Flex Performance Improvement Measurement System (PIMS) Updates

September 2, 2020

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Federal Office of Rural Health Policy (FORHP)
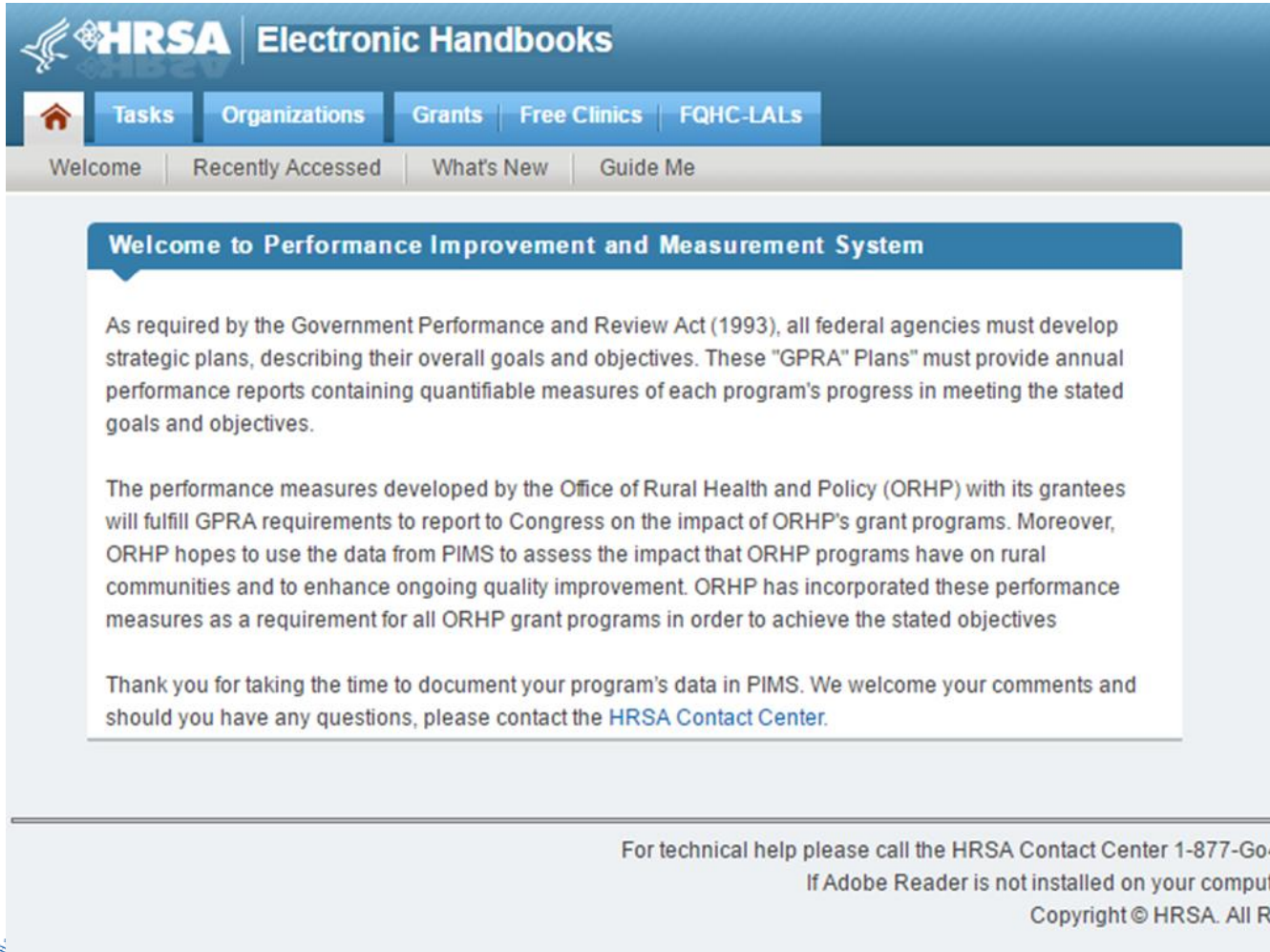
Vision: Healthy Communities, Healthy People

Agenda

- What is the Performance Improvement Measurement System (PIMS)?

- Fiscal Year (FY) 2018 PIMS Results

- FY 2019 PIMS Data Collection

- Reminders

- PIMS Resources from Technical Assistance and Services Center (TASC)

What is PIMS?

- Allow FORHP identify future baselines, track trends and improvement, identify best practices.

- Inform TASC and Rural Quality Improvement Technical Assistance's (RQITA) Tool and TA resource development strategies for not only MBQIP but other parts of Flex

- Provides more context for the Flex Monitoring Team's (FMT) evaluations and in-depth analyses.

- Informs the Department of Health and Human Services (HHS) Leaders and Congress of the 'Impact' Flex is having and what *opportunities* still exist for improvement.

