

### MHCA Board Meeting

January 21, 2016  
 9:00 am – 3:00 pm  
 MHCA Office

Time	Item	Topic, Presenter	Type	Supporting Documents
9:00 am	I.	Call to Order <i>Jan Usset</i>	Action	
9:00 am	II.	Approval of Minutes	Action	Minutes
9:05 am	III.	Approval of Agenda	Action	
9:10 am	IV.	Treasurer Report <i>Austin Figge</i>	Action	December Report
9:15 am	V.	Team Reports A. Clinical Quality – Sue Morgan - PPS Plus recommendation B. Education - Allison C. MA – Kim Olson D. Medicare Team- Denise Edgett E. Membership – Linda Hespe F. Survey/Regulatory – Lisa Fowler G. Rehabilitation – Austin Figge	Information/Action	PPS Plus
10:00 am	VI.	Education Update <i>Allison Kindseth</i> A. Annual Meeting Update B. Annual Meeting Recognition Lunch (Jan) C. Fall Conference 1. Location Update 2. Name of Conference	Action	
10:20 am	VII.	Nominating Committee Report/Recommendation <i>Jan Usset</i>	Action	
10:30 am	VIII.	NAHC Membership <i>Kathy Messerli</i>	Action	
10:50 am	IX.	Payment Reform and Workforce Task Forces <i>Kathy Messerli</i> 1. Charge 2. Membership 3. Leaders	Discussion	Task Force Notes
11:30 am	X.	Lunch Break/Networking		
12:30 pm	XI.	Office Move <i>Kathy Messerli</i> A. De-brief from dinner	Discussion	

		B. Move updates		
1:00 pm	XII.	Membership Update <i>Kathy Messerli</i> A. Rebecca introduction B. Mergers – impact on growth C. Recruitment plan D. Region Development	Discussion	
1:30 pm	XIII.	Executive Director Updates <i>Kathy Messerli</i> A. Bonuses 1. 2015 outcome 2. Plan – March meeting B. Membership Brochure C. Updated information for board manuals 1. Protocols/Descriptions 2. Strategic Plan	Information	
2:00 pm	XIV.	PAC Support <i>Bill Amberg, PAC Chair</i>	Information	
2:15 pm	XV.	Legislative Priorities <i>Kevin Goodno</i> A. <i>Medical Cannabis</i> B. <i>Best Life 5%</i> C. <i>Spenddown</i> D. <i>Community Health Workers</i>	Discussion	
3:00 pm	XVII.	Adjourn	Action	

**Next Meeting:**  
**March 17, 9 am – 3 pm**  
**Location: TBD**

# Board of Directors Meeting Minutes

**Team:** MHCA Board of Directors

**Date:** 11/10/2015

**Time:** 2:00 pm

**Location:** Pre-fall conference 2400 Mystic Lake Blvd, Prior Lake, MN 55372

Conference Call-in Number: 1-877-366-0711

Conference Code: 11593782#

ATTENDANCE					
Jan Usset	<input checked="" type="checkbox"/> In Person <input type="checkbox"/> On Phone	Anne Major	<input checked="" type="checkbox"/> In Person <input type="checkbox"/> On Phone	Kim Olson	<input type="checkbox"/> In Person <input type="checkbox"/> On Phone
Jay Jones	<input checked="" type="checkbox"/> In Person <input type="checkbox"/> On Phone	Denise Edgett	<input checked="" type="checkbox"/> In Person <input type="checkbox"/> On Phone	Linda Hespe (recorder)	<input type="checkbox"/> In Person <input type="checkbox"/> On Phone
Austin Figge	<input checked="" type="checkbox"/> In Person <input type="checkbox"/> On Phone	Sue Morgan	<input checked="" type="checkbox"/> In Person <input type="checkbox"/> On Phone	Kathy Messerli	<input type="checkbox"/> In Person <input type="checkbox"/> On Phone

