ATTACHMENT 1

Summary of Quality Indicators

Summary of Quality Indicators Report summary:

This item was suspended during the first half of the reporting period, however Ballad wishes to provide the entire year of the following Quality Target Measures for the Department's visibility and information.

This report provides a summary of performance for quality indicators submitted via the Ballad Health Quality Metrics Scorecard as of fiscal year end June 30, 2022. Metrics include the COPA target measures for FY22, HCAHPS, and the COPA monitoring measures. The performance comparison baseline for Target Measures for FY22 was reset in May, 2021. The original baseline data for Quality metrics was based on fiscal year while the new baseline is calendar year utilizing Premier and EPIC as the source of all data for all Ballad quality data submissions going forward. All Ballad Health facilities were converted to EPIC as our official Electronic Health Record (EHR) and Premier as our quality platform, enabling this change. This significant conversion allowed the quality department to work with Premier to reset all 2017 baselines utilizing more than 4,000 + hospitals/systems for peer comparisons. The baseline restructure was presented to the States and approved as the official Ballad Health Baseline for Target Measures beginning with FY22.

Ballad Health's quality metrics continued to decline in FY22 due to continued stress on the system treating COVID patients as well as staffing shortages. As we attempt to recover from the pandemic and decreased resources, the Corporate Quality Department is now holding monthly meetings involving facility administrative leaders, facility quality leaders, as well as representatives from CDI and Coding to conduct deep dives into the measure that are not meeting baseline for each region.

• Ballad Health met 59% (10/17) of the target measures at or above baseline.
• Opportunities for improvement include: Postoperative Acute Kidney Injury Requiring Dialysis, CLABSI, CAUTI, SSI Colon, SSI HYST, MRSA, and Sepsis Management Bundle

An executive summary reflecting Ballad Health as well as facility-specific Quality Target and Priority measures are posted to the Ballad Health internet site on a quarterly basis to allow public access to our quality data results. The link for public access is www.BalladHealth.org, under "About Us".

Target Measures:

Desired Performance	Quality Target Measures	Reset Baseline	FY22
⬇	Pressure Ulcer Rate	1.07	0.20
⬇	Iatrogenic Pneumothorax Rate	0.25	0.25
⬇	In Hospital Fall with Hip Fracture Rate	0.06	0.03
⬇	PSI 9 Perioperative Hemorrhage or Hematoma Rate	1.59	1.86
⬇	PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis Rate	0.76	2.13
⬇	PSI 11 Postoperative Respiratory Failure Rate	9.24	12.88
⬇	PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	3.31	4.86

FY22: July 2021 – June 2022

⬇	**PSI 13 Postoperative Sepsis Rate**	**3.58**	**5.06**	
⬇	**PSI 14 Postoperative Wound Dehiscence Rate**	**0.83**	**0.88**	
⬇	**PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate**	**1.18**	**0.29**	
⬇	**CLABSI**	**0.711**	**1.336**	
⬇	**CAUTI**	**0.558**	**1.107**	
⬇	**SSI COLON Surgical Site Infection**	**2.13**	**2.14**	
⬇	**SSI HYST Surgical Site Infection**	**0.71**	**2.542**	
⬇	**MRSA**	**0.047**	**0.141**	
⬇	**CDIFF**	**0.671**	**0.181**	
⬆	**SMB: Sepsis Management Bundle**	**56.9%**	**53.8%**	

