Thank you for joining
Lilypad Webinar #5
National and State Rankings

Monday February 17, 2020 3:00 EST

We will record this 30-minute webinar and post a link to the
recording as well as the slides after the webinar on our website

All participants will be muted

NOSORH

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Join us for our free monthly webinars.

Whether you're a practice manager, provider or rural clinic staff member
we cover the concepts and strategies that matter most.

Lilypad® Webinars Are Free to Register, View or Download

Date	Webinar Topic	Registration	Video	Slides
October 16	Provider Productivity and Compensation		Watch	Download
November 21	Clinic Designations and Strategies		Watch	Download
December 16	Practice Management Best Practices		Watch	Download
January 20	Practice Alignment - Specialty Care		Watch	Download
February 17	National and State RHC Rankings	Register		
March 23	Process and Outcomes Quality Measurement	Register		
April 20	Performance Management	Register		
May 18	Clinic Spotlight A	Register		
June 22	Optimizing Cost Reports for RHCs	Register		
July 20	Provider Contracting/Compliance	Register		
August 24	340B Drug Program	Register		
September 21	Clinic Spotlight B	Register		

What We'll Cover Today

2020 Lilypad Award Rankings
Methodology
Top Clinics and States

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Utilizing data from the Centers for Medicare and Medicaid program to calculate rural-relevant metrics across five domains, the Lilypad Awards provide a comprehensive and objective assessment of rural health clinic performance. The Lilypad Awards evaluate both Provider-Based (hospital-owned) and Independent practices.
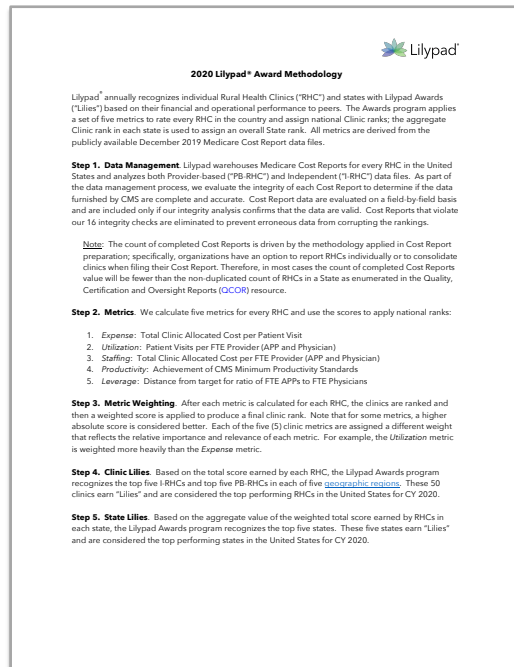
https://www.lilypad207.com/awards
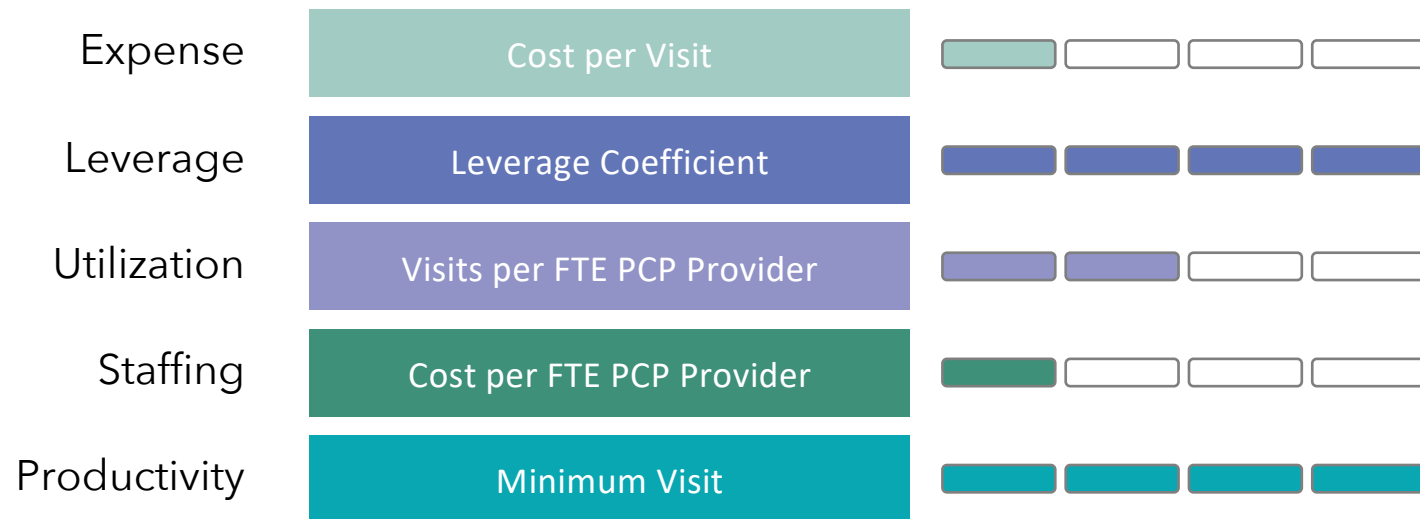
Methodology

