

August 01, 2018

Terry G. Kilgore
3273 Manville Rd.
Gate City, VA 24251

Dear Chairman Kilgore,

Thank you for forwarding the Southwest Virginia Health Authority comments on the proposed annual priorities related to the quality improvement. Enclosed is a letter Melanie Stanton, Vice President for Performance Improvement & Quality, Ballad Health, submitted to Commissioner Oliver along with our Quality Priority Metrics explaining how the Health Authority's input will be addressed.

Our Quality Department is working on incorporating the suggestions relative to:

- Quality. Under "2. Opioids a. Opioid prescribing rate"
- Communication

The input regarding "Investments" is being incorporated into Ballad's Health Plans. Jeff Mitchell did clarify via email on 7/27/18 that "Investments" does not need to be reported on a monthly basis, like the Quality Priority Metrics, rather it can be incorporated as a metric for monitoring purposes.

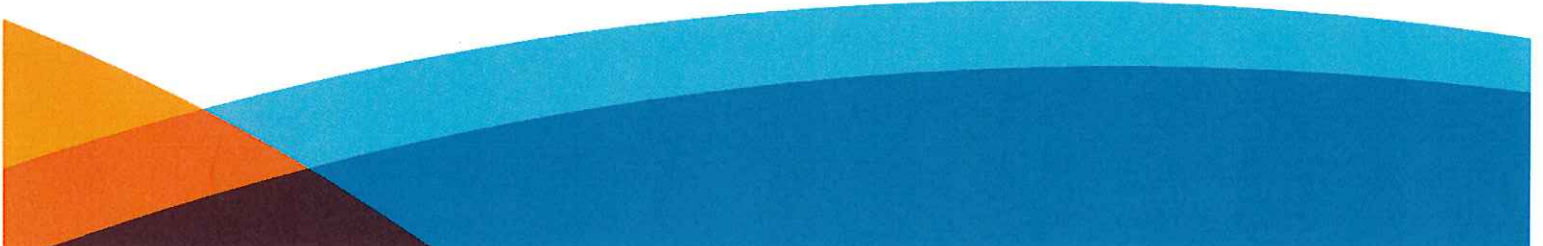
As always, we welcome any questions or comments that you may have.

Sincerely,



Gary Miller, Senior Vice President Ballad Health
Interim COPA Compliance Officer

Cc via email: Jeff Mitchell
Tony Keck
Melanie Stanton





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Johnson City, TN 37604
tel 423.302.3462

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July 27, 2018

M. Norman Oliver, MD, MA
Acting Commissioner Virginia Department of Health
109 Governor Street
Richmond, VA 23219

Addendum Letter: Quality Priority Metrics Feedback

Dear Commissioner Oliver,

Pursuant to Condition 12 in the Virginia Cooperative Agreement, enclosed for your review and feedback are the Ballad Health quality priorities for fiscal year 2019. Also enclosed is the correspondence stream with the Southwest Virginia Health Authority. Ballad Health Quality Department is working on incorporating their suggestions as follows:

Quality: Opioid Prescribing Rate

Our goal is to change this measure to "morphine milligram equivalents prescribed" when all of our hospitals are transitioned to a single electronic health record (EHR). Ballad recently selected Epic as the system solution. Legacy Wellmont hospitals have the Epic EHR and are able to measure "morphine milligram equivalents prescribed". Legacy Mountain States Health Alliance's current EHR is Soarian. It does not have the capability to measure outcomes to that specificity and would require manual abstraction. We recommend to measure "milligram equivalents prescribed" only at the Epic facilities as an interim measure if the Authority prefers Ballad Health starts measuring "morphine milligram equivalents administered – Inpatient" this fiscal year.



Service: Communication:

Communication will be tracked through our patient experience surveys. We set goals based on national benchmarks of the HCAHPS program and vendor benchmarks where national databases are unavailable. Ballad Health's vendor is Press Ganey. We have specific communication data and benchmarks related to the survey questions of:

- a) Communication with Nurses
- b) Communication with Doctors
- c) Communication about medicines
- d) Discharge Information

The Ballad Health quality team will proceed with the priority measures selected and consider them final for fiscal year 2019. We will continue to refine our measurement methodology and establishment of benchmarks and goals.

