30HF Heart failure 30day mortality rate	2.3%	6.4%	1.3%	5.6%	4.3%	5.5%	0.0%	4.3%	0.0%	1.7%
↓	MORT30PN Pneumonia 30day mortality rate	4.2%	4.3%	5.4%	6.9%	5.8%	2.8%	0.0%	3.0%	6.0%	3.8%
↓	MORT30STK Stroke 30day mortality rate	2.4%	4.2%	3.2%	12.5%	6.3%	4.5%	0.0%	16.7%	0.0%	5.3%
<b>Use of medical imaging Outpatient imaging efficiency</b>											
↕	OP8 MRI Lumbar Spine for Low Back Pain	35.4%	35.4%	35.4%	--	--	--	--	--	--	--
↕	OP9 Mammography Followup Rates	3.4%	3.4%	3.4%	--	--	3.8%	3.8%	3.8%	--	--
↕	OP10 Abdomen CT Use of Contrast Material	2.0%	2.0%	2.0%	--	--	0.5%	0.5%	0.5%	--	--
↕	OP11 Thorax CT Use of Contrast Material	0.8%	0.8%	0.8%	--	--	0.0%	0.0%	0.0%	--	--
↕	OP13 Outpatients who got cardiac imaging stress tests before lowrisk outpatient surgery	4.7%	4.7%	4.7%	--	--	3.7%	3.7%	3.7%	--	--
↕	OP14 Outpatients with brain CT scans who got a sinus CT scan at the same time	1.0%	1.0%	1.0%	--	--	0.0%	0.0%	0.0%	--	--



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	Russell County Medical Center					Sycamore Shoals Hospital				
	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18
↑ OP23 Head CT stroke patients	0.0%	100.0%	50.0%	0.0%	50.0%	0.0%	100.0%	50.0%	83.3%	75.0%
<b>Timely &amp; Effective Care Preventive Care</b>										
↑ IMM2 Immunization for Influenza	100.0%	--	99.3%	100.0%	99.6%	98.0%	--	99.4%	100.0%	99.6%
↑ IMM3OP27 FACADHPCT HCW Influenza Vaccination	98.0%	98.0%	98.0%	--	--	99.0%	99.0%	99.0%	--	--
<b>Timely &amp; Effective Care Blood Clot Prevention &amp; Treatment</b>										
↑ VTE5 Warfarin Therapy at Discharge	--	--	--	--	--	--	--	--	--	--
↓ VTE6 HAC VTE	--	--	--	--	--	--	0.0%	--	--	0.0%
<b>Timely &amp; Effective Care Pregnancy &amp; delivery care</b>										
↓ PC01 Elective Delivery	--	--	--	--	--	--	--	--	--	--
<b>Complications - Surgical Complications</b>										
↓ Hip and Knee Complications2	--	--	--	--	--	0.0	0.0	0.1	0.0	0.0
↓ PSI90 Complications / patient safety for selected indicators	0.9	1.0	1.0	--	--	0.9	1.0	1.3	--	--
↓ PSI4SURG COMP Death rate among surgical patients with serious treatable complications	--	--	--	--	--	--	0.0	111.1	500.0	125.0
<b>Readmissions &amp; deaths 30 day rates of readmission</b>										
↓ READM30 COPD Chronic obstructive pulmonary disease 30day readmission rate	17.6%	26.3%	17.2%	6.5%	17.3%	14.6%	10.8%	20.2%	14.0%	14.7%
↓ READM30 AMI Acute myocardial infarction (AMI) 30day readmission rate	20.0%	50.0%	0.0%	200.0%	57.1%	17.5%	0.0%	0.0%	0.0%	0.0%
↓ READM30HF Heart Failure 30Day readmissions rate	19.0%	33.3%	8.3%	12.5%	20.0%	16.1%	17.2%	17.9%	21.1%	18.4%
↓ READM30PN Pneumonia 30day readmission rate	18.7%	0.0%	11.5%	5.9%	6.7%	--	7.7%	12.9%	15.3%	13.3%
↓ READM30 STK Stroke 30day readmission rate	7.1%	--	0.0%	--	0.0%	7.2%	40.0%	0.0%	0.0%	10.5%
↓ READM30 HIPKNEE 30day readmission rate following elective THA / TKA	--	--	--	--	--	3.3%	6.1%	4.7%	0.0%	3.9%
↓ READM30 HOSPWIDE 30day hospitalwide allcause unplanned readmission	15.0%	17.1%	9.7%	12.8%	13.2%	10.4%	7.9%	10.5%	10.1%	9.6%
↓ READM30 CABG Coronary artery bypass graft (CABG) surgery 30day readmission rate2	--	--	--	--	--	--	--	--	--	--
<b>Readmissions &amp; deaths 30 day death (mortality) rates</b>										
↓ MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate	--	--	--	--	--	--	--	--	--	--
↓ MORT30 COPD 30day mortality rate COPD patients	0.9%	2.6%	3.3%	0.0%	2.0%	0.7%	3.8%	0.0%	1.9%	2.0%
↓ MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate	--	0.0%	0.0%	0.0%	0.0%	10.0%	0.0%	0.0%	16.7%	7.7%
↓ MORT30HF Heart failure 30day mortality rate	3.4%	11.8%	0.0%	0.0%	5.4%	3.5%	3.3%	0.0%	9.5%	3.8%
↓ MORT30PN Pneumonia 30day mortality rate	2.1%	0.0%	7.1%	2.9%	3.8%	3.8%	4.9%	4.5%	5.4%	5.0%
↓ MORT30STK Stroke 30day mortality rate	--	--	0.0%	--	0.0%	0.0%	16.7%	0.0%	0.0%	5.0%
<b>Use of medical imaging Outpatient imaging efficiency</b>										
↕ OP8 MRI Lumbar Spine for Low Back Pain	--	--	--	--	--	--	--	--	--	--
↕ OP9 Mammography Followup Rates	1.4%	1.4%	1.4%	--	--	7.2%	7.2%	7.2%	--	--
↕ OP10 Abdomen CT Use of Contrast Material	3.3%	3.3%	3.3%	--	--	3.2%	3.2%	3.2%	--	--
↕ OP11 Thorax CT Use of Contrast Material	1.1%	1.1%	1.1%	--	--	0.5%	0.5%	0.5%	--	--
↕ OP13 Outpatients who got cardiac imaging stress tests before lowrisk outpatient surgery	3.8%	3.8%	3.8%	--	--	0.0%	0.0%	0.0%	--	--
↕ OP14 Outpatients with brain CT scans who got a sinus CT scan at the same time	--	--	--	--	--	1.2%	1.2%	1.2%	--	--



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		Johnson County Community Hospital					Unicoi County Memorial Hospital				
		Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18
↑	OP23 Head CT stroke patients	--	--	100.0%	--	100.0%	0.0%	--	--	--	--
<b>Timely &amp; Effective Care Preventive Care</b>											
↑	IMM2 Immunization for Influenza	--	--	100.0%	100.0%	100.0%	93.0%	--	91.0%	93.4%	92.3%
↑	IMM3OP27 FACADHPCT HCW Influenza Vaccination	--	--	--	--	--	99.0%	98.0%	98.0%	--	--
<b>Timely &amp; Effective Care Blood Clot Prevention &amp; Treatment</b>											
↑	VTE5 Warfarin Therapy at Discharge	--	--	--	--	--	--	--	--	--	--
↓	VTE6 HAC VTE	--	--	--	--	--	--	--	--	--	--
<b>Timely &amp; Effective Care Pregnancy &amp; delivery care</b>											
↓	PC01 Elective Delivery	--	--	--	--	--	--	--	--	--	--
<b>Complications - Surgical Complications</b>											
↓	Hip and Knee Complications <sup>2</sup>	--	--	--	--	--	--	--	--	--	--
↓	PSI90 Complications / patient safety for selected indicators	--	--	--	--	--	0.8	--	--	--	--
↓	PSI4SURG COMP Death rate among surgical patients with serious treatable complications	--	--	--	--	--	--	--	--	--	--
<b>Readmissions &amp; deaths 30 day rates of readmission</b>											
↓	READM30 COPD Chronic obstructive pulmonary disease 30day readmission rate	--	--	--	--	--	--	--	--	--	--
↓	READM30 AMI Acute myocardial infarction (AMI) 30day readmission rate	--	--	--	--	--	--	--	--	--	--
↓	READM30HF Heart Failure 30Day readmissions rate	--	--	--	--	--	--	--	--	--	--
↓	READM30PN Pneumonia 30day readmission rate	--	--	--	--	--	--	--	--	--	--
↓	READM30 STK Stroke 30day readmission rate	--	--	--	--	--	--	--	--	--	--
↓	READM30 HIPKNEE 30day readmission rate following elective THA / TKA	--	--	--	--	--	--	--	--	--	--
↓	READM30 HOSPWIDE 30day hospitalwide allcause unplanned readmission	--	--	--	--	--	--	--	--	--	--
↓	READM30 CABG Coronary artery bypass graft (CABG) surgery 30day readmission rate <sup>2</sup>	--	--	--	--	--	--	--	--	--	--
<b>Readmissions &amp; deaths 30 day death (mortality) rates</b>											
↓	MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate	--	--	--	--	--	--	--	--	--	--
↓	MORT30 COPD 30day mortality rate COPD patients	--	--	--	--	--	--	--	--	--	--
↓	MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate	--	--	--	--	--	--	--	--	--	--
↓	MORT30HF Heart failure 30day mortality rate	--	--	--	--	--	--	--	--	--	--
↓	MORT30PN Pneumonia 30day mortality rate	--	--	--	--	--	--	--	--	--	--
↓	MORT30STK Stroke 30day mortality rate	--	--	--	--	--	--	--	--	--	--
<b>Use of medical imaging Outpatient imaging efficiency</b>											
↕	OP8 MRI Lumbar Spine for Low Back Pain	--	--	--	--	--	--	--	--	--	--
↕	OP9 Mammography Followup Rates	--	--	--	--	--	4.7%	4.7%	4.7%	--	--
↕	OP10 Abdomen CT Use of Contrast Material	--	--	--	--	--	4.7%	4.7%	4.7%	--	--
↕	OP11 Thorax CT Use of Contrast Material	--	--	--	--	--	0.0%	0.0%	0.0%	--	--
↕	OP13 Outpatients who got cardiac imaging stress tests before lowrisk outpatient surgery	--	--	--	--	--	--	--	--	--	--
↕	OP14 Outpatients with brain CT scans who got a sinus CT scan at the same time	--	--	--	--	--	0.7%	0.7%	0.7%	--	--



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	Laughlin Memorial Hospital					Takoma Regional Hospital				
	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18	Baseline	FY18Q1	FY18Q2	FY18Q3	FYTD18
↑ OP23 Head CT stroke patients	100.0%	100.0%	100.0%	--	100.0%	--	--	--	--	--
<b>Timely &amp; Effective Care Preventive Care</b>										
↑ IMM2 Immunization for Influenza	96.0%	--	98.1%	--	98.1%	100.0%	--	95.2%	--	95.2%
↑ IMM3OP27 FACADHPCT HCW Influenza Vaccination	96.0%	97.0%	97.0%	--	--	87.0%	93.0%	93.0%	--	--
<b>Timely &amp; Effective Care Blood Clot Prevention &amp; Treatment</b>										
↑ VTE5 Warfarin Therapy at Discharge	--	--	--	--	--	--	--	--	--	--
↓ VTE6 HAC VTE	--	0.0%	--	--	0.0%	--	--	0.0%	--	0.0%
<b>Timely &amp; Effective Care Pregnancy &amp; delivery care</b>										
↓ PC01 Elective Delivery	--	0.00%	0.00%	--	0.00%	0.00%	0.00%	0.00%	--	0.00%
<b>Complications - Surgical Complications</b>										
↓ Hip and Knee Complications2	--	--	--	--	--	--	--	--	--	--
↓ PSI90 Complications / patient safety for selected indicators	1.1	--	--	--	--	1.1	1.1	1.1	--	--
↓ PSI4SURG COMP Death rate among surgical patients with serious treatable complications	135.9	--	--	--	--	--	--	--	--	--
<b>Readmissions &amp; deaths 30 day rates of readmission</b>										
↓ READM30 COPD Chronic obstructive pulmonary disease 30day readmission rate	19.8%	--	--	--	--	19.1%	4.2%	0.0%	--	3.2%
↓ READM30 AMI Acute myocardial infarction (AMI) 30day readmission rate	16.6%	--	--	--	--	--	0.0%	0.0%	--	0.0%
↓ READM30HF Heart Failure 30Day readmissions rate	24.2%	--	--	--	--	21.3%	0.0%	25.0%	--	8.6%
↓ READM30PN Pneumonia 30day readmission rate	18.3%	--	--	--	--	17.1%	5.3%	18.2%	--	12.2%
↓ READM30 STK Stroke 30day readmission rate	12.1%	--	--	--	--	12.2%	0.0%	0.0%	--	0.0%
↓ READM30 HIPKNEE 30day readmission rate following elective THA / TKA	3.8%	--	--	--	--	4.5%	9.1%	0.0%	--	7.4%
↓ READM30 HOSPWIDE 30day hospitalwide allcause unplanned readmission	16.3%	--	--	--	--	15.2%	4.0%	3.6%	--	3.9%
↓ READM30 CABG Coronary artery bypass graft (CABG) surgery 30day readmission rate2	--	--	--	--	--	--	--	--	--	--
<b>Readmissions &amp; deaths 30 day death (mortality) rates</b>										
↓ MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate	--	--	--	--	--	--	--	--	--	--
↓ MORT30 COPD 30day mortality rate COPD patients	6.9%	--	--	--	--	8.9%	--	--	--	--
↓ MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate	14.7%	--	--	--	--	--	--	--	--	--
↓ MORT30HF Heart failure 30day mortality rate	15.4%	19.9%	14.1%	--	--	12.5%	12.5%	12.5%	--	--
↓ MORT30PN Pneumonia 30day mortality rate	19.9%	--	--	--	--	14.1%	14.1%	14.1%	--	--
↓ MORT30STK Stroke 30day mortality rate	14.1%	--	--	--	--	15.1%	15.1%	15.1%	--	--
<b>Use of medical imaging Outpatient imaging efficiency</b>										
↕ OP8 MRI Lumbar Spine for Low Back Pain	47.8%	47.8%	47.8%	--	--	--	--	--	--	--
↕ OP9 Mammography Followup Rates	17.7%	17.7%	17.7%	--	--	17.7%	17.7%	17.7%	--	--
↕ OP10 Abdomen CT Use of Contrast Material	7.1%	7.1%	7.1%	--	--	6.9%	6.9%	6.9%	--	--
↕ OP11 Thorax CT Use of Contrast Material	3.2%	3.2%	3.2%	--	--	1.3%	1.3%	1.3%	--	--
↕ OP13 Outpatients who got cardiac imaging stress tests before lowrisk outpatient surgery	4.1%	4.1%	4.1%	--	--	9.4%	9.4%	9.4%	--	--
↕ OP14 Outpatients with brain CT scans who got a sinus CT scan at the same time	2.0%	2.0%	2.0%	--	--	--	--	--	--	--

	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18
<b>Target Quality Measures</b>									
↓ Pressure Ulcer Rate	0.00	0.00	0.00	2.02	2.48	0.43	1.18	0.00	1.76
↓ Iatrogenic Pneumothorax Rate	0.44	0.72	0.00	0.15	0.15	0.15	0.41	0.16	0.00
↓ Central Venous CatheterRelated Blood Stream Infection Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
↓ Postoperative Hip Fracture Rate	1.41	1.27	0.00	0.00	0.00	0.00	0.00	0.00	0.00
↓ PSI 09 Perioperative Hemorrhage or Hematoma Rate	0.72	1.99	4.41	1.32	3.82	0.65	1.32	2.18	0.63
↓ PSI 10 Postoperative Physiologic and Metabolic Derangement Rate	1.41	1.27	0.00	0.00	0.00	0.00	0.00	0.00	0.00
↓ PSI 11 Postoperative Respiratory Failure Rate	8.99	9.57	1.67	12.68	9.96	4.62	3.33	5.22	14.43
↓ PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	3.27	2.44	3.98	4.23	5.37	1.84	3.11	1.36	2.89
↓ PSI 13 Postoperative Sepsis Rate	7.36	5.28	1.40	5.26	2.40	2.60	1.37	4.23	1.19
↓ PSI 14 Postoperative Wound Dehiscence Rate	2.86	0.00	0.00	0.00	4.60	0.00	0.00	2.72	0.00
↓ PSI 15 Accidental Puncture or Laceration Rate	3.13	1.51	0.00	0.00	0.00	2.06	1.05	1.19	0.00
↓ CLABSI	1.117	0.811	0.263	0.504	0.782	0.521	0.699	1.149	0.381
↓ CAUTI	0.589	0.767	0.614	1.121	0.180	0.932	0.634	0.000	0.449
↓ SSI COLON Surgical Site Infection	1.370	3.226	2.740	1.190	1.471	3.846	0.000	2.941	0.000
↓ SSI HYST Surgical Site Infection	0.000	0.000	0.000	0.000	1.515	0.000	0.000	0.000	0.000
↓ MRSA	0.000	0.081	0.028	0.026	0.111	0.026	0.072	0.028	0.000
↓ CDIFF	0.759	0.651	0.705	0.591	0.616	0.617	0.776	0.853	1.047
<b>General Information-Structural Measures</b>									
Yes SMPART NURSE Nursing Care Registry	--	--	--	--	--	--	--	--	--
Yes ACS REGISTRY	--	--	--	--	--	--	--	--	--
Yes SMPART GENSURG General Surgery Registry	--	--	--	--	--	--	--	--	--
Yes OP12 HIT Ability electronically receive lab results	--	--	--	--	--	--	--	--	--
Yes OP17 Tracking Clinical Results Between Visits	--	--	--	--	--	--	--	--	--
Yes OP25 Outpatient Safe Surgery Checklist	--	--	--	--	--	--	--	--	--
Yes SMSSCHECK Safe Surgery Checklist	Yes								
<b>Survey of Patient's Experiences - Hospital Consumer Assessment of Healthcare Providers and Systems Survey (HCAHPS)</b>									
↑ HCOMP1A P Patients who reported that their nurses "Always" communicated well	78.9%	76.3%	77.2%	74.7%	79.0%	76.7%	77.2%	75.4%	78.4%
↓ HCOMP1U P Patients who reported that their nurses "Usually" communicated well	13.3%	14.5%	14.5%	14.3%	12.8%	14.6%	13.5%	16.1%	13.7%
↓ HCOMP1 SNP Patients who reported that their nurses "Sometimes" or "Never" communicated well	4.8%	5.5%	5.4%	6.4%	5.0%	4.8%	5.1%	5.5%	5.2%
↑ HCOMP2A P Patients who reported that their doctors "Always" communicated well	79.8%	79.8%	79.2%	79.1%	80.3%	80.8%	79.3%	79.1%	81.6%
↓ HCOMP2U P Patients who reported that their doctors "Usually" communicated well	13.8%	14.2%	14.4%	14.9%	14.3%	14.8%	14.8%	14.2%	12.5%
↓ HCOMP2 SNP Patients who reported that their doctors "Sometimes" or "Never" communicated well	6.5%	6.0%	6.4%	6.0%	5.5%	4.4%	5.9%	6.6%	5.9%
↑ HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	67.4%	66.3%	65.9%	65.2%	66.4%	72.8%	66.1%	63.5%	67.9%
↓ HCOMP3U P Patients who reported that they "Usually" received help as soon as they wanted	23.3%	23.0%	23.7%	24.0%	24.1%	22.4%	23.5%	25.9%	22.2%
↓ HCOMP3 SNP Patients who reported that they "Sometimes" or "Never" received help as soon as they wanted	9.3%	9.4%	10.4%	10.9%	9.5%	8.6%	10.3%	10.5%	9.9%
↑ HCOMP4A P Patients who reported that their pain was "Always" well controlled	68.4%	69.1%	68.2%	69.3%	69.4%	74.8%	--	--	--
↓ HCOMP4U P Patients who reported that their pain was "Usually" well controlled	22.7%	23.0%	23.6%	21.6%	22.3%	18.6%	--	--	--
↓ HCOMP4 SNP Patients who reported that their pain was "Sometimes" or "Never" well controlled	9.4%	8.3%	8.3%	8.9%	7.6%	6.5%	--	--	--
↑ HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them	65.0%	64.2%	65.4%	65.1%	64.7%	65.1%	65.7%	60.9%	63.2%

	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18
<b>Target Quality Measures</b>									
↓ Pressure Ulcer Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
↓ Iatrogenic Pneumothorax Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
↓ Central Venous CatheterRelated Blood Stream Infection Rate	--	--	--	--	--	--	--	--	--
↓ Postoperative Hip Fracture Rate	0.00	0.00	0.00	2.91	0.00	0.00	0.00	0.00	0.00
↓ PSI 09 Perioperative Hemorrhage or Hematoma Rate	0.00	0.00	0.00	0.00	0.00	0.00	16.13	0.00	0.00
↓ PSI 10 Postoperative Physiologic and Metabolic Derangement Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
↓ PSI 11 Postoperative Respiratory Failure Rate	44.44	32.26	27.03	25.64	0.00	25.00	0.00	26.32	20.41
↓ PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	13.33	0.00
↓ PSI 13 Postoperative Sepsis Rate	71.43	29.41	0.00	0.00	0.00	0.00	0.00	0.00	19.61
↓ PSI 14 Postoperative Wound Dehiscence Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	20.83	0.00
↓ PSI 15 Accidental Puncture or Laceration Rate	0.00	10.87	0.00	0.00	0.00	0.00	0.00	0.00	0.00
↓ CLABSI	0.000	0.000	0.000	9.804	0.000	0.000	0.000	0.000	0.000
↓ CAUTI	0.000	4.065	0.000	0.000	0.000	0.000	0.000	0.000	0.000
↓ SSI COLON Surgical Site Infection	7.692	7.692	12.500	0.000	0.000	10.000	0.000	0.000	--
↓ SSI HYST Surgical Site Infection	0.000	0.000	0.000	0.000	5.882	0.000	0.000	0.000	--
↓ MRSA	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
↓ CDIFF	1.371	0.362	1.018	0.000	0.000	0.000	0.000	0.000	0.000
<b>General Information-Structural Measures</b>									
Yes SMPART NURSE Nursing Care Registry	Yes								
Yes ACS REGISTRY	Yes								
Yes SMPART GENSURG General Surgery Registry	Yes								
Yes OP12 HIT Ability electronically receive lab results	Yes								
Yes OP17 Tracking Clinical Results Between Visits	Yes								
Yes OP25 Outpatient Safe Surgery Checklist	Yes								
Yes SMSSCHECK Safe Surgery Checklist	Yes								
<b>Survey of Patient's Experiences - Hospital Consumer Assessment of Healthcare Providers and Systems Su</b>									
↑ HCOMP1A P Patients who reported that their nurses "Always" communicated well	83.2%	83.6%	83.9%	79.3%	85.1%	81.6%	87.1%	81.9%	78.9%
↓ HCOMP1U P Patients who reported that their nurses "Usually" communicated well	13.7%	13.4%	12.7%	15.8%	12.6%	13.4%	9.8%	12.6%	17.0%
↓ HCOMP1 SNP Patients who reported that their nurses "Sometimes" or "Never" communicated well	3.0%	3.1%	3.4%	4.9%	2.3%	4.9%	3.1%	5.5%	4.1%
↑ HCOMP2A P Patients who reported that their doctors "Always" communicated well	79.4%	85.4%	83.4%	76.9%	79.8%	82.5%	82.0%	85.2%	79.9%
↓ HCOMP2U P Patients who reported that their doctors "Usually" communicated well	14.8%	11.5%	11.7%	17.2%	15.6%	13.1%	16.4%	11.7%	15.6%
↓ HCOMP2 SNP Patients who reported that their doctors "Sometimes" or "Never" communicated well	5.8%	3.1%	4.9%	5.8%	4.6%	4.4%	1.5%	3.1%	4.5%
↑ HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	70.6%	71.0%	72.2%	69.2%	69.7%	71.0%	77.9%	67.7%	66.7%
↓ HCOMP3U P Patients who reported that they "Usually" received help as soon as they wanted	24.5%	26.2%	17.4%	23.8%	23.0%	20.8%	19.5%	20.5%	23.1%
↓ HCOMP3 SNP Patients who reported that they "Sometimes" or "Never" received help as soon as they wanted	4.9%	2.8%	10.4%	7.0%	7.4%	8.2%	2.7%	11.8%	10.2%
↑ HCOMP4A P Patients who reported that their pain was "Always" well controlled	68.9%	78.9%	75.0%	70.3%	71.6%	75.0%	--	--	--
↓ HCOMP4U P Patients who reported that their pain was "Usually" well controlled	25.6%	17.1%	21.8%	23.6%	24.1%	20.7%	--	--	--
↓ HCOMP4 SNP Patients who reported that their pain was "Sometimes" or "Never" well controlled	5.5%	3.9%	3.2%	6.1%	4.3%	4.3%	--	--	--
↑ HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them	72.2%	69.6%	70.3%	61.4%	68.1%	67.4%	76.4%	67.7%	60.6%

		Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18
<b>Target Quality Measures</b>										
↓	Pressure Ulcer Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
↓	Iatrogenic Pneumothorax Rate	0.00	1.95	0.00	0.00	0.52	0.00	0.00	0.00	0.00
↓	Central Venous CatheterRelated Blood Stream Infection Rate	0.00	0.00	0.00	0.00	0.00	0.00	--	--	--
↓	Postoperative Hip Fracture Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
↓	PSI 09 Perioperative Hemorrhage or Hematoma Rate	0.00	0.00	2.59	2.27	0.00	0.00	0.00	2.40	2.12
↓	PSI 10 Postoperative Physiologic and Metabolic Derangement Rate	0.00	5.52	0.00	0.00	0.00	0.00	0.00	0.00	0.00
↓	PSI 11 Postoperative Respiratory Failure Rate	0.00	0.00	0.00	13.79	11.05	0.00	0.00	0.00	5.59
↓	PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	2.24	4.09	2.34	1.99	13.57	2.05	6.12	2.20	1.93
↓	PSI 13 Postoperative Sepsis Rate	0.00	5.68	0.00	5.43	0.00	0.00	0.00	5.78	0.00
↓	PSI 14 Postoperative Wound Dehiscence Rate	10.53	0.00	0.00	0.00	8.77	0.00	0.00	0.00	0.00
↓	PSI 15 Accidental Puncture or Laceration Rate	4.83	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
↓	CLABSI	2.014	0.000	0.000	0.872	1.733	1.765	0.715	2.804	--
↓	CAUTI	1.319	1.167	1.376	0.000	1.014	4.499	1.038	0.000	--
↓	SSI COLON Surgical Site Infection	0.000	0.000	0.000	0.000	7.692	0.000	0.000	0.000	--
↓	SSI HYST Surgical Site Infection	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	--
↓	MRSA	0.000	0.168	0.000	0.000	0.093	0.086	0.150	0.000	--
↓	CDIFF	0.541	0.450	0.672	0.267	0.708	0.848	--	--	--
<b>General Information-Structural Measures</b>										
Yes	SMPART NURSE Nursing Care Registry	Yes								
Yes	ACS REGISTRY	Yes								
Yes	SMPART GENSURG General Surgery Registry	Yes								
Yes	OP12 HIT Ability electronically receive lab results	Yes								
Yes	OP17 Tracking Clinical Results Between Visits	Yes								
Yes	OP25 Outpatient Safe Surgery Checklist	Yes								
Yes	SMSSCHECK Safe Surgery Checklist	Yes								
<b>Survey of Patient's Experiences - Hospital Consumer Assessment of Healthcare Providers and Systems Su</b>										
↑	HCOMP1A P Patients who reported that their nurses "Always" communicated well	82.7%	76.0%	75.9%	74.3%	77.2%	79.9%	75.5%	75.5%	80.5%
↓	HCOMP1U P Patients who reported that their nurses "Usually" communicated well	12.9%	16.6%	18.0%	17.9%	17.3%	14.4%	18.6%	19.3%	14.7%
↓	HCOMP1 SNP Patients who reported that their nurses "Sometimes" or "Never" communicated well	4.4%	7.4%	6.1%	7.8%	5.4%	5.8%	5.9%	5.2%	4.8%
↑	HCOMP2A P Patients who reported that their doctors "Always" communicated well	81.4%	72.4%	75.4%	73.6%	73.7%	78.3%	73.5%	74.3%	78.5%
↓	HCOMP2U P Patients who reported that their doctors "Usually" communicated well	12.9%	17.8%	17.6%	19.1%	22.1%	17.1%	18.0%	19.8%	15.1%
↓	HCOMP2 SNP Patients who reported that their doctors "Sometimes" or "Never" communicated well	5.7%	9.8%	7.0%	7.4%	4.2%	4.6%	8.6%	5.8%	6.4%
↑	HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	65.2%	62.0%	63.4%	59.6%	63.8%	65.6%	58.0%	61.2%	68.9%
↓	HCOMP3U P Patients who reported that they "Usually" received help as soon as they wanted	24.4%	24.5%	24.7%	27.1%	26.3%	24.5%	29.4%	27.6%	22.2%
↓	HCOMP3 SNP Patients who reported that they "Sometimes" or "Never" received help as soon as they wanted	10.3%	13.5%	11.9%	13.3%	9.8%	9.9%	12.7%	11.2%	8.8%
↑	HCOMP4A P Patients who reported that their pain was "Always" well controlled	64.4%	63.3%	62.6%	65.9%	63.8%	72.8%	--	--	--
↓	HCOMP4U P Patients who reported that their pain was "Usually" well controlled	25.9%	26.6%	27.3%	24.6%	27.8%	20.0%	--	--	--
↓	HCOMP4 SNP Patients who reported that their pain was "Sometimes" or "Never" well controlled	9.8%	10.1%	10.1%	9.5%	8.4%	7.2%	--	--	--
↑	HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them	62.1%	57.5%	59.4%	62.7%	54.8%	66.3%	60.1%	56.2%	61.0%

		Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18
<b>Target Quality Measures</b>										
↓	Pressure Ulcer Rate	--	--	--	--	--	--	--	--	--
↓	Iatrogenic Pneumothorax Rate	--	--	--	--	--	--	--	--	--
↓	Central Venous CatheterRelated Blood Stream Infection Rate	--	--	--	--	--	--	--	--	--
↓	Postoperative Hip Fracture Rate	--	--	--	--	--	--	--	--	--
↓	PSI 09 Perioperative Hemorrhage or Hematoma Rate	--	--	--	--	--	--	--	--	--
↓	PSI 10 Postoperative Physiologic and Metabolic Derangement Rate	--	--	--	--	--	--	--	--	--
↓	PSI 11 Postoperative Respiratory Failure Rate	--	--	--	--	--	--	--	--	--
↓	PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	--	--	--	--	--	--	--	--	--
↓	PSI 13 Postoperative Sepsis Rate	--	--	--	--	--	--	--	--	--
↓	PSI 14 Postoperative Wound Dehiscence Rate	--	--	--	--	--	--	--	--	--
↓	PSI 15 Accidental Puncture or Laceration Rate	--	--	--	--	--	--	--	--	--
↓	CLABSI	--	--	--	--	--	--	--	--	--
↓	CAUTI	--	--	--	--	--	--	--	--	--
↓	SSI COLON Surgical Site Infection	--	--	--	--	--	--	--	--	--
↓	SSI HYST Surgical Site Infection	--	--	--	--	--	--	--	--	--
↓	MRSA	--	--	--	--	--	--	--	--	--
↓	CDIFF	--	--	--	--	--	--	--	--	--
<b>General Information-Structural Measures</b>										
Yes	SMPART NURSE Nursing Care Registry	--	--	--	--	--	--	--	--	--
Yes	ACS REGISTRY	--	--	--	--	--	--	--	--	--
Yes	SMPART GENSURG General Surgery Registry	--	--	--	--	--	--	--	--	--
Yes	OP12 HIT Ability electronically receive lab results	--	--	--	--	--	--	--	--	--
Yes	OP17 Tracking Clinical Results Between Visits	--	--	--	--	--	--	--	--	--
Yes	OP25 Outpatient Safe Surgery Checklist	--	--	--	--	--	--	--	--	--
Yes	SMSSCHECK Safe Surgery Checklist	--	--	--	--	--	--	--	--	--
<b>Survey of Patient's Experiences - Hospital Consumer Assessment of Healthcare Providers and Systems Su</b>										
↑	HCOMP1A P Patients who reported that their nurses "Always" communicated well	--	100.0%	100.0%	--	100.0%	--	0.0%	--	--
↓	HCOMP1U P Patients who reported that their nurses "Usually" communicated well	--	0.0%	0.0%	--	0.0%	--	100.0%	--	--
↓	HCOMP1 SNP Patients who reported that their nurses "Sometimes" or "Never" communicated well	--	0.0%	0.0%	--	0.0%	--	0.0%	--	--
↑	HCOMP2A P Patients who reported that their doctors "Always" communicated well	--	100.0%	100.0%	--	100.0%	--	100.0%	--	--
↓	HCOMP2U P Patients who reported that their doctors "Usually" communicated well	--	0.0%	0.0%	--	0.0%	--	0.0%	--	--
↓	HCOMP2 SNP Patients who reported that their doctors "Sometimes" or "Never" communicated well	--	0.0%	0.0%	--	0.0%	--	0.0%	--	--
↑	HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	--	100.0%	100.0%	--	100.0%	--	100.0%	--	--
↓	HCOMP3U P Patients who reported that they "Usually" received help as soon as they wanted	--	0.0%	0.0%	--	0.0%	--	0.0%	--	--
↓	HCOMP3 SNP Patients who reported that they "Sometimes" or "Never" received help as soon as they wanted	--	0.0%	0.0%	--	0.0%	--	0.0%	--	--
↑	HCOMP4A P Patients who reported that their pain was "Always" well controlled	--	--	100.0%	--	--	100.0%	--	--	--
↓	HCOMP4U P Patients who reported that their pain was "Usually" well controlled	--	--	0.0%	--	--	0.0%	--	--	--
↓	HCOMP4 SNP Patients who reported that their pain was "Sometimes" or "Never" well controlled	--	--	0.0%	--	--	0.0%	--	--	--
↑	HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them	--	--	100.0%	--	100.0%	--	--	--	--

		Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18
<b>Target Quality Measures</b>										
↓	Pressure Ulcer Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
↓	Iatrogenic Pneumothorax Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
↓	Central Venous CatheterRelated Blood Stream Infection Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
↓	Postoperative Hip Fracture Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
↓	PSI 09 Perioperative Hemorrhage or Hematoma Rate	--	--	--	--	--	--	--	--	--
↓	PSI 10 Postoperative Physiologic and Metabolic Derangement Rate	--	--	--	--	--	--	--	--	--
↓	PSI 11 Postoperative Respiratory Failure Rate	--	--	--	--	--	--	--	--	--
↓	PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	--	--	--	--	--	--	--	--	--
↓	PSI 13 Postoperative Sepsis Rate	--	--	--	--	--	--	--	--	--
↓	PSI 14 Postoperative Wound Dehiscence Rate	--	--	--	--	--	--	--	--	--
↓	PSI 15 Accidental Puncture or Laceration Rate	--	--	--	--	--	--	--	--	--
↓	CLABSI	--	--	--	--	--	--	--	--	--
↓	CAUTI	--	--	--	--	--	--	--	--	--
↓	SSI COLON Surgical Site Infection	--	--	--	--	--	--	--	--	--
↓	SSI HYST Surgical Site Infection	--	--	--	--	--	--	--	--	--
↓	MRSA	--	--	--	--	--	--	--	--	--
↓	CDIFF	--	--	--	--	--	--	--	--	--
<b>General Information-Structural Measures</b>										
Yes	SMPART NURSE Nursing Care Registry	--	--	--	--	--	--	--	--	--
Yes	ACS REGISTRY	--	--	--	--	--	--	--	--	--
Yes	SMPART GENSURG General Surgery Registry	--	--	--	--	--	--	--	--	--
Yes	OP12 HIT Ability electronically receive lab results	--	--	--	--	--	--	--	--	--
Yes	OP17 Tracking Clinical Results Between Visits	--	--	--	--	--	--	--	--	--
Yes	OP25 Outpatient Safe Surgery Checklist	--	--	--	--	--	--	--	--	--
Yes	SMSSCHECK Safe Surgery Checklist	--	--	--	--	--	--	--	--	--
<b>Survey of Patient's Experiences - Hospital Consumer Assessment of Healthcare Providers and Systems Su</b>										
↑	HCOMP1A P Patients who reported that their nurses "Always" communicated well	--	100.0%	66.7%	100.0%	87.5%	100.0%	100.0%	85.7%	100.0%
↓	HCOMP1U P Patients who reported that their nurses "Usually" communicated well	--	0.0%	16.7%	0.0%	12.5%	0.0%	0.0%	4.8%	0.0%
↓	HCOMP1 SNP Patients who reported that their nurses "Sometimes" or "Never" communicated well	--	0.0%	16.7%	0.0%	0.0%	0.0%	0.0%	9.5%	0.0%
↑	HCOMP2A P Patients who reported that their doctors "Always" communicated well	--	100.0%	66.7%	66.7%	75.0%	66.7%	100.0%	85.7%	100.0%
↓	HCOMP2U P Patients who reported that their doctors "Usually" communicated well	--	0.0%	33.3%	33.3%	0.0%	33.3%	0.0%	4.8%	0.0%
↓	HCOMP2 SNP Patients who reported that their doctors "Sometimes" or "Never" communicated well	--	0.0%	0.0%	0.0%	25.0%	0.0%	0.0%	9.5%	0.0%
↑	HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	--	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	80.0%
↓	HCOMP3U P Patients who reported that they "Usually" received help as soon as they wanted	--	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	20.0%
↓	HCOMP3 SNP Patients who reported that they "Sometimes" or "Never" received help as soon as they wanted	--	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
↑	HCOMP4A P Patients who reported that their pain was "Always" well controlled	--	50.0%	25.0%	50.0%	0.0%	50.0%	--	--	--
↓	HCOMP4U P Patients who reported that their pain was "Usually" well controlled	--	50.0%	25.0%	0.0%	0.0%	50.0%	--	--	--
↓	HCOMP4 SNP Patients who reported that their pain was "Sometimes" or "Never" well controlled	--	0.0%	50.0%	50.0%	100.0%	0.0%	--	--	--
↑	HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them	--	50.0%	50.0%	100.0%	100.0%	100.0%	100.0%	83.3%	100.0%



Hawkins County Memorial Hospital

FYTD2018 March 2018

	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18
<b>Target Quality Measures</b>									
↓ Pressure Ulcer Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
↓ Iatrogenic Pneumothorax Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
↓ Central Venous CatheterRelated Blood Stream Infection Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
↓ Postoperative Hip Fracture Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
↓ PSI 09 Perioperative Hemorrhage or Hematoma Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
↓ PSI 10 Postoperative Physiologic and Metabolic Derangement Rate	0.00	--	0.00	0.00	0.00	--	0.00	--	0.00
↓ PSI 11 Postoperative Respiratory Failure Rate	0.00	0.00	0.00	0.00	0.00	--	--	--	0.00
↓ PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
↓ PSI 13 Postoperative Sepsis Rate	0.00	--	0.00	0.00	0.00	--	0.00	--	0.00
↓ PSI 14 Postoperative Wound Dehiscence Rate	0.00	0.00	--	0.00	0.00	0.00	0.00	0.00	0.00
↓ PSI 15 Accidental Puncture or Laceration Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
↓ CLABSI	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
↓ CAUTI	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
↓ SSI COLON Surgical Site Infection	--	0.000	--	0.000	0.000	--	--	--	0.000
↓ SSI HYST Surgical Site Infection	--	--	--	--	--	--	--	--	--
↓ MRSA	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
↓ CDIFF	0.000	0.000	0.000	3.436	0.000	0.000	0.000	0.000	0.000
<b>General Information-Structural Measures</b>									
Yes SMPART NURSE Nursing Care Registry	No								
Yes ACS REGISTRY	Yes								
Yes SMPART GENSURG General Surgery Registry	No								
Yes OP12 HIT Ability electronically receive lab results	No								
Yes OP17 Tracking Clinical Results Between Visits	Yes								
Yes OP25 Outpatient Safe Surgery Checklist	Yes								
Yes SMSSCHECK Safe Surgery Checklist	Yes								
<b>Survey of Patient's Experiences - Hospital Consumer Assessment of Healthcare Providers and Systems Su</b>									
↑ HCOMP1A P Patients who reported that their nurses "Always" communicated well	86.7%	80.2%	76.7%	78.4%	88.0%	88.0%	81.5%	72.3%	80.0%
↓ HCOMP1U P Patients who reported that their nurses "Usually" communicated well	11.1%	11.1%	10.0%	7.8%	10.0%	8.0%	13.8%	21.3%	13.3%
↓ HCOMP1 SNP Patients who reported that their nurses "Sometimes" or "Never" communicated well	2.2%	8.6%	13.3%	13.7%	2.0%	4.0%	4.6%	6.4%	6.7%
↑ HCOMP2A P Patients who reported that their doctors "Always" communicated well	82.2%	79.8%	70.0%	80.4%	80.4%	84.3%	77.3%	58.7%	75.6%
↓ HCOMP2U P Patients who reported that their doctors "Usually" communicated well	11.1%	7.1%	10.0%	9.8%	13.7%	11.8%	10.6%	21.7%	13.3%
↓ HCOMP2 SNP Patients who reported that their doctors "Sometimes" or "Never" communicated well	6.7%	13.1%	20.0%	9.8%	5.9%	3.9%	12.1%	19.6%	11.1%
↑ HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	70.8%	78.0%	64.3%	85.0%	70.8%	86.4%	70.0%	81.8%	70.4%
↓ HCOMP3U P Patients who reported that they "Usually" received help as soon as they wanted	25.0%	17.1%	14.3%	15.0%	20.8%	9.1%	16.7%	4.5%	18.5%
↓ HCOMP3 SNP Patients who reported that they "Sometimes" or "Never" received help as soon as they wanted	4.2%	4.9%	21.4%	0.0%	8.3%	4.5%	13.3%	13.6%	11.1%
↑ HCOMP4A P Patients who reported that their pain was "Always" well controlled	61.1%	71.1%	78.6%	50.0%	50.0%	83.3%	--	--	--
↓ HCOMP4U P Patients who reported that their pain was "Usually" well controlled	22.2%	15.8%	7.1%	16.7%	50.0%	5.6%	--	--	--
↓ HCOMP4 SNP Patients who reported that their pain was "Sometimes" or "Never" well controlled	16.7%	13.2%	14.3%	33.3%	0.0%	11.1%	--	--	--
↑ HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them	76.5%	60.0%	60.0%	75.0%	80.0%	83.3%	61.1%	50.0%	52.9%

		Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18
<b>Target Quality Measures</b>										
↓	Pressure Ulcer Rate	0.00	0.00	0.00	5.52	6.64	2.12	4.87	0.00	5.21
↓	Iatrogenic Pneumothorax Rate	0.70	0.73	0.00	0.73	0.00	0.00	1.34	0.75	0.00
↓	Central Venous CatheterRelated Blood Stream Infection Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
↓	Postoperative Hip Fracture Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.75	0.00	0.00
↓	PSI 09 Perioperative Hemorrhage or Hematoma Rate	0.00	7.14	4.90	0.00	4.40	0.00	0.00	0.00	0.00
↓	PSI 10 Postoperative Physiologic and Metabolic Derangement Rate	4.46	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
↓	PSI 11 Postoperative Respiratory Failure Rate	6.17	5.49	0.00	10.58	9.35	4.67	0.00	5.78	0.00
↓	PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	4.57	0.00	8.89	10.27	2.04	1.99	0.00	0.00	1.92
↓	PSI 13 Postoperative Sepsis Rate	9.43	8.30	0.00	0.00	7.41	0.00	0.00	4.26	0.00
↓	PSI 14 Postoperative Wound Dehiscence Rate	0.00	0.00	0.00	0.00	11.24	0.00	0.00	0.00	0.00
↓	PSI 15 Accidental Puncture or Laceration Rate	12.20	0.00	0.00	0.00	0.00	0.00	4.78	0.00	0.00
↓	CLABSI	0.000	2.047	0.000	0.000	0.000	0.000	0.000	0.000	0.853
↓	CAUTI	0.972	0.000	0.000	1.554	0.000	0.000	1.591	0.000	0.000
↓	SSI COLON Surgical Site Infection	0.000	5.556	0.000	0.000	0.000	5.263	0.000	0.000	--
↓	SSI HYST Surgical Site Infection	0.000	0.000	0.000	0.000	0.000	0.000	--	0.000	--
↓	MRSA	0.000	0.000	0.000	0.138	0.138	0.000	0.000	0.000	0.000
↓	CDIFF	1.327	0.605	0.143	1.152	1.283	0.563	1.193	1.895	1.772
<b>General Information-Structural Measures</b>										
Yes	SMPART NURSE Nursing Care Registry	Yes								
Yes	ACS REGISTRY	No	No	No	No	No	No	Yes	Yes	Yes
Yes	SMPART GENSURG General Surgery Registry	Yes								
Yes	OP12 HIT Ability electronically receive lab results	No								
Yes	OP17 Tracking Clinical Results Between Visits	Yes								
Yes	OP25 Outpatient Safe Surgery Checklist	Yes								
Yes	SMSSCHECK Safe Surgery Checklist	Yes								
<b>Survey of Patient's Experiences - Hospital Consumer Assessment of Healthcare Providers and Systems Su</b>										
↑	HCOMP1A P Patients who reported that their nurses "Always" communicated well	81.4%	84.8%	76.4%	81.2%	80.7%	82.9%	82.2%	80.2%	78.5%
↓	HCOMP1U P Patients who reported that their nurses "Usually" communicated well	14.0%	12.1%	15.2%	8.6%	13.6%	11.5%	13.6%	13.0%	12.7%
↓	HCOMP1 SNP Patients who reported that their nurses "Sometimes" or "Never" communicated well	4.6%	3.1%	8.4%	10.2%	5.7%	5.6%	4.2%	6.8%	8.8%
↑	HCOMP2A P Patients who reported that their doctors "Always" communicated well	82.4%	84.2%	74.1%	79.2%	81.8%	81.2%	76.7%	83.3%	79.5%
↓	HCOMP2U P Patients who reported that their doctors "Usually" communicated well	12.1%	11.5%	16.5%	10.7%	12.2%	13.0%	14.9%	4.3%	16.9%
↓	HCOMP2 SNP Patients who reported that their doctors "Sometimes" or "Never" communicated well	5.6%	4.2%	9.5%	10.1%	6.0%	5.8%	8.4%	12.4%	3.6%
↑	HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	72.3%	67.6%	57.1%	65.0%	61.8%	73.5%	61.0%	59.4%	62.9%
↓	HCOMP3U P Patients who reported that they "Usually" received help as soon as they wanted	19.7%	21.6%	29.4%	22.5%	26.4%	20.5%	29.2%	29.4%	24.5%
↓	HCOMP3 SNP Patients who reported that they "Sometimes" or "Never" received help as soon as they wanted	8.0%	10.8%	13.6%	12.5%	11.8%	6.0%	9.7%	11.3%	12.6%
↑	HCOMP4A P Patients who reported that their pain was "Always" well controlled	73.7%	75.3%	66.3%	71.9%	66.5%	76.5%	--	--	--
↓	HCOMP4U P Patients who reported that their pain was "Usually" well controlled	17.4%	18.0%	21.3%	19.2%	25.4%	21.1%	--	--	--
↓	HCOMP4 SNP Patients who reported that their pain was "Sometimes" or "Never" well controlled	8.9%	6.7%	12.4%	8.9%	8.1%	2.4%	--	--	--
↑	HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them	76.6%	73.0%	62.5%	66.3%	68.5%	72.1%	68.0%	57.9%	63.4%

	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18
<b>Target Quality Measures</b>									
↓ Pressure Ulcer Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
↓ Iatrogenic Pneumothorax Rate	0.00	0.00	0.00	0.00	0.00	0.00	2.57	0.00	0.00
↓ Central Venous CatheterRelated Blood Stream Infection Rate	--	--	--	--	--	--	--	--	--
↓ Postoperative Hip Fracture Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
↓ PSI 09 Perioperative Hemorrhage or Hematoma Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
↓ PSI 10 Postoperative Physiologic and Metabolic Derangement Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
↓ PSI 11 Postoperative Respiratory Failure Rate	0.00	0.00	0.00	0.00	26.32	0.00	0.00	0.00	34.48
↓ PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	0.00	0.00	0.00	0.00	0.00	14.49	10.75	0.00	0.00
↓ PSI 13 Postoperative Sepsis Rate	0.00	0.00	25.00	0.00	0.00	31.25	0.00	0.00	0.00
↓ PSI 14 Postoperative Wound Dehiscence Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
↓ PSI 15 Accidental Puncture or Laceration Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
↓ CLABSI	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	--
↓ CAUTI	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	--
↓ SSI COLON Surgical Site Infection	0.000	0.000	0.000	12.500	0.000	0.000	0.000	0.000	0.000
↓ SSI HYST Surgical Site Infection	--	--	0.000	0.000	0.000	0.000	--	0.000	--
↓ MRSA	0.000	0.000	0.000	0.000	0.000	0.000	0.487	0.000	--
↓ CDIFF	1.274	0.603	0.000	0.569	0.509	1.739	--	--	--
<b>General Information-Structural Measures</b>									
Yes SMPART NURSE Nursing Care Registry	Yes								
Yes ACS REGISTRY	Yes								
Yes SMPART GENSURG General Surgery Registry	Yes								
Yes OP12 HIT Ability electronically receive lab results	Yes								
Yes OP17 Tracking Clinical Results Between Visits	Yes								
Yes OP25 Outpatient Safe Surgery Checklist	Yes								
Yes SMSSCHECK Safe Surgery Checklist	Yes								
<b>Survey of Patient's Experiences - Hospital Consumer Assessment of Healthcare Providers and Systems Su</b>									
↑ HCOMP1A P Patients who reported that their nurses "Always" communicated well	78.6%	78.0%	82.2%	78.2%	91.8%	72.0%	82.5%	76.0%	78.3%
↓ HCOMP1U P Patients who reported that their nurses "Usually" communicated well	15.1%	18.1%	15.7%	17.6%	6.7%	20.9%	12.3%	18.6%	16.2%
↓ HCOMP1 SNP Patients who reported that their nurses "Sometimes" or "Never" communicated well	6.3%	3.8%	2.0%	4.1%	1.5%	7.1%	5.3%	5.5%	5.6%
↑ HCOMP2A P Patients who reported that their doctors "Always" communicated well	76.8%	84.4%	84.3%	83.6%	87.4%	75.1%	78.8%	82.6%	84.3%
↓ HCOMP2U P Patients who reported that their doctors "Usually" communicated well	17.7%	14.4%	10.1%	12.9%	10.1%	19.5%	15.3%	12.4%	10.2%
↓ HCOMP2 SNP Patients who reported that their doctors "Sometimes" or "Never" communicated well	5.5%	1.1%	5.6%	3.5%	2.5%	5.4%	5.9%	5.1%	5.6%
↑ HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	69.1%	60.0%	75.5%	67.4%	77.1%	61.7%	67.1%	55.6%	60.2%
↓ HCOMP3U P Patients who reported that they "Usually" received help as soon as they wanted	21.0%	33.3%	21.4%	21.3%	18.8%	24.7%	18.3%	37.0%	23.7%
↓ HCOMP3 SNP Patients who reported that they "Sometimes" or "Never" received help as soon as they wanted	9.9%	6.7%	3.1%	11.2%	4.2%	13.6%	14.6%	7.4%	16.1%
↑ HCOMP4A P Patients who reported that their pain was "Always" well controlled	65.0%	71.6%	73.7%	76.3%	86.6%	74.5%	--	--	--
↓ HCOMP4U P Patients who reported that their pain was "Usually" well controlled	25.0%	23.9%	25.3%	19.7%	13.4%	16.4%	--	--	--
↓ HCOMP4 SNP Patients who reported that their pain was "Sometimes" or "Never" well controlled	10.0%	4.5%	1.0%	3.9%	0.0%	9.1%	--	--	--
↑ HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them	55.4%	65.6%	66.3%	60.9%	74.2%	50.0%	69.2%	55.2%	64.9%

	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18
<b>Target Quality Measures</b>									
↓ Pressure Ulcer Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
↓ Iatrogenic Pneumothorax Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
↓ Central Venous CatheterRelated Blood Stream Infection Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
↓ Postoperative Hip Fracture Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
↓ PSI 09 Perioperative Hemorrhage or Hematoma Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
↓ PSI 10 Postoperative Physiologic and Metabolic Derangement Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
↓ PSI 11 Postoperative Respiratory Failure Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
↓ PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
↓ PSI 13 Postoperative Sepsis Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
↓ PSI 14 Postoperative Wound Dehiscence Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
↓ PSI 15 Accidental Puncture or Laceration Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
↓ CLABSI	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
↓ CAUTI	0.000	0.000	0.000	0.000	0.000	0.000	11.628	0.000	0.000
↓ SSI COLON Surgical Site Infection	--	--	--	--	--	--	0.000	--	--
↓ SSI HYST Surgical Site Infection	--	0.000	--	0.000	--	--	--	--	--
↓ MRSA	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
↓ CDIFF	0.000	4.762	0.000	0.000	0.000	0.000	0.000	0.000	0.000
<b>General Information-Structural Measures</b>									
Yes SMPART NURSE Nursing Care Registry	Yes								
Yes ACS REGISTRY	Yes								
Yes SMPART GENSURG General Surgery Registry	Yes								
Yes OP12 HIT Ability electronically receive lab results	No								
Yes OP17 Tracking Clinical Results Between Visits	Yes								
Yes OP25 Outpatient Safe Surgery Checklist	Yes								
Yes SMSSCHECK Safe Surgery Checklist	Yes								
<b>Survey of Patient's Experiences - Hospital Consumer Assessment of Healthcare Providers and Systems Su</b>									
↑ HCOMP1A P Patients who reported that their nurses "Always" communicated well	88.0%	83.2%	79.8%	81.9%	79.1%	84.6%	86.7%	86.3%	84.3%
↓ HCOMP1U P Patients who reported that their nurses "Usually" communicated well	7.7%	9.3%	11.6%	9.6%	10.5%	10.9%	4.1%	6.8%	7.8%
↓ HCOMP1 SNP Patients who reported that their nurses "Sometimes" or "Never" communicated well	4.3%	7.5%	8.5%	8.5%	10.5%	4.5%	9.2%	6.8%	7.8%
↑ HCOMP2A P Patients who reported that their doctors "Always" communicated well	86.3%	83.2%	77.0%	91.6%	80.0%	83.0%	82.7%	75.3%	85.3%
↓ HCOMP2U P Patients who reported that their doctors "Usually" communicated well	11.1%	10.3%	13.5%	6.3%	10.6%	11.0%	9.2%	15.1%	7.8%
↓ HCOMP2 SNP Patients who reported that their doctors "Sometimes" or "Never" communicated well	2.6%	6.5%	9.5%	2.1%	9.4%	7.2%	8.2%	6.8%	6.9%
↑ HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	83.3%	83.3%	70.2%	79.4%	80.5%	81.0%	70.7%	81.5%	85.4%
↓ HCOMP3U P Patients who reported that they "Usually" received help as soon as they wanted	15.0%	9.5%	19.3%	8.8%	9.8%	8.9%	17.1%	7.4%	10.4%
↓ HCOMP3 SNP Patients who reported that they "Sometimes" or "Never" received help as soon as they wanted	1.7%	7.1%	10.5%	11.8%	9.8%	7.1%	12.2%	9.6%	4.2%
↑ HCOMP4A P Patients who reported that their pain was "Always" well controlled	84.6%	75.6%	70.5%	90.0%	75.0%	77.0%	--	--	--
↓ HCOMP4U P Patients who reported that their pain was "Usually" well controlled	5.8%	7.3%	15.9%	10.0%	18.2%	12.2%	--	--	--
↓ HCOMP4 SNP Patients who reported that their pain was "Sometimes" or "Never" well controlled	9.6%	17.1%	13.6%	0.0%	6.8%	10.2%	--	--	--
↑ HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them	86.8%	71.9%	72.2%	75.0%	72.2%	70.4%	67.9%	72.7%	77.5%

	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18
<b>Target Quality Measures</b>									
↓ Pressure Ulcer Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
↓ Iatrogenic Pneumothorax Rate	0.00	0.00	0.00	0.00	0.00	5.10	0.00	0.00	0.00
↓ Central Venous CatheterRelated Blood Stream Infection Rate	0.00	0.00	0.00	0.00	0.00	0.00	--	--	--
↓ Postoperative Hip Fracture Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
↓ PSI 09 Perioperative Hemorrhage or Hematoma Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
↓ PSI 10 Postoperative Physiologic and Metabolic Derangement Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
↓ PSI 11 Postoperative Respiratory Failure Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
↓ PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
↓ PSI 13 Postoperative Sepsis Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
↓ PSI 14 Postoperative Wound Dehiscence Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
↓ PSI 15 Accidental Puncture or Laceration Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
↓ CLABSI	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
↓ CAUTI	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
↓ SSI COLON Surgical Site Infection	--	--	0.000	--	--	0.000	--	0.000	0.000
↓ SSI HYST Surgical Site Infection	--	--	0.000	--	--	0.000	--	--	--
↓ MRSA	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
↓ CDIFF	0.737	1.209	0.404	0.821	0.000	0.000	0.719	0.000	0.429
<b>General Information-Structural Measures</b>									
Yes SMPART NURSE Nursing Care Registry	No								
Yes ACS REGISTRY	Yes								
Yes SMPART GENSURG General Surgery Registry	Yes								
Yes OP12 HIT Ability electronically receive lab results	Yes								
Yes OP17 Tracking Clinical Results Between Visits	Yes								
Yes OP25 Outpatient Safe Surgery Checklist	Yes								
Yes SMSSCHECK Safe Surgery Checklist	Yes								
<b>Survey of Patient's Experiences - Hospital Consumer Assessment of Healthcare Providers and Systems Su</b>									
↑ HCOMP1A P Patients who reported that their nurses "Always" communicated well	81.2%	82.0%	90.0%	86.7%	83.5%	82.8%	77.1%	85.2%	78.6%
↓ HCOMP1U P Patients who reported that their nurses "Usually" communicated well	13.7%	14.4%	8.3%	11.1%	14.7%	11.5%	15.6%	11.3%	19.4%
↓ HCOMP1 SNP Patients who reported that their nurses "Sometimes" or "Never" communicated well	5.1%	3.6%	1.7%	2.2%	1.8%	5.7%	7.3%	3.5%	2.0%
↑ HCOMP2A P Patients who reported that their doctors "Always" communicated well	75.7%	84.4%	82.3%	85.6%	85.3%	90.8%	78.1%	76.1%	76.5%
↓ HCOMP2U P Patients who reported that their doctors "Usually" communicated well	19.1%	13.8%	11.3%	13.3%	12.8%	6.9%	16.7%	23.0%	19.4%
↓ HCOMP2 SNP Patients who reported that their doctors "Sometimes" or "Never" communicated well	5.2%	1.8%	6.5%	1.1%	1.8%	2.3%	5.2%	0.9%	4.1%
↑ HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	68.6%	71.4%	71.4%	64.1%	67.3%	50.0%	70.3%	62.1%	66.7%
↓ HCOMP3U P Patients who reported that they "Usually" received help as soon as they wanted	19.6%	14.3%	28.6%	23.1%	26.5%	36.8%	13.5%	31.0%	25.0%
↓ HCOMP3 SNP Patients who reported that they "Sometimes" or "Never" received help as soon as they wanted	11.8%	14.3%	0.0%	12.8%	6.1%	13.2%	16.2%	6.9%	8.3%
↑ HCOMP4A P Patients who reported that their pain was "Always" well controlled	54.1%	61.1%	54.2%	56.4%	69.8%	63.3%	--	--	--
↓ HCOMP4U P Patients who reported that their pain was "Usually" well controlled	35.1%	30.6%	29.2%	30.8%	27.9%	33.3%	--	--	--
↓ HCOMP4 SNP Patients who reported that their pain was "Sometimes" or "Never" well controlled	10.8%	8.3%	16.7%	12.8%	2.3%	3.3%	--	--	--
↑ HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them	70.3%	78.6%	60.0%	66.7%	79.3%	60.9%	56.4%	55.6%	80.0%

		Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18
<b>Target Quality Measures</b>										
↓	Pressure Ulcer Rate	0.00	0.00	0.00	5.04	5.94	0.00	1.06	0.00	3.52
↓	Iatrogenic Pneumothorax Rate	0.90	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
↓	Central Venous CatheterRelated Blood Stream Infection Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
↓	Postoperative Hip Fracture Rate	0.00	0.00	0.00	0.00	1.01	0.00	0.00	1.06	0.00
↓	PSI 09 Perioperative Hemorrhage or Hematoma Rate	3.50	0.00	7.84	3.60	13.03	3.50	3.37	7.55	0.00
↓	PSI 10 Postoperative Physiologic and Metabolic Derangement Rate	11.05	10.10	0.00	0.00	0.00	0.00	0.00	0.00	0.00
↓	PSI 11 Postoperative Respiratory Failure Rate	13.79	12.27	0.00	20.13	13.51	0.00	14.18	8.26	32.26
↓	PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	3.21	3.15	0.00	3.41	3.14	0.00	0.00	0.00	3.06
↓	PSI 13 Postoperative Sepsis Rate	0.00	0.00	0.00	18.99	0.00	0.00	5.88	0.00	5.65
↓	PSI 14 Postoperative Wound Dehiscence Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
↓	PSI 15 Accidental Puncture or Laceration Rate	0.00	0.00	0.00	0.00	0.00	11.24	0.00	5.99	0.00
↓	CLABSI	2.561	0.000	1.126	0.000	0.000	0.000	1.250	1.361	0.000
↓	CAUTI	0.717	1.738	1.543	2.366	0.000	0.858	0.000	0.000	1.855
↓	SSI COLON Surgical Site Infection	0.000	0.000	8.333	0.000	0.000	0.000	0.000	7.143	0.000
↓	SSI HYST Surgical Site Infection	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
↓	MRSA	0.000	0.165	0.162	0.000	0.326	0.000	0.000	0.000	0.000
↓	CDIFF	0.681	0.859	2.023	0.512	0.508	0.495	0.756	0.519	0.983
<b>General Information-Structural Measures</b>										
Yes	SMPART NURSE Nursing Care Registry	No								
Yes	ACS REGISTRY	Yes								
Yes	SMPART GENSURG General Surgery Registry	Yes								
Yes	OP12 HIT Ability electronically receive lab results	No								
Yes	OP17 Tracking Clinical Results Between Visits	Yes								
Yes	OP25 Outpatient Safe Surgery Checklist	Yes								
Yes	SMSSCHECK Safe Surgery Checklist	Yes								
<b>Survey of Patient's Experiences - Hospital Consumer Assessment of Healthcare Providers and Systems Su</b>										
↑	HCOMP1A P Patients who reported that their nurses "Always" communicated well	84.9%	81.4%	84.5%	85.8%	86.3%	84.7%	86.7%	80.8%	86.5%
↓	HCOMP1U P Patients who reported that their nurses "Usually" communicated well	11.5%	10.8%	10.0%	10.1%	7.6%	11.5%	7.9%	12.5%	10.3%
↓	HCOMP1 SNP Patients who reported that their nurses "Sometimes" or "Never" communicated well	3.5%	7.7%	5.5%	4.1%	6.1%	3.7%	5.4%	6.7%	3.2%
↑	HCOMP2A P Patients who reported that their doctors "Always" communicated well	79.9%	82.7%	85.1%	83.2%	81.9%	85.6%	83.2%	83.1%	81.9%
↓	HCOMP2U P Patients who reported that their doctors "Usually" communicated well	13.1%	10.1%	11.7%	11.2%	10.4%	10.4%	11.3%	9.6%	9.2%
↓	HCOMP2 SNP Patients who reported that their doctors "Sometimes" or "Never" communicated well	7.0%	7.2%	3.2%	5.6%	7.7%	4.0%	5.9%	7.2%	8.9%
↑	HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	63.4%	67.3%	64.8%	74.2%	61.3%	140.5%	69.3%	70.7%	72.9%
↓	HCOMP3U P Patients who reported that they "Usually" received help as soon as they wanted	31.0%	16.8%	25.9%	18.5%	27.0%	18.2%	19.3%	17.1%	18.1%
↓	HCOMP3 SNP Patients who reported that they "Sometimes" or "Never" received help as soon as they wanted	5.5%	7.7%	9.3%	7.3%	11.7%	5.8%	11.5%	12.2%	9.0%
↑	HCOMP4A P Patients who reported that their pain was "Always" well controlled	75.5%	69.7%	73.6%	77.1%	73.9%	78.5%	--	--	--
↓	HCOMP4U P Patients who reported that their pain was "Usually" well controlled	16.1%	20.4%	20.8%	12.5%	16.3%	12.3%	--	--	--
↓	HCOMP4 SNP Patients who reported that their pain was "Sometimes" or "Never" well controlled	8.4%	10.0%	5.6%	10.4%	9.8%	9.2%	--	--	--
↑	HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them	58.4%	68.1%	79.1%	72.6%	63.2%	63.4%	64.4%	70.6%	67.6%

	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18
<b>Target Quality Measures</b>									
↓ Pressure Ulcer Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
↓ Iatrogenic Pneumothorax Rate	1.63	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
↓ Central Venous CatheterRelated Blood Stream Infection Rate	0.00	0.00	0.00	0.00	0.00	0.00	--	--	--
↓ Postoperative Hip Fracture Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2.29
↓ PSI 09 Perioperative Hemorrhage or Hematoma Rate	0.00	0.00	9.90	0.00	0.00	0.00	0.00	0.00	0.00
↓ PSI 10 Postoperative Physiologic and Metabolic Derangement Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
↓ PSI 11 Postoperative Respiratory Failure Rate	0.00	54.05	0.00	0.00	0.00	50.00	0.00	0.00	0.00
↓ PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	9.52	8.20	0.00	0.00	0.00	0.00	10.00	0.00	0.00
↓ PSI 13 Postoperative Sepsis Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
↓ PSI 14 Postoperative Wound Dehiscence Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
↓ PSI 15 Accidental Puncture or Laceration Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
↓ CLABSI	0.000	0.000	0.000	0.000	0.000	0.000	--	--	--
↓ CAUTI	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
↓ SSI COLON Surgical Site Infection	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	--
↓ SSI HYST Surgical Site Infection	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	--
↓ MRSA	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
↓ CDIFF	0.737	1.209	0.404	0.821	0.000	0.000	--	--	--
<b>General Information-Structural Measures</b>									
Yes SMPART NURSE Nursing Care Registry	Yes								
Yes ACS REGISTRY	Yes								
Yes SMPART GENSURG General Surgery Registry	Yes								
Yes OP12 HIT Ability electronically receive lab results	Yes								
Yes OP17 Tracking Clinical Results Between Visits	Yes								
Yes OP25 Outpatient Safe Surgery Checklist	Yes								
Yes SMSSCHECK Safe Surgery Checklist	Yes								
<b>Survey of Patient's Experiences - Hospital Consumer Assessment of Healthcare Providers and Systems Su</b>									
↑ HCOMP1A P Patients who reported that their nurses "Always" communicated well	71.6%	78.0%	77.4%	73.5%	83.3%	68.6%	78.2%	72.9%	79.3%
↓ HCOMP1U P Patients who reported that their nurses "Usually" communicated well	19.2%	17.4%	18.8%	18.4%	12.4%	25.9%	15.4%	22.9%	14.5%
↓ HCOMP1 SNP Patients who reported that their nurses "Sometimes" or "Never" communicated well	9.2%	4.6%	3.8%	8.2%	4.3%	5.4%	6.4%	4.3%	6.2%
↑ HCOMP2A P Patients who reported that their doctors "Always" communicated well	67.7%	74.8%	76.2%	79.8%	84.3%	76.8%	81.0%	77.9%	86.2%
↓ HCOMP2U P Patients who reported that their doctors "Usually" communicated well	20.1%	19.4%	17.9%	14.9%	12.0%	18.4%	16.7%	15.0%	9.6%
↓ HCOMP2 SNP Patients who reported that their doctors "Sometimes" or "Never" communicated well	12.2%	5.8%	5.9%	5.2%	3.7%	4.9%	2.4%	7.1%	4.2%
↑ HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	56.0%	55.6%	51.5%	53.9%	60.9%	45.8%	57.6%	49.6%	59.8%
↓ HCOMP3U P Patients who reported that they "Usually" received help as soon as they wanted	26.0%	30.2%	34.6%	31.3%	31.2%	39.8%	29.5%	35.3%	27.4%
↓ HCOMP3 SNP Patients who reported that they "Sometimes" or "Never" received help as soon as they wanted	18.0%	14.3%	14.0%	14.8%	8.0%	14.5%	12.9%	15.0%	12.8%
↑ HCOMP4A P Patients who reported that their pain was "Always" well controlled	62.6%	56.9%	62.5%	60.6%	68.1%	63.5%	--	--	--
↓ HCOMP4U P Patients who reported that their pain was "Usually" well controlled	22.0%	34.5%	28.8%	22.1%	23.9%	25.0%	--	--	--
↓ HCOMP4 SNP Patients who reported that their pain was "Sometimes" or "Never" well controlled	15.4%	8.6%	8.7%	17.3%	8.0%	11.5%	--	--	--
↑ HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them	53.6%	63.3%	58.7%	62.1%	71.4%	56.4%	59.6%	56.3%	57.4%

	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18
<b>Target Quality Measures</b>									
↓ Pressure Ulcer Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
↓ Iatrogenic Pneumothorax Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
↓ Central Venous CatheterRelated Blood Stream Infection Rate	0.00	0.00	0.00	0.00	0.00	0.00	--	--	--
↓ Postoperative Hip Fracture Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
↓ PSI 09 Perioperative Hemorrhage or Hematoma Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
↓ PSI 10 Postoperative Physiologic and Metabolic Derangement Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
↓ PSI 11 Postoperative Respiratory Failure Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
↓ PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
↓ PSI 13 Postoperative Sepsis Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
↓ PSI 14 Postoperative Wound Dehiscence Rate	--	--	0.00	0.00	0.00	0.00	0.00	0.00	0.00
↓ PSI 15 Accidental Puncture or Laceration Rate	--	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
↓ CLABSI	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
↓ CAUTI	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
↓ SSI COLON Surgical Site Infection	--	--	--	--	--	--	--	--	--
↓ SSI HYST Surgical Site Infection	--	--	0.000	--	--	--	--	--	--
↓ MRSA	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	--
↓ CDIFF	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	4.132
<b>General Information-Structural Measures</b>									
Yes SMPART NURSE Nursing Care Registry	No								
Yes ACS REGISTRY	Yes								
Yes SMPART GENSURG General Surgery Registry	Yes								
Yes OP12 HIT Ability electronically receive lab results	Yes								
Yes OP17 Tracking Clinical Results Between Visits	Yes								
Yes OP25 Outpatient Safe Surgery Checklist	Yes								
Yes SMSSCHECK Safe Surgery Checklist	Yes								
<b>Survey of Patient's Experiences - Hospital Consumer Assessment of Healthcare Providers and Systems Su</b>									
↑ HCOMP1A P Patients who reported that their nurses "Always" communicated well	85.5%	94.4%	90.5%	85.7%	89.4%	82.4%	83.3%	82.5%	85.9%
↓ HCOMP1U P Patients who reported that their nurses "Usually" communicated well	11.3%	5.6%	5.4%	9.5%	6.1%	17.6%	13.6%	15.8%	11.5%
↓ HCOMP1 SNP Patients who reported that their nurses "Sometimes" or "Never" communicated well	3.2%	0.0%	4.1%	4.8%	4.5%	0.0%	3.0%	1.8%	2.6%
↑ HCOMP2A P Patients who reported that their doctors "Always" communicated well	92.1%	79.6%	89.3%	92.1%	90.6%	91.9%	90.9%	82.5%	87.2%
↓ HCOMP2U P Patients who reported that their doctors "Usually" communicated well	7.9%	18.5%	4.0%	6.3%	6.3%	8.1%	7.6%	10.5%	9.0%
↓ HCOMP2 SNP Patients who reported that their doctors "Sometimes" or "Never" communicated well	0.0%	1.9%	6.7%	1.6%	3.1%	0.0%	1.5%	7.0%	3.8%
↑ HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	70.0%	74.1%	85.0%	72.7%	67.7%	86.5%	64.5%	58.6%	66.7%
↓ HCOMP3U P Patients who reported that they "Usually" received help as soon as they wanted	20.0%	14.8%	5.0%	21.2%	25.8%	8.1%	22.6%	34.5%	26.2%
↓ HCOMP3 SNP Patients who reported that they "Sometimes" or "Never" received help as soon as they wanted	10.0%	11.1%	10.0%	6.1%	6.5%	5.4%	12.9%	6.9%	7.1%
↑ HCOMP4A P Patients who reported that their pain was "Always" well controlled	55.6%	79.2%	81.3%	70.0%	91.7%	95.8%	--	--	--
↓ HCOMP4U P Patients who reported that their pain was "Usually" well controlled	44.4%	16.7%	15.6%	20.0%	8.3%	4.2%	--	--	--
↓ HCOMP4 SNP Patients who reported that their pain was "Sometimes" or "Never" well controlled	0.0%	4.2%	3.1%	10.0%	0.0%	0.0%	--	--	--
↑ HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them	60.9%	63.6%	58.6%	85.7%	45.5%	67.5%	86.2%	70.0%	57.7%

		Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18
<b>Target Quality Measures</b>										
↓	Pressure Ulcer Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
↓	Iatrogenic Pneumothorax Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
↓	Central Venous CatheterRelated Blood Stream Infection Rate	0.00	0.00	0.00	0.00	0.00	0.00	--	--	--
↓	Postoperative Hip Fracture Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
↓	PSI 09 Perioperative Hemorrhage or Hematoma Rate	0.00	0.00	--	0.00	--	0.00	--	0.00	0.00
↓	PSI 10 Postoperative Physiologic and Metabolic Derangement Rate	0.00	0.00	--	--	--	0.00	--	--	0.00
↓	PSI 11 Postoperative Respiratory Failure Rate	0.00	0.00	--	--	--	0.00	--	--	0.00
↓	PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	0.00	0.00	--	0.00	--	1000.00	--	--	--
↓	PSI 13 Postoperative Sepsis Rate	0.00	0.00	--	--	--	1000.00	--	--	--
↓	PSI 14 Postoperative Wound Dehiscence Rate	0.00	0.00	0.00	--	--	0.00	0.00	0.00	--
↓	PSI 15 Accidental Puncture or Laceration Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
↓	CLABSI	0.000	45.455	0.000	0.000	0.000	--	0.000	--	0.000
↓	CAUTI	0.000	0.000	0.000	0.000	--	0.000	0.000	--	0.000
↓	SSI COLON Surgical Site Infection	--	--	--	--	--	--	--	--	--
↓	SSI HYST Surgical Site Infection	--	--	--	--	--	--	--	--	--
↓	MRSA	0.000	0.000	0.000	0.000	--	0.000	0.000	0.000	0.000
↓	CDIFF	0.000	0.000	0.000	4.484	0.000	0.000	0.000	--	0.000
<b>General Information-Structural Measures</b>										
Yes	SMPART NURSE Nursing Care Registry	No	No	No	No	No	No	No	No	No
Yes	ACS REGISTRY	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Yes	SMPART GENSURG General Surgery Registry	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Yes	OP12 HIT Ability electronically receive lab results	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Yes	OP17 Tracking Clinical Results Between Visits	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Yes	OP25 Outpatient Safe Surgery Checklist	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Yes	SMSSCHECK Safe Surgery Checklist	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
<b>Survey of Patient's Experiences - Hospital Consumer Assessment of Healthcare Providers and Systems Su</b>										
↑	HCOMP1A P Patients who reported that their nurses "Always" communicated well	100.0%	75.0%	95.8%	90.9%	83.3%	86.7%	96.7%	87.5%	83.3%
↓	HCOMP1U P Patients who reported that their nurses "Usually" communicated well	0.0%	0.0%	4.2%	9.1%	10.4%	10.0%	3.3%	12.5%	13.3%
↓	HCOMP1 SNP Patients who reported that their nurses "Sometimes" or "Never" communicated well	0.0%	25.0%	0.0%	0.0%	6.3%	3.3%	0.0%	0.0%	3.3%
↑	HCOMP2A P Patients who reported that their doctors "Always" communicated well	95.8%	83.3%	90.5%	97.0%	83.3%	80.0%	90.0%	83.3%	96.7%
↓	HCOMP2U P Patients who reported that their doctors "Usually" communicated well	4.2%	16.7%	9.5%	3.0%	8.3%	16.7%	1.7%	16.7%	0.0%
↓	HCOMP2 SNP Patients who reported that their doctors "Sometimes" or "Never" communicated well	0.0%	0.0%	0.0%	0.0%	8.3%	3.3%	8.3%	0.0%	3.3%
↑	HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	87.5%	100.0%	88.9%	52.9%	60.0%	64.3%	81.0%	70.0%	81.8%
↓	HCOMP3U P Patients who reported that they "Usually" received help as soon as they wanted	12.5%	0.0%	11.1%	41.2%	20.0%	35.7%	19.0%	30.0%	18.2%
↓	HCOMP3 SNP Patients who reported that they "Sometimes" or "Never" received help as soon as they wanted	0.0%	0.0%	0.0%	5.9%	20.0%	0.0%	0.0%	0.0%	0.0%
↑	HCOMP4A P Patients who reported that their pain was "Always" well controlled	88.9%	75.0%	66.7%	80.0%	55.6%	75.0%	--	--	--
↓	HCOMP4U P Patients who reported that their pain was "Usually" well controlled	11.1%	25.0%	33.3%	20.0%	22.2%	25.0%	--	--	--
↓	HCOMP4 SNP Patients who reported that their pain was "Sometimes" or "Never" well controlled	0.0%	0.0%	0.0%	0.0%	22.2%	0.0%	--	--	--
↑	HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them	62.5%	100.0%	100.0%	75.0%	68.2%	75.0%	44.4%	62.5%	50.0%

	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18
<b>Target Quality Measures</b>									
↓ Pressure Ulcer Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
↓ Iatrogenic Pneumothorax Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
↓ Central Venous CatheterRelated Blood Stream Infection Rate	0.00	0.00	0.00	0.00	0.00	0.00	--	--	--
↓ Postoperative Hip Fracture Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
↓ PSI 09 Perioperative Hemorrhage or Hematoma Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
↓ PSI 10 Postoperative Physiologic and Metabolic Derangement Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
↓ PSI 11 Postoperative Respiratory Failure Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	43.48
↓ PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	0.00	0.00	25.00	0.00	0.00	0.00	0.00	0.00	25.00
↓ PSI 13 Postoperative Sepsis Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	45.45	0.00
↓ PSI 14 Postoperative Wound Dehiscence Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
↓ PSI 15 Accidental Puncture or Laceration Rate	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
↓ CLABSI	0.000	0.000	0.000	0.000	12.500	0.000	0.000	0.000	0.000
↓ CAUTI	0.000	0.000	0.000	5.917	0.000	0.000	0.000	0.000	0.000
↓ SSI COLON Surgical Site Infection	0.000	0.000	0.000	0.000	0.000	0.000	0.000	33.333	--
↓ SSI HYST Surgical Site Infection	--	0.000	--	0.000	0.000	0.000	0.000	0.000	--
↓ MRSA	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.854	0.000
↓ CDIFF	0.000	0.000	0.858	0.763	1.475	2.861	0.622	0.854	0.000
<b>General Information-Structural Measures</b>									
Yes SMPART NURSE Nursing Care Registry	Yes								
Yes ACS REGISTRY	Yes								
Yes SMPART GENSURG General Surgery Registry	Yes								
Yes OP12 HIT Ability electronically receive lab results	Yes								
Yes OP17 Tracking Clinical Results Between Visits	Yes								
Yes OP25 Outpatient Safe Surgery Checklist	Yes								
Yes SMSSCHECK Safe Surgery Checklist	Yes								
<b>Survey of Patient's Experiences - Hospital Consumer Assessment of Healthcare Providers and Systems Su</b>									
↑ HCOMP1A P Patients who reported that their nurses "Always" communicated well	7.8%	3.8%	5.3%	0.0%	8.1%	1.4%	1.3%	5.9%	74.6%
↓ HCOMP1U P Patients who reported that their nurses "Usually" communicated well	15.5%	22.4%	15.8%	11.1%	16.3%	22.2%	15.8%	18.5%	15.9%
↓ HCOMP1 SNP Patients who reported that their nurses "Sometimes" or "Never" communicated well	7.8%	3.8%	5.3%	0.0%	8.1%	1.4%	1.3%	5.9%	9.5%
↑ HCOMP2A P Patients who reported that their doctors "Always" communicated well	81.1%	80.0%	76.3%	84.6%	76.1%	74.1%	79.1%	79.0%	83.6%
↓ HCOMP2U P Patients who reported that their doctors "Usually" communicated well	11.4%	18.1%	14.0%	15.4%	9.7%	23.1%	18.3%	19.3%	7.4%
↓ HCOMP2 SNP Patients who reported that their doctors "Sometimes" or "Never" communicated well	7.6%	1.9%	9.6%	0.0%	14.2%	2.7%	2.6%	1.7%	9.0%
↑ HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	67.2%	62.5%	73.2%	76.2%	70.8%	68.1%	76.6%	71.7%	50.0%
↓ HCOMP3U P Patients who reported that they "Usually" received help as soon as they wanted	18.8%	33.3%	16.1%	17.5%	18.5%	25.0%	17.2%	23.3%	33.9%
↓ HCOMP3 SNP Patients who reported that they "Sometimes" or "Never" received help as soon as they wanted	14.1%	4.2%	10.7%	6.3%	10.8%	6.9%	6.3%	5.0%	16.1%
↑ HCOMP4A P Patients who reported that their pain was "Always" well controlled	69.5%	65.6%	70.0%	68.5%	65.0%	61.5%	--	--	--
↓ HCOMP4U P Patients who reported that their pain was "Usually" well controlled	18.6%	32.8%	22.0%	29.6%	23.3%	28.2%	--	--	--
↓ HCOMP4 SNP Patients who reported that their pain was "Sometimes" or "Never" well controlled	11.9%	1.6%	8.0%	1.9%	11.7%	10.3%	--	--	--
↑ HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them	60.9%	41.7%	81.8%	68.9%	65.1%	59.6%	73.0%	66.7%	61.7%

		Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18
<b>Target Quality Measures</b>										
↓	Pressure Ulcer Rate	--	--	--	--	--	--	--	--	--
↓	Iatrogenic Pneumothorax Rate	--	--	--	--	--	--	--	--	--
↓	Central Venous CatheterRelated Blood Stream Infection Rate	--	--	--	--	--	--	--	--	--
↓	Postoperative Hip Fracture Rate	--	--	--	--	--	--	--	--	--
↓	PSI 09 Perioperative Hemorrhage or Hematoma Rate	--	--	--	--	--	--	--	--	--
↓	PSI 10 Postoperative Physiologic and Metabolic Derangement Rate	--	--	--	--	--	--	--	--	--
↓	PSI 11 Postoperative Respiratory Failure Rate	--	--	--	--	--	--	--	--	--
↓	PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	--	--	--	--	--	--	--	--	--
↓	PSI 13 Postoperative Sepsis Rate	--	--	--	--	--	--	--	--	--
↓	PSI 14 Postoperative Wound Dehiscence Rate	--	--	--	--	--	--	--	--	--
↓	PSI 15 Accidental Puncture or Laceration Rate	--	--	--	--	--	--	--	--	--
↓	CLABSI	--	--	--	--	--	--	--	--	--
↓	CAUTI	--	--	--	--	--	--	--	--	--
↓	SSI COLON Surgical Site Infection	--	--	--	--	--	--	--	--	--
↓	SSI HYST Surgical Site Infection	--	--	--	--	--	--	--	--	--
↓	MRSA	--	--	--	--	--	--	--	--	--
↓	CDIFF	--	--	--	--	--	--	--	--	--
<b>General Information-Structural Measures</b>										
Yes	SMPART NURSE Nursing Care Registry	--	--	--	--	--	--	--	--	--
Yes	ACS REGISTRY	--	--	--	--	--	--	--	--	--
Yes	SMPART GENSURG General Surgery Registry	--	--	--	--	--	--	--	--	--
Yes	OP12 HIT Ability electronically receive lab results	Yes								
Yes	OP17 Tracking Clinical Results Between Visits	Yes								
Yes	OP25 Outpatient Safe Surgery Checklist	--	--	--	--	--	--	--	--	--
Yes	SMSSCHECK Safe Surgery Checklist	--	--	--	--	--	--	--	--	--
<b>Survey of Patient's Experiences - Hospital Consumer Assessment of Healthcare Providers and Systems Su</b>										
↑	HCOMP1A P Patients who reported that their nurses "Always" communicated well	100.0%	--	--	--	100.0%	100.0%	--	100.0%	--
↓	HCOMP1U P Patients who reported that their nurses "Usually" communicated well	0.0%	--	--	--	0.0%	0.0%	--	0.0%	--
↓	HCOMP1 SNP Patients who reported that their nurses "Sometimes" or "Never" communicated well	0.0%	--	--	--	0.0%	0.0%	--	0.0%	--
↑	HCOMP2A P Patients who reported that their doctors "Always" communicated well	100.0%	--	--	--	100.0%	100.0%	--	100.0%	--
↓	HCOMP2U P Patients who reported that their doctors "Usually" communicated well	0.0%	--	--	--	0.0%	0.0%	--	0.0%	--
↓	HCOMP2 SNP Patients who reported that their doctors "Sometimes" or "Never" communicated well	0.0%	--	--	--	0.0%	0.0%	--	0.0%	--
↑	HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	100.0%	--	--	--	100.0%	100.0%	100.0%	--	--
↓	HCOMP3U P Patients who reported that they "Usually" received help as soon as they wanted	0.0%	--	--	--	0.0%	0.0%	0.0%	--	--
↓	HCOMP3 SNP Patients who reported that they "Sometimes" or "Never" received help as soon as they wanted	0.0%	--	--	--	0.0%	0.0%	0.0%	--	--
↑	HCOMP4A P Patients who reported that their pain was "Always" well controlled	100.0%	--	--	--	100.0%	--	--	--	--
↓	HCOMP4U P Patients who reported that their pain was "Usually" well controlled	0.0%	--	--	--	0.0%	--	--	--	--
↓	HCOMP4 SNP Patients who reported that their pain was "Sometimes" or "Never" well controlled	0.0%	--	--	--	0.0%	--	--	--	--
↑	HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them	100.0%	--	--	--	100.0%	--	--	100.0%	--

		Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18
<b>Target Quality Measures</b>										
↓	Pressure Ulcer Rate	--	--	--	--	--	--	--	--	--
↓	Iatrogenic Pneumothorax Rate	--	--	--	--	--	--	--	--	--
↓	Central Venous CatheterRelated Blood Stream Infection Rate	--	--	--	--	--	--	--	--	--
↓	Postoperative Hip Fracture Rate	--	--	--	--	--	--	--	--	--
↓	PSI 09 Perioperative Hemorrhage or Hematoma Rate	--	--	--	--	--	--	--	--	--
↓	PSI 10 Postoperative Physiologic and Metabolic Derangement Rate	--	--	--	--	--	--	--	--	--
↓	PSI 11 Postoperative Respiratory Failure Rate	--	--	--	--	--	--	--	--	--
↓	PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	--	--	--	--	--	--	--	--	--
↓	PSI 13 Postoperative Sepsis Rate	--	--	--	--	--	--	--	--	--
↓	PSI 14 Postoperative Wound Dehiscence Rate	--	--	--	--	--	--	--	--	--
↓	PSI 15 Accidental Puncture or Laceration Rate	--	--	--	--	--	--	--	--	--
↓	CLABSI	0.000	0.000	0.000	0.000	--	0.000	0.000	0.000	0.000
↓	CAUTI	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
↓	SSI COLON Surgical Site Infection	--	--	--	--	--	--	--	--	--
↓	SSI HYST Surgical Site Infection	--	--	--	--	--	--	--	--	--
↓	MRSA	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
↓	CDIFF	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
<b>General Information-Structural Measures</b>										
Yes	SMPART NURSE Nursing Care Registry	No								
Yes	ACS REGISTRY	No								
Yes	SMPART GENSURG General Surgery Registry	Yes								
Yes	OP12 HIT Ability electronically receive lab results	--	--	--	--	--	--	--	--	--
Yes	OP17 Tracking Clinical Results Between Visits	--	--	--	--	--	--	--	--	--
Yes	OP25 Outpatient Safe Surgery Checklist	--	--	--	--	--	--	--	--	--
Yes	SMSSCHECK Safe Surgery Checklist	Yes								
<b>Survey of Patient's Experiences - Hospital Consumer Assessment of Healthcare Providers and Systems Su</b>										
↑	HCOMP1A P Patients who reported that their nurses "Always" communicated well	100.0%	83.3%	94.9%	86.7%	90.5%	87.5%	76.9%	55.6%	100.0%
↓	HCOMP1U P Patients who reported that their nurses "Usually" communicated well	0.0%	16.7%	5.1%	13.3%	9.5%	12.5%	17.9%	44.4%	0.0%
↓	HCOMP1 SNP Patients who reported that their nurses "Sometimes" or "Never" communicated well	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	5.1%	0.0%	0.0%
↑	HCOMP2A P Patients who reported that their doctors "Always" communicated well	100.0%	66.7%	97.2%	80.0%	95.2%	69.7%	76.9%	75.0%	100.0%
↓	HCOMP2U P Patients who reported that their doctors "Usually" communicated well	0.0%	0.0%	2.8%	20.0%	4.8%	21.2%	20.5%	25.0%	0.0%
↓	HCOMP2 SNP Patients who reported that their doctors "Sometimes" or "Never" communicated well	0.0%	33.3%	0.0%	0.0%	0.0%	9.1%	2.6%	0.0%	0.0%
↑	HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	85.7%	100.0%	80.0%	60.0%	77.8%	92.3%	76.9%	50.0%	100.0%
↓	HCOMP3U P Patients who reported that they "Usually" received help as soon as they wanted	14.3%	0.0%	20.0%	40.0%	0.0%	7.7%	23.1%	50.0%	0.0%
↓	HCOMP3 SNP Patients who reported that they "Sometimes" or "Never" received help as soon as they wanted	0.0%	0.0%	0.0%	0.0%	22.2%	0.0%	0.0%	0.0%	0.0%
↑	HCOMP4A P Patients who reported that their pain was "Always" well controlled	75.0%	100.0%	81.3%	70.0%	75.0%	90.0%	--	--	--
↓	HCOMP4U P Patients who reported that their pain was "Usually" well controlled	25.0%	0.0%	18.8%	30.0%	25.0%	10.0%	--	--	--
↓	HCOMP4 SNP Patients who reported that their pain was "Sometimes" or "Never" well controlled	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	--	--	--
↑	HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them	100.0%	100.0%	80.0%	83.3%	85.7%	66.7%	75.0%	50.0%	100.0%

	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18
<b>Target Quality Measures</b>									
↓ Pressure Ulcer Rate	0.27	0.27	0.27	0.27	0.27	0.27	--	--	--
↓ Iatrogenic Pneumothorax Rate	0.38	0.38	0.38	0.38	0.38	0.38	--	--	--
↓ Central Venous CatheterRelated Blood Stream Infection Rate	0.15	0.15	0.15	0.15	0.15	0.15	--	--	--
↓ Postoperative Hip Fracture Rate	0.06	0.06	0.06	0.06	0.06	0.06	--	--	--
↓ PSI 09 Perioperative Hemorrhage or Hematoma Rate	4.52	4.52	4.52	4.52	4.52	4.52	--	--	--
↓ PSI 10 Postoperative Physiologic and Metabolic Derangement Rate	1.10	1.10	1.10	1.10	1.10	1.10	--	--	--
↓ PSI 11 Postoperative Respiratory Failure Rate	8.98	8.98	8.98	8.98	8.98	8.98	--	--	--
↓ PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	6.16	6.16	6.16	6.16	6.16	6.16	--	--	--
↓ PSI 13 Postoperative Sepsis Rate	9.38	9.38	9.38	9.38	9.38	9.38	--	--	--
↓ PSI 14 Postoperative Wound Dehiscence Rate	2.22	2.22	2.22	2.22	2.22	2.22	--	--	--
↓ PSI 15 Accidental Puncture or Laceration Rate	2.17	2.17	2.17	2.17	2.17	2.17	--	--	--
↓ CLABSI	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
↓ CAUTI	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
↓ SSI COLON Surgical Site Infection	0.000	11.111	0.000	0.000	0.000	0.000	0.000	0.000	0.000
↓ SSI HYST Surgical Site Infection	--	--	--	--	--	--	--	--	--
↓ MRSA	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
↓ CDIFF	0.000	0.876	0.000	0.000	0.000	0.000	0.000	0.000	0.932
<b>General Information-Structural Measures</b>									
Yes SMPART NURSE Nursing Care Registry	Yes								
Yes ACS REGISTRY	Yes								
Yes SMPART GENSURG General Surgery Registry	Yes								
Yes OP12 HIT Ability electronically receive lab results	Yes								
Yes OP17 Tracking Clinical Results Between Visits	Yes								
Yes OP25 Outpatient Safe Surgery Checklist	Yes								
Yes SMSSCHECK Safe Surgery Checklist	Yes								
<b>Survey of Patient's Experiences - Hospital Consumer Assessment of Healthcare Providers and Systems Su</b>									
↑ HCOMP1A P Patients who reported that their nurses "Always" communicated well	91.0%	91.0%	91.0%	91.0%	91.0%	91.0%	--	--	--
↓ HCOMP1U P Patients who reported that their nurses "Usually" communicated well	17.0%	17.0%	17.0%	17.0%	17.0%	17.0%	--	--	--
↓ HCOMP1 SNP Patients who reported that their nurses "Sometimes" or "Never" communicated well	4.0%	4.0%	4.0%	4.0%	4.0%	4.0%	--	--	--
↑ HCOMP2A P Patients who reported that their doctors "Always" communicated well	94.0%	94.0%	94.0%	94.0%	94.0%	94.0%	--	--	--
↓ HCOMP2U P Patients who reported that their doctors "Usually" communicated well	11.0%	11.0%	11.0%	11.0%	11.0%	11.0%	--	--	--
↓ HCOMP2 SNP Patients who reported that their doctors "Sometimes" or "Never" communicated well	4.0%	4.0%	4.0%	4.0%	4.0%	4.0%	--	--	--
↑ HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	88.0%	88.0%	88.0%	88.0%	88.0%	88.0%	--	--	--
↓ HCOMP3U P Patients who reported that they "Usually" received help as soon as they wanted	23.0%	23.0%	23.0%	23.0%	23.0%	23.0%	--	--	--
↓ HCOMP3 SNP Patients who reported that they "Sometimes" or "Never" received help as soon as they wanted	6.0%	6.0%	6.0%	6.0%	6.0%	6.0%	--	--	--
↑ HCOMP4A P Patients who reported that their pain was "Always" well controlled	87.0%	87.0%	87.0%	87.0%	87.0%	87.0%	--	--	--
↓ HCOMP4U P Patients who reported that their pain was "Usually" well controlled	23.0%	23.0%	23.0%	23.0%	23.0%	23.0%	--	--	--
↓ HCOMP4 SNP Patients who reported that their pain was "Sometimes" or "Never" well controlled	7.0%	7.0%	7.0%	7.0%	7.0%	7.0%	--	--	--
↑ HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them	80.0%	80.0%	80.0%	80.0%	80.0%	80.0%	--	--	--

	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18
<b>Target Quality Measures</b>									
↓ Pressure Ulcer Rate	0.34	0.34	0.34	0.34	0.34	0.34	--	--	--
↓ Iatrogenic Pneumothorax Rate	0.45	0.45	0.45	0.45	0.45	0.45	--	--	--
↓ Central Venous Catheter-Related Blood Stream Infection Rate	0.15	0.15	0.15	0.15	0.15	0.15	--	--	--
↓ Postoperative Hip Fracture Rate	0.06	0.06	0.06	0.06	0.06	0.06	--	--	--
↓ PSI 09 Perioperative Hemorrhage or Hematoma Rate	4.98	4.98	4.98	4.98	4.98	4.98	--	--	--
↓ PSI 10 Postoperative Physiologic and Metabolic Derangement Rate	1.11	1.11	1.11	1.11	1.11	1.11	--	--	--
↓ PSI 11 Postoperative Respiratory Failure Rate	12.51	12.51	12.51	12.51	12.51	12.51	--	--	--
↓ PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	7.58	7.58	7.58	7.58	7.58	7.58	--	--	--
↓ PSI 13 Postoperative Sepsis Rate	9.48	9.48	9.48	9.48	9.48	9.48	--	--	--
↓ PSI 14 Postoperative Wound Dehiscence Rate	2.24	2.24	2.24	2.24	2.24	2.24	--	--	--
↓ PSI 15 Accidental Puncture or Laceration Rate	1.49	1.49	1.49	1.49	1.49	1.49	--	--	--
↓ CLABSI	0.000	0.000	0.000	0.000	0.000	0.000	7.576	0.000	0.000
↓ CAUTI	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
↓ SSI COLON Surgical Site Infection	0.000	0.000	0.000	0.000	0.000	16.667	0.000	0.000	0.000
↓ SSI HYST Surgical Site Infection	--	--	0.000	--	--	--	--	--	--
↓ MRSA	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
↓ CDIFF	0.000	0.000	0.000	0.000	0.000	0.000	2.528	1.447	0.000
<b>General Information-Structural Measures</b>									
Yes SMPART NURSE Nursing Care Registry	No								
Yes ACS REGISTRY	Yes								
Yes SMPART GENSURG General Surgery Registry	No								
Yes OP12 HIT Ability electronically receive lab results	Yes								
Yes OP17 Tracking Clinical Results Between Visits	Yes								
Yes OP25 Outpatient Safe Surgery Checklist	Yes								
Yes SMSSCHECK Safe Surgery Checklist	Yes								
<b>Survey of Patient's Experiences - Hospital Consumer Assessment of Healthcare Providers and Systems Su</b>									
↑ HCOMP1A P Patients who reported that their nurses "Always" communicated well	87.2%	82.7%	88.5%	72.4%	80.0%	88.0%	85.6%	86.6%	90.9%
↓ HCOMP1U P Patients who reported that their nurses "Usually" communicated well	9.0%	14.4%	7.3%	18.4%	12.2%	8.0%	8.0%	6.1%	5.8%
↓ HCOMP1 SNP Patients who reported that their nurses "Sometimes" or "Never" communicated well	3.8%	2.9%	4.2%	9.2%	7.8%	4.0%	6.4%	7.3%	3.3%
↑ HCOMP2A P Patients who reported that their doctors "Always" communicated well	72.7%	86.4%	88.5%	66.7%	80.9%	87.5%	88.7%	77.1%	91.7%
↓ HCOMP2U P Patients who reported that their doctors "Usually" communicated well	11.7%	10.7%	11.5%	21.8%	11.2%	10.8%	7.3%	8.4%	2.5%
↓ HCOMP2 SNP Patients who reported that their doctors "Sometimes" or "Never" communicated well	15.6%	2.9%	0.0%	11.5%	7.9%	1.9%	4.0%	14.5%	5.8%
↑ HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	71.8%	82.6%	81.8%	61.1%	80.9%	76.7%	83.6%	85.3%	84.6%
↓ HCOMP3U P Patients who reported that they "Usually" received help as soon as they wanted	17.9%	17.4%	13.6%	22.2%	8.5%	17.0%	13.1%	11.8%	12.3%
↓ HCOMP3 SNP Patients who reported that they "Sometimes" or "Never" received help as soon as they wanted	10.3%	0.0%	4.5%	16.7%	10.6%	8.7%	3.3%	2.9%	3.1%
↑ HCOMP4A P Patients who reported that their pain was "Always" well controlled	72.5%	74.6%	75.0%	64.3%	73.9%	81.0%	--	--	--
↓ HCOMP4U P Patients who reported that their pain was "Usually" well controlled	20.0%	11.9%	13.9%	28.6%	13.0%	16.7%	--	--	--
↓ HCOMP4 SNP Patients who reported that their pain was "Sometimes" or "Never" well controlled	7.5%	13.6%	11.1%	7.1%	13.0%	4.8%	--	--	--
↑ HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them	57.1%	65.4%	84.0%	43.8%	72.7%	65.0%	75.0%	63.6%	73.5%

		Ballad Health									
		Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	
↓	HCOMP5U P Patients who reported that staff “Usually” explained about medicines before giving it to them	17.1%	16.6%	15.5%	16.0%	17.4%	14.7%	15.7%	20.1%	15.7%	
↓	HCOMP5 SNP Patients who reported that staff “Sometimes” or “Never” explained about medicines before giving it to them	18.2%	19.4%	18.6%	19.3%	17.7%	19.5%	18.5%	19.1%	20.9%	
↑	HCLEAN HSPAP Patients who reported that their room and bathroom were “Always” clean	73.5%	71.9%	71.1%	70.9%	74.3%	75.5%	71.4%	72.3%	72.8%	
↓	HCLEAN HSPUP Patients who reported that their room and bathroom were “Usually” clean	16.0%	16.8%	17.0%	18.6%	16.3%	15.0%	17.4%	16.3%	17.6%	
↓	HCLEAN HSPSNP Patients who reported that their room and bathroom were “Sometimes” or “Never” clean	10.6%	11.3%	11.9%	10.5%	9.4%	9.5%	11.2%	11.5%	9.7%	
↑	HQUIETHSP AP Patients who reported that the area around their room was “Always” quiet at night	64.8%	61.4%	60.2%	61.7%	63.8%	66.3%	60.9%	57.5%	58.3%	
↓	HQUIETHSP UP Patients who reported that the area around their room was “Usually” quiet at night	24.4%	28.9%	29.4%	28.4%	29.4%	24.5%	30.5%	32.5%	31.5%	
↓	HQUIETHSP SNP Patients who reported that the area around their room was “Sometimes” or “Never” quiet at night	10.5%	10.7%	9.6%	10.6%	7.2%	9.2%	8.5%	10.0%	10.2%	
↑	HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	86.0%	87.8%	87.5%	87.7%	87.9%	87.7%	86.1%	87.2%	76.8%	
↓	HCOMP6N P Patients who reported that NO, they were not given information about what to do during their recovery at home	14.0%	12.2%	12.5%	12.1%	12.1%	12.3%	13.9%	12.8%	11.0%	
↑	HCOMP7SA Patients who “Strongly Agree” they understood their care when they left the hospital	50.7%	50.8%	51.6%	51.1%	50.3%	52.8%	50.0%	46.4%	50.8%	
↓	HCOMP7A Patients who “Agree” they understood their care when they left the hospital	40.9%	41.5%	39.6%	40.6%	42.6%	39.9%	40.2%	46.3%	41.3%	
↓	HCOMP7D SD Patients who “Disagree” or “Strongly Disagree” they understood their care when they left the hospital	5.8%	5.0%	5.7%	5.2%	5.0%	4.8%	5.2%	4.9%	5.8%	
↓	HHSP RATING06 Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)	9.5%	9.2%	10.0%	10.7%	8.6%	8.1%	7.8%	10.1%	10.8%	
↓	HHSP RATING78 Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)	19.1%	20.1%	18.4%	16.9%	16.3%	22.2%	21.2%	20.3%	18.6%	
↑	HHSP RATING910 Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	68.9%	68.2%	69.3%	69.6%	72.2%	68.3%	67.3%	66.7%	66.8%	
↑	HRECMND DY Patients who reported YES, they would definitely recommend the hospital	71.2%	71.9%	71.1%	70.8%	75.6%	70.7%	70.8%	69.3%	68.2%	
↓	HRECMND PY Patients who reported YES, they would probably recommend the hospital	22.4%	23.3%	22.9%	22.8%	19.4%	25.1%	23.8%	23.2%	25.9%	
↓	HRECMND DN Patients who reported NO, they would probably not or definitely not recommend the hospital	6.4%	6.5%	6.8%	7.2%	4.7%	5.7%	5.4%	7.6%	5.9%	
<b>Timely &amp; Effective care Cataract Surgery Outcome</b>											
↑	OP31 Cataracts Improvement	--	--	--	--	--	--	--	--	--	
<b>Timely &amp; Effective care Colonoscopy follow-up</b>											
↑	OP29 Avg Risk Polyp Surveillance	83.7%	86.4%	84.0%	72.4%	71.9%	97.1%	100.0%	93.5%	--	
↑	OP30 High risk Polyp Surveillance	89.4%	90.0%	93.0%	86.1%	85.2%	88.0%	85.7%	100.0%	--	
<b>Timely &amp; Effective Care Heart Attack</b>											
↓	OP3b Median Time to Transfer AMI	17.3	38.5	18.3	22.1	16.8	37.3	25.0	5.2	13.5	
↓	OP5 Median Time to ECG AMI and Chest Pain	10.5	9.0	8.2	7.5	11.9	7.4	4.4	4.6	6.0	
↑	OP2 Fibrinolytic Therapy 30 minutes	--	--	--	--	--	--	--	--	--	
↑	OP4 Aspirin at Arrival AMI Chest Pain	93.6%	98.9%	100.0%	100.0%	98.7%	98.7%	--	--	--	
<b>Timely &amp; Effective Care Stroke Care</b>											
↑	STK4 Thrombolytic Therapy	--	--	--	--	--	--	--	--	--	
<b>Timely &amp; Effective Care- Emergency Department (ED) Throughput</b>											
↓	EDV Emergency Department Volume	--	--	--	--	--	--	--	--	--	
↓	ED1b ED Door to Transport	273.42	266.06	284.69	271.39	280.79	270.91	260.73	230.47	228.35	
↓	ED2b ED Decision to Transport	89.44	77.05	80.71	94.75	88.19	86.18	96.8	81.7	73.4	
↓	OP18b Avg time ED arrival to discharge	127.03	120.49	119.2	138.86	133.07	17.82	127	225.91	121.95	



FYTD2018 March 2018

Franklin Woods Community Hospital

	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18
↓ HCOMP5U P Patients who reported that staff "Usually" explained about medicines before giving it to them	15.1%	21.4%	10.4%	28.7%	11.8%	15.4%	12.3%	15.7%	15.4%
↓ HCOMP5 SNP Patients who reported that staff "Sometimes" or "Never" explained about medicines before giving it to them	12.7%	10.4%	15.8%	15.7%	15.4%	22.5%	10.2%	16.9%	21.1%
↑ HCLEAN HSPAP Patients who reported that their room and bathroom were "Always" clean	80.9%	90.6%	82.0%	81.7%	83.9%	83.5%	83.3%	86.9%	78.1%
↓ HCLEAN HSPUP Patients who reported that their room and bathroom were "Usually" clean	14.5%	8.3%	9.0%	10.1%	10.3%	8.3%	11.1%	9.3%	18.1%
↓ HCLEAN HSPSNP Patients who reported that their room and bathroom were "Sometimes" or "Never" clean	4.5%	1.0%	9.0%	8.3%	5.7%	8.3%	5.6%	3.7%	3.8%
↑ HQUIETHSP AP Patients who reported that the area around their room was "Always" quiet at night	72.0%	72.2%	74.1%	67.0%	73.6%	74.6%	75.9%	72.9%	74.3%
↓ HQUIETHSP UP Patients who reported that the area around their room was "Usually" quiet at night	24.3%	23.7%	23.5%	28.4%	24.1%	19.7%	20.4%	20.6%	21.9%
↓ HQUIETHSP SNP Patients who reported that the area around their room was "Sometimes" or "Never" quiet at night	3.7%	4.1%	2.4%	4.6%	2.3%	5.7%	3.7%	6.5%	3.8%
↑ HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	86.2%	84.7%	85.3%	87.0%	85.5%	89.1%	87.6%	84.2%	86.4%
↓ HCOMP6N P Patients who reported that NO, they were not given information about what to do during their recovery at home	13.8%	15.3%	14.7%	13.0%	14.5%	10.9%	12.4%	15.8%	13.6%
↑ HCOMP7SA Patients who "Strongly Agree" they understood their care when they left the hospital	58.6%	60.0%	53.3%	59.2%	53.4%	57.5%	60.0%	62.8%	54.3%
↓ HCOMP7A Patients who "Agree" they understood their care when they left the hospital	32.7%	30.7%	34.9%	30.8%	40.6%	32.1%	33.9%	30.0%	37.5%
↓ HCOMP7D SD Patients who "Disagree" or "Strongly Disagree" they understood their care when they left the hospital	5.3%	5.9%	6.1%	5.6%	4.4%	6.4%	3.0%	4.7%	5.4%
↓ HHSP RATING06 Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)	2.8%	5.1%	9.0%	8.2%	4.6%	7.4%	0.9%	9.3%	9.4%
↓ HHSP RATING78 Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)	11.9%	13.3%	19.1%	13.6%	11.5%	10.7%	13.6%	17.6%	10.4%
↑ HHSP RATING910 Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	85.3%	81.6%	71.9%	78.2%	83.9%	81.8%	85.5%	73.1%	80.2%
↑ HRECMND DY Patients who reported YES, they would definitely recommend the hospital	84.3%	86.6%	80.5%	82.6%	87.2%	85.8%	87.3%	81.3%	81.9%
↓ HRECMND PY Patients who reported YES, they would probably recommend the hospital	13.0%	10.3%	13.8%	12.8%	10.5%	8.3%	11.8%	11.2%	12.4%
↓ HRECMND DN Patients who reported NO, they would probably not or definitely not recommend the hospital	2.8%	3.1%	5.7%	4.6%	2.3%	5.8%	0.9%	7.5%	5.7%
<b>Timely &amp; Effective care Cataract Surgery Outcome</b>									
↑ OP31 Cataracts Improvement	--	--	--	--	--	--	--	--	--
<b>Timely &amp; Effective care Colonoscopy follow-up</b>									
↑ OP29 Avg Risk Polyp Surveillance	--	100.0%	--	--	100.0%	100.0%	--	--	--
↑ OP30 High risk Polyp Surveillance	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	--	100.0%	--
<b>Timely &amp; Effective Care Heart Attack</b>									
↓ OP3b Median Time to Transfer AMI	--	--	--	52.0	--	38.0	80.5	--	--
↓ OP5 Median Time to ECG AMI and Chest Pain	15.3	5.8	6.5	8.3	25.8	47.8	7.5	22.5	--
↑ OP2 Fibrinolytic Therapy 30 minutes	--	--	--	--	--	--	--	--	--
↑ OP4 Aspirin at Arrival AMI Chest Pain	100.0%	100.0%	90.0%	100.0%	100.0%	75.0%	100.0%	100.0%	--
<b>Timely &amp; Effective Care Stroke Care</b>									
↑ STK4 Thrombolytic Therapy	--	--	--	--	--	--	--	--	--
<b>Timely &amp; Effective Care- Emergency Department (ED) Throughput</b>									
↓ EDV Emergency Department Volume	MEDIUM								
↓ ED1b ED Door to Transport	256	283	223	241	202	221.5	263.5	251	--
↓ ED2b ED Decision to Transport	86	89	69.5	75	62.5	60.5	86.5	72	--
↓ OP18b Avg time ED arrival to discharge	148	147	141.5	132.5	137	135	162	172	--

		Johnson City Medical Center								
		Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18
↓	HCOMP5U P Patients who reported that staff “Usually” explained about medicines before giving it to them	15.9%	18.7%	19.1%	15.7%	22.4%	13.7%	15.8%	22.9%	18.0%
↓	HCOMP5 SNP Patients who reported that staff “Sometimes” or “Never” explained about medicines before giving it to them	22.0%	23.7%	21.4%	21.7%	22.8%	20.0%	24.1%	20.9%	21.0%
↑	HCLEAN HSPAP Patients who reported that their room and bathroom were “Always” clean	68.8%	64.8%	61.7%	62.1%	65.6%	67.9%	63.5%	66.5%	65.3%
↓	HCLEAN HSPUP Patients who reported that their room and bathroom were “Usually” clean	19.1%	17.6%	20.4%	24.2%	21.9%	19.6%	21.3%	18.3%	19.0%
↓	HCLEAN HSPSNP Patients who reported that their room and bathroom were “Sometimes” or “Never” clean	12.1%	17.6%	17.9%	13.7%	12.6%	12.5%	15.2%	15.2%	15.7%
↑	HQUIETHSP AP Patients who reported that the area around their room was “Always” quiet at night	57.2%	44.4%	51.8%	50.7%	53.3%	56.0%	46.7%	49.8%	48.2%
↓	HQUIETHSP UP Patients who reported that the area around their room was “Usually” quiet at night	29.6%	36.0%	34.2%	32.8%	35.7%	31.2%	41.6%	36.1%	38.0%
↓	HQUIETHSP SNP Patients who reported that the area around their room was “Sometimes” or “Never” quiet at night	13.1%	19.6%	14.0%	16.4%	11.1%	12.8%	11.7%	14.1%	13.9%
↑	HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	87.6%	84.3%	84.9%	84.6%	84.4%	85.6%	85.4%	84.8%	87.0%
↓	HCOMP6N P Patients who reported that NO, they were not given information about what to do during their recovery at home	12.4%	15.7%	15.1%	15.4%	15.6%	14.4%	14.6%	15.2%	13.0%
↑	HCOMP7SA Patients who “Strongly Agree” they understood their care when they left the hospital	51.5%	44.7%	47.2%	45.5%	45.6%	52.4%	48.3%	41.4%	47.3%
↓	HCOMP7A Patients who “Agree” they understood their care when they left the hospital	39.0%	45.7%	40.5%	44.7%	46.3%	38.4%	40.2%	48.1%	42.8%
↓	HCOMP7D SD Patients who “Disagree” or “Strongly Disagree” they understood their care when they left the hospital	6.1%	5.7%	8.6%	6.1%	5.7%	5.4%	7.7%	6.8%	6.7%
↓	HHSP RATING06 Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)	10.1%	15.6%	15.0%	15.2%	10.6%	11.3%	11.4%	12.1%	12.3%
↓	HHSP RATING78 Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)	23.5%	24.6%	22.0%	22.5%	18.4%	18.8%	24.7%	26.1%	24.2%
↑	HHSP RATING910 Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	66.4%	59.8%	63.0%	62.3%	71.0%	70.0%	63.9%	61.9%	63.6%
↑	HRECMND DY Patients who reported YES, they would definitely recommend the hospital	69.0%	58.3%	62.0%	59.3%	70.2%	66.1%	62.0%	64.2%	64.3%
↓	HRECMND PY Patients who reported YES, they would probably recommend the hospital	25.6%	30.6%	28.4%	31.3%	24.4%	26.4%	30.0%	27.6%	29.7%
↓	HRECMND DN Patients who reported NO, they would probably not or definitely not recommend the hospital	5.4%	11.1%	9.6%	9.5%	5.4%	7.4%	8.0%	8.2%	6.0%
<b>Timely &amp; Effective care Cataract Surgery Outcome</b>										
↑	OP31 Cataracts Improvement	--	--	--	--	--	--	--	--	--
<b>Timely &amp; Effective care Colonoscopy follow-up</b>										
↑	OP29 Avg Risk Polyp Surveillance	100.0%	100.0%	--	100.0%	--	100.0%	--	--	--
↑	OP30 High risk Polyp Surveillance	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	--	100.0%	--
<b>Timely &amp; Effective Care Heart Attack</b>										
↓	OP3b Median Time to Transfer AMI	--	--	--	--	--	--	--	--	--
↓	OP5 Median Time to ECG AMI and Chest Pain	--	7.0	--	--	--	--	--	--	--
↑	OP2 Fibrinolytic Therapy 30 minutes	--	--	--	--	--	--	--	--	--
↑	OP4 Aspirin at Arrival AMI Chest Pain	100.0%	100.0%	--	--	--	--	--	--	--
<b>Timely &amp; Effective Care Stroke Care</b>										
↑	STK4 Thrombolytic Therapy	--	--	--	--	--	--	--	--	--
<b>Timely &amp; Effective Care- Emergency Department (ED) Throughput</b>										
↓	EDV Emergency Department Volume	VERY HIGH	VERY HIGH	VERY HIGH	VERY HIGH	VERY HIGH	VERY HIGH	VERY HIGH	VERY HIGH	VERY HIGH
↓	ED1b ED Door to Transport	232	267	267	237	259	258	306	253	--
↓	ED2b ED Decision to Transport	71	78.5	77	98	85	106	132	95.5	--
↓	OP18b Avg time ED arrival to discharge	160	153	149	140	152	156	148	170	--



