



Dear Community Member:

We are pleased to provide this report of the Minnesota Statewide Quality Reporting and Measurement System. It enhances our state's quality data and market transparency for health care and is a building block for transformation of health care.

This quality report is a critical component of Minnesota's nation-leading health reform law of 2008. The law requires the Minnesota Department of Health (MDH) to develop a standardized set of quality measures for hospitals and physician clinics across the state and to produce a public report on health care quality. These efforts build on important work that has been done in Minnesota for many years by MN Community Measurement (MNCM), Stratis Health and the Minnesota Hospital Association (MHA) and have drawn upon their multi-stakeholder, community-wide processes for measure development and selection. Through the requirements in the 2008 law, MDH has expanded the reach of this work:

- **1. Scope.** Approximately 520 Minnesota clinics have reported data to the state system in the first year of required data submission, increasing by over 40 percent the number of physician clinics that reported voluntarily to MNCM. We now have a more complete picture of health care in urban and rural areas. Hospitals are also now submitting data on more than 40 quality measures.
- **2. Risk adjustment.** The information on quality builds on the work done by MNCM. The results have been risk-adjusted to reflect the complexity of the patients that providers serve. This requirement aims to ensure that the results are fair for all providers, regardless of the makeup of their patient populations.

Comprehensive information about health care quality is a cornerstone of our health reform initiative – which has been called "Minnesota's Vision for a Better State of Health." Throughout the implementation of our vision, we have been working hard to achieve the "Triple Aim" of improving the health of the population, the patient experience of care and the affordability of health care. Quality reporting is a vital component of these

goals; if we want to truly improve our state's health in the future, we must first have robust, fair and accurate information about the quality of health care being provided today. This information is also a critical building block of provider peer grouping (PPG), another component of the 2008 state health reform law. PPG will compare providers on a combined measure of risk-adjusted cost and quality. The risk-adjusted quality information presented in this report will be part of the peer grouping analysis. In the future, the release of these risk-adjusted results will be part of the yearly release of PPG.

I thank the providers who have been important partners as we have expanded Minnesota's quality measurement system. I also want to thank our partners at MNCM and Minnesota's non-profit health plans for playing a key role in developing new quality measures and supporting providers' efforts to submit data. We also appreciate the effective collaboration with MHA, Stratis Health, the Institute for Clinical Systems Improvement and the Minnesota Medical Association in supporting providers' efforts both to submit data and to improve quality. We have had substantive conversations about these efforts, and I hope these discussions will continue as we work to improve health care value in Minnesota – and the health of all Minnesotans.

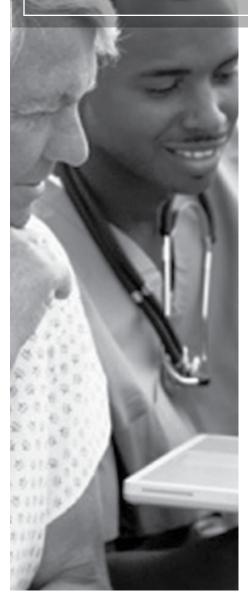
In summary, this quality report is an important stepping stone toward a value-based health care system in Minnesota – one that reflects both quality and cost. Together, those elements will provide a better picture of health care value in our state, encourage redesign of care and payment based on value and allow consumers to choose providers based on both quality and cost. With such information we can reach our vision of a better state of health care – and a better state of health.

Sincerely,

Sanne Magnan, M.D., Ph.D.

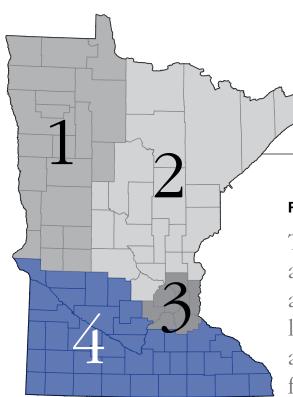
Commissioner





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REGION 4

This report is separated into four regions due to the large amount of data included. Physician clinics and hospitals are divided into regions based on the county where they are located. The list on the next page identifies which counties are included under each region. Use this information to find the region you are interested in.

| REGION 1 | REGION 2 |
|-------------------|-----------------|
| Northwest and | Northeast |
| West Central | and Central |
| Becker | Aitkin |
| Beltrami | Benton |
| Clay | Carlton |
| Clearwater | Cass |
| Douglas | Chisago |
| Grant | Cook |
| Hubbard | Crow Wing |
| Kittson | Isanti |
| Lake of the Woods | Itasca |
| Mahnomen | Kanabec |
| Marshall | Koochiching |
| Norman | Lake |
| Otter Tail | Mille Lacs |
| Pennington | Morrison |
| Polk | Pine |
| Pope | Sherburne |
| Red Lake | St. Louis |
| Roseau | Stearns |
| Stevens | Todd |
| Traverse | Wadena |
| Wilkin | Wright |
| | |

REGION 3 REGION 4 Martin **Twin Cities** Southwest, McLeod Meeker Metro Southeast and Anoka **South Central** Mower Carver Big Stone Murray Dakota Blue Earth Nicollet Nobles Brown Hennepin Olmsted Chippewa Ramsey Scott Cottonwood Pipestone Redwood Washington Dodge Renville Faribault Fillmore Rice Freeborn Rock Goodhue Sibley Steele Houston Jackson Swift Kandiyohi Wabasha Lac Qui Parle Waseca Le Sueur Watonwan Lincoln Winona Yellow Medicine Lyon



What is high quality health care?

High quality in health care can be described as "doing the right thing, at the right time, in the right way — and having the best possible results."

The Institute of Medicine states that high quality health care is:

Effective: Treatment uses scientific knowledge and medical experience to increase the chances of getting the best results, and decrease the chances of getting bad results, including death.

Safe: Treatment does not result in medical complications or cause harm to the patient that can be prevented.

Patient-centered: Doctors, nurses, and other medical staff treat patients with respect, dignity and compassion, and are responsive to patients' needs, values, and preferences.

Timely: Patients get the care they need without harmful delays.

Efficient: Treatment does not waste doctors' or patients' time or money.

Equitable: The same level of care is available to everyone, including men, women and children of all cultures, incomes, education level, social status or any other characteristics.

Methods Overview

- This report includes information about the quality of care provided by physician clinics and hospitals in one region of the state. Readers may easily compare the results of a particular physician clinic or hospital with a statewide average on most measures.
- Much of the data for this report was collected as part of the Minnesota Statewide Quality Reporting and Measurement System.
 - Physician clinics are required to report data at the clinic level. Data collected directly from physician clinics included in this report relates to care provided in 2009. While participation in these data collection systems is required under state law, not all physician clinics submitted data. Those clinics are included in this report with a note they did not submit required data. For more information on which physician clinics are included, see the Physician Clinic Inclusion section on page 120.
 - Hospital results are available on 43 measures. The time periods covered by each measure vary; more details are available in Appendix Two.
- Results are publicly reported for those physician clinics submitting data on 30 or more patients for each measure, while hospital results are reported for those hospitals with data on 25 or more patients for each measure. These numbers are considered the minimum standards for valid public reporting and align with established reporting standards in Minnesota and at the national level. Physician clinics and hospitals that submitted data on fewer numbers of patients are included in this report with a note they did not have sufficient data for public reporting purposes.
- Some physician clinic measures were "not applicable" for a particular clinic given the specialties at the clinic site and have been noted as such in this report.

- Results are risk-adjusted, meaning that results are adjusted to account for differences in patient populations that are beyond the control of a doctor or hospital. This is done in order to make results comparable regardless of patient characteristics. For example, hospital outcome measures, such as death rates for patients with a broken hip, take into account how sick individual patients are. Similarly, results for physician clinics assume that physician clinics have the same proportion of patients covered by commercial insurance, Medicare, and MN health care programs or are uninsured. More details about how risk adjustment was carried out for particular categories of measures is available in Appendices One and Two.
- This report uses the terms "physician clinic" and "medical group" to describe the settings in which physicians provide medical services. For purposes of this report, a physician clinic is a specific location in which a physician practices, while a medical group may be a larger organization that includes multiple physician clinics.
- Some results are calculated at the medical group level. For those measures, each physician clinic associated with a particular medical group has been given the medical group's score for that measure. While those measure results include a broader population of patients than any one individual clinic, each individual physician clinic contributed to the medical group's score.
- More detail about physician performance, data collection and methodology is available in Appendix One. Additional information about hospital performance, data collection and methodology is available in Appendix Two.



Quality in health care, including in doctor's offices and hospitals, can be described as "doing the right thing, at the right time, in the right way — and having the best possible results."

This report provides information on how well physician clinics, like your doctor's office, and hospitals in Minnesota care for patients with a wide range of health problems. It can:

- Help you choose a hospital or physician clinic for yourself,
- Provide useful information for your loved ones if they need to visit the doctor's office or hospital for care,
- Encourage clinics and hospitals to improve their quality, and
- Help everyone learn more about health care quality.

Why should you look at this information?

Don't people receive high quality care in all physician clinics or hospitals? Here are the facts:

- All clinics and hospitals do not provide the same quality of care. Some are better than others.
- A particular clinic or hospital might do a very good job on some health problems and not on other health issues.
- Your doctor, or the specialist or surgeon he or she recommends, may be highly skilled, but clinic and hospital quality also depend on how well all of the staff, such as nurses, take care of you, and on how well the clinic or hospital is organized.
- For the physician measures, some clinics do better at managing chronic or ongoing conditions than others. Some physician clinics may also do a better job of treating different conditions like asthma or diabetes. Keep in mind that clinics vary in how well they do at managing these different conditions.
- Whenever people go to the hospital, they risk getting a new health problem while getting medical care for an existing problem. Hospitals vary in how well they protect patients from these risks.

Given these facts, the goal of this report is to give you information you can use to increase your chances of getting the best possible care when you need it.

How should you use this report?

How can this information help you? First, you can use this information to help you choose a clinic or hospital. The physician clinic measures are for different health conditions and preventive care. If you or someone you care about has one of these conditions, you can use this information to choose a clinic. This also applies to hospitals where you can use the hospital measures to choose a hospital that's right for you if you are being admitted to the hospital in the near future. It can help you find a clinic or hospital that is especially good at treating the conditions you face, or especially good at avoiding complications in the case of the hospital measures.

The best way to use this particular report is also to **look for patterns in the scores**. Some clinics or hospitals may do very well across the board; others may do well in some areas and not in others; still others may really show problems in a wide range of areas. Look carefully for these patterns. At the same time, if there is a particular operation, medical condition, or complication that is of particular concern to you, you will want to give more consideration to information related to those concerns.

A few things to keep in mind as you use this information:

This information is a starting point for looking at the quality of care at a particular clinic or hospital. The overall scores and specific topic results are not the final word. There are a few things to keep in mind when looking at this report.

This report doesn't cover all conditions, preventive treatments, surgeries or complications.

Additional information may be included in future reports.

Don't presume that because a clinic or hospital does well (or poorly) in one area of health care, that it will do well (or poorly) in all areas.

Physician clinics and hospitals have strengths and weaknesses in providing different types of care.

In some cases the specific measures track serious failures in a hospital's performance which happen only once in a great while.

You have to be careful when comparing hospitals on these very rare events. The numbers are so small that it is hard to know when a difference means something or just happened by chance. For example, only a handful of patients experience bad reactions to a blood transfusion out of a million people each year.

Don't give too much weight to small differences between clinics or hospitals.

Even on more common events, be careful not to give too much weight to small differences. For example, if in one hospital, 25 people out of a thousand had too much bleeding after an operation, and in another hospital, 26 people out a thousand did, that's a really small difference and you shouldn't worry about it.





| QUALITY OF CARE FOR CHRONIC CONDITIONS | 5 |
|--|----|
| Table of Results | 5 |
| QUALITY OF CARE FOR ACUTE CONDITIONS | 8 |
| Table of Results | 5 |
| QUALITY OF PREVENTIVE CARE | 1 |
| Table of Results | 25 |

Choose the health care quality topic you want to learn about.

Physician clinic quality information is available for three main topics in this section. These areas include:

- Chronic Conditions (Ongoing Conditions)
- Acute Conditions (Shorter Term Illnesses)
- Preventive Care (Avoiding Illness)

One topic may be of greater interest to you than others. For example, if you or a loved one has a chronic or ongoing condition like diabetes, you will probably be interested in the "Chronic Conditions" topic. However, if you are interested in finding out how well your clinic does with keeping you healthy, check out the "Preventive Care" section.

Each topic includes information on several different quality indicators. A quality indicator is information, in this case a percentage rate, that shows how often patients had a particular experience when they received medical care. These experiences reflect a particular aspect of health care quality. Each health topic is briefly described below, with examples of quality indicators for that topic. To learn about all the indicators presented for each topic, please turn to the appropriate page noted in the index at the start of this section.

Chronic Conditions: Chronic conditions are ongoing and cannot be cured, but can be managed with the right kinds of treatments. This section includes measures related to chronic conditions like diabetes, vascular care, high blood pressure, and asthma.

Acute Conditions: Acute conditions are illnesses that don't last very long, typically less than three months. This section includes measures for the treatment of acute conditions like colds and sore throats in children, as well as bronchitis in adults.

Preventive Care: Preventive care can help keep you healthy, as well as detect certain illnesses early, when treatment can be more effective. This section includes preventive measures like cancer screenings, chlamydia tests, and childhood immunizations.

More Information about the Results

Be sure to note whether a higher or lower percentage rate is better for the measure you are interested in. For all of the physician clinic measures, a higher percentage rate is always going to be better. Keep in mind the percentage rate is related to how many patients out of one hundred reached the treatment goals, or received the right type of medication. For example, if the clinic rate for the "Best Care for Adults with Diabetes" measure is 36%, this means 36 out of 100 patients achieved the five goals outlined in this measure.

QUALITY OF CARE FOR CHRONIC CONDITIONS SECTION CONTENTS

| The Best Care for Adults with Diabetes |
|---|
| The Best Care for Adults with Vascular Disease |
| The Best Care for Adults with High Blood Pressure |
| The Best Care for Children and Adults with Asthma |
| Table of Results |
| Appendix Table |



Chronic health conditions are ongoing health conditions like diabetes or heart disease. These conditions are prevalent and costly. For example, in 2007 about 7.8% of the US population had diabetes. This translates to a cost of \$174 billion in direct costs like medical expenses, and indirect costs like disability and work loss. Not only are these conditions expensive, but they can be difficult to manage and lead to other medical conditions. However, there are treatments and treatment goals which have been proven to help those with chronic conditions stay healthy and limit their risk of other complications. The following section includes measures that help patients with chronic conditions stay healthy.

The Best Care for Adults with Diabetes

What is the measure?

The best care for diabetes includes helping patients achieve five goals. This measure shows the percentage of diabetes patients, ages 18-75, who met all five goals:

- 1) Blood Sugar Control: Most recent HbA1C test in the last 12 months has a level of less than 8%
- 2 Blood Pressure Control: Most recent blood pressure in the last 12 months was less than 130/80 mm Hg
- 3) Cholesterol Control: Most recent LDL or "bad" cholesterol was less than 100 mg/dl
- 4) Daily aspirin use (or a documented contraindication) for those ages 41 or older
- 5) Tobacco free status: No smoking or chewing of tobacco

Why is this important?

The five goals identified in this measure have been shown to have the greatest impact on the health of those with diabetes. Heart disease and stroke are the leading causes of early death among people with diabetes. Those diabetes patients who meet the five goals outlined in this mea-

When choosing a clinic, look for the clinic that has a

HIGHER RATE.

sure will greatly lower their risk of heart attacks, blood vessel damage and other vascular diseases. They will also experience fewer problems with their kidneys, eyes and nervous system.

Performance on this measure ranged from zero percent to 57 percent.

MEASURE SOURCE: Optimal Diabetes Care Composite

The Best Care for Adults with Vascular Disease

What is the measure?

The best care for vascular disease includes helping patient achieve four goals. This measure shows the percentage of vascular patients ages 18-75, who met all four goals:

When choosing a clinic, look for the clinic that has a

HIGHER RATE.

- 1) Blood Pressure Control: Most recent blood pressure in the last 12 months was less than 130/80 mm Hg
- 2) Cholesterol Control: Most recent LDL or "bad" cholesterol was less than 100 mg/dl
- 3) Daily aspirin use (or a documented contraindication)
- 4) Tobacco Free Status: No smoking or chewing of tobacco

Why is this important?

Vascular disease is any condition that affects the blood vessels and limits their ability to supply blood, oxygen and nutrients to the body from the heart. Vascular disease is most commonly due to hardening of the arteries or the slow build-up of fatty substances over time along the blood vessel wall, which make it harder for the heart to pump blood through the artery. Depending on which arteries become blocked, different parts of the body can be affected by this reduction in blood flow, which is also called ischemia. A blockage in the coronary arteries, or the blood vessels of the heart, can lead to chest pain or a heart attack. Achieving the four treatment goals in this measure will help stop the build-up of fatty substances along the blood vessel wall that make it harder for the heart to pump blood.

Performance on this measure ranged from zero percent to 63 percent.

MEASURE SOURCE: Optimal Vascular Care Composite

The Best Care for Adults with High Blood Pressure

What is the measure?

The best treatment for high blood pressure includes keeping blood pressure below 140/90 mmHg.

This measure shows the percentage of adults, ages 18-85, diagnosed with high blood pressure that had a blood pressure reading lower than 140/90 mmHg.

When choosing a clinic, look for the clinic that has a **HIGHER RATE.**

Why is this important?

High blood pressure, also known as hypertension, is a major risk factor for other diseases including heart attack, heart disease, kidney failure and stroke. Having your blood pressure monitored regularly and working with your doctor to keep your blood pressure below 140/90 mmHg can reduce your risk of developing these conditions.

High blood pressure is often called the "silent killer" because many people don't know they have it. The only way to know is to have your blood pressure checked.

Performance on this measure ranged from 34 percent to 85 percent.

MEASURE SOURCE: HEDIS: Controlling High Blood Pressure

The Best Care for Children and Adults with Asthma

What is the measure?

The best treatment for asthma includes a prescription medication (such as an inhaler) to control the symptoms. This measure shows the percentage of asthma patients, ages 5-56, who were prescribed appropriate medication.

Why is this important?

Asthma is one of the most common chronic conditions in the United States. It causes the tiny airways that bring air to the lungs to narrow, reducing the flow of oxygen to the body. For

asthma sufferers, a trigger such as cigarette smoke, perfume, allergies or dust in the air can cause the tiny airways to constrict, choking the flow of oxygen to the body's systems. Symptoms of asthma include difficulty breathing or shortness of breath, a tight feeling in the chest, coughing and wheezing. Inhaled corticosteroids are the recommended therapy for those with moder-

When choosing a clinic, look for the clinic that has a **HIGHER RATE.**

ate to severe asthma. When used regularly they are proven to reduce the inflammation in the airways caused by asthma.

Performance on this measure ranged from 81 percent to 97 percent.

MEASURE SOURCE: HEDIS: Use of Appropriate Medications for People with Asthma

QUALITY OF CARE FOR ACUTE CONDITIONS SECTION CONTENTS

| The Best Care for Children with a Cold | (|
|---|----|
| The Best Care for Children with a Sore Throat | 0 |
| The Best Care for Adults with Bronchitis | 2(|
| Table of Results | 25 |
| Appendix Table | 2(|



Acute health conditions usually happen suddenly and do not last long. Typically, acute illnesses last less than three months. A sore throat or a cold are both considered acute conditions. Treating these illnesses might not involve any prescription medication. In fact, the best treatment could be over-the-counter medication or getting some rest. The following section includes measures for acute conditions where the best treatment was given for the identified illness. This includes measures showing whether antibiotics were appropriately prescribed.

The Best Care for Children with a Cold

What is the measure?

Treatment of the common cold should not include prescribing antibiotics. This measure shows the percentage of children, 3 months to 18 years, diagnosed with a cold and not given an antibiotic.

Why is this important?

The most effective cure for the common cold is self-care at home. This can include over-the-counter medication, drinking fluids, and getting plenty of rest. There are over 200 viruses which can cause this illness, and antibiotics are not effective against viruses such as colds.



Remember, antibiotics are medicines that kill bacteria, not viruses. Taking antibiotics for viral illnesses, like the common cold, will not work. Even worse, using antibiotics when they are not needed may make them less likely to work for other illnesses in the future.

Performance on this measure ranged from 40 percent to 97 percent.

MEASURE SOURCE: HEDIS: Appropriate Treatment for Children with **Upper Respiratory Infection**

The Best Care for Children with a Sore Throat

What is the measure?

In some cases, the treatment of a sore throat includes prescribing antibiotics. This measure shows the percentage of children, ages 2-18, diagnosed with a sore throat and

given a strep test and antibiotics rather than just receiving antibiotics without a strep test.

Why is this important?

Most sore throats are caused by viruses and go away on their own after about a week. Sore throats not caused by viruses are usually caused by a bacterium called

When choosing a clinic, look for the clinic that has a HIGHER RATE.

group A Streptococcus, and commonly called strep throat. Strep throat can be treated with antibiotics. Untreated strep throat can lead to rare but serious complications.

Performance on this measure ranged from 27 percent to 99 percent.

MEASURE SOURCE: HEDIS: Appropriate Testing for Children with **Pharyngitis**

The Best Care for Adults with Bronchitis

What is the measure?

Treatment of bronchitis in adults should not include prescribing antibiotics. This measure shows the percentage of adults

18 - 64 years, diagnosed with acute bronchitis and not given an antibiotic.

Why is this important?

Acute bronchitis is sometimes also called a chest cold. The most effective cure for acute bronchitis is similar to when you have a cold. It can include overthe-counter medication to help quiet your cough, drinking fluids and getting plenty of rest.

When choosing a clinic, look for the clinic that has a

HIGHER RATE.

Antibiotics are medicines that kill bacteria. Only one in ten cases of bronchitis are bacterial, which means 9 out of 10 cases of bronchitis won't be cured with an antibiotic. Also, using antibiotics when they are not needed may make them less likely to work for other illnesses in the future.

Performance on this measure ranged from seven percent to 57 percent.

MEASURE SOURCE: HEDIS: Avoidance of Antibiotic Treatment in Adults with Acute Bronchitis



QUALITY OF PREVENTIVE CARE SECTION CONTENTS

| The Best Care to Help Prevent Breast Cancer |
|--|
| The Best Care to Help Prevent Cervical Cancer |
| The Best Care to Help Prevent Colorectal Cancer |
| The Best Care to Help Prevent Cancer |
| The Best Care to Detect Chlamydia |
| The Best Care to Provide Childhood Immunizations |
| Table of Results |
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Preventive care keeps you healthy by avoiding an illness altogether or detecting it early when treatment can be most effective. Receiving the right screenings and treatments are an important part of health care quality. For example, cancer screenings done at the right time can help detect abnormal cells early before they turn into cancer. The following section includes preventive care measures where the right screenings or treatments were given at the right time for the identified illness.

The Best Care to Help Prevent Breast Cancer

What is the measure?

Women of a certain age should get a regular mammogram to check for signs of breast cancer. This measure shows the percentage of women, ages 52-69, who had a mammogram during the past two years.

Why is this important?

A mammogram is the screening test used to check for breast cancer. It detects cancer early, when it can be treated most successfully. Breast cancer is the most common cancer affecting women in the United States. It is also the second leading cause of cancer death in women.

Performance on this measure ranged from 55 percent to 91 percent.

MEASURE SOURCE: HEDIS: Breast Cancer Screening

The Best Care to Help Prevent Cervical Cancer

What is the measure?

Prevention of cervical cancer in women includes getting a regular Pap test. This measure shows the percentage of women, ages 24-64, who received a Pap test in the last 3 years.

Why is this important?

Cervical cancer develops slowly. Getting regular screenings can lead to early detection and successful treatment. Screening is done using Pap tests in which cells are taken from the cervix. The cells are then examined

for abnormalities.

Performance on this measure ranged from 50 percent to 89 percent.

MEASURE SOURCE: HEDIS: Cervical Cancer Screening

When choosing a clinic, look for the clinic that has a

HIGHER RATE.

When choosing a

The Best Care to Help Prevent Colorectal Cancer

What is the measure?

Adults of a certain age should receive a test to check for colorectal cancer. This measure shows the percentage of adults, ages 51-80, who received one or more of four proven screening tests:

When choosing a

clinic, look for the

clinic that has a

HIGHER RATE.

- Fecal occult blood test
- Flexible sigmoidoscopy
- Double contrast barium enema
- Colonoscopy

Why is this important?

Most colorectal cancer begins as a polyp. A polyp is a growth projecting from the colon or rectum. Polyps can be detected during screening exams. The removal of the polyp can be the key to preventing colon cancer.

Performance on this measure ranged from 43 percent to 94 percent.

MEASURE SOURCE: HEDIS: Colorectal Cancer Screening

The Best Care to Help Prevent Cancer

What is the measure?

Tests to check for cancer are an important part of preventive care for people of a certain age. This measure shows the percentage of adults, ages 51-80, who received appropriate cancer tests.

For women, this measure includes getting tested for:

- Breast cancer
- Cervical cancer, and
- Colorectal cancer

For men, this measure includes getting tested for:

Colorectal cancer

Why is this important?

Cancer is the result of uncontrolled growth and spread of abnormal cells. Each type of cancer varies in how fast it grows and how it

may spread in the body. The causes of cancer are complex and they may involve the individual's inherited genetics, as well as outside factors such as exposure to chemicals, smoke and the sun. Getting the right cancer screenings can catch the cancer early, leading to more successful treatment.

Performance on this measure ranged from 15 percent to 89 percent.

MEASURE SOURCE: HEDIS: Cancer Screening Combined

When choosing a clinic, look for the clinic that has a

HIGHER RATE.

The Best Care to Detect Chlamydia

What is the measure?

Testing for Chlamydia is important for the health of teenage and young women who are having sex. This measure shows the percentage of sexually-active females, ages 16-25, who received a Chlamydia test.

Why is this important?

Chlamydia is the most common sexually-transmitted infection in the United States. Many infected people have no symptoms. If left untreated, it can lead to infertility, or complications during pregnancy.

When choosing a clinic, look for the clinic that has a

HIGHER RATE.

Performance on this measure ranged from 15 percent to 81 percent.

MEASURE SOURCE: HEDIS: Chlamydia Screening in Women

The Best Care to Provide Childhood Immunizations

What is the measure?

Protecting children from diseases involves getting important shots (vaccinations) when they will do the most good. This measure shows the percentage of children who received all of these vaccinations by the age of two:

- Diphtheria and Tetanus
- Polio
- Measles, Mumps and Rubella
- H Influenza Type B
- Hepatitis B
- Chicken Pox
- Pneumococcal

When choosing a clinic, look for the clinic that has a

HIGHER RATE.

Why is this important?

Before immunizations, infectious diseases often harmed or even killed infants, children and adults. While some of these diseases have been greatly reduced or even eliminated, these diseases could return and spread if children are not immunized against them. It is important that vaccinations are given at the right time for them to work the best.

Performance on this measure ranged from 54 percent to 92 percent.

MEASURE SOURCE: HEDIS: Childhood Immunization Status

When choosing a clinic, look for the clinic that has a higher rate.

Note on Percentage Rates:

Overall Minnesota Average

Sanford Clinic Adrian

Appleton Clinic

Smart Clinic

Sibley Medical Center

ADRIAN

ALBERT LEA

APPLETON

ARLINGTON

AUSTIN

BENSON

BLUE EARTH

The rate shows how many patients out of one hundred reached the treatment goals or received the best medication.

Mayo Health System- Albert Lea Medical Center

Mayo Health System- Austin Medical Center

Affilliated Community Medical Centers

United Hospital District Clinic

| Adults with Diabetes | Adults with Vascular Disease | Adults with High Blood Pressure | Children and Adults with Asthma | Children with a Cold | Children with a Sore Throat | Adults with Bronchitis | Help Prevent Breast Cancer | Help Prevent Cervical Cancer | Help Prevent Colorectal Cancer | Help Prevent Cancer | Detect Chlamydia | Provide Childhood Immunizations |
|----------------------|------------------------------|---------------------------------|---------------------------------|----------------------|-----------------------------|------------------------|----------------------------|------------------------------|--------------------------------|---------------------|------------------|---------------------------------|
| 28% | 34% | 70% | 92% | 87% | 86% | 19% | 83% | 80% | 72% | 53% | 49% | 80% |
| | | | | | | | | | | | | |
| 10% | * | 58% | 87% | 87% | 74% | 25% | 83% | 83% | 77% | * | 37% | 67% |
| | | | | | | | | | | | | |
| 20% | 29% | 74% | 91% | 79% | 75% | 12% | 81% | 72% | 72% | 44% | 40% | 75% |
| | | | | | | | | | | | | |
| 6% | * | 51% | 91% | 73% | 72% | 12% | 79% | 76% | 43% | 15% | 35% | 70% |
| | | | | | | | | | | | | |
| 3% | 12% | * | * | * | 95% | * | 74% | 66% | * | * | * | * |
| | | | | | | | | | | | | |
| 21% | 33% | 74% | 91% | 79% | 75% | 12% | 81% | 72% | 72% | 44% | 40% | 75% |
| + | + | * | * | * | * | * | * | * | * | * | * | * |
| | | | | | | | | | | | | |
| 35% | 42% | 61% | 95% | 89% | 74% | 7% | 84% | 80% | 64% | 64% | 49% | 91% |
| 100/ | 212/ | ····· | * | 000/ | * | * | * | * | * | * | * | * |
| 10% | 31% | * | х | 82% | * | | , | * | | | * | . |
| | | | | | | | | | | | | |

Acute Conditions

The Best Care For...

Prevention

The Best Care To...

Chronic Conditions

The Best Care for...

^{*} Sufficient data not available. + Data not reported (for information on Physician Clinic Inclusion see page 199). For more detailed information, see appendices starting on page 88.

Note on F

| | Ţ | The Best | Care for | | The I | Best Care | For | | T | he Best | Care To | | |
|--|----------------------|------------------------------|---------------------------------|---------------------------------|----------------------|-----------------------------|------------------------|----------------------------|------------------------------|--------------------------------|---------------------|------------------|---------------------------------|
| When choosing a clinic, look for the clinic that has a higher rate. | | sease | Pressure | h Asthma | | ıroat | | ıncer | Cancer | ıl Cancer | | | ıunizations |
| Note on Percentage Rates: The rate shows how many patients out of one hundred reached the treatment goals or received the best medication. | Adults with Diabetes | Adults with Vascular Disease | Adults with High Blood Pressure | Children and Adults with Asthma | Children with a Cold | Children with a Sore Throat | Adults with Bronchitis | Help Prevent Breast Cancer | Help Prevent Cervical Cancer | Help Prevent Colorectal Cancer | Help Prevent Cancer | Detect Chlamydia | Provide Childhood Immunizations |
| Overall Minnesota Average | 28% | 34% | 70% | 92% | 87% | 86% | 19% | 83% | 80% | 72% | 53% | 49% | 80% |
| BYRON | | | | | | | | | | | | | |
| Olmsted Medical Center | 22% | 19% | 57% | 93% | 82% | 87% | 8% | 87% | 78% | 56% | * | 46% | 81% |
| CALEDONIA | | | | | | | | | | | | | |
| Mayo Health System- Franciscan Skemp | 29% | 33% | 74% | 91% | 79% | 75% | 12% | 81% | 72% | 72% | 44% | 40% | 75% |
| CANBY | | | | | | | | , | | | | | |
| Sanford Clinic Canby | 14% | 17% | 58% | 87% | 87% | 74% | 25% | 83% | 83% | 77% | * | 37% | 67% |
| CANNON FALLS | | | | | | | | | | | | | |
| Mayo Health System- Cannon Falls Medical Center | 21% | * | 74% | 91% | 79% | 75% | 12% | 81% | 72% | 72% | 44% | 40% | 75% |
| CHATFIELD | | | | | | | | | | | | | |
| Olmsted Medical Center | 13% | * | 57% | 93% | 82% | 87% | 8% | 87% | 78% | 56% | * | 46% | 81% |
| CLARA CITY | | | | | | | | | | | | | |
| Clara City Clinic | * | * | 51% | 91% | 73% | 72% | 12% | 79% | 76% | 43% | 15% | 35% | 70% |
| CLARKFIELD | | | | | | | | | | | | | |
| Clarkfield Clinic | * | * | 51% | 91% | 73% | 72% | 12% | 79% | 76% | 43% | 15% | 35% | 70% |
| DASSEL | | | | | | | | | | | | | |
| Hutchinson Area Health Care- Dassel Medical Centr | 21% | * | * | * | * | * | * | * | * | * | * | * | * |

Chronic Conditions

Acute Conditions

Prevention

^{*} Sufficient data not available. + Data not reported (for information on Physician Clinic Inclusion see page 199). For more detailed information, see appendices starting on page 88.

When choosing a clinic, lo that has a higher rate.

Note on Percentage R

Overall Minnesota Average

DAWSON

EDEN VALLEY

EDGERTON

FAIRFAX

FAIRMONT

FARIBAULT

The rate shows how ma one hundred reached th received the best media

| n choosing a clinic, look for the clinic nas a higher rate. | | sease | Pressure | h Asthma | | roat | | ıncer | Cancer | I Cancer | | | ıunizations |
|--|----------------------|------------------------------|---------------------------------|---------------------------------|----------------------|-----------------------------|------------------------|----------------------------|------------------------------|--------------------------------|---------------------|------------------|---------------------------------|
| e rate shows how many patients out of e hundred reached the treatment goals or seived the best medication. | Adults with Diabetes | Adults with Vascular Disease | Adults with High Blood Pressure | Children and Adults with Asthma | Children with a Cold | Children with a Sore Throat | Adults with Bronchitis | Help Prevent Breast Cancer | Help Prevent Cervical Cancer | Help Prevent Colorectal Cancer | Help Prevent Cancer | Detect Chlamydia | Provide Childhood Immunizations |
| erall Minnesota Average | 28% | 34% | 70% | 92% | 87% | 86% | 19% | 83% | 80% | 72% | 53% | 49% | 80% |
| Meeker Memorial Clinic | * | * | * | * | * | * | * | * | * | * | * | * | * |
| NSON | | | | | | | | | | | | | |
| Dawson Clinic | 18% | 20% | 51% | 91% | 73% | 72% | 12% | 79% | 76% | 43% | 15% | 35% | 70% |
| EN VALLEY | | | | | | | | | | | | | |
| Paynesville Eden Valley Medical Clinic | 3% | 18% | 69% | * | 62% | 86% | * | 81% | 76% | * | * | 34% | * |
| GERTON | | | | | | | | | | | | | |
| Edgerton Family Clinic Avera | * | * | 38% | 92% | 50% | 56% | 15% | 81% | 79% | 67% | 30% | 32% | 54% |
| RFAX | | | | | | | | | | | | | |
| Fairfax Medical Clinic | + | + | * | * | * | * | * | * | * | * | * | * | * |
| RMONT | | | | | | | | | | | | | |
| Braaten Medical Clinic | + | + | * | * | * | * | * | * | * | * | * | * | * |
| Dulcimer Medical Center | + | + | * | * | * | * | * | * | * | * | * | * | * |
| Mayo Health System-Fairmont Medical Center | 16% | 31% | 74% | 91% | 79% | 75% | 12% | 81% | 72% | 72% | 44% | 40% | 75% |
| Smart Clinic | + | + | * | * | * | * | * | * | * | * | * | * | * |
| IBAULT | | | | | | | | | | | | | |
| Allina Medical Clinic | 37% | 40% | 76% | 91% | 92% | 88% | 14% | 81% | 80% | 72% | 45% | 61% | 81% |

Acute Conditions

The Best Care For...

Prevention

The Best Care To...

Chronic Conditions

The Best Care for...

^{*} Sufficient data not available. + Data not reported (for information on Physician Clinic Inclusion see page 199). For more detailed information, see appendices starting on page 88.

Note on

| When choosing a clinic, look for the clinic that has a higher rate. | | isease | Pressure | th Asthma | | ıroat | | ancer | Cancer | al Cancer | | | nunizations |
|--|----------------------|------------------------------|---------------------------------|---------------------------------|----------------------|-----------------------------|------------------------|----------------------------|------------------------------|--------------------------------|---------------------|------------------|---------------------------------|
| Note on Percentage Rates: The rate shows how many patients out of one hundred reached the treatment goals or received the best medication. | Adults with Diabetes | Adults with Vascular Disease | Adults with High Blood Pressure | Children and Adults with Asthma | Children with a Cold | Children with a Sore Throat | Adults with Bronchitis | Help Prevent Breast Cancer | Help Prevent Cervical Cancer | Help Prevent Colorectal Cancer | Help Prevent Cancer | Detect Chlamydia | Provide Childhood Immunizations |
| Overall Minnesota Average | 28% | 34% | 70% | 92% | 87% | 86% | 19% | 83% | 80% | 72% | 53% | 49% | 80% |
| Mayo Health System-Cannon Valley Clinic | 41% | 38% | 74% | 91% | 79% | 75% | 12% | 81% | 72% | 72% | 44% | 40% | 75% |
| FULDA | | | | | | | | | | | | | |
| Avera Worthington Specialty Clinics | * | * | 38% | 92% | 50% | 56% | 15% | 81% | 79% | 67% | 30% | 32% | 54% |
| GLENCOE | | | | | | | | | | | | | |
| Glencoe Regional Health Services | 11% | 18% | 51% | 91% | 73% | 72% | 12% | 79% | 76% | 43% | 15% | 35% | 70% |
| GRACEVILLE | | | | | | | | | | | | | |
| Graceville Health Center Clinic | 5% | 18% | * | * | * | * | * | 75% | 81% | * | * | * | * |
| GRANITE FALLS | | | | | | | | | | | | | |
| Affilliated Community Medical Centers | 38% | 45% | 61% | 95% | 89% | 74% | 7% | 84% | 80% | 64% | 64% | 49% | 91% |
| HARMONY | | | | | | | | | | | | | |
| Gundersen Lutheran | + | + | 72% | 94% | 93% | 84% | 36% | 89% | 75% | 80% | * | 40% | * |
| HECTOR | | | | | | | | | | | | | |
| Renville County Hospital and Clinics | 12% | * | 51% | 91% | 73% | 72% | 12% | 79% | 76% | 43% | 15% | 35% | 70% |
| HENDRICKS | | | | | | | | | | | | | |
| Hendricks Clinic P.A. | 9% | 25% | 51% | 91% | 73% | 72% | 12% | 79% | 76% | 43% | 15% | 35% | 70% |
| | | | | | | | | | | | | | |
| | | | | | 1 | | | 1 | | | | | |

Chronic Conditions

The Best Care for...

Acute Conditions

The Best Care For...

Prevention

The Best Care To...

^{*} Sufficient data not available. + Data not reported (for information on Physician Clinic Inclusion see page 199). For more detailed information, see appendices starting on page 88.

When choosing a clinic, look for the clinic that has a higher rate.

Note on Percentage Rates:

Overall Minnesota Average

Gunderson Lutheran

Ivanhoe Clinic

Mayo Clinic

Sanford Clinic Jackson

Hutchinson Medical Center

Sacred Heart Mercy Health Care Center

Mayo Health System-Franciscan Skemp

Lake Benton Healthcare Center

HOUSTON

HUTCHINSON

IVANHOE

JACKSON

KASSON

LA CRESCENT

LAKE BENTON

The rate shows how many patients out of one hundred reached the treatment goals or received the best medication.

| | The Bes | t Care fo | r | The | Best Care | e For | The Best Care To | | | | | | | | |
|----------------------|------------------------------|---------------------------------|---------------------------------|----------------------|-----------------------------|------------------------|----------------------------|------------------------------|--------------------------------|---------------------|------------------|---------------------------------|--|--|--|
| Adults with Diabetes | Adults with Vascular Disease | Adults with High Blood Pressure | Children and Adults with Asthma | Children with a Cold | Children with a Sore Throat | Adults with Bronchitis | Help Prevent Breast Cancer | Help Prevent Cervical Cancer | Help Prevent Colorectal Cancer | Help Prevent Cancer | Detect Chlamydia | Provide Childhood Immunizations | | | |
| 28% | 34% | 70% | 92% | 87% | 86% | 19% | 83% | 80% | 72% | 53% | 49% | 80% | | | |
| | | | | | | | | | | | | | | | |
| + | + | 72% | 94% | 93% | 84% | 36% | 89% | 75% | 80% | * | 40% | * | | | |
| | | | | | | | | | | | | | | | |
| 28% | 37% | 48% | 93% | 90% | 89% | 11% | 73% | 71% | 65% | 31% | 42% | 56% | | | |
| | | | | | | | | | | | | | | | |
| + | + | * | * | * | * | * | * | * | * | * | * | * | | | |
| | | | | | | | | | | | | | | | |
| + | + | * | * | * | * | * | * | * | * | * | * | * | | | |
| 11% | 8% | 58% | 87% | 87% | 74% | 25% | 83% | 83% | 77% | * | 37% | 67% | | | |
| | | | | | | | | | | | | | | | |
| 23% | 39% | 62% | 96% | 89% | 76% | 11% | 89% | 74% | 91% | 65% | 41% | 79% | | | |
| | | | | | | | | | | | | | | | |

Acute Conditions

Prevention

81% 72% 72% 44% 40% 75%

81% 79% 67% 30% 32% 54%

41% 33% 74%

Chronic Conditions

75%

56%

12%

15%

79%

^{*} Sufficient data not available. + Data not reported (for information on Physician Clinic Inclusion see page 199). For more detailed information, see appendices starting on page 88.

Not

| | , | The Best | t Care for | · | The | The Best Care To | | | | | | | | |
|--|----------------------|------------------------------|---------------------------------|---------------------------------|----------------------|-----------------------------|------------------------|----------------------------|------------------------------|--------------------------------|---------------------|------------------|---------------------------------|--|
| When choosing a clinic, look for the clinic that has a higher rate. | | isease | Pressure | Children and Adults with Asthma | | hroat | | ancer | Cancer | al Cancer | | | nunizations | |
| Note on Percentage Rates: The rate shows how many patients out of one hundred reached the treatment goals or received the best medication. | Adults with Diabetes | Adults with Vascular Disease | Adults with High Blood Pressure | | Children with a Cold | Children with a Sore Throat | Adults with Bronchitis | Help Prevent Breast Cancer | Help Prevent Cervical Cancer | Help Prevent Colorectal Cancer | Help Prevent Cancer | Detect Chlamydia | Provide Childhood Immunizations | |
| Overall Minnesota Average | 28% | 34% | 70% | 92% | 87% | 86% | 19% | 83% | 80% | 72% | 53% | 49% | 80% | |
| LAKE CITY | | | | | | | | | | | | | | |
| Mayo Health System | 25% | 48% | 74% | 91% | 79% | 75% | 12% | 81% | 72% | 72% | 44% | 40% | 75% | |
| LAKE CRYSTAL | | | | | | | | | | | | | | |
| Mankato Clinic | 14% | 31% | 73% | 95% | 83% | 81% | 18% | 84% | 80% | 64% | * | 49% | 70% | |
| LAKEFIELD | | | | | | | | | | | | | | |
| Avera Worthington Specialty Clinics | * | * | 38% | 92% | 50% | 56% | 15% | 81% | 79% | 67% | 30% | 32% | 54% | |
| Sanford Clinic Lakefield | 5% | * | 58% | 87% | 87% | 74% | 25% | 83% | 83% | 77% | * | 37% | 67% | |
| LE SUEUR | | | | | | | | | | | | | | |
| Mayo Health System-Immanuel St. Joseph | 33% | * | 74% | 91% | 79% | 75% | 12% | 81% | 72% | 72% | 44% | 40% | 75% | |
| Southern Metro Medical Clinics | 16% | * | * | * | 64% | 83% | 11% | 79% | 75% | * | * | 41% | * | |
| LEWISTON | | | | | | | | | | | | | | |
| Winona Health | 16% | * | 56% | 87% | 93% | 94% | 44% | 79% | 75% | 66% | * | 42% | 82% | |
| LITCHFIELD | | | | | | | | | | | | | | |
| Affilliated Community Medical Centers- Litchfield Clinic (East) | 57% | 51% | 61% | 95% | 89% | 74% | 7% | 84% | 80% | 64% | 64% | 49% | 91% | |
| Affilliated Community Medical Centers- Litchfield Clinic (West) | 24% | 24% | 61% | 95% | 89% | 74% | 7% | 84% | 80% | 64% | 64% | 49% | 91% | |
| | | | | | | | | | | | | | | |

Chronic Conditions

Acute Conditions

Prevention

^{*} Sufficient data not available. + Data not reported (for information on Physician Clinic Inclusion see page 199). For more detailed information, see appendices starting on page 88.

When choosing a clinic, look for the clinic that has a higher rate.

Note on Percentage Rates:

Overall Minnesota Average

LONSDALE

LUVERNE

MABEL

MADELIA

MADISON

MANKATO

The rate shows how many patients out of one hundred reached the treatment goals or received the best medication.

| | | tue Resi | t Gare for | | ine | Rest Care | e For | | ı | ue Rest | Care 10 |) | |
|---|----------------------|------------------------------|---------------------------------|---------------------------------|----------------------|-----------------------------|------------------------|----------------------------|------------------------------|--------------------------------|---------------------|------------------|---------------------------------|
| te on Percentage Rates: e rate shows how many patients out of | iabetes | Adults with Vascular Disease | Adults with High Blood Pressure | Children and Adults with Asthma | a Cold | Children with a Sore Throat | ronchitis | Help Prevent Breast Cancer | Help Prevent Cervical Cancer | Help Prevent Colorectal Cancer | Cancer | ıydia | Provide Childhood Immunizations |
| e hundred reached the treatment goals or eived the best medication. | Adults with Diabetes | Adults with Va | Adults with H | Children and | Children with a Cold | Children with | Adults with Bronchitis | Help Prevent | Help Prevent | Help Prevent | Help Prevent Cancer | Detect Chlamydia | Provide Child |
| erall Minnesota Average | 28% | 34% | 70% | 92% | 87% | 86% | 19% | 83% | 80% | 72% | 53% | 49% | 80% |
| ISDALE | | | | | | | | | | | | | |
| FamilyHealth Medical Clinic | 9% | * | * | * | 90% | 89% | 25% | 82% | 75% | * | * | 15% | * |
| ERNE | | | | | | | | | | | | | |
| Sanford Clinic | 12% | 15% | 58% | 87% | 87% | 74% | 25% | 83% | 83% | 77% | * | 37% | 67% |
| EL | | | | | | | | | | | | | |
| Winneshiek Medical Center | + | + | * | * | * | * | * | * | * | * | * | * | * |
| ELIA | | | | | | | | | | | | | |
| Mayo Health System-Immanuel St. Joseph | 31% | 37% | 74% | 91% | 79% | 75% | 12% | 81% | 72% | 72% | 44% | 40% | 75% |
| ISON | | | | | | | | | | | | | |
| Lac Qui Parle Clinic | 8% | * | 51% | 91% | 73% | 72% | 12% | 79% | 76% | 43% | 15% | 35% | 70% |
| KATO | | | | | | | | | | | | | |
| Between the Bridges Health Center | + | + | * | * | * | * | * | * | * | * | * | * | * |
| Mayo Health System-Immanuel St. Joseph- Mankato Eastridge | 26% | 31% | 74% | 91% | 79% | 75% | 12% | 81% | 72% | 72% | 44% | 40% | 75% |
| Mayo Health System-Immanuel St. Joseph- Mankato Specialty Clinic | 25% | 35% | 74% | 91% | 79% | 75% | 12% | 81% | 72% | 72% | 44% | 40% | 75% |
| Mankato Clinic- Main Street | 16% | 30% | 73% | 95% | 83% | 81% | 18% | 84% | 80% | 64% | * | 49% | 70% |

Acute Conditions

The Best Care For...

Prevention

The Best Care To...

Chronic Conditions

The Best Care for...

^{*} Sufficient data not available. + Data not reported (for information on Physician Clinic Inclusion see page 199). For more detailed information, see appendices starting on page 88.

| | | The Bes | t Care fo | r | The | The Best Care To | | | | | | | | |
|--|----------------------|------------------------------|---------------------------------|---------------------------------|----------------------|-----------------------------|------------------------|----------------------------|------------------------------|--------------------------------|---------------------|------------------|---------------------------------|--|
| When choosing a clinic, look for the clinic that has a higher rate. | | sease | Pressure | th Asthma | | ıroat | | ancer | Cancer | al Cancer | | | nunizations | |
| Note on Percentage Rates: The rate shows how many patients out of one hundred reached the treatment goals or received the best medication. | Adults with Diabetes | Adults with Vascular Disease | Adults with High Blood Pressure | Children and Adults with Asthma | Children with a Cold | Children with a Sore Throat | Adults with Bronchitis | Help Prevent Breast Cancer | Help Prevent Cervical Cancer | Help Prevent Colorectal Cancer | Help Prevent Cancer | Detect Chlamydia | Provide Childhood Immunizations | |
| Overall Minnesota Average | 28% | 34% | 70% | 92% | 87% | 86% | 19% | 83% | 80% | 72% | 53% | 49% | 80% | |
| Mankato Clinic- Wickersham Campus | 21% | 36% | 73% | 95% | 83% | 81% | 18% | 84% | 80% | 64% | * | 49% | 70% | |
| Open Door Health Center | 2% | * | * | * | * | * | * | * | * | * | * | * | * | |
| MAPLETON | | | | | | | | | | | | | | |
| Mankato Clinic | 24% | 34% | 73% | 95% | 83% | 81% | 18% | 84% | 80% | 64% | * | 49% | 70% | |
| MARSHALL | | | | | | | | | | | | | | |
| Affiliated Community Medical Centers- Bruce Street | 31% | 38% | 61% | 95% | 89% | 74% | 7% | 84% | 80% | 64% | 64% | 49% | 91% | |
| Affilliated Community Medical Centers- Marshall Clinic- Market Street | 36% | 45% | 61% | 95% | 89% | 74% | 7% | 84% | 80% | 64% | 64% | 49% | 91% | |
| Avera Marshall Specialty Clinic | N/A | N/A | N/A | N/A | N/A | N/A | N/A | 81% | 79% | N/A | N/A | 32% | N/A | |
| MILAN | | | | | | | | | | | | | | |
| Milan Clinic | * | * | 51% | 91% | 73% | 72% | 12% | 79% | 76% | 43% | 15% | 35% | 70% | |
| MONTEVIDEO | | | | | | | | | | | | | | |
| Chippewa County Montevideo Hospital & Medical Clinic | 14% | 15% | 51% | 91% | 73% | 72% | 12% | 79% | 76% | 43% | 15% | 35% | 70% | |
| MONTGOMERY | | | | | | | | | | | | | | |
| Southern Metro Medical Clinics- Montgomery Medical Clinic | 4% | * | * | * | 64% | 83% | 11% | 79% | 75% | * | * | 41% | * | |
| MOUNTAIN LAKE | | | | | | | | | | | | | | |
| Sanford Clinic | 9% | * | 58% | 87% | 87% | 74% | 25% | 83% | 83% | 77% | * | 37% | 67% | |

Chronic Conditions

Acute Conditions

Prevention

^{*} Sufficient data not available. + Data not reported (for information on Physician Clinic Inclusion see page 199). For more detailed information, see appendices starting on page 88.

When choosing a clinic, look for the clinic that has a higher rate.

Note on Percentage Rates:

Overall Minnesota Average

NEW LONDON

NEW PRAGUE

NEW ULM

NORTH MANKATO

NORTHFIELD

ORTONVILLE

OLIVIA

The rate shows how many patients out of one hundred reached the treatment goals or received the best medication.

| | 1 | | | | 1 | | | 1 | | | | | |
|--|----------------------|------------------------------|---------------------------------|---------------------------------|----------------------|-----------------------------|------------------------|----------------------------|------------------------------|--------------------------------|---------------------|------------------|---------------------------------|
| n choosing a clinic, look for the clinic nas a higher rate. | | sease | Pressure | h Asthma | | roat | | ıncer | Sancer | I Cancer | | | unizations |
| e rate shows how many patients out of e hundred reached the treatment goals or ceived the best medication. | Adults with Diabetes | Adults with Vascular Disease | Adults with High Blood Pressure | Children and Adults with Asthma | Children with a Cold | Children with a Sore Throat | Adults with Bronchitis | Help Prevent Breast Cancer | Help Prevent Cervical Cancer | Help Prevent Colorectal Cancer | Help Prevent Cancer | Detect Chlamydia | Provide Childhood Immunizations |
| erall Minnesota Average | 28% | 34% | 70% | 92% | 87% | 86% | 19% | 83% | 80% | 72% | 53% | 49% | 80% |
| WLONDON | | | | | | | | | | | | | |
| Affilliated Community Medical Centers | 37% | 27% | 61% | 95% | 89% | 74% | 7% | 84% | 80% | 64% | 64% | 49% | 91% |
| N PRAGUE | | | | | | | | | | | | | |
| Parkview Medical Clinic | 15% | * | * | * | 40% | 94% | 13% | 79% | 82% | * | * | 36% | * |
| W ULM | | | | | | | | | | | | | |
| Allina Health System- New Ulm Medical Center | 30% | 40% | 75% | 91% | 90% | 89% | 21% | 83% | 81% | 43% | 36% | 48% | 75% |
| RTH MANKATO | | | | | | | | | | | | | |
| Mayo Health System-Immanuel St. Joseph - Mankato Northridge | 39% | 60% | 74% | 91% | 79% | 75% | 12% | 81% | 72% | 72% | 44% | 40% | 75% |
| Mankato Clinic | 32% | 42% | 73% | 95% | 83% | 81% | 18% | 84% | 80% | 64% | * | 49% | 70% |
| RTHFIELD | | | | | | | | | | | | | |
| Allina Medical Clinic | 40% | 47% | 76% | 91% | 92% | 88% | 14% | 81% | 80% | 72% | 45% | 61% | 81% |
| VIA | | | | | | | | | | | | | |
| Renville County Hospital and Clinics | 7% | * | 51% | 91% | 73% | 72% | 12% | 79% | 76% | 43% | 15% | 35% | 70% |
| TONVILLE | | | | | | | | | | | | | |
| Northside Medical Clinic | 10% | 25% | 51% | 91% | 73% | 72% | 12% | 79% | 76% | 43% | 15% | 35% | 70% |
| | | | | | | | | | | | | | |
| | | | | | | | | 1 | | | | | |

Acute Conditions

The Best Care For...

Prevention

The Best Care To...

Chronic Conditions

The Best Care for...

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When choosing a clinic, look for the clinic that has a higher rate.

Note on Percentage Rates:

Overall Minnesota Average

OWATONNA

PINE ISLAND

PIPESTONE

PLAINVIEW

PRESTON

RED WING

RENVILLE

REDWOOD FALLS

The rate shows how many patients out of one hundred reached the treatment goals or received the best medication.

Mayo Health System-Owatonna Clinic

Avera- Pipestone County Medical Center

Olmsted Medical Center

Olmsted Medical Center

Olmsted Medical Center

Fairview Red Wing Medical Center

Affilliated Community Medical Centers

Renville County Hospital and Clinics

| | Cr | nronic | Conditi | ons | Acut | te Cond | itions | Prevention | | | | | | | | | | |
|----|----------------------|------------------------------|---------------------------------|---------------------------------|----------------------|-----------------------------|------------------------|----------------------------|------------------------------|--------------------------------|---------------------|------------------|---------------------------------|--|--|--|--|--|
| | | The Best | t Care fo | r | The | Best Care | For | The Best Care To | | | | | | | | | | |
| or | Adults with Diabetes | Adults with Vascular Disease | Adults with High Blood Pressure | Children and Adults with Asthma | Children with a Cold | Children with a Sore Throat | Adults with Bronchitis | Help Prevent Breast Cancer | Help Prevent Cervical Cancer | Help Prevent Colorectal Cancer | Help Prevent Cancer | Detect Chlamydia | Provide Childhood Immunizations | | | | | |
| | 28% | 34% | 70% | 92% | 87% | 86% | 19% | 83% | 80% | 72% | 53% | 49% | 80% | | | | | |
| | | | | | | | | | | | | | | | | | | |
| | 29% | 33% | 74% | 91% | 79% | 75% | 12% | 81% | 72% | 72% | 44% | 40% | 75% | | | | | |
| | | | | | | | | | | | | | | | | | | |
| | 21% | * | 57% | 93% | 82% | 87% | 8% | 87% | 78% | 56% | * | 46% | 81% | | | | | |
| | | | | | | | | | | | | | | | | | | |
| | 4% | 14% | 38% | 92% | 50% | 56% | 15% | 81% | 79% | 67% | 30% | 32% | 54% | | | | | |
| | | | | | | | | | | | | | | | | | | |
| | 28% | * | 57% | 93% | 82% | 87% | 8% | 87% | 78% | 56% | * | 46% | 81% | | | | | |
| | | | | | | | | | | | | | | | | | | |
| | 20% | * | 57% | 93% | 82% | 87% | 8% | 87% | 78% | 56% | * | 46% | 81% | | | | | |
| | | | | | | | | | | | | | | | | | | |
| | 28% | 32% | 74% | 93% | 89% | 95% | 20% | 82% | 82% | 79% | 58% | 57% | 84% | | | | | |
| | | | | | | | | | | | | | | | | | | |
| | 38% | 41% | 61% | 95% | 89% | 74% | 7% | 84% | 80% | 64% | 64% | 49% | 91% | | | | | |
| | | | | | | | | | | | | | | | | | | |
| | 4% | * | 51% | 91% | 73% | 72% | 12% | 79% | 76% | 43% | 15% | 35% | 70% | | | | | |
| | | | | | | | | 1 | | | | | | | | | | |

Acute Conditions

Prevention

Chronic Conditions

^{*} Sufficient data not available. + Data not reported (for information on Physician Clinic Inclusion see page 199). For more detailed information, see appendices starting on page 88.

When choosing a clinic, look for the clinic that has a higher rate.

Note on Percentage Rates:

Overall Minnesota Average

ROCHESTER

RUSHFORD

SLAYTON

SLEEPY EYE

The rate shows how many patients out of one hundred reached the treatment goals or received the best medication.

| | | The Best | t Care fo | r | The | Best Care | e For | | 1 | he Best | Care To | 1 | |
|--|----------------------|------------------------------|---------------------------------|---------------------------------|----------------------|-----------------------------|------------------------|----------------------------|------------------------------|--------------------------------|---------------------|------------------|---------------------------------|
| n choosing a clinic, look for the clinic nas a higher rate. | | sease | Pressure | th Asthma | | ıroat | | ancer | Cancer | al Cancer | | | nunizations |
| e rate shows how many patients out of the hundred reached the treatment goals or the eleved the best medication. | Adults with Diabetes | Adults with Vascular Disease | Adults with High Blood Pressure | Children and Adults with Asthma | Children with a Cold | Children with a Sore Throat | Adults with Bronchitis | Help Prevent Breast Cancer | Help Prevent Cervical Cancer | Help Prevent Colorectal Cancer | Help Prevent Cancer | Detect Chlamydia | Provide Childhood Immunizations |
| erall Minnesota Average | 28% | 34% | 70% | 92% | 87% | 86% | 19% | 83% | 80% | 72% | 53% | 49% | 80% |
| CHESTER | | | | | | | | | | | | | |
| Mayo Clinic- Baldwin Building, Family Medicine | 26% | 48% | 62% | 96% | 89% | 76% | 11% | 89% | 74% | 91% | 65% | 41% | 79% |
| Mayo Clinic- Baldwin Building, Primary Care Internal Medicine | 22% | 34% | 62% | 96% | 89% | 76% | 11% | 89% | 74% | 91% | 65% | 41% | 79% |
| Mayo Clinic- Mayo Building | 20% | 44% | 62% | 96% | 89% | 76% | 11% | 89% | 74% | 91% | 65% | 41% | 79% |
| Mayo Clinic- Northeast | 30% | 47% | 62% | 96% | 89% | 76% | 11% | 89% | 74% | 91% | 65% | 41% | 79% |
| Mayo Clinic- Northwest | 28% | 34% | 62% | 96% | 89% | 76% | 11% | 89% | 74% | 91% | 65% | 41% | 79% |
| Olmsted Medical Center- Rochester Northwest | 28% | * | 57% | 93% | 82% | 87% | 8% | 87% | 78% | 56% | * | 46% | 81% |
| Olmsted Medical Center- Rochester Southeast | 19% | 29% | 57% | 93% | 82% | 87% | 8% | 87% | 78% | 56% | * | 46% | 81% |
| Rochester Family Medicine Clinic | + | + | * | * | * | * | * | * | * | * | * | * | * |
| HFORD | | | | | | | | | | | | | |
| Winona Health | 15% | * | 56% | 87% | 93% | 94% | 44% | 79% | 75% | 66% | * | 42% | 82% |
| /TON | | | | | | | | | | | | | |
| Murray County Clinic | 17% | 28% | 51% | 91% | 73% | 72% | 12% | 79% | 76% | 43% | 15% | 35% | 70% |
| EPY EYE | | | | | | | | | | | | | |
| Sleepy Eye Medical Center | 1% | 13% | 51% | 91% | 73% | 72% | 12% | 79% | 76% | 43% | 15% | 35% | 70% |

Acute Conditions

Prevention

Chronic Conditions

^{*} Sufficient data not available. + Data not reported (for information on Physician Clinic Inclusion see page 199). For more detailed information, see appendices starting on page 88.

Note o

| | | HIE DESI | Galt IUI | | 1116 | THE DEST CALE IO | | | | | | | |
|--|----------------------|------------------------------|---------------------------------|---------------------------------|----------------------|-----------------------------|------------------------|----------------------------|------------------------------|--------------------------------|---------------------|------------------|---------------------------------|
| When choosing a clinic, look for the clinic that has a higher rate. Note on Percentage Rates: | etes | cular Disease | Adults with High Blood Pressure | Children and Adults with Asthma | Cold | Sore Throat | ıchitis | east Cancer | ervical Cancer | Help Prevent Colorectal Cancer | ancer | <u>ia</u> | Provide Childhood Immunizations |
| The rate shows how many patients out of one hundred reached the treatment goals or received the best medication. | Adults with Diabetes | Adults with Vascular Disease | Adults with High | Children and Ad | Children with a Cold | Children with a Sore Throat | Adults with Bronchitis | Help Prevent Breast Cancer | Help Prevent Cervical Cancer | Help Prevent Co | Help Prevent Cancer | Detect Chlamydia | Provide Childho |
| Overall Minnesota Average | 28% | 34% | 70% | 92% | 87% | 86% | 19% | 83% | 80% | 72% | 53% | 49% | 80% |
| SPICER | | | | | | | | | | | | | |
| Paynesville Green Lake Medical Clinic | 9% | * | 69% | * | 62% | 86% | * | 81% | 76% | * | * | 34% | * |
| SPRING GROVE | | | | | | | | | | | | | |
| Gundersen Lutheran | + | + | 72% | 94% | 93% | 84% | 36% | 89% | 75% | 80% | * | 40% | * |
| SPRING VALLEY | | | | | | | | | | | | | |
| Olmsted Medical Center | 8% | 26% | 57% | 93% | 82% | 87% | 8% | 87% | 78% | 56% | * | 46% | 81% |
| SPRINGFIELD | | | | | | | | | | | | | |
| Mayo Health System-Immanuel St. Joseph | 34% | 38% | 74% | 91% | 79% | 75% | 12% | 81% | 72% | 72% | 44% | 40% | 75% |
| ST. CHARLES | | | | | | | | | | | | | |
| Olmsted Medical Center | 26% | * | 57% | 93% | 82% | 87% | 8% | 87% | 78% | 56% | * | 46% | 81% |
| ST. JAMES | | | | | | | | | | | | | |
| Mayo Health System-Immanuel St. Joseph | 25% | 34% | 74% | 91% | 79% | 75% | 12% | 81% | 72% | 72% | 44% | 40% | 75% |
| Moulton & Parsons MDs | + | + | * | * | * | * | * | * | * | * | * | * | * |
| ST. PETER | | | | | | | | | | | | | |
| Mayo Health System-Immanuel St. Joseph | 36% | 38% | 74% | 91% | 79% | 75% | 12% | 81% | 72% | 72% | 44% | 40% | 75% |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |

Chronic Conditions

The Best Care for...

Acute Conditions

The Best Care For...

Prevention

The Best Care To...

^{*} Sufficient data not available. + Data not reported (for information on Physician Clinic Inclusion see page 199). For more detailed information, see appendices starting on page 88.

Quality of Care

When choosing a clinic, look for the clinic that has a higher rate.

Note on Percentage Rates:

Overall Minnesota Average

River's Edge Clinic

Olmsted Medical Center

Tyler Medical Clinic

Olmsted Medical Center

STEWARTVILLE

TRACY

TYLER

WABASHA

WANAMINGO

WASECA

WATKINS

The rate shows how many patients out of one hundred reached the treatment goals or received the best medication.

Mankato Clinic- Daniel's Health Center

Sanford Clinic Tracy/Balaton/Walnut Grove

Mayo Health System-Wabasha Clinic

Mayo Health System-Immanuel St. Joseph

Paynesville Watkins Medical Clinic

| Adults with Diabetes | Adults with Vascular Disease | Adults with High Blood Pressure | Children and Adults with Asthma | Children with a Cold | Children with a Sore Throat | Adults with Bronchitis | Help Prevent Breast Cancer | Help Prevent Cervical Cancer | Help Prevent Colorectal Cancer | Help Prevent Cancer | Detect Chlamydia | Provide Childhood Immunizations |
|----------------------|------------------------------|---------------------------------|---------------------------------|----------------------|-----------------------------|------------------------|----------------------------|------------------------------|--------------------------------|---------------------|------------------|---------------------------------|
| 28% | 34% | 70% | 92% | 87% | 86% | 19% | 83% | 80% | 72% | 53% | 49% | 80% |
| 20% | 40% | 73% | 95% | 83% | 81% | 18% | 84% | 80% | 64% | * | 49% | 70% |
| * | * | * | * | * | * | * | * | * | * | * | * | * |
| | | | | | | | | | | | | |
| 8% | 28% | 57% | 93% | 82% | 87% | 8% | 87% | 78% | 56% | * | 46% | 81% |
| | | | | | | | | | | | | |
| 14% | 21% | 58% | 87% | 87% | 74% | 25% | 83% | 83% | 77% | * | 37% | 67% |
| | | | | | | | | | | | | |
| 8% | 17% | 38% | 92% | 50% | 56% | 15% | 81% | 79% | 67% | 30% | 32% | 54% |
| | | | | | | | | | | | | |
| 30% | 37% | 74% | 91% | 79% | 75% | 12% | 81% | 72% | 72% | 44% | 40% | 75% |
| | | | | | | | | | | | | |
| 14% | * | 57% | 93% | 82% | 87% | 8% | 87% | 78% | 56% | * | 46% | 81% |
| | | | | | | | | | | | | |
| 21% | 46% | 74% | 91% | 79% | 75% | 12% | 81% | 72% | 72% | 44% | 40% | 75% |
| | | | | | | | | | | | | |
| 4% | * | 69% | * | 62% | 86% | * | 81% | 76% | * | * | 34% | * |

Acute Conditions

The Best Care For...

Prevention

The Best Care To...

Chronic Conditions

The Best Care for...

^{*} Sufficient data not available. + Data not reported (for information on Physician Clinic Inclusion see page 199). For more detailed information, see appendices starting on page 88.

Quality of Care

Note on

| | | The Best | Care for | | The | Best Care | e For | | T | he Best | Care To | ••• | | |
|--|----------------------|------------------------------|---------------------------------|---------------------------------|----------------------|-----------------------------|------------------------|----------------------------|------------------------------|--------------------------------|---------------------|------------------|---------------------------------|--|
| When choosing a clinic, look for the clinic hat has a higher rate. | | sease | Pressure | h Asthma | | ıroat | | ıncer | Cancer | ıl Cancer | | | unizations | |
| Note on Percentage Rates: The rate shows how many patients out of one hundred reached the treatment goals or received the best medication. | Adults with Diabetes | Adults with Vascular Disease | Adults with High Blood Pressure | Children and Adults with Asthma | Children with a Cold | Children with a Sore Throat | Adults with Bronchitis | Help Prevent Breast Cancer | Help Prevent Cervical Cancer | Help Prevent Colorectal Cancer | Help Prevent Cancer | Detect Chlamydia | Provide Childhood Immunizations | |
| Overall Minnesota Average | 28% | 34% | 70% | 92% | 87% | 86% | 19% | 83% | 80% | 72% | 53% | 49% | 80% | |
| WESTBROOK | | | | | | | | | | | | | | |
| Sanford Clinic Westbrook | 14% | 11% | 58% | 87% | 87% | 74% | 25% | 83% | 83% | 77% | * | 37% | 67% | |
| WILLMAR | | | | | | | | | | | | | | |
| Affilliated Community Medical Centers | 34% | 44% | 61% | 95% | 89% | 74% | 7% | 84% | 80% | 64% | 64% | 49% | 91% | |
| Family Practice Medical Center of Willmar | 33% | 33% | 74% | 89% | 96% | 96% | 11% | 80% | 83% | * | * | 70% | * | |
| WINDOM | | | | | | | | | | | | | | |
| Avera- United Medical Clinic | 6% | * | 38% | 92% | 50% | 56% | 15% | 81% | 79% | 67% | 30% | 32% | 54% | |
| Hartberg Medical Clinic | 15% | 21% | * | * | * | * | * | * | * | * | * | * | * | |
| Sanford Clinic Windom | 9% | * | 58% | 87% | 87% | 74% | 25% | 83% | 83% | 77% | * | 37% | 67% | |
| Windom Family Medical Center | + | + | * | * | * | * | * | * | * | * | * | * | * | |
| WINONA | | | | | | | | | | | | | | |
| Family Medicine of Winona | 24% | 24% | * | * | * | * | * | 73% | 72% | 53% | 36% | 16% | * | |
| Winona Health- Winona Health Clinics | 21% | 39% | 56% | 87% | 93% | 94% | 44% | 79% | 75% | 66% | * | 42% | 82% | |
| WINSTED | | | | | | | | | | | | | | |
| Ridgeview Winsted Clinic | 4% | * | 81% | 90% | 76% | 95% | 14% | 75% | 76% | 67% | 58% | 48% | * | |
| | | | | | | | | | | | | | | |
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Chronic Conditions

Acute Conditions

Prevention

^{*} Sufficient data not available. + Data not reported (for information on Physician Clinic Inclusion see page 199). For more detailed information, see appendices starting on page 88.

Quality of Care

When choosing a clinic, look for the clinic that has a higher rate.

Avera Worthington Specialty Clinic

Fairview Red Wing Zumbrota Clinic

Note on Percentage Rates:

Overall Minnesota Average

Sanford Clinic

WORTHINGTON

ZUMBROTA

The rate shows how many patients out of one hundred reached the treatment goals or received the best medication.

| | The Best Care for The Best Care For 1 | | | | | The Best Care To | | | | | | | |
|----------------------|---------------------------------------|---------------------------------|---------------------------------|----------------------|-----------------------------|------------------------|-----|----------------------------|------------------------------|--------------------------------|---------------------|------------------|---------------------------------|
| Adults with Diabetes | Adults with Vascular Disease | Adults with High Blood Pressure | Children and Adults with Asthma | Children with a Cold | Children with a Sore Throat | Adults with Bronchitis | | Help Prevent Breast Cancer | Help Prevent Cervical Cancer | Help Prevent Colorectal Cancer | Help Prevent Cancer | Detect Chlamydia | Provide Childhood Immunizations |
| 28% | 34% | 70% | 92% | 87% | 86% | 19% | | 83% | 80% | 72% | 53% | 49% | 80% |
| | | | | | | | | | | | | | |
| 9% | 22% | 38% | 92% | 50% | 56% | 15% | | 81% | 79% | 67% | 30% | 32% | 54% |
| 5% | 13% | 58% | 87% | 87% | 74% | 25% | | 83% | 83% | 77% | * | 37% | 67% |
| | | | | | | | | | | | | | |
| 22% | 32% | 74% | 93% | 89% | 95% | 20% | | 82% | 82% | 79% | 58% | 57% | 84% |
| | | | | | | | | | | | | | |
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Acute Conditions

Prevention

Chronic Conditions

^{*} Sufficient data not available. + Data not reported (for information on Physician Clinic Inclusion see page 199). For more detailed information, see appendices starting on page 88.





| QUALITY OF CARE FOR HEART CONDITIONS |
|---|
| Table of Results |
| QUALITY OF CARE FOR SURGERIES |
| Table of Results |
| QUALITY OF CARE FOR MEDICAL COMPLICATIONS AND INFECTIONS 64 |
| Table of Results |
| QUALITY OF CARE FOR OTHER CONDITIONS |
| Table of Results |

Choose the health care quality topic you want to learn about.

Hospital quality information is available for four topics:

- Heart Conditions
- Surgeries
- Medical Complications and Infections
- Other Conditions

One topic may be of greater interest to you than others. For example, if you or a loved one has a heart problem, you will probably be interested in the "Heart Conditions" topic. However, anyone facing a hospital stay should be interested in the topic "Medical Complications and Infections in the Hospital" since it discusses problems that can occur for any hospital patient. All the information refers to care provided for adult patients.

Each topic includes information on several different quality indicators. A quality indicator is a piece of information, usually a percentage rate, that shows how often patients had a particular experience when they received medical care. These experiences reflect a particular aspect of health care quality. Each health topic is briefly described below, with examples of quality indicators for that topic. To learn about all the indicators presented for each topic, please turn to the appropriate page noted in the index at the start of this section.

Heart Conditions: This section includes measures related to whether patients received the best type of care for heart attacks and heart failure.

Surgeries: This section includes information associated with heart surgeries and surgery to repair an abnormally enlarged artery supplying blood to the lower half of the body. There is also information regarding surgery-related complications and treatments.

Medical Complications and Infections in the Hospital for Adult Patients: This section includes problems or complications that can be experienced by any hospital patient, as well as infection prevention measures.

Other Conditions: This section includes information about the best types of treatment for pneumonia patients, and problems related to hip fracture surgeries, and childbirth, specifically how often a birth-related injury occurs to the mother.

More Information about the Results

Be sure to note whether a higher or lower percentage rate is better for the measure you are interested in. This will vary across the different measures for hospitals. Keep in mind the percentage rate is related to how many patients out of one hundred met the criteria outlined in the measure. For example, if the hospital rate for the "Heart Attack: Aspirin Given When Patients Arrived at the Hospital" measure is 88%, this means 88 out of 100 heart attack patients received aspirin when they arrived at the hospital.

QUALITY OF CARE FOR HEART CONDITIONS SECTION CONTENTS

Quality of Care for Heart Attacks

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|---|---|----|
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| | Aspirin Prescribed When Patients were Released from the Hospital 4 | 45 |
| | Patients Given ACE Inhibitor or ARB Prescription for Left Ventricular Systolic Dysfunction (LVSD) When Released from the Hospital 4 | 45 |
| | Patients Given Advice or Counseling About Quitting Smoking While in the Hospital | 46 |
| | Patients Given Beta Blocker Prescription When Released from the Hospital | 46 |
| | Patients Given Fibrinolytic Medication Within 30 Minutes of Hospital Arrival | 47 |
| | Patients Given PCI Within 90 Minutes of Hospital Arrival | 17 |
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| | The Best Care for Heart Failure Patients | 48 |
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| | Patients Given ACE Inhibitor or ARB Prescription for Left Ventricular Systolic Dysfunction (LVSD) When Released from the Hospital 5 | 50 |
| | Patients Given Advice or Counseling About Quitting Smoking While in the Hospital | 50 |
| | Table of Results | 51 |
| | Appendix Table |)6 |



HEART ATTACKS

A heart attack (also called acute myocardial infarction or AMI) happens when the arteries leading to the heart become blocked and the blood supply is slowed or stopped. When the heart muscle can't get the oxygen and nutrients it needs, the part of the heart tissue that is affected may die.

The symptoms of a heart attack can include:

- chest pain (often described as a crushing, squeezing or burning pain in the center of the chest that may radiate to your arm or jaw)
- shortness of breath
- dizziness or faintness
- sweating
- nausea
- cold or clammy skin
- a gray or very ill appearance.

Sometimes there may be no symptoms, especially if you have diabetes. Women sometimes have different symptoms, such as a different kind of chest pain and/or abdominal pain.

The Best Care for Heart Attack Patients

What is the measure?

This measure shows the percent of patients receiving ALL of the appropriate care that they should have received based on their clinical condition. For heart attack patients this includes the remaining measures in this section:

- Aspirin Given When Patients Arrive at the Hospital
- Aspirin Given When Patients were Released from the Hospital
- Patients Given ACE Inhibitor or ARB Prescription for left ventricular systolic dysfunction (LVSD) When Released from the Hospital
- Patients Given Advice or Counseling About Quitting Smoking While in the Hospital
- Patients Given Beta Blocker Prescription When Released from the Hospital
- Patients Given Fibrinolytic Medication Within 30 Minutes of Hospital Arrival
- Patients Given PCI Within 90 Minutes of Hospital Arrival

The measure takes patient individuality into consideration, looking at one patient and his/her episode of care at a time, related to heart attacks (also known as acute myocardial infarction or AMI).

Why is this important?

This measure is a composite, or all-or-none, quality of care measure called an appropriate care measure (ACM). These types of measures are patient-focused measures that provide a way of looking at whether a patient received ALL of the "appropriate" or "right care" (recommended treatments) that he or

When choosing a hospital, look for the hospital that has a

HIGHER RATE.

she should have received, based on his or her clinical condition.

Performance on this measure ranged from 88 percent to 100 percent.

MEASURE SOURCE: Acute Myorcardial Infarction Appropriate Care Measure (AMI-ACM)

Heart Attack: Aspirin Given When Patients Arrived at the Hospital

What is the measure?

This measure shows the percent of heart attack patients who were given (or took) aspirin within 24 hours of arrival at the hospital.

When choosing a hospital, look for the hospital that has a **HIGHER RATE**.

Why is this important?

The heart is a muscle that gets oxygen through blood vessels. Sometimes blood

clots can block these blood vessels, and the heart can't get enough oxygen. This can cause a heart attack (also known as an acute myocardial infarction or AMI). Chewing an aspirin as soon as symptoms of a heart attack begin may help reduce the severity of the attack. This chart shows the percent of heart attack patients who were given (or took) aspirin within 24 hours of arrival at the hospital.

Performance on this measure ranged from 93 percent to 100 percent.

MEASURE SOURCE: Hospital Compare Measure

(AMI-1: Aspirin at arrival)

Heart Attack: Aspirin Prescribed When Patients were Released from the Hospital

What is the measure?

This measure shows the percent of heart attack patients who were prescribed aspirin when they were discharged from the hospital.

When choosing a hospital, look for the hospital that has a HIGHER RATE.

Why is this important?

Blood clots can block blood vessels. Aspirin can help prevent blood clots from forming or help dissolve blood clots that have formed. Following a heart attack, continued use of aspirin may help reduce the risk of another heart attack. Aspirin can have side effects like stomach inflammation, bleeding, or allergic reactions. Talk to your health care provider before using aspirin on a regular basis to make sure it's safe for you.

Performance on this measure ranged from 95 percent to 100 percent.

MEASURE SOURCE: Hospital Compare Measure (AMI-2: Aspirin prescribed at discharge)

Heart Attack: Patients Given ACE Inhibitor or ARB Prescription for Left Ventricular Systolic Dysfunction (LVSD) When Released from the Hospital

What is the measure?

This measure is used to assess the percent of heart attack patients with left ventricular systolic dysfunction (LVSD) who were prescribed an ACE Inhibitor or ARB when they were discharged from the hospital. For purposes of this measure, LVSD is defined as chart documentation of a left ventricular ejection fraction (LVEF) less than 40% or a narrative description of left ventricular systolic (LVS) function consistent with moderate or severe systolic dysfunction.

Why is this important?

ACE (angiotensin converting enzyme) inhibitors and ARBs (angiotensin receptor blockers) are medicines used to treat patients with heart failure and are particularly beneficial in those patients with heart failure and decreased function of the left side of the heart. Early treatment with

When choosing a hospital, look for the hospital that has a

HIGHER RATE

ACE inhibitors and ARBs in patients who have heart failure symptoms or decreased heart function after a heart attack can also reduce their risk of death from future heart attacks. ACE inhibitors and ARBs work by limiting the effects of a hormone that narrows blood vessels, and may thus lower blood pressure and reduce the work the heart has to perform. Since the ways in which these two kinds of drugs work are different, your doctor will decide which drug is most appropriate for you. If you have a heart attack and/or heart failure, you should get a prescription for ACE inhibitors or ARBs if you have decreased heart function before you leave the hospital.

Performance on this measure ranged from 96 percent to 100 percent.

MEASURE SOURCE: Hospital Compare Measure

(AMI-3: ACEI or ARB for Left Ventricular Systolic Dysfunction (LVSD))

Heart Attack: Patients Given Advice or Counseling About Quitting Smoking While in the Hospital

What is the measure?

This measure shows the percent of heart attack patients with a history of smoking cigarettes, who were given advice/counsel-

ing about stopping smoking while they were in the hospital. For the purposes of this measure, a smoker is defined as someone who has smoked cigarettes anytime during the year prior to hospital arrival.

When choosing a hospital, look for the hospital that has a

HIGHER RATE.

Why is this important?

Smoking increases your risk for devel-

oping blood clots and heart disease that can result in a heart attack, heart failure or stroke. Smoking causes your arteries to thicken and your blood vessels to narrow. Fat and plaque stick to the walls of your arteries, which makes it harder for blood to flow. Reduced blood flow to your heart may result in chest pain, high blood pressure, and an increased heart rate. Smoking is also linked to lung disease and cancer, and can cause premature death. It is important that you get information to help you quit smoking before you leave the hospital. Quitting may help prevent another heart attack.

Performance on this measure ranged from 99 percent to 100 percent.

MEASURE SOURCE: Hospital Compare Measure (AMI-4: Adult smoking cessation advice/counseling)

Heart Attack: Patients Given Beta Blocker Prescription When Released from the Hospital

What is the measure?

This measure shows the percent of heart attack patients who were prescribed a beta-blocker when they were discharged from the hospital.

When choosing a hospital, look for the hospital that has a

HIGHER RATE

Why is this important?

Beta blockers are a type of medicine that is used to lower blood pressure, treat chest pain (angina) and heart failure, and to help prevent a heart attack. Beta blockers relieve the stress on your heart by slowing the heart rate and reducing the force with which your heart muscles contract to pump blood. They also help keep blood vessels from constricting in your heart, brain, and body. If you have a heart attack, you should get a prescription for a beta blocker before you leave the hospital.

Performance on this measure ranged from 93 percent to 100 percent.

MEASURE SOURCE: Hospital Compare Measure (AMI-5: Beta-blocker prescribed at discharge)

Heart Attack: Patients Given Fibrinolytic Medication Within 30 Minutes of Hospital Arrival

What is the measure?

This measure shows the percent of heart attack patients receiving fibrinolytic therapy during the hospital stay and having a time from hospital arrival to fibrinolysis of 30 minutes or less.

When choosing a hospital, look for the hospital that has a **HIGHER RATE**.

Why is this important?

The heart is a muscle that gets oxygen through blood vessels. Sometimes blood clots can block these blood vessels and the heart can't get enough oxygen. This can cause a heart attack. Fibrinolytic drugs are medicines that can help dissolve blood clots in blood vessels and improve blood flow to your heart. You should get them within 30 minutes of arrival at the hospital.

MEASURE SOURCE: Hospital Compare Measure (AMI-7a: Fibrinolytic therapy received within 30 minutes of hospital arrival)

Heart Attack: Patients Given PCI Within 90 Minutes of Hospital Arrival

What is the measure?

This measure shows the percentage of heart attack patients receiving primary Percutaneous Coronary Intervention (PCI) during the hospital stay. For the purposes of this measure, the PCI was received within 90 minutes or less from the time the patient arrived at the hospital.

Why is this important?

The heart is a muscle that gets oxygen through blood vessels. Sometimes blood clots can block these blood vessels, and the heart can't get enough oxygen. This can cause a heart attack. Percutaneous Coronary Interventions (PCI) are procedures that are

When choosing a hospital, look for the hospital that has a

HIGHER RATE.

among the most effective ways to open blocked blood vessels and help prevent further heart muscle damage. A PCI is performed by a doctor to open the blockage and increase blood flow in blocked blood vessels. Improving blood flow to your heart as quickly as possible lessens the damage to your heart muscle. It also can increase your chances of surviving a heart attack. There are three procedures commonly described by the term PCI. These procedures all involve a catheter (a flexible tube) that is inserted, often through your leg, and guided through the blood vessels to the blockage. The three procedures are:

- Angioplasty a balloon is inflated to open the blood vessel.
- Stenting a small wire tube called a stent is placed in the blood vessel to hold it open.
- Atherectomy a blade or laser cuts through and removes the blockage.

Performance on this measure ranged from 87 percent to 100 percent.

MEASURE SOURCE: Hospital Compare Measure (AMI-8a: Primary percutaneous coronary intervention (PCI) received within 90 minutes of hospital arrival)

HEART FAILURE

Heart Failure is a weakening of the heart's pumping power. With heart failure, your body doesn't get enough oxygen and nutrients to meet its needs. Your heart tries to pump more blood, but the muscle walls become weaker over time.

Symptoms of heart failure may include:

- shortness of breath from fluid in the lungs
- swelling (such as in legs, ankles or abdomen)
- dizziness
- fatigue
- weakness
- cold or clammy skin
- a rapid or irregular heartbeat.

Heart failure can be a result of heart condition due to

- hardening of the arteries, also known as coronary artery disease,
- a heart attack,
- cardiomyopathy (heart muscle damage from infection or alcohol or drug abuse), or
- an overworked heart (caused over time by conditions like high blood pressure, kidney disease, diabetes, or a defect from birth).

The Best Care for Heart Failure Patients

What is the measure?

This measure shows the percent of patients receiving ALL of the appropriate care that they should have received based on their clinical condition. For heart failure patients this includes the remaining measures in this section:

- Patients Given Instructions When Released from the Hospital
- Patients Given Evaluation of Left Ventricular Systolic (LVS) Function While in the Hospital or Scheduled for After the Patient was Released
- Patients Given ACE Inhibitor or ARB Prescription for Left Ventricular Systolic Dysfunction (LVSD) When Released from the Hospital
- Patients Given Advice or Counseling About Quitting Smoking While in the Hospital

The measure takes patient individuality into consideration, looking at one patient and their episode of care at a

time, related to heart failure.

Why is this important?

This measure is a composite, or all-or-none, quality of care measure called an appropriate care measure (ACM). These types of measures are patient-focused measures that provide a way of looking at whether a patient received ALL of the "appropriate" or "right or

When choosing a hospital, look for the hospital that has a

HIGHER RATE

received ALL of the "appropriate" or "right care" (recommended treatments) that he or she should have received, based on his or her clinical condition. Each patient is unique and may not be eligible for every type of care for a condition. The measure takes this into consideration.

Performance on this measure ranged from 26 percent to 98 percent.

MEASURE SOURCE: Heart Failure Appropriate Care Measure (HF-ACM)

Heart Failure: Patients Given Instructions When Released from the Hospital

What is the measure?

This measure shows the percent of heart failure patients given written discharge instructions or educational materials when they were discharged from the hospital.

When choosing a

hospital, look for the

hospital that has a

HIGHER RATE.

Why is this important?

Heart failure is a chronic condition. It results in symptoms such as shortness of breath, dizziness, and fatigue. Before you leave the hospital, the staff at the hospital should provide you with information to help you manage the symptoms after you get home. The information should include:

- activity level (what you can and can't do)
- diet (what you should, and shouldn't eat or drink)
- medications
- follow-up appointment
- watching your daily weight
- what to do if your symptoms get worse

Performance on this measure ranged from 50 percent to 100 percent.

MEASURE SOURCE: Hospital Compare Measure

(HF-1: Discharge instructions)

Heart Failure: Patients Given Evaluation of Left Ventricular Systolic (LVS) Function While in the Hospital or Scheduled for After the Patient was Released

What is the measure?

This measure shows the percent of heart failure patients with documentation in the hospital record that left ventricular systolic (LVS) function was evaluated before arrival, during hospitalization, or is planned for after discharge.

Why is this important?

