DEPARTMENT OF HEALTH & HUMAN SERVICES Centers for Medicare & Medicaid Services 7500 Security Boulevard, Mail Stop S2-26-12 Baltimore, Maryland 21244-1850



July 28, 2025

Emily Zalkovsky Chief Medicaid and CHIP Services Officer State of Texas, Health and Human Services Commission 4601 W Guadalupe Street MC H100 Austin, TX 78751

Dear Emily Zalkovsky:

In accordance with 42 CFR 438.6(c), the Centers for Medicare & Medicaid Services (CMS) has reviewed and is approving Texas's submission of an amended proposal for delivery system and provider payment initiatives under Medicaid managed care plan contracts. The proposal was received by CMS on April 24, 2025 and determined complete on May 6, 2025. A final revised preprint was received June 16, 2025. The proposal has a control name of TX_VBP.Fee_IPH.OPH.BHI_Amend2_20240901-20250831.

CMS has completed our review of the following Medicaid managed care state directed payment(s):

• Comprehensive Hospital Increase Reimbursement Program (CHIRP) for the rating period covering September 1, 2024 through August 31, 2025, incorporated in the capitation rates through a risk-based rate adjustment.

This letter satisfies the regulatory requirement in 42 CFR 438.6(c)(2) for state directed payments described in 42 CFR 438.6(c)(1). This letter pertains only to the actions identified above and does not apply to other actions currently under CMS's review. This letter does not constitute approval of any specific Medicaid financing mechanism used to support the non-federal share of expenditures associated with these actions. All relevant federal laws and regulations apply. CMS reserves its authority to enforce requirements in the Social Security Act and the applicable implementing regulations, including by initiating separate deferrals and/or disallowances of federal financial participation. CMS is actively assessing the impact of the One Big Beautiful Bill Act (OBBBA), which was signed into law on July 4, 2025, on state directed payments authorized under 42 CFR 438.6(c). Our approval of this state directed payment does not constitute a determination that this payment arrangement would be approved under section 71116 of the OBBBA. CMS expects to provide additional information on state directed payments under OBBBA in the coming months. The state is required to submit contract action(s) and related capitation rates that include all state directed payments.

All state directed payments must be addressed in the applicable rate certifications. CMS recommends that states share this letter and the preprint(s) with the certifying actuary. Documentation of all state directed payments must be included in the initial rate certification as outlined in Section I, Item 4, Subsection D, of the Medicaid Managed Care Rate Development Guide. The state and its actuary must ensure all documentation outlined in the Medicaid

Managed Care Rate Development Guide is included in the initial rate certification. Failure to provide all required documentation in the rate certification will cause delays in CMS review. The Medicaid Managed Care Rate Development Guide includes specific requirements associated with the use of separate payment terms. If the total amount of the separate payment term is exceeded from what is documented in the preprint or the payment methodology changes, CMS requires the state to submit a state directed payment preprint amendment. If the separate payment term amount documented within the rate certification exceeds the separate payment term amount documented in the preprint, the state is required to submit a rate certification amendment.

Approval of this State directed payment proposal for the applicable rating period does not preclude CMS from requesting additional materials from the State, revision to the State directed payment proposal design or any other modifications to the proposal for future rating periods, if CMS determines that such modifications are required for the State to meet relevant federal regulatory requirements.

CMS appreciates the information that Texas has provided as part of the State Fiscal Year 2025 rating period preprint review regarding the total payment rate analysis and average commercial rate calculations in accordance with 42 CFR 438.6(c)(2)(iii). CMS is maintaining the conditional requirement denoted in the original SFY 2025 SDP approval that the state continue to work with CMS to further refine the total payment rate analysis and average commercial rate demonstration for the State Fiscal Year 2026 rating period and future rating periods.

If you have any questions concerning this letter, please contact StateDirectedPayment@cms.hhs.gov.

Sincerely,

Laura Snyder Director, Division of Managed Care Policy Center for Medicaid and CHIP Services

Section 438.6(c) Preprint

42 C.F.R. § 438.6(c) provides States with the flexibility to implement delivery system and provider payment initiatives under MCO, PIHP, or PAHP Medicaid managed care contracts (i.e., state directed payments). 42 C.F.R. § 438.6(c)(1) describes types of payment arrangements that States may use to direct expenditures under the managed care contract. Under 42 C.F.R. § 438.6(c)(2)(ii), contract arrangements that direct an MCO's, PIHP's, or PAHP's expenditures under paragraphs (c)(1)(i) through (c)(1)(ii) and (c)(1)(iii)(B) through (D) must have written approval from CMS prior to implementation and before approval of the corresponding managed care contract(s) and rate certification(s). This preprint implements the prior approval process and must be completed, submitted, and approved by CMS before implementing any of the specific payment arrangements described in 42 C.F.R. § 438.6(c)(1)(i) through (c)(1)(ii) and (c)(1)(iii)(B) through (D). Please note, per the 2020 Medicaid and CHIP final rule at 42 C.F.R. § 438.6(c)(1)(iii)(A), States no longer need to submit a preprint for prior approval to adopt minimum fee schedules using State plan approved rates as defined in 42 C.F.R. § 438.6(a).

Submit all state directed payment preprints for prior approval to: StateDirectedPayment@cms.hhs.gov.

SECTION I: DATE AND TIMING INFORMATION

- 1. Identify the State's managed care contract rating period(s) for which this payment arrangement will apply (for example, July 1, 2020 through June 30, 2021):
- 2. Identify the State's requested start date for this payment arrangement (for example, January 1, 2021). *Note, this should be the start of the contract rating period unless this payment arrangement will begin during the rating period.*
- **3.** Identify the managed care program(s) to which this payment arrangement will apply:
- **4.** Identify the estimated **total dollar amount** (federal and non-federal dollars) of this state directed payment:
 - **a.** Identify the estimated federal share of this state directed payment:
 - **b.** Identify the estimated non-federal share of this state directed payment:

Please note, the estimated total dollar amount and the estimated federal share should be described for the rating period in Question 1. If the State is seeking a multi-year approval (which is only an option for VBP/DSR payment arrangements (42 C.F.R. § 438.6(c)(1)(i)-(ii))), States should provide the estimates per rating period. For amendments, states should include the change from the total and federal share estimated in the previously approved preprint.

5.	Is this the initial submission the State is se	eking app	proval under	42 C.F.R. §	§ 438.6(c) for
	this state directed payment arrangement?	Yes	☐ No		

6.	If th	is is not the initial submission for this state directed payment, please indicate if:
	a.	☐ The State is seeking approval of an amendment to an already approved state directed payment.
	b.	☐ The State is seeking approval for a renewal of a state directed payment for a new rating period.
		i. If the State is seeking approval of a renewal, please indicate the rating periods for which previous approvals have been granted:
	c.	Please identify the types of changes in this state directed payment that differ from what was previously approved.
		Payment Type Change
		☐ Provider Type Change
		Uguality Metric(s) / Benchmark(s) Change
		Under: Describe:
		☐ No changes from previously approved preprint other than rating period(s).
7.		Please use the checkbox to provide an assurance that, in accordance with 42 C.F.R. § .6(c)(2)(ii)(F), the payment arrangement is not renewed automatically.
SECT	ION	II: TYPE OF STATE DIRECTED PAYMENT
8.	arra und prov	ccordance with 42 C.F.R. § 438.6(c)(2)(ii)(A), describe in detail how the payment ngement is based on the utilization and delivery of services for enrollees covered er the contract. The State should specifically discuss what must occur in order for the vider to receive the payment (e.g., utilization of services by managed care enrollees, et or exceed a performance benchmark on provider quality metrics).
	a.	☐ Please use the checkbox to provide an assurance that CMS has approved the
		federal authority for the Medicaid services linked to the services associated with the SDP (i.e., Medicaid State plan, 1115(a) demonstration, 1915(c) waiver, etc.).
	b.	Please also provide a link to, or submit a copy of, the authority document(s) with initial submissions and at any time the authority document(s) has been renewed/revised/updated.

9.	Please select the general type of state directed payment arrangement the State is seeking prior approval to implement. (Check all that apply and address the underlying questions for each category selected.)
	a. VALUE-BASED PAYMENTS / DELIVERY SYSTEM REFORM: In accordance with 42 C.F.R. § 438.6(c)(1)(i) and (ii), the State is requiring the MCO, PIHP, or PAHP to

C.F.R. § 438.6(c)(1)(i) and (ii), the State is requiring the MCO, PIHP, or PAHP to implement value-based purchasing models for provider reimbursement, such as alternative payment models (APMs), pay for performance arrangements, bundled payments, or other service payment models intended to recognize value or outcomes over volume of services; or the State is requiring the MCO, PIHP, or PAHP to participate in a multi-payer or Medicaid-specific delivery system reform or performance improvement initiative.

If checked, please answer all questions in Subsection IIA.

b. FEE SCHEDULE REQUIREMENTS: In accordance with 42 C.F.R. § 438.6(c)(1)(iii)(B) through (D), the State is requiring the MCO, PIHP, or PAHP to adopt a minimum or maximum fee schedule for network providers that provide a particular service under the contract; or the State is requiring the MCO, PIHP, or PAHP to provide a uniform dollar or percentage increase for network providers that provide a particular service under the contract. [Please note, per the 2020 Medicaid and CHIP final rule at 42 C.F.R. § 438.6(c)(1)(iii)(A), States no longer need to submit a preprint for prior approval to adopt minimum fee schedules using State plan approved rates as defined in 42 C.F.R. § 438.6(a).]

If checked, please answer all questions in Subsection IIB.

SUBSECTION IIA: VALUE-BASED PAYMENTS (VBP) / DELIVERY SYSTEM REFORM (DSR):

This section must be completed for all state directed payments that are VBP or DSR. This section does not need to be completed for state directed payments that are fee schedule requirements.

se check the type of VBP/DSR State directed payment the State is seeking prior oval for. Check all that apply; if none are checked, proceed to Section III.
Quality Payment/Pay for Performance (Category 2 APM, or similar) Bundled Payment/Episode-Based Payment (Category 3 APM, or similar)
Population-Based Payment/Accountable Care Organization (Category 4 APM, or similar)
Multi-Payer Delivery System Reform
Medicaid-Specific Delivery System Reform
Performance Improvement Initiative
Other Value-Based Purchasing Model

- 11. Provide a brief summary or description of the required payment arrangement selected above and describe how the payment arrangement intends to recognize value or outcomes over volume of services. If "other" was checked above, identify the payment model. The State should specifically discuss what must occur in order for the provider to receive the payment (e.g., meet or exceed a performance benchmark on provider quality metrics).
- 12. In Table 1 below, identify the measure(s), baseline statistics, and targets that the State will tie to provider performance under this payment arrangement (provider performance measures). Please complete all boxes in the row. To the extent practicable, CMS encourages states to utilize existing, validated, and outcomes-based performance measures to evaluate the payment arrangement, and recommends States use the CMS
 Measures when applicable. If the state needs more space, please use Addendum Table 1.A and check this box:

TABLE 1: Payment Arrangement Provider Performance Measures

TABLE 1. I ayın	TABLE 1: Fayment Afrangement Frovider Fertormance Weasures					
Measure Name and NQF # (if applicable)	Measure Steward/ Developer ¹	Baseline ² Year	Baseline ² Statistic	Performance Measurement Period ³	Performance Target	Notes ⁴
Example: Percent of High-Risk Residents with Pressure Ulcers – Long Stay	CMS	CY 2018	9.23%	Year 2	8%	Example notes
a.						
b.						
c.						
d.						
e.						

- 1. Baseline data must be added after the first year of the payment arrangement
- 2. If state-developed, list State name for Steward/Developer.
- 3. If this is planned to be a multi-year payment arrangement, indicate which year(s) of the payment arrangement that performance on the measure will trigger payment.
- 4. If the State is using an established measure and will deviate from the measure steward's measure specifications, please describe here. Additionally, if a state-specific measure will be used, please define the numerator and denominator here.

- **13.** For the measures listed in Table 1 above, please provide the following information:
 - **a.** Please describe the methodology used to set the performance targets for each measure.

b. If multiple provider performance measures are involved in the payment arrangement, discuss if the provider must meet the performance target on each measure to receive payment or can providers receive a portion of the payment if they meet the performance target on some but not all measures?

c. For state-developed measures, please briefly describe how the measure was developed?

	ne State seeking a multi-year approval of the state directed payment arrangement? Yes No
a.	If this payment arrangement is designed to be a multi-year effort, denote the State's managed care contract rating period(s) the State is seeking approval for.
b.	If this payment arrangement is designed to be a multi-year effort and the State is NOT requesting a multi-year approval, describe how this application's payment arrangement fits into the larger multi-year effort and identify which year of the effort is addressed in this application.
15. Use	the checkboxes below to make the following assurances:
a.	In accordance with 42 C.F.R. § 438.6(c)(2)(iii)(A), the state directed payment arrangement makes participation in the value-based purchasing initiative, delivery system reform, or performance improvement initiative available, using the same terms of performance, to the class or classes of providers (identified below) providing services under the contract related to the reform or improvement initiative.
b.	☐ In accordance with 42 C.F.R. § 438.6(c)(2)(iii)(B), the payment arrangement makes use of a common set of performance measures across all of the payers and providers.
с.	☐ In accordance with 42 C.F.R. § 438.6(c)(2)(iii)(C), the payment arrangement does not set the amount or frequency of the expenditures.
d.	☐ In accordance with 42 C.F.R. § 438.6(c)(2)(iii)(D), the payment arrangement does not allow the State to recoup any unspent funds allocated for these arrangements from the MCO, PIHP, or PAHP.
SURSECT	ION IIB: STATE DIRECTED FEE SCHEDULES:
	n must be completed for all state directed payments that are fee schedule
requiremen VBP or DS	ts. This section does not need to be completed for state directed payments that are R.
	use check the type of state directed payment for which the State is seeking prior roval. Check all that apply; if none are checked, proceed to Section III.
a.	☐ Minimum Fee Schedule for providers that provide a particular service under the contract <i>using rates other than State plan approved rates</i> ¹ (42 C.F.R. § 438.6(c)(1)(iii)(B))
b.	Maximum Fee Schedule (42 C.F.R. § 438.6(c)(1)(iii)(D))
c.	Uniform Dollar or Percentage Increase (42 C.F.R. § 438.6(c)(1)(iii)(C))

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¹ Please note, per the 2020 Medicaid and CHIP final rule at 42 C.F.R. § 438.6(c)(1)(iii)(A), States no longer need to submit a preprint for prior approval to adopt minimum fee schedules that use State plan approved rates as defined in 42 C.F.R. § 438.6(a).

17. If th	e State is seeking prior approval of a fee schedule (options a or b in Question 16):
a.	Check the basis for the fee schedule selected above.
	 i. The State is proposing to use a fee schedule based on the State-plan approved rates as defined in 42 C.F.R. § 438.6(a). ² ii. The State is proposing to use a fee schedule based on the Medicare or Medicare-equivalent rate.
	iii. The State is proposing to use a fee schedule based on an alternative fee schedule established by the State.
	1. If the State is proposing an alternative fee schedule, please describe the alternative fee schedule (e.g., 80% of Medicaid State-plan approved rate)
b.	Explain how the state determined this fee schedule requirement to be reasonable and appropriate.
add	sing a maximum fee schedule (option b in Question 16), please answer the following itional questions: Use the checkbox to provide the following assurance: In accordance with 42 C.F.R. § 438.6(c)(1)(iii)(C), the State has determined that the MCO, PIHP, or PAHF has retained the ability to reasonably manage risk and has discretion in accomplishing the goals of the contract.
b.	Describe the process for plans and providers to request an exemption if they are under contract obligations that result in the need to pay more than the maximum fee schedule.
c.	 Indicate the number of exemptions to the requirement: i. Expected in this contract rating period (estimate) ii. Granted in past years of this payment arrangement
d.	Describe how such exemptions will be considered in rate development.

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² Please note, per the 2020 Medicaid and CHIP final rule at 42 C.F.R. § 438.6(c)(1)(iii)(A), States no longer need to submit a preprint for prior approval to adopt minimum fee schedules that use State plan approved rates as defined in 42 C.F.R. § 438.6(a).

	ne State is seeking prior approval for a uniform dollar or percentage increase (option collection 16), please address the following questions:
a.	Will the state require plans to pay a uniform dollar amount <u>or</u> a uniform percentage increase? (<i>Please select only one</i> .)
b.	What is the magnitude of the increase (e.g., \$4 per claim or 3% increase per claim?)
c.	Describe how will the uniform increase be paid out by plans (e.g., upon processing the initial claim, a retroactive adjustment done one month after the end of quarter for those claims incurred during that quarter).
d.	Describe how the increase was developed, including why the increase is reasonable and appropriate for network providers that provide a particular service under the contract
20. In a pro	III: PROVIDER CLASS AND ASSESSMENT OF REASONABLENESS accordance with 42 C.F.R. § 438.6(c)(2)(ii)(B), identify the class or classes of viders that will participate in this payment arrangement by answering the following stions:
a.	Please indicate which general class of providers would be affected by the state directed payment (check all that apply):
	 □ inpatient hospital service □ outpatient hospital service □ professional services at an academic medical center □ primary care services □ specialty physician services □ nursing facility services □ HCBS/personal care services □ behavioral health inpatient services □ behavioral health outpatient services □ dental services □ Other:
b	Please define the provider class(es) (if further narrowed from the general classes indicated above).

c.	Provide a justification for the provider class defined in Question 20b (e.g., the
	provider class is defined in the State Plan.) If the provider class is defined in the
	State Plan, please provide a link to or attach the applicable State Plan pages to the
	preprint submission. Provider classes cannot be defined to only include providers
	that provide intergovernmental transfers.

21. In accordance with 42 C.F.R. § 438.6(c)(2)(ii)(B), describe how the payment arrangement directs expenditures equally, using the same terms of performance, for the class or classes of providers (identified above) providing the service under the contract.

- **22.** For the services where payment is affected by the state directed payment, how will the state directed payment interact with the negotiated rate(s) between the plan and the provider? Will the state directed payment:
 - **a.** Replace the negotiated rate(s) between the plan(s) and provider(s).
 - **b.** Limit but not replace the negotiated rate(s) between the plans(s) and provider(s).
 - **c.** Require a payment be made in addition to the negotiated rate(s) between the plan(s) and provider(s).
- 23. For payment arrangements that are intended to require plans to make a payment in addition to the negotiated rates (as noted in option c in Question 22), please provide an analysis in Table 2 showing the impact of the state directed payment on payment levels for each provider class. This provider payment analysis should be completed distinctly for each service type (e.g., inpatient hospital services, outpatient hospital services, etc.).

This should include an estimate of the base reimbursement rate the managed care plans pay to these providers as a percent of Medicare, or some other standardized measure, and the effect the increase from the state directed payment will have on total payment. Ex: The average base payment level from plans to providers is 80% of Medicare and this SDP is expected to increase the total payment level from 80% to 100% of Medicare.

If the state needs more space, please use Addendum 2.A and check this box:

TABLE 2: Provider Payment Analysis

TABLE 2: Provider	Payment Analys	IS			
Provider Class(es)	Average Base Payment Level from Plans to Providers (absent the SDP)	Effect on Total Payment Level of State Directed Payment (SDP)	Effect on Total Payment Level of Other SDPs	Effect on Total Payment Level of Pass- Through Payments (PTPs)	Total Payment Level (after accounting for all SDPs and PTPs
Ex: Rural Inpatient Hospital Services	80%	20%	N/A	N/A	100%
a.					
b.					
c.					
d.					
e.					
f.					
g.					

24. Ple	ase indicate if the data provided in Table 2 above is in terms of a percentage of:					
a.	☐ Medicare payment/cost					
b.	☐ State-plan approved rates as defined in 42 C.F.R. § 438.6(a) (Please note, this rate cannot include supplemental payments.)					
c.	c. Other; Please define:					
	25. Does the State also require plans to pay any other state directed payments for providers eligible for the provider class described in Question 20b? Yes No					
0 0	If yes, please provide information requested under the column "Other State Directed Payments" in Table 2.					

26.	438.6	the State also require plans to pay pass-through payments as defined in 42 C.F.R. § 5(a) to any of the providers eligible for any of the provider class(es) described in tion 20b? Yes No
		, please provide information requested under the column "Pass-Through nents" in Table 2.
27.		e describe the data sources and methodology used for the analysis provided in use to Question 23.
	paym	e describe the State's process for determining how the proposed state directed tent was appropriate and reasonable.
		V: INCORPORATION INTO MANAGED CARE CONTRACTS
29.	in the 438.6	s must adequately describe the contractual obligation for the state directed payment e state's contract with the managed care plan(s) in accordance with 42 C.F.R. § 5(c). Has the state already submitted all contract action(s) to implement this state ted payment? Yes No
	a.]	f yes:
		i. What is/are the state-assigned identifier(s) of the contract actions provided to CMS?
		ii. Please indicate where (page or section) the state directed payment is captured in the contract action(s).
		If no, please estimate when the state will be submitting the contract actions for review.

SECTION V: INCORPORATION INTO THE ACTUARIAL RATE CERTIFICATION

Note: Provide responses to the questions below for the first rating period if seeking approval for multi-year approval.

- **30.** Has/Have the actuarial rate certification(s) for the rating period for which this state directed payment applies been submitted to CMS? Yes No
 - **a.** If no, please estimate when the state will be submitting the actuarial rate certification(s) for review.
 - **b.** If yes, provide the following information in the table below for each of the actuarial rate certification review(s) that will include this state directed payment.

Table 3: Actuarial Rate Certification(s)

Control Name Provided by CMS (List each actuarial rate certification separately)	Date Submitted to CMS	Does the certification incorporate the SDP?	If so, indicate where the state directed payment is captured in the certification (page or section)
i.			
ii.			
iii.			
iv.			
v.			

Please note, states and actuaries should consult the most recent <u>Medicaid Managed Care Rate Development Guide</u> for how to document state directed payments in actuarial rate certification(s). The actuary's certification must contain all of the information outlined; if all required documentation is not included, review of the certification will likely be delayed.)

c. If not currently captured in the State's actuarial certification submitted to CMS, note that the regulations at 42 C.F.R. § 438.7(b)(6) requires that all state directed payments are documented in the State's actuarial rate certification(s). CMS will not be able to approve the related contract action(s) until the rate certification(s) has/have been amended to account for all state directed payments. Please provide an estimate of when the State plans to submit an amendment to capture this information.

31. Describe how the State will/has incorporated this state directed payment arrangement in the applicable actuarial rate certification(s) (please select one of the options below):
a. An adjustment applied in the development of the monthly base capitation rates paid to plans.
b. Separate payment term(s) which are captured in the applicable rate certification(s) but paid separately to the plans from the monthly base capitation rates paid to plans.
c. Other, please describe:
32. States should incorporate state directed payment arrangements into actuarial rate certification(s) as an adjustment applied in the development of the monthly base capitation rates paid to plans as this approach is consistent with the rate development requirements described in 42 C.F.R. § 438.5 and consistent with the nature of risk-based managed care. For state directed payments that are incorporated in another manner, particularly through separate payment terms, provide additional justification as to why this is necessary and what precludes the state from incorporating as an adjustment applied in the development of the monthly base capitation rates paid to managed care plans.
33. In accordance with 42 C.F.R. § 438.6(c)(2)(i), the State assures that all expenditures for this payment arrangement under this section are developed in accordance with 42 C.F.R. § 438.4, the standards specified in 42 C.F.R. § 438.5, and generally accepted actuarial principles and practices.
SECTION VI: FUNDING FOR THE NON-FEDERAL SHARE
34. Describe the source of the non-federal share of the payment arrangement. Check all that
apply:
aState general revenue
b. Intergovernmental transfers (IGTs) from a State or local government entity
c. Health Care-Related Provider tax(es) / assessment(s)
d. Provider donation(s)
e. Other, specify:
35. For any payment funded by IGTs (option b in Question 34),
a. Provide the following (respond to each column for all entities transferring funds). If the state needs more space, please use Addendum Table 4.A and check this box:

Table 4: IGT Transferring Entities

Name of Entities transferring funds (enter each on a separate line)	Operational nature of the Transferring Entity (State, County, City, Other)	Total Amounts Transferred by This Entity	Does the Transferring Entity have General Taxing Authority? (Yes or No)	Did the Transferring Entity receive appropriations? If not, put N/A. If yes, identify the level of appropriations	Is the Transferring Entity eligible for payment under this state directed payment? (Yes or No)
i.					
ii.					
iii.					
iv.					
v.					
vi.					
vii.					
viii.					
ix.					
х.					

- **b.** Use the checkbox to provide an assurance that no state directed payments made under this payment arrangement funded by IGTs are dependent on any agreement or arrangement for providers or related entities to donate money or services to a governmental entity.
- c. Provide information or documentation regarding any written agreements that exist between the State and healthcare providers or amongst healthcare providers and/or related entities relating to the non-federal share of the payment arrangement. This should include any written agreements that may exist with healthcare providers to support and finance the non-federal share of the payment arrangement. Submit a copy of any written agreements described above.

- **36.** For any state directed payments funded by **provider taxes/assessments (option c in Question 34)**,
 - **a.** Provide the following (respond to each column for all entries). If there are more entries than space in the table, please provide an attachment with the information requested in the table.

Table 5: Health Care-Related Provider Tax/Assessment(s)

Table 5: Healt	th Care-Relate	u i roviuer 18	ax/Assessifieff	ι(8)		
Name of the Health Care- Related Provider Tax / Assessment (enter each on a separate line)	Identify the permissible class for this tax / assessment	Is the tax / assessment broad- based?	Is the tax / assessment uniform?	Is the tax / assessment under the 6% indirect hold harmless limit?	If not under the 6% indirect hold harmless limit, does it pass the "75/75" test?	Does it contain a hold harmless arrangement that guarantees to return all or any portion of the tax payment to the tax payer?
i.						* ·
ii.						
•••						
iii.						
iv.						
v.						

b. If the state has any waiver(s) of the broad-based and/or uniform requirements for any of the health care-related provider taxes/assessments, list the waiver(s) and its current status:

Table 6: Health Care-Related Provider Tax/Assessment Waivers

Name of the Health Care-Related Provider Tax/Assessment Waiver (enter each on a separate line)	Submission Date	Current Status (Under Review, Approved)	Approval Date
i.			
ii.			
iii.			
iv.			
V.			

	or any state directed payments funded by provider donations (option d in Question 34) , please answer the following questions:
a	a. Is the donation bona-fide? Yes No
ŀ	 Does it contain a hold harmless arrangement to return all or any part of the donation to the donating entity, a related entity, or other provider furnishing the same health care items or services as the donating entity within the class? Yes No
as ar	For all state directed payment arrangements, use the checkbox to provide an ssurance that in accordance with 42 C.F.R. § 438.6(c)(2)(ii)(E), the payment trangement does not condition network provider participation on the network provider netering into or adhering to intergovernmental transfer agreements.

SECTION VII: QUALITY CRITERIA AND FRAMEWORK FOR ALL PAYMENT ARRANGEMENTS

- 39. Use the checkbox below to make the following assurance, "In accordance with 42 C.F.R. § 438.6(c)(2)(ii)(C), the State expects this payment arrangement to advance at least one of the goals and objectives in the quality strategy required per 42 C.F.R. § 438.340."
- **40.** Consistent with 42 C.F.R. § 438.340(d), States must post the final quality strategy online beginning July 1, 2018. Please provide:
 - **a.** A hyperlink to State's most recent quality strategy:
 - **b.** The effective date of quality strategy.
- **41.** If the State is currently updating the quality strategy, please submit a draft version, and provide:
 - **a.** A target date for submission of the revised quality strategy (month and year):
 - **b.** Note any potential changes that might be made to the goals and objectives.

Note: The State should submit the final version to CMS as soon as it is finalized. To be in compliance with 42 C.F.R. \S 438.340(c)(2) the quality strategy must be updated no less than once every 3-years.

42. To obtain written approval of this payment arrangement, a State must demonstrate that each state directed payment arrangement expects to advance at least one of the goals and objectives in the quality strategy. In the Table 7 below, identify the goal(s) and objective(s), as they appear in the Quality Strategy (include page numbers), this payment arrangement is expected to advance. If additional rows are required, please attach.

Table 7: Payment Arrangement Quality Strategy Goals and Objectives

Goal(s)	Objective(s)	Quality strategy page		
Example: Improve care coordination for enrollees with behavioral health conditions	Example: Increase the number of managed care patients receiving follow-up behavior health counseling by 15%	5		
ā.				
b.				
2				
·•				
ı.				

43. Describe how this payment arrangement is expected to advance the goal(s) and objective(s) identified in Table 7. If this is part of a multi-year effort, describe this both in terms of this year's payment arrangement and in terms of that of the multi-year payment arrangement.

- **44.** Please complete the following questions regarding having an evaluation plan to measure the degree to which the payment arrangement advances at least one of the goals and objectives of the State's quality strategy. To the extent practicable, CMS encourages States to utilize existing, validated, and outcomes-based performance measures to evaluate the payment arrangement, and recommends States use the CMS Adult and Child Core Set Measures, when applicable.
 - a. In accordance with 42 C.F.R. § 438.6(c)(2)(ii)(D), use the checkbox to assure the State has an evaluation plan which measures the degree to which the payment arrangement advances at least one of the goals and objectives in the quality strategy required per 42 C.F.R. § 438.340, and that the evaluation conducted will be *specific* to this payment arrangement. *Note:* States have flexibility in how the evaluation is conducted and may leverage existing resources, such as their 1115 demonstration evaluation if this payment arrangement is tied to an 1115 demonstration or their External Quality Review validation activities, as long as those evaluation or validation activities are *specific* to this payment arrangement and its impacts on health care quality and outcomes.

b. Describe how and when the State will review progress on the advancement of the State's goal(s) and objective(s) in the quality strategy identified in Question 42. For each measure the State intends to use in the evaluation of this payment arrangement, provide in Table 8 below: 1) the baseline year, 2) the baseline statistics, and 3) the performance targets the State will use to track the impact of this payment arrangement on the State's goals and objectives. Please attach the State's evaluation plan for this payment arrangement.

TABLE 8: Evaluation Measures, Baseline and Performance Targets

			u Periormance Targets			
Measure Name and NQF # (if applicable)	Baseline Year	Baseline Statistic	Performance Target	Notes ¹		
Example: Flu Vaccinations for Adults Ages 19 to 64 (FVA-AD); NQF # 0039	CY 2019	34%	Increase the percentage of adults 18–64 years of age who report receiving an influenza vaccination by 1 percentage point per year	Example notes		
i.						
ii.						
iii.						
;.,						
iv.						

^{1.} If the State will deviate from the measure specification, please describe here. If a State-specific measure will be used, please define the numerator and denominator here. Additionally, describe any planned data or measure stratifications (for example, age, race, or ethnicity) that will be used to evaluate the payment arrangement.

c. If this is any year other than year 1 of a multi-year effort, describe (or attach) prior year(s) evaluation findings and the payment arrangement's impact on the goal(s) and objective(s) in the State's quality strategy. Evaluation findings must include 1) historical data; 2) prior year(s) results data; 3) a description of the evaluation methodology; and 4) baseline and performance target information from the prior year(s) preprint(s) where applicable. If full evaluation findings from prior year(s) are not available, provide partial year(s) findings and an anticipated date for when CMS may expect to receive the full evaluation findings.

Section 438.6(c) Preprint Addendum Tables

Overview

This addendum to the Section 438.6(c) preprint file allows States to add rows to the eight tables in the preprint: Please use this workbook if States need additional rows than what is provided in the preprint. States may also use the Workbook Tables 1.A. - 8.A. in lieu of completing Tables 1 - 8 in the preprint.

Directions

States should only submit the tables they populate to CMS; please do not submit the entire workbook unless the State inputs data into all addendum Tables 1.A - 8.A. For example, if the State only needs extra rows to complete Table 1.A, please delete Tabs 2.A - 8.A

CMS requests States submit the addendum tables with the preprint in this Excel format; please do not merge and re-PDF the preprint.

Addendum Table Organization

The addendum tables are organized by tab. Within the tables, States will find data elements with specific drop-downs that CMS has pre-selected to standardize data provided by States in the preprint.

Table 1.A	Payment Arrangement Provider Performance Measures
Table 2.A	Provider Payment Analyses
Table 3.A	Actuarial Rate Certification(s)
Table 4.A	IGT Transferring Entities
Table 5.A	Health Care-Related Provider Tax/Assessment(s)
Table 6.A	Health Care-Related Provider Tax/Assessment Waivers
Table 7.A	Payment Arrangement Quality Strategy Goals and Objectives
Table 8.A	Evaluation Measures, Baseline and Performance Targets

Identifying Information Column1

State/Territory (Select from dropdown menu): Texas

PREPRINT SUBSECTION IIA: VALUE-BASED PAYMENT/DELIVERY SYSTEM REFORM ADDENDUM TABLE 1.A. PAYMENT ARRANGEMENT PROVIDER PERFORMANCE MEASURES 1. In Table 1.A below, use the rows to add more measure(s) to Table 1 that the State will tie to provider performance under this value-based payment or delivery system reform arrangement (provider performance measures). States may also use Table 1.A in lieu of Directions completing Table 1 in the preprint. Input data only in beige cells in columns B - H. States should only submit the tables they populate to CMS; please do not submit the entire workbook unless the State inputs data into Tables 1.A - 8.A. For example, if the State only needs extra rows to complete Table 1 in the preprint, please delete Tabs 2.A - 8.A. CMS requests States submit the addendum tables with the preprint in this Excel format; please do not merge and re-PDF the preprint. TABLE 1.A: Payment Arrangement Provider Performance Measures Measure Name and NQF # (if applicable) Performance Target **Baseline Year** Year (CY or FY Data Format Free text Set values (select one) YYYY) Percent (#.##%) Free text Percent (#.##%) Free text this is planned to be a multi-Baseline vear must Baseline percentage vear payment arrangement. be added after the must be added after ndicate which year(s) of the If the State is using an established measure and will deviate from the measure first year of the the first year of the payment arrangement that steward's measure specifications, please describe here. Additionally, if a statepayment payment erformance on the measure specific measure will be used, please define the numerator and denominator angemer arrangemen vill trigger payment Percent of High-Risk Residents with Pressure Centers for Medicare & Medicaio Example: Ulcers - Long Stav Services CY 2018 0.0923 Year 2 8.00% . Component 3 C3-130 - 1629089966 -The Joint Commission (TJC) CY 2023 CY 2024 0.236 benchmark or IOS 5% ADVENTHEALTH CENTRAL TEXAS PC-02 Cesarean Birth 0.3295 Urban hospital measure Component 3 C3-130 - 1093708679 -PC-02 Cesarean Birth CY 2023 CY 2024 ASCENSION PROVIDENCE The Joint Commission (TJC) 0.2561 0.236 benchmark or IOS 5% Urban hospital measure Component 3 C3-130 - 1619115383 -ASCENSION SETON HAYS PC-02 Cesarean Birth The Joint Commission (TJC) CY 2023 0.2086 CY 2024 0.236 benchmark or IOS 5% Urban hospital measure . Component 3 C3-130 - 1164526786 ASCENSION SETON MEDICAL CENTER CY 2023 CY 2024 0.236 benchmark or IOS 5% AUSTIN PC-02 Cesarean Birth The Joint Commission (TJC) 0.2659 Urban hospital measure a. Component 3 C3-130 - 1124137054 -ASCENSION SETON NORTHWEST PC-02 Cesarean Birth The Joint Commission (TJC) CY 2023 0.2787 CY 2024 0.236 benchmark or IOS 5% Urban hospital measure a Component 3 C3-130 - 1578780870 -The Joint Commission (TJC) CY 2023 CY 2024 0.236 benchmark or IOS 5% ASCENSION SETON WILLIAMSON PC-02 Cesarean Birth 0.3387 Urban hospital measure a. Component 3 C3-130 - 1417465824 -ATHENS HOSPITAL, LLC PC-02 Cesarean Birth The Joint Commission (TJC) CY 2023 0.2365 CY 2024 0.236 benchmark or IOS 5% Urban hospital measure Component 3 C3-130 - 1093744187 -BAPTIST HOSPITALS OF SOUTHEAST TEXAS PC-02 Cesarean Birth The Joint Commission (TJC) CY 2023 0.3000 CY 2024 0.236 benchmark or IOS 5% Urban hospital measure Component 3 C3-130 - 1598744856 -CY 2023 CY 2024 BAPTIST MEDICAL CENTER PC-02 Cesarean Birth The Joint Commission (TJC) 0.3020 0.236 benchmark or IOS 5% Urban hospital measure Component 3 C3-130 - 1669472387 BAYLOR SCOTT & WHITE ALL SAINTS MEDICAL CENTER - FORT WORTH PC-02 Cesarean Birth The Joint Commission (TJC) CY 2023 0.2200 CY 2024 0.236 benchmark or IOS 5% Urban hospital measure . Component 3 C3-130 - 1801826830 BAYLOR SCOTT & WHITE MEDICAL CENTER - CENTENNIAL PC-02 Cesarean Birth The Joint Commission (TJC) CY 2023 0.0000 CY 2024 0.236 benchmark or IOS 5% Urban hospital measure a Component 3 C3-130 - 1265772362 -BAYLOR SCOTT & WHITE MEDICAL CENTER - COLLEGE STATION PC-02 Cesarean Birth The Joint Commission (TJC) CY 2023 0.2000 CY 2024 0.236 benchmark or IOS 5% Urban hospital measure . Component 3 C3-130 - 1073511762 -BAYLOR SCOTT & WHITE MEDICAL PC-02 Cesarean Birth CENTER - GRAPEVINE The Joint Commission (TJC) CY 2023 0.0000 CY 2024 0.236 benchmark or IOS 5% Urban hospital measure . Component 3 C3-130 - 1992700983 BAYLOR SCOTT & WHITE MEDICAL CENTER - IRVING PC-02 Cesarean Birth The Joint Commission (TJC) CY 2023 0.2500 CY 2024 0.236 benchmark or IOS 5% Urban hospital measure a. Component 3 C3-130 - 1124305065 BAYLOR SCOTT & WHITE MEDICAL CENTER - MCKINNEY PC-02 Cesarean Birth The Joint Commission (TJC) CY 2023 0.3750 CY 2024 0.236 benchmark or IOS 5% Urban hospital measure a. Component 3 C3-130 - 1265568638 -CY 2023 0.3333 CY 2024 CENTER - ROUND ROCK PC-02 Cesarean Birth The Joint Commission (TJC) 0.236 benchmark or IOS 5% Urban hospital measure a. Component 3 C3-130 - 1477516466 -BAYLOR SCOTT & WHITE MEDICAL CENTER - TEMPLE The Joint Commission (TJC) CY 2023 0.2000 CY 2024 0.236 benchmark or IOS 5% PC-02 Cesarean Birth Urban hospital measure Component 3 C3-130 - 1265430177 -BAYLOR SCOTT & WHITE MEDICAL CENTER - WAXAHACHIE PC-02 Cesarean Birth The Joint Commission (TJC) CY 2023 0.3125 CY 2024 0.236 benchmark or IOS 5% Urban hospital measure a Component 3 C3-130 - 1891882833 -BAYLOR SCOTT & WHITE MEDICAL CENTER HILLCREST PC-02 Cesarean Birth The Joint Commission (TJC) CY 2023 0.1613 CY 2024 0.236 benchmark or IOS 5% Urban hospital measure a. Component 3 C3-130 - 1205018439 -BAYLOR SCOTT & WHITE MEDICAL CENTER LAKE POINTE PC-02 Cesarean Birth The Joint Commission (TJC) CY 2023 0.1250 CY 2024 0.236 benchmark or IOS 5% Urban hospital measure Component 3 C3-130 - 1447250253 BAYLOR UNIVERSITY MEDICAL CENTER PC-02 Cesarean Birth The Joint Commission (TJC) CY 2023 0.1529 CY 2024 0.236 benchmark or IOS 5% Urban hospital measure . Component 3 C3-130 - 1114903523 -PC-02 Cesarean Birth CY 2023 BRIM HEALTHCARE OF TEXAS LLC The Joint Commission (TJC) 0.3878 CY 2024 0.236 benchmark or IOS 5% Urban hospital measure a. Component 3 C3-130 - 1407191984 -PC-02 Cesarean Birth The Joint Commission (TJC) CY 2023 0.0833 CY 2024 0.236 benchmark or IOS 5% BSA HOSPITAL LLC Urban hospital measure a. Component 3 C3-130 - 1376662296 -CEDAR PARK REGIONAL MEDICAL

