

Performance-based Incentive Payments  
 Project Summaries  
 FY2017 – 2019  
 Tenth Round

| Facility Name             | % Rate Add-on                                   | Performance Period         | FY17 State Share | FY18 State Share | FY19 State Share | Project Description & Performance Measures   |
|---------------------------|---|----------------------------|------------------|------------------|------------------|--|
| Aicota Health Care Center | 2 Years<br>Year 1:<br>4.00%<br>Year 2:<br>3.00% | 01/01/2017 –<br>12/31/2018 | \$16,792         | \$35,783         | \$17,392         | To implement a program to improve employee engagement.<br><br>Outcomes – Direct Care Staff Retention as reported on the Cost Report.<br><br>Outcomes – MN QOL <ul style="list-style-type: none"> <li>• Meaningful Activity Domain</li> <li>• Mood Domain</li> <li>• Relationship Domain</li> </ul>   |
| Andrew Residence          | 2 Years<br>Year 1:<br>1.79%<br>Year 2:<br>1.44% | 01/01/2017 –<br>12/31/2018 | \$59,958         | \$131,033        | \$66,609         | To reduce substance abuse symptom severity by developing a program to treat residents with dual diagnosis. The Integrated Dual Disorder Treatment (IDDT) program will incorporate chemical dependency treatment to residents who are diagnosed with both a substance abuse dependency and a mental illness.<br><br>Outcomes – Reduce or maintain the average composite severity scores for 70% of IDDT program participants. |
| Angels Care Center        | 2 Years<br>Year 1:<br>5.00%<br>Year 2:<br>3.00% | 01/01/2017 –<br>12/31/2018 | \$10,738         | \$21,271         | \$8,897          | Create a new dining, customer service and weight loss program to improve quality of life and care.<br><br>Outcomes – MN QIs <ul style="list-style-type: none"> <li>• Prevalence of Unexplained Weight Loss</li> </ul> Outcomes – MN QOL <ul style="list-style-type: none"> <li>• Food Domain</li> </ul>  |

| Facility Name   | % Rate Add-on  | Performance Period      | FY17 State Share | FY18 State Share | FY19 State Share | Project Description & Performance Measures  |
|---|--|-------------------------|------------------|------------------|------------------|---|
| Benedictine Health System Collaborative <ul style="list-style-type: none"> <li>• Benedictine Health Center</li> <li>• Benedictine Health Center Innsbruck</li> <li>• Benedictine Health Center Minneapolis</li> <li>• Benedictine Living Community Ada</li> <li>• Benedictine Living Community St. Peter</li> <li>• Cerenity Care Center Humboldt</li> <li>• Cerenity Care Center Marian</li> <li>• Cerenity Care Center White Bear Lake</li> <li>• Koda Living Community</li> <li>• Madonna Towers of Rochester</li> <li>• Regina Senior Living</li> <li>• Saint Anne Extended Healthcare</li> <li>• Saint Gertrude's Health &amp; Rehab Center</li> <li>• Saint Michael's Health &amp; Rehab Center</li> <li>• Saint Raphael's Health &amp; Rehab Center</li> <li>• Seminary Home</li> <li>• Villa St. Vincent</li> </ul> | 2 Years<br>1.91%<br>1.41%<br>1.11%<br>1.14%<br>2.21%<br>0.68%<br>2.62%<br>2.26%<br>2.49%<br>2.76%<br>1.82%<br>1.44%<br>2.07%<br>2.68%<br>2.82%<br>1.67%<br>1.94% | 01/01/2017 – 12/31/2018 | \$153,512        | \$365,504        | \$211,992        | This project is designed to further reduce the incidence, prevalence, and rate at which infections are spread, including a wide variety of potential infectious organisms. The aim is to reduce the number of emergency room visits and subsequent hospital admissions related to preventable infections.<br><br>Outcomes – MN QIs <ul style="list-style-type: none"> <li>• Prevalence of Urinary Tract Infections</li> <li>• Prevalence of Infections</li> </ul>   |
| Benediction Health System Collaborative <ul style="list-style-type: none"> <li>• Benedictine Health Center</li> <li>• Benedictine Health Center Innsbruck</li> <li>• Benedictine Health Center Minneapolis</li> <li>• Benedictine Living Community Ada</li> <li>• Benedictine Living Community St. Peter</li> <li>• Cerenity Care Center Humboldt</li> <li>• Cerenity Care Center Marian</li> <li>• Cerenity Care Center White Bear Lake</li> <li>• Koda Living Community</li> <li>• Madonna Towers of Rochester</li> <li>• Regina Senior Living</li> <li>• Saint Anne Extended Healthcare</li> <li>• Saint Gertrude's Health &amp; Rehab Center</li> <li>• Saint Michael's Health &amp; Rehab Center</li> <li>• Saint Raphael's Health &amp; Rehab Center</li> <li>• Seminary Home</li> <li>• Villa St. Vincent</li> </ul> | 2 Years<br>2.73%<br>2.76%<br>1.71%<br>3.45%<br>2.79%<br>1.75%<br>2.38%<br>2.13%<br>2.51%<br>2.24%<br>3.18%<br>2.47%<br>2.80%<br>2.32%<br>2.18%<br>3.33%<br>2.56% | 01/01/2017 – 12/31/2018 | \$207,312        | \$493,599        | \$286,287        | This project's aim is to decrease turnover in direct-care workers (CNA-NARs, LPNs, and RNs) through an onboarding system that provides consistent and thorough training with mentors, a method to initiate CNA certification coursework (fast track). Staff stability will provide residents better quality of care and therefore a higher quality of life as well as reducing the significant costs that occur with increased staff turnover.<br><br>Outcomes - Direct Care Staff Retention as reported on the Cost Report.<br><br>Outcomes – MN QIs <ul style="list-style-type: none"> <li>• Baseline Score on 100 Point Scale</li> </ul> |