Desired Performance	Quality Monitoring Measures	Baseline	FY22
⬆	HCOMP1A P Patients who reported that their nurses "Always" communicated well	82.8%	74.7%
⬇	HCOMP1U P Patients who reported that their nurses "Usually" communicated well	13.6%	16.1%
⬆	HCOMP1 SNP Patients who reported that their nurses "Sometimes" or "Never" communicated well	3.6%	9.1%
⬇	HCOMP2A P Patients who reported that their doctors "Always" communicated well	84.1%	75.6%
⬇	HCOMP2U P Patients who reported that their doctors "Usually" communicated well	11.9%	15.6%
⬇	HCOMP2 SNP Patients who reported that their doctors "Sometimes" or "Never" communicated well	3.9%	8.8%
⬇	HCOMP3A P Patients who reported that they "Always" received help as soon as they wanted	72.8%	59.7%
⬆	HCOMP3U P Patients who reported that they "Usually" received help as soon as they wanted	20.6%	25.2%
⬆	HCOMP3 SNP Patients who reported that they "Sometimes" or "Never" received help as soon as they wanted	6.6%	15.2%
⬇	HCOMP4A P Patients who reported that their pain was "Always" well controlled - Suspended	74.1%	--
⬇	HCOMP4U P Patients who reported that their pain was "Usually" well controlled - Suspended	19.6%	--
⬆	HCOMP4 SNP Patients who reported that their pain was "Sometimes" or "Never" well controlled - Suspended	6.3%	--
⬆	HCOMP5A P Patients who reported that staff "Always" explained about medicines before giving it to them	68.1%	57.9%
⬇	HCOMP5U P Patients who reported that staff "Usually" explained about medicines before giving it to them	15.9%	16.7%
⬇	HCOMP5 SNP Patients who reported that staff "Sometimes" or "Never" explained about medicines before giving it to them	16.0%	25.4%
⬆	HCOMP6Y P Patients who reported that YES, they were given information about what to do during their recovery at home	87.2%	84.4%

FY22: July 2021 – June 2022

Desired Performance	Quality Monitoring Measures	Baseline	FY22
⬇	**HCOMP6N P** Patients who reported that NO, they were not given information about what to do during their recovery at home	12.8%	15.6%
⬆	**HCOMP7SA** Patients who "Strongly Agree" they understood their care when they left the hospital	54.5%	46.2%
⬇	**HCOMP7A** Patients who "Agree" they understood their care when they left the hospital	40.8%	46.5%
⬇	**HCOMP7D SD** Patients who "Disagree" or "Strongly Disagree" they understood their care when they left the hospital	4.8%	7.4%
⬆	**HCLEAN HSPAP** Patients who reported that their room and bathroom were "Always" clean	73.9%	61.7%
⬇	**HCLEAN HSPUP** Patients who reported that their room and bathroom were "Usually" clean	17.2%	19.3%
⬇	**HCLEANHSP SNP** Patients who reported that their room and bathroom were "Sometimes" or "Never" clean	8.9%	19.0%
⬆	**HQUIETHSP AP** Patients who reported that the area around their room was "Always" quiet at night	66.5%	58.6%
⬇	**HQUIETHSP UP** Patients who reported that the area around their room was "Usually" quiet at night	26.9%	28.6%
⬇	**HQUIETHSP SNP** Patients who reported that the area around their room was "Sometimes" or "Never" quiet at night	6.6%	12.8%
⬇	**HHSP RATING06** Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)	7.8%	14.7%
⬇	**HHSP RATING78** Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)	18.9%	23.9%
⬆	**HHSP RATING910** Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	73.3%	61.4%
⬆	**HRECMND DY** Patients who reported YES, they would definitely recommend the hospital	73.7%	61.6%

FY22: July 2021 – June 2022

Desired Performance	Quality Monitoring Measures	Baseline	FY22
⬇	HRECMND PY Patients who reported YES, they would probably recommend the hospital	21.5%	28.1%
⬇	HRECMND DN Patients who reported NO, they would probably not or definitely not recommend the hospital	4.8%	10.2%
⬆	OP29 Avg Risk Polyp Surveillance	76.1%	97.0%
⬆	OP30 High risk Polyp Surveillance -- RETIRED	77.7%	--
⬇	OP3b Median Time to Transfer AMI --- RETIRED	47.5	--
⬇	OP5 Median Time to ECG AMI and Chest Pain RETIRED	5.22	--
⬆	OP4 Aspirin at Arrival AMI Chest Pain -- RETIRED	0.97	--
⬇	Median Time from ED Arrival to Transport for Admitted Patients (ED1)	227.3	460.1
⬇	ED2b ED Decision to Transport	69.0	217.6
⬇	Median Time from ED Arrival to Departure for Outpatients (18b)	124.5	158.4
⬇	OP20 Door to Diagnostic Evaluation RETIRED	15.09	--
⬇	OP21 Time to pain medication for long bone fractures RETIRED	37.84	--
⬇	OP22 Left without being seen	0.9%	2.5%
⬆	OP23 Head CT stroke patients	84.7%	65.0%
⬆	IMM3OP27 FACADHPCT HCW Influenza Vaccination - SEASONAL	97.0%	98.5%
⬇	VTE6 HAC VTE	0.02	--
⬇	PC01 Elective Delivery	0.56%	6.77%
⬇	Hip and Knee Complications	0.029	0.000
⬇	PSI4SURG COMP Death rate among surgical patients with serious treatable complications	140.6	189.7
⬇	PSI90 Complications / patient safety for selected indicators	0.83	0.95
⬇	READM30 AMI Acute myocardial infarction (AMI) 30day readmission rate	12.9%	13.3%
⬇	READM30 CABG Coronary artery bypass graft (CABG) surgery 30day readmission rate	8.9%	12.9%
⬇	READM30 COPD Chronic obstructive pulmonary disease 30day readmission rate	18.2%	19.9%
⬇	READM30 HIPKNEE 30day readmission rate following elective THA / TKA	3.8%	5.3%