2020 Lilypad® Award Methodology

Lilypad® annually recognizes individual Rural Health Clinics ("RHC") and states with Lilypad Awards ("Lilies") based on their financial and operational performance to peers. The Awards program applies a set of five metrics to rate every RHC in the country and assign national Clinic ranks; the aggregate Clinic rank in each state is used to assign an overall State rank. All metrics are derived from the publicly available December 2019 Medicare Cost Report data files.

Step 1. Data Management. Lilypad warehouses Medicare Cost Reports for every RHC in the United States and analyzes both Provider-based ("PB-RHC") and Independent ("I-RHC") data files. As part of the data management process, we evaluate the integrity of each Cost Report to determine if the data furnished by CMS are complete and accurate. Cost Report data are evaluated on a field-by-field basis and are included only if our integrity analysis confirms that the data are valid. Cost Reports that violate our 16 integrity checks are eliminated to prevent erroneous data from corrupting the rankings.

Note: The count of completed Cost Reports is driven by the methodology applied in Cost Report preparation; specifically, organizations have an option to report RHCs individually or to consolidate clinics when filing their Cost Report. Therefore, in most cases the count of completed Cost Reports value will be fewer than the non-duplicated count of RHCs in a State as enumerated in the Quality, Certification and Oversight Reports (QCOR) resource.

Step 2. Metrics. We calculate five metrics for every RHC and use the scores to apply national ranks:

1. *Expense*: Total Clinic Allocated Cost per Patient Visit
2. *Utilization*: Patient Visits per FTE Provider (APP and Physician)
3. *Staffing*: Total Clinic Allocated Cost per FTE Provider (APP and Physician)
4. *Productivity*: Achievement of CMS Minimum Productivity Standards
5. *Leverage*: Distance from target for ratio of FTE APPs to FTE Physicians

Step 3. Metric Weighting. After each metric is calculated for each RHC, the clinics are ranked and then a weighted score is applied to produce a final clinic rank. Note that for some metrics, a higher absolute score is considered better. Each of the five (5) clinic metrics are assigned a different weight that reflects the relative importance and relevance of each metric. For example, the *Utilization* metric is weighted more heavily than the *Expense* metric.

Step 4. Clinic Lilies. Based on the total score earned by each RHC, the Lilypad Awards program recognizes the top five I-RHCs and top five PB-RHCs in each of five geographic regions. These 50 clinics earn "Lilies" and are considered the top performing RHCs in the United States for CY 2020.

