

4th Qtr 2010

HCAHPS Impact Report

Facility Edition

Star Valley Medical Center
Afton, WY

About Your HCAHPS Impact Report

The HCAHPS Survey (Hospital Consumer Assessment of Healthcare Providers and Systems) is a standardized survey instrument and data collection methodology for measuring patients' perspectives of hospital care. March 2008 marked the first public reporting period for HCAHPS results. The March 2009 public reporting was the first in which hospitals paid under the Inpatient Prospective Payment System (IPPS) can no longer suppress the public reporting of their HCAHPS results.

The information in your HCAHPS Impact Report is personalized to your hospital even though it is derived from HCAHPS survey data collected from 3,798 hospitals from April 2009 through March 2010. Released by CMS on December 16, 2010, the data used in this report have been adjusted by CMS for patient-mix and mode of data collection. Access to this database and additional details about the HCAHPS program can be found at www.hospitalcompare.hhs.gov

HealthStream Research developed the **HCAHPS Impact Report** to quickly provide a snapshot of your hospital's performance through meaningful comparisons to its peers in the industry as well as competitors in its local market. The analyses provided in this report are designed to help you **1)** better understand your hospital's HCAHPS scores, **2)** communicate the results to key stakeholders, including those responsible for quality initiatives, administration, physician relations and board members, and **3)** respond to public scrutiny associated with public reporting of your hospital's HCAHPS scores.

To achieve these goals, the **HCAHPS Impact Report** summarizes your hospital's performance in three critical areas of comparison so that you may answer the following questions:

- (1) How did our hospital perform compared to the national average and to its industry peers?
- (2) How did our hospital perform over time?
- (3) How did our hospital perform compared to the competitors in its local market?

The answers to these questions determine where your hospital stands and the course of action you should take.

Throughout the report, analyses will be presented in response to these three questions. Because your **HCAHPS Impact Report** is intended to be used by stakeholders with a wide range of interest, it is organized such that each subsequent section presents increasingly more detailed answers to the same three questions.

- Section I** Executive Summary – A high level overview of your hospital's performance
- Section II** Your Results – A thorough analysis of your hospital's performance for each HCAHPS measure
- Section III** National & State Comparisons – A summary of state and national level data
- Appendix**

About HealthStream Research

HealthStream Research is committed to helping hospitals quickly understand and respond to the insight gained from their key stakeholders. HealthStream Research specializes in quality and satisfaction surveys for healthcare organizations. Through our physician, employee, patient, and community perception surveys conducted for more than 1,100 healthcare facilities, we uncover opportunities and challenges for individual hospitals as well as many of the nation's largest for-profit and non-profit healthcare systems and specialty healthcare companies.

HealthStream (NASDAQ: HSTM) is a leading provider of research and learning solutions for the healthcare industry. HealthStream focuses on turning "Insight into Action" for leading healthcare providers and suppliers through continuous measurement and adaptive learning.

HealthStream Research™
www.healthstreamresearch.com
301.575.9300 (Baltimore)
615.224.1550 (Franklin)



SECTION I

EXECUTIVE SUMMARY

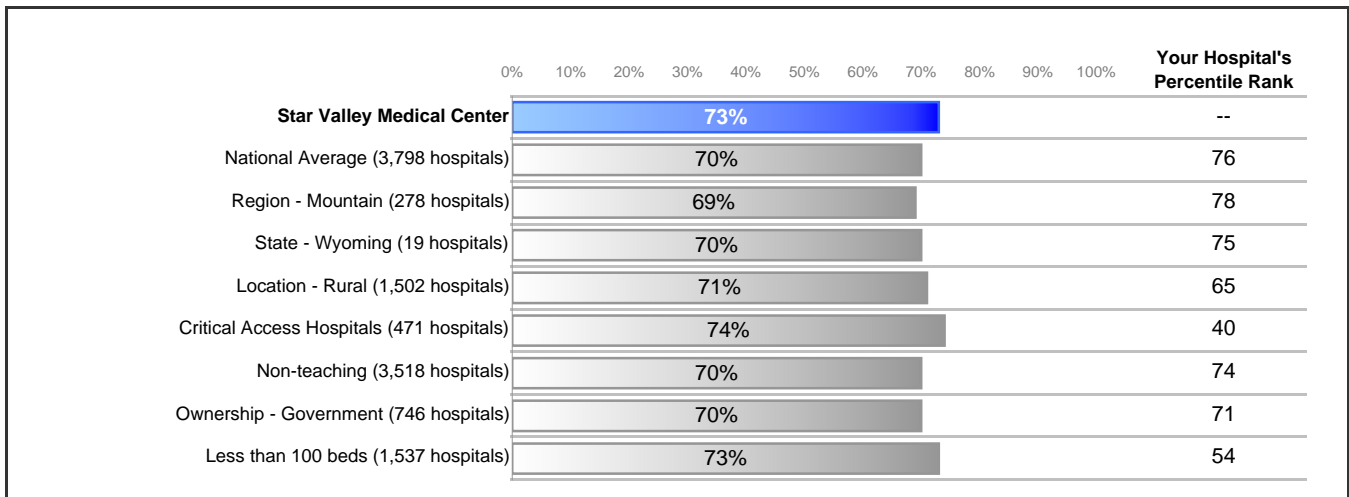
National & Peer Database Comparisons **Executive Summary**

One of the valuable benefits of the HCAHPS survey program is the ability to compare your hospital against a true national database. The current release includes data from 3,798 hospitals and represents the largest database in the healthcare industry for comparative purposes. The database includes every acute care hospital and more than 400 critical access hospitals that participate in the HCAHPS program.

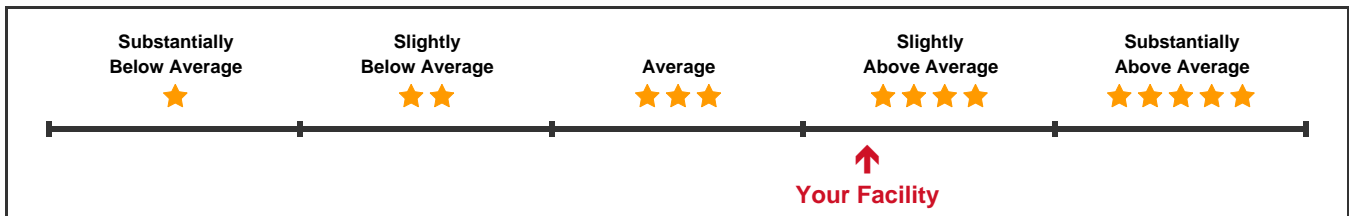
Throughout **Section I - Executive Summary**, your hospital's HCAHPS Composite score (the average of the ten measures included in the HCAHPS survey) will be used for comparative purposes. Also, the following national and peer benchmarks were selected based on the specific characteristics of your facility.

- National Average (3,798 hospitals in database)
- Mountain Region - AZ, CO, ID, MT, NV, NM, UT, WY (278 hospitals in database)
- State of Wyoming (19 hospitals in database)
- Location - Rural (1,502 hospitals in database)
- Critical Access Hospitals (471 hospitals in database)
- Non-teaching Hospitals (3,518 hospitals in database)
- Government Hospitals (746 hospitals in database)
- Size - Less than 100 beds (1,537 hospitals in database)

The following chart reflects your hospital's HCAHPS performance as compared to your national and peer benchmarks including your hospital's percentile ranking within each one of these groups. Each rank on the right-hand column indicates your hospital's percentile rank within that specific national/peer database.



HealthStream Research created the following star rating scale to summarize your hospital's performance as compared to national and peer benchmarks.

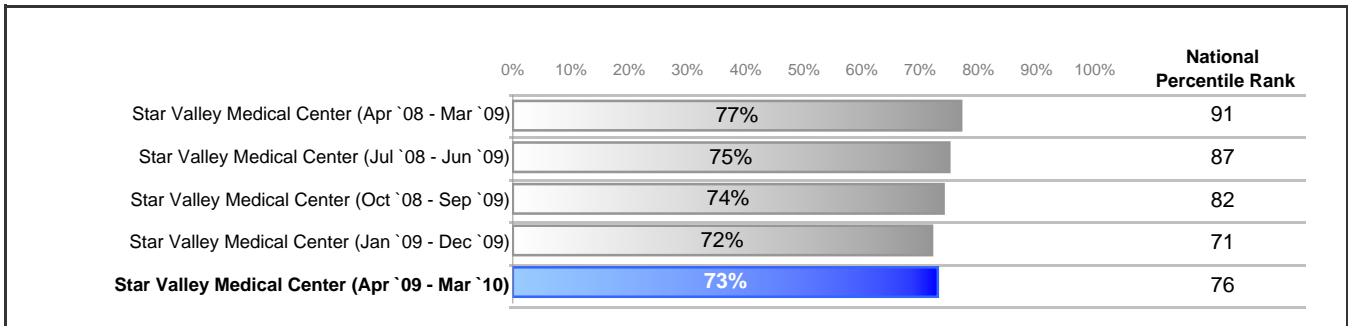


Scores over Time **Executive Summary**

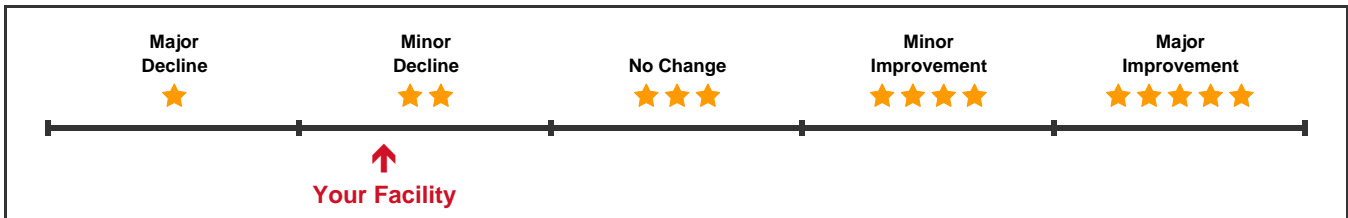
CMS reports HCAHPS scores as a 12-month rolling period. This means that every period, the most recent three months of data are added to the scores while the earliest three months of data are removed. This results in a nine-month overlap between consecutive reporting periods. This type of rolling data minimizes the impact of score differences that could be caused by smaller sample sizes, thereby creating a more balanced trend line.

To get the most complete picture of your scores over time, HealthStream Research recommends looking at how your scores have changed from one year ago to the current reporting period. Such a comparison provides a reliable annual trend with no overlap between the two periods.

The following chart reflects your scores over time for the HCAHPS Composite (ten measures).



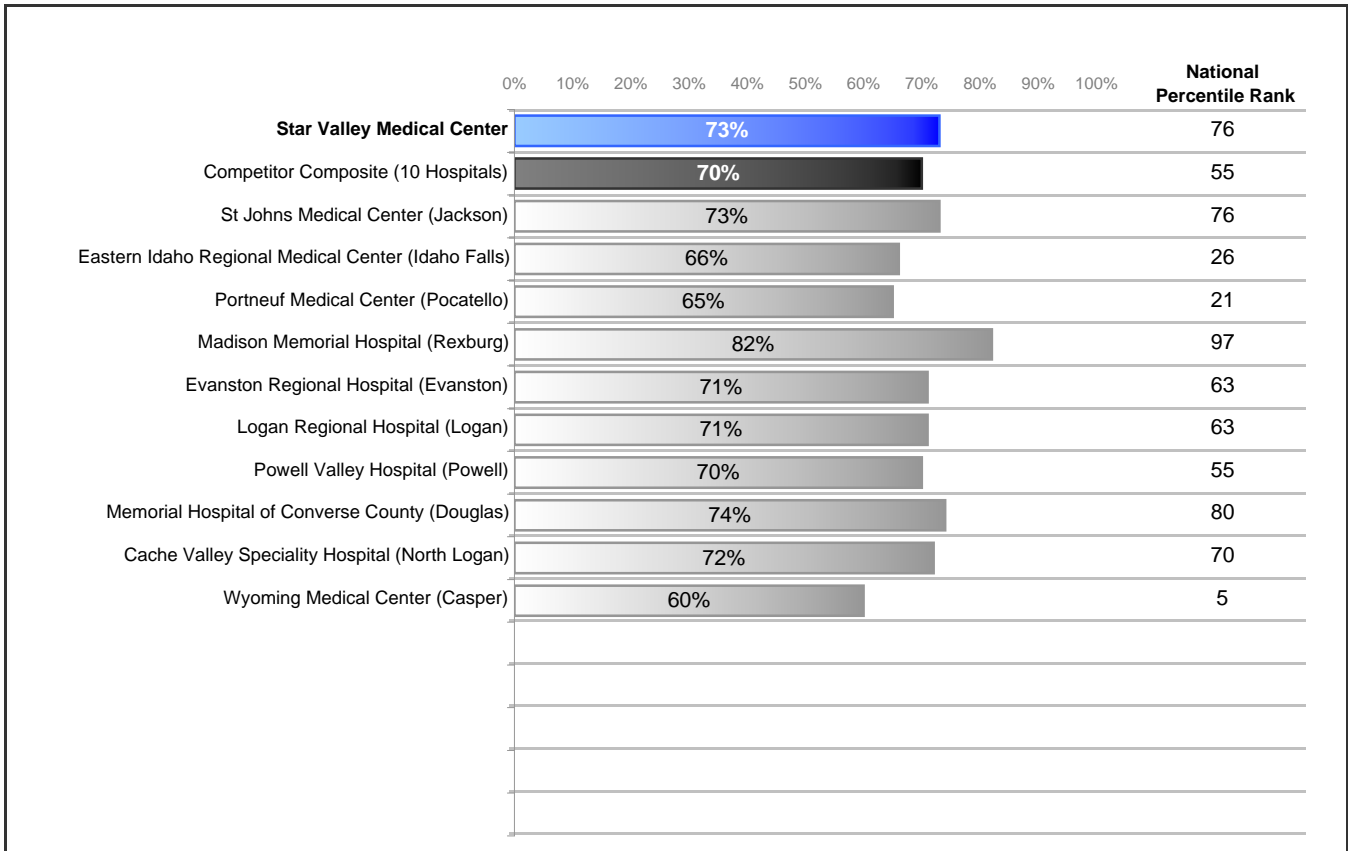
HealthStream Research created the following star rating scale to summarize your hospital's performance over time.



