

How to Assess the Needs of Your SHIP Hospitals and Choose Activities

National Rural Health Resource Center

Monday, July 30, 2018

Agenda

- Explain the intent of Small Hospital Improvement Program (SHIP)
- Learn methods for Identifying needs of the SHIP hospitals
- Assist hospitals to choose best options based on needs and opportunities
- Identify Resources – project and training options – best vendors
- Create a Network/Consortium based on joint project(s)
- Promote SHIP activities to support hospitals

Small Hospital Improvement Program (SHIP) Grant...the beginning

- Small Hospital Improvement Program started in 2002 as part of the Medicare Prospective Payment System and the Health Insurance Portability and Accountability Act (HIPAA) / \$15 Million for 1400 hospitals to assist with:
 - Implementation of Prospective Payment System for outpatient billing
 - Implementation of HIPAA
 - Support Quality Improvement activities (reduce medical errors)

SHIP Grant Intent / Only for Rural

- Assist small rural hospitals with transition of new programs and requirements two ways:
 - 1) Support individual specific hospital needs
 - Funds for HIPAA training
 - Admission criteria software (Interqual)
 - 2) Support group of SHIP hospital needs
 - Common program/deficiency
 - Take advantage of the combined dollars to improve value of the program/purchase
 - Each hospital = \$9,000; 10 hospitals together = \$90,000 for a program

Evolving SHIP Program – 16 years

- Steady changes made since inception to meet ongoing needs of critical access and small rural hospitals under 49 beds
 - ICD 10 training
 - Hospital Consumer Assessment of Healthcare Providers and Systems Reporting Measures
 - Quality Improvement focus
 - Affordable Care Act (ACA): equipment and/or training to attain value based purchasing provisions; join an accountable care organization or create a shared savings program; purchase health information technology equipment and/or training to comply with meaningful use, and payment bundling

SHIP Program Coordinator

- Responsible for the State Application and Implementation of your SHIP program
- Identify and notify the eligible hospitals
- Coordinate the individual hospital applications
- Present options for hospital selection
- Ensure the individual hospital and your state application meet the intent of the SHIP program
- Comply with the requirements of the grant program – reports and the activities/outcomes

SHIP Grant Investment Requirement Must Follow Purchasing Priorities

1. Report Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) into Hospital Compare
2. Be ICD -10 Coding Compliant
3. CAHs - Participate in Medicare Beneficiary Quality Improvement Program (MBQIP)

Then, can be more creative and use funds other activities

- Options from the Purchasing menu – or other ideas
- **You often have to help guide selection**

SHIP Participation – Individual or Consortium

- Hospital can choose to use the SHIP funds individually
 - Has the hospital meet the SHIP requirements for participation and reporting? Quality measures? ICD -10? CAHs reporting MBQIP?
 - Example: HCAHPS subscription and participate in an antibiotic stewardship project
 - OR
- Hospital can choose to participate in a group project (s)
 - Same requirement – pools funds
 - Example: Lean training with three hospitals and coding boot camp

Let's Get Started: Hospital Selection

- **Why help?**
- New SHIP Hospital CEOs/Grant Coordinator
- SHIP Hospital not sure of program choices
- Maybe hospital is not interested in the SHIP program...thinks too much work and does not see value of grant
- Perhaps SHIP Hospital is part of a system...not sure of program
- Or hospitals would like to pool funds for group activity/activities
- Be prepared so all SHIP funds spent in timely manner

How to Identify Hospital Needs and Ideas

#1. Recommend a SHIP Advisory Committee

- Hospital champions – CEO, CNO, Quality Director, Grant Coordinator
- Invite to a conference call with an agenda and ideas

2. Conduct a needs assessment – survey monkey

#3. Work with hospital association or network

#4. Review information on your SHIP hospitals – quality reports, financial data, education programs, compliance, survey issues

#5. Consider new programs and trends such as coding accuracy, care coordination, bundling projects, crisis prevention training, M/U

Identifying Needs – The Process

- Start with the application...seek hospital feedback at that time
- Set an advisory call or meet with hospital association or even a hospital system (Systems now have 2+ CAHs/rural hospitals)
- Develop a needs assessment survey
- Talk to another state SHIP Coordinator...always need new ideas
- Evaluate last year's SHIP program – how did the hospitals do?
 - Spend all their funds timely? Any interest in a group project? Less number participating each year?
- Start Early....planning important

SHIP Advisory or Needs Assessment...What do I ask?

- Ask for feedback/suggestions regarding the SHIP grant process
 - How can communication and the process be improved?
- What are the hospital's operational needs? *Use SHIP Menu ideas*
- Revenue cycle/financial issues?
- Compliance training – quality improvement
- Coding, credentialing training, patient safety organization
- Value based purchasing/accountable care organization training
- Crisis prevention training, antibiotic stewardship
 - **START: PICK TOP 3-5 EDUCATIONAL OR OPERATIONAL NEEDS**

Remember Trends / New Regulations

- Tele-medicine (new proposed billing codes)
- Chronic Care Management – expanding care coordination processes
- Customer Service – preparing for culture change and quality focus
- Provider based clinics
- Tracking Opioid and prescription use

