Mission
...provide an affordable tool to support and direct quality initiatives in small rural facilities across the country.

Vision
...to continue as a nationally recognized initiative demonstrating, supporting and improving the quality of care in America’s rural facilities.

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About QHi

- Quality Health Indicators (QHi) is an economical, quality benchmarking program specifically designed, developed and driven by small rural hospitals and rural health clinics to compare selected performance measures with other similar hospitals and clinics.

- QHi was developed through a partnership of the Kansas Rural Health Options Project (KRHOP), Kansas Department of Health and Environment Office of Rural Health (KDHE), Kansas Hospital Association (KHA) and the Kansas Hospital Education and Research Foundation (KHERF).

- The QHi website is managed by the KHERF.

- Participating hospitals and clinics benchmark against self-defined peer groups to learn from the best practices of other organizations to facilitate the adoption of new processes in four categories of measures:
  - Clinical Quality
  - Workforce
  - Financial and Operational
  - Patient Satisfaction

- QHi allows small rural hospitals and clinics to:
  - Collect, track and trend data unique to their specific environment
  - Evaluate current performance every month and integrate successful solutions from other benchmark hospitals and clinics
  - Participate in a nationally recognized initiative to demonstrate healthcare quality in rural America
Participants

More than 1300 users in 274 small rural hospitals and 141 clinics in 11 states (California, Colorado, Illinois, Kansas, Louisiana, Michigan, Minnesota, New Mexico, Utah, Washington and Wyoming) currently use QHi.

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<th>Clinics</th>
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- **Colorado** Rural Health Center, Marcy Cameron - mc@coruralhealth.org
- Great Plains Health Alliance, KS, Brenda Olson - bolson@gpha.com
- Health Innovations Network of Kansas, Sarah Gideon – sgideon@stormontvail.org
- **Illinois** Critical Access Hospital Network, Angie Charlet - acharlet@icahn.org
- Kansas Dept. of Health & Environment, Cynthia Snyder - Cynthia.snyder@ks.gov
- Kansas Healthcare Collaborative, Michele Clark - mclark@khconline.org
- Kansas Hospital Education & Research Foundation, Sally Othmer - sothmer@kha-net.org
- **Michigan** Center for Rural Health, John Barnas - john.barnas@hc.msu.edu
- **New Mexico** Rural Hospital Network, Stephen Stoddard – stephen.stoddard@nlgh.org
- Northwest Kansas Health Alliance, Shae Veach - shae.veach@haysmed.com
- Rural Health Solutions CA/WY, Rochelle Spinarski - rspinarski@mindspring.com
- Sunflower Health Network, KS, Heather Fuller - hfuller@srhc.com
- Utah Department of Health, Matt McCullough – mmccullough@utah.gov
- **Washington** State Department of Health, Danielle Kunkel- danielle.kunkel@doh.wa.gov
- Washington State Department of Health, Lindy Vincent - lindy.vincent@doh.wa.gov
- Wheat Plains Health and Flint Hills Networks, KS, Dee Dee Dewell - deedee.dewell@via-christi.org
- **Wyoming** Dept. of Health, Kyle Cameron - kyle.cameron@wyo.gov

1/14/2020
Fees

Fee Schedule: 2019-2020

QHi Base fee* for a state/network organization is $14,000. This base fee covers up to 10 participating hospitals.

In addition to the annual base fee, states/networks with greater than 10 participating hospitals will pay as follows:
- $450 per hospital for 11 to 20 participating hospitals
- $250 per hospital for 21 to 50 participating hospitals
- $150 per hospital for 51 to 100 participating hospitals **

The fee for a hospital joining QHi independently is $3,250 annually.

QHi pricing is subject to change for future fiscal years.

The annual fee for clinic participation is $250.

*The Base Fee covers registration of facilities and users into QHi, group and individual training sessions as needed, monthly webinar training sessions, the creation of measure sets, addition of measures and continuous support. Any additional fees for requests that require enhancements or new functionality to the program will be considered on a case by case basis.

** There is no limit to the number of hospitals that a State or Network Organization can bring into QHi, but a State or Network Organization will not be charged for more than one hundred (100) participating hospitals.

Funding

QHi was originally developed and continues to be funded by Medicare Rural Hospital Flexibility Program (FLEX) grant funds from the Health Resources and Services Administration, Office of Rural Health Policy and qualifies for funding through the Small Rural Hospital Improvement Grant Program (SHIP). QHi operations are supported by contributions from participating states, networks, and individual hospitals and clinics. For current pricing and additional information, please contact Stuart Moore, Program Manager QHi, smoore@kha-net.org or Sally Othmer, Senior Director Data and Quality, sothmer@kha-net.org.

Quality Health Indicators:
- Committed to improving the quality of care and financial viability of rural providers since 2003
- Voluntary and user driven.
- Supports regional and facility level initiatives.