

Comparison of Ballad Health Facilities to National Averages

	BalladHealth 115 your story Water Outnoing		Top 10% in the Nation	National Average	Johnson City Medical Center	Holston Valley Medical Center	Bristol Regional Medical Center	Johnston Memorial Hospital	Indian Path Community Hospital	Greeneville Community Hospital	Sycamore Shoals Hospital
	Quality Target Measures										
•	PSI 3 Pressure Ulcer Rate	7/1/2018 - 12/31/2019	0.19	0.59	0.11	1.99	0.31	0.21	0.34	0.42	0.42
•	PSI 6 latrogenic Pneumothorax Rate	7/1/2018 - 12/31/2019	0.20	0.23	0.23	0.18	0.29	0.24	0.26	0.22	0.22
•	PSI 7 Central Venous Catheter-Related Blood Stream Infection Rate - Retired	RETIRED									
₽	PSI 8 In Hospital Fall with Hip Fracture Rate	7/1/2018 - 12/31/2019	0.09	0.10	0.10	0.09	0.09	0.12	0.09	0.10	0.09
•	PSI 9 Perioperative Hemorrhage or Hematoma Rate	7/1/2018 - 12/31/2019	2.18	2.55	1.94	2.69	2.40	2.34	2.47	2.68	2.50
•	PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis	7/1/2018 - 12/31/2019	1.21	1.42	1.95	1.25	1.56	1.38	1.40	1.39	1.42
•	PSI 11 Postoperative Respiratory Failure Rate	7/1/2018 - 12/31/2019	3.75	5.03	5.14	5.31	5.77	4.33	4.56	4.54	4.88
•	PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	7/1/2018 - 12/31/2019	2.61	3.63	3.12	2.47	4.40	3.92	3.22	4.92	3.29
•	PSI 13 Postoperative Sepsis Rate	7/1/2018 - 12/31/2019	4.05	4.90	4.43	6.05	4.49	5.09	4.70	5.21	4.83
•	PSI 14 Postoperative Wound Dehiscence Rate	7/1/2018 - 12/31/2019	0.79	0.86	0.81	0.81	1.25	0.99	0.84	0.84	0.85
•	PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	7/1/2018 - 12/31/2019	0.92	1.20	0.88	1.18	1.41	1.00	1.10	1.09	1.15
•	CLABSI Rate	10/1/2020 - 9/30/2021	0.000	0.430	2.418	0.800	1.571	1.330	0.000	0.000	2.433
•	CAUTI Rate	10/1/2020 - 9/30/2021	0.000	0.441	2.292	0.945	1.568	0.203	0.000	0.175	0.000
•	SSI COLON Surgical Site Infection Rate	10/1/2020 - 9/30/2021	0.00	1.11	2.33	1.49	1.29	3.57	3.33	0.00	0.00
•	SSI HYST Surgical Site Infection Rate	10/1/2020 - 9/30/2021	0.00	0.00	0.00	2.13	2.08	0.00	0.00		0.00
	MRSA Rate e suspends January 2020 - June 2020 timeframe from dat	10/1/2020 - 9/30/2021	0.000	0.011	0.160	0.135	0.195	0.072	0.000	0.050	0.000

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CAH- Critical Access Hospital

⁻⁻ insufficient cases or does not apply

	BalladHealth 115 your story Water Outsoing		Top 10% in the Nation	National Average	Johnson City Medical Center	Holston Valley Medical Center	Bristol Regional Medical Center	Johnston Memorial Hospital	Indian Path Community Hospital	Greeneville Community Hospital	Sycamore Shoals Hospital
•	CDIFF Rate	10/1/2020 - 9/30/2021	0.000	0.174	0.238	0.226	0.083	0.075	0.553	0.104	0.068
•	SMB: Sepsis Management Bundle	10/1/2020 - 9/30/2021	79.0%	57.0%	41.0%	53.0%	49.0%	51.0%	65.0%	35.0%	56.0%
	Survey of Patient's Experience										
•	Patients who reported that their nurses "Always" communicated well	10/1/2020 - 9/30/2021	87.0%	80.0%	74.0%	73.0%	71.0%	80.0%	80.0%	76.0%	78.0%
•	Patients who reported that their nurses "Usually" communicated well	10/1/2020 - 9/30/2021	11.0%	15.0%	18.0%	17.0%	20.0%	14.0%	16.0%	17.0%	16.0%
•	"Sometimes" or "Never" communicated	10/1/2020 - 9/30/2021	2.0%	5.0%	8.0%	10.0%	9.0%	6.0%	4.0%	7.0%	6.0%
1	Patients who reported that their doctors "Always" communicated well	10/1/2020 - 9/30/2021	88.0%	80.0%	73.0%	77.0%	74.0%	78.0%	82.0%	76.0%	78.0%
•	Patients who reported that their doctors "Usually" communicated well	10/1/2020 - 9/30/2021	10.0%	15.0%	19.0%	16.0%	17.0%	15.0%	14.0%	16.0%	17.0%
1 1	Patients wno reported that their doctors "Sometimes" or "Never" Patients who reported that they	10/1/2020 - 9/30/2021	2.0%	5.0%	8.0%	7.0%	9.0%	7.0%	4.0%	8.0%	5.0%
•	"Always" received help as soon as they	10/1/2020 - 9/30/2021	80.0%	67.0%	58.0%	58.0%	58.0%	60.0%	63.0%	64.0%	66.0%
₽	Wanted "Usually" received help as soon as they wanted	10/1/2020 - 9/30/2021	16.0%	23.0%	29.0%	23.0%	25.0%	25.0%	30.0%	22.0%	22.0%
	"Sometimes" or "Never" received help	10/1/2020 - 9/30/2021	4.0%	10.0%	13.0%	19.0%	17.0%	15.0%	7.0%	14.0%	12.0%
	Patients who reported that starr "Always" explained about medicines	10/1/2020 - 9/30/2021	73.0%	63.0%	55.0%	59.0%	58.0%	59.0%	59.0%	62.0%	62.0%
	hefore giving it to them Patients who reported that staff "Usually" explained about medicines before giving it to them	10/1/2020 - 9/30/2021	16.0%	18.0%	18.0%	18.0%	19.0%	16.0%	17.0%	19.0%	16.0%
	Patients who reported that staff "Sometimes" or "Never" explained about medicines before giving it to them	10/1/2020 - 9/30/2021	11.0%	19.0%	27.0%	23.0%	23.0%	25.0%	24.0%	19.0%	22.0%
•	Patients who reported that their room and bathroom were "Always" clean	10/1/2020 - 9/30/2021	83.0%	73.0%	61.0%	57.0%	54.0%	78.0%	81.0%	53.0%	72.0%

 $^{^{\}star}\text{CMS}$ rule suspends January 2020 - June 2020 timeframe from datasets.

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	Patients who reported that their room and bathroom were "Usually" clean	10/1/2020 - 9/30/2021	13.0%	18.0%	22.0%	21.0%	24.0%	15.0%	13.0%	24.0%	15.0%
•	Patients who reported that their room and bathroom were "Sometimes" or "Never" clean	10/1/2020 - 9/30/2021	4.0%	9.0%	17.0%	22.0%	22.0%	7.0%	6.0%	23.0%	13.0%
1	Patients who reported that the area around their room was "Always" quiet at night	10/1/2020 - 9/30/2021	75.0%	63.0%	50.0%	53.0%	56.0%	64.0%	62.0%	53.0%	68.0%
•	Patients who reported that the area around their room was "Usually" quiet at night	10/1/2020 - 9/30/2021	22.0%	27.0%	33.0%	31.0%	31.0%	26.0%	29.0%	31.0%	23.0%
•	Patients who reported that the area around their room was "Sometimes" or "Never" quiet at night	10/1/2020 - 9/30/2021	3.0%	10.0%	17.0%	16.0%	13.0%	10.0%	9.0%	16.0%	9.0%
•	Patients who reported that YES, they were given information about what to do during their recovery at home	10/1/2020 - 9/30/2021	91.0%	86.0%	83.0%	84.0%	85.0%	89.0%	83.0%	84.0%	86.0%
•	Patients who reported that NO, they were not given information about what to do during their recovery at home	10/1/2020 - 9/30/2021	9.0%	14.0%	17.0%	16.0%	15.0%	11.0%	17.0%	16.0%	14.0%
1	Patients who "Strongly Agree" they understood their care when they left the hospital	10/1/2020 - 9/30/2021	61.0%	52.0%	44.0%	48.0%	44.0%	49.0%	53.0%	47.0%	49.0%
₽	Patients who "Agree" they understood their care when they left the hospital	10/1/2020 - 9/30/2021	36.0%	42.0%	47.0%	45.0%	49.0%	44.0%	43.0%	46.0%	45.0%
•	Patients who "Disagree" or "Strongly Disagree" they understood their care when they left the hospital	10/1/2020 - 9/30/2021	3.0%	6.0%	9.0%	7.0%	7.0%	7.0%	4.0%	7.0%	6.0%
1	Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	10/1/2020 - 9/30/2021	84.0%	72.0%	59.0%	62.0%	62.0%	68.0%	70.0%	59.0%	73.0%
•	Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)	10/1/2020 - 9/30/2021	13.0%	20.0%	24.0%	24.0%	23.0%	19.0%	21.0%	25.0%	18.0%
•	Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)	10/1/2020 - 9/30/2021	3.0%	8.0%	17.0%	14.0%	15.0%	13.0%	9.0%	16.0%	9.0%

