

SKY LAKES MEDICAL CENTER					Year 2 Performance			Year 2 Target		Hospital meets Year 2 Benchmark/ Improvement? Yes/No
Measure	Baseline Performance				Numer	Denom	Year 2 Results	Benchmark	Improvement Target <sup>2</sup>	
	Original baseline <sup>1</sup>	Numer	Denom	Final baseline						
Alcohol and drug misuse: screening, brief intervention, and referral for treatment (SBIRT) in the ED: <i>(a) BRIEF screening rate</i> <sup>3</sup>	n/a	n/a	n/a	no submission	7,147	9,794	73.0%	57.0%	57.0%	Yes
Alcohol and drug misuse: screening, brief intervention, and referral for treatment (SBIRT) in the ED: <i>(b) Brief intervention rate</i>	n/a	n/a	n/a	no submission	0	0	no submission	n/a	n/a	n/a
Follow-up after hospitalization for mental illness	66.9%	3	5	60.0%	3	6	50.0%	70.0%	63.0%	No
Hospital-wide all-cause readmission	9.7%	560	5,803	9.7%	488	5,424	9.0%	8.0%	9.4%	Yes
Hypoglycemia in inpatients receiving insulin	2.6%	30	1,169	2.6%	35	1,079	3.2%	7.0%	7.0%	Yes
Excessive anticoagulation with Warfarin	1.2%	7	591	1.2%	8	475	1.7%	5.0%	5.0%	Yes
Adverse drug events due to opioids	0.3%	9	3,267	0.3%	12	3,169	0.4%	5.0%	5.0%	Yes
HCAHPS, Staff always explained medicines	46.3%	402	525	61.9%	414	540	66.4%	72.0%	63.9%	Yes
		246	520		300	535				
HCAHPS, Staff gave patient discharge information	75.7%	764	973	83.0%	770	951	84.7%	90.0%	85.0%	No
		848	970		833	943				
CLABSI in all tracked units (per 1000)	0.00	0	3,599	0.00	3	4,047	0.74	0.18	0.18	No
CAUTI in all tracked units (per 1000)	0.00	2	1,902	1.05	4	3,778	1.06	1.02	1.02	No
Hospitals share ED visit information with primary care providers and other hospitals to reduce unnecessary ED visits <i>(a) Notification to primary care</i>	81.9%	182	221	82.4%	3,052	3,723	82.0%	78.6%	78.6%	Yes
Hospitals share ED visit information with primary care providers and other hospitals to reduce unnecessary ED visits <i>(b) Care guideline completion rate</i>	0.0%	0	143	0.0%	1	2,601	0.0%	n/a	n/a	n/a
<b>Total number of measures for which hospital will receive credit in Year 2 of the program:</b>										<b>7</b>
<b>Does hospital qualify for the floor payment (by achieving 75 percent of the measures for which it qualifies)?</b>										<b>No</b>

<sup>1</sup> Results used in Year 1 (baseline year) closeout and payment. In some instances, data have been resubmitted (see "Final baseline"). Note the final baseline is used to calculate individual improvement targets and determine Year 2 achievement.

<sup>2</sup> Note that if hospital achieved benchmark in the baseline year, improvement target is equal to the benchmark. For more information about improvement target calculations can be found online (see web address below)

<sup>3</sup> For SBIRT, hospitals are allowed to report either the brief or full screening rate. There are separate benchmarks for each.

Measure specifications and more information are available online at: [www.oregon.gov/oha/analytics/Pages/Hospital-Baseline-Data.aspx](http://www.oregon.gov/oha/analytics/Pages/Hospital-Baseline-Data.aspx)

**SKY LAKES 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 payment	Hospital qualifies for performance year payment?	Total dollar amount earned by hospital
Alcohol and drug misuse: screening, brief intervention, and referral for treatment (SBIRT) in the ED	6.25%	\$9,281,250	23	Yes	\$204,599
Follow-up after hospitalization for mental illness	6.25%	\$9,281,250	22	No	\$0
Hospital-Wide All-Cause Readmission	18.75%	\$27,843,750	6	Yes	\$4,998,879
Hypoglycemia in inpatients receiving insulin	6.25%	\$9,281,250	26	Yes	\$184,844
Excessive anticoagulation with Warfarin	6.25%	\$9,281,250	28	Yes	\$179,006
Adverse Drug Events due to opioids	6.25%	\$9,281,250	28	Yes	\$179,006
HCAHPS, Staff always explained medicines	9.38%	\$13,921,875	6	Yes	\$1,309,615
HCAHPS, Staff gave patient discharge information	9.38%	\$13,921,875	11	No	\$0
CLABSI in all tracked units	9.38%	\$13,921,875	9	No	\$0
CAUTI in all tracked units	9.38%	\$13,921,875	22	No	\$0
Hospitals share ED visit information with primary care providers and other hospitals to reduce unnecessary ED visits	12.50%	\$18,562,500	24	Yes	\$408,080
<b>Total:</b>	<b>100.00%</b>	<b>\$148,500,000</b>			<b>\$7,464,029</b>
Total amount earned for all measures achieved					\$7,464,029
Floor payment (if qualify)					n/a
Total hospital payment (per measure funds + floor payment)					\$7,464,029