FY 2018 PIMS Results

And 4 year trends

Number of States Working in Each Flex Program Area FY 2018
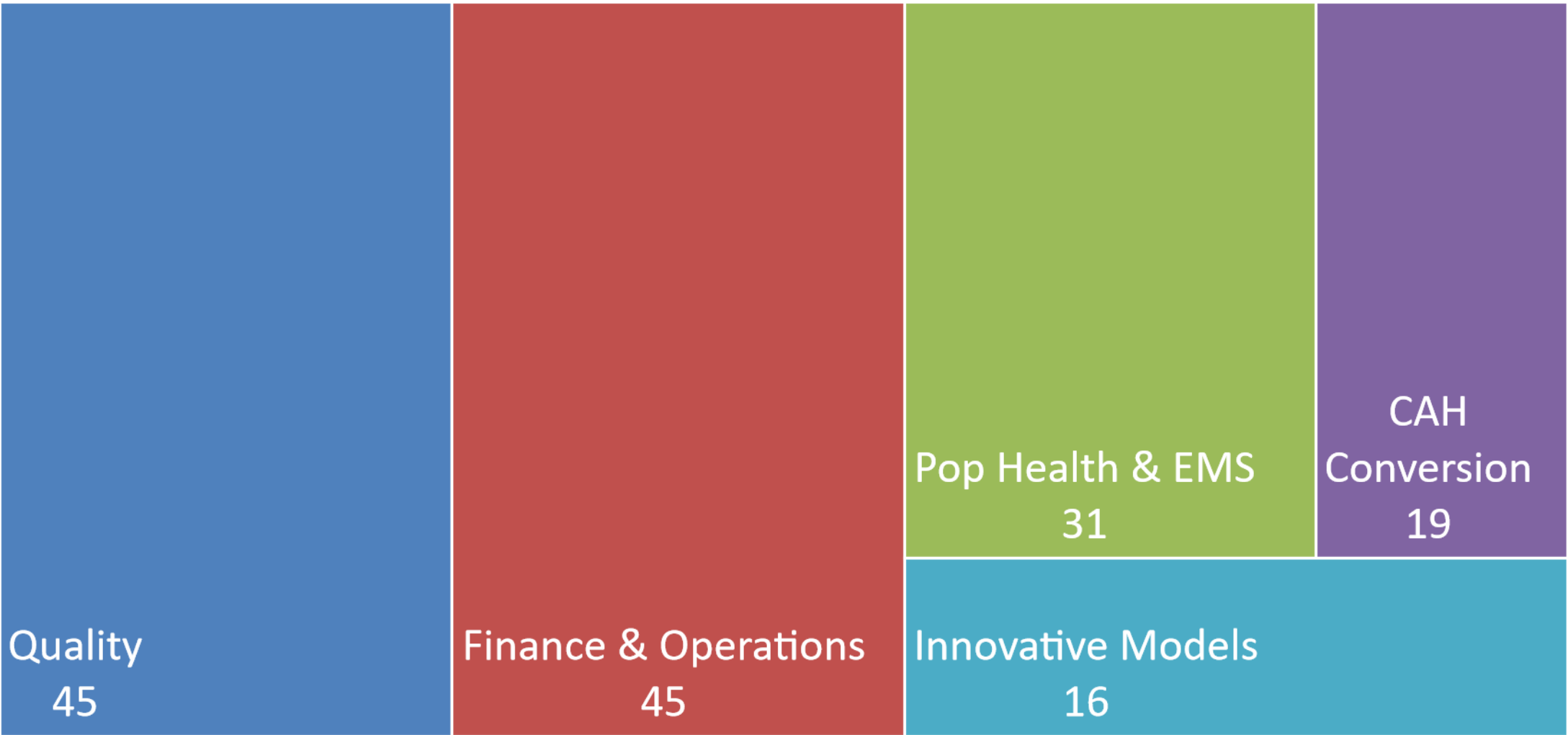
Number of Critical Access Hospitals (CAHs) Participating in each Flex Program Area
