



# Critical Access Hospital

CMS 5 Start Rating - HCAHPS

Timely and Effective Care

04/01/2021 – 03/31/2022

# CAH with receiving CMS 5 Star Rating

Critical Access Hospital	Star Rating	# Surveys	Response Rate %
ASPIRUS IRONWOOD HOSPITAL	3	104	22
UP HEALTH SYSTEM - BELL	4	215	27
MYMICHIGAN MEDICAL CENTER GLADWIN	4	117	38
OSF ST FRANCIS HOSPITAL AND MEDICAL GROUP	4	304	28
SPARROW CLINTON HOSPITAL	4	214	34
SPARROW EATON HOSPITAL	4	212	32
SPARROW IONIA HOSPITAL	4	230	31
SPECTRUM HEALTH GERBER MEMORIAL	4	276	22
SPECTRUM HEALTH PENNOCK	4	293	24
BRONSON LAKEVIEW HOSPITAL	5	168	26
MUNSON HEALTHCARE CHARLEVOIX HOSPITAL	5	321	29
ASCENSION STANDISH COMMUNITY HOSPITAL	5	115	28
SCHEURER HOSPITAL	5	141	42

# CAH with under 100 reported surveys

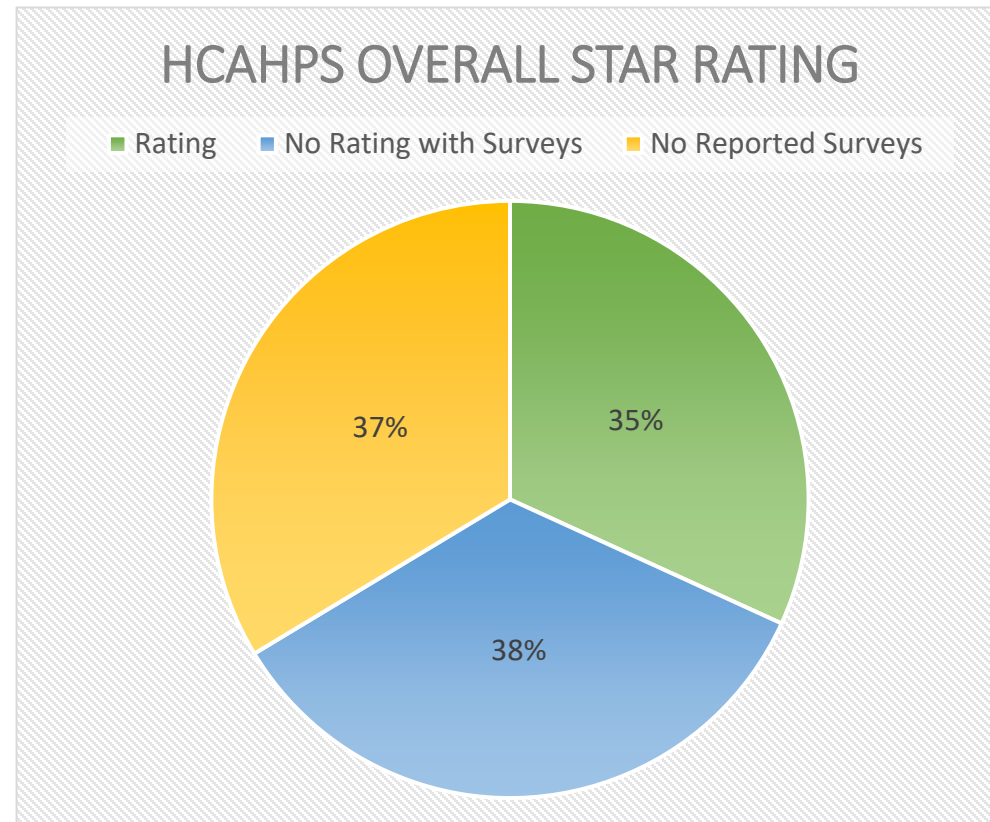
Critical Access Hospital	Star Rating	# Surveys	Response Rate %
MUNISING MEMORIAL HOSPITAL		28	41
HARBOR BEACH COMMUNITY HOSPITAL		46	52
MACKINAC STRAITS HOSPITAL AND HEALTH CENTER		54	32
BARAGA COUNTY MEMORIAL HOSPITAL		58	21
ASPIRUS IRON RIVER HOSPITAL & CLINICS, INC		70	30
ASCENSION BORGESS LEE HOSPITAL		76	27
SCHOOLCRAFT MEMORIAL HOSPITAL		81	31
MERCY HEALTH LAKESHORE CAMPUS		82	28
ASPIRUS KEWEENAW HOSPITAL AND CLINICS		89	19
ASCENSION BORGESS ALLEGAN HOSPITAL		90	30
MARLETTE REGIONAL HOSPITAL		91	38
HELEN NEWBERRY JOY HOSPITAL		96	35
EATON RAPIDS MEDICAL CENTER		97	31
HILLS & DALES GENERAL HOSPITAL		97	45