FY22: July 2021 – June 2022

Desired Performance	Quality Monitoring Measures	Baseline	FY22
⬇	**READM30 HOSPWIDE 30day hospital wide all cause unplanned readmission**	**12.0%**	**14.3%**
⬇	**READM30 STK Stroke 30day readmission rate**	**9.0%**	**11.3%**
⬇	**READM30HF Heart Failure 30Day readmissions rate**	**20.5%**	**23.9%**
⬇	**READM30PN Pneumonia 30day readmission rate**	**17.7%**	**18.0%**
⬇	**MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate**	**2.0%**	**2.0%**
⬇	**MORT30 COPD 30day mortality rate COPD patients**	**1.8%**	**6.6%**
⬇	**MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate**	**4.7%**	**7.4%**
⬇	**MORT30HF Heart failure 30day mortality rate**	**3.9%**	**5.1%**
⬇	**MORT30PN Pneumonia 30day mortality rate**	**4.7%**	**7.4%**
⬇	**MORT30STK Stroke 30day mortality rate**	**8.2%**	**7.3%**

FY22: July 2021 – June 2022

ATTACHMENT 2

Comparison to Similarly-Sized Systems

Methodology for Selection of Comparison Systems

This report provides a summary of the methodology for selection of "similarly-sized" hospital system as established in the TN Terms of Certification 4.02(c)(ii), Exhibit G. *As indicated in the 2020 report, there are significant challenges with the selection of "similarly-sized" hospital systems, as "size" of the system, even with some of the factors taken into consideration, is not a standard for comparison in the industry without appropriate adjustment for score of services, community characteristics, revenue impact of federal reimbursements (i.e. Ballad Health hospitals have historically had among the 2nd lowest Medicare Area Wage Index in the United States), payer mix (i.e. Ballad Health hospitals have a payer mix which approximately 70 percent government payer and charity/uninsured), and the general rural nature of the Ballad Health service area compared to the more urban and suburban nature of the comparison hospitals. Based on these factors, there are significant differences in resources available and there is no standard for adjustment based on the differences. Ballad Health cautions against any conclusions based on these comparisons.*

In order to maintain consistent comparisons from prior years, the same hospitals have been used for the attached report. Advocate Aurora Health and Atrium Health announced plans to merge May, 2022, however, the board in Illinois requested additional information. As of mid-September 2022, the merger of a 67-hospital system is delayed. Mercy Health who merged with Bon Secours in 2018, now has a system of 38 hospitals. It was noted in the previous report that Unity Point Health and Sanford Health signed a letter of intent to merge by the end of 2019, however, the merger did not take place. Therefore, we continue to use Unity Point System as a comparison for FY22 as well. New comparison organizations will be selected for next year in collaboration with Tennessee and Virginia as Ballad Health works with Premier to determine the appropriate health systems for comparison.