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	BalladHealth 1		Top 10% in the Nation	National Average	Johnson City Medical Center	Holston Valley Medical Center	Bristol Regional Medical Center	Johnston Memorial Hospital	Indian Path Community Hospital	Greeneville Community Hospital	Sycamore Shoals Hospital
	Patients who reported YES, they would definitely recommend the hospital	10/1/2020 - 9/30/2021	83.0%	71.0%	58.0%	63.0%	61.0%	63.0%	74.0%	55.0%	72.0%
1-	Patients who reported YES, they would probably recommend the hospital	10/1/2020 - 9/30/2021	15.0%	23.0%	31.0%	27.0%	28.0%	30.0%	21.0%	34.0%	21.0%
•	Patients who reported NO, they would probably not or definitely not recommend the hospital	10/1/2020 - 9/30/2021	2.0%	6.0%	11.0%	10.0%	11.0%	7.0%	5.0%	11.0%	7.0%
	Colonoscopy Followup %										
1	OP29 Avg Risk Polyp Surveillance*	1/1/2020 - 12/31/2020	100.0%	90.0%		100.0%	88.0%	100.0%		100.0%	87.0%
1	OP30 High risk Polyp Surveillance	RETIRED									
	Stroke Care %										
1	STK4 Thrombolytic Therapy	RETIRED									
	Heart Attack										
1	OP2 Fibrinolytic Therapy 30 minutes	RETIRED									
•	OP3b Median Time to Transfer AMI	RETIRED	1	1	1	1	ł	1		1	
•	OP4 Aspirin at Arrival AMI Chest Pain	RETIRED									
ки	OP5 Median Time to ECG AMI and Chest Pain	RETIRED									
	Emergency Department Throughput										
E 7	Median Time from ED Arrival to Transport for Admitted Patients (ED1)	RETIRED									
•	ED2b ED Decision to Transport	RETIRED		-	-	1		1	-	1	

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•	OP18b Avg time ED arrival to discharge	10/1/2020 - 9/30/2021	100.0	155.0	181.0	215.0	193.0	216.0	152.0	208.0	169.0
•	OP20 Door to Diagnostic Evaluation	RETIRED					-1				
•	OP21 Time to pain medicaton for long bone fractures	RETIRED									
•	OP22 Left without being seen*	1/1/2020 - 12/31/2020	0.00	2.00	1.00	1.00	2.00	2.00	2.00	3.00	1.00
•	OP-23 Head CT results	10/1/2020 - 9/30/2021	93.0%	71.0%		87.0%	78.0%	86.0%		8.0%	
	Preventive Care %										
•	IMM-3 Healthcare workers given influenza vaccination	10/1/2020 - 3/31/2021	99.0%	86.0%	99.0%	98.0%	99.0%	98.0%	98.0%	98.0%	99.0%
•	IMM-2 Influenza immunization	10/1/2020 - 3/31/2021	100.0%	79.0%	93.0%		100.0%				84.0%
E	Blood Clot Prevention/Treatment										
•	VTE5 Warfarin Therapy at Discharge - Voluntary Reporting	RETIRED									
•	VTE6 HAC VTE - Retired	RETIRED	ı	ļ	ı	ı	ı	ļ		ı	
	Pregnancy and Delivery Care %										
•	PC-01 Elective Delivery	10/1/2020 - 9/30/2021	0.0%	2.0%	0.0%		0.0%	8.0%	3.0%	0.0%	
	Surgical Complications Rate										
₽	Hip and Knee Complications*	4/1/2018- 3/31/2021	0.02	0.02	0.02	0.02	0.02	0.03			0.02
•	PSI4SURG COMP Death rate among surgical patients with serious treatable complications	7/1/2018 - 12/31/2019	137.4	159.0	177.7	166.2	190.4	151.8			
₽	PSI90 Complications / patient safety for selected indicators	7/1/2018 - 12/31/2019	0.83	1.00	0.82	1.38	0.99	0.89	0.88	1.01	0.92

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	BalladHealth 5		Top 10% in the Nation	National Average	Johnson City Medical Center	Holston Valley Medical Center	Bristol Regional Medical Center	Johnston Memorial Hospital	Indian Path Community Hospital	Greeneville Community Hospital	Sycamore Shoals Hospital
	Readmissions 30 Days Rate%										
•	KEADIVI3U AIVII Acute myocarตเลเ infarction (AMI) 30day readmission rate*	7/1/2018- 6/30/2021	13.9%	15.0%	16.1%	15.4%	16.0%	15.5%			
•	READINISU CABG Coronary artery bypass graft (CABG) surgery 30day readmission	7/1/2018- 6/30/2021	10.5%	11.9%	12.2%	13.1%	11.2%				
•	READIVISU COPD Chronic obstructive pulmonary disease 30day readmission	7/1/2018- 6/30/2021	18.6%	19.8%	18.6%	19.1%	21.8%	20.3%	19.8%	20.4%	18.9%
•	READM30 HIPKNEE 30day readmission rate following elective THA / TKA*	7/1/2018- 6/30/2021	3.5%	4.1%	4.2%	3.6%	4.3%	4.8%		-1	4.5%
•	READM30HF Heart Failure 30Day readmissions rate*	7/1/2018- 6/30/2021	19.6%	21.3%	22.1%	20.2%	24.2%	23.2%	22.0%	22.5%	22.9%
•	READM30PN Pneumonia 30day readmission rate++	7/1/2018- 6/30/2021					1	-			
•	READIVI30 HOSPWIDE 30day hospitalwide allcause unplanned readmission	7/1/2020 - 6/30/2021	14.0%	15.0%	16.7%	15.8%	16.6%	15.5%	14.7%	15.7%	15.2%
	Mortality 30 Days Death Rate %										
•	MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate*	7/1/2018- 6/30/2021	11.1%	12.4%	13.2%	13.1%	13.9%	12.1%			13.3%
•	MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate*	7/1/2018- 6/30/2021	2.2%	2.9%	3.2%	3.7%	3.7%	1	1	1	
•	MORT30 COPD 30day mortality rate COPD patients*	7/1/2018- 6/30/2021	7.1%	8.4%	9.9%	9.9%	10.8%	8.6%	8.2%	7.9%	8.2%
•	MORT30HF Heart failure 30day mortality rate*	7/1/2018- 6/30/2021	9.2%	11.3%	14.2%	13.4%	13.3%	12.6%	11.9%	16.1%	11.9%
•	MORT30PN Pneumonia 30day mortality rate++	7/1/2018- 6/30/2021									
•	MORT30STK Stroke 30day mortality rate*	7/1/2018- 6/30/2021	11.4%	13.6%	19.0%	12.5%	16.7%	13.5%		14.0%	
	Use of Medical Imaging Outpatient										
	OP-8 MRI Lumbar Spine for Low Back Pain	7/1/2020 - 6/30/2021	0.37	0.45	0.49	0.59	0.51	0.48	0.00	0.57	0.00

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System Comparison FY22 Report

BalladHealth 18 your story Water (Intending		Top 10% in the Nation	National Average	Johnson City Medical Center	Holston Valley Medical Center	Bristol Regional Medical Center	Johnston Memorial Hospital	Indian Path Community Hospital	Greeneville Community Hospital	Sycamore Shoals Hospital
OP-10 Abdomen CT Use of Contrast Material	7/1/2019 - 12/31/2019	0.30	0.06	0.06	0.07	0.04	0.03	0.05	0.08	0.06
OP-13 Outpatients who got cardiac imaging stress tests before low-risk outpatient surgery	7/1/2020 - 6/30/2021	1.30	0.04	0.04	0.03	0.06	0.03	0.00	0.03	0.00

