

4300 ALTON RD | CCN-100034
MIAMI BEACH, FL 33140 | (305) 674-2121

Facility Type: Short-term
Ownership Type: Voluntary non-profit - Private
Emergency Service: Yes

Survey of Patients' Experience

Attention: Individual question scores appear only in the Preview Report and downloadable databases. Individual question scores are presented for informational purposes only; they are not official HCAHPS measures. A simple average of the individual questions that comprises a composite measure may not always match the composite score.

HCAHPS individual question scores based on fewer than 50 completed surveys **will not** be reported in the downloadable database.

HCAHPS Summary Star Rating



Completed Surveys	2,552
Survey Response Rate	14%

Star Rating:

More stars are better

"For more information on HCAHPS Star Ratings and Linear Scores, please see www.hcahpsonline.org"

*When HCAHPS scores are based on fewer than 25 completed surveys, scores WILL NOT be reported on Hospital Compare.

Communication with Nurses

Q3 (2022) - Q2 (2023)

Linear Score (1 - 100): 86

Composite (Q1 - Q3)	Facility	State	National
Always Patients who reported that their	70%	74%	79%

Communication with Nurses


Q3 (2022) - Q2 (2023)

★★★★★ Linear Score (1 - 100): 86

nurses 'Always' communicated well			
Usually Patients who reported that their nurses 'Usually' communicated well	20%	19%	16%
Sometimes/Never Patients who reported that their nurses 'Sometimes' or 'Never' communicated well	10%	7%	5%
Nurse Courtesy & Respect (Q1)	Facility	State	National
Always Patients who reported that their nurses "Always" treated them with courtesy and respect	77%	82%	86%
Usually Patients who reported that their nurses "Usually" treated them with courtesy and respect	17%	13%	11%
Sometimes/Never Patients who reported that their nurses "Sometimes" or "Never" treated them with courtesy and respect	6%	5%	3%
Nurse Listen (Q2)	Facility	State	National
Always Patients who reported that their nurses "Always" listened carefully to them	67%	71%	76%

Communication with Nurses

Q3 (2022) - Q2 (2023)

 Linear Score (1 - 100): 86

	Facility	State	National
Usually Patients who reported that their nurses "Usually" listened carefully to them	22%	21%	19%
Sometimes/Never Patients who reported that their nurses "Sometimes" or "Never" listened carefully to them	11%	8%	5%
Nurse Explain (Q3)			
Always Patients who reported that their nurses "Always" explained things in a way they could understand	65%	70%	75%
Usually Patients who reported that their nurses "Usually" explained things in a way they could understand	23%	21%	19%
Sometimes/Never Patients who reported that their nurses "Sometimes" or "Never" explained things in a way they could understand	12%	9%	6%

Star Rating:


More stars are better

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Communication with Doctors


Q3 (2022) - Q2 (2023)

 Linear Score (1 - 100): 87

Composite (Q5 - Q7)	Facility	State	National
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Communication with Doctors


Q3 (2022) - Q2 (2023)


 Linear Score (1 - 100): 87

Always Patients who reported that their doctors 'Always' communicated well	74%	74%	80%
Usually Patients who reported that their doctors 'Usually' communicated well	17%	18%	15%
Sometimes/Never Patients who reported that their doctors 'Sometimes' or 'Never' communicated well	9%	8%	5%
Doctor Courtesy & Respect (Q5)	Facility	State	National
Always Patients who reported that their doctors "Always" treated them with courtesy and respect	81%	82%	86%
Usually Patients who reported that their doctors "Usually" treated them with courtesy and respect	13%	13%	10%
Sometimes/Never Patients who reported that their doctors "Sometimes" or "Never" treated them with courtesy and respect	6%	5%	4%
Doctor Listen (Q6)	Facility	State	National
Always Patients who reported that their doctors "Always" listened	72%	72%	78%

Communication with Doctors

Q3 (2022) - Q2 (2023)

 Linear Score (1 - 100): 87

	Facility	State	National
carefully to them			
Usually Patients who reported that their doctors "Usually" listened carefully to them	18%	19%	16%
Sometimes/Never Patients who reported that their doctors "Sometimes" or "Never" listened carefully to them	10%	9%	6%
Doctor Explain (Q7)	Facility	State	National
Always Patients who reported that their doctors "Always" explained things in a way they could understand	69%	69%	75%
Usually Patients who reported that their doctors "Usually" explained things in a way they could understand	20%	22%	19%
Sometimes/Never Patients who reported that their doctors "Sometimes" or "Never" explained things in a way they could understand	11%	9%	6%

Star Rating:


More stars are better

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Responsiveness of Hospital Staff


Q3 (2022) - Q2 (2023)

 Linear Score (1 - 100): 76

Composite (Q4 & Q11)	Facility	State	National
Always Patients who reported that they 'Always' received help as soon as they wanted	53%	59%	66%
Usually Patients who reported that they 'Usually' received help as soon as they wanted	28%	26%	24%
Sometimes/Never Patients who reported that they 'Sometimes' or 'Never' received help as soon as they wanted	19%	15%	10%
Call Button (Q4)	Facility	State	National
Always Patients who reported that they "Always" received help after using the call button as soon as they wanted	50%	58%	65%
Usually Patients who reported that they "Usually" received help after using the call button as soon as they wanted	31%	28%	25%
Sometimes/Never Patients who reported that they "Sometimes" or "Never" received help after using the call button as soon as they wanted	19%	14%	10%
Bathroom Help (Q11)	Facility	State	National