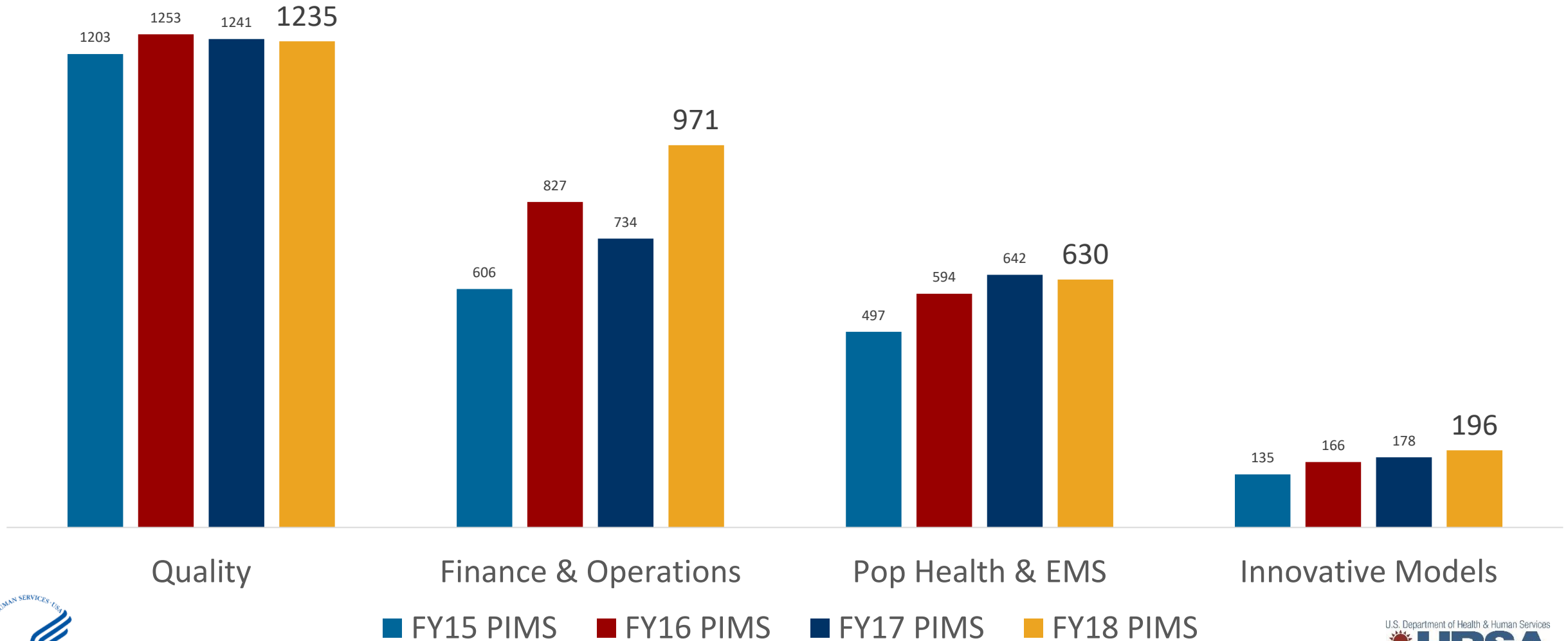
Core Measures Quality Improvement
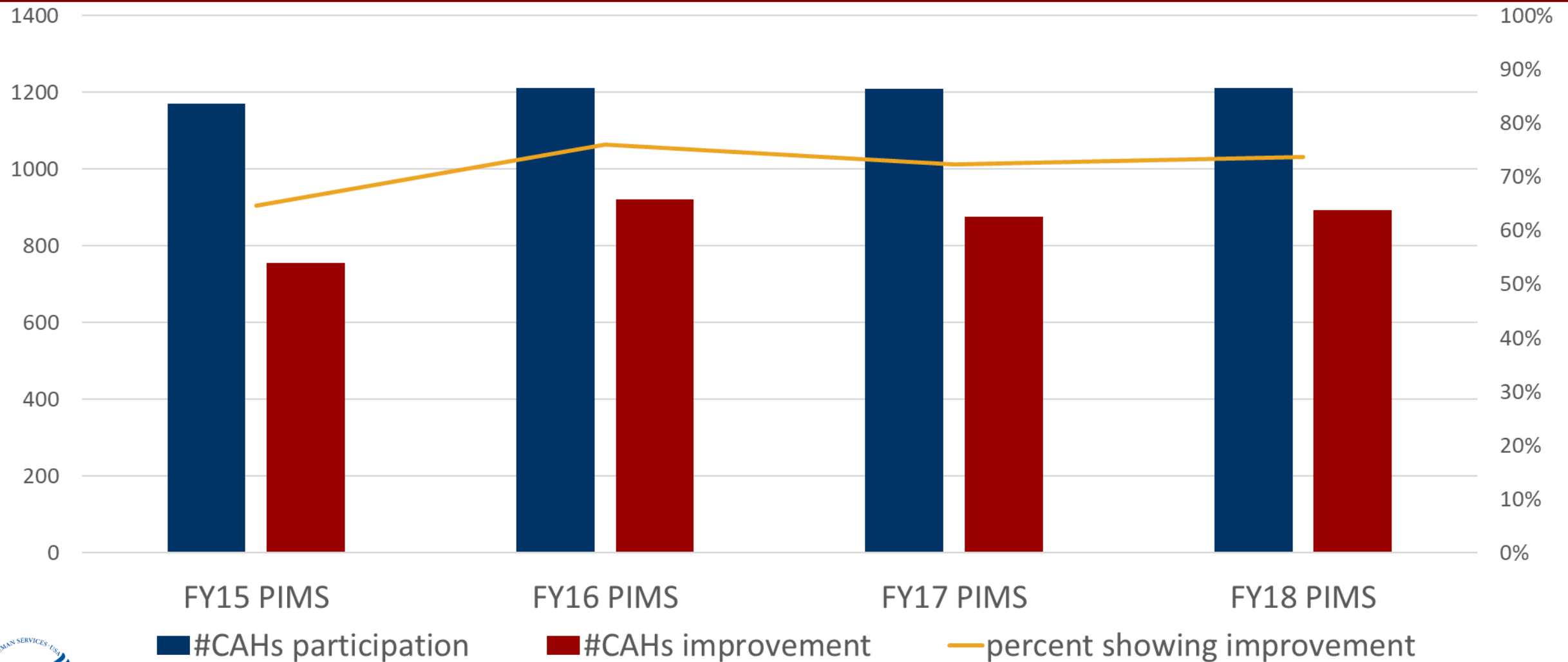
Additional Measures Quality Improvement
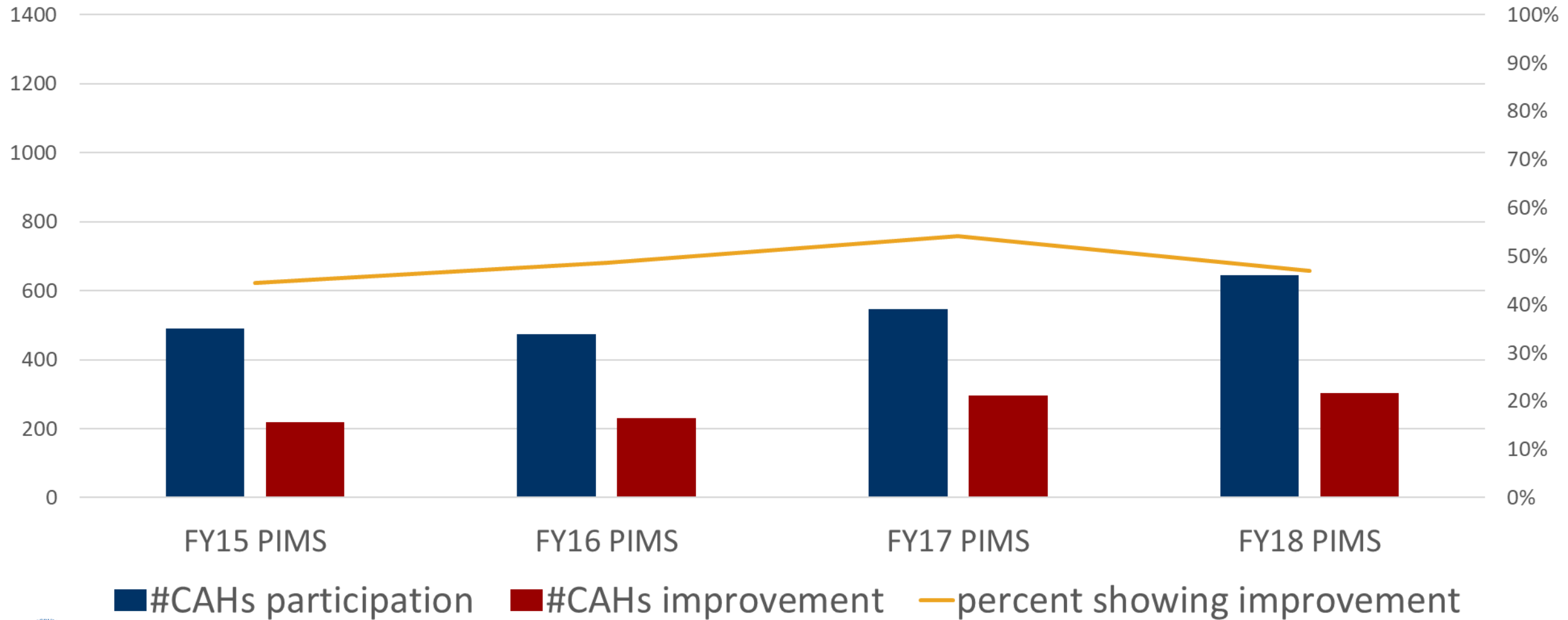
In-Depth Financial Assessments