Sincerely,

A handwritten signature in black ink that reads "Melanie Stanton". The signature is fluid and cursive, with the first name "Melanie" being more prominent than the last name "Stanton".

Melanie Stanton, BSN, MBA, RN, NEA-BC

Vice President, Performance Improvement & Quality

Ballad Health

Southwest Virginia Health Authority
851 French Moore Jr. Boulevard, Suite 178
Abingdon, Virginia 24210

July 25, 2018

Gary Miller, Esq.
Senior Vice President
Interim COPA Compliance Officer
Ballad Health
1021 West Oakland Avenue
Johnson City, Tennessee 37604

Dear Gary:

Thank you for the opportunity for the Southwest Virginia Health Authority to provide comments on the proposed annual priorities related to the quality improvement factors applicable to all facilities. We understand that the development of these initial metrics included engagement of the several of the stakeholders within the Ballad Health structure. Thank you for the comprehensive list. I have surveyed the membership of the Board of Directors and provide the following comments to the *Quality Priority Metrics* for your consideration:

- *Quality.* Under “2. *Opioids a. Opioid prescribing rate.*” We suggest including “morphine milligram equivalents prescribed as well as prescribing rates.”
- *Communication.* Throughout the Cooperative Agreement process we encouraged a strong focus on communication and we appreciate your inclusion of Communication as a 2019 top ten goal. We would suggest more specificity with respect to the Communication metrics. How will communication be measured and what goals will exist against which progress will tracked? One Board member suggested including measuring results from the follow-up with a patient post-discharge on issues such as patient care, referrals, scheduled tests, prescriptions, etc. by a case manager or other staff member, if possible, including a patient phone line for questions and concerns after discharge.

Finally, I received a suggestion for consideration:

- *Investments.* Record investments toward the treatment and managed care of the portion of the patient population with a current condition (such as cancer, type 1 diabetes, type 2 diabetes, multiple sclerosis, heart disease, mental health disorders, etc.) versus focusing expenditures solely on investments in prevention and cure.

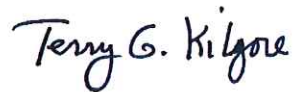
Gary Miller, Esq.
July 25, 2018
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Regarding your request for the identification of the two members of the Southwest Virginia Health Authority who will serve on the Joint Task Force with two representatives from Ballad Health, I will forward those names under separate cover.

Thank you again for the opportunity to proceed our comments. Please let me know if you need any additional information on these reactions to the *Quality Priority Metrics*.

Very Truly Yours,

SOUTHWEST VIRGINIA HEALTH AUTHORITY

A handwritten signature in black ink that reads "Terry G. Kilgore". The signature is written in a cursive style with a large, stylized 'T' and 'K'.

Terry G. Kilgore, Chairman

Attachments

cc: Members of the Board of Directors of the Southwest Virginia Health Authority
Dennis M. Barry, Esq.
E. Richard Brownlee, II, PhD, CPA
Thomas A. Massaro, M.D., PhD



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July 2, 2019

Jeff Mitchell
The Mitchell Law Firm, A Professional Corporation
1700 Kraft Drive, Suite 2000
Blacksburg, Virginia 24060

Dear Jeff,

Pursuant to Condition 12 in the Virginia Cooperative Agreement, Ballad Health shall establish annual priorities related to quality improvement applicable to all facilities within the first six months of the closing date of the merger. Ballad Health shall give notice to the Authority of the metrics that it is prioritizing and will include input from the Authority in establishing or modifying its priorities.

The attached letter details the Quality Priority Metrics proposed for Ballad Health System. The spreadsheet details Quality Priority metrics proposed for the facility specific level. We respectfully submit these measures for input by the Authority. Our goal is to incorporate any input and subsequently finalize the System and Facility Quality Priority Measures for submission by July 31, 2018.

Also, pursuant to Commitment 34, The New Health System shall create, together with the Southwest Virginia Health Authority, a Joint Task Force comprised of four members, two from the New Health System and two from the Southwest Virginia Health Authority. Could you please identify who will be the members of this task force from the Southwest Virginia Health Authority?