The proper treatment for heart failure depends on what area of your heart is affected. An important test is to check how your heart is pumping, called an "evaluation of the left ventricular systolic function." It can tell your health care provider whether the left side of your heart is pumping properly.

When choosing a

hospital, look for the

hospital that has a

HIGHER RATE.

Performance on this measure ranged from 70 percent to 100 percent.

MEASURE SOURCE: Hospital Compare Measure

(HF-2: Evaluation of left ventricular systolic (LVS) function)

Heart Failure: Patients Given ACE Inhibitor or ARB Prescription for Left Ventricular Systolic Dysfunction (LVSD) When Released from the Hospital

What is the measure?

This measure shows the percent of heart failure patients with left ventricular systolic dysfunction (LVSD) who are prescribed an ACEI or ARB at hospital discharge. For purposes of this measure, LVSD is defined as chart documentation of a left ventricular ejection fraction (LVEF) less than 40% or a narrative description of left ventricular systolic (LVS) function consistent with moderate or severe systolic dysfunction.

Why is this important?

ACE (angiotensin converting enzyme) inhibitors and ARBs (angiotensin receptor blockers) are medicines used to treat patients with heart failure and are particularly beneficial in those patients with heart failure and decreased function of the left side of the heart. Early treatment

When choosing a hospital, look for the hospital that has a

HIGHER RATE.

with ACE inhibitors and ARBs in patients who have heart failure symptoms or decreased heart function after a heart attack can also reduce their risk of death from future heart attacks. ACE inhibitors and ARBs work by limiting the effects of a hormone that narrows blood vessels, and may thus lower blood pressure and reduce the work the heart has to perform. Since the ways in which these two kinds of drugs work are different, your doctor will decide which drug is most appropriate for you. If you have a heart attack and/or heart failure, you should get a prescription for ACE inhibitors or ARBs if you have decreased heart function before you leave the hospital.

Performance on this measure ranged from 81 percent to 100 percent.

MEASURE SOURCE: Hospital Compare Measure

(HF-3: ACEI or ARB for left ventricular systolic dysfunction (LVSD))

Heart Failure: Patients Given Advice or Counseling About Quitting Smoking While in the Hospital

What is the measure?

This measure shows the number of heart failure patients with a history of smoking cigarettes, who are given advice or counseling about stopping smoking while in the hospital. For the purposes of the measure, a smoker is defined as some-

one who has smoked cigarettes anytime during the year prior to hospital arrival.

Why is this important?

Smoking increases your risk for developing blood clots and heart disease, which can result in a heart attack, heart failure or stroke. Smoking causes your blood vessels When choosing a hospital, look for the hospital that has a

HIGHER RATE.

to thicken. Fat and plaque then stick to the wall of your blood vessels, which makes it harder for blood to flow. Reduced blood flow to your heart may result in chest pain, high blood pressure, and an increased heart rate. Smoking is linked to lung disease and cancer, and can cause premature death. It is important for your health that you get information to help you quit smoking before you leave the hospital.

Performance on this measure ranged from 96 percent to 100 percent.

MEASURE SOURCE: Hospital Compare Measure (HF-4: Adult smoking cessation advice/counseling)

Note on Percentage Rates:

| nen choosing a hospital, please check to e if the higher or lower rate is better. Note on Percentage Rates: The rate shows how many patients out of one hundred received the described treatment. | lhe Best Care for Heart Attack Patient | Aspirin Given When Patients Arrived at the Hospital | Aspirin Prescribed When Patients were Released from the Hospital | Patients Given ACE Inhibitor or ARB Pre tion for LVSD When Released from Hos | Patients Given Advice or Counseling Ab Quitting Smoking While in the Hospital | Patients Given Beta Blocker Prescripti When Released from the Hospital | Patients Given Fibrinolytic Medication Within 30 Minutes of Hospital Arrival | Patients Given PCI Within 90 Minutes of Hospital Arrival | The Best Care for Heart Failure Patien | Patients Given Instructions When Released from the Hospital | Patients Given Evaluation of LVS Funct While in the Hospital or Scheduled for A the Patient was Released | Patients Given ACE Inhibitor or ARB Prescription for LVSD When Released from the Hospital | Patients Given Advice or Counseling Ab Quitting Smoking While in the Hospital |
|--|--|--|---|---|--|---|---|---|--|--|--|---|--|
| HOSPITAL NAME | The | Aspi | Aspi | Pati tion | Pati Quit | Pati Whe | Pati With | Pati of H | The | Pati Rele | Pati Whil | Pati Pres from | Pati Quit |
| Overall Minnesota Average | 97% | 95% | 93% | 94% | 90% | 90% | * | 94% | 83% | 70% | 83% | 86% | 83% |
| Albert Lea Medical Center: Mayo Health System | * | * | * | * | * | * | * | * | 78% | 70% | 95% | * | * |
| Appleton Municipal Hospital and Nursing Home | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Austin Medical Center: Mayo Health System | * | * | * | * | * | * | * | * | 94% | 94% | 99% | * | * |
| Avera Marshall Regional Medical Center - Marshall | * | * | * | * | * | * | * | * | * | * | 96% | * | * |
| Cannon Falls Medical Center: Mayo Health System | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Chippewa County-Montevideo Hospital | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Fairmont Medical Center: Mayo Health System | * | * | * | * | * | * | * | * | 81% | 70% | 100% | 100% | * |
| Fairview Red Wing Hospital | * | * | * | * | * | * | * | * | 97% | 96% | 100% | * | * |
| Glencoe Regional Health Services | * | * | * | * | * | * | * | * | 69% | * | 96% | * | * |
| Granite Falls Municipal Hospital and Manor | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Hendricks Community Hospital Association | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Holy Trinity Hospital: Graceville Health Center | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Hutchinson Community Hospital | * | * | * | * | * | * | * | * | 88% | 83% | 100% | * | * |
| | HIGHER is better | HIGHER is better | HIGHER is better | HIGHER is better | HIGHER is better | HIGHER is better | HIGHER is better | A HIGHER | HIGHER is better | HIGHER is better | HIGHER is better | HIGHER is better | HIGHER is better |

Heart Attack

ents Given Advice or Counseling About

ents Given Beta Blocker Prescription

ents Given ACE Inhibitor or ARB Prescrip-for LVSD When Released from Hospital

For more detailed information, see appendices starting on page 203.

Heart Failure

le in the Hospital or Scheduled for After ents Given Evaluation of LVS Function

ents Given Advice or Counseling About ting Smoking While in the Hospital

^{*} Sufficient data not available

Note on Percentage Rates:

| for Heart Conditions | | | | scrip- ital | Ħ | _ | | | | | te a | | Ħ |
|---|---|--|--|---|---|---|---|---|--|--|---|---|---|
| When choosing a hospital, please check to see if the higher or lower rate is better. | ıck Patients | | Patients Hospital | or ARB Pres 1 from Hospi | unseling Abo ie Hospital | Prescriptio spital | Nedication N Arrival |) Minutes | ure Patients | When | LVS Function duled for Afte | or ARB Released | unseling Abo ie Hospital |
| Note on Percentage Rates: The rate shows how many patients out of one hundred received the described treatment. | The Best Care for Heart Attack Patients | Aspirin Given When Patients Arrived at the Hospital | Aspirin Prescribed When Patient were Released from the Hospital | Patients Given ACE Inhibitor or ARB Prescrip tion for LVSD When Released from Hospital | Patients Given Advice or Counseling About Quitting Smoking While in the Hospital | Patients Given Beta Blocker Prescription When Released from the Hospital | Patients Given Fibrinolytic Medication Within 30 Minutes of Hospital Arrival | Patients Given PCI Within 90 Minutes of Hospital Arrival | The Best Care for Heart Failure Patients | Patients Given Instructions When Released from the Hospital | Patients Given Evaluation of LVS Function While in the Hospital or Scheduled for After the Patient was Released | Patients Given ACE Inhibitor or ARB Prescription for LVSD When Released from the Hospital | Patients Given Advice or Counseling About Quitting Smoking While in the Hospital |
| HOSPITAL NAME | F | Ar Ar | As | ti B | 2 3 | P N | Pa Ni | of Pa | Ē | Re B | | | |
| Overall Minnesota Average | 97% | 95% | 93% | 94% | 90% | 90% | * | 94% | 83% | 70% | 83% | 86% | 83% |
| Immanuel-St Josephs: Mayo Health System - Mankato | 100% | 100% | 100% | 100% | 100% | 100% | * | 100% | 91% | 90% | 97% | 100% | * |
| Johnson Memorial Hospital - Dawson | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Lake City Medical Center: Mayo Health System | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Madelia Community Hospital | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Madison Hospital | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Meeker County Memorial Hospital - Litchfield | * | * | * | * | * | * | * | * | 32% | * | 74% | * | * |
| Methodist Hospital: Mayo Clinic - Rochester | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Minnesota Valley Health Center - Le Sueur | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Murray County Memorial Hospital - Slayton | * | * | * | * | * | * | * | * | * | * | * | * | * |
| New Ulm Medical Center | * | * | * | * | * | * | * | * | 97% | 94% | 100% | * | * |
| Northfield Hospital | * | * | * | * | * | * | * | * | 69% | 62% | 98% | * | * |
| Olmsted Medical Center - Rochester | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Ortonville Area Health Services | * | * | * | * | * | * | * | * | * | * | * | * | * |
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Heart Attack

Heart Failure

For more detailed information, see appendices starting on page 203.

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^{*} Sufficient data not available

Note on Percentage Rates:

| When choosing a hospital, please check to see if the higher or lower rate is better. Note on Percentage Rates: The rate shows how many patients out of one hundred received the described treatment. HOSPITAL NAME | The Best Care for Heart Attack Patients | Aspirin Given When Patients Arrived at the Hospital | Aspirin Prescribed When Patients were Released from the Hospital | Patients Given ACE Inhibitor or ARB Prescription for LVSD When Released from Hospital | Patients Given Advice or Counseling About Quitting Smoking While in the Hospital | Patients Given Beta Blocker Prescription When Released from the Hospital | Patients Given Fibrinolytic Medication Within 30 Minutes of Hospital Arrival | Patients Given PCI Within 90 Minutes of Hospital Arrival | The Best Care for Heart Failure Patients | Patients Given Instructions When Released from the Hospital | Patients Given Evaluation of LVS Function While in the Hospital or Scheduled for After the Patient was Released | Patients Given ACE Inhibitor or ARB Prescription for LVSD When Released from the Hospital | Patients Given Advice or Counseling About Quitting Smoking While in the Hospital |
|--|---|--|---|---|---|---|---|---|--|--|---|---|---|
| Overall Minnesota Average | 97% | 95% | 93% | 94% | 90% | 90% | * | 94% | 83% | 70% | 83% | 86% | 83% |
| Owatonna Hospital | * | * | * | * | * | * | * | * | 96% | 95% | 97% | * | * |
| Pipestone County Medical Center: Avera | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Redwood Area Hospital - Redwood Falls | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Renville County Hospital And Clinics - Olivia | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Rice County District One Hospital - Faribault | * | * | * | * | * | * | * | * | 78% | 88% | 90% | * | * |
| Rice Memorial Hospital - Willmar | * | * | * | * | * | * | * | * | 84% | 82% | 97% | 92% | * |
| River's Edge Hospital & Clinic - St. Peter | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Sanford Canby Medical Center | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Sanford Hospital Luverne | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Sanford Jackson Medical Center | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Sanford Regional Hospital Worthington | * | * | * | * | * | * | * | * | 62% | 85% | 76% | * | * |
| Sanford Tracy Medical Center | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Sanford Westbrook Medical Center | * | * | * | * | * | * | * | * | * | * | * | * | * |
| | | A | A | | A | A | A | A | | A | A | A | |

Heart Attack

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For more detailed information, see appendices starting on page 203.

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Heart Failure

^{*} Sufficient data not available

Note on Percentage Rates:

| When choosing a hospital, please check to see if the higher or lower rate is better. Note on Percentage Rates: The rate shows how many patients out of one hundred received the described treatment. HOSPITAL NAME | The Best Care for Heart Attack Patients | Aspirin Given When Patients Arrived at the Hospital | Aspirin Prescribed When Patients were Released from the Hospital | Patients Given ACE Inhibitor or ARB Prescrip- tion for LVSD When Released from Hospital | Patients Given Advice or Counseling About Quitting Smoking While in the Hospital | Patients Given Beta Blocker Prescription When Released from the Hospital | Patients Given Fibrinolytic Medication Within 30 Minutes of Hospital Arrival | Patients Given PCI Within 90 Minutes of Hospital Arrival | The Best Care for Heart Failure Patients | | rauents Given Evaluation of Lys Function While in the Hospital or Scheduled for After the Patient was Released | Patients Given ACE Inhibitor or ARB Prescription for LVSD When Released from the Hospital | Patients Given Advice or Counseling About Quitting Smoking While in the Hospital |
|--|---|--|---|--|---|---|---|---|--|------|--|---|---|
| Overall Minnesota Average | 97% | 95% | 93% | 94% | 90% | 90% | * | 94% | 83% | 70% | 83% | 86% | 83% |
| Sibley Medical Center - Arlington | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Sleepy Eye Medical Center | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Springfield Medical Center: Mayo Health System | * | * | * | * | * | * | * | * | * | * | * | * | * |
| St Elizabeth Medical Center - Wabasha | * | * | * | * | * | * | * | * | * | * | * | * | * |
| St James Medical Center: Mayo Health System | * | * | * | * | * | * | * | * | * | * | * | * | * |
| St Mary's Hospital: Mayo Clinic - Rochester | 99% | 100% | 99% | 100% | 100% | 100% | * | * | 91% | 89% | 100% | 96% | 100% |
| Swift County Benson Hospital | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Tyler Healthcare Center: Avera | * | * | * | * | * | * | * | * | * | * | * | * | * |
| United Hospital District - Blue Earth | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Waseca Medical Center: Mayo Health System | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Windom Area Hospital | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Winona Health Services | 90% | 93% | * | * | * | * | * | * | 98% | 100% | 98% | * | * |
| | | | | | | | | | | | | | |

Heart Attack

Heart Failure

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For more detailed information, see appendices starting on page 203.

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^{*} Sufficient data not available

QUALITY OF CARE FOR SURGERIES SECTION CONTENTS

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HEART SURGERIES

When arteries carrying blood to the heart get blocked, this can lead to a heart attack. There are a number of surgical interventions which can unblock these blood vessels and restore blood flow. Since these surgeries are so technically difficult, outcomes will generally be better at hospitals that perform more of these procedures. The measures in this section report the number of surgeries performed and the death rate for heart bypass surgery and angioplasty heart surgery.

Use the information in this section to see how hospitals compare in their quality of care related to heart surgeries.

Heart Bypass Surgery: Number of Operations and Death Rate

What is the measure?

Heart bypass surgery can restore good blood flow to the heart. The coronary artery bypass graft (CABG) surgery reroutes, or "bypasses," blood around clogged arteries to improve blood flow and oxygen to the heart. These measures show the number of times a hos-

When choosing a hospital, look for the hospital that has a HIGHER NUMBER OF OPERATIONS and LOWER DEATH RATE.

pital performed a CABG and the rate of patient deaths related to the surgery. Research shows that, in general, when hospitals do these procedures frequently, they are more likely to have good results. Often, but not always, a hospital that has a higher number of operations will have lower death rates.

Why is this important?

The arteries that bring blood to the heart muscle can become clogged by fat and other substances. This can slow or stop blood flow through the heart's blood vessels, leading to chest pain or a heart attack. A bypass surgery may be recommended to implant tissue from another part of the body to act as a tube that allows blood to flow around one or more blocked or narrowed arteries.

Although CABG is a fairly common form of open heart surgery, it is a technically difficult procedure. Errors during the surgery may lead to other health problems, such as heart attack, stroke, and death. About 3-4% of patients die from CABG surgery. Your surgical risks are related to your age, other medical conditions and the number of procedures you have during one operation. Hospitals that perform more of these surgeries have been associated with better outcomes, including a lower number of deaths.

MEASURE SOURCE: AHRQ Inpatient Quality Indicators (IQI 5: CABG Volume and IQI 12: CABG Mortality Rate)

Angioplasty Heart Surgery: Number of Operations and Death Rate

What is the measure?

Percutaneous transluminal coronary angioplasty (PTCA) can restore good blood flow to the heart. PTCA surgery involves inserting a tube through the leg or arm, into the heart, to open blocked arteries and keep them open. These measures show the number of times a hospital performed this procedure and the rate of patient deaths related to the surgery. Research shows that, in general, when hospitals do these procedures frequently, they are more likely to have good results. Often, but not always, a hospital that has a higher number of procedures will have lower death rates.

Why is this important?

The arteries that bring blood to the heart muscle can become clogged by fat and other substances. This can slow or stop blood flow through the heart's blood vessels, leading to chest pain or a heart attack. A PTCA may be recommended to open blocked arteries and improve blood to flow to the heart. A catheter (long hollow tube) is inserted through the leg or arm, into the heart, to open blocked arteries.

When choosing a hospital, look for the hospital that has a HIGHER NUMBER OF OPERATIONS and LOWER DEATH RATE.

Although PTCA is a fairly common form of heart surgery, it is a technically difficult procedure. Errors during surgery may lead to other health problems. About 1.31% of U.S. patients die from PTCA surgery. Your surgical risks are related to your age and other medical conditions.

MEASURE SOURCE: AHRQ Inpatient Quality Indicators (IQI 6: PTCA Volume and IQI 30: PTCA Mortality Rate)

OTHER SURGERIES

Every year, more than 15 million Americans have surgery. Of these surgeries, those that are not related to an emergency are called elective surgeries. In these cases you have time to learn about your operation. You can also use this time to work with your doctor and make sure this is the right treatment for you. It is also important to consider the type of care provided at the hospital, which can reduce your risk of complications or infections. There are steps hospitals can take to lower the risk of complication and provide higher quality of care related to surgeries. An example would be ordering the best medications to prevent blood clots after an operation.

Use the information in this section to see how hospitals compare in their quality of care related to surgeries.

Surgical Repair of an Abdominal Aortic Aneurysm: Number of Operations and Death Rate

What is the measure?

These measures show the quality of hospital care related to the surgical repair of an enlarged artery or vein supplying blood to the lower half of the body. The table below shows the number of times a hospital performed this operation and rate of patient deaths related to the surgery. This procedure is somewhat rare. Research shows that, in general, when hospitals do these procedures frequently, they are more likely to have good results. Often, but not always, a hospital that has a higher number of operations will have lower death rates.

Why is this important?

Surgery to repair an abdominal aortic aneurysm (AAA) is recommended if the aneurysm causes additional symptoms or grows to a size that is likely to burst. Abdominal aortic aneurysm repair is a fairly rare form of surgery. It is a technically difficult procedure with a high death rate compared to other forms of surgery.

When choosing a hospital, look for the hospital that has a **HIGHER NUMBER OF OPERATIONS** and **LOWER DEATH RATE**.

Surgeons completing AAA repair need to have great skill using complex equipment. Technical errors may lead to other health problems, such as irregular heartbeat, heart attack, injury to the large intestine (colonic ischemia), and death.

MEASURE SOURCE: AHRQ Inpatient Quality Indicators (IQI 4: Abdominal aortic aneurysm (AAA) repair volume and IQI 11: Abdominal aortic aneurysm (AAA) repair mortality rate)

Vaginal Hysterectomy Surgical Site Infection Rate

What is the measure?

This measure shows the percent of vaginal hysterectomy patients with a surgical site infection.

Why is this important?

Surgical site infections are a common complication of care. They can increase the length and cost of a hospital stay. About 2.6 percent of operations are complicated by surgical site infections every year. By following proven strategies for infection prevention,

When choosing a hospital, look for the hospital that has a **LOWER** INFECTION RATE.

these rates can be reduced. This would save the patient from this potentially serious complication and the hospital the additional resources associated with that care.

MEASURE SOURCE: Healthcare-Associated Infection Measure (Vaginal hysterectomy surgical site infection rate)

Surgery Patients Whose Doctors Ordered Treatment to Prevent Blood Clots After Certain Types of Surgeries

What is the measure?

This measure shows the percent of surgery patients whose doctors ordered treatments to prevent blood clots after certain types of surgeries. In this case, the recommended venous thromboembolism (VTE) prophylaxis, or treatment to prevent blood clots, was ordered anytime from hospital arrival to 24 hours after surgery end time.

Why is this important?

Certain surgeries increase the risk that the patient will develop a blood clot (venous thromboembolism). When patients stay still for a long time after some types of surgery, they are more likely to develop a blood clot in the veins of the legs, thighs, or pelvis. A blood clot slows down the flow of blood.

When choosing a hospital, look for the hospital that has a HIGHER RATE.

causing swelling, redness, and pain. A blood clot can also break off and travel to other parts of the body. If the blood clot gets into the lung, it is a serious problem that can cause death.

To help prevent blood clots from forming after surgery, doctors can order treatments to be used just before or after the surgery. These include blood-thinning medications, elastic support stockings, or mechanical air stockings that help with blood flow in the legs.

Performance on this measure ranged from 75 percent to 100 percent.

MEASURE SOURCE: Hospital Compare Measure (SCIP-VTE-1: Surgery patients with recommended venous thromboembolism prophylaxis ordered)

Surgery Patients Who Received Treatment at the Right Time to Prevent Blood Clots After Certain Types of Surgery

What is the measure?

This measure shows the percent of surgery patients who got treatment at the right time to help prevent blood clots after certain types of surgeries. These treatments need to be started at the right time, which is typically during the period that begins 24 hours before surgery and ends 24 hours after surgery.

Why is this important?

Many factors influence a surgery patient's risk of developing a blood clot, including the type of surgery. When patients stay still for a long time after some types of surgery, they are more likely to develop a blood clot in the veins of the legs, thighs, or pelvis. A blood clot

When choosing a hospital, look for the hospital that has a

HIGHER RATE.

slows down the flow of blood, causing swelling, redness, and pain. A blood clot can also break off and travel to other parts of the body. If the blood clot gets into the lung, it is a serious problem that can sometimes cause death.

Treatments to help prevent blood clots from forming after surgery include blood-thinning medications, elastic support stockings, or mechanical air stockings that help with blood flow in the legs.

Performance on this measure ranged from 66 percent to 100 percent.

MEASURE SOURCE: Hospital Compare Measure (SCIP-VTE-2: Surgery patients who received appropriate venous thromboembolism prophylaxis within 24 hours prior to surgery to 24 hours after surgery)



Quality of Care for Surgeries When choosing a hospital, please check to

see if the higher or lower rate is better.

| see if the higher or lower rate is better. | | | | | | | AU | rtic Ane | urysm | | | | _ |
|--|----------------------|--------------------------|-----------------------------------|----------------------|--------------------------|-----------------------------------|----------------------|--------------------------|-----------------------------------|-------------------------------------|----------------|---|--|
| Number of Operations: The number of these surgeries performed. Risk Adjusted Rate: This takes the severity of each patient's illness into account. When Compared to Expected: This comparison is based on how the hospital's risk adjusted rate measures up to the expected rate of other similar hospitals, identifying it as performing the SAME, BETTER, or WORSE. When selecting a hospital, look for one with at least a SAME rating and ideally a BETTER rating. HOSPITAL NAME | Number of Operations | Risk Adjusted Death Rate | When Compared to Expected Rate | Number of Operations | Risk Adjusted Death Rate | When Compared to Expected Rate | Number of Operations | Risk Adjusted Death Rate | When Compared to Expected Rate | When Compared to Other Hospitals | Infection Rate | Surgery Patients Whose Doctors Ordered Treatment to Prevent Blood Clots After Certain Types of Surgeries | Surgery Patients Who Received Treatment at the Right Time to Prevent Blood Clots After Certain Types of Surgery |
| Overall Minnesota Average | | | | | | | | | | | | 87% | 86% |
| Albert Lea Medical Center: Mayo Health System | * | * | * | * | * | * | * | * | * | SAME | 0% | 97% | 97% |
| Appleton Municipal Hospital and Nursing Home | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Austin Medical Center: Mayo Health System | * | * | * | * | * | * | * | * | * | * | * | 98% | 96% |
| Avera Marshall Regional Medical Center - Marshall | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Cannon Falls Medical Center: Mayo Health System | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Chippewa County-Montevideo Hospital | * | * | * | * | * | * | * | * | * | SAME | 0% | * | * |
| Fairmont Medical Center: Mayo Health System | * | * | * | * | * | * | * | * | * | * | * | 97% | 97% |
| Fairview Red Wing Hospital | * | * | * | * | * | * | * | * | * | SAME | 1% | 98% | 98% |
| Glencoe Regional Health Services | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Granite Falls Municipal Hospital and Manor | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Hendricks Community Hospital Association | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Holy Trinity Hospital: Graceville Health Center | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Hutchinson Community Hospital | * | * | * | * | * | * | * | * | * | * | * | 96% | 96% |

Heart Surgeries

Heart Bypass Surgery

Angioplasty

Heart Surgery



Other Surgeries

Vaginal Hysterectomy

Surgical Site Infection

Surgical Repair

of an Abdominal

Aortic Aneurysm



^{*} Sufficient data not available or procedure is not performed at hospital. For more detailed information, see appendices starting on page 203.

Quality of Care for Surgeries

When choosing a hospital, please check to see if the higher or lower rate is better.

Number of Operations: The number of these surgeries performed. **Risk Adjusted Rate:** This takes the severity of each patient's illness into account.

When Compared to Expected: This comparison is based on how the hospital's risk adjusted rate measures up to the expected rate of other similar hospitals, identifying it as performing the SAME, BETTER, or WORSF

When selecting a hospital, look for one with at least a **SAME** rating and ideally a **BETTER** rating.

HOSPITAL NAME

| | | Heart S | urgerie | s | | | | | Other | Surgeri | es | |
|----------------------|--------------------------|-----------------------------------|----------------------|--------------------------|-----------------------------------|----------------------|---------------------------------|-----------------------------------|-------------------------------------|---------------------|---|--|
| Heart | Bypass | Surgery | H | Angiopl eart Su | asty rgery | of | rgical I an Abdo rtic Ane | ominal | Vaginal Hyste Surgical Site | rectomy nfection | | |
| Number of Operations | Risk Adjusted Death Rate | When Compared to Expected Rate | Number of Operations | Risk Adjusted Death Rate | When Compared to Expected Rate | Number of Operations | Risk Adjusted Death Rate | When Compared to Expected Rate | When Compared to Other Hospitals | Infection Rate | Surgery Patients Whose Doctors Ordered Treatment to Prevent Blood Clots After Certain Types of Surgeries | Surgery Patients Who Received Treatment at the Right Time to Prevent Blood Clots After Certain Types of Surgery |
| | | | • | | | | | | | | 87% | 86% |
| * | * | * | 272 | 1% | SAME | * | * | * | SAME | 0% | 93% | 91% |

| Overall Minnesota Average | | | | | | | | | | | | 87% | 86% |
|---|---|---|---|-----|----|------|---|---|---|------|----|------|-----|
| Immanuel-St Josephs: Mayo Health System - Mankato | * | * | * | 272 | 1% | SAME | * | * | * | SAME | 0% | 93% | 91% |
| Johnson Memorial Hospital - Dawson | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Lake City Medical Center: Mayo Health System | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Madelia Community Hospital | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Madison Hospital | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Meeker County Memorial Hospital - Litchfield | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Methodist Hospital: Mayo Clinic - Rochester | * | * | * | * | * | * | * | * | * | SAME | 1% | 100% | 99% |
| Minnesota Valley Health Center - Le Sueur | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Murray County Memorial Hospital - Slayton | * | * | * | * | * | * | * | * | * | * | * | * | * |
| New Ulm Medical Center | * | * | * | * | * | * | * | * | * | * | * | 95% | 93% |
| Northfield Hospital | * | * | * | * | * | * | * | * | * | * | * | 86% | 82% |
| Olmsted Medical Center - Rochester | * | * | * | * | * | * | * | * | * | SAME | 5% | 94% | 94% |
| Ortonville Area Health Services | * | * | * | * | * | * | * | * | * | * | * | * | * |





^{*} Sufficient data not available or procedure is not performed at hospital. For more detailed information, see appendices starting on page 203.

Quality of Care for Surgeries When choosing a hospital, please check to

see if the higher or lower rate is better.

Number of Operations: The number of these surgeries performed. Risk Adjusted Rate: This takes the severity of each patient's illness into account.

When Compared to Expected: This comparison is based on how the hospital's risk adjusted rate measures up to the expected rate of other similar hospitals, identifying it as performing the **SAME**, **BETTER**, or

When selecting a hospital, look for one with at least a **SAME** rating and ideally a **BETTER** rating.

HOSPITAL NAME

| | | Heart S | urgerie | s | | Other Surgeries | | | | | | | | | | | |
|----------------------|--------------------------|-----------------------------------|----------------------|------------------------------|-----------------------------------|----------------------|-------------------------------|-----------------------------------|-------------------------------------|---------------------|---|--|--|--|--|--|--|
| Heart Bypass Surgery | | | Н | Angioplasty Heart Surgery | | | ırgical an Abd rtic Ane | | Vaginal Hyste Surgical Site I | rectomy nfection | | | | | | | |
| Number of Operations | Risk Adjusted Death Rate | When Compared to Expected Rate | Number of Operations | Risk Adjusted Death Rate | When Compared to Expected Rate | Number of Operations | Risk Adjusted Death Rate | When Compared to Expected Rate | When Compared to Other Hospitals | Infection Rate | Surgery Patients Whose Doctors Ordered Treatment to Prevent Blood Clots After Certain Types of Surgeries | Surgery Patients Who Received Treatment at the Right Time to Prevent Blood Clots After Certain Types of Surgery | | | | | |
| | | | | | | | | | | | 87% | 86% | | | | | |
| ъ. | | | 4 | | 4 | | | 4 | CAME | 00/ | 0.00/ | 000/ | | | | | |

| Overall Minnesota Average | | | | | | | | | | | | 87% | 86% |
|---|-------|---|---|---|---|---|---|---|---|------|----|-----|-----|
| Owatonna Hospital | * | * | * | * | * | * | * | * | * | SAME | 0% | 86% | 86% |
| Pipestone County Medical Center: Avera | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Redwood Area Hospital - Redwood Falls | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Renville County Hospital And Clinics - Olivia | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Rice County District One Hospital - Faribault | * | * | * | * | * | * | * | * | * | * | * | 87% | 87% |
| Rice Memorial Hospital - Willmar | * | * | * | * | * | * | * | * | * | SAME | 0% | 94% | 90% |
| River's Edge Hospital & Clinic - St. Peter | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Sanford Canby Medical Center | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Sanford Hospital Luverne | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Sanford Jackson Medical Center | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Sanford Regional Hospital Worthington | * | * | * | * | * | * | * | * | * | * | * | 88% | * |
| Sanford Tracy Medical Center | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Sanford Westbrook Medical Center | * | * | * | * | * | * | * | * | * | * | * | * | * |





^{*} Sufficient data not available or procedure is not performed at hospital. For more detailed information, see appendices starting on page 203.

Quality of Care for Surgeries

When choosing a hospital, please check to see if the higher or lower rate is better.

Number of Operations: The number of these surgeries performed. **Risk Adjusted Rate:** This takes the severity of each patient's illness into account.

When Compared to Expected: This comparison is based on how the hospital's risk adjusted rate measures up to the expected rate of other similar hospitals, identifying it as performing the SAME, BETTER, or WORSE.

When selecting a hospital, look for one with at least a **SAME** rating and ideally a **BETTER** rating.

HOSPITAL NAME

| | | | Heart S | urgerie | s | | | | | Other | Surger | ies | | | |
|---|----------------------|--------------------------|-----------------------------------|----------------------|--------------------------|-----------------------------------|--------------------------------|--------------------------|-----------------------------------|-------------------------------------|----------------|---|--|--|--|
| | Heart Bypass Surgery | | | Angiopl eart Su | | of a | rgical R an Abdo tic Ane | minal | Vaginal Hyste Surgical Site | | | .⊑ | | | |
| • | Number of Operations | Risk Adjusted Death Rate | When Compared to Expected Rate | Number of Operations | Risk Adjusted Death Rate | When Compared to Expected Rate | Number of Operations | Risk Adjusted Death Rate | When Compared to Expected Rate | When Compared to Other Hospitals | Infection Rate | Surgery Patients Whose Doctors Ordered Treatment to Prevent Blood Clots After Certain Types of Surgeries | Surgery Patients Who Received Treatment at the Right Time to Prevent Blood Clots After Certain Types of Surgery | | |
| | | | | | | | | | | | | 87% | 86% | | |
| | * | * | * | * | * | * | * | * | * | * | * | * | * | | |

| HOSPITAL NAME | | | | 9 0 0 | | | | | | | | * | |
|--|-----|----|--------|---|----|--------|-----|----|--------|------|----|------|-----|
| Overall Minnesota Average | | | | | | | | | | | | 87% | 86% |
| Sibley Medical Center - Arlington | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Sleepy Eye Medical Center | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Springfield Medical Center: Mayo Health System | * | * | * | * | * | * | * | * | * | * | * | * | * |
| St Elizabeth Medical Center - Wabasha | * | * | * | * | * | * | * | * | * | * | * | * | * |
| St James Medical Center: Mayo Health System | * | * | * | * | * | * | * | * | * | * | * | * | * |
| St Mary's Hospital: Mayo Clinic - Rochester | 813 | 2% | BETTER | 1289 | 1% | BETTER | 230 | 2% | BETTER | * | * | 100% | 99% |
| Swift County Benson Hospital | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Tyler Healthcare Center: Avera | * | * | * | * | * | * | * | * | * | * | * | * | * |
| United Hospital District - Blue Earth | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Waseca Medical Center: Mayo Health System | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Windom Area Hospital | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Winona Health Services | * | * | * | * | * | * | * | * | * | SAME | 0% | 95% | 955 |
| | | | | - 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | | | | | | | | | |
| | • | | | | | | | | | | | Δ | |





^{*} Sufficient data not available or procedure is not performed at hospital. For more detailed information, see appendices starting on page 203.

QUALITY OF CARE FOR MEDICAL COMPLICATIONS AND INFECTIONS

SECTION CONTENTS

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MEDICAL COMPLICATIONS IN THE HOSPITAL FOR ADULT PATIENTS

Certain complications can arise after surgery. These may be life threatening, ultimately resulting in death if not caught in time. These complications include conditions like acute renal failure, which is when the kidneys stop working properly. Other complications might be pneumonia or cardiac arrest. However, there are steps that hospitals can take to limit the number of complications.

The measures in this section show the rates of several complications. Use this information to see how well hospitals are doing to prevent various problems. Those hospitals with a lower rate on the three measures are doing a better job in their quality of care for medical complications.

Medical Complications: Death Rate From Failure to Identify and Treat a Serious Complication

What is the measure?

Patients may develop serious health conditions while they are in the hospital after surgery. These conditions can result in permanent disability and even death, if not treated quickly. This patient safety measure shows the rate of deaths from these surgery complications.

Why is this important?

When a patient dies this way, the death is called a failure to rescue. The serious health conditions after surgery included in the failure to rescue measure include:

- Acute renal failure (sudden kidney failure)
- Deep venous thrombosis (blood clot that forms in a vein deep in the body)
- Pneumonia
- Sepsis (blood infection)
- Shock and/or cardiac arrest (severe heart attack)
- Upper gastrointestinal bleeding (in the esophagus, stomach, and first part of the intestine)

When choosing a hospital, look for the hospital that has a **LOWER RATE.**

In 2003, about 128 patients died for every 1,000 patients at risk of developing these additional health problems in the hospital. Early detection of serious health conditions after surgery and their quick treatment may prevent a patient from dying.

Many hospitals have developed systems to detect patients in crisis and to respond immediately. Nursing staff need to be able to notice problems and accurately understand what they mean and respond with appropriate care.

MEASURE SOURCE: AHRQ Patient Safety Indicator (PSI 4: Death among surgical inpatients with serious treatable complications)

Medical Complications: Rate of Patients with Bed Sores

What is the measure?

A pressure ulcer is a skin wound that forms when patients stay in one position for too long without shifting their weight. This patient safety measure shows the percent of patients that develop pressure ulcers, also known as decubitus ulcers or bed sores, during their stay in the hospital.



Why is this important?

Constant pressure against the skin reduces the blood supply to that area and that skin dies. People with limited ability to move are at risk of developing bed sores while in the hospital. This often happens if you use a wheelchair or you are unable to get out of bed, even for a short period of time after surgery or an injury. People with thin skin, like skin that has lost muscle and fat under the skin, also can develop pressure ulcers if they repeatedly rub against something, such as a bed sheet, cast, or brace. The most common places for pressure ulcers are over boney areas like the elbow, heels, hips, ankles, shoulders, back, and the back of the head.

Pressure ulcers often cause infections that can lead to longer hospital stays, higher costs, and even death. In the U.S., 7 to 10% of patients will develop a pressure ulcer during their hospital stay. Those most at risk include older people, stroke victims, and people with dementia or head injuries. Seniors are at higher risk as they typically have thin skin. Health conditions that affect blood flow, such as diabetes, and poor diet increase the chance of pressure ulcers.

Care processes in hospitals can help prevent pressure ulcers. These include making sure that patients change position every 2 hours or more. Hospitals also use protection and padding to prevent rubbing against the skin, and maintain hydration, nutrition and hygiene.

MEASURE SOURCE: AHRQ Patient Safety Indicator (PSI 3: Pressure ulcer)

Medical Complications: Rate of Blood Clots in the Lung or Large Vein After an Operation

What is the measure?

This patient safety measure shows the percent of patients that develop two problems with blood clots after surgery: postoperative pulmonary embolism (PE) or deep vein thrombosis (DVT).

Why is this important?

Deep vein thrombosis (DVT) is a blood clot that forms in a vein deep in the body. Blood clots occur when blood thickens and clumps together. Most deep vein blood clots occur in the lower leg or thigh. A pulmonary embolism (PE) is a sudden plug in a lung artery, usually due to a blood clot that traveled to the lung

When choosing a hospital, look for the hospital that has a **LOWER RATE.**

from a vein in the leg. PE is a serious condition. It can damage the lungs and other organs in the body and cause death.

Both DVT and PE can happen after surgery, especially if patients are unable to leave their beds. People having hip or knee replacement surgeries are at greater risk of having problem blood clots. Remaining still during any type of surgery can lead to clots developing. The longer you are under general anesthesia, the greater your risk of serious clots. An estimated 8.96 out of 1000 patients developed PEs after surgeries in the U.S. in 2000.

Hospitals can help prevent problems with blood clots by providing blood thinning medications to people at risk of clots, by using methods to squeeze the legs to improve blood flow and by having patients move as soon as possible after surgery.

MEASURE SOURCE: AHRQ Patient Safety Indicator (PSI 12: Postoperative pulmonary embolism (PE) or deep vein thrombosis (DVT))

INFECTION PREVENTION

Hospitals can improve surgical care and reduce the risk of wound infection after surgery by providing the right medicines at the right time on the day of surgery.

There are also steps that you, as a patient, can take to make sure the surgery is as safe as possible. For example, your doctor or nurse can tell you how to wash with an antibiotic soap the day before surgery. You can also give your doctor or nurse a list of all your medications, including vitamins, herbal medicines, and over-the-counter medications. You should also tell your doctor or nurse about any allergies and bad reactions to anesthesia.

Sometimes patients get an infection after surgery, even if the hospital took steps to prevent it. Here are signs to look out for:

- The surgical wound is red, hot, and swollen.
- You have a fever of over 100 degrees after you go home.
- A smelly or yellow/green fluid is coming out of the wound.
- Your pain is increasing even though you are taking pain medication.

Call your doctor or local hospital immediately if you have any of these signs.

Infection Prevention: Central Line Infection (CLI) Prevention

What is the measure?

A Central Line Infection Prevention Bundle is a package of proven interventions that produce dramatic reductions in the incidence of bloodstream infections. These types of infections are common in Intensive Care Units where intravenous catheters are used.

This measure shows the percent of patients who were given all of the following evidence-based interventions:

- Use of hand hygiene by the person performing the procedure.
- Documentation that the person performing the procedure is using precautions, such as wearing a sterile gown and gloves and covering the patient's head and body with a large sterile drape.
- Documentation of the use of an antiseptic wipe(s).
- Documentation from the caregiver about why they chose the site or documentation about the clinical evidence supporting the caregiver's choice of the site.
- Daily assessment is performed regarding the continued necessity of catheter use.

Why is this important?

Infections are a common complication of care. They can increase the length and cost of a hospital stay. By following proven strategies for

infection prevention, infection rates can be reduced. This would save the patient from this potentially serious complication and the hospital the additional resources associated with that care. In this case, following the Central Line Infection Prevention Bundle would significantly reduce infections in this area.

Performance on this measure ranged from zero percent to 100 percent.

MEASURE SOURCE: Healthcare-Associated Infection Measure (Central Line Infection (CLI) Prevention Bundle Compliance)

hospital, look for the

hospital that has a

HIGHER RATE.

Infection Prevention: Ventilator Associated Pneumonia (VAP) Prevention

What is the measure?

A Ventilator Associated Pneumonia Bundle is a package of evidence-based interventions that produce dramatic reductions in the incidence of ventilator-associated pneumonia. These types of infections are common in Intensive Care Units where mechanical ventilators are used.

When choosing a

hospital, look for the

hospital that has a

HIGHER RATE.

This measure shows the percent of patients who are given every step in the package of evidence-based interventions. The steps are:

- Documentation that the head of the bed is elevated more than 30 degrees or greater.
- Documentation that appropriate medication is given to prevent ulcers (sores).
- Documentation of the use of appropriate mechanical equipment to prevent ulcers (sores). Documentation of reduced sedation or an assessment of why sedation is not reduced.
- Documentation that there is a daily assessment of whether the patient can be weaned of the need for the ventilator.

Why is this important?

Infections are a common complication of care. They can increase the length and cost of a hospital stay. By following proven strategies for infection prevention, infection rates can be reduced. This would save the patient from this potentially serious complication and the hospital the additional resources associated with that care. In this case, following the Ventilator Associated Pneumonia Prevention measure would significantly reduce infections in this area.

Performance on this measure ranged from 79 percent to 100 percent.

MEASURE SOURCE: Healthcare-Associated Infection Measure (Ventilator Associated Pneumonia (VAP) Prevention Bundle Compliance)

Infection Prevention: Surgery Patients Given an Antibiotic Within an Hour Before Surgery to Help Prevent Infection

What is the measure?

This measure shows the percent of surgical patients with prophylactic antibiotics, also known as preventative antibiotics, started within one hour before the surgical incision.

NOTE: Patients who got vancomycin or a fluoroquinolone for prophylactic antibiotics should have the antibiotics initiated within two hours prior to surgical incision. Due to the longer infusion time required for vancomycin or a fluoroquinolone, it is acceptable to start these antibiotics within two hours prior to incision time.

Why is this important?

Surgical wound infections can be prevented. Medical research shows that surgery patients who get antibiotics within the hour before their surgery are less likely to get wound infections. Getting an antibiotic earlier, or after surgery begins, is not as effective. Hospital staff should make sure surgery patients get antibiotics at the right time.

When choosing a hospital, look for the hospital that has a **HIGHER RATE.**

Performance on this measure ranged from 53 percent to 100 percent.

MEASURE SOURCE: Hospital Compare Measure (SCIP-Inf-1: Prophylactic antibiotic received within one hour prior to surgical incision)

Infection Prevention: Surgery Patients Given the Best Antibiotic to Help Prevent Infection

What is the measure?

This measure shows the percent of surgical patients who received the best prophylactic antibiotics, also known as preventive antibiotics, consistent with current guidelines for their surgical procedure. These guidelines are specific to each type of surgical procedure.

Why is this important?

Surgical wound infections can be prevented. Medical research has shown that certain antibiotics work better to prevent wound infections for certain types of surgery. Hospital staff should make sure patients get the antibiotic that works best for their type of surgery.

When choosing a hospital, look for the hospital that has a

HIGHER RATE.

Performance on this measure ranged from 91 percent to 100 percent.

MEASURE SOURCE: Hospital Compare Measure (SCIP-Inf-2: Prophylactic antibiotic selection for surgical patients)

Infection Prevention: Surgery Patients Whose Preventive Antibiotics Were Stopped at the Right Time

What is the measure?

This measure shows the percent of surgical patients whose prophylactic antibiotics were discontinued within 24 hours after surgery end time (within 48 hours for coronary artery bypass graft (CABG) or other cardiac surgery).

NOTE: The Society of Thoracic Surgeons (STS) Practice Guideline for Antibiotic Prophylaxis in Cardiac Surgery (2006) indicates that there is no reason to extend antibiotics beyond 48 hours for cardiac surgery and very explicitly states that antibiotics should not be extended beyond 48 hours even with tubes and drains in place for cardiac surgery.

Why is this important?

Antibiotics are often given to patients before surgery to prevent infection.

Taking these antibiotics for more than 24 hours after routine surgery is usually not necessary. Continuing the medication longer than necessary can increase the risk of side effects such as stomach aches

When choosing a hospital, look for the hospital that has a

HIGHER RATE.

and serious types of diarrhea. Also, when antibiotics are used for too long, patients can develop resistance to them and the antibiotics won't work as well.

Performance on this measure ranged from 59 percent to 100 percent.

MEASURE SOURCE: Hospital Compare Measure (SCIP-Inf-3: Prophylactic antibiotics discontinued within 24 hours after surgery end time)

Infection Prevention: All Heart Surgery Patients Whose Blood Sugar (Blood Glucose) is Kept Under Good Control in the Days Right After Surgery

What is the measure?

This measure shows the percent of cardiac surgery patients with controlled 6 A.M. blood glucose (≤ 200 mg/dL) on postoperative day one and postoperative day two with Surgery End Date being postoperative day zero.

Why is this important?

Even if heart surgery patients do not have diabetes, keeping their blood sugar under good control after surgery lowers the risk of infection and other problems. "Under good control" means their blood sugar should be 200 mg/dL or less when checked first thing in the morning.



Performance on this measure ranged from 50 percent to 97 percent.

MEASURE SOURCE: Hospital Compare Measure (SCIP-Inf-4: Cardiac surgery patients with controlled 6 a.m. postoperative blood glucose)

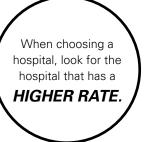
Infection Prevention: Surgery Patients Needing Hair Removed Before Surgery Using a Safer Method

What is the measure?

This measure shows the percent of surgery patients with appropriate surgical site hair removal. No hair removal, or hair removal with clippers or hair removal cream is considered appropriate. Shaving is considered inappropriate.

Why is this important?

Preparing a patient for surgery may include removing body hair from skin in the area where the surgery will be done. Medical research has shown that shaving with a razor can increase the risk of infection. It is safer to use electric clippers or hair removal cream.



Performance on this measure ranged from 77 percent to 100 percent.

MEASURE SOURCE: Hospital Compare Measure (SCIP-Inf-6: Surgery patients with appropriate hair removal)

Infection Prevention: Surgery Patients on Beta-Blocker Therapy Prior to Arrival Who Received a Beta-Blocker During the Perioperative Period

What is the measure?

This measure is used to assess the percent of surgery patients on beta-blocker therapy prior to arrival who received a beta-blocker during the perioperative period. The perioperative period is defined as 24 hours prior to surgical incision through discharge from the post-anesthesia care/recovery area.

Why is this important?

It is often standard procedure to stop patients' usual medications for awhile before and after their surgery. But if patients who have been taking beta blockers suddenly stop taking them, they can have heart problems such as a fast heart beat. For these patients, staving on beta blockers before and after surgery makes it less likely that they will have heart problems.

When choosing a hospital, look for the hospital that has a

HIGHER RATE.

Performance on this measure ranged from 52 percent to 100 percent.

MEASURE SOURCE: Hospital Compare Measure (SCIP-Card-2: Surgery patients on beta-blocker therapy prior to arrival who received a betablocker during the perioperative period)

Quality of Care for Medical Complications and Infections

| Viedical Complications and Infections When choosing a hospital, please check to ee if the higher or lower rate is better. | | ns From ure to tify and Serious lication | | nts with Sores | in th or Vein | d Clots e Lung Large After an ration |) Prevention | monia | tibiotic Within an Prevent Infection | Best Antibiotic | eventive t the Right Time | hose Blood Sugar iight After Surgery | lair Removed er Method | Blocker Therapy ved a Beta-Blocker Period | |
|---|--------------------|--|--------------------|-----------------------------------|--------------------|--|---|---|---|---|---|--|---|---|--|
| Risk Adjusted Rate: This takes the severity of each patient's illness into account. When Compared to Expected: This comparison is based on how the hospital's risk adjusted rate measures up to the expected rate of other similar hospitals around the country, identifying it as performing the SAME, BETTER, or WORSE. When selecting a hospital, look for one with at least a SAME rating and ideally a BETTER rating. HOSPITAL NAME | Risk Adjusted Rate | When Compared to Expected Rate | Risk Adjusted Rate | When Compared to Expected Rate | Risk Adjusted Rate | When Compared to Expected Rate | Central Line Infection (CLI) Prevention | Ventilator Associated Pneumonia (VAP) Prevention | Surgery Patients Given an Antibiotic Within an Hour Before Surgery to Help Prevent Infection | Surgery Patients Given the Best Antibiotic to Help Prevent Infection | Surgery Patients Whose Preventive Antibiotics Were Stopped at the Right Time | All Heart Surgery Patients Whose Blood Sugar is Kept Under Good Control Right After Surgery | is Kept Under Good Control Right After Surg Surgery Patients Needing Hair Removed Before Surgery Using a Safer Method | Surgery Patients on Beta-Blocker Therapy Prior to Arrival Who Received a Beta-Blocker During the Perioperative Period | |
| Overall Minnesota Average | | | • | | | | 87% | 96% | 86% | 94% | 94% | 87% | 96% | 87% | |
| Albert Lea Medical Center: Mayo Health System | * | * | 1% | SAME | 0% | BETTER | * | * | 98% | 100% | 98% | * | 100% | 96% | |
| Appleton Municipal Hospital and Nursing Home | * | * | * | * | * | * | | * | * | * | * | * | * | * | |
| Austin Medical Center: Mayo Health System | * | * | 0% | BETTER | 1% | SAME | * | * | 100% | 99% | 95% | * | 100% | 93% | |
| Avera Marshall Regional Medical Center - Marshall | * | * | 1% | SAME | 1% | SAME | * | * | 88% | 96% | 93% | * | * | * | |
| Cannon Falls Medical Center: Mayo Health System | * | * | 0% | SAME | 0% | SAME | * | * | * | * | * | * | * | * | |
| Chippewa County-Montevideo Hospital | * | * | 0% | SAME | 0% | SAME | * | * | * | * | * | * | * | * | |
| Fairmont Medical Center: Mayo Health System | * | * | 0% | BETTER | 1% | SAME | * | * | 94% | 98% | 97% | * | 100% | 100% | |
| Fairview Red Wing Hospital | 0% | SAME | 0% | BETTER | 1% | SAME | * | * | 99% | 100% | 95% | * | 100% | 100% | |
| Glencoe Regional Health Services | * | * | 0% | SAME | 0% | SAME | * | * | 91% | 91% | 96% | * | 100% | * | |
| Granite Falls Municipal Hospital and Manor | * | * | 0% | SAME | * | * | * | * | * | * | * | * | * | * | |
| Hendricks Community Hospital Association | * | * | * | * | * | * | * | * | * | * | * | * | * | * | |
| Holy Trinity Hospital: Graceville Health Center | * | * | * | * | * | * | * | * | * | * | * | * | * | * | |
| Hutchinson Community Hospital | * | * | 0% | BETTER | 1% | SAME | * | * | 91% | 97% | 97% | * | 100% | 97% | |
| | | | • | | | | | | | | | | | | |

Medical Complications

HIGHER

HIGHER

HIGHER

HIGHER

HIGHER

HIGHER

HIGHER

HIGHER

Infection Prevention

For more detailed information, see appendices starting on page 203.

^{*} Sufficient data not available

Quality of Care for Medical Complications and Infections

HOSPITAL

| When choosing a hospital, please check to ee if the higher or lower rate is better. | Treat | tify and a Serious olication | Bed | l Sores | Vein | Large After an eration |) Preventio | neumonia | ntibiotic Wit Prevent Inf | Best Antib | reventive at the Right | hose Blood Right After S | Needing Hair Remov sing a Safer Method | Beta-Blocker The Received a Beta-I ative Period |
|--|--------------------|------------------------------------|--------------------|-----------------------------------|--------------------|-----------------------------------|------------------------------|--|---|---|--|---|---|--|
| Risk Adjusted Rate: This takes the severity of each patient's illness into account. When Compared to Expected: This comparison is based on how the hospital's risk adjusted rate measures up to the expected rate of other similar hospitals around the country, identifying it as performing the SAME, BETTER, or WORSE. When selecting a hospital, look for one with at least a SAME rating and ideally a BETTER rating. | Risk Adjusted Rate | When Compared to Expected Rate | Risk Adjusted Rate | When Compared to Expected Rate | Risk Adjusted Rate | When Compared to Expected Rate | Central Line Infection (CLI) | Ventilator Associated Pnel (VAP) Prevention | Surgery Patients Given an Antibiotic Wit Hour Before Surgery to Help Prevent Inf | Surgery Patients Given the to Help Prevent Infection | Surgery Patients Whose P Antibiotics Were Stopped a | All Heart Surgery Patients Whose is Kept Under Good Control Right. | Surgery Patients Needing Before Surgery Using a Sa | Surgery Patients on Beta-Blocker The Prior to Arrival Who Received a Beta- During the Perioperative Period |
| HOSPITAL NAME | Ξ | ≥ 5 | : Z | ₽ 5 | = | to W | ပိ | ~ S | 요 포 | 장 요 | Su A | ₽ .s | | <u> </u> |
| Overall Minnesota Average | | | • | • • • | | | 87% | 96% | 86% | 94% | 94% | 87% | 96% | 87% |
| Immanuel-St Josephs: Mayo Health System - Mankato | 6% | SAME | 0% | BETTER | 1% | BETTER | 98% | 100% | 97% | 98% | 96% | * | 99% | 95% |
| Johnson Memorial Hospital - Dawson | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Lake City Medical Center: Mayo Health System | * | * | 0% | SAME | 0% | SAME | * | * | * | * | * | * | * | * |
| Madelia Community Hospital | * | * | 0% | SAME | * | * | * | * | * | * | * | * | * | * |
| Madison Hospital | * | * | 0% | SAME | * | * | * | * | * | * | * | * | * | * |
| Meeker County Memorial Hospital - Litchfield | * | * | 1% | SAME | 0% | SAME | * | * | * | * | * | * | * | * |
| | | | : | | | | | | | | | | | |

BETTER

SAME

78%

Blood Clots

in the Lung

Medical Complications

Patients with

Deaths From

Failure to

BETTER

| New Ulm Medical Center | * | * | : 0% | BETTER | 0% | BETTER | * | * | 98% | 100% | 95% | * | 100% | 100% | |
|------------------------------------|---|---|------|--------|----|--------|---|---|-----|------|-----|---|------|------|--|
| Northfield Hospital | * | * | 0% | SAME | 0% | SAME | * | * | 94% | 99% | 95% | * | 99% | 93% | |
| Olmsted Medical Center - Rochester | * | * | 0% | SAME | 0% | SAME | * | * | 92% | 99% | 97% | * | 100% | 100% | |
| Ortonville Area Health Services | * | * | 0% | SAME | 0% | SAME | * | * | * | * | * | * | * | * | |

BETTER: 0%

SAME



Infection Prevention

thin an fection

Methodist Hospital: Mayo Clinic - Rochester

Minnesota Valley Health Center - Le Sueur

Murray County Memorial Hospital - Slayton

93%

^{*} Sufficient data not available For more detailed information, see appendices starting on page 203.

Quality of Care for Medical Complications and Infections

| Medical Complications and Infections When choosing a hospital, please check to see if the higher or lower rate is better. | Fail Ident Treat a | ns From ure to tify and a Serious olication | | nts with Sores | in th or Vein | d Clots le Lung Large After an eration | Prevention | monia | tibiotic Within an Prevent Infection | Best Antibiotic | eventive t the Right Time | nose Blood Sugar ight After Surgery | lair Removed er Method | locker Therapy ed a Beta-Blocker riod |
|--|--------------------------|---|--------------------|-----------------------------------|---------------------|--|---|---|---|---|---|--|--|---|
| Risk Adjusted Rate: This takes the severity of each patient's illness into account. When Compared to Expected: This comparison is based on how the hospital's risk adjusted rate measures up to the expected rate of other similar hospitals around the country, identifying it as performing the SAME, BETTER, or WORSE. When selecting a hospital, look for one with at least a SAME rating and ideally a BETTER rating. | Risk Adjusted Rate | When Compared to Expected Rate | Risk Adjusted Rate | When Compared to Expected Rate | Risk Adjusted Rate | When Compared to Expected Rate | Central Line Infection (CLI) Prevention | Ventilator Associated Pneumonia (VAP) Prevention | Surgery Patients Given an Antibiotic Within an Hour Before Surgery to Help Prevent Infection | Surgery Patients Given the Best Antibiotic to Help Prevent Infection | Surgery Patients Whose Preventive Antibiotics Were Stopped at the Right Time | All Heart Surgery Patients Whose Blood Sugar is Kept Under Good Control Right After Surgery | Surgery Patients Needing Hair Removed Before Surgery Using a Safer Method | Surgery Patients on Beta-Blocker Therapy Prior to Arrival Who Received a Beta-Blocker During the Perioperative Period |
| HOSPITAL NAME Overall Minnesota Average | | | | | - | | 87% | 96% | 86% | 94% | 94% | 87% | 96% | 87% |
| Owatonna Hospital | * | * | 2% | SAME | 1% | SAME | * | * | 93% | 99% | 97% | * | 100% | 97% |
| Pipestone County Medical Center: Avera | * | * | 1% | SAME | 1% | SAME | * | * | 92% | 100% | 97% | * | 95% | * |
| Redwood Area Hospital - Redwood Falls | * | * | 0% | SAME | * | * | * | * | * | * | * | * | * | * |
| Renville County Hospital And Clinics - Olivia | * | * | 0% | SAME | * | * | * | * | * | * | * | * | * | * |
| Rice County District One Hospital - Faribault | * | * | 0% | BETTER | 0% | SAME | * | * | 90% | 98% | 91% | * | 100% | 98% |
| Rice Memorial Hospital - Willmar | 12% | SAME | 0% | BETTER | 0% | SAME | 0% | 88% | 84% | 98% | 95% | * | 100% | 96% |
| River's Edge Hospital & Clinic - St. Peter | * | * | 0% | SAME | * | * | * | * | * | * | * | * | * | * |
| Sanford Canby Medical Center | * | * | 0% | SAME | 0% | SAME | * | * | * | * | * | * | * | * |
| Sanford Hospital Luverne | * | * | 0% | SAME | 0% | SAME | * | * | * | * | * | * | * | * |
| Sanford Jackson Medical Center | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Sanford Regional Hospital Worthington | * | * | 0% | SAME | 0% | SAME | * | * | 90% | 98% | 93% | * | 99% | * |
| Sanford Tracy Medical Center | * | * | 0% | SAME | * | * | * | * | * | * | * | * | * | * |
| Sanford Westbrook Medical Center | * | * | * | * | * | * | * | * | * | * | * | * | * | * |

Medical Complications

HIGHER

HIGHER

HIGHER

HIGHER

HIGHER

HIGHER

HIGHER

Infection Prevention

HIGHER

For more detailed information, see appendices starting on page 203.

^{*} Sufficient data not available

Quality of Care for Medical Complications and Infections

When choosing a hospital, please check to see if the higher or lower rate is better.

Risk Adjusted Rate: This takes the severity of each patient's illness into account.

When Compared to Expected: This comparison is based on how the hospital's risk adjusted rate measures up to the expected rate of other similar hospitals around the country, identifying it as performing the SAME, BETTER, or WORSE.

| ospital's risk adjusted rate measures up to the expected rate of other imilar hospitals around the country, identifying it as performing the AME, BETTER, or WORSE. When selecting a hospital, look for one with at least a SAME rating and deally a BETTER rating. | Risk Adjusted Rate | When Compared to Expected Rate | Risk Adjusted Rate | When Compared to Expected Rate | Risk Adjusted Rate | When Compared to Expected Rate | Central Line Infecti | Ventilator Associate (VAP) Prevention | Surgery Patients Giv Hour Before Surgery | Surgery Patients Gi to Help Prevent Infe | Surgery Patients W Antibiotics Were St | All Heart Surgery Pat is Kept Under Good C | Surgery Patients Ne Before Surgery Usir | Surgery Patients on Prior to Arrival Who During the Perioper |
|--|--------------------|-----------------------------------|--------------------|-----------------------------------|--------------------|-----------------------------------|----------------------|--|---|---|---|---|--|--|
| HOSPITAL NAME | Ris | ¥ e | | 호 | ž. | W to | eg | Ve (V | 중 운 | Su to | Su | II si | Su Be | S E B |
| Overall Minnesota Average | | | • | | | | 87% | 96% | 86% | 94% | 94% | 87% | 96% | 87% |
| Sibley Medical Center - Arlington | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Sleepy Eye Medical Center | * | * | 0% | SAME | 0% | SAME | * | * | * | * | * | * | * | * |
| Springfield Medical Center: Mayo Health System | * | * | 4% | SAME | * | * | * | * | * | * | * | * | * | * |
| St Elizabeth Medical Center - Wabasha | * | * | 0% | SAME | 0% | SAME | * | * | 92% | 100% | 88% | * | 100% | * |
| St James Medical Center: Mayo Health System | * | * | 0% | SAME | * | * | * | * | * | * | * | * | * | * |
| St Mary's Hospital: Mayo Clinic - Rochester | 10% | BETTER | 0% | BETTER | 1% | BETTER | 94% | 98% | 96% | 97% | 95% | 90% | 99% | 95% |
| Swift County Benson Hospital | * | * | 0% | SAME | 0% | SAME | * | * | * | * | * | * | * | * |
| Tyler Healthcare Center: Avera | * | * | 3% | SAME | * | * | * | * | * | * | * | * | * | * |
| United Hospital District - Blue Earth | * | * | 0% | SAME | 0% | SAME | * | * | 88% | 96% | 88% | * | 100% | * |
| Waseca Medical Center: Mayo Health System | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Windom Area Hospital | * | * | 0% | SAME | * | * | * | * | * | * | * | * | * | * |
| Winona Health Services | * | * | 0% | BETTER | 1% | SAME | * | 88% | 98% | 98% | 93% | * | 100% | 100% |
| | | | | | | | | | | | | | | |

Medical Complications

Patients with

Bed Sores

Blood Clots

in the Lung

or Large

Vein After an

Operation

Line Infection (CLI) Prevention

or Associated Pneumonia

Deaths From

Failure to

Identify and

Treat a Serious

Complication

* Sufficient data not available For more detailed information, see appendices starting on page 203. HIGHER

Infection Prevention

Patients Whose Preventive cs Were Stopped at the Right Time

Patients Given an Antibiotic Within an ore Surgery to Help Prevent Infection

Patients Given the Best Antibiotic Prevent Infection

Surgery Patients Whose Blood Sugar nder Good Control Right After Surgery

Patients Needing Hair Removed urgery Using a Safer Method

HIGHER

HIGHER

Patients on Beta-Blocker Therapy Arrival Who Received a Beta-Blocker he Perioperative Period

HIGHER

HIGHER

HIGHER

HIGHER

HIGHER

QUALITY OF CARE FOR OTHER CONDITIONS **SECTION CONTENTS**

| Quality | of | Pneum | onia | Care |
|---------|----|-------|------|------|
| | | | | |

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| | Patients Given Advice or Counseling About Quitting Smoking While in the Hospital | 78 |
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PNEUMONIA CARE

Pneumonia is a serious lung infection that causes difficulty breathing, fever, cough and fatigue. Pneumonia is caused by a viral or bacterial infection that fills your lungs with mucus. This lowers the oxygen level in your blood. Symptoms of pneumonia can include the following:

- Difficulty breathing
- "Wet" cough. Your mucus may look green or bloody.
- Chest pain
- Fever and chills
- Fatigue

These measures show some of the recommended treatments for pneumonia.

The Best Care for Pneumonia Patients

What is the measure?

This measure shows the percent of patients receiving ALL of the appropriate care that they should have received based on their clinical condition. For pneumonia patients

this includes the remaining measures in this section:

- Patients Assessed and Given Pneumonia Vaccination
- Blood Test Given to Patient Prior to Receiving Antibiotics
- Patients Given Advice or Counseling About Quitting Smoking While in the Hospital
- Patients Given Initial Antibiotic(s) Within Six Hours After Getting to the Hospital
- Patients Given the Most Appropriate Initial Antibiotic(s)
- Patients Assessed and Given Influenza Vaccination

The measure takes patient individuality into consideration, looking at one patient and his/her episode of care at a time, as it relates to pneumonia.

When choosing a hospital, look for the hospital that has a

HIGHER RATE.

Why is this important?

This measure is a composite, or all-or-none, quality of care measure called an appropriate care measure (ACM). These types of measures are patient-focused measures that provide a way of looking at whether a patient received ALL of the "appropriate" or "right care" (recommended treatments) that he or she should have received, based on his or her clinical condition. Each patient is unique and may not be eligible for every type of care for a condition. The measure will take this into consideration.

Performance on this measure ranged from 33 percent to 100 percent.

MEASURE SOURCE: Pneumonia (PN) Appropriate Care Measure (PN-ACM)

Pneumonia: Patients Assessed and Given Pneumonia Vaccination

What is the measure?

This measure shows the percent of pneumonia patients who were assessed and given the pneumonia (also known as pneumococcal) vaccination. This includes patients age 65 and older who were screened and given the pneumococcal vaccination prior to being released from the hospital, if indicated.

When choosing a hospital, look for the hospital that has a

HIGHER RATE.

Why is this important?

The pneumococcal vaccine may help you prevent, or lower the risk of complications of pneumonia caused by bacteria. It may also help you prevent future infections. Patients with pneumonia should be asked if they have been vaccinated recently for pneumonia and, if not, should be given the vaccine.

Performance on this measure ranged from nine percent to 100 percent.

MEASURE SOURCE: Hospital Compare Measure

(PN-2: Pneumococcal vaccination)

Pneumonia: Blood Test Given to Patient Prior to Receiving Antibiotics

What is the measure?

This measure shows the percent of pneumonia patients that had a blood culture or blood test done in the Emergency Department before getting their first dose of hospital antibiotics. This

measure focuses on treatment provided to Emergency Department patients prior to being admitted to the hospital.

Why is this important?

Different types of bacteria can cause pneumonia. A blood culture is a test that can help your health care provider identify which bacteria may have caused

your pneumonia, and which antibiotic should be prescribed. A blood culture is not always needed, but for patients who are first seen in the hospital emergency department, it is important for the accuracy of the test that blood culture be conducted before any antibiotics are started. It is also important to start antibiotics as soon as possible.

Performance on this measure ranged from 73 percent to 100 percent.

MEASURE SOURCE: Hospital Compare Measure (PN-3b: Blood cultures performed in the emergency department prior to initial antibiotic received in hospital)

Pneumonia: Patients Given Advice or Counseling About Quitting Smoking While in the Hospital

What is the measure?

This measure shows the percent of pneumonia patients with a history of smoking cigarettes who were given advice or counseling about stopping smoking while in the hospital. For purposes of this measure, a smoker is someone who has smoked cigarettes anytime during the year before being in the hospital.

Why is this important?

Smoking damages your lungs and can make it hard to breathe. Smoking increases your chances of getting pneumonia or other chronic lung diseases like emphysema and bronchitis. Smok-

ing is also linked to lung cancer, heart disease, and stroke, and can cause premature death. It is important for you to get information to help you quit smoking before you leave the hospital. Quitting may reduce your chance of getting pneumonia again.

When choosing a hospital, look for the hospital that has a **HIGHER RATE.**

Performance on this measure ranged from 67 percent to 100 percent.

MEASURE SOURCE: Hospital Compare Measure (PN-4: Adult smoking cessation advice/counseling)

When choosing a hospital, look for the

hospital that has a

HIGHER RATE.

Pneumonia: Patients Given Initial Antibiotic(s) Within Six Hours After Getting to the Hospital

What is the measure?

This measure shows the percent of pneumonia patients who received their first dose of antibiotics within six hours of arrival at the hospital. Patients who get pneumonia during their stay at the hospital are not counted in this measure.

Why is this important?

Antibiotics are used to treat adults with pneumonia caused by bacteria. Early treatment with antibiotics can cure bacterial pneumonia and reduce the possibility of complications. When choosing a hospital, look for the hospital that has a **HIGHER RATE.**

Performance on this measure ranged from 85 percent to 100 percent.

MEASURE SOURCE: Hospital Compare Measure

(PN-5c: Initial antibiotic received within 6 hours of hospital arrival)

Pneumonia: Patients Given the Most Appropriate Initial Antibiotic(s)

What is the measure?

This measure shows the percent of immunocompetent patients with Community-Acquired Pneumonia who got an initial antibiotic regimen during the first 24 hours that was consistent with current guidelines.

When choosing a hospital, look for the hospital that has a **HIGHER RATE.**

Why is this important?

Pneumonia is a lung infection that is usually caused by bacteria or a virus. If pneumonia is caused by bacteria, hospitals will treat the infection with antibiotics. Different bacteria are treated with different antibiotics. To learn about how hospitals use a blood test to choose the most effective treatment for pneumonia patients, refer to the Process of Care measure named 'Blood Test Given to Patient Prior to Receiving Antibiotics'.

Performance on this measure ranged from 73 percent to 100 percent.

MEASURE SOURCE: Hospital Compare Measure
(PN-6: Initial antibiotic selection for community-acquired pneumonia
(CAP) in immunocompetent patients)

Pneumonia: Patients Assessed and Given Influenza Vaccination

What is the measure?

This measure shows the percent of pneumonia patients age 50 years and older, hospitalized during October, November, December, January, February, or March who were screened for influenza vaccine status and were vaccinated prior to being released from the hospital, if this is the right treatment for the patient. The influenza vaccine is commonly known as the flu shot.

Why is this important?

Influenza vaccinations, or flu shots, reduce the risk of influenza, a serious and sometimes deadly lung infection that can spread quickly in a community or facility. Hospitals should check to make sure that pneumonia patients, particularly those who are age 50 or older, get a flu shot during flu season to protect them from another lung infection and to help prevent the spread of influenza.

When choosing a hospital, look for the hospital that has a HIGHER RATE.

Since a flu shot is effective for just one flu season, the period of time used to calculate this rate is the flu season (from approximately November through March).

Performance on this measure ranged from 12 percent to 100 percent.

MEASURE SOURCE: Hospital Compare Measure

(PN-7: Influenza vaccination)

HIP FRACTURE TREATMENT

A hip fracture, also known as a broken hip, more commonly occurs in older adults. Usually hip fractures are caused by a fall or some type of blow to the side of the hip. Other medical conditions, like osteoporosis, can make bones weaker and more likely to break. In fact, more than 300,000 hip fractures annually are due to osteoporosis.

Treatments for hip fractures, like surgery, have certain risks associated with them. Health problems from hip fracture surgery may include risk for pneumonia or a blood clot in the leg that may travel to a lung and cause damage. If not recognized and effectively treated, these can lead to life-threatening problems. Some surgery complications, including death, can be prevented through better care processes at the hospital.

Use this measure to see how well a hospital is doing at preventing deaths after hip fracture surgery.

Hip Fracture Surgery: Death Rate for Patients with a Broken Hip

What is the measure?

This measure shows the percent of patients who died in the hospital, who came in with a broken hip (hip fracture).

When choosing a hospital, look for the hospital that has a

LOWER RATE.

Why is this important?

Among older people, hip fractures are a common serious injury. If you already

have other health problems, you are more likely to have complications after surgery to repair a cracked or broken hip bone. To decrease the risks, surgery may be delayed a couple of days to treat other medical problems, such as heart or lung conditions.

Health problems from hip fracture surgery may include risk for pneumonia or a blood clot in the leg that may travel to a lung and cause damage. If not recognized and effectively treated, these can lead to life-threatening problems. In the U.S., 3.1% of patients having hip fracture surgery will die in the hospital as a result of the surgery. Some surgery complications, including death, can be prevented through better care processes at the hospital.

MEASURE SOURCE: AHRQ Quality Indicator (IQI 19: Hip fracture mortality rate)

CHILDBIRTH

Childbirth can sometimes lead to tears in the perineum. This is the area between a woman's vagina and anus. A more serious tear is referred to as obstetric trauma. However, these tears are often preventable. This is true for births where medical instruments, like forceps, are used. These tears can also occur when no medical instruments are used to deliver the baby. Better quality of care for childbirth is associated with a lower number of obstetric tears.

When planning for the delivery of your baby, discuss this quality measurement data with your doctor to see how to get the best care during the birth of your child. You can use the measures in this section to see how well a hospital is doing with its quality of care during childbirth.

Childbirth: Rate of Obstetric Tearing – Vaginal Delivery WITH Medical Instruments

What is the measure?

This measure shows the percent of women who suffer serious vaginal tears while giving birth, when a health care provider was helping to deliver the baby using a forceps or other medical instrument.

Why is this important?

During vaginal childbirth, women can tear the skin and muscles between the vagina and anus, the "perineum." Small tears can heal well on their own or may require stitches. Serious tears require surgery to repair and may take several months to heal. These serious tears are

When choosing a hospital, look for the hospital that has a

LOWER RATE.

referred to as obstetric traumas. At least 4 percent of women who deliver vaginally experience a serious tear in their perineum. Tears are more common in women having their first vaginal birth.

Serious tears can happen even when medical instruments are not used or when an attempted vaginal delivery ends with cesarean-section. However, mothers who have their babies delivered vaginally with the assistance of instruments usually have higher rates of serious tears. These tears are often preventable, and the percentage of deliveries involving serious tears is considered an indicator of quality of care during childbirth.

MEASURE SOURCE: AHRQ Quality Indicators (PSI 18: Obstetric trauma – vaginal delivery with instrument)

Childbirth: Rate of Obstetric Tearing – Vaginal Delivery WITHOUT Medical Instruments

What is the measure?

This measure shows the percent of women who suffer serious vaginal tears while giving birth where no forceps or other medical instruments were used to assist with delivering a baby. When choosing a hospital, look for the hospital that has a **LOWER RATE**.

Why is this important?

During vaginal childbirth, women can tear the skin and muscles between the vagina and anus, the "perineum." Small tears can heal well on their own or may require stitches. Serious tears require surgery to repair and may take several months to heal. These serious tears are referred to as obstetric traumas. At least 4 percent of women who deliver vaginally experience a serious tear in their perineum. Tears are more common in women having their first vaginal birth.

Serious tears can happen even when medical instruments are not used or when an attempted vaginal delivery ends with cesarean-section. These tears are often preventable, and the percentage of deliveries involving serious tears is considered an indicator of quality of care during childbirth.

MEASURE SOURCE: AHRQ Quality Indicators (PSI 19: Obstetric trauma – vaginal delivery without instrument)

When choosing a hospital, please check to see if the higher or lower rate is better.

| Risk Adjusted Rate: This takes the severity of each patient's illness into | | _ | ss | <u>e</u> | _ | (s) | | | oken inp | Medicai | Instruments | Medicai | instruments |
|---|---|--|---|--|---|--|--|--------------------|-----------------------------------|---------------|-----------------------------------|---------------|-----------------------------------|
| account. When Compared to Expected: This comparison is based on how the hospital's risk adjusted rate, or observed rate where applicable, measures up to the expected rate of other similar hospitals around the country, identifying it as performing the SAME, BETTER, or WORSE. When selecting a hospital, look for one with at least a SAME rating and ideally a BETTER rating. | The Best Care for Pneumonia Patients | Patients Assessed and Given Pneumonia Vaccination | Blood Test Given to Patient Prior to Receiving Antibiotics | Patients Given Advice or Counseling About Quitting Smoking While in the Hospital | Patients Given Initial Antibiotic(s) Within 6 Hours After Getting to the Hospital | Patients Given the Most Appropriate Initial Antibiotic(s) | Patients Assessed and Given Influenza Vaccination | Risk Adjusted Rate | When Compared to Expected Rate | Observed Rate | When Compared to Expected Rate | Observed Rate | When Compared to Expected Rate |
| HOSPITAL NAME | The | Pat Pne | Blo Pri | Pat Cou Sm | Pat Ant Afte | Pat App | Pat Giv | Ris | to E | Sign (| W to E | ops | W to E |
| Overall Minnesota Average | 85% | 83% | 91% | 84% | 93% | 87% | 83% | | | | | | |
| Albert Lea Medical Center: Mayo Health System | 91% | 98% | 100% | * | 96% | 89% | 98% | 0% | SAME | * | * | 2% | SAME |
| Appleton Municipal Hospital and Nursing Home | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Austin Medical Center: Mayo Health System | 93% | 98% | 99% | 97% | 97% | 94% | 97% | 2% | SAME | * | * | 1% | BETTER |
| Avera Marshall Regional Medical Center - Marshall | * | * | * | * | 100% | * | * | * | * | 24% | SAME | 4% | SAME |
| Cannon Falls Medical Center: Mayo Health System | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Chippewa County-Montevideo Hospital | 39% | * | * | * | * | * | * | * | * | * | * | 2% | SAME |
| Fairmont Medical Center: Mayo Health System | 98% | 100% | 100% | 93% | 100% | 98% | 99% | 4% | SAME | * | * | 1% | SAME |
| Fairview Red Wing Hospital | 93% | 96% | 98% | * | 97% | 98% | 92% | 0% | BETTER | * | * | 2% | SAME |
| Glencoe Regional Health Services | * | * | * | * | * | * | * | * | * | * | * | 5% | SAME |
| Granite Falls Municipal Hospital and Manor | 64% | 84% | * | * | 91% | * | 85% | * | * | * | * | * | * |
| Hendricks Community Hospital Association | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Holy Trinity Hospital: Graceville Health Center | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Hutchinson Community Hospital | 84% | 93% | 96% | * | 100% | 88% | 100% | 6% | SAME | 17% | SAME | 3% | SAME |

HIGHER

HIGHER

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is better

HIGHER

is better

Pneumonia Care

Hip Fracture

Death Rate for

Patients With a

Broken Hip

Childbirth

Medical Instruments | Medical Instruments

Rate of Obstetric

Tearing Vaginal

Delivery WITHOUT

Rate of Obstetric

Tearing Vaginal

Delivery WITH

For more detailed information, see appendices starting on page 203.

HIGHER

HIGHER

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^{*} Sufficient data not available

When choosing a hospital, please check to see if the higher or lower rate is better.

| se if the higher of lower rate is better. | | | | | | ~ | | | | Medicai | ınsı umenis | Meulcal | ilisti ullielit |
|--|---|--|---|--|---|--|--|--------------------|-----------------------------------|---------------|-----------------------------------|------------------|-----------------------------------|
| Risk Adjusted Rate: This takes the severity of each patient's illness into account. When Compared to Expected: This comparison is based on how the hospital's risk adjusted rate, or observed rate where applicable, measures up to the expected rate of other similar hospitals around the country, identifying it as performing the SAME, BETTER, or WORSE. When selecting a hospital, look for one with at least a SAME rating and ideally a BETTER rating. | The Best Care for Pneumonia Patients | Patients Assessed and Given Pneumonia Vaccination | Blood Test Given to Patient Prior to Receiving Antibiotics | Patients Given Advice or Counseling About Quitting Smoking While in the Hospital | Patients Given Initial Antibiotic(s) Within 6 Hours After Getting to the Hospital | Patients Given the Most Appropriate Initial Antibiotic(s) | Patients Assessed and Given Influenza Vaccination | Risk Adjusted Rate | When Compared to Expected Rate | Observed Rate | When Compared to Expected Rate | Observed Rate | When Compared to Expected Rate |
| HOSPITAL NAME | The | Pati Pne | Blo Pric | Pati Cou Smc | Pati Anti Afte | Pati App | Pat Give | Rist | Whe to E | Obs | Whe to E | Sqo | Whe to E |
| Overall Minnesota Average | 85% | 83% | 91% | 84% | 93% | 87% | 83% | | | | | 0 0 0 0 | |
| Immanuel-St Josephs: Mayo Health System - Mankato | 85% | 92% | 93% | 100% | 89% | 90% | 96% | 4% | SAME | 8% | SAME | 2% | SAME |
| Johnson Memorial Hospital - Dawson | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Lake City Medical Center: Mayo Health System | * | * | * | * | * | * | * | * | * | * | * | 8% | SAME |
| Madelia Community Hospital | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Madison Hospital | 36% | * | * | * | * | * | * | * | * | * | * | * | * |
| Meeker County Memorial Hospital - Litchfield | * | * | * | * | * | * | * | * | * | * | * | 1% | SAME |
| Methodist Hospital: Mayo Clinic - Rochester | 92% | 93% | * | * | * | * | 62% | * | * | 18% | SAME | 1% | BETTER |
| Minnesota Valley Health Center - Le Sueur | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Murray County Memorial Hospital - Slayton | * | * | * | * | * | * | * | * | * | * | * | * | * |
| New Ulm Medical Center | 95% | 98% | 98% | * | 98% | 97% | 100% | 3% | SAME | 17% | SAME | 4% | SAME |
| Northfield Hospital | 92% | 92% | 100% | * | 98% | 100% | 93% | 0% | SAME | 0% | BETTER | 3% | SAME |
| Olmsted Medical Center - Rochester | 62% | 85% | 84% | * | 88% | 81% | * | * | * | 4% | BETTER | 2% | SAME |
| Ortonville Area Health Services | * | * | * | * | * | * | * | * | * | * | * | 0% | BETTER |

Pneumonia Care

Hip Fracture

Death Rate for

Patients With a

Broken Hip

Childbirth

Rate of Obstetric

Tearing Vaginal

Delivery WITHOUT

Medical Instruments

Rate of Obstetric

Tearing Vaginal

Delivery WITH

Medical Instruments



^{*} Sufficient data not available

For more detailed information, see appendices starting on page 203.

When choosing a hospital, please check to see if the higher or lower rate is better.

| Risk Adjusted Rate: This takes the severity of each patient's illness into | | _ | SS | <u>.</u> | _ | (S) | | | onon mp | Meulcai i | iisti uiiieiits | : Meulcal I | instruments |
|---|---|--|---|--|---|--|--|--------------------|-----------------------------------|---------------|-----------------------------------|----------------|-----------------------------------|
| account. When Compared to Expected: This comparison is based on how the hospital's risk adjusted rate, or observed rate where applicable, measures up to the expected rate of other similar hospitals around the country, identifying it as performing the SAME, BETTER, or WORSE. When selecting a hospital, look for one with at least a SAME rating and ideally a BETTER rating. | The Best Care for Pneumonia Patients | Patients Assessed and Given Pneumonia Vaccination | Blood Test Given to Patient Prior to Receiving Antibiotics | Patients Given Advice or Counseling About Quitting Smoking While in the Hospital | Patients Given Initial Antibiotic(s) Within 6 Hours After Getting to the Hospital | Patients Given the Most Appropriate Initial Antibiotic(s) | Patients Assessed and Given Influenza Vaccination | Risk Adjusted Rate | When Compared to Expected Rate | Observed Rate | When Compared to Expected Rate | Observed Rate | When Compared to Expected Rate |
| HOSPITAL NAME | 투문 | | | | P ₂ An Af | P ₂ | | <u>=</u> | <u>×</u> t | 8 | <u>×</u> 5 | : 5 | |
| Overall Minnesota Average | 85% | 83% | 91% | 84% | 93% | 87% | 83% | | | | | | |
| Owatonna Hospital | 88% | 98% | * | * | 93% | 93% | 98% | 0% | SAME | 21% | SAME | 4% | SAME |
| Pipestone County Medical Center: Avera | * | * | * | * | * | * | * | * | * | * | * | 4% | SAME |
| Redwood Area Hospital - Redwood Falls | 89% | * | * | * | * | * | * | * | * | * | * | 0% | BETTER |
| Renville County Hospital And Clinics - Olivia | 56% | * | * | * | * | * | * | * | * | * | * | * | * |
| Rice County District One Hospital - Faribault | 86% | 95% | 95% | * | 100% | 83% | 97% | 3% | SAME | 5% | BETTER | 2% | SAME |
| Rice Memorial Hospital - Willmar | 94% | 97% | 99% | * | 99% | 95% | 96% | 9% | WORSE | 26% | SAME | 2% | SAME |
| River's Edge Hospital & Clinic - St. Peter | 89% | 94% | 97% | * | 100% | 96% | 88% | * | * | * | * | * | * |
| Sanford Canby Medical Center | 81% | 80% | * | * | * | * | * | * | * | * | * | 10% | SAME |
| Sanford Hospital Luverne | 86% | 94% | * | * | 91% | * | 97% | * | * | * | * | 4% | SAME |
| Sanford Jackson Medical Center | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Sanford Regional Hospital Worthington | 76% | 84% | * | * | 96% | * | * | * | * | * | * | 2% | SAME |
| Sanford Tracy Medical Center | 88% | * | * | * | * | * | * | * | * | * | * | * | * |
| Sanford Westbrook Medical Center | * | * | * | * | * | * | * | * | * | * | * | * | * |

HIGHER

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HIGHER is better HIGHER

is better

Pneumonia Care

Hip Fracture

Death Rate for

Patients With a

Broken Hip

Childbirth

Medical Instruments: Medical Instruments

Rate of Obstetric

Tearing Vaginal

Delivery WITHOUT

Rate of Obstetric

Tearing Vaginal

Delivery WITH



For more detailed information, see appendices starting on page 203.

HIGHER

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HIGHER

When choosing a hospital, please check to see if the higher or lower rate is better.

| ce if the higher of lower rate is better. | | | | _ | | ⊗ | | | | Meulcai II | isti uillellts | Medicali | ilisti ullielits |
|--|---|--|---|--|---|--|--|--------------------|-----------------------------------|---------------|-----------------------------------|---------------|-----------------------------------|
| Risk Adjusted Rate: This takes the severity of each patient's illness into account. When Compared to Expected: This comparison is based on how the hospital's risk adjusted rate, or observed rate where applicable, measures up to the expected rate of other similar hospitals around the country, identifying it as performing the SAME, BETTER, or WORSE. When selecting a hospital, look for one with at least a SAME rating and ideally a BETTER rating. | The Best Care for Pneumonia Patients | Patients Assessed and Given Pneumonia Vaccination | Blood Test Given to Patient Prior to Receiving Antibiotics | Patients Given Advice or Counseling About Quitting Smoking While in the Hospital | Patients Given Initial Antibiotic(s) Within 6 Hours After Getting to the Hospital | Patients Given the Most Appropriate Initial Antibiotic(s) | Patients Assessed and Given Influenza Vaccination | Risk Adjusted Rate | When Compared to Expected Rate | Observed Rate | When Compared to Expected Rate | Observed Rate | When Compared to Expected Rate |
| HOSPITAL NAME | The | Pati Pne | Bloc Pric | Pati Cou Smc | Pati Anti Afte | Pati App | Pati Give | Risk | Whe to E | Obs | Whe to E | obs | Whe to E |
| Overall Minnesota Average | 85% | 83% | 91% | 84% | 93% | 87% | 83% | | | | | | |
| Sibley Medical Center - Arlington | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Sleepy Eye Medical Center | 55% | * | * | * | * | * | * | * | * | * | * | * | * |
| Springfield Medical Center: Mayo Health System | 79% | 81% | * | * | * | * | * | * | * | * | * | 0% | BETTER |
| St Elizabeth Medical Center - Wabasha | * | * | * | * | * | * | * | * | * | * | * | 0% | BETTER |
| St James Medical Center: Mayo Health System | * | * | * | * | * | * | * | * | * | * | * | * | * |
| St Mary's Hospital: Mayo Clinic - Rochester | 83% | 91% | 84% | 97% | 90% | 91% | 67% | 2% | BETTER | * | * | * | * |
| Swift County Benson Hospital | 47% | 61% | * | * | 93% | * | * | * | * | * | * | * | * |
| Tyler Healthcare Center: Avera | * | * | * | * | * | * | * | * | * | * | * | * | * |
| United Hospital District - Blue Earth | 93% | 95% | 96% | * | 100% | * | 92% | * | * | * | * | * | * |
| Waseca Medical Center: Mayo Health System | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Windom Area Hospital | * | * | * | * | * | * | * | * | * | * | * | 4% | SAME |
| Winona Health Services | 92% | 100% | 97% | 100% | 99% | 86% | 100% | * | * | 22% | SAME | 5% | SAME |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |

Pneumonia Care

HIGHER

HIGHER

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HIGHER

Hip Fracture

Death Rate for

Patients With a

Broken Hip

Childbirth

Medical Instruments | Medical Instruments

Rate of Obstetric

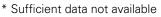
Tearing Vaginal

Delivery WITHOUT

Rate of Obstetric

Tearing Vaginal

Delivery WITH



For more detailed information, see appendices starting on page 203.