Responsiveness of Hospital Staff

Q3 (2022) - Q2 (2023)

 Linear Score (1 - 100): 76

	Facility	State	National
Always Patients who reported that they "Always" received bathroom help as soon as they wanted	56%	60%	67%
Usually Patients who reported that they "Usually" received bathroom help as soon as they wanted	25%	25%	22%
Sometimes/Never Patients who reported that they "Sometimes" or "Never" received bathroom help as soon as they wanted	19%	15%	11%

Star Rating:


More stars are better

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Communication About Medicines


Q3 (2022) - Q2 (2023)

 Linear Score (1 - 100): 68

Composite (Q13 - Q14)	Facility	State	National
Always Patients who reported that staff 'Always' explained about medicines before giving it to them	52%	56%	62%
Usually Patients who reported that staff 'Usually' explained about medicines before giving it to	17%	19%	18%

Communication About Medicines

Q3 (2022) - Q2 (2023)

 Linear Score (1 - 100): 68

them			
Sometimes/Never Patients who reported that staff 'Sometimes' or 'Never' explained about medicines before giving it to them	31%	25%	20%
Medicine Explain (Q13)	Facility	State	National
Always Patients who reported that when receiving new medication the staff "Always" communicated what the medication was for	67%	70%	75%
Usually Patients who reported that when receiving new medication the staff "Usually" communicated what the medication was for	17%	17%	15%
Sometimes/Never Patients who reported that when receiving new medication the staff "Sometimes" or "Never" communicated what the medication was for	16%	13%	10%
Side Effects (Q14)	Facility	State	National
Always Patients who reported that when receiving new medication the staff "Always" discussed possible side effects	38%	42%	48%
Usually Patients who reported that when	17%	20%	22%

Communication About Medicines

Q3 (2022) - Q2 (2023)

★★★★★ Linear Score (1 - 100): 68

receiving new medication the staff "Usually" discussed possible side effects

Sometimes/Never

45%

38%

30%

Patients who reported that when receiving new medication the staff "Sometimes" or "Never" discussed possible side effects

Star Rating:

More stars are better

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Cleanliness of Hospital Environment

Q3 (2022) - Q2 (2023)

★★★★★ Linear Score (1 - 100): 86

	Facility	State	National
Always Patients who reported that their room and bathroom were 'Always' clean	70%	69%	73%
Usually Patients who reported that their room and bathroom were 'Usually' clean	19%	19%	18%
Sometimes/Never Patients who reported that their room and bathroom were 'Sometimes' or 'Never' clean	11%	12%	9%

Star Rating:


More stars are better

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Quietness of Hospital

Q3 (2022) - Q2 (2023)

 Linear Score (1 - 100): 82

	Facility	State	National
Always Patients who reported that the area around their room was 'Always' quiet at night	60%	57%	62%
Usually Patients who reported that the area around their room was 'Usually' quiet at night	28%	30%	28%
Sometimes/Never Patients who reported that the area around their room was 'Sometimes' or 'Never' quiet at night	12%	13%	10%

Star Rating:


More stars are better

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Discharge Information


Q3 (2022) - Q2 (2023)

 Linear Score (1 - 100): 79

Composite (Q16 - Q17)	Facility	State	National
Yes Patients who reported that YES, they were given information about what to do during their recovery at home	79%	83%	86%

Discharge Information

Q3 (2022) - Q2 (2023)


 Linear Score (1 - 100): 79

No Patients who reported that NO, they were not given information about what to do during their recovery at home	21%	17%	14%
Help After Discharge (Q16)	Facility	State	National
Yes Patients who reported that YES, they did discuss whether they would need help after discharge	75%	81%	84%
No Patients who reported that NO, they did not discuss whether they would need help after discharge	25%	19%	16%
Symptoms (Q17)	Facility	State	National
Yes Patients who reported that YES, they did receive written information about possible symptoms to look out for after discharge	82%	84%	87%
No Patients who reported that NO, they did not receive written information about possible symptoms to look out for after discharge	18%	16%	13%

Star Rating:


More stars are better

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Care Transition

Q3 (2022) - Q2 (2023)

 Linear Score (1 - 100): 77

Composite (Q20 - Q22)	Facility	State	National
Strongly Agree Patients who 'Strongly Agree' they understood their care when they left the hospital	48%	48%	52%
Agree Patients who 'Agree' they understood their care when they left the hospital	41%	43%	42%
Disagree/Strongly Disagree Patients who 'Disagree' or 'Strongly Disagree' they understood their care when they left the hospital	11%	9%	6%
Preference (Q20)	Facility	State	National
Strongly Agree Patients who "Strongly Agree" that the staff took my preferences into account when determining their health care needs	41%	41%	45%
Agree Patients who "Agree" that the staff took my preferences into account when determining my health care their needs	44%	48%	48%
Disagree/Strongly Disagree Patients who "Disagree" or "Strongly Disagree" that the staff	15%	11%	7%

Care Transition

Q3 (2022) - Q2 (2023)