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| Birchwood Care Home    | 2 Years<br>Year 1:<br>5.00%<br>Year 2:<br>3.70% | 01/01/2017 –<br>12/31/2018 | \$21,303         | \$45,182         | \$21,769         | <p>To improve the overall experience in dining room and food choice during meal and snack times. The plan is to utilize all staff and residents in contributing to these choices and also what residents would like to see on new menus and other changes to the dining experience.</p> <p>Outcomes – MN QIs</p> <ul style="list-style-type: none"> <li>• Prevalence of Unexplained Weight Loss</li> <li>• Prevalence of Depressive Symptoms</li> </ul>  |
| Caledonia Care & Rehab | 2 Years<br>Year 1:<br>5.00%<br>Year 2:<br>3.00% | 01/01/2017 –<br>12/31/2018 | \$11,709         | \$23,195         | \$9,702          | <p>To reduce incontinent episodes through individualized care using evidence based practice to improve quality of life/care. The facility will approach incontinence from a holistic perspective that includes psychosocial/quality of life as well as medication review, restorative programming and staff education.</p> <p>Outcomes – MN QIs</p> <ul style="list-style-type: none"> <li>• Prevalence of Occasional to Full Bladder Incontinence w/o a Toileting Plan (LS)</li> <li>• Prevalence of Occasional to Full Bowel Incontinence w/o a Toileting Plan (LS)</li> <li>• Incidence of Worsening or Serious Bladder Incontinence (LS)</li> <li>• Incidence of Worsening or Serious Bowel Incontinence (LS)</li> </ul> |

