FORHP Policy Updates – August 9, 2017

- FY18 Inpatient PPS Rule Finalized (Effective 10/1/17)
  - Deemphasizes review of CAH 96-hour certification requirement
  - Establishes approx. $7 billion disproportionate share hospital (DSH) uncompensated care pool to be allotted according to Worksheet S-10 data
  - Eligible CAHs participating in the EHR Incentive Program will report on at least four (self-selected) of the available CQMs

- CY 2018 Quality Payment Program Proposed Rule (Comment until 8/21/17)
  - Increases in the low volume threshold to ≤$90,000 or ≤200 beneficiaries (Part B)
  - Method II CAHs are required to participate if above the low volume threshold

- CY 2018 Outpatient PPS Proposed Rule (Comment until 9/11/17)
  - Reinstates the non-enforcement of direct supervision requirement for outpatient therapeutic services in CAHs for CY 2018 and CY 2019

- CY 2018 Physician Fee Schedule proposed rule (Comment until 9/11/17)
  - Creates a general care management bundled code for RHCs/FQHCs
  - Policy updates for Medicare Diabetes Prevention Program

U.S. Department of Health & Human Services
HRSA
Federal Office of Rural Health Policy

RQITA Updates

TASC 90 Call

August 9, 2017

StratisHealth

Rural Quality Improvement Technical Assistance

Stratis Health

- Independent, nonprofit, Minnesota-based organization founded in 1971
  - Lead collaboration and innovation in health care quality and safety, and serve as a trusted expert in facilitating improvement for people and communities
- Work at intersection of research, policy, and practice

StratisHealth **Rural Quality Improvement Technical Assistance**

Rural Quality Improvement Technical Assistance Center (RQITA)

- Three-year cooperative agreement awarded to Stratis Health from Health Services and Resources Administration (HRSA) Federal Office of Rural Policy (FORHP), 2015 – 2018

- Improve quality and health outcomes in rural communities through technical assistance to beneficiaries of FORHP quality initiatives
  - Flex/MBQIP
  - Small Health Care Provider Quality Improvement Grantees (SHCPQI)

StratisHealth

Rural Quality Improvement Technical Assistance

MBQIP Technical Assistance

- Over 800 TA Requests logged (Since September 2015)
  - Approximately 50 per month
  - Most common topics:
    - EDTC (342)
    - CMS Outpatient Measures (323)
    - CMS Inpatient Measures (196)
  - Median days to resolution: 0 (zero), Mean 1.09
- Flex Consultations: 21 (since September 2016)
- MBQIP Orientation Calls: 11 (since September 2016)
- 40 presentations (in-person, webinar/phone)

Request a Consultation, Presentation, or Orientation: Jodi Winters, jwinters@stratishealth.org

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Rural Quality Improvement Technical Assistance

MBQIP Tools and Resources

- **General:** MBQIP Monthly, Measure Fact Sheets
- **Reporting:** MBQIP Reporting Guide, Abstraction Training Videos, EDTC Tools
- **Improvement:** Using MBQIP Data Reports, CAH Improvement Guide & Toolkit, HCAHPS Best Practices
- **Flex Focused:**
  - EDTC Comparison Template
  - Flex Program Guide: Developing MBQIP Peer Mentoring Programs
  - Flex Program Guide: Using MBQIP Excel Files
  - MBQIP Talking Points
  - Monthly Reporting Reminders

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Rural Quality Improvement Technical Assistance

Upcoming MBQIP Tools and Resources

- Updates to MBQIP Reporting Guide, Additions to CAH QI Improvement Guide and Toolkit, and resources to support new MBQIP measures.

- Patient and Family Engagement Resource

- Technical Expert Panel Review – EDTC Measure (with U of MN Rural Research Center)

- Inter-rater reliability pilot project

- Share findings/information from eCQM Pilot

MBQIP Support Assessment

- RQITA Flex/MBQIP Assessment distributed in August.

- *Please* share with us your thoughts on:
  - What is useful (or not)?
  - What is needed?
  - What could be done differently/better?