CENTER

PC-02 Cesarean Birth

The Joint Commission (TJC)

CY 2023

0.2500

CY 2024

0.236 benchmark or IOS 5%

Urban hospital measure

				I			
a. Component 3 C3-130 - 1124092036 - CHRISTUS GOOD SHEPHERD MEDICAL CENTER	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.2857	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure
a. Component 3 C3-130 - 1194787218 - CHRISTUS SANTA ROSA HOSPITAL	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.2884	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure
a. Component 3 C3-130 - 1447883301 - CHRISTUS SANTA ROSA HOSPITAL -							
SAN MARCOS a. Component 3 C3-130 - 1679557888 -	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.1474	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure
CHRISTUS SOUTHEAST TEXAS - ST. ELIZABETH	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.3209	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure
a. Component 3 C3-130 - 1689641680 - CHRISTUS SPOHN HOSPITAL CORPUS CHRISTI	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.2559	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure
a. Component 3 C3-130 - 1295736734 - CHRISTUS ST. MICHAEL HEALTH SYSTEM	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.3371	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure
a. Component 3 C3-130 - 1124052162 - CITIZENS MEDICAL CENTER	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.3636	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure
a. Component 3 C3-130 - 1508810573 - CORPUS CHRISTI MEDICAL CENTER	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.1820	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure
a. Component 3 C3-130 - 1851343909 - DETAR HEALTHCARE SYSTEM	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.3077	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure
a. Component 3 C3-130 - 1053317362 - DOCTORS HOSPITAL AT RENAISSANCE, LTD	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.2069	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure
a. Component 3 C3-130 - 1396731105 - DOCTORS HOSPITAL OF LAREDO	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.2364	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure
a. Component 3 C3-130 - 1720088123 - GUADALUPE REGIONAL MEDICAL							
CENTER a. Component 3 C3-130 - 1881688976 -	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.1889	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure
HARLINGEN MEDICAL CENTER	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.2569	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure
a. Component 3 C3-130 - 1205900370 - HARRIS COUNTY HOSPITAL DISTRICT	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.2090	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure
a. Component 3 C3-130 - 1063466035 - HCA HOUSTON HEALTHCARE CLEAR LAKE	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.2493	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure
a. Component 3 C3-130 - 1962455816 - HCA HOUSTON HEALTHCARE CONROE	DO 00 0	The detail Occupied of TIO	01/ 0000	0.4004	07,0004	0.000 1 1 100 5%	111
a. Component 3 C3-130 - 1811942238 - HCA HOUSTON HEALTHCARE NORTH	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.1324	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure
CYPRESS a. Component 3 C3-130 - 1740450121 -	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.2261	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure
HCA HOUSTON HEALTHCARE NORTHWEST	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.1635	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure
a. Component 3 C3-130 - 1174576698 - HCA HOUSTON HEALTHCARE SOUTHEAST	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.2080	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure
a. Component 3 C3-130 - 1750819025 - HCA HOUSTON HEALTHCARE TOMBALL	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.2152	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure
a. Component 3 C3-130 - 1275580938 - HCA HOUSTON HEALTHCARE WEST	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.3642	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure
a. Component 3 C3-130 - 1528064649 - HENDRICK MEDICAL CENTER	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.2069	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure
a. Component 3 C3-130 - 1841562709 - HH KILLEEN HEALTH SYSTEM LLC	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.3143	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure
a. Component 3 C3-130 - 1891789772 - HOUSTON METHODIST BAYTOWN HOSPITAL	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.1833	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure
a. Component 3 C3-130 - 1952723967 - HOUSTON METHODIST CLEAR LAKE HOSPITAL	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.1212	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure
a. Component 3 C3-130 - 1548387418 - HOUSTON METHODIST HOSPITAL							·
a. Component 3 C3-130 - 1497871628 - HOUSTON METHODIST SUGAR LAND	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.3966	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure
HOSPITAL a. Component 3 C3-130 - 1184179194 -	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.1724	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure
HOUSTON METHODIST THE WOODLANDS HOSPITAL	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.2857	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure
a. Component 3 C3-130 - 1083937593 - HOUSTON METHODIST WEST HOSPITAL	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.1853	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure
a. Component 3 C3-130 - 1871619254 - HOUSTON METHODIST WILLOWBROOK HOSPITAL	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.2669	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure
a. Component 3 C3-130 - 1598750721 - HUNT REGIONAL HEALTHCARE	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.1957	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure
a. Component 3 C3-130 - 1245878990 - HUNTSVILLE MEMORIAL HOSPITAL	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.2308	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure
a. Component 3 C3-130 - 1992753222 - JPS HEALTH NETWORK	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.2860	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure
a. Component 3 C3-130 - 1861488579 - KNAPP MEDICAL CENTER	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.2565	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure
MINATE WILDICAL CENTER	1-0-02 Cesalean Dilli	THE JUIL CUITINISSION (TJC)	U1 2023	0.2000	C1 2024	0.230 Delicilitate of IOS 5%	Orban nospital measure

a. Component 3 C3-130 - 1548232044 -							
LAREDO MEDICAL CENTER a. Component 3 C3-130 - 1770536120 -	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.4412	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure
LAS PALMAS MEDICAL CENTER a. Component 3 C3-130 - 1528026267 -	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.2154	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure
LONGVIEW REGIONAL MEDICAL CENTER	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.1277	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure
a. Component 3 C3-130 - 1740273994 - MEDICAL CENTER HOSPITAL	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.3077	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure
a. Component 3 C3-130 - 1871911016 - MEDICAL CITY ALLIANCE	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.1771	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure
a. Component 3 C3-130 - 1134172406 - MEDICAL CITY ARLINGTON	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.2133	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure
a. Component 3 C3-130 - 1689628984 - MEDICAL CITY DALLAS	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.2486	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure
a. Component 3 C3-130 - 1902857766 - MEDICAL CITY LAS COLINAS	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.2500	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure
a. Component 3 C3-130 - 1255384533 - MEDICAL CITY LEWISVILLE	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.1970	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure
a. Component 3 C3-130 - 1437102639 - MEDICAL CITY MCKINNEY		The Joint Commission (TJC)	CY 2023			0.236 benchmark or IOS 5%	
a. Component 3 C3-130 - 1699726406 -	PC-02 Cesarean Birth	, ,		0.2098	CY 2024		Urban hospital measure
MEDICAL CITY PLANO a. Component 3 C3-130 - 1417471467 -	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.1626	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure
MEDICAL CITY WEATHERFORD	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.3208	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure
a. Component 3 C3-130 - 1730132234 - MEMORIAL HERMANN HEALTH SYSTEM	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.2565	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure
a. Component 3 C3-130 - 1982666111 - MEMORIAL HERMANN HOSPITAL	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.2742	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure
a. Component 3 C3-130 - 1932152337 -							
MEMORIAL HERMANN KATY HOSPITAL a. Component 3 C3-130 - 1740233782 -	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.2667	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure
MEMORIAL HERMANN MEMORIAL CITY HOSPITAL	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.2357	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure
a. Component 3 C3-130 - 1295843787 - MEMORIAL HERMANN NORTHEAST	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.2188	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure
a. Component 3 C3-130 - 1295788735 - MEMORIAL HERMANN SUGAR LAND	1 0-02 Ocsarcan Birth	THE BOILT COMMISSION (100)	01 2020	0.2100	01 2024	0.200 bendimark of 100 076	orban nospital measure
HOSPITAL	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.2678	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure
a. Component 3 C3-130 - 1275592131 - METHODIST CHARLTON MEDICAL CENTER	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.2353	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure
a. Component 3 C3-130 - 1528027786 - METHODIST DALLAS MEDICAL CENTER	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.2211	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure
a. Component 3 C3-130 - 1124074273 - METHODIST HOSPITAL	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.2713	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure
a. Component 3 C3-130 - 1659525236 - METHODIST HOSPITAL STONE OAK	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.1103	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure
a. Component 3 C3-130 - 1689629941 - METHODIST MANSFIELD MEDICAL CENTER	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.1765	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure
a. Component 3 C3-130 - 1487271375 - METHODIST MIDLOTHIAN MEDICAL	1 0 02 occardan biran	The senit commission (100)	01 2020	0.1700	012021	0.200 bondimark of 100 070	Orban nospital modelio
CENTER	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.2500	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure
a. Component 3 C3-130 - 1033165501 - METHODIST RICHARDSON MEDICAL CENTER	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.2174	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure
a. Component 3 C3-130 - 1255325817 -		` '					·
MIDLAND MEMORIAL HOSPITAL	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.2346	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure
a. Component 3 C3-130 - 1205833985 - MISSION REGIONAL MEDICAL CENTER	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.3800	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure
a. Component 3 C3-130 - 1679578439 - MOTHER FRANCES HOSPITAL	D0 00 0	The board of the state of the s	0.7.5	0.4010	04	0.0001	
REGIONAL HEALTH CARE CENTER a. Component 3 C3-130 - 1629021845 -	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.1816	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure
NORTH AUSTIN MEDICAL CENTER a. Component 3 C3-130 - 1467442418 -	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.1985	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure
NORTHWEST TEXAS HEALTHCARE SYSTEM	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.2532	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure
a. Component 3 C3-130 - 1700883196 - OAKBEND MEDICAL CENTER	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.2174	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure
a. Component 3 C3-130 - 1801852736 - ODESSA REGIONAL HOSPITAL LP	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.3154	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure
a. Component 3 C3-130 - 1932123247 - PARKLAND HEALTH	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.0469	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure
a. Component 3 C3-130 - 1790174860 - PRIME HEALTHCARE SERVICES MESQUITE LLC	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.5806	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure Urban hospital measure
a. Component 3 C3-130 - 1427472463 - RESOLUTE HEALTH HOSPITAL							·
a. Component 3 C3-130 - 1619924719 -	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.2647	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure
RIO GRANDE REGIONAL HOSPITAL a. Component 3 C3-130 - 1649223645 -	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.2552	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure
ROUND ROCK MEDICAL CENTER	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.2212	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure

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a. Component 3 C3-130 - 1992707228 - SHANNON MEDICAL CENTER	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.3972	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure
a. Component 3 C3-130 - 1770573586 - SOUTH TEXAS HEALTH SYSTEM	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.2667	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure
a. Component 3 C3-130 - 1720033947 - ST. DAVID'S GEORGETOWN HOSPITAL	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.1713	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure
a. Component 3 C3-130 - 1679528889 - ST. DAVID'S SOUTH AUSTIN MEDICAL CENTER	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.1971	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure
a. Component 3 C3-130 - 1154361475 - ST. JOSEPH MEDICAL CENTER	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.3312	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure
a. Component 3 C3-130 - 1174533343 - TEXAS HEALTH ARLINGTON MEMORIAL HOSPITAL	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.2500	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure
a. Component 3 C3-130 - 1215296884 - TEXAS HEALTH HARRIS METHODIST HOSPITAL ALLIANCE	PC-02 Cesarean Birth			0.3846			
a. Component 3 C3-130 - 1396778064 - TEXAS HEALTH HARRIS METHODIST		The Joint Commission (TJC)	CY 2023		CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure
A. Component 3 C3-130 - 1336172105 - TEXAS HEALTH HARRIS METHODIST	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.2000	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure
HOSPITAL FORT WORTH a. Component 3 C3-130 - 1104845015 -	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.2647	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure
TEXAS HEALTH HARRIS METHODIST HOSPITAL HURST-EULESS-BEDFORD	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.2500	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure
a. Component 3 C3-130 - 1417980202 - TEXAS HEALTH HARRIS METHODIST HOSPITAL SOUTHWEST FORT WORTH	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.2276	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure
a. Component 3 C3-130 - 1356960132 - TEXAS HEALTH HOSPITAL MANSFIELD	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.1765	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure
a. Component 3 C3-130 - 1033120423 - TEXAS HEALTH HUGULEY HOSPITAL FORT WORTH SOUTH	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.1908	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure
a. Component 3 C3-130 - 1548291883 - TEXAS HEALTH PRESBYTERIAN HOSPITAL ALLEN	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.2353	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure
a. Component 3 C3-130 - 1396779948 - TEXAS HEALTH PRESBYTERIAN HOSPITAL DALLAS	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.3176	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure
a. Component 3 C3-130 - 1003883158 - TEXAS HEALTH PRESBYTERIAN HOSPITAL DENTON	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.1833	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure
a. Component 3 C3-130 - 1902047376 - TEXAS HEALTH PRESBYTERIAN							
ACOMPONENT ALL PRESENTERIAN	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.3158	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure
a. Component 3 C3-130 - 1851390967 - TEXOMA MEDICAL CENTER	PC-02 Cesarean Birth PC-02 Cesarean Birth	The Joint Commission (TJC) The Joint Commission (TJC)	CY 2023 CY 2023	0.3429	CY 2024 CY 2024	0.236 benchmark or IOS 5% 0.236 benchmark or IOS 5%	Urban hospital measure Urban hospital measure
a. Component 3 C3-130 - 1972709970 - THE HOSPITALS OF PROVIDENCE EAST		, ,					
CAMPUS a. Component 3 C3-130 - 1700801909 -	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.2602	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure
THE HOSPITALS OF PROVIDENCE MEMORIAL CAMPUS a. Component 3 C3-130 - 1538522412 -	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.4184	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure
THE HÖSPITALS OF PROVIDENCE TRANSMOUNTAIN CAMPUS	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.3415	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure
a. Component 3 C3-130 - 1861467573 - THE MEDICAL CENTER OF SOUTHEAST TEXAS LP	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.1339	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure
a. Component 3 C3-130 - 1407364847 - TYLER REGIONAL HOSPITAL LLC	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.2000	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure
a. Component 3 C3-130 - 1023013448 - UNITED REGIONAL HEATH CARE SYSTEM	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.1456	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure
a. Component 3 C3-130 - 1821011248 - UNIVERSITY HEALTH SYSTEM	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.1955	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure
a. Component 3 C3-130 - 1821087164 - UNIVERSITY MEDICAL CENTER	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.1184	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure
a. Component 3 C3-130 - 1316936990 - UNIVERSITY MEDICAL CENTER OF EL PASO	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.0314	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure
a. Component 3 C3-130 - 1154618742 - VALLEY BAPTIST MEDICAL CENTER	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.3118	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure
a. Component 3 C3-130 - 1184911877 - VALLEY BAPTIST MEDICAL CENTER - BROWNSVILLE	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.1857	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure
a. Component 3 C3-130 - 1043267701 - VALLEY REGIONAL MEDICAL CENTER	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.2717	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure
a. Component 3 C3-130 - 1083112023 - WHITE ROCK MEDICAL CENTER		, ,					·
WHITE ROCK MEDICAL CENTER	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.1333	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure

a. Component 3 C3-130 - 1023065794 - WOMAN'S HOSPITAL OF TEXAS	PC-02 Cesarean Birth	The Joint Commission (TJC)	CY 2023	0.2637	CY 2024	0.236 benchmark or IOS 5%	Urban hospital measure
b. Component 3 C3-132 - 1942795133 - ASCENSION SETON BASTROP	Catheter-Associated Urinary Tract Infection (CAUTI)	Centers for Disease Control and Prevention	CY 2023	0.0000	CY 2024	0.8 or below 1 and better than baseline or IOS 5%	Urban hospital measure
b. Component 3 C3-132 - 1154612638 - ASCENSION SETON SMITHVILLE	Catheter-Associated Urinary Tract Infection (CAUTI)	Centers for Disease Control and Prevention	CY 2023	0.0000	CY 2024	0.8 or below 1 and better than baseline or IOS 5%	Urban hospital measure
b. Component 3 C3-132 - 1750499273 - ASCENSION SETON SOUTHWEST	Catheter-Associated Urinary Tract Infection (CAUTI)	Centers for Disease Control and Prevention	CY 2023	0.0000	CY 2024	0.8 or below 1 and better than baseline or IOS 5%	Urban hospital measure
b. Component 3 C3-132 - 1669752234 - BAPTIST NEIGHBORHOOD HOSPITAL	Catheter-Associated Urinary Tract Infection (CAUTI)	Centers for Disease Control and Prevention	CY 2023	0.0000	CY 2024	0.8 or below 1 and better than baseline or IOS 5%	Urban hospital measure
b. Component 3 C3-132 - 1407010622 - BAYLOR SCOTT & WHITE EMERGENCY HOSPITAL AUBREY	Catheter-Associated Urinary Tract Infection (CAUTI)	Centers for Disease Control and Prevention	CY 2023	0.0000	CY 2024	0.8 or below 1 and better than baseline or IOS 5%	Urban hospital measure
b. Component 3 C3-132 - 1679903967 - BAYLOR SCOTT & WHITE EMERGENCY HOSPITAL BURLESON	Catheter-Associated Urinary Tract Infection (CAUTI)	Centers for Disease Control and Prevention	CY 2023	0.0000	CY 2024	0.8 or below 1 and better than baseline or IOS 5%	Urban hospital measure
b. Component 3 C3-132 - 1649273434 - BAYLOR SCOTT & WHITE MEDICAL CENTER - PLANO	Catheter-Associated Urinary Tract Infection (CAUTI)	Centers for Disease Control and Prevention	CY 2023	0.8956	CY 2024	0.8 or below 1 and better than baseline or IOS 5%	Urban hospital measure
b. Component 3 C3-132 - 1972581940 - BRAZOSPORT MEMORIAL HOSPITAL & BRAZOSPORT REGIONAL HEALTH SYSTEM	Catheter-Associated Urinary Tract Infection (CAUTI)	Centers for Disease Control and Prevention	CY 2023	0.0000	CY 2024	0.8 or below 1 and better than baseline or IOS 5%	Urban hospital measure
b. Component 3 C3-132 - 1184622847 - CHI ST. LUKE'S HEALTH BAYLOR COLLEGE OF MEDICINE MEDICAL CENTER	Catheter-Associated Urinary Tract Infection (CAUTI)	Centers for Disease Control and Prevention	CY 2023	0.4992	CY 2024	0.8 or below 1 and better than baseline or IOS 5%	Urban hospital measure
b. Component 3 C3-132 - 1972517365 - COVENANT MEDICAL CENTER	Catheter-Associated Urinary Tract Infection (CAUTI)	Centers for Disease Control and Prevention	CY 2023	0.5393	CY 2024	0.8 or below 1 and better than baseline or IOS 5%	Urban hospital measure
b. Component 3 C3-132 - 1861690364 - DALLAS MEDICAL CENTER LLC	Catheter-Associated Urinary Tract Infection (CAUTI)	Centers for Disease Control and Prevention	CY 2023	3.3113	CY 2024	0.8 or below 1 and better than baseline or IOS 5%	Urban hospital measure
b. Component 3 C3-132 - 1093810327 - DELL SETON MEDICAL CENTER AT THE UNIVERSITY OF TEXAS	Catheter-Associated Urinary Tract Infection (CAUTI)	Centers for Disease Control and Prevention	CY 2023	0.3648	CY 2024	0.8 or below 1 and better than baseline or IOS 5%	Urban hospital measure
b. Component 3 C3-132 - 1659539567 - ENCOMPASS HEALTH REHABILITATION HOSPITAL OF ABILENE	Catheter-Associated Urinary Tract Infection (CAUTI)	Centers for Disease Control and Prevention	CY 2023	0.0000	CY 2024	0.8 or below 1 and better than baseline or IOS 5%	Urban hospital measure
b. Component 3 C3-132 - 1821061532 - ENCOMPASS HEALTH REHABILITATION HOSPITAL OF MIDLAND ODESSA	Catheter-Associated Urinary Tract Infection (CAUTI)	Centers for Disease Control and Prevention	CY 2023	0.4092	CY 2024	0.8 or below 1 and better than baseline or IOS 5%	Urban hospital measure
b. Component 3 C3-132 - 1073043592 - HCA HOUSTON HEALTHCARE MEDICAL CENTER	Catheter-Associated Urinary Tract Infection (CAUTI)	Centers for Disease Control and Prevention	CY 2023	0.4000	CY 2024	0.8 or below 1 and better than baseline or IOS 5%	Urban hospital measure
b. Component 3 C3-132 - 1609275585 - HCA HOUSTON HEALTHCARE PEARLAND	Catheter-Associated Urinary Tract Infection (CAUTI)	Centers for Disease Control and Prevention	CY 2023	0.8789	CY 2024	0.8 or below 1 and better than baseline or IOS 5%	Urban hospital measure
b. Component 3 C3-132 - 1306897277 - MEDICAL CITY DENTON	Catheter-Associated Urinary Tract Infection (CAUTI)	Centers for Disease Control and Prevention	CY 2023	0.1104	CY 2024	0.8 or below 1 and better than baseline or IOS 5%	Urban hospital measure
b. Component 3 C3-132 - 1659323772 - MEDICAL CITY FORT WORTH	Catheter-Associated Urinary Tract Infection (CAUTI)	Centers for Disease Control and Prevention	CY 2023	0.2270	CY 2024	0.8 or below 1 and better than baseline or IOS 5%	Urban hospital measure
b. Component 3 C3-132 - 1518911833 - MEDICAL CITY NORTH HILLS	Catheter-Associated Urinary Tract Infection (CAUTI)	Centers for Disease Control and Prevention	CY 2023	0.0000	CY 2024	0.8 or below 1 and better than baseline or IOS 5%	Urban hospital measure
b. Component 3 C3-132 - 1912948845 - PHYSICIANS SURGICAL HOSPITALS, LLC	Catheter-Associated Urinary Tract Infection (CAUTI)	Centers for Disease Control and Prevention	CY 2023	2.1413	CY 2024	0.8 or below 1 and better than baseline or IOS 5%	Urban hospital measure
b. Component 3 C3-132 - 1174021695 - REHABILITATION HOSPITAL, LLC	Catheter-Associated Urinary Tract Infection (CAUTI)	Centers for Disease Control and Prevention	CY 2023	0.9081	CY 2024	0.8 or below 1 and better than baseline or IOS 5%	Urban hospital measure
b. Component 3 C3-132 - 1184262800 - SANA HEALTHCARE CARROLLTON	Catheter-Associated Urinary Tract Infection (CAUTI)	Centers for Disease Control and Prevention	CY 2023	0.0000	CY 2024	0.8 or below 1 and better than baseline or IOS 5%	Urban hospital measure
b. Component 3 C3-132 - 1942294939 - ST JOSEPH REGIONAL HEALTH CENTER	Catheter-Associated Urinary Tract Infection (CAUTI)	Centers for Disease Control and Prevention	CY 2023	0.2207	CY 2024	0.8 or below 1 and better than baseline or IOS 5%	Urban hospital measure
b. Component 3 C3-132 - 1184868879 - ST LUKE'S LAKESIDE HOSPITAL	Catheter-Associated Urinary Tract Infection (CAUTI)	Centers for Disease Control and Prevention	CY 2023	0.0000	CY 2024	0.8 or below 1 and better than baseline or IOS 5%	Urban hospital measure
b. Component 3 C3-132 - 1659559573 - ST LUKES SUGAR LAND HOSPITAL	Catheter-Associated Urinary Tract Infection (CAUTI)	Centers for Disease Control and Prevention	CY 2023	0.0000	CY 2024	0.8 or below 1 and better than baseline or IOS 5%	Urban hospital measure
b. Component 3 C3-132 - 1710314141 - ST. LUKES HOSPITAL AT THE VINTAGE	Catheter-Associated Urinary Tract Infection (CAUTI)	Centers for Disease Control and Prevention	CY 2023	0.0000	CY 2024	0.8 or below 1 and better than baseline or IOS 5%	Urban hospital measure
b. Component 3 C3-132 - 1942208616 - ST. LUKE'S THE WOODLANDS HOSPITAL	Catheter-Associated Urinary Tract Infection (CAUTI)	Centers for Disease Control and Prevention	CY 2023	0.3978	CY 2024	0.8 or below 1 and better than baseline or IOS 5%	Urban hospital measure
b. Component 3 C3-132 - 1316933609 - TEXAS HEALTH CENTER FOR DIAGNOSTICS AND SURGERY PLANO	Catheter-Associated Urinary Tract Infection (CAUTI)	Centers for Disease Control and Prevention	CY 2023	0.0000	CY 2024	0.8 or below 1 and better than baseline or IOS 5%	Urban hospital measure
b. Component 3 C3-132 - 1629064928 - TEXAS HEALTH HARRIS METHODIST HOSPITAL SOUTHLAKE	Catheter-Associated Urinary Tract Infection (CAUTI)	Centers for Disease Control and Prevention	CY 2023	0.0000	CY 2024	0.8 or below 1 and better than baseline or IOS 5%	Urban hospital measure
b. Component 3 C3-132 - 1407169196 - TEXAS HEALTH HEART & VASCULAR HOSPITAL ARLINGTON	Catheter-Associated Urinary Tract Infection (CAUTI)	Centers for Disease Control and Prevention	CY 2023	4.7619	CY 2024	0.8 or below 1 and better than baseline or IOS 5%	Urban hospital measure
b. Component 3 C3-132 - 1104381292 - TEXAS HEALTH HOSPITAL FRISCO	Catheter-Associated Urinary Tract Infection (CAUTI)	Centers for Disease Control and Prevention	CY 2023	0.8333	CY 2024	0.8 or below 1 and better than baseline or IOS 5%	Urban hospital measure
b. Component 3 C3-132 - 1457382798 - TEXAS HEALTH PRESBYTERIAN HOSPITAL KAUFMAN	Catheter-Associated Urinary Tract Infection (CAUTI)	Centers for Disease Control and Prevention	CY 2023	0.0000	CY 2024	0.8 or below 1 and better than baseline or IOS 5%	Urban hospital measure

b. Component 3 C3-132 - 1629138029 - TEXAS HEALTH PRESBYTERIAN	Catheter-Associated Urinary Tract Infection	Centers for Disease Control and				0.8 or below 1 and better than	
hOSPITAL ROCKWALL b. Component 3 C3-132 - 1134166192 -	(CAUTI) Catheter-Associated Urinary Tract Infection	Prevention Centers for Disease Control and	CY 2023	0.9124	CY 2024	baseline or IOS 5% 0.8 or below 1 and better than	Urban hospital measure
TEXAS ORTHOPEDIC HOSPITAL b. Component 3 C3-132 - 1003344334 -	(CAUTI)	Prevention	CY 2023	0.0000	CY 2024	baseline or IOS 5%	Urban hospital measure
THE HÖSPITALS OF PROVIDENCE HORIZON CITY CAMPUS	Catheter-Associated Urinary Tract Infection (CAUTI)	Centers for Disease Control and Prevention	CY 2023	0.0000	CY 2024	0.8 or below 1 and better than baseline or IOS 5%	Urban hospital measure
b. Component 3 C3-132 - 1215969787 - THE HOSPITALS OF PROVIDENCE SIERRA CAMPUS	Catheter-Associated Urinary Tract Infection (CAUTI)	Centers for Disease Control and Prevention	CY 2023	0.8065	CY 2024	0.8 or below 1 and better than baseline or IOS 5%	Urban hospital measure
c. Component 3 C3-164 - 1669732178 - AD HOSPITAL EAST, LLC	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure
c. Component 3 C3-164 - 1629089966 - ADVENTHEALTH CENTRAL TEXAS	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure
c. Component 3 C3-164 - 1093708679 - ASCENSION PROVIDENCE	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	32.2581	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure
c. Component 3 C3-164 - 1619115383 - ASCENSION SETON HAYS	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure
c. Component 3 C3-164 - 1164526786 - ASCENSION SETON MEDICAL CENTER AUSTIN	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure
c. Component 3 C3-164 - 1124137054 - ASCENSION SETON NORTHWEST	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure
c. Component 3 C3-164 - 1750499273 - ASCENSION SETON SOUTHWEST	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure
c. Component 3 C3-164 - 1578780870 - ASCENSION SETON WILLIAMSON	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure
c. Component 3 C3-164 - 1417465824 - ATHENS HOSPITAL, LLC	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure
c. Component 3 C3-164 - 1093744187 - BAPTIST HOSPITALS OF SOUTHEAST TEXAS	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure
c. Component 3 C3-164 - 1598744856 - BAPTIST MEDICAL CENTER	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure
c. Component 3 C3-164 - 1669472387 - BAYLOR SCOTT & WHITE ALL SAINTS MEDICAL CENTER - FORT WORTH	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure
c. Component 3 C3-164 - 1609855139 - BAYLOR SCOTT & WHITE HEART AND VASCULAR HOSPITAL - DALLAS	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure
c. Component 3 C3-164 - 1144781501 - BAYLOR SCOTT & WHITE MEDICAL CENTER - BUDA	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure
c. Component 3 C3-164 - 1801826839 - BAYLOR SCOTT & WHITE MEDICAL CENTER - CENTENNIAL	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure
c. Component 3 C3-164 - 1265772362 - BAYLOR SCOTT & WHITE MEDICAL CENTER - COLLEGE STATION	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure
c. Component 3 C3-164 - 1992700983 - BAYLOR SCOTT & WHITE MEDICAL CENTER - IRVING	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure
c. Component 3 C3-164 - 1124305065 - BAYLOR SCOTT & WHITE MEDICAL CENTER - MCKINNEY	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure
c. Component 3 C3-164 - 1346729159 - BAYLOR SCOTT & WHITE MEDICAL CENTER - PFLUGERVILLE	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure
c. Component 3 C3-164 - 1649273434 - BAYLOR SCOTT & WHITE MEDICAL CENTER - PLANO	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure
c. Component 3 C3-164 - 1265568638 - BAYLOR SCOTT & WHITE MEDICAL CENTER - ROUND ROCK	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure
c. Component 3 C3-164 - 1477516466 - BAYLOR SCOTT & WHITE MEDICAL CENTER - TEMPLE	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	5.5249	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure
c. Component 3 C3-164 - 1265430177 - BAYLOR SCOTT & WHITE MEDICAL CENTER - WAXAHACHIE	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure
c. Component 3 C3-164 - 1891882833 - BAYLOR SCOTT & WHITE MEDICAL CENTER HILLCREST	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure
c. Component 3 C3-164 - 1205018439 - BAYLOR SCOTT & WHITE MEDICAL CENTER LAKE POINTE	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure
c. Component 3 C3-164 - 1194753590 - BAYLOR SCOTT & WHITE THE HEART HOSPITAL - DENTON	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure

c. Component 3 C3-164 - 1962504340 - BAYLOR SCOTT & WHITE THE HEART HOSPITAL - PLANO	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure
c. Component 3 C3-164 - 1447250253 - BAYLOR UNIVERSITY MEDICAL CENTER	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure
c. Component 3 C3-164 - 1407191984 - BSA HOSPITAL LLC	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	76.9231	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure
c. Component 3 C3-164 - 1376662296 - CEDAR PARK REGIONAL MEDICAL CENTER	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure
c. Component 3 C3-164 - 1184622847 - CHI ST. LUKE'S HEALTH BAYLOR COLLEGE OF MEDICINE MEDICAL CENTER	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	11.2360	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure
c. Component 3 C3-164 - 1124092036 - CHRISTUS GOOD SHEPHERD MEDICAL CENTER	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure
c. Component 3 C3-164 - 1194787218 - CHRISTUS SANTA ROSA HOSPITAL	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure
c. Component 3 C3-164 - 1447883301 - CHRISTUS SANTA ROSA HOSPITAL - SAN MARCOS	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure
c. Component 3 C3-164 - 1679557888 - CHRISTUS SOUTHEAST TEXAS - ST. ELIZABETH	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure
c. Component 3 C3-164 - 1689641680 - CHRISTUS SPOHN HOSPITAL CORPUS CHRISTI	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure
C. Component 3 C3-164 - 1295736734 - CHRISTUS ST. MICHAEL HEALTH SYSTEM	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	90.9091	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure
c. Component 3 C3-164 - 1124052162 - CITIZENS MEDICAL CENTER	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure
c. Component 3 C3-164 - 1508810573 - CORPUS CHRISTI MEDICAL CENTER	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure
c. Component 3 C3-164 - 1972517365 - COVENANT MEDICAL CENTER	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure
c. Component 3 C3-164 - 1861690364 - DALLAS MEDICAL CENTER LLC	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure
c. Component 3 C3-164 - 1093810327 - DELL SETON MEDICAL CENTER AT THE UNIVERSITY OF TEXAS	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure
c. Component 3 C3-164 - 1851343909 - DETAR HEALTHCARE SYSTEM	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure
c. Component 3 C3-164 - 1053317362 - DOCTORS HOSPITAL AT RENAISSANCE, LTD		Centers for Medicare & Medicaid				4.87 per 1000 discharges benchmark and better than	·
c. Component 3 C3-164 - 1396731105 - DOCTORS HOSPITAL OF LAREDO	PSI 13 Postoperative Sepsis Rate	Services (CMS) Centers for Medicare & Medicaid Services (CMS)	CY 2023 CY 2023	5.2632 0.0000	CY 2024 CY 2024	baseline or IOS 5% 4.87 per 1000 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure
c. Component 3 C3-164 - 1720088123 - GUADALUPE REGIONAL MEDICAL	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid				4.87 per 1000 discharges benchmark and better than	Urban hospital measure
CENTER c. Component 3 C3-164 - 1881688976 -	PSI 13 Postoperative Sepsis Rate	Services (CMS) Centers for Medicare & Medicaid	CY 2023	0.0000	CY 2024	baseline or IOS 5% 4.87 per 1000 discharges benchmark and better than	Urban hospital measure
HARLINGEN MEDICAL CENTER c. Component 3 C3-164 - 1205900370 -	PSI 13 Postoperative Sepsis Rate	Services (CMS) Centers for Medicare & Medicaid	CY 2023	0.0000	CY 2024	baseline or IOS 5% 4.87 per 1000 discharges benchmark and better than	Urban hospital measure
HARRIS COUNTY HOSPITAL DISTRICT c. Component 3 C3-164 - 1063466035 - HCA HOUSTON HEALTHCARE CLEAR	PSI 13 Postoperative Sepsis Rate	Services (CMS) Centers for Medicare & Medicaid	CY 2023	17.2414	CY 2024	baseline or IOS 5% 4.87 per 1000 discharges benchmark and better than	Urban hospital measure
LAKE c. Component 3 C3-164 - 1962455816 -	PSI 13 Postoperative Sepsis Rate	Services (CMS) Centers for Medicare & Medicaid	CY 2023	0.0000	CY 2024	baseline or IOS 5% 4.87 per 1000 discharges benchmark and better than	Urban hospital measure
HCA HOUSTON HEALTHCARE CONROE c. Component 3 C3-164 - 1073043592 - HCA HOUSTON HEALTHCARE MEDICAL	PSI 13 Postoperative Sepsis Rate	Services (CMS) Centers for Medicare & Medicaid	CY 2023	0.0000	CY 2024	baseline or IOS 5% 4.87 per 1000 discharges benchmark and better than	Urban hospital measure
CENTER c. Component 3 C3-164 - 1811942238 - HCA HOUSTON HEALTHCARE NORTH	PSI 13 Postoperative Sepsis Rate	Services (CMS) Centers for Medicare & Medicaid	CY 2023	19.6078	CY 2024	baseline or IOS 5% 4.87 per 1000 discharges benchmark and better than	Urban hospital measure
CYPRESS c. Component 3 C3-164 - 1740450121 - HCA HOUSTON HEALTHCARE	PSI 13 Postoperative Sepsis Rate	Services (CMS) Centers for Medicare & Medicaid	CY 2023	10.9890	CY 2024	baseline or IOS 5% 4.87 per 1000 discharges benchmark and better than	Urban hospital measure
NORTHWEST c. Component 3 C3-164 - 1609275585 - HCA HOUSTON HEALTHCARE	PSI 13 Postoperative Sepsis Rate	Services (CMS) Centers for Medicare & Medicaid	CY 2023	0.0000	CY 2024	baseline or IOS 5% 4.87 per 1000 discharges benchmark and better than	Urban hospital measure
PEARLAND c. Component 3 C3-164 - 1174576698 - HCA HOUSTON HEALTHCARE	PSI 13 Postoperative Sepsis Rate	Services (CMS) Centers for Medicare & Medicaid	CY 2023	45.4545	CY 2024	baseline or IOS 5% 4.87 per 1000 discharges benchmark and better than	Urban hospital measure
SOUTHEAST	PSI 13 Postoperative Sepsis Rate	Services (CMS)	CY 2023	0.0000	CY 2024	baseline or IOS 5%	Urban hospital measure

c. Component 3 C3-164 - 1750819025 - HCA HOUSTON HEALTHCARE TOMBALL	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure
c. Component 3 C3-164 - 1275580938 - HCA HOUSTON HEALTHCARE WEST	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure
c. Component 3 C3-164 - 1528064649 - HENDRICK MEDICAL CENTER	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure
c. Component 3 C3-164 - 1841562709 - HH KILLEEN HEALTH SYSTEM LLC	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure
c. Component 3 C3-164 - 1598750721 - HUNT REGIONAL HEALTHCARE	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure
c. Component 3 C3-164 - 1245878990 - HUNTSVILLE MEMORIAL HOSPITAL	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure
c. Component 3 C3-164 - 1992753222 - JPS HEALTH NETWORK	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure
c. Component 3 C3-164 - 1861488579 - KNAPP MEDICAL CENTER	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure
c. Component 3 C3-164 - 1548232044 - LAREDO MEDICAL CENTER	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure
c. Component 3 C3-164 - 1770536120 - LAS PALMAS MEDICAL CENTER	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure
c. Component 3 C3-164 - 1528026267 - LONGVIEW REGIONAL MEDICAL CENTER	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure
c. Component 3 C3-164 - 1740273994 - MEDICAL CENTER HOSPITAL	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure
c. Component 3 C3-164 - 1871911016 - MEDICAL CITY ALLIANCE	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure
c. Component 3 C3-164 - 1134172406 - MEDICAL CITY ARLINGTON	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure
c. Component 3 C3-164 - 1689628984 - MEDICAL CITY DALLAS	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure
c. Component 3 C3-164 - 1306897277 - MEDICAL CITY DENTON	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure
c. Component 3 C3-164 - 1659323772 - MEDICAL CITY FORT WORTH	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure
c. Component 3 C3-164 - 1902857766 - MEDICAL CITY LAS COLINAS	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure
c. Component 3 C3-164 - 1255384533 - MEDICAL CITY LEWISVILLE	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure
c. Component 3 C3-164 - 1437102639 - MEDICAL CITY MCKINNEY	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure
c. Component 3 C3-164 - 1518911833 - MEDICAL CITY NORTH HILLS	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure
c. Component 3 C3-164 - 1699726406 - MEDICAL CITY PLANO	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure
c. Component 3 C3-164 - 1417471467 - MEDICAL CITY WEATHERFORD	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure
c. Component 3 C3-164 - 1730132234 - MEMORIAL HERMANN HEALTH SYSTEM	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	11.2360	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5% 4.87 per 1000 discharges	Urban hospital measure
c. Component 3 C3-164 - 1982666111 - MEMORIAL HERMANN HOSPITAL	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5% 4.87 per 1000 discharges	Urban hospital measure
c. Component 3 C3-164 - 1932152337 - MEMORIAL HERMANN KATY HOSPITAL c. Component 3 C3-164 - 1740233782 -	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5% 4.87 per 1000 discharges	Urban hospital measure
MEMORIAL HERMANN MEMORIAL CITY HOSPITAL	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5% 4.87 per 1000 discharges	Urban hospital measure
c. Component 3 C3-164 - 1295843787 - MEMORIAL HERMANN NORTHEAST c. Component 3 C3-164 - 1295788735 -	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5% 4.87 per 1000 discharges	Urban hospital measure
C. Component 3 C3-164 - 1295/88735 - MEMORIAL HERMANN SUGAR LAND HOSPITAL	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure

c. Component 3 C3-164 - 1275592131 - METHODIST CHARLTON MEDICAL CENTER	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure
c. Component 3 C3-164 - 1528027786 - METHODIST DALLAS MEDICAL CENTER	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure
c. Component 3 C3-164 - 1124074273 - METHODIST HOSPITAL	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	18.0505	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure
c. Component 3 C3-164 - 1659525236 -		Centers for Medicare & Medicaid				4.87 per 1000 discharges benchmark and better than	
METHODIST HOSPITAL STONE OAK c. Component 3 C3-164 - 1689629941 - METHODIST MANSFIELD MEDICAL	PSI 13 Postoperative Sepsis Rate	Services (CMS) Centers for Medicare & Medicaid	CY 2023	0.0000	CY 2024	baseline or IOS 5% 4.87 per 1000 discharges benchmark and better than	Urban hospital measure
CENTER c. Component 3 C3-164 - 1033165501 - METHODIST RICHARDSON MEDICAL	PSI 13 Postoperative Sepsis Rate	Services (CMS) Centers for Medicare & Medicaid	CY 2023	0.0000	CY 2024	baseline or IOS 5% 4.87 per 1000 discharges benchmark and better than	Urban hospital measure
CENTER c. Component 3 C3-164 - 1568818417 -	PSI 13 Postoperative Sepsis Rate	Services (CMS)	CY 2023	0.0000	CY 2024	baseline or IOS 5% 4.87 per 1000 discharges	Urban hospital measure
METHÓDIST SOUTHLAKE MEDICAL CENTER	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	benchmark and better than baseline or IOS 5% 4.87 per 1000 discharges	Urban hospital measure
c. Component 3 C3-164 - 1205833985 - MISSION REGIONAL MEDICAL CENTER c. Component 3 C3-164 - 1679578439 -	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	benchmark and better than baseline or IOS 5% 4.87 per 1000 discharges	Urban hospital measure
MOTHER FRANCES HOSPITAL REGIONAL HEALTH CARE CENTER	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	benchmark and better than baseline or IOS 5%	Urban hospital measure
c. Component 3 C3-164 - 1629021845 - NORTH AUSTIN MEDICAL CENTER	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure
c. Component 3 C3-164 - 1467442418 - NORTHWEST TEXAS HEALTHCARE SYSTEM	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure
c. Component 3 C3-164 - 1700883196 - OAKBEND MEDICAL CENTER	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure
c. Component 3 C3-164 - 1801852736 - ODESSA REGIONAL HOSPITAL LP	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure
c. Component 3 C3-164 - 1932123247 - PARKLAND HEALTH	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	3.6199	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure
c. Component 3 C3-164 - 1790174860 - PRIME HEALTHCARE SERVICES MESQUITE LLC	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure
c. Component 3 C3-164 - 1427472463 - RESOLUTE HEALTH HOSPITAL		Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5%	
c. Component 3 C3-164 - 1619924719 -	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid				4.87 per 1000 discharges benchmark and better than	Urban hospital measure
RIO GRANDE REGIONAL HOSPITAL c. Component 3 C3-164 - 1649223645 -	PSI 13 Postoperative Sepsis Rate	Services (CMS) Centers for Medicare & Medicaid	CY 2023	0.0000	CY 2024	baseline or IOS 5% 4.87 per 1000 discharges benchmark and better than	Urban hospital measure
ROUND ROCK MEDICAL CENTER c. Component 3 C3-164 - 1992707228 -	PSI 13 Postoperative Sepsis Rate	Services (CMS) Centers for Medicare & Medicaid	CY 2023	0.0000	CY 2024	baseline or IOS 5% 4.87 per 1000 discharges benchmark and better than	Urban hospital measure
SHANNON MEDICAL CENTER c. Component 3 C3-164 - 1770573586 -	PSI 13 Postoperative Sepsis Rate	Services (CMS) Centers for Medicare & Medicaid	CY 2023	0.0000	CY 2024	baseline or IOS 5% 4.87 per 1000 discharges benchmark and better than	Urban hospital measure
SOUTH TEXAS HEALTH SYSTEM	PSI 13 Postoperative Sepsis Rate	Services (CMS)	CY 2023	42.0168	CY 2024	baseline or IOS 5% 4.87 per 1000 discharges	Urban hospital measure
c. Component 3 C3-164 - 1942294939 - ST JOSEPH REGIONAL HEALTH CENTER	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	30.3030	CY 2024	benchmark and better than baseline or IOS 5% 4.87 per 1000 discharges	Urban hospital measure
c. Component 3 C3-164 - 1659559573 - ST LUKES SUGAR LAND HOSPITAL	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	benchmark and better than baseline or IOS 5% 4.87 per 1000 discharges	Urban hospital measure
c. Component 3 C3-164 - 1720033947 - ST. DAVID'S GEORGETOWN HOSPITAL	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	21.7391	CY 2024	benchmark and better than baseline or IOS 5%	Urban hospital measure
c. Component 3 C3-164 - 1679528889 - ST. DAVID'S SOUTH AUSTIN MEDICAL CENTER	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure
c. Component 3 C3-164 - 1154361475 - ST. JOSEPH MEDICAL CENTER	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure
c. Component 3 C3-164 - 1710314141 - ST. LUKES HOSPITAL AT THE VINTAGE	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure
c. Component 3 C3-164 - 1942208616 - ST. LUKE'S THE WOODLANDS HOSPITAL	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure
c. Component 3 C3-164 - 1174533343 - TEXAS HEALTH ARLINGTON MEMORIAL HOSPITAL	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure
c. Component 3 C3-164 - 1215296884 - TEXAS HEALTH HARRIS METHODIST HOSPITAL ALLIANCE	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure
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c. Component 3 C3-164 - 1336172105 - TEXAS HEALTH HARRIS METHODIST HOSPITAL FORT WORTH	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure
c. Component 3 C3-164 - 1104845015 - TEXAS HEALTH HARRIS METHODIST HOSPITAL HURST-EULESS-BEDFORD	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure
c. Component 3 C3-164 - 1417980202 - TEXAS HEALTH HARRIS METHODIST HOSPITAL SOUTHWEST FORT WORTH	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure
c. Component 3 C3-164 - 1407169196 - TEXAS HEALTH HEART & VASCULAR HOSPITAL ARLINGTON	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure
c. Component 3 C3-164 - 1104381292 - TEXAS HEALTH HOSPITAL FRISCO		Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5%	
c. Component 3 C3-164 - 1356960132 -	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid				4.87 per 1000 discharges benchmark and better than	Urban hospital measure
TEXAS HEALTH HOSPITAL MANSFIELD c. Component 3 C3-164 - 1033120423 - TEXAS HEALTH HUGULEY HOSPITAL	PSI 13 Postoperative Sepsis Rate	Services (CMS) Centers for Medicare & Medicaid	CY 2023	0.0000	CY 2024	baseline or IOS 5% 4.87 per 1000 discharges benchmark and better than	Urban hospital measure
FORT WORTH SOUTH c. Component 3 C3-164 - 1396779948 - TEXAS HEALTH PRESBYTERIAN	PSI 13 Postoperative Sepsis Rate	Services (CMS) Centers for Medicare & Medicaid	CY 2023	0.0000	CY 2024	baseline or IOS 5% 4.87 per 1000 discharges benchmark and better than	Urban hospital measure
HOSPITAL DALLAS c. Component 3 C3-164 - 1003883158 - TEXAS HEALTH PRESBYTERIAN	PSI 13 Postoperative Sepsis Rate	Services (CMS) Centers for Medicare & Medicaid	CY 2023	0.0000	CY 2024	baseline or IOS 5% 4.87 per 1000 discharges benchmark and better than	Urban hospital measure
HOSPITAL DENTON c. Component 3 C3-164 - 1902047376 -	PSI 13 Postoperative Sepsis Rate	Services (CMS)	CY 2023	0.0000	CY 2024	baseline or IOS 5% 4.87 per 1000 discharges	Urban hospital measure
TEXAS HEALTH PRESBYTERIAN HOSPITAL FLOWER MOUND c. Component 3 C3-164 - 1770514077 -	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	benchmark and better than baseline or IOS 5% 4.87 per 1000 discharges	Urban hospital measure
TEXAS HEALTH PRESBYTERIAN HOSPITAL PLANO	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	benchmark and better than baseline or IOS 5% 4.87 per 1000 discharges	Urban hospital measure
c. Component 3 C3-164 - 1134166192 - TEXAS ORTHOPEDIC HOSPITAL	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	benchmark and better than baseline or IOS 5% 4.87 per 1000 discharges	Urban hospital measure
c. Component 3 C3-164 - 1851390967 - TEXOMA MEDICAL CENTER	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	benchmark and better than baseline or IOS 5%	Urban hospital measure
c. Component 3 C3-164 - 1972709970 - THE HOSPITALS OF PROVIDENCE EAST CAMPUS	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure
c. Component 3 C3-164 - 1700801909 - THE HOSPITALS OF PROVIDENCE MEMORIAL CAMPUS	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	22.7273	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure
c. Component 3 C3-164 - 1215969787 - THE HOSPITALS OF PROVIDENCE SIERRA CAMPUS	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure
c. Component 3 C3-164 - 1538522412 - THE HOSPITALS OF PROVIDENCE TRANSMOUNTAIN CAMPUS	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure
c. Component 3 C3-164 - 1861467573 - THE MEDICAL CENTER OF SOUTHEAST TEXAS LP	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure
c. Component 3 C3-164 - 1407364847 - TYLER REGIONAL HOSPITAL LLC	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure
c. Component 3 C3-164 - 1023013448 - UNITED REGIONAL HEATH CARE		Centers for Medicare & Medicaid				4.87 per 1000 discharges benchmark and better than	
C. Component 3 C3-164 - 1821011248 -	PSI 13 Postoperative Sepsis Rate	Services (CMS) Centers for Medicare & Medicaid	CY 2023	0.0000	CY 2024	baseline or IOS 5% 4.87 per 1000 discharges benchmark and better than	Urban hospital measure
UNIVERSITY HEALTH SYSTEM c. Component 3 C3-164 - 1821087164 -	PSI 13 Postoperative Sepsis Rate	Services (CMS) Centers for Medicare & Medicaid	CY 2023	0.0000	CY 2024	4.87 per 1000 discharges benchmark and better than	Urban hospital measure
UNIVERSITY MEDICAL CENTER c. Component 3 C3-164 - 1316936990 - UNIVERSITY MEDICAL CENTER OF EL	PSI 13 Postoperative Sepsis Rate	Services (CMS) Centers for Medicare & Medicaid	CY 2023	1.5221	CY 2024	baseline or IOS 5% 4.87 per 1000 discharges benchmark and better than	Urban hospital measure
PASO	PSI 13 Postoperative Sepsis Rate	Services (CMS)	CY 2023	1.4025	CY 2024	baseline or IOS 5% 4.87 per 1000 discharges	Urban hospital measure
c. Component 3 C3-164 - 1154618742 - VALLEY BAPTIST MEDICAL CENTER c. Component 3 C3-164 - 1184911877 -	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	benchmark and better than baseline or IOS 5% 4.87 per 1000 discharges	Urban hospital measure
VALLEY BAPTIST MEDICAL CENTER - BROWNSVILLE	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	benchmark and better than baseline or IOS 5% 4.87 per 1000 discharges	Urban hospital measure
c. Component 3 C3-164 - 1043267701 - VALLEY REGIONAL MEDICAL CENTER	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	benchmark and better than baseline or IOS 5% 4.87 per 1000 discharges	Urban hospital measure
c. Component 3 C3-164 - 1083112023 - WHITE ROCK MEDICAL CENTER	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	0.0000	CY 2024	benchmark and better than baseline or IOS 5%	Urban hospital measure
c. Component 3 C3-164 - 1023065794 - WOMAN'S HOSPITAL OF TEXAS	PSI 13 Postoperative Sepsis Rate	Centers for Medicare & Medicaid Services (CMS)	CY 2023	166.6667	CY 2024	4.87 per 1000 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure
d. Component 3 C3-173 - 1669732178 - AD		National Committee for Quality				12.6 per 100 discharges benchmark and better than	Urban hospital measure; hospitals will report the observed rate of readmissions

Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	10.8527	CY 2024	benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	6.7729	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	0.0000	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	7.2664	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	9.3333	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
,	National Committee for Quality Assurance				12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
, ,	National Committee for Quality Assurance				12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
	National Committee for Quality				12.6 per 100 discharges benchmark and better than	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
, ,	National Committee for Quality				12.6 per 100 discharges benchmark and better than	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
	National Committee for Quality				12.6 per 100 discharges benchmark and better than	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	9.2000	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	6.3800	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	1.3216	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023		CY 2024	12.6 per 100 discharges benchmark and better than	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	0.0000	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	0.0000	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	10.0000	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	0.0000	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	17.1429	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
, ,	National Committee for Quality Assurance				12.6 per 100 discharges benchmark and better than	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
,	National Committee for Quality Assurance				12.6 per 100 discharges benchmark and better than	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	15.5039	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	15.7182	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	12.1547	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	6.6667	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	19.8276	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	6.4000	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	13.1599	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	12.0370	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
	Plan All-Cause Readmission (PCR-AD)	Plan All-Cause Readmission (PCR-AD) Plan All-Cause Readmission (PCR-AD) Plan All-Cause Readmission (PCR-AD) Plan All-Cause Readmission (PCR-AD) National Committee for Quality Assurance Plan All-Cause Readmission (PCR-AD) Plan All-Cause Readmission (PCR-AD) National Committee for Quality Assurance Plan All-Cause Readmission (PCR-AD) National Committee for Quality Assurance National Commit	Plan All-Cause Readmission (PCR-AD) Plan All-Cause Readmission (PCR-AD) Plan All-Cause Readmission (PCR-AD) National Committee for Quality Assurance CY 2023 Plan All-Cause Readmission (PCR-AD) Plan All-Cause Readmission (PCR-AD) National Committee for Quality Assurance CY 2023 Plan All-Cause Readmission (PCR-AD) National Committee for Quality Assurance CY 2023 Plan All-Cause Readmission (PCR-AD) National Committee for Quality Assurance CY 2023 Plan All-Cause Readmission (PCR-AD) National Committee for Quality Assurance CY 2023 Plan All-Cause Readmission (PCR-AD) National Committee for Quality Assurance CY 2023 Plan All-Cause Readmission (PCR-AD) National Committee for Q	Plan All-Cause Readmission (PCR-AD)	Plan Al-Cause Readmission (PCR-AD) Assurance CY 2023 6.7729 CY 2024	Pian Al-Cause Residencian (PCR-AD) National Committee for Quality Pia

d. Component 3 C3-173 - 1891882833 - BAYLOR SCOTT & WHITE MEDICAL		National Committee for Quality				12.6 per 100 discharges benchmark and better than	Urban hospital measure; hospitals will report the observed rate of readmissions
CENTER HILLCREST d. Component 3 C3-173 - 1205018439 -	Plan All-Cause Readmission (PCR-AD)	Assurance	CY 2023	10.1449	CY 2024	baseline or IOS 5% 12.6 per 100 discharges	to the same hospital
BAYLOR SCOTT & WHITE MEDICAL CENTER LAKE POINTE	Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	10.5085	CY 2024	benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
d. Component 3 C3-173 - 1194753590 - BAYLOR SCOTT & WHITE THE HEART HOSPITAL - DENTON	Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	0.0000	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
d. Component 3 C3-173 - 1962504340 - BAYLOR SCOTT & WHITE THE HEART HOSPITAL - PLANO	Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	3.1250	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
d. Component 3 C3-173 - 1447250253 - BAYLOR UNIVERSITY MEDICAL CENTER	Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	14.6509	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
d. Component 3 C3-173 - 1972581940 - BRAZOSPORT MEMORIAL HOSPITAL &						12.6 per 100 discharges	
BRAZOSPORT REGIONAL HEALTH SYSTEM	Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	6.0241	CY 2024	benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
d. Component 3 C3-173 - 1114903523 - BRIM HEALTHCARE OF TEXAS LLC	Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	9.8310	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
d. Component 3 C3-173 - 1407191984 - BSA HOSPITAL LLC	Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	9.8999	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
d. Component 3 C3-173 - 1376662296 - CEDAR PARK REGIONAL MEDICAL CENTER	Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	9.5238	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
d. Component 3 C3-173 - 1932573417 - CHI ST. JOSEPH HEALTH REHABILITATION HOSPITAL	Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	6.2500	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
d. Component 3 C3-173 - 1184622847 - CHI ST. LUKE'S HEALTH BAYLOR COLLEGE OF MEDICINE MEDICAL CENTER	Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	8.6093	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
d. Component 3 C3-173 - 1124092036 - CHRISTUS GOOD SHEPHERD MEDICAL CENTER	Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	15.5995	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
d. Component 3 C3-173 - 1194787218 - CHRISTUS SANTA ROSA HOSPITAL	Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	7.1225	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
d. Component 3 C3-173 - 1447883301 - CHRISTUS SANTA ROSA HOSPITAL - SAN MARCOS	Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	5.3846	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
d. Component 3 C3-173 - 1679557888 - CHRISTUS SOUTHEAST TEXAS - ST. ELIZABETH	Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	8.6103	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
d. Component 3 C3-173 - 1689641680 - CHRISTUS SPOHN HOSPITAL CORPUS CHRISTI	Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	8.2707	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
CHRISTUS ST. MICHAEL HEALTH SYSTEM	Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	10.0000	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
d. Component 3 C3-173 - 1316911068 - CHRISTUS TRINITY MOTHER FRANCES REHAB HOSPITAL	Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	0.0000	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
d. Component 3 C3-173 - 1124052162 - CITIZENS MEDICAL CENTER	Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	10.2881	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
d. Component 3 C3-173 - 1508810573 - CORPUS CHRISTI MEDICAL CENTER	Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	8.7523	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
d. Component 3 C3-173 - 1972517365 - COVENANT MEDICAL CENTER	Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	29.3194	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
d. Component 3 C3-173 - 1861690364 - DALLAS MEDICAL CENTER LLC	Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	2.4793	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
d. Component 3 C3-173 - 1093810327 - DELL SETON MEDICAL CENTER AT THE UNIVERSITY OF TEXAS	Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	8.3752	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
d. Component 3 C3-173 - 1851343909 - DETAR HEALTHCARE SYSTEM	Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	7.4303	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
d. Component 3 C3-173 - 1053317362 - DOCTORS HOSPITAL AT	Plan All-Cause Readmission (PCR-AD)	National Committee for Quality	CY 2023	7.9084		12.6 per 100 discharges benchmark and better than	Urban hospital measure; hospitals will report the observed rate of readmissions
d. Component 3 C3-173 - 1396731105 -	, ,	Assurance National Committee for Quality			CY 2024	baseline or IOS 5% 12.6 per 100 discharges benchmark and better than	to the same hospital Urban hospital measure; hospitals will report the observed rate of readmissions
DOCTÓRS HOSPITAL OF LAREDO d. Component 3 C3-173 - 1659539567 - ENCOMPASS HEALTH REHABILITATION	Plan All-Cause Readmission (PCR-AD)	Assurance National Committee for Quality	CY 2023	5.9006	CY 2024	baseline or IOS 5% 12.6 per 100 discharges benchmark and better than	to the same hospital Urban hospital measure; hospitals will report the observed rate of readmissions
HOSPITAL OF ABILENE	Plan All-Cause Readmission (PCR-AD)	Assurance	CY 2023	2.9412	CY 2024	baseline or IOS 5%	to the same hospital
d. Component 3 C3-173 - 1548546088 - ENCOMPASS HEALTH REHABILITATION HOSPITAL OF AUSTIN	Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	0.0000	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital

Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	8.5714	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	0.0000	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	10.2439	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	8.9431	CY 2024	benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	11.4896	CY 2024	benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	5.9146	CY 2024	benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	8.8136	CY 2024	benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	9.4828	CY 2024	benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	7.8556	CY 2024	benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	8.6813	CY 2024	benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	11.4706	CY 2024	benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	5.9977	CY 2024	benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	4.5627	CY 2024	benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	5.3830	CY 2024	benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	12.8830	CY 2024	benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	13.1429	CY 2024	benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	9.2394	CY 2024	benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	7.4675	CY 2024	benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	15.2860	CY 2024	benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	10.1900	CY 2024	benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	14.3302	CY 2024	benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	8.4518	CY 2024	benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	9.7808	CY 2024	benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	17.8161	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	9.2784	CY 2024	benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	16.6667	CY 2024	benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	9.6085	CY 2024	benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	6.7657	CY 2024	benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	7.9511	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
	Plan All-Cause Readmission (PCR-AD) Plan All-Cause Readmission (PCR-AD)	Plan All-Cause Readmission (PCR-AD) National Committee for Quality Assurance National Comm	Plan All-Cause Readmission (PCR-AD) National Committee for Quality Assurance CY 2023 Plan All-Cause Readmission (PCR-AD) National Committee for Quality Assurance CY 2023 Plan All-Cause Readmission (PCR-AD) National Committee for Quality Assurance CY 2023 Plan All-Cause Readmission (PCR-AD) National Committee for Quality Assurance CY 2023 Plan All-Cause Readmission (PCR-AD) National Committee for Quality Assurance CY 2023 Plan All-Cause Readmission (PCR-AD) National Committee for Quality Assurance CY 2023 P	Plan All-Cause Readmission (PCR-AD) Assurance CY 2023 8.5714	Plan Al-Cause Readmission (PCR-AD)	Pan Al-Cause Readmission (PCR-AD) National Committee for Quality Assertance CV 2023 8.5714 CV 2024 Exchange for PCR 5 The Section of PCR-AD) 12.6 per 100 discharges 12.6 per 100 disch

Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	8.6364	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	7.4074	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	11.8871	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	9.7345	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	8.4286	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	6.9922	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	9.8101	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	13.6704	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	9.8592	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	6.4103	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	10.3896	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	8.1433	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	8.8855	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	5.8824	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	4.3750	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	3.6064	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	2.8986	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	3.0019	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	4.1600	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	3.5461	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	6.1993	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	4.0374	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	8.0174	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	7.6712	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	4.7619	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	12.9496	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	3.5688	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	15.3846	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
					12.6 per 100 discharges	
	Plan All-Cause Readmission (PCR-AD) Plan All-Cause Readmission (PCR-AD)	Plan All-Cause Readmission (PCR-AD) Plan All-Cause Readmission (PCR-AD) Plan All-Cause Readmission (PCR-AD) National Committee for Quality Assurance Plan All-Cause Readmission (PCR-AD) National Committee for Quality Assurance Plan All-Cause Readmission (PCR-AD) National Committee for Quality Assurance National Committee for Quality Assurance Plan All-Cause Readmission (PCR-AD) National Committee for Quality Assurance Plan All-Cause Readmission (PCR-AD) National Committee for Quality Assurance National Committee for Quality	Plan All-Cause Readmission (PCR-AD) Plan All-Cause Readmission (PC	Pian All-Cause Readmission (PCR-AD) Pian All-Cause Readmission (PC	Plan Al-Cause Readmission (PCR-AD)	Pern Al Cause Readmission (PCR AD) National Committee for Cuality Assurance CY 2023 6.6354 CY 2024 Department of De

d. Component 3 C3-173 - 1205833985 - MISSION REGIONAL MEDICAL CENTER	Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	11.9891	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
d. Component 3 C3-173 - 1679578439 - MOTHER FRANCES HOSPITAL REGIONAL HEALTH CARE CENTER	Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	11.7053	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
d. Component 3 C3-173 - 1629021845 - NORTH AUSTIN MEDICAL CENTER	Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	8.1281	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
d. Component 3 C3-173 - 1467442418 - NORTHWEST TEXAS HEALTHCARE SYSTEM	Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	6.8002	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
d. Component 3 C3-173 - 1700883196 - OAKBEND MEDICAL CENTER	Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	5.5556	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
d. Component 3 C3-173 - 1801852736 - ODESSA REGIONAL HOSPITAL LP	Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	7.2072	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
d. Component 3 C3-173 - 1376588228 - PAM HEALTH WARM SPRINGS REHABILITATION HOSPITAL OF SAN ANTONIO	Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	3.2258	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
d. Component 3 C3-173 - 1861882532 - PAM REHABILITATION HOSPITAL OF CLEAR LAKE	Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	0.0000	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
d. Component 3 C3-173 - 1003340639 - PAM REHABILITATION HOSPITAL OF CORPUS CHRISTI	Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	6.6667	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
d. Component 3 C3-173 - 1932123247 - PARKLAND HEALTH	Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	23.5669	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
d. Component 3 C3-173 - 1912948845 - PHYSICIANS SURGICAL HOSPITALS, LLC	Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	0.0000	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
d. Component 3 C3-173 - 1790174860 - PRIME HEALTHCARE SERVICES MESQUITE LLC	Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	10.2679	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
d. Component 3 C3-173 - 1427472463 - RESOLUTE HEALTH HOSPITAL	Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	8.1301	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
d. Component 3 C3-173 - 1619924719 - RIO GRANDE REGIONAL HOSPITAL	Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	5.6291	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
d. Component 3 C3-173 - 1649223645 - ROUND ROCK MEDICAL CENTER	Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	9.5890	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
d. Component 3 C3-173 - 1184262800 - SANA HEALTHCARE CARROLLTON	Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	4.7619	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
d. Component 3 C3-173 - 1992707228 - SHANNON MEDICAL CENTER	Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	16.4071	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
d. Component 3 C3-173 - 1306448899 - SHANNON REHABILITATION HOSPITAL	Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	30.4348	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
d. Component 3 C3-173 - 1770573586 - SOUTH TEXAS HEALTH SYSTEM	Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	13.4975	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
d. Component 3 C3-173 - 1942294939 - ST JOSEPH REGIONAL HEALTH CENTER	Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	6.8027	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
d. Component 3 C3-173 - 1184868879 - ST LUKE'S LAKESIDE HOSPITAL	Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	50.0000	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
d. Component 3 C3-173 - 1659559573 - ST LUKES SUGAR LAND HOSPITAL	Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	5.9140	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
d. Component 3 C3-173 - 1720033947 - ST. DAVID'S GEORGETOWN HOSPITAL	Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	7.3052	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
d. Component 3 C3-173 - 1679528889 - ST. DAVID'S SOUTH AUSTIN MEDICAL CENTER	Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	9.8170	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
d. Component 3 C3-173 - 1154361475 - ST. JOSEPH MEDICAL CENTER	Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	4.9618	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
d. Component 3 C3-173 - 1710314141 - ST. LUKES HOSPITAL AT THE VINTAGE	Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	4.0936	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
d. Component 3 C3-173 - 1942208616 - ST. LUKE'S THE WOODLANDS HOSPITAL	Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	6.9182	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
d. Component 3 C3-173 - 1174533343 - TEXAS HEALTH ARLINGTON MEMORIAL HOSPITAL	Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	8.4456	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
J. Component 3 C3-173 - 1215296884 - FEXAS HEALTH HARRIS METHODIST HOSPITAL ALLIANCE	Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	10.9937	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital

d. Component 3 C3-173 - 1396778064 - TEXAS HEALTH HARRIS METHODIST HOSPITAL CLEBURNE	Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	15.4494	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
d. Component 3 C3-173 - 1336172105 - TEXAS HEALTH HARRIS METHODIST HOSPITAL FORT WORTH	Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	15.9161	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
d. Component 3 C3-173 - 1104845015 - TEXAS HEALTH HARRIS METHODIST HOSPITAL HURST-EULESS-BEDFORD	Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	7.2908	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
d. Component 3 C3-173 - 1417980202 - TEXAS HEALTH HARRIS METHODIST HOSPITAL SOUTHWEST FORT WORTH	Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	6.5542	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
d. Component 3 C3-173 - 1407169196 - TEXAS HEALTH HEART & VASCULAR HOSPITAL ARLINGTON	, ,	National Committee for Quality				12.6 per 100 discharges benchmark and better than	Urban hospital measure; hospitals will report the observed rate of readmissions
d. Component 3 C3-173 - 1104381292 -	Plan All-Cause Readmission (PCR-AD)	Assurance National Committee for Quality	CY 2023	0.0000	CY 2024	12.6 per 100 discharges benchmark and beter than	to the same hospital Urban hospital measure; hospitals will report the observed rate of readmissions
d. Component 3 C3-173 - 1356960132 -	Plan All-Cause Readmission (PCR-AD)	Assurance National Committee for Quality	CY 2023	15.9236	CY 2024	baseline or IOS 5% 12.6 per 100 discharges benchmark and better than	to the same hospital Urban hospital measure; hospitals will report the observed rate of readmissions
TEXAS HEALTH HOSPITAL MANSFIELD d. Component 3 C3-173 - 1033120423 - TEXAS HEALTH HUGULEY HOSPITAL	Plan All-Cause Readmission (PCR-AD)	Assurance National Committee for Quality	CY 2023	3.2609	CY 2024	baseline or IOS 5% 12.6 per 100 discharges benchmark and better than	to the same hospital Urban hospital measure; hospitals will report the observed rate of readmissions
FORT WORTH SOUTH d. Component 3 C3-173 - 1548291883 - TEXAS HEALTH PRESBYTERIAN	Plan All-Cause Readmission (PCR-AD)	Assurance National Committee for Quality	CY 2023	8.3618	CY 2024	baseline or IOS 5% 12.6 per 100 discharges benchmark and better than	to the same hospital Urban hospital measure; hospitals will report the observed rate of readmissions
HOSPITAL ALLEN d. Component 3 C3-173 - 1396779948 - TEXAS HEALTH PRESBYTERIAN	Plan All-Cause Readmission (PCR-AD)	Assurance National Committee for Quality	CY 2023	7.2961	CY 2024	baseline or IOS 5% 12.6 per 100 discharges benchmark and better than	to the same hospital Urban hospital measure; hospitals will report the observed rate of readmissions
HOSPITAL DALLAS d. Component 3 C3-173 - 1003883158 - TEXAS HEALTH PRESBYTERIAN	Plan All-Cause Readmission (PCR-AD)	Assurance	CY 2023	9.6625	CY 2024	baseline or IOS 5% 12.6 per 100 discharges benchmark and better than	to the same hospital Urban hospital measure: hospitals will report the observed rate of readmissions
HOSPITAL DENTON d. Component 3 C3-173 - 1902047376 -	Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	7.8348	CY 2024	baseline or IOS 5% 12.6 per 100 discharges	to the same hospital
TEXAS HEALTH PRESBYTERIAN HOSPITAL FLOWER MOUND d. Component 3 C3-173 - 1457382798 -	Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	6.0172	CY 2024	benchmark and better than baseline or IOS 5% 12.6 per 100 discharges	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
TEXAS HEALTH PRESBYTERIAN HOSPITAL KAUFMAN d. Component 3 C3-173 - 1770514077 -	Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	7.9545	CY 2024	benchmark and better than baseline or IOS 5% 12.6 per 100 discharges	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
TEXAS HEALTH PRESBYTERIAN HOSPITAL PLANO d. Component 3 C3-173 - 1629138029 -	Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	5.3640	CY 2024	benchmark and better than baseline or IOS 5% 12.6 per 100 discharges	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
TEXAS HEALTH PRESBYTERIAN HOSPITAL ROCKWALL	Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	6.8966	CY 2024	benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
d. Component 3 C3-173 - 1134166192 - TEXAS ORTHOPEDIC HOSPITAL	Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	2.4390	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
d. Component 3 C3-173 - 1851390967 - TEXOMA MEDICAL CENTER	Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	11.0406	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
d. Component 3 C3-173 - 1972709970 - THE HOSPITALS OF PROVIDENCE EAST CAMPUS	Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	7.0690	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
d. Component 3 C3-173 - 1003344334 - THE HOSPITALS OF PROVIDENCE HORIZON CITY CAMPUS	Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	1.7241	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
d. Component 3 C3-173 - 1700801909 - THE HOSPITALS OF PROVIDENCE MEMORIAL CAMPUS	Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	7.1006	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
d. Component 3 C3-173 - 1215969787 - THE HOSPITALS OF PROVIDENCE SIERRA CAMPUS	Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	6.7194	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
d. Component 3 C3-173 - 1538522412 - THE HOSPITALS OF PROVIDENCE TRANSMOUNTAIN CAMPUS	Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	5.6962	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
d. Component 3 C3-173 - 1861467573 - THE MEDICAL CENTER OF SOUTHEAST TEXAS LP	Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	5.5016	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
d. Component 3 C3-173 - 1407364847 - TYLER REGIONAL HOSPITAL LLC	Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	12.5486	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
d. Component 3 C3-173 - 1023013448 - UNITED REGIONAL HEATH CARE SYSTEM	,	National Committee for Quality Assurance	CY 2023	7.8740	CY 2024	12.6 per 100 discharges benchmark and better than	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
d. Component 3 C3-173 - 1821011248 - UNIVERSITY HEALTH SYSTEM	Plan All-Cause Readmission (PCR-AD) Plan All-Cause Readmission (PCR-AD)	National Committee for Quality	CY 2023			baseline or IOS 5% 12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
d. Component 3 C3-173 - 1821087164 -	,	Assurance National Committee for Quality		6.3702	CY 2024	12.6 per 100 discharges benchmark and better than	Urban hospital measure; hospitals will report the observed rate of readmissions
UNIVERSITY MEDICAL CENTER d. Component 3 C3-173 - 1316936990 - UNIVERSITY MEDICAL CENTER OF EL	Plan All-Cause Readmission (PCR-AD)	Assurance National Committee for Quality	CY 2023	10.7145	CY 2024	baseline or IOS 5% 12.6 per 100 discharges benchmark and better than	to the same hospital Urban hospital measure; hospitals will report the observed rate of readmissions
PASO d. Component 3 C3-173 - 1154618742 -	Plan All-Cause Readmission (PCR-AD)	Assurance National Committee for Quality	CY 2023	7.7895	CY 2024	baseline or IOS 5% 12.6 per 100 discharges benchmark and better than	to the same hospital Urban hospital measure; hospitals will report the observed rate of readmissions
VALLEY BAPTIST MEDICAL CENTER	Plan All-Cause Readmission (PCR-AD)	Assurance	CY 2023	7.5282	CY 2024	baseline or IOS 5%	to the same hospital

d. Component 3 C3-173 - 1184911877 -						42.C 400 disabases	
VALLEY BAPTIST MEDICAL CENTER - BROWNSVILLE	Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	5.4867	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
d. Component 3 C3-173 - 1043267701 - VALLEY REGIONAL MEDICAL CENTER	Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	3.7445	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
d. Component 3 C3-173 - 1083112023 - WHITE ROCK MEDICAL CENTER	Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	22.9560	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
d. Component 3 C3-173 - 1023065794 - WOMAN'S HOSPITAL OF TEXAS	Plan All-Cause Readmission (PCR-AD)	National Committee for Quality Assurance	CY 2023	0.0000	CY 2024	12.6 per 100 discharges benchmark and better than baseline or IOS 5%	Urban hospital measure; hospitals will report the observed rate of readmissions to the same hospital
e. Component 3 C3-170 - 1669732178 - AD HOSPITAL EAST, LLC	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0000	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1629089966 - ADVENTHEALTH CENTRAL TEXAS	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0000	CY 2024	IOS 10%	Urban and children's hospital measure: Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1093708679 - ASCENSION PROVIDENCE	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0153	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1942795133 - ASCENSION SETON BASTROP	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0174	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1619115383 - ASCENSION SETON HAYS	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0806	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1164526786 - ASCENSION SETON MEDICAL CENTER AUSTIN	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.1244	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1124137054 - ASCENSION SETON NORTHWEST	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0606	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current necounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1154612638 - ASCENSION SETON SMITHVILLE	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0227	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement penod.
e. Component 3 C3-170 - 1750499273 - ASCENSION SETON SOUTHWEST	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0266	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement penod.

e. Component 3 C3-170 - 1578780870 - ASCENSION SETON WILLIAMSON	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0814	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1417465824 - ATHENS HOSPITAL, LLC	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.1227	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1093744187 - BAPTIST HOSPITALS OF SOUTHEAST TEXAS	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0477	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1598744856 - BAPTIST MEDICAL CENTER	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0449	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1669752234 - BAPTIST NEIGHBORHOOD HOSPITAL	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0000	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1669472387 - BAYLOR SCOTT & WHITE ALL SAINTS MEDICAL CENTER - FORT WORTH	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.1022	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1013085083 - BAYLOR SCOTT & WHITE CONTINUING CARE HOSPITAL	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0000	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1407010622 - BAYLOR SCOTT & WHITE EMERGENCY HOSPITAL AUBREY	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0000	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1679903967 - BAYLOR SCOTT & WHITE EMERGENCY HOSPITAL BURLESON	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0000	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1609855139 - BAYLOR SCOTT & WHITE HEART AND VASCULAR HOSPITAL - DALLAS	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.2679	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1902366305 - BAYLOR SCOTT & WHITE MEDICAL CENTER - AUSTIN	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0133	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.

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e. Component 3 C3-170 - 1144781501 - BAYLOR SCOTT & WHITE MEDICAL CENTER - BUDA	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0113	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1801826839 - BAYLOR SCOTT & WHITE MEDICAL CENTER - CENTENNIAL	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0215	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1265772362 - BAYLOR SCOTT & WHITE MEDICAL CENTER - COLLEGE STATION	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0583	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1073511762 - BAYLOR SCOTT & WHITE MEDICAL CENTER - GRAPEVINE	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0547	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1992700983 - BAYLOR SCOTT & WHITE MEDICAL CENTER - IRVING	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0730	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1124305065 - BAYLOR SCOTT & WHITE MEDICAL CENTER - MCKINNEY	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0540	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1346729159 - BAYLOR SCOTT & WHITE MEDICAL CENTER - PFLUGERVILE	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0281	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1649273434 - BAYLOR SCOTT & WHITE MEDICAL CENTER - PLANO	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0468	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1265568638 - BAYLOR SCOTT & WHITE MEDICAL CENTER - ROUND ROCK	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0587	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1477516466 - BAYLOR SCOTT & WHITE MEDICAL CENTER - TEMPLE	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.1044	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1265430177 - BAYLOR SCOTT & WHITE MEDICAL CENTER - WAXAHACHIE	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0636	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.