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		Dickenson County Hospital								
		Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18
↓	HCOMP5U P Patients who reported that staff "Usually" explained about medicines before giving it to them	--	--	0.0%	--	0.0%	--	--	--	--
↓	HCOMP5 SNP Patients who reported that staff "Sometimes" or "Never" explained about medicines before giving it to them	--	--	0.0%	--	--	--	0.0%	--	--
↑	HCLEAN HSPAP Patients who reported that their room and bathroom were "Always" clean	--	100.0%	100.0%	--	100.0%	--	100.0%	--	--
↓	HCLEAN HSPUP Patients who reported that their room and bathroom were "Usually" clean	--	0.0%	0.0%	--	0.0%	--	0.0%	--	--
↓	HCLEAN HSPSNP Patients who reported that their room and bathroom were "Sometimes" or "Never" clean	--	0.0%	0.0%	--	0.0%	--	0.0%	--	--
↑	HQUIETHSP AP Patients who reported that the area around their room was "Always" quiet at night	--	100.0%	100.0%	--	100.0%	--	100.0%	--	--
↓	HQUIETHSP UP Patients who reported that the area around their room was "Usually" quiet at night	--	0.0%	0.0%	--	0.0%	--	0.0%	--	--
↓	HQUIETHSP SNP Patients who reported that the area around their room was "Sometimes" or "Never" quiet at night	--	0.0%	0.0%	--	0.0%	--	0.0%	--	--
↑	HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	--	--	100.0%	--	100.0%	--	100.0%	--	--
↓	HCOMP6N P Patients who reported that NO, they were not given information about what to do during their recovery at home	--	--	0.0%	--	0.0%	--	0.0%	--	--
↑	HCOMP7SA Patients who "Strongly Agree" they understood their care when they left the hospital	--	33.3%	100.0%	--	33.3%	--	16.7%	--	66.7%
↓	HCOMP7A Patients who "Agree" they understood their care when they left the hospital	--	66.7%	0.0%	--	33.3%	--	66.7%	--	--
↓	HCOMP7D SD Patients who "Disagree" or "Strongly Disagree" they understood their care when they left the hospital	--	0.0%	0.0%	--	33.3%	--	0.0%	--	--
↓	HHSP RATING06 Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)	--	100.0%	0.0%	--	0.0%	--	--	0.0%	--
↓	HHSP RATING78 Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)	--	0.0%	0.0%	--	0.0%	--	--	0.0%	--
↑	HHSP RATING910 Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	--	0.0%	100.0%	--	100.0%	--	--	100.0%	--
↑	HRECMND DY Patients who reported YES, they would definitely recommend the hospital	--	100.0%	100.0%	--	100.0%	--	50.0%	--	--
↓	HRECMND PY Patients who reported YES, they would probably recommend the hospital	--	0.0%	0.0%	--	0.0%	--	50.0%	--	--
↓	HRECMND DN Patients who reported NO, they would probably not or definitely not recommend the hospital	--	0.0%	0.0%	--	0.0%	--	0.0%	--	--
<b>Timely &amp; Effective care Cataract Surgery Outcome</b>										
↑	OP31 Cataracts Improvement	--	--	--	--	--	--	--	--	--
<b>Timely &amp; Effective care Colonoscopy follow-up</b>										
↑	OP29 Avg Risk Polyp Surveillance	--	--	--	--	--	--	--	--	--
↑	OP30 High risk Polyp Surveillance	--	--	--	--	--	--	--	--	--
<b>Timely &amp; Effective Care Heart Attack</b>										
↓	OP3b Median Time to Transfer AMI	--	--	--	--	--	--	195.0	--	--
↓	OP5 Median Time to ECG AMI and Chest Pain	25.3	5.8	4.0	16.3	2.3	16.3	10.8	11.5	--
↑	OP2 Fibrinolytic Therapy 30 minutes	--	--	--	--	--	--	--	--	--
↑	OP4 Aspirin at Arrival AMI Chest Pain	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	--
<b>Timely &amp; Effective Care Stroke Care</b>										
↑	STK4 Thrombolytic Therapy	--	--	--	--	--	--	--	--	--
<b>Timely &amp; Effective Care- Emergency Department (ED) Throughput</b>										
↓	EDV Emergency Department Volume	LOW	LOW	LOW	LOW	LOW	LOW	LOW	LOW	LOW
↓	ED1b ED Door to Transport	--	--	96	--	113	64	126	--	--
↓	ED2b ED Decision to Transport	--	--	2	--	4	12	23	--	--
↓	OP18b Avg time ED arrival to discharge	88.5	87	105	118	108	87.5	110	136	--



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Hancock County Hospital

	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18
↓ HCOMP5U P Patients who reported that staff "Usually" explained about medicines before giving it to them	--	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	16.7%	0.0%
↓ HCOMP5 SNP Patients who reported that staff "Sometimes" or "Never" explained about medicines before giving it to them	--	50.0%	50.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
↑ HCLEAN HSPAP Patients who reported that their room and bathroom were "Always" clean	--	100.0%	100.0%	100.0%	66.7%	100.0%	100.0%	100.0%	100.0%
↓ HCLEAN HSPUP Patients who reported that their room and bathroom were "Usually" clean	--	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
↓ HCLEAN HSPSNP Patients who reported that their room and bathroom were "Sometimes" or "Never" clean	--	0.0%	0.0%	0.0%	33.3%	0.0%	--	0.0%	0.0%
↑ HQUIETHSP AP Patients who reported that the area around their room was "Always" quiet at night	--	0.0%	100.0%	50.0%	66.7%	66.7%	100.0%	100.0%	75.0%
↓ HQUIETHSP UP Patients who reported that the area around their room was "Usually" quiet at night	--	100.0%	0.0%	50.0%	33.3%	33.3%	0.0%	0.0%	25.0%
↓ HQUIETHSP SNP Patients who reported that the area around their room was "Sometimes" or "Never" quiet at night	--	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
↑ HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	--	50.0%	50.0%	100.0%	66.7%	100.0%	100.0%	75.0%	100.0%
↓ HCOMP6N P Patients who reported that NO, they were not given information about what to do during their recovery at home	--	50.0%	50.0%	0.0%	33.3%	0.0%	0.0%	25.0%	0.0%
↑ HCOMP7SA Patients who "Strongly Agree" they understood their care when they left the hospital	--	33.3%	60.0%	100.0%	66.7%	37.5%	100.0%	66.7%	41.7%
↓ HCOMP7A Patients who "Agree" they understood their care when they left the hospital	--	33.3%	20.0%	0.0%	0.0%	62.5%	0.0%	33.3%	58.3%
↓ HCOMP7D SD Patients who "Disagree" or "Strongly Disagree" they understood their care when they left the hospital	--	33.3%	20.0%	0.0%	33.3%	0.0%	0.0%	0.0%	0.0%
↓ HHSP RATING06 Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)	--	0.0%	50.0%	0.0%	33.3%	0.0%	0.0%	0.0%	0.0%
↓ HHSP RATING78 Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)	--	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	20.0%	0.0%
↑ HHSP RATING910 Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	--	100.0%	50.0%	100.0%	66.7%	100.0%	100.0%	80.0%	100.0%
↑ HRECMND DY Patients who reported YES, they would definitely recommend the hospital	--	100.0%	50.0%	50.0%	100.0%	33.3%	100.0%	80.0%	100.0%
↓ HRECMND PY Patients who reported YES, they would probably recommend the hospital	--	0.0%	0.0%	50.0%	0.0%	0.0%	0.0%	20.0%	0.0%
↓ HRECMND DN Patients who reported NO, they would probably not or definitely not recommend the hospital	--	0.0%	50.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
<b>Timely &amp; Effective care Cataract Surgery Outcome</b>									
↑ OP31 Cataracts Improvement	--	--	--	--	--	--	--	--	--
<b>Timely &amp; Effective care Colonoscopy follow-up</b>									
↑ OP29 Avg Risk Polyp Surveillance	--	--	--	--	--	--	--	--	--
↑ OP30 High risk Polyp Surveillance	--	--	--	--	--	--	--	--	--
<b>Timely &amp; Effective Care Heart Attack</b>									
↓ OP3b Median Time to Transfer AMI	--	--	--	--	--	--	--	--	--
↓ OP5 Median Time to ECG AMI and Chest Pain	3.5	12.0	34.0	58.0	7.5	11.0	8.8	--	--
↑ OP2 Fibrinolytic Therapy 30 minutes	--	--	--	--	--	--	--	--	--
↑ OP4 Aspirin at Arrival AMI Chest Pain	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	--	--
<b>Timely &amp; Effective Care Stroke Care</b>									
↑ STK4 Thrombolytic Therapy	--	--	--	--	--	--	--	--	--
<b>Timely &amp; Effective Care- Emergency Department (ED) Throughput</b>									
↓ EDV Emergency Department Volume	MEDIUM								
↓ ED1b ED Door to Transport	--	--	--	--	--	--	--	--	--
↓ ED2b ED Decision to Transport	--	--	--	--	--	--	--	--	--
↓ OP18b Avg time ED arrival to discharge	81	137.5	160	106.5	117	133.5	128	--	--



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		Hawkins County Memorial Hospital								
		Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18
↓	HCOMP5U P Patients who reported that staff "Usually" explained about medicines before giving it to them	17.6%	5.0%	20.0%	5.0%	20.0%	0.0%	16.7%	41.7%	29.4%
↓	HCOMP5 SNP Patients who reported that staff "Sometimes" or "Never" explained about medicines before giving it to them	5.9%	35.0%	20.0%	20.0%	0.0%	16.7%	22.2%	8.3%	17.6%
↑	HCLEAN HSPAP Patients who reported that their room and bathroom were "Always" clean	78.6%	78.6%	100.0%	70.6%	88.2%	94.1%	86.4%	75.0%	80.0%
↓	HCLEAN HSPUP Patients who reported that their room and bathroom were "Usually" clean	21.4%	14.3%	0.0%	23.5%	11.8%	5.9%	0.0%	18.8%	13.3%
↓	HCLEAN HSPSNP Patients who reported that their room and bathroom were "Sometimes" or "Never" clean	7.1%	7.1%	0.0%	5.9%	0.0%	0.0%	13.6%	6.3%	6.7%
↑	HQUIETHSP AP Patients who reported that the area around their room was "Always" quiet at night	73.3%	78.6%	90.0%	76.5%	81.3%	75.0%	86.4%	68.8%	73.3%
↓	HQUIETHSP UP Patients who reported that the area around their room was "Usually" quiet at night	20.0%	14.3%	10.0%	5.9%	12.5%	18.8%	9.1%	18.8%	20.0%
↓	HQUIETHSP SNP Patients who reported that the area around their room was "Sometimes" or "Never" quiet at night	6.7%	7.1%	0.0%	17.6%	6.3%	6.3%	4.5%	12.5%	6.7%
↑	HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	79.3%	84.3%	87.5%	93.5%	87.1%	87.5%	89.2%	78.6%	85.2%
↓	HCOMP6N P Patients who reported that NO, they were not given information about what to do during their recovery at home	20.7%	15.7%	12.5%	6.5%	12.9%	12.5%	10.8%	21.4%	14.8%
↑	HCOMP7SA Patients who "Strongly Agree" they understood their care when they left the hospital	59.1%	53.2%	64.0%	53.5%	50.0%	55.8%	50.8%	45.2%	48.8%
↓	HCOMP7A Patients who "Agree" they understood their care when they left the hospital	40.9%	40.3%	32.0%	46.5%	41.3%	41.9%	45.9%	54.8%	36.6%
↓	HCOMP7D SD Patients who "Disagree" or "Strongly Disagree" they understood their care when they left the hospital	0.0%	6.5%	4.0%	0.0%	8.7%	2.3%	3.3%	0.0%	14.6%
↓	HHSP RATING06 Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)	6.7%	7.7%	25.0%	11.8%	17.6%	13.3%	4.8%	7.1%	13.3%
↓	HHSP RATING78 Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)	13.3%	23.1%	0.0%	23.5%	5.9%	20.0%	33.3%	35.7%	13.3%
↑	HHSP RATING910 Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	80.0%	69.2%	75.0%	64.7%	76.5%	66.7%	61.9%	57.1%	73.3%
↑	HRECMND DY Patients who reported YES, they would definitely recommend the hospital	80.0%	65.4%	44.4%	73.3%	73.3%	80.0%	68.4%	64.3%	53.3%
↓	HRECMND PY Patients who reported YES, they would probably recommend the hospital	20.0%	23.1%	44.4%	13.3%	20.0%	20.0%	31.6%	35.7%	40.0%
↓	HRECMND DN Patients who reported NO, they would probably not or definitely not recommend the hospital	0.0%	11.5%	11.1%	13.3%	6.7%	0.0%	0.0%	0.0%	6.7%
<b>Timely &amp; Effective care Cataract Surgery Outcome</b>										
↑	OP31 Cataracts Improvement	--	--	--	--	--	--	--	--	--
<b>Timely &amp; Effective care Colonoscopy follow-up</b>										
↑	OP29 Avg Risk Polyp Surveillance	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	--	--
↑	OP30 High risk Polyp Surveillance	100.0%	100.0%	87.5%	100.0%	100.0%	100.0%	100.0%	--	--
<b>Timely &amp; Effective Care Heart Attack</b>										
↓	OP3b Median Time to Transfer AMI	--	--	26.0	--	36.0	306.0	--	--	--
↓	OP5 Median Time to ECG AMI and Chest Pain	10.0	65.0	9.5	9.0	23.0	39.0	--	--	--
↑	OP2 Fibrinolytic Therapy 30 minutes	--	--	--	--	--	--	--	--	--
↑	OP4 Aspirin at Arrival AMI Chest Pain	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	--	--	--
<b>Timely &amp; Effective Care Stroke Care</b>										
↑	STK4 Thrombolytic Therapy	--	--	--	--	--	--	--	--	--
<b>Timely &amp; Effective Care- Emergency Department (ED) Throughput</b>										
↓	EDV Emergency Department Volume	LOW	LOW	LOW	LOW	LOW	LOW	LOW	LOW	LOW
↓	ED1b ED Door to Transport	216	212.5	236.5	208	205	219	246	--	--
↓	ED2b ED Decision to Transport	38	40	35.5	46	52.5	40	73	--	--
↓	OP18b Avg time ED arrival to discharge	17	12.5	10.5	72	101	81	117	--	--

Holston Valley Medical Center

	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18
↓ HCOMP5U P Patients who reported that staff "Usually" explained about medicines before giving it to them	11.7%	10.8%	15.4%	11.2%	18.9%	12.9%	18.9%	20.7%	14.3%
↓ HCOMP5 SNP Patients who reported that staff "Sometimes" or "Never" explained about medicines before giving it to them	11.7%	16.2%	22.1%	22.5%	12.6%	15.0%	13.1%	21.5%	22.3%
↑ HCLEAN HSPAP Patients who reported that their room and bathroom were "Always" clean	73.5%	66.1%	64.2%	64.8%	67.4%	66.9%	66.7%	69.4%	69.4%
↓ HCLEAN HSPUP Patients who reported that their room and bathroom were "Usually" clean	14.0%	20.3%	20.3%	17.1%	20.9%	19.5%	23.5%	18.8%	13.3%
↓ HCLEAN HSPSNP Patients who reported that their room and bathroom were "Sometimes" or "Never" clean	12.5%	13.6%	15.4%	18.1%	11.6%	13.6%	9.8%	13.9%	12.6%
↑ HQUIETHSP AP Patients who reported that the area around their room was "Always" quiet at night	61.6%	66.1%	56.1%	71.3%	64.1%	64.7%	61.8%	67.0%	67.3%
↓ HQUIETHSP UP Patients who reported that the area around their room was "Usually" quiet at night	23.9%	20.3%	29.3%	19.4%	25.8%	29.4%	28.4%	22.9%	22.7%
↓ HQUIETHSP SNP Patients who reported that the area around their room was "Sometimes" or "Never" quiet at night	14.5%	13.6%	14.6%	9.3%	10.2%	5.9%	9.8%	10.1%	10.0%
↑ HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	85.7%	90.1%	90.7%	87.8%	92.3%	91.5%	90.9%	93.3%	91.8%
↓ HCOMP6N P Patients who reported that NO, they were not given information about what to do during their recovery at home	14.3%	9.9%	9.3%	12.2%	7.7%	8.5%	9.1%	6.7%	8.2%
↑ HCOMP7SA Patients who "Strongly Agree" they understood their care when they left the hospital	50.8%	60.1%	54.8%	53.4%	56.3%	58.6%	55.1%	50.7%	48.5%
↓ HCOMP7A Patients who "Agree" they understood their care when they left the hospital	45.0%	37.8%	42.2%	39.5%	39.4%	38.4%	40.4%	48.0%	46.3%
↓ HCOMP7D SD Patients who "Disagree" or "Strongly Disagree" they understood their care when they left the hospital	4.2%	2.1%	3.0%	7.1%	4.3%	3.0%	4.5%	1.3%	5.2%
↓ HHSP RATING06 Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)	3.6%	5.0%	11.7%	10.3%	7.9%	5.0%	7.8%	5.6%	10.3%
↓ HHSP RATING78 Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)	24.1%	18.5%	21.7%	15.9%	19.8%	14.3%	13.6%	15.9%	18.7%
↑ HHSP RATING910 Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	72.3%	76.5%	66.7%	73.8%	72.2%	80.7%	78.6%	78.5%	71.0%
↑ HRECMND DY Patients who reported YES, they would definitely recommend the hospital	82.1%	81.4%	74.6%	76.5%	75.6%	84.7%	81.4%	77.6%	75.7%
↓ HRECMND PY Patients who reported YES, they would probably recommend the hospital	13.4%	16.9%	20.3%	17.6%	19.5%	14.4%	12.7%	20.6%	15.9%
↓ HRECMND DN Patients who reported NO, they would probably not or definitely not recommend the hospital	4.5%	1.7%	5.1%	5.9%	4.9%	0.8%	5.9%	1.9%	8.4%
<b>Timely &amp; Effective care Cataract Surgery Outcome</b>									
↑ OP31 Cataracts Improvement	--	--	--	--	--	--	--	--	--
<b>Timely &amp; Effective care Colonoscopy follow-up</b>									
↑ OP29 Avg Risk Polyp Surveillance	33.3%	--	100.0%	100.0%	50.0%	100.0%	100.0%	--	--
↑ OP30 High risk Polyp Surveillance	75.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	--	--
<b>Timely &amp; Effective Care Heart Attack</b>									
↓ OP3b Median Time to Transfer AMI	--	--	--	--	--	--	--	--	--
↓ OP5 Median Time to ECG AMI and Chest Pain	--	--	--	--	--	--	16.5	--	--
↑ OP2 Fibrinolytic Therapy 30 minutes	--	--	--	--	--	--	--	--	--
↑ OP4 Aspirin at Arrival AMI Chest Pain	--	--	--	--	--	--	100.0%	--	--
<b>Timely &amp; Effective Care Stroke Care</b>									
↑ STK4 Thrombolytic Therapy	100.0%	80.0%	75.0%	100.0%	60.0%	100.0%	100.0%	--	--
<b>Timely &amp; Effective Care- Emergency Department (ED) Throughput</b>									
↓ EDV Emergency Department Volume	VERY HIGH								
↓ ED1b ED Door to Transport	375	328	435.5	457	438	398	429	--	--
↓ ED2b ED Decision to Transport	128.5	92	125.5	176	159.5	111	176	--	--
↓ OP18b Avg time ED arrival to discharge	188	165	165	201	146	142.5	194.5	--	--



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		Indian Path Medical Center								
		Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18
↓	HCOMP5U P Patients who reported that staff "Usually" explained about medicines before giving it to them	28.6%	18.0%	14.5%	14.1%	15.2%	21.7%	10.8%	24.1%	15.6%
↓	HCOMP5 SNP Patients who reported that staff "Sometimes" or "Never" explained about medicines before giving it to them	16.1%	16.4%	19.3%	25.0%	10.6%	28.3%	20.0%	20.7%	19.5%
↑	HCLEAN HSPAP Patients who reported that their room and bathroom were "Always" clean	75.5%	79.0%	90.9%	70.2%	87.5%	80.3%	82.5%	81.4%	78.8%
↓	HCLEAN HSPUP Patients who reported that their room and bathroom were "Usually" clean	15.1%	16.1%	6.1%	28.1%	10.9%	13.1%	12.3%	15.3%	16.7%
↓	HCLEAN HSPSNP Patients who reported that their room and bathroom were "Sometimes" or "Never" clean	9.4%	4.8%	3.0%	1.8%	1.6%	6.6%	5.3%	3.4%	4.5%
↑	HQUIETHSP AP Patients who reported that the area around their room was "Always" quiet at night	64.8%	59.0%	69.7%	66.1%	67.2%	63.9%	69.6%	59.6%	70.8%
↓	HQUIETHSP UP Patients who reported that the area around their room was "Usually" quiet at night	27.8%	36.1%	25.8%	28.6%	25.0%	24.6%	17.9%	31.6%	23.1%
↓	HQUIETHSP SNP Patients who reported that the area around their room was "Sometimes" or "Never" quiet at night	7.4%	4.9%	4.5%	5.4%	7.8%	11.5%	12.5%	8.8%	6.2%
↑	HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	85.9%	85.7%	92.9%	90.2%	89.9%	83.5%	83.8%	81.7%	85.1%
↓	HCOMP6N P Patients who reported that NO, they were not given information about what to do during their recovery at home	14.1%	14.3%	7.1%	9.8%	10.1%	16.5%	16.2%	18.3%	14.9%
↑	HCOMP7SA Patients who "Strongly Agree" they understood their care when they left the hospital	49.7%	50.6%	60.3%	46.4%	60.2%	46.4%	50.6%	39.3%	48.2%
↓	HCOMP7A Patients who "Agree" they understood their care when they left the hospital	38.7%	39.4%	30.7%	39.2%	34.2%	38.8%	35.5%	50.3%	42.6%
↓	HCOMP7D SD Patients who "Disagree" or "Strongly Disagree" they understood their care when they left the hospital	6.7%	3.3%	4.2%	9.0%	1.0%	9.8%	9.6%	4.4%	5.1%
↓	HHSP RATING06 Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)	11.1%	4.9%	4.7%	8.9%	0.0%	11.3%	16.4%	6.6%	9.2%
↓	HHSP RATING78 Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)	11.1%	18.0%	18.8%	8.9%	16.7%	14.5%	16.4%	14.8%	24.6%
↑	HHSP RATING910 Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	77.8%	77.0%	76.6%	82.1%	83.3%	74.2%	67.3%	78.7%	66.2%
↑	HRECMND DY Patients who reported YES, they would definitely recommend the hospital	83.3%	82.3%	74.6%	83.3%	86.2%	77.4%	72.7%	82.0%	72.3%
↓	HRECMND PY Patients who reported YES, they would probably recommend the hospital	11.1%	12.9%	23.8%	9.3%	13.8%	14.5%	16.4%	14.8%	21.5%
↓	HRECMND DN Patients who reported NO, they would probably not or definitely not recommend the hospital	5.6%	4.8%	1.6%	7.4%	0.0%	8.1%	10.9%	3.3%	6.2%
<b>Timely &amp; Effective care Cataract Surgery Outcome</b>										
↑	OP31 Cataracts Improvement	--	--	--	--	--	--	--	--	--
<b>Timely &amp; Effective care Colonoscopy follow-up</b>										
↑	OP29 Avg Risk Polyp Surveillance	--	100.0%	100.0%	100.0%	--	100.0%	--	--	--
↑	OP30 High risk Polyp Surveillance	--	100.0%	--	100.0%	100.0%	--	--	--	--
<b>Timely &amp; Effective Care Heart Attack</b>										
↓	OP3b Median Time to Transfer AMI	--	--	--	--	--	--	--	--	--
↓	OP5 Median Time to ECG AMI and Chest Pain	30.0	--	--	10.0	82.0	--	--	3.0	--
↑	OP2 Fibrinolytic Therapy 30 minutes	--	--	--	--	--	--	--	--	--
↑	OP4 Aspirin at Arrival AMI Chest Pain	100.0%	--	--	100.0%	100.0%	--	--	100.0%	--
<b>Timely &amp; Effective Care Stroke Care</b>										
↑	STK4 Thrombolytic Therapy	--	--	--	--	--	--	--	--	--
<b>Timely &amp; Effective Care- Emergency Department (ED) Throughput</b>										
↓	EDV Emergency Department Volume	MEDIUM	MEDIUM	MEDIUM	MEDIUM	MEDIUM	MEDIUM	MEDIUM	MEDIUM	MEDIUM
↓	ED1b ED Door to Transport	221	237	226	197	199	233	228	222	--
↓	ED2b ED Decision to Transport	87.5	69	60	60	51	74	70	66.5	--
↓	OP18b Avg time ED arrival to discharge	121	130.5	132	124	125	115	142	133	--



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		Lonesome Pine Hospital								
		Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18
↓	HCOMP5U P Patients who reported that staff "Usually" explained about medicines before giving it to them	7.9%	12.5%	8.3%	15.0%	0.0%	7.4%	17.9%	9.1%	5.0%
↓	HCOMP5 SNP Patients who reported that staff "Sometimes" or "Never" explained about medicines before giving it to them	5.3%	15.6%	19.4%	10.0%	27.8%	7.6%	14.3%	18.2%	17.5%
↑	HCLEAN HSPAP Patients who reported that their room and bathroom were "Always" clean	84.6%	82.4%	81.0%	81.3%	86.2%	91.4%	75.8%	62.5%	79.4%
↓	HCLEAN HSPUP Patients who reported that their room and bathroom were "Usually" clean	5.1%	11.8%	9.5%	9.4%	10.3%	5.7%	12.1%	16.7%	18.0%
↓	HCLEAN HSPSNP Patients who reported that their room and bathroom were "Sometimes" or "Never" clean	10.3%	5.9%	9.5%	9.4%	3.4%	2.9%	12.1%	20.8%	2.9%
↑	HQUIETHSP AP Patients who reported that the area around their room was "Always" quiet at night	79.5%	71.4%	65.1%	84.4%	75.9%	67.6%	81.8%	68.0%	70.6%
↓	HQUIETHSP UP Patients who reported that the area around their room was "Usually" quiet at night	15.4%	14.3%	27.9%	12.5%	10.3%	24.3%	12.1%	20.0%	20.6%
↓	HQUIETHSP SNP Patients who reported that the area around their room was "Sometimes" or "Never" quiet at night	5.1%	14.3%	7.0%	3.1%	13.8%	8.1%	6.1%	12.0%	8.8%
↑	HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	92.6%	88.6%	77.0%	90.6%	81.8%	84.8%	82.0%	80.0%	89.1%
↓	HCOMP6N P Patients who reported that NO, they were not given information about what to do during their recovery at home	7.4%	11.4%	23.0%	9.4%	18.2%	15.2%	18.0%	20.0%	10.9%
↑	HCOMP7SA Patients who "Strongly Agree" they understood their care when they left the hospital	52.8%	50.0%	44.6%	71.6%	28.2%	39.8%	41.1%	44.4%	47.7%
↓	HCOMP7A Patients who "Agree" they understood their care when they left the hospital	41.5%	47.0%	47.3%	25.7%	64.1%	58.1%	50.0%	47.2%	47.7%
↓	HCOMP7D SD Patients who "Disagree" or "Strongly Disagree" they understood their care when they left the hospital	5.7%	3.0%	8.0%	2.7%	7.7%	2.2%	8.9%	8.3%	4.5%
↓	HHSP RATING06 Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)	7.9%	5.7%	11.9%	3.2%	7.1%	5.7%	12.1%	8.0%	6.5%
↓	HHSP RATING78 Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)	28.9%	20.0%	26.2%	12.9%	39.3%	25.7%	12.1%	36.0%	19.4%
↑	HHSP RATING910 Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	63.2%	74.3%	61.9%	83.9%	53.6%	68.6%	75.8%	56.0%	74.2%
↑	HRECMND DY Patients who reported YES, they would definitely recommend the hospital	73.0%	72.7%	69.0%	83.9%	63.0%	84.8%	68.8%	64.0%	75.9%
↓	HRECMND PY Patients who reported YES, they would probably recommend the hospital	18.9%	24.2%	21.4%	12.9%	29.6%	12.1%	21.9%	28.0%	20.7%
↓	HRECMND DN Patients who reported NO, they would probably not or definitely not recommend the hospital	8.1%	3.0%	9.5%	3.2%	7.4%	3.0%	9.4%	8.0%	3.4%
<b>Timely &amp; Effective care Cataract Surgery Outcome</b>										
↑	OP31 Cataracts Improvement	--	--	--	--	--	--	--	--	--
<b>Timely &amp; Effective care Colonoscopy follow-up</b>										
↑	OP29 Avg Risk Polyp Surveillance	50.0%	60.0%	25.0%	0.0%	0.0%	100.0%	100.0%	--	--
↑	OP30 High risk Polyp Surveillance	60.0%	83.3%	75.0%	60.0%	0.0%	100.0%	60.0%	--	--
<b>Timely &amp; Effective Care Heart Attack</b>										
↓	OP3b Median Time to Transfer AMI	88.0	--	0.0	66.0	--	76.0	--	--	--
↓	OP5 Median Time to ECG AMI and Chest Pain	6.5	11.0	28.0	5.0	10.0	3.5	11.0	--	--
↑	OP2 Fibrinolytic Therapy 30 minutes	--	--	--	--	--	--	--	--	--
↑	OP4 Aspirin at Arrival AMI Chest Pain	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	--	--
<b>Timely &amp; Effective Care Stroke Care</b>										
↑	STK4 Thrombolytic Therapy	--	--	--	--	--	--	--	--	--
<b>Timely &amp; Effective Care- Emergency Department (ED) Throughput</b>										
↓	EDV Emergency Department Volume	MEDIUM	MEDIUM	MEDIUM	MEDIUM	MEDIUM	MEDIUM	MEDIUM	MEDIUM	MEDIUM
↓	ED1b ED Door to Transport	239	226	224	257	212	255	239	--	--
↓	ED2b ED Decision to Transport	54	37	59	61	35	52	77	--	--
↓	OP18b Avg time ED arrival to discharge	152.5	144	86.5	124.5	115	109.5	95	--	--

		Norton Community Hospital								
		Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18
↓	HCOMP5U P Patients who reported that staff "Usually" explained about medicines before giving it to them	18.9%	4.8%	28.0%	22.2%	10.3%	8.7%	25.6%	24.4%	5.7%
↓	HCOMP5 SNP Patients who reported that staff "Sometimes" or "Never" explained about medicines before giving it to them	10.8%	16.7%	12.0%	11.1%	10.3%	30.4%	17.9%	20.0%	14.3%
↑	HCLEAN HSPAP Patients who reported that their room and bathroom were "Always" clean	73.0%	70.3%	85.7%	96.7%	75.7%	86.2%	65.6%	78.9%	72.7%
↓	HCLEAN HSPUP Patients who reported that their room and bathroom were "Usually" clean	8.1%	21.6%	9.5%	0.0%	18.9%	6.9%	21.9%	18.4%	24.2%
↓	HCLEAN HSPSNP Patients who reported that their room and bathroom were "Sometimes" or "Never" clean	18.9%	8.1%	4.8%	3.3%	5.4%	6.9%	12.5%	2.6%	3.0%
↑	HQUIETHSP AP Patients who reported that the area around their room was "Always" quiet at night	69.2%	43.2%	57.1%	65.5%	56.8%	64.3%	59.4%	48.6%	57.6%
↓	HQUIETHSP UP Patients who reported that the area around their room was "Usually" quiet at night	20.5%	43.2%	38.1%	24.1%	40.5%	17.9%	31.3%	48.6%	24.2%
↓	HQUIETHSP SNP Patients who reported that the area around their room was "Sometimes" or "Never" quiet at night	10.3%	13.5%	4.8%	10.3%	2.7%	17.9%	9.4%	2.7%	18.2%
↑	HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	78.9%	87.1%	85.7%	88.2%	81.0%	82.6%	76.7%	85.5%	81.7%
↓	HCOMP6N P Patients who reported that NO, they were not given information about what to do during their recovery at home	21.1%	12.9%	14.3%	11.8%	19.0%	17.4%	23.3%	14.5%	18.3%
↑	HCOMP7SA Patients who "Strongly Agree" they understood their care when they left the hospital	47.8%	46.7%	38.1%	53.9%	46.3%	41.9%	36.5%	45.6%	48.5%
↓	HCOMP7A Patients who "Agree" they understood their care when they left the hospital	42.5%	41.0%	52.4%	40.4%	44.4%	50.0%	56.3%	49.1%	43.4%
↓	HCOMP7D SD Patients who "Disagree" or "Strongly Disagree" they understood their care when they left the hospital	6.2%	8.6%	6.3%	2.2%	6.5%	5.8%	5.2%	1.8%	6.1%
↓	HHSP RATING06 Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)	10.3%	16.7%	9.5%	3.3%	8.6%	0.0%	9.4%	7.9%	15.2%
↓	HHSP RATING78 Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)	23.1%	8.3%	28.6%	20.0%	22.9%	28.6%	25.0%	13.2%	18.2%
↑	HHSP RATING910 Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	66.7%	75.0%	61.9%	76.7%	68.6%	71.4%	65.6%	78.9%	66.7%
↑	HRECMND DY Patients who reported YES, they would definitely recommend the hospital	57.9%	65.7%	47.6%	66.7%	67.6%	78.6%	62.5%	78.9%	62.5%
↓	HRECMND PY Patients who reported YES, they would probably recommend the hospital	36.8%	25.7%	42.9%	33.3%	23.5%	17.9%	31.3%	13.2%	37.5%
↓	HRECMND DN Patients who reported NO, they would probably not or definitely not recommend the hospital	5.3%	8.6%	9.5%	0.0%	8.8%	3.6%	6.3%	7.9%	0.0%
<b>Timely &amp; Effective care Cataract Surgery Outcome</b>										
↑	OP31 Cataracts Improvement	--	--	--	--	--	--	--	--	--
<b>Timely &amp; Effective care Colonoscopy follow-up</b>										
↑	OP29 Avg Risk Polyp Surveillance	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	--	100.0%	--
↑	OP30 High risk Polyp Surveillance	--	--	--	--	--	--	--	--	--
<b>Timely &amp; Effective Care Heart Attack</b>										
↓	OP3b Median Time to Transfer AMI	--	58.0	202.0	--	--	--	59.0	--	--
↓	OP5 Median Time to ECG AMI and Chest Pain	16.5	7.8	8.0	5.8	6.5	9.0	8.3	9.5	--
↑	OP2 Fibrinolytic Therapy 30 minutes	0.0%	--	--	--	--	--	--	--	--
↑	OP4 Aspirin at Arrival AMI Chest Pain	85.7%	95.2%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	--
<b>Timely &amp; Effective Care Stroke Care</b>										
↑	STK4 Thrombolytic Therapy	--	--	--	--	--	--	--	--	--
<b>Timely &amp; Effective Care- Emergency Department (ED) Throughput</b>										
↓	EDV Emergency Department Volume	MEDIUM	MEDIUM	MEDIUM	MEDIUM	MEDIUM	MEDIUM	MEDIUM	MEDIUM	MEDIUM
↓	ED1b ED Door to Transport	230.5	219	198.5	246.5	233	209	210	226	--
↓	ED2b ED Decision to Transport	72	66	69	61.5	58	59.5	54	50	--
↓	OP18b Avg time ED arrival to discharge	157	141	143	145.5	154	152.5	144	146	--

		Bristol Regional Medical Center									
		Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	
↓	HCOMP5U P Patients who reported that staff "Usually" explained about medicines before giving it to them	21.8%	10.1%	10.5%	8.3%	18.4%	15.5%	13.6%	14.7%	13.5%	
↓	HCOMP5 SNP Patients who reported that staff "Sometimes" or "Never" explained about medicines before giving it to them	19.8%	21.8%	10.5%	19.0%	18.4%	21.1%	22.0%	14.7%	18.9%	
↑	HCLEAN HSPAP Patients who reported that their room and bathroom were "Always" clean	69.5%	65.7%	60.2%	71.7%	66.7%	75.0%	62.6%	63.3%	69.8%	
↓	HCLEAN HSPUP Patients who reported that their room and bathroom were "Usually" clean	16.2%	17.5%	24.3%	16.0%	15.3%	13.0%	21.4%	19.3%	17.2%	
↓	HCLEAN HSPSNP Patients who reported that their room and bathroom were "Sometimes" or "Never" clean	14.3%	16.8%	15.5%	12.3%	18.0%	12.0%	16.0%	17.4%	12.9%	
↑	HQUIETHSP AP Patients who reported that the area around their room was "Always" quiet at night	66.0%	69.6%	58.7%	65.4%	67.5%	67.0%	72.3%	65.8%	67.2%	
↓	HQUIETHSP UP Patients who reported that the area around their room was "Usually" quiet at night	18.4%	20.3%	30.8%	26.2%	26.3%	24.0%	16.9%	26.1%	18.1%	
↓	HQUIETHSP SNP Patients who reported that the area around their room was "Sometimes" or "Never" quiet at night	15.5%	10.1%	10.6%	8.4%	6.1%	9.0%	10.8%	8.1%	14.7%	
↑	HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	90.2%	92.6%	89.9%	90.6%	91.4%	91.9%	84.3%	90.0%	88.8%	
↓	HCOMP6N P Patients who reported that NO, they were not given information about what to do during their recovery at home	9.8%	7.4%	10.1%	7.9%	8.6%	8.1%	15.7%	10.0%	11.2%	
↑	HCOMP7SA Patients who "Strongly Agree" they understood their care when they left the hospital	53.4%	60.1%	51.7%	58.9%	55.2%	56.6%	55.6%	49.8%	58.2%	
↓	HCOMP7A Patients who "Agree" they understood their care when they left the hospital	43.1%	37.2%	42.4%	39.1%	39.7%	42.3%	40.3%	44.4%	39.0%	
↓	HCOMP7D SD Patients who "Disagree" or "Strongly Disagree" they understood their care when they left the hospital	3.4%	2.7%	3.1%	2.0%	5.1%	1.1%	4.1%	5.8%	2.7%	
↓	HHSP RATING06 Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)	7.6%	8.7%	5.8%	5.6%	8.2%	4.1%	5.6%	8.3%	7.8%	
↓	HHSP RATING78 Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)	23.8%	20.3%	11.5%	18.7%	13.6%	16.3%	15.9%	16.5%	18.1%	
↑	HHSP RATING910 Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	68.6%	71.0%	82.7%	75.7%	78.2%	79.6%	78.6%	75.2%	74.1%	
↑	HRECMND DY Patients who reported YES, they would definitely recommend the hospital	69.9%	76.5%	83.5%	78.6%	80.0%	81.4%	83.6%	78.9%	81.6%	
↓	HRECMND PY Patients who reported YES, they would probably recommend the hospital	25.2%	21.3%	11.7%	15.5%	13.6%	17.5%	12.5%	18.3%	14.0%	
↓	HRECMND DN Patients who reported NO, they would probably not or definitely not recommend the hospital	4.9%	2.2%	4.9%	5.8%	6.4%	1.0%	3.9%	2.8%	4.4%	
<b>Timely &amp; Effective care Cataract Surgery Outcome</b>											
↑	OP31 Cataracts Improvement	--	--	--	--	--	--	--	--	--	
<b>Timely &amp; Effective care Colonoscopy follow-up</b>											
↑	OP29 Avg Risk Polyp Surveillance	--	--	--	0.0%	100.0%	100.0%	--	0.0%	--	
↑	OP30 High risk Polyp Surveillance	--	--	--	33.3%	100.0%	100.0%	50.0%	--	--	
<b>Timely &amp; Effective Care Heart Attack</b>											
↓	OP3b Median Time to Transfer AMI	--	--	--	--	--	--	--	--	--	
↓	OP5 Median Time to ECG AMI and Chest Pain	--	--	--	--	2.0	--	6.0	--	--	
↑	OP2 Fibrinolytic Therapy 30 minutes	--	--	--	--	--	--	--	--	--	
↑	OP4 Aspirin at Arrival AMI Chest Pain	--	--	--	--	100.0%	--	100.0%	--	--	
<b>Timely &amp; Effective Care Stroke Care</b>											
↑	STK4 Thrombolytic Therapy	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	--	--	
<b>Timely &amp; Effective Care- Emergency Department (ED) Throughput</b>											
↓	EDV Emergency Department Volume	HIGH	HIGH	HIGH	HIGH	HIGH	HIGH	HIGH	HIGH	HIGH	
↓	ED1b ED Door to Transport	1	1	1	1	1	1	1	1	1	
↓	ED2b ED Decision to Transport	1	1	1	1	1	1	1	1	1	
↓	OP18b Avg time ED arrival to discharge	149	185	136	139.5	158.5	128.5	159.5	--	--	

		Johnston Memorial Hospital								
		Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18
↓	HCOMP5U P Patients who reported that staff "Usually" explained about medicines before giving it to them	23.2%	21.1%	20.2%	20.7%	16.1%	17.9%	18.4%	19.6%	18.5%
↓	HCOMP5 SNP Patients who reported that staff "Sometimes" or "Never" explained about medicines before giving it to them	23.2%	15.6%	21.1%	17.2%	12.5%	25.6%	21.9%	24.1%	24.1%
↑	HCLEAN HSPAP Patients who reported that their room and bathroom were "Always" clean	68.4%	66.7%	70.5%	76.5%	78.0%	64.5%	70.3%	68.8%	78.8%
↓	HCLEAN HSPUP Patients who reported that their room and bathroom were "Usually" clean	21.4%	21.9%	23.2%	19.8%	16.0%	25.8%	18.8%	17.2%	16.3%
↓	HCLEAN HSPSNP Patients who reported that their room and bathroom were "Sometimes" or "Never" clean	10.2%	11.5%	6.3%	3.7%	6.0%	9.7%	10.9%	14.0%	5.0%
↑	HQUIETHSP AP Patients who reported that the area around their room was "Always" quiet at night	59.4%	57.3%	56.7%	60.8%	60.0%	58.6%	68.0%	58.4%	62.0%
↓	HQUIETHSP UP Patients who reported that the area around their room was "Usually" quiet at night	29.2%	38.2%	34.0%	29.1%	33.0%	29.3%	25.8%	31.5%	30.4%
↓	HQUIETHSP SNP Patients who reported that the area around their room was "Sometimes" or "Never" quiet at night	11.5%	4.5%	9.3%	10.1%	7.0%	12.1%	6.2%	10.1%	7.6%
↑	HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	75.5%	87.5%	87.4%	89.3%	89.9%	88.5%	87.8%	90.0%	91.3%
↓	HCOMP6N P Patients who reported that NO, they were not given information about what to do during their recovery at home	24.5%	12.5%	12.6%	10.7%	10.1%	11.5%	12.2%	10.0%	8.7%
↑	HCOMP7SA Patients who "Strongly Agree" they understood their care when they left the hospital	38.2%	37.8%	52.8%	41.1%	46.2%	47.8%	40.1%	40.3%	51.5%
↓	HCOMP7A Patients who "Agree" they understood their care when they left the hospital	45.6%	52.2%	37.9%	49.4%	45.5%	44.0%	51.0%	51.3%	41.1%
↓	HCOMP7D SD Patients who "Disagree" or "Strongly Disagree" they understood their care when they left the hospital	12.4%	7.2%	5.7%	5.4%	3.8%	6.0%	4.8%	6.2%	5.4%
↓	HHSP RATING06 Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)	19.4%	6.3%	8.5%	17.9%	10.0%	9.7%	7.2%	16.1%	12.3%
↓	HHSP RATING78 Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)	21.4%	26.3%	20.2%	14.3%	18.0%	30.6%	28.9%	19.4%	12.3%
↑	HHSP RATING910 Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	59.2%	67.4%	71.3%	67.9%	72.0%	59.7%	63.9%	64.5%	75.3%
↑	HRECMND DY Patients who reported YES, they would definitely recommend the hospital	54.6%	66.7%	64.6%	65.5%	75.0%	62.9%	67.4%	58.2%	66.7%
↓	HRECMND PY Patients who reported YES, they would probably recommend the hospital	30.9%	26.9%	30.2%	23.8%	22.9%	29.0%	28.4%	28.6%	27.2%
↓	HRECMND DN Patients who reported NO, they would probably not or definitely not recommend the hospital	14.4%	6.5%	5.2%	10.7%	2.1%	8.1%	4.2%	13.2%	6.2%
<b>Timely &amp; Effective care Cataract Surgery Outcome</b>										
↑	OP31 Cataracts Improvement	--	--	--	--	--	--	--	--	--
<b>Timely &amp; Effective care Colonoscopy follow-up</b>										
↑	OP29 Avg Risk Polyp Surveillance	--	--	--	--	--	--	--	100.0%	--
↑	OP30 High risk Polyp Surveillance	--	--	--	--	--	--	--	--	--
<b>Timely &amp; Effective Care Heart Attack</b>										
↓	OP3b Median Time to Transfer AMI	--	--	--	--	23.0	--	--	--	--
↓	OP5 Median Time to ECG AMI and Chest Pain	34.0	3.0	4.0	5.0	0.0	4.0	4.0	0.0	--
↑	OP2 Fibrinolytic Therapy 30 minutes	--	--	--	--	--	--	--	--	--
↑	OP4 Aspirin at Arrival AMI Chest Pain	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	--
<b>Timely &amp; Effective Care Stroke Care</b>										
↑	STK4 Thrombolytic Therapy	--	--	--	--	--	--	--	--	--
<b>Timely &amp; Effective Care- Emergency Department (ED) Throughput</b>										
↓	EDV Emergency Department Volume	HIGH	HIGH	HIGH	HIGH	HIGH	HIGH	HIGH	HIGH	HIGH
↓	ED1b ED Door to Transport	285	262	265.5	245	235.5	245	314	255	--
↓	ED2b ED Decision to Transport	111	97	84.5	80	82	87	108	112	--
↓	OP18b Avg time ED arrival to discharge	172.5	161.5	161	150	139	148	162	153	--



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Smyth County Community Hospital

	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18
↓ HCOMP5U P Patients who reported that staff "Usually" explained about medicines before giving it to them	17.4%	27.3%	13.8%	3.6%	13.6%	15.0%	6.9%	16.7%	11.5%
↓ HCOMP5 SNP Patients who reported that staff "Sometimes" or "Never" explained about medicines before giving it to them	21.7%	9.1%	27.6%	10.7%	40.9%	17.5%	6.9%	13.3%	30.8%
↑ HCLEAN HSPAP Patients who reported that their room and bathroom were "Always" clean	85.7%	88.9%	88.0%	76.2%	81.8%	96.0%	90.5%	68.4%	88.5%
↓ HCLEAN HSPUP Patients who reported that their room and bathroom were "Usually" clean	9.5%	5.6%	4.0%	14.3%	13.6%	4.0%	9.5%	21.1%	11.5%
↓ HCLEAN HSPSNP Patients who reported that their room and bathroom were "Sometimes" or "Never" clean	4.8%	5.6%	8.0%	9.5%	4.5%	0.0%	0.0%	10.5%	0.0%
↑ HQUIETHSP AP Patients who reported that the area around their room was "Always" quiet at night	81.0%	77.8%	65.2%	61.9%	63.6%	70.8%	81.0%	57.9%	60.0%
↓ HQUIETHSP UP Patients who reported that the area around their room was "Usually" quiet at night	19.0%	22.2%	26.1%	28.6%	36.4%	25.0%	14.3%	36.8%	36.0%
↓ HQUIETHSP SNP Patients who reported that the area around their room was "Sometimes" or "Never" quiet at night	0.0%	0.0%	8.7%	9.5%	0.0%	4.2%	4.8%	5.3%	4.0%
↑ HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	97.3%	97.1%	87.8%	85.3%	97.2%	87.5%	94.9%	84.4%	81.3%
↓ HCOMP6N P Patients who reported that NO, they were not given information about what to do during their recovery at home	2.7%	2.9%	12.2%	14.7%	2.8%	12.5%	5.1%	15.6%	18.8%
↑ HCOMP7SA Patients who "Strongly Agree" they understood their care when they left the hospital	46.8%	44.4%	72.2%	47.6%	54.0%	74.7%	59.1%	49.1%	44.7%
↓ HCOMP7A Patients who "Agree" they understood their care when they left the hospital	50.0%	46.3%	23.6%	44.4%	36.5%	20.0%	36.4%	42.1%	46.1%
↓ HCOMP7D SD Patients who "Disagree" or "Strongly Disagree" they understood their care when they left the hospital	0.0%	3.7%	2.8%	3.2%	4.8%	4.0%	0.0%	3.5%	6.6%
↓ HHSP RATING06 Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)	4.8%	0.0%	4.0%	9.5%	4.8%	4.0%	9.1%	0.0%	8.0%
↓ HHSP RATING78 Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)	4.8%	5.6%	16.0%	9.5%	9.5%	16.0%	9.1%	11.1%	16.0%
↑ HHSP RATING910 Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	90.5%	94.4%	80.0%	81.0%	85.7%	80.0%	81.8%	88.9%	76.0%
↑ HRECMND DY Patients who reported YES, they would definitely recommend the hospital	71.4%	83.3%	84.0%	70.0%	85.7%	68.0%	81.8%	73.7%	72.0%
↓ HRECMND PY Patients who reported YES, they would probably recommend the hospital	28.6%	16.7%	12.0%	25.0%	9.5%	32.0%	18.2%	26.3%	20.0%
↓ HRECMND DN Patients who reported NO, they would probably not or definitely not recommend the hospital	0.0%	0.0%	4.0%	5.0%	4.8%	0.0%	0.0%	0.0%	8.0%
<b>Timely &amp; Effective care Cataract Surgery Outcome</b>									
↑ OP31 Cataracts Improvement	--	--	--	--	--	--	--	--	--
<b>Timely &amp; Effective care Colonoscopy follow-up</b>									
↑ OP29 Avg Risk Polyp Surveillance	--	100.0%	100.0%	100.0%	100.0%	100.0%	--	100.0%	--
↑ OP30 High risk Polyp Surveillance	--	100.0%	100.0%	90.9%	100.0%	84.6%	--	--	--
<b>Timely &amp; Effective Care Heart Attack</b>									
↓ OP3b Median Time to Transfer AMI	58.0	120.0	--	178.5	--	74.0	--	36.5	--
↓ OP5 Median Time to ECG AMI and Chest Pain	5.0	24.0	8.5	3.5	2.0	5.0	8.8	3.5	--
↑ OP2 Fibrinolytic Therapy 30 minutes	--	--	--	--	--	--	--	--	--
↑ OP4 Aspirin at Arrival AMI Chest Pain	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	--
<b>Timely &amp; Effective Care Stroke Care</b>									
↑ STK4 Thrombolytic Therapy	--	--	--	--	--	--	--	--	--
<b>Timely &amp; Effective Care- Emergency Department (ED) Throughput</b>									
↓ EDV Emergency Department Volume	LOW								
↓ ED1b ED Door to Transport	205	176.5	188	175.5	192	181.5	167	184	--
↓ ED2b ED Decision to Transport	45	30.5	45	50	41.5	41	32	43	--
↓ OP18b Avg time ED arrival to discharge	97	85	94	112	83	93	120	109	--



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Russell County Medical Center

	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18
↓ HCOMP5U P Patients who reported that staff "Usually" explained about medicines before giving it to them	25.0%	0.0%	0.0%	0.0%	13.6%	25.0%	38.9%	37.5%	14.3%
↓ HCOMP5 SNP Patients who reported that staff "Sometimes" or "Never" explained about medicines before giving it to them	12.5%	0.0%	0.0%	25.0%	18.2%	0.0%	16.7%	0.0%	35.7%
↑ HCLEAN HSPAP Patients who reported that their room and bathroom were "Always" clean	87.5%	75.0%	75.0%	81.8%	86.7%	60.0%	85.0%	87.5%	80.0%
↓ HCLEAN HSPUP Patients who reported that their room and bathroom were "Usually" clean	12.5%	0.0%	25.0%	18.2%	13.3%	40.0%	5.0%	0.0%	20.0%
↓ HCLEAN HSPSNP Patients who reported that their room and bathroom were "Sometimes" or "Never" clean	0.0%	25.0%	0.0%	0.0%	0.0%	0.0%	10.0%	12.5%	0.0%
↑ HQUIETHSP AP Patients who reported that the area around their room was "Always" quiet at night	75.0%	100.0%	62.5%	54.5%	56.3%	60.0%	78.9%	37.5%	50.0%
↓ HQUIETHSP UP Patients who reported that the area around their room was "Usually" quiet at night	25.0%	0.0%	25.0%	27.3%	31.3%	40.0%	21.1%	62.5%	50.0%
↓ HQUIETHSP SNP Patients who reported that the area around their room was "Sometimes" or "Never" quiet at night	0.0%	0.0%	12.5%	18.2%	12.5%	0.0%	0.0%	0.0%	0.0%
↑ HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	75.0%	100.0%	75.0%	72.2%	91.3%	93.8%	70.0%	85.7%	87.5%
↓ HCOMP6N P Patients who reported that NO, they were not given information about what to do during their recovery at home	25.0%	0.0%	25.0%	27.8%	8.7%	6.3%	30.0%	14.3%	12.5%
↑ HCOMP7SA Patients who "Strongly Agree" they understood their care when they left the hospital	45.8%	58.3%	45.8%	37.5%	53.3%	46.7%	33.9%	37.5%	56.7%
↓ HCOMP7A Patients who "Agree" they understood their care when they left the hospital	50.0%	16.7%	41.7%	56.3%	37.8%	46.7%	59.3%	62.5%	36.7%
↓ HCOMP7D SD Patients who "Disagree" or "Strongly Disagree" they understood their care when they left the hospital	0.0%	16.7%	4.2%	3.1%	6.7%	3.3%	5.1%	0.0%	6.7%
↓ HHSP RATING06 Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)	0.0%	0.0%	0.0%	0.0%	20.0%	0.0%	5.0%	0.0%	10.0%
↓ HHSP RATING78 Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)	25.0%	50.0%	12.5%	36.4%	13.3%	30.0%	15.0%	0.0%	0.0%
↑ HHSP RATING910 Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	75.0%	50.0%	87.5%	63.6%	66.7%	70.0%	80.0%	100.0%	90.0%
↑ HRECMND DY Patients who reported YES, they would definitely recommend the hospital	75.0%	75.0%	75.0%	63.6%	62.5%	60.0%	73.7%	75.0%	60.0%
↓ HRECMND PY Patients who reported YES, they would probably recommend the hospital	25.0%	25.0%	25.0%	36.4%	25.0%	40.0%	21.1%	25.0%	40.0%
↓ HRECMND DN Patients who reported NO, they would probably not or definitely not recommend the hospital	0.0%	0.0%	0.0%	0.0%	12.5%	0.0%	5.3%	0.0%	0.0%
<b>Timely &amp; Effective care Cataract Surgery Outcome</b>									
↑ OP31 Cataracts Improvement	--	--	--	--	--	--	--	--	--
<b>Timely &amp; Effective care Colonoscopy follow-up</b>									
↑ OP29 Avg Risk Polyp Surveillance	--	--	--	0.0%	--	0.0%	--	--	--
↑ OP30 High risk Polyp Surveillance	100.0%	100.0%	100.0%	100.0%	--	0.0%	--	--	--
<b>Timely &amp; Effective Care Heart Attack</b>									
↓ OP3b Median Time to Transfer AMI	--	315.0	--	55.0	--	69.0	--	171.5	--
↓ OP5 Median Time to ECG AMI and Chest Pain	4.5	7.0	6.8	7.0	4.2	14.0	10.3	8.5	--
↑ OP2 Fibrinolytic Therapy 30 minutes	--	--	--	--	--	--	--	--	--
↑ OP4 Aspirin at Arrival AMI Chest Pain	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	90.9%	--
<b>Timely &amp; Effective Care Stroke Care</b>									
↑ STK4 Thrombolytic Therapy	--	--	--	--	--	--	--	--	--
<b>Timely &amp; Effective Care- Emergency Department (ED) Throughput</b>									
↓ EDV Emergency Department Volume	LOW								
↓ ED1b ED Door to Transport	161	169	164	167	163.5	159	168	191	--
↓ ED2b ED Decision to Transport	41	44	31	37	33.5	43	39	42	--
↓ OP18b Avg time ED arrival to discharge	98.5	99	84	87	93	97	108	91	--



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Sycamore Shoals Hospital

	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18
↓ HCOMP5U P Patients who reported that staff "Usually" explained about medicines before giving it to them	10.9%	25.0%	6.8%	16.4%	17.5%	24.6%	12.7%	18.3%	17.0%
↓ HCOMP5 SNP Patients who reported that staff "Sometimes" or "Never" explained about medicines before giving it to them	28.3%	33.3%	11.4%	14.8%	17.5%	15.8%	14.3%	15.0%	21.3%
↑ HCLEAN HSPAP Patients who reported that their room and bathroom were "Always" clean	79.1%	80.8%	86.5%	75.0%	82.2%	83.3%	84.3%	85.0%	76.2%
↓ HCLEAN HSPUP Patients who reported that their room and bathroom were "Usually" clean	16.3%	15.4%	8.1%	20.8%	11.1%	16.7%	7.8%	12.5%	14.3%
↓ HCLEAN HSPSNP Patients who reported that their room and bathroom were "Sometimes" or "Never" clean	4.7%	3.8%	5.4%	4.2%	6.7%	0.0%	7.8%	2.5%	9.5%
↑ HQUIETHSP AP Patients who reported that the area around their room was "Always" quiet at night	75.0%	61.5%	57.9%	58.3%	73.3%	60.4%	58.0%	70.0%	66.7%
↓ HQUIETHSP UP Patients who reported that the area around their room was "Usually" quiet at night	18.2%	34.6%	34.2%	35.4%	22.2%	33.3%	34.0%	25.0%	23.8%
↓ HQUIETHSP SNP Patients who reported that the area around their room was "Sometimes" or "Never" quiet at night	6.8%	3.8%	7.9%	6.3%	4.4%	6.3%	8.0%	5.0%	9.5%
↑ HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	84.2%	87.5%	92.5%	91.5%	84.0%	81.3%	87.1%	97.3%	80.3%
↓ HCOMP6N P Patients who reported that NO, they were not given information about what to do during their recovery at home	15.8%	12.5%	7.5%	8.5%	16.0%	18.7%	12.9%	2.7%	19.7%
↑ HCOMP7SA Patients who "Strongly Agree" they understood their care when they left the hospital	44.1%	46.0%	41.7%	60.8%	45.6%	41.9%	53.6%	40.8%	46.8%
↓ HCOMP7A Patients who "Agree" they understood their care when they left the hospital	44.9%	40.7%	45.4%	29.4%	41.6%	47.8%	39.7%	51.7%	38.1%
↓ HCOMP7D SD Patients who "Disagree" or "Strongly Disagree" they understood their care when they left the hospital	6.3%	8.0%	9.3%	3.5%	9.6%	6.6%	1.3%	5.8%	9.5%
↓ HHSP RATING06 Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)	11.6%	5.8%	10.8%	8.3%	11.6%	8.5%	2.0%	7.5%	9.5%
↓ HHSP RATING78 Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)	20.9%	26.9%	13.5%	10.4%	20.9%	19.1%	23.5%	30.0%	21.4%
↑ HHSP RATING910 Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	67.4%	67.3%	75.7%	81.3%	67.4%	72.3%	74.5%	62.5%	69.0%
↑ HRECMND DY Patients who reported YES, they would definitely recommend the hospital	74.4%	72.5%	71.4%	83.0%	70.7%	65.3%	84.0%	60.0%	60.0%
↓ HRECMND PY Patients who reported YES, they would probably recommend the hospital	14.0%	23.5%	22.9%	14.9%	22.0%	28.6%	14.0%	35.0%	30.0%
↓ HRECMND DN Patients who reported NO, they would probably not or definitely not recommend the hospital	11.6%	3.9%	5.7%	2.1%	7.3%	6.1%	2.0%	5.0%	10.0%
<b>Timely &amp; Effective care Cataract Surgery Outcome</b>									
↑ OP31 Cataracts Improvement	--	--	--	--	--	--	--	--	--
<b>Timely &amp; Effective care Colonoscopy follow-up</b>									
↑ OP29 Avg Risk Polyp Surveillance	--	--	--	100.0%	--	--	--	100.0%	--
↑ OP30 High risk Polyp Surveillance	100.0%	100.0%	--	85.7%	0.0%	--	--	--	--
<b>Timely &amp; Effective Care Heart Attack</b>									
↓ OP3b Median Time to Transfer AMI	--	139.0	--	--	58.0	26.0	27.0	--	--
↓ OP5 Median Time to ECG AMI and Chest Pain	10.0	6.5	4.3	6.8	4.5	4.5	6.0	5.0	--
↑ OP2 Fibrinolytic Therapy 30 minutes	--	--	--	--	--	--	--	--	--
↑ OP4 Aspirin at Arrival AMI Chest Pain	86.4%	100.0%	100.0%	100.0%	93.8%	95.2%	100.0%	95.0%	--
<b>Timely &amp; Effective Care Stroke Care</b>									
↑ STK4 Thrombolytic Therapy	--	--	--	--	--	--	--	--	--
<b>Timely &amp; Effective Care- Emergency Department (ED) Throughput</b>									
↓ EDV Emergency Department Volume	MEDIUM								
↓ ED1b ED Door to Transport	195	229.5	198.5	238	206	207	260.5	259.5	--
↓ ED2b ED Decision to Transport	70	81	68	84	77	69	89	90	--
↓ OP18b Avg time ED arrival to discharge	138	126.5	124	129.5	117.5	123	128.5	118.5	--