HIGHER is better



| GUIDE TO UNDERSTANDING THE DETAILED MEASURE RESULTS DATA 89 |
|---|
| QUALITY OF CARE FOR CHRONIC CONDITIONS MEASURE RESULTS DATA |
| THE BEST CARE FOR |
| Adults with Diabetes90 |
| Adults with Vascular Disease |
| Adults with High Blood Pressure |
| Children and Adults with Asthma |
| QUALITY OF CARE FOR ACUTE CONDITIONS MEASURE RESULTS DATA |
| THE BEST CARE FOR |
| Children with a Cold (Upper Respiratory Infection) |
| Children with a Sore Throat (Pharyngitis) |
| Adults with Bronchitis |
| QUALITY OF PREVENTIVE CARE MEASURE RESULTS DATA |
| THE BEST CARE TO |
| Help Prevent Breast Cancer |
| Help Prevent Cervical Cancer |
| Help Prevent Colorectal Cancer |
| Help Prevent Cancer |
| Detect Chlamydia |
| Provide Childhood Immunizations |
| |

The following section provides more information about the measures outlined in this report. Additional data elements are included in the following detailed tables; these elements vary depending on the measure and the data source. The methods section provides more information on the data source and calculation for the various measures.

GUIDE TO UNDERSTANDING THE DETAILED MEASURE RESULTS DATA

Physician Clinic Name:

Reports the physician clinic name alphabetically under the city in which it is located.

Medical Group Name:

Reports the medical group of which the clinic is a part. A medical group may have one or more clinics.

Risk Adjusted Rate:

Reports the physician clinic rate adjusted to the average statewide payer mix. The risk adjusted rate accounts for differences in the physician clinic's patient population beyond the provider's control. This adjustment is based on insurance payer type. The three payer categories include Medicare, commercial, and MN health care programs/uninsured.

Confidence Interval of Risk Adjusted Rate:

Reports the margin of error for the risk adjusted rate. Confidence intervals are a range of values which demonstrate the degree of certainty associated with the reported rate. This range takes into account potential variance in the rate if different patients were included in the sample. 95-percent-asymmetrical confidence intervals are calculated for each measure for each medical group. Asymmetrical confidence intervals are used to avoid confidence interval lower-bound values less than zero and upper bound values greater than one hundred. For the calculation of risk adjusted confidence intervals, a weighted average of the variance for the payer categories was used.* Large differences between individual physician clinics' rates may be significant and small differences are usually not significant.

Distribution of Patient Population or Medical Group Distribution of Patient Population: Medicare/Commercial/MN Health Care Programs and uninsured for Optimal Diabetes and Optimal Vascular Care.

Reports the patient distribution for each physician clinic or medical group between these three insurance categories. These columns show the patient distribution prior to any risk adjustment.

Total Population or Sample:

Reports whether the results are based on the physician clinic or medical group's total population or a sample of the total population for that measure.

Sample Size:

Reports the number of patients meeting the criteria for inclusion in the measure and for whom data was submitted. This column is the denominator number used to calculate the rate.

Non-risk Adjusted Rate:

Reports the value when the numerator is divided by the denominator prior to any risk-adjustment. The denominator is the sum of all the eligible cases submitted. The numerator is the sum of all eligible cases submitted where recommended care was provided or treatment goals were reached.

Confidence Interval of Non-risk Adjusted Rate:

Reports the margin of error for the non-risk adjusted rate. Confidence intervals are a range of values which demonstrate the degree of certainty associated with the estimated rate. This range takes into account potential variance in the rate if different patients were included in the sample. 95-percent-asymmetrical confidence intervals are calculated for each measure for each medical group. Asymmetrical confidence intervals are used to avoid confidence interval lower-bound values less than zero and upper bound values greater than one hundred. Large differences between individual physician clinics' rates may be significant and small differences are usually not significant.

^{*} Curtin, LR and RJ Klein. "Direct Standardization (Age-Adjusted Death Rates)." Centers for Disease Control and Prevention and National Center for Health Statistics. Healthy People 2000 Statistical Notes No. 6. 1995.

| Quality of Ca | re for | | | Opti | mal D | iabe | tes Care | ! | | | | | Opti | mal V | ascul | ar Care | | | |
|--|--------------------------------------|--------------------|--|----------|----------------------|-------------------------|---|-------------|------------------------|---|--------------------|--|----------|---------------------|-------------------------|----------------------------|-------------|---------------------------------|---|
| Chronic Cond | | | | | tribution nt Popu | | | | | | | | | ribution nt Popu | | | | 1 1 3 3 4 6 6 | |
| See page 89 for an explanation of t | erms. | Rate | terval of Risk | | | e Programs | on or Sample | | sted Rate | terval of Non- Rate | Rate | terval of Risk | | | e Programs | on or Sample | | sted Rate | Confidence Interval of Non- Risk Adjusted Rate |
| PHYSICIAN CLINIC NAME | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non- Risk Adjusted Rate | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence In Risk Adjusted |
| Overall Minnesota Clinic Average | | 28% | 28–29% | 29% | 55% | 16% | | | 28% | 28-29% | 34% | 34-35% | 43% | 47% | 9% | 6 | | 34% | 34-35% |
| ADRIAN | | | | | | | | | | | | | | | | | |))) | |
| Sanford Clinic Adrian | Sanford Clinic | 10% | 5%-19% | 45% | 48% | 7% | Sample | 60 | 10% | 5%-20% | * | * | * | * | * | * | * | * | * |
| ALBERT LEA | | | | | | | | | | | | | | | | | | , | |
| Mayo Health System- Albert Lea Medical Center | Mayo Health System | 20% | 11%-31% | 43% | 43% | 13% | Sample | 60 | 20% | 12%-32% | 29% | 19%-41% | 58% | 38% | 3% | Sample | 60 | 30% | 20%-43% |
| APPLETON | | | | | | | | | | | | | | | | | | , | |
| Appleton Clinic | Appleton Area Health Services | 6% | 3%-15% | 32% | 51% | 17% | Sample | 60 | 7% | 3%-16% | * | * | * | * | * | * | * | * | * |
| ARLINGTON | | | | | | | 0 | | | | | | | | | | | | |
| Sibley Medical Center | Sibley Medical Center | 3% | 1%-10% | 46% | 39% | 15% | Sample | 60 | 3% | 1%-11% | 12% | 6%-22% | 52% | 40% | 8% | Sample | 60 | 12% | 6%-22% |
| AUSTIN | | | | | | | 2 % a a a a a a a a a a a a a a a a a a | | | | | | | | | | | | |
| Mayo Health System- Austin Medical Center | Mayo Health System | 21% | 14%-31% | 45% | 40% | 15% | Sample | 60 | 22% | 13%-34% | 33% | 23%-46% | 45% | 40% | 15% | Sample | 60 | 32% | 21%-44% |
| Smart Clinic | Smart Clinic | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| BENSON | | , | | | | | | | | | | | | | | | | | |
| Affilliated Community Medical Centers | Affiliated Community Medical Centers | 35% | 30%-41% | 33% | 54% | 18% | Total Population | n 290 | 35% | 30%-41% | 42% | 32%-52% | 43% | 41% | 16% | Total Population | n 94 | 41% | 32%-52% |
| BLUE EARTH | | | | | | | *** * * * * * * * * * * * * * * * * * | | | | | | | | | | | | |
| United Hospital District Clinic | United Hospital District Clinic | 10% | 5%-18% | 43% | 39% | 19% | Sample | 80 | 11% | 6%-20% | 31% | 21%-43% | 47% | 33% | 20% | Total Population | n 76 | 32% | 22%-43% |
| | | | | | | | | | | | | | | | | | | | |

^{*} Sufficient data not available. + Data not reported (for information on Physician Clinic Inclusion see page 199).

| Quality of Car | re for | | | Opti | mal D | iabe | tes Care | ! | | | | | Optir | nal Va | ascul | ar Care | | |
|---|---|--------------------|--|----------|----------------------|-------------------------|--|-------------|------------------------|---|--------------------|--|----------|----------------------|-------------------------|--|------------------------|---|
| Chronic Cond | | | | | ribution It Popul | | | | | | | | | ribution It Popul | | | • | |
| See page 89 for an explanation of to | erms. | Rate | erval of Risk | | | e Programs | on or Sample | | sted Rate | erval of Non- Rate | Rate | erval of Risk | | | e Programs | on or Sample | sted Rate | erval of Non- Rate |
| PHYSICIAN CLINIC NAME | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non- Risk Adjusted Rate | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non- Risk Adjusted Rate |
| Overall Minnesota Clinic Average | | 28% | 28–29% | 29% | 55% | 16% | | | 28% | 28-29% | 34% | 34-35% | 43% | 47% | 9% | | 349 | 34-35% |
| BYRON | | | | • | | | • | | | | | | • | | | | | |
| Olmsted Medical Center | Olmsted Medical Center | 22% | 15%-30% | 21% | 62% | 17% | Total Populatio | n 117 | 22% | 16%-31% | 19% | 9%-35% | 27% | 63% | 10% | Total Population | 139 | 5%-30% |
| CALEDONIA | | | | | | | | | | | | | | | | | | |
| Mayo Health System-Franciscan Skem | p Mayo Health System | 29% | 19%-41% | 32% | 48% | 20% | Sample | 60 | 28% | 19%-41% | 33% | 20%-49% | 60% | 26% | 14% | Total Population | 349 | 21%-51% |
| CANBY | | | | | | | | | | | | | | | • • • • • • | | | |
| Sanford Clinic Canby | Sanford Clinic | 14% | 7%-25% | 47% | 42% | 12% | Sample | 60 | 13% | 7%-24% | 17% | 7%-34% | 60% | 33% | 7% | Total Population | 139 | 5%-30% |
| CANNON FALLS | | | | | | | | | | | | | | | | | | |
| Mayo Health System- Cannon Falls Medical Center | Mayo Health System | 21% | 14%-31% | 33% | 57% | 10% | Sample | 60 | 22% | 13%-34% | * | * | * | * | * | * | * * | * |
| CHATFIELD | | | | | | | ** • • • • • • • • • • • • • • • • • • | | | | | | * | | | | | |
| Olmsted Medical Center | Olmsted Medical Center | 13% | 8%-21% | 35% | 54% | 11% | Total Populatio | n 101 | 14% | 8%-22% | * | * | * | * | * | * | * * | * |
| CLARA CITY | | | | | | | of | | | | | | * | | | ·· · · · · · · · · · · · · · · · · · · | | |
| Clara City Clinic | Chippewa County Montevideo Hospital & Medical Clinic | * | * | * * | * | * | * * | * | * | * | * | * | * | * | * | * | * * | * |
| CLARKFIELD | | | | : | | | | | | | | | : | | | ** | | |
| Clarkfield Clinic | Chippewa County Montevideo Hospital & Medical Clinic | * | * | * * | * | * | * * | * | * | * | * | * | * | * | * | * | * * | * |
| DASSEL | | | | | | | · | | | | | | | | | | | |
| Hutchinson Area Health Care- Dassel Medical Center | Hutchinson Area Health Care | 21% | 13%-33% | 36% | 53% | 11% | Total Populatio | n 55 | 22% | 13%-34% | * | * | * * | * | * | * | * * | * |

^{*} Sufficient data not available. + Data not reported (for information on Physician Clinic Inclusion see page 199).

| Quality of Ca | re for | | | Opti | mal D | iabe | tes Care | | | | | | Optir | nal Va | ascul | ar Care | | | |
|--|--------------------------------|--------------------|--|----------|-----------------------|-------------------------|----------------------------|-------------|------------------------|---|--------------------|--|----------|----------------------|-------------------------|------------------|-------------|------------------------|---|
| Chronic Conc | | | | | tribution nt Popul | | | | | | | | | ributior it Popul | | | | | |
| See page 89 for an explanation of to | terms. | Rate | erval of Risk | | | e Programs | n or Sample | | ited Rate | erval of Non- Rate | Rate | erval of Risk | | | e Programs | n or Sample | | ted Rate | erval of Non- ?ate |
| PHYSICIAN CLINIC NAME | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non- Risk Adjusted Rate | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non- Risk Adjusted Rate |
| Overall Minnesota Clinic Average | | 28% | 28–29% | 29% | 55% | 16% | • | | 28% | 28-29% | 34% | 34-35% | 43% | 47% | 9% | | | 34% | 34-35% |
| Meeker Memorial Clinic | Meeker Memorial Clinic | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| DAWSON | | | | | | | | | | | | | | | | | | | |
| Dawson Clinic | Dawson Clinic | 18% | 11%-30% | 38% | 53% | 8% | Sample | 60 | 18% | 11%-30% | 20% | 11%-34% | 37% | 49% | 14% | Total Populati | on 43 | 19% | 10%-33% |
| EDEN VALLEY | | | | | | | | | | | | | | | | | | | |
| Paynesville Eden Valley Medical Clinic | Paynesville Area Health System | 3% | 2%-9% | 50% | 44% | 6% | Total Population | 85 | 2% | 1%-8% | 18% | 9%-33% | 58% | 39% | 3% | Total Populati | on 33 | 15% | 7%-31% |
| EDGERTON | | | | | | | | | | | | | | | | | | , | |
| Edgerton Family Clinic Avera | Avera Health/Avera Tri-State | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| FAIRFAX | | | | | | | | | | | | | | | | | | | |
| Fairfax Medical Clinic | | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| FAIRMONT | | | | | | | | | | | | | | | | | | | |
| Braaten Medical Clinic | | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Dulcimer Medical Center | Dulcimer Medical Center | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Mayo Health System- Fairmont Medical Center | Mayo Health System | 16% | 9%-28% | 27% | 60% | 13% | Sample | 60 | 17% | 9%-28% | 31% | 19%-44% | 10% | 86% | 3% | Sample | 60 | 33% | 23%-46% |
| Smart Clinic | Smart Clinic | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| FARIBAULT | | | | | | | | | | | | | | | | , | | | |
| Allina Medical Clinic | Allina Medical Clinic | 37% | 34%-40% | 31% | 56% | 13% | Total Population | 886 | 37% | 34%-40% | 40% | 35%-45% | 48% | 44% | 8% | Total Populati | on 340 | 40% | 35%-45% |

^{*} Sufficient data not available. + Data not reported (for information on Physician Clinic Inclusion see page 199).

| Quality of Ca | re for | | | Opti | mal D | iabet | tes Care | | | | | | Optin | nal Va | ascul | ar Care | | | |
|---|--------------------------------------|--------------------|--|---|----------------------|-------------------------|---|-------------|------------------------|---|--------------------|---|---|---------------------|-------------------------|------------------|---|------------------------|---|
| Chronic Cond | Ī | | | | ribution It Popul | | | | | | | | | ribution t Popul | | | 0 | | |
| See page 89 for an explanation of t | erms. | Rate | terval of Risk | | | e Programs | on or Sample | | sted Rate | terval of Non- Rate | Rate | terval of Risk | | | e Programs | on or Sample | 000000000000000000000000000000000000000 | sted Rate | terval of Non- Rate |
| PHYSICIAN CLINIC NAME | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non- Risk Adjusted Rate | Risk Adjusted Rate | Confidence Interval of Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non- Risk Adjusted Rate |
| Overall Minnesota Clinic Average | | 28% | 28–29% | 29% | 55% | 16% | | | 28% | 28-29% | 34% | 34-35% | 43% | 47% | 9% | | | 34% | 34-35% |
| Mayo Health System- Cannon Valley Clinic | Mayo Health System | 41% | 29%-53% | 41% | 46% | 14% | Sample | 60 | 42% | 30%-54% | 38% | 27%-51% | 48% | 38% | 13% | Sample | 60 | 37% | 26%-49% |
| FULDA | | | | , · · · · · · · · · · · · · · · · · · · | | | | | | | | | , | | | | | | |
| Avera Worthington Specialty Clinics | Avera Health/Avera Tri-State | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| GLENCOE | | | | | | | | | | | | | | | | | | | |
| Glencoe Regional Health Services | Glencoe Regional Health Services | 11% | 8%-16% | 37% | 53% | 11% | Sample | 240 | 11% | 8%-16% | 18% | 12%-26% | 48% | 46% | 7% | Sample | 120 | 18% | 12%-26% |
| GRACEVILLE | | | | , · · · · · · · · · · · · · · · · · · · | | | | | | | | | , | | | | | | |
| Graceville Health Center Clinic | Graceville Health Center Clinic | 5% | 2%-15% | 50% | 28% | 23% | Total Populatio | n 40 | 8% | 3%-20% | 18% | 8%-35% | 61% | 23% | 16% | Total Populatio | on 31 | 10% | 3%-25% |
| GRANITE FALLS | | | | | | | · · · · · · · · · · · · · · · · · · · | | | | | | | | | | | | |
| Affilliated Community Medical Centers | Affiliated Community Medical Centers | 38% | 33%-44% | 38% | 48% | 14% | Total Populatio | n 305 | 39% | 33%-44% | 45% | 36%-54% | 50% | 36% | 14% | Total Populatio | on 111 | 45% | 36%-54% |
| HARMONY | | | | | | | • | | | | | | | | | | | | |
| Gundersen Lutheran | Gundersen Clinic | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| HECTOR | | | | ** | | | 8 · · · · · · · · · · · · · · · · · · · | | | | | | * · · · · · · · · · · · · · · · · · · · | | | | | | |
| Renville County Hospital and Clinics | Renville County Hospital and Clinics | 12% | 5%-25% | 42% | 35% | 24% | Total Populatio | n 55 | 11% | 5%-22% | * | * | * | * | * | * | * | * | * |
| HENDRICKS | | | | ** | | | | | | | | | * · · · · · · · · · · · · · · · · · · · | | | | | | |
| Hendricks Clinic P.A. | Hendricks Clinic | 9% | 5%-18% | 34% | 51% | 15% | Sample | 74 | 9% | 5%-18% | 25% | 16%-36% | 49% | 43% | 8% | Sample | 65 | 25% | 16%-36% |
| | | | | ** | | | # | | | | | | * · · · · · · · · · · · · · · · · · · · | | | | | | |

^{*} Sufficient data not available. + Data not reported (for information on Physician Clinic Inclusion see page 199).

| itions | , | | | | | | | | / | 4 | | Optin | | | | | | |
|---------------------------------------|---|--|---|-----------------------|--------------------------|--------------------------------|---|--------------------------------|--|---|---------------------------------|--|---------------------------------------|--|---|---|--|--|
| | i | ; | | tribution nt Popul | | | | | | | | | ribution nt Popula | | | | | |
| ms. | Rate | erval of Risk | | | e Programs | on or Sample | 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | sted Rate | erval of Non- Rate | Rate | erval of Risk | | | e Programs | on or Sample | 0 | sted Rate | erval of Non- Rate |
| MEDICAL GROUP NAME | Risk Adjusted | Confidence Int Adjusted Rate | Medicare | Commercial | MN Health Car | Total Populatic | Sample Size | Non-Risk Adju | Confidence Int Risk Adjusted | Risk Adjusted | Confidence Int Adjusted Rate | Medicare | Commercial | MN Health Car | Total Populatic | Sample Size | Non-Risk Adju | Confidence Interval of Non- Risk Adjusted Rate |
| | 28% | 28–29% | 29% | 55% | 16% | | | 28% | 28-29% | 34% | 34-35% | 43% | 47% | 9% | | | 34% | 34-35% |
| | İ | | | | | | | | | | | | | | | | | |
| Gundersen Clinic | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| | 1 | | | | | | | | | | | | | | , | | | |
| Hutchinson Medical Center | 28% | 26%-31% | 36% | 52% | 12% | Total Populatio | on 1095 | 29% | 26%-32% | 37% | 32%-42% | 52% | 44% | 4% | Total Population | 1 361 | 38% | 33%-43% |
| | i | | | | | | 0 0 0 0 0 0 | | | | | | | | | | | |
| | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + : | + | + |
| | 1 | | | | | | | | | | | | | | | | | |
| Sacred Heart Mercy Health Care Center | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Sanford Clinic | 11% | 6%-21% | 32% | 52% | 17% | Sample | 60 | 12% | 6%-22% | 8% | 3%-22% | 42% | 48% | 10% | Total Population | 1 31 | 6% | 2%-21% |
| | i | | | | | | | , | | | | | | | | | | |
| Mayo Clinic | 23% | 15%-33% | 42% | 55% | 3% | Sample | 60 | 25% | 16%-37% | 39% | 28%-50% | 47% | 53% | 0% | Sample | 60 | 40% | 29%-53% |
| | i | | * | | | | | | | | | * | | | | | | |
| Mayo Health System | 41% | 30%-53% | 23% | 65% | 12% | Sample | 60 | 40% | 29%-53% | 33% | 22%-47% | 43% | 50% | 7% | Total Population | 1 46 | 35% | 23%-49% |
| | | | | | | | | | | | | | | | | | | |
| Avera Health/Avera Tri-State | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Ν | MEDICAL GROUP NAME Gundersen Clinic Hutchinson Medical Center Sacred Heart Mercy Health Care Center Sanford Clinic Mayo Clinic Mayo Health System | MEDICAL GROUP NAME 28% Gundersen Clinic + Hutchinson Medical Center 28% + Sacred Heart Mercy Health Care Center + Sanford Clinic 11% Mayo Clinic 23% | MEDICAL GROUP NAME 28% 28–29% | 28% 28-29% 29% | 28% 28-29% 29% 55% | 28% 28-29% 29% 55% 16% | 28% 28-29% 29% 55% 16% | 28% 28-29% 29% 55% 16% | Gundersen Clinic + | 28% 28-29% 29% 55% 16% 28% 28-29% | Cundersen Clinic | 28% 28-29% 29% 55% 16% 28% 28-29% 34% 34-35% | Secret Heart Merry Health Care Center | 28% 28-29% 29% 55% 16% 28% 28-29% 34% 34-35% 43% 47% | 28% 28-29% 28% 28% 55% 16% 28% 28-29% 34% 34-35% 43% 47% 9% | 28% 28-29% 29% 55% 16% 28% 28-29% 34% 34-35% 43% 47% 9% | 28% 28-29% 29% 55% 18% 28-29% 34% 34-35% 43% 41% 9% 41 | 28% 28-29% 29% 55% 16% 28% 28-29% 34% 34-35% 43% 47% 9% 34 |

^{*} Sufficient data not available. + Data not reported (for information on Physician Clinic Inclusion see page 199).

| Quality of Ca | re for | | | Opti | mal D | iabe | tes Care | | | | | | Optir | nal Va | ascul | ar Care | | | |
|--|--------------------------------------|--------------------|--|----------|----------------------|-------------------------|----------------------------|---|------------------------|---|--------------------|--|---|----------------------|-------------------------|---------------------|-------------|------------------------|---|
| Chronic Cond | | | | | ribution It Popul | | | • | | | | | | ribution It Popul | | | | | |
| See page 89 for an explanation of t | erms. | Rate | erval of Risk | | | e Programs | on or Sample | 0 | sted Rate | erval of Non- Rate | Rate | erval of Risk | | | e Programs | on or Sample | | sted Rate | erval of Non- Rate |
| PHYSICIAN CLINIC NAME | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interval o Risk Adjusted Rate | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non- Risk Adjusted Rate |
| Overall Minnesota Clinic Average | | 28% | 28–29% | 29% | 55% | 16% | | | 28% | 28-29% | 34% | 34-35% | 43% | 47% | 9% | | | 34% | 34-35% |
| LAKE CITY | | | | | | | | | | | | | | | | | | | |
| Mayo Health System-Lake City | Mayo Health System | 25% | 16%-37% | 25% | 65% | 10% | Sample | 60 | 27% | 17%-39% | 48% | 36%-60% | 43% | 48% | 8% | Sample | 60 | 50% | 38%-62% |
| LAKE CRYSTAL | | | | | | | | | | | | | | | | | | | |
| Mankato Clinic | Mankato Clinic | 14% | 8%-24% | 39% | 59% | 2% | Sample | 60 | 13% | 7%-24% | 31% | 18%-48% | 30% | 64% | 6% | Total Population | on 33 | 27% | 15%-44% |
| LAKEFIELD | | | | | | | | | | | | | | | | | | | |
| Avera Worthington Specialty Clinics | Avera Health/Avera Tri-State | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Sanford Clinic Lakefield | Sanford Clinic | 5% | 3%-15% | 50% | 42% | 8% | Sample | 38 | 5% | 1%-17% | * | * | * | * | * | * | * | * | * |
| LE SUEUR | | | | | | | | | | | | | | | | | | | |
| Mayo Health System- Immanuel St. Joseph | Mayo Health System | 33% | 23%-45% | 32% | 55% | 13% | Sample | 60 | 33% | 23%-46% | * | * | * | * | * | * | * | * | * |
| Southern Metro Medical Clinics | Southern Metro Medical Clinics | 16% | 10%-24% | 38% | 56% | 6% | Total Population | 89 | 16% | 10%-25% | * | * | * | * | * | * | * | * | * |
| LEWISTON | | | | | | | | | | | | | * · · · · · · · · · · · · · · · · · · · | | | | | | |
| Winona Health | Winona Health | 16% | 8%-28% | 30% | 62% | 8% | Total Population | 50 | 16% | 8%-29% | * | * | * | * | * | * | * | * | * |
| LITCHFIELD | | | | | | | : | • | | | | | | | | | | | |
| Affilliated Community Medical Centers- Litchfield Clinic (East) | Affiliated Community Medical Centers | 57% | 52%-62% | 34% | 46% | 20% | Total Population | 338 | 57% | 51%-62% | 51% | 37%-66% | 43% | 49% | 8% | Total Population | on 37 | 54% | 38%-69% |
| Affilliated Community Medical Centers- Litchfield Clinic (West) | Affiliated Community Medical Centers | 24% | 19%-30% | 36% | 46% | 18% | Total Populatior | 273 | 25% | 20%-30% | 24% | 16%-34% | 45% | 44% | 12% | Total Populatio | on 85 | 24% | 16%-34% |
| | | | | : | | | • | | | | | | : | | | | | | |

^{*} Sufficient data not available. + Data not reported (for information on Physician Clinic Inclusion see page 199).

| Quality of Ca | re for | | | Opti | mal D | iabe | tes Care |) | | | | | Optir | mal Va | ascul | ar Care | | | |
|---|--|--------------------|--|----------|-----------------------|-------------------------|---------------------------------------|---|------------------------|---|--------------------|--|----------|----------------------|-------------------------|----------------------------|---------------------------------------|---|---|
| Chronic Conc | | | | | tribution nt Popul | | | | | | | | | ributior it Popul | | | | , , , , , , , , , , , , , , , , , , , | |
| See page 89 for an explanation of to | erms. | Rate | terval of Risk | | | e Programs | on or Sample | 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | sted Rate | terval of Non- Rate | Rate | terval of Risk | | | e Programs | on or Sample | 0 | sted Rate | terval of Non- Rate |
| PHYSICIAN CLINIC NAME | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interval Risk Adjusted Rate | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non- Risk Adjusted Rate |
| Overall Minnesota Clinic Average | | 28% | 28–29% | 29% | 55% | 16% | | | 28% | 28-29% | 34% | 34-35% | 43% | 47% | 9% | | | 34% | 34-35% |
| LONSDALE | | | | • | | | | | | | | | | | | | | | |
| FamilyHealth Medical Clinic | FamilyHealth Medical Clinics | 9% | 5%-17% | 27% | 66% | 7% | Total Populati | on 69 | 9% | 4%-18% | * | * | * | * | * | * | * | * | * |
| LUVERNE | | | | | | | | | | | | | | | | | | | |
| Sanford Clinic | Sanford Clinic | 12% | 6%-22% | 47% | 43% | 10% | Sample | 60 | 12% | 6%-22% | 15% | 8%-25% | 52% | 37% | 12% | Sample | 60 | 15% | 8%-26% |
| MABEL | | | | | | | | 0 0 0 0 0 0 | | | | | | | | | * * * * * * * * * * * * * * * * * * * | 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | |
| Winneshiek Medical Center | Winneshiek Medical Center-Mabel Clinic | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| MADELIA | | | | | | | | | | | | | | | | | , | 1 | |
| Mayo Health System- Immanuel St. Joseph | Mayo Health System | 31% | 21%-43% | 37% | 57% | 7% | Sample | 60 | 32% | 21%-44% | 37% | 23%-54% | 34% | 56% | 9% | Total Populati | ion 33 | 33% | 20%-50% |
| MADISON | | | | • | | | · · · · · · · · · · · · · · · · · · · | | | | | | • | | | | | , , , , , , , , , , , , , , , , , , , | |
| Lac Qui Parle Clinic | Lac Qui Parle Clinic | 8% | 4%-17% | 23% | 51% | 27% | Total Populati | on 71 | 8% | 4%-17% | * | * | * * | * | * | * | * | , * | * |
| MANKATO | | | | | | | | | | | | | | | | | | | |
| Between the Bridges Health Center | | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Mayo Health System-Immanuel St. Joseph- Mankato Eastridge | Mayo Health System | 26% | 16%-38% | 17% | 48% | 35% | Sample | 60 | 30% | 20%-43% | 31% | 21%-43% | 40% | 44% | 16% | Sample | 62 | 31% | 21%-43% |
| Mayo Health System-Immanuel St. Joseph- Mankato Specialty Clinic | Mayo Health System | 25% | 21%-33% | 0% | 100% | 0% | Sample | 60 | 23% | 14%-35% | 35% | 30%-42% | 0% | 100% | 0% | Sample | 60 | 37% | 26%-49% |
| Mankato Clinic- Main Street | Mankato Clinic | 16% | 11%-22% | 44% | 46% | 9% | Sample | 154 | 17% | 12%-24% | 30% | 24%-36% | 44% | 50% | 6% | Sample | 234 | 30% | 24%-36% |
| Mankato Clinic- Wickersham Campus | Mankato Clinic | 21% | 13%-33% | 30% | 63% | 7% | Sample | 60 | 22% | 13%-34% | 36% | 25%-49% | 27% | 66% | 7% | Sample | 60 | 37% | 26%-49% |

^{*} Sufficient data not available. + Data not reported (for information on Physician Clinic Inclusion see page 199).

| Quality of Ca | re for | | | Opti | mal D | iabe | tes Care | | | | | | Optir | nal Va | ascul | ar Care | | | |
|--|---|--------------------|--|---------------------------------------|----------------------|-------------------------|----------------------------|---|------------------------|---|--------------------|---|---------------------------------------|----------------------|-------------------------|------------------|-------------|------------------------|---|
| Chronic Cond | i | | | | ributior nt Popul | | | | | | | | | ribution It Popul | | | | | |
| See page 89 for an explanation of t | erms. | Rate | terval of Risk | 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | | e Programs | on or Sample | 0 0 0 0 0 0 0 0 0 | sted Rate | terval of Non- Rate | Rate | terval of Risk | | | e Programs | on or Sample | | sted Rate | terval of Non- Rate |
| PHYSICIAN CLINIC NAME | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interval Risk Adjusted Rate | Risk Adjusted Rate | Confidence Interval of Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non- Risk Adjusted Rate |
| Overall Minnesota Clinic Average | | 28% | 28–29% | 29% | 55% | 16% | | | 28% | 28-29% | 34% | 34-35% | 43% | 47% | 9% | | | 34% | 34-35% |
| Open Door Health Center | Open Door Health Center | 2% | 2%-7% | 10% | 25% | 65% | Total Population | n 79 | 0% | 0%-5% | * | * | * | * | * | * | * | * | * |
| MAPLETON | | | | | | | * | | | | | | | | | | | | |
| Mankato Clinic | Mankato Clinic | 24% | 15%-36% | 40% | 53% | 7% | Sample | 60 | 25% | 16%-37% | 34% | 21%-49% | 44% | 50% | 6% | Total Populat | ion 36 | 33% | 20%-50% |
| MARSHALL | | | | | | | | | | | | | · · · · · · · · · · · · · · · · · · · | | | | | | |
| Affiliated Community Medical Centers- Bruce Street | Affiliated Community Medical Centers | 31% | 22%-41% | 35% | 49% | 17% | Total Population | n 84 | 31% | 22%-41% | 38% | 25%-54% | 56% | 39% | 6% | Total Populat | ion 36 | 39% | 25%-55% |
| Affilliated Community Medical Centers- Marshall Clinic- Market Street | Affiliated Community Medical Centers | 36% | 33%-39% | 29% | 54% | 16% | Total Population | n 872 | 36% | 33%-39% | 45% | 38%-52% | 40% | 49% | 11% | Total Populat | ion 189 | 45% | 38%-52% |
| Avera Marshall Specialty Clinic | Avera Health/Avera Tri-State | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A |
| MILAN | | | | | | | | | | | | | | | | | | | |
| Milan Clinic | Chippewa County Montevideo Hospital & Medical Clinic | * | * | * | * | * | * | * | * | * | * | * | * : * | * | * | * | * | * | * |
| MONTEVIDEO | | | | | | | • | | | | | | | | | | | | |
| Chippewa County Montevideo Hospital & Medical Clinic | Chippewa County Montevideo Hospital & Medical Clinic | 14% | 8%-24% | 18% | 65% | 18% | Total Population | ı 68 | 15% | 8%-25% | 15% | 8%-26% | 35% | 51% | 14% | Total Populat | ion 65 | 14% | 7%-24% |
| MONTGOMERY | | | | | | | | | | | | | | | | | | | |
| Southern Metro Medical Clinics- Montgomery Medical Clinic | Southern Metro Medical Clinics | 4% | 3%-11% | 38% | 58% | 4% | Total Population | n 74 | 3% | 1%-9% | * | * | * | * | * | * | * | * | * |
| MOUNTAIN LAKE | | | | | | | | | | | | | | | | | | | |
| Sanford Clinic | Sanford Clinic | 9% | 4%-18% | 37% | 48% | 15% | Sample | 66 | 9% | 4%-18% | * | * | * | * | * | * | * | * | * |
| | | | | | | | | | | | | | | | | | | | |

^{*} Sufficient data not available. + Data not reported (for information on Physician Clinic Inclusion see page 199).

| Quality of Ca | re for | | | Opti | mal D | iabe | tes Care | | | | | | Optir | nal Va | ascul | ar Care | | | |
|--|--------------------------------------|--------------------|--|----------|----------------------|-------------------------|---|-------------|---------------------------------------|---|--------------------|--|----------|----------------------|-------------------------|----------------------------|---|------------------------|---|
| Chronic Cond | | | | | ributior nt Popul | | | | | | | | | ribution It Popul | | | | | |
| See page 89 for an explanation of t | terms. | Rate | erval of Risk | | | e Programs | on or Sample | | sted Rate | erval of Non- Rate | Rate | erval of Risk | | | e Programs | on or Sample | | sted Rate | terval of Non- Rate |
| PHYSICIAN CLINIC NAME | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interval Risk Adjusted Rate | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non- Risk Adjusted Rate |
| Overall Minnesota Clinic Average | | 28% | 28–29% | 29% | 55% | 16% | | | 28% | 28-29% | 34% | 34-35% | 43% | 47% | 9% | | | 34% | 34-35% |
| NEW LONDON | | | | | | | | | | | | | | | | | | | |
| Affilliated Community Medical Centers | Affiliated Community Medical Centers | 37% | 31%-44% | 37% | 51% | 12% | Total Population | 188 | 38% | 31%-45% | 27% | 19%-37% | 59% | 35% | 6% | Total Population | 80 | 30% | 21%-41% |
| NEW PRAGUE | | | | | | | | | | | | | | | | | | | |
| Parkview Medical Clinic | Parkview Medical Clinic | 15% | 8%-25% | 26% | 68% | 5% | Total Population | n 73 | 14% | 8%-23% | * | * | * | * | * | * | * | * | * |
| NEW ULM | i | | | | | | | | · · · · · · · · · · · · · · · · · · · | | | | | | | | | | |
| Allina Health System- New Ulm Medical Center | Allina Health System | 30% | 27%-33% | 40% | 48% | 12% | Total Population | 940 | 31% | 29%-35% | 40% | 36%-45% | 52% | 40% | 8% | Total Population | 414 | 40% | 36%-45% |
| NORTH MANKATO | | | | | | | 0 0 0 | | | | | | | | | | | | |
| Mayo Health System-Immanuel St. Joseph - Mankato Northridge | Mayo Health System | 39% | 28%-51% | 23% | 68% | 8% | Sample | 60 | 38% | 27%-51% | 60% | 47%-71% | 40% | 48% | 12% | Sample | 60 | 58% | 46%-70% |
| Mankato Clinic | Mankato Clinic | 32% | 22%-45% | 28% | 65% | 7% | Sample | 60 | 33% | 23%-46% | 42% | 31%-54% | 52% | 45% | 3% | Sample | 60 | 43% | 32%-56% |
| NORTHFIELD | | | | | | | • | | | | | | | | | • | : | | |
| Allina Medical Clinic | Allina Medical Clinic | 40% | 37%-43% | 31% | 58% | 11% | Total Population | 801 | 41% | 37%-44% | 47% | 42%-53% | 51% | 43% | 6% | Total Population | 330 | 48% | 42%-53% |
| OLIVIA | | | | | | | • | | | | | | | | | | | | |
| Renville County Hospital and Clinics | Renville County Hospital and Clinics | 7% | 4%-12% | 36% | 41% | 23% | Total Population | 162 | 7% | 4%-12% | * | * | * | * | * | * | * | * | * |
| ORTONVILLE | | | | | | | | | | | | | | | | | | | |
| Northside Medical Clinic | Northside Medical Clinic | 10% | 5%-17% | 44% | 41% | 15% | Sample | 102 | 10% | 5%-17% | 25% | 17%-34% | 52% | 42% | 7% | Total Population | 92 | 26% | 18%-36% |
| | | | | | | | *** * * * * * * * * * * * * * * * * * * | | · · · · · · · · · · · · · · · · · · · | | | | | | | | • | | |

^{*} Sufficient data not available. + Data not reported (for information on Physician Clinic Inclusion see page 199).

| Quality of Car | re for | | | Opti | mal D | iabe | tes Care | | | | | | Optin | nal Va | scula | r Care | | | |
|--|--------------------------------------|--------------------|--|----------|----------------------|-------------------------|----------------------------|--------------------------------------|------------------------|---|--------------------|--|---------------------------------------|---------------------|-------------------------|------------------|-------------|------------------------|---|
| Chronic Cond | | | | | ribution It Popul | | | • | | | | | | ribution t Popul | | | | | |
| See page 89 for an explanation of to | erms. | Rate | terval of Risk | | | e Programs | on or Sample | 0 0 0 0 0 0 0 0 | sted Rate | terval of Non- Rate | Rate | terval of Risk | | | e Programs | on or Sample | | sted Rate | terval of Non- Rate |
| PHYSICIAN CLINIC NAME | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non- Risk Adjusted Rate | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non- Risk Adjusted Rate |
| Overall Minnesota Clinic Average | | 28% | 28–29% | 29% | 55% | 16% | | | 28% | 28-29% | 34% | 34-35% | 43% | 47% | 9% | | | 34% | 34-35% |
| OWATONNA | | | | | | | | | | | | | | | | | | | |
| Mayo Health System-Owatonna Clinic | Mayo Health System | 29% | 18%-42% | 13% | 65% | 22% | Sample | 60 | 27% | 17%-39% | 33% | 23%-46% | 32% | 61% | 7% | Sample | 60 | 33% | 23%-46% |
| PINE ISLAND | | | | | | | | | | | | | | | | | | | |
| Olmsted Medical Center | Olmsted Medical Center | 21% | 14%-30% | 25% | 69% | 5% | Total Population | n 112 | 21% | 14%-29% | * | * | * | * | * | * | * | * | * |
| PIPESTONE | | | | ** | | | | | | | | | | | | | | | |
| Avera- Pipestone County Medical Center | Avera Health/Avera Tri-State | 4% | 1%-10% | 30% | 49% | 21% | Sample | 80 | 4% | 1%-10% | 14% | 7%-26% | 36% | 60% | 4% | Total Populati | on 48 | 13% | 6%-25% |
| PLAINVIEW | | | | | | | | | | | | | | | | | | | |
| Olmsted Medical Center | Olmsted Medical Center | 28% | 20%-38% | 32% | 58% | 11% | Total Population | n 85 | 29% | 21%-40% | * | * | * | * | * | * | * | * | * |
| PRESTON | | | | * | | | | | | | | | · · · · · · · · · · · · · · · · · · · | | | | | | |
| Olmsted Medical Center | Olmsted Medical Center | 20% | 14%-28% | 35% | 55% | 11% | Total Population | n 113 | 21% | 15%-30% | * | * | * | * | * | * | * | * | * |
| RED WING | | | | * | | | | | | | | | · · · · · · · · · · · · · · · · · · · | | | | | | |
| Fairview Red Wing Medical Center | Fairview Health Services | 28% | 25%-31% | 34% | 59% | 7% | Total Population | n 912 | 29% | 26%-32% | 32% | 28%-36% | 44% | 47% | 9% | Total Populati | on 478 | 32% | 28%-36% |
| REDWOOD FALLS | | | | | | | | | | | | | | | | | | | |
| Affilliated Community Medical Centers | Affiliated Community Medical Centers | 38% | 34%-42% | 34% | 51% | 15% | Total Population | n 506 | 38% | 34%-43% | 41% | 33%-49% | 47% | 44% | 9% | Total Populati | on 135 | 41% | 34%-50% |
| RENVILLE | | | | | | | | | | | | | | | | | | | |
| Renville County Hospital and Clinics | Renville County Hospital and Clinics | 4% | 2%-12% | 36% | 44% | 20% | Total Population | n 61 | 5% | 2%-13% | * | * | * | * | * | * | * | * | * |

^{*} Sufficient data not available. + Data not reported (for information on Physician Clinic Inclusion see page 199).

| Quality of Ca | are for | | | Opti | mal D | iabe | tes Care | | | | | | Optin | mal Va | ascul | ar Care | | | |
|--|---------------------------|--------------------|--|----------|----------------------|-------------------------|----------------------------|---|------------------------|---|--------------------|--|----------|----------------------|-------------------------|----------------------------|-------------|------------------------|---|
| Chronic Con | | | | | ribution nt Popul | | | 0 0 0 | | | | | | ributior nt Popul | | | |))) 0 0 | |
| See page 89 for an explanation of | terms. | Rate | terval of Risk | | | e Programs | on or Sample | 0 | sted Rate | terval of Non- Rate | Rate | terval of Risk | | | e Programs | on or Sample | | sted Rate | terval of Non- Rate |
| PHYSICIAN CLINIC NAME | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interval o Risk Adjusted Rate | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non- Risk Adjusted Rate |
| Overall Minnesota Clinic Average | | 28% | 28–29% | 29% | 55% | 16% | | | 28% | 28-29% | 34% | 34-35% | 43% | 47% | 9% | | | 34% | 34-35% |
| ROCHESTER | | | | | | | • | | | | | | • | | | | | * | |
| Mayo Clinic- Baldwin Building, Family Medicine | Mayo Clinic | 26% | 17%-37% | 25% | 75% | 0% | Sample | 60 | 25% | 16%-37% | 48% | 37%-60% | 35% | 65% | 0% | Sample | 60 | 50% | 38%-62% |
| Mayo Clinic- Baldwin Building, Primary Care Internal Medicine | Mayo Clinic | 22% | 14%-33% | 40% | 55% | 5% | Sample | 60 | 23% | 14%-35% | 34% | 24%-46% | 43% | 55% | 2% | Sample | 60 | 35% | 24%-48% |
| Mayo Clinic- Mayo Building | Mayo Clinic | 20% | 12%-31% | 22% | 77% | 2% | Sample | 60 | 18% | 11%-30% | 44% | 32%-56% | 53% | 43% | 3% | Sample | 60 | 45% | 33%-58% |
| Mayo Clinic- Northeast | Mayo Clinic | 30% | 21%-41% | 33% | 65% | 2% | Sample | 60 | 32% | 21%-44% | 47% | 36%-59% | 47% | 50% | 3% | Sample | 60 | 48% | 36%-61% |
| Mayo Clinic- Northwest | Mayo Clinic | 28% | 19%-39% | 25% | 73% | 2% | Sample | 60 | 27% | 17%-39% | 34% | 23%-47% | 40% | 58% | 2% | Total Populati | on 50 | 34% | 22%-48% |
| Olmsted Medical Center- Rochester Northwest | Olmsted Medical Center | 28% | 21%-37% | 25% | 62% | 14% | Total Population | ı 117 | 28% | 21%-37% | * | * | * | * | * | * | * | * | * |
| Olmsted Medical Center- Rochester Southeast | Olmsted Medical Center | 19% | 17%-21% | 28% | 53% | 18% | Total Population | 1 1319 | 19% | 17%-21% | 29% | 24%-35% | 40% | 53% | 7% | Total Populati | on 281 | 29% | 24%-35% |
| Rochester Family Medicine Clinic | | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| RUSHFORD | | | | | | | | | | | | | | | | | | | |
| Winona Health | Winona Health | 15% | 8%-26% | 32% | 53% | 15% | Sample | 60 | 15% | 8%-26% | * | * | * | * | * | * | * | * | * |
| SLAYTON | | | | | | | | | | | | | | | | | | | |
| Murray County Clinic | Murray County Clinic | 17% | 10%-27% | 51% | 37% | 12% | Total Population | n 76 | 17% | 10%-27% | 28% | 16%-45% | 65% | 35% | 0% | Total Populati | on 31 | 29% | 16%-47% |
| SLEEPY EYE | | | | | | | | | | | | | | | | | | | |
| Sleepy Eye Medical Center | Sleepy Eye Medical Center | 1% | 0%-7% | 34% | 48% | 18% | Sample | 80 | 1% | 0%-7% | 13% | 7%-23% | 46% | 45% | 9% | Total Populati | on 56 | 13% | 6%-24% |
| | | | | | | | | | | | | | · | | | | | ' | |

^{*} Sufficient data not available. + Data not reported (for information on Physician Clinic Inclusion see page 199).

| Quality of Ca | re for | | | Opti | mal D | iabet | tes Care | | | | | | Optin | nal Va | scul | ar Care | | | |
|--|--------------------------------|--------------------|--|----------|-----------------------|-------------------------|---------------------------------------|-------------|------------------------|---|--------------------|--|---|---------------------|-------------------------|------------------|-------------|------------------------|---|
| Chronic Conc | | | | | ribution It Popula | | | | | | | | | ribution t Popul | | | | | |
| See page 89 for an explanation of to | erms. | Rate | terval of Risk | | | e Programs | on or Sample | | sted Rate | terval of Non- Rate | Rate | terval of Risk | | | e Programs | on or Sample | | sted Rate | terval of Non- Rate |
| PHYSICIAN CLINIC NAME | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non- Risk Adjusted Rate | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non- Risk Adjusted Rate |
| Overall Minnesota Clinic Average | | 28% | 28–29% | 29% | 55% | 16% | | | 28% | 28-29% | 34% | 34-35% | 43% | 47% | 9% | | | 34% | 34-35% |
| SPICER | | | | • | | | • | | | | | | | | | | | | |
| Paynesville Green Lake Medical Clinic | Paynesville Area Health System | 9% | 2%-24% | 32% | 39% | 29% | Total Population | 31 | 6% | 2%-21% | * | * | * | * | * | * | * | * | * |
| SPRING GROVE | | | | , | | | | | | | | | , | | | | | | |
| Gundersen Lutheran | Gundersen Clinic | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| SPRING VALLEY | | | | ** | | | 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | | | | | | | | | | | | |
| Olmsted Medical Center | Olmsted Medical Center | 8% | 4%-14% | 36% | 44% | 20% | Total Population | 133 | 8% | 4%-13% | 26% | 18%-38% | 47% | 40% | 13% | Total Populatio | on 55 | 27% | 17%-40% |
| SPRINGFIELD | | | | | | | • • • • • • • • • • • • • • • • • • • | | | | | | | | | | | | |
| Mayo Health System-Immanuel St. Joseph | Mayo Health System | 34% | 24%-47% | 40% | 52% | 8% | Sample | 60 | 35% | 24%-48% | 38% | 28%-50% | 62% | 38% | 0% | Sample | 60 | 40% | 29%-53% |
| ST. CHARLES | | | | ** | | | | | | | | | * · · · · · · · · · · · · · · · · · · · | | | | | | |
| Olmsted Medical Center | Olmsted Medical Center | 26% | 17%-37% | 25% | 59% | 15% | Total Population | 70 | 26% | 17%-37% | * | * | * | * | * | * | * | * | * |
| ST. JAMES | | | | ** | | | | | | | | | * · · · · · · · · · · · · · · · · · · · | | | | | | |
| Mayo Health System-Immanuel St. Joseph | Mayo Health System | 25% | 15%-37% | 38% | 42% | 20% | Sample | 60 | 25% | 16%-37% | 34% | 20%-52% | 50% | 38% | 13% | Total Populatio | on 32 | 34% | 20%-52% |
| Moulton & Parsons MDs | | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| ST. PETER | | | | ** | | | 0 | | | | | | , , , , , , , , , , , , , , , , , , , | | | | | | |
| Mayo Health System-Immanuel St. Joseph | Mayo Health System | 36% | 25%-49% | 30% | 52% | 18% | Sample | 60 | 37% | 26%-49% | 38% | 26%-50% | 40% | 47% | 12% | Sample | 60 | 38% | 27%-51% |
| Mankato Clinic- Daniel's Health Center | Mankato Clinic | 20% | 13%-31% | 18% | 70% | 12% | Sample | 60 | 23% | 14%-35% | 40% | 26%-55% | 30% | 65% | 5% | Total Populatio | on 40 | 40% | 26%-55% |

^{*} Sufficient data not available. + Data not reported (for information on Physician Clinic Inclusion see page 199).

| | | | - 1 | ····a· – | lube | tes Care | | | | | | Optii | mai ve | Jocui | ar Care | | | |
|--------------------------------|--|---|---|--|---|--|---|---------------------------------------|---|--|--|--|--|--------------------|--|--|--|--|
| itions | | | | ribution it Popul | | | | | | | | | ribution It Popul | | | | | |
| rms. | Rate | erval of Risk | 0 0 0 0 0 0 0 0 0 | | e Programs | ın or Sample | | sted Rate | erval of Non- Rate | Rate | erval of Risk | 0 0 0 0 0 0 0 0 0 0 | | e Programs | ın or Sample | 0 | sted Rate | erval of Non- Rate |
| MEDICAL GROUP NAME | Risk Adjusted F | Confidence Int Adjusted Rate | Medicare | Commercial | MN Health Car | Total Populatio | Sample Size | Non-Risk Adjus | Confidence Int Risk Adjusted I | Risk Adjusted I | Confidence Int Adjusted Rate | Medicare | Commercial | MN Health Car | Total Populatio | Sample Size | Non-Risk Adjus | Confidence Interval of Non- Risk Adjusted Rate |
| | 28% | 28–29% | 29% | 55% | 16% | | | 28% | 28-29% | 34% | 34-35% | 43% | 47% | 9% | | | 34% | 34-35% |
| River's Edge Hospital & Clinic | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| | | | | | | | | | | | | | | | | | | |
| Olmsted Medical Center | 8% | 4%-15% | 35% | 51% | 14% | Total Population | n 94 | 7% | 4%-15% | 28% | 16%-45% | 37% | 60% | 3% | Total Population | n 30 | 30% | 17%-48% |
| | | | | | | | | | | | | | | | | | | |
| Sanford Clinic | 14% | 8%-25% | 38% | 45% | 17% | Sample | 60 | 15% | 8%-26% | 21% | 13%-33% | 52% | 36% | 12% | Sample | 66 | 20% | 12%-31% |
| | | | | | | • | | | | | | | | | | | | |
| Avera Health/Avera Tri-State | 8% | 4%-17% | 35% | 55% | 11% | Sample | 66 | 8% | 3%-17% | 17% | 10%-30% | 48% | 48% | 4% | Total Populatio | n 48 | 17% | 9%-30% |
| | | | | | | | | | | | | | | | | | | |
| Mayo Health System | 30% | 19%-42% | 48% | 41% | 11% | Sample | 60 | 32% | 21%-44% | 37% | 27%-49% | 47% | 53% | 0% | Sample | 60 | 38% | 27%-51% |
| | | | | | | • | | • • • • • • • • • • • • • • • • • • • | | | | | | | | | | |
| Olmsted Medical Center | 14% | 8%-28% | 44% | 53% | 3% | Total Population | n 34 | 15% | 6%-30% | * | * | * * | * | * | * | * | * | * |
| | | | | | | 2° 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | | ' | | | | * | | | | | | |
| Mayo Health System | 21% | 13%-32% | 22% | 67% | 12% | Sample | 60 | 22% | 13%-34% | 46% | 34%-58% | 48% | 43% | 8% | Sample | 60 | 47% | 35%-59% |
| | | | | | | | | | | | | | | | | | | |
| Paynesville Area Health System | 4% | 1%-13% | 39% | 37% | 22% | Total Population | n 55 | 4% | 1%-12% | * | * | * | * | * | * | * | * | * |
| r | MEDICAL GROUP NAME River's Edge Hospital & Clinic Olmsted Medical Center Sanford Clinic Avera Health/Avera Tri-State Mayo Health System Olmsted Medical Center | MEDICAL GROUP NAME 28% River's Edge Hospital & Clinic * Olmsted Medical Center 8% Sanford Clinic 14% Avera Health/Avera Tri-State 8% Mayo Health System 30% Olmsted Medical Center 14% | MEDICAL GROUP NAME 28% River's Edge Hospital & Clinic * Olmsted Medical Center 8% 4%-15% Avera Health/Avera Tri-State 8% 4%-17% Mayo Health System 30% 19%-42% Olmsted Medical Center 14% 8%-25% | MEDICAL GROUP NAME 28% River's Edge Hospital & Clinic * Olmsted Medical Center 8% 4%-15% 35% Sanford Clinic 14% 8%-25% 38% Avera Health/Avera Tri-State 8% 4%-17% 35% Mayo Health System 30% 19%-42% 48% Olmsted Medical Center 14% 8%-28% 44% Mayo Health System 21% 13%-32% 22% | MEDICAL GROUP NAME 28% 28-29% 29% 55% | MEDICAL GROUP NAME 28% 28-29% 29% 55% 16% | MEDICAL GROUP NAME 28% 28-28% 29% 55% 16% | MR | MEDICAL GROUP NAME 19 19 19 19 19 19 19 1 | Patient Population Patient | MEDICAL GROUP NAME 28% 28-29% 29% 55% 16% 28% 28-29% 34% | MEDICAL GROUP NAME 18% 28% 28-29% 29% 55% 16% 16% 16% 28% 28-29% 28% 2 | Patient Population Sum Patient Population P | Patient Population | Patient Population Patient | Patient Population Patient | Patient Population Patient | MEDICAL GROUP NAME 28% 28-29% 28% 55% 18% 28% 28% 51% 18% 38-29% 28 |

^{*} Sufficient data not available. + Data not reported (for information on Physician Clinic Inclusion see page 199).

| Quality of Car | re for | | | Opti | mal D | iabet | tes Care | | | | | | Optin | nal Va | scul | ar Care | | | |
|---|---|--------------------|--|---------------------------------------|----------------------|-------------------------|----------------------------|--------------------------------------|------------------------|---|--------------------|---|---------------------------------------|---------------------|-------------------------|------------------|-----|------------------------|---|
| Chronic Cond | i | | | | ribution nt Popul | | | | | | | | | ribution t Popul | | | | | |
| See page 89 for an explanation of terms. | | Rate | terval of Risk | | | | on or Sample | 0 0 0 0 0 0 0 0 | sted Rate | terval of Non- Rate | Rate | terval of Risk | | | e Programs | on or Sample | | sted Rate | terval of Non- Rate |
| PHYSICIAN CLINIC NAME | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non- Risk Adjusted Rate | Risk Adjusted Rate | Confidence Interval of Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population | | Non-Risk Adjusted Rate | Confidence Interval of Non- Risk Adjusted Rate |
| Overall Minnesota Clinic Average | | 28% | 28–29% | 29% | 55% | 16% | | | 28% | 28-29% | 34% | 34-35% | 43% | 47% | 9% | | | 34% | 34-35% |
| WESTBROOK | | | | | | | | | | | | | | | | | | | |
| Sanford Clinic Westbrook | Sanford Clinic | 14% | 7%-24% | 52% | 44% | 5% | Sample | 66 | 14% | 7%-24% | 11% | 5%-24% | 64% | 31% | 5% | Total Population | 39 | 10% | 4%-24% |
| WILLMAR | | | | | | | | | | | | | | | | | | | |
| Affilliated Community Medical Centers | Affiliated Community Medical Centers | 34% | 32%-37% | 34% | 47% | 19% | Total Populatio | n 1547 | 34% | 32%-37% | 44% | 39%-50% | 46% | 45% | 8% | Total Population | 343 | 45% | 39%-50% |
| Family Practice Medical Center of Willmar | Family Practice Medical Center of Willmar | 33% | 29%-38% | 41% | 41% | 18% | Total Populatio | n 526 | 34% | 30%-38% | 33% | 26%-40% | 65% | 30% | 5% | Total Population | 167 | 37% | 30%-45% |
| WINDOM | | | | • • • • • • • • • • • • • • • • • • • | | | | | | | | | | | | | | | |
| Avera- United Medical Clinic | Avera Health/Avera Tri-State | 6% | 3%-14% | 32% | 57% | 11% | Sample | 79 | 6% | 3%-14% | * | * | * | * | * | * | * | * | * |
| Hartberg Medical Clinic | Hartberg Medical Clinic | 15% | 8%-25% | 38% | 52% | 10% | Sample | 61 | 15% | 8%-26% | 21% | 12%-37% | 56% | 41% | 3% | Total Population | 32 | 22% | 11%-39% |
| Sanford Clinic Windom | Sanford Clinic | 9% | 5%-18% | 39% | 52% | 9% | Sample | 67 | 9% | 4%-18% | * | * | * | * | * | * | * | * | * |
| Windom Family Medical Center | | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| WINONA | | | | ** | | | | | | | | | | | | | | | |
| Family Medicine of Winona | Family Medicine of Winona | 24% | 15%-36% | 37% | 47% | 17% | Sample | 60 | 23% | 14%-35% | 24% | 14%-39% | 51% | 31% | 17% | Total Population | 36 | 28% | 16%-44% |
| Winona Health- Winona Health Clinics | Winona Health | 21% | 14%-29% | 33% | 50% | 17% | Sample | 120 | 21% | 15%-29% | 39% | 31%-48% | 53% | 38% | 9% | Sample | 119 | 39% | 30%-48% |
| WINSTED | | | | | | | | | | | | | | | | | | | |
| Ridgeview Winsted Clinic | Ridgeview Clinics | 4% | 2%-11% | 39% | 39% | 23% | Total Populatio | n 60 | 5% | 2%-14% | * | * | * | * | * | * | * | * | * |
| | | | | ** | | | | | | | | | · · · · · · · · · · · · · · · · · · · | | | | | | |

^{*} Sufficient data not available. + Data not reported (for information on Physician Clinic Inclusion see page 199).

| Quality of Ca | ire for | | | Opti | mal D | iabe | tes Care | • | | | | | Optin | nal Va | ascula | ar Care | | | |
|--|------------------------------|--------------------|--|----------|-----------------------|-------------------------|--|-------------|------------------------|---|--------------------|--|----------|-------------------------------|-------------------------|----------------------------|-------------|------------------------|---|
| Chronic Cond | | | | | tribution nt Popul | | | | | | | | | tribution of nt Population | | | | | |
| See page 89 for an explanation of terms. | | Rate | terval of Risk | | | e Programs | on or Sample | | sted Rate | terval of Non- Rate | Rate | terval of Risk | | | e Programs | on or Sample | | sted Rate | terval of Non- Rate |
| PHYSICIAN CLINIC NAME | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non- Risk Adjusted Rate | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non- Risk Adjusted Rate |
| Overall Minnesota Clinic Average | | 28% | 28–29% | 29% | 55% | 16% | 0 | | 28% | 28-29% | 34% | 34-35% | 43% | 47% | 9% | | | 34% | 34-35% |
| WORTHINGTON | | | | | | | • | | | | | | | | | | | | |
| Avera Worthington Specialty Clinic | Avera Health/Avera Tri-State | 9% | 5%-17% | 30% | 60% | 10% | Sample | 80 | 9% | 4%-17% | 22% | 15%-33% | 56% | 36% | 8% | Sample | 77 | 23% | 15%-34% |
| Sanford Clinic | Sanford Clinic | 5% | 2%-14% | 27% | 48% | 24% | Sample | 61 | 5% | 2%-13% | 13% | 7%-24% | 47% | 44% | 10% | Sample | 62 | 13% | 7%-23% |
| ZUMBROTA | | | | | | | | | | | | | | | | | | | |
| Fairview Red Wing Zumbrota Clinic | Fairview Health Services | 22% | 16%-30% | 29% | 65% | 7% | Total Population | on 153 | 22% | 16%-29% | 32% | 23%-44% | 43% | 49% | 8% | Total Populati | on 66 | 33% | 23%-45% |
| | | | | | | | | | | | | | | | | | | | |
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^{*} Sufficient data not available. + Data not reported (for information on Physician Clinic Inclusion see page 199).

| Quality of Ca | re for | | Co | ontrol | ling H | ligh E | Blood I | Pressu | ıre | | Use | of Appro | priate | Medic | ation | ns for Peo | ole wit | h Asthma |
|--|--------------------------------------|--------------------|--|----------|----------------------------------|-------------------------|--|-------------|---|---|--------------------|--|---------------------------------------|------------------------------------|-------------------------|---|---------------------------------------|---|
| Chronic Conc | | | | Dis | dical Gr tribution nt Popu | n of | | | | | | | Dist | dical Gro tribution nt Popul | n of | | | |
| See page 89 for an explanation of terms. | | Rate | terval of Risk | | | e Programs | on or Sample | | sted Rate | terval of Non- Rate | Rate | terval of Risk | | | e Programs | on or Sample | ctod Data | terval of Non- Rate |
| PHYSICIAN CLINIC NAME | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non- Risk Adjusted Rate | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or | Sample Size Non-Dick Adjucted Date | Confidence Interval of Non- Risk Adjusted Rate |
| Overall Minnesota Clinic Average | | 70% | 68–72% | 28% | 60% | 12% | | | 70% | 68–72% | 92% | 92–92% | NA NA | 77% | 23% | | 92 | % 92–92% |
| ADRIAN | | | | • | | | 9 0 0 0 0 | | • • • • • • • | | | | | | | • | | |
| Sanford Clinic Adrian | Sanford Clinic | 58% | 37%-79% | 0% | 86% | 14% | Sample | 265 | 52% | 27%-76% | 87% | 82%-92% | N/A | 93% | 7% | Total Population 2 | 34 87 | % 82%-91% |
| ALBERT LEA | | | | | | | | | , | | | | | | | • | | |
| Mayo Health System- Albert Lea Medical Center | Mayo Health System | 74% | 64%-84% | 7% | 74% | 19% | Sample | 386 | 72% | 61%-81% | 91% | 88%-94% | N/A | 63% | 37% | Total Population 4 | 19 91 | % 88%-94% |
| APPLETON | | | | | | | ************************************** | | | | | | | | | | | |
| Appleton Clinic | Appleton Area Health Services | 51% | 32%-71% | 13% | 69% | 18% | Sample | 153 | 46% | 28%-66% | 91% | 87%-94% | N/A | 63% | 37% | Total Population 2 | 29 92 | % 87%-95% |
| ARLINGTON | | | | | | | | | | | | | | | | | | |
| Sibley Medical Center | Sibley Medical Center | * | * | * | * | * | * | * | * | * | * | * | N/A | * | * | * | * * | * |
| AUSTIN | | | | | | | | | | | | | | | | | | |
| Mayo Health System- Austin Medical Center | Mayo Health System | 74% | 64%-84% | 7% | 74% | 19% | Sample | 386 | 72% | 61%-81% | 91% | 88%-94% | N/A | 63% | 37% | Total Population 4 | 19 91 | % 88%-94% |
| Smart Clinic | Smart Clinic | * | * | * | * | * | * * | * | * | * | * | * | N/A | * | * | * | * * | * |
| BENSON | | | | | | | ** | | 1 | | | | | | | | | |
| Affilliated Community Medical Centers | Affiliated Community Medical Centers | 61% | 36%-87% | 12% | 71% | 18% | Sample | 111 | 57% | 30%-80% | 95% | 92%-97% | N/A | 70% | 30% | Total Population 2 | 28 95 | % 92%-97% |
| BLUE EARTH | | | | | | | ** * * * * * * * * * * * * * * * * * * | | 9 • • • • • • • • • • • • • • • • • • • | • • • • • • • • • • • • • | | | | | | | | |
| United Hospital District Clinic | United Hospital District Clinic | * | * | * | * | * | * * | * | * | * | * | * | N/A | * | * | * | * * | * |
| | | | | | | | ** | | 1 | | | | · · · · · · · · · · · · · · · · · · · | | | | | |

^{*} Sufficient data not available.

| Quality of Care for | | | Co | ontrol | ling H | ligh B | Blood F | Pressu | ıre | | Use | of Appro | priate | Medic | ation | s for Pec | ple v | vith A | sthma |
|---|---|--------------------|--|----------|----------------------------------|-------------------------|----------------------------|-------------|---|--|--------------------|--------------------------------------|----------------------|------------|-------------------------|---------------------------------------|-------------|------------------------|---|
| Chronic Conc | | | | Dist | dical Gr tribution nt Popu | n of | | | *** ** ** ** ** ** ** ** ** ** ** ** ** | | | | Med Dist Patie | | | | | | |
| See page 89 for an explanation of terms. | | Rate | erval of Risk | | | e Programs | on or Sample | | sted Rate | Interval of Non- ed Rate | Rate | erval of Risk | | | e Programs | on or Sample | | sted Rate | erval of Non- Rate |
| PHYSICIAN CLINIC NAME | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interva Risk Adjusted Rate | Risk Adjusted Rate | Confidence Interval Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interval o Risk Adjusted Rate |
| Overall Minnesota Clinic Average | | 70% | 68–72% | 28% | 60% | 12% | | | 70% | 68-72% | 92% | 92–92% | NA | 77% | 23% | | | 92% | 92–92% |
| BYRON | | | | • | | | | | • | | | | | | | • | | | |
| Olmsted Medical Center | Olmsted Medical Center | 57% | 24%-91% | 12% | 64% | 24% | Sample | 89 | 53% | 27%-77% | 93% | 86%-96% | N/A | 53% | 47% | Total Population | 117 | 91% | 85%-95% |
| CALEDONIA | | | | | | | | | | | | | | | | | | | |
| Mayo Health System-Franciscan Skem | p Mayo Health System | 74% | 64%-84% | 7% | 74% | 19% | Sample | 386 | 72% | 61%-81% | 91% | 88%-94% | N/A | 63% | 37% | Total Population | 419 | 91% | 88%-94% |
| CANBY | | | | | | | | | | | | | | | | | | | |
| Sanford Clinic Canby | Sanford Clinic | 58% | 37%-79% | 0% | 86% | 14% | Sample | 265 | 52% | 27%-76% | 87% | 82%-92% | N/A | 93% | 7% | Total Population | 234 | 87% | 82%-91% |
| CANNON FALLS | | | | | | | | | | | | | | | | | | | |
| Mayo Health System- Cannon Falls Medical Center | Mayo Health System | 74% | 64%-84% | 7% | 74% | 19% | Sample | 386 | 72% | 61%-81% | 91% | 88%-94% | N/A | 63% | 37% | Total Population | 419 | 91% | 88%-94% |
| CHATFIELD | | | | * | | | | | • | | | | | | | • | • | | |
| Olmsted Medical Center | Olmsted Medical Center | 57% | 24%-91% | 12% | 64% | 24% | Sample | 89 | 53% | 27%-77% | 93% | 86%-96% | N/A | 53% | 47% | Total Population | 117 | 91% | 85%-95% |
| CLARA CITY | | | | | | | | | | | | | | | | | | | |
| Clara City Clinic | Chippewa County Montevideo Hospital & Medical Clinic | 51% | 32%-71% | 13% | 69% | 18% | Sample | 153 | 46% | 28%-66% | 91% | 87%-94% | N/A | 63% | 37% | Total Population | 229 | 92% | 87%-95% |
| CLARKFIELD | | | | | | | | | | | | | | | | | | | |
| Clarkfield Clinic | Chippewa County Montevideo Hospital & Medical Clinic | 51% | 32%-71% | 13% | 69% | 18% | Sample | 153 | 46% | 28%-66% | 91% | 87%-94% | N/A | 63% | 37% | Total Population | 229 | 92% | 87%-95% |
| DASSEL | | | | | | | | | | | | | | | | · · · · · · · · · · · · · · · · · · · | | | |
| Hutchinson Area Health Care- Dassel Medical Center | Hutchinson Area Health Care | * | * | * | * | * | * | * | * * | * | * | * | N/A | * | * | * * | * | * | * |

^{*} Sufficient data not available.

| Quality of Care for | | | Co | ontrol | ling H | ligh E | Blood F | Pressu | ire | | Use o | of Appro | priate | Medic | ation | s for People | with A | Asthma |
|--|--|--------------------|--|------------------|------------------------------------|-------------------------|--|-------------|--|---|--------------------|---|---|------------------------------------|-------------------------|--------------------------------------|------------------------|---|
| Chronic Cond | | | | Dist | lical Gre tribution nt Popul | n of | | | | | | | Dist | lical Gro tribution nt Popul | ı of | | 0 0 0 0 0 | |
| See page 89 for an explanation of t | See page 89 for an explanation of terms. | | terval of Risk | | | e Programs | on or Sample | | sted Rate | terval of Non- Rate | Rate | terval of Risk | | | e Programs | on or Sample | sted Rate | terval of Non- Rate |
| PHYSICIAN CLINIC NAME | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non- Risk Adjusted Rate | Risk Adjusted Rate | Confidence Interval of Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non- Risk Adjusted Rate |
| Overall Minnesota Clinic Average | | 70% | 68–72% | 28% | 60% | 12% | | | 70% | 68-72% | 92% | 92–92% | NA | 77% | 23% | | 92% | 92–92% |
| Meeker Memorial Clinic | Meeker Memorial Clinic | * | * | * | * | * | * | * | * | * | * | * | N/A | * | * | * * | * | * |
| DAWSON | | | | | | | | | | | | | . · · · · · · · · · · · · · · · · · · · | | | | | , |
| Dawson Clinic | Dawson Clinic | 51% | 32%-71% | 13% | 69% | 18% | Sample | 153 | 46% | 28%-66% | 91% | 87%-94% | N/A | 63% | 37% | Total Population 229 | 92% | 87%-95% |
| EDEN VALLEY | | | | | | | | | | | | | · · · · · · · · · · · · · · · · · · · | | | | | |
| Paynesville Eden Valley Medical Clinic | Paynesville Area Health System | 69% | 58%-80% | 23% | 67% | 10% | Sample | 65 | 71% | 51%-86% | * | * | N/A | * | * | * * | * | * |
| EDGERTON | | | | · · · · | | | o | | | | | • • • • • • • • • • | , | | | | | |
| Edgerton Family Clinic Avera | Avera Health/Avera Tri-State | 38% | 28%-47% | 2% | 79% | 19% | Sample | 121 | 25% | 15%-39% | 92% | 85%-95% | N/A | 75% | 25% | Total Population 110 | 92% | 85%-96% |
| FAIRFAX | : | | | | | | o o o o o o o o o o o o o o o o o o o | | · | | | | | | | - - - - - - - - | | |
| Fairfax Medical Clinic | | * | * | * | * | * | * | * | * | * | * | * | N/A | * | * | * * | * | * |
| FAIRMONT | | | | | | | 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | | · · · · | | | | | | | | | |
| Braaten Medical Clinic | | * | * | * | * | * | * | * | * | * | * | * | N/A | * | * | * * | * | * |
| Dulcimer Medical Center | Dulcimer Medical Center | * | * | * | * | * | * | * | * | * | * | * | N/A | * | * | * * * | * | * |
| Mayo Health System- Fairmont Medical Center | Mayo Health System | 74% | 64%-84% | 7% | 74% | 19% | Sample | 386 | 72% | 61%-81% | 91% | 88%-94% | N/A | 63% | 37% | Total Population 419 | 91% | 88%-94% |
| Smart Clinic | Smart Clinic | * | * | * | * | * | * | * | * | * | * | * | N/A | * | * | * * | * | * |
| FARIBAULT | | | | | | | 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | | | | | | | | | , | | |
| Allina Medical Clinic | Allina Medical Clinic | 76% | 71%-81% | 28% | 65% | 8% | Sample | 650 | 76% | 71%-81% | 91% | 90%-93% | N/A | 82% | 18% | Total Population 1562 | 92% | 90%-93% |

^{*} Sufficient data not available.

| Quality of Care for | | | Co | ontrol | ling H | ligh E | Blood F | ressu | ıre | | Use o | of Appro | priate | Medic | ation | s for People | with A | Confidence Interval of Non-826-826 Risk Adjusted Rate | | | | | |
|---|--------------------------------------|--------------------|--|----------|-----------------------------------|-------------------------|----------------------------|-------------|------------------------|--|--------------------|--------------------------------------|---|------------------------------------|-------------------------|---|------------------------|---|--|--|--|--|--|
| Chronic Conc | | | | Dist | dical Gre tribution nt Popu | n of | | | | | | | Dist | lical Gro tribution nt Popul | | | | | | | | | |
| See page 89 for an explanation of terms. | | Rate | terval of Risk | | | e Programs | on or Sample | | sted Rate | Interval of Non- ed Rate | Rate | erval of Risk | | | e Programs | on or Sample | sted Rate | terval of Non- Rate | | | | | |
| PHYSICIAN CLINIC NAME | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interva Risk Adjusted Rate | Risk Adjusted Rate | Confidence Interval Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample Sample Size | Non-Risk Adjusted Rate | Confidence In Risk Adjusted | | | | | |
| Overall Minnesota Clinic Average | | 70% | 68-72% | 28% | 60% | 12% | | | 70% | 68–72% | 92% | 92–92% | NA | 77% | 23% | | 92% | 92–92% | | | | | |
| Mayo Health System- Cannon Valley Clinic | Mayo Health System | 74% | 64%-84% | 7% | 74% | 19% | Sample | 386 | 72% | 61%-81% | 91% | 88%-94% | N/A | 63% | 37% | Total Population 419 | 91% | 88%-94% | | | | | |
| FULDA | | | | | | | | | | | | | | | | | | | | | | | |
| Avera Worthington Specialty Clinics | Avera Health/Avera Tri-State | 38% | 28%-47% | 2% | 79% | 19% | Sample | 121 | 25% | 15%-39% | 92% | 85%-95% | N/A | 75% | 25% | Total Population 110 | 92% | 85%-96% | | | | | |
| GLENCOE | | | | | | | | | | | | | | | | | | | | | | | |
| Glencoe Regional Health Services | Glencoe Regional Health Services | 51% | 32%-71% | 13% | 69% | 18% | Sample | 153 | 46% | 28%-66% | 91% | 87%-94% | N/A | 63% | 37% | Total Population 229 | 92% | 87%-95% | | | | | |
| GRACEVILLE | | | | | | | | | | | | | , · · · · · · · · · · · · · · · · · · · | | | | | | | | | | |
| Graceville Health Center Clinic | Graceville Health Center Clinic | * | * | * | * | * | * | * | * | * | * | * | N/A | * | * | * * | * | * | | | | | |
| GRANITE FALLS | | | | | | | | | | | | | | | | | | | | | | | |
| Affilliated Community Medical Centers | Affiliated Community Medical Centers | 61% | 36%-87% | 12% | 71% | 18% | Sample | 111 | 57% | 30%-80% | 95% | 92%-97% | N/A | 70% | 30% | Total Population 228 | 95% | 92%-97% | | | | | |
| HARMONY | | | | | | | | | | | | | | | | | | | | | | | |
| Gundersen Lutheran | Gundersen Clinic | 72% | 63%-79% | 0% | 82% | 18% | Sample | 72 | 71% | 59%-80% | 94% | 85%-97% | N/A | 75% | 25% | Total Population 59 | 93% | 84%-97% | | | | | |
| HECTOR | | | | | | | | | | | | | | | | | | | | | | | |
| Renville County Hospital and Clinics | Renville County Hospital and Clinics | 51% | 32%-71% | 13% | 69% | 18% | Sample | 153 | 46% | 28%-66% | 91% | 87%-94% | N/A | 63% | 37% | Total Population 229 | 92% | 87%-95% | | | | | |
| HENDRICKS | | | | | | | | | | | | | | | | | | | | | | | |
| Hendricks Clinic P.A. | Hendricks Clinic | 51% | 32%-71% | 13% | 69% | 18% | Sample | 153 | 46% | 28%-66% | 91% | 87%-94% | N/A | 63% | 37% | Total Population 229 | 92% | 87%-95% | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | |

^{*} Sufficient data not available.

| Quality of Ca | re for | | Co | ontrol | ling H | ligh E | Blood F | Pressu | ire | | Use | of Appro | priate | Medic | ation | s for Pe | ople v | vith A | Asthma |
|--|---------------------------------------|--------------------|--|---------------------------------------|----------------------------------|-------------------------|----------------------------|-------------|---------------------------------------|---|--------------------|--|----------|------------------------------------|-------------------------|----------------------------|-------------|------------------------|---|
| Chronic Cond | T | | | Dis | dical Gr tribution nt Popu | n of | | | | | | | Dist | lical Gro tribution nt Popul | ı of | | | | |
| See page 89 for an explanation of | terms. | Rate | terval of Risk | 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | | e Programs | on or Sample | | sted Rate | terval of Non- Rate | Rate | terval of Risk | | | e Programs | on or Sample | 0 | sted Rate | terval of Non- Rate |
| PHYSICIAN CLINIC NAME | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non- Risk Adjusted Rate | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non- Risk Adjusted Rate |
| Overall Minnesota Clinic Average | | 70% | 68–72% | 28% | 60% | 12% | | | 70% | 68-72% | 92% | 92–92% | NA | 77% | 23% | | | 92% | 92–92% |
| HOUSTON | | | | | | | • | | | | | | | | | | | | |
| Gunderson Lutheran | Gundersen Clinic | 72% | 63%-79% | 0% | 82% | 18% | Sample | 72 | 71% | 59%-80% | 94% | 85%-97% | N/A | 75% | 25% | Total Population | n 59 | 93% | 84%-97% |
| HUTCHINSON | | | | | | | | | | | | | | | | | | | |
| Hutchinson Medical Center | Hutchinson Medical Center | 48% | 40%-57% | 16% | 77% | 7% | Sample | 68 | 41% | 21%-64% | 93% | 83%-98% | N/A | 76% | 24% | Total Population | n 46 | 93% | 82%-98% |
| IVANHOE | | | | | | | | | ** | | | | | | | | | | |
| Ivanhoe Clinic | | * | * | * | * | * | * | * | * | * | * | * | N/A | * | * | * | * : | * | * |
| JACKSON | | | | | | | | | | | | | | | | | | | |
| Sacred Heart Mercy Health Care Center | Sacred Heart Mercy Health Care Center | * | * | * | * | * | * | * | * | * | * | * | N/A | * | * | * | * : | * | * |
| Sanford Clinic Jackson | Sanford Clinic | 58% | 37%-79% | 0% | 86% | 14% | Sample | 265 | 52% | 27%-76% | 87% | 82%-92% | N/A | 93% | 7% | : Total Population | n 234 | 87% | 82%-91% |
| KASSON | | | | | | | | | · · · · · · · · · · · · · · · · · · · | | | | | | | | | | |
| Mayo Clinic | Mayo Clinic | 62% | 40%-83% | 10% | 61% | 29% | Sample | 93 | 52% | 27%-77% | 96% | 90%-98% | N/A | 57% | 43% | Total Population | 1 98 | 94% | 87%-97% |
| LA CRESCENT | | | | · · · · · · · · · · · · · · · · · · · | | | * | | ** | | | | * | | | | | | |
| Mayo Health System - Franciscan Skemp | Mayo Health System | 74% | 64%-84% | 7% | 74% | 19% | Sample | 386 | 72% | 61%-81% | 91% | 88%-94% | N/A | 63% | 37% | : Total Population | 1 419 | 91% | 88%-94% |
| LAKE BENTON | | | | | | | | | | | | | | | | | | | |
| Lake Benton Healthcare Center | Avera Health/Avera Tri-State | 38% | 28%-47% | 2% | 79% | 19% | Sample | 121 | 25% | 15%-39% | 92% | 85%-95% | N/A | 75% | 250/ | : Total Population | . 110 | 92% | 85%-96% |

^{*} Sufficient data not available.

| Quality of Ca | re for | | C | ontrol | ling H | ligh E | Blood F | ressu | ıre | | Use | of Appro | priate | Medic | ation | s for Peop | le with | Asthma |
|--|---------------------------------------|--------------------|--|----------|----------------------------------|-------------------------|----------------------------|-------------|---|---|--------------------|--|----------|------------------------------------|-------------------------|---|------------------------|---|
| Chronic Cond | | | | Dist | lical Gr tribution nt Popu | n of | | | • | | | | Dist | lical Gro tribution nt Popul | ı of | | • | |
| See page 89 for an explanation of t | ierms. | Rate | terval of Risk | | | e Programs | on or Sample | | sted Rate | terval of Non- Rate | Rate | terval of Risk | | | e Programs | on or Sample | sted Rate | terval of Non- Rate |
| PHYSICIAN CLINIC NAME | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interval Risk Adjusted Rate | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample Samnle Size | Non-Risk Adjusted Rate | Confidence Interval o Risk Adjusted Rate |
| Overall Minnesota Clinic Average | | 70% | 68-72% | 28% | 60% | 12% | | | 70% | 68–72% | 92% | 92–92% | NA | 77% | 23% | | 92% | 92–92% |
| LAKE CITY | | | | | | | | | | | | | | | | | | |
| Mayo Health System-Lake City | Mayo Health System | 74% | 64%-84% | 7% | 74% | 19% | Sample | 386 | 72% | 61%-81% | 91% | 88%-94% | N/A | 63% | 37% | Total Population 41 | 9 91% | 88%-94% |
| LAKE CRYSTAL | | | | | | | | | | | | | | | | | | |
| Mankato Clinic | Mankato Clinic | 73% | 54%-91% | 3% | 83% | 14% | Sample | 81 | 72% | 46%-89% | 95% | 89%-97% | N/A | 72% | 28% | Total Population 12 | 7 94% | 89%-97% |
| LAKEFIELD | · | | | | | | | | | | | | | | | | | |
| Avera Worthington Specialty Clinics | Avera Health/Avera Tri-State | 38% | 28%-47% | 2% | 79% | 19% | Sample | 121 | 25% | 15%-39% | 92% | 85%-95% | N/A | 75% | 25% | Total Population 11 | 0 92% | 85%-96% |
| Sanford Clinic Lakefield | Sanford Clinic | 58% | 37%-79% | 0% | 86% | 14% | Sample | 265 | 52% | 27%-76% | 87% | 82%-92% | N/A | 93% | 7% | Total Population 23 | 4 87% | 82%-91% |
| LE SUEUR | | | | | | | | | | | | | | | | | | |
| Mayo Health System- Immanuel St. Joseph | Mayo Health System | 74% | 64%-84% | 7% | 74% | 19% | Sample | 386 | 72% | 61%-81% | 91% | 88%-94% | N/A | 63% | 37% | Total Population 41 | 9 91% | 88%-94% |
| Southern Metro Medical Clinics | Southern Metro Medical Clinics | * | * | * | * | * | * | * | * * | * | * | * | N/A | * | * | * * | * | * |
| LEWISTON | | | | | | | | | * · · · · · · · · · · · · · · · · · · · | | | | | | | | | |
| Winona Health | Winona Health | 56% | 37%-74% | 0% | 63% | 37% | Sample | 80 | 54% | 36%-72% | 87% | 77%-93% | N/A | 70% | 30% | Total Population 6 | 86% | 76%-93% |
| LITCHFIELD | · · · · · · · · · · · · · · · · · · · | | | | | | | | | | | | | | | : | | |
| Affilliated Community Medical Centers- Litchfield Clinic (East) | Affiliated Community Medical Centers | 61% | 36%-87% | 12% | 71% | 18% | Sample | 111 | 57% | 30%-80% | 95% | 92%-97% | N/A | 70% | 30% | Total Population 22 | 8 95% | 92%-97% |
| Affilliated Community Medical Centers- Litchfield Clinic (West) | Affiliated Community Medical Centers | 61% | 36%-87% | 12% | 71% | 18% | Sample | 111 | 57% | 30%-80% | 95% | 92%-97% | N/A | 70% | 30% | Total Population 22 | 8 95% | 92%-97% |

^{*} Sufficient data not available.

| Quality of Ca | re for | | Co | ontrol | ling H | igh E | Blood F | ressu | ıre | | Use | of Appro | priate | Medic | ation | s for Peop | le with | Asthma |
|---|--|--------------------|--|----------|------------------------------------|-------------------------|---|-------------|---------------------------------------|---|--------------------|--|----------|------------------------------------|-------------------------|--|------------------------|---|
| Chronic Conc | litions | | | Dist | lical Gre tribution nt Popul | ı of | | | | | | | Dist | lical Gro tribution nt Popul | of | | • | |
| See page 89 for an explanation of to | erms. | Rate | terval of Risk | | | e Programs | on or Sample | | sted Rate | terval of Non- Rate | Rate | terval of Risk | | | e Programs | on or Sample | sted Rate | terval of Non- Rate |
| PHYSICIAN CLINIC NAME | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interval o Risk Adjusted Rate | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non- Risk Adjusted Rate |
| Overall Minnesota Clinic Average | | 70% | 68–72% | 28% | 60% | 12% | | | 70% | 68–72% | 92% | 92–92% | NA | 77% | 23% | | 92% | 92–92% |
| LONSDALE | | | | | | | | | | | | | | | | • | | |
| FamilyHealth Medical Clinic | FamilyHealth Medical Clinics | * | * | * | * | * | * | * | * | * | * | * | N/A | * | * | * * | * | * |
| LUVERNE | | | | | | | 9 * * * * * * * * * * * * * * * * * * * | | | | | | | | | | | |
| Sanford Clinic | Sanford Clinic | 58% | 37%-79% | 0% | 86% | 14% | Sample | 265 | 52% | 27%-76% | 87% | 82%-92% | N/A | 93% | 7% | Total Population 23 | 1 87% | 82%-91% |
| MABEL | | | | | | | * • • • • • • • • • • • • • • • • • • • | | · · · · · · · · · · · · · · · · · · · | | | | | | | | | |
| Winneshiek Medical Center | Winneshiek Medical Center-Mabel Clinic | * | * | * | * | * | * | * | * | * | * | * | N/A | * | * | * * | * | * |
| MADELIA | | | | | | | 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | | · · · · · · · · · · · · · · · · · · · | | | | | | | | | |
| Mayo Health System- Immanuel St. Joseph | Mayo Health System | 74% | 64%-84% | 7% | 74% | 19% | Sample | 386 | 72% | 61%-81% | 91% | 88%-94% | N/A | 63% | 37% | Total Population 41 | 91% | 88%-94% |
| MADISON | | | | | | | * | | | | | | | | | ** * * * * * * * * * * * * * * * * * * | | |
| Lac Qui Parle Clinic | Lac Qui Parle Clinic | 51% | 32%-71% | 13% | 69% | 18% | Sample | 153 | 46% | 28%-66% | 91% | 87%-94% | N/A | 63% | 37% | Total Population 22 | 92% | 87%-95% |
| MANKATO | | | | | | | * | | ' | | | | | | | ** | | |
| Between the Bridges Health Center | | * | * | * | * | * | * | * | * | * | * | * | N/A | * | * | * * | * | * |
| Mayo Health System-Immanuel St. Joseph- Mankato Eastridge | Mayo Health System | 74% | 64%-84% | 7% | 74% | 19% | Sample | 386 | 72% | 61%-81% | 91% | 88%-94% | N/A | 63% | 37% | Total Population 41 | 91% | 88%-94% |
| Mayo Health System-Immanuel St. Joseph- Mankato Specialty Clinic | Mayo Health System | 74% | 64%-84% | 7% | 74% | 19% | Sample | 386 | 72% | 61%-81% | 91% | 88%-94% | N/A | 63% | 37% | Total Population 41 | 91% | 88%-94% |
| Mankato Clinic- Main Street | Mankato Clinic | 73% | 54%-91% | 3% | 83% | 14% | Sample | 81 | 72% | 46%-89% | 95% | 89%-97% | N/A | 72% | 28% | Total Population 12 | 7 94% | 89%-97% |
| Mankato Clinic- Wickersham Campus | Mankato Clinic | 73% | 54%-91% | 3% | 83% | 14% | Sample | 81 | 72% | 46%-89% | 95% | 89%-97% | N/A | 72% | 28% | Total Population 12 | 7 94% | 89%-97% |