Step 5. State Lilies. Based on the aggregate value of the weighted total score earned by RHCs in each state, the Lilypad Awards program recognizes the top five states. These five states earn "Lilies" and are considered the top performing states in the United States for CY 2020.

https://www.lilypad207.com/awards

1 Download electronic cost reports

2 Apply data integrity checks (**20** of them!)

3 Eliminate bad data and trim outliers

4 Calculate metrics for every eligible clinic

5 Apply weights across five metrics

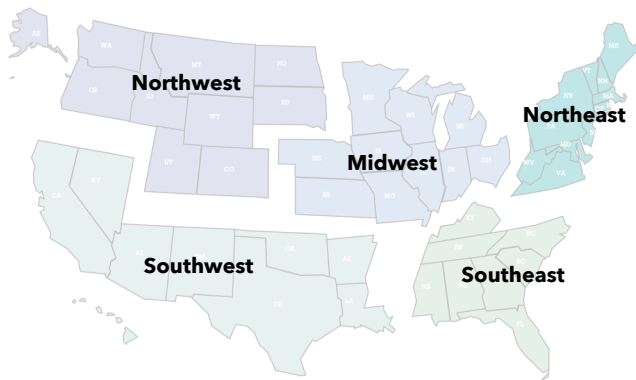**6** Rank all eligible clinics and states

2018 Medicare Cost Reports

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2020 Lilypad® Award Metrics

Expense	Cost per Visit	
Leverage	Leverage Coefficient	
Utilization	Visits per FTE PCP Provider	
Staffing	Cost per FTE PCP Provider	
Productivity	Minimum Visit	

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2020 Lilypad Clinic Awards

Based on each individual clinic's ranking, the top five Provider-Based RHCs and the top five Independent RHCs earn "Lilies"

25   Top 5 Provider-Based RHCs in 5 Regions

+ 25   Top 5 Independent RHCs in 5 Regions

50   **2020 Clinic Lilies**

For a full list of 2020 Lilypad Award RHC Lily winners, visit:

https://www.lilypad207.com/awards

Get Your Clinic's Rank

Lilypad®

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4,454

Where does your RHC rank?

There are over 4,000 Rural Health Clinics in the US - more than two times as many rural hospitals. But rural health leaders, advocates and policy makers don't know much about RHCs. That's why we analyze and warehouse every Medicare Cost Report for every RHC in the US - to provide valued insights for our most important healthcare providers.

https://www.lilypad207.com

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2020 Lilypad Award Top RHC States

To name the **Top RHC States**, we calculate the five (5) Lilypad Awards metrics used for the Clinic Awards for all eligible clinics in a state as an aggregate and then sort/rank the 40 eligible states by relative performance

| Alabama | Arkansas | Florida | Louisiana | Mississippi |

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About POND®

Practice Operations National Database®

Developed by Lilypad, POND® is the only analytics and benchmarking system dedicated specifically to rural primary care practices

Our Current States
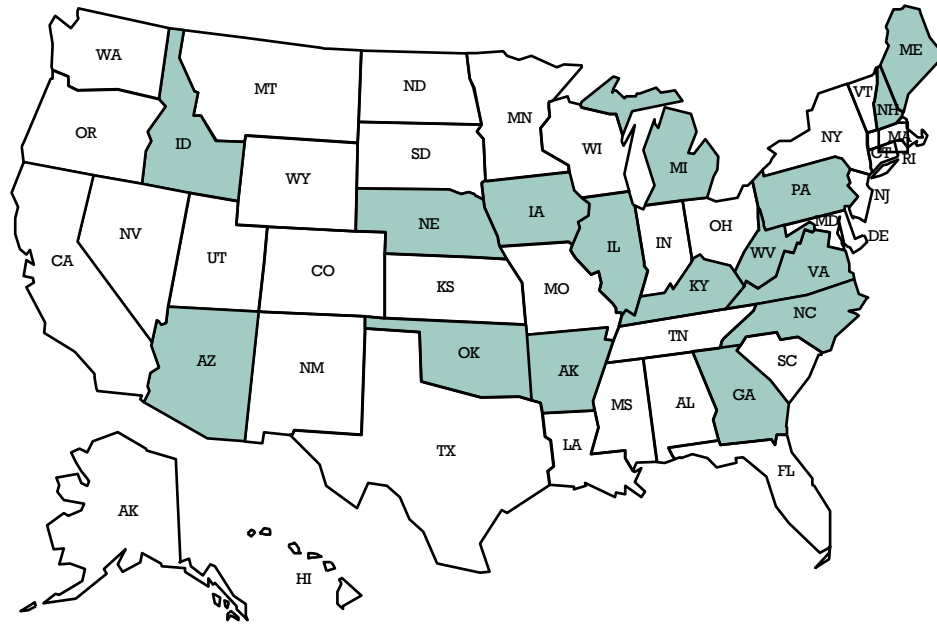
If you are located in one of these states you have access to the
POND program right now

