

**Exhibit “A-1”**

## Winnie-Stowell Hospital District

## Balance Sheet

11/10/23

As of October 31, 2023

Accrual Basis

	<u>Oct 31, 23</u>
<b>ASSETS</b>	
<b>Current Assets</b>	
<b>Checking/Savings</b>	
100 Prosperity Bank -Checking	447,582.61
102 First Financial Bank	
102b FFB #4846 DACA	13,736,842.69
102c FFB #7190 Money Market	229,487.48
102d FFB #7639 CD	8,200,000.00
<b>Total 102 First Financial Bank</b>	<b>22,166,330.17</b>
105 TexStar	730,393.71
108 Stellar Bank NH Combined	3,219,914.62
<b>Total Checking/Savings</b>	<b>26,564,221.11</b>
<b>Other Current Assets</b>	
110 Sales Tax Receivable	136,456.87
114 Accounts Receivable NH	58,870,048.66
115 Hosp Uncomp Care Receivable	709,653.11
116 - A/R CHOW - LOC	
116.01 -Gulf Coast LOC Copperas	166,251.90
116.02 -Gulf Coast LOC Corrigan	487,051.97
116.03 -Gulf Coast LOC Hemphill	297,139.83
116.04 -Gulf Coast LOC Oak Vill	206,607.53
116.05 -Gulf Coast LOC ParkView	279,146.23
116.06 -Gulf Coast LOC Winnie L	512,967.93
116.07 HMG LOC Treviso	600,000.00
<b>Total 116 - A/R CHOW - LOC</b>	<b>2,549,165.39</b>
117 NH - QIPP Prog Receivable	9,907,247.58
118 Prepaid Expense	36,494.65
119 Prepaid IGT	9,569,298.98
<b>Total Other Current Assets</b>	<b>81,778,365.24</b>
<b>Total Current Assets</b>	<b>108,342,586.35</b>
<b>Fixed Assets</b>	
120 Equipment	140,654.96
121 Office Building	129,483.00
122 Highway 124 Property	1,197,231.85
123 Highway 124 Building	113,613.00
125 Accumulated Depreciation	-154,033.64
<b>Total Fixed Assets</b>	<b>1,426,949.17</b>
<b>TOTAL ASSETS</b>	<b>109,769,535.52</b>
<b>LIABILITIES &amp; EQUITY</b>	
<b>Liabilities</b>	
<b>Current Liabilities</b>	
<b>Other Current Liabilities</b>	
190 NH Payables Combined	3,260,703.46
201 NHP Accounts Payable	5,120,910.97
204 FFB Line of Credit	1,842,255.33
206 FFB Loan (11 Mth)	12,163,680.46
225 FUTA Tax Payable	112.00
230 SUTA Tax Payable	251.31
235 Payroll Liabilities	1,373.36
240 Accounts Payable NH	56,660,471.79
<b>Total Other Current Liabilities</b>	<b>79,049,758.68</b>
<b>Total Current Liabilities</b>	<b>79,049,758.68</b>
<b>Total Liabilities</b>	<b>79,049,758.68</b>

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11/10/23

Accrual Basis

# Winnie-Stowell Hospital District

## Balance Sheet

As of October 31, 2023

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	<u>Oct 31, 23</u>
Equity	
300 Net Assets, Capital, net of	121,283.00
310 Net Assets-Unrestricted	11,219,913.13
315 Committed for Capital Proj	450,000.00
Retained Earnings	9,730,237.64
Net Income	9,198,343.07
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Total Equity	30,719,776.84
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<b>TOTAL LIABILITIES &amp; EQUITY</b>	<b>109,769,535.52</b>
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**Winnie-Stowell Hospital District**  
**Profit & Loss Budget vs. Actual**  
**January through October 2023**

	Jan - Oct 23	Budget	\$ Over Budget	% of Budget
<b>Ordinary Income/Expense</b>				
<b>Income</b>				
400 Sales Tax Revenue	789,035.34	770,000.00	19,035.34	102.5%
405 Investment Income	279,071.90	260,000.00	19,071.90	107.3%
407 Rental Income	35,000.00	69,500.00	-34,500.00	50.4%
409 Tobacco Settlement	14,398.30	16,000.00	-1,601.70	90.0%
410 Hosp Uncomp. Care Repayment	739,288.65	1,034,997.04	-295,708.39	71.4%
415 Nursing Home - QIPP Program	54,205,793.54	63,743,179.72	-9,537,386.18	85.0%
<b>Total Income</b>	<b>56,062,587.73</b>	<b>65,893,676.76</b>	<b>-9,831,089.03</b>	<b>85.1%</b>
<b>Gross Profit</b>	<b>56,062,587.73</b>	<b>65,893,676.76</b>	<b>-9,831,089.03</b>	<b>85.1%</b>
<b>Expense</b>				
500 Admin-Administrative Salary	67,309.90	80,312.00	-13,002.10	83.8%
502 Admin-Administrative Assnt	9,144.50	13,000.00	-3,855.50	70.3%
503 Admin - Staff Incentive Pay	0.00	4,000.00	-4,000.00	0.0%
504 Admin-Administrative PR Tax	7,968.49	10,025.00	-2,056.51	79.5%
505 Admin-Board Bonds	0.00	250.00	-250.00	0.0%
515 Admin-Bank Service Charges	1,024.92	1,400.00	-375.08	73.2%
521 Professional Fees - Acctng	6,993.70	11,000.00	-4,006.30	63.6%
522 Professional Fees-Auditing	44,000.00	44,000.00	0.00	100.0%
523 Professional Fees - Legal	30,000.00	75,000.00	-45,000.00	40.0%
550 Admin-D&O / Liability Ins.	15,681.26	16,000.00	-318.74	98.0%
560 Admin-Cont Ed, Travel	0.00	2,500.00	-2,500.00	0.0%
562 Admin-Travel&Mileage Reimb.	5,226.02	5,250.00	-23.98	99.5%
569 Admin-Meals	1,390.03	1,500.00	-109.97	92.7%
570 Admin-District/County Prom	0.00	5,000.00	-5,000.00	0.0%
571 Admin-Office Supp. & Exp.	5,408.20	10,000.00	-4,591.80	54.1%
572 Admin-Web Site	645.00	1,000.00	-355.00	64.5%
573 Admin-Copier Lease/Contract	2,548.47	3,000.00	-451.53	84.9%
575 Admin-Cell Phone Reimburse	1,500.00	1,800.00	-300.00	83.3%
576 Admin-Telephone/Internet	2,835.84	3,500.00	-664.16	81.0%
577 - Admin Dues	1,895.00	1,895.00	0.00	100.0%
591 Admin-Notices & Fees	2,384.40	4,000.00	-1,615.60	59.6%
592 Admin Office Rent	3,400.00	4,080.00	-680.00	83.3%
593 Admin-Utilities	2,719.20	4,000.00	-1,280.80	68.0%
594 Admin-Casualty & Windstorm	0.00	2,800.00	-2,800.00	0.0%
597 Admin-Flood Insurance	0.00	1,800.00	-1,800.00	0.0%
598 Admin-Building Maintenance	6,419.00	6,000.00	419.00	107.0%
<b>600 - IC Healthcare Expenses</b>				
601 IC Provider Expenses				
601.01a IC Pmt to Hosp-Indigent	374,962.48	435,700.00	-60,737.52	86.1%
601.01b IC Pmt to Coastal (Ind)	0.00	147,316.76	-147,316.76	0.0%
601.01c IC Pmt to Thompson	13,139.94	18,000.00	-4,860.06	73.0%
601.02 IC Pmt to UTMB	205,227.15	300,000.00	-94,772.85	68.4%
601.03 IC Special Programs				
601.03a Dental	20,525.76	24,000.00	-3,474.24	85.5%
601.03b IC Vision	1,035.00	1,500.00	-465.00	69.0%
601.04 IC-Non Hosp Cost-Other	27,372.02	35,000.00	-7,627.98	78.2%
601.05 IC - Chairty Care Prog	0.00	25,000.00	-25,000.00	0.0%
<b>Total 601.03 IC Special Programs</b>	<b>48,932.78</b>	<b>85,500.00</b>	<b>-36,567.22</b>	<b>57.2%</b>
<b>Total 601 IC Provider Expenses</b>	<b>642,262.35</b>	<b>986,516.76</b>	<b>-344,254.41</b>	<b>65.1%</b>
602 IC-WCH 1115 Waiver Prog	123,573.14	129,340.00	-5,766.86	95.5%
603 IC-Pharmaceutical Costs	47,597.46	56,650.00	-9,052.54	84.0%
605 IC-Office Supplies/Postage	171.99	2,000.00	-1,828.01	8.6%
611 IC-Indigent Care Dir Salary	54,506.70	65,264.00	-10,757.30	83.5%
612 IC-Payroll Taxes -Ind Care	2,127.72	5,125.00	-2,997.28	41.5%
615 IC-Software	12,461.00	13,308.00	-847.00	93.6%
616 IC-Travel	294.93	600.00	-305.07	49.2%
617 Youth Programs				
617.01 Youth Counseling	10,285.00	25,000.00	-14,715.00	41.1%
617.02 Irlen Program	0.00	600.00	-600.00	0.0%
<b>Total 617 Youth Programs</b>	<b>10,285.00</b>	<b>25,600.00</b>	<b>-15,315.00</b>	<b>40.2%</b>
<b>Total 600 - IC Healthcare Expenses</b>	<b>893,280.29</b>	<b>1,284,403.76</b>	<b>-391,123.47</b>	<b>69.5%</b>
<b>620 WSHD - Grants</b>				
620.01 WCH/RMC				
620.01a Hosp Uncomp. Care Repay	739,283.65	1,034,997.04	-295,713.39	71.4%
620.01b WCH/RMC - Other	260,765.96	260,765.96	0.00	100.0%
620.01 WCH/RMC - Other	0.00	0.00	0.00	0.0%
<b>Total 620.01 WCH/RMC</b>	<b>1,000,049.61</b>	<b>1,295,763.00</b>	<b>-295,713.39</b>	<b>77.2%</b>



**Winnie-Stowell Hospital District**  
**Profit & Loss Budget vs. Actual**  
**January through October 2023**

	Jan - Oct 23	Budget	\$ Over Budget	% of Budget
<b>620.03 WSVEMS</b>				
620.03c WSVEMS - Salaries	35,924.67	0.00	35,924.67	100.0%
620.03 WSVEMS - Other	89,553.45	168,800.00	-79,246.55	53.1%
<b>Total 620.03 WSVEMS</b>	125,478.12	168,800.00	-43,321.88	74.3%
<b>620.05 East Chambers ISD</b>	209,539.77	253,693.56	-44,153.79	82.6%
<b>620.06 FQHC(Coastal)</b>	984,136.41	1,828,224.00	-844,087.59	53.8%
<b>620.07 Marcelous Williams</b>	57,590.11	57,742.12	-152.01	99.7%
<b>620.09 Admin-Cont Ed-Med Pers.</b>	3,976.58	3,975.00	1.58	100.0%
<b>Total 620 WSHD - Grants</b>	2,380,770.60	3,608,197.68	-1,227,427.08	66.0%
<b>630 NH Program</b>				
630 NH Program-Mgt Fees	15,007,540.11	20,245,345.12	-5,237,805.01	74.1%
631 NH Program-IGT	23,180,121.09	28,676,162.02	-5,496,040.93	80.8%
632 NH Program-Telehealth Fees	241,520.12	300,870.04	-59,349.92	80.3%
633 NH Program-Acctg Fees	62,943.30	73,225.00	-10,281.70	86.0%
634 NH Program-Legal Fees	269,854.73	350,000.00	-80,145.27	77.1%
635 NH Program-LTC Fees	2,490,000.00	3,078,000.00	-588,000.00	80.9%
637 NH Program-Interest Expense	3,104,504.37	3,253,606.36	-149,101.99	95.4%
638 NH Program-Loan/Bank Fees	710,484.41	710,500.00	-15.59	100.0%
639 NH Program-Appraisal	49,029.25	49,030.00	-0.75	100.0%
<b>Total 630 NH Program</b>	45,115,997.38	56,736,738.54	-11,620,741.16	79.5%
<b>674 - Property Acquisition</b>	636,420.36	650,000.00	-13,579.64	97.9%
<b>675 HWY 124 Expenses</b>				
675.01 Tony's BBQ Bldg Expenses	0.00	25,000.00	-25,000.00	0.0%
675.02 Clinic Expenses	0.00	10,000.00	-10,000.00	0.0%
675.03 - Clinic Property Ins	17,403.92	17,405.00	-1.08	100.0%
<b>Total 675 HWY 124 Expenses</b>	17,403.92	52,405.00	-35,001.08	33.2%
<b>Payroll Expenses</b>	0.00			
<b>Total Expense</b>	49,262,366.48	62,644,856.98	-13,382,490.50	78.6%
<b>Net Ordinary Income</b>	6,800,221.25	3,248,819.78	3,551,401.47	209.3%
<b>Other Income/Expense</b>				
<b>Other Income</b>				
416 Nursing Home Operations	297,876,291.66			
Covid Provider Relief Funds	0.00			
<b>Total Other Income</b>	297,876,291.66			
<b>Other Expense</b>				
640 Nursing Home Oper. Expenses	295,478,169.84			
<b>Total Other Expense</b>	295,478,169.84			
<b>Net Other Income</b>	2,398,121.82			
<b>Net Income</b>	<u>9,198,343.07</u>	<u>3,248,819.78</u>	<u>5,949,523.29</u>	<u>283.1%</u>

# **Exhibit “A-2”**

**WSHD Treasurer's Report**

Reporting Date: <b>Wednesday, November 15, 2023</b>						
Pending Expenses		For	Amount	Funds Summary		Totals
Indigent Healthcare Solutions	Inv #76781		\$1,566.00	Prosperity Operating (Unrestricted)		\$471,299.09
Brookshire Brothers	Indigent Care		\$3,115.77	First Financial DACA (Unrestricted)		\$12,835,800.25
Wilcox Pharmacy	Indigent Care		\$1,694.81	First Financial DACA (Restricted)		\$2,215,345.93
UTMB at Galveston	Indigent Care		\$23,521.97	First Financial Money Market (Restricted)		\$229,487.48
UTMB Faculty Group	Indigent Care		\$3,761.63	TexStar (Restricted)		\$730,393.71
Thompson Outpatient Clinic	Indigent Care		\$2,362.69	FFB CD Balance		\$8,200,000.00
Alliance Medical Services	Indigent Care		\$530.00	Total District Funds		\$24,682,326.45
Winnie Family Dental	SP Program		\$140.00	Less First Financial (Restricted)		(\$2,215,345.93)
Kalos Counseling (Benjamin Odom)	Youth Counseling		\$340.00	Less TexStar Reserve Account		(\$730,393.71)
Technology Solutions of Tx	Inv #1820		\$95.00	Less LOC Outstanding		(\$2,142,255.33)
Felipe Ojedia-Yard Service	Inv #1043		\$350.00	Less First Financial Money Market (Restricted)		(\$229,487.48)
Graciela Chavez-Office Cleaning	Inv #965965		\$120.00	Less Committed Funds (See Total Commitment)		(\$2,373,123.81)
Benckenstein & Oxford	Inv #509.12		\$19,760.00	Cash Position (Less First Financial Restricted)		\$19,133,975.53
Hubert Oxford	Legal Retainer		\$1,000.00	Pending Expenses		\$324,184.57
Makayla Vidal	Inv #00033		\$10,071.25	Ending Balance (Cash Position-Pending Expenses)		\$19,458,160.10
American Education Services	Grant S Stern-Student Loan		\$150.14	*Total Funds (Ending Balance+LOC Outstanding+QIPP Funds Outstanding+Outstanding Chow Loans)		\$29,155,642.24
US Department of Education	Grant B Odom-Student Loan		\$720.62	<b>Prior Month</b>		
Winnie Community Hospital	WCH DY8 Recoup Demand		\$147,856.73	Prosperity Operating (Unrestricted)		\$498,270.87
Coastal Gateway	Grant Nov Request		\$93,802.96	First Financial (Unrestricted)		\$12,080,652.20
J&W AC & Heating	Inv #365318		\$295.00	First Financial (Restricted)		\$2,464,599.10
The Seabreeze Beacon	Inv #6889		\$300.00	First Financial Money Market (Restricted)		\$13,428,373.41
Snider Law Firm	Inv Professional Svs		\$4,680.00	TexStar (Restricted)		\$727,106.95
Teo Arteaga	Inv #080851 (CGHC-Landscaping)		\$7,700.00	FFB CD Balance		\$8,200,000.00
Todd Swonke Agency	Inv #17258 Bond Renewal BW		\$50.00	Total District Funds		\$37,399,002.52
Todd Swonke Agency	Inv #17259 Bond Renewal AS		\$50.00	Less First Financial (Restricted)		(\$2,464,599.10)
Todd Swonke Agency	Inv #17262 Bond Renewal EM		\$50.00	Less TexStar Reserve Account		(\$727,106.95)
Todd Swonke Agency	Inv #17263 Bond Renewal JR		\$50.00	Less LOC Outstanding		(\$1,842,255.33)
Todd Swonke Agency	Inv #17261 Bond Renewal KV		\$50.00	Less First Financial Money Market (Restricted)		(\$13,428,373.41)
Winnie Community Hospital	1/2 WCH Closing		\$3,141.34	Less Committed Funds (See Total Commitment)		(\$2,752,350.74)
<b>Total Pending Expenses:</b>			<b>\$324,184.57</b>	Cash Position (Less First Financial Restricted)		\$18,026,572.33
				Pending Expenses		\$442,767.08
				Ending Balance (Cash Position-Pending Expenses)		\$18,469,339.41
				Total Funds (Ending Balance+LOC Outstanding+QIPP Funds Outstanding+Committed Funds)		\$26,646,424.26

First Financial Bank Reconciliations					
FFB Balance	\$15,051,146.17				
	Restricted Funds	Total Scheduled Payment	Balance Received	Balance Due	Due to District
<b>Gross Yr. 6 &amp; 7, Component 1-IGT 12</b>					
June (2nd Half) - remainder to be received	\$0.00	\$79,569.10	\$0.00	\$79,569.10	\$0.00
July (2nd Half) - remainder to be received	\$0.00	\$174,175.98	\$0.00	\$174,175.98	\$0.00
August (2nd Half)	\$0.00	\$170,129.00	\$0.00	\$170,129.00	\$0.00
September (1st Half) - YR7	\$1,234,507.95	\$2,196,777.54	\$1,234,507.95	\$962,269.59	\$0.00
<b>Total Component 1, IGT 11</b>	<b>\$1,234,507.95</b>	<b>\$2,620,651.62</b>	<b>\$1,234,507.95</b>	<b>\$1,386,143.67</b>	<b>\$0.00</b>
<b>11 Month Set Aside (FFB)</b>					
Remainder to be received for June (2nd Half)	\$0.00	\$79,569.10	\$0.00	\$79,569.10	\$0.00
Remainder to be received for July (2nd Half)	\$0.00	\$174,175.98	\$0.00	\$174,175.98	\$0.00
August (2nd Half)	\$0.00	\$170,129.00	\$0.00	\$170,129.00	\$0.00
September (1st Half)	\$1,234,507.95	\$2,196,777.54	\$1,234,507.95	\$962,269.59	\$0.00
<b>Total Loan Set Aside</b>	<b>\$1,234,507.95</b>	<b>\$2,620,651.62</b>	<b>\$1,234,507.95</b>	<b>\$1,386,143.67</b>	<b>\$0.00</b>
<b>Yr. 6 &amp; 7, Component 2 (Public &amp; Private)</b>					
Q4-Comp. 2-June	\$347,341.02	\$646,722.97	\$646,722.97	\$0.00	\$299,381.96
Q4-Comp. 2-July	\$332,564.41	\$617,169.75	\$617,169.75	\$0.00	\$284,605.35
Q4-Comp. 2-August	\$327,694.10	\$607,429.13	\$607,429.13	\$0.00	\$279,735.04
Q1-Comp. 2-September	\$192,177.20	\$598,699.31	\$336,395.34	\$262,303.97	\$144,218.14
<b>Total Component 2 due to MGRs.</b>	<b>\$1,007,599.52</b>	<b>\$2,470,021.16</b>	<b>\$2,207,717.19</b>	<b>\$262,303.97</b>	<b>\$1,007,940.48</b>
<b>Yr. 6, Component 3 (Public &amp; Private)</b>					
Yr. 6, Component 3 Q4 (June to August)	\$0.00	\$2,542,135.90	\$0.00	\$2,542,135.90	\$0.00
<b>Total Component 3 due to MGRs</b>	<b>\$0.00</b>	<b>\$2,542,135.90</b>	<b>\$0.00</b>	<b>\$2,542,135.90</b>	<b>\$0.00</b>
<b>Yr. 6, Component 4 (Public Only)</b>					
Yr. 6, Component 3 Q4 (June to August)	\$0.00	\$2,136,568.56	\$0.00	\$2,136,568.56	\$0.00
<b>Total Component 4 due to MGRs</b>	<b>\$0.00</b>	<b>\$2,136,568.56</b>	<b>\$0.00</b>	<b>\$2,136,568.56</b>	<b>\$0.00</b>
<b>Yr. 6, Lapse Funds</b>					
Yr. 6, Component Lapse Q4 (June to August)	\$0.00	\$2,920,287.85	\$0.00	\$2,920,287.85	\$0.00
<b>Total Lapse Funds 4 due to MGRs</b>	<b>\$0.00</b>	<b>\$2,920,287.85</b>	<b>\$0.00</b>	<b>\$2,920,287.85</b>	<b>\$0.00</b>
<b>Variance Payments (Component 1, 2, 3, 4, and Lapsing Funds)</b>					
Variance June	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Variance July	(\$30,933.49)	(\$61,866.97)	(\$61,866.97)	\$0.00	(\$30,933.49)
Variance August	(\$33,551.48)	(\$108,781.06)	(\$67,102.95)	(\$41,678.11)	(\$33,551.48)
Variance Q4	\$0.00	(\$17,859.22)	\$0.00	(\$17,859.22)	\$0.00
Variance September	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>Variance Payment Totals</b>	<b>(\$64,484.96)</b>	<b>(\$188,507.25)</b>	<b>(\$128,969.92)</b>	<b>(\$59,537.33)</b>	<b>(\$64,484.96)</b>

Adjustment Payments (Less: Mission, Red Oak, and Texarkana)					
QIPP YR 4 Adjustment 3	\$333.36	(\$1,306.36)	\$666.71	(\$1,973.07)	\$333.36
QIPP YR 4 IGT Recon	\$27,682.56	\$56,310.57	\$55,365.11	\$945.46	\$27,682.56
<b>Total Adjustment &amp; Reconciliation Payment</b>	<b>\$28,015.91</b>	<b>\$55,004.21</b>	<b>\$56,031.82</b>	<b>(\$1,027.61)</b>	<b>\$28,015.91</b>
Adjustment & Refund Payments (Mission, Red Oak, and Texarkana)					
QIPP YR 4 Adjustment 3	\$13.75	(\$210.40)	\$27.50	(\$237.90)	\$13.75
<b>Total Adjustment &amp; Reconciliation Payment</b>	<b>\$13.75</b>	<b>(\$210.40)</b>	<b>\$27.50</b>	<b>(\$237.90)</b>	<b>\$13.75</b>
<b>Non-QIPP Funds</b>	<b>\$9,693.76</b>				
Restricted	\$2,215,345.93				
Unrestricted	\$12,835,800.25				
<b>Total Funds</b>	<b>\$15,051,146.17</b>				
Committed Funds					
Commitment	Total Initial Commitment	YTD Paid by District	Committed Balance		
1. FQHC Grant Funding-2023	\$1,190,112.00	\$984,136.41	\$205,975.59	January through October payments included. Total Initial is \$914,112 + 276,000 approved for marketing.	
2. Hospital-DY 8 Repayment	\$2,306,431.87	\$739,283.65	\$1,567,148.22		
3. CHOW Interim Working Capital Loan	\$1,500,000.00	\$900,000.00	\$600,000.00		
<b>Total Commitments</b>	<b>\$4,996,543.87</b>	<b>\$2,623,420.06</b>	<b>\$2,373,123.81</b>		
Hospital - DY 8 Repayment					
	Amount Advanced by District	IC Repayment by RMC	Balance Owed by RMC		
June 28, 2023	\$147,856.73		\$147,856.73		
July 19, 2023	\$147,856.73		\$295,713.46		
August 16, 2023	\$147,856.73		\$443,570.19		
September 20, 2023	\$147,856.73		\$591,426.92		
October 18, 2023	\$147,856.73	\$29,635.54	\$709,648.11		
November 15, 2023	\$147,856.73	\$51,690.12	\$805,814.72		
	<b>\$887,140.38</b>	<b>\$81,325.66</b>	<b>\$805,814.72</b>		
CHOW Interim Working Capital Loan					
	Amount Advanced	Line of Credit Remaining	Amount Paid Back to Date	Amount Due to District	
Gulf Coast - Copperas Cove	\$550,000.00	\$0.00	\$383,748.10	\$166,251.90	
Gulf Coast - Corrigan	\$800,000.00	\$0.00	\$312,948.03	\$487,051.97	
Gulf Coast - Hemphill	\$550,000.00	\$0.00	\$186,303.72	\$363,696.28	
Gulf Coast - Oak Village	\$550,000.00	\$0.00	\$343,392.48	\$206,607.52	
Gulf Coast - Parkview	\$550,000.00	\$0.00	\$337,410.22	\$212,589.78	
Gulf Coast - Winnie	\$800,000.00	\$0.00	\$287,032.07	\$512,967.93	
Balance Owed by Gulf Coast	<b>\$3,800,000.00</b>		<b>\$1,850,834.62</b>	<b>\$1,949,165.38</b>	
HMG - Treviso	\$900,000.00	\$600,000.00	\$0.00	\$900,000.00	
<b>Total CHOW Loan Outstanding</b>	<b>\$4,700,000.00</b>	<b>\$600,000.00</b>	<b>\$1,850,834.62</b>	<b>\$2,849,165.38</b>	
First Financial Bank-11 Month Outstanding Short Term Revenue Note-Loan 23 (Acct #57635) (June 2023-May 31, 2023) 1st Half of Year 7					
<b>Annual Interest Rate:</b>	<b>8.25%</b>	<b>Payments Per Year:</b>	<b>11</b>	<b>Origination Fee:</b>	<b>\$593,539.48</b>
<b>Years:</b>	<b>1</b>	<b>Amount:</b>	<b>\$14,353,948.46</b>		
Amortization Table	Component Payment	Principle	Interest	Payment	Balance
1-June 30, 2023			(\$101,972.84)	(\$101,972.84)	\$14,353,948.46
2-July 31, 2023			(\$101,972.84)	(\$101,972.84)	\$14,353,948.46
3-August 31, 2023			(\$105,262.29)	(\$105,262.29)	\$14,353,948.46
4-September 30, 2023			(\$105,262.29)	(\$105,262.29)	\$14,353,948.46
5-October 31, 2023	\$2,190,268.00	(\$2,190,268.00)	(\$105,062.93)	(\$2,295,330.93)	\$12,163,680.46
6-November 31, 2023 (September, Comp. 1)			(\$83,625.30)	(\$83,625.30)	\$12,163,680.46
7-December 31, 2023 (October, Comp. 1)	\$2,432,736.09	(\$2,432,736.09)	(\$83,625.30)	(\$2,516,361.40)	\$9,730,944.37
8-January 31, 2024 (November, Comp. 1)	\$2,432,736.09	(\$2,432,736.09)	(\$66,900.24)	(\$2,499,636.34)	\$7,298,208.28
9-February 28, 2024 (December, Comp. 1)	\$2,432,736.09	(\$2,432,736.09)	(\$50,175.18)	(\$2,482,911.27)	\$4,865,472.19
10-March 31, 2024 (January, Comp. 1)	\$2,432,736.09	(\$2,432,736.09)	(\$33,450.12)	(\$2,466,186.21)	\$2,432,736.09
11-April 30, 2024 (February, Comp. 1)	\$2,432,736.09	(\$2,432,736.09)	(\$16,725.06)	(\$2,449,461.15)	\$0.00
<b>Amount Paid</b>	<b>\$14,353,948.46</b>	<b>(\$14,353,948.46)</b>	<b>(\$854,034.40)</b>	<b>(\$15,207,982.87)</b>	

First Financial Bank - LOC						
Description	Total Amount Advanced	Total Paid Back	Total Amount Outstanding			
HMG Buyout - Treviso	\$306,028.74	\$0.00	\$306,028.74			
HMG Buyout - Gulf Pointe	\$305,916.97	\$0.00	\$305,916.97			
HMG Buyout - Arbrook Place	\$308,146.03	\$0.00	\$308,146.03			
HMG Buyout - Forum	\$322,163.59	\$0.00	\$322,163.59			
HMG Treviso CHOW Loan	\$900,000.00	\$0.00	\$900,000.00			
<b>Total Outstanding LOC</b>	<b>\$2,142,255.33</b>	<b>\$0.00</b>	<b>\$2,142,255.33</b>			
<b>Balance:</b>						
	\$8,200,000.00	<b>Principle Balance Owed</b>	\$2,142,255.33			
<b>Interest Rate:</b>						
	5.60%	<b>LOC Funds Available</b>	\$6,057,744.67			
	<b>Date</b>	<b>Balance</b>	<b>Interest</b>	<b>Principal Rcvd.</b>	<b>Payment</b>	
1	8/31/2023	\$1,542,255.33	\$0.00	\$0.00	\$0.00	
2	9/30/2023	\$1,842,255.33	\$7,437.09	\$0.00	\$7,437.09	
3	10/31/2023	\$1,842,255.33	\$8,997.10	\$0.00	\$8,997.10	
4	11/30/2023	\$2,142,255.33	\$9,997.19	\$0.00	\$9,997.19	
5	12/31/2023	\$2,442,255.33	\$11,397.19	\$0.00	\$11,397.19	
6	1/31/2024	\$2,742,255.33	\$12,797.19	\$0.00	\$12,797.19	
7	2/28/2024	\$2,742,255.33	\$12,797.19	\$0.00	\$12,797.19	
8	3/31/2024	\$2,742,255.33	\$12,797.19	\$0.00	\$12,797.19	
9	4/30/2024	\$2,742,255.33	\$12,797.19	\$0.00	\$12,797.19	
<b>Amount Paid</b>		<b>\$0.00</b>	<b>\$89,017.34</b>	<b>\$0.00</b>	<b>\$89,017.34</b>	
District's Investments						
	<b>Balance</b>	<b>Interest Paid</b>	<b>Reporting Period</b>	<b>Paid this Reporting Period</b>	<b>Interest Paid to date</b>	
*CD at First Financial Bank Bank UPDATE	\$8,200,000.00	3.60%	October 2023	Paid Annually		
Money Market-First Financial Bank	\$229,487.48	4.00%	October 2023	\$41,246.13	\$229,487.46	
Texstar C.D. #1110	\$730,393.71	5.3231%	October 2023	3,286.76	\$29,467.10	
TO THE BEST OF MY KNOWLEDGE, THESE FIGURES IN THE WSDH						
_____ Edward Murrell, President			_____ Robert "Bobby" Way Treasurer/Investment Officer			
Date: _____			Date: _____			
*Italics are Estimated amounts						

# **Exhibit “A-3”**

**Winnie-Stowell Hospital District**  
**Bank Accounts Register**  
**As of October 18, 2023 to November 15, 2023**

<i>Type</i>	<i>Date</i>	<i>Num</i>	<i>Name</i>	<i>Memo</i>	<i>Clr</i>	<i>Amount</i>	<i>Balance</i>	<i>Notes</i>
<b>100 Prosperity Bank -Checking</b>							497,192.88	
Check	10/18/2023	4000	Indigent Healthcare ...	Inv #76613	X	(1,566.00)	495,626.88	
Check	10/18/2023	4001	Brookshire Brothers	IC RX's (Sept 2023)	X	(3,499.32)	492,127.56	
Check	10/18/2023	4004	Wilcox Pharmacy	IC RX's (Sept 2023)	X	(1,616.86)	490,510.70	
Check	10/18/2023	4002	UTMB at Galveston	IC Batch Date 09.01.2023	X	(6,962.44)	483,548.26	
Check	10/18/2023	4003	UTMB Faculty Grou...	IC Batch Date 09.01.2023	X	(5,060.56)	478,487.70	
Check	10/18/2023	4005	Thompson Outpatien...	IC Batch Date 09.11.2023	X	(1,215.24)	477,272.46	
Check	10/18/2023	4006	Advanced Cardiovas...	IC Batch Date 09.01.2023	X	(54.26)	477,218.20	
Check	10/18/2023	4007	Bayside Dental	IC Batch Date 09.08.2023	X	(1,524.00)	475,694.20	
Check	10/18/2023	4008	Winnie Family Dental	IC SP Batch Date 09.08.2023	M	(726.00)	474,968.20	
Check	10/18/2023	4009	Kalos Counseling	IC YC Batch Date 09.02.2023	X	(595.00)	474,373.20	
Check	10/18/2023	4010	Technology Solution...	Inv #1813	X	(95.00)	474,278.20	
Check	10/18/2023	4011	Felipe Ojeda	Inv #1042	X	(350.00)	473,928.20	
Check	10/18/2023	4012	Graciela Chavez	Inv #965964	X	(120.00)	473,808.20	
Check	10/18/2023	4013	Benckenstein & Oxf...	Inv #50897	X	(29,000.00)	444,808.20	
Check	10/18/2023	4014	Hubert Oxford	Legal Retainer	X	(1,000.00)	443,808.20	
Check	10/18/2023	4015	Makayla Vidal	Inv # 00028	X	(10,062.00)	433,746.20	
Check	10/18/2023	4016	American Education ...	92 5529 5461 S Stern	M	(150.14)	433,596.06	
Check	10/18/2023	4017	US Department of E...	Acct #177877792-1 B Odom	X	(1,754.58)	431,841.48	
Check	10/18/2023	4018	Winnie Community ...	UC DY8 HHSC Recoupment Demand Sep	X	(147,856.73)	283,984.75	
Check	10/18/2023	4019	Function 4	3A0064 Inv #1068206	X	(18.75)	283,966.00	
Check	10/18/2023	4020	Vaughn's Air Condit...	Inv WO-1313	M	(925.00)	283,041.00	
Check	10/18/2023	4021	Hometown Press	Inv #3978	X	(600.00)	282,441.00	
Check	10/18/2023	4022	Coastal Gateway He...	Grant (Oct 2023 Req)	X	(173,988.65)	108,452.35	
Check	10/18/2023	4023	Lisa Rae LLC	Inv #1228	X	(645.00)	107,807.35	
Check	10/18/2023	4024	Coastal Gateway He...	Grant-Vehicle Purchase	X	(33,381.55)	74,425.80	
Check	10/18/2023	4025	Hall Render Killian ...	Retainer	X	(20,000.00)	54,425.80	
Deposit	10/20/2023			Memo:ACH PaymenWinnie-Stowell HCC...	X	400,000.00	454,425.80	
Deposit	10/25/2023		UTMB at Galveston	Deposit, Processed	X	4,544.00	458,969.80	
Check	10/26/2023		Prosperity Bank (CC)	2704	X	(1,233.69)	457,736.11	
Liability ...	10/30/2023		QuickBooks Payroll ...	Created by Payroll Service on 10/25/2023	X	(9,553.71)	448,182.40	
Liability ...	10/30/2023		QuickBooks Payroll ...	Created by Payroll Service on 10/25/2023	X	(681.56)	447,500.84	
Paycheck	10/31/2023	DD1309	Norris, Sherric	Direct Deposit	X		447,500.84	
Paycheck	10/31/2023	DD1310	Ojeda, Patricia	Direct Deposit	X		447,500.84	
Paycheck	10/31/2023	DD1311	Walters, Reagan D	Direct Deposit	X		447,500.84	
Deposit	10/31/2023		Prosperity Bank	Deposit, Processed	X	81.77	447,582.61	
Check	11/07/2023	995168	ECISD	Memo:Draft, Withdrawal, Processed	M	(22,077.13)	425,505.48	
Check	11/07/2023	995165	Riceland Medical Ce...		*	(340.00)	425,165.48	
Deposit	11/10/2023			ACH, Deposit, Processed	M	73,262.93	498,428.41	
Check	11/10/2023		Entergy	ACH, Withdrawal, Processed	M	(187.79)	498,240.62	
Check	11/10/2023		Trinity Bay Conserv...	ACH, Withdrawal, Processed	M	(72.96)	498,167.66	
Check	11/13/2023	ACH	IRS		*	(3,743.26)	494,424.40	
Liability ...	11/14/2023		QuickBooks Payroll ...	Created by Payroll Service on 11/13/2023	X	(601.51)	493,822.89	
Paycheck	11/15/2023	DD1312	Walters, Reagan D	Direct Deposit	X		493,822.89	
Check	11/15/2023		Indigent Healthcare ...	Inv #76781		(1,566.00)	492,256.89	
Check	11/15/2023		Brookshire Brothers	IC RX's (Oct 2023)		(3,115.77)	489,141.12	
Check	11/15/2023		Wilcox Pharmacy	IC RX's (Oct 2023)		(1,694.81)	487,446.31	
Check	11/15/2023		UTMB at Galveston	IC Batch Date 10.01.23		(23,521.97)	463,924.34	
Check	11/15/2023		UTMB Faculty Grou...	IC Batch Date 10.01.23		(3,761.63)	460,162.71	
Check	11/15/2023		Thompson Outpatien...	IC Batch Date 10.11.2023		(2,362.69)	457,800.02	
Check	11/15/2023		Alliance Medical Ser...	IC Batch Date 10.10.2023		(530.00)	457,270.02	
Check	11/15/2023		Winnie Family Dental	IC SP IC Batch Date 10.08.2023		(140.00)	457,130.02	
Check	11/15/2023		Kalos Counseling	YC Batch Date 10.02.2023		(340.00)	456,790.02	
Check	11/15/2023		Technology Solution...	Inv #1820		(95.00)	456,695.02	
Check	11/15/2023		Felipe Ojeda	Inv #1043		(350.00)	456,345.02	
Check	11/15/2023		Graciela Chavez	Inv #965965		(120.00)	456,225.02	
Check	11/15/2023		Benckenstein & Oxf...	Inv #50912		(19,690.00)	436,535.02	
Check	11/15/2023		Hubert Oxford	Legal Retainer		(1,000.00)	435,535.02	
Check	11/15/2023		Makayla Vidal	Inv #00033		(10,071.25)	425,463.77	
Check	11/15/2023		American Education ...	92 5529 5461 S Stern		(150.14)	425,313.63	
Check	11/15/2023		US Department of E...	Acct #177877792-1 B Odom		(720.62)	424,593.01	
Check	11/15/2023		Winnie Community ...	UC DY8 HHSC Recoupment Demand Oct		(147,856.73)	276,736.28	
Check	11/15/2023		Coastal Gateway He...	Grant (Nov 2023 Req)		(93,802.96)	182,933.32	
Check	11/15/2023		J & W A/C & Heating	Inv #365318		(295.00)	182,638.32	
Check	11/15/2023		The Seabreeze Beacon	Inv #6889		(300.00)	182,338.32	
Check	11/15/2023		Snider Law Firm, PL...	Professional Svs (RMC Ln Closing)		(4,680.00)	177,658.32	
Check	11/15/2023		Teo Arteaga	Inv #080851 (Hwy 124 land scaping)		(7,700.00)	169,958.32	
Check	11/15/2023		Todd Swonke Agenc...	Inv #17258 Bond Renewal B Way		(50.00)	169,908.32	
Check	11/15/2023		Todd Swonke Agenc...	Inv #17259 Bond Renewal A Stramecki		(50.00)	169,858.32	
Check	11/15/2023		Todd Swonke Agenc...	Inv #17262 Bond Renewal E Murrell		(50.00)	169,808.32	
Check	11/15/2023		Todd Swonke Agenc...	Inv #17263 Bond Renewal J Rollo		(50.00)	169,758.32	
Check	11/15/2023		Todd Swonke Agenc...	Inv #17261 Bond Renewal K Vratiss		(50.00)	169,708.32	
Check	11/15/2023		Winnie Community ...	Closing half Settlement Stmt		(3,141.34)	166,566.98	
Check	11/26/2023	Pending	Prosperity Bank (CC)	2704		(708.18)	165,858.80	
Check	12/05/2023	Pending	ECISD			(22,077.13)	143,781.67	
Check	12/05/2023	Pending	Riceland Medical Ce...			(340.00)	143,441.67	
<b>Total 100 Prosperity Bank -Checking</b>						<b>(353,751.21)</b>	<b>143,441.67</b>	

**Winnie-Stowell Hospital District**  
**Bank Accounts Register**  
**As of October 18, 2023 to November 15, 2023**

<i>Type</i>	<i>Date</i>	<i>Num</i>	<i>Name</i>	<i>Memo</i>	<i>Clr</i>	<i>Amount</i>	<i>Balance</i>	<i>Notes</i>
<b>102 First Financial Bank</b>							28,630,247.04	
<b>102b FFB #4846 DACA</b>							15,201,873.63	
Check	10/18/2023			Memo:Transfer from DDA Acct No. 1110...	X	319,720.35	15,521,593.98	
Check	10/19/2023			Memo:Transfer from DDA Acct No. 1110...	X	67,500.00	15,589,093.98	
Deposit	10/19/2023			Memo:ACH Payments Tracking ID:12665 ...	X	28,155.28	15,617,249.26	
Deposit	10/20/2023			Memo:ACH PaymenWinnie-Stowell HCC...	X	(400,000.00)	15,217,249.26	
Deposit	10/30/2023			ACH Winnie Stowell CCD 2823720	X	69,841.52	15,287,090.78	
Deposit	10/30/2023			ACH Winnie Stowell CCD 2823717	X	116,133.16	15,403,223.94	
Deposit	10/30/2023			ACH Winnie Stowell CCD 2823723	X	138,628.59	15,541,852.53	
Deposit	10/30/2023			ACH Winnie Stowell CCD 2823722	X	156,961.78	15,698,814.31	
Deposit	10/30/2023			ACH Winnie Stowell CCD 2823716	X	163,124.13	15,861,938.44	
Deposit	10/30/2023			ACH Winnie Stowell CCD 2823721	X	179,212.28	16,041,150.72	
Check	10/30/2023		First Financial Bank	Transfer from XXX4846 to XXX7759: Co...	X	(8,977.10)	16,032,173.62	
Check	10/30/2023		First Financial Bank	Transfer from XXX4846 to XXX7635: Co...	X	(105,062.93)	15,927,110.69	
Check	10/30/2023		First Financial Bank	Transfer from XXX4846 to XXX7635: Co...	X	(2,190,268.00)	13,736,842.69	
Check	11/03/2023			Memo:Transfer from DDA Acct No. 1110...	M	5,041.00	13,741,883.69	
Check	11/07/2023			ACH PaymenWinnie-Stowell HCCD 1611...	M	(72,521.00)	13,669,362.69	
Check	11/07/2023		LTC Group	ACH PaymenWinnie-Stowell HCCD 1611...	M	(294,000.00)	13,375,362.69	
Check	11/30/2023	Pending	First Financial Bank	FFB Ln 7635 (11 Mth) Interest		(86,159.40)	13,289,203.29	
Check	11/30/2023	Pending	First Financial Bank	FFB Ln RLOC Interest		(9,997.19)	13,279,206.10	
Total 102b FFB #4846 DACA						(1,922,667.53)	13,279,206.10	
<b>102c FFB #7190 Money Market</b>							13,428,373.41	
Check	10/30/2023	Pending	Salt Creek Capital L...	Ln 22 Int Pmt (11 of 11)	X	(182,802.61)	13,245,570.80	
Check	10/30/2023	Pending	Salt Creek Capital L...	Loan 22 Interest & Principal balance	X	(13,057,329.45)	188,241.35	
Deposit	10/31/2023				X	41,246.13	229,487.48	
Total 102c FFB #7190 Money Market						(13,198,885.93)	229,487.48	
Total 102 First Financial Bank						(15,121,553.46)	13,508,693.58	
<b>TOTAL</b>						<b>(15,475,304.67)</b>	<b>13,652,135.25</b>	



# **Exhibit “B”**



## 11.15.23 WSHD Regular Board Meeting Indigent Care Report

### 1) Active Client Count:

- a) Indigent Clients: **87** –DOWN by **8** from **95** in **SEP**
  - **25** Apps, [**15 Renewals**, **5 Previous**, **5 New**, and **0 ER Referrals**]
  - **11** Approved [**8 Renewals**, **2 Previous**, **1 New**, and **0 ER Referrals**]
  - **1** Withdrew / **6** Denied / **5** Incomplete / **2** Pending
- b) Youth Counseling: **3** –DOWN by **20** from **23** in **SEP**
- c) Irlen Services: **0** – the same since **OCT 2022**
- d) Dental: **2** clients used their benefit in **OCT**
- e) Vision Services: **0** clients used their benefit in **OCT**
- f) Riceland Emergency Room Referrals: **1** (**0 Approved**, **1 Failed to Apply**, and **0 Pending**)

### 2) Riceland Hospital & Clinics:

The **OCT** charges were UP by **\$40.5 K** from **\$66.5 K** to **\$107 K**. There was an increase in charges for all service areas, but notably there were **\$17 K** in Physical Therapy charges for a payment amount of **\$10.2 K**.

### 3) UTMB Hospital & Clinics:

UTMB **OCT** charges were UP by **\$208.4 K** from **\$48.1 K** to **\$257.5 K**, which included **6 surgeries/procedures** (**1** Heart procedure, **1** Back surgery, **4** Eye surgeries, and **2** minor procedures) for a total billed amount of **\$243 K** and payment of **\$22.3 K**. The Heart surgery for **\$121.3 K** was denied as previously billed and paid.

### 4) Our over-all YTD expenditure Charts:

We have expended **69%** of the overall Indigent Care Budget

- **81%** of the Pharmacy budget
- **98%** of the Riceland budget
- **65%** of the UTMB budget
- **37%** of the Youth Counseling budget
- **66%** of the Vision budget
- **76%** of the Dental budget
- **85%** of the Thompson Outpatient Clinic budget

### 5) District Programs:

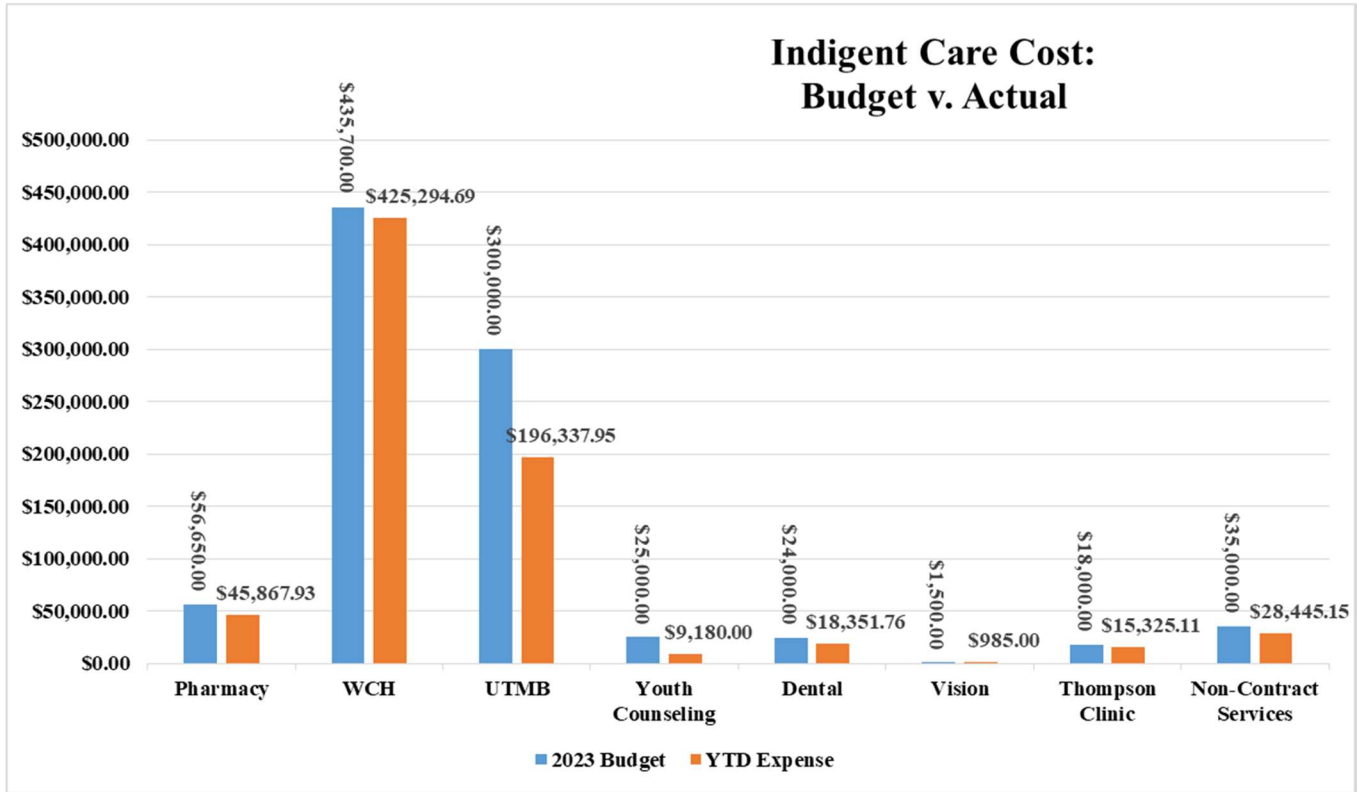
- a) County Van (See attached): **3** out of **94** were WSHD clients
- b) Winnie Stowell EMS (See attached): **6** transports out of **7** were made from Riceland
- c) Marcelous Williams (See attached): **19** out of **19** were WSHD clients
- d) East Chambers School will provide their next quarterly report in **DEC 2023**

### 6) Other items of Interest:

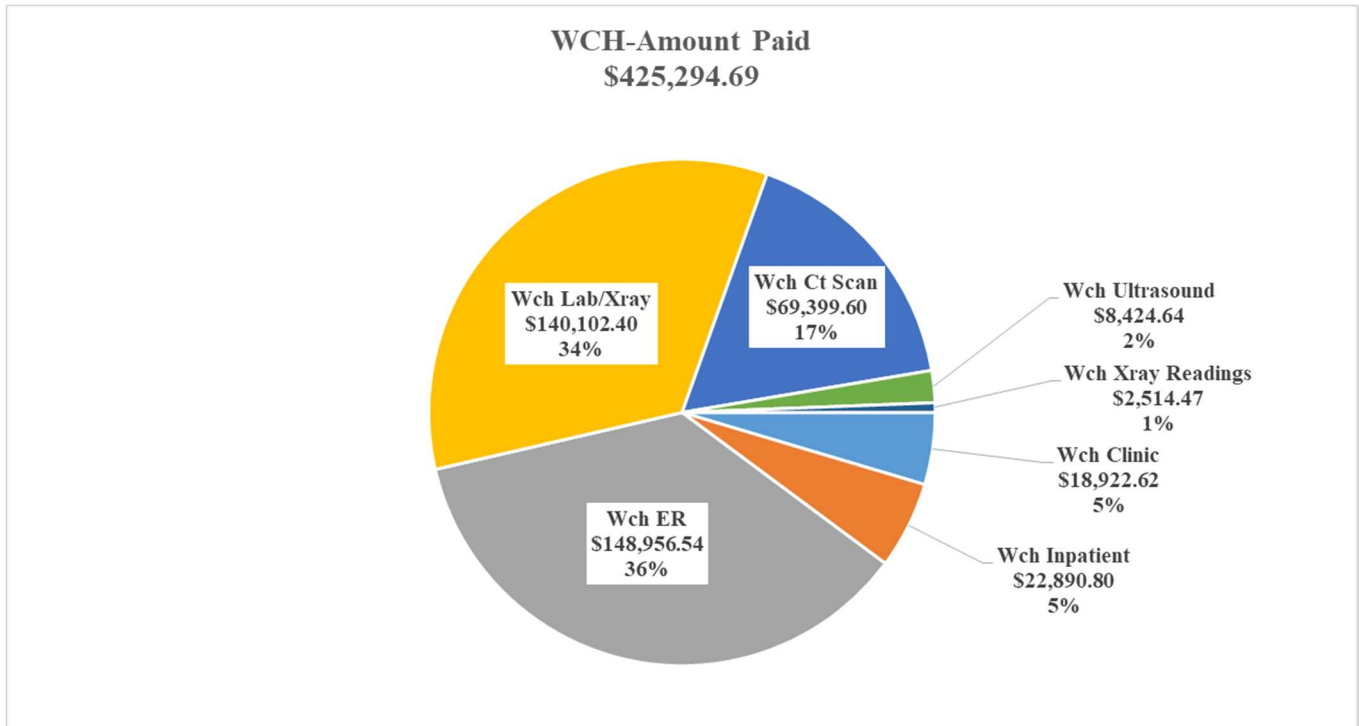
There is one new Charity Care Client who needs a hip replacement surgery for an estimated expense to the District of **\$10 K**.



