

2021 QUARTERLY REPORT

Date Range 1/1/21 – 12/31/21 Confidential

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Perinatal Quality Improvement Dashboard

INTRODUCTION

The NPIC Perinatal Quality Improvement Dashboard tracks key performance indicators to assist hospital's with identifying negative trends that may need corrective action. The Dashboard also provides comparison data for the peer Subgroup and database averages with a determination of significant variance.

DESCRIPTION OF TABLES

Table 1: Perinatal Quality Comparative Data - Discharge Date Range: 1/1/21 – 12/31/21

Section A: Displays the count of total deliveries and total inborns for the Hospital, Subgroup and the NPIC Member Database.

Section B: Displays the rate for selected quality metrics for the Hospital, Subgroup and NPIC Database. The column to the far right of each average indicates if the Hospital's rate is significantly different (above or below) or not significantly different from the Subgroup average or Database average. The corresponding Quarterly Report table reference is provided for each metric.

Table 2: Perinatal Quality Trend Analysis - Discharge Date Range: CY 2017 - CY 2021

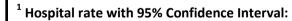
Section A: Displays the count of total deliveries and total inborns for the Hospital's trend years.

Section B: Displays the rate for selected quality metrics for the Hospital's trend years. The column to the far right indicates significance of the Hospital's trend over time, upward, downward trend, or stable. Where applicable, the corresponding Quarterly Report table/graph reference is provided.

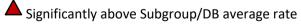
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NPIC Perinatal Quality Improvement Dashboard								
Table 1: Perinatal Quality Comparative Data NPIC ID: SA1	Table/ Graph Reference	Hospital	Subgroup Average	Hospital vs. Subgroup Average ¹	Database Average	Hospital vs. Database Average ¹		
Section A: Total Deliveries								
Total Deliveries Total Inborns	Table OB1 Table OB1	2,910 2,999	3,812 3,898		3,762 3,816			
Section B: Quality Metrics								
Cesarean Section Delivery Rate (% of total deliveries)	Table OB4	37.3%	33.9%		33.9%			
Primary Cesarean Section Rate (% of total deliveries)	Table OB4	20.5%	19.4%		18.4%			
AHRQ IQI 33: Primary Cesarean Delivery Rate, Uncomplicated	Table QM1	18.7%	18.0%		17.7%			
Repeat Cesarean Section Rate (% of total deliveries)	Table OB4	16.8%	14.5%		15.5%			
Estimated Rate of Inductions (percent of total deliveries)	Table OB9	38.9%	34.1%		29.5%			
Estimated Rate of Inductions resulting in Cesarean Delivery	Table QM1	18.5%	21.6%	∇	21.2%	∇		
NPIC Postpartum Hemorrhage Rate	Table QM1	6.1%	7.2%	∇	5.3%			
NPIC Postpartum Readmission Rate (within 42 days post-discharge)	Table QM1	0.9%	1.7%	∇	1.5%	∇		
AHRQ PSI 18: Obstetric Trauma - Vaginal Deliveries with Instruments	Table QM1	10.7%	15.3%		13.5%			
AHRQ PSI 19: Obstetric Trauma - Vaginal Deliveries without Instruments	Table QM1	2.2%	1.9%		1.9%			
AHRQ PSI 17: Birth Trauma - Injury to Neonate	Table QN1	0.25%	0.59%	∇	0.44%			
Vaginal Deliveries with coded Shoulder Dystocia linked to an inborn ≥ 2500 grams with birth trauma *	Table QL1	9.8%	16.2%		15.8%			
The Joint Commission PC-06: Unexpected Complications in Term Newborns ^a	Table QN2	41.7	33.9		31.4			
Special Care Discharges (% of Total Neonates) **	Table N11	25.0%	20.9%		14.5%			
Inborn mortality ≥ 500 grams (% of Total Inborns)	Table N8	0.34%	0.31%		0.24%			

^{*} This is a linked metric. Please refer to Table QL1: Linked Mother/Baby Indicators for the rate of linked records for your hospital.



▼ Significantly below Subgroup/DB average rate



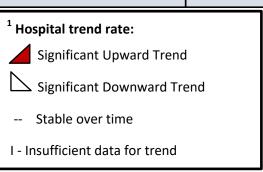
-- Not significantly different from Subgroup/DB average rate

^{**} Special Care discharges are those having NICU and/or NINT days/charges > 0.

^a PC-06.0 Overall Rate per 1,000. Source: Specification Manual for Joint Commission National Quality Measures, v2021B2; www.jointcommission.org

NPIC Perinatal Quality Improvement Dashboard									
Table 2: Perinatal Quality Trend Analysis NPIC ID: SA1	Table/ Graph Reference	2017	2018	2019	2020	2021	Hospital Trend ¹		
Section A: Total Deliveries									
Total Deliveries	Table OB5	2,609	2,593	2,521	2,455	2,910			
Total Inborns	Graph N1a	2,661	2,618	2,558	2,526	2,999			
Section B: Quality Metrics									
Cesarean Section Delivery Rate (% of total deliveries)	Table OB5	38.4%	38.6%	36.8%	36.7%	37.3%			
Primary Cesarean Section Rate (% of cases without a prior uterine scar)	Table OB5	26.9%	26.3%	24.3%	23.6%	25.4%			
AHRQ IQI 33: Primary Cesarean Delivery Rate, Uncomplicated	N/A	21.8%	21.5%	19.5%	19.3%	18.7%	N/A		
Repeat Cesarean Section Rate (% of cases with a prior uterine scar)	Table OB5	89.4%	91.0%	86.1%	86.9%	86.4%			
Estimated Rate of Inductions (percent of total deliveries)	Graph OB9a	21.4%	31.8%	34.2%	33.4%	38.9%			
Estimated Rate of Inductions resulting in Cesarean Delivery	N/A	35.9%	28.4%	24.3%	21.3%	18.5%			
NPIC Postpartum Hemorrhage Rate	Graph QM1o	3.1%	3.3%	3.8%	5.9%	6.1%			
NPIC Postpartum Readmission Rate (within 42 days post-discharge)	Graph QM1m	1.3%	1.6%	1.6%	1.6%	0.9%			
AHRQ PSI 18: Obstetric Trauma-Vaginal Deliveries with Instruments	N/A	14.6%	14.6%	8.7%	10.7%	10.7%	N/A		
AHRQ PSI 19: Obstetric Trauma-Vaginal Deliveries without Instruments	N/A	1.7%	1.7%	1.5%	1.0%	2.2%	N/A		
AHRQ PSI 17: Birth Trauma-Injury to Neonate	N/A	0.08%	0.28%	0.08%	0.00%	0.25%	N/A		
TJC PC-06: Unexpected Complications in Term Newborns ^a	N/A	63.1	62.0	56.8	61.3	41.7			
Special Care Discharges (% of Total Neonates) **	Table N12	32.3%	32.6%	31.6%	29.9%	25.0%			
Inborn mortality ≥ 500 grams (% of Total Inborns)	Graph N9a	0.34%	0.27%	0.39%	0.24%	0.34%			

Trend significance is not displayed for AHRQ measures.



^{**} Special Care discharges are those having NICU and/or NINT days/charges > 0.