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e. Component 3 C3-170 - 1891882833 - BAYLOR SCOTT & WHITE MEDICAL CENTER HILLCREST	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0582	CY 2024	IOS 10%	Urban and children's hospital measure: Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1205018439 - BAYLOR SCOTT & WHITE MEDICAL CENTER LAKE POINTE	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0208	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1194753590 - BAYLOR SCOTT & WHITE THE HEART HOSPITAL - DENTON	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.1000	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1962504340 - BAYLOR SCOTT & WHITE THE HEART HOSPITAL - PLANO	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.1754	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1447250253 - BAYLOR UNIVERSITY MEDICAL CENTER	R Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.1083	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1972581940 - BRAZOSPORT MEMORIAL HOSPITAL & BRAZOSPORT REGIONAL HEALTH SYSTEM	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0000	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1114903523 - BRIM HEALTHCARE OF TEXAS LLC	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0000	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1407191984 - BSA HOSPITAL LLC	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0609	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1376662296 - CEDAR PARK REGIONAL MEDICAL CENTER	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0000	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1932573417 - CHI ST. JOSEPH HEALTH REHABILITATION HOSPITAL	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0303	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1184622847 - CHI ST. LUKE'S HEALTH BAYLOR COLLEGE OF MEDICINE MEDICAL CENTER	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0000	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.

e. Component 3 C3-170 - 1124092036 - CHRISTUS GOOD SHEPHERD MEDICAL CENTER	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0415	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1194787218 - CHRISTUS SANTA ROSA HOSPITAL	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0221	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1447883301 - CHRISTUS SANTA ROSA HOSPITAL - SAN MARCOS	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.1096	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1679557888 - CHRISTUS SOUTHEAST TEXAS - ST. ELIZABETH	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0006	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1689641680 - CHRISTUS SPOHN HOSPITAL CORPUS CHRISTI	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0493	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1295736734 - CHRISTUS ST. MICHAEL HEALTH SYSTEM	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0385	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1316911068 - CHRISTUS TRINITY MOTHER FRANCES REHAB HOSPITAL	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	1.0000	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1124052162 - CITIZENS MEDICAL CENTER	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0004	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1508810573 - CORPUS CHRISTI MEDICAL CENTER	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0000	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1972517365 - COVENANT MEDICAL CENTER	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0243	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1861890364 - DALLAS MEDICAL CENTER LLC	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.1110	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.

e. Component 3 C3-170 - 1093810327 - DELL SETON MEDICAL CENTER AT THE UNIVERSITY OF TEXAS	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0786	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1851343909 - DETAR HEALTHCARE SYSTEM	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0000	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1053317362 - DOCTORS HOSPITAL AT RENAISSANCE, LTD	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.1865	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1396731105 - DOCTORS HOSPITAL OF LAREDO	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0000	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1659539567 - ENCOMPASS HEALTH REHABILITATION HOSPITAL OF ABILENE	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.9571	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1548546088 - ENCOMPASS HEALTH REHABILITATION HOSPITAL OF AUSTIN	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.9286	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1245422567 - ENCOMPASS HEALTH REHABILITATION HOSPITAL OF ROUND ROCK	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	1.0000	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1205420916 - ENCOMPASS HEALTH REHABILITATION HOSPITAL OF WACO	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.7500	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1720088123 - GUADALUPE REGIONAL MEDICAL CENTER	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.3656	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1881688976 - HARLINGEN MEDICAL CENTER	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0000	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1205900370 - HARRIS COUNTY HOSPITAL DISTRICT	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.4158	CY 2024	IOS 10%	Urban and children's hospital measure: Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.

e. Component 3 C3-170 - 1063466035 - HCA HOUSTON HEALTHCARE CLEAR LAKE	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0000	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1962455816 - HCA HOUSTON HEALTHCARE CONROE	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0000	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1073043592 - HCA HOUSTON HEALTHCARE MEDICAL CENTER	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0000	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1811942238 - HCA HOUSTON HEALTHCARE NORTH CYPRESS	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0000	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1740450121 - HCA HOUSTON HEALTHCARE NORTHWEST	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0000	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1609275585 - HCA HOUSTON HEALTHCARE PEARLAND	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0000	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1174576698 - HCA HOUSTON HEALTHCARE SOUTHEAST	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0000	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1750819025 - HCA HOUSTON HEALTHCARE TOMBALL	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0000	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1275580938 - HCA HOUSTON HEALTHCARE WEST	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0000	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1528064649 - HENDRICK MEDICAL CENTER	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.9853	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1841562709 - HH KILLEEN HEALTH SYSTEM LLC	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0232	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.

e. Component 3 C3-170 - 1891789772 - HOUSTON METHODIST BAYTOWN HOSPITAL	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0224	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1952723967 - HOUSTON METHODIST CLEAR LAKE HOSPITAL	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0095	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1548387418 - HOUSTON METHODIST HOSPITAL	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0138	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1497871628 - HOUSTON METHODIST SUGAR LAND HOSPITAL	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0194	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1184179194 - HOUSTON METHODIST THE WOODLANDS HOSPITAL	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0193	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1083937593 - HOUSTON METHODIST WEST HOSPITAL	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0270	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1871619254 - HOUSTON METHODIST WILLOWBROOK HOSPITAL	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0201	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1598750721 - HUNT REGIONAL HEALTHCARE	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0000	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1245878990 - HUNTSVILLE MEMORIAL HOSPITAL	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.5464	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1992753222 - JPS HEALTH NETWORK	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.6143	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1861488579 - KNAPP MEDICAL CENTER	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.2569	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.

e. Component 3 C3-170 - 1548232044 - LAREDO MEDICAL CENTER	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0061	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1770536120 - LAS PALMAS MEDICAL CENTER	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0000	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1528026267 - LONGVIEW REGIONAL MEDICAL CENTER	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0000	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1922001775 - LUBBOCK HEART HOSPITAL	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.5556	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1871898478 - MAYHILL HOSPITAL	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0000	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1740273994 - MEDICAL CENTER HOSPITAL	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0000	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1871911016 - MEDICAL CITY ALLIANCE	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0000	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1134172406 - MEDICAL CITY ARLINGTON	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0000	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1689628984 - MEDICAL CITY DALLAS	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0000	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1306897277 - MEDICAL CITY DENTON	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0000	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1659323772 - MEDICAL CITY FORT WORTH	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0000	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.

e. Component 3 C3-170 - 1902857766 - MEDICAL CITY LAS COLINAS	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0000	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1255384533 - MEDICAL CITY LEWISVILLE	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0000	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1437102639 - MEDICAL CITY MCKINNEY	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0000	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1518911833 - MEDICAL CITY NORTH HILLS	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0000	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1699726406 - MEDICAL CITY PLANO	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0000	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1417471467 - MEDICAL CITY WEATHERFORD	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0000	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1730132234 - MEMORIAL HERMANN HEALTH SYSTEM		Texas Health and Human Services Commission	CY 2023	0.0000	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 19826661111 - MEMORIAL HERMANN HOSPITAL	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0000	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1932152337 - MEMORIAL HERMANN KATY HOSPITAL	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0000	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1740233782 - MEMORIAL HERMANN MEMORIAL CITY HOSPITAL	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0000	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1295843787 - MEMORIAL HERMANN NORTHEAST	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0000	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.

e. Component 3 C3-170 - 1043457583 - MEMORIAL HERMANN REHABILITATION HOSPITAL KATY	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0000	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1295788735 - MEMORIAL HERMANN SUGAR LAND HOSPITAL	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0000	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1275592131 - METHODIST CHARLTON MEDICAL CENTER	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.1802	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1528027786 - METHODIST DALLAS MEDICAL CENTER	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.1166	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1124074273 - METHODIST HOSPITAL	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0000	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1659525236 - METHODIST HOSPITAL STONE OAK	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0000	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1689629941 - METHODIST MANSFIELD MEDICAL CENTER	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.1287	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1487271375 - METHODIST MIDLOTHIAN MEDICAL CENTER	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.3550	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1033165501 - METHODIST RICHARDSON MEDICAL CENTER	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0882	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AID if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1568818417 - METHODIST SOUTHLAKE MEDICAL CENTER	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.2143	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result benominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1255325817 - MIDLAND MEMORIAL HOSPITAL	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0000	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.

e. Component 3 C3-170 - 1205833985 - MISSION REGIONAL MEDICAL CENTER	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0049	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1679578439 - MOTHER FRANCES HOSPITAL REGIONAL HEALTH CARE CENTER	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.1098	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1629021845 - NORTH AUSTIN MEDICAL CENTER	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0000	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1467442418 - NORTHWEST TEXAS HEALTHCARE SYSTEM	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0000	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1700883196 - OAKBEND MEDICAL CENTER	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	1.0000	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1801852736 - ODESSA REGIONAL HOSPITAL LP	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0310	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1376588228 - PAM HEALTH WARM SPRINGS REHABILITATION HOSPITAL OF SAN ANTONIO	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0000	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1861882532 - PAM REHABILITATION HOSPITAL OF CLEAR LAKE	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0000	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1003340639 - PAM REHABILITATION HOSPITAL OF CORPUS CHRISTI	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0000	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1932123247 - PARKLAND HEALTH	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0582	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1912948845 - PHYSICIANS SURGICAL HOSPITALS, LLC	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0325	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.

e. Component 3 C3-170 - 1790174860 - PRIME HEALTHCARE SERVICES MESQUITE LLC	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.1155	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1174021695 - REHABILITATION HOSPITAL, LLC	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.4000	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1427472463 - RESOLUTE HEALTH HOSPITAL	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0307	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1619924719 - RIO GRANDE REGIONAL HOSPITAL	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0000	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1649223645 - ROUND ROCK MEDICAL CENTER	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0000	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1184262800 - SANA HEALTHCARE CARROLLTON	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0000	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1992707228 - SHANNON MEDICAL CENTER	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.9495	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1306448899 - SHANNON REHABILITATION HOSPITAL	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.1600	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1770573586 - SOUTH TEXAS HEALTH SYSTEM	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0000	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1942294939 - ST JOSEPH REGIONAL HEALTH CENTER	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0000	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1184868879 - ST LUKE'S LAKESIDE HOSPITAL	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0000	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.

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e. Component 3 C3-170 - 1659559573 - ST LUKES SUGAR LAND HOSPITAL	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0000	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1720033947 - ST. DAVID'S GEORGETOWN HOSPITAL	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0000	CY 2024	IOS 10%	Urban and children's hospital measure: Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1679528889 - ST. DAVID'S SOUTH AUSTIN MEDICAL CENTER	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0000	CY 2024	IOS 10%	Urban and children's hospital measure: Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1154361475 - ST. JOSEPH MEDICAL CENTER	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.1573	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1710314141 - ST. LUKES HOSPITAL AT THE VINTAGE	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0000	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1942208616 - ST. LUKE'S THE WOODLANDS HOSPITAL	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0000	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1174533343 - TEXAS HEALTH ARLINGTON MEMORIAL HOSPITAL	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0636	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1316933609 - TEXAS HEALTH CENTER FOR DIAGNOSTICS AND SURGERY PLANO	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0000	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1215296884 - TEXAS HEALTH HARRIS METHODIST HOSPITAL ALLIANCE	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0501	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1396778064 - TEXAS HEALTH HARRIS METHODIST HOSPITAL CLEBURNE	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0204	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1336172105 - TEXAS HEALTH HARRIS METHODIST HOSPITAL FORT WORTH	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.1297	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.

e. Component 3 C3-170 - 1104845015 - TEXAS HEAL TH HARRIS METHODIST HOSPITAL HURST-EULESS-BEDFORD	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0636	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1629064928 - TEXAS HEAL TH HARRIS METHODIST HOSPITAL SOUTHLAKE	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0000	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1417980202 - TEXAS HEALTH HARRIS METHODIST HOSPITAL SOUTHWEST FORT WORTH	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0578	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1407169196 - TEXAS HEALTH HEART & VASCULAR HOSPITAL ARLINGTON	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.3488	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1104381292 - TEXAS HEAL TH HOSPITAL FRISCO	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.1096	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1356960132 - TEXAS HEALTH HOSPITAL MANSFIELD	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0000	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1033120423 - TEXAS HEALTH HUGULEY HOSPITAL FORT WORTH SOUTH	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0000	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1548291883 - TEXAS HEALTH PRESBYTERIAN HOSPITAL ALLEN	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0412	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1396779948 - TEXAS HEALTH PRESBYTERIAN HOSPITAL DALLAS	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0713	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1003883158 - TEXAS HEAL TH PRESBYTERIAN HOSPITAL DENTON	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0257	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1902047376 - TEXAS HEALTH PRESBYTERIAN HOSPITAL FLOWER MOUND	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0897	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.

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e. Component 3 C3-170 - 1457382798 - TEXAS HEALTH PRESBYTERIAN HOSPITAL KAUFMAN	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0063	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1770514077 - TEXAS HEALTH PRESBYTERIAN HOSPITAL PLANO	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0500	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1629138029 - TEXAS HEALTH PRESBYTERIAN HOSPITAL ROCKWALL	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0326	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1134166192 - TEXAS ORTHOPEDIC HOSPITAL	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0000	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1851390967 - TEXOMA MEDICAL CENTER	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0000	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1972709970 - THE HOSPITALS OF PROVIDENCE EAST CAMPUS	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0433	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1003344334 - THE HOSPITALS OF PROVIDENCE HORIZON CITY CAMPUS	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0000	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1700801909 - THE HOSPITALS OF PROVIDENCE MEMORIAL CAMPUS	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0280	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1215969787 - THE HOSPITALS OF PROVIDENCE SIERRA CAMPUS	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.1381	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1538522412 - THE HOSPITALS OF PROVIDENCE TRANSMOUNTAIN CAMPUS	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0505	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1861467573 - THE MEDICAL CENTER OF SOUTHEAST TEXAS LP	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.2315	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.

e. Component 3 C3-170 - 1710985098 -		Texas Health and Human					Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result Denominator - All
TIRR MEMORIAL HERMANN	Food Insecurity Screening and Follow-up Plan	Services Commission	CY 2023	0.0000	CY 2024	IOS 10%	attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1407364847 - TYLER REGIONAL HOSPITAL LLC	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.2790	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1023013448 - UNITED REGIONAL HEATH CARE SYSTEM	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.2044	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1821011248 - UNIVERSITY HEALTH SYSTEM	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.2162	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1821087164 - UNIVERSITY MEDICAL CENTER	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.3864	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1316936990 - UNIVERSITY MEDICAL CENTER OF EL PASO	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0000	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1154618742 - VALLEY BAPTIST MEDICAL CENTER	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0168	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1184911877 - VALLEY BAPTIST MEDICAL CENTER - BROWNSVILLE	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0394	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1043267701 - VALLEY REGIONAL MEDICAL CENTER	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0000	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
e. Component 3 C3-170 - 1023065794 -	Food Insecurity Screening and Follow-up Plan	Texas Health and Human	CV 2022	0.0000	CV 2024	100 400	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
WOMAN'S HOSPITAL OF TEXAS f. Component 3 C3-171 - 1669732178 - AD	y	Services Commission	CY 2023	0.0000	CY 2024	IOS 10%	
HOSPITAL EAST, LLC f. Component 3 C3-171 - 1629089966 -	IMM-2 Influenza Immunization	TJC	CY 2023	0.0000	CY 2024	IOS 10%	Urban and children's hospital measure
ADVENTHEALTH CENTRAL TEXAS f. Component 3 C3-171 - 1093708679 -	IMM-2 Influenza Immunization	TJC	CY 2023	0.0185	CY 2024	IOS 10%	Urban and children's hospital measure
ASCENSION PROVIDENCE f. Component 3 C3-171 - 1942795133 -	IMM-2 Influenza Immunization	TJC	CY 2023	0.9381	CY 2024	IOS 10%	Urban and children's hospital measure
ASCENSION SETON BASTROP f. Component 3 C3-171 - 1619115383 -	IMM-2 Influenza Immunization	TJC	CY 2023	0.5000	CY 2024	IOS 10%	Urban and children's hospital measure
ASCENSION SETON HAYS	IMM-2 Influenza Immunization	TJC	CY 2023	0.9097	CY 2024	IOS 10%	Urban and children's hospital measure

f. Component 3 C3-171 - 1164526786 - ASCENSION SETON MEDICAL CENTER							
AUSTIN f. Component 3 C3-171 - 1124137054 -	IMM-2 Influenza Immunization	TJC	CY 2023	0.8634	CY 2024	IOS 10%	Urban and children's hospital measure
ASCENSION SETON NORTHWEST f. Component 3 C3-171 - 1154612638 -	IMM-2 Influenza Immunization	TJC	CY 2023	0.8563	CY 2024	IOS 10%	Urban and children's hospital measure
ASCENSION SETON SMITHVILLE	IMM-2 Influenza Immunization	TJC	CY 2023	0.6667	CY 2024	IOS 10%	Urban and children's hospital measure
f. Component 3 C3-171 - 1750499273 - ASCENSION SETON SOUTHWEST	IMM-2 Influenza Immunization	TJC	CY 2023	0.7143	CY 2024	IOS 10%	Urban and children's hospital measure
f. Component 3 C3-171 - 1578780870 - ASCENSION SETON WILLIAMSON	IMM-2 Influenza Immunization	TJC	CY 2023	0.7565	CY 2024	IOS 10%	Urban and children's hospital measure
f. Component 3 C3-171 - 1417465824 - ATHENS HOSPITAL, LLC	IMM-2 Influenza Immunization	TJC	CY 2023	0.7962	CY 2024	IOS 10%	Urban and children's hospital measure
f. Component 3 C3-171 - 1093744187 - BAPTIST HOSPITALS OF SOUTHEAST TEXAS	IMM-2 Influenza Immunization	TJC	CY 2023	0.8993	CY 2024	IOS 10%	Urban and children's hospital measure
f. Component 3 C3-171 - 1598744856 - BAPTIST MEDICAL CENTER	IMM-2 Influenza Immunization	TJC	CY 2023	0.8850	CY 2024	IOS 10%	Urban and children's hospital measure
f. Component 3 C3-171 - 1669752234 - BAPTIST NEIGHBORHOOD HOSPITAL	IMM-2 Influenza Immunization	TJC	CY 2023	0.9020	CY 2024	IOS 10%	Urban and children's hospital measure
f. Component 3 C3-171 - 1669472387 - BAYLOR SCOTT & WHITE ALL SAINTS MEDICAL CENTER - FORT WORTH	IMM-2 Influenza Immunization	TJC	CY 2023	0.9889	CY 2024	IOS 10%	Urban and children's hospital measure
f. Component 3 C3-171 - 1407010622 - BAYLOR SCOTT & WHITE EMERGENCY	WWY 2 WINGOVER WINNERSON	100	0.1 2020	0.0000	012021	100 10%	orban and annaron o norpha medicare
HOSPITAL AUBREY	IMM-2 Influenza Immunization	TJC	CY 2023	1.0000	CY 2024	IOS 10%	Urban and children's hospital measure
f. Component 3 C3-171 - 1679903967 - BAYLOR SCOTT & WHITE EMERGENCY HOSPITAL BURLESON	IMM-2 Influenza Immunization	TJC	CY 2023	0.9500	CY 2024	IOS 10%	Urban and children's hospital measure
f. Component 3 C3-171 - 1609855139 - BAYLOR SCOTT & WHITE HEART AND VASCULAR HOSPITAL - DALLAS	IMM-2 Influenza Immunization	TJC	CY 2023	1.0000	CY 2024	IOS 10%	Urban and children's hospital measure
f. Component 3 C3-171 - 1902366305 - BAYLOR SCOTT & WHITE MEDICAL CENTER - AUSTIN	IMM-2 Influenza Immunization	TJC	CY 2023	1.0000	CY 2024	IOS 10%	Urban and children's hospital measure
f. Component 3 C3-171 - 1144781501 - BAYLOR SCOTT & WHITE MEDICAL CENTER - BUDA	IMM-2 Influenza Immunization	TJC	CY 2023	1.0000	CY 2024	IOS 10%	Urban and children's hospital measure
f. Component 3 C3-171 - 1801826839 - BAYLOR SCOTT & WHITE MEDICAL CENTER - CENTENNIAL	IMM-2 Influenza Immunization	TJC	CY 2023	1.0000	CY 2024	IOS 10%	Urban and children's hospital measure
f. Component 3 C3-171 - 1265772362 - BAYLOR SCOTT & WHITE MEDICAL CENTER - COLLEGE STATION	IMM-2 Influenza Immunization	TJC	CY 2023	0.9942	CY 2024	IOS 10%	Urban and children's hospital measure
f. Component 3 C3-171 - 1073511762 - BAYLOR SCOTT & WHITE MEDICAL CENTER - GRAPEVINE	IMM-2 Influenza Immunization	TJC	CY 2023	1.0000	CY 2024	IOS 10%	Urban and children's hospital measure
f. Component 3 C3-171 - 1992700983 - BAYLOR SCOTT & WHITE MEDICAL CENTER - IRVING	IMM-2 Influenza Immunization	TJC	CY 2023	0.9949	CY 2024	IOS 10%	Urban and children's hospital measure
f. Component 3 C3-171 - 1124305065 - BAYLOR SCOTT & WHITE MEDICAL CENTER - MCKINNEY	IMM-2 Influenza Immunization	TJC	CY 2023	0.9948	CY 2024	IOS 10%	Urban and children's hospital measure
f. Component 3 C3-171 - 1346729159 - BAYLOR SCOTT & WHITE MEDICAL	IMM 2 Influence Immunication	TJC	CY 2023	1.0000	CV 2024	IOS 109/	Liston and shildren's benefital magazire
CENTER - PFLUGERVILLE f. Component 3 C3-171 - 1649273434 - BAYLOR SCOTT & WHITE MEDICAL	IMM-2 Influenza Immunization				CY 2024	IOS 10%	Urban and children's hospital measure
CENTER - PLANO f. Component 3 C3-171 - 1265568638 - BAYLOR SCOTT & WHITE MEDICAL	IMM-2 Influenza Immunization	TJC	CY 2023	1.0000	CY 2024	IOS 10%	Urban and children's hospital measure
CENTER - ROUND ROCK f. Component 3 C3-171 - 1477516466 - BAYLOR SCOTT & WHITE MEDICAL	IMM-2 Influenza Immunization	TJC	CY 2023	0.9919	CY 2024	IOS 10%	Urban and children's hospital measure
CENTER - TEMPLE f. Component 3 C3-171 - 1265430177 - BAYLOR SCOTT & WHITE MEDICAL	IMM-2 Influenza Immunization	TJC	CY 2023	0.9491	CY 2024	IOS 10%	Urban and children's hospital measure
CENTER - WAXAHACHIE f. Component 3 C3-171 - 1891882833 - BAYLOR SCOTT & WHITE MEDICAL	IMM-2 Influenza Immunization	TJC	CY 2023	0.9931	CY 2024	IOS 10%	Urban and children's hospital measure
CENTER HILLCREST f. Component 3 C3-171 - 1205018439 - BAYLOR SCOTT & WHITE MEDICAL	IMM-2 Influenza Immunization	TJC	CY 2023	0.9877	CY 2024	IOS 10%	Urban and children's hospital measure
CENTER LAKE POINTE f. Component 3 C3-171 - 1194753590 - BAYLOR SCOTT & WHITE THE HEART	IMM-2 Influenza Immunization	TJC	CY 2023	0.9952	CY 2024	IOS 10%	Urban and children's hospital measure
HOSPITAL - DENTON f. Component 3 C3-171 - 1962504340 -	IMM-2 Influenza Immunization	TJC	CY 2023	1.0000	CY 2024	IOS 10%	Urban and children's hospital measure
BAYLOR SCOTT & WHITE THE HEART HOSPITAL - PLANO	IMM-2 Influenza Immunization	TJC	CY 2023	1.0000	CY 2024	IOS 10%	Urban and children's hospital measure
f. Component 3 C3-171 - 1447250253 - BAYLOR UNIVERSITY MEDICAL CENTER	IMM-2 Influenza Immunization	TJC	CY 2023	0.9825	CY 2024	IOS 10%	Urban and children's hospital measure
f. Component 3 C3-171 - 1972581940 - BRAZOSPORT MEMORIAL HOSPITAL & BRAZOSPORT REGIONAL HEALTH SYSTEM	IMM-2 Influenza Immunization	TJC	CY 2023	0.8736	CY 2024	IOS 10%	Urban and children's hospital measure

f. Component 3 C3-171 - 1114903523 -							
BRIM HEALTHCARE OF TEXAS LLC	IMM-2 Influenza Immunization	TJC	CY 2023	0.9836	CY 2024	IOS 10%	Urban and children's hospital measure
. Component 3 C3-171 - 1407191984 - 3SA HOSPITAL LLC	IMM-2 Influenza Immunization	TJC	CY 2023	0.6963	CY 2024	IOS 10%	Urban and children's hospital measure
. Component 3 C3-171 - 1376662296 - CEDAR PARK REGIONAL MEDICAL CENTER	IMM-2 Influenza Immunization	TJC	CY 2023	0.0637	CY 2024	IOS 10%	Urban and children's hospital measure
Component 3 C3-171 - 1932573417 - CHI ST. JOSEPH HEALTH REHABILITATION HOSPITAL	IMM-2 Influenza Immunization	TJC	CY 2023	1.0000	CY 2024	IOS 10%	Urban and children's hospital measure
Component 3 C3-171 - 1184622847 - CHI ST. LUKE'S HEALTH BAYLOR COLLEGE OF MEDICINE MEDICAL CENTER	IMM-2 Influenza Immunization	TJC	CY 2023	0.4799	CY 2024	IOS 10%	Urban and children's hospital measure
. Component 3 C3-171 - 1124092036 - CHRISTUS GOOD SHEPHERD MEDICAL CENTER	IMM-2 Influenza Immunization	TJC	CY 2023	0.0484	CY 2024	IOS 10%	Urban and children's hospital measure
. Component 3 C3-171 - 1194787218 - CHRISTUS SANTA ROSA HOSPITAL	IMM-2 Influenza Immunization	TJC	CY 2023	0.2218	CY 2024	IOS 10%	Urban and children's hospital measure
COMPONENT 3 C3-171 - 1447883301 - CHRISTUS SANTA ROSA HOSPITAL - SAN MARCOS	IMM-2 Influenza Immunization	TJC	CY 2023	0.0952	CY 2024	IOS 10%	Urban and children's hospital measure
. Component 3 C3-171 - 1679557888 - CHRISTUS SOUTHEAST TEXAS - ST. ELIZABETH	IMM-2 Influenza Immunization	TJC	CY 2023	0.0886	CY 2024	IOS 10%	Urban and children's hospital measure
Component 3 C3-171 - 1689641680 - CHRISTUS SPOHN HOSPITAL CORPUS CHRISTI	IMM-2 Influenza Immunization	TJC	CY 2023	0.3336	CY 2024	IOS 10%	Urban and children's hospital measure
. Component 3 C3-171 - 1295736734 - CHRISTUS ST. MICHAEL HEALTH SYSTEM	IMM-2 Influenza Immunization	TJC	CY 2023	0.1486	CY 2024	IOS 10%	Urban and children's hospital measure
f. Component 3 C3-171 - 1316911068 - CHRISTUS TRINITY MOTHER FRANCES REHAB HOSPITAL	IMM-2 Influenza Immunization	TJC	CY 2023	1.0000	CY 2024	IOS 10%	Urban and children's hospital measure
Component 3 C3-171 - 1124052162 - CITIZENS MEDICAL CENTER	IMM-2 Influenza Immunization	TJC	CY 2023	0.9003	CY 2024	IOS 10%	Urban and children's hospital measure
CORPUS CHRISTI MEDICAL CENTER	IMM-2 Influenza Immunization	TJC	CY 2023	0.8726	CY 2024	IOS 10%	Urban and children's hospital measure
COMPONENT 3 C3-171 - 1972517365 - COVENANT MEDICAL CENTER	IMM-2 Influenza Immunization	TJC	CY 2023	0.1366	CY 2024	IOS 10%	Urban and children's hospital measure
. Component 3 C3-171 - 1861690364 - DALLAS MEDICAL CENTER LLC	IMM-2 Influenza Immunization	TJC	CY 2023	0.4044	CY 2024	IOS 10%	Urban and children's hospital measure
Component 3 C3-171 - 1093810327 - DELL SETON MEDICAL CENTER AT THE JNIVERSITY OF TEXAS	IMM-2 Influenza Immunization	TJC	CY 2023	0.7115	CY 2024	IOS 10%	Urban and children's hospital measure
. Component 3 C3-171 - 1851343909 - DETAR HEALTHCARE SYSTEM	IMM-2 Influenza Immunization	TJC	CY 2023	0.1354	CY 2024	IOS 10%	Urban and children's hospital measure
Component 3 C3-171 - 1053317362 - DOCTORS HOSPITAL AT RENAISSANCE, LTD	IMM-2 Influenza Immunization	TJC	CY 2023	0.9919	CY 2024	IOS 10%	Urban and children's hospital measure
Component 3 C3-171 - 1396731105 - DOCTORS HOSPITAL OF LAREDO	IMM-2 Influenza Immunization	TJC	CY 2023	0.8133	CY 2024	IOS 10%	Urban and children's hospital measure
C. Component 3 C3-171 - 1659539567 - ENCOMPASS HEALTH REHABILITATION HOSPITAL OF ABILENE	IMM-2 Influenza Immunization	TJC	CY 2023	1.0000	CY 2024	IOS 10%	Urban and children's hospital measure
f. Component 3 C3-171 - 1548546088 -	INIV-2 IIIIdefiza IIIIIIdilizatori	100	012020	1.0000	01 2024	100 10%	orban and children's nespital measure
ENCOMPASS HEALTH REHABILITATION HOSPITAL OF AUSTIN	IMM-2 Influenza Immunization	TJC	CY 2023	0.8000	CY 2024	IOS 10%	Urban and children's hospital measure
f. Component 3 C3-171 - 1245422567 - ENCOMPASS HEALTH REHABILITATION HOSPITAL OF ROUND ROCK	IMM-2 Influenza Immunization	TJC	CY 2023	0.7857	CY 2024	IOS 10%	Urban and children's hospital measure
f. Component 3 C3-171 - 1720088123 - GUADALUPE REGIONAL MEDICAL CENTER	IMM-2 Influenza Immunization	TJC	CY 2023	0.7845	CY 2024	IOS 10%	Urban and children's hospital measure
Component 3 C3-171 - 1881688976 - HARLINGEN MEDICAL CENTER	IMM-2 Influenza Immunization	TJC	CY 2023	0.9463	CY 2024	IOS 10%	Urban and children's hospital measure
. Component 3 C3-171 - 1205900370 - HARRIS COUNTY HOSPITAL DISTRICT	IMM-2 Influenza Immunization	TJC	CY 2023	0.3769	CY 2024	IOS 10%	Urban and children's hospital measure
Component 3 C3-171 - 1063466035 - HCA HOUSTON HEALTHCARE CLEAR LAKE	IMM-2 Influenza Immunization	TJC	CY 2023	0.8284	CY 2024	IOS 10%	Urban and children's hospital measure
. Component 3 C3-171 - 1962455816 - HCA HOUSTON HEALTHCARE CONROE	IMM-2 Influenza Immunization	TJC	CY 2023	0.6667	CY 2024	IOS 10%	Urban and children's hospital measure
Component 3 C3-171 - 1073043592 - HCA HOUSTON HEALTHCARE MEDICAL CENTER	IMM-2 Influenza Immunization	TJC	CY 2023	0.6995	CY 2024	IOS 10%	Urban and children's hospital measure
f. Component 3 C3-171 - 1811942238 - HCA HOUSTON HEALTHCARE NORTH CYPRESS	IMM-2 Influenza Immunization	TJC	CY 2023	0.7494	CY 2024	IOS 10%	Urban and children's hospital measure
Component 3 C3-171 - 1740450121 - HCA HOUSTON HEALTHCARE NORTHWEST	IMM-2 Influenza Immunization	TJC	CY 2023	0.7696	CY 2024	IOS 10%	Urban and children's hospital measure

f. Component 3 C3-171 - 1609275585 - HCA HOUSTON HEALTHCARE	IMM 0 leftures lessuristics	TIO	CV 2022	0.0050	OV 2024	100.400/	
PEARLAND f. Component 3 C3-171 - 1174576698 -	IMM-2 Influenza Immunization	TJC	CY 2023	0.8856	CY 2024	IOS 10%	Urban and children's hospital measure
HCA HOUSTON HEALTHCARE SOUTHEAST	IMM-2 Influenza Immunization	TJC	CY 2023	0.8536	CY 2024	IOS 10%	Urban and children's hospital measure
. Component 3 C3-171 - 1750819025 - HCA HOUSTON HEALTHCARE TOMBALL	IMM-2 Influenza Immunization	TJC	CY 2023	0.7441	CY 2024	IOS 10%	Urban and children's hospital measure
. Component 3 C3-171 - 1275580938 - HCA HOUSTON HEALTHCARE WEST	IMM-2 Influenza Immunization	TJC	CY 2023	0.5155	CY 2024	IOS 10%	Urban and children's hospital measure
. Component 3 C3-171 - 1528064649 - HENDRICK MEDICAL CENTER	IMM-2 Influenza Immunization	TJC	CY 2023	0.9822	CY 2024	IOS 10%	Urban and children's hospital measure
Component 3 C3-171 - 1841562709 - HH	IMM-2 Influenza Immunization	TJC	CY 2023	0.7818		IOS 10%	·
COMPONENT STSTEM LLC 1. COMPONENT STSTEM LLC	IMM-2 Influenza Immunization	TJC	CY 2023	0.7818	CY 2024 CY 2024	IOS 10%	Urban and children's hospital measure Urban and children's hospital measure
Component 3 C3-171 - 1952723967 - IOUSTON METHODIST CLEAR LAKE IOSPITAL	IMM-2 Influenza Immunization	TJC	CY 2023	1.0000	CY 2024	IOS 10%	
Component 3 C3-171 - 1548387418 - IOUSTON METHODIST HOSPITAL	IMM-2 Influenza Immunization	TJC	CY 2023	0.9775	CY 2024	IOS 10%	Urban and children's hospital measure Urban and children's hospital measure
Component 3 C3-171 - 1497871628 - HOUSTON METHODIST SUGAR LAND HOSPITAL	IMM-2 Influenza Immunization	TJC	CY 2023	0.9841	CY 2024	IOS 10%	Urban and children's hospital measure
Component 3 C3-171 - 1184179194 - HOUSTON METHODIST THE VOODLANDS HOSPITAL	IMM-2 Influenza Immunization	TJC	CY 2023	1.0000	CY 2024	IOS 10%	Urban and children's hospital measure
Component 3 C3-171 - 1083937593 - HOUSTON METHODIST WEST HOSPITAL	IMM-2 Influenza Immunization	TJC	CY 2023	0.9794	CY 2024	IOS 10%	Urban and children's hospital measure
Component 3 C3-171 - 1871619254 - HOUSTON METHODIST WILLOWBROOK HOSPITAL	IMM-2 Influenza Immunization	TJC	CY 2023	0.9947	CY 2024	IOS 10%	Urban and children's hospital measure
Component 3 C3-171 - 1598750721 - HUNT REGIONAL HEALTHCARE	IMM-2 Influenza Immunization	TJC	CY 2023	0.6107	CY 2024	IOS 10%	Urban and children's hospital measure
Component 3 C3-171 - 1245878990 - IUNTSVILLE MEMORIAL HOSPITAL	IMM-2 Influenza Immunization	TJC	CY 2023	0.7375	CY 2024	IOS 10%	Urban and children's hospital measure
. Component 3 C3-171 - 1992753222 - PS HEALTH NETWORK	IMM-2 Influenza Immunization	TJC	CY 2023	0.8496	CY 2024	IOS 10%	Urban and children's hospital measure
Component 3 C3-171 - 1861488579 - NAPP MEDICAL CENTER	IMM-2 Influenza Immunization	TJC	CY 2023	0.4899	CY 2024	IOS 10%	Urban and children's hospital measure
. Component 3 C3-171 - 1548232044 - AREDO MEDICAL CENTER	IMM-2 Influenza Immunization	TJC	CY 2023	0.6261	CY 2024	IOS 10%	Urban and children's hospital measure
Component 3 C3-171 - 1770536120 - AS PALMAS MEDICAL CENTER	IMM-2 Influenza Immunization	TJC	CY 2023	0.8899	CY 2024	IOS 10%	Urban and children's hospital measure
Component 3 C3-171 - 1528026267 - ONGVIEW REGIONAL MEDICAL ENTER	IMM-2 Influenza Immunization	TJC	CY 2023	0.2087	CY 2024	IOS 10%	Urban and children's hospital measure
Component 3 C3-171 - 1922001775 - LUBBOCK HEART HOSPITAL	IMM-2 Influenza Immunization	TJC	CY 2023	1.0000	CY 2024	IOS 10%	Urban and children's hospital measure
Component 3 C3-171 - 1740273994 - IEDICAL CENTER HOSPITAL	IMM-2 Influenza Immunization	TJC	CY 2023	0.8730	CY 2024	IOS 10%	Urban and children's hospital measure
. Component 3 C3-171 - 1871911016 - MEDICAL CITY ALLIANCE	IMM-2 Influenza Immunization	TJC	CY 2023	0.8730	CY 2024	IOS 10%	Urban and children's hospital measure
. Component 3 C3-171 - 1134172406 - MEDICAL CITY ARLINGTON	IMM-2 Influenza Immunization	TJC	CY 2023	0.9095	CY 2024	IOS 10%	Urban and children's hospital measure
. Component 3 C3-171 - 1689628984 - MEDICAL CITY DALLAS	IMM-2 Influenza Immunization	TJC	CY 2023	0.8396	CY 2024	IOS 10%	Urban and children's hospital measure
Component 3 C3-171 - 1306897277 - MEDICAL CITY DENTON	IMM-2 Influenza Immunization	TJC	CY 2023	0.8208	CY 2024	IOS 10%	Urban and children's hospital measure
Component 3 C3-171 - 1659323772 - MEDICAL CITY FORT WORTH	IMM-2 Influenza Immunization	TJC	CY 2023	0.9093	CY 2024	IOS 10%	Urban and children's hospital measure
. Component 3 C3-171 - 1902857766 - MEDICAL CITY LAS COLINAS	IMM-2 Influenza Immunization	TJC	CY 2023	0.6335	CY 2024	IOS 10%	Urban and children's hospital measure
. Component 3 C3-171 - 1255384533 - MEDICAL CITY LEWISVILLE	IMM-2 Influenza Immunization	TJC	CY 2023	0.8662	CY 2024	IOS 10%	Urban and children's hospital measure
. Component 3 C3-171 - 1437102639 - MEDICAL CITY MCKINNEY	IMM-2 Influenza Immunization	TJC	CY 2023	0.8955	CY 2024	IOS 10%	Urban and children's hospital measure
. Component 3 C3-171 - 1518911833 - MEDICAL CITY NORTH HILLS . Component 3 C3-171 - 1699726406 -	IMM-2 Influenza Immunization	TJC	CY 2023	0.8734	CY 2024	IOS 10%	Urban and children's hospital measure
MEDICAL CITY PLANO	IMM-2 Influenza Immunization	TJC	CY 2023	0.8411	CY 2024	IOS 10%	Urban and children's hospital measure
. Component 3 C3-171 - 1417471467 - MEDICAL CITY WEATHERFORD	IMM-2 Influenza Immunization	TJC	CY 2023	0.9734	CY 2024	IOS 10%	Urban and children's hospital measure
Component 3 C3-171 - 1730132234 - MEMORIAL HERMANN HEALTH SYSTEM Component 3 C3-171 - 1982666111 -	IMM-2 Influenza Immunization	TJC	CY 2023	0.7626	CY 2024	IOS 10%	Urban and children's hospital measure
MEMORIAL HERMANN HOSPITAL	IMM-2 Influenza Immunization	TJC	CY 2023	0.5983	CY 2024	IOS 10%	Urban and children's hospital measure
. Component 3 C3-171 - 1932152337 - MEMORIAL HERMANN KATY HOSPITAL	IMM-2 Influenza Immunization	TJC	CY 2023	0.7550	CY 2024	IOS 10%	Urban and children's hospital measure
. Component 3 C3-171 - 1740233782 - MEMORIAL HERMANN MEMORIAL CITY HOSPITAL	IMM-2 Influenza Immunization	TJC	CY 2023	0.7487	CY 2024	IOS 10%	Urban and children's hospital measure

