

New Mexico Flex Program

Fiscal Year (FY) 2019 Significant Accomplishments, Best Practices, and Lessons Learned

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Program Area 1: CAH Quality Improvement

Through their partnership with the New Mexico Hospital Association (NMHA), the New Mexico Flex Program supports their CAHs in their continued shared accountability of patient safety, oversee and support hospital quality directors' networking, and focus improvements in nationally accepted quality indicators for all the small rural hospitals.

One significant accomplishment was that NMHA offered a program that closely aligns with Medicare Beneficiary Quality Improvement Project (MBQIP) data of antibiotic stewardship. The hospital leaders requested this program to address skills and knowledge gaps in their pharmacy departments. This was NMHA's first year of this program and is facilitated through the Society for Infectious Diseases Pharmacists and lasts nine months. It includes self-study, live webinars, and a skills component that involves applying the program in their hospitals. The expected outcome is to have hospital pharmacists complete all program components before the end of 2020 to receive their certificates and reimbursement for the program costs. Based on that feedback, NMHA added this certificate program to the plan for 2020 to align with their Flex hospitals' needs. Currently, pharmacists from six Flex hospitals are participating in this program.

The nine-month program by NMHA was expected by the end of Current Year (CY) 2020. Results should be available by the FY2020 quarterly reports and end-of-year reports. After completing the program, they will gain a skill set and plan specifically for the hospital.

Lessons learned during this project include:

Since this is the first year of this project, the anticipation of sharing best practices in the encouragement of vaccinations with CAH leadership and its importance to overall health for New Mexico will improve outcomes. This project could develop a baseline of data for influenza vaccinations that will improve outcomes. This has the potential to be a best practice in implementing activities in this program area.

Program Area 2: CAH Operational and Financial Improvement

The New Mexico Flex Program partners with the New Mexico Rural Health Network (NMRHN) to provide ongoing technical assistance and consulting services to New Mexico CAHs to assist them in operational, financial, and quality care measure reporting. NMRHN uses the Kansas Hospital Foundation Quality Health Indicators (QHI), a web-based sourcing methodology system, and provides technical assistance to CAHs for the QHI application and supports the hospitals in their quarterly data reporting. NMRHN presented the most recent financial benchmarking reports to the CAH chief financial officers (CFOs). There are now added pie charts for payer mix reports, and a spreadsheet containing the raw data and the quarterly bar chart reports.

The NMRHN is an organization that exists to create collaborative working relationships among rural hospitals and strengthen its members through sharing resources, education, and innovation. Collaboration with CAHs leadership and financial staff to discuss tools, resources, and benchmarking measures resulted in an economic assessment beneficial to these CAHs and provided direction to improve financial and operational outcomes. NMRHN continues to track agreed benchmarked financial indicators and develop best practices for financial improvements each year.

Lessons learned during this project include:

These report reviews help identify revenue cycle best practices among rural hospitals that can benefit other CAHs. NMRHN has organized educational opportunities for CAHs to help with financial and operational improvement.

Program Area 4: Rural EMS Improvement

The New Mexico Flex Program's partnership with the Eastern New Mexico EMS Corporation Region III (Region III) provides a tremendous opportunity to improve quality emergency medical services (EMS) care for patients.. Even under COVID-19 restrictions on mass gatherings, Region III held courses for 19 administrators and 32 providers through video teleconferencing. Region III staff also provided daily technical assistance for EMS providers, service directors, and medical directors. This assistance

included run report entry problems, looking for documentation errors, and running reports to review the accuracy of information.

The results and work accomplished by Region III include reports developed to analyze data input, who is accessing the New Mexico EMS Tracking and Reporting System (EMSTARS) system, and how frequently it is accessed. Region III is still able to train individuals over the phone and by video teleconferencing. Region III provides the technical assistance to enhance the utilization of EMSTARS so EMS staff and medical directors can generate reports and assess areas in need of improvement.

Lessons learned during this project include:

Region III has the experience and expertise with EMSTARS and will continually work with its members to collect and compile quality data from the EMSTARS system. This partnership provides a tremendous opportunity to improve quality EMS care for patients. Region III includes feedback on problem areas and assists services in these areas to enhance data quality by training data collection and data analysis.