^a Overall Rate per 1,000. Specification Manual for Joint Commission National Quality Measures, v2021B2; www.jointcommission.org



		COMPARISONS				
Table OB 1*	Comparative Facility, Subgroup and Database Overview Data on all inpatient discharges for the four quarter period for the database, your subgroup and your hospital. Please note: Some hospitals only submit perinatal discharges.	Peer Subgroup X	NPIC DB X	Trend DB	AHRQ/Other National comparisons ¹	
SECTION I: OBS	TETRICAL CLINICAL REPORT					
Table OB 2	APR-MDC 14 Pregnancy, Childbirth and the Puerperium A utilization and charge analysis for MDC 14 cases.	х	Х			
Table OB 2a	Deliveries by APR DRG Subclass A utilization and charge analysis for deliveries assigned to one of four APR-DRG severity subclasses based on complications, co-morbidities, age or other extenuating circumstance.	х	х			
Table OB 3	MDC 14 Cases by MS DRG A utilization and charge analysis of all MDC 14 cases by MS DRG.	х	Х			
Table OB 4	Delivery Analysis Comparative data on vaginal and c-section deliveries; c-section delivery data is also subdivided into primary and repeat c-sections. Utilization and charge analyses are provided.	х	x			
Graph OB 4a	Comparative C-Section Rates: Comparative data display of your hospital's c-section rate with a 95% confidence interval (CI).	х	Х			
Table OB 5	Obstetrical Trend Analysis Your hospital's data compared to the NPIC Trend Database.			х		
Graph OB 5a	C-Section Deliveries with Trendlines			х		
Graph OB 5b*	Primary C-Section Deliveries with Trendlines Rate of primary c-sections as a percent of total cases without a prior uterine scar.			х		
Graph OB 5c	Repeat C-Section Deliveries with Trendlines Rate of repeat c-sections as a percent of total cases with a prior uterine scar.			х		
Table OB 6	Coded Reasons for C-Sections Coded reasons and percent of total for your primary c-section and repeat c-section cases.	х	X			
Table OB 7	Distribution of Coded Reasons for Primary and Repeat C-Sections Trend Analysis			x		

*Sample Table/Graph included

¹AHRQ comparative metrics have not been published for ICD 10 coded data; they are schedule to resume in the near future.



		COMPARISONS				
		Peer Subgroup	NPIC DB	Trend DB	AHRQ/Other National comparisons ¹	
Table OB 8	Operative Vaginal Deliveries Includes forceps deliveries, vacuum extractions and other operative vaginal deliveries. Operative vaginal deliveries are shown as a percent of total vaginal deliveries and each procedure category is displayed as a percent of total operative vaginal deliveries. The database top decile average is also displayed.	х	х			
Graph OB 8a	Operative Vaginal Deliveries with Trendlines			х		
Table OB 9	Delivery Analysis by Day of Week Total deliveries with induction procedure codes divided into vaginal, primary and repeat c-section deliveries. Includes distribution by day of the week. Table also displays repeat c-section deliveries as a percent of total deliveries and distribution by day of the week.	х	х			
Graph OB 9a	Induction Rates with Trendlines			х		
SECTION II: NEC	DNATAL CLINICAL REPORT					
Table N 1*	Neonatal Overview (all cases age 0-28 days old at admission) Total neonates and total inborn neonates (subdivided into singletons, twins, other multiples and unknown), other neonatal admits (subdivided into neonates transferred in, inborn readmissions, all other), inborns and other neonatal admits transferred out.	х	х			
Graph N 1a	Inborn Twins Birth Analysis with Trendlines			х		
Graph N 1b	Inborn Other Multiples Birth Analysis with Trendlines			х		
Table N 2	Inborn Neonatal Analysis by Birthweight Category Percent of total inborn neonates by birthweight category. Utilization and charge analyses are provided.	x	X			
Table N 3	Neonates Transferred In from another hospital 0-28 days old at admission by Birthweight Category	X	Х			
Table N 4	Neonatal Trend Analysis By Birthweight Category			X		
Graph N 4a	Neonatal Birthweight Analysis with Trendlines: Discharges 500-749 Grams at Admission			Х		
Graph N 4b*	Neonatal Birthweight Analysis with Trendlines: Discharges 750-1499 Grams at Admission			Х		
Table N 5	MDC 15 Neonate Analysis by MS DRG A utilization and charge analysis of all MDC 15 neonates by MS DRG. Cases 0-28 days old at admission not grouping to an MDC 15 MS DRG are also displayed.	х	х			

*Sample Table/Graph included

 $^{^1}$ AHRQ comparative metrics have not been published for ICD 10 coded data; they are schedule to resume in the near future.



NPIC DB	Trend DB	AHRQ/Other National comparisons ¹
х		

COMPARISONS

		Subgroup	DB	DB	comparisons ¹
Table N 6	Inborns by APR DRG Subclass	Jung. Jup		33	Companisons
	A utilization and charge analysis for inborns assigned to one of four APR-DRG severity subclasses based on complications, co-morbidities, age or other extenuating circumstance.	х	x		
Table N 7	Neonates Transferred In 0-28 days old at Admission by APR DRG Subclass	х	х		
Table N 8*	Mortality Analysis by Admission Status All neonates at admission, the number who died and percent of total neonates. Also subdivided into inborn ? 500 grams, transferred in and other neonatal admits. Mortality rates at 0-7 days old, 8-27 days old and >= 28 days old.	х	х		
Graph N 8a	NPIC Inborn Mortality Rate >= 500 Grams	х	х		
Graph N 8b	NPIC Transferred In Mortality Rate	х	Х		
Table N 9	Inborn Neonatal Trend Analysis: Deaths by Birthweight Category			х	
Graph N 9a	Inborn Neonatal Mortality Analysis (>500 Grams) with Trendlines			х	
Table N 10	Mortality Analysis by Birthweight Category & Admission Status	х	Х		
SECTION III: NI	EONATAL SPECIAL CARE REPORT				
Table N 11*	Special Care Analysis Identifies the count and percent of total neonates with a special care discharge (defined as Intermediate Care Nursery or Neonatal Intensive Care Nursery days or charges). Special care discharges are subdivided into inborns, neonates transferred in, inborn readmissions and other neonatal admits. Each category is displayed as a percent of total special care discharges. Utilization and charge analyses are provided.	х	х		
Table N 12	Neonatal Special Care Trend Analysis			х	
Graph N 12a	Special Care Discharges with Trendlines			х	
Table N 13	Special Care Discharges by Birthweight Category	х	Х		
Table N 14	Special Care Discharges by Discharge Status	x	х		

*Sample Table/Graph included

 $^{^1}$ AHRQ comparative metrics have not been published for ICD 10 coded data; they are schedule to resume in the near future.



COMPARISONS

		Peer Subgroup	NPIC DB	Trend DB	AHRQ/Other National comparisons ¹
Table N 15	Special Care Analysis: Complications	х	Х		
	Count and rate of selected neonatal complications. The denominator for all rates is the total special care population with the exception of Meconium Aspiration Syndrome (subdivided into inborns in special care with MAS and transfers in to special care with MAS) and Retinopathy of Prematurity with eye procedure (all special care discharges with ROP).				
Table N 16*	Special Care Analysis: Complication Trends Neonates 500-1499 Grams			х	
Graph N 16a	Special Care Analysis with Trendlines: Proportion of BPD to RDS, Neonates 500-1499 Grams			x	
Graph N 16b	Special Care Analysis with Trendlines: NEC Rate, Neonates 500-1499 Grams			x	
Graph N 16c	Special Care Analysis with Trendlines: IVH (Grade III or IV) Rate, Neonates 500-1499 Grams			х	
SECTION IV: PE	RINATAL QUALITY INDICATORS				
Table QM 1*	Maternal Indicators	х	Х		
Table QM 2	Coded Reasons for Postpartum Readmissions	х	х		
Graph QM 1a	AHRQ Perinatal Patient Safety Indicator: Obstetric Trauma - Vaginal Deliveries with Instruments (PSI 18)	х	х		x
Graph QM 1b	AHRQ Perinatal Patient Safety Indicator: Obstetric Trauma - Vaginal Deliveries without Instruments (PSI 19)	x	х		x
Graph QM 1c	AHRQ Inpatient Quality Indicator: Cesarean Delivery Rate (IQI 21)	х	х		x
Graph QM 1d	AHRQ Inpatient Quality Indicator: VBAC Rate Uncomplicated (IQI 22)	х	x		х
Graph QM 1e	AHRQ Inpatient Quality Indicator: Primary Cesarean Delivery Rate (IQI 33)	х	x		х
Graph QM 1f	AHRQ Inpatient Quality Indicator: VBAC Rate All (IQI 34)	х	x		x
Graph QM 1g	NQF Incidence of Episiotomy	х	х		
Graph QM 1h	NPIC Third & Fourth Degree Perineal Laceration Rate, with Forceps or Vacuum Extractions	х	x		
Graph QM 1i	NPIC Third & Fourth Degree Laceration Rate with Forceps or Vacuum Extraction with Trendlines			х	
Graph QM 1j	NPIC Third & Fourth Degree Perineal Laceration Rate, without Forceps or Vacuum Extractions	x	Х		
Graph QM 1k	NPIC Third & Fourth Degree Laceration Rate without Forceps or Vacuum Extraction with Trendlines			х	
Graph QM 1l	NPIC Postpartum Readmission Rate	х	x		