^{*} Sufficient data not available.

| Quality of Ca | re for | | C | ontrol | ling F | ligh E | Blood F | ressu | ire | | Use (| of Appro | priate | Medic | cation | s for P | eople | with A | \sthma |
|--|---|--------------------|--|----------|---------------------------------|-------------------------|---------------------------------------|-------------|------------------------|---|--------------------|--------------------------------------|----------|---------------------------------|-------------------------|------------------|-------------|------------------------|---|
| Chronic Cond | ditions | | | Dis | dical Gr tributio nt Popu | n of | | | | | | | Dis | dical Gr tributio nt Popu | n of | | | 0 | |
| See page 89 for an explanation of t | terms. | Rate | terval of Risk | | | e Programs | on or Sample | | sted Rate | terval of Non- Rate | Rate | terval of Risk | | | e Programs | on or Sample | | sted Rate | terval of Non- Rate |
| PHYSICIAN CLINIC NAME | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non- Risk Adjusted Rate | Risk Adjusted Rate | Confidence Interval Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non- Risk Adjusted Rate |
| Overall Minnesota Clinic Average | | 70% | 68–72% | 28% | 60% | 12% | | | 70% | 68-72% | 92% | 92-92% | NA | 77% | 23% | | | 92% | 92–92% |
| Open Door Health Center | Open Door Health Center | * | * | * | * | * | * | * | * | * | * | * | N/A | * | * | * | * | * | * |
| MAPLETON | | | | | | | | | | | | | | | | | | | |
| Mankato Clinic | Mankato Clinic | 73% | 54%-91% | 3% | 83% | 14% | Sample | 81 | 72% | 46%-89% | 95% | 89%-97% | N/A | 72% | 28% | Total Popula | tion 127 | 94% | 89%-97% |
| MARSHALL | | | | | | | | | | | | | | | | | | | |
| Affiliated Community Medical Centers- Bruce Street | Affiliated Community Medical Centers | 61% | 36%-87% | 12% | 71% | 18% | Sample | 111 | 57% | 30%-80% | 95% | 92%-97% | N/A | 70% | 30% | Total Popula | tion 228 | 95% | 92%-97% |
| Affilliated Community Medical Centers- Marshall Clinic- Market Street | Affiliated Community Medical Centers | 61% | 36%-87% | 12% | 71% | 18% | Sample | 111 | 57% | 30%-80% | 95% | 92%-97% | N/A | 70% | 30% | Total Popula | tion 228 | 95% | 92%-97% |
| Avera Marshall Specialty Clinic | Avera Health/Avera Tri-State | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A |
| MILAN | | | | | | | * * * * * * * * * * * * * * * * * * * | | | | | | | | | | | | |
| Milan Clinic | Chippewa County Montevideo Hospital & Medical Clinic | 51% | 32%-71% | 13% | 69% | 18% | Sample | 153 | 46% | 28%-66% | 91% | 87%-94% | N/A | 63% | 37% | Total Popula | tion 229 | 92% | 87%-95% |
| MONTEVIDEO | | | | * | | | o o o o | | | | | | • | | | | | • | |
| Chippewa County Montevideo Hospital & Medical Clinic | Chippewa County Montevideo Hospital & Medical Clinic | 51% | 32%-71% | 13% | 69% | 18% | Sample | 153 | 46% | 28%-66% | 91% | 87%-94% | N/A | 63% | 37% | Total Popula | tion 229 | 92% | 87%-95% |
| MONTGOMERY | | | | * | | | o o o o | | | | | | • | | | | | • | |
| Southern Metro Medical Clinics- Montgomery Medical Clinic | Southern Metro Medical Clinics | * | * | * | * | * | * | * | * | * | * | * | N/A | * | * | * | * | * | * |
| MOUNTAIN LAKE | | | | | | | | | | | | | | | | | | | |
| Sanford Clinic | Sanford Clinic | 58% | 37%-79% | 0% | 86% | 14% | Sample | 265 | 52% | 27%-76% | 87% | 82%-92% | N/A | 93% | 7% | Total Popula | tion 234 | 87% | 82%-91% |
| | | | | | | | | | | | | | | | | | | | , , , , , , |

^{*} Sufficient data not available.

| Quality of Ca | re for | | Co | ontrol | ling H | ligh E | Blood F | ressu | ıre | | Use | of Appro | priate | Medic | ation | s for People | with A | Asthma |
|--|--------------------------------------|--------------------|--|----------|-----------------------------------|-------------------------|---------------------------------------|-------------|---|---|--------------------|---|---|------------------------------------|-------------------------|------------------------------------|------------------------|---|
| Chronic Conc | Ī | | | Dist | dical Gre tribution nt Popu | n of | | | | | | | Dist | dical Gro tribution nt Popul | ı of | | • | |
| See page 89 for an explanation of t | erms. | Rate | erval of Risk | | | e Programs | on or Sample | | sted Rate | erval of Non- Rate | Rate | erval of Risk | | | e Programs | on or Sample | sted Rate | terval of Non- Rate |
| PHYSICIAN CLINIC NAME | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interval c Risk Adjusted Rate | Risk Adjusted Rate | Confidence Interval of Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non- Risk Adjusted Rate |
| Overall Minnesota Clinic Average | | 70% | 68–72% | 28% | 60% | 12% | | | 70% | 68-72% | 92% | 92–92% | NA | 77% | 23% | | 92% | 92–92% |
| NEW LONDON | | | | | | | 9 9 9 9 | | | | | | • | | | • | | |
| Affilliated Community Medical Centers | Affiliated Community Medical Centers | 61% | 36%-87% | 12% | 71% | 18% | Sample | 111 | 57% | 30%-80% | 95% | 92%-97% | N/A | 70% | 30% | Total Population 228 | 95% | 92%-97% |
| NEW PRAGUE | | | | | | | , | | , · · · · · · · · · · · · · · · · · · · | | | | , | | | (| | |
| Parkview Medical Clinic | Parkview Medical Clinic | * | * | * | * | * | * | * | * | * | * | * | N/A | * | * | * * * | * | * |
| NEW ULM | | | | | | | * * * * * * * * * * * * * * * * * * * | | * * * * * * * * * * * * * * * * * * * | | | | · · · · · · · · · · · · | | | | | |
| Allina Health System- New Ulm Medical Center | Allina Health System | 75% | 66%-84% | 32% | 58% | 10% | Sample | 139 | 75% | 64%-84% | 91% | 86%-94% | N/A | 75% | 25% | Total Population 202 | 91% | 86%-94% |
| NORTH MANKATO | | | | | | | · · · · · · · · · · · · · · · · · · · | | · · · · · · · · · · · · · · · · · · · | | | • | | | | | | |
| Mayo Health System-Immanuel St. Joseph - Mankato Northridge | Mayo Health System | 74% | 64%-84% | 7% | 74% | 19% | Sample | 386 | 72% | 61%-81% | 91% | 88%-94% | N/A | 63% | 37% | Total Population 419 | 91% | 88%-94% |
| Mankato Clinic | Mankato Clinic | 73% | 54%-91% | 3% | 83% | 14% | Sample | 81 | 72% | 46%-89% | 95% | 89%-97% | N/A | 72% | 28% | : Total Population 127 | 94% | 89%-97% |
| NORTHFIELD | | | | | | | 0 0 0 0 0 | | | | | | o o o | | | • | • | |
| Allina Medical Clinic | Allina Medical Clinic | 76% | 71%-81% | 28% | 65% | 8% | Sample | 650 | 76% | 71%-81% | 91% | 90%-93% | N/A | 82% | 18% | : Total Population 1562 | 92% | 90%-93% |
| OLIVIA | | | | | | | 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | | - 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | | | | - 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | | | | | |
| Renville County Hospital and Clinics | Renville County Hospital and Clinics | 51% | 32%-71% | 13% | 69% | 18% | Sample | 153 | 46% | 28%-66% | 91% | 87%-94% | N/A | 63% | 37% | Total Population 229 | 92% | 87%-95% |
| ORTONVILLE | | | | | | | | | - | | | | | | | | | |
| Northside Medical Clinic | Northside Medical Clinic | 51% | 32%-71% | 13% | 69% | 18% | Sample | 153 | 46% | 28%-66% | 91% | 87%-94% | N/A | 63% | 37% | Total Population 229 | 92% | 87%-95% |
| | | | | | | | - 9 9 9 | | | | | | | | | • | | |

^{*} Sufficient data not available.

| Quality of Car | re for | | C | ontrol | ling H | ligh E | Blood F | ressu | ıre | | Use o | of Appro | priate | Medic | ation | s for People | with / | Asthma |
|--|--------------------------------------|--------------------|--|---------------------------------------|----------------------------------|-------------------------|---|-------------|---------------------------------------|--|--------------------|--------------------------------------|---|------------------------------------|-------------------------|---|------------------------|---|
| Chronic Cond | T T | | | Dist | dical Gr tribution nt Popu | n of | | | | | | | Dist | lical Gro tribution nt Popul | of | | | |
| See page 89 for an explanation of to | erms. | Rate | erval of Risk | 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 | | e Programs | on or Sample | | sted Rate | Interval of Non- ed Rate | Rate | erval of Risk | | | e Programs | on or Sample | sted Rate | erval of Non- Rate |
| PHYSICIAN CLINIC NAME | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interva Risk Adjusted Rate | Risk Adjusted Rate | Confidence Interval Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample Sample Size | Non-Risk Adjusted Rate | Confidence Interval o Risk Adjusted Rate |
| Overall Minnesota Clinic Average | | 70% | 68–72% | 28% | 60% | 12% | 0 0 0 0 | | 70% | 68-72% | 92% | 92–92% | NA | 77% | 23% | | 92% | 92–92% |
| OWATONNA | | | | • | | | 9 0 0 0 0 | | • | | | | 9 0 0 0 0 | | | | | |
| Mayo Health System-Owatonna Clinic | Mayo Health System | 74% | 64%-84% | 7% | 74% | 19% | Sample | 386 | 72% | 61%-81% | 91% | 88%-94% | N/A | 63% | 37% | Total Population 419 | 91% | 88%-94% |
| PINE ISLAND | | | | | | | 9 * * * * * * * * * * * * * * * * * * * | | | | | | , | | | | | |
| Olmsted Medical Center | Olmsted Medical Center | 57% | 24%-91% | 12% | 64% | 24% | Sample | 89 | 53% | 27%-77% | 93% | 86%-96% | N/A | 53% | 47% | Total Population 117 | 91% | 85%-95% |
| PIPESTONE | | | | | | | 0 · · · · · · · · · · · · · · · · · · · | | · · · · · · · · · · · · · · · · · · · | | | | | | | | | |
| Avera- Pipestone County Medical Center | Avera Health/Avera Tri-State | 38% | 28%-47% | 2% | 79% | 19% | Sample | 121 | 25% | 15%-39% | 92% | 85%-95% | N/A | 75% | 25% | Total Population 110 | 92% | 85%-96% |
| PLAINVIEW | | | | | | | • • • • • • • • • • • • • • • • • • • | | | | | | · · · · · · · · · · · · · · · · · · · | | | | | |
| Olmsted Medical Center | Olmsted Medical Center | 57% | 24%-91% | 12% | 64% | 24% | Sample | 89 | 53% | 27%-77% | 93% | 86%-96% | N/A | 53% | 47% | Total Population 117 | 91% | 85%-95% |
| PRESTON | | | | | | | 0 · · · · · · · · · · · · · · · · · · · | | | | | | / • • • • • • • • • • • • • • • • • • • | | | | | |
| Olmsted Medical Center | Olmsted Medical Center | 57% | 24%-91% | 12% | 64% | 24% | Sample | 89 | 53% | 27%-77% | 93% | 86%-96% | N/A | 53% | 47% | Total Population 117 | 91% | 85%-95% |
| RED WING | | | | | | | | | | | | | * • • • • • • • • • • • • • • • • • • • | | | | | |
| Fairview Red Wing Medical Center | Fairview Health Services | 74% | 68%-79% | 36% | 55% | 9% | Sample | 616 | 74% | 68%-78% | 93% | 91%-94% | N/A | 77% | 23% | Total Population 1237 | 93% | 91%-94% |
| REDWOOD FALLS | | | | | | | | | | | | | | | | * · · · · · · · · · · · · · · · · · · · | | |
| Affilliated Community Medical Centers | Affiliated Community Medical Centers | 61% | 36%-87% | 12% | 71% | 18% | Sample | 111 | 57% | 30%-80% | 95% | 92%-97% | N/A | 70% | 30% | Total Population 228 | 95% | 92%-97% |
| RENVILLE | | | | | | | w w w 0 0 0 0 | | | | | ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ | | | | | | |
| Renville County Hospital and Clinics | Renville County Hospital and Clinics | 51% | 32%-71% | 13% | 69% | 18% | Sample | 153 | 46% | 28%-66% | 91% | 87%-94% | N/A | 63% | 37% | Total Population 229 | 92% | 87%-95% |

^{*} Sufficient data not available.

| Quality of Ca | are for | | Co | ontrol | ling H | ligh E | Blood F | ressu | ire | | Use | of Appro | priate | Medic | ation | s for Peopl | e with | Asthma |
|--|---------------------------|--------------------|--|---------------------------------------|-----------------------------------|-------------------------|----------------------------|-------------|------------------------|---|--------------------|---|----------|------------------------------------|-------------------------|------------------------------------|------------------------|---|
| Chronic Con | | | | Dist | dical Gre tribution nt Popu | n of | | | | | | | Dist | dical Gro tribution nt Popul | ı of | | | |
| See page 89 for an explanation of | terms. | Rate | erval of Risk | | | e Programs | on or Sample | | sted Rate | erval of Non- Rate | Rate | erval of Risk | | | e Programs | on or Sample | sted Rate | terval of Non- Rate |
| PHYSICIAN CLINIC NAME | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interval Risk Adjusted Rate | Risk Adjusted Rate | Confidence Interval of Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non- Risk Adjusted Rate |
| Overall Minnesota Clinic Average | | 70% | 68–72% | 28% | 60% | 12% | | | 70% | 68–72% | 92% | 92–92% | NA | 77% | 23% | | 92% | 92–92% |
| ROCHESTER | | | | | | | 9 9 9 9 | | | | | | | | | | | |
| Mayo Clinic- Baldwin Building, Family Medicine | Mayo Clinic | 62% | 40%-83% | 10% | 61% | 29% | Sample | 93 | 52% | 27%-77% | 96% | 90%-98% | N/A | 57% | 43% | Total Population 98 | 94% | 87%-97% |
| Mayo Clinic- Baldwin Building, Primary Care Internal Medicine | Mayo Clinic | 62% | 40%-83% | 10% | 61% | 29% | Sample | 93 | 52% | 27%-77% | 96% | 90%-98% | N/A | 57% | 43% | Total Population 98 | 94% | 87%-97% |
| Mayo Clinic- Mayo Building | Mayo Clinic | 62% | 40%-83% | 10% | 61% | 29% | Sample | 93 | 52% | 27%-77% | 96% | 90%-98% | N/A | 57% | 43% | Total Population 98 | 94% | 87%-97% |
| Mayo Clinic- Northeast | Mayo Clinic | 62% | 40%-83% | 10% | 61% | 29% | Sample | 93 | 52% | 27%-77% | 96% | 90%-98% | N/A | 57% | 43% | Total Population 98 | 94% | 87%-97% |
| Mayo Clinic- Northwest | Mayo Clinic | 62% | 40%-83% | 10% | 61% | 29% | Sample | 93 | 52% | 27%-77% | 96% | 90%-98% | N/A | 57% | 43% | Total Population 98 | 94% | 87%-97% |
| Olmsted Medical Center- Rochester Northwest | Olmsted Medical Center | 57% | 24%-91% | 12% | 64% | 24% | Sample | 89 | 53% | 27%-77% | 93% | 86%-96% | N/A | 53% | 47% | Total Population 117 | 91% | 85%-95% |
| Olmsted Medical Center- Rochester Southeast | Olmsted Medical Center | 57% | 24%-91% | 12% | 64% | 24% | Sample | 89 | 53% | 27%-77% | 93% | 86%-96% | N/A | 53% | 47% | : Total Population 117 | 91% | 85%-95% |
| Rochester Family Medicine Clinic | | * | * | * | * | * | * | * | * | * | * | * | N/A | * | * | * * | * | * |
| RUSHFORD | | | | | | | 9 9 9 9 | | | | | | | | | • | * | |
| Winona Health | Winona Health | 56% | 37%-74% | 0% | 63% | 37% | Sample | 80 | 54% | 36%-72% | 87% | 77%-93% | N/A | 70% | 30% | : Total Population 66 | 86% | 76%-93% |
| SLAYTON | | | | | | | | | | | | | | | | | | |
| Murray County Clinic | Murray County Clinic | 51% | 32%-71% | 13% | 69% | 18% | Sample | 153 | 46% | 28%-66% | 91% | 87%-94% | N/A | 63% | 37% | Total Population 229 | 92% | 87%-95% |
| SLEEPY EYE | | | | | | | | | | | | | | | | | | |
| Sleepy Eye Medical Center | Sleepy Eye Medical Center | 51% | 32%-71% | 13% | 69% | 18% | Sample | 153 | 46% | 28%-66% | 91% | 87%-94% | N/A | 63% | 37% | Total Population 229 | 92% | 87%-95% |
| | | | | * * * * * * * * * * * * * * * * * * * | | | 9 9 0 9 | | | | | | | | | * * * * * * | | |

^{*} Sufficient data not available.

| Quality of Ca | re for | | Co | ontrol | ling H | ligh E | lood F | ressu | ıre | | Use o | of Appro | priate | Medic | ation | s for Peop | le with | Asthma |
|--|--------------------------------|--------------------|--|----------|-----------------------------------|-------------------------|----------------------------|-------------|---------------------------------------|--|--------------------|--------------------------------------|----------|-----------------------------------|-------------------------|----------------------------|---------------------------------------|---|
| Chronic Cond | | | | Dist | dical Gre tribution nt Popu | n of | | | | | | | Dist | lical Gro ribution nt Popul | of | | | |
| See page 89 for an explanation of t | ierms. | Rate | erval of Risk | | | e Programs | on or Sample | | sted Rate | Interval of Non- ed Rate | Rate | erval of Risk | | | e Programs | on or Sample | sted Rate | terval of Non- Rate |
| PHYSICIAN CLINIC NAME | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interva Risk Adjusted Rate | Risk Adjusted Rate | Confidence Interval Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size Non-Risk Adjusted Rate | Confidence Interval o Risk Adjusted Rate |
| Overall Minnesota Clinic Average | | 70% | 68-72% | 28% | 60% | 12% | | | 70% | 68–72% | 92% | 92–92% | NA | 77% | 23% | | 92% | 92–92% |
| SPICER | | | | | | | | | | | | | | | | | | |
| Paynesville Green Lake Medical Clinic | Paynesville Area Health System | 69% | 58%-80% | 23% | 67% | 10% | Sample | 65 | 71% | 51%-86% | * | * | N/A | * | * | * | * * | * |
| SPRING GROVE | | | | | | | | | , | | | | | | | | | |
| Gundersen Lutheran | Gundersen Clinic | 72% | 63%-79% | 0% | 82% | 18% | Sample | 72 | 71% | 59%-80% | 94% | 85%-97% | N/A | 75% | 25% | Total Population | 59 93% | 84%-97% |
| SPRING VALLEY | | | | | | | | | · · · · · · · · · · · · · · · · · · · | | | | | | | | | |
| Olmsted Medical Center | Olmsted Medical Center | 57% | 24%-91% | 12% | 64% | 24% | Sample | 89 | 53% | 27%-77% | 93% | 86%-96% | N/A | 53% | 47% | Total Population 1 | 17 91% | 85%-95% |
| SPRINGFIELD | | | | | | | | | · · · · · · · · · · · · · · · · · · · | | | | | | | | | |
| Mayo Health System-Immanuel St. Joseph | Mayo Health System | 74% | 64%-84% | 7% | 74% | 19% | Sample | 386 | 72% | 61%-81% | 91% | 88%-94% | N/A | 63% | 37% | Total Population 4 | 19 91% | 88%-94% |
| ST. CHARLES | | | | | | | | | | | | | | | | | | |
| Olmsted Medical Center | Olmsted Medical Center | 57% | 24%-91% | 12% | 64% | 24% | Sample | 89 | 53% | 27%-77% | 93% | 86%-96% | N/A | 53% | 47% | Total Population 1 | 17 91% | 85%-95% |
| ST. JAMES | | | | | | | | | | | | | | | | | | |
| Mayo Health System-Immanuel St. Joseph | Mayo Health System | 74% | 64%-84% | 7% | 74% | 19% | Sample | 386 | 72% | 61%-81% | 91% | 88%-94% | N/A | 63% | 37% | Total Population 4 | 19 91% | 88%-94% |
| Moulton & Parsons MDs | | * | * | * | * | * | * | * | * | * | * | * | N/A | * | * | * | * * | * |
| ST. PETER | | | | | | | | | | | | | | | | | | |
| Mayo Health System-Immanuel St. Joseph | Mayo Health System | 74% | 64%-84% | 7% | 74% | 19% | Sample | 386 | 72% | 61%-81% | 91% | 88%-94% | N/A | 63% | 37% | Total Population 4 | 19 91% | 88%-94% |
| Mankato Clinic- Daniel's Health Center | Mankato Clinic | 73% | 54%-91% | 3% | 83% | 14% | Sample | 81 | 72% | 46%-89% | 95% | 89%-97% | N/A | 72% | 28% | Total Population 1 | 27 94% | 89%-97% |

^{*} Sufficient data not available.

| Quality of Ca | re for | | Co | ontrol | ling H | ligh E | Blood F | ressu | ire | | Use | of Appro | priate | Medic | ation | s for Pe | eople | with A | Asthma |
|---|--------------------------------|--------------------|--|---------------------------------------|----------------------------------|-------------------------|---------------------------------------|-------------|------------------------|---|--------------------|--|---------------------------------------|------------------------------------|-------------------------|----------------------------|-------------|---------------------------------------|---|
| Chronic Cond | | | | Dis | dical Gr tribution nt Popu | n of | | | | | | | Dist | dical Gro tribution nt Popul | ı of | | | | |
| See page 89 for an explanation of t | terms. | Rate | Confidence Interval of Risk Adjusted Rate | | | re Programs | Total Population or Sample | | ısted Rate | Confidence Interval of Non- Risk Adjusted Rate | Rate | Confidence Interval of Risk Adjusted Rate | • • • • • • • • • • • • • • • • • • • | | MN Health Care Programs | Total Population or Sample | | ısted Rate | Confidence Interval of Non- Risk Adjusted Rate |
| PHYSICIAN CLINIC NAME | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence Ir Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Populat | Sample Size | Non-Risk Adjusted Rate | Confidence Interva Risk Adjusted Rate | Risk Adjusted Rate | Confidence Ir Adjusted Rate | Medicare | Commercial | MN Health Ca | Total Populat | Sample Size | Non-Risk Adjusted Rate | Confidence Ir Risk Adjusted |
| Overall Minnesota Clinic Average | | 70% | 68–72% | 28% | 60% | 12% | | | 70% | 68-72% | 92% | 92–92% | NA | 77% | 23% | | | 92% | 92–92% |
| River's Edge Clinic | River's Edge Hospital & Clinic | * | * | * | * | * | * | * | * | * | * | * | N/A | * | * | * | * | * | * |
| STEWARTVILLE | | | | | | | | | | | | | | | | | | | |
| Olmsted Medical Center | Olmsted Medical Center | 57% | 24%-91% | 12% | 64% | 24% | Sample | 89 | 53% | 27%-77% | 93% | 86%-96% | N/A | 53% | 47% | Total Population | on 117 | 91% | 85%-95% |
| TRACY | | | | | | | , | | | | | | | | | | | | |
| Sanford Clinic Tracy/ Balaton/Walnut Grove | Sanford Clinic | 58% | 37%-79% | 0% | 86% | 14% | Sample | 265 | 52% | 27%-76% | 87% | 82%-92% | N/A | 93% | 7% | Total Population | on 234 | 87% | 82%-91% |
| TYLER | | | | | | | , | | | | | | | | | | | , | |
| Tyler Medical Clinic | Avera Health/Avera Tri-State | 38% | 28%-47% | 2% | 79% | 19% | Sample | 121 | 25% | 15%-39% | 92% | 85%-95% | N/A | 75% | 25% | Total Population | on 110 | 92% | 85%-96% |
| WABASHA | | | | | | | 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | | | | | | | | | | | · · · · · · · · · · · · · · · · · · · | |
| Mayo Health System-Wabasha Clinic | Mayo Health System | 74% | 64%-84% | 7% | 74% | 19% | Sample | 386 | 72% | 61%-81% | 91% | 88%-94% | N/A | 63% | 37% | Total Population | on 419 | 91% | 88%-94% |
| WANAMINGO | | | | | | | · · · · · · · · · · · · · · · · · · · | | | | | | | | | | | · · · · · · · · · · · · · · · · · · · | |
| Olmsted Medical Center | Olmsted Medical Center | 57% | 24%-91% | 12% | 64% | 24% | Sample | 89 | 53% | 27%-77% | 93% | 86%-96% | N/A | 53% | 47% | Total Population | on 117 | 91% | 85%-95% |
| WASECA | | | | | | | " | | • • • • • • • | | | | | | | | | | |
| Mayo Health System-Immanuel St. Joseph | Mayo Health System | 74% | 64%-84% | 7% | 74% | 19% | Sample | 386 | 72% | 61%-81% | 91% | 88%-94% | N/A | 63% | 37% | Total Population | on 419 | 91% | 88%-94% |
| WATKINS | | | | | | | " | | | | | | | | | | | | |
| Paynesville Watkins Medical Clinic | Paynesville Area Health System | 69% | 58%-80% | 23% | 67% | 10% | Sample | 65 | 71% | 51%-86% | * | * | N/A | * | * | * | * | * | * |
| | : | | | · · · · · · · · · · · · · · · · · · · | | | * | | | | | | · · · · · · · · · · · · · · · · · · · | | | | | · · · · · · · · · · · · · · · · · · · | |

^{*} Sufficient data not available.

| | re for | | C | DITTOIL | IIIIB L | iigii c | Blood F | ressu | ıre | | Use (| ot Appro | priate | Medic | ation | ns for Peop | ie with | Astnma |
|---|---|--------------------|--|----------|-----------------------------------|-------------------------|----------------------------|-------------|---|---|--------------------|--|----------|------------------------------------|-------------------------|---|------------------------|---|
| Chronic Cond | itions | | | Dist | dical Gre tribution nt Popu | n of | | | • | | | | Dist | lical Gro tribution nt Popul | of | | | |
| See page 89 for an explanation of te | rms. | Rate | terval of Risk | | | e Programs | on or Sample | | sted Rate | terval of Non- Rate | Rate | terval of Risk | | | e Programs | on or Sample | sted Rate | terval of Non- Rate |
| | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non- Risk Adjusted Rate | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample Samnle Size | Non-Risk Adjusted Rate | Confidence Interval of Non- Risk Adjusted Rate |
| Overall Minnesota Clinic Average | | 70% | 68–72% | 28% | 60% | 12% | | | 70% | 68-72% | 92% | 92-92% | NA . | 77% | 23% | | 92% | 92–92% |
| WESTBROOK | | | | • | | | | | * | | | | • | | | • | | |
| Sanford Clinic Westbrook | Sanford Clinic | 58% | 37%-79% | 0% | 86% | 14% | Sample | 265 | 52% | 27%-76% | 87% | 82%-92% | N/A | 93% | 7% | Total Population 2 | 87% | 82%-91% |
| WILLMAR | | | | | | | | | | | | | | | | | | |
| Affilliated Community Medical Centers | Affiliated Community Medical Centers | 61% | 36%-87% | 12% | 71% | 18% | Sample | 111 | 57% | 30%-80% | 95% | 92%-97% | N/A | 70% | 30% | Total Population 2 | 95% | 92%-97% |
| Family Practice Medical Center of Willmar | Family Practice Medical Center of Willmar | 74% | 36%-100% | 11% | 72% | 17% | Sample | 69 | 71% | 37%-91% | 89% | 77%-95% | N/A | 51% | 49% | Total Population 4 | 9 86% | 73%-93% |
| WINDOM | | | | | | | | | | | | | | | | | | |
| Avera- United Medical Clinic | Avera Health/Avera Tri-State | 38% | 28%-47% | 2% | 79% | 19% | Sample | 121 | 25% | 15%-39% | 92% | 85%-95% | N/A | 75% | 25% | Total Population 1 | .0 92% | 85%-96% |
| Hartberg Medical Clinic | Hartberg Medical Clinic | * | * | * | * | * | * | * | * | * | * | * | N/A | * | * | * | * | * |
| Sanford Clinic Windom | Sanford Clinic | 58% | 37%-79% | 0% | 86% | 14% | Sample | 265 | 52% | 27%-76% | 87% | 82%-92% | N/A | 93% | 7% | Total Population 23 | 87% | 82%-91% |
| Windom Family Medical Center | | * | * | * | * | * | * | * | * | * | * | * | N/A | * | * | * | * | * |
| WINONA | | | | • | | | | | * · · · · · · · · · · · · · · · · · · · | | | | | | | | | |
| Family Medicine of Winona | Family Medicine of Winona | * | * | * * | * | * | * | * | * | * | * | * | N/A | * | * | * | * | * |
| Winona Health- Winona Health Clinics | Winona Health | 56% | 37%-74% | 0% | 63% | 37% | Sample | 80 | 54% | 36%-72% | 87% | 77%-93% | N/A | 70% | 30% | Total Population 6 | 6 86% | 76%-93% |
| WINSTED | | | | | | | | | ** | | | | | | | | | |
| Ridgeview Winsted Clinic | Ridgeview Clinics | 81% | 69%-92% | 31% | 62% | 8% | Sample | 65 | 82% | 64%-92% | 90% | 81%-95% | N/A | 90% | 10% | Total Population 8 | 1 90% | 82%-95% |

^{*} Sufficient data not available.

| Quality of Ca | re for | | Co | ontrol | ling H | igh E | Blood F | Pressu | ıre | | Use | of Appro | priate | Medic | ation | s for People | e with | Asthma |
|------------------------------------|------------------------------|--------------------|--|---------------------------------------|------------------------------------|-------------------------|---------------------------------------|-------------|----------------------------|---|--------------------|--|---------------------------------------|------------------------------------|-------------------------|---|------------------------|---|
| Chronic Cond | | | | Dist | dical Gro tribution nt Popul | ı of | | | 0 0 0 0 0 0 | | | | Dist | dical Gro tribution nt Popul | ı of | | 0 | |
| See page 89 for an explanation of | terms. | Rate | terval of Risk | 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | | e Programs | on or Sample | | sted Rate | terval of Non- Rate | Rate | terval of Risk | 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | | e Programs | on or Sample | sted Rate | terval of Non- Rate |
| PHYSICIAN CLINIC NAME | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non- Risk Adjusted Rate | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non- Risk Adjusted Rate |
| Overall Minnesota Clinic Average | | 70% | 68–72% | 28% | 60% | 12% | 0 0 0 0 0 | | 70% | 68-72% | 92% | 92–92% | NA | 77% | 23% | | 92% | 92–92% |
| WORTHINGTON | | | | • | | | * * * * * * * * * * * * * * * * * * * | | • • • | | | | | | | | | |
| Avera Worthington Specialty Clinic | Avera Health/Avera Tri-State | 38% | 28%-47% | 2% | 79% | 19% | Sample | 121 | 25% | 15%-39% | 92% | 85%-95% | N/A | 75% | 25% | Total Population 110 | 92% | 85%-96% |
| Sanford Clinic | Sanford Clinic | 58% | 37%-79% | 0% | 86% | 14% | Sample | 265 | 52% | 27%-76% | 87% | 82%-92% | N/A | 93% | 7% | Total Population 234 | 87% | 82%-91% |
| ZUMBROTA | | | | , | | | | | | | | | | | | | | |
| Fairview Red Wing Zumbrota Clinic | Fairview Health Services | 74% | 68%-79% | 36% | 55% | 9% | Sample | 616 | 74% | 68%-78% | 93% | 91%-94% | N/A | 77% | 23% | Total Population 1237 | 93% | 91%-94% |
| | | | | | | | | | | | | | | | | | | |
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| | | | | | | | | | | | | | | | | | | |

^{*} Sufficient data not available.

| Group ion of pulation or Sample Total Population or Sample Some Solution or Sample ion 1771 79% | Confidence Interval of Non- %18-%18 %18-%17 %18-%17 %18-%18 | 888 Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate Adjusted Rate | Medical Distribur Patient Po | To noit on the noit of the noi | : | 1 253 | | |
|--|------------------------------|---|-------------------------|---|------------------------------|--|------------------|-------|-----|--------------------|
| 6 44% 24% Total Population 5 59% Total Population 1 | 87% ion 628 87% ion 1771 79% | Confidence Interval | 888 Risk Adjusted Rate | Confidence Interval Adjusted Rate Adjusted Rate | NA 71 | 1% 29 % | Total Population | 1 253 | 74% | 86–86 % |
| 6 44% 24% Total Population 5 59% Total Population 1 | 87% ion 628 87% ion 1771 79% | 87-87% 84%-89% 77%-81% | 86% 74% 61 75% 73 | 86-86% 68%-79% N 73%-78% N | NA 71 | 1% 29 % | Total Population | 1 253 | 74% | 86–86 % |
| 24% Total Population 59% Total Population 1 | ion 628 87% | 84%-89% 77%-81% | 74% 6i | 68%-79% N | N/A 82 | % 18% | Total Population | 1 253 | 74% | 69%-79% |
| 59% Total Population 1 | ion 1771 79% | 77%-81% | 75% 7: | 73%-78% N | | | | | | |
| 59% Total Population 1 | ion 1771 79% | 77%-81% | 75% 7: | 73%-78% N | | | | | | 69%-79% 71%-76% |
| | | | | | N/A 53 | % 47% | Total Population | 1341 | 74% | 71%-76% |
| | | | | | N/A 53 | % 47% | Total Population | 1341 | 74% | 71%-76% |
| 56% Total Population | ion 752 73% | 70%-76% | 72% 6 | | | | | | | |
| 56% Total Population | ion 752 73% | 70%-76% | 72% 69 | | | | | | | |
| | | | | 69%-76% N | N/A 55 | % 45% | Total Population | 618 | 71% | 68%-75% |
| | | | | | | | | | | |
| * * | * * | * | 95% 82 | 82%-98% N | N/A 67 | % 33% | Total Population | 36 | 94% | 82%-98% |
| | | | | | | | | | | |
| 59% Total Population 1 | ion 1771 79% | 77%-81% | 75% 73 | 73%-78% N | N/A 53 | % 47% | Total Population | 1341 | 74% | 71%-76% |
| * * | * * | * | * | * N | N/A * | * | * | * | * | * |
| 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | | | | | | | | | | |
| 59% Total Population | ion 630 89% | 86%-91% | 74% 69 | 69%-78% N | N/A 54 | % 46% | Total Population | 407 | 73% | 68%-77% |
| | : | | | : | | | | | | |
| | | | ψ | * N | N/A * | * | * | * | * | * |
| , , | 6 59% Total Populati | 6 59% Total Population 630 89% | | | | | | | | |

^{*} Sufficient data not available.

| Quality of Car | | | Appro | | | | t for Chi | | | h | Ар | propriat | e Test | ing fo | r Chi | ildren w | ith P | haryn | igitis |
|---|---|--------------------|--|----------|------------------------------------|-------------------------|---|---|------------------------|---|--------------------|--------------------------------------|----------|------------------------------------|-------------------------|--|---|------------------------|---|
| Acute Conditi | lons | | * | Dis | dical Gro tribution nt Popul | of lation | <u>o</u> | 0 | | Ė | | * | Dist | dical Gro tribution nt Popul | of ation | <u>e</u> | 0 0 0 0 0 0 | | Ė |
| See page 89 for an explanation of to | erms. | late | erval of Ri | | | e Program | n or Samp | 0 | ted Rate | erval of Non- łate | tate | erval of Risk | | | e Program | n or Samp | 0 | ted Rate | erval of Non- tate |
| PHYSICIAN CLINIC NAME | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interval Risk Adjusted Rate | Risk Adjusted Rate | Confidence Interval Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interval Risk Adjusted Rate |
| Overall Minnesota Clinic Average | | 87% | 87–87% | NA | 56% | 44% | | | 87% | 87–87% | 86% | 86-86% | NA | 71% | 29% | / 0 | | 86% | 86–86% |
| BYRON | | | | | | | • | | | | | | | | | • | • | | |
| Olmsted Medical Center | Olmsted Medical Center | 82% | 78%-86% | N/A | 26% | 74% | Total Populatio | n 574 | 82% | 79%-85% | 87% | 83%-91% | N/A | 45% | 55% | Total Population | on 340 | 86% | 82%-89% |
| CALEDONIA | | | | | | | • | | | | | | • | | | • | | | |
| Mayo Health System-Franciscan Skem | p Mayo Health System | 79% | 77%-81% | N/A | 41% | 59% | Total Populatio | n 1771 | 79% | 77%-81% | 75% | 73%-78% | N/A | 53% | 47% | Total Population | on 1341 | 74% | 71%-76% |
| CANBY | | | | | | | | | | | | | | | | | | | |
| Sanford Clinic Canby | Sanford Clinic | 87% | 83%-89% | N/A | 76% | 24% | Total Populatio | n 628 | 87% | 84%-89% | 74% | 68%-79% | N/A | 82% | 18% | : :Total Populatio | on 253 | 74% | 69%-79% |
| CANNON FALLS | | | | | | | | | | | | | | | | | | | |
| Mayo Health System- Cannon Falls Medical Center | Mayo Health System | 79% | 77%-81% | N/A | 41% | 59% | Total Populatio | n 1771 | 79% | 77%-81% | 75% | 73%-78% | N/A | 53% | 47% | Total Population | on 1341 | 74% | 71%-76% |
| CHATFIELD | | | | | | | • | | | | | | • | | | | • | | |
| Olmsted Medical Center | Olmsted Medical Center | 82% | 78%-86% | N/A | 26% | 74% | Total Populatio | n 574 | 82% | 79%-85% | 87% | 83%-91% | N/A | 45% | 55% | Total Populatio | on 340 | 86% | 82%-89% |
| CLARA CITY | | | | | | | | | | | | | | | | | | | |
| Clara City Clinic | Chippewa County Montevideo Hospital & Medical Clinic | 73% | 69%-76% | N/A | 44% | 56% | Total Populatio | n 752 | 73% | 70%-76% | 72% | 69%-76% | N/A | 55% | 45% | Total Population | on 618 | 71% | 68%-75% |
| CLARKFIELD | | | | | | | | | | | | | | | | | | | |
| Clarkfield Clinic | Chippewa County Montevideo Hospital & Medical Clinic | 73% | 69%-76% | N/A | 44% | 56% | Total Populatio | n 752 | 73% | 70%-76% | 72% | 69%-76% | N/A | 55% | 45% | Total Population | on 618 | 71% | 68%-75% |
| DASSEL | | | | | | | ************************************** | | | | | | | | | ************************************** | | | |
| Hutchinson Area Health Care- Dassel Medical Center | Hutchinson Area Health Care | * | * | N/A | * | * | *************************************** | * | * | * | * | * | N/A | * | * | * * | * | * | * |

^{*} Sufficient data not available.

| Quality of Ca Acute Condit | | | Appro | Uppe Med Dis | | oirato oup of | t for Ch ory Infe | | | | Ар | propriat | Med Dist | ing fo lical Gro tribution nt Popul | oup 1 of | ldren wi | ith P | 'haryn | |
|--|--------------------------------|--------------------|--|--------------------|------------|-------------------------|--|-------------|------------------------|--|--------------------|--|---------------------------------------|--|-------------------------|----------------------------|-------------|------------------------|---|
| See page 89 for an explanation of | terms. | Rate | terval of Risk | | iii i opui | | on or Sample | | sted Rate | Interval of Non- ed Rate | Rate | terval of Risk | | it i opu | | on or Sample | | sted Rate | terval of Non- Rate |
| PHYSICIAN CLINIC NAME | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interva Risk Adjusted Rate | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interval Risk Adjusted Rate |
| Overall Minnesota Clinic Average | | 87% | 87–87% | NA | 56% | 44% | • • • • | | 87% | 87–87% | 86% | 86-86% | NA | 71% | 29% | , , | | 86% | 86–86% |
| Meeker Memorial Clinic | Meeker Memorial Clinic | * | * | NA | * | * | * | * | * | * | * | * | N/A | * | * | * | * | * | * |
| DAWSON | | | | | | | | | | | | | · · · · · · · · · · · · · · · · · · · | | | | | | |
| Dawson Clinic | Dawson Clinic | 73% | 69%-76% | N/A | 44% | 56% | Total Populatio | n 752 | 73% | 70%-76% | 72% | 69%-76% | N/A | 55% | 45% | Total Populatio | n 618 | 71% | 68%-75% |
| EDEN VALLEY | | | | | | | | | | | | | | | | | | | |
| Paynesville Eden Valley Medical Clinic | Paynesville Area Health System | 62% | 52%-71% | N/A | 53% | 47% | Total Populatio | n 90 | 62% | 52%-72% | 86% | 78%-91% | N/A | 62% | 38% | Total Populatio | n 103 | 85% | 77%-91% |
| EDGERTON | | | | | | | | | | | | | | | | | | | |
| Edgerton Family Clinic Avera | Avera Health/Avera Tri-State | 50% | 46%-53% | N/A | 51% | 49% | Total Populatio | n 676 | 48% | 44%-52% | 56% | 51%-61% | N/A | 65% | 35% | Total Populatio | n 325 | 55% | 50%-60% |
| FAIRFAX | | | | | | | ·, · · · · · · · · · · · · · · · · · · | | | | | | | | | | | | |
| Fairfax Medical Clinic | | * | * | NA | * | * | * * | * | * | * | * | * | N/A | * | * | * | * | * | * |
| FAIRMONT | | | | | | | *** * * * * * * * * * * * * * * * * * | | | | | | | | | | | | |
| Braaten Medical Clinic | | * | * | NA | * | * | * * | * | * | * | * | * | N/A | * | * | * | * | * | * |
| Dulcimer Medical Center | Dulcimer Medical Center | * | * | NA | * | * | ************************************** | * | * | * | * | * | N/A | * | * | * | * | * | * |
| Mayo Health System- Fairmont Medical Center | Mayo Health System | 79% | 77%-81% | N/A | 41% | 59% | Total Populatio | n 1771 | 79% | 77%-81% | 75% | 73%-78% | N/A | 53% | 47% | Total Populatio | n 1341 | 74% | 71%-76% |
| Smart Clinic | Smart Clinic | * | * | NA | * | * | * | * | * | * | * | * | N/A | * | * | * | * | * | * |
| FARIBAULT | | | | | | | | | | | | | | | | | | | |
| Allina Medical Clinic | Allina Medical Clinic | 92% | 91%-93% | N/A | 61% | 39% | Total Populatio | n 2641 | 92% | 91%-93% | 88% | 86%-89% | N/A | 72% | 28% | Total Populatio | n 1439 | 88% | 86%-89% |

^{*} Sufficient data not available.

| Quality of Ca | | | Appro | priate Uppe | Treater Resi | tmen pirat | t for Chil | drei tion | n with | 1 | Арј | propriat | e Test | ing fo | r Chi | ldren w | ith P | haryn | gitis |
|---|--------------------------------------|--------------------|--|----------------|------------------------------------|-------------------------|----------------------------|--------------|------------------------|---|--------------------|--|----------|----------------------------------|-------------------------|----------------------------|-------------|------------------------|--|
| Acute Condita | ions | | ~ | Me: Dis | dical Gro tribution nt Popul | oup 1 of | | | | ± | | <u>~</u> | Dist | ical Gro ribution it Popul | of | | | | |
| See page 89 for an explanation of t | erms. | sted Rate | Confidence Interval of Risk Adjusted Rate | | <u>.</u> | MN Health Care Programs | Total Population or Sample | Ze | Non-Risk Adjusted Rate | Confidence Interval of Non- Risk Adjusted Rate | sted Rate | Confidence Interval of Risk Adjusted Rate | | Į e | MN Health Care Programs | Total Population or Sample | ze | Non-Risk Adjusted Rate | Confidence Interval of Non Risk Adjusted Rate |
| PHYSICIAN CLINIC NAME | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence In Adjusted Rate | Medicare | Commercial | MN Health | Total Pop | Sample Size | Non-Risk | Confidenc Risk Adju | Risk Adjusted Rate | Confidenc Adjusted | Medicare | Commercial | MN Health | Total Pop | Sample Size | Non-Risk | Confidenc Risk Adjus |
| Overall Minnesota Clinic Average | | 87% | 87–87% | NA | 56% | 44% | | | 87% | 87–87% | 86% | 86-86% | NA | 71% | 29% | , | | 86% | 86–86% |
| Mayo Health System- Cannon Valley Clinic | Mayo Health System | 79% | 77%-81% | N/A | 41% | 59% | Total Population | 1771 | 79% | 77%-81% | 75% | 73%-78% | N/A | 53% | 47% | Total Population | on 1341 | 74% | 71%-76% |
| FULDA | | | | | | | | | | | | | | | | | | | |
| Avera Worthington Specialty Clinics | Avera Health/Avera Tri-State | 50% | 46%-53% | N/A | 51% | 49% | Total Population | 676 | 48% | 44%-52% | 56% | 51%-61% | N/A | 65% | 35% | Total Population | on 325 | 55% | 50%-60% |
| GLENCOE | | | | | | | | | | | | | | | | | | | |
| Glencoe Regional Health Services | Glencoe Regional Health Services | 73% | 69%-76% | N/A | 44% | 56% | Total Population | 752 | 73% | 70%-76% | 72% | 69%-76% | N/A | 55% | 45% | Total Population | on 618 | 71% | 68%-75% |
| GRACEVILLE | | | | | | | | | | | | | | | | | | | |
| Graceville Health Center Clinic | Graceville Health Center Clinic | * | * | NA NA | * | * | * | * | * | * | * | * | N/A | * | * | * | * | * | * |
| GRANITE FALLS | | | | | | | • | | | | | | | | | | | | |
| Affilliated Community Medical Centers | Affiliated Community Medical Centers | 89% | 86%-91% | N/A | 41% | 59% | Total Population | 630 | 89% | 86%-91% | 74% | 69%-78% | N/A | 54% | 46% | Total Population | on 407 | 73% | 68%-77% |
| HARMONY | | | | | | | • | | | | | | | | | | | | |
| Gundersen Lutheran | Gundersen Clinic | 93% | 87%-97% | N/A | 62% | 38% | Total Population | 105 | 93% | 87%-97% | 84% | 73%-90% | N/A | 68% | 32% | Total Population | on 73 | 84% | 73%-90% |
| HECTOR | | | | | | | | | | | | | | | | | | | |
| Renville County Hospital and Clinics | Renville County Hospital and Clinics | 73% | 69%-76% | N/A | 44% | 56% | Total Population | 752 | 73% | 70%-76% | 72% | 69%-76% | N/A | 55% | 45% | Total Population | on 618 | 71% | 68%-75% |
| HENDRICKS | | | | | | | | | | | | | | | | | | | |
| Hendricks Clinic P.A. | Hendricks Clinic | 73% | 69%-76% | N/A | 44% | 56% | Total Population | 752 | 73% | 70%-76% | 72% | 69%-76% | N/A | 55% | 45% | : Total Population | on 618 | 71% | 68%-75% |

^{*} Sufficient data not available.

| Quality of Ca | | | Appro | | | | t for Childre ory Infection | | h | Ар | propriat | e Test | ing fo | r Chi | ldren wi | th P | haryn | gitis |
|--|---------------------------------------|--------------------|--|---------------------------------------|-----------------------------------|-------------------------|---|------------------------|---|--------------------|--|---------------------------------------|------------------------------------|-------------------------|----------------------------|-------------|------------------------|---|
| Acute Condit | ions | | Risk | Med Dist | dical Gr tribution nt Popul | oup n of lation | | | of Non- | | Risk | Dist | lical Gro tribution nt Popul | of ation | mple | | æ. | of Non- |
| See page 89 for an explanation of | terms. | d Rate | nterval of :e | • | | are Progra | tion or Saı | justed Rat | nterval of d Rate | d Rate | nterval of :e | 0 0 0 0 0 0 0 | | are Progra | tion or Saı | | justed Rat | nterval of d Rate |
| PHYSICIAN CLINIC NAME | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample Sample Size | Non-Risk Adjusted Rate | Confidence Interval Risk Adjusted Rate | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interval o Risk Adjusted Rate |
| Overall Minnesota Clinic Average | | 87% | 87–87% | NA | 56% | 44% | | 87% | 87–87% | 86% | 86-86% | NA | 71% | 29% | | | 86% | 86-86% |
| HOUSTON | | | | • | | | • | | | | | • | | | • | | | |
| Gunderson Lutheran | Gundersen Clinic | 93% | 87%-97% | N/A | 62% | 38% | Total Population 105 | 93% | 87%-97% | 84% | 73%-90% | N/A | 68% | 32% | Total Population | 73 | 84% | 73%-90% |
| HUTCHINSON | | | | | | | | | | | | | | | | | | |
| Hutchinson Medical Center | Hutchinson Medical Center | 90% | 84%-94% | N/A | 54% | 46% | Total Population 152 | 90% | 84%-94% | 89% | 81%-94% | N/A | 68% | 32% | Total Population | 100 | 89% | 81%-94% |
| IVANHOE | | | | | | | ************************************** | | | | | | | | | | | |
| Ivanhoe Clinic | | * | * | * | * | * | * * * | * | * | * | * | N/A | * | * | * | * | * | * |
| JACKSON | | | | | | | ************************************** | | | | | · · · · · · · · · · · · · · · · · · · | | | | | | |
| Sacred Heart Mercy Health Care Center | Sacred Heart Mercy Health Care Center | * | * | * | * | * | * * | * | * | * | * | N/A | * | * | * | * | * | * |
| Sanford Clinic Jackson | Sanford Clinic | 87% | 83%-89% | N/A | 76% | 24% | Total Population 628 | 87% | 84%-89% | 74% | 68%-79% | N/A | 82% | 18% | Total Population | 253 | 74% | 69%-79% |
| KASSON | | | | | | | | | | | | | | | | | | |
| Mayo Clinic | Mayo Clinic | 89% | 84%-92% | N/A | 24% | 76% | Total Population 435 | 92% | 89%-94% | 76% | 68%-84% | N/A | 32% | 68% | Total Population | 165 | 76% | 69%-82% |
| LA CRESCENT | | | | · · · · · · · · · · · · · · · · · · · | | | *************************************** | | | | | ** | | | | | | |
| Mayo Health System - Franciscan Skemp | Mayo Health System | 79% | 77%-81% | N/A | 41% | 59% | Total Population 1771 | 79% | 77%-81% | 75% | 73%-78% | N/A | 53% | 47% | Total Population | 1341 | 74% | 71%-76% |
| LAKE BENTON | | | | • • • • • • • • • | | | et | | | | | · · · · · · · · · · · · · · · · · · · | | | | | | |
| Lake Benton Healthcare Center | Avera Health/Avera Tri-State | 50% | 46%-53% | N/A | 51% | 49% | Total Population 676 | 48% | 44%-52% | 56% | 51%-61% | N/A | 65% | 35% | Total Population | 325 | 55% | 50%-60% |

^{*} Sufficient data not available.

| Quality of Ca | | | Appro | | | | t for Childre ory Infection | n wit | h | Apı | propriat | e Test | ing fo | r Chi | Idren with P | haryn | gitis |
|--|--------------------------------------|--------------------|--|----------|------------------------------------|-------------------------|---|------------------------|---|--------------------|--------------------------------------|----------|------------------------------------|-------------------------|---------------------------------|------------------------|---|
| Acute Condit. | ions | | Sk S | Dis | dical Gro tribution nt Popul | of ation | <u></u> | | -40 | | ¥ | Dist | dical Gro tribution nt Popul | of ation | <u>e</u> | | -L |
| See page 89 for an explanation of t | erms. | Rate | terval of Ri | | | e Program | on or Samp | sted Rate | terval of Non- Rate | Rate | terval of Risk | | | e Program | on or Sample | sted Rate | terval of No Rate |
| PHYSICIAN CLINIC NAME | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample Sample Size | Non-Risk Adjusted Rate | Confidence Interval Risk Adjusted Rate | Risk Adjusted Rate | Confidence Interval Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non- Risk Adjusted Rate |
| Overall Minnesota Clinic Average | | 87% | 87–87% | NA | 56% | 44% | | 87% | 87–87% | 86% | 86-86% | NA NA | 71% | 29% | | 86% | 86–86% |
| LAKE CITY | | | | • | | | | | | | | | | | | | |
| Mayo Health System-Lake City | Mayo Health System | 79% | 77%-81% | N/A | 41% | 59% | Total Population 1771 | 79% | 77%-81% | 75% | 73%-78% | N/A | 53% | 47% | Total Population 1341 | 74% | 71%-76% |
| LAKE CRYSTAL | | | | • | | | | | | | | | | | | | |
| Mankato Clinic | Mankato Clinic | 83% | 79%-85% | N/A | 58% | 42% | Total Population 600 | 83% | 79%-85% | 81% | 76%-84% | N/A | 75% | 25% | Total Population 379 | 81% | 76%-84% |
| LAKEFIELD | : | | | | | | | | | | | | | | | | |
| Avera Worthington Specialty Clinics | Avera Health/Avera Tri-State | 50% | 46%-53% | N/A | 51% | 49% | Total Population 676 | 48% | 44%-52% | 56% | 51%-61% | N/A | 65% | 35% | Total Population 325 | 55% | 50%-60% |
| Sanford Clinic Lakefield | Sanford Clinic | 87% | 83%-89% | N/A | 76% | 24% | Total Population 628 | 87% | 84%-89% | 74% | 68%-79% | N/A | 82% | 18% | Total Population 253 | 74% | 69%-79% |
| LE SUEUR | | | | | | | | | | | | | | | | | |
| Mayo Health System- Immanuel St. Joseph | Mayo Health System | 79% | 77%-81% | N/A | 41% | 59% | Total Population 1771 | 79% | 77%-81% | 75% | 73%-78% | N/A | 53% | 47% | Total Population 1341 | 74% | 71%-76% |
| Southern Metro Medical Clinics | Southern Metro Medical Clinics | 64% | 51%-76% | N/A | 87% | 13% | Total Population 91 | 63% | 52%-72% | 83% | 73%-91% | N/A | 95% | 5% | Total Population 95 | 84% | 76%-90% |
| LEWISTON | | | | | | | | | | | | | | | | | |
| Winona Health | Winona Health | 93% | 89%-95% | N/A | 50% | 50% | Total Population 352 | 93% | 89%-95% | 94% | 89%-96% | N/A | 63% | 37% | Total Population 169 | 93% | 89%-96% |
| LITCHFIELD | | | | | | | | | | | | | | | | | |
| Affilliated Community Medical Centers- Litchfield Clinic (East) | Affiliated Community Medical Centers | 89% | 86%-91% | N/A | 41% | 59% | Total Population 630 | 89% | 86%-91% | 74% | 69%-78% | N/A | 54% | 46% | Total Population 407 | 73% | 68%-77% |
| Affilliated Community Medical Centers- Litchfield Clinic (West) | Affiliated Community Medical Centers | 89% | 86%-91% | N/A | 41% | 59% | Total Population 630 | 89% | 86%-91% | 74% | 69%-78% | N/A | 54% | 46% | Total Population 407 | 73% | 68%-77% |
| | | | | | | | | | | | | | | | | | |

^{*} Sufficient data not available.

| Quality of Ca | | | Appro | | | | t for Ch | | | h | Ар | propriat | e Test | ting fo | r Chi | ldren wi | ith P | haryn | igitis |
|---|--|--------------------|--|----------|-----------------------------------|-------------------------|----------------------------|-------------|------------------------|---|--------------------|--------------------------------------|----------|------------------------------------|-------------------------|---------------------------------------|---|------------------------|---|
| Acute Condit | ions | | * | Dis | dical Gre tribution nt Popu | of lation | eo | | | Ė | | × | Dis | dical Gro tribution nt Popul | of ation | a. | 0 | | Ė |
| See page 89 for an explanation of t | erms. | ate | erval of Ris | | | Programs | n or Sampl | | ted Rate | erval of Non- ate | ate | erval of Risk | | | Programs | n or Sample | 0 | ted Rate | erval of No tate |
| PHYSICIAN CLINIC NAME | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interval Risk Adjusted Rate | Risk Adjusted Rate | Confidence Interval Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non- Risk Adjusted Rate |
| Overall Minnesota Clinic Average | | 87% | 87–87% | NA | 56% | 44% | | | 87% | 87–87% | 86% | 86-86% | NA | 71% | 29% | | | 86% | 86-86% |
| LONSDALE | | | | * | | | • | | | | | | • | | | | | | |
| FamilyHealth Medical Clinic | FamilyHealth Medical Clinics | 90% | 83%-95% | N/A | 76% | 24% | Total Populatio | on 127 | 91% | 85%-95% | 89% | 79%-95% | N/A | 88% | 12% | Total Populatio | ın 68 | 90% | 80%-95% |
| LUVERNE | | | | | | | | | | | | | | | | | | | |
| Sanford Clinic | Sanford Clinic | 87% | 83%-89% | N/A | 76% | 24% | Total Populatio | on 628 | 87% | 84%-89% | 74% | 68%-79% | N/A | 82% | 18% | Total Populatio | ın 253 | 74% | 69%-79% |
| MABEL | | | | | | | | | | | | | | | | · · · · · · · · · · · · · · · · · · · | | | |
| Winneshiek Medical Center | Winneshiek Medical Center-Mabel Clinic | * | * | NA | * | * | * | * | * | * | * | * | N/A | * | * | * | * | * | * |
| MADELIA | | | | | | | | | | | | | | | | | , | | |
| Mayo Health System- Immanuel St. Joseph | Mayo Health System | 79% | 77%-81% | N/A | 41% | 59% | Total Population | on 1771 | 79% | 77%-81% | 75% | 73%-78% | N/A | 53% | 47% | Total Populatio | ın 1341 | 74% | 71%-76% |
| MADISON | | | | | | | | | | | | | | | | • | | | |
| Lac Qui Parle Clinic | Lac Qui Parle Clinic | 73% | 69%-76% | N/A | 44% | 56% | Total Population | on 752 | 73% | 70%-76% | 72% | 69%-76% | N/A | 55% | 45% | Total Populatio | ın 618 | 71% | 68%-75% |
| MANKATO | | | | | | | | | | | | | • | | | : | | | |
| Between the Bridges Health Center | | * | * | NA | * | * | * | * | * | * | * | * | N/A | * | * | * | * | * | * |
| Mayo Health System-Immanuel St. Joseph- Mankato Eastridge | Mayo Health System | 79% | 77%-81% | N/A | 41% | 59% | Total Population | on 1771 | 79% | 77%-81% | 75% | 73%-78% | N/A | 53% | 47% | Total Populatio | ın 1341 | 74% | 71%-76% |
| Mayo Health System-Immanuel St. Joseph- Mankato Specialty Clinic | Mayo Health System | 79% | 77%-81% | N/A | 41% | 59% | Total Population | on 1771 | 79% | 77%-81% | 75% | 73%-78% | N/A | 53% | 47% | Total Populatio | in 1341 | 74% | 71%-76% |
| Mankato Clinic- Main Street | Mankato Clinic | 83% | 79%-85% | N/A | 58% | 42% | Total Population | on 600 | 83% | 79%-85% | 81% | 76%-84% | N/A | 75% | 25% | Total Populatio | ın 379 | 81% | 76%-84% |
| Mankato Clinic- Wickersham Campus | Mankato Clinic | 83% | 79%-85% | N/A | 58% | 42% | Total Population | on 600 | 83% | 79%-85% | 81% | 76%-84% | N/A | 75% | 25% | Total Populatio | ın 379 | 81% | 76%-84% |

^{*} Sufficient data not available.

| Quality of Ca | | | Appro | priate Uppe | Treater Res | tmen pirate | t for Chi ory Infec | ldre tion | n with | 1 | Ар | propriat | e Test | ing fo | r Chi | ldren w | ith P | haryn | ngitis |
|--|---|--------------------|--|----------------|----------------------------------|-------------------------|---------------------------------------|--------------|------------------------|---|--------------------|--|---|-----------------------------------|-------------------------|----------------------------|---|------------------------|---|
| Acute Condit | ions | | ₩ | Me Dis | dical Gr tribution nt Popu | oup n of lation | | | | Ė | | X | Dist | lical Gro ribution nt Popul | of ation | <u>o</u> | 0 | | Ė |
| See page 89 for an explanation of | terms. | Rate | iterval of Ri | | | re Program | ion or Samp | | ısted Rate | iterval of Non- I Rate | Rate | iterval of Ri | | | re Program | ion or Samp | 0 | ısted Rate | iterval of Non- I Rate |
| PHYSICIAN CLINIC NAME | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interval Risk Adjusted Rate | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interval o Risk Adjusted Rate |
| Overall Minnesota Clinic Average | | 87% | 87–87% | NA | 56% | 44% | | | 87% | 87–87% | 86% | 86-86% | NA | 71% | 29% | · · · | | 86% | 86-86% |
| Open Door Health Center | Open Door Health Center | * | * | NA | * | * | * | * | * | * | * | * | N/A | * | * | * | * | * | * |
| MAPLETON | | | | • | | | 0 0 0 0 | | | | | | • | | | | | | |
| Mankato Clinic | Mankato Clinic | 83% | 79%-85% | N/A | 58% | 42% | Total Population | 600 | 83% | 79%-85% | 81% | 76%-84% | N/A | 75% | 25% | Total Populati | on 379 | 81% | 76%-84% |
| MARSHALL | | | | | | | | | | | | | | | | | | | |
| Affiliated Community Medical Centers- Bruce Street | Affiliated Community Medical Centers | 89% | 86%-91% | N/A | 41% | 59% | Total Population | 630 | 89% | 86%-91% | 74% | 69%-78% | N/A | 54% | 46% | Total Populati | on 407 | 73% | 68%-77% |
| Affilliated Community Medical Centers- Marshall Clinic- Market Street | Affiliated Community Medical Centers | 89% | 86%-91% | N/A | 41% | 59% | Total Population | 630 | 89% | 86%-91% | 74% | 69%-78% | N/A | 54% | 46% | Total Populati | on 407 | 73% | 68%-77% |
| Avera Marshall Specialty Clinic | Avera Health/Avera Tri-State | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A |
| MILAN | | | | | | | | | | | | | , | | | | | | |
| Milan Clinic | Chippewa County Montevideo Hospital & Medical Clinic | 73% | 69%-76% | N/A | 44% | 56% | Total Population | 752 | 73% | 70%-76% | 72% | 69%-76% | N/A | 55% | 45% | Total Populati | on 618 | 71% | 68%-75% |
| MONTEVIDEO | | | | | | | | | | | | | , | | | | | | |
| Chippewa County Montevideo Hospital & Medical Clinic | Chippewa County Montevideo Hospital & Medical Clinic | 73% | 69%-76% | N/A | 44% | 56% | Total Population | 752 | 73% | 70%-76% | 72% | 69%-76% | N/A | 55% | 45% | Total Populati | on 618 | 71% | 68%-75% |
| MONTGOMERY | | | | | | • • • • • • • | 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | | | | | | * · · · · · · · · · · · · · · · · · · · | | | | | | |
| Southern Metro Medical Clinics- Montgomery Medical Clinic | Southern Metro Medical Clinics | 64% | 51%-76% | N/A | 87% | 13% | Total Population | 91 | 63% | 52%-72% | 83% | 73%-91% | N/A | 95% | 5% | Total Populati | on 95 | 84% | 76%-90% |
| MOUNTAIN LAKE | | | | | | | | | | | | | | | | | | | |
| Sanford Clinic | Sanford Clinic | 87% | 83%-89% | N/A | 76% | 24% | Total Population | 628 | 87% | 84%-89% | 74% | 68%-79% | N/A | 82% | 100/ | Total Populati | on 253 | 74% | 69%-79% |

^{*} Sufficient data not available.

| Quality of Ca Acute Conditi | | | Appro | Uppe Med | | oirato oup | t for Child ory Infecti | | with | | Ар | propriat | Med Dist | lical Gro | oup 1 of | ldren wi | th P | haryn | gitis |
|--|--------------------------------------|--------------------|--|-------------|------------|----------------|---|-----|------------------------|-----------------------------------|--------------------|--------------------------------------|-------------|------------|-------------------------|--|-------------|------------------------|---|
| See page 89 for an explanation of to | erms. | Rate | terval of Risk | | nt Popul | Programs noite | on or Sample | | sted Rate | Interval of Non- ed Rate | Rate | terval of Risk | | nt Popul | ation | on or Sample | | sted Rate | terval of Non- Rate |
| PHYSICIAN CLINIC NAME | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care | Total Population or Sample Sample Size | | Non-Risk Adjusted Rate | Confidence Int Risk Adjusted F | Risk Adjusted Rate | Confidence Interval Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interval o Risk Adjusted Rate |
| Overall Minnesota Clinic Average | | 87% | 87–87% | NA | 56% | 44% | | | 87% | 87–87% | 86% | 86-86% | NA | 71% | 29% | | | 86% | 86–86% |
| NEW LONDON | | | | | | | * | | | | | | | | | | | | |
| Affilliated Community Medical Centers | Affiliated Community Medical Centers | 89% | 86%-91% | N/A | 41% | 59% | Total Population 6 | 30 | 89% | 86%-91% | 74% | 69%-78% | N/A | 54% | 46% | Total Population | n 407 | 73% | 68%-77% |
| NEW PRAGUE | | | | | | | | | | | | | | | | ·*···································· | | | |
| Parkview Medical Clinic | Parkview Medical Clinic | 40% | 25%-57% | N/A | 79% | 21% | Total Population | 33 | 36% | 22%-53% | 94% | 88%-98% | N/A | 85% | 15% | Total Population | n 114 | 96% | 90%-98% |
| NEW ULM | | | | | | | | | | | | | | | | | | | |
| Allina Health System- New Ulm Medical Center | Allina Health System | 90% | 85%-94% | N/A | 44% | 56% | Total Population 2 | 217 | 91% | 86%-94% | 89% | 84%-93% | N/A | 67% | 33% | Total Population | 1 206 | 89% | 84%-92% |
| NORTH MANKATO | | | | | | | | | | | | | | | | | | | |
| Mayo Health System-Immanuel St. Joseph - Mankato Northridge | Mayo Health System | 79% | 77%-81% | N/A | 41% | 59% | Total Population 1 | 771 | 79% | 77%-81% | 75% | 73%-78% | N/A | 53% | 47% | Total Population | n 1341 | 74% | 71%-76% |
| Mankato Clinic | Mankato Clinic | 83% | 79%-85% | N/A | 58% | 42% | Total Population 6 | 00 | 83% | 79%-85% | 81% | 76%-84% | N/A | 75% | 25% | Total Population | 1 379 | 81% | 76%-84% |
| NORTHFIELD | | | | | | | 0 0 0 0 | | | | | | | | | | | | |
| Allina Medical Clinic | Allina Medical Clinic | 92% | 91%-93% | N/A | 61% | 39% | Total Population 2 | 641 | 92% | 91%-93% | 88% | 86%-89% | N/A | 72% | 28% | Total Population | n 1439 | 88% | 86%-89% |
| OLIVIA | | | | • | | | 0 0 0 0 0 | | | | | | | | | | • | | |
| Renville County Hospital and Clinics | Renville County Hospital and Clinics | 73% | 69%-76% | N/A | 44% | 56% | Total Population 7 | 752 | 73% | 70%-76% | 72% | 69%-76% | N/A | 55% | 45% | Total Population | n 618 | 71% | 68%-75% |
| ORTONVILLE | | | | | | | | | | | | | | | | | | | |
| Northside Medical Clinic | Northside Medical Clinic | 73% | 69%-76% | N/A | 44% | 56% | Total Population 7 | 752 | 73% | 70%-76% | 72% | 69%-76% | N/A | 55% | 45% | Total Population | n 618 | 71% | 68%-75% |
| | | | | | | | 1 ⁷ | | | | | | * | | | · · · · · · · · · · · · · · · · · · · | | | |

^{*} Sufficient data not available.

| Quality of Car | | | Appro | | | | t for Chi ory Infec | | n with | 1 | Ap | propriat | e Test | ing fo | r Chi | Idren with | Pharyr | ngitis |
|--|--------------------------------------|--------------------|--|-------------|------------------------------------|-------------------------|----------------------------|-------------|------------------------|---|--------------------|--------------------------------------|----------|------------------------------------|-------------------------|---|------------------------|---|
| Acute Conditi | ons | | * | Med Dist | dical Gro tribution nt Popul | oup of ation | | 0 | | ė | | * | Dist | lical Gro tribution nt Popul | of ation | <u>a</u> | | Ė |
| See page 89 for an explanation of te | erms. | Rate | erval of Ris | | | e Program: | n or Samp | | sted Rate | erval of Non- Rate | Rate | erval of Risk | | | e Program | n or Sampl | sted Rate | erval of Non- Rate |
| PHYSICIAN CLINIC NAME | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interval Risk Adjusted Rate | Risk Adjusted Rate | Confidence Interval Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample Sample Size | Non-Risk Adjusted Rate | Confidence Interval o Risk Adjusted Rate |
| Overall Minnesota Clinic Average | | 87% | 87–87% | NA | 56% | 44% | | | 87% | 87–87% | 86% | 86-86% | NA | 71% | 29% |)) | 86% | 86–86% |
| OWATONNA | | | | | | | | | | | | | | | | | | |
| Mayo Health System-Owatonna Clinic | Mayo Health System | 79% | 77%-81% | N/A | 41% | 59% | Total Population | n 1771 | 79% | 77%-81% | 75% | 73%-78% | N/A | 53% | 47% | Total Population 13 | 11 74% | 71%-76% |
| PINE ISLAND | | | | | | | | | | | | | | | | | | |
| Olmsted Medical Center | Olmsted Medical Center | 82% | 78%-86% | N/A | 26% | 74% | Total Population | n 574 | 82% | 79%-85% | 87% | 83%-91% | N/A | 45% | 55% | Total Population 34 | 0 86% | 82%-89% |
| PIPESTONE | | | | | | | | | | | | | | | | | | |
| Avera- Pipestone County Medical Center | Avera Health/Avera Tri-State | 50% | 46%-53% | N/A | 51% | 49% | Total Population | n 676 | 48% | 44%-52% | 56% | 51%-61% | N/A | 65% | 35% | Total Population 32 | 5 55% | 50%-60% |
| PLAINVIEW | | | | | | | | | | | | | | | | | | |
| Olmsted Medical Center | Olmsted Medical Center | 82% | 78%-86% | N/A | 26% | 74% | Total Population | n 574 | 82% | 79%-85% | 87% | 83%-91% | N/A | 45% | 55% | Total Population 34 | 0 86% | 82%-89% |
| PRESTON | | | | | | | | | | | | | | | | | | |
| Olmsted Medical Center | Olmsted Medical Center | 82% | 78%-86% | N/A | 26% | 74% | Total Population | n 574 | 82% | 79%-85% | 87% | 83%-91% | N/A | 45% | 55% | Total Population 34 | 0 86% | 82%-89% |
| RED WING | | | | | | | | | | | | | | | | | | |
| Fairview Red Wing Medical Center | Fairview Health Services | 89% | 87%-90% | N/A | 52% | 48% | Total Population | n 2410 | 89% | 88%-90% | 95% | 94%-96% | N/A | 65% | 35% | Total Population 15 | 95% | 94%-96% |
| REDWOOD FALLS | | | | | | | : | | | | | | | | | | | |
| Affilliated Community Medical Centers | Affiliated Community Medical Centers | 89% | 86%-91% | N/A | 41% | 59% | Total Population | n 630 | 89% | 86%-91% | 74% | 69%-78% | N/A | 54% | 46% | Total Population 40 | 7 73% | 68%-77% |
| RENVILLE | | | | | | | | | | | | | | | | | | |
| Renville County Hospital and Clinics | Renville County Hospital and Clinics | 73% | 69%-76% | N/A | 44% | 56% | Total Population | n 752 | 73% | 70%-76% | 72% | 69%-76% | N/A | 55% | 45% | Total Population 61 | 8 71% | 68%-75% |

^{*} Sufficient data not available.

| Quality of Ca | | | Appro | | | | t for Childre | | h | Ар | propriat | e Test | ing fo | r Chi | ildren wi | th P | haryn | ngitis |
|--|---------------------------|--------------------|--|----------|----------------------------------|-------------------------|---|---|---|--------------------|--------------------------------------|---------------------------------|------------------------------------|-------------------------|------------------|-------------|------------------------|---|
| Acute Condit | cions | | * | Dis | dical Gr tribution nt Popu | n of lation | o. | 0 | Ł | | ¥ | Dist | dical Gro tribution nt Popul | of ation | . w | | | Ł |
| See page 89 for an explanation of | terms. | Rate | terval of Ris | | | e Programs | on or Sampl | sted Rate | terval of Non- Rate | Rate | terval of Risk | 0 0 0 0 0 0 0 | | e Programs | on or Sample | | sted Rate | terval of No Rate |
| PHYSICIAN CLINIC NAME | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample Sample Size | Non-Risk Adjusted Rate | Confidence Interval Risk Adjusted Rate | Risk Adjusted Rate | Confidence Interval Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non- Risk Adjusted Rate |
| Overall Minnesota Clinic Average | | 87% | 87–87% | NA | 56% | 44% | | 87% | 87–87% | 86% | 86-86% | NA NA | 71% | 29% | 6 | | 86% | 86–86% |
| ROCHESTER | | | | | | | | | | | | | | | | • | | |
| Mayo Clinic- Baldwin Building, Family Medicine | Mayo Clinic | 89% | 84%-92% | N/A | 24% | 76% | Total Population 435 | 92% | 89%-94% | 76% | 68%-84% | N/A | 32% | 68% | Total Population | n 165 | 76% | 69%-829 |
| Mayo Clinic- Baldwin Building, Primary Care Internal Medicine | Mayo Clinic | 89% | 84%-92% | N/A | 24% | 76% | Total Population 435 | 92% | 89%-94% | 76% | 68%-84% | N/A | 32% | 68% | Total Population | n 165 | 76% | 69%-829 |
| Mayo Clinic- Mayo Building | Mayo Clinic | 89% | 84%-92% | N/A | 24% | 76% | Total Population 435 | 92% | 89%-94% | 76% | 68%-84% | N/A | 32% | 68% | Total Population | n 165 | 76% | 69%-829 |
| Mayo Clinic- Northeast | Mayo Clinic | 89% | 84%-92% | N/A | 24% | 76% | Total Population 435 | 92% | 89%-94% | 76% | 68%-84% | N/A | 32% | 68% | Total Population | n 165 | 76% | 69%-829 |
| Mayo Clinic- Northwest | Mayo Clinic | 89% | 84%-92% | N/A | 24% | 76% | Total Population 435 | 92% | 89%-94% | 76% | 68%-84% | N/A | 32% | 68% | Total Population | n 165 | 76% | 69%-829 |
| Olmsted Medical Center- Rochester Northwest | Olmsted Medical Center | 82% | 78%-86% | N/A | 26% | 74% | Total Population 574 | 82% | 79%-85% | 87% | 83%-91% | N/A | 45% | 55% | Total Population | n 340 | 86% | 82%-899 |
| Olmsted Medical Center- Rochester Southeast | Olmsted Medical Center | 82% | 78%-86% | N/A | 26% | 74% | Total Population 574 | 82% | 79%-85% | 87% | 83%-91% | N/A | 45% | 55% | Total Population | n 340 | 86% | 82%-899 |
| Rochester Family Medicine Clinic | | * | * | NA | * | * | * * | * | * | * | * | N/A | * | * | * | * | * | * |
| RUSHFORD | | | | | | | | | | | | | | | | | | |
| Winona Health | Winona Health | 93% | 89%-95% | N/A | 50% | 50% | Total Population 352 | 93% | 89%-95% | 94% | 89%-96% | N/A | 63% | 37% | Total Population | n 169 | 93% | 89%-969 |
| SLAYTON | | | | | | | | | | | | | | | | • | | |
| Murray County Clinic | Murray County Clinic | 73% | 69%-76% | N/A | 44% | 56% | Total Population 752 | 73% | 70%-76% | 72% | 69%-76% | N/A | 55% | 45% | Total Population | n 618 | 71% | 68%-759 |
| SLEEPY EYE | | | | | | | | | | | | | | | | | | |
| Sleepy Eye Medical Center | Sleepy Eye Medical Center | 73% | 69%-76% | N/A | 44% | 56% | Total Population 752 | 73% | 70%-76% | 72% | 69%-76% | N/A | 55% | 45% | Total Population | n 618 | 71% | 68%-759 |

^{*} Sufficient data not available.

| Quality of Ca | | | Appro | | | | t for Chi ory Infec | | n with | 1 | Ар | propriat | e Test | ing fo | r Chi | Idren with | Pharyr | ngitis |
|--|--------------------------------|--------------------|--|---------------------------------------|------------------------------------|-------------------------|----------------------------|-------------|------------------------|---|--------------------|--------------------------------------|--------------------------------------|------------------------------------|-------------------------|---|------------------------|---|
| Acute Conditi | ions | | * | Med Dis | dical Gro tribution nt Popul | oup of ation | | 0 | | ė | | * | Dist | dical Gro tribution nt Popul | of ation | <u>o</u> | | ė |
| See page 89 for an explanation of to | erms. | Rate | erval of Ris | | | e Program | n or Samp | | sted Rate | erval of Non- Rate | Rate | erval of Risk | 0 0 0 0 0 0 0 0 | | e Program | n or Sampl | sted Rate | erval of Non- Rate |
| PHYSICIAN CLINIC NAME | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interval c Risk Adjusted Rate | Risk Adjusted Rate | Confidence Interval Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample Sample Size | Non-Risk Adjusted Rate | Confidence Interval o Risk Adjusted Rate |
| Overall Minnesota Clinic Average | | 87% | 87–87% | NA | 56% | 44% | | | 87% | 87–87% | 86% | 86-86% | NA | 71% | 29% | | 86% | 86-86% |
| SPICER | | | | | | | | | | | | | | | | | | |
| Paynesville Green Lake Medical Clinic | Paynesville Area Health System | 62% | 52%-71% | N/A | 53% | 47% | Total Population | n 90 | 62% | 52%-72% | 86% | 78%-91% | N/A | 62% | 38% | Total Population 10 | 85% | 77%-91% |
| SPRING GROVE | | | | | | | | | | | | | | | | | | |
| Gundersen Lutheran | Gundersen Clinic | 93% | 87%-97% | N/A | 62% | 38% | Total Population | n 105 | 93% | 87%-97% | 84% | 73%-90% | N/A | 68% | 32% | Total Population 73 | 84% | 73%-90% |
| SPRING VALLEY | | | | | | | | | | | | | (| | | | | |
| Olmsted Medical Center | Olmsted Medical Center | 82% | 78%-86% | N/A | 26% | 74% | Total Population | n 574 | 82% | 79%-85% | 87% | 83%-91% | N/A | 45% | 55% | Total Population 34 | 86% | 82%-89% |
| SPRINGFIELD | | | | · · · · · · · · · · · · · · · · · · · | | | | | | | | | | | | | | |
| Mayo Health System-Immanuel St. Joseph | Mayo Health System | 79% | 77%-81% | N/A | 41% | 59% | Total Population | n 1771 | 79% | 77%-81% | 75% | 73%-78% | N/A | 53% | 47% | Total Population 134 | 1 74% | 71%-76% |
| ST. CHARLES | | | | | | | | | | | | | | | | | | |
| Olmsted Medical Center | Olmsted Medical Center | 82% | 78%-86% | N/A | 26% | 74% | Total Population | n 574 | 82% | 79%-85% | 87% | 83%-91% | N/A | 45% | 55% | Total Population 34 | 86% | 82%-89% |
| ST. JAMES | | | | | | | | | | | | | | | | | | |
| Mayo Health System-Immanuel St. Joseph | Mayo Health System | 79% | 77%-81% | N/A | 41% | 59% | Total Population | n 1771 | 79% | 77%-81% | 75% | 73%-78% | N/A | 53% | 47% | Total Population 134 | 1 74% | 71%-76% |
| Moulton & Parsons MDs | | * | * | NA | * | * | * | * | * | * | * | * | N/A | * | * | * * | ****** | * |
| ST. PETER | | | | | | | | | | | | | | | | | | |
| Mayo Health System-Immanuel St. Joseph | Mayo Health System | 79% | 77%-81% | N/A | 41% | 59% | Total Population | n 1771 | 79% | 77%-81% | 75% | 73%-78% | N/A | 53% | 47% | Total Population 134 | 1 74% | 71%-76% |
| Mankato Clinic- Daniel's Health Center | Mankato Clinic | 83% | 79%-85% | N/A | 58% | 42% | Total Population | n 600 | 83% | 79%-85% | 81% | 76%-84% | N/A | 75% | 25% | Total Population 37 | 81% | 76%-84% |

^{*} Sufficient data not available.

| Quality of Ca | | | Appro | | | | t for Chi ory Infec | | | 1 | Ар | propriat | e Test | ing fo | r Chi | ldren w | ith P | haryn | ngitis |
|---|--------------------------------|--------------------|--|----------|------------------------------------|-------------------------|----------------------------|---|------------------------|---|--------------------|--------------------------------------|----------|------------------------------------|-------------------------|---------------------------------------|-------------|------------------------|---|
| Acute Condit | ions | | * | Dis | dical Gro tribution nt Popul | of lation | ø. | | | Ė | | × | Dist | lical Gro tribution nt Popul | of ation | O | 0 | | Ł |
| See page 89 for an explanation of t | terms. | Rate | erval of Ris | | | e Programs | n or Sampl | 000000000000000000000000000000000000000 | sted Rate | erval of Non- Rate | Rate | erval of Risk | | | e Programs | n or Sample | 0 0 0 | sted Rate | erval of No Rate |
| PHYSICIAN CLINIC NAME | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interval Risk Adjusted Rate | Risk Adjusted Rate | Confidence Interval Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non- Risk Adjusted Rate |
| Overall Minnesota Clinic Average | | 87% | 87–87% | NA | 56% | 44% | | | 87% | 87–87% | 86% | 86-86% | NA | 71% | 29% | ó | | 86% | 86–86% |
| River's Edge Clinic | River's Edge Hospital & Clinic | * | * | NA | * | * | * | * | * | * | * | * | N/A | * | * | * | * | * | * |
| STEWARTVILLE | | | | | | | | | | | | | | | | | | | |
| Olmsted Medical Center | Olmsted Medical Center | 82% | 78%-86% | N/A | 26% | 74% | Total Population | 574 | 82% | 79%-85% | 87% | 83%-91% | N/A | 45% | 55% | Total Populati | on 340 | 86% | 82%-89% |
| TRACY | | | | | | | · | | | | | | | | | · · · · · · · · · · · · · · · · · · · | | | |
| Sanford Clinic Tracy/ Balaton/Walnut Grove | Sanford Clinic | 87% | 83%-89% | N/A | 76% | 24% | Total Population | 628 | 87% | 84%-89% | 74% | 68%-79% | N/A | 82% | 18% | Total Populati | on 253 | 74% | 69%-79% |
| TYLER | | | | | | | | | | | | | • | | | | | | |
| Tyler Medical Clinic | Avera Health/Avera Tri-State | 50% | 46%-53% | N/A | 51% | 49% | Total Population | 676 | 48% | 44%-52% | 56% | 51%-61% | N/A | 65% | 35% | Total Populati | on 325 | 55% | 50%-60% |
| WABASHA | | | | | | | | | | | | | | | | | | | |
| Mayo Health System-Wabasha Clinic | Mayo Health System | 79% | 77%-81% | N/A | 41% | 59% | Total Population | 1771 | 79% | 77%-81% | 75% | 73%-78% | N/A | 53% | 47% | Total Populati | on 1341 | 74% | 71%-76% |
| WANAMING0 | | | | | | | | | | | | | | | | | | | |
| Olmsted Medical Center | Olmsted Medical Center | 82% | 78%-86% | N/A | 26% | 74% | Total Population | 574 | 82% | 79%-85% | 87% | 83%-91% | N/A | 45% | 55% | Total Populati | on 340 | 86% | 82%-89% |
| WASECA | | | | | | | | | | | | | | | | | | | |
| Mayo Health System-Immanuel St. Joseph | Mayo Health System | 79% | 77%-81% | N/A | 41% | 59% | Total Population | 1771 | 79% | 77%-81% | 75% | 73%-78% | N/A | 53% | 47% | Total Populati | on 1341 | 74% | 71%-76% |
| WATKINS | | | | | | | | | | | | | | | | | | | |
| Paynesville Watkins Medical Clinic | Paynesville Area Health System | 62% | 52%-71% | N/A | 53% | 47% | Total Population | 90 | 62% | 52%-72% | 86% | 78%-91% | N/A | 62% | 38% | Total Populati | on 103 | 85% | 77%-91% |

^{*} Sufficient data not available.