**CHART 1: 2023 YTD WSHD Services & Budget Status:**



**CHART 2: 2023 WCH Services Breakdown**



WSDH Indigent Care Director Report  
Jan-Dec 2023 YTD Expenditures Worksheet

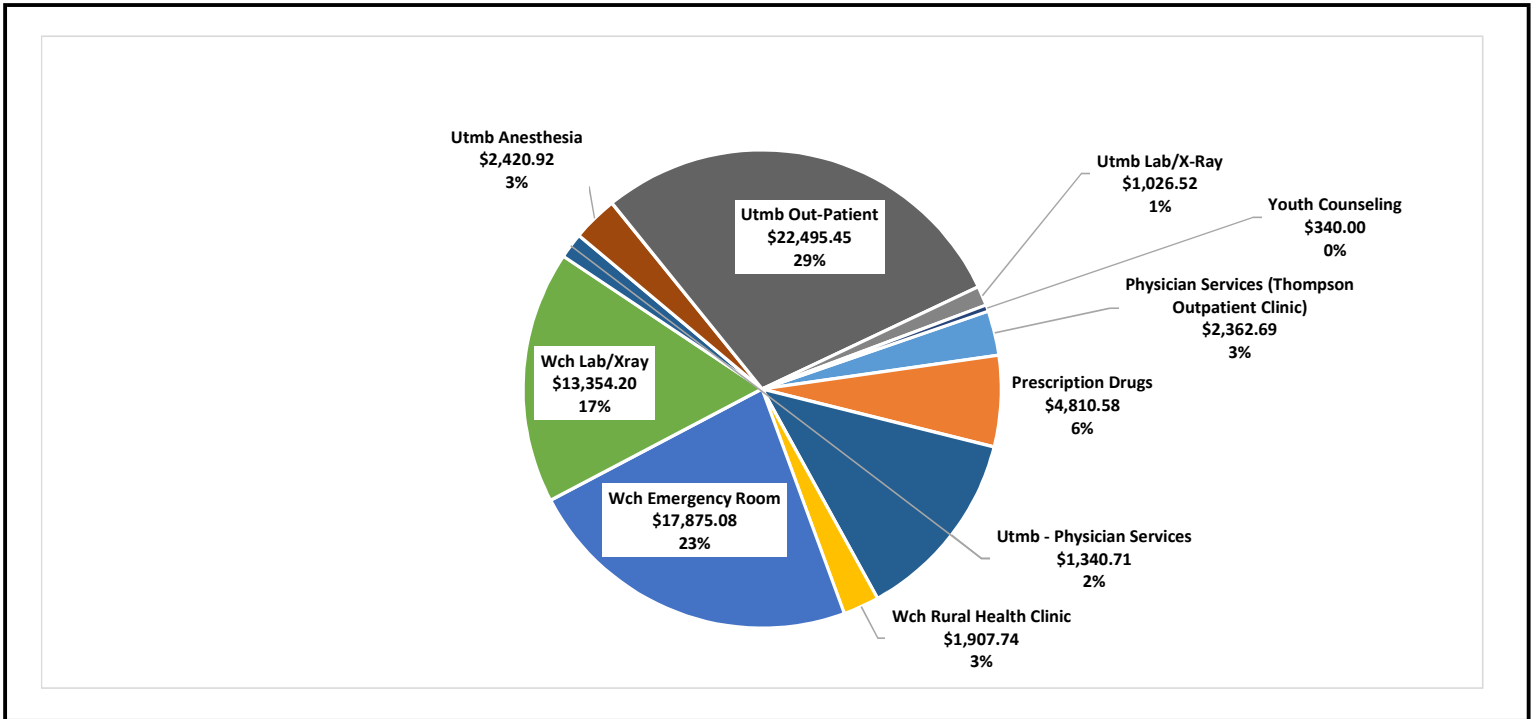
	September			October			Year to Date		
Indigent Clients:	Indigent Clients:	95		Indigent Clients:	87		Clients Enrolled:	136	Average 98
Youth Counseling:	Youth Counseling:	23		Youth Counseling:	3		YC Enrolled:	29	19
Irlen Services:	Irlen Services:	0		Irlen Services:	0		IS Enrolled:	0	0
PROVIDER TOTALS	Billed Amount	Contracted Rate	Actually Paid	Billed Amount	Contracted Rate	Actually Paid	Billed Amount	Contracted Rate	Actually Paid
<b>Pharmacy</b>									
Brookshire Brothers Pharmacy Corp	\$4,666.02	\$3,499.32	\$3,499.32	\$4,065.10	\$4,065.10	\$3,115.77	\$36,308.78	\$33,483.44	\$29,162.79
Wilcox Pharmacy	\$1,616.86	\$1,616.86	\$1,616.86	\$1,694.81	\$1,694.81	\$1,694.81	\$16,767.48	\$16,740.64	\$16,705.14
<i>ADJUSTMENTS-Refunds/Credits</i>									
<b>Pharmacy Totals</b>	<b>\$6,282.88</b>	<b>\$5,116.18</b>	<b>\$5,116.18</b>	<b>\$5,759.91</b>	<b>\$5,759.91</b>	<b>\$4,810.58</b>			
<i>YTD Refunds/Credits</i>									<b>(\$39.90)</b>
	<b>\$53,076.26</b>	<b>\$50,224.08</b>	<b>\$45,867.93</b>						
<b>Winnie Community Hospital</b>									
WCH Clinic	\$3,201.00	\$1,234.42	\$1,234.42	\$5,046.00	\$1,907.74	\$1,907.74	\$47,096.04	\$18,922.62	\$18,922.62
WCH ER	\$18,700.00	\$8,908.52	\$8,908.52	\$36,271.00	\$17,875.08	\$17,875.08	\$289,288.00	\$148,956.54	\$148,956.54
WCH Lab/Xray	\$14,302.00	\$8,581.20	\$8,581.20	\$22,626.00	\$13,354.20	\$13,354.20	\$239,665.00	\$140,102.40	\$140,102.40
WCH CT Scan	\$15,224.00	\$9,134.40	\$9,134.40	\$9,486.00	\$5,691.60	\$5,691.60	\$119,409.00	\$69,399.60	\$69,399.60
WCH Optional Services (Infusion)	\$525.00	\$92.13	\$92.13	\$1,703.00	\$283.78	\$283.78	\$5,256.00	\$908.74	\$908.74
WCH Xray (MRI)	\$11,214.00	\$496.11	\$496.11	\$11,214.00	\$591.66	\$591.66	\$63,546.00	\$2,958.08	\$2,958.08
WCH Lab/Xray Reading	\$1,825.00	\$256.36	\$256.36	\$2,107.00	\$278.80	\$278.80	\$17,962.00	\$2,514.47	\$2,514.47
WCH Inpatient	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$31,990.00	\$22,890.80	\$22,890.80
WCH Physical Therapy	\$0.00	\$0.00	\$0.00	\$17,028.00	\$10,216.80	\$10,216.80	\$17,028.00	\$10,216.80	\$10,216.80
WCH Ultrasound	\$1,554.00	\$932.40	\$932.40	\$1,554.00	\$537.04	\$537.04	\$14,700.00	\$8,424.64	\$8,424.64
<b>WCH Totals</b>	<b>\$66,545.00</b>	<b>\$29,635.54</b>	<b>\$29,635.54</b>	<b>\$107,035.00</b>	<b>\$50,736.70</b>	<b>\$50,736.70</b>	<b>\$845,940.04</b>	<b>\$425,294.69</b>	<b>\$425,294.69</b>
<i>ADJUSTMENTS-Refunds/Credits</i>									
<b>Balance on Contracted Amount (Lump Sum Payment of \$288,370.10)</b>									
									<b>\$0.00</b>
									<b>(\$136,924.59)</b>
<b>UTMB</b>									
UTMB Physician Services	\$13,563.00	\$4,295.18	\$4,295.18	\$5,231.00	\$1,340.71	\$1,340.71	\$104,788.00	\$24,719.69	\$24,719.69
Barrier Reef (UTMB ER Physician)	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$20,378.00	\$582.29	\$582.29
UTMB Anesthesia	\$1,200.00	\$765.38	\$765.38	\$4,016.00	\$2,420.92	\$2,420.92	\$17,500.00	\$10,690.00	\$10,690.00
UTMB In-Patient	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$93,479.84	\$29,571.91	\$29,571.91
UTMB Outpatient	\$32,072.47	\$6,738.26	\$6,738.26	\$243,593.09	\$22,495.45	\$22,495.45	\$741,829.83	\$123,361.59	\$123,361.59
UTMB Lab&Xray	\$1,263.00	\$224.18	\$224.18	\$4,666.00	\$1,026.52	\$1,026.52	\$40,500.13	\$7,412.47	\$7,412.47
<i>ADJUSTMENTS-Refunds/Credits</i>									
<b>UTMB Totals</b>	<b>\$48,098.47</b>	<b>\$12,023.00</b>	<b>\$12,023.00</b>	<b>\$257,506.09</b>	<b>\$27,283.60</b>	<b>\$27,283.60</b>	<b>\$1,018,475.80</b>	<b>\$196,337.95</b>	<b>\$196,337.95</b>
									<b>(\$7,752.64)</b>
<b>Local Community Clinics (601.04)</b>									
Coastal Gateway Health Clinic	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Thompson Outpatient Clinic	\$5,223.00	\$1,215.24	\$1,215.24	\$6,207.00	\$2,362.69	\$2,362.69	\$58,550.00	\$15,325.11	\$15,325.11
<b>Local Community Clinics</b>	<b>\$5,223.00</b>	<b>\$1,215.24</b>	<b>\$1,215.24</b>	<b>\$6,207.00</b>	<b>\$2,362.69</b>	<b>\$2,362.69</b>	<b>\$58,550.00</b>	<b>\$15,325.11</b>	<b>\$15,325.11</b>
<b>Non-Contracted Emergency Services (601.04)</b>									
Non-Contract ER & In-Pt Services	\$185.00	\$54.26	\$54.26	\$0.00	\$0.00	\$0.00	\$136,150.40	\$24,091.70	\$24,091.70
Winnie-Stowell EMS	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$8,403.21	\$2,093.45	\$2,093.45
<b>Non-Contract Services Totals</b>	<b>\$185.00</b>	<b>\$54.26</b>	<b>\$54.26</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$144,553.61</b>	<b>\$26,185.15</b>	<b>\$26,185.15</b>
<b>Youth Counseling</b>									
Benjamin Odom	\$595.00	\$595.00	\$595.00	\$340.00	\$340.00	\$340.00	\$5,015.00	\$5,015.00	\$5,015.00
Nicki Holtzman	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$3,400.00	\$3,400.00	\$3,400.00
Penelope Butler	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$765.00	\$765.00	\$765.00
<b>Youth Counseling Totals</b>	<b>\$595.00</b>	<b>\$595.00</b>	<b>\$595.00</b>	<b>\$340.00</b>	<b>\$340.00</b>	<b>\$340.00</b>	<b>\$9,180.00</b>	<b>\$9,180.00</b>	<b>\$9,180.00</b>
<b>Irlen Services</b>									
Nancy Gaudet	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>Irlen Services Totals</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>
<b>Indigent Special Services</b>									
Dental Services	\$13,863.91	\$2,250.00	\$2,250.00	\$747.96	\$140.00	\$140.00	\$40,614.87	\$18,351.76	\$18,351.76
Vision Services	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$985.00	\$985.00	\$985.00
<b>Indigent Special Services Totals</b>	<b>\$13,863.91</b>	<b>\$2,250.00</b>	<b>\$2,250.00</b>	<b>\$747.96</b>	<b>\$140.00</b>	<b>\$140.00</b>	<b>\$41,599.87</b>	<b>\$19,336.76</b>	<b>\$19,336.76</b>
<b>Medical Supplies (601.04)</b>									
Alliance Medical Supply (C-PAP)	\$0.00	\$0.00	\$0.00	\$830.00	\$830.00	\$530.00	\$2,560.00	\$2,560.00	\$2,260.00
<b>Medial Supplies Total</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$830.00</b>	<b>\$830.00</b>	<b>\$530.00</b>	<b>\$2,560.00</b>	<b>\$2,560.00</b>	<b>\$2,260.00</b>
<b>Grand Totals</b>	<b>\$140,793.26</b>	<b>\$50,889.22</b>	<b>\$50,889.22</b>	<b>\$378,425.96</b>	<b>\$87,452.90</b>	<b>\$86,203.57</b>	<b>\$2,173,935.58</b>	<b>\$744,443.74</b>	<b>\$739,787.59</b>

### WSHD Indigent Care Director Report Oct 2023 SOURCE CODE REPORT

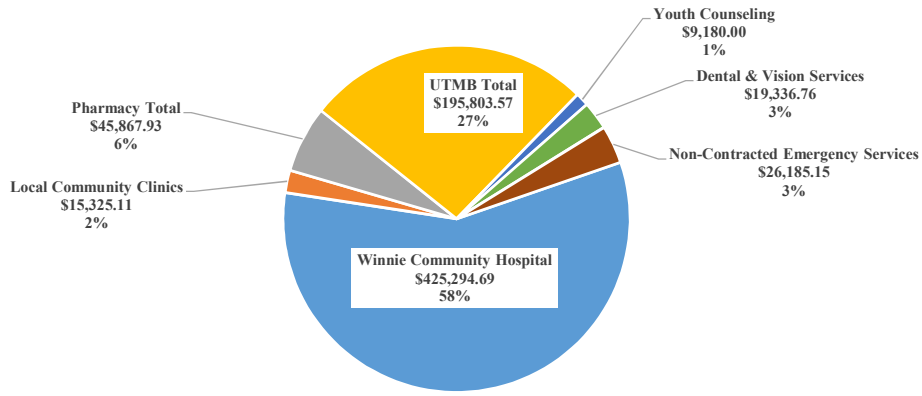
Source	Description	Amount Billed	Amount Paid	% of Total
01	Physician Services (Thompson Outpatient Clinic)	\$6,207.00	\$2,362.69	2.74%
02	Prescription Drugs	\$5,759.91	\$4,810.58	5.58%
09	DME Medical Supplies	\$830.00	\$530.00	0.61%
12	Irlen Services	\$0.00	\$0.00	0.00%
13	Vision Services	\$0.00	\$0.00	0.00%
14	Dental Services	\$747.96	\$140.00	0.16%
20	Wch Physical Therapy	\$17,028.00	\$10,216.80	11.85%
21	Wch Rural Health Clinic	\$5,046.00	\$1,907.74	2.21%
23	Wch Inpatient	\$0.00	\$0.00	0.00%
24	Wch Emergency Room	\$36,271.00	\$17,875.08	20.74%
25	Wch Lab/Xray	\$22,626.00	\$13,354.20	15.49%
26	Wch Ct Scan	\$9,486.00	\$5,691.60	6.60%
27	Wch Optional Services (Infusion Therapy)	\$1,703.00	\$283.78	0.33%
28	Wch X-Ray (MRI)	\$11,214.00	\$591.66	0.69%
29	Wch Ultrasound	\$1,554.00	\$537.04	0.62%
44	Wch Xray Readings	\$2,107.00	\$278.80	0.32%
31	Utmb - Physician Services	\$5,231.00	\$1,340.71	1.56%
31-1	Utmb Anesthesia	\$4,016.00	\$2,420.92	2.81%
33	Utmb In-Patient	\$0.00	\$0.00	0.00%
34	Utmb Out-Patient	\$243,593.09	\$22,495.45	26.10%
34-1	Utmb ER Physicians - Barrier Reef	\$0.00	\$0.00	0.00%
35	Utmb Lab/X-Ray	\$4,666.00	\$1,026.52	1.19%
39	Youth Counseling	\$340.00	\$340.00	0.39%

	<b>Expenditures</b>	\$378,425.96	\$86,203.57	100%
		\$0.00	\$0.00	
	<b>Grand Total</b>	<b>\$378,425.96</b>	<b>\$86,203.57</b>	<b>100%</b>

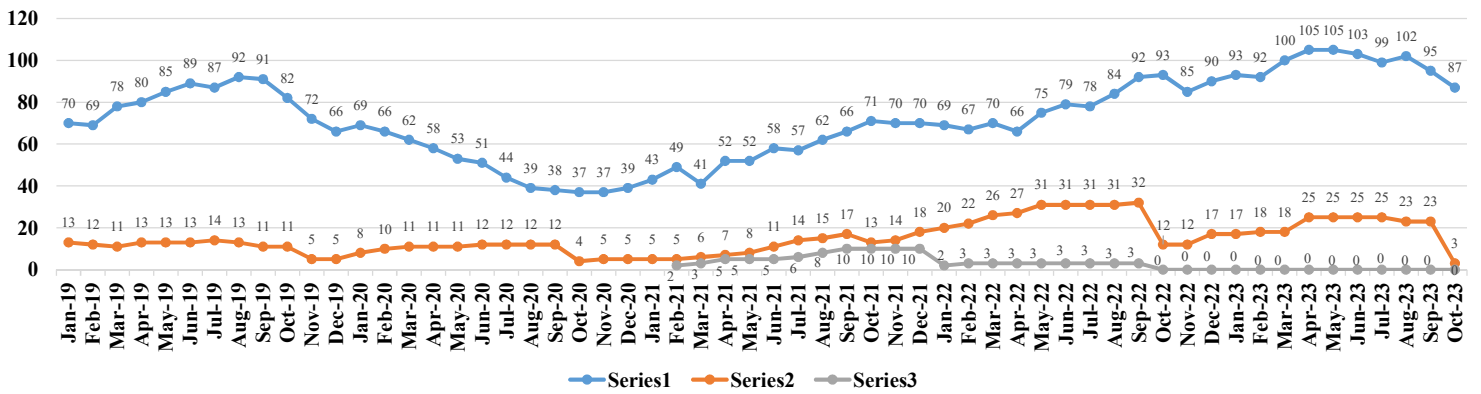
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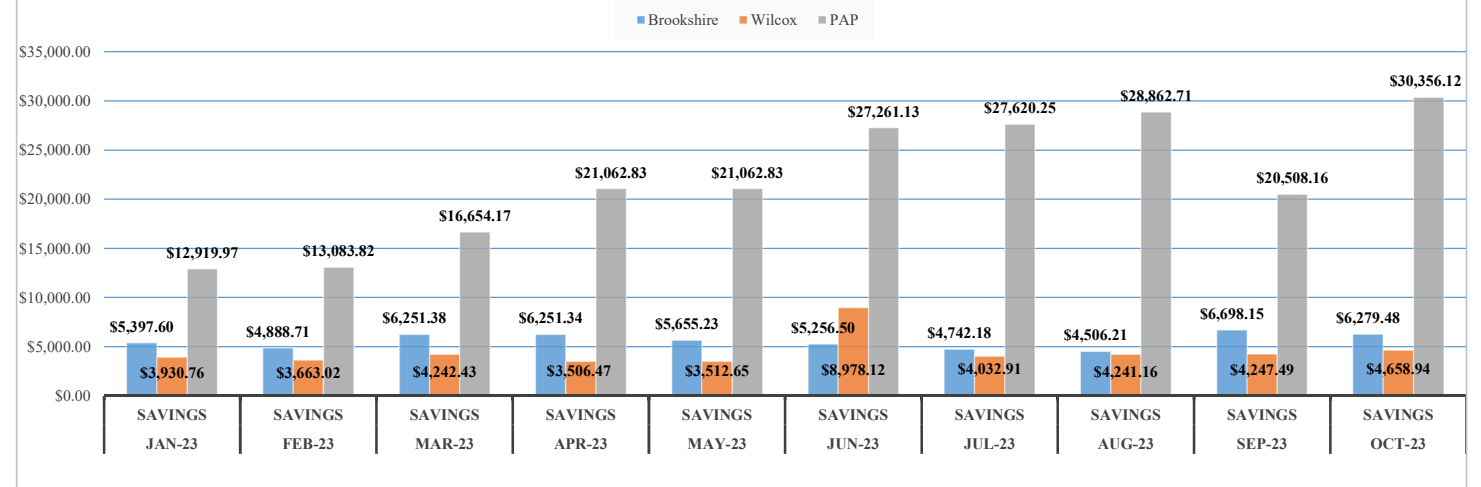
**Year To Date Payments Incurred: \$739,253.21**



**Client Count Trending**



**PHARMACY SAVINGS TO DATE = \$320,472.36**



# Chambers County East Side Van Monthly Report



Commissioner PCT #1, Jimmy E Gore  
 211 Broadway | PO BOX 260  
 Winnie, Texas 77665  
 409-296-8250


## Oct-23

VEHICLE #1		EAST SIDE VAN #1	
TOTAL MILES DRIVEN			3305
TOTAL HOURS DRIVEN			177.83
TOTAL EXPENSES FOR MONTH			\$1,518.12
FUEL COST			\$1,277.45
REPAIRS & MAINTENANCE COST	tire, labor		\$240.67
MISC EXPENSES			
TOTAL RIDERS			36
TOTAL WSHD RIDERS			1
TOTAL TRIPS			72
TOTAL TRIPS FOR WSHD RIDERS			1

VEHICLE #2		EAST SIDE VAN #2	
TOTAL MILES DRIVEN			3534
TOTAL HOURS DRIVEN			170.25
TOTAL EXPENSES FOR MONTH			\$1,143.30
FUEL COST			\$761.52
REPAIRS & MAINTENANCE COST	tire, labor		\$251.42
MISC EXPENSES	oil change, labor		\$130.36
TOTAL RIDERS			28
TOTAL WSHD RIDERS			1
TOTAL TRIPS			63
TOTAL TRIPS FOR WSHD RIDERS			1

VEHICLE #3		RAV 4	
TOTAL MILES DRIVEN			4373
TOTAL HOURS DRIVEN			163.92
TOTAL EXPENSES FOR MONTH			\$530.94
FUEL COST			\$453.80
REPAIRS & MAINTENANCE COST	oil change, labor		\$77.14
MISC EXPENSES			
TOTAL RIDERS			30
TOTAL WSHD RIDERS			1
TOTAL TRIPS			57
TOTAL TRIPS FOR WSHD RIDERS			1

GRAND TOTALS	
MILES DRIVEN	11212
RIDERS	94
WSHD RIDERS	3
TRIPS	192
WSHD TRIPS	3
EXPENSES	\$3,192.36

 <b>Winnie Stowell Volunteer EMS</b> Winnie-Stowell Hospital District Report												
Year to Date Details for 2023	Previous Year End	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	YTD DATE
<b>CALL SUMMARY</b>												
CALLS/TRANSPORTS REQUESTED	117	4	9	13	10	7	6	8	10	12	7	87
CALLS/TRANSPORTS MADE												
INSURED	-	0	4	6	3	5	3	7	6	10	4	48
SELF-PAY	-	1	1	0	4	1	1	0	3	0	2	13
TOTAL CALLS MADE	76	1	5	6	7	6	4	7	9	10	6	61
CALLS/TRANSPORTS DELAYED	1	0	0	0	0	0	0	1	1	0	0	2
TRANSPORTS NOT MADE	43	3	4	7	3	1	2	1	1	2	1	25
PERCENTAGE OF CALLS MADE	65%	25.0%	55.6%	46.2%	70.0%	85.7%	66.7%	87.5%	90.0%	83.3%	85.7%	28.7%
<b>INVOICED/BILLED</b>												
Insurance Billed during Month	\$54348.70	\$0.00	\$4,497.24	\$7,994.94	\$4,968.54	\$5,999.41	\$3,324.41	\$8,923.00	\$10,299.69	\$11,490.33	\$5,607.62	\$63,045.18
Self-Pay Billed during the Month	\$55,989.76	\$716.96	\$2,704.02	\$0.00	\$10,650.64	\$2,554.53	\$1,868.40	\$1,786.01	\$1,863.55	\$0.00	\$1,151.75	\$23,295.86
<b>Total</b>	<b>\$110,338.46</b>	<b>\$716.96</b>	<b>\$7,201.26</b>	<b>\$7,994.94</b>	<b>\$15,619.18</b>	<b>\$8,553.94</b>	<b>\$5,192.81</b>	<b>\$10,709.01</b>	<b>\$12,163.24</b>	<b>\$11,490.33</b>	<b>\$6,759.37</b>	<b>\$86,341.04</b>
<b>PAYMENTS RECEIVED</b>												
Insurance Payments Rcvd during in the Month	\$24,896.99	\$0.00	\$2,305.50	\$3,761.87	\$2,237.36	\$2,850.70	\$1,846.19	\$2,591.91	\$2,486.30	\$3,677.26	\$574.94	\$22,332.03
Self-Pay Billed Rcvd during the Month	\$0.00	\$716.96	\$715.22	\$0.00	\$3,088.21	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$4,520.39
<b>Total</b>	<b>\$24,896.99</b>	<b>\$716.96</b>	<b>\$3,020.72</b>	<b>\$3,761.87</b>	<b>\$5,325.57</b>	<b>\$2,850.70</b>	<b>\$1,846.19</b>	<b>\$2,591.91</b>	<b>\$2,486.30</b>	<b>\$3,677.26</b>	<b>\$574.94</b>	<b>\$26,852.42</b>
<b>ACCOUNTS RECEIVABLE-FUNDS OWED</b>												
Owed by Insurance		\$0.00	\$437.17	\$637.27	\$1,026.77	\$672.29	\$663.64	\$4,006.77	\$5,010.31	\$5,357.04	\$5,032.68	\$22,843.94
Owed by Self-Pay		\$0.00	\$0.00	\$0.00	\$0.00	\$851.97	\$715.22	\$636.81	\$1,351.16	\$0.00	\$1,151.75	\$4,706.91
<b>Total</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$437.17</b>	<b>\$637.27</b>	<b>\$1,026.77</b>	<b>\$1,524.26</b>	<b>\$1,378.86</b>	<b>\$4,643.58</b>	<b>\$6,361.47</b>	<b>\$5,357.04</b>	<b>\$6,184.43</b>	<b>\$27,550.85</b>
<b>STAFFING EXPENSES</b>												
	\$122,976.00	\$11,904.00	\$10,752.00	\$11,904.00	\$11,520.00	\$6,896.00	\$5,688.00	\$6,320.00	\$11,724.00	\$11,152.00	\$11,216.00	\$99,076.00

Oct-23 <b>MONTHLY CALLS/TRANSPORTS REPORT</b>									
CALLS REQUESTED			CALL RESULTS			BILLING DETAILS		TIMELY BILLING	
DATE	PICK UP LOCATION	DROP OFF LOCATION	MADE M	DELAYED D	REASSIGNED R	WSEMS Incident#	Billing Identifier	Billing Date	Days from DOS to Billed
10/1/2023	Riceland ER	Baytown Methodist	M			23-29755	1928	10/13/2023	12
10/9/2023	Riceland ER	UTMB Galveston	M			23-30445	1932	10/16/2023	7
10/10/2023	Riceland ER	Unknown, Turned down due to no additional Paramedic			R	N/A	N/A		N/A
10/13/2023	Riceland ER	St. Elizabeth	M			23-30870	1946	10/20/2023	7
10/16/2023	Riceland ER	St. Elizabeth	M			23-31148	1952	10/27/2023	11
10/20/2023	Riceland ER	St. Elizabeth	M			23-31563	1955	11/1/2023	12
10/30/2023	Riceland ER	Baytown Methodist	M			23-32437	Not billed yet		Not Billed Yet
<b>TOTAL CALLS &amp; RESULTS</b>			<b>7</b>	<b>0</b>	<b>1</b>	<b>AVERAGE DAYS TO BILL:</b>		<b>10</b>	

Oct-23 <b>MONTHLY TRANSPORT AMBULANCE EMPLOYEE SCHEDULE &amp; PAYROLL</b>										
DATE	EMPLOYEE NAME	SHIFT SCHEDULE	HOURS WORKED	OVER-TIME HOURS	GRANT ALLOWED SALARY (SPR HR)	GRANT FUNDED PAYROLL AMOUNT	ACTUAL SALARY (SPR HR)	ACTUAL PAYROLL AMOUNT	GRANT vs ACTUAL SURPLUS or (DEFICIT)	
10/1/2023	Hunter Traweek	7am - 7am	24	0	\$ 16.00	\$384.00	\$16.00	\$384.00	\$0.00	
10/2/2023	Kendall Kirkgard	7pm - 4am	9	0	\$ 16.00	\$144.00	\$20.00	\$180.00	(\$36.00)	
10/3/2023	Jennifer Hafford	5pm - 4am	11	0	\$ 16.00	\$176.00	\$20.00	\$220.00	(\$44.00)	
10/4/2023	Clint Aslin	6am - 7pm	13	0	\$ 16.00	\$208.00	\$20.50	\$266.50		
10/4/2023	Andrew Broussard	7pm - 7am	12	0	\$ 16.00	\$192.00	\$18.00	\$216.00	(\$24.00)	
10/5/2023	Hunter Traweek	7am - 7am	24	0	\$ 16.00	\$384.00	\$16.00	\$384.00	\$0.00	
10/6/2023	Austin Isaacks	7am - 7pm	12	0	\$ 16.00	\$192.00	\$16.00	\$192.00	\$0.00	
10/6/2023	Boyd Abshire	7pm - 7am	12	0	\$ 16.00	\$192.00	\$15.00	\$180.00	\$12.00	
10/7/2023	Nicole Treto	7am - 5am	22	0	\$ 16.00	\$352.00	\$16.00	\$352.00	\$0.00	
10/8/2023	Haley Brandin	7am - 7am	24	0	\$ 16.00	\$384.00	\$15.00	\$360.00	\$24.00	
10/9/2023	Brad Eads	7am - 7am	24	0	\$ 16.00	\$384.00	\$20.00	\$480.00	(\$96.00)	
10/10/2023	Amanda Harpst	7am - 7am	24	0	\$ 16.00	\$384.00	\$16.00	\$384.00	\$0.00	
10/11/2023	Joshua Wahleitner	8am - 4am	20	0	\$ 16.00	\$320.00	\$30.00	\$600.00	(\$280.00)	
10/12/2023	Andrew Broussard	7am - 7am	24	0	\$ 16.00	\$384.00	\$18.00	\$432.00	(\$48.00)	
10/13/2023	Ruthann Broussard	8am - 7am	23	0	\$ 16.00	\$368.00	\$15.00	\$345.00	\$23.00	
10/14/2023	Austin Isaacks	7am - 6am	23	0	\$ 16.00	\$368.00	\$16.00	\$368.00	\$0.00	
10/15/2023	Jarrod Brannon	7am - 7pm	12	0	\$ 16.00	\$192.00	\$15.00	\$180.00	\$12.00	
10/15/2023	Travis Delacerda	7pm - 7am	12	0	\$ 16.00	\$192.00	\$15.00	\$180.00	\$12.00	
10/16/2023	Brad Eads	7am - 5am	22	0	\$ 16.00	\$352.00	\$20.00	\$440.00	(\$88.00)	
10/17/2023	Amanda Harpst	7am - 7am	24	0	\$ 16.00	\$384.00	\$16.00	\$384.00	\$0.00	
10/18/2023	Joshua Wahleitner	7am - 4am	21	0	\$ 16.00	\$336.00	\$30.00	\$630.00	(\$294.00)	
10/19/2023	Hunter Traweek	7am - 7am	24	0	\$ 16.00	\$384.00	\$16.00	\$384.00	\$0.00	
10/20/2023	Andrew Broussard	7am - 7am	24	0	\$ 16.00	\$384.00	\$18.00	\$432.00	(\$48.00)	
10/21/2023	Ruthann Broussard	7am - 7am	24	0	\$ 16.00	\$384.00	\$15.00	\$360.00	\$24.00	
10/22/2023	Jeff Gibson	7am - 7pm	12	0	\$ 16.00	\$192.00	\$17.00	\$204.00	(\$12.00)	
10/22/2023	Haley Brandin	7pm - 7am	12	0	\$ 16.00	\$192.00	\$15.00	\$180.00	\$12.00	
10/23/2023	Brad Eads	7am - 7am	24	0	\$ 16.00	\$384.00	\$18.00	\$432.00	(\$48.00)	
10/24/2023	Amanda Harpst	7am - 7am	24	0	\$ 16.00	\$384.00	\$16.00	\$384.00	\$0.00	
10/25/2023	Andrew Broussard	7am - 7am	24	0	\$ 16.00	\$384.00	\$18.00	\$432.00	(\$48.00)	
10/26/2023	Hunter Traweek	7am - 7am	24	0	\$ 16.00	\$384.00	\$16.00	\$384.00	\$0.00	
10/27/2023	Mark Matak	7am - 7am	24	0	\$ 16.00	\$384.00	\$17.00	\$408.00	(\$24.00)	
10/28/2023	Nicole Treto	7am - 7am	24	0	\$ 16.00	\$384.00	\$16.00	\$384.00	\$0.00	
10/29/2023	Austin Isaacks	7am - 7am	24	0	\$ 16.00	\$384.00	\$16.00	\$384.00	\$0.00	
10/30/2023	Keven Gilbert	7am - 7pm	12	0	\$ 16.00	\$192.00	\$20.00	\$240.00	(\$48.00)	
10/30/2023	Jennifer Hafford	7pm - 4am	9	0	\$ 16.00	\$144.00	\$20.00	\$180.00	(\$36.00)	
10/31/2023	Andrew Broussard	7am - 7am	24	0	\$ 16.00	\$384.00	\$18.00	\$432.00	(\$48.00)	
<b>TOTAL SALARY EXPENSE FOR THE MONTH:</b>							<b>\$11,216.00</b>	<b>\$17.76</b>	<b>\$12,377.50</b>	<b>(\$1,161.50)</b>



## Marcelous Williams Resource Center Year 2023 Report

Marcelous Williams Resource Center Winnie-Stowell Hospital District Report											
Year to Date Details for 2023	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	YTD DATE
<b>YTD WSHD REFERRALS</b>	0	2	0	4	2	0	0	0	0	0	8
YTD Indigent Care (Medical, Dental & Vision)	0	2	0	3	2	0	0	0	0	0	7
YTD Prescription Assistance	0	0	0	1	0	0	0	0	0	0	1
YTD Youth Counseling	0	0	0	0	0	0	0	0	0	0	0
YTD Irlen Syndrome Services	0	0	0	0	0	0	0	0	0	0	0
<b>YTD OTHER REFERRALS</b>	2	10	4	4	7	8	7	5	2	1	50
YTD Gift of Life	0	0	0	0	0	0	0	0	0	0	0
YTD Work in Texas (Texas Workforce Commiss	0	0	0	0	0	0	0	0	0	0	0
YTD Chambers County Indigent or OmniPoint FC	0	0	0	0	0	0	0	0	0	0	0
YTD Chambers County Indigent Dental	0	0	0	0	0	0	0	0	0	0	0
YTD Transportation	0	1	0	0	0	0	0	0	0	0	1
YTD Medical Services (Other Than Indigent)	0	2	0	0	1	1	1	0	0	0	5
YTD G.E.T.-C.A.P.	0	0	0	0	0	0	0	0	0	1	1
YTD Misc. MWRC Available Services	2	7	4	4	6	7	6	5	2	1	44
<b>YTD APPLICATIONS INITIATED/PROCESSED</b>	29	26	24	21	28	21	23	40	45	19	276
YTD WSHD Indigent Care	0	0	0	1	3	0	0	0	0	0	4
YTD Prescription Assistance	0	0	0	0	0	0	0	0	0	0	0
YTD Social Security	6	4	2	6	3	4	4	11	7	6	53
YTD Medicare Savings Program	1	1	0	0	2	0	0	1	1	0	6
YTD Medicaid	2	2	2	0	0	4	3	7	6	4	30
YTD Food Stamps	17	19	18	13	15	11	14	16	28	8	159
YTD Home Repair	0	0	1	0	3	2	2	1	1	0	10
YTD G.E.T.-C.A.P.	3	0	1	1	2	0	0	4	2	1	14
<b>YTD CLIENTS SERVED</b>	21	27	24	19	20	24	30	41	40	19	265
YTD WSHD Clients	19	21	23	18	18	23	29	41	40	19	251
YTD Chambers County Residents	0	0	1	1	2	0	1	0	0	0	5
YTD Other County Residents	2	6	0	0	0	0	0	0	0	0	8
YTD OFFICE SUPPLIES EXPENSES	\$1,964.24	\$544.54	\$431.67	\$790.92	\$701.42	\$534.93	\$238.35	\$407.66	\$580.91	\$391.40	\$6,586.04
YTD STAFFING EXPENSES	\$3,984.11	\$3,984.11	\$3,904.16	\$3,253.12	\$6,420.83	\$5,791.13	\$5,466.66	\$5,426.03	\$3,572.08	\$3,204.08	\$45,006.31
YTD GRANT AMOUNT SPENT OF TO \$57,742.00	\$5,948.35	\$4,528.65	\$4,336.83	\$4,044.04	\$7,122.25	\$6,326.06	\$5,705.01	\$5,833.69	\$4,152.99	\$3,595.48	\$51,592.35
YTD GRANT BALANCE REMAINING OF	\$51,793.65	\$47,265.00	\$42,929.17	\$38,885.13	\$31,762.88	\$25,436.82	\$19,731.81	\$13,898.12	\$9,745.13	\$6,149.65	\$6,149.65
<b>OUTREACH ACTIVITIES/EVENTS ATTENDED</b>	0	0	9	3	2	1	1	1	1	2	21

Oct-23 MONTHLY REFERRALS & APPLICATIONS REPORT									
CLIENT DETAILS				PROGRAM(S)	APPLICATION(S) INITIATED WITH CLIENT				
REPEAT CLIENTS Enter "R"	Client Identifier Example: Smi,J OR For Repeat Clients: R	Client Residency Data Winnie Stowell Hosp Dist		Misc. MWRC Available Services	Social Security: Disability, SSI, Retirement	Medicaid	Food Stamps	G.E.T.-C.A.P.	
DATE									
10/2/2023	R	LOP,J	X			X			
10/2/2023		MCL,R	X				X		
10/5/2023		SEB,J	X		X				
10/6/2023		SHA,J	X				X		
10/11/2023	R	MEL,M	X					X	
10/12/2023		THO,S	X		X		X		
10/13/2023	R	STEE	X						
10/16/2023		GAU,M	X						
10/18/2023	R	THO,S	X		X				
10/18/2023	R	DIED	X		X				
10/19/2023	R	LEW,A	X	X					
10/19/2023	R	LEW,M	X			X	X		
10/23/2023	R	WALM	X			X	X		
10/25/2023	R	MCL,C	X		X				
10/26/2023	R	WHIA	X			X	X		
10/27/2023	R	MCL,C	X						
10/30/2023	R	MCL,C	X		X				
10/30/2023	R	LOP,J	X				X		
10/30/2023		ROCE	X				X		
<b>19</b>	<b>(14)</b>	<b>0</b>	<b>19</b>	<b>1</b>	<b>6</b>	<b>4</b>	<b>8</b>	<b>1</b>	

10/2023 OFFICE SUPPLY EXPENSES INCURRED		
2023-10-02	Web services/800#	\$61.02
2023-10-02	Stamps/Myfax	\$62.19
2023-10-04	Administrative Expenses	\$268.19
<b>TOTAL</b>		<b>\$391.40</b>

10/1/2023 MONTHLY EMPLOYEE SCHEDULE & PAYROLL		
10/13/2023	Payroll Payments	\$1,278.04
10/16/2023	Payroll Payments	\$650.00
10/31/2023	Payroll Payments	\$1,276.04
<b>TOTAL SALARY EXPENSE FOR THE MONTH:</b>		<b>\$3,204.08</b>

10/22/2023 MONTHLY OUTREACH & EVENTS							
OUTREACH /EVENT DATE	TYPE OF OUTREACH	EVENT LOCATION	PARTNER(S)	IMPACT	PURPOSE	# OF PKTS DISTRIB	NOTES
10/4/2023	Community and Providers	Winnie		Educational	no special event	100	Teresa and Ramonia delivered outreach packages to SVDP, Winnie Elementary, and a Day Care. The daycare received 3 boxes of new with tags children clothes.
10/4/2023	Community and Providers	Anahuac		Educational	no special event	100	Melissa and Tammy delivered outreach packages to Resale Shop and MET centers.
<b>TOTAL OUTREACH /EVENTS FOR THE MONTH:</b>							<b>2</b>

# **Exhibit “C”**

Facility ID	Operator	Facility Name	Q4 Component 3 Met?				Q4 Component 4 Met?	Current Quarter Metrics Attainment					Year 6 To Date Metrics Attainment				
			Pressure Ulcers	Antipsychotic Medication	Mobility	UTI		Yes	Yes %	No	No %	Total	Yes	Yes %	No	No %	Total
5256	Regency	Spindletop Hill Nursing and Rehabilitation Center	YES	YES	YES	NO	YES	4	80.0%	1	20.0%	5	18	90.0%	2	10.0%	20
5297	Regency	Hallettsville Rehabilitation & Nursing Center	YES	YES	YES	YES	YES	5	100.0%	0	0.0%	5	18	90.0%	2	10.0%	20
5234	Regency	Monument Hill Rehabilitation & Nursing Center	YES	YES	YES	YES	YES	5	100.0%	0	0.0%	5	15	75.0%	5	25.0%	20
5203	Regency	The Woodlands Healthcare Center	YES	YES	YES	YES	YES	5	100.0%	0	0.0%	5	14	70.0%	6	30.0%	20
4154	Caring	Garrison Nursing Home & Rehabilitation Center	YES	YES	YES	YES	YES	5	100.0%	0	0.0%	5	18	90.0%	2	10.0%	20
4376	Caring	Golden Villa	YES	YES	YES	YES	YES	5	100.0%	0	0.0%	5	19	95.0%	1	5.0%	20
110098	Caring	Highland Park Care Center	YES	YES	YES	YES	NO	4	80.0%	1	20.0%	5	18	90.0%	2	10.0%	20
4484	Caring	Marshall Manor Nursing & Rehabilitation Center	YES	YES	YES	YES	YES	5	100.0%	0	0.0%	5	19	95.0%	1	5.0%	20
4730	Caring	Marshall Manor West	YES	YES	YES	YES	YES	5	100.0%	0	0.0%	5	20	100.0%	0	0.0%	20
4798	Caring	Rose Haven Retreat	YES	YES	YES	YES	YES	5	100.0%	0	0.0%	5	19	95.0%	1	5.0%	20
5182	Caring	The Villa at Texarkana	YES	YES	YES	YES	NO	4	80.0%	1	20.0%	5	18	90.0%	2	10.0%	20
5166	Nexion	Oak Manor Nursing Center	YES	YES	YES	YES	YES	5	100.0%	0	0.0%	5	11	55.0%	9	45.0%	20
5307	SLP	Oakland Manor Nursing Center	YES	YES	YES	YES	YES	5	100.0%	0	0.0%	5	16	80.0%	4	20.0%	20
100790	HMG	Park Manor Conroe	YES	YES	YES	YES	NO	4	80.0%	1	20.0%	5	17	85.0%	3	15.0%	20
4456	HMG	Park Manor Cyfair	YES	NO	YES	YES	YES	4	80.0%	1	20.0%	5	17	85.0%	3	15.0%	20
101489	HMG	Park Manor Cypress Station	YES	YES	YES	YES	YES	5	100.0%	0	0.0%	5	18	90.0%	2	10.0%	20
101633	HMG	Park Manor Humble	YES	YES	YES	YES	YES	5	100.0%	0	0.0%	5	17	85.0%	3	15.0%	20
102417	HMG	Park Manor Quail Valley	YES	YES	YES	YES	NO	4	80.0%	1	20.0%	5	18	90.0%	2	10.0%	20
102294	HMG	Park Manor Westchase	NO	YES	YES	YES	YES	4	80.0%	1	20.0%	5	17	85.0%	3	15.0%	20
104661	HMG	Park Manor The Woodlands	YES	YES	YES	YES	YES	5	100.0%	0	0.0%	5	19	95.0%	1	5.0%	20
103191	HMG	Park Manor of Tomball	YES	YES	YES	YES	YES	5	100.0%	0	0.0%	5	19	95.0%	1	5.0%	20
5400	HMG	Park Manor of Southbelt	YES	NO	YES	YES	YES	4	80.0%	1	20.0%	5	17	85.0%	3	15.0%	20
104541	HMG	Deerbrook Skilled Nursing and Rehab	YES	YES	YES	YES	NO	4	80.0%	1	20.0%	5	16	80.0%	4	20.0%	20
4286	HMG	Friendship Haven Healthcare & Rehab Center	NO	YES	YES	YES	NO	3	60.0%	2	40.0%	5	16	80.0%	4	20.0%	20
5225	HMG	Willowbrook Nursing Center	YES	YES	YES	YES	YES	5	100.0%	0	0.0%	5	18	90.0%	2	10.0%	20
106988	HMG	Accel at College Station	NO	YES	YES	YES	YES	4	80.0%	1	20.0%	5	14	70.0%	6	30.0%	20
102375	HMG	Cimarron Place Health & Rehabilitation Center	YES	YES	YES	YES	YES	5	100.0%	0	0.0%	5	17	85.0%	3	15.0%	20
106050	HMG	Silver Springs Health & Rehabilitation Center	YES	YES	YES	YES	YES	5	100.0%	0	0.0%	5	18	90.0%	2	10.0%	20
4158	HMG	Red Oak Health and Rehabilitation Center	YES	YES	YES	YES	YES	5	100.0%	0	0.0%	5	20	100.0%	0	0.0%	20
5255	HMG	Mission Nursing and Rehabilitation Center	YES	YES	YES	YES	YES	5	100.0%	0	0.0%	5	19	95.0%	1	5.0%	20
4053	HMG	Stephenville Rehabilitation and Wellness Center	YES	NO	YES	YES	YES	4	80.0%	1	20.0%	5	16	80.0%	4	20.0%	20
103743	HMG	Hewitt Nursing and Rehabilitation	YES	NO	YES	YES	YES	4	80.0%	1	20.0%	5	18	90.0%	2	10.0%	20
103011	HMG	Stallings Court Nursing and Rehabilitation	NO	NO	YES	YES	YES	3	60.0%	2	40.0%	5	14	70.0%	6	30.0%	20
104537	HMG	Pecan Bayou Nursing and Rehabilitation	YES	YES	YES	YES	YES	5	100.0%	0	0.0%	5	19	95.0%	1	5.0%	20
5372	HMG	Holland Lake Rehabilitation and Wellness Center	YES	YES	YES	YES	YES	5	100.0%	0	0.0%	5	19	95.0%	1	5.0%	20
5387	HMG	Stonegate Nursing and Rehabilitation	YES	YES	YES	YES	YES	5	100.0%	0	0.0%	5	19	95.0%	1	5.0%	20
102993	HMG	Green Oaks Nursing and Rehabilitation	YES	YES	YES	YES	YES	5	100.0%	0	0.0%	5	18	90.0%	2	10.0%	20
103223	HMG	Crowley Nursing and Rehabilitation	YES	YES	YES	YES	YES	5	100.0%	0	0.0%	5	19	95.0%	1	5.0%	20
103435	HMG	Harbor Lakes Nursing and Rehabilitation Center	YES	YES	YES	YES	YES	3	60.0%	2	40.0%	5	15	75.0%	5	25.0%	20
5383	Caring	Spring Branch Transitional Care Center	NO	NO	YES	YES	YES	0	#DIV/0!	0	#DIV/0!	0	13	86.7%	2	13.3%	15
<b>Total NSGO</b>								<b>177</b>	<b>90.8%</b>	<b>18</b>	<b>9.2%</b>	<b>195</b>	<b>690</b>	<b>88.5%</b>	<b>105</b>	<b>13.5%</b>	<b>780</b>

Q4 Metrics Met		
Yes	177	90.8%
No	18	9.2%
	<b>195</b>	

# Quality Incentive Payment Program - Year 6 (SFY23)

Quarter 4

June 2023 - August 2023

**\*\*Note: Enable Editing to use dropdowns\*\***

MCO:	All MCOs in Providers SDA	Facility Name:	SPINDLETOP HILL NURSING AND REHABILITATION CENTER	SDA:	JEFFERSON
Facility ID:	5256	Legal Entity Name:	WINNIESTOWELL HOSPITAL DISTRICT	Medicaid Contract #	1026108

*Funds Earned	QUARTER 1			QUARTER 2			QUARTER 3			QUARTER 4			Adjustment Periods			Total
	Sep 2022	Oct 2022	Nov 2022	Dec 2022	Jan 2023	Feb 2023	Mar 2023	Apr 2023	May 2023	Jun 2023	Jul 2023	Aug 2023	Adj 1	Adj 2	Adj 3	Year to Date
Component 1	\$ 77,898	\$ 82,071	\$ 89,076	\$ 85,102	\$ 82,518	\$ 85,897	\$ 82,171	\$ 82,817	\$ 86,294	\$ 81,773	\$ 84,456	\$ 80,680	\$ -	\$ -	\$ -	\$ 1,000,754
Component 2	\$ 20,180	\$ 21,261	\$ 23,076	\$ 22,046	\$ 21,377	\$ 22,252	\$ 21,287	\$ 21,454	\$ 22,355	\$ 21,184	\$ 21,879	\$ 20,901	\$ -	\$ -	\$ -	\$ 259,253
Component 3			\$ 72,563			\$ 97,697			\$ 97,537		\$ 72,814		\$ -	\$ -	\$ -	\$ 340,611
Component 4			\$ 90,435			\$ 92,058			\$ 91,246		\$ 89,659		\$ -	\$ -	\$ -	\$ 363,398
Qtr. Non-Dispersed Funds			\$ 68,277			\$ 78,047			\$ 54,665		\$ 102,462		\$ -	\$ -	\$ -	\$ 303,452
<b>QUARTER TOTALS</b>			\$ 544,838			\$ 586,995			\$ 559,827		\$ 575,808		\$ -	\$ -	\$ -	\$ 2,267,468

Payment Period	From Month	To Month	Estimated Scorecard Release
Quarter 1	Sep-22	Nov-22	Jan-23
Quarter 2	Dec-22	Feb-23	Apr-23
Quarter 3	Mar-23	May-23	Jul-23
Quarter 4	Jun-23	Aug-23	Oct-23
Adjustment Period 1	Sep-23	Dec-23	Jan-24
Adjustment Period 2	Jan-24	Aug-24	Sep-24
Adjustment Period 3	Sep-24	Jul-25	Aug-25

	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June	July	Aug	Total	Pay Tab	Variance
Comp 1	\$ (138.40)	\$ (138.32)	\$ (138.80)	\$ (135.68)	\$ (136.88)	\$ (136.32)	\$ (132.80)	\$ (136.16)	\$ (135.04)	\$ (134.32)	\$ (130.96)	\$ (117.84)	\$ (1,611.52)		
Comp 3	\$ -	\$ (14.47)	\$ 14.48	\$ (38.60)	\$ 115.80	\$ 173.70	\$ 270.20	\$ 1,003.60	\$ 1,968.60	#####	\$ 23,695.58	\$ 21,321.68	\$ 72,814.08		
Comp 4	\$ (51.90)	\$ (69.94)	\$ (33.98)	\$ (87.02)	\$ 57.09	\$ 111.51	\$ 203.18	\$ 888.58	\$ 1,792.50	#####	\$ 29,531.48	\$ 26,572.92	\$ 89,203.58		
Lapse	\$ 173.00	\$ 159.38	\$ 187.02	\$ 156.08	\$ 279.65	\$ 324.60	\$ 280.78	\$ 685.80	\$ 1,213.18	#####	\$ 34,344.26	\$ 30,903.54	\$ 103,932.71		
													\$ 264,338.85	\$ 264,338.85	\$ 0.01

# Quality Incentive Payment Program - Year 6 (SFY23)

Quarter 4

June 2023 - August 2023

**\*\*Note: Enable Editing to use dropdowns\*\***

MCO:	All MCOs in Providers SDA	Facility Name:	HALLETTSVILLE NURSING AND REHABILITATION CENTER	SDA:	MRSA CENTRAL
Facility ID:	5297	Legal Entity Name:	WINNIESTOWELL HOSPITAL DISTRICT	Medicaid Contract #	1026030

*Funds Earned	QUARTER 1			QUARTER 2			QUARTER 3			QUARTER 4			Adjustment Periods			Total
	Sep 2022	Oct 2022	Nov 2022	Dec 2022	Jan 2023	Feb 2023	Mar 2023	Apr 2023	May 2023	Jun 2023	Jul 2023	Aug 2023	Adj 1	Adj 2	Adj 3	
Component 1	\$ 39,651	\$ 43,495	\$ 46,263	\$ 45,325	\$ 44,273	\$ 46,481	\$ 44,273	\$ 45,852	\$ 44,570	\$ 44,925	\$ 44,822	\$ 44,925	\$ -	\$ -	\$ -	\$ 534,854
Component 2	\$ 10,259	\$ 11,254	\$ 11,970	\$ 11,728	\$ 11,455	\$ 12,026	\$ 11,455	\$ 11,864	\$ 11,532	\$ 11,624	\$ 11,624	\$ 11,624	\$ -	\$ -	\$ -	\$ 138,389
Component 3			\$ 50,338			\$ 27,603			\$ 51,629			\$ 52,265	\$ -	\$ -	\$ -	\$ 181,836
Component 4			\$ 46,945			\$ 49,364			\$ 48,862			\$ 48,854	\$ -	\$ -	\$ -	\$ 194,025
Qtr. Non-Dispersed Funds			\$ 37,330			\$ 38,229			\$ 29,155			\$ 58,050	\$ -	\$ -	\$ -	\$ 162,764
<b>QUARTER TOTALS</b>			\$ 297,506			\$ 286,485			\$ 299,192			\$ 328,686	\$ -	\$ -	\$ -	\$ 1,211,868

Payment Period	From Month	To Month	Estimated Scorecard Release
Quarter 1	Sep-22	Nov-22	Jan-23
Quarter 2	Dec-22	Feb-23	Apr-23
Quarter 3	Mar-23	May-23	Jul-23
Quarter 4	Jun-23	Aug-23	Oct-23
Adjustment Period 1	Sep-23	Dec-23	Jan-24
Adjustment Period 2	Jan-24	Aug-24	Sep-24
Adjustment Period 3	Sep-24	Jul-25	Aug-25

	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June	July	Aug	Total	Pay Tab	Variance
Comp 1	\$ (79.34)	\$ (79.18)	\$ (79.76)	\$ (79.30)	\$ (78.06)	\$ (78.28)	\$ (78.94)	\$ (79.36)	\$ (78.70)	\$ (77.98)	\$ (76.04)	\$ (70.12)	\$ (935.06)		
Comp 3	\$ 48.95	\$ 40.05	\$ 66.75	\$ 37.83	\$ 40.05	\$ 42.28	\$ 226.95	\$ 525.10	\$ 1,366.15	#####	\$16,918.90	\$ 15,601.70	\$ 52,265.25		
Comp 4	\$ 6.09	\$ (2.15)	\$ 22.52	\$ 31.07	\$ 35.85	\$ 39.90	\$ 172.69	\$ 451.20	\$ 1,237.77	#####	\$15,778.30	\$ 14,549.90	\$ 48,503.99		
Lapse	\$ 154.98	\$ 148.20	\$ 168.69	\$ 133.53	\$ 135.48	\$ 138.89	\$ 202.87	\$ 366.10	\$ 824.71	#####	\$19,200.10	\$ 17,705.30	\$ 58,868.80		
													\$ 158,702.98	\$158,702.99	\$ 0.01

# Quality Incentive Payment Program - Year 6 (SFY23)

Quarter 4

June 2023 - August 2023

**\*\*Note: Enable Editing to use dropdowns\*\***

MCO:	All MCOs in Providers SDA	Facility Name:	MONUMENT HILL NURSING AND REHABILITATION CENTER	SDA:	TRAVIS
Facility ID:	5234	Legal Entity Name:	WINNIESTOWELL HOSPITAL DISTRICT	Medicaid Contract #	1026029

*Funds Earned	QUARTER 1			QUARTER 2			QUARTER 3			QUARTER 4			Adjustment Periods			Total
	Sep 2022	Oct 2022	Nov 2022	Dec 2022	Jan 2023	Feb 2023	Mar 2023	Apr 2023	May 2023	Jun 2023	Jul 2023	Aug 2023	Adj 1	Adj 2	Adj 3	
Component 1	\$ 33,758	\$ 39,137	\$ 42,607	\$ 40,797	\$ 39,424	\$ 39,599	\$ 40,822	\$ 40,448	\$ 38,613	\$ 40,622	\$ 40,622	\$ 38,139	\$ -	\$ -	\$ -	\$ 474,589
Component 2	\$ 8,737	\$ 10,129	\$ 11,027	\$ 10,559	\$ 10,204	\$ 10,249	\$ 10,565	\$ 10,468	\$ 9,994	\$ 10,514	\$ 10,514	\$ 9,871	\$ -	\$ -	\$ -	\$ 122,830
Component 3			\$ 22,443			\$ 12,034			\$ 45,246			\$ 46,301	\$ -	\$ -	\$ -	\$ 126,024
Component 4			\$ 41,925			\$ 43,493			\$ 43,515			\$ 43,334	\$ -	\$ -	\$ -	\$ 172,267
Qtr. Non-Dispersed Funds			\$ 30,079			\$ 31,760			\$ 25,796			\$ 51,446	\$ -	\$ -	\$ -	\$ 139,080
<b>QUARTER TOTALS</b>			\$ 239,843			\$ 238,118			\$ 265,467			\$ 291,362	\$ -	\$ -	\$ -	\$ 1,034,790

Payment Period	From Month	To Month	Estimated Scorecard Release
Quarter 1	Sep-22	Nov-22	Jan-23
Quarter 2	Dec-22	Feb-23	Apr-23
Quarter 3	Mar-23	May-23	Jul-23
Quarter 4	Jun-23	Aug-23	Oct-23
Adjustment Period 1	Sep-23	Dec-23	Jan-24
Adjustment Period 2	Jan-24	Aug-24	Sep-24
Adjustment Period 3	Sep-24	Jul-25	Aug-25

	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June	July	Aug	Total	Pay Tab	Variance
Comp 1	\$ (63.56)	\$ (64.06)	\$ (64.42)	\$ (64.56)	\$ (64.18)	\$ (64.40)	\$ (64.26)	\$ (64.18)	\$ (64.60)	\$ (63.54)	\$ (62.20)	\$ (56.60)	\$ (760.56)		
Comp 3	\$ (9.70)	\$ -	\$ 9.70	\$ 2.43	\$ 13.34	\$ 15.76	\$ 106.70	\$ 494.70	\$ 1,450.15	#####	\$15,083.50	\$ 13,725.50	\$ 46,300.53		
Comp 4	\$ (49.94)	\$ (32.03)	\$ (14.05)	\$ (23.20)	\$ 17.85	\$ 26.82	\$ 67.75	\$ 430.99	\$ 1,325.16	#####	\$14,088.30	\$ 12,819.90	\$ 43,049.36		
Lapse	\$ 82.46	\$ 96.09	\$ 109.51	\$ 71.14	\$ 100.37	\$ 107.17	\$ 122.34	\$ 333.46	\$ 853.96	#####	\$17,136.10	\$ 15,593.30	\$ 52,111.17		
													\$ 140,700.50	\$140,700.50	\$ 0.01

# Quality Incentive Payment Program - Year 6 (SFY23)

Quarter 4

June 2023 - August 2023

**\*\*Note: Enable Editing to use dropdowns\*\***

MCO:	All MCOs in Providers SDA	Facility Name:	THE WOODLANDS NURSING AND REHABILITATION CENTER	SDA:	HARRIS
Facility ID:	5203	Legal Entity Name:	WINNIESTOWELL HOSPITAL DISTRICT	Medicaid Contract #	1026005

*Funds Earned	QUARTER 1			QUARTER 2			QUARTER 3			QUARTER 4			Adjustment Periods			Total
	Sep 2022	Oct 2022	Nov 2022	Dec 2022	Jan 2023	Feb 2023	Mar 2023	Apr 2023	May 2023	Jun 2023	Jul 2023	Aug 2023	Adj 1	Adj 2	Adj 3	Year to Date
Component 1	\$ 104,018	\$ 112,677	\$ 120,629	\$ 115,040	\$ 115,661	\$ 126,115	\$ 127,288	\$ 121,940	\$ 120,578	\$ 121,906	\$ 123,286	\$ 119,577	\$ -	\$ -	\$ -	\$ 1,428,714
Component 2	\$ 26,954	\$ 29,198	\$ 31,259	\$ 29,810	\$ 29,971	\$ 32,680	\$ 32,984	\$ 31,598	\$ 31,245	\$ 31,589	\$ 31,947	\$ 30,986	\$ -	\$ -	\$ -	\$ 370,223
Component 3			\$ 65,509			\$ 102,580				\$ 39,821		\$ 135,965	\$ -	\$ -	\$ -	\$ 343,876
Component 4				\$ 122,610			\$ 129,695			\$ 134,416		\$ 132,585	\$ -	\$ -	\$ -	\$ 519,306
Qtr. Non-Dispersed Funds				\$ 87,802			\$ 104,401			\$ 70,494		\$ 155,148	\$ -	\$ -	\$ -	\$ 417,846
<b>QUARTER TOTALS</b>				\$ 700,656			\$ 785,955			\$ 710,365		\$ 882,990	\$ -	\$ -	\$ -	\$ 3,079,965

