



# Flex Performance Improvement Measurement System (PIMS) Updates

*September 2, 2020*

**Victoria Leach**  
**Public Health Analyst**  
Federal Office of Rural Health Policy (FORHP)

**Vision: Healthy Communities, Healthy People**



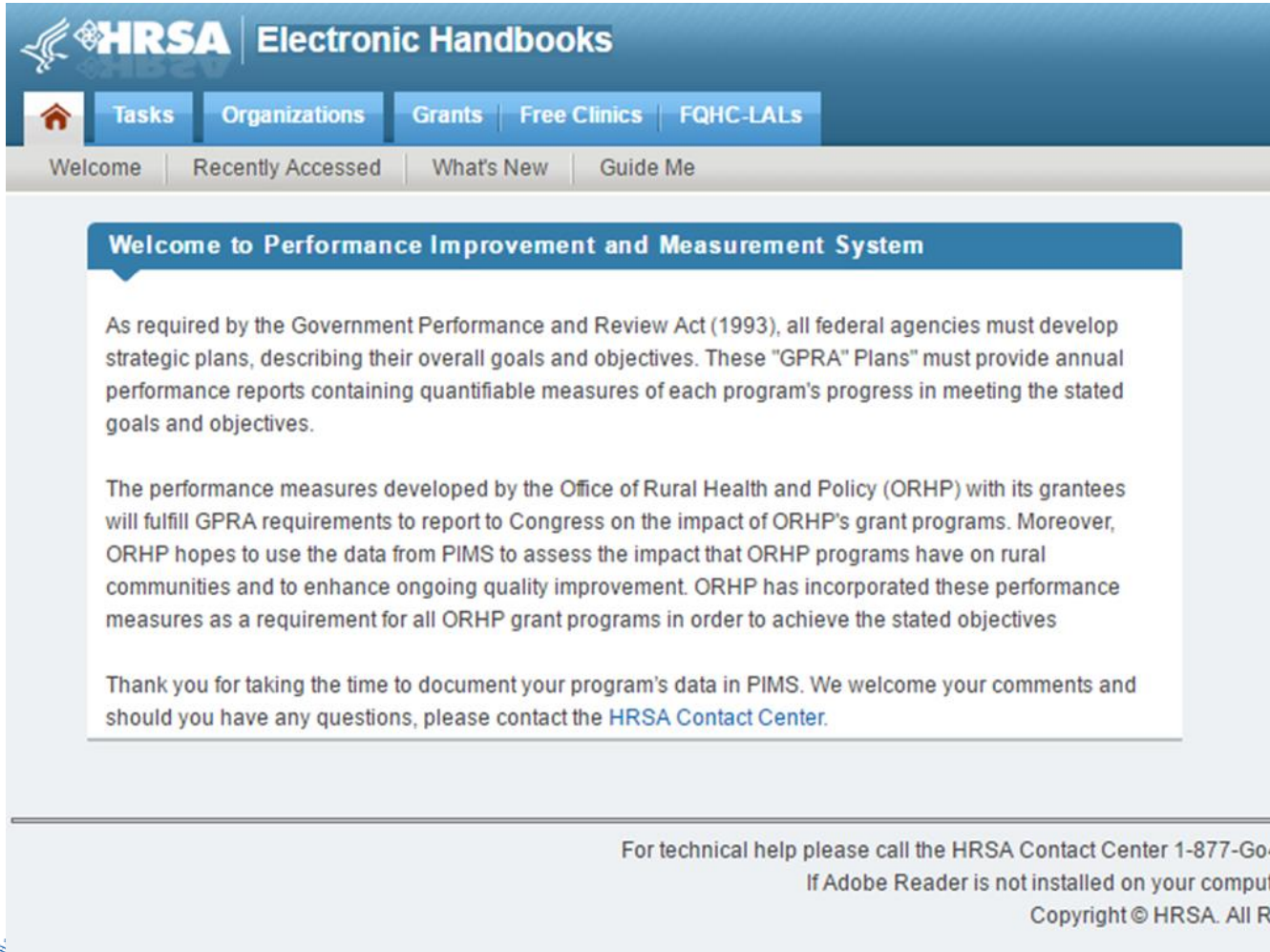
# Agenda

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- 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?



The screenshot shows the HRSA Electronic Handbooks website. The top navigation bar includes links for Home, Tasks, Organizations, Grants, Free Clinics, and FQHC-LALs. Below this is a secondary navigation bar with Welcome, Recently Accessed, What's New, and Guide Me. The main content area features a blue header for 'Welcome to Performance Improvement and Measurement System'. The text explains that federal agencies must develop strategic plans under the Government Performance and Review Act (1993). It also states that the Office of Rural Health and Policy (ORHP) will use PIMS data to assess the impact of its grant programs on rural communities. A footer section provides technical help information and copyright details.

**HRSA | Electronic Handbooks**

Home | Tasks | Organizations | Grants | Free Clinics | FQHC-LALs

Welcome | Recently Accessed | What's New | Guide Me

### Welcome to Performance Improvement and Measurement System

As required by the Government Performance and Review Act (1993), all federal agencies must develop strategic plans, describing their overall goals and objectives. These "GPRA" Plans must provide annual performance reports containing quantifiable measures of each program's progress in meeting the stated goals and objectives.

The performance measures developed by the Office of Rural Health and Policy (ORHP) with its grantees will fulfill GPRA requirements to report to Congress on the impact of ORHP's grant programs. Moreover, ORHP hopes to use the data from PIMS to assess the impact that ORHP programs have on rural communities and to enhance ongoing quality improvement. ORHP has incorporated these performance measures as a requirement for all ORHP grant programs in order to achieve the stated objectives

Thank you for taking the time to document your program's data in PIMS. We welcome your comments and should you have any questions, please contact the [HRSA Contact Center](#).

