

# *Colorado Delivery System Reform Incentive Payments (DSRIP)*

Hospital Transformation Program

Matt Haynes

2016



**COLORADO**

Department of Health Care  
Policy & Financing

# *Our Mission*

**Improving** health care access and outcomes for the **people** we serve while demonstrating sound stewardship of financial **resources**



**COLORADO**

Department of Health Care  
Policy & Financing

# *Colorado Framework*

- **Policy Focus Areas**
  - **Care Coordination and Care Transition Management**
  - **Integration of Physical and Behavioral Health**
  - **Chronic Condition Management and Targeted Population Health**



# *Colorado Framework*

- **Domains**

1. **Building Infrastructure for Delivery System Reform**
2. **Care Transformation and Delivery system Integration**
3. **Data-Driven Accountability and Outcome Measurement**



**COLORADO**

Department of Health Care  
Policy & Financing

# Draft Waiver Timeline

<u>Phase I</u>	<u>Phase II</u>	<u>Phase III</u>
<ul style="list-style-type: none"> <li>• DSRIP program concept paper released for public comment</li> <li>• Program design work continues in consultation with workgroups</li> <li>• Federal s. 1115 waiver application drafting begins</li> </ul> <p>Target timeline: Fall 2016</p>	<ul style="list-style-type: none"> <li>• When draft waiver application is ready, HCPF provides for statewide public comment period and stakeholder input on draft waiver application, including public meetings, workgroup briefings, and other outreach</li> <li>• Waiver application is then revised as appropriate following consideration of public comments and stakeholder input</li> <li>• When final waiver application is ready, HCPF submits it to CMS</li> <li>• Continued stakeholder input on program implementation documents</li> </ul> <p>Target timeline: Winter 2017</p>	<ul style="list-style-type: none"> <li>• Separate federal public comment period starts after waiver application is submitted to CMS</li> <li>• Following federal public comment period, CMS begins review of waiver application with HCPF/CMS negotiations on demonstration, budget neutrality, and special terms and conditions (STCs)</li> <li>• HCPF keeps stakeholders apprised on status of CMS negotiations, which will take at least several months</li> <li>• In consultation with workgroups, HCPF readies implementation documents for CMS review as needed once waiver and STCs are approved</li> </ul> <p>Target timeline: Spring - Summer 2017</p>



# DSRIP Project Development and Selection Process

The Department intends to continue developing and soliciting DSRIP project ideas from various stakeholders including a formal solicitation. Following the collection process and an effort to reduce and categorize all proposed projects, a public comment period will be held prior to the finalization of the project menu.

- 1 External gathering of project ideas across stakeholders\*
- 2 Formal request for project ideas:
  - Department will send out project request form, asking for detailed project proposals
- 3 Consolidation of project ideas across major priority areas (process detailed on following slide)
- 4 Public comment period on proposed projects and categorization
- 5 Proposed consolidated project menu released

---

#### \*Current Project Menu Data Sources:

---

- HCPF CO Hospital CHNA Analysis
- CHA Hospital Survey
- External Workgroups: Rural and Urban Hospitals
- Responses to RFP for hospitals' project ideas
- Other Colorado healthcare redesign programs
- Other external sources



# ***DSRIP Project Development and Selection Process (con't)***

Following the collection of submitted project ideas, the Department will narrow total selections based on a number of critical criteria designed to ensure the success of the DSRIP effort

## **Questions that will be used to drive the final selection process:**

---

- Is this idea clear and feasible?
- Does it support Medicaid delivery system transformation goals?
- Is the idea focused on the Medicaid population and is it an allowable use of Medicaid funds?
- Is the idea based on evidence or promising research?
- Does the project align with the goals of ongoing efforts (ACC, COP, SIM)
- Does it address significant need and improve health outcomes, or reduce avoidable expenditures?
- Is there a potential for return on investment?
- Does this project idea have the potential to be sustainable at the end of the waiver demonstration?
- Is there evidence that this project promotes community collaboration?