Payment Period	From Month	To Month	Estimated Scorecard Release
Quarter 1	Sep-22	Nov-22	Jan-23
Quarter 2	Dec-22	Feb-23	Apr-23
Quarter 3	Mar-23	May-23	Jul-23
Quarter 4	Jun-23	Aug-23	Oct-23
Adjustment Period 1	Sep-23	Dec-23	Jan-24
Adjustment Period 2	Jan-24	Aug-24	Sep-24
Adjustment Period 3	Sep-24	Jul-25	Aug-25

	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June	July	Aug	Total	Pay Tab	Variance
Comp 1	\$ (206.88)	\$ (206.94)	\$ (208.17)	\$ (209.22)	\$ (208.38)	\$ (212.58)	\$ (212.16)	\$ (211.05)	\$ (212.04)	\$ (207.12)	\$ (203.67)	\$ (186.51)	\$ (2,484.72)		
Comp 3	\$ 50.25	\$ 77.05	\$ 50.25	\$ 95.47	\$ 195.97	\$ 321.60	\$ 174.20	\$ 363.47	\$ 1,239.50	#####	\$45,486.30	\$ 41,653.90	\$ 135,964.78		
Comp 4	\$ 25.24	\$ 75.46	\$ 24.81	\$ 49.58	\$ 175.46	\$ 331.06	\$ 582.40	\$ 1,292.41	\$ 4,576.52	#####	\$42,567.03	\$ 38,980.59	\$ 131,968.64		
Lapse	\$ 273.78	\$ 309.52	\$ 275.07	\$ 304.98	\$ 404.94	\$ 535.14	\$ 470.08	\$ 826.42	\$ 2,479.76	#####	\$51,460.62	\$ 47,124.86	\$ 156,797.49		
													\$ 422,246.19	\$422,246.19	\$ 0.01

# Quality Incentive Payment Program - Year 6 (SFY23)

Quarter 4

June 2023 - August 2023

\*\*Note: Enable Editing to use dropdowns\*\*

<b>MCO:</b>	All MCOs in Providers SDA	<b>Facility Name:</b>	GARRISON NURSING HOME & REHABILITATION CENTER	<b>SDA:</b>	MRSA NORTHEAST
<b>Facility ID:</b>	4154	<b>Legal Entity Name:</b>	WINNIESTOWELL HOSPITAL DISTRICT	<b>Medicaid Contract #</b>	1026192

*Funds Earned	QUARTER 1			QUARTER 2			QUARTER 3			QUARTER 4			Adjustment Periods			Total
	Sep 2022	Oct 2022	Nov 2022	Dec 2022	Jan 2023	Feb 2023	Mar 2023	Apr 2023	May 2023	Jun 2023	Jul 2023	Aug 2023	Adj 1	Adj 2	Adj 3	
Component 1	\$ 47,280	\$ 53,047	\$ 58,113	\$ 54,226	\$ 52,877	\$ 54,109	\$ 56,063	\$ 53,153	\$ 54,343	\$ 56,488	\$ 54,258	\$ 54,555	\$ -	\$ -	\$ -	\$ 648,510
Component 2	\$ 12,243	\$ 13,736	\$ 15,048	\$ 14,042	\$ 13,692	\$ 14,011	\$ 14,517	\$ 13,764	\$ 14,072	\$ 14,627	\$ 14,050	\$ 14,127	\$ -	\$ -	\$ -	\$ 167,929
Component 3			\$ 46,212			\$ 62,233			\$ 48,332			\$ 63,409	\$ -	\$ -	\$ -	\$ 220,186
Component 4			\$ 57,587			\$ 58,595			\$ 59,448			\$ 60,081	\$ -	\$ -	\$ -	\$ 235,711
Qtr. Non-Dispersed Funds			\$ 43,414			\$ 49,625			\$ 34,148			\$ 70,743	\$ -	\$ -	\$ -	\$ 197,931
<b>QUARTER TOTALS</b>			\$ 346,680			\$ 373,410			\$ 347,840			\$ 402,337	\$ -	\$ -	\$ -	\$ 1,470,267

Payment Period	From Month	To Month	Estimated Scorecard Release
Quarter 1	Sep-22	Nov-22	Jan-23
Quarter 2	Dec-22	Feb-23	Apr-23
Quarter 3	Mar-23	May-23	Jul-23
Quarter 4	Jun-23	Aug-23	Oct-23
Adjustment Period 1	Sep-23	Dec-23	Jan-24
Adjustment Period 2	Jan-24	Aug-24	Sep-24
Adjustment Period 3	Sep-24	Jul-25	Aug-25

	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June	July	Aug	Total	Pay Tab	Variance
<b>Comp 1</b>	\$ (102.48)	\$ (103.00)	\$ (103.58)	\$ (103.18)	\$ (101.58)	\$ (103.98)	\$ (103.90)	\$ (103.48)	\$ (103.66)	\$ (101.86)	\$ (99.72)	\$ (90.88)	\$ (1,221.30)		
<b>Comp 3</b>	\$ 18.58	\$ 21.68	\$ 9.29	\$ 49.56	\$ 103.25	\$ 239.54	\$ 272.58	\$ 647.38	\$ 1,654.07	#####	\$ 20,592.18	\$ 18,766.72	\$ 63,408.92		
<b>Comp 4</b>	\$ 23.16	\$ 27.02	\$ 11.58	\$ 46.32	\$ 96.50	\$ 223.88	\$ 339.68	\$ 806.74	\$ 2,061.24	#####	\$ 19,245.96	\$ 17,539.84	\$ 60,080.90		
<b>Lapse</b>	\$ 119.82	\$ 123.23	\$ 112.25	\$ 142.30	\$ 183.08	\$ 293.06	\$ 242.03	\$ 503.18	\$ 1,205.27	#####	\$ 23,384.34	\$ 21,311.36	\$ 71,506.09		
													\$ 193,774.61	\$ 193,774.62	\$ 0.01



# Quality Incentive Payment Program - Year 6 (SFY23)

Quarter 4

June 2023 - August 2023

**\*\*Note: Enable Editing to use dropdowns\*\***

MCO:	All MCOs in Providers SDA	Facility Name:	GOLDEN VILLA	SDA:	MRSA NORTHEAST
Facility ID:	4376	Legal Entity Name:	WINNIESTOWELL HOSPITAL DISTRICT	Medicaid Contract #	1026193

*Funds Earned	QUARTER 1			QUARTER 2			QUARTER 3			QUARTER 4			Adjustment Periods			Total
	Sep 2022	Oct 2022	Nov 2022	Dec 2022	Jan 2023	Feb 2023	Mar 2023	Apr 2023	May 2023	Jun 2023	Jul 2023	Aug 2023	Adj 1	Adj 2	Adj 3	Year to Date
Component 1	\$ 47,993	\$ 53,846	\$ 58,988	\$ 55,043	\$ 53,674	\$ 54,924	\$ 56,908	\$ 53,954	\$ 55,161	\$ 57,339	\$ 55,075	\$ 55,377	\$ -	\$ -	\$ -	\$ 658,281
Component 2	\$ 12,421	\$ 13,936	\$ 15,267	\$ 14,246	\$ 13,891	\$ 14,215	\$ 14,728	\$ 13,964	\$ 14,276	\$ 14,840	\$ 14,254	\$ 14,332	\$ -	\$ -	\$ -	\$ 170,371
Component 3			\$ 46,883			\$ 63,137			\$ 64,455			\$ 65,201	\$ -	\$ -	\$ -	\$ 239,675
Component 4			\$ 58,333			\$ 59,354			\$ 60,218			\$ 60,859	\$ -	\$ -	\$ -	\$ 238,764
Qtr. Non-Dispersed Funds			\$ 44,011			\$ 50,380			\$ 36,243			\$ 72,035	\$ -	\$ -	\$ -	\$ 202,668
<b>QUARTER TOTALS</b>			\$ 351,678			\$ 378,863			\$ 369,907			\$ 409,312	\$ -	\$ -	\$ -	\$ 1,509,760

Payment Period	From Month	To Month	Estimated Scorecard Release
Quarter 1	Sep-22	Nov-22	Jan-23
Quarter 2	Dec-22	Feb-23	Apr-23
Quarter 3	Mar-23	May-23	Jul-23
Quarter 4	Jun-23	Aug-23	Oct-23
Adjustment Period 1	Sep-23	Dec-23	Jan-24
Adjustment Period 2	Jan-24	Aug-24	Sep-24
Adjustment Period 3	Sep-24	Jul-25	Aug-25

	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June	July	Aug	Total	Pay Tab	Variance
Comp 1	\$ (102.48)	\$ (103.00)	\$ (103.58)	\$ (103.18)	\$ (101.58)	\$ (103.98)	\$ (103.90)	\$ (103.48)	\$ (103.66)	\$ (101.86)	\$ (99.72)	\$ (90.88)	\$ (1,221.30)		
Comp 3	\$ 18.85	\$ 22.00	\$ 9.43	\$ 50.28	\$ 104.75	\$ 243.02	\$ 368.72	\$ 875.71	\$ 2,237.46	#####	\$20,891.34	\$ 19,039.36	\$ 65,200.59		
Comp 4	\$ (27.72)	\$ (24.06)	\$ (40.03)	\$ (4.55)	\$ 47.21	\$ 175.37	\$ 293.01	\$ 767.54	\$ 2,041.45	#####	\$19,495.26	\$ 17,767.04	\$ 60,404.15		
Lapse	\$ 120.06	\$ 123.51	\$ 112.37	\$ 142.90	\$ 184.33	\$ 295.96	\$ 305.42	\$ 582.09	\$ 1,326.52	#####	\$23,783.22	\$ 21,674.88	\$ 72,944.87		
													\$ 197,328.31	\$197,328.31	\$ -

# Quality Incentive Payment Program - Year 6 (SFY23)

Quarter 4

June 2023 - August 2023

**\*\*Note: Enable Editing to use dropdowns\*\***

MCO:	All MCOs in Providers SDA	Facility Name:	HIGHLAND PARK REHABILITATION & NURSING CENTER	SDA:	HARRIS
Facility ID:	110098	Legal Entity Name:	WINNIESTOWELL HOSPITAL DISTRICT	Medicaid Contract #	1026169

*Funds Earned	QUARTER 1			QUARTER 2			QUARTER 3			QUARTER 4			Adjustment Periods			Total
	Sep 2022	Oct 2022	Nov 2022	Dec 2022	Jan 2023	Feb 2023	Mar 2023	Apr 2023	May 2023	Jun 2023	Jul 2023	Aug 2023	Adj 1	Adj 2	Adj 3	
Component 1	\$ 59,335	\$ 64,275	\$ 68,811	\$ 65,623	\$ 65,977	\$ 71,940	\$ 72,609	\$ 69,559	\$ 68,782	\$ 69,539	\$ 70,326	\$ 68,211	\$ -	\$ -	\$ -	\$ 814,988
Component 2	\$ 15,377	\$ 16,657	\$ 17,832	\$ 17,006	\$ 17,098	\$ 18,643	\$ 18,816	\$ 18,026	\$ 17,825	\$ 18,021	\$ 18,225	\$ 17,677	\$ -	\$ -	\$ -	\$ 211,201
Component 3			\$ 56,025			\$ 78,240			\$ 81,595		\$ 80,727		\$ -	\$ -	\$ -	\$ 296,588
Component 4			\$ 69,811			\$ 73,845			\$ 76,534		\$ 4,413		\$ -	\$ -	\$ -	\$ 224,603
Qtr. Non-Dispersed Funds			\$ 52,799			\$ 62,606			\$ 46,359		\$ 74,827		\$ -	\$ -	\$ -	\$ 236,591
<b>QUARTER TOTALS</b>			\$ 420,921			\$ 470,979			\$ 470,105		\$ 421,965		\$ -	\$ -	\$ -	\$ 1,783,971

Payment Period	From Month	To Month	Estimated Scorecard Release
Quarter 1	Sep-22	Nov-22	Jan-23
Quarter 2	Dec-22	Feb-23	Apr-23
Quarter 3	Mar-23	May-23	Jul-23
Quarter 4	Jun-23	Aug-23	Oct-23
Adjustment Period 1	Sep-23	Dec-23	Jan-24
Adjustment Period 2	Jan-24	Aug-24	Sep-24
Adjustment Period 3	Sep-24	Jul-25	Aug-25

	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June	July	Aug	Total	Pay Tab	Variance
Comp 1	\$ (68.96)	\$ (68.98)	\$ (69.39)	\$ (69.74)	\$ (69.46)	\$ (70.86)	\$ (70.72)	\$ (70.35)	\$ (70.68)	\$ (69.04)	\$ (67.89)	\$ (62.17)	\$ (828.24)		
Comp 3	\$ 42.97	\$ 65.90	\$ 42.97	\$ 72.58	\$ 148.98	\$ 244.48	\$ 397.28	\$ 828.94	\$ 2,826.80	#####	\$25,933.98	\$ 23,748.94	\$ 80,727.11		
Comp 4	\$ (15.26)	\$ 13.36	\$ (15.69)	\$ (1.72)	\$ 70.16	\$ 158.26	\$ 301.60	\$ 706.51	\$ 2,578.52	\$ -	\$ -	\$ -	\$ 3,795.74		
Lapse	\$ 178.12	\$ 199.60	\$ 178.98	\$ 196.86	\$ 256.70	\$ 335.00	\$ 358.80	\$ 594.23	\$ 1,687.96	#####	\$24,576.18	\$ 22,505.54	\$ 76,060.45		
													\$ 159,755.06	\$159,755.06	\$ 0.01

# Quality Incentive Payment Program - Year 6 (SFY23)

Quarter 4

June 2023 - August 2023

**\*\*Note: Enable Editing to use dropdowns\*\***

MCO:	All MCOs in Providers SDA	Facility Name:	MARSHALL MANOR NURSING & REHABILITATION CENTER	SDA:	MRSA NORTHEAST
Facility ID:	4484	Legal Entity Name:	WINNIESTOWELL HOSPITAL DISTRICT	Medicaid Contract #	1026138

*Funds Earned	QUARTER 1			QUARTER 2			QUARTER 3			QUARTER 4			Adjustment Periods			Total
	Sep 2022	Oct 2022	Nov 2022	Dec 2022	Jan 2023	Feb 2023	Mar 2023	Apr 2023	May 2023	Jun 2023	Jul 2023	Aug 2023	Adj 1	Adj 2	Adj 3	
Component 1	\$ 61,260	\$ 68,731	\$ 75,295	\$ 70,259	\$ 68,511	\$ 70,107	\$ 72,639	\$ 68,869	\$ 70,410	\$ 73,189	\$ 70,300	\$ 70,685	\$ -	\$ -	\$ -	\$ 840,254
Component 2	\$ 15,849	\$ 17,782	\$ 19,480	\$ 18,177	\$ 17,725	\$ 18,138	\$ 18,793	\$ 17,818	\$ 18,217	\$ 18,936	\$ 18,188	\$ 18,288	\$ -	\$ -	\$ -	\$ 217,391
Component 3			\$ 59,862			\$ 80,616			\$ 82,299			\$ 83,251	\$ -	\$ -	\$ -	\$ 306,029
Component 4			\$ 74,595			\$ 75,900			\$ 77,005			\$ 77,825	\$ -	\$ -	\$ -	\$ 305,325
Qtr. Non-Dispersed Funds			\$ 56,245			\$ 64,301			\$ 46,282			\$ 91,970	\$ -	\$ -	\$ -	\$ 258,798
<b>QUARTER TOTALS</b>			\$ 449,099			\$ 483,735			\$ 472,332			\$ 522,632	\$ -	\$ -	\$ -	\$ 1,927,798

Payment Period	From Month	To Month	Estimated Scorecard Release
Quarter 1	Sep-22	Nov-22	Jan-23
Quarter 2	Dec-22	Feb-23	Apr-23
Quarter 3	Mar-23	May-23	Jul-23
Quarter 4	Jun-23	Aug-23	Oct-23
Adjustment Period 1	Sep-23	Dec-23	Jan-24
Adjustment Period 2	Jan-24	Aug-24	Sep-24
Adjustment Period 3	Sep-24	Jul-25	Aug-25

	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June	July	Aug	Total	Pay Tab	Variance
Comp 1	\$ (102.48)	\$ (103.00)	\$ (103.58)	\$ (103.18)	\$ (101.58)	\$ (103.98)	\$ (103.90)	\$ (103.48)	\$ (103.66)	\$ (101.86)	\$ (99.72)	\$ (90.88)	\$ (1,221.30)		
Comp 3	\$ 24.08	\$ 28.09	\$ 12.04	\$ 64.20	\$ 133.75	\$ 310.30	\$ 470.80	\$ 1,118.15	\$ 2,856.90	#####	\$26,675.10	\$ 24,310.40	\$ 83,251.35		
Comp 4	\$ (21.18)	\$ (16.43)	\$ (36.76)	\$ 8.53	\$ 74.46	\$ 238.59	\$ 388.93	\$ 995.35	\$ 2,623.51	#####	\$24,930.00	\$ 22,720.00	\$ 77,370.00		
Lapse	\$ 176.16	\$ 180.68	\$ 166.59	\$ 205.41	\$ 257.87	\$ 400.73	\$ 361.74	\$ 715.85	\$ 1,668.28	#####	\$30,364.74	\$ 27,672.96	\$ 93,187.38		
													\$ 252,587.43	\$252,587.43	\$ -

# Quality Incentive Payment Program - Year 6 (SFY23)

Quarter 4

June 2023 - August 2023

**\*\*Note: Enable Editing to use dropdowns\*\***

MCO:	All MCOs in Providers SDA	Facility Name:	MARSHALL MANOR WEST	SDA:	MRSA NORTHEAST
Facility ID:	4730	Legal Entity Name:	WINNIESTOWELL HOSPITAL DISTRICT	Medicaid Contract #	1026049

*Funds Earned	QUARTER 1			QUARTER 2			QUARTER 3			QUARTER 4			Adjustment Periods			Total
	Sep 2022	Oct 2022	Nov 2022	Dec 2022	Jan 2023	Feb 2023	Mar 2023	Apr 2023	May 2023	Jun 2023	Jul 2023	Aug 2023	Adj 1	Adj 2	Adj 3	Year to Date
Component 1	\$ 42,561	\$ 47,752	\$ 52,312	\$ 48,813	\$ 47,599	\$ 48,708	\$ 50,467	\$ 47,848	\$ 48,919	\$ 50,850	\$ 48,842	\$ 49,110	\$ -	\$ -	\$ -	\$ 583,781
Component 2	\$ 11,041	\$ 12,388	\$ 13,571	\$ 12,663	\$ 12,348	\$ 12,636	\$ 13,092	\$ 12,412	\$ 12,690	\$ 13,191	\$ 12,670	\$ 12,740	\$ -	\$ -	\$ -	\$ 151,441
Component 3			\$ 55,499			\$ 56,470			\$ 57,292			\$ 57,902	\$ -	\$ -	\$ -	\$ 227,162
Component 4			\$ 51,769			\$ 52,675			\$ 53,441			\$ 54,011	\$ -	\$ -	\$ -	\$ 211,896
Qtr. Non-Dispersed Funds			\$ 41,176			\$ 44,844			\$ 32,176			\$ 64,030	\$ -	\$ -	\$ -	\$ 182,227
<b>QUARTER TOTALS</b>			\$ 328,069			\$ 336,755			\$ 328,338			\$ 363,345	\$ -	\$ -	\$ -	\$ 1,356,507

Payment Period	From Month	To Month	Estimated Scorecard Release
Quarter 1	Sep-22	Nov-22	Jan-23
Quarter 2	Dec-22	Feb-23	Apr-23
Quarter 3	Mar-23	May-23	Jul-23
Quarter 4	Jun-23	Aug-23	Oct-23
Adjustment Period 1	Sep-23	Dec-23	Jan-24
Adjustment Period 2	Jan-24	Aug-24	Sep-24
Adjustment Period 3	Sep-24	Jul-25	Aug-25

	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June	July	Aug	Total	Pay Tab	Variance
Comp 1	\$ (102.48)	\$ (103.00)	\$ (103.58)	\$ (103.18)	\$ (101.58)	\$ (103.98)	\$ (103.90)	\$ (103.48)	\$ (103.66)	\$ (101.86)	\$ (99.72)	\$ (90.88)	\$ (1,221.30)		
Comp 3	\$ 22.32	\$ 26.04	\$ 11.16	\$ 44.64	\$ 93.00	\$ 215.76	\$ 327.36	\$ 777.48	\$ 1,986.48	#####	\$18,547.92	\$ 16,903.68	\$ 57,901.80		
Comp 4	\$ (30.36)	\$ (27.14)	\$ (41.35)	\$ (9.83)	\$ 36.21	\$ 149.85	\$ 254.29	\$ 675.58	\$ 1,806.49	#####	\$17,301.42	\$ 15,767.68	\$ 53,555.55		
Lapse	\$ 118.92	\$ 122.18	\$ 111.80	\$ 138.46	\$ 175.08	\$ 274.50	\$ 231.47	\$ 478.10	\$ 1,141.19	#####	\$21,140.64	\$ 19,266.56	\$ 64,793.22		
													\$ 175,029.27	\$175,029.27	\$ -

# Quality Incentive Payment Program - Year 6 (SFY23)

Quarter 4

June 2023 - August 2023

**\*\*Note: Enable Editing to use dropdowns\*\***

MCO:	All MCOs in Providers SDA	Facility Name:	ROSE HAVEN RETREAT	SDA:	MRSA NORTHEAST
Facility ID:	4798	Legal Entity Name:	WINNIESTOWELL HOSPITAL DISTRICT	Medicaid Contract #	1026050

*Funds Earned	QUARTER 1			QUARTER 2			QUARTER 3			QUARTER 4			Adjustment Periods			Total
	Sep 2022	Oct 2022	Nov 2022	Dec 2022	Jan 2023	Feb 2023	Mar 2023	Apr 2023	May 2023	Jun 2023	Jul 2023	Aug 2023	Adj 1	Adj 2	Adj 3	
Component 1	\$ 23,729	\$ 26,623	\$ 29,166	\$ 27,215	\$ 26,538	\$ 27,156	\$ 28,137	\$ 26,677	\$ 27,274	\$ 28,350	\$ 27,231	\$ 27,380	\$ -	\$ -	\$ -	\$ 325,476
Component 2	\$ 6,144	\$ 6,893	\$ 7,551	\$ 7,046	\$ 6,871	\$ 7,031	\$ 7,285	\$ 6,907	\$ 7,061	\$ 7,340	\$ 7,050	\$ 7,089	\$ -	\$ -	\$ -	\$ 84,270
Component 3			\$ 23,162			\$ 31,192			\$ 31,843			\$ 32,211	\$ -	\$ -	\$ -	\$ 118,408
Component 4			\$ 28,943			\$ 29,449			\$ 29,878			\$ 30,196	\$ -	\$ -	\$ -	\$ 118,466
Qtr. Non-Dispersed Funds			\$ 21,782			\$ 24,962			\$ 17,890			\$ 35,638	\$ -	\$ -	\$ -	\$ 100,272
<b>QUARTER TOTALS</b>			\$ 173,993			\$ 187,461			\$ 182,952			\$ 202,486	\$ -	\$ -	\$ -	\$ 746,892

Payment Period	From Month	To Month	Estimated Scorecard Release
Quarter 1	Sep-22	Nov-22	Jan-23
Quarter 2	Dec-22	Feb-23	Apr-23
Quarter 3	Mar-23	May-23	Jul-23
Quarter 4	Jun-23	Aug-23	Oct-23
Adjustment Period 1	Sep-23	Dec-23	Jan-24
Adjustment Period 2	Jan-24	Aug-24	Sep-24
Adjustment Period 3	Sep-24	Jul-25	Aug-25

	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June	July	Aug	Total	Pay Tab	Variance
Comp 1	\$ (51.24)	\$ (51.50)	\$ (51.79)	\$ (51.59)	\$ (50.79)	\$ (51.99)	\$ (51.95)	\$ (51.74)	\$ (51.83)	\$ (50.93)	\$ (49.86)	\$ (45.44)	\$ (610.65)		
Comp 3	\$ 9.31	\$ 10.87	\$ 4.66	\$ 24.84	\$ 51.75	\$ 120.06	\$ 182.16	\$ 432.63	\$ 1,105.38	#####	\$ 10,321.02	\$ 9,406.08	\$ 32,211.27		
Comp 4	\$ 11.64	\$ 13.58	\$ 5.82	\$ 23.28	\$ 48.50	\$ 112.52	\$ 170.72	\$ 405.46	\$ 1,035.96	\$ 9,880.42	\$ 9,672.84	\$ 8,815.36	\$ 30,196.10		
Lapse	\$ 59.94	\$ 61.65	\$ 56.14	\$ 71.27	\$ 91.79	\$ 147.11	\$ 151.39	\$ 287.91	\$ 655.25	#####	\$ 11,766.96	\$ 10,723.84	\$ 36,092.73		
													\$ 97,889.45	\$ 97,889.45	\$ -

# Quality Incentive Payment Program - Year 6 (SFY23)

Quarter 4

June 2023 - August 2023

**\*\*Note: Enable Editing to use dropdowns\*\***

MCO:	All MCOs in Providers SDA	Facility Name:	SPRING BRANCH TRANSITIONAL CARE CENTER	SDA:	HARRIS
Facility ID:	5383	Legal Entity Name:	LIBERTY COUNTY HOSPITAL DISTRICT NO. 1	Medicaid Contract #	1033029

*Funds Earned	QUARTER 1			QUARTER 2			QUARTER 3			QUARTER 4			Adjustment Periods			Total
	Sep 2022	Oct 2022	Nov 2022	Dec 2022	Jan 2023	Feb 2023	Mar 2023	Apr 2023	May 2023	Jun 2023	Jul 2023	Aug 2023	Adj 1	Adj 2	Adj 3	Year to Date
Component 1	\$ 151,052	\$ 163,627	\$ 175,175	\$ 167,058	\$ 167,960	\$ 183,141	\$ 184,844	\$ 177,078	\$ 175,100	\$ 177,028	\$ 179,032	\$ 173,647	\$ -	\$ -	\$ -	\$ 2,074,741
Component 2	\$ 39,135	\$ 42,393	\$ 45,385	\$ 43,282	\$ 43,515	\$ 47,448	\$ 47,890	\$ 45,878	\$ 45,365	\$ 45,865	\$ 46,384	\$ 44,989	\$ -	\$ -	\$ -	\$ 537,528
Component 3			\$ 95,135			\$ 197,310			\$ 207,074			\$ 205,493	\$ -	\$ -	\$ -	\$ 705,011
Component 4			\$ 177,951			\$ 188,234			\$ 195,086			\$ 11,248	\$ -	\$ -	\$ -	\$ 572,517
Qtr. Non-Dispersed Funds			\$ 127,499			\$ 158,713			\$ 117,859			\$ 190,356	\$ -	\$ -	\$ -	\$ 594,426
<b>QUARTER TOTALS</b>			\$ 1,017,349			\$ 1,196,661			\$ 1,196,173			\$ 1,074,041	\$ -	\$ -	\$ -	\$ 4,484,224

Payment Period	From Month	To Month	Estimated Scorecard Release
Quarter 1	Sep-22	Nov-22	Jan-23
Quarter 2	Dec-22	Feb-23	Apr-23
Quarter 3	Mar-23	May-23	Jul-23
Quarter 4	Jun-23	Aug-23	Oct-23
Adjustment Period 1	Sep-23	Dec-23	Jan-24
Adjustment Period 2	Jan-24	Aug-24	Sep-24
Adjustment Period 3	Sep-24	Jul-25	Aug-25

	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June	July	Aug	Total	Pay Tab	Variance
Comp 1	\$ (275.84)	\$ (275.92)	\$ (277.56)	\$ (278.96)	\$ (277.84)	\$ (283.44)	\$ (282.88)	\$ (281.40)	\$ (282.72)	\$ (276.16)	\$ (271.56)	\$ (248.68)	\$ (3,312.96)		
Comp 3	\$ 72.97	\$ 111.90	\$ 72.97	\$ 184.87	\$ 379.47	\$ 622.72	\$ 1,011.92	\$ 2,111.41	\$ 7,200.20	#####	\$66,056.97	\$ 60,491.41	\$ 205,492.74		
Comp 4	\$ 67.69	\$ 140.55	\$ 67.26	\$ 103.35	\$ 285.83	\$ 512.18	\$ 876.72	\$ 1,906.52	\$ 6,670.72	\$ -	\$ -	\$ -	\$ 10,630.82		
Lapse	\$ 441.85	\$ 493.71	\$ 444.00	\$ 494.43	\$ 646.43	\$ 845.18	\$ 906.88	\$ 1,506.19	\$ 4,290.20	#####	\$62,526.69	\$ 57,258.57	\$ 193,439.97		
													\$ 406,250.57	\$406,250.57	\$ 0.00

# Quality Incentive Payment Program - Year 6 (SFY23)

Quarter 4

June 2023 - August 2023

**\*\*Note: Enable Editing to use dropdowns\*\***

<b>MCO:</b>	<b>All MCOs in Providers SDA</b>	<b>Facility Name:</b>	<b>THE VILLA AT TEXARKANA</b>	<b>SDA:</b>	<b>MRSA NORTHEAST</b>
<b>Facility ID:</b>	<b>5182</b>	<b>Legal Entity Name:</b>	<b>WINNIE-STOWELL HOSPITAL DISTRICT</b>	<b>Medicaid Contract #</b>	<b>1026860</b>

*Funds Earned	QUARTER 1			QUARTER 2			QUARTER 3			QUARTER 4			Adjustment Periods			Total
	Sep 2022	Oct 2022	Nov 2022	Dec 2022	Jan 2023	Feb 2023	Mar 2023	Apr 2023	May 2023	Jun 2023	Jul 2023	Aug 2023	Adj 1	Adj 2	Adj 3	Year to Date
Component 1	\$ 55,071	\$ 61,788	\$ 67,689	\$ 63,161	\$ 61,590	\$ 63,025	\$ 65,301	\$ 61,912	\$ 63,297	\$ 65,796	\$ 63,198	\$ 63,545	\$ -	\$ -	\$ -	\$ 755,374
Component 2	\$ 14,246	\$ 15,984	\$ 17,510	\$ 16,339	\$ 15,933	\$ 16,304	\$ 16,893	\$ 16,016	\$ 16,374	\$ 17,021	\$ 16,349	\$ 16,438	\$ -	\$ -	\$ -	\$ 195,408
Component 3	\$ 53,820			\$ 72,479			\$ 73,992			\$ 74,848			\$ -	\$ -	\$ -	\$ 275,140
Component 4	\$ 66,986			\$ 68,158			\$ 69,150			\$ 4,230			\$ -	\$ -	\$ -	\$ 208,525
Qtr. Non-Dispersed Funds	\$ 50,575			\$ 57,796			\$ 41,577			\$ 69,154			\$ -	\$ -	\$ -	\$ 219,102
<b>QUARTER TOTALS</b>	\$ 403,671			\$ 434,786			\$ 424,514			\$ 390,579			\$ -	\$ -	\$ -	\$ 1,653,550

Payment Period	From Month	To Month	Estimated Scorecard Release
Quarter 1	Sep-22	Nov-22	Jan-23
Quarter 2	Dec-22	Feb-23	Apr-23
Quarter 3	Mar-23	May-23	Jul-23
Quarter 4	Jun-23	Aug-23	Oct-23
Adjustment Period 1	Sep-23	Dec-23	Jan-24
Adjustment Period 2	Jan-24	Aug-24	Sep-24
Adjustment Period 3	Sep-24	Jul-25	Aug-25

	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June	July	Aug	Total	Pay Tab	Variance
<b>Comp 1</b>	\$ (102.48)	\$ (103.00)	\$ (103.58)	\$ (103.18)	\$ (101.58)	\$ (103.98)	\$ (103.90)	\$ (103.48)	\$ (103.66)	\$ (101.86)	\$ (99.72)	\$ (90.88)	\$ (1,221.30)		
<b>Comp 3</b>	\$ 21.64	\$ 25.25	\$ 10.82	\$ 57.72	\$ 120.25	\$ 278.98	\$ 423.28	\$ 1,005.29	\$ 2,568.54	\$ 24,497.33	\$ 23,982.66	\$ 21,856.64	\$ 74,848.41		
<b>Comp 4</b>	\$ (24.24)	\$ (20.00)	\$ (38.29)	\$ 2.41	\$ 61.71	\$ 209.01	\$ 344.05	\$ 888.76	\$ 2,351.17	\$ -	\$ -	\$ -	\$ 3,774.58		
<b>Lapse</b>	\$ 122.70	\$ 126.59	\$ 113.69	\$ 148.78	\$ 196.58	\$ 324.38	\$ 335.34	\$ 653.15	\$ 1,508.08	\$ 23,173.15	\$ 22,686.30	\$ 20,675.20	\$ 70,063.94		
													\$ 147,465.63	\$ 147,465.63	\$ -

The tables below display the funds earned as a result of meeting a metric. The \*total earned will increase or decrease as member months are adjusted through the program year.

COMPONENT 1 - NSGO - MONTHLY			
QAPI			
Description: Facility holds a QAPI meeting each month in accordance with quarterly federal requirements.			
Month	Met	Month	Met
Sep 2022	YES	Mar 2023	YES
Oct 2022	YES	Apr 2023	YES
Nov 2022	YES	May 2023	YES
Dec 2022	YES	Jun 2023	YES
Jan 2023	YES	Jul 2023	YES
Feb 2023	YES	Aug 2023	YES

Note: Component 1 is a Condition of Participation.

COMPONENT 2 - ALL FACILITIES - MONTHLY											
Metric 1: +4 Hours RN				Metric 2: +8 Hours RN				Metric 3: Workforce Development			
Description: Facility maintains four additional hours of registered nurse (RN) staffing coverage per day, beyond the CMS mandate.				Description: Facility maintains eight additional hours of registered nurse (RN) staffing coverage per day, beyond the CMS mandate.				Description: Facility has a staffing recruitment and retention program that includes a self-directed plan and monitoring outcomes.			
Month	Met	Month	Met	Month	Met	Month	Met	Month	Met	Month	Met
Sep 2022	YES	Mar 2023	YES	Sep 2022	YES	Mar 2023	YES	Sep 2022	YES	Mar 2023	YES
Oct 2022	YES	Apr 2023	YES	Oct 2022	YES	Apr 2023	YES	Oct 2022	YES	Apr 2023	YES
Nov 2022	YES	May 2023	YES	Nov 2022	YES	May 2023	YES	Nov 2022	YES	May 2023	YES
Dec 2022	YES	Jun 2023	YES	Dec 2022	YES	Jun 2023	YES	Dec 2022	YES	Jun 2023	YES
Jan 2023	YES	Jul 2023	YES	Jan 2023	YES	Jul 2023	YES	Jan 2023	YES	Jul 2023	YES
Feb 2023	YES	Aug 2023	YES	Feb 2023	YES	Aug 2023	YES	Feb 2023	YES	Aug 2023	YES

Note: Component 2 Metric 3 is a Condition of Participation.

Conditions of Participation
Component 1 and Component 2 Metric 3
'YES'/'NO' results indicate only whether a payment is being directed to the NF. Such monthly payments are uniform rate increases and do not reflect HHSC's final determination of whether conditions of participation have been met in that reporting period.
A NF that fails to meet all required conditions of participation will be removed from the program retroactive to the first day of the program period. HHSC will redistribute revenue paid to facilities removed from the program to the remaining facilities participating in the program period. Facilities that meet the conditions of participation will remain enrolled in the program period. For a full list of the required conditions of participation, including conditions not discussed here, please refer to 1 TAC 353.1302(e).

COMPONENT 3 - ALL FACILITIES - QUARTERLY																				
Payment Period	Metric 1: Pressure Ulcers (CMS N015.03)					Metric 2: Antipsychotics (CMS N031.03)					Metric 3: Mobility (CMS N035.03)					Metric 4: UTI (CMS N024.02)				
	Target	Num	Dem	Actual	Met	Target	Num	Dem	Actual	Met	Target	Num	Dem	Actual	Met	Target	Num	Dem	Actual	Met
Qtr. 1	4.34	3.00	57.00	5.26	NO	8.61	5.00	69.00	7.25	YES	13.80	3.00	43.00	6.98	YES	0.16	0.00	75.00	0.00	YES
Qtr. 2	4.34	2.00	59.00	3.39	YES	8.61	4.00	69.00	5.80	YES	13.80	4.00	45.00	8.89	YES	0.16	0.00	80.00	0.00	YES
Qtr. 3	4.34	1.00	51.00	1.96	YES	8.61	5.00	67.00	7.46	YES	13.80	1.00	51.00	1.96	YES	0.16	0.00	58.00	0.00	YES
Qtr. 4	4.34	1.00	50.00	2.00	YES	8.61	3.00	69.00	4.35	YES	13.80	3.00	51.00	99.69	YES	0.16	0.00	81.00	92.71	YES

Note: For Metric target fields showing "Min Data" or "Withheld", please contact the QIPP mailbox at QIPP@hhsc.state.tx.us to receive your facilities complete metric results. The metric value was redacted due to HIPAA compliance or not meeting the minimum data requirement to calculate a value.

**COMPONENT 4 - NSGO - QUARTERLY**

Payment Period	Metric 1: Pneumococcal Vaccine (CMS N020.02)					Metric 2: Influenza Vaccine (CMS N016.03)				
	Target	Num	Dem	Actual	Met	Target	Num	Dem	Actual	Met
Qtr. 1	N/A	N/A	N/A	N/A	YES	N/A	N/A	N/A	N/A	YES
Qtr. 2	N/A	N/A	N/A	N/A	YES	N/A	N/A	N/A	N/A	YES
Qtr. 3	N/A	N/A	N/A	N/A	YES	N/A	N/A	N/A	N/A	YES
Qtr. 4	96.53%	NA	NA	99.689%	NO	95.43%	NA	NA	92.708%	NO

**COMPONENT 4 - NSGO - QUARTERLY**

Month	Comp 1	Comp 2	Month	Comp 1	Comp 2	Month	Comp 1	Comp 2	Payment Period	Comp 3 (Adjusted for min-data)	Comp 4	Non-Dispersed Funds
Sep 2022	\$ 12.37	\$ 1.07	Jan 2023	\$ 12.37	\$ 1.07	May 2023	\$ 12.37	\$ 1.07	Qtr. 1	\$ 3.61	\$ 4.49	\$ 3.39
Oct 2022	\$ 12.37	\$ 1.07	Feb 2023	\$ 12.37	\$ 1.07	Jun 2023	\$ 12.37	\$ 1.07	Qtr. 2	\$ 4.81	\$ 4.49	\$ 3.82
Nov 2022	\$ 12.37	\$ 1.07	Mar 2023	\$ 12.37	\$ 1.07	Jul 2023	\$ 12.37	\$ 1.07	Qtr. 3	\$ 4.81	\$ 4.49	\$ 2.65
Dec 2022	\$ 12.37	\$ 1.07	Apr 2023	\$ 12.37	\$ 1.07	Aug 2023	\$ 12.37	\$ 1.07	Qtr. 4	\$ 4.81	\$ -	\$ 4.55

Member Months	Quarter 1			Quarter 2			Quarter 3			Quarter 4			Adjustment Period 1				Adjustment Period 2					Adj 3	Total		
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22		23	24
Sep 2022	4,452	414	194	20	13	13	7	2	3	5	-	1	-	-	-	-	-	-	-	-	-	-	-	-	5,124
Oct 2022	4,581	442	60	28	10	16	1	5	5	-	2	-	-	-	-	-	-	-	-	-	-	-	-	-	5,150
Nov 2022	4,836	210	62	30	24	10	4	4	1	(2)	-	-	-	-	-	-	-	-	-	-	-	-	-	-	5,179
Dec 2022	4,816	221	62	32	13	3	9	4	(1)	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	5,159
Jan 2023	4,655	288	90	27	(6)	9	7	9	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	5,079
Feb 2023	4,692	320	101	28	31	11	16	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	5,199
Mar 2023	4,790	224	93	49	24	15	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	5,195
Apr 2023	4,627	338	142	49	18	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	5,174
May 2023	4,649	417	74	43	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	5,183
Jun 2023	4,648	311	134	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	5,093
Jul 2023	4,628	358	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4,986
Aug 2023	4,544	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4,544

Member Month Count Instructions: Each quarter the scorecard will be updated with metric performance and achieved payment factor amounts. The scorecard will also calculate the payment associated with the current quarter and adjustments made to past quarters in the current quarter. The table Member Month Count reflects the actual member month case load for the selected MCO in that provider's service delivery area (SDA).



# Quality Incentive Payment Program - Year 6 (SFY23)

Quarter 4

June 2023 - August 2023

**\*\*Note: Enable Editing to use dropdowns\*\***

MCO:	All MCOs in Providers SDA	Facility Name:	OAK MANOR NURSING CENTER	SDA:	TRAVIS
Facility ID:	5166	Legal Entity Name:	WINNIESTOWELL HOSPITAL DISTRICT	Medicaid Contract #	1026152

*Funds Earned	QUARTER 1			QUARTER 2			QUARTER 3			QUARTER 4			Adjustment Periods			Total
	Sep 2022	Oct 2022	Nov 2022	Dec 2022	Jan 2023	Feb 2023	Mar 2023	Apr 2023	May 2023	Jun 2023	Jul 2023	Aug 2023	Adj 1	Adj 2	Adj 3	Year to Date
Component 1	\$ 20,829	\$ 24,147	\$ 26,288	\$ 25,171	\$ 24,324	\$ 24,432	\$ 25,187	\$ 24,956	\$ 23,824	\$ 25,064	\$ 25,064	\$ 23,531	\$ -	\$ -	\$ -	\$ 292,816
Component 2	\$ 5,383	\$ 6,241	\$ 6,794	\$ 6,505	\$ 6,286	\$ 6,314	\$ 6,509	\$ 6,450	\$ 6,157	\$ 6,477	\$ 6,477	\$ 6,081	\$ -	\$ -	\$ -	\$ 75,676
Component 3							\$ 6,935			\$ 20,961		\$ 28,228	\$ -	\$ -	\$ -	\$ 56,123
Component 4				\$ 25,914			\$ 907			\$ 25,906		\$ 26,712	\$ -	\$ -	\$ -	\$ 79,439
Qtr. Non-Dispersed Funds				\$ 16,566			\$ 15,609			\$ 14,920		\$ 31,604	\$ -	\$ -	\$ -	\$ 78,699
<b>QUARTER TOTALS</b>				\$ 132,161			\$ 116,484			\$ 154,868		\$ 179,239	\$ -	\$ -	\$ -	\$ 582,752

Payment Period	From Month	To Month	Estimated Scorecard Release
Quarter 1	Sep-22	Nov-22	Jan-23
Quarter 2	Dec-22	Feb-23	Apr-23
Quarter 3	Mar-23	May-23	Jul-23
Quarter 4	Jun-23	Aug-23	Oct-23
Adjustment Period 1	Sep-23	Dec-23	Jan-24
Adjustment Period 2	Jan-24	Aug-24	Sep-24
Adjustment Period 3	Sep-24	Jul-25	Aug-25

	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June	July	Aug	Total	Pay Tab	Variance
Comp 1	\$ (31.78)	\$ (32.03)	\$ (32.21)	\$ (32.28)	\$ (32.09)	\$ (32.20)	\$ (32.13)	\$ (32.09)	\$ (32.30)	\$ (31.77)	\$ (31.10)	\$ (28.30)	\$ (380.28)		
Comp 3	\$ -	\$ -	\$ -	\$ 1.50	\$ 8.22	\$ 9.72	\$ 49.34	\$ 228.74	\$ 670.51	\$ 9,499.23	\$ 9,298.90	\$ 8,461.70	\$ 28,227.84		
Comp 4	\$ (11.20)	\$ -	\$ 11.20	\$ -	\$ -	\$ -	\$ 61.60	\$ 285.60	\$ 837.20	\$ 8,895.60	\$ 8,708.00	\$ 7,924.00	\$ 26,712.00		
Lapse	\$ 24.66	\$ 32.03	\$ 39.33	\$ 35.50	\$ 49.80	\$ 53.13	\$ 66.01	\$ 189.17	\$ 492.76	#####	\$10,542.90	\$ 9,593.70	\$ 31,889.02	\$ 86,448.58	\$ (0.00)

# Quality Incentive Payment Program - Year 6 (SFY23)

Quarter 4

June 2023 - August 2023

**\*\*Note: Enable Editing to use dropdowns\*\***

MCO:	All MCOs in Providers SDA	Facility Name:	OAKLAND MANOR NURSING CENTER	SDA:	TRAVIS
Facility ID:	5307	Legal Entity Name:	WINNIESTOWELL HOSPITAL DISTRICT	Medicaid Contract #	1026104

*Funds Earned	QUARTER 1			QUARTER 2			QUARTER 3			QUARTER 4			Adjustment Periods			Total
	Sep 2022	Oct 2022	Nov 2022	Dec 2022	Jan 2023	Feb 2023	Mar 2023	Apr 2023	May 2023	Jun 2023	Jul 2023	Aug 2023	Adj 1	Adj 2	Adj 3	Year to Date
Component 1	\$ 27,239	\$ 31,580	\$ 34,379	\$ 32,919	\$ 31,811	\$ 31,952	\$ 32,939	\$ 32,637	\$ 31,157	\$ 32,778	\$ 32,778	\$ 30,774	\$ -	\$ -	\$ -	\$ 382,942
Component 2	\$ 7,060	\$ 8,185	\$ 8,911	\$ 8,532	\$ 8,245	\$ 8,282	\$ 8,537	\$ 8,459	\$ 8,075	\$ 8,496	\$ 8,496	\$ 7,976	\$ -	\$ -	\$ -	\$ 99,253
Component 3			\$ 18,094			\$ 18,770			\$ 36,822			\$ 37,352	\$ -	\$ -	\$ -	\$ 111,038
Component 4			\$ 33,873			\$ 35,140			\$ 35,158			\$ 35,012	\$ -	\$ -	\$ -	\$ 139,182
Qtr. Non-Dispersed Funds			\$ 24,248			\$ 27,010			\$ 20,901			\$ 41,553	\$ -	\$ -	\$ -	\$ 113,712
<b>QUARTER TOTALS</b>			\$ 193,568			\$ 202,660			\$ 214,685			\$ 235,214	\$ -	\$ -	\$ -	\$ 846,128

Payment Period	From Month	To Month	Estimated Scorecard Release
Quarter 1	Sep-22	Nov-22	Jan-23
Quarter 2	Dec-22	Feb-23	Apr-23
Quarter 3	Mar-23	May-23	Jul-23
Quarter 4	Jun-23	Aug-23	Oct-23
Adjustment Period 1	Sep-23	Dec-23	Jan-24
Adjustment Period 2	Jan-24	Aug-24	Sep-24
Adjustment Period 3	Sep-24	Jul-25	Aug-25

	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June	July	Aug	Total	Pay Tab	Variance
Comp 1	\$ (31.78)	\$ (32.03)	\$ (32.21)	\$ (32.28)	\$ (32.09)	\$ (32.20)	\$ (32.13)	\$ (32.09)	\$ (32.30)	\$ (31.77)	\$ (31.10)	\$ (28.30)	\$ (380.28)		
Comp 3	\$ (7.82)	\$ -	\$ 7.82	\$ 3.91	\$ 21.51	\$ 25.42	\$ 86.02	\$ 398.82	\$ 1,169.09	#####	\$12,160.10	\$ 11,065.30	\$ 37,352.23		
Comp 4	\$ (14.64)	\$ -	\$ 14.64	\$ 7.32	\$ 40.26	\$ 47.58	\$ 80.52	\$ 373.32	\$ 1,094.34	#####	\$11,382.60	\$ 10,357.80	\$ 35,011.56		
Lapse	\$ 53.16	\$ 64.06	\$ 74.82	\$ 102.42	\$ 126.96	\$ 132.87	\$ 111.12	\$ 281.44	\$ 701.47	#####	\$13,839.50	\$ 12,593.50	\$ 42,218.97		
													\$ 114,202.48	\$114,202.49	\$ 0.01

# Quality Incentive Payment Program - Year 6 (SFY23)

Quarter 4

June 2023 - August 2023

**\*\*Note: Enable Editing to use dropdowns\*\***

MCO:	All MCOs in Providers SDA	Facility Name:	PARK MANOR OF CONROE	SDA:	HARRIS
Facility ID:	100790	Legal Entity Name:	WINNIESTOWELL HOSPITAL DISTRICT	Medicaid Contract #	1028728

*Funds Earned	QUARTER 1			QUARTER 2			QUARTER 3			QUARTER 4			Adjustment Periods			Total
	Sep 2022	Oct 2022	Nov 2022	Dec 2022	Jan 2023	Feb 2023	Mar 2023	Apr 2023	May 2023	Jun 2023	Jul 2023	Aug 2023	Adj 1	Adj 2	Adj 3	Year to Date
Component 1	\$ 66,089	\$ 71,591	\$ 76,643	\$ 73,092	\$ 73,487	\$ 80,129	\$ 80,874	\$ 77,476	\$ 76,610	\$ 77,454	\$ 78,331	\$ 75,975	\$ -	\$ -	\$ -	\$ 907,751
Component 2	\$ 17,125	\$ 18,551	\$ 19,860	\$ 18,940	\$ 19,042	\$ 20,763	\$ 20,956	\$ 20,076	\$ 19,852	\$ 20,070	\$ 20,297	\$ 19,687	\$ -	\$ -	\$ -	\$ 235,220
Component 3			\$ 83,304				\$ 66,954			\$ 90,248			\$ 89,952	\$ -	\$ -	\$ 330,459
Component 4				\$ 77,829				\$ 3,236		\$ 81,295			\$ 4,434	\$ -	\$ -	\$ 166,794
Qtr. Non-Dispersed Funds				\$ 61,794				\$ 55,230		\$ 50,533			\$ 83,001	\$ -	\$ -	\$ 250,558
<b>QUARTER TOTALS</b>			\$ 492,786			\$ 410,873		\$ 410,873		\$ 517,921		\$ 469,202	\$ -	\$ -	\$ -	\$ 1,890,782

Payment Period	From Month	To Month	Estimated Scorecard Release
Quarter 1	Sep-22	Nov-22	Jan-23
Quarter 2	Dec-22	Feb-23	Apr-23
Quarter 3	Mar-23	May-23	Jul-23
Quarter 4	Jun-23	Aug-23	Oct-23
Adjustment Period 1	Sep-23	Dec-23	Jan-24
Adjustment Period 2	Jan-24	Aug-24	Sep-24
Adjustment Period 3	Sep-24	Jul-25	Aug-25

	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June	July	Aug	Total	Pay Tab	Variance
Comp 1	\$ (137.92)	\$ (137.96)	\$ (138.78)	\$ (139.48)	\$ (138.92)	\$ (141.72)	\$ (141.44)	\$ (140.70)	\$ (141.36)	\$ (138.08)	\$ (135.78)	\$ (124.34)	\$ (1,656.48)		
Comp 3	\$ 63.90	\$ 97.98	\$ 63.90	\$ 60.70	\$ 124.61	\$ 204.48	\$ 443.04	\$ 924.42	\$ 3,152.40	#####	\$ 28,921.14	\$ 26,484.42	\$ 89,952.03		
Comp 4	\$ (9.11)	\$ 22.79	\$ (9.54)	\$ -	\$ -	\$ -	\$ 344.24	\$ 795.48	\$ 2,881.92	\$ -	\$ -	\$ -	\$ 4,025.78		
Lapse	\$ 253.83	\$ 278.93	\$ 255.12	\$ 189.45	\$ 241.49	\$ 310.04	\$ 381.68	\$ 641.97	\$ 1,850.76	#####	\$ 27,291.78	\$ 24,992.34	\$ 84,441.47		
													\$ 176,762.80	\$ 176,762.81	\$ 0.01

# Quality Incentive Payment Program - Year 6 (SFY23)

Quarter 4

June 2023 - August 2023

**\*\*Note: Enable Editing to use dropdowns\*\***

MCO:	All MCOs in Providers SDA	Facility Name:	PARK MANOR OF CYFAIR	SDA:	HARRIS
Facility ID:	4456	Legal Entity Name:	WINNIESTOWELL HOSPITAL DISTRICT	Medicaid Contract #	1028677

*Funds Earned	QUARTER 1			QUARTER 2			QUARTER 3			QUARTER 4			Adjustment Periods			Total
	Sep 2022	Oct 2022	Nov 2022	Dec 2022	Jan 2023	Feb 2023	Mar 2023	Apr 2023	May 2023	Jun 2023	Jul 2023	Aug 2023	Adj 1	Adj 2	Adj 3	
Component 1	\$ 60,179	\$ 65,189	\$ 69,790	\$ 66,557	\$ 66,916	\$ 72,964	\$ 73,642	\$ 70,549	\$ 69,760	\$ 70,529	\$ 71,327	\$ 69,181	\$ -	\$ -	\$ -	\$ 826,584
Component 2	\$ 15,618	\$ 16,918	\$ 18,112	\$ 17,273	\$ 17,366	\$ 18,935	\$ 19,112	\$ 18,309	\$ 18,104	\$ 18,304	\$ 18,511	\$ 17,954	\$ -	\$ -	\$ -	\$ 214,514
Component 3			\$ 56,905			\$ 79,469			\$ 82,877			\$ 62,682	\$ -	\$ -	\$ -	\$ 281,933
Component 4			\$ 70,789			\$ 2,943			\$ 73,942			\$ 76,107	\$ -	\$ -	\$ -	\$ 223,781
Qtr. Non-Dispersed Funds			\$ 53,581			\$ 52,901			\$ 46,077			\$ 86,527	\$ -	\$ -	\$ -	\$ 239,086
<b>QUARTER TOTALS</b>			\$ 427,081			\$ 395,324			\$ 472,372			\$ 491,121	\$ -	\$ -	\$ -	\$ 1,785,898

Payment Period	From Month	To Month	Estimated Scorecard Release
Quarter 1	Sep-22	Nov-22	Jan-23
Quarter 2	Dec-22	Feb-23	Apr-23
Quarter 3	Mar-23	May-23	Jul-23
Quarter 4	Jun-23	Aug-23	Oct-23
Adjustment Period 1	Sep-23	Dec-23	Jan-24
Adjustment Period 2	Jan-24	Aug-24	Sep-24
Adjustment Period 3	Sep-24	Jul-25	Aug-25

	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June	July	Aug	Total	Pay Tab	Variance
Comp 1	\$ (137.92)	\$ (137.96)	\$ (138.78)	\$ (139.48)	\$ (138.92)	\$ (141.72)	\$ (141.44)	\$ (140.70)	\$ (141.36)	\$ (138.08)	\$ (135.78)	\$ (124.34)	\$ (1,656.48)		
Comp 3	\$ 43.65	\$ 66.93	\$ 43.65	\$ 73.72	\$ 151.32	\$ 248.32	\$ 403.52	\$ 841.96	\$ 2,871.20	#####	\$19,755.99	\$ 18,091.47	\$ 62,682.37		
Comp 4	\$ (14.51)	\$ 14.51	\$ (14.94)	\$ -	\$ -	\$ -	\$ 306.80	\$ 717.36	\$ 2,615.52	#####	\$24,576.18	\$ 22,505.54	\$ 75,698.94		
Lapse	\$ 178.72	\$ 200.52	\$ 179.58	\$ 187.55	\$ 237.59	\$ 303.64	\$ 290.16	\$ 528.22	\$ 1,632.08	#####	\$28,581.69	\$ 26,173.57	\$ 87,559.16		
													\$ 224,283.99	\$224,283.99	\$ -

# Quality Incentive Payment Program - Year 6 (SFY23)

Quarter 4

June 2023 - August 2023

**\*\*Note: Enable Editing to use dropdowns\*\***

MCO:	All MCOs in Providers SDA	Facility Name:	PARK MANOR OF CYPRESS STATION	SDA:	HARRIS
Facility ID:	101489	Legal Entity Name:	WINNIESTOWELL HOSPITAL DISTRICT	Medicaid Contract #	1028688