TOPIC	DISCUSSION/FINDINGS	CONCLUSION/ACTION/FOLLOWUP
Call to order; Approval of Minutes and Agenda	Jan Usset, BOD chair called the meeting to order 2:10 pm. Agenda add Bob Simone to meet with BOD Jan 27 <sup>th</sup> before Future of Home Care conference Jan 28 <sup>th</sup> . Let Kathy know if interested. MN Leadership Council on Aging Summit Dec 10 <sup>th</sup> . Let Kathy know if interested.	July minutes reviewed and approved as written. Anne made motion to approve, Jay second. All in favor. Agenda approved with additions. Denis made motion, Sue second. All in favor.
Team Reports	Clinical Quality – Sue: Working on breakout session for annual meeting, also looking for pre-conference options. Education—Anne: January Future of Homecare and Technology Expo coming up. Medicare—Denise: Annual meeting presentation, managing ADRs and new proposed rules. Membership—Linda: Member survey developed and sent out. Great response. Will review at next meeting to decide next steps. Legislative—Jay: Items being monitored at Dept of health and /or DHS: 5%, spendowns, cannabis, licensure – PCA and comprehensive license, unified Bill of Rights, Compassionate Care Act MA team—Kim: (Report by Kathy) looking at timely filing of PCA requests Rehab Team—Austin: looking at annual meeting topics and newsletter topics.	
Treasurer Report	Austin Figge reviewed MHCA financial reports September, year to date and budget. Financials looking healthy. Education income improved last quarter. Kathy presented 2016 Budget overview with projected deficit with onetime	Financials and 2016 budget approved. Anne made motion. Austin second. All in favor.

TOPIC	DISCUSSION/FINDINGS	CONCLUSION/ACTION/FOLLOWUP
Strategic Plan	<p>expenses related to office move. Education on Coding presenter change will save significant cost. Will evaluate quality of presenter but references good.</p> <p>Reviewed by Kathy. Strategic Plan changed from 1 year plan to 3 year. Strategic Plan updates:                      Quality measures -star ratings with Minnesota 49<sup>th</sup> place in states making this a priority focus.                      Increasing collaboration- move to new location with multiple opportunities for collaboration including MHA, LeadingAge, Council of Health Plans and others at that location.                      Payment reform task force in 2016                      Continue to promote homecare image through media                      Workforce taskforce                      Reimbursement                      Comprehensive license                      Help for members to improve grassroots efforts</p>	Strategic plan updates and changes approved. Denise mad motion, Sue second. All in favor.
ED Update	<p>Kathy updated BOD</p> <ul style="list-style-type: none"> <li>• Request for support for letter to Chairman Brady and Representative Kind at Health Subcommittee to preserve the Medicare Trust Fund by promoting innovation in payment and delivery of post acute care services and the proposed value-based purchasing program.</li> <li>• Request for support to Chairman Hatch and Ranking member Wyden on supporting telemedicine and remote patient monitoring</li> </ul> <p>Kathy reviewed "The Purpose of the Board" document and facilitated a discussion of who is responsible by action.</p> <p>Kathy reviewed</p> <ul style="list-style-type: none"> <li>• conference agenda</li> <li>• upcoming education</li> <li>• annual meeting with discussion of who might be able to do federal update</li> <li>• Membership survey results 174 surveys sent with 96 responses and answers reviewed</li> <li>• MHCA Physician Advisory group meeting postponed. Will be rescheduled</li> <li>• NAHC conference update</li> </ul>	Approval to support both letters. Anne made motion, Kim second. All in favor.

**MHCA Board of Directors Meeting Minutes CON'T.**

**Meeting Date: 11/10/2015**

TOPIC	DISCUSSION/FINDINGS	CONCLUSION/ACTION/FOLLOWUP
2016 Legislative Agenda	Kevin Goodno presented proposed Legislative Agenda for 2016. Medical Cannabis may now be less of an issue since the MDH licensing staff stated that homecare was included as a "facility" licensed under 144A. This will be confirmed. If this is no longer a priority, it will be replaced with Community Health Worker.	Legislative agenda approved. Denise made motion and Kim second. All in favor.
Executive Director evaluation	Jan reviewed compiled input from BOD and staff.	Approval of ED annual review and Jan to discuss with Kathy. Anne made motion, Denise second. All in favor.

NEXT MEETING DATE	
<b>Date:</b>	January 21, 2016
<b>Time:</b>	10:00 AM
<b>Location:</b>	MHCA, 1711 West County Road B, Suite 211S, St. Paul, MN 55113