For technical help please call the HRSA Contact Center 1-877-Go-  
If Adobe Reader is not installed on your comput  
Copyright © HRSA. All R

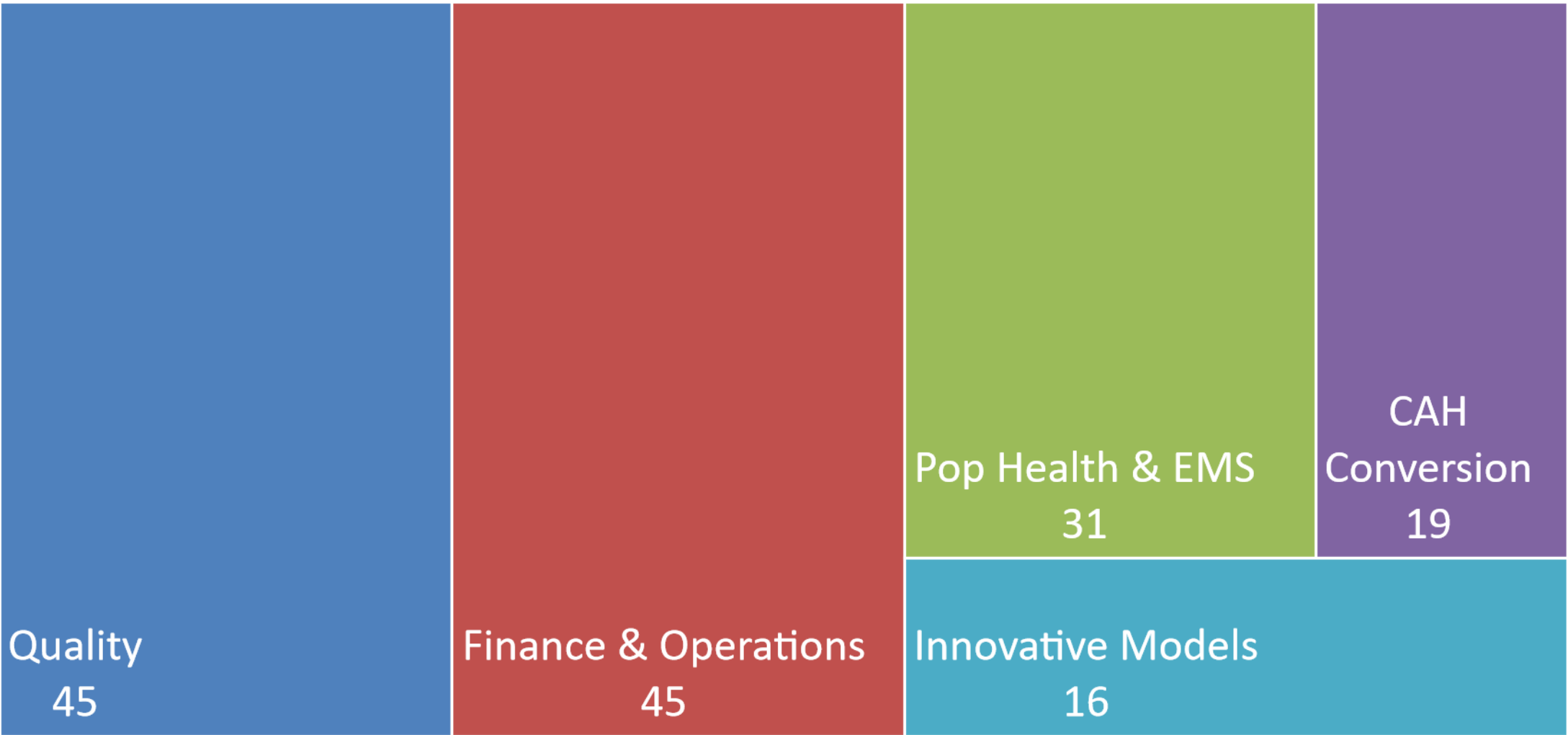
- Allow FORHP identify future baselines, track trends and improvement, identify best practices.
- Inform TASC and Rural Quality Improvement Technical Assistance's (RQITA) Tool and TA resource development strategies for not only MBQIP but other parts of Flex
- Provides more context for the Flex Monitoring 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