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How Does It Work?

Cost Report Scorecards	POND Analytics

Cost Report Scorecards

State Scorecards   **Clinic Scorecards**

POND Analytics

Clinic Scorecard   **Interactive Tools**
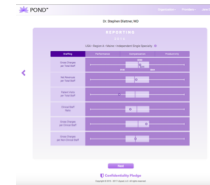
To gain access to these reports and tools the required data must be entered into the POND web application

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SHIP Grant

SHIP allowable investments include activities to assist small rural hospitals with their quality improvement efforts and with their adaptation to changing payment systems through investments in hardware, software and related trainings. This includes aiding with value and quality improvement.

Value-Based Purchasing (VBP) Investment Activity
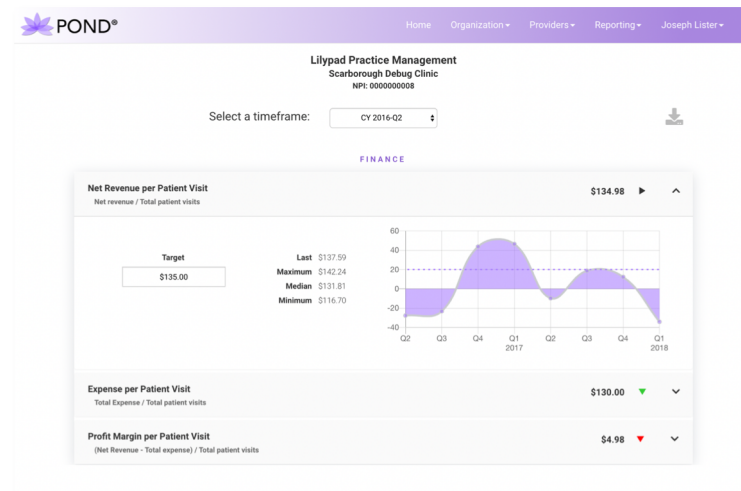D. Provider-Based Clinic Quality Measures Education
Any activity that supports educational training for provider-based clinic quality improvement reporting and scores

$12,000

Annual per Hospital funding

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Lilypad's SHIP Grant Offering

POND® Professional
+
Rural Health Clinic Educational Resources

Lilypad's SHIP Grant Offering

Lilypad's new POND Professional web application enables RHCs to collect, report and benchmark rural relevant financial, operational and quality metrics every quarter. The tool helps clinical teams set targets, build dashboards and share information among all your clinic staff and providers. The new Practice Management web application integrates diagnostic and educational resources to ensure your clinic optimizes :

1	PB-RHC Consolidation	6	Patient Panel Development
2	Productivity Standards	7	HCC Education and Monitoring
3	Optimal Hospital Linkage	8	CCM, TCM and BHI Implementation
4	340B Optimization	9	Fair Market Valuation Basis
5	Specialty Care Integration	10	Quality Measurement/Benchmarks

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Join Us Next Month

Process and Outcomes Quality Measurement
Monday, March 23rd at 3:00 EST

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Thanks for Joining

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