☆☆☆☆ Linear Score (1 - 100): 77

took my preferences into account when determining their health care needs

Understanding (Q21)	Facility	State	National
Strongly Agree Patients who "Strongly Agree" that they understood their responsibilities in managing their health	48%	47%	51%
Agree Patients who "Agree" that they understood their responsibilities in managing their health	42%	45%	44%
Disagree/Strongly Disagree Patients who "Disagree" or "Strongly Disagree" that they understood their responsibilities in managing their health	10%	8%	5%
Medicine Purpose (Q22)	Facility	State	National
Strongly Agree Patients who "Strongly Agree" that they understood the purposes of their medications when leaving the hospital	54%	54%	58%
Agree Patients who "Agree" that they understood the purposes of their medications when leaving the hospital	37%	39%	37%
Disagree/Strongly	9%	7%	5%

Care Transition

Q3 (2022) - Q2 (2023)

 Linear Score (1 - 100): 77

Disagree

Patients who "Disagree" or "Strongly Disagree" that they understood the purposes of their medications when leaving the hospital

Star Rating:


More stars are better

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Overall Hospital Rating

Q3 (2022) - Q2 (2023)

 Linear Score (1 - 100): 84

	Facility	State	National
0-6 Rating Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest)	15%	12%	9%
7-8 Rating Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)	21%	23%	20%
9-10 Rating Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	64%	65%	71%

Star Rating:

More stars are better

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Willingness to Recommend this Hospital

Q3 (2022) - Q2 (2023)



Linear Score (1 - 100): 84

	Facility	State	National
Definitely Yes Patients who reported YES, they would definitely recommend the hospital	66%	65%	69%
Probably Patients who reported YES, they would probably recommend the hospital	23%	26%	25%
Definitely No Patients who reported NO, they would probably not or definitely not recommend the hospital	11%	9%	6%

Star Rating:

More stars are better

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Timely and Effective Care

Sepsis

	Facility Rate	Number of Patients	State Rate	National Rate	Top 10%
SEP-1 Q3 (2022) - Q2 (2023) Severe Sepsis and Septic Shock	67%(2)	93(2)	64%(25,26)	60%(25,26)	81%(25,26)
SEV-SEP-3HR Q3 (2022) - Q2 (2023) Severe Sepsis 3-Hour Bundle	86%(2)	94(2)	81%(25,26)	79%(25,26)	92%(25,26)
SEV-SEP-6HR Q3 (2022) - Q2 (2023) Severe Sepsis 6-Hour Bundle	92%(2)	51(2)	92%(25,26)	90%(25,26)	100%(25,26)
SEP-SH-3HR Q3 (2022) - Q2 (2023) Septic Shock 3-Hour Bundle	74%(2)	35(2)	70%(25,26)	69%(25,26)	96%(25,26)
SEP-SH-6HR Q3 (2022) - Q2 (2023) Septic Shock 6-Hour Bundle	81%(2)	21(2)	90%(25,26)	85%(25,26)	100%(25,26)

Footnotes:

- 2. Data submitted were based on a sample of cases/patients.
- 25. State and national averages include Veterans Health Administration (VHA) hospital data.
- 26. State and national averages include Department of Defense (DoD) hospital data.

Emergency Department Care

	Facility Rate	Number of Patients	State Rate	National Rate	Top 10%
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Emergency Department Care

	Facility Rate	Number of Patients	State Rate	National Rate	Top 10%
OP-18b Q3 (2022) - Q2 (2023) Median Time from ED Arrival to ED Departure for Discharged ED Patients An EDV-1 indicator will be shown in the volume category row of your facility.	184 mins.	360	166 mins.(25,26)	162 mins.(25,26)	101 mins.(25,26)
Low Volume	-	-	138 mins.(25,26)	125 mins.(25,26)	-
Medium Volume	-	-	158 mins.(25,26)	171 mins.(25,26)	-
High Volume	-	-	170 mins.(25,26)	212 mins.(25,26)	-
Very High Volume	EDV-1	-	177 mins.(25,26)	194 mins.(25,26)	-
OP-18c Q3 (2022) - Q2 (2023) Median Time from ED Arrival to ED Departure for Discharged ED Patients - Psychiatric/Mental Health Patients An EDV-1 indicator will be shown in the volume category row of your facility.	246 mins.	11	251 mins.(25)	268 mins.(25)	130 mins.(25)
Low Volume	-	-	226 mins.(25)	202 mins.(25)	-
Medium Volume	-	-	216 mins.(25)	269 mins.(25)	-
High Volume	-	-	243 mins.(25)	349 mins.(25)	-
Very High Volume	EDV-1	-	285 mins.(25)	333 mins.(25)	-
OP-22 Q1 (2022) - Q4 (2022) Left Without Being Seen	1%	109,925	2%(25,26)	3%(25,26)	0%(25,26)
OP-23 Q3 (2022) - Q2 (2023) Head CT or MRI Scan Results for Acute Ischemic Stroke or Hemorrhagic Stroke Patients who Received Head CT or MRI Scan Interpretation Within 45 Minutes of ED Arrival	33%(1)	3(1)	69%(25)	69%(25)	100%(25)

Emergency Department Care

	Facility Rate	Number of Patients	State Rate	National Rate	Top 10%
ED-2-Strata-1 Q1 (2022) - Q4 (2022) Admit Decision Time to ED Departure Time for Admitted Patients - non psychiatric/ mental health disorders	123 mins.	6,289	130 mins.	135 mins.	18 mins.
ED-2-Strata-2 Q1 (2022) - Q4 (2022) Admit Decision Time to ED Departure Time for Admitted Patients – psychiatric/mental health disorders	123 mins.	179	135 mins.	121 mins.	24 mins.

