

April 11, 2011

Dear Physicians of Helen Ellis Memorial Hospital

Please see the enclosed Physician Quality Report. In order to assure that your quality scores are the best in the area, we have instituted several programs to monitor and alert you if a case may be outside of CMS's expectations for quality. Please understand that if we contact you regarding these quality measures, we are doing this in your best interest. This is an effort to partner with you to assure your quality scores will be exceptional when they are made public (Pay for Performance for physicians is expected to begin in 2011-2012 through CMS).

The quality scores that CMS is tracking include inpatient and outpatients with Surgery, AMI, Pneumonia, Chest Pain, and CHF.

To assure that your quality scores achieve 100%, we have instituted many programs and resources including:

- Real-Time checking of all patients and immediate notification of physician when appropriate by Nurses, Charge Nurses, and Managers
- 24/7 Admission/Discharge nurses concentrating on CMS Measures
- Pre-Printed Pre & Post Op Order Sheets based on CMS Measures for DVT Prophylaxis and Antibiotic Orders
- Nurse Screen/Physician DVT Order Sheet for Every Patient
- Safety Stop at Discharge to review any discharge related items not complete

OPPE

Ongoing Professional Practice Evaluation (OPPE) is a required activity. The evaluation starts with collecting data and reports which are then evaluated by the Chairperson of each Medical Staff Committee. This evaluation is done at least every six months. The reports in this letter are the primary source for your quality file in the medical staff office. You are welcome to review your file at any time.

Please contact me for details on these programs or any comments or questions at #5199

Sincerely,

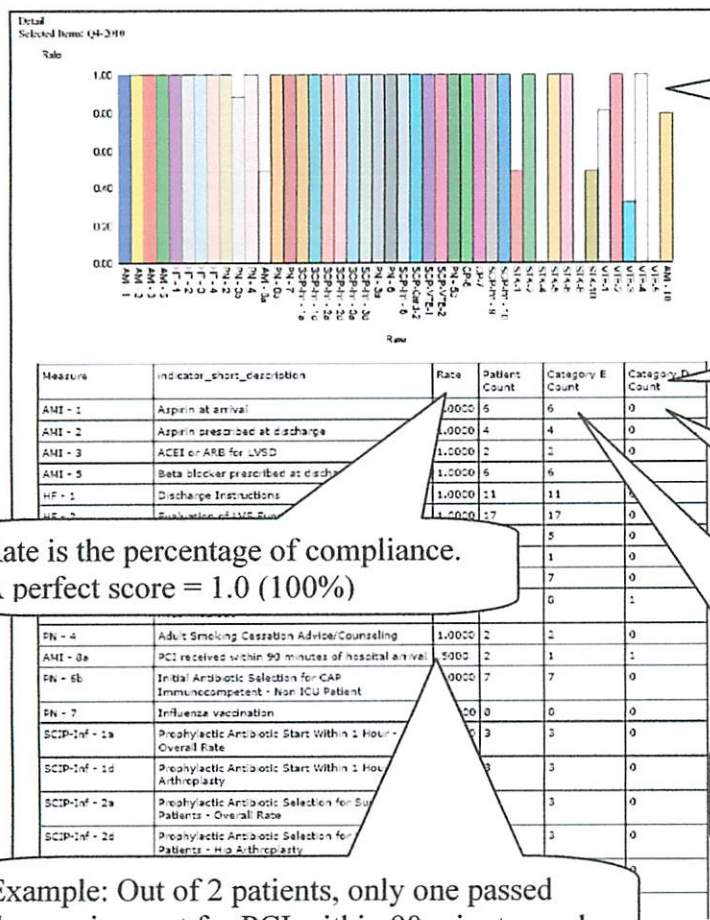


Craig Conrad RN, MBA, CPHQ
Director of Clinical Performance

INSTRUCTIONS

Core Measure Report

This report shows the compliance to Evidence Based standards (established by CMS) for patients that you were associated with at Helen Ellis Memorial Hospital for the 4th Quarter of 2010. This is the data that will most likely be made public by CMS. The measures are related to AMI, HF, Pneumonia, and Surgical patients. We also included patients that required DVT Prophylaxis and Stroke although these measures will not be officially scored until 2012. If you only had one or two types of patients, then your chart will have fewer measures. In this example, all the measures are shown.



Percent of compliance to CMS Best Practices for each measure of quality. 100% for all measures is expected.

This is a list of all measures and the number of patients that were in the population for each measure.