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	BalladHealth 1		Top 10% in the Nation	National Average	Franklin Woods Community Hospital	Lonesome Pine Hospital	Smyth County Community Hospital	Russell County Hospital	Hawkins County Memorial Hospital	Unicoi County Hospital	Lee County Community Hospital -CAH
	Quality Target Measures										
•	PSI 3 Pressure Ulcer Rate	7/1/2018 - 12/31/2019	0.19	0.59	0.36	0.43	0.45	0.51	0.53	0.56	
•	PSI 6 latrogenic Pneumothorax Rate	7/1/2018 - 12/31/2019	0.20	0.23	0.26	0.23	0.23	0.23	0.23	0.23	
•	PSI 7 Central Venous Catheter-Related Blood Stream Infection Rate - Retired	RETIRED					-1				ı
₽	PSI 8 In Hospital Fall with Hip Fracture Rate	7/1/2018 - 12/31/2019	0.09	0.10	0.09	0.10	0.09	0.10	0.10	0.10	
•	PSI 9 Perioperative Hemorrhage or Hematoma Rate	7/1/2018 - 12/31/2019	2.18	2.55	2.35	2.50	2.52	1	1	1	-
•	PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis	7/1/2018 - 12/31/2019	1.21	1.42	1.35	1.41	1.41	1	1	1	-
•	PSI 11 Postoperative Respiratory Failure Rate	7/1/2018 - 12/31/2019	3.75	5.03	4.88	5.84	4.79	1	1		
•	PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	7/1/2018 - 12/31/2019	2.61	3.63	4.20	3.41	3.34				
•	PSI 13 Postoperative Sepsis Rate	7/1/2018 - 12/31/2019	4.05	4.90	4.70	5.42	4.83	-1			
•	PSI 14 Postoperative Wound Dehiscence Rate	7/1/2018 - 12/31/2019	0.79	0.86	0.83	0.84	-	-	1		
•	PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	7/1/2018 - 12/31/2019	0.92	1.20	0.99	1.14	1.17	1	1.20		
₽	CLABSI Rate	10/1/2020 - 9/30/2021	0.000	0.430	0.000	0.000	0.000	0.000	0.000	0.000	
•	CAUTI Rate	10/1/2020 - 9/30/2021	0.000	0.441	0.000	0.302	0.000	1.020	0.000	0.000	
₽	SSI COLON Surgical Site Infection Rate	10/1/2020 - 9/30/2021	0.00	1.11	3.85	-	0.00				
•	SSI HYST Surgical Site Infection Rate	10/1/2020 - 9/30/2021	0.00	0.00	0.00	-	1				
	MRSA Rate e suspends January 2020 - June 2020 timeframe from dat	10/1/2020 - 9/30/2021	0.000	0.011	0.000	0.083	0.000	0.192	0.000	0.000	

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•	CDIFF Rate	10/1/2020 - 9/30/2021	0.000	0.174	0.170	0.086	0.000	0.192	0.000	0.000	1
•	SMB: Sepsis Management Bundle	10/1/2020 - 9/30/2021	79.0%	57.0%	54.0%	46.0%	73.0%	63.0%	70.0%	67.0%	
	Survey of Patient's Experience										
•	Patients who reported that their nurses "Always" communicated well	10/1/2020 - 9/30/2021	87.0%	80.0%	80.0%	75.0%	87.0%	83.0%		85.0%	
•	Patients who reported that their nurses "Usually" communicated well	10/1/2020 - 9/30/2021	11.0%	15.0%	17.0%	19.0%	11.0%	12.0%		13.0%	
•	Patients who reported that their nurses "Sometimes" or "Never" communicated	10/1/2020 - 9/30/2021	2.0%	5.0%	3.0%	6.0%	2.0%	5.0%		2.0%	
•	Patients who reported that their doctors "Always" communicated well	10/1/2020 - 9/30/2021	88.0%	80.0%	79.0%	79.0%	86.0%	86.0%		82.0%	
•	Patients who reported that their doctors "Usually" communicated well	10/1/2020 - 9/30/2021	10.0%	15.0%	16.0%	13.0%	11.0%	9.0%		14.0%	
	Patients wno reported that their doctors "Sometimes" or "Never" Patients who reported that they	10/1/2020 - 9/30/2021	2.0%	5.0%	5.0%	8.0%	3.0%	5.0%	1	4.0%	-
	"Always" received help as soon as they	10/1/2020 - 9/30/2021	80.0%	67.0%	63.0%	69.0%	67.0%	73.0%	1	91.0%	-
•	Patients wno reported that they "Usually" received help as soon as they wanted	10/1/2020 - 9/30/2021	16.0%	23.0%	27.0%	16.0%	28.0%	21.0%		9.0%	
•	Patients wno reported that they "Sometimes" or "Never" received help Patients who reported that starr	10/1/2020 - 9/30/2021	4.0%	10.0%	10.0%	15.0%	5.0%	6.0%		0.0%	
•	"Always" explained about medicines	10/1/2020 - 9/30/2021	73.0%	63.0%	61.0%	64.0%	68.0%	59.0%	-	77.0%	
•	hefore giving it to them Patients who reported that staff "Usually" explained about medicines before giving it to them	10/1/2020 - 9/30/2021	16.0%	18.0%	20.0%	14.0%	18.0%	16.0%		19.0%	
•	Patients who reported that staff "Sometimes" or "Never" explained about medicines before giving it to them	10/1/2020 - 9/30/2021	11.0%	19.0%	19.0%	22.0%	14.0%	25.0%		4.0%	
•	Patients who reported that their room and bathroom were "Always" clean	10/1/2020 - 9/30/2021	83.0%	73.0%	69.0%	74.0%	82.0%	75.0%		91.0%	

 $^{^{\}star}\text{CMS}$ rule suspends January 2020 - June 2020 timeframe from datasets.

⁺⁺ CMS has metric data unavailable in latest Hospital Compare data files.

CAH- Critical Access Hospital

⁻⁻ insufficient cases or does not apply

	BalladHealth 1912 your story Water Outsoing		Top 10% in the Nation	National Average	Franklin Woods Community Hospital	Lonesome Pine Hospital	Smyth County Community Hospital	Russell County Hospital	Hawkins County Memorial Hospital	Unicoi County Hospital	Lee County Community Hospital -CAH
1	Patients who reported that their room and bathroom were "Usually" clean	10/1/2020 - 9/30/2021	13.0%	18.0%	20.0%	19.0%	14.0%	14.0%		6.0%	
ı	Patients who reported that their room and bathroom were "Sometimes" or "Never" clean	10/1/2020 - 9/30/2021	4.0%	9.0%	11.0%	7.0%	4.0%	11.0%		3.0%	
1	Patients who reported that the area around their room was "Always" quiet at night	10/1/2020 - 9/30/2021	75.0%	63.0%	70.0%	72.0%	66.0%	62.0%	1	70.0%	
ı	Patients who reported that the area around their room was "Usually" quiet at night	10/1/2020 - 9/30/2021	22.0%	27.0%	24.0%	22.0%	27.0%	29.0%	-1	27.0%	
1	Patients who reported that the area around their room was "Sometimes" or "Never" quiet at night	10/1/2020 - 9/30/2021	3.0%	10.0%	6.0%	6.0%	7.0%	9.0%		3.0%	
1	Patients who reported that YES, they were given information about what to do during their recovery at home	10/1/2020 - 9/30/2021	91.0%	86.0%	88.0%	82.0%	91.0%	90.0%		80.0%	
•	Patients who reported that NO, they were not given information about what to do during their recovery at home	10/1/2020 - 9/30/2021	9.0%	14.0%	12.0%	18.0%	9.0%	10.0%	-1	20.0%	
1	Patients who "Strongly Agree" they understood their care when they left the hospital	10/1/2020 - 9/30/2021	61.0%	52.0%	52.0%	52.0%	59.0%	49.0%		53.0%	
J	Patients who "Agree" they understood their care when they left the hospital	10/1/2020 - 9/30/2021	36.0%	42.0%	45.0%	39.0%	34.0%	46.0%		45.0%	
ı	Patients who "Disagree" or "Strongly Disagree" they understood their care when they left the hospital	10/1/2020 - 9/30/2021	3.0%	6.0%	3.0%	9.0%	7.0%	5.0%		2.0%	
1	Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	10/1/2020 - 9/30/2021	84.0%	72.0%	76.0%	60.0%	79.0%	68.0%	-	71.0%	
ı	Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)	10/1/2020 - 9/30/2021	13.0%	20.0%	17.0%	25.0%	15.0%	25.0%		19.0%	
J	Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)	10/1/2020 - 9/30/2021	3.0%	8.0%	7.0%	15.0%	6.0%	7.0%		10.0%	

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CAH- Critical Access Hospital