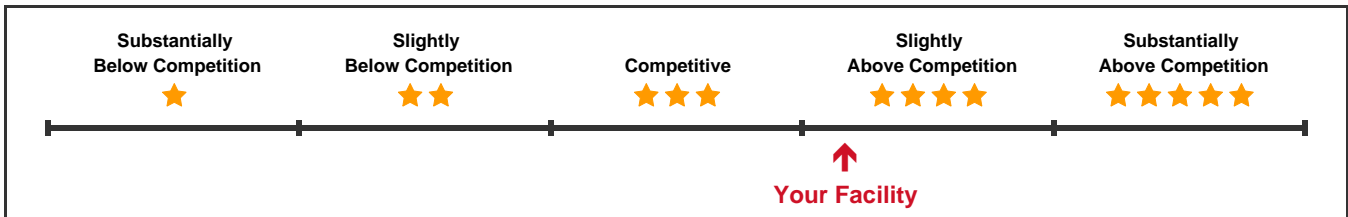
Comparisons to Competitors **Executive Summary**

Another benefit of the HCAHPS survey program is that it provides data to conduct robust comparisons to the competitors in your local market. Your hospital will find this information valuable for developing strategic plans, marketing plans and even communication plans for interacting with local media, physicians and other key stakeholders who want to understand your hospital's performance. More than ever, it will be critical for you to take the lead in using this information to position your hospital before others do it for you.

The competitor analysis presented below represents the HCAHPS Composite score for the 10 hospitals (participating in HCAHPS) custom selected for your hospital. The "Competitor Composite" score presented in the black bar is the average score of these 10 hospitals.



HealthStream Research created the following star rating scale to summarize your hospital's performance as compared to its local market competitors.



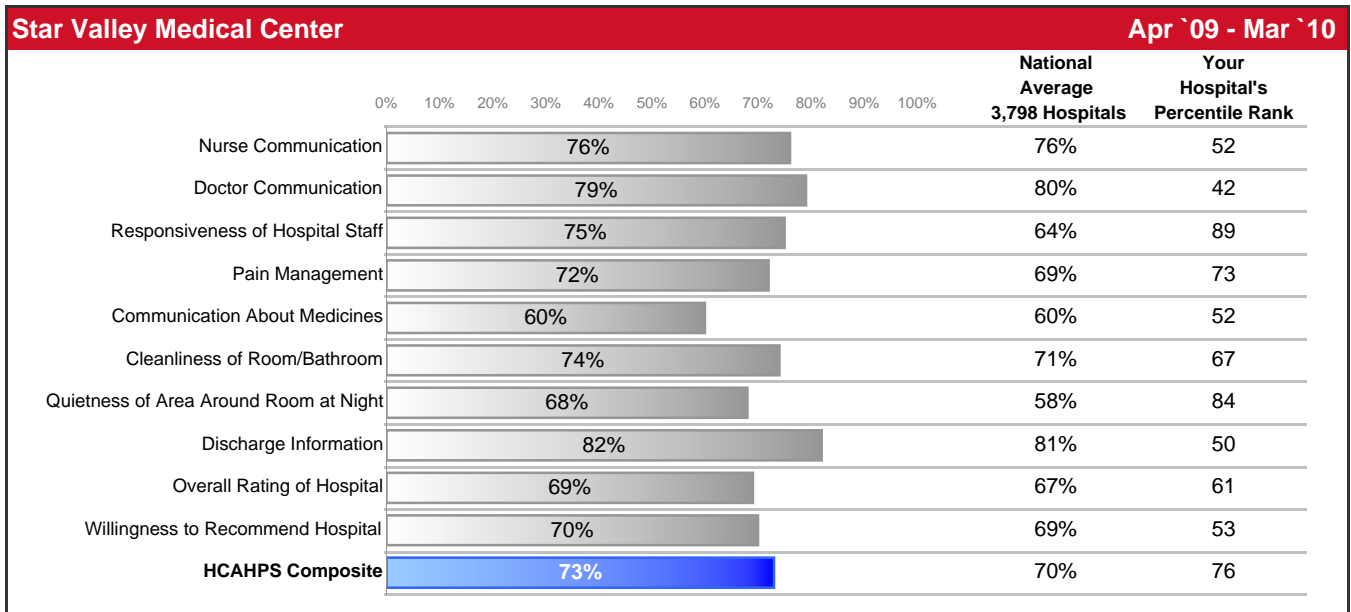


SECTION II

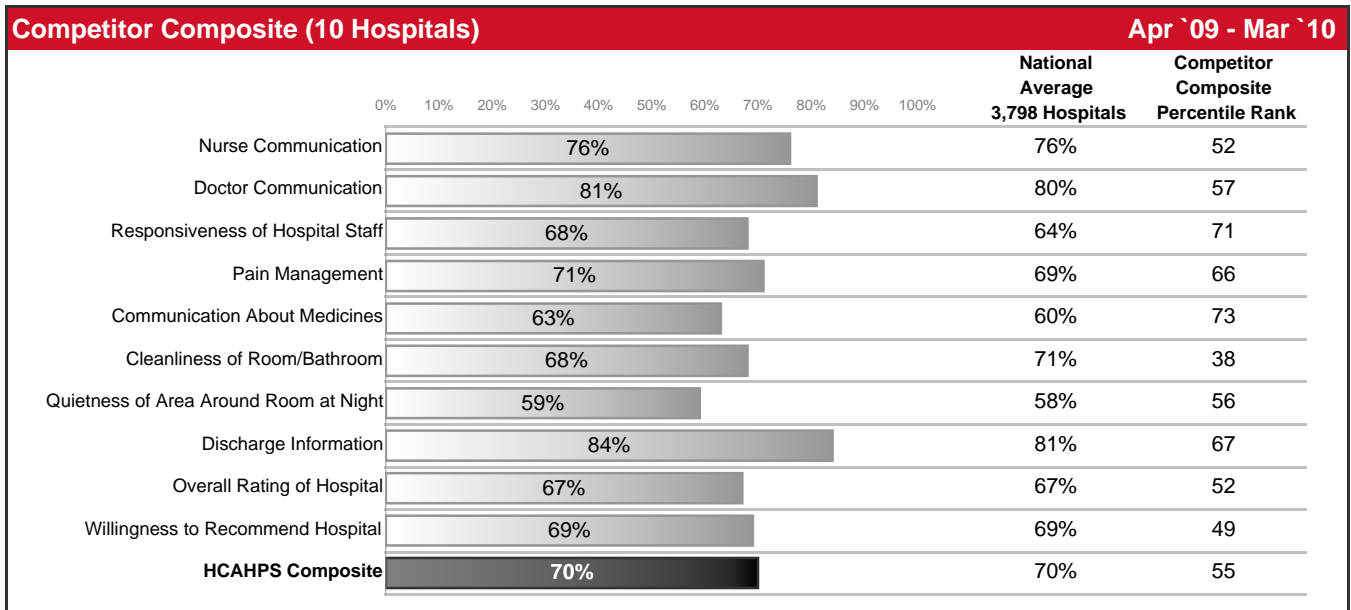
YOUR RESULTS

Section II – Your Results, provides more detailed analyses of your scores. The focus shifts from the HCAHPS Composite scores to performance on each of the ten measures from the HCAHPS survey. Each page is dedicated to one HCAHPS measure and includes national and peer comparisons, scores over time, and comparisons to competitors.

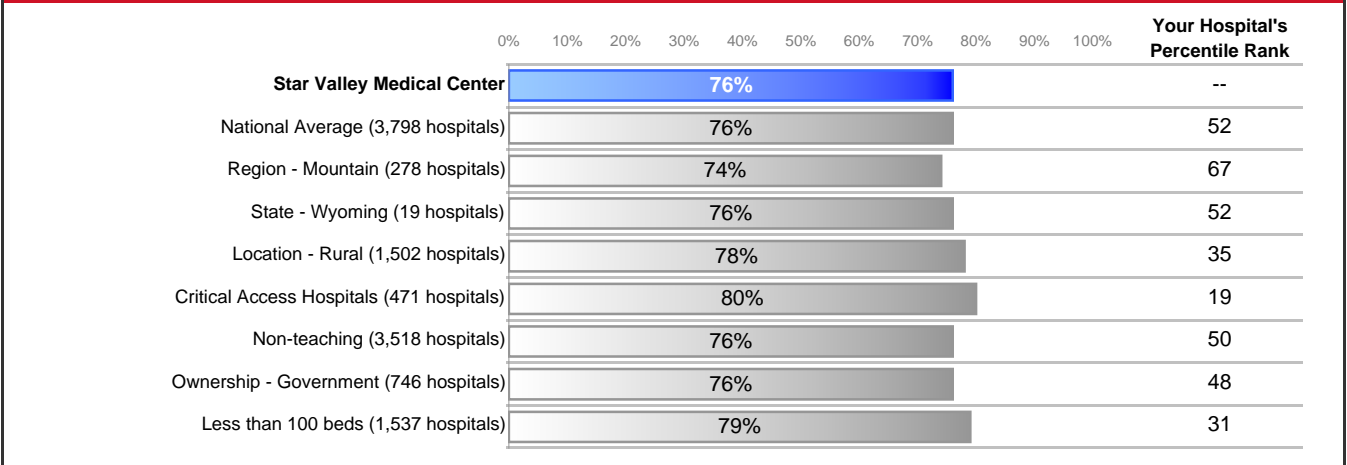
The chart below is a summary of your scores for each HCAHPS measure, which will be used in the pages that follow.



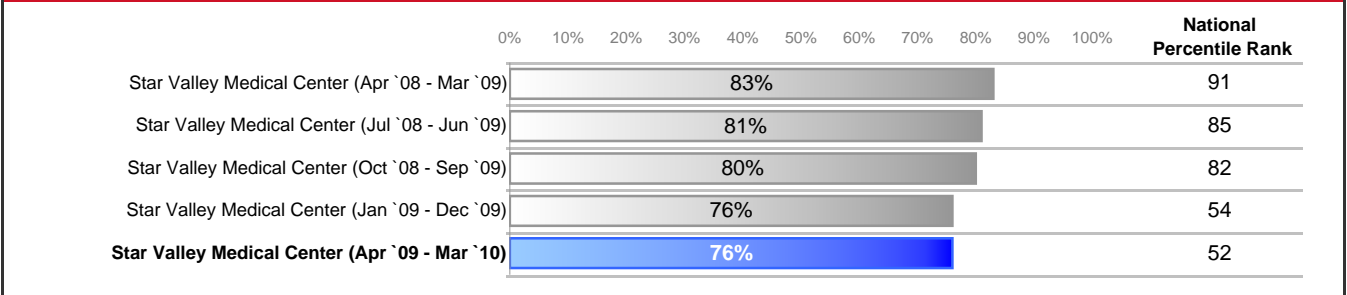
The following chart presents the Competitor Composite for each of the ten HCAHPS measures as well as the HCAHPS Composite. The Competitor Composite is the average score of the 10 hospitals that have been selected for your hospital and will be used throughout this section.



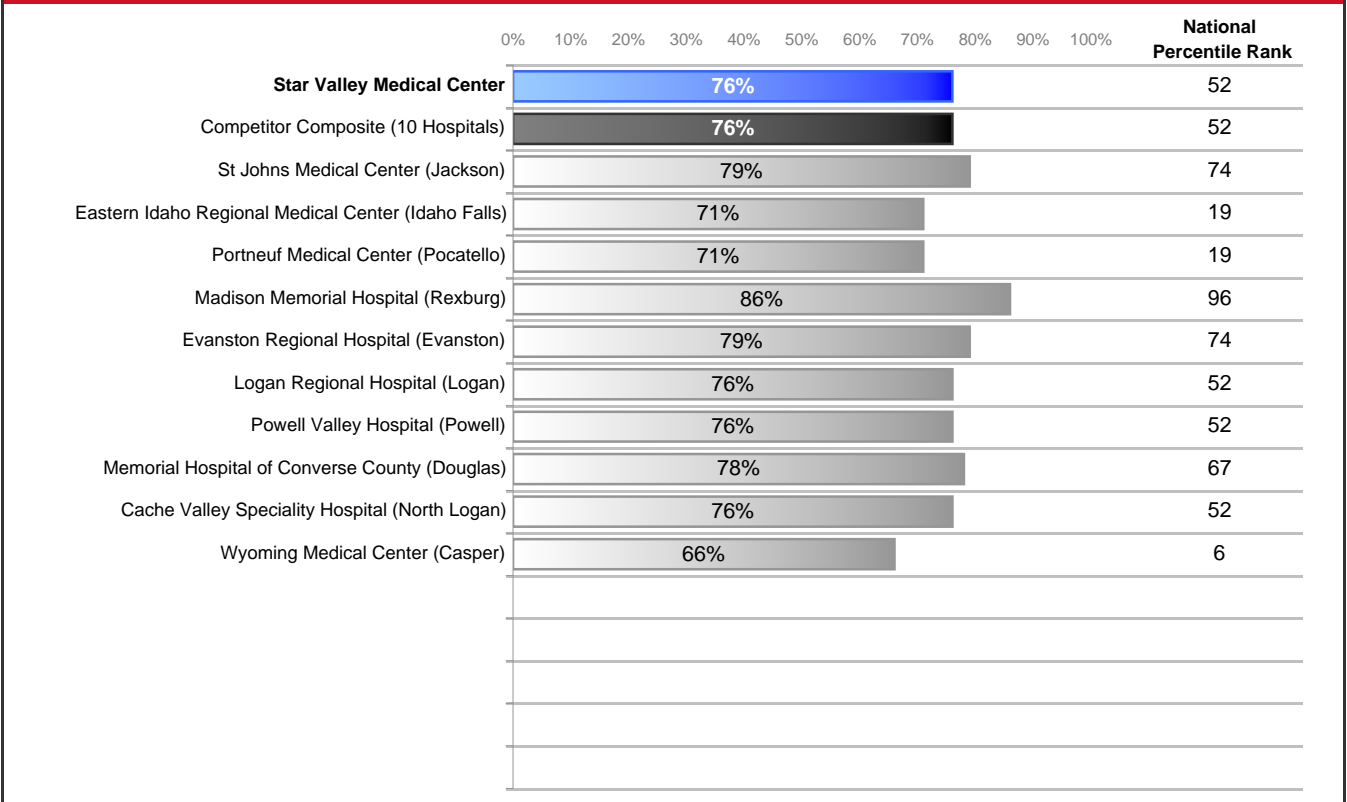
Nurse Communication - National Comparisons Apr `09 - Mar `10