Footnotes:

- The number of cases/patients is too few to report.
25. State and national averages include Veterans Health Administration (VHA) hospital data.
26. State and national averages include Department of Defense (DoD) hospital data.

Healthcare Personnel Vaccination

	Facility's Adherence Rate	State Adherence Rate	National Adherence Rate
IMM-3 Q4 (2022) - Q1 (2023) Influenza Vaccination Coverage among Healthcare Personnel	84%	65%	81%
HCP_COVID-19 Q2 (2023) - Q2 (2023) COVID-19 Vaccination Coverage Among Healthcare Personnel	91%	81.6%	90.5%
IPFQR-HCP_COVID-19	82.8%	81.5%	89.7%

Healthcare Personnel Vaccination

	Facility's Adherence Rate	State Adherence Rate	National Adherence Rate
Q2 (2023) - Q2 (2023) COVID-19 Vaccination Coverage Among Healthcare Personnel			

Perinatal Care

	Facility Rate	Number of Patients	State Rate	National Rate	Top 10%
PC-01 Q3 (2022) - Q2 (2023) Elective Delivery	0%(2)	33(2)	2%(26)	2%(26)	0%(26)
PC-05 Q1 (2022) - Q4 (2022) Exclusive Breast Milk Feeding	N/A(5)	N/A(5)	N/A(5)	55%	85%

Footnotes:

- 2. Data submitted were based on a sample of cases/patients.
- 5. Results are not available for this reporting period.
- 26. State and national averages include Department of Defense (DoD) hospital data.

Cataracts

	Facility Rate	Number of Patients	State Rate	National Rate	Top 10%
OP-31 Q1 (2022) - Q4 (2022) Cataracts - Improvement in Patient's Visual Function within 90 Days Following Cataract Surgery	N/A(5)	N/A(5)	N/A(5)	97%	100%

Footnotes:

- 5. Results are not available for this reporting period.

Colonoscopy

	Facility Rate	Number of Patients	State Rate	National Rate	Top 10%
OP-29 Q1 (2022) - Q4 (2022) Appropriate Follow-Up Interval for Normal Colonoscopy in Average Risk Patients	64%	47	91%(25,26)	92%(25,26)	100%(25,26)

Footnotes:

- 25. State and national averages include Veterans Health Administration (VHA) hospital data.
- 26. State and national averages include Department of Defense (DoD) hospital data.

Opioid Use

	Facility Rate	Number of Patients	State Rate	National Rate	Top 10%
Safe Use of Opioids Q1 (2022) - Q4 (2022) Safe Use of Opioids – Concurrent Prescribing	10%	2,381	17%	15%	8%

Venous Thromboembolism

	Facility Rate	Number of Patients	State Rate	National Rate	Top 10%
VTE-1 Q1 (2022) - Q4 (2022) Venous Thromboembolism Prophylaxis	91%	9,005	92%(25)	89%(25)	99%(25)
VTE-2 Q1 (2022) - Q4 (2022) Intensive Care Unit Venous Thromboembolism Prophylaxis	97%	2,847	97%(25)	95%(25)	100%(25)

Footnotes:

25. State and national averages include Veterans Health Administration (VHA) hospital data.

Stroke Care

	Facility Rate	Number of Patients	State Rate	National Rate	Top 10%
STK-02 Q1 (2022) - Q4 (2022) Discharged on Antithrombotic Therapy	98%	83	95%(25)	96%(25)	100%(25)
STK-03 Q1 (2022) - Q4 (2022) Anticoagulation Therapy for Atrial Fibrillation/Flutter	N/A(5)	N/A(5)	72%	75%	100%
STK-05 Q1 (2022) - Q4 (2022) Antithrombotic Therapy by End of Hospital Day 2	88%	205	92%	92%	100%
STK-06 Q1 (2022) - Q4 (2022) Discharged on Statin Medication	94%	82	95%(25)	95%(25)	100%(25)

Footnotes:

5. Results are not available for this reporting period.

25. State and national averages include Veterans Health Administration (VHA) hospital data.

Structural Measures

Structural Measures

	Measure Response
SM-7 Q1 (2022) - Q4 (2022) Maternal Morbidity Structural Measure	Yes