*Funds Earned	QUARTER 1			QUARTER 2			QUARTER 3			QUARTER 4			Adjustment Periods			Total
	Sep 2022	Oct 2022	Nov 2022	Dec 2022	Jan 2023	Feb 2023	Mar 2023	Apr 2023	May 2023	Jun 2023	Jul 2023	Aug 2023	Adj 1	Adj 2	Adj 3	
Component 1	\$ 58,672	\$ 63,556	\$ 68,042	\$ 64,889	\$ 65,240	\$ 71,136	\$ 71,798	\$ 68,781	\$ 68,013	\$ 68,762	\$ 69,540	\$ 67,448	\$ -	\$ -	\$ -	\$ 805,878
Component 2	\$ 15,196	\$ 16,461	\$ 17,622	\$ 16,806	\$ 16,897	\$ 18,424	\$ 18,595	\$ 17,814	\$ 17,615	\$ 17,809	\$ 18,010	\$ 17,469	\$ -	\$ -	\$ -	\$ 208,716
Component 3			\$ 55,438			\$ 77,421			\$ 80,741			\$ 79,882	\$ -	\$ -	\$ -	\$ 293,482
Component 4			\$ 69,225			\$ 2,878			\$ 72,308			\$ 74,425	\$ -	\$ -	\$ -	\$ 218,836
Qtr. Non-Dispersed Funds			\$ 52,212			\$ 51,453			\$ 44,979			\$ 88,452	\$ -	\$ -	\$ -	\$ 237,096
<b>QUARTER TOTALS</b>			\$ 416,424			\$ 385,144			\$ 460,643			\$ 501,798	\$ -	\$ -	\$ -	\$ 1,764,008

Payment Period	From Month	To Month	Estimated Scorecard Release
Quarter 1	Sep-22	Nov-22	Jan-23
Quarter 2	Dec-22	Feb-23	Apr-23
Quarter 3	Mar-23	May-23	Jul-23
Quarter 4	Jun-23	Aug-23	Oct-23
Adjustment Period 1	Sep-23	Dec-23	Jan-24
Adjustment Period 2	Jan-24	Aug-24	Sep-24
Adjustment Period 3	Sep-24	Jul-25	Aug-25

	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June	July	Aug	Total	Pay Tab	Variance
Comp 1	\$ (137.92)	\$ (137.96)	\$ (138.78)	\$ (139.48)	\$ (138.92)	\$ (141.72)	\$ (141.44)	\$ (140.70)	\$ (141.36)	\$ (138.08)	\$ (135.78)	\$ (124.34)	\$ (1,656.48)		
Comp 3	\$ 42.53	\$ 65.20	\$ 42.52	\$ 71.82	\$ 147.42	\$ 241.92	\$ 393.12	\$ 820.26	\$ 2,797.20	#####	\$ 25,662.42	\$ 23,500.26	\$ 79,881.80		
Comp 4	\$ 53.10	\$ 81.42	\$ 53.10	\$ -	\$ -	\$ -	\$ 368.16	\$ 768.18	\$ 2,619.60	#####	\$ 24,033.06	\$ 22,008.18	\$ 74,424.96		
Lapse	\$ 177.67	\$ 198.91	\$ 178.53	\$ 116.67	\$ 165.79	\$ 228.94	\$ 354.64	\$ 585.55	\$ 1,658.36	#####	\$ 29,260.59	\$ 26,795.27	\$ 89,477.16		
													\$ 242,127.44	\$ 242,127.44	\$ 0.01

# Quality Incentive Payment Program - Year 6 (SFY23)

Quarter 4

June 2023 - August 2023

**\*\*Note: Enable Editing to use dropdowns\*\***

MCO:	All MCOs in Providers SDA	Facility Name:	PARK MANOR OF HUMBLE	SDA:	HARRIS
Facility ID:	101633	Legal Entity Name:	WINNIESTOWELL HOSPITAL DISTRICT	Medicaid Contract #	1028690

*Funds Earned	QUARTER 1			QUARTER 2			QUARTER 3			QUARTER 4			Adjustment Periods			Total
	Sep 2022	Oct 2022	Nov 2022	Dec 2022	Jan 2023	Feb 2023	Mar 2023	Apr 2023	May 2023	Jun 2023	Jul 2023	Aug 2023	Adj 1	Adj 2	Adj 3	Year to Date
Component 1	\$ 48,542	\$ 52,583	\$ 56,294	\$ 53,685	\$ 53,975	\$ 58,854	\$ 59,401	\$ 56,905	\$ 56,270	\$ 56,889	\$ 57,533	\$ 55,803	\$ -	\$ -	\$ -	\$ 666,733
Component 2	\$ 12,603	\$ 13,652	\$ 14,615	\$ 13,938	\$ 14,013	\$ 15,280	\$ 15,422	\$ 14,774	\$ 14,609	\$ 14,770	\$ 14,937	\$ 14,488	\$ -	\$ -	\$ -	\$ 173,102
Component 3			\$ 61,207			\$ 49,194			\$ 50,570			\$ 65,261	\$ -	\$ -	\$ -	\$ 226,232
Component 4			\$ 57,101			\$ 2,374			\$ 59,644			\$ 61,390	\$ -	\$ -	\$ -	\$ 180,509
Qtr. Non-Dispersed Funds			\$ 45,368			\$ 40,438			\$ 35,473			\$ 72,770	\$ -	\$ -	\$ -	\$ 194,048
<b>QUARTER TOTALS</b>			\$ 361,963			\$ 301,752			\$ 363,068			\$ 413,841	\$ -	\$ -	\$ -	\$ 1,440,624

Payment Period	From Month	To Month	Estimated Scorecard Release
Quarter 1	Sep-22	Nov-22	Jan-23
Quarter 2	Dec-22	Feb-23	Apr-23
Quarter 3	Mar-23	May-23	Jul-23
Quarter 4	Jun-23	Aug-23	Oct-23
Adjustment Period 1	Sep-23	Dec-23	Jan-24
Adjustment Period 2	Jan-24	Aug-24	Sep-24
Adjustment Period 3	Sep-24	Jul-25	Aug-25

	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June	July	Aug	Total	Pay Tab	Variance
Comp 1	\$ (68.96)	\$ (68.98)	\$ (69.39)	\$ (69.74)	\$ (69.46)	\$ (70.86)	\$ (70.72)	\$ (70.35)	\$ (70.68)	\$ (69.04)	\$ (67.89)	\$ (62.17)	\$ (828.24)		
Comp 3	\$ 46.95	\$ 71.99	\$ 46.95	\$ 44.60	\$ 91.55	\$ 150.24	\$ 244.14	\$ 509.41	\$ 1,737.15	#####	\$21,249.57	\$ 19,459.21	\$ 65,261.28		
Comp 4	\$ (25.01)	\$ (1.59)	\$ (25.44)	\$ -	\$ -	\$ -	\$ 234.00	\$ 565.46	\$ 2,097.52	#####	\$19,823.88	\$ 18,153.64	\$ 60,982.14		
Lapse	\$ 172.42	\$ 190.86	\$ 173.28	\$ 106.41	\$ 144.73	\$ 194.38	\$ 239.20	\$ 421.89	\$ 1,269.48	#####	\$24,100.95	\$ 22,070.35	\$ 73,593.15		
													\$ 199,008.33	\$199,008.34	\$ 0.01

# Quality Incentive Payment Program - Year 6 (SFY23)

Quarter 4

June 2023 - August 2023

**\*\*Note: Enable Editing to use dropdowns\*\***

MCO:	All MCOs in Providers SDA	Facility Name:	PARK MANOR OF QUAIL VALLEY	SDA:	HARRIS
Facility ID:	102417	Legal Entity Name:	WINNIESTOWELL HOSPITAL DISTRICT	Medicaid Contract #	1028606

*Funds Earned	QUARTER 1			QUARTER 2			QUARTER 3			QUARTER 4			Adjustment Periods			Total
	Sep 2022	Oct 2022	Nov 2022	Dec 2022	Jan 2023	Feb 2023	Mar 2023	Apr 2023	May 2023	Jun 2023	Jul 2023	Aug 2023	Adj 1	Adj 2	Adj 3	
Component 1	\$ 53,607	\$ 58,069	\$ 62,168	\$ 59,287	\$ 59,607	\$ 64,995	\$ 65,599	\$ 62,843	\$ 62,141	\$ 62,826	\$ 63,537	\$ 61,625	\$ -	\$ -	\$ -	\$ 736,305
Component 2	\$ 13,869	\$ 15,024	\$ 16,084	\$ 15,339	\$ 15,422	\$ 16,815	\$ 16,972	\$ 16,259	\$ 16,077	\$ 16,254	\$ 16,438	\$ 15,944	\$ -	\$ -	\$ -	\$ 190,495
Component 3			\$ 67,465			\$ 71,363			\$ 73,961			\$ 72,954	\$ -	\$ -	\$ -	\$ 285,743
Component 4			\$ 63,163			\$ 2,626			\$ 65,976			\$ 3,598	\$ -	\$ -	\$ -	\$ 135,363
Qtr. Non-Dispersed Funds			\$ 50,061			\$ 47,191			\$ 41,111			\$ 67,325	\$ -	\$ -	\$ -	\$ 205,687
<b>QUARTER TOTALS</b>			\$ 399,509			\$ 352,645			\$ 420,940			\$ 380,500	\$ -	\$ -	\$ -	\$ 1,553,594

Payment Period	From Month	To Month	Estimated Scorecard Release
Quarter 1	Sep-22	Nov-22	Jan-23
Quarter 2	Dec-22	Feb-23	Apr-23
Quarter 3	Mar-23	May-23	Jul-23
Quarter 4	Jun-23	Aug-23	Oct-23
Adjustment Period 1	Sep-23	Dec-23	Jan-24
Adjustment Period 2	Jan-24	Aug-24	Sep-24
Adjustment Period 3	Sep-24	Jul-25	Aug-25

	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June	July	Aug	Total	Pay Tab	Variance
Comp 1	\$ (68.96)	\$ (68.98)	\$ (69.39)	\$ (69.74)	\$ (69.46)	\$ (70.86)	\$ (70.72)	\$ (70.35)	\$ (70.68)	\$ (69.04)	\$ (67.89)	\$ (62.17)	\$ (828.24)		
Comp 3	\$ 51.75	\$ 79.35	\$ 51.75	\$ 65.55	\$ 134.55	\$ 220.80	\$ 358.80	\$ 748.65	\$ 2,553.00	#####	\$23,422.05	\$ 21,448.65	\$ 72,953.70		
Comp 4	\$ 48.45	\$ 74.29	\$ 48.45	\$ -	\$ -	\$ -	\$ 335.92	\$ 700.91	\$ 2,390.20	\$ -	\$ -	\$ -	\$ 3,598.22		
Lapse	\$ 176.02	\$ 196.38	\$ 176.88	\$ 112.68	\$ 157.60	\$ 215.50	\$ 335.92	\$ 546.49	\$ 1,525.16	#####	\$22,132.14	\$ 20,267.42	\$ 68,349.23		
													\$ 144,072.91	\$144,072.91	\$ -

# Quality Incentive Payment Program - Year 6 (SFY23)

Quarter 4

June 2023 - August 2023

**\*\*Note: Enable Editing to use dropdowns\*\***

MCO:	All MCOs in Providers SDA	Facility Name:	PARK MANOR OF WESTCHASE	SDA:	HARRIS
Facility ID:	102294	Legal Entity Name:	WINNIESTOWELL HOSPITAL DISTRICT	Medicaid Contract #	1028706

*Funds Earned	QUARTER 1			QUARTER 2			QUARTER 3			QUARTER 4			Adjustment Periods			Total
	Sep 2022	Oct 2022	Nov 2022	Dec 2022	Jan 2023	Feb 2023	Mar 2023	Apr 2023	May 2023	Jun 2023	Jul 2023	Aug 2023	Adj 1	Adj 2	Adj 3	Year to Date
Component 1	\$ 71,214	\$ 77,143	\$ 82,587	\$ 78,761	\$ 79,186	\$ 86,343	\$ 87,146	\$ 83,485	\$ 82,552	\$ 83,461	\$ 84,406	\$ 81,867	\$ -	\$ -	\$ -	\$ 978,151
Component 2	\$ 18,452	\$ 19,988	\$ 21,399	\$ 20,407	\$ 20,517	\$ 22,372	\$ 22,580	\$ 21,631	\$ 21,389	\$ 21,625	\$ 21,870	\$ 21,212	\$ -	\$ -	\$ -	\$ 253,441
Component 3			\$ 89,757			\$ 72,141			\$ 97,239			\$ 74,073	\$ -	\$ -	\$ -	\$ 333,211
Component 4			\$ 83,891			\$ 3,488			\$ 87,628			\$ 90,193	\$ -	\$ -	\$ -	\$ 265,199
Qtr. Non-Dispersed Funds			\$ 66,487			\$ 59,399			\$ 54,431			\$ 102,542	\$ -	\$ -	\$ -	\$ 282,859
<b>QUARTER TOTALS</b>			\$ 530,918			\$ 442,614			\$ 558,081			\$ 581,249	\$ -	\$ -	\$ -	\$ 2,112,863

Payment Period	From Month	To Month	Estimated Scorecard Release
Quarter 1	Sep-22	Nov-22	Jan-23
Quarter 2	Dec-22	Feb-23	Apr-23
Quarter 3	Mar-23	May-23	Jul-23
Quarter 4	Jun-23	Aug-23	Oct-23
Adjustment Period 1	Sep-23	Dec-23	Jan-24
Adjustment Period 2	Jan-24	Aug-24	Sep-24
Adjustment Period 3	Sep-24	Jul-25	Aug-25

	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June	July	Aug	Total	Pay Tab	Variance
Comp 1	\$ (137.92)	\$ (137.96)	\$ (138.78)	\$ (139.48)	\$ (138.92)	\$ (141.72)	\$ (141.44)	\$ (140.70)	\$ (141.36)	\$ (138.08)	\$ (135.78)	\$ (124.34)	\$ (1,656.48)		
Comp 3	\$ 68.85	\$ 105.57	\$ 68.85	\$ 65.41	\$ 134.26	\$ 220.32	\$ 477.36	\$ 996.03	\$ 3,396.60	#####	\$ 23,371.13	\$ 21,402.02	\$ 74,073.42		
Comp 4	\$ (4.46)	\$ 29.92	\$ (4.89)	\$ -	\$ -	\$ -	\$ 376.48	\$ 862.75	\$ 3,111.32	#####	\$ 29,124.81	\$ 26,670.93	\$ 89,785.02		
Lapse	\$ 188.62	\$ 215.70	\$ 189.48	\$ 193.25	\$ 249.29	\$ 322.84	\$ 400.40	\$ 681.03	\$ 1,983.96	#####	\$ 33,877.11	\$ 31,022.83	\$ 103,775.47		
													\$ 265,977.43	\$ 265,977.43	\$ -



# Quality Incentive Payment Program - Year 6 (SFY23)

Quarter 4

June 2023 - August 2023

**\*\*Note: Enable Editing to use dropdowns\*\***

MCO:	All MCOs in Providers SDA	Facility Name:	PARK MANOR OF THE WOODLANDS	SDA:	HARRIS
Facility ID:	104661	Legal Entity Name:	WINNIESTOWELL HOSPITAL DISTRICT	Medicaid Contract #	1029344

*Funds Earned	QUARTER 1			QUARTER 2			QUARTER 3			QUARTER 4			Adjustment Periods			Total
	Sep 2022	Oct 2022	Nov 2022	Dec 2022	Jan 2023	Feb 2023	Mar 2023	Apr 2023	May 2023	Jun 2023	Jul 2023	Aug 2023	Adj 1	Adj 2	Adj 3	Year to Date
Component 1	\$ 47,094	\$ 51,015	\$ 54,615	\$ 52,085	\$ 52,366	\$ 57,099	\$ 57,630	\$ 55,209	\$ 54,592	\$ 55,193	\$ 55,818	\$ 54,139	\$ -	\$ -	\$ -	\$ 646,855
Component 2	\$ 12,181	\$ 13,195	\$ 14,126	\$ 13,471	\$ 13,544	\$ 14,768	\$ 14,906	\$ 14,279	\$ 14,120	\$ 14,275	\$ 14,437	\$ 14,003	\$ -	\$ -	\$ -	\$ 167,304
Component 3			\$ 59,252			\$ 62,676			\$ 64,957			\$ 64,072	\$ -	\$ -	\$ -	\$ 250,957
Component 4			\$ 55,536			\$ 2,309			\$ 58,010			\$ 59,708	\$ -	\$ -	\$ -	\$ 175,563
Qtr. Non-Dispersed Funds			\$ 43,999			\$ 41,573			\$ 36,115			\$ 70,814	\$ -	\$ -	\$ -	\$ 192,501
<b>QUARTER TOTALS</b>			\$ 351,012			\$ 309,891			\$ 369,818			\$ 402,460	\$ -	\$ -	\$ -	\$ 1,433,181

Payment Period	From Month	To Month	Estimated Scorecard Release
Quarter 1	Sep-22	Nov-22	Jan-23
Quarter 2	Dec-22	Feb-23	Apr-23
Quarter 3	Mar-23	May-23	Jul-23
Quarter 4	Jun-23	Aug-23	Oct-23
Adjustment Period 1	Sep-23	Dec-23	Jan-24
Adjustment Period 2	Jan-24	Aug-24	Sep-24
Adjustment Period 3	Sep-24	Jul-25	Aug-25

	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June	July	Aug	Total	Pay Tab	Variance
Comp 1	\$ (68.96)	\$ (68.98)	\$ (69.39)	\$ (69.74)	\$ (69.46)	\$ (70.86)	\$ (70.72)	\$ (70.35)	\$ (70.68)	\$ (69.04)	\$ (67.89)	\$ (62.17)	\$ (828.24)		
Comp 3	\$ 45.45	\$ 69.69	\$ 45.45	\$ 57.57	\$ 118.17	\$ 193.92	\$ 315.12	\$ 657.51	\$ 2,242.20	#####	\$20,570.67	\$ 18,837.51	\$ 64,072.38		
Comp 4	\$ 42.60	\$ 65.32	\$ 42.60	\$ -	\$ -	\$ -	\$ 295.36	\$ 616.28	\$ 2,101.60	#####	\$19,280.76	\$ 17,656.28	\$ 59,708.16		
Lapse	\$ 171.37	\$ 189.25	\$ 172.23	\$ 177.10	\$ 216.14	\$ 268.44	\$ 242.32	\$ 428.40	\$ 1,291.68	#####	\$23,422.05	\$ 21,448.65	\$ 71,846.43		
													\$ 194,798.73	\$194,798.73	\$ -

# Quality Incentive Payment Program - Year 6 (SFY23)

Quarter 4

June 2023 - August 2023

**\*\*Note: Enable Editing to use dropdowns\*\***

MCO:	All MCOs in Providers SDA	Facility Name:	PARK MANOR OF TOMBALL	SDA:	HARRIS
Facility ID:	103191	Legal Entity Name:	WINNIESTOWELL HOSPITAL DISTRICT	Medicaid Contract #	1029313

*Funds Earned	QUARTER 1			QUARTER 2			QUARTER 3			QUARTER 4			Adjustment Periods			Total
	Sep 2022	Oct 2022	Nov 2022	Dec 2022	Jan 2023	Feb 2023	Mar 2023	Apr 2023	May 2023	Jun 2023	Jul 2023	Aug 2023	Adj 1	Adj 2	Adj 3	Year to Date
Component 1	\$ 74,832	\$ 81,062	\$ 86,783	\$ 82,762	\$ 83,209	\$ 90,730	\$ 91,573	\$ 87,726	\$ 86,746	\$ 87,701	\$ 88,694	\$ 86,026	\$ -	\$ -	\$ -	\$ 1,027,846
Component 2	\$ 19,356	\$ 20,968	\$ 22,448	\$ 21,407	\$ 21,523	\$ 23,468	\$ 23,687	\$ 22,691	\$ 22,438	\$ 22,685	\$ 22,942	\$ 22,252	\$ -	\$ -	\$ -	\$ 265,865
Component 3			\$ 94,255			\$ 99,702			\$ 103,331			\$ 101,924	\$ -	\$ -	\$ -	\$ 399,212
Component 4			\$ 88,193			\$ 3,667			\$ 92,121			\$ 94,818	\$ -	\$ -	\$ -	\$ 278,799
Qtr. Non-Dispersed Funds			\$ 69,811			\$ 65,897			\$ 57,423			\$ 112,683	\$ -	\$ -	\$ -	\$ 305,814
<b>QUARTER TOTALS</b>			\$ 557,709			\$ 492,365			\$ 587,737			\$ 639,725	\$ -	\$ -	\$ -	\$ 2,277,535

Payment Period	From Month	To Month	Estimated Scorecard Release
Quarter 1	Sep-22	Nov-22	Jan-23
Quarter 2	Dec-22	Feb-23	Apr-23
Quarter 3	Mar-23	May-23	Jul-23
Quarter 4	Jun-23	Aug-23	Oct-23
Adjustment Period 1	Sep-23	Dec-23	Jan-24
Adjustment Period 2	Jan-24	Aug-24	Sep-24
Adjustment Period 3	Sep-24	Jul-25	Aug-25

	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June	July	Aug	Total	Pay Tab	Variance
Comp 1	\$ (137.92)	\$ (137.96)	\$ (138.78)	\$ (139.48)	\$ (138.92)	\$ (141.72)	\$ (141.44)	\$ (140.70)	\$ (141.36)	\$ (138.08)	\$ (135.78)	\$ (124.34)	\$ (1,656.48)		
Comp 3	\$ 72.30	\$ 110.86	\$ 72.30	\$ 91.58	\$ 187.98	\$ 308.48	\$ 501.28	\$ 1,045.94	\$ 3,566.80	#####	\$32,722.98	\$ 29,965.94	\$ 101,923.72		
Comp 4	\$ 67.65	\$ 103.73	\$ 67.65	\$ -	\$ -	\$ -	\$ 469.04	\$ 978.67	\$ 3,337.40	#####	\$30,618.39	\$ 28,038.67	\$ 94,818.24		
Lapse	\$ 191.17	\$ 219.61	\$ 192.03	\$ 199.33	\$ 261.77	\$ 343.32	\$ 413.92	\$ 709.24	\$ 2,080.16	#####	\$37,271.61	\$ 34,131.33	\$ 113,916.45		
													\$ 309,001.93	\$309,001.93	\$ -

# Quality Incentive Payment Program - Year 6 (SFY23)

Quarter 4

June 2023 - August 2023

**\*\*Note: Enable Editing to use dropdowns\*\***

MCO:	All MCOs in Providers SDA	Facility Name:	DEERBROOK SKILLED NURSING AND REHAB CENTER	SDA:	HARRIS
Facility ID:	104541	Legal Entity Name:	WINNIESTOWELL HOSPITAL DISTRICT	Medicaid Contract #	1029318

*Funds Earned	QUARTER 1			QUARTER 2			QUARTER 3			QUARTER 4			Adjustment Periods			Total
	Sep 2022	Oct 2022	Nov 2022	Dec 2022	Jan 2023	Feb 2023	Mar 2023	Apr 2023	May 2023	Jun 2023	Jul 2023	Aug 2023	Adj 1	Adj 2	Adj 3	Year to Date
Component 1	\$ 70,069	\$ 75,902	\$ 81,259	\$ 77,494	\$ 77,912	\$ 84,954	\$ 85,744	\$ 82,142	\$ 81,224	\$ 82,119	\$ 83,048	\$ 80,550	\$ -	\$ -	\$ -	\$ 962,415
Component 2	\$ 18,150	\$ 19,661	\$ 21,049	\$ 20,074	\$ 20,182	\$ 22,006	\$ 22,211	\$ 21,278	\$ 21,040	\$ 21,272	\$ 21,512	\$ 20,865	\$ -	\$ -	\$ -	\$ 249,300
Component 3			\$ 66,145			\$ 69,967			\$ 95,193			\$ 95,171	\$ -	\$ -	\$ -	\$ 326,476
Component 4			\$ 82,522			\$ 3,431			\$ 86,198			\$ 4,701	\$ -	\$ -	\$ -	\$ 176,852
Qtr. Non-Dispersed Funds			\$ 62,380			\$ 58,235			\$ 53,309			\$ 87,937	\$ -	\$ -	\$ -	\$ 261,862
<b>QUARTER TOTALS</b>			\$ 497,137			\$ 434,254			\$ 548,338			\$ 497,176	\$ -	\$ -	\$ -	\$ 1,976,905

Payment Period	From Month	To Month	Estimated Scorecard Release
Quarter 1	Sep-22	Nov-22	Jan-23
Quarter 2	Dec-22	Feb-23	Apr-23
Quarter 3	Mar-23	May-23	Jul-23
Quarter 4	Jun-23	Aug-23	Oct-23
Adjustment Period 1	Sep-23	Dec-23	Jan-24
Adjustment Period 2	Jan-24	Aug-24	Sep-24
Adjustment Period 3	Sep-24	Jul-25	Aug-25

	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June	July	Aug	Total	Pay Tab	Variance
Comp 1	\$ (137.92)	\$ (137.96)	\$ (138.78)	\$ (139.48)	\$ (138.92)	\$ (141.72)	\$ (141.44)	\$ (140.70)	\$ (141.36)	\$ (138.08)	\$ (135.78)	\$ (124.34)	\$ (1,656.48)		
Comp 3	\$ 50.74	\$ 77.80	\$ 50.74	\$ 64.27	\$ 131.92	\$ 216.48	\$ 469.04	\$ 978.67	\$ 3,337.40	#####	\$30,618.39	\$ 28,038.67	\$ 95,171.15		
Comp 4	\$ (5.51)	\$ 28.31	\$ (5.94)	\$ -	\$ -	\$ -	\$ 369.20	\$ 847.56	\$ 3,059.52	\$ -	\$ -	\$ -	\$ 4,293.14		
Lapse	\$ 254.28	\$ 279.62	\$ 255.57	\$ 192.30	\$ 247.34	\$ 319.64	\$ 395.20	\$ 670.18	\$ 1,946.96	#####	\$28,921.14	\$ 26,484.42	\$ 89,377.69		
													\$ 187,185.50	\$187,185.50	\$ 0.00

# Quality Incentive Payment Program - Year 6 (SFY23)

Quarter 4

June 2023 - August 2023

**\*\*Note: Enable Editing to use dropdowns\*\***

MCO:	All MCOs in Providers SDA	Facility Name:	PARK MANOR OF SOUTH BELT	SDA:	HARRIS
Facility ID:	5400	Legal Entity Name:	WINNIESTOWELL HOSPITAL DISTRICT	Medicaid Contract #	1029352

*Funds Earned	QUARTER 1			QUARTER 2			QUARTER 3			QUARTER 4			Adjustment Periods			Total
	Sep 2022	Oct 2022	Nov 2022	Dec 2022	Jan 2023	Feb 2023	Mar 2023	Apr 2023	May 2023	Jun 2023	Jul 2023	Aug 2023	Adj 1	Adj 2	Adj 3	Year to Date
Component 1	\$ 59,878	\$ 64,863	\$ 69,440	\$ 66,223	\$ 66,581	\$ 72,598	\$ 73,273	\$ 70,195	\$ 69,411	\$ 70,175	\$ 70,970	\$ 68,835	\$ -	\$ -	\$ -	\$ 822,442
Component 2	\$ 15,497	\$ 16,787	\$ 17,972	\$ 17,139	\$ 17,232	\$ 18,789	\$ 18,964	\$ 18,167	\$ 17,964	\$ 18,162	\$ 18,368	\$ 17,815	\$ -	\$ -	\$ -	\$ 212,858
Component 3			\$ 75,482			\$ 79,844			\$ 63,341			\$ 61,387	\$ -	\$ -	\$ -	\$ 280,054
Component 4			\$ 70,594			\$ 2,935			\$ 73,738			\$ 75,897	\$ -	\$ -	\$ -	\$ 223,163
Qtr. Non-Dispersed Funds			\$ 55,927			\$ 52,800			\$ 44,093			\$ 85,828	\$ -	\$ -	\$ -	\$ 238,649
<b>QUARTER TOTALS</b>			\$ 446,441			\$ 394,142			\$ 449,147			\$ 487,437	\$ -	\$ -	\$ -	\$ 1,777,166

Payment Period	From Month	To Month	Estimated Scorecard Release
Quarter 1	Sep-22	Nov-22	Jan-23
Quarter 2	Dec-22	Feb-23	Apr-23
Quarter 3	Mar-23	May-23	Jul-23
Quarter 4	Jun-23	Aug-23	Oct-23
Adjustment Period 1	Sep-23	Dec-23	Jan-24
Adjustment Period 2	Jan-24	Aug-24	Sep-24
Adjustment Period 3	Sep-24	Jul-25	Aug-25

	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June	July	Aug	Total	Pay Tab	Variance
Comp 1	\$ (137.92)	\$ (137.96)	\$ (138.78)	\$ (139.48)	\$ (138.92)	\$ (141.72)	\$ (141.44)	\$ (140.70)	\$ (141.36)	\$ (138.08)	\$ (135.78)	\$ (124.34)	\$ (1,656.48)		
Comp 3	\$ 57.90	\$ 88.78	\$ 57.90	\$ 73.34	\$ 150.54	\$ 247.04	\$ 301.08	\$ 628.22	\$ 2,142.30	#####	\$19,654.16	\$ 17,998.22	\$ 61,386.55		
Comp 4	\$ 54.15	\$ 83.03	\$ 54.15	\$ -	\$ -	\$ -	\$ 375.44	\$ 783.37	\$ 2,671.40	#####	\$24,508.29	\$ 22,443.37	\$ 75,896.64		
Lapse	\$ 180.52	\$ 203.28	\$ 181.38	\$ 187.36	\$ 237.20	\$ 303.00	\$ 349.44	\$ 574.70	\$ 1,621.36	#####	\$28,378.02	\$ 25,987.06	\$ 87,062.04		
													\$ 222,688.75	\$ 222,688.75	\$ 0.01

# Quality Incentive Payment Program - Year 6 (SFY23)

Quarter 4

June 2023 - August 2023

**\*\*Note: Enable Editing to use dropdowns\*\***

MCO:	All MCOs in Providers SDA	Facility Name:	FRIENDSHIP HAVEN HEALTHCARE AND REHABILITATION CENTER	SDA:	HARRIS
Facility ID:	4286	Legal Entity Name:	WINNIESTOWELL HOSPITAL DISTRICT	Medicaid Contract #	1029559

*Funds Earned	QUARTER 1			QUARTER 2			QUARTER 3			QUARTER 4			Adjustment Periods			Total
	Sep 2022	Oct 2022	Nov 2022	Dec 2022	Jan 2023	Feb 2023	Mar 2023	Apr 2023	May 2023	Jun 2023	Jul 2023	Aug 2023	Adj 1	Adj 2	Adj 3	
Component 1	\$ 64,400	\$ 69,762	\$ 74,685	\$ 71,225	\$ 71,609	\$ 78,081	\$ 78,808	\$ 75,497	\$ 74,653	\$ 75,476	\$ 76,330	\$ 74,034	\$ -	\$ -	\$ -	\$ 884,560
Component 2	\$ 16,703	\$ 18,094	\$ 19,371	\$ 18,473	\$ 18,573	\$ 20,251	\$ 20,440	\$ 19,581	\$ 19,362	\$ 19,576	\$ 19,797	\$ 19,202	\$ -	\$ -	\$ -	\$ 229,422
Component 3			\$ 81,153			\$ 85,843			\$ 68,099			\$ 65,998	\$ -	\$ -	\$ -	\$ 301,094
Component 4			\$ 75,873			\$ 3,154			\$ 79,253			\$ 4,322	\$ -	\$ -	\$ -	\$ 162,603
Qtr. Non-Dispersed Funds			\$ 60,229			\$ 56,755			\$ 47,371			\$ 76,466	\$ -	\$ -	\$ -	\$ 240,821
<b>QUARTER TOTALS</b>			\$ 480,271			\$ 423,965			\$ 483,065			\$ 431,200	\$ -	\$ -	\$ -	\$ 1,818,501

Payment Period	From Month	To Month	Estimated Scorecard Release
Quarter 1	Sep-22	Nov-22	Jan-23
Quarter 2	Dec-22	Feb-23	Apr-23
Quarter 3	Mar-23	May-23	Jul-23
Quarter 4	Jun-23	Aug-23	Oct-23
Adjustment Period 1	Sep-23	Dec-23	Jan-24
Adjustment Period 2	Jan-24	Aug-24	Sep-24
Adjustment Period 3	Sep-24	Jul-25	Aug-25

	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June	July	Aug	Total	Pay Tab	Variance
Comp 1	\$ (137.92)	\$ (137.96)	\$ (138.78)	\$ (139.48)	\$ (138.92)	\$ (141.72)	\$ (141.44)	\$ (140.70)	\$ (141.36)	\$ (138.08)	\$ (135.78)	\$ (124.34)	\$ (1,656.48)		
Comp 3	\$ 62.25	\$ 95.45	\$ 62.25	\$ 78.85	\$ 161.85	\$ 265.60	\$ 323.70	\$ 675.41	\$ 2,303.25	#####	\$21,130.76	\$ 19,350.41	\$ 65,998.49		
Comp 4	\$ 58.20	\$ 89.24	\$ 58.20	\$ -	\$ -	\$ -	\$ 403.52	\$ 841.96	\$ 2,871.20	\$ -	\$ -	\$ -	\$ 4,322.32		
Lapse	\$ 252.63	\$ 277.09	\$ 253.92	\$ 190.97	\$ 244.61	\$ 315.16	\$ 365.04	\$ 607.25	\$ 1,732.36	#####	\$25,119.30	\$ 23,002.90	\$ 77,906.03		
													\$ 146,570.36	\$146,570.36	\$ 0.00

# Quality Incentive Payment Program - Year 6 (SFY23)

Quarter 4

June 2023 - August 2023

**\*\*Note: Enable Editing to use dropdowns\*\***

MCO:	All MCOs in Providers SDA	Facility Name:	WILLOWBROOK NURSING CENTER	SDA:	MRSA NORTHEAST
Facility ID:	5225	Legal Entity Name:	WINNIESTOWELL HOSPITAL DISTRICT	Medicaid Contract #	1030890

*Funds Earned	QUARTER 1			QUARTER 2			QUARTER 3			QUARTER 4			Adjustment Periods			Total
	Sep 2022	Oct 2022	Nov 2022	Dec 2022	Jan 2023	Feb 2023	Mar 2023	Apr 2023	May 2023	Jun 2023	Jul 2023	Aug 2023	Adj 1	Adj 2	Adj 3	Year to Date
Component 1	\$ 59,479	\$ 66,733	\$ 73,106	\$ 68,216	\$ 66,519	\$ 68,069	\$ 70,527	\$ 66,867	\$ 68,363	\$ 71,062	\$ 68,256	\$ 68,630	\$ -	\$ -	\$ -	\$ 815,828
Component 2	\$ 15,404	\$ 17,283	\$ 18,933	\$ 17,667	\$ 17,227	\$ 17,629	\$ 18,265	\$ 17,317	\$ 17,705	\$ 18,404	\$ 17,677	\$ 17,774	\$ -	\$ -	\$ -	\$ 211,285
Component 3	\$ 77,430			\$ 59,667			\$ 79,142			\$ 80,659			\$ -	\$ -	\$ -	\$ 296,898
Component 4	\$ 72,357			\$ 2,163			\$ 71,746			\$ 75,030			\$ -	\$ -	\$ -	\$ 221,296
Qtr. Non-Dispersed Funds	\$ 57,438			\$ 49,161			\$ 44,043			\$ 89,149			\$ -	\$ -	\$ -	\$ 239,791
<b>QUARTER TOTALS</b>	\$ 458,162			\$ 366,318			\$ 453,976			\$ 506,641			\$ -	\$ -	\$ -	\$ 1,785,098

Payment Period	From Month	To Month	Estimated Scorecard Release
Quarter 1	Sep-22	Nov-22	Jan-23
Quarter 2	Dec-22	Feb-23	Apr-23
Quarter 3	Mar-23	May-23	Jul-23
Quarter 4	Jun-23	Aug-23	Oct-23
Adjustment Period 1	Sep-23	Dec-23	Jan-24
Adjustment Period 2	Jan-24	Aug-24	Sep-24
Adjustment Period 3	Sep-24	Jul-25	Aug-25

	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June	July	Aug	Total	Pay Tab	Variance
Comp 1	\$ (153.72)	\$ (154.50)	\$ (155.37)	\$ (154.77)	\$ (152.37)	\$ (155.97)	\$ (155.85)	\$ (155.22)	\$ (155.49)	\$ (152.79)	\$ (149.58)	\$ (136.32)	\$ (1,831.95)		
Comp 3	\$ 31.14	\$ 36.33	\$ 15.57	\$ 46.71	\$ 97.31	\$ 225.76	\$ 456.72	\$ 1,084.71	\$ 2,771.46	\$ 26,432.67	\$ 25,877.34	\$ 23,583.36	\$ 80,659.09		
Comp 4	\$ (22.08)	\$ (17.48)	\$ (37.21)	\$ -	\$ -	\$ -	\$ 375.73	\$ 964.00	\$ 2,543.41	\$ 24,701.05	\$ 24,182.10	\$ 22,038.40	\$ 74,727.92		
Lapse	\$ 176.64	\$ 181.24	\$ 166.83	\$ 193.05	\$ 232.12	\$ 340.99	\$ 352.06	\$ 692.86	\$ 1,609.54	\$ 30,099.63	\$ 29,467.26	\$ 26,855.04	\$ 90,367.26		
													\$ 243,922.32	\$ 243,922.32	\$ 0.00

The tables below display the funds earned as a result of meeting a metric. The \*total earned will increase or decrease as member months are adjusted through the program year.

COMPONENT 1 - NSGO - MONTHLY			
QAPI			
Description: Facility holds a QAPI meeting each month in accordance with quarterly federal requirements.			
Month	Met	Month	Met
Sep 2022	YES	Mar 2023	YES
Oct 2022	YES	Apr 2023	YES
Nov 2022	YES	May 2023	YES
Dec 2022	YES	Jun 2023	YES
Jan 2023	YES	Jul 2023	YES
Feb 2023	YES	Aug 2023	YES

Note: Component 1 is a Condition of Participation.

COMPONENT 2 - ALL FACILITIES - MONTHLY											
Metric 1: +4 Hours RN				Metric 2: +8 Hours RN				Metric 3: Workforce Development			
Description: Facility maintains four additional hours of registered nurse (RN) staffing coverage per day, beyond the CMS mandate.				Description: Facility maintains eight additional hours of registered nurse (RN) staffing coverage per day, beyond the CMS mandate.				Description: Facility has a staffing recruitment and retention program that includes a self-directed plan and monitoring outcomes.			
Month	Met	Month	Met	Month	Met	Month	Met	Month	Met	Month	Met
Sep 2022	YES	Mar 2023	YES	Sep 2022	YES	Mar 2023	YES	Sep 2022	YES	Mar 2023	YES
Oct 2022	YES	Apr 2023	YES	Oct 2022	YES	Apr 2023	YES	Oct 2022	YES	Apr 2023	YES
Nov 2022	YES	May 2023	YES	Nov 2022	YES	May 2023	YES	Nov 2022	YES	May 2023	YES
Dec 2022	YES	Jun 2023	YES	Dec 2022	YES	Jun 2023	YES	Dec 2022	YES	Jun 2023	YES
Jan 2023	YES	Jul 2023	YES	Jan 2023	YES	Jul 2023	YES	Jan 2023	YES	Jul 2023	YES
Feb 2023	YES	Aug 2023	YES	Feb 2023	YES	Aug 2023	YES	Feb 2023	YES	Aug 2023	YES

Note: Component 2 Metric 3 is a Condition of Participation.

Conditions of Participation
<b>Component 1 and Component 2 Metric 3</b>
'YES'/'NO' results indicate only whether a payment is being directed to the NF. Such monthly payments are uniform rate increases and do not reflect HHSC's final determination of whether conditions of participation have been met in that reporting period.
A NF that fails to meet all required conditions of participation will be removed from the program retroactive to the first day of the program period. HHSC will redistribute revenue paid to facilities removed from the program to the remaining facilities participating in the program period. Facilities that meet the conditions of participation will remain enrolled in the program period. For a full list of the required conditions of participation, including conditions not discussed here, please refer to 1 TAC 353.1302(e).

COMPONENT 3 - ALL FACILITIES - QUARTERLY																				
Payment Period	Metric 1: Pressure Ulcers (CMS N015.03)					Metric 2: Antipsychotics (CMS N031.03)					Metric 3: Mobility (CMS N035.03)					Metric 4: UTI (CMS N024.02)				
	Target	Num	Dem	Actual	Met	Target	Num	Dem	Actual	Met	Target	Num	Dem	Actual	Met	Target	Num	Dem	Actual	Met
Qtr. 1	10.36	3.00	55.00	5.45	YES	13.73	7.00	75.00	9.33	YES	18.04	6.00	41.00	14.63	YES	0.48	0.00	80.00	0.00	YES
Qtr. 2	9.81	6.00	60.00	10.00	NO	13.73	10.00	78.00	12.82	YES	18.04	4.00	41.00	9.76	YES	0.48	0.00	84.00	0.00	YES
Qtr. 3	9.27	2.00	59.00	3.39	YES	13.73	10.00	81.00	12.35	YES	18.04	5.00	52.00	9.62	YES	0.48	7.00	42.00	0.00	YES
Qtr. 4	8.72	4.00	52.00	7.69	YES	13.73	8.00	72.00	11.11	YES	18.04	6.00	47.00	100.00	YES	0.48	0.00	78.00	98.94	YES

Note: For Metric target fields showing "Min Data" or "Withheld", please contact the QIPP mailbox at QIPP@hhsc.state.tx.us to receive your facilities complete metric results. The metric value was redacted due to HIPAA compliance or not meeting the minimum data requirement to calculate a value.

**COMPONENT 4 - NSGO - QUARTERLY**

Payment Period	Metric 1: Pneumococcal Vaccine (CMS N020.02)					Metric 2: Influenza Vaccine (CMS N016.03)				
	Target	Num	Dem	Actual	Met	Target	Num	Dem	Actual	Met
Qtr. 1	N/A	N/A	N/A	N/A	YES	N/A	N/A	N/A	N/A	YES
Qtr. 2	N/A	N/A	N/A	N/A	NO	N/A	N/A	N/A	N/A	NO
Qtr. 3	N/A	N/A	N/A	N/A	YES	N/A	N/A	N/A	N/A	YES
Qtr. 4	98.86%	NA	NA	100.000%	YES	98.52%	NA	NA	98.936%	YES

**COMPONENT 4 - NSGO - QUARTERLY**

Month	Comp 1	Comp 2	Month	Comp 1	Comp 2	Month	Comp 1	Comp 2	Payment Period	Comp 3 (Adjusted for min-data)	Comp 4	Non-Dispersed Funds
Sep 2022	\$ 13.36	\$ 1.15	Jan 2023	\$ 13.36	\$ 1.15	May 2023	\$ 13.36	\$ 1.15	Qtr. 1	\$ 5.19	\$ 4.85	\$ 3.85
Oct 2022	\$ 13.36	\$ 1.15	Feb 2023	\$ 13.36	\$ 1.15	Jun 2023	\$ 13.36	\$ 1.15	Qtr. 2	\$ 3.89	\$ -	\$ 3.22
Nov 2022	\$ 13.36	\$ 1.15	Mar 2023	\$ 13.36	\$ 1.15	Jul 2023	\$ 13.36	\$ 1.15	Qtr. 3	\$ 5.19	\$ 4.85	\$ 2.84
Dec 2022	\$ 13.36	\$ 1.15	Apr 2023	\$ 13.36	\$ 1.15	Aug 2023	\$ 13.36	\$ 1.15	Qtr. 4	\$ 5.19	\$ 4.85	\$ 5.91

Member Months	Quarter 1			Quarter 2			Quarter 3			Quarter 4			Adjustment Period 1				Adjustment Period 2					Adj 3	Total		
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22		23	24
Sep 2022	4,452	414	194	20	13	13	7	2	3	5	-	1	-	-	-	-	-	-	-	-	-	-	-	-	5,124
Oct 2022	4,581	442	60	28	10	16	1	5	5	-	2	-	-	-	-	-	-	-	-	-	-	-	-	-	5,150
Nov 2022	4,836	210	62	30	24	10	4	4	1	(2)	-	-	-	-	-	-	-	-	-	-	-	-	-	-	5,179
Dec 2022	4,816	221	62	32	13	3	9	4	(1)	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	5,159
Jan 2023	4,655	288	90	27	(6)	9	7	9	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	5,079
Feb 2023	4,692	320	101	28	31	11	16	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	5,199
Mar 2023	4,790	224	93	49	24	15	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	5,195
Apr 2023	4,627	338	142	49	18	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	5,174
May 2023	4,649	417	74	43	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	5,183
Jun 2023	4,648	311	134	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	5,093
Jul 2023	4,628	358	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4,986
Aug 2023	4,544	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4,544

Member Month Count Instructions: Each quarter the scorecard will be updated with metric performance and achieved payment factor amounts. The scorecard will also calculate the payment associated with the current quarter and adjustments made to past quarters in the current quarter. The table Member Month Count reflects the actual member month case load for the selected MCO in that provider's service delivery area (SDA).

# Quality Incentive Payment Program - Year 6 (SFY23)

Quarter 4

June 2023 - August 2023

**\*\*Note: Enable Editing to use dropdowns\*\***

MCO:	All MCOs in Providers SDA	Facility Name:	ACCEL AT COLLEGE STATION	SDA:	MRSA CENTRAL
Facility ID:	106988	Legal Entity Name:	WINNIESTOWELL HOSPITAL DISTRICT	Medicaid Contract #	1030241

*Funds Earned	QUARTER 1			QUARTER 2			QUARTER 3			QUARTER 4			Adjustment Periods			Total
	Sep 2022	Oct 2022	Nov 2022	Dec 2022	Jan 2023	Feb 2023	Mar 2023	Apr 2023	May 2023	Jun 2023	Jul 2023	Aug 2023	Adj 1	Adj 2	Adj 3	Year to Date
Component 1	\$ 43,880	\$ 48,133	\$ 51,197	\$ 50,159	\$ 48,994	\$ 51,438	\$ 48,994	\$ 50,741	\$ 49,323	\$ 49,716	\$ 49,602	\$ 49,716	\$ -	\$ -	\$ -	\$ 591,893
Component 2	\$ 11,368	\$ 12,471	\$ 13,264	\$ 12,995	\$ 12,694	\$ 13,327	\$ 12,694	\$ 13,146	\$ 12,779	\$ 12,881	\$ 12,851	\$ 12,881	\$ -	\$ -	\$ -	\$ 153,350
Component 3	\$ 55,655			\$ 16,516			\$ 42,669			\$ 43,349			\$ -	\$ -	\$ -	\$ 158,189
Component 4	\$ 52,035			\$ 2,351			\$ 52,578			\$ 53,903			\$ -	\$ -	\$ -	\$ 160,867
Qtr. Non-Dispersed Funds	\$ 41,289			\$ 32,602			\$ 30,251			\$ 61,113			\$ -	\$ -	\$ -	\$ 165,255
<b>QUARTER TOTALS</b>	\$ 329,292			\$ 241,075			\$ 313,175			\$ 346,011			\$ -	\$ -	\$ -	\$ 1,229,553

Payment Period	From Month	To Month	Estimated Scorecard Release
Quarter 1	Sep-22	Nov-22	Jan-23
Quarter 2	Dec-22	Feb-23	Apr-23
Quarter 3	Mar-23	May-23	Jul-23
Quarter 4	Jun-23	Aug-23	Oct-23
Adjustment Period 1	Sep-23	Dec-23	Jan-24
Adjustment Period 2	Jan-24	Aug-24	Sep-24
Adjustment Period 3	Sep-24	Jul-25	Aug-25

	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June	July	Aug	Total	Pay Tab	Variance
Comp 1	\$ (79.34)	\$ (79.18)	\$ (79.76)	\$ (79.30)	\$ (78.06)	\$ (78.28)	\$ (78.94)	\$ (79.36)	\$ (78.70)	\$ (77.98)	\$ (76.04)	\$ (70.12)	\$ (935.06)		
Comp 3	\$ 54.12	\$ 44.28	\$ 73.80	\$ 20.91	\$ 22.14	\$ 23.37	\$ 188.19	\$ 435.42	\$ 1,132.83	\$ 14,387.31	\$ 14,029.38	\$ 12,937.14	\$ 43,348.89		
Comp 4	\$ 50.60	\$ 41.40	\$ 69.00	\$ -	\$ -	\$ -	\$ 234.60	\$ 542.80	\$ 1,412.20	\$ 17,935.40	\$ 17,489.20	\$ 16,127.60	\$ 53,902.80		
Lapse	\$ 158.83	\$ 151.35	\$ 173.94	\$ 124.86	\$ 126.30	\$ 129.20	\$ 208.48	\$ 379.08	\$ 858.48	\$ 20,742.68	\$ 20,226.64	\$ 18,651.92	\$ 61,931.76		
													\$ 158,248.39	\$ 158,248.39	\$ -

The tables below display the funds earned as a result of meeting a metric. The \*total earned will increase or decrease as member months are adjusted through the program year.

COMPONENT 1 - NSGO - MONTHLY			
QAPI			
Description: Facility holds a QAPI meeting each month in accordance with quarterly federal requirements.			
Month	Met	Month	Met
Sep 2022	YES	Mar 2023	YES
Oct 2022	YES	Apr 2023	YES
Nov 2022	YES	May 2023	YES
Dec 2022	YES	Jun 2023	YES
Jan 2023	YES	Jul 2023	YES
Feb 2023	YES	Aug 2023	YES

COMPONENT 2 - ALL FACILITIES - MONTHLY											
Metric 1: +4 Hours RN				Metric 2: +8 Hours RN				Metric 3: Workforce Development			
Description: Facility maintains four additional hours of registered nurse (RN) staffing coverage per day, beyond the CMS mandate.				Description: Facility maintains eight additional hours of registered nurse (RN) staffing coverage per day, beyond the CMS mandate.				Description: Facility has a staffing recruitment and retention program that includes a self-directed plan and monitoring outcomes.			
Month	Met	Month	Met	Month	Met	Month	Met	Month	Met	Month	Met
Sep 2022	YES	Mar 2023	YES	Sep 2022	YES	Mar 2023	YES	Sep 2022	YES	Mar 2023	YES
Oct 2022	YES	Apr 2023	YES	Oct 2022	YES	Apr 2023	YES	Oct 2022	YES	Apr 2023	YES
Nov 2022	YES	May 2023	YES	Nov 2022	YES	May 2023	YES	Nov 2022	YES	May 2023	YES
Dec 2022	YES	Jun 2023	YES	Dec 2022	YES	Jun 2023	YES	Dec 2022	YES	Jun 2023	YES
Jan 2023	YES	Jul 2023	YES	Jan 2023	YES	Jul 2023	YES	Jan 2023	YES	Jul 2023	YES
Feb 2023	YES	Aug 2023	YES	Feb 2023	YES	Aug 2023	YES	Feb 2023	YES	Aug 2023	YES

Conditions of Participation
<b>Component 1 and Component 2 Metric 3</b>
'YES'/'NO' results indicate only whether a payment is being directed to the NF. Such monthly payments are uniform rate increases and do not reflect HHSC's final determination of whether conditions of participation have been met in that reporting period.
A NF that fails to meet all required conditions of participation will be removed from the program retroactive to the first day of the program period. HHSC will redistribute revenue paid to facilities removed from the program to the remaining facilities participating in the program period. Facilities that meet the conditions of participation will remain enrolled in the program period. For a full list of the required conditions of participation, including conditions not discussed here, please refer to 1 TAC 353.1302(e).

Note: Component 1 is a Condition of Participation.

Note: Component 2 Metric 3 is a Condition of Participation.

COMPONENT 3 - ALL FACILITIES - QUARTERLY																				
Payment Period	Metric 1: Pressure Ulcers (CMS N015.03)					Metric 2: Antipsychotics (CMS N031.03)					Metric 3: Mobility (CMS N035.03)					Metric 4: UTI (CMS N024.02)				
		NF Baseline	5.16		National Average	8.14	NF Baseline	6.03		National Average	14.49	NF Baseline	14.02		National Average	18.04	NF Baseline	0.45		National Average
	Description: Facility performs equal to better than its quarterly target for percent of high-risk residents with pressure ulcers, including unstageable pressure ulcers.					Description: Facility performs equal to better than its quarterly target for percent of residents who received antipsychotic medication.					Description: Facility performs equal to better than its quarterly target for percent of residents whose ability to move independently has worsened.					Description: Facility performs equal to better than its quarterly target for percent of residents with a urinary tract infection.				
Target	Num	Dem	Actual	Met	Target	Num	Dem	Actual	Met	Target	Num	Dem	Actual	Met	Target	Num	Dem	Actual	Met	
Qtr. 1	5.29	2.00	45.00	4.44	YES	6.21	3.00	62.00	4.84	YES	18.04	2.00	45.00	4.44	YES	0.61	0.00	63.00	0.00	YES
Qtr. 2	5.29	4.00	51.00	7.84	NO	6.21	10.00	72.00	13.89	NO	18.04	14.00	54.00	25.93	NO	0.61	0.00	72.00	0.00	YES
Qtr. 3	5.29	7.00	52.00	13.46	NO	6.21	4.00	69.00	5.80	YES	18.04	2.00	50.00	4.00	YES	0.61	0.00	49.00	0.00	YES
Qtr. 4	5.29	3.00	43.00	6.98	NO	6.21	3.00	61.00	4.92	YES	18.04	8.00	46.00	98.16	YES	0.61	0.00	63.00	100.00	YES

Note: For Metric target fields showing "Min Data" or "Withheld", please contact the QIPP mailbox at QIPP@hhsc.state.tx.us to receive your facilities complete metric results. The metric value was redacted due to HIPAA compliance or not meeting the minimum data requirement to calculate a value.



**COMPONENT 4 - NSGO - QUARTERLY**

Payment Period	Metric 1: Pneumococcal Vaccine (CMS N020.02)					Metric 2: Influenza Vaccine (CMS N016.03)				
	Target	Num	Dem	Actual	Met	Target	Num	Dem	Actual	Met
Qtr. 1	N/A	N/A	N/A	N/A	YES	N/A	N/A	N/A	N/A	YES
Qtr. 2	N/A	N/A	N/A	N/A	NO	N/A	N/A	N/A	N/A	NO
Qtr. 3	N/A	N/A	N/A	N/A	YES	N/A	N/A	N/A	N/A	YES
Qtr. 4	92.95%	NA	NA	98.162%	YES	95.43%	NA	NA	100.000%	YES

**COMPONENT 4 - NSGO - QUARTERLY**

Month	Comp 1	Comp 2	Month	Comp 1	Comp 2	Month	Comp 1	Comp 2	Payment Period	Comp 3 (Adjusted for min-data)	Comp 4	Non-Dispersed Funds
Sep 2022	\$ 12.66	\$ 1.09	Jan 2023	\$ 12.66	\$ 1.09	May 2023	\$ 12.66	\$ 1.09	Qtr. 1	\$ 4.92	\$ 4.60	\$ 3.65
Oct 2022	\$ 12.66	\$ 1.09	Feb 2023	\$ 12.66	\$ 1.09	Jun 2023	\$ 12.66	\$ 1.09	Qtr. 2	\$ 1.23	\$ -	\$ 2.70
Nov 2022	\$ 12.66	\$ 1.09	Mar 2023	\$ 12.66	\$ 1.09	Jul 2023	\$ 12.66	\$ 1.09	Qtr. 3	\$ 3.69	\$ 4.60	\$ 2.56
Dec 2022	\$ 12.66	\$ 1.09	Apr 2023	\$ 12.66	\$ 1.09	Aug 2023	\$ 12.66	\$ 1.09	Qtr. 4	\$ 3.69	\$ 4.60	\$ 5.32

Member Months	Quarter 1			Quarter 2			Quarter 3			Quarter 4			Adjustment Period 1				Adjustment Period 2					Adj 3	Total		
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22		23	24
Sep 2022	3,466	277	125	41	24	8	12	2	1	2	4	5	-	-	-	-	-	-	-	-	-	-	-	-	3,967
Oct 2022	3,525	276	83	31	16	13	1	5	-	3	6	-	-	-	-	-	-	-	-	-	-	-	-	-	3,959
Nov 2022	3,643	185	87	36	13	5	4	5	5	5	-	-	-	-	-	-	-	-	-	-	-	-	-	-	3,988
Dec 2022	3,653	172	88	21	7	7	12	1	4	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	3,965
Jan 2023	3,556	256	49	15	9	7	1	10	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	3,903
Feb 2023	3,659	168	52	16	12	-	7	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	3,914
Mar 2023	3,594	246	56	27	10	14	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	3,947
Apr 2023	3,680	170	88	12	18	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	3,968
May 2023	3,628	231	51	25	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	3,935
Jun 2023	3,543	273	83	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	3,899
Jul 2023	3,558	244	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	3,802
Aug 2023	3,506	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	3,506

Member Month Count Instructions: Each quarter the scorecard will be updated with metric performance and achieved payment factor amounts. The scorecard will also calculate the payment associated with the current quarter and adjustments made to past quarters in the current quarter. The table Member Month Count reflects the actual member month case load for the selected MCO in that provider's service delivery area (SDA).