- One assessment per state

StratisHealth

Rural Quality Improvement Technical Assistance

Rural Health Value Updates

Rural Health Value

Vision: To build a knowledge base through research, practice, and collaboration that helps create high performance rural health systems

- 3-year HRSA FORHP Cooperative agreement
- Partners
  - RUPRI Center for Rural Health Policy Analysis and Stratis Health
  - Support from Stroudwater Associates, WIPFLI, and Premier

- Activities
  - Resource development and compilation, technical assistance, research

www.RuralHealthValue.org

www.RuralHealthValue.org

- *Updated!* [Catalog of Value-Based Initiatives for Rural Providers](#)
- [Critical Access Hospital Financial Pro Forma](#)
- [Critical Access Hospital Financial Pro Forma for Shared Savings](#)
- [Demonstrating Critical Access Hospital Value: A Guide to Potential Partnerships](#)
- [Engaging Your Board and Community in Value-Based Care Conversations](#)
- *New!* [Guide to Selecting Population Health Management Technologies for Rural Care Delivery](#)
- [Physician Engagement - A Primer for Healthcare Leaders](#)
- [Rural Innovation Profiles](#)
- [Understanding the Social Determinants of Health: A Self-Guided Learning Module for Rural Health Care Teams](#)
- [Value-Based Care Assessment Tool](#)

Questions?

Laura Grangaard Johnson, Research Analyst

952-853-8544 or 877-787-2847

lgrangaard@stratishealth.org

www.stratishealth.org

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Rural Quality Improvement Technical Assistance

Updates from the Flex Monitoring Team

Kristin L Reiter, PhD
Flex Monitoring Team
University of North Carolina – Chapel Hill

August 9, 2017 | TASC 90 Webinar

University of Southern Maine

Evaluating State Flex Program Impact and Performance: Innovative Projects and PIMS Data

This project has two components: the continuation of our evaluation of innovative projects by State Flex Programs, and the continuation of our Flex Program evaluation using PIMS data. This project will result in semi-annual monitoring analysis reports, a final report, and a policy brief summarizing our findings.

University of Southern Maine

Evaluation of State Flex Programs' Projects Targeting EMS Implementation of Standards and Best Practices Related to Time Critical Diagnoses

The purpose of this project is to analyze the efforts of state Flex program initiatives to support the development of time-critical diagnoses (TCD) systems of care and provide models that can be used by other state Flex programs to support TCD systems of care in CAH communities. The project will result in a policy brief summarizing the results of the study.

University of Southern Maine

Population Health Evaluation: The Role of CAHs in Providing Core Health Care Services in Rural Communities:
The purpose of this project is to analyze the efforts of CAHs to develop systems of care that support the provision of these core health care services and identify opportunities for CAHs to develop core health care services in their own communities. It will explore opportunities for FORHP and state Flex grantees to support CAHs in achieving the Flex Program goal of developing rural systems of care that meet the population health needs of their communities. The project will culminate in two policy briefs: the first will summarize the development of select core health care services by CAHs and rural systems of care, while the second will discuss the ways in which state Flex programs can support the development of these core health services and rural systems of care with CAHs as the hubs.

University of Minnesota

Evidence-Based Stroke Quality Improvement Programs for CAHs

The purposes of this project are to identify successful evidence-based programs to improve stroke care that could be replicated in CAHs and disseminate information about these programs to State Flex Programs. This project will result in a policy brief including information on successful stroke QI programs applicable to CAHs.

Ongoing Projects

- **Analyzing Quality Reporting and Improvement of CAHs** – University of Minnesota
- **Analyzing Financial and Operational Performance of CAHs** – University of North Carolina at Chapel Hill
- **National CAH Database Management and Maintenance** – University of North Carolina at Chapel Hill
- **CAHMPAS Query System Maintenance and Development** – University of North Carolina at Chapel Hill

Developing a Hospital "Dashboard"