**Minnesota HomeCare Association**  
**Balance Sheet**  
As of December 31, 2015

		Dec 31, 15
<b>ASSETS</b>		
<b>Current Assets</b>		
<b>Checking/Savings</b>		
	2100 · Checking North Star Bank	-22,481.34
	2102 · PrimeSweep	252,729.07
	<b>Total Checking/Savings</b>	230,247.73
	<b>Total Accounts Receivable</b>	76,338.94
<b>Other Current Assets</b>		
	Total 1200 · Mutual Funds-Reserve Account	363,027.63
	1499 · Undeposited Funds	3,974.00
	2500 · Prepaid Expenses	10,077.77
	<b>Total Other Current Assets</b>	377,079.40
	<b>Total Current Assets</b>	683,666.07
<b>Fixed Assets</b>		
	1300 · Office Equipment & Furniture	99,274.02
	1310 · Accumulated Depreciation	-94,470.15
	<b>Total Fixed Assets</b>	4,803.87
<b>TOTAL ASSETS</b>		<b>688,469.94</b>
<b>LIABILITIES &amp; EQUITY</b>		
<b>Liabilities</b>		
<b>Current Liabilities</b>		
	Total Accounts Payable	5,729.16
	Total Credit Cards	127.61
<b>Other Current Liabilities</b>		
	3500 · Accrued Vacation	2,192.53
	3510 · Accrued Payroll	8,213.94
	3600 · Deferred Revenue - Member Dues	
	3601 · Dues - Agencies - Maximum	88,025.00
	3602 · Dues - Agencies - Variable	71,987.24
	3603 · Dues - Agencies - Minimum	7,923.33
	3604 · Dues - Business Partner	25,545.00
	<b>Total 3600 · Deferred Revenue - Member Dues</b>	193,480.57
	3620 · Deferred Revenue - Registration	4,437.00
	3630 · Deferred Revenue - Exhibits	8,000.00
	3800 · Sales Tax Payable	-179.57
	3801 · *Sales Tax Payable	223.57
	<b>Total Other Current Liabilities</b>	216,368.04
	<b>Total Current Liabilities</b>	222,224.81
	<b>Total Liabilities</b>	222,224.81
<b>Equity</b>		
	1600 · Retained Earnings	405,577.16
	Net Income	60,667.97
	<b>Total Equity</b>	466,245.13
<b>TOTAL LIABILITIES &amp; EQUITY</b>		<b>688,469.94</b>

**Minnesota HomeCare Association**  
**Profit & Loss Budget Performance**  
 December 2015

		Dec 15	Budget	\$ Over Budget
<b>Income</b>				
	2185 · Bad Debt Expense	-175.00		
	Total 2200 · Investment Income	-5,605.92		
	Total 4000 · Membership Dues	35,205.82	34,414.34	791.48
	<b>4100 · Event Income</b>			
	Total 4110 · Annual Meeting	0.00	0.00	0.00
	<b>4120 · Fall Conference</b>			
	4121 · Conference Registrations	0.00	0.00	0.00
	4122 · Exhibitor/Sponsor Registration	0.00	0.00	0.00
	Total 4120 · Fall Conference	0.00	0.00	0.00
	4130 · Education Seminars/Webinars	15,701.10	6,047.72	9,653.38
	Total 4100 · Event Income	15,701.10	6,047.72	9,653.38
	<b>4200 · Sales</b>			
	4202 · Merchandise Sales	75.00	187.50	-112.50
	4203 · Revenue Share	490.22		
	4204 · Advertisement	0.00	0.00	0.00
	4205 · Non-Dues Revenue	2,237.20	0.00	2,237.20
	Total 4200 · Sales	2,802.42	187.50	2,614.92
	4300 · Other (Misc) Income	0.00		
	<b>Total Income</b>	<b>47,928.42</b>	<b>40,649.56</b>	<b>7,278.86</b>
	<b>Gross Profit</b>	<b>47,928.42</b>	<b>40,649.56</b>	<b>7,278.86</b>
	<b>Expense</b>			
	7000 · Other (Misc) Expenses	0.00	83.33	-83.33
	7100 · Merchandise Expenses	0.00	0.00	0.00
	<b>7200 · Event Expenses</b>			
	7210 · Annual Meeting Expenses	0.00	0.00	0.00
	7220 · Fall Conference Expenses	1,931.67	9,362.50	-7,430.83
	7230 · Education Seminars/Webinars	27,688.46	931.82	26,756.64
	Total 7200 · Event Expenses	29,620.13	10,294.32	19,325.81
	Total 7300 · Operations Expenses	43,181.83	47,315.34	-4,133.51
	<b>Total Expense</b>	<b>72,801.96</b>	<b>57,692.99</b>	<b>15,108.97</b>
	<b>Net Income</b>	<b>-24,873.54</b>	<b>-17,043.43</b>	<b>-7,830.11</b>