^{*}Sample Table/Graph included

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COMPARISONS

					AHRQ/Other
		Peer	NPIC	Trend	National
		Subgroup	DB	DB	comparisons ¹
Graph QM 1m*	NPIC Postpartum Readmission Rate with Trendlines			x	
Graph QM 1n	NPIC Postpartum Hemorrhage Rate	х	х		
Graph QM 10*	NPIC Postpartum Hemorrhage Rate with Trendlines			x	
Graph QM 1p	NPIC Rate of Disruption or Infection of Obstetrical Wound	х	х		
Graph QM 1q	NPIC Rate of Disruption or Infection of Obstetrical Wound with Trendlines			x	
Graph QM 1r	NPIC Rate of Vaginal Deliveries Coded with Shoulder Dystocia	х	х		
Graph QM 1s	NPIC Rate of Inductions Resulting in Cesarean Delivery	х	х		
Table QN 1*	Neonatal Indicators				
Graph QN 1a	AHRQ Perinatal Patient Safety Indicator: Birth Trauma - Injury to Neonate (PSI 17)	x	x		x
Graph QN 1b	AHRQ Neonatal Quality Indicator: Neonatal Mortality (NQI 02)	x	x		x
Graph QN 1c	AHRQ Neonatal Quality Indicator: Neonatal Bloodstream Infection (NQI 03)	x	x		x
Table QN 2*	NQF Unexpected Newborn Complications (UNC) (NQF #716 "Healthy Term Newborn")	x	x		
Graph QN 2a*	Comparative Unexpected Newborn Complication Rates	x	x		
Table QN 3	Coded Reasons for Inborn Readmissions	x	x		
Graph QN 3a	NPIC Inborn Readmission Rate				
Table QN 4	NPIC Total Inborn Birth Trauma Rate (Trend)			x	
Graph QN 4a	NPIC Total Inborn Birth Trauma Rate with Trendlines			x	
Table QL 1*	Linked Mother/Baby Indicators				
Graph QL 1a*	Vaginal Deliveries with Coded Shoulder Dystocia Linked to an Inborn >= 2500 Grams with Birth Trauma	x	x		
Graph QL 1b	Coded Maternal Conditions with Neonatal Special Care Admission: Hypertension	x	x		
Graph QL 1c	Coded Maternal Conditions with Neonatal Special Care Admission: Diabetes Mellitus	x	x		
Graph QL 1d	Coded Maternal Conditions with Neonatal Special Care Admission: Obesity	x	x		
Graph QL 1e	Coded Maternal Conditions with Neonatal Special Care Admission: Thyroid Dysfunction	x	X		
Graph QL 1f	Primary Cesarean Deliveries ≥ 37 Weeks with Neonatal Special Care Admission	x	Х		
Graph QL 1g	Repeat Cesarean Deliveries ≥ 37 Weeks with Neonatal Special Care Admission	x	x		

^{*}Sample Table/Graph included

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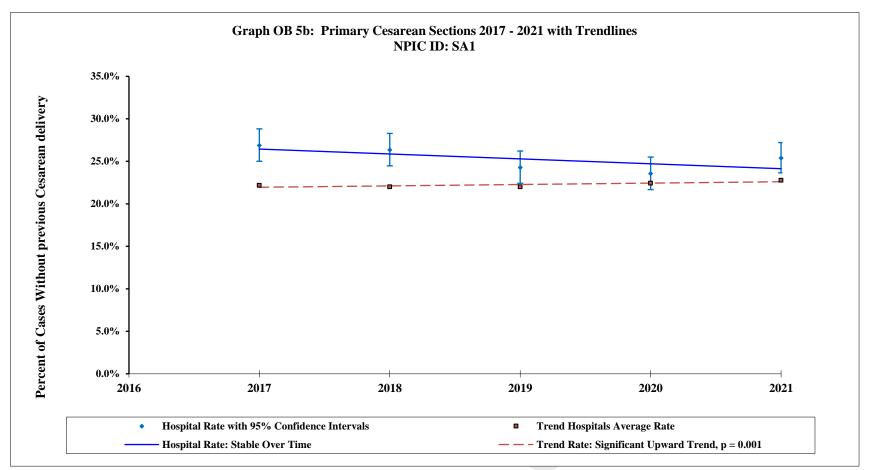
	Hospital	Subgroup	Database
	SA1	Average	Average
Total Hospital Discharges Submitted *	6,280	28,374	21,828
Total Discharge Days	25,242	180,952	112,134
Average Length of Stay	4.0	6.1	4.8
Average Charge per Case	\$32,847	\$72,900	\$49,810
APR DRG Case Mix Index - All Discharges	0.5552	1.3386	0.9484
CMI-Adjusted Average Patient Days	7.2	4.5	5.0
CMI-Adjusted Average Charge per Case	\$59,165	\$54,459	\$52,520
Total Perinatal Discharges**	6,280	8,279	8,021
Total APR MDC 14	3,168	4,192	4,096
APR MDC 14 Case Mix Index	0.4280	0.4284	0.4136
Total Deliveries	2,910	3,812	3,762
Cesarean Section Rate	37.3%	33.9%	33.9%
Vaginal Birth After Cesarean Section (VBAC) Rate	13.6%	19.7%	15.2%
Non-Birth Admission Rate	8.1%	9.2%	7.7%
MDC 14 Payer Mix			
% Medicaid	32.8%	26.5%	34.7%
% Medicare	0.2%	0.6%	0.6%
% Commercial Insurance/TRICARE	59.1%	41.9%	38.2%
% HMO	7.3%	19.7%	18.2%
% Self-Pay/Free Care	0.2%	0.7%	2.2%
% Other/Missing Payers	0.5%	10.5%	6.1%
Total Neonatal Admissions (0-28 Days at Admission)	3,112	4,087	3,924
Neonatal Case Mix Index	0.6858	0.6850	0.4802
Inborns	2,999	3,898	3,816
Inborns, Single Birth	2,824	3,718	3,670
Inborns, Multiple Gestation	167	172	139
Inborns, Unknown	8	8	7
Other Neonatal Admits (Readmits and Transfers in <= 28 days old)	113	188	108

See Appendix I for list of APR DRGs

Date Range of Hospital Data: 1/1/2021 - 12/31/2021 Subgroup: AR - Academic Regional

^{*} Subgroup and Database Averages exclude data from hospitals which only submit perinatal discharges.