# Quality Incentive Payment Program - Year 6 (SFY23)

Quarter 4

June 2023 - August 2023

**\*\*Note: Enable Editing to use dropdowns\*\***

MCO:	All MCOs in Providers SDA	Facility Name:	CIMARRON PLACE HEALTH & REHABILITATION	SDA:	NUECES
Facility ID:	102375	Legal Entity Name:	WINNIESTOWELL HOSPITAL DISTRICT	Medicaid Contract #	1013564

*Funds Earned	QUARTER 1			QUARTER 2			QUARTER 3			QUARTER 4			Adjustment Periods			Total
	Sep 2022	Oct 2022	Nov 2022	Dec 2022	Jan 2023	Feb 2023	Mar 2023	Apr 2023	May 2023	Jun 2023	Jul 2023	Aug 2023	Adj 1	Adj 2	Adj 3	Year to Date
Component 1	\$ 37,029	\$ 41,179	\$ 47,583	\$ 43,407	\$ 40,369	\$ 40,395	\$ 45,077	\$ 43,761	\$ 40,724	\$ 46,165	\$ 41,407	\$ 41,306	\$ -	\$ -	\$ -	\$ 508,402
Component 2	\$ 9,597	\$ 10,673	\$ 12,333	\$ 11,250	\$ 10,463	\$ 10,470	\$ 11,683	\$ 11,342	\$ 10,555	\$ 11,965	\$ 10,732	\$ 10,706	\$ -	\$ -	\$ -	\$ 131,771
Component 3	\$ 36,641			\$ 47,884			\$ 38,374			\$ 49,300			\$ -	\$ -	\$ -	\$ 172,199
Component 4	\$ 45,674			\$ 1,277			\$ 44,673			\$ 46,410			\$ -	\$ -	\$ -	\$ 138,034
Qtr. Non-Dispersed Funds	\$ 34,492			\$ 31,712			\$ 26,692			\$ 54,550			\$ -	\$ -	\$ -	\$ 147,445
<b>QUARTER TOTALS</b>	\$ 275,201			\$ 237,228			\$ 272,881			\$ 312,541			\$ -	\$ -	\$ -	\$ 1,097,851

Payment Period	From Month	To Month	Estimated Scorecard Release
Quarter 1	Sep-22	Nov-22	Jan-23
Quarter 2	Dec-22	Feb-23	Apr-23
Quarter 3	Mar-23	May-23	Jul-23
Quarter 4	Jun-23	Aug-23	Oct-23
Adjustment Period 1	Sep-23	Dec-23	Jan-24
Adjustment Period 2	Jan-24	Aug-24	Sep-24
Adjustment Period 3	Sep-24	Jul-25	Aug-25

	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June	July	Aug	Total	Pay Tab	Variance
Comp 1	\$ (68.48)	\$ (68.68)	\$ (69.40)	\$ (68.68)	\$ (64.96)	\$ (69.04)	\$ (68.76)	\$ (67.76)	\$ (68.00)	\$ (66.32)	\$ (64.56)	\$ (58.84)	\$ (803.48)		
Comp 3	\$ 7.37	\$ 7.37	\$ 22.12	\$ 58.98	\$ 117.96	\$ 235.92	\$ 324.39	\$ 560.31	\$ 1,341.80	\$ 16,298.14	\$ 15,865.62	\$ 14,459.93	\$ 49,299.91		
Comp 4	\$ (25.03)	\$ (25.13)	\$ (7.07)	\$ -	\$ -	\$ -	\$ 370.86	\$ 666.08	\$ 1,642.22	\$ 15,237.02	\$ 14,832.66	\$ 13,518.49	\$ 46,210.10		
Lapse	\$ 92.49	\$ 92.74	\$ 107.42	\$ 124.25	\$ 158.00	\$ 239.90	\$ 292.72	\$ 454.60	\$ 994.38	\$ 18,420.38	\$ 17,931.54	\$ 16,342.81	\$ 55,251.23		
													\$ 149,957.76	\$ 149,957.76	\$ 0.00

The tables below display the funds earned as a result of meeting a metric. The \*total earned will increase or decrease as member months are adjusted through the program year.

COMPONENT 1 - NSGO - MONTHLY			
QAPI			
Description: Facility holds a QAPI meeting each month in accordance with quarterly federal requirements.			
Month	Met	Month	Met
Sep 2022	YES	Mar 2023	YES
Oct 2022	YES	Apr 2023	YES
Nov 2022	YES	May 2023	YES
Dec 2022	YES	Jun 2023	YES
Jan 2023	YES	Jul 2023	YES
Feb 2023	YES	Aug 2023	YES

COMPONENT 2 - ALL FACILITIES - MONTHLY											
Metric 1: +4 Hours RN				Metric 2: +8 Hours RN				Metric 3: Workforce Development			
Description: Facility maintains four additional hours of registered nurse (RN) staffing coverage per day, beyond the CMS mandate.				Description: Facility maintains eight additional hours of registered nurse (RN) staffing coverage per day, beyond the CMS mandate.				Description: Facility has a staffing recruitment and retention program that includes a self-directed plan and monitoring outcomes.			
Month	Met	Month	Met	Month	Met	Month	Met	Month	Met	Month	Met
Sep 2022	YES	Mar 2023	YES	Sep 2022	YES	Mar 2023	YES	Sep 2022	YES	Mar 2023	YES
Oct 2022	YES	Apr 2023	YES	Oct 2022	YES	Apr 2023	YES	Oct 2022	YES	Apr 2023	YES
Nov 2022	YES	May 2023	YES	Nov 2022	YES	May 2023	YES	Nov 2022	YES	May 2023	YES
Dec 2022	YES	Jun 2023	YES	Dec 2022	YES	Jun 2023	YES	Dec 2022	YES	Jun 2023	YES
Jan 2023	YES	Jul 2023	YES	Jan 2023	YES	Jul 2023	YES	Jan 2023	YES	Jul 2023	YES
Feb 2023	YES	Aug 2023	YES	Feb 2023	YES	Aug 2023	YES	Feb 2023	YES	Aug 2023	YES

Conditions of Participation
<b>Component 1 and Component 2 Metric 3</b>
'YES'/'NO' results indicate only whether a payment is being directed to the NF. Such monthly payments are uniform rate increases and do not reflect HHSC's final determination of whether conditions of participation have been met in that reporting period.
A NF that fails to meet all required conditions of participation will be removed from the program retroactive to the first day of the program period. HHSC will redistribute revenue paid to facilities removed from the program to the remaining facilities participating in the program period. Facilities that meet the conditions of participation will remain enrolled in the program period. For a full list of the required conditions of participation, including conditions not discussed here, please refer to 1 TAC 353.1302(e).

Note: Component 1 is a Condition of Participation.

Note: Component 2 Metric 3 is a Condition of Participation.

COMPONENT 3 - ALL FACILITIES - QUARTERLY																				
Payment Period	Metric 1: Pressure Ulcers (CMS N015.03)					Metric 2: Antipsychotics (CMS N031.03)					Metric 3: Mobility (CMS N035.03)					Metric 4: UTI (CMS N024.02)				
		NF Baseline	7.23		National Average	8.14	NF Baseline	2.79		National Average	14.49	NF Baseline	15.16		National Average	18.04	NF Baseline	0.00		National Average
	Description: Facility performs equal to better than its quarterly target for percent of high-risk residents with pressure ulcers, including unstageable pressure ulcers.					Description: Facility performs equal to better than its quarterly target for percent of residents who received antipsychotic medication.					Description: Facility performs equal to better than its quarterly target for percent of residents whose ability to move independently has worsened.					Description: Facility performs equal to better than its quarterly target for percent of residents with a urinary tract infection.				
Target	Num	Dem	Actual	Met	Target	Num	Dem	Actual	Met	Target	Num	Dem	Actual	Met	Target	Num	Dem	Actual	Met	
Qtr. 1	7.35	4.00	35.00	11.428571429	NO	2.96	0.00	48.00	0	YES	18.04	2.00	27.00	7.4074074074	YES	0.16	0.00	47.00	0	YES
Qtr. 2	7.35	2.00	33.00	6.06	YES	2.96	0.00	47.00	0.00	YES	18.04	2.00	26.00	7.69	YES	0.16	0.00	45.00	0.00	YES
Qtr. 3	7.35	3.00	37.00	8.11	NO	2.96	1.00	45.00	2.22	YES	18.04	4.00	32.00	12.50	YES	0.16	0.00	83.00	0.00	YES
Qtr. 4	7.35	2.00	34.00	5.88	YES	2.96	1.00	42.00	2.38	YES	18.04	5.00	28.00	100.00	YES	0.16	0.00	45.00	100.00	YES

Note: For Metric target fields showing "Min Data" or "Withheld", please contact the QIPP mailbox at QIPP@hhsc.state.tx.us to receive your facilities complete metric results. The metric value was redacted due to HIPAA compliance or not meeting the minimum data requirement to calculate a value.

**COMPONENT 4 - NSGO - QUARTERLY**

Payment Period	Metric 1: Pneumococcal Vaccine (CMS N020.02)					Metric 2: Influenza Vaccine (CMS N016.03)				
	Target	Num	Dem	Actual	Met	Target	Num	Dem	Actual	Met
Qtr. 1	N/A	N/A	N/A	N/A	YES	N/A	N/A	N/A	N/A	YES
Qtr. 2	N/A	N/A	N/A	N/A	NO	N/A	N/A	N/A	N/A	NO
Qtr. 3	N/A	N/A	N/A	N/A	YES	N/A	N/A	N/A	N/A	YES
Qtr. 4	98.86%	NA	NA	100.000%	YES	99.35%	NA	NA	100.000%	YES

**COMPONENT 4 - NSGO - QUARTERLY**

Month	Comp 1	Comp 2	Month	Comp 1	Comp 2	Month	Comp 1	Comp 2	Payment Period	Comp 3 (Adjusted for min-data)	Comp 4	Non-Dispersed Funds
Sep 2022	\$ 25.31	\$ 2.19	Jan 2023	\$ 25.31	\$ 2.19	May 2023	\$ 25.31	\$ 2.19	Qtr. 1	\$ 7.37	\$ 9.19	\$ 6.94
Oct 2022	\$ 25.31	\$ 2.19	Feb 2023	\$ 25.31	\$ 2.19	Jun 2023	\$ 25.31	\$ 2.19	Qtr. 2	\$ 9.83	\$ -	\$ 6.45
Nov 2022	\$ 25.31	\$ 2.19	Mar 2023	\$ 25.31	\$ 2.19	Jul 2023	\$ 25.31	\$ 2.19	Qtr. 3	\$ 7.37	\$ 9.19	\$ 5.13
Dec 2022	\$ 25.31	\$ 2.19	Apr 2023	\$ 25.31	\$ 2.19	Aug 2023	\$ 25.31	\$ 2.19	Qtr. 4	\$ 9.83	\$ 9.19	\$ 11.11

Member Months	Quarter 1			Quarter 2			Quarter 3			Quarter 4			Adjustment Period 1				Adjustment Period 2					Adj 3	Total			
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22		23	24	
Sep 2022	1,463	123	109	14	-	5	-	(4)	1	(3)	3	1	-	-	-	-	-	-	-	-	-	-	-	-	-	1,712
Oct 2022	1,504	175	25	3	(5)	4	8	2	(1)	2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1,717
Nov 2022	1,596	73	18	6	11	24	4	-	2	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1,735
Dec 2022	1,603	42	29	17	17	3	-	3	3	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1,717
Jan 2023	1,532	26	28	18	8	10	2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1,624
Feb 2023	1,535	139	22	6	22	3	(1)	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1,726
Mar 2023	1,582	70	23	39	7	(2)	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1,719
Apr 2023	1,574	44	72	-	4	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1,694
May 2023	1,518	148	22	12	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1,700
Jun 2023	1,537	91	30	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1,658
Jul 2023	1,501	113	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1,614
Aug 2023	1,471	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1,471

Member Month Count Instructions: Each quarter the scorecard will be updated with metric performance and achieved payment factor amounts. The scorecard will also calculate the payment associated with the current quarter and adjustments made to past quarters in the current quarter. The table Member Month Count reflects the actual member month case load for the selected MCO in that provider's service delivery area (SDA).

# Quality Incentive Payment Program - Year 6 (SFY23)

Quarter 4

June 2023 - August 2023

**\*\*Note: Enable Editing to use dropdowns\*\***

MCO:	All MCOs in Providers SDA	Facility Name:	SILVER SPRING	SDA:	MRSA WEST
Facility ID:	106050	Legal Entity Name:	WINNIESTOWELL HOSPITAL DISTRICT	Medicaid Contract #	1026076

*Funds Earned	QUARTER 1			QUARTER 2			QUARTER 3			QUARTER 4			Adjustment Periods			Total
	Sep 2022	Oct 2022	Nov 2022	Dec 2022	Jan 2023	Feb 2023	Mar 2023	Apr 2023	May 2023	Jun 2023	Jul 2023	Aug 2023	Adj 1	Adj 2	Adj 3	Year to Date
Component 1	\$ 41,424	\$ 46,162	\$ 49,970	\$ 45,941	\$ 45,907	\$ 49,140	\$ 49,339	\$ 48,044	\$ 46,837	\$ 46,062	\$ 47,800	\$ 47,579	\$ -	\$ -	\$ -	\$ 564,205
Component 2	\$ 10,740	\$ 11,968	\$ 12,955	\$ 11,911	\$ 11,902	\$ 12,740	\$ 12,792	\$ 12,456	\$ 12,143	\$ 11,942	\$ 12,393	\$ 12,335	\$ -	\$ -	\$ -	\$ 146,275
Component 3	\$ 53,432			\$ 41,587			\$ 55,339			\$ 54,828			\$ -	\$ -	\$ -	\$ 205,186
Component 4	\$ 49,953			\$ 1,922			\$ 49,824			\$ 50,941			\$ -	\$ -	\$ -	\$ 152,639
Qtr. Non-Dispersed Funds	\$ 39,639			\$ 34,254			\$ 30,867			\$ 60,635			\$ -	\$ -	\$ -	\$ 165,394
<b>QUARTER TOTALS</b>	\$ 316,242			\$ 255,303			\$ 317,640			\$ 344,516			\$ -	\$ -	\$ -	\$ 1,233,700

Payment Period	From Month	To Month	Estimated Scorecard Release
Quarter 1	Sep-22	Nov-22	Jan-23
Quarter 2	Dec-22	Feb-23	Apr-23
Quarter 3	Mar-23	May-23	Jul-23
Quarter 4	Jun-23	Aug-23	Oct-23
Adjustment Period 1	Sep-23	Dec-23	Jan-24
Adjustment Period 2	Jan-24	Aug-24	Sep-24
Adjustment Period 3	Sep-24	Jul-25	Aug-25

	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June	July	Aug	Total	Pay Tab	Variance
Comp 1	\$ (86.16)	\$ (86.94)	\$ (87.28)	\$ (86.28)	\$ (86.56)	\$ (87.10)	\$ (86.14)	\$ (86.24)	\$ (85.32)	\$ (83.22)	\$ (82.30)	\$ (75.80)	\$ (1,019.34)		
Comp 3	\$ 64.50	\$ 81.70	\$ 103.20	\$ 70.95	\$ 135.45	\$ 132.23	\$ 219.30	\$ 485.90	\$ 1,651.20	\$ 17,892.30	\$ 17,694.50	\$ 16,297.00	\$ 54,828.23		
Comp 4	\$ 17.37	\$ 33.10	\$ 53.08	\$ -	\$ -	\$ -	\$ 162.46	\$ 412.27	\$ 1,504.86	\$ 16,727.22	\$ 16,542.30	\$ 15,235.80	\$ 50,688.46		
Lapse	\$ 133.71	\$ 147.17	\$ 163.36	\$ 144.58	\$ 197.86	\$ 195.75	\$ 204.97	\$ 349.53	\$ 980.04	\$ 20,305.68	\$ 20,081.20	\$ 18,495.20	\$ 61,399.05		
													\$ 165,896.40	\$ 165,896.40	\$ 0.01

The tables below display the funds earned as a result of meeting a metric. The \*total earned will increase or decrease as member months are adjusted through the program year.

COMPONENT 1 - NSGO - MONTHLY			
QAPI			
Description: Facility holds a QAPI meeting each month in accordance with quarterly federal requirements.			
Month	Met	Month	Met
Sep 2022	YES	Mar 2023	YES
Oct 2022	YES	Apr 2023	YES
Nov 2022	YES	May 2023	YES
Dec 2022	YES	Jun 2023	YES
Jan 2023	YES	Jul 2023	YES
Feb 2023	YES	Aug 2023	YES

COMPONENT 2 - ALL FACILITIES - MONTHLY											
Metric 1: +4 Hours RN				Metric 2: +8 Hours RN				Metric 3: Workforce Development			
Description: Facility maintains four additional hours of registered nurse (RN) staffing coverage per day, beyond the CMS mandate.				Description: Facility maintains eight additional hours of registered nurse (RN) staffing coverage per day, beyond the CMS mandate.				Description: Facility has a staffing recruitment and retention program that includes a self-directed plan and monitoring outcomes.			
Month	Met	Month	Met	Month	Met	Month	Met	Month	Met	Month	Met
Sep 2022	YES	Mar 2023	YES	Sep 2022	YES	Mar 2023	YES	Sep 2022	YES	Mar 2023	YES
Oct 2022	YES	Apr 2023	YES	Oct 2022	YES	Apr 2023	YES	Oct 2022	YES	Apr 2023	YES
Nov 2022	YES	May 2023	YES	Nov 2022	YES	May 2023	YES	Nov 2022	YES	May 2023	YES
Dec 2022	YES	Jun 2023	YES	Dec 2022	YES	Jun 2023	YES	Dec 2022	YES	Jun 2023	YES
Jan 2023	YES	Jul 2023	YES	Jan 2023	YES	Jul 2023	YES	Jan 2023	YES	Jul 2023	YES
Feb 2023	YES	Aug 2023	YES	Feb 2023	YES	Aug 2023	YES	Feb 2023	YES	Aug 2023	YES

Conditions of Participation
<b>Component 1 and Component 2 Metric 3</b>
'YES'/'NO' results indicate only whether a payment is being directed to the NF. Such monthly payments are uniform rate increases and do not reflect HHSC's final determination of whether conditions of participation have been met in that reporting period.
A NF that fails to meet all required conditions of participation will be removed from the program retroactive to the first day of the program period. HHSC will redistribute revenue paid to facilities removed from the program to the remaining facilities participating in the program period. Facilities that meet the conditions of participation will remain enrolled in the program period. For a full list of the required conditions of participation, including conditions not discussed here, please refer to 1 TAC 353.1302(e).

Note: Component 1 is a Condition of Participation.

Note: Component 2 Metric 3 is a Condition of Participation.

COMPONENT 3 - ALL FACILITIES - QUARTERLY																				
Payment Period	Metric 1: Pressure Ulcers (CMS N015.03)					Metric 2: Antipsychotics (CMS N031.03)					Metric 3: Mobility (CMS N035.03)					Metric 4: UTI (CMS N024.02)				
	Target	Num	Dem	Actual	Met	Target	Num	Dem	Actual	Met	Target	Num	Dem	Actual	Met	Target	Num	Dem	Actual	Met
Qtr. 1	6.73	WITHHELD	WITHHELD	WITHHELD	YES	9.36	4.00	44.00	9.09	YES	18.04	6.00	35.00	17.14	YES	0.16	0.00	45.00	0.00	YES
Qtr. 2	6.73	1.00	30.00	3.33	YES	9.36	3.00	43.00	6.98	YES	18.04	7.00	33.00	21.21	NO	0.16	0.00	44.00	0.00	YES
Qtr. 3	6.73	2.00	33.00	6.06	YES	9.36	4.00	49.00	8.16	YES	18.04	6.00	38.00	15.79	YES	0.16	2.00	49.00	0.00	YES
Qtr. 4	6.73	1.00	26.00	3.85	YES	9.36	4.00	44.00	9.09	YES	18.04	5.00	36.00	98.97	YES	0.16	0.00	46.00	98.18	YES

Note: For Metric target fields showing "Min Data" or "Withheld", please contact the QIPP mailbox at QIPP@hhsc.state.tx.us to receive your facilities complete metric results. The metric value was redacted due to HIPAA compliance or not meeting the minimum data requirement to calculate a value.

**COMPONENT 4 - NSGO - QUARTERLY**

Payment Period	Metric 1: Pneumococcal Vaccine (CMS N020.02)					Metric 2: Influenza Vaccine (CMS N016.03)				
	Target	Num	Dem	Actual	Met	Target	Num	Dem	Actual	Met
Qtr. 1	N/A	N/A	N/A	N/A	YES	N/A	N/A	N/A	N/A	YES
Qtr. 2	N/A	N/A	N/A	N/A	NO	N/A	N/A	N/A	N/A	NO
Qtr. 3	N/A	N/A	N/A	N/A	YES	N/A	N/A	N/A	N/A	YES
Qtr. 4	98.86%	NA	NA	98.974%	YES	96.62%	NA	NA	98.182%	YES

**COMPONENT 4 - NSGO - QUARTERLY**

Month	Comp 1	Comp 2	Month	Comp 1	Comp 2	Month	Comp 1	Comp 2	Payment Period	Comp 3 (Adjusted for min-data)	Comp 4	Non-Dispersed Funds
Sep 2022	\$ 11.07	\$ 0.96	Jan 2023	\$ 11.07	\$ 0.96	May 2023	\$ 11.07	\$ 0.96	Qtr. 1	\$ 4.30	\$ 4.02	\$ 3.19
Oct 2022	\$ 11.07	\$ 0.96	Feb 2023	\$ 11.07	\$ 0.96	Jun 2023	\$ 11.07	\$ 0.96	Qtr. 2	\$ 3.23	\$ -	\$ 2.67
Nov 2022	\$ 11.07	\$ 0.96	Mar 2023	\$ 11.07	\$ 0.96	Jul 2023	\$ 11.07	\$ 0.96	Qtr. 3	\$ 4.30	\$ 4.02	\$ 2.35
Dec 2022	\$ 11.07	\$ 0.96	Apr 2023	\$ 11.07	\$ 0.96	Aug 2023	\$ 11.07	\$ 0.96	Qtr. 4	\$ 4.30	\$ 4.02	\$ 4.88

Member Months	Quarter 1			Quarter 2			Quarter 3			Quarter 4			Adjustment Period 1				Adjustment Period 2					Adj 3	Total			
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22		23	24	
Sep 2022	3,742	306	185	22	15	5	16	1	1	8	4	3	-	-	-	-	-	-	-	-	-	-	-	-	-	4,308
Oct 2022	3,864	351	51	20	19	16	3	4	8	7	4	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4,347
Nov 2022	3,978	188	97	61	5	6	5	10	8	6	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4,364
Dec 2022	3,889	236	110	30	14	13	9	9	4	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4,314
Jan 2023	3,779	367	93	31	16	11	18	13	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4,328
Feb 2023	3,877	338	79	20	19	15	7	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4,355
Mar 2023	3,959	236	61	25	20	6	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4,307
Apr 2023	3,970	229	71	29	13	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4,312
May 2023	3,882	286	53	45	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4,266
Jun 2023	3,714	358	89	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4,161
Jul 2023	3,797	318	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4,115
Aug 2023	3,790	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	3,790

Member Month Count Instructions: Each quarter the scorecard will be updated with metric performance and achieved payment factor amounts. The scorecard will also calculate the payment associated with the current quarter and adjustments made to past quarters in the current quarter. The table Member Month Count reflects the actual member month case load for the selected MCO in that provider's service delivery area (SDA).

# Quality Incentive Payment Program - Year 6 (SFY23)

Quarter 4

June 2023 - August 2023

**\*\*Note: Enable Editing to use dropdowns\*\***

MCO:	All MCOs in Providers SDA	Facility Name:	RED OAK HEALTH AND REHABILITATION CENTER	SDA:	DALLAS
Facility ID:	4158	Legal Entity Name:	WINNIE-STOWELL HOSPITAL DISTRICT	Medicaid Contract #	1016944

*Funds Earned	QUARTER 1			QUARTER 2			QUARTER 3			QUARTER 4			Adjustment Periods			Total
	Sep 2022	Oct 2022	Nov 2022	Dec 2022	Jan 2023	Feb 2023	Mar 2023	Apr 2023	May 2023	Jun 2023	Jul 2023	Aug 2023	Adj 1	Adj 2	Adj 3	Year to Date
Component 1	\$ 91,657	\$ 100,671	\$ 104,817	\$ 99,137	\$ 103,794	\$ 114,395	\$ 108,574	\$ 106,722	\$ 103,847	\$ 106,599	\$ 106,599	\$ 102,630	\$ -	\$ -	\$ -	\$ 1,249,441
Component 2	\$ 23,746	\$ 26,081	\$ 27,155	\$ 25,683	\$ 26,890	\$ 29,636	\$ 28,128	\$ 27,649	\$ 26,904	\$ 27,617	\$ 27,617	\$ 26,588	\$ -	\$ -	\$ -	\$ 323,693
Component 3	\$ 115,557			\$ 123,405			\$ 124,111			\$ 122,821			\$ -	\$ -	\$ -	\$ 485,894
Component 4	\$ 107,976			\$ 115,309			\$ 115,970			\$ 114,765			\$ -	\$ -	\$ -	\$ 454,020
Qtr. Non-Dispersed Funds	\$ 85,573			\$ 97,900			\$ 70,216			\$ 135,699			\$ -	\$ -	\$ -	\$ 389,388
<b>QUARTER TOTALS</b>	\$ 683,233			\$ 736,150			\$ 712,121			\$ 770,933			\$ -	\$ -	\$ -	\$ 2,902,437

Payment Period	From Month	To Month	Estimated Scorecard Release
Quarter 1	Sep-22	Nov-22	Jan-23
Quarter 2	Dec-22	Feb-23	Apr-23
Quarter 3	Mar-23	May-23	Jul-23
Quarter 4	Jun-23	Aug-23	Oct-23
Adjustment Period 1	Sep-23	Dec-23	Jan-24
Adjustment Period 2	Jan-24	Aug-24	Sep-24
Adjustment Period 3	Sep-24	Jul-25	Aug-25

	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June	July	Aug	Total	Pay Tab	Variance
Comp 1	\$ (175.50)	\$ (178.05)	\$ (180.33)	\$ (180.39)	\$ (181.26)	\$ (183.45)	\$ (182.70)	\$ (180.30)	\$ (180.63)	\$ (176.40)	\$ (172.68)	\$ (153.21)	\$ (2,124.90)		
Comp 3	\$ (6.86)	\$ 48.02	\$ 123.48	\$ 130.34	\$ 212.66	\$ 356.72	\$ 487.06	\$ 1,468.04	\$ 5,145.00	\$ 40,336.80	\$ 39,486.16	\$ 35,034.02	\$ 122,821.44		
Comp 4	\$ (64.92)	\$ (14.41)	\$ 55.45	\$ 61.85	\$ 138.60	\$ 272.69	\$ 394.92	\$ 1,313.78	\$ 4,754.79	\$ 37,690.80	\$ 36,895.96	\$ 32,735.87	\$ 114,235.38		
Lapse	\$ 228.96	\$ 272.68	\$ 331.16	\$ 343.50	\$ 409.70	\$ 526.44	\$ 449.66	\$ 984.94	\$ 3,000.63	\$ 46,040.40	\$ 45,069.48	\$ 39,987.81	\$ 137,645.36		
													\$ 372,577.28	\$ 372,577.28	\$ -

The tables below display the funds earned as a result of meeting a metric. The \*total earned will increase or decrease as member months are adjusted through the program year.

COMPONENT 1 - NSGO - MONTHLY			
QAPI			
Description: Facility holds a QAPI meeting each month in accordance with quarterly federal requirements.			
Month	Met	Month	Met
Sep 2022	YES	Mar 2023	YES
Oct 2022	YES	Apr 2023	YES
Nov 2022	YES	May 2023	YES
Dec 2022	YES	Jun 2023	YES
Jan 2023	YES	Jul 2023	YES
Feb 2023	YES	Aug 2023	YES

COMPONENT 2 - ALL FACILITIES - MONTHLY											
Metric 1: +4 Hours RN				Metric 2: +8 Hours RN				Metric 3: Workforce Development			
Description: Facility maintains four additional hours of registered nurse (RN) staffing coverage per day, beyond the CMS mandate.				Description: Facility maintains eight additional hours of registered nurse (RN) staffing coverage per day, beyond the CMS mandate.				Description: Facility has a staffing recruitment and retention program that includes a self-directed plan and monitoring outcomes.			
Month	Met	Month	Met	Month	Met	Month	Met	Month	Met	Month	Met
Sep 2022	YES	Mar 2023	YES	Sep 2022	YES	Mar 2023	YES	Sep 2022	YES	Mar 2023	YES
Oct 2022	YES	Apr 2023	YES	Oct 2022	YES	Apr 2023	YES	Oct 2022	YES	Apr 2023	YES
Nov 2022	YES	May 2023	YES	Nov 2022	YES	May 2023	YES	Nov 2022	YES	May 2023	YES
Dec 2022	YES	Jun 2023	YES	Dec 2022	YES	Jun 2023	YES	Dec 2022	YES	Jun 2023	YES
Jan 2023	YES	Jul 2023	YES	Jan 2023	YES	Jul 2023	YES	Jan 2023	YES	Jul 2023	YES
Feb 2023	YES	Aug 2023	YES	Feb 2023	YES	Aug 2023	YES	Feb 2023	YES	Aug 2023	YES

Conditions of Participation
<b>Component 1 and Component 2 Metric 3</b>
'YES'/'NO' results indicate only whether a payment is being directed to the NF. Such monthly payments are uniform rate increases and do not reflect HHSC's final determination of whether conditions of participation have been met in that reporting period.
A NF that fails to meet all required conditions of participation will be removed from the program retroactive to the first day of the program period. HHSC will redistribute revenue paid to facilities removed from the program to the remaining facilities participating in the program period. Facilities that meet the conditions of participation will remain enrolled in the program period. For a full list of the required conditions of participation, including conditions not discussed here, please refer to 1 TAC 353.1302(e).

Note: Component 1 is a Condition of Participation.

Note: Component 2 Metric 3 is a Condition of Participation.

COMPONENT 3 - ALL FACILITIES - QUARTERLY																				
Payment Period	Metric 1: Pressure Ulcers (CMS N015.03)					Metric 2: Antipsychotics (CMS N031.03)					Metric 3: Mobility (CMS N035.03)					Metric 4: UTI (CMS N024.02)				
		NF Baseline	8.97		National Average	8.14	NF Baseline	13.55		National Average	14.49	NF Baseline	24.03		National Average	18.04	NF Baseline	0.00		National Average
	Description: Facility performs equal to better than its quarterly target for percent of high-risk residents with pressure ulcers, including unstageable pressure ulcers.					Description: Facility performs equal to better than its quarterly target for percent of residents who received antipsychotic medication.					Description: Facility performs equal to better than its quarterly target for percent of residents whose ability to move independently has worsened.					Description: Facility performs equal to better than its quarterly target for percent of residents with a urinary tract infection.				
Target	Num	Dem	Actual	Met	Target	Num	Dem	Actual	Met	Target	Num	Dem	Actual	Met	Target	Num	Dem	Actual	Met	
Qtr. 1	8.53	3.00	56.00	5.36	YES	13.73	0.00	71.00	0.00	YES	22.82	2.00	68.00	2.94	YES	0.16	0.00	88.00	0.00	YES
Qtr. 2	8.14	0.00	57.00	0.00	YES	13.73	4.00	87.00	4.60	YES	21.62	0.00	67.00	0.00	YES	0.16	0.00	89.00	0.00	YES
Qtr. 3	8.14	0.00	55.00	0.00	YES	13.73	2.00	88.00	2.27	YES	20.42	2.00	65.00	3.08	YES	0.16	0.00	53.00	0.00	YES
Qtr. 4	8.14	1.00	53.00	1.89	YES	13.73	2.00	94.00	2.13	YES	19.22	4.00	71.00	98.88	YES	0.16	0.00	93.00	100.00	YES

Note: For Metric target fields showing "Min Data" or "Withheld", please contact the QIPP mailbox at QIPP@hhsc.state.tx.us to receive your facilities complete metric results. The metric value was redacted due to HIPAA compliance or not meeting the minimum data requirement to calculate a value.

**COMPONENT 4 - NSGO - QUARTERLY**

Payment Period	Metric 1: Pneumococcal Vaccine (CMS N020.02)					Metric 2: Influenza Vaccine (CMS N016.03)				
	Target	Num	Dem	Actual	Met	Target	Num	Dem	Actual	Met
Qtr. 1	N/A	N/A	N/A	N/A	YES	N/A	N/A	N/A	N/A	YES
Qtr. 2	N/A	N/A	N/A	N/A	YES	N/A	N/A	N/A	N/A	YES
Qtr. 3	N/A	N/A	N/A	N/A	YES	N/A	N/A	N/A	N/A	YES
Qtr. 4	92.57%	NA	NA	98.880%	YES	95.43%	NA	NA	100.000%	YES

**COMPONENT 4 - NSGO - QUARTERLY**

Month	Comp 1	Comp 2	Month	Comp 1	Comp 2	Month	Comp 1	Comp 2	Payment Period	Comp 3 (Adjusted for min-data)	Comp 4	Non-Dispersed Funds
Sep 2022	\$ 17.64	\$ 1.52	Jan 2023	\$ 17.64	\$ 1.52	May 2023	\$ 17.64	\$ 1.52	Qtr. 1	\$ 6.86	\$ 6.41	\$ 5.08
Oct 2022	\$ 17.64	\$ 1.52	Feb 2023	\$ 17.64	\$ 1.52	Jun 2023	\$ 17.64	\$ 1.52	Qtr. 2	\$ 6.86	\$ 6.41	\$ 5.46
Nov 2022	\$ 17.64	\$ 1.52	Mar 2023	\$ 17.64	\$ 1.52	Jul 2023	\$ 17.64	\$ 1.52	Qtr. 3	\$ 6.86	\$ 6.41	\$ 3.79
Dec 2022	\$ 17.64	\$ 1.52	Apr 2023	\$ 17.64	\$ 1.52	Aug 2023	\$ 17.64	\$ 1.52	Qtr. 4	\$ 6.86	\$ 6.41	\$ 7.83

Member Months	Quarter 1			Quarter 2			Quarter 3			Quarter 4			Adjustment Period 1				Adjustment Period 2					Adj 3	Total		
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22		23	24
Sep 2022	5,196	396	141	41	28	32	15	(2)	4	1	(2)	-	-	-	-	-	-	-	-	-	-	-	-	-	5,850
Oct 2022	5,311	423	69	34	66	13	3	9	6	(2)	3	-	-	-	-	-	-	-	-	-	-	-	-	-	5,935
Nov 2022	5,378	324	135	113	20	18	5	16	3	(1)	-	-	-	-	-	-	-	-	-	-	-	-	-	-	6,011
Dec 2022	5,186	493	246	44	25	-	10	3	6	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	6,013
Jan 2023	5,194	651	108	35	23	22	5	4	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	6,042
Feb 2023	5,377	509	150	27	32	10	10	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	6,115
Mar 2023	5,446	445	128	43	13	15	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	6,090
Apr 2023	5,376	420	125	60	29	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	6,010
May 2023	5,271	547	165	38	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	6,021
Jun 2023	5,241	497	142	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	5,880
Jul 2023	5,291	465	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	5,756
Aug 2023	5,107	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	5,107

Member Month Count Instructions: Each quarter the scorecard will be updated with metric performance and achieved payment factor amounts. The scorecard will also calculate the payment associated with the current quarter and adjustments made to past quarters in the current quarter. The table Member Month Count reflects the actual member month case load for the selected MCO in that provider's service delivery area (SDA).



# Quality Incentive Payment Program - Year 6 (SFY23)

Quarter 4

June 2023 - August 2023

**\*\*Note: Enable Editing to use dropdowns\*\***

<b>MCO:</b>	<b>All MCOs in Providers SDA</b>	<b>Facility Name:</b>	<b>MISSION NURSING AND REHABILITATION CENTER</b>	<b>SDA:</b>	<b>HIDALGO</b>
<b>Facility ID:</b>	<b>5255</b>	<b>Legal Entity Name:</b>	<b>WINNIESTOWELL HOSPITAL DISTRICT</b>	<b>Medicaid Contract #</b>	<b>1018970</b>

*Funds Earned	QUARTER 1			QUARTER 2			QUARTER 3			QUARTER 4			Adjustment Periods			Total
	Sep 2022	Oct 2022	Nov 2022	Dec 2022	Jan 2023	Feb 2023	Mar 2023	Apr 2023	May 2023	Jun 2023	Jul 2023	Aug 2023	Adj 1	Adj 2	Adj 3	
Component 1	\$ 73,338	\$ 84,278	\$ 98,092	\$ 98,092	\$ 87,880	\$ 91,515	\$ 90,888	\$ 88,541	\$ 88,244	\$ 89,235	\$ 90,326	\$ 100,340	\$ -	\$ -	\$ -	\$ 1,080,768
Component 2	\$ 18,995	\$ 21,828	\$ 25,406	\$ 25,406	\$ 22,761	\$ 23,703	\$ 23,540	\$ 22,932	\$ 22,855	\$ 23,112	\$ 23,394	\$ 25,988	\$ -	\$ -	\$ -	\$ 279,921
Component 3	\$ 99,343			\$ 107,805			\$ 103,991			\$ 108,742			\$ -	\$ -	\$ -	\$ 419,881
Component 4	\$ 92,844			\$ 6,528			\$ 92,940			\$ 100,392			\$ -	\$ -	\$ -	\$ 292,704
Qtr. Non-Dispersed Funds	\$ 73,656			\$ 71,921			\$ 57,651			\$ 118,588			\$ -	\$ -	\$ -	\$ 321,815
<b>QUARTER TOTALS</b>	\$ 587,780			\$ 535,611			\$ 591,581			\$ 680,117			\$ -	\$ -	\$ -	\$ 2,395,089

Payment Period	From Month	To Month	Estimated Scorecard Release
Quarter 1	Sep-22	Nov-22	Jan-23
Quarter 2	Dec-22	Feb-23	Apr-23
Quarter 3	Mar-23	May-23	Jul-23
Quarter 4	Jun-23	Aug-23	Oct-23
Adjustment Period 1	Sep-23	Dec-23	Jan-24
Adjustment Period 2	Jan-24	Aug-24	Sep-24
Adjustment Period 3	Sep-24	Jul-25	Aug-25

	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June	July	Aug	Total	Pay Tab	Variance
<b>Comp 1</b>	\$ (139.30)	\$ (138.60)	\$ (140.95)	\$ (138.95)	\$ (138.45)	\$ (138.05)	\$ (139.05)	\$ (138.05)	\$ (136.45)	\$ (136.60)	\$ (131.45)	\$ (119.15)	\$ (1,635.05)		
<b>Comp 3</b>	\$ 25.68	\$ 77.04	\$ 128.40	\$ 141.24	\$ 462.24	\$ 719.04	\$ 1,142.76	\$ 2,311.20	\$ 4,301.40	\$ 35,078.88	\$ 33,756.36	\$ 30,597.72	\$ 108,741.96		
<b>Comp 4</b>	\$ (31.68)	\$ 16.68	\$ 63.82	\$ -	\$ -	\$ -	\$ 1,014.16	\$ 2,108.38	\$ 3,972.12	\$ 32,784.00	\$ 31,548.00	\$ 28,596.00	\$ 100,071.48		
<b>Lapse</b>	\$ 213.92	\$ 250.74	\$ 291.83	\$ 259.58	\$ 469.98	\$ 638.30	\$ 760.27	\$ 1,394.45	\$ 2,474.75	\$ 39,969.16	\$ 38,462.27	\$ 34,863.29	\$ 120,048.54		
													\$ 327,226.93	\$ 327,226.93	\$ -

The tables below display the funds earned as a result of meeting a metric. The \*total earned will increase or decrease as member months are adjusted through the program year.

COMPONENT 1 - NSGO - MONTHLY			
QAPI			
Description: Facility holds a QAPI meeting each month in accordance with quarterly federal requirements.			
Month	Met	Month	Met
Sep 2022	YES	Mar 2023	YES
Oct 2022	YES	Apr 2023	YES
Nov 2022	YES	May 2023	YES
Dec 2022	YES	Jun 2023	YES
Jan 2023	YES	Jul 2023	YES
Feb 2023	YES	Aug 2023	YES

COMPONENT 2 - ALL FACILITIES - MONTHLY											
Metric 1: +4 Hours RN				Metric 2: +8 Hours RN				Metric 3: Workforce Development			
Description: Facility maintains four additional hours of registered nurse (RN) staffing coverage per day, beyond the CMS mandate.				Description: Facility maintains eight additional hours of registered nurse (RN) staffing coverage per day, beyond the CMS mandate.				Description: Facility has a staffing recruitment and retention program that includes a self-directed plan and monitoring outcomes.			
Month	Met	Month	Met	Month	Met	Month	Met	Month	Met	Month	Met
Sep 2022	YES	Mar 2023	YES	Sep 2022	YES	Mar 2023	YES	Sep 2022	YES	Mar 2023	YES
Oct 2022	YES	Apr 2023	YES	Oct 2022	YES	Apr 2023	YES	Oct 2022	YES	Apr 2023	YES
Nov 2022	YES	May 2023	YES	Nov 2022	YES	May 2023	YES	Nov 2022	YES	May 2023	YES
Dec 2022	YES	Jun 2023	YES	Dec 2022	YES	Jun 2023	YES	Dec 2022	YES	Jun 2023	YES
Jan 2023	YES	Jul 2023	YES	Jan 2023	YES	Jul 2023	YES	Jan 2023	YES	Jul 2023	YES
Feb 2023	YES	Aug 2023	YES	Feb 2023	YES	Aug 2023	YES	Feb 2023	YES	Aug 2023	YES

Conditions of Participation
<b>Component 1 and Component 2 Metric 3</b>
'YES'/'NO' results indicate only whether a payment is being directed to the NF. Such monthly payments are uniform rate increases and do not reflect HHSC's final determination of whether conditions of participation have been met in that reporting period.
A NF that fails to meet all required conditions of participation will be removed from the program retroactive to the first day of the program period. HHSC will redistribute revenue paid to facilities removed from the program to the remaining facilities participating in the program period. Facilities that meet the conditions of participation will remain enrolled in the program period. For a full list of the required conditions of participation, including conditions not discussed here, please refer to 1 TAC 353.1302(e).

Note: Component 1 is a Condition of Participation.

Note: Component 2 Metric 3 is a Condition of Participation.

COMPONENT 3 - ALL FACILITIES - QUARTERLY																				
Payment Period	Metric 1: Pressure Ulcers (CMS N015.03)					Metric 2: Antipsychotics (CMS N031.03)					Metric 3: Mobility (CMS N035.03)					Metric 4: UTI (CMS N024.02)				
		NF Baseline	9.40		National Average	8.14	NF Baseline	10.26		National Average	14.49	NF Baseline	16.97		National Average	18.04	NF Baseline	0.72		National Average
	Description: Facility performs equal to better than its quarterly target for percent of high-risk residents with pressure ulcers, including unstageable pressure ulcers.					Description: Facility performs equal to better than its quarterly target for percent of residents who received antipsychotic medication.					Description: Facility performs equal to better than its quarterly target for percent of residents whose ability to move independently has worsened.					Description: Facility performs equal to better than its quarterly target for percent of residents with a urinary tract infection.				
Target	Num	Dem	Actual	Met	Target	Num	Dem	Actual	Met	Target	Num	Dem	Actual	Met	Target	Num	Dem	Actual	Met	
Qtr. 1	8.93	4.00	55.00	7.27	YES	10.43	5.00	61.00	8.20	YES	18.04	4.00	50.00	8.00	YES	0.88	0.00	65.00	0.00	YES
Qtr. 2	8.46	2.00	54.00	3.70	YES	10.43	5.00	64.00	7.81	YES	18.04	6.00	49.00	12.24	YES	0.88	0.00	69.00	0.00	YES
Qtr. 3	8.14	4.00	54.00	7.41	YES	10.43	5.00	65.00	7.69	YES	18.04	8.00	51.00	15.69	YES	0.88	2.00	62.00	0.00	YES
Qtr. 4	8.14	2.00	59.00	3.39	YES	10.43	5.00	63.00	7.94	YES	18.04	3.00	43.00	100.00	YES	0.88	0.00	70.00	100.00	YES

Note: For Metric target fields showing "Min Data" or "Withheld", please contact the QIPP mailbox at QIPP@hhsc.state.tx.us to receive your facilities complete metric results. The metric value was redacted due to HIPAA compliance or not meeting the minimum data requirement to calculate a value.



**COMPONENT 4 - NSGO - QUARTERLY**

Payment Period	Metric 1: Pneumococcal Vaccine (CMS N020.02)					Metric 2: Influenza Vaccine (CMS N016.03)				
	Target	Num	Dem	Actual	Met	Target	Num	Dem	Actual	Met
Qtr. 1	N/A	N/A	N/A	N/A	YES	N/A	N/A	N/A	N/A	YES
Qtr. 2	N/A	N/A	N/A	N/A	NO	N/A	N/A	N/A	N/A	NO
Qtr. 3	N/A	N/A	N/A	N/A	YES	N/A	N/A	N/A	N/A	YES
Qtr. 4	58.11%	NA	NA	100.000%	YES	98.15%	NA	NA	100.000%	YES

**COMPONENT 4 - NSGO - QUARTERLY**

Month	Comp 1	Comp 2	Month	Comp 1	Comp 2	Month	Comp 1	Comp 2	Payment Period	Comp 3 (Adjusted for min-data)	Comp 4	Non-Dispersed Funds
Sep 2022	\$ 33.05	\$ 2.85	Jan 2023	\$ 33.05	\$ 2.85	May 2023	\$ 33.05	\$ 2.85	Qtr. 1	\$ 12.84	\$ 12.00	\$ 9.52
Oct 2022	\$ 33.05	\$ 2.85	Feb 2023	\$ 33.05	\$ 2.85	Jun 2023	\$ 33.05	\$ 2.85	Qtr. 2	\$ 12.84	\$ -	\$ 8.50
Nov 2022	\$ 33.05	\$ 2.85	Mar 2023	\$ 33.05	\$ 2.85	Jul 2023	\$ 33.05	\$ 2.85	Qtr. 3	\$ 12.84	\$ 12.00	\$ 7.03
Dec 2022	\$ 33.05	\$ 2.85	Apr 2023	\$ 33.05	\$ 2.85	Aug 2023	\$ 33.05	\$ 2.85	Qtr. 4	\$ 12.84	\$ 12.00	\$ 14.63

Member Months	Quarter 1			Quarter 2			Quarter 3			Quarter 4			Adjustment Period 1				Adjustment Period 2					Adj 3	Total		
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22		23	24
Sep 2022	2,219	232	176	100	16	16	10	11	4	1	3	(2)	-	-	-	-	-	-	-	-	-	-	-	-	2,786
Oct 2022	2,318	289	111	16	14	6	11	1	1	6	(1)	-	-	-	-	-	-	-	-	-	-	-	-	-	2,772
Nov 2022	2,503	185	65	21	12	14	9	5	4	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	2,819
Dec 2022	2,572	93	50	25	27	1	(2)	6	7	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	2,779
Jan 2023	2,469	166	47	28	23	2	5	29	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	2,769
Feb 2023	2,502	138	40	25	8	6	42	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	2,761
Mar 2023	2,512	108	72	16	17	56	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	2,781
Apr 2023	2,440	141	66	46	68	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	2,761
May 2023	2,394	188	64	83	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	2,729
Jun 2023	2,415	180	137	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	2,732
Jul 2023	2,396	233	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	2,629
Aug 2023	2,383	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	2,383

Member Month Count Instructions: Each quarter the scorecard will be updated with metric performance and achieved payment factor amounts. The scorecard will also calculate the payment associated with the current quarter and adjustments made to past quarters in the current quarter. The table Member Month Count reflects the actual member month case load for the selected MCO in that provider's service delivery area (SDA).

# Quality Incentive Payment Program - Year 6 (SFY23)

Quarter 4

June 2023 - August 2023

**\*\*Note: Enable Editing to use dropdowns\*\***

MCO:	All MCOs in Providers SDA	Facility Name:	STEPHENVILLE REHABILITATION AND WELLNESS CENTER	SDA:	MRSA CENTRAL
Facility ID:	4053	Legal Entity Name:	WINNIESTOWELL HOSPITAL DISTRICT	Medicaid Contract #	1018974

*Funds Earned	QUARTER 1			QUARTER 2			QUARTER 3			QUARTER 4			Adjustment Periods			Total
	Sep 2022	Oct 2022	Nov 2022	Dec 2022	Jan 2023	Feb 2023	Mar 2023	Apr 2023	May 2023	Jun 2023	Jul 2023	Aug 2023	Adj 1	Adj 2	Adj 3	Year to Date
Component 1	\$ 51,470	\$ 56,460	\$ 60,053	\$ 58,836	\$ 57,470	\$ 60,336	\$ 57,470	\$ 59,519	\$ 57,856	\$ 58,316	\$ 58,182	\$ 58,316	\$ -	\$ -	\$ -	\$ 694,282
Component 2	\$ 13,344	\$ 14,638	\$ 15,569	\$ 15,254	\$ 14,900	\$ 15,643	\$ 14,900	\$ 15,431	\$ 15,000	\$ 15,119	\$ 15,084	\$ 15,119	\$ -	\$ -	\$ -	\$ 179,999
Component 3	\$ 65,270			\$ 52,213			\$ 51,033			\$ 50,994			\$ -	\$ -	\$ -	\$ 219,510
Component 4	\$ 60,972			\$ 2,754			\$ 61,608			\$ 63,160			\$ -	\$ -	\$ -	\$ 188,494
Qtr. Non-Dispersed Funds	\$ 48,415			\$ 43,056			\$ 35,824			\$ 71,713			\$ -	\$ -	\$ -	\$ 199,008
<b>QUARTER TOTALS</b>	\$ 386,192			\$ 320,459			\$ 368,638			\$ 406,003			\$ -	\$ -	\$ -	\$ 1,481,292

Payment Period	From Month	To Month	Estimated Scorecard Release
Quarter 1	Sep-22	Nov-22	Jan-23
Quarter 2	Dec-22	Feb-23	Apr-23
Quarter 3	Mar-23	May-23	Jul-23
Quarter 4	Jun-23	Aug-23	Oct-23
Adjustment Period 1	Sep-23	Dec-23	Jan-24
Adjustment Period 2	Jan-24	Aug-24	Sep-24
Adjustment Period 3	Sep-24	Jul-25	Aug-25

	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June	July	Aug	Total	Pay Tab	Variance
Comp 1	\$ (119.01)	\$ (118.77)	\$ (119.64)	\$ (118.95)	\$ (117.09)	\$ (117.42)	\$ (118.41)	\$ (119.04)	\$ (118.05)	\$ (116.97)	\$ (114.06)	\$ (105.18)	\$ (1,402.59)		
Comp 3	\$ 63.47	\$ 51.93	\$ 86.55	\$ 73.57	\$ 77.90	\$ 82.22	\$ 220.70	\$ 510.65	\$ 1,328.54	\$ 16,872.92	\$ 16,453.16	\$ 15,172.22	\$ 50,993.82		
Comp 4	\$ 19.73	\$ 9.01	\$ 41.12	\$ -	\$ -	\$ -	\$ 235.93	\$ 597.52	\$ 1,618.45	\$ 21,015.61	\$ 20,492.78	\$ 18,897.34	\$ 62,927.49		
Lapse	\$ 165.76	\$ 157.02	\$ 183.39	\$ 179.47	\$ 181.17	\$ 185.06	\$ 270.90	\$ 471.86	\$ 1,035.98	\$ 24,329.76	\$ 23,724.48	\$ 21,877.44	\$ 72,762.29		
													\$ 185,281.01	\$ 185,281.01	\$ 0.00

The tables below display the funds earned as a result of meeting a metric. The \*total earned will increase or decrease as member months are adjusted through the program year.

COMPONENT 1 - NSGO - MONTHLY			
QAPI			
Description: Facility holds a QAPI meeting each month in accordance with quarterly federal requirements.			
Month	Met	Month	Met
Sep 2022	YES	Mar 2023	YES
Oct 2022	YES	Apr 2023	YES
Nov 2022	YES	May 2023	YES
Dec 2022	YES	Jun 2023	YES
Jan 2023	YES	Jul 2023	YES
Feb 2023	YES	Aug 2023	YES

COMPONENT 2 - ALL FACILITIES - MONTHLY											
Metric 1: +4 Hours RN				Metric 2: +8 Hours RN				Metric 3: Workforce Development			
Description: Facility maintains four additional hours of registered nurse (RN) staffing coverage per day, beyond the CMS mandate.				Description: Facility maintains eight additional hours of registered nurse (RN) staffing coverage per day, beyond the CMS mandate.				Description: Facility has a staffing recruitment and retention program that includes a self-directed plan and monitoring outcomes.			
Month	Met	Month	Met	Month	Met	Month	Met	Month	Met	Month	Met
Sep 2022	YES	Mar 2023	YES	Sep 2022	YES	Mar 2023	YES	Sep 2022	YES	Mar 2023	YES
Oct 2022	YES	Apr 2023	YES	Oct 2022	YES	Apr 2023	YES	Oct 2022	YES	Apr 2023	YES
Nov 2022	YES	May 2023	YES	Nov 2022	YES	May 2023	YES	Nov 2022	YES	May 2023	YES
Dec 2022	YES	Jun 2023	YES	Dec 2022	YES	Jun 2023	YES	Dec 2022	YES	Jun 2023	YES
Jan 2023	YES	Jul 2023	YES	Jan 2023	YES	Jul 2023	YES	Jan 2023	YES	Jul 2023	YES
Feb 2023	YES	Aug 2023	YES	Feb 2023	YES	Aug 2023	YES	Feb 2023	YES	Aug 2023	YES

Conditions of Participation
Component 1 and Component 2 Metric 3
'YES'/'NO' results indicate only whether a payment is being directed to the NF. Such monthly payments are uniform rate increases and do not reflect HHSC's final determination of whether conditions of participation have been met in that reporting period.
A NF that fails to meet all required conditions of participation will be removed from the program retroactive to the first day of the program period. HHSC will redistribute revenue paid to facilities removed from the program to the remaining facilities participating in the program period. Facilities that meet the conditions of participation will remain enrolled in the program period. For a full list of the required conditions of participation, including conditions not discussed here, please refer to 1 TAC 353.1302(e).

Note: Component 1 is a Condition of Participation.

Note: Component 2 Metric 3 is a Condition of Participation.

COMPONENT 3 - ALL FACILITIES - QUARTERLY																				
Payment Period	Metric 1: Pressure Ulcers (CMS N015.03)					Metric 2: Antipsychotics (CMS N031.03)					Metric 3: Mobility (CMS N035.03)					Metric 4: UTI (CMS N024.02)				
	Target	Num	Dem	Actual	Met	Target	Num	Dem	Actual	Met	Target	Num	Dem	Actual	Met	Target	Num	Dem	Actual	Met
Qtr. 1	6.19	1.00	34.00	2.94	YES	14.14	8.00	61.00	13.11	YES	18.04	4.00	39.00	10.26	YES	1.48	0.00	49.00	0.00	YES
Qtr. 2	6.19	0.00	35.00	0.00	YES	14.14	10.00	59.00	16.95	NO	18.04	6.00	46.00	13.04	YES	1.48	0.00	56.00	0.00	YES
Qtr. 3	6.19	1.00	40.00	2.50	YES	14.14	10.00	69.00	14.49	NO	18.04	6.00	46.00	13.04	YES	1.48	1.00	32.00	0.00	YES
Qtr. 4	6.19	1.00	51.00	1.96	YES	14.14	11.00	73.00	15.07	NO	18.04	6.00	53.00	99.60	YES	1.48	0.00	71.00	98.46	YES

Note: For Metric target fields showing "Min Data" or "Withheld", please contact the QIPP mailbox at QIPP@hhsc.state.tx.us to receive your facilities complete metric results. The metric value was redacted due to HIPAA compliance or not meeting the minimum data requirement to calculate a value.