Legend: ■ #CAHs participation   ■ #CAHs improvement   — percent showing improvement
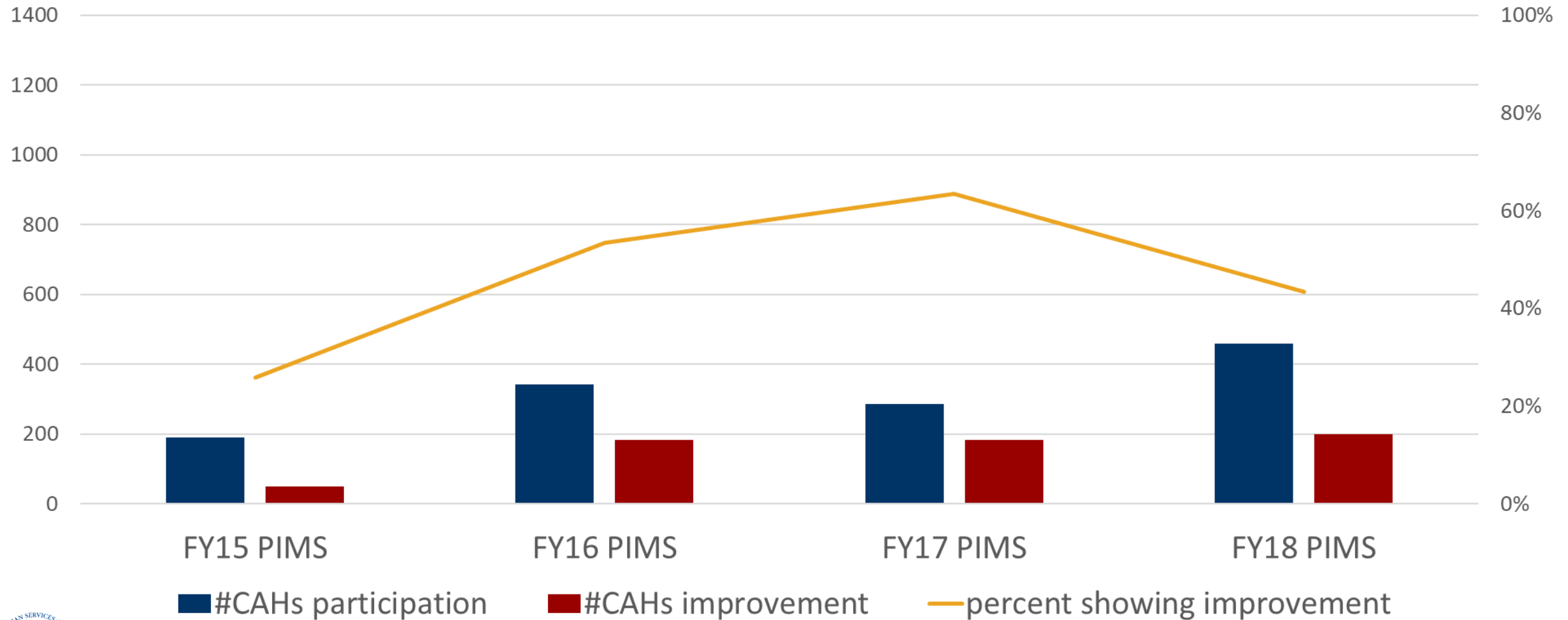
Community Health Needs Assessments
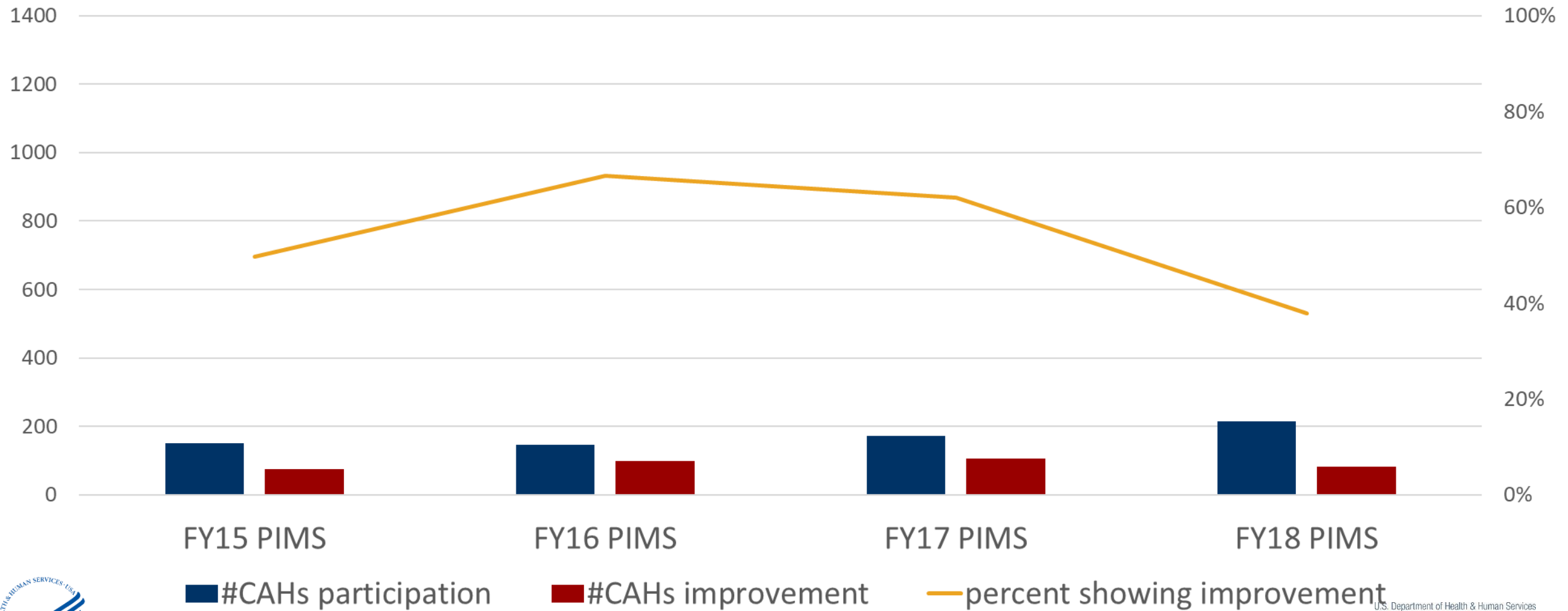
Number of Emergency Medical Services (EMS) Entities Participating in Flex EMS
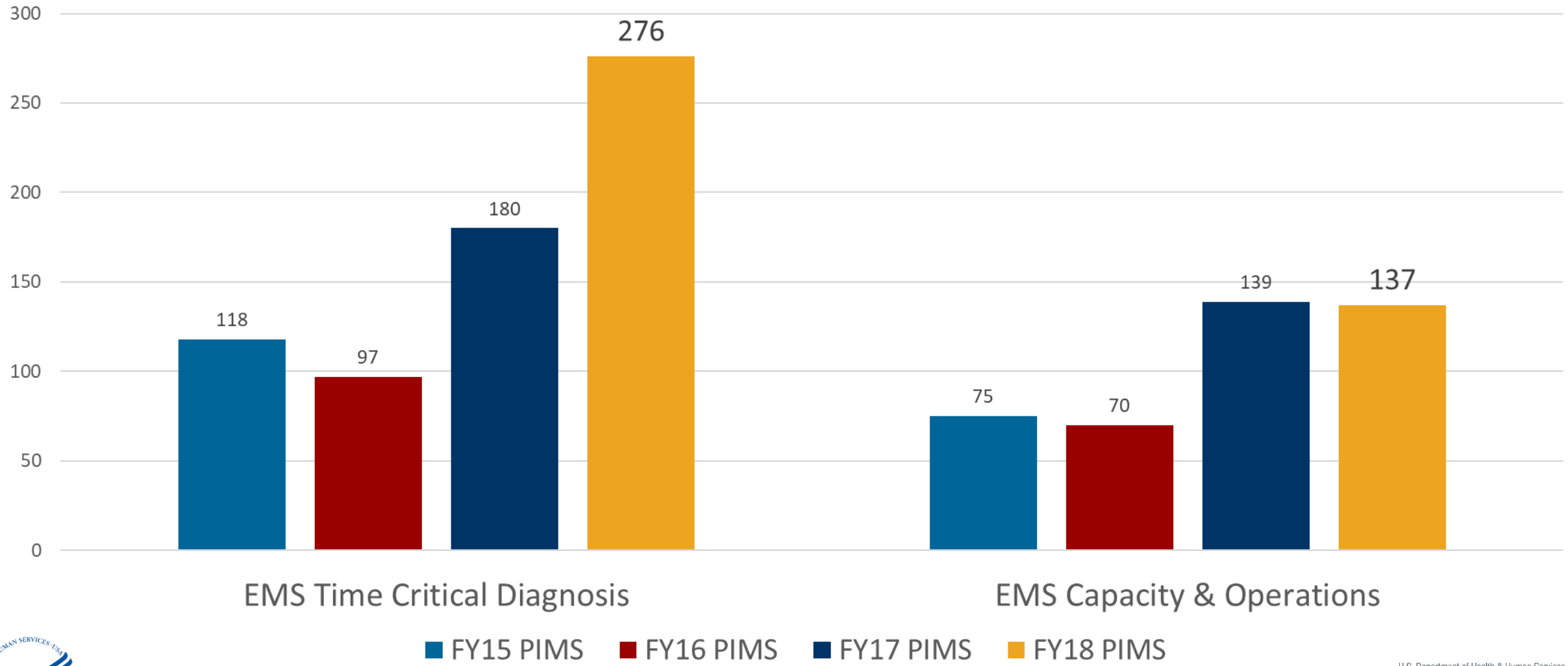
FY 2019 PIMS Data Collection