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f. Component 3 C3-171 - 1295843787 - MEMORIAL HERMANN NORTHEAST	IMM-2 Influenza Immunization	TJC	CY 2023	0.5781	CY 2024	IOS 10%	Urban and children's hospital measure
f. Component 3 C3-171 - 1043457583 - MEMORIAL HERMANN REHABILITATION HOSPITAL KATY	IMM-2 Influenza Immunization	TJC	CY 2023	1.0000	CY 2024	IOS 10%	Urban and children's hospital measure
f. Component 3 C3-171 - 1295788735 - MEMORIAL HERMANN SUGAR LAND HOSPITAL	IMM-2 Influenza Immunization	TJC	CY 2023	0.8362	CY 2024	IOS 10%	Urban and children's hospital measure
f. Component 3 C3-171 - 1275592131 - METHODIST CHARLTON MEDICAL CENTER	IMM-2 Influenza Immunization	TJC	CY 2023	0.0942	CY 2024	IOS 10%	Urban and children's hospital measure
f. Component 3 C3-171 - 1528027786 - METHODIST DALLAS MEDICAL CENTER	IMM-2 Influenza Immunization	TJC	CY 2023	0.2857	CY 2024	IOS 10%	Urban and children's hospital measure
f. Component 3 C3-171 - 1124074273 - METHODIST HOSPITAL	IMM-2 Influenza Immunization	TJC	CY 2023	0.7935	CY 2024	IOS 10%	Urban and children's hospital measure
f. Component 3 C3-171 - 1659525236 - METHODIST HOSPITAL STONE OAK	IMM-2 Influenza Immunization	TJC	CY 2023	0.9157	CY 2024	IOS 10%	Urban and children's hospital measure
f. Component 3 C3-171 - 1689629941 - METHODIST MANSFIELD MEDICAL CENTER	IMM-2 Influenza Immunization	TJC	CY 2023	0.0428	CY 2024	IOS 10%	Urban and children's hospital measure
f. Component 3 C3-171 - 1487271375 - METHODIST MIDLOTHIAN MEDICAL CENTER	IMM-2 Influenza Immunization	TJC	CY 2023	0.2727	CY 2024	IOS 10%	Urban and children's hospital measure
f. Component 3 C3-171 - 1033165501 - METHODIST RICHARDSON MEDICAL CENTER	IMM-2 Influenza Immunization	TJC	CY 2023	0.0149	CY 2024	IOS 10%	Urban and children's hospital measure
f. Component 3 C3-171 - 1568818417 - METHODIST SOUTHLAKE MEDICAL CENTER	IMM-2 Influenza Immunization	TJC	CY 2023	0.0000	CY 2024	IOS 10%	Urban and children's hospital measure
f. Component 3 C3-171 - 1255325817 - MIDLAND MEMORIAL HOSPITAL	IMM-2 Influenza Immunization	TJC	CY 2023	0.7644	CY 2024	IOS 10%	Urban and children's hospital measure
f. Component 3 C3-171 - 1205833985 - MISSION REGIONAL MEDICAL CENTER	IMM-2 Influenza Immunization	TJC	CY 2023	0.5620	CY 2024	IOS 10%	Urban and children's hospital measure
f. Component 3 C3-171 - 1679578439 - MOTHER FRANCES HOSPITAL REGIONAL HEALTH CARE CENTER	IMM-2 Influenza Immunization	TJC	CY 2023	0.1104	CY 2024	IOS 10%	Urban and children's hospital measure
f. Component 3 C3-171 - 1629021845 - NORTH AUSTIN MEDICAL CENTER	IMM-2 Influenza Immunization	TJC	CY 2023	0.6777	CY 2024	IOS 10%	Urban and children's hospital measure
f. Component 3 C3-171 - 1467442418 - NORTHWEST TEXAS HEALTHCARE SYSTEM	IMM-2 Influenza Immunization	TJC	CY 2023	0.9239	CY 2024	IOS 10%	Urban and children's hospital measure
f. Component 3 C3-171 - 1700883196 - OAKBEND MEDICAL CENTER	IMM-2 Influenza Immunization	TJC	CY 2023	1.0000	CY 2024	IOS 10%	Urban and children's hospital measure
f. Component 3 C3-171 - 1801852736 - ODESSA REGIONAL HOSPITAL LP	IMM-2 Influenza Immunization	TJC	CY 2023	0.9866	CY 2024	IOS 10%	Urban and children's hospital measure
f. Component 3 C3-171 - 1376588228 - PAM HEALTH WARM SPRINGS REHABILITATION HOSPITAL OF SAN ANTONIO	IMM-2 Influenza Immunization	TJC	CY 2023	0.0305	CY 2024	IOS 10%	Urban and children's hospital measure
f. Component 3 C3-171 - 1861882532 - PAM REHABILITATION HOSPITAL OF CLEAR LAKE	IMM-2 Influenza Immunization	TJC	CY 2023	1.0000	CY 2024	IOS 10%	Urban and children's hospital measure
f. Component 3 C3-171 - 1003340639 - PAM REHABILITATION HOSPITAL OF CORPUS CHRISTI	IMM-2 Influenza Immunization	TJC	CY 2023	0.0094	CY 2024	IOS 10%	Urban and children's hospital measure
f. Component 3 C3-171 - 1932123247 - PARKLAND HEALTH	IMM-2 Influenza Immunization	TJC	CY 2023	0.5835	CY 2024	IOS 10%	Urban and children's hospital measure
f. Component 3 C3-171 - 1790174860 - PRIME HEALTHCARE SERVICES MESQUITE LLC	IMM-2 Influenza Immunization	TJC	CY 2023	0.5529	CY 2024	IOS 10%	Urban and children's hospital measure
f. Component 3 C3-171 - 1174021695 - REHABILITATION HOSPITAL, LLC	IMM-2 Influenza Immunization	TJC	CY 2023	0.5000	CY 2024	IOS 10%	Urban and children's hospital measure
f. Component 3 C3-171 - 1427472463 - RESOLUTE HEALTH HOSPITAL	IMM-2 Influenza Immunization	TJC	CY 2023	0.7384	CY 2024	IOS 10%	Urban and children's hospital measure
f. Component 3 C3-171 - 1619924719 - RIO GRANDE REGIONAL HOSPITAL	IMM-2 Influenza Immunization	TJC	CY 2023	0.9172	CY 2024	IOS 10%	Urban and children's hospital measure
f. Component 3 C3-171 - 1649223645 - ROUND ROCK MEDICAL CENTER	IMM-2 Influenza Immunization	TJC	CY 2023	0.7616	CY 2024	IOS 10%	Urban and children's hospital measure
f. Component 3 C3-171 - 1184262800 - SANA HEALTHCARE CARROLLTON	IMM-2 Influenza Immunization	TJC	CY 2023	0.7538	CY 2024	IOS 10%	Urban and children's hospital measure
f. Component 3 C3-171 - 1992707228 - SHANNON MEDICAL CENTER	IMM-2 Influenza Immunization	TJC	CY 2023	0.8543	CY 2024	IOS 10%	Urban and children's hospital measure
f. Component 3 C3-171 - 1306448899 - SHANNON REHABILITATION HOSPITAL	IMM-2 Influenza Immunization	TJC	CY 2023	0.6667	CY 2024	IOS 10%	Urban and children's hospital measure
f. Component 3 C3-171 - 1770573586 - SOUTH TEXAS HEALTH SYSTEM	IMM-2 Influenza Immunization	TJC	CY 2023	0.7409	CY 2024	IOS 10%	Urban and children's hospital measure
f. Component 3 C3-171 - 1942294939 - ST JOSEPH REGIONAL HEALTH CENTER	IMM-2 Influenza Immunization	TJC	CY 2023	0.2368	CY 2024	IOS 10%	Urban and children's hospital measure
f. Component 3 C3-171 - 1184868879 - ST LUKE'S LAKESIDE HOSPITAL	IMM-2 Influenza Immunization	TJC	CY 2023	0.6667	CY 2024	IOS 10%	Urban and children's hospital measure
f. Component 3 C3-171 - 1659559573 - ST LUKES SUGAR LAND HOSPITAL	IMM-2 Influenza Immunization	TJC	CY 2023	0.2853	CY 2024	IOS 10%	Urban and children's hospital measure

f. Component 3 C3-171 - 1720033947 - ST. DAVID'S GEORGETOWN HOSPITAL	IMM-2 Influenza Immunization	TJC	CY 2023	0.8081	CY 2024	IOS 10%	Urban and children's hospital measure
f. Component 3 C3-171 - 1679528889 - ST. DAVID'S SOUTH AUSTIN MEDICAL CENTER	IMM-2 Influenza Immunization	TJC	CY 2023	0.9239	CY 2024	IOS 10%	Urban and children's hospital measure
f. Component 3 C3-171 - 1154361475 - ST. JOSEPH MEDICAL CENTER	IMM-2 Influenza Immunization	TJC	CY 2023	0.5232	CY 2024	IOS 10%	Urban and children's hospital measure
f. Component 3 C3-171 - 1710314141 - ST. LUKES HOSPITAL AT THE VINTAGE	IMM-2 Influenza Immunization	TJC	CY 2023	0.3215	CY 2024	IOS 10%	Urban and children's hospital measure
f. Component 3 C3-171 - 1942208616 - ST. LUKE'S THE WOODLANDS HOSPITAL	IMM-2 Influenza Immunization	TJC	CY 2023	0.3115	CY 2024	IOS 10%	Urban and children's hospital measure
f. Component 3 C3-171 - 11745333343 - TEXAS HEALTH ARLINGTON MEMORIAL HOSPITAL	IMM-2 Influenza Immunization	TJC	CY 2023	0.9771	CY 2024	IOS 10%	Urban and children's hospital measure
f. Component 3 C3-171 - 1215296884 - TEXAS HEALTH HARRIS METHODIST HOSPITAL ALLIANCE	IMM-2 Influenza Immunization	TJC	CY 2023	0.9956	CY 2024	IOS 10%	Urban and children's hospital measure
f. Component 3 C3-171 - 1396778064 - TEXAS HEALTH HARRIS METHODIST HOSPITAL CLEBURNE	IMM-2 Influenza Immunization	TJC	CY 2023	0.9855	CY 2024	IOS 10%	Urban and children's hospital measure
TEXAS HEALTH HARRIS METHODIST HOSPITAL FORT WORTH	IMM-2 Influenza Immunization	TJC	CY 2023	0.9711	CY 2024	IOS 10%	Urban and children's hospital measure
f. Component 3 C3-171 - 1104845015 - TEXAS HEALTH HARRIS METHODIST HOSPITAL HURST-EULESS-BEDFORD	IMM-2 Influenza Immunization	TJC	CY 2023	0.9905	CY 2024	IOS 10%	Urban and children's hospital measure
f. Component 3 C3-171 - 1417980202 - TEXAS HEALTH HARRIS METHODIST HOSPITAL SOUTHWEST FORT WORTH	IMM-2 Influenza Immunization	TJC	CY 2023	0.9891	CY 2024	IOS 10%	Urban and children's hospital measure
f. Component 3 C3-171 - 1407169196 - TEXAS HEALTH HEART & VASCULAR HOSPITAL ARLINGTON	IMM-2 Influenza Immunization	TJC	CY 2023	1.0000	CY 2024	IOS 10%	Urban and children's hospital measure
f. Component 3 C3-171 - 1104381292 - TEXAS HEALTH HOSPITAL FRISCO	IMM-2 Influenza Immunization	TJC	CY 2023	1.0000	CY 2024	IOS 10%	Urban and children's hospital measure
f. Component 3 C3-171 - 1356960132 - TEXAS HEALTH HOSPITAL MANSFIELD	IMM-2 Influenza Immunization	TJC	CY 2023	0.0585	CY 2024	IOS 10%	Urban and children's hospital measure
f. Component 3 C3-171 - 1033120423 - TEXAS HEALTH HUGULEY HOSPITAL FORT WORTH SOUTH	IMM-2 Influenza Immunization	TJC	CY 2023	0.2816	CY 2024	IOS 10%	Urban and children's hospital measure
f. Component 3 C3-171 - 1548291883 - TEXAS HEALTH PRESBYTERIAN HOSPITAL ALLEN	IMM-2 Influenza Immunization	TJC	CY 2023	1.0000	CY 2024	IOS 10%	Urban and children's hospital measure
f. Component 3 C3-171 - 1396779948 - TEXAS HEALTH PRESBYTERIAN HOSPITAL DALLAS	IMM-2 Influenza Immunization	TJC	CY 2023	0.9712	CY 2024	IOS 10%	Urban and children's hospital measure
f. Component 3 C3-171 - 1003883158 - TEXAS HEALTH PRESBYTERIAN HOSPITAL DENTON	IMM-2 Influenza Immunization	TJC	CY 2023	0.9878	CY 2024	IOS 10%	Urban and children's hospital measure
f. Component 3 C3-171 - 1902047376 - TEXAS HEALTH PRESBYTERIAN HOSPITAL FLOWER MOUND	IMM-2 Influenza Immunization	TJC	CY 2023	0.9762	CY 2024	IOS 10%	Urban and children's hospital measure
f. Component 3 C3-171 - 1457382798 - TEXAS HEALTH PRESBYTERIAN HOSPITAL KAUFMAN	IMM-2 Influenza Immunization	TJC	CY 2023	1.0000	CY 2024	IOS 10%	Urban and children's hospital measure
f. Component 3 C3-171 - 1770514077 - TEXAS HEALTH PRESBYTERIAN HOSPITAL PLANO	IMM-2 Influenza Immunization	TJC	CY 2023	0.9789	CY 2024	IOS 10%	Urban and children's hospital measure
f. Component 3 C3-171 - 1629138029 - TEXAS HEALTH PRESBYTERIAN HOSPITAL ROCKWALL	IMM-2 Influenza Immunization	TJC	CY 2023	0.9512	CY 2024	IOS 10%	Urban and children's hospital measure
f. Component 3 C3-171 - 1134166192 - TEXAS ORTHOPEDIC HOSPITAL	IMM-2 Influenza Immunization	TJC	CY 2023	1.0000	CY 2024	IOS 10%	Urban and children's hospital measure
f. Component 3 C3-171 - 1851390967 - TEXOMA MEDICAL CENTER f. Component 3 C3-171 - 1972709970 -	IMM-2 Influenza Immunization	TJC	CY 2023	0.1141	CY 2024	IOS 10%	Urban and children's hospital measure
THE HOSPITALS OF PROVIDENCE EAST CAMPUS f. Component 3 C3-171 - 1003344334 -	IMM-2 Influenza Immunization	TJC	CY 2023	0.9617	CY 2024	IOS 10%	Urban and children's hospital measure
THE HOSPITALS OF PROVIDENCE HORIZON CITY CAMPUS	IMM-2 Influenza Immunization	TJC	CY 2023	0.0000	CY 2024	IOS 10%	Urban and children's hospital measure
f. Component 3 C3-171 - 1700801909 - THE HOSPITALS OF PROVIDENCE MEMORIAL CAMPUS f. Component 3 C3-171 - 1215969787 -	IMM-2 Influenza Immunization	TJC	CY 2023	0.8817	CY 2024	IOS 10%	Urban and children's hospital measure
THE HOSPITALS OF PROVIDENCE SIERRA CAMPUS	IMM-2 Influenza Immunization	TJC	CY 2023	0.8942	CY 2024	IOS 10%	Urban and children's hospital measure
f. Component 3 C3-171 - 1538522412 - THE HOSPITALS OF PROVIDENCE TRANSMOUNTAIN CAMPUS	IMM-2 Influenza Immunization	TJC	CY 2023	0.9275	CY 2024	IOS 10%	Urban and children's hospital measure
f. Component 3 C3-171 - 1861467573 - THE MEDICAL CENTER OF SOUTHEAST TEXAS LP	IMM-2 Influenza Immunization	TJC	CY 2023	0.0792	CY 2024	IOS 10%	Urban and children's hospital measure
f. Component 3 C3-171 - 1710985098 - TIRR MEMORIAL HERMANN	IMM-2 Influenza Immunization	TJC	CY 2023	0.5000	CY 2024	IOS 10%	Urban and children's hospital measure

f. Component 3 C3-171 - 1407364847 - TYLER REGIONAL HOSPITAL LLC	IMM-2 Influenza Immunization	TJC	CY 2023	0.7336	CY 2024	IOS 10%	Urban and children's hospital measure
f. Component 3 C3-171 - 1023013448 - UNITED REGIONAL HEATH CARE SYSTEM	IMM-2 Influenza Immunization	TJC	CY 2023	0.9453	CY 2024	IOS 10%	Urban and children's hospital measure
f. Component 3 C3-171 - 1821011248 - UNIVERSITY HEALTH SYSTEM	IMM-2 Influenza Immunization	TJC	CY 2023	0.5712	CY 2024	IOS 10%	Urban and children's hospital measure
f. Component 3 C3-171 - 1821087164 - UNIVERSITY MEDICAL CENTER	IMM-2 Influenza Immunization	TJC	CY 2023	0.4118	CY 2024	IOS 10%	Urban and children's hospital measure
f. Component 3 C3-171 - 1316936990 - UNIVERSITY MEDICAL CENTER OF EL PASO	IMM-2 Influenza Immunization	TJC	CY 2023	0.8762	CY 2024	IOS 10%	Urban and children's hospital measure
f. Component 3 C3-171 - 1154618742 - VALLEY BAPTIST MEDICAL CENTER	IMM-2 Influenza Immunization	TJC	CY 2023	0.8523	CY 2024	IOS 10%	Urban and children's hospital measure
f. Component 3 C3-171 - 1184911877 - VALLEY BAPTIST MEDICAL CENTER - BROWNSVILLE	IMM-2 Influenza Immunization	TJC	CY 2023	0.9001	CY 2024	IOS 10%	Urban and children's hospital measure
f. Component 3 C3-171 - 1043267701 - VALLEY REGIONAL MEDICAL CENTER	IMM-2 Influenza Immunization	TJC	CY 2023	0.8998	CY 2024	IOS 10%	Urban and children's hospital measure
f. Component 3 C3-171 - 1083112023 - WHITE ROCK MEDICAL CENTER	IMM-2 Influenza Immunization	TJC	CY 2023	0.0000	CY 2024	IOS 10%	Urban and children's hospital measure
f. Component 3 C3-171 - 1023065794 - WOMAN'S HOSPITAL OF TEXAS	IMM-2 Influenza Immunization	TJC	CY 2023	0.2799	CY 2024	IOS 10%	Urban and children's hospital measure
g. Component 3 C3-174 - 1669732178 - AD HOSPITAL EAST, LLC	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.1905	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1629089966 - ADVENTHEALTH CENTRAL TEXAS	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.0466	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1093708679 - ASCENSION PROVIDENCE	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.4146	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1619115383 - ASCENSION SETON HAYS	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.0500	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1164526786 - ASCENSION SETON MEDICAL CENTER AUSTIN	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.0534	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1124137054 - ASCENSION SETON NORTHWEST	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.0714	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1154612638 - ASCENSION SETON SMITHVILLE	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.0000	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1750499273 - ASCENSION SETON SOUTHWEST	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.0000	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1578780870 - ASCENSION SETON WILLIAMSON	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.1143	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1417465824 - ATHENS HOSPITAL, LLC	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.0928	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1093744187 - BAPTIST HOSPITALS OF SOUTHEAST TEXAS	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.0343	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1598744856 - BAPTIST MEDICAL CENTER	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.0218	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1669752234 - BAPTIST NEIGHBORHOOD HOSPITAL	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.0000	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1669472387 - BAYLOR SCOTT & WHITE ALL SAINTS MEDICAL CENTER - FORT WORTH	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.0876	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1407010622 - BAYLOR SCOTT & WHITE EMERGENCY HOSPITAL AUBREY	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.0000	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1679903967 - BAYLOR SCOTT & WHITE EMERGENCY HOSPITAL BURLESON	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.0000	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1609855139 - BAYLOR SCOTT & WHITE HEART AND VASCULAR HOSPITAL - DALLAS	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.1000	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1902366305 - BAYLOR SCOTT & WHITE MEDICAL CENTER - AUSTIN	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.0000	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1144781501 - BAYLOR SCOTT & WHITE MEDICAL CENTER - BUDA	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.0000	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1801826839 - BAYLOR SCOTT & WHITE MEDICAL CENTER - CENTENNIAL	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.2143	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1265772362 - BAYLOR SCOTT & WHITE MEDICAL CENTER - COLLEGE STATION	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.1803	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1073511762 - BAYLOR SCOTT & WHITE MEDICAL CENTER - GRAPEVINE	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.4872	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1992700983 - BAYLOR SCOTT & WHITE MEDICAL CENTER - IRVING	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.0373	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1124305065 - BAYLOR SCOTT & WHITE MEDICAL CENTER - MCKINNEY	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.1923	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1346729159 - BAYLOR SCOTT & WHITE MEDICAL CENTER - PFLUGERVILLE	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.4000	CY 2024	IOS 10%	Urban hospital measure

g. Component 3 C3-174 - 1649273434 - BAYLOR SCOTT & WHITE MEDICAL CENTER - PLANO	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.3600	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1265568638 - BAYLOR SCOTT & WHITE MEDICAL CENTER - ROUND ROCK	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.1489	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1477516466 - BAYLOR SCOTT & WHITE MEDICAL							
CENTER - TEMPLE g. Component 3 C3-174 - 1265430177 -	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.1295	CY 2024	IOS 10%	Urban hospital measure
BAYLOR SCOTT & WHITE MEDICAL CENTER - WAXAHACHIE g. Component 3 C3-174 - 1891882833 -	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.0584	CY 2024	IOS 10%	Urban hospital measure
BAYLOR SCOTT & WHITE MEDICAL CENTER HILLCREST	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.1416	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1205018439 - BAYLOR SCOTT & WHITE MEDICAL CENTER LAKE POINTE	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.0580	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1962504340 - BAYLOR SCOTT & WHITE THE HEART HOSPITAL - PLANO	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.2000	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1447250253 - BAYLOR UNIVERSITY MEDICAL CENTER	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.1143	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1972581940 - BRAZOSPORT MEMORIAL HOSPITAL & BRAZOSPORT REGIONAL HEALTH							
SYSTEM g. Component 3 C3-174 - 1114903523 -	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.1364	CY 2024	IOS 10%	Urban hospital measure
BRIM HEALTHCARE OF TEXAS LLC	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.0000	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1407191984 - BSA HOSPITAL LLC	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.0455	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1376662296 - CEDAR PARK REGIONAL MEDICAL CENTER	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.1720	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1932573417 - CHI ST. JOSEPH HEALTH REHABILITATION HOSPITAL	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.1429	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1184622847 - CHI ST. LUKE'S HEALTH BAYLOR COLLEGE OF MEDICINE MEDICAL	oute osc of opiolas - concurrent rescribing	ONIO	01 2020	0.1423	01 2024	100 10%	отойн поэрхия писионо
CENTER g. Component 3 C3-174 - 1124092036 - CHRISTUS GOOD SHEPHERD MEDICAL	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.2360	CY 2024	IOS 10%	Urban hospital measure
CENTER	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.0440	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1194787218 - CHRISTUS SANTA ROSA HOSPITAL	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.0471	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1447883301 - CHRISTUS SANTA ROSA HOSPITAL - SAN MARCOS	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.0120	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1679557888 - CHRISTUS SOUTHEAST TEXAS - ST. ELIZABETH	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.0253	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1689641680 - CHRISTUS SPOHN HOSPITAL CORPUS CHRISTI	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.0168	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1295736734 - CHRISTUS ST. MICHAEL HEALTH SYSTEM	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.0117	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1316911068 - CHRISTUS TRINITY MOTHER FRANCES REHAB HOSPITAL	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	1.0000	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1124052162 - CITIZENS MEDICAL CENTER	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.0996	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1508810573 - CORPUS CHRISTI MEDICAL CENTER	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.1422	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1972517365 - COVENANT MEDICAL CENTER	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.2482	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1861690364 - DALLAS MEDICAL CENTER LLC	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.1786	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1093810327 - DELL SETON MEDICAL CENTER AT THE UNIVERSITY OF TEXAS	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.1677	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1851343909 - DETAR HEALTHCARE SYSTEM	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.1964	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1053317362 - DOCTORS HOSPITAL AT RENAISSANCE, LTD	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.0791	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1396731105 - DOCTORS HOSPITAL OF LAREDO	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.5397	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1659539567 - ENCOMPASS HEALTH REHABILITATION HOSPITAL OF ABILENE	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.0444	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1548546088 - ENCOMPASS HEALTH REHABILITATION HOSPITAL OF AUSTIN	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.2000	CY 2024	IOS 10%	Urban hospital measure

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g. Component 3 C3-174 - 1245422567 - ENCOMPASS HEALTH REHABILITATION							
HOSPITAL OF ROUND ROCK	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.2174	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1205420916 - ENCOMPASS HEALTH REHABILITATION							
HOSPITAL OF WACO	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.5000	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1720088123 - GUADALUPE REGIONAL MEDICAL CENTER	Safe Use of Opinide Consurrent Prescribing	CMS	CY 2023	0.0574	CY 2024	IOS 10%	Lirhan hospital massura
g. Component 3 C3-174 - 1881688976 -	Safe Use of Opioids - Concurrent Prescribing			0.0571			Urban hospital measure
HARLINGEN MEDICAL CENTER	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.0244	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1205900370 - HARRIS COUNTY HOSPITAL DISTRICT	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.0763	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1063466035 - HCA HOUSTON HEALTHCARE CLEAR							
LAKE	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.1059	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1962455816 - HCA HOUSTON HEALTHCARE CONROE	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.1149	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1073043592 - HCA HOUSTON HEALTHCARE MEDICAL							
CENTER g. Component 3 C3-174 - 1811942238 -	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.1736	CY 2024	IOS 10%	Urban hospital measure
HCA HOUSTON HEALTHCARE NORTH CYPRESS	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.1550	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1740450121 - HCA HOUSTON HEALTHCARE							
NORTHWEST g. Component 3 C3-174 - 1609275585 -	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.0766	CY 2024	IOS 10%	Urban hospital measure
HCA HOUSTON HEALTHCARE PEARLAND	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.3631	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1174576698 - HCA HOUSTON HEALTHCARE							
SOUTHEAST	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.0754	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1750819025 - HCA HOUSTON HEALTHCARE TOMBALL	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.1040	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1275580938 - HCA HOUSTON HEALTHCARE WEST	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.0717	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1528064649 - HENDRICK MEDICAL CENTER	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.0841	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1841562709 - HH KILLEEN HEALTH SYSTEM LLC	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.0244	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1891789772 - HOUSTON METHODIST BAYTOWN	care ecc or opiolac concurrent recombing	o.me	012020	0.0211	0.1 202.1	100 10%	ordan noophal modelie
HOSPITAL g. Component 3 C3-174 - 1952723967 -	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.0967	CY 2024	IOS 10%	Urban hospital measure
HOUSTON METHODIST CLEAR LAKE HOSPITAL	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.1053	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1548387418 - HOUSTON METHODIST HOSPITAL	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.1815	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1497871628 - HOUSTON METHODIST SUGAR LAND	Sale use of Opiolus - Concurrent Prescribing	CIVIO	01 2023	0.1013	C1 2024	103 10/6	Orban nospital measure
HOSPITAL	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.1111	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1184179194 - HOUSTON METHODIST THE WOODLANDS HOSPITAL	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.1714	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1083937593 -	Sale use of Opiolus - Concurrent Prescribing	CIVIO	01 2023	0.1714	C1 2024	103 10/6	Orban nospital measure
HOUSTON METHODIST WEST HOSPITAL	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.0565	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1871619254 - HOUSTON METHODIST WILLOWBROOK HOSPITAL	Safe Use of Opioids - Concurrent Prescribing	CMC	CV 2022	0.0440	CV 2024	IOC 109/	Lirhan hospital massura
g. Component 3 C3-174 - 1598750721 -	·	CMS	CY 2023	0.0440	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1245878990 -	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.0745	CY 2024	IOS 10%	Urban hospital measure
HUNTSVILLE MEMORIAL HOSPITAL g. Component 3 C3-174 - 1992753222 -	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.0606	CY 2024	IOS 10%	Urban hospital measure
JPS HEALTH NETWORK g. Component 3 C3-174 - 1861488579 -	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.0599	CY 2024	IOS 10%	Urban hospital measure
KNAPP MEDICAL CENTER g. Component 3 C3-174 - 1548232044 -	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.0938	CY 2024	IOS 10%	Urban hospital measure
ĽAREDO MEDICAL CENTER g. Component 3 C3-174 - 1770536120 - LAS PALMAS MEDICAL CENTER	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.0088	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1528026267 -	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.1403	CY 2024	IOS 10%	Urban hospital measure
LONGVIEW REGIONAL MEDICAL CENTER	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.2645	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1922001775 - LUBBOCK HEART HOSPITAL	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.1176	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1740273994 - MEDICAL CENTER HOSPITAL	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.0120	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1871911016 - MEDICAL CITY ALLIANCE	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.1450	CY 2024	IOS 10%	Urban hospital measure
	22.2 300 0. Opiolati Solication (170301b)(19	510	0.2020	0.1700	J. 2024	.00 10/0	orban noophar modouro

g. Component 3 C3-174 - 1134172406 - MEDICAL CITY ARLINGTON	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.0591	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1689628984 - MEDICAL CITY DALLAS	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.1048	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1306897277 - MEDICAL CITY DENTON	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.2830	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1659323772 - MEDICAL CITY FORT WORTH	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.2718	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1902857766 - MEDICAL CITY LAS COLINAS	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.1239	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1255384533 - MEDICAL CITY LEWISVILLE	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.0859	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1437102639 - MEDICAL CITY MCKINNEY	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.0800	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1518911833 - MEDICAL CITY NORTH HILLS	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.2710	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1699726406 - MEDICAL CITY PLANO	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.1750	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1417471467 - MEDICAL CITY WEATHERFORD	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.1457	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1730132234 - MEMORIAL HERMANN HEALTH SYSTEM	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.1429	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1982666111 - MEMORIAL HERMANN HOSPITAL	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.1053	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1932152337 - MEMORIAL HERMANN KATY HOSPITAL g. Component 3 C3-174 - 1740233782 -	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.1410	CY 2024	IOS 10%	Urban hospital measure
MEMORIAL HERMANN MEMORIAL CITY HOSPITAL	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.2063	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1295843787 - MEMORIAL HERMANN NORTHEAST	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.0671	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1295788735 - MEMORIAL HERMANN SUGAR LAND							
HOSPITAL g. Component 3 C3-174 - 1275592131 -	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.0660	CY 2024	IOS 10%	Urban hospital measure
METHÓDIST CHARLTON MEDICAL CENTER	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.1028	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1528027786 - METHODIST DALLAS MEDICAL CENTER	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.0976	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1124074273 - METHODIST HOSPITAL	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.1234	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1659525236 - METHODIST HOSPITAL STONE OAK	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.1094	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1689629941 - METHODIST MANSFIELD MEDICAL CENTER	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.0863	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1487271375 - METHODIST MIDLOTHIAN MEDICAL							
CENTER g. Component 3 C3-174 - 1033165501 -	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.2000	CY 2024	IOS 10%	Urban hospital measure
METHÓDIST RICHARDSON MEDICAL CENTER	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.0592	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1568818417 - METHODIST SOUTHLAKE MEDICAL CENTER	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.3333	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1255325817 - MIDLAND MEMORIAL HOSPITAL	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.0639	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1205833985 -							
MISSION REGIONAL MEDICAL CENTER g. Component 3 C3-174 - 1679578439 -	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.0750	CY 2024	IOS 10%	Urban hospital measure
MOTHER FRANCES HOSPITAL REGIONAL HEALTH CARE CENTER	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.0359	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1629021845 - NORTH AUSTIN MEDICAL CENTER	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.1218	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1467442418 - NORTHWEST TEXAS HEALTHCARE SYSTEM	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.4041	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1700883196 - OAKBEND MEDICAL CENTER	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.0079	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1801852736 - ODESSA REGIONAL HOSPITAL LP	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.0226	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1376588228 - PAM HEALTH WARM SPRINGS	,						
REHABILITATION HOSPITAL OF SAN ANTONIO	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	1.0000	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1003340639 - PAM REHABILITATION HOSPITAL OF CORPUS CHRISTI	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	1.0000	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1932123247 - PARKLAND HEALTH	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.0448	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1912948845 - PHYSICIANS SURGICAL HOSPITALS,							
LLC	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.0000	CY 2024	IOS 10%	Urban hospital measure

g. Component 3 C3-174 - 1790174860 - PRIME HEALTHCARE SERVICES MESQUITE LLC	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.0698	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1427472463 - RESOLUTE HEALTH HOSPITAL	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.0566	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1619924719 - RIO GRANDE REGIONAL HOSPITAL	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.0649	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1649223645 - ROUND ROCK MEDICAL CENTER	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.0633	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1184262800 - SANA HEALTHCARE CARROLLTON		CMS	CY 2023	0.6471		IOS 10%	
g. Component 3 C3-174 - 1992707228 -	Safe Use of Opioids - Concurrent Prescribing				CY 2024		Urban hospital measure
SHANNON MEDICAL CENTER	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.0741	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1306448899 - SHANNON REHABILITATION HOSPITAL	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.1333	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1770573586 - SOUTH TEXAS HEALTH SYSTEM	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.6743	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1942294939 - ST JOSEPH REGIONAL HEALTH CENTER	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.0579	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1184868879 - ST LUKE'S LAKESIDE HOSPITAL	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.2500	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1659559573 - ST LUKES SUGAR LAND HOSPITAL	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.1503	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1720033947 - ST. DAVID'S GEORGETOWN HOSPITAL	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.1311	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1679528889 - ST. DAVID'S SOUTH AUSTIN MEDICAL							
CENTER g. Component 3 C3-174 - 1154361475 -	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.1067	CY 2024	IOS 10%	Urban hospital measure
ST. JOSEPH MEDICAL CENTER	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.0455	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1710314141 - ST. LUKES HOSPITAL AT THE VINTAGE	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.1029	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1942208616 - ST. LUKE'S THE WOODLANDS HOSPITAL	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.1225	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1174533343 - TEXAS HEALTH ARLINGTON MEMORIAL	Care use of oppoids - concurrent resembling	OMO	01 2020	0.1220	01 2024	100 1070	oroan nospital measure
HOSPITAL	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.0827	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1215296884 - TEXAS HEALTH HARRIS METHODIST HOSPITAL ALLIANCE	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.0430	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1396778064 - TEXAS HEALTH HARRIS METHODIST		040	01/ 0000	0.4000	0,4,0004	100 100	
HOSPITAL CLEBURNE g. Component 3 C3-174 - 1336172105 - TEXAS HEALTH HARRIS METHODIST	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.1238	CY 2024	IOS 10%	Urban hospital measure
HOSPITAL FORT WORTH a. Component 3 C3-174 - 1104845015 -	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.1711	CY 2024	IOS 10%	Urban hospital measure
TEXAS HEALTH HARRIS METHODIST HOSPITAL HURST-EULESS-BEDFORD	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.0413	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1417980202 - TEXAS HEALTH HARRIS METHODIST							
g. Component 3 C3-174 - 1407169196 -	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.0474	CY 2024	IOS 10%	Urban hospital measure
TEXAS HEALTH HEART & VASCULAR HOSPITAL ARLINGTON	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.0000	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1104381292 - TEXAS HEALTH HOSPITAL FRISCO	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.2143	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1356960132 - TEXAS HEALTH HOSPITAL MANSFIELD	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.0667	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1033120423 - TEXAS HEALTH HUGULEY HOSPITAL FORT WORTH SOUTH	Safa Liea of Onjoids Concurrent Prescribing	CMS	CY 2023	0.0741	CV 2024	IOS 10%	Lirban bessital measure
g. Component 3 C3-174 - 1548291883 - TEXAS HEALTH PRESBYTERIAN	Safe Use of Opioids - Concurrent Prescribing				CY 2024		Urban hospital measure
HOSPITAL ALLEN g. Component 3 C3-174 - 1396779948 -	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.0862	CY 2024	IOS 10%	Urban hospital measure
TEXAS HEALTH PRESBYTERIAN HOSPITAL DALLAS g. Component 3 C3-174 - 1003883158 -	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.1246	CY 2024	IOS 10%	Urban hospital measure
TEXAS HEALTH PRESBYTERIAN HOSPITAL DENTON	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.0748	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1902047376 - TEXAS HEALTH PRESBYTERIAN HOSPITAL FLOWER MOUND	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.0217	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1457382798 - TEXAS HEALTH PRESBYTERIAN HOSPITAL KAUFMAN	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.1905	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1770514077 - TEXAS HEALTH PRESBYTERIAN	22.2 300 of Optodo Conductoria regenbling	50	5. 2020	5.1000	3. 202 1	100 10/0	o our noopia. modeli o
HOSPITAL PLANO	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.0941	CY 2024	IOS 10%	Urban hospital measure

g. Component 3 C3-174 - 1629138029 -							
TEXAS HEALTH PRESBYTERIAN HOSPITAL ROCKWALL	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.0732	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1134166192 - TEXAS ORTHOPEDIC HOSPITAL	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.1739	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1851390967 - TEXOMA MEDICAL CENTER	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.1553	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1972709970 - THE HOSPITALS OF PROVIDENCE EAST CAMPUS	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.0000	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1003344334 - THE HOSPITALS OF PROVIDENCE HORIZON CITY CAMPUS	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.0000	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1700801909 - THE HOSPITALS OF PROVIDENCE	Care use of opioids - concurrent resembling	CIVIC	01 2020	0.0000	01 2024	100 1070	Orban nospital measure
MEMORIAL CAMPUS g. Component 3 C3-174 - 1215969787 -	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.0000	CY 2024	IOS 10%	Urban hospital measure
THE HOSPITALS OF PROVIDENCE SIERRA CAMPUS	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.0000	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1538522412 - THE HOSPITALS OF PROVIDENCE TRANSMOUNTAIN CAMPUS	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.0625	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1861467573 - THE MEDICAL CENTER OF SOUTHEAST TEXAS LP	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.1137	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1407364847 - TYLER REGIONAL HOSPITAL LLC	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.1931	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1023013448 - UNITED REGIONAL HEATH CARE	Sofo Line of Opinida Community Press 11	CMC	CV 2022	0.0000	CV 2024	100 40%	Lishen honeital m
SYSTEM g. Component 3 C3-174 - 1821011248 - UNIVERSITY HEALTH SYSTEM	Safe Use of Opioids - Concurrent Prescribing Safe Use of Opioids - Concurrent Prescribing	CMS CMS	CY 2023 CY 2023	0.0833	CY 2024 CY 2024	IOS 10%	Urban hospital measure Urban hospital measure
g. Component 3 C3-174 - 1821087164 - UNIVERSITY MEDICAL CENTER	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.1401	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1316936990 - UNIVERSITY MEDICAL CENTER OF EL							
PASO g. Component 3 C3-174 - 1154618742 -	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.0332	CY 2024	IOS 10%	Urban hospital measure
VALLEY BAPTIST MEDICAL CENTER g. Component 3 C3-174 - 1184911877 - VALLEY BAPTIST MEDICAL CENTER -	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.0139	CY 2024	IOS 10%	Urban hospital measure
BROWNSVILLE	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.0667	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1043267701 - VALLEY REGIONAL MEDICAL CENTER	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.0795	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1083112023 - WHITE ROCK MEDICAL CENTER	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.1222	CY 2024	IOS 10%	Urban hospital measure
g. Component 3 C3-174 - 1023065794 - WOMAN'S HOSPITAL OF TEXAS	Safe Use of Opioids - Concurrent Prescribing	CMS	CY 2023	0.0165	CY 2024	IOS 10%	Urban hospital measure
h. Component 3 C3-158 - 1194743013 - CHILDREN'S MEDICAL CENTER OF DALLAS	Pediatric Central Line-Associated Bloodstream Infection (CLABSI)	Children's Hospital's Solutions for Patient Safety (CHSPS)	CY 2023	1.3214	CY 2024	1.411 per 1000 central-line days and better than baseline or IOS 5%	Children's hospital measure
h. Component 3 C3-158 - 1720480627 - CHILDREN'S MEDICAL CENTER PLANO	Pediatric Central Line-Associated Bloodstream Infection (CLABSI)	Children's Hospital's Solutions for Patient Safety (CHSPS)	CY 2023	0.5719	CY 2024	1.411 per 1000 central-line days and better than baseline or IOS 5%	Children's hospital measure
h. Component 3 C3-158 - 1437171568 - COVENANT CHILDREN'S HOSPITAL	Pediatric Central Line-Associated Bloodstream Infection (CLABSI)	Children's Hospital's Solutions for Patient Safety (CHSPS)	CY 2023	0.4585	CY 2024	1.411 per 1000 central-line days and better than baseline or IOS 5%	Children's hospital measure
h. Component 3 C3-158 - 1548286172 - DRISCOLL CHILDRENS HOSPITAL	Pediatric Central Line-Associated Bloodstream Infection (CLABSI)	Children's Hospital's Solutions for Patient Safety (CHSPS)	CY 2023	0.4126	CY 2024	1.411 per 1000 central-line days and better than baseline or IOS 5%	Children's hospital measure
h. Component 3 C3-158 - 1760628184 - TEXAS SCOTTISH RITE HOSPITAL FOR CRIPPLED CHILDREN	Pediatric Central Line-Associated Bloodstream Infection (CLABSI)	Children's Hospital's Solutions for Patient Safety (CHSPS)	CY 2023	0.0000	CY 2024	1.411 per 1000 central-line days and better than baseline or IOS 5%	Children's hospital measure
i. Component 3 C3-175 - 1194743013 - CHILDREN'S MEDICAL CENTER OF DALLAS	Pediatric All-Condition Readmission	Center of Excellence for Pediatric Quality Measurement (CEPQM)	CY 2023	6.2146	CY 2024	5.99 per 100 discharges	Children's hospital measure; hospitals will report the observed rate of readmissions to the same hospital
i. Component 3 C3-175 - 1720480627 - CHILDREN'S MEDICAL CENTER PLANO	Pediatric All-Condition Readmission	Center of Excellence for Pediatric Quality Measurement					Children's hospital measure; hospitals will report the observed rate of
i. Component 3 C3-175 - 1437171568 -		(CEPQM) Center of Excellence for Pediatric Quality Measurement	CY 2023	5.3101	CY 2024	5.99 per 100 discharges	readmissions to the same hospital Children's hospital measure; hospitals will report the observed rate of
i. Component 3 C3-175 - 1548286172 -	Pediatric All-Condition Readmission	(CEPQM) Center of Excellence for Pediatric Quality Measurement	CY 2023	8.0940	CY 2024	5.99 per 100 discharges	readmissions to the same hospital Children's hospital measure; hospitals will report the observed rate of
DRISCOLL CHILDRENS HOSPITAL i. Component 3 C3-175 - 1760628184 -	Pediatric All-Condition Readmission	(CEPQM) Center of Excellence for	CY 2023	4.7722	CY 2024	5.99 per 100 discharges	readmissions to the same hospital
TEXAS SCOTTISH RITE HOSPITAL FOR CRIPPLED CHILDREN j. Component 3 C3-176 - 1194743013 -	Pediatric All-Condition Readmission	Pediatric Quality Measurement (CEPQM)	CY 2023	5.8140	CY 2024	5.99 per 100 discharges	Children's hospital measure; hospitals will report the observed rate of readmissions to the same hospital
CHILDREN'S MEDICAL CENTER OF DALLAS	Follow-Up After ED Visit for Mental Illness: Ages 6-17	CMS	CY 2023	0.5163	CY 2024	56.57% benchmark and better than baseline or IOS 5%	Children's hospital measure
j. Component 3 C3-176 - 1720480627 - CHILDREN'S MEDICAL CENTER PLANO	Follow-Up After ED Visit for Mental Illness: Ages 6-17	CMS	CY 2023	0.4318	CY 2024	56.57% benchmark and better than baseline or IOS 5%	Children's hospital measure
j. Component 3 C3-176 - 1437171568 - COVENANT CHILDREN'S HOSPITAL	Follow-Up After ED Visit for Mental Illness: Ages 6-17	CMS	CY 2023	0.5938	CY 2024	56.57% benchmark and better than baseline or IOS 5%	Children's hospital measure

j. Component 3 C3-176 - 1548286172 -	Follow-Up After ED Visit for Mental Illness: Ages					56.57% benchmark and better	
DRISCOLL CHILDRENS HOSPITAL	6-17	CMS	CY 2023	0.6800	CY 2024	than baseline or IOS 5%	Children's hospital measure
k. Component 3 C3-170 - 1194743013 - CHILDREN'S MEDICAL CENTER OF DALLAS	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.6218	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
k. Component 3 C3-170 - 1720480627 - CHILDREN'S MEDICAL CENTER PLANO	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.2722	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
k. Component 3 C3-170 - 1437171568 - COVENANT CHILDREN'S HOSPITAL	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.0176	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
k. Component 3 C3-170 - 1548286172 - DRISCOLL CHILDRENS HOSPITAL	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.9768	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
k. Component 3 C3-170 - 1760628184 - TEXAS SCOTTISH RITE HOSPITAL FOR CRIPPLED CHILDREN	Food Insecurity Screening and Follow-up Plan	Texas Health and Human Services Commission	CY 2023	0.8276	CY 2024	IOS 10%	Urban and children's hospital measure; Numerator - Patients screened for food insecurity using the Hunger Vital Sign food insecurity screening tool or another standardized, age-appropriate food insecurity screening tool with the screening results documented during the current encounter or during the previous twelve months, AND if the most recent screening result is positive, a follow-up plan is documented within 30 days of the positive screening result. Denominator - All attributed patients with an eligible encounter during the measurement period.
I. Component 3 C3-171 - 1194743013 - CHILDREN'S MEDICAL CENTER OF DALLAS	IMM-2 Influenza Immunization	TJC	CY 2023	0.4663	CY 2024	IOS 10%	Urban and children's hospital measure
I. Component 3 C3-171 - 1720480627 - CHILDREN'S MEDICAL CENTER PLANO	IMM-2 Influenza Immunization	TJC	CY 2023	0.4547	CY 2024	IOS 10%	Urban and children's hospital measure
I. Component 3 C3-171 - 1437171568 - COVENANT CHILDREN'S HOSPITAL	IMM-2 Influenza Immunization	TJC	CY 2023	0.2944	CY 2024	IOS 10%	Urban and children's hospital measure
I. Component 3 C3-171 - 1548286172 - DRISCOLL CHILDRENS HOSPITAL	IMM-2 Influenza Immunization	TJC	CY 2023	0.1738	CY 2024	IOS 10%	Urban and children's hospital measure
I. Component 3 C3-171 - 1760628184 - TEXAS SCOTTISH RITE HOSPITAL FOR CRIPPLED CHILDREN	IMM-2 Influenza Immunization	TJC	CY 2023	0.0000	CY 2024	IOS 10%	Urban and children's hospital measure
m. Component 3 C3-115 - 1194743013 - CHILDREN'S MEDICAL CENTER OF DALLAS	Preventive Care and Screening: Screening for Depression and Follow-Up Plan	CMS	CY 2023	0.1207	CY 2024	IOS 10%	Children's hospital measure
m. Component 3 C3-115 - 1720480627 - CHILDREN'S MEDICAL CENTER PLANO	Preventive Care and Screening: Screening for Depression and Follow-Up Plan	CMS	CY 2023	0.0872	CY 2024	IOS 10%	Children's hospital measure
m. Component 3 C3-115 - 1437171568 - COVENANT CHILDREN'S HOSPITAL	Preventive Care and Screening: Screening for Depression and Follow-Up Plan	CMS	CY 2023	0.2943	CY 2024	IOS 10%	Children's hospital measure
m. Component 3 C3-115 - 1548286172 - DRISCOLL CHILDRENS HOSPITAL	Preventive Care and Screening: Screening for Depression and Follow-Up Plan	CMS	CY 2023	0.6547	CY 2024	IOS 10%	Children's hospital measure
m. Component 3 C3-115 - 1760628184 - TEXAS SCOTTISH RITE HOSPITAL FOR CRIPPLED CHILDREN	Preventive Care and Screening: Screening for Depression and Follow-Up Plan	CMS	CY 2023	0.0000	CY 2024	IOS 10%	Children's hospital measure

PREPRINT SECTION III: PROVIDER CLASS AND ASSESSMENT OF REASONABLENESS ADDENDUM TABLE 2.A. PROVIDER PAYMENT ANALYSES

Directions

2. For payment arrangements that are intended to require plans to make a payment in addition to the negotiated rates (as noted in option c in Question 22 of the State Directed Payment preprint file), please use the rows in Table 2.A below to add provider classes to Table 2 and an analysis showing the impact of the SDP on payment levels for each additional provider class. States may also use Table 2.A in lieu of completing Table 2 in the preprint. Input data only in beige cells in columns B - G.