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| Care Choice Collaborative <ul style="list-style-type: none"> <li>• Augustana Chapel View Care Center</li> <li>• Augustana Health Care Center of Apple Valley</li> <li>• Augustana Health Care Center of Hastings</li> <li>• Augustana Health Care Center of Minneapolis</li> <li>• Augustana Mercy Health Care Center</li> <li>• Catholic Eldercare on Main</li> <li>• Crest View Lutheran Home</li> <li>• Episcopal Church Home of Minnesota</li> <li>• Guardian Angels Care Center</li> <li>• Jones-Harrison Residence</li> <li>• Lyngblomsten Care Center</li> <li>• Mount Olivet Careview Home</li> <li>• Mount Olivet Home</li> <li>• Ramsey County Care Center</li> <li>• Sholom Home East</li> <li>• Sholom Home West</li> <li>• Thorne Crest Retirement Center</li> <li>• Three Links Care Center</li> </ul> | 2 Years<br>Year 1<br>Range:<br>2.88% -<br>4.05%<br>Year 2<br>Range:<br>3.24% -<br>4.35% | 01/01/2017 –<br>12/31/2018 | \$483,980        | \$1,195,785      | \$728,358        | <p>To implement a program entitled Resident Centered Medication Safety (RCMS) that will improve patient and resident care by decreasing unnecessary medications and associated side effects and adverse drug events including falls, impairment in cognition and function. Facilities will use the Beer’s criteria and implement an Antibiotic Stewardship program. Short stay patients will be prepared for a successful transition to home by assuring they receive only necessary medications, educating and engaging them and family caregivers in the importance of reducing unnecessary medications and implementing measures to assure medication adherence once they are home.</p> <p>Outcomes – Participating Pharmacy Partners Data</p> <ul style="list-style-type: none"> <li>• Percent of P/R receiving high-risk meds (from Beers list)</li> <li>• Percent of P/R receiving antibiotics</li> <li>• Percent of P/R receiving psychotropic meds</li> </ul> <p>Outcomes – MN QIs</p> <ul style="list-style-type: none"> <li>• Prevalence of Antipsychotic Medications without a Diagnosis of Psychosis (LS)</li> <li>• Hospitalization Rate within 30 Days after Admission</li> </ul> <p>Outcomes – Medication Competency Testing</p> <p>Outcomes – Per Person Pharmacy Spend</p> |

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| Care Ventures Collaborative <ul style="list-style-type: none"> <li>• Annandale Care Center</li> <li>• Assumption Home</li> <li>• Augustana Dassel Lakeside Community Home</li> <li>• Belgrade Nursing Home</li> <li>• CentraCare Health System – Long Prairie</li> <li>• Cokato Manor</li> <li>• Elders Home</li> <li>• Fair Oaks Lodge</li> <li>• Frazee Care Center</li> <li>• Glenwood Village Care Center</li> <li>• Knute Nelson</li> <li>• Minnewaska Lutheran Home</li> <li>• Mother of Mercy</li> <li>• Pioneer Care Center</li> <li>• Traverse Care Center</li> </ul> | 2 Years<br>Year 1:<br>5.00%<br>Year 2:<br>3.5%       | 01/01/2017 – 12/31/2018 | \$255,049        | \$530,745        | \$246,548        | To progress towards person-centered living by improving resident choices for Dining and Activities that will allow for more customized options based on the resident’s likes and dislikes and to improve the culture by addressing communication barriers within the organization.<br><br>Outcomes – MN QIs <ul style="list-style-type: none"> <li>• Report Score on 100 Point Scale</li> </ul> Outcomes – MN QOL <ul style="list-style-type: none"> <li>• Food Domain</li> <li>• Activity Domain</li> </ul> Outcomes – MN Family QOL <ul style="list-style-type: none"> <li>• Food Domain</li> </ul> |
| CentraCare Collaborative <ul style="list-style-type: none"> <li>• CentraCare Health System – Monticello</li> <li>• CentraCare Health System – Melrose</li> <li>• CentraCare Health System – Sauk Centre</li> <li>• Koronis Manor</li> <li>• Saint Benedict’s Senior Community</li> </ul>   | 2 Years<br>2.15%<br>2.15%<br>2.15%<br>2.15%<br>2.15% | 01/01/2017 – 12/31/2018 | \$72,489         | \$172,592        | \$100,103        | To make its approach to offering meaningful activities more resident-centered/resident-directed, flexible, and connected to the community.<br><br>Outcomes – MN QOL <ul style="list-style-type: none"> <li>• Meaningful Activities Domain</li> <li>• Autonomy Domain</li> </ul>   |