⁻⁻ insufficient cases or does not apply

	BalladHealth 5		Top 10% in the Nation	National Average	Franklin Woods Community Hospital	Lonesome Pine Hospital	Smyth County Community Hospital	Russell County Hospital	Hawkins County Memorial Hospital	Unicoi County Hospital	Lee County Community Hospital -CAH
	Patients who reported YES, they would definitely recommend the hospital	10/1/2020 - 9/30/2021	83.0%	71.0%	78.0%	70.0%	75.0%	66.0%	1	86.0%	
1-	Patients who reported YES, they would probably recommend the hospital	10/1/2020 - 9/30/2021	15.0%	23.0%	19.0%	23.0%	20.0%	27.0%	1	10.0%	
₽	Patients who reported NO, they would probably not or definitely not recommend the hospital	10/1/2020 - 9/30/2021	2.0%	6.0%	3.0%	7.0%	5.0%	7.0%		4.0%	
	Colonoscopy Followup %										
1	OP29 Avg Risk Polyp Surveillance*	1/1/2020 - 12/31/2020	100.0%	90.0%		41.0%	97.0%	65.0%	100.0%		
1	OP30 High risk Polyp Surveillance	RETIRED									
	Stroke Care %										
1	STK4 Thrombolytic Therapy	RETIRED									
	Heart Attack										
•	OP2 Fibrinolytic Therapy 30 minutes	RETIRED									
•	OP3b Median Time to Transfer AMI	RETIRED		1		1	ı	1		-	
•	OP4 Aspirin at Arrival AMI Chest Pain	RETIRED									
Ka	OP5 Median Time to ECG AMI and Chest Pain	RETIRED									
	Emergency Department Throughput										
E 7	Median Time from ED Arrival to Transport for Admitted Patients (ED1)	RETIRED									
•	ED2b ED Decision to Transport	RETIRED		-			-				

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CAH- Critical Access Hospital

⁻⁻ insufficient cases or does not apply

	BalladHealth 1		Top 10% in the Nation	National Average	Franklin Woods Community Hospital	Lonesome Pine Hospital	Smyth County Community Hospital	Russell County Hospital	Hawkins County Memorial Hospital	Unicoi County Hospital	Lee County Community Hospital -CAH
•	OP18b Avg time ED arrival to discharge	10/1/2020 - 9/30/2021	100.0	155.0	192.0	157.0	111.0	125.0	96.0	133.0	
•	OP20 Door to Diagnostic Evaluation	RETIRED	1	-	-1	1	1	1		1	
•	OP21 Time to pain medicaton for long bone fractures	RETIRED		1						-1	
•	OP22 Left without being seen*	1/1/2020 - 12/31/2020	0.00	2.00	2.00	1.00	0.00	1.00	0.00	1.00	
•	OP-23 Head CT results	10/1/2020 - 9/30/2021	93.0%	71.0%		92.0%					
	Preventive Care %										
•	IMM-3 Healthcare workers given influenza vaccination	10/1/2020 - 3/31/2021	99.0%	86.0%	98.0%	99.0%	99.0%	66.0%	98.0%	97.0%	
•	IMM-2 Influenza immunization	10/1/2020 - 3/31/2021	100.0%	79.0%							
E	Blood Clot Prevention/Treatment										
•	VTE5 Warfarin Therapy at Discharge - Voluntary Reporting	RETIRED									
•	VTE6 HAC VTE - Retired	RETIRED	1	ı	1	1	ı			1	
	Pregnancy and Delivery Care %										
•	PC-01 Elective Delivery	10/1/2020 - 9/30/2021	0.0%	2.0%	0.0%	7.0%					
	Surgical Complications Rate										
•	Hip and Knee Complications*	4/1/2018- 3/31/2021	0.02	0.02			0.03				
•	PSI4SURG COMP Death rate among surgical patients with serious treatable complications	7/1/2018 - 12/31/2019	137.4	159.0							
•	PSI90 Complications / patient safety for selected indicators	7/1/2018 - 12/31/2019	0.83	1.00	0.94	0.97	0.93	0.98	0.98	0.99	

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CAH- Critical Access Hospital

⁻⁻ insufficient cases or does not apply

	BalladHealth 5		Top 10% in the Nation	National Average	Franklin Woods Community Hospital	Lonesome Pine Hospital	Smyth County Community Hospital	Russell County Hospital	Hawkins County Memorial Hospital	Unicoi County Hospital	Lee County Community Hospital -CAH
	Readmissions 30 Days Rate%										
₽	KEADIVI3U AIVII Acute myocardial infarction (AMI) 30day readmission	7/1/2018- 6/30/2021	13.9%	15.0%							
•	READINI30 CABG Coronary artery bypass graft (CABG) surgery 30day readmission	7/1/2018- 6/30/2021	10.5%	11.9%		-	-				
•	READIVISU COPD Chronic obstructive pulmonary disease 30day readmission	7/1/2018- 6/30/2021	18.6%	19.8%	19.6%	19.6%	19.2%	19.5%			
•	READM30 HIPKNEE 30day readmission rate following elective THA / TKA*	7/1/2018- 6/30/2021	3.5%	4.1%			4.4%				
•	READM30HF Heart Failure 30Day readmissions rate*	7/1/2018- 6/30/2021	19.6%	21.3%	22.1%	21.9%	22.0%	24.0%	21.2%	22.2%	
•	READM30PN Pneumonia 30day readmission rate++	7/1/2018- 6/30/2021									
•	READINI30 HOSPWIDE 30day hospitalwide allcause unplanned	7/1/2020 - 6/30/2021	14.0%	15.0%	16.3%	14.7%	13.9%	17.6%	14.7%	14.8%	
	Mortality 30 Days Death Rate %										
•	MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate*	7/1/2018- 6/30/2021	11.1%	12.4%							
•	MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate*	7/1/2018- 6/30/2021	2.2%	2.9%	1	1	ı	1	1	1	
•	MORT30 COPD 30day mortality rate COPD patients*	7/1/2018- 6/30/2021	7.1%	8.4%	8.2%	8.3%	8.8%	8.6%			
•	MORT30HF Heart failure 30day mortality rate*	7/1/2018- 6/30/2021	9.2%	11.3%	9.8%	12.5%	12.6%	13.6%	11.4%	11.2%	
•	MORT30PN Pneumonia 30day mortality rate++	7/1/2018- 6/30/2021									
•	MORT30STK Stroke 30day mortality rate*	7/1/2018- 6/30/2021	11.4%	13.6%							
	Use of Medical Imaging Outpatient										
	OP-8 MRI Lumbar Spine for Low Back Pain	7/1/2020 - 6/30/2021	0.37	0.45	0.00	0.00	0.54	0.00	0.00	0.00	

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CAH- Critical Access Hospital

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System Comparison FY22 Report

BalladHealth.		Top 10% in the Nation	National Average	Franklin Woods Community Hospital	Lonesome Pine Hospital	Smyth County Community Hospital	Russell County Hospital	Hawkins County Memorial Hospital	Unicoi County Hospital	Lee County Community Hospital -CAH
OP-10 Abdomen CT Use of Contrast Material	7/1/2019 - 12/31/2019	0.30	0.06	0.07	0.15	0.02	0.03	0.02	0.07	
OP-13 Outpatients who got cardiac imaging stress tests before low-risk outpatient surgery	7/1/2020 - 6/30/2021	1.30	0.04	0.04	0.00	0.06	0.00	0.00	0.00	

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CAH- Critical Access Hospital

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	BalladHealth 5		Top 10% in the Nation	National Average	Hancock County Hospital-CAH	Johnson County Community Hospital- CAH	Dickenson Community Hospital-CAH
	Quality Target Measures						
•	PSI 3 Pressure Ulcer Rate	7/1/2018 - 12/31/2019	0.19	0.59	-		
₽	PSI 6 latrogenic Pneumothorax Rate	7/1/2018 - 12/31/2019	0.20	0.23	1	1	
•	PSI 7 Central Venous Catheter-Related Blood Stream Infection Rate - Retired	RETIRED	1	1	-	1	
₽	PSI 8 In Hospital Fall with Hip Fracture Rate	7/1/2018 - 12/31/2019	0.09	0.10			
•	PSI 9 Perioperative Hemorrhage or Hematoma Rate	7/1/2018 - 12/31/2019	2.18	2.55			
₽	PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis	7/1/2018 - 12/31/2019	1.21	1.42			
•	PSI 11 Postoperative Respiratory Failure Rate	7/1/2018 - 12/31/2019	3.75	5.03			
•	PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	7/1/2018 - 12/31/2019	2.61	3.63			
•	PSI 13 Postoperative Sepsis Rate	7/1/2018 - 12/31/2019	4.05	4.90	-	-	
•	PSI 14 Postoperative Wound Dehiscence Rate	7/1/2018 - 12/31/2019	0.79	0.86			
•	PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	7/1/2018 - 12/31/2019	0.92	1.20	-		
•	CLABSI Rate	10/1/2020 - 9/30/2021	0.000	0.430	-		
•	CAUTI Rate	10/1/2020 - 9/30/2021	0.000	0.441	-1		
•	SSI COLON Surgical Site Infection Rate	10/1/2020 - 9/30/2021	0.00	1.11			
•	SSI HYST Surgical Site Infection Rate	10/1/2020 - 9/30/2021	0.00	0.00			
₽	MRSA Rate	10/1/2020 - 9/30/2021	0.000	0.011			

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CAH- Critical Access Hospital