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		Johnson County Community Hospital								
		Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18
↓	HCOMP5U P Patients who reported that staff "Usually" explained about medicines before giving it to them	100.0%	--	--	--	100.0%	--	--	0.0%	--
↓	HCOMP5 SNP Patients who reported that staff "Sometimes" or "Never" explained about medicines before giving it to them	100.0%	--	--	--	100.0%	--	--	0.0%	--
↑	HCLEAN HSPAP Patients who reported that their room and bathroom were "Always" clean	100.0%	--	--	--	100.0%	100.0%	--	100.0%	--
↓	HCLEAN HSPUP Patients who reported that their room and bathroom were "Usually" clean	0.0%	--	--	--	0.0%	0.0%	--	0.0%	--
↓	HCLEAN HSPSNP Patients who reported that their room and bathroom were "Sometimes" or "Never" clean	0.0%	--	--	--	0.0%	0.0%	--	0.0%	--
↑	HQUIETHSP AP Patients who reported that the area around their room was "Always" quiet at night	100.0%	--	--	--	100.0%	100.0%	--	100.0%	--
↓	HQUIETHSP UP Patients who reported that the area around their room was "Usually" quiet at night	0.0%	--	--	--	0.0%	0.0%	--	0.0%	--
↓	HQUIETHSP SNP Patients who reported that the area around their room was "Sometimes" or "Never" quiet at night	0.0%	--	--	--	0.0%	0.0%	--	0.0%	--
↑	HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	100.0%	--	--	--	100.0%	100.0%	--	100.0%	--
↓	HCOMP6N P Patients who reported that NO, they were not given information about what to do during their recovery at home	0.0%	--	--	--	0.0%	0.0%	--	0.0%	--
↑	HCOMP7SA Patients who "Strongly Agree" they understood their care when they left the hospital	0.0%	--	--	--	100.0%	66.7%	--	66.7%	--
↓	HCOMP7A Patients who "Agree" they understood their care when they left the hospital	100.0%	--	--	--	0.0%	0.0%	--	33.3%	--
↓	HCOMP7D SD Patients who "Disagree" or "Strongly Disagree" they understood their care when they left the hospital	0.0%	--	--	--	0.0%	0.0%	--	0.0%	--
↓	HHSP RATING06 Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)	0.0%	--	--	--	0.0%	0.0%	--	0.0%	--
↓	HHSP RATING78 Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)	100.0%	--	--	--	0.0%	0.0%	--	0.0%	--
↑	HHSP RATING910 Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	100.0%	--	--	--	100.0%	100.0%	--	100.0%	--
↑	HRECMND DY Patients who reported YES, they would definitely recommend the hospital	100.0%	--	--	--	100.0%	100.0%	--	100.0%	--
↓	HRECMND PY Patients who reported YES, they would probably recommend the hospital	0.0%	--	--	--	0.0%	0.0%	--	100.0%	--
↓	HRECMND DN Patients who reported NO, they would probably not or definitely not recommend the hospital	0.0%	--	--	--	0.0%	0.0%	--	0.0%	--
<b>Timely &amp; Effective care Cataract Surgery Outcome</b>										
↑	OP31 Cataracts Improvement	--	--	--	--	--	--	--	--	--
<b>Timely &amp; Effective care Colonoscopy follow-up</b>										
↑	OP29 Avg Risk Polyp Surveillance	--	--	--	--	--	--	--	--	--
↑	OP30 High risk Polyp Surveillance	--	--	--	--	--	--	--	--	--
<b>Timely &amp; Effective Care Heart Attack</b>										
↓	OP3b Median Time to Transfer AMI	--	--	--	--	--	70.0	79.0	--	--
↓	OP5 Median Time to ECG AMI and Chest Pain	6.0	3.0	--	8.5	16.0	3.0	13.5	12.5	--
↑	OP2 Fibrinolytic Therapy 30 minutes	--	--	--	--	--	--	--	--	--
↑	OP4 Aspirin at Arrival AMI Chest Pain	100.0%	100.0%	--	100.0%	100.0%	100.0%	100.0%	100.0%	--
<b>Timely &amp; Effective Care Stroke Care</b>										
↑	STK4 Thrombolytic Therapy	--	--	--	--	--	--	--	--	--
<b>Timely &amp; Effective Care- Emergency Department (ED) Throughput</b>										
↓	EDV Emergency Department Volume	LOW	LOW	LOW	LOW	LOW	LOW	LOW	LOW	LOW
↓	ED1b ED Door to Transport	166	--	--	--	214	143.5	165	111.5	--
↓	ED2b ED Decision to Transport	53	--	--	--	43.5	12.5	86.5	13.5	--
↓	OP18b Avg time ED arrival to discharge	78	96	104.5	103.5	96.5	95.5	90	79	--



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		Unicoi County Memorial Hospital								
		Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18
↓	HCOMP5U P Patients who reported that staff "Usually" explained about medicines before giving it to them	0.0%	0.0%	20.0%	16.7%	14.3%	8.3%	16.7%	20.0%	0.0%
↓	HCOMP5 SNP Patients who reported that staff "Sometimes" or "Never" explained about medicines before giving it to them	0.0%	0.0%	0.0%	0.0%	0.0%	25.0%	8.3%	30.0%	0.0%
↑	HCLEAN HSPAP Patients who reported that their room and bathroom were "Always" clean	100.0%	100.0%	84.6%	70.0%	100.0%	81.8%	83.3%	83.3%	100.0%
↓	HCLEAN HSPUP Patients who reported that their room and bathroom were "Usually" clean	0.0%	0.0%	15.4%	30.0%	0.0%	0.0%	16.7%	16.7%	0.0%
↓	HCLEAN HSPSNP Patients who reported that their room and bathroom were "Sometimes" or "Never" clean	0.0%	0.0%	0.0%	0.0%	0.0%	18.2%	0.0%	0.0%	0.0%
↑	HQUIETHSP AP Patients who reported that the area around their room was "Always" quiet at night	100.0%	100.0%	66.7%	60.0%	85.7%	70.0%	76.9%	66.7%	50.0%
↓	HQUIETHSP UP Patients who reported that the area around their room was "Usually" quiet at night	0.0%	0.0%	33.3%	30.0%	14.3%	10.0%	15.4%	16.7%	0.0%
↓	HQUIETHSP SNP Patients who reported that the area around their room was "Sometimes" or "Never" quiet at night	0.0%	0.0%	0.0%	10.0%	0.0%	20.0%	7.7%	16.7%	50.0%
↑	HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	100.0%	0.0%	90.5%	87.5%	90.0%	87.5%	75.0%	87.5%	100.0%
↓	HCOMP6N P Patients who reported that NO, they were not given information about what to do during their recovery at home	0.0%	100.0%	9.5%	12.5%	10.0%	12.5%	25.0%	12.5%	0.0%
↑	HCOMP7SA Patients who "Strongly Agree" they understood their care when they left the hospital	80.0%	50.0%	55.6%	33.3%	52.6%	53.3%	53.8%	40.0%	100.0%
↓	HCOMP7A Patients who "Agree" they understood their care when they left the hospital	13.3%	33.3%	38.9%	53.3%	36.8%	40.0%	41.0%	53.3%	0.0%
↓	HCOMP7D SD Patients who "Disagree" or "Strongly Disagree" they understood their care when they left the hospital	0.0%	16.7%	0.0%	3.3%	0.0%	3.3%	2.6%	0.0%	0.0%
↓	HHSP RATING06 Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)	0.0%	0.0%	0.0%	2.6%	0.0%	2.9%	0.0%	0.0%	0.0%
↓	HHSP RATING78 Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)	0.0%	0.0%	17.9%	7.7%	3.4%	8.8%	10.5%	0.0%	0.0%
↑	HHSP RATING910 Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	17.2%	5.7%	28.6%	15.4%	20.7%	20.6%	23.7%	24.0%	10.3%
↑	HRECMND DY Patients who reported YES, they would definitely recommend the hospital	100.0%	100.0%	76.9%	70.0%	71.4%	63.6%	76.9%	83.3%	100.0%
↓	HRECMND PY Patients who reported YES, they would probably recommend the hospital	0.0%	0.0%	23.1%	20.0%	28.6%	27.3%	23.1%	16.7%	0.0%
↓	HRECMND DN Patients who reported NO, they would probably not or definitely not recommend the hospital	0.0%	0.0%	0.0%	10.0%	0.0%	9.1%	0.0%	0.0%	0.0%
<b>Timely &amp; Effective care Cataract Surgery Outcome</b>										
↑	OP31 Cataracts Improvement	--	--	--	--	--	--	--	--	--
<b>Timely &amp; Effective care Colonoscopy follow-up</b>										
↑	OP29 Avg Risk Polyp Surveillance	--	--	--	--	--	--	--	--	--
↑	OP30 High risk Polyp Surveillance	--	--	--	--	--	--	--	--	--
<b>Timely &amp; Effective Care Heart Attack</b>										
↓	OP3b Median Time to Transfer AMI	--	--	--	56.0	--	--	73.0	--	--
↓	OP5 Median Time to ECG AMI and Chest Pain	9.5	5.5	23.5	13.5	9.8	7.8	7.0	4.3	3.8
↑	OP2 Fibrinolytic Therapy 30 minutes	--	--	--	--	--	--	--	--	--
↑	OP4 Aspirin at Arrival AMI Chest Pain	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	--
<b>Timely &amp; Effective Care Stroke Care</b>										
↑	STK4 Thrombolytic Therapy	--	--	--	--	--	--	--	--	--
<b>Timely &amp; Effective Care- Emergency Department (ED) Throughput</b>										
↓	EDV Emergency Department Volume	LOW	LOW	LOW	LOW	LOW	LOW	LOW	LOW	LOW
↓	ED1b ED Door to Transport	214	164.5	169.5	187	209	195	258	201	266.5
↓	ED2b ED Decision to Transport	46.5	34.5	45	37	54	50	60	54	55
↓	OP18b Avg time ED arrival to discharge	124	112.5	121.5	108	115.5	99	140	156.5	142



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		Laughlin Memorial Hospital									
		Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	
↓	HCOMP5U P Patients who reported that staff "Usually" explained about medicines before giving it to them	21.0%	21.0%	21.0%	21.0%	21.0%	21.0%	--	--	--	
↓	HCOMP5 SNP Patients who reported that staff "Sometimes" or "Never" explained about medicines before giving it to them	15.0%	15.0%	15.0%	15.0%	15.0%	15.0%	--	--	--	
↑	HCLEAN HSPAP Patients who reported that their room and bathroom were "Always" clean	68.0%	68.0%	68.0%	68.0%	68.0%	68.0%	--	--	--	
↓	HCLEAN HSPUP Patients who reported that their room and bathroom were "Usually" clean	20.0%	20.0%	20.0%	20.0%	20.0%	20.0%	--	--	--	
↓	HCLEAN HSPSNP Patients who reported that their room and bathroom were "Sometimes" or "Never" clean	12.0%	12.0%	12.0%	12.0%	12.0%	12.0%	--	--	--	
↑	HQUIETHSP AP Patients who reported that the area around their room was "Always" quiet at night	59.0%	59.0%	59.0%	59.0%	59.0%	59.0%	--	--	--	
↓	HQUIETHSP UP Patients who reported that the area around their room was "Usually" quiet at night	33.0%	33.0%	33.0%	33.0%	33.0%	33.0%	--	--	--	
↓	HQUIETHSP SNP Patients who reported that the area around their room was "Sometimes" or "Never" quiet at night	8.0%	8.0%	8.0%	8.0%	8.0%	8.0%	--	--	--	
↑	HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	88.0%	88.0%	88.0%	88.0%	88.0%	88.0%	--	--	--	
↓	HCOMP6N P Patients who reported that NO, they were not given information about what to do during their recovery at home	12.0%	12.0%	12.0%	12.0%	12.0%	12.0%	--	--	--	
↑	HCOMP7SA Patients who "Strongly Agree" they understood their care when they left the hospital	50.0%	50.0%	50.0%	50.0%	50.0%	50.0%	--	--	--	
↓	HCOMP7A Patients who "Agree" they understood their care when they left the hospital	45.0%	45.0%	45.0%	45.0%	45.0%	45.0%	--	--	--	
↓	HCOMP7D SD Patients who "Disagree" or "Strongly Disagree" they understood their care when they left the hospital	5.0%	5.0%	5.0%	5.0%	5.0%	5.0%	--	--	--	
↓	HHSP RATING06 Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)	8.0%	8.0%	8.0%	8.0%	8.0%	8.0%	--	--	--	
↓	HHSP RATING78 Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)	16.0%	16.0%	16.0%	16.0%	16.0%	16.0%	--	--	--	
↑	HHSP RATING910 Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	76.0%	76.0%	76.0%	76.0%	76.0%	76.0%	--	--	--	
↑	HRECMND DY Patients who reported YES, they would definitely recommend the hospital	76.0%	76.0%	76.0%	76.0%	76.0%	76.0%	--	--	--	
↓	HRECMND PY Patients who reported YES, they would probably recommend the hospital	21.0%	21.0%	21.0%	21.0%	21.0%	21.0%	--	--	--	
↓	HRECMND DN Patients who reported NO, they would probably not or definitely not recommend the hospital	3.0%	3.0%	3.0%	3.0%	3.0%	3.0%	--	--	--	
<b>Timely &amp; Effective care Cataract Surgery Outcome</b>											
↑	OP31 Cataracts Improvement	--	--	--	--	--	--	--	--	--	
<b>Timely &amp; Effective care Colonoscopy follow-up</b>											
↑	OP29 Avg Risk Polyp Surveillance	100.0%	81.8%	91.7%	91.3%	--	--	--	--	--	
↑	OP30 High risk Polyp Surveillance	90.5%	87.0%	90.0%	85.0%	--	--	--	--	--	
<b>Timely &amp; Effective Care Heart Attack</b>											
↓	OP3b Median Time to Transfer AMI	129.0	152.0	87.0	87.0	87.0	87.0	--	--	--	
↓	OP5 Median Time to ECG AMI and Chest Pain	7.3	7.5	7.0	7.0	7.0	7.0	--	--	--	
↑	OP2 Fibrinolytic Therapy 30 minutes	--	--	--	--	--	--	--	--	--	
↑	OP4 Aspirin at Arrival AMI Chest Pain	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	--	--	--	
<b>Timely &amp; Effective Care Stroke Care</b>											
↑	STK4 Thrombolytic Therapy	--	--	--	--	--	--	--	--	--	
<b>Timely &amp; Effective Care- Emergency Department (ED) Throughput</b>											
↓	EDV Emergency Department Volume	MEDIUM	MEDIUM	MEDIUM	MEDIUM	MEDIUM	MEDIUM	MEDIUM	MEDIUM	MEDIUM	
↓	ED1b ED Door to Transport	174	191	168	194	207	204	--	--	--	
↓	ED2b ED Decision to Transport	47	57	56	52	60	62	--	--	--	
↓	OP18b Avg time ED arrival to discharge	77	108	107	107	107	107	--	--	--	

		Takoma Regional Hospital								
		Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18
↓	HCOMP5U P Patients who reported that staff "Usually" explained about medicines before giving it to them	21.4%	11.5%	8.0%	25.0%	9.1%	0.0%	11.1%	18.2%	11.8%
↓	HCOMP5 SNP Patients who reported that staff "Sometimes" or "Never" explained about medicines before giving it to them	21.4%	23.1%	8.0%	31.3%	18.2%	35.0%	13.9%	18.2%	14.7%
↑	HCLEAN HSPAP Patients who reported that their room and bathroom were "Always" clean	80.8%	76.5%	71.9%	64.0%	83.3%	81.8%	71.4%	75.0%	82.5%
↓	HCLEAN HSPUP Patients who reported that their room and bathroom were "Usually" clean	11.5%	20.6%	18.8%	12.0%	6.7%	6.1%	19.0%	16.7%	17.6%
↓	HCLEAN HSPSNP Patients who reported that their room and bathroom were "Sometimes" or "Never" clean	7.7%	2.9%	9.4%	24.0%	10.0%	12.1%	9.5%	10.7%	5.0%
↑	HQUIETHSP AP Patients who reported that the area around their room was "Always" quiet at night	76.9%	85.7%	84.4%	61.5%	80.0%	85.3%	61.9%	74.1%	76.9%
↓	HQUIETHSP UP Patients who reported that the area around their room was "Usually" quiet at night	7.7%	11.4%	6.3%	26.9%	13.3%	11.8%	21.4%	18.5%	15.4%
↓	HQUIETHSP SNP Patients who reported that the area around their room was "Sometimes" or "Never" quiet at night	15.4%	2.9%	9.4%	11.5%	6.7%	2.9%	16.7%	7.4%	7.7%
↑	HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	88.0%	98.5%	93.3%	88.9%	90.0%	91.9%	90.8%	91.7%	92.2%
↓	HCOMP6N P Patients who reported that NO, they were not given information about what to do during their recovery at home	12.0%	1.5%	6.7%	11.1%	10.0%	8.1%	9.2%	8.3%	7.8%
↑	HCOMP7SA Patients who "Strongly Agree" they understood their care when they left the hospital	55.6%	55.4%	59.1%	47.8%	54.2%	51.6%	43.1%	45.6%	65.5%
↓	HCOMP7A Patients who "Agree" they understood their care when they left the hospital	38.9%	42.4%	40.9%	44.9%	44.6%	46.2%	3.4%	53.2%	29.2%
↓	HCOMP7D SD Patients who "Disagree" or "Strongly Disagree" they understood their care when they left the hospital	5.6%	2.2%	0.0%	7.2%	1.2%	2.2%	3.4%	1.3%	5.3%
↓	HHSP RATING06 Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)	15.4%	5.7%	3.1%	11.5%	6.9%	3.0%	7.3%	14.3%	5.0%
↓	HHSP RATING78 Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)	11.5%	14.3%	6.3%	11.5%	24.1%	15.2%	17.1%	14.3%	5.0%
↑	HHSP RATING910 Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	73.1%	80.0%	90.6%	76.9%	69.0%	81.8%	75.6%	71.4%	90.0%
↑	HRECMND DY Patients who reported YES, they would definitely recommend the hospital	76.0%	76.5%	93.5%	53.8%	75.0%	80.0%	78.0%	66.7%	89.7%
↓	HRECMND PY Patients who reported YES, they would probably recommend the hospital	8.0%	20.6%	6.5%	38.5%	21.4%	13.3%	14.6%	22.2%	5.1%
↓	HRECMND DN Patients who reported NO, they would probably not or definitely not recommend the hospital	16.0%	2.9%	0.0%	7.7%	3.6%	6.7%	7.3%	11.1%	5.1%
<b>Timely &amp; Effective care Cataract Surgery Outcome</b>										
↑	OP31 Cataracts Improvement	--	--	--	--	--	--	--	--	--
<b>Timely &amp; Effective care Colonoscopy follow-up</b>										
↑	OP29 Avg Risk Polyp Surveillance	91.7%	78.6%	94.1%	25.0%	--	--	--	--	--
↑	OP30 High risk Polyp Surveillance	100.0%	90.9%	100.0%	100.0%	--	--	--	--	--
<b>Timely &amp; Effective Care Heart Attack</b>										
↓	OP3b Median Time to Transfer AMI	38.0	118.0	73.0	--	141.0	151.0	--	--	--
↓	OP5 Median Time to ECG AMI and Chest Pain	24.0	26.0	22.0	46.0	37.0	8.0	--	--	--
↑	OP2 Fibrinolytic Therapy 30 minutes	--	--	--	--	--	--	--	--	--
↑	OP4 Aspirin at Arrival AMI Chest Pain	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	--	--	--
<b>Timely &amp; Effective Care Stroke Care</b>										
↑	STK4 Thrombolytic Therapy	--	--	--	--	--	--	--	--	--
<b>Timely &amp; Effective Care- Emergency Department (ED) Throughput</b>										
↓	EDV Emergency Department Volume	MEDIUM	MEDIUM	MEDIUM	MEDIUM	MEDIUM	MEDIUM	MEDIUM	MEDIUM	MEDIUM
↓	ED1b ED Door to Transport	259	250	252	--	352.5	281.5	--	--	--
↓	ED2b ED Decision to Transport	59	49	56	--	53	47	--	--	--
↓	OP18b Avg time ED arrival to discharge	192	139	167	169	169	140	--	--	--

		Ballad Health								
FYTD2018 March 2018		Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18
↓	OP20 Door to Diagnostic Evaluation	24.95	18.42	19.97	17.2	15.68	16.34	9.69	10.61	7.76
↓	OP21 Time to pain medication for long bone fractures2	53.41	53.33	55.35	46.38	46.83	54.78	43.82	41.24	39.34
↓	OP22 Left without being seen	1.2%	1.2%	0.9%	0.9%	0.8%	0.7%	0.6%	0.5%	0.4%
↑	OP23 Head CT stroke patients	0.79	1.00	1.00	0.91	0.60	0.86	0.54	0.57	--
<b>Timely &amp; Effective Care Preventive Care</b>										
↑	IMM2 Immunization for Influenza	--	--	--	97.6%	98.2%	99.0%	98.2%	98.3%	92.1%
↑	IMM3OP27 FACADHPCT HCW Influenza Vaccination	98.0%	98.0%	98.0%	98.0%	98.0%	98.0%	98.0%	98.0%	98.0%
<b>Timely &amp; Effective Care Blood Clot Prevention &amp; Treatment</b>										
↑	VTE5 Warfarin Therapy at Discharge	--	--	--	--	--	--	--	--	--
↓	VTE6 HAC VTE	0.0%	7.1%	6.7%	0.0%	0.0%	11.1%	0.0%	0.0%	--
<b>Timely &amp; Effective Care Pregnancy &amp; delivery care</b>										
↓	PC01 Elective Delivery	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	--
<b>Complications - Surgical Complications</b>										
↓	Hip and Knee Complications2	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
↓	PSI90 Complications / patient safety for selected indicators	0.68	0.92	0.90	0.96	0.97	0.96	--	--	--
↓	PSI4SURG COMP Death rate among surgical patients with serious treatable complications	188.41	151.90	153.85	175.93	176.47	233.77	180.72	154.93	171.05
<b>Readmissions &amp; deaths 30 day rates of readmission</b>										
↓	READM30 COPD Chronic obstructive pulmonary disease 30day readmission rate	20.2%	16.8%	21.0%	17.4%	22.1%	18.9%	20.1%	17.7%	--
↓	READM30 AMI Acute myocardial infarction (AMI) 30day readmission rate	17.4%	11.5%	12.6%	9.7%	12.0%	16.1%	12.6%	7.9%	--
↓	READM30HF Heart Failure 30Day readmissions rate	24.1%	29.5%	20.9%	26.3%	23.2%	20.1%	24.1%	19.4%	--
↓	READM30PN Pneumonia 30day readmission rate	15.4%	15.3%	21.4%	15.1%	19.6%	17.0%	14.6%	14.6%	--
↓	READM30 STK Stroke 30day readmission rate	9.2%	10.5%	13.5%	9.0%	14.4%	10.3%	9.5%	0.0%	--
↓	READM30 CABG Coronary artery bypass graft (CABG) surgery 30day readmission rate2	17.5%	11.7%	7.1%	12.2%	10.5%	14.9%	26.7%	0.0%	--
↓	READM30 HIPKNEE 30day readmission rate following elective THA / TKA	2.8%	5.2%	3.1%	1.9%	5.6%	3.8%	4.6%	3.3%	--
↓	READM30 HOSPWIDE 30day hospitalwide allcause unplanned readmission	13.2%	12.3%	13.2%	12.6%	13.3%	13.5%	13.6%	13.5%	--
<b>Readmissions &amp; deaths 30 day death (mortality) rates</b>										
↓	MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate	4.4%	1.6%	0.0%	4.2%	8.5%	1.8%	0.0%	1.8%	3.4%
↓	MORT30 COPD 30day mortality rate COPD patients	2.3%	2.5%	2.7%	2.6%	2.8%	1.5%	1.8%	3.6%	3.5%
↓	MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate	6.8%	1.6%	4.6%	4.3%	5.3%	5.4%	3.1%	7.0%	7.0%
↓	MORT30HF Heart failure 30day mortality rate	2.4%	2.8%	2.3%	2.0%	2.4%	3.7%	5.3%	2.7%	3.7%
↓	MORT30PN Pneumonia 30day mortality rate	4.9%	3.9%	3.4%	4.6%	6.0%	7.0%	6.7%	4.4%	6.3%
↓	MORT30STK Stroke 30day mortality rate	6.2%	4.8%	4.5%	6.5%	8.5%	6.0%	4.0%	5.8%	3.4%
<b>Use of medical imaging Outpatient imaging efficiency</b>										
↕	OP8 MRI Lumbar Spine for Low Back Pain	34.0%	34.0%	34.0%	34.0%	34.0%	34.0%	39.5%	39.5%	39.5%
↕	OP9 Mammography Followup Rates	7.0%	7.0%	7.0%	7.0%	7.0%	7.0%	7.8%	7.8%	7.8%
↕	OP10 Abdomen CT Use of Contrast Material	7.0%	7.0%	7.0%	7.0%	7.0%	7.0%	8.2%	8.2%	8.2%
↕	OP11 Thorax CT Use of Contrast Material	1.0%	1.0%	1.0%	1.0%	1.0%	1.0%	0.5%	0.5%	0.5%
↕	OP13 Outpatients who got cardiac imaging stress tests before lowrisk outpatient surgery	4.0%	4.0%	4.0%	4.0%	4.0%	4.0%	4.3%	4.3%	4.3%
↕	OP14 Outpatients with brain CT scans who got a sinus CT scan at the same time	1.0%	1.0%	1.0%	1.0%	1.0%	1.0%	1.3%	1.3%	1.3%

	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18
↓ OP20 Door to Diagnostic Evaluation	14.5	15	8	10.5	11.5	11	16	19.5	--
↓ OP21 Time to pain medication for long bone fractures2	57.5	59	35	43	48	28	99	47	--
↓ OP22 Left without being seen	1.1%	1.1%	0.3%	0.3%	0.4%	0.2%	0.3%	0.5%	1.0%
↑ OP23 Head CT stroke patients	1.00	1.00	--	--	--	--	--	--	--
<b>Timely &amp; Effective Care Preventive Care</b>									
↑ IMM2 Immunization for Influenza	--	--	--	100.0%	100.0%	98.9%	98.8%	100.0%	--
↑ IMM3OP27 FACADHPCT HCW Influenza Vaccination	99.0%	99.0%	99.0%	99.0%	99.0%	99.0%	--	--	--
<b>Timely &amp; Effective Care Blood Clot Prevention &amp; Treatment</b>									
↑ VTE5 Warfarin Therapy at Discharge	--	--	--	--	--	--	--	--	--
↓ VTE6 HAC VTE	0.0%	0.0%	100.0%	0.0%	--	--	--	--	--
<b>Timely &amp; Effective Care Pregnancy &amp; delivery care</b>									
↓ PC01 Elective Delivery	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	--
<b>Complications - Surgical Complications</b>									
↓ Hip and Knee Complications2	--	--	--	--	--	--	--	--	--
↓ PSI90 Complications / patient safety for selected indicators	0.98	1.17	1.09	1.05	1.03	0.98	1.11	--	--
↓ PSI4SURG COMP Death rate among surgical patients with serious treatable complications	250.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
<b>Readmissions &amp; deaths 30 day rates of readmission</b>									
↓ READM30 COPD Chronic obstructive pulmonary disease 30day readmission rate	20.8%	9.1%	14.3%	4.2%	9.5%	10.0%	20.0%	26.1%	25.0%
↓ READM30 AMI Acute myocardial infarction (AMI) 30day readmission rate	--	--	--	--	0.0%	0.0%	--	0.0%	--
↓ READM30HF Heart Failure 30Day readmissions rate	25.0%	25.0%	25.0%	22.2%	0.0%	25.0%	0.0%	50.0%	20.0%
↓ READM30PN Pneumonia 30day readmission rate	13.6%	7.7%	9.1%	0.0%	12.5%	4.9%	11.5%	12.5%	11.8%
↓ READM30 STK Stroke 30day readmission rate	0.0%	0.0%	0.0%	--	--	--	0.0%	--	0.0%
↓ READM30 CABG Coronary artery bypass graft (CABG) surgery 30day readmission rate2	--	--	--	--	--	--	--	--	--
↓ READM30 HIPKNEE 30day readmission rate following elective THA / TKA	--	--	--	--	--	--	--	--	--
↓ READM30 HOSPWIDE 30day hospitalwide allcause unplanned readmission	7.2%	5.5%	9.5%	5.8%	5.5%	6.4%	7.9%	7.8%	7.9%
<b>Readmissions &amp; deaths 30 day death (mortality) rates</b>									
↓ MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate	--	--	--	--	--	--	--	--	--
↓ MORT30 COPD 30day mortality rate COPD patients	0.0%	0.0%	0.0%	4.0%	4.5%	0.0%	0.0%	4.2%	0.0%
↓ MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate	--	--	--	--	0.0%	0.0%	--	0.0%	--
↓ MORT30HF Heart failure 30day mortality rate	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	14.3%	0.0%	0.0%
↓ MORT30PN Pneumonia 30day mortality rate	0.0%	0.0%	4.3%	4.2%	5.9%	0.0%	2.0%	0.0%	2.9%
↓ MORT30STK Stroke 30day mortality rate	0.0%	0.0%	0.0%	--	--	--	0.0%	--	0.0%
<b>Use of medical imaging Outpatient imaging efficiency</b>									
↕ OP8 MRI Lumbar Spine for Low Back Pain	33.9%	33.9%	33.9%	33.9%	33.9%	33.9%	--	--	--
↕ OP9 Mammography Followup Rates	--	--	--	--	--	--	--	--	--
↕ OP10 Abdomen CT Use of Contrast Material	12.7%	12.7%	12.7%	12.7%	12.7%	12.7%	--	--	--
↕ OP11 Thorax CT Use of Contrast Material	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	--	--	--
↕ OP13 Outpatients who got cardiac imaging stress tests before lowrisk outpatient surgery	1.6%	1.6%	1.6%	1.6%	1.6%	1.6%	--	--	--
↕ OP14 Outpatients with brain CT scans who got a sinus CT scan at the same time	--	--	--	--	--	--	--	--	--

Johnson City Medical Center

	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18
↓ OP20 Door to Diagnostic Evaluation	3.5	5	7	3	3	6	6	8	--
↓ OP21 Time to pain medication for long bone fractures2	32	33.5	48	38.5	35	39	28.5	44	--
↓ OP22 Left without being seen	0.9%	1.2%	0.4%	0.8%	0.5%	0.7%	1.1%	0.7%	0.6%
↑ OP23 Head CT stroke patients	1.00	--	--	--	--	--	--	0.00	--
<b>Timely &amp; Effective Care Preventive Care</b>									
↑ IMM2 Immunization for Influenza	--	--	--	96.9%	97.8%	100.0%	98.9%	96.7%	--
↑ IMM3OP27 FACADHPCT HCW Influenza Vaccination	98.0%	98.0%	98.0%	98.0%	98.0%	98.0%	--	--	--
<b>Timely &amp; Effective Care Blood Clot Prevention &amp; Treatment</b>									
↑ VTE5 Warfarin Therapy at Discharge	--	--	--	--	--	--	--	--	--
↓ VTE6 HAC VTE	0.0%	16.7%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	--
<b>Timely &amp; Effective Care Pregnancy &amp; delivery care</b>									
↓ PC01 Elective Delivery	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	--
<b>Complications - Surgical Complications</b>									
↓ Hip and Knee Complications2	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
↓ PSI90 Complications / patient safety for selected indicators	1.06	0.99	1.07	1.06	1.36	0.96	1.00	--	--
↓ PSI4SURG COMP Death rate among surgical patients with serious treatable complications	103.45	238.10	52.63	222.22	225.81	243.24	218.75	200.00	166.67
<b>Readmissions &amp; deaths 30 day rates of readmission</b>									
↓ READM30 COPD Chronic obstructive pulmonary disease 30day readmission rate	16.0%	20.9%	24.0%	14.8%	14.0%	12.9%	15.7%	20.0%	13.0%
↓ READM30 AMI Acute myocardial infarction (AMI) 30day readmission rate	15.6%	10.1%	12.7%	10.6%	9.5%	17.7%	11.8%	9.5%	15.3%
↓ READM30HF Heart Failure 30Day readmissions rate	20.3%	30.4%	22.2%	21.4%	26.8%	20.0%	25.0%	25.4%	28.6%
↓ READM30PN Pneumonia 30day readmission rate	16.1%	9.1%	19.3%	14.5%	21.6%	15.6%	13.1%	21.8%	12.9%
↓ READM30 STK Stroke 30day readmission rate	0.0%	6.3%	6.1%	12.0%	22.6%	11.8%	10.6%	0.0%	7.5%
↓ READM30 CABG Coronary artery bypass graft (CABG) surgery 30day readmission rate2	23.5%	9.1%	15.8%	0.0%	15.0%	5.6%	13.3%	0.0%	14.3%
↓ READM30 HIPKNEE 30day readmission rate following elective THA / TKA	0.0%	1.9%	3.0%	0.0%	4.5%	3.9%	4.5%	3.3%	--
↓ READM30 HOSPWIDE 30day hospitalwide allcause unplanned readmission	12.6%	10.7%	12.1%	12.9%	11.3%	12.9%	13.0%	13.0%	11.2%
<b>Readmissions &amp; deaths 30 day death (mortality) rates</b>									
↓ MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate	10.5%	0.0%	0.0%	0.0%	9.1%	0.0%	0.0%	7.7%	0.0%
↓ MORT30 COPD 30day mortality rate COPD patients	4.7%	0.0%	5.1%	0.0%	8.1%	4.1%	2.9%	6.3%	6.9%
↓ MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate	10.5%	1.1%	9.2%	4.3%	8.7%	6.1%	7.4%	10.0%	5.3%
↓ MORT30HF Heart failure 30day mortality rate	1.7%	3.4%	1.4%	3.4%	4.1%	6.7%	6.6%	6.0%	7.4%
↓ MORT30PN Pneumonia 30day mortality rate	6.7%	6.4%	6.6%	9.2%	5.1%	9.2%	11.0%	11.2%	9.4%
↓ MORT30STK Stroke 30day mortality rate	5.9%	11.1%	10.8%	13.8%	20.5%	12.8%	8.2%	5.7%	5.4%
<b>Use of medical imaging Outpatient imaging efficiency</b>									
↕ OP8 MRI Lumbar Spine for Low Back Pain	35.4%	35.4%	35.4%	35.4%	35.4%	35.4%	--	--	--
↕ OP9 Mammography Followup Rates	5.8%	5.8%	5.8%	5.8%	5.8%	5.8%	--	--	--
↕ OP10 Abdomen CT Use of Contrast Material	4.6%	4.6%	4.6%	4.6%	4.6%	4.6%	--	--	--
↕ OP11 Thorax CT Use of Contrast Material	0.2%	0.2%	0.2%	0.2%	0.2%	0.2%	--	--	--
↕ OP13 Outpatients who got cardiac imaging stress tests before lowrisk outpatient surgery	2.9%	2.9%	2.9%	2.9%	2.9%	2.9%	--	--	--
↕ OP14 Outpatients with brain CT scans who got a sinus CT scan at the same time	2.8%	2.8%	2.8%	2.8%	2.8%	2.8%	--	--	--



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Dickenson County Hospital

	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18
↓ OP20 Door to Diagnostic Evaluation	3	5	3	6	5	4	7	4	--
↓ OP21 Time to pain medication for long bone fractures2	45.5	--	97.5	33	65	--	--	68	--
↓ OP22 Left without being seen	0.4%	0.6%	0.2%	1.0%	0.9%	0.5%	0.8%	0.3%	1.0%
↑ OP23 Head CT stroke patients	1.00	--	--	1.00	1.00	1.00	--	1.00	--
<b>Timely &amp; Effective Care Preventive Care</b>									
↑ IMM2 Immunization for Influenza	--	--	--	100.0%	100.0%	100.0%	100.0%	--	--
↑ IMM3OP27 FACADHPCT HCW Influenza Vaccination	--	--	--	--	--	--	--	--	--
<b>Timely &amp; Effective Care Blood Clot Prevention &amp; Treatment</b>									
↑ VTE5 Warfarin Therapy at Discharge	--	--	--	--	--	--	--	--	--
↓ VTE6 HAC VTE	--	--	--	--	--	--	--	--	--
<b>Timely &amp; Effective Care Pregnancy &amp; delivery care</b>									
↓ PC01 Elective Delivery	--	--	--	--	--	--	--	--	--
<b>Complications - Surgical Complications</b>									
↓ Hip and Knee Complications2	--	--	--	--	--	--	--	--	--
↓ PSI90 Complications / patient safety for selected indicators	--	--	--	--	--	--	--	--	--
↓ PSI4SURG COMP Death rate among surgical patients with serious treatable complications	--	--	--	--	--	--	--	--	--
<b>Readmissions &amp; deaths 30 day rates of readmission</b>									
↓ READM30 COPD Chronic obstructive pulmonary disease 30day readmission rate	--	--	--	--	--	--	--	--	--
↓ READM30 AMI Acute myocardial infarction (AMI) 30day readmission rate	--	--	--	--	--	--	--	--	--
↓ READM30HF Heart Failure 30Day readmissions rate	--	--	--	--	--	--	--	--	--
↓ READM30PN Pneumonia 30day readmission rate	--	--	--	--	--	--	--	--	--
↓ READM30 STK Stroke 30day readmission rate	--	--	--	--	--	--	--	--	--
↓ READM30 CABG Coronary artery bypass graft (CABG) surgery 30day readmission rate2	--	--	--	--	--	--	--	--	--
↓ READM30 HIPKNEE 30day readmission rate following elective THA / TKA	--	--	--	--	--	--	--	--	--
↓ READM30 HOSPWIDE 30day hospitalwide allcause unplanned readmission	--	--	--	--	--	--	--	--	--
<b>Readmissions &amp; deaths 30 day death (mortality) rates</b>									
↓ MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate	--	--	--	--	--	--	--	--	--
↓ MORT30 COPD 30day mortality rate COPD patients	--	--	--	--	--	--	--	--	--
↓ MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate	--	--	--	--	--	--	--	--	--
↓ MORT30HF Heart failure 30day mortality rate	--	--	--	--	--	--	--	--	--
↓ MORT30PN Pneumonia 30day mortality rate	--	--	--	--	--	--	--	--	--
↓ MORT30STK Stroke 30day mortality rate	--	--	--	--	--	--	--	--	--
<b>Use of medical imaging Outpatient imaging efficiency</b>									
↕ OP8 MRI Lumbar Spine for Low Back Pain	--	--	--	--	--	--	--	--	--
↕ OP9 Mammography Followup Rates	--	--	--	--	--	--	--	--	--
↕ OP10 Abdomen CT Use of Contrast Material	--	--	--	--	--	--	--	--	--
↕ OP11 Thorax CT Use of Contrast Material	--	--	--	--	--	--	--	--	--
↕ OP13 Outpatients who got cardiac imaging stress tests before lowrisk outpatient surgery	--	--	--	--	--	--	--	--	--
↕ OP14 Outpatients with brain CT scans who got a sinus CT scan at the same time	--	--	--	--	--	--	--	--	--



**Hancock County Hospital**

**FYTD2018 March 2018**

	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18
↓ OP20 Door to Diagnostic Evaluation	29	29	23	17	19	25	25	--	--
↓ OP21 Time to pain medication for long bone fractures2	59	--	36.5	38	196	173	46	--	--
↓ OP22 Left without being seen	0.0%	0.6%	0.3%	0.9%	0.5%	0.8%	--	--	--
↑ OP23 Head CT stroke patients	--	--	--	--	--	--	--	--	--
<b>Timely &amp; Effective Care Preventive Care</b>									
↑ IMM2 Immunization for Influenza	--	--	--	--	--	--	--	--	--
↑ IMM3OP27 FACADHPCT HCW Influenza Vaccination	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	--	--	--
<b>Timely &amp; Effective Care Blood Clot Prevention &amp; Treatment</b>									
↑ VTE5 Warfarin Therapy at Discharge	--	--	--	--	--	--	--	--	--
↓ VTE6 HAC VTE	--	--	--	--	--	--	--	--	--
<b>Timely &amp; Effective Care Pregnancy &amp; delivery care</b>									
↓ PC01 Elective Delivery	--	--	--	--	--	--	--	--	--
<b>Complications - Surgical Complications</b>									
↓ Hip and Knee Complications2	--	--	--	--	--	--	--	--	--
↓ PSI90 Complications / patient safety for selected indicators	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.00
↓ PSI4SURG COMP Death rate among surgical patients with serious treatable complications	--	--	--	--	--	--	--	--	--
<b>Readmissions &amp; deaths 30 day rates of readmission</b>									
↓ READM30 COPD Chronic obstructive pulmonary disease 30day readmission rate	--	0.0%	0.0%	50.0%	100.0%	100.0%	0.0%	0.0%	50.0%
↓ READM30 AMI Acute myocardial infarction (AMI) 30day readmission rate	--	--	--	--	--	--	--	--	--
↓ READM30HF Heart Failure 30Day readmissions rate	--	0.0%	0.0%	0.0%	0.0%	0.0%	--	--	0.0%
↓ READM30PN Pneumonia 30day readmission rate	--	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
↓ READM30 STK Stroke 30day readmission rate	--	--	--	--	--	--	--	--	--
↓ READM30 CABG Coronary artery bypass graft (CABG) surgery 30day readmission rate2	--	--	--	--	--	--	--	--	--
↓ READM30 HIPKNEE 30day readmission rate following elective THA / TKA	--	--	--	--	--	--	--	--	--
↓ READM30 HOSPWIDE 30day hospitalwide allcause unplanned readmission	0.0%	27.3%	11.1%	20.0%	13.3%	15.4%	0.0%	0.0%	9.1%
<b>Readmissions &amp; deaths 30 day death (mortality) rates</b>									
↓ MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate	--	--	--	--	--	--	--	--	--
↓ MORT30 COPD 30day mortality rate COPD patients	--	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
↓ MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate	--	--	--	--	--	--	--	--	--
↓ MORT30HF Heart failure 30day mortality rate	--	--	0.0%	0.0%	0.0%	0.0%	--	0.0%	0.0%
↓ MORT30PN Pneumonia 30day mortality rate	100.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
↓ MORT30STK Stroke 30day mortality rate	--	--	--	--	--	--	--	--	--
<b>Use of medical imaging Outpatient imaging efficiency</b>									
↕ OP8 MRI Lumbar Spine for Low Back Pain	--	--	--	--	--	--	--	--	--
↕ OP9 Mammography Followup Rates	--	--	--	--	--	--	--	--	--
↕ OP10 Abdomen CT Use of Contrast Material	--	--	--	--	--	--	--	--	--
↕ OP11 Thorax CT Use of Contrast Material	--	--	--	--	--	--	--	--	--
↕ OP13 Outpatients who got cardiac imaging stress tests before lowrisk outpatient surgery	--	--	--	--	--	--	--	--	--
↕ OP14 Outpatients with brain CT scans who got a sinus CT scan at the same time	--	--	--	--	--	--	--	--	--

	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18
↓ OP20 Door to Diagnostic Evaluation	17	12.5	10.5	12	13.5	14.5	19	--	--
↓ OP21 Time to pain medication for long bone fractures2	61	37.5	101.5	35	20.5	73	93	--	--
↓ OP22 Left without being seen	1.9%	0.9%	5.9%	1.8%	2.5%	1.0%	--	--	--
↑ OP23 Head CT stroke patients	--	--	--	--	--	--	--	--	--
<b>Timely &amp; Effective Care Preventive Care</b>									
↑ IMM2 Immunization for Influenza	--	--	--	100.0%	100.0%	100.0%	100.0%	--	--
↑ IMM3OP27 FACADHPCT HCW Influenza Vaccination	99.0%	99.0%	99.0%	99.0%	99.0%	99.0%	--	--	--
<b>Timely &amp; Effective Care Blood Clot Prevention &amp; Treatment</b>									
↑ VTE5 Warfarin Therapy at Discharge	--	--	--	--	--	--	--	--	--
↓ VTE6 HAC VTE	--	--	--	--	--	--	--	--	--
<b>Timely &amp; Effective Care Pregnancy &amp; delivery care</b>									
↓ PC01 Elective Delivery	--	--	--	--	--	--	--	--	--
<b>Complications - Surgical Complications</b>									
↓ Hip and Knee Complications2	--	--	--	--	--	--	--	--	--
↓ PSI90 Complications / patient safety for selected indicators	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.00
↓ PSI4SURG COMP Death rate among surgical patients with serious treatable complications	--	--	--	--	--	--	--	--	--
<b>Readmissions &amp; deaths 30 day rates of readmission</b>									
↓ READM30 COPD Chronic obstructive pulmonary disease 30day readmission rate	12.5%	12.5%	16.7%	0.0%	11.1%	0.0%	37.5%	14.3%	0.0%
↓ READM30 AMI Acute myocardial infarction (AMI) 30day readmission rate	--	--	0.0%	--	100.0%	100.0%	--	--	0.0%
↓ READM30HF Heart Failure 30Day readmissions rate	60.0%	20.0%	0.0%	0.0%	25.0%	16.7%	0.0%	0.0%	22.2%
↓ READM30PN Pneumonia 30day readmission rate	0.0%	0.0%	20.0%	0.0%	18.2%	18.2%	17.4%	0.0%	25.0%
↓ READM30 STK Stroke 30day readmission rate	0.0%	--	0.0%	--	0.0%	0.0%	100.0%	0.0%	--
↓ READM30 CABG Coronary artery bypass graft (CABG) surgery 30day readmission rate2	--	--	--	--	--	--	--	--	--
↓ READM30 HIPKNEE 30day readmission rate following elective THA / TKA	--	--	--	--	--	--	--	--	--
↓ READM30 HOSPWIDE 30day hospitalwide allcause unplanned readmission	16.9%	9.3%	10.0%	9.5%	16.4%	11.3%	22.0%	16.7%	13.7%
<b>Readmissions &amp; deaths 30 day death (mortality) rates</b>									
↓ MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate	--	--	--	--	--	--	--	--	--
↓ MORT30 COPD 30day mortality rate COPD patients	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
↓ MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate	--	0.0%	0.0%	0.0%	0.0%	0.0%	--	--	0.0%
↓ MORT30HF Heart failure 30day mortality rate	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	20.0%	0.0%	0.0%
↓ MORT30PN Pneumonia 30day mortality rate	0.0%	0.0%	0.0%	0.0%	0.0%	7.1%	0.0%	0.0%	0.0%
↓ MORT30STK Stroke 30day mortality rate	0.0%	--	0.0%	0.0%	0.0%	0.0%	0.0%	--	0.0%
<b>Use of medical imaging Outpatient imaging efficiency</b>									
↕ OP8 MRI Lumbar Spine for Low Back Pain	--	--	--	--	--	--	--	--	--
↕ OP9 Mammography Followup Rates	3.7%	3.7%	3.7%	3.7%	3.7%	3.7%	--	--	--
↕ OP10 Abdomen CT Use of Contrast Material	6.0%	6.0%	6.0%	6.0%	6.0%	6.0%	--	--	--
↕ OP11 Thorax CT Use of Contrast Material	3.2%	3.2%	3.2%	3.2%	3.2%	3.2%	--	--	--
↕ OP13 Outpatients who got cardiac imaging stress tests before lowrisk outpatient surgery	--	--	--	--	--	--	--	--	--
↕ OP14 Outpatients with brain CT scans who got a sinus CT scan at the same time	--	--	--	--	--	--	--	--	--

	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18
↓ OP20 Door to Diagnostic Evaluation	53	37	36	48	30	41	32	--	--
↓ OP21 Time to pain medication for long bone fractures2	75	93.5	84	49	56	46.5	69	--	--
↓ OP22 Left without being seen	1.9%	2.6%	2.5%	2.0%	1.7%	1.3%	--	--	--
↑ OP23 Head CT stroke patients	--	1.00	1.00	1.00	0.50	1.00	0.00	--	--
<b>Timely &amp; Effective Care Preventive Care</b>									
↑ IMM2 Immunization for Influenza	--	--	--	97.8%	97.8%	98.9%	97.8%	--	--
↑ IMM3OP27 FACADHPCT HCW Influenza Vaccination	96.0%	96.0%	96.0%	96.0%	96.0%	96.0%	--	--	--
<b>Timely &amp; Effective Care Blood Clot Prevention &amp; Treatment</b>									
↑ VTE5 Warfarin Therapy at Discharge	--	--	--	--	--	--	--	--	--
↓ VTE6 HAC VTE	0.0%	0.0%	0.0%	0.0%	0.0%	33.3%	0.0%	--	--
<b>Timely &amp; Effective Care Pregnancy &amp; delivery care</b>									
↓ PC01 Elective Delivery	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	--	--
<b>Complications - Surgical Complications</b>									
↓ Hip and Knee Complications2	0.0	0.0	0.0	0.0	0.0	0.0	--	--	--
↓ PSI90 Complications / patient safety for selected indicators	0.98	0.89	0.82	1.04	1.01	0.86	0.77	0.88	0.69
↓ PSI4SURG COMP Death rate among surgical patients with serious treatable complications	294.12	62.50	235.29	218.75	266.67	214.29	125.00	111.11	117.65
<b>Readmissions &amp; deaths 30 day rates of readmission</b>									
↓ READM30 COPD Chronic obstructive pulmonary disease 30day readmission rate	19.7%	10.5%	20.8%	16.7%	22.7%	22.3%	17.2%	23.3%	25.4%
↓ READM30 AMI Acute myocardial infarction (AMI) 30day readmission rate	11.5%	10.4%	6.9%	15.7%	16.4%	14.1%	14.7%	17.0%	13.8%
↓ READM30HF Heart Failure 30Day readmissions rate	19.3%	39.5%	20.0%	27.1%	19.0%	11.1%	23.1%	23.7%	24.5%
↓ READM30PN Pneumonia 30day readmission rate	13.4%	18.4%	14.8%	9.5%	18.6%	20.2%	19.6%	19.3%	13.0%
↓ READM30 STK Stroke 30day readmission rate	11.1%	13.2%	14.3%	13.8%	8.9%	4.7%	9.3%	3.2%	13.9%
↓ READM30 CABG Coronary artery bypass graft (CABG) surgery 30day readmission rate2	7.1%	5.6%	3.8%	14.3%	4.5%	19.0%	0.0%	9.5%	12.5%
↓ READM30 HIPKNEE 30day readmission rate following elective THA / TKA	3.6%	3.3%	3.0%	4.1%	4.8%	3.7%	6.5%	5.8%	3.1%
↓ READM30 HOSPWIDE 30day hospitalwide allcause unplanned readmission	11.6%	11.6%	12.8%	10.9%	12.6%	11.9%	11.6%	13.0%	12.3%
<b>Readmissions &amp; deaths 30 day death (mortality) rates</b>									
↓ MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate	0.0%	5.3%	0.0%	0.0%	8.3%	0.0%	0.0%	0.0%	7.7%
↓ MORT30 COPD 30day mortality rate COPD patients	2.9%	1.6%	3.0%	5.3%	0.0%	1.0%	0.0%	1.3%	4.8%
↓ MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate	0.0%	0.0%	3.2%	3.6%	4.3%	1.5%	1.4%	2.0%	6.5%
↓ MORT30HF Heart failure 30day mortality rate	1.7%	4.8%	3.2%	1.6%	3.0%	5.9%	0.0%	1.6%	1.9%
↓ MORT30PN Pneumonia 30day mortality rate	6.8%	7.3%	0.0%	8.1%	6.3%	4.1%	10.9%	3.2%	5.1%
↓ MORT30STK Stroke 30day mortality rate	9.7%	2.3%	0.0%	11.4%	0.0%	2.3%	2.3%	3.0%	2.5%
<b>Use of medical imaging Outpatient imaging efficiency</b>									
↕ OP8 MRI Lumbar Spine for Low Back Pain	43.1%	43.1%	43.1%	43.1%	43.1%	43.1%	--	--	--
↕ OP9 Mammography Followup Rates	2.9%	2.9%	2.9%	2.9%	2.9%	2.9%	--	--	--
↕ OP10 Abdomen CT Use of Contrast Material	14.3%	14.3%	14.3%	14.3%	14.3%	14.3%	--	--	--
↕ OP11 Thorax CT Use of Contrast Material	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	--	--	--
↕ OP13 Outpatients who got cardiac imaging stress tests before lowrisk outpatient surgery	4.4%	4.4%	4.4%	4.4%	4.4%	4.4%	--	--	--
↕ OP14 Outpatients with brain CT scans who got a sinus CT scan at the same time	1.0%	1.0%	1.0%	1.0%	1.0%	1.0%	--	--	--

	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18
↓ OP20 Door to Diagnostic Evaluation	9	11	9	7	7	7	9	12	--
↓ OP21 Time to pain medication for long bone fractures2	39	49	53	73.5	33	36	45.5	46.5	--
↓ OP22 Left without being seen	1.6%	1.6%	0.2%	0.5%	0.7%	1.2%	0.6%	0.8%	0.7%
↑ OP23 Head CT stroke patients	0.50	--	1.00	--	0.00	1.00	0.00	--	--
<b>Timely &amp; Effective Care Preventive Care</b>									
↑ IMM2 Immunization for Influenza	--	--	--	98.8%	98.9%	100.0%	100.0%	100.0%	--
↑ IMM3OP27 FACADHPCT HCW Influenza Vaccination	97.0%	97.0%	97.0%	97.0%	97.0%	97.0%	--	--	--
<b>Timely &amp; Effective Care Blood Clot Prevention &amp; Treatment</b>									
↑ VTE5 Warfarin Therapy at Discharge	--	--	--	--	--	--	--	--	--
↓ VTE6 HAC VTE	0.0%	0.0%	--	0.0%	0.0%	0.0%	--	0.0%	--
<b>Timely &amp; Effective Care Pregnancy &amp; delivery care</b>									
↓ PC01 Elective Delivery	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	--
<b>Complications - Surgical Complications</b>									
↓ Hip and Knee Complications2	0.0	0.0	0.0	0.0	0.0	0.1	0.1	0.0	0.0
↓ PSI90 Complications / patient safety for selected indicators	0.99	1.05	1.06	1.05	0.99	1.09	1.20	--	--
↓ PSI4SURG COMP Death rate among surgical patients with serious treatable complications	0.00	200.00	0.00	142.86	0.00	0.00	0.00	0.00	0.00
<b>Readmissions &amp; deaths 30 day rates of readmission</b>									
↓ READM30 COPD Chronic obstructive pulmonary disease 30day readmission rate	14.3%	16.7%	15.8%	20.0%	0.0%	0.0%	5.3%	22.2%	6.7%
↓ READM30 AMI Acute myocardial infarction (AMI) 30day readmission rate	11.1%	7.1%	10.0%	0.0%	12.5%	11.8%	0.0%	8.3%	12.5%
↓ READM30HF Heart Failure 30Day readmissions rate	18.2%	8.3%	16.7%	42.9%	18.8%	13.0%	16.7%	31.3%	16.7%
↓ READM30PN Pneumonia 30day readmission rate	15.8%	8.3%	17.4%	11.4%	10.5%	10.8%	8.9%	15.4%	12.5%
↓ READM30 STK Stroke 30day readmission rate	0.0%	8.0%	20.0%	0.0%	14.3%	33.3%	0.0%	0.0%	0.0%
↓ READM30 CABG Coronary artery bypass graft (CABG) surgery 30day readmission rate2	--	--	--	--	--	--	--	--	--
↓ READM30 HIPKNEE 30day readmission rate following elective THA / TKA	0.0%	0.0%	0.0%	0.0%	4.5%	0.0%	8.3%	0.0%	--
↓ READM30 HOSPWIDE 30day hospitalwide allcause unplanned readmission	10.9%	7.7%	12.2%	12.2%	7.7%	9.3%	7.9%	9.5%	10.9%
<b>Readmissions &amp; deaths 30 day death (mortality) rates</b>									
↓ MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate	--	--	--	--	--	--	--	--	--
↓ MORT30 COPD 30day mortality rate COPD patients	6.7%	0.0%	0.0%	6.3%	0.0%	8.3%	0.0%	0.0%	0.0%
↓ MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate	18.2%	6.7%	0.0%	0.0%	5.9%	5.6%	0.0%	7.7%	20.0%
↓ MORT30HF Heart failure 30day mortality rate	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	14.3%
↓ MORT30PN Pneumonia 30day mortality rate	0.0%	3.8%	4.2%	2.8%	19.1%	11.9%	5.4%	2.5%	3.0%
↓ MORT30STK Stroke 30day mortality rate	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
<b>Use of medical imaging Outpatient imaging efficiency</b>									
↕ OP8 MRI Lumbar Spine for Low Back Pain	--	--	--	--	--	--	--	--	--
↕ OP9 Mammography Followup Rates	5.6%	5.6%	5.6%	5.6%	5.6%	5.6%	--	--	--
↕ OP10 Abdomen CT Use of Contrast Material	7.9%	7.9%	7.9%	7.9%	7.9%	7.9%	--	--	--
↕ OP11 Thorax CT Use of Contrast Material	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	--	--	--
↕ OP13 Outpatients who got cardiac imaging stress tests before lowrisk outpatient surgery	1.5%	1.5%	1.5%	1.5%	1.5%	1.5%	--	--	--
↕ OP14 Outpatients with brain CT scans who got a sinus CT scan at the same time	--	--	--	--	--	--	--	--	--