| Quality of Car | | | Appro | priate | Treater Resp | men oirate | t for Child | drer ion | n with | 1 | Apı | oropriat | e Test | ing fo | r Chi | ldren wi | ith P | haryn | gitis |
|---|---|--------------------|--|----------------------------|------------------------------------|-------------------------|---|---|------------------------|---|--------------------|--|---------------------------------|------------------------------------|-------------------------|----------------------------|---|------------------------|---|
| Acute Conditi | ons | | ¥s | Dis | dical Gro tributior nt Popul | of ation | <u>o</u> | | | n- | | × | Dist | dical Gro tribution nt Popul | of ation | <u>e</u> | 0 | | Ė |
| See page 89 for an explanation of to | erms. | Rate | erval of Ris | 0 0 0 0 0 0 | | e Program | on or Samp | | sted Rate | erval of Non- Rate | Rate | erval of Ris | 0 0 0 0 0 0 0 | | e Program | on or Samp | 0 0 0 0 0 | sted Rate | erval of No Rate |
| PHYSICIAN CLINIC NAME | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interval Risk Adjusted Rate | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non- Risk Adjusted Rate |
| Overall Minnesota Clinic Average | | 87% | 87–87% | NA | 56% | 44% | | | 87% | 87–87% | 86% | 86-86% | NA | 71% | 29% | , 5 | | 86% | 86–86% |
| WESTBROOK | | | | | | | • | : | | | | | | | | • | • | | |
| Sanford Clinic Westbrook | Sanford Clinic | 87% | 83%-89% | N/A | 76% | 24% | Total Population | 628 | 87% | 84%-89% | 74% | 68%-79% | N/A | 82% | 18% | Total Populatio | on 253 | 74% | 69%-79% |
| WILLMAR | | | | | | | | • • • • • • | | | | | | | | | | | |
| Affilliated Community Medical Centers | Affiliated Community Medical Centers | 89% | 86%-91% | N/A | 41% | 59% | Total Population | 630 | 89% | 86%-91% | 74% | 69%-78% | N/A | 54% | 46% | Total Populatio | on 407 | 73% | 68%-77% |
| Family Practice Medical Center of Willmar | Family Practice Medical Center of Willmar | 96% | 89%-100% | N/A | 25% | 75% | Total Population | 92 | 97% | 91%-99% | 96% | 85%-98% | N/A | 58% | 42% | Total Populatio | on 36 | 94% | 82%-98% |
| WINDOM | | | | | | | | • | | | | | | | | | | | |
| Avera- United Medical Clinic | Avera Health/Avera Tri-State | 50% | 46%-53% | N/A | 51% | 49% | Total Population | 676 | 48% | 44%-52% | 56% | 51%-61% | N/A | 65% | 35% | Total Populatio | on 325 | 55% | 50%-60% |
| Hartberg Medical Clinic | Hartberg Medical Clinic | * | * | NA | * | * | * | * | * | * | * | * | N/A | * | * | * | * | * | * |
| Sanford Clinic Windom | Sanford Clinic | 87% | 83%-89% | N/A | 76% | 24% | Total Population | 628 | 87% | 84%-89% | 74% | 68%-79% | N/A | 82% | 18% | Total Populatio | on 253 | 74% | 69%-79% |
| Windom Family Medical Center | | * | * | NA | * | * | * | * | * | * | * | * | N/A | * | * | * | * | * | * |
| WINONA | | | | | | | 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | | | | | | | | | | | | |
| Family Medicine of Winona | Family Medicine of Winona | * | * | NA | * | * | * * * | * | * | * | * | * | N/A | * | * | * * | * | * | * |
| Winona Health- Winona Health Clinics | Winona Health | 93% | 89%-95% | N/A | 50% | 50% | Total Population | 352 | 93% | 89%-95% | 94% | 89%-96% | N/A | 63% | 37% | Total Population | on 169 | 93% | 89%-96% |
| WINSTED | | | | | | | 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | | | | | | | | | | | | |
| Ridgeview Winsted Clinic | Ridgeview Clinics | 76% | 68%-82% | N/A | 69% | 31% | Total Population | 147 | 76% | 69%-82% | 95% | 90%-98% | N/A | 81% | 19% | Total Populatio | on 112 | 95% | 89%-98% |
| | | | | | | | 8 · · · · · · · · · · · · · · · · · · · | | | | | | | | | | | | |

^{*} Sufficient data not available.

| Quality of Ca Acute Condit | | | Appro | Uppe | e r Res p dical Gr | pirato oup | t for Chi ory Infec | ldre tion | n wit | h | Ap | propriat | Med | dical Gr | oup | ildren w | ith P | haryn | gitis |
|------------------------------------|------------------------------|--------------------|--|--------------|------------------------------|-------------------------|----------------------------|--------------|---|---|--------------------|--|---------------------------------------|-----------------------|-------------------------|----------------------------|-------------|------------------------|---|
| See page 89 for an explanation of | | late | erval of Risk | Dis Patie | tribution nt Popu | lation | n or Sample | | ted Rate | erval of Non- tate | late | erval of Risk | Dis | tributior nt Popul | ı of lation | n or Sample | | ted Rate | erval of Non- late |
| PHYSICIAN CLINIC NAME | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non- Risk Adjusted Rate | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non- Risk Adjusted Rate |
| Overall Minnesota Clinic Average | | 87% | 87–87% | NA NA | 56% | 44% | | | 87% | 87–87% | 86% | 86-86% | NA NA | 71% | 29% | 6 | | 86% | 86–86% |
| WORTHINGTON | | | | | | | • | | | | | | • | | | | | | |
| Avera Worthington Specialty Clinic | Avera Health/Avera Tri-State | 50% | 46%-53% | N/A | 51% | 49% | Total Population | 1 676 | 48% | 44%-52% | 56% | 51%-61% | N/A | 65% | 35% | Total Population | on 325 | 55% | 50%-60% |
| Sanford Clinic | Sanford Clinic | 87% | 83%-89% | N/A | 76% | 24% | Total Population | n 628 | 87% | 84%-89% | 74% | 68%-79% | N/A | 82% | 18% | Total Population | on 253 | 74% | 69%-79% |
| ZUMBROTA | | | | | | | | | | | | | | | | | | | |
| Fairview Red Wing Zumbrota Clinic | Fairview Health Services | 89% | 87%-90% | N/A | 52% | 48% | Total Population | 1 2410 | 89% | 88%-90% | 95% | 94%-96% | N/A | 65% | 35% | Total Population | on 1584 | 95% | 94%-96% |
| | | | | | | | | | | | | | | | | | | | |
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| | | | | | | | | | - 0 10 0 0 0 0 0 0 0 0 | | | | - * | | | | | | |

^{*} Sufficient data not available.

| Quality of Ca | re for | | Avoid | dance of A | Antibiotics i | in the Trea | tment of Adu | It Bronch | itis | |
|--|--------------------------------------|--------------------|--|------------|-----------------------------------|-------------------------|----------------------------|-------------|--|---|
| Acute Condita | ions | | | | cal Group Distr Patient Popula | | | | | |
| See page 89 for an explanation of t | erms. | Rate | Confidence Interval of Risk Adjusted Rate | | | re Programs | Total Population or Sample | | isted Rate | Confidence Interval of Non- Risk Adjusted Rate |
| PHYSICIAN CLINIC NAME | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence In Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Populati | Sample Size | Non-Risk Adjusted Rate | Confidence In Risk Adjusted |
| Overall Minnesota Clinic Average | | 19% | 19–20% | NA | 87% | 13% | | | 19% | 19–20% |
| ADRIAN | | | | • | | | | | • | |
| Sanford Clinic Adrian | Sanford Clinic | 25% | 19%-34% | N/A | 90% | 10% | Total Population | 127 | 26% | 19%-34% |
| ALBERT LEA | | | | | | | | | | |
| Mayo Health System- Albert Lea Medical Center | Mayo Health System | 12% | 10%-14% | N/A | 79% | 21% | Total Population | 758 | 12% | 10%-14% |
| APPLETON | | | | | | | | | | |
| Appleton Clinic | Appleton Area Health Services | 12% | 9%-17% | N/A | 75% | 25% | Total Population | 257 | 12% | 9%-17% |
| ARLINGTON | | | | • | | | | | 0 0 0 0 | |
| Sibley Medical Center | Sibley Medical Center | * | * | N/A | * | * | * | * | * | * |
| AUSTIN | | | | • | | | | | ************************************** | |
| Mayo Health System- Austin Medical Center | Mayo Health System | 12% | 10%-14% | N/A | 79% | 21% | Total Population | 758 | 12% | 10%-14% |
| Smart Clinic | Smart Clinic | * | * | N/A | * | * | * | * | * | * |
| BENSON | | | | | | | | | * * * * * * * * * * * * * * * * * * * | |
| Affilliated Community Medical Centers | Affiliated Community Medical Centers | 7% | 5%-9% | N/A | 78% | 22% | Total Population | 560 | 6% | 5%-9% |
| BLUE EARTH | | | | | | | | | | |
| United Hospital District Clinic | United Hospital District Clinic | * | * | N/A | * | * | * | * | * | * |
| | | | | | | | | | ** | |

^{*} Sufficient data not available.

| Quality of Ca | re for | | Avoi | dance of A | Antibiotics i | n the Trea | tment of Adu | It Bronch | itis | |
|---|---|--------------------|--|------------|-----------------------------------|-------------------------|----------------------------|-------------|---------------------------------------|---|
| Acute Condit | | | | | cal Group Distr Patient Popula | | | | | |
| See page 89 for an explanation of t | terms. | Rate | terval of Risk | | | e Programs | on or Sample | | sted Rate | terval of Non- Rate |
| PHYSICIAN CLINIC NAME | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non- Risk Adjusted Rate |
| Overall Minnesota Clinic Average | | 19% | 19–20% | NA | 87% | 13% | | | 19% | 19–20% |
| BYRON | | | | | | | | | | |
| Olmsted Medical Center | Olmsted Medical Center | 8% | 5%-15% | N/A | 70% | 30% | Total Population | 128 | 9% | 5%-16% |
| CALEDONIA | | | | | | | | | | |
| Mayo Health System-Franciscan Skem | np Mayo Health System | 12% | 10%-14% | N/A | 79% | 21% | Total Population | 758 | 12% | 10%-14% |
| CANBY | | | | | | | | | | |
| Sanford Clinic Canby | Sanford Clinic | 25% | 19%-34% | N/A | 90% | 10% | Total Population | 127 | 26% | 19%-34% |
| CANNON FALLS | | | | | | | | | | |
| Mayo Health System- Cannon Falls Medical Center | Mayo Health System | 12% | 10%-14% | N/A | 79% | 21% | Total Population | 758 | 12% | 10%-14% |
| CHATFIELD | | | | | | | | | | |
| Olmsted Medical Center | Olmsted Medical Center | 8% | 5%-15% | N/A | 70% | 30% | Total Population | 128 | 9% | 5%-16% |
| CLARA CITY | | | | | | | | | | |
| Clara City Clinic | Chippewa County Montevideo Hospital & Medical Clinic | 12% | 9%-17% | N/A | 75% | 25% | Total Population | 257 | 12% | 9%-17% |
| CLARKFIELD | | | | | | | | | · · · · · · · · · · · · · · · · · · · | |
| Clarkfield Clinic | Chippewa County Montevideo Hospital & Medical Clinic | 12% | 9%-17% | N/A | 75% | 25% | Total Population | 257 | 12% | 9%-17% |
| DASSEL | | | | | | | | | * | |
| Hutchinson Area Health Care- Dassel Medical Center | Hutchinson Area Health Care | * | * | N/A | * | * | * | * | * | * |

^{*} Sufficient data not available.

| Quality of Ca | re for | | Avoid | dance of | Antibiotics i | n the Trea | tment of Adı | ult Bronch | itis | |
|--|--------------------------------|--------------------|--|---|---|-------------------------|----------------------------|-------------|------------------------|---|
| Acute Condit | | | | Med o | lical Group Distri of Patient Popula | bution tion | | | | |
| See page 89 for an explanation of t | erms. | d Rate | Confidence Interval of Risk Adjusted Rate | | | MN Health Care Programs | Total Population or Sample | | justed Rate | Confidence Interval of Non- Risk Adjusted Rate |
| PHYSICIAN CLINIC NAME | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence l Adjusted Rat | Medicare | Commercial | MN Health G | Total Popula | Sample Size | Non-Risk Adjusted Rate | Confidence I Risk Adjuste |
| Overall Minnesota Clinic Average | | 19% | 19–20% | NA | 87% | 13% | | | 19% | 19–20% |
| Meeker Memorial Clinic | Meeker Memorial Clinic | * | * | N/A | * | * | * | * | * | * |
| DAWSON | | | | 9 9 9 9 | | | | | | |
| Dawson Clinic | Dawson Clinic | 12% | 9%-17% | N/A | 75% | 25% | Total Population | 257 | 12% | 9%-17% |
| EDEN VALLEY | | | | , | | | | | | |
| Paynesville Eden Valley Medical Clinic | Paynesville Area Health System | * | * | N/A | * | * | * | * | * | * |
| EDGERTON | | | | 6 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | | | | | | |
| Edgerton Family Clinic Avera | Avera Health/Avera Tri-State | 15% | 10%-21% | N/A | 83% | 17% | Total Population | 163 | 15% | 10%-21% |
| FAIRFAX | | | | 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | | | | | | |
| Fairfax Medical Clinic | | * | * | N/A | * | * | * | * | * * | * |
| FAIRMONT | | | | 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | | | | | | |
| Braaten Medical Clinic | | * | * | N/A | * | * | * | * | * * | * |
| Dulcimer Medical Center | Dulcimer Medical Center | * | * | N/A | * | * | * | * | * * | * |
| Mayo Health System- Fairmont Medical Center | Mayo Health System | 12% | 10%-14% | N/A | 79% | 21% | Total Population | 758 | 12% | 10%-14% |
| Smart Clinic | Smart Clinic | * | * | N/A | * | * | * | * | * | * |
| FARIBAULT | | | | | | | | | | |
| Allina Medical Clinic | Allina Medical Clinic | 14% | 13%-15% | N/A | 89% | 11% | Total Population | 2739 | 14% | 13%-15% |

^{*} Sufficient data not available.

| Quality of Ca | re for | | Avoid | dance of A | ntibiotics i | n the Trea | tment of Adul | t Bronch | itis | |
|---|--------------------------------------|--------------------|--|---|------------------------------------|-------------------------|----------------------------|-------------|------------------------|---|
| Acute Condit | | | | | cal Group Distri Patient Popula | | | | | |
| See page 89 for an explanation of | terms. | Rate | Confidence Interval of Risk Adjusted Rate | | | MN Health Care Programs | Total Population or Sample | | ısted Rate | Confidence Interval of Non- Risk Adjusted Rate |
| PHYSICIAN CLINIC NAME | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence Int Adjusted Rate | Medicare | Commercial | MN Health Ca | Total Populat | Sample Size | Non-Risk Adjusted Rate | Confidence Ir Risk Adjusted |
| Overall Minnesota Clinic Average | | 19% | 19–20% | NA | 87% | 13% | | | 19% | 19–20% |
| Mayo Health System- Cannon Valley Clinic | Mayo Health System | 12% | 10%-14% | N /A | 79% | 21% | Total Population | 758 | 12% | 10%-14% |
| FULDA | | | | • | | | | | • • • | |
| Avera Worthington Specialty Clinics | Avera Health/Avera Tri-State | 15% | 10%-21% | N/A | 83% | 17% | Total Population | 163 | 15% | 10%-21% |
| GLENCOE | | | | 0 0 0 0 | | | • | | 0 0 0 0 | |
| Glencoe Regional Health Services | Glencoe Regional Health Services | 12% | 9%-17% | N/A | 75% | 25% | Total Population | 257 | 12% | 9%-17% |
| GRACEVILLE | | | | 0 | | | | | | |
| Graceville Health Center Clinic | Graceville Health Center Clinic | * | * | N/A | * | * | * | * | * | * |
| GRANITE FALLS | | | | 0 0 0 0 | | | • | | 0 0 0 0 | |
| Affilliated Community Medical Centers | Affiliated Community Medical Centers | 7% | 5%-9% | N/A | 78% | 22% | Total Population | 560 | 6% | 5%-9% |
| HARMONY | | | | * * * * * * * * * * * * * * * * * * * | | | • | | 0 0 0 0 | |
| Gundersen Lutheran | Gundersen Clinic | 36% | 22%-52% | N/A | 86% | 14% | Total Population | 35 | 37% | 23%-54% |
| HECTOR | | | | | | | | | | |
| Renville County Hospital and Clinics | Renville County Hospital and Clinics | 12% | 9%-17% | N/A | 75% | 25% | Total Population | 257 | 12% | 9%-17% |
| HENDRICKS | | | | * | | | | | | |
| Hendricks Clinic P.A. | Hendricks Clinic | 12% | 9%-17% | N/A | 75% | 25% | Total Population | 257 | 12% | 9%-17% |

^{*} Sufficient data not available.

| Quality of Ca | re for | | Avoid | dance of A | Intibiotics i | n the Trea | tment of Adu | It Bronch | itis | |
|--|---------------------------------------|--------------------|--|--|------------------------------------|-------------------------|----------------------------|-------------|------------------------|---|
| Acute Condit | ions | | | | cal Group Distri Patient Popula | | | | | |
| See page 89 for an explanation of | terms. | Rate | terval of Risk | | | e Programs | on or Sample | | sted Rate | Confidence Interval of Non- Risk Adjusted Rate |
| PHYSICIAN CLINIC NAME | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence In Risk Adjusted |
| Overall Minnesota Clinic Average | | 19% | 19–20% | NA NA | 87% | 13% | | | 19% | 19–20% |
| HOUSTON | | | | 9 0 0 0 0 | | | | | • | |
| Gunderson Lutheran | Gundersen Clinic | 36% | 22%-52% | N/A | 86% | 14% | Total Population | 35 | 37% | 23%-54% |
| HUTCHINSON | | | | ,, | | | | | | |
| Hutchinson Medical Center | Hutchinson Medical Center | 11% | 7%-17% | N/A | 79% | 21% | Total Population | 173 | 11% | 7%-17% |
| IVANHOE | i | | | | | | | | | |
| Ivanhoe Clinic | | * | * | N/A | * | * | * | * | * | * |
| JACKSON | | | | · · · · · · · · · · · · · · · · · · · | | | | | | |
| Sacred Heart Mercy Health Care Center | Sacred Heart Mercy Health Care Center | * | * | N/A | * | * | * | * | * | * |
| Sanford Clinic Jackson | Sanford Clinic | 25% | 19%-34% | N/A | 90% | 10% | Total Population | 127 | 26% | 19%-34% |
| KASSON | | | | 00 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | | | | | | |
| Mayo Clinic | Mayo Clinic | 11% | 5%-24% | N/A | 76% | 24% | Total Population | 41 | 12% | 5%-26% |
| LA CRESCENT | | | | P | | | : | | * | |
| Mayo Health System - Franciscan Skemp | Mayo Health System | 12% | 10%-14% | N/A | 79% | 21% | Total Population | 758 | 12% | 10%-14% |
| LAKE BENTON | | | | | | | | | | |
| Lake Benton Healthcare Center | Avera Health/Avera Tri-State | 15% | 10%-21% | N/A | 83% | 17% | Total Population | 163 | 15% | 10%-21% |
| | | | | ° | | | • | | * | |

^{*} Sufficient data not available.

| Quality of Ca | re for | | Avoi | dance of A | ntibiotics i | n the Trea | tment of Adu | It Bronch | itis | |
|--|--------------------------------------|--------------------|--|--|-----------------------------------|-------------------------|----------------------------|-------------|--|---|
| Acute Condit | | | | | cal Group Distr Patient Popula | | | | | |
| See page 89 for an explanation of | terms. | Rate | Confidence Interval of Risk Adjusted Rate | | | re Programs | Total Population or Sample | | isted Rate | Confidence Interval of Non- Risk Adjusted Rate |
| PHYSICIAN CLINIC NAME | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence Int Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Populati | Sample Size | Non-Risk Adjusted Rate | Confidence In Risk Adjusted |
| Overall Minnesota Clinic Average | | 19% | 19–20% | NA | 87% | 13% | | | 19% | 19–20% |
| LAKE CITY | | | | | | | | | • | |
| Mayo Health System-Lake City | Mayo Health System | 12% | 10%-14% | N/A | 79% | 21% | Total Population | 758 | 12% | 10%-14% |
| LAKE CRYSTAL | | | | | | | | | ·, · · · · · · · · · · · · · · · · · · | |
| Mankato Clinic | Mankato Clinic | 18% | 11%-30% | N/A | 87% | 13% | Total Population | 60 | 18% | 11%-30% |
| LAKEFIELD | | | | | | | | | 09 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | |
| Avera Worthington Specialty Clinics | Avera Health/Avera Tri-State | 15% | 10%-21% | N/A | 83% | 17% | Total Population | 163 | 15% | 10%-21% |
| Sanford Clinic Lakefield | Sanford Clinic | 25% | 19%-34% | N/A | 90% | 10% | Total Population | 127 | 26% | 19%-34% |
| LE SUEUR | | | | | | | | | · · · · · · · · · · · · · · · · · · · | |
| Mayo Health System- Immanuel St. Joseph | Mayo Health System | 12% | 10%-14% | N/A | 79% | 21% | Total Population | 758 | 12% | 10%-14% |
| Southern Metro Medical Clinics | Southern Metro Medical Clinics | 11% | 6%-19% | N/A | 97% | 3% | Total Population | 70 | 10% | 5%-19% |
| LEWISTON | | | | ** • • • • • • • • • • • • • • • • • • | | | | | s ⁵ | |
| Winona Health | Winona Health | 44% | 35%-53% | N/A | 87% | 13% | Total Population | 105 | 44% | 35%-53% |
| LITCHFIELD | | | | | | | | | · · · · · · · · · · · · · · · · · · · | |
| Affilliated Community Medical Centers- Litchfield Clinic (East) | Affiliated Community Medical Centers | 7% | 5%-9% | N/A | 78% | 22% | Total Population | 560 | 6% | 5%-9% |
| Affilliated Community Medical Centers- Litchfield Clinic (West) | Affiliated Community Medical Centers | 7% | 5%-9% | N/A | 78% | 22% | Total Population | 560 | 6% | 5%-9% |

^{*} Sufficient data not available.

| Quality of Ca | re for | | Avoid | dance of A | Intibiotics i | n the Trea | tment of Adu | It Bronch | itis | |
|---|--|---|--|--|------------------------------------|-------------------------|----------------------------|-------------|------------------------|---|
| Acute Condita | | | | Medi of | cal Group Distri Patient Popula | bution tion | | | | |
| See page 89 for an explanation of t | erms. | l Rate | Confidence Interval of Risk Adjusted Rate | | | MN Health Care Programs | Total Population or Sample | | usted Rate | Confidence Interval of Non- Risk Adjusted Rate |
| PHYSICIAN CLINIC NAME | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence Ir Adjusted Rate | Medicare | Commercial | MN Health Ca | Total Populat | Sample Size | Non-Risk Adjusted Rate | Confidence Ir Risk Adjusted |
| Overall Minnesota Clinic Average | | 19% | 19–20% | NA | 87% | 13% | | | 19% | 19–20% |
| LONSDALE | | | | * | | | | | | |
| FamilyHealth Medical Clinic | FamilyHealth Medical Clinics | 25% | 15%-39% | N/A | 89% | 11% | Total Population | 45 | 24% | 14%-39% |
| LUVERNE | | | | ·, · · · · · · · · · · · · · · · · · · | | | | | | |
| Sanford Clinic | Sanford Clinic | 25% | 19%-34% | N/A | 90% | 10% | Total Population | 127 | 26% | 19%-34% |
| MABEL | | • | | 17 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | | | | | | |
| Winneshiek Medical Center | Winneshiek Medical Center-Mabel Clinic | * | * | N/A | * | * | * | * | * | * |
| MADELIA | | • | | | | | | | | |
| Mayo Health System- Immanuel St. Joseph | Mayo Health System | 12% | 10%-14% | N/A | 79% | 21% | Total Population | 758 | 12% | 10%-14% |
| MADISON | | | | • • • • • • • • • • • • • • • • • • • | | | | | | |
| Lac Qui Parle Clinic | Lac Qui Parle Clinic | 12% | 9%-17% | N/A | 75% | 25% | Total Population | 257 | 12% | 9%-17% |
| MANKATO | | | | | | | | | | |
| Between the Bridges Health Center | | * | * | N/A | * | * | * | * | * | * |
| Mayo Health System-Immanuel St. Joseph- Mankato Eastridge | Mayo Health System | 12% | 10%-14% | N/A | 79% | 21% | Total Population | 758 | 12% | 10%-14% |
| Mayo Health System-Immanuel St. Joseph- Mankato Specialty Clinic | Mayo Health System | 12% | 10%-14% | N/A | 79% | 21% | Total Population | 758 | 12% | 10%-14% |
| Mankato Clinic- Main Street | Mankato Clinic | 18% | 11%-30% | N/A | 87% | 13% | Total Population | 60 | 18% | 11%-30% |
| Mankato Clinic- Wickersham Campus | Mankato Clinic | 18% | 11%-30% | N/A | 87% | 13% | Total Population | 60 | 18% | 11%-30% |

^{*} Sufficient data not available.

| Quality of Ca | re for | | Avoi | dance of A | ntibiotics i | n the Trea | tment of Adu | It Bronch | itis | |
|--|---|--------------------|--|--|-----------------------------------|-------------------------|----------------------------|-------------------------|------------------------|---|
| Acute Condit | | | | | cal Group Distr Patient Popula | | | | | |
| See page 89 for an explanation of | terms. | Rate | Confidence Interval of Risk Adjusted Rate | | | re Programs | Total Population or Sample | | isted Rate | Confidence Interval of Non- Risk Adjusted Rate |
| PHYSICIAN CLINIC NAME | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence Int Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Populati | Sample Size | Non-Risk Adjusted Rate | Confidence In Risk Adjusted |
| Overall Minnesota Clinic Average | | 19% | 19–20% | NA | 87% | 13% | | | 19% | 19–20% |
| Open Door Health Center | Open Door Health Center | * | * | N/A | * | * | * | * | * | * |
| MAPLETON | | | | · | | | | | • | |
| Mankato Clinic | Mankato Clinic | 18% | 11%-30% | N/A | 87% | 13% | Total Population | 60 | 18% | 11%-30% |
| MARSHALL | | | | ************************************** | | | | | | |
| Affiliated Community Medical Centers- Bruce Street | Affiliated Community Medical Centers | 7% | 5%-9% | N/A | 78% | 22% | Total Population | 560 | 6% | 5%-9% |
| Affilliated Community Medical Centers- Marshall Clinic- Market Street | Affiliated Community Medical Centers | 7% | 5%-9% | N/A | 78% | 22% | Total Population | 560 | 6% | 5%-9% |
| Avera Marshall Specialty Clinic | Avera Health/Avera Tri-State | N/A | N/A | N/A | N/A | N/A | N/A | N /A | N/A | N/A |
| MILAN | | | | ************************************** | | | | | | |
| Milan Clinic | Chippewa County Montevideo Hospital & Medical Clinic | 12% | 9%-17% | N/A | 75% | 25% | Total Population | 257 | 12% | 9%-17% |
| MONTEVIDEO | | | | • | | | | | | |
| Chippewa County Montevideo Hospital & Medical Clinic | Chippewa County Montevideo Hospital & Medical Clinic | 12% | 9%-17% | N/A | 75% | 25% | Total Population | 257 | 12% | 9%-17% |
| MONTGOMERY | | | | | | | | * * * * * * * * * * * * | | |
| Southern Metro Medical Clinics- Montgomery Medical Clinic | Southern Metro Medical Clinics | 11% | 6%-19% | N/A | 97% | 3% | Total Population | 70 | 10% | 5%-19% |
| MOUNTAIN LAKE | | | | | | | | | | |
| Sanford Clinic | Sanford Clinic | 25% | 19%-34% | N/A | 90% | 10% | Total Population | 127 | 26% | 19%-34% |

^{*} Sufficient data not available.

| Quality of Ca | re for | | Avoid | dance of A | Antibiotics i | n the Trea | tment of Adul | It Bronch | itis | |
|--|--------------------------------------|--------------------|--|--|------------------------------------|-------------------------|----------------------------|-------------|--|---|
| Acute Conditi | i | | | | cal Group Distri Patient Popula | | | | | |
| See page 89 for an explanation of to | erms. | Rate | erval of Risk | | | e Programs | on or Sample | | sted Rate | terval of Non- Rate |
| PHYSICIAN CLINIC NAME | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non- Risk Adjusted Rate |
| Overall Minnesota Clinic Average | | 19% | 19–20% | NA | 87% | 13% | | | 19% | 19–20% |
| NEW LONDON | | | | | | | | | | |
| Affilliated Community Medical Centers | Affiliated Community Medical Centers | 7% | 5%-9% | N/A | 78% | 22% | Total Population | 560 | 6% | 5%-9% |
| NEW PRAGUE | | | | 0 0 0 0 | | | | | • | |
| Parkview Medical Clinic | Parkview Medical Clinic | 13% | 7%-22% | N/A | 92% | 8% | Total Population | 78 | 13% | 7%-22% |
| NEW ULM | | | | 17 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | | | | | 00 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | |
| Allina Health System- New Ulm Medical Center | Allina Health System | 21% | 16%-28% | N/A | 71% | 29% | Total Population | 216 | 22% | 17%-28% |
| NORTH MANKATO | | | | | | | | | | |
| Mayo Health System-Immanuel St. Joseph - Mankato Northridge | Mayo Health System | 12% | 10%-14% | N/A | 79% | 21% | Total Population | 758 | 12% | 10%-14% |
| Mankato Clinic | Mankato Clinic | 18% | 11%-30% | N/A | 87% | 13% | Total Population | 60 | 18% | 11%-30% |
| NORTHFIELD | | | | | | | | | · | |
| Allina Medical Clinic | Allina Medical Clinic | 14% | 13%-15% | N/A | 89% | 11% | Total Population | 2739 | 14% | 13%-15% |
| OLIVIA | | | | | | | | | | |
| Renville County Hospital and Clinics | Renville County Hospital and Clinics | 12% | 9%-17% | N/A | 75% | 25% | Total Population | 257 | 12% | 9%-17% |
| ORTONVILLE | | | | | | | | | | |
| Northside Medical Clinic | Northside Medical Clinic | 12% | 9%-17% | N/A | 75% | 25% | Total Population | 257 | 12% | 9%-17% |
| | | | | | | | | | | |

^{*} Sufficient data not available.

| Quality of Ca | re for | | Avoi | dance of A | Antibiotics i | in the Trea | tment of Adu | It Bronch | itis | |
|--|--------------------------------------|--------------------|--|--|-----------------------------------|-------------------------|----------------------------|-------------|--|---|
| Acute Conditi | lons | | | | cal Group Distr Patient Popula | | | | | |
| See page 89 for an explanation of to | erms. | Rate | Confidence Interval of Risk Adjusted Rate | | | re Programs | on or Sample | | sted Rate | Confidence Interval of Non- Risk Adjusted Rate |
| PHYSICIAN CLINIC NAME | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence In Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence In Risk Adjusted |
| Overall Minnesota Clinic Average | | 19% | 19–20% | NA | 87% | 13% | | | 19% | 19–20% |
| OWATONNA | | | | | | | | | | |
| Mayo Health System-Owatonna Clinic | Mayo Health System | 12% | 10%-14% | N/A | 79% | 21% | Total Population | 758 | 12% | 10%-14% |
| PINE ISLAND | | | | | | | | | · | |
| Olmsted Medical Center | Olmsted Medical Center | 8% | 5%-15% | N/A | 70% | 30% | Total Population | 128 | 9% | 5%-16% |
| PIPESTONE | | | | | | | | | | |
| Avera- Pipestone County Medical Center | Avera Health/Avera Tri-State | 15% | 10%-21% | N/A | 83% | 17% | Total Population | 163 | 15% | 10%-21% |
| PLAINVIEW | | | | · · · · · · · · · · · · · · · · · · · | | | | | · · · · · · · · · · · · · · · · · · · | |
| Olmsted Medical Center | Olmsted Medical Center | 8% | 5%-15% | N/A | 70% | 30% | Total Population | 128 | 9% | 5%-16% |
| PRESTON | | | | | | | | | * | |
| Olmsted Medical Center | Olmsted Medical Center | 8% | 5%-15% | N/A | 70% | 30% | Total Population | 128 | 9% | 5%-16% |
| RED WING | | | | 1 a ⁰ · · · · · · · · · · · · · · · · · · · | | | | | o* | |
| Fairview Red Wing Medical Center | Fairview Health Services | 20% | 18%-22% | N/A | 88% | 12% | Total Population | 1867 | 20% | 18%-22% |
| REDWOOD FALLS | | | | , | | | | | | |
| Affilliated Community Medical Centers | Affiliated Community Medical Centers | 7% | 5%-9% | N/A | 78% | 22% | Total Population | 560 | 6% | 5%-9% |
| RENVILLE | | | | | | | | | ************************************** | |
| Renville County Hospital and Clinics | Renville County Hospital and Clinics | 12% | 9%-17% | N/A | 75% | 25% | Total Population | 257 | 12% | 9%-17% |

^{*} Sufficient data not available.

| re for | | AVUI | uance of F | intibiotics i | n the Irea | tment of Adu | it Bronch | ITIS | |
|---------------------------|---|--|-----------------------------------|--|--|---|--|---|---|
| ions | | | | | | | | | |
| terms. | Rate | iterval of Risk | | | re Programs | on or Sample | | isted Rate | Confidence Interval of Non- Risk Adjusted Rate |
| MEDICAL GROUP NAME | Risk Adjusted | Confidence In Adjusted Rate | Medicare | Commercial | MN Health Ca | Total Populati | Sample Size | Non-Risk Adju | Confidence In Risk Adjusted |
| | 19% | 19–20% | NA | 87% | 13% | | | 19% | 19–20% |
| | | | • | | | | | • | |
| Mayo Clinic | 11% | 5%-24% | N/A | 76% | 24% | Total Population | 41 | 12% | 5%-26% |
| Mayo Clinic | 11% | 5%-24% | N/A | 76% | 24% | Total Population | 41 | 12% | 5%-26% |
| Mayo Clinic | 11% | 5%-24% | N/A | 76% | 24% | Total Population | 41 | 12% | 5%-26% |
| Mayo Clinic | 11% | 5%-24% | N/A | 76% | 24% | Total Population | 41 | 12% | 5%-26% |
| Mayo Clinic | 11% | 5%-24% | N/A | 76% | 24% | Total Population | 41 | 12% | 5%-26% |
| Olmsted Medical Center | 8% | 5%-15% | N/A | 70% | 30% | Total Population | 128 | 9% | 5%-16% |
| Olmsted Medical Center | 8% | 5%-15% | N/A | 70% | 30% | Total Population | 128 | 9% | 5%-16% |
| | * | * | N/A | * | * | * | * | * | * |
| | | | | | | • | | | |
| Winona Health | 44% | 35%-53% | N/A | 87% | 13% | Total Population | 105 | 44% | 35%-53% |
| | | | | | | | | | |
| Murray County Clinic | 12% | 9%-17% | N/A | 75% | 25% | Total Population | 257 | 12% | 9%-17% |
| | | | | | | | | | |
| Sleepy Eye Medical Center | 12% | 9%-17% | N/A | 75% | 25% | Total Population | 257 | 12% | 9%-17% |
| | MEDICAL GROUP NAME Mayo Clinic Mayo Clinic Mayo Clinic Mayo Clinic Olmsted Medical Center Olmsted Medical Center Winona Health Murray County Clinic | MEDICAL GROUP NAME 19% Mayo Clinic 11% 11% Mayo Clinic 11% 11% 11% 11% 11% 11% 11% 11 | MEDICAL GROUP NAME 19% 19-20% | MEDICAL GROUP NAME 19% 19-20% NA | MEDICAL GROUP NAME 19% 19-20% NA 87% | terms. MEDICAL GROUP NAME 19% 19-20% NA 87% 13% Mayo Clinic 11% 5%-24% NA 76% 24% Mayo Clinic 11% 11% 5%-24% NA 76% 24% Mayo Clinic 11% 11% 11% 11% 11% 11% 11% 1 | New Clinic 11% 5%-24% N/A 76% 24% Total Population New Clinic 11% 5%-24% N/A 76% 24% Total Population New Clinic 11% 5%-24% N/A 76% 24% Total Population New Clinic 11% 5%-24% N/A 76% 24% Total Population New Clinic 11% 5%-24% N/A 76% 24% Total Population New Clinic 11% 5%-24% N/A 76% 24% Total Population New Clinic 11% 5%-24% N/A 76% 24% Total Population New Clinic 11% 5%-24% N/A 76% 24% Total Population New Clinic 11% 5%-24% N/A 76% 24% Total Population New Clinic 11% 5%-24% N/A 76% 24% Total Population New Clinic 11% 5%-24% N/A 76% 24% Total Population New Clinic 11% 5%-24% N/A 76% 24% Total Population New Clinic 11% 5%-24% N/A 76% 24% Total Population New Clinic 11% 5%-24% N/A 76% 24% Total Population New Clinic 11% 5%-24% N/A 76% 24% Total Population N/A 76% 24% Total Populatio | Herms. Page Page | Herms. Page Clinic 11% 5%-24% N/A 75% 24% Total Population 41 12% |

^{*} Sufficient data not available.

| Quality of Ca | re for | | Avoi | dance of A | Antibiotics i | n the Trea | tment of Adu | It Bronch | itis | |
|--|--------------------------------|--------------------|--|--|-----------------------------------|-------------------------|----------------------------|-------------|---|---|
| Acute Condit | | | | | cal Group Distr Patient Popula | | | | | |
| See page 89 for an explanation of | terms. | Rate | terval of Risk | | | e Programs | on or Sample | | sted Rate | Confidence Interval of Non- Risk Adjusted Rate |
| PHYSICIAN CLINIC NAME | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence In Risk Adjusted |
| Overall Minnesota Clinic Average | | 19% | 19–20% | NA NA | 87% | 13% | | | 19% | 19–20% |
| SPICER | | | | 0 0 0 | | | | | * * * * * * * * * * * * * * * * * * * | |
| Paynesville Green Lake Medical Clinic | Paynesville Area Health System | * | * | N/A | * | * | * | * | * | * |
| SPRING GROVE | | | | ., | | | | | ,, | |
| Gundersen Lutheran | Gundersen Clinic | 36% | 22%-52% | N/A | 86% | 14% | Total Population | 35 | 37% | 23%-54% |
| SPRING VALLEY | | | | | | | | | | |
| Olmsted Medical Center | Olmsted Medical Center | 8% | 5%-15% | N/A | 70% | 30% | Total Population | 128 | 9% | 5%-16% |
| SPRINGFIELD | | | | | | | | | | |
| Mayo Health System-Immanuel St. Joseph | Mayo Health System | 12% | 10%-14% | N/A | 79% | 21% | Total Population | 758 | 12% | 10%-14% |
| ST. CHARLES | | | | o* o o o o o o o o o o o o o o o o o o | | | | | o ^o oo o o o o o o o o o o o o o o o o o | |
| Olmsted Medical Center | Olmsted Medical Center | 8% | 5%-15% | N/A | 70% | 30% | Total Population | 128 | 9% | 5%-16% |
| ST. JAMES | | | | ** · · · · · · · · · · · · · · · · · · | | | | | s ⁵ | |
| Mayo Health System-Immanuel St. Joseph | Mayo Health System | 12% | 10%-14% | N/A | 79% | 21% | Total Population | 758 | 12% | 10%-14% |
| Moulton & Parsons MDs | | * | * | N/A | * | * | * | * | * | * |
| ST. PETER | | | | | | | | | or | |
| Mayo Health System-Immanuel St. Joseph | Mayo Health System | 12% | 10%-14% | N/A | 79% | 21% | Total Population | 758 | 12% | 10%-14% |
| Mankato Clinic- Daniel's Health Center | Mankato Clinic | 18% | 11%-30% | N/A | 87% | 13% | Total Population | 60 | 18% | 11%-30% |

^{*} Sufficient data not available.

| Quality of Ca | re for | | Avoid | dance of A | Antibiotics i | n the Treat | tment of Adul | t Bronch | itis | |
|---|--------------------------------|--------------------|--|---|-----------------------------------|-------------------------|----------------------------|-------------|------------------------|---|
| Acute Condita | ions | | | | cal Group Distr Patient Popula | | | | | |
| See page 89 for an explanation of t | erms. | Rate | terval of Risk | | | e Programs | on or Sample | | sted Rate | terval of Non- Rate |
| PHYSICIAN CLINIC NAME | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non- Risk Adjusted Rate |
| Overall Minnesota Clinic Average | | 19% | 19–20% | NA | 87% | 13% | | | 19% | 19–20% |
| River's Edge Clinic | River's Edge Hospital & Clinic | * | * | N/A | * | * | * | * | * | * |
| STEWARTVILLE | | | | , | | | | | | |
| Olmsted Medical Center | Olmsted Medical Center | 8% | 5%-15% | N/A | 70% | 30% | Total Population | 128 | 9% | 5%-16% |
| TRACY | | | | , | | | | | : | |
| Sanford Clinic Tracy/ Balaton/Walnut Grove | Sanford Clinic | 25% | 19%-34% | N/A | 90% | 10% | Total Population | 127 | 26% | 19%-34% |
| TYLER | | | | | | | | | | |
| Tyler Medical Clinic | Avera Health/Avera Tri-State | 15% | 10%-21% | N/A | 83% | 17% | Total Population | 163 | 15% | 10%-21% |
| WABASHA | | | | | | | | | | |
| Mayo Health System-Wabasha Clinic | Mayo Health System | 12% | 10%-14% | N/A | 79% | 21% | Total Population | 758 | 12% | 10%-14% |
| WANAMINGO | | | | 9 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | | | | | | |
| Olmsted Medical Center | Olmsted Medical Center | 8% | 5%-15% | N/A | 70% | 30% | Total Population | 128 | 9% | 5%-16% |
| WASECA | | | | * | | | | | * | |
| Mayo Health System-Immanuel St. Joseph | Mayo Health System | 12% | 10%-14% | N/A | 79% | 21% | Total Population | 758 | 12% | 10%-14% |
| WATKINS | | | | * | | | | | | |
| Paynesville Watkins Medical Clinic | Paynesville Area Health System | * | * | N/A | * | * | * | * | * | * |
| | | | | * | | | | | | |

^{*} Sufficient data not available.

| Quality of Ca | re for | | Avoi | dance of A | ntibiotics i | n the Trea | tment of Adu | It Bronch | itis | |
|---|---|--------------------|--|--|-----------------------------------|-------------------------|----------------------------|-------------|--|---|
| Acute Condit | | | | | cal Group Distr Patient Popula | | | | | |
| See page 89 for an explanation of | terms. | Rate | Confidence Interval of Risk Adjusted Rate | | | re Programs | Total Population or Sample | | isted Rate | Confidence Interval of Non- Risk Adjusted Rate |
| PHYSICIAN CLINIC NAME | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence Int Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Populati | Sample Size | Non-Risk Adjusted Rate | Confidence Ir Risk Adjusted |
| Overall Minnesota Clinic Average | | 19% | 19–20% | NA | 87% | 13% | | | 19% | 19–20% |
| WESTBROOK | | | | • | | | | | • | |
| Sanford Clinic Westbrook | Sanford Clinic | 25% | 19%-34% | N/A | 90% | 10% | Total Population | 127 | 26% | 19%-34% |
| WILLMAR | | | • | *, * * * * * * * * * * * * * * * * * * | | | | | ************************************** | |
| Affilliated Community Medical Centers | Affiliated Community Medical Centers | 7% | 5%-9% | N/A | 78% | 22% | Total Population | 560 | 6% | 5%-9% |
| Family Practice Medical Center of Willman | Family Practice Medical Center of Willmar | 11% | 5%-23% | N/A | 69% | 31% | Total Population | 55 | 9% | 4%-20% |
| WINDOM | | | | | | | | | 0, 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | |
| Avera- United Medical Clinic | Avera Health/Avera Tri-State | 15% | 10%-21% | N/A | 83% | 17% | Total Population | 163 | 15% | 10%-21% |
| Hartberg Medical Clinic | Hartberg Medical Clinic | * | * | N/A | * | * | * | * | * * | * |
| Sanford Clinic Windom | Sanford Clinic | 25% | 19%-34% | N/A | 90% | 10% | Total Population | 127 | 26% | 19%-34% |
| Windom Family Medical Center | | * | * | N/A | * | * | * | * | * * | * |
| WINONA | | | | | | | | | s ⁵ | |
| Family Medicine of Winona | Family Medicine of Winona | * | * | N/A | * | * | * | * | * * | * |
| Winona Health- Winona Health Clinic | Winona Health | 44% | 35%-53% | N/A | 87% | 13% | Total Population | 105 | 44% | 35%-53% |
| WINSTED | | | | | | | | | o ^o o o o o o o o o o o o o o o o o o o | |
| Ridgeview Winsted Clinic | Ridgeview Clinics | 14% | 10%-19% | . N/A | 97% | 3% | Total Population | 205 | 14% | 10%-20% |

^{*} Sufficient data not available.

| Quality of Ca | ire for | | Avoi | dance of A | Antibiotics i | n the Trea | tment of Adu | It Bronch | itis | |
|------------------------------------|------------------------------|--------------------|--|------------|------------------------------------|-------------------------|----------------------------|-------------|------------------------|---|
| Acute Condit | ions | | | Medi of | cal Group Distri Patient Popula | ibution tion | | | | |
| See page 89 for an explanation of | terms. | Rate | Confidence Interval of Risk Adjusted Rate | | | MN Health Care Programs | Total Population or Sample | | ısted Rate | Confidence Interval of Non- Risk Adjusted Rate |
| PHYSICIAN CLINIC NAME | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence Ir Adjusted Rate | Medicare | Commercial | MN Health Ca | Total Populati | Sample Size | Non-Risk Adjusted Rate | Confidence Ir Risk Adjusted |
| Overall Minnesota Clinic Average | | 19% | 19–20% | NA | 87% | 13% | | | 19% | 19–20% |
| WORTHINGTON | | | | | | | | | | |
| Avera Worthington Specialty Clinic | Avera Health/Avera Tri-State | 15% | 10%-21% | N/A | 83% | 17% | Total Population | 163 | 15% | 10%-21% |
| Sanford Clinic | Sanford Clinic | 25% | 19%-34% | N/A | 90% | 10% | Total Population | 127 | 26% | 19%-34% |
| ZUMBROTA | | | | | | | | | | |
| Fairview Red Wing Zumbrota Clinic | Fairview Health Services | 20% | 18%-22% | N/A | 88% | 12% | Total Population | 1867 | 20% | 18%-22% |
| | | | | | | | | | | |
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^{*} Sufficient data not available.

| | | | | | | Screen | 8 | | | | | CCIVI | cai Ca | TIICEI | Screening | | |
|--------------------------------------|---|--|-------------|---------------------------------------|--|--------------------|--|--|--|--|--|--|--|---|--|---|---|
| ıre | | | Dis | dical Gr tribution nt Popu | n of | | | | | | | Dis | | ı of | | | |
| erms. | Rate | erval of Risk | | | e Programs | on or Sample | | sted Rate | terval of sted Rate | Rate | erval of Risk | | | e Programs | on or Sample | sted Rate | terval of sted Rate |
| MEDICAL GROUP NAME | Risk Adjusted | Confidence Int Adjusted Rate | Medicare | Commercial | MN Health Car | Total Populatic | Sample Size | Non-Risk Adjus | Confidence Int Non-Risk Adjus | Risk Adjusted | Confidence Int Adjusted Rate | Medicare | Commercial | MN Health Car | Total Population | Non-Risk Adju | Confidence Interval of Non-Risk Adjusted Rate |
| | 83% | 82–83% | 9% | 86% | 5% | | | 83% | 82–83% | 80% | 80-81% | NA | 84% | 169 | 6 | 80% | 80–81% |
| | | | | | | • | | | | | | | | | • | | |
| Sanford Clinic | 83% | 80%-85% | 1% | 97% | 2% | Total Populatio | n 1730 | 84% | 82%-86% | 83% | 81%-84% | N/A | 97% | 3% | Total Population 3290 | 84% | 83%-85% |
| | | | | | | | | | | | | | | | | | |
| Mayo Health System | 81% | 80%-83% | 2% | 89% | 9% | Total Populatio | n 3918 | 81% | 79%-82% | 72% | 71%-74% | N/A | 73% | 27% | Total Population 4987 | 72% | 71%-73% |
| | | | | | | | | | | | | | | | | | |
| Appleton Area Health Services | 79% | 77%-81% | 3% | 86% | 11% | Total Populatio | n 1578 | 79% | 77%-81% | 76% | 74%-78% | N/A | 78% | 22% | Total Population 1975 | 75% | 73%-77% |
| | | | | | | • | | | | | | • | | | • | | |
| Sibley Medical Center | 74% | 64%-82% | 0% | 96% | 4% | Total Populatio | n 74 | 73% | 62%-82% | 66% | 56%-74% | N/A | 90% | 10% | Total Population 105 | 68% | 58%-76% |
| | | | | | | | | | | | | | | | | | |
| Mayo Health System | 81% | 80%-83% | 2% | 89% | 9% | Total Populatio | n 3918 | 81% | 79%-82% | 72% | 71%-74% | N/A | 73% | 27% | Total Population 4987 | 72% | 71%-73% |
| Smart Clinic | * | * | * | * | * | * | * | * | * | * | * | N/A | * | * | * * | * | * |
| | | | | | | • | | | | | | | | | • * • • • • • • • • • • • • • • • • • • | | |
| Affiliated Community Medical Centers | 84% | 82%-86% | 3% | 90% | 7% | Total Populatio | n 1786 | 84% | 82%-85% | 80% | 78%-81% | N/A | 85% | 15% | Total Population 1860 | 80% | 78%-81% |
| | | | | | | | | | | | | | | | | | |
| United Hospital District Clinic | * | * | * : * | * | * | * * | * | * | * | * | * | N/A | * | * | * * | * | * |
| | erms. MEDICAL GROUP NAME Sanford Clinic Mayo Health System Appleton Area Health Services Sibley Medical Center Mayo Health System Smart Clinic | MEDICAL GROUP NAME 83% Sanford Clinic 83% Mayo Health System 81% Appleton Area Health Services 79% Sibley Medical Center 74% Mayo Health System 81% Smart Clinic * Affiliated Community Medical Centers 84% | ### Page 19 | ### Patie Patie MEDICAL GROUP NAME | ### Patient Population Patient Pati | MEDICAL GROUP NAME | Patient Population Patient | ### Patient Population Patie | ### Patient Population Patient Population Pati | Patient Population Patient Population Patient Population Patient Population Patient Population Rems. MEDICAL GROUP NAME 83% 82-83% 9% 86% 5% 5% 5% 82-83% 82-83% 82-83% Sanford Clinic 83% 80%-85% 1% 97% 2% Total Population 1730 84% 82%-86% Mayo Health System 81% 80%-85% 2% 88% 9% Total Population 13918 81% 79%-82% Sibley Medical Center 74% 64%-82% 0% 96% 4% Total Population 1578 79% 77%-81% Sibley Medical Center 81% 80%-83% 2% 89% 9% Total Population 1578 79% 77%-81% Sibley Medical Center 74% 64%-82% 0% 96% 4% Total Population 3918 81% 79%-82% Mayo Health System 81% 80%-83% 2% 89% 9% Total Population 1578 79% 77%-81% Sibley Medical Center 74% 64%-82% 0% 96% 4% Total Population 3918 81% 79%-82% Affiliated Community Medical Centers 84% 82%-86% 3% 90% 7% Total Population 1786 84% 82%-85% | ### Patient Population Patient Population Pati | ### Patient Population Patie | Patient Population Patien | Patient Population Patient Population Patient | ### Patient Population Patie | Patient Population Patient Population Patient | Patient Population Patient Population Patient |

^{*} Sufficient data not available.

| Quality of | | | | Brea | ast Ca | ncer | Screenir | ng | | | | | Cervi | ical Ca | ancer | Screen | ing | | |
|---|---|--------------------|--|---------------------------------------|------------------------------------|-------------------------|--|-------------|------------------------|--|--------------------|--|----------|------------------------------------|-------------------------|----------------------------|---|------------------------|--|
| Preventive Ca | are | | | Dist | dical Gro tribution nt Popul | 1 of | | | | | | | Dis | dical Gro tribution nt Popul | ı of | | 0 | | |
| See page 89 for an explanation of to | erms. | Rate | terval of Risk | | | e Programs | on or Sample | | sted Rate | terval of sted Rate | Rate | terval of Risk | | | e Programs | on or Sample | 0 0 0 0 0 0 0 0 | sted Rate | terval of sted Rate |
| PHYSICIAN CLINIC NAME | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non-Risk Adjusted Rate | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non-Risk Adjusted Rate |
| Overall Minnesota Clinic Average | | 83% | 82–83% | 9% | 86% | 5% | | | 83% | 82–83% | 80% | 80–81% | . NA | 84% | 16% | 6 | | 80% | 80–81% |
| BYRON | | | | 9 | | | | | | | | | | | | | | | |
| Olmsted Medical Center | Olmsted Medical Center | 87% | 84%-89% | 6% | 84% | 11% | Total Population | 940 | 86% | 83%-88% | 78% | 76%-80% | N/A | 77% | 23% | Total Population | n 1442 | 77% | 75%-80% |
| CALEDONIA | | | | , , | | | | | | | | | | | | | | | |
| Mayo Health System-Franciscan Skem | p Mayo Health System | 81% | 80%-83% | 2% | 89% | 9% | Total Population | 3918 | 81% | 79%-82% | 72% | 71%-74% | N/A | 73% | 27% | Total Population | n 4987 | 72% | 71%-73% |
| CANBY | | | | · · · · · · · · · · · · · · · · · · · | | | | | | | | | | | | | | | |
| Sanford Clinic Canby | Sanford Clinic | 83% | 80%-85% | 1% | 97% | 2% | Total Population | 1730 | 84% | 82%-86% | 83% | 81%-84% | N/A | 97% | 3% | Total Population | n 3290 | 84% | 83%-85% |
| CANNON FALLS | | | | | | | | | | | | | | | | | | | |
| Mayo Health System- Cannon Falls Medical Center | Mayo Health System | 81% | 80%-83% | 2% | 89% | 9% | Total Population | 3918 | 81% | 79%-82% | 72% | 71%-74% | N/A | 73% | 27% | Total Population | n 4987 | 72% | 71%-73% |
| CHATFIELD | | | | | | | | | | | | | | | | | | | |
| Olmsted Medical Center | Olmsted Medical Center | 87% | 84%-89% | 6% | 84% | 11% | Total Population | 940 | 86% | 83%-88% | 78% | 76%-80% | N/A | 77% | 23% | Total Population | n 1442 | 77% | 75%-80% |
| CLARA CITY | | | | · · · · · · · · · · · · · · · · · · · | | | ** • • • • • • • • • • • • • • • • • • | | | | | • • • • • • • • • • | | | | | • | | |
| Clara City Clinic | Chippewa County Montevideo Hospital & Medical Clinic | 79% | 77%-81% | 3% | 86% | 11% | Total Population | 1578 | 79% | 77%-81% | 76% | 74%-78% | N/A | 78% | 22% | Total Population | n 1975 | 75% | 73%-77% |
| CLARKFIELD | | | | 9 9 9 9 9 9 | | | ······································ | | | | | | | | | | | | |
| Clarkfield Clinic | Chippewa County Montevideo Hospital & Medical Clinic | 79% | 77%-81% | 3% | 86% | 11% | Total Population | 1578 | 79% | 77%-81% | 76% | 74%-78% | N/A | 78% | 22% | Total Population | n 1975 | 75% | 73%-77% |
| DASSEL | | | | | | | | | | | | | | | | | | | |
| Hutchinson Area Health Care- Dassel Medical Center | Hutchinson Area Health Care | * | * | * | * | * | * | * | * | * | * | * | N/A | * | * | * | * | * | * |

^{*} Sufficient data not available.

| Quality of | | | | Bre | ast Ca | ncer | Screen | ing | | | | | Cervi | cal Ca | ancer | Screer | ing | | |
|--|--------------------------------|--------------------|--|----------|------------------------------------|-------------------------|---|-------------|------------------------|--|--------------------|--|---------------------------------------|------------------------------------|-------------------------|----------------------------|-------------|------------------------|--|
| Preventive Ca | are | | | Dis | dical Gro tribution nt Popul | of | | 0 | | | | | Dist | lical Gre tribution nt Popul | ı of | | | | |
| See page 89 for an explanation of t | terms. | Rate | terval of Risk | | | e Programs | on or Sample | 0 | sted Rate | terval of sted Rate | Rate | terval of Risk | | | e Programs | on or Sample | | sted Rate | terval of sted Rate |
| PHYSICIAN CLINIC NAME | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non-Risk Adjusted Rate | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non-Risk Adjusted Rate |
| Overall Minnesota Clinic Average | | 83% | 82-83% | 9% | 86% | 5% | 0 | | 83% | 82-83% | 80% | 80–81% | NA NA | 84% | 16% | 6 | | 80% | 80–81% |
| Meeker Memorial Clinic | Meeker Memorial Clinic | * | * | * | * | * | * | * | * | * | * | * | N/A | * | * | * | * | * | * |
| DAWSON | | | | | | | · · · · · · · · · · · · · · · · · · · | | | | | | | | | | | | |
| Dawson Clinic | Dawson Clinic | 79% | 77%-81% | 3% | 86% | 11% | Total Populatio | n 1578 | 79% | 77%-81% | 76% | 74%-78% | N/A | 78% | 22% | Total Populati | on 1975 | 75% | 73%-77% |
| EDEN VALLEY | | | | | | | | | | | | | | | | | | | |
| Paynesville Eden Valley Medical Clinic | Paynesville Area Health System | 81% | 76%-85% | 8% | 84% | 8% | Total Populatio | n 285 | 81% | 76%-85% | 76% | 71%-80% | N/A | 82% | 18% | Total Populati | on 365 | 76% | 71%-80% |
| EDGERTON | | | | , | | | , | | | | | | · · · · · · · · · · · · · · · · · · · | | | | | | |
| Edgerton Family Clinic Avera | Avera Health/Avera Tri-State | 81% | 78%-85% | 1% | 92% | 8% | Total Populatio | n 775 | 81% | 78%-84% | 79% | 76%-81% | N/A | 90% | 10% | Total Populati | on 957 | 80% | 77%-82% |
| FAIRFAX | | | | | | | · · · · · · · · · · · · · · · · · · · | | | | | | | | | | | | |
| Fairfax Medical Clinic | | * | * | * | * | * | * * | * | * | * | * | * | N/A | * | * | * * | * | * | * |
| FAIRMONT | | | | | | | · · · · · · · · · · · · · · · · · · · | | | | | | | | | | | | |
| Braaten Medical Clinic | | * | * | * | * | * | *************************************** | * | * | * | * | * | N/A | * | * | * * | * | * | * |
| Dulcimer Medical Center | Dulcimer Medical Center | * | * | * | * | * | *************************************** | * | * | * | * | * | N/A | * | * | * * | * | * | * |
| Mayo Health System- Fairmont Medical Center | Mayo Health System | 81% | 80%-83% | 2% | 89% | 9% | Total Populatio | n 3918 | 81% | 79%-82% | 72% | 71%-74% | N/A | 73% | 27% | Total Populati | on 4987 | 72% | 71%-73% |
| Smart Clinic | Smart Clinic | * | * | * | * | * | * | * | * | * | * | * | N/A | * | * | * | * | * | * |
| FARIBAULT | | | | | | | | | | | | | | | | | | | |
| Allina Medical Clinic | Allina Medical Clinic | 81% | 81%-82% | 10% | 86% | 4% | Total Populatio | n 13556 | 82% | 81%-82% | 80% | 80%-81% | N/A | 88% | 12% | Total Populati | on 21168 | 81% | 80%-81% |

^{*} Sufficient data not available.

| Quality of | | | | Brea | ast Ca | ncer | Screeni | ng | | | | | Cervi | cal Ca | ncer | Screeni | ng | | |
|---|--------------------------------------|--------------------|--|----------|-----------------------------------|-------------------------|----------------------------|---|------------------------|--|--------------------|--|----------|-----------------------------------|-------------------------|----------------------------|-------------|------------------------|--|
| Preventive Ca | are | | | Dist | lical Gro ribution nt Popul | n of | | | | | | | Dist | lical Gro ribution nt Popul | of | | | | |
| See page 89 for an explanation of t | terms. | d Rate | Confidence Interval of Risk Adjusted Rate | | | MN Health Care Programs | Total Population or Sample | 000000000000000000000000000000000000000 | usted Rate | nterval of usted Rate | d Rate | Confidence Interval of Risk Adjusted Rate | | | MN Health Care Programs | Total Population or Sample | | usted Rate | nterval of usted Rate |
| PHYSICIAN CLINIC NAME | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence I Adjusted Rat | Medicare | Commercial | MN Health Ca | Total Popula | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non-Risk Adjusted Rate | Risk Adjusted Rate | Confidence I Adjusted Rat | Medicare | Commercial | MN Health Ca | Total Popula | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non-Risk Adjusted Rate |
| Overall Minnesota Clinic Average | | 83% | 82-83% | 9% | 86% | 5% | | | 83% | 82-83% | 80% | 80-81% | NA NA | 84% | 16% | | | 80% | 80–81% |
| Mayo Health System- Cannon Valley Clinic | Mayo Health System | 81% | 80%-83% | 2% | 89% | 9% | Total Populatio | n 3918 | 81% | 79%-82% | 72% | 71%-74% | N/A | 73% | 27% | Total Population | 4987 | 72% | 71%-73% |
| FULDA | | | | | | | | | | | | | | | | | | | |
| Avera Worthington Specialty Clinics | Avera Health/Avera Tri-State | 81% | 78%-85% | 1% | 92% | 8% | Total Populatio | n 775 | 81% | 78%-84% | 79% | 76%-81% | N/A | 90% | 10% | Total Population | 957 | 80% | 77%-82% |
| GLENCOE | | | | | | | | | | | | | | | | | | | |
| Glencoe Regional Health Services | Glencoe Regional Health Services | 79% | 77%-81% | 3% | 86% | 11% | Total Populatio | n 1578 | 79% | 77%-81% | 76% | 74%-78% | N/A | 78% | 22% | Total Population | 1975 | 75% | 73%-77% |
| GRACEVILLE | | | | | | | | | | | | | | | | | | | |
| Graceville Health Center Clinic | Graceville Health Center Clinic | 75% | 59%-87% | 3% | 69% | 29% | Total Populatio | n 35 | 74% | 58%-86% | 81% | 68%-90% | N/A | 77% | 23% | Total Population | 48 | 81% | 68%-90% |
| GRANITE FALLS | | | | | | | • | | | | | | | | | | | | |
| Affilliated Community Medical Centers | Affiliated Community Medical Centers | 84% | 82%-86% | 3% | 90% | 7% | Total Populatio | n 1786 | 84% | 82%-85% | 80% | 78%-81% | N/A | 85% | 15% | Total Population | 1860 | 80% | 78%-81% |
| HARMONY | | | | | | | | | | | | | | | | | | | |
| Gundersen Lutheran | Gundersen Clinic | 89% | 86%-91% | 0% | 94% | 5% | Total Populatio | n 512 | 89% | 86%-91% | 75% | 71%-79% | N/A | 94% | 6% | Total Population | 510 | 76% | 72%-80% |
| HECTOR | | | | | | | | | | | | | | | | | | | |
| Renville County Hospital and Clinics | Renville County Hospital and Clinics | 79% | 77%-81% | 3% | 86% | 11% | Total Populatio | n 1578 | 79% | 77%-81% | 76% | 74%-78% | N/A | 78% | 22% | Total Population | 1975 | 75% | 73%-77% |
| HENDRICKS | | | | | | | | | | | | | | | | | | | |
| Hendricks Clinic P.A. | Hendricks Clinic | 79% | 77%-81% | 3% | 86% | 11% | Total Populatio | n 1578 | 70% | 77%-81% | 76% | 74%-78% | N/A | 78% | 220/ | Total Population | 1075 | 75% | 73%-77% |

^{*} Sufficient data not available.

| Quality of | | | | Brea | ast Ca | ncer | Screen | ing | | | | | Cervi | cal Ca | ncer | Screen | ing | | |
|--|---------------------------------------|--------------------|--|---------------------------------------|------------------------------------|-------------------------|---------------------------------------|-------------|------------------------|--|--------------------|--|----------|-----------------------------------|-------------------------|----------------------------|---|------------------------|--|
| Preventive Ca | are | | | Dist | lical Gro tribution nt Popul | ı of | | | | | | | Dist | lical Gro ribution nt Popul | of | | 0 | | |
| See page 89 for an explanation of t | erms. | Rate | erval of Risk | | | e Programs | n or Sample | | sted Rate | erval of sted Rate | Rate | erval of Risk | | | e Programs | n or Sample | 0 | sted Rate | erval of sted Rate |
| PHYSICIAN CLINIC NAME | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non-Risk Adjusted Rate | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non-Risk Adjusted Rate |
| Overall Minnesota Clinic Average | | 83% | 82–83% | 9% | 86% | 5% | | | 83% | 82-83% | 80% | 80-81% | NA | 84% | 16% | 6 | | 80% | 80–81% |
| HOUSTON | | | | 9 | | | 0 | | | | | | | | | | | | |
| Gunderson Lutheran | Gundersen Clinic | 89% | 86%-91% | 0% | 94% | 5% | Total Populatio | n 512 | 89% | 86%-91% | 75% | 71%-79% | N/A | 94% | 6% | Total Population | n 510 | 76% | 72%-80% |
| HUTCHINSON | | | | | | | | | | | | | | | | | | | |
| Hutchinson Medical Center | Hutchinson Medical Center | 73% | 69%-76% | 4% | 91% | 5% | Total Populatio | n 693 | 73% | 69%-76% | 71% | 67%-74% | N/A | 89% | 11% | Total Population | n 884 | 71% | 68%-73% |
| IVANHOE | | | | - 0 0 0 0 0 0 0 0 0 0 | | | | | | | | | | | | | | | |
| Ivanhoe Clinic | | * | * | * | * | * | * | * | * | * | * | * | N/A | * | * | * | * | * | * |
| JACKSON | | | | · · · · · · · · · · · · · · · · · · · | | | | | | | | | | | | | | | |
| Sacred Heart Mercy Health Care Center | Sacred Heart Mercy Health Care Center | * | * | * | * | * | * * | * | * | * | * | * | N/A | * | * | * | * | * | * |
| Sanford Clinic Jackson | Sanford Clinic | 83% | 80%-85% | 1% | 97% | 2% | Total Populatio | n 1730 | 84% | 82%-86% | 83% | 81%-84% | N/A | 97% | 3% | Total Population | n 3290 | 84% | 83%-85% |
| KASSON | | | | 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | | | 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | | | | | | | | | | | | |
| Mayo Clinic | Mayo Clinic | 89% | 86%-90% | 3% | 85% | 11% | Total Populatio | n 1172 | 88% | 86%-90% | 74% | 71%-76% | N/A | 78% | 22% | Total Population | n 1289 | 73% | 71%-76% |
| LA CRESCENT | | | | % | | | * | | | | | | * | | | | | | |
| Mayo Health System - Franciscan Skemp | Mayo Health System | 81% | 80%-83% | 2% | 89% | 9% | Total Populatio | n 3918 | 81% | 79%-82% | 72% | 71%-74% | N/A | 73% | 27% | Total Population | n 4987 | 72% | 71%-73% |
| LAKE BENTON | | | | | | | 9 | | | | | | | | | | | | |
| Lake Benton Healthcare Center | Avera Health/Avera Tri-State | 81% | 78%-85% | 1% | 92% | 8% | Total Populatio | n 775 | 81% | 78%-84% | 79% | 76%-81% | N/A | 90% | 10% | Total Population | n 957 | 80% | 77%-82% |

^{*} Sufficient data not available.

| Quality of | | | | Brea | ast Ca | ncer | Screeni | ng | | | | | Cervi | cal Ca | ncer | Screening | | |
|--|--------------------------------------|--------------------|--|--|------------------------------------|-------------------------|----------------------------|---|------------------------|--|--------------------|--|---|------------------------------------|-------------------------|---|------------------------|--|
| Preventive Ca | are | | | Dist | dical Gro tribution nt Popul | ı of | | | | | | | Dist | dical Gro tribution nt Popul | of | | | |
| See page 89 for an explanation of t | terms. | l Rate | Confidence Interval of Risk Adjusted Rate | | | MN Health Care Programs | Total Population or Sample | 0 | usted Rate | nterval of usted Rate | l Rate | Confidence Interval of Risk Adjusted Rate | | | MN Health Care Programs | Total Population or Sample Sample Size | usted Rate | nterval of usted Rate |
| PHYSICIAN CLINIC NAME | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence II Adjusted Rat | Medicare | Commercial | MN Health Ca | Total Populat | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non-Risk Adjusted Rate | Risk Adjusted Rate | Confidence In Adjusted Rate | Medicare | Commercial | MN Health Ca | Total Populat Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non-Risk Adjusted Rate |
| Overall Minnesota Clinic Average | | 83% | 82-83% | 9% | 86% | 5% | | | 83% | 82-83% | 80% | 80-81% | NA | 84% | 16% | , | 80% | 80–81% |
| LAKE CITY | | | | 9 | | | | | | | | | | | | • | | |
| Mayo Health System-Lake City | Mayo Health System | 81% | 80%-83% | 2% | 89% | 9% | Total Population | n 3918 | 81% | 79%-82% | 72% | 71%-74% | N/A | 73% | 27% | Total Population 498 | 7 72% | 71%-73% |
| LAKE CRYSTAL | | | | · · · · · · · · · · · · · · · · · · · | | | | | | | | | | | | : | | |
| Mankato Clinic | Mankato Clinic | 84% | 82%-87% | 1% | 95% | 4% | Total Population | n 1659 | 85% | 83%-87% | 80% | 78%-82% | N/A | 78% | 22% | Total Population 187 | 1 80% | 78%-82% |
| LAKEFIELD | · | | | | | | | | | | | | | | | | | |
| Avera Worthington Specialty Clinics | Avera Health/Avera Tri-State | 81% | 78%-85% | 1% | 92% | 8% | Total Population | n 775 | 81% | 78%-84% | 79% | 76%-81% | N/A | 90% | 10% | Total Population 95 | 80% | 77%-82% |
| Sanford Clinic Lakefield | Sanford Clinic | 83% | 80%-85% | 1% | 97% | 2% | Total Population | n 1730 | 84% | 82%-86% | 83% | 81%-84% | N/A | 97% | 3% | Total Population 329 | 0 84% | 83%-85% |
| LE SUEUR | | | | | | | | | | | | | | | | | | |
| Mayo Health System- Immanuel St. Joseph | Mayo Health System | 81% | 80%-83% | 2% | 89% | 9% | Total Population | n 3918 | 81% | 79%-82% | 72% | 71%-74% | N/A | 73% | 27% | Total Population 498 | 7 72% | 71%-73% |
| Southern Metro Medical Clinics | Southern Metro Medical Clinics | 79% | 73%-85% | 8% | 88% | 4% | Total Population | n 193 | 80% | 74%-85% | 75% | 69%-81% | N/A | 93% | 7% | Total Population 25 | 76% | 71%-81% |
| LEWISTON | | | | *0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | | | 8 | | | | | | * · · · · · · · · · · · · · · · · · · · | | | | | |
| Winona Health | Winona Health | 79% | 75%-82% | 2% | 92% | 6% | Total Population | n 555 | 79% | 75%-82% | 75% | 71%-78% | N/A | 88% | 12% | Total Population 65 | 75% | 71%-78% |
| LITCHFIELD | | | | | | | | | | | | | | | | | | |
| Affilliated Community Medical Centers- Litchfield Clinic (East) | Affiliated Community Medical Centers | 84% | 82%-86% | 3% | 90% | 7% | Total Population | n 1786 | 84% | 82%-85% | 80% | 78%-81% | N/A | 85% | 15% | Total Population 186 | 0 80% | 78%-81% |
| Affilliated Community Medical Centers- Litchfield Clinic (West) | Affiliated Community Medical Centers | 84% | 82%-86% | 3% | 90% | 7% | Total Population | n 1786 | 84% | 82%-85% | 80% | 78%-81% | N/A | 85% | 15% | Total Population 186 | 0 80% | 78%-81% |

^{*} Sufficient data not available.

| Quality of | | | | Brea | ast Ca | ncer | Screen | ing | | | | | Cervi | ical Ca | ncer | Screen | ing | | |
|---|--|--------------------|--|----------|-----------------------------------|-------------------------|---------------------------------------|-------------|------------------------|--|--------------------|--|----------|------------------------------------|-------------------------|----------------------------|---|------------------------|--|
| Preventive Ca | are | | | Dist | dical Gre tribution nt Popu | ı of | | | | | | | Dis | dical Gro tribution nt Popul | ı of | | 0 | | |
| See page 89 for an explanation of t | terms. | Rate | erval of Risk | | | e Programs | on or Sample | | sted Rate | erval of sted Rate | Rate | erval of Risk | | | e Programs | on or Sample | 0 0 0 0 0 0 0 | sted Rate | erval of sted Rate |
| PHYSICIAN CLINIC NAME | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non-Risk Adjusted Rate | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non-Risk Adjusted Rate |
| Overall Minnesota Clinic Average | | 83% | 82-83% | 9% | 86% | 5% | | | 83% | 82-83% | 80% | 80–81% | NA | 84% | 16% | | | 80% | 80–81% |
| LONSDALE | | | | • | | | • | | | | | | | | | | | | |
| FamilyHealth Medical Clinic | FamilyHealth Medical Clinics | 82% | 75%-87% | 8% | 89% | 3% | Total Populatio | n 146 | 82% | 75%-88% | 75% | 69%-80% | N/A | 92% | 8% | Total Populatio | n 247 | 76% | 70%-81% |
| LUVERNE | | | | | | | | | | | | | | | | | | | |
| Sanford Clinic | Sanford Clinic | 83% | 80%-85% | 1% | 97% | 2% | Total Populatio | n 1730 | 84% | 82%-86% | 83% | 81%-84% | N/A | 97% | 3% | Total Populatio | n 3290 | 84% | 83%-85% |
| MABEL | | | | | | | | | | | | | | | | | | | |
| Winneshiek Medical Center | Winneshiek Medical Center-Mabel Clinic | * | * | * | * | * | * | * | * | * | * | * | N/A | * | * | * | * | * | * |
| MADELIA | | | | | | | | | | | | | | | | | | | |
| Mayo Health System- Immanuel St. Joseph | Mayo Health System | 81% | 80%-83% | 2% | 89% | 9% | Total Populatio | n 3918 | 81% | 79%-82% | 72% | 71%-74% | N/A | 73% | 27% | Total Populatio | n 4987 | 72% | 71%-73% |
| MADISON | | | | | | | · · · · · · · · · · · · · · · · · · · | | | | | | | | | • | | | |
| Lac Qui Parle Clinic | Lac Qui Parle Clinic | 79% | 77%-81% | 3% | 86% | 11% | Total Populatio | n 1578 | 79% | 77%-81% | 76% | 74%-78% | N/A | 78% | 22% | : Total Populatio | n 1975 | 75% | 73%-77% |
| MANKATO | | | | | | | • | | | | | | | | | : | | | |
| Between the Bridges Health Center | | * | * | * | * | * | * | * | * | * | * | * | N/A | * | * | * | * | * | * |
| Mayo Health System-Immanuel St. Joseph- Mankato Eastridge | Mayo Health System | 81% | 80%-83% | 2% | 89% | 9% | Total Populatio | n 3918 | 81% | 79%-82% | 72% | 71%-74% | N/A | 73% | 27% | Total Populatio | n 4987 | 72% | 71%-73% |
| Mayo Health System-Immanuel St. Joseph- Mankato Specialty Clinic | Mayo Health System | 81% | 80%-83% | 2% | 89% | 9% | Total Populatio | n 3918 | 81% | 79%-82% | 72% | 71%-74% | N/A | 73% | 27% | Total Populatio | n 4987 | 72% | 71%-73% |
| Mankato Clinic- Main Street | Mankato Clinic | 84% | 82%-87% | 1% | 95% | 4% | Total Populatio | n 1659 | 85% | 83%-87% | 80% | 78%-82% | N/A | 78% | 22% | Total Populatio | n 1871 | 80% | 78%-82% |
| Mankato Clinic- Wickersham Campus | Mankato Clinic | 84% | 82%-87% | 1% | 95% | 4% | Total Populatio | n 1659 | 85% | 83%-87% | 80% | 78%-82% | N/A | 78% | 22% | Total Populatio | n 1871 | 80% | 78%-82% |

^{*} Sufficient data not available.

| Quality of | | | | Brea | ast Ca | ncer | Screeni | ng | | | | | Cervi | cal Ca | ncer | Screeni | ng | | |
|--|---|--------------------|--|----------|-----------------------------------|-------------------------|----------------------------|-------------|------------------------|--|--------------------|--|----------|-----------------------------------|-------------------------|----------------------------|-------------|------------------------|--|
| Preventive Ca | are | | | Dist | lical Gro ribution nt Popul | ı of | | | | | | | Dist | lical Gro ribution it Popul | of | | | | |
| See page 89 for an explanation of t | terms. | d Rate | Confidence Interval of Risk Adjusted Rate | | | MN Health Care Programs | lotal Population or Sample | | usted Rate | nterval of usted Rate | d Rate | Confidence Interval of Risk Adjusted Rate | | | MN Health Care Programs | lotal Population or Sample | | usted Rate | nterval of usted Rate |
| PHYSICIAN CLINIC NAME | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence Int Adjusted Rate | Medicare | Commercial | MN Health Ca | Total Populat | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non-Risk Adjusted Rate | Risk Adjusted Rate | Confidence I Adjusted Rat | Medicare | Commercial | MN Health Ca | Total Popula | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non-Risk Adjusted Rate |
| Overall Minnesota Clinic Average | | 83% | 82–83% | 9% | 86% | 5% | | | 83% | 82–83% | 80% | 80-81% | NA | 84% | 16% | . | | 80% | 80–81% |
| Open Door Health Center | Open Door Health Center | * | * | * | * | * | * | * | * | * | * | * | N/A | * | * | * | * | * | * |
| MAPLETON | | | | | | | • | | | | | | | | | | | | |
| Mankato Clinic | Mankato Clinic | 84% | 82%-87% | 1% | 95% | 4% | Total Population | n 1659 | 85% | 83%-87% | 80% | 78%-82% | N/A | 78% | 22% | Total Population | 1871 | 80% | 78%-82% |
| MARSHALL | : | | | | | | | | | | | | | | | | | | |
| Affiliated Community Medical Centers- Bruce Street | Affiliated Community Medical Centers | 84% | 82%-86% | 3% | 90% | 7% | Total Population | 1786 | 84% | 82%-85% | 80% | 78%-81% | N/A | 85% | 15% | Total Population | 1860 | 80% | 78%-81% |
| Affilliated Community Medical Centers- Marshall Clinic- Market Street | Affiliated Community Medical Centers | 84% | 82%-86% | 3% | 90% | 7% | Total Population | n 1786 | 84% | 82%-85% | 80% | 78%-81% | N/A | 85% | 15% | Total Population | 1860 | 80% | 78%-81% |
| Avera Marshall Specialty Clinic | Avera Health/Avera Tri-State | 81% | 78%-85% | 1% | 92% | 8% | Total Population | n 775 | 81% | 78%-84% | 79% | 76%-81% | N/A | 90% | 10% | Total Population | 957 | 80% | 77%-82% |
| MILAN | | | | | | | • | | | | | | | | | | | | |
| Milan Clinic | Chippewa County Montevideo Hospital & Medical Clinic | 79% | 77%-81% | 3% | 86% | 11% | Total Population | n 1578 | 79% | 77%-81% | 76% | 74%-78% | N/A | 78% | 22% | Total Population | 1975 | 75% | 73%-77% |
| MONTEVIDEO | | | | | | | | | | | | | | | | | | | |
| Chippewa County Montevideo Hospital & Medical Clinic | Chippewa County Montevideo Hospital & Medical Clinic | 79% | 77%-81% | 3% | 86% | 11% | Total Population | n 1578 | 79% | 77%-81% | 76% | 74%-78% | N/A | 78% | 22% | Total Population | 1975 | 75% | 73%-77% |
| MONTGOMERY | | | | | | | | | | | | | | | | | | | |
| Southern Metro Medical Clinics- Montgomery Medical Clinic | Southern Metro Medical Clinics | 79% | 73%-85% | 8% | 88% | 4% | Total Population | 1 193 | 80% | 74%-85% | 75% | 69%-81% | N/A | 93% | 7% | Total Population | 255 | 76% | 71%-81% |
| MOUNTAIN LAKE | | | | | | | | | | | | | | | | | | | |
| Sanford Clinic | Sanford Clinic | 83% | 80%-85% | 1% | 97% | 00/ | Total Population | 1720 | 84% | 82%-86% | 83% | 81%-84% | N/A | 97% | 00/ | Total Population | 2200 | 84% | 83%-85% |

^{*} Sufficient data not available.

| Quality of | | | | Brea | ast Ca | ncer | Screening | | | | | Cervi | cal Ca | ncer | Screening | | |
|--|--------------------------------------|--------------------|--|---------------------------------------|------------------------------------|-------------------------|---|------------------------|--|--------------------|--------------------------------------|----------|------------------------------------|-------------------------|---|------------------------|--|
| Preventive Ca | are | | | Dist | lical Gro tribution nt Popul | of | | | | | | Dist | dical Gro tribution nt Popul | of | | | |
| See page 89 for an explanation of t | erms. | Rate | erval of Risk | | | e Programs | n or Sample | ted Rate | erval of ted Rate | Rate | erval of Risk | | | e Programs | n or Sample | ted Rate | erval of ted Rate |
| PHYSICIAN CLINIC NAME | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non-Risk Adjusted Rate | Risk Adjusted Rate | Confidence Interval Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non-Risk Adjusted Rate |
| Overall Minnesota Clinic Average | | 83% | 82-83% | 9% | 86% | 5% | | 83% | 82–83% | 80% | 80-81% | NA | 84% | 16% | , 5 | 80% | 80–81% |
| NEW LONDON | | | | • | | | | | | | | | | | | | |
| Affilliated Community Medical Centers | Affiliated Community Medical Centers | 84% | 82%-86% | 3% | 90% | 7% | Total Population 1786 | 84% | 82%-85% | 80% | 78%-81% | N/A | 85% | 15% | Total Population 186 | 80% | 78%-81% |
| NEW PRAGUE | | | | 0 0 0 0 | | | | | | | | • | | | | | |
| Parkview Medical Clinic | Parkview Medical Clinic | 79% | 71%-85% | 1% | 95% | 4% | Total Population 101 | 79% | 70%-86% | 82% | 74%-88% | N/A | 91% | 9% | Total Population 137 | 82% | 75%-88% |
| NEW ULM | | | | | | | | | | | | | | | | | |
| Allina Health System- New Ulm Medical Center | Allina Health System | 83% | 81%-85% | 11% | 85% | 5% | Total Population 2159 | 83% | 82%-85% | 81% | 80%-83% | N/A | 79% | 21% | Total Population 319 | 81% | 79%-82% |
| NORTH MANKATO | | | | * * * * * * * * * * * * * * * * * * * | | | | | | | | | | | : | | |
| Mayo Health System-Immanuel St. Joseph - Mankato Northridge | Mayo Health System | 81% | 80%-83% | 2% | 89% | 9% | Total Population 3918 | 81% | 79%-82% | 72% | 71%-74% | N/A | 73% | 27% | Total Population 498 | 72% | 71%-73% |
| Mankato Clinic | Mankato Clinic | 84% | 82%-87% | 1% | 95% | 4% | Total Population 1659 | 85% | 83%-87% | 80% | 78%-82% | N/A | 78% | 22% | Total Population 187 | 80% | 78%-82% |
| NORTHFIELD | | | | | | | | | | | | | | | : | | |
| Allina Medical Clinic | Allina Medical Clinic | 81% | 81%-82% | 10% | 86% | 4% | Total Population 13556 | 82% | 81%-82% | 80% | 80%-81% | N/A | 88% | 12% | Total Population 2116 | 8 81% | 80%-81% |
| OLIVIA | | | | o o o o | | | | | | | | • | | | | | |
| Renville County Hospital and Clinics | Renville County Hospital and Clinics | 79% | 77%-81% | 3% | 86% | 11% | Total Population 1578 | 79% | 77%-81% | 76% | 74%-78% | N/A | 78% | 22% | Total Population 197 | 75% | 73%-77% |
| ORTONVILLE | | | | | | | | | | | | | | | • | | |
| Northside Medical Clinic | Northside Medical Clinic | 79% | 77%-81% | 3% | 86% | 11% | Total Population 1578 | 79% | 77%-81% | 76% | 74%-78% | N/A | 78% | 22% | Total Population 197 | 75% | 73%-77% |
| | | | | | | | | | | | | | | | | | |

^{*} Sufficient data not available.

| Quality of | | | | Brea | ast Ca | ncer | Screeni | ng | | | | | Cervi | cal Ca | ncer | Screening | | |
|--|--------------------------------------|--------------------|--|--|------------------------------------|-------------------------|----------------------------|---|------------------------|--|--------------------|--|----------|------------------------------------|-------------------------|---|------------------------|--|
| Preventive Ca | are | | | Dist | dical Gro tribution nt Popul | n of | | | | | | | Dist | dical Gro tribution nt Popul | of | | | |
| See page 89 for an explanation of te | erms. | Rate | Confidence Interval of Risk Adjusted Rate | | | re Programs | Total Population or Sample | 0 | sted Rate | terval of isted Rate | Rate | Confidence Interval of Risk Adjusted Rate | | | re Programs | Total Population or Sample Sample Size | sted Rate | terval of isted Rate |
| PHYSICIAN CLINIC NAME | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence In Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Populati | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non-Risk Adjusted Rate | Risk Adjusted Rate | Confidence In Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Populati Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non-Risk Adjusted Rate |
| Overall Minnesota Clinic Average | | 83% | 82–83% | 9% | 86% | 5% | | | 83% | 82–83% | 80% | 80-81% | NA | 84% | 16% | | 80% | 80–81% |
| OWATONNA | | | | 9 0 9 9 | | | | | | | | | • | | | | | |
| Mayo Health System-Owatonna Clinic | Mayo Health System | 81% | 80%-83% | 2% | 89% | 9% | Total Population | n 3918 | 81% | 79%-82% | 72% | 71%-74% | N/A | 73% | 27% | Total Population 4987 | 72% | 71%-73% |
| PINE ISLAND | | | | , | | | | | | | | | | | | | | |
| Olmsted Medical Center | Olmsted Medical Center | 87% | 84%-89% | 6% | 84% | 11% | Total Population | n 940 | 86% | 83%-88% | 78% | 76%-80% | N/A | 77% | 23% | Total Population 1442 | 77% | 75%-80% |
| PIPESTONE | | | | | | | | | | | | | | | | | | |
| Avera- Pipestone County Medical Center | Avera Health/Avera Tri-State | 81% | 78%-85% | 1% | 92% | 8% | Total Population | n 775 | 81% | 78%-84% | 79% | 76%-81% | N/A | 90% | 10% | Total Population 957 | 80% | 77%-82% |
| PLAINVIEW | | | | | | | | | | | | | | | | | | |
| Olmsted Medical Center | Olmsted Medical Center | 87% | 84%-89% | 6% | 84% | 11% | Total Population | n 940 | 86% | 83%-88% | 78% | 76%-80% | N/A | 77% | 23% | Total Population 1442 | 77% | 75%-80% |
| PRESTON | | | | ** | | | | | | | | | | | | | | |
| Olmsted Medical Center | Olmsted Medical Center | 87% | 84%-89% | 6% | 84% | 11% | Total Population | n 940 | 86% | 83%-88% | 78% | 76%-80% | N/A | 77% | 23% | Total Population 1442 | 77% | 75%-80% |
| RED WING | | | | *0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | | | | | | | | | | | | | | |
| Fairview Red Wing Medical Center | Fairview Health Services | 82% | 81%-83% | 14% | 81% | 5% | Total Population | n 9579 | 82% | 81%-83% | 82% | 82%-83% | N/A | 81% | 19% | Total Population 1458 | 6 82% | 82%-83% |
| REDWOOD FALLS | | | | | | | | • | | | | | | | | 2 · · · · · · · · · · · · · · · · · · · | | |
| Affilliated Community Medical Centers | Affiliated Community Medical Centers | 84% | 82%-86% | 3% | 90% | 7% | Total Population | n 1786 | 84% | 82%-85% | 80% | 78%-81% | N/A | 85% | 15% | Total Population 1860 | 80% | 78%-81% |
| RENVILLE | | | | | | | | | | | | | | | | , | * | |
| Renville County Hospital and Clinics | Renville County Hospital and Clinics | 79% | 77%-81% | 3% | 86% | 11% | Total Population | n 1578 | 79% | 77%-81% | 76% | 74%-78% | N/A | 78% | 22% | Total Population 1975 | 75% | 73%-77% |

^{*} Sufficient data not available.