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	BalladHealth 5		Top 10% in the Nation	National Average	Hancock County Hospital-CAH	Johnson County Community Hospital- CAH	Dickenson Community Hospital-CAH
•	CDIFF Rate	10/1/2020 - 9/30/2021	0.000	0.174	1	1	1
•	SMB: Sepsis Management Bundle	10/1/2020 - 9/30/2021	79.0%	57.0%			
	Survey of Patient's Experience						
•	Patients who reported that their nurses "Always" communicated well	10/1/2020 - 9/30/2021	87.0%	80.0%			
₽	Patients who reported that their nurses "Usually" communicated well	10/1/2020 - 9/30/2021	11.0%	15.0%			
	"Sometimes" or "Never" communicated	10/1/2020 - 9/30/2021	2.0%	5.0%	1	1	1
1	Patients who reported that their doctors "Always" communicated well	10/1/2020 - 9/30/2021	88.0%	80.0%	1		
•	Patients who reported that their doctors "Usually" communicated well Patients who reported that their	10/1/2020 - 9/30/2021	10.0%	15.0%			
₽	doctors "Sometimes" or "Never" compunicated well Patients who reported that they	10/1/2020 - 9/30/2021	2.0%	5.0%			
•	"Always" received help as soon as they "Anted Patients who reported that they	10/1/2020 - 9/30/2021	80.0%	67.0%			
₽	"Usually" received help as soon as they "anted Patients wno reported that they	10/1/2020 - 9/30/2021	16.0%	23.0%			
₽	"Sometimes" or "Never" received help	10/1/2020 - 9/30/2021	4.0%	10.0%			
1	"Always" explained about medicines	10/1/2020 - 9/30/2021	73.0%	63.0%			
	Patients who reported that staff "Usually" explained about medicines before giving it to them	10/1/2020 - 9/30/2021	16.0%	18.0%		-1	
	Patients who reported that staff "Sometimes" or "Never" explained about medicines before giving it to them	10/1/2020 - 9/30/2021	11.0%	19.0%			
1	Patients who reported that their room and bathroom were "Always" clean	10/1/2020 - 9/30/2021	83.0%	73.0%	-		

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CAH- Critical Access Hospital

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	BalladHealth 5		Top 10% in the Nation	National Average	Hancock County Hospital-CAH	Johnson County Community Hospital- CAH	Dickenson Community Hospital-CAH
•	Patients who reported that their room and bathroom were "Usually" clean	10/1/2020 - 9/30/2021	13.0%	18.0%			
•	Patients who reported that their room and bathroom were "Sometimes" or "Never" clean	10/1/2020 - 9/30/2021	4.0%	9.0%			
•	Patients who reported that the area around their room was "Always" quiet at night	10/1/2020 - 9/30/2021	75.0%	63.0%	1	-	
•	Patients who reported that the area around their room was "Usually" quiet at night	10/1/2020 - 9/30/2021	22.0%	27.0%			
•	Patients who reported that the area around their room was "Sometimes" or "Never" quiet at night	10/1/2020 - 9/30/2021	3.0%	10.0%	1		
•	Patients who reported that YES, they were given information about what to do during their recovery at home	10/1/2020 - 9/30/2021	91.0%	86.0%			
•	Patients who reported that NO, they were not given information about what to do during their recovery at home	10/1/2020 - 9/30/2021	9.0%	14.0%			
	Patients who "Strongly Agree" they understood their care when they left the hospital	10/1/2020 - 9/30/2021	61.0%	52.0%	1	1	
•	Patients who "Agree" they understood their care when they left the hospital	10/1/2020 - 9/30/2021	36.0%	42.0%	1	-	
•	Patients who "Disagree" or "Strongly Disagree" they understood their care when they left the hospital	10/1/2020 - 9/30/2021	3.0%	6.0%			
1	Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	10/1/2020 - 9/30/2021	84.0%	72.0%			
	Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)	10/1/2020 - 9/30/2021	13.0%	20.0%			
•	Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)	10/1/2020 - 9/30/2021	3.0%	8.0%			

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CAH- Critical Access Hospital

⁻⁻ insufficient cases or does not apply

	BalladHealth 115 your story Water Optioning		Top 10% in the Nation	National Average	Hancock County Hospital-CAH	Johnson County Community Hospital- CAH	Dickenson Community Hospital-CAH		
1	Patients who reported YES, they would definitely recommend the hospital	10/1/2020 - 9/30/2021	83.0%	71.0%	1	1	1		
1	Patients who reported YES, they would probably recommend the hospital	10/1/2020 - 9/30/2021	15.0%	23.0%	-	-	-		
1	Patients who reported NO, they would probably not or definitely not recommend the hospital	10/1/2020 - 9/30/2021	2.0%	6.0%					
Colonoscopy Followup %									
1	OP29 Avg Risk Polyp Surveillance*	1/1/2020 - 12/31/2020	100.0%	90.0%					
1	OP30 High risk Polyp Surveillance	RETIRED							
	Stroke Care %								
1	STK4 Thrombolytic Therapy	RETIRED							
	Heart Attack								
1	OP2 Fibrinolytic Therapy 30 minutes	RETIRED							
1	OP3b Median Time to Transfer AMI	RETIRED							
1	OP4 Aspirin at Arrival AMI Chest Pain	RETIRED							
1	OP5 Median Time to ECG AMI and Chest Pain	RETIRED							
	Emergency Department Throughput								
1	Median Time from ED Arrival to Transport for Admitted Patients (ED1)	RETIRED							
1	ED2b ED Decision to Transport	RETIRED							
. 40	20 - June 2020 timeframe from datasets								

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CAH- Critical Access Hospital

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	BalladHealth 5		Top 10% in the Nation	National Average	Hancock County Hospital-CAH	Johnson County Community Hospital- CAH	Dickenson Community Hospital-CAH	
•	OP18b Avg time ED arrival to discharge	10/1/2020 - 9/30/2021	100.0	155.0	130.0	98.0	116.0	
•	OP20 Door to Diagnostic Evaluation	RETIRED						
•	OP21 Time to pain medicaton for long bone fractures	RETIRED			-1	-		
₽	OP22 Left without being seen*	1/1/2020 - 12/31/2020	0.00	2.00	1.00	1.00	1.00	
•	OP-23 Head CT results	10/1/2020 - 9/30/2021	93.0%	71.0%				
	Preventive Care %							
1	IMM-3 Healthcare workers given influenza vaccination	10/1/2020 - 3/31/2021	99.0%	86.0%	98.0%	1	99.0%	
•	IMM-2 Influenza immunization	10/1/2020 - 3/31/2021	100.0%	79.0%			85.0%	
E	Blood Clot Prevention/Treatment							
•	VTE5 Warfarin Therapy at Discharge - Voluntary Reporting	RETIRED				-		
•	VTE6 HAC VTE - Retired	RETIRED						
	Pregnancy and Delivery Care %							
₽	PC-01 Elective Delivery	10/1/2020 - 9/30/2021	0.0%	2.0%				
	Surgical Complications Rate							
	Hip and Knee Complications*	4/1/2018- 3/31/2021	0.02	0.02				
	PSI4SURG COMP Death rate among surgical patients with serious treatable complications	7/1/2018 - 12/31/2019	137.4	159.0	1	1		
•	PSI90 Complications / patient safety for selected indicators	7/1/2018 - 12/31/2019	0.83	1.00				

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CAH- Critical Access Hospital

⁻⁻ insufficient cases or does not apply

	BalladHealth 5		Top 10% in the Nation	National Average	Hancock County Hospital-CAH	Johnson County Community Hospital- CAH	Dickenson Community Hospital-CAH
	Readmissions 30 Days Rate%						
₽	KEADIVI3U AIVII Acute myocardial infarction (AMI) 30day readmission	7/1/2018- 6/30/2021	13.9%	15.0%			
₽	READINISU CABG Coronary artery bypass graft (CABG) surgery 30day readmission rate*	7/1/2018- 6/30/2021	10.5%	11.9%			
	READIVISU COPD Chronic obstructive pulmonary disease 30day readmission	7/1/2018- 6/30/2021	18.6%	19.8%			
•	READM30 HIPKNEE 30day readmission rate following elective THA / TKA*	7/1/2018- 6/30/2021	3.5%	4.1%			
•	READM30HF Heart Failure 30Day readmissions rate*	7/1/2018- 6/30/2021	19.6%	21.3%			
•	READM30PN Pneumonia 30day readmission rate++ READM30 HOSPWIDE 30day	7/1/2018- 6/30/2021					
₽	hospitalwide allcause unplanned	7/1/2020 - 6/30/2021	14.0%	15.0%			
	Mortality 30 Days Death Rate %						
₽	MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate*	7/1/2018- 6/30/2021	11.1%	12.4%			
•	MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate*	7/1/2018- 6/30/2021	2.2%	2.9%			
•	MORT30 COPD 30day mortality rate COPD patients*	7/1/2018- 6/30/2021	7.1%	8.4%			
•	MORT30HF Heart failure 30day mortality rate*	7/1/2018- 6/30/2021	9.2%	11.3%			
•	MORT30PN Pneumonia 30day mortality rate++	7/1/2018- 6/30/2021					
•	MORT30STK Stroke 30day mortality rate*	7/1/2018- 6/30/2021	11.4%	13.6%			
	Use of Medical Imaging Outpatient						
	OP-8 MRI Lumbar Spine for Low Back Pain	7/1/2020 - 6/30/2021	0.37	0.45	0.00	0.00	0.00