^{**} Total APR MDC14 and Total Neonatal discharges



				Pct Change		
	2017	2018	2019	2020	2021	17 - 21
Trend Rate	22.2%	22.0%	22.0%	22.4%	22.8%	2.7%
Hospital Rate	26.9%	26.3%	24.3%	23.6%	25.4%	-5.5%
Hospital Numerator	572	554	488	458	595	
Hospital Denominator	2128	2103	2010	1945	2343	
Lower CI	25.0%	24.5%	22.4%	21.7%	23.6%	
Upper CI	28.8%	28.3%	26.2%	25.5%	27.2%	

Table N 1: Neonatal Overview (All cases age 0-28 days old at admission)								
Hospital: SA1	# of Cases	% of Total Neonates	ALOS	Average Charge	CMI	Adjusted ALOS	Adjusted Average Charge	
Total Neonates ¹					•			
Hospital	3112	100.0%	5.5	\$42,483	0.6858	8.0	\$61,942	
Subgroup Average	4087	100.0%	5.3	\$60,272	0.6850	7.7	\$87,989	
Database Average	3924	100.0%	4.0	\$28,045	0.4802	8.4	\$58,402	
Total Inborn Neonates ²								
Hospital	2999	96.4%	5.2	\$39,014	0.6235	8.3	\$62,573	
Subgroup Average	3898	94.8%	5.0	\$55,121	0.6499	7.7	\$84,813	
Database Average	3816	97.2%	3.9	\$26,088	0.4532	8.6	\$57,571	
Total Inborn Singletons								
Hospital	2824	90.8%	4.4	\$31,536	0.4875	8.9	\$64,686	
Subgroup Average	3718	90.3%	4.5	\$48,023	0.5627	7.9	\$85,348	
Database Average	3670	93.8%	3.5	\$23,156	0.4005	8.8	\$57,817	
Total Inborn Twins								
Hospital	158	5.1%	16.4	\$138,852	2.5972	6.3	\$53,462	
Subgroup Average	165	4.0%	15.9	\$191,990	2.3166	6.9	\$82,877	
Database Average	135	3.1%	11.6	\$91,186	1.6255	7.1	\$56,096	
Total Inborn Other Multiples								
Hospital	9	0.3%	54.1	\$641,107	9.3030	5.8	\$68,914	
Subgroup Average	8	0.2%	32.1	\$369,518	4.5759	7.0	\$80,752	
Database Average	5	0.1%	33.5	\$279,588	4.8744	6.9	\$57,358	
Total Inborn: Unknown						_		
Hospital	8	0.3%	6.3	\$29,679	1.0820	5.8	\$27,429	
Subgroup Average	8	0.2%	12.7	\$132,217	1.8303	6.9	\$72,236	
Database Average	7	0.2%	7.4	\$65,081	1.0999	6.7	\$59,170	

¹ - Subgroup and Database averages include all hospitals

² - Subgroup and Database averages exclude hospitals that do not have inborns

Table N 1	l: Neonatal C	verview (A	All case	s age 0-28	days olo	d at admi	ssion)
		% of Total		Average		Adjusted	Adjusted
Hospital: SA1	# of Cases	Neonates	ALOS	Charge	CMI	ALOS	Average Charge
Total Other Neonatal Adn	nits ¹				•		
Hospital	113	3.6%	14.8	\$134,547	2.3872	6.2	\$56,361
Subgroup Average	188	5.2%	8.8	\$127,414	1.4307	6.2	\$89,058
Database Average	108	2.8%	7.9	\$74,079	1.3592	5.8	\$54,500
Total Neonates Transferre	d In (transferred fr	om another hosp	ital)				
Hospital	51	1.6%	21.8	\$204,644	3.4957	6.2	\$58,541
Subgroup Average	65	2.3%	18.8	\$360,881	3.5908	5.2	\$100,502
Database Average	30	0.9%	18.3	\$203,501	3.6585	5.0	\$55,624
Total Inborns discharged (to home (with or witl	nout home health	n) and readr	nitted within 28	days ²		
Readmissions within 7 day							
Hospital	8	0.3%	3.3	\$23,271	0.6169	5.3	\$37,722
Subgroup Average	38	1.0%	2.2	\$22,210	0.3136	7.0	\$70,815
Database Average	27	0.7%	2.3	\$16,854	0.3644	6.2	\$46,256
Readmissions within 28 da	ys post-discharge						
Hospital	13	0.5%	2.9	\$17,098	0.6430	4.4	\$26,590
Subgroup Average	54	1.4%	2.4	\$24,865	0.3736	6.3	\$66,550
Database Average	36	0.9%	2.4	\$18,760	0.3991	6.1	\$47,001
Other Neonates Admitted	0-28 days old at adm	ission ³				_	
Hospital	43	1.4%	10.7	\$97,121	1.7740	6.0	\$54,747
Subgroup Average	67	1.6%	7.9	\$106,160	1.2089	6.5	\$87,819
Database Average	40	1.0%	7.8	\$70,226	1.4609	5.3	\$48,069

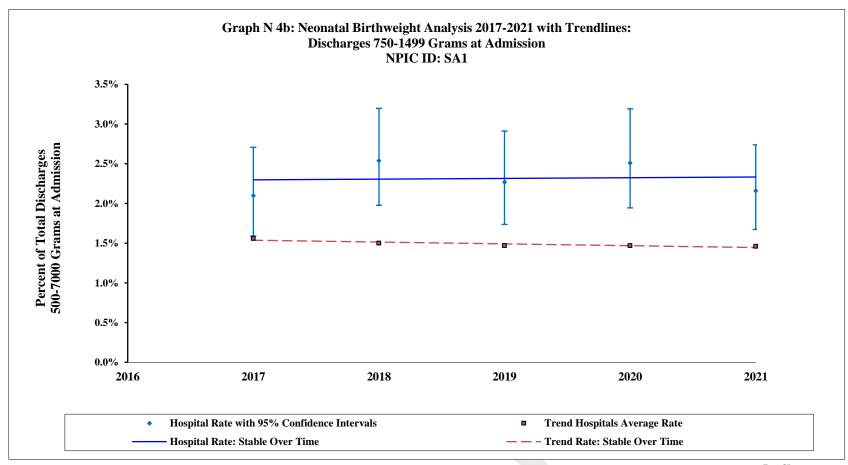
¹ - Includes neonates born outside the hospital, neonates transferred from another hospital, and cases which were readmissions of previous inborn neonates.

² - Readmissions as a percent of total inborns discharged to home (with or without home health)

³ - Excludes readmissions and cases identified as transerred in

Table N 1	l: Neonatal C	verview (A	All case	s age 0-28	days old	d at admi	ssion)
		% of Total		Average		Adjusted	Adjusted
Hospital: SA1	# of Cases	Neonates	ALOS	Charge	CMI	ALOS	Average Charge
Inborns Transferred Out t	o Another Facility						
Hospital	53	1.7%	19.5	\$237,141	3.3205	5.9	\$71,418
Subgroup Average	44	1.1%	42.6	\$748,114	6.9760	6.1	\$107,242
Database Average	36	1.3%	18.3	\$250,134	3.7046	5.2	\$70,982
Inborns Transferred Ou	t to Another Facility	within 0-3 Days	of Birth				
Hospital	31	1.0%	1.2	\$21,028	0.2333	5.0	\$90,136
Subgroup Average	19	0.5%	1.4	\$33,299	0.2807	5.0	\$118,623
Database Average	22	1.0%	1.3	\$19,778	0.2377	5.7	\$83,208
Inborns Transferred Out	t to Another Facility	within 4-7 Days	of Birth				
Hospital	3	0.1%	5.0	\$41,438	0.6371	7.9	\$65,042
Subgroup Average	6	0.1%	5.5	\$82,366	3.2807	1.7	\$25,107
Database Average	3	0.1%	5.4	\$63,706	2.8678	1.9	\$22,214
Inborns Transferred Out	t to Another Facility	>7 Days of Birt	h				
Hospital	19	0.6%	51.7	\$620,648	8.3984	6.2	\$73,901
Subgroup Average	19	0.5%	70.2	\$1,193,782	12.3874	5.7	\$96,370
Database Average	11	0.3%	46.6	\$577,432	9.3720	5.0	\$61,612
Other Neonatal Admits Tr	ansferred Out to An	other Facility w	ithin 0-7 Day	ys of Admission			
Hospital	4	0.1%	2.5	\$77,275	1.9335	1.3	\$39,968
Subgroup Average	5	0.1%	2.8	\$65,341	2.7988	1.0	\$23,346
Database Average	2	0.1%	2.2	\$39,416	1.7872	1.2	\$22,055
Other Neonatal Admits Tr	ansferred Out to An	other Facility >7	7 Days of Ad	mission			
Hospital	5	0.2%	23.6	\$275,176	6.7893	3.5	\$40,531
Subgroup Average	5	0.1%	34.5	\$611,069	8.0949	4.3	\$75,488
Database Average	2	0.1%	32.4	\$456,962	8.2899	3.9	\$55,123