## **Additional conditions that will result in a project being removed from consideration:**

---

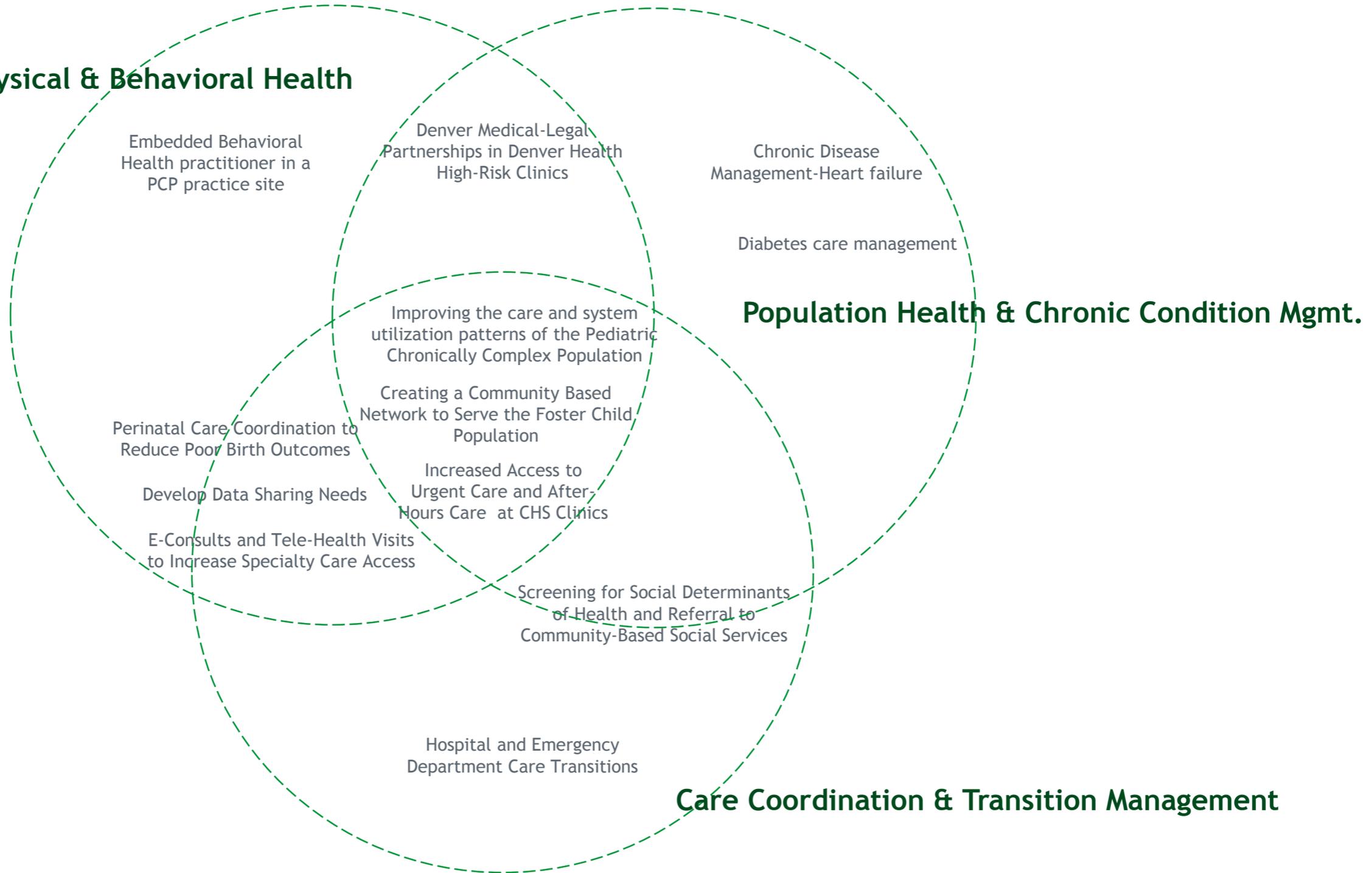
- Does the project propose duplicative services already funded under the Medicaid state plan.
- Does the project propose activities that do not support predominantly Medicaid eligible populations.
- Is the project already significantly implemented among hospitals in the state



# Collected Project Ideas

An initial sampling of project ideas that have been submitted to the state by hospitals and other stakeholders

## Integration of Physical & Behavioral Health



# *Waiver Application Process*

- **Description of Colorado Hospital Transformation Program**
- **Delivery System Reform and Delivery System Reform Incentive Payments**
- **Implementation of Demonstration**
- **Demonstration Financing and Budget Neutrality**
- **Proposed Waivers and Expenditure Authorities**
- **Demonstration Hypotheses and Evaluation**
- **Public Comment and Stakeholder Consultation**



**COLORADO**

Department of Health Care  
Policy & Financing

# *Questions and Discussion*



# *HQIP Report to OAB*

October 25, 2016

**Matt Haynes**  
Special Finance Projects Manager



**COLORADO**

Department of Health Care  
Policy & Financing

# *Discussion Topics*

- 2016 HCAHPS Scoring
- Proposed Changes for 2017
- Advisory Council



# 2016 HCAHPS Scoring

- Scoring buckets as presented at the 8-23-2016 OAB meeting were based on quartiles
- This methodology resulted in more relaxed standards than the prior year for the top scoring bucket
- The OAB moved to use the same scoring buckets as the prior year