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| Community Memorial Home at Osakis      | 2 Years<br>5.00%                               | 01/01/2017 –<br>12/31/2018 | \$10,726         | \$25,538         | \$14,812         | <p>The project will improve quality of care and quality of life for residents by creating and implementing a Wellness and Exercise program that will train ‘Wellness/Exercise Technicians so services will be delivered in a more efficient manner while ensuring our residents receive consistent exercise and increased activities.</p> <p>Outcomes – MN QIs</p> <ul style="list-style-type: none"> <li>• Incidence of walking as well or better on previous assessment (LS)</li> <li>• Incidence of Worsening or Serious Functional Dependence (LS)</li> <li>• Incidence of Worsening or Serious Mobility Dependence (LS)</li> </ul> |
| Courage Kenny Rehabilitation Institute | 1 Year<br>3.25%                                | 01/01/2017 –<br>12/31/2017 | \$13,268         | \$18,322         | \$0              | <p>To implement a project to improve the quality of care of clients by developing systems that will help to reduce the prevalence of urinary tract infections.</p> <p>Outcomes – MN QIs</p> <ul style="list-style-type: none"> <li>• Prevalence of Urinary Tract Infections</li> </ul>  |
| Divine Providence Community Home       | 2 Years<br>Year 1:<br>4.5%<br>Year 2:<br>3.20% | 01/01/2017 –<br>12/31/2018 | \$6,538          | \$13,677         | \$6,420          | <p>To improve the overall culture of the organization by delivering good quality care more efficiently, focusing on revamping employees’ experience throughout the onboarding process, make more efficient use of resources, create systems and a culture that will promote higher employee retention.</p> <p>Outcomes – Care Related Staff Retention as reported on the Cost Report.</p> <p>Outcomes – MN QOL</p> <ul style="list-style-type: none"> <li>• Relationship Domain</li> <li>• Caregiving Domain</li> </ul>   |

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| Elim Care Collaborative <ul style="list-style-type: none"> <li>• Elim Care &amp; Rehab of Milaca</li> <li>• Elim Care &amp; Rehab of Princeton</li> <li>• Elim Rehab &amp; Nursing Home of Watertown</li> <li>• Haven Homes of Maple Plain</li> <li>• Lake Ridge Care Center of Buffalo</li> <li>• New Harmony Care Center</li> <li>• Park View Care Center</li> <li>• Redeemer Residence</li> </ul> | 2 Years<br>1.50%                                | 01/01/2017 – 12/31/2018 | \$67,415         | \$160,512        | \$93,097         | <p>To embark on a project in support of improving quality of life and quality of care for residents and in turn add to the job satisfaction of the provider. Elim facilities will review systems and implement changes to resident activity and restorative programs that support the idea of healthy minds, body and soul. This project will include an enhanced assessment of individualized goals and implement person centered interventions to enhance personal growth and purposeful living.</p> <p>Outcomes – MN QIs</p> <ul style="list-style-type: none"> <li>• Incidence of Worsening or Serious Mobility Dependence (LS)</li> <li>• Incidence of Walking as Well or Better than on Previous Assessment (LS)</li> <li>• Prevalence of Falls with Injury (LS)</li> <li>• Prevalence of Pressure Sores in High Risk Residents (LS)</li> </ul> <p>Outcomes – MN QOL</p> <ul style="list-style-type: none"> <li>• Meaningful Activity Domain</li> <li>• Relationship Domain</li> <li>• Mood Domain</li> </ul> |
| Eventide Lutheran Home   | 2 Years<br>Year 1:<br>3.40%<br>Year 2:<br>2.60% | 01/02/2017 – 12/31/2018 | \$35,191         | \$75,509         | \$37,163         | <p>To create a culture that attracts, trains and retains the best workers in the industry and leads to a resident centered care model. To develop and implement consistent staffing models to replace current system and to focus on the individual knowledge of our residents' unique needs. Creating smaller and stable work environments, to improve the quality of care the residents receive.</p> <p>Outcomes - Care Related Staff Retention as reported on the Cost Report.</p> <p>Outcomes – MN QOL</p> <ul style="list-style-type: none"> <li>• Relationship Domain</li> <li>• Caregiving Domain</li> </ul>   |