Lonesome Pine Hospital

	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18
↓ OP20 Door to Diagnostic Evaluation	30.5	24	29	30.5	27	34.5	22	--	--
↓ OP21 Time to pain medication for long bone fractures2	51	123	76	22	30	89	51	--	--
↓ OP22 Left without being seen	0.3%	0.1%	0.4%	0.4%	0.2%	0.4%	--	--	--
↑ OP23 Head CT stroke patients	0.50	--	1.00	--	--	--	0.00	--	--
<b>Timely &amp; Effective Care Preventive Care</b>									
↑ IMM2 Immunization for Influenza	--	--	--	97.6%	97.7%	97.1%	100.0%	--	--
↑ IMM3OP27 FACADHPCT HCW Influenza Vaccination	99.0%	99.0%	99.0%	99.0%	99.0%	99.0%	--	--	--
<b>Timely &amp; Effective Care Blood Clot Prevention &amp; Treatment</b>									
↑ VTE5 Warfarin Therapy at Discharge	--	--	--	--	--	--	--	--	--
↓ VTE6 HAC VTE	--	--	--	--	--	--	--	--	--
<b>Timely &amp; Effective Care Pregnancy &amp; delivery care</b>									
↓ PC01 Elective Delivery	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	--	--
<b>Complications - Surgical Complications</b>									
↓ Hip and Knee Complications2	0.0	--	0.0	--	0.0	0.0	--	--	--
↓ PSI90 Complications / patient safety for selected indicators	1.00	1.00	1.00	1.00	1.00	1.00	1.00	0.99	1.00
↓ PSI4SURG COMP Death rate among surgical patients with serious treatable complications	--	0.00	--	0.00	0.00	0.00	--	--	--
<b>Readmissions &amp; deaths 30 day rates of readmission</b>									
↓ READM30 COPD Chronic obstructive pulmonary disease 30day readmission rate	5.3%	7.7%	14.8%	15.0%	36.4%	27.8%	0.0%	23.1%	25.0%
↓ READM30 AMI Acute myocardial infarction (AMI) 30day readmission rate	100.0%	--	0.0%	--	0.0%	--	0.0%	0.0%	--
↓ READM30HF Heart Failure 30Day readmissions rate	50.0%	50.0%	20.0%	25.0%	80.0%	28.6%	10.0%	33.3%	27.3%
↓ READM30PN Pneumonia 30day readmission rate	40.0%	21.4%	21.4%	40.0%	20.0%	34.8%	15.4%	11.1%	35.0%
↓ READM30 STK Stroke 30day readmission rate	0.0%	--	--	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
↓ READM30 CABG Coronary artery bypass graft (CABG) surgery 30day readmission rate2	--	--	--	--	--	--	--	--	--
↓ READM30 HIPKNEE 30day readmission rate following elective THA / TKA	0.0%	--	0.0%	--	25.0%	0.0%	--	--	--
↓ READM30 HOSPWIDE 30day hospitalwide allcause unplanned readmission	12.2%	8.7%	10.7%	8.2%	16.5%	13.9%	8.5%	10.1%	17.2%
<b>Readmissions &amp; deaths 30 day death (mortality) rates</b>									
↓ MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate	--	--	--	--	--	--	--	--	--
↓ MORT30 COPD 30day mortality rate COPD patients	0.0%	7.1%	3.4%	0.0%	0.0%	0.0%	12.5%	5.6%	0.0%
↓ MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate	0.0%	--	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
↓ MORT30HF Heart failure 30day mortality rate	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
↓ MORT30PN Pneumonia 30day mortality rate	0.0%	0.0%	6.3%	0.0%	4.0%	0.0%	8.3%	0.0%	4.5%
↓ MORT30STK Stroke 30day mortality rate	0.0%	--	--	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
<b>Use of medical imaging Outpatient imaging efficiency</b>									
↕ OP8 MRI Lumbar Spine for Low Back Pain	47.7%	47.7%	47.7%	47.7%	47.7%	47.7%	--	--	--
↕ OP9 Mammography Followup Rates	5.2%	5.2%	5.2%	5.2%	5.2%	5.2%	--	--	--
↕ OP10 Abdomen CT Use of Contrast Material	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%	--	--	--
↕ OP11 Thorax CT Use of Contrast Material	3.9%	3.9%	3.9%	3.9%	3.9%	3.9%	--	--	--
↕ OP13 Outpatients who got cardiac imaging stress tests before lowrisk outpatient surgery	5.5%	5.5%	5.5%	5.5%	5.5%	5.5%	--	--	--
↕ OP14 Outpatients with brain CT scans who got a sinus CT scan at the same time	1.4%	1.4%	1.4%	1.4%	1.4%	1.4%	--	--	--

Norton Community Hospital

	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18
↓ OP20 Door to Diagnostic Evaluation	8	7	6	8	9	9	7	9	--
↓ OP21 Time to pain medication for long bone fractures2	66	69	62.5	43.5	57	123.5	43	110.5	--
↓ OP22 Left without being seen	0.2%	0.2%	0.1%	0.5%	0.1%	0.3%	0.4%	0.4%	0.2%
↑ OP23 Head CT stroke patients	--	--	1.00	--	--	0.50	--	--	--
<b>Timely &amp; Effective Care Preventive Care</b>									
↑ IMM2 Immunization for Influenza	--	--	--	100.0%	100.0%	100.0%	95.7%	100.0%	--
↑ IMM3OP27 FACADHPCT HCW Influenza Vaccination	97.0%	97.0%	97.0%	97.0%	97.0%	97.0%	--	--	--
<b>Timely &amp; Effective Care Blood Clot Prevention &amp; Treatment</b>									
↑ VTE5 Warfarin Therapy at Discharge	--	--	--	--	--	--	--	--	--
↓ VTE6 HAC VTE	--	--	--	--	--	--	--	--	--
<b>Timely &amp; Effective Care Pregnancy &amp; delivery care</b>									
↓ PC01 Elective Delivery	0.00%	--	--	0.00%	0.00%	0.00%	0.00%	0.00%	--
<b>Complications - Surgical Complications</b>									
↓ Hip and Knee Complications2	--	--	--	--	--	--	--	--	--
↓ PSI90 Complications / patient safety for selected indicators	1.00	0.99	1.06	1.11	1.00	1.07	1.00	--	--
↓ PSI4SURG COMP Death rate among surgical patients with serious treatable complications	--	1000.00	333.33	0.00	0.00	--	111.11	--	0.00
<b>Readmissions &amp; deaths 30 day rates of readmission</b>									
↓ READM30 COPD Chronic obstructive pulmonary disease 30day readmission rate	28.6%	50.0%	11.1%	27.8%	25.0%	7.1%	6.7%	12.5%	0.0%
↓ READM30 AMI Acute myocardial infarction (AMI) 30day readmission rate	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	100.0%	0.0%	0.0%
↓ READM30HF Heart Failure 30Day readmissions rate	0.0%	17.6%	0.0%	9.1%	30.0%	0.0%	25.0%	20.0%	12.5%
↓ READM30PN Pneumonia 30day readmission rate	16.7%	16.7%	18.2%	4.3%	14.3%	20.0%	10.0%	15.2%	5.3%
↓ READM30 STK Stroke 30day readmission rate	0.0%	0.0%	--	0.0%	0.0%	--	0.0%	0.0%	33.3%
↓ READM30 CABG Coronary artery bypass graft (CABG) surgery 30day readmission rate2	--	--	--	--	--	--	--	--	--
↓ READM30 HIPKNEE 30day readmission rate following elective THA / TKA	--	0.0%	--	--	--	--	--	--	--
↓ READM30 HOSPWIDE 30day hospitalwide allcause unplanned readmission	13.8%	12.8%	10.8%	12.1%	14.4%	12.2%	9.9%	11.7%	9.3%
<b>Readmissions &amp; deaths 30 day death (mortality) rates</b>									
↓ MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate	--	--	--	--	--	--	--	--	--
↓ MORT30 COPD 30day mortality rate COPD patients	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	5.9%	0.0%
↓ MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate	0.0%	0.0%	25.0%	0.0%	0.0%	0.0%	0.0%	50.0%	0.0%
↓ MORT30HF Heart failure 30day mortality rate	9.1%	0.0%	0.0%	0.0%	0.0%	0.0%	11.1%	9.1%	0.0%
↓ MORT30PN Pneumonia 30day mortality rate	0.0%	8.3%	0.0%	0.0%	4.5%	4.8%	0.0%	0.0%	5.0%
↓ MORT30STK Stroke 30day mortality rate	0.0%	0.0%	--	0.0%	0.0%	--	0.0%	0.0%	25.0%
<b>Use of medical imaging Outpatient imaging efficiency</b>									
↕ OP8 MRI Lumbar Spine for Low Back Pain	42.9%	42.9%	42.9%	42.9%	42.9%	42.9%	--	--	--
↕ OP9 Mammography Followup Rates	3.2%	3.2%	3.2%	3.2%	3.2%	3.2%	--	--	--
↕ OP10 Abdomen CT Use of Contrast Material	4.7%	4.7%	4.7%	4.7%	4.7%	4.7%	--	--	--
↕ OP11 Thorax CT Use of Contrast Material	0.8%	0.8%	0.8%	0.8%	0.8%	0.8%	--	--	--
↕ OP13 Outpatients who got cardiac imaging stress tests before lowrisk outpatient surgery	2.6%	2.6%	2.6%	2.6%	2.6%	2.6%	--	--	--
↕ OP14 Outpatients with brain CT scans who got a sinus CT scan at the same time	0.5%	0.5%	0.5%	0.5%	0.5%	0.5%	--	--	--

	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18
↓ OP20 Door to Diagnostic Evaluation	28.5	21	42	22	28	23	23.5	--	--
↓ OP21 Time to pain medication for long bone fractures2	78.5	39.5	55	44	78	75	55	--	--
↓ OP22 Left without being seen	2.1%	1.3%	1.6%	1.3%	1.1%	0.9%	--	--	--
↑ OP23 Head CT stroke patients	--	--	--	1.00	1.00	--	1.00	--	--
<b>Timely &amp; Effective Care Preventive Care</b>									
↑ IMM2 Immunization for Influenza	--	--	--	100.0%	100.0%	100.0%	98.9%	--	--
↑ IMM3OP27 FACADHPCT HCW Influenza Vaccination	99.0%	99.0%	99.0%	99.0%	99.0%	99.0%	--	--	--
<b>Timely &amp; Effective Care Blood Clot Prevention &amp; Treatment</b>									
↑ VTE5 Warfarin Therapy at Discharge	--	--	--	--	--	--	--	--	--
↓ VTE6 HAC VTE	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	--	--	--
<b>Timely &amp; Effective Care Pregnancy &amp; delivery care</b>									
↓ PC01 Elective Delivery	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	--	--
<b>Complications - Surgical Complications</b>									
↓ Hip and Knee Complications2	0.0	0.0	0.0	0.0	0.0	0.0	--	--	--
↓ PSI90 Complications / patient safety for selected indicators	0.93	0.93	0.82	1.08	0.97	0.77	1.00	0.89	1.13
↓ PSI4SURG COMP Death rate among surgical patients with serious treatable complications	222.22	214.29	222.22	150.00	100.00	545.45	235.29	166.67	125.00
<b>Readmissions &amp; deaths 30 day rates of readmission</b>									
↓ READM30 COPD Chronic obstructive pulmonary disease 30day readmission rate	26.0%	29.2%	18.3%	11.3%	28.8%	15.2%	19.6%	17.1%	23.6%
↓ READM30 AMI Acute myocardial infarction (AMI) 30day readmission rate	9.8%	3.2%	14.6%	8.9%	10.3%	5.6%	19.2%	14.6%	13.5%
↓ READM30HF Heart Failure 30Day readmissions rate	17.8%	30.0%	26.0%	27.5%	32.1%	17.0%	21.3%	16.3%	16.0%
↓ READM30PN Pneumonia 30day readmission rate	11.4%	16.7%	29.6%	19.2%	20.0%	16.7%	15.3%	14.0%	12.9%
↓ READM30 STK Stroke 30day readmission rate	15.4%	8.1%	10.8%	0.0%	4.8%	6.9%	15.4%	6.5%	20.0%
↓ READM30 CABG Coronary artery bypass graft (CABG) surgery 30day readmission rate2	15.2%	15.0%	6.3%	11.1%	13.0%	0.0%	23.8%	13.6%	11.1%
↓ READM30 HIPKNEE 30day readmission rate following elective THA / TKA	2.2%	4.4%	0.0%	0.0%	9.4%	5.9%	3.2%	4.0%	2.0%
↓ READM30 HOSPWIDE 30day hospitalwide allcause unplanned readmission	11.1%	12.8%	11.8%	10.9%	14.0%	10.3%	13.7%	11.0%	11.9%
<b>Readmissions &amp; deaths 30 day death (mortality) rates</b>									
↓ MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate	2.9%	0.0%	0.0%	10.0%	8.0%	6.3%	0.0%	0.0%	0.0%
↓ MORT30 COPD 30day mortality rate COPD patients	0.0%	2.0%	0.0%	5.9%	1.8%	1.5%	2.0%	2.6%	5.0%
↓ MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate	4.7%	0.0%	0.0%	8.0%	4.7%	11.9%	0.0%	2.2%	0.0%
↓ MORT30HF Heart failure 30day mortality rate	0.0%	1.6%	0.0%	3.6%	3.4%	0.0%	3.8%	0.0%	3.8%
↓ MORT30PN Pneumonia 30day mortality rate	7.7%	2.1%	0.0%	0.0%	3.9%	14.3%	4.2%	3.2%	7.9%
↓ MORT30STK Stroke 30day mortality rate	3.7%	4.9%	2.6%	0.0%	4.3%	6.3%	0.0%	6.1%	0.0%
<b>Use of medical imaging Outpatient imaging efficiency</b>									
↕ OP8 MRI Lumbar Spine for Low Back Pain	43.2%	43.2%	43.2%	43.2%	43.2%	43.2%	--	--	--
↕ OP9 Mammography Followup Rates	9.1%	9.1%	9.1%	9.1%	9.1%	9.1%	--	--	--
↕ OP10 Abdomen CT Use of Contrast Material	4.0%	4.0%	4.0%	4.0%	4.0%	4.0%	--	--	--
↕ OP11 Thorax CT Use of Contrast Material	0.2%	0.2%	0.2%	0.2%	0.2%	0.2%	--	--	--
↕ OP13 Outpatients who got cardiac imaging stress tests before lowrisk outpatient surgery	4.0%	4.0%	4.0%	4.0%	4.0%	4.0%	--	--	--
↕ OP14 Outpatients with brain CT scans who got a sinus CT scan at the same time	0.8%	0.8%	0.8%	0.8%	0.8%	0.8%	--	--	--

**Johnston Memorial Hospital**

	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18
↓ OP20 Door to Diagnostic Evaluation	15	16	16.5	14.5	14	17.5	20	22	--
↓ OP21 Time to pain medication for long bone fractures2	51	25	22	47	15	40	34	31	--
↓ OP22 Left without being seen	0.3%	0.2%	0.6%	0.1%	0.2%	0.1%	0.4%	0.1%	0.1%
↑ OP23 Head CT stroke patients	--	1.00	1.00	1.00	0.00	1.00	0.50	0.33	--
<b>Timely &amp; Effective Care Preventive Care</b>									
↑ IMM2 Immunization for Influenza	--	--	--	95.7%	97.8%	98.9%	93.7%	94.8%	--
↑ IMM3OP27 FACADHPCT HCW Influenza Vaccination	99.0%	99.0%	99.0%	99.0%	99.0%	99.0%	--	--	--
<b>Timely &amp; Effective Care Blood Clot Prevention &amp; Treatment</b>									
↑ VTE5 Warfarin Therapy at Discharge	--	--	--	--	--	--	--	--	--
↓ VTE6 HAC VTE	0.0%	0.0%	0.0%	0.0%	--	--	0.0%	--	--
<b>Timely &amp; Effective Care Pregnancy &amp; delivery care</b>									
↓ PC01 Elective Delivery	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	--
<b>Complications - Surgical Complications</b>									
↓ Hip and Knee Complications2	0.0	0.0	0.0	0.0	0.0	0.0	0.1	0.0	0.0
↓ PSI90 Complications / patient safety for selected indicators	1.07	1.07	0.98	0.98	1.05	0.98	1.09	--	--
↓ PSI4SURG COMP Death rate among surgical patients with serious treatable complications	333.33	0.00	250.00	166.67	166.67	0.00	500.00	166.67	333.33
<b>Readmissions &amp; deaths 30 day rates of readmission</b>									
↓ READM30 COPD Chronic obstructive pulmonary disease 30day readmission rate	27.1%	6.9%	35.7%	23.1%	20.8%	23.1%	32.3%	21.6%	7.7%
↓ READM30 AMI Acute myocardial infarction (AMI) 30day readmission rate	16.7%	0.0%	10.5%	0.0%	0.0%	9.1%	5.6%	10.0%	12.5%
↓ READM30HF Heart Failure 30Day readmissions rate	35.0%	25.0%	25.0%	26.1%	16.0%	33.3%	16.7%	21.1%	41.2%
↓ READM30PN Pneumonia 30day readmission rate	5.4%	20.7%	18.4%	17.6%	10.2%	19.6%	10.7%	13.6%	15.0%
↓ READM30 STK Stroke 30day readmission rate	0.0%	19.4%	0.0%	7.7%	25.0%	22.2%	18.2%	0.0%	0.0%
↓ READM30 CABG Coronary artery bypass graft (CABG) surgery 30day readmission rate2	--	--	--	--	--	--	--	--	--
↓ READM30 HIPKNEE 30day readmission rate following elective THA / TKA	0.0%	7.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	--
↓ READM30 HOSPWIDE 30day hospitalwide allcause unplanned readmission	15.5%	14.0%	14.5%	12.2%	15.0%	16.1%	13.3%	12.2%	11.4%
<b>Readmissions &amp; deaths 30 day death (mortality) rates</b>									
↓ MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate	--	--	--	--	--	--	--	--	--
↓ MORT30 COPD 30day mortality rate COPD patients	0.0%	11.1%	6.7%	0.0%	4.0%	0.0%	3.1%	11.9%	3.7%
↓ MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate	7.7%	6.5%	0.0%	0.0%	0.0%	4.3%	6.3%	16.7%	23.8%
↓ MORT30HF Heart failure 30day mortality rate	9.1%	6.5%	4.0%	0.0%	0.0%	3.6%	11.8%	5.0%	0.0%
↓ MORT30PN Pneumonia 30day mortality rate	5.1%	0.0%	7.3%	2.9%	3.9%	8.2%	6.8%	4.3%	11.1%
↓ MORT30STK Stroke 30day mortality rate	0.0%	0.0%	16.7%	0.0%	11.1%	0.0%	9.1%	25.0%	0.0%
<b>Use of medical imaging Outpatient imaging efficiency</b>									
↕ OP8 MRI Lumbar Spine for Low Back Pain	35.4%	35.4%	35.4%	35.4%	35.4%	35.4%	--	--	--
↕ OP9 Mammography Followup Rates	3.4%	3.4%	3.4%	3.4%	3.4%	3.4%	--	--	--
↕ OP10 Abdomen CT Use of Contrast Material	2.0%	2.0%	2.0%	2.0%	2.0%	2.0%	--	--	--
↕ OP11 Thorax CT Use of Contrast Material	0.8%	0.8%	0.8%	0.8%	0.8%	0.8%	--	--	--
↕ OP13 Outpatients who got cardiac imaging stress tests before lowrisk outpatient surgery	4.7%	4.7%	4.7%	4.7%	4.7%	4.7%	--	--	--
↕ OP14 Outpatients with brain CT scans who got a sinus CT scan at the same time	1.0%	1.0%	1.0%	1.0%	1.0%	1.0%	--	--	--

**FYTD2018 March 2018**

	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18
↓ OP20 Door to Diagnostic Evaluation	11	10	14	13	10	12	19	18.5	--
↓ OP21 Time to pain medication for long bone fractures2	28	16	24	14	41	42	35.5	27	--
↓ OP22 Left without being seen	0.1%	0.5%	0.2%	0.2%	0.7%	0.1%	0.7%	0.4%	0.1%
↑ OP23 Head CT stroke patients	0.00	--	1.00	--	1.00	--	--	--	--
<b>Timely &amp; Effective Care Preventive Care</b>									
↑ IMM2 Immunization for Influenza	--	--	--	100.0%	100.0%	100.0%	100.0%	100.0%	--
↑ IMM3OP27 FACADHPCT HCW Influenza Vaccination	98.0%	98.0%	98.0%	98.0%	98.0%	98.0%	--	--	--
<b>Timely &amp; Effective Care Blood Clot Prevention &amp; Treatment</b>									
↑ VTE5 Warfarin Therapy at Discharge	--	--	--	--	--	--	--	--	--
↓ VTE6 HAC VTE	--	--	--	--	--	--	--	--	--
<b>Timely &amp; Effective Care Pregnancy &amp; delivery care</b>									
↓ PC01 Elective Delivery	--	--	--	--	--	--	--	--	--
<b>Complications - Surgical Complications</b>									
↓ Hip and Knee Complications2	0.0	0.0	0.1	0.0	0.0	0.0	0.0	0.0	0.0
↓ PSI90 Complications / patient safety for selected indicators	1.00	1.00	1.00	1.00	1.00	1.00	1.00	--	--
↓ PSI4SURG COMP Death rate among surgical patients with serious treatable complications	--	--	0.00	--	--	--	--	--	--
<b>Readmissions &amp; deaths 30 day rates of readmission</b>									
↓ READM30 COPD Chronic obstructive pulmonary disease 30day readmission rate	14.3%	0.0%	6.3%	0.0%	20.0%	36.4%	18.8%	0.0%	30.0%
↓ READM30 AMI Acute myocardial infarction (AMI) 30day readmission rate	--	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	--	--
↓ READM30HF Heart Failure 30Day readmissions rate	0.0%	0.0%	0.0%	16.7%	0.0%	33.3%	25.0%	60.0%	33.3%
↓ READM30PN Pneumonia 30day readmission rate	11.1%	0.0%	12.5%	0.0%	12.5%	7.7%	7.7%	7.1%	30.0%
↓ READM30 STK Stroke 30day readmission rate	0.0%	0.0%	--	33.3%	--	0.0%	0.0%	0.0%	0.0%
↓ READM30 CABG Coronary artery bypass graft (CABG) surgery 30day readmission rate2	--	--	--	--	--	--	--	--	--
↓ READM30 HIPKNEE 30day readmission rate following elective THA / TKA	33.3%	0.0%	9.1%	8.3%	0.0%	0.0%	16.7%	25.0%	--
↓ READM30 HOSPWIDE 30day hospitalwide allcause unplanned readmission	5.6%	1.4%	11.4%	6.7%	8.4%	16.0%	10.0%	9.6%	19.6%
<b>Readmissions &amp; deaths 30 day death (mortality) rates</b>									
↓ MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate	--	--	--	--	--	--	--	--	--
↓ MORT30 COPD 30day mortality rate COPD patients	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
↓ MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate	--	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	--	--
↓ MORT30HF Heart failure 30day mortality rate	0.0%	0.0%	0.0%	0.0%	0.0%	14.3%	0.0%	0.0%	0.0%
↓ MORT30PN Pneumonia 30day mortality rate	0.0%	0.0%	0.0%	8.3%	0.0%	0.0%	4.2%	12.5%	0.0%
↓ MORT30STK Stroke 30day mortality rate	0.0%	0.0%	--	0.0%	100.0%	0.0%	0.0%	0.0%	0.0%
<b>Use of medical imaging Outpatient imaging efficiency</b>									
↕ OP8 MRI Lumbar Spine for Low Back Pain	--	--	--	--	--	--	--	--	--
↕ OP9 Mammography Followup Rates	3.8%	3.8%	3.8%	3.8%	3.8%	3.8%	--	--	--
↕ OP10 Abdomen CT Use of Contrast Material	0.5%	0.5%	0.5%	0.5%	0.5%	0.5%	--	--	--
↕ OP11 Thorax CT Use of Contrast Material	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	--	--	--
↕ OP13 Outpatients who got cardiac imaging stress tests before lowrisk outpatient surgery	3.7%	3.7%	3.7%	3.7%	3.7%	3.7%	--	--	--
↕ OP14 Outpatients with brain CT scans who got a sinus CT scan at the same time	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	--	--	--

Russell County Medical Center

	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18
↓ OP20 Door to Diagnostic Evaluation	8	8	8	8	10	12	17.5	18	--
↓ OP21 Time to pain medication for long bone fractures2	30	19	26	26	15	13.5	18	44	--
↓ OP22 Left without being seen	0.1%	0.5%	0.1%	0.1%	0.5%	0.2%	0.1%	0.1%	0.1%
↑ OP23 Head CT stroke patients	1.00	--	--	0.50	--	--	0.00	--	--
<b>Timely &amp; Effective Care Preventive Care</b>									
↑ IMM2 Immunization for Influenza	--	--	--	97.9%	100.0%	100.0%	100.0%	100.0%	--
↑ IMM3OP27 FACADHPCT HCW Influenza Vaccination	98.0%	98.0%	98.0%	98.0%	98.0%	98.0%	--	--	--
<b>Timely &amp; Effective Care Blood Clot Prevention &amp; Treatment</b>									
↑ VTE5 Warfarin Therapy at Discharge	--	--	--	--	--	--	--	--	--
↓ VTE6 HAC VTE	--	--	--	--	--	--	--	--	--
<b>Timely &amp; Effective Care Pregnancy &amp; delivery care</b>									
↓ PC01 Elective Delivery	--	--	--	--	--	--	--	--	--
<b>Complications - Surgical Complications</b>									
↓ Hip and Knee Complications2	--	--	--	--	--	--	--	--	--
↓ PSI90 Complications / patient safety for selected indicators	1.00	1.00	1.00	1.00	1.00	1.00	1.00	--	--
↓ PSI4SURG COMP Death rate among surgical patients with serious treatable complications	--	--	--	--	--	--	--	--	--
<b>Readmissions &amp; deaths 30 day rates of readmission</b>									
↓ READM30 COPD Chronic obstructive pulmonary disease 30day readmission rate	28.6%	30.8%	22.2%	20.0%	12.5%	18.2%	0.0%	11.1%	9.1%
↓ READM30 AMI Acute myocardial infarction (AMI) 30day readmission rate	--	100.0%	0.0%	--	0.0%	--	200.0%	--	--
↓ READM30HF Heart Failure 30Day readmissions rate	50.0%	40.0%	16.7%	0.0%	0.0%	25.0%	25.0%	0.0%	0.0%
↓ READM30PN Pneumonia 30day readmission rate	0.0%	0.0%	0.0%	28.6%	8.3%	0.0%	6.3%	11.1%	0.0%
↓ READM30 STK Stroke 30day readmission rate	--	--	--	--	0.0%	--	--	--	--
↓ READM30 CABG Coronary artery bypass graft (CABG) surgery 30day readmission rate2	--	--	--	--	--	--	--	--	--
↓ READM30 HIPKNEE 30day readmission rate following elective THA / TKA	--	--	--	--	--	--	--	--	--
↓ READM30 HOSPWIDE 30day hospitalwide allcause unplanned readmission	11.3%	21.4%	17.8%	10.6%	7.2%	11.7%	11.9%	14.7%	11.9%
<b>Readmissions &amp; deaths 30 day death (mortality) rates</b>									
↓ MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate	--	--	--	--	--	--	--	--	--
↓ MORT30 COPD 30day mortality rate COPD patients	12.5%	0.0%	0.0%	0.0%	11.1%	0.0%	0.0%	0.0%	0.0%
↓ MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate	--	0.0%	0.0%	--	0.0%	--	--	0.0%	--
↓ MORT30HF Heart failure 30day mortality rate	20.0%	0.0%	14.3%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
↓ MORT30PN Pneumonia 30day mortality rate	0.0%	0.0%	0.0%	12.5%	0.0%	12.5%	0.0%	0.0%	10.0%
↓ MORT30STK Stroke 30day mortality rate	--	--	--	--	0.0%	--	--	--	--
<b>Use of medical imaging Outpatient imaging efficiency</b>									
↕ OP8 MRI Lumbar Spine for Low Back Pain	--	--	--	--	--	--	--	--	--
↕ OP9 Mammography Followup Rates	1.4%	1.4%	1.4%	1.4%	1.4%	1.4%	--	--	--
↕ OP10 Abdomen CT Use of Contrast Material	3.3%	3.3%	3.3%	3.3%	3.3%	3.3%	--	--	--
↕ OP11 Thorax CT Use of Contrast Material	1.1%	1.1%	1.1%	1.1%	1.1%	1.1%	--	--	--
↕ OP13 Outpatients who got cardiac imaging stress tests before lowrisk outpatient surgery	3.8%	3.8%	3.8%	3.8%	3.8%	3.8%	--	--	--
↕ OP14 Outpatients with brain CT scans who got a sinus CT scan at the same time	--	--	--	--	--	--	--	--	--

	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18
↓ OP20 Door to Diagnostic Evaluation	0	0	1	0	0	0	1	--	--
↓ OP21 Time to pain medication for long bone fractures2	23	18.5	18.5	30	19.5	24	133	25	--
↓ OP22 Left without being seen	1.1%	0.6%	0.3%	0.7%	0.8%	0.4%	0.4%	0.6%	0.3%
↑ OP23 Head CT stroke patients	1.00	--	1.00	--	0.50	0.50	0.75	1.00	--
<b>Timely &amp; Effective Care Preventive Care</b>									
↑ IMM2 Immunization for Influenza	--	--	--	100.0%	98.2%	100.0%	100.0%	100.0%	--
↑ IMM3OP27 FACADHPCT HCW Influenza Vaccination	99.0%	99.0%	99.0%	99.0%	99.0%	99.0%	--	--	--
<b>Timely &amp; Effective Care Blood Clot Prevention &amp; Treatment</b>									
↑ VTE5 Warfarin Therapy at Discharge	--	--	--	--	--	--	--	--	--
↓ VTE6 HAC VTE	--	--	0.0%	--	--	--	--	--	--
<b>Timely &amp; Effective Care Pregnancy &amp; delivery care</b>									
↓ PC01 Elective Delivery	--	--	--	--	--	--	--	--	--
<b>Complications - Surgical Complications</b>									
↓ Hip and Knee Complications2	0.0	0.0	0.0	0.1	0.1	0.1	0.0	0.0	0.0
↓ PSI90 Complications / patient safety for selected indicators	0.99	0.99	1.00	1.07	1.20	1.06	1.00	--	--
↓ PSI4SURG COMP Death rate among surgical patients with serious treatable complications	--	0.00	0.00	0.00	200.00	0.00	--	0.00	1000.00
<b>Readmissions &amp; deaths 30 day rates of readmission</b>									
↓ READM30 COPD Chronic obstructive pulmonary disease 30day readmission rate	6.7%	6.7%	16.7%	32.0%	13.8%	16.7%	6.3%	20.5%	13.9%
↓ READM30 AMI Acute myocardial infarction (AMI) 30day readmission rate	0.0%	--	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
↓ READM30HF Heart Failure 30Day readmissions rate	33.3%	16.7%	9.1%	28.6%	9.1%	20.0%	0.0%	50.0%	10.0%
↓ READM30PN Pneumonia 30day readmission rate	16.7%	0.0%	6.7%	13.0%	10.7%	14.7%	8.3%	25.7%	14.6%
↓ READM30 STK Stroke 30day readmission rate	50.0%	33.3%	--	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
↓ READM30 CABG Coronary artery bypass graft (CABG) surgery 30day readmission rate2	--	--	--	--	--	--	--	--	--
↓ READM30 HIPKNEE 30day readmission rate following elective THA / TKA	0.0%	7.1%	7.7%	8.3%	0.0%	6.3%	0.0%	0.0%	--
↓ READM30 HOSPWIDE 30day hospitalwide allcause unplanned readmission	11.4%	6.1%	6.6%	11.4%	7.9%	12.1%	7.6%	10.0%	12.8%
<b>Readmissions &amp; deaths 30 day death (mortality) rates</b>									
↓ MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate	--	--	--	--	--	--	--	--	--
↓ MORT30 COPD 30day mortality rate COPD patients	3.2%	3.2%	4.5%	0.0%	0.0%	0.0%	3.1%	0.0%	2.7%
↓ MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate	0.0%	--	0.0%	0.0%	0.0%	0.0%	0.0%	33.3%	0.0%
↓ MORT30HF Heart failure 30day mortality rate	0.0%	0.0%	8.3%	0.0%	0.0%	0.0%	40.0%	0.0%	0.0%
↓ MORT30PN Pneumonia 30day mortality rate	0.0%	7.7%	6.3%	4.2%	6.7%	2.9%	9.6%	5.4%	0.0%
↓ MORT30STK Stroke 30day mortality rate	33.3%	0.0%	--	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
<b>Use of medical imaging Outpatient imaging efficiency</b>									
↕ OP8 MRI Lumbar Spine for Low Back Pain	--	--	--	--	--	--	--	--	--
↕ OP9 Mammography Followup Rates	7.2%	7.2%	7.2%	7.2%	7.2%	7.2%	--	--	--
↕ OP10 Abdomen CT Use of Contrast Material	3.2%	3.2%	3.2%	3.2%	3.2%	3.2%	--	--	--
↕ OP11 Thorax CT Use of Contrast Material	0.5%	0.5%	0.5%	0.5%	0.5%	0.5%	--	--	--
↕ OP13 Outpatients who got cardiac imaging stress tests before lowrisk outpatient surgery	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	--	--	--
↕ OP14 Outpatients with brain CT scans who got a sinus CT scan at the same time	1.2%	1.2%	1.2%	1.2%	1.2%	1.2%	--	--	--



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Johnson County Community Hospital

	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18
↓ OP20 Door to Diagnostic Evaluation	5	5	4	4	7.5	4	6.5	5.5	--
↓ OP21 Time to pain medication for long bone fractures2	22	76	19	22	--	27.5	34	43	--
↓ OP22 Left without being seen	1.1%	0.7%	0.9%	0.8%	0.8%	0.3%	0.3%	1.1%	0.3%
↑ OP23 Head CT stroke patients	--	--	--	--	--	1.00	--	--	--
<b>Timely &amp; Effective Care Preventive Care</b>									
↑ IMM2 Immunization for Influenza	--	--	--	100.0%	100.0%	100.0%	100.0%	100.0%	--
↑ IMM3OP27 FACADHPCT HCW Influenza Vaccination	--	--	--	--	--	--	--	--	--
<b>Timely &amp; Effective Care Blood Clot Prevention &amp; Treatment</b>									
↑ VTE5 Warfarin Therapy at Discharge	--	--	--	--	--	--	--	--	--
↓ VTE6 HAC VTE	--	--	--	--	--	--	--	--	--
<b>Timely &amp; Effective Care Pregnancy &amp; delivery care</b>									
↓ PC01 Elective Delivery	--	--	--	--	--	--	--	--	--
<b>Complications - Surgical Complications</b>									
↓ Hip and Knee Complications2	--	--	--	--	--	--	--	--	--
↓ PSI90 Complications / patient safety for selected indicators	--	--	--	--	--	--	--	--	--
↓ PSI4SURG COMP Death rate among surgical patients with serious treatable complications	--	--	--	--	--	--	--	--	--
<b>Readmissions &amp; deaths 30 day rates of readmission</b>									
↓ READM30 COPD Chronic obstructive pulmonary disease 30day readmission rate	--	--	--	--	--	--	--	--	--
↓ READM30 AMI Acute myocardial infarction (AMI) 30day readmission rate	--	--	--	--	--	--	--	--	--
↓ READM30HF Heart Failure 30Day readmissions rate	--	--	--	--	--	--	--	--	--
↓ READM30PN Pneumonia 30day readmission rate	--	--	--	--	--	--	--	--	--
↓ READM30 STK Stroke 30day readmission rate	--	--	--	--	--	--	--	--	--
↓ READM30 CABG Coronary artery bypass graft (CABG) surgery 30day readmission rate2	--	--	--	--	--	--	--	--	--
↓ READM30 HIPKNEE 30day readmission rate following elective THA / TKA	--	--	--	--	--	--	--	--	--
↓ READM30 HOSPWIDE 30day hospitalwide allcause unplanned readmission	--	--	--	--	--	--	--	--	--
<b>Readmissions &amp; deaths 30 day death (mortality) rates</b>									
↓ MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate	--	--	--	--	--	--	--	--	--
↓ MORT30 COPD 30day mortality rate COPD patients	--	--	--	--	--	--	--	--	--
↓ MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate	--	--	--	--	--	--	--	--	--
↓ MORT30HF Heart failure 30day mortality rate	--	--	--	--	--	--	--	--	--
↓ MORT30PN Pneumonia 30day mortality rate	--	--	--	--	--	--	--	--	--
↓ MORT30STK Stroke 30day mortality rate	--	--	--	--	--	--	--	--	--
<b>Use of medical imaging Outpatient imaging efficiency</b>									
↕ OP8 MRI Lumbar Spine for Low Back Pain	--	--	--	--	--	--	--	--	--
↕ OP9 Mammography Followup Rates	--	--	--	--	--	--	--	--	--
↕ OP10 Abdomen CT Use of Contrast Material	--	--	--	--	--	--	--	--	--
↕ OP11 Thorax CT Use of Contrast Material	--	--	--	--	--	--	--	--	--
↕ OP13 Outpatients who got cardiac imaging stress tests before lowrisk outpatient surgery	--	--	--	--	--	--	--	--	--
↕ OP14 Outpatients with brain CT scans who got a sinus CT scan at the same time	--	--	--	--	--	--	--	--	--

Unicoi County Memorial Hospital

	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18
↓ OP20 Door to Diagnostic Evaluation	7	8	7.5	7	4	8.5	7	8	7
↓ OP21 Time to pain medication for long bone fractures2	42	65	--	28	23	--	21.5	21.5	18
↓ OP22 Left without being seen	0.8%	0.3%	0.4%	0.7%	0.3%	0.2%	0.6%	0.2%	0.9%
↑ OP23 Head CT stroke patients	--	--	--	--	--	--	--	--	--
<b>Timely &amp; Effective Care Preventive Care</b>									
↑ IMM2 Immunization for Influenza	--	--	--	100.0%	82.9%	88.9%	93.0%	95.0%	92.1%
↑ IMM3OP27 FACADHPCT HCW Influenza Vaccination	98.0%	98.0%	98.0%	98.0%	98.0%	98.0%	--	--	--
<b>Timely &amp; Effective Care Blood Clot Prevention &amp; Treatment</b>									
↑ VTE5 Warfarin Therapy at Discharge	--	--	--	--	--	--	--	--	--
↓ VTE6 HAC VTE	--	--	--	--	--	--	--	--	--
<b>Timely &amp; Effective Care Pregnancy &amp; delivery care</b>									
↓ PC01 Elective Delivery	--	--	--	--	--	--	--	--	--
<b>Complications - Surgical Complications</b>									
↓ Hip and Knee Complications2	--	--	--	--	--	--	--	--	--
↓ PSI90 Complications / patient safety for selected indicators	--	--	--	--	--	--	--	--	--
↓ PSI4SURG COMP Death rate among surgical patients with serious treatable complications	--	--	--	--	--	--	--	--	--
<b>Readmissions &amp; deaths 30 day rates of readmission</b>									
↓ READM30 COPD Chronic obstructive pulmonary disease 30day readmission rate	--	--	--	--	--	--	--	--	--
↓ READM30 AMI Acute myocardial infarction (AMI) 30day readmission rate	--	--	--	--	--	--	--	--	--
↓ READM30HF Heart Failure 30Day readmissions rate	--	--	--	--	--	--	--	--	--
↓ READM30PN Pneumonia 30day readmission rate	--	--	--	--	--	--	--	--	--
↓ READM30 STK Stroke 30day readmission rate	--	--	--	--	--	--	--	--	--
↓ READM30 CABG Coronary artery bypass graft (CABG) surgery 30day readmission rate2	--	--	--	--	--	--	--	--	--
↓ READM30 HIPKNEE 30day readmission rate following elective THA / TKA	--	--	--	--	--	--	--	--	--
↓ READM30 HOSPWIDE 30day hospitalwide allcause unplanned readmission	--	--	--	--	--	--	--	--	--
<b>Readmissions &amp; deaths 30 day death (mortality) rates</b>									
↓ MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate	--	--	--	--	--	--	--	--	--
↓ MORT30 COPD 30day mortality rate COPD patients	--	--	--	--	--	--	--	--	--
↓ MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate	--	--	--	--	--	--	--	--	--
↓ MORT30HF Heart failure 30day mortality rate	--	--	--	--	--	--	--	--	--
↓ MORT30PN Pneumonia 30day mortality rate	--	--	--	--	--	--	--	--	--
↓ MORT30STK Stroke 30day mortality rate	--	--	--	--	--	--	--	--	--
<b>Use of medical imaging Outpatient imaging efficiency</b>									
↕ OP8 MRI Lumbar Spine for Low Back Pain	--	--	--	--	--	--	--	--	--
↕ OP9 Mammography Followup Rates	4.7%	4.7%	4.7%	4.7%	4.7%	4.7%	--	--	--
↕ OP10 Abdomen CT Use of Contrast Material	4.7%	4.7%	4.7%	4.7%	4.7%	4.7%	--	--	--
↕ OP11 Thorax CT Use of Contrast Material	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	--	--	--
↕ OP13 Outpatients who got cardiac imaging stress tests before lowrisk outpatient surgery	--	--	--	--	--	--	--	--	--
↕ OP14 Outpatients with brain CT scans who got a sinus CT scan at the same time	0.7%	0.7%	0.7%	0.7%	0.7%	0.7%	--	--	--

Laughlin Memorial Hospital

	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18
↓ OP20 Door to Diagnostic Evaluation	19	20	17	17	17	17	--	--	--
↓ OP21 Time to pain medication for long bone fractures2	62	57	74	74	74	74	--	--	--
↓ OP22 Left without being seen	0.3%	0.6%	0.3%	0.4%	0.7%	0.8%	--	--	--
↑ OP23 Head CT stroke patients	1.00	--	1.00	1.00	1.00	1.00	--	--	--
<b>Timely &amp; Effective Care Preventive Care</b>									
↑ IMM2 Immunization for Influenza	--	--	--	100.0%	98.1%	96.1%	--	--	--
↑ IMM3OP27 FACADHPCT HCW Influenza Vaccination	97.0%	97.0%	97.0%	97.0%	97.0%	97.0%	--	--	--
<b>Timely &amp; Effective Care Blood Clot Prevention &amp; Treatment</b>									
↑ VTE5 Warfarin Therapy at Discharge	--	--	--	--	--	--	--	--	--
↓ VTE6 HAC VTE	--	0.0%	--	--	--	--	--	--	--
<b>Timely &amp; Effective Care Pregnancy &amp; delivery care</b>									
↓ PC01 Elective Delivery	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	--	--	--
<b>Complications - Surgical Complications</b>									
↓ Hip and Knee Complications2	0.0	0.0	0.0	0.0	0.0	0.0	--	--	--
↓ PSI90 Complications / patient safety for selected indicators	1.09	1.09	1.09	1.09	1.09	1.09	--	--	--
↓ PSI4SURG COMP Death rate among surgical patients with serious treatable complications	135.88	135.88	135.88	135.88	135.88	135.88	--	--	--
<b>Readmissions &amp; deaths 30 day rates of readmission</b>									
↓ READM30 COPD Chronic obstructive pulmonary disease 30day readmission rate	19.8%	19.8%	19.8%	19.8%	19.8%	19.8%	--	--	--
↓ READM30 AMI Acute myocardial infarction (AMI) 30day readmission rate	16.6%	16.6%	16.6%	16.6%	16.6%	16.6%	--	--	--
↓ READM30HF Heart Failure 30Day readmissions rate	24.2%	24.2%	24.2%	24.2%	24.2%	24.2%	--	--	--
↓ READM30PN Pneumonia 30day readmission rate	18.3%	18.3%	18.3%	18.3%	18.3%	18.3%	--	--	--
↓ READM30 STK Stroke 30day readmission rate	12.1%	12.1%	12.1%	12.1%	12.1%	12.1%	--	--	--
↓ READM30 CABG Coronary artery bypass graft (CABG) surgery 30day readmission rate2	--	--	--	--	--	--	--	--	--
↓ READM30 HIPKNEE 30day readmission rate following elective THA / TKA	3.8%	3.8%	3.8%	3.8%	3.8%	3.8%	--	--	--
↓ READM30 HOSPWIDE 30day hospitalwide allcause unplanned readmission	16.3%	16.3%	16.3%	16.3%	16.3%	16.3%	--	--	--
<b>Readmissions &amp; deaths 30 day death (mortality) rates</b>									
↓ MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate	--	--	--	--	--	--	--	--	--
↓ MORT30 COPD 30day mortality rate COPD patients	6.9%	6.9%	6.9%	6.9%	6.9%	6.9%	--	--	--
↓ MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate	14.7%	14.7%	14.7%	14.7%	14.7%	14.7%	--	--	--
↓ MORT30HF Heart failure 30day mortality rate	15.4%	15.4%	15.4%	15.4%	15.4%	15.4%	--	--	--
↓ MORT30PN Pneumonia 30day mortality rate	19.9%	19.9%	19.9%	19.9%	19.9%	19.9%	--	--	--
↓ MORT30STK Stroke 30day mortality rate	14.1%	14.1%	14.1%	14.1%	14.1%	14.1%	--	--	--
<b>Use of medical imaging Outpatient imaging efficiency</b>									
↕ OP8 MRI Lumbar Spine for Low Back Pain	47.8%	47.8%	47.8%	47.8%	47.8%	47.8%	--	--	--
↕ OP9 Mammography Followup Rates	17.7%	17.7%	17.7%	17.7%	17.7%	17.7%	--	--	--
↕ OP10 Abdomen CT Use of Contrast Material	7.1%	7.1%	7.1%	7.1%	7.1%	7.1%	--	--	--
↕ OP11 Thorax CT Use of Contrast Material	3.2%	3.2%	3.2%	3.2%	3.2%	3.2%	--	--	--
↕ OP13 Outpatients who got cardiac imaging stress tests before lowrisk outpatient surgery	4.1%	4.1%	4.1%	4.1%	4.1%	4.1%	--	--	--
↕ OP14 Outpatients with brain CT scans who got a sinus CT scan at the same time	2.0%	2.0%	2.0%	2.0%	2.0%	2.0%	--	--	--

	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18
↓ OP20 Door to Diagnostic Evaluation	21	22	23	18	29	24	--	--	--
↓ OP21 Time to pain medication for long bone fractures2	79	99	99	110	92	103	--	--	--
↓ OP22 Left without being seen	3.3%	2.9%	1.9%	2.5%	2.1%	2.2%	--	--	--
↑ OP23 Head CT stroke patients	--	--	--	--	--	--	--	--	--
<b>Timely &amp; Effective Care Preventive Care</b>									
↑ IMM2 Immunization for Influenza	--	--	--	91.4%	98.1%	100.0%	--	--	--
↑ IMM3OP27 FACADHPCT HCW Influenza Vaccination	93.0%	93.0%	93.0%	93.0%	93.0%	93.0%	--	--	--
<b>Timely &amp; Effective Care Blood Clot Prevention &amp; Treatment</b>									
↑ VTE5 Warfarin Therapy at Discharge	--	--	--	--	--	--	--	--	--
↓ VTE6 HAC VTE	--	--	--	0.0%	0.0%	--	--	--	--
<b>Timely &amp; Effective Care Pregnancy &amp; delivery care</b>									
↓ PC01 Elective Delivery	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	--	--	--
<b>Complications - Surgical Complications</b>									
↓ Hip and Knee Complications2	--	--	--	--	--	--	--	--	--
↓ PSI90 Complications / patient safety for selected indicators	1.05	1.05	1.05	1.05	1.05	1.05	--	--	--
↓ PSI4SURG COMP Death rate among surgical patients with serious treatable complications	--	--	--	--	--	--	--	--	--
<b>Readmissions &amp; deaths 30 day rates of readmission</b>									
↓ READM30 COPD Chronic obstructive pulmonary disease 30day readmission rate	12.5%	0.0%	0.0%	0.0%	--	--	--	--	--
↓ READM30 AMI Acute myocardial infarction (AMI) 30day readmission rate	--	0.0%	0.0%	0.0%	--	--	--	--	--
↓ READM30HF Heart Failure 30Day readmissions rate	0.0%	0.0%	0.0%	0.0%	--	33.3%	--	--	--
↓ READM30PN Pneumonia 30day readmission rate	0.0%	0.0%	20.0%	9.1%	--	27.3%	--	--	--
↓ READM30 STK Stroke 30day readmission rate	0.0%	0.0%	0.0%	0.0%	--	0.0%	--	--	--
↓ READM30 CABG Coronary artery bypass graft (CABG) surgery 30day readmission rate2	--	--	--	--	--	--	--	--	--
↓ READM30 HIPKNEE 30day readmission rate following elective THA / TKA	12.5%	0.0%	50.0%	0.0%	--	--	--	--	--
↓ READM30 HOSPWIDE 30day hospitalwide allcause unplanned readmission	4.5%	4.7%	2.8%	3.6%	--	--	--	--	--
<b>Readmissions &amp; deaths 30 day death (mortality) rates</b>									
↓ MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate	--	--	--	--	--	--	--	--	--
↓ MORT30 COPD 30day mortality rate COPD patients	8.9%	8.9%	8.9%	8.9%	8.9%	8.9%	--	--	--
↓ MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate	--	--	--	--	--	--	--	--	--
↓ MORT30HF Heart failure 30day mortality rate	12.5%	12.5%	12.5%	12.5%	12.5%	12.5%	--	--	--
↓ MORT30PN Pneumonia 30day mortality rate	14.1%	14.1%	14.1%	14.1%	14.1%	14.1%	--	--	--
↓ MORT30STK Stroke 30day mortality rate	15.1%	15.1%	15.1%	15.1%	15.1%	15.1%	--	--	--
<b>Use of medical imaging Outpatient imaging efficiency</b>									
↕ OP8 MRI Lumbar Spine for Low Back Pain	--	--	--	--	--	--	--	--	--
↕ OP9 Mammography Followup Rates	17.7%	17.7%	17.7%	17.7%	17.7%	17.7%	--	--	--
↕ OP10 Abdomen CT Use of Contrast Material	6.9%	6.9%	6.9%	6.9%	6.9%	6.9%	--	--	--
↕ OP11 Thorax CT Use of Contrast Material	1.3%	1.3%	1.3%	1.3%	1.3%	1.3%	--	--	--
↕ OP13 Outpatients who got cardiac imaging stress tests before lowrisk outpatient surgery	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%	--	--	--
↕ OP14 Outpatients with brain CT scans who got a sinus CT scan at the same time	--	--	--	--	--	--	--	--	--

## ATTACHMENT 8

### UPDATED LISTS OF ANCILLARY AND POST-ACUTE SERVICES

- Bristol Regional Medical Center – 8a
- Dickenson County Hospital – 8b
- Franklin Wood Community Hospital – 8c
- Hancock County Hospital – 8d
- Hawkins County Memorial Hospital – 8e
- Holston Valley Medical Center – 8f
- Indian Path Medical Center – 8g
- Johnson County Community Hospital – 8h
- Johnson City Medical Center – 8i
- Johnston Memorial Hospital – 8j
- Laughlin Memorial Hospital – 8k
- Lonesome Pine Hospital – 8l
- Mountain View Regional Medical Center – 8m
- Norton Community Hospital – 8n
- Russell County Medical Center – 8o
- Smyth County Community Hospital – 8p
- Sycamore Shoals Hospital – 8q
- Takoma Regional Hospital – 8r
- Unicoi County Memorial Hospital – 8s

**Patient Choice Options for Ancillary and Post-Acute Services**

As a patient of Ballad Health you have the right to select any facility or agency to provide care ordered by your physician. If you have insurance, they may designate a selected network of providers for you depending on the care needed. Below you will find a list of facilities and agencies to assist you in making your decision.