**Minnesota HomeCare Association**  
**Profit & Loss Budget Performance**  
December 2015

		Jan - Dec 15	YTD Budget	\$ Over Budget	Annual Budget
<b>Income</b>					
	2185 · Bad Debt Expense	-1,934.58			
	Total 2200 · Investment Income	-4,430.90			
	Total 4000 · Membership Dues	415,777.73	412,972.00	2,805.73	412,972.00
	4100 · Event Income				
	Total 4110 · Annual Meeting	128,016.71	134,150.00	-6,133.29	134,150.00
	4120 · Fall Conference				
	4121 · Conference Registrations	31,437.50	23,750.00	7,687.50	23,750.00
	4122 · Exhibitor/Sponsor Registration	11,875.00	7,825.00	4,050.00	7,825.00
	Total 4120 · Fall Conference	43,312.50	31,575.00	11,737.50	31,575.00
	4130 · Education Seminars/Webinars	157,370.10	138,400.00	18,970.10	138,400.00
	Total 4100 · Event Income	328,699.31	304,125.00	24,574.31	304,125.00
	4200 · Sales				
	4202 · Merchandise Sales	76.86	750.00	-673.14	750.00
	4203 · Revenue Share	2,446.82			
	4204 · Advertisement	4,350.00	4,750.00	-400.00	4,750.00
	4205 · Non-Dues Revenue	10,824.46	6,800.00	4,024.46	6,800.00
	Total 4200 · Sales	17,698.14	12,300.00	5,398.14	12,300.00
	4300 · Other (Misc) Income	2.00			
	<b>Total Income</b>	<b>755,811.70</b>	<b>729,397.00</b>	<b>26,414.70</b>	<b>729,397.00</b>
	<b>Gross Profit</b>	<b>755,811.70</b>	<b>729,397.00</b>	<b>26,414.70</b>	<b>729,397.00</b>
	<b>Expense</b>				
	7000 · Other (Misc) Expenses	68.57	1,000.00	-931.43	1,000.00
	7100 · Merchandise Expenses	0.00	300.00	-300.00	300.00
	7200 · Event Expenses				
	7210 · Annual Meeting Expenses	69,476.96	61,058.00	8,418.96	61,058.00
	7220 · Fall Conference Expenses	25,629.80	18,725.00	6,904.80	18,725.00
	7230 · Education Seminars/Webinars	91,520.41	69,641.00	21,879.41	69,641.00
	Total 7200 · Event Expenses	186,627.17	149,424.00	37,203.17	149,424.00
	Total 7300 · Operations Expenses	508,447.99	572,776.00	-64,328.01	572,776.00
	<b>Total Expense</b>	<b>695,143.73</b>	<b>723,500.00</b>	<b>-28,356.27</b>	<b>723,500.00</b>
	<b>Net Income</b>	<b>60,667.97</b>	<b>5,897.00</b>	<b>54,770.97</b>	<b>5,897.00</b>