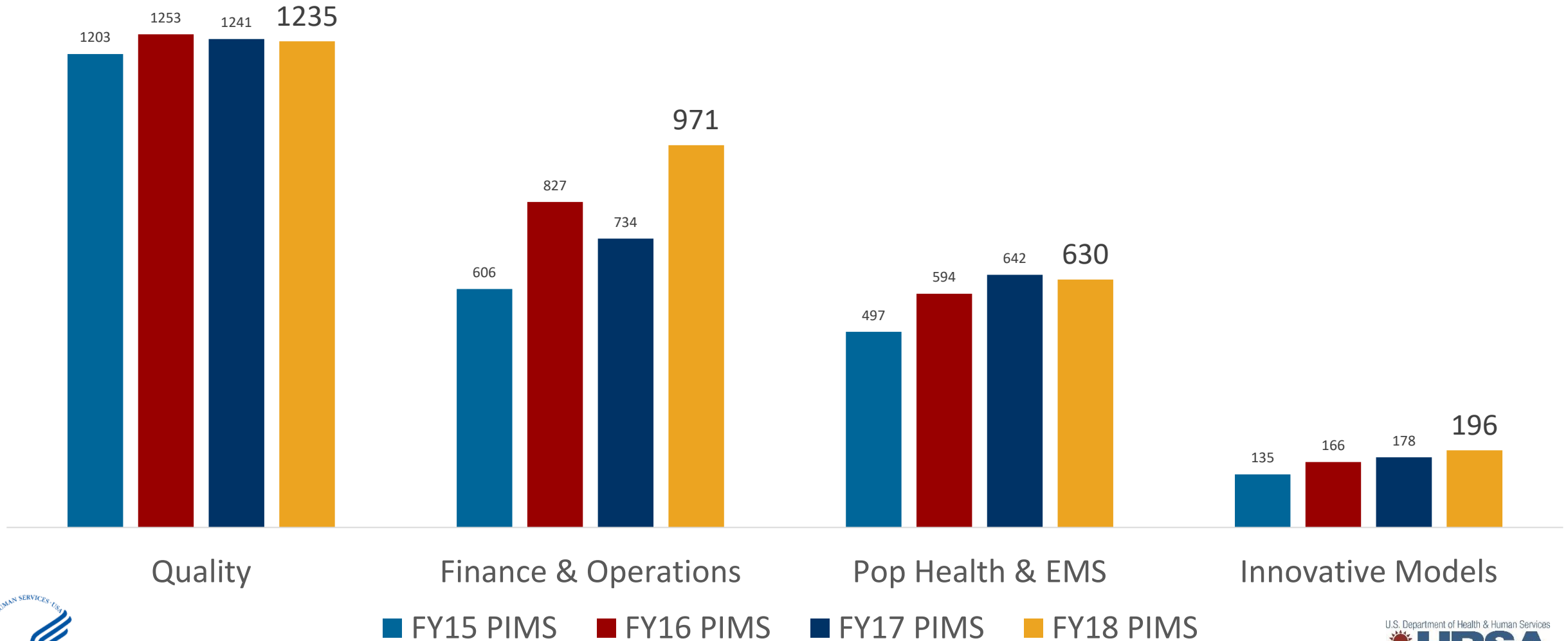
And 4 year trends



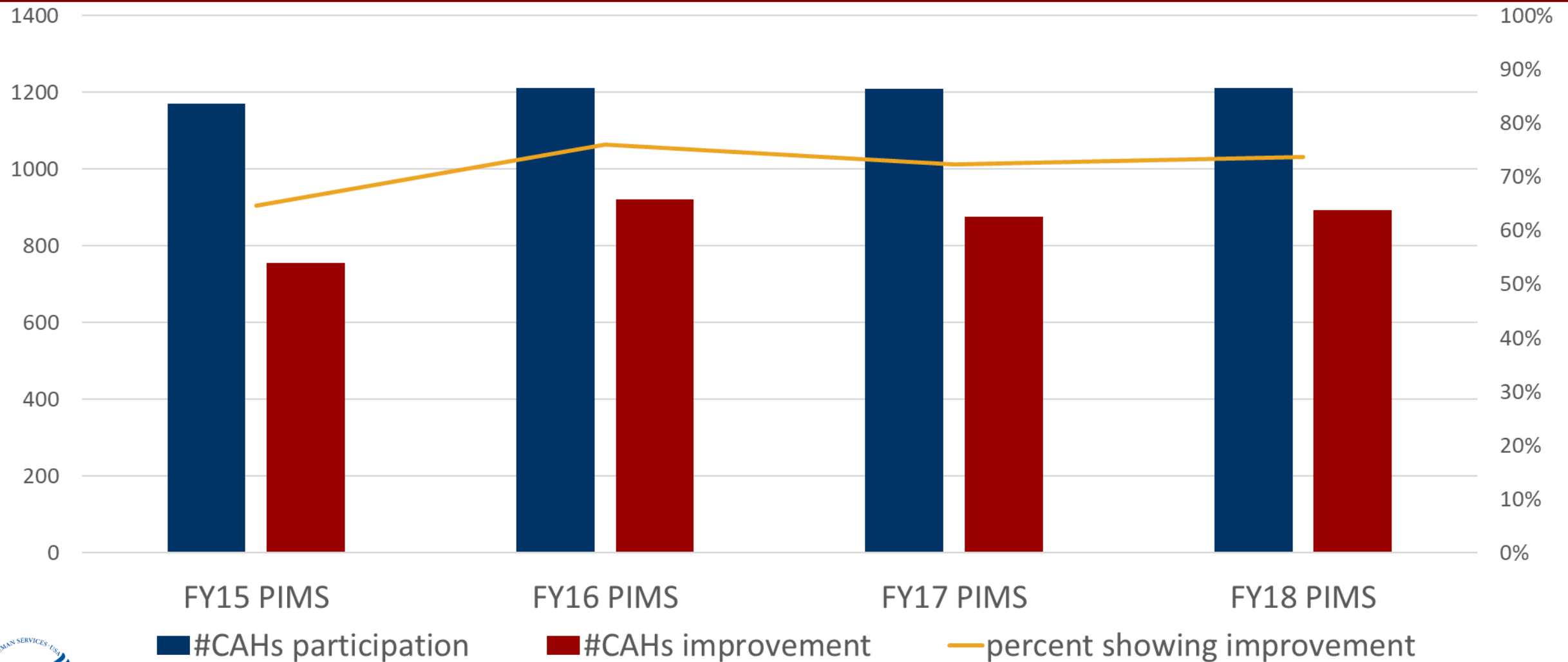
# Number of States Working in Each Flex Program Area FY 2018



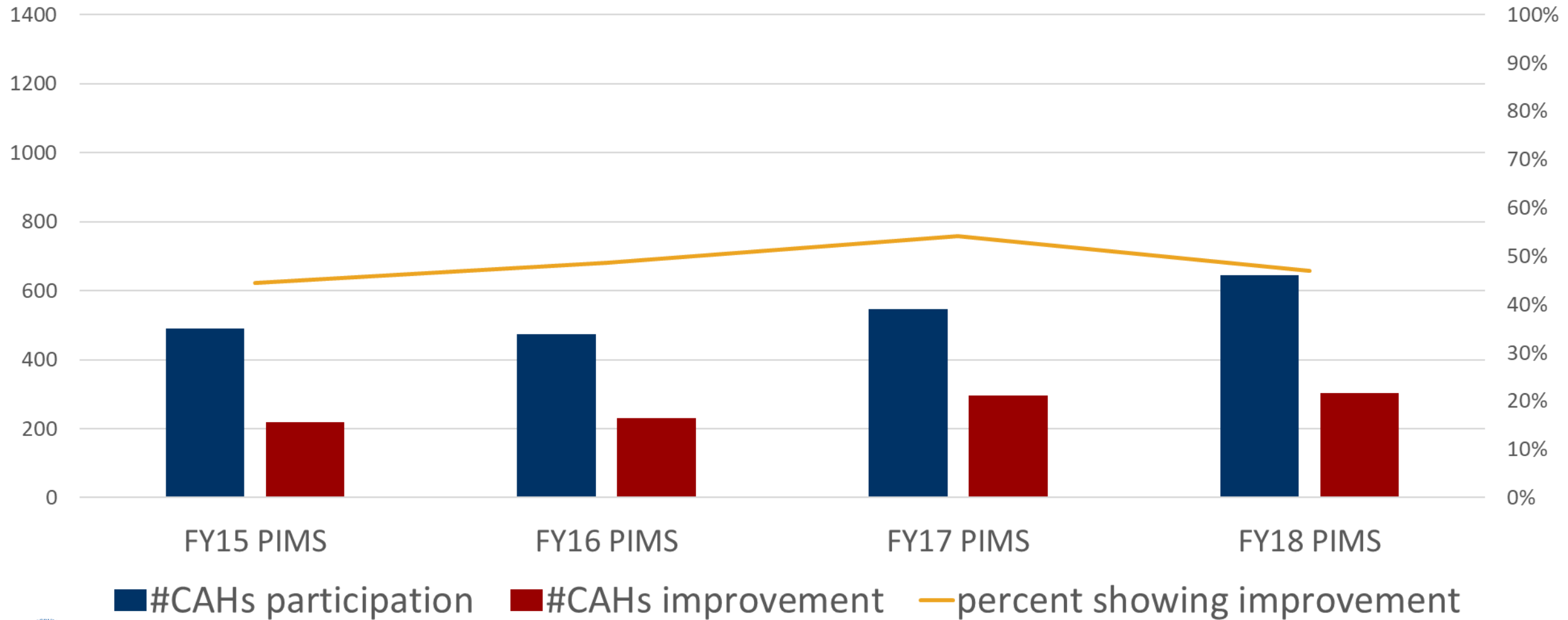
# Number of Critical Access Hospitals (CAHs) Participating in each Flex Program Area



