



Quality Health Indicators

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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
 - ✓ Employee Contribution
 - ✓ 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 322 small rural hospitals and 111 clinics in 15 states (Arizona, California, Colorado, Illinois, Kansas, Kentucky, Louisiana, Michigan, Minnesota, Missouri, Nebraska, New Mexico, Oregon, Washington and Wyoming) currently use QHi.

| QHi | Hospitals | Clinics |
|-----|-----------|---------|
| AZ | 2 | |
| CA | 20 | 1 |
| CO | 28 | 36 |
| IL | 37 | 24 |
| KS | 118 | 5 |
| KY | 8 | |
| LA | 1 | |
| MI | 30 | 44 |
| MN | 18 | |

| QHi | Hospitals | Clinics |
|--------------|------------|------------|
| MO | 1 | |
| NE | 3 | |
| NM | 11 | |
| OR | 1 | |
| WA | 34 | |
| WY | 10 | 1 |
| Total | 322 | 111 |



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- **Kansas** Dept. of Health & Environment, Kendra Baldrige - kendra.baldrige@ks.gov
- **Kansas** Healthcare Collaborative, Kendra Tinsley - ktinsley@khconline.org
- **Kansas** Hospital Education & Research Foundation, Sally Othmer - sothmer@kha-net.org
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- **New Mexico** Rural Hospital Network, Stephen Stoddard – stephen.stoddard@nlgh.org
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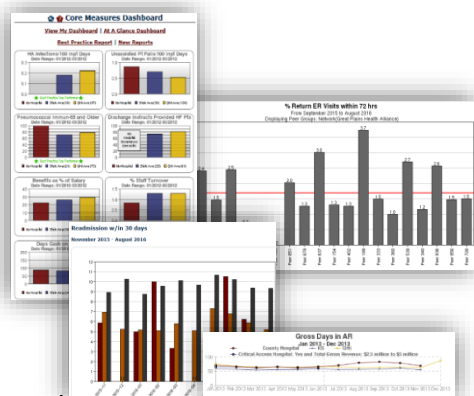
Fees

Fee Schedule: 2018-2019

- The QHi Project fiscal year is based on the Rural Hospital Flexibility Grant Program cycle (September 1 through August 31). The annual state/network organization fee for QHi is \$13,230. This base fee covers up to 10 participating hospitals.
- In addition to the base fee (\$13,230), states/networks with greater than 10 participating hospitals pay \$441 per hospital for 11 to 20 participating hospitals.
- In addition to the base fee (\$13,230) and the fees for the 11 to 20 participating hospitals (\$4,410), states/networks with greater than 20 participating hospitals pay an additional \$220 per hospital not to exceed \$26,440. There is no limit to the number of hospitals that a state/network can bring into QHi, but a state/network are not charged for more than 60 participating hospitals.
- The “number of participating hospitals” is determined by the number of hospitals registered in QHi at the time the state/network is invoiced. States/networks can bring in new hospitals throughout the year with no added expense. The additional facilities will be considered on the next year’s invoice.
- The fee for a hospital joining QHi independently is \$3,307 annually.
- Fees may be prorated on a quarterly basis for states/networks that join during a fiscal year or for those states/networks that require quarterly invoices to meet grant guidelines unique to each participating state/network.
- *QHi pricing is subject to change for future fiscal years.*
- The annual fee for clinic participation is \$220.

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.