Rate is the percentage of compliance. A perfect score = 1.0 (100%)

Count of your patients that failed a quality measure (D Column).


Count of your patients that passed the measure (E Column).

Example: Out of 2 patients, only one passed the requirement for PCI within 90 minutes and one failed (50% Compliance)

INSTRUCTIONS

Ongoing Professional Practice Evaluation (OPPE) Report

This is a general report of activity and quality indicators for an entire year which compares your activity to the expected national averages or benchmarks.



WELLS FARGO MEMORIAL HOSPITAL - 100055
Specialty: FAMILY MEDICINE

Report Period:
01/2010 to 12/2010

PATIENT CASELOAD

Physician Discharges by Role

ATTENDING PHYSICIAN	99
SURGEON FOR THE PROCEDURE	24
CONSULTING PHYSICIAN	13
ADMITTING PHYSICIAN	99
Total Discharges for this Physician	113

Top Physician MS DRGs*

MS DRG	Cases
281 - Esoph. Op./Intr. PDX w/ MCC	27
282 - Esoph. Op./Intr. PDX w/ CC	17
283 - Esoph. Op./Intr. PDX w/ MCC	17
440 - Small PLS K. Infr. & MCC	5
339 - Amp. Op. on K. L. Infr. & MCC	5

Top Procedures*

AtgConsSurgTotal	
9904 - PACKED CELL TRANSFUSION	17 3 8 20
9993 - VENOUS CATHETER INS.	11 1 0 13
3722 - LEFT HEART CATH. AC CATH.	5 0 0 5
2885 - "L" HEART ANGIOCARDIOGRAM	5 0 0 5
2886 - COR. ARTERIOGRAM CATH.	5 0 0 5

Top Discharge Status / Dispositions*

Cases	
Discharged/transferred to skilled nursing facility (SNF) with Medicare certification in anticipation of skilled care	35
Discharged to home or self care (routine discharge)	31
Discharged/transferred to home under care of organized home health service organization in anticipation of skilled service	11
Discharged/transferred to a hospital rehabilitation facility (RRF) including rehabilitation distinct part unit of a hospital	7
Expired	5

QUALITY INDICATORS

Readmits*

Same day	1
Within 48 hrs	3
Days 1-30	17
Avg	4.4

LOS*

Avg observed	4.4
Avg expected	9.3
O/E ratio	0.47
Total Qualified Discharges	113

Complications*

Observed, Qual'fied	1
Expected	7.59
O/E ratio	0.13
Total Qualified Discharges	20

Mortality*

Raw	5
Observed, Qual'fied	2
Expected	1.00
O/E ratio	1.87
Total Qualified Discharges	27

NON CLINICAL METRICS

(to be filled out after printing)

Yes No

Does physician currently have an incident report pending or on file? If yes, please attach copy of report.

Does physician complete charting accurately and on time?

clean up to date on continuing medical education? Attach CME report.

physician have patient satisfaction scores on file? Please indicate score or surveys. Score _____

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We look at a year window of data, every six months. So in six months, we will report on the last half of 2010 and the first half of 2011.

Observed refers to your patient data/population.

Expected is the national benchmark or average.

All Expected and Observed rates are Risk Adjusted by DRG

Observed to Expected ratio you would like to see 1.0 or less. 1.0 means that you are the same as the National average.



HELEN ELLIS MEMORIAL HOSPITAL - 100055

MAHNEE LOUISE DINSMORE

Physician ID:1878
Specialty: OBSTETRICS & GYNECOLOGY

Report Period:
01/2010 to 12/2010

PATIENT CASELOAD

Physician Discharges by Role

ATTENDING PHYSICIAN	101
SURGEON FOR THE PROCEDURE	30
CONSULTING PHYSICIAN	3
ADMITTING PHYSICIAN	101
Total Discharges for this Physician	110

Top Physician MS-DRGs* Cases

983 - Exten OR unrel PDX sCC/M	45
766 - C-section w/o CC/MCC	25
765 - C-section w CC/MCC	14
982 - Exten OR unrel PDX w CC	10
767 - Vag del w ster or D&C	3

* Atg or Surg or Cons or Adm or Ref

Top Procedures* AtgConsSurgTotal*

7359 - MANUAL ASSISTED DEL NEC	57	0	11	57
741 - LOW CERVICAL CD	39	0	10	39
7569 - REP CURRENT OB LAC NEC	22	0	3	22
734 - MEDICAL INDUCTION LABOR	20	0	2	20
6639 - BILAT FALL DESTR NEC	9	0	1	9

