Hospital Transformation Performance Program (HTPP)

Baseline Submission, EDIE Webinar, and Reporting Platform

November 18, 2014
• Please be sure to enter your AUDIO PIN

• This webcast will be recorded.
Presenters

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Elyssa Tran, Associate VP of Government Services
Diane Waldo, Associate VP of Quality and Clinical Services

**Collective Medical Technologies, Inc:**
Kaitlin Ostler, Client Relations Manager
Agenda

1. Baseline Submission Guidance
2. EDIE tracking
3. OAHHS/Apprise Reporting Platform
Baseline Submission Options: Rationale

Because HTPP launched in middle of the baseline year (Year 1):

• Some hospitals may not have been tracking all measures for the entirety of the baseline year

• Some may not have been tracking with adherence to HTPP measure specifications

Therefore, OHA is providing reporting options for some of the measures, including the submission of partial year data or sampling **if a full year of baseline data adhering to HTPP specifications is unavailable.**

A guidance document with more detail on the reporting options included in this webinar is available on OHA’s HTPP website: [http://www.oregon.gov/oha/Pages/Hospital-Baseline-Data.aspx](http://www.oregon.gov/oha/Pages/Hospital-Baseline-Data.aspx)
Baseline Submission Options: Caveats (1)

• The reporting options detailed here are measure-specific: Not all measures allow for the submission of partial year or sampled data.

• This guidance only relates to submissions that will count towards the Year 1 (baseline) payments.

• These reporting options will not apply to submissions towards Year 2 (performance year) payments.
Baseline Submission Options: Caveats (2)

• Hospitals that don’t report baseline data can still participate in the program in Year 2.

• However, as OHA won’t be able to calculate an improvement target, such hospitals would need to meet the benchmark in order to receive a payment in Year 2.

It is therefore in the interest of the hospital to submit baseline data: (1) To receive payment for the baseline submission; and, (2) to have a greater chance at achieving the measures and qualifying for payment in Year 2.
## Baseline Reporting Requirements by Measure

<table>
<thead>
<tr>
<th>Measure</th>
<th>Reporting Options</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Follow-up after hospitalization for mental illness</td>
<td>Full-year of data adhering to HTPP measure specifications <strong>required</strong></td>
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<tr>
<td>• Readmissions</td>
<td></td>
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<tr>
<td>• HCAHPS – explain medications</td>
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<tr>
<td>• HCAHPS – discharge instructions</td>
<td></td>
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<tr>
<td>• Screening, brief intervention, &amp; referral to treatment (SBIRT)</td>
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<tr>
<td>• Hypoglycemia with insulin</td>
<td>Tiered options (later slides)</td>
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<tr>
<td>• Anticoagulation with Warfarin</td>
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<td>• ADEs with opioids</td>
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<td>• CLABSI</td>
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<td>• CAUTI</td>
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<tr>
<td>• EDIE</td>
<td></td>
</tr>
</tbody>
</table>
Sequence of Reporting Options (1)

• For measures other than follow-up after hospitalization for mental illness, readmissions, and the HCAHPS measures, OHA is providing a sequence of reporting options.

• These options are based on data availability, not on the hospital’s preference.

• E.g., Option 1 must be chosen if data are available; likewise, a hospital must choose option 2 instead of option 3 if data are available.
Sequence of Reporting Options (2)

• **Option 1:** Submit full baseline year data adhering to HTPP measure specifications

• **Option 2:** Submit partial baseline year data adhering to HTPP measure specifications (must cover at least 30 consecutive days)
  – If partial year data NOT in EHR or easily extractable, hospital may sample

• **Option 3:** Use data from first quarter of performance year
Sequence of Reporting Options (3)

Does hospital have the full baseline year data adhering to HTPP measure specifications?

Yes

Option 1: Submit all data for baseline

No

Does the hospital have partial baseline year data adhering to HTPP measure specifications for at least 30 consecutive days in the baseline period?

Yes

Is the hospital's partial year data for the baseline period in EHR or easily extractable by chart review or another method?

Yes

Option 3: Hospital may submit data from the first quarter of the performance year as baseline submission (October 1, 2014 – December 31, 2014).

No

Option 2a: Submit all data for baseline year from point hospital began tracking with adherence to HTPP specifications (must be a minimum of 30 consecutive days).