How do you find PIMS?

- Access through Electronic Handbook (EHB)
  - Video on how to access performance reports
- Open September 1 – October 30
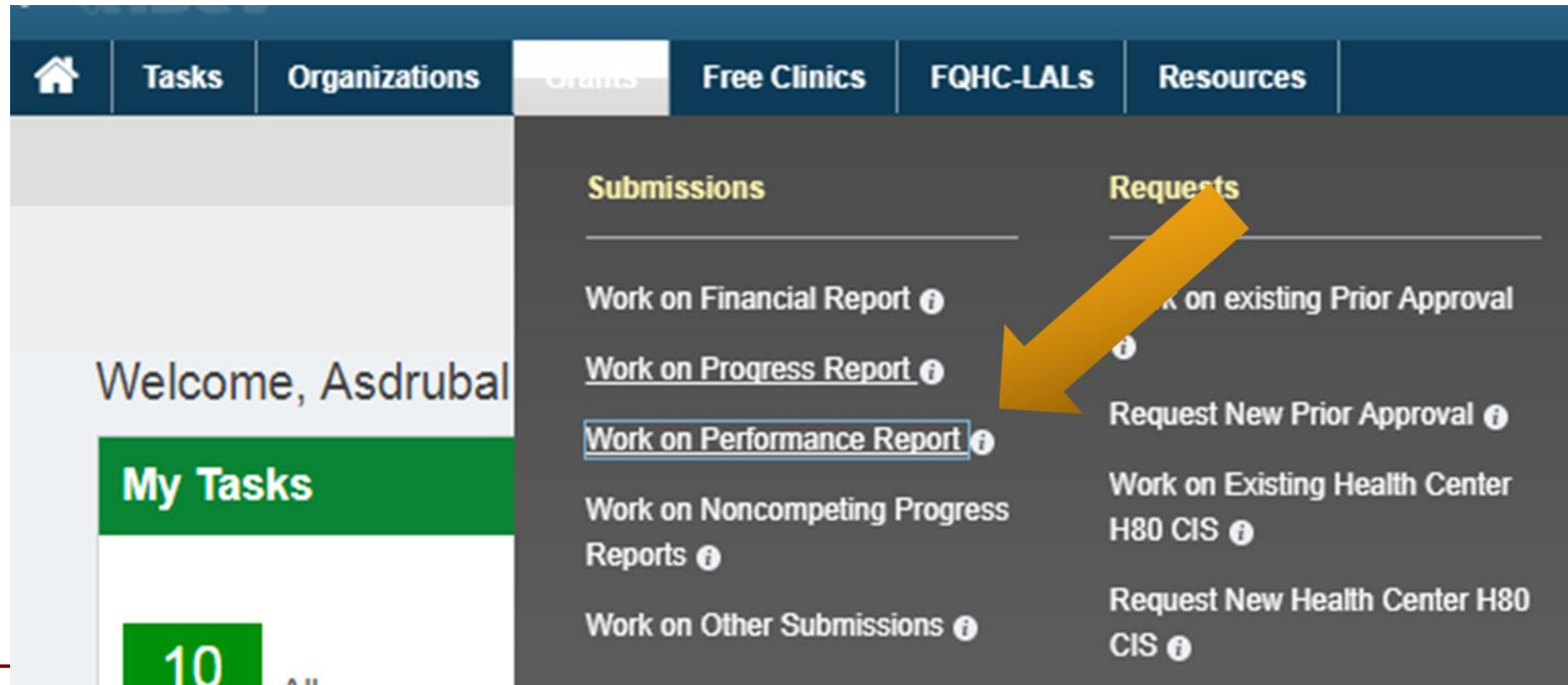
PIMS Instructions

REPORTING INSTRUCTIONS AND DATA DICTIONARY FOR FY 2019 FLEX PROGRAM PIMS

FORHP PERFORMANCE IMPROVEMENT AND MEASUREMENT SYSTEM

MEDICARE RURAL HOSPITAL FLEXIBILITY PROGRAM

PROGRAM YEARS FY 2019 – FY 2023 (9/1/2019 – 8/31/2024)