By domain, visualize a hospital's performance on all indicators at one time. Performance displayed as "percentile" in which hospital's indicator value falls relative to a comparison group. Click on the indicator name to view actual value compared to benchmark and median values.
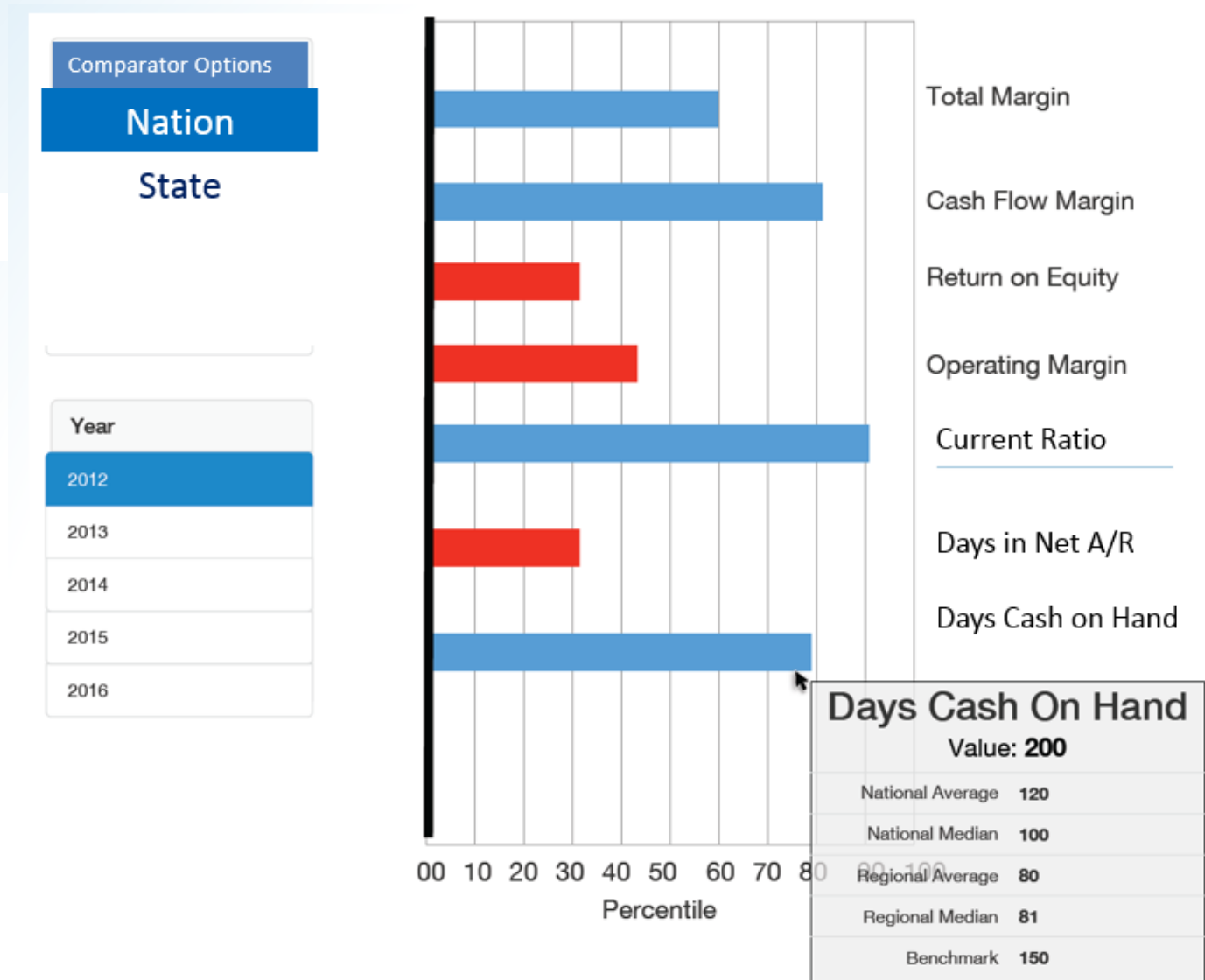
Developing a Systematic Way to Draw SFC Attention to Performance by Hospital and by Indicator (example)

HOSPITALS:
- For a given state / year, list each hospital in order of # of benchmarks met
- Click on an individual hospital's name to see that hospital's dashboard

0 - 1
2 - 9
10 - 11

INDICATORS:
- For a given state / year, list indicators that have benchmarks in order of the percent of hospitals in the state meeting benchmark
- Click on indicator name to be taken to bar graph display of values for all hospitals in the state