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| Evergreen Terrace Health Care Community | 2 Years<br>2.00%                                | 01/01/2017 –<br>12/31/2018 | \$11,548         | \$27,496         | \$15,948         | <p>To improve the quality of care and the quality of life for residents by focusing on the prevention and reduction of re-hospitalization by utilizing existing tools including a software management system called Daylight IQ from Clinical Outcomes Measurement System (COMS), and obtaining Interact 4 processes and protocols to meet goals.</p> <p>Outcomes – MN QIs</p> <ul style="list-style-type: none"> <li>• Hospitalization Rate within 30 days after Admission for all Facility Annual Admissions</li> <li>• Hospitalizations 31 – 365 days after Admission per 1,000 resident days</li> </ul> |
| Good Samaritan Society – Bethany        | 2 Years<br>Year 1:<br>2.00%<br>Year 2:<br>5.00% | 01/01/2017 –<br>12/31/2018 | \$11,089         | \$43,071         | \$38,331         | <p>To improve quality of care/life by reducing hospital readmissions through reducing unnecessary or ill-advised hospital transfers through a mentorship program, proficiency training with the telemedicine system, and extensive training in INTERACT, communication within the care team, and training with simulation mannequins.</p> <p>Outcomes – MN QIs</p> <ul style="list-style-type: none"> <li>• Hospitalization Rate within 30 days after Admission for all Facility Annual Admissions</li> <li>• Hospitalizations 31 – 365 days after Admission per 1,000 resident days</li> </ul>             |



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| Good Samaritan Society – International Falls  | 2 Years<br>Year 1:<br>5.00%<br>Year 2:<br>4.00% | 01/01/2017 –<br>12/31/2018 | \$13,649         | \$29,767         | \$15,079         | <p>To improve quality of life by developing and implementing a fall prevention management program which will assist with the identification of falls risk and prevent falls. This new program will eliminate alarms which have a negative impact on a resident’s dignity and do not prevent falls. The facility will incorporate a comprehensive approach aimed at identifying risk factors and implementing changes that are person centered and maintain dignity.</p> <p>Outcomes – MN QIs</p> <ul style="list-style-type: none"> <li>• Incidence of Worsening or Serious Mobility Dependence</li> </ul> <p>Outcomes – Self-Reported Falls Indicator</p> <ul style="list-style-type: none"> <li>• Average Number of Falls Per 1,000 Resident Days</li> </ul> |
| Good Samaritan Society – Windom   | 1 Year<br>3.00%                                 | 01/01/2017 –<br>12/31/2017 | \$9,385          | \$22,345         | \$0              | <p>To improve quality of care/life by developing and implementing a pain management program for short stay residents.</p> <p>Outcomes – MN QIs</p> <ul style="list-style-type: none"> <li>• Prevalence of Moderate to Severe Pain (SS)</li> </ul>  |
| GracePointe Crossing Collaborative <ul style="list-style-type: none"> <li>• GracePointe Crossing Gables East</li> <li>• GracePointe Crossing Gables West</li> </ul> | 1 Year<br>5.00%                                 | 01/01/2017 –<br>12/31/2017 | \$56,867         | \$78,531         | \$0              | <p>To improve quality of care and quality of life for residents by increasing recognition and treating pain by using evidence based practices to evaluate not only pain but behavior and depression in all residents as these may be unrecognized signs of pain.</p> <p>Outcomes – MN QIs</p> <ul style="list-style-type: none"> <li>• Incidence of Worsening or Serious Resident Behavior Problems (LS)</li> <li>• Prevalence of Moderate to Severe Pain (LS)</li> <li>• Prevalence of Depressive Symptoms (LS)</li> </ul>  |