No

Option 2b: Hospital may submit a sample at 95% confidence level with 10% margin of error.
Tiered Reporting Option Details (1)

**Option 1: Submit full baseline year data adhering to HTPP measure specifications**

- This is **required** for both HCAHPS measures, the readmissions measure, and the follow-up after hospitalization for mental illness measure (calculated by OHA).

- For the other measures, this option must be chosen if the hospital has data available for the entire baseline year (Year 1).
Tiered Reporting Option Details (2)

Option 2: Submit partial baseline year data adhering to HTPP measure specifications (must cover at least 30 consecutive days)

- **Option 2a**: If partial year data for the baseline period are in the EHR or easily extractable via chart review, etc., must submit all data for the partial year period.

- **Option 2b**: If partial year data for the baseline period are NOT in the EHR or easily extractable via chart review, etc., may submit randomized, representative sample.

- Only if hospital doesn’t have 30 consecutive days of data from baseline period adhering to HTPP specifications.
- OAHHS reporting platform will include a place for hospitals to indicate they must use this option.
- Hospital will receive credit for submitting data for the baseline year so long as at least 30 consecutive days of data from Q1 of the performance year are entered into the OAHHS reporting platform by Jan. 16, 2015.
Reporting Processes and Mechanisms

• Hospitals are responsible for tracking the majority of HTPP measures.

• Except for the follow-up after hospitalization for mental illness measure, OAHHS will collect these data from hospitals (mostly via its reporting platform) and officially submit baseline data to OHA.
Review Process

• After baseline data are submitted in February 2015, OHA will review the data and calculate official baseline rates,

• OHA will also review the supplemental information provided by any hospitals unable to provide a full year of baseline data.

• As needed, OHA will contact hospitals directly or through OAHHS with additional questions about data submitted as part of the program.
EDIE: Entering Data for Hospital Contact with Primary Care after ED Visits
EDIE
Notifying a Care Provider
Sending a Customized Letter

A facility can send their own customized letters to a patient’s care provider.
Select The Fax Icon under the Patient View Screen
November 12, 2014

Dear JEFFREY L. NELSON, MD,

Ford Medical Center has undertaken an initiative called the Emergency Department Consistent Care Program (EDCCP) to identify individuals who over-utilize the ED, develop a plan of care for these individuals while they are in the ED, and to redirect their care to a more appropriate setting. The goals of the program are to:

1. Reduce inappropriate use of the ED,
2. Improve the health status of participating clients, and
3. Increase the capacity and integration of safety net services.

We believe the Emergency Department Consistent Care Program can achieve its goals with the thoughtful participation of the medical community, particularly with Primary Care Providers. You have received this letter because you have been identified as the PCP of a patient who continues to use the ED for conditions better addressed elsewhere. Ford Medical Center’s ED Consistent Care Committee would welcome your participation in a coordinated plan of care for this patient.

If you have a medication contract on file with this patient or you wish to speak with us to make additions to the Care Guidelines we have established for this patient, please contact Jodie Perry, RN DNS Acute Care at 509-725-7101 ext. 189.

Sincerely,

[Signature]

Emergency Department Director
Ford Medical Center

Send
A Record and Copy of the Letter is Available Under the Notifications Tab

Recent Notifications

<table>
<thead>
<tr>
<th>Recipient</th>
<th>Facility</th>
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<td>Ford Medical Center</td>
<td>Curly, Donald</td>
<td></td>
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<td>11/12/2014 04:02 PM PST</td>
<td>Queued - View</td>
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Auto-Notify a Care Provider

After selecting this feature for a patient, EDIE will automatically notify the care provider each time the patient presents to the ED.
Click on the Pencil Icon for the PCP and Select the Notification Method
Correspondence Section

A facility can document a facility's correspondence to the PCP in the Patient Correspondence section. A facility can also send this data automatically to CMT if they do not want to manually input the data.
The Patient Correspondence Section is Found on the Patient View Screen
Correspondence Section

A facility can document a facility’s correspondence to the PCP in the Patient Correspondence section. A facility can also send this data automatically to CMT if they do not want to manually input the data.
Called Dr. Brown's office and notified them of their patient's visit in the ED today. There is a follow up scheduled for tomorrow.
Questions? Please contact: support@collectivemedical.com
OAHHS/Appprise Reporting Platform
Login

Please enter your username and password. If you don't know your username or password, please contact an administrator at http://apprisehealthinsights.com.

