





SHIP Quarterly Webinar
March 14, 2023
Noon – 1 p.m.

HEALTHWORKS
KANSAS HOSPITAL ASSOCIATION



COVID-19 SHIP
Testing and Mitigation

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COVID-19 SHIP Testing and Mitigation Overview

- Funds hospitals are eligible to receive
 - **\$257,366.55**
- Grant period
 - **July 1, 2021 to Dec. 31, 2022**
- Dates funds must be spent on qualifying **purchases**
 - **Jan. 1, 2021 to Dec. 31, 2022**
Final Report due January 15, 2023

SHIP 2022 – 2023

2022–2023 SHIP Overview

- FY 22 grant period
 - **June 1, 2022 to May 31, 2023**
- Funds hospitals will receive **\$11,388.01**
- Funds must be spent on qualifying purchases during grant period
 - See [Purchasing Menu](https://krhop.net/ship) at <https://krhop.net/ship>

2022-2023 Funding Priorities

The Federal Office of Rural Health Policy has identified the following two priorities for using SHIP funds:

- ICD-10 Implementation
- HCAHPS

Once these priorities have been met, your hospital may select other activities listed on the SHIP Purchasing Menu

SHIP Purchasing Menu

- Quality reporting data collection/related training or software
- HCAHPS data collection process/related training
- Provider based clinic-based (Rural Health Clinic) quality measures education
- Alternative payment model and quality payment program training/education
- Computerized provider order entry implementation and/or training
- Pharmacy services training, hardware/software, and machines
- Population health or disease registry training and/or software/hardware
- Social determinants of health screening software/training
- Systems performance training in support of ACO or shared savings related initiatives
- Telehealth and mobile health hardware and/software
- Community paramedicine training and hardware/software
- Health information technology training for value and ACOs
- ICD-10 software/training
- S-10 Cost Reporting training
- Pricing transparency training (chargemaster training)
- Efficiency or quality improvement training/project (patient experience of care, patient safety, reducing readmissions/infections, antibiotic stewardship, discharge planning, emergency preparedness, Lean, IHI Plan/Do/Study/Act, root cause analysis, Team STEPPS, care coordination, CMS abstraction and reporting tool, health information exchange, swing bed utilization, population health, social determinants of health, non-clinical operations, financial and operational improvements, 340B training)

SHIP – Unallowable Expenses

- White boards for patient communication
- Pharmacist services
 - Training, hardware/software and machines allowed
- Telemedicine services
 - Training, hardware/software allowed
- ICD-10 code books if stand alone purchase
- Price Transparency Software – one year only

2022-2023 SHIP Milestones

Milestone 1:

- Submission and approval of mid-year expense and activity report
- Due **January 2, 2023**
- Payment Amount **\$2,194.01**

Milestone 2:

- Submission and approval of end-of-year SHIP expense and activity report
- Due **June 30, 2023**
- Payment Amount **\$2,194.00**

Milestone 3:

- Data submission requirements met for Q4/2021 through Q3/2022
- Maximum Amount Available **\$7,000.00**

Grant Period: June 1, 2022 to May 31, 2023

Total Award: \$11,388.01



MBQIP



MBQIP's Tie to SHIP

Kansas CAHs must actively participate in the Medicare Beneficiary Quality Improvement Project [MBQIP] to qualify for full funding.