# Core Measures Quality Improvement

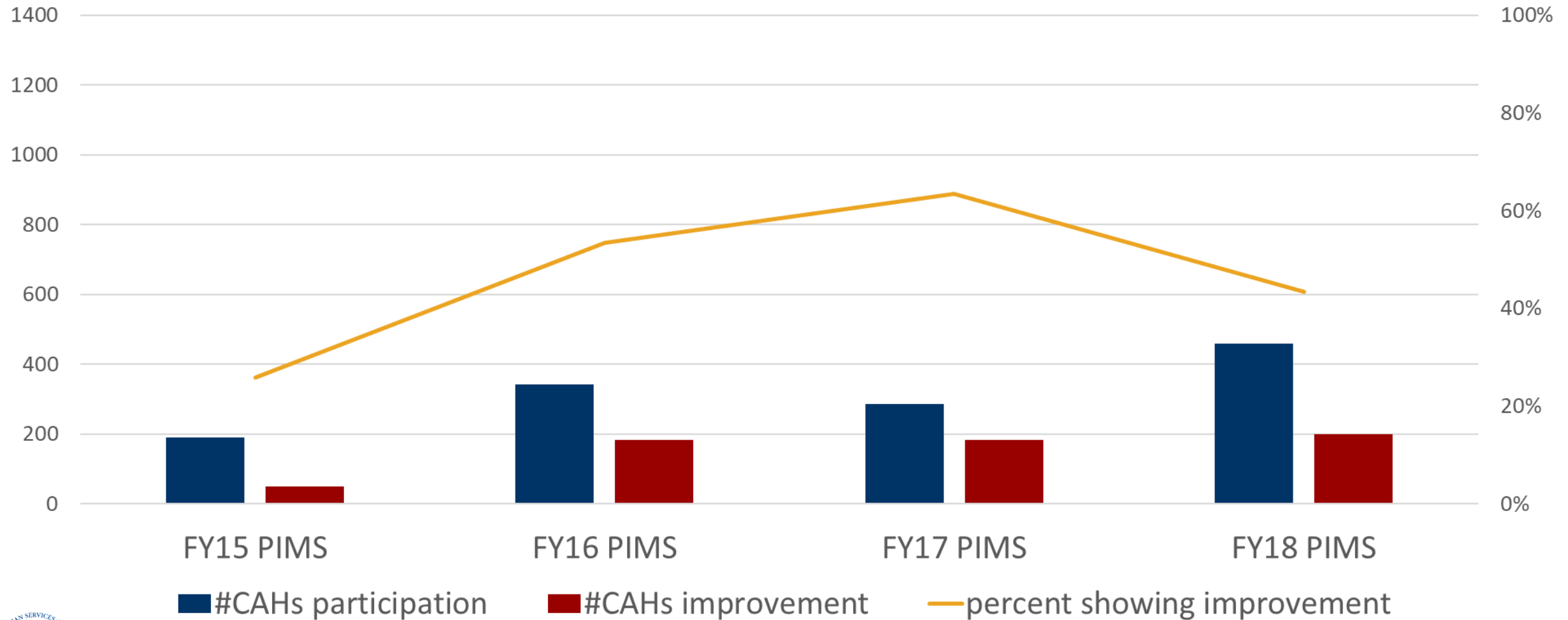


# Additional Measures Quality Improvement

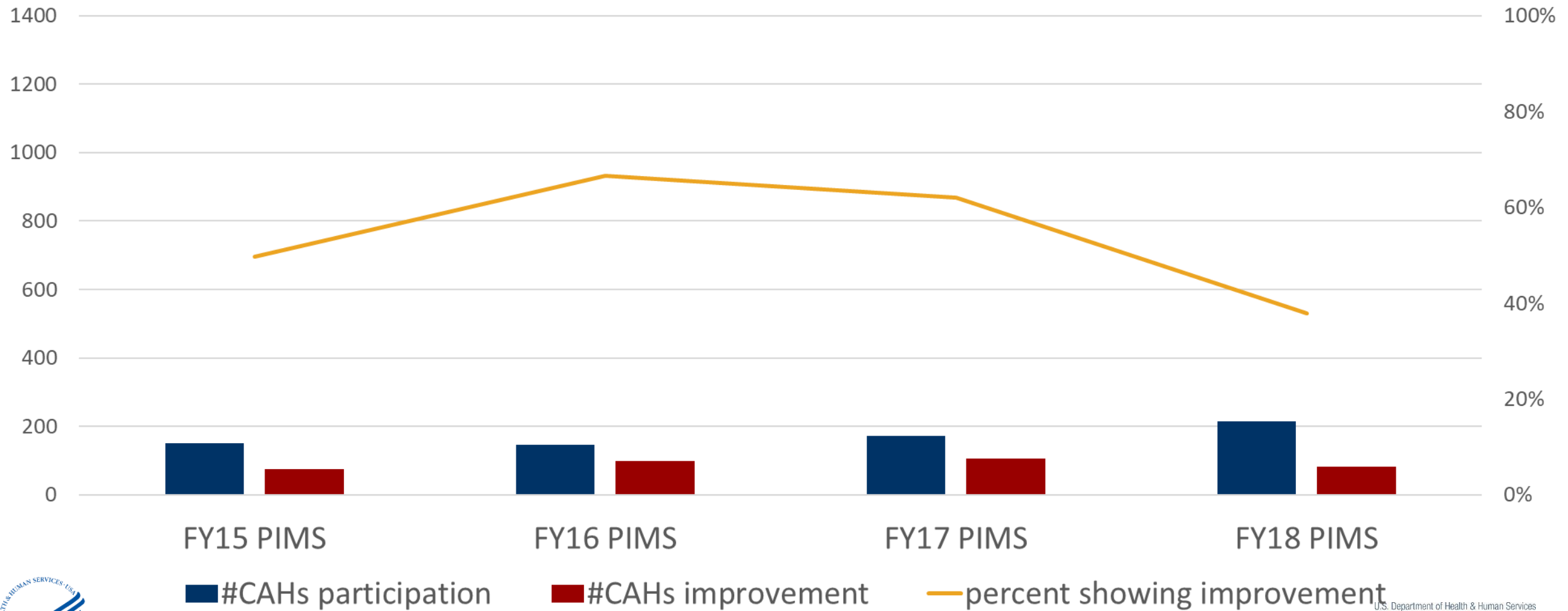




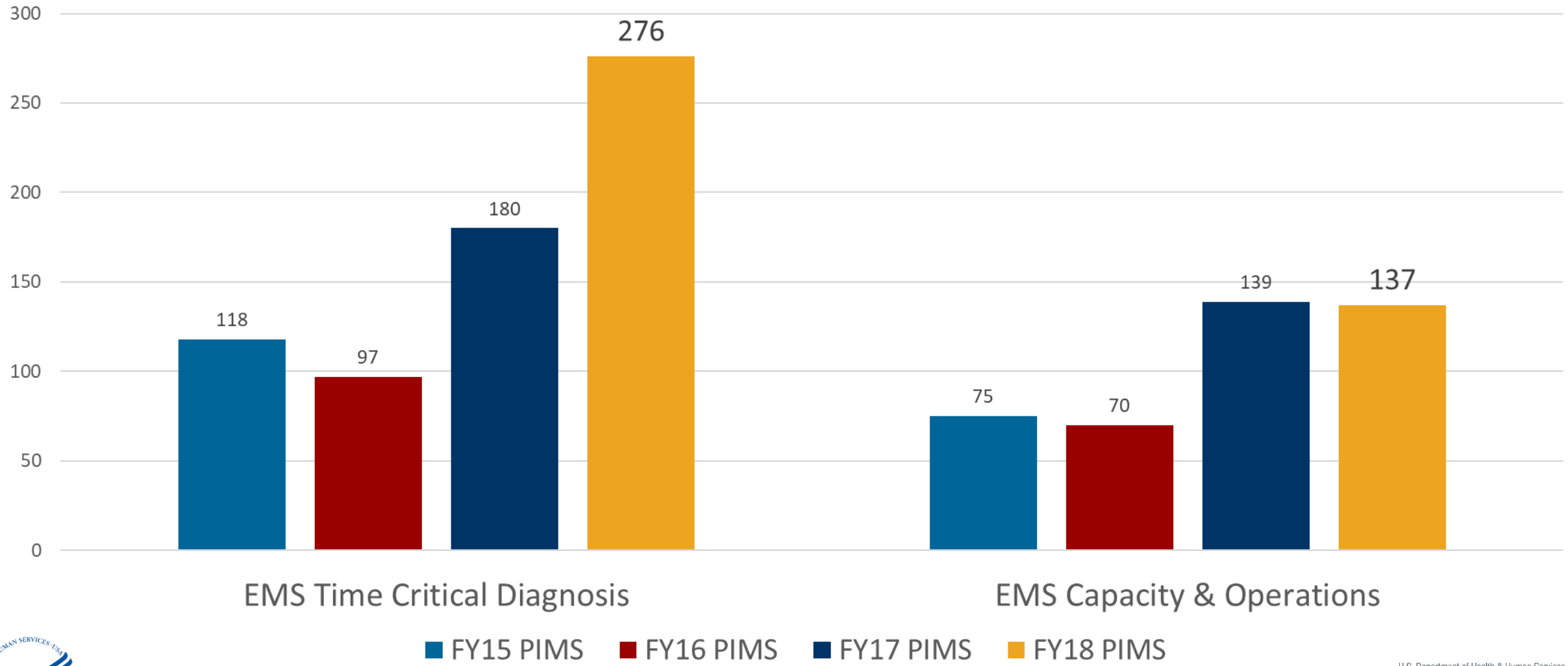
# In-Depth Financial Assessments



# Community Health Needs Assessments



# Number of Emergency Medical Services (EMS) Entities