Forgot your password? Click here...

Username
Password

Sign In

New User Registration

Facility: -- Select your facility --
First Name:
Last Name:
Email:
Password:
Confirm Password:

Register
You have completed all of the profile sections. Click the 'Enter Data' button to start submitting your data.

Enter Data

Alcohol and drug misuse, screening, brief intervention and referral for treatment (SBIRT) in the ED: Complete

Contact Information
Data Submitter Name: Jon
Name of Hospital/organization's lead for HTPP Reporting: Jane

Required Information for Measure:
Baseline Year Data (October 1, 2013 - September 30, 2014)

Baseline year data reporting requirement - sequence of options:

Please note that this requirement is a sequence of options - based on data availability, not based on your hospital's preference. For example, if you have data available, you must choose option 1 instead of option 2 or 3. Likewise, you must choose option 2 instead of option 3 if you have partial baseline data available.

1. My hospital has the full baseline year data adhering to HTPP measure specification.
2. My hospital has partial baseline year data adhering to the HTPP measure covering at least 30 consecutive days in the baseline period.
3. My hospital does not have at least 30 days of data available for the baseline period and will need to use data from the first quarter of the performance period to calculate a baseline.

Questions for Option 1: Full baseline year data
Contact Information

Data Submitter Name: Jon
Name of Hospital/organization’s lead for HTPP Reporting: Jane

Required Information for Measure:

Baseline Year Data (October 1, 2013 - September 30, 2014)

Baseline year data reporting requirement - sequence of options:

Please note that this requirement is a sequence of options - based on data availability, not based on your hospital’s preference. For example, if you have data available, you must choose option 1 instead of option 2 or 3. Likewise, you must choose option 2 instead of option 3 if you have partial baseline data available.

- 1. My hospital has the full baseline year data adhering to HTPP measure specification.
- 2. My hospital has partial baseline year data adhering to the HTPP measure covering at least 30 consecutive days in the baseline period.
- 3. My hospital does not have at least 30 days of data available for the baseline period and will need to use data from the first quarter of the performance period to calculate a baseline.

Questions for Option 1: Full baseline year data

What is the method used to obtain the data (EHR query, manual chart abstraction, etc.)? EHR query
What is the source of the data? EHR

Confirmation: My hospital has documentation for the data being submitted. The documentation is available upon request by OAHHS or the OHA for review.

Performance Year Data (October 1, 2014 - September 30, 2015)

What is the method used to obtain the data (EHR query, manual chart abstraction, etc.)? EHR query
What is the source of the data? EHR

Confirmation: My hospital has documentation for the data being submitted. The documentation is available upon request by OAHHS or the OHA for review.

Submit
Data Submitter Name: Jon
Name of Hospital/organization’s lead for HTPP Reporting: Jane

Required Information for Measure:
**Baseline Year Data (October 1, 2013 - September 30, 2014)**

Baseline year data reporting requirement - sequence of options:
Please note that this requirement is a sequence of options - based on data availability, not based on your hospital’s preference. For example, if you have data available, you must choose option 1 instead of option 2 or 3. Likewise, you must choose option 2 instead of option 3 if you have partial baseline data available.

- 1. My hospital has the full baseline year data adhering to HTPP measure specification.
- 2. My hospital has partial baseline year data adhering to the HTPP measure covering at least 30 consecutive days in the baseline period.
- 3. My hospital does not have at least 30 days of data available for the baseline period and will need to use data from the first quarter of the performance period to calculate a baseline.

Questions for Option 2: Partial baseline year data

Please explain why only a partial year of data is available.

What is the time period within the baseline year that data is available?
From (Month, day, year): ________ To (Month, day, year): ________

- My hospital’s partial year data for the baseline period is in an EHR or easily extractable via chart review or another method.
- My hospital’s partial year data for the baseline period is **not** in an EHR or easily extractable via chart review or another method.

**Performance Year Data (October 1, 2014 - September 30, 2015)**

What is the method used to obtain the data (EHR query, manual chart abstraction, etc.)?  
**EHR query**

What is the source of the data?
**EHR**

**Confirmation:** My hospital has documentation for the data being submitted. The documentation is available upon request by OAHHS or the OHA for review.