0% - 25%
26% - 75%
76% - 100%
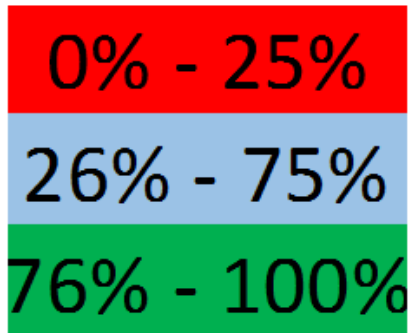
Questions / Comments:

Flex Monitoring Team | University of Minnesota
University of North Carolina at Chapel Hill
University of Southern Maine

monitoring@flexmonitoring.org

THANK YOU!

Stratis Health is a nonprofit organization that leads collaboration and innovation in health care quality and safety, and serves as a trusted expert in facilitating improvement for people and communities.

StratisHealth

Rural Quality Improvement Technical Assistance

NATIONAL RURAL HEALTH RESOURCE CENTER

Preparing for the New State Flex Program Year

Caleb Siem

Program Specialist, National Rural Health Resource Center

Tracy Morton

Senior Program Manager, National Rural Health Resource Center

Mike McNeely

Deputy Director, Federal Office of Rural Health Policy

Sarah Young

Flex Program Coordinator, Federal Office of Rural Health Policy

August 9, 2017

The Center's Purpose

The National Rural Health Resource Center (The Center) is a nonprofit organization dedicated to sustaining and improving health care in rural communities. As the nation's leading technical assistance and knowledge center in rural health, The Center focuses on five core areas:

- Transition to Value and Population Health
- Collaboration and Partnership
- Performance Improvement
- Health Information Technology
- Workforce

NATIONAL RURAL HEALTH RESOURCE CENTER

End of School/Back to School

National Rural Health Resource Center

Wrapping Up the Current Year

- Use up the rest of your supplies
- Identify outstanding projects
- Submit your final reports and presentations
- Tally your grades
- Share your report card
- Clean out your locker

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RESOURCE CENTER

Use Up the Rest of Your Supplies

- Identify any incomplete projects or unspent funds
  - Identify any cost savings
  - Note any needed changes in scope
- Appropriately allocate the remainder of your budget

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Identify Outstanding Projects

- Check your work plan and subcontracts
- Will you meet your project goals and deliverables?
- Evaluate if something needs to change or a course correction is needed
- If not, start a discussion with your Federal Office of Rural Health Policy (FORHP) Project Officer (PO) so they are aware

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Submit Your Final Reports and Presentations

- Receive your final deliverables from subcontractors and remit final payments for deliverables

- Submit your quarterly reports to FORHP

- Submit any year-end reports to your partners, stakeholders or Advisory groups

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RESOURCE CENTER

Tally Your Grades

- Update your [PIMS Data Collection Tool](#) and [Flex Work Plan Data Table](#) to document outputs and outcomes
  - Provide any feedback on the grant measures to FORHP to aid in identify what is working and demonstrating impact
- Prepare to submit the PIMS report in the fall
- Determine if you are on track
- Determine areas for improvement or need for next year

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Share Your Report Card

- Share your successes
  - Reports
  - Presentations
  - Acknowledgements from partners and hospitals
- Collect testimonials of your great work and its impact
- Share with your communities, hospitals, partners, subcontractors, stakeholders, legislature, peers and FORHP

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Clean Out Your Locker

- Save copies of important files in a place you can easily access them next year

- Close out any remaining contracts

- Balance your budget and anticipate any unobligated balance (UOB), then have a discussion with your FORHP PO

  ◦ Be prepared to share your ideas and plan for any UOB

NATIONAL RURAL HEALTH RESOURCE CENTER

Preparing for the New Year

- Find your advisor and the resource room
- Fill your backpack
- Find what grades need improvement
- Review your syllabus
- Pay for your resources
- Know your due dates
- Make friends
- Monitor your grades