Updated PIMS Data Collection

- Now have 8 forms instead of 7

- Updated activity names to match work plan

- Please report on any H54 No Cost Extension **funds & activities**
  - Please fit these activities into the existing program areas

PIMS Reporting Process

1. Log in to EHB, go to performance reports, and open PIMS

2. Select the applicable activities for your state's Flex program

3. Record individual CAH participation and improvement in each selected activity category
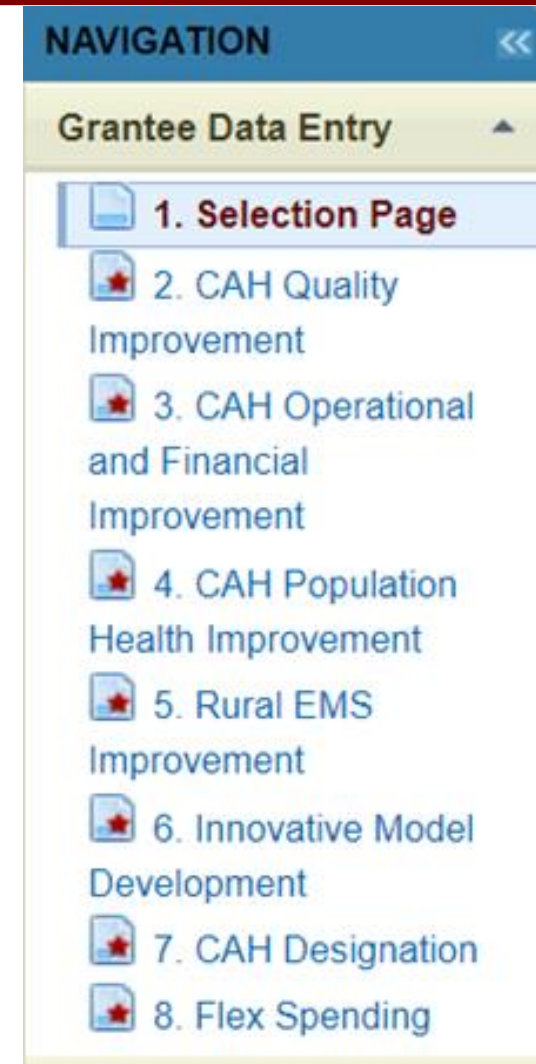
4. Record your program spending in each activity category

5. Save each page and mark complete

6. Validate and submit your data

7. Your project officer will review your PIMS data and may ask for clarification or corrections

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PIMS Support

Linkage to H54 Flex Grant

PIMS Navigation

Report Structure

Data Entry

First check your CAH list

Quality Improvement

Core MBQIP Metrics

1.01 Core Patient Safety Quality Improvement: OP-27

Please indicate which CAHs participated and improved in the Core MBQIP Domain 1 Patient Safety activities for HCP (aka OP-27) during the budget period. Select all that apply.

CAH Name	Historical Participation	Participation	Improvement
Select All		☐	☐
381305 - Blue Mountain Hospital	☐	☐	☐
381320 - Columbia Memorial Hospital	☐	☐	☐
381312 - Coquille Valley Hospital	☑	☐	☐
381322 - Curry General Hospital	☐	☐	☐
381325 - Good Shepherd Medical Center	☑	☐	☐
381321 - Grande Ronde Hospital	☑	☐	☐
381307 - Harney District Hospital	☑	☐	☐
381309 - Lake District Hospital	☑	☐	☐
381311 - Lower Umpqua Hospital	☐	☐	☐
381301 - Peacehealth Cottage Grove Community Medical Center	☐	☐	☐
381316 - Peacehealth Peace Harbor Medical Center	☑	☐	☐
381310 - Pioneer Memorial Hospital	☐	☐	☐
381318 - Providence Hood River Memorial Hospital	☑	☐	☐
381303 - Providence Seaside Hospital	☑	☐	☐
381302 - Samaratin North Lincoln Hospital	☑	☐	☐
381323 - Samaritan Lebanon Community Hospital	☑	☐	☐
381314 - Samaritan Pacific Communities Hospital	☑	☐	☐
381304 - Southern Coos Hospital And Health Center	☐	☐	☐

Select your activity categories

Flex Selection Page

Applicable Measure?	Measure
☑	1.1 - Report and improve Core Patient Safety/Inpatient Measures, including develop antibiotic stewardship programs (required annually)
☑	1.2 - Report and improve Core Patient Engagement Measures (required annually)
☑	1.3 - Report and improve Core Care Transitions Measures (required annually)
☑	1.4 - Report and improve Core Outpatient Measures (required annually)
☐	1.5 - Report and improve Additional Patient Safety Measures (optional)
☐	1.6 - Report and improve Additional Patient Engagement Measures (optional)
☐	1.7 - Report and improve Additional Care Transitions Measures (optional)
☐	1.8 - Report and improve Additional Outpatient Measures (optional)
☑	2.1 - Statewide operation and financial needs assessment (required annually)
☐	2.2 - Individual CAH-specific needs assessment and action planning (optional)
☐	2.3 - Financial improvement (optional)
☐	2.4 - Operational improvement (optional)
☐	2.5 - Value-based payment projects (optional)
☐	3.1 - Support CAHs identifying community and resource needs (optional)
☐	3.2 - Assist CAHs to build strategies to prioritize and address unmet needs of the community (optional)
☐	3.3 - Assist CAHs to engage with community stakeholders and public health experts and address specific health needs (optional)
☐	4.1 - Statewide rural EMS needs assessment and action planning (optional)
☐	4.2 - Community-level rural EMS assessments and action planning (optional)
☐	4.3 - EMS operational improvement (optional)
☐	4.4 - EMS quality improvement (optional)
☐	5.1 - Develop and test innovative models and publish report or documentation of the innovation (optional)
☐	5.2 - Develop and test CAH outpatient clinic (including CAH-owned rural health clinics) quality reporting and publish report or documentation (optional)
☐	6.1 - CAH conversions (required if assistance is requested by rural hospitals)
☐	6.2 - CAH transitions (required if assistance is requested by CAHs)

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Next enter CAH data

CAH Name	Historical Participation	Participation	Improvement
Select All		☐	☐
381305 - Blue Mountain Hospital	☐	☑	☐
381320 - Columbia Memorial Hospital	☐	☐	☐
381312 - Coquille Valley Hospital	☑	☐	☐
381322 - Curry General Hospital	☐	☐	☐
381325 - Good Shepherd Medical Center	☑	☐	☐
381321 - Grande Ronde Hospital	☑	☐	☐
381315 - St. Alphonsus-Baker City	☐	☑	☑
381319 - St. Anthony Hospital	☑	☑	☑
381313 - St. Charles- Prineville	☑	☑	☑
381324 - St. Charles-Madras	☑	☑	☑
381317 - Tillamook County General Hospital	☑	☑	☐
381306 - Wallowa Memorial Hospital	☑	☐	☐
381308 - West Valley Community Hospital	☑	☐	☐
Total:	17	8	4

Reminder: Historical Participation

Historical Participation will **NOT** be checked if a CAH previously reported participation. For future PIMS reports FY 2020 – FY 2023 this box will be checked if a CAH previously reported participation.