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	Table 2. in the preprint, please delete Tabs 1.A a	please do not merge and re-PDF	tne preprint.			
	TABLE 2.A.1 Inpatient STAR UHRIP Payment	Levels Compared to ACR UPL				
Column1	Provider Class(es)	Average Base Payment Level from Plans to Providers (absent the SDP)	Effect on Total Payment Level	Effect on Total Payment Level of Other SDPs	Effect on Total Payment Level of Pass-Through Payments (PTPs)	Total Payment Level (after accounting for all SDPs and PTPs)
Data Format	Free text	Percent (#.##%)	Percent (#.##%)	Percent (#.##%) or N/A	Percent (#.##%) or N/A	Percent (#.##%)
Example:	Rural Inpatient Hospital Services	80.0%	20.0%	N/A	N/A	100.0%
3.	Inpatient STAR Children's Bexar	48.9%	15.1%	0.0%	0.0%	64.0%
) .	Inpatient STAR Children's Dallas	41.1%	36.7%	0.0%	0.0%	77.8%
D.	Inpatient STAR Children's Harris	44.0%	45.1%	0.0%	0.0%	89.0%
d.	Inpatient STAR Children's Lubbock	50.8%	23.7%	0.0%	0.0%	74.5%
e.	Inpatient STAR Children's Nueces	40.4%	59.5%	0.0%	0.0%	99.8%
t.	Inpatient STAR Children's Tarrant	27.2%	22.1%	0.0%	0.0%	49.2%
g.	Inpatient STAR Children's Travis	25.4%	9.8%	0.0%	0.0%	35.2%
n.	Inpatient STAR Non-state-owned IMD Bexar	86.2%	5.5%	0.0%	0.0%	91.7%
i.	Inpatient STAR Non-state-owned IMD Dallas	71.1%	27.1%	0.0%	0.0%	98.2%
i	Inpatient STAR Non-state-owned IMD El Paso	78.1%	12.6%	0.0%	0.0%	90.7%
. -	Inpatient STAR Non-state-owned IMD Harris	70.6%	22.9%	0.0%	0.0%	93.5%
N.	inpatient STAR Non-state-owned livid Harris	70.076	22.976	0.078	0.078	93.5 /6
l.	Inpatient STAR Non-state-owned IMD Lubbock	84.2%	15.8%	0.0%	0.0%	100.0%
m.	Inpatient STAR Non-state-owned IMD MRSA Central	90.7%	9.1%	0.0%	0.0%	99.8%
n.	Inpatient STAR Non-state-owned IMD MRSA West	80.2%	18.0%	0.0%	0.0%	98.2%
٥.	Inpatient STAR Non-state-owned IMD Tarrant	71.6%	28.1%	0.0%	0.0%	99.7%
p.	Inpatient STAR Non-state-owned IMD Travis	76.5%	23.3%	0.0%	0.0%	99.8%
q.	Inpatient STAR Rural Bexar	51.4%	48.5%	0.0%	0.0%	100.0%
r.	Inpatient STAR State-owned non-IMD Harris	79.4%	19.8%	0.0%	0.0%	99.2%
S.	Inpatient STAR Urban Bexar	39.2%	25.0%	0.0%	18.1%	82.3%
t.	Inpatient STAR Urban Dallas	23.5%	22.8%	0.0%	10.2%	56.6%
u.	Inpatient STAR Urban El Paso	25.5%	13.3%	0.0%	19.1%	57.9%
V.	Inpatient STAR Urban Harris	29.2%	47.4%	0.0%	5.2%	81.8%
W.	Inpatient STAR Urban Hidalgo	31.8%	34.1%	0.0%	0.0%	65.8%
K.	Inpatient STAR Urban Jefferson	39.4%	29.7%	0.0%	0.0%	69.1%
/.	Inpatient STAR Urban MRSA Central	32.1%	27.0%	0.0%	0.0%	59.1%
<u>z</u> .	Inpatient STAR Urban MRSA Northeast	27.1%	25.5%	0.0%	0.0%	52.7%
aa.	Inpatient STAR Urban MRSA West	28.0%	17.0%	0.0%	9.3%	54.3%
ob.	Inpatient STAR Urban Nueces	33.1%	28.1%	0.0%	23.3%	84.5%
CC.	Inpatient STAR Urban Tarrant	22.5%	25.7%	0.0%	0.0%	48.2%
dd.	Inpatient STAR Urban Travis	34.7%	14.3%	0.0%	0.0%	49.0%
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PREPRINT SECTION III: PROVIDER CLASS AND ASSESSMENT OF REASONABLENESS ADDENDUM TABLE 2.A. PROVIDER PAYMENT ANALYSES

Directions

2. For payment arrangements that are intended to require plans to make a payment in addition to the negotiated rates (as noted in option c in Question 22 of the State Directed Payment preprint file), please use the rows in Table 2.A below to add provider classes to Table 2 and an analysis showing the impact of the SDP on payment levels for each additional provider class. States may also use Table 2.A in lieu of completing Table 2 in the preprint. Input data only in beige cells in columns B - G.

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TABLE 2.A.2 In	patient STAR PLUS UHRIP F	ayment Levels Con	pared to ACR UPL

		Average Base Payment Level from Plans to Providers (absent	Effect on Total Payment Level		Effect on Total Payment Level	Total Payment Level (after accounting for all SDPs and	
Column1	Provider Class(es)	the SDP)	of SDP	of Other SDPs	(PTPs)	PTPs)	
Data Format	Free text	Percent (#.##%)	Percent (#.##%)	Percent (#.##%) or N/A	Percent (#.##%) or N/A	Percent (#.##%)	
Example:	Rural Inpatient Hospital Services	80.0%	20.0%	N/A	N/A	100.0%	
a.	Inpatient STAR PLUS Children's Bexar	2.0%	54.3%	0.0%	0.0%	56.2%	
b.	Inpatient STAR PLUS Children's Dallas	18.3%	51.2%	0.0%	0.0%	69.5%	
C.	Inpatient STAR PLUS Children's El Paso	44.4%	4.1%	0.0%	0.0%	48.5%	
d.	Inpatient STAR PLUS Children's Harris	23.3%	62.5%	0.0%	0.0%	85.8%	
e.	Inpatient STAR PLUS Children's Lubbock	52.7%	22.2%	0.0%	0.0%	74.9%	
f.	Inpatient STAR PLUS Children's Nueces	19.0%	80.9%	0.0%	0.0%	99.9%	
g.	Inpatient STAR PLUS Children's Tarrant	27.0%	22.4%	0.0%	0.0%	49.4%	
h.	Inpatient STAR PLUS Children's Travis	15.9%	17.5%	0.0%	0.0%	33.5%	
	Inpatient STAR PLUS Non-state-owned IMD						
i.	Dallas	36.4%	48.7%	0.0%	0.0%	85.1%	
j.	Inpatient STAR PLUS Rural Bexar	50.8%	37.7%	0.0%	0.0%	88.5%	
k.	Inpatient STAR PLUS Rural Lubbock	95.6%	4.3%	0.0%	0.0%	100.0%	
I.	Inpatient STAR PLUS Rural MRSA Central	89.3%	2.0%	0.0%	0.0%	91.3%	
m.	Inpatient STAR PLUS Rural Nueces	82.4%	4.6%	0.0%	0.0%	87.0%	
	Inpatient STAR PLUS State-owned non-IMD						
n.	Harris	87.5%	11.7%	0.0%	0.0%	99.2%	
	Inpatient STAR PLUS State-owned non-IMD						
0.	MRSA Northeast	88.5%	11.5%	0.0%	0.0%	99.9%	
p.	Inpatient STAR PLUS Urban Bexar	27.6%	26.8%	0.0%	0.3%	54.8%	
q.	Inpatient STAR PLUS Urban Dallas	22.5%	42.2%	0.0%	0.0%	64.8%	
r.	Inpatient STAR PLUS Urban El Paso	17.7%	21.6%	0.0%	0.0%	39.3%	
S.	Inpatient STAR PLUS Urban Harris	18.4%	49.5%	0.0%	0.0%	67.9%	
t.	Inpatient STAR PLUS Urban Hidalgo	29.4%	31.2%	0.0%	0.0%	60.6%	
u.	Inpatient STAR PLUS Urban Jefferson	32.2%	42.0%	0.0%	0.0%	74.2%	
V.	Inpatient STAR PLUS Urban Lubbock	25.7%	5.9%	0.0%	4.9%	36.4%	
W.	Inpatient STAR PLUS Urban MRSA Central	33.3%	27.6%	0.0%	0.0%	60.9%	
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	Inpatient STAR PLUS Urban MRSA Northeast Inpatient STAR PLUS Urban MRSA West	28.8% 25.7%	23.2% 25.1%	0.0%	0.0%	51.9% 50.9%	
<u>y.</u>	Inpatient STAR PLUS Urban Nueces	28.3%	20.4%	0.0%	2.2%	50.9%	
<u>Z.</u>	Inpatient STAR PLUS Urban Nueces	18.8%	46.1%	0.0%	0.0%	64.9%	
aa. bb.	Inpatient STAR PLUS Urban Trariant	18.5%	28.0%	0.0%	0.0%	46.5%	
	Inpatient STAR PLOS Orban Travis	18.5%	28.0%	0.0%	0.0%	40.5%	
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PREPRINT SECTION III: PROVIDER CLASS AND ASSESSMENT OF REASONABLENESS ADDENDUM TABLE 2.A. PROVIDER PAYMENT ANALYSES

Directions

2. For payment arrangements that are intended to require plans to make a payment in addition to the negotiated rates (as noted in option c in Question 22 of the State Directed Payment preprint file), please use the rows in Table 2.A below to add provider classes to Table 2 and an analysis showing the impact of the SDP on payment levels for each additional provider class. States may also use Table 2.A in lieu of completing Table 2 in the preprint. Input data only in beige cells in columns B - G.

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TABLE 2.A.3 Ou	ıtpatient STAR	UHRIP Pay	vment Levels	Compared to	ACR UPL

		Average Base Payment Level			Effect on Total Payment Level	Total Payment Level (after	
Column1	Provider Class(es)	from Plans to Providers (absent the SDP)	Effect on Total Payment Level of SDP			accounting for all SDPs and PTPs)	
Data Format	Free text	Percent (#.##%)	Percent (#.##%)	Percent (#.##%) or N/A	Percent (#.##%) or N/A	Percent (#.##%)	
Example:	Rural Inpatient Hospital Services	80.0%	20.0%	N/A	N/A	100.0%	
a.	Outpatient STAR Children's Bexar	12.8%	44.7%	0.0%	0.0%	57.5%	
b.	Outpatient STAR Children's Dallas	54.8%	25.9%	0.0%	0.0%	80.7%	
C.	Outpatient STAR Children's El Paso	10.9%	45.9%	0.0%	0.0%	56.8%	
d.	Outpatient STAR Children's Harris	34.1%	50.8%	0.0%	0.0%	84.8%	
e.	Outpatient STAR Children's Lubbock	12.0%	24.3%	0.0%	0.0%	36.4%	
f.	Outpatient STAR Children's Nueces	32.9%	19.6%	0.0%	0.0%	52.6%	
g.	Outpatient STAR Children's Tarrant	40.6%	34.7%	0.0%	0.0%	75.3%	
h.	Outpatient STAR Children's Travis	21.9%	59.6%	0.0%	0.0%	81.5%	
	Outpatient STAR Rural Bexar	56.5%	1.8%	0.0%	0.0%	58.3%	
j.	Outpatient STAR Rural Dallas	5.5%	40.3%	0.0%	0.0%	45.8%	
k.	Outpatient STAR Rural Harris	72.5%	26.8%	0.0%	0.0%	99.3%	
I.	Outpatient STAR Rural Jefferson	62.3%	6.7%	0.0%	0.0%	69.0%	
m.	Outpatient STAR Rural Lubbock	65.0%	34.2%	0.0%	0.0%	99.2%	
n.	Outpatient STAR Rural MRSA Central	55.0%	12.5%	0.0%	0.0%	67.5%	
0.	Outpatient STAR Rural MRSA Northeast	24.5%	37.5%	0.0%	0.0%	62.0%	
p.	Outpatient STAR Rural MRSA West	57.4%	23.5%	0.0%	0.0%	81.0%	
q.	Outpatient STAR Rural Nueces	52.5%	8.4%	0.0%	0.0%	60.9%	
r.	Outpatient STAR Rural Tarrant	27.1%	27.2%	0.0%	0.0%	54.3%	
s.	Outpatient STAR Rural Travis	49.0%	19.8%	0.0%	0.0%	68.9%	
t.	Outpatient STAR State-owned non-IMD Harris	45.1%	54.2%	0.0%	0.0%	99.3%	
u.	Outpatient STAR Urban Bexar	43.4%	51.7%	0.0%	0.0%	95.0%	
V.	Outpatient STAR Urban Dallas	22.9%	37.5%	0.0%	0.0%	60.4%	
w.	Outpatient STAR Urban El Paso	28.9%	26.8%	0.0%	0.0%	55.7%	
x.	Outpatient STAR Urban Harris	57.7%	28.3%	0.0%	0.0%	86.0%	
у.	Outpatient STAR Urban Hidalgo	33.7%	39.7%	0.0%	0.0%	73.4%	
Z.	Outpatient STAR Urban Jefferson	20.5%	38.6%	0.0%	0.0%	59.2%	
aa.	Outpatient STAR Urban Lubbock	30.3%	33.3%	0.0%	0.0%	63.6%	
bb.	Outpatient STAR Urban MRSA Central	28.1%	30.5%	0.0%	0.0%	58.6%	
cc.	Outpatient STAR Urban MRSA Northeast	10.6%	32.3%	0.0%	0.0%	42.8%	
dd.	Outpatient STAR Urban MRSA West	19.8%	38.6%	0.0%	0.0%	58.4%	
ee.	Outpatient STAR Urban Nueces	30.7%	35.2%	0.0%	0.0%	65.9%	
ff.	Outpatient STAR Urban Tarrant	24.1%	48.9%	0.0%	0.0%	73.0%	
gg.	Outpatient STAR Urban Travis	30.9%	46.5%	0.0%	0.0%	77.4%	
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PREPRINT SECTION III: PROVIDER CLASS AND ASSESSMENT OF REASONABLENESS		
ADDENDUM TABLE 2.A. PROVIDER PAYMENT ANALYSES		

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TABLE 2.A.4 Ou	tpatient STAR PLUS UHRIP	Payment Levels C	ompared to ACR UPL
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		Average Base Payment Level			Effect on Total Payment Level	Total Payment Level (after	
Column1	Provider Class(es)	from Plans to Providers (absent the SDP)	Effect on Total Payment Level of SDP	Effect on Total Payment Level of Other SDPs	of Pass-Through Payments (PTPs)	accounting for all SDPs and PTPs)	
Data Format	Free text	Percent (#.##%)	Percent (#.##%)	Percent (#.##%) or N/A	Percent (#.##%) or N/A	Percent (#.##%)	
	Rural Inpatient Hospital Services	80.0%	20.0%	N/A	N/A	100.0%	
	Outpatient STAR PLUS Children's Bexar	11.4%	45.8%	0.0%	0.0%	57.2%	
	Outpatient STAR PLUS Children's Dallas	44.9%	36.2%	0.0%	0.0%	81.0%	
	Outpatient STAR PLUS Children's Harris	28.3%	55.7%	0.0%	0.0%	84.0%	
d.	Outpatient STAR PLUS Children's Lubbock	14.2%	22.5%	0.0%	0.0%	36.6%	
e.	Outpatient STAR PLUS Children's Nueces	17.0%	33.5%	0.0%	0.0%	50.6%	
f.	Outpatient STAR PLUS Children's Travis	69.8%	19.6%	0.0%	0.0%	89.5%	
q.	Outpatient STAR PLUS Rural Bexar	43.0%	12.4%	0.0%	0.0%	55.4%	
h.	Outpatient STAR PLUS Rural Dallas	48.6%	4.0%	0.0%	0.0%	52.6%	
i.	Outpatient STAR PLUS Rural Harris	71.5%	25.9%	0.0%	0.0%	97.5%	
j.	Outpatient STAR PLUS Rural Hidalgo	77.9%	22.1%	0.0%	0.0%	100.0%	
k.	Outpatient STAR PLUS Rural Jefferson	42.2%	18.2%	0.0%	0.0%	60.4%	
l.	Outpatient STAR PLUS Rural Lubbock	20.2%	64.2%	0.0%	0.0%	84.4%	
m.	Outpatient STAR PLUS Rural MRSA Central	40.4%	35.5%	0.0%	0.0%	75.8%	
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n.	Outpatient STAR PLUS Rural MRSA Northeast	42.5%	21.2%	0.0%	0.0%	63.7%	
	Outpatient STAR PLUS Rural MRSA West	40.9%	38.8%	0.0%	0.0%	79.8%	
	Outpatient STAR PLUS Rural Nueces	27.5%	28.1%	0.0%	0.0%	55.6%	
	Outpatient STAR PLUS Rural Tarrant	21.0%	28.4%	0.0%	0.0%	49.4%	
	Outpatient STAR PLUS Rural Travis	43.7%	25.5%	0.0%	0.0%	69.3%	
	Outpatient STAR PLUS State-owned non-IMD						
	Harris	42.2%	57.4%	0.0%	0.0%	99.7%	
	Outpatient STAR PLUS State-owned non-IMD	55.40/	10.10/	0.004	0.00/	07.50/	
	MRSA Northeast	55.4%	12.1%	0.0%	0.0%	67.5%	
	Outpatient STAR PLUS Urban Bexar	25.8%	50.2%	0.0%	0.0%	76.0%	
	Outpatient STAR PLUS Urban Dallas	20.0%	39.3%	0.0%	0.0%	59.2%	
	Outpatient STAR PLUS Urban El Paso	17.8%	47.2%	0.0%	0.0%	64.9%	
	Outpatient STAR PLUS Urban Harris	22.5% 23.7%	60.3% 43.9%	0.0% 0.0%	0.0% 0.0%	82.7% 67.6%	
	Outpatient STAR PLUS Urban Hidalgo Outpatient STAR PLUS Urban Jefferson	23.7%	43.9% 37.3%	0.0%	0.0%	61.3%	
	•						
	Outpatient STAR PLUS Urban Lubbock	15.9% 22.0%	41.8% 35.9%	0.0%	0.0%	57.7% 58.0%	
bb.	Outpatient STAR PLUS Urban MRSA Central	22.0%	35.9%	0.0%	0.0%	58.0%	
CC.	Outpatient STAR PLUS Urban MRSA Northeast	16.4%	32.4%	0.0%	0.0%	48.8%	
	Outpatient STAR PLUS Urban MRSA West	15.5%	40.3%	0.0%	0.0%	55.7%	
	Outpatient STAR PLUS Urban Nueces	16.8%	51.5%	0.0%	0.0%	68.3%	
	Outpatient STAR PLOS Orban Nueces Outpatient STAR PLUS Urban Tarrant	19.7%	52.6%	0.0%	0.0%	72.3%	
	Outpatient STAR PLUS Urban Travis	18.8%	58.2%	0.0%	0.0%	76.9%	
hh.	Outpation STAIL LOS Olban Havis	10.070	30.2 /0	0.070	0.070	10.970	
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PREPRINT SECTION III: PROVIDER CLASS AND ASSESSMENT OF REASONABLENESS			
ADDENDUM TABLE 2.A. PROVIDER PAYMENT ANALYSES			

2. For payment arrangements that are intended to require plans to make a payment in addition to the negotiated rates (as noted in option c in Question 22 of the State Directed Payment preprint file), please use the rows in Table 2.A below to add provider classes to Table 2 and an analysis showing the impact of the SDP on payment levels for each additional provider class. States may also use Table 2.A in lieu of completing Table 2 in the preprint. Input data only in beige cells in columns B - G.

TABLE 2.A.5 Inpatie	ent STAR UHRIP + ACIA Pay	syment Levels Compared to ACR UPL
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		Average Base Payment Level from Plans to Providers (absent	Effect on Total Boundary Louis		Effect on Total Payment Level	Total Payment Level (after accounting for all SDPs and	
Column1	Provider Class(es)	the SDP)	of SDP	of Other SDPs	(PTPs)	PTPs)	ı
Data Format	Free text	Percent (#.##%)	Percent (#.##%)	Percent (#.##%) or N/A	Percent (#.##%) or N/A	Percent (#.##%)	-
Example:	Rural Inpatient Hospital Services	80.0%	20.0%	N/A	N/A	100.0%	
a.	Inpatient STAR Children's Bexar	48.9%	31.6%	0.0%	0.0%	80.5%	
b.	Inpatient STAR Children's Dallas	41.1%	36.7%	0.0%	0.0%	77.8%	
C.	Inpatient STAR Children's El Paso	57.2%	23.6%	0.0%	0.0%	80.8%	
d.	Inpatient STAR Children's Harris	44.0%	45.1%	0.0%	0.0%	89.0%	
e.	Inpatient STAR Children's Lubbock	50.8%	23.7%	0.0%	0.0%	74.5%	
f.	Inpatient STAR Children's Nueces	40.4%	59.5%	0.0%	0.0%	99.8%	
g.	Inpatient STAR Children's Tarrant	27.2%	53.7%	0.0%	0.0%	80.8%	
h.	Inpatient STAR Children's Travis	25.4%	55.4%	0.0%	0.0%	80.9%	
i.	Inpatient STAR Non-state-owned IMD Bexar	86.2%	5.5%	0.0%	0.0%	91.7%	
j.	Inpatient STAR Non-state-owned IMD Dallas	71.1%	27.1%	0.0%	0.0%	98.2%	
							-
k	Inpatient STAR Non-state-owned IMD El Paso	78.1%	12.6%	0.0%	0.0%	90.7%	
l.	Inpatient STAR Non-state-owned IMD Harris	70.6%	22.9%	0.0%	0.0%	93.5%	
m.	Inpatient STAR Non-state-owned IMD Lubbock	84.2%	15.8%	0.0%	0.0%	100.0%	
	Inpatient STAR Non-state-owned IMD MRSA						
n.	Central	90.7%	9.1%	0.0%	0.0%	99.8%	
	Inpatient STAR Non-state-owned IMD MRSA	22.20/					
0.	West	80.2%	18.0%	0.0%	0.0%	98.2%	
p.	Inpatient STAR Non-state-owned IMD Tarrant	71.6%	28.1%	0.0%	0.0%	99.7%	
q.	Inpatient STAR Non-state-owned IMD Travis	76.5%	23.3%	0.0%	0.0%	99.8%	
r.	Inpatient STAR Rural Bexar	51.4%	48.5%	0.0%	0.0%	100.0%	
S.	Inpatient STAR Rural Dallas	46.7%	34.0%	0.0%	0.0%	80.8%	
t.	Inpatient STAR Rural MRSA Northeast	79.4%	1.3%	0.0%	0.0%	80.7%	
u.	Inpatient STAR Rural Tarrant	51.3%	29.6%	0.0%	0.0%	80.9%	
V.	Inpatient STAR Rural Travis	70.5%	10.2%	0.0%	0.0%	80.8%	
W.	Inpatient STAR State-owned non-IMD Harris	79.4%	19.8%	0.0%	0.0%	99.2%	
х.	Inpatient STAR Urban Bexar	39.2%	25.0%	0.0%	18.1%	82.3%	
у.	Inpatient STAR Urban Dallas	23.5%	22.8%	0.0%	10.2%	56.6%	
Z.	Inpatient STAR Urban El Paso	25.5%	13.3%	0.0%	19.1%	57.9%	
aa.	Inpatient STAR Urban Harris	29.2%	47.4%	0.0%	5.2%	81.8%	
bb.	Inpatient STAR Urban Hidalgo	31.8%	34.1%	0.0%	0.0%	65.8%	
cc.	Inpatient STAR Urban Jefferson	39.4%	29.7%	0.0%	0.0%	69.1%	
dd.	Inpatient STAR Urban MRSA Central	32.1%	27.0%	0.0%	0.0%	59.1%	
ee.	Inpatient STAR Urban MRSA Northeast	27.1%	25.5%	0.0%	0.0%	52.7%	
ff.	Inpatient STAR Urban MRSA West	28.0%	17.0%	0.0%	9.3%	54.3%	
gg.	Inpatient STAR Urban Nueces	33.1%	28.1%	0.0%	23.3%	84.5%	
hh.	Inpatient STAR Urban Tarrant	22.5%	25.7%	0.0%	0.0%	48.2%	
ii.	Inpatient STAR Urban Travis	34.73%	14.25%	0.00%	0.00%	49.0%	
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PREPRINT SECTION III: PROVIDER CLASS AND ASSESSMENT OF REASONABLENESS ADDENDUM TABLE 2.A. PROVIDER PAYMENT ANALYSES

Directions

2. For payment arrangements that are intended to require plans to make a payment in addition to the negotiated rates (as noted in option c in Question 22 of the State Directed Payment preprint file), please use the rows in Table 2.A below to add provider classes to Table 2 and an analysis showing the impact of the SDP on payment levels for each additional provider class. States may also use Table 2.A in lieu of completing Table 2 in the preprint. Input data only in beige cells in columns B - G.

TABLE 2.A.6 Inpatient STAR PLUS UHRIP + ACIA Payment Levels Compared to ACR UPL							

Column1	Provider Class(es)	Average Base Payment Level from Plans to Providers (absent the SDP)	of SDP	Effect on Total Payment Level of Other SDPs	(PTPs)	accounting for all SDPs and PTPs)	
Data Format	Free text	Percent (#.##%)	Percent (#.##%)	Percent (#.##%) or N/A	Percent (#.##%) or N/A	Percent (#.##%)	
Example:	Rural Inpatient Hospital Services	80.0%	20.0%	N/A	N/A	100.0%	
a.	Inpatient STAR PLUS Children's Bexar	2.0%	78.7%	0.0%	0.0%	80.7%	
b.	Inpatient STAR PLUS Children's Dallas	18.3%	51.2%	0.0%	0.0%	69.5%	
C.	Inpatient STAR PLUS Children's El Paso	44.4%	36.4%	0.0%	0.0%	80.8%	
d.	Inpatient STAR PLUS Children's Harris	23.3%	62.5%	0.0%	0.0%	85.8%	
e.	Inpatient STAR PLUS Children's Lubbock	52.7%	22.2%	0.0%	0.0%	74.9%	
f.	Inpatient STAR PLUS Children's Nueces	19.0%	80.9%	0.0%	0.0%	99.9%	
g.	Inpatient STAR PLUS Children's Tarrant	27.0%	53.7%	0.0%	0.0%	80.7%	
h.	Inpatient STAR PLUS Children's Travis	15.9%	64.8%	0.0%	0.0%	80.8%	
i.	Inpatient STAR PLUS Non-state-owned IMD Dallas	36.4%	48.7%	0.0%	0.0%	85.1%	
j.	Inpatient STAR PLUS Rural Bexar	50.8%	37.7%	0.0%	0.0%	88.5%	
k.	Inpatient STAR PLUS Rural Dallas	44.0%	37.0%	0.0%	0.0%	81.0%	
I.	Inpatient STAR PLUS Rural Hidalgo	72.7%	8.1%	0.0%	0.0%	80.7%	
m.	Inpatient STAR PLUS Rural Lubbock	95.6%	4.3%	0.0%	0.0%	100.0%	
n.	Inpatient STAR PLUS Rural MRSA Central	89.3%	2.0%	0.0%	0.0%	91.3%	
0.	Inpatient STAR PLUS Rural Nueces	82.4%	4.6%	0.0%	0.0%	87.0%	
p.	Inpatient STAR PLUS Rural Tarrant	50.9%	29.9%	0.0%	0.0%	80.9%	
a	Inpatient STAR PLUS State-owned non-IMD Harris	87.5%	11.7%	0.0%	0.0%	99.2%	
r.	Inpatient STAR PLUS State-owned non-IMD MRSA Northeast	88.5%	11.5%	0.0%	0.0%	99.9%	
S.	Inpatient STAR PLUS Urban Bexar	27.6%	26.8%	0.0%	0.3%	54.8%	
t.	Inpatient STAR PLUS Urban Dallas	22.5%	42.2%	0.0%	0.0%	64.8%	
u.	Inpatient STAR PLUS Urban El Paso	17.7%	27.3%	0.0%	0.0%	45.0%	
v.	Inpatient STAR PLUS Urban Harris	18.4%	49.5%	0.0%	0.0%	67.9%	
w.	Inpatient STAR PLUS Urban Hidalgo	29.4%	31.2%	0.0%	0.0%	60.6%	
x.	Inpatient STAR PLUS Urban Jefferson	32.2%	42.0%	0.0%	0.0%	74.2%	
у.	Inpatient STAR PLUS Urban Lubbock	25.7%	14.4%	0.0%	4.9%	44.9%	
Z.	Inpatient STAR PLUS Urban MRSA Central	33.3%	27.6%	0.0%	0.0%	60.9%	
аа.	Inpatient STAR PLUS Urban MRSA Northeast	28.8%	23.2%	0.0%	0.0%	51.9%	
bb.	Inpatient STAR PLUS Urban MRSA West	25.7%	25.1%	0.0%	0.0%	50.9%	
cc.	Inpatient STAR PLUS Urban Nueces	28.3%	20.4%	0.0%	2.2%	50.9%	
dd.	Inpatient STAR PLUS Urban Tarrant	18.8%	46.1%	0.0%	0.0%	64.9%	
ee.	Inpatient STAR PLUS Urban Travis	18.5%	28.0%	0.0%	0.0%	46.5%	
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PREPRINT SECTION III: PROVIDER CLASS AND ASSESSMENT OF REASONABLENESS		
ADDENDUM TABLE 2.A. PROVIDER PAYMENT ANALYSES		

2. For payment arrangements that are intended to require plans to make a payment in addition to the negotiated rates (as noted in option c in Question 22 of the State Directed Payment preprint file), please use the rows in Table 2.A below to add provider classes to Table 2 and an analysis showing the impact of the SDP on payment levels for each additional provider class. States may also use Table 2.A in lieu of completing Table 2 in the preprint. Input data only in beige cells in columns B - G.