Date Range of Hospital Data: 1/1/2021 - 12/31/2021 Subgroup: AR - Academic Regional



						Pct Change
	2017	2018	2019	2020	2021	17 - 21
Trend Rate	1.6%	1.5%	1.5%	1.5%	1.5%	-6.4%
Hospital Rate	2.1%	2.5%	2.3%	2.5%	2.2%	3.0%
Hospital Numerator	57	69	60	65	66	
Hospital Denominator	2719	2721	2643	2586	3056	
Lower CI	1.6%	2.0%	1.7%	1.9%	1.7%	
Upper CI	2.7%	3.2%	2.9%	3.2%	2.7%	

Hospital: SA1	Hospital	Subgroup Average	Database Average
Total Neonates 0-28 days old at admission	3112	4087	3924
Neonatal deaths	23	20	15
% of total neonates	0.74%	0.53%	0.35%
Inborns (≥ 500 Grams)	2972	3883	3795
Inborn deaths (≥ 500 Grams)	10	12	9
% of total Inborns ≥ 500 Grams	0.34%	0.31%	0.24%
# died 0-7 days old	10	9	6
# died 8-27 days old	0	2	2
# died ≥ 28 days old	0	2	1
Inborn deaths (≥ 500 Grams) excluding congenital anomalies	6	5	4
% of total Inborns ≥ 500 Grams	0.20%	0.13%	0.09%
# died 0-7 days old	6	4	3
# died 8-27 days old	0	0	0
# died ≥ 28 days old	0	0	0
Transferred In	51	65	30
Transferred In deaths	1	1	1
% of total transfers	1.96%	2.51%	2.03%
# died 0-7 days old	1	1	0
# died 8-27 days old	0	1	0
# died ≥ 28 days old	0	0	0
Other Neonatal Admits (includes readmissions)	62	123	78
Other Neonatal Admit deaths	0	1	1
% of total other neonatal admits	0.00%	0.99%	1.26%
# died 0-7 days old	0	0	0
# died 8-27 days old	0	0	0
# died ≥ 28 days old	0	0	0

Date Range of Hospital Data: 1/1/2021 - 12/31/2021

Table N 11: Special Care Analysis								
Hospital: SA1	Hospital	Subgroup Average	Database Average					
Total Neonates 0-28 days old at admission	3112	4087	3924					
Special Care Discharges *	778	757	603					
% of Total Neonates	25.0%	20.9%	14.5%					

Special Care Discharges Only	# of Cases	% of Total Special Care Discharges	ALOS	Average Charge	СМІ	Adjusted ALOS	Adjusted Average Charge
Inborns							-
Hospital	693	89.1%	15.9	\$139,234	2.1684	7.4	\$64,209
Subgroup Average	672	87.9%	17.8	\$254,580	2.7439	6.5	\$92,782
Database Average	615	91.8%	14.5	\$137,186	2.1836	6.6	\$62,826
Neonates Transferred In							
Hospital	50	6.4%	22.2	\$208,696	3.5590	6.2	\$58,639
Subgroup Average	55	8.0%	21.8	\$392,271	4.3516	5.0	\$90,144
Database Average	28	3.6%	20.7	\$229,953	4.0960	5.1	\$56,141
Inborn Readmissions							
Hospital	8	1.0%	8.5	\$61,283	0.9201	9.2	\$66,605
Subgroup Average	10	1.7%	9.7	\$77,851	0.8414	11.5	\$92,522
Database Average	12	2.0%	11.8	\$85,316	1.1821	10.0	\$72,174
Other Neonatal Admits							
Hospital	27	3.5%	15.2	\$146,886	2.4398	6.2	\$60,205
Subgroup Average	20	2.4%	17.6	\$310,786	3.3689	5.2	\$92,253
Database Average	20	2.6%	16.4	\$176,146	3.2141	5.1	\$54,804

^{*} Special Care discharges are those having NICU or NINT days > 0 or NICU or NINT charges > 0

Date Range of Hospital Data: 1/1/2021 - 12/31/2021

Table N16: Special Care Analysis Complication Trends 2017-2021 Neonates with Birthweight 500 - 1499 Grams

NPIC ID: SA1	2017	2018	2019	2020	2021	Pct Change 17 - 21
Special Care Cases with Birthweight 500 - 1499 Grams						
Hospital	67	76	71	80	85	26.9%
Trend Database Average	75	74	73	69	71	-5.3%
Proportion of BPD to RDS						
Hospital						
BPD Cases	8	20	22	39	24	200.0%
RDS Cases	24	40	41	66	72	200.0%
Proportion	33.3%	50.0%	53.7%	59.1%	33.3%	0.0%
Trend Database Average						
BPD Cases	9	12	12	13	13	44.4%
RDS Cases	53	53	54	56	57	7.5%
Proportion	13.1%	15.9%	17.4%	17.8%	19.2%	46.6%
NEC	¥					
Hospital	10	5	7	12	4	-60.0%
Rate	14.9%	6.6%	9.9%	15.0%	4.7%	-68.5%
Trend Database Average	4	3	4	4	4	0.0%
Rate	4.6%	3.7%	3.8%	4.0%	4.0%	-14.3%
IVH (Grade III or IV)						
Hospital	4	5	4	6	2	-50.0%
Rate	6.0%	6.6%	5.6%	7.5%	2.4%	-60.6%
Trend Database Average	4	5	4	4	4	0.0%
Rate	4.5%	5.1%	4.6%	5.2%	4.7%	5.6%