# 2016 HCAHPS Scoring

**As presented to the Hospital Provider Fee OAB on 8-23-2016**

2016

Quartile	4 <sup>th</sup>	3 <sup>rd</sup>	2 <sup>nd</sup>	1 <sup>st</sup>	Total
Percentage Range	79% to 100%	76% to 78%	71% to 75%	0% to 70%	
Points Awarded	10	7	3	0	
# of Hospitals Reporting	15	14	17	19	65

**Per 8-23-2016 OAB Action - Same bucket ranges as the prior year**

2016

Bucket	1	2	3	4	Total
Percentage Range	80% to 100%	75% to 79%	71% to 74%	0% to 70%	
Points Awarded	10	7	3	0	
# of Hospitals Reporting	15	23	8	19	65



# 2016 HCAHPS Scoring

- This change did not impact the number of hospitals in the top scoring bucket
- The change did result in more relaxed standards than the prior year for the second highest scoring bucket such that nine hospitals moved from the 3-point bucket to the 7-point bucket
- The Department did not believe it was the intention of the OAB to relax the scoring standards for any bucket



**COLORADO**

Department of Health Care  
Policy & Financing

# 2016 HCAHPS Scoring

## Proposed 2016 HCAHPS Scoring

2016

Bucket	1	2	3	4	Total
Percentage Range	80% to 100%	76% to 79%	71% to 75%	0 to 70%	
Points Awarded	10	7	3	0	
# of Hospitals Reporting	15	14	17	19	65



# *Proposed Changes for 2017*

- Same eight measure used in 2016
- No longer a distinction between Base and Optional/Supplemental measures - hospitals will be requested to complete the survey for all measures
- Hospitals will be scored on the first five measures (in order) for which they are eligible, for a maximum possible score of 50 points



**COLORADO**

Department of Health Care  
Policy & Financing

# *Proposed Changes for 2017*

- The proposed order of the measures is as follows:

Measure	2017 Order	2016 Order
Culture of Safety	1	5
Active Participation in RCCOs	2	6
Cesarean Section	3	2
HCAHPS	4	4
30-Day All Cause Readmissions	5	3
Emergency Department Process	6	1
Advance Care Planning	7	7
Tobacco Screening and Follow-up	8	8

# *Proposed Changes for 2017*

- All hospitals will be considered eligible (and will receive a score) for:
  - Culture of Safety
  - Active Participation in RCCOs



**COLORADO**

Department of Health Care  
Policy & Financing

# *Proposed Changes for 2017*

## **Culture of Safety**

- Points will no longer be awarded for planning a Patient Family Advisory Council (PFAC) - points will only be awarded for active PFACs
- Adverse Event Reporting will be added to the list of activities
- Hospitals must be active in at least four of the five activities to receive a score (previously three of four)



**COLORADO**

Department of Health Care  
Policy & Financing

# *Proposed Changes for 2017*

## **Active Participation in RCCOs**

- “Mandatory” measure for 2017
- Criteria added for notification of the RCCO of ED visits within 24 hours of visit (previously part of the ED Process measure)
- Both inpatient admission and ED visit notifications will require chief complaint/reason for visit



# *Proposed Changes for 2017*

## Cesarean Section

- Add criteria to describe the process of notifying physicians of their respective c-section rates and how they compare to other physicians' rates and the hospital average

# *Proposed Changes for 2017*

## HCAHPS

- No changes proposed

## 30-Day All Cause Readmissions

- No changes proposed



# *Proposed Changes for 2017*

## **Emergency Department Process**

- Remove criteria to notify the RCCO of ED visits within 24 hours of visit (include in the Active Participation in RCCOs measure for 2017)
- Submit copies of written policies or guidelines for the opioid related attestations



# *Proposed Changes for 2017*

## **Advance Care Planning**

- No changes proposed

## **Tobacco Screening and Follow-up**

- Data for TOB-01 and TOB-03 will still be required
- Only TOB-03 will be scored



**COLORADO**

Department of Health Care  
Policy & Financing

# *Questions or Concerns?*



# *Contact Information*

**Matt Haynes**  
Special Finance Projects Manager  
[Matt.Haynes@state.co.us](mailto:Matt.Haynes@state.co.us)



*Thank You!*



**COLORADO**

Department of Health Care  
Policy & Financing