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CAH- Critical Access Hospital

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System Comparison FY22 Report

BalladHealth.		Top 10% in the Nation	National Average	Hancock County Hospital-CAH	Johnson County Community Hospital- CAH	Dickenson Community Hospital-CAH
OP-10 Abdomen CT Use of Contrast Material	7/1/2019 - 12/31/2019	0.30	0.06	0.00	0.00	0.00
OP-13 Outpatients who got cardiac imaging stress tests before low-risk outpatient surgery	7/1/2020 - 6/30/2021	1.30	0.04	0.00	0.00	0.00

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Measure set	Data sources
Timely and effective care: sepsis, cancer, colonoscopy follow-up, emergency department throughput, preventative care, pregnancy and delivery care	Data submitted by hospitals to CMS' Clinical Data Warehouse through the CMS Abstraction and Reporting Tool (CART) – Opens in a new window External Link icon or vendors Clinical Quality Measures are reviewed and monitored through special clinical studies, Joint Commission facility reviews, and Health Plan performance oversight.
Timely and effective care: healthcare worker influenza vaccination	The Centers for Disease Control and Prevention (CDC) collects data from hospitals via the National Healthcare Safety Network (NHSN).
Timely and effective care: use of medical imaging	Medicare enrollment and claims data
Surgical complications, death rates, and unplanned hospital visits	Medicare enrollment and claims data
Complications: infections	The Centers for Disease Control and Prevention (CDC) collects data from hospitals via the National Healthcare Safety Network (NHSN)
Psychiatric unit services	Medicare claims data and psychiatric hospital and psychiatric unit chart data
Patients' survey	Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) survey conducted by hospitals.
Medicare payment	Medicare enrollment and claims data

Source: Hospital Compare July 2021



Published Reports from Research Projects



Published Reports from Research Projects - Section 6.04(b)(x)

In FY 22 there have been no publications based on research directly related to an approved HR/GME plan. Listed below are studies published during this period where Ballad resources were integral.

- 2022 July Sadigh G, Coleman D, Switchenko JM, Hopkins JO, Carlos RC. Treatment out-of-pocket cost communication and remote financial navigation in patients with cancer: a feasibility study. Support Care Cancer. 2022 Jul 7. doi: 10.1007/s00520-022-07270-5. Epub ahead of print. PMID: 35796885. Treatment of Out-of-Pocket Cost Communication
- 2022 April Holt MF, Fortmann J, Testerman GM. Trauma Surgeon-Led and Funded Injury Prevention Program Decreases Number of All-Terrain Vehicle-Related Admissions. Am Surg. 2022 Apr;88(4):638-642. doi: 10.1177/00031348211050815. Epub 2022 Jan 3. PMID: 34978213. All-Terrain Vehicle-Related Admissions
- 2022 Mar Holt MF, Testerman GM. Midlevel Providers Focusing on Geriatrics Improve Care and Outcomes of Fall-Related Injuries Among the Elderly. Am Surg. 2022 Mar;88(3):360-363. doi: 10.1177/00031348211050821. Epub 2021 Nov 18. PMID: 34791900. Improve Care and Outcomes of Fall-Related Injuries Among the Elderly
- 2022 April Holt MF, Testerman GM. Trauma Surgeon-Led and Funded Injury Prevention Program Decreases Admission for Motorcycle Crash Injuries. Am Surg. 2022 Apr;88(4):740-745. doi: 10.1177/00031348211050837. Epub 2021 Nov 15. PMID: 34779261.Injury Prevention Program Decreases Admission for Motorcycle Crach Injuries
- 2021 July Mhadgut H, Manthri S, Youssef B, Jaishankar D. The Rarest of the Rare: A Case of Primary Cardiac Osteosarcoma With a Review of the Literature. Cureus. 2021 Jul 19;13(7):e16492. doi: 10.7759/cureus.16492. PMID: 34430107; PMCID: PMC8373439. A Case of Primary Cardiac Osteosarcoma
- 2020 Feb Manthri S, Sharma P, Mejbel HA, Singal S, Jaishankar D. Third Line Eribulin for Triplenegative Metastatic Breast Ductal Carcinoma Resulting in Extended Progression-free Survival of 57 Months. Cureus. 2020 Feb 13;12(2):e6980. doi: 10.7759/cureus.6980. PMID: 32201658; PMCID: PMC7075509.Third Line Eribulin for Triple-Negative Metastatic Breast Ductal Carcinoma
- 2021 Aug Hajihossainlou B, Vasileva A, Manthri S, Chakraborty K. Myasthenia gravis induced or exacerbated by immune checkpoint inhibitors: a rising concern. BMJ Case Rep. 2021 Aug 23;14(8):e243764. doi: 10.1136/bcr-2021-243764. PMID: 34426425; PMCID: PMC8383870.Myasthenia Gravis Induced or Exacerbated by Immune Checkpoint Inhibitors
- 8. 2021 Dec Patel NJ, Jameson M, Leonard M, Burns B Jr. Two Cases of Respiratory Insufficiency Secondary to Pre-procedural Nerve Blocks for Upper Extremity Injuries. Cureus. 2021 Dec 19;13(12):e20511. doi: 10.7759/cureus.20511. PMID: 35070548; PMCID: PMC8764970. Two Cases of Respiratory Insufficiency Secondary to Pre-Procedural Nerve Blocks for Upper Extremity Injuries
- 2022 Feb Gammel LB, Leonard M, Wheeler H, Linh H, Burns B Jr. Controlled Substance Use and Clinical Outcomes of Elderly Patients After a Fall. Cureus. 2022 Feb 18;14(2):e22356. doi: 10.7759/cureus.22356. PMID: 35371671; PMCID: PMC8938238. Controlled Substance Use and Clinical Outcomes of Elderly Patients After a Fall
- 2022 June Odom R, Roche KF, Burns B Jr. Incidental Finding of Appendiceal Mucinous Neoplasm After Trauma: A Case Report. Cureus. 2022 Jun 10;14(6):e25832. doi: 10.7759/cureus.25832. PMID: 35836463; PMCID: PMC9273193. Incidental Finding of Appendiceal Mucinous Neoplasm After Trauma



- 11. 2022 May McKnight CL, Burns B. Pneumothorax. 2022 May 4. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2022 Jan—. PMID: 28722915. Pneumothorax
- 2022 May Chakraborty RK, Burns B. Systemic Inflammatory Response Syndrome. 2022 May 30.
 In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2022 Jan—. PMID: 31613449. Systemic Inflammatory Response Syndrome
- 13. 2022 July Shebl E, Mirabile VS, Sankari A, Burns B. Respiratory Failure. 2022 Jul 7. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2022 Jan—. PMID: 30252383. Respiratory Failure
- 2022 June Lotfollahzadeh S, Burns B. Penetrating Abdominal Trauma. 2022 Jun 3. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2022 Jan—. PMID: 29083811. Penetrating Abdominal Trauma
- 15. 2022 June Rajaretnam N, Okoye E, Burns B. Laparotomy. 2022 Jun 13. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2022 Jan—. PMID: 30247836.Laparotomy
- 16. 2022 May Chang B, Tucker WD, Burns B. Thoracotomy. 2022 May 25. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2022 Jan—. PMID: 32491532. Thoracotomy
- 17. 2022 May Johnson AB, Burns B. Hemorrhage. 2022 May 4. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2022 Jan—. PMID: 31194413. Hemorrhage
- 18. 2022 May Simon LV, Sajjad H, Lopez RA, Burns B. Bladder Rupture. 2022 May 23. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2022 Jan—. PMID: 29262195. Bladder Rupture
- 19. 2022 Jan Stone WL, Basit H, Burns B. Pathology, Inflammation. 2021 Nov 21. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2022 Jan—. PMID: 30521241. Pathology, Inflammation
- 20. 2022 May Kostiuk M, Burns B. Trauma Assessment. 2022 May 29. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2022 Jan—. PMID: 32310373. Trauma Assessment
- 21. 2022 May Welle NJ, Sajjad H, Adkins A, Burns B. Bowel Adhesions. 2022 May 4. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2022 Jan—. PMID: 29262174. Bowel Adhesions
- 22. 2022 May Simon LV, Lopez RA, Burns B. Diaphragm Rupture. 2022 May 4. In: StatPearls
 [Internet]. Treasure Island (FL): StatPearls Publishing; 2022 Jan—. PMID: 29262087. <u>Diaphragm</u>
 Rupture
- 23. 2022 May Brady MF, Burns B. Airway Obstruction. 2022 May 4. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2022 Jan—. PMID: 29261942. Airway Obstruction
- 24. 2022 May Hager HH, Burns B. Succinylcholine Chloride. 2022 May 4. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2022 Jan—. PMID: 29763160. Succinylcholine Chloride
- 25. 2022 May Hager HH, Burns B. Artery Cannulation. 2022 May 4. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2022 Jan—. PMID: 29489243. Artery Cannulation
- 26. 2022 May Moore RA, Waheed A, Burns B. Rule of Nines. 2022 May 30. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2022 Jan—. PMID: 30020659. Rule of Nines
- 27. 2022 May Jain A, Sekusky AL, Burns B. Penetrating Chest Trauma. 2022 May 25. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2022 Jan—. PMID: 30571065. Penetrating Chest Trauma
- 28. 2022 May Bonaccorsi HA, Burns B. Perioperative Cardiac Management. 2022 May 4. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2022 Jan—. PMID: 29630248. Perioperative Cardiac Management