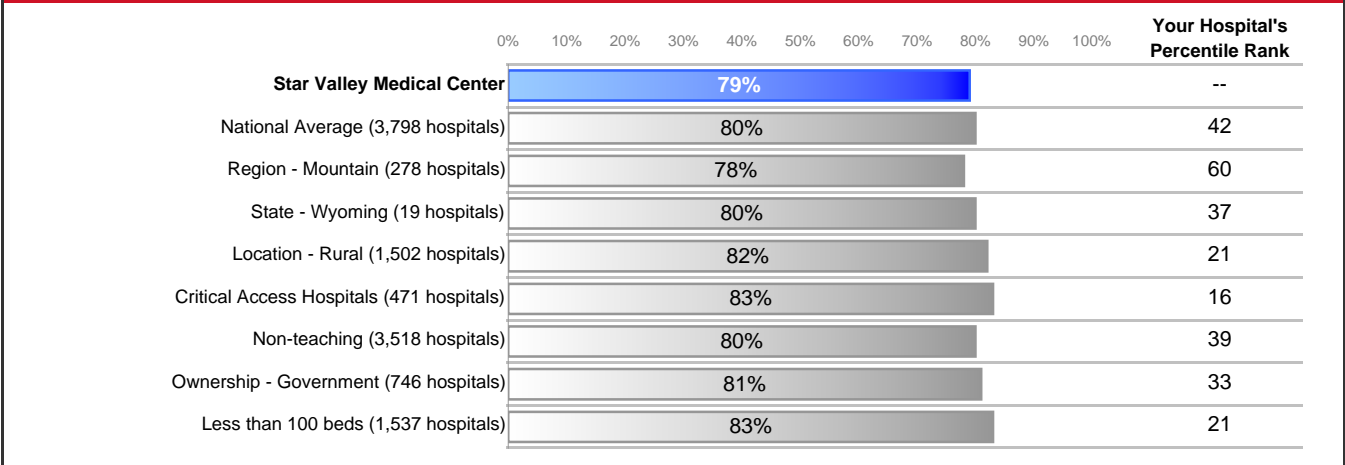
Nurse Communication - Scores Over Time



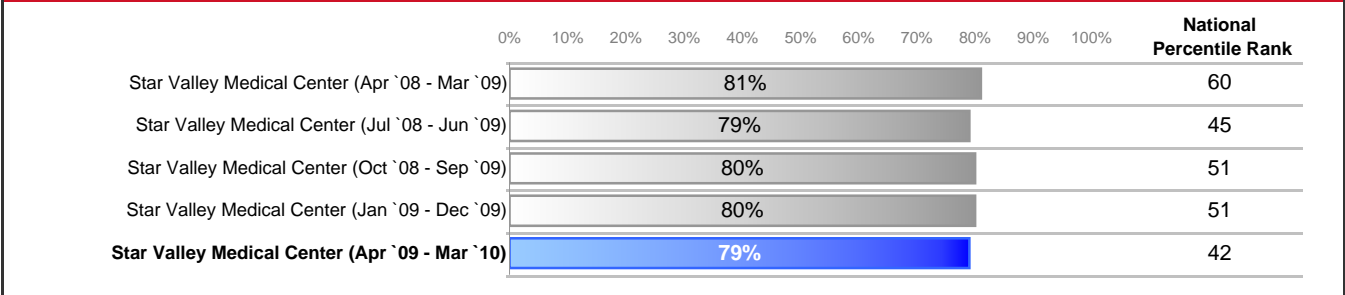
Nurse Communication - Competitive Analysis Apr `09 - Mar `10



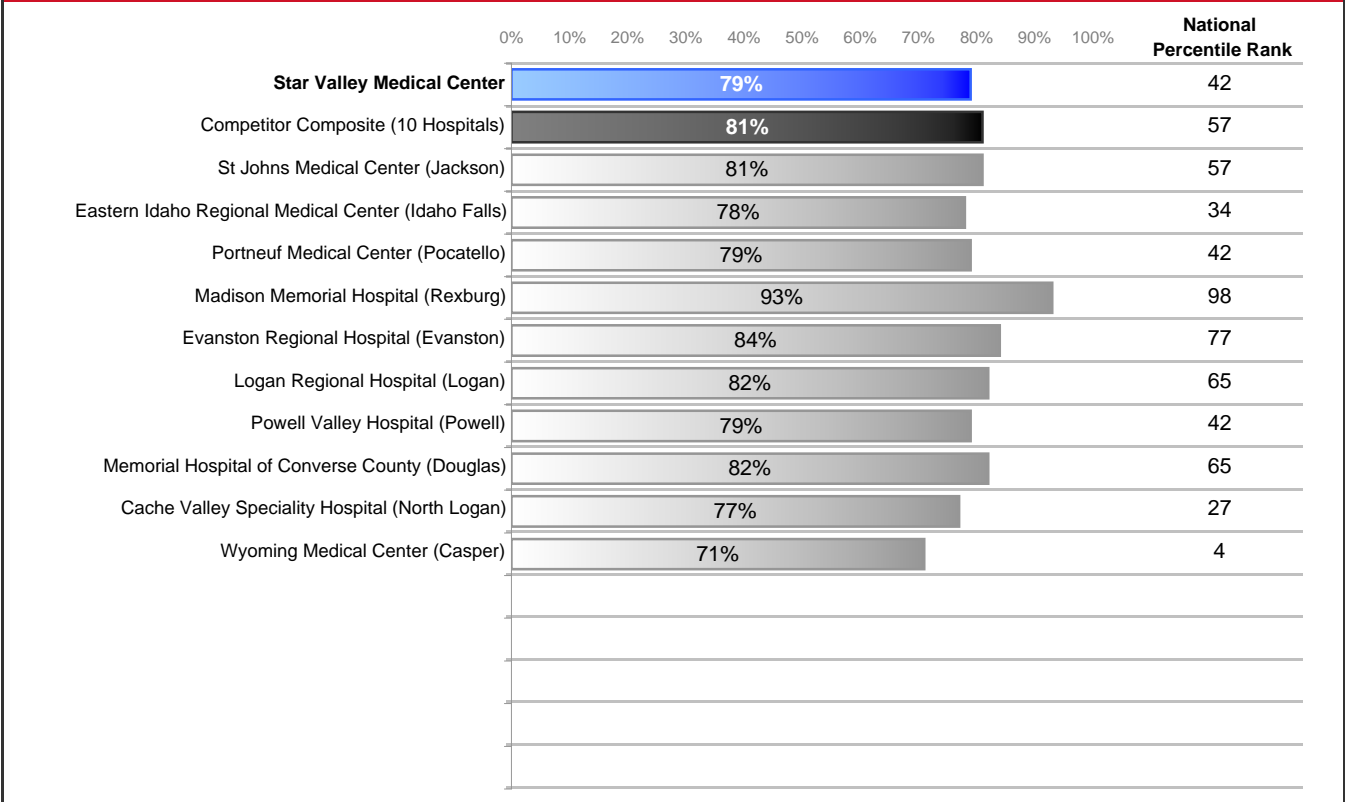
Doctor Communication - National Comparisons Apr `09 - Mar `10



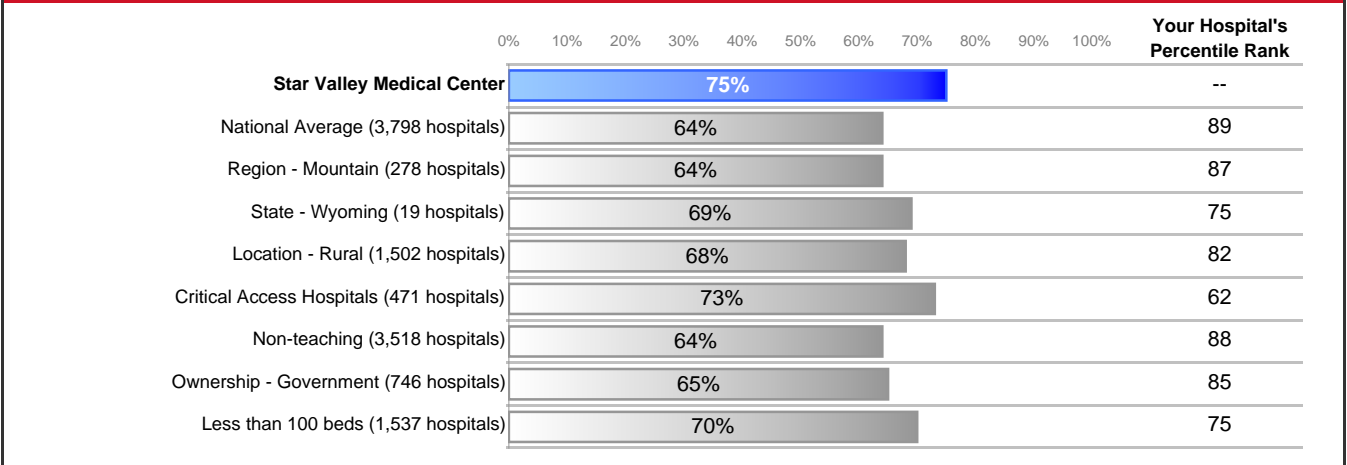
Doctor Communication - Scores Over Time



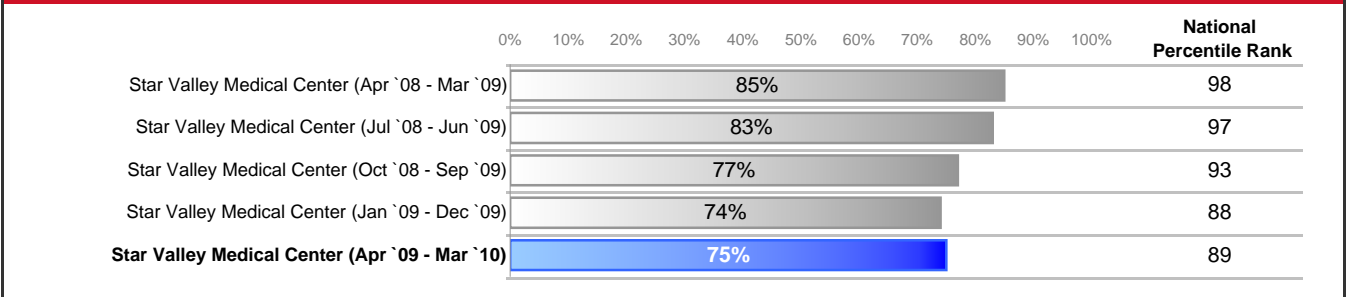
Doctor Communication - Competitive Analysis Apr `09 - Mar `10



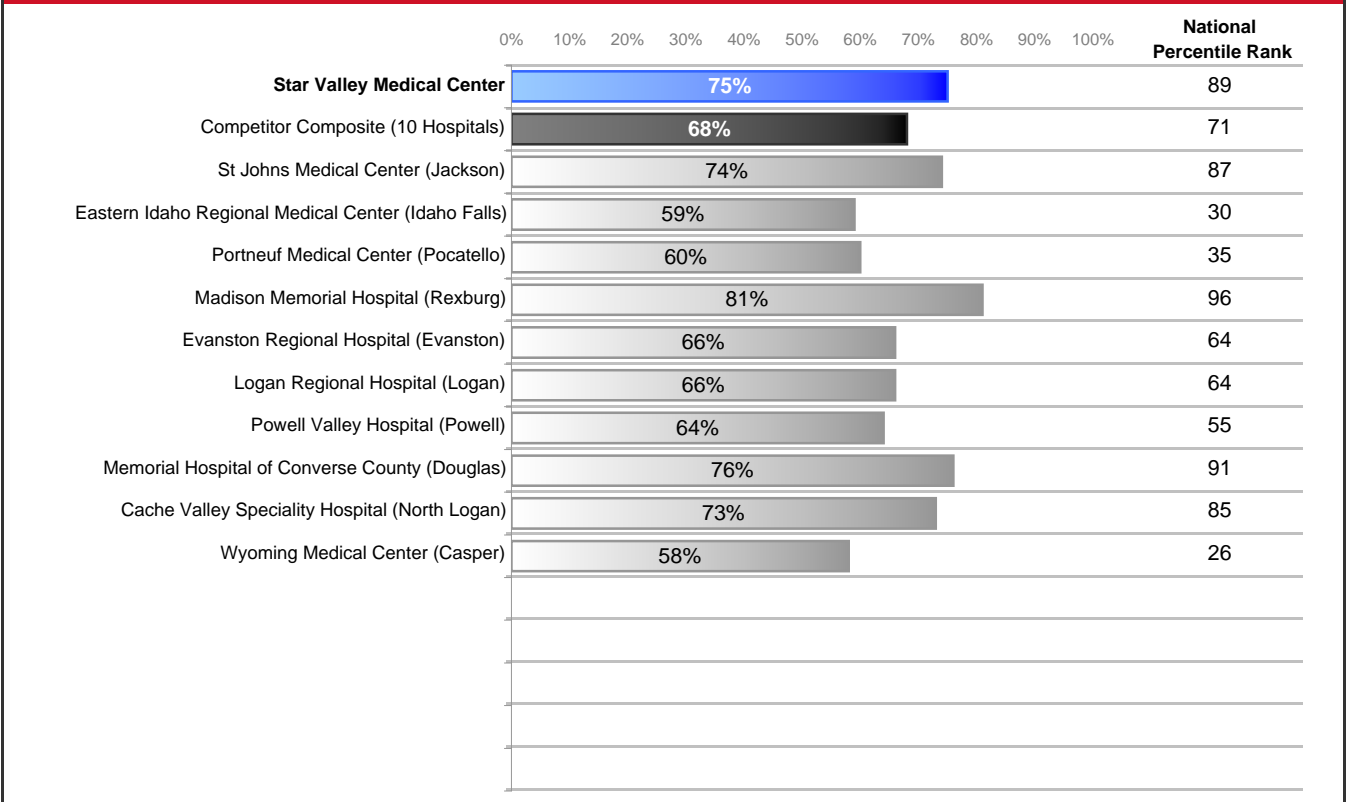
Responsiveness of Hospital Staff - National Comparisons Apr `09 - Mar `10