Participating in Flex EMS

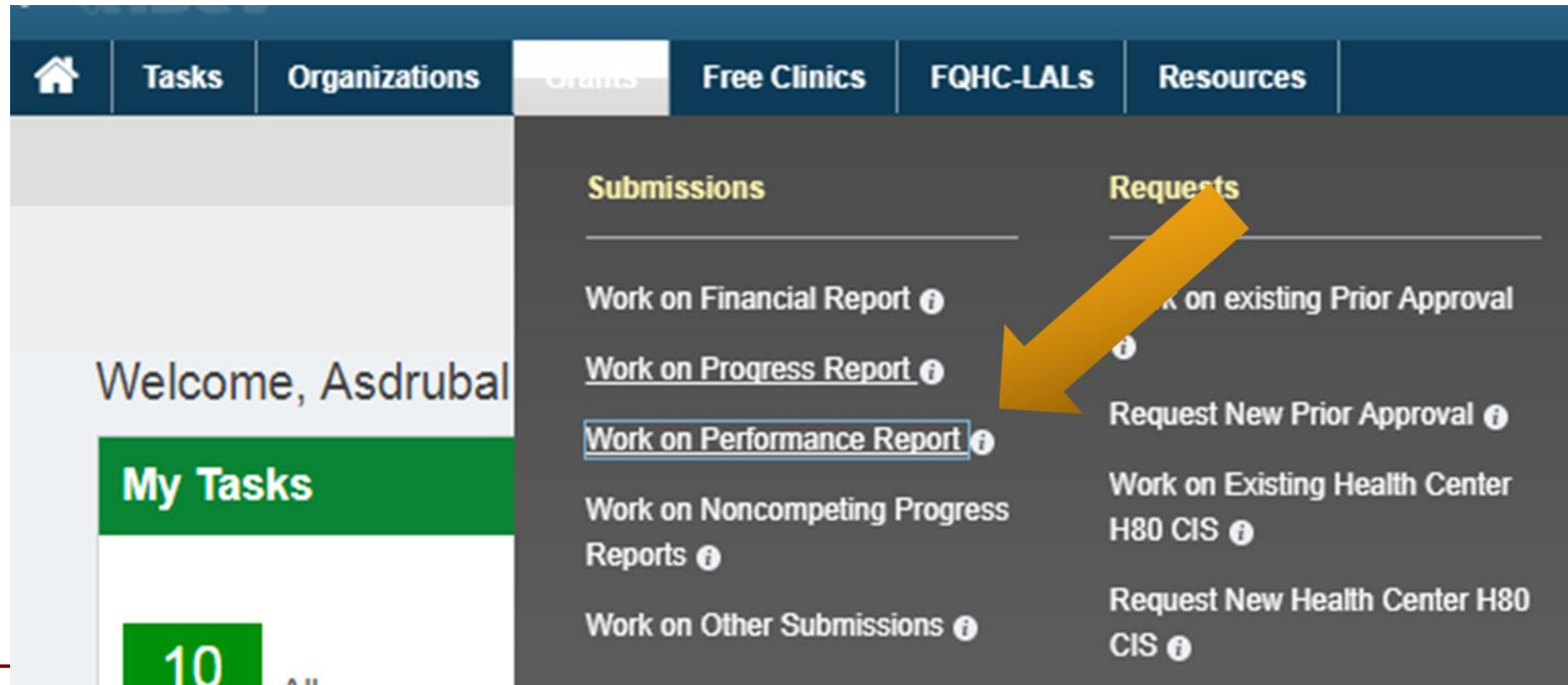


# FY 2019 PIMS Data Collection



# How do you find PIMS?

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



# PIMS Instructions

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## REPORTING INSTRUCTIONS AND DATA DICTIONARY FOR FY 2019 FLEX PROGRAM PIMS