Submit
Required Information for Measure:

Baseline Year Data (October 1, 2013 - September 30, 2014)

Baseline year data reporting requirement - sequence of options:

- 1. My hospital has the full baseline year data adhering to HTPP measure specification.
- 2. My hospital has partial baseline year data adhering to the HTPP measure covering at least 30 consecutive days in the baseline period.
- 3. My hospital does not have at least 30 days of data available for the baseline period and will need to use data from the first quarter of the performance period to calculate a baseline.

Questions for Option 3: Data from the first quarter of the performance year (October 1, 2014 - September 30, 2015)

- Confirmation: My hospital does not have a minimum of 30 consecutive days of data from the baseline period which adhere to the HTPP measure specifications. We will need to use data from the first quarter of the performance year. Please explain why no data is available for the baseline period.

Data for the first quarter of the performance year (October 1, 2014 - December 31, 2014) will be submitted by January 15, 2015. Note that all available data from this time period must be submitted for the performance year.

- What is the method used to obtain the data (EHR query, manual chart abstraction, etc.)? 
- What is the source of the data?

- Confirmation: My hospital has documentation for the data being submitted. The documentation is available upon request by OAHHS or the OHA for review.

Performance Year Data (October 1, 2014 - September 30, 2015)

- What is the method used to obtain the data (EHR query, manual chart abstraction, etc.)? 
- What is the source of the data?

- Confirmation: My hospital has documentation for the data being submitted. The documentation is available upon request by OAHHS or the OHA for review.

Submit
Open Month Management

Oct, 2013

Enter your data

Monthly data entry has been completed.

Nov, 2013

Enter your data

Monthly data entry has been completed.

Dec, 2013

Enter your data
**WARNING:** Changes to data for this previously completed month will be permanent

### Catheter-Associated Urinary Tract Infection

<table>
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<tr>
<th>Numerator</th>
<th>Denominator</th>
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</thead>
<tbody>
<tr>
<td>Total number of healthcare-associated CAUTIs in all tracked units (adult ICU, pediatric ICU, and adult, pediatric, medical, surgical, and medical/surgical combined wards).</td>
<td>Total number of catheter days for all patients that have an indwelling urinary catheter in all tracked units (adult ICU, pediatric ICU, and adult, pediatric, medical, surgical, and medical/surgical combined wards).</td>
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<td><strong>12</strong></td>
<td><strong>23</strong></td>
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**Intervention This Month?** (Optional)

Yes

**Number From Last Month**

### Central Line Associated Blood Stream Infection

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<td>Total number of CLABSI in all tracked units (adult ICU, pediatric ICU, NICU, and adult, pediatric, medical, surgical, and medical/surgical combined wards).</td>
<td>Total number of central line days in all tracked units (adult ICU, pediatric ICU, NICU, and adult, pediatric, medical, surgical, and medical/surgical combined wards).</td>
</tr>
<tr>
<td><strong>11</strong></td>
<td><strong>12</strong></td>
</tr>
</tbody>
</table>

**Intervention This Month?** (Optional)

**Number From Last Month**

### Emergency Department Alcohol, Drug and Misuse Screening (SBIRT)

**Number From Last Month**
Medication Management - Insulin

Hypoglycemia in Inpatients Receiving Insulin

- Hospital
- State Avg
- Hospital Median

<table>
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<tr>
<th>Percent</th>
<th>Oct '13</th>
<th>Nov '13</th>
<th>Dec '13</th>
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<tr>
<td>Hospital</td>
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<td>37.13</td>
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<td></td>
<td>321</td>
<td>342</td>
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</table>
Reporting Platform Users

- Please send the name(s) of up to 2 people from your hospital to htp@apprisehealthinsights.com so we can preload them into the system with log-ins and passwords when the system is live.
- Once live, hospitals can add/request for additional log-ins under new user registration.
Questions?

Elyssa Tran, Apprise, elyssa.tran@apprisehealthinsights.com
(payment questions and reporting to Apprise/OAHHS)

Diane Waldo, OAHHS, diane.waldo@oahhs.org
(measure specification questions)

Sara Kleinschmit, OHA, sara.kleinschmit@state.or.us