# CAH with no reportable data

ASPIRUS ONTONAGON HOSPITAL INC			
DECKERVILLE COMMUNITY HOSPITAL			
KALKASKA MEMORIAL HEALTH CENTER			
MCKENZIE HEALTH SYSTEM			
MCLAREN CARO REGION			
MCLAREN THUMB REGION			
PAUL OLIVER MEMORIAL HOSPITAL			
SHERIDAN COMMUNITY HOSPITAL			
SPECTRUM HEALTH KELSEY HOSPITAL			
SPECTRUM HEALTH REED CITY			

# CMS 5 STAR BREAKDOWN

Number of CAH	37	
Number of CAH with reported rating	13	35%
CMS 5 Star	4	31%
CMS 4 Star	8	62%
CMS 3 Star	1	8%
Number of CAH with completed surveys	27	73%
Number of CAH with completed surveys and no rating	14	38%
CAH within 10 surveys of 100	5	36%
CAH within 20 surveys of 100	3	21%
Number of CAH with no reported survey	10	27%



# CAH Timely and Effective Care

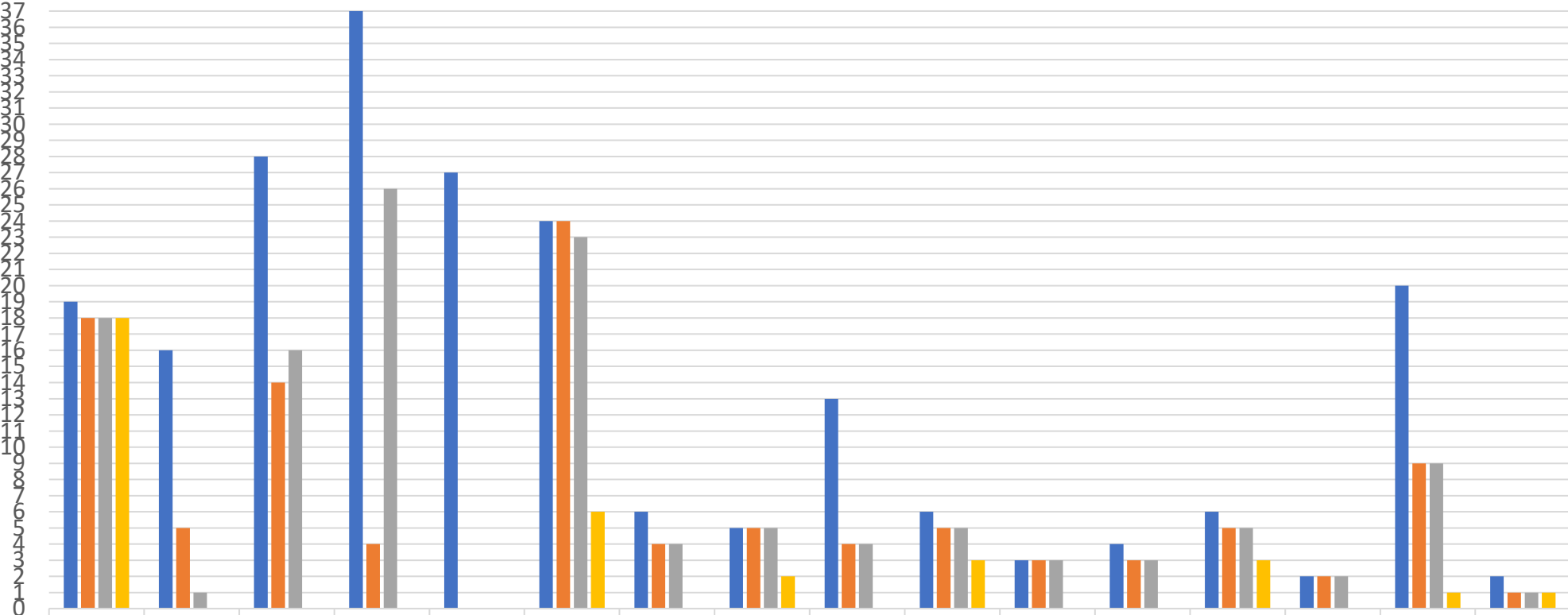
- 25 Reportable Measures
  - Reporting out 16 Measures (64%) for 2021 – 2022 cycle