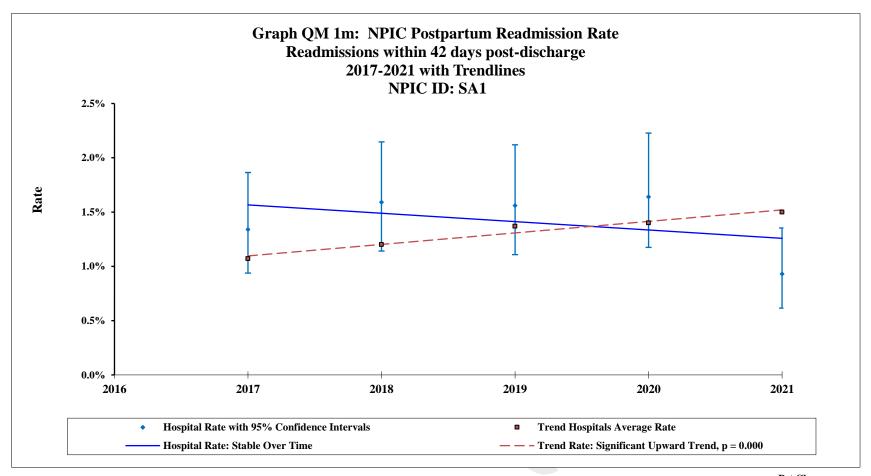
Table QM 1:	Maternal In	dicators						
NPIC ID: SA1	Numerator	Denominator	Hospital	LCI *	UCI *	Subgroup Average	Database Average	National Rates ¹
Total APR MDC 14 (see Appendix I for list of associated APR DRGs)			3,168		•	4,192	4,096	
Total Deliveries			2,910			3,812	3,762	
AHRQ QI™ Measures *								
PSI 18: Obstetric Trauma: Vaginal Deliveries with Instruments	11	103	10.7%	5.5%	18.3%	15.3%	13.5%	11.6%
PSI 19: Obstetric Trauma: Vaginal Deliveries without Instruments	37	1,706	2.2%	1.5%	3.0%	1.9%	1.9%	1.7%
IQI 21: Cesarean Delivery Rate	784	2,482	31.6%	29.8%	33.5%	28.6%	29.9%	28.2%
IQI 22: VBAC Rate Uncomplicated	73	484	15.1%	12.0%	18.6%	20.3%	15.3%	13.2%
IQI 33: Primary Cesarean Delivery Rate, Uncomplicated ^D	373	1,998	18.7%	17.0%	20.4%	18.0%	17.7%	15.6%
IQI 34: VBAC Rate All	Indicat	or has been retired	as of v2021 o	f the AHRQ	WinQI ICD	-10-CM/PCS so	oftware (July 20	021)
Modified PSI 2: Death in MS MDC 14 (Pregnancy, Childbirth, Puerperium) DRGs	0	3,145	0.0000	0.0000	0.0012	0.0001	0.0001	
NQF #0470: Incidence of Episiotomy ^D	62	1,780	3.5%	2.7%	4.4%	2.3%	3.7%	
The Joint Commission PC-02: Cesarean Birth **	N/A	N/A	N/A				26.8%	25.0%
NDIC 2nd and 4th Daniel Lands and Data with Farman (Name Francis)	4.1	102	10.50	7 7 0.	10.00	10.50	12 10	
NPIC 3rd and 4th Degree Laceration Rate, with Forceps/Vacuum Extraction	11	103	10.7%	5.5%	18.3%	13.5%	12.4%	
NPIC 3rd Degree Laceration Rate, with Forceps or Vacuum Extraction	9	103	8.7%	4.1%	15.9%	11.8%	10.6%	
NPIC 4th Degree Laceration Rate, with Forceps or Vacuum Extraction	2	103	1.9%	0.2%	6.8%	1.8%	1.8%	
NPIC 3rd and 4th Degree Laceration Rate, without Forceps/Vacuum Extraction	39	1,722	2.3%	1.6%	3.1%	1.9%	1.9%	
NPIC 3rd Degree Laceration Rate, without Forceps or Vacuum Extraction	31	1,722	1.8%	1.2%	2.5%	1.7%	1.7%	
NPIC 4th Degree Laceration Rate, without Forceps or Vacuum Extraction	8	1,722	0.5%	0.2%	0.9%	0.2%	0.2%	
NPIC Postpartum Readmission Rate								
Readmissions within 30 days post-discharge	27	2,896	0.9%	0.6%	1.4%	1.7%	1.5%	
Readmissions within 42 days post-discharge ^D	27	2,896	0.9%	0.6%	1.4%	1.7%	1.5%	
Accreditation Standards of Performance								
NPIC Postpartum Hemorrhage Rate ^D	178	2,910	6.1%	5.3%	7.0%	7.2%	5.3%	
NPIC Rate of Deliveries with Hypertension coding	611	2,910	21.0%	19.5%	22.5%	24.0%	20.6%	
NPIC Rate of Disruption or Infection of Obstetrical Wound	4	2,910	0.1%	0.0%	0.4%	0.3%	0.2%	
NPIC Anesthesia Complication Rate	0	2,910	0.0%	0.0%	0.1%	0.0%	0.0%	
NPIC Rate of Vaginal Deliveries Coded with Shoulder Dystocia	45	1,825	2.5%	1.8%	3.3%	2.2%	2.6%	
NPIC Rate of Inductions resulting in Cesarean Delivery D	210	1,133	18.5%	16.3%	20.9%	21.6%	21.2%	

Database Top Decile Average is available on corresponding graphical displays.

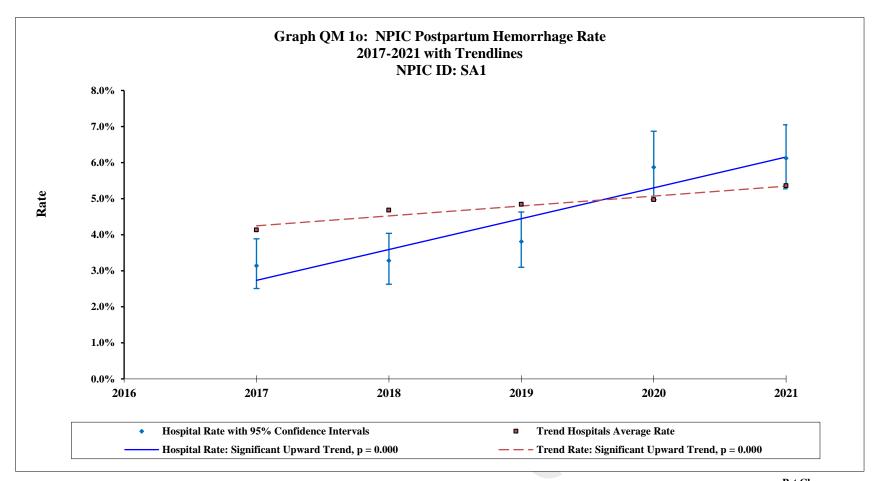
^{*} AHRQ QITM ICD-10-CM/PCS Specifications Version 2021.0.1. Lower and upper confidence intervals for all AHRQ indicators are calculated by NPIC.

^{**} Not available. Your hospital did not provide the parity data required to calculate the PC-02 measure. Due to sample size, Subgroup Average is not displayed.

¹ AHRQ: 2018 AHRQ Healthcare Cost and Utilization Project (HCUP) State Inpatient Databases (SID), Version 2021, July 2021; PC-02: The Joint Commission *Quality Check*, Perinatal Reporting Period April 2020 - March 2021.



						Pct Change
	2017	2018	2019	2020	2021	17 - 21
Trend Rate	1.1%	1.2%	1.4%	1.4%	1.5%	40.2%
Hospital Rate	1.3%	1.6%	1.6%	1.6%	0.9%	-30.6%
Hospital Numerator	35	41	39	40	27	
Hospital Denominator	2604	2584	2508	2438	2896	
Lower CI	0.9%	1.1%	1.1%	1.2%	0.6%	
Upper CI	1.9%	2.1%	2.1%	2.2%	1.4%	



						Pct Change
	2017	2018	2019	2020	2021	17 - 21
Trend Rate	4.1%	4.7%	4.8%	5.0%	5.4%	29.8%
Hospital Rate	3.1%	3.3%	3.8%	5.9%	6.1%	94.9%
Hospital Numerator	82	85	96	144	178	
Hospital Denominator	2609	2593	2521	2455	2910	
Lower CI	2.5%	2.6%	3.1%	5.0%	5.3%	
Upper CI	3.9%	4.0%	4.6%	6.9%	7.0%	

Table	QN 1: Nec	onatal Indica	tors					
NPIC ID: SA1	Numerator	Denominator	Hospital	LCI*	UCI*	Subgroup Average	Database Average	National Rates ¹
Total Neonates			3,112			4,087	3,924	
Total Inborns			2,999			3,898	3,816	
AHRQ PSI 17: Birth Trauma: Injury to Neonate **	7	2,854	0.25%	0.10%	0.50%	0.59%	0.44%	0.45%
AHRQ NQI 02: Neonatal Mortality ** Observed Rate Expected Rate	Indicator has been retired as of v2021 of the AHRQ WinQI ICD-10-CM/PCS software (July 2021)							
AHRQ NQI 03: Neonatal Bloodstream Infection **	1	132	0.76%	0.02%	4.15%	2.30%	2.64%	1.96%
The Joint Commission PC-06: Unexpected Complications in Term Newborns***	89	2,136	41.7	33.6	51.0	33.9	31.4	31.0
Inborn Readmission Rate ²	13	2,916	0.5%	0.2%	0.8%	1.4%	0.9%	
NPIC Total Inborn Birth Trauma Rate								
Subdural or cerebral hemorrhage			1			1	1	
Epicranial subaponeurotic hemorrhage			2			6	3	
Other injuries to scalp			44			152	116	
Fracture of clavicle			12			8	10	
Other injuries to skeleton			2			3	2	
Injury to spine and spinal cord			0			0	0	
Facial nerve injury			0			0	0	
Injury to brachial plexus			4			5	4	
Other cranial and peripheral nerve injuries			0			0	0	
Other specified birth trauma			3			15	12	
Birth trauma unspecified			0			0	0	
Total Codes			68			189	148	
Total Cases			66			182	143	
Total Inborn Birth Trauma Rate ³	66	2,999	2.2%	1.7%	2.8%	4.5%	3.9%	

AHRQ: 2018 AHRQ Healthcare Cost and Utilization Project (HCUP) State Inpatient Databases (SID), Version 2021, July 2021; Unexpected Complications in Term Newborns: The Joint Commission *Quality Check*, Perinatal Reporting Period April 2020 - March 2021.