* Atg or Surg or Cons

Top Discharge Status / Dispositions* Cases

Discharged to home or self care (routine discharge)	99
Discharged/transferred to a short term general hospital for inpatient care	2

* Atg or Adm

QUALITY INDICATORS

Readmits*

Same day	0
Within 48 hrs	0
Days 1-30	1

* Atg

LOS*

Avg observed	2.3
Avg expected	3.5
O/E ratio	0.66
Total Qualified Discharges	107

* Atg or Surg or Cons

Complications*

Observed, Qualified	0
Expected	1.00
O/E ratio	0.00
Total Qualified Discharges	4

* Atg or Surg or Cons

Mortality*

Raw	0
Observed, Qualified	0
Expected	0.01
O/E ratio	0.00
Total Qualified Discharges	47

* Atg or Surg or Cons

NON CLINICAL METRICS

(To be filled out after printing)

Yes No

- Does physician currently have an incident report pending or on file? If yes, please attach copy of report.
- Does physician complete charting accurately and on time?
- Is physician up to date on continuing medical education credits? Attach CME report.
- Does physician have patient satisfaction score or surveys on file? Please indicate score or attach surveys. Score: _____

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HELEN ELLIS MEMORIAL HOSPITAL - 100055

MAHNEE DINSMORE

Physician ID:6854
Specialty: SPECIALIST

Report Period:
01/2010 to 12/2010

PATIENT CASELOAD

Physician Discharges by Role

SURGEON FOR THE PROCEDURE	86
Total Discharges for this Physician	86

Top Physician MS-DRGs* Cases

983 - Exten OR unrel PDX sCC/M	34
766 - C-section w/o CC/MCC	17
765 - C-section w CC/MCC	12
795 - Normal newborn	9
982 - Exten OR unrel PDX w CC	9

* Atg or Surg or Cons or Adm or Ref

Top Procedures* AtgConsSurgTotal*

7359 - MANUAL ASSISTED DEL NEC	0	0	46	46
741 - LOW CERVICAL CD	0	0	29	29
7569 - REP CURRENT OB LAC NEC	0	0	19	19
734 - MEDICAL INDUCTION LABOR	0	0	18	18
640 - CIRCUMCISION	0	0	10	10

* Atg or Surg or Cons

QUALITY INDICATORS

Readmits*

Same day	
Within 48 hrs	
Days 1-30	

* Atg

LOS*

Avg observed	2.3
Avg expected	3.4
O/E ratio	0.69
Total Qualified Discharges	86

* Atg or Surg or Cons

Complications*

Observed, Qualified	0
Expected	0.07
O/E ratio	0.00
Total Qualified Discharges	1

* Atg or Surg or Cons

Mortality*

Raw	0
Observed, Qualified	0
Expected	0.00
O/E ratio	0.00
Total Qualified Discharges	33

* Atg or Surg or Cons

NON CLINICAL METRICS

(To be filled out after printing)

Yes No

- Does physician currently have an incident report pending or on file? If yes, please attach copy of report.
- Does physician complete charting accurately and on time?
- Is physician up to date on continuing medical education credits? Attach CME report.
- Does physician have patient satisfaction score or surveys on file? Please indicate score or attach surveys. Score: _____