Selection criteria ranked by priority:

- Not-for-profit
- Net revenue
- Aligned with Premier as quality partner – *allows for better benchmarking and best practice sharing*
- Bed size and number of hospitals
- Rural hospitals and similar services
- Location – *allows for travel for site visits*
- Epic HER
- Top performers

$ in billions	Aurora Health	Baptist Memorial	Carillion Clinic	Mercy Health	Texas Health	Unity Point Health
Net Revenue	$3.5	$2.6	$1.0	$5.0	$4.8	$5.0
Bed Size – Staffed	2,695	2,300	1,026	3132	4,000	4205
# of Hospitals	16	14	8	38	27	39
Location	Milwaukee, WI	Memphis, TN	Roanoke, VA	Cincinnati, OH	Arlington, TX	Des Moines, IA
Ranking	#25	#24	NA	#15	#22	#19

		Top 10% in the Nation	National Average	Ballad Health	Aurora	Baptist Health	Carilion	Mercy Health	Texas Health	Unity Point	Peer Group
Quality Target Measures											
PSI 3 Pressure Ulcer Rate	7/1/2018 - 12/31/2019	0.19	0.59	0.59	1.12	0.28	0.62	0.26	0.31	0.35	0.50
PSI 6 Iatrogenic Pneumothorax Rate	7/1/2018 - 12/31/2019	0.20	0.23	0.23	0.25	0.23	0.17	0.25	0.20	0.21	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	0.09	0.09	0.09	0.10	0.09
PSI 9 Perioperative Hemorrhage or Hematoma Rate	7/1/2018 - 12/31/2019	2.18	2.55	2.35	3.40	2.26	2.82	2.42	2.42	2.44	2.59
PSI 10 Postoperative Acute Kidney Injury Requiring Dialysis	7/1/2018 - 12/31/2019	1.21	1.42	1.54	1.77	1.55	1.38	1.42	1.61	1.59	1.55
PSI 11 Postoperative Respiratory Failure Rate	7/1/2018 - 12/31/2019	3.75	5.03	5.27	5.56	5.33	6.98	5.57	5.53	5.59	5.69
PSI 12 Perioperative Pulmonary Embolism or Deep Vein Thrombosis Rate	7/1/2018 - 12/31/2019	2.61	3.63	3.35	3.29	3.77	4.14	3.00	3.53	3.25	3.48
PSI 13 Postoperative Sepsis Rate	7/1/2018 - 12/31/2019	4.05	4.90	5.06	4.67	5.40	4.87	4.64	4.39	4.88	4.84
PSI 14 Postoperative Wound Dehiscence Rate	7/1/2018 - 12/31/2019	0.79	0.86	0.94	0.81	0.83	0.94	0.84	0.84	0.85	0.86
PSI 15 Unrecognized Abdominopelvic Accidental Puncture/Laceration Rate	7/1/2018 - 12/31/2019	0.92	1.20	1.12	1.04	1.15	1.95	1.14	1.27	1.15	1.26
CLABSI Rate	10/1/2020 - 9/30/2021	0.000	0.430	1.261	0.744	0.789	0.365	1.279	1.073	0.873	0.912
CAUTI Rate	10/1/2020 - 9/30/2021	0.000	0.441	1.043	1.302	0.660	1.122	1.078	0.386	0.812	0.915
SSI COLON Surgical Site Infection Rate	10/1/2020 - 9/30/2021	0.00	1.11	2.20	3.13	2.70	4.26	4.25	2.79	1.45	2.97
SSI HYST Surgical Site Infection Rate	10/1/2020 - 9/30/2021	0.00	0.00	1.45	0.99	0.98	1.30	0.93	1.04	0.59	1.04
MRSA Rate	10/1/2020 - 9/30/2021	0.000	0.011	0.125	0.037	0.064	0.067	0.077	0.042	0.066	0.068
CDIFF Rate	10/1/2020 - 9/30/2021	0.000	0.174	0.174	0.324	0.322	0.345	0.211	0.314	0.262	0.279
SMB: Sepsis Management Bundle	10/1/2020 - 9/30/2021	79.0%	57.0%	55.0%	77.3%	57.2%	13.3%	49.7%	71.1%	55.9%	59.1%

*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
It's your story. We're listening.