## Minnesota HomeCare Association

# Profit & Loss Prev Year Comparison

January through December 2015

		Jan - Dec 15	Jan - Dec 14	\$ Change	% Change
<b>Income</b>					
	2185 · Bad Debt Expense	-1,934.58	5,849.90	-7,784.48	-133.07%
	Total 2200 · Investment Income	-4,430.90	17,505.64	-21,936.54	-125.31%
	Total 4000 · Membership Dues	415,777.73	403,025.54	12,752.19	3.16%
	<b>4100 · Event Income</b>				
	Total 4110 · Annual Meeting	128,016.71	127,963.50	53.21	0.04%
	<b>4120 · Fall Conference</b>				
	4121 · Conference Registrations	31,437.50	35,025.00	-3,587.50	-10.24%
	4122 · Exhibitor/Sponsor Registration	11,875.00	8,625.00	3,250.00	37.68%
	Total 4120 · Fall Conference	43,312.50	43,650.00	-337.50	-0.77%
	4130 · Education Seminars/Webinars	157,370.10	72,515.66	84,854.44	117.02%
	Total 4100 · Event Income	328,699.31	244,129.16	84,570.15	34.64%
	<b>4200 · Sales</b>				
	4202 · Merchandise Sales	76.86	650.00	-573.14	-88.18%
	4203 · Revenue Share	2,446.82	6,210.90	-3,764.08	-60.6%
	4204 · Advertisement	4,350.00	5,344.56	-994.56	-18.61%
	4205 · Non-Dues Revenue	10,824.46	6,417.32	4,407.14	68.68%
	Total 4200 · Sales	17,698.14	18,622.78	-924.64	-4.97%
	4300 · Other (Misc) Income	2.00	1,046.36	-1,044.36	-99.81%
	<b>Total Income</b>	<b>755,811.70</b>	<b>690,179.38</b>	<b>65,632.32</b>	<b>9.51%</b>
	<b>Gross Profit</b>	<b>755,811.70</b>	<b>690,179.38</b>	<b>65,632.32</b>	<b>9.51%</b>
<b>Expense</b>					
	7000 · Other (Misc) Expenses	68.57	1,097.57	-1,029.00	-93.75%
	<b>7200 · Event Expenses</b>				
	7210 · Annual Meeting Expenses	69,476.96	58,671.93	10,805.03	18.42%
	7220 · Fall Conference Expenses	25,629.80	20,641.93	4,987.87	24.16%
	7230 · Education Seminars/Webinars	91,520.41	41,024.06	50,496.35	123.09%
	7200 · Event Expenses - Other	0.00	603.92	-603.92	-100.0%
	Total 7200 · Event Expenses	186,627.17	120,941.84	65,685.33	54.31%
	Total 7300 · Operations Expenses	508,447.99	479,277.10	29,170.89	6.09%
	<b>Total Expense</b>	<b>695,143.73</b>	<b>601,316.51</b>	<b>93,827.22</b>	<b>15.6%</b>
	<b>Net Income</b>	<b>60,667.97</b>	<b>88,862.87</b>	<b>-28,194.90</b>	<b>-31.73%</b>

**DATE:** January 12, 2016  
**TO:** MHCA Board of Directors  
**FROM:** Clinical Quality Team  
**RE:** Recommendation for Quality Project

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### **Background**

As identified in the MHCA Strategic Plan, the Clinical Quality Team has been directed to research the cause of Minnesota's low Star Ratings. Following significant discussion and research, we are recommending three strategies:

1. Work collaboratively with PPS Plus Software and encourage MHCA members to participate in their free Community Edition of Benchmark Plus Software. The association would then receive data analysis regarding our quality challenges and be able to develop best practices that address our specific needs.
2. Provide best practices on the nine areas that are covered in Star Ratings. This will be done through Informer articles and an Annual Meeting presentation.
3. Strive to secure a graduate student to work with MHCA on the quality data analysis and evaluation of results. We have sent a proposal for consideration by the Bethel Capstone Project students.

### **PPS Plus Software Overview**

PPS Plus is interested in working together with MHCA to analyze data that will hopefully lead to a better understanding of our state's low star ratings. PPS Plus has a Community Edition of Benchmarks Plus Software that is free and could be accessed by all MHCA members. There would be no cost to MHCA.

There is also a Premium Edition that members can choose to join on a month to month basis (that would not be a part of our collaborative project, but an option for members).

PPS is currently partnering with Iowa, Nebraska and Kansas, providing the Associations' quarterly reports with all agencies that are participating (providing encrypted oasis data). These states are utilizing the data for lobbying efforts and education planning and I have received excellent feedback.

This system is web-based and allows detailed reports to be run as soon as data is processed online (e.g. potentially avoidable events). Cindy Neese, PPS Regulatory & Compliance Officer, wrote the Benchmarks Plus Software reports, which appear to be user friendly and the program is designed to be easy to navigate.

### **Technical Information from PPS**

The "sweeper" portion of our Benchmarks software is installed on a PC or server, is a windows-based service which processes and runs automatically after it is installed. The end-user doesn't have to do anything. It takes between 14 and 50 MB of memory when running (most PCs now have a GB or more). The service is set to automatic, so it will run after a reboot.

It acquires (sweeps) your submitted data and pushes it online. We may need an exemption to \*.benchmarksplus.com in the firewall, but that is not usually necessary.

It works on Windows 2000 and up, including Windows 10. It only needs 4MB RAM and 20MB disk space. We will need Windows local admin credentials to install on the requisite PC.

It will need to be installed on the computer that contains the final OASIS files that are submitted to State for reimbursement. I'll point it to the folder that contains those files. If multiple users save the OASIS files to a common location, we would need to install on the device that contains that shared folder.

We will need the main end-user to register for the software prior to the install, as that generates a unique key for their organization. After the install, they will have the ability to create multiple users using the Benchmarks Plus portal.