*FORHP PERFORMANCE IMPROVEMENT AND MEASUREMENT SYSTEM*

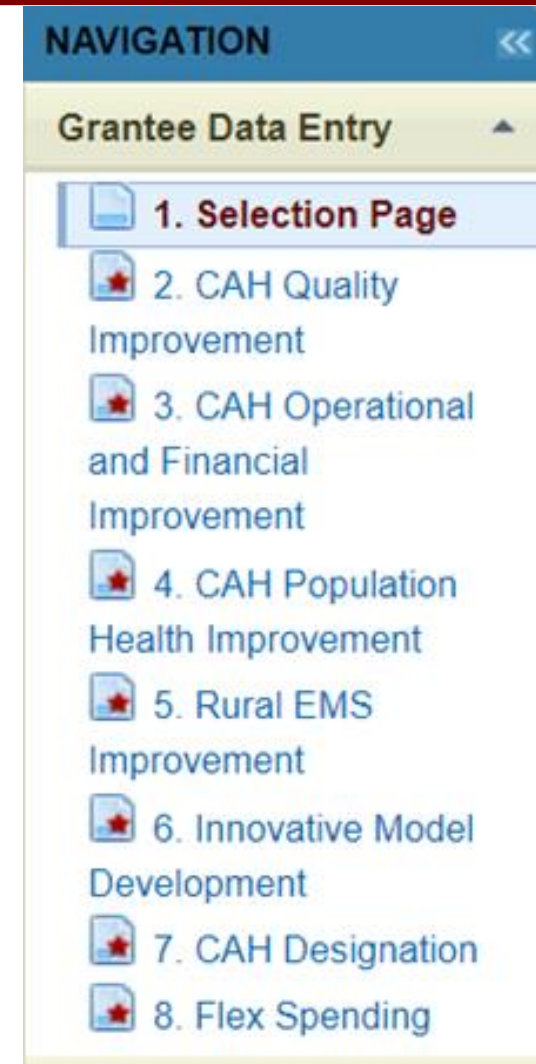
*MEDICARE RURAL HOSPITAL FLEXIBILITY PROGRAM*

*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



The screenshot shows a web application interface for data collection. At the top is a blue header bar with the word "NAVIGATION" in white, followed by a double-left arrow icon. Below this is a yellow bar with the text "Grantee Data Entry" and a small upward-pointing triangle icon. The main content area is a list of eight items, each preceded by a document icon with a red star. The first item, "1. Selection Page", is highlighted with a light blue background. The other items are: "2. CAH Quality Improvement", "3. CAH Operational and Financial Improvement", "4. CAH Population Health Improvement", "5. Rural EMS Improvement", "6. Innovative Model Development", "7. CAH Designation", and "8. Flex Spending".

# PIMS Reporting Process

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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





# PIMS Support

The screenshot displays the HRSA Electronic Handbooks web application. At the top, the HRSA logo and 'Electronic Handbooks' title are visible. A navigation bar includes links for 'Tasks', 'Organizations', 'Grants', 'Free Clinics', 'FHHC-LALs', and 'Resources'. A user profile 'Carol Manciel 98519' is shown with a 'Support' dropdown menu that is open, highlighting 'FORHP Instructions'. Other links in the dropdown include 'Logout', 'Contact Us', and 'FORHP Instructions'. Below the navigation bar, a yellow banner titled 'Getting Started with the Handbooks' contains links for 'Recommended Browser Settings', 'User Interface Crosswalk', and 'Tour the Handbooks!'. The main content area is titled 'Medicare Hospital Flexibility' and includes a session expiration timer: 'Your session will expire in: 19:26'. A section titled 'Instructions:' provides guidance on using the FORHP Instructions link. Below this, a section for 'U2WRH00005: POLYCRONE BOUNCE STATE BOARD OF NURSING' shows the 'Review Status: In Progress'. A table lists grant details: Grant Number (U2WRH00005), Grantee (POLYCRONE BOUNCE STATE BOARD OF NURSING), Current Report Period (9/1/2019 - 8/31/2020), Report Due Date (10/31/2020), and Submitted Date (N/A). A 'Resources' section includes a link to the 'Grant' and a 'Related H54 Grant Folder'.

**HRSA Electronic Handbooks**

Environment: Development Carol Manciel 98519 **Support** Logout  
Contact Us  
FORHP Instructions

Welcome Recently Accessed What's New Guide Me

**Getting Started with the Handbooks**

- Recommended Browser Settings
- User Interface Crosswalk
- Tour the Handbooks!

**NAVIGATION**

Grantee Data Entry

- 1. Selection Page
- 2. CAH Quality Improvement
- 3. CAH Operational and Financial Improvement
- 4. CAH Population Health Improvement
- 5. Rural EMS Improvement
- 6. Innovative Model Recruitment

**Medicare Hospital Flexibility**

Your session will expire in: **19:26**

**Instructions:**

For help on this page, please click the FORHP Instructions link under Support at the top right of the page.

**U2WRH00005: POLYCRONE BOUNCE STATE BOARD OF NURSING**

Review Status: In Progress

Grant Number: U2WRH00005	Grantee: POLYCRONE BOUNCE STATE BOARD OF NURSING
Current Report Period: 9/1/2019 - 8/31/2020	Report Due Date: 10/31/2020
Submitted Date: N/A	

**Resources**

- Grant
- Related H54 Grant Folder

# Linkage to H54 Flex Grant

The screenshot displays the HRSA Electronic Handbooks web application. The top navigation bar includes links for Tasks, Organizations, Grants, Free Clinics, FOHC-LALs, and Resources. The main content area is titled "Medicare Hospital Flexibility" and shows details for a specific grant: U2WRH00005, POLYCRONE BOUNCE STATE BOARD OF NURSING. The grant is currently in progress, with a report due date of 10/31/2020. A red box highlights the "Resources" section, which contains a link to the "Related H54 Grant Folder". The left sidebar shows a navigation menu with options like Selection Page, CAH Quality Improvement, and Reports. The bottom of the page features the HRSA logo and the text "Federal Office of Rural Health Policy".