**BRISTOL REGIONAL MEDICAL CENTER**

Service Type Category	Service Type	Affiliation	Facility Name	Address	City	State	Zip Code
Ancillary	Pharmacy	Ballad Health	Mountain States Pharmacy at JMH	16000 Johnston Memorial Drive	Abingdon	VA	24211
			Mountain States Pharmacy at Kingsport	1657 E Stone Drive	Kingsport	TN	37660
	All Other	Anderson Compounding Pharmacy		310 Bluff City Highway	Bristol	TN	37620
		Berry's Pharmacy		460 W Center Street	Kingsport	TN	37664
		Bloomingtondale Drug Center		2900 Bloomingtondale Road	Kingsport	TN	37660
		Blountville Drug Company		3090 Highway 126	Blountville	TN	37617
		Brookside Discount Pharmacy		1901 Brookside Drive	Kingsport	TN	37660
		Buntings & Northside Drug Center		1883 Euclid Avenue	Bristol	VA	24201
		Cave's Drug Store		1328 S John B Dennis Highway	Kingsport	TN	37660
		Colonial Heights Pharmacy		4221 Fort Henry Drive	Kingsport	TN	37663
		Custom Compounding Center of America		1567 N Eastman Road	Kingsport	TN	37664
		CVS Pharmacy-Abingdon		801 E Main Street	Abingdon	VA	24210
		CVS Pharmacy-Bristol TN 3		308 E Cedar Street	Bristol	TN	37620
		CVS Pharmacy-Bristol TN 1		3030 W State Street	Bristol	TN	37620
		CVS Pharmacy-Bristol TN 2		1379 Volunteer Parkway	Bristol	TN	37620
		CVS Pharmacy-Bristol VA		31 East Valley Drive	Bristol	VA	24201
		CVS Pharmacy-Kingsport 1		128 W Stone Drive	Kingsport	TN	37660
		CVS Pharmacy-Kingsport 2		4400 W Stone Drive	Kingsport	TN	37660
		CVS Pharmacy-Kingsport 3		5215 Memorial Boulevard	Kingsport	TN	37664
		CVS Pharmacy-Kingsport 4		4106 Fort Henry Drive	Kingsport	TN	37663
		CVS Pharmacy-Piney Flats		5674 Highway 11E	Piney Flats	TN	37686
		Falcon Pharmacy		795 Cummings Street	Abingdon	VA	24211
		Food City Pharmacy-Abingdon		396 Towne Center Drive	Abingdon	VA	24210
		Food City Pharmacy-Blountville		1921 Highway 394	Blountville	TN	37617
		Food City Pharmacy-Bristol 1		100 Bonham Road	Bristol	VA	24202
		Food City Pharmacy-Bristol 1		1430 Volunteer Parkway	Bristol	TN	37620
		Food City Pharmacy-Bristol 2		1317 Virginia Avenue	Bristol	TN	37620
		Food City Pharmacy-Bristol 2		1320 Euclid Avenue	Bristol	VA	24201
		Food City Pharmacy-Damascus		736 N Beaver Dam Avenue	Damascus	VA	24236
		Food City Pharmacy-Kingsport 1		1205 N Eastman Road	Kingsport	TN	37664
		Food City Pharmacy-Kingsport 2		1911 Moreland Drive	Kingsport	TN	37663
		Food City Pharmacy-Kingsport 3		300 Clinchfield Street	Kingsport	TN	37660
Food City Pharmacy-Piney Flats		6681 Bristol Highway	Piney Flats	TN	37686		
Glade Pharmacy		33472 Lee Highway	Glade Spring	VA	24340		
H Johnson Pharmacy		520 Bluff City Highway	Bristol	TN	37620		
Highlands Community Pharmacy		16400 Jeb Stuart Hwy	Abingdon	VA	24211		
Ingle's Market Pharmacy-Kingsport		4345 Fort Henry Drive	Kingsport	TN	37664		
K-Mart-Bristol		2854 W State Street	Bristol	TN	37620		
K-Mart-Kingsport		1805 E Stone Drive	Kingsport	TN	37660		
Kroger-Abingdon		466 Cummings Street	Abingdon	VA	24210		
Kroger-Bristol		31 Midway Street	Bristol	VA	24201		
Kroger-Kingsport		1664 E Stone Drive	Kingsport	TN	37660		

**Patient Choice Options for Ancillary and Post-Acute Services**

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**BRISTOL REGIONAL MEDICAL CENTER**

Service Type Category	Service Type	Affiliation	Facility Name	Address	City	State	Zip Code
			Laurel Family Drug	204 S Shady Avenue	Damascus	VA	24236
			MAC's Medicine Mart	1425 E Center Street	Kingsport	TN	37664
			Marcum's Pharmacy	121 E Ravine Road	Kingsport	TN	37660
			Michael's Pharmacy	101 Charwood Drive	Abingdon	VA	24210
			North Gate Pharmacy - Abingdon	26100 Lee Highway	Abingdon	VA	24211
			P & S Pharmacy	613 Watauga Street	Kingsport	TN	37660
			Piney Flats Drug Center	5908 Highway 11E	Piney Flats	TN	37686
			Pinney's Prescription Shop	1201 N Wilcox Drive	Kingsport	TN	37660
			Premier Pharmacy	109 Jack White Drive	Kingsport	TN	37664
			Rite Aid-Abingdon	711 W Main Street	Abingdon	VA	24210
			Rite Aid-Bristol	1200 Euclid Avenue	Bristol	VA	24201
			Rowe's Pharmacy	2416 Memorial Boulevard	Kingsport	TN	37664
			Rx Services Inc.	18377 Westinghouse Road	Abingdon	VA	24210
			Sam's Club-Bristol	13249 Lee Highway	Bristol	VA	24202
			Target-Bristol	16600 Highlands Center Boulevard	Bristol	VA	24202
			Target-Kingsport	2626 E Stone Drive	Kingsport	TN	37660
			Walgreens-Abingdon	668 W Main Street	Abingdon	VA	24210
			Walgreens-Blountville	2340 Highway 394	Blountville	TN	37617
			Walgreens-Bristol	1460 Lee Highway	Bristol	VA	24201
			Walgreens-Bristol 1	1388 Volunteer Parkway	Bristol	TN	37620
			Walgreens-Bristol 2	1 Medical Park Boulevard	Bristol	TN	37620
			Walgreens-Bristol 3	2412 W State Street	Bristol	TN	37620
			Walgreens-Kingsport 1	130 W Ravine Rd	Kingsport	TN	37660
			Walgreens-Kingsport 2	2200 Memorial Court	Kingsport	TN	37664
			Walgreens-Kingsport 3	1420 W Stone Drive	Kingsport	TN	37660
			Walgreens-Kingsport 4	2790 E Stone Drive	Kingsport	TN	37660
			Walgreens-Kingsport 5	4500 W Stone Drive	Kingsport	TN	37660
			Walgreens-Kingsport 6	3900 Fort Henry Drive	Kingsport	TN	37663
			Walgreens-Piney Flats	6740 Bristol Highway	Piney Flats	TN	37686
			Wal-Mart Pharmacy - Abingdon	16032 Fifteen Mile Boulevard	Abingdon	VA	24211
			Wal-Mart-Bristol 1	220 Century Boulevard	Bristol	TN	37620
			Wal-Mart-Bristol 2	13245 Lee Highway	Bristol	VA	24202
			Wal-Mart-Kingsport 1	2500 W Stone Drive	Kingsport	TN	37660
			Wal-Mart-Kingsport 2	3200 Fort Henry Drive	Kingsport	TN	37664
			Wal-Mart-Kingsport 3	750 Lynn Garden Drive	Kingsport	TN	37660
<b>Diagnostic</b>							
	CT	Ballad Health	Bristol Regional Medical Center	1 Medical Park Boulevard	Bristol	TN	37620
			Holston Valley Imaging Center, LLC	103 West Stone Drive	Kingsport	TN	37660
			Holston Valley Medical Center	130 West Ravine Road	Kingsport	TN	37662
			Indian Path Medical Center	2000 Brookside Drive	Kingsport	TN	37660
			Johnston Memorial Hospital	16000 Johnston Memorial Drive	Abingdon	VA	24211
			Volunteer Parkway Imaging Center	1230 Volunteer Parkway	Bristol	TN	37620
			Wellmont Urgent Care Abingdon	24530 Falcon Place Boulevard	Abingdon	VA	24210

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**BRISTOL REGIONAL MEDICAL CENTER**

Service Type Category	Service Type	Affiliation	Facility Name	Address	City	State	Zip Code			
	CT	All Other	Meadowview Outpatient Diagnostic Center	2033 Meadowview Lane	Kingsport	TN	37660			
			Sapling Grove Outpatient Diagnostic Center	240 Medical Park Boulevard	Bristol	TN	37620			
	MRI	Ballad Health	Holston Valley Imaging Center, LLC	103 West Stone Drive	Kingsport	TN	37660			
			Holston Valley Medical Center	130 West Ravine Road	Kingsport	TN	37662			
			Indian Path Medical Center	2000 Brookside Drive	Kingsport	TN	37660			
			Johnston Memorial Hospital	16000 Johnston Memorial Drive	Abingdon	VA	24211			
			Volunteer Parkway Imaging Center	1230 Volunteer Parkway	Bristol	TN	37620			
		All Other	Appalachian Orthopaedic Associates - Bristol	1 Medical Park Blvd	Bristol	TN	37620			
			Meadowview Outpatient Diagnostic Center	2033 Meadowview Lane	Kingsport	TN	37660			
			Sapling Grove Outpatient Diagnostic Center	240 Medical Park Boulevard	Bristol	TN	37620			
				XRAY	Ballad Health	Blue Ridge Orthopedics & Sports Medicine	16000 Johnston Memorial Drive	Abingdon	VA	24211
						Blue Ridge Radiology PC	3053 W State Street	Bristol	TN	37620
Bristol Regional Medical Center	1 Medical Park Boulevard	Bristol				TN	37620			
Bristol Surgery Center, LLC	350 Blountville Highway	Bristol				TN	37620			
Holston Valley Imaging Center, LLC	103 West Stone Drive	Kingsport				TN	37660			
Holston Valley Medical Center	130 West Ravine Road	Kingsport				TN	37662			
Holston Valley Outpatient Center	111 W Stone Drive	Kingsport				TN	37660			
Indian Path Medical Center	2000 Brookside Drive	Kingsport				TN	37660			
Johnston Memorial Hospital	16000 Johnston Memorial Drive	Abingdon				VA	24211			
Regional Orthopaedic Trauma Center	117 W Sevier Avenue	Kingsport				TN	37660			
Wellmont Medical Associates Inc.	24530 Falcon Place Boulevard	Abingdon	VA	24211						
		All Other	Abingdon Foot & Ankle Clinic	1231 W Main Street	Abingdon	VA	24210			
			Appalachian Orthopaedic Associates - Bristol	1 Medical Park Blvd	Bristol	TN	37620			
			Appalachian Orthopedic Associates - Bristol	260 Midway Medical Park	Bristol	TN	37620			
			Daniel Bradford McMahan DC	1728 N Eastman Road	Kingsport	TN	37664			
			David H Franzus MD	121 E Ravine Road	Kingsport	TN	37660			
			Family Footcare	421 W Stone Drive	Kingsport	TN	37660			
			Highlands Podiatry PLC	2765 W State Street	Bristol	TN	37620			
			Holston Family Health Center	306 S Shady Avenue	Damascus	VA	24236			
			Holston Medical Group - Bristol	320 Bristol West Boulevard	Bristol	TN	37620			
			Holston Medical Group - Kingsport 2	4848 Fort Henry Drive	Kingsport	TN	37663			
			Holston Medical Group - Kingsport 3	105 W Stone Drive	Kingsport	TN	37660			
			Holston Medical Group - Kingsport 4	2033 Meadowview Lane	Kingsport	TN	37660			
			Holston Medical Group Urgent Care - Bristol 1	240 Medical Park Boulevard	Bristol	TN	37620			
			Kingsport Podiatry	2004 American Way	Kingsport	TN	37660			
			Mountain Region Family Medicine	101 Professional Park Pvt Drive	Kingsport	TN	37663			
			Mountain Region Family Medicine	444 Clinchfield Street	Kingsport	TN	37660			
			Muncy Family Chiropractic	300 Moore Street	Bristol	VA	24201			
			Practice of Booher, Jeffrey R	615 Volunteer Parkway	Bristol	TN	37620			
			Practice of Chapman, Richard E	135 W Ravine Road	Kingsport	TN	37660			
			Sheri Denise Wingate DC	5661 Highway 11 E	Piney Flats	TN	37686			

**Patient Choice Options for Ancillary and Post-Acute Services**

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**BRISTOL REGIONAL MEDICAL CENTER**

Service Type Category	Service Type	Affiliation	Facility Name	Address	City	State	Zip Code
			Urology Associates of Kingsport	822 Broad Street	Kingsport	TN	37660
<b>Home Health</b>							
	Home Health	Ballad Health	Advanced Home Care, Inc.-Kingsport	105 Jack White Drive	Kingsport	TN	37664
			Ballad Health Home Health	312 Cummings Street	Abingdon	VA	24210
		All Other	Abingdon Home Care	361 Falls Dr	Abingdon	VA	24210
			Amedisys Home Health - Kingsport	116 Jack White Dr	Kingsport	TN	37664
			Amedisys Home Health Care - Abingdon	16009 Porterfield Hwy	Abingdon	VA	24210
			American Home Health	2681 Lee Highway	Bristol	VA	24202
			Apria Healthcare	2021 Brookside Ln	Kingsport	TN	37660
			Bristol Home Health Services	29 Lancaster Street	Bristol	VA	24201
			Divine Home Care	111 Commonwealth Avenue	Bristol	VA	24201
			Home Nursing Services of Southwest VA	611 Campus Drive	Abingdon	VA	24210
			Intrepid USA Healthcare Services - Abingdon	15856 Porterfield Highway	Abingdon	VA	24210
			Kindred at Home	2004 American Way	Kingsport	TN	37660
			Smoky Mountain Home Health and Hospice - Kingsport	106 Ferrell Ave	Kingsport	TN	37663
			Team Nurse	470 E Main St	Abingdon	VA	24210
	Home Health	All Other	Medical Services of America Home Health and Hospice - Abingdo	574 Cummings St	Abingdon	VA	24210
<b>Hospice/Palliative Care</b>							
	Hospice	Ballad Health	Wellmont Hospice House	280 Steeles Rd	Bristol	TN	37620
			Ballad Health Hospice	312 Cummings Street	Abingdon	VA	24210
		All Other	Amedisys Hospice - Kingsport	116 Jack White Dr	Kingsport	TN	37664
			Avalon Hospice - Kingsport	4619 Fort Henry Dr	Kingsport	TN	37663
			BrightStar Care	140 Sprint Dr	Blountville	TN	37617
			Caris Healthcare Bristol	1701 Euclid Ave	Bristol	VA	24201
			Hometown Hospice - Abingdon	611 Campus Dr	Abingdon	VA	24210
			Hospice of Southwest VA	301 Valley St NE	Abingdon	VA	24210
			Medical Services of America Home Health & Hospice - Abingdon	574 Cummings St	Abingdon	VA	24210
			Medical Services of America Home Health and Hospice - Abingdo	574 Cummings St	Abingdon	VA	24210
			Smoky Mountain Home Health & Hospice - Kingsport	106 Ferrell Ave	Kingsport	TN	37663
<b>O/P Therapy</b>							
	Rehabilitation & Physical Therapy	Ballad Health	Bristol Regional Outpatient Rehabilitation	1996 West State Street	Bristol	TN	37620
			Function Better Physical Therapy	136 Bristol East Road	Bristol	VA	24202
			Mountain States Rehabilitation-Indian Path	2204 Pavilion Drive	Kingsport	TN	37660
			Results Physiotherapy Bristol	320 Bristol West Boulevard	Bristol	TN	37620
			Sullivan Center Outpatient Rehabilitation and Physical Therapy	103 West Stone Drive	Kingsport	TN	37660
			The Hand Center at Bristol Regional	1 Medical Park Boulevard	Bristol	TN	37620
			Wellmont Physical Therapy Abingdon	24530 Falcon Pl Blvd	Abingdon	VA	24211
			Wellmont Physical Therapy at the YMCA	1100 Franklin Square	Kingsport	TN	37664
			Outpatient Neurologic and Pediatric Rehab	1 Medical Park Boulevard	Bristol	TN	37620
			Mountain States Outpatient Rehab - Johnston Memorial Hospital	445 Porterfield Hwy	Abingdon	VA	24210

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**BRISTOL REGIONAL MEDICAL CENTER**

Service Type Category	Service Type	Affiliation	Facility Name	Address	City	State	Zip Code		
O/P Therapy	Rehabilitation & Physical Therapy	Ballad Health	Outpatient Physical Therapy at the YMCA	1840 Meadowview Road	Kingsport	TN	37660		
		All Other	Abingdon Therapy Services	611 Campus Drive	Abingdon	VA	24210		
			Achieve Health and Wellness - Kingsport	1732 N Eastman Rd	Kingsport	TN	37664		
			Advance Physical Therapy	1101 E Stone Drive	Kingsport	TN	37660		
			Ann B. Fleenor	370 E Main Street	Abingdon	VA	24210		
			Appalachian Orthopedic Associates - Bristol	260 Midway Medical Park	Bristol	TN	37620		
			Appalachian Rehabilitation and Sports Medicine	105 Meadow View Rd	Bristol	TN	37620		
			BenchMark Physical Therapy - Abingdon	26106 Lee Hwy	Abingdon	VA	24211		
			Benchmark Physical Therapy-Bristol	1430 Volunteer Parkway	Bristol	TN	37620		
			Benchmark Physical Therapy-Kingsport	1 Sheridan Square	Kingsport	TN	37660		
			Blue Mountain Therapy	18596 Lee Hwy	Abingdon	VA	24210		
			Colonial Heights Physical Therapy	5334 Fort Henry Drive	Kingsport	TN	37663		
			Comprehensive Community Services-Kingsport 1	6145 Temple Star Road	Kingsport	TN	37660		
			Comprehensive Community Services-Kingsport 2	702 E Sullivan Street	Kingsport	TN	37660		
			Cornerstone Therapy & Balance	16487 Jeb Stuart Highway	Abingdon	VA	24211		
			Highlands Neurosurgery	1 Medical Park Boulevard	Bristol	TN	37620		
			HMG Rehabilitation at Sapling Grove	240 Medical Park Blvd	Bristol	TN	37620		
			Holston Medical Group - Kingsport 1	2323 N John B Dennis Highway	Kingsport	TN	37660		
			Holston Medical Group Rehabilitation Services	105 W Stone Drive	Kingsport	TN	37660		
			Results Physiotherapy-Kingsport, TN-Clinchfield	444 Clinchfield Street	Kingsport	TN	37660		
			TriCities Spine	320 Bristol West Boulevard	Bristol	TN	37620		
			Watauga Physical Therapy	518 E Main St	Abingdon	VA	24210		
			CORA Physical Therapy - Bristol	1159 Volunteer Parkway	Bristol	TN	37620		
			CORA Physical Therapy - Kingsport	1825 N Eastman Rd	Kingsport	TN	37664		
			IP Rehab	All Other	HealthSouth Rehabilitaton Hospital	113 Cassell Drive	Kingsport	TN	37660
					The Rehabilitation Hospital of SouthWest Virginia	103 North Street	Bristol	VA	24201
		Psych Hospital	IP Psych Services	Ballad Health	Bristol Regional Medical Center - MedPsych Unit	1 Medical Park Boulevard	Bristol	TN	37620
	Ridgeview Pavilion			103 North Street	Bristol	VA	24201		
SNF	LTAC	Ballad Health	Select Specialty @ Bristol Regional Medical Center	1 Medical Park Boulevard	Bristol	TN	37620		
		Ballad Health	The Wexford House	2421 John B. Dennis Parkway	Kingsport	TN	37660		
		All Other	Abingdon Health & Rehab Center	15051 Harmony Hills Lane	Abingdon	VA	24211		
	Brookhaven Manor		2035 Stonebrook Place	Kingsport	TN	37660			
	Grace Healthcare of Abingdon		600 Walden Road	Abingdon	VA	24210			
	Grandview Adult Care		27294 Denton Valley Rd	Abingdon	VA	24211			
	Greystone Health Care Center		181 Dunlap Road	Blountville	TN	37617			
	Holston Manor		3641 Memorial Boulevard	Kingsport	TN	37664			
	NHC HealthCare - Bristol		245 North St	Bristol	VA	24201			
	Preston Square Rehab/Wellness		2426 Lee Highway	Bristol	VA	24202			
	The Cambridge House		250 Bellebrook Road	Bristol	TN	37620			

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**BRISTOL REGIONAL MEDICAL CENTER**

Service Type Category	Service Type	Affiliation	Facility Name	Address	City	State	Zip Code
SNF	Nursing Home	All Other	NHC Transitional Care	2000 Brookside Drive	Kingsport	TN	37660
			Asbury Place	100 Netherland Ln	Kingsport	TN	37660
Therapeutic	Chemotherapy	Ballad Health	Christine LaGuardia Phillips Cancer Center (HVMC)	130 W Ravine Road	Kingsport	TN	37660
			J.D. and Lorraine Nicewonder Cancer Center (BRMC)	1 Medical Park Boulevard	Bristol	TN	37620
			Regional Cancer Center at Indian Path Medical Center	2205 Pavilion Drive	Kingsport	TN	37660
			Regional Cancer Center at Johnston Memorial Hospital	16000 Johnston Memorial Drive	Abingdon	VA	24211
	Dialysis Services	All Other	Fresenius Medical Care-Abingdon	341 Falls Drive NW	Abingdon	VA	24210
			Fresenius Medical Care-Bristol	2530 W State Street	Bristol	TN	37620
			Fresenius Medical Care-Kingsport	2002 Brookside Drive	Kingsport	TN	37660
			Fresenius Medical Care-West Kingsport	3600 Netherland Inn Road	Kingsport	TN	37660
	Radiation Therapy	Ballad Health	Hiberian Nephrology Group	323 Falls Drive NW	Abingdon	VA	24210
			Christine LaGuardia Phillips Cancer Center (HVMC)	130 W Ravine Road	Kingsport	TN	37660
			J.D. and Lorraine Nicewonder Cancer Center (BRMC)	1 Medical Park Boulevard	Bristol	TN	37620
			Regional Cancer Center at Indian Path Medical Center	2205 Pavilion Drive	Kingsport	TN	37660
			Regional Cancer Center at Johnston Memorial Hospital	16000 Johnston Memorial Drive	Abingdon	VA	24211

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**DICKENSON COMMUNITY HOSPITAL**

Service Type Category	Service Type	Affiliation	Facility Name	Address	City	State	Zip Code
<b>Ancillary</b>	<b>Pharmacy</b>	Ballad Health	<b>Mountain States Pharmacy at NCH</b>	96 15th Street NW	Norton	VA	24273
		All Other	<b>Big Stone Gap Pharmacy</b>	1980 Holton Avenue E	Big Stone Gap	VA	24219
			<b>Cavalier Pharmacy</b>	301 Church Street NW	Wise	VA	24293
			<b>Cornerstone Pharmacy</b>	205 Kilbourne Avenue	Appalachia	VA	24216
			<b>CVS Pharmacy-Big Stone Gap</b>	605 Wood Avenue E	Big Stone Gap	VA	24219
			<b>CVS Pharmacy-Norton</b>	1128 Park Avenue NW	Norton	VA	24273
			<b>Family Drug Center - Coeburn</b>	517 West Front Street	Coeburn	VA	24230
			<b>Family Drug, Inc.</b>	14 E 27th Street N	Big Stone Gap	VA	24219
			<b>Food City Pharmacy - Clintwood</b>	410 Chase Street	Clintwood	VA	24228
			<b>Food City Pharmacy-Big Stone Gap</b>	603 Wood Avenue E	Big Stone Gap	VA	24219
			<b>Food City Pharmacy-Wise</b>	207 Woodland Drive SW	Wise	VA	24293
			<b>Green Wave Pharmacy</b>	165 McClure Avenue	Clintwood	VA	24228
			<b>Hancock-Lambert Pharmacy</b>	342 Main Street	Clintwood	VA	24228
			<b>Haysi Drug Center</b>	23906 Dickenson Highway	Haysi	VA	24256
			<b>Jones &amp; Counts Pharmacy</b>	251 Main Street	Haysi	VA	24256
			<b>Lonesome Pine Economy Drug</b>	517 Park Avenue	Norton	VA	24273
			<b>Pound Discount Pharmacy</b>	11133 Indian Creek Road	Pound	VA	24279
			<b>Rite Aid-Clintwood</b>	Highway 83 and Brushcreek	Clintwood	VA	24228
			<b>Rite Aid-Coeburn</b>	101 Laurel Avenue	Coeburn	VA	24230
			<b>Rite Aid-Pound</b>	11223 Indian Creek Road	Pound	VA	24279
			<b>Union Drug</b>	322 Cloverleaf Square	Big Stone Gap	VA	24219
			<b>Wal-Mart-Norton</b>	780 Commonwealth Drive	Norton	VA	24273
			<b>West End Pharmacy</b>	340 Colley Shopping Center	Clintwood	VA	24228
			<b>Wildcat Pharmacy</b>	8461 Main Street	Pound	VA	24279
			<b>Rite Aid - St. Paul</b>	16435 Wise Street	St Paul	VA	24283
			<b>Community Hospital Pharmacy</b>	100 15th Street NW	Norton	VA	24273
			<b>Hamilton's Pharmacy</b>	16610 Russell Street	St Paul	VA	24283
<b>Diagnostic</b>	<b>CT</b>	Ballad Health	<b>Dickenson Community Hospital</b>	312 Hospital Drive	Clintwood	VA	24228
			<b>Norton Community Hospital</b>	100 Fifteenth Street, NW	Norton	VA	24273
			<b>Southwest Virginia Cancer Center</b>	671 Highway 58 East	Norton	VA	24273
			<b>Wellmont Lonesome Pine Hospital</b>	1990 Holton Avenue, East	Big Stone Gap	VA	24219
			<b>Wellmont Mountain View Regional Medical Center</b>	310 Third Street, NE	Norton	VA	24273
	<b>MRI</b>	Ballad Health	<b>Norton Community Hospital</b>	100 Fifteenth Street, NW	Norton	VA	24273
			<b>Wellmont Lonesome Pine Hospital</b>	1990 Holton Avenue, East	Big Stone Gap	VA	24219
			<b>Wellmont Mountain View Regional Medical Center</b>	310 Third Street, NE	Norton	VA	24273
	<b>XRAY</b>	Ballad Health	<b>Dickenson Community Hospital</b>	312 Hospital Drive	Clintwood	VA	24228
			<b>Norton Community Hospital</b>	100 Fifteenth Street, NW	Norton	VA	24273
			<b>Southwest Virginia Cancer Center</b>	671 Highway 58 East	Norton	VA	24273
			<b>Wellmont Lonesome Pine Hospital</b>	1990 Holton Avenue, East	Big Stone Gap	VA	24219

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As of 6/30/18

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**DICKENSON COMMUNITY HOSPITAL**

Service Type Category	Service Type	Affiliation	Facility Name	Address	City	State	Zip Code	
Diagnostic	XRAY	All Other	Family Foot & Anke Clinics	2537 4th Avenue E	Big Stone Gap	VA	24219	
			Lonesome Pine Orthopedic	767 Wood Avenue E	Big Stone Gap	VA	24219	
			Matthew B Jessee DC	135 Plaza Road SW	Wise	VA	24293	
			Stone Mountain Health Services	162 Medical Center Boulevard	Haysi	VA	24256	
<b>Home Health</b>								
Home Health	Home Health	Ballad Health	Ballad Health Home Care and Hospice	312 Hospital Drive	Clintwood	VA	24228	
			Ballad Health Home Health	716 Spring Avenue NE	Wise	VA	24273	
	All Other			Advanced Home Care - Wise	165 Plaza Road	Wise	VA	24293
				First Choice Home Health Care	46 7th Street	Norton	VA	24273
				Home Nursing Company - Clintwood	215 Clintwood Highway	Clintwood	VA	24228
				In Home Care	201 Nottingham Avenue	Wise	VA	24293
				Intrepid USA Healthcare Services - Big Stone Gap	310 Cloverleaf Sq	Big Stone Gap	VA	24219
				Medical Services of America Home Health and Hospice - Wise	413 E Main St	Wise	VA	24293
				Mountain Region Home Health - Coeburn	330 Front St E	Coeburn	VA	24230
				Total Home Care	4890 Clintwood Highway	Clintwood	VA	24228
				Caring Touch Home Health	8463 Main Street	Pound	VA	24279
NHC Home Health	100 15th Street	Norton	VA	24228				
<b>Hospice/Palliative Care</b>								
Hospice	Hospice	Ballad Health	Ballad Health Hospice	312 Hospital Drive	Clintwood	VA	24228	
			All Other			Heritage Hall - Big Stone Gap	2045 Valley View Dr	Big Stone Gap
	Heritage Hall - Clintwood	1225 E Main St				Clintwood	VA	24228
	Heritage Hall - Wise	9434 Coeburn Mountain Rd				Wise	VA	24293
	Medical Services of America Home Health and Hospice - Wise	413 E Main St				Wise	VA	24293
	Medical Services of America Hospice - Wise	413 E Main St				Wise	VA	24293
	Hospice and Palliative Care of VA	738 Park Avenue NW #3	Norton	VA	24210			
<b>O/P Therapy</b>								
Rehabilitation & Physical Therapy	Ballad Health		Lonesome Pine Outpatient Rehabilitation	1980 Holton Avenue East	Big Stone Gap	VA	24219	
			Mountain States Rehabilitation-Norton	1442 Park Avenue SW	Norton	VA	24273	
			Mountain View Regional Outpatient Rehabilitation	295 Wharton Lane	Norton	VA	24273	
			Mountain States Outpatient Rehab - Dickenson Community Hosp	312 Hospital Drive	Clintwood	VA	24210	
	All Other			Appalachian Physical Therapy	348 Coeburn Avenue SW	Norton	VA	24273
				Cross Roads Point Inc.	412 Quillen Avenue SE	Coeburn	VA	24230
				Dominion Health and Fitness	4862 Dickenson Hwy	Clintwood	VA	24210
<b>Psych Hospital</b>								
IP Psych Services	Ballad Health	Green Oak Behavioral Health - GeroPsych	312 Hospital Drive	Clintwood	VA	24228		
<b>SNF</b>								
Nursing Home	Ballad Health	Norton Community Hospital SNF	100 15th Street NW	Norton	VA	24211		

**Patient Choice Options for Ancillary and Post-Acute Services**

As of 6/30/18

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**DICKENSON COMMUNITY HOSPITAL**

Service Type Category	Service Type	Affiliation	Facility Name	Address	City	State	Zip Code
SNF	Nursing Home	All Other	Heritage Hall - Big Stone Gap	2045 Valley View Road E	Big Stone Gap	VA	24219
			Heritage Hall - Clintwood	161 Hospital Drive	Clintwood	VA	24228
			Heritage Hall - Wise	9434 Coeburn Mountain Road	Wise	VA	24293
Therapeutic	Chemotherapy	Ballad Health	Lonesome Pine Hospital	1990 Holton Avenue	Big Stone Gap	VA	24219
			Cancer Center at Norton Community Hospital	100 15th Street NW	Norton	VA	24273
			Southwest Virginia Cancer Center	671 Highway 58 East	Norton	VA	24273
	Dialysis Services	All Other	Fresenius Medical Care-Mountain Empire	340 Anderson Hollow Road	Norton	VA	24273
Radiation Therapy	Ballad Health	Southwest Virginia Cancer Center	671 Highway 58 East	Norton	VA	24273	
Inpatient	IP Rehab	Ballad Health	Norton Community Hospital Inpatient Rehab	100 15th Street NW	Norton	VA	24273

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**FRANKLIN WOODS COMMUNITY HOSPITAL**

Service Type Category	Service Type	Affiliation	Facility Name	Address	Address 2	City	State	Zip Code	
<b>Ancillary</b>	<b>Pharmacy</b>	Ballad Health	<b>Mountain State Pharmacy at JCMC</b>	400 N State of Franklin Road	<b>(blank)</b>	Johnson City	<b>TN</b>	37604	
			<b>Mountain State Pharmacy at Johnson City</b>	523 N State of Franklin Road	<b>(blank)</b>	Johnson City	<b>TN</b>	37604	
	All Other		<b>Bevins Pharmacy</b>	1301 N Roan Street	<b>(blank)</b>	Johnson City	<b>TN</b>	37601	
			<b>Blankenship Pharmacy</b>	222 East Watauga Avenue	<b>(blank)</b>	Johnson City	<b>TN</b>	37601	
			<b>Boones Creek Pharmacy</b>	4729 N Roan Street	<b>(blank)</b>	Johnson City	<b>TN</b>	37615	
			<b>CVS Pharmacy-Johnson City 1</b>	840 W Market Street	<b>(blank)</b>	Johnson City	<b>TN</b>	37604	
			<b>CVS Pharmacy-Johnson City 2</b>	2111 N Roan Street	<b>Suite 35</b>	Johnson City	<b>TN</b>	37601	
			<b>CVS Pharmacy-Johnson City 3</b>	4209 N Roan Street	<b>(blank)</b>	Johnson City	<b>TN</b>	37601	
			<b>CVS Pharmacy-Johnson City 4</b>	1940 South Roan Street	<b>(blank)</b>	Johnson City	<b>TN</b>	37601	
			<b>Family Pharmacy</b>	1714 Highway 93	<b>(blank)</b>	Fall Branch	<b>TN</b>	37656	
			<b>Food City Pharmacy- Johnson City 3</b>	920 N State of Franklin Road	<b>(blank)</b>	Johnson City	<b>TN</b>	37604	
			<b>Food City Pharmacy-Gray</b>	125 Judge Gresham Road	<b>(blank)</b>	Gray	<b>TN</b>	37615	
			<b>Food City Pharmacy-Jonesborough</b>	500 Forest Drive	<b>Suite 1</b>	Jonesborough	<b>TN</b>	37659	
			<b>Food City Pharmacy-Johnson City 1</b>	4307 N Roan Street	<b>Suite 11</b>	Johnson City	<b>TN</b>	37615	
			<b>Food City Pharmacy-Johnson City 2</b>	2120 S Roan Street	<b>Suite 100</b>	Johnson City	<b>TN</b>	37601	
			<b>Gray Pharmacy</b>	208 Suncrest Street	<b>Suite 1</b>	Gray	<b>TN</b>	37615	
			<b>Hillcrest Drug Store</b>	714 W Market Street	<b>Suite 103</b>	Johnson City	<b>TN</b>	37604	
			<b>Ingle's Market Pharmacy-Johnson City</b>	4470 N Roan Street	<b>(blank)</b>	Johnson City	<b>TN</b>	37615	
			<b>Ingle's Market Pharmacy-Jonesborough</b>	1200 W Jackson Boulevard	<b>(blank)</b>	Jonesborough	<b>TN</b>	37659	
			<b>Kroger-Johnson City 1</b>	112 Sunset Drive	<b>(blank)</b>	Johnson City	<b>TN</b>	37604	
			<b>Kroger-Johnson City 2</b>	1805 W State of Franklin Road	<b>Suite 1100</b>	Johnson City	<b>TN</b>	37604	
			<b>Medicine Shoppe-Jonesborough</b>	1238 E Jackson Boulevard	<b>(blank)</b>	Jonesborough	<b>TN</b>	37659	
			<b>Mooney's Discount Pharmacy</b>	1107 N Roan Street	<b>(blank)</b>	Johnson City	<b>TN</b>	37601	
			<b>Olde Towne Pharmacy</b>	102 West Jackson Boulevard	<b>(blank)</b>	Jonesborough	<b>TN</b>	37659	
			<b>Princeton Drug</b>	105 Broyles Drive	<b>Suite A</b>	Johnson City	<b>TN</b>	37601	
			<b>Pro Compounding</b>	525 N State of Franklin Road	<b>(blank)</b>	Johnson City	<b>TN</b>	37604	
			<b>Rite Aid-Jonesborough</b>	417 Boones Creek Road	<b>(blank)</b>	Jonesborough	<b>TN</b>	37659	
			<b>Sam's Club-Johnson City</b>	3060 Franklin Terrace	<b>(blank)</b>	Johnson City	<b>TN</b>	37604	
			<b>Val-U- Pharmacy</b>	2811 W Market Street	<b>Suite 5</b>	Johnson City	<b>TN</b>	37604	
			<b>Walgreens-Gray</b>	5104 Bobby Hicks Highway	<b>(blank)</b>	Gray	<b>TN</b>	37615	
			<b>Walgreens-Johnson City 1</b>	429 N State of Franklin Road	<b>(blank)</b>	Johnson City	<b>TN</b>	37604	
			<b>Walgreens-Johnson City 2</b>	2240 N Roan Street	<b>(blank)</b>	Johnson City	<b>TN</b>	37601	
			<b>Walgreens-Johnson City 3</b>	4210 N Roan Street	<b>(blank)</b>	Johnson City	<b>TN</b>	37601	
			<b>Walgreens-Johnson City 4</b>	606 N Broadway Street	<b>(blank)</b>	Johnson City	<b>TN</b>	37601	
			<b>Walgreens-Johnson City 5</b>	1430 S Roan Street	<b>(blank)</b>	Johnson City	<b>TN</b>	37601	
			<b>Walgreens-Jonesborough</b>	531 E Jackson Boulevard	<b>(blank)</b>	Jonesborough	<b>TN</b>	37659	
			<b>Wal-Mart- Johnson City 1</b>	2915 W Market Street	<b>(blank)</b>	Johnson City	<b>TN</b>	37604	
	<b>Wal-Mart-Johnson City 2</b>	3111 Browns Mill Road	<b>(blank)</b>	Johnson City	<b>TN</b>	37604			
	<b>West Towne Pharmacy</b>	1619 W Market Street	<b>(blank)</b>	Johnson City	<b>TN</b>	37604			
	<b>Diagnostic</b>	<b>CT</b>	Ballad Health	<b>Franklin Woods Community Hospital</b>	300 Med Tech Parkway	<b>(blank)</b>	Johnson City	<b>TN</b>	37604
				<b>Johnson City Medical Center</b>	400 North State of Franklin Road	<b>(blank)</b>	Johnson City	<b>TN</b>	37604

**Patient Choice Options for Ancillary and Post-Acute Services**

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**FRANKLIN WOODS COMMUNITY HOSPITAL**

Service Type Category	Service Type	Affiliation	Facility Name	Address	Address 2	City	State	Zip Code	
Diagnostic	CT	Ballad Health	Mountain States Imaging at Med Tech Parkway	301 Med Tech Parkway	Suite 100	Johnson City	TN	37604	
		All Other	James H. Quillen (Mountain Home) VA Medical Center Medical Care, PLLC (Johnson City)	809 Lamont Street	(blank)	Mountain Home	TN	37684	
			Mountain Empire Radiology Inc PC	401 East Main Street	(blank)	Johnson City	TN	37601	
			Mountain Empire Radiology Inc PC	1301 Sunset Drive	Suite 3	Johnson City	TN	37604	
Diagnostic	MRI	Ballad Health	Franklin Woods Community Hospital	300 Med Tech Parkway	(blank)	Johnson City	TN	37604	
			Johnson City Medical Center	400 North State of Franklin Road	(blank)	Johnson City	TN	37604	
			Mountain States Imaging at Med Tech Parkway	301 Med Tech Parkway	Suite 100	Johnson City	TN	37604	
		All Other	Appalachian Orthopaedic Associates - Johnson City	3 Professional Park	Suite 21	Johnson City	TN	37604	
			James H. Quillen (Mountain Home) VA Medical Center	809 Lamont Street	(blank)	Mountain Home	TN	37684	
			Mountain Empire Radiology Inc PC	1301 Sunset Drive	Suite 3	Johnson City	TN	37604	
			Watauga Orthopaedics, PLC	2410 Susannah Street	(blank)	Johnson City	TN	37601	
	Diagnostic	XRAY	Ballad Health	East Tennessee Ambulatory Surgery Center LLC	701 Med Tech Parkway	(blank)	Johnson City	TN	37604
				Franklin Woods Community Hospital	300 Med Tech Parkway	(blank)	Johnson City	TN	37604
				Johnson City Medical Center	400 North State of Franklin Road	(blank)	Johnson City	TN	37604
				Wellmont Urgent Care & Wellworks	378 Marketplace Drive	(blank)	Johnson City	TN	37604
				Mountain States Medical Group Trauma JC	408 N State of Franklin Road	(blank)	Johnson City	TN	37604
All Other			Appalachian Orthopaedic Associates - Johnson City	3 Professional Park	Suite 21	Johnson City	TN	37604	
			David Theodore Hamilos DPM	508 Princeton Road	(blank)	Johnson City	TN	37601	
			East Tennessee Brain and Spine Center	701 Med Tech Parkway	(blank)	Johnson City	TN	37604	
			Edward J Peeks DC	401 N Boone Street	(blank)	Johnson City	TN	37604	
			ETSU Family Medicine Associates	917 W Walnut Street	(blank)	Johnson City	TN	37604	
			ETSU Physicians and Associates	325 N State of Franklin Road	(blank)	Johnson City	TN	37604	
			Foot & Ankle Center	1303 Sunset Drive	(blank)	Johnson City	TN	37604	
		Johnson City Chiropractic Clinic PC	206 Princeton Road	(blank)	Johnson City	TN	37601		
		Johnson City Urological Clinic	2340 Knob Creek Road	(blank)	Johnson City	TN	37604		
		Jones Chiropractic Clinic	801 E Watauga Avenue	(blank)	Johnson City	TN	37601		
		Kind Chiropractic Care	1102 Sunset Drive	(blank)	Johnson City	TN	37604		
		Medical Care, PLLC (Johnson City)	401 East Main Street	(blank)	Johnson City	TN	37601		
		Mountain Empire Radiology Inc PC	1301 Sunset Drive	Suite 3	Johnson City	TN	37604		
		Mountain Empire Surgery Center LP	601 Med Tech Parkway	(blank)	Johnson City	TN	37604		
		Mountain Home VAMC	Sidney and Lamont Streets	(blank)	Mountain Home	TN	37684		
		PMA Surgery Center, LLC	101 Med Tech Parkway	(blank)	Johnson City	TN	37604		
		Practice of Hendrix, Christopher Michael	296 Wesley Street	(blank)	Johnson City	TN	37601		
		Practice of Hillman, Philip Aaron	110 University Parkway	(blank)	Johnson City	TN	37604		
		Pulmonary Associates	310 N State of Franklin Road	(blank)	Johnson City	TN	37604		
	Samuel F Messimer DC	501 W Oakland Avenue	(blank)	Johnson City	TN	37604			
	Spinal Corrective Center	306 Sunset Drive	(blank)	Johnson City	TN	37604			
	Trinity Hand Specialists	2335 Knob Creek Road	(blank)	Johnson City	TN	37604			
	Watauga Orthopaedics, PLC	2410 Susannah Street	(blank)	Johnson City	TN	37601			

**Patient Choice Options for Ancillary and Post-Acute Services**

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**FRANKLIN WOODS COMMUNITY HOSPITAL**

Service Type Category	Service Type	Affiliation	Facility Name	Address	Address 2	City	State	Zip Code
<b>Home Health</b>								
	<b>Home Health</b>	Ballad Health	<b>Mountain States Home Care - Kingsport</b>	101 Med Tech Parkway	<b>Suite 102</b>	Johnson City	<b>TN</b>	37604
			<b>Ballad Health Home Health &amp; Hospice - Johnson City</b>	101 Med Tech Parkway	<b>Suite 100</b>	Johnson City	<b>TN</b>	37604
	All Other	All Other	<b>Amedisys Home Health - Johnson City</b>	136 W Springbrook Drive	<b>(blank)</b>	Johnson City	<b>TN</b>	37604
			<b>At Home HealthCare - Johnson City</b>	112 E Myrtle Ave	<b>Suite 503</b>	Johnson City	<b>TN</b>	37601
			<b>Help at Home - Johnson City</b>	4 Limited Centre St	<b>Suite 100</b>	Johnson City	<b>TN</b>	37604
			<b>Maxim Healthcare Services - Johnson City</b>	208 Sunset Dr	<b>Suite 503</b>	Johnson City	<b>TN</b>	37604
			<b>NHC Homecare - Johnson City</b>	709 Med Tech Parkway	<b>(blank)</b>	Johnson City	<b>TN</b>	37604
			<b>Procare Home Health Services - Johnson City</b>	9 Worth Cir	<b>Suite 100</b>	Johnson City	<b>TN</b>	37604
<b>Hospice/Palliative Care</b>								
	<b>Hospice</b>	Ballad Health	<b>Ballad Health Hospice</b>	509 Med Tech Pkwy	<b>(blank)</b>	Johnson City	<b>TN</b>	37604
			All Other	<b>Avalon Hospice - Johnson City</b>	208 Sunset Dr	<b>Suite 340</b>	Johnson City	<b>TN</b>
		<b>Caris Healthcare Johnson City</b>		110 W Springbrook Dr	<b>Suite A</b>	Johnson City	<b>TN</b>	37604
<b>O/P Therapy</b>								
	<b>Rehabilitation &amp; Phys</b>	Ballad Health	<b>Mountain States Rehab - Outpatient</b>	415 N State of Franklin Rd	<b>(blank)</b>	Johnson City	<b>TN</b>	37604
			<b>Wellmont Physical Therapy at Johnson City</b>	2428 Knob Creek Road	<b>(blank)</b>	Johnson City	<b>TN</b>	37604
			<b>Niswonger Children's Therapy Services</b>	400 N. State of Franklin Road	<b>(blank)</b>	Johnson City	<b>TN</b>	37604
	All Other	All Other	<b>Achieve Health and Wellness - Gray</b>	406 Roy Martin Rd	<b>Suite 9</b>	Gray	<b>TN</b>	37615
			<b>Appalachian Rehabilitation</b>	3 Professional Park Drive	<b>Suite 10</b>	Johnson City	<b>TN</b>	37604
			<b>Benchmark Physical Therapy - Johnson City</b>	2913 Boones Creek Rd	<b>Suite 1</b>	Johnson City	<b>TN</b>	37615
			<b>Benchmark Physical Therapy-Jonesborough</b>	900 E Jackson Boulevard	<b>Suite 4</b>	Jonesborough	<b>TN</b>	37659
			<b>Blue Ridge Physical Therapy</b>	3915 Bristol Highway	<b>Suite 301</b>	Johnson City	<b>TN</b>	37601
			<b>Functional Pathways</b>	400 N Boone Street	<b>(blank)</b>	Johnson City	<b>TN</b>	37604
			<b>Physical Therapy Services - Johnson City</b>	401 E Main Street	<b>(blank)</b>	Johnson City	<b>TN</b>	37601
			<b>PT Solutions Physical Therapy - Johnson City</b>	3135 Peoples St	<b>(blank)</b>	Johnson City	<b>TN</b>	37604
			<b>Results Physiotherapy-Johnson City, TN-Franklin Woods</b>	701 Med Tech Parkway	<b>Suite 301</b>	Johnson City	<b>TN</b>	37604
			<b>Robert D. Algee</b>	3 Professional Park Drive	<b>Suite 10</b>	Johnson City	<b>TN</b>	37604
			<b>State of Franklin Healthcare Associates</b>	313 Princeton Road	<b>Suite 3</b>	Johnson City	<b>TN</b>	37601
			<b>Terrl L Duggin</b>	3212 Hanover Rd	<b>(blank)</b>	Johnson City	<b>TN</b>	37604
			<b>Watauga Orthopaedics PLC</b>	2410 Susannah Street	<b>(blank)</b>	Johnson City	<b>TN</b>	37601
	<b>William M. Hensley</b>	313 W Fairview Avenue	<b>(blank)</b>	Johnson City	<b>TN</b>	37604		
	<b>CORA Physical Therapy - Johnson City</b>	4307 N Roan St	<b>Suite 7</b>	Johnson City	<b>TN</b>	37615		
<b>Psych Hospital</b>								
	<b>IP Psych Services</b>	Ballad Health	<b>Woodridge Psychiatric Hospital</b>	403 North State of Franklin Road	<b>(blank)</b>	Johnson City	<b>TN</b>	37604
<b>SNF</b>								
	<b>Nursing Home</b>	Ballad Health	<b>Princeton Transitional Care</b>	2511 Wesley Street	<b>(blank)</b>	Johnson City	<b>TN</b>	37601
		All Other	<b>Agape Nursing &amp; Rehabilitation Center</b>	105 E Myrtle Avenue	<b>(blank)</b>	Johnson City	<b>TN</b>	37604

**Patient Choice Options for Ancillary and Post-Acute Services**

As of 6/30/18

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**FRANKLIN WOODS COMMUNITY HOSPITAL**

Service Type Category	Service Type	Affiliation	Facility Name	Address	Address 2	City	State	Zip Code
SNF	Nursing Home	All Other	Agape Nursing and Rehab Center	505 N Roan St	(blank)	Johnson City	TN	37601
			Asbury Place at Johnson City	105 West Myrtle Avenue	(blank)	Johnson City	TN	37604
			Christian Care Center of Johnson City	140 Technology Lane	(blank)	Johnson City	TN	37604
			Cornerstone Village	309 Princeton Rd	(blank)	Johnson City	TN	37601
			Cornerstone Village - North	2012 Sherwood Drive	(blank)	Johnson City	TN	37601
			Cornerstone Village - South	211 University Pkwy	(blank)	Johnson City	TN	37604
			Four Oaks Health Care Center	1101 Persimmon Ridge Road	(blank)	Jonesborough	TN	37659
			John M. Reed Health and Rehab	124 John Reed Home Road	(blank)	Limestone	TN	37681
			Lakebridge Health Care Center	115 Woodlawn Drive	(blank)	Johnson City	TN	37604
			Life Care Center of Gray	791 Old Gray Station Road	(blank)	Gray	TN	37615
			NHC HealthCare, Johnson City	3209 Bristol Highway	(blank)	Johnson City	TN	37601
			The Waters of Johnson City	140 Technology Ln	(blank)	Johnson City	TN	37604
<b>Therapeutic</b>								
	Chemotherapy	Ballad Health	Regional Cancer Center at Johnston City Medical Center	1 Professional Park Drive	Suite 21	Johnson City	TN	37604
			St. Jude Tri-Cities Affiliate Clinic	400 N State of Franklin Road	(blank)	Johnson City	TN	37604
	Dialysis Services	All Other	Mountain Home VA Medical Center	Sidney and Lamont Streets	(blank)	Mountain Home	TN	37684
			DaVita Tennessee Valley Dialysis Center	107 Woodlawn Drive	(blank)	Johnson City	TN	37604
		All Other	Fresenius Medical Care-Johnson City	100 Technology Lane	(blank)	Johnson City	TN	37604
			TN Smokie Mountain Dialysis	101 Med Tech Parkway	(blank)	Johnson City	TN	37604
	Radiation Therapy	Ballad Health	Regional Cancer Center at Johnston City Medical Center	400 N State of Franklin Road	(blank)	Johnson City	TN	37604
			All Other	Mountain Home VA Medical Center	Sidney and Lamont Streets	(blank)	Mountain Home	TN
<b>IP Rehab</b>								
	Rehabilitation & Phys	All Other	Quillen Rehabilitation Hospital	2511 Wesley Street	(blank)	Johnson City	TN	37601

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**HANCOCK COUNTY HOSPITAL**

Service Type Category	Service Type	Affiliation	Facility Name	Address	City	State	Zip Code
<b>Ancillary</b>							
	<b>Pharmacy</b>	All Other	<b>Bulls Gap Drugs</b>	412 Highway 11E	Bulls Gap	TN	37711
			<b>Campbell's Hometown Pharmacy</b>	272 Highway 11E	Bulls Gap	TN	37711
			<b>CVS Pharmacy-Rogersville</b>	440 Park Boulevard	Rogersville	TN	37857
			<b>Food City Pharmacy-Church Hill</b>	731 Highway 11W	Church Hill	TN	37642
			<b>Food City Pharmacy-Rogersville</b>	1287 East Main Street	Rogersville	TN	37857
			<b>Medical Center Pharmacy</b>	900 W Main Street	Rogersville	TN	37857
			<b>Medicine Shoppe-Rogersville</b>	921 E Main Street	Rogersville	TN	37857
			<b>Rite Aid-Sneedville</b>	1267 Main Street	Sneedville	TN	37869
			<b>Rural Health Services Pharmacy</b>	4307 TN-66	Rogersville	TN	37857
			<b>Smith-Turner Drug Store</b>	218 Church Street	Sneedville	TN	37869
			<b>Surgoinsville Pharmacy</b>	114 Bellamy Avenue	Surgoinsville	TN	37873
			<b>U-Save Drug Center</b>	4017 Hwy 66	Rogersville	TN	37857
			<b>Walgreens-Rogersville</b>	4325 Highway 66 S	Rogersville	TN	37857
			<b>Wal-Mart-Rogersville</b>	4331 Highway 66 S	Rogersville	TN	37857
<b>Diagnostic</b>							
	<b>CT</b>	Ballad Health	<b>Hancock County Hospital</b>	1519 Main Street	Sneedville	TN	37869
			<b>Hawkins County Memorial Hospital</b>	851 Locust Street	Rogersville	TN	37857
	<b>MRI</b>	Ballad Health	<b>Hawkins County Memorial Hospital</b>	851 Locust Street	Rogersville	TN	37857
	<b>XRAY</b>	Ballad Health	<b>Hawkins County Memorial Hospital</b>	851 Locust Street	Rogersville	TN	37857
		All Other	<b>Hawkins Medical Center (RHSC)</b>	4966 Highway 11W	Rogersville	TN	37857
			<b>Holston Medical Group - Church Hill</b>	406 E Main Boulevard	Church Hill	TN	37642
			<b>Rural Health Services Consortium</b>	4307 Highway 66 S	Rogersville	TN	37857
			<b>West Main Medical Center (RHSC)</b>	900 W Main Street	Rogersville	TN	37857
<b>Home Health</b>							
	<b>Home Health</b>	All Other	<b>Amedisys Home Health - Rogersville</b>	109 Apple Ln	Rogersville	TN	37857
			<b>Amedisys Home Health - Sneedville</b>	154 Campbell Dr	Sneedville	TN	37869
			<b>Hancock County Home Health Agency</b>	1246 Main Street	Sneedville	TN	37869
			<b>Hometown Home Health Care, Inc.</b>	107 Forest Hills Road	Rogersville	TN	37857
			<b>Interim HealthCare - Rogersville</b>	3815 Hwy 66	Rogersville	TN	37857
			<b>UT Home Care Services - Rogersville</b>	952 W Broadway St	Rogersville	TN	37857
<b>Hospice/Palliative Care</b>							
	<b>Hospice</b>	All Other	<b>Hancock County Home Health and Hospice</b>	1246 Main St	Sneedville	TN	37869
<b>O/P Therapy</b>							
	<b>Rehabilitation &amp; Physical Therapy</b>	Ballad Health	<b>Wellmont Rehabilitation Services - Rogersville</b>	851 Locust Street	Rogersville	TN	37857
		All Other	<b>Cherokee Physical Therapy</b>	482 Park Boulevard	Rogersville	TN	37857
			<b>Hawkins Therapy Associates</b>	264 Highway 11 E	Bulls Gap	TN	37711

**Patient Choice Options for Ancillary and Post-Acute Services**

As of 6/30/18

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**HANCOCK COUNTY HOSPITAL**

Service Type Category	Service Type	Affiliation	Facility Name	Address	City	State	Zip Code
SNF	Nursing Home	All Other	Asbury Place at Kingsport	100 Netherland Lane	Kingsport	TN	37660
			Church Hill Health Care and Rehab Center	701 West Main Street	Church Hill	TN	37642
			Hancock Manor Nursing Home	1423 Main Street	Sneedville	TN	37869
			Signature HealthCare of Rogersville	109 Highway 70 North	Rogersville	TN	37857
	Transitional Care	Ballad Health	SNF at Hawkins County Memorial Hospital	851 Locust Street	Rogersville	TN	37857
			SNF at Hancock County Hospital	1519 Main Street	Sneedville	TN	37869

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**HAWKINS COUNTY MEMORIAL HOSPITAL**

Service Type Category	Service Type	Affiliation	Facility Name	Address	City	State	Zip Code
<b>Ancillary</b>							
	<b>Pharmacy</b>	All Other	<b>Bulls Gap Drugs</b>	412 Highway 11E	Bulls Gap	TN	37711
			<b>Campbell's Hometown Pharmacy</b>	272 Highway 11E	Bulls Gap	TN	37711
			<b>CVS Pharmacy-Rogersville</b>	440 Park Boulevard	Rogersville	TN	37857
			<b>Food City Pharmacy-Church Hill</b>	731 Highway 11W	Church Hill	TN	37642
			<b>Food City Pharmacy-Rogersville</b>	1287 East Main Street	Rogersville	TN	37857
			<b>Medical Center Pharmacy</b>	900 W Main Street	Rogersville	TN	37857
			<b>Medicine Shoppe-Rogersville</b>	921 E Main Street	Rogersville	TN	37857
			<b>Rural Health Services Pharmacy</b>	4307 TN-66	Rogersville	TN	37857
			<b>Surgoinsville Pharmacy</b>	114 Bellamy Avenue	Surgoinsville	TN	37873
			<b>U-Save Drug Center</b>	4017 Hwy 66	Rogersville	TN	37857
			<b>Walgreens-Rogersville</b>	4325 Highway 66 S	Rogersville	TN	37857
			<b>Wal-Mart-Rogersville</b>	4331 Highway 66 S	Rogersville	TN	37857
<b>Diagnostic</b>							
	<b>CT</b>	Ballad Health	<b>Hawkins County Memorial Hospital</b>	851 Locust Street	Rogersville	TN	37857
	<b>MRI</b>	Ballad Health	<b>Hawkins County Memorial Hospital</b>	851 Locust Street	Rogersville	TN	37857
	<b>XRAY</b>	Ballad Health	<b>Hawkins County Memorial Hospital</b>	851 Locust Street	Rogersville	TN	37857
		All Other	<b>Hawkins Medical Center (RHSC)</b>	4966 Highway 11W	Rogersville	TN	37857
			<b>Holston Medical Group - Church Hill</b>	406 E Main Boulevard	Church Hill	TN	37642
			<b>Rural Health Services Consortium</b>	4307 Highway 66 S	Rogersville	TN	37857
			<b>West Main Medical Center (RHSC)</b>	900 W Main Street	Rogersville	TN	37857
<b>Home Health</b>							
	<b>Home Health</b>	All Other	<b>Amedisys Home Health - Rogersville</b>	109 Apple Ln	Rogersville	TN	37857
			<b>Hometown Home Health Care, Inc.</b>	107 Forest Hills Road	Rogersville	TN	37857
			<b>Interim HealthCare - Rogersville</b>	3815 Hwy 66	Rogersville	TN	37857
			<b>UT Home Care Services - Rogersville</b>	952 W Broadway St	Rogersville	TN	37857
<b>O/P Therapy</b>							
	<b>Rehabilitation &amp; Physical Therapy</b>	Ballad Health	<b>Wellmont Rehabilitation Services - Rogersville</b>	851 Locust Street	Rogersville	TN	37857
		All Other	<b>Cherokee Physical Therapy</b>	482 Park Boulevard	Rogersville	TN	37857
			<b>Hawkins County Memorial Outpatient Rehabilitation</b>	401 Scenic Drive	Rogersville	TN	37857
			<b>Hawkins Therapy Associates</b>	264 Highway 11 E	Bulls Gap	TN	37711
<b>SNF</b>							
	<b>Nursing Home</b>	All Other	<b>Asbury Place at Kingsport</b>	100 Netherland Lane	Kingsport	TN	37660
			<b>Church Hill Health Care and Rehab Center</b>	701 West Main Street	Church Hill	TN	37642
			<b>Signature HealthCare of Rogersville</b>	109 Highway 70 North	Rogersville	TN	37857
	<b>Transitional Care</b>	Ballad Health	<b>SNF at Hawkins County Memorial Hospital</b>	851 Locust Street	Rogersville	TN	37857

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**HOLSTON VALLEY MEDICAL CENTER**

Service Type Category	Service Type	Affiliation	Facility Name	Address	City	State	Zip Code
<b>Ancillary</b>	<b>Pharmacy</b>	Ballad Health	<b>Mountain States Pharmacy at Kingsport</b>	1657 E Stone Drive	Kingsport	TN	37660
		All Other	<b>Anderson Compounding Pharmacy</b>	310 Bluff City Highway	Bristol	TN	37620
			<b>Berry's Pharmacy</b>	460 W Center Street	Kingsport	TN	37664
			<b>Bloomingtondale Drug Center</b>	2900 Bloomingtondale Road	Kingsport	TN	37660
			<b>Blountville Drug Company</b>	3090 Highway 126	Blountville	TN	37617
			<b>Brookside Discount Pharmacy</b>	1901 Brookside Drive	Kingsport	TN	37660
			<b>Cave's Drug Store</b>	1328 S John B Dennis Highway	Kingsport	TN	37660
			<b>Colonial Heights Pharmacy</b>	4221 Fort Henry Drive	Kingsport	TN	37663
			<b>Custom Compounding Center of America</b>	1567 N Eastman Road	Kingsport	TN	37664
			<b>CVS Pharmacy-Bristol TN 3</b>	308 E Cedar Street	Bristol	TN	37620
			<b>CVS Pharmacy-Bristol TN 1</b>	3030 W State Street	Bristol	TN	37620
			<b>CVS Pharmacy-Bristol TN 2</b>	1379 Volunteer Parkway	Bristol	TN	37620
			<b>CVS Pharmacy-Kingsport 1</b>	128 W Stone Drive	Kingsport	TN	37660
			<b>CVS Pharmacy-Kingsport 2</b>	4400 W Stone Drive	Kingsport	TN	37660
			<b>CVS Pharmacy-Kingsport 3</b>	5215 Memorial Boulevard	Kingsport	TN	37664
			<b>CVS Pharmacy-Kingsport 4</b>	4106 Fort Henry Drive	Kingsport	TN	37663
			<b>CVS Pharmacy-Piney Flats</b>	5674 Highway 11E	Piney Flats	TN	37686
			<b>Food City Pharmacy-Blountville</b>	1921 Highway 394	Blountville	TN	37617
			<b>Food City Pharmacy-Bristol 1</b>	1430 Volunteer Parkway	Bristol	TN	37620
			<b>Food City Pharmacy-Bristol 2</b>	1317 Virginia Avenue	Bristol	TN	37620
			<b>Food City Pharmacy-Kingsport 1</b>	1205 N Eastman Road	Kingsport	TN	37664
			<b>Food City Pharmacy-Kingsport 2</b>	1911 Moreland Drive	Kingsport	TN	37663
			<b>Food City Pharmacy-Kingsport 3</b>	300 Clinchfield Street	Kingsport	TN	37660
			<b>Food City Pharmacy-Piney Flats</b>	6681 Bristol Highway	Piney Flats	TN	37686
			<b>H Johnson Pharmacy</b>	520 Bluff City Highway	Bristol	TN	37620
			<b>Ingle's Market Pharmacy-Kingsport</b>	4345 Fort Henry Drive	Kingsport	TN	37664
			<b>K-Mart-Bristol</b>	2854 W State Street	Bristol	TN	37620
			<b>K-Mart-Kingsport</b>	1805 E Stone Drive	Kingsport	TN	37660
			<b>Kroger-Kingsport</b>	1664 E Stone Drive	Kingsport	TN	37660
			<b>MAC's Medicine Mart</b>	1425 E Center Street	Kingsport	TN	37664
			<b>Marcum's Pharmacy</b>	121 E Ravine Road	Kingsport	TN	37660
			<b>P &amp; S Pharmacy</b>	613 Watauga Street	Kingsport	TN	37660
			<b>Piney Flats Drug Center</b>	5908 Highway 11E	Piney Flats	TN	37686
			<b>Pinney's Prescription Shop</b>	1201 N Wilcox Drive	Kingsport	TN	37660
			<b>Premier Pharmacy</b>	109 Jack White Drive	Kingsport	TN	37664
			<b>Rowe's Pharmacy</b>	2416 Memorial Boulevard	Kingsport	TN	37664
			<b>Target-Kingsport</b>	2626 E Stone Drive	Kingsport	TN	37660
			<b>Walgreens-Blountville</b>	2340 Highway 394	Blountville	TN	37617
			<b>Walgreens-Bristol 1</b>	1388 Volunteer Parkway	Bristol	TN	37620
			<b>Walgreens-Bristol 2</b>	1 Medical Park Boulevard	Bristol	TN	37620
			<b>Walgreens-Bristol 3</b>	2412 W State Street	Bristol	TN	37620
			<b>Walgreens-Kingsport 1</b>	130 W Ravine Rd	Kingsport	TN	37660

**Patient Choice Options for Ancillary and Post-Acute Services**

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**HOLSTON VALLEY MEDICAL CENTER**