Date Range of Hospital Data: 1/1/2021 - 12/31/2021

² Total Inborns discharged to home (with or without home health) and readmitted within 28 days.

³ Total inborn cases with a birth trauma code divided by total inborns.

^{*}Lower and upper confidence intervals for all AHRQ indicators are calculated by NPIC.

^{**}AHRQ QITM ICD-10-CM/PCS Specification Version 2021.0.1.

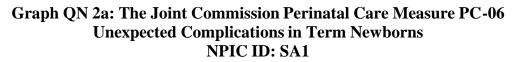
^{***}Overall Rate per 1,000. See Report Appendix for a list of The Joint Commission Severe and Moderate ICD-10 code tables.

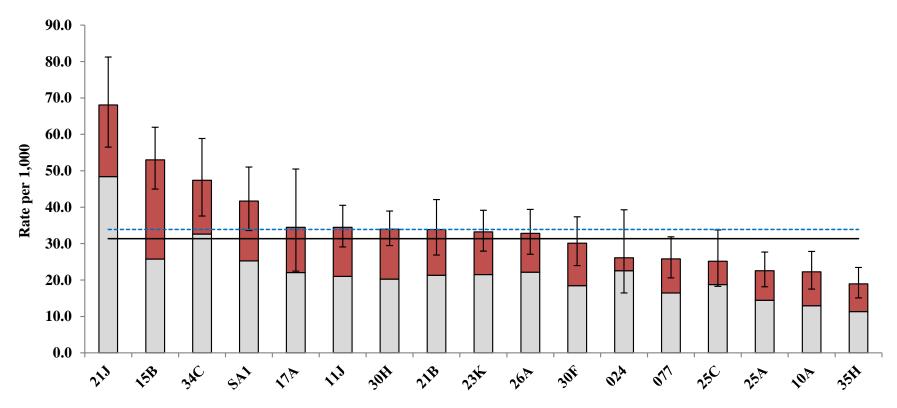
Table QN 2: The Joint Commission Perinatal Care Measure PC-06 Unexpected Complications in Term Newborns

•	T		T		T	
NPIC ID: SA1		spital		p Average		e Average
A. Inborns		,999	1	898		816
PC-06 Denominator: full term newborns with no preexisting conditions	2	,136	2,	909	2,	930
B. Unexpected Complications in Term Newborns	Total	Per 1,000	Average	Per 1,000	Average	Per 1,000
PC-06.0: Overall Rate	89	41.7	94	33.9	83	31.4
PC-06.1: Severe Rate	35	16.4	35	12.0	29	12.5
PC-06.2: Moderate Rate	54	25.3	59	21.9	54	18.8
C1. Included Populations: Severe ¹	Total	Percent	Average	Percent	Average	Percent
• Death	0	0.0%	0	0.4%	0	0.3%
Transfer to another acute care facility for higher level of care	7	7.9%	3	3.0%	7	16.0%
• Principal or Other Diagnosis Codes or Principal or Other Procedure Codes for Severe Morbidities (as defined in Tables 11.36, 11.37, 11.38, 11.39, 11.40, 11.41, 11.42, 11.43, 11.44)	19	21.4%	26	25.7%	18	18.3%
• Length of Stay (LOS) greater than 4 days AND Principal or Other Diagnosis Codes for Sepsis (Table 11.45)	9	10.1%	6	6.2%	4	5.0%
C2. Included Populations: Moderate ¹	Total	Percent	Average	Percent	Average	Percent
• Principal or Other Diagnosis Codes or Principal or Other Procedure Codes for Moderate Complications (Tables 11.46, 11.47, 11.48)	13	14.6%	21	24.0%	18	20.3%
• Single Liveborn Newborn-Vaginal (Table 11.20.2) AND LOS > 2 OR Single Liveborn Newborn-Cesarean (Table 11.20.3) AND LOS > 4 AND Principal or Other Diagnosis Codes or Principal or Other Procedure Codes for Moderate Complications (Tables 11.49, 11.50, 11.51, 11.52, 11.53)	39	43.8%	33	35.9%	33	36.3%
• LOS > 5 and NO Principal or Other Diagnosis Codes or Principal or Other Procedure Codes for jaundice or social indications (Tables 11.33, 11.34, 11.35)	2	2.3%	5	4.9%	4	3.8%

¹ See Report Appendix for a list of The Joint Commission Severe and Moderate ICD-10 code tables.

Date Range of Hospital Data: 1/1/2021 - 12/31/2021 Subgroup: AR - Academic Regional





Hospital Overall Rate with 95% Confidence Interval: 41.7 per 1,000

Hospital Severe Rate: 16.4
Hospital Moderate Rate: 25.3

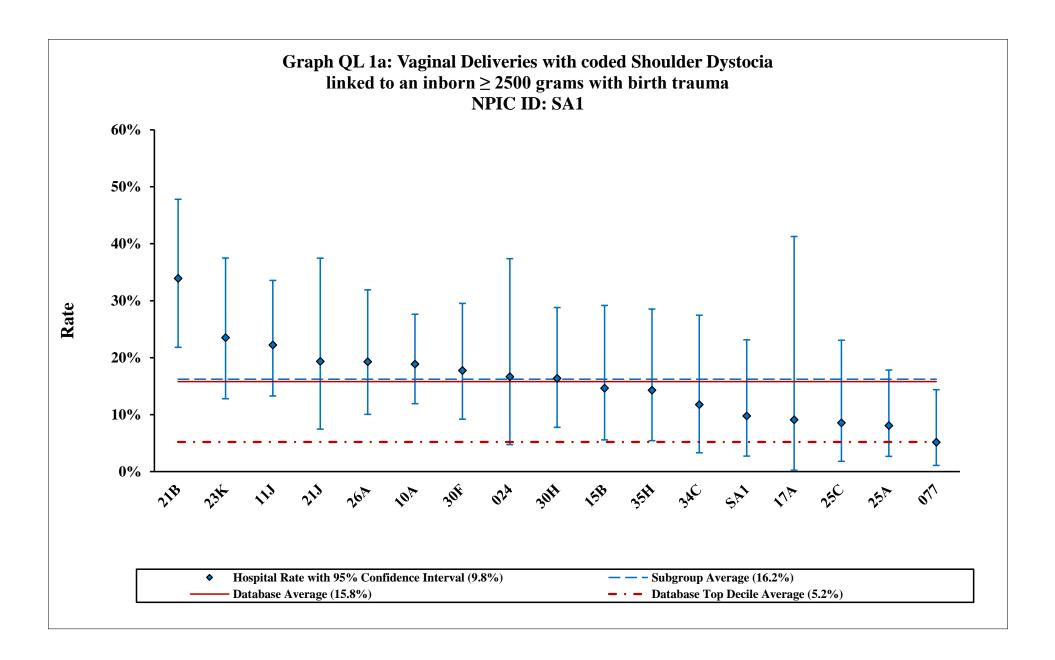
----- Subgroup Average Overall Rate: 33.9