**HRSA Electronic Handbooks**

Environment: Development | Carrol Manciel 98819... | Support | Logout

Tasks | Organizations | Grants | Free Clinics | FOHC-LALs | Resources

Welcome | Recently Accessed | What's New | Guide Me

Wednesday, 19th August 2020 3:47:43 PM

**Getting Started with the Handbooks**

- Recommended Browser Settings
- User Interface Crosswalk
- Tour the Handbooks!

**NAVIGATION**

- Grantee Data Entry
  - 1. Selection Page
  - 2. CAH Quality Improvement
  - 3. CAH Operational and Financial Improvement
  - 4. CAH Population Health Improvement
  - 5. Rural EMS Improvement
  - 6. Innovative Model Development
  - 7. CAH Designation
  - 8. Flex Spending
- Reports
  - Grantee Raw Data Report
  - Comparison Summary Report
  - Comparison Trend Report

**Medicare Hospital Flexibility**

Your session will expire in: 19:52

**Instructions:**

For help on this page, please click the FORHP Instructions link under Support at the top right of the page.

**U2WRH00005: POLYCRONE BOUNCE STATE BOARD OF NURSING**

Review Status: In Progress

Grant Number: U2WRH00005 | Grantee: POLYCRONE BOUNCE STATE BOARD OF NURSING

Current Report Period: 9/1/2019 - 8/31/2020 | Report Due Date: 10/31/2020 | Submitted Date: N/A

**Resources**

- Grant
- Related H54 Grant Folder

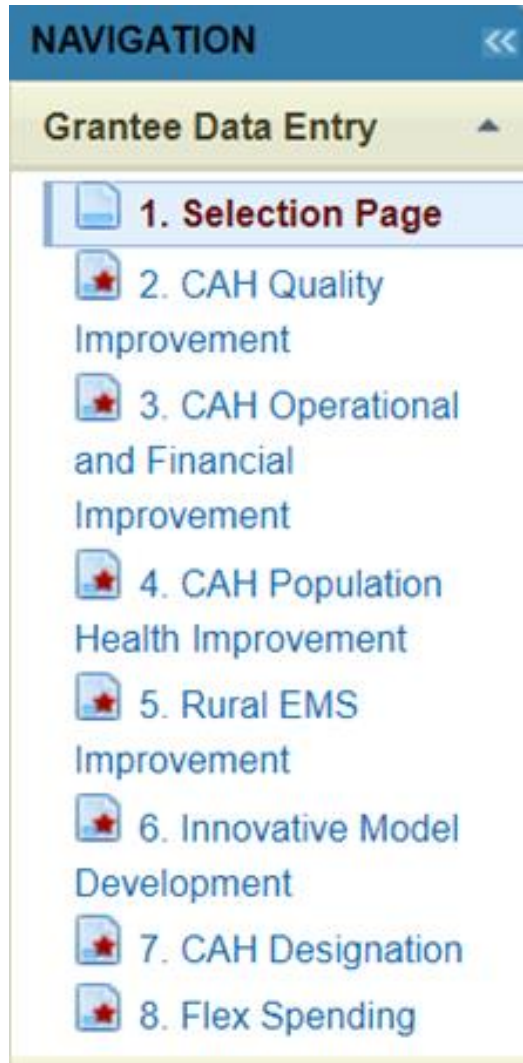
**Public Burden Statement:** An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB control number for this project is 0915-0063. Public reporting burden for this collection of information is estimated to average 70 hours per response, including the time for reviewing instructions, searching existing data sources, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to HRSA Reports Clearance Officer, 5600 Fishers Lane, Room 14N39, Rockville, Maryland, 20857.

**Federal Office of Rural Health Policy**

**Flex Selection Page**



# 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		<input type="checkbox"/>	<input type="checkbox"/>
381305 - Blue Mountain Hospital	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
381320 - Columbia Memorial Hospital	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
381312 - Coquille Valley Hospital	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
381322 - Curry General Hospital	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
381325 - Good Shepherd Medical Center	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
381321 - Grande Ronde Hospital	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
381307 - Harney District Hospital	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
381309 - Lake District Hospital	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
381311 - Lower Umpqua Hospital	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
381301 - Peacehealth Cottage Grove Community Medical Center	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
381316 - Peacehealth Peace Harbor Medical Center	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
381310 - Pioneer Memorial Hospital	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
381318 - Providence Hood River Memorial Hospital	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
381303 - Providence Seaside Hospital	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
381302 - Samaritan North Lincoln Hospital	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
381323 - Samaritan Lebanon Community Hospital	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
381314 - Samaritan Pacific Communities Hospital	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
381304 - Southern Coos Hospital And Health Center	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



# Select your activity categories

## Flex Selection Page

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





# Next enter CAH data

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



# Reminder: Historical Participation

CAH Name	Historical Participation	Participation	Improvement
Select All		<input type="checkbox"/>	<input type="checkbox"/>
381305 - Blue Mountain Hospital	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
381320 - Columbia Memorial Hospital	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
381312 - Coquille Valley Hospital	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
381322 - Curry General Hospital	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
381325 - Good Shepherd Medical Center	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
381321 - Grande Ronde Hospital	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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

≠

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

# 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

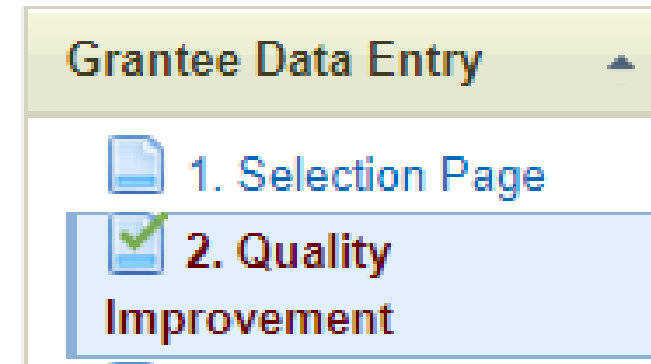
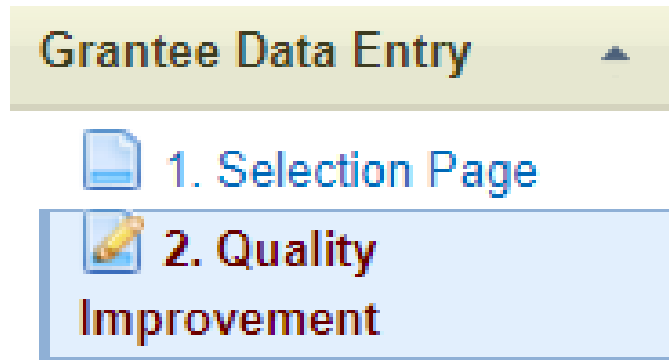
Any Comments About this Form or the Data You Entered