They'll be running reports via that online log in – end-users won't have to upload any information manually after the install. It's all automatic. As long as the person who makes the submissions continues to drop the files into the folder that our service is monitoring, they will get their data in nigh-on real time.

#### **Additional Information**

The Clinical Quality Team asked if the data could be divided by payer (Medicare and MA). At this point, PPS is committed to do the following:

- (1) The IT department will be working on analyzing all of our data we currently have in our database and share with you some information so you can what the results are as far as dual eligibility.

Also, they would provide us with data to review how MN compares with the rest of the nation on dual eligibility, once we partner and MN data has been entered.

#### **Recommendation**

The Clinical Quality Team recommends that MHCA partner with PPS Plus on this initiative. We believe that additional data analysis will be an important component in achieving our goal to raise Minnesota's ratings. It will be imperative to have Board of Director and Clinical Quality Team champions, as we encourage members to participate.

## Biloxi Branch 1

OUTCOME MEASURES	Observed	Risk Adjusted
<u>Improvement in Ambulation/Locomotion</u>	Branch: 75.8% State (MS): 70.8% BMP National: 67.7%	Branch: 76.3% State (MS): 68.2% BMP National: 67.2%
<u>Improvement in Bed Transferring</u>	Branch: 66.2% State (MS): 64.4% BMP National: 63.5%	Branch: 72.9% State (MS): 56.6% BMP National: 56.8%
<u>Improvement in Bathing</u>	Branch: 72.2% State (MS): 74.0% BMP National: 70.6%	Branch: 66.4% State (MS): 77.1% BMP National: 76.4%
<u>Improvement in Pain Interfering with Activity</u>	Branch: 58.0% State (MS): 69.0% BMP National: 69.2%	Branch: 56.7% State (MS): 69.7% BMP National: 70.5%
<u>Improvement in Dyspnea (Shortness of Breath)</u>	Branch: 59.7% State (MS): 71.8% BMP National: 68.0%	Branch: 60.9% State (MS): 69.0% BMP National: 66.8%
<u>Improvement in Status of Surgical Wounds</u>	Branch: 96.5% State (MS): 92.4% BMP National: 88.3%	Branch: 94.1% State (MS): 93.3% BMP National: 90.7%
<u>Improvement in Management of Oral Medications</u>	Branch: 64.2% State (MS): 67.2% BMP National: 57.4%	Branch: 60.0% State (MS): 60.2% BMP National: 61.6%
<u>Emergency Department Use without Hospitalization</u>	Branch: 3.9% State (MS): 3.6% BMP National: 3.8%	Branch: - State (MS): - BMP National: -
<u>Acute Care Hospitalization</u>	Branch: 26.4% State (MS): 30.7% BMP National: 27.1%	Branch: 24.8% State (MS): 29.8% BMP National: 28.8%

POTENTIALLY AVOIDABLE EVENTS	Observed	Risk Adjusted
<u>Emergent Care for Injury Caused by Fall</u>	Branch: 0.3% State (MS): 1.3% BMP National: 1.7%	Branch: 0.9% State (MS): 0.8% BMP National: 1.0%
<u>Emergent Care for Wound Infection</u>	Branch: 0.0% State (MS): 0.7% BMP National: 0.8%	Branch: 0.0% State (MS): 1.2% BMP National: 1.4%
<u>Emergent Care for Improper Med Adm.</u>	Branch: 0.0% State (MS): 0.1% BMP National: 0.2%	Branch: 0.1% State (MS): 0.1% BMP National: 0.2%
<u>Emergent Care for Hypo/Hyperglycemia</u>	Branch: 0.6% State (MS): 0.5% BMP National: 0.5%	Branch: 0.5% State (MS): 0.6% BMP National: 0.6%
<u>Substantial Decline in 3 or More ADLs</u>	Branch: 0.4% State (MS): 0.2% BMP National: 0.3%	Branch: 0.5% State (MS): 0.2% BMP National: 0.3%
<u>Discharged to Comm. Needing Wound Care</u>	Branch: 0.0% State (MS): 0.0% BMP National: 0.0%	Branch: 0.1% State (MS): 0.0% BMP National: 0.0%