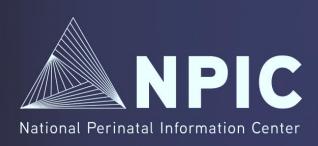
— Database Average Overall Rate: 31.4

Table QL 1: Linked Mother/Baby Indicators												
NPIC ID: SA1	Numerator	Denominator	Hospital	LCI	UCI	Subgroup Average	Database Average	Top Decile Average				
Total Deliveries			2,910			3,812	3,741					
Total Deliveries linked to an inborn(s)			2,671			3,661	3,608					
Deliveries linked to an inborn(s) as a percent of total deliveries			91.8%			95.6%	96.4%					
Vaginal Deliveries with coded Shoulder Dystocia								-				
linked to an inborn ≥ 2500 grams with birth trauma	4	41	9.8%	2.7%	23.1%	16.2%	15.8%	5.2%				
Count by Code:												
Other injuries to scalp			1			4	4					
Fracture of clavicle			0			2	2					
Injury to brachial plexus			3			2	2					
All other birth trauma codes			1			2	2					
Coded Maternal Conditions with												
Neonatal Special Care Admission												
Hypertension	191	542	35.2%	31.2%	39.4%	27.5%	21.1%	14.0%				
Diabetes Mellitus	25	43	58.1%	42.1%	73.0%	46.6%	34.1%	24.1%				
Obesity	143	502	28.5%	24.6%	32.7%	22.1%	16.6%	9.9%				
Thyroid dysfunction	64	290	22.1%	17.4%	27.3%	24.6%	17.5%	10.7%				
Primary Cesarean Deliveries ≥ 37 weeks with												
Neonatal Special Care Admission	99	425	23.3%	19.4%	27.6%	18.3%	13.5%	7.8%				
Repeat Cesarean Deliveries ≥ 37 weeks with												
Neonatal Special Care Admission	62	397	15.6%	12.2%	19.6%	13.3%	8.9%	4.7%				

Subgroup and Database Averages are calculated from hospitals with a valid ($\geq 70\%$) mother/baby linking rate. Database Top Decile Averages are also shown on corresponding graphical displays.

Date Range of Hospital Data: 1/1/2021 - 12/31/2021





QUARTERLY MEASURE SNAPSHOT

The **Quarterly Measure Snapshot*** provides internal hospital comparisons for over 20 Key Metrics using your quarterly data submission. The Snapshot displays one quarter of data compared to the same quarter of the previous year and the percent change between quarters. This mid-cycle report is a complement to your Quarterly Report, which will include additional comparisons to your peer subgroup and the NPIC database for the rolling four quarter period.

*Metric definitions can be found in the Quarterly Report Specifications located on the NPIC Member Portal.





NPIC ID: SA1

HOSPITAL COMPARISON

NPIC COMPARISONS

adional Fernatal mornation center		пс	JSPITAL CONIPARI	NPIC COMPANISONS		
			_			!/2021 - 09/30/2021
CAIRN		Q4	Q4	Pct	Subgroup AR	NPIC Database
Metrics		2021	2020	Change	Average	Average
	OVERVIEW					
	Total Perinatal Discharges Submitted	1,649	1,259	31.0%	2,218	2,156
	Average Length of Stay	4.4	4.2	5.9%	4.1	3.4
	Average Charge per Case	\$46,130	\$22,605	104.1%	\$46,434	\$27,555
	% Medicaid (MDC 14 only)	27.9%	50.2%	-44.4%	26.2%	32.6%
	COVID-19 Infections among perinatal cases (APR MDC 14 & Neonates) - see footer	39.6%	2.5%	1478.5%	10.7%	8.6%
	MATERNAL INDICATORS					
\checkmark	Total Deliveries (APR DRGs)	763	570	33.9%	1,026	1,014
	Total Cesarean Section Deliveries	259	207	25.1%	355	348
\checkmark	Cesarean Section Rate (% of total deliveries)	33.9%	36.3%	-6.6%	34.7%	33.7%
\checkmark	Primary Cesarean Section Rate (% of cases without a previous cesarean delivery)	23.1%	23.2%	-0.4%	24.5%	22.3%
\checkmark	Repeat Cesarean Section Rate (% of cases with a previous cesarean delivery)	82.1%	84.4%	-2.7%	80.9%	84.9%
	Vaginal Birth After Cesarean Section (VBAC) Rate	17.9%	15.6%	14.7%	19.1%	15.1%
\checkmark	Operative Vaginal Delivery Rate (% of total vaginal deliveries)	5.6%	8.3%	-32.7%	5.0%	5.3%
\checkmark	NPIC Postpartum Hemorrhage Rate	6.2%	7.0%	-12.3%	7.3%	5.3%
\checkmark	NQF Incidence of Episiotomy	3.5%	3.5%		2.1%	3.7%
	NPIC Estimated Rate of Inductions	40.8%	39.1%	4.2%	32.5%	28.6%
\checkmark	NPIC Estimated Rate of Inductions resulting in Cesarean Delivery	15.4%	20.2%	-23.5%	22.2%	21.0%
\checkmark	NPIC Rate of Deliveries with Hypertension coding	19.4%	23.2%	-16.2%	23.1%	20.3%
	NEONATAL INDICATORS					
	Total Neonatal Admissions (0-28 Days at Admission)	833	618	34.8%	1,099	1,056
\checkmark	Total Inborns	799	588	35.9%	1,051	1,027
	Other Neonatal Admits (includes Readmits and Transfers in)	34	30	13.3%	48	29
	Inborn Readmits as a % of total neonates	0.5%	1.5%	-67.1%	1.0%	0.7%
	Inborns Transferred Out to Another Facility (% of total neonates)	1.9%	0.3%	500.0%	1.2%	1.3%
✓	Special Care Discharges (% of total neonates)	23.5%	30.1%	-21.8%	19.5%	14.1%
√	Inborn Mortality (Inborns >= 500 grams)	0.63%	0.34%	85.29%	0.37%	0.21%
·	THE JOINT COMMISSION PC-06: UNEXPECTED COMPLICATIONS IN TERM NEWBORNS ¹	0.0370	0.5470	03.2370	0.5770	0.2170
./		<i>A</i> E 1	69.6	2E 10/	34.8	31.5
./	PC-06.0: Overall Rate per 1,000 (Inborns with Severe or Moderate Complications)	45.1 17.4		-35.1%		
v	PC-06.1 Severe Rate per 1,000 (Inborns with Severe Complications)	17.4	25.8	-32.6%	9.9	11.9
	PC-06.2 Moderate Rate per 1,000 (Inborns with Moderate Complications)	27.8	43.8	-36.6%	24.9	19.6
	AIM SEVERE MATERNAL MORBIDITY (SMM) ²	_				
√	SMM - Overall Rate	1.1%	1.8%	-40.0%	3.6%	2.8%
✓	Excluding blood transfusions	0.9%	1.4%	-34.3%	1.6%	1.2%
√	SMM AMONG HEMORRHAGE CASES - Overall Rate	9.2%	14.3%	-35.4%	28.7%	27.8%
✓	Excluding blood transfusions	7.7%	10.2%	-24.6%	8.0%	7.5%
✓	SMM AMONG PREECLAMPSIA CASES - Overall Rate	3.9%	7.7%	-49.9%	14.5%	10.2%
✓	Excluding blood transfusions	3.9%	7.7%	-49.9%	8.4%	5.9%

CAIRN Metrics: Historical data for these metrics is available in CAIRN.

Snapshot V8.0d ©NPIC 2022 Run Date: 8/4/2022

¹ Source: Specification Manual for Joint Commission National Quality Measures v2020B3, www.jointcommission.org.

² Alliance for Innovation on Maternal Health (AIM) measure definitions are available at: https://safehealthcareforeverywoman.org/aim/resources/aim-data-resources/ COVID rate: Positive tests as a percent of total positive + negative + exposure tested + screened cases. https://www.cdc.gov/nchs/data/icd/COVID-19-guidelines-final.pdf