TABLE 2.A.7 Out	patient STAR UHRIP	+ ACIA Payment	t Levels Com	pared to ACR UPL

Column Provider Classics								
Data Format			from Plans to Providers (absent			of Pass-Through Payments	accounting for all SDPs and	
Example: Rural Impatient Propriets Services 80.0% 20.0% N/A N/A 1700.0%		,				, -,		
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V. Outpatient STAR Urban Bexar 43.4% 51.7% 0.0% 0.0% 95.0% w. Outpatient STAR Urban Dallas 22.9% 37.5% 0.0% 0.0% 60.4% x. Outpatient STAR Urban El Paso 28.9% 26.8% 0.0% 0.0% 55.7% y. Outpatient STAR Urban Harris 57.7% 28.3% 0.0% 0.0% 86.0% z. Outpatient STAR Urban Hidalgo 33.7% 39.7% 0.0% 0.0% 73.4% aa. Outpatient STAR Urban Jefferson 20.5% 38.6% 0.0% 0.0% 59.2% bb. Outpatient STAR Urban Lubbock 30.3% 33.3% 0.0% 0.0% 63.6% cc. Outpatient STAR Urban MRSA Central 28.1% 30.5% 0.0% 0.0% 58.6% odd. Outpatient STAR Urban MRSA Northeast 10.6% 34.3% 0.0% 0.0% 58.6% ee. Outpatient STAR Urban MRSA West 19.8% 38.6% 0.0% 0.0% 58.4% ff.	t.	Outpatient STAR Rural Travis	49.0%	31.8%	0.0%	0.0%	80.8%	
w. Outpatient STAR Urban Dallas 22.9% 37.5% 0.0% 0.0% 60.4% x. Outpatient STAR Urban El Paso 28.9% 26.8% 0.0% 0.0% 55.7% y. Outpatient STAR Urban Harris 57.7% 28.3% 0.0% 0.0% 86.0% z. Outpatient STAR Urban Hidalgo 33.7% 39.7% 0.0% 0.0% 73.4% aa. Outpatient STAR Urban Jefferson 20.5% 38.6% 0.0% 0.0% 59.2% bb. Outpatient STAR Urban Lubbock 30.3% 33.3% 0.0% 0.0% 59.2% bb. Outpatient STAR Urban MRSA Central 28.1% 30.5% 0.0% 0.0% 58.6% dd. Outpatient STAR Urban MRSA Northeast 10.6% 34.3% 0.0% 0.0% 44.9% ee. Outpatient STAR Urban MRSA West 19.8% 38.6% 0.0% 0.0% 55.4% gg. Outpatient STAR Urban Tarrant 24.1% 48.9% 0.0% 0.0% 77.4% li.	u.	Outpatient STAR State-owned non-IMD Harris	45.1%	54.2%	0.0%	0.0%	99.3%	
x. Outpatient STAR Urban El Paso 28.9% 26.8% 0.0% 0.0% 55.7% y. Outpatient STAR Urban Haris 57.7% 28.3% 0.0% 0.0% 86.0% z. Outpatient STAR Urban Hidalgo 33.7% 39.7% 0.0% 0.0% 73.4% aa. Outpatient STAR Urban Jefferson 20.5% 38.6% 0.0% 0.0% 59.2% bb. Outpatient STAR Urban Lubbock 30.3% 33.3% 0.0% 0.0% 63.6% cc. Outpatient STAR Urban MRSA Central 28.1% 30.5% 0.0% 0.0% 58.6% dd. Outpatient STAR Urban MRSA Northeast 10.6% 34.3% 0.0% 0.0% 44.9% ee. Outpatient STAR Urban MRSA West 19.8% 38.6% 0.0% 0.0% 58.4% ff. Outpatient STAR Urban Nueces 30.7% 35.2% 0.0% 0.0% 65.9% gg. Outpatient STAR Urban Tarrant 24.1% 48.9% 0.0% 0.0% 77.4% ii.	v.	Outpatient STAR Urban Bexar	43.4%	51.7%	0.0%	0.0%	95.0%	
y. Outpatient STAR Urban Harris 57.7% 28.3% 0.0% 0.0% 86.0% z. Outpatient STAR Urban Hidialgo 33.7% 39.7% 0.0% 0.0% 73.4% aa. Outpatient STAR Urban Jefferson 20.5% 38.6% 0.0% 0.0% 59.2% bb. Outpatient STAR Urban Lubbock 30.3% 33.3% 0.0% 0.0% 63.6% cc. Outpatient STAR Urban MRSA Central 28.1% 30.5% 0.0% 0.0% 58.6% dd. Outpatient STAR Urban MRSA Northeast 10.6% 34.3% 0.0% 0.0% 44.9% de. Outpatient STAR Urban MRSA West 19.8% 38.6% 0.0% 0.0% 44.9% ff. Outpatient STAR Urban Nucces 30.7% 35.2% 0.0% 0.0% 56.9% gg. Outpatient STAR Urban Tarant 24.1% 48.9% 0.0% 0.0% 77.4% ii. iii. iii. iii. iii. iii. iii. iii. iii. iii.	w.	Outpatient STAR Urban Dallas	22.9%	37.5%	0.0%	0.0%	60.4%	
z. Outpatient STAR Urban Hidalgo 33.7% 39.7% 0.0% 0.0% 73.4% aa. Outpatient STAR Urban Jefferson 20.5% 38.6% 0.0% 0.0% 59.2% bb. Outpatient STAR Urban Lubbock 30.3% 33.3% 0.0% 0.0% 63.6% cc. Outpatient STAR Urban MRSA Central 28.1% 30.5% 0.0% 0.0% 58.6% dd. Outpatient STAR Urban MRSA Northeast 10.6% 34.3% 0.0% 0.0% 44.9% ee. Outpatient STAR Urban MRSA West 19.8% 38.6% 0.0% 0.0% 58.4% ff. Outpatient STAR Urban Nueces 30.7% 35.2% 0.0% 0.0% 65.9% gg. Outpatient STAR Urban Tarrant 24.1% 48.9% 0.0% 0.0% 73.0% hh. Outpatient STAR Urban Travis 30.9% 46.5% 0.0% 0.0% 77.4% ii. Iii. Iii. Iii. Iii. Iii. Iii. Iii. Iii. Iii.	x.	Outpatient STAR Urban El Paso	28.9%	26.8%	0.0%	0.0%	55.7%	
aa. Outpatient STAR Urban Jefferson 20.5% 38.6% 0.0% 0.0% 59.2% bb. Outpatient STAR Urban Lubbock 30.3% 33.3% 0.0% 0.0% 63.6% cc. Outpatient STAR Urban MRSA Central 28.1% 30.5% 0.0% 0.0% 58.6% dd. Outpatient STAR Urban MRSA Northeast 10.6% 34.3% 0.0% 0.0% 44.9% ee. Outpatient STAR Urban MRSA West 19.8% 38.6% 0.0% 0.0% 58.4% ff. Outpatient STAR Urban Nueces 30.7% 35.2% 0.0% 0.0% 65.9% gg. Outpatient STAR Urban Tarrant 24.1% 48.9% 0.0% 0.0% 73.0% ii. Ii. Iii.	у.	Outpatient STAR Urban Harris	57.7%	28.3%	0.0%	0.0%	86.0%	
bb. Outpatient STAR Urban Lubbock 30.3% 33.3% 0.0% 0.0% 63.6% cc. Outpatient STAR Urban MRSA Central 28.1% 30.5% 0.0% 0.0% 58.6% dd. Outpatient STAR Urban MRSA Northeast 10.6% 34.3% 0.0% 0.0% 0.0% 44.9% ee. Outpatient STAR Urban MRSA West 19.8% 38.6% 0.0% 0.0% 0.0% 58.4% ff. Outpatient STAR Urban Nucces 30.7% 35.2% 0.0% 0.0% 0.0% 65.9% gg. Outpatient STAR Urban Tarrant 24.1% 48.9% 0.0% 0.0% 0.0% 73.0% hh. Outpatient STAR Urban Travis 30.9% 46.5% 0.0% 0.0% 0.0% 77.4% ii. jj. kk. II. III. III. III. III. III. I	z.	Outpatient STAR Urban Hidalgo	33.7%	39.7%	0.0%	0.0%	73.4%	
cc. Outpatient STAR Urban MRSA Central 28.1% 30.5% 0.0% 0.0% 58.6% dd. Outpatient STAR Urban MRSA Northeast 10.6% 34.3% 0.0% 0.0% 44.9% ee. Outpatient STAR Urban MRSA West 19.8% 38.6% 0.0% 0.0% 58.4% ff. Outpatient STAR Urban Nueces 30.7% 35.2% 0.0% 0.0% 65.9% gg. Outpatient STAR Urban Tarrant 24.1% 48.9% 0.0% 0.0% 73.0% hh. Outpatient STAR Urban Travis 30.9% 46.5% 0.0% 0.0% 77.4% ii. Ij. Il.	aa.	Outpatient STAR Urban Jefferson	20.5%	38.6%	0.0%	0.0%	59.2%	
dd. Outpatient STAR Urban MRSA Northeast 10.6% 34.3% 0.0% 0.0% 44.9% ee. Outpatient STAR Urban MRSA West 19.8% 38.6% 0.0% 0.0% 58.4% ff. Outpatient STAR Urban Nueces 30.7% 35.2% 0.0% 0.0% 65.9% gg. Outpatient STAR Urban Tarrant 24.1% 48.9% 0.0% 0.0% 73.0% hh. Outpatient STAR Urban Travis 30.9% 46.5% 0.0% 0.0% 77.4% ii. jj. kk. Il.	bb.	Outpatient STAR Urban Lubbock	30.3%	33.3%	0.0%	0.0%	63.6%	
ee. Outpatient STAR Urban MRSA West 19.8% 38.6% 0.0% 0.0% 58.4% ff. Outpatient STAR Urban Nueces 30.7% 35.2% 0.0% 0.0% 65.9% gg. Outpatient STAR Urban Tarrant 24.1% 48.9% 0.0% 0.0% 73.0% hh. Outpatient STAR Urban Travis 30.9% 46.5% 0.0% 0.0% 77.4% ii. jj. kk. II. III.	cc.	Outpatient STAR Urban MRSA Central	28.1%	30.5%	0.0%	0.0%	58.6%	
ee. Outpatient STAR Urban MRSA West 19.8% 38.6% 0.0% 0.0% 58.4% ff. Outpatient STAR Urban Nueces 30.7% 35.2% 0.0% 0.0% 65.9% gg. Outpatient STAR Urban Tarrant 24.1% 48.9% 0.0% 0.0% 73.0% hh. Outpatient STAR Urban Travis 30.9% 46.5% 0.0% 0.0% 77.4% ii. jj. kk. Il. Il. </td <td>dd.</td> <td>Outpatient STAR Urban MRSA Northeast</td> <td>10.6%</td> <td>34.3%</td> <td>0.0%</td> <td>0.0%</td> <td>44.9%</td> <td></td>	dd.	Outpatient STAR Urban MRSA Northeast	10.6%	34.3%	0.0%	0.0%	44.9%	
ff. Outpatient STAR Urban Nueces 30.7% 35.2% 0.0% 0.0% 65.9% gg. Outpatient STAR Urban Tarrant 24.1% 48.9% 0.0% 0.0% 73.0% hh. Outpatient STAR Urban Travis 30.9% 46.5% 0.0% 0.0% 77.4% ii. jj. kk. II. III. III. <td< td=""><td></td><td>Outpatient STAR Urban MRSA West</td><td>19.8%</td><td>38.6%</td><td>0.0%</td><td>0.0%</td><td>58.4%</td><td></td></td<>		Outpatient STAR Urban MRSA West	19.8%	38.6%	0.0%	0.0%	58.4%	
gg. Outpatient STAR Urban Tarrant 24.1% 48.9% 0.0% 0.0% 73.0% hh. Outpatient STAR Urban Travis 30.9% 46.5% 0.0% 0.0% 77.4% ii. Iii. Iiii. Iiii. Iii. Iiii.					0.0%	0.0%		
hh. Outpatient STAR Urban Travis 30.9% 46.5% 0.0% 0.0% 77.4% ii. jj. kk. II. III. II								
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PREPRINT SECTION III: PROVIDER CLASS AND ASSESSMENT OF REASONABLENESS		
ADDENDUM TABLE 2.A. PROVIDER PAYMENT ANALYSES		

2. For payment arrangements that are intended to require plans to make a payment in addition to the negotiated rates (as noted in option c in Question 22 of the State Directed Payment preprint file), please use the rows in Table 2.A below to add provider classes to Table 2 and an analysis showing the impact of the SDP on payment levels for each additional provider class. States may also use Table 2.A in lieu of completing Table 2 in the preprint. Input data only in beige cells in columns B - G.

TABLE 2.A.8 Outpatient STAR PLUS UHRIP + ACIA Payment Levels Compared to ACR
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		Average Base Payment Level			Effect on Total Payment Level		
Column1	Provider Class(es)	from Plans to Providers (absent the SDP)	Effect on Total Payment Level of SDP	Effect on Total Payment Level of Other SDPs	of Pass-Through Payments (PTPs)	accounting for all SDPs and PTPs)	
Data Format	Free text	Percent (#.##%)	Percent (#.##%)	Percent (#.##%) or N/A	Percent (#.##%) or N/A	Percent (#.##%)	
	Rural Inpatient Hospital Services	80.0%	20.0%	N/A	N/A	100.0%	
	Outpatient STAR PLUS Children's Bexar	11.4%	69.5%	0.0%	0.0%	80.9%	
	Outpatient STAR PLUS Children's Dallas	44.9%	36.2%	0.0%	0.0%	81.0%	
	Outpatient STAR PLUS Children's Harris	28.3%	55.7%	0.0%	0.0%	84.0%	
d	Outpatient STAR PLUS Children's Lubbock	14.2%	30.8%	0.0%	0.0%	44.9%	
e.	Outpatient STAR PLUS Children's Nueces	17.0%	33.5%	0.0%	0.0%	50.6%	
	Outpatient STAR PLUS Children's Travis	69.8%	19.6%	0.0%	0.0%	89.5%	
	Outpatient STAR PLUS Rural Bexar	43.0%	37.8%	0.0%	0.0%	80.8%	
	Outpatient STAR PLUS Rural Dallas	48.6%	32.4%	0.0%	0.0%	81.0%	
i.	Outpatient STAR PLUS Rural Harris	71.5%	25.9%	0.0%	0.0%	97.5%	
j.	Outpatient STAR PLUS Rural Hidalgo	77.9%	22.1%	0.0%	0.0%	100.0%	
k.	Outpatient STAR PLUS Rural Jefferson	42.2%	38.7%	0.0%	0.0%	80.9%	
I.	Outpatient STAR PLUS Rural Lubbock	20.2%	64.2%	0.0%	0.0%	84.4%	
m.	Outpatient STAR PLUS Rural MRSA Central	40.4%	40.6%	0.0%	0.0%	80.9%	
n.	Outpatient STAR PLUS Rural MRSA Northeast	42.5%	38.4%	0.0%	0.0%	80.9%	
_	Outpatient STAR PLUS Rural MRSA West	40.9%	40.0%	0.0%	0.0%	80.9%	
	Outpatient STAR PLUS Rural Nueces	27.5%	53.4%	0.0%	0.0%	80.9%	
q.	Outpatient STAR PLUS Rural Tarrant	21.0%	60.0%	0.0%	0.0%	81.0%	
r.	Outpatient STAR PLUS Rural Travis	43.7%	37.1%	0.0%	0.0%	80.9%	
	Outpatient STAR PLUS State-owned non-IMD						
	Harris	42.2%	57.4%	0.0%	0.0%	99.7%	
	Outpatient STAR PLUS State-owned non-IMD MRSA Northeast	55.4%	25.2%	0.0%	0.0%	80.6%	
-	Outpatient STAR PLUS Urban Bexar	25.8%	50.2%	0.0%	0.0%	76.0%	
	Outpatient STAR PLUS Orban Bexar Outpatient STAR PLUS Urban Dallas	25.8%	39.3%	0.0%	0.0%	76.0% 59.2%	
	Outpatient STAR PLUS Orban Dallas Outpatient STAR PLUS Urban El Paso	17.8%	39.3% 47.2%	0.0%	0.0%	64.9%	
	Outpatient STAR PLUS Urban Harris	22.5%	60.3%	0.0%	0.0%	82.7%	
X.	Outpatient STAR PLUS Urban Hidalgo	23.7%	43.9%	0.0%	0.0%	67.6%	
y.	Outpatient STAR PLUS Orban Hidaigo Outpatient STAR PLUS Urban Jefferson	23.7%	43.9% 37.3%	0.0%	0.0%	61.3%	
	Outpatient STAR PLUS Orban Jenerson Outpatient STAR PLUS Urban Lubbock	15.9%	41.8%	0.0%	0.0%	57.7%	
	Outpatient STAR PLOS Orban Lubbock Outpatient STAR PLUS Urban MRSA Central	22.0%	35.9%	0.0%	0.0%	58.0%	
DD.	Outpatient STAR FLOS Orban WRSA Central	22.0 /0	33.8 /6	0.076	0.0 /0	30.0 /6	
cc.	Outpatient STAR PLUS Urban MRSA Northeast	16.4%	32.4%	0.0%	0.0%	48.8%	
	Outpatient STAR PLUS Urban MRSA West	15.5%	40.3%	0.0%	0.0%	55.7%	
	Outpatient STAR PLUS Urban Nueces	16.8%	51.5%	0.0%	0.0%	68.3%	
	Outpatient STAR PLUS Urban Tarrant	19.7%	52.6%	0.0%	0.0%	72.3%	
gg.	Outpatient STAR PLUS Urban Travis	18.8%	58.2%	0.0%	0.0%	76.9%	
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PREPRINT SECTION III: PROVIDER CLASS AND ASSESSMEN	IT OF REASONABLENESS		
ADDENDUM TABLE 2.A. PROVIDER PAYMENT ANALYSES			

2. For payment arrangements that are intended to require plans to make a payment in addition to the negotiated rates (as noted in option c in Question 22 of the State Directed Payment preprint file), please use the rows in Table 2.A below to add provider classes to Table 2 and an analysis showing the impact of the SDP on payment levels for each additional provider class. States may also use Table 2.A in lieu of completing Table 2 in the preprint. Input data only in beige cells in columns B - G.

TABLE 2.A.9 In	patient STAR UHRIP ·	+ ACIA + APHRIQA Pa	syment Levels Compared to ACR L	JPL

Column1	Provider Class(es)	Average Base Payment Level from Plans to Providers (absent the SDP)	Effect on Total Payment Level of SDP	Effect on Total Payment Level of Other SDPs	Effect on Total Payment Level of Pass-Through Payments (PTPs)	Total Payment Level (after accounting for all SDPs and PTPs)	
Data Format	Free text	Percent (#.##%)	Percent (#.##%)	Percent (#.##%) or N/A	Percent (#.##%) or N/A	Percent (#.##%)	
Example:	Rural Inpatient Hospital Services	80.0%	20.0%	N/A	N/A	100.0%	
a.	Inpatient STAR Children's Bexar	48.9%	31.6%	0.0%	0.0%	80.5%	
b.	Inpatient STAR Children's Dallas	41.1%	38.7%	0.0%	0.0%	79.8%	
	Inpatient STAR Children's El Paso	57.2%	23.6%	0.0%	0.0%	80.8%	
d.	Inpatient STAR Children's Harris	44.0%	45.1%	0.0%	0.0%	89.0%	
e	Inpatient STAR Children's Lubbock	50.8%	30.1%	0.0%	0.0%	80.9%	
f.	Inpatient STAR Children's Nueces	40.4%	59.6%	0.0%	0.0%	100.0%	
g.	Inpatient STAR Children's Tarrant	27.2%	53.7%	0.0%	0.0%	80.8%	
h.	Inpatient STAR Children's Travis	25.4%	55.4%	0.0%	0.0%	80.9%	
i	Inpatient STAR Non-state-owned IMD Bexar	86.2%	5.5%	0.0%	0.0%	91.7%	
j	Inpatient STAR Non-state-owned IMD Dallas	71.1%	27.1%	0.0%	0.0%	98.2%	
k.	Inpatient STAR Non-state-owned IMD El Paso	78.1%	12.6%	0.0%	0.0%	90.7%	
I.	Inpatient STAR Non-state-owned IMD Harris	70.6%	22.9%	0.0%	0.0%	93.5%	
m.	Inpatient STAR Non-state-owned IMD Lubbock	84.2%	15.8%	0.0%	0.0%	100.0%	
	Inpatient STAR Non-state-owned IMD MRSA						
n.	Central	90.7%	9.1%	0.0%	0.0%	99.8%	
	Inpatient STAR Non-state-owned IMD MRSA	00.00/	10.00/	0.00/	0.00/	00.00/	
0.	West	80.2%	18.0%	0.0%	0.0%	98.2%	
p	Inpatient STAR Non-state-owned IMD Tarrant	71.6% 76.5%	28.1% 23.3%	0.0%	0.0%	99.7% 99.8%	
<u>q.</u>	Inpatient STAR Non-state-owned IMD Travis			****	0.0%	***************************************	
<u>r.</u>	Inpatient STAR Rural Bexar	51.4% 46.7%	48.5%	0.0% 0.0%	0.0%	100.0% 80.8%	
S.	Inpatient STAR Rural Dallas Inpatient STAR Rural MRSA Northeast	79.4%	34.0% 1.3%	0.0%	0.0%	80.8%	
ι.	Inpatient STAR Rural MRSA Northeast	79.4% 51.3%	29.6%	0.0%	0.0%	80.9%	
u.	Inpatient STAR Rural Tarrant Inpatient STAR Rural Travis	70.5%	10.2%	0.0%	0.0%	80.8%	
v. w.	Inpatient STAR Rulai Travis Inpatient STAR State-owned non-IMD Harris	70.5%	19.8%	0.0%	0.0%	99.2%	
vv.	Inpatient STAR State-owned non-IMD Hams	39.2%	34.4%	0.0%	18.1%	99.2%	
<u>.</u>	Inpatient STAR Orban Bexar	23.5%	42.2%	0.0%	10.2%	76.0%	
y. 7	Inpatient STAR Orban Dallas	25.5%	33.0%	0.0%	19.1%	76.0%	
aa.	Inpatient STAR Orban El Paso	29.2%	55.5%	0.0%	5.2%	89.9%	
bb.	Inpatient STAR Orban Hidalgo	31.8%	47.4%	0.0%	0.0%	79.1%	
cc.	Inpatient STAR Orban Flidago	39.4%	38.4%	0.0%	0.0%	77.8%	
dd.	Inpatient STAR Orban MRSA Central	32.1%	47.6%	0.0%	0.0%	79.7%	
ee.	Inpatient STAR Urban MRSA Northeast	27.1%	53.2%	0.0%	0.0%	80.4%	
ff.	Inpatient STAR Urban MRSA West	28.0%	40.8%	0.0%	9.3%	78.1%	
gg.	Inpatient STAR Urban Nueces	33.1%	38.8%	0.0%	23.3%	95.3%	
hh.	Inpatient STAR Orban Nucces	22.45%	50.83%	0.00%	0.00%	73.28%	-
ii	Inpatient STAR Urban Travis	34.73%	40.52%	0.00%	0.00%	75.24%	
ii ii	mpadont of rat orban fravio	31.7070	10.0270	0.0070	5.5070	10.27/0	
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PREPRINT SECTION III: PROVIDER CLASS AND ASSESSMENT OF REASONABLENESS			
ADDENDUM TABLE 2.A. PROVIDER PAYMENT ANALYSES			

2. For payment arrangements that are intended to require plans to make a payment in addition to the negotiated rates (as noted in option c in Question 22 of the State Directed Payment preprint file), please use the rows in Table 2.A below to add provider classes to Table 2 and an analysis showing the impact of the SDP on payment levels for each additional provider class. States may also use Table 2.A in lieu of completing Table 2 in the preprint. Input data only in beige cells in columns B - G.

TABLE 2.A.10 In	atient STAR PLUS UHRIP + ACIA + APHRIQA Payment Levels Compared	to ACR UPL

		Average Base Payment Level			Effect on Total Payment Level		
Column1	Provider Class(es)	from Plans to Providers (absent the SDP)	Effect on Total Payment Level of SDP	Effect on Total Payment Level of Other SDPs	of Pass-Through Payments (PTPs)	accounting for all SDPs and PTPs)	
Data Format	Free text	Percent (#.##%)	Percent (#.##%)	Percent (#.##%) or N/A	Percent (#.##%) or N/A	Percent (#.##%)	
Example:	Rural Inpatient Hospital Services	80.0%	20.0%	N/A	N/A	100.0%	
а.	Inpatient STAR PLUS Children's Bexar	2.0%	78.7%	0.0%	0.0%	80.7%	
b.	Inpatient STAR PLUS Children's Dallas	18.3%	53.6%	0.0%	0.0%	71.9%	
C.	Inpatient STAR PLUS Children's El Paso	44.4%	36.4%	0.0%	0.0%	80.8%	
d.	Inpatient STAR PLUS Children's Harris	23.3%	62.5%	0.0%	0.0%	85.8%	
e.	Inpatient STAR PLUS Children's Lubbock	52.7%	27.8%	0.0%	0.0%	80.5%	
f.	Inpatient STAR PLUS Children's Nueces	19.0%	81.0%	0.0%	0.0%	100.0%	
g.	Inpatient STAR PLUS Children's Tarrant	27.0%	53.7%	0.0%	0.0%	80.7%	
h.	Inpatient STAR PLUS Children's Travis	15.9%	64.8%	0.0%	0.0%	80.8%	
	Inpatient STAR PLUS Non-state-owned IMD						
i	Dallas	36.4%	48.7%	0.0%	0.0%	85.1%	
j.	Inpatient STAR PLUS Rural Bexar	50.8%	37.7%	0.0%	0.0%	88.5%	
k.	Inpatient STAR PLUS Rural Dallas	44.0%	37.0%	0.0%	0.0%	81.0%	
l.	Inpatient STAR PLUS Rural Hidalgo	72.7%	8.1%	0.0%	0.0%	80.7%	
m.	Inpatient STAR PLUS Rural Lubbock	95.6%	4.3%	0.0%	0.0%	100.0%	
n.	Inpatient STAR PLUS Rural MRSA Central	89.3%	2.0%	0.0%	0.0%	91.3%	
0.	Inpatient STAR PLUS Rural Nueces	82.4%	4.6%	0.0%	0.0%	87.0%	
p.	Inpatient STAR PLUS Rural Tarrant	50.9%	29.9%	0.0%	0.0%	80.9%	
	Inpatient STAR PLUS State-owned non-IMD						
q.	Harris	87.5%	11.7%	0.0%	0.0%	99.2%	
	Inpatient STAR PLUS State-owned non-IMD						
r.	MRSA Northeast	88.5%	11.5%	0.0%	0.0%	99.9%	
S.	Inpatient STAR PLUS Urban Bexar	27.6%	38.3%	0.0%	0.3%	66.3%	
t.	Inpatient STAR PLUS Urban Dallas	22.5%	61.0%	0.0%	0.0%	83.5%	
u.	Inpatient STAR PLUS Urban El Paso	17.7%	62.9%	0.0%	0.0%	80.6%	
V.	Inpatient STAR PLUS Urban Harris	18.4%	57.8%	0.0%	0.0%	76.2%	
W.	Inpatient STAR PLUS Urban Hidalgo	29.4%	43.6%	0.0%	0.0%	73.0%	
х.	Inpatient STAR PLUS Urban Jefferson	32.2%	52.4%	0.0%	0.0%	84.6%	
у.	Inpatient STAR PLUS Urban Lubbock	25.7%	36.5%	0.0%	4.9%	67.0%	
Z.	Inpatient STAR PLUS Urban MRSA Central	33.3%	46.9%	0.0%	0.0%	80.2%	
	Inpatient STAR PLUS Urban MRSA Northeast	28.8%	50.6%	0.0%	0.0%	79.3%	
bb.	Inpatient STAR PLUS Urban MRSA Northeast	25.7%	53.9%	0.0%	0.0%	79.7%	
CC.	Inpatient STAR PLUS Urban Nueces	25.7%	33.0%	0.0%	2.2%	63.4%	
dd.	Inpatient STAR PLUS Urban Tarrant	18.8%	64.0%	0.0%	0.0%	82.8%	
ee.	Inpatient STAR PLUS Urban Travis	18.5%	62.2%	0.0%	0.0%	80.7%	
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PREPRINT SECTION III: PROVIDER CLASS AND ASSESSMEN				
ADDENDUM TABLE 2.A. PROVIDER PAYMENT ANALYSES				

2. For payment arrangements that are intended to require plans to make a payment in addition to the negotiated rates (as noted in option c in Question 22 of the State Directed Payment preprint file), please use the rows in Table 2.A below to add provider classes to Table 2 and an analysis showing the impact of the SDP on payment levels for each additional provider class. States may also use Table 2.A in lieu of completing Table 2 in the preprint. Input data only in beige cells in columns B - G.

TABLE 2.A.11 Out	patient STAR UHRIP	' + ACIA + APHRIQA P	ayment Levels Com	pared to ACR

		Average Base Payment Level			Effect on Total Payment Level	Total Payment Level (after	
Column1	Provider Class(es)	from Plans to Providers (absent the SDP)	Effect on Total Payment Level of SDP			accounting for all SDPs and PTPs)	
Data Format	Free text	Percent (#.##%)	Percent (#.##%)	Percent (#.##%) or N/A	Percent (#.##%) or N/A	Percent (#.##%)	
Example:	Rural Inpatient Hospital Services	80.0%	20.0%	N/A	N/A	100.0%	
a.	Outpatient STAR Children's Bexar	12.8%	68.2%	0.0%	0.0%	80.9%	
b.	Outpatient STAR Children's Dallas	54.8%	26.9%	0.0%	0.0%	81.6%	
C.	Outpatient STAR Children's El Paso	10.9%	70.0%	0.0%	0.0%	80.9%	
d.	Outpatient STAR Children's Harris	34.1%	50.8%	0.0%	0.0%	84.8%	
e.	Outpatient STAR Children's Lubbock	12.0%	68.8%	0.0%	0.0%	80.8%	
f.	Outpatient STAR Children's Nueces	32.9%	47.4%	0.0%	0.0%	80.3%	
g.	Outpatient STAR Children's Tarrant	40.6%	40.4%	0.0%	0.0%	81.0%	
h.	Outpatient STAR Children's Travis	21.9%	59.6%	0.0%	0.0%	81.5%	
	Outpatient STAR Rural Bexar	56.5%	24.3%	0.0%	0.0%	80.9%	
j.	Outpatient STAR Rural Dallas	5.5%	75.3%	0.0%	0.0%	80.8%	
k.	Outpatient STAR Rural Harris	72.5%	26.8%	0.0%	0.0%	99.3%	
l.	Outpatient STAR Rural Hidalgo	62.0%	18.6%	0.0%	0.0%	80.6%	
m.	Outpatient STAR Rural Jefferson	62.3%	18.5%	0.0%	0.0%	80.8%	
n.	Outpatient STAR Rural Lubbock	65.0%	34.2%	0.0%	0.0%	99.2%	
0.	Outpatient STAR Rural MRSA Central	55.0%	25.8%	0.0%	0.0%	80.8%	
p.	Outpatient STAR Rural MRSA Northeast	24.5%	56.3%	0.0%	0.0%	80.8%	
q.	Outpatient STAR Rural MRSA West	57.4%	23.5%	0.0%	0.0%	81.0%	
r.	Outpatient STAR Rural Nueces	52.5%	28.5%	0.0%	0.0%	80.9%	
s.	Outpatient STAR Rural Tarrant	27.1%	53.8%	0.0%	0.0%	80.9%	
t.	Outpatient STAR Rural Travis	49.0%	31.8%	0.0%	0.0%	80.8%	
	Outpatient STAR State-owned non-IMD Harris	45.1%	54.2%	0.0%	0.0%	99.3%	
u.	Outpatient STAR State-owned Hon-INID Harris Outpatient STAR Urban Bexar	43.1%	56.6%	0.0%	0.0%	100.0%	
	Outpatient STAR Orban Bexar Outpatient STAR Urban Dallas	22.9%	58.3%	0.0%	0.0%	81.2%	
	Outpatient STAR Orban Dallas Outpatient STAR Urban El Paso	28.9%	54.0%	0.0%	0.0%	82.9%	
	Outpatient STAR Urban Harris	57.7%	32.6%	0.0%	0.0%	90.3%	
,	Outpatient STAR Urban Hidalgo	33.7%	54.8%	0.0%	0.0%	88.5%	
	Outpatient STAR Urban Jefferson	20.5%	59.4%	0.0%	0.0%	79.9%	
	Outpatient STAR Orban Jellerson Outpatient STAR Urban Lubbock	30.3%	47.2%	0.0%	0.0%	79.9%	
	Outpatient STAR Urban Lubbock Outpatient STAR Urban MRSA Central	28.1%	53.2%	0.0%	0.0%	77.5% 81.2%	
	Outpatient STAR Urban MRSA Central Outpatient STAR Urban MRSA Northeast	10.6%	53.2% 71.8%	0.0%	0.0%	81.2% 82.4%	
	Outpatient STAR Urban MRSA Northeast Outpatient STAR Urban MRSA West	10.6%	71.8% 62.6%	0.0%	0.0%	82.4% 82.3%	
	Outpatient STAR Urban MRSA West Outpatient STAR Urban Nueces	30.7%	62.6% 48.6%	0.0%	0.0%	82.3% 79.3%	
	Outpatient STAR Orban Nueces Outpatient STAR Urban Tarrant	24.1%	48.6% 67.9%	0.0%	0.0%	79.3% 92.0%	
	Outpatient STAR Orban Tarrant Outpatient STAR Urban Travis	30.89%	64.45%	0.0%	0.0%	92.0% 95.34%	
hh.	Outpatient STAR Ordan Travis	30.89%	04.45%	0.00%	0.00%	93.34%	
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PREPRINT SECTION III: PROVIDER CLASS AND ASSESSMEN	IT OF REASONABLENESS		
ADDENDUM TABLE 2.A. PROVIDER PAYMENT ANALYSES			

2. For payment arrangements that are intended to require plans to make a payment in addition to the negotiated rates (as noted in option c in Question 22 of the State Directed Payment preprint file), please use the rows in Table 2.A below to add provider classes to Table 2 and an analysis showing the impact of the SDP on payment levels for each additional provider class. States may also use Table 2.A in lieu of completing Table 2 in the preprint. Input data only in beige cells in columns B - G.

States should only submit the tables they populate to CMS; please do not submit the entire workbook unless the State inputs data into Tables 1.A - 8.A. For example, if the state only needs extra rows to complete Table 2. in the preprint, please delete Tabs 1.A and 3.A - 8.A. CMS requests States submit the addendum tables with the preprint in this Excel format; please do not merge and re-PDF the preprint.

TABLE 2.A.12 Outpatient STAR PLUS UHRIP + ACIA + APHRIQA Payment Levels Compared to ACR UPL

Column1	Provider Class(es)	Average Base Payment Level from Plans to Providers (absent the SDP)	Effect on Total Payment Level of SDP	Effect on Total Payment Level of Other SDPs	Effect on Total Payment Level of Pass-Through Payments (PTPs)	Total Payment Level (after accounting for all SDPs and PTPs)	
Data Format	Free text	Percent (#.##%)	Percent (#.##%)	Percent (#.##%) or N/A	Percent (#.##%) or N/A	Percent (#.##%)	
Example:	Rural Inpatient Hospital Services	80.0%	20.0%	N/A	N/A	100.0%	
a.	Outpatient STAR PLUS Children's Bexar	11.4%	69.5%	0.0%	0.0%	80.9%	
b.	Outpatient STAR PLUS Children's Dallas	44.9%	37.9%	0.0%	0.0%	82.7%	
C.	Outpatient STAR PLUS Children's Harris	28.3%	55.7%	0.0%	0.0%	84.0%	
d.	Outpatient STAR PLUS Children's Lubbock	14.2%	66.4%	0.0%	0.0%	80.6%	
e.	Outpatient STAR PLUS Children's Nueces	17.0%	65.4%	0.0%	0.0%	82.5%	
f.	Outpatient STAR PLUS Children's Travis	69.8%	19.6%	0.0%	0.0%	89.5%	
g.	Outpatient STAR PLUS Rural Bexar	43.0%	37.8%	0.0%	0.0%	80.8%	
h.	Outpatient STAR PLUS Rural Dallas	48.6%	32.4%	0.0%	0.0%	81.0%	
i.	Outpatient STAR PLUS Rural Harris	71.5%	25.9%	0.0%	0.0%	97.5%	
j.	Outpatient STAR PLUS Rural Hidalgo	77.9%	22.1%	0.0%	0.0%	100.0%	
k.	Outpatient STAR PLUS Rural Jefferson	42.2%	38.7%	0.0%	0.0%	80.9%	
l.	Outpatient STAR PLUS Rural Lubbock	20.2%	64.2%	0.0%	0.0%	84.4%	
m.	Outpatient STAR PLUS Rural MRSA Central	40.4%	40.6%	0.0%	0.0%	80.9%	
n.	Outpatient STAR PLUS Rural MRSA Northeast	42.5%	38.4%	0.0%	0.0%	80.9%	1
0.	Outpatient STAR PLUS Rural MRSA West	40.9%	40.0%	0.0%	0.0%	80.9%	
D.	Outpatient STAR PLUS Rural Nueces	27.5%	53.4%	0.0%	0.0%	80.9%	
a.	Outpatient STAR PLUS Rural Tarrant	21.0%	60.0%	0.0%	0.0%	81.0%	
r.	Outpatient STAR PLUS Rural Travis	43.7%	37.1%	0.0%	0.0%	80.9%	
	Outpatient STAR PLUS State-owned non-IMD						
s.	Harris	42.2%	57.4%	0.0%	0.0%	99.7%	ł
	Outpatient STAR PLUS State-owned non-IMD						
t.	MRSA Northeast	55.4%	25.2%	0.0%	0.0%	80.6%	
u.	Outpatient STAR PLUS Urban Bexar	25.8%	69.7%	0.0%	0.0%	95.5%	
V.	Outpatient STAR PLUS Urban Dallas	20.0%	62.1%	0.0%	0.0%	82.1%	
W.	Outpatient STAR PLUS Urban El Paso	17.8%	72.8%	0.0%	0.0%	90.6%	
X.	Outpatient STAR PLUS Urban Harris	22.5%	70.4%	0.0%	0.0%	92.9%	
у.	Outpatient STAR PLUS Urban Hidalgo	23.7%	60.9%	0.0%	0.0%	84.5%	
Z.	Outpatient STAR PLUS Urban Jefferson	24.0%	55.6%	0.0%	0.0%	79.5%	
aa.	Outpatient STAR PLUS Urban Lubbock	15.9%	65.2%	0.0%	0.0%	81.1%	
bb.	Outpatient STAR PLUS Urban MRSA Central	22.0%	61.3%	0.0%	0.0%	83.3%	
cc.	Outpatient STAR PLUS Urban MRSA Northeast	16.4%	66.5%	0.0%	0.0%	82.9%	1
dd.	Outpatient STAR PLUS Urban MRSA West	15.5%	67.1%	0.0%	0.0%	82.5%	
ee.	Outpatient STAR PLUS Urban Nueces	16.8%	71.7%	0.0%	0.0%	88.5%	
ff.	Outpatient STAR PLUS Urban Tarrant	19.7%	73.0%	0.0%	0.0%	92.8%	
gg.	Outpatient STAR PLUS Urban Travis	18.8%	80.7%	0.0%	0.0%	99.4%	ĺ
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			TAB	LE 4.A			
DDEDDINE OF	ECTION VI: FUNDING FOR THE NON-FEDERAL SHARE	1	T	T	I	I	
	TABLE 4.A. IGT TRANSFERRING ENTITIES						
Directions	Use Table 4.A below to add IGT transferring agencies to Tabeige cells in columns B - H. States should only submit the tables they populate to CMS; ple	·	·			·	
	delete Tabs 1.A - 3.A and 5.A - 8.A. CMS requests States sub						
	TABLE 4.A: IGT Transferring Entities Note 1 from HHSC: Amounts in the table below are suggested IGT at						
Column1	Name of Entity transferring funds (enter each on a separate line)	Operational nature of the Transferring Entity (State, County, City, Other)	Total Amounts Transferred by This Entity	Does the Transferring Entity have General Taxing Authority? (Yes or No)	Did the Transferring Entity receive appropriations? If not, put N/A. If yes, identify the level of appropriations	Is the Transferring Entity eligible for payment under this state directed payment? (Yes or No)	Notes
Data Format	Free text	Set values (select one)	Dollar (\$v vvv vvv 00)	Set values (select one)	Eroo toxt	Sot values (solect one)	Free text
Data Format	ANDREWS COUNTY HOSPITAL DISTRICT	Other (specify in "Notes" column)	\$ 1,284,594.86	Yes	Free text		Hospital Districts are non-state governmental entities with taxation authority created under the Texas Constitution or by a county as authorized by their applicable Texas statute.
ii.	ANSON HOSPITAL DISTRICT	Other (specify in "Notes" column)	\$ 155,381.77	Yes	N/A	Yes	Hospitial Districts are non-state governmental entities with taxation authority created under the Texas Constitution o by a county as authorized by their applicable Texas statute.
iii.	AUSTIN STATE HOSPITAL	State	\$ 2,019,429.75	No	\$ 542,464,655.00		State general revenue funds are not appropriated to individual state hospitals; therefore, the appropriation amount in column F is the amount appropriated for all state hospitals for FY 23. Hospital Districts are non-state governmental entities with
	BALLINGER MEMORIAL HOSPITAL DISTRICT	Other (specify in "Notes" column)	\$ 229,506.03	Yes	N/A		taxation authority created under the Texas Constitution o by a county as authorized by their applicable Texas statute.
v.	BAYLOR COUNTY HOSPITAL DISTRICT	Other (specify in "Notes" column)	\$ 229,500.03	Yes	N/A		Hospital Districts are non-state governmental entities with taxation authority created under the Texas Constitution of by a county as authorized by their applicable Texas statute.
vi.	BELLVILLE HOSPITAL DISTRICT	Other (specify in "Notes" column)	\$ 600,936.79	Yes	N/A		Hospital Districts are non-state governmental entities with taxation authority created under the Texas Constitution o by a county as authorized by their applicable Texas statute.
vii.	BEXAR COUNTY HOSPITAL DISTRICT	Other (specify in "Notes" column)	\$ 259,551,562.74	Yes	N/A		Hospital Districts are non-state governmental entities with taxation authority created under the Texas Constitution or by a county as authorized by their applicable Texas statute.
viii.	CALHOUN COUNTY	County	\$ 2,137,864.58	Yes	N/A	Yes	
ix.	CASTRO COUNTY HOSPITAL DISTRICT	Other (specify in "Notes" column)	\$ 373,237.19	Yes	N/A		Hospital Districts are non-state governmental entities with taxation authority created under the Texas Constitution o by a county as authorized by their applicable Texas statute. Hospital Districts are non-state governmental entities with
x. xi.	CHILDRESS COUNTY HOSPITAL DISTRICT CITY OF GRAHAM	Other (specify in "Notes" column)	\$ 1,367,621.19 \$ 1,585,635.23	Yes Yes	N/A N/A		Inspiral Districts are intrinsic governmental entities with taxation authority created under the Texas Constitution o by a county as authorized by their applicable Texas statute.
xii.	CLAY COUNTY	County	\$ 1,585,635.23	Yes	N/A N/A	Yes	
xiii.	COLEMAN COUNTY MEDICAL CENTER HOSPITAL DISTRICT	Other (specify in "Notes" column)	\$ 498,132.60	Yes	N/A		Hospital Districts are non-state governmental entities with taxation authority created under the Texas Constitution o by a county as authorized by their applicable Texas statute.
1							Hospital Districts are non-state governmental entities with

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column)

Other (specify in "Notes"

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COMANCHE COUNTY CONSOLIDATED HOSPITAL

DISTRICT

CONCHO COUNTY HOSPITAL DISTRICT

CORYELL COUNTY MEMORIAL HOSPITAL AUTHORITY

Yes

Yes

No

N/A

N/A

N/A

Yes

Yes

Yes

Hospital Districts are non-state governmental entities with taxation authority created under the Texas Constitution or

Hospital Districts are non-state governmental entities with taxation authority created under the Texas Constitution or

Hospital Authorities are non-state governmental entities created by a municipality or a county under Chapter 262 or 264, Health and Safety Code. Hospital Authorities do

by a county as authorized by their applicable Texas statute.

by a county as authorized by their applicable Texas statute.

not receive appropriations of state general revenue.