| Quality of | | | | Brea | ast Ca | ncer | Screening | | | | | Cervi | cal Ca | ncei | Screen | ing | | |
|--|---------------------------|--------------------|--|--------------------------------------|----------------------------------|-------------------------|---|------------------------|--|--------------------|---|---|------------------------------------|-------------------------|----------------------------|--------------------------------------|------------------------|--|
| Preventive C | are | | | Dist | dical Gr tribution nt Popu | n of | | | | | | Dist | lical Gro tribution nt Popul | ı of | | 0 | | |
| See page 89 for an explanation of | terms. | Rate | terval of Risk | 0 0 0 0 0 0 0 0 | | e Programs | on or Sample | sted Rate | terval of sted Rate | Rate | terval of Risk | 0 0 0 0 0 0 0 0 0 | | e Programs | on or Sample | 0 0 0 0 0 0 0 0 | sted Rate | terval of sted Rate |
| PHYSICIAN CLINIC NAME | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non-Risk Adjusted Rate | Risk Adjusted Rate | Confidence Interval of Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non-Risk Adjusted Rate |
| Overall Minnesota Clinic Average | | 83% | 82–83% | 9% | 86% | 5% | | 83% | 82-83% | 80% | 80–81% | NA | 84% | 16% | 6 | | 80% | 80–81% |
| ROCHESTER | | | | • | | | | • | | | | | | | | • | | |
| Mayo Clinic- Baldwin Building, Family Medicine | Mayo Clinic | 89% | 86%-90% | 3% | 85% | 11% | Total Population 1172 | 88% | 86%-90% | 74% | 71%-76% | N/A | 78% | 22% | Total Populatio | on 1289 | 73% | 71%-76% |
| Mayo Clinic- Baldwin Building, Primary Care Internal Medicine | Mayo Clinic | 89% | 86%-90% | 3% | 85% | 11% | Total Population 1172 | 88% | 86%-90% | 74% | 71%-76% | N/A | 78% | 22% | Total Populatio | on 1289 | 73% | 71%-76% |
| Mayo Clinic- Mayo Building | Mayo Clinic | 89% | 86%-90% | 3% | 85% | 11% | Total Population 1172 | 88% | 86%-90% | 74% | 71%-76% | N/A | 78% | 22% | Total Populatio | on 1289 | 73% | 71%-76% |
| Mayo Clinic- Northeast | Mayo Clinic | 89% | 86%-90% | 3% | 85% | 11% | Total Population 1172 | 88% | 86%-90% | 74% | 71%-76% | N/A | 78% | 22% | Total Populatio | on 1289 | 73% | 71%-76% |
| Mayo Clinic- Northwest | Mayo Clinic | 89% | 86%-90% | 3% | 85% | 11% | Total Population 1172 | 88% | 86%-90% | 74% | 71%-76% | N/A | 78% | 22% | Total Population | on 1289 | 73% | 71%-76% |
| Olmsted Medical Center- Rochester Northwest | Olmsted Medical Center | 87% | 84%-89% | 6% | 84% | 11% | Total Population 940 | 86% | 83%-88% | 78% | 76%-80% | N/A | 77% | 23% | Total Populatio | on 1442 | 77% | 75%-80% |
| Olmsted Medical Center- Rochester Southeast | Olmsted Medical Center | 87% | 84%-89% | 6% | 84% | 11% | Total Population 940 | 86% | 83%-88% | 78% | 76%-80% | N/A | 77% | 23% | Total Populatio | on 1442 | 77% | 75%-80% |
| Rochester Family Medicine Clinic | | * | * | * | * | * | * * | * | * | * | * | N/A | * | * | * | * | * | * |
| RUSHFORD | | | | | | | | | | | | | | | | | | |
| Winona Health | Winona Health | 79% | 75%-82% | 2% | 92% | 6% | Total Population 555 | 79% | 75%-82% | 75% | 71%-78% | N/A | 88% | 12% | Total Populatio | on 654 | 75% | 71%-78% |
| SLAYTON | | | | | | | | | | | | | | | | | | |
| Murray County Clinic | Murray County Clinic | 79% | 77%-81% | 3% | 86% | 11% | Total Population 1578 | 79% | 77%-81% | 76% | 74%-78% | N/A | 78% | 22% | Total Populatio | on 1975 | 75% | 73%-77% |
| SLEEPY EYE | | | | | | | | | | | | | | | | | | |
| Sleepy Eye Medical Center | Sleepy Eye Medical Center | 79% | 77%-81% | 3% | 86% | 11% | Total Population 1578 | 79% | 77%-81% | 76% | 74%-78% | N/A | 78% | 22% | Total Populatio | n 1975 | 75% | 73%-77% |

^{*} Sufficient data not available.

| Quality of | | | | Brea | ast Ca | ncer | Screenin | g | | | | | Cervi | cal Ca | ncer | Screening | | |
|--|--------------------------------|--------------------|--|-----------------|------------------------------------|-------------------------|---|-------------|------------------------|--|--------------------|--|----------|------------------------------------|-------------------------|---|------------------------|--|
| Preventive Ca | ıre | | | Dist | lical Gro tribution nt Popul | ı of | | | | | | | Dist | lical Gro tribution nt Popul | ı of | | | |
| See page 89 for an explanation of to | erms. | Rate | erval of Risk | | | e Programs | n or Sample | | sted Rate | erval of sted Rate | Rate | erval of Risk | | | e Programs | n or Sample | sted Rate | erval of sted Rate |
| PHYSICIAN CLINIC NAME | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample Samnle Size | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non-Risk Adjusted Rate | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non-Risk Adjusted Rate |
| Overall Minnesota Clinic Average | | 83% | 82-83% | 9% | 86% | 5% | | | 83% | 82–83% | 80% | 80-81% | NA | 84% | 16% | 6 | 80% | 80–81% |
| SPICER | | | | | | | | | | | | | | | | | | |
| Paynesville Green Lake Medical Clinic | Paynesville Area Health System | 81% | 76%-85% | 8% | 84% | 8% | Total Population | 285 | 81% | 76%-85% | 76% | 71%-80% | N/A | 82% | 18% | Total Population 36 | 76% | 71%-80% |
| SPRING GROVE | | | | | | | | | | | | | | | | | | |
| Gundersen Lutheran | Gundersen Clinic | 89% | 86%-91% | 0% | 94% | 5% | Total Population | 512 | 89% | 86%-91% | 75% | 71%-79% | N/A | 94% | 6% | Total Population 510 | 76% | 72%-80% |
| SPRING VALLEY | | | | | | | | | | | | | | | | | | |
| Olmsted Medical Center | Olmsted Medical Center | 87% | 84%-89% | 6% | 84% | 11% | Total Population | 940 | 86% | 83%-88% | 78% | 76%-80% | N/A | 77% | 23% | Total Population 144 | 2 77% | 75%-80% |
| SPRINGFIELD | | | | | | | | | | | | | <u> </u> | | | | | |
| Mayo Health System-Immanuel St. Joseph | Mayo Health System | 81% | 80%-83% | 2% | 89% | 9% | Total Population | 3918 | 81% | 79%-82% | 72% | 71%-74% | N/A | 73% | 27% | Total Population 498 | 7 72% | 71%-73% |
| ST. CHARLES | } | | | | | | | | | | | | | | | | | |
| Olmsted Medical Center | Olmsted Medical Center | 87% | 84%-89% | 6% | 84% | 11% | Total Population | 940 | 86% | 83%-88% | 78% | 76%-80% | N/A | 77% | 23% | Total Population 144 | 2 77% | 75%-80% |
| ST. JAMES | ; | | | | | | | | | | | | | | | : | | |
| Mayo Health System-Immanuel St. Joseph | Mayo Health System | 81% | 80%-83% | 2% | 89% | 9% | Total Population | 3918 | 81% | 79%-82% | 72% | 71%-74% | N/A | 73% | 27% | Total Population 498 | 7 72% | 71%-73% |
| Moulton & Parsons MDs | | * | * | * | * | * | * | * | * | * | * | * | N/A | * | * | * * * | * | * |
| ST. PETER | ; | | | · · · · · · · · | | | | | | | | | | | | • | | |
| Mayo Health System-Immanuel St. Joseph | Mayo Health System | 81% | 80%-83% | 2% | 89% | 9% | Total Population | 3918 | 81% | 79%-82% | 72% | 71%-74% | N/A | 73% | 27% | Total Population 498 | 7 72% | 71%-73% |
| Mankato Clinic- Daniel's Health Center | Mankato Clinic | 84% | 82%-87% | 1% | 95% | 4% | Total Population | 1659 | 85% | 83%-87% | 80% | 78%-82% | N/A | 78% | 22% | Total Population 187 | 1 80% | 78%-82% |

^{*} Sufficient data not available.

| Quality of | | | | Bre | ast Ca | ncer | Screenii | ng | | | | | Cervi | cal Ca | ncer | Screen | ning | | |
|---|--------------------------------|--------------------|--|----------|------------------------------------|-------------------------|----------------------------|---|------------------------|--|--------------------|--------------------------------------|----------|------------------------------------|-------------------------|---------------------|-------------|------------------------|--|
| Preventive Ca | are | | | Dis | dical Gro tribution nt Popul | 1 of | | | | | | | Dist | dical Gro tribution nt Popul | ı of | | | | |
| See page 89 for an explanation of | terms. | Rate | erval of Risk | | | e Programs | on or Sample | 0 | sted Rate | terval of sted Rate | Rate | erval of Risk | | | e Programs | on or Sample | | sted Rate | terval of sted Rate |
| PHYSICIAN CLINIC NAME | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non-Risk Adjusted Rate | Risk Adjusted Rate | Confidence Interval Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non-Risk Adjusted Rate |
| Overall Minnesota Clinic Average | | 83% | 82-83% | 9% | 86% | 5% | | | 83% | 82-83% | 80% | 80–81% | NA | 84% | 16% | Ś | | 80% | 80–81% |
| River's Edge Clinic | River's Edge Hospital & Clinic | * | * | * | * | * | * | * | * | * | * | * | N/A | * | * | * | * | * | * |
| STEWARTVILLE | | | | | | | • | | | | | | | | | | | | |
| Olmsted Medical Center | Olmsted Medical Center | 87% | 84%-89% | 6% | 84% | 11% | Total Population | 940 | 86% | 83%-88% | 78% | 76%-80% | N/A | 77% | 23% | Total Population | on 1442 | 77% | 75%-80% |
| TRACY | | | | | | | | | | | | | | | | | | | |
| Sanford Clinic Tracy/ Balaton/Walnut Grove | Sanford Clinic | 83% | 80%-85% | 1% | 97% | 2% | Total Population | 1730 | 84% | 82%-86% | 83% | 81%-84% | N/A | 97% | 3% | Total Population | on 3290 | 84% | 83%-85% |
| TYLER | | | | | | | | | | | | | | | | | | | |
| Tyler Medical Clinic | Avera Health/Avera Tri-State | 81% | 78%-85% | 1% | 92% | 8% | Total Population | 775 | 81% | 78%-84% | 79% | 76%-81% | N/A | 90% | 10% | Total Population | on 957 | 80% | 77%-82% |
| WABASHA | | | | | | | | | | | | | | | | | | | |
| Mayo Health System-Wabasha Clinic | Mayo Health System | 81% | 80%-83% | 2% | 89% | 9% | Total Population | 3918 | 81% | 79%-82% | 72% | 71%-74% | N/A | 73% | 27% | Total Population | on 4987 | 72% | 71%-73% |
| WANAMINGO | | | | | | | | | | | | | | | | | | | |
| Olmsted Medical Center | Olmsted Medical Center | 87% | 84%-89% | 6% | 84% | 11% | Total Population | 940 | 86% | 83%-88% | 78% | 76%-80% | N/A | 77% | 23% | Total Population | on 1442 | 77% | 75%-80% |
| WASECA | | | | | | | | | | | | | | | | | | | |
| Mayo Health System-Immanuel St. Joseph | Mayo Health System | 81% | 80%-83% | 2% | 89% | 9% | Total Population | 3918 | 81% | 79%-82% | 72% | 71%-74% | N/A | 73% | 27% | Total Population | on 4987 | 72% | 71%-73% |
| WATKINS | | | | | | | | | | | | | | | | | | | |
| Paynesville Watkins Medical Clinic | Paynesville Area Health System | 81% | 76%-85% | 8% | 84% | 8% | Total Population | 285 | 81% | 76%-85% | 76% | 71%-80% | N/A | 82% | 18% | Total Population | on 365 | 76% | 71%-80% |

^{*} Sufficient data not available.

| Quality of | | | | Brea | ast Ca | ncer | Screen | ing | | | | | Cervi | cal Ca | ncer | Screen | ing | | |
|---|---|--------------------|--|---------------------------------------|-----------------------------------|-------------------------|----------------------------|-------------|------------------------|--|--------------------|--|----------|------------------------------------|-------------------------|----------------------------|-------------|------------------------|--|
| Preventive Ca | ıre | | | Dist | dical Gre tribution nt Popu | n of | | 0 | | | | | Dist | dical Gro tribution nt Popul | of | | 0 | | |
| See page 89 for an explanation of to | erms. | Rate | Confidence Interval of Risk Adjusted Rate | 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 | | MN Health Care Programs | lotal Population or Sample | | ısted Rate | ıterval of ısted Rate | Rate | Confidence Interval of Risk Adjusted Rate | | | MN Health Care Programs | fotal Population or Sample | | ısted Rate | nterval of usted Rate |
| PHYSICIAN CLINIC NAME | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence Ir Adjusted Rate | Medicare | Commercial | MN Health Ca | Total Populat | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non-Risk Adjusted Rate | Risk Adjusted Rate | Confidence Ir Adjusted Rate | Medicare | Commercial | MN Health Ca | Total Populat | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non-Risk Adjusted Rate |
| Overall Minnesota Clinic Average | | 83% | 82-83% | 9% | 86% | 5% | | | 83% | 82-83% | 80% | 80-81% | NA | 84% | 16% | 6 | | 80% | 80–81% |
| WESTBROOK | | | | | | | • | | | | | | | | | • | • | | |
| Sanford Clinic Westbrook | Sanford Clinic | 83% | 80%-85% | 1% | 97% | 2% | Total Populatio | on 1730 | 84% | 82%-86% | 83% | 81%-84% | N/A | 97% | 3% | Total Populati | on 3290 | 84% | 83%-85% |
| WILLMAR | | | | | | | | | | | | | | | | | | | |
| Affilliated Community Medical Centers | Affiliated Community Medical Centers | 84% | 82%-86% | 3% | 90% | 7% | Total Populatio | on 1786 | 84% | 82%-85% | 80% | 78%-81% | N/A | 85% | 15% | Total Populati | on 1860 | 80% | 78%-81% |
| Family Practice Medical Center of Willmar | Family Practice Medical Center of Willmar | 80% | 75%-85% | 5% | 84% | 11% | Total Populatio | on 243 | 81% | 76%-86% | 83% | 79%-87% | N/A | 83% | 17% | Total Populati | on 308 | 83% | 79%-87% |
| WINDOM | | | | | | | | , | | | | | | | | | | | |
| Avera- United Medical Clinic | Avera Health/Avera Tri-State | 81% | 78%-85% | 1% | 92% | 8% | Total Populatio | on 775 | 81% | 78%-84% | 79% | 76%-81% | N/A | 90% | 10% | Total Populati | on 957 | 80% | 77%-82% |
| Hartberg Medical Clinic | Hartberg Medical Clinic | * | * | * | * | * | * | * | * | * | * | * | N/A | * | * | * | * | * | * |
| Sanford Clinic Windom | Sanford Clinic | 83% | 80%-85% | 1% | 97% | 2% | Total Populatio | on 1730 | 84% | 82%-86% | 83% | 81%-84% | N/A | 97% | 3% | Total Populati | on 3290 | 84% | 83%-85% |
| Windom Family Medical Center | | * | * | * | * | * | * | * | * | * | * | * | N/A | * | * | * | * | * | * |
| WINONA | | | | | | | | | | | | | | | | | | | |
| Family Medicine of Winona | Family Medicine of Winona | 73% | 66%-79% | 4% | 86% | 11% | Total Populatio | on 159 | 72% | 65%-79% | 72% | 65%-78% | N/A | 85% | 15% | Total Populati | on 198 | 72% | 65%-78% |
| Winona Health- Winona Health Clinics | Winona Health | 79% | 75%-82% | 2% | 92% | 6% | Total Populatio | on 555 | 79% | 75%-82% | 75% | 71%-78% | N/A | 88% | 12% | Total Populati | on 654 | 75% | 71%-78% |
| WINSTED | | | | *** | | | | | | | | | | | | | | | |
| Ridgeview Winsted Clinic | Ridgeview Clinics | 75% | 72%-78% | 8% | 88% | Л% | Total Population | n 200 | 75% | 72%-78% | 76% | 73%-78% | N/A | 89% | 110/ | Total Populati | on 1157 | 76% | 74%-79% |

^{*} Sufficient data not available.

| Quality of | | | | Bre | ast Ca | ncer | Screer | ning | | | | | Cervi | cal Ca | ncer | Screen | ing | | |
|------------------------------------|---------------------------------------|--------------------|--|---------------------------------------|------------------------------------|-------------------------|--|-------------|---------------------------------------|--|--------------------|--|----------|------------------------------------|-------------------------|--|-------------|------------------------|--|
| Preventive Ca | are | | | Dis | dical Gro tribution nt Popul | ı of | | | | | | | Dist | dical Gro tribution nt Popul | ı of | | | | |
| See page 89 for an explanation of | terms. | Rate | erval of Risk | | | e Programs | on or Sample | | sted Rate | erval of sted Rate | Rate | erval of Risk | | | e Programs | on or Sample | 0 | sted Rate | erval of sted Rate |
| PHYSICIAN CLINIC NAME | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non-Risk Adjusted Rate | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non-Risk Adjusted Rate |
| Overall Minnesota Clinic Average | | 83% | 82–83% | 9% | 86% | 5% | 0 | | 83% | 82-83% | 80% | 80–81% | . NA | 84% | 16% | 6 | | 80% | 80–81% |
| WORTHINGTON | | | | | | | | | | | | | | | | | | | |
| Avera Worthington Specialty Clinic | Avera Health/Avera Tri-State | 81% | 78%-85% | 1% | 92% | 8% | Total Populat | ion 775 | 81% | 78%-84% | 79% | 76%-81% | N/A | 90% | 10% | Total Populatio | n 957 | 80% | 77%-829 |
| Sanford Clinic | Sanford Clinic | 83% | 80%-85% | 1% | 97% | 2% | Total Populat | ion 1730 | 84% | 82%-86% | 83% | 81%-84% | N/A | 97% | 3% | Total Populatio | n 3290 | 84% | 83%-85% |
| ZUMBROTA | | | | | | | | | | | | | | | | | | | |
| Fairview Red Wing Zumbrota Clinic | Fairview Health Services | 82% | 81%-83% | 14% | 81% | 5% | Total Populat | ion 9579 | 82% | 81%-83% | 82% | 82%-83% | N/A | 81% | 19% | Total Populatio | n 14586 | 82% | 82%-839 |
| | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | · · · · · · · · · · · · · · · · · · · | | | | | | | | | | |
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^{*} Sufficient data not available.

| Quality of | | | C | olored | tal Ca | ncer | Scree | ning | | | | Ca | ncer (| Comb | ined | Screen | ing | | |
|--|--|--------------------|--|---------------------------------------|------------------------------------|-------------------------|--|-------------|---|--|--------------------|--|----------|----------------------------------|-------------------------|--|-------------|---------------------------------------|--|
| Preventive Ca | are | | | Dis | dical Gro tribution nt Popul | ı of | | | | | | | Dist | ical Gro ribution It Popul | of | | | | |
| See page 89 for an explanation of t | terms. | Rate | erval of Risk | 0 | | e Programs | ın or Sample | | ted Rate | erval of ited Rate | Rate (| erval of Risk | | | e Programs | n or Sample | | ited Rate | erval of ited Rate |
| PHYSICIAN CLINIC NAME | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non-Risk Adjusted Rate | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non-Risk Adjusted Rate |
| Overall Minnesota Clinic Average | | 72% | 69–74% | 20% | 76% | 4% | | | 72% | 69–74% | 53% | 50-55% | 20% | 17% | 3% | | | 53% | 50–55% |
| ADRIAN | | | | | | | * | | • | | | | | | | • • • • | | 0 0 0 0 | |
| Sanford Clinic Adrian | Sanford Clinic | 77% | 64%-89% | 0% | 92% | 8% | Sample | 94 | 76% | 59%-88% | * | * | * | * | * | * | * | * | * |
| ALBERT LEA | | | | | | | | | | | | | | | | ; | | | |
| Mayo Health System- Albert Lea Medical Center | Mayo Health System | 72% | 61%-82% | 5% | 89% | 7% | Sample | 293 | 74% | 63%-82% | 44% | 32%-56% | 5% | 89% | 7% | Sample | 293 | 41% | 31%-53% |
| APPLETON | : : | | | | | | ************************************** | | | | | | | | | • • • • • • • • • | | · | |
| Appleton Clinic | Appleton Area Health Services | 43% | 2%-83% | 7% | 87% | 6% | Sample | 97 | 39% | 12%-75% | 15% | 6%-24% | 7% | 87% | 6% | Sample | 97 | 7% | 2%-21% |
| ARLINGTON | \$ | | | | | | | | | | | | | | | | | | |
| Sibley Medical Center | Sibley Medical Center | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| AUSTIN | \$! ! | | | | • • • • • • • | | ** | | · · · · · · · · · · · · · · · · · · · | | | | | | | | | · · · · · · · · · · · · · · · · · · · | |
| Mayo Health System- Austin Medical Center | Mayo Health System | 72% | 61%-82% | 5% | 89% | 7% | Sample | 293 | 74% | 63%-82% | 44% | 32%-56% | 5% | 89% | 7% | Sample | 293 | 41% | 31%-53% |
| Smart Clinic | Smart Clinic | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| BENSON | \$ | | | · · · · · · · · · · · · · · · · · · · | | | ** | | | | | | | | | 70 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | | · · · · · · · · · · · · · · · · · · · | |
| Affilliated Community Medical Centers | Affiliated Community Medical Centers | 64% | 12%-100% | 5% | 88% | 7% | Sample | 89 | 65% | 26%-91% | 64% | 11%-100% | 5% | 89% | 6% | Sample | 79 | 65% | 26%-91% |
| BLUE EARTH | 4 | | | · · · · · · · · · · · · · · · · · · · | | | ** * * * * * * * * * * * * * * * * * * | | 9 • • • • • • • • • • • • • • • • • • • | | | | | | | | | · · · · · · · · · · · · · · · · · · · | |
| United Hospital District Clinic | United Hospital District Clinic | * | * | * | * | * | * * | * | * | * | * | * | * | * | * | * | * | * | * |
| | ************************************** | | | | | | • | | • | | | | | | | | | • | |

^{*} Sufficient data not available.

| Quality of | | | С | olorec | tal Ca | ncer | Scree | ning | | | | Ca | ancer (| Comb | ined | Screen | ing | | |
|---|---|--------------------|--|----------|-----------------------------------|-------------------------|---|-------------|---------------------------------|--|--------------------|--|----------|---------------------------------|-------------------------|----------------------------|-------------|---|--|
| Preventive Ca | ıre | | | Dist | lical Gro ribution nt Popul | ı of | | | 0 0 0 0 0 0 0 | | | | Dist | ical Gro ribution t Popul | ı of | | | 0 0 0 0 0 0 | |
| See page 89 for an explanation of t | erms. | Rate | erval of Risk | | | e Programs | on or Sample | | sted Rate | erval of sted Rate | Rate | erval of Risk | | | e Programs | on or Sample | | sted Rate | terval of sted Rate |
| PHYSICIAN CLINIC NAME | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non-Risk Adjusted Rate | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non-Risk Adjusted Rate |
| Overall Minnesota Clinic Average | | 72% | 69–74% | 20% | 76% | 4% | | | 72% | 69–74% | 53% | 50-55% | 20% | 77% | 3% | | | 53% | 50-55% |
| BYRON | | | | | | | 9 0 9 9 9 | | • | | | | | | | | | • | |
| Olmsted Medical Center | Olmsted Medical Center | 56% | 32%-81% | 6% | 85% | 9% | Sample | 79 | 55% | 30%-77% | * | * | * | * | * | * | * | * | * |
| CALEDONIA | | | | | | | | | | | | | | | | | | | |
| Mayo Health System-Franciscan Skem | p Mayo Health System | 72% | 61%-82% | 5% | 89% | 7% | Sample | 293 | 74% | 63%-82% | 44% | 32%-56% | 5% | 89% | 7% | Sample | 293 | 41% | 31%-53% |
| CANBY | | | | | | | 9 9 0 0 0 0 0 0 0 0 9 9 | | | | | | | | | | | | |
| Sanford Clinic Canby | Sanford Clinic | 77% | 64%-89% | 0% | 92% | 8% | Sample | 94 | 76% | 59%-88% | * | * | * | * | * | * | * | * | * |
| CANNON FALLS | | | | | | | · · · · · · · · · · · · · · · · · · · | | | | | | | | | | | | |
| Mayo Health System- Cannon Falls Medical Center | Mayo Health System | 72% | 61%-82% | 5% | 89% | 7% | Sample | 293 | 74% | 63%-82% | 44% | 32%-56% | 5% | 89% | 7% | Sample | 293 | 41% | 31%-53% |
| CHATFIELD | | | | | | | • • • | | | | | | | | | | | • | |
| Olmsted Medical Center | Olmsted Medical Center | 56% | 32%-81% | 6% | 85% | 9% | Sample | 79 | 55% | 30%-77% | * | * | * | * | * | * | * | * | * |
| CLARA CITY | | | | | | | ? • • • • • • • • • • • • • • • • • • • | | " | | | | · | | | | | * • • • • • • • • • • • • • • • • • • • | |
| Clara City Clinic | Chippewa County Montevideo Hospital & Medical Clinic | 43% | 2%-83% | 7% | 87% | 6% | Sample | 97 | 39% | 12%-75% | 15% | 6%-24% | 7% | 87% | 6% | Sample | 97 | 7% | 2%-21% |
| CLARKFIELD | | | | | | | | | | | | | | | | | | | |
| Clarkfield Clinic | Chippewa County Montevideo Hospital & Medical Clinic | 43% | 2%-83% | 7% | 87% | 6% | Sample | 97 | 39% | 12%-75% | 15% | 6%-24% | 7% | 87% | 6% | Sample | 97 | 7% | 2%-21% |
| DASSEL | | | | | | | 0 | | | | | | | | | , | | | |
| Hutchinson Area Health Care- Dassel Medical Center | Hutchinson Area Health Care | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |

^{*} Sufficient data not available.

| Quality of | | | C | olorec | tal Ca | ncer | Scree | ning | | | | Ca | ancer (| Comb | ined | Screen | ing | | |
|--|---------------------------------------|--------------------|--|---|------------------------------------|-------------------------|----------------------------|-------------|------------------------|--|--------------------|--|----------|----------------------------------|-------------------------|----------------------------|-------------|---------------------------------------|--|
| Preventive Ca | are | | | Dist | lical Gro tribution nt Popul | ı of | | | | | | | Dist | ical Gro ribution it Popul | of | | | | |
| See page 89 for an explanation of t | terms. | tate | erval of Risk | 9 | | Programs | n or Sample | | ted Rate | erval of ted Rate | tate | erval of Risk | | | Programs | n or Sample | | ted Rate | erval of ted Rate |
| PHYSICIAN CLINIC NAME | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non-Risk Adjusted Rate | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non-Risk Adjusted Rate |
| Overall Minnesota Clinic Average | | 72% | 69–74% | 20% | 76% | 4% | | | 72% | 69–74% | 53% | 50-55% | 20% | 77% | 3% | | | 53% | 50–55% |
| Meeker Memorial Clinic | Meeker Memorial Clinic | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| DAWSON | | | | | | | | | | | | | | | | | | 0 0 0 0 | |
| Dawson Clinic | Dawson Clinic | 43% | 2%-83% | 7% | 87% | 6% | Sample | 97 | 39% | 12%-75% | 15% | 6%-24% | 7% | 87% | 6% | Sample | 97 | 7% | 2%-21% |
| EDEN VALLEY | | | | | | | , | | , | | | | | | | | | , | |
| Paynesville Eden Valley Medical Clinic | Paynesville Area Health System | * | * | * | * | * | * * | * | * | * | * | * | * | * | * | * | * | * | * |
| EDGERTON | | | | , | | | , | | | | | | | | | | | , | |
| Edgerton Family Clinic Avera | Avera Health/Avera Tri-State | 67% | 51%-82% | 0% | 89% | 11% | Sample | 87 | 64% | 45%-79% | 30% | 16%-44% | 0% | 92% | 8% | Sample | 70 | 22% | 9%-41% |
| FAIRFAX | | | | | | | | | | | | | | | | | | | |
| Fairfax Medical Clinic | · · · · · · · · · · · · · · · · · · · | * | * | * | * | * | * | * | * | * | * | * | * * | * | * | * | * | * | * |
| FAIRMONT | | | | | | | | | | | | | | | | | | - - - - - - | |
| Braaten Medical Clinic | | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Dulcimer Medical Center | Dulcimer Medical Center | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Mayo Health System- Fairmont Medical Center | Mayo Health System | 72% | 61%-82% | 5% | 89% | 7% | Sample | 293 | 74% | 63%-82% | 44% | 32%-56% | 5% | 89% | 7% | Sample | 293 | 41% | 31%-53% |
| Smart Clinic | Smart Clinic | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| FARIBAULT | | | | | | | | | | | | | | | | | | • • • • • • • • • • • • • • • • • • • | |
| Allina Medical Clinic | Allina Medical Clinic | 72% | 66%-78% | 21% | 77% | 2% | Sample | 409 | 72% | 66%-78% | 45% | 39%-52% | 21% | 77% | 2% | Sample | 409 | 45% | 39%-52% |

^{*} Sufficient data not available.

| Quality of | | | C | olorec | tal Ca | ncer | Scree | ning | | | | Ca | ancer (| Combi | ned : | Screen | ing | | |
|---|--------------------------------------|--------------------|--|---------------------------------------|-----------------------------------|-------------------------|----------------------------|-------------|------------------------|--|--------------------|--|---|---------------------------------|-------------------------|---------------------|-------------|------------------------|--|
| Preventive Ca | are | | | Dist | lical Gro ribution nt Popul | ı of | | | | | | | Distr | ical Gro ibution t Popula | of | | | | |
| See page 89 for an explanation of | terms. | Rate | terval of Risk | | | e Programs | on or Sample | | sted Rate | terval of sted Rate | Rate | terval of Risk | | | e Programs | on or Sample | | sted Rate | terval of sted Rate |
| PHYSICIAN CLINIC NAME | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non-Risk Adjusted Rate | Risk Adjusted Rate | Confidence Interval o Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non-Risk Adjusted Rate |
| Overall Minnesota Clinic Average | | 72% | 69–74% | 20% | 76% | 4% | | | 72% | 69–74% | 53% | 50–55% | 20% | 77% | 3% | | | 53% | 50–55% |
| Mayo Health System- Cannon Valley Clinic | Mayo Health System | 72% | 61%-82% | 5% | 89% | 7% | Sample | 293 | 74% | 63%-82% | 44% | 32%-56% | 5% | 89% | 7% | Sample | 293 | 41% | 31%-53% |
| FULDA | | | | | | | | | | | | | | | | | | | |
| Avera Worthington Specialty Clinics | Avera Health/Avera Tri-State | 67% | 51%-82% | 0% | 89% | 11% | Sample | 87 | 64% | 45%-79% | 30% | 16%-44% | 0% | 92% | 8% | Sample | 70 | 22% | 9%-41% |
| GLENCOE | | | | | | | | | | | | | | | | | | | |
| Glencoe Regional Health Services | Glencoe Regional Health Services | 43% | 2%-83% | 7% | 87% | 6% | Sample | 97 | 39% | 12%-75% | 15% | 6%-24% | 7% | 87% | 6% | Sample | 97 | 7% | 2%-21% |
| GRACEVILLE | | | | , | | | | | , | | | | ; · · · · · · · · · · · · · · · · · · · | | | | | | |
| Graceville Health Center Clinic | Graceville Health Center Clinic | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| GRANITE FALLS | | | | 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | | | | | | | | | | | | | | | |
| Affilliated Community Medical Centers | Affiliated Community Medical Centers | 64% | 12%-100% | 5% | 88% | 7% | Sample | 89 | 65% | 26%-91% | 64% | 11%-100% | 5% | 89% | 6% | Sample | 79 | 65% | 26%-91% |
| HARMONY | | | | 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | | | | | | | | | | | | | | | |
| Gundersen Lutheran | Gundersen Clinic | 80% | 71%-89% | 0% | 91% | 9% | Sample | 67 | 79% | 66%-88% | * | * | * | * | * | * | * | * | * |
| HECTOR | | | | * | | | | | | | | | | | | | | | |
| Renville County Hospital and Clinics | Renville County Hospital and Clinics | 43% | 2%-83% | 7% | 87% | 6% | Sample | 97 | 39% | 12%-75% | 15% | 6%-24% | 7% | 87% | 6% | Sample | 97 | 7% | 2%-21% |
| HENDRICKS | | | | | | | | | | | | | | | | | | | |
| Hendricks Clinic P.A. | Hendricks Clinic | 43% | 2%-83% | 7% | 87% | 6% | Sample | 97 | 39% | 12%-75% | 15% | 6%-24% | 7% | 87% | 6% | Sample | 97 | 7% | 2%-21% |
| • | | | | * | | | | | | | | | | | | | | | |

^{*} Sufficient data not available.

| Quality of | | | C | olorec | tal Ca | ncer | Scree | ning | | | | Ca | ancer (| Comb | ined | Screen | ing | | |
|--|---------------------------------------|--------------------|--|---------------------------------------|-----------------------------------|-------------------------|---|-------------|---------------------------------------|--|--------------------|--|----------|----------------------------------|-------------------------|---------------------|-------------|---|--|
| Preventive Ca | ıre | | | Dist | lical Gro ribution nt Popul | ı of | | | | | | | Dist | ical Gro ribution It Popul | of | | | | |
| See page 89 for an explanation of t | erms. | tate | erval of Risk | | | Programs | n or Sample | | ted Rate | erval of ted Rate | late | erval of Risk | | | Programs | n or Sample | | ted Rate | erval of ted Rate |
| PHYSICIAN CLINIC NAME | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non-Risk Adjusted Rate | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non-Risk Adjusted Rate |
| Overall Minnesota Clinic Average | | 72% | 69–74% | 20% | 76% | 4% | | | 72% | 69–74% | 53% | 50-55% | 20% | 77% | 3% | | | 53% | 50-55% |
| HOUSTON | | | | | | | • | | | | | | | | | | | | |
| Gunderson Lutheran | Gundersen Clinic | 80% | 71%-89% | 0% | 91% | 9% | Sample | 67 | 79% | 66%-88% | * | * | * | * | * | * | * | * | * |
| HUTCHINSON | | | | , | | | 9 * * * * * * * * * * * * * * * * * * * | | , | | | | | | | | | •• • • • • • • • • • • • • • • • • • • | |
| Hutchinson Medical Center | Hutchinson Medical Center | 65% | 8%-100% | 7% | 90% | 2% | Sample | 66 | 64% | 19%-93% | 31% | 21%-40% | 7% | 90% | 2% | Sample | 66 | 24% | 15%-36% |
| IVANHOE | | | | 5 | | | 9 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | | ** | | | | | | | | | ** | |
| Ivanhoe Clinic | | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| JACKSON | | | | | | | | | | | | | | | | | | | |
| Sacred Heart Mercy Health Care Center | Sacred Heart Mercy Health Care Center | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Sanford Clinic Jackson | Sanford Clinic | 77% | 64%-89% | 0% | 92% | 8% | Sample | 94 | 76% | 59%-88% | * | * | * | * | * | * | * | * | * |
| KASSON | | | | | | | | | · · · · · · · · · · · · · · · · · · · | | | | | | | | | · · · · · · · · · · · · · · · · · · · | |
| Mayo Clinic | Mayo Clinic | 91% | 83%-99% | 6% | 84% | 10% | Sample | 101 | 92% | 78%-97% | 65% | 50%-81% | 6% | 84% | 10% | Sample | 101 | 63% | 44%-79% |
| LA CRESCENT | | | | · · · · · · · · · · · · · · · · · · · | | | 9 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | | * | | | | * | | | | • • • • • • | * | |
| Mayo Health System - Franciscan Skemp | Mayo Health System | 72% | 61%-82% | 5% | 89% | 7% | Sample | 293 | 74% | 63%-82% | 44% | 32%-56% | 5% | 89% | 7% | Sample | 293 | 41% | 31%-53% |
| LAKE BENTON | | | | | | | | | | | | | | | | | | | |
| Lake Benton Healthcare Center | Avera Health/Avera Tri-State | 67% | 51%-82% | 0% | 89% | 11% | Sample | 87 | 64% | 45%-79% | 30% | 16%-44% | 0% | 92% | 8% | Sample | 70 | 22% | 9%-41% |
| | | | | | | | - 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | | | | | | | | | | | - 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | |

^{*} Sufficient data not available.

| Quality of | | | C | olorec | tal Ca | ncer | Scree | ning | | | | Ca | ncer (| Combi | ined : | Screen | ing | | |
|--|--------------------------------------|--------------------|--|----------|-----------------------------------|-------------------------|---------------------------------------|-------------|---------------------------------------|--|--------------------|--|----------|----------------------------------|-------------------------|----------------------------|-------------|--|--|
| Preventive Ca | are | | | Dist | lical Gro ribution nt Popul | ı of | | | 0 | | | | Dist | ical Gro ribution t Popula | of | | | 0 | |
| See page 89 for an explanation of t | terms. | Rate | terval of Risk | | | e Programs | on or Sample | | sted Rate | terval of sted Rate | Rate | terval of Risk | | | e Programs | on or Sample | | sted Rate | terval of sted Rate |
| PHYSICIAN CLINIC NAME | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non-Risk Adjusted Rate | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non-Risk Adjusted Rate |
| Overall Minnesota Clinic Average | | 72% | 69–74% | 20% | 76% | 4% | | | 72% | 69–74% | 53% | 50–55% | 20% | 77% | 3% | | | 53% | 50–55% |
| LAKE CITY | | | | | | | | | * * * * * * * * * * * * * * * * * * * | | | | | | | | | ************************************** | |
| Mayo Health System-Lake City | Mayo Health System | 72% | 61%-82% | 5% | 89% | 7% | Sample | 293 | 74% | 63%-82% | 44% | 32%-56% | 5% | 89% | 7% | Sample | 293 | 41% | 31%-53% |
| LAKE CRYSTAL | | | | | | | | | | | | | | | | | | | |
| Mankato Clinic | Mankato Clinic | 64% | 42%-85% | 2% | 93% | 5% | Sample | 81 | 60% | 35%-81% | * | * | * | * | * | * | * | * | * |
| LAKEFIELD | | | | | | | | | | | | | | | | | | · · · · · · · · · · · · · · · · · · · | |
| Avera Worthington Specialty Clinics | Avera Health/Avera Tri-State | 67% | 51%-82% | 0% | 89% | 11% | Sample | 87 | 64% | 45%-79% | 30% | 16%-44% | 0% | 92% | 8% | Sample | 70 | 22% | 9%-41% |
| Sanford Clinic Lakefield | Sanford Clinic | 77% | 64%-89% | 0% | 92% | 8% | Sample | 94 | 76% | 59%-88% | * | * | * | * | * | * | * | * | * |
| LE SUEUR | | | | | | | | | | | | | | | | | | | |
| Mayo Health System- Immanuel St. Joseph | Mayo Health System | 72% | 61%-82% | 5% | 89% | 7% | Sample | 293 | 74% | 63%-82% | 44% | 32%-56% | 5% | 89% | 7% | Sample | 293 | 41% | 31%-53% |
| Southern Metro Medical Clinics | Southern Metro Medical Clinics | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| LEWISTON | | | | | | | | | | | | | | | | | | • • • • • • • • • • • • • • • • • • • | |
| Winona Health | Winona Health | 66% | 52%-79% | 2% | 85% | 14% | Sample | 93 | 60% | 44%-74% | * | * | * | * | * | * | * | * | * |
| LITCHFIELD | | | | | | | , , , , , , , , , , , , , , , , , , , | | | | | | | | | | | | |
| Affilliated Community Medical Centers- Litchfield Clinic (East) | Affiliated Community Medical Centers | 64% | 12%-100% | 5% | 88% | 7% | Sample | 89 | 65% | 26%-91% | 64% | 11%-100% | 5% | 89% | 6% | Sample | 79 | 65% | 26%-91% |
| Affilliated Community Medical Centers- Litchfield Clinic (West) | Affiliated Community Medical Centers | 64% | 12%-100% | 5% | 88% | 7% | Sample | 89 | 65% | 26%-91% | 64% | 11%-100% | 5% | 89% | 6% | Sample | 79 | 65% | 26%-91% |

^{*} Sufficient data not available.

| Quality of | | | C | olorec | tal Ca | ncer | Scree | ning | | | | Ca | ancer (| Comb | ined | Screen | ing | | |
|---|--|--------------------|--|----------|------------------------------------|-------------------------|---|-------------|-------------------------------|--|--------------------|--|----------|---------------------------------|-------------------------|------------------|-------------|------------------------|--|
| Preventive Ca | ıre | | J | Dist | lical Gro tribution nt Popul | of | _ | | | | | | Dist | ical Gro ribution t Popul | of | | | | |
| See page 89 for an explanation of to | erms. | Rate | erval of Risk | | | e Programs | n or Sample | | sted Rate | erval of sted Rate | Rate | erval of Risk | | | e Programs | n or Sample | | sted Rate | erval of sted Rate |
| PHYSICIAN CLINIC NAME | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non-Risk Adjusted Rate | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non-Risk Adjusted Rate |
| Overall Minnesota Clinic Average | | 72% | 69–74% | 20% | 76% | 4% | | | 72% | 69–74% | 53% | 50–55% | 20% | 77% | 3% | | | 53% | 50–55% |
| LONSDALE | | | | | | | | | | | | | | | | | | | |
| FamilyHealth Medical Clinic | FamilyHealth Medical Clinics | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| LUVERNE | | | | <i>,</i> | | | , | | ,• • • • • • • • | | | | | | | | | | |
| Sanford Clinic | Sanford Clinic | 77% | 64%-89% | 0% | 92% | 8% | Sample | 94 | 76% | 59%-88% | * | * | * | * | * | * | * | * | * |
| MABEL | | | | · | | | 9 19 0 0 0 0 0 0 0 0 1 0 0 | | · · · · · · · · · · · · · · · | | | | | | | | | | |
| Winneshiek Medical Center | Winneshiek Medical Center-Mabel Clinic | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| MADELIA | | | | | | | | | | | | | | | | | | | |
| Mayo Health System- Immanuel St. Joseph | Mayo Health System | 72% | 61%-82% | 5% | 89% | 7% | Sample | 293 | 74% | 63%-82% | 44% | 32%-56% | 5% | 89% | 7% | Sample | 293 | 41% | 31%-53% |
| MADISON | | | | | | | • • • | | | | | | | | | | | | |
| Lac Qui Parle Clinic | Lac Qui Parle Clinic | 43% | 2%-83% | 7% | 87% | 6% | Sample | 97 | 39% | 12%-75% | 15% | 6%-24% | 7% | 87% | 6% | Sample | 97 | 7% | 2%-21% |
| MANKATO | | | | % | | | " • • • • • • • • • • • • • • • • • • • | | ** | | | | | | | | | | |
| Between the Bridges Health Center | | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Mayo Health System-Immanuel St. Joseph- Mankato Eastridge | Mayo Health System | 72% | 61%-82% | 5% | 89% | 7% | Sample | 293 | 74% | 63%-82% | 44% | 32%-56% | 5% | 89% | 7% | Sample | 293 | 41% | 31%-53% |
| Mayo Health System-Immanuel St. Joseph- Mankato Specialty Clinic | Mayo Health System | 72% | 61%-82% | 5% | 89% | 7% | Sample | 293 | 74% | 63%-82% | 44% | 32%-56% | 5% | 89% | 7% | Sample | 293 | 41% | 31%-53% |
| Mankato Clinic- Main Street | Mankato Clinic | 64% | 42%-85% | 2% | 93% | 5% | Sample | 81 | 60% | 35%-81% | * | * | * | * | * | * | * | * | * |
| Mankato Clinic- Wickersham Campus | Mankato Clinic | 64% | 42%-85% | 2% | 93% | 5% | Sample | 81 | 60% | 35%-81% | * | * | * | * | * | * | * | * | * |

^{*} Sufficient data not available.

| Quality of | | | С | olorec | tal Ca | ancer | Scree | ning | | | | Ca | ncer (| Comb | ined | Screen | ing | | |
|--|---|---|--|---------------------------------------|----------------------------------|-------------------------|---------------------------------------|-------------|------------------------|--|--------------------|--|----------|----------------------------------|-------------------------|----------------------------|-------------|------------------------|--|
| Preventive Ca | are | | | Dist | dical Gr tribution nt Popu | n of | | | | | | | Dist | ical Gro ribution It Popul | ı of | | | | |
| See page 89 for an explanation of t | terms. | Rate | erval of Risk | | | e Programs | on or Sample | | sted Rate | erval of sted Rate | Rate | erval of Risk | | | e Programs | on or Sample | | sted Rate | erval of sted Rate |
| PHYSICIAN CLINIC NAME | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non-Risk Adjusted Rate | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non-Risk Adjusted Rate |
| Overall Minnesota Clinic Average | | 72% | 69–74% | 20% | 76% | 4% | | | 72% | 69–74% | 53% | 50-55% | 20% | 77% | 3% | | | 53% | 50–55% |
| Open Door Health Center | Open Door Health Center | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| MAPLETON | | | | | | | | | | | | | | | | | | | |
| Mankato Clinic | Mankato Clinic | 64% | 42%-85% | 2% | 93% | 5% | Sample | 81 | 60% | 35%-81% | * | * | * | * | * | * | * | * | * |
| MARSHALL | | | | | | | | | | | | | | | | | | | |
| Affiliated Community Medical Centers- Bruce Street | Affiliated Community Medical Centers | 64% | 12%-100% | 5% | 88% | 7% | Sample | 89 | 65% | 26%-91% | 64% | 11%-100% | 5% | 89% | 6% | Sample | 79 | 65% | 26%-91% |
| Affilliated Community Medical Centers- Marshall Clinic- Market Street | Affiliated Community Medical Centers | 64% | 12%-100% | 5% | 88% | 7% | Sample | 89 | 65% | 26%-91% | 64% | 11%-100% | 5% | 89% | 6% | Sample | 79 | 65% | 26%-91% |
| Avera Marshall Specialty Clinic | Avera Health/Avera Tri-State | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A |
| MILAN | | • | ******* | • | | | | | | | | | | | | | | | |
| Milan Clinic | Chippewa County Montevideo Hospital & Medical Clinic | 43% | 2%-83% | 7% | 87% | 6% | Sample | 97 | 39% | 12%-75% | 15% | 6%-24% | 7% | 87% | 6% | Sample | 97 | 7% | 2%-21% |
| MONTEVIDEO | | | | • | | | | | | | | | | | | | | | |
| Chippewa County Montevideo Hospital & Medical Clinic | Chippewa County Montevideo Hospital & Medical Clinic | 43% | 2%-83% | 7% | 87% | 6% | Sample | 97 | 39% | 12%-75% | 15% | 6%-24% | 7% | 87% | 6% | Sample | 97 | 7% | 2%-21% |
| MONTGOMERY | | | | * * * * * * * * * * * * * * * * * * * | | | | | | | | | | | | | | | |
| Southern Metro Medical Clinics- Montgomery Medical Clinic | Southern Metro Medical Clinics | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| MOUNTAIN LAKE | | | | • | | | | | | | | | | | | | | | |
| Sanford Clinic | Sanford Clinic | 77% | 64%-89% | 0% | 92% | 8% | Sample | 94 | 76% | 59%-88% | * | * | * | * | * | * | * | * | * |
| | : | | | | | | · · · · · · · · · · · · · · · · · · · | | | | | | | | | | | | |

^{*} Sufficient data not available.

| Quality of | | | Co | olorec | tal Ca | ncer | Scree | ning | | | | Ca | ancer (| Comb | ined | Screen | ing | | |
|--|--------------------------------------|--------------------|--|---------------------------------------|------------------------------------|-------------------------|----------------------------|-------------|------------------------|--|--------------------|--|-------------------------------------|----------------------------------|-------------------------|---------------------|-------------|------------------------|--|
| Preventive Ca | ire | | | Dist | lical Gro tribution nt Popul | ı of | | | | | | | Dist | ical Gro ribution it Popul | of | | | | |
| See page 89 for an explanation of to | erms. | Rate | terval of Risk | | | re Programs | Total Population or Sample | | sted Rate | terval of sted Rate | Rate | terval of Risk | | | re Programs | on or Sample | | sted Rate | terval of sted Rate |
| PHYSICIAN CLINIC NAME | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Populati | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non-Risk Adjusted Rate | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non-Risk Adjusted Rate |
| Overall Minnesota Clinic Average | | 72% | 69–74% | 20% | 76% | 4% | | | 72% | 69–74% | 53% | 50-55% | 20% | 77% | 3% | | | 53% | 50–55% |
| NEW LONDON | | | | 9 0 0 0 0 | | | 9 0 0 0 0 | | | | | | 9 0 0 0 0 | | | | | | |
| Affilliated Community Medical Centers | Affiliated Community Medical Centers | 64% | 12%-100% | 5% | 88% | 7% | Sample | 89 | 65% | 26%-91% | 64% | 11%-100% | 5% | 89% | 6% | Sample | 79 | 65% | 26%-91% |
| NEW PRAGUE | | | | , | | | , | | | | | | | | | | | | |
| Parkview Medical Clinic | Parkview Medical Clinic | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| NEW ULM | | | | 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | | | | | | | | | ** | | | | | | |
| Allina Health System- New Ulm Medical Center | Allina Health System | 43% | 33%-53% | 21% | 75% | 4% | Sample | 117 | 43% | 32%-56% | 36% | 26%-46% | 21% | 76% | 3% | Sample | 105 | 36% | 26%-48% |
| NORTH MANKATO | | | | 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | | | | | | | | | | | | | | | |
| Mayo Health System-Immanuel St. Joseph - Mankato Northridge | Mayo Health System | 72% | 61%-82% | 5% | 89% | 7% | Sample | 293 | 74% | 63%-82% | 44% | 32%-56% | 5% | 89% | 7% | Sample | 293 | 41% | 31%-53% |
| Mankato Clinic | Mankato Clinic | 64% | 42%-85% | 2% | 93% | 5% | Sample | 81 | 60% | 35%-81% | * | * | * | * | * | * | * | * | * |
| NORTHFIELD | | | | | | | | | | | | | | | | | | | |
| Allina Medical Clinic | Allina Medical Clinic | 72% | 66%-78% | 21% | 77% | 2% | Sample | 409 | 72% | 66%-78% | 45% | 39%-52% | 21% | 77% | 2% | Sample | 409 | 45% | 39%-52% |
| OLIVIA | | | | • • • • • • • • • • • • • • • • • • • | | | | | | | | | 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | | | | | | |
| Renville County Hospital and Clinics | Renville County Hospital and Clinics | 43% | 2%-83% | 7% | 87% | 6% | Sample | 97 | 39% | 12%-75% | 15% | 6%-24% | 7% | 87% | 6% | Sample | 97 | 7% | 2%-21% |
| ORTONVILLE | | | | | | | | | | | | | | | | | | | |
| Northside Medical Clinic | Northside Medical Clinic | 43% | 2%-83% | 7% | 87% | 6% | Sample | 97 | 39% | 12%-75% | 15% | 6%-24% | 7% | 87% | 6% | Sample | 97 | 7% | 2%-21% |
| | | | | | | | | | | | | | | | | | | | |

^{*} Sufficient data not available.

| Quality of | | | C | olorec | tal Ca | ncer | Scree | ning | | | | Ca | ncer (| Combi | ined : | Screen | ing | | |
|--|--------------------------------------|--------------------|--|---------------------------------------|-----------------------------------|-------------------------|----------------------------|-------------|------------------------|--|--------------------|--|----------|----------------------------------|-------------------------|----------------------------|-------------|---|--|
| Preventive Ca | re | | | Dist | lical Gro ribution nt Popul | ı of | | | | | | | Distr | ical Gro ribution t Popula | of | | | 2 | |
| See page 89 for an explanation of te | erms. | Rate | erval of Risk | | | e Programs | ın or Sample | | sted Rate | erval of sted Rate | Rate | erval of Risk | | | e Programs | n or Sample | | sted Rate | erval of sted Rate |
| PHYSICIAN CLINIC NAME | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non-Risk Adjusted Rate | Risk Adjusted Rate | Confidence Interval o Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non-Risk Adjusted Rate |
| Overall Minnesota Clinic Average | | 72% | 69–74% | 20% | 76% | 4% | | | 72% | 69–74% | 53% | 50-55% | 20% | 77% | 3% | | | 53% | 50–55% |
| OWATONNA | | | | | | | | | • | | | | | | | | |)) 0 0 | |
| Mayo Health System-Owatonna Clinic | Mayo Health System | 72% | 61%-82% | 5% | 89% | 7% | Sample | 293 | 74% | 63%-82% | 44% | 32%-56% | 5% | 89% | 7% | Sample | 293 | 41% | 31%-53% |
| PINE ISLAND | | | | | | | | | | | | | | | | | | ; | |
| Olmsted Medical Center | Olmsted Medical Center | 56% | 32%-81% | 6% | 85% | 9% | Sample | 79 | 55% | 30%-77% | * | * | * | * | * | * | * | * | * |
| PIPESTONE | | | | | | | | | | | | | | | | | | | |
| Avera- Pipestone County Medical Center | Avera Health/Avera Tri-State | 67% | 51%-82% | 0% | 89% | 11% | Sample | 87 | 64% | 45%-79% | 30% | 16%-44% | 0% | 92% | 8% | Sample | 70 | 22% | 9%-41% |
| PLAINVIEW | | | | | | | | | | | | | | | | | | | |
| Olmsted Medical Center | Olmsted Medical Center | 56% | 32%-81% | 6% | 85% | 9% | Sample | 79 | 55% | 30%-77% | * | * | * | * | * | * | * | * | * |
| PRESTON | | | | | | | | | | | | | | | | | | 1 | |
| Olmsted Medical Center | Olmsted Medical Center | 56% | 32%-81% | 6% | 85% | 9% | Sample | 79 | 55% | 30%-77% | * | * | * | * | * | * | * | * | * |
| RED WING | | | | · · · · · · · · · · · · · · · · · · · | | | | | | | | | | | | | | 1 | |
| Fairview Red Wing Medical Center | Fairview Health Services | 79% | 72%-86% | 30% | 67% | 3% | Sample | 403 | 78% | 72%-84% | 58% | 48%-67% | 30% | 67% | 3% | Sample | 403 | 59% | 51%-68% |
| REDWOOD FALLS | | | | | | | | | | | | | | | | | | | |
| Affilliated Community Medical Centers | Affiliated Community Medical Centers | 64% | 12%-100% | 5% | 88% | 7% | Sample | 89 | 65% | 26%-91% | 64% | 11%-100% | 5% | 89% | 6% | Sample | 79 | 65% | 26%-91% |
| RENVILLE | | | | | | | | | | | | | | | | | | 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | |
| Renville County Hospital and Clinics | Renville County Hospital and Clinics | 43% | 2%-83% | 7% | 87% | 6% | Sample | 97 | 39% | 12%-75% | 15% | 6%-24% | 7% | 87% | 6% | Sample | 97 | 7% | 2%-21% |

^{*} Sufficient data not available.

| Quality of | | | Co | olorec | tal Ca | ncer | Scree | ning | | | | Ca | ncer (| Comb | ined | Screen | ing | | |
|--|---------------------------|--------------------|--|----------|------------------------------------|-------------------------|----------------------------|-------------|------------------------|--|--------------------|--|----------|---------------------------------|-------------------------|---------------------|-------------|------------------------|--|
| Preventive Ca | are | | | Dist | lical Gro tribution nt Popul | ı of | | | | | | | Dist | ical Gro ribution t Popul | of | | | | |
| See page 89 for an explanation of | terms. | Rate | Confidence Interval of Risk Adjusted Rate | | | re Programs | Total Population or Sample | | isted Rate | iterval of isted Rate | Rate | Confidence Interval of Risk Adjusted Rate | | | re Programs | on or Sample | | ısted Rate | iterval of isted Rate |
| PHYSICIAN CLINIC NAME | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence In Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Populati | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non-Risk Adjusted Rate | Risk Adjusted Rate | Confidence In Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non-Risk Adjusted Rate |
| Overall Minnesota Clinic Average | | 72% | 69–74% | 20% | 76% | 4% | | | 72% | 69–74% | 53% | 50–55% | 20% | 77% | 3% | | | 53% | 50–55% |
| ROCHESTER | | | | 9 | | | 9 0 9 0 0 | | | | | | | | | | | | |
| Mayo Clinic- Baldwin Building, Family Medicine | Mayo Clinic | 91% | 83%-99% | 6% | 84% | 10% | Sample | 101 | 92% | 78%-97% | 65% | 50%-81% | 6% | 84% | 10% | Sample | 101 | 63% | 44%-79% |
| Mayo Clinic- Baldwin Building, Primary Care Internal Medicine | Mayo Clinic | 91% | 83%-99% | 6% | 84% | 10% | Sample | 101 | 92% | 78%-97% | 65% | 50%-81% | 6% | 84% | 10% | Sample | 101 | 63% | 44%-79% |
| Mayo Clinic- Mayo Building | Mayo Clinic | 91% | 83%-99% | 6% | 84% | 10% | Sample | 101 | 92% | 78%-97% | 65% | 50%-81% | 6% | 84% | 10% | Sample | 101 | 63% | 44%-79% |
| Mayo Clinic- Northeast | Mayo Clinic | 91% | 83%-99% | 6% | 84% | 10% | Sample | 101 | 92% | 78%-97% | 65% | 50%-81% | 6% | 84% | 10% | Sample | 101 | 63% | 44%-79% |
| Mayo Clinic- Northwest | Mayo Clinic | 91% | 83%-99% | 6% | 84% | 10% | Sample | 101 | 92% | 78%-97% | 65% | 50%-81% | 6% | 84% | 10% | Sample | 101 | 63% | 44%-79% |
| Olmsted Medical Center- Rochester Northwest | Olmsted Medical Center | 56% | 32%-81% | 6% | 85% | 9% | Sample | 79 | 55% | 30%-77% | * | * | * | * | * | * | * | * | * |
| Olmsted Medical Center- Rochester Southeast | Olmsted Medical Center | 56% | 32%-81% | 6% | 85% | 9% | Sample | 79 | 55% | 30%-77% | * | * | * | * | * | * | * | * | * |
| Rochester Family Medicine Clinic | | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| RUSHFORD | | | | | | | | | | | | | | | | | | | |
| Winona Health | Winona Health | 66% | 52%-79% | 2% | 85% | 14% | Sample | 93 | 60% | 44%-74% | * | * | * | * | * | * | * | * | * |
| SLAYTON | | | | 5 | | | | | | | | | | | | | | | |
| Murray County Clinic | Murray County Clinic | 43% | 2%-83% | 7% | 87% | 6% | Sample | 97 | 39% | 12%-75% | 15% | 6%-24% | 7% | 87% | 6% | Sample | 97 | 7% | 2%-21% |
| SLEEPY EYE | | | | | | | | | | | | | | | | | | | |
| Sleepy Eye Medical Center | Sleepy Eye Medical Center | 43% | 2%-83% | 7% | 87% | 6% | Sample | 97 | 39% | 12%-75% | 15% | 6%-24% | 7% | 87% | 6% | Sample | 97 | 7% | 2%-21% |
| | | | | | | | • | | | | | | | | | | | | |

^{*} Sufficient data not available.

| Quality of | | | C | olorec | tal Ca | ncer | Scree | ning | | | | Ca | ncer (| Combi | ined : | Screen | ing | | |
|--|--------------------------------|--------------------|--|---------------------------------------|-----------------------------------|-------------------------|----------------------------|-------------|------------------------|--|--------------------|--|----------|----------------------------------|-------------------------|----------------------------|-------------|---------------------------------------|--|
| Preventive Ca | ıre | | | Dist | lical Gro ribution nt Popul | ı of | | | | | | | Distr | ical Gro ribution t Popula | of | | | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | |
| See page 89 for an explanation of t | erms. | Rate | erval of Risk | | | e Programs | on or Sample | | sted Rate | terval of sted Rate | Rate | erval of Risk | | | e Programs | on or Sample | | sted Rate | erval of sted Rate |
| PHYSICIAN CLINIC NAME | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non-Risk Adjusted Rate | Risk Adjusted Rate | Confidence Interval c Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non-Risk Adjusted Rate |
| Overall Minnesota Clinic Average | | 72% | 69–74% | 20% | 76% | 4% | | | 72% | 69–74% | 53% | 50–55% | 20% | 77% | 3% | | | 53% | 50-55% |
| SPICER | | | | | | | | | | | | | | | | | | , | |
| Paynesville Green Lake Medical Clinic | Paynesville Area Health System | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| SPRING GROVE | | | | · | | | | | | | | | | | | | | 1 | , |
| Gundersen Lutheran | Gundersen Clinic | 80% | 71%-89% | 0% | 91% | 9% | Sample | 67 | 79% | 66%-88% | * | * | * | * | * | * | * | * | * |
| SPRING VALLEY | | | | | | | | | | | | | | | | | | 1 0 0 0 0 0 0 0 0 | |
| Olmsted Medical Center | Olmsted Medical Center | 56% | 32%-81% | 6% | 85% | 9% | Sample | 79 | 55% | 30%-77% | * | * | * | * | * | * | * | * | * |
| SPRINGFIELD | | | | | | | | | | | | | | | | | | | |
| Mayo Health System-Immanuel St. Joseph | Mayo Health System | 72% | 61%-82% | 5% | 89% | 7% | Sample | 293 | 74% | 63%-82% | 44% | 32%-56% | 5% | 89% | 7% | Sample | 293 | 41% | 31%-53% |
| ST. CHARLES | | | | | | | | | | | | | | | | | | | |
| Olmsted Medical Center | Olmsted Medical Center | 56% | 32%-81% | 6% | 85% | 9% | Sample | 79 | 55% | 30%-77% | * | * | * | * | * | * | * | * | * |
| ST. JAMES | | | | · · · · · · · · · · · · · · · · · · · | | | | | | | | • • • • • • • • | | | | | | | |
| Mayo Health System-Immanuel St. Joseph | Mayo Health System | 72% | 61%-82% | 5% | 89% | 7% | Sample | 293 | 74% | 63%-82% | 44% | 32%-56% | 5% | 89% | 7% | Sample | 293 | 41% | 31%-53% |
| Moulton & Parsons MDs | | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| ST. PETER | | | | · · · · · · · · · · · · · · · · · · · | | | | | | | | | | | | | | , | |
| Mayo Health System-Immanuel St. Joseph | Mayo Health System | 72% | 61%-82% | 5% | 89% | 7% | Sample | 293 | 74% | 63%-82% | 44% | 32%-56% | 5% | 89% | 7% | Sample | 293 | 41% | 31%-53% |
| Mankato Clinic- Daniel's Health Center | Mankato Clinic | 64% | 42%-85% | 2% | 93% | 5% | Sample | 81 | 60% | 35%-81% | * | * | * | * | * | * | * | * | * |

^{*} Sufficient data not available.

| Quality of | | | C | olorec | tal Ca | ncer | Scree | ning | | | | Ca | ancer (| Comb | ined | Screen | ing | | |
|---|---------------------------------------|--------------------|--|--|------------------------------------|-------------------------|---|-------------|---------------------------------------|--|--------------------|--|---------------------------------------|----------------------------------|-------------------------|---|-------------|---------------------------------------|--|
| Preventive Ca | are | | | Dist | dical Gro tribution nt Popul | ı of | | | | | | | Dist | ical Gro ribution it Popul | of | | | | |
| See page 89 for an explanation of t | terms. | Rate . | erval of Risk | | | e Programs | ın or Sample | | ited Rate | erval of ited Rate | Rate . | erval of Risk | | | e Programs | n or Sample | | ted Rate | erval of ited Rate |
| PHYSICIAN CLINIC NAME | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non-Risk Adjusted Rate | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non-Risk Adjusted Rate |
| Overall Minnesota Clinic Average | | 72% | 69–74% | 20% | 76% | 4% | | | 72% | 69–74% | 53% | 50-55% | 20% | 77% | 3% | | | 53% | 50–55% |
| River's Edge Clinic | River's Edge Hospital & Clinic | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| STEWARTVILLE | | | | 6 9 9 9 | | | 9 9 9 9 | | | | | | | | | | | | |
| Olmsted Medical Center | Olmsted Medical Center | 56% | 32%-81% | 6% | 85% | 9% | Sample | 79 | 55% | 30%-77% | * | * | * | * | * | * | * | * | * |
| TRACY | | | | , | | | 9 * * * * * * * * * * * * * * * * * * * | | | | | | | | | | | | |
| Sanford Clinic Tracy/ Balaton/Walnut Grove | Sanford Clinic | 77% | 64%-89% | 0% | 92% | 8% | Sample | 94 | 76% | 59%-88% | * | * | * | * | * | * | * | * | * |
| TYLER | | | | <i>g</i> • • • • • • • • • • • • • • • • • • • | | | 9 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | | | | | | | | | , ° ° ° ° ° ° ° ° ° ° ° ° ° ° ° ° ° ° ° | | | |
| Tyler Medical Clinic | Avera Health/Avera Tri-State | 67% | 51%-82% | 0% | 89% | 11% | Sample | 87 | 64% | 45%-79% | 30% | 16%-44% | 0% | 92% | 8% | Sample | 70 | 22% | 9%-41% |
| WABASHA | | | | · · · · · · · · · · · · · · · · · · · | | | * * * * * * * * * * * * * * * * * * * | | · · · · · · · · · · · · · · · · · · · | | | | | | | | | | |
| Mayo Health System-Wabasha Clinic | Mayo Health System | 72% | 61%-82% | 5% | 89% | 7% | Sample | 293 | 74% | 63%-82% | 44% | 32%-56% | 5% | 89% | 7% | Sample | 293 | 41% | 31%-53% |
| WANAMINGO | | | | · · · · · · · · · · · · · · · · · · · | | | 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | | | | | | | | | | | · · · · · · · · · · · · · · · · · · · | |
| Olmsted Medical Center | Olmsted Medical Center | 56% | 32%-81% | 6% | 85% | 9% | Sample | 79 | 55% | 30%-77% | * | * | * | * | * | * | * | * | * |
| WASECA | | | | 7 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | | | - 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | | | | | | | | | | | | |
| Mayo Health System-Immanuel St. Joseph | Mayo Health System | 72% | 61%-82% | 5% | 89% | 7% | Sample | 293 | 74% | 63%-82% | 44% | 32%-56% | 5% | 89% | 7% | Sample | 293 | 41% | 31%-53% |
| WATKINS | | | | 5 | | | ** * * * * * * * * * * * * * * * * * * | | · · · · · · · · · · · · · · · · · · · | | | | · · · · · · · · · · · · · · · · · · · | | | | | · · · · · · · · · · · · · · · · · · · | |
| Paynesville Watkins Medical Clinic | Paynesville Area Health System | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| | · · · · · · · · · · · · · · · · · · · | | | · · · · · · · · · · · · · · · · · · · | | | 9 | | ' | | | | * | | | | | · · · · · · · · · · · · · · · · · · · | |

^{*} Sufficient data not available.

| Quality of | | | C | olorec | tal Ca | ncer | Scree | ning | | | | Ca | ncer (| Comb | ined | Screen | ing | | |
|---|---|--------------------|--|--|-----------------------------------|-------------------------|---------------------------------------|-------------|------------------------|--|--------------------|--|----------|---------------------------------|-------------------------|----------------------------|-------------|---|--|
| Preventive Ca | are | | | Dist | lical Gre ribution nt Popul | ı of | | | | | | | Dist | ical Gro ribution t Popul | of | | | | |
| See page 89 for an explanation of t | erms. | Rate | erval of Risk | | | e Programs | ın or Sample | | sted Rate | erval of sted Rate | Rate | erval of Risk | | | e Programs | n or Sample | | sted Rate | erval of sted Rate |
| PHYSICIAN CLINIC NAME | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non-Risk Adjusted Rate | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non-Risk Adjusted Rate |
| Overall Minnesota Clinic Average | | 72% | 69–74% | 20% | 76% | 4% | | | 72% | 69–74% | 53% | 50-55% | 20% | 77% | 3% | | | 53% | 50–55% |
| WESTBROOK | | | | | | | | | | | | | | | | | | | |
| Sanford Clinic Westbrook | Sanford Clinic | 77% | 64%-89% | 0% | 92% | 8% | Sample | 94 | 76% | 59%-88% | * | * | * | * | * | * | * | * | * |
| WILLMAR | | | | | | | | | | | | | | | | | | | |
| Affilliated Community Medical Centers | Affiliated Community Medical Centers | 64% | 12%-100% | 5% | 88% | 7% | Sample | 89 | 65% | 26%-91% | 64% | 11%-100% | 5% | 89% | 6% | Sample | 79 | 65% | 26%-91% |
| Family Practice Medical Center of Willmar | Family Practice Medical Center of Willmar | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| WINDOM | | | | ·, · · · · · · · · · · · · · · · · · · | | | , | | , | | | | , | | | | | g · · · · · · · · · · · · · · · · · · · | |
| Avera- United Medical Clinic | Avera Health/Avera Tri-State | 67% | 51%-82% | 0% | 89% | 11% | Sample | 87 | 64% | 45%-79% | 30% | 16%-44% | 0% | 92% | 8% | Sample | 70 | 22% | 9%-41% |
| Hartberg Medical Clinic | Hartberg Medical Clinic | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Sanford Clinic Windom | Sanford Clinic | 77% | 64%-89% | 0% | 92% | 8% | Sample | 94 | 76% | 59%-88% | * | * | * | * | * | * | * | * | * |
| Windom Family Medical Center | | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| WINONA | | | | · · · · · · · · · · · · · · · · · · · | | | | | | | | | | | | | | \$ | |
| Family Medicine of Winona | Family Medicine of Winona | 53% | 42%-65% | 0% | 89% | 11% | Sample | 65 | 48% | 35%-61% | 36% | 26%-47% | 0% | 89% | 11% | Sample | 65 | 28% | 17%-41% |
| Winona Health- Winona Health Clinics | Winona Health | 66% | 52%-79% | 2% | 85% | 14% | Sample | 93 | 60% | 44%-74% | * | * | * | * | * | * | * | * | * |
| WINSTED | | | | · · · · · · · · · · · · · · · · · · · | | | · · · · · · · · · · · · · · · · · · · | | | | | | | | | | | 9 | |
| Ridgeview Winsted Clinic | Ridgeview Clinics | 67% | 55%-79% | 17% | 82% | 2% | Sample | 64 | 69% | 52%-82% | 58% | 46%-70% | 17% | 82% | 2% | Sample | 64 | 60% | 43%-75% |

^{*} Sufficient data not available.

| Quality of | | | C | olorec | tal Ca | ncer | Scree | ning | | | | Ca | ancer (| Comb | ined | Screer | ing | | |
|------------------------------------|------------------------------|--------------------|--|--|------------------------------------|-------------------------|---|-------------|---------------------------------------|--|--------------------|--|---------------------------------------|-----------------------------------|-------------------------|----------------------------|-------------|---|--|
| Preventive Ca | are | | | Dist | dical Gro tribution nt Popul | ı of | | | | | | | Dist | lical Gro ribution nt Popul | ı of | | | 0 0 0 0 0 0 | |
| See page 89 for an explanation of | terms. | Rate | Confidence Interval of Risk Adjusted Rate | | | MN Health Care Programs | Total Population or Sample | | ısted Rate | iterval of isted Rate | l Rate | Confidence Interval of Risk Adjusted Rate | 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | | MN Health Care Programs | Total Population or Sample | | ısted Rate | iterval of isted Rate |
| PHYSICIAN CLINIC NAME | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence Ir Adjusted Rate | Medicare | Commercial | MN Health Ca | Total Populat | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non-Risk Adjusted Rate | Risk Adjusted Rate | Confidence Ir Adjusted Rate | Medicare | Commercial | MN Health Ca | Total Populat | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non-Risk Adjusted Rate |
| Overall Minnesota Clinic Average | | 72% | 69–74% | 20% | 76% | 4% | | | 72% | 69–74% | 53% | 50-55% | 20% | 77% | 3% | | | 53% | 50–55% |
| WORTHINGTON | | | | 9 0 0 0 0 | | | 9 0 0 0 0 | | | | | | • | | | | | * | |
| Avera Worthington Specialty Clinic | Avera Health/Avera Tri-State | 67% | 51%-82% | 0% | 89% | 11% | Sample | 87 | 64% | 45%-79% | 30% | 16%-44% | 0% | 92% | 8% | Sample | 70 | 22% | 9%-41% |
| Sanford Clinic | Sanford Clinic | 77% | 64%-89% | 0% | 92% | 8% | Sample | 94 | 76% | 59%-88% | * | * | * | * | * | * | * | * | * |
| ZUMBROTA | | | | <i>o</i> · · · · · · · · · · · · · · · · · · · | | | , | | , | | | | | | | | | | |
| Fairview Red Wing Zumbrota Clinic | Fairview Health Services | 79% | 72%-86% | 30% | 67% | 3% | Sample | 403 | 78% | 72%-84% | 58% | 48%-67% | 30% | 67% | 3% | Sample | 403 | 59% | 51%-68% |
| | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | |
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| | | | | 5 | | | , , , , , , , , , , , , , , , , , , , | | | | | | | | | | | *************************************** | |
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| | | | | | | | | | | | | | | | | | | | |
| | | | | o o o o o o o o o o o o o o o o o o o | | | · · · · · · · · · · · · · · · · · · · | | · · · · · · · · · · · · · · · · · · · | | | | | | | , | | · · · · · · · · · · · · · · · · · · · | |
| | | | | · · · · · · · · · · · · · · · · · · · | | | | | · · · · · · · · · · · · · · · · · · · | | | | * | | | | | * | |

^{*} Sufficient data not available.

| Quality of | | | | Chl | amydi | ia Sc | reening | | | | | Chil | dhoo | d Imn | nuniz | ation S | tatus | | |
|--|--------------------------------------|--------------------|--|----------|----------------------------------|-------------------------|----------------------------|-------------|------------------------|--|--------------------|--|----------|----------------------------------|-------------------------|---------------------------------------|-------------|---------------------------------------|--|
| Preventive Ca | ire | | | Dis | dical Gr tribution nt Popu | n of | * | | | | | | Dis | dical Gr tribution nt Popu | ı of | | | | |
| See page 89 for an explanation of t | erms. | Rate | erval of Risk | | | e Programs | on or Sample | | sted Rate | erval of sted Rate | Rate | erval of Risk | | | e Programs | on or Sample | | sted Rate | erval of sted Rate |
| PHYSICIAN CLINIC NAME | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non-Risk Adjusted Rate | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non-Risk Adjusted Rate |
| Overall Minnesota Clinic Average | | 49% | 49–50% | NA | 77% | 23% | | | 49% | 49–50% | 80% | 78-81% | NA | 63% | 37% | | | 80% | 78–81% |
| ADRIAN | | | | | | | • | | | | | | | | | | | | |
| Sanford Clinic Adrian | Sanford Clinic | 37% | 33%-40% | N/A | 90% | 10% | Total Population | 760 | 35% | 31%-38% | 67% | 56%-79% | N/A | 75% | 25% | Sample | 264 | 65% | 51%-76% |
| ALBERT LEA | | | | | | | | | | | | | | | | · · · · · · · · · · · · · · · · · · · | | | |
| Mayo Health System- Albert Lea Medical Center | Mayo Health System | 40% | 37%-42% | N/A | 69% | 31% | Total Population | 1809 | 41% | 38%-43% | 75% | 63%-87% | N/A | 54% | 46% | Sample | 230 | 75% | 64%-84% |
| APPLETON | | | | | | | | | | | | | | | | • | | | |
| Appleton Clinic | Appleton Area Health Services | 35% | 31%-39% | N/A | 60% | 40% | Total Population | 678 | 37% | 33%-40% | 70% | 63%-78% | N/A | 50% | 50% | Sample | 111 | 71% | 55%-83% |
| ARLINGTON | | | | | | | | | | | | | | | | | | | |
| Sibley Medical Center | Sibley Medical Center | * | * | N/A | * | * | * * | * | * | * | * | * | N/A | * | * | * * | * | * | * |
| AUSTIN | | | | | | | | | | | | | | | | | | b | |
| Mayo Health System- Austin Medical Center | Mayo Health System | 40% | 37%-42% | N/A | 69% | 31% | Total Population 1 | 1809 | 41% | 38%-43% | 75% | 63%-87% | N/A | 54% | 46% | Sample | 230 | 75% | 64%-84% |
| Smart Clinic | Smart Clinic | * | * | N/A | * | * | * | * | * | * | * | * | N/A | * | * | * | * | * | * |
| BENSON | | | | | | | | | | | | | | | | | | | |
| Affilliated Community Medical Centers | Affiliated Community Medical Centers | 49% | 45%-53% | N/A | 63% | 37% | Total Population | 809 | 51% | 48%-54% | 91% | 85%-96% | N/A | 46% | 54% | Sample | 89 | 88% | 78%-94% |
| BLUE EARTH | | | | | | | | | | | | | | | | | | · · · · · · · · · · · · · · · · · · · | |
| United Hospital District Clinic | United Hospital District Clinic | * | * | N/A | * | * | * * | * | * | * | * | * | N/A | * | * | * * | * | * | * |
| | | | | | | | • | | | | | | \ | | | | | \ | |

^{*} Sufficient data not available.

| Quality of | | | | Chla | amydi | a Sc | reening | | | | Chi | ldhoo | d Imm | nuniza | ation S | tatus | | |
|---|---|--------------------|--|----------|------------------------------------|-------------------------|---|---------------------------------------|--|--------------------|--|---------------------------------|------------------------------------|-------------------------|--|-------------|------------------------|--|
| Preventive Ca | ire | | <u>~</u> | Dist | dical Gro tribution nt Popul | ı of | | · · · · · · · · · · · · · · · · · · · | | | _ | Dis | dical Gro tribution nt Popul | ı of lation | | | | |
| See page 89 for an explanation of to | erms. | Rate | erval of Rish | | | e Programs | n or Sample | ted Rate | erval of ited Rate | Rate | erval of Rish | 0 0 0 0 0 0 0 | | e Programs | n or Sample | | ted Rate | erval of ited Rate |
| PHYSICIAN CLINIC NAME | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non-Risk Adjusted Rate | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non-Risk Adjusted Rate |
| Overall Minnesota Clinic Average | | 49% | 49–50% | NA | 77% | 23% | | 49% | 49–50% | 80% | 78–81% | NA NA | 63% | 37% | | | 80% | 78–81% |
| BYRON | | | | • | | | • | | | | | | | | 0 0 0 0 | | | |
| Olmsted Medical Center | Olmsted Medical Center | 46% | 41%-52% | N/A | 57% | 43% | Total Population 373 | 47% | 42%-53% | 81% | 61%-100% | N/A | 38% | 62% | Sample | 69 | 80% | 63%-91% |
| CALEDONIA | | | | | | | ************************************** | | | | | | | | | | | |
| Mayo Health System-Franciscan Skem | p Mayo Health System | 40% | 37%-42% | N/A | 69% | 31% | Total Population 180 | 9 41% | 38%-43% | 75% | 63%-87% | N/A | 54% | 46% | Sample | 230 | 75% | 64%-84% |
| CANBY | | | | | | | 07 | | | | | | | | | | | |
| Sanford Clinic Canby | Sanford Clinic | 37% | 33%-40% | N/A | 90% | 10% | Total Population 760 | 35% | 31%-38% | 67% | 56%-79% | N/A | 75% | 25% | Sample | 264 | 65% | 51%-76% |
| CANNON FALLS | | | | | | | | | | | | | | | | | | |
| Mayo Health System- Cannon Falls Medical Center | Mayo Health System | 40% | 37%-42% | N/A | 69% | 31% | Total Population 180 | 9 41% | 38%-43% | 75% | 63%-87% | N/A | 54% | 46% | Sample | 230 | 75% | 64%-84% |
| CHATFIELD | | | | | | | 1° 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | | | | | | | | ** * * * * * * * * * * * * * * * * * * | | | |
| Olmsted Medical Center | Olmsted Medical Center | 46% | 41%-52% | N/A | 57% | 43% | Total Population 373 | 47% | 42%-53% | 81% | 61%-100% | N/A | 38% | 62% | Sample | 69 | 80% | 63%-91% |
| CLARA CITY | | | | | | | | | | | | | | | | | | |
| Clara City Clinic | Chippewa County Montevideo Hospital & Medical Clinic | 35% | 31%-39% | N/A | 60% | 40% | Total Population 678 | 37% | 33%-40% | 70% | 63%-78% | N/A | 50% | 50% | Sample | 111 | 71% | 55%-83% |
| CLARKFIELD | | | | | | | · · · · · · · · · · · · · · · · · · · | | | | | | | | * | | | |
| Clarkfield Clinic | Chippewa County Montevideo Hospital & Medical Clinic | 35% | 31%-39% | N/A | 60% | 40% | Total Population 678 | 37% | 33%-40% | 70% | 63%-78% | N/A | 50% | 50% | Sample | 111 | 71% | 55%-83% |
| DASSEL | | | | | | | *** * * * * * * * * * * * * * * * * * | | | | | | | | , | | | |
| Hutchinson Area Health Care- Dassel Medical Center | Hutchinson Area Health Care | * | * | N/A | * | * | * * | * | * | * | * | N/A | * | * | * | * | * | * |

^{*} Sufficient data not available.

| Quality of | | | | Chl | amydi | a Sc | reening | | | | | Chil | dhood | l Imm | nuniza | ation S | tatus | | |
|--|--------------------------------|--------------------|--|----------|----------------------------------|-------------------------|--|-------------|---------------------------------------|--|--------------------|--|----------|----------------------------------|-------------------------|---------------------------------------|-------------|---------------------------------------|--|
| Preventive Ca | are | | | Dis | dical Gr tribution nt Popu | n of | | | | | | | Dist | lical Gr ribution nt Popul | ı of | | | , , , , , , , , , , , , , , , , , , , | |
| See page 89 for an explanation of | terms. | Rate | erval of Risk | | | e Programs | n or Sample | | ted Rate | erval of ted Rate | Rate | erval of Risk | | | e Programs | n or Sample | | ted Rate | erval of ited Rate |
| PHYSICIAN CLINIC NAME | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non-Risk Adjusted Rate | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non-Risk Adjusted Rate |
| Overall Minnesota Clinic Average | | 49% | 49–50% | NA | 77% | 23% | | | 49% | 49–50% | 80% | 78–81% | NA | 63% | 37% | | | 80% | 78–81% |
| Meeker Memorial Clinic | Meeker Memorial Clinic | * | * | N/A | * | * | * | * | * | * | * | * | N/A | * | * | * | * | * | * |
| DAWSON | | | | | | | | | | | | | | | | [| | | |
| Dawson Clinic | Dawson Clinic | 35% | 31%-39% | N/A | 60% | 40% | Total Populatio | on 678 | 37% | 33%-40% | 70% | 63%-78% | N/A | 50% | 50% | Sample | 111 | 71% | 55%-83% |
| EDEN VALLEY | | | | | | | ·, · · · · · · · · · · · · · · · · · · | | | | | | | | | | | | |
| Paynesville Eden Valley Medical Clinic | Paynesville Area Health System | 34% | 25%-43% | N/A | 71% | 29% | Total Population | on 102 | 34% | 26%-44% | * | * | N/A | * | * | * | * | * | * |
| EDGERTON | | | | | | | | | | | | | | | | | | | |
| Edgerton Family Clinic Avera | Avera Health/Avera Tri-State | 32% | 28%-37% | N/A | 81% | 19% | Total Population | on 396 | 31% | 27%-36% | 54% | 37%-71% | N/A | 37% | 63% | Sample | 87 | 62% | 50%-72% |
| FAIRFAX | | | | | | | | | · · · · · · · · · · · · · · · · · · · | | | | | | | · · · · · · · · · · · · · · · · · · · | | | |
| Fairfax Medical Clinic | | * | * | N/A | * | * | * * | * | * | * | * | * | N/A | * | * | * | * | * | * |
| FAIRMONT | | | | | | | | | | | | | | | | · · · · · · · · · · · · · · · · · · · | | | |
| Braaten Medical Clinic | | * | * | N/A | * | * | * | * | * | * | * | * | N/A | * | * | * * | * | * | * |
| Dulcimer Medical Center | Dulcimer Medical Center | * | * | N/A | * | * | * | * | * | * | * | * | N/A | * | * | * * | * | * | * |
| Mayo Health System- Fairmont Medical Center | Mayo Health System | 40% | 37%-42% | N/A | 69% | 31% | Total Populatio | on 1809 | 41% | 38%-43% | 75% | 63%-87% | N/A | 54% | 46% | Sample | 230 | 75% | 64%-84% |
| Smart Clinic | Smart Clinic | * | * | N/A | * | * | * | * | * | * | * | * | N/A | * | * | * | * | * | * |
| FARIBAULT | | | | | | | • | | | | | | | | | | | | |
| Allina Medical Clinic | Allina Medical Clinic | 61% | 59%-62% | N/A | 81% | 19% | Total Population | on 4876 | 60% | 59%-62% | 81% | 74%-87% | N/A | 68% | 32% | Sample | 244 | 81% | 73%-86% |

^{*} Sufficient data not available.

| Quality of | | | | Chl | amydi | a Sc | reening | | | | | Chil | ldhood | d Imm | uniza | ation S | tatus | | |
|---|--------------------------------------|--------------------|--|----------|------------------------------------|-------------------------|---|-------------|------------------------|--|--------------------|--|---------------------------------|------------------------------------|-------------------------|----------------------------|-------------|------------------------|--|
| Preventive Ca | are | | | Dis | dical Gro tribution nt Popul | ı of | | | | | | | Dist | lical Gro tribution nt Popul | of | | | | |
| See page 89 for an explanation of | terms. | Rate | terval of Risk | | | re Programs | on or Sample | | sted Rate | terval of sted Rate | Rate | terval of Risk | 0 0 0 0 0 0 0 | | re Programs | on or Sample | | sted Rate | terval of sted Rate |
| PHYSICIAN CLINIC NAME | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non-Risk Adjusted Rate | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non-Risk Adjusted Rate |
| Overall Minnesota Clinic Average | | 49% | 49–50% | NA | 77% | 23% | | | 49% | 49–50% | 80% | 78–81% | NA | 63% | 37% | | | 80% | 78–81% |
| Mayo Health System- Cannon Valley Clinic | Mayo Health System | 40% | 37%-42% | N/A | 69% | 31% | Total Population | 1809 | 41% | 38%-43% | 75% | 63%-87% | N/A | 54% | 46% | Sample | 230 | 75% | 64%-84% |
| FULDA | | | | | | | | | | | | | | | | | | | |
| Avera Worthington Specialty Clinics | Avera Health/Avera Tri-State | 32% | 28%-37% | N/A | 81% | 19% | Total Population | 396 | 31% | 27%-36% | 54% | 37%-71% | N/A | 37% | 63% | Sample | 87 | 62% | 50%-72% |
| GLENCOE | | | | | | | | | | | | | | | | | | | |
| Glencoe Regional Health Services | Glencoe Regional Health Services | 35% | 31%-39% | N/A | 60% | 40% | Total Population | 678 | 37% | 33%-40% | 70% | 63%-78% | N/A | 50% | 50% | Sample | 111 | 71% | 55%-83% |
| GRACEVILLE | | | | | | | 8 · · · · · · · · · · · · · · · · · · · | | | | | | , | | | | | | |
| Graceville Health Center Clinic | Graceville Health Center Clinic | * | * | N/A | * | * | * | * | * | * | * | * | N/A | * | * | * | * | * | * |
| GRANITE FALLS | | | | | | | | | | | | | | | | , | | | |
| Affilliated Community Medical Centers | Affiliated Community Medical Centers | 49% | 45%-53% | N/A | 63% | 37% | Total Population | 809 | 51% | 48%-54% | 91% | 85%-96% | N/A | 46% | 54% | Sample | 89 | 88% | 78%-94% |
| HARMONY | | | | | | | | | | | | | | | | | | | |
| Gundersen Lutheran | Gundersen Clinic | 40% | 33%-48% | N/A | 79% | 21% | Total Population | 155 | 40% | 33%-48% | * | * | N/A | * | * | * | * | * | * |
| HECTOR | | | | | | | | | | | | | | | | | | | |
| Renville County Hospital and Clinics | Renville County Hospital and Clinics | 35% | 31%-39% | N/A | 60% | 40% | Total Population | 678 | 37% | 33%-40% | 70% | 63%-78% | N/A | 50% | 50% | Sample | 111 | 71% | 55%-83% |
| HENDRICKS | | | | | | | | | | | | | | | | | | | |
| Hendricks Clinic P.A. | Hendricks Clinic | 35% | 31%-39% | N/A | 60% | 40% | Total Population | 678 | 37% | 33%-40% | 70% | 63%-78% | N/A | 50% | 50% | Sample | 111 | 71% | 55%-83% |