Survey of Patient's Experience

		Top 10% in the Nation	National Average	Ballad Health	Aurora	Baptist Health	Carilion	Mercy Health	Texas Health	Unity Point	Peer Group
↑ Patients who reported that their nurses "Always" communicated well	10/1/2020 - 9/30/2021	87.0%	80.0%	78.5%	81.1%	79.4%	80.8%	79.9%	78.5%	80.6%	79.8%
↓ Patients who reported that their nurses "Usually" communicated well	10/1/2020 - 9/30/2021	11.0%	15.0%	15.8%	15.5%	16.2%	16.0%	16.1%	16.6%	16.3%	16.1%
↓ Patients who reported that their nurses "Sometimes" or "Never" communicated well	10/1/2020 - 9/30/2021	2.0%	5.0%	5.7%	3.5%	4.3%	3.2%	4.0%	4.9%	3.1%	4.1%
↑ Patients who reported that their doctors "Always" communicated well	10/1/2020 - 9/30/2021	88.0%	80.0%	79.2%	80.5%	79.8%	80.8%	78.3%	77.9%	78.9%	79.3%
↓ Patients who reported that their doctors "Usually" communicated well	10/1/2020 - 9/30/2021	10.0%	15.0%	14.8%	15.6%	15.7%	15.3%	16.6%	16.2%	16.5%	15.8%
↓ Patients who reported that their doctors "Sometimes" or "Never" communicated well	10/1/2020 - 9/30/2021	2.0%	5.0%	6.1%	3.8%	4.6%	3.8%	5.1%	5.9%	4.6%	4.8%
↑ Patients who reported that they "Always" received help as soon as they wanted	10/1/2020 - 9/30/2021	80.0%	67.0%	65.8%	65.2%	62.1%	64.7%	64.1%	65.2%	63.1%	64.3%
↓ Patients who reported that they "Usually" received help as soon as they wanted	10/1/2020 - 9/30/2021	16.0%	23.0%	23.1%	26.4%	27.4%	25.8%	25.6%	24.8%	27.3%	25.8%
↓ Patients who reported that they "Sometimes" or "Never" received help as soon as they wanted	10/1/2020 - 9/30/2021	4.0%	10.0%	11.1%	8.4%	10.4%	9.5%	10.2%	10.1%	9.6%	9.9%
↑ Patients who reported that staff "Always" explained about medicines before giving it to them	10/1/2020 - 9/30/2021	73.0%	63.0%	61.9%	62.9%	59.6%	62.0%	61.2%	59.9%	62.0%	61.4%
↓ Patients who reported that staff "Usually" explained about medicines before giving it to them	10/1/2020 - 9/30/2021	16.0%	18.0%	17.5%	19.2%	18.6%	19.2%	19.0%	18.6%	19.3%	18.8%
↓ 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%	20.6%	17.8%	21.9%	18.8%	19.8%	21.4%	18.7%	19.9%
↑ Patients who reported that their room and bathroom were "Always" clean	10/1/2020 - 9/30/2021	83.0%	73.0%	70.6%	73.8%	70.8%	75.5%	70.0%	71.3%	72.8%	72.1%
↓ Patients who reported that their room and bathroom were "Usually" clean	10/1/2020 - 9/30/2021	13.0%	18.0%	17.3%	18.7%	19.1%	17.0%	19.1%	18.9%	19.7%	18.5%
↓ Patients who reported that their room and bathroom were "Sometimes" or "Never" clean	10/1/2020 - 9/30/2021	4.0%	9.0%	12.2%	7.5%	10.1%	7.5%	11.0%	9.8%	7.5%	9.4%
↑ Patients who reported that the area around their room was "Always" quiet at night	10/1/2020 - 9/30/2021	75.0%	63.0%	62.2%	61.9%	61.0%	62.0%	58.9%	66.5%	60.6%	61.9%
↓ Patients who reported that the area around their room was "Usually" quiet at night	10/1/2020 - 9/30/2021	22.0%	27.0%	27.8%	29.7%	30.8%	29.8%	31.0%	25.6%	30.5%	29.3%
↓ 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%	10.1%	8.4%	8.2%	8.2%	10.1%	7.8%	8.9%	8.8%

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CAH- Critical Access Hospital