Is this Form Complete?  
If selected "No", you're not required to fill in all fields before you save.  
☐ No ☒ Yes

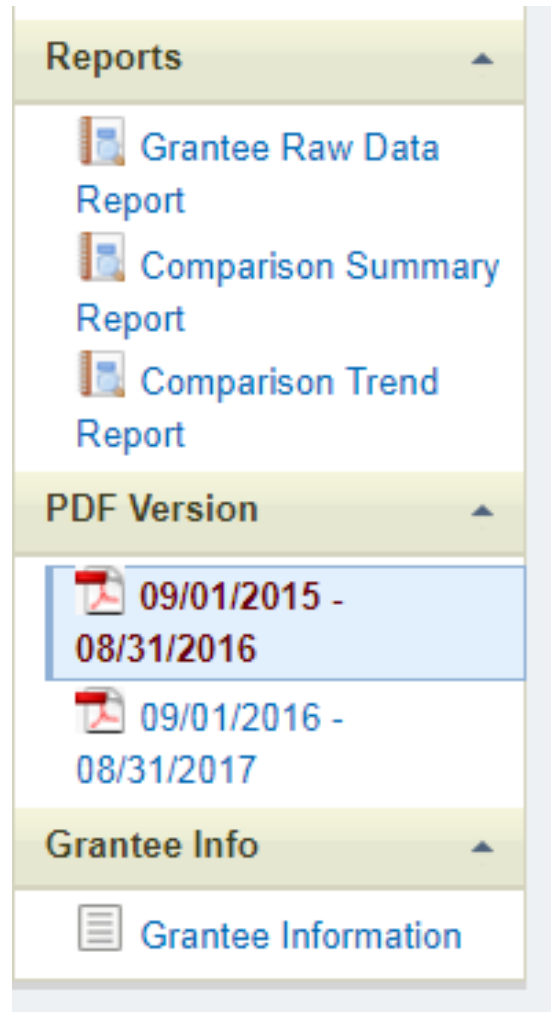
File Attachments

File to Upload:  No file chosen [Attach File](#)

# 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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*Population Health*

**Natalia Vargas**  
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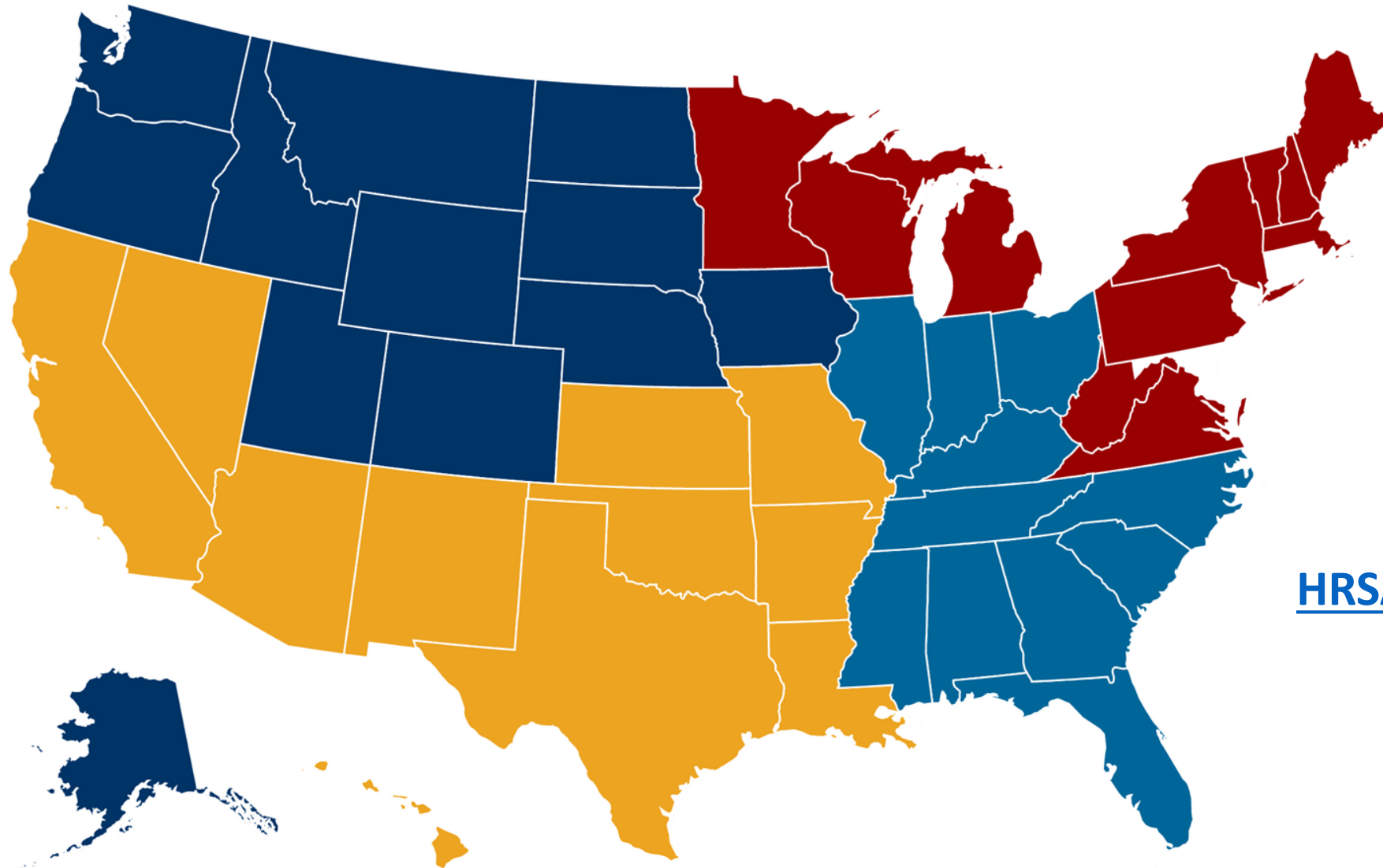
*Quality*

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*EMS*

**Laura Seifert**  
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*Financial & Operational*



**HRSA PO Map**

# Contact Information

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**[Tchappel@hrsa.gov](mailto:Tchappel@hrsa.gov)**

