Completing the Progress Report

Q: Should Section I of the Performance Narrative include information about the SORH or information about the hospitals?

A: Section I should include a summary of SORH-level progress as well as a summary of hospital/network-level progress. Please separate out these two parts of Section I so that it’s clear to the reader which goals/progress relate to the SORH and which goals/progress relate to the hospitals or networks. Refer to the work plan(s) you submitted for FY16 as a guide in writing these summary updates.

Q: Does Section II of the Performance Narrative need to include hospital-level changes?

A: Section II should describe variances or deviations from the approved work plan at the SORH level; changes in hospital-level activities do not need to be described in this section unless they had a major impact on the SORH work plan. Variances or deviations may include changes in goals or objectives, changes in personnel, changes in budget, or changes in network/consortium presence. Also use this section to discuss any issues encountered during the budget period and any actions taken to address them. Keep in mind that significant changes must still be submitted through the EHB Prior Approval Module.
Q: There is information that I need to collect from my hospitals that doesn’t appear in the Hospital Application Template Form. What should I do?

A: You may modify the Hospital Application Template Form as needed for your office, such as inserting additional questions that you’d like your hospitals to answer. You may also make changes to the State Spreadsheet of SHIP Applicants if needed, such as inserting additional rows for activities or including extra data. However, please make sure that, at a minimum, you provide the data that is requested within the provided State Spreadsheet of SHIP Applicants.

Q: Can I use an online survey tool like SurveyMonkey to send and receive hospital applications?

A: Yes, you can use an online assessment tool if that method is acceptable for your organization. Feel free to create your own assessment based off of the FY17 Hospital Application Template Form and include any other questions that your office needs to collect data on. If you have a paid subscription to SurveyMonkey, you can also email ship-ta@ruralcenter.org to request a SurveyMonkey template of the hospital application be shared with your account.

Q: Do I need to submit all of our hospital applications through EHB?

A: No, you do not need to submit applications from individual hospitals; you only need to submit the State Spreadsheet of SHIP Applicants. Use data from the hospital applications to complete the spreadsheet fields. Keep the hospital applications on file for reference.

Q: When I open the FY17 State Spreadsheet of SHIP Applicants, I don’t see dropdown options for Columns B or G in the FY16 Progress tab. What should I do?

A: If you’re using Microsoft Excel 2007 or earlier, the dropdown options in Columns B and G might not convert properly. The preloaded options for Column B are simply the corresponding FY16 SHIP Purchasing Menu activities underneath each category. The preloaded options for Column G are listed out in the instructions tab. Feel free to enter your responses directly into the cells in Columns B and G if the dropdown options aren’t working, or you can send an email to ship-ta@ruralcenter.org for help with a different Excel file version.

Q: In the State Spreadsheet of SHIP Applicants, there is a question asking if 90% of FY16 funds have been spent. In past years, there was a similar question regarding the grant that had most recently ended. (So in this
case, it would be FY15.) Is it correct that we should be providing expenditure information for the current fiscal year, FY16?

A: The State Spreadsheet of SHIP Applicants does ask for hospitals’ expenditures during the current grant cycle, FY16. This is designed as part of the data collection process to give FORHP a better understanding of when and how hospitals are using funds. SHIP data-gathering efforts are being expanded to demonstrate program integrity by capturing relevant information. Please be as accurate as possible when responding to this question, even if many of your hospitals have not yet completed their expenditures for FY16, as this information will be useful to FORHP.

Q: In the FY16 Progress tab of the State Spreadsheet of SHIP Applicants, columns I and J ask about impact and outcomes of SHIP activities. Could you explain what you’re looking for in these sections?

A: These columns are intended to help demonstrate what has been accomplished with SHIP funds and how those funds have impacted participating hospitals. In responding to these questions, briefly describe any changes that occurred as a result of each SHIP investment. (This can be done in as little as a few words or a phrase.) Impact may be described in process measures, outcome measures, or both. If available, it’s beneficial to include data that support the impact, such as numbers or percentages that demonstrate the change. Although there are no standardized measures for this section, the following examples may be helpful in providing relevant information:

- For trainings or educational activities:
  - Number of training sessions completed
  - Number of staff trained or certified
  - Improved quality as a result of the training
  - Improved staff or patient satisfaction as a result of the training

- For hardware/software purchase or installation:
  - Increase in patients who can be served
  - Increase in staff who have access to the new system
  - Improved process efficiencies (e.g., Time saved as a result of the new technology, Money saved or generated through the use of the new technology)

- For efficiency or quality improvement projects:
  - Number of staff trained in a new process
  - Time or money saved as a result of a new process
  - Improved quality measures
  - Improved staff or patient satisfaction
SHIP Purchasing Menu

Q: As stated in the funding priorities from the purchasing menu, HCAHPS and ICD-10 must be fully implemented and publicly reported to Hospital Compare before hospitals can select other investment options. Can you please define “fully implemented” as it relates to HCAHPS and ICD-10?

A: A hospital can consider HCAHPS fully implemented if they have reported for at least one quarter during the SHIP budget period. A hospital can consider ICD-10 fully implemented if ICD-10 has been implemented and is currently in use by staff.

Q: On the FY17 SHIP Purchasing Menu, under Accountable Care Organization or Shared Savings Investment Activities, letter F reads “Mobile health equipment installation/use.” Would the actual purchase of mobile health equipment be an acceptable investment?

A: Yes, the purchase of mobile health equipment would be an acceptable investment.

Q: What if the mobile health equipment is to be used in a hospital-owned EMS service?

A: No, only equipment to be used in the hospital itself would be eligible for SHIP funding.

Q: Can hospitals use SHIP funds to cover travel expenses associated with related education and training activities?

A: No, SHIP funds cannot be used to cover travel expenses.

Q: The Value-Based Purchasing investment category includes HCAHPS data collection and training. Our hospitals are interested in implementing ED CAHPS. Would ED CAHPS activities be an acceptable SHIP investment?

A: Yes, ED CAHPS activities would be acceptable underneath the Value-Based Purchasing investment category.

Q: For FY16, the Payment Bundling/Prospective Payment System investment category included an activity regarding revenue cycle management training or projects. This activity no longer appears on the SHIP Purchasing Menu for FY17. Can we still use SHIP funding for revenue cycle analysis and/or chargemaster review?

A: Yes, revenue cycle analysis/chargemaster review activities would still be acceptable investments under the Payment Bundling/Prospective Payment System investment category.
Q: Would cybersecurity purchases, such as firewalls, security assessments, software installation, etc., be an acceptable investment under SHIP?

A: In general, these cybersecurity purchases are not eligible activities under the investment categories of SHIP. Please contact your FORHP Project Officer if you’d like to discuss specific circumstances.

Program Administration

Q: Does SHIP have to be administered by a State Office of Rural Health (SORH), or can it go through another state partner or entity?

A: The SORH must be the grantee of record for each state’s participation in SHIP. However, the SORH may choose to have another entity perform administrative duties on behalf of the program, for instance, through a subcontract agreement. The SORH would categorize these subcontractor costs as indirect charges within the SHIP budget.

Q: Will there be an administrative supplement again this year?

A: We do not anticipate a SHIP administrative supplement for FY17, so please base your FY17 budget on $9,000 per hospital.