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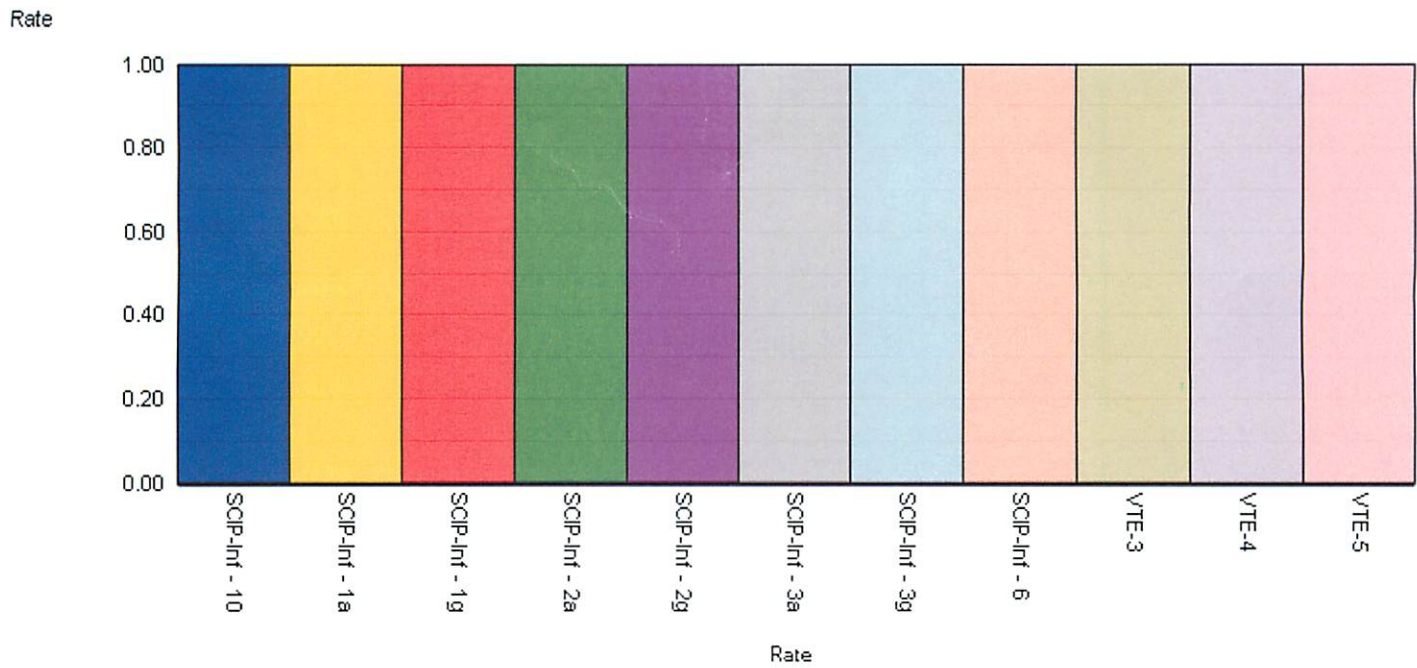
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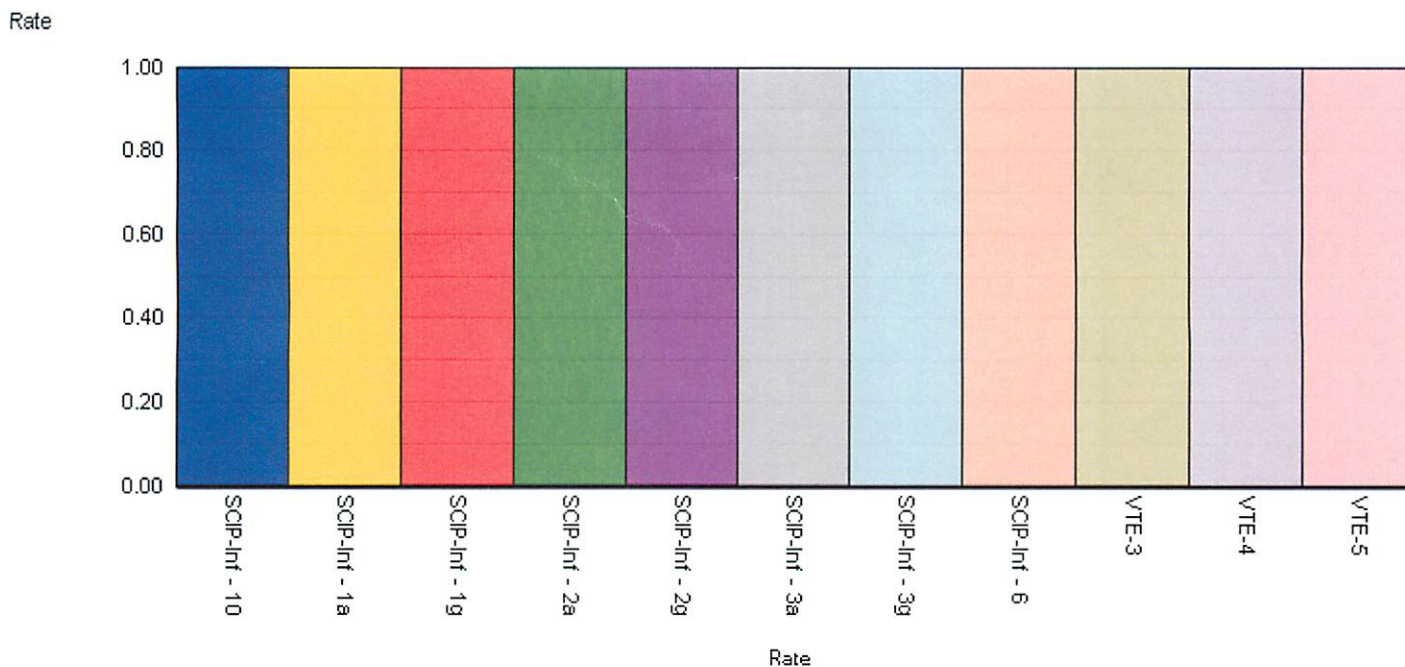
Detail
 Physician (any): DINSMORE MAHNEE LOUISE: Q4-2010