**Biloxi Branch 1**

POTENTIALLY AVOIDABLE EVENTS	Observed	Risk Adjusted
<u>Discharged Needing Toilet Assistance.</u>	Branch: 0.0% State (MS): 0.0% BMP National: 0.0%	Branch: 0.1% State (MS): 0.0% BMP National: 0.0%
<u>Discharged to Comm. with Behav. Prob.</u>	Branch: 0.0% State (MS): 0.0% BMP National: 0.1%	Branch: 0.1% State (MS): 0.0% BMP National: 0.0%
<u>Development of Urinary Tract Infection</u>	Branch: 0.0% State (MS): 0.7% BMP National: 1.0%	Branch: 0.2% State (MS): 0.4% BMP National: 0.8%
<u>Increase in Number of Pressure Ulcers</u>	Branch: 0.0% State (MS): 0.4% BMP National: 0.5%	Branch: 0.1% State (MS): 0.3% BMP National: 0.4%
<u>Substantial Decline in Oral Med Mgmt.</u>	Branch: 0.0% State (MS): 0.3% BMP National: 0.5%	Branch: 0.1% State (MS): 0.2% BMP National: 0.4%
<u>Discharged with Unhealed St. II Pr. Ulcer</u>	Branch: 0.0% State (MS): 0.2% BMP National: 0.3%	Branch: 0.0% State (MS): 0.1% BMP National: 0.3%

PROCESS MEASURES	Observed	Risk Adjusted
<u>Timely Initiation of Care</u>	Branch: 97.7% State (MS): 94.6% BMP National: 94.5%	Branch: - State (MS): - BMP National: -
<u>Drug Ed. for All Meds Provided</u>	Branch: 99.7% State (MS): 98.2% BMP National: 96.9%	Branch: - State (MS): - BMP National: -
<u>Multifactor Fall Risk Assmt for All Pts. Who Can Ambulate</u>	Branch: 100.0% State (MS): 99.5% BMP National: 99.5%	Branch: - State (MS): - BMP National: -
<u>Depression Assessment Conducted</u>	Branch: 100.0% State (MS): 98.8% BMP National: 98.5%	Branch: - State (MS): - BMP National: -
<u>Influenza Immunization Received for Current Flu Season</u>	Branch: 92.2% State (MS): 75.6% BMP National: 76.1%	Branch: - State (MS): - BMP National: -
<u>Pneumococcal Vaccine Ever Received</u>	Branch: 83.8% State (MS): 74.0% BMP National: 77.3%	Branch: - State (MS): - BMP National: -
<u>Diabetic Foot Care and Pt. Ed. Implemented</u>	Branch: 99.4% State (MS): 98.5% BMP National: 96.9%	Branch: - State (MS): - BMP National: -
<u>Pain Assessment Conducted</u>	Branch: 100.0% State (MS): 99.4% BMP National: 99.4%	Branch: - State (MS): - BMP National: -
<u>Pain Interventions Implemented</u>	Branch: 100.0% State (MS): 99.5% BMP National: 99.3%	Branch: - State (MS): - BMP National: -
<u>Heart Failure Symptoms Addressed</u>	Branch: 100.0% State (MS): 98.6% BMP National: 98.5%	Branch: - State (MS): - BMP National: -
<u>Pressure Ulcer Prevention Implemented</u>	Branch: 100.0% State (MS): 99.1% BMP National: 98.7%	Branch: - State (MS): - BMP National: -

**Biloxi Branch 1****PROCESS MEASURES****Observed****Risk Adjusted**

PROCESS MEASURES	Observed	Risk Adjusted
<u>Pressure Ulcer Prevention in Plan of Care</u>	Branch: 100.0% State (MS): 99.6% BMP National: 99.1%	Branch: - State (MS): - BMP National: -
<u>Pressure Ulcer Risk Assessment Conducted</u>	Branch: 100.0% State (MS): 99.6% BMP National: 99.2%	Branch: - State (MS): - BMP National: -