-- insufficient cases or does not apply

		Top 10% in the Nation	National Average	Ballad Health	Aurora	Baptist Health	Carilion	Mercy Health	Texas Health	Unity Point	Peer Group
⬆ 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%	85.4%	89.8%	88.1%	86.7%	87.3%	86.2%	89.1%	87.5%
⬇ 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%	14.6%	10.2%	11.9%	13.3%	12.7%	13.8%	10.9%	12.5%
⬆ Patients who "Strongly Agree" they understood their care when they left the hospital	10/1/2020 - 9/30/2021	61.0%	52.0%	49.9%	54.5%	52.4%	49.8%	50.7%	52.4%	52.7%	51.8%
⬇ Patients who "Agree" they understood their care when they left the hospital	10/1/2020 - 9/30/2021	36.0%	42.0%	44.0%	40.8%	41.9%	45.3%	43.7%	40.8%	42.6%	42.7%
⬇ 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%	6.1%	4.7%	5.7%	4.8%	5.6%	6.8%	4.6%	5.5%
⬆ 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%	67.3%	74.0%	73.8%	72.8%	72.0%	75.1%	72.7%	72.5%
⬇ 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%	21.3%	19.2%	19.3%	19.7%	19.8%	17.0%	20.1%	19.5%
⬇ 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%	11.5%	6.8%	6.9%	7.5%	8.2%	7.9%	7.2%	8.0%
⬆ Patients who reported YES, they would definitely recommend the hospital	10/1/2020 - 9/30/2021	83.0%	71.0%	68.4%	71.8%	72.8%	72.2%	68.3%	74.8%	70.4%	71.2%
⬇ Patients who reported YES, they would probably recommend the hospital	10/1/2020 - 9/30/2021	15.0%	23.0%	24.3%	23.7%	22.8%	23.5%	26.1%	19.9%	25.1%	23.6%
⬇ Patients who reported NO, they would probably not or definitely not recommend the hospital	10/1/2020 - 9/30/2021	2.0%	6.0%	7.3%	4.5%	4.4%	4.3%	5.6%	5.3%	4.4%	5.1%
Colonoscopy Followup %											
⬆ OP29 Avg Risk Polyp Surveillance*	1/1/2020 - 12/31/2020	100.0%	90.0%	89.1%	98.3%	91.9%	96.0%	94.0%	91.7%	92.6%	93.8%
⬆ OP30 High risk Polyp Surveillance	RETIRED	--	--	--	--	--	--	--	--	--	--
Stroke Care %											
⬆ STK4 Thrombolytic Therapy	RETIRED	--	--	--	--	--	--	--	--	--	--
Heart Attack											
⬆ OP2 Fibrinolytic Therapy 30 minutes	RETIRED	--	--	--	--	--	--	--	--	--	--
⬇ OP3b Median Time to Transfer AMI	RETIRED	--	--	--	--	--	--	--	--	--	--

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-- insufficient cases or does not apply

		Top 10% in the Nation	National Average	Ballad Health	Aurora	Baptist Health	Carilion	Mercy Health	Texas Health	Unity Point	Peer Group
⬇ OP4 Aspirin at Arrival AMI Chest Pain	RETIRED	--	--	--	--	--	--	--	--	--	--
⬇ OP5 Median Time to ECG AMI and Chest Pain	RETIRED	--	--	--	--	--	--	--	--	--	--
Emergency Department Throughput											
⬇ Median Time from ED Arrival to Transport for Admitted Patients (ED1)	RETIRED	--	--	--	--	--	--	--	--	--	--
⬇ ED2b ED Decision to Transport	RETIRED	--	--	--	--	--	--	--	--	--	--
⬇ OP18b Avg time ED arrival to discharge	10/1/2020 - 9/30/2021	100.0	155.0	157.8	147.5	192.6	200.7	151.3	163.1	143.5	159.1
⬇ OP20 Door to Diagnostic Evaluation	RETIRED	--	--	--	--	--	--	--	--	--	--
⬇ 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	1.27	0.62	2.11	2.50	1.10	2.63	1.40	1.65
⬆ OP-23 Head CT results	10/1/2020 - 9/30/2021	93.0%	71.0%	70.2%	73.3%	66.5%	16.0%	57.3%	68.3%	72.6%	64.8%
Preventive Care %											
⬆ IMM-3 Healthcare workers given influenza vaccination	10/1/2020 - 3/31/2021	99.0%	86.0%	98.4%	96.8%	92.8%	97.8%	74.8%	84.1%	86.7%	86.4%
⬆ IMM-2 Influenza immunization	10/1/2020 - 3/31/2021	100.0%	79.0%	90.5%	--	78.0%	86.0%	80.5%	98.5%	87.5%	86.6%
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%	2.6%	0.3%	1.8%	1.5%	2.5%	3.2%	1.5%	1.9%
Surgical Complications Rate											

*CMS rule suspends January 2020 - June 2020 timeframe from datasets.