NATIONAL RURAL HEALTH RESOURCE CENTER

Find Your Advisor

- Build a relationship with your FORHP Project Officer and Health Resources and Services Administration (HRSA) partners
  - Identify your FORHP PO and their contact information on this [map](map)
  - Identify your HRSA Grants Management Specialist (GMS) and their contact information at the end of your Notice of Award

NATIONAL RURAL HEALTH RESOURCE CENTER

Find the Resource Room

- [Technical Assistance and Services Center (TASC)](#)

- [Flex Monitoring Team (FMT)](#)

- Rural Quality Improvement Technical Assistance (RQITA)

  - [Resources](#) on the Medicare Beneficiary Quality Improvement Project (MBQIP)

  - Technical assistance requests triaged by TASC by emailing tasc@ruralcenter.org

NATIONAL RURAL HEALTH RESOURCE CENTER

More Key Resources

- Other Key Flex Partners
  - [American Hospital Association (AHA)](#)
  - [National Rural Health Association (NRHA)](#)
  - [National Organization of State Offices of Rural Health (NOSORH)](#)
  - [Rural Health Value (RHV)](#)
  - [Rural Health Information Hub (RHIhub)](#)
  - [Small Rural Hospital Transition (SRHT) Project](#)
  - [Small Rural Hospital Improvement Grant Program (SHIP)](#)
  - FORHP Network Grantees Technical Assistance

    [Development grantees](#)

    [Allied health grantees](#)

    Planning grantees

    Small health care provider quality improvement grantees

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Build Your Backpack

- Stock up and bookmark key supplies
  - [PIMS Data Collection Tool](#)
  - [Flex Work Plan Data Table](#)
  - [Critical Access Hospital Measurement & Performance Assessment System (CAHMPAS)](#)
  - Other state-level data
  - [Flex Program Fundamentals](#)
  - [Core Competencies for State Flex Program Excellence](#)
  - [Flex Logic Model](#)

NATIONAL RURAL HEALTH RESOURCE CENTER

Find What Grades Need to be Improved

- Know where your program stands
  - Do you have grant conditions?
  - What is the guidance from your FORHP PO?
  - Take the [Core Competencies for State Flex Program Excellence: Self-Assessment](#) at least annually
- Know where your hospitals stand
  - MBQIP data reporting
  - CAHMPAS data
  - Engagement in state Flex Program activities
  - Hospitals can take the [Population Health Readiness Assessment](#) and/or the [Self-Assessment for Transition Planning to Value-based Systems](#)

Review Your Syllabus

- Review your work plan – what are your objectives and activities

- Develop tasks to meet the activities

- Set up your tasks into a timeline (Gantt)

- Use project management techniques to manage the work

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Pay for Your Resources

- Be ready to pay for the expertise
- Have your subcontracts set and ready to be administered as close to September 1 as possible
  - Maximize times and efficiency
  - Prevents incomplete work and unspent funds
- Review the [Grant Project Life Cycle Guide: A Grant Subcontract Management Guide, webinar](#) and [Virtual Knowledge Group discussion](#)

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Know Your Due Dates

- Be aware of due dates for FORHP quarterly reporting, deliverables from subcontractors, major work plan milestones

- Set reminders for yourself

- Break big pieces of work or long time frames down into smaller amounts

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Monitor Your Grades

- Don't wait for mid-year or year end to know your progress – use continuous evaluation
- Update your PIMS Data Collection Tool and Flex Program Work Plan Data Table throughout the year
- Become familiar with CAHMPAS and other FMT tools and resources
- Become familiar with MBQIP data
- Use the Plan-Do-Study-Act (PDSA) Cycle

NATIONAL RURAL HEALTH RESOURCE CENTER

Make Friends

- Network with your state Flex Program peers
  - [Flex Program Forum](#)
  - Flex Program Workshop
  - Flex Program Reverse Site Visit
  - Other national or regional conferences
- Reach out to programs doing similar work or in areas you'd like to explore
  - [State Flex Profiles](#)
- Network with partners (existing or potential) in your state with similar health care interests (rural or not)

NATIONAL RURAL HEALTH RESOURCE CENTER

NATIONAL RURAL HEALTH RESOURCE CENTER

TASC

(218) 727-9390

tasc@ruralcenter.org

Get to know us better:
http://www.ruralcenter.org