Sections with different data entry

- 2.1: No CAH selection, just record spending.

- 4.1: No entry, just record spending.

- 4.2: Number of EMS entities participating

- 4.3: Number of EMS entities participating

- 4.4: Number of EMS entities participating

- 5.1: Only CAH participation, number of reports/documents created

- 5.2: Only CAH participation, number of reports/document created

- 6.1: Number of hospitals requesting assistance in converting to CAH status, number of hospitals successfully converting to CAH status, number of hospitals requesting assistance but did not convert, listing of hospitals that did not convert.

- 6.2: Only CAH participation

Award Information Section

Award Information

List your Flex grant award amounts, any approved carryover, and any unspent funds in the fields below. Actual program spending for the year will calculate automatically.

Spending Summary	
Total award for Current Report Period	$
Total approved carryover for Current Report Period	$
Enter 0 if none.	
Total unspent funds for Current Report Period	$
Enter 0 if none.	
Actual Program Spending for Current Report Period	$0

⬆ Return to Top (Index)

$Total\ award + * Carryover * - Unspent\ funds = Actual\ spending$

** Carryover is any H54 No Cost Extension funds **

Then enter spending data

Flex Spending

Award Information | Quality Improvement | Financial and Operations Improvement | Population Health Management and Emergency Medical Service Integration | Total

Award Information

List your Flex grant award amounts, any approved carryover, and any unspent funds in the fields below. Actual program spending for the year will calculate automatically.

Spending Summary	
Total award for Current Report Period	$ 302826
Total approved carryover for Current Report Period	$ 35000
Enter 0 if none.	
Total unspent funds for Current Report Period	$ 129547
Enter 0 if none.	
Actual Program Spending for Current Report Period	$208279

⇧ Return to Top (Index)

Quality Improvement

Please enter the amount of Flex Funds utilized in the following activity categories. The amount should be a whole number.

1.01 Core Patient Safety Quality Improvement	
Flex Funds utilized toward Activity 1.01	$ 19925
1.02 Core Patient Engagement Quality Improvement	
Flex Funds utilized toward Activity 1.02	$ 19925

PIMS Flex Spending:
Are these equal?

Actual Program Spending for Current Report Period	$551500

$$\neq$$

Total	
Total Flex Funds Utilized	$100000

🔴 **Error:** One or more errors have occurred.

Total - Total Flex Funds Utilized Total Flex Funds Utilized must equal Actual Program Spending calculated in the Award Information section

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Total award amounts

APPENDIX C: FLEX FY 2019 AWARDS

| State	Organization	Cooperative Ageement Number	Award Amount
AK	HEALTH AND SOCIAL SERVICES, ALASKA DEPARTMENT OF	U2WRH33307	$611,422
AL	PUBLIC HEALTH, ALABAMA DEPARTMENT OF	U2WRH33293	$364,358
AR	ARKANSAS DEPARTMENT OF HEALTH	U2WRH33304	$602,319
AZ	University Of Arizona	U2WRH33311	$801,961
CA	Department of Health Care Services	U2WRH33322	$542,359
CO	COLORADO RURAL HEALTH CENTER	U2WRH33305	$655,393
FL	Health, Florida Department of	U2WRH33316	$761,289
GA	COMMUNITY HEALTH, GEORGIA DEPT OF	U2WRH33286	$651,413
HI	HEALTH, HAWAII DEPARTMENT OF	U2WRH33309	$446,074
IA	PUBLIC HEALTH, IOWA DEPARTMENT OF	U2WRH33302	$757,191
ID	HEALTH AND WELFARE, IDAHO DEPARTMENT OF	U2WRH33308	$641,351
IL	Public Health, Illinois Department Of	U2WRH33301	$824,375
IN	Indiana State Department Of Health	U2WRH33300	$656,819
KS	HEALTH AND ENVIRONMENT, KANSAS DEPARTMENT OF	U2WRH33306	$968,815
KY	University Of Kentucky	U2WRH33312	$852,464