## Biloxi Branch 1

**Number of Cases:** Prior - 696 Current - 968 State - 13319 BMP National - 104245

PATIENT DISCHARGE INFORMATION	Prior Avg.	Current Avg.	MS* Avg.	BMP* Avg.
<b>Length of Stay</b>				
LOS until discharge (in days)	30.51	33.28	65.84	52.49
LOS from 1 to 30 days (%)	63.8%	63.5%	44.8%	48.9%
LOS from 31 to 60 days (%)	27.4%	28.8%	29.3%	32.7%
LOS from 61 to 120 days (%)	7.0%	4.4%	14.5%	11.2%
LOS from 121 to 180 days (%)	1.3%	1.3%	5.1%	3.4%
LOS more than 180 days (%)	0.4%	1.9%	6.4%	3.8%
<b>Reason for Emergent Care</b>				
Improper medications (%)	0.8%	1.3%	1.5%	1.3%
Injury from fall (%)	7.9%	12.8%	6.0%	8.5%
Respiratory infection (%)	7.1%	6.7%	9.9%	8.7%
Other respiratory (%)	11.1%	7.4%	11.5%	11.2%
Heart failure (%)	7.1%	6.0%	10.1%	7.3%
Cardiac dysrhythmia (%)	4.0%	3.4%	2.8%	2.6%
Myocardial infarction (%)	5.6%	1.3%	3.8%	3.9%
Other heart disease (%)	1.6%	2.0%	1.1%	1.6%
Stroke (CVA) or TIA (%)	0.8%	1.3%	2.2%	2.3%
Hypo/Hyperglycemia (%)	1.6%	0.7%	2.0%	2.0%
GI bleeding, obstruction, etc. (%)	6.3%	2.0%	3.9%	3.9%
Dehydration, malnutrition (%)	7.1%	6.0%	4.8%	5.0%
Urinary tract infection (%)	4.8%	6.7%	7.3%	6.6%
IV catheter-related infection (%)	0.0%	0.0%	0.5%	0.5%
Wound infection (%)	4.8%	4.0%	4.8%	4.0%
Uncontrolled pain (%)	8.7%	6.7%	3.9%	5.4%
Acute mental/behav. problem (%)	0.0%	6.0%	3.5%	3.4%
Deep vein thrombosis (%)	0.8%	0.7%	1.6%	1.2%
Other (%)	37.3%	38.9%	36.8%	36.7%
No emergent care (%)	80.2%	83.7%	77.7%	78.5%
<b>Reason for Hospitalization</b>				
Improper medications (%)	1.1%	0.4%	1.0%	1.0%
Injury from fall (%)	4.9%	7.3%	4.3%	6.2%
Respiratory infection (%)	6.6%	6.9%	9.9%	8.9%
Other respiratory (%)	9.3%	8.6%	10.2%	10.7%
Heart failure (%)	8.7%	9.0%	9.9%	7.4%
Cardiac dysrhythmia (%)	2.7%	3.0%	2.7%	2.5%
Myocardial infarction (%)	4.4%	1.7%	3.0%	3.4%
Other heart disease (%)	2.7%	1.3%	1.0%	1.6%
Stroke (CVA) or TIA (%)	2.2%	1.3%	2.1%	2.2%
Hypo/Hyperglycemia (%)	1.1%	0.0%	1.7%	1.8%
GI bleeding, obstruction, etc. (%)	7.7%	1.7%	3.1%	3.5%
Dehydration, malnutrition (%)	6.0%	5.6%	4.4%	4.7%
Urinary tract infection (%)	5.5%	6.0%	6.4%	6.2%
IV catheter-related infection (%)	0.5%	0.0%	0.3%	0.2%
Wound infection (%)	5.5%	3.4%	5.7%	5.3%
Uncontrolled pain (%)	8.7%	3.9%	2.7%	4.1%
Acute mental/behav. problem (%)	1.1%	3.4%	3.4%	3.4%
Deep vein thrombosis (%)	1.1%	0.9%	1.5%	1.3%
Scheduled visit (%)	7.7%	9.4%	5.9%	5.3%
Other (%)	32.8%	38.6%	37.7%	35.7%
No hospitalization (%)	70.6%	74.5%	71.4%	73.5%

\*Columns marked with State\* Avg or BMP\* Avg represent state or national Benchmarks Plus values based on the data available in the Benchmarks Plus database.



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**Workforce and Payment Reform Notes**  
**Board Retreat 2015**

**Workforce**

Outcomes:

- a. Increased awareness/interest in home care
- b. Increased collaborations with schools
- c. Increased number of programs and graduates in nursing, therapy and CNA
- d. Increased clinicals in home care settings

Tactics:

- a. Make home care profession appealing to teens and young adults
- b. Research and share scholarship and funding resources with members
- c. Collaborate with organizations to build health care workforce
  - a. Para-Medicine
  - b. Parish Nurses
  - c. Unpaid Caregivers

**Payment Reform**

Outcome:

- a. Increased awareness within membership
- b. Increased Resources and toolkits for members

Tactics:

- a. Provide Information to members
- b. Educational programs for members
- c. Collaborate with other organizations, with as MHA and LeadingAge, on initiative