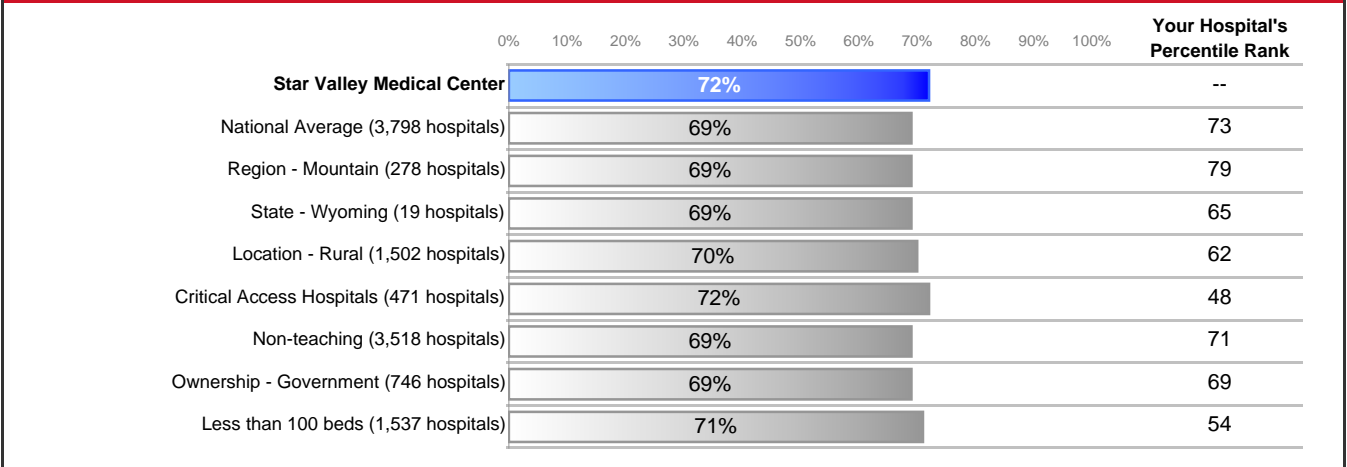
Responsiveness of Hospital Staff - Scores Over Time



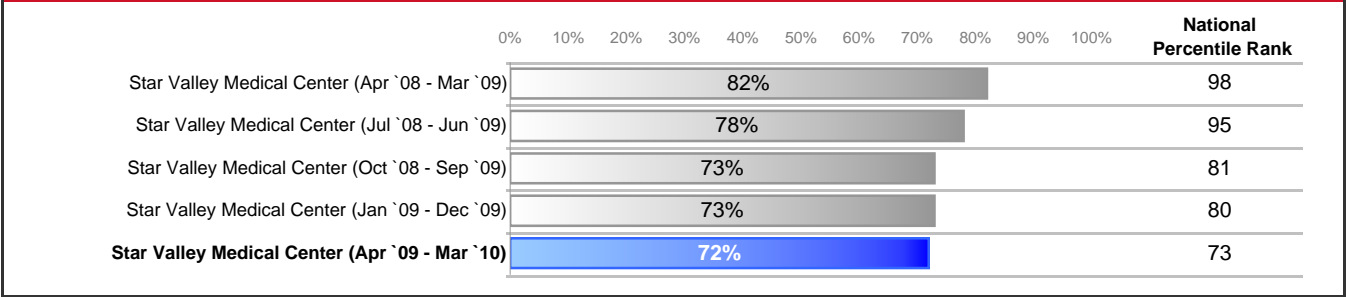
Responsiveness of Hospital Staff - Competitive Analysis Apr `09 - Mar `10



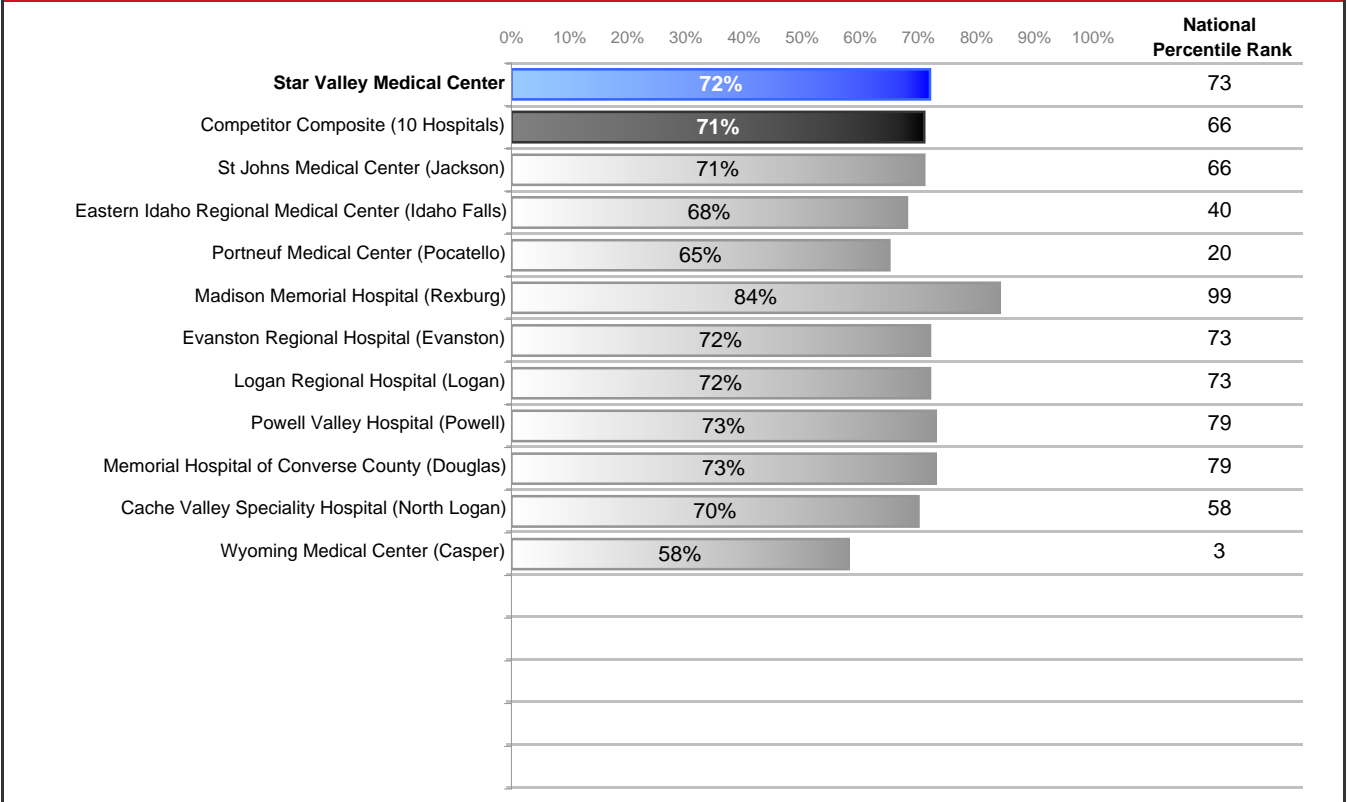
Pain Management - National Comparisons Apr `09 - Mar `10

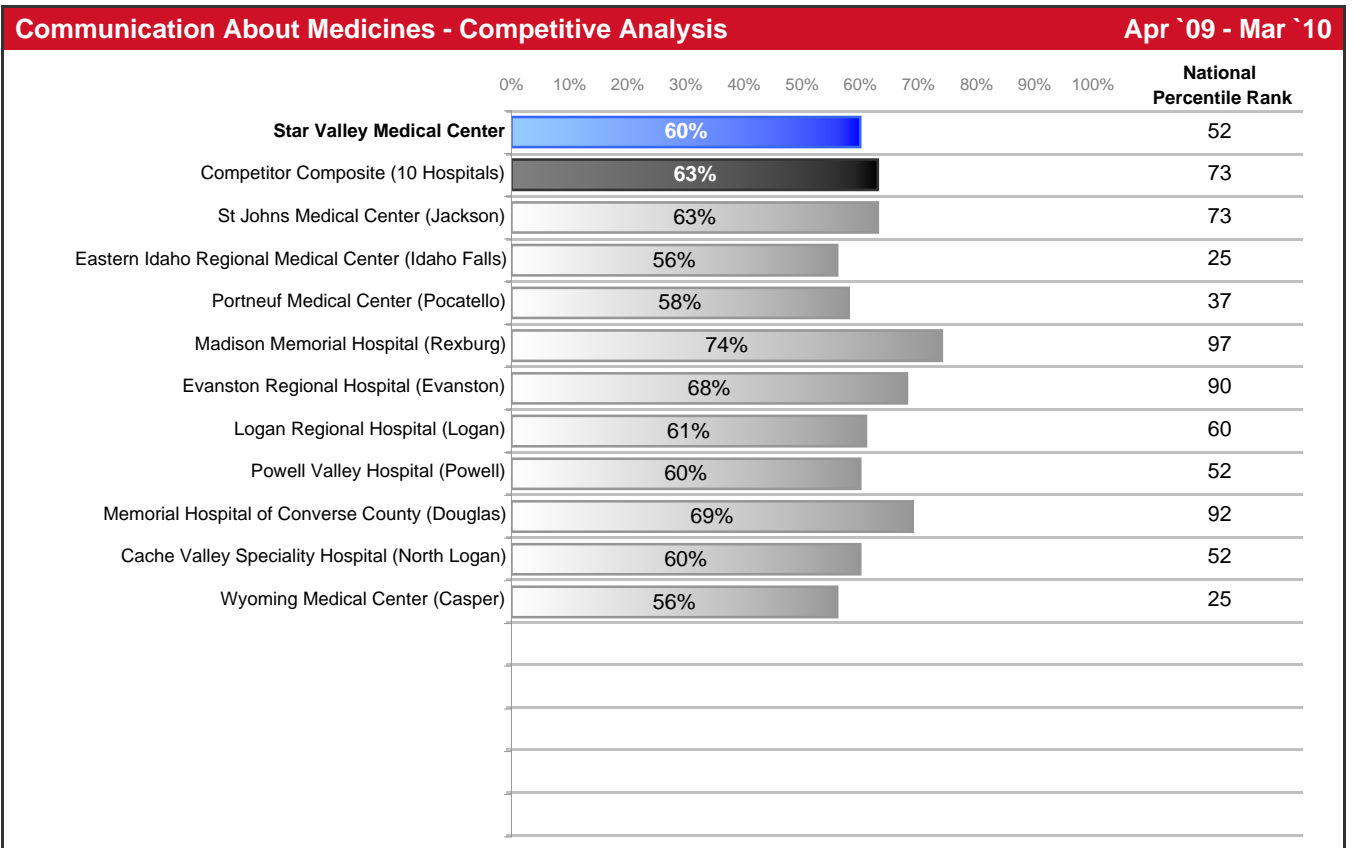
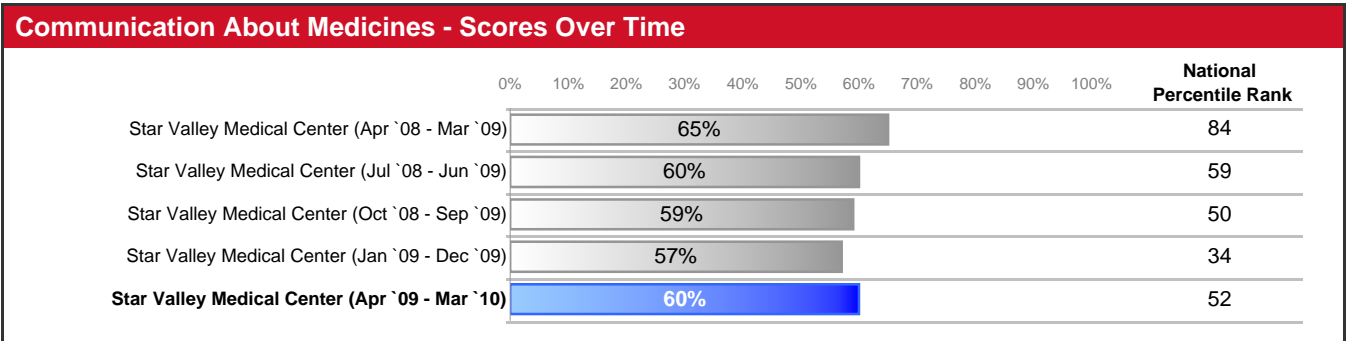
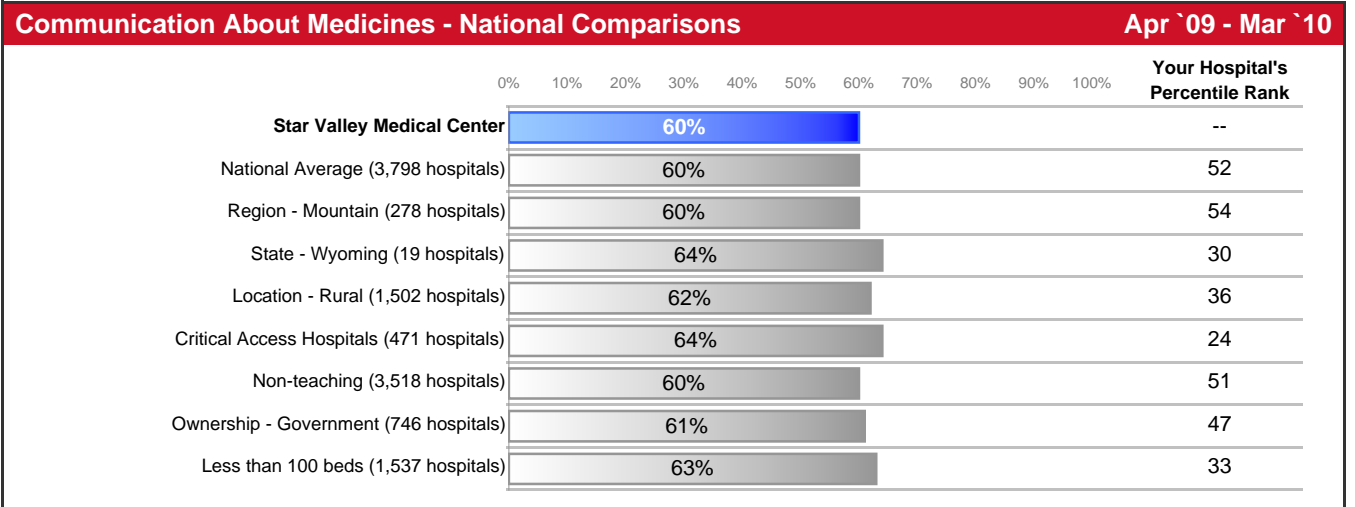