^{*} Sufficient data not available.

| Quality of | | | | Chl | amydi | ia Sc | reening | | | | Chil | dhoo | d Imm | uniza | ation S | tatus | | |
|--|---------------------------------------|--------------------|--|----------|----------------------------------|-------------------------|---|------------------------|--|--------------------|--|----------|------------------------------------|-------------------------|----------------------------|-------------|---------------------------------------|--|
| Preventive Ca | are | | | Dis | dical Gr tribution nt Popu | n of | | | | | | Dist | lical Gro tribution nt Popul | ı of | | | | |
| See page 89 for an explanation of | terms. | Rate | erval of Risk | | | e Programs | n or Sample | sted Rate | erval of sted Rate | Rate | erval of Risk | | | e Programs | ın or Sample | | sted Rate | erval of sted Rate |
| PHYSICIAN CLINIC NAME | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non-Risk Adjusted Rate | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non-Risk Adjusted Rate |
| Overall Minnesota Clinic Average | | 49% | 49–50% | NA | 77% | 23% | | 49% | 49–50% | 80% | 78–81% | NA | 63% | 37% | | | 80% | 78–81% |
| HOUSTON | | | | • | | | • | | | | | | | | | | | |
| Gunderson Lutheran | Gundersen Clinic | 40% | 33%-48% | N/A | 79% | 21% | Total Population 155 | 40% | 33%-48% | * | * | N/A | * | * | * | * | * | * |
| HUTCHINSON | | | | | | | , | | | | | | | | | | | |
| Hutchinson Medical Center | Hutchinson Medical Center | 42% | 36%-48% | N/A | 77% | 23% | Total Population 267 | 42% | 36%-48% | 56% | 46%-65% | N/A | 67% | 33% | Sample | 60 | 55% | 28%-78% |
| IVANHOE | | | | | | | | | | | | | | | | | | |
| Ivanhoe Clinic | | * | * | N/A | * | * | * * | * | * | * | * | N/A | * | * | * | * | * | * |
| JACKSON | | | | | | | · · · · · · · · · · · · · · · · · · · | | | | | | | | | | | |
| Sacred Heart Mercy Health Care Center | Sacred Heart Mercy Health Care Center | * | * | N/A | * | * | * * * | * | * | * | * | N/A | * | * | * | * | * | * |
| Sanford Clinic Jackson | Sanford Clinic | 37% | 33%-40% | N/A | 90% | 10% | Total Population 760 | 35% | 31%-38% | 67% | 56%-79% | N/A | 75% | 25% | Sample | 264 | 65% | 51%-76% |
| KASSON | | | | | | | · · · · · · · · · · · · · · · · · · · | | | | | | | | | | · · · · · · · · · · · · · · · · · · · | |
| Mayo Clinic | Mayo Clinic | 41% | 35%-48% | N/A | 53% | 47% | Total Population 291 | 46% | 41%-52% | 79% | 48%-100% | N/A | 27% | 73% | Sample | 66 | 78% | 56%-91% |
| LA CRESCENT | | | | | | | ************************************** | | | | | | | | | | | |
| Mayo Health System - Franciscan Skemp | Mayo Health System | 40% | 37%-42% | N/A | 69% | 31% | Total Population 1809 | 41% | 38%-43% | 75% | 63%-87% | N/A | 54% | 46% | Sample | 230 | 75% | 64%-84% |
| LAKE BENTON | | | | | | | | | | | | | | | | | | |
| Lake Benton Healthcare Center | Avera Health/Avera Tri-State | 32% | 28%-37% | N/A | 81% | 19% | Total Population 396 | 31% | 27%-36% | 54% | 37%-71% | N/A | 37% | 63% | Sample | 87 | 62% | 50%-72% |

^{*} Sufficient data not available.

| Quality of | | | | Chl | amydi | a Sc | reening | | | | | Chil | dhood | d Imm | uniza | ation S | tatus | | |
|--|---------------------------------------|--------------------|--|----------|----------------------------------|-------------------------|---|-----|------------------------|--|--------------------|--|----------|------------------------------------|-------------------------|----------------------------|-------------|------------------------|--|
| Preventive Ca | are | | | Dis | dical Gr tribution nt Popu | n of | | | | | | | Dist | lical Gro tribution nt Popul | ı of | | | | |
| See page 89 for an explanation of t | terms. | Rate | terval of Risk | | | re Programs | on or Sample | | sted Rate | terval of sted Rate | Rate | terval of Risk | | | re Programs | on or Sample | | sted Rate | terval of sted Rate |
| PHYSICIAN CLINIC NAME | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample Sample Size | | Non-Risk Adjusted Rate | Confidence Interval of Non-Risk Adjusted Rate | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non-Risk Adjusted Rate |
| Overall Minnesota Clinic Average | | 49% | 49–50% | NA | 77% | 23% | | | 49% | 49–50% | 80% | 78–81% | NA | 63% | 37% | | | 80% | 78–81% |
| LAKE CITY | | | | | | | | | | | | | | | | | | | |
| Mayo Health System-Lake City | Mayo Health System | 40% | 37%-42% | N/A | 69% | 31% | Total Population 1 | 809 | 41% | 38%-43% | 75% | 63%-87% | N/A | 54% | 46% | Sample | 230 | 75% | 64%-84% |
| LAKE CRYSTAL | | | | | | | | | | | | | | | | | | | |
| Mankato Clinic | Mankato Clinic | 49% | 45%-53% | N/A | 81% | 19% | Total Population | 49 | 49% | 45%-52% | 70% | 53%-87% | N/A | 62% | 38% | Sample | 90 | 70% | 52%-83% |
| LAKEFIELD | · · · · · · · · · · · · · · · · · · · | | | | | | | | | | | | | | | | | | |
| Avera Worthington Specialty Clinics | Avera Health/Avera Tri-State | 32% | 28%-37% | N/A | 81% | 19% | Total Population | 96 | 31% | 27%-36% | 54% | 37%-71% | N/A | 37% | 63% | Sample | 87 | 62% | 50%-72% |
| Sanford Clinic Lakefield | Sanford Clinic | 37% | 33%-40% | N/A | 90% | 10% | Total Population | 60 | 35% | 31%-38% | 67% | 56%-79% | N/A | 75% | 25% | Sample | 264 | 65% | 51%-76% |
| LE SUEUR | · | | | | | | | | | | | | | | | | | | |
| Mayo Health System- Immanuel St. Joseph | Mayo Health System | 40% | 37%-42% | N/A | 69% | 31% | Total Population 1 | 809 | 41% | 38%-43% | 75% | 63%-87% | N/A | 54% | 46% | Sample | 230 | 75% | 64%-84% |
| Southern Metro Medical Clinics | Southern Metro Medical Clinics | 41% | 32%-52% | N/A | 93% | 7% | Total Population | .07 | 41% | 32%-51% | * | * | N/A | * | * | * | * | * | * |
| LEWISTON | | | | | | | 8 · · · · · · · · · · · · · · · · · · · | | | | | | | | | | | | |
| Winona Health | Winona Health | 42% | 36%-48% | N/A | 68% | 32% | Total Population | 82 | 43% | 38%-49% | 82% | 74%-88% | N/A | 47% | 53% | Sample | 62 | 79% | 61%-90% |
| LITCHFIELD | | | | | | | | | | | | | | | | | | | |
| Affilliated Community Medical Centers- Litchfield Clinic (East) | Affiliated Community Medical Centers | 49% | 45%-53% | N/A | 63% | 37% | Total Population | 09 | 51% | 48%-54% | 91% | 85%-96% | N/A | 46% | 54% | Sample | 89 | 88% | 78%-94% |
| Affilliated Community Medical Centers- Litchfield Clinic (West) | Affiliated Community Medical Centers | 49% | 45%-53% | N/A | 63% | 37% | Total Population | 09 | 51% | 48%-54% | 91% | 85%-96% | N/A | 46% | 54% | Sample | 89 | 88% | 78%-94% |

^{*} Sufficient data not available.

| Quality of | | | | Chl | amydi | a Sc | reening | | | | Chi | dhoo | d Imm | uniza | ation S | tatus | | |
|---|--|--------------------|--|----------|----------------------------------|-------------------------|---|------------------------|--|--------------------|--|---|------------------------------------|-------------------------|---------------------------------------|-------------|--|--|
| Preventive Ca | are | | | Dis | dical Gr tribution nt Popu | n of | | | | | | Dist | dical Gro tribution nt Popul | ı of | | | | |
| See page 89 for an explanation of to | erms. | Rate . | erval of Risk | | | e Programs | n or Sample | ted Rate | erval of ited Rate | Rate | erval of Risk | | | e Programs | n or Sample | | ited Rate | erval of ited Rate |
| PHYSICIAN CLINIC NAME | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non-Risk Adjusted Rate | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non-Risk Adjusted Rate |
| Overall Minnesota Clinic Average | | 49% | 49–50% | NA NA | 77% | 23% | | 49% | 49–50% | 80% | 78–81% | NA | 63% | 37% | | | 80% | 78–81% |
| LONSDALE | | | | • | | | | | | | | 9 0 0 0 0 | | | 0 0 0 0 0 | | | |
| FamilyHealth Medical Clinic | FamilyHealth Medical Clinics | 15% | 9%-23% | N/A | 88% | 12% | Total Population 10 | 7 15% | 9%-23% | * | * | N/A | * | * | * | * | * | * |
| LUVERNE | | | | | | | • | | | | | , · · · · · · · · · · · · · · · · · · · | | | | | | |
| Sanford Clinic | Sanford Clinic | 37% | 33%-40% | N/A | 90% | 10% | Total Population 76 | 35% | 31%-38% | 67% | 56%-79% | N/A | 75% | 25% | Sample | 264 | 65% | 51%-76% |
| MABEL | | | | | | | ope | | | | | ** | | | | | · · · · · · · · · · · · · · · · · · · | |
| Winneshiek Medical Center | Winneshiek Medical Center-Mabel Clinic | * | * | N/A | * | * | * * | * | * | * | * | N/A | * | * | * | * | * | * |
| MADELIA | | | | • | | | ************************************** | | | | | · · · · · · · · · · · · · · · · · · · | | | , | | ·· · · · · · · · · · · · · · · · · · · | |
| Mayo Health System- Immanuel St. Joseph | Mayo Health System | 40% | 37%-42% | N/A | 69% | 31% | Total Population 180 | 9 41% | 38%-43% | 75% | 63%-87% | N/A | 54% | 46% | Sample | 230 | 75% | 64%-84% |
| MADISON | | | | | | | • | | | | | | | | · · · · · · · · · · · · · · · · · · · | | | |
| Lac Qui Parle Clinic | Lac Qui Parle Clinic | 35% | 31%-39% | N/A | 60% | 40% | Total Population 67 | 37% | 33%-40% | 70% | 63%-78% | N/A | 50% | 50% | Sample | 111 | 71% | 55%-83% |
| MANKATO | | | | | | | • • • • • • • • • | | | | | • • • • • • • • | | | | | · | |
| Between the Bridges Health Center | | * | * | N/A | * | * | * * | * | * | * | * | N/A | * | * | * | * | * | * |
| Mayo Health System-Immanuel St. Joseph- Mankato Eastridge | Mayo Health System | 40% | 37%-42% | N/A | 69% | 31% | Total Population 180 | 9 41% | 38%-43% | 75% | 63%-87% | N/A | 54% | 46% | Sample | 230 | 75% | 64%-84% |
| Mayo Health System-Immanuel St. Joseph- Mankato Specialty Clinic | Mayo Health System | 40% | 37%-42% | N/A | 69% | 31% | Total Population 180 | 9 41% | 38%-43% | 75% | 63%-87% | N/A | 54% | 46% | Sample | 230 | 75% | 64%-84% |
| Mankato Clinic- Main Street | Mankato Clinic | 49% | 45%-53% | N/A | 81% | 19% | Total Population 74 | 9 49% | 45%-52% | 70% | 53%-87% | N/A | 62% | 38% | Sample | 90 | 70% | 52%-83% |
| Mankato Clinic- Wickersham Campus | Mankato Clinic | 49% | 45%-53% | N/A | 81% | 19% | Total Population 74 | 9 49% | 45%-52% | 70% | 53%-87% | N/A | 62% | 38% | Sample | 90 | 70% | 52%-83% |

^{*} Sufficient data not available.

| Quality of | | | | Chl | amydi | a Sc | reening | | | | | Chil | ldhood | d Imm | uniza | ation S | tatus | | |
|--|---|--------------------|--|----------|------------------------------------|-------------------------|---------------------------------------|-------------|------------------------|--|--------------------|--|---|------------------------------------|-------------------------|----------------------------|-------------|---|--|
| Preventive Ca | are | | | Dis | dical Gro tribution nt Popul | n of | _ | | | | | | Dist | lical Gro tribution nt Popul | ı of | | | | |
| See page 89 for an explanation of | terms. | Rate | erval of Risk | | | e Programs | n or Sample | | sted Rate | erval of sted Rate | Rate | erval of Risk | | | e Programs | n or Sample | | sted Rate | erval of sted Rate |
| PHYSICIAN CLINIC NAME | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non-Risk Adjusted Rate | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non-Risk Adjusted Rate |
| Overall Minnesota Clinic Average | | 49% | 49–50% | NA | 77% | 23% | | | 49% | 49–50% | 80% | 78–81% | NA | 63% | 37% | | | 80% | 78–81% |
| Open Door Health Center | Open Door Health Center | * | * | N/A | * | * | * | * | * | * | * | * | N/A | * | * | * | * | * | * |
| MAPLETON | | | | | | | | | | | | | | | | | | | |
| Mankato Clinic | Mankato Clinic | 49% | 45%-53% | N/A | 81% | 19% | Total Population | 749 | 49% | 45%-52% | 70% | 53%-87% | N/A | 62% | 38% | Sample | 90 | 70% | 52%-83% |
| MARSHALL | | | | | | | | | | | | | | | | | | , | |
| Affiliated Community Medical Centers- Bruce Street | Affiliated Community Medical Centers | 49% | 45%-53% | N/A | 63% | 37% | Total Population | 809 | 51% | 48%-54% | 91% | 85%-96% | N/A | 46% | 54% | Sample | 89 | 88% | 78%-94% |
| Affilliated Community Medical Centers- Marshall Clinic- Market Street | Affiliated Community Medical Centers | 49% | 45%-53% | N/A | 63% | 37% | Total Population | 809 | 51% | 48%-54% | 91% | 85%-96% | N/A | 46% | 54% | Sample | 89 | 88% | 78%-94% |
| Avera Marshall Specialty Clinic | Avera Health/Avera Tri-State | 32% | 28%-37% | N/A | 81% | 19% | Total Population | 396 | 31% | 27%-36% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A |
| MILAN | | | | | | | • | | | | | | | | | | | | |
| Milan Clinic | Chippewa County Montevideo Hospital & Medical Clinic | 35% | 31%-39% | N/A | 60% | 40% | Total Population | 678 | 37% | 33%-40% | 70% | 63%-78% | N/A | 50% | 50% | Sample | 111 | 71% | 55%-83% |
| MONTEVIDEO | | | | | | | • • • • • • • • • • • • • • • • • • • | | | | | | | | | | | | |
| Chippewa County Montevideo Hospital & Medical Clinic | Chippewa County Montevideo Hospital & Medical Clinic | 35% | 31%-39% | N/A | 60% | 40% | Total Population | 678 | 37% | 33%-40% | 70% | 63%-78% | N/A | 50% | 50% | Sample | 111 | 71% | 55%-83% |
| MONTGOMERY | | | | | | | | | | | | | * • • • • • • • • • • • • • • • • • • • | | | | | P • • • • • • • • • • • • • • • • • • • | |
| Southern Metro Medical Clinics- Montgomery Medical Clinic | Southern Metro Medical Clinics | 41% | 32%-52% | N/A | 93% | 7% | Total Population | 107 | 41% | 32%-51% | * | * | N/A | * | * | * | * | * | * |
| MOUNTAIN LAKE | | | | | | | 0 | | | | | | * | | | | | P | |
| Sanford Clinic | Sanford Clinic | 37% | 33%-40% | | 90% | 100/ | Total Population | 700 | 250/ | 31%-38% | 67% | 56%-79% | . N/A | 75% | 25% | Sample | 264 | 65% | 51%-76% |

^{*} Sufficient data not available.

| Quality of | | | | Chla | amydi | a Sc | reening | | | | Chi | ldhoo | d Imm | nuniza | ation S | tatus | | |
|--|--------------------------------------|--------------------|--|----------|----------------------------------|-------------------------|---|------------------------|--|--------------------|--------------------------------------|----------|------------------------------------|-------------------------|----------------------------|-------------|------------------------|--|
| Preventive Ca | ıre | | | Dist | dical Gr tribution nt Popu | n of | | | | | | Dist | dical Gre tribution nt Popul | ı of | | | | |
| See page 89 for an explanation of t | erms. | Rate | erval of Risk | | | e Programs | n or Sample | ted Rate | erval of ted Rate | Rate | erval of Risk | | | e Programs | n or Sample | | ted Rate | erval of ited Rate |
| PHYSICIAN CLINIC NAME | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non-Risk Adjusted Rate | Risk Adjusted Rate | Confidence Interval Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non-Risk Adjusted Rate |
| Overall Minnesota Clinic Average | | 49% | 49–50% | NA | 77% | 23% | | 49% | 49–50% | 80% | 78-81% | NA | 63% | 37% | | | 80% | 78–81% |
| NEW LONDON | | | | • | | | | | | | | | | | | | | |
| Affilliated Community Medical Centers | Affiliated Community Medical Centers | 49% | 45%-53% | N/A | 63% | 37% | Total Population 809 | 51% | 48%-54% | 91% | 85%-96% | N/A | 46% | 54% | Sample | 89 | 88% | 78%-94% |
| NEW PRAGUE | | | | | | | ,, | | | | | | | | | | | |
| Parkview Medical Clinic | Parkview Medical Clinic | 36% | 24%-50% | N/A | 88% | 12% | Total Population 42 | 33% | 21%-48% | * | * | N/A | * | * | * | * | * | * |
| NEW ULM | | | | | | | | | | | | | | | | | | |
| Allina Health System- New Ulm Medical Center | Allina Health System | 48% | 44%-53% | N/A | 64% | 36% | Total Population 520 | 51% | 46%-55% | 75% | 66%-82% | N/A | 57% | 43% | Sample | 61 | 73% | 56%-86% |
| NORTH MANKATO | | | | | | | | | | | | | | | | | | |
| Mayo Health System-Immanuel St. Joseph - Mankato Northridge | Mayo Health System | 40% | 37%-42% | N/A | 69% | 31% | Total Population 180 | 41% | 38%-43% | 75% | 63%-87% | N/A | 54% | 46% | Sample | 230 | 75% | 64%-84% |
| Mankato Clinic | Mankato Clinic | 49% | 45%-53% | N/A | 81% | 19% | Total Population 749 | 49% | 45%-52% | 70% | 53%-87% | N/A | 62% | 38% | Sample | 90 | 70% | 52%-83% |
| NORTHFIELD | | | | | | | • | | | | | | | | | | | |
| Allina Medical Clinic | Allina Medical Clinic | 61% | 59%-62% | N/A | 81% | 19% | Total Population 487 | 60% | 59%-62% | 81% | 74%-87% | N/A | 68% | 32% | Sample | 244 | 81% | 73%-86% |
| OLIVIA | | | | | | | • | | | | | | | | * * * * * * * | | | |
| Renville County Hospital and Clinics | Renville County Hospital and Clinics | 35% | 31%-39% | N/A | 60% | 40% | Total Population 678 | 37% | 33%-40% | 70% | 63%-78% | N/A | 50% | 50% | Sample | 111 | 71% | 55%-83% |
| ORTONVILLE | | | | | | | | | | | | | | | | | | |
| Northside Medical Clinic | Northside Medical Clinic | 35% | 31%-39% | N/A | 60% | 40% | Total Population 678 | 37% | 33%-40% | 70% | 63%-78% | N/A | 50% | 50% | Sample | 111 | 71% | 55%-83% |
| Northside Medical Clinic | Northside Medical Clinic | 35% | 31%-39% | N/A | 60% | 40% | Total Population 678 | 37% | 33%-40% | 70% | 63%-78% | N/A | 50% | 50% | Sample | 111 | 71% | |

^{*} Sufficient data not available.

| Quality of | | | | Chla | amydi | a Sc | reening | | | | | Chil | ldhoo | d Imm | uniza | ation S | tatus | | |
|--|--------------------------------------|--------------------|--|---|------------------------------------|-------------------------|---------------------------------------|---|------------------------|--|--------------------|--|---------------------------------------|------------------------------------|-------------------------|----------------------------|-------------|------------------------|--|
| Preventive Ca | re | | | Dis | dical Gro tribution nt Popul | ı of | _ | | | | | | Dist | dical Gro tribution nt Popul | of | | 0 | | |
| See page 89 for an explanation of te | erms. | ate | erval of Risk | • | | Programs | n or Sample | | ted Rate | erval of ted Rate | ate | erval of Risk | • • • • • • • • • • • • • • • • • • • | | Programs | n or Sample | 0 | ted Rate | erval of ted Rate |
| PHYSICIAN CLINIC NAME | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non-Risk Adjusted Rate | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non-Risk Adjusted Rate |
| Overall Minnesota Clinic Average | | 49% | 49–50% | NA | 77% | 23% | | | 49% | 49–50% | 80% | 78–81% | NA | 63% | 37% | | | 80% | 78–81% |
| OWATONNA | | | | • | | | • | | | | | | • | | | | • | | |
| Mayo Health System-Owatonna Clinic | Mayo Health System | 40% | 37%-42% | N/A | 69% | 31% | Total Population | 1809 | 41% | 38%-43% | 75% | 63%-87% | N/A | 54% | 46% | Sample | 230 | 75% | 64%-84% |
| PINE ISLAND | | | | · . · · · · · · · · · · · · · · · · · · | | | | | | | | | | | | | | | |
| Olmsted Medical Center | Olmsted Medical Center | 46% | 41%-52% | N/A | 57% | 43% | Total Population | 373 | 47% | 42%-53% | 81% | 61%-100% | N/A | 38% | 62% | Sample | 69 | 80% | 63%-91% |
| PIPESTONE | | | | | | | 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | | | | | | | | | | | | |
| Avera- Pipestone County Medical Center | Avera Health/Avera Tri-State | 32% | 28%-37% | N/A | 81% | 19% | Total Population | 396 | 31% | 27%-36% | 54% | 37%-71% | N/A | 37% | 63% | Sample | 87 | 62% | 50%-72% |
| PLAINVIEW | | | | | | | • • • • • • • • • • • • • • • • • • • | | | | | | | | | | | | |
| Olmsted Medical Center | Olmsted Medical Center | 46% | 41%-52% | N/A | 57% | 43% | Total Population | 373 | 47% | 42%-53% | 81% | 61%-100% | N/A | 38% | 62% | Sample | 69 | 80% | 63%-91% |
| PRESTON | | | | | | | | | | | | | | | | | | | |
| Olmsted Medical Center | Olmsted Medical Center | 46% | 41%-52% | N/A | 57% | 43% | Total Population | 373 | 47% | 42%-53% | 81% | 61%-100% | N/A | 38% | 62% | Sample | 69 | 80% | 63%-91% |
| RED WING | | | | | | | | | | | | | | | | | | | |
| Fairview Red Wing Medical Center | Fairview Health Services | 57% | 56%-59% | N/A | 77% | 23% | Total Population | 3293 | 57% | 55%-59% | 84% | 78%-89% | N/A | 64% | 36% | Sample | 254 | 84% | 78%-89% |
| REDWOOD FALLS | | | | | | | | • | | | | | | | | | | | |
| Affilliated Community Medical Centers | Affiliated Community Medical Centers | 49% | 45%-53% | N/A | 63% | 37% | Total Population | 809 | 51% | 48%-54% | 91% | 85%-96% | N/A | 46% | 54% | Sample | 89 | 88% | 78%-94% |
| RENVILLE | | | | | | | 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | | | | | | | | | , | | | |
| Renville County Hospital and Clinics | Renville County Hospital and Clinics | 35% | 31%-39% | N/A | 60% | 40% | Total Population | 678 | 37% | 33%-40% | 70% | 63%-78% | N/A | 50% | 50% | Sample | 111 | 71% | 55%-83% |

^{*} Sufficient data not available.

| Quality of | | | | Chl | amydi | ia Sc | reening | | | | Chil | dhoo | d Imm | uniza | ation S | tatus | | |
|--|---------------------------|--------------------|--|-------------|----------------------------------|-------------------------|---|------------------------|--|--------------------|--------------------------------------|----------|------------------------------------|-------------------------|---------------------|-------------|-----------------------------|--|
| Preventive C | are | | | Dis | dical Gr tribution nt Popu | n of | | | | | | Dist | lical Gro tribution nt Popul | of | | | | |
| See page 89 for an explanation of | terms. | Rate | erval of Risk | | | e Programs | on or Sample | sted Rate | terval of sted Rate | Rate | erval of Risk | | | e Programs | on or Sample | | sted Rate | terval of sted Rate |
| PHYSICIAN CLINIC NAME | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non-Risk Adjusted Rate | Risk Adjusted Rate | Confidence Interval Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non-Risk Adiusted Rate |
| Overall Minnesota Clinic Average | | 49% | 49–50% | . NA | 77% | 23% | | 49% | 49–50% | 80% | 78-81% | NA | 63% | 37% | | | 80% | 78–819 |
| ROCHESTER | | | | | | | | | | | | | | | | | • | |
| Mayo Clinic- Baldwin Building, Family Medicine | Mayo Clinic | 41% | 35%-48% | N/A | 53% | 47% | Total Population 291 | 46% | 41%-52% | 79% | 48%-100% | N/A | 27% | 73% | Sample | 66 | 78% | 56%-91 |
| Mayo Clinic- Baldwin Building, Primary Care Internal Medicine | Mayo Clinic | 41% | 35%-48% | N/A | 53% | 47% | Total Population 291 | 46% | 41%-52% | 79% | 48%-100% | N/A | 27% | 73% | Sample | 66 | 78% | 56%-91 |
| Mayo Clinic- Mayo Building | Mayo Clinic | 41% | 35%-48% | N/A | 53% | 47% | Total Population 291 | 46% | 41%-52% | 79% | 48%-100% | N/A | 27% | 73% | Sample | 66 | 78% | 56%-91 |
| Mayo Clinic- Northeast | Mayo Clinic | 41% | 35%-48% | N/A | 53% | 47% | Total Population 291 | 46% | 41%-52% | 79% | 48%-100% | N/A | 27% | 73% | Sample | 66 | 78% | 56%-91 |
| Mayo Clinic- Northwest | Mayo Clinic | 41% | 35%-48% | N/A | 53% | 47% | Total Population 291 | 46% | 41%-52% | 79% | 48%-100% | N/A | 27% | 73% | Sample | 66 | 78% | 56%-91 |
| Olmsted Medical Center- Rochester Northwest | Olmsted Medical Center | 46% | 41%-52% | N/A | 57% | 43% | Total Population 373 | 47% | 42%-53% | 81% | 61%-100% | N/A | 38% | 62% | Sample | 69 | 80% | 63%-91 |
| Olmsted Medical Center- Rochester Southeast | Olmsted Medical Center | 46% | 41%-52% | N/A | 57% | 43% | Total Population 373 | 47% | 42%-53% | 81% | 61%-100% | N/A | 38% | 62% | Sample | 69 | 80% | 63%-91 |
| Rochester Family Medicine Clinic | | * | * | N/A | * | * | * * | * | * | * | * | N/A | * | * | * | * | * | * |
| RUSHFORD | | | | | | | | | | | | | | | | | | |
| Winona Health | Winona Health | 42% | 36%-48% | N/A | 68% | 32% | Total Population 282 | 43% | 38%-49% | 82% | 74%-88% | N/A | 47% | 53% | Sample | 62 | 79% | 61%-90 |
| SLAYTON | | | | • | | | | | | | | | | | | | • • • • • • • • • • • • • • | |
| Murray County Clinic | Murray County Clinic | 35% | 31%-39% | N /A | 60% | 40% | Total Population 678 | 37% | 33%-40% | 70% | 63%-78% | N/A | 50% | 50% | Sample | 111 | 71% | 55%-83 |
| SLEEPY EYE | | | | | | | | | | | | | | | | | | |
| Sleepy Eye Medical Center | Sleepy Eye Medical Center | 35% | 31%-39% | N/A | 60% | 40% | Total Population 678 | 37% | 33%-40% | 70% | 63%-78% | N/A | 50% | 50% | Sample | 111 | 71% | 55%-83 |

^{*} Sufficient data not available.

| Quality of | | | | Chl | amydi | a Sc | reening | | | | | Chi | ldhoo | d Imm | nuniza | ation S | tatus | | |
|--|--------------------------------|--------------------|--|----------|------------------------------------|-------------------------|---|-------------|------------------------|--|--------------------|--|--------------------------------------|------------------------------------|-------------------------|----------------------------|-------------|------------------------|--|
| Preventive Ca | ıre | | J | Dis | dical Gro tribution nt Popul | ı of | | | | | | J | Dist | dical Gro tribution nt Popul | ı of | | | | |
| See page 89 for an explanation of to | erms. | Rate | erval of Risl | | | e Programs | n or Sample | | ted Rate | erval of ted Rate | Rate | erval of Risl | 0 0 0 0 0 0 0 0 | | e Programs | n or Sample | | ted Rate | erval of ted Rate |
| PHYSICIAN CLINIC NAME | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non-Risk Adjusted Rate | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non-Risk Adjusted Rate |
| Overall Minnesota Clinic Average | | 49% | 49–50% | NA | 77% | 23% | | | 49% | 49–50% | 80% | 78–81% | NA | 63% | 37% | | | 80% | 78–81% |
| SPICER | | | | | | | | | | | | | | | | | | | |
| Paynesville Green Lake Medical Clinic | Paynesville Area Health System | 34% | 25%-43% | N/A | 71% | 29% | Total Population | 102 | 34% | 26%-44% | * | * | N/A | * | * | * | * | * | * |
| SPRING GROVE | | | | | | | | | | | | | | | | | | | |
| Gundersen Lutheran | Gundersen Clinic | 40% | 33%-48% | N/A | 79% | 21% | Total Population | 155 | 40% | 33%-48% | * | * | N/A | * | * | * | * | * | * |
| SPRING VALLEY | | | | | | | | | | | | | | | | | | | |
| Olmsted Medical Center | Olmsted Medical Center | 46% | 41%-52% | N/A | 57% | 43% | Total Population | 373 | 47% | 42%-53% | 81% | 61%-100% | N/A | 38% | 62% | Sample | 69 | 80% | 63%-91% |
| SPRINGFIELD | | | | | | | | | | | | | | | | | | | |
| Mayo Health System-Immanuel St. Joseph | Mayo Health System | 40% | 37%-42% | N/A | 69% | 31% | Total Population | 1809 | 41% | 38%-43% | 75% | 63%-87% | N/A | 54% | 46% | Sample | 230 | 75% | 64%-84% |
| ST. CHARLES | ; | | | | | | 1 · · · · · · · · · · · · · · · · · · · | | | | | | | | | | | | |
| Olmsted Medical Center | Olmsted Medical Center | 46% | 41%-52% | N/A | 57% | 43% | Total Population | 373 | 47% | 42%-53% | 81% | 61%-100% | N/A | 38% | 62% | Sample | 69 | 80% | 63%-91% |
| ST. JAMES | ; | | | | | | 8 · · · · · · · · · · · · · · · · · · · | | | | | | | | | | | | |
| Mayo Health System-Immanuel St. Joseph | Mayo Health System | 40% | 37%-42% | N/A | 69% | 31% | Total Population | 1809 | 41% | 38%-43% | 75% | 63%-87% | N/A | 54% | 46% | Sample | 230 | 75% | 64%-84% |
| Moulton & Parsons MDs | | * | * | N/A | * | * | * | * | * | * | * | * | N/A | * | * | * * | * | * | * |
| ST. PETER | , | | | | | | | | | | | | | | | | | | |
| Mayo Health System-Immanuel St. Joseph | Mayo Health System | 40% | 37%-42% | N/A | 69% | 31% | Total Population | 1809 | 41% | 38%-43% | 75% | 63%-87% | N/A | 54% | 46% | Sample | 230 | 75% | 64%-84% |
| Mankato Clinic- Daniel's Health Center | Mankato Clinic | 49% | 45%-53% | N/A | 81% | 19% | Total Population | 749 | 49% | 45%-52% | 70% | 53%-87% | N/A | 62% | 38% | Sample | 90 | 70% | 52%-83% |

^{*} Sufficient data not available.

| Quality of | | | | Chl | amydi | ia Sc | reening | | | | Chil | dhoo | d Imn | nuniza | ation S | tatus | | |
|---|--------------------------------|--------------------|--|----------|---------------------------------|-------------------------|---|------------------------|--|--------------------|--|----------|----------------------------------|-------------------------|---------------------|-------------|---------------------------------------|--|
| Preventive Ca | are | | | Dis | dical Gr tributio nt Popu | n of | | | | | | Dis | dical Gr tribution nt Popu | ı of | | | • • • • • • • • • • • • • • • • • • • | |
| See page 89 for an explanation of t | terms. | Rate | erval of Risk | | | e Programs | on or Sample | sted Rate | erval of sted Rate | Rate | erval of Risk | | | e Programs | on or Sample | | sted Rate | erval of sted Rate |
| PHYSICIAN CLINIC NAME | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non-Risk Adjusted Rate | Risk Adjusted Rate | Confidence Interval o Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non-Risk Adjusted Rate |
| Overall Minnesota Clinic Average | | 49% | 49–50% | NA | 77% | 23% | | 49% | 49–50% | 80% | 78–81% | NA | 63% | 37% | | | 80% | 78–81% |
| River's Edge Clinic | River's Edge Hospital & Clinic | * | * | N/A | * | * | * * | * | * | * | * | N/A | * | * | * | * | * | * |
| STEWARTVILLE | | | | | | | | | | | | | | | | | | |
| Olmsted Medical Center | Olmsted Medical Center | 46% | 41%-52% | N/A | 57% | 43% | Total Population 373 | 47% | 42%-53% | 81% | 61%-100% | N/A | 38% | 62% | Sample | 69 | 80% | 63%-91% |
| TRACY | | | | | | | | | | | | | | | | | | |
| Sanford Clinic Tracy/ Balaton/Walnut Grove | Sanford Clinic | 37% | 33%-40% | N/A | 90% | 10% | Total Population 760 | 35% | 31%-38% | 67% | 56%-79% | N/A | 75% | 25% | Sample | 264 | 65% | 51%-76% |
| TYLER | | | | | | | | | | | | | | | | | | |
| Tyler Medical Clinic | Avera Health/Avera Tri-State | 32% | 28%-37% | N/A | 81% | 19% | Total Population 396 | 31% | 27%-36% | 54% | 37%-71% | N/A | 37% | 63% | Sample | 87 | 62% | 50%-72% |
| WABASHA | | | | | | | | | | | | | | | | | | |
| Mayo Health System-Wabasha Clinic | Mayo Health System | 40% | 37%-42% | N/A | 69% | 31% | Total Population 180 | 9 41% | 38%-43% | 75% | 63%-87% | N/A | 54% | 46% | Sample | 230 | 75% | 64%-84% |
| WANAMING0 | | | | | | | | | | | | | | | | | | |
| Olmsted Medical Center | Olmsted Medical Center | 46% | 41%-52% | N/A | 57% | 43% | Total Population 373 | 47% | 42%-53% | 81% | 61%-100% | N/A | 38% | 62% | Sample | 69 | 80% | 63%-91% |
| WASECA | | | | | | | | | | | | | | | | | | |
| Mayo Health System-Immanuel St. Joseph | Mayo Health System | 40% | 37%-42% | N/A | 69% | 31% | Total Population 180 | 9 41% | 38%-43% | 75% | 63%-87% | N/A | 54% | 46% | Sample | 230 | 75% | 64%-84% |
| WATKINS | | | | | | | | | | | | | | | | | ** | |
| Paynesville Watkins Medical Clinic | Paynesville Area Health System | 34% | 25%-43% | N/A | 71% | 29% | Total Population 102 | 34% | 26%-44% | * | * | N/A | | * | ψ | | * | * |

^{*} Sufficient data not available.

| Quality of | | | | Chl | amydi | a Sc | reening | | | | Chi | dhoo | d Imm | uniza | ation S | tatus | | |
|---|---|--------------------|--|---|----------------------------------|-------------------------|---|------------------------|--|--------------------|--|----------|------------------------------------|-------------------------|----------------------------|-------------|------------------------|--|
| Preventive Ca | are | | <u> </u> | Dis | dical Gr tribution nt Popu | n of | | | | | | Dist | dical Gro tribution nt Popul | of | | | | |
| See page 89 for an explanation of to | erms. | Rate | erval of Risk | 0 0 0 0 0 0 0 0 0 | | e Programs | n or Sample | ted Rate | erval of ited Rate | Rate | erval of Risk | | | e Programs | n or Sample | | ted Rate | erval of ted Rate |
| PHYSICIAN CLINIC NAME | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non-Risk Adjusted Rate | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non-Risk Adjusted Rate |
| Overall Minnesota Clinic Average | | 49% | 49–50% | NA | 77% | 23% | | 49% | 49–50% | 80% | 78–81% | NA | 63% | 37% | | | 80% | 78–81% |
| WESTBROOK | | | | | | | | | | | | | | | | | | |
| Sanford Clinic Westbrook | Sanford Clinic | 37% | 33%-40% | N/A | 90% | 10% | Total Population 760 | 35% | 31%-38% | 67% | 56%-79% | N/A | 75% | 25% | Sample | 264 | 65% | 51%-76% |
| WILLMAR | | | | | | | | | | | | | | | | | | |
| Affilliated Community Medical Centers | Affiliated Community Medical Centers | 49% | 45%-53% | N/A | 63% | 37% | Total Population 809 | 51% | 48%-54% | 91% | 85%-96% | N/A | 46% | 54% | Sample | 89 | 88% | 78%-94% |
| Family Practice Medical Center of Willmar | Family Practice Medical Center of Willmar | 70% | 58%-79% | N/A | 55% | 45% | Total Population 85 | 67% | 57%-76% | * | * | N/A | * | * | * | * | * | * |
| WINDOM | | | | | | | | | | | | | | | | | | |
| Avera- United Medical Clinic | Avera Health/Avera Tri-State | 32% | 28%-37% | N/A | 81% | 19% | Total Population 396 | 31% | 27%-36% | 54% | 37%-71% | N/A | 37% | 63% | Sample | 87 | 62% | 50%-72% |
| Hartberg Medical Clinic | Hartberg Medical Clinic | * | * | N/A | * | * | * * | * | * | * | * | N/A | * | * | * | * | * | * |
| Sanford Clinic Windom | Sanford Clinic | 37% | 33%-40% | N/A | 90% | 10% | Total Population 760 | 35% | 31%-38% | 67% | 56%-79% | N/A | 75% | 25% | Sample | 264 | 65% | 51%-76% |
| Windom Family Medical Center | | * | * | N/A | * | * | * * | * | * | * | * | N/A | * | * | * | * | * | * |
| WINONA | | | | | | | | | | | | | | | | | | |
| Family Medicine of Winona | Family Medicine of Winona | 16% | 10%-26% | N/A | 71% | 29% | Total Population 70 | 17% | 10%-28% | * | * | N/A | * | * | * | * | * | * |
| Winona Health- Winona Health Clinics | Winona Health | 42% | 36%-48% | N/A | 68% | 32% | Total Population 282 | 43% | 38%-49% | 82% | 74%-88% | N/A | 47% | 53% | Sample | 62 | 79% | 61%-90% |
| WINSTED | | | | | | | | | | | | | | | | | | |
| Ridgeview Winsted Clinic | Ridgeview Clinics | 48% | 41%-54% | N/A | 88% | 12% | Total Population 267 | 46% | 40%-52% | * | * | N/A | * | * | * | * | * | * |
| | | | | | | | | | | | | | | | | | | |

^{*} Sufficient data not available.

| Quality of | | | | Chla | amydi | a Sc | reening | | | | | Chi | dhoo | d Imm | nuniza | ation S | tatus | | |
|------------------------------------|------------------------------|--------------------|--|----------|----------------------------------|-------------------------|---|----|------------------------|--|--------------------|--|---|------------------------------------|-------------------------|---|-------------|------------------------|--|
| Preventive Ca | are | | | Dis | dical Gr tribution nt Popu | n of | | | | | | | Dis | dical Gre tribution nt Popul | ı of | | | | |
| See page 89 for an explanation of | terms. | Rate | erval of Risk | | | e Programs | on or Sample | | sted Rate | erval of sted Rate | Rate | erval of Risk | | | e Programs | on or Sample | | sted Rate | erval of sted Rate |
| PHYSICIAN CLINIC NAME | MEDICAL GROUP NAME | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample Sample Size | | Non-Risk Adjusted Rate | Confidence Interval of Non-Risk Adjusted Rate | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Medicare | Commercial | MN Health Care Programs | Total Population or Sample | Sample Size | Non-Risk Adjusted Rate | Confidence Interval of Non-Risk Adjusted Rate |
| Overall Minnesota Clinic Average | | 49% | 49–50% | NA | 77% | 23% | | | 49% | 49–50% | 80% | 78–81% | NA | 63% | 37% | 0 0 0 0 | | 80% | 78–81% |
| WORTHINGTON | | | | | | | | | | | | | | | | • | | | |
| Avera Worthington Specialty Clinic | Avera Health/Avera Tri-State | 32% | 28%-37% | N/A | 81% | 19% | Total Population 3 | 96 | 31% | 27%-36% | 54% | 37%-71% | N/A | 37% | 63% | Sample | 87 | 62% | 50%-72% |
| Sanford Clinic | Sanford Clinic | 37% | 33%-40% | N/A | 90% | 10% | Total Population 7 | 60 | 35% | 31%-38% | 67% | 56%-79% | N/A | 75% | 25% | Sample | 264 | 65% | 51%-76% |
| ZUMBROTA | | | | | | | | | | | | | , · · · · · · · · · · · · · · · · · · · | | | | | | |
| Fairview Red Wing Zumbrota Clinic | Fairview Health Services | 57% | 56%-59% | N/A | 77% | 23% | Total Population 32 | 93 | 57% | 55%-59% | 84% | 78%-89% | N/A | 64% | 36% | Sample | 254 | 84% | 78%-89% |
| | | | | | | | ************************************** | | | | | | | | | | | , | |
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^{*} Sufficient data not available.

DATA SOURCES AND DATA COLLECTION PROCEDURES

MEASURES REPORTED DIRECTLY BY PHYSICIAN CLINICS

Physician clinics directly report data on the optimal diabetes and optimal vascular care measures. All data elements are specified by the Minnesota Department of Health in Minnesota Rules Chapter 4654 and its technical appendices. These data elements are described at a more detailed level in MN Community Measurement's 2010 Direct Data Submission (DDS) Guide and Summary Data Submission (SDS) Guide (both relating to 2009 dates of service). These guides provide detailed steps and instructions to ensure submitted data meets rigorous standards.

Under Minnesota Rules Chapter 4654, physician clinics are required to submit data at a summary level. Physician clinics may meet these data submission requirements in one of two ways:

1) they may choose to submit data through the Direct Data Submission process as part of an agreement with MN Community Measurement (MNCM) and authorize MNCM to submit summary data results to MDH on their behalf; or 2) they may submit summary levels of information directly to MNCM's portal through the Summary Data Submission process. Data submitted through the DDS process are audited by MNCM. Virtually all clinics (519 out of 523 on the optimal diabetes measure and 518 out of 520 on the optimal vascular care measure) used the DDS process in reporting data on 2009 dates of service.

Regardless of which data submission method they use, physician clinics must first register through the MNCM Data Portal. Once registered, they indicate which data submission process they intend to use. In this reporting cycle, physician clinics could opt to report data on a clinic's total patient population or

to submit data for a random sample of the clinic's entire patient population. Detailed instructions for sampling are also provided in the DDS Guide and SDS Guide. Data is collected from medical records by clinic abstractors either extracting the data from an electronic medical record through a data query or by abstracting the data from a paper-based medical record. Physician clinics complete numerous quality checks of the data before it is submitted to MNCM. All appropriate HIPAA requirements are followed for data submitted through the DDS process. These requirements do not apply to summary data submission because no patient-identifiable information is reported.

The required data elements are submitted directly through the portal by physician clinics. If the data is submitted through the DDS process, an extensive validation process is followed. MNCM uses the National Committee for Quality Assurance's (NCQA) "8 and 30" File Sampling Procedure, developed in 1996 in consultation with Johns Hopkins University. For a detailed description of this procedure, see www.ncqa.org.

CLAIMS-BASED MEASURES CALCULATED AT THE MEDICAL GROUP LEVEL

The data source of claims-based measures calculated at the medical group level is the health plan administrative claims data-base which is supplemented by medical record review for some measures. Most data elements are specified by the Healthcare Effectiveness Data and Information Set (HEDIS) 2009 Technical Specifications (2008 dates of service). HEDIS is produced and maintained by the National Committee for Quality Assurance (NCQA). The technical specifications provide detailed steps and instructions to ensure that the submitted data meets rigorous standards. Some data elements are specified by MNCM and provided to the health plans.

The data elements are collected by the health plans using data collection and reporting standards that follow the annual HEDIS calendar. In addition, each health plan follows an extensive validation process to ensure quality measures follow the standards described in Volume 5, HEDIS Compliance Audit ®: Standards, Policies and Procedures. All health plan data are audited by an NCQA-certified HEDIS auditor.

MNCM develops a Data Structure document with detailed steps and instructions to ensure that the submitted data meets rigorous standards. In 2009, ten data sources – Blue Cross and Blue Shield of Minnesota, FirstPlan of Minnesota, HealthPartners, Medica, Metropolitan Health Plan, PreferredOne, PrimeWest Health System (county-based purchaser), Sanford Health Plan, South Country Health Alliance (county-based purchaser), UCare – submitted data to MNCM for purposes of public reporting. The submitted health plan data reflects patients/members enrolled in the following products: commercial HMO/POS/PPO, Medicare Cost, Medicare Risk, and Minnesota Health Care Programs (Prepaid Medical Assistance including dual eligibles, MinnesotaCare, General Assistance Medical Care). These data do not include patients who are uninsured, patients who self pay, or patients who are served by Medicaid/Medicare fee-for-service.

All data files are submitted to MNCM for aggregation and validation. These processes are performed by an independent vendor under contract with MNCM. Files are carefully reviewed to ensure conformance with the data structure and to identify unusual or unanticipated patterns. The files are also checked for proper formatting, missing and invalid values, and to confirm accurate record counts. Preliminary health plan rates are calculated and returned to each health plan for additional validation.

Once these checks are finalized, the data files from all ten health plans are aggregated to create a comprehensive data file of results by medical group. The aggregated data file is then checked for accurate record counts, and preliminary MNCM rates are calculated. The preliminary rates are carefully reviewed by MNCM staff and the data aggregation vendor. Particular attention is paid to notable changes from previous years at the statewide and medical group levels.

In this report, MDH is assigning the medical group score to each physician clinic that is part of that medical group. Approximately 40 physician clinics report they are now part of another medical group; these physician clinics received the medical group's score of which they were a part during the measurement period.

METHODOLOGY

MEASURES REPORTED DIRECTLY BY PHYSICIAN CLINICS

Two measures are reported directly by physician clinics—Optimal Diabetes Care and Optimal Vascular Care. These measures are "all-or-none" composite measures, meaning that each component of the measure must be achieved for a clinic to receive credit for providing optimal care for a particular patient. Each year, these measure specifications are reviewed against current evidence-based guidelines and input is sought from community experts. The measure specifications are incorporated into Minnesota Rules Chapter 4654 and its technical appendices.

Physician clinics without specialties related to a given measure have a "not applicable" designation in the table of results.

Eligible Population Specifications

The eligible populations for these measures are identified by physician clinics. Standard definitions for the eligible population for each measure include elements such as age, appropriate diagnosis codes, and number of visits needed in the measurement timeframe. Each required element is outlined in Minnesota Rules Chapter 4654 and further specified in the 2010 DDS and SDS Guide.

Patient Attribution to Physician Clinics

Medical groups must attribute each patient to a single physician clinic. Each medical group's patient attribution method must be identified by the medical group using one of three possible methods and is then reviewed by MNCM as part of the denominator certification process.

Sampling from Total Population

For this reporting cycle, physician clinics could either submit data on their full population or a random sample of at least 60 patients. The 2010 DDS and SDS Guides describe accepted methods to select a random sample. This step is reviewed by MNCM as part of the denominator certification process.

Numerator Specifications

The numerator is the number of patients identified from either the eligible population or the random sample who meet the numerator targets. These targets are specified by the Minnesota Department of Health in Minnesota Rules Chapter 4654 and its technical appendices. MNCM audits results of physician clinics using the DDS submission process.

Calculating Non-Risk Adjusted Rates

Physician clinic rates are calculated as 100 times the number who meet the numerator specifications divided by the number in the denominator for the measure. Rates from measures us-

ing the total eligible population are straightforward calculations whereby the total eligible population serves as the denominator. For clinics that sampled their populations, the rates calculated for the measures require weighting to account for the total eligible population. Due to the dynamic nature of clinic patient populations, rates and 95 percent asymmetrical confidence intervals are calculated for each measure for each clinic regardless of whether clinics report on a full population or a sample. Asymmetrical confidence intervals are used to avoid confidence interval lower-bound values less than zero and upper-bound values greater than one hundred. Physician clinic rates are reported as percentages. Physician clinic rates are first calculated for each clinic and then a statewide clinic rate average is calculated. The statewide average rate is used when comparing a single physician clinic to the performance of all physician clinics.

Risk Adjustment

Minnesota Statutes 62U.02 requires the Commissioner of Health to establish a system of risk-adjusting quality measures and to issue annual public reports on provider quality. The results in this report are published on a risk-adjusted basis in the main part of the document, while the technical appendices show both risk-adjusted and unadjusted results. Physician clinic results are adjusted by primary product type (commercial, Medicare, and MN health care programs/uninsured). Essentially, the riskadjusted results assume that all physician clinics have the same distribution of patients between these three different categories and multiplies their actual result for each product type by the statewide distribution of patients by product type. The calculation of confidence intervals for risk adjusted rates uses a similar methodology as described above for the calculation of non-risk adjusted rates. However, a weighted average of the variance for the different payer categories is used in the confidence interval calculation.*

^{*} Curtin, LR and RJ Klein. "Direct Standardization (Age-Adjusted Death Rates)." Centers for Disease Control and Prevention and National Center for Health Statistics. Healthy People 2000 Statistical Notes No. 6, 1995.

Example of Risk Adjustment Using Payer Mix

| Example 1 | | | | |
|----------------------------|--------------------|--------------------|----------|--------|
| UNADJUSTED RATE | COMMERCIAL | MN PUBLIC PROGRAMS | MEDICARE | TOTAL |
| CLINC A | | | | |
| # of patients | 340 | 20 | 40 | 400 |
| % distribution of patients | 85.0% | 5.0% | 10.0% | 100.0% |
| % meeting measure | 65.0% | 45.0% | 55.0% | 63.0% |
| CLINIC B | | | | |
| # of patients | 100 | 100 | 200 | 400 |
| % distribution of patients | 25.0% | 25.0% | 50.0% | 100.0% |
| % meeting measure | 65.0% | 45.0% | 55.0% | 55.0% |
| STATEWIDE | | | | |
| % distribution of patients | 73.0% | 12.0% | 15.0% | 100.0% |
| RISK ADJUSTED RATES TO S | TATEWIDE PAYER MIX | (| | |
| Clinic A | | | | 61.1% |
| Clinic B | | | | 61.1% |

| Example 2 UNADJUSTED RATE | COMMERCIAL | MN PUBLIC PROGRAMS | MEDICARE | TOTAL |
|----------------------------|--------------------|--------------------|-----------|--------|
| | COMMENCIAL | WINTOBLIC FROGRAMS | WILDIOANL | TOTAL |
| CLINC A | | | | |
| # of patients | 320 | 30 | 50 | 400 |
| % distribution of patients | 80.0% | 7.5% | 12.5% | 100.0% |
| % meeting measure | 62.5% | 20.0% | 68.0% | 60.0% |
| CLINIC B | | | | |
| # of patients | 120 | 200 | 80 | 400 |
| % distribution of patients | 30.0% | 50.0% | 20.0% | 100.0% |
| % meeting measure | 66.7% | 50.0% | 75.0% | 60.0% |
| STATEWIDE | | | | |
| % distribution of patients | 73.0% | 12.0% | 15.0% | 100.0% |
| RISK ADJUSTED RATES TO S | TATEWIDE PAYER MIX | (| | |
| Clinic A | | | | 58.2% |
| Clinic B | | | | 65.9% |

When a physician clinic has less than 10 patients in a payer category, the statewide rate is incorporated into the payer category rate in proportion to the number of patients under 10 in a payer category. For example, if a clinic has 6 Medicare patients, 60% of the Medicare rate for the clinic would be based on the clinic's data and 40% would be based on the statewide average for Medicare payers. This adjustment is made to address issues with small sample sizes.

Page 119 provides two examples of the risk adjustment methodology. In example one, Clinics A and B have a different patient payer mix, but their performance by product type is the same. Under risk adjustment, the overall performance for both clinics is the same as they had the same performance by product type. Without risk adjustment, Clinic A appears to perform better than Clinic B, but this is generally due to the fact that Clinic A has more commercial patients with higher performance and Clinic B has more Medicare and public program patients with lower performance. In the second example, Clinics A and B have the same unadjusted overall rate of performance, but their patient payer mix and performance by product type is different. When results for Clinics A and B are adjusted to reflect a statewide average distribution of patients by product type, the overall performance for Clinic A decreases and the overall performance for Clinic B increases. The unadjusted performance of individual clinics is adjusted to account for potential differences in patient populations which may be outside of the influence of a clinic. This product mix adjustment is done to make clinic results more comparable, regardless of patient characteristics.

Limitations

Although participation in the Minnesota Statewide Quality Reporting and Measurement System was required beginning in 2010, not all physician clinics submitted their results. Therefore, the results collected do not represent all physician clinics that serve patients in Minnesota. In addition, a physician clinic's results are publicly reported only if a minimum threshold of 30 patients is met. For this reason, MDH is not including results for 140 (or 24 percent) physician clinics reporting

data on the optimal vascular measure or 47 (or eight percent) physician clinics submitting data on the optimal diabetes care measure.

Physician Clinic Inclusion

A multistep approach was used to determine which physician clinics would be included in this report. The clinics listed in this document were required to submit data on the Optimal Diabetes Care and/or Optimal Vascular Care measures under Minnesota Rules Chapter 4654. Medical groups with HEDIS data who were not required to report on the diabetes or vascular measures are not included in this report. The following considerations were used to determine which physician clinics are included.

- In this first year of mandatory reporting, it was not uniformly understood among physician clinics that reporting is required at a site level. Physician clinics may only combine reporting across clinics when they meet certain criteria, including that various sites are commonly owned and share common clinical staff across their various sites. MDH recognizes that was a change from how some physician clinics previously reported on a voluntary basis and that new physician clinics may not have understood that results for a satellite clinic may not be combined with results from a main clinic. Recognizing this is a transition year for physician clinic reporting, MDH is publishing the results as they were reported at an aggregated level rather than noting that results were not submitted specifically for a satellite clinic location. In future years, MDH will call greater attention to this issue in the report.
- In May 2010, MDH mailed letters to known physician clinics in the state who had not registered with MNCM. Those clinics which did not register and submit data and were determined to have relevant specialists are included in the report. The same assumption regarding satellite clinics was used when reviewing these clinics. Those clinics that were part of a medical group which did submit data are not included separately from their medical group in this report.

Physician clinics which registered with MNCM, but did not submit measure data for diabetes and vascular care were compared with the specialty information submitted by the clinic during the registration process. If the specialties onsite were appropriate for measure reporting, the clinic is included in this report. If the specialties onsite were not appropriate for measure reporting, the clinic is not included in this report.

CLAIMS-BASED MEASURES CALCULATED AT THE MEDICAL GROUP LEVEL

Two types of measures are calculated at the medical group level and reported for each affiliated physician clinic – measures that use an administrative data only method and measures that use a hybrid method. The following measures use the administrative method:

- Appropriate Testing for Children with Pharyngitis
- Appropriate Treatment for Children with Upper Respiratory Infection
- Breast Cancer Screening
- Cervical Cancer Screening
- Chlamydia Screening
- Use of Appropriate Medications for People with Asthma
- Avoidance of Antibiotic Treatment of Adults with Bronchitis

The following measures used the hybrid method:

- Cancer Screening Combined
- Childhood Immunization Status (Combo 3)
- Controlling High Blood Pressure
- Colorectal Cancer Screening

Each year, these measure specifications are reviewed against current evidence-based guidelines and input is sought from community experts at the national level. Measurement specifications for medical group results were calculated using NCQA's 2009 HEDIS Technical Specifications along with MNCM-specific numerator specifications for some measures.

Physician clinics without specialties related to a given measure have a "not applicable" designation in the table of results.

Eligible Population Specifications

The eligible populations for the administrative and hybrid measures are identified by each participating health plan utilizing its respective administrative databases. NCQA's 2009 HEDIS Technical Specifications provide the standard definitions for the eligible population for each measure, which include data elements such as age, continuous enrollment, and anchor date requirements.

Rates for measures using the administrative method are wholly derived from health plan claims data, while rates for measures using the hybrid method are derived from a combination of health plan claims data and medical record review data. For administrative measures, the entire eligible population is the denominator. For hybrid measures, the eligible population serves as the sampling frame from which to draw the denominator.

Patient Attribution to Medical Groups

Health plans assign patients to a medical group using a frequency-based attribution logic and a standard medical group definition using Tax Identification Numbers. Administrative billing codes identify the frequency of patient visits to medical groups. For most measures, patients are assigned to the medical group they visited most frequently during the measurement year. Patients who visit two or more medical groups with the same frequency are attributed to the medical group visited most recently. For three measures – Appropriate Testing for Children with Pharyngitis, Appropriate Treatment for Children with Upper Respiratory Infection and Avoidance of Antibiotic Treatment of Adults with Bronchitis – patients are assigned to the clinic they visited for the specific service.

Sampling for Hybrid Measures

As noted previously, the hybrid method requires each participating health plan to first identify the eligible population meeting measurement specifications using its administrative databases. This population of eligibles serves as the sampling frame from which to draw the denominator (the patients for whom medical record review would be completed). The resource-intensive nature of medical record review necessitates a random sample of the eligible population. Medical record review is conducted for all enrollees drawn for the sample.

MNCM uses a two-stage, random sampling process. This strategy has been designed with statisticians to ensure reporting for the maximum number of medical groups while minimizing the impact of weighting on the results for any one medical group. The sampling procedure starts with the health plans providing a data file containing a record for each eligible patient for each hybrid measure. This file also identifies eligible patients that have also been selected for the annual HEDIS sample. Additional patients are then selected from the remaining eligible population to meet MNCM minimum reporting requirements.

Numerator Specifications

For administrative measures, the numerator is the number of patients from the eligible population who meet numerator targets. For hybrid measures, the numerator is the number of patients from the sample who meet numerator targets.

Weighting

Because data for hybrid measures are taken from a sample, results are weighted to obtain accurate rates. This allows for aggregation and unbiased reporting by medical group. Weighting is a cost-saving measure that enables MNCM to draw a sample on which to estimate medical group and statewide rates. Weighting is applied to efficiently utilize health plan resources for data collection on a randomly sampled population.

Weights are calculated for each sampling stratum (i.e. health plan/health plan product/medical group). A weight is equal to the total eligible population for that stratum divided by the total sample size. In calculating rates for a population – medical group or statewide – the denominator is the sum of the weights for all patients in that population, and the numerator is the sum of the weights for patients in the population who meet the numerator targets.

Calculating Non-Risk Adjusted Rates

Rates are expressed as percentages. They are calculated as 100 times the number who meet the numerator targets divided by the number who are eligible for the measure. Rates calculated for measures using the administrative method are straightforward. However, rates calculated for measures using the hybrid method require weighting because of the sampling procedures. Rates and 95-percent-asymmetrical confidence intervals are calculated for each measure for each medical group. Asymmetrical confidence intervals are used to avoid confidence interval lower-bound values less than zero and upper bound values greater than one hundred. Confidence intervals for the hybrid measures have also been calculated to take account of the complex sampling design and weighting using SAS survey.

Rates

Rates are calculated at both a statewide level and at a medical group level. Statewide rates include those patients attributed to a medical group AND those who could not be attributed to a medical group (i.e., all patients regardless of medical group affiliation). Medical group average rates include ONLY those patients who are attributed to medical groups. This rate is used when comparing a single medical group to the performance of all medical groups. The medical group average may be slightly higher than the statewide average, because it includes patients who access care more frequently.

Risk Adjustment

Results for measures calculated at the medical group level are also risk adjusted by primary payer type. Similar to results for the optimal diabetes care and optimal vascular care measures, the risk-adjusted results assume that all medical groups have the same distribution of patients by primary payer type (commercial, Medicare, and MN health care programs/uninsured) and multiplies their actual result for each product type by the statewide distribution of patients by product type. The calculation of confidence intervals for risk adjusted rates uses a similar methodology as described above for the calculation of non-risk adjusted rates. However, a weighted average of the variance for the different payer categories is used in the confidence interval calculation.*

Similar to optimal diabetes and optimal vascular care, when a medical group has less than 10 patients in a payer category, the statewide rate is incorporated into the payer category rate in proportion to the number of patients under 10 in a payer category. For example, if a medical group has 6 Medicare patients, 60% of the Medicare rate for the medical group would be based on the medical group's data and 40% would be based on the statewide average for Medicare payers. This adjustment is made to address issues with small sample sizes. Not all measures in these categories apply to each primary product type; the risk adjustment methodology accounts for these variations across measures.

Limitations

The physician clinics identified in this report do not represent all medical groups in Minnesota. MDH is aligning with MNCM's established minimum thresholds for public reporting. Only medical groups that meet these thresholds are reported. For the hybrid measures, a minimum threshold of 60 patients per medical group is required. For the administrative measures, a minimum threshold of 30 patients per medical group is required. It should also be noted that medical groups reported for some measures may not be reported for all measures.

Also, data used to calculate rates for these measures reflect patients insured through ten health plans. Medical groups with patients who are insured through other health plans, who are uninsured, who self pay, or who are served by a fee-for-service program are not reflected in these results. Therefore, the data for these measures don't necessarily represent a medical group's entire patient population.

Finally, while MDH is reporting these medical group level results at the clinic level, readers should be aware that these results reflect the performance of the entire medical group with which the clinic is affiliated rather than only that clinic's performance. MDH chose to report these results at the clinic level in order to present information in a more consumer-friendly manner.

Caution is recommended when making comparisons from year to year. Annual rate differences can occur due to natural variation, changes in measurement specifications, changes in data sources and other factors.

^{*} Curtin, LR and RJ Klein. "Direct Standardization (Age-Adjusted Death Rates)." Centers for Disease Control and Prevention and National Center for Health Statistics. Healthy People 2000 Statistical Notes No. 6. 1995.



The following section provides more information about the measures outlined in this report. Additional data elements are included in the following detailed tables. These elements vary depending on the measure and the data source. The methods section provides more information on the data source and calculation for the various measures.

GUIDE TO UNDERSTANDING THE DETAILED MEASURE RESULT DATA

HOSPITAL COMPARE AND APPROPRIATE CARE MEASURES

Rate:

Reports the percentage calculated when the numerator is divided by the denominator. The denominator is the sum of all the eligible cases submitted. The numerator is the sum of all eligible cases submitted where recommended care was provided.

Sample Size:

Reports the number of patients meeting the criteria for inclusion in the measure and for whom data was submitted. This column is the denominator number used to calculate the rate.

AGENCY FOR HEALTHCARE RESEARCH AND QUALITY (AHRQ) MEASURES

Number of Operations:

Reports the total number of measure specified surgeries performed at the hospital (for example, the total volume of heart bypass surgeries).

Numerator:

Reports the sum of all eligible cases meeting the targets for the procedure or complication in the measure (for example, the number of patients with bed sores).

Sample Size:

Reports the number of patients meeting the criteria for inclusion in the measure and for whom data was submitted. This column is the denominator number used to calculate the rate.

Observed Rate:

Reports the value when the numerator is divided by the denominator prior to any risk adjustment.

Expected Rate:

Reports the rate expected from the hospital based on the performance of other similar hospitals around the country. This calculation takes severity of patient illness into account.

When Compared to Expected Rate:

Reports whether the results were significantly different from the hospital's expected performance, compared to other similar hospitals around the country. This is calculated by comparing the confidence interval of the risk adjusted rate (see below) with the expected rate. NOTE: The Observed Tearing Vaginal Delivery with or without Medical Instruments (PSI 18 and PSI 19) measures are not risk adjusted; therefore, the value of the confidence interval of the observed rate is compared with the expected rate. The expected rate is considered significantly different when it is higher or lower than the confidence interval range. If it is within the confidence interval range, the expected rate is not considered significantly different from the risk adjusted rate. In this case, the hospital's performance is considered average or the SAME as expected. If the expected rate is higher, the hospital is performing BETTER than expected. If the expected rate is lower, the hospital is performing WORSE than expected.

Risk Adjusted Rate:

Reports the hospital's performance rate when adjusted to an average case-mix. This case-mix takes the severity of patient illness into account.

Confidence Interval of Risk Adjusted Rate:

Reports the margin of error for the risk adjusted rate. Confidence intervals are a range of values which demonstrate the degree of certainty associated with the estimated rate. This range takes into account potential variance in the rate if different patients were included in the sample.

HEALTHCARE-ASSOCIATED INFECTION MEASURES

Central Line Infection Prevention and Ventilator Associated Pneumonia Measures

Rate:

Reports the percentage calculated when the numerator is divided by the denominator. The denominator is the sum of all the eligible cases submitted. The numerator is the sum of all eligible cases submitted where recommended care was provided.

Sample Size:

Reports the number of patients meeting the criteria for inclusion in the measure and for whom data was submitted. This column is the denominator number used to calculate the rate.

Vaginal Hysterectomy Surgical Site Infection Measure Risk Level 0 and Risk Level 1,2,3

Numerator:

Reports the sum of surgical site infections for each risk level category (i.e. Risk Level 0 or Risk Level 1,2,3).

Sample Size:

Reports the number of patients meeting the criteria for inclusion in the measure and for whom data was submitted. This column is the denominator number used to calculate the rate.

Infection Rate:

Reports the value when the numerator is divided by the denominator prior to any risk adjustment.

Risk Level Combined 0,1,2,3

Numerator:

Reports the sum of vaginal hysterectomy surgical site infections for all risk levels.

Sample Size:

Reports the number of patients meeting the criteria for inclusion in the measure and for whom data was submitted. This column is the denominator number used to calculate the rate.

Infection Rate:

Reports the percentage when the numerator is divided by the denominator prior to any risk-adjustment.

Confidence Interval of Combined Rate:

Reports the margin of error for the risk adjusted rate. Confidence intervals are a range of values which demonstrate the degree of certainty associated with the estimated rate. This range takes into account potential variance in the rate if different patients were included in the sample.

Expected Rate:

Reports the rate of the hospital when compared to the state average. This rate is adjusted for patient severity of illness and takes both risk categories into account.

When Compared to Expected Rate:

Reports whether the results were significantly different from the hospital's expected performance, compared to other Minnesota hospitals. This is calculated by comparing the confidence interval of the combined rate with the expected rate. The difference between the expected rate and the infection rate are considered significant when the expected rate is higher or lower than the confidence interval range. If the expected rate is within the confidence interval of the combined rate, it is not significantly different from the infection rate. In this case the hospital's performance is considered average or the SAME as expected. If the expected rate is higher, the hospital is performing BETTER than expected. If the expected rate is lower, the hospital is performing WORSE than expected.

| Quality of | | | | Heart | Attack | | | | | | Heart Fail | ure · | |
|--|--|--|---|--|---|--|---|---|--|--|--|---|---|
| Care for Heart Conditions | ents (AMI-ACM) | | | Prescription tion (LVSD) Al-3) | About al (AMI-4) | otion Al-5) | .n (AMI-7a) | | ents (HF-ACM) | | tricular Systolic or Scheduled (HF-2) | Prescription ion (LVSD) -3) | or Counseling About Quitting Hospital (HF-4) |
| See page 204 for an explanation of terms. | ttack Patie | tient Arrive | tient was II (AMI-2) | or or ARB F c Dysfunct lospital (AN | ounseling the Hospita | er Prescrip Iospital (AN | Medicatio tal Arrival | 90 Minutes | ailure Pati | s When II (HF-1) | tion of Left Ventri in the Hospital or was Released (H | or or ARB F c Dysfunct lospital HF | ounseling airtal (HF-4) |
| HOSPITAL NAME | The Right Care for Heart Attack Patients (AMI-ACM) | Aspirin Given When the Patient Arrived at the Hospital (AMI-1) | Aspirin Given When the Patient was Released from the Hospital (AMI-2) | Patients Given ACE Inhibitor or ARB Prescription for Left Ventricular Systolic Dysfunction (LVSD) When Released from the Hospital (AMI-3) | Patients Given Advice or Counseling About | Patients Given Beta Blocker Prescription | Patients Given Fibrinolytic Medication Mithin 30 Minutes of Hospital Arrival (AMI-7a) | 문 Patients Given PCI Within 90 Minutes 유물 of Hospital Arrival (AMI-8a) | The Right Care for Heart Failure Patients (HF-ACM) | Patients Given Instructions When Released from the Hospital (HF-1) | Patients Given Evalua (LVS) Function While for After the Patient | Patients Given ACE Inhibitor or ARB Prescription for Left Ventricular Systolic Dysfunction (LVSD) | Patients Given Advice Smoking While in the |
| Overall Minnesota Average | RATE SIZE | RATE SIZE | RATE SIZE | RATE SIZE | RATE SIZE | RATE SIZE | RATE SIZE | RATE SIZE 94% | RATE SIZE | RATE SIZE | RATE SIZE | RATE SIZE | RATE SIZE |
| Albert Lea Medical Center: Mayo Health System | * * | * * | * * | * * | * * | * * | * * | * * | 78% 95 | 70% 53 | 95% 95 | * * | * * |
| Appleton Municipal Hospital and Nursing Home | * * | * * | * * | * * | . * * | * * | * * | * * | * * | * * | * * | * * | * * |
| Austin Medical Center: Mayo Health System | * * | * * | * * | * * | * * | * * | * * | * * | 94% 106 | 94% 72 | 99% 106 | * * | * * |
| Avera Marshall Regional Medical Center - Marshall | * * | * * | * * * | * * | * * * | * * | . * * | * * | * * | * * | 96% 26 | * * | * * * |
| Cannon Falls Medical Center: Mayo Health System | * * | * * | * * | * * | * * | * * | * * | * * * | * * | * * | * * | * * | * * |
| Chippewa County-Montevideo Hospital | * * | * * | * * | * * | * * | * * | * * | * * | * * | * * | * * | * * | * * |
| Fairmont Medical Center: Mayo Health System | * * | * * | * * | * * | * * | * * | * * | * * | 81% 100 | 70% 64 | 100% 100 | 100% 25 | * * |
| Fairview Red Wing Hospital | * * | * * | * * | * * | * * | * * | * * | * * | 97% 64 | 96% 45 | 100% 64 | * * | * * |
| Glencoe Regional Health Services | * * | * * | * * | * * | * * | * * | * * | * * | 69% 26 | * * | 96% 26 | * * | * * |
| Granite Falls Municipal Hospital and Manor | * * | * * | * * | * * | * * | * * | * * | * * | * * | * * | * * | * * | * * |
| Hendricks Community Hospital Association | * * | * * | * * | * * | * * | * * | * * | * * | * * | * * | * * | * * | * * |
| Holy Trinity Hospital: Graceville Health Center | * * | * * | * * | * * | * * | * * | * * | * * | * * | * * | * * | * * | * * |
| Hutchinson Community Hospital | * * | * * | * * | * * | * * | * * | * * | * * | 88% 57 | 83% 41 | 100% 57 | * * | * * |

^{*} Sufficient data not available.

| Quality of | | | | | | | He | art A | Attack | | | | | | | | | | Hea | rt Fail | ıre | | | |
|---|--|--|----------|---|--|-----------------------------|--------------|---|--|---------------|-------------|---|-------------|--|-----------|--|---------|-----------------------------------|--|--|--|--------------|------------------|--------------|
| Care for Heart Conditions | nts (AMI-ACM) | - | | | reccrintion | ion (LVSD) | About | II (AIMI-4) | ition == =: | (c-II | | (AMI-7a) | | | (MOA TIE) | SIIIS (RF-AGM) | | | cular Systolic | Scileunieu F-2) | rescription | -3) | About Quitting | |
| See page 204 for an explanation of terms. | Attack Patie | Patient Arrived | | atient was al (AMI-2) | tor or ARR P | ic Dysfunct Hospital (AN | Counseling / | ı tne Hospita | cer Prescrip | nospitai (Ali | c Medicatio | oital Arrival | 90 Minutes | a) | | | ns When | al (HF-1) | of Left Ventri | r nospital of Released (H | tor or ARB P | Hospital (HF | Counseling / | pital (HF-4) |
| HOSPITAL NAME | The Right Care for Heart Attack Patients (AMI-ACM) | Aspirin Given When the at the Hospital (AMI-1) | IPLE : | Aspirin Given When the Patient was Released from the Hospital (AMI-2) | Patients Given ACE Inhihitor or ARB Prescrintion | SAMPLE | | Multing Smoking While in the Hospital (AMI-4) | Patients Given Beta Blocker Prescription | AMPLE | | ब्बुट्ट Within 30 Minutes of Hospital Arrival (AML-7a) न | . — | azisa ata ata ot Hospitai Afrivai (AMI-8a) | Ι. | IIIE KIBIIL GATE IOI NEAIL FAIIUTE FAUEIUS (MF-AUM) THE | | Keleased Trom the Hospital (HF-1) | Patients Given Evaluation of Left Ventricular Systolic | (LVS) Function Wille III the nospital of Sol | Patients Given ACE Inhibitor or ARB Prescription | SAMPLE | | SAMPLE |
| Overall Minnesota Average | RATE SIZE 97% | RATE SI | IZE : | RATE SIZE | : | ATE SIZE | 90% | SIZE | RATE : 90% | SIZE | RATE * | SIZE | RATE 94% | SIZE | 83% | SIZE | 70% | SIZE | RATE : : 83% | SIZE | RATE 86% | SIZE | RATE : 83% | SIZE |
| Immanuel-St Josephs: Mayo Health System - Mankato | 100% 213 | 100% 12 | 3 | 100% 202 | 100 | 0% 40 | 100% | 46 | 100% 1 | 92 | * | * | 100% | 25 | 91% | 183 | 90% | 129 | 97% | 183 | 100% | 48 | * | * |
| Johnson Memorial Hospital - Dawson | * * | * | * | * * | , | * * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Lake City Medical Center: Mayo Health System | * * | * | * | * * | * | * * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Madelia Community Hospital | * * | * | * | * * | , | * * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Madison Hospital | * * | * | * | * * | , | * * | * | * | * | * | * | * | * | * | * | * | * | * | * * | * | * | * | * | * |
| Meeker County Memorial Hospital - Litchfield | * * | * | * | * * | , | * * | * | * | * | * | * | * | * | * | 32% | 31 | * | * | 74% | 31 | * | * | * | * |
| Methodist Hospital: Mayo Clinic - Rochester | * * | * | * | * * | , | * * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Minnesota Valley Health Center - Le Sueur | * * | * | * | * * | , | * * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Murray County Memorial Hospital - Slayton | * * | * | * | * * | , | * * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| New Ulm Medical Center | * * | * | * | * * | , | * * | * | * | * | * | * | * | * | * | 97% | 57 | 94% | 35 | 100% | 56 | * | * | * | * |
| Northfield Hospital | * * | * | * | * * | , | * * | * | * | * | * | * | * | * | * | 69% | 81 | 62% | 55 | 98% | 80 | * | * | * | * |
| Olmsted Medical Center - Rochester | * * | * | * | * * | , | * * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Ortonville Area Health Services | * * | * | * | * * | , | * * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |

^{*} Sufficient data not available.

Onality of

| Quality of | | | | Heart | t Attack | | | | | | Heart Fail | ure | |
|---|--|--|---|---|--|---|--|--------------------------------------|--|--|--|--|--|
| Care for Heart Conditions | ents (AMI-ACM) | D | | Prescription ion (LVSD) Al-3) | About al (AMI-4) | otion AI-5) | n (AMI-7a) | | ents (HF-ACM) | | tricular Systolic or Scheduled (HF-2) | Prescription ion (LVSD) 3) | About Quitting |
| See page 89 for an explanation of terms. | Vttack Patie | utient Arrive | atient was al (AMI-2) | or or ARB F ic Dysfunct Hospital (AN | ounseling the Hospita | er Prescrip Hospital (AN | : Medicatio iital Arrival | 90 Minutes | ailure Pati | is When al (HF-1) | f Left Ventri Hospital or Released (H | or or ARB F ic Dysfunct Hospital (HF | counseling pital (HF-4) |
| LICCRITAL NAME | The Right Care for Heart Attack Patients (AMI-ACM) | Aspirin Given When the Patient Arrived at the Hospital (AMI-1) | Aspirin Given When the Patient was Released from the Hospital (AMI-2) | Patients Given ACE Inhibitor or ARB Prescription for Left Ventricular Systolic Dysfunction (LVSD) When Released from the Hospital (AMI-3) | Patients Given Advice or Counseling About Quitting Smoking While in the Hospital (AMI-4) | Patients Given Beta Blocker Prescription When Released from the Hospital (AMI-5) | Patients Given Fibrinolytic Medication Within 30 Minutes of Hospital Arrival (AMI-7a) | Patients Given PCI Within 90 Minutes | The Right Care for Heart Failure Patients (HF-ACM) | Patients Given Instructions When Released from the Hospital (HF-1) | Patients Given Evaluation of Left Ventricular Systolic (LVS) Function While in the Hospital or Scheduled for After the Patient was Released (HF-2) | Patients Given ACE Inhibitor or ARB Prescription for Left Ventricular Systolic Dysfunction (LVSD) When Released from the Hospital (HF-3) | Patients Given Advice or Counseling About Quitting Smoking While in the Hospital (HF-4) |
| HOSPITAL NAME | RATE SIZE | RATE SIZI | E RATE SIZE | RATE SIZE | RATE SIZE | RATE SIZE | RATE SIZE | SAMPLE RATE SIZE | RATE SIZE | | SAMPLE RATE SIZE | RATE SIZE | SAMPLE RATE SIZE |
| Overall Minnesota Average | 97% | 95% | 93% | 94% | 90% | 90% | * | 94% | 83% | 70% | 83% | 86% | 83% |
| Owatonna Hospital | * * | * * | * * * | * * | * * * | * * | * * | * * | 96% 69 | 95% 42 | 97% 69 | * * | * * |
| Pipestone County Medical Center: Avera | * * | * * | * * * | * * | * * | * * | * * | * * | * * | * * | * * | * * | * * |
| Redwood Area Hospital - Redwood Falls | * * | * * | * * | * * | * * | * * | * * | * * | * * | * * | * * | * * | * * |
| Renville County Hospital And Clinics - Olivia | * * | * * | * * * | * * | * * | * * | * * | * * | * * | * * | * * | * * | * * |
| Rice County District One Hospital - Faribault | * * | * * | * * * | * * | * * | * * | * * | * * | 78% 69 | 88% 48 | 90% 68 | * * | * * |
| Rice Memorial Hospital - Willmar | * * | * * | * * * | * * | * * | * * | * * | * * | 84% 89 | 82% 50 | 97% 89 | 92% 26 | * * |
| River's Edge Hospital & Clinic - St. Peter | * * | * * | * * * | * * | * * | * * | * * | * * | * * | * * | * * | * * | * * |
| Sanford Canby Medical Center | * * | * * | * * * | * * | * * | * * | * * | * * | * * | * * | * * | * * | * * |
| Sanford Hospital Luverne | * * | * * | * * * | * * | * * | * * | * * | * * | * * | * * | * * | * * | * * |
| Sanford Jackson Medical Center | * * | * * | * * * | * * | * * | * * | * * | * * | * * | * * | * * | * * | * * |
| Sanford Regional Hospital Worthington | * * | * * | * * * | * * | * * | * * | * * | * * | 62% 37 | 85% 26 | 76% 37 | * * | * * |
| Sanford Tracy Medical Center | * * | * * | * * * | * * | * * | * * | * * | * * | * * | * * | * * | * * | * * |
| Sanford Westbrook Medical Center | * * | * * | * * * | * * | * * | * * | * * | * * | * * | * * | * * | * * | * * |

^{*} Sufficient data not available.

Quality of Cai Co

| Care for Heart Conditions See page 204 for an explanation of terms. | The Dirkt Pare for Unart Attack Dationte (AMI APM) | ING KIBNI GARG TOT NEARL ALIACK PALIENTS (AMI-AUM) | Aspirin Given When the Patient Arrived | at the Hospital (AMI-1) | Aspirin Given When the Patient was | Released from the Hospital (AMI-2) | Patients Given ACE Inhibitor or ARB Prescription for Leff Ventricular Systolic Dysfunction (LVSD) | When Released from the Hospital (AMI-3) | Patients Given Advice or Counseling About | Quitting Smoking While in the Hospital (AMI-4) | Patients Given Beta Blocker Prescription | When Released from the Hospital (AMI-5) | Patients Given Fibrinolytic Medication | Within 30 Minutes of Hospital Arrival (AMI-7a) | Patients Given PCI Within 90 Minutes | of Hospital Arrival (AMI-8a) | The Right Care for Heart Failure Patients (HE-ACM) | | Patients Given Instructions When | Released from the Hospital (HF-1) | Patients Given Evaluation of Left Ventricular Systolic | (LVS) Function While in the Hospital or Scheduled for After the Patient was Released (HF-2) | Patients Given ACE Inhibitor or ARB Prescription | for Left Ventricular Systolic Dysfunction (LVSD) | When Released from the Hospital (HF-3) | Patients Given Advice or Counseling About Quitting | אווטאוווץ אוווופ ווו עופ הטאףונמו (חר-יץ) |
|--|--|--|--|-------------------------|------------------------------------|------------------------------------|--|---|---|--|--|---|--|--|--------------------------------------|------------------------------|--|---------------|----------------------------------|-----------------------------------|--|--|--|--|--|--|---|
| HOSPITAL NAME | RATE | SAMPLE Size | RATE | SAMPLE Size | RATE | SAMPLE SIZE | RATE | SAMPLE Size | RATE | SAMPLE SIZE | RATE | SAMPLE Size | RATE | SAMPLE Size | RATE | SAMPLE Size | RATE S | AMPLE Size | RATE | SAMPLE Size | RATE | SAMPLE SIZE | R/ | SAN ATE S | MPLE Size | RATE | AMPLE SIZE |
| Overall Minnesota Average | 97% | | 95% | | 93% | | 94% | | 90% | | 90% | | * | | 94% | | 83% | | 70% | | 83% | | 86 | 6% | • | 83% | |
| Sibley Medical Center - Arlington | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | , | • | * | * | * |
| Sleepy Eye Medical Center | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | | ŧ | * | * | * |
| Springfield Medical Center: Mayo Health System | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | | ŧ | * | * | * |
| St Elizabeth Medical Center - Wabasha | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | | ł. | * | * | * |
| St James Medical Center: Mayo Health System | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | | k | * | * | * |
| St Mary's Hospital: Mayo Clinic - Rochester | 99% | 257 | 100% | 92 | 99% | 227 | 100% | 44 | 100% | 65 | 100% | 223 | * | * | * | * | 91% | 263 | 89% | 217 | 100% | 263 | 96 | 6% 8 | 80 | 100% | 32 |
| Swift County Benson Hospital | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | | k | * | * | * |
| Tyler Healthcare Center: Avera | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | | k | * | * | * |
| United Hospital District - Blue Earth | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | | k | * | * | * |
| Waseca Medical Center: Mayo Health System | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | | k | * | * | * |
| Windom Area Hospital | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | | k | * | * | * |
| Winona Health Services | 90% | 31 | 93% | 30 | * | * | * | * | * | * | * | * | * | * | * | * | 98% | 97 | 100% | 55 | 98% | 97 | | ŧ | * | * | * |
| | | | • | | : | | : | | : | | | | : | | : | | | | | | : | | : | | | | |

Heart Attack

Heart Failure

^{*} Sufficient data not available.

| Quality of |
|----------------|
| Care for Heart |
| Surgeries |

| Quality Of | 101 5 | : | - | | 101 | 10 | | | 101.0 | | 2 | B. o p . u.o. | 101.00 | - u.g., | | |
|--|----------------------|-----------|-------------|---------------|---------------|-----------------------------------|--------------------|--|----------------------|------------------|-------------|---------------|---------------|-----------------------------------|--------------------|--|
| Care for Heart | IQI-5 | • | | | IQI- | 12 | | | IQI-6 | • | | | IQI-30 | | | |
| Surgeries | | • | | | | | | | | 9 9 9 9 | | | | | | |
| See page 204 for an explanation of terms. | Number of Operations | Numerator | Sample Size | Observed Rate | Expected Rate | When Compared to Expected Rate | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Number of Operations | Numerator | Sample Size | Observed Rate | Expected Rate | When Compared to Expected Rate | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate |
| HOSPITAL NAME | ž | ž | Š | <u> </u> | <u> </u> | ≯ ₽ | <u>~</u> | o to | ž | Ž | | | <u> </u> | <u>> ₽</u> | <u>~</u> | <u> </u> |
| Albert Lea Medical Center: Mayo Health System | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Appleton Municipal Hospital and Nursing Home | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Austin Medical Center: Mayo Health System | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Avera Marshall Regional Medical Center - Marshall | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Cannon Falls Medical Center: Mayo Health System | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Chippewa County-Montevideo Hospital | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Fairmont Medical Center: Mayo Health System | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Fairview Red Wing Hospital | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Glencoe Regional Health Services | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Granite Falls Municipal Hospital and Manor | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Hendricks Community Hospital Association | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Holy Trinity Hospital: Graceville Health Center | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Hutchinson Community Hospital | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Immanuel-St Josephs: Mayo Health System - Mankato | * | * | * | * | * | * | * | * | 272 | 3 | 262 | 1.00% | 1.70% | SAME | 0.90% | 0.00-2.20% |
| Johnson Memorial Hospital - Dawson | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Lake City Medical Center: Mayo Health System | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Madelia Community Hospital | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |

Angioplasty Heart Surgery

Heart Bypass Surgery

^{*} Sufficient data not available or procedure is not performed at hospital.

| Quality of | | | Н | eart By | pass S | urgery | | | | | An | gioplas | ty Hea | rt Surgery | / | |
|--|----------------------|-----------|-------------|---------------|---------------|-----------------------------------|--------------------|--|----------------------|--|-------------|---------------|---------------|-----------------------------------|--------------------|--|
| Care for Heart | IQI-5 | | | | IQI- | 12 | | | IQI-6 | • | | | IQI-3 | 80 | | |
| Surgeries | 8 | | | | | | | | s | 0 0 0 0 0 0 0 0 0 0 | | | | | | |
| See page 204 for an explanation of terms. | Number of Operations | ator | Size | Observed Rate | Expected Rate | When Compared to Expected Rate | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Number of Operations | ator | Size | Observed Rate | Expected Rate | When Compared to Expected Rate | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate |
| HOSPITAL NAME | Number | Numerator | Sample Size | Observ | Expect | When C to Expe | Risk Ad | Confide of Risk | Number | Numerator | Sample Size | Observ | Expect | When C to Expe | Risk Ad | Confide of Risk |
| Madison Hospital | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Meeker County Memorial Hospital - Litchfield | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Methodist Hospital: Mayo Clinic - Rochester | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Minnesota Valley Health Center - Le Sueur | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Murray County Memorial Hospital - Slayton | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| lew Ulm Medical Center | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Northfield Hospital | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Olmsted Medical Center - Rochester | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| rtonville Area Health Services | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| watonna Hospital | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| ipestone County Medical Center: Avera | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| edwood Area Hospital - Redwood Falls | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| enville County Hospital And Clinics - Olivia | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| ice County District One Hospital - Faribault | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Rice Memorial Hospital - Willmar | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |

Sanford Canby Medical Center

 $^{\ ^{\}star}$ Sufficient data not available or procedure is not performed at hospital.

| Quality of |
|----------------|
| Care for Heart |
| Surgeries |

IQI-5

| Surgeries | | | | | | | | | | 9 9 9 9 9 9 | | | | | | |
|--|----------------------|-----------|-------------|---------------|---------------|-----------------------------------|--------------------|--|----------------------|----------------------------|-------------|---------------|---------------|-----------------------------------|--------------------|--|
| See page 204 for an explanation of terms. | Number of Operations | tor | Size | d Rate | d Rate | When Compared to Expected Rate | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Number of Operations | 10 | Size | d Rate | d Rate | When Compared to Expected Rate | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate |
| HOSPITAL NAME | Number | Numerator | Sample Size | Observed Rate | Expected Rate | When Co to Expec | Risk Adji | Confider of Risk A | Number | Numerator | Sample Size | Observed Rate | Expected Rate | When Co to Expec | Risk Adji | Confider of Risk A |
| Sanford Hospital Luverne | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Sanford Jackson Medical Center | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Sanford Regional Hospital Worthington | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Sanford Tracy Medical Center | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Sanford Westbrook Medical Center | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Sibley Medical Center - Arlington | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Sleepy Eye Medical Center | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Springfield Medical Center: Mayo Health System | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| St Elizabeth Medical Center - Wabasha | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| St James Medical Center: Mayo Health System | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| St Mary's Hospital: Mayo Clinic - Rochester | 813 | 21 | 808 | 2.60% | 3.50% | BETTER | 2.20% | 1.20-3.20% | 1289 | 22 | 1270 | 2.00% | 2.10% | BETTER | 1.20% | 0.70-1.60% |
| Swift County Benson Hospital | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Tyler Healthcare Center: Avera | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| United Hospital District - Blue Earth | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Waseca Medical Center: Mayo Health System | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Windom Area Hospital | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Winona Health Services | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |

Angioplasty Heart Surgery

1Q1-6

IQI-30

Heart Bypass Surgery

IQI-12

^{*} Sufficient data not available or procedure is not performed at hospital.