							Hospital Districts are non-state governmental entities with taxation authority created under the Texas Constitution or
		Other (specify in "Notes"					by a county as authorized by their applicable Texas
xvii.	COUNTY OF THROCKMORTON	column)	\$ 73,154.95	Yes	N/A	Yes	statute.
xviii. xix.	COUNTY OF VICTORIA COUNTY OF WARD	County	\$ 25,260,622.87 \$ 708,749.01	Yes Yes	N/A N/A	Yes Yes	
XX.	COUNTY OF WARD COUNTY OF YOAKUM	County County	\$ 962,658.08	Yes	N/A N/A	Yes	
***	COUNTY OF TOAKOW	County	φ 902,030.00	163	IN/A	163	Hospital Districts are non-state governmental entities with taxation authority created under the Texas Constitution or
xxi.	CRANE COUNTY HOSPITAL DISTRICT	Other (specify in "Notes" column)	\$ 303,709.62	Yes	N/A	Yes	by a county as authorized by their applicable Texas statute.
		Other (specify in "Notes"					Hospital Districts are non-state governmental entities with taxation authority created under the Texas Constitution or by a county as authorized by their applicable Texas
xxii.	DALLAM-HARTLEY COUNTIES HOSPITAL DISTRICT	column)	\$ 664,998.75	Yes	N/A	Yes	statute. Hospital Districts are non-state governmental entities with
xxiii.	DALLAS COUNTY HOSPITAL DISTRICT	Other (specify in "Notes" column)	\$ 640,182,641.54	Yes	N/A	Yes	taxation authority created under the Texas Constitution or by a county as authorized by their applicable Texas statute.
		Other (specify in "Notes"					Hospital Districts are non-state governmental entities with taxation authority created under the Texas Constitution or by a county as authorized by their applicable Texas
xxiv.	DAWSON COUNTY HOSPITAL DISTRICT	column)	\$ 1,129,956.41	Yes	N/A	Yes	statute. Hospital Districts are non-state governmental entities with
xxv.	DEAF SMITH COUNTY HOSPITAL DISTRICT	Other (specify in "Notes" column)	\$ 7,179,413.86	Yes	N/A	Yes	taxation authority created under the Texas Constitution or by a county as authorized by their applicable Texas statute.
		Other (specify in "Notes"					Hospital Authorities are non-state governmental entities created by a municipality or a county under Chapter 262 or 264, Health and Safety Code. Hospital Authorities do
xxvi.	DECATUR HOSPITAL AUTHORITY	column)	\$ 31,137,000.17	No	N/A	Yes	not receive appropriations of state general revenue. Hospital Districts are non-state governmental entities with
xxvii.	DEWITT MEDICAL DISTRICT	Other (specify in "Notes" column)	\$ 2,811,189.37	Yes	N/A	Yes	taxation authority created under the Texas Constitution or by a county as authorized by their applicable Texas statute.
		Other (specify in "Notes"					Hospital Districts are non-state governmental entities with taxation authority created under the Texas Constitution or by a county as authorized by their applicable Texas
xxviii.	DIMMIT REGIONAL HOSPITAL DISTRICT	column)	\$ 3,854,089.63	Yes	N/A	Yes	statute. Hospital Districts are non-state governmental entities with
xxix.	EASTLAND MEMORIAL HOSPITAL DISTRICT	Other (specify in "Notes" column)	\$ 1,208,152.65	Yes	N/A	Yes	taxation authority created under the Texas Constitution or by a county as authorized by their applicable Texas statute.
AAIA.	EXCIBITE MEMORY ETTOS TIME BIOTRICT	Columny	Ψ 1,200,102.00	100	14/7	100	Hospital Districts are non-state governmental entities with
xxx.	ECTOR COUNTY HOSPITAL DISTRICT	Other (specify in "Notes" column)	\$ 27,373,421.95	Yes	N/A	Yes	taxation authority created under the Texas Constitution or by a county as authorized by their applicable Texas statute.
	EL DAGO COUNTY HOODITAL DIOTDIOT	Other (specify in "Notes"	00 047 000 00	V	AI/A	V	Hospital Districts are non-state governmental entities with taxation authority created under the Texas Constitution or by a county as authorized by their applicable Texas
xxxi.	EL PASO COUNTY HOSPITAL DISTRICT	column)	\$ 33,247,369.98	Yes	N/A	Yes	statute. State general revenue funds are not appropriated to
xxxii.	EL PASO PSYCHIATRIC CENTER	State	\$ 308,650.61	No	\$ 542,464,655.00	Yes	individual state hospitals; therefore, the appropriation amount in column F is the amount appropriated for all state hospitals for FY 23.
vyviii	ELECTRA HOSPITAL DISTRICT	Other (specify in "Notes"	\$ 450,645.40	Yes	N/A	Yes	Hospital Districts are non-state governmental entities with taxation authority created under the Texas Constitution or by a county as authorized by their applicable Texas
xxxiii.	ELECTRA HOSPITAL DISTRICT	column)	\$ 450,645.40	162	IN/A	162	statute. Hospital Districts are non-state governmental entities with
xxxiv.	FAIRFIELD HOSPITAL DISTRICT	Other (specify in "Notes" column)	\$ 638,329.66	Yes	N/A	Yes	taxation authority created under the Texas Constitution or by a county as authorized by their applicable Texas statute.
XXXV.	FALLS COUNTY	County	\$ 951,034.89	Yes	N/A	Yes	
xxxvi.	FANNIN COUNTY HOSPITAL AUTHORITY	Other (specify in "Notes" column)	\$ 1,389,694.87	No	N/A	Yes	Hospital Authorities are non-state governmental entities created by a municipality or a county under Chapter 262 or 264, Health and Safety Code. Hospital Authorities do not receive appropriations of state general revenue.
xxxvii.	FISHER COUNTY HOSPITAL DISTRICT	Other (specify in "Notes" column)	\$ 241,808.49	Yes	N/A	Yes	Hospital Districts are non-state governmental entities with taxation authority created under the Texas Constitution or by a county as authorized by their applicable Texas statute.
xxxviii.	FREDERICKSBURG HOSPITAL AUTHORITY	Other (specify in "Notes" column)	\$ 6,321,630.04	No	N/A	Yes	Hospital Authorities are non-state governmental entities created by a municipality or a county under Chapter 262 or 264, Health and Safety Code. Hospital Authorities do not receive appropriations of state general revenue.

							Hospital Districts are non-state governmental entities with
handis	EDIO HOSPITAL DISTRICT	Other (specify in "Notes"	£ 4.459.454.00	Van	NI/A	Van	taxation authority created under the Texas Constitution or by a county as authorized by their applicable Texas
xxxix.	FRIO HOSPITAL DISTRICT	column)	\$ 1,458,451.90	Yes	N/A	Yes	statute. Hospital Districts are non-state governmental entities with
		Other (specify in "Notes"					taxation authority created under the Texas Constitution or by a county as authorized by their applicable Texas
xl.	GAINESVILLE HOSPITAL DISTRICT	column)	\$ 2,916,624.17	Yes	N/A	Yes	statute. Gonzales Healthcare Systems is a hospital district.
							Hospital Districts are non-state governmental entities with taxation authority created under the Texas Constitution or
xli.	GONZALES HEALTHCARE SYSTEMS	Other (specify in "Notes" column)	\$ 1,852,925.12	Yes	N/A	Yes	by a county as authorized by their applicable Texas statute.
,	0011212011212111011120112110	Goldminy	1,002,020.12		1071		The Board is the governing board of a public hospital. Members of the Board are appointed by the City of
xlii.	GUADALUPE COUNTY HOSPITAL BOARD	Other (specify in "Notes" column)	\$ 20,751,963.37	Yes	N/A	Yes	Seguin, Guadalupe County, or jointly by the county and the city. The hospital is a unit of local government.
AIII.	GOADALOF E COONTE HOSFITAL BOARD	Columny	φ 20,731,903.37	165	IWA	163	Hospital Districts are non-state governmental entities with
	HAMILTON COUNTY HOODITAL DISTRICT	Other (specify in "Notes"	r 070 047 00	V	N/A	V	taxation authority created under the Texas Constitution or by a county as authorized by their applicable Texas
xliii.	HAMILTON COUNTY HOSPITAL DISTRICT	column)	\$ 872,817.28	Yes	N/A	Yes	statute. Hospital Districts are non-state governmental entities with
		Other (specify in "Notes"					taxation authority created under the Texas Constitution or by a county as authorized by their applicable Texas
xliv.	HANSFORD COUNTY HOSPITAL DISTRICT	column)	\$ 254,544.61	Yes	N/A	Yes	statute. Hospital Districts are non-state governmental entities with
		Other (specify in "Notes"					taxation authority created under the Texas Constitution or by a county as authorized by their applicable Texas
xlv.	HARDEMAN COUNTY HOSPITAL DISTRICT	column)	\$ 506,648.77	Yes	N/A	Yes	statute. Hospital Districts are non-state governmental
		Other (considering this thing)					entities with taxation authority created under the
xlvi.	HARRIS COUNTY HOSPITAL DISTRICT	Other (specify in "Notes" column)	\$ 239,673,313.53	Yes	N/A	Yes	Texas Constitution or by a county as authorized by their applicable Texas statute.
							Hospital Districts are non-state governmental entities with taxation authority created under the Texas Constitution or
xlvii.	HASKELL COUNTY HOSPITAL DISTRICT	Other (specify in "Notes" column)	\$ 14,286.83	Yes	N/A	Yes	by a county as authorized by their applicable Texas statute.
							Hospital Districts are non-state governmental entities with taxation authority created under the Texas Constitution or
xlviii.	HEMPHILL COUNTY HOSPITAL DISTRICT	Other (specify in "Notes" column)	\$ 219,081.74	Yes	N/A	Yes	by a county as authorized by their applicable Texas statute.
		,					Hospital Districts are non-state governmental entities with taxation authority created under the Texas Constitution or
xlix.	HUNT MEMORIAL HOSPITAL DISTRICT	Other (specify in "Notes" column)	\$ 40,232,665.94	Yes	N/A	Yes	by a county as authorized by their applicable Texas statute.
All Al	TIGHT MEMORIAL FIRST THE STORY	Join, 1	Ψ 10,202,000.01		1071		Hospital Districts are non-state governmental entities with taxation authority created under the Texas Constitution or
	HUTCHINSON COUNTY HOSPITAL DISTRICT	Other (specify in "Notes" column)	\$ 11,871,749.17	Yes	N/A	Yes	by a county as authorized by their applicable Texas statute.
1.	HOTCHINGON COUNTY HOSPITAL DISTRICT	Columny	Ψ 11,071,749.17	163	IVA	163	Hospital Districts are non-state governmental entities with
	IRAAN GENERAL HOSPITAL DISTRICT	Other (specify in "Notes"	\$ 95.203.19	Van	N/A	Van	taxation authority created under the Texas Constitution or by a county as authorized by their applicable Texas statute.
II.	IRAAN GENERAL HOSFITAL DISTRICT	column)	\$ 95,203.19	Yes	IVA	Yes	Hospital Districts are non-state governmental entities with
	MAK COUNTY HOODITAL DISTRICT	Other (specify in "Notes"	700 445 44	V.	N/A		taxation authority created under the Texas Constitution or by a county as authorized by their applicable Texas
III.	JACK COUNTY HOSPITAL DISTRICT	column)	\$ 788,445.14	Yes	N/A	Yes	statute. Hospital Districts are non-state governmental entities with
		Other (specify in "Notes"					taxation authority created under the Texas Constitution or by a county as authorized by their applicable Texas
liii.	KARNES COUNTY HOSPITAL DISTRICT	column)	\$ 819,284.35	Yes	N/A	Yes	statute. Hospital Districts are non-state governmental entities with
		Other (specify in "Notes"					taxation authority created under the Texas Constitution or by a county as authorized by their applicable Texas
liv.	KIMBLE COUNTY HOSPITAL DISTRICT	column)	\$ 247,884.20	Yes	N/A	Yes	statute. Hospital Districts are non-state governmental entities with
		Other (specify in "Notes"					taxation authority created under the Texas Constitution or by a county as authorized by their applicable Texas
lv.	KNOX COUNTY HOSPITAL DISTRICT	column)	\$ 184,889.94	Yes	N/A	Yes	statute. Hospital Districts are non-state governmental entities with
							taxation authority created under the Texas Constitution or
lvi.	LAMB COUNTY	County	\$ 2,550,072.81	Yes	N/A	Yes	by a county as authorized by their applicable Texas statute.
		Other (enecify in "Notes"					Hospital Districts are non-state governmental entities with taxation authority created under the Texas Constitution or
lvii.	LOCKNEY GENERAL HOSPITAL DISTRICT	Other (specify in "Notes" column)	\$ 616,901.44	Yes	N/A	Yes	by a county as authorized by their applicable Texas statute.

							Hospital Districts are non-state governmental entities with taxation authority created under the Texas Constitution or
lviii.	LUBBOCK COUNTY HOSPITAL DISTRICT	Other (specify in "Notes" column)	\$ 144.049.599.64	Yes	N/A	Yes	by a county as authorized by their applicable Texas statute.
iviii.	ESSECTION THE STATE STAT	,	Ψ 144,040,000.04	100	1071	100	Hospital Districts are non-state governmental entities with taxation authority created under the Texas Constitution or
lix.	LYNN COUNTY HOSPITAL DISTRICT	Other (specify in "Notes" column)	\$ 640,238.29	Yes	N/A	Yes	by a county as authorized by their applicable Texas statute.
lv	MARTIN COUNTY HOSPITAL DISTRICT	Other (specify in "Notes" column)	\$ 964,030.83	Yes	N/A	Yes	Hospital Districts are non-state governmental entities with taxation authority created under the Texas Constitution or by a county as authorized by their applicable Texas statute.
۱۸.	WAXTIN COUNTY HOSPITAL DISTRICT	Columny	φ 904,030.03	165	IWA	163	Hospital Districts are non-state governmental entities with taxation authority created under the Texas Constitution or
lxi.	MATAGORDA COUNTY HOSPITAL DISTRICT	Other (specify in "Notes" column)	\$ 4,620,646.93	Yes	N/A	Yes	by a county as authorized by their applicable Texas statute.
lxii.	MCCAMEY COUNTY HOSPITAL DISTRICT	Other (specify in "Notes" column)	\$ 173,577.41	Yes	N/A	Yes	Hospital Districts are non-state governmental entities with taxation authority created under the Texas Constitution or by a county as authorized by their applicable Texas statute.
lxiii.	MCCULLOCH COUNTY HOSPITAL DISTRICT	Other (specify in "Notes" column)	\$ 9,181,833.16	Yes	N/A	Yes	Hospital Districts are non-state governmental entities with taxation authority created under the Texas Constitution or by a county as authorized by their applicable Texas statute.
		Other (specify in "Notes"					Hospital Districts are non-state governmental entities with taxation authority created under the Texas Constitution or by a county as authorized by their applicable Texas
lxiv.	MEDINA COUNTY HOSPITAL DISTRICT	column)	\$ 3,472,124.00	Yes	N/A	Yes	statute. Hospital Districts are non-state governmental entities with
lxv.	MIDLAND COUNTY HOSPITAL DISTRICT	Other (specify in "Notes" column)	\$ 190,332,915.31	Yes	N/A	Yes	taxation authority created under the Texas Constitution or by a county as authorized by their applicable Texas statute.
lxvi.	MITCHELL COUNTY HOSPITAL DISTRICT	Other (specify in "Notes" column)	\$ 146,147.70	Yes	N/A	Yes	Hospital Districts are non-state governmental entities with taxation authority created under the Texas Constitution or by a county as authorized by their applicable Texas statute.
		Other (specify in "Notes"		V	N/A		Hospital Districts are non-state governmental entities with taxation authority created under the Texas Constitution or by a county as authorized by their applicable Texas
lxvii.	MOORE COUNTY HOSPITAL DISTRICT	column)	\$ 1,388,924.33	Yes	N/A	Yes	statute. Hospital Districts are non-state governmental entities with
lxviii.	MUENSTER HOSPITAL DISTRICT	Other (specify in "Notes" column)	\$ 93,194.90	Yes	N/A	Yes	taxation authority created under the Texas Constitution or by a county as authorized by their applicable Texas statute.
lxix.	MULESHOE AREA HOSPITAL DISTRICT	Other (specify in "Notes" column)	\$ 528,739.98	Yes	N/A	Yes	Hospital Districts are non-state governmental entities with taxation authority created under the Texas Constitution or by a county as authorized by their applicable Texas statute.
IAIA.	MOLEOTIOE TIME STOTAL	Goldmin	Ψ 020,700.00	100	1071	100	Hospital Districts are non-state governmental entities with
lxx.	NOCONA GENERAL HOSPITAL	Other (specify in "Notes" column)	\$ 306,150.08	Yes	N/A	Yes	taxation authority created under the Texas Constitution or by a county as authorized by their applicable Texas statute.
lxxi.	NOLAN COUNTY HOSPITAL DISTRICT	Other (specify in "Notes" column)	\$ 1,444,851.45	Yes	N/A	Yes	Hospital Districts are non-state governmental entities with taxation authority created under the Texas Constitution or by a county as authorized by their applicable Texas statute.
lxxii.	NORTH RUNNELS HOSPITAL DISTRICT	Other (specify in "Notes" column)	\$ 83,102.60	Yes	N/A	Yes	Hospital Districts are non-state governmental entities with taxation authority created under the Texas Constitution or by a county as authorized by their applicable Texas statute.
IAAII.	NORTH NORTH EDITING	Columny	Ψ 00,102.00	103	TWA	103	State general revenue funds are not appropriated to
lxxiii.	NORTH TEXAS STATE HOSPITAL/VERNON	State	\$ 1,974,137.82	No	\$ 542,464,655.00	Yes	individual state hospitals; therefore, the appropriation amount in column F is the amount appropriated for all state hospitals for FY 23.
lxxiv.	NORTH TEXAS STATE HOSPITAL/WICHITA	State	\$ 530,620.76	No	\$ 542,464,655.00	Yes	State general revenue funds are not appropriated to individual state hospitals; therefore, the appropriation amount in column F is the amount appropriated for all state hospitals for FY 23.
		Other (specify in "Notes"					Hospital Districts are non-state governmental entities with taxation authority created under the Texas Constitution or by a county as authorized by their applicable Texas
lxxv.	NORTH WHEELER COUNTY HOSPITAL DISTRICT	column)	\$ 122,632.90	Yes	N/A	Yes	statute. Hospital Authorities are non-state governmental entities
lxxvi.	OAKBEND MEDICAL CENTER	Other (specify in "Notes" column)	\$ 36,768,693.32	Yes	N/A	Yes	created by a municipality or a county under Chapter 262 or 264, Health and Safety Code. Hospital Authorities do not receive appropriations of state general revenue. Hospital Districts are non-state governmental entities with
lxxvii.	OCHILTREE COUNTY HOSPITAL DISTRICT	Other (specify in "Notes" column)	\$ 420,266.81	Yes	N/A	Yes	Hospital Districts are non-state governmental entities with taxation authority created under the Texas Constitution or by a county as authorized by their applicable Texas statute.

							Hospital Districts are non-state governmental entities with
		Other (specify in "Notes"					taxation authority created under the Texas Constitution or by a county as authorized by their applicable Texas
lxxviii.	OLNEY-HAMILTON HOSPITAL DISTRICT	column)	\$ 318,555.73	Yes	N/A	Yes	statute. Hospital Districts are non-state governmental entities with
		Other (specify in "Notes"					taxation authority created under the Texas Constitution or by a county as authorized by their applicable Texas
lxxix.	PALO PINTO COUNTY HOSPITAL DISTRICT	column)	\$ 1,960,092.65	Yes	N/A	Yes	statute.
lxxx.	PECOS COUNTY	County	\$ 2,097,469.97	Yes	N/A	Yes	Hospital Districts are non-state governmental entities with
lxxxi.	RANKIN COUNTY HOSPITAL DISTRICT	Other (specify in "Notes" column)	\$ 135,191.07	Yes	N/A	Yes	taxation authority created under the Texas Constitution or by a county as authorized by their applicable Texas statute.
		,					Hospital Districts are non-state governmental
lxxxii.	REEVES COUNTY HOSPITAL DISTRICT	Other (specify in "Notes" column)	\$ 681,802.31	Yes	N/A	Yes	entities with taxation authority created under the Texas Constitution or by a county as authorized by their applicable Texas statute.
		Other (specify in "Notes"		.,		.,	Hospital Districts are non-state governmental entities with taxation authority created under the Texas Constitution or by a county as authorized by their applicable Texas
lxxxiii.	REFUGIO COUNTY MEMORIAL HOSPITAL DISTRICT	column)	\$ 469,330.13	Yes	N/A	Yes	statute. Hospital Districts are non-state governmental entities with
lxxxiv.	RICE HOSPITAL DISTRICT	Other (specify in "Notes" column)	\$ 180,873.36	Yes	N/A	Yes	taxation authority created under the Texas Constitution or by a county as authorized by their applicable Texas statute.
IAAAIV.	NICE FICOI TIAL DICTRICT	Columni	Ψ 100,073.30	103	19/7	103	State general revenue funds are not appropriated to
lxxxv.	RIO GRANDE STATE CENTER	State	\$ 7,896.69	No	\$ 542,464,655.00	Yes	individual state hospitals; therefore, the appropriation amount in column F is the amount appropriated for all state hospitals for FY 23.
							Hospital Districts are non-state governmental entities with taxation authority created under the Texas Constitution or
lxxxvi.	SABINE COUNTY HOSPITAL DISTRICT	Other (specify in "Notes" column)	\$ 742,788.27	Yes	N/A	Yes	by a county as authorized by their applicable Texas
IXXXVI.	SABINE COUNTY HOSPITAL DISTRICT	column)	\$ 142,100.21	res	IN/A	res	State general revenue funds are not appropriated to
lxxxvii.	SAN ANTONIO STATE HOSPITAL	State	\$ 269,466.35	No	\$ 542,464,655.00	Yes	individual state hospitals; therefore, the appropriation amount in column F is the amount appropriated for all state hospitals for FY 23.
							Hospital Districts are non-state governmental entities with taxation authority created under the Texas Constitution or
lxxxviii.	SCURRY COUNTY HOSPITAL DISTRICT	Other (specify in "Notes" column)	\$ 1,607,090.90	Yes	N/A	Yes	by a county as authorized by their applicable Texas statute.
	OFFINIOLE LIGORITAL PIOTRICT	Other (specify in "Notes"	4 000 040 70	V		V	Hospital Districts are non-state governmental entities with taxation authority created under the Texas Constitution or by a county as authorized by their applicable Texas
lxxxix.	SEMINOLE HOSPITAL DISTRICT	column)	\$ 1,668,610.73	Yes	N/A	Yes	statute. Hospital Districts are non-state governmental entities with
XC.	SOMERVELL COUNTY HOSPITAL DISTRICT	Other (specify in "Notes" column)	\$ 584,551.93	Yes	N/A	Yes	taxation authority created under the Texas Constitution or by a county as authorized by their applicable Texas statute.
		Other (specify in "Notes"					Hospital Districts are non-state governmental entities with taxation authority created under the Texas Constitution or by a county as authorized by
xci.	SOUTH LIMESTONE COUNTY HOSPITAL DISTRICT	column)	\$ 550,138.71	Yes	N/A	Yes	their applicable Texas statute.
xcii.	STARR COUNTY HOSPITAL DISTRICT	Other (specify in "Notes" column)	\$ 1,139,237.51	Yes	N/A	Yes	Hospital Districts are non-state governmental entities with taxation authority created under the Texas Constitution or by a county as authorized by their applicable Texas statute.
							Hospital Districts are non-state governmental entities with taxation authority created under the Texas Constitution or
xciii.	STEPHENS MEMORIAL HOSPITAL DISTRICT	Other (specify in "Notes" column)	\$ 460,712.28	Yes	N/A	Yes	by a county as authorized by their applicable Texas statute.
xciv.	STONEWALL MEMORIAL HOSPITAL DISTRICT	Other (specify in "Notes" column)	\$ 142,309.06	Yes	N/A	Yes	Hospital Districts are non-state governmental entities with taxation authority created under the Texas Constitution or by a county as authorized by their applicable Texas statute.
1			,555.00	7.00			Hospital Districts are non-state governmental
xcv.	SUTTON COUNTY HOSPITAL DISTRICT	Other (specify in "Notes" column)	\$ 493,175.42	Yes	N/A	Yes	entities with taxation authority created under the Texas Constitution or by a county as authorized by their applicable Texas statute.
		,					Hospital Districts are non-state governmental entities with
xcvi.	SWEENY HOSPITAL DISTRICT	Other (specify in "Notes" column)	\$ 1,880,732.85	Yes	N/A	Yes	taxation authority created under the Texas Constitution or by a county as authorized by their applicable Texas statute.
vovii	SWISHER MEMORIAL HOSPITAL DISTRICT	Other (specify in "Notes"	\$ 610,978.26	Voc	N/A	Voo	Hospital Districts are non-state governmental entities with taxation authority created under the Texas Constitution or by a county as authorized by their applicable Texas
xcvii.	SWISHER WEWORIAL HUSPITAL DISTRICT	column)	ψ 010,976.26	Yes	N/A	Yes	statute.

Column TARRANT COUNTY INSPITAL DISTRICT								Haspital Districts are non state governmental entities with
TARRONT COUNTY HOSPITAL DISTRICT								Hospital Districts are non-state governmental entities with taxation authority created under the Texas Constitution or
TERRELL STATE HOSPITAL Solar S. 7,50670 26 No S. 542,6685500 Yes Silling sprane records and all some proposed for of the control of the proposed of the control of the contr								by a county as authorized by their applicable Texas
Second Content	xcviii.	TARRANT COUNTY HOSPITAL DISTRICT	column)	\$ 297,948,082.47	Yes	N/A	Yes	
THE PRINCE STATE HOSPITAL State								individual state hospitals: therefore, the appropriation
TECHNIC COUNTY HOSPITAL DISTRICT County								amount in column F is the amount appropriated for all
S	xcix.	TERRELL STATE HOSPITAL	State	\$ 7,509,970.26	No	\$ 542,464,655.00	Yes	
TERRY MEMORIAL HOSPITAL DISTRICT								Hospital Districts are non-state governmental entities with
Col. THE UNIVERSITY OF TEXAS MEDICAL BRANCH Collision Coll								by a county as authorized by their applicable Texas
CALVESTON	C.		,	\$ 3,179,430.74	Yes	N/A	Yes	statute.
				© 044 707 077 40	NI-	000 440 040 00	V	0.4.1
Column C	CI.	GALVESTON	column)	\$ 241,727,077.48	N0	\$ 282,116,943.00	Yes	
TITUS COUNTY HOSPITAL DISTRICT								taxation authority created under the Texas Constitution or
Cited UT HEALTH SCIENCE CENTER ATTYLER Cited (specify in Notes)		TITUS COUNTY (LOOPIT L. PLOTPLOT			.,		.,	
Column C	CII.	TITUS COUNTY HOSPITAL DISTRICT		\$ 13,308,669.14	Yes	N/A	Yes	statute.
Out	ciii	LIT HEALTH SCIENCE CENTED AT TVLED		\$ 10.010.564.72	No	\$ 53.044.681.00	Vec	State University System
ONL UVALDE COUNTY HOSPITAL AUTHORITY ONL VAL VERDE COUNTY HOSPITAL DISTRICT ONL WIEST WHARTON COUNTY HOSPITAL DISTRICT ONL WILSON COUNTY MEMORIAL HOSPITAL DISTRICT OTHER (specify in "Notes" ooluring) OTHER (specify in "Notes	_		,					
Out	OIV.	OT GOOTHWEGTERWINESIGNE GERTER	Otate	Ψ 10-1,010,000.00	110	Ψ 100,000,102.00	100	
Out			O45 /					created by a municipality or a county under Chapter 262
Ord. VAL VERDE COUNTY HOSPITAL DISTRICT Offer (specify in "Notes" column) Ord. WEST WHARTON COUNTY HOSPITAL DISTRICT Offer (specify in "Notes" column) Ord. WILSON COUNTY MEMORIAL HOSPITAL DISTRICT Offer (specify in "Notes" column) Offer (specify in "Notes" column) Offer (specify in "Notes" column) S	CV	LIVAL DE COLINTY HOSPITAL ALITHORITY		\$ 9.726.003.93	No	N/Δ	Ves	or 264, Health and Safety Code. Hospital Authorities do
Office (specify in "Notes" country (HOSPITAL DISTRICT COUNTY) HOSPITAL DISTRICT COUNTY) OFFI (specify in "Notes" country) OFFI (specify in "Notes" country	CV.	OVALUE COCKTT HOOF HAE ACTHORITY	Columni	Ψ 5,720,000.33	140	19/7	103	
Other (specify in "Notes" column") VAL VERDE COUNTY HOSPITAL DISTRICT Other (specify in "Notes" column") VIII. WIEST WHARTON COUNTY HOSPITAL DISTRICT Other (specify in "Notes" column) VIII. WILSON COUNTY MEMORIAL HOSPITAL DISTRICT Other (specify in "Notes" column) Other (specify in "Notes								
CVII. WEST WHARTON COUNTY HOSPITAL DISTRICT Other (specify in "Notes" column) S			Other (specify in "Notes"					
Coll. WILBARGER GENERAL HOSPITAL DISTRICT Cher (specify in "Notes" column) Cher (specify in "Notes" colum	cvi.	VAL VERDE COUNTY HOSPITAL DISTRICT	column)	\$ 9,719,750.27	Yes	N/A	Yes	their applicable Texas statute.
will. WEST WHARTON COUNTY HOSPITAL DISTRICT WILBARGER GENERAL HOSPITAL DISTRICT Other (specify in "Notes" column) WILBARGER GENERAL HOSPITAL DISTRICT Other (specify in "Notes" column) WILBARGER GENERAL HOSPITAL DISTRICT Other (specify in "Notes" column) Other (specify in "Notes" column) Other (specify in "Notes" column) S								
VIII. WEST WHARTON COUNTY MOSPITAL DISTRICT Column S 2.432.105.25 Yes NA Yes Their applicable Texas statute.			011 / 15 : 111 / 11					
Celli. WILBARGER GENERAL HOSPITAL DISTRICT Other (specify in "Notes" column) Other	cvii	WEST WHADTON COLINTY HOSPITAL DISTRICT		\$ 2,432,105,25	Vec	N/A	Vec	their applicable Texas statute
COLII. WILBARGER GENERAL HOSPITAL DISTRICT CIV. VOAKUM HOSPITAL DISTRICT CIV. VOAKUM HOSPITAL DISTRICT CIV. CI	CVII.	WEST WHARTON COUNTY HOST THE DISTRICT	Column)	Ψ 2,432,103.23	163	IW/A	103	
WILBARGER GENERAL HOSPITAL DISTRICT								taxation authority created under the Texas Constitution or
cix. WILSON COUNTY MEMORIAL HOSPITAL DISTRICT Other (specify in "Notes" column) Othe	oviii	WILDARCER CENERAL HOSPITAL DISTRICT		¢ 650 201 42	Von	N/A	Voc	
cix. WILSON COUNTY MEMORIAL HOSPITAL DISTRICT Other (specify in "Notes" column) 3,454,998.85 Yes NA Yes Issailon authority created under the Teas Countification of by a county as authorized by the replicable Texas contains governmental entities with a column of the	CVIII.	WILDARGER GENERAL HOSFITAL DISTRICT	Column)	\$ 050,361.43	162	IN/A	162	
cix. WILSON COUNTY MEMORIAL HOSPITAL DISTRICT Couling) \$ 3,454,998.85 Yes NA Yes statute. cx. YOAKUM HOSPITAL DISTRICT Other (specify in "Notes" column) \$ 816,486.99 Yes NIA Yes Satute. cxii. Coli. Coli. <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>taxation authority created under the Texas Constitution or</td>								taxation authority created under the Texas Constitution or
Control Cont	aiv.	WILCON COLINTY MEMORIAL LIGERITAL DISTRICT		¢ 2.454.000.05	Vaa	NI/A	Van	
cx. YOAKUM HOSPITAL DISTRICT Other (specify in "Notes" column) \$ 816,486.99 Yes N/A Yes saxion authority created under the Texas Constitution or Yes cxii. cxii. cxii. cxii. cxii. cxiii.	CIX.	WILSON COUNTY MEMORIAL HOSPITAL DISTRICT	Column)	\$ 3,454,996.65	res	IN/A	res	
CK. YOAKUM HOSPITAL DISTRICT column) \$ 816,486.99 Yes N/A Yes slatue. CRII. CRIII. CRIII. CR								taxation authority created under the Texas Constitution or
CXI. CMI. CMI. <th< td=""><td></td><td>VOAKUM HOCDITAL DISTRICT</td><td></td><td>¢ 946 496 00</td><td>Vaa</td><td>NI/A</td><td>Vaa</td><td></td></th<>		VOAKUM HOCDITAL DISTRICT		¢ 946 496 00	Vaa	NI/A	Vaa	
CXII. CXIII. CXIII. </td <td></td> <td>TOAKUW HOSPITAL DISTRICT</td> <td>Column)</td> <td>\$ 010,400.99</td> <td>res</td> <td>IN/A</td> <td>res</td> <td>statute.</td>		TOAKUW HOSPITAL DISTRICT	Column)	\$ 010,400.99	res	IN/A	res	statute.
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CXVII. Image: CXVIII. Image: CXVIII.<	cxvi.							
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CXXXVII.	cxxxvi.							
	cxxxvii.							

PREPRINT SECTION VI: FUNDING FOR THE NON-FEDERAL SHARE ADDENDUM TABLE 5.A. HEALTH CARE-RELATED PROVIDER TAX/ASSESSMENT(S)

5. Use Table 5.A below to add health care-related provider tax/assessments to Table 5 for any SDPs funded by provider taxes/assessments (option c in Question 34). States may also use Table 5.A in lieu of completing Table 5 in the preprint. Provide the following (respond to each column for all entries). Input data only in beige cells in columns B - H. Please note, states and actuaries should consult the most recent Medicaid Managed Care Rate Development Guide (https://www.medicaid.gov/medicaid/managed-care/guidance/rate-review-and-rate-guides/index.html) for how to document SDPs in actuarial rate certification(s). The actuary's certification must contain all of the information outlined; if all required documentation is not included, review of the certification will likely be delayed.

States should only submit the tables they populate to CMS; please do not submit the entire workbook unless the State inputs data into Tables 1.A - 8.A. For example, if the State only needs extra rows to complete Table 5 in the preprint, please delete Tabs 1.A - 4.A and 6.A - 8.A. CMS requests States submit the addendum tables with the preprint in this Excel format; please do not merge and re-PDF the preprint.

TABLE 5.A: Health Care-Related Provider Tax/Assessment(s)

Directions

Note 1 from HHSC: Entities are those that participated in FY2024 transfers. This table can be updated if FY2024 entities differ, upon request.

Note 2 from HHSC: Amounts on table 4.A include CHIRP FY2025 transfers from a local governmental entity's (LGE's) general IGT account. Any funds generated through a locally administered health care-related tax (called Local Provider Participation Fund or LPPF) are required to be transferred via IGT from a separate LGE-LPPF account. Please note that because CMS has segregated the tables based on IGT and health care-related taxes, the entities listed here are LGEs that transfer via IGT funds generated from an LPPF.

Note 3 from HHSC: All LPPFs are administered by LGEs; HHSC responses below are based on data collected from LGEs. Column H responses indicate conformity with 42 C.F.R. §433.68(f).

Column1	Name of the Health Care- Related Provider Tax/Assessment (enter each on a separate line)	tax/assessment	Is the tax/assessment broad-based?	Is the tax/assessment uniform?	Is the tax/assessment under the 6% indirect hold harmless limit?	If not under the 6% indirect hold harmless limit, does it pass the "75/75" test?	Does it contain a hold harmless arrangement that guarantees to return all or any portion of the tax payment to the tax payer?
Data Format	Free text	Free text	Set values (select one)	Set values (select one)	Set values (select one)	Set values (select one)	Set values (select one)
i.	City of Amarillo Hospital District	Inpatient Hospital Services	Yes	Yes	Yes	N/A	No
ii.	Angelina County	Inpatient Hospital Services	Yes	Yes	Yes	N/A	No
iv.	Bell County	Inpatient Hospital Services	Yes	Yes	Yes	N/A	No
v.	Bowie County	Inpatient Hospital Services	Yes	Yes	Yes	N/A	No
vi	Brazos County	Inpatient Hospital Services	Yes	Yes	Yes	N/A	No
vii.	Cameron County	Inpatient Hospital Services	Yes	Yes	Yes	N/A	No
viii.	Cherokee County	Inpatient Hospital Services	Yes	Yes	Yes	N/A	No
ix.	Dallas County Hospital District	Inpatient Hospital Services	Yes	Yes	Yes	N/A	No
x.	Grayson County	Inpatient Hospital Services	Yes	Yes	Yes	N/A	No
xi.	Gregg County	Inpatient Hospital Services	Yes	Yes	Yes	N/A	No
xii.	Hays County	Inpatient Hospital Services	Yes	Yes	Yes	N/A	No

				1			•
xiii.	Hidalgo County	Inpatient Hospital Services	Yes	Yes	Yes	N/A	No
XIII.	Thudigo County	Inpatient Hospital	103	165	100	14// (110
xiv.	McLennan County	Services	Yes	Yes	Yes	N/A	No
	Nueces County Hospital	Inpatient Hospital	Vaa	V	Vaa	N1/A	Ne
XV.	District	Services	Yes	Yes	Yes	N/A	No
xvi.	Smith County	Inpatient Hospital Services	Yes	Yes	Yes	N/A	No
	Tarrant County Hospital	Inpatient Hospital	. 00	. 55	. 33		
xvii.	District	Services	Yes	Yes	Yes	N/A	No
xviii.	Tom Green County	Inpatient Hospital Services	Yes	Yes	Yes	N/A	No
AVIII.	Tom Green County	Inpatient Hospital	165	165	Tes	IN/A	NO
xix.	Webb County	Services	Yes	Yes	Yes	N/A	No
AIA.	vvebb county	Inpatient Hospital	103	103	103	IN/A	140
xx.	Williamson County	Services	Yes	Yes	Yes	N/A	No
	Lubbock County Hospital	Inpatient Hospital					
xxi.	District	Services	Yes	Yes	Yes	N/A	No
:	Filia Causatu	Inpatient Hospital	Vaa	V	Vaa	NI/A	Na
xxii.	Ellis County	Services	Yes	Yes	Yes	N/A	No
xxiii.	Bexar County Hospital District	Inpatient Hospital Services	Yes	Yes	Yes	N/A	No
John.	Boxar County Floopital Blothlot	Inpatient Hospital	100	1	1.00	1071	110
xxiv.	Harris County Hospital District	Services	Yes	Yes	Yes	N/A	No
		Inpatient Hospital					
XXV.	Wichita County	Services	Yes	Yes	Yes	N/A	No
von ii	Travis County Hospital District	Inpatient Hospital Services	Yes	Yes	Yes	N/A	No
xxvi.	Travis County Hospital District	Inpatient Hospital	res	res	res	IN/A	INO
xxvii.	Taylor County	Services	Yes	Yes	Yes	N/A	No
	El Paso County Hospital	Inpatient Hospital					
xviii.	District	Services	Yes	Yes	Yes	N/A	No
	Nacogdoches County Hospital	Inpatient Hospital	.,	.,	.,		
xxix.	District	Services	Yes	Yes	Yes	N/A	No
xxx.	Jefferson County	Inpatient Hospital Services	Yes	Yes	Yes	N/A	No
xxxi.	concreti ceanty	00111000	100	100	1.00	1071	110
xxxii.							
xxxiii.							
xxxiv.							
xxxv.							
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DREDRINT SE	CTION VII: QUALITY CRITERIA AND FRAMEW	ORK FOR ALL DAVMENT ARRANGEMENTS		
	TABLE 7.A. PAYMENT ARRANGEMENT QUALITY			
Directions	7. Use Table 7.A below to add any goal(s) and ob	ojective(s) this payment arrangement is expected to adv). States may also use Table 7.A in lieu of completing Ta	ance as they appear in able 7 in the preprint.	
	into Tables 1.A - 8.A. For example, if the state on	te to CMS; please do not submit the entire workbook unlily needs extra rows to complete Table 7 in the preprint, dendum tables with the preprint in this Excel format; please	please delete Tabs 1.A -	
	TABLE 7.A: Payment Arrangement Quality Str	rategy Goals and Objectives		
Column1	Goal(s)	Objective(s)	Quality strategy page #	
Data Format	Free text	Free text	Free text	
Example:	Improve care coordination for enrollees with behavioral health conditions Promoting optimal health for Texans at every stage of life through prevention and by engaging individuals, families, communities, and the healthcare system to address root causes of	Increase the number of managed care patients receiving follow-up behavior health counseling by 15% Individuals practicing healthy behaviors yield reduced rates of tobacco use, obesity, and substance use	pp. 20-22	
a.	poor health	Address non-medical drivers of health	p. 1	
b.	Providing the right care in the right place at the right time to ensure people can easily navigate the health system to receive timely services in the least intensive or restrictive setting appropriate	Reduced rate of avoidable hospital admissions and readmissions	p. 2	
c.	Keeping patients free from harm by building a safer healthcare system that limits human error	Reduced rate of avoidable complications or adverse healthcare events in all care settings	p. 2	
d.	Promoting effective practices for people with chronic, complex, and serious conditions to improve people's quality of life and independence, reduce mortality rates, and better manage the leading drivers of health care costs	Reduced rate of avoidable hospital and emergency department visits for individuals with medical complexity, including with co-occurring behavioral health diagnoses Increased prevention, identification, treatment, and management of behavioral and mental health	p. 2	