FORHP

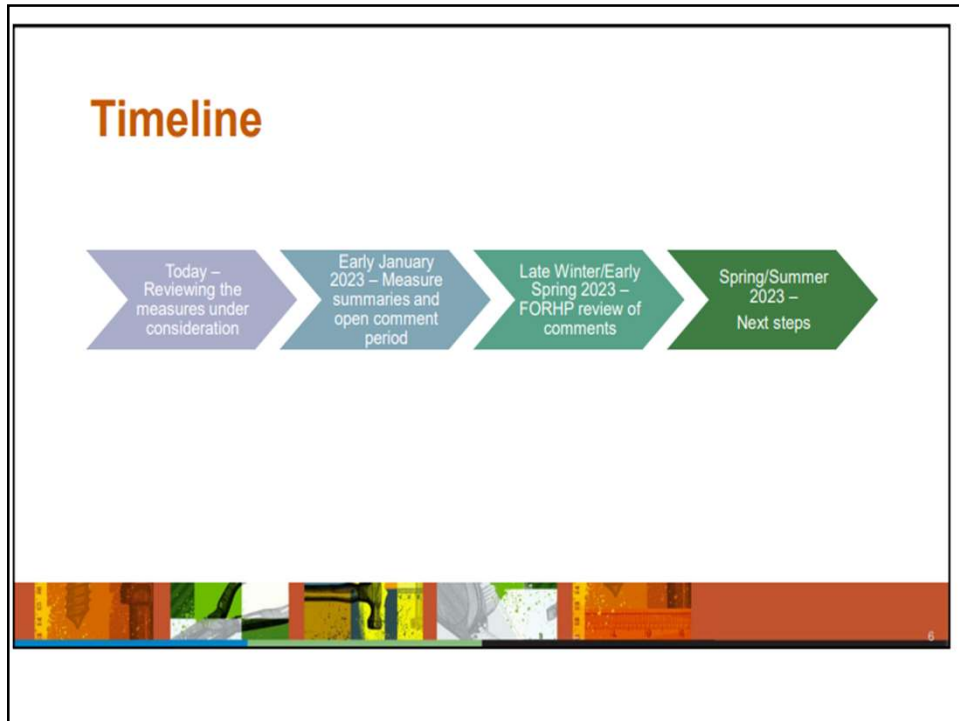
MBQIP Measures Under Consideration

Measures Under Consideration

Total of 10 measures:

- Health Equity
- Social Drivers of Health screenings (2 measures)
- Hybrid Hospital-Wide All Cause Readmissions
- eCQMs (4 measures)
- Antimicrobial Use and Resistance (AUR)
- Sepsis

**Thank YOU – terrific
response to our call
for input!**



Upcoming Reporting Submission Deadlines



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**Medicare Beneficiary Quality Improvement Project (MBQIP)
Hospital Data Submission Deadlines
Reporting Quarters Applicable to SHIP 2022-2023 Grants**

Measure ID	Measure Name	Reported To	Submission Deadline by Encounter Period			
			Q4 / 2021 Oct 1 - Dec 31	Q1 / 2022 Jan 1 - Mar 31	Q2 / 2022 Apr 1 - Jun 30	Q3 / 2022 Jul 1 - Sep 30
Population & Sampling	Population & Sampling Submission (inpatient and outpatient)	QualityNet via Secure Log In	May 2, 2022	August 1, 2022	November 1, 2022	February 1, 2023
OP-2	Fibrinolytic therapy received within 30 minutes	QualityNet via Outpatient CART/Vendor	May 2, 2022	August 1, 2022	November 1, 2022	February 1, 2023
OP-3	Median time to transfer to another facility for acute coronary intervention	QualityNet via Outpatient CART/Vendor	May 2, 2022	August 1, 2022	November 1, 2022	February 1, 2023
OP-18	Median time from ED Arrival to ED Departure for Discharged ED Patients	QualityNet via Outpatient CART/Vendor	May 2, 2022	August 1, 2022	November 1, 2022	February 1, 2023
OP-22	Patient left without being seen	QualityNet via Secure Log In	May 16, 2022 (Aggregate based on full calendar year 2021)			
HCP/IMM-3	Influenza vaccination coverage among health care personnel	National Healthcare Safety Network	May 16, 2022 (Aggregate based on Q4 2021/Q1 2022)			
EDTC	Emergency Department Transfer Communication	QHI	Submit each month by the end of the following month			
HCAHPS	Hospital Consumer Assessments of Healthcare Providers and Systems	QualityNet via Vendor	April 6, 2022	July 6, 2022	October 5, 2022	January 4, 2023
Antibiotic Stewardship	CDC NHSN Annual Facility Survey	National Healthcare Safety Network	March 1, 2023 (Survey year 2022)			

* Based on currently available information. Submission dates are subject to change.
* Data submission deadlines on a federal holiday or weekend (Saturday or Sunday) will default to the first business day thereafter and are reflected in this document where applicable.

*Please note: CMS is considering adding the COVID-19 Vaccination Among Health Care Personnel (HCP) to MBQIP requirements. We will share more information as it becomes available.

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2023-2024
Under
Construction

Population and Sampling Deadlines

4Q22 Submissions due May 1, 2023

OP Measures

- ED Throughput (OP-18)
- AMI (if needed)

OP Reporting Deadlines


4Q22 Submissions due May 1, 2023

- OP-2 (Median time to fibrinolysis)
- OP-3 (Median time to transfer for ACI)
- OP-18 (ED arrival time to ED departure time)

OP Reporting Deadlines


4Q22 Submissions due May 1, 2023

- OP-2 (Median time to fibrinolysis)
- OP-3 (Median time to transfer for ACI)
- OP-18 (ED arrival time to ED departure time)



HCP/IMM-3 4Q22/1Q23 NHSN

Deadline: May 15, 2023
Influenza vaccination coverage among
health care personnel




OP-22 2022 Calendar Year QualityNet/HQR