Complications & Deaths

30 Day Death Rates

	Eligible Discharges	Facility Rate (95% int. limits)	National Rate/ Value	National Compare	Facility Compared to Averages				
					Better	Same	Worse	Too Few	
MORT-30-AMI Q3 (2019) - Q2 (2022) Acute Myocardial Infarction (AMI) 30-Day Mortality Rate	191(28)	12%(28) (9.5%(28), 15.0%(28))	12.6%	SAME(28)	State	1	140	1	37
					Nation	22	1,929	14	1,981
MORT-30-HF Q3 (2019) - Q2 (2022) Heart Failure (HF) 30-Day Mortality Rate	375(28)	8.8%(28) (6.9%(28), 11.2%(28))	11.8%	BETTER(28)	State	14	148	5	19
					Nation	215	2,808	97	1,398
MORT-30-PN Q3 (2019) - Q2 (2022) Pneumonia 30-Day Mortality Rate	280(28)	14%(28) (11.4%(28), 16.9%(28))	18.2%	BETTER(28)	State	19	147	9	14
					Nation	219	3,240	135	1,008
MORT-30-STK Q3 (2019) - Q2 (2022) Acute Ischemic Stroke (STK) 30-Day Mortality Rate	151	12.6% (9.5%, 16.3%)	13.9%	SAME	State	5	130	3	33
					Nation	76	2,035	43	1,901
MORT-30-COPD Q3 (2019) - Q2 (2022) Chronic Obstructive Pulmonary Disease (COPD) 30-Day Mortality Rate	70(28)	7%(28) (4.5%(28), 10.6%(28))	9.2%	SAME(28)	State	1	158	2	26
					Nation	24	2,569	20	1,885
MORT-30-CABG Q3 (2019) - Q2 (2022) 30-Day All-Cause Mortality Following Coronary Artery	53(28)	3.3%(28) (1.5%(28), 6.6%(28))	2.9%	SAME(28)	State	0	66	0	13
					Nation	2	880	6	209

30 Day Death Rates

	Eligible Discharges	Facility Rate (95% int. limits)	National Rate/ Value	National Compare	Facility Compared to Averages			
					Better	Same	Worse	Too Few

Bypass Graft (CABG) Surgery

Footnotes:

28. The results are based on the hospital or facility's data submissions. CMS approved the hospital or facility's Extraordinary Circumstances Exception request suggesting that results may be impacted.

CMS Patient Safety Indicators

	Eligible Discharges	Facility Rate/ Value (95% int. limits)	National Rate/ Value	National Compare	Facility Compared to Averages				
					Better	Same	Worse	Too Few	
PSI-3 Q3 (2020) - Q2 (2022) Pressure Ulcer Rate	6,818(28)	0.84(28) (0.35(28), 1.33(28))	0.59	SAME(28)	State	8	154	12	1
					Nation	70	2,973	206	56
PSI-4 Q3 (2020) - Q2 (2022) Death rate among surgical inpatients with serious treatable complications	97	156.43 (115.89, 196.96)	167.87	SAME	State	16	104	2	43
					Nation	62	1,510	45	1,059
PSI-6 Q3 (2020) - Q2 (2022) iatrogenic pneumothorax rate	7,779(28)	0.24(28) (0.07(28), 0.41(28))	0.25	SAME(28)	State	0	172	2	1
					Nation	1	3,267	8	32
PSI-8 Q3 (2020) - Q2 (2022) In-Hospital Fall With Hip	8,571(28)	0.09(28) (0.03(28), 0.14(28))	0.09	SAME(28)	State	0	174	0	1
					Nation	0	3,277	0	31

CMS Patient Safety Indicators

	Eligible Discharges	Facility Rate/ Value (95% int. limits)	National Rate/ Value	National Compare	Facility Compared to Averages				
					Better	Same	Worse	Too Few	
Fracture Rate									
PSI-9 Q3 (2020) - Q2 (2022) Postoperative Hemorrhage or Hematoma Rate	2,137(28)	3.62(28) (2.28(28), 4.96(28))	2.52	SAME(28)	State	1	165	2	3
					Nation	14	2,928	45	137
PSI-10 Q3 (2020) - Q2 (2022) Postoperative Acute Kidney Injury Requiring Dialysis Rate	974(28)	1.33(28) (0.11(28), 2.56(28))	1.57	SAME(28)	State	1	151	2	13
					Nation	4	2,608	25	340
PSI-11 Q3 (2020) - Q2 (2022) Postoperative Respiratory Failure Rate	977(28)	12.96(28) (8.61(28), 17.32(28))	8.86	SAME(28)	State	4	142	10	11
					Nation	57	2,482	111	327
PSI-12 Q3 (2020) - Q2 (2022) Perioperative Pulmonary Embolism (PE) or Deep Vein Thrombosis (DVT) Rate	2,326(28)	3.76(28) (1.99(28), 5.54(28))	3.63	SAME(28)	State	0	162	6	3
					Nation	16	2,902	74	135
PSI-13 Q3 (2020) - Q2 (2022) Postoperative Sepsis Rate	1,019(28)	4.91(28) (2.16(28), 7.66(28))	5.28	SAME(28)	State	2	152	1	11
					Nation	15	2,540	37	348
PSI-14 Q3 (2020) - Q2 (2022) Postoperative Wound Dehiscence Rate	539(28)	2.13(28) (0.3(28), 3.97(28))	2.01	SAME(28)	State	0	161	0	9
					Nation	0	2,614	9	397
PSI-15	1,976(28)	1.08(28)	1.10	SAME(28)	State	1	169	0	3

CMS Patient Safety Indicators

	Eligible Discharges	Facility Rate/ Value (95% int. limits)	National Rate/ Value	National Compare	Facility Compared to Averages				
					Better	Same	Worse	Too Few	
Q3 (2020) - Q2 (2022) Abdominopelvic Accidental Puncture or Laceration Rate		(0.11(28), 2.05(28))			Nation	3	2,931	34	181
PSI-90 Q3 (2020) - Q2 (2022) Patient Safety and Adverse Events Composite	Not Applicable	1.18(28) (0.94(28), 1.42(28))	1.00	SAME(28)	State	6	153	12	N/A(5)
					Nation	77	2,837	160	N/A(5)

Footnotes:

5. Results are not available for this reporting period.

28. The results are based on the hospital or facility's data submissions. CMS approved the hospital or facility's Extraordinary Circumstances Exception request suggesting that results may be impacted.