Help Individual Hospital Application

- Encourage hospitals to participate in SHIP
- Review investment requirements
 - Hospitals can use funds for investment requirements
- Have a list of ideas and guidelines for hospital projects/activities
- Stress the value of support for rural – policy makers created program as means to provide ongoing support/transition
- Remind hospitals of SHIP flexibility or group option
- In the end... if hospital declines, it's okay/may be reasons

What if the Hospitals Want to Pool Their Funds? Consortium Activities

- **What is my responsibility as the SHIP Coordinator?**

- A. Can organize the activities/projects

- Select the activities, set up, implement and track expenses/outcomes
 - Hospital designates funds to project

- B. Use an outside consultant or another organization such as hospital association or healthcare firm or system

- B. Solicit RFP which details projects, activities and so forth

- C. Subcontractors – evaluate

- **CAN DO MORE THAN ONE ACTIVITY WITH POOLED FUNDS**

Value of Group Projects/Consortium

- Promotes culture of Sharing Best Practices and Learning
- Increases the value of the dollar
- Encourages hospitals to partner and share resources
- Obtain programs otherwise not affordable for hospital (s)
- Need a lead group or consultant or state office to bring consensus and selection

Pooling Funds...How does this work?

- **2 or more hospitals can choose to put SHIP dollars together:**
 - Create their own activities such as sharing a Swing Bed Consultant to provide education, mock survey and audit (I.e. Kerry Dunning);
 - Open the activity to all SHIP hospitals such as a Coding Boot camp (I.e. hospitals that pooled funds attend n/c while others pay small fee);
 - Offer activity just for the SHIP hospitals in the same system (I.e. bundled payment project or revenue cycle training);
 - Pay towards an accountable care organization project where the SHIP hospitals participate in (I.e. patient centered medical home certification); or
 - Pay towards an association project such as a MBQIP state reporting website

Examples of Pooled Projects

2 or more hospitals

- HCPRO – Boot Camp (5 days)
- Credentialing Course
- Compliance Training
- Medication Reconciliation
- Crisis Prevention Institute
- Studer Training
- Customer Service – Care coordination
- Remote pharmacy
- Pharmacy compounding
- Quality Improvement Training for rural health clinics
- Physician quality training – using disease registries
- Understanding HEDIS measures
- Developing board education videos (10 minute programs)
- Patient safety organizations
- Navigator programs
- Revenue cycle programs

New Consideration: Health Information Technology and Meaningful Use

- New allowance with changes now to meaningful use requirements for hospitals
- Equipment and training now an option
 - Training on Merit Incentive Payment System (MIPS) and software to help record provider measures
 - Support interoperability
 - Consultant to help with electronic record selection
 - Participation with system hospital on joint bundling project
 - No grant funds toward hospital capital projects

Resources - Options

- **Finding Qualified Resources – Hospitals Need Suggestions**
- Individual Projects – can do more than one project? \$10,000
 - Revenue cycle...Accounting firms, billing companies
 - Care coordination...consultants and organizations that manage ACOs
 - Coding Audit...Coding company/HCPRO
 - Patient Safety Organization...Clarity
 - Patient Satisfaction Vendors...National Rural Resource Center has list
 - Associations/Network/National Rural Health Association have ideas/trends

Resources - Options

- **Finding Qualified Resources – Hospitals Need Suggestions**
- **Group Projects - purchase programs/consultant work**
 - System project...for its SHIP hospitals
 - Financial processes
 - Value Based Purchasing
 - Technology of Meaningful Use – sharing information
 - Population Health
 - Rural Health Clinic quality measures (Pond Project)
 - ICAHN Example: Crisis Prevention Institute; Boot Camp; Patient Satisfaction Program; ACO – admission, discharge and transfer alerts; Swing Bed audits

Communication with Hospitals...

Guiding Selection of SHIP Activities

- Contact each individual hospital – CEO or contact
- Letter, email or general posting on website
- Best to set up a webinar
 - Follow up with each SHIP hospital – direct communication
- Provide a list of options
 - Individual hospital use
 - Group project or multiple group projects
 - Careful of other federal programs/avoid crossing funds (Flex grants, HIINs, EMS)

Promoting the Consortium Project

- State program organizes consortium – offers ideas
 - Participating hospitals met and select activities
 - Often hospitals know best vendor/consultant, if needed
 - Serve as the task master
 - Set project time frame and activity schedule
 - Provide resources and be ready if struggle...remember to either lead or have a hospital/consultant leader
- Hospitals are confident in the consortium project offered by organization and recognize the value

SHIP Challenges...Let's Talk

- What to do if hospitals are not able to spend the money?
- What if the consultant is not able to complete project?
- What if hospital joins a system during SHIP project?
- What if hospital cannot decide on a SHIP project?
- What if state presents consortium project and only two participate and need six?
- Other questions?

SHIP Intent – Your Role Important!

- Support of rural hospitals
 - 85 closed since 2010
 - >750 hospitals are financial stressed
 - Impact of population health – Triple AIM/Consumer Expectations
 - Hospital transition to new models
 - Rural hospitals – supporting their rural communities' viability
 - Impact of value based purchasing (care) payment system
 - Pay for performance
- Policy makers make available funds to support hospital operations and transition

Questions/Issues

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Illinois Critical Access Hospital Network

Illinois Rural Community Care Organization

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