Quality of Care for Other Surgeries

| Quality of | Surgical Repair of an Abdominal Aortic Aneurysm | | | | | | | | | | Vaginal Hysterectomy Sugical Site Infection | | | | | | | | | | | | | |
|--|---|-----------|-------------|---------------|---------------|-----------------------------------|--------------------|--|-----------|-------------|---|-----------|-------------|--------------------------------|-----------|-------------|----------------|---------------------|---------------|-----------------------------------|--|--|--|--|
| Care for Other | IQI-4 | | | | IQ | I-11 | | | RIS | SK LEVI | EL O | RIS | K LEVEL | COMBINED RISK LEVEL 0, 1, 2, 3 | | | | | | | | | | |
| Surgeries | SU | | | | | | | ρ | | | | | | | | | | | | | | | | |
| See page 204 & 205 for an explanation of terms. | Number of Operations | Numerator | Sample Size | Observed Rate | Expected Rate | When Compared to Expected Rate | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | Numerator | Sample Size | Infection Rate | Numerator | Sample Size | Infection Rate | Numerator | Sample Size | Infection Rate | Confidence Interval | Expected Rate | When Compared to Expected Rate | | | | |
| HOSPITAL NAME | Num | Num | Sam | opse | Expe | Whe Expe | Risk | Conf of Ri | Num | Sam | Infec | Num | Sam | Infec | Num | Sam | Infec | Conf | Expe | Whe | | | | |
| Overall Minnesota Average | | | | | | | | | | | 0.99% | | | 1.65% | | | | | | | | | | |
| Albert Lea Medical Center: Mayo Health System | * | * | * | * | * | * | * | * | 0 | 65 | 0.00% | 0 | 25 | 0.00% | 0 | 90 | 0.00% | 0.00%-4.10% | 1.17% | SAME | | | | |
| Appleton Municipal Hospital and Nursing Home | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | | | | |
| Austin Medical Center: Mayo Health System | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | | | | |
| Avera Marshall Regional Medical Center - Marshall | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | | | | |
| Cannon Falls Medical Center: Mayo Health System | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | | | | |
| Chippewa County-Montevideo Hospital | * | * | * | * | * | * | * | * | 0 | 6 | 0.00% | 0 | 20 | 0.00% | 0 | 26 | 0.00% | 0.00%-14.19% | 1.49% | SAME | | | | |
| Fairmont Medical Center: Mayo Health System | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | | | | |
| Fairview Red Wing Hospital | * | * | * | * | * | * | * | * | 1 | 58 | 1.72% | 0 | 19 | 0.00% | 1 | 77 | 1.30% | 0.03%-7.24% | 1.15% | SAME | | | | |
| Glencoe Regional Health Services | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | | | | |
| Granite Falls Municipal Hospital and Manor | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | | | | |
| Hendricks Community Hospital Association | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | | | | |
| Holy Trinity Hospital: Graceville Health Center | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | | | | |
| Hutchinson Community Hospital | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | | | | |
| Immanuel-St Josephs: Mayo Health System - Mankato | * | * | * | * | * | * | * | * | 0 | 59 | 0.00% | 0 | 19 | 0.00% | 0 | 78 | 0.00% | 0.00%-4.73% | 1.15% | SAME | | | | |
| Johnson Memorial Hospital - Dawson | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | | | | |

^{*} Sufficient data not available or procedure is not performed at hospital.

Quality of Care for O Surgeries

| Quality of | | Su | | | ir of ar Aneur | n Abdomi ysm | nal | | Vaginal Hysterectomy Sugical Site Infection | | | | | | | | | | | | | |
|---|----------------------|-----------|-------------|---------------|-------------------|-----------------------------------|--------------------|--|---|-------------|---------------|----------------------------|-------------|--------------------------------|----------------------------|-------------|----------------|---------------------|---------------|-----------------------------------|--|--|
| Care for Other | IQI-4 IQI-11 | | | | | | | | | SK LEVE | L O | RISI | K LEVEL | COMBINED RISK LEVEL 0, 1, 2, 3 | | | | | | | | |
| Surgeries | રા | | | | | | | as de | | | | 0 0 0 0 0 0 | | | 0 0 0 0 0 0 | | | | | | | |
| See page 204 & 205 for an explanation of terms. | Number of Operations | ator | Sample Size | Observed Rate | Expected Rate | When Compared to Expected Rate | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | ator | e Size | nfection Rate | ator | Sample Size | Infection Rate | ator | e Size | Infection Rate | Confidence Interval | Expected Rate | When Compared to Expected Rate | | |
| | Numbe | Numerator | Sampl | Observ | Expec | When (Expect | Risk A | Confid of Rish | Numerator | Sample Size | Infecti | Numerator | Sample | Infecti | Numerator | Sample Size | Infectí | Confid | Expect | When I Expect | | |
| HOSPITAL NAME | | | | | | | | | | | | • | | | | | | | | | | |
| Overall Minnesota Average | | | | | | | | | | | 0.99% | • | | 1.65% | * | | | | | | | |
| Lake City Medical Center: Mayo Health System | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | | |
| Madelia Community Hospital | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | | |
| Madison Hospital | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | | |
| Meeker County Memorial Hospital - Litchfield | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | | |
| Methodist Hospital: Mayo Clinic - Rochester | * | * | * | * | * | * | * | * | 3 | 282 | 1.06% | 3 | 203 | 1.48% | 6 | 485 | 1.24% | 0.45%-2.69% | 1.26% | SAME | | |
| Minnesota Valley Health Center - Le Sueur | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | | |
| Murray County Memorial Hospital - Slayton | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | | |
| New Ulm Medical Center | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | | |
| Northfield Hospital | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | | |
| Olmsted Medical Center - Rochester | * | * | * | * | * | * | * | * | 1 | 43 | 2.33% | 2 | 21 | 9.52% | 3 | 64 | 4.69% | 0.97%-13.70% | 1.21% | SAME | | |
| Ortonville Area Health Services | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | | |
| Owatonna Hospital | * | * | * | * | * | * | * | * | 0 | 53 | 0.00% | 0 | 8 | 0.00% | 0 | 61 | 0.00% | 0.00%-6.05% | 1.08% | SAME | | |
| Pipestone County Medical Center: Avera | * | * | * | * | * | * | * | * | * | * | * | * * | * | * | * | * | * | * | * | * | | |
| Redwood Area Hospital - Redwood Falls | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | | |
| Renville County Hospital And Clinics - Olivia | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | | |

^{*} Sufficient data not available or procedure is not performed at hospital.

Quality of Care for C Surgeries

| Quality of | | Su | ırgica | l Repai Aortic | r of an Aneury | ı Abdomi ysm | inal | | Vaginal Hysterectomy Sugical Site Infection | | | | | | | | | | | | |
|---|----------------------|-----------|-------------|-------------------|-------------------|-----------------------------------|--------------------|--|---|-------------|----------------|-----------|-------------|----------------|-----------|-------------|----------------|---------------------|---------------|-----------------------------------|--|
| Care for Other | IQI-4 | | | | IQI | -11 | | | RI | SK LEVE | L O | RIS | K LEVEL | 1, 2, 3 | | CO | MBINED | RISK LEVEL |), 1, 2, | 3 | |
| Surgeries | SE . | | | | | | | e e | | | | • | | | • | | | | | | |
| See page 204 & 205 for an explanation of terms. | Number of Operations | ī | Size | d Rate | d Rate | When Compared to Expected Rate | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | tor | Size | n Rate | ro. | Size | n Rate | Tor | Size | n Rate | Confidence Interval | d Rate | When Compared to Expected Rate | |
| | Number | Numerator | Sample Size | Observed Rate | Expected Rate | When Co Expecte | Risk Adj | Confider of Risk | Numerator | Sample Size | Infection Rate | Numerator | Sample Size | Infection Rate | Numerator | Sample Size | Infection Rate | Confide | Expected Rate | When Co Expecte | |
| HOSPITAL NAME | | | | | | | | | | | | | | | | | | | | | |
| Overall Minnesota Average | | | | | | | | | | | 0.99% | | | 1.65% | | | | | | | |
| Rice County District One Hospital - Faribault | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | |
| Rice Memorial Hospital - Willmar | * | * | * | * | * | * | * | * | 0 | 56 | 0.00% | 0 | 9 | 0.00% | 0 | 65 | 0.00% | 0.00%-5.68% | 1.08% | AVERAGE | |
| River's Edge Hospital & Clinic - St. Peter | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | |
| Sanford Canby Medical Center | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | |
| Sanford Hospital Luverne | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | |
| Sanford Jackson Medical Center | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | |
| Sanford Regional Hospital Worthington | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | |
| Sanford Tracy Medical Center | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | |
| Sanford Westbrook Medical Center | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | |
| Sibley Medical Center - Arlington | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | |
| Sleepy Eye Medical Center | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | |
| Springfield Medical Center: Mayo Health System | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | |
| St Elizabeth Medical Center - Wabasha | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | |
| St James Medical Center: Mayo Health System | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | |
| St Mary's Hospital: Mayo Clinic - Rochester | 230 | 4 | 229 | 2.00% | 5.50% | BETTER | 1.60% | 0.00-3.90% | * | * | * | * | * | * | * | * | * | * | * | * | |

^{*} Sufficient data not available or procedure is not performed at hospital.

Quality of Care for O Surgeries

| Quality of | | Su | ırgical | l Repai | ir of an | n Abdomi vsm | nal | | Vaginal Hysterectomy Sugical Site Infection | | | | | | | | | | | | | |
|--|----------------------|-----------|-------------|---------------|---------------|-----------------------------------|--------------------|--|---|-------------|----------------|----------------------------|-------------|--------------------------------|-----------|-------------|----------------|---------------------|---------------|-----------------------------------|--|--|
| Care for Other | IQI-4 | | | | | I-11 | | | RIS | SK LEVE | L 0 | RIS | K LEVEL | COMBINED RISK LEVEL 0, 1, 2, 3 | | | | | | | | |
| Surgeries | s | | | | | | | | | | | 0 0 0 0 0 0 | | | • | | | | | | | |
| See page 204 &205 for an explanation of terms. | Number of Operations | tor | Size | Observed Rate | Expected Rate | When Compared to Expected Rate | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | ıtor | Size | ın Rate | tor | Size | ın Rate | tor | Size | Infection Rate | Confidence Interval | Expected Rate | When Compared to Expected Rate | | |
| | Number | Numerator | Sample Size | Observe | Expecte | When C Expecte | Risk Ad | Confide of Risk | Numerator | Sample Size | Infection Rate | Numerator | Sample Size | Infection Rate | Numerator | Sample Size | Infectio | Confide | Expecte | When C Expecte | | |
| HOSPITAL NAME | | | | | | | | | | | | | | | | | | | | | | |
| Overall Minnesota Average | | | | | | | | | | | 0.99% | | | 1.65% | | | | | | | | |
| Swift County Benson Hospital | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | | |
| Tyler Healthcare Center: Avera | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | | |
| United Hospital District - Blue Earth | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | | |
| Waseca Medical Center: Mayo Health System | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | | |
| Windom Area Hospital | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | | |
| Winona Health Services | * | * | * | * | * | * | * | * | 0 | 44 | 0.00% | 0 | 11 | 0.00% | 0 | 55 | 0.00% | 0.00%-6.71% | 1.12% | SAME | | |
| | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | |
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| | | | | | | | | | | | | | | | | | | | | | | |

^{*} Sufficient data not available or procedure is not performed at hospital.

See page 204 for an explanation of terms.

| | d Clots After Certain of Surgeries |
|---|--|
| Surgery Patients Whose Doctors Ordered Treatment to Prevent Blood Clots After Certain Types of Surgeries (SCIP-VTE1) | Surgery Patients Who Received Treatment at the Right Time to Prevent Blood Clots After Certain Types of Surgery (SCIP-VTE2) |

| | S O | — • | SE | 7 E | |
|--|------|----------------|------|----------------|-----------|
| HOSPITAL NAME | RATE | SAMPLE SIZE | RATE | SAMPLE SIZE | |
| Overall Minnesota Average | 87% | | 86% | | |
| Albert Lea Medical Center: Mayo Health System | 97% | 139 | 97% | 138 | |
| Appleton Municipal Hospital and Nursing Home | * | * | * | * | |
| Austin Medical Center: Mayo Health System | 98% | 123 | 96% | 123 | |
| Avera Marshall Regional Medical Center - Marshall | * | * | * | * | |
| Cannon Falls Medical Center: Mayo Health System | * | * | * | * | |
| Chippewa County-Montevideo Hospital | * | * | * | * | |
| Fairmont Medical Center: Mayo Health System | 97% | 59 | 97% | 59 | |
| Fairview Red Wing Hospital | 98% | 41 | 98% | 41 | |
| Glencoe Regional Health Services | * | * | * | * | |
| Granite Falls Municipal Hospital and Manor | * | * | * | * | |
| Hendricks Community Hospital Association | * | * | * | * | |
| Holy Trinity Hospital: Graceville Health Center | * | * | * | * | |
| Hutchinson Community Hospital | 96% | 89 | 96% | 89 | • • • • • |
| Immanuel-St Josephs: Mayo Health System - Mankato | 93% | 227 | 91% | 227 | |
| Johnson Memorial Hospital - Dawson | * | * | * | * | |

^{*} Sufficient data not available.

See page 204 for an explanation of terms.

| | od Clots After Certain of Surgeries |
|---|--|
| Surgery Patients Whose Doctors Ordered Treatment to Prevent Blood Clots After Certain Types of Surgeries (SCIP-VTE1) | Surgery Patients Who Received Treatment at the Right Time to Prevent Blood Clots After Certain Types of Surgery (SCIP-VTE2) |

| | ~ ~ ~ | m 5 | . 2 t | <u>-</u> | |
|---|-------|----------------|-------|----------------|--|
| HOSPITAL NAME | RATE | SAMPLE SIZE | RATE | SAMPLE SIZE | |
| Overall Minnesota Average | 87% | | 86% | | |
| Lake City Medical Center: Mayo Health System | * | * | * | * | |
| Madelia Community Hospital | * | * | * | * | |
| Madison Hospital | * | * | * | * | |
| Meeker County Memorial Hospital - Litchfield | * | * | * | * | |
| Methodist Hospital: Mayo Clinic - Rochester | 100% | 213 | 99% | 213 | |
| Minnesota Valley Health Center - Le Sueur | * | * | * | * | |
| Murray County Memorial Hospital - Slayton | * | * | * | * | |
| New Ulm Medical Center | 95% | 42 | 93% | 42 | |
| Northfield Hospital | 86% | 49 | 82% | 49 | |
| Olmsted Medical Center - Rochester | 94% | 87 | 94% | 87 | |
| Ortonville Area Health Services | * | * | * | * | |
| Owatonna Hospital | 86% | 37 | 86% | 37 | |
| Pipestone County Medical Center: Avera | * | * | * | * | |
| Redwood Area Hospital - Redwood Falls | * | * | * | * | |
| Renville County Hospital And Clinics - Olivia | * | * | * | * | |

^{*} Sufficient data not available.

See page 204 for an explanation of terms.

| | od Clots After Certain of Surgeries |
|---|--|
| Surgery Patients Whose Doctors Ordered Treatment to Prevent Blood Clots After Certain Types of Surgeries (SCIP-VTE1) | Surgery Patients Who Received Treatment at the Right Time to Prevent Blood Clots After Certain Types of Surgery (SCIP-VTE2) |

| HOSPITAL NAME | RATE | SAMPLE SIZE | RATE | SAMPLE SIZE | |
|--|------|----------------|------|----------------|--|
| Overall Minnesota Average | 87% | | 86% | | |
| Rice County District One Hospital - Faribault | 87% | 71 | 87% | 71 | |
| Rice Memorial Hospital - Willmar | 94% | 98 | 90% | 98 | |
| River's Edge Hospital & Clinic - St. Peter | * | * | * | * | |
| Sanford Canby Medical Center | * | * | * | * | |
| Sanford Hospital Luverne | * | * | * | * | |
| Sanford Jackson Medical Center | * | * | * | * | |
| Sanford Regional Hospital Worthington | 88% | 26 | * | * | |
| Sanford Tracy Medical Center | * | * | * | * | |
| Sanford Westbrook Medical Center | * | * | * | * | |
| Sibley Medical Center - Arlington | * | * | * | * | |
| Sleepy Eye Medical Center | * | * | * | * | |
| Springfield Medical Center: Mayo Health System | * | * | * | * | |
| St Elizabeth Medical Center - Wabasha | * | * | * | * | |
| St James Medical Center: Mayo Health System | * | * | * | * | |
| St Mary's Hospital: Mayo Clinic - Rochester | 100% | 224 | 99% | 224 | |

^{*} Sufficient data not available.

See page 204 for an explanation of terms.

HOSPITAL NAME Overall Minnesota Average 87% 86% Swift County Benson Hospital Tyler Healthcare Center: Avera United Hospital District - Blue Earth Waseca Medical Center: Mayo Health System Windom Area Hospital Winona Health Services 95%

^{*} Sufficient data not available.

| Quality of Care for Medical | | | | Seriou | m Failur ıs Comp | | | | Num | iber of | | ts with | Bed So | res | Number of Blood Clots in Lung or Large Vein After an Operation | | | | | | | | |
|--|-----------|-------------|---------------|---------------|-----------------------------------|--------------------|--|-----------|-------------|---------------|---------------|-----------------------------------|--------------------|--|---|-------------|---------------|---------------|-----------------------------------|--------------------|--|--|--|
| | | | | PSI- | -4 | | | | | | PS | I-3 | | | PSI-12 | | | | | | | | |
| Complications | | | | | | | ø. | | | | | | | a) | | | | | | | an an | | |
| See page 204 for an explanation of terms. | ator | e Size | Observed Rate | Expected Rate | When Compared to Expected Rate | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | ator | e Size | Observed Rate | Expected Rate | When Compared to Expected Rate | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | ator | e Size | Observed Rate | Expected Rate | When Compared to Expected Rate | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | | |
| HOSPITAL NAME | Numerator | Sample Size | Observ | Expect | When C Expect | Risk A | Confid of Risk | Numerator | Sample Size | Observ | Expect | When C Expect | Risk A | Confid of Risk | Numerator | Sample Size | Observ | Expect | When C Expect | Risk A | Confid of Risk | | |
| Albert Lea Medical Center: Mayo Health System | * | * | * | * | * | * | * | 2 | 358 | 0.56% | 1.89% | SAME | 0.54% | 0.00-1.94% | 1 | 727 | 0.14% | 0.97% | BETTER | 0.14% | 0.00-0.89% | | |
| Appleton Municipal Hospital and Nursing Home | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | | |
| Austin Medical Center: Mayo Health System | * | * | * | * | * | * | * | 3 | 870 | 0.34% | 1.74% | BETTER | 0.34% | 0.00-1.27% | 5 | 452 | 1.11% | 0.98% | SAME | 1.13% | 0.19-2.08% | | |
| Avera Marshall Regional Medical Center - Marshall | * | * | * | * | * | * | * | 2 | 212 | 0.94% | 1.73% | SAME | 0.97% | 0.00-2.86% | 1 | 172 | 0.58% | 1.01% | SAME | 0.58% | 0.00-2.09% | | |
| Cannon Falls Medical Center: Mayo Health System | * | * | * | * | * | * | * | 0 | 36 | 0.00% | 1.76% | SAME | 0.00% | 0.00-4.58% | 0 | 29 | 0.00% | 0.97% | SAME | 0.00% | 0.00-3.75% | | |
| Chippewa County-Montevideo Hospital | * | * | * | * | * | * | * | 0 | 168 | 0.00% | 1.76% | SAME | 0.00% | 0.00-2.12% | 0 | 169 | 0.00% | 1.02% | SAME | 0.00% | 0.00-1.52% | | |
| Fairmont Medical Center: Mayo Health System | * | * | * | * | * | * | * | 1 | 489 | 0.20% | 1.80% | BETTER | 0.20% | 0.00-1.43% | 6 | 465 | 1.29% | 0.99% | SAME | 1.32% | 0.39-2.25% | | |
| Fairview Red Wing Hospital | 0 | 25 | 0.00% | 9.65% | SAME | 0.00% | 0.00-14.33% | 0 | 214 | 0.00% | 1.82% | BETTER | 0.00% | 0.00-1.81% | 3 | 585 | 0.51% | 0.98% | SAME | 0.53% | 0.00-1.36% | | |
| Glencoe Regional Health Services | * | * | * | * | * | * | * | 0 | 106 | 0.00% | 1.79% | SAME | 0.00% | 0.00-2.63% | 0 | 203 | 0.00% | 1.00% | SAME | 0.00% | 0.00-1.40% | | |
| Granite Falls Municipal Hospital and Manor | * | * | * | * | * | * | * | 0 | 94 | 0.00% | 1.74% | SAME | 0.00% | 0.00-2.86% | * | * | * | * | * | * | * | | |
| Hendricks Community Hospital Association | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | | |
| Holy Trinity Hospital: Graceville Health Center | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | | |
| Hutchinson Community Hospital | * | * | * | * | * | * | * | 1 | 481 | 0.21% | 1.75% | BETTER | 0.22% | 0.00-1.46% | 4 | 560 | 0.71% | 0.99% | SAME | 0.73% | 0.00-1.58% | | |
| Immanuel-St Josephs: Mayo Health System - Mankato | 5 | 85 | 5.88% | 12.18% | SAME | 6.09% | 0.00-13.07% | 10 | 2085 | 0.48% | 1.82% | BETTER | 0.48% | 0.00-1.07% | 19 | 3213 | 0.59% | 0.98% | BETTER | 0.61% | 0.26-0.97% | | |
| Johnson Memorial Hospital - Dawson | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | | |
| Lake City Medical Center: Mayo Health System | * | * | * | * | * | * | * | 0 | 60 | 0.00% | 1.79% | SAME | 0.00% | 0.00-3.51% | 0 | 78 | 0.00% | 1.05% | SAME | 0.00% | 0.00-2.20% | | |
| Madelia Community Hospital | * | * | * | * | * | * | * | 0 | 31 | 0.00% | 1.77% | SAME | 0.00% | 0.00-4.90% | * | * | * | * | * | * | * | | |

^{*} Sufficient data not available.

| Quality of Care | Nun | | | ths fron Seriou | | | | Number of Patients with Bed Sores PSI-3 | | | | | | | | Number of Blood Clots in Lung or Large Vein After an Operation | | | | | | | | |
|---|-----------|-------------|---------------|--------------------|-----------------------------------|--------------------|--|---|-------------|---------------|---------------|-----------------------------------|--------------------|--|-----------|---|---------------|---------------|-----------------------------------|--------------------|--|--|--|--|
| for Medical | | | | PSI- | 4 | | | | | | | | | | | PSI-12 | | | | | | | | |
| Complications | | | | | | | | | | | | | | | | | | | | | | | | |
| See page 204 for an explanation of terms. | tor | Size | d Rate | d Rate | When Compared to Expected Rate | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | tor | Size | d Rate | d Rate | When Compared to Expected Rate | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | tor | Size | d Rate | d Rate | When Compared to Expected Rate | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | | | |
| HOSPITAL NAME | Numerator | Sample Size | Observed Rate | Expected Rate | When Compare Expected Rate | Risk Adj | Confide of Risk | Numerator | Sample Size | Observed Rate | Expected Rate | When Compare Expected Rate | Risk Adj | Confide of Risk | Numerator | Sample Size | Observed Rate | Expected Rate | When Compare Expected Rate | Risk Adj | Confide of Risk | | | |
| Madison Hospital | * | * | * | * | * | * | * | 0 | 87 | 0.00% | 1.70% | SAME | 0.00% | 0.00-2.99% | * | * | * | * | * | * | * | | | |
| Meeker County Memorial Hospital - Litchfield | * | * | * | * | * | * | * | 1 | 177 | 0.56% | 1.80% | SAME | 0.55% | 0.00-2.59% | 0 | 129 | 0.00% | 0.99% | SAME | 0.00% | 0.00-1.76% | | | |
| Methodist Hospital: Mayo Clinic - Rochester | 18 | 256 | 7.03% | 13.08% | BETTER | 6.78% | 2.97-10.59% | 4 | 3426 | 0.12% | 1.82% | BETTER | 0.12% | 0.00-0.57% | 41 | 10281 | 0.40% | 1.02% | BETTER | 0.40% | 0.20-0.59% | | | |
| Minnesota Valley Health Center - Le Sueur | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | | | |
| Murray County Memorial Hospital - Slayton | * | * | * | * | * | * | * | 0 | 46 | 0.00% | 1.79% | SAME | 0.00% | 0.00-4.01% | 0 | 71 | 0.00% | 1.01% | SAME | 0.00% | 0.00-2.35% | | | |
| New Ulm Medical Center | * | * | * | * | * | * | * | 0 | 287 | 0.00% | 1.81% | BETTER | 0.00% | 0.00-1.57% | 0 | 364 | 0.00% | 1.03% | BETTER | 0.00% | 0.00-1.02% | | | |
| Northfield Hospital | * | * | * | * | * | * | * | 0 | 94 | 0.00% | 1.78% | SAME | 0.00% | 0.00-2.77% | 0 | 354 | 0.00% | 0.95% | SAME | 0.00% | 0.00-1.08% | | | |
| Olmsted Medical Center - Rochester | * | * | * | * | * | * | * | 0 | 147 | 0.00% | 1.78% | SAME | 0.00% | 0.00-2.24% | 2 | 573 | 0.35% | 0.94% | SAME | 0.37% | 0.00-1.22% | | | |
| Ortonville Area Health Services | * | * | * | * | * | * | * | 0 | 73 | 0.00% | 1.73% | SAME | 0.00% | 0.00-3.23% | 0 | 25 | 0.00% | 0.93% | SAME | 0.00% | 0.00-4.11% | | | |
| Owatonna Hospital | * | * | * | * | * | * | * | 4 | 227 | 1.76% | 1.73% | SAME | 1.79% | 0.00-3.62% | 4 | 521 | 0.77% | 0.97% | SAME | 0.79% | 0.00-1.67% | | | |
| Pipestone County Medical Center: Avera | * | * | * | * | * | * | * | 1 | 81 | 1.23% | 1.75% | SAME | 1.29% | 0.00-4.34% | 1 | 154 | 0.65% | 0.95% | SAME | 0.70% | 0.00-2.34% | | | |
| Redwood Area Hospital - Redwood Falls | * | * | * | * | * | * | * | 0 | 92 | 0.00% | 1.81% | SAME | 0.00% | 0.00-2.82% | * | * | * | * | * | * | * | | | |
| Renville County Hospital And Clinics - Olivia | * | * | * | * | * | * | * | 0 | 36 | 0.00% | 1.79% | SAME | 0.00% | 0.00-4.53% | * | * | * | * | * | * | * | | | |
| Rice County District One Hospital - Faribault | * | * | * | * | * | * | * | 0 | 223 | 0.00% | 1.87% | BETTER | 0.00% | 0.00-1.79% | 0 | 333 | 0.00% | 0.98% | SAME | 0.00% | 0.00-1.10% | | | |
| Rice Memorial Hospital - Willmar | 3 | 28 | 10.71% | 11.43% | SAME | 11.83% | 0.00-24.24% | 0 | 644 | 0.00% | 1.76% | BETTER | 0.00% | 0.00-1.07% | 3 | 777 | 0.39% | 1.02% | SAME | 0.39% | 0.00-1.09% | | | |
| River's Edge Hospital & Clinic - St. Peter | * | * | * | * | * | * | * | 0 | 103 | 0.00% | 1.73% | SAME | 0.00% | 0.00-2.73% | * | * | * | * | * | * | * | | | |
| Sanford Canby Medical Center | * | * | * | * | * | * | * | 0 | 147 | 0.00% | 1.76% | SAME | 0.00% | 0.00-2.26% | 0 | 53 | 0.00% | 1.02% | SAME | 0.00% | 0.00-2.70% | | | |

^{*} Sufficient data not available.

| Quality of Care |
|-----------------|
| for Medical |
| Complications |
| |

See page 204 for an explanation of terms.

| | ţ | Size | ed Rat | d Rat | mpare I Rate | ustec | nce Ir Adjust | ţ | Size | d Rat | d Rat | mpare I Rate | usted | nce Ir Adjusi | Ē | Size | ed Rat | d Rat | mpare I Rate | usted | nce Ir Adjus |
|--|-----------|-------------|--------------|--------------|-------------------------------|---------------|---------------------------------|-----------|-----------------|--------------------|--------------------|-------------------------------|--------------------|---------------------------------|-----------|-------------|--------------|--------------|-------------------------------|---------------|---------------------------------|
| HOSPITAL NAME | Numerator | Sample Size | Observed Rat | Expected Rat | When Compare Expected Rate | Risk Adjusted | Confidence Ir of Risk Adjust | Numerator | Sample Size | Observed Rat | Expected Rat | When Compare Expected Rate | Risk Adjusted | Confidence Ir of Risk Adjust | Numerator | Sample Size | Observed Rat | Expected Rat | When Compare Expected Rate | Risk Adjusted | Confidence Ir of Risk Adjust |
| Sanford Hospital Luverne | * | * | * | * | * | * | * | 0 | 73 | 0.00% | 1.72% | SAME | 0.00% | 0.00-3.25% | 0 | 36 | 0.00% | 0.98% | SAME | 0.00% | 0.00-3.35% |
| Sanford Jackson Medical Center | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Sanford Regional Hospital Worthington | * | * | * | * | * | * | * | 0 | 251 | 0.00% | 1.70% | SAME | 0.00% | 0.00-1.74% | 0 | 176 | 0.00% | 0.96% | SAME | 0.00% | 0.00-1.53% |
| Sanford Tracy Medical Center | * | * | * | * | * | * | * | 0 | 55 | 0.00% | 1.73% | SAME | 0.00% | 0.00-3.75% | * | * | * | * | * | * | * |
| Sanford Westbrook Medical Center | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Sibley Medical Center - Arlington | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Sleepy Eye Medical Center | * | * | * | * | * | * | * | 0 | 78 | 0.00% | 1.72% | SAME | 0.00% | 0.00-3.15% | 0 | 28 | 0.00% | 0.97% | SAME | 0.00% | 0.00-3.81% |
| Springfield Medical Center: Mayo Health System | * | * | * | * | * | * | * | 2 | 53 | 3.77% | 1.76% | SAME | 3.81% | 0.05-7.57% | * | * | * | * | * | * | * |
| St Elizabeth Medical Center - Wabasha | * | * | * | * | * | * | * | 0 | 84 | 0.00% | 1.79% | SAME | 0.00% | 0.00-2.97% | 0 | 51 | 0.00% | 0.99% | SAME | 0.00% | 0.00-2.79% |
| St James Medical Center: Mayo Health System | * | * | * | * | * | * | * | 0 | 30 | 0.00% | 1.74% | SAME | 0.00% | 0.00-5.05% | * | * | * | * | * | * | * |
| St Mary's Hospital: Mayo Clinic - Rochester | 95 | 841 | 11.30% | 14.14% | BETTER | 10.08% | 8.06-12.10% | 15 | 10442 | 0.14% | 1.83% | BETTER | 0.14% | 0.00-0.40% | 132 | 16359 | 0.81% | 1.06% | BETTER | 0.78% | 0.63-0.93% |
| Swift County Benson Hospital | * | * | * | * | * | * | * | 0 | 45 | 0.00% | 1.74% | SAME | 0.00% | 0.00-4.10% | 0 | 35 | 0.00% | 1.00% | SAME | 0.00% | 0.00-3.36% |
| Tyler Healthcare Center: Avera | * | * | * | * | * | * | * | 1† | 37 [†] | 2.70% [†] | 1.75% [†] | SAME [†] | 2.81% [†] | 0.00-7.36% [†] | * | * | * | * | * | * | * |
| United Hospital District - Blue Earth | * | * | * | * | * | * | * | 0 | 89 | 0.00% | 1.73% | SAME | 0.00% | 0.00-2.93% | 0 | 58 | 0.00% | 1.00% | SAME | 0.00% | 0.00-2.61% |
| Waseca Medical Center: Mayo Health System | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Windom Area Hospital | * | * | * | * | * | * | * | 0 | 59 | 0.00% | 1.82% | SAME | 0.00% | 0.00-3.53% | * | * | * | * | * | * | * |
| Winona Health Services | * | * | * | * | * | * | * | 0 | 612 | 0.00% | 1.74% | BETTER | 0.00% | 0.00-1.10% | 4 | 338 | 1.18% | 0.98% | SAME | 1.23% | 0.14-2.31% |

^{*} Sufficient data not available.

Number of Deaths from Failure to Identify

and Treat a Serious Complication

PSI-4

Number of Blood Clots in Lung or

Large Vein After an Operation

PSI-12

Number of Patients with Bed Sores

PSI-3

[†] Comment from Tyler Healthcare Center: The decubitus ulcer was present on admission

Quality of

| Quality of | | | | | | | | Infe | ction Pre | vention | | | | | | |
|--|------------------------------|----------------|---|---------------|--|--|----------------------------|---|--------------------------------|--|---|--|---|----------------|--|---|
| Infection Prevention | on (GLI) | | d Pneumonia | | ven an Hour | eip Prevent -1) | ven the | .2) | 10se Preven- | cIP-INF-3) | itients is Kept Pich+ | INF-4) | Needing Hair Currenty Heing | P-INF-6) | Beta-Blocker ival Who ocker During | ariod |
| See page 204 & 205 for an explanation of terms. | Central Line Infection (CLI) | Prevention | Ventilator Associated Pneumonia (VAP) Prevention | | Surgery Patients Given an Antibiotic Within an Hour | berore surgery to heip Prevent Infection (SCIP-INF-1) | Surgery Patients Given the | best anniplic to neip rrevent Infection (SCIP-INF-2) | Surgery Patients Whose Preven- | tive Antubolics were scopped at the Right Time (SCIP-INF-3) | All Heart Surgery Patients Whose Blood Sugar is Kept | Onuel good Colli of Ingil. After Surgery (SCIP-INF-4) | Surgery Patients Needing Hair Penoved Refere Surgery Using | thod () | Surgery Patients on Beta-Blocker Therapy Prior to Arrival Who Received a Beta-Blocker During | the Perioperative Period (SCIP-CARD-2) |
| HOSPITAL NAME | | SAMPLE SIZE | | AMPLE Size | RATE | SAMPLE SIZE | RATE | SAMPLE SIZE | RATE | SAMPLE SIZE | RATE | SAMPLE SIZE | RATE | SAMPLE SIZE | RATE | SAMPLE SIZE |
| Overall Minnesota Average | 87% | | 96% | | 86% | | 94% | | 94% | | 87% | | 96% | | 87% | |
| Albert Lea Medical Center: Mayo Health System | * | * | * | * | 98% | 264 | 100% | 272 | 98% | 257 | * | * | 100% | 333 | 96% | 67 |
| Appleton Municipal Hospital and Nursing Home | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Austin Medical Center: Mayo Health System | * | * | * | * | 100% | 146 | 99% | 148 | 95% | 142 | * | * | 100% | 191 | 93% | 60 |
| Avera Marshall Regional Medical Center - Marshall | * | * | * | * | 88% | 56 | 96% | 56 | 93% | 56 | * | * | * | * | * | * |
| Cannon Falls Medical Center: Mayo Health System | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Chippewa County-Montevideo Hospital | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Fairmont Medical Center: Mayo Health System | * | * | * | * | 94% | 163 | 98% | 164 | 97% | 158 | * | * | 100% | 228 | 100% | 64 |
| Fairview Red Wing Hospital | * | * | * | * | 99% | 178 | 100% | 178 | 95% | 171 | * | * | 100% | 225 | 100% | 49 |
| Glencoe Regional Health Services | * | * | * | * | 91% | 81 | 91% | 81 | 96% | 81 | * | * | 100% | 89 | * | * |
| Granite Falls Municipal Hospital and Manor | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Hendricks Community Hospital Association | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Holy Trinity Hospital: Graceville Health Center | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Hutchinson Community Hospital | * | * | * | * | 91% | 199 | 97% | 203 | 97% | 193 | * | * | 100% | 267 | 97% | 58 |
| Immanuel-St Josephs: Mayo Health System - Mankato | 98% | 187 | 100% 13 | 37 | 97% | 276 | 98% | 276 | 96% | 269 | * | * | 99% | 555 | 95% | 125 |
| Johnson Memorial Hospital - Dawson | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |

^{*} Sufficient data not available.

| Quality of | | | | | | | | Infe | ction Pre | vention | • | | | | | |
|---|------------------------------|----------------|---------------------------------|----------------|--|--|----------------------------|---|---|--------------------------------|---|--|---|-----------------------------|--|---|
| Infection Prevention See page 204 & 205 for an explanation of terms. | Central Line Infection (CLI) | Ì | Ventilator Associated Pneumonia | ention | Surgery Patients Given an Antibiotic Within an Hour | Before Surgery to Help Prevent Infection (SCIP-INF-1) | Surgery Patients Given the | best Antibiotic to help Prevent Infection (SCIP-INF-2) | Surgery Patients Whose Preven- tive Antihictics Ware Stonned | at the Right Time (SCIP-INF-3) | All Heart Surgery Patients Whose Blood Sugar is Kept | under Good Control Kignt After Surgery (SCIP-INF-4) | Surgery Patients Needing Hair Removed Before Surgery Using | a Safer Method (SCIP-INF-6) | Surgery Patients on Beta-Blocker Therapy Prior to Arrival Who Received a Beta-Blocker During | the Perioperative Period (SCIP-CARD-2) |
| LIOCDITAL NAME | Central Li | | Ventilator | | | | Surgery P | | Surgery Pa | | All Heart Surg Whose Blood | | | | Surgery Pa Therapy Pa Received | |
| HOSPITAL NAME | RATE | SAMPLE SIZE | RATE | SAMPLE SIZE | • | SAMPLE SIZE | RATE | SAMPLE SIZE | RATE | SAMPLE SIZE | RATE | SAMPLE SIZE | : | SAMPLE SIZE | RATE | SAMPLE SIZE |
| Overall Minnesota Average | 87% | | 96% | | 86% | | 94% | | 94% | | 87% | | 96% | | 87% | |
| Lake City Medical Center: Mayo Health System | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Madelia Community Hospital | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Madison Hospital | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Meeker County Memorial Hospital - Litchfield | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Methodist Hospital: Mayo Clinic - Rochester | 78% | 170 | 99% | 563 | 98% | 353 | 99% | 353 | 97% | 345 | * | * | 99% | 578 | 93% | 107 |
| Minnesota Valley Health Center - Le Sueur | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Murray County Memorial Hospital - Slayton | * | * | * | * | 89% | 46 | 100% | 46 | 98% | 46 | * | * | 77% | 52 | * | * |
| New Ulm Medical Center | * | * | * | * | 98% | 104 | 100% | 104 | 95% | 101 | * | * | 100% | 162 | 100% | 53 |
| Northfield Hospital | * | * | * | * | 94% | 130 | 99% | 129 | 95% | 126 | * | * | 99% | 165 | 93% | 42 |
| Olmsted Medical Center - Rochester | * | * | * | * | 92% | 274 | 99% | 272 | 97% | 270 | * | * | 100% | 309 | 100% | 71 |
| Ortonville Area Health Services | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Owatonna Hospital | * | * | * | * | 93% | 229 | 99% | 227 | 97% | 219 | * | * | 100% | 267 | 97% | 76 |
| Pipestone County Medical Center: Avera | * | * | * | * | 92% | 36 | 100% | 35 | 97% | 35 | * | * | 95% | 43 | * | * |
| Redwood Area Hospital - Redwood Falls | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Renville County Hospital And Clinics - Olivia | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |

^{*} Sufficient data not available.

Quality of

| Quanty of | | | | | | | : | | : | o v o i i ci o i i | | | | | | |
|---|------------------------------|----------------|---------------------------------|------------------|--|--|----------------------------|---|-------------------------------|---|---|--|-------------------------------|---|---|--|
| Infection | | | onia | | • • • • • • • • • • • • • • • • | Ħ | | Ħ | -uev | n @ | • | | .= 3 | <u>2</u> 0 ≡ | ocker | a |
| Prevention | on (CLI) | | d Pneum | | ren an Hour | elp Prevo | ren the | alp Preve 2) | iose Prev | Stoppe CIP-INF- | tients is Kept | Right INF-4) | eding Ha | SCIP-INF-6) | Beta-Blo | ariod |
| See page 204 & 205 for an explanation of terms. | Central Line Infection (CLI) | Prevention | Ventilator Associated Pneumonia | (VAP) Prevention | Surgery Patients Given an Antibiotic Within an Hour | Before Surgery to Help Prevent Infection (SCIP-INF-1) | Surgery Patients Given the | Best Antibiotic to Help Prevent Infection (SCIP-INF-2) | Surgery Patients Whose Preven | tive Antibiotics Were Stopped at the Right Time (SCIP-INF-3) | All Heart Surgery Patients Whose Blood Sugar is Kept | Under Good Control Right After Surgery (SCIP-INF-4) | Surgery Patients Needing Hair | neilloveu berole sulgery osl a Safer Method (SCIP-INF-6) | Surgery Patients on Beta-Blocker Therapy Prior to Arrival Who Beceived a Reta, Blocker During | neceived a beta-brocker the Perioperative Period (SCIP-CARD-2) |
| HOSPITAL NAME | RATE | SAMPLE SIZE | RATE | SAMPLE SIZE | RATE | SAMPLE SIZE | RATE | SAMPLE SIZE | RATE | SAMPLE SIZE | . ₹ ≥ | SAMPLE SIZE | RATE | SAMPLE SIZE | : ♂ E & | SAMPLE SIZE |
| Overall Minnesota Average | 87% | | 96% | | 86% | | 94% | | 94% | | 87% | | 96% | | 87% | |
| Rice County District One Hospital - Faribault | * | * | * | * | 90% | 157 | 98% | 157 | 91% | 154 | * | * | 100% | 169 | 98% | 48 |
| Rice Memorial Hospital - Willmar | 0% | 43 | 88% | 32 | 84% | 207 | 98% | 200 | 95% | 196 | * | * | 100% | 279 | 96% | 52 |
| River's Edge Hospital & Clinic - St. Peter | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Sanford Canby Medical Center | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Sanford Hospital Luverne | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Sanford Jackson Medical Center | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Sanford Regional Hospital Worthington | * | * | * | * | 90% | 91 | 98% | 91 | 93% | 91 | * | * | 99% | 107 | * | * |
| Sanford Tracy Medical Center | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Sanford Westbrook Medical Center | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Sibley Medical Center - Arlington | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Sleepy Eye Medical Center | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Springfield Medical Center: Mayo Health System | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| St Elizabeth Medical Center - Wabasha | * | * | * | * | 92% | 25 | 100% | 25 | 88% | 25 | * | * | 100% | 27 | * | * |
| St James Medical Center: Mayo Health System | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| St Mary's Hospital: Mayo Clinic - Rochester | 94% | 178 | 98% | 4191 | 96% | 323 | 97% | 344 | 95% | 312 | 90% | 199 | 99% | 669 | 95% | 205 |

Infection Prevention

^{*} Sufficient data not available.

In

| Quality of | | | | | | | | Infe | ction Prev | vention | ۰ | | | | | |
|---|------------------------------|----------------|---------------------------------------|------------------|--|--|---|------------------------|---|--------------------------------|---|----------------------------|---|-----------------------------|--|---|
| nfection Prevention | n (CLI) | | i Pneumonia | | en an Hour | ilp Prevent 1) | en the In Prevent | 2) | ose Preven- Stonned | :IP-INF-3) | tients s Kept | NF-4) | eding Hair gery Using | -INF-6) | Beta-Blocker val Who cker During | riod |
| See page 204 & 205 for an explanation of terms. | Central Line Infection (CLI) | tion | Ventilator Associated Pneumonia | (VAP) Prevention | Surgery Patients Given an Antibiotic Within an Hour | Before Surgery to Help Prevent Infection (SCIP-INF-1) | Surgery Patients Given the Best Antihiotic to Heln Prevent | Infection (SCIP-INF-2) | Surgery Patients Whose Preven- tive Antihiotics Were Stonned | at the Right Time (SCIP-INF-3) | All Heart Surgery Patients Whose Blood Sugar is Kept | onder Gurgery (SCIP-INF-4) | Surgery Patients Needing Hair Removed Before Surgery Using | a Safer Method (SCIP-INF-6) | Surgery Patients on Beta-Blocker Therapy Prior to Arrival Who Received a Beta-Blocker During | the Perioperative Period (SCIP-CARD-2) |
| | Central | | Ventilat | | Surgery Antibio | | Surger) Best An | | | | All Hear Whose | | : | | Surgery Therapy Receive | |
| HOSPITAL NAME | RATE | SAMPLE SIZE | RATE | SAMPLE SIZE | RATE | SAMPLE SIZE | RATE | SAMPLE SIZE | RATE | SAMPLE SIZE | RATE | SAMPLE SIZE | RATE | SAMPLE SIZE | RATE | SAMPLE SIZE |
| Overall Minnesota Average | 87% | | 96% | | 86% | | 94% | | 94% | | 87% | | 96% | | 87% | |
| Swift County Benson Hospital | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Tyler Healthcare Center: Avera | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| United Hospital District - Blue Earth | * | * | * | * | 88% | 25 | 96% | 25 | 88% | 25 | * | * | 100% | 33 | * | * |
| Waseca Medical Center: Mayo Health System | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Windom Area Hospital | * | * | * | * | * | * | * * * | * | * | * | * | * | * | * | * | * |
| Winona Health Services | * | * | 88% | 60 | 98% | 131 | 98% | 133 | 93% | 128 | * | * | 100% | 160 | 100% | 27 |
| | | | | | | | | | | | - 0 0 0 | | | | | |
| | | | * * * * * * * * * * * * * * * * * * * | | | | 0 0 0 0 | | | | 0 0 0 0 0 | | • | | | |
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| | | | - - - - - - - - | | | | - - - - - - - - - | | | | - - - - - - - - | • • • • • • • • • | | | | |
| | | | | | | | | | | | | | | | | |

^{*} Sufficient data not available.

| Quality of Care | | | | | | | Pneum | ionia Care | | | | | | |
|--|-------------------|-----------------------------|-----------------------------|------------------------------|-----------------------------------|---|---|------------------------------|---|----------------------|-------------------------|--|-----------------------------|------------------------------|
| for Other Conditions | | (PN-ACM) | nd Given | tion (PN-2) | Blood Test Given to Patient Prior | IIGS (FN-3B) | Patients Given Advice or Counseling Ahout Quitting Smoking | (PN-4) | Patients Given Initial Antibiotic(s) Within 6 Hours After Getting to | ı | lost mthiotic(s) | (6)2000000000000000000000000000000000000 | nd Given | in (PN-7) |
| See page 204 for an explanation of terms. | The Best Care for | Pneumonia Patients (PN-ACM) | Patients Assessed and Given | Pneumonia Vaccination (PN-2) | est Given to P | to Receiving Anumionics (PN-5D) | Patients Given Advice or Courseling About Quittin | While in the Hospital (PN-4) | Patients Given Initial Antibiotic Within 6 Hours After Getting to | the Hospital (PN-5c) | Patients Given the Most | מנפ וווומו א | Patients Assessed and Given | Influenza Vaccination (PN-7) |
| | The Bes | Pneumo | Patient | Pneumo | Blood T | ום אפנים מים אים מים מים מים מים מים מים מים מים מים מ | Patients | While in | Patients Within 6 | the Hos | Patients | (PN-6) | Patient | Influenz |
| HOSPITAL NAME | RATE | SAMPLE SIZE | RATE | SAMPLE SIZE | RATE | SAMPLE SIZE | RATE | SAMPLE SIZE | RATE | SAMPLE SIZE | RATE | SAMPLE SIZE | RATE | SAMPLE SIZE |
| Overall Minnesota Average | 85% | | 83% | | 91% | | 84% | | 93% | | 87% | | 83% | |
| Albert Lea Medical Center: Mayo Health System | 91% | 125 | 98% | 95 | 100% | 69 | * | * | 96% | 90 | 89% | 44 | 98% | 60 |
| Appleton Municipal Hospital and Nursing Home | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Austin Medical Center: Mayo Health System | 93% | 226 | 98% | 176 | 99% | 167 | 97% | 30 | 97% | 156 | 94% | 120 | 97% | 96 |
| Avera Marshall Regional Medical Center - Marshall | * | * | * | * | * | * | * | * | 100% | 28 | * | * | * | * |
| Cannon Falls Medical Center: Mayo Health System | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Chippewa County-Montevideo Hospital | 39% | 26 | * | * | * | * | * | * | * | * | * | * | * | * |
| Fairmont Medical Center: Mayo Health System | 98% | 177 | 100% | 126 | 100% | 107 | 93% | 30 | 100% | 136 | 98% | 86 | 99% | 86 |
| Fairview Red Wing Hospital | 93% | 95 | 96% | 57 | 98% | 55 | * | * | 97% | 67 | 98% | 46 | 92% | 38 |
| Glencoe Regional Health Services | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Granite Falls Municipal Hospital and Manor | 64% | 44 | 84% | 38 | * | * | * | * | 91% | 33 | * | * | 85% | 26 |
| Hendricks Community Hospital Association | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Holy Trinity Hospital: Graceville Health Center | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Hutchinson Community Hospital | 84% | 76 | 93% | 55 | 96% | 52 | * | * | 100% | 57 | 88% | 49 | 100% | 38 |
| Immanuel-St Josephs: Mayo Health System - Mankato | 85% | 217 | 92% | 156 | 93% | 109 | 100% | 40 | 89% | 123 | 90% | 77 | 96% | 113 |
| Johnson Memorial Hospital - Dawson | * | * | * | * | * | * | * | * | * | * | * | * | * | * |

^{*} Sufficient data not available.

Quality of Care

| for Other Conditions | | s (PN-ACM) | and Given | ntion (PN-2) | Patient Prior | OIICS (FN-3D) | e or itting Smoking | (PN-4) | al Antibiotic(s) r Getting to | | Most Antihintic(s) | | and Given | on (PN-7) |
|---|-------------------|-----------------------------|-----------------------------|------------------------------|-----------------------------------|----------------------------------|--------------------------|--|---|----------------------|-------------------------|----------------|-----------------------------|------------------------------|
| See page 204 for an explanation of terms. | The Best Care for | Pneumonia Patients (PN-ACM) | Patients Assessed and Given | Pneumonia Vaccination (PN-2) | Blood Test Given to Patient Prior | to kecelving Antibiotics (PN-5B) | Patients Given Advice or | Counseing Anour quicing smooning While in the Hospital (PN-4) | Patients Given Initial Antibiotic(s) Within 6 Hours After Getting to | the Hospital (PN-5c) | Patients Given the Most | (PN-6) | Patients Assessed and Given | Influenza Vaccination (PN-7) |
| HOSPITAL NAME | RATE | SAMPLE SIZE | RATE | SAMPLE Size | RATE | SAMPLE SIZE | RATE | SAMPLE SIZE | RATE | SAMPLE SIZE | RATE | SAMPLE SIZE | RATE | SAMPLE Size |
| Overall Minnesota Average | 85% | | 83% | | 91% | | 84% | | 93% | | 87% | | 83% | |
| Lake City Medical Center: Mayo Health System | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Madelia Community Hospital | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Madison Hospital | 36% | 25 | * | * | * | * | * | * | * | * | * | * | * | * |
| Meeker County Memorial Hospital - Litchfield | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Methodist Hospital: Mayo Clinic - Rochester | 92% | 60 | 93% | 43 | * | * | * | * | * | * | * | * | 62% | 37 |
| Minnesota Valley Health Center - Le Sueur | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Murray County Memorial Hospital - Slayton | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| New Ulm Medical Center | 95% | 77 | 98% | 59 | 98% | 50 | * | * | 98% | 50 | 97% | 37 | 100% | 38 |
| Northfield Hospital | 92% | 71 | 92% | 51 | 100% | 30 | * | * | 98% | 51 | 100% | 38 | 93% | 27 |
| Olmsted Medical Center - Rochester | 62% | 47 | 85% | 34 | 84% | 32 | * | * | 88% | 33 | 81% | 31 | * | * |
| Ortonville Area Health Services | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Owatonna Hospital | 88% | 89 | 98% | 66 | * | * | * | * | 93% | 61 | 93% | 54 | 98% | 54 |
| Pipestone County Medical Center: Avera | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Redwood Area Hospital - Redwood Falls | 89% | 28 | * | * | * | * | * | * | * | * | * | * | * | * |
| Renville County Hospital And Clinics - Olivia | 56% | 25 | * | * | * | * | * | * | * | * | * | * | * | * |

Pneumonia Care

^{*} Sufficient data not available.

| Quality of Care | | | | | | | Pneum | nonia Care | | | | | | |
|--|-------------------|-----------------------------|-----------------------------|------------------------------|-----------------------------------|----------------------------------|----------------------------|--|---|----------------------|-------------------------|--|-----------------------------|------------------------------|
| for Other Conditions | | nts (PN-ACM) | 1 and Given | nation (PN-2) | to Patient Prior | DIOTICS (PN-3D) | ice or Duitting Smoking | al (PN-4) | tial Antibiotic(s) ter Getting to | jc) | • Most | (8)2000000000000000000000000000000000000 | 1 and Given | ition (PN-7) |
| See page 204 for an explanation of terms. | The Best Care for | Pneumonia Patients (PN-ACM) | Patients Assessed and Given | Pneumonia Vaccination (PN-2) | Blood Test Given to Patient Prior | to Receiving Antibiotics (PN-5B) | Patients Given Advice or | Counsering Anount Quitting of While in the Hospital (PN-4) | Patients Given Initial Antibiotic(s) Within 6 Hours After Getting to | the Hospital (PN-5c) | Patients Given the Most | (PN-6) | Patients Assessed and Given | Influenza Vaccination (PN-7) |
| HOSPITAL NAME | RATE | SAMPLE SIZE | RATE | SAMPLE SIZE | RATE | SAMPLE SIZE | RATE | SAMPLE SIZE | RATE | SAMPLE SIZE | RATE | SAMPLE SIZE | RATE | SAMPLE SIZE |
| Overall Minnesota Average | 85% | | 83% | | 91% | | 84% | | 93% | | 87% | | 83% | |
| Rice County District One Hospital - Faribault | 86% | 111 | 95% | 81 | 95% | 64 | * | * | 100% | 79 | 83% | 60 | 97% | 64 |
| Rice Memorial Hospital - Willmar | 94% | 161 | 97% | 118 | 99% | 77 | * | * | 99% | 103 | 95% | 59 | 96% | 75 |
| River's Edge Hospital & Clinic - St. Peter | 89% | 46 | 94% | 31 | 97% | 31 | * | * | 100% | 38 | 96% | 27 | 88% | 25 |
| Sanford Canby Medical Center | 81% | 26 | 80% | 25 | * | * | * | * | * | * | * | * | * | * |
| Sanford Hospital Luverne | 86% | 42 | 94% | 35 | * | * | * | * | 91% | 34 | * | * | 97% | 30 |
| Sanford Jackson Medical Center | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Sanford Regional Hospital Worthington | 76% | 42 | 84% | 32 | * | * | * | * | 96% | 25 | * | * | * | * |
| Sanford Tracy Medical Center | 88% | 25 | * | * | * | * | * | * | * | * | * | * | * | * |
| Sanford Westbrook Medical Center | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Sibley Medical Center - Arlington | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Sleepy Eye Medical Center | 55% | 42 | * | * | * | * | * | * | * | * | * | * | * | * |
| Springfield Medical Center: Mayo Health System | 79% | 29 | 81% | 27 | * | * | * | * | * | * | * | * | * | * |
| St Elizabeth Medical Center - Wabasha | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| St James Medical Center: Mayo Health System | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| St Mary's Hospital: Mayo Clinic - Rochester | 83% | 169 | 91% | 120 | 84% | 51 | 97% | 35 | 90% | 71 | 91% | 33 | 67% | 83 |

^{*} Sufficient data not available.

Quality of Care

| Quality of Care | | | | | | | , I lioui | iloilla vai c | | | | | | |
|---|-------------------|-----------------------------|-----------------------------|------------------------------|---------------------------------------|----------------------------------|---------------------------------------|--|---|----------------------|-------------------------|----------------|---|------------------------------|
| for Other | | = | | 2) | rior | 3b) | | | tic(s) | : | 9 | 6 | | |
| Conditions | | N-ACN | Given | n (PN- | ient P | -NG) S | | 1g SM0 (4-1) | ntibio | 0 | t biotic | | Given | (PN-7) |
| See page 204 for an explanation of terms. | The Best Care for | Pneumonia Patients (PN-ACM) | Patients Assessed and Given | Pneumonia Vaccination (PN-2) | Blood Test Given to Patient Prior | to Receiving Antibiotics (PN-3b) | Patients Given Advice or | Counseling About Witting Smoking While in the Hospital (PN-4) | Patients Given Initial Antibiotic(s) Within 6 Hours After Getting to | the Hospital (PN-5c) | Patients Given the Most | (PN-6) | Patients Assessed and Given | Influenza Vaccination (PN-7) |
| HOSPITAL NAME | - | SAMPLE SIZE | | SAMPLE SIZE | | SAMPLE Size | | SAMPLE SIZE | | SAMPLE SIZE | | SAMPLE SIZE | | SAMPLE SIZE |
| Overall Minnesota Average | RATE 85% | SIZE | RATE 83% | SIZE | RATE 91% | SIZE | RATE 84% | SIZE | RATE 93% | SIZE | RATE 87% | SIZE | RATE 83% | SIZE |
| Swift County Benson Hospital | 47% | 36 | 61% | 28 | * | * | * | * | 93% | 28 | * | * | * | * |
| Tyler Healthcare Center: Avera | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| United Hospital District - Blue Earth | 93% | 42 | 95% | 37 | 96% | 28 | * | * | 100% | 28 | * | * | 92% | 25 |
| Waseca Medical Center: Mayo Health System | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Windom Area Hospital | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Winona Health Services | 92% | 160 | 100% | 120 | 97% | 116 | 100% | 32 | 99% | 113 | 86% | 66 | 100% | 71 |
| | | | | | | | | | | | | | | |
| | | | | | | | - - - - - - - | | | | | | | |
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Pneumonia Care

^{*} Sufficient data not available.

| Quality of Care for Other | | | Death R with | a Brol | ken Hip | | | Rat | | | dical Ins | Vaginal l truments | | Rat | e of Ob WITI | stetric 10UT Me | edical In | Vaginal [strument | delivery is |
|--|-----------|-------------|-----------------|---------------|-----------------------------------|--------------------|---|-----------|-------------|---------------|---------------|-----------------------------------|---|-----------|-----------------|--------------------|---------------|-----------------------------------|---|
| | | | | IQI-1 | 9 | | | | | | PSI-18 | | | | | | PSI-19 | | |
| Conditions | | | | | | | | | | | | | | | | | | | |
| See page 204 for an explanation of terms. | īģ | Size | d Rate | d Rate | When Compared to Expected Rate | Risk Adjusted Rate | nfidence Interval Risk Adjusted Rate | tor | Size | d Rate | d Rate | When Compared to Expected Rate | Confidence Interval of Observed Rate | tor | Size | d Rate | d Rate | When Compared to Expected Rate | Confidence Interval of Observed Rate |
| HOSPITAL NAME | Numerator | Sample Size | Observed Rate | Expected Rate | When Co Expected | Risk Adj | Confidence of Risk Adju | Numerator | Sample Size | Observed Rate | Expected Rate | When Compare Expected Rate | Confidence II of Observed I | Numerator | Sample Size | Observed Rate | Expected Rate | When Compare Expected Rate | Confider of Obser |
| Albert Lea Medical Center: Mayo Health System | 0 | 51 | 0.00% | 3.00% | SAME | 0.00% | 0.00-4.40% | * | * | * | * | * | * | 5 | 285 | 1.75% | 2.44% | SAME | 0.23-3.28% |
| Appleton Municipal Hospital and Nursing Home | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Austin Medical Center: Mayo Health System | 1 | 41 | 2.00% | 3.70% | SAME | 1.90% | 0.00-6.30% | | | | | | | 2 | 318 | 0.63% | 2.44% | BETTER | 0.00-1.50% |
| Avera Marshall Regional Medical Center - Marshall | * | * | * | * | * | * | * | 9 | 37 | 24.32% | 14.22% | SAME | 10.50-38.15% | 13 | 298 | 4.36% | 2.44% | SAME | 2.04-6.68% |
| Cannon Falls Medical Center: Mayo Health System | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Chippewa County-Montevideo Hospital | * | * | * | * | * | * | * | * | * | * | * | * | * | 1 | 50 | 2.00% | 2.44% | SAME | 0.00-5.88% |
| Fairmont Medical Center: Mayo Health System | 1 | 33 | 3.00% | 2.10% | SAME | 4.20% | 0.00-11.00% | * | * | * | * | * | * | 2 | 184 | 1.09% | 2.44% | SAME | 0.00-2.59% |
| Fairview Red Wing Hospital | 0 | 26 | 0.00% | 6.80% | BETTER | 0.00% | 0.00-3.50% | * | * | * | * | * | * | 5 | 223 | 2.24% | 2.44% | SAME | 0.30-4.19% |
| Glencoe Regional Health Services | * | * | * | * | * | * | * | * | * | * | * | * | * | 7 | 146 | 4.79% | 2.44% | SAME | 1.33-8.26% |
| Granite Falls Municipal Hospital and Manor | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Hendricks Community Hospital Association | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Holy Trinity Hospital: Graceville Health Center | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Hutchinson Community Hospital | 3 | 25 | 12.00% | 5.60% | SAME | 6.20% | 1.80-10.70% | 5 | 30 | 16.67% | 14.22% | SAME | 3.33-30.00% | 8 | 232 | 3.45% | 2.44% | SAME | 1.10-5.80% |
| Immanuel-St Josephs: Mayo Health System - Mankato | 6 | 173 | 3.00% | 2.50% | SAME | 4.10% | 1.40-6.80% | 7 | 84 | 8.33% | 14.22% | SAME | 2.42-14.24% | 24 | 994 | 2.41% | 2.44% | SAME | 1.46-3.37% |
| Johnson Memorial Hospital - Dawson | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Lake City Medical Center: Mayo Health System | * | * | * | * | * | * | * | * | * | * | * | * | * | 3 | 40 | 7.50% | 2.44% | SAME | 0.00-15.66% |
| Madelia Community Hospital | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |

^{*} Sufficient data not available.

| Quality of Care for Other | | | Death R with | ate fo a Brok | en Hip | | | Rat | | | | y Vaginal struments | | Rat | | | | ; Vaginal I nstrumen | |
|---|-----------|-------------|-----------------|------------------|-----------------------------------|--------------------|--|-----------|-------------|---------------|---------------|-----------------------------------|---|-----------|-------------|---------------|---------------|-----------------------------------|---|
| Conditions | | | | 10(11) | | | œ. | | | | 10110 | | | | | | 10110 | | |
| See page 204 for an explanation of terms. | ator | Size | Observed Rate | Expected Rate | When Compared to Expected Rate | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | ator | Size | Observed Rate | Expected Rate | When Compared to Expected Rate | Confidence Interval of Observed Rate | ator | Size | Observed Rate | Expected Rate | When Compared to Expected Rate | Confidence Interval of Observed Rate |
| HOSPITAL NAME | Numerator | Sample Size | Observ | Expect | When Compare Expected Rate | Risk Ad | Confide of Risk | Numerator | Sample Size | Observ | Expect | When Compare Expected Rate | Confide of Obse | Numerator | Sample Size | Observ | Expect | When Compare Expected Rate | Confide of Obse |
| Madison Hospital | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Meeker County Memorial Hospital - Litchfield | * | * | * | * | * | * | * | * | * | * | * | * | * | 1 | 101 | 0.99% | 2.44% | SAME | 0.00-2.92% |
| Methodist Hospital: Mayo Clinic - Rochester | * | * | * | * | * | * | * | 23 | 131 | 17.56% | 14.22% | SAME | 11.04-24.07% | 18 | 1512 | 1.19% | 2.44% | BETTER | 0.64-1.74% |
| Minnesota Valley Health Center - Le Sueur | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Murray County Memorial Hospital - Slayton | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| New Ulm Medical Center | 2 | 61 | 3.00% | 3.50% | SAME | 2.70% | 0.00-6.20% | 10 | 60 | 16.67% | 14.22% | SAME | 7.24-26.10% | 5 | 141 | 3.55% | 2.44% | SAME | 0.49-6.60% |
| Northfield Hospital | 0 | 37 | 0.00% | 2.70% | SAME | 0.00% | 0.00-5.60% | 0 | 26 | 0.00% | 14.22% | BETTER | 0.00-0.00% | 10 | 317 | 3.15% | 2.44% | SAME | 1.23-5.08% |
| Olmsted Medical Center - Rochester | * | * | * | * | * | * | * | 4 | 97 | 4.12% | 14.22% | BETTER | 0.17-8.08% | 12 | 656 | 1.83% | 2.44% | SAME | 0.80-2.85% |
| Ortonville Area Health Services | * | * | * | * | * | * | * | * | * | * | * | * | * | 0 | 31 | 0.00% | 2.44% | BETTER | 0.00-0.00% |
| Owatonna Hospital | 0 | 37 | 0.00% | 2.70% | SAME | 0.00% | 0.00-5.60% | 7 | 34 | 20.59% | 14.22% | SAME | 7.00-34.18% | 14 | 313 | 4.47% | 2.44% | SAME | 2.18-6.76% |
| Pipestone County Medical Center: Avera | * | * | * | * | * | * | * | * | * | * | * | * | * | 2 | 53 | 3.77% | 2.44% | SAME | 0.00-8.90% |
| Redwood Area Hospital - Redwood Falls | * | * | * | * | * | * | * | * | * | * | * | * | * | 0 | 48 | 0.00% | 2.44% | BETTER | 0.00-0.00% |
| Renville County Hospital And Clinics - Olivia | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Rice County District One Hospital - Faribault | 1 | 31 | 3.00% | 3.40% | SAME | 2.80% | 0.00-8.00% | 3 | 62 | 4.84% | 14.22% | BETTER | 0.00-10.18% | 5 | 228 | 2.19% | 2.44% | SAME | 0.29-4.09% |
| Rice Memorial Hospital - Willmar | 3 | 31 | 10.00% | 3.20% | WORSE | 8.90% | 3.30-14.40% | 10 | 38 | 26.32% | 14.22% | SAME | 12.31-40.32% | 9 | 582 | 1.55% | 2.44% | SAME | 0.54-2.55% |
| River's Edge Hospital & Clinic - St. Peter | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Sanford Canby Medical Center | * | * | * | * | * | * | * | * | * | * | * | * | * | 3 | 30 | 10.00% | 2.44% | SAME | 0.00-20.74% |

^{*} Sufficient data not available.

| Quality of Care for Other | | | | | or Patie ken Hip | | | Rat | | | | y Vaginal struments | | Rat | e of Ob WITI | stetric HOUT M | Tearing edical lu | Vaginal I strumen | Delivery ts |
|--|-----------|-------------|---------------|---------------|-----------------------------------|--------------------|--|-----------|-------------|---------------|---------------|-----------------------------------|---|-----------|-----------------|-------------------|----------------------|-----------------------------------|---|
| Conditions | | | | | | | | | | | | | | | | | | | |
| See page 204 for an explanation of terms. | itor | Size | Observed Rate | Expected Rate | When Compared to Expected Rate | Risk Adjusted Rate | Confidence Interval of Risk Adjusted Rate | ıtor | Size | Observed Rate | Expected Rate | When Compared to Expected Rate | Confidence Interval of Observed Rate | itor | Size | Observed Rate | Expected Rate | When Compared to Expected Rate | Confidence Interval of Observed Rate |
| HOSPITAL NAME | Numerator | Sample Size | Observ | Expect | When Co Expecte | Risk Ad | Confide of Risk | Numerator | Sample Size | Observ | Expect | When Compare Expected Rate | Confide of Obse | Numerator | Sample Size | Observ | Expect | When Co Expecte | Confide of Obse |
| Sanford Hospital Luverne | * | * | * | * | * | * | * | * | * | * | * | * | * | 2 | 51 | 3.92% | 2.44% | SAME | 0.00-9.25% |
| Sanford Jackson Medical Center | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Sanford Regional Hospital Worthington | * | * | * | * | * | * | * | * | * | * | * | * | * | 6 | 250 | 2.40% | 2.44% | SAME | 0.50-4.30% |
| Sanford Tracy Medical Center | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Sanford Westbrook Medical Center | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Sibley Medical Center - Arlington | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Sleepy Eye Medical Center | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Springfield Medical Center: Mayo Health System | * | * | * | * | * | * | * | * | * | * | * | * | * | 0 | 25 | 0.00% | 2.44% | BETTER | 0.00-0.00% |
| St Elizabeth Medical Center - Wabasha | * | * | * | * | * | * | * | * | * | * | * | * | * | 0 | 51 | 0.00% | 2.44% | BETTER | 0.00-0.00% |
| St James Medical Center: Mayo Health System | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| St Mary's Hospital: Mayo Clinic - Rochester | 11 | 268 | 4.00% | 5.40% | BETTER | 2.20% | 0.80-3.60% | * | * | * | * | * | * | * | * | * | * | * | * |
| Swift County Benson Hospital | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Tyler Healthcare Center: Avera | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| United Hospital District - Blue Earth | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Waseca Medical Center: Mayo Health System | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * | * |
| Windom Area Hospital | * | * | * | * | * | * | * | * | * | * | * | * | * | 3 | 78 | 3.85% | 2.44% | SAME | 0.00-8.11% |
| Winona Health Services | * | * | * | * | * | * | * | 10 | 45 | 22.22% | 14.22% | SAME | 10.08-34.37% | 12 | 264 | 4.55% | 2.44% | SAME | 2.03-7.06% |

^{*} Sufficient data not available.

CMS HOSPITAL COMPARE MEASURES

Data Source and Data Collection Procedures

The Minnesota Statewide Quality Reporting and Measurement System began requiring all Minnesota hospitals to submit data on CMS "Process of Care" measures for which they had relevant patients in January 2010. Data reported here are related to earlier reporting cycles from hospitals that submitted their data to the Centers for Medicare and Medicaid Services. Data is included in this report for the following measures:

- Seven process of care measures related to heart attack care
- Four process of care measures related to heart failure care
- Six process of care measures related to pneumonia
- Eight process of care measures related to the surgical care improvement project

Data for all of these measures is for care provided from October 1, 2008 to September 30, 2009.

The information included in this report comes from the quality data submitted by hospitals to the Quality Improvement Organizations' (QIO) Clinical Data Warehouse for all inpatient discharges. Except where noted, the data reflect twelve months of experience and is updated on a rolling basis. The data collection approach is primarily retrospective. Data sources for required data elements include administrative data and medical record documents. Some hospitals may prefer to gather data concurrently by identifying patients in the population of interest. This approach provides opportunities for improvement at the point of care/service. However, complete documentation includes the principal and other ICD-9-CM diagnosis and procedure codes, which require retrospective data entry.

The CMS Abstraction and Reporting Tool (CART) is a medical record data abstraction tool. Hospitals may use the CART to transmit abstracted data directly into the QIO Clinical Data Warehouse through www.QualityNet.org (a HIPAA-compliant, secure data transmission

vehicle) or they may instruct a vendor to submit the data on their behalf using QNET. CART may also be used to transmit data directly to an ORYX vendor from a current Joint Commission-accredited hospital. The vendors transmit the data to the QIO Clinical Warehouse, if the hospital has authorized them to do so, on their behalf. Under The Joint Commission program, organizations that wish to be certified as ORYX vendors must pass certain tests that verify their capacity to correctly handle hospital data and calculate performance rates using the prescribed algorithms.

Both ORYX Vendors and CART data submissions include auditing procedures and edit checks, which assess whether data submitted is consistent with defined parameters for sample size, outliers, and missing data. The data for this publication has been audited/edited, but not validated.

Sampling

Whether or not a hospital uses sampling is determined by rules established by The Joint Commission and CMS. The same sampling methodology is used by hospitals for both their non-Medicare cases and Medicare cases and is based on the number of discharges per topic each quarter. More detailed information is available at www. QualityNet.org.

Calculating Rates

Each rate calculation is based on the hospital's relevant discharges. Only patients meeting certain criteria for a measure are included in the calculation of the rate for a measure. The performance rate for individual hospitals is calculated by dividing the numerator by the denominator. The denominator is the sum of all eligible cases (as defined in the measure specifications) submitted to the QIO Clinical Data Warehouse for the reporting period. The numerator is the sum of all eligible cases submitted for the same reporting period where the recommended care was provided. The same data is used for individual hospital and state rate calculations.

A two-step process was used to calculate the state comparison group rates. The state comparison rate for each measure was calculated using all of the data submitted to the QIO Clinical Data Warehouse for hospitals with at least one case that met the measure's inclusion criteria (that is, for which the denominator was greater than zero).

First, the individual hospital performance rates were calculated using the method described above for all hospitals. Next, hospitals with "0 patients" were excluded from the calculation. For the state averages, a simple average was constructed where the numerator was the sum of all non-excluded hospitals' scores and the denominator was the total number of hospitals, each calculated at the individual state level. The state average is calculated before excluding rates that are suppressed on the CMS Hospital Compare website.

Limitations

In order to align with accepted national standards for public reporting with respect to the number of patients required for reliable public reporting, results are only included on those measures for hospitals with 25 or more cases. Because many hospitals have fewer than 25 cases in a reporting period, results are not included for a considerable number of hospitals on some measures.

Risk Adjustment

The results for these measures are not risk adjusted because the measures relate to whether or not a patient received appropriate treatment rather than whether a particular outcome was achieved. Risk adjustment is performed for other measures for which patient characteristics influence a provider's results.

Appropriate Care Measures

The appropriate care measures utilize CMS measure data at the individual patient level for heart attack, heart failure and pneumonia care. With CMS permisson, Stratis Health calculates these measures through an agreement with the hospital. The hospital grants Stratis

Health access to utilize the hospital's data in the QIO Clinical Data Warehouse for the calculation of these three composite measures. Stratis Health must access the following CMS process of care measure data at the individual patient level:

- Seven related to heart attack care
- Four related to heart failure care
- Six related to pneumonia care

Data for the measures is for care provided from October 1, 2008 to September 30, 2009.

These measures are pass/fail measures at the individual patient level. The measures evaluate whether the patient received all of the appropriate treatments (as defined by the measure specifications). A patient is included if eligible (i.e. meets denominator criteria) for at least one of the measures in a topic (heart attack, heart failure or pneumonia). To be considered as having appropriate care, a patient must meet numerator criteria for each measure in which the patient meets the denominator criteria. The measure calculation accounts for the fact that some treatments may not be appropriate for all patients. (For example, if the patient does not smoke, the "Patients given advice or counseling about quitting smoking while in the hospital (AMI-4)" is not applicable and the hospital will automatically be given credit for meeting this part of the measure.)

Each rate calculation is based on the hospitals' relevant discharges. The numerator is the sum of all eligible cases where the recommended care was provided. The denominator is the sum of all eligible cases (as defined in the measure specifications) submitted to the QIO Clinical Data Warehouse for the reporting period. The performance rate for individual hospitals is calculated by dividing the numerator by the denominator. The same data is used for individual hospital and state rate calculations.

AGENCY FOR HEALTHCARE RESEARCH AND QUALITY MEASURES

Data Source and Data Collection Procedures

The Minnesota Statewide Quality Reporting and Measurement System began requiring all Minnesota hospitals to submit data on certain AHRQ measures for which they had relevant patients in January 2010. Virtually all Minnesota hospitals submit discharge data to the Minnesota Hospital Association. The AHRQ measures are calculated using this discharge data. Data is included in this report for care provided from October 1, 2008 to September 30, 2009 for the following measures:

- Seven Inpatient Quality Indicators
 - Abdominal aortic aneurysm repair volume (IQI 4)
 - Abdominal aortic aneurysm mortality rate (IQI 11)
 - Coronary artery bypass graft volume (IQI 5)
 - Coronary artery bypass graft mortality rate (IQI 12)
 - Percutaneous transluminal coronary angioplasty volume (IQI 6)
 - Percutaneous transluminal coronary angioplasty mortality rate (IQI 30)
 - Hip fracture mortality rate (IQI 19)
- Five Patient Safety Indicators
 - Pressure ulcer (PSI 3)
 - Death among surgical inpatients with serious treatable complications (PSI 4)
 - Postoperative pulmonary embolism (PSI 12)
 - Obstetric trauma vaginal delivery with instrument (PSI 18)
 - Obstetric trauma vaginal delivery without instrument (PSI 19)

The Inpatient Quality Indicators (IQIs) and Patient Safety Indicators (PSIs) are sets of measures that provide a perspective on hospital quality of care using hospital administrative data.

- The IQIs reflect quality of care inside hospitals and include inpatient mortality for certain procedures and medical conditions; utilization of procedures for which there are questions of overuse, underuse, and misuse; and volume of procedures for which there is some evidence that a higher volume of procedures is associated with lower mortality.
- The PSIs are a set of indicators providing information on potential inhospital complications and adverse events following surgeries, procedures, and child birth. The PSIs were developed after a comprehensive literature review, analysis of ICD-9-CM codes, review by a clinician panel, implementation of risk adjustment on applicable measures and empirical analyses.

The IQIs and PSIs are software tools distributed free by the Agency for Healthcare Research and Quality (AHRQ). The software can be used to help hospitals identify potential problem areas that might need further study and which can provide an indirect measure of inhospital quality of care. The IQI software programs can be applied to any hospital inpatient administrative data. These data are readily available and relatively inexpensive to use.

The IQIs and PSIs are respectively the second and third in the set of AHRQ Quality Indicators (QIs) developed by investigators at Stanford University and the University of California, under a contract with AHRQ. The software may be downloaded from www.qualityindicators.ahrq.gov.

Risk Adjustment

The AHRQ software adjusts provider results based on each individual patient's severity of illness. PSI 18 and PSI 19 are the only applicable AHRQ measures in this report which are not risk adjusted because there are not materially important risk factors available in the state inpatient discharge data.

Limitations

In order to align with accepted national standards for public reporting with respect to the number of patients required for reliable public reporting, results are only included for those hospitals with 25 or more cases for each measure. Because many hospitals have fewer than 25 cases in a reporting period, results are not included for a considerable number of hospitals on some measures.

NQF HEALTHCARE ASSOCIATED INFECTION MEASURES

Data Source and Data Collection Procedures

Minnesota Statutes 62J.82 requires hospitals to report on selected healthcare acquired infection measures. The

Minnesota Hospital Association (MHA) and Stratis Health, in collaboration with infection control practitioners, collect and report hospital-specific performance of the hospital-acquired infection measures published by the National Quality Forum (NQF). The selected measures were first published on the MN Hospital Quality Report (www. mnhospitalquality.org) in October 2009. Data included in this report is for care provided from April 1, 2009 to March 31, 2010 for the following measures:

- Central line bundle compliance
- Ventilator bundle
- Surgical site infection (SSI) rate for vaginal hysterectomy

The quality data included in this report comes from data submitted by each hospital directly to MHA on their data collection site. Each hospital must obtain the measure data via chart abstraction. Hospitals may take the measure information directly from the medical record, via observational audits or through a specifically designed documentation record (i.e. daily goals checklist). Hospitals must submit this data on a quarterly basis, no later than 45 days after the end of each quarter. If a hospital had no cases within a given quarter, the hospital

must still report this data to MHA. The online reporting tool requires the hospital to enter the measure numerator and denominator by month. The SSI Rate for Vaginal Hysterectomy measure numerator and denominators must be broken down and submitted by risk level 0, 1, 2 and 3.

The Central Line Bundle Compliance and Ventilator Bundle measures require concurrent data collection and observation. The SSI Rate for Vaginal Hysterectomy measure requires a retrospective review. There is a 30 day data lag associated with this measure.

More information about the reporting of these three measures can be found at http://www.mnhospitals.org/index/Infection1.

Sampling

- Central Line Bundle Compliance and the Ventilator Bundle: Sampling is allowed for these measures if there are more than 15 cases per month at the hospital. If there are less than 15 cases, the total population must be reported.
- SSI Rate for Vaginal Hysterectomy: Sampling is not allowed for this measure. The measure includes 100% of eligible cases.

Calculating Rates

Each rate calculation is based on the hospital's relevant discharges. Only patients meeting certain criteria for a measure are included in the calculation of the rate for a measure.

- Central Line Bundle Compliance and the Ventilator Bundle: The performance rate for individual hospitals are calculated by dividing the numerator by the denominator. The denominator is the sum of all eligible cases (as defined in the measure specifications) submitted to MHA for the reporting period. The numerator is the sum of all eligible cases submitted for the same reporting period where the recommended care was provided. The same data is used for individual hospital and state rate calculations.
- SSI Rate for Vaginal Hysterectomy: The infection rate for individual hospitals in Risk Level 0 and Risk Level 1,2,3 are calculated

by dividing the numerator by the denominator. The denominator is the sum of all eligible cases (as defined in the measure specifications) submitted to MHA for the reporting period. The numerator is the sum of all eligible cases submitted for the same reporting period where the recommended care was provided. The Combined Risk Level infection rate is calculated by adding the numerators and denominators of the two risk level categories and dividing the numerator by the denominator. This combined infection rate is displayed in the Quality of Care for Surgeries table in the front of this report. The confidence intervals are exact poisson confidence intervals calculated by using the inverse gamma function as proposed by Leslie Daly (0 infections have a 95% confidence interval of 0 – 3.689.): (Daly, L. The Calculation of Exact Binomial and Poisson Confidence Limits; Comput. Biol. Med., Vol. 22, No. 5, pp 351-361, 1992). This confidence interval is compared to the expected rate to determine the significance of the results. If the expected rate falls within the confidence interval, the hospital's performance is average or the same as expected. If the expected rate falls above the confidence interval, the hospital's performance is average or better than expected. If the expected rate falls below the confidence interval, the hospital's performance is below average or worse than expected. More information on these calculations and their statistical significance is available at http://www.mnhospitalquality.org/SSI.aspx?region= ALL &ct=Infection+Prevention&mc=SSIVH.

To determine the state average for these measures, hospitals with "0 patients" in the measure denominator were excluded from the calculation. Then, the sum of all the numerators for Minnesota hospitals was divided by the sum of all the denominators of Minnesota hospitals.

Risk Adjustment

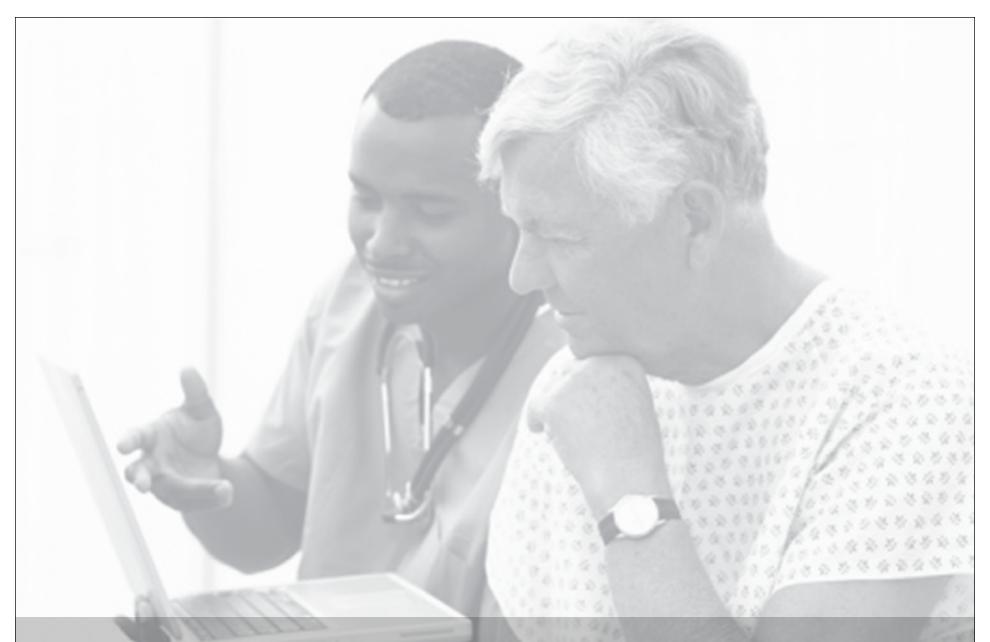
Central Line Bundle Compliance and the Ventilator Bundle: The results for these measures are not risk adjusted because the

- measures relate to whether or not a patient received appropriate treatment rather than whether a particular outcome was achieved. Risk adjustment is performed for other measures for which patient characteristics influence a provider's results.
- SSI Rate for Vaginal Hysterectomy: The performance of each facility relative to SSI has been adjusted to reflect the risk associated with the reported procedure. Adjusting for these risk levels allows for comparisons of the facilities. If a facility has a high rate after the adjustment, one can have more confidence that the facility has SSI problems that are caused by factors other than the presence of many high risk patients. The risk factors that are used in adjusting a facility's performance are the degree of contamination of the wound at the time of the operation, the duration of the procedure, and the American Society of Anesthesiologists (ASA) score. The latter is an estimate of the patient's physical condition. A risk score of 0 indicates that the patient has a relatively low risk of developing a surgical site infection, while a 3 indicates that a patient has a relatively high risk of developing an infection for a particular surgical procedure. Occasionally risk levels are combined, as in 1,2,3. For these surgical procedures, the Centers for Disease Control found that SSI rates were similar whether the risk was a 1, 2 or a 3.

Limitations

In order to align with accepted national standards for public reporting with respect to the number of patients required for reliable public reporting, results are only included on those measures for hospitals with 25 or more cases. Because many hospitals have fewer than 25 cases in a reporting period, results are not included for a considerable number of hospitals on some measures.

NOTE: For the SSI rate for vaginal hysterectomy measure, this included a combined sample size of 25 for all risk levels (i.e. 0,1,2,3)



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