Infections

	Predicted	Reported	Days / Procedure	Facility Ratio (95% conf. int.)	State Ratio (95% conf. int.)	National Ratio	National Compare
HAI-1 Q3 (2022) - Q2 (2023) Central Line Associated Bloodstream Infection (ICU + select Wards)	10.671	19	9,963	1.781 (1.104, 2.729)	0.603 (0.561, 0.649)	0.772	WORSE
HAI-2 Q3 (2022) - Q2 (2023) Catheter Associated Urinary Tract Infections (ICU + select Wards)	17.948	12	12,683	0.669 (0.362, 1.137)	0.410 (0.378, 0.445)	0.610	SAME

Infections

	Predicted	Reported	Days / Procedure	Facility Ratio (95% conf. int.)	State Ratio (95% conf. int.)	National Ratio	National Compare
HAI-3 Q3 (2022) - Q2 (2023) SSI - Colon Surgery	5.703	16	227	2.806 (1.661, 4.459)	0.739 (0.676, 0.806)	0.893	WORSE
HAI-4 Q3 (2022) - Q2 (2023) SSI - Abdominal Hysterectomy	0.856	5	114	N/A(13) (N/A(13), N/A(13))	0.948 (0.804, 1.110)	0.966	N/A(13)
HAI-5 Q3 (2022) - Q2 (2023) MRSA Bacteremia	9.365	7	148,065	0.747 (0.327, 1.479)	0.825 (0.765, 0.888)	0.800	SAME
HAI-6 Q3 (2022) - Q2 (2023) Clostridium Difficile (C.Diff)	96.918	45	142,034	0.464 (0.343, 0.616)	0.300 (0.288, 0.313)	0.448	BETTER

Footnotes:

13. Results cannot be calculated for this reporting period.

Surgical Complications

	Eligible Discharges	Complication Rate (95% int. limits)	National Rate/ Value	National Compare	Facility Compared to Averages				
					Better	Same	Worse	Too Few	
COMP-HIP-KNEE Q2 (2019) - Q1 (2022) HIP/Knee Complication Rate (RSCR) following Total Hip/ Knee Arthroplasty	80(28)	3.8%(28) (2.2%(28), 6.4%(28))	3.2%	SAME(28)	State	1	124	0	40
					Nation	24	2,102	7	1,225

Footnotes:

28. The results are based on the hospital or facility's data submissions. CMS approved the hospital or facility's Extraordinary Circumstances Exception request suggesting that results may be impacted.

Unplanned Hospital Visits

Condition Specific Readmission

	Eligible Discharges	Facility Rate (95% int. limits)	National Rate/ Value	National Compare	Facility Compared to Averages				
					Better	Same	Worse	Too Few	
READM-30-AMI Q3 (2019) - Q2 (2022) Acute Myocardial Infarction (AMI) 30-Day Readmission Rate	205(28)	13.5%(28) (11.1%(28), 16.3%(28))	14%	SAME(28)	State	0	133	1	44
					Nation	6	1,798	12	1,936
READM-30-HF Q3 (2019) - Q2 (2022) Heart Failure (HF) 30-day Readmission Rate	448(28)	22.2%(28) (19.6%(28), 25.2%(28))	20.2%	SAME(28)	State	2	159	9	15
					Nation	58	3,066	63	1,334
READM-30-PN Q3 (2019) - Q2 (2022) Pneumonia (PN) 30-day Readmission Rate	290(28)	18.2%(28) (15.6%(28), 21.1%(28))	16.9%	SAME(28)	State	1	170	4	14
					Nation	10	3,544	39	1,016
READM-30-COPD Q3 (2019) - Q2 (2022) Chronic Obstructive Pulmonary Disease (COPD) 30-day Readmission Rate	74(28)	19.5%(28) (15.8%(28), 23.6%(28))	19.3%	SAME(28)	State	1	158	3	24
					Nation	2	2,645	17	1,836

Footnotes:

28. The results are based on the hospital or facility's data submissions. CMS approved the hospital or facility's Extraordinary Circumstances Exception request suggesting that results may be impacted.

Procedure Specific Readmission

	Eligible Discharges	Facility Rate (95% int. limits)	National Rate/ Value	National Compare	Facility Compared to Averages				
					Better	Same	Worse	Too Few	
READM-30-CABG Q3 (2019) - Q2 (2022) Hospital-Level 30-day All-Cause Unplanned Readmission Following Coronary Artery Bypass Graft Surgery (CABG)	51(28)	10.3%(28) (7.5%(28), 14.0%(28))	11%	SAME(28)	State	0	65	1	13
					Nation	0	878	4	215
READM-30-HIP-KNEE Q3 (2019) - Q2 (2022) 30-Day Readmission Rate Following Elective Primary Total Hip Arthroplasty (THA) and/or Total Knee Arthroplasty (TKA)	81(28)	4.5%(28) (2.9%(28), 6.8%(28))	4.3%	SAME(28)	State	0	121	0	45
					Nation	21	2,085	4	1,234

Footnotes:

28. The results are based on the hospital or facility's data submissions. CMS approved the hospital or facility's Extraordinary Circumstances Exception request suggesting that results may be impacted.

