

OREGON HEALTH AUTHORITY – Office of Health Analytics

Hospitals Transformation Performance Program – Baseline Year Final Report

This report provides the hospital with its final HTPP Incentive Measure results for Year 1 (“baseline year”) covering October 2013 through September 2014. The report includes:

- Numerators, denominators, and final baseline results for all measures.
- Indicator showing whether the hospital qualified for a payment on each individual measure (to qualify for payment, the hospital had to submit data adhering to the measure specifications and aligning with baseline submission guidance here: <http://www.oregon.gov/oha/analytics/Pages/Hospital-Baseline-Data.aspx>).
- Benchmark for Year Two of the program (if established). **Hospitals are not required to meet benchmarks for the baseline year; the benchmarks only apply in Year Two.** The benchmarks for some measures are to be determined (TBD). These benchmarks will be set in consultation with the Hospital Metrics Advisory Committee.
- Rate needed to meet the hospital's Improvement Target in Year 2 for the measures which already have established benchmarks.
- A payment summary including the total amount each measure is worth (across all hospitals), and the amount earned by your hospital for each individual measure.
- Total amount earned by hospital (floor payment plus payment for successfully submitting data for individual measures).

All exceptions and validation activity through March 2015 have been incorporated into these final results.

Final baseline performance is also reported in the Hospital Transformation Performance Program Baseline Year Report, available online later this month at: <http://www.oregon.gov/oha/metrics/Pages/index.aspx>.

Please contact Lori Coyner or Sara Kleinschmit with any questions.

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Adventist Medical Center

Measure	Hospital Data Baseline Year		Baseline / Year 1 Results	Hospital Qualifies for Baseline Payment	Statewide Performance (across all reporting hospitals)	Benchmark, if established* (applicable in Year 2 only)
	Numerator	Denominator				
Alcohol and drug misuse: screening, brief intervention, and referral for treatment (SBIRT) in the ED: (a) Screening Rate	445	744	59.8%	Yes	Statewide DRG hospital rate will not be calculated	12.0%
Alcohol and drug misuse: screening, brief intervention, and referral for treatment (SBIRT) in the ED: (b) Brief Intervention Rate	132	165	80.0%		Statewide DRG hospital rate will not be calculated	N/A
Follow-up after hospitalization for mental illness	309	446	69.3%	Yes	Statewide DRG hospital rate will not be calculated	70.0%
Hospital-wide all-cause readmission	1,606	12,177	13.2%	Yes	10.9%	6.1%
Hypoglycemia in inpatients receiving insulin	7	1,880	0.4%	Yes	3.9%	7.0%
Excessive anticoagulation with Warfarin	6	472	1.3%	Yes	1.5%	5.0%
Adverse drug events due to opioids	41	28,340	0.1%	Yes	0.5%	5.0%
HCAHPS, Staff always explained medicines	319	529	60.3%	Yes	63.6%	72.0%
HCAHPS, Staff gave patient discharge information	758	866	87.5%	Yes	88.8%	90.0%
CLABSI in all tracked units	2	5,490	0.36	Yes	0.80	TBD
CAUTI in all tracked units	6	7,019	0.85	Yes	1.56	TBD
Hospitals share ED visit information with primary care providers and other hospitals to reduce unnecessary ED visits (a) Notification to primary care	877	5,502	15.9%	Yes	Statewide DRG hospital rate will not be calculated	TBD
Hospitals share ED visit information with primary care providers and other hospitals to reduce unnecessary ED visits (b) Care guideline completion rate	5	3,951	0.1%		Statewide DRG hospital rate will not be calculated	N/A

Total number of measures for which this hospital will receive credit in the baseline year (year 1) of the program: 11

Does hospital qualify for floor payment (by achieving 75% of measures for which it qualifies): Yes

Measure specifications available at: <http://www.oregon.gov/oha/analytics/Pages/Hospital-Baseline-Data.aspx>

*Benchmarks subject to review by Hospital Performance Metrics Advisory Committee

Adventist Medical Center

	Share of Available Funds	Total Amount Available for Measure (to be shared across all hospitals achieving measure weighted by Medicaid discharges and days)	Number of Hospitals Qualifying for Baseline Payment	Hospital Qualifies for Baseline Payment	Total Dollar Amount Earned by Hospital
Alcohol and drug misuse: screening, brief intervention, and referral for treatment (SBIRT) in the ED	6.25%	\$8,500,000	17	Yes	\$626,233
Follow-up after hospitalization for mental illness	6.25%	\$8,500,000	28	Yes	\$412,573
Hospital-wide all-cause readmission	18.75%	\$25,500,000	28	Yes	\$1,237,718
Hypoglycemia in inpatients receiving insulin	6.25%	\$8,500,000	28	Yes	\$412,573
Excessive anticoagulation with Warfarin	6.25%	\$8,500,000	28	Yes	\$412,573
Adverse drug events due to opioids	6.25%	\$8,500,000	28	Yes	\$412,573
HCAHPS, Staff always explained medicines	9.38%	\$12,750,000	27	Yes	\$620,988
HCAHPS, Staff gave patient discharge information	9.38%	\$12,750,000	28	Yes	\$618,859
CLABSI in all tracked units	9.38%	\$12,750,000	28	Yes	\$618,859
CAUTI in all tracked units	9.38%	\$12,750,000	28	Yes	\$618,859
Hospitals share ED visit information with primary care providers and other hospitals to reduce unnecessary ED visits	12.50%	\$17,000,000		Yes	\$842,299
Total:	100.00%	\$136,000,000*			\$6,834,107
Total amount earned for all measures achieved					\$6,834,107
Floor payment (if qualify)					\$500,000
Total Hospital Payment (per measure funds + floor payment)					\$7,334,107

*Does not include \$14,000,000 in floor payments