**COMPONENT 4 - NSGO - QUARTERLY**

Payment Period	Metric 1: Pneumococcal Vaccine (CMS N020.02)					Metric 2: Influenza Vaccine (CMS N016.03)				
	Target	Num	Dem	Actual	Met	Target	Num	Dem	Actual	Met
Qtr. 1	N/A	N/A	N/A	N/A	YES	N/A	N/A	N/A	N/A	YES
Qtr. 2	N/A	N/A	N/A	N/A	NO	N/A	N/A	N/A	N/A	NO
Qtr. 3	N/A	N/A	N/A	N/A	YES	N/A	N/A	N/A	N/A	YES
Qtr. 4	92.70%	NA	NA	99.598%	YES	95.43%	NA	NA	98.462%	YES

**COMPONENT 4 - NSGO - QUARTERLY**

Month	Comp 1	Comp 2	Month	Comp 1	Comp 2	Month	Comp 1	Comp 2	Payment Period	Comp 3 (Adjusted for min-data)	Comp 4	Non-Dispersed Funds
Sep 2022	\$ 14.85	\$ 1.28	Jan 2023	\$ 14.85	\$ 1.28	May 2023	\$ 14.85	\$ 1.28	Qtr. 1	\$ 5.77	\$ 5.39	\$ 4.28
Oct 2022	\$ 14.85	\$ 1.28	Feb 2023	\$ 14.85	\$ 1.28	Jun 2023	\$ 14.85	\$ 1.28	Qtr. 2	\$ 4.33	\$ -	\$ 3.59
Nov 2022	\$ 14.85	\$ 1.28	Mar 2023	\$ 14.85	\$ 1.28	Jul 2023	\$ 14.85	\$ 1.28	Qtr. 3	\$ 4.33	\$ 5.39	\$ 3.02
Dec 2022	\$ 14.85	\$ 1.28	Apr 2023	\$ 14.85	\$ 1.28	Aug 2023	\$ 14.85	\$ 1.28	Qtr. 4	\$ 4.33	\$ 5.39	\$ 6.24

Member Months	Quarter 1			Quarter 2			Quarter 3			Quarter 4			Adjustment Period 1				Adjustment Period 2					Adj 3	Total		
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22		23	24
Sep 2022	3,466	277	125	41	24	8	12	2	1	2	4	5	-	-	-	-	-	-	-	-	-	-	-	-	3,967
Oct 2022	3,525	276	83	31	16	13	1	5	-	3	6	-	-	-	-	-	-	-	-	-	-	-	-	-	3,959
Nov 2022	3,643	185	87	36	13	5	4	5	5	5	-	-	-	-	-	-	-	-	-	-	-	-	-	-	3,988
Dec 2022	3,653	172	88	21	7	7	12	1	4	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	3,965
Jan 2023	3,556	256	49	15	9	7	1	10	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	3,903
Feb 2023	3,659	168	52	16	12	-	7	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	3,914
Mar 2023	3,594	246	56	27	10	14	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	3,947
Apr 2023	3,680	170	88	12	18	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	3,968
May 2023	3,628	231	51	25	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	3,935
Jun 2023	3,543	273	83	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	3,899
Jul 2023	3,558	244	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	3,802
Aug 2023	3,506	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	3,506

Member Month Count Instructions: Each quarter the scorecard will be updated with metric performance and achieved payment factor amounts. The scorecard will also calculate the payment associated with the current quarter and adjustments made to past quarters in the current quarter. The table Member Month Count reflects the actual member month case load for the selected MCO in that provider's service delivery area (SDA).

# Quality Incentive Payment Program - Year 6 (SFY23)

Quarter 4

June 2023 - August 2023

**\*\*Note: Enable Editing to use dropdowns\*\***

MCO:	All MCOs in Providers SDA	Facility Name:	HEWITT NURSING AND REHABILITATION	SDA:	MRSA CENTRAL
Facility ID:	103743	Legal Entity Name:	WINNIESTOWELL HOSPITAL DISTRICT	Medicaid Contract #	1019736

*Funds Earned	QUARTER 1			QUARTER 2			QUARTER 3			QUARTER 4			Adjustment Periods			Total
	Sep 2022	Oct 2022	Nov 2022	Dec 2022	Jan 2023	Feb 2023	Mar 2023	Apr 2023	May 2023	Jun 2023	Jul 2023	Aug 2023	Adj 1	Adj 2	Adj 3	Year to Date
Component 1	\$ 44,538	\$ 48,856	\$ 51,965	\$ 50,912	\$ 49,730	\$ 52,210	\$ 49,730	\$ 51,503	\$ 50,064	\$ 50,462	\$ 50,346	\$ 50,462	\$ -	\$ -	\$ -	\$ 600,776
Component 2	\$ 11,542	\$ 12,661	\$ 13,467	\$ 13,193	\$ 12,887	\$ 13,530	\$ 12,887	\$ 13,347	\$ 12,974	\$ 13,077	\$ 13,047	\$ 13,077	\$ -	\$ -	\$ -	\$ 155,687
Component 3	\$ 56,447			\$ 59,356			\$ 44,563			\$ 44,168			\$ -	\$ -	\$ -	\$ 204,534
Component 4	\$ 52,827			\$ 55,550			\$ 54,985			\$ 54,975			\$ -	\$ -	\$ -	\$ 218,337
Qtr. Non-Dispersed Funds	\$ 41,854			\$ 47,199			\$ 31,490			\$ 62,114			\$ -	\$ -	\$ -	\$ 182,657
<b>QUARTER TOTALS</b>	\$ 334,156			\$ 354,566			\$ 321,541			\$ 351,728			\$ -	\$ -	\$ -	\$ 1,361,991

Payment Period	From Month	To Month	Estimated Scorecard Release
Quarter 1	Sep-22	Nov-22	Jan-23
Quarter 2	Dec-22	Feb-23	Apr-23
Quarter 3	Mar-23	May-23	Jul-23
Quarter 4	Jun-23	Aug-23	Oct-23
Adjustment Period 1	Sep-23	Dec-23	Jan-24
Adjustment Period 2	Jan-24	Aug-24	Sep-24
Adjustment Period 3	Sep-24	Jul-25	Aug-25

	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June	July	Aug	Total	Pay Tab	Variance
Comp 1	\$ (119.01)	\$ (118.77)	\$ (119.64)	\$ (118.95)	\$ (117.09)	\$ (117.42)	\$ (118.41)	\$ (119.04)	\$ (118.05)	\$ (116.97)	\$ (114.06)	\$ (105.18)	\$ (1,402.59)		
Comp 3	\$ 54.89	\$ 44.91	\$ 74.85	\$ 84.83	\$ 89.82	\$ 94.81	\$ 190.87	\$ 441.62	\$ 1,148.95	\$ 14,592.01	\$ 14,228.99	\$ 13,121.21	\$ 44,167.74		
Comp 4	\$ 11.81	\$ 2.53	\$ 30.32	\$ 39.91	\$ 45.21	\$ 49.78	\$ 199.21	\$ 512.56	\$ 1,397.41	\$ 18,208.33	\$ 17,755.34	\$ 16,373.02	\$ 54,625.43		
Lapse	\$ 119.82	\$ 112.30	\$ 134.96	\$ 186.10	\$ 188.19	\$ 192.47	\$ 212.05	\$ 387.34	\$ 879.97	\$ 21,054.60	\$ 20,530.80	\$ 18,932.40	\$ 62,931.00		
													\$ 160,321.58	\$ 160,321.58	\$ 0.00

The tables below display the funds earned as a result of meeting a metric. The \*total earned will increase or decrease as member months are adjusted through the program year.

COMPONENT 1 - NSGO - MONTHLY			
QAPI			
Description: Facility holds a QAPI meeting each month in accordance with quarterly federal requirements.			
Month	Met	Month	Met
Sep 2022	YES	Mar 2023	YES
Oct 2022	YES	Apr 2023	YES
Nov 2022	YES	May 2023	YES
Dec 2022	YES	Jun 2023	YES
Jan 2023	YES	Jul 2023	YES
Feb 2023	YES	Aug 2023	YES

COMPONENT 2 - ALL FACILITIES - MONTHLY											
Metric 1: +4 Hours RN				Metric 2: +8 Hours RN				Metric 3: Workforce Development			
Description: Facility maintains four additional hours of registered nurse (RN) staffing coverage per day, beyond the CMS mandate.				Description: Facility maintains eight additional hours of registered nurse (RN) staffing coverage per day, beyond the CMS mandate.				Description: Facility has a staffing recruitment and retention program that includes a self-directed plan and monitoring outcomes.			
Month	Met	Month	Met	Month	Met	Month	Met	Month	Met	Month	Met
Sep 2022	YES	Mar 2023	YES	Sep 2022	YES	Mar 2023	YES	Sep 2022	YES	Mar 2023	YES
Oct 2022	YES	Apr 2023	YES	Oct 2022	YES	Apr 2023	YES	Oct 2022	YES	Apr 2023	YES
Nov 2022	YES	May 2023	YES	Nov 2022	YES	May 2023	YES	Nov 2022	YES	May 2023	YES
Dec 2022	YES	Jun 2023	YES	Dec 2022	YES	Jun 2023	YES	Dec 2022	YES	Jun 2023	YES
Jan 2023	YES	Jul 2023	YES	Jan 2023	YES	Jul 2023	YES	Jan 2023	YES	Jul 2023	YES
Feb 2023	YES	Aug 2023	YES	Feb 2023	YES	Aug 2023	YES	Feb 2023	YES	Aug 2023	YES

Conditions of Participation
Component 1 and Component 2 Metric 3
'YES'/'NO' results indicate only whether a payment is being directed to the NF. Such monthly payments are uniform rate increases and do not reflect HHSC's final determination of whether conditions of participation have been met in that reporting period.
A NF that fails to meet all required conditions of participation will be removed from the program retroactive to the first day of the program period. HHSC will redistribute revenue paid to facilities removed from the program to the remaining facilities participating in the program period. Facilities that meet the conditions of participation will remain enrolled in the program period. For a full list of the required conditions of participation, including conditions not discussed here, please refer to 1 TAC 353.1302(e).

Note: Component 1 is a Condition of Participation.

Note: Component 2 Metric 3 is a Condition of Participation.

COMPONENT 3 - ALL FACILITIES - QUARTERLY																				
Payment Period	Metric 1: Pressure Ulcers (CMS N015.03)					Metric 2: Antipsychotics (CMS N031.03)					Metric 3: Mobility (CMS N035.03)					Metric 4: UTI (CMS N024.02)				
	Target	Num	Dem	Actual	Met	Target	Num	Dem	Actual	Met	Target	Num	Dem	Actual	Met	Target	Num	Dem	Actual	Met
Qtr. 1	10.18	1.00	32.00	3.13	YES	6.01	2.00	51.00	3.92	YES	25.56	4.00	37.00	10.81	YES	2.36	0.00	42.00	0.00	YES
Qtr. 2	9.64	2.00	38.00	5.26	YES	6.01	3.00	55.00	5.45	YES	24.22	10.00	46.00	21.74	YES	2.36	0.00	55.00	0.00	YES
Qtr. 3	9.11	1.00	38.00	2.63	YES	6.01	6.00	58.00	10.34	NO	22.87	6.00	50.00	12.00	YES	2.36	2.00	44.00	0.00	YES
Qtr. 4	8.57	2.00	40.00	5.00	YES	6.01	4.00	53.00	7.55	NO	21.53	7.00	44.00	99.14	YES	2.36	0.00	56.00	100.00	YES

Note: For Metric target fields showing "Min Data" or "Withheld", please contact the QIPP mailbox at QIPP@hhsc.state.tx.us to receive your facilities complete metric results. The metric value was redacted due to HIPAA compliance or not meeting the minimum data requirement to calculate a value.

**COMPONENT 4 - NSGO - QUARTERLY**

Payment Period	Metric 1: Pneumococcal Vaccine (CMS N020.02)					Metric 2: Influenza Vaccine (CMS N016.03)				
	Target	Num	Dem	Actual	Met	Target	Num	Dem	Actual	Met
Qtr. 1	N/A	N/A	N/A	N/A	YES	N/A	N/A	N/A	N/A	YES
Qtr. 2	N/A	N/A	N/A	N/A	YES	N/A	N/A	N/A	N/A	YES
Qtr. 3	N/A	N/A	N/A	N/A	YES	N/A	N/A	N/A	N/A	YES
Qtr. 4	90.43%	NA	NA	99.142%	YES	81.85%	NA	NA	100.000%	YES

**COMPONENT 4 - NSGO - QUARTERLY**

Month	Comp 1	Comp 2	Month	Comp 1	Comp 2	Month	Comp 1	Comp 2	Payment Period	Comp 3 (Adjusted for min-data)	Comp 4	Non-Dispersed Funds
Sep 2022	\$ 12.85	\$ 1.11	Jan 2023	\$ 12.85	\$ 1.11	May 2023	\$ 12.85	\$ 1.11	Qtr. 1	\$ 4.99	\$ 4.67	\$ 3.70
Oct 2022	\$ 12.85	\$ 1.11	Feb 2023	\$ 12.85	\$ 1.11	Jun 2023	\$ 12.85	\$ 1.11	Qtr. 2	\$ 4.99	\$ 4.67	\$ 3.98
Nov 2022	\$ 12.85	\$ 1.11	Mar 2023	\$ 12.85	\$ 1.11	Jul 2023	\$ 12.85	\$ 1.11	Qtr. 3	\$ 3.74	\$ 4.67	\$ 2.63
Dec 2022	\$ 12.85	\$ 1.11	Apr 2023	\$ 12.85	\$ 1.11	Aug 2023	\$ 12.85	\$ 1.11	Qtr. 4	\$ 3.74	\$ 4.67	\$ 5.40

Member Months	Quarter 1			Quarter 2			Quarter 3			Quarter 4			Adjustment Period 1				Adjustment Period 2				Adj 3	Total				
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21		22	23	24	
Sep 2022	3,466	277	125	41	24	8	12	2	1	2	4	5	-	-	-	-	-	-	-	-	-	-	-	-	-	3,967
Oct 2022	3,525	276	83	31	16	13	1	5	-	3	6	-	-	-	-	-	-	-	-	-	-	-	-	-	-	3,959
Nov 2022	3,643	185	87	36	13	5	4	5	5	5	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	3,988
Dec 2022	3,653	172	88	21	7	7	12	1	4	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	3,965
Jan 2023	3,556	256	49	15	9	7	1	10	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	3,903
Feb 2023	3,659	168	52	16	12	-	7	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	3,914
Mar 2023	3,594	246	56	27	10	14	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	3,947
Apr 2023	3,680	170	88	12	18	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	3,968
May 2023	3,628	231	51	25	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	3,935
Jun 2023	3,543	273	83	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	3,899
Jul 2023	3,558	244	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	3,802
Aug 2023	3,506	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	3,506

Member Month Count Instructions: Each quarter the scorecard will be updated with metric performance and achieved payment factor amounts. The scorecard will also calculate the payment associated with the current quarter and adjustments made to past quarters in the current quarter. The table Member Month Count reflects the actual member month case load for the selected MCO in that provider's service delivery area (SDA).

# Quality Incentive Payment Program - Year 6 (SFY23)

Quarter 4

June 2023 - August 2023

**\*\*Note: Enable Editing to use dropdowns\*\***

MCO:	All MCOs in Providers SDA	Facility Name:	STALLINGS COURT NURSING AND REHABILITATION	SDA:	MRSA NORTHEAST
Facility ID:	103011	Legal Entity Name:	WINNIESTOWELL HOSPITAL DISTRICT	Medicaid Contract #	1019884

*Funds Earned	QUARTER 1			QUARTER 2			QUARTER 3			QUARTER 4			Adjustment Periods			Total
	Sep 2022	Oct 2022	Nov 2022	Dec 2022	Jan 2023	Feb 2023	Mar 2023	Apr 2023	May 2023	Jun 2023	Jul 2023	Aug 2023	Adj 1	Adj 2	Adj 3	Year to Date
Component 1	\$ 45,054	\$ 50,549	\$ 55,377	\$ 51,673	\$ 50,387	\$ 51,561	\$ 53,423	\$ 50,651	\$ 51,784	\$ 53,828	\$ 51,703	\$ 51,986	\$ -	\$ -	\$ -	\$ 617,978
Component 2	\$ 11,664	\$ 13,087	\$ 14,337	\$ 13,378	\$ 13,045	\$ 13,349	\$ 13,831	\$ 13,113	\$ 13,407	\$ 13,936	\$ 13,386	\$ 13,459	\$ -	\$ -	\$ -	\$ 159,990
Component 3	\$ 58,632			\$ 45,181			\$ 31,002			\$ 30,710			\$ -	\$ -	\$ -	\$ 165,525
Component 4	\$ 54,902			\$ 1,641			\$ 54,438			\$ 56,930			\$ -	\$ -	\$ -	\$ 167,911
Qtr. Non-Dispersed Funds	\$ 43,563			\$ 37,253			\$ 30,400			\$ 61,122			\$ -	\$ -	\$ -	\$ 172,339
<b>QUARTER TOTALS</b>	\$ 347,165			\$ 277,469			\$ 312,048			\$ 347,060			\$ -	\$ -	\$ -	\$ 1,283,742

Payment Period	From Month	To Month	Estimated Scorecard Release
Quarter 1	Sep-22	Nov-22	Jan-23
Quarter 2	Dec-22	Feb-23	Apr-23
Quarter 3	Mar-23	May-23	Jul-23
Quarter 4	Jun-23	Aug-23	Oct-23
Adjustment Period 1	Sep-23	Dec-23	Jan-24
Adjustment Period 2	Jan-24	Aug-24	Sep-24
Adjustment Period 3	Sep-24	Jul-25	Aug-25

	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June	July	Aug	Total	Pay Tab	Variance
Comp 1	\$ (102.48)	\$ (103.00)	\$ (103.58)	\$ (103.18)	\$ (101.58)	\$ (103.98)	\$ (103.90)	\$ (103.48)	\$ (103.66)	\$ (101.86)	\$ (99.72)	\$ (90.88)	\$ (1,221.30)		
Comp 3	\$ 23.58	\$ 27.51	\$ 11.79	\$ 35.37	\$ 73.69	\$ 170.96	\$ 172.92	\$ 410.69	\$ 1,049.31	\$ 10,007.75	\$ 9,797.49	\$ 8,928.96	\$ 30,710.00		
Comp 4	\$ 22.08	\$ 25.76	\$ 11.04	\$ -	\$ -	\$ -	\$ 323.84	\$ 769.12	\$ 1,965.12	\$ 18,742.24	\$ 18,348.48	\$ 16,721.92	\$ 56,929.60		
Lapse	\$ 171.06	\$ 174.73	\$ 164.04	\$ 132.22	\$ 162.08	\$ 244.34	\$ 222.67	\$ 457.20	\$ 1,087.79	\$ 20,626.65	\$ 20,193.30	\$ 18,403.20	\$ 62,039.28		
													\$ 148,457.58	\$ 148,457.59	\$ 0.01

The tables below display the funds earned as a result of meeting a metric. The \*total earned will increase or decrease as member months are adjusted through the program year.

COMPONENT 1 - NSGO - MONTHLY			
QAPI			
Description: Facility holds a QAPI meeting each month in accordance with quarterly federal requirements.			
Month	Met	Month	Met
Sep 2022	YES	Mar 2023	YES
Oct 2022	YES	Apr 2023	YES
Nov 2022	YES	May 2023	YES
Dec 2022	YES	Jun 2023	YES
Jan 2023	YES	Jul 2023	YES
Feb 2023	YES	Aug 2023	YES

Note: Component 1 is a Condition of Participation.

COMPONENT 2 - ALL FACILITIES - MONTHLY											
Metric 1: +4 Hours RN				Metric 2: +8 Hours RN				Metric 3: Workforce Development			
Description: Facility maintains four additional hours of registered nurse (RN) staffing coverage per day, beyond the CMS mandate.				Description: Facility maintains eight additional hours of registered nurse (RN) staffing coverage per day, beyond the CMS mandate.				Description: Facility has a staffing recruitment and retention program that includes a self-directed plan and monitoring outcomes.			
Month	Met	Month	Met	Month	Met	Month	Met	Month	Met	Month	Met
Sep 2022	YES	Mar 2023	YES	Sep 2022	YES	Mar 2023	YES	Sep 2022	YES	Mar 2023	YES
Oct 2022	YES	Apr 2023	YES	Oct 2022	YES	Apr 2023	YES	Oct 2022	YES	Apr 2023	YES
Nov 2022	YES	May 2023	YES	Nov 2022	YES	May 2023	YES	Nov 2022	YES	May 2023	YES
Dec 2022	YES	Jun 2023	YES	Dec 2022	YES	Jun 2023	YES	Dec 2022	YES	Jun 2023	YES
Jan 2023	YES	Jul 2023	YES	Jan 2023	YES	Jul 2023	YES	Jan 2023	YES	Jul 2023	YES
Feb 2023	YES	Aug 2023	YES	Feb 2023	YES	Aug 2023	YES	Feb 2023	YES	Aug 2023	YES

Note: Component 2 Metric 3 is a Condition of Participation.

Conditions of Participation
Component 1 and Component 2 Metric 3
'YES'/'NO' results indicate only whether a payment is being directed to the NF. Such monthly payments are uniform rate increases and do not reflect HHSC's final determination of whether conditions of participation have been met in that reporting period.
A NF that fails to meet all required conditions of participation will be removed from the program retroactive to the first day of the program period. HHSC will redistribute revenue paid to facilities removed from the program to the remaining facilities participating in the program period. Facilities that meet the conditions of participation will remain enrolled in the program period. For a full list of the required conditions of participation, including conditions not discussed here, please refer to 1 TAC 353.1302(e).

COMPONENT 3 - ALL FACILITIES - QUARTERLY																				
Payment Period	Metric 1: Pressure Ulcers (CMS N015.03)					Metric 2: Antipsychotics (CMS N031.03)					Metric 3: Mobility (CMS N035.03)					Metric 4: UTI (CMS N024.02)				
	Target	Num	Dem	Actual	Met	Target	Num	Dem	Actual	Met	Target	Num	Dem	Actual	Met	Target	Num	Dem	Actual	Met
Qtr. 1	2.33	1.00	50.00	2.00	YES	10.27	5.00	62.00	8.06	YES	18.04	5.00	48.00	10.42	YES	1.14	0.00	65.00	0.00	YES
Qtr. 2	2.33	1.00	36.00	2.78	NO	10.27	6.00	62.00	9.68	YES	18.04	6.00	44.00	13.64	YES	1.14	0.00	55.00	0.00	YES
Qtr. 3	2.33	1.00	39.00	2.56	NO	10.27	10.00	59.00	16.95	NO	18.04	7.00	43.00	16.28	YES	1.14	0.00	45.00	0.00	YES
Qtr. 4	2.33	3.00	43.00	6.98	NO	10.27	11.00	58.00	18.97	NO	18.04	4.00	42.00	98.43	YES	1.14	0.00	63.00	98.46	YES

Note: For Metric target fields showing "Min Data" or "Withheld", please contact the QIPP mailbox at QIPP@hhsc.state.tx.us to receive your facilities complete metric results. The metric value was redacted due to HIPAA compliance or not meeting the minimum data requirement to calculate a value.

**COMPONENT 4 - NSGO - QUARTERLY**

Payment Period	Metric 1: Pneumococcal Vaccine (CMS N020.02)					Metric 2: Influenza Vaccine (CMS N016.03)				
	Target	Num	Dem	Actual	Met	Target	Num	Dem	Actual	Met
Qtr. 1	N/A	N/A	N/A	N/A	YES	N/A	N/A	N/A	N/A	YES
Qtr. 2	N/A	N/A	N/A	N/A	NO	N/A	N/A	N/A	N/A	NO
Qtr. 3	N/A	N/A	N/A	N/A	YES	N/A	N/A	N/A	N/A	YES
Qtr. 4	87.89%	NA	NA	98.431%	YES	95.43%	NA	NA	98.462%	YES

**COMPONENT 4 - NSGO - QUARTERLY**

Month	Comp 1	Comp 2	Month	Comp 1	Comp 2	Month	Comp 1	Comp 2	Payment Period	Comp 3 (Adjusted for min-data)	Comp 4	Non-Dispersed Funds
Sep 2022	\$ 10.12	\$ 0.87	Jan 2023	\$ 10.12	\$ 0.87	May 2023	\$ 10.12	\$ 0.87	Qtr. 1	\$ 3.93	\$ 3.68	\$ 2.92
Oct 2022	\$ 10.12	\$ 0.87	Feb 2023	\$ 10.12	\$ 0.87	Jun 2023	\$ 10.12	\$ 0.87	Qtr. 2	\$ 2.95	\$ -	\$ 2.44
Nov 2022	\$ 10.12	\$ 0.87	Mar 2023	\$ 10.12	\$ 0.87	Jul 2023	\$ 10.12	\$ 0.87	Qtr. 3	\$ 1.97	\$ 3.68	\$ 1.95
Dec 2022	\$ 10.12	\$ 0.87	Apr 2023	\$ 10.12	\$ 0.87	Aug 2023	\$ 10.12	\$ 0.87	Qtr. 4	\$ 1.97	\$ 3.68	\$ 4.05

Member Months	Quarter 1			Quarter 2			Quarter 3			Quarter 4			Adjustment Period 1				Adjustment Period 2					Adj 3	Total		
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22		23	24
Sep 2022	4,452	414	194	20	13	13	7	2	3	5	-	1	-	-	-	-	-	-	-	-	-	-	-	-	5,124
Oct 2022	4,581	442	60	28	10	16	1	5	5	-	2	-	-	-	-	-	-	-	-	-	-	-	-	-	5,150
Nov 2022	4,836	210	62	30	24	10	4	4	1	(2)	-	-	-	-	-	-	-	-	-	-	-	-	-	-	5,179
Dec 2022	4,816	221	62	32	13	3	9	4	(1)	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	5,159
Jan 2023	4,655	288	90	27	(6)	9	7	9	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	5,079
Feb 2023	4,692	320	101	28	31	11	16	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	5,199
Mar 2023	4,790	224	93	49	24	15	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	5,195
Apr 2023	4,627	338	142	49	18	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	5,174
May 2023	4,649	417	74	43	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	5,183
Jun 2023	4,648	311	134	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	5,093
Jul 2023	4,628	358	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4,986
Aug 2023	4,544	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4,544

Member Month Count Instructions: Each quarter the scorecard will be updated with metric performance and achieved payment factor amounts. The scorecard will also calculate the payment associated with the current quarter and adjustments made to past quarters in the current quarter. The table Member Month Count reflects the actual member month case load for the selected MCO in that provider's service delivery area (SDA).



# Quality Incentive Payment Program - Year 6 (SFY23)

Quarter 4

June 2023 - August 2023

**\*\*Note: Enable Editing to use dropdowns\*\***

MCO:	All MCOs in Providers SDA	Facility Name:	PECAN BAYOU NURSING AND REHABILITATION	SDA:	MRSA WEST
Facility ID:	104537	Legal Entity Name:	WINNIESTOWELL HOSPITAL DISTRICT	Medicaid Contract #	1020554

*Funds Earned	QUARTER 1			QUARTER 2			QUARTER 3			QUARTER 4			Adjustment Periods			Total
	Sep 2022	Oct 2022	Nov 2022	Dec 2022	Jan 2023	Feb 2023	Mar 2023	Apr 2023	May 2023	Jun 2023	Jul 2023	Aug 2023	Adj 1	Adj 2	Adj 3	Year to Date
Component 1	\$ 30,872	\$ 34,403	\$ 37,241	\$ 34,238	\$ 34,213	\$ 36,622	\$ 36,770	\$ 35,805	\$ 34,906	\$ 34,328	\$ 35,624	\$ 35,459	\$ -	\$ -	\$ -	\$ 420,478
Component 2	\$ 8,008	\$ 8,924	\$ 9,660	\$ 8,881	\$ 8,875	\$ 9,499	\$ 9,538	\$ 9,288	\$ 9,054	\$ 8,905	\$ 9,241	\$ 9,198	\$ -	\$ -	\$ -	\$ 109,069
Component 3	\$ 39,763			\$ 40,755			\$ 41,690			\$ 40,886			\$ -	\$ -	\$ -	\$ 163,094
Component 4	\$ 37,278			\$ 1,434			\$ 37,182			\$ 38,016			\$ -	\$ -	\$ -	\$ 113,910
Qtr. Non-Dispersed Funds	\$ 29,574			\$ 27,002			\$ 23,063			\$ 45,239			\$ -	\$ -	\$ -	\$ 124,878
<b>QUARTER TOTALS</b>	\$ 235,721			\$ 201,518			\$ 237,296			\$ 256,894			\$ -	\$ -	\$ -	\$ 931,429

Payment Period	From Month	To Month	Estimated Scorecard Release
Quarter 1	Sep-22	Nov-22	Jan-23
Quarter 2	Dec-22	Feb-23	Apr-23
Quarter 3	Mar-23	May-23	Jul-23
Quarter 4	Jun-23	Aug-23	Oct-23
Adjustment Period 1	Sep-23	Dec-23	Jan-24
Adjustment Period 2	Jan-24	Aug-24	Sep-24
Adjustment Period 3	Sep-24	Jul-25	Aug-25

	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June	July	Aug	Total	Pay Tab	Variance
Comp 1	\$ (43.08)	\$ (43.47)	\$ (43.64)	\$ (43.14)	\$ (43.28)	\$ (43.55)	\$ (43.07)	\$ (43.12)	\$ (42.66)	\$ (41.61)	\$ (41.15)	\$ (37.90)	\$ (509.67)		
Comp 3	\$ 48.00	\$ 60.80	\$ 76.80	\$ 70.40	\$ 134.40	\$ 131.20	\$ 163.20	\$ 361.60	\$ 1,228.80	\$ 13,315.20	\$ 13,168.00	\$ 12,128.00	\$ 40,886.40		
Comp 4	\$ 45.00	\$ 57.00	\$ 72.00	\$ -	\$ -	\$ -	\$ 153.00	\$ 339.00	\$ 1,152.00	\$ 12,483.00	\$ 12,345.00	\$ 11,370.00	\$ 38,016.00		
Lapse	\$ 121.56	\$ 131.78	\$ 143.92	\$ 132.26	\$ 174.34	\$ 172.79	\$ 131.81	\$ 239.74	\$ 710.82	\$ 15,146.04	\$ 14,978.60	\$ 13,795.60	\$ 45,879.26		
													\$ 124,271.99	\$ 124,271.99	\$ -

The tables below display the funds earned as a result of meeting a metric. The \*total earned will increase or decrease as member months are adjusted through the program year.

COMPONENT 1 - NSGO - MONTHLY			
QAPI			
Description: Facility holds a QAPI meeting each month in accordance with quarterly federal requirements.			
Month	Met	Month	Met
Sep 2022	YES	Mar 2023	YES
Oct 2022	YES	Apr 2023	YES
Nov 2022	YES	May 2023	YES
Dec 2022	YES	Jun 2023	YES
Jan 2023	YES	Jul 2023	YES
Feb 2023	YES	Aug 2023	YES

Note: Component 1 is a Condition of Participation.

COMPONENT 2 - ALL FACILITIES - MONTHLY											
Metric 1: +4 Hours RN				Metric 2: +8 Hours RN				Metric 3: Workforce Development			
Description: Facility maintains four additional hours of registered nurse (RN) staffing coverage per day, beyond the CMS mandate.				Description: Facility maintains eight additional hours of registered nurse (RN) staffing coverage per day, beyond the CMS mandate.				Description: Facility has a staffing recruitment and retention program that includes a self-directed plan and monitoring outcomes.			
Month	Met	Month	Met	Month	Met	Month	Met	Month	Met	Month	Met
Sep 2022	YES	Mar 2023	YES	Sep 2022	YES	Mar 2023	YES	Sep 2022	YES	Mar 2023	YES
Oct 2022	YES	Apr 2023	YES	Oct 2022	YES	Apr 2023	YES	Oct 2022	YES	Apr 2023	YES
Nov 2022	YES	May 2023	YES	Nov 2022	YES	May 2023	YES	Nov 2022	YES	May 2023	YES
Dec 2022	YES	Jun 2023	YES	Dec 2022	YES	Jun 2023	YES	Dec 2022	YES	Jun 2023	YES
Jan 2023	YES	Jul 2023	YES	Jan 2023	YES	Jul 2023	YES	Jan 2023	YES	Jul 2023	YES
Feb 2023	YES	Aug 2023	YES	Feb 2023	YES	Aug 2023	YES	Feb 2023	YES	Aug 2023	YES

Note: Component 2 Metric 3 is a Condition of Participation.

Conditions of Participation
Component 1 and Component 2 Metric 3
'YES'/'NO' results indicate only whether a payment is being directed to the NF. Such monthly payments are uniform rate increases and do not reflect HHSC's final determination of whether conditions of participation have been met in that reporting period.
A NF that fails to meet all required conditions of participation will be removed from the program retroactive to the first day of the program period. HHSC will redistribute revenue paid to facilities removed from the program to the remaining facilities participating in the program period. Facilities that meet the conditions of participation will remain enrolled in the program period. For a full list of the required conditions of participation, including conditions not discussed here, please refer to 1 TAC 353.1302(e).

COMPONENT 3 - ALL FACILITIES - QUARTERLY																				
Payment Period	Metric 1: Pressure Ulcers (CMS N015.03)					Metric 2: Antipsychotics (CMS N031.03)					Metric 3: Mobility (CMS N035.03)					Metric 4: UTI (CMS N024.02)				
	Target	Num	Dem	Actual	Met	Target	Num	Dem	Actual	Met	Target	Num	Dem	Actual	Met	Target	Num	Dem	Actual	Met
Qtr. 1	16.89	2.00	26.00	7.69	YES	13.60	3.00	35.00	8.57	YES	18.04	3.00	20.00	15.00	YES	2.57	0.00	35.00	0.00	YES
Qtr. 2	16.00	2.00	24.00	8.33	YES	13.60	2.00	38.00	5.26	YES	18.04	1.00	22.00	4.55	YES	2.43	0.00	37.00	0.00	YES
Qtr. 3	15.11	2.00	27.00	7.41	YES	13.60	3.00	42.00	7.14	YES	18.04	4.00	26.00	15.38	YES	2.36	0.00	68.00	0.00	YES
Qtr. 4	14.22	2.00	24.00	8.33	YES	13.60	4.00	42.00	9.52	YES	18.04	3.00	24.00	100.00	YES	2.36	0.00	42.00	100.00	YES

Note: For Metric target fields showing "Min Data" or "Withheld", please contact the QIPP mailbox at QIPP@hhsc.state.tx.us to receive your facilities complete metric results. The metric value was redacted due to HIPAA compliance or not meeting the minimum data requirement to calculate a value.



**COMPONENT 4 - NSGO - QUARTERLY**

Payment Period	Metric 1: Pneumococcal Vaccine (CMS N020.02)					Metric 2: Influenza Vaccine (CMS N016.03)				
	Target	Num	Dem	Actual	Met	Target	Num	Dem	Actual	Met
Qtr. 1	N/A	N/A	N/A	N/A	YES	N/A	N/A	N/A	N/A	YES
Qtr. 2	N/A	N/A	N/A	N/A	NO	N/A	N/A	N/A	N/A	NO
Qtr. 3	N/A	N/A	N/A	N/A	YES	N/A	N/A	N/A	N/A	YES
Qtr. 4	98.86%	NA	NA	100.000%	YES	99.35%	NA	NA	100.000%	YES

**COMPONENT 4 - NSGO - QUARTERLY**

Month	Comp 1	Comp 2	Month	Comp 1	Comp 2	Month	Comp 1	Comp 2	Payment Period	Comp 3 (Adjusted for min-data)	Comp 4	Non-Dispersed Funds
Sep 2022	\$ 8.25	\$ 0.71	Jan 2023	\$ 8.25	\$ 0.71	May 2023	\$ 8.25	\$ 0.71	Qtr. 1	\$ 3.20	\$ 3.00	\$ 2.38
Oct 2022	\$ 8.25	\$ 0.71	Feb 2023	\$ 8.25	\$ 0.71	Jun 2023	\$ 8.25	\$ 0.71	Qtr. 2	\$ 3.20	\$ -	\$ 2.11
Nov 2022	\$ 8.25	\$ 0.71	Mar 2023	\$ 8.25	\$ 0.71	Jul 2023	\$ 8.25	\$ 0.71	Qtr. 3	\$ 3.20	\$ 3.00	\$ 1.75
Dec 2022	\$ 8.25	\$ 0.71	Apr 2023	\$ 8.25	\$ 0.71	Aug 2023	\$ 8.25	\$ 0.71	Qtr. 4	\$ 3.20	\$ 3.00	\$ 3.64

Member Months	Quarter 1			Quarter 2			Quarter 3			Quarter 4			Adjustment Period 1				Adjustment Period 2					Adj 3	Total		
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22		23	24
Sep 2022	3,742	306	185	22	15	5	16	1	1	8	4	3	-	-	-	-	-	-	-	-	-	-	-	-	4,308
Oct 2022	3,864	351	51	20	19	16	3	4	8	7	4	-	-	-	-	-	-	-	-	-	-	-	-	-	4,347
Nov 2022	3,978	188	97	61	5	6	5	10	8	6	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4,364
Dec 2022	3,889	236	110	30	14	13	9	9	4	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4,314
Jan 2023	3,779	367	93	31	16	11	18	13	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4,328
Feb 2023	3,877	338	79	20	19	15	7	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4,355
Mar 2023	3,959	236	61	25	20	6	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4,307
Apr 2023	3,970	229	71	29	13	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4,312
May 2023	3,882	286	53	45	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4,266
Jun 2023	3,714	358	89	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4,161
Jul 2023	3,797	318	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4,115
Aug 2023	3,790	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	3,790

Member Month Count Instructions: Each quarter the scorecard will be updated with metric performance and achieved payment factor amounts. The scorecard will also calculate the payment associated with the current quarter and adjustments made to past quarters in the current quarter. The table Member Month Count reflects the actual member month case load for the selected MCO in that provider's service delivery area (SDA).

# Quality Incentive Payment Program - Year 6 (SFY23)

Quarter 4

June 2023 - August 2023

**\*\*Note: Enable Editing to use dropdowns\*\***

MCO:	All MCOs in Providers SDA	Facility Name:	HOLLAND LAKE REHABILITATION AND WELLNESS CENTER	SDA:	TARRANT
Facility ID:	5372	Legal Entity Name:	WINNIESTOWELL HOSPITAL DISTRICT	Medicaid Contract #	1027377

*Funds Earned	QUARTER 1			QUARTER 2			QUARTER 3			QUARTER 4			Adjustment Periods			Total
	Sep 2022	Oct 2022	Nov 2022	Dec 2022	Jan 2023	Feb 2023	Mar 2023	Apr 2023	May 2023	Jun 2023	Jul 2023	Aug 2023	Adj 1	Adj 2	Adj 3	Year to Date
Component 1	\$ 31,708	\$ 34,545	\$ 37,228	\$ 35,545	\$ 34,596	\$ 36,155	\$ 36,074	\$ 35,434	\$ 36,537	\$ 36,956	\$ 35,390	\$ 34,464	\$ -	\$ -	\$ -	\$ 424,632
Component 2	\$ 8,197	\$ 8,930	\$ 9,624	\$ 9,188	\$ 8,943	\$ 9,346	\$ 9,325	\$ 9,160	\$ 9,445	\$ 9,553	\$ 9,149	\$ 8,909	\$ -	\$ -	\$ -	\$ 109,769
Component 3	\$ 40,125			\$ 41,217			\$ 41,895			\$ 41,416			\$ -	\$ -	\$ -	\$ 164,653
Component 4	\$ 37,591			\$ 1,362			\$ 37,556			\$ 38,555			\$ -	\$ -	\$ -	\$ 115,064
Qtr. Non-Dispersed Funds	\$ 29,847			\$ 27,311			\$ 23,172			\$ 45,699			\$ -	\$ -	\$ -	\$ 126,030
<b>QUARTER TOTALS</b>	\$ 237,794			\$ 203,663			\$ 238,599			\$ 260,091			\$ -	\$ -	\$ -	\$ 940,147

Payment Period	From Month	To Month	Estimated Scorecard Release
Quarter 1	Sep-22	Nov-22	Jan-23
Quarter 2	Dec-22	Feb-23	Apr-23
Quarter 3	Mar-23	May-23	Jul-23
Quarter 4	Jun-23	Aug-23	Oct-23
Adjustment Period 1	Sep-23	Dec-23	Jan-24
Adjustment Period 2	Jan-24	Aug-24	Sep-24
Adjustment Period 3	Sep-24	Jul-25	Aug-25

	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June	July	Aug	Total	Pay Tab	Variance
Comp 1	\$ (48.79)	\$ (48.89)	\$ (49.04)	\$ (48.79)	\$ (49.06)	\$ (48.93)	\$ (49.39)	\$ (49.16)	\$ (48.83)	\$ (47.66)	\$ (47.11)	\$ (42.08)	\$ (577.73)		
Comp 3	\$ 14.25	\$ 14.25	\$ 17.10	\$ 25.65	\$ 59.85	\$ 176.70	\$ 316.35	\$ 456.00	\$ 1,333.80	\$ 13,583.10	\$ 13,426.35	\$ 11,992.80	\$ 41,416.20		
Comp 4	\$ 13.35	\$ 13.35	\$ 16.02	\$ -	\$ -	\$ -	\$ 296.37	\$ 427.20	\$ 1,249.56	\$ 12,725.22	\$ 12,578.37	\$ 11,235.36	\$ 38,554.80		
Lapse	\$ 108.08	\$ 108.28	\$ 110.68	\$ 114.32	\$ 137.18	\$ 213.18	\$ 221.44	\$ 297.16	\$ 774.23	\$ 15,441.84	\$ 15,263.64	\$ 13,633.92	\$ 46,423.95		
													\$ 125,817.22	\$ 125,817.22	\$ -

The tables below display the funds earned as a result of meeting a metric. The \*total earned will increase or decrease as member months are adjusted through the program year.

COMPONENT 1 - NSGO - MONTHLY			
QAPI			
Description: Facility holds a QAPI meeting each month in accordance with quarterly federal requirements.			
Month	Met	Month	Met
Sep 2022	YES	Mar 2023	YES
Oct 2022	YES	Apr 2023	YES
Nov 2022	YES	May 2023	YES
Dec 2022	YES	Jun 2023	YES
Jan 2023	YES	Jul 2023	YES
Feb 2023	YES	Aug 2023	YES

Note: Component 1 is a Condition of Participation.

COMPONENT 2 - ALL FACILITIES - MONTHLY											
Metric 1: +4 Hours RN				Metric 2: +8 Hours RN				Metric 3: Workforce Development			
Description: Facility maintains four additional hours of registered nurse (RN) staffing coverage per day, beyond the CMS mandate.				Description: Facility maintains eight additional hours of registered nurse (RN) staffing coverage per day, beyond the CMS mandate.				Description: Facility has a staffing recruitment and retention program that includes a self-directed plan and monitoring outcomes.			
Month	Met	Month	Met	Month	Met	Month	Met	Month	Met	Month	Met
Sep 2022	YES	Mar 2023	YES	Sep 2022	YES	Mar 2023	YES	Sep 2022	YES	Mar 2023	YES
Oct 2022	YES	Apr 2023	YES	Oct 2022	YES	Apr 2023	YES	Oct 2022	YES	Apr 2023	YES
Nov 2022	YES	May 2023	YES	Nov 2022	YES	May 2023	YES	Nov 2022	YES	May 2023	YES
Dec 2022	YES	Jun 2023	YES	Dec 2022	YES	Jun 2023	YES	Dec 2022	YES	Jun 2023	YES
Jan 2023	YES	Jul 2023	YES	Jan 2023	YES	Jul 2023	YES	Jan 2023	YES	Jul 2023	YES
Feb 2023	YES	Aug 2023	YES	Feb 2023	YES	Aug 2023	YES	Feb 2023	YES	Aug 2023	YES

Note: Component 2 Metric 3 is a Condition of Participation.

Conditions of Participation
Component 1 and Component 2 Metric 3
'YES'/'NO' results indicate only whether a payment is being directed to the NF. Such monthly payments are uniform rate increases and do not reflect HHSC's final determination of whether conditions of participation have been met in that reporting period.
A NF that fails to meet all required conditions of participation will be removed from the program retroactive to the first day of the program period. HHSC will redistribute revenue paid to facilities removed from the program to the remaining facilities participating in the program period. Facilities that meet the conditions of participation will remain enrolled in the program period. For a full list of the required conditions of participation, including conditions not discussed here, please refer to 1 TAC 353.1302(e).

COMPONENT 3 - ALL FACILITIES - QUARTERLY																				
Payment Period	Metric 1: Pressure Ulcers (CMS N015.03)					Metric 2: Antipsychotics (CMS N031.03)					Metric 3: Mobility (CMS N035.03)					Metric 4: UTI (CMS N024.02)				
	Target	Num	Dem	Actual	Met	Target	Num	Dem	Actual	Met	Target	Num	Dem	Actual	Met	Target	Num	Dem	Actual	Met
Qtr. 1	3.50	0.00	33.00	0	YES	1.21	0.00	47.00	0	YES	24.54	4.00	34.00	11.764705882	YES	0.16	0.00	43.00	0	YES
Qtr. 2	3.50	0.00	36.00	0.00	YES	1.21	0.00	47.00	0.00	YES	23.25	3.00	33.00	9.09	YES	0.16	0.00	46.00	0.00	YES
Qtr. 3	3.50	1.00	42.00	2.38	YES	1.21	0.00	52.00	0.00	YES	21.96	4.00	38.00	10.53	YES	0.16	0.00	110.00	0.00	YES
Qtr. 4	3.50	2.00	59.00	3.39	YES	1.21	0.00	59.00	0.00	YES	20.67	6.00	46.00	100.00	YES	0.16	0.00	62.00	100.00	YES

Note: For Metric target fields showing "Min Data" or "Withheld", please contact the QIPP mailbox at QIPP@hhsc.state.tx.us to receive your facilities complete metric results. The metric value was redacted due to HIPAA compliance or not meeting the minimum data requirement to calculate a value.

**COMPONENT 4 - NSGO - QUARTERLY**

Payment Period	Metric 1: Pneumococcal Vaccine (CMS N020.02)					Metric 2: Influenza Vaccine (CMS N016.03)				
	Target	Num	Dem	Actual	Met	Target	Num	Dem	Actual	Met
Qtr. 1	N/A	N/A	N/A	N/A	YES	N/A	N/A	N/A	N/A	YES
Qtr. 2	N/A	N/A	N/A	N/A	NO	N/A	N/A	N/A	N/A	NO
Qtr. 3	N/A	N/A	N/A	N/A	YES	N/A	N/A	N/A	N/A	YES
Qtr. 4	98.86%	NA	NA	100.000%	YES	99.35%	NA	NA	100.000%	YES

**COMPONENT 4 - NSGO - QUARTERLY**

Month	Comp 1	Comp 2	Month	Comp 1	Comp 2	Month	Comp 1	Comp 2	Payment Period	Comp 3 (Adjusted for min-data)	Comp 4	Non-Dispersed Funds
Sep 2022	\$ 7.35	\$ 0.63	Jan 2023	\$ 7.35	\$ 0.63	May 2023	\$ 7.35	\$ 0.63	Qtr. 1	\$ 2.85	\$ 2.67	\$ 2.12
Oct 2022	\$ 7.35	\$ 0.63	Feb 2023	\$ 7.35	\$ 0.63	Jun 2023	\$ 7.35	\$ 0.63	Qtr. 2	\$ 2.85	\$ -	\$ 1.88
Nov 2022	\$ 7.35	\$ 0.63	Mar 2023	\$ 7.35	\$ 0.63	Jul 2023	\$ 7.35	\$ 0.63	Qtr. 3	\$ 2.85	\$ 2.67	\$ 1.56
Dec 2022	\$ 7.35	\$ 0.63	Apr 2023	\$ 7.35	\$ 0.63	Aug 2023	\$ 7.35	\$ 0.63	Qtr. 4	\$ 2.85	\$ 2.67	\$ 3.24

Member Months	Quarter 1			Quarter 2			Quarter 3			Quarter 4			Adjustment Period 1				Adjustment Period 2					Adj 3	Total			
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22		23	24	
Sep 2022	4,314	358	133	39	18	4	4	4	-	1	3	1	-	-	-	-	-	-	-	-	-	-	-	-	-	4,879
Oct 2022	4,342	417	61	31	13	13	3	4	2	2	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4,889
Nov 2022	4,515	243	77	24	27	7	5	2	8	(4)	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4,904
Dec 2022	4,493	231	91	36	8	11	6	4	(1)	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4,879
Jan 2023	4,350	387	78	37	33	12	6	3	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4,906
Feb 2023	4,400	312	80	39	48	14	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4,893
Mar 2023	4,438	283	107	93	17	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4,939
Apr 2023	4,399	357	150	13	(3)	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4,916
May 2023	4,415	388	68	12	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4,883
Jun 2023	4,326	327	113	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4,766
Jul 2023	4,353	358	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4,711
Aug 2023	4,208	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4,208

Member Month Count Instructions: Each quarter the scorecard will be updated with metric performance and achieved payment factor amounts. The scorecard will also calculate the payment associated with the current quarter and adjustments made to past quarters in the current quarter. The table Member Month Count reflects the actual member month case load for the selected MCO in that provider's service delivery area (SDA).

# Quality Incentive Payment Program - Year 6 (SFY23)

Quarter 4

June 2023 - August 2023

**\*\*Note: Enable Editing to use dropdowns\*\***

MCO:	All MCOs in Providers SDA	Facility Name:	STONEGATE NURSING AND REHABILITATION	SDA:	TARRANT
Facility ID:	5387	Legal Entity Name:	WINNIESTOWELL HOSPITAL DISTRICT	Medicaid Contract #	1027383

*Funds Earned	QUARTER 1			QUARTER 2			QUARTER 3			QUARTER 4			Adjustment Periods			Total
	Sep 2022	Oct 2022	Nov 2022	Dec 2022	Jan 2023	Feb 2023	Mar 2023	Apr 2023	May 2023	Jun 2023	Jul 2023	Aug 2023	Adj 1	Adj 2	Adj 3	Year to Date
Component 1	\$ 20,319	\$ 22,137	\$ 23,856	\$ 22,778	\$ 22,170	\$ 23,168	\$ 23,117	\$ 22,707	\$ 23,413	\$ 23,682	\$ 22,679	\$ 22,085	\$ -	\$ -	\$ -	\$ 272,111
Component 2	\$ 5,263	\$ 5,734	\$ 6,179	\$ 5,900	\$ 5,743	\$ 6,001	\$ 5,988	\$ 5,882	\$ 6,065	\$ 6,134	\$ 5,874	\$ 5,721	\$ -	\$ -	\$ -	\$ 70,483
Component 3	\$ 25,765			\$ 26,465			\$ 26,901			\$ 26,594			\$ -	\$ -	\$ -	\$ 105,725
Component 4	\$ 24,075			\$ 872			\$ 24,053			\$ 24,692			\$ -	\$ -	\$ -	\$ 73,692
Qtr. Non-Dispersed Funds	\$ 19,147			\$ 17,436			\$ 14,851			\$ 29,336			\$ -	\$ -	\$ -	\$ 80,770
<b>QUARTER TOTALS</b>	\$ 152,476			\$ 130,533			\$ 152,976			\$ 166,797			\$ -	\$ -	\$ -	\$ 602,781

Payment Period	From Month	To Month	Estimated Scorecard Release
Quarter 1	Sep-22	Nov-22	Jan-23
Quarter 2	Dec-22	Feb-23	Apr-23
Quarter 3	Mar-23	May-23	Jul-23
Quarter 4	Jun-23	Aug-23	Oct-23
Adjustment Period 1	Sep-23	Dec-23	Jan-24
Adjustment Period 2	Jan-24	Aug-24	Sep-24
Adjustment Period 3	Sep-24	Jul-25	Aug-25

	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June	July	Aug	Total	Pay Tab	Variance
Comp 1	\$ (48.79)	\$ (48.89)	\$ (49.04)	\$ (48.79)	\$ (49.06)	\$ (48.93)	\$ (49.39)	\$ (49.16)	\$ (48.83)	\$ (47.66)	\$ (47.11)	\$ (42.08)	\$ (577.73)		
Comp 3	\$ 9.15	\$ 9.15	\$ 10.98	\$ 16.47	\$ 38.43	\$ 113.46	\$ 203.13	\$ 292.80	\$ 856.44	\$ 8,721.78	\$ 8,621.13	\$ 7,700.64	\$ 26,593.56		
Comp 4	\$ 8.55	\$ 8.55	\$ 10.26	\$ -	\$ -	\$ -	\$ 189.81	\$ 273.60	\$ 800.28	\$ 8,149.86	\$ 8,055.81	\$ 7,195.68	\$ 24,692.40		
Lapse	\$ 55.54	\$ 55.64	\$ 57.14	\$ 10.80	\$ 25.20	\$ 74.40	\$ 159.28	\$ 207.56	\$ 512.15	\$ 9,913.28	\$ 9,798.88	\$ 8,752.64	\$ 29,622.51		
													\$ 80,330.74	\$ 80,330.74	\$ -

The tables below display the funds earned as a result of meeting a metric. The \*total earned will increase or decrease as member months are adjusted through the program year.

COMPONENT 1 - NSGO - MONTHLY			
QAPI			
Description: Facility holds a QAPI meeting each month in accordance with quarterly federal requirements.			
Month	Met	Month	Met
Sep 2022	YES	Mar 2023	YES
Oct 2022	YES	Apr 2023	YES
Nov 2022	YES	May 2023	YES
Dec 2022	YES	Jun 2023	YES
Jan 2023	YES	Jul 2023	YES
Feb 2023	YES	Aug 2023	YES

COMPONENT 2 - ALL FACILITIES - MONTHLY											
Metric 1: +4 Hours RN				Metric 2: +8 Hours RN				Metric 3: Workforce Development			
Description: Facility maintains four additional hours of registered nurse (RN) staffing coverage per day, beyond the CMS mandate.				Description: Facility maintains eight additional hours of registered nurse (RN) staffing coverage per day, beyond the CMS mandate.				Description: Facility has a staffing recruitment and retention program that includes a self-directed plan and monitoring outcomes.			
Month	Met	Month	Met	Month	Met	Month	Met	Month	Met	Month	Met
Sep 2022	YES	Mar 2023	YES	Sep 2022	YES	Mar 2023	YES	Sep 2022	YES	Mar 2023	YES
Oct 2022	YES	Apr 2023	YES	Oct 2022	YES	Apr 2023	YES	Oct 2022	YES	Apr 2023	YES
Nov 2022	YES	May 2023	YES	Nov 2022	YES	May 2023	YES	Nov 2022	YES	May 2023	YES
Dec 2022	YES	Jun 2023	YES	Dec 2022	YES	Jun 2023	YES	Dec 2022	YES	Jun 2023	YES
Jan 2023	YES	Jul 2023	YES	Jan 2023	YES	Jul 2023	YES	Jan 2023	YES	Jul 2023	YES
Feb 2023	YES	Aug 2023	YES	Feb 2023	YES	Aug 2023	YES	Feb 2023	YES	Aug 2023	YES

Conditions of Participation
Component 1 and Component 2 Metric 3
'YES'/'NO' results indicate only whether a payment is being directed to the NF. Such monthly payments are uniform rate increases and do not reflect HHSC's final determination of whether conditions of participation have been met in that reporting period.
A NF that fails to meet all required conditions of participation will be removed from the program retroactive to the first day of the program period. HHSC will redistribute revenue paid to facilities removed from the program to the remaining facilities participating in the program period. Facilities that meet the conditions of participation will remain enrolled in the program period. For a full list of the required conditions of participation, including conditions not discussed here, please refer to 1 TAC 353.1302(e).

Note: Component 1 is a Condition of Participation.

Note: Component 2 Metric 3 is a Condition of Participation.

COMPONENT 3 - ALL FACILITIES - QUARTERLY																				
Payment Period	Metric 1: Pressure Ulcers (CMS N015.03)					Metric 2: Antipsychotics (CMS N031.03)					Metric 3: Mobility (CMS N035.03)					Metric 4: UTI (CMS N024.02)				
	Target	Num	Dem	Actual	Met	Target	Num	Dem	Actual	Met	Target	Num	Dem	Actual	Met	Target	Num	Dem	Actual	Met
Qtr. 1	10.36	1.00	38.00	2.6315789474	YES	14.49	4.00	44.00	9.0909090909	YES	18.47	3.00	37.00	8.1081081081	YES	1.12	0.00	44.00	0	YES
Qtr. 2	9.82	3.00	43.00	6.98	YES	14.49	7.00	49.00	14.29	YES	18.04	4.00	38.00	10.53	YES	1.12	0.00	47.00	0.00	YES
Qtr. 3	9.27	3.00	47.00	6.38	YES	14.49	5.00	51.00	9.80	YES	18.04	3.00	41.00	7.32	YES	1.12	1.00	66.00	0.00	YES
Qtr. 4	8.73	4.00	49.00	8.16	YES	14.49	6.00	60.00	10.00	YES	18.04	4.00	43.00	100.00	YES	1.12	0.00	56.00	100.00	YES

Note: For Metric target fields showing "Min Data" or "Withheld", please contact the QIPP mailbox at QIPP@hhsc.state.tx.us to receive your facilities complete metric results. The metric value was redacted due to HIPAA compliance or not meeting the minimum data requirement to calculate a value.