Service Type Category	Service Type	Affiliation	Facility Name	Address	City	State	Zip Code		
Ancillary	Pharmacy	All Other	Walgreens-Kingsport 2	2200 Memorial Court	Kingsport	TN	37664		
			Walgreens-Kingsport 3	1420 W Stone Drive	Kingsport	TN	37660		
			Walgreens-Kingsport 4	2790 E Stone Drive	Kingsport	TN	37660		
			Walgreens-Kingsport 5	4500 W Stone Drive	Kingsport	TN	37660		
			Walgreens-Kingsport 6	3900 Fort Henry Drive	Kingsport	TN	37663		
			Walgreens-Piney Flats	6740 Bristol Highway	Piney Flats	TN	37686		
			Wal-Mart-Bristol 1	220 Century Boulevard	Bristol	TN	37620		
			Wal-Mart-Kingsport 1	2500 W Stone Drive	Kingsport	TN	37660		
			Wal-Mart-Kingsport 2	3200 Fort Henry Drive	Kingsport	TN	37664		
			Wal-Mart-Kingsport 3	750 Lynn Garden Drive	Kingsport	TN	37660		
Diagnostic	CT	Ballad Health	Bristol Regional Medical Center	1 Medical Park Boulevard	Bristol	TN	37620		
			Holston Valley Imaging Center, LLC	103 West Stone Drive	Kingsport	TN	37660		
			Holston Valley Medical Center	130 West Ravine Road	Kingsport	TN	37662		
			Indian Path Medical Center	2000 Brookside Drive	Kingsport	TN	37660		
			Volunteer Parkway Imaging Center	1230 Volunteer Parkway	Bristol	TN	37620		
		All Other	Meadowview Outpatient Diagnostic Center	2033 Meadowview Lane	Kingsport	TN	37660		
			Sapling Grove Outpatient Diagnostic Center	240 Medical Park Boulevard	Bristol	TN	37620		
			MRI	Ballad Health	Holston Valley Imaging Center, LLC	103 West Stone Drive	Kingsport	TN	37660
					Holston Valley Medical Center	130 West Ravine Road	Kingsport	TN	37662
					Indian Path Medical Center	2000 Brookside Drive	Kingsport	TN	37660
	Volunteer Parkway Imaging Center	1230 Volunteer Parkway			Bristol	TN	37620		
	All Other	Appalachian Orthopaedic Associates - Bristol	Meadowview Outpatient Diagnostic Center	2033 Meadowview Lane	Kingsport	TN	37660		
			Sapling Grove Outpatient Diagnostic Center	240 Medical Park Boulevard	Bristol	TN	37620		
			XRAY	Ballad Health	Blue Ridge Radiology PC	3053 W State Street	Bristol	TN	37620
					Bristol Regional Medical Center	1 Medical Park Boulevard	Bristol	TN	37620
					Bristol Surgery Center, LLC	350 Blountville Highway	Bristol	TN	37620
					Holston Valley Imaging Center, LLC	103 West Stone Drive	Kingsport	TN	37660
	Holston Valley Medical Center	130 West Ravine Road			Kingsport	TN	37662		
	Holston Valley Outpatient Center	111 W Stone Drive			Kingsport	TN	37660		
	Indian Path Medical Center	2000 Brookside Drive			Kingsport	TN	37660		
	Regional Orthopaedic Trauma Center	117 W Sevier Avenue	Kingsport	TN	37660				
	All Other	Appalachian Orthopaedic Associates - Bristol	Appalachian Orthopedic Associates - Bristol	260 Midway Medical Park	Bristol	TN	37620		
Daniel Bradford McMahan DC			1728 N Eastman Road	Kingsport	TN	37664			
David H Franzus MD			121 E Ravine Road	Kingsport	TN	37660			
Family Footcare			421 W Stone Drive	Kingsport	TN	37660			
Highlands Podiatry PLC			2765 W State Street	Bristol	TN	37620			

## Patient Choice Options for Ancillary and Post-Acute Services

As of 6/30/18

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### HOLSTON VALLEY MEDICAL CENTER

Service Type Category	Service Type	Affiliation	Facility Name	Address	City	State	Zip Code
Diagnostic	XRAY	All Other	Holston Medical Group - Bristol	320 Bristol West Boulevard	Bristol	TN	37620
			Holston Medical Group - Kingsport 2	4848 Fort Henry Drive	Kingsport	TN	37663
			Holston Medical Group - Kingsport 3	105 W Stone Drive	Kingsport	TN	37660
			Holston Medical Group - Kingsport 4	2033 Meadowview Lane	Kingsport	TN	37660
			Holston Medical Group Urgent Care - Bristol 1	240 Medical Park Boulevard	Bristol	TN	37620
			Kingsport Podiatry	2004 American Way	Kingsport	TN	37660
			Mountain Region Family Medicine	101 Professional Park Pvt Drive	Kingsport	TN	37663
			Mountain Region Family Medicine	444 Clinchfield Street	Kingsport	TN	37660
			Muncy Family Chiropractic	300 Moore Street	Bristol	VA	24201
			Practice of Booher, Jeffrey R	615 Volunteer Parkway	Bristol	TN	37620
			Practice of Chapman, Richard E	135 W Ravine Road	Kingsport	TN	37660
			Sheri Denise Wingate DC	5661 Highway 11 E	Piney Flats	TN	37686
			Urology Associates of Kingsport	822 Broad Street	Kingsport	TN	37660
			Associated Orthopedics	430 W Ravine Road	Kingsport	TN	37660
<b>Home Health</b>							
	Home Health	Ballad Health	Advanced Home Care, Inc.-Kingsport	105 Jack White Drive	Kingsport	TN	37664
		All Other	Amedisys Home Health - Kingsport	116 Jack White Dr	Kingsport	TN	37664
			Apria Healthcare	2021 Brookside Ln	Kingsport	TN	37660
			Kindred at Home	2004 American Way	Kingsport	TN	37660
			Smoky Mountain Home Health and Hospice - Kingsport	106 Ferrell Ave	Kingsport	TN	37663
<b>Hospice/Palliative Care</b>							
	Hospice	Ballad Health	Wellmont Hospice House	280 Steeles Rd	Bristol	TN	37620
		All Other	Amedisys Hospice - Kingsport	116 Jack White Dr	Kingsport	TN	37664
			Avalon Hospice - Kingsport	4619 Fort Henry Dr	Kingsport	TN	37663
			BrightStar Care	140 Sprint Dr	Blountville	TN	37617
			Smoky Mountain Home Health & Hospice - Kingsport	106 Ferrell Ave	Kingsport	TN	37663
<b>O/P Therapy</b>							
	Rehabilitation & Physical Therapy	Ballad Health	Bristol Regional Outpatient Rehabilitation	1996 West State Street	Bristol	TN	37620
			Mountain States Rehabilitation-Indian Path	2204 Pavilion Drive	Kingsport	TN	37660
			Results Physiotherapy Bristol	320 Bristol West Boulevard	Bristol	TN	37620
			Sullivan Center Outpatient Rehabilitation and Physical Therapy	103 West Stone Drive	Kingsport	TN	37660
			The Hand Center at Bristol Regional	1 Medical Park Boulevard	Bristol	TN	37620
			Wellmont Physical Therapy at the YMCA	1100 Franklin Square	Kingsport	TN	37664
			Outpatient Neurologic and Pediatric Rehab	1 Medical Park Boulevard	Bristol	TN	37620
			Eastman Outpatient Campus	111 West Stone Drive	Kingsport	TN	37660
			Outpatient Physical Therapy at the YMCA	1840 Meadowview Road	Kingsport	TN	37660
		All Other	Achieve Health and Wellness - Kingsport	1732 N Eastman Rd	Kingsport	TN	37664
			Advance Physical Therapy	1101 E Stone Drive	Kingsport	TN	37660
			Appalachian Orthopedic Associates - Bristol	260 Midway Medical Park	Bristol	TN	37620

**Patient Choice Options for Ancillary and Post-Acute Services**

As of 6/30/18

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**HOLSTON VALLEY MEDICAL CENTER**

Service Type Category	Service Type	Affiliation	Facility Name	Address	City	State	Zip Code
O/P Therapy	Rehabilitation & Physical Therapy	All Other	Appalachian Rehabilitation and Sports Medicine	105 Meadow View Rd	Bristol	TN	37620
			Benchmark Physical Therapy-Bristol	1430 Volunteer Parkway	Bristol	TN	37620
			Benchmark Physical Therapy-Kingsport	1 Sheridan Square	Kingsport	TN	37660
			Colonial Heights Physical Therapy	5334 Fort Henry Drive	Kingsport	TN	37663
			Comprehensive Community Services-Kingsport 1	6145 Temple Star Road	Kingsport	TN	37660
			Comprehensive Community Services-Kingsport 2	702 E Sullivan Street	Kingsport	TN	37660
			Highlands Neurosurgery	1 Medical Park Boulevard	Bristol	TN	37620
			HMG Rehabilitation at Sapling Grove	240 Medical Park Blvd	Bristol	TN	37620
			Holston Medical Group - Kingsport 1	2323 N John B Dennis Highway	Kingsport	TN	37660
			Holston Medical Group Rehabilitation Services	105 W Stone Drive	Kingsport	TN	37660
			Results Physiotherapy-Kingsport, TN-Clinchfield	444 Clinchfield Street	Kingsport	TN	37660
			TriCities Spine	320 Bristol West Boulevard	Bristol	TN	37620
			CORA Physical Therapy - Bristol	1159 Volunteer Parkway	Bristol	TN	37620
	CORA Physical Therapy - Kingsport	1825 N Eastman Rd	Kingsport	TN	37664		
IP Rehab	All Other	HealthSouth Rehabilitaton Hospital	113 Cassell Drive	Kingsport	TN	37660	
<b>Psych Hospital</b>	IP Psych Services	Ballad Health	Bristol Regional Medical Center - MedPsych Unit	1 Medical Park Boulevard	Bristol	TN	37620
<b>SNF</b>	LTAC	Ballad Health	Select Specialty @ Bristol Regional Medical Center	1 Medical Park Boulevard	Bristol	TN	37620
	Nursing Home	Ballad Health	The Wexford House	2421 John B. Dennis Parkway	Kingsport	TN	37660
		All Other	Brookhaven Manor	2035 Stonebrook Place	Kingsport	TN	37660
			Greystone Health Care Center	181 Dunlap Road	Blountville	TN	37617
			Holston Manor	3641 Memorial Boulevard	Kingsport	TN	37664
			The Cambridge House	250 Bellebrook Road	Bristol	TN	37620
			NHC Transitional Care	2000 Brookside Drive	Kingsport	TN	37660
			Asbury Place	100 Netherland Ln	Kingsport	TN	37660
<b>Therapeutic</b>	Chemotherapy	Ballad Health	Christine LaGuardia Phillips Cancer Center (HVMC)	130 W Ravine Road	Kingsport	TN	37660
			J.D. and Lorraine Nicewonder Cancer Center (BRMC)	1 Medical Park Boulevard	Bristol	TN	37620
			Regional Cancer Center at Indian Path Medical Center	2205 Pavilion Drive	Kingsport	TN	37660
			Kingsport Hemotology Oncology Office	4485 W Stone Drive	Kingsport	TN	37660
	Dialysis Services	All Other	Fresenius Medical Care-Bristol	2530 W State Street	Bristol	TN	37620
			Fresenius Medical Care-Kingsport	2002 Brookside Drive	Kingsport	TN	37660
			Fresenius Medical Care-West Kingsport	3600 Netherland Inn Road	Kingsport	TN	37660
	Radiation Therapy	Ballad Health	Christine LaGuardia Phillips Cancer Center (HVMC)	130 W Ravine Road	Kingsport	TN	37660
			J.D. and Lorraine Nicewonder Cancer Center (BRMC)	1 Medical Park Boulevard	Bristol	TN	37620
			Regional Cancer Center at Indian Path Medical Center	2205 Pavilion Drive	Kingsport	TN	37660

**Patient Choice Options for Ancillary and Post-Acute Services**

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**INDIAN PATH MEDICAL CENTER**

Service Type Category	Service Type	Affiliation	Facility Name	Address	City	State	Zip Code
<b>Ancillary</b>	<b>Pharmacy</b>	Ballad Health	<b>Mountain States Pharmacy at Kingsport</b>	1657 E Stone Drive	Kingsport	TN	37660
		All Other	<b>Anderson Compounding Pharmacy</b>	310 Bluff City Highway	Bristol	TN	37620
			<b>Berry's Pharmacy</b>	460 W Center Street	Kingsport	TN	37664
			<b>Bloomingtondale Drug Center</b>	2900 Bloomingtondale Road	Kingsport	TN	37660
			<b>Blountville Drug Company</b>	3090 Highway 126	Blountville	TN	37617
			<b>Brookside Discount Pharmacy</b>	1901 Brookside Drive	Kingsport	TN	37660
			<b>Cave's Drug Store</b>	1328 S John B Dennis Highway	Kingsport	TN	37660
			<b>Colonial Heights Pharmacy</b>	4221 Fort Henry Drive	Kingsport	TN	37663
			<b>Custom Compounding Center of America</b>	1567 N Eastman Road	Kingsport	TN	37664
			<b>CVS Pharmacy-Bristol TN 3</b>	308 E Cedar Street	Bristol	TN	37620
			<b>CVS Pharmacy-Bristol TN 1</b>	3030 W State Street	Bristol	TN	37620
			<b>CVS Pharmacy-Bristol TN 2</b>	1379 Volunteer Parkway	Bristol	TN	37620
			<b>CVS Pharmacy-Kingsport 1</b>	128 W Stone Drive	Kingsport	TN	37660
			<b>CVS Pharmacy-Kingsport 2</b>	4400 W Stone Drive	Kingsport	TN	37660
			<b>CVS Pharmacy-Kingsport 3</b>	5215 Memorial Boulevard	Kingsport	TN	37664
			<b>CVS Pharmacy-Kingsport 4</b>	4106 Fort Henry Drive	Kingsport	TN	37663
			<b>CVS Pharmacy-Piney Flats</b>	5674 Highway 11E	Piney Flats	TN	37686
			<b>Food City Pharmacy-Blountville</b>	1921 Highway 394	Blountville	TN	37617
			<b>Food City Pharmacy-Bristol 1</b>	1430 Volunteer Parkway	Bristol	TN	37620
			<b>Food City Pharmacy-Bristol 2</b>	1317 Virginia Avenue	Bristol	TN	37620
			<b>Food City Pharmacy-Kingsport 1</b>	1205 N Eastman Road	Kingsport	TN	37664
			<b>Food City Pharmacy-Kingsport 2</b>	1911 Moreland Drive	Kingsport	TN	37663
			<b>Food City Pharmacy-Kingsport 3</b>	300 Clinchfield Street	Kingsport	TN	37660
			<b>Food City Pharmacy-Piney Flats</b>	6681 Bristol Highway	Piney Flats	TN	37686
			<b>H Johnson Pharmacy</b>	520 Bluff City Highway	Bristol	TN	37620
			<b>Ingle's Market Pharmacy-Kingsport</b>	4345 Fort Henry Drive	Kingsport	TN	37664
			<b>K-Mart-Bristol</b>	2854 W State Street	Bristol	TN	37620
			<b>K-Mart-Kingsport</b>	1805 E Stone Drive	Kingsport	TN	37660
			<b>Kroger-Kingsport</b>	1664 E Stone Drive	Kingsport	TN	37660
			<b>MAC's Medicine Mart</b>	1425 E Center Street	Kingsport	TN	37664
			<b>Marcum's Pharmacy</b>	121 E Ravine Road	Kingsport	TN	37660
			<b>P &amp; S Pharmacy</b>	613 Watauga Street	Kingsport	TN	37660
			<b>Piney Flats Drug Center</b>	5908 Highway 11E	Piney Flats	TN	37686
			<b>Pinney's Prescription Shop</b>	1201 N Wilcox Drive	Kingsport	TN	37660
			<b>Premier Pharmacy</b>	109 Jack White Drive	Kingsport	TN	37664
			<b>Rowe's Pharmacy</b>	2416 Memorial Boulevard	Kingsport	TN	37664
			<b>Target-Kingsport</b>	2626 E Stone Drive	Kingsport	TN	37660
			<b>Walgreens-Blountville</b>	2340 Highway 394	Blountville	TN	37617
			<b>Walgreens-Bristol 1</b>	1388 Volunteer Parkway	Bristol	TN	37620
			<b>Walgreens-Bristol 2</b>	1 Medical Park Boulevard	Bristol	TN	37620
			<b>Walgreens-Bristol 3</b>	2412 W State Street	Bristol	TN	37620
			<b>Walgreens-Kingsport 1</b>	130 W Ravine Rd	Kingsport	TN	37660

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**INDIAN PATH MEDICAL CENTER**

Service Type Category	Service Type	Affiliation	Facility Name	Address	City	State	Zip Code		
Ancillary	Pharmacy	All Other	Walgreens-Kingsport 2	2200 Memorial Court	Kingsport	TN	37664		
			Walgreens-Kingsport 3	1420 W Stone Drive	Kingsport	TN	37660		
			Walgreens-Kingsport 4	2790 E Stone Drive	Kingsport	TN	37660		
			Walgreens-Kingsport 5	4500 W Stone Drive	Kingsport	TN	37660		
			Walgreens-Kingsport 6	3900 Fort Henry Drive	Kingsport	TN	37663		
			Walgreens-Piney Flats	6740 Bristol Highway	Piney Flats	TN	37686		
			Wal-Mart-Bristol 1	220 Century Boulevard	Bristol	TN	37620		
			Wal-Mart-Kingsport 1	2500 W Stone Drive	Kingsport	TN	37660		
			Wal-Mart-Kingsport 2	3200 Fort Henry Drive	Kingsport	TN	37664		
			Wal-Mart-Kingsport 3	750 Lynn Garden Drive	Kingsport	TN	37660		
Diagnostic	CT	Ballad Health	Bristol Regional Medical Center	1 Medical Park Boulevard	Bristol	TN	37620		
			Holston Valley Imaging Center, LLC	103 West Stone Drive	Kingsport	TN	37660		
			Holston Valley Medical Center	130 West Ravine Road	Kingsport	TN	37662		
			Indian Path Medical Center	2000 Brookside Drive	Kingsport	TN	37660		
			Volunteer Parkway Imaging Center	1230 Volunteer Parkway	Bristol	TN	37620		
		All Other	Meadowview Outpatient Diagnostic Center	2033 Meadowview Lane	Kingsport	TN	37660		
			Sapling Grove Outpatient Diagnostic Center	240 Medical Park Boulevard	Bristol	TN	37620		
			MRI	Ballad Health	Holston Valley Imaging Center, LLC	103 West Stone Drive	Kingsport	TN	37660
					Holston Valley Medical Center	130 West Ravine Road	Kingsport	TN	37662
					Indian Path Medical Center	2000 Brookside Drive	Kingsport	TN	37660
	Volunteer Parkway Imaging Center	1230 Volunteer Parkway			Bristol	TN	37620		
	All Other	Appalachian Orthopaedic Associates - Bristol	Meadowview Outpatient Diagnostic Center	2033 Meadowview Lane	Kingsport	TN	37660		
			Sapling Grove Outpatient Diagnostic Center	240 Medical Park Boulevard	Bristol	TN	37620		
			XRAY	Ballad Health	Blue Ridge Radiology PC	3053 W State Street	Bristol	TN	37620
					Bristol Regional Medical Center	1 Medical Park Boulevard	Bristol	TN	37620
					Bristol Surgery Center, LLC	350 Blountville Highway	Bristol	TN	37620
					Holston Valley Imaging Center, LLC	103 West Stone Drive	Kingsport	TN	37660
	Holston Valley Medical Center	130 West Ravine Road			Kingsport	TN	37662		
	Holston Valley Outpatient Center	111 W Stone Drive			Kingsport	TN	37660		
	Indian Path Medical Center	2000 Brookside Drive			Kingsport	TN	37660		
Regional Orthopaedic Trauma Center	117 W Sevier Avenue	Kingsport	TN	37660					
All Other	Appalachian Orthopaedic Associates - Bristol	Appalachian Orthopaedic Associates - Bristol	1 Medical Park Blvd	Bristol	TN	37620			
		Appalachian Orthopedic Associates - Bristol	260 Midway Medical Park	Bristol	TN	37620			
		Daniel Bradford McMahan DC	1728 N Eastman Road	Kingsport	TN	37664			
		David H Franzus MD	121 E Ravine Road	Kingsport	TN	37660			
		Family Footcare	421 W Stone Drive	Kingsport	TN	37660			
		Highlands Podiatry PLC	2765 W State Street	Bristol	TN	37620			

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**INDIAN PATH MEDICAL CENTER**

Service Type Category	Service Type	Affiliation	Facility Name	Address	City	State	Zip Code
Diagnostic	XRAY	All Other	Holston Medical Group - Bristol	320 Bristol West Boulevard	Bristol	TN	37620
			Holston Medical Group - Kingsport 2	4848 Fort Henry Drive	Kingsport	TN	37663
			Holston Medical Group - Kingsport 3	105 W Stone Drive	Kingsport	TN	37660
			Holston Medical Group - Kingsport 4	2033 Meadowview Lane	Kingsport	TN	37660
			Holston Medical Group Urgent Care - Bristol 1	240 Medical Park Boulevard	Bristol	TN	37620
			Kingsport Podiatry	2004 American Way	Kingsport	TN	37660
			Mountain Region Family Medicine	101 Professional Park Pvt Drive	Kingsport	TN	37663
				444 Clinchfield Street	Kingsport	TN	37660
			Muncy Family Chiropractic	300 Moore Street	Bristol	VA	24201
			Practice of Booher, Jeffrey R	615 Volunteer Parkway	Bristol	TN	37620
			Practice of Chapman, Richard E	135 W Ravine Road	Kingsport	TN	37660
			Sheri Denise Wingate DC	5661 Highway 11 E	Piney Flats	TN	37686
			Urology Associates of Kingsport	822 Broad Street	Kingsport	TN	37660
			Associated Orthopedics	430 W Ravine Road	Kingsport	TN	37660
<b>Home Health</b>							
	Home Health	Ballad Health	Advanced Home Care, Inc.-Kingsport	105 Jack White Drive	Kingsport	TN	37664
		All Other	Amedisys Home Health - Kingsport	116 Jack White Dr	Kingsport	TN	37664
			Apria Healthcare	2021 Brookside Ln	Kingsport	TN	37660
			Kindred at Home	2004 American Way	Kingsport	TN	37660
			Smoky Mountain Home Health and Hospice - Kingsport	106 Ferrell Ave	Kingsport	TN	37663
<b>Hospice/Palliative Care</b>							
	Hospice	Ballad Health	Wellmont Hospice House	280 Steeles Rd	Bristol	TN	37620
		All Other	Amedisys Hospice - Kingsport	116 Jack White Dr	Kingsport	TN	37664
			Avalon Hospice - Kingsport	4619 Fort Henry Dr	Kingsport	TN	37663
			BrightStar Care	140 Sprint Dr	Blountville	TN	37617
			Smoky Mountain Home Health & Hospice - Kingsport	106 Ferrell Ave	Kingsport	TN	37663
<b>O/P Therapy</b>							
	Rehabilitation & Physical Therapy	Ballad Health	Bristol Regional Outpatient Rehabilitation	1996 West State Street	Bristol	TN	37620
			Mountain States Rehabilitation-Indian Path	2204 Pavilion Drive	Kingsport	TN	37660
			Results Physiotherapy Bristol	320 Bristol West Boulevard	Bristol	TN	37620
			Sullivan Center Outpatient Rehabilitation and Physical Therapy	103 West Stone Drive	Kingsport	TN	37660
			The Hand Center at Bristol Regional	1 Medical Park Boulevard	Bristol	TN	37620
			Wellmont Physical Therapy at the YMCA	1100 Franklin Square	Kingsport	TN	37664
			Outpatient Neurologic and Pediatric Rehab	1 Medical Park Boulevard	Bristol	TN	37620
			Eastman Outpatient Campus	111 West Stone Drive	Kingsport	TN	37660
			Outpatient Physical Therapy at the YMCA	1840 Meadowview Road	Kingsport	TN	37660
		All Other	Achieve Health and Wellness - Kingsport	1732 N Eastman Rd	Kingsport	TN	37664
			Advance Physical Therapy	1101 E Stone Drive	Kingsport	TN	37660
			Appalachian Orthopedic Associates - Bristol	260 Midway Medical Park	Bristol	TN	37620

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Service Type Category	Service Type	Affiliation	Facility Name	Address	City	State	Zip Code
O/P Therapy	Rehabilitation & Physical Therapy	All Other	Appalachian Rehabilitation and Sports Medicine	105 Meadow View Rd	Bristol	TN	37620
			Benchmark Physical Therapy-Bristol	1430 Volunteer Parkway	Bristol	TN	37620
			Benchmark Physical Therapy-Kingsport	1 Sheridan Square	Kingsport	TN	37660
			Colonial Heights Physical Therapy	5334 Fort Henry Drive	Kingsport	TN	37663
			Comprehensive Community Services-Kingsport 1	6145 Temple Star Road	Kingsport	TN	37660
			Comprehensive Community Services-Kingsport 2	702 E Sullivan Street	Kingsport	TN	37660
			Highlands Neurosurgery	1 Medical Park Boulevard	Bristol	TN	37620
			HMG Rehabilitation at Sapling Grove	240 Medical Park Blvd	Bristol	TN	37620
			Holston Medical Group - Kingsport 1	2323 N John B Dennis Highway	Kingsport	TN	37660
			Holston Medical Group Rehabilitation Services	105 W Stone Drive	Kingsport	TN	37660
			Results Physiotherapy-Kingsport, TN-Clinchfield	444 Clinchfield Street	Kingsport	TN	37660
			TriCities Spine	320 Bristol West Boulevard	Bristol	TN	37620
			CORA Physical Therapy - Bristol	1159 Volunteer Parkway	Bristol	TN	37620
	CORA Physical Therapy - Kingsport	1825 N Eastman Rd	Kingsport	TN	37664		
IP Rehab	All Other	HealthSouth Rehabilitaton Hospital	113 Cassell Drive	Kingsport	TN	37660	
<b>Psych Hospital</b>	IP Psych Services	Ballad Health	Bristol Regional Medical Center - MedPsych Unit	1 Medical Park Boulevard	Bristol	TN	37620
<b>SNF</b>	LTAC	Ballad Health	Select Specialty @ Bristol Regional Medical Center	1 Medical Park Boulevard	Bristol	TN	37620
	Nursing Home	Ballad Health	The Wexford House	2421 John B. Dennis Parkway	Kingsport	TN	37660
		All Other	Brookhaven Manor	2035 Stonebrook Place	Kingsport	TN	37660
			Greystone Health Care Center	181 Dunlap Road	Blountville	TN	37617
			Holston Manor	3641 Memorial Boulevard	Kingsport	TN	37664
			The Cambridge House	250 Bellebrook Road	Bristol	TN	37620
			NHC Transitional Care	2000 Brookside Drive	Kingsport	TN	37660
			Asbury Place	100 Netherland Ln	Kingsport	TN	37660
<b>Therapeutic</b>	Chemotherapy	Ballad Health	Christine LaGuardia Phillips Cancer Center (HVMC)	130 W Ravine Road	Kingsport	TN	37660
J.D. and Lorraine Nicewonder Cancer Center (BRMC)			1 Medical Park Boulevard	Bristol	TN	37620	
Regional Cancer Center at Indian Path Medical Center			2205 Pavilion Drive	Kingsport	TN	37660	
Kingsport Hemotology Oncology Office			4485 W Stone Drive	Kingsport	TN	37660	
	Dialysis Services	All Other	Fresenius Medical Care-Bristol	2530 W State Street	Bristol	TN	37620
			Fresenius Medical Care-Kingsport	2002 Brookside Drive	Kingsport	TN	37660
			Fresenius Medical Care-West Kingsport	3600 Netherland Inn Road	Kingsport	TN	37660
	Radiation Therapy	Ballad Health	Christine LaGuardia Phillips Cancer Center (HVMC)	130 W Ravine Road	Kingsport	TN	37660
			J.D. and Lorraine Nicewonder Cancer Center (BRMC)	1 Medical Park Boulevard	Bristol	TN	37620
			Regional Cancer Center at Indian Path Medical Center	2205 Pavilion Drive	Kingsport	TN	37660

**Patient Choice Options for Ancillary and Post-Acute Services**

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**JOHNSON COUNTY COMMUNITY HOSPITAL**

Service Type Category	Service Type	Affiliation	Facility Name	Address	City	State	Zip Code
<b>Ancillary</b>							
	<b>Pharmacy</b>	All Other	<b>Adams Pharmacy</b>	851 South Shady Street	Mountain City	TN	37683
			<b>Boone Drugs - Mountain City</b>	1641 South Shady Street	Mountain City	TN	37683
			<b>Family Prescription Center</b>	129 West Main Street	Mountain City	TN	37683
			<b>Mountain City Pharmacy</b>	1641 S Shady Street	Mountain City	TN	37683
			<b>Rite Aid-Mountain City</b>	103 North Shady Street	Mountain City	TN	37683
<b>Diagnostic</b>							
	<b>CT</b>	Ballad Health	<b>Johnson County Community Hospital</b>	1901 South Shady Street	Mountain City	TN	37683
	<b>MRI</b>	Ballad Health	<b>Johnson County Community Hospital</b>	1901 South Shady Street	Mountain City	TN	37683
	<b>XRAY</b>	Ballad Health	<b>Johnson County Community Hospital</b>	1901 South Shady Street	Mountain City	TN	37683
		All Other	<b>High Country Imaging</b>	588 S Shady Street	Mountain City	TN	37683
<b>Home Health</b>							
	<b>Home Health</b>	Ballad Health	<b>Mountain States Home Health - Johnson County</b>	1987 South Shady Street	Mountain City	TN	37683
		All Other	<b>Amedisys Home Health - Johnson County Intrepid Healthcare Services</b>	203 Forge Creek Rd	Mountain City Mountain City	TN TN	37683
<b>O/P Therapy</b>							
	<b>Rehabilitation &amp; Physical Therapy</b>	Ballad Health	<b>Mountain States Outpatient Rehab - Johnson County Community</b>	1901 Shady Street	Mountain City	TN	37683
<b>SNF</b>							
	<b>Nursing Home</b>	All Other	<b>Mountain City Care and Rehabilitation Center</b>	919 Medical Park Drive	Mountain City	TN	37683
<b>Therapeutic</b>							
	<b>Dialysis Services</b>	All Other	<b>Fresenius Medical Care-Mountain City</b>	120 Pioneer Village Drive	Mountain City	TN	37683

**Patient Choice Options for Ancillary and Post-Acute Services**

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**JOHNSON CITY MEDICAL CENTER**

Service Type Category	Service Type	Affiliation	Facility Name	Address	City	State	Zip Code	
<b>Ancillary</b>	<b>Pharmacy</b>	Ballad Health	<b>Mountain State Pharmacy at JCMC</b>	400 N State of Franklin Road	Johnson City	TN	37604	
			<b>Mountain State Pharmacy at Johnson City</b>	523 N State of Franklin Road	Johnson City	TN	37604	
	All Other	<b>Bevins Pharmacy</b>		1301 N Roan Street	Johnson City	TN	37601	
		<b>Blankenship Pharmacy</b>		222 East Watauga Avenue	Johnson City	TN	37601	
		<b>Boones Creek Pharmacy</b>		4729 N Roan Street	Johnson City	TN	37615	
		<b>CVS Pharmacy-Johnson City 1</b>		840 W Market Street	Johnson City	TN	37604	
		<b>CVS Pharmacy-Johnson City 2</b>		2111 N Roan Street	Johnson City	TN	37601	
		<b>CVS Pharmacy-Johnson City 3</b>		4209 N Roan Street	Johnson City	TN	37601	
		<b>CVS Pharmacy-Johnson City 4</b>		1940 South Roan Street	Johnson City	TN	37601	
		<b>Family Pharmacy</b>		1714 Highway 93	Fall Branch	TN	37656	
		<b>Food City Pharmacy- Johnson City 3</b>						
		<b>Food City Pharmacy-Gray</b>			125 Judge Gresham Road	Gray	TN	37615
		<b>Food City Pharmacy-Jonesborough</b>			500 Forest Drive	Jonesborough	TN	37659
		<b>Food City Pharmacy-Johnson City 1</b>			4307 N Roan Street	Johnson City	TN	37615
		<b>Food City Pharmacy-Johnson City 2</b>			2120 S Roan Street	Johnson City	TN	37601
		<b>Gray Pharmacy</b>			208 Suncrest Street	Gray	TN	37615
		<b>Hillcrest Drug Store</b>			714 W Market Street	Johnson City	TN	37604
		<b>Ingle's Market Pharmacy-Johnson City</b>			4470 N Roan Street	Johnson City	TN	37615
		<b>Ingle's Market Pharmacy-Jonesborough</b>			1200 W Jackson Boulevard	Jonesborough	TN	37659
		<b>Kroger-Johnson City 1</b>			112 Sunset Drive	Johnson City	TN	37604
		<b>Kroger-Johnson City 2</b>			1805 W State of Franklin Road	Johnson City	TN	37604
		<b>Medicine Shoppe-Jonesborough</b>			1238 E Jackson Boulevard	Jonesborough	TN	37659
		<b>Mooney's Discount Pharmacy</b>			1107 N Roan Street	Johnson City	TN	37601
		<b>Olde Towne Pharmacy</b>			102 West Jackson Boulevard	Jonesborough	TN	37659
		<b>Princeton Drug</b>			105 Broyles Drive	Johnson City	TN	37601
		<b>Pro Compounding</b>			525 N State of Franklin Road	Johnson City	TN	37604
		<b>Rite Aid-Jonesborough</b>			417 Boones Creek Road	Jonesborough	TN	37659
		<b>Sam's Club-Johnson City</b>			3060 Franklin Terrace	Johnson City	TN	37604
		<b>Val-U- Pharmacy</b>			2811 W Market Street	Johnson City	TN	37604
		<b>Walgreens-Gray</b>			5104 Bobby Hicks Highway	Gray	TN	37615
		<b>Walgreens-Johnson City 1</b>			429 N State of Franklin Road	Johnson City	TN	37604
		<b>Walgreens-Johnson City 2</b>			2240 N Roan Street	Johnson City	TN	37601
<b>Walgreens-Johnson City 3</b>			4210 N Roan Street	Johnson City	TN	37601		
<b>Walgreens-Johnson City 4</b>			606 N Broadway Street	Johnson City	TN	37601		
<b>Walgreens-Johnson City 5</b>			1430 S Roan Street	Johnson City	TN	37601		
<b>Walgreens-Jonesborough</b>			531 E Jackson Boulevard	Jonesborough	TN	37659		
<b>Wal-Mart- Johnson City 1</b>			2915 W Market Street	Johnson City	TN	37604		
<b>Wal-Mart-Johnson City 2</b>			3111 Browns Mill Road	Johnson City	TN	37604		
<b>West Towne Pharmacy</b>			1619 W Market Street	Johnson City	TN	37604		
<b>Diagnostic</b>	<b>CT</b>	Ballad Health	<b>Franklin Woods Community Hospital</b>	300 Med Tech Parkway	Johnson City	TN	37604	
			<b>Johnson City Medical Center</b>	400 North State of Franklin Road	Johnson City	TN	37604	

**Patient Choice Options for Ancillary and Post-Acute Services**

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**JOHNSON CITY MEDICAL CENTER**

Service Type Category	Service Type	Affiliation	Facility Name	Address	City	State	Zip Code	
Diagnostic	CT	Ballad Health	Mountain States Imaging at Med Tech Parkway	301 Med Tech Parkway	Johnson City	TN	37604	
		All Other	James H. Quillen (Mountain Home) VA Medical Center	809 Lamont Street	Mountain Home	TN	37684	
			Medical Care, PLLC (Johnson City)	401 East Main Street	Johnson City	TN	37601	
			Mountain Empire Radiology Inc PC	1301 Sunset Drive	Johnson City	TN	37604	
MRI	Ballad Health		Franklin Woods Community Hospital	300 Med Tech Parkway	Johnson City	TN	37604	
			Johnson City Medical Center	400 North State of Franklin Road	Johnson City	TN	37604	
			Mountain States Imaging at Med Tech Parkway	301 Med Tech Parkway	Johnson City	TN	37604	
	All Other		Appalachian Orthopaedic Associates - Johnson City	3 Professional Park	Johnson City	TN	37604	
			James H. Quillen (Mountain Home) VA Medical Center	809 Lamont Street	Mountain Home	TN	37684	
			Mountain Empire Radiology Inc PC	1301 Sunset Drive	Johnson City	TN	37604	
		Watauga Orthopaedics, PLC	2410 Susannah Street	Johnson City	TN	37601		
XRAY	Ballad Health		East Tennessee Ambulatory Surgery Center LLC	701 Med Tech Parkway	Johnson City	TN	37604	
			Franklin Woods Community Hospital	300 Med Tech Parkway	Johnson City	TN	37604	
			Johnson City Medical Center	400 North State of Franklin Road	Johnson City	TN	37604	
			Wellmont Urgent Care & Wellworks	378 Marketplace Drive	Johnson City	TN	37604	
			Mountain States Medical Group Trauma JC	408 N State of Franklin Road	Johnson City	TN	37604	
	All Other			Appalachian Orthopaedic Associates - Johnson City	3 Professional Park	Johnson City	TN	37604
				David Theodore Hamilos DPM	508 Princeton Road	Johnson City	TN	37601
				East Tennessee Brain and Spine Center	701 Med Tech Parkway	Johnson City	TN	37604
				Edward J Peeks DC	401 N Boone Street	Johnson City	TN	37604
				ETSU Family Medicine Associates	917 W Walnut Street	Johnson City	TN	37604
				ETSU Physicians and Associates	325 N State of Franklin Road	Johnson City	TN	37604
				Foot & Ankle Center	1303 Sunset Drive	Johnson City	TN	37604
				Johnson City Chiropractic Clinic PC	206 Princeton Road	Johnson City	TN	37601
				Johnson City Urological Clinic	2340 Knob Creek Road	Johnson City	TN	37604
				Jones Chiropractic Clinic	801 E Watauga Avenue	Johnson City	TN	37601
				Kind Chiropractic Care	1102 Sunset Drive	Johnson City	TN	37604
				Medical Care, PLLC (Johnson City)	401 East Main Street	Johnson City	TN	37601
				Mountain Empire Radiology Inc PC	1301 Sunset Drive	Johnson City	TN	37604
				Mountain Empire Surgery Center LP	601 Med Tech Parkway	Johnson City	TN	37604
				Mountain Home VAMC	Sidney and Lamont Streets	Mountain Home	TN	37684
				PMA Surgery Center, LLC	101 Med Tech Parkway	Johnson City	TN	37604
				Practice of Hendrix, Christopher Michael	296 Wesley Street	Johnson City	TN	37601
				Practice of Hillman, Philip Aaron	110 University Parkway	Johnson City	TN	37604
				Pulmonary Associates	310 N State of Franklin Road	Johnson City	TN	37604
				Samuel F Messimer DC	501 W Oakland Avenue	Johnson City	TN	37604
				Spinal Corrective Center	306 Sunset Drive	Johnson City	TN	37604
		Trinity Hand Specialists	2335 Knob Creek Road	Johnson City	TN	37604		
		Watauga Orthopaedics, PLC	2410 Susannah Street	Johnson City	TN	37601		

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**JOHNSON CITY MEDICAL CENTER**

Service Type Category	Service Type	Affiliation	Facility Name	Address	City	State	Zip Code
<b>Home Health</b>							
	<b>Home Health</b>	Ballad Health	<b>Mountain States Home Care - Kingsport</b>	101 Med Tech Parkway	Johnson City	TN	37604
			<b>Ballad Health Home Health &amp; Hospice - Johnson City</b>	101 Med Tech Parkway	Johnson City	TN	37604
		All Other	<b>Amedisys Home Health - Johnson City</b>	136 W Springbrook Drive	Johnson City	TN	37604
			<b>At Home HealthCare - Johnson City</b>	112 E Myrtle Ave	Johnson City	TN	37601
			<b>Help at Home - Johnson City</b>	4 Limited Centre St	Johnson City	TN	37604
			<b>Maxim Healthcare Services - Johnson City</b>	208 Sunset Dr	Johnson City	TN	37604
			<b>NHC Homecare - Johnson City</b>	709 Med Tech Parkway	Johnson City	TN	37604
			<b>Procure Home Health Services - Johnson City</b>	9 Worth Cir	Johnson City	TN	37604
<b>Hospice/Palliative Care</b>							
	<b>Hospice</b>	Ballad Health	<b>Ballad Health Hospice</b>	509 Med Tech Pkwy	Johnson City	TN	37604
		All Other	<b>Avalon Hospice - Johnson City</b>	208 Sunset Dr	Johnson City	TN	37604
			<b>Caris Healthcare Johnson City</b>	110 W Springbrook Dr	Johnson City	TN	37604
<b>O/P Therapy</b>							
	<b>Rehabilitation &amp; Physical Therapy</b>	Ballad Health	<b>Mountain States Rehab - Outpatient</b>	415 N State of Franklin Rd	Johnson City	TN	37604
			<b>Wellmont Physical Therapy at Johnson City</b>	2428 Knob Creek Road	Johnson City	TN	37604
			<b>Niswonger Children's Therapy Services</b>	400 N. State of Franklin Road	Johnson City	TN	37604
		All Other	<b>Achieve Health and Wellness - Gray</b>	406 Roy Martin Rd	Gray	TN	37615
			<b>Appalachian Rehabilitation</b>	3 Professional Park Drive	Johnson City	TN	37604
			<b>Benchmark Physical Therapy - Johnson City</b>	2913 Boones Creek Rd	Johnson City	TN	37615
			<b>Benchmark Physical Therapy-Jonesborough</b>	900 E Jackson Boulevard	Jonesborough	TN	37659
			<b>Blue Ridge Physical Therapy</b>	3915 Bristol Highway	Johnson City	TN	37601
			<b>Functional Pathways</b>	400 N Boone Street	Johnson City	TN	37604
			<b>Physical Therapy Services - Johnson City</b>	401 E Main Street	Johnson City	TN	37601
			<b>PT Solutions Physical Therapy - Johnson City</b>	3135 Peoples St	Johnson City	TN	37604
			<b>Results Physiotherapy-Johnson City, TN-Franklin Woods</b>	701 Med Tech Parkway	Johnson City	TN	37604
			<b>Robert D. Algee</b>	3 Professional Park Drive	Johnson City	TN	37604
			<b>State of Franklin Healthcare Associates</b>	313 Princeton Road	Johnson City	TN	37601
			<b>Terrl L Duggin</b>	3212 Hanover Rd	Johnson City	TN	37604
			<b>Watauga Orthopaedics PLC</b>	2410 Susannah Street	Johnson City	TN	37601
			<b>William M. Hensley</b>	313 W Fairview Avenue	Johnson City	TN	37604
			<b>CORA Physical Therapy - Johnson City</b>	4307 N Roan St	Johnson City	TN	37615
<b>Psych Hospital</b>							
	<b>IP Psych Services</b>	Ballad Health	<b>Woodridge Psychiatric Hospital</b>	403 North State of Franklin Road	Johnson City	TN	37604
<b>SNF</b>							
	<b>Nursing Home</b>	Ballad Health	<b>Princeton Transitional Care</b>	2511 Wesley Street	Johnson City	TN	37601
		All Other	<b>Agape Nursing &amp; Rehabilitation Center</b>	105 E Myrtle Avenue	Johnson City	TN	37604

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**JOHNSON CITY MEDICAL CENTER**

Service Type Category	Service Type	Affiliation	Facility Name	Address	City	State	Zip Code	
SNF	Nursing Home	All Other	Agape Nursing and Rehab Center	505 N Roan St	Johnson City	TN	37601	
			Asbury Place at Johnson City	105 West Myrtle Avenue	Johnson City	TN	37604	
			Christian Care Center of Johnson City	140 Technology Lane	Johnson City	TN	37604	
			Cornerstone Village	309 Princeton Rd	Johnson City	TN	37601	
			Cornerstone Village - North	2012 Sherwood Drive	Johnson City	TN	37601	
			Cornerstone Village - South	211 University Pkwy	Johnson City	TN	37604	
			Four Oaks Health Care Center	1101 Persimmon Ridge Road	Jonesborough	TN	37659	
			John M. Reed Health and Rehab	124 John Reed Home Road	Limestone	TN	37681	
			Lakebridge Health Care Center	115 Woodlawn Drive	Johnson City	TN	37604	
			Life Care Center of Gray	791 Old Gray Station Road	Gray	TN	37615	
			NHC HealthCare, Johnson City	3209 Bristol Highway	Johnson City	TN	37601	
			The Waters of Johnson City	140 Technology Ln	Johnson City	TN	37604	
Therapeutic	Chemotherapy	Ballad Health	Regional Cancer Center at Johnston City Medical Center	1 Professional Park Drive	Johnson City	TN	37604	
			St. Jude Tri-Cities Affiliate Clinic	400 N State of Franklin Road	Johnson City	TN	37604	
	Dialysis Services	All Other	All Other	Mountain Home VA Medical Center	Sidney and Lamont Streets	Mountain Home	TN	37684
				DaVita Tennessee Valley Dialysis Center	107 Woodlawn Drive	Johnson City	TN	37604
				Fresenius Medical Care-Johnson City	100 Technology Lane	Johnson City	TN	37604
				TN Smokie Mountain Dialysis	101 Med Tech Parkway	Johnson City	TN	37604
	Radiation Therapy	Ballad Health	All Other	Regional Cancer Center at Johnston City Medical Center	400 N State of Franklin Road	Johnson City	TN	37604
				Mountain Home VA Medical Center	Sidney and Lamont Streets	Mountain Home	TN	37684
IP Rehab	Rehabilitation & Physical Therapy	All Other	Quillen Rehabilitation Hospital	2511 Wesley Street	Johnson City	TN	37601	

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**JOHNSTON MEMORIAL HOSPITAL**

Service Type Category	Service Type	Affiliation	Facility Name	Address	City	State	Zip Code
<b>Ancillary</b>	<b>Pharmacy</b>	Ballad Health	<b>Mountain States Pharmacy at JMH</b>	16000 Johnston Memorial Drive	Abingdon	VA	24211
		All Other	<b>Buntings &amp; Northside Drug Center</b>	1883 Euclid Avenue	Bristol	VA	24201
			<b>CVS Pharmacy-Abingdon</b>	801 E Main Street	Abingdon	VA	24210
			<b>CVS Pharmacy-Bristol VA</b>	31 East Valley Drive	Bristol	VA	24201
			<b>Falcon Pharmacy</b>	795 Cummings Street	Abingdon	VA	24211
			<b>Food City Pharmacy-Abingdon</b>	396 Towne Center Drive	Abingdon	VA	24210
			<b>Food City Pharmacy-Bristol 1</b>	100 Bonham Road	Bristol	VA	24202
			<b>Food City Pharmacy-Bristol 2</b>	1320 Euclid Avenue	Bristol	VA	24201
			<b>Food City Pharmacy-Damascus</b>	736 N Beaver Dam Avenue	Damascus	VA	24236
			<b>Glade Pharmacy</b>	33472 Lee Highway	Glade Spring	VA	24340
			<b>Highlands Community Pharmacy</b>	16400 Jeb Stuart Hwy	Abingdon	VA	24211
			<b>Kroger-Abingdon</b>	466 Cummings Street	Abingdon	VA	24210
			<b>Kroger-Bristol</b>	31 Midway Street	Bristol	VA	24201
			<b>Laurel Family Drug</b>	204 S Shady Avenue	Damascus	VA	24236
			<b>Michael's Pharmacy</b>	101 Charwood Drive	Abingdon	VA	24210
			<b>North Gate Pharmacy - Abingdon</b>	26100 Lee Highway	Abingdon	VA	24211
			<b>Rite Aid-Abingdon</b>	711 W Main Street	Abingdon	VA	24210
			<b>Rite Aid-Bristol</b>	1200 Euclid Avenue	Bristol	VA	24201
			<b>Rx Services Inc.</b>	18377 Westinghouse Road	Abingdon	VA	24210
			<b>Sam's Club-Bristol</b>	13249 Lee Highway	Bristol	VA	24202
			<b>Target-Bristol</b>	16600 Highlands Center Boulevard	Bristol	VA	24202
			<b>Walgreens-Abingdon</b>	668 W Main Street	Abingdon	VA	24210
			<b>Walgreens-Bristol</b>	1460 Lee Highway	Bristol	VA	24201
	<b>Wal-Mart Pharmacy - Abingdon</b>	16032 Fifteen Mile Boulevard	Abingdon	VA	24211		
	<b>Wal-Mart-Bristol 2</b>	13245 Lee Highway	Bristol	VA	24202		
<b>Diagnostic</b>	<b>CT</b>	Ballad Health	<b>Johnston Memorial Hospital</b>	16000 Johnston Memorial Drive	Abingdon	VA	24211
			<b>Wellmont Urgent Care Abingdon</b>	24530 Falcon Place Boulevard	Abingdon	VA	24210
	<b>MRI</b>	Ballad Health	<b>Johnston Memorial Hospital</b>	16000 Johnston Memorial Drive	Abingdon	VA	24211
		<b>XRAY</b>	Ballad Health	<b>Blue Ridge Orthopedics &amp; Sports Medicine</b>	16000 Johnston Memorial Drive	Abingdon	VA
			<b>Johnston Memorial Hospital</b>	16000 Johnston Memorial Drive	Abingdon	VA	24211
			<b>Wellmont Medical Associates Inc.</b>	24530 Falcon Place Boulevard	Abingdon	VA	24211
	All Other		<b>Abingdon Foot &amp; Ankle Clinic</b>	1231 W Main Street	Abingdon	VA	24210
		<b>Holston Family Health Center</b>	306 S Shady Avenue	Damascus	VA	24236	
<b>Home Health</b>	<b>Home Health</b>	Ballad Health	<b>Ballad Health Home Health</b>	312 Cummings Street	Abingdon	VA	24210
		All Other	<b>Abingdon Home Care</b>	361 Falls Dr	Abingdon	VA	24210
			<b>Amedisys Home Health Care - Abingdon</b>	16009 Porterfield Hwy	Abingdon	VA	24210
			<b>American Home Health</b>	2681 Lee Highway	Bristol	VA	24202

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**JOHNSTON MEMORIAL HOSPITAL**

Service Type Category	Service Type	Affiliation	Facility Name	Address	City	State	Zip Code					
Home Health	Home Health	All Other	Bristol Home Health Services	29 Lancaster Street	Bristol	VA	24201					
			Divine Home Care	111 Commonwealth Avenue	Bristol	VA	24201					
			Home Nursing Services of Southwest VA	611 Campus Drive	Abingdon	VA	24210					
			Intrepid USA Healthcare Services - Abingdon	15856 Porterfield Highway	Abingdon	VA	24210					
			Team Nurse	470 E Main St	Abingdon	VA	24210					
	Home Health	All Other	Medical Services of America Home Health and Hospice - Abingdon	574 Cummings St	Abingdon	VA	24210					
Hospice/Palliative Care	Hospice	Ballad Health	Ballad Health Hospice	312 Cummings Street	Abingdon	VA	24210					
		All Other	Caris Healthcare Bristol	1701 Euclid Ave	Bristol	VA	24201					
			Hometown Hospice - Abingdon	611 Campus Dr	Abingdon	VA	24210					
			Hospice of Southwest VA	301 Valley St NE	Abingdon	VA	24210					
			Medical Services of America Home Health & Hospice - Abingdon	574 Cummings St	Abingdon	VA	24210					
			Medical Services of America Home Health and Hospice - Abingdon	574 Cummings St	Abingdon	VA	24210					
O/P Therapy	Rehabilitation & Physical Therapy	Ballad Health	Function Better Physical Therapy	136 Bristol East Road	Bristol	VA	24202					
			Wellmont Physical Therapy Abingdon	24530 Falcon Pl Blvd	Abingdon	VA	24211					
			Mountain States Outpatient Rehab - Johnston Memorial Hospital	445 Porterfield Hwy	Abingdon	VA	24210					
		All Other	Abingdon Therapy Services	611 Campus Drive	Abingdon	VA	24210					
			Ann B. Fleenor	370 E Main Street	Abingdon	VA	24210					
			BenchMark Physical Therapy - Abingdon	26106 Lee Hwy	Abingdon	VA	24211					
	Blue Mountain Therapy		18596 Lee Hwy	Abingdon	VA	24210						
	Cornerstone Therapy & Balance		16487 Jeb Stuart Highway	Abingdon	VA	24211						
	IP Rehab	All Other	Watauga Physical Therapy	518 E Main St	Abingdon	VA	24210					
			The Rehabilitation Hospital of SouthWest Virginia	103 North Street	Bristol	VA	24201					
			Psych Hospital	IP Psych Services	Ballad Health	Ridgeview Pavilion	103 North Street	Bristol	VA	24201		
						SNF	Nursing Home	All Other	Abingdon Health & Rehab Center	15051 Harmony Hills Lane	Abingdon	VA
Grace Healthcare of Abingdon									600 Walden Road	Abingdon	VA	24210
Grandview Adult Care									27294 Denton Valley Rd	Abingdon	VA	24211
NHC HealthCare - Bristol	245 North St	Bristol							VA	24201		
Preston Square Rehab/Wellness	2426 Lee Highway	Bristol	VA	24202								
Therapeutic	Chemotherapy	Ballad Health	Regional Cancer Center at Johnston Memorial Hospital	16000 Johnston Memorial Drive	Abingdon	VA	24211					
			Dialysis Services	All Other	Fresenius Medical Care-Abingdon	341 Falls Drive NW	Abingdon	VA	24210			
Hiberian Nephrology Group	323 Falls Drive NW	Abingdon			VA	24210						

**Patient Choice Options for Ancillary and Post-Acute Services**

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**JOHNSTON MEMORIAL HOSPITAL**

<b>Service Type Category</b>	<b>Service Type</b>	<b>Affiliation</b>	<b>Facility Name</b>	<b>Address</b>	<b>City</b>	<b>State</b>	<b>Zip Code</b>
	<b>Radiation Therapy</b>	Ballad Health	<b>Regional Cancer Center at Johnston Memorial Hospital</b>	16000 Johnston Memorial Drive	Abingdon	<b>VA</b>	24211

**Patient Choice Options for Ancillary and Post-Acute Services**

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**LAUGHLIN MEMORIAL HOSPITAL**

Service Type Category	Service Type	Affiliation	Facility Name	Address	City	State	Zip Code
<b>Ancillary</b>							
	<b>Pharmacy</b>	All Other	<b>Atchley Drug Center</b>	511 Asheville Highway	Greeneville	TN	37743
			<b>Central Drug Store &amp; Gift Shop</b>	239 W Summer Street	Greeneville	TN	37743
			<b>Community Pharmacy of Greeneville</b>	1402 Tusculum Boulevard2	Greeneville	TN	37745
			<b>Corley's Pharmacy-Greeneville 1</b>	1004 Snapps Ferry Road	Greeneville	TN	37745
			<b>Corley's Pharmacy-Greeneville 2</b>	1016 Tusculum Boulevard	Greeneville	TN	37745
			<b>CVS Pharmacy-Greeneville 1</b>	1510 E Andrew Johnson Highway	Greeneville	TN	37745
			<b>CVS Pharmacy-Greeneville 2</b>	837 Tusculum Boulevard	Greeneville	TN	37745
			<b>CVS Pharmacy-Greeneville 3</b>	506 Asheville Highway	Greeneville	TN	37743
			<b>Food City Pharmacy-Greeneville 1</b>	905 Snapps Ferry Road	Greeneville	TN	37745
			<b>Food City Pharmacy-Greeneville 2</b>	2755 E Andrew Johnson Highway	Greeneville	TN	37745
			<b>Greene County Drug Health Mart Pharm</b>	906 Tusculum Boulevard	Greeneville	TN	37745
			<b>K-Mart-Greeneville</b>	1355 Tusculum Boulevard	Greeneville	TN	37745
			<b>Medicine Shoppe-Mosheim</b>	6766 W Andrew Johnson Highway	Mosheim	TN	37818
			<b>Publix Pharmacy</b>	2321 E Andrew Johnson Hwy	Greeneville	TN	37745
			<b>Susong Pharmacy</b>	2255 E Andrew Johnson Highway	Greeneville	TN	37745
			<b>Town &amp; Country Pharmacy</b>	910 Tusculum Boulevard	Greeneville	TN	37745
			<b>Walgreens-Greeneville 1</b>	1650 E Andrew Johnson Highway	Greeneville	TN	37745
			<b>Walgreens-Greeneville 2</b>	104 Asheville Highway	Greeneville	TN	37743
			<b>Wal-Mart-Greeneville</b>	3755 E Andrew Johnson Highway	Greeneville	TN	37745
<b>Diagnostic</b>							
	<b>CT</b>	Ballad Health	<b>Laughlin Memorial Hospital, Inc.</b>	1420 Tusculum Boulevard	Greeneville	TN	37745
			<b>Takoma Regional Hospital</b>	401 Takoma Avenue	Greeneville	TN	37743
	<b>MRI</b>	Ballad Health	<b>Laughlin Memorial Hospital, Inc.</b>	1420 Tusculum Boulevard	Greeneville	TN	37745
			<b>Takoma Regional Hospital</b>	401 Takoma Avenue	Greeneville	TN	37743
	<b>XRAY</b>	Ballad Health	<b>Laughlin Memorial Hospital, Inc.</b>	1420 Tusculum Boulevard	Greeneville	TN	37745
			<b>Takoma Medical Associates</b>	438 E Vann Road	Greeneville	TN	37743
			<b>Takoma Regional Hospital</b>	401 Takoma Avenue	Greeneville	TN	37743
		All Other	<b>Dwight D Eisenhower Army Medical Center</b>	1404 Tusculum Boulevard	Greeneville	TN	37745
			<b>Greeneville Orthopaedic Clinic, P.C.</b>	LMH 4th Floor2	Greeneville	TN	37745
			<b>Greeneville Pediatric Clinic</b>	221 N Main Street	Greeneville	TN	37745
			<b>John Robert Hamilton Jr DC</b>	1119 Tusculum Boulevard	Greeneville	TN	37745
			<b>Kids First Pediatrics</b>	5000 Monarch Pt	Greeneville	TN	37745
			<b>Practice of Thwing, Philip Tolleson</b>	400 Y Street	Greeneville	TN	37745
			<b>Stephanie Ann Briggs-Frost DC</b>	1128 Tusculum Boulevard	Greeneville	TN	37745
			<b>Summit Medical Group</b>	1404 Tusculum Boulevard	Greeneville	TN	37745
			<b>Womens Center of Greeneville</b>	1021 Coolidge Street	Greeneville	TN	37743
			<b>University Radiology2</b>	1410 Tusculum Boulevard	Greeneville	TN	37745
<b>Home Health</b>							
	<b>Home Health</b>	Ballad Health	<b>Advanced Home Care, Inc. - Greeneville</b>	1012 Coolidge Street	Greeneville	TN	37743
			<b>Laughlin Home Health Agency</b>	1420 Tusculum Boulevard	Greeneville	TN	37745

**Patient Choice Options for Ancillary and Post-Acute Services**

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**LAUGHLIN MEMORIAL HOSPITAL**