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| Hayes Residence   | 2 Years<br>Year 1:<br>5.00%<br>Year 2:<br>4.60%   | 01/01/2017 –<br>12/31/2018 | \$14,172         | \$32,608         | \$18,004         | To improve the quality of life of residents by focusing on improving infection control practices by developing and implementing a new Infection and Prevention Control and Antibiotic Stewardship program.<br><br>Outcomes – MN QIs <ul style="list-style-type: none"> <li>• Prevalence of Infections (LS)</li> <li>• Prevalence of Urinary Tract Infections (LS)</li> </ul>  |
| Hilltop Health Care Center  | 2 Years<br>5.00%  | 01/01/2017 –<br>12/31/2018 | \$18,157         | \$43,230         | \$25,073         | To improve the quality of life/care by focusing on the resident’s physical function and psychosocial needs. The program will enhance the restorative program with the addition of exercise and recreational programming. The physical environment will be changed to meet the personal needs of the residents.<br><br>Outcomes – MN QIs <ul style="list-style-type: none"> <li>• Prevalence of Falls with Injury (LS)</li> <li>• Incidence of Worsening or Serious Range of Motion Limitation (LS)</li> </ul>                     |
| Lac qui Parle Health Network <ul style="list-style-type: none"> <li>• Appleton Area Health Services</li> <li>• Johnson Memorial Health Services</li> <li>• Madison Lutheran Home</li> </ul> | 2 Years<br>Year 1:<br>4.50%<br>Year 2:<br>3.45%<br>Year 1:<br>3.60%<br>Year 2:<br>2.85%<br>Year 1:<br>4.75%<br>Year 2:<br>3.00% | 01/01/2017 –<br>12/31/2018 | \$49,437         | \$104,697        | \$50,303         | To improve resident quality of life and quality of care by decreasing the prevalence of infections and using antibiotics more responsibly. This will be accomplished by increasing and improving all staff education, including physician understanding of the infection process and antibiotic stewardship.<br><br>Outcomes – MN QIs <ul style="list-style-type: none"> <li>• Prevalence of Urinary Tract Infections (LS)</li> <li>• Prevalence of Infections (LS)</li> <li>• Prevalence of Indwelling Catheters (LS)</li> </ul> |

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| Lakewood Health System   | 2 Years<br>Year 1:<br>3.91%<br>Year 2:<br>2.40% | 01/01/2017 –<br>12/31/2018 | \$32,032         | \$76,266         | \$44,234         | To develop a dining room process that incorporates an enhanced quality driven Dining Practice of Standards. To improve the quality of life for residents in their dining experience and to deliver good quality of care more efficiently by incorporating the Five Rights of Dining.<br><br>Outcomes – MN QOL <ul style="list-style-type: none"> <li>• Food Domain</li> <li>• Autonomy Domain</li> </ul>       |
| LifeCare Collaborative <ul style="list-style-type: none"> <li>• LifeCare Greenbush Manor</li> <li>• LifeCare Roseau Manor</li> </ul> | 1 Year<br>1.00%                                 | 01/01/2017 –<br>12/31/2017 | \$7,021          | \$9,696          | \$0              | The collaborative will develop and implement the Life Enhancement/Activity Program to improve quality of life/care focusing on decreasing depression in the collaborative facilities.<br><br>Outcomes – MN QIs <ul style="list-style-type: none"> <li>• Prevalence of Depressive Symptoms (LS)</li> </ul>  |
| Luther Haven   | 2 Years<br>Year 1:<br>5.00%<br>Year 2:<br>4.00% | 01/01/2017 –<br>12/31/2018 | \$25,265         | \$55,101         | \$27,911         | To improve quality of life/care by reducing re-hospitalizations and developing an effective discharge planning process and follow-up post discharge of residents.<br><br>Outcomes – MN QIs <ul style="list-style-type: none"> <li>• Hospitalization rate within 30 days after admission for all Facility Annual Admissions</li> </ul> Outcomes – Re-hospitalization rate following discharge to the community. |
| Mapleton Community Home  | 2 Years<br>Year 1:<br>5.00%<br>Year 2:<br>4.00% | 01/01/2017 –<br>12/31/2018 | \$12,758         | \$27,824         | \$14,094         | To decrease the prevalence of urinary tract infections.<br><br>Outcomes – MN QIs <ul style="list-style-type: none"> <li>• Prevalence of Urinary Tract Infections</li> <li>• Prevalence of Occasional to Full Bladder Incontinence without a Toileting Plan</li> </ul>  |