- 29. 2022 May O'Rourke MC, Landis R, Burns B. Blunt Abdominal Trauma. 2022 May 4. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2022 Jan—. PMID: 28613739. Blunt Abdominal Trauma
- 30. 2022 May Haydel MJ, Burns B. Blunt Head Trauma. 2022 May 4. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2022 Jan—. PMID: 28613521. Blunt Head Trauma
- 31. 2022 Jan Garmo C, Bajwa T, Burns B. Physiology, Clotting Mechanism. 2021 Sep 8. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2022 Jan—. PMID: 29939572. Physiology, Clotting Mechanism
- 32. 2022 Jan Barmore W, Bajwa T, Burns B. Biochemistry, Clotting Factors. 2022 May 8. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2022 Jan—. PMID: 29939627. Biochemistry, Clotting Factors
- 33. 2022 Jan Master SR, Burns B. Medullary Thyroid Cancer. 2022 May 23. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2022 Jan—. PMID: 29083765. Medullary Thyroid Cancer
- 34. 2022 Jan Fish EM, Burns B. Physiology, Small Bowel. 2021 Sep 13. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2022 Jan—. PMID: 30335296. Physiology, Small Bowel
- 35. 2022 Jan Boyette LC, Burns B. Physiology, Pulmonary Circulation. 2021 Sep 22. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2022 Jan—. PMID: 30085539. Physiology, Pulmonary Circulation
- 2022 Jan Forbes J, Burns B. Abdominal Gunshot Wounds. 2022 May 4. In: StatPearls [Internet].
 Treasure Island (FL): StatPearls Publishing; 2022 Jan –. PMID: 33232005. Abdominal Gunshot Wounds
- 2022 Jan Hafen BB, Burns B. Physiology, Smooth Muscle. 2021 Aug 30. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2022 Jan –. PMID: 30252381. Physiology, Smooth Muscle
- 38. 2022 Jan Hafen BB, Shook M, Burns B. Anatomy, Smooth Muscle. 2022 Jul 18. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2022 Jan—. PMID: 30422452. Anatomy, Smooth Muscle
- 39. 2022 Jan Sharma S, Hashmi MF, Burns B. Alveolar Gas Equation. 2021 Aug 30. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2022 Jan—. PMID: 29489223. Alveolar Gas Equation
- 2022 Jan Kong EL, Burns B. Narcotic Bowel Syndrome. 2022 May 4. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2022 Jan –. PMID: 29630259. Narcotic Bowel Syndrome
- 41. 2022 Jan Hussain A, Burns B. Anatomy, Thorax, Wall. 2021 Jul 31. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2022 Jan—. PMID: 30571035. Anatomy, Thorax, Wall
- 42. 2022 Jan Anderson BW, Holme MR, Burns B. Anatomy, Thorax, Xiphoid Process. 2022 Jul 19. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2022 Jan—. PMID: 30252338. Anatomy, Thorax, Xiphoid Process
- 43. 2022 Jan Rosen RD, Singh A, Burns B. Trauma Organ Procurement. 2022 May 4. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2022 Jan—. PMID: 32310407. <u>Trauma Organ Procurement</u>
- 44. 2022 Jan Muco E, Yarrarapu SNS, Douedi H, Burns B. Tissue and Organ Donation. 2022 May 4. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2022 Jan—. PMID: 32491363. Tissue and Organ Donation



- 45. 2022 Jan Tucker WD, Weber C, Burns B. Anatomy, Thorax, Heart Pulmonary Arteries. 2021 Jul 26. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2022 Jan—. PMID: 30521233. Anatomy, Thorax, Heart Pulmonary Arteries
- 2022 Jan Solari F, Burns B. Anatomy, Thorax, Pectoralis Major Major. 2021 Jul 26. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2022 Jan—. PMID: 30252247. <u>Anatomy</u>, Thorax, Pectoralis Major Major
- 47. 2022 Jan Jordan JA, Burns B. Anatomy, Abdomen and Pelvis, Hip Arteries. 2021 Jul 26. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2022 Jan—. PMID: 31194331. Anatomy, Abdomen and Pelvis, Hip Arteries
- 48. 2022 Jan Shahid Z, Burns B. Anatomy, Abdomen and Pelvis, Diaphragm. 2021 Aug 11. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2022 Jan—. PMID: 29262082. Anatomy, Abdomen and Pelvis, Diaphragm
- 2022 Jan Deere M, Singh A, Burns B. Central Venous Access of The Subclavian Vein. 2022 May
 In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2022 Jan—. PMID: 29489182. Central Venous Access of The Subclavian Vein
- 2022 Jan Helms JT, Maldonado KA, Burns B. Anatomy, Shoulder and Upper Limb, Hand Radiocarpal Joint. 2021 Aug 11. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2022 Jan—. PMID: 30969566. <u>Anatomy, Shoulder and Upper Limb, Hand Radiocarpal</u> Joint
- 51. 2022 Jan Rivard AB, Kortz MW, Burns B. Anatomy, Head and Neck, Internal Jugular Vein. 2021 Jul 26. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2022 Jan—. PMID: 30020630. Anatomy, Head and Neck, Internal Jugular Vein
- 52. 2022 Jan Shahoud JS, Kerndt CC, Burns B. Anatomy, Thorax, Internal Mammary (Internal Thoracic) Arteries. 2021 Jul 26. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2022 Jan—. PMID: 30726022. Anatomy, Thorax, Internal Mammary (Internal Thoracic) Arteries
- 53. 2022 Jan Cooper DW, Burns B. Anatomy, Shoulder and Upper Limb, Hand Palmaris Tendon. 2021 Sep 3. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2022 Jan—. PMID: 30137801. Anatomy, Shoulder and Upper Limb, Hand Palmaris Tendon
- 54. 2022 Jan Tucker WD, Shrestha R, Burns B. Anatomy, Abdomen and Pelvis, Inferior Vena Cava. 2021 Jul 27. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2022 Jan—. PMID: 29493975. Anatomy, Abdomen and Pelvis, Inferior Vena Cava
- 55. 2022 Jan Lung BE, Burns B. Anatomy, Shoulder and Upper Limb, Hand Flexor Digitorum Profundus Muscle. 2021 Oct 30. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2022 Jan—. PMID: 30252302. Anatomy, Shoulder and Upper Limb, Hand Flexor Digitorum Profundus Muscle
- 56. 2022 Jan Wright N, Burns B. Anatomy, Abdomen and Pelvis, Posterior Abdominal Wall Arteries. 2021 Oct 30. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2022 Jan—. PMID: 30422567. Anatomy, Abdomen and Pelvis, Posterior Abdominal Wall Arteries



Comparison of Financial Ratios

Statement of Revenue and Expense For the Month Ended June 30, 2022

	FY22 Total
Patient Revenue	
Inpatient	4,556,029,496
Outpatient	6,215,860,567
Total Patient Revenue	10,771,890,062
Deductions From Revenue	
Revenue Deductions	8,208,531,068
Charity	123,616,493
Uninsured Discounts	264,931,842
Total Deductions	8,597,079,403
Not Dationt Dovonus	2 174 910 440
Net Patient Revenue	2,174,810,660
Other Operating Revenue	138,081,355
Hospital Support Revenue	0
riespital Support Neverlae	Ğ
Total Operating Revenue	2,312,892,015
Operating Expense	/70.4/5.4//
Salaries & Wages	679,165,166
Provider Salaries	177,291,931
Contract Labor - Providers	26,614,511
Contract Labor - Other	122,448,646
Team Member Benefits	133,374,702
Professional Fees	300,086,857
Drugs & Supplies	464,524,729
Other Expense	195,041,486
Depreciation & Amortization	145,225,989
Interest & Taxes	42,768,878
Total Operating Expense	2,286,542,895
Net Operating Income before Support Allocation	26,349,120
Support Allocation Labor Evpopes	(0)
Support Allocation - Labor Expense Support Allocation - Other	(0)
Net Operating Income after Support Allocation	26,349,120
Net operating income after support Anocation	20,347,120

