

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.**
- 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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Willamette Valley Medical Center						
Measure	Hospital Data Baseline Year			Hospital Qualifies for Baseline Payment	Statewide Performance (across all reporting hospitals)	Benchmark, if established* (applicable in Year 2 only)
	Numerator	Denominator	Baseline / Year 1 Results			
Alcohol and drug misuse: screening, brief intervention, and referral for treatment (SBIRT) in the ED: (a) Screening Rate	364	1,621	22.5%	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	0	0	0.0%		Statewide DRG hospital rate will not be calculated	N/A
Follow-up after hospitalization for mental illness *attributed statewide CCO rate	1,712	2,558	66.9%	Yes	Statewide DRG hospital rate will not be calculated	70.0%
Hospital-wide all-cause readmission	373	3,722	10.0%	Yes	10.9%	6.1%
Hypoglycemia in inpatients receiving insulin	76	1,082	7.0%	Yes	3.9%	7.0%
Excessive anticoagulation with Warfarin	8	390	2.1%	Yes	1.5%	5.0%
Adverse drug events due to opioids	82	10,810	0.8%	Yes	0.5%	5.0%
HCAHPS, Staff always explained medicines	347	501	69.3%	Yes	63.6%	72.0%
HCAHPS, Staff gave patient discharge information	974	1,079	90.3%	Yes	88.8%	90.0%
CLABSI in all tracked units	1	717	1.39	Yes	0.80	TBD
CAUTI in all tracked units	4	2,867	1.40	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	32	750	4.3%	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	0	470	0.0%		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

Willamette Valley Medical Center

	<i>Share of Available Funds</i>	<i>Total Amount Available for Measure (to be shared across all hospitals achieving measure weighted by Medicaid discharges and days)</i>	<i>Number of Hospitals Qualifying for Baseline Payment</i>	<i>Hospital Qualifies for Baseline Payment</i>	<i>Total Dollar Amount Earned by Hospital</i>
Alcohol and drug misuse: screening, brief intervention, and referral for treatment (SBIRT) in the ED	6.25%	\$8,500,000	17	Yes	\$150,427
Follow-up after hospitalization for mental illness	6.25%	\$8,500,000	28	Yes	\$98,908
Hospital-wide all-cause readmission	18.75%	\$25,500,000	28	Yes	\$296,725
Hypoglycemia in inpatients receiving insulin	6.25%	\$8,500,000	28	Yes	\$98,908
Excessive anticoagulation with Warfarin	6.25%	\$8,500,000	28	Yes	\$98,908
Adverse drug events due to opioids	6.25%	\$8,500,000	28	Yes	\$98,908
HCAHPS, Staff always explained medicines	9.38%	\$12,750,000	27	Yes	\$148,871
HCAHPS, Staff gave patient discharge information	9.38%	\$12,750,000	28	Yes	\$148,362
CLABSI in all tracked units	9.38%	\$12,750,000	28	Yes	\$148,362
CAUTI in all tracked units	9.38%	\$12,750,000	28	Yes	\$148,362
Hospitals share ED visit information with primary care providers and other hospitals to reduce unnecessary ED visits	12.50%	\$17,000,000		Yes	\$202,020
Total:	100.00%	\$136,000,000*			\$1,638,763
Total amount earned for all measures achieved					\$1,638,763
Floor payment (if qualify)					\$500,000
Total Hospital Payment (per measure funds + floor payment)					\$2,138,763

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