Service Type Category	Service Type	Affiliation	Facility Name	Address	City	State	Zip Code
Home Health	Home Health	Ballad Health	Ballad Health Home Health	1420 Tusculum Boulevard	Greeneville	TN	37743
		All Other	Greeneville Home Health	124 Austin St	Greeneville	TN	37745
			Procare Home Health Services - Greeneville	705 Professional Plaza	Greeneville	TN	37745
			Smoky Mountain Home Health and Hospice - Greeneville	1117 Tusculum Blvd	Greeneville	TN	37745
	Amedisys Home Health - Greeneville	404 E Bernard Ave	Greeneville	TN	37745		
Hospice/Palliative Care	Hospice	All Other	Amedisys Hospice - Greeneville	127 Serral Dr	Greeneville	TN	37745
			Caris Healthcare Greeneville	2140 E Andrew Johnson Hwy	Greeneville	TN	37743
			Smoky Mountain Home Health & Hospice - Greeneville	1117 Tusculum Blvd	Greeneville	TN	37743
O/P Therapy	Rehabilitation & Physical Therapy	Ballad Health	Takoma Medical Associates	438 E Vann Road	Greeneville	TN	37743
			Laughlin Memorial Hospital Outpatient Rehab	1420 Tusculum Boulevard	Greeneville	TN	37743
			Ballad Outpatient Rehab - Takoma Regional Hospital	108 West Summer Street	Greeneville	TN	37743
		All Other	Apple Rehab Physical Therapy	533 Tusculum Boulevard	Greeneville	TN	37745
			Benchmark Physical Therapy - Greeneville	225 W Summer St	Greeneville	TN	37743
			Greeneville Orthopaedic Clinic	LMH 4th Floor	Greeneville	TN	37745
			Rehab Care Group-Greeneville	55 Nursing Home Road	Chuckey	TN	37641
PT Solutions Physical Therapy - Greeneville 1 (Contract of Takom	108 W Summer St	Greeneville	TN	37743			
PT Solutions Physical Therapy - Greeneville 2 (Contract of Takom	1321 Tusculum Blvd	Greeneville	TN	37745			
Psych Hospital	IP Psych Services	Ballad Health	Takoma Regional Hospital GeroPsych	401 Takoma Avenue	Greeneville	TN	37743
SNF	Nursing Home	Ballad Health	Laughlin Healthcare Center	801 East McKee Street	Greeneville	TN	37743
		All Other	Durham-Hensley Health and Rehabilitation	55 Nursing Home Road	Chuckey	TN	37641
	Signature Healthcare of Greeneville	106 Holt Court	Greeneville	TN	37743		
Therapeutic	Chemotherapy	Ballad Health	Cancer Center at Laughlin Memorial Hospital	1420 Tusculum Boulevard	Greeneville	TN	37746
	Dialysis Services	All Other	DaVita Greeneville Dialysis	110 Heritage Court	Greeneville	TN	37743
Radiation Therapy	Ballad Health	Cancer Center at Laughlin Memorial Hospital	1420 Tusculum Boulevard	Greeneville	TN	37746	
IP Rehab	IP Rehab	Ballad Health	Takoma Inpatient Rehab	401 Takoma Avenue	Greeneville	TN	37743

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**LONESOME PINE HOSPITAL**

Service Type Category	Service Type	Affiliation	Facility Name	Address	City	State	Zip Code
<b>Ancillary</b>	<b>Pharmacy</b>	Ballad Health	<b>Mountain States Pharmacy at NCH</b>	96 15th Street NW	Norton	VA	24273
		All Other	<b>Big Stone Gap Pharmacy</b>	1980 Holton Avenue E	Big Stone Gap	VA	24219
			<b>Cavalier Pharmacy</b>	301 Church Street NW	Wise	VA	24293
			<b>Cornerstone Pharmacy</b>	205 Kilbourne Avenue	Appalachia	VA	24216
			<b>CVS Pharmacy-Big Stone Gap</b>	605 Wood Avenue E	Big Stone Gap	VA	24219
			<b>CVS Pharmacy-Norton</b>	1128 Park Avenue NW	Norton	VA	24273
			<b>Family Drug Center - Coeburn</b>	517 West Front Street	Coeburn	VA	24230
			<b>Family Drug, Inc.</b>	14 E 27th Street N	Big Stone Gap	VA	24219
			<b>Food City Pharmacy - Clintwood</b>	410 Chase Street	Clintwood	VA	24228
			<b>Food City Pharmacy-Big Stone Gap</b>	603 Wood Avenue E	Big Stone Gap	VA	24219
			<b>Food City Pharmacy-Wise</b>	207 Woodland Drive SW	Wise	VA	24293
			<b>Green Wave Pharmacy</b>	165 Mcclure Avenue	Clintwood	VA	24228
			<b>Hancock-Lambert Pharmacy</b>	342 Main Street	Clintwood	VA	24228
			<b>Haysi Drug Center</b>	23906 Dickenson Highway	Haysi	VA	24256
			<b>Jones &amp; Counts Pharmacy</b>	251 Main Street	Haysi	VA	24256
			<b>Lonesome Pine Economy Drug</b>	517 Park Avenue	Norton	VA	24273
			<b>Pound Discount Pharmacy</b>	11133 Indian Creek Road	Pound	VA	24279
			<b>Rite Aid-Clintwood</b>	Highway 83 and Brushcreek	Clintwood	VA	24228
			<b>Rite Aid-Coeburn</b>	101 Laurel Avenue	Coeburn	VA	24230
			<b>Rite Aid-Pound</b>	11223 Indian Creek Road	Pound	VA	24279
			<b>Union Drug</b>	322 Cloverleaf Square	Big Stone Gap	VA	24219
			<b>Wal-Mart-Norton</b>	780 Commonwealth Drive	Norton	VA	24273
			<b>West End Pharmacy</b>	340 Colley Shopping Center	Clintwood	VA	24228
			<b>Wildcat Pharmacy</b>	8461 Main Street	Pound	VA	24279
			<b>Rite Aid - St. Paul</b>	16435 Wise Street	St Paul	VA	24283
			<b>Community Hospital Pharmacy</b>	100 15th Street NW	Norton	VA	24273
			<b>Hamilton's Pharmacy</b>	16610 Russell Street	St Paul	VA	24283
<b>Diagnostic</b>	<b>CT</b>	Ballad Health	<b>Dickenson Community Hospital</b>	312 Hospital Drive	Clintwood	VA	24228
			<b>Norton Community Hospital</b>	100 Fifteenth Street, NW	Norton	VA	24273
			<b>Southwest Virginia Cancer Center</b>	671 Highway 58 East	Norton	VA	24273
			<b>Wellmont Lonesome Pine Hospital</b>	1990 Holton Avenue, East	Big Stone Gap	VA	24219
			<b>Wellmont Mountain View Regional Medical Center</b>	310 Third Street, NE	Norton	VA	24273
	<b>MRI</b>	Ballad Health	<b>Norton Community Hospital</b>	100 Fifteenth Street, NW	Norton	VA	24273
			<b>Wellmont Lonesome Pine Hospital</b>	1990 Holton Avenue, East	Big Stone Gap	VA	24219
			<b>Wellmont Mountain View Regional Medical Center</b>	310 Third Street, NE	Norton	VA	24273
	<b>XRAY</b>	Ballad Health	<b>Dickenson Community Hospital</b>	312 Hospital Drive	Clintwood	VA	24228
			<b>Norton Community Hospital</b>	100 Fifteenth Street, NW	Norton	VA	24273
			<b>Southwest Virginia Cancer Center</b>	671 Highway 58 East	Norton	VA	24273
			<b>Wellmont Lonesome Pine Hospital</b>	1990 Holton Avenue, East	Big Stone Gap	VA	24219

**Patient Choice Options for Ancillary and Post-Acute Services**

As of 6/30/18

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**LONESOME PINE HOSPITAL**

Service Type Category	Service Type	Affiliation	Facility Name	Address	City	State	Zip Code	
Diagnostic	XRAY	All Other	Family Foot & Anke Clinics	2537 4th Avenue E	Big Stone Gap	VA	24219	
			Lonesome Pine Orthopedic	767 Wood Avenue E	Big Stone Gap	VA	24219	
			Matthew B Jessee DC	135 Plaza Road SW	Wise	VA	24293	
			Stone Mountain Health Services	162 Medical Center Boulevard	Haysi	VA	24256	
<b>Home Health</b>								
Home Health	Home Health	Ballad Health	Ballad Health Home Care and Hospice	312 Hospital Drive	Clintwood	VA	24228	
			Ballad Health Home Health	716 Spring Avenue NE	Wise	VA	24273	
	All Other			Advanced Home Care - Wise	165 Plaza Road	Wise	VA	24293
				First Choice Home Health Care	46 7th Street	Norton	VA	24273
				Home Nursing Company - Clintwood	215 Clintwood Highway	Clintwood	VA	24228
				In Home Care	201 Nottingham Avenue	Wise	VA	24293
				Intrepid USA Healthcare Services - Big Stone Gap	310 Cloverleaf Sq	Big Stone Gap	VA	24219
				Medical Services of America Home Health and Hospice - Wise	413 E Main St	Wise	VA	24293
				Mountain Region Home Health - Coeburn	330 Front St E	Coeburn	VA	24230
				Total Home Care	4890 Clintwood Highway	Clintwood	VA	24228
				Caring Touch Home Health	8463 Main Street	Pound	VA	24279
	NHC Home Health	100 15th Street	Norton	VA	24228			
	<b>Hospice/Palliative Care</b>							
Hospice	Hospice	Ballad Health	Ballad Health Hospice	312 Hospital Drive	Clintwood	VA	24228	
			All Other			Heritage Hall - Big Stone Gap	2045 Valley View Dr	Big Stone Gap
	Heritage Hall - Clintwood	1225 E Main St				Clintwood	VA	24228
	Heritage Hall - Wise	9434 Coeburn Mountain Rd				Wise	VA	24293
	Medical Services of America Home Health and Hospice - Wise	413 E Main St				Wise	VA	24293
	Medical Services of America Hospice - Wise	413 E Main St				Wise	VA	24293
	Hospice and Palliative Care of VA	738 Park Avenue NW #3	Norton	VA	24210			
<b>O/P Therapy</b>								
O/P Therapy	Rehabilitation & Physical Therapy	Ballad Health	Lonesome Pine Outpatient Rehabilitation	1980 Holton Avenue East	Big Stone Gap	VA	24219	
			Mountain States Rehabilitation-Norton	1442 Park Avenue SW	Norton	VA	24273	
			Mountain View Regional Outpatient Rehabilitation	295 Wharton Lane	Norton	VA	24273	
	All Other			Appalachian Physical Therapy	348 Coeburn Avenue SW	Norton	VA	24273
				Cross Roads Point Inc.	412 Quillen Avenue SE	Coeburn	VA	24230
<b>Psych Hospital</b>								
Psych Hospital	IP Psych Services	Ballad Health	Green Oak Behavioral Health - GeroPsych	312 Hospital Drive	Clintwood	VA	24228	
<b>SNF</b>								
SNF	Nursing Home	Ballad Health	MVRMC Skilled Nursing/LTC	310 3rd Street NE	Norton	VA	24273	
			Norton Community Hospital SNF	100 15th Street NW	Norton	VA	24211	

**Patient Choice Options for Ancillary and Post-Acute Services**

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**LONESOME PINE HOSPITAL**

Service Type Category	Service Type	Affiliation	Facility Name	Address	City	State	Zip Code
SNF	Nursing Home	All Other	Heritage Hall - Big Stone Gap	2045 Valley View Road E	Big Stone Gap	VA	24219
			Heritage Hall - Clintwood	161 Hospital Drive	Clintwood	VA	24228
			Heritage Hall - Wise	9434 Coeburn Mountain Road	Wise	VA	24293
Therapeutic	Chemotherapy	Ballad Health	Lonesome Pine Hospital	1990 Holton Avenue	Big Stone Gap	VA	24219
			Cancer Center at Norton Community Hospital	100 15th Street NW	Norton	VA	24273
			Southwest Virginia Cancer Center	671 Highway 58 East	Norton	VA	24273
	Dialysis Services	All Other	Fresenius Medical Care-Mountain Empire	340 Anderson Hollow Road	Norton	VA	24273
Radiation Therapy	Ballad Health	Southwest Virginia Cancer Center	671 Highway 58 East	Norton	VA	24273	
Inpatient	IP Rehab	Ballad Health	Norton Community Hospital Inpatient Rehab	100 15th Street NW	Norton	VA	24273

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**MOUNTAIN VIEW REGIONAL MEDICAL CENTER**

Service Type Category	Service Type	Affiliation	Facility Name	Address	City	State	Zip Code
<b>Ancillary</b>	<b>Pharmacy</b>	Ballad Health	<b>Mountain States Pharmacy at NCH</b>	96 15th Street NW	Norton	VA	24273
		All Other	<b>Big Stone Gap Pharmacy</b>	1980 Holton Avenue E	Big Stone Gap	VA	24219
			<b>Cavalier Pharmacy</b>	301 Church Street NW	Wise	VA	24293
			<b>Cornerstone Pharmacy</b>	205 Kilbourne Avenue	Appalachia	VA	24216
			<b>CVS Pharmacy-Big Stone Gap</b>	605 Wood Avenue E	Big Stone Gap	VA	24219
			<b>CVS Pharmacy-Norton</b>	1128 Park Avenue NW	Norton	VA	24273
			<b>Family Drug Center - Coeburn</b>	517 West Front Street	Coeburn	VA	24230
			<b>Family Drug, Inc.</b>	14 E 27th Street N	Big Stone Gap	VA	24219
			<b>Food City Pharmacy - Clintwood</b>	410 Chase Street	Clintwood	VA	24228
			<b>Food City Pharmacy-Big Stone Gap</b>	603 Wood Avenue E	Big Stone Gap	VA	24219
			<b>Food City Pharmacy-Wise</b>	207 Woodland Drive SW	Wise	VA	24293
			<b>Green Wave Pharmacy</b>	165 McClure Avenue	Clintwood	VA	24228
			<b>Hancock-Lambert Pharmacy</b>	342 Main Street	Clintwood	VA	24228
			<b>Haysi Drug Center</b>	23906 Dickenson Highway	Haysi	VA	24256
			<b>Jones &amp; Counts Pharmacy</b>	251 Main Street	Haysi	VA	24256
			<b>Lonesome Pine Economy Drug</b>	517 Park Avenue	Norton	VA	24273
			<b>Pound Discount Pharmacy</b>	11133 Indian Creek Road	Pound	VA	24279
			<b>Rite Aid-Clintwood</b>	Highway 83 and Brushcreek	Clintwood	VA	24228
			<b>Rite Aid-Coeburn</b>	101 Laurel Avenue	Coeburn	VA	24230
			<b>Rite Aid-Pound</b>	11223 Indian Creek Road	Pound	VA	24279
	<b>Union Drug</b>	322 Cloverleaf Square	Big Stone Gap	VA	24219		
	<b>Wal-Mart-Norton</b>	780 Commonwealth Drive	Norton	VA	24273		
	<b>West End Pharmacy</b>	340 Colley Shopping Center	Clintwood	VA	24228		
	<b>Wildcat Pharmacy</b>	8461 Main Street	Pound	VA	24279		
	<b>Rite Aid - St. Paul</b>	16435 Wise Street	St Paul	VA	24283		
	<b>Community Hospital Pharmacy</b>	100 15th Street NW	Norton	VA	24273		
	<b>Hamilton's Pharmacy</b>	16610 Russell Street	St Paul	VA	24283		
<b>Diagnostic</b>	<b>CT</b>	Ballad Health	<b>Dickenson Community Hospital</b>	312 Hospital Drive	Clintwood	VA	24228
			<b>Norton Community Hospital</b>	100 Fifteenth Street, NW	Norton	VA	24273
			<b>Southwest Virginia Cancer Center</b>	671 Highway 58 East	Norton	VA	24273
			<b>Wellmont Lonesome Pine Hospital</b>	1990 Holton Avenue, East	Big Stone Gap	VA	24219
			<b>Wellmont Mountain View Regional Medical Center</b>	310 Third Street, NE	Norton	VA	24273
	<b>MRI</b>	Ballad Health	<b>Norton Community Hospital</b>	100 Fifteenth Street, NW	Norton	VA	24273
			<b>Wellmont Lonesome Pine Hospital</b>	1990 Holton Avenue, East	Big Stone Gap	VA	24219
			<b>Wellmont Mountain View Regional Medical Center</b>	310 Third Street, NE	Norton	VA	24273
	<b>XRAY</b>	Ballad Health	<b>Dickenson Community Hospital</b>	312 Hospital Drive	Clintwood	VA	24228
			<b>Norton Community Hospital</b>	100 Fifteenth Street, NW	Norton	VA	24273
			<b>Southwest Virginia Cancer Center</b>	671 Highway 58 East	Norton	VA	24273
			<b>Wellmont Lonesome Pine Hospital</b>	1990 Holton Avenue, East	Big Stone Gap	VA	24219

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**MOUNTAIN VIEW REGIONAL MEDICAL CENTER**

Service Type Category	Service Type	Affiliation	Facility Name	Address	City	State	Zip Code	
Diagnostic	XRAY	All Other	Family Foot & Anke Clinics	2537 4th Avenue E	Big Stone Gap	VA	24219	
			Lonesome Pine Orthopedic	767 Wood Avenue E	Big Stone Gap	VA	24219	
			Matthew B Jessee DC	135 Plaza Road SW	Wise	VA	24293	
			Stone Mountain Health Services	162 Medical Center Boulevard	Haysi	VA	24256	
<b>Home Health</b>								
	Home Health	Ballad Health	Ballad Health Home Care and Hospice	312 Hospital Drive	Clintwood	VA	24228	
			Ballad Health Home Health	716 Spring Avenue NE	Wise	VA	24273	
	All Other			Advanced Home Care - Wise	165 Plaza Road	Wise	VA	24293
				First Choice Home Health Care	46 7th Street	Norton	VA	24273
				Home Nursing Company - Clintwood	215 Clintwood Highway	Clintwood	VA	24228
				In Home Care	201 Nottingham Avenue	Wise	VA	24293
				Intrepid USA Healthcare Services - Big Stone Gap	310 Cloverleaf Sq	Big Stone Gap	VA	24219
				Medical Services of America Home Health and Hospice - Wise	413 E Main St	Wise	VA	24293
				Mountain Region Home Health - Coeburn	330 Front St E	Coeburn	VA	24230
				Total Home Care	4890 Clintwood Highway	Clintwood	VA	24228
Caring Touch Home Health	8463 Main Street	Pound	VA	24279				
NHC Home Health	100 15th Street	Norton	VA	24228				
<b>Hospice/Palliative Care</b>								
	Hospice	Ballad Health	Ballad Health Hospice	312 Hospital Drive	Clintwood	VA	24228	
			All Other	Heritage Hall - Big Stone Gap	2045 Valley View Dr	Big Stone Gap	VA	24219
		Heritage Hall - Clintwood		1225 E Main St	Clintwood	VA	24228	
		Heritage Hall - Wise		9434 Coeburn Mountain Rd	Wise	VA	24293	
		Medical Services of America Home Health and Hospice - Wise		413 E Main St	Wise	VA	24293	
		Medical Services of America Hospice - Wise		413 E Main St	Wise	VA	24293	
		Hospice and Palliative Care of VA	738 Park Avenue NW #3	Norton	VA	24210		
<b>O/P Therapy</b>								
	Rehabilitation & Physical Therapy	Ballad Health	Lonesome Pine Outpatient Rehabilitation	1980 Holton Avenue East	Big Stone Gap	VA	24219	
			Mountain States Rehabilitation-Norton	1442 Park Avenue SW	Norton	VA	24273	
			Mountain View Regional Outpatient Rehabilitation	295 Wharton Lane	Norton	VA	24273	
	All Other			Appalachian Physical Therapy	348 Coeburn Avenue SW	Norton	VA	24273
				Cross Roads Point Inc.	412 Quillen Avenue SE	Coeburn	VA	24230
<b>Psych Hospital</b>								
	IP Psych Services	Ballad Health	Green Oak Behavioral Health - GeroPsych	312 Hospital Drive	Clintwood	VA	24228	
<b>SNF</b>								
	Nursing Home	Ballad Health	MVRMC Skilled Nursing/LTC	310 3rd Street NE	Norton	VA	24273	
			Norton Community Hospital SNF	100 15th Street NW	Norton	VA	24211	

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**MOUNTAIN VIEW REGIONAL MEDICAL CENTER**

Service Type Category	Service Type	Affiliation	Facility Name	Address	City	State	Zip Code
SNF	Nursing Home	All Other	Heritage Hall - Big Stone Gap	2045 Valley View Road E	Big Stone Gap	VA	24219
			Heritage Hall - Clintwood	161 Hospital Drive	Clintwood	VA	24228
			Heritage Hall - Wise	9434 Coeburn Mountain Road	Wise	VA	24293
Therapeutic	Chemotherapy	Ballad Health	Lonesome Pine Hospital	1990 Holton Avenue	Big Stone Gap	VA	24219
			Cancer Center at Norton Community Hospital	100 15th Street NW	Norton	VA	24273
			Southwest Virginia Cancer Center	671 Highway 58 East	Norton	VA	24273
	Dialysis Services	All Other	Fresenius Medical Care-Mountain Empire	340 Anderson Hollow Road	Norton	VA	24273
Radiation Therapy	Ballad Health	Southwest Virginia Cancer Center	671 Highway 58 East	Norton	VA	24273	
Inpatient	IP Rehab	Ballad Health	Norton Community Hospital Inpatient Rehab	100 15th Street NW	Norton	VA	24273

**Patient Choice Options for Ancillary and Post-Acute Services**

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**NORTON COMMUNITY HOSPITAL**

Service Type Category	Service Type	Affiliation	Facility Name	Address	Address 2	City	State	Zip Code
<b>Ancillary</b>	<b>Home Health</b>	All Other	<b>In Home Care - Pennington Gap</b>	185 Redwood Avenue	<b>Suite 120</b>	Pennington Gap	VA	24277
	<b>Pharmacy</b>	Ballad Health	<b>Mountain States Pharmacy at NCH</b>	96 15th Street NW	<b>Medical Arts Building #1</b>	Norton	VA	24273
		All Other	<b>Big Stone Gap Pharmacy</b>	1980 Holton Avenue E	<b>Suite 201</b>	Big Stone Gap	VA	24219
			<b>Cavalier Pharmacy</b>	301 Church Street NW	<b>(blank)</b>	Wise	VA	24293
			<b>Cornerstone Pharmacy</b>	205 Kilbourne Avenue	<b>(blank)</b>	Appalachia	VA	24216
			<b>CVS Pharmacy-Big Stone Gap</b>	605 Wood Avenue E	<b>(blank)</b>	Big Stone Gap	VA	24219
			<b>CVS Pharmacy-Norton</b>	1128 Park Avenue NW	<b>(blank)</b>	Norton	VA	24273
			<b>Family Drug Center - Coeburn</b>	517 West Front Street	<b>(blank)</b>	Coeburn	VA	24230
			<b>Family Drug, Inc.</b>	14 E 27th Street N	<b>(blank)</b>	Big Stone Gap	VA	24219
			<b>Food City Pharmacy - Clintwood</b>	410 Chase Street	<b>(blank)</b>	Clintwood	VA	24228
			<b>Food City Pharmacy-Big Stone Gap</b>	603 Wood Avenue E	<b>(blank)</b>	Big Stone Gap	VA	24219
			<b>Food City Pharmacy-Wise</b>	207 Woodland Drive SW	<b>(blank)</b>	Wise	VA	24293
			<b>Green Wave Pharmacy</b>	165 McClure Avenue	<b>(blank)</b>	Clintwood	VA	24228
			<b>Hancock-Lambert Pharmacy</b>	342 Main Street	<b>(blank)</b>	Clintwood	VA	24228
			<b>Haysi Drug Center</b>	23906 Dickenson Highway	<b>(blank)</b>	Haysi	VA	24256
			<b>Jones &amp; Counts Pharmacy</b>	251 Main Street	<b>(blank)</b>	Haysi	VA	24256
			<b>Jonesville Drug Company</b>	154 Chappell Drive	<b>(blank)</b>	Pound	VA	24279
			<b>Lonesome Pine Economy Drug</b>	517 Park Avenue	<b>(blank)</b>	Norton	VA	24273
			<b>Pound Discount Pharmacy</b>	11133 Indian Creek Road	<b>(blank)</b>	Pound	VA	24279
			<b>Rite Aid-Clintwood</b>	Highway 83 and Brushcreek	<b>(blank)</b>	Clintwood	VA	24228
			<b>Rite Aid-Coeburn</b>	101 Laurel Avenue	<b>(blank)</b>	Coeburn	VA	24230
			<b>Rite Aid-Pound</b>	11223 Indian Creek Road	<b>(blank)</b>	Pound	VA	24279
			<b>Union Drug</b>	322 Cloverleaf Square	<b>E1</b>	Big Stone Gap	VA	24219
			<b>Wal-Mart-Norton</b>	780 Commonwealth Drive	<b>(blank)</b>	Norton	VA	24273
			<b>West End Pharmacy</b>	340 Colley Shopping Center	<b>(blank)</b>	Clintwood	VA	24228
			<b>Wildcat Pharmacy</b>	8461 Main Street	<b>(blank)</b>	Pound	VA	24279
			<b>Rite Aid - St. Paul</b>	16435 Wise Street	<b>(blank)</b>	St Paul	VA	24283
			<b>Community Hospital Pharmacy</b>	100 15th Street NW	<b>(blank)</b>	Norton	VA	24273
			<b>Hamilton's Pharmacy</b>	16610 Russell Street	<b>(blank)</b>	St Paul	VA	24283
			<b>Ernie's Drug</b>	16408 Y Street	<b>(blank)</b>	St Paul	VA	24283
			<b>Big Stone Gap Economy Drug</b>	11 E 5th Street N	<b>(blank)</b>	Big Stone Gap	VA	24219
<b>Diagnostic</b>	<b>CT</b>	Ballad Health	<b>Dickenson Community Hospital</b>	312 Hospital Drive	<b>(blank)</b>	Clintwood	VA	24228
			<b>Norton Community Hospital</b>	100 Fifteenth Street, NW		Norton	VA	24273
			<b>Southwest Virginia Cancer Center</b>	671 Highway 58 East		Norton	VA	24273
			<b>Wellmont Lonesome Pine Hospital</b>	1990 Holton Avenue, East		Big Stone Gap	VA	24219
			<b>Wellmont Mountain View Regional Medical Center</b>	310 Third Street, NE		Norton	VA	24273
	<b>MRI</b>	Ballad Health	<b>Norton Community Hospital</b>	100 Fifteenth Street, NW		Norton	VA	24273

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**NORTON COMMUNITY HOSPITAL**

Service Type Category	Service Type	Affiliation	Facility Name	Address	Address 2	City	State	Zip Code	
Diagnostic	MRI	Ballad Health	Wellmont Lonesome Pine Hospital	1990 Holton Avenue, East		Big Stone Gap	VA	24219	
			Wellmont Mountain View Regional Medical Center	310 Third Street, NE		Norton	VA	24273	
	XRAY	Ballad Health	Dickenson Community Hospital	312 Hospital Drive	(blank)	Clintwood	VA	24228	
			Norton Community Hospital	100 Fifteenth Street, NW		Norton	VA	24273	
			Southwest Virginia Cancer Center	671 Highway 58 East		Norton	VA	24273	
			Wellmont Lonesome Pine Hospital	1990 Holton Avenue, East		Big Stone Gap	VA	24219	
			All Other	Family Foot & Anke Clinics	2537 4th Avenue E	(blank)	Big Stone Gap	VA	24219
	Lonesome Pine Orthopedic	767 Wood Avenue E	(blank)	Big Stone Gap	VA	24219			
	Matthew B Jessee DC	135 Plaza Road SW	(blank)	Wise	VA	24293			
	Stone Mountain Health Services	162 Medical Center Boulevard	(blank)	Haysi	VA	24256			
	Home Health	Home Health	Ballad Health	Ballad Health Home Care and Hospice	312 Hospital Drive	(blank)	Clintwood	VA	24228
				Ballad Health Home Health	716 Spring Avenue NE	(blank)	Wise	VA	24273
		All Other		Advanced Home Care - Wise	165 Plaza Road	(blank)	Wise	VA	24293
First Choice Home Health Care				46 7th Street	(blank)	Norton	VA	24273	
Home Nursing Company - Clintwood				215 Clintwood Highway	(blank)	Clintwood	VA	24228	
In Home Care				201 Nottingham Avenue	(blank)	Wise	VA	24293	
Intrepid USA Healthcare Services - Big Stone Gap				310 Cloverleaf Sq	(blank)	Big Stone Gap	VA	24219	
Medical Services of America Home Health and Hospice - Wise				413 E Main St	(blank)	Wise	VA	24293	
Mountain Region Home Health - Coeburn				330 Front St E	Suite 330	Coeburn	VA	24230	
Total Home Care				4890 Clintwood Highway	(blank)	Clintwood	VA	24228	
Caring Touch Home Health				8463 Main Street	(blank)	Pound	VA	24279	
NHC Home Health		100 15th Street	(blank)	Norton	VA	24228			
Hospice/Palliative Care		Hospice	Ballad Health	Ballad Health Hospice	312 Hospital Drive	(blank)	Clintwood	VA	24228
	All Other			Heritage Hall - Big Stone Gap	2045 Valley View Dr	(blank)	Big Stone Gap	VA	24219
	All Other		Heritage Hall - Clintwood	1225 E Main St	(blank)	Clintwood	VA	24228	
			Heritage Hall - Wise	9434 Coeburn Mountain Rd	(blank)	Wise	VA	24293	
			Medical Services of America Home Health and Hospice - Wise	413 E Main St	(blank)	Wise	VA	24293	
			Medical Services of America Hospice - Wise	413 E Main St	(blank)	Wise	VA	24293	
			Total Home Care	4890 Clintwood Highway	(blank)	Clintwood	VA	24228	
			Hospice and Palliative Care of VA	738 Park Avenue NW #3	(blank)	Norton	VA	24210	
O/P Therapy	Rehabilitation & Physical Therapy	Ballad Health	Lonesome Pine Outpatient Rehabilitation	1980 Holton Avenue East	Suite 102	Big Stone Gap	VA	24219	
			Mountain States Rehabilitation-Norton	1442 Park Avenue SW2	(blank)	Norton	VA	24273	
			Mountain View Regional Outpatient Rehabilitation	295 Wharton Lane	(blank)	Norton	VA	24273	
			Mountain States Outpatient Rehab - Dickenson Community Hospital	312 Hospital Drive	(blank)	Clintwood	VA	24210	

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**NORTON COMMUNITY HOSPITAL**

Service Type Category	Service Type	Affiliation	Facility Name	Address	Address 2	City	State	Zip Code
		All Other	<b>Appalachian Physical Therapy</b>	348 Coeburn Avenue SW	(blank)	Norton	VA	24273
			<b>Cross Roads Point Inc.</b>	412 Quillen Avenue SE	(blank)	Coeburn	VA	24230
			<b>Dominion Health and Fitness</b>	4862 Dickenson Hwy	(blank)	Clintwood	VA	24210
<b>Psych Hospital</b>								
	<b>IP Psych Services</b>	Ballad Health	<b>Green Oak Behavioral Health - GeroPsych</b>	312 Hospital Drive	(blank)	Clintwood	VA	24228
<b>SNF</b>								
	<b>Nursing Home</b>	Ballad Health	<b>MVRMC Skilled Nursing/LTC</b>	310 3rd Street NE	(blank)	Norton	VA	24273
			<b>Norton Community Hospital SNF</b>	100 15th Street NW	(blank)	Norton	VA	24211
		All Other	<b>Heritage Hall - Big Stone Gap</b>	2045 Valley View Road E	(blank)	Big Stone Gap	VA	24219
			<b>Heritage Hall - Clintwood</b>	161 Hospital Drive	(blank)	Clintwood	VA	24228
			<b>Heritage Hall - Wise</b>	9434 Coeburn Mountain Road	(blank)	Wise	VA	24293
<b>Therapeutic</b>								
	<b>Chemotherapy</b>	Ballad Health	<b>Lonesome Pine Hospital</b>	1990 Holton Avenue	(blank)	Big Stone Gap	VA	24219
			<b>Cancer Center at Norton Community Hospital</b>	100 15th Street NW	(blank)	Norton	VA	24273
			<b>Southwest Virginia Cancer Center</b>	671 Highway 58 East	(blank)	Norton	VA	24273
	<b>Dialysis Services</b>	All Other	<b>Fresenius Medical Care-Mountain Empire</b>	340 Anderson Hollow Road	(blank)	Norton	VA	24273
	<b>Radiation Therapy</b>	Ballad Health	<b>Southwest Virginia Cancer Center</b>	671 Highway 58 East	(blank)	Norton	VA	24273
<b>Inpatient</b>								
	<b>IP Rehab</b>	Ballad Health	<b>Norton Community Hospital Inpatient Rehab</b>	100 15th Street NW	(blank)	Norton	VA	24273

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**RUSSELL COUNTY MEDICAL CENTER**

Service Type Category	Service Type	Affiliation	Facility Name	Address	City	State	Zip Code
<b>Ancillary</b>							
	<b>Pharmacy</b>	All Other	<b>Ernie's Drug Store</b>	16408 Y Street	St Paul	VA	24283
			<b>Family Drug Center - Lebanon</b>	143 W Main Street	Lebanon	VA	24266
			<b>Food City Pharmacy-Lebanon</b>	159 Pittston Road	Lebanon	VA	24266
			<b>McFarlane Hillman Pharmacy</b>	116 Flanagan Avenue	Lebanon	VA	24266
			<b>New Garden Pharmacy</b>	5300 Redbud Highway	Honaker	VA	24260
			<b>Rite Aid-Lebanon</b>	1094 E Main Street	Lebanon	VA	24266
			<b>Rite Aid-Saint Paul</b>	16435 Wise Street	St Paul	VA	24283
			<b>Tigerx Pharmacy</b>	5638 Redbud Highway	Honaker	VA	24260
			<b>Wal-Mart-Lebanon</b>	1050 Regional Park Road	Lebanon	VA	24266
<b>Diagnostic</b>							
	<b>CT</b>	Ballad Health	<b>Russell County Medical Center</b>	58 Carroll Street	Lebanon	VA	24266
	<b>MRI</b>	Ballad Health	<b>Russell County Medical Center</b>	58 Carroll Street	Lebanon	VA	24266
	<b>XRAY</b>	Ballad Health	<b>Russell County Medical Center</b>	58 Carroll Street	Lebanon	VA	24266
<b>Home Health</b>							
	<b>Home Health</b>	Ballad Health	<b>Mountain States Home Care - Russell County</b>	116 Flanagan Avenue	Lebanon	VA	24266
		All Other	<b>Home Nursing Company - Lebanon</b>	1770 Main Street	Lebanon	VA	24266
			<b>Independent Home Health Care</b>	264 Main St	Lebanon	VA	24266
<b>Hospice/Palliative Care</b>							
	<b>Hospice</b>	Ballad Health	<b>Russell County Hospice</b>	116 Flanagan Ave	Lebanon	VA	24266
		All Other	<b>Home Nursing Co Inc Pallative Care and Hospice</b>	1770 E Main St	Lebanon	VA	24266
<b>O/P Therapy</b>							
	<b>Rehabilitation &amp; Physical Therapy</b>	Ballad Health	<b>Mountain States Rehab - St. Paul</b>	16431 Wise St	St Paul	VA	24283
			<b>Mountain States Rehab - Lebanon</b>	143 Main Street	Lebanon	VA	24266
		All Other	<b>Lebanon Physical Therapy &amp; Rehabilitative Services</b>	272 Highland Drive	Lebanon	VA	24266
<b>Psych Hospital</b>							
	<b>IP Psych Services</b>	Ballad Health	<b>Russell County Medical Center - Clearview</b>	58 Carroll Street	Lebanon	VA	24266
<b>SNF</b>							
	<b>Nursing Home</b>	All Other	<b>Altamont Manor Inc</b>	247 Purcell Rd	Lebanon	VA	24266
			<b>Hummingbird Retirement Villa</b>	282 New Hope Dr	Lebanon	VA	24266
			<b>Maple Grove Health Care Center</b>	318 E Main Street	Lebanon	VA	24266
<b>Therapeutic</b>							
	<b>Dialysis Services</b>	All Other	<b>Fresenius Medical Care-Russell County</b>	150 E Main Street	Lebanon	VA	24266

# Smyth County Community Hospital Patient Choice Options for Ancillary and Post-Acute Services

As of 6/30/18

Service Type Category	Service Type	Affiliation	Facility Name	Address	City	State	Zip Code
<b>Ancillary</b>							
	<b>Pharmacy</b>	All Other	<b>Carter's Pharmacy</b>	222 Panther Lane	Saltville	VA	24370
			<b>Chilhowie Drug Company</b>	1449 E Lee Highway	Chilhowie	VA	24319
			<b>Clark's Pharmacy</b>	343 Palmer Avenue	Saltville	VA	24370
			<b>Counts Drug Company</b>	289 W Main Street	Wytheville	VA	24382
			<b>CVS Pharmacy-Marion</b>	945 N Main Street	Marion	VA	24354
			<b>CVS Pharmacy-Wytheville</b>	1370 E Main Street	Wytheville	VA	24382
			<b>Dickenson Drug Company</b>	580 N Main Street	Rural Retreat	VA	24368
			<b>Food City Pharmacy-Chilhowie</b>	145 W Lee Highway	Chilhowie	VA	24319
			<b>Food City Pharmacy-Marion</b>	910 N Main Street	Marion	VA	24354
			<b>Forest Pharmacy</b>	1787 W Lee Highway	Wytheville	VA	24382
			<b>Fort Chiswell Pharmacy</b>	791 Fort Chiswell Road	Max Meadows	VA	24360
			<b>Greever's Drug Store</b>	106 W Lee Highway	Chilhowie	VA	24319
			<b>Horizon Healthcare Management</b>	185 Stafford Umberger Road	Wytheville	VA	24382
			<b>Marion Family Pharmacy</b>	1581 N Main Street	Marion	VA	24354
			<b>Rite Aid-Marion</b>	795 N Main Street	Marion	VA	24354
			<b>Rite Aid-Saltville</b>	113 E Main Street	Saltville	VA	24370
			<b>Rite Aid-Wytheville</b>	150 N 11th Street	Wytheville	VA	24382
			<b>Walgreens-Marion</b>	1102 N Main Street	Marion	VA	24354
			<b>Wal-Mart-Marion</b>	1193 N Main Street	Marion	VA	24354
			<b>Wal-Mart-Wytheville</b>	345 Commonwealth Drive	Wytheville	VA	24382
<b>Diagnostic</b>							
	<b>CT</b>	Ballad Health	<b>Smyth County Community Hospital</b>	245 Medical Park Drive	Marion	VA	24354
		All Other	<b>Wythe County Community Hospital</b>	600 West Ridge Road	Wytheville	VA	24382
	<b>MRI</b>	Ballad Health	<b>Smyth County Community Hospital</b>	245 Medical Park Drive	Marion	VA	24354
		All Other	<b>Wythe County Community Hospital</b>	600 West Ridge Road	Wytheville	VA	24382
	<b>XRAY</b>	Ballad Health	<b>Smyth County Community Hospital</b>	245 Medical Park Drive	Marion	VA	24354
<b>Home Health</b>							
	<b>Home Health</b>	Ballad Health	<b>Ballad Health Home Health</b>	1152 Snider Street	Marion	VA	24354
		All Other	<b>Advanced Health Services of Wytheville</b>	710 W Ridge Rd	Wytheville	VA	24382
			<b>Amedisys Home Health of Wytheville</b>	340 Peppers Ferry Road	Wytheville	VA	24382
			<b>Circle Home Care</b>	245 Holston Road	Wytheville	VA	24382
			<b>Home Nursing Company - Chilhowie</b>	1209 E Lee Hwy	Chilhowie	VA	24319
		<b>Interim HealthCare - Wytheville</b>	276 W Main St	Wytheville	VA	24382	
<b>Hospice/Palliative Care</b>							
	<b>Hospice</b>	All Other	<b>Hometown Hospice - Chilhowie</b>	822 Lee Hwy	Chilhowie	VA	24319
			<b>Hospice of Southwest VA</b>	600 West Ridge Road	Wytheville	VA	24382
			<b>New Century Hospice</b>	245 Holston Road	Wytheville	VA	24382
<b>O/P Therapy</b>							
	<b>Rehabilitation &amp; Physical Therapy</b>	Ballad Health	<b>Mountain States Rehabilitation-Smyth</b>	1 Health Way	Marion	VA	24354
		All Other	<b>BenchMark Physical Therapy - Marion</b>	1141 N Main St	Marion	VA	24354

**Patient Choice Options for Ancillary and Post-Acute Services**

As of 6/30/18

<b>Service Type Category</b>	<b>Service Type</b>	<b>Affiliation</b>	<b>Facility Name</b>	<b>Address</b>	<b>City</b>	<b>State</b>	<b>Zip Code</b>
<b>O/P Therapy</b>	<b>Rehabilitation &amp; Physical Therapy</b>	All Other	<b>Carilion Clinic Outpatient Therapy - Wytheville</b>	178 W Main Street	Wytheville	VA	24382
			<b>Carrington Place at Wytheville</b>	990 Holston Road	Wytheville	VA	24382
			<b>Heartland Rehabilitation Services - Wytheville</b>	800 E Main St	Wytheville	VA	24382
			<b>Heartland Rehabilitation Services-Chilhowie</b>	104 N Sanders Avenue	Chilhowie	VA	24319
			<b>Mount Rogers Community Service Board</b>	255 George James Drive	Wytheville	VA	24382
			<b>West Ridge Orthopaedic</b>	1995 W Ridge Road	Wytheville	VA	24382
			<b>Wythe Rehabilitation Therapy Services</b>	342 Virginia Ave	Wytheville	VA	24382
	<b>IP Rehab</b>	Ballad Health	<b>Southwest Virginia Inpatient Rehab (SCCH Inpatient Rehab)</b>	245 Medical Park Drive	Marion	VA	24354
<b>Psych Hospital</b>	<b>IP Psych Services</b>	All Other	<b>Southwest Virginia Mental Institute</b>	340 Bagley Circle	Marion	VA	24354
<b>SNF</b>	<b>Nursing Home</b>	Ballad Health	<b>Francis Marion Manor</b>	100 Francis Marion Lane	Marion	VA	24354
		All Other	<b>Carrington Place at Wytheville</b>	990 Holston Road	Wytheville	VA	24382
			All Other	<b>Valley Health Care Center</b>	940 E Lee Highway	Chilhowie	VA
<b>Therapeutic</b>	<b>Chemotherapy</b>	Ballad Health	<b>Regional Cancer Center at Smyth County Community Hospital</b>	245 Medical Park Drive	Marion	VA	24354
	<b>Dialysis Services</b>	All Other	<b>Blue Ridge Cancer Care - Marion</b>	1020 Terrace Drive	Marion	VA	24354
			<b>Blue Ridge Cancer Care - Wytheville</b>	710 W Ridge Rd	Wytheville	VA	24382
		All Other	<b>DaVita Royal Oak Dialysis</b>	1587 N Main Street	Marion	VA	24354
			<b>Fresenius Kidney Care Smyth County</b>	945 N Main Street	Marion	VA	24354
		<b>Fresenius Medical Care-Wythe</b>	340 Peppers Ferry Road	Wytheville	VA	24382	

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**SYCAMORE SHOALS HOSPITAL**

Service Type Category	Service Type	Affiliation	Facility Name	Address	City	State	Zip Code
<b>Ancillary</b>							
	<b>Pharmacy</b>	All Other	<b>Burgie Drug Store</b>	1000 W G Street	Elizabethton	TN	37643
			<b>CVS Pharmacy-Elizabethton 1</b>	1161 Highway 19E Bypass	Elizabethton	TN	37643
			<b>CVS Pharmacy-Elizabethton 2</b>	1100 W Elk Avenue	Elizabethton	TN	37643
			<b>Food City Pharmacy-Elizabethton</b>	920 Broad Street	Elizabethton	TN	37643
			<b>Hampton Pharmacy</b>	339 Highway 321	Hampton	TN	37658
			<b>Ingle's Market Pharmacy-Elizabethton</b>	768 W Elk Avenue	Elizabethton	TN	37643
			<b>Lingerfelt Pharmacy</b>	609 E Elk Avenue	Elizabethton	TN	37643
			<b>Reed Pharmacy</b>	851 W Elk Avenue	Elizabethton	TN	37643
			<b>Rite Aid-Elizabethton</b>	507 W Elk Avenue	Elizabethton	TN	37643
			<b>Roan Mountain Pharmacy</b>	8251 Highway 19E	Roan Mountain	TN	37687
			<b>Walgreens-Elizabethton</b>	214 Broad Street	Elizabethton	TN	37643
			<b>Wal-Mart-Elizabethton</b>	1001 Over Mountain Drive	Elizabethton	TN	37643
<b>Diagnostic</b>							
	<b>CT</b>	Ballad Health	<b>Sycamore Shoals Hospital</b>	1501 West Elk Avenue	Elizabethton	TN	37643
		All Other	<b>Medical Care</b>	1500 West Elk Avenue	Elizabethton	TN	37643
	<b>MRI</b>	Ballad Health	<b>Sycamore Shoals Hospital</b>	1501 West Elk Avenue	Elizabethton	TN	37643
		All Other	<b>Medical Care</b>	1500 West Elk Avenue	Elizabethton	TN	37643
	<b>XRAY</b>	Ballad Health	<b>Sycamore Shoals Hospital</b>	1501 West Elk Avenue	Elizabethton	TN	37643
		All Other	<b>Medical Care</b>	1500 W Elk Ave	Elizabethton	TN	37643
<b>Home Health</b>							
	<b>Home Health</b>	Ballad Health	<b>Mountain States Home Health - Carter County</b>	401 Hudson Dr	Elizabethton	TN	37643
		All Other	<b>Amedisys Home Health Care - Elizabethton</b>	1500 West Elk Avenue	Elizabethton	TN	37643
<b>Hospice/Palliative Care</b>							
	<b>Hospice</b>	All Other	<b>Amedisys Hospice - Elizabethton</b>	1500 W Elk Ave	Elizabethton	TN	37643
<b>O/P Therapy</b>							
	<b>Rehabilitation &amp; Physical Therapy</b>	Ballad Health	<b>Mountain States Outpatient Rehab - Sycamore Shoals Hospital</b>	1501 W Elk Avenue	Elizabethton	TN	37643
		All Other	<b>Rehab Care Group-Elizabethton</b>	301 S Watauga Avenue	Elizabethton	TN	37643
			<b>Physical Therapy Services - Elizabethton 1</b>	1975 W Elk Avenue	Elizabethton	TN	37643
			<b>Physical Therapy Services - Elizabethton 2</b>	1500 W Elk Ave	Elizabethton	TN	37643
			<b>CORA Physical Therapy</b>	420 Railroad Street W	Elizabethton	TN	37643
<b>Psych Hospital</b>							

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### SYCAMORE SHOALS HOSPITAL

Service Type Category	Service Type	Affiliation	Facility Name	Address	City	State	Zip Code
Psych Hospital	IP Psych Services	Ballad Health	Sycamore Shoals Hopsital - New Leaf GeroPsych	1501 West Elk Avenue	Elizabethton	TN	37643
<b>SNF</b>							
	Nursing Home	All Other	Hermitage Health Center	1633 Hillview Drive	Elizabethton	TN	37643
			Hillview Health Center	1666 Hillview Drive	Elizabethton	TN	37643
			Ivy Hall Nursing Home	301 South Watauga Avenue	Elizabethton	TN	37643
			Life Care Center of Elizabethton	1641 Highway 19E Bypass	Elizabethton	TN	37643
			Signature HealthCare of Elizabethton	1200 Spruce Lane	Elizabethton	TN	37643
			The Waters of Roan Highlands	146 Buck Creek Road	Roan Mountain	TN	37687
<b>Therapeutic</b>							
	Dialysis Services	All Other	Fresenius Medical Care-Elizabethton	1210 Milita Court	Elizabethton	TN	37643

**Patient Choice Options for Ancillary and Post-Acute Services**

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**TAKOMA REGIONAL HOSPITAL**

Service Type Category	Service Type	Affiliation	Facility Name	Address	City	State	Zip Code
<b>Ancillary</b>							
	<b>Pharmacy</b>	All Other	<b>Atchley Drug Center</b>	511 Asheville Highway	Greeneville	TN	37743
			<b>Central Drug Store &amp; Gift Shop</b>	239 W Summer Street	Greeneville	TN	37743
			<b>Community Pharmacy of Greeneville</b>	1402 Tusculum Boulevard	Greeneville	TN	37745
			<b>Corley's Pharmacy-Greeneville 1</b>	1004 Snapps Ferry Road	Greeneville	TN	37745
			<b>Corley's Pharmacy-Greeneville 2</b>	1016 Tusculum Boulevard	Greeneville	TN	37745
			<b>CVS Pharmacy-Greeneville 1</b>	1510 E Andrew Johnson Highway	Greeneville	TN	37745
			<b>CVS Pharmacy-Greeneville 2</b>	837 Tusculum Boulevard	Greeneville	TN	37745
			<b>CVS Pharmacy-Greeneville 3</b>	506 Asheville Highway	Greeneville	TN	37743
			<b>Food City Pharmacy-Greeneville 1</b>	905 Snapps Ferry Road	Greeneville	TN	37745
			<b>Food City Pharmacy-Greeneville 2</b>	2755 E Andrew Johnson Highway	Greeneville	TN	37745
			<b>Greene County Drug Health Mart Pharm</b>	906 Tusculum Boulevard	Greeneville	TN	37745
			<b>K-Mart-Greeneville</b>	1355 Tusculum Boulevard	Greeneville	TN	37745
			<b>Medicine Shoppe-Mosheim</b>	6766 W Andrew Johnson Highway	Mosheim	TN	37818
			<b>Publix Pharmacy</b>	2321 E Andrew Johnson Hwy	Greeneville	TN	37745
			<b>Susong Pharmacy</b>	2255 E Andrew Johnson Highway	Greeneville	TN	37745
			<b>Town &amp; Country Pharmacy</b>	910 Tusculum Boulevard	Greeneville	TN	37745
			<b>Walgreens-Greeneville 1</b>	1650 E Andrew Johnson Highway	Greeneville	TN	37745
			<b>Walgreens-Greeneville 2</b>	104 Asheville Highway	Greeneville	TN	37743
			<b>Wal-Mart-Greeneville</b>	3755 E Andrew Johnson Highway	Greeneville	TN	37745
<b>Diagnostic</b>							
	<b>CT</b>	Ballad Health	<b>Laughlin Memorial Hospital, Inc.</b>	1420 Tusculum Boulevard	Greeneville	TN	37745
			<b>Takoma Regional Hospital</b>	401 Takoma Avenue	Greeneville	TN	37743
	<b>MRI</b>	Ballad Health	<b>Laughlin Memorial Hospital, Inc.</b>	1420 Tusculum Boulevard	Greeneville	TN	37745
			<b>Takoma Regional Hospital</b>	401 Takoma Avenue	Greeneville	TN	37743
	<b>XRAY</b>	Ballad Health	<b>Laughlin Memorial Hospital, Inc.</b>	1420 Tusculum Boulevard	Greeneville	TN	37745
			<b>Takoma Medical Associates</b>	438 E Vann Road	Greeneville	TN	37743
			<b>Takoma Regional Hospital</b>	401 Takoma Avenue	Greeneville	TN	37743
		All Other	<b>Dwight D Eisenhower Army Medical Center</b>	1404 Tusculum Boulevard	Greeneville	TN	37745
			<b>Greeneville Orthopaedic Clinic, P.C.</b>	LMH 4th Floor	Greeneville	TN	37745
			<b>Greeneville Pediatric Clinic</b>	221 N Main Street	Greeneville	TN	37745
			<b>John Robert Hamilton Jr DC</b>	1119 Tusculum Boulevard	Greeneville	TN	37745
			<b>Kids First Pediatrics</b>	5000 Monarch Pt	Greeneville	TN	37745
			<b>Practice of Thwing, Philip Tolleson</b>	400 Y Street	Greeneville	TN	37745
			<b>Stephanie Ann Briggs-Frost DC</b>	1128 Tusculum Boulevard	Greeneville	TN	37745
			<b>Summit Medical Group</b>	1404 Tusculum Boulevard	Greeneville	TN	37745
			<b>Womens Center of Greeneville</b>	1021 Coolidge Street	Greeneville	TN	37743
			<b>University Radiology</b>	1410 Tusculum Boulevard	Greeneville	TN	37745
<b>Home Health</b>							
	<b>Home Health</b>	Ballad Health	<b>Advanced Home Care, Inc. - Greeneville</b>	1012 Coolidge Street	Greeneville	TN	37743
			<b>Laughlin Home Health Agency</b>	1420 Tusculum Boulevard	Greeneville	TN	37745

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**TAKOMA REGIONAL HOSPITAL**

Service Type Category	Service Type	Affiliation	Facility Name	Address	City	State	Zip Code
Home Health	Home Health	Ballad Health	Ballad Health Home Health	1420 Tusculum Boulevard	Greeneville	TN	37743
		All Other	Greeneville Home Health	124 Austin St	Greeneville	TN	37745
			Procare Home Health Services - Greeneville	705 Professional Plaza	Greeneville	TN	37745
			Smoky Mountain Home Health and Hospice - Greeneville	1117 Tusculum Blvd	Greeneville	TN	37745
			Amedisys Home Health - Greeneville	404 E Bernard Ave	Greeneville	TN	37745
Hospice/Palliative Care	Hospice	All Other	Amedisys Hospice - Greeneville	127 Serral Dr	Greeneville	TN	37745
			Caris Healthcare Greeneville	2140 E Andrew Johnson Hwy	Greeneville	TN	37743
			Smoky Mountain Home Health & Hospice - Greeneville	1117 Tusculum Blvd	Greeneville	TN	37743
O/P Therapy	Rehabilitation & Physical Therapy	Ballad Health	Takoma Medical Associates	438 E Vann Road	Greeneville	TN	37743
			Laughlin Memorial Hospital Outpatient Rehab	1420 Tusculum Boulevard	Greeneville	TN	37743
			Ballad Outpatient Rehab - Takoma Regional Hospital	108 West Summer Street	Greeneville	TN	37743
		All Other	Apple Rehab Physical Therapy	533 Tusculum Boulevard	Greeneville	TN	37745
			Benchmark Physical Therapy - Greeneville	225 W Summer St	Greeneville	TN	37743
			Greeneville Orthopaedic Clinic	223 N Main Street	Greeneville	TN	37745
			Rehab Care Group-Greeneville	55 Nursing Home Road	Chuckey	TN	37641
			PT Solutions Physical Therapy - Greeneville 1 (Contract of Takoma)	108 W Summer St	Greeneville	TN	37743
PT Solutions Physical Therapy - Greeneville 2 (Contract of Takoma)	1321 Tusculum Blvd	Greeneville	TN	37745			
Psych Hospital	IP Psych Services	Ballad Health	Takoma Regional Hospital GeroPsych	401 Takoma Avenue	Greeneville	TN	37743
SNF	Nursing Home	Ballad Health	Laughlin Healthcare Center	801 East McKee Street	Greeneville	TN	37743
		All Other	Durham-Hensley Health and Rehabilitation	55 Nursing Home Road	Chuckey	TN	37641
			Life Care Center of Greeneville	725 Crum Street	Greeneville	TN	37743
	Signature Healthcare of Greeneville	106 Holt Court	Greeneville	TN	37743		
Therapeutic	Chemotherapy	Ballad Health	Cancer Center at Laughlin Memorial Hospital	1420 Tusculum Boulevard	Greeneville	TN	37746
	Dialysis Services	All Other	DaVita Greeneville Dialysis	110 Heritage Court	Greeneville	TN	37743
			Fresenius Medical Care-Eastern Tennessee	180 Serral Drive	Greeneville	TN	37745
Radiation Therapy	Ballad Health	Cancer Center at Laughlin Memorial Hospital	1420 Tusculum Boulevard	Greeneville	TN	37746	

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**TAKOMA REGIONAL HOSPITAL**

<b>Service Type Category</b>	<b>Service Type</b>	<b>Affiliation</b>	<b>Facility Name</b>	<b>Address</b>	<b>City</b>	<b>State</b>	<b>Zip Code</b>
<b>IP Rehab</b>	<b>IP Rehab</b>	Ballad Health	<b>Takoma Inpatient Rehab</b>	401 Takoma Avenue	Greeneville	<b>TN</b>	37743

**Patient Choice Options for Ancillary and Post-Acute Services**

As of 6/30/18

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**UNICOI COUNTY MEMORIAL HOSPITAL**

Service Type Category	Service Type	Affiliation	Facility Name	Address	City	State	Zip Code
<b>Ancillary</b>							
	<b>Pharmacy</b>	All Other	<b>Clinchfield Drug Company</b>	101 S Main Street	Erwin	TN	37650
			<b>CVS Pharmacy-Erwin</b>	917 N Main Street	Erwin	TN	37650
			<b>Rite Aid-Erwin</b>	1252 N Main Avenue	Erwin	TN	37650
			<b>Roller Pharmacy</b>	109 North Main Avenue	Erwin	TN	37650
			<b>Walgreens-Erwin</b>	401 N Main Avenue	Erwin	TN	37650
			<b>Wal-Mart-Erwin</b>	110 Rocky Bottom Drive	Unicoi	TN	37692
<b>Diagnostic</b>							
	<b>CT</b>	Ballad Health	<b>Unicoi County Memorial Hospital, Inc.</b>	100 Greenway Circle	Erwin	TN	37650
	<b>MRI</b>	Ballad Health	<b>Unicoi County Memorial Hospital, Inc.</b>	100 Greenway Circle	Erwin	TN	37650
	<b>XRAY</b>	Ballad Health	<b>Unicoi County Memorial Hospital, Inc.</b>	100 Greenway Circle	Erwin	TN	37650
<b>O/P Therapy</b>							
	<b>Rehabilitation &amp; Physical Therapy</b>	Ballad Health	<b>Mountain States Outpatient Rehab - Unicoi County Memorial Ho</b>	800 S. Mohawk Drive	Erwin	TN	37650
		All Other	<b>Erwin Physical Therapy</b>	1201 N Main Avenue	Erwin	TN	37650
<b>SNF</b>							
	<b>Nursing Home</b>	Ballad Health	<b>Unicoi County Nursing Home</b>	100 Greenway Circle	Erwin	TN	37650
		All Other	<b>Center on Aging and Health</b> <b>Erwin Health Care Center</b>	880 South Mohawk Drive 100 Stalling Lane	Erwin Erwin	TN TN	37650 37650