Net Investment Income	40,340,842
	· · · · · · · · · · · · · · · · · · ·
Realized Gain on Investments	78,285,632
Gain / (Loss) from Affiliates	2,853,712
Gain / (Loss) on Discontinued Operations & Disposal	(2,035,923)
Loss on Extinguishment of LTD / Derivatives	(190,605)
Minority Interest	(326,276)
Other Non Operating Income / (Expense)	9,536,957
Total Non Operating Income / (Expense)	128,464,339
- Countries operating modern (- Aponto)	120/101/001
Total Revenue Over Expense Before CFV of Derivatives	154,813,459
Change in Fair Value of Interest Rate Swaps	(4,731,812)
Total Excess Revenue Over Expense	150,081,647
Net Unrealized Gain / (Loss) on Investments	(273,766,648)
Increase in Unrestricted Net Assets	(123,685,001)
EBITDA (Operations)	214,343,987
EBITDA (Operations) as % of Net Patient Revenue	9.9%
Operating Margin	1.1%
Operating Margin	1.170
EBITDA	342,998,932
EBITDA as % of Net Patient Revenue	15.8%
Total Margin	6.7%
rotar wargin	0.770

Key Operating Indicators For the Period Ended June 30, 2022

	FY22 Total
Operating Statistics	
Average Daily Census (Hospitals)	1,235
Occupancy Percent (Hospitals)	48.6%
Patient Days (Hospitals)	450,806
Discharges (Hospitals)	88,666
Observation Visits	16,340
Observation Visits (excl OB)	16,212
Acute Discharges and Observation Visits (excl OB)	98,858
Obs Visits (excl OB) % of Obs Visits (excl OB) & Acute Disch	16.4%
Observation (excl OB) % of Occupancy	0.2%
Outpatient Visits	2,996,770
Telehealth Visits	41,030
Urgent Care Visits	231,304
Emergency Department Visits	371,384
Surgery Cases - Inpatient	15,993
Surgery Cases - Outpatient	31,423
Surgery Cases - ASC	3,180
Revenue by Source	
Medicare	21.3%
Managed Medicare	33.5%
Medicaid/TennCare	15.5%
Managed Care	21.1%
Self Pay	4.8%
Other	3.7%
Labor Management	
Employed Full Time Equivalents	10,197
Contract Full Time Equivalents	550
Total Full Time Equivalents (excl Providers)	10,747
Employed Provider Full Time Equivalents	766
Contract Provider Full Time Equivalents	43
Total Provider Full Time Equivalents	809
Full Time Equivalents	11,556
Average Hourly Rate (excl Providers & Cont Lbr)	\$31.93
Salary Expense per FTE (excl Providers & Cont Lbr)	\$66,603
Patient Resource Management	
Overall Medicare Average Length of Stay	5.17
Overall Average Length of Stay	5.08
Acute Medicare Average Length of Stay - Acuity Adjusted	2.82
Acute Overall Average Length of Stay - Acuity Adjusted	2.90
Observation Average Length of Stay	1.17
Acute Medicare Case Mix Index	1.75
Acute Overall Case Mix Index	1.70
Balance Sheet	
For the Period Ended June 30, 2022	
	June 30 2022

ASSETS	
Current Assets	
Cash and Cash Equivalents	148,295,541
Board Designated Funds COPA	0
Board Designated Funds Cooperative Agreement	8,725,346
Current Portion AWUIL	7,103,980
Accounts Receivable (Net)	243,991,766
Other Receivables	67,539,602
Due From Affiliates	0
Due From Third Party Payors	(0)
Inventories	49,568,072
Prepaid Expense	12,721,069
	537,945,375
Assets Whose Use is Limited	251,372,725
Other Investments	1,200,286,347
Propery, Plant, and Equipment	
Land, Buildings, and Equipment	3,244,240,078
Less Allowances for Depreciation	(2,088,563,353)
	1,155,676,725
Other Assets	
Pledges Receivable	4,566,339
Long Term Compensation Investment	32,722,659
Investments in Unconsolidated Subsidiaries	17,495,086
Assets Held for Resale / Expansion	14,297,532
Investments in Subsidiaries	0
Goodwill	206,027,773
Deferred Charges and Other	35,415,846
	310,525,235
TOTAL 400FT0	
TOTAL ASSETS	3,455,806,407

LIABILITIES AND NET ASSETS	
Current Liabilities	
Accounts Payable and Accrued Expense	161,143,079
Accrued Salaries, Benefits, and PTO	146,847,891
Accrued Interest	20,035,027
Due to Affiliates	0
Due to Third Party Payors	83,661,706
Current Portion of Long Term Debt	64,278,703
	475,966,406
Other Non-Current Liabilities	
Long Term Compensation Payable	16,333,213
Long Term Debt	1,421,387,576
Estimated Fair Value of Interest Rate Swaps	5,390,394
Deferred Income	603,501
Professional Liability Self-Insurance and Other	62,753,015
	1,506,467,698
TOTAL LIABILITIES	1,982,434,104
Net Assets	
Restricted Net Assets	44,308,403
Unrestricted Net Assets	1,427,657,188
Noncontrolling Interests in Subsidiaries	1,406,712
	1,473,372,303
TOTAL LIABILITIES AND NET ASSETS	3,455,806,407

Comparison of Ballad Health to the Median of Similarly Rated Health Systems

	2021 Fitch	2021 S&P	2020 Moody's	
<u>-</u>	Median ¹	Median ²	Median ³	FY22 Total
Profitability Ratios				
Total Margin⁵	5.5%	4.0%	2.8%	6.7%
Operating Margin	2.8%	1.4%	0.1%	1.1%
EBITDA to Revenue	11.3%	10.3%	12.0%	14.8%
Liquidity Ratios ⁷				
Current Ratio ⁶	N/A	N/A	1.5	1.2
Days in Patient A/R	48.2	44.6	42.9	40.9
Avg Payment Period ⁶	84.4	N/A	88.9	76.7
Total Days Cash on Hand	247.5	215.8	232.8	231.4
Capital Ratios ⁷				
LT Debt to Capitalization ⁶	34.9%	41.0%	37.4%	46.9%
Cash Flow to Total Debt5,6	31.3%	N/A	27.0%	23.0%
Debt Service Coverage	4.7	2.2	3.8	4.6
Productivity Ratios				
FTEs per AOB	N/A	N/A	N/A	3.10
Labor Exp / Net Patient Rev	54.9%	57.4%	N/A	52.4%

Notes

¹ Source: Fitch - Median Ratios for Nonprofit Hospitals and Healthcare Systems (August 2022)

² Source: S&P - US Not-for-Profit Health Care System Median Ratios (August 2022)

³ Source: Moody's - Not-for-Profit Hospital Medians (September 2021)

⁵ Excludes Loss on Extinquishment of LTD

⁶ Norton Community Hospital and Johnston Memorial Hospital Debt is excluded

⁷ Liquidity and Capital Ratios use a rolling 12 for income statement components



Ballad Health Organizational Chart

Ballad Health

Chief Operating Officer (Co-Chair) Chief Physician Executive (Co-Chair) **Executive Leadership** Chief Clinical Officer **Ballad Health Ballad Health** Chief Nursing Executive Board of Directors (as of March 2022) Board of Directors Audit & Compliance Committee Chief Consumer Officer General Counsel Market CEOs Ballad Health Medical Associates, President Ballad Health Medical Associates, Chief Administrative Officer Market Financial Operations Alan Levine Market Operations/Service Line Integration & Development Chairman / President / Chief Executive Officer Paige Carter **Sharon Tobias** Chief Compliance Chief of Staff Officer Karen Guske COPA Compliance Officer Tony Keck Marvin Eichorn **Dr. Clay Runnels Eric Deaton** System Innovation & Chief Administrative Chief Physician Chief Financial Officer Chief Operating Officer Chief Population Health General Counsel Officer Executive Insurance **Debbie Dover** Vacant **Taylor Hamilton Shane Hilton** Dr. Mark Patterson **Outside Counsel** Chief Human Partnerships / Chief Consumer Corporate, Retail and Resources Officer Ballad Health Medical Business Development Risk Management Officer Non-Acute Services Associates, President Lisa Smithgall Pam Austin Chief Nursing **Todd Norris** Chief Information Executive Community Health & Officer System Advancement Joshua McFall Steve Kilgore **Acute Services Market** Retail, Corporate Allison Rogers Operations Programs, & Business Strategic Planning Development **Operations Council** Paula Claytore **Payor Relations** Brad Price Dr. Amit Vashist Market Operations / Chief Clinical Officer Service Line Integration & Development **Blood Bank** Lab Services Operations Security

1

Operations Council