Hospital Wide Readmission

	Eligible Discharges	Facility Rate (95% int. limits)	National Rate/ Value	National Compare	Facility Compared to Averages				
					Better	Same	Worse	Too Few	
READM-30-HOSPWIDE Q3 (2021) - Q2 (2022) 30-Day Hospital-Wide All-	2,901	16.3% (14.9%, 17.2%)	14.6%	WORSE	State	9	140	30	5
					Nation	185	4,027	195	268

Hospital Wide Readmission

	Eligible Discharges	Facility Rate (95% int. limits)	National Rate/ Value	National Compare	Facility Compared to Averages			
					Better	Same	Worse	Too Few
Cause Unplanned Readmission Rate								

Inpatient Psychiatric Facility (IPF)- Readmission

	Eligible Discharges	Facility Rate (95% int. limits)	National Rate/ Value	National Compare	Facility Compared to Averages				
					Better	Same	Worse	Too Few	
READM-30-IPF Q3 (2020) - Q2 (2022) Rate of readmission after discharge from hospital	289	23.7% (20.1%, 27.7%)	19.6%	WORSE	State	0	38	29	0
					Nation	49	1,285	108	126

Procedure Specific Outcomes

	Eligible Discharges	Facility Rate/ Ratio	National Rate/ Ratio	National Compare	Facility Compared to Averages				
					Better	Same	Worse	Too Few	
OP-32 Q1 (2020) - Q4 (2022) Facility 7-Day Risk Standardized Hospital Visit Rate after Outpatient Colonoscopy	1,607	13 (9.7, 16.8)	13.2	SAME	State	0	144	0	33
					Nation	11	3,254	5	505
OP-35_ADM Q1 (2022) - Q4 (2022) Admissions (ADM) for Patients Receiving	224	10.2 (7.7, 13.1)	10.3	SAME	State	1	43	1	103
					Nation	14	1,447	61	1,825

Procedure Specific Outcomes

	Eligible Discharges	Facility Rate/ Ratio	National Rate/ Ratio	National Compare	Facility Compared to Averages				
					Better	Same	Worse	Too Few	
Outpatient Chemotherapy									
OP-35_ED Q1 (2022) - Q4 (2022) Emergency Department (ED) Visits for Patients Receiving Outpatient Chemotherapy	224	5.5 (3.8, 7.8)	5.4	SAME	State	1	44	0	103
					Nation	26	1,475	21	1,825
OP-36 Q1 (2022) - Q4 (2022) Hospital Visits after Hospital Outpatient Surgery	391	0.9 (0.6, 1.3)	Not Applicable	SAME	State	12	125	24	28
					Nation	211	2,438	228	941

Excess Days in Acute Care

	Eligible Discharges	Patients Included	Returned to a Hospital	Measr. Days (95% int. limits)	Compare	Facility Compared to Averages (Days)				
						Fewer	Same	More	Too Few	
EDAC-30-AMI Q3 (2019) - Q2 (2022) Excess Days in Acute Care after Hospitalization for Acute Myocardial Infarction	205	194	51	-21.6 (-37.6, -4.1)	BETTER	State	7	81	29	61
						Nation	142	1,066	314	2,230
EDAC-30-HF Q3 (2019) - Q2 (2022) Excess Days in Acute Care after Hospitalization for Heart Failure	448	343	130	47.3 (24.1, 70.8)	WORSE	State	7	103	60	15
						Nation	338	2,243	606	1,334
EDAC-30-PN	290	276	78	29.4 (8, 54.6)	WORSE	State	10	88	77	14

Excess Days in Acute Care

	Eligible Discharges	Patients Included	Returned to a Hospital	Measr. Days (95% int. limits)	Compare	Facility Compared to Averages (Days)				
						Fewer	Same	More	Too Few	
Q3 (2019) - Q2 (2022) Excess Days in Acute Care after Hospitalization for Pneumonia						Nation	415	2,336	842	1,016

Payment & Value of Care

Payment

	Eligible Discharges	Facility Payment (95% conf. int.)	National Average Payment	National Compare	Facility Compared to Averages				
					Greater	Same	Less	Too Few	
PAYM-30-AMI Q3 (2019) - Q2 (2022) Risk-Standardized Payment Associated with a 30-Day AMI Episode-of-Care for Acute Myocardial Infarction	185	\$25,433 (\$23,097, \$27,900)	\$27,314	SAME	State	11	120	3	38
					Nation	129	1,644	75	1,917
					Value of Care	Average Mortality and Average Payment			
PAYM-30-HF Q3 (2019) - Q2 (2022) Risk-Standardized Payment Associated with a 30-Day Episode of Care for Heart Failure	368	\$20,862 (\$19,529, \$22,255)	\$18,764	WORSE	State	52	104	4	18
					Nation	346	2,334	275	1,431
					Value of Care	Better Mortality and Higher Payment			
PAYM-30-PN Q3 (2019) - Q2 (2022) Risk-Standardized Payment Associated with a 30-Day Episode of Care for Pneumonia	264	\$23,479 (\$21,845, \$25,142)	\$20,362	WORSE	State	33	128	6	15
					Nation	444	2,502	462	1,066
					Value of Care	Better Mortality and Higher Payment			
PAYM-90-HIP-KNEE Q2 (2019) - Q1 (2022) Risk-Standardized Payment Associated with a 90-Day Episode of Care for THA/TKA	79	\$21,712 (\$19,896, \$23,620)	\$21,247	SAME	State	23	78	18	40
					Nation	261	1,247	536	1,216
					Value of Care	Average Complications and Average Payment			

Medicare Spending per Beneficiary

	Facility Rate	State Rate	National Rate	National Median Amount
MSPB-1 Q1 (2022) - Q4 (2022) Spending per hospital patient with Medicare	1.04	1.01	0.99	\$25,753.96

Note:

An MSPB performance of greater than one indicates that your hospital's MSPB Amount is more expensive than the U.S. National Median MSPB Amount.