**COMPONENT 4 - NSGO - QUARTERLY**

Payment Period	Metric 1: Pneumococcal Vaccine (CMS N020.02)					Metric 2: Influenza Vaccine (CMS N016.03)				
	Target	Num	Dem	Actual	Met	Target	Num	Dem	Actual	Met
Qtr. 1	N/A	N/A	N/A	N/A	YES	N/A	N/A	N/A	N/A	YES
Qtr. 2	N/A	N/A	N/A	N/A	NO	N/A	N/A	N/A	N/A	NO
Qtr. 3	N/A	N/A	N/A	N/A	YES	N/A	N/A	N/A	N/A	YES
Qtr. 4	98.39%	NA	NA	100.000%	YES	98.55%	NA	NA	100.000%	YES

**COMPONENT 4 - NSGO - QUARTERLY**

Month	Comp 1	Comp 2	Month	Comp 1	Comp 2	Month	Comp 1	Comp 2	Payment Period	Comp 3 (Adjusted for min-data)	Comp 4	Non-Dispersed Funds
Sep 2022	\$ 4.71	\$ 0.41	Jan 2023	\$ 4.71	\$ 0.41	May 2023	\$ 4.71	\$ 0.41	Qtr. 1	\$ 1.83	\$ 1.71	\$ 1.36
Oct 2022	\$ 4.71	\$ 0.41	Feb 2023	\$ 4.71	\$ 0.41	Jun 2023	\$ 4.71	\$ 0.41	Qtr. 2	\$ 1.83	\$ -	\$ 1.20
Nov 2022	\$ 4.71	\$ 0.41	Mar 2023	\$ 4.71	\$ 0.41	Jul 2023	\$ 4.71	\$ 0.41	Qtr. 3	\$ 1.83	\$ 1.71	\$ 1.00
Dec 2022	\$ 4.71	\$ 0.41	Apr 2023	\$ 4.71	\$ 0.41	Aug 2023	\$ 4.71	\$ 0.41	Qtr. 4	\$ 1.83	\$ 1.71	\$ 2.08

Member Months	Quarter 1			Quarter 2			Quarter 3			Quarter 4			Adjustment Period 1				Adjustment Period 2					Adj 3	Total		
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22		23	24
Sep 2022	4,314	358	133	39	18	4	4	4	-	1	3	1	-	-	-	-	-	-	-	-	-	-	-	-	4,879
Oct 2022	4,342	417	61	31	13	13	3	4	2	2	1	-	-	-	-	-	-	-	-	-	-	-	-	-	4,889
Nov 2022	4,515	243	77	24	27	7	5	2	8	(4)	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4,904
Dec 2022	4,493	231	91	36	8	11	6	4	(1)	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4,879
Jan 2023	4,350	387	78	37	33	12	6	3	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4,906
Feb 2023	4,400	312	80	39	48	14	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4,893
Mar 2023	4,438	283	107	93	17	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4,939
Apr 2023	4,399	357	150	13	(3)	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4,916
May 2023	4,415	388	68	12	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4,883
Jun 2023	4,326	327	113	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4,766
Jul 2023	4,353	358	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4,711
Aug 2023	4,208	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4,208

Member Month Count Instructions: Each quarter the scorecard will be updated with metric performance and achieved payment factor amounts. The scorecard will also calculate the payment associated with the current quarter and adjustments made to past quarters in the current quarter. The table Member Month Count reflects the actual member month case load for the selected MCO in that provider's service delivery area (SDA).

# Quality Incentive Payment Program - Year 6 (SFY23)

Quarter 4

June 2023 - August 2023

**\*\*Note: Enable Editing to use dropdowns\*\***

<b>MCO:</b>	<b>All MCOs in Providers SDA</b>	<b>Facility Name:</b>	<b>GREEN OAKS NURSING AND REHABILITATION</b>	<b>SDA:</b>	<b>TARRANT</b>
<b>Facility ID:</b>	<b>102993</b>	<b>Legal Entity Name:</b>	<b>WINNIESTOWELL HOSPITAL DISTRICT</b>	<b>Medicaid Contract #</b>	<b>1019880</b>

*Funds Earned	QUARTER 1			QUARTER 2			QUARTER 3			QUARTER 4			Adjustment Periods			Total
	Sep 2022	Oct 2022	Nov 2022	Dec 2022	Jan 2023	Feb 2023	Mar 2023	Apr 2023	May 2023	Jun 2023	Jul 2023	Aug 2023	Adj 1	Adj 2	Adj 3	Year to Date
Component 1	\$ 50,129	\$ 54,614	\$ 58,855	\$ 56,194	\$ 54,695	\$ 57,159	\$ 57,031	\$ 56,020	\$ 57,763	\$ 58,425	\$ 55,950	\$ 54,486	\$ -	\$ -	\$ -	\$ 671,322
Component 2	\$ 12,985	\$ 14,147	\$ 15,246	\$ 14,556	\$ 14,168	\$ 14,806	\$ 14,773	\$ 14,511	\$ 14,963	\$ 15,134	\$ 14,493	\$ 14,114	\$ -	\$ -	\$ -	\$ 173,897
Component 3	\$ 63,637			\$ 65,368			\$ 50,625			\$ 64,850			\$ -	\$ -	\$ -	\$ 244,480
Component 4	\$ 59,413			\$ 2,152			\$ 59,359			\$ 60,937			\$ -	\$ -	\$ -	\$ 181,861
Qtr. Non-Dispersed Funds	\$ 47,165			\$ 43,146			\$ 35,145			\$ 72,138			\$ -	\$ -	\$ -	\$ 197,594
<b>QUARTER TOTALS</b>	\$ 376,191			\$ 322,245			\$ 360,190			\$ 410,528			\$ -	\$ -	\$ -	\$ 1,469,154

Payment Period	From Month	To Month	Estimated Scorecard Release
Quarter 1	Sep-22	Nov-22	Jan-23
Quarter 2	Dec-22	Feb-23	Apr-23
Quarter 3	Mar-23	May-23	Jul-23
Quarter 4	Jun-23	Aug-23	Oct-23
Adjustment Period 1	Sep-23	Dec-23	Jan-24
Adjustment Period 2	Jan-24	Aug-24	Sep-24
Adjustment Period 3	Sep-24	Jul-25	Aug-25

	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June	July	Aug	Total	Pay Tab	Variance
Comp 1	\$ (97.58)	\$ (97.78)	\$ (98.08)	\$ (97.58)	\$ (98.12)	\$ (97.86)	\$ (98.78)	\$ (98.32)	\$ (97.66)	\$ (95.32)	\$ (94.22)	\$ (84.16)	\$ (1,155.46)		
Comp 3	\$ 22.60	\$ 22.60	\$ 27.12	\$ 40.68	\$ 94.92	\$ 280.24	\$ 376.29	\$ 542.40	\$ 1,586.52	\$ 21,542.32	\$ 21,293.72	\$ 19,020.16	\$ 64,849.57		
Comp 4	\$ (27.64)	\$ (27.74)	\$ (23.66)	\$ -	\$ -	\$ -	\$ 420.14	\$ 627.64	\$ 1,930.81	\$ 20,112.52	\$ 19,880.42	\$ 17,757.76	\$ 60,650.25		
Lapse	\$ 162.97	\$ 163.27	\$ 167.04	\$ 124.13	\$ 160.07	\$ 280.76	\$ 358.52	\$ 472.72	\$ 1,192.78	\$ 24,401.92	\$ 24,120.32	\$ 21,544.96	\$ 73,149.46		
													\$ 197,493.82	\$ 197,493.82	\$ -

The tables below display the funds earned as a result of meeting a metric. The \*total earned will increase or decrease as member months are adjusted through the program year.

COMPONENT 1 - NSGO - MONTHLY			
QAPI			
Description: Facility holds a QAPI meeting each month in accordance with quarterly federal requirements.			
Month	Met	Month	Met
Sep 2022	YES	Mar 2023	YES
Oct 2022	YES	Apr 2023	YES
Nov 2022	YES	May 2023	YES
Dec 2022	YES	Jun 2023	YES
Jan 2023	YES	Jul 2023	YES
Feb 2023	YES	Aug 2023	YES

COMPONENT 2 - ALL FACILITIES - MONTHLY											
Metric 1: +4 Hours RN				Metric 2: +8 Hours RN				Metric 3: Workforce Development			
Description: Facility maintains four additional hours of registered nurse (RN) staffing coverage per day, beyond the CMS mandate.				Description: Facility maintains eight additional hours of registered nurse (RN) staffing coverage per day, beyond the CMS mandate.				Description: Facility has a staffing recruitment and retention program that includes a self-directed plan and monitoring outcomes.			
Month	Met	Month	Met	Month	Met	Month	Met	Month	Met	Month	Met
Sep 2022	YES	Mar 2023	YES	Sep 2022	YES	Mar 2023	YES	Sep 2022	YES	Mar 2023	YES
Oct 2022	YES	Apr 2023	YES	Oct 2022	YES	Apr 2023	YES	Oct 2022	YES	Apr 2023	YES
Nov 2022	YES	May 2023	YES	Nov 2022	YES	May 2023	YES	Nov 2022	YES	May 2023	YES
Dec 2022	YES	Jun 2023	YES	Dec 2022	YES	Jun 2023	YES	Dec 2022	YES	Jun 2023	YES
Jan 2023	YES	Jul 2023	YES	Jan 2023	YES	Jul 2023	YES	Jan 2023	YES	Jul 2023	YES
Feb 2023	YES	Aug 2023	YES	Feb 2023	YES	Aug 2023	YES	Feb 2023	YES	Aug 2023	YES

Conditions of Participation
<b>Component 1 and Component 2 Metric 3</b>
'YES'/'NO' results indicate only whether a payment is being directed to the NF. Such monthly payments are uniform rate increases and do not reflect HHSC's final determination of whether conditions of participation have been met in that reporting period.
A NF that fails to meet all required conditions of participation will be removed from the program retroactive to the first day of the program period. HHSC will redistribute revenue paid to facilities removed from the program to the remaining facilities participating in the program period. Facilities that meet the conditions of participation will remain enrolled in the program period. For a full list of the required conditions of participation, including conditions not discussed here, please refer to 1 TAC 353.1302(e).

Note: Component 1 is a Condition of Participation.

Note: Component 2 Metric 3 is a Condition of Participation.

COMPONENT 3 - ALL FACILITIES - QUARTERLY																				
Payment Period	Metric 1: Pressure Ulcers (CMS N015.03)					Metric 2: Antipsychotics (CMS N031.03)					Metric 3: Mobility (CMS N035.03)					Metric 4: UTI (CMS N024.02)				
		NF Baseline	8.89		National Average	8.14	NF Baseline	5.73		National Average	14.49	NF Baseline	23.81		National Average	18.04	NF Baseline	0.00		National Average
	Description: Facility performs equal to better than its quarterly target for percent of high-risk residents with pressure ulcers, including unstageable pressure ulcers.					Description: Facility performs equal to better than its quarterly target for percent of residents who received antipsychotic medication.					Description: Facility performs equal to better than its quarterly target for percent of residents whose ability to move independently has worsened.					Description: Facility performs equal to better than its quarterly target for percent of residents with a urinary tract infection.				
Target	Num	Dem	Actual	Met	Target	Num	Dem	Actual	Met	Target	Num	Dem	Actual	Met	Target	Num	Dem	Actual	Met	
Qtr. 1	8.44	2.00	49.00	4.0816326531	YES	5.90	2.00	59.00	3.3898305083	YES	22.62	9.00	44.00	20.454545455	YES	0.16	0.00	60.00	0	YES
Qtr. 2	8.14	3.00	43.00	6.98	YES	5.90	3.00	63.00	4.76	YES	21.43	3.00	44.00	6.82	YES	0.16	0.00	60.00	0.00	YES
Qtr. 3	8.14	2.00	49.00	4.08	YES	5.90	5.00	65.00	7.69	NO	20.24	3.00	43.00	6.98	YES	0.16	0.00	52.00	0.00	YES
Qtr. 4	8.14	2.00	51.00	3.92	YES	5.90	2.00	66.00	3.03	YES	19.05	5.00	43.00	98.48	YES	0.16	0.00	63.00	100.00	YES

Note: For Metric target fields showing "Min Data" or "Withheld", please contact the QIPP mailbox at QIPP@hhsc.state.tx.us to receive your facilities complete metric results. The metric value was redacted due to HIPAA compliance or not meeting the minimum data requirement to calculate a value.

**COMPONENT 4 - NSGO - QUARTERLY**

Payment Period	Metric 1: Pneumococcal Vaccine (CMS N020.02)					Metric 2: Influenza Vaccine (CMS N016.03)				
	Target	Num	Dem	Actual	Met	Target	Num	Dem	Actual	Met
Qtr. 1	N/A	N/A	N/A	N/A	YES	N/A	N/A	N/A	N/A	YES
Qtr. 2	N/A	N/A	N/A	N/A	NO	N/A	N/A	N/A	N/A	NO
Qtr. 3	N/A	N/A	N/A	N/A	YES	N/A	N/A	N/A	N/A	YES
Qtr. 4	77.51%	NA	NA	98.485%	YES	95.43%	NA	NA	100.000%	YES

**COMPONENT 4 - NSGO - QUARTERLY**

Month	Comp 1	Comp 2	Month	Comp 1	Comp 2	Month	Comp 1	Comp 2	Payment Period	Comp 3 (Adjusted for min-data)	Comp 4	Non-Dispersed Funds
Sep 2022	\$ 11.62	\$ 1.00	Jan 2023	\$ 11.62	\$ 1.00	May 2023	\$ 11.62	\$ 1.00	Qtr. 1	\$ 4.52	\$ 4.22	\$ 3.35
Oct 2022	\$ 11.62	\$ 1.00	Feb 2023	\$ 11.62	\$ 1.00	Jun 2023	\$ 11.62	\$ 1.00	Qtr. 2	\$ 4.52	\$ -	\$ 2.97
Nov 2022	\$ 11.62	\$ 1.00	Mar 2023	\$ 11.62	\$ 1.00	Jul 2023	\$ 11.62	\$ 1.00	Qtr. 3	\$ 3.39	\$ 4.22	\$ 2.36
Dec 2022	\$ 11.62	\$ 1.00	Apr 2023	\$ 11.62	\$ 1.00	Aug 2023	\$ 11.62	\$ 1.00	Qtr. 4	\$ 4.52	\$ 4.22	\$ 5.12

Member Months	Quarter 1			Quarter 2			Quarter 3			Quarter 4			Adjustment Period 1				Adjustment Period 2					Adj 3	Total			
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22		23	24	
Sep 2022	4,314	358	133	39	18	4	4	4	-	1	3	1	-	-	-	-	-	-	-	-	-	-	-	-	-	4,879
Oct 2022	4,342	417	61	31	13	13	3	4	2	2	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4,889
Nov 2022	4,515	243	77	24	27	7	5	2	8	(4)	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4,904
Dec 2022	4,493	231	91	36	8	11	6	4	(1)	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4,879
Jan 2023	4,350	387	78	37	33	12	6	3	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4,906
Feb 2023	4,400	312	80	39	48	14	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4,893
Mar 2023	4,438	283	107	93	17	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4,939
Apr 2023	4,399	357	150	13	(3)	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4,916
May 2023	4,415	388	68	12	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4,883
Jun 2023	4,326	327	113	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4,766
Jul 2023	4,353	358	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4,711
Aug 2023	4,208	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4,208

Member Month Count Instructions: Each quarter the scorecard will be updated with metric performance and achieved payment factor amounts. The scorecard will also calculate the payment associated with the current quarter and adjustments made to past quarters in the current quarter. The table Member Month Count reflects the actual member month case load for the selected MCO in that provider's service delivery area (SDA).



# Quality Incentive Payment Program - Year 6 (SFY23)

Quarter 4

June 2023 - August 2023

**\*\*Note: Enable Editing to use dropdowns\*\***

MCO:	All MCOs in Providers SDA	Facility Name:	CROWLEY NURSING AND REHABILITATION	SDA:	TARRANT
Facility ID:	103223	Legal Entity Name:	WINNIESTOWELL HOSPITAL DISTRICT	Medicaid Contract #	1019885

*Funds Earned	QUARTER 1			QUARTER 2			QUARTER 3			QUARTER 4			Adjustment Periods			Total
	Sep 2022	Oct 2022	Nov 2022	Dec 2022	Jan 2023	Feb 2023	Mar 2023	Apr 2023	May 2023	Jun 2023	Jul 2023	Aug 2023	Adj 1	Adj 2	Adj 3	Year to Date
Component 1	\$ 64,753	\$ 70,547	\$ 76,026	\$ 72,588	\$ 70,652	\$ 73,834	\$ 73,669	\$ 72,363	\$ 74,615	\$ 75,470	\$ 72,273	\$ 70,382	\$ -	\$ -	\$ -	\$ 867,173
Component 2	\$ 16,781	\$ 18,283	\$ 19,703	\$ 18,812	\$ 18,310	\$ 19,135	\$ 19,092	\$ 18,754	\$ 19,337	\$ 19,559	\$ 18,730	\$ 18,240	\$ -	\$ -	\$ -	\$ 224,737
Component 3	\$ 82,081			\$ 84,313			\$ 85,701			\$ 84,722			\$ -	\$ -	\$ -	\$ 336,817
Component 4	\$ 76,731			\$ 2,780			\$ 76,660			\$ 78,698			\$ -	\$ -	\$ -	\$ 234,868
Qtr. Non-Dispersed Funds	\$ 60,821			\$ 55,779			\$ 47,381			\$ 93,511			\$ -	\$ -	\$ -	\$ 257,492
<b>QUARTER TOTALS</b>	\$ 485,726			\$ 416,204			\$ 487,572			\$ 531,586			\$ -	\$ -	\$ -	\$ 1,921,086

Payment Period	From Month	To Month	Estimated Scorecard Release
Quarter 1	Sep-22	Nov-22	Jan-23
Quarter 2	Dec-22	Feb-23	Apr-23
Quarter 3	Mar-23	May-23	Jul-23
Quarter 4	Jun-23	Aug-23	Oct-23
Adjustment Period 1	Sep-23	Dec-23	Jan-24
Adjustment Period 2	Jan-24	Aug-24	Sep-24
Adjustment Period 3	Sep-24	Jul-25	Aug-25

	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June	July	Aug	Total	Pay Tab	Variance
Comp 1	\$ (146.37)	\$ (146.67)	\$ (147.12)	\$ (146.37)	\$ (147.18)	\$ (146.79)	\$ (148.17)	\$ (147.48)	\$ (146.49)	\$ (142.98)	\$ (141.33)	\$ (126.24)	\$ (1,733.19)		
Comp 3	\$ 29.15	\$ 29.15	\$ 34.98	\$ 52.47	\$ 122.43	\$ 361.46	\$ 647.13	\$ 932.80	\$ 2,728.44	\$ 27,785.78	\$ 27,465.13	\$ 24,532.64	\$ 84,721.56		
Comp 4	\$ (21.49)	\$ (21.59)	\$ (16.28)	\$ -	\$ -	\$ -	\$ 556.67	\$ 824.44	\$ 2,506.45	\$ 25,974.70	\$ 25,674.95	\$ 22,933.60	\$ 78,411.45		
Lapse	\$ 167.82	\$ 168.12	\$ 172.86	\$ 180.66	\$ 227.19	\$ 383.01	\$ 450.65	\$ 605.52	\$ 1,581.22	\$ 31,598.58	\$ 31,233.93	\$ 27,899.04	\$ 94,668.60		
													\$ 256,068.42	\$ 256,068.42	\$ -

The tables below display the funds earned as a result of meeting a metric. The \*total earned will increase or decrease as member months are adjusted through the program year.

COMPONENT 1 - NSGO - MONTHLY			
QAPI			
Description: Facility holds a QAPI meeting each month in accordance with quarterly federal requirements.			
Month	Met	Month	Met
Sep 2022	YES	Mar 2023	YES
Oct 2022	YES	Apr 2023	YES
Nov 2022	YES	May 2023	YES
Dec 2022	YES	Jun 2023	YES
Jan 2023	YES	Jul 2023	YES
Feb 2023	YES	Aug 2023	YES

COMPONENT 2 - ALL FACILITIES - MONTHLY											
Metric 1: +4 Hours RN				Metric 2: +8 Hours RN				Metric 3: Workforce Development			
Description: Facility maintains four additional hours of registered nurse (RN) staffing coverage per day, beyond the CMS mandate.				Description: Facility maintains eight additional hours of registered nurse (RN) staffing coverage per day, beyond the CMS mandate.				Description: Facility has a staffing recruitment and retention program that includes a self-directed plan and monitoring outcomes.			
Month	Met	Month	Met	Month	Met	Month	Met	Month	Met	Month	Met
Sep 2022	YES	Mar 2023	YES	Sep 2022	YES	Mar 2023	YES	Sep 2022	YES	Mar 2023	YES
Oct 2022	YES	Apr 2023	YES	Oct 2022	YES	Apr 2023	YES	Oct 2022	YES	Apr 2023	YES
Nov 2022	YES	May 2023	YES	Nov 2022	YES	May 2023	YES	Nov 2022	YES	May 2023	YES
Dec 2022	YES	Jun 2023	YES	Dec 2022	YES	Jun 2023	YES	Dec 2022	YES	Jun 2023	YES
Jan 2023	YES	Jul 2023	YES	Jan 2023	YES	Jul 2023	YES	Jan 2023	YES	Jul 2023	YES
Feb 2023	YES	Aug 2023	YES	Feb 2023	YES	Aug 2023	YES	Feb 2023	YES	Aug 2023	YES

Conditions of Participation
<b>Component 1 and Component 2 Metric 3</b>
'YES'/'NO' results indicate only whether a payment is being directed to the NF. Such monthly payments are uniform rate increases and do not reflect HHSC's final determination of whether conditions of participation have been met in that reporting period.
A NF that fails to meet all required conditions of participation will be removed from the program retroactive to the first day of the program period. HHSC will redistribute revenue paid to facilities removed from the program to the remaining facilities participating in the program period. Facilities that meet the conditions of participation will remain enrolled in the program period. For a full list of the required conditions of participation, including conditions not discussed here, please refer to 1 TAC 353.1302(e).

Note: Component 1 is a Condition of Participation.

Note: Component 2 Metric 3 is a Condition of Participation.

COMPONENT 3 - ALL FACILITIES - QUARTERLY																				
Payment Period	Metric 1: Pressure Ulcers (CMS N015.03)					Metric 2: Antipsychotics (CMS N031.03)					Metric 3: Mobility (CMS N035.03)					Metric 4: UTI (CMS N024.02)				
	Target	Num	Dem	Actual	Met	Target	Num	Dem	Actual	Met	Target	Num	Dem	Actual	Met	Target	Num	Dem	Actual	Met
Qtr. 1	14.66	0.00	55.00	0	YES	11.91	5.00	59.00	3.474576271	YES	28.03	6.00	41.00	14.634146341	YES	4.71	0.00	64.00	0	YES
Qtr. 2	13.89	3.00	57.00	5.26	YES	11.91	7.00	69.00	10.14	YES	26.56	9.00	50.00	18.00	YES	4.46	0.00	71.00	0.00	YES
Qtr. 3	13.12	5.00	57.00	8.77	YES	11.91	4.00	66.00	6.06	YES	25.08	4.00	46.00	8.70	YES	4.21	0.00	49.00	0.00	YES
Qtr. 4	12.35	2.00	53.00	3.77	YES	11.91	3.00	63.00	4.76	YES	23.61	7.00	44.00	99.25	YES	3.96	0.00	64.00	100.00	YES

Note: For Metric target fields showing "Min Data" or "Withheld", please contact the QIPP mailbox at QIPP@hhsc.state.tx.us to receive your facilities complete metric results. The metric value was redacted due to HIPAA compliance or not meeting the minimum data requirement to calculate a value.



**COMPONENT 4 - NSGO - QUARTERLY**

Payment Period	Metric 1: Pneumococcal Vaccine (CMS N020.02)					Metric 2: Influenza Vaccine (CMS N016.03)				
	Target	Num	Dem	Actual	Met	Target	Num	Dem	Actual	Met
Qtr. 1	N/A	N/A	N/A	N/A	YES	N/A	N/A	N/A	N/A	YES
Qtr. 2	N/A	N/A	N/A	N/A	NO	N/A	N/A	N/A	N/A	NO
Qtr. 3	N/A	N/A	N/A	N/A	YES	N/A	N/A	N/A	N/A	YES
Qtr. 4	89.41%	NA	NA	99.251%	YES	24.23%	NA	NA	100.000%	YES

**COMPONENT 4 - NSGO - QUARTERLY**

Month	Comp 1	Comp 2	Month	Comp 1	Comp 2	Month	Comp 1	Comp 2	Payment Period	Comp 3 (Adjusted for min-data)	Comp 4	Non-Dispersed Funds
Sep 2022	\$ 15.01	\$ 1.30	Jan 2023	\$ 15.01	\$ 1.30	May 2023	\$ 15.01	\$ 1.30	Qtr. 1	\$ 5.83	\$ 5.45	\$ 4.32
Oct 2022	\$ 15.01	\$ 1.30	Feb 2023	\$ 15.01	\$ 1.30	Jun 2023	\$ 15.01	\$ 1.30	Qtr. 2	\$ 5.83	\$ -	\$ 3.84
Nov 2022	\$ 15.01	\$ 1.30	Mar 2023	\$ 15.01	\$ 1.30	Jul 2023	\$ 15.01	\$ 1.30	Qtr. 3	\$ 5.83	\$ 5.45	\$ 3.19
Dec 2022	\$ 15.01	\$ 1.30	Apr 2023	\$ 15.01	\$ 1.30	Aug 2023	\$ 15.01	\$ 1.30	Qtr. 4	\$ 5.83	\$ 5.45	\$ 6.63

Member Months	Quarter 1			Quarter 2			Quarter 3			Quarter 4			Adjustment Period 1				Adjustment Period 2					Adj 3	Total		
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22		23	24
Sep 2022	4,314	358	133	39	18	4	4	4	-	1	3	1	-	-	-	-	-	-	-	-	-	-	-	-	4,879
Oct 2022	4,342	417	61	31	13	13	3	4	2	2	1	-	-	-	-	-	-	-	-	-	-	-	-	-	4,889
Nov 2022	4,515	243	77	24	27	7	5	2	8	(4)	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4,904
Dec 2022	4,493	231	91	36	8	11	6	4	(1)	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4,879
Jan 2023	4,350	387	78	37	33	12	6	3	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4,906
Feb 2023	4,400	312	80	39	48	14	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4,893
Mar 2023	4,438	283	107	93	17	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4,939
Apr 2023	4,399	357	150	13	(3)	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4,916
May 2023	4,415	388	68	12	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4,883
Jun 2023	4,326	327	113	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4,766
Jul 2023	4,353	358	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4,711
Aug 2023	4,208	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4,208

Member Month Count Instructions: Each quarter the scorecard will be updated with metric performance and achieved payment factor amounts. The scorecard will also calculate the payment associated with the current quarter and adjustments made to past quarters in the current quarter. The table Member Month Count reflects the actual member month case load for the selected MCO in that provider's service delivery area (SDA).

# Quality Incentive Payment Program - Year 6 (SFY23)

Quarter 4

June 2023 - August 2023

**\*\*Note: Enable Editing to use dropdowns\*\***

MCO:	All MCOs in Providers SDA	Facility Name:	HARBOR LAKES NURSING AND REHABILITATION CENTER	SDA:	TARRANT
Facility ID:	103435	Legal Entity Name:	WINNIESTOWELL HOSPITAL DISTRICT	Medicaid Contract #	1019881

*Funds Earned	QUARTER 1			QUARTER 2			QUARTER 3			QUARTER 4			Adjustment Periods			Total
	Sep 2022	Oct 2022	Nov 2022	Dec 2022	Jan 2023	Feb 2023	Mar 2023	Apr 2023	May 2023	Jun 2023	Jul 2023	Aug 2023	Adj 1	Adj 2	Adj 3	Year to Date
Component 1	\$ 50,862	\$ 55,413	\$ 59,716	\$ 57,016	\$ 55,496	\$ 57,995	\$ 57,865	\$ 56,840	\$ 58,608	\$ 59,280	\$ 56,769	\$ 55,283	\$ -	\$ -	\$ -	\$ 681,144
Component 2	\$ 13,158	\$ 14,335	\$ 15,448	\$ 14,750	\$ 14,356	\$ 15,003	\$ 14,969	\$ 14,704	\$ 15,162	\$ 15,335	\$ 14,686	\$ 14,301	\$ -	\$ -	\$ -	\$ 176,208
Component 3	\$ 64,482			\$ 50,261			\$ 50,571			\$ 34,266			\$ -	\$ -	\$ -	\$ 199,580
Component 4	\$ 60,258			\$ 2,183			\$ 60,202			\$ 61,803			\$ -	\$ -	\$ -	\$ 184,447
Qtr. Non-Dispersed Funds	\$ 47,869			\$ 41,358			\$ 35,486			\$ 66,675			\$ -	\$ -	\$ -	\$ 191,387
<b>QUARTER TOTALS</b>	\$ 381,541			\$ 308,417			\$ 364,408			\$ 378,400			\$ -	\$ -	\$ -	\$ 1,432,766

Payment Period	From Month	To Month	Estimated Scorecard Release
Quarter 1	Sep-22	Nov-22	Jan-23
Quarter 2	Dec-22	Feb-23	Apr-23
Quarter 3	Mar-23	May-23	Jul-23
Quarter 4	Jun-23	Aug-23	Oct-23
Adjustment Period 1	Sep-23	Dec-23	Jan-24
Adjustment Period 2	Jan-24	Aug-24	Sep-24
Adjustment Period 3	Sep-24	Jul-25	Aug-25

	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June	July	Aug	Total	Pay Tab	Variance
Comp 1	\$ (97.58)	\$ (97.78)	\$ (98.08)	\$ (97.58)	\$ (98.12)	\$ (97.86)	\$ (98.78)	\$ (98.32)	\$ (97.66)	\$ (95.32)	\$ (94.22)	\$ (84.16)	\$ (1,155.46)		
Comp 3	\$ 22.90	\$ 22.90	\$ 27.48	\$ 30.92	\$ 72.14	\$ 212.97	\$ 381.29	\$ 549.60	\$ 1,607.58	\$ 10,914.14	\$ 10,788.19	\$ 9,636.32	\$ 34,266.42		
Comp 4	\$ (27.34)	\$ (27.44)	\$ (23.30)	\$ -	\$ -	\$ -	\$ 426.80	\$ 637.24	\$ 1,958.89	\$ 20,398.48	\$ 20,163.08	\$ 18,010.24	\$ 61,516.65		
Lapse	\$ 163.22	\$ 163.52	\$ 167.34	\$ 122.96	\$ 157.34	\$ 272.70	\$ 361.85	\$ 477.52	\$ 1,206.82	\$ 22,495.52	\$ 22,235.92	\$ 19,861.76	\$ 67,686.47		
													\$ 162,314.08	\$ 162,314.08	\$ 0.01

The tables below display the funds earned as a result of meeting a metric. The \*total earned will increase or decrease as member months are adjusted through the program year.

COMPONENT 1 - NSGO - MONTHLY			
QAPI			
Description: Facility holds a QAPI meeting each month in accordance with quarterly federal requirements.			
Month	Met	Month	Met
Sep 2022	YES	Mar 2023	YES
Oct 2022	YES	Apr 2023	YES
Nov 2022	YES	May 2023	YES
Dec 2022	YES	Jun 2023	YES
Jan 2023	YES	Jul 2023	YES
Feb 2023	YES	Aug 2023	YES

COMPONENT 2 - ALL FACILITIES - MONTHLY											
Metric 1: +4 Hours RN				Metric 2: +8 Hours RN				Metric 3: Workforce Development			
Description: Facility maintains four additional hours of registered nurse (RN) staffing coverage per day, beyond the CMS mandate.				Description: Facility maintains eight additional hours of registered nurse (RN) staffing coverage per day, beyond the CMS mandate.				Description: Facility has a staffing recruitment and retention program that includes a self-directed plan and monitoring outcomes.			
Month	Met	Month	Met	Month	Met	Month	Met	Month	Met	Month	Met
Sep 2022	YES	Mar 2023	YES	Sep 2022	YES	Mar 2023	YES	Sep 2022	YES	Mar 2023	YES
Oct 2022	YES	Apr 2023	YES	Oct 2022	YES	Apr 2023	YES	Oct 2022	YES	Apr 2023	YES
Nov 2022	YES	May 2023	YES	Nov 2022	YES	May 2023	YES	Nov 2022	YES	May 2023	YES
Dec 2022	YES	Jun 2023	YES	Dec 2022	YES	Jun 2023	YES	Dec 2022	YES	Jun 2023	YES
Jan 2023	YES	Jul 2023	YES	Jan 2023	YES	Jul 2023	YES	Jan 2023	YES	Jul 2023	YES
Feb 2023	YES	Aug 2023	YES	Feb 2023	YES	Aug 2023	YES	Feb 2023	YES	Aug 2023	YES

Conditions of Participation
<b>Component 1 and Component 2 Metric 3</b>
'YES'/'NO' results indicate only whether a payment is being directed to the NF. Such monthly payments are uniform rate increases and do not reflect HHSC's final determination of whether conditions of participation have been met in that reporting period.
A NF that fails to meet all required conditions of participation will be removed from the program retroactive to the first day of the program period. HHSC will redistribute revenue paid to facilities removed from the program to the remaining facilities participating in the program period. Facilities that meet the conditions of participation will remain enrolled in the program period. For a full list of the required conditions of participation, including conditions not discussed here, please refer to 1 TAC 353.1302(e).

Note: Component 1 is a Condition of Participation.

Note: Component 2 Metric 3 is a Condition of Participation.

COMPONENT 3 - ALL FACILITIES - QUARTERLY																				
Payment Period	Metric 1: Pressure Ulcers (CMS N015.03)					Metric 2: Antipsychotics (CMS N031.03)					Metric 3: Mobility (CMS N035.03)					Metric 4: UTI (CMS N024.02)				
	Target	Num	Dem	Actual	Met	Target	Num	Dem	Actual	Met	Target	Num	Dem	Actual	Met	Target	Num	Dem	Actual	Met
Qtr. 1	6.38	1.00	31.00	3.2258064516	YES	10.08	4.00	46.00	3.6956521738	YES	18.04	4.00	30.00	13.3333333333	YES	1.10	0.00	46.00	0	YES
Qtr. 2	6.38	2.00	31.00	6.45	NO	10.08	4.00	50.00	8.00	YES	18.04	2.00	29.00	6.90	YES	1.10	0.00	49.00	0.00	YES
Qtr. 3	6.38	3.00	36.00	8.33	NO	10.08	4.00	50.00	8.00	YES	18.04	2.00	28.00	7.14	YES	1.10	0.00	58.00	0.00	YES
Qtr. 4	6.38	3.00	32.00	9.38	NO	10.08	5.00	49.00	10.20	NO	18.04	3.00	31.00	99.47	YES	1.10	0.00	49.00	100.00	YES

Note: For Metric target fields showing "Min Data" or "Withheld", please contact the QIPP mailbox at QIPP@hhsc.state.tx.us to receive your facilities complete metric results. The metric value was redacted due to HIPAA compliance or not meeting the minimum data requirement to calculate a value.

**COMPONENT 4 - NSGO - QUARTERLY**

Payment Period	Metric 1: Pneumococcal Vaccine (CMS N020.02)					Metric 2: Influenza Vaccine (CMS N016.03)				
	Target	Num	Dem	Actual	Met	Target	Num	Dem	Actual	Met
Qtr. 1	N/A	N/A	N/A	N/A	YES	N/A	N/A	N/A	N/A	YES
Qtr. 2	N/A	N/A	N/A	N/A	NO	N/A	N/A	N/A	N/A	NO
Qtr. 3	N/A	N/A	N/A	N/A	YES	N/A	N/A	N/A	N/A	YES
Qtr. 4	97.97%	NA	NA	99.465%	YES	95.54%	NA	NA	100.000%	YES

**COMPONENT 4 - NSGO - QUARTERLY**

Month	Comp 1	Comp 2	Month	Comp 1	Comp 2	Month	Comp 1	Comp 2	Payment Period	Comp 3 (Adjusted for min-data)	Comp 4	Non-Dispersed Funds
Sep 2022	\$ 11.79	\$ 1.02	Jan 2023	\$ 11.79	\$ 1.02	May 2023	\$ 11.79	\$ 1.02	Qtr. 1	\$ 4.58	\$ 4.28	\$ 3.40
Oct 2022	\$ 11.79	\$ 1.02	Feb 2023	\$ 11.79	\$ 1.02	Jun 2023	\$ 11.79	\$ 1.02	Qtr. 2	\$ 3.44	\$ -	\$ 2.84
Nov 2022	\$ 11.79	\$ 1.02	Mar 2023	\$ 11.79	\$ 1.02	Jul 2023	\$ 11.79	\$ 1.02	Qtr. 3	\$ 3.44	\$ 4.28	\$ 2.39
Dec 2022	\$ 11.79	\$ 1.02	Apr 2023	\$ 11.79	\$ 1.02	Aug 2023	\$ 11.79	\$ 1.02	Qtr. 4	\$ 2.29	\$ 4.28	\$ 4.72

Member Months	Quarter 1			Quarter 2			Quarter 3			Quarter 4			Adjustment Period 1				Adjustment Period 2					Adj 3	Total			
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22		23	24	
Sep 2022	4,314	358	133	39	18	4	4	4	-	1	3	1	-	-	-	-	-	-	-	-	-	-	-	-	-	4,879
Oct 2022	4,342	417	61	31	13	13	3	4	2	2	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4,889
Nov 2022	4,515	243	77	24	27	7	5	2	8	(4)	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4,904
Dec 2022	4,493	231	91	36	8	11	6	4	(1)	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4,879
Jan 2023	4,350	387	78	37	33	12	6	3	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4,906
Feb 2023	4,400	312	80	39	48	14	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4,893
Mar 2023	4,438	283	107	93	17	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4,939
Apr 2023	4,399	357	150	13	(3)	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4,916
May 2023	4,415	388	68	12	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4,883
Jun 2023	4,326	327	113	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4,766
Jul 2023	4,353	358	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4,711
Aug 2023	4,208	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4,208

Member Month Count Instructions: Each quarter the scorecard will be updated with metric performance and achieved payment factor amounts. The scorecard will also calculate the payment associated with the current quarter and adjustments made to past quarters in the current quarter. The table Member Month Count reflects the actual member month case load for the selected MCO in that provider's service delivery area (SDA).

Administrator: Jace Morris

The administrator was unavailable. Spoke with the admissions coordinator, Jennifer Puga.

The facility is licensed for 142 beds. Their current census is 79. They have 1 pending admission and no planned discharges at this time.

They are doing well with staffing efforts. They are not utilizing agency for any staffing needs currently.

They state came recently, but there were no citations. Their last fullbook survey was October 2022. They are expecting the state to return soon to conduct their annual survey.

Green Oaks Nursing & Rehabilitation is currently 4-star rating in Quality Measures and 1-star rating in Staffing.

There is currently 1 resident with COVID in the facility. The resident is being taken care of according to COVID guidelines and facility policies. No staff or other residents have COVID.

The facility has offered and administered flu shots to those who gave consent.

Administrator: John Hass

The administrator was unavailable. Spoke with the director of nursing, Rachel Glaze.

The facility is licensed for 124 beds. Their current census is 69.

The facility is not utilizing agency to cover any staffing needs. They are recruiting to fill some vacancies including 4 day-shift CNAs, and 1 night-shift CNA.

The state came to investigate a complaint and a self-report earlier this month. All investigations from this visit were cleared up and the state exited. The facility already had its fullbook survey earlier this year in Jun. There are no outstanding self-reports at this time.

Copperas Cove LTC has some performance improvement plans in place. These plans are addressing falls, reviewing infection control and UTI's. Discussed the facilities efforts and progress on these plans.

The facility is currently rated a 1-star overall. They have a 2-star rating in Health Inspections, a 1-star rating in Staffing, and a 2-star rating in Quality Measures.

There is currently no COVID in the facility. However, they are in touch with TMF who came to visit the facility and did a walk through to discuss opportunities for improvement and best practices. The facility still has monthly calls with TMF.

The facility has administered flu shots to staff and residents this season. Both have had high acceptance and vaccination rates. They have recently gathered consents for the new COVID vaccine and will administer the vaccine once it is delivered from their pharmacy.

Administrator: Daniel Rodriguez

The facility is licensed for 170 beds. Their current census is 94. They have 3 pending admissions and 2 planned discharges.

Staffing is in good shape overall. They have recently hired a new ADON. Previously, the facility had 8 CNA openings, but are now down to only 2 CNA openings. Discussed their efforts to fill vacancies and best practices with recruitment and retention. They are taking an active role in the recruiting and onboarding process to ensure they are in frequent and immediate communication with applicants. Where possible, the facility also tries to do same-day on boarding.

The state just visited earlier this month for the facility's annual full book survey. Daniel reported they are submitting their POC today. The facility received 6 federal/state tags, and one state-only tag. They also received two life safety tags. Unfortunately, there was 1 G-tag, due to a resident falling in the shower. The facility has completed in-servicing and training related to this matter to ensure this does not occur again. Discussed environmental hazards as well as roles and responsibilities of CNA's and other direct care staff.

Mission nursing and rehabilitation center just submitted a new self-report regarding an allegation of neglect. The facility is still investigating this allegation internally.

Some ongoing performance improvement plans are related to falls, and psychotropics. Their goal is to maintain a 5-star rating in Quality Measures. They currently have a 4-star rating overall, with a 3-star rating in Health Inspections, and a 2-star rating in Staffing.

There is currently no COVID in the building.

They have begun offering and administering the flu vaccine to those who have given consent. They're in the process of ordering the new COVID vaccine to be made available for residents and staff.

Administrator: Melissa Harris

Melissa stated she is currently the administrator but has given her notice of resignation. Her last day as administrator at the facility will be 11/17/23. She stated another regional administrator will fill in at the facility until a permanent candidate is selected as her replacement.

The facility is licensed for 140 beds. Their current census is 79. They have 4 pending admissions and 3 planned discharges.

Hewitt Nursing and Rehabilitation enlisted agency staffing recently to cover some open shifts. The facility has some new nurses and CNAs starting this week. They are still recruiting several nurse and CNA openings.

The state came on 10/16 to investigate in response to previously reported COVID cases. The state completed their visit, and all was unsubstantiated. Their last fullbook survey was almost a year ago so they have entered their window for annual survey. There are no self-reports pending investigation at this time.

Hewitt Nursing and Rehabilitation has a few performance improvement plans ongoing relating to falls and RTA rates. Discussed best practices and their efforts to improve these areas.

The facility currently has a 3-star rating overall. They have a 4-star rating in Health inspections and 1-star rating in Staffing.

They have several cases of COVID amongst residents at this time. They are following COVID guidelines and facility policies as they care for these residents. They are starting to have several residents recover and come off COVID requirements.

Hewitt Nursing and Rehabilitation staff have started administering flu shots to residents, and will continue to offer and administer to staff next. They are ordering the new COVID vaccine as well.

The administrator was given training regarding pressure injury prevention & management. The training included discussions based on resources from Texas HHSC regarding implementation of best practices for this type of program. Major discussions involved completing assessments for pressure injuries (and risk factors) on admission and development of person-centered goals and interventions. The importance of creating personalized care plans was discussed, as well as the need to have continuous monitoring and evaluation throughout the process. Melissa agreed with the training and shared her team's focus on injury prevention.

Administrator: Jodi Scarbro

The facility is licensed for 120 beds. Their current census is 91. They also have a high skilled-population of 32 residents. Due to the high volume and frequency of skilled admissions at the facility, they have hired an admissions nurse to support admitting efforts on the 2PM-10PM shift.

The facility has not utilized agency for staffing needs in over a year. Their department managers are all in place, and recruiting efforts are focused on CNAs at this time.

The state came to the facility in September 2023 for their annual fullbook survey. The life safety POC was accepted. The health survey resulted in three deficiencies which were all corrected. The facility recently submitted evidence of these corrections for review by the state. Recently, the facility submitted a self-report regarding a new COVID case in the facility. This self-report is outstanding and has not been investigated yet by the state.

The facility has worked hard to have strong quality measures and there is nothing currently flagging on their CASPER report. The facility has ongoing performance improvement plans related to recruiting and retention of staff as well as falls with major injury. Discussed best practices and the facilities efforts related to these performance improvement plans.

The facility reported having a 5-star rating overall, as well as a 5-star rating in Quality Measures. They reported a 2-star rating in Staffing, and a 4-star rating in Health Inspections.

There are active COVID cases that the facility is managing. There is one resident with COVID, and two staff members out with COVID. They are following COVID guidelines and facility policies to care for the afflicted resident. They are also following protocol to ensure staff with COVID do not return to work until they are eligible to return.

The facility has completed flu shots for this season. They are working on getting the new COVID vaccine and making it available and known for those residents and staff who want it. Discussed the facilities efforts regarding vaccination education and awareness.



Administrator: Kristi Blackwell

The facility is licensed for 134 beds. Their current census is 77. They have 3 pending admissions today, and 3 planned discharges this week.

Staffing is struggling at this time. They have not used agency to cover staffing needs this week, but they are experiencing challenges incentivizing employees to cover gaps in the schedule. They need 6 CNAs, 3 double-weekend nurses, 1 weekend supervisor, and 1 MDS coordinator. They are working on a retention plan as well as a mentor program. They are trying to incentivize staff to be good mentors for new staff to support longevity of employment amongst team members. Discussed opportunities to recruit staff.

Their last full book survey was in August, two months ago. They received 4 minor tags, which have all been cleared. The state returned in September for the life safety portion of their annual survey. The facility's POC was accepted, and they have been cleared. There are no self-reports pending investigation at this time.

The facility is currently a 2-star rating overall. They hope to bump up to a 3-star rating overall in February 2024 when an old IJ clears from their rating. They have a 2-star rating in Health Inspections, a 1-star rating in Staffing, and a 5-star rating in Quality Measures. Discussed their quality goals and efforts. They are always focusing on improving and have recently been offering coding and documentation training to staff.

There are no active COVID cases in the building.

Stonegate Nursing and Rehabilitation had flu shots administered earlier this month. They partner with H-E-B to host their vaccine clinics. The facility also offered COVID vaccines this month. They had good reception to the flu shots but had a lot of reluctance from residents and staff for the new COVID vaccine.

Administrator: Drew Gurley

The facility is licensed for 140 beds. Their current census is 62. They have 10 pending admissions, and 2 planned discharges.

Treviso Transitional Care Center has not yet been able to eliminate agency utilization. They are currently recruiting for one CNA, and five LVNs. They are also recruiting a director of nursing. Discussed the facility's recruiting and retention efforts.

The state visited the facility on October 12<sup>th</sup> and put the facility in immediate jeopardy due to concerns stemming from quality of care and physician notification. The facility was able to have the immediate jeopardy status lifted, but they will likely have a J-tag on their 2567. They are still waiting to receive the 2567 in order to write their POC. Despite this bad news, the administrator and his team have a positive outlook and plan to learn and improve based on this experience and the feedback from the state. Their last fullbook survey was earlier this year in May 2023. There are no outstanding self-reports at this time.

The facility is currently a 1-star rating overall, but they are a 5-star rating in Quality Measures. They are working on some performance improvement plans as they continue to focus on quality measures. Some current plans involve efforts to improve falls and wounds in the facility. Discussed best practices and the facility's efforts and progress on these plans.

There are currently no COVID cases in the facility.

The facility has not yet offered the new COVID vaccine but are working on it. Discussed vaccination education and awareness efforts in the facility.

Administrator: Lorraine Haynes

The facility is licensed for 120 beds. Several of the rooms in the facility have been converted to offices. The facility is budgeted at a census of 91, and their functional capacity is 95. Their current census is 89.

The facility has done a great job with staffing and is not utilizing any agency. They have some vacancies including a few night nurse positions and some CNA positions.

The state came to visit this month and exited the facility yesterday. There were 29 intakes and two complaints which unfortunately did result in the facility receiving an abuse tag. They also received tags regarding failure to report, and tags for ADLs and care plans. Despite the abuse tag, there was no harm to the resident. The state's last fullbook survey was over a year ago in September 2022. They are now in their fullbook window and expect the state to return soon to complete their annual survey. The facility also has three outstanding self-reports.

The facility has several performance improvement plans in place. Some of these include reducing residents with depression, anti-anxiety medication utilization, and falls. Additional plans being worked are related to staff cell phone utilization, food, and water temperature. Discussed the facility's processes and efforts related to these plans. Discussed opportunities and best practices.

The facility currently has a 1-star rating overall. They are a 1-star rating in Health Inspections, a 2-star rating in Staffing, and a 3-star rating in Quality Measures. They continue to set appropriate quality goals and stay on track to successfully complete them.

There are no COVID cases in the facility at this time.

Flu shots have been accepted well by residents and staff this season. They are getting the new COVID vaccine. Discussed the facility's efforts regarding vaccination education and awareness.

Facility: William (Steve) Hooper

The facility is licensed for 139 beds. Their current census is 100. They have a handful of pending admissions.

Staffing is good in the facility. They are recruiting for some CNA and CMA openings. They are not utilizing agency staffing to cover any shifts.

The state came to the facility this month for their CHOW, two self-reports, and 1 complaint. All the reasons for the state's visit were cleared. The state came to the facility a year ago in October 2022 for their annual fullbook survey. The facility is in its fullbook survey window, and they are ready for state to return any day. There are two outstanding self-reports submitted recently. One is due to a new COVID positive staff member and the second is regarding a resident fall with injury.

Forum Parkway Health & Rehabilitation has worked hard to maintain good quality measures. In order to sustain these efforts, they are actively working on several performance improvement plans which affect quality of care in the facility. Some of the current plans include low risk residents losing bowel and bladder continence and staffing efforts to decrease licensed nurse turnover. Discussed the facilities efforts and progress towards their goals as well as best practices.

The facility currently has a 5-star rating overall. They also have a 5-star rating in Health Inspections, a 2-star rating in Staffing, and a 4-star rating in Quality Measures.

There are no residents in the facility with COVID at this time. There is one staff member who is positive with COVID which was the cause of the previously mentioned self-report. They expect the staff member to return to work soon once are eligible to return.

The facility just received their flu shots and will administer them soon. They are also preparing for the new COVID vaccine.

Administrator: Jana Sanders

The facility is licensed for 122 beds. The facility's current census is 80. They have 1 pending discharge, and 3 pending admissions.

Staffing is going great overall at the facility. They have a few vacancies for which they are currently recruiting. The open positions include 1 nurse, and 3 CNA positions.

The state visited recently to investigate 1 self-report and 1 complaint. The state exited while substantiating the self-report and complaint. Their last full book survey was earlier this year in June 2023. The POC submitted by the facility was accepted and they are all clear. There are no self-reports outstanding at this time.

The facility is working on a few performance improvement plans including fall prevention and reduction in anti-psychotic utilization. They are working with their medical director, pharmacy consultant, and psychiatrist as they focus on these areas. Discussed best practices and the facility's efforts to show improvement in these areas.

The facility currently has a 3-star overall rating. They reported their Quality Measures rating just increased to 4-star. They intend to continue pushing for improvement as they hope to further increase their star ratings.

There are no active COVID cases in the facility at this time.

Vaccination compliance has been good overall. They have administered flu shots to those who have given consent this season. The administrator reported about 90% and 88% of staff and residents respectively have been COVID vaccinated. Discussed vaccination education efforts at the facility.

Administrator: Lee Richard

The facility is licensed for 144 beds. Their current census is 103. They have several pending admissions, including three readmissions.

Staffing is stable currently, and the facility is not utilizing agency to cover any staffing needs. They have a handful of openings including 3 CNAs and 2 nurses.

The state came to the facility last week to investigate 4 complaints and 1 self-report. The investigations from this visit were unsubstantiated. The facility's last fullbook survey was in September 2022. The facility is ready for the state to come at any time to conduct this year's annual fullbook survey. The facility is working on submitting a new self-report regarding a resident alleging abuse. The facility has investigated this allegation internally and have internally unsubstantiated the allegation.

Red Oak Health and Rehabilitation Center is rated as a 1-star overall. They also have a 1-star rating in Health Inspections, a 1-star rating in Staffing, but a 4-star rating in Quality Measures. They expect to move to a 5-star rating in Quality Measures soon.

There are no active COVID cases currently.

They have seen good overall compliance with vaccinations at the facility. They have offered and administered flu shots this season. They are offering the new COVID vaccine to residents and staff as well.

Administrator: Dylan Gadberry

The facility is licensed for 120 beds. The current census is 84. They have about 5 pending admissions, 2 pending discharges, and 4 residents in the hospital.

The facility has not used agency staffing in a long time. They have 4 positions open at this time. There are 3 CNA vacancies, and 1 double weekend nurse.

The state visited the facility on Thursday October 19<sup>th</sup> to investigate a complaint and a COVID self-report. The complaint and the COVID self-report were both unsubstantiated. However, they received one minor tag regarding medical documentation. Their last full book survey was in March 2023. There are no pending self-reports.

Crowley Nursing and Rehabilitation is always working on performance improvement. One performance improvement plan is to decrease the number of patients losing independence. Discussed opportunities for improvement and the facility's efforts to monitor residents effectively. They hope these efforts and others will continue to support their goals of maintaining great quality measures and outcomes.

The facility currently has a 2-star overall rating. They have a 2-star rating in Health Inspections, 1-star in Staffing, and 5-star in Quality Measures.

The facility has 1 COVID positive resident currently.

The facility is working on getting consents to do a vaccination clinic soon.

Crowley Nursing and Rehabilitation's new secure unit is open. They have 20 all-female beds in this unit. They already have 5 residents in the unit and are working on steadily increasing this unit's census.

Administrator: Josie Pebsworth

The facility is licensed for 90 beds. They currently have a census of 58. They have 1 pending admission, and 3 residents in the hospital.

The facility is still filling all staffing needs without utilizing agency staffing. They need 1 PRN night nurse, 1 PRN CNA, and there is 1 housekeeper position open. Josie attributed the staffing successes to the facility's excellent DON.

Pecan Bayou Nursing and Rehabilitation had their last fullbook survey earlier this year in May 2023. They currently have one self-report outstanding, and two additional reports due to COVID cases. The state hasn't investigated any of these yet. The self-report was related to a family complaint which the facility unsubstantiated internally.

As the facility has a 5-star quality rating, they are always striving for excellence and high standards of care. Pecan Bayou Nursing and Rehabilitation has ongoing performance improvement plans related to catheter care and falls.

The facility has a 5-star rating overall. They have a 5-star rating in Health Inspections, a 3-star rating in Staffing, and a 5-star rating in Quality Measures.

There are no current COVID cases at the facility.

The facility has historically had good vaccination compliance, but they are starting to see reluctance from residents and staff related to the new COVID vaccine. Discussed the facility's efforts to offer education and awareness to residents and staff.



Administrator: Donna Tillman

The facility is licensed for 120 beds. Their census is 72 at this time. They have recently had 8 discharges but have 4 pending admissions.

They have not utilized agency staffing since March. They are recruiting charge nurses and CNAs. They have a CNA program and are working through some issues they've experienced with TULIP to see those students through testing and certification.

Holland Lake Rehabilitation and Wellness Center has not had any regulatory findings since the state last came for their fullbook survey at the end of August 2023. They submitted their completed POC for their health survey, which has been accepted by the state. Their life safety POC has also been submitted and it is pending acceptance.

There are two outstanding self-reports due to COVID and an unwitnessed fall with injury. There is no longer any COVID in the building, and the resident who fell went out to the hospital and has already returned.

The facility is always working on improving their systems. An area they are reviewing now is their RTA rates. Discussed opportunities for consideration as they work on improving RTA. They hope their efforts will continue to support their 5-star rating in Quality Measures.

Holland Lake Rehabilitation and Wellness Center has completed flu shots for residents and staff. The new COVID vaccine is now available, and their infection control nurse is working on retrieving consents.

Donna reported she recently returned from ACHA where she received the Bronze Award on behalf of Holland Lake Rehabilitation and Wellness Center. The award recognizes commitment to quality. Donna said they are now going to work toward the Silver Award, which is the next step and higher-ranking award from ACHA.

Administrator: Christopher (CJ) Cholico

The facility is licensed for 142 beds. Their current census is 67. They are working on 2 potential admissions today, and hopefully another 3 admissions later this week.

Staffing is doing alright at this time. They have a CNA class which will complete the training program soon. If all the new CNAs graduate, they should be able to fill the CNA vacancies at the facility. They have one other nurse vacancy. They are not utilizing agency to cover staffing needs.