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| Mayo Clinic Health System – Lake City | 2 Years<br>3.00% | 01/01/2017 –<br>12/31/2018 | \$12,879         | \$30,664         | \$17,785         | <p>Improve sleep quality to decrease psychosocial behavior and depression, episodes of incontinence, falls, infections, and pain, and improve wound healing and mobility/function for the residents.</p> <p>Outcomes – MN QIs</p> <ul style="list-style-type: none"> <li>• Facility Score on 100-point Scale</li> </ul>  |
| New Richland Care Center              | 2 Years<br>5.00% | 01/01/2017 –<br>12/31/2018 | \$10,432         | \$24,837         | \$14,405         | <p>Improve quality of life/care by developing a new dementia care program and decreasing the use of psychotropic medications.</p> <p>Outcomes – MN QIs</p> <ul style="list-style-type: none"> <li>• Incidence of Worsening or Serious Behavior Problems</li> </ul> <p>Outcomes – MN QOL</p> <ul style="list-style-type: none"> <li>• Mood Domain</li> </ul>  |
| Oak Hills Living Center               | 2 Years<br>3.00% | 01/01/2017 –<br>12/31/2018 | \$10,426         | \$24,823         | \$14,397         | <p>Implement a program to improve the quality of life for residents by developing systems that will reduce bladder and bowel incontinence.</p> <p>Outcomes – MN QIs</p> <ul style="list-style-type: none"> <li>• Prevalence of Occasional to Full Bladder Incontinence w/o a Toileting Plan</li> <li>• Prevalence of Occasional to Full Bowel Incontinence w/o a Toileting Plan</li> </ul>   |
| Ostrander Care and Rehab              | 2 Years<br>5.00% | 01/01/2017 –<br>12/31/2018 | \$3,420          | \$8,144          | \$4,724          | <p>To develop and implement a new dining program of planned meals that will be expanded and allow residents to request food choices outside of the menu offered for the day, and to have a variety of healthy snacks available 24/7.</p> <p>Outcomes – MN QIs</p> <ul style="list-style-type: none"> <li>• Prevalence of Unexplained Weight Loss</li> </ul> <p>Outcomes – MN QOL</p> <ul style="list-style-type: none"> <li>• Food Domain</li> </ul> |

| Facility Name          | % Rate Add-on                                   | Performance Period         | FY17 State Share | FY18 State Share | FY19 State Share | Project Description & Performance Measures  |
|------------------------|---|----------------------------|------------------|------------------|------------------|---|
| Pine Haven Care Center | 2 Years<br>Year 1:<br>5.00%<br>Year 2:<br>3.50% | 01/01/2017 –<br>12/31/2018 | \$14,849         | \$30,899         | \$14,354         | <p>Improving the quality of care of residents with a more efficient use of resources to create a better employee experience in every step of the employee life cycle, which will effectively improve the culture of the organization and retain our employees longer.</p> <p>Outcomes - Care Related Staff Retention as reported on the Cost Report.</p> <p>Outcomes – MN QOL</p> <ul style="list-style-type: none"> <li>• Relationship Domain</li> <li>• Caregiving Domain</li> </ul>  |
| Rice Care Center       | 2 Years<br>Year 1:<br>3.00%<br>Year 2:<br>1.50% | 01/01/2017 –<br>12/31/2018 | \$12,012         | \$22,594         | \$8,294          | <p>To improve the quality of life of residents by developing a facility wide pressure ulcer reduction program to reduce pressure ulcers in high risk residents.</p> <p>Outcomes – MN QIs</p> <ul style="list-style-type: none"> <li>• Prevalence of Pressure Sores in High Risk Residents (LS)</li> </ul>   |
| Sauer Health Care      | 2 Years<br>3.50%                                | 01/01/2017 –<br>12/31/2018 | \$12,664         | \$30,152         | \$17,488         | <p>To improve the overall culture of the organization by delivering good quality care more efficiently, focusing on revamping our employees' experience throughout the onboarding process, make more efficient use of our resources, create systems and a culture that will promote higher employee retention.</p> <p>Outcomes - Care Related Staff Retention as reported on the Cost Report.</p> <p>Outcomes – MN QOL</p> <ul style="list-style-type: none"> <li>• Relationship Domain</li> <li>• Caregiving Domain</li> </ul> |