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-- insufficient cases or does not apply

		Top 10% in the Nation	National Average	Ballad Health	Aurora	Baptist Health	Carilion	Mercy Health	Texas Health	Unity Point	Peer Group
↓ **Hip and Knee Complications***	4/1/2018-3/31/2021	0.02	0.02	0.02	0.02	0.02	0.02	0.02	0.02	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	173.6	149.7	169.0	212.7	147.5	167.3	173.5	170.5
↓ **PSI90 Complications / patient safety for selected indicators**	7/1/2018 - 12/31/2019	0.83	1.00	0.97	1.04	0.96	0.99	0.90	0.92	0.95	0.96
Readmissions 30 Days Rate%											
↓ **READM30 AMI Acute myocardial infarction (AMI) 30day readmission rate***	7/1/2018-6/30/2021	13.9%	15.0%	15.8%	14.4%	14.9%	14.2%	15.4%	15.0%	15.1%	15.0%
↓ **READM30 CABG Coronary artery bypass graft (CABG) surgery 30day readmission rate***	7/1/2018-6/30/2021	10.5%	11.9%	12.2%	11.6%	11.7%	10.6%	12.5%	11.7%	10.7%	11.6%
↓ **READM30 COPD Chronic obstructive pulmonary disease 30day readmission rate***	7/1/2018-6/30/2021	18.6%	19.8%	19.7%	19.5%	19.5%	19.5%	20.0%	19.7%	19.9%	19.7%
↓ **READM30 HIPKNEE 30day readmission rate following elective THA / TKA***	7/1/2018-6/30/2021	3.5%	4.1%	4.3%	4.1%	4.1%	3.5%	4.2%	4.1%	4.0%	4.0%
↓ **READM30HF Heart Failure 30Day readmissions rate***	7/1/2018-6/30/2021	19.6%	21.3%	22.4%	20.2%	20.6%	20.9%	21.3%	21.2%	20.7%	21.0%
↓ **READM30PN Pneumonia 30day readmission rate++**	7/1/2018-6/30/2021	--	--	--	--	--	--	--	--	--	--
↓ **READM30 HOSPWIDE 30day hospitalwide allcause unplanned readmission**	7/1/2020 - 6/30/2021	14.0%	15.0%	15.6%	14.2%	14.4%	14.3%	15.3%	14.5%	14.0%	16.6%
Mortality 30 Days Death Rate %											
↓ **MORT30AMI Acute myocardial infarction (AMI) 30day mortality rate***	7/1/2018-6/30/2021	11.1%	12.4%	13.1%	12.1%	13.2%	12.3%	12.3%	12.3%	12.6%	12.5%
↓ **MORT30 CABG Coronary artery bypass graft surgery 30day mortality rate***	7/1/2018-6/30/2021	2.2%	2.9%	3.5%	2.6%	2.7%	2.7%	3.6%	3.2%	3.5%	3.1%
↓ **MORT30 COPD 30day mortality rate COPD patients***	7/1/2018-6/30/2021	7.1%	8.4%	8.9%	8.6%	9.1%	7.8%	8.2%	8.3%	9.1%	8.6%
↓ **MORT30HF Heart failure 30day mortality rate***	7/1/2018-6/30/2021	9.2%	11.3%	12.7%	11.6%	12.3%	12.6%	10.7%	11.5%	12.2%	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%	15.1%	12.8%	14.1%	16.4%	13.5%	13.5%	14.6%	14.3%
Use of Medical Imaging Outpatient											

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![BalladHealth It's your story. We're listening.]		Top 10% in the Nation	National Average	Ballad Health	Aurora	Baptist Health	Carilion	Mercy Health	Texas Health	Unity Point	Peer Group
OP-8 MRI Lumbar Spine for Low Back Pain	7/1/2020 - 6/30/2021	0.37	0.45	0.53	0.45	0.44	0.46	0.42	0.53	0.53	0.48
OP-10 Abdomen CT Use of Contrast Material	7/1/2019 - 12/31/2019	0.30	0.06	0.05	0.12	0.05	0.05	0.04	0.05	0.05	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	0.04	0.03	0.02	0.04	0.04	0.04	0.03

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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