Thank you for your assistance. As always, we welcome any questions or comments that you may have.

Sincerely,

A handwritten signature in blue ink that reads "Gary Miller".

Gary Miller, Senior Vice President Ballad Health
Interim COPA Compliance Officer

CC: Terry Kilgore, Chairman



June 8, 2018

Jeff Mitchell | The Mitchell Law Firm, A Professional Corporation
1700 Kraft Drive, Suite 2000 | Blacksburg, Virginia 24060

Dear Mr. Mitchell,

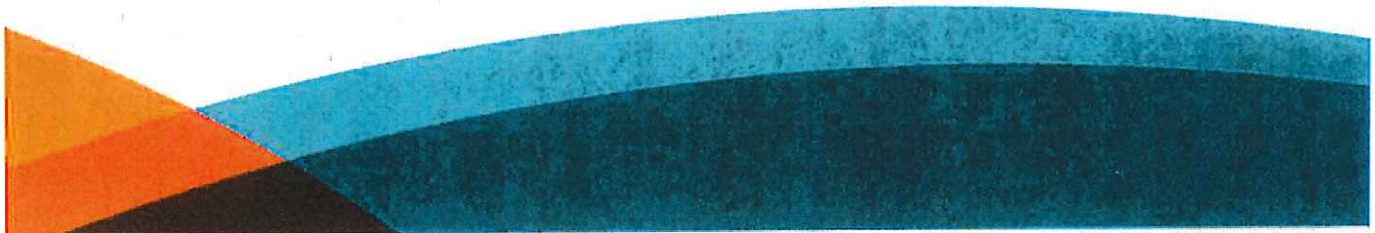
The Quality Priority Metrics were developed in collaboration with the Ballad Health Clinical Council. The Quality, Service and Safety Committee reviewed recommendations and approved the priorities April 25, 2018. These metrics were selected based on the healthcare industry trends and opportunities for improvement identified through the Ballad Health Quality Scorecards. The ten priorities selected for fiscal year 2019 are:

Quality

1. Antibiotic Stewardship
 - a. Meropenem – Days of Therapy
 - b. Levofloxacin – Days of Therapy
2. Opioid Use
 - a. Opioid prescribing rate
 - b. Inpatient doses of narcotics
3. Sepsis
 - a. Inpatient Sepsis Mortality Rate, 2) Sepsis Bundle Compliance
4. Emergency Department Throughput
 - a. Median time from arrival to departure for inpatients
 - b. Median time from arrival to departure for outpatients (not admitted)
 - c. Left without being seen
5. C-Difficile
 - a. C-Difficile Rate

Safety

6. Catheter Associated Urinary Tract Infections (CAUTI) – CAUTI Rate
7. Central Line Associated Bloodstream Infections (CLABSI) – CLABSI Rate
8. Methicillin Resistant Staphylococcus Aureus (MRSA) – MRSA Rate
9. Surgical Safety



- a. Post op Hip Fracture
- b. Perioperative Hemorrhage or Hematoma Rate
- c. Post op Physiologic & Metabolic Derangement Rate
- d. Post op Respiratory Failure Rate
- e. Peri-op Pulmonary Embolism or Deep Venous Thrombosis (DVT) rate
- f. Post op Sepsis Rate
- g. Post op wound dehiscence Rate
- h. Accidental Puncture or Laceration Rate
- i. Surgical Site Infection (SSI) Colon

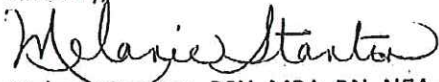
Service

10. Communication

- a. Communication with Nurses
- b. Communication with Doctors
- c. Communication about medicines
- d. Discharge Information

On behalf of Ballad Health, I respectfully submit the FY 2019 priority focus measures for your consideration.

Sincerely,



Melanie Stanton, BSN, MBA, RN, NEA-BC
Vice President, Performance Improvement & Quality
Ballad Health

Cc: Delilah T. McFadden, MS, NRP
Public Health Emergency Coordinator

Non-CIPA