A MSPB performance of less than one indicates that your hospital's MSPB Amount is less expensive than the National Median Amount.

Follow-Up Care

Transition Records

	Facility Rate	Number of Patients	State Rate	National Rate	Top 10%
TR1 Q1 (2022) - Q4 (2022) Transition Record with Specified Elements	26%	592	46%	62%	99%

Hospital-Based Inpatient Psychiatric Services

	Facility Rate	Number of Patients	State Rate	National Rate	Top 10%
HBIPS-5 Q1 (2022) - Q4 (2022) Patients discharged on multiple antipsychotic medications with appropriate justification	63%	27	69%	58%	100%

Follow-up After Psychiatric Hospitalization

	Facility Rate	Number of Patients	State Rate	National Rate	Top 10%
FAPH-7 Q3 (2021) - Q2 (2022) Follow-up after psychiatric hospitalization (7 days)	31.4%	105	31.8%	36.2%	54%
FAPH-30 Q3 (2021) - Q2 (2022) Follow-up after psychiatric hospitalization (30 days)	65.7%	105	55.4%	60%	77.9%

Medication Continuation Following Inpatient Psychiatric Discharge

	Facility Rate	Number of Patients	State Rate	National Rate	Top 10%
MedCont Q3 (2020) - Q2 (2022) Medication Continuation Following Inpatient Psychiatric Discharge	55.4%	249	66.4%	76.3%	87%

Substance Use Treatment

Substance Use

	Facility Rate	Number of Patients	State Rate	National Rate	Top 10%
SUB-2 Q1 (2022) - Q4 (2022) Alcohol Use Brief Intervention Provided or Offered	85%	60	77%	61%	100%
SUB-2a Q1 (2022) - Q4 (2022) Alcohol Use Brief Intervention	75%	55	80%	77%	100%
SUB-3 Q1 (2022) - Q4 (2022) Alcohol and other Drug Use Disorder Treatment Provided or Offered at Discharge	97%	139	75%	72%	100%
SUB-3a Q1 (2022) - Q4 (2022) Alcohol and other Drug Use Disorder Treatment Provided at Discharge	97%	139	68%	61%	99%

Tobacco Use

	Facility Rate	Number of Patients	State Rate	National Rate	Top 10%
TOB-2 Q1 (2022) - Q4 (2022) Tobacco Use Treatment Provided or Offered	88%	121	72%	71%	99%
TOB-2a Q1 (2022) - Q4 (2022)	38%	110	34%	40%	87%

Tobacco Use

	Facility Rate	Number of Patients	State Rate	National Rate	Top 10%
Tobacco Use Treatment (during the hospital stay)					
TOB-3 Q1 (2022) - Q4 (2022) Tobacco Use Treatment Provided or Offered at Discharge	76%	100	68%	58%	98%
TOB-3a Q1 (2022) - Q4 (2022) Tobacco Use Treatment at Discharge	65%	100	25%	16%	78%

Patient Safety

Hospital-Based Inpatient Psychiatric Services

		Rate	Hours	Days
HBIPS-2 Q1 (2022) - Q4 (2022) Hours of physical-restraint use	Facility	0.08	21.25	11,249
	State	0.09	2,330.81	1,035,372
	National	0.32	194,177.80	25,042,403
HBIPS-3 Q1 (2022) - Q4 (2022) Hours of seclusion	Facility	0.00	0	11,249
	State	0.11	2,765.05	1,035,372
	National	0.34	206,741.69	25,042,403

Preventive Care and Screening

Screening

	Facility Rate	Number of Patients	State Rate	National Rate	Top 10%
SMD Q1 (2022) - Q4 (2022) Screening for Metabolic Disorders	76%	292	84%	79%	100%

Immunization

	Facility Rate	Number of Patients	State Rate	National Rate	Top 10%
IPFQR-IMM-2 Q4 (2022) - Q1 (2023) Influenza Immunization	95%	285	72%	77%	99%

Use of Medical Imaging

Imaging Efficiency

	Number of Patients	Facility Rate	State Rate	National Rate
OP-8 Q3 (2021) - Q2 (2022) MRI Lumbar Spine for Low Back Pain	56	33.9%	34.7%	37.1%
OP-10 Q3 (2021) - Q2 (2022) Abdomen CT - Use of Contrast Material	1,377	9.7%	4.8%	6%
OP-13 Q3 (2021) - Q2 (2022) Cardiac Imaging for Preoperative Risk Assessment for Non-Cardiac Low-Risk Surgery	174	6.9%	4.8%	3.8%
OP-39 Q3 (2021) - Q2 (2022) Breast Cancer Screening Recall Rates	1,073	44.9%	13.5%	9.2%