Measure Name
Emergency department volume
Admit Decision Time to ED Departure Time for Admitted Patients - non psychiatric/mental health disorders
Percentage of healthcare personnel who completed COVID-19 primary vaccination series
Healthcare workers given influenza vaccination
Average (median) time patients spent in the emergency department before leaving from the visit A lower number of minutes is better
Average (median) time patients spent in the emergency department before leaving from the visit- Psychiatric/Mental Health Patients. A lower number of minutes is better
Left before being seen
Head CT results
Endoscopy/polyp surveillance: appropriate follow-up interval for normal colonoscopy in average risk patients
Safe Use of Opioids – Concurrent Prescribing
Appropriate care for severe sepsis and septic shock
Septic Shock 3-Hour Bundle
Septic Shock 6-Hour Bundle
Severe Sepsis 3-Hour Bundle
Severe Sepsis 6-Hour Bundle
Venous Thromboembolism Prophylaxis
Intensive Care Unit Venous Thromboembolism Prophylaxis

# CAH Top 4 Reported Measures

- Top 4 reported Measures
  - Healthcare workers given influenza Vaccination
    - 28 CAH reporting with 14 (50%) meeting the State Rate of 86% or better.
  - Average (median) time patients spent in the emergency department before leaving from the visit.
    - 37 CAH reporting with 4 (11%) meeting the State Rate of 93 minutes or less.
  - Average (median) time patients spent in the emergency department before leaving from the visit- Psychiatric/Mental Health Patients.
    - 27 CAH reporting with 0 (0%) meeting the State Rate of 97 minutes or less.
  - Left before being seen.
    - 24 CHA reporting with 24 (100%) meeting the State Rate of 4% or less.

# Timely and Effective Care Breakdown



	ED_2_St rata_1	HCP_CO VID_19	IMM_3	OP_18b	OP_2	OP_22	OP_23	OP_29	SAFE_US E_OF_O PIOIDS	SEP_1	SEP_SH_3HR	SEP_SH_6HR	SEV_SEP_3HR	SEV_SEP_6HR	VTE_1	VTE_2
■ Reporting number	19	16	28	37	27	24	6	5	13	6	3	4	6	2	20	2
■ Meet State Rate	18	5	14	4	0	24	4	5	4	5	3	3	5	2	9	1
■ Meet National Rate	18	1	16	26	0	23	4	5	4	5	3	3	5	2	9	1
■ Top 10%	18			0	0	6	0	2	0	3	0	0	3	0	1	1

■ Reporting number   ■ Meet State Rate   ■ Meet National Rate   ■ Top 10%



# What Measure Groups are used for the 5-star rating and how are they weighted?

Measure group	Weight used in calculation
Mortality	22%
Safety	22%
Readmission	22%
Patient Experience	22%
Timely & Effective Care	12%

Note that these percentage weights are out of 100%. If a hospital has no measures in a certain measure group, the weighted percentage is redistributed proportionally to the other measure groups.