Measure	Description	Rate	Patient Count	Category E Count	Category D Count
SCIP-Inf - 10	Surgery Patients with Perioperative Temperature Management	1.0000	2	<u>2</u>	0
SCIP-Inf - 1a	Prophylactic Antibiotic Start Within 1 Hour - Overall Rate	1.0000	1	<u>1</u>	0
SCIP-Inf - 1g	Prophylactic Antibiotic Start Within 1 Hour - Hysterectomy	1.0000	1	<u>1</u>	0
SCIP-Inf - 2a	Prophylactic Antibiotic Selection for Surgical Patients - Overall Rate	1.0000	1	<u>1</u>	0
SCIP-Inf - 2g	Prophylactic Antibiotic Selection for Surgical Patients - Hysterectomy	1.0000	1	<u>1</u>	0
SCIP-Inf - 3a	Prophylactic Antibiotics End Within 24 Hours - Overall Rate	1.0000	1	<u>1</u>	0
SCIP-Inf - 3g	Prophylactic Antibiotics End Within 24 Hours - Hysterectomy	1.0000	1	<u>1</u>	0
SCIP-Inf - 6	Surgery Patients with Appropriate Hair Removal	1.0000	2	<u>2</u>	0
VTE-3	Venous Thromboembolism Patients with Anticoagulation Overlap Therapy	1.0000	1	<u>1</u>	0
VTE-4	Venous Thromboembolism Patients Receiving Unfractionated Heparin with Dosages/Platelet Count Monitoring by Protocol	1.0000	1	<u>1</u>	0
VTE-5	Venous Thromboembolism Discharge Instructions	1.0000	1	<u>1</u>	0

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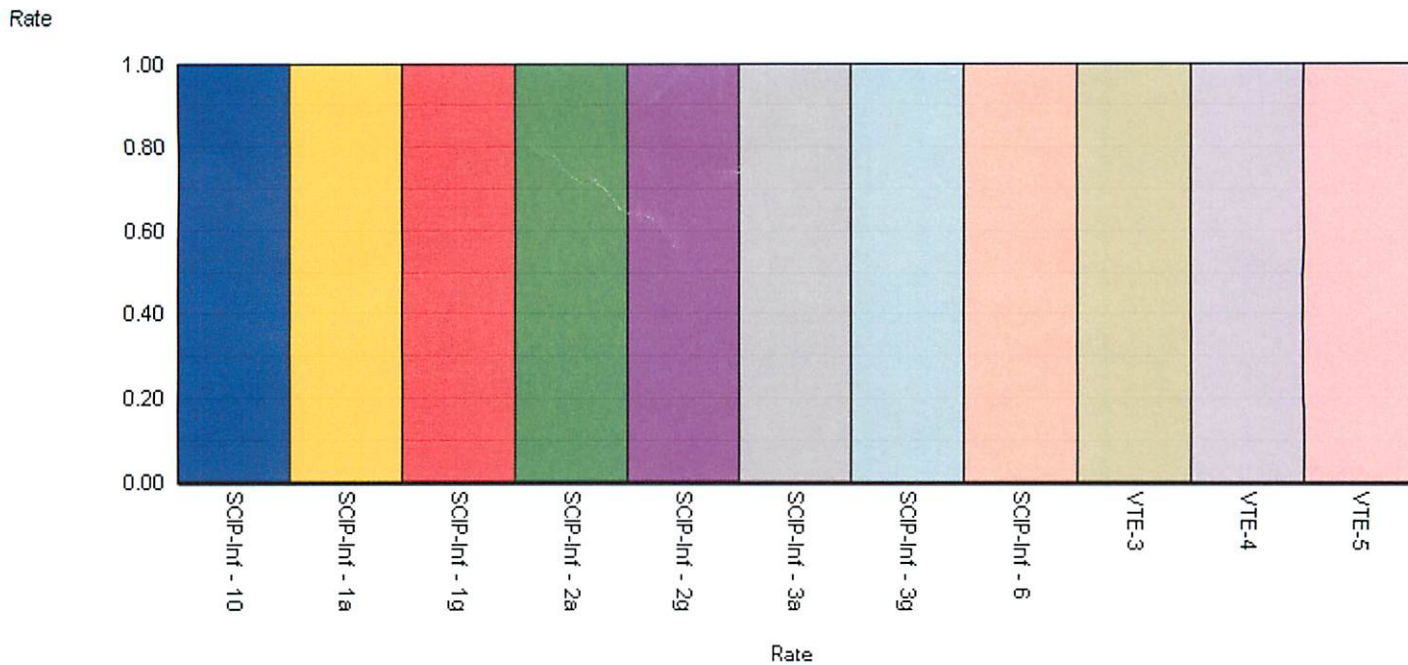
Detail
 Operating Physician: DINSMORE MAHNEE LOUISE: Q4-2010