The state came to investigate 2 self-reports at the beginning of October. Both reports were cleared and unsubstantiated. Their last full book survey was earlier this year in June 2023. The POC was accepted, and the facility has been cleared. They have submitted 1 self-report recently, which is still outstanding. The self-report is regarding a resident who fell out of their chair with a potential injury. The facility ordered an X-ray from their x-ray service, and the X-ray showed a fracture. The facility then sent this resident to the hospital, but the hospital returned the patient to the facility after they did their own x-ray and stated that the patient was clear and there was no fracture. The facility will continue to monitor this resident.

Harbor Lakes Nursing and Rehabilitation Center has ongoing performance improvement plans related to falls, skins, and utilization of anti-psychotics and hypnotics. They are going to close their performance improvement plan on skins soon. Discussed the facilities efforts on these performance improvement plans and staff education.

The facility is rated at a 5-star overall. They are also reporting a 5-star rating in Health Inspections, and a 5-star rating in Quality Measures.

The facility currently has 1 resident who admitted to the facility with COVID. There are no other COVID cases at this time.

Almost all the residents at the facility have their pneumococcal vaccines. They are working on consents for the remainders. They plan to administer flu vaccines next week. The facility just received the new COVID vaccine and is planning to administer to those who give consent.

Administrator: Michael Higgins

The facility is licensed for 120 beds. Their current census is 76. They have 2 pending admissions and 1 planned discharge.

Staffing is going well overall. There are some clinical vacancies including 1 LVN and a few CNA openings. They are working hard to increase staffing in order to support the opening of another hall in the facility. This additional hall will increase their available beds by 26. Discussed recruiting and staff retention efforts at the facility.

The state came for the facility's fullbook survey at the end of September 2023. They received 2 tags in regard to keys being left in the Med cart, and the facility's water management program. They have submitted their POC and are waiting for acceptance from the state. There are no outstanding self-reports.

Gulf Pointe Plaza has some performance improvement plans ongoing related to falls, anti-anxiety, and CNA staffing. Discussed the facilities goals and progress on these plans as well as best practices.

The facility's overall star rating is 5-star. They are also reaching 5-star ratings in both Health Inspections and Quality Measures. They continue to make quality goals to support their efforts of improving care and creating great experiences for their residents.

There is currently no COVID in the building.

Vaccination rates are mixed dependent upon the vaccine. Flu shots have been administered this year and acceptance was high. COVID vaccinations were previously about 39%, but they have met reluctance regarding the new COVID vaccine. The facility will order the new COVID vaccine soon. Discussed vaccination education and awareness efforts in the facility.

Administrator: Dennis Horsch

The facility is licensed for 105 beds. Their current census is 46. They have 1 resident in the hospital whom they hope will return on Monday. There are no planned discharges, but a few referrals pending at this time.

The facility is not utilizing agency to cover any staffing needs. They have been doing very well with staffing efforts and have been fully staffed for a while. The facility has a weekend RN who will be retiring soon. They will recruit a replacement for this position once the RN has retired. Discussed the facility's efforts and results on staff retention and recruitment. As a primary retention tool, the facility is trying to create a good environment for staff. Discussed how consistency and staffing affect patient care.

The state visited the facility yesterday regarding a COVID self-report. The state exited and the visit was unsubstantiated. The facility's last fullbook survey was earlier this year in February. There are currently no outstanding self-reports.

The facility currently has a 1-star rating overall. They are a 2-star rating in Health Inspections, a 1-star in Staffing, and a 1-star in Quality Measures.

There are no COVID cases in the facility at this time.

Vaccination compliance has been good at the facility. Flu shots for this season have been received and administered. The facility's pharmacy is sending the new COVID vaccines to them soon. Discussed the facility's efforts regarding vaccination education and awareness.

Administrator: Jennifer Steele

The facility is licensed for 120 beds. Their current census is 74. They have 3 pending admissions, as well as 3 planned discharges.

The facility is having some staffing challenges, particularly with the 2PM-10PM shift. They are in need of 9 CNAs, but they have been covering shortages with full-time and PRN staff. They are not utilizing any agency to cover staffing needs.

When the state last visited, they came to investigate 1 self-report and 1 complaint. All were cleared, and unsubstantiated. The facility's last fullbook survey was in March 2023. They currently have 5 self-reports outstanding which have not yet been investigated.

Cimarron Place Health & Rehabilitation Center has had high quality measure ratings. They want to continue improving the quality of care they offer their residents. They have some ongoing performance improvement plans including RTA rates, falls, and utilization of anti-anxiety and hypnotic medications. Discussed best practices and efforts to address these areas.

The facility is maintaining a 4-star overall rating. They have a 5-star rating in Health Inspections, a 1-star rating in Staffing, and a 4-star rating in Quality Measures.

There are currently no active COVID cases in the facility.

Vaccination rates are low due to reluctance from residents and staff toward the new COVID vaccine. Acceptance of flu and pneumococcal vaccines has been good. Discussed education and awareness efforts in the facility regarding vaccinations.

The administrator was given training regarding pressure injury prevention & management. The training included discussions based on resources from Texas HHSC regarding implementation of best practices for this type of program. Primary discussions included completing assessments for pressure injuries (and risk factors) upon admission and development of person-centered goals and interventions. The importance of creating personalized care plans, continuous monitoring and evaluation was also discussed. Jennifer reported that the facility conducts ambassador rounds where different team members are assigned to check on the residents, including those with wounds. The facility also has two ADON's and a treatment nurse who round and follow-up on wounds. They have wound care consults often and they also have a weekend treatment nurse to ensure proper management of wounds on the weekends.

Administrator: Ken Hiscox  
DON: Robert Kelly, RN

### **FACILITY INFORMATION**

Spring Branch Transitional Care Center is managed by Caring Healthcare. They are licensed for 198 beds and are comprised of 4 floors. The CMS overall star rating for the facility is 1 with a 2-star rating in Quality Measures. The facility specializes in Behavioral/psychiatric but also has a wing for Korean residents. The census given on the day of report was 187.

The QIPP site visit was conducted via telephone. The Administrator was on the call.

The Administrator reported they are currently free of COVID\_19. Spring Branch is utilizing their own pharmacy, Med-Options for vaccines. The Administrator reports the percent of residents who are fully vaccinated is 94% and approximately 100% of staff (with 11 exemptions) have received a full series of vaccinations and this information is reported to NSHN bi-weekly. The facility has started their Flu vaccines for staff and residents and anticipate completion in the next 2 weeks.

Staffing is still good. Currently, the facility is not using agency for staffing and have normal levels of overtime.

The PIP for staffing and psychotropic meds to ensure appropriate diagnosis is still in place.

Visitation is open and going well. The facility has a new Activity Director and activities are much more attended with a more robust program. The facility has completed most all of their renovations. The Administrator reports the facility is planning a Halloween party as well as a dinner with the families sometime between November and Christmas.

The facility had a staff appreciation breakfast last week, gave away awards, employee of the year, most tenure, etc.

### **EDUCATION PROVIDED**

Reviewed the QIPP year Seven requirements and discussed making sure all supporting documentation is completed and saved and readily available for any audit requests. Also reviewed Legionnaires Disease- make sure all staff understand what it is and how it is transmitted. CDC has material to use for educating staff (include new staff). Also make sure to have a mapping of the facility water supply and highlight the areas of potential stagnation. Lastly, reviewed importance of continual education of staff on infection control, especially for the hand hygiene and PPE competencies and prevention of UTIs, including hydration assessments and carts (they are part of QIPP components 3 & 4).

**SURVEY Information**

The facility had the state in the building for a self-report on a resident that attempted suicide that is still open, no citations. The facility is currently in their window for full book survey.

**CLINICAL TRENDING**

**Incidents/Falls:**

Information not provided.

**Infection Control:**

Information not provided.

**Weight loss:**

Information not provided.

**Pressure Ulcers:**

Information not provided.

**Restraints:**

Spring Branch Transitional Care is a restraint free facility.

**Staffing:**

Staffing is a challenge at this time, especially in the nursing department.

**QIPP SCORECARD**

**Component 1**

Indicator	QAPI & Mtg Dates	PIP's Implemented (Name specific PIP's)
Comprehensive, data driven QAPI Program/Policy that focuses on actions/activities resulting from analysis/quality assess/assurance of indicators of the outcomes of care and quality of life.	Y-2 <sup>nd</sup> or 3 <sup>rd</sup> Wed of month	
QAPI Meeting dates of submission (owner/operator involvement evident)	Y	

**Component 2**

<b>Indicator</b>	<b>Benchmark Met Y/N</b>	<b>Comments</b>
<b><u>REVIEW TURNOVER PIP CHARTER FROM THE MONTH PRIOR TO QIPP SUBMISSION. INCLUDE UPDATES TO PIPS AND PREPARE FOR A SUCCESS STORY IN THE LAST QUARTER OF QIPP YR 5.</u></b>		
Did NF maintain 4 additional hours ( <i>non-managerial</i> ) of RN staffing coverage per day, beyond the CMS mandate?	Y	
<ul style="list-style-type: none"> <li>Additional hours provided by direct care staff?</li> </ul>	Y	
Did NF maintain 8 additional hours ( <i>non-managerial</i> ) of RN staffing coverage per day, beyond the CMS mandate?	Y	
<ul style="list-style-type: none"> <li>8 additional hours non-concurrently scheduled?</li> </ul>	Y	
<ul style="list-style-type: none"> <li>Additional hours provided by direct care staff?</li> </ul>	Y	
<ul style="list-style-type: none"> <li>Telehealth used?</li> </ul>	Y	
NFs provided in total 12 or 16 hours of RN coverage, respectively, on at least 90 percent of the days within the reporting period?	Y	
NF has a workforce development program in the form of a PIP that includes a self-directed plan and monitoring outcomes?	Y	
<ul style="list-style-type: none"> <li>Was Workforce Development data submitted q month to QIPP during the quarter?</li> </ul>	Y	
<ul style="list-style-type: none"> <li>Agency usage or need d/t critical staffing levels</li> </ul>	N	
<ul style="list-style-type: none"> <li>PIP submitted on the topic of resident-centered culture change, workforce development, and staff retention:               <ul style="list-style-type: none"> <li>During the first reporting period?</li> <li>Subsequently reported outcomes related to the plan throughout the eligibility period?</li> <li>Discuss RCA for turnover: Has anything changed from the original RCA?</li> <li>PIP for retention and recruitment is current:</li> <li><b>NEW Retention efforts updated on Current PIP</b></li> </ul> </li> </ul>	Y	

**OIPP Component 3 – CMS Long-Stay Quality Metrics**

<b>Indicator</b>	<b>National Benchmark</b>	<b>Baseline Target</b>	<b>Results</b>	<b>Met Y/N</b>	<b>Comments</b>
Percent of high-risk Long-Stay residents with pressure ulcers; including unstageable ulcers	%				Information not provided but per corporate, measure



					on track to be met in 1st QTR and all were met 4 <sup>th</sup> QTR year 6
Percent of residents who received an anti-psychotic medication	%				
Percent of residents whose ability to move independently has worsened	%				
Percent of residents with urinary tract infection	%				

**OIPP Component 4 – CMS Long-Stay Quality Metrics**

Indicator	Met Y/N	National Benchmark	Baseline Target	Results	Comments
Facility has active infection control program that includes pursuing improved outcomes in vaccination rates and antibiotic stewardship:	Y				
<b>Quarter 1</b> <ul style="list-style-type: none"> <li>➤ Designated leadership individuals for antibiotic stewardship</li> <li>➤ Written policies on antibiotic prescribing</li> <li>➤ Pharmacy-generated antibiotic use report from within the last six months</li> <li>➤ Lab-generated antibiogram report from within the last six months (or from regional hospital)</li> <li>➤ Audits (monitors and documents) of adherence to hand hygiene</li> <li>➤ Audits (monitors and documents) of adherence to personal protective equipment use</li> <li>➤ Current list of reportable diseases</li> </ul>	Y				

<p><b>Quarter 2</b></p> <ul style="list-style-type: none"> <li>➤ Nursing Facility Administrator (NFA) and Director of Nursing (DON) submit current certificate of completion for "Nursing Home Infection Preventionist Training Course" developed by CMS and the CDC.</li> <li>➤ Infection control policies demonstrating data-driven analysis of NF performance and evidence-based methodologies for intervention. (Reviewed within 6 months of reporting period)</li> </ul> <p><b>**PHARMACY / LAB ANGIOBIOGRAM REPORTS DUE MONTH AFTER QIPP QUARTER ENDS</b></p>	Y				
<p><b>Quarter 3</b></p> <ul style="list-style-type: none"> <li>➤ Designated leadership individuals for antibiotic stewardship</li> <li>➤ Written policies on antibiotic prescribing</li> <li>➤ Pharmacy-generated antibiotic use report from within the last six months</li> <li>➤ Lab-generated antibiogram report from within the last six months (or from regional hospital)</li> <li>➤ Audits (monitors and documents) of adherence to hand hygiene</li> <li>➤ Audits (monitors and documents) of adherence to personal protective equipment use</li> <li>➤ Current list of reportable diseases</li> </ul>	Y				

<b>Quarter 4</b>					No data reported but believe they have met both
Percent of Residents Assessed and Appropriately Given the Pneumococcal Vaccine.					
Percent of Residents Assessed and Appropriately Given the Seasonal Influenza Vaccine					

Administrator: Johnny Richardson  
DON: Chelsea Oduro, RN

### **FACILITY INFORMATION**

Highland Park is a 120-bed facility with a current Overall Star Rating of 2 and a Quality Measures star rating of 4. The census given on the date of this report was 83 with 4 in the hospital.

The QIPP site visit was conducted via telephone. The Administrator was on the call.

The Administrator reported the facility is currently COVID\_19 free. The resident vaccination status is currently at 82% and employee rate is 100% with approved exemptions and this information is reported to NSHN weekly. The facility is waiting on a shipment of the new vaccine and Harris County Health Department will be coming to administer. All the residents but 1 have been vaccinated for the flu and they have just started vaccinating the staff.

Visitation is going well, with check in at the front (no longer screening), offering masks and hand sanitizer. Residents continue to go to the dining room for all meals with good participation. The facility has regular bingo activity, and they have a new Activity Director along with the assistant and so far it is going well. The facility has a fall festival planned for Halloween as well as a Thanksgiving dinner with families. The administrator reported that the facility is also planning some outings for lunch and shopping.

The Administrator also reports the facility staffing is good and still not using agency. The Administrator reports the facility Employee of the Month has improved, department heads on a committee nominate staff. The facility does still offer gift cards for taking on more shifts, and celebrating different holidays with the staff etc. The facility also celebrates staff birthdays.

### **SURVEY INFORMATION**

The state did a desk review of 4 old self-reports unsubstantiated, no citations and there are still 15 additional pending self-reports.

### **EDUCATION PROVIDED**

Reviewed the QIPP year Seven requirements and discussed making sure all supporting documentation is completed and saved and readily available for any audit requests. Also reviewed Legionnaires Disease- make sure all staff understand what it is and how it is transmitted. CDC has material to use for educating staff (include new staff). Also make sure to have a mapping of the facility water supply and highlight the areas of potential stagnation. Lastly, reviewed importance of continual education of staff on infection control, especially for the hand hygiene and PPE competencies and prevention of UTIs, including hydration assessments and carts (they are part of QIPP components 3 & 4).

**REPORTABLE INCIDENTS**

Information not provided.

**CLINICAL TRENDING**

**Incidents/Falls:**

Information was not provided.

**Infection Control:**

Information was not provided.

**Weight loss:**

Information was not provided.

**Pressure Ulcers:**

Information was not provided.

**Restraints:**

Highland Park does not use restraints.

**Staffing:**

Staffing needs – 1 day nurse, and 3 CNAs evening shifts openings.

**QIPP SCORECARD:**

**Component 1**

Indicator	QAPI & Mtg Dates	PIP's Implemented (Name specific PIP's)
Comprehensive, data driven QAPI Program/Policy that focuses on actions/activities resulting from analysis/quality assess/assurance of indicators of the outcomes of care and quality of life.	Y  1 <sup>st</sup> or 2 <sup>nd</sup> Wednesday of each month	
QAPI Meeting dates of submission (owner/operator involvement evident)		Submitted to corporate monthly

**Component 2**

<b>Indicator</b>	<b>Benchmark Met Y/N</b>	<b>Comments</b>
<b><u>REVIEW TURNOVER PIP CHARTER FROM THE MONTH PRIOR TO QIPP SUBMISSION. INCLUDE UPDATES TO PIPS AND PREPARE FOR A SUCCESS STORY IN THE LAST QUARTER OF QIPP YR 5.</u></b>		
Did NF maintain 4 additional hours ( <i>non-managerial</i> ) of RN staffing coverage per day, beyond the CMS mandate?	Y	
<ul style="list-style-type: none"> <li>• Additional hours provided by direct care staff?</li> </ul>	Y	
Did NF maintain 8 additional hours ( <i>non-managerial</i> ) of RN staffing coverage per day, beyond the CMS mandate?	Y	
<ul style="list-style-type: none"> <li>• 8 additional hours non-concurrently scheduled?</li> </ul>	Y	
<ul style="list-style-type: none"> <li>• Additional hours provided by direct care staff?</li> </ul>	Y	
<ul style="list-style-type: none"> <li>• Telehealth used?</li> </ul>	Y	
NFs provided in total 12 or 16 hours of RN coverage, respectively, on at least 90 percent of the days within the reporting period?	Y	
NF has a workforce development program in the form of a PIP that includes a self-directed plan and monitoring outcomes?	Y	
<ul style="list-style-type: none"> <li>• Was Workforce Development data submitted q month to QIPP during the quarter?</li> </ul>	Y	
<ul style="list-style-type: none"> <li>• Agency usage or need d/t critical staffing levels</li> </ul>	N	
<ul style="list-style-type: none"> <li>• PIP submitted on the topic of resident-centered culture change, workforce development, and staff retention:               <ul style="list-style-type: none"> <li>○ During the first reporting period?</li> <li>○ Subsequently reported outcomes related to the plan throughout the eligibility period?</li> <li>○ Discuss RCA for turnover: Has anything changed from the original RCA?</li> <li>○ PIP for retention and recruitment is current:</li> <li>○ <b>NEW Retention efforts updated on Current PIP</b></li> </ul> </li> </ul>	Y	

**QIPP Component 3 – CMS Long-Stay Quality Metrics**

Indicator	National Benchmark	Baseline Target	Results	Met Y/N	Comments
Percent of high-risk Long-Stay residents with pressure ulcers; including unstageable ulcers	9%				Information not provided but reported they met all 4 in QTR 4 of year 6 and they are on track to meet them first QTR year 7
Percent of residents who received an anti-psychotic medication	14%				
Percent of residents whose ability to move independently has worsened	15.3%				
Percent of residents with urinary tract infection	2.5%				

**QIPP Component 4 – CMS Long-Stay Quality Metrics**

Indicator	Met Y/N	National Benchmark	Baseline Target	Results	Comments
Facility has active infection control program that includes pursuing improved outcomes in vaccination rates and antibiotic stewardship:	Y				
<b>Quarter 1</b> <ul style="list-style-type: none"> <li>➤ Designated leadership individuals for antibiotic stewardship</li> <li>➤ Written policies on antibiotic prescribing</li> <li>➤ Pharmacy-generated antibiotic use report from within the last six months</li> <li>➤ Lab-generated antibiogram report from within the last six</li> </ul>	Y				

<p>months (or from regional hospital)</p> <ul style="list-style-type: none"> <li>➤ Audits (monitors and documents) of adherence to hand hygiene</li> <li>➤ Audits (monitors and documents) of adherence to personal protective equipment use</li> <li>➤ Current list of reportable diseases</li> </ul>					
<p><b>Quarter 2</b></p> <ul style="list-style-type: none"> <li>➤ Nursing Facility Administrator (NFA) and Director of Nursing (DON) submit current certificate of completion for "Nursing Home Infection Preventionist Training Course" developed by CMS and the CDC.</li> <li>➤ Infection control policies demonstrating data-driven analysis of NF performance and evidence-based methodologies for intervention. (Reviewed within 6 months of reporting period)</li> </ul> <p><b>**PHARMACY / LAB ANGIOBIOGRAM REPORTS DUE MONTH AFTER QIPP QUARTER ENDS</b></p>	Y				
<p><b>Quarter 3</b></p> <ul style="list-style-type: none"> <li>➤ Designated leadership individuals for antibiotic stewardship</li> <li>➤ Written policies on antibiotic prescribing</li> <li>➤ Pharmacy-generated antibiotic use report from within the last six months</li> <li>➤ Lab-generated antibiogram report from within the last six months (or from regional hospital)</li> </ul>	Y				



<ul style="list-style-type: none"> <li>➤ Audits (monitors and documents) of adherence to hand hygiene</li> <li>➤ Audits (monitors and documents) of adherence to personal protective equipment use</li> <li>➤ Current list of reportable diseases</li> </ul>					
<p><b>Quarter 4</b></p> <p>Percent of Residents Assessed and Appropriately Given the Pneumococcal Vaccine.</p>					<p>Information not provided but reports they are meeting both</p>
<p>Percent of Residents Assessed and Appropriately Given the Seasonal Influenza Vaccine</p>					

Administrator: Tangela Manuel, LNFA  
DON: Cokese Laird, RN

## **FACILITY INFORMATION**

Deerbrook Nursing and Rehab is a licensed 124- bed facility with an overall star rating of 2 and a rating of 3 stars in Quality Measures. Current census is 84: 4 Private Pay; 5 Medicare; 53 Medicaid; 3 Hospice; 19 HMO; 5 Medicaid Pending)

The QIPP site visit was conducted over the phone. The Administrator was as on the call and very helpful. The Administrator reports the facility is currently COVID\_19 free. The Administrator reported they are still able to allocate vaccinations (newest one) in-house and 85% of residents are vaccinated for COVID\_19 with 100% of the staff vaccinated (including approved exemptions). The facility is almost complete with providing the staff and residents with their flu vaccines.

The Administrator reports the facility continues with open visitation and it is going very well. All visitors in the general population are screened (with electronic monitoring system).

The residents continue participating in the dining room with good participation for all meals. The Facility now has a new Activity Director with improvement in more robust activities including aroma therapies, chair Tai Chi, Red Hat's Society, etc. The Administrator reported the facility is planning a Thanksgiving dinner for families and a Halloween party with a pumpkin decorating contest for staff and residents.

The Administrator reported the facility continues with the MAD Genius program and continually check their competencies and conduct regular trainings. The facility continues with their tuition reimbursement program for medication aides. They partner with Lonestar College for CMA to LVN, LVN to RN and pay for books, materials, etc.

## **SURVEY INFORMATION**

The facility is currently in their window for their full book survey. The state came in July 2023 to review a complaint that was cleared but they observed a CNA provide pericare without following proper infection control and they also received a tag for quality of life, quality of care for a resident who requested nail care and did not receive it. The 2567 has been accepted and cleared. The state came to the building in September 2023 to review a complaint that was cleared with no citations.

## **EDUCATION PROVIDED**

Reviewed current QIPP year 7 requirements, including state now conducting monthly audits and to ensure all supporting documentation is readily available. Reminded Administrator to ensure all staff (including new) have been in-serviced on Legionnaires Disease and to have the water mapping of their facility. Lastly, reviewed importance of continual education of staff on infection control,

especially for the hand hygiene and PPE competencies and prevention of UTIs (they are part of QIPP components 3 & 4).

**REPORTABLE INCIDENTS**

**July/Aug/Sept 2023** the facility had 3 complaints and 9 self-reports, and all have been cleared.

**CLINICAL TRENDING**

**Incidents/Falls:**

**July/Aug/Sept 2023** Deerbrook reported - 26 total falls without injury and 6 falls with injury with 3 repeat falls, 2 skin tears, 2 bruises, 1 fracture, 2 behaviors, 3 Lacerations and 0 Elopements. The facility does have a PIP in place for falls.

**Infection Control:**

**July/Aug/Sept 2023** the facility reported a total of 50 infections- 16 UTI’s; 15 Respiratory infections; 12 Wound infections; 4 Blood infections, 3 GI infections.

**Weight loss:**

In **July/Aug/Sept 2023** Deerbrook reported - 21 residents with 5% in 1 month or less weight loss and 3 residents with greater than 10% weight loss in 6 months. The facility does have a PIP in place for weight loss.

**Pressure Ulcers:**

In **July/Aug/Sept 2023** Deerbrook reported - 35 residents with pressure ulcers, totaling 49 sites, 3 of them facility acquired.

**Staffing:**

Current Open Positions						
Shift	RN	LVN	Nurse Aide	Hskp.	Dietary	Activity
6 to 2		1	1			
2 to 10		2	5			
10 to 6		3	1			
Other						
# Hired this month		6	2			
# Quit/Fired		2	2			

**Total number employees: 113\_ Turnover rate%: 26**

**Casper Report:**

Indicator	Current %	State %	National %	Comments/PIPs
New Psychoactive Med Use (S)	0%	1.7%	1.9%	
Fall w/Major Injury (L)	1.9%	3.5%	3.5%	
UTI (L) *	0%	1.3%	2.5%	
High risk with pressure ulcers (L) *	6.5%	7.5%	8.7%	Will review for PIP
Loss of Bowel/Bladder Control(L)	84.6%	54.4%	48.9%	PIP in place
Catheter(L)	0%	1.5%	1.6%	
Physical restraint(L)	0%	0%	0.1%	
Increased ADL Assistance(L)	7.3%	16.5%	14.3%	
Excessive Weight Loss(L)	4%	4.8%	6.1%	
Depressive symptoms(L)	17.3%	5.4%	9.2%	PIP in place
Antipsychotic medication (L) *	8%	9.2%	14.7%	

**QIPP Component 1**

Indicator	QAPI Program Y/N Mtg Dates	PIP's Implemented (Name specific PIP's)
Comprehensive, data driven QAPI Program/Policy that focuses on actions/activities resulting from analysis/quality assess/assurance of indicators of the outcomes of care and quality of life.	Y	
QAPI Meeting dates of submission (owner/operator involvement evident)	7/13/2023, 8/10/2023, 9/14/2023	

**Component 2**

<b>Indicator</b> <u>REVIEW TURNOVER PIP CHARTER FROM THE MONTH PRIOR TO QIPP SUBMISSION. INCLUDE UPDATES TO PIPS AND PREPARE FOR A SUCCESS STORY IN THE LAST QUARTER OF QIPP YR 5.</u>	Benchmark Met Y/N	Comments
Did NF maintain 4 additional hours ( <i>non-managerial</i> ) of RN staffing coverage per day, beyond the CMS mandate?	Y	
<ul style="list-style-type: none"> <li>Additional hours provided by direct care staff?</li> </ul>	Y	

Did NF maintain 8 additional hours ( <i>non-managerial</i> ) of RN staffing coverage per day, beyond the CMS mandate?	Y	
<ul style="list-style-type: none"> <li>8 additional hours non-concurrently scheduled?</li> </ul>	Y	
<ul style="list-style-type: none"> <li>Additional hours provided by direct care staff?</li> </ul>	Y	
<ul style="list-style-type: none"> <li>Telehealth used?</li> </ul>	Y	No encounters
NFs provided in total 12 or 16 hours of RN coverage, respectively, on at least 90 percent of the days within the reporting period?	Y	
NF has a workforce development program in the form of a PIP that includes a self-directed plan and monitoring outcomes?	Y	
<ul style="list-style-type: none"> <li>Was Workforce Development data submitted q month to QIPP during the quarter?</li> </ul>	Y	
<ul style="list-style-type: none"> <li>Agency usage or need d/t critical staffing levels</li> </ul>	N	
<ul style="list-style-type: none"> <li>PIP submitted on the topic of resident-centered culture change, workforce development, and staff retention:               <ul style="list-style-type: none"> <li>During the first reporting period?</li> <li>Subsequently reported outcomes related to the plan throughout the eligibility period?</li> <li>Discuss RCA for turnover: Has anything changed from the original RCA?</li> <li>PIP for retention and recruitment is current:</li> <li><b>NEW Retention efforts updated on Current PIP</b></li> </ul> </li> </ul>	Y	

**QIPP Component 3 – CMS Long-Stay Quality Metrics**

Indicator	National Benchmark	Baseline Target	Results	Met Y/N	Comments
Percent of high-risk Long-Stay residents with pressure ulcers; including unstageable ulcers	8.14%	6.06%	4.88%	Y	
Percent of residents who received an anti-psychotic medication	14.49%	10.21%	5.66%	Y	
Percent of residents whose ability to move independently has worsened	18.04%	12.11%	11.11%	Y	
Percent of residents with urinary tract infection	2.36%	0.84%	0%	Y	

**QIPP Component 4 – CMS Long-Stay Quality Metrics**

Indicator	Met Y/N	National Benchmark	Baseline Target	Results	Comments
Facility has active infection control program that includes pursuing improved outcomes in vaccination rates and antibiotic stewardship:	Y				
<b>Quarter 1</b> <ul style="list-style-type: none"> <li>➤ Designated leadership individuals for antibiotic stewardship</li> <li>➤ Written policies on antibiotic prescribing</li> <li>➤ Pharmacy-generated antibiotic use report from within the last six months</li> <li>➤ Lab-generated antibiogram report from within the last six months (or from regional hospital)</li> <li>➤ Audits (monitors and documents) of adherence to hand hygiene</li> <li>➤ Audits (monitors and documents) of adherence to personal protective equipment use</li> <li>➤ Current list of reportable diseases</li> </ul>	Y				
<b>Quarter 2</b> <ul style="list-style-type: none"> <li>➤ Nursing Facility Administrator (NFA) and Director of Nursing (DON) submit current certificate of completion for "Nursing Home Infection Preventionist Training Course" developed by CMS and the CDC.</li> <li>➤ Infection control policies demonstrating data-driven analysis of NF performance and evidence-based methodologies for intervention. (Reviewed within 6 months of reporting period)</li> </ul> <p><b>**PHARMACY / LAB ANGIOBIOGRAM REPORTS DUE MONTH AFTER QIPP QUARTER ENDS</b></p>	Y				
<b>Quarter 3</b> <ul style="list-style-type: none"> <li>➤ Designated leadership individuals for antibiotic stewardship</li> <li>➤ Written policies on antibiotic prescribing</li> </ul>	Y				

<ul style="list-style-type: none"> <li>➤ Pharmacy-generated antibiotic use report from within the last six months</li> <li>➤ Lab-generated antibiogram report from within the last six months (or from regional hospital)</li> <li>➤ Audits (monitors and documents) of adherence to hand hygiene</li> <li>➤ Audits (monitors and documents) of adherence to personal protective equipment use</li> <li>➤ Current list of reportable diseases</li> </ul>					
<p><b>Quarter 4</b></p> <p>Percent of Residents Assessed and Appropriately Given the Pneumococcal Vaccine.</p>	National 93.84%	Baseline %	Results 88.14%	Met Y/N N	
<p>Percent of Residents Assessed and Appropriately Given the Seasonal Influenza Vaccine</p>	96.07%	%	78.50%	N	

# **Exhibit “D”**



**WINNIE STOWELL HOSPITAL DISTRICT  
INDEPENDENT CONTRACTOR AGREEMENT FOR  
PROGRAM CONSULTANT SERVICES**

This Agreement for Program Consultant Services (“Agreement”) is made on January 1, 2024 (“Effective Date”) between the **Winnie Stowell Hospital District**, a political entity of the State of Texas (“District”) located at 520 Broadway Ave, Winnie, TX 77665, and **Patricia Ojeda** (“Program Consultant”), an individual residing at 298 PR 6124, Woodville, TX 75979.

**RECITALS**

**WHEREAS**, the District desires to engage the services of a Program Consultant, as an independent contractor, to assist in managing and overseeing the District’s Indigent Care operations and other related programs, and to render her services on the terms and conditions provided in this Agreement; and

**WHEREAS**, the Program Consultant desires to render services and assist in management and oversight of the District’s Indigent Care operations and other related programs for the District on the terms and conditions provided in this Agreement; and

**WHEREAS**, therefore, the District engages the services of Mrs. Patricia Ojeda as the District’s Program Consultant. In consideration of the mutual promises contained in this Agreement, the parties agree as follows:

**NOW, THEREFORE**, in consideration of the premises and the mutual covenants herein contained, the parties hereto agree as follows:

**ARTICLE I. TERM**

- 1.01 This Agreement is for a period of one (1) year, commencing on January 1, 2024, and thereafter shall automatically renew for successive one (1) year periods until terminated by either party.
- 1.02 This Agreement may be terminated for any reason by either party at any time by giving thirty (30) days advance written notice to the other party.
- 1.03 In the event that the Program Consultant breaches the terms of this Agreement, exceeds the authority in this Agreement; or violates the District’s Bylaws or the laws of the State of Texas, this Agreement may be terminated immediately by the District’s Administrator.

**ARTICLE II. FEE AND BENEFITS**

- 2.01 For services to be rendered under this Agreement, Program Consultant will be entitled to a fee of \$75.00 per hour, which will be paid to Program Consultant on a monthly basis

during the monthly District Board meeting after the submission of an itemized invoice during the first week of each month. .

- 2.02 If Program Consultant incurs expenses in the performance of the services, Program Consultant shall present a reimbursement request as part of the Program Consultant's monthly invoice along with a receipt for such Expenses. All expenses incurred by Program Consultant shall be approved by the District's Administrator prior to being incurred.

### **ARTICLE III. CONTRACTOR SERVICES**

- 3.01 The services to be rendered by Program Consultant for the District shall be as an independent contractor under the direction and supervision of the District's Administrator, or the District's Indigent Care Director if authorized by the District Administrator and shall include the task set forth in the Job Description attached as **Exhibit "A"**.
- 3.02 With the exception of worker's compensation benefits, the contracting party provides no benefits, such as unemployment insurance, health insurance to independent contractor. Contracting party is only interested in the results obtained by the Contractor.
- 3.03 The District shall not be responsible for federal, state, and local taxes derived from the Program Consultant's net income or for the withholding and/or payment of any federal, state, and local income and other payroll taxes, disability benefits or other legal requirements applicable to the Contractor.
- 3.04 The Program Consultant may act as agent for, or on behalf of, the District, or to represent the District if approved by the District Administrator but shall not bind the District in any manner.

### **ARTICLE IV. DUTIES AND REPRESENTATIONS OF DISTRICT**

- 4.01 District shall own and maintain all the equipment and assets necessary for Program Consultant to perform his duties pursuant to this Agreement and agrees to maintain these assets in a state of good repair at all times.
- 4.02 The District agrees to make such assets fully available and to be placed in the possession of Program Consultant to be used by Program Consultant in accordance with this Agreement and the protocols adopted by District from time to time in order for Program Consultant to carry out the terms of this Agreement.
- 4.03 The District shall insure all of the equipment and property reasonably required to provide the services required by the Program Consultant in this Agreement hereunder or cause same to be insured for loss or damage of such kind usually insured against by entities similarly situated.

- 4.04 At all times during the term of this Agreement and following the expiration of any policy currently held by the District, District shall maintain Worker's Compensation with respect to Program Consultant.
- 4.05 The District shall be responsible for filing a 1099 for Program Consultant within the required time set forth by the Internal Revenue Service.

#### **ARTICLE V. DEVOTION OF TIME**

During the first three (3) months of this agreement, the Program Consultant may devote no more than thirty (30) hours per week to the performance of the duties of the position, and if additional time is needed, Program Consultant shall receive the written consent of the District's Administrator. Following the first three (3) months of this Agreement, the Program Consultant may work no more than twenty (20) hours per week unless the Program Consultant receives the written consent of the District's Administrator. .

#### **ARTICLE VI. INDEMNIFICATION.**

- 6.01 CONTRACTOR SHALL INDEMNIFY, DEFEND, AND HOLD HARMLESS THE DISTRICT AGAINST ANY AND ALL LOSSES, COSTS, DAMAGES, EXPENSES, AND LIABILITIES OF WHATEVER NATURE (INCLUDING BUT NOT LIMITED TO REASONABLE ATTORNEY FEES, LITIGATION AND COURT COSTS, AMOUNTS PAID IN SETTLEMENT AND AMOUNTS PAID IN DISCHARGE OF JUDGMENTS) DIRECTLY OR INDIRECTLY RESULTING FROM OR ARISING OUT OF THE CONTRACTOR'S NEGLIGENCE OR FAULT IN FAILING TO PERFORM PROVISIONS OF THE AGREEMENT.
- 6.02 TO THE EXTENT ALLOWED BY THE LAWS OF THE STATE OF TEXAS, THE DISTRICT SHALL INDEMNIFY, DEFEND, AND HOLD HARMLESS THE CONTRACTOR AGAINST ANY AND ALL LOSSES, COSTS, DAMAGES, EXPENSES, AND LIABILITIES OF WHATEVER NATURE (INCLUDING BUT NOT LIMITED TO REASONABLE ATTORNEY FEES, LITIGATION AND COURT COSTS, AMOUNTS PAID IN SETTLEMENT AND AMOUNTS PAID IN DISCHARGE OF JUDGMENTS) DIRECTLY OR INDIRECTLY RESULTING FROM OR ARISING OUT OF THE DEPARTMENTS NEGLIGENCE OR FAULT IN FAILING TO PERFORM PROVISIONS OF THE AGREEMENT BY DEPARTMENT.
- 6.03 EXCEPT WITH RESPECT TO THE PARTIES' INDEMNIFICATION OBLIGATIONS, NEITHER PARTY SHALL BE LIABLE TO THE OTHER FOR ANY SPECIAL, INDIRECT, INCIDENTAL, PUNITIVE, OR CONSEQUENTIAL DAMAGES ARISING FROM OR RELATED TO THIS AGREEMENT, INCLUDING BODILY INJURY, DEATH, LOSS OF REVENUE, OR PROFITS OR OTHER BENEFITS, AND CLAIMS

BY ANY THIRD PARTY, EVEN IF THE PARTIES HAVE BEEN ADVISED OF THE POSSIBILITY OF SUCH DAMAGES. THE FOREGOING LIMITATION APPLIES TO ALL CAUSES OF ACTION IN THE AGGREGATE, INCLUDING WITHOUT LIMITATION TO BREACH OF CONTRACT, BREACH OF WARRANTY, NEGLIGENCE, STRICT LIABILITY, AND OTHER TORTS.

#### **ARTICLE VII. CONFIDENTIAL INFORMATION**

- 7.01 Each Party (on its behalf and on behalf of its subcontractors, employees or representatives, or agents of any kind) agrees to hold and treat all confidential information of the other Party, including, but not limited to, trade secrets, sales figures, employee and customer information and any other information that the receiving Party reasonably should know is confidential (“Confidential Information”) as confidential and protect the Confidential Information with the same degree of care as each Party uses to protect its own Confidential Information of like nature.
- 7.02 Confidential Information does not include any information that (i) at the time of the disclosure or thereafter is lawfully obtained from publicly available sources generally known by the public (other than as a result of a disclosure by the receiving Party or its representatives); (ii) is available to the receiving Party on a non-confidential basis from a source that is not and was not bound by a confidentiality agreement with respect to the Confidential Information; or (iii) has been independently acquired or developed by the receiving Party without violating its obligations under this Agreement or under any federal or state law.
- 7.03 As part of this Agreement, the Parties agree to enter into the attached Business Associate Agreement set forth in **Exhibit “B”**.

#### **ARTICLE VIII. MISCELLANEOUS PROVISIONS.**

- 8.01 This Agreement may be amended only by written agreement duly executed by an authorized representative of each party (email is acceptable).
- 8.02 Both Parties represent that they are fully authorized and empowered to enter into this Agreement, and that the performance of the obligations under this Agreement will not violate or infringe upon the rights of any third-party or violate any agreement between the Parties and any other person, firm or organization or any law or governmental regulation.
- 8.03 If any provision or provisions of this Agreement shall be held unenforceable for any reason, then such provision shall be modified to reflect the parties’ intention. All remaining provisions of this Agreement shall remain in full force and effect for the duration of this Agreement.

- 8.04 This Agreement shall not be assigned by either party without the express consent of the other party.
- 8.05 A failure or delay in exercising any right, power or privilege in respect of this Agreement will not be presumed to operate as a waiver, and a single or partial exercise of any right, power or privilege will not be presumed to preclude any subsequent or further exercise, of that right, power or privilege or the exercise of any other right, power or privilege.
- 8.06 This Agreement is to be governed by and construed in accordance with the laws of the State of Texas. EACH PARTY HEREBY CONSENTS TO THE EXCLUSIVE PERSONAL JURISDICTION AND VENUE OF THE COURTS, STATE AND FEDERAL, HAVING JURISDICTION IN CHAMBERS COUNTY, TEXAS.

*Signature Page Follows*

The Parties are signing this Agreement on the date stated in the introductory clause.

**WINNIE STOWELL HOPITAL DISTRICT**

**PROGRAM CONSULTANT**

By: \_\_\_\_\_

Name: Edward Murell

Title: Board of Directors, President

By: \_\_\_\_\_

Name: Patricia Ojeda

Title: Program Consultant

**Exhibit “A”**  
**Job Description—Program Consultant**

Subject to the request of the Winnie Stowell Hospital District (“District”) Board of Directors or District Administrator, the duties for the Program Consultant shall include, but are not assistance with the following:

- 1 Serve as a subject matter expert and consultant to the incumbent Indigent Care Assistance Program (ICAP) Director to assist with questions related to determining eligibility for new applicants and continual eligibility of established clients for Indigent Care services by reviewing and by researching and referring the ICAP Director to established laws, regulations, policies, procedures, and standards.
- 2 Serve as a subject matter expert and consultant to the incumbent Indigent Care Assistance Program (ICAP) Director to assist with questions, tracking, and reporting related to specialty care referrals requests.
- 3 Serve as an interpreter for Spanish speaking clients and/or guests to the District’s office.
- 4 Serve as staffing back up to provide office coverage for staff needing time off.
- 5 Assist with the Prescription Assistance Program (PAP) and the Youth Counseling Program for residents of the District.
- 6 Provide assistance with overseeing the grant administration and reporting.
- 7 Serve as a representative of the District at community events, including but not limited to Health Fairs, promotional events, etc.
- 8 Assist with collaborating with representatives of other governmental or private human service agencies and/or health care professionals to negotiate Service Contract Agreements to provide needed services for the District’s eligible Indigent residents.
- 9 Assist in planning, developing, and maintaining policies and procedures for operation of the ICAP, PAP, and Youth Counseling programs, ensuring adherence to established federal, state, and local laws, rules, regulations, policies, and procedures.
- 10 Assist with identifying and implementing process improvement initiatives.
- 11 Assist with auditing medical bills for approved referrals/authorizations, amounts in excess of established threshold, as well as comparing itemized charges against submitted invoices and claim documents to ensure charges reflect services administered.
- 12 Assist with the preparation and presentation, if necessary, of monthly and year-to-date Indigent Care Reports and grant administration reports.
- 13 Assist in the design and preparation of various Excel reports, spreadsheet, charts and graphs.
- 14 Assist with proofreading minutes, reports, and documents for data entry and spelling accuracy, context clarity, grammar, and punctuation.

- 15 Assist with the investigation of complaints and inquiries pertaining to clients, providers, etc., conferring with parties involved and reviewing available documentation, and preparing verbal and/or written responses and recommendations, as appropriate.
- 16 Assist with the management of IHS Client Management System updates, such as Vendor and Source Code loads and/or updates, Custom Forms, Budget updates, Form and Account Note Templates, etc.



**Exhibit “B”  
Business Associate Agreement**

This Business Associate Agreement (the “BA Agreement”), effective January 1, 2024 (the “Effective Date”), is entered into by and between **Mrs. Patricia Ojeda** (“Business Associate”) and **Winnie Stowell Hospital District** (“Covered Entity”).

**R E C I T A L S**

**WHEREAS**, Business Associate and Covered Entity are engaged in a business relationship whereby Covered Entity purchases, and Business Associate sells or provides, certain skilled nursing facility management to Covered Entity (“Business Relationship”); and

**WHEREAS**, as part of the Business Relationship, Business Associate may perform or assist in performing a function or activity on behalf of Covered Entity that involves the Use and/or Disclosure of Protected Health Information as defined in 45 C.F.R. 160.103 and as such provision may be amended from time to time (“PHI”); and

**WHEREAS**, the parties desire to enter into this BA Agreement regarding the Use and/or Disclosure of PHI as required by the Health Insurance Portability and Accountability Act of 1996 (“HIPAA”); any and all regulations promulgated thereunder including the standards for privacy of individually identifiable health information at 45 C.F.R. Parts 160 and 164 (“Privacy Rule”) and the standards for the security of electronic protected health information at 45 C.F.R. Parts 160, 162, and 164 (“Security Rule”); any applicable state law or regulation (collectively, the Privacy Rule and the Security Rule are referred to herein as the “HIPAA Rules”); and the Health Information Technology for Economic and Clinical Health Act (“HITECH”) provisions of the American Recovery and Reinvestment Act of 2009 (“ARRA”).

**NOW, THEREFORE**, for and in consideration of the representations, warranties and covenants contained herein, and other good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged, the parties hereto agree as follows:

**AGREEMENT**

1. Terms Used. Terms used, but not otherwise defined, in this BA Agreement, shall have the same meaning as those terms in the HIPAA Rules.
2. Permitted Uses and Disclosures of PHI. Except as otherwise limited in the Business Relationship or this BA Agreement, Business Associate may Use and/or Disclose PHI to perform the functions, activities, or services for or on behalf of Covered Entity as specified in the Business Relationship provided that such Use and/or Disclosure would not violate the HIPAA Rules if done by Covered Entity. All other Uses or Disclosures not authorized by Business Relationship or this BA Agreement are prohibited.

3. Business Associate agrees to:

3.1. Not Use and/or Disclose PHI other than as permitted or required by the Business Relationship or this BA Agreement or as Required By Law.

3.2. Use appropriate safeguards to comply with Subpart C of 45 CFR Part 164 with respect to electronic Phi and to implement and use appropriate safeguards to reasonably and appropriately protect the confidentiality, integrity and availability of PHI and to prevent the Use and/or Disclosure of PHI other than as provided for by the Business Relationship or this BA Agreement.

3.3. Report to Covered Entity, through its Privacy Officer, any Use or Disclosure of PHI not provided by the Business Relationship or this Agreement within three (3) business days of discovering the unauthorized Use or Disclosure. Additionally, within three (3) business days of discovery, Business Associate agrees to report any potential Breach of unsecured PHI as that term is defined in 45 CFR 164.402 and any successful Security Incident as that term is defined in 45 CFR 164.304. Unsuccessful Security Incidents shall be reported to Covered Entity only upon request. Business Associate shall permit Covered Entity to investigate any report submitted pursuant to this provision and shall allow Covered Entity to examine Business Associate's premises, records, and practices. In the event Covered Entity is required to provide notice to Individuals impacted by a Breach caused by Business Associate or its subcontractors and agents, Business Associate shall reimburse Covered Entity for the reasonable costs relating to the provision of such notice.

3.4. Ensure that all subcontractors and agents, to whom it provides PHI received from, or created or received by, Business Associate on behalf of Covered Entity sign a business associate agreement meeting the requirements of 45 CFR 164.504 and agree in writing to the same restrictions, conditions, and requirements that apply to Business Associate pursuant to this BA Agreement. This shall include, without limitation, ensuring that agents and subcontractors implement administrative, physical, and technical safeguards that reasonably and appropriately protect the confidentiality, integrity, and availability of electronic PHI created, received, maintained, stored, or transmitted on behalf of Covered Entity. Business Associate shall be fully liable to Covered Entity for any acts, failures or omissions of its subcontractors and agents as if the acts, failures or omissions were Business Associate's own acts, failures or omissions.

3.5. Provide access (at the request of, and in a reasonable time and manner designated by, Covered Entity) to PHI in a Designated Record Set in order to meet the requirements under 45 C.F.R. 164.524. In the event an Individual submits a request for access directly to Business Associate, Business Associate shall promptly forward the request to Covered Entity through its Privacy Officer. Business Associate is not required to provide access to PHI if it does not maintain a Designated Record Set on behalf of Covered Entity.

3.6. Make any amendment(s) (at the request of, and in a reasonable time and manner designated by, Covered Entity) to PHI in a Designated Record Set that Covered Entity directs pursuant to 45 C.F.R. 164.526. In the event an Individual submits a request for amendment directly to Business Associate, Business Associate shall promptly forward the request to Covered

Entity through its Privacy Officer. Business Associate is not required to amend PHI if it does not maintain a Designated Record Set on behalf of Covered Entity.

3.7. Make internal practices, books, and records relating to the Use and Disclosure of PHI received from, created, or received by Business Associate on behalf of, Covered Entity available to Covered Entity, or at the request of Covered Entity, to the Secretary of the Department of Health and Human Services or his/her designee (the "Secretary"), in a reasonable time and manner as designated by Covered Entity or the Secretary, for the purposes of determining compliance with the Privacy Rule and this Agreement. Business Associate shall promptly notify Covered Entity of communications with the Secretary regarding PHI provided by or created by Covered Entity and shall provide Covered Entity with copies of any information Business Associate has made available under this provision. Notwithstanding the foregoing, no attorney-client, accountant-client, or other legal privilege shall be deemed waived by Business Associate or Covered Entity by virtue of this BA Agreement.

3.8. Document disclosures of PHI and information related to such disclosures as would be required for Covered Entity to respond to a request by an Individual for an accounting of disclosures of PHI in accordance with 45 C.F.R. 164.528 as may be amended from time to time, and incorporating exceptions to such accounting designated under the regulation. Accounting of disclosures shall be in accordance with the policies and procedures of the Covered Entity and shall be made within a reasonable time specified by Covered Entity. The first accounting in any 12 month period requested by an Individual shall be provided without charge; a reasonable charge may be made for subsequent accountings if Business Associate informs the Individual in advance of the fee and the Individual is afforded an opportunity to withdraw or modify the request. In addition, to the extent that Business Associate maintains PHI in an electronic health record, Business Associate agrees to account for all disclosures of electronic PHI upon request of an Individual for a period of at least three (3) years prior to the request (but no earlier than the Effective Date of this BA Agreement) as required by HITECH. Such accounting shall be directly to the Individual if requested by Covered Entity.

3.9. Provide to Covered Entity, in a reasonable time and manner designated by Covered Entity, information collected in accordance with Section 3.8. of this BA Agreement, to permit Covered Entity to respond to a request by an Individual for an accounting of disclosures of PHI in accordance with 45 C.F.R. 164.528.

3.10. Ensure that all Uses and Disclosures of PHI are subject to the principle of "minimum necessary," i.e., only PHI that is the minimum necessary to accomplish the intended purpose of the Use, Disclosure, or request may be Used or Disclosed.

3.11. Mitigate, to the extent practicable, any harmful effect of an unauthorized Use or Disclosure of PHI and any Breach or Security Incident by Business Associate or its subcontractors or agents of which Business Associate becomes aware.

3.12. Provide adequate training to members of its Workforce and its subcontractors and agents regarding the requirements of the HIPAA Rules, HITECH, and this BA Agreement.

3.13. Provide Business Associate's policies and procedures for maintaining the confidentiality of records in a Designated Record Set as required by the Privacy Rule and this BA Agreement to Covered Entity at its request.

3.14. Comply with all applicable federal and state privacy and security requirements.

4. Covered Entity agrees to:

4.1. Provide Business Associate with its notice of privacy practices if a limitation in the notice of privacy practices may affect Business Associate's Use or Disclosure of PHI under this Agreement.

4.2. Provide Business Associate with any changes in, or revocation of, permission by an Individual to the Use and/or Disclosure of PHI, if such changes affect Business Associate's permitted or required Uses and/or Disclosures. Covered Entity will further notify Business Associate of any restriction on the Use and/or Disclosure of PHI agreed to by Covered Entity in accordance with the provisions of 45 CFR 164.522 and any restriction requested by an Individual that Covered Entity is required to comply with in accordance with the provisions of HITECH.

5. Specific Uses and Disclosures Permitted by Business Associate. Except as otherwise limited in the Business Relationship or this BA Agreement, Business Associate may:

5.1. Use or Disclose PHI for the proper management and administration of Business Associate or to carry out the legal responsibilities of Business Associate provided that such Uses or Disclosures are required under state and federal law.

5.2. Use PHI to provide Data Aggregation services to Covered Entity as permitted by 42 C.F.R. 164.504(e)(2)(i)(B) when such services are required pursuant to an Agreement between the parties.

6. Indemnification. To the extent permitted by law, Business Associate agrees to indemnify and hold harmless Covered Entity from and against all claims, demands, liabilities, judgments or causes of action of any nature for any relief, elements of recovery or damages recognized by law (including, without limitation, attorney's fees, defense costs, and equitable relief ), for any damage or loss incurred by Covered Entity arising out of, resulting from, or attributable to any acts or omissions or other conduct of Business Associate, its directors, officers, subcontractors, agents, and other members of its Workforce, in connection with the performance of Business Associate's duties under the Business Relationship, including this BA Agreement.

7. Term and Termination.

7.1. Term. The term of this BA Agreement shall be effective as of the Effective Date and shall terminate when all of the PHI provided by Covered Entity to Business Associate, or created or received by Business Associate on behalf of Covered Entity, is destroyed or returned to Covered Entity, or, if it is infeasible to return or destroy PHI, protections are extended to such PHI, in accordance with Section 7.3 below.

7.2 Termination for Cause. Covered Entity may immediately terminate the Business Relationship and/or this BA Agreement if Covered Entity determines that Business Associate has breached a material term of this BA Agreement. Alternatively, the Covered Entity may choose, in its sole discretion, to: (i) provide the Business Associate written notice of the existence of an alleged material breach; and (ii) afford the Business Associate an opportunity to cure said alleged material breach upon mutually agreeable terms. Nonetheless, in the event that mutually agreeable terms cannot be achieved within ten (10) days, Business Associate must cure said breach to the satisfaction of the Covered Entity within thirty (30) days from the date of the original notice. Failure to cure in the manner set forth in this paragraph is grounds for the immediate termination of the underlying Business Relationship and this BA Agreement.

7.3 Effect of Termination.

7.3.1 Except as provided in paragraph 7.3.2 of this Section, upon termination of the Business Relationship and/or this BA Agreement, for any reason, Business Associate shall return or destroy all PHI received from Covered Entity, or created or received by Business Associate on behalf of Covered Entity. This Section shall also apply to PHI that is in the possession of subcontractors or agents of Business Associate. Business Associate shall retain no copies of the PHI.

7.3.2 In the event that Business Associate determines that return or destruction of the PHI is infeasible, Business Associate shall provide in writing to Covered Entity notification of the conditions that make return or destruction infeasible. Upon mutual written agreement of the Parties that return or destruction of the PHI is infeasible, Business Associate shall extend the protections of this BA Agreement to such PHI and limit further Uses and Disclosures of such PHI to those purposes that make the return or destruction infeasible, for so long as Business Associate maintains such PHI.

8. Rights to Proprietary Information; Injunctive Relief. Covered Entity retains any and all rights to the proprietary information, confidential information, and PHI it releases to Business Associate. Business Associate understands and acknowledges that any disclosure or misappropriation of any of PHI in violation of this BA Agreement will cause Covered Entity irreparable harm, the amount of which may be difficult to ascertain, and therefore agrees that Covered Entity shall have the right to apply to a court of competent jurisdiction for specific performance and/or an order restraining and enjoining any such further disclosure or breach and for such other relief as Covered Entity shall deem appropriate. Such right of Covered Entity is to be in addition to the remedies otherwise available to Covered Entity at law or in equity.

9. Miscellaneous.

9.1. Amendment. The Parties agree to take such action as is necessary to amend this BA Agreement from time to time to comply with the requirements of applicable federal or state laws or regulations governing the Use or Disclosure of Individually Identifiable Health Information.

9.2. Survival. The respective rights and obligations of Business Associate under Sections 7 of this BA Agreement shall survive the termination of the Business Relationship and/or BA.

9.3. Interpretation. Any ambiguity in this BA Agreement shall be resolved in favor of a meaning that permits the Parties to comply with HIPAA and HITECH.

9.4. No Third-Party Beneficiary. Nothing in this BA Agreement is intended, nor shall be deemed, to confer any benefits on any third party.

9.5. Counterparts; Facsimiles. This BA Agreement may be executed in any number of counterparts, each of which shall be deemed an original. Facsimile copies hereof shall be deemed to be originals.

9.6 Effect of BA Agreement. Except as amended by this BA Agreement, the terms and provisions of the Business Relationship shall remain in full force and effect.

***Signature Page Follows***

IN WITNESS WHEREOF, the parties hereto have caused this BA Agreement to be executed by their respective duly authorized representatives.

**Covered Entity**  
**WINNIE STOWELL HOSPITAL DISTRICT**

**Business Associate**  
**PATRICIA OJEDA**

By: \_\_\_\_\_  
Name: Edward Murell  
Title: Board of Directors, President

By: \_\_\_\_\_  
Name: Patricia Ojeda  
Title: Program Consultant

Date: \_\_\_\_\_

Date: \_\_\_\_\_