| Facility Name  | % Rate Add-on                                   | Performance Period         | FY17 State Share | FY18 State Share | FY19 State Share | Project Description & Performance Measures   |
|--|---|----------------------------|------------------|------------------|------------------|--|
| St. Francis Health Services Collaborative <ul style="list-style-type: none"> <li>• Aitkin Health Services</li> <li>• Browns Valley Health Center</li> <li>• Franciscan Health Center</li> <li>• Guardian Angels Health &amp; Rehab Center</li> <li>• Heritage Manor</li> <li>• Little Falls Care Center</li> <li>• Littlefork Care Center</li> <li>• RenVilla Health Center</li> <li>• Thief River Care Center</li> <li>• Trinity Care Center</li> <li>• Viewcrest Health Center</li> <li>• West Wind Village</li> <li>• Zumbrota Care Center</li> </ul> | 2 Years<br>3.00%                                | 01/01/2017 –<br>12/31/2018 | \$137,254        | \$326,796        | \$189,542        | To develop and revise infection prevention and control program to improve our residents' quality of care and safety through enhancement of our surveillance, identification, reporting, investigation, treatment, and controlling of infections and the spread of communicable diseases.<br><br>Outcomes – MN QIs <ul style="list-style-type: none"> <li>• Prevalence of Urinary Tract Infections</li> <li>• Prevalence of Infections</li> </ul>             |
| St. Francis Home   | 2 Years<br>3.00%                                | 01/01/2017 –<br>12/31/2018 | \$12,068         | \$28,733         | \$16,665         | To implement various activity programs including a robust intergenerational activity program to enhance the quality of life for residents.<br><br>Outcomes – MN QIs <ul style="list-style-type: none"> <li>• Prevalence of Depressive Symptoms (LS)</li> </ul> Outcomes – MN QOL <ul style="list-style-type: none"> <li>• Mood Domain</li> </ul>   |
| St. John Lutheran Home   | 2 Years<br>Year 1:<br>2.04%<br>Year 2:<br>1.70% | 01/01/2017 –<br>12/31/2018 | \$6,491          | \$14,373         | \$7,470          | To improve the quality of care of residents with a more efficient use of resources to create a better employee experience in every step of the employee life cycle, which will effectively improve the culture of the organization and retain employees longer.<br><br>Outcomes – Certified Nursing Assistants Retention as reported on the Cost Report.<br><br>Outcomes – MN Family QOL <ul style="list-style-type: none"> <li>• Staffing Domain</li> </ul> |

| Facility Name                           | % Rate Add-on   | Performance Period         | FY17 State Share   | FY18 State Share   | FY19 State Share   | Project Description & Performance Measures  |
|---|-----------------|----------------------------|--------------------|--------------------|--------------------|---|
| Valley View Healthcare & Rehab          | 1 Year<br>5.00% | 01/01/2017 –<br>12/31/2017 | \$9,741            | \$13,452           | \$0                | To adopt a consistent model to monitor and compare a resident's pain with a goal to decrease moderate to severe pain for the resident.<br><br>Outcomes – MN QIs<br>• Prevalence of Moderate to Severe Pain (LS) |
|   |                 |                            |                    |                    |                    |   |
| <b>TOTAL Round 10</b>                   |                 |                            | \$1,929,591        | \$4,411,346        | \$2,403,250        |   |
| Carry Over from Round 9                 |                 |                            | \$1,543,016        | \$442,440          | \$0                |   |
| Fiscal Year Adjustments                 |                 |                            | (\$152,728)        | (\$76,734)         | (13,492)           |   |
| Carry Over from Round 8                 |                 |                            | \$2,094,660        | \$448,248          |                    |   |
| Carry Over from Round 7                 |                 |                            | \$367,891          |                    |                    |   |
| <b>TOTAL FUNDED</b>                     |                 |                            | <u>\$5,782,340</u> | <u>\$5,225,300</u> | <u>\$2,389,758</u> |   |
| Amount Appropriated                     |                 |                            | \$6,700,000        | \$6,700,000        | \$6,700,000        |   |
| <b>Difference (or Amount Available)</b> |                 |                            | \$917,570          | \$1,474,700        | \$4,310,242        |   |