Measure	Description	Rate	Patient Count	Category E Count	Category D Count
SCIP-Inf - 10	Surgery Patients with Perioperative Temperature Management	1.0000	2	<u>2</u>	0
SCIP-Inf - 1a	Prophylactic Antibiotic Start Within 1 Hour - Overall Rate	1.0000	1	<u>1</u>	0
SCIP-Inf - 1g	Prophylactic Antibiotic Start Within 1 Hour - Hysterectomy	1.0000	1	<u>1</u>	0
SCIP-Inf - 2a	Prophylactic Antibiotic Selection for Surgical Patients - Overall Rate	1.0000	1	<u>1</u>	0
SCIP-Inf - 2g	Prophylactic Antibiotic Selection for Surgical Patients - Hysterectomy	1.0000	1	<u>1</u>	0
SCIP-Inf - 3a	Prophylactic Antibiotics End Within 24 Hours - Overall Rate	1.0000	1	<u>1</u>	0
SCIP-Inf - 3g	Prophylactic Antibiotics End Within 24 Hours - Hysterectomy	1.0000	1	<u>1</u>	0
SCIP-Inf - 6	Surgery Patients with Appropriate Hair Removal	1.0000	2	<u>2</u>	0
VTE-3	Venous Thromboembolism Patients with Anticoagulation Overlap Therapy	1.0000	1	<u>1</u>	0
VTE-4	Venous Thromboembolism Patients Receiving Unfractionated Heparin with Dosages/Platelet Count Monitoring by Protocol	1.0000	1	<u>1</u>	0
VTE-5	Venous Thromboembolism Discharge Instructions	1.0000	1	<u>1</u>	0

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Detail
 Attending Physician: DINSMORE MAHNEE LOUISE: Q4-2010



Measure	Description	Rate	Patient Count	Category E Count	Category D Count
SCIP-Inf - 10	Surgery Patients with Perioperative Temperature Management	1.0000	2	<u>2</u>	0
SCIP-Inf - 1a	Prophylactic Antibiotic Start Within 1 Hour - Overall Rate	1.0000	1	<u>1</u>	0
SCIP-Inf - 1g	Prophylactic Antibiotic Start Within 1 Hour - Hysterectomy	1.0000	1	<u>1</u>	0
SCIP-Inf - 2a	Prophylactic Antibiotic Selection for Surgical Patients - Overall Rate	1.0000	1	<u>1</u>	0
SCIP-Inf - 2g	Prophylactic Antibiotic Selection for Surgical Patients - Hysterectomy	1.0000	1	<u>1</u>	0
SCIP-Inf - 3a	Prophylactic Antibiotics End Within 24 Hours - Overall Rate	1.0000	1	<u>1</u>	0
SCIP-Inf - 3g	Prophylactic Antibiotics End Within 24 Hours - Hysterectomy	1.0000	1	<u>1</u>	0
SCIP-Inf - 6	Surgery Patients with Appropriate Hair Removal	1.0000	2	<u>2</u>	0
VTE-3	Venous Thromboembolism Patients with Anticoagulation Overlap Therapy	1.0000	1	<u>1</u>	0
VTE-4	Venous Thromboembolism Patients Receiving Unfractionated Heparin with Dosages/Platelet Count Monitoring by Protocol	1.0000	1	<u>1</u>	0
VTE-5	Venous Thromboembolism Discharge Instructions	1.0000	1	<u>1</u>	0

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