Reminders

Mark each page Complete

Confirm each page is complete
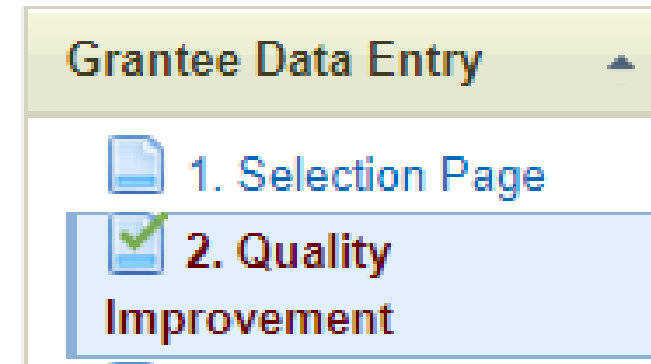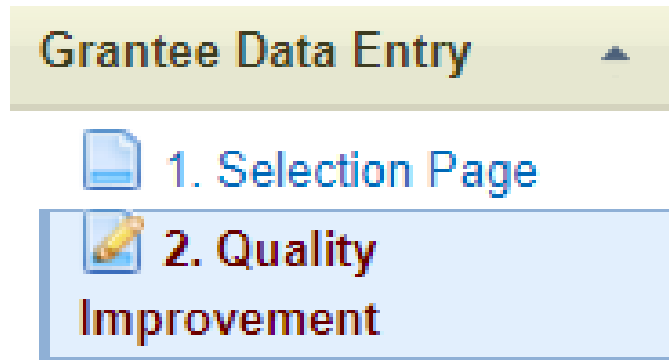
Reports
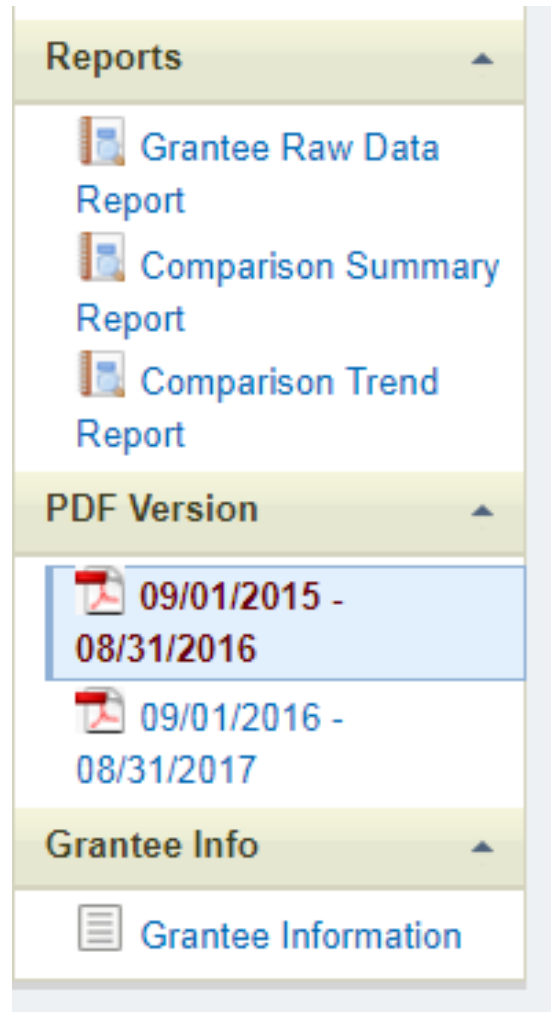
End-of-Year Report

- **Due November 30, 2020 for FY 2019**
  - One significant accomplishment per Program Area
  - Completed Work Plan for ALL activities in FY 2019 (September 1, 2019 – August 31, 2020)
- **Program Area 1: CAH Quality Improvement (required)**
  - **Significant Accomplishment/Activity Details**
    Describe the activity, including:
    - ✓ The activity and expected outcomes
    - ✓ How the activity was implemented
  - **Impact**
    - ✓ What were the results of this activity? How did it impact the participating hospitals and overall Flex Program?
  - **Lessons Learned and Best Practices**
    - ✓ What were your lessons learned and/or best practices from implementing this activity that would be useful to other states that want to implement this in the future?
  - **Recommendations**
    - ✓ Do you recommend this activity for other Flex programs? Discuss why or why not.

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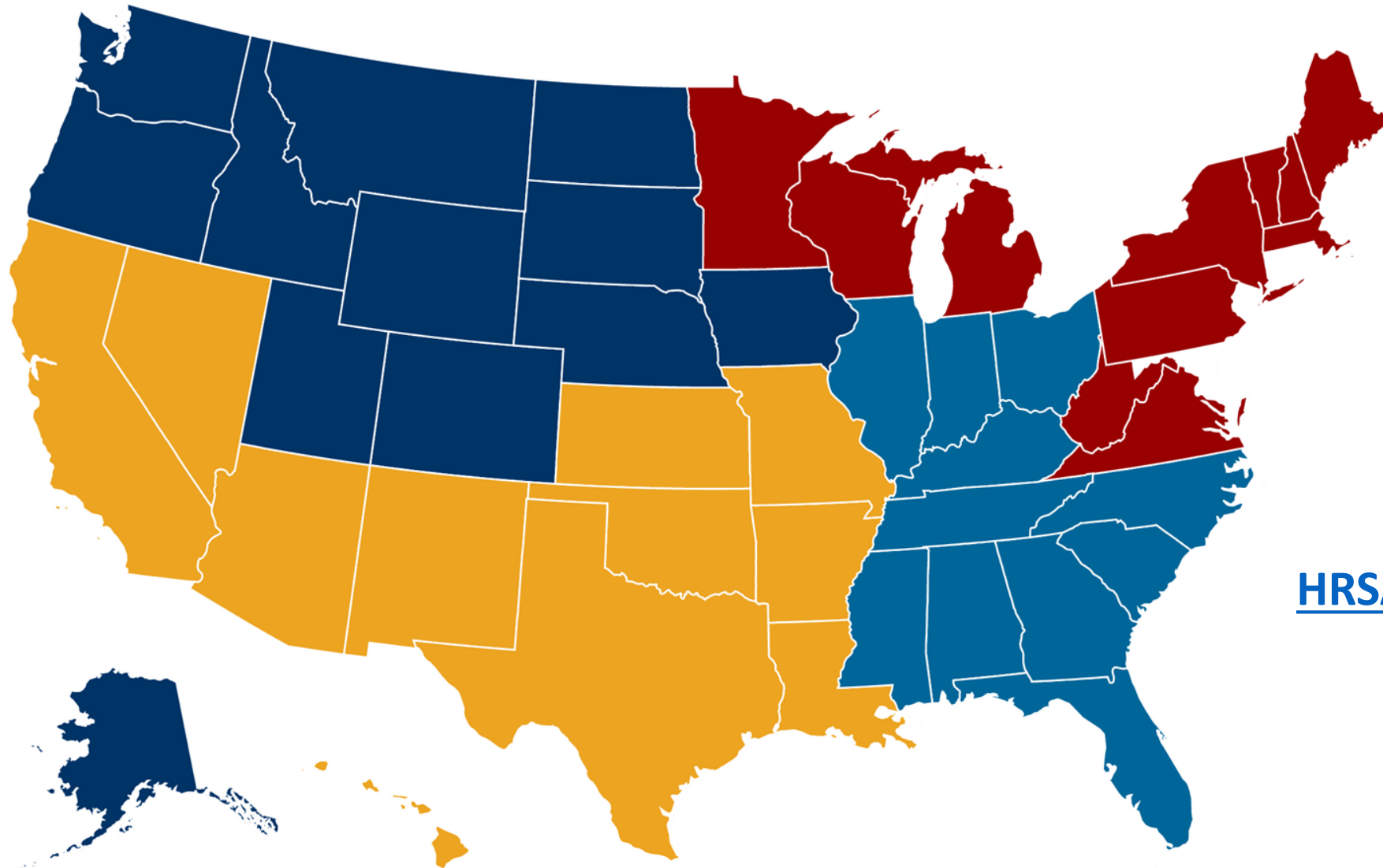Lseifert@hrsa.gov

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