Pain Management - Scores Over Time

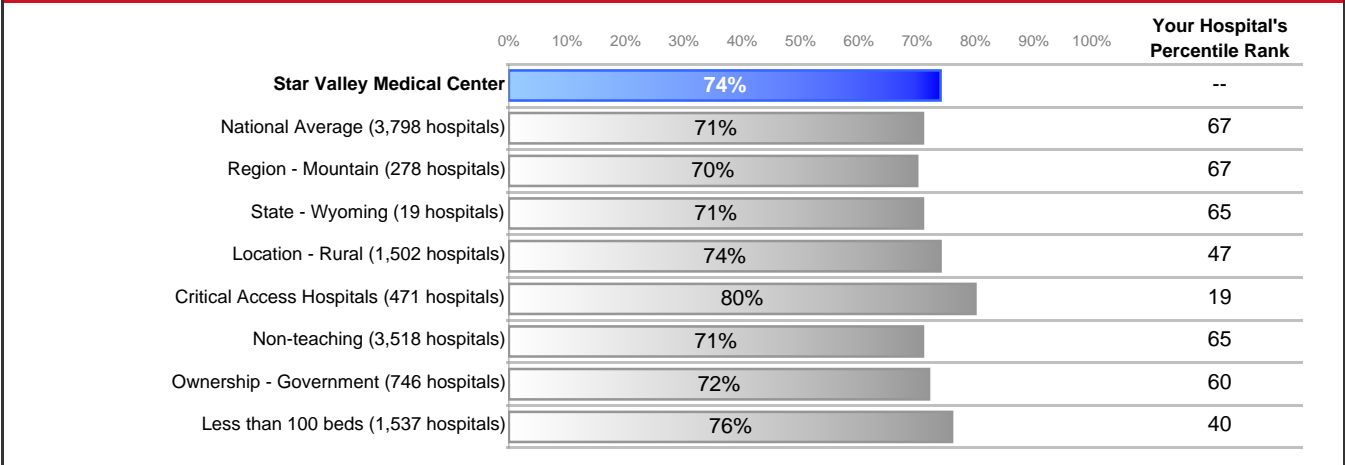


Pain Management - Competitive Analysis Apr `09 - Mar `10

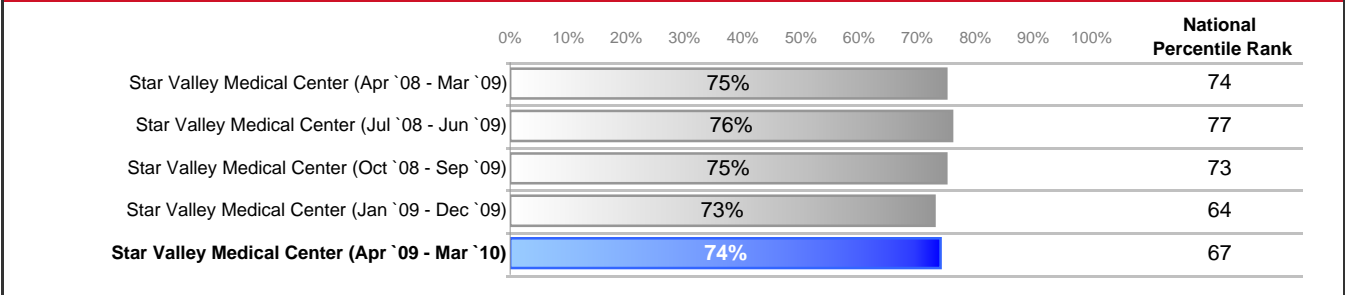




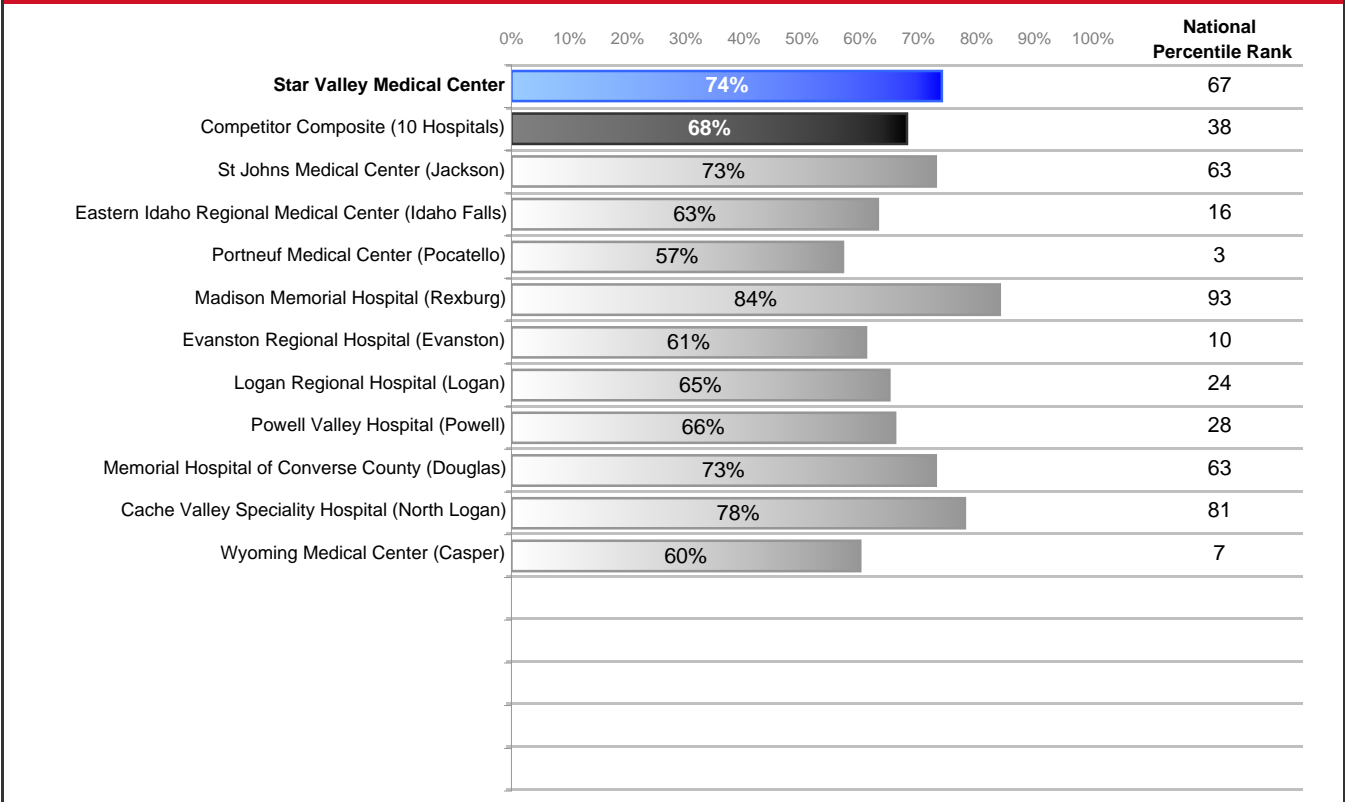
Cleanliness of Room/Bathroom - National Comparisons Apr `09 - Mar `10



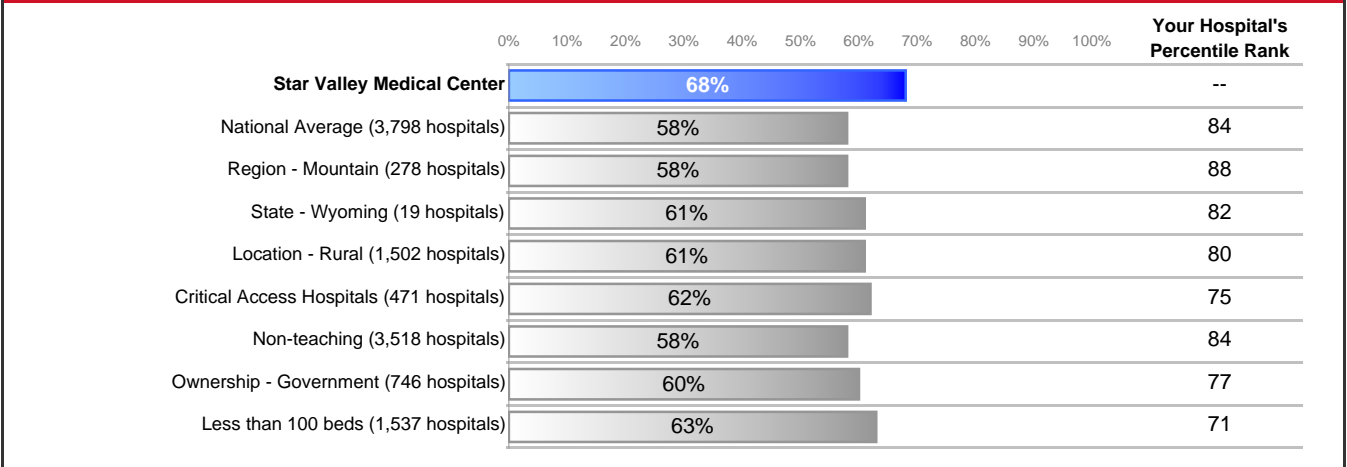
Cleanliness of Room/Bathroom - Scores Over Time



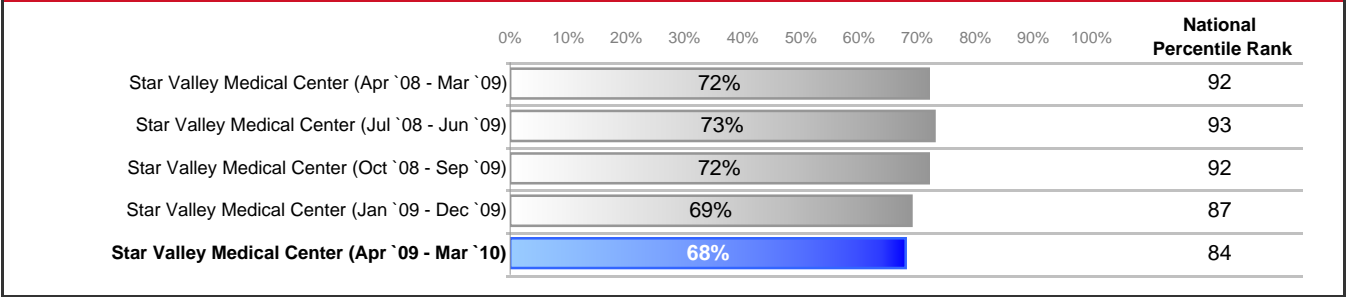
Cleanliness of Room/Bathroom - Competitive Analysis Apr `09 - Mar `10



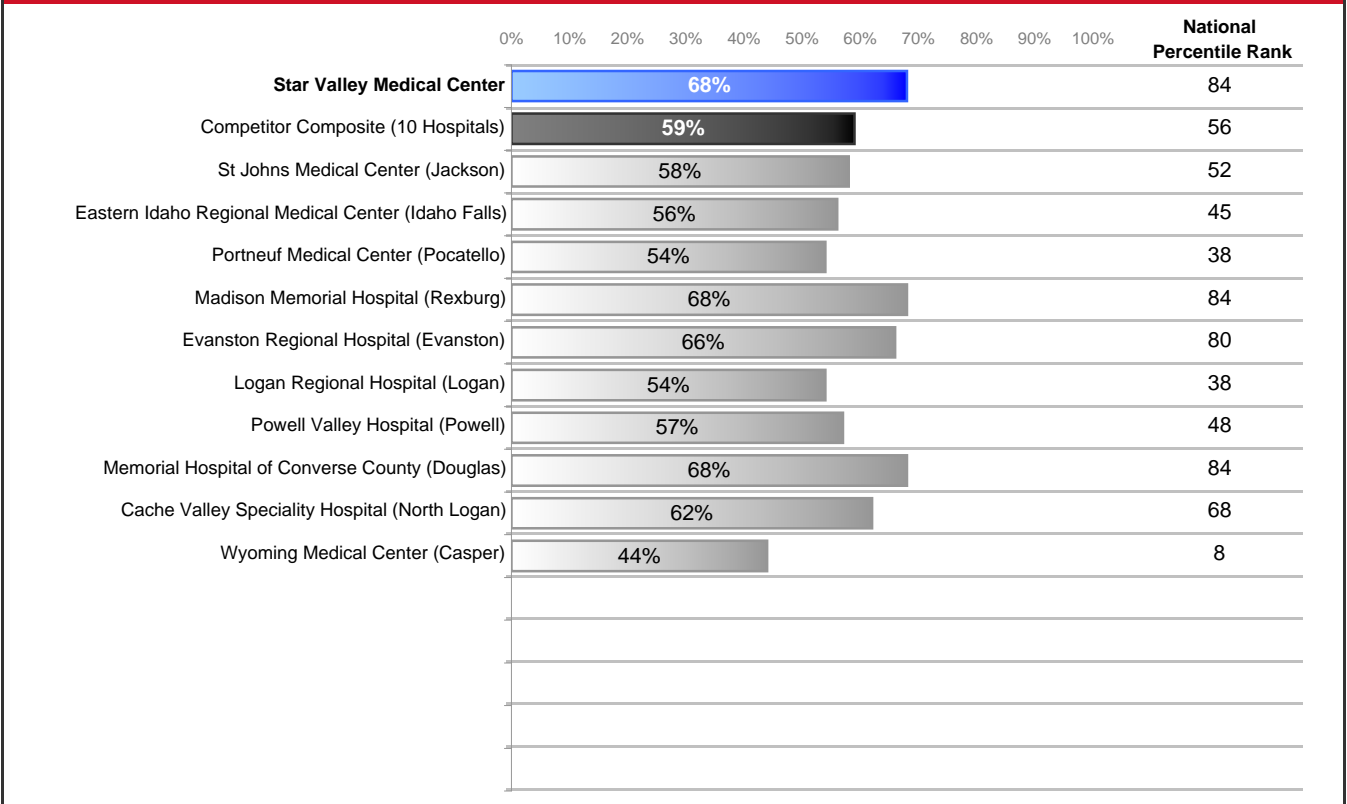
Quietness of Area Around Room at Night - National Comparisons Apr `09 - Mar `10

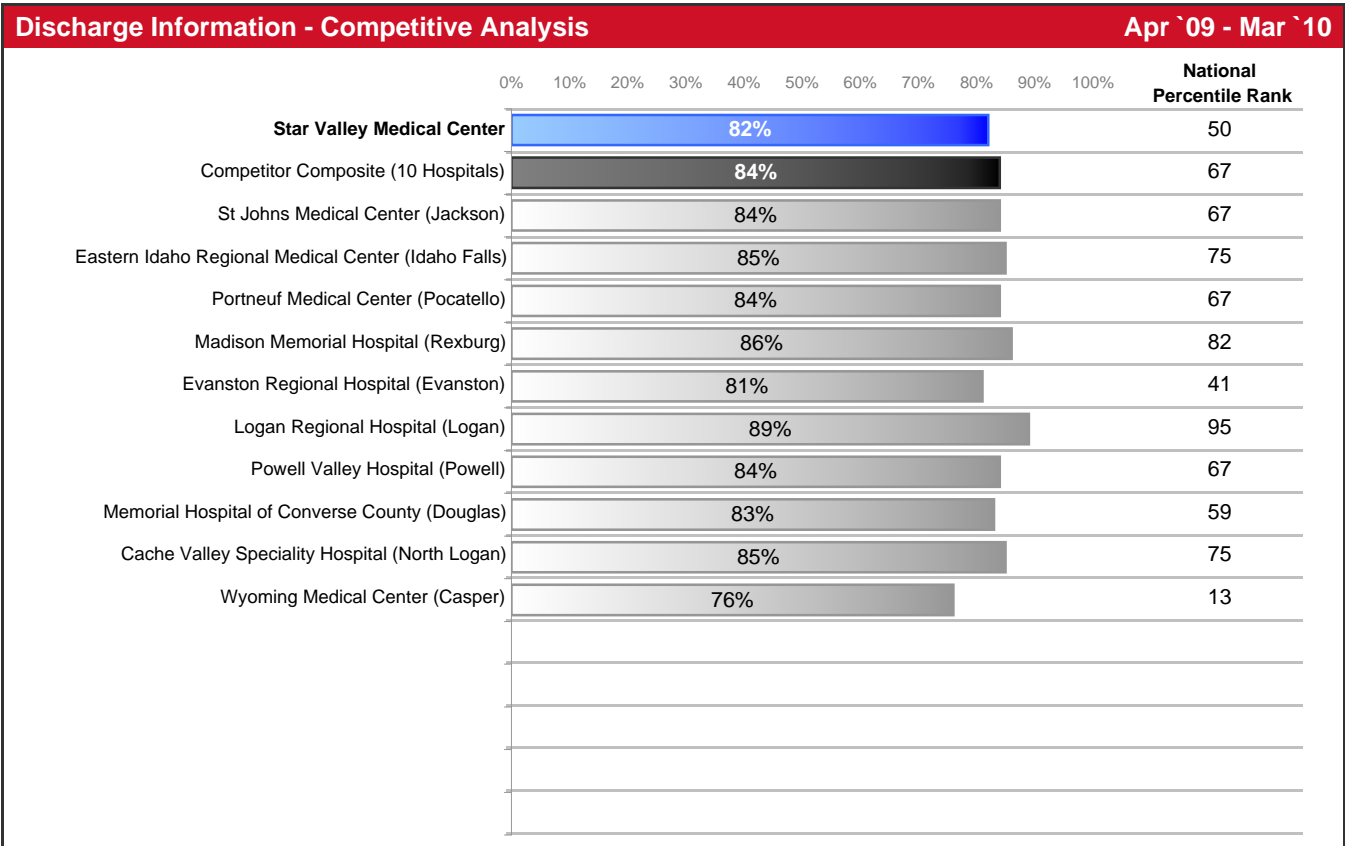
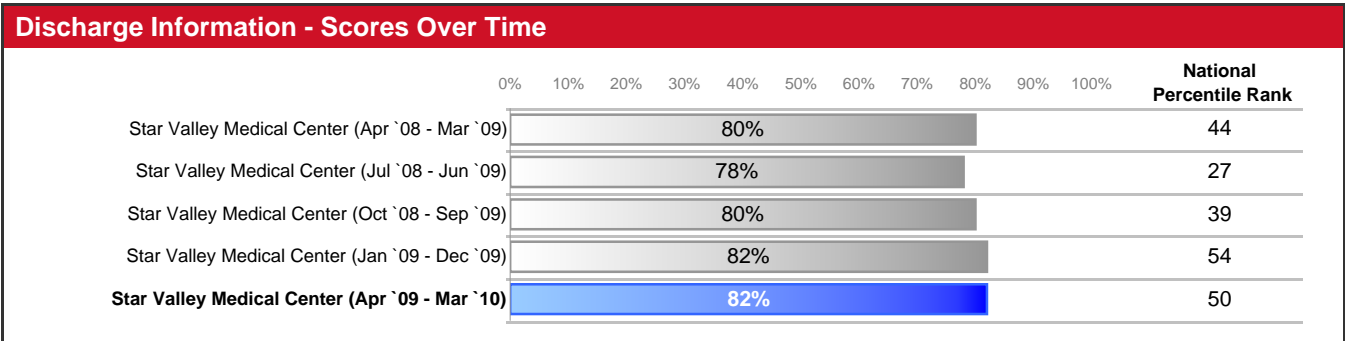
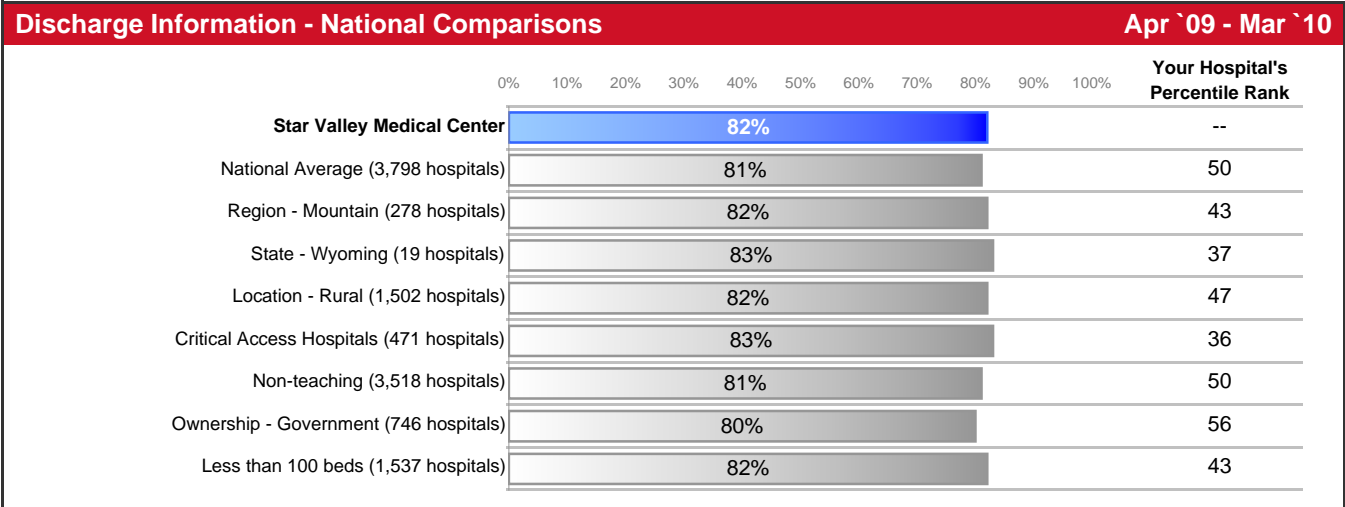


Quietness of Area Around Room at Night - Scores Over Time

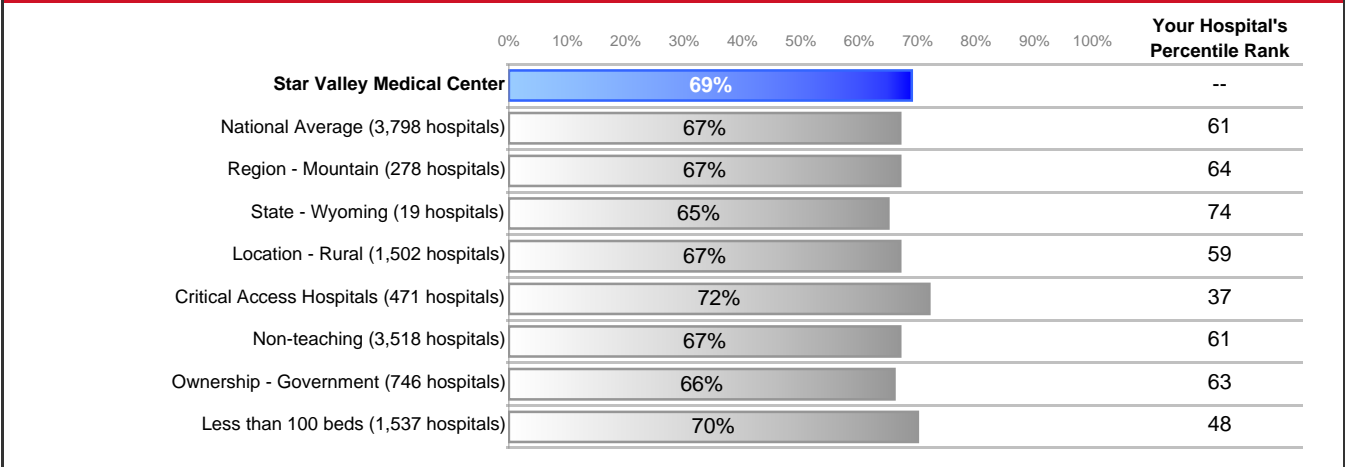


Quietness of Area Around Room at Night - Competitive Analysis Apr `09 - Mar `10

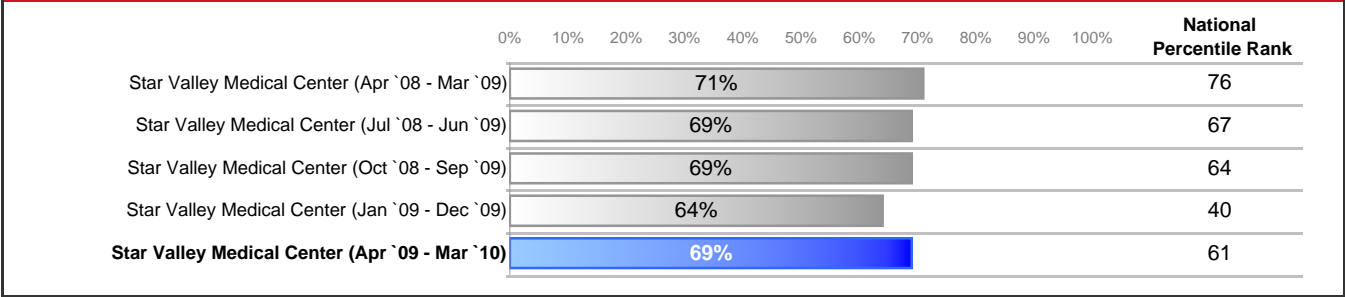




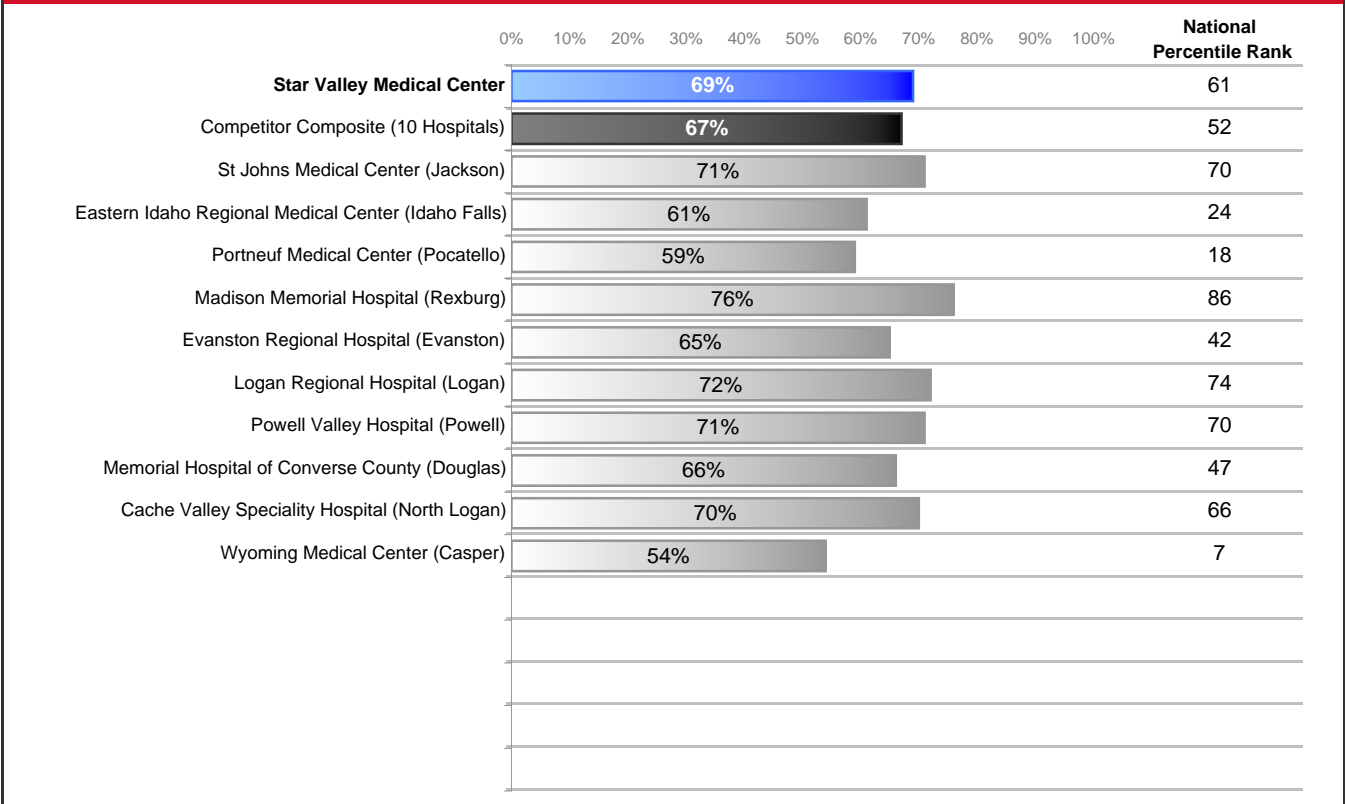
Overall Rating of Hospital - National Comparisons Apr `09 - Mar `10



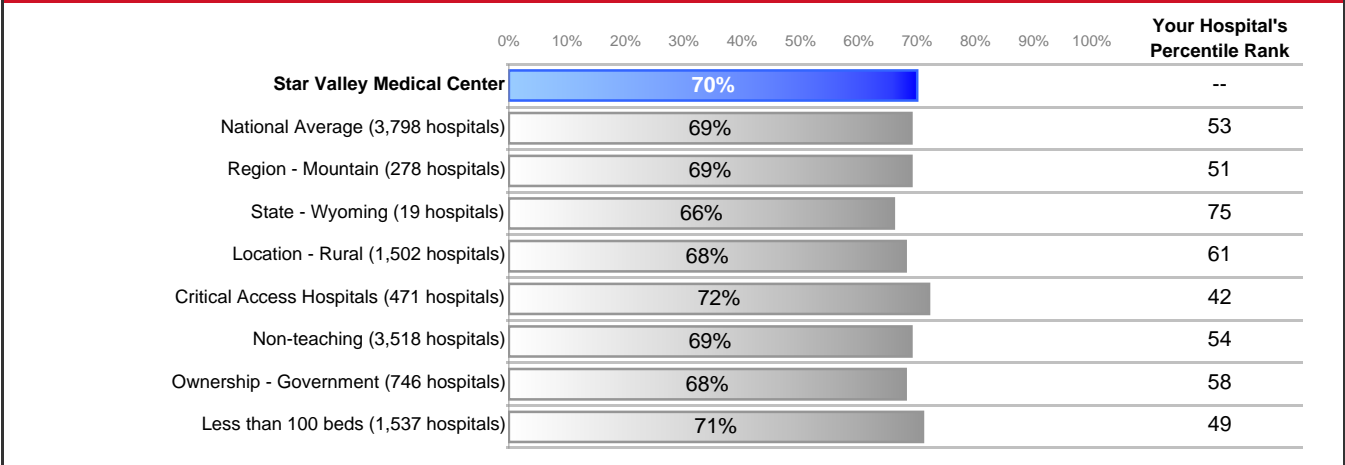
Overall Rating of Hospital - Scores Over Time



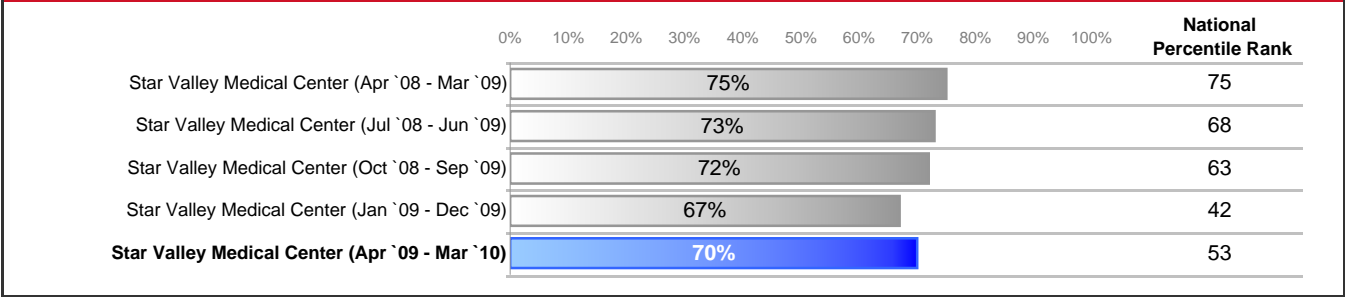
Overall Rating of Hospital - Competitive Analysis Apr `09 - Mar `10



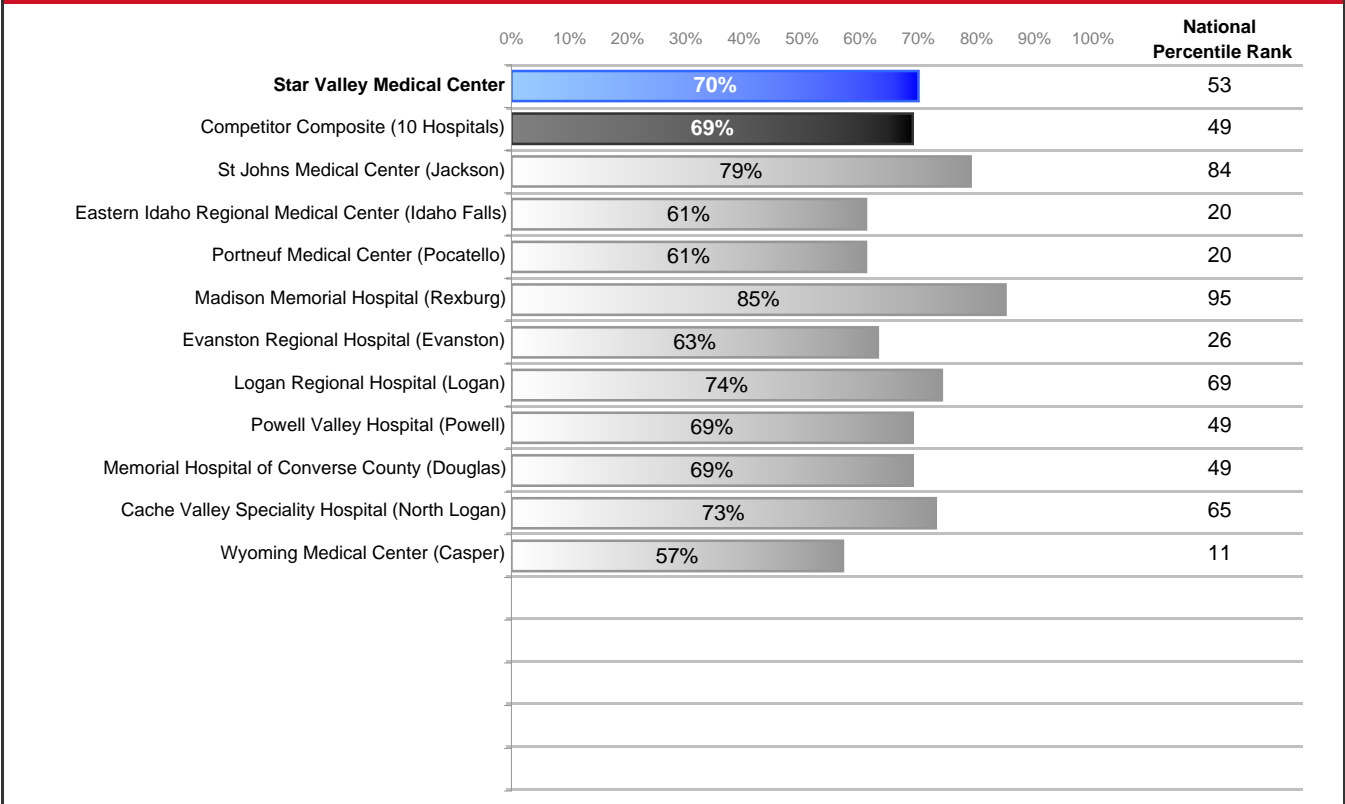
Willingness to Recommend Hospital - National Comparisons Apr `09 - Mar `10



Willingness to Recommend Hospital - Scores Over Time



Willingness to Recommend Hospital - Competitive Analysis Apr `09 - Mar `10

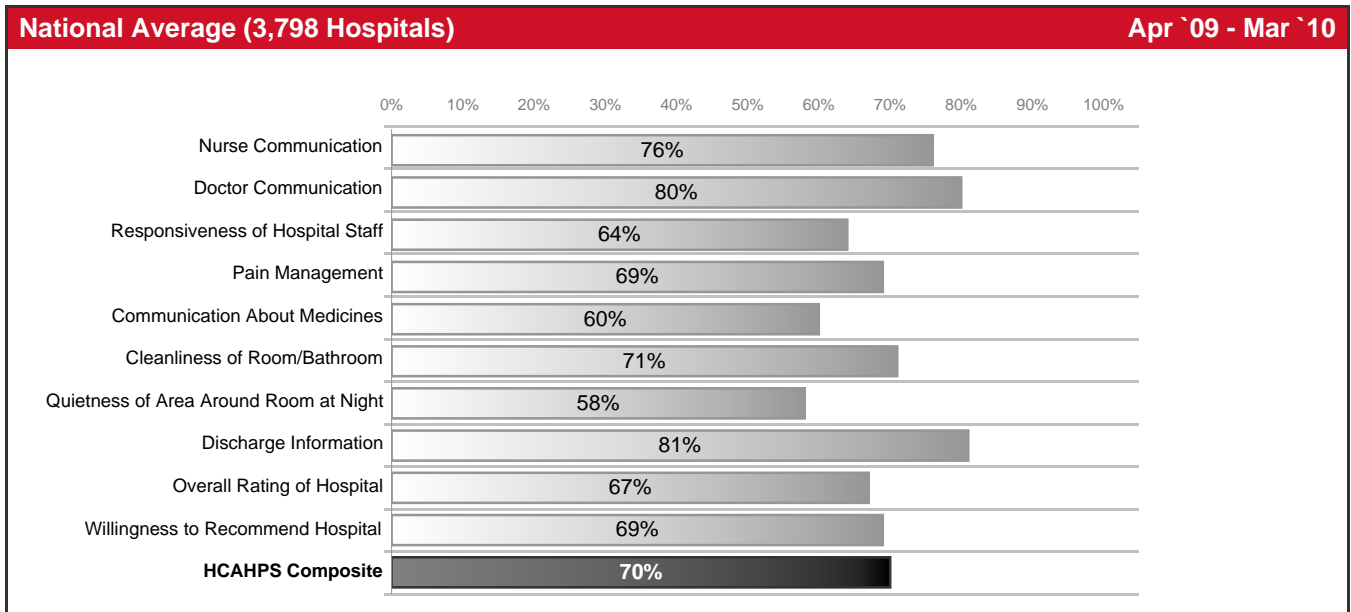




SECTION III

**NATIONAL &
STATE
COMPARISONS**

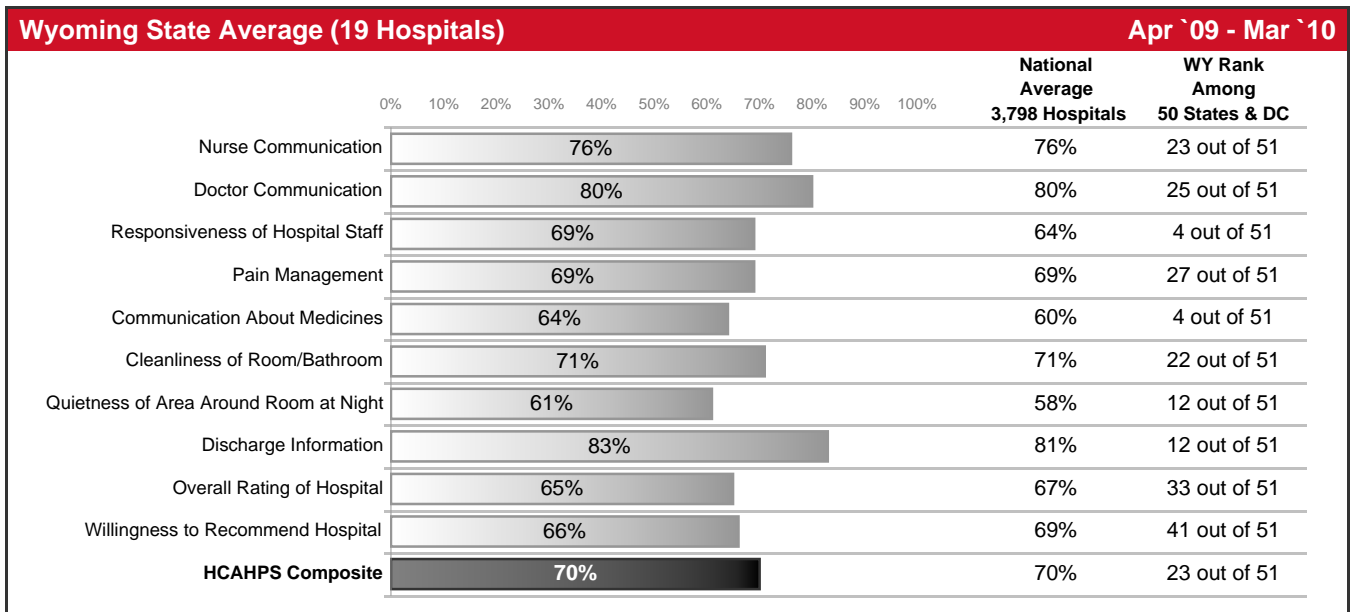
The information in this section is based on HCAHPS survey data released by CMS on December 16, 2010. This public release reflects HCAHPS survey results that were collected from 3,798 hospitals and more than 2 million patients that were discharged from those hospitals during April 2009 through March 2010.



The following is a summary of the national level results for the current period.

- Patients gave hospitals their highest ratings for Discharge Information and Doctor Communication and their lowest ratings for Communication About Medicines and Quietness of Area Around Room at Night.
- The overall results to the survey did NOT change over time.
- Small hospitals (less than 100 beds) receive higher scores on the HCAHPS survey than do larger hospitals.
- Rural hospitals score higher on the HCAHPS survey than do urban hospitals.
- Non-teaching hospitals score higher on the HCAHPS survey than do teaching and academic hospitals.
- Ownership type does NOT have a substantial impact on HCAHPS scores.
- HCAHPS scores are highest for hospitals in the East South Central and West South Central regions and lowest in the Middle Atlantic and Pacific regions.
- Critical Access Hospitals score higher on the HCAHPS survey than do Acute Care Hospitals.

This section of the report presents April 2009 through March 2010 HCAHPS results at the state level, highlighting comparisons between the state of Wyoming and national averages, as well as the distribution of scores within the state.



The following table shows how you compare to the hospitals within your state.

Your Hospital vs. Wyoming (19 Hospitals)		Apr `09 - Mar `10	
	Star Valley Medical Center	Wyoming Average	Your Hospital Rank Among Wyoming Hospitals
Nurse Communication	76%	76%	8 out of 19 hospitals
Doctor Communication	79%	80%	12 out of 19 hospitals
Responsiveness of Hospital Staff	75%	69%	5 out of 19 hospitals
Pain Management	72%	69%	6 out of 19 hospitals
Communication About Medicines	60%	64%	13 out of 19 hospitals
Cleanliness of Room/Bathroom	74%	71%	7 out of 19 hospitals
Quietness of Area Around Room at Night	68%	61%	3 out of 19 hospitals
Discharge Information	82%	83%	12 out of 19 hospitals
Overall Rating of Hospital	69%	65%	5 out of 19 hospitals
Willingness to Recommend Hospital	70%	66%	5 out of 19 hospitals
HCAHPS Composite	73%	70%	4 out of 19 hospitals



APPENDIX

HCAHPS Survey Measures & Survey Questions

Nurse Communication

- Q1 During this hospital stay, how often did nurses treat you with courtesy and respect? (Always/Never)
- Q2 During this hospital stay, how often did nurses listen carefully to you? (Always/Never)
- Q3 During this hospital stay, how often did nurses explain things in a way you could understand? (Always/Never)

Doctor Communication

- Q5 During this hospital stay, how often did doctors treat you with courtesy and respect? (Always/Never)
- Q6 During this hospital stay, how often did doctors listen carefully to you? (Always/Never)
- Q7 During this hospital stay, how often did doctors explain things in a way you could understand? (Always/Never)

Responsiveness of Hospital Staff

- Q4 During this hospital stay, after you pressed the call button, how often did you get help as soon as you wanted it? (Always/Never)
- Q11 How often did you get help in getting to the bathroom or in using a bedpan as soon as you wanted? (Always/Never)

Pain Management

- Q13 During this hospital stay, how often was your pain well controlled? (Always/Never)
- Q14 During this hospital stay, how often did the hospital staff do everything they could to help you with your pain? (Always/Never)

Communication About Medicines

- Q16 Before giving you any new medicine, how often did hospital staff tell you what the medicine was for? (Always/Never)
- Q17 Before giving you any new medicine, how often did hospital staff describe possible side effects in a way you could understand? (Always/Never)

Cleanliness of Room/Bathroom

- Q8 During this hospital stay, how often were your room and bathroom kept clean? (Always/Never)

Quietness of Area Around Room at Night

- Q9 During this hospital stay, how often was the area around your room quiet at night? (Always/Never)

Discharge Information

- Q19 During this hospital stay, did doctors, nurses, or other hospital staff talk with you about whether you would have the help you needed when you left the hospital? (Yes/No)
- Q20 During this hospital stay, did you get information in writing about what symptoms or health problems to look out for after you left the hospital? (Yes/No)

Overall Rating of Hospital

- Q21 Using any number from 0 to 10, where 0 is the worst hospital possible and 10 is the best hospital possible, what number would you use to rate this hospital during your stay? (Best possible/Worst possible)

Willingness to Recommend Hospital

- Q22 Would you recommend this hospital to your friends and family? (Definitely Yes/Definitely No)

Glossary of Terms

HCAHPS: Hospital Consumer Assessment of Healthcare Providers and Systems. The official HCAHPS information website is <http://hcahpsonline.org>.

National & Peer Benchmarks: The National Benchmark is the average for all hospitals that are publicly reporting their HCAHPS scores and is the largest benchmark available in the healthcare field. This list includes acute care and critical access hospitals that participate in the HCAHPS program. The Peer Benchmarks presented throughout the report are subsets of the National Benchmark. Based on the characteristics of your hospital, HealthStream Research has chosen Peer Benchmarks composed of hospitals with similar characteristics.

Percentile Rank: The percentile rank indicates a hospital’s relative position within a benchmark group in terms of the percentage of hospitals it scores higher than. For example, if your hospital were to score at the 80th percentile of the National Database for a given measure, this would mean that your hospital has received a top-box score that is higher than the top-box scores of 80% of the hospitals within the U.S.

Percentile Rank Distribution: It is important to note that the top-box score distribution across all HCAHPS measures is very tight, especially in the middle of the distribution (25th to the 75th percentiles). Small score changes around the national averages result in large percentile differences, while score differences further away from the national averages result in smaller percentile differences.

Top-Box Scores: The HCAHPS Impact Report presents hospital scores in the form of top-box. Top-box scores are the percentage of patients who give the highest score possible for each measure. A list of the scales and top-box definitions are presented below:

HCAHPS Scale	How “Top Box” is Defined
Always, Usually, Sometimes, Never	% saying “Always”
Definitely Yes, Probably Yes, Probably No, Definitely No	% saying “Definitely Yes”
Yes, No	% saying “Yes”
10 (Best Possible Hospital), 0 (Worst Possible Hospital)	% saying “9” or “10”

HCAHPS Composite: HCAHPS Composite is the average of the top-box scores of the ten HCAHPS measures that are reported by CMS.

Competitor Composite: Competitor Composite is the average of the top-box scores for the hospitals that have been selected for your hospital.

Teaching Hospitals: A teaching hospital is a member of AAMC’s *Council of Teaching Hospitals and Health Systems* .

Value-Based Purchasing Program (VBP): A government program that links CMS reimbursement to hospitals’ performance on key quality measures. Value-based purchasing (VBP) is a new policy mechanism that CMS is implementing to transform Medicare from a passive payer of claims to an active purchaser of care based on demonstrated hospital quality. The passage of the healthcare reform bill in March 2010 established a VBP program for hospital payments beginning in FY 2013 based on hospitals’ performance in 2012 on measures that are part of the hospital quality reporting program (including both clinical core measures and HCAHPS survey results). The program stipulates that 1% of payments would be allocated to VBP in FY 2013, 1.25% in 2014, 1.5% in 2015, 1.75% in 2016 and 2% in 2017 and beyond.

HCAHPS – Rating the Patient Experience

Are your scores where patients *want* them to be?

Are your scores where you *need* them to be?

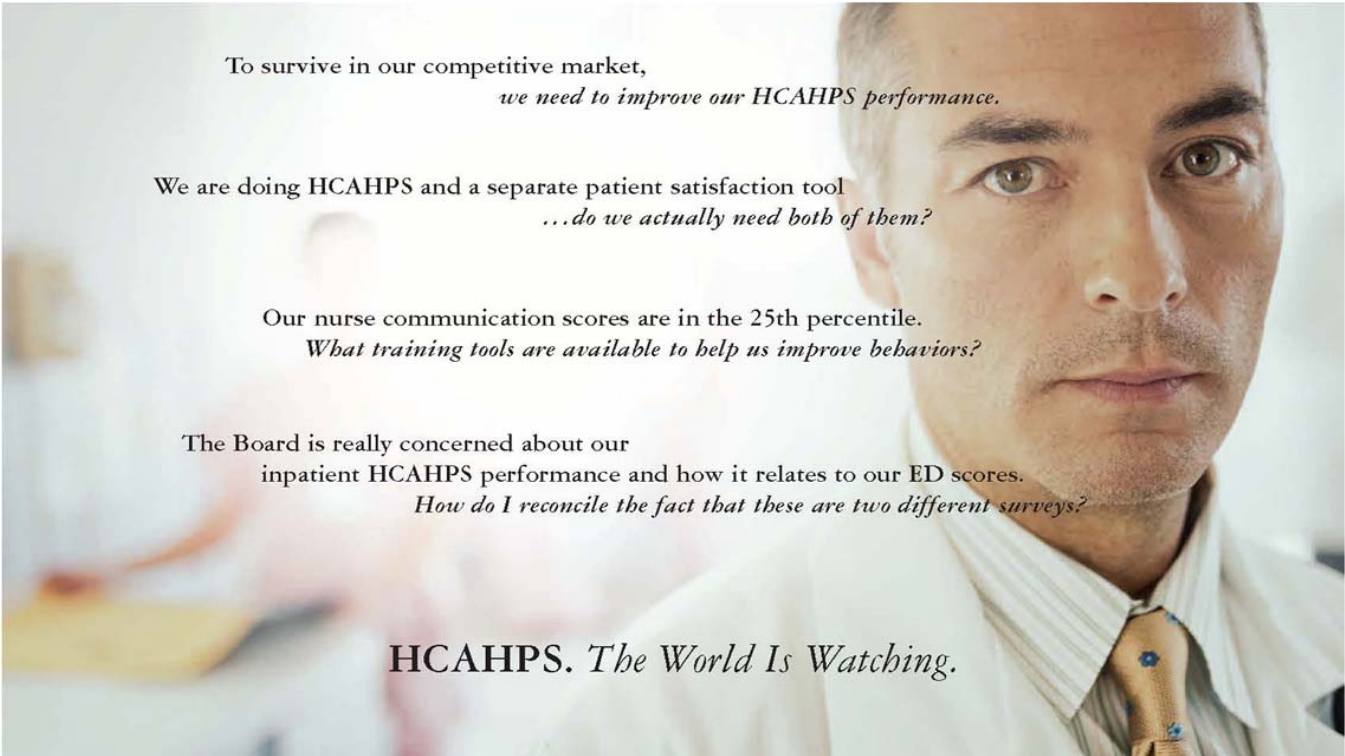
Improving patient satisfaction doesn't come easy.

Success comes from ALWAYS delivering excellent quality care *and* managing perceptions of the care. The scores you receive are based on the entire hospital experience, all the way from doorstep to discharge, driven by the environments you create and every word, gesture, and act that your patients encounter.

Many hospitals had eye-popping experiences with their first public reporting of HCAHPS scores. The best course of action is to deal honestly with your scores and begin a focused and integrated strategy to become the highest scoring institution in your market, and from there to aim for world class.

The key is to act quickly to begin improving your scores. They *are* publicly available, so act now. HealthStream Research will design a proactive strategy to make your hospital the first choice when patients select a facility based on HCAHPS ratings.

Let HealthStream Research show you how to get to the top of the leader board ... and maintain top standing.



To survive in our competitive market,
we need to improve our HCAHPS performance.

We are doing HCAHPS and a separate patient satisfaction tool
...do we actually need both of them?

Our nurse communication scores are in the 25th percentile.
What training tools are available to help us improve behaviors?

The Board is really concerned about our
inpatient HCAHPS performance and how it relates to our ED scores.
How do I reconcile the fact that these are two different surveys?

HCAHPS. *The World Is Watching.*

How Can HealthStream Research Help?

A simple approach to integrate *all* patient research

HealthStream Research consolidates your patient satisfaction research under one integrated suite of surveys, which allows for measurement, accountability, and improvement initiatives to be standardized across *all* patient groups.

Industry-leading tools and resources to help you improve

HCAHPS Preparation and Improvement Library prepares your staff by educating them on the actual survey questions and focusing them on important behaviors and actions that improve patients' perceptions of their care.

Voice of the Patient: A powerful and insightful tool that captures the verbatim responses of patients during the survey process. Instead of being limited to words on a page, your staff can hear the actual voice recordings of patients in a digital audio format.

Action Planning: Robust planning and accountability tools, allowing leadership and management to assign tasks around targeted areas of improvement—while holding employees and managers accountable for measurable results.

Goal Setting for Excellence: The consulting team at HealthStream Research will work with your hospital and department managers to set and then monitor appropriate performance goals. This exercise gives your organization a tool with which to monitor progress and assess accountability for your improvement initiatives.

Business Intelligence: An online reporting system that provides dashboard reports on key metrics, targeted recommendations for improvement, intuitive report generation and scheduling, and advanced analytical tools.

Consulting Support: A full range of consultation services are available from our experts who are completely dedicated to healthcare and truly understand the issues you face each day. Our experts not only understand the healthcare environment, but also have in-depth knowledge of research and how it can be used to propel your organization to new performance levels.

Prepare *now* for the future

CMS is already in the process of implementing surveys for physician office, home health, and ambulatory services patients. Some tools are already available, and more CAHPS tools will be available in the next few years. The best way for hospitals to prepare for these industry shifts is to start using CAHPS-aligned survey instruments *now*. In doing so, any future transition to an official CAHPS survey will be much easier.



CONTACT US

For questions about this report or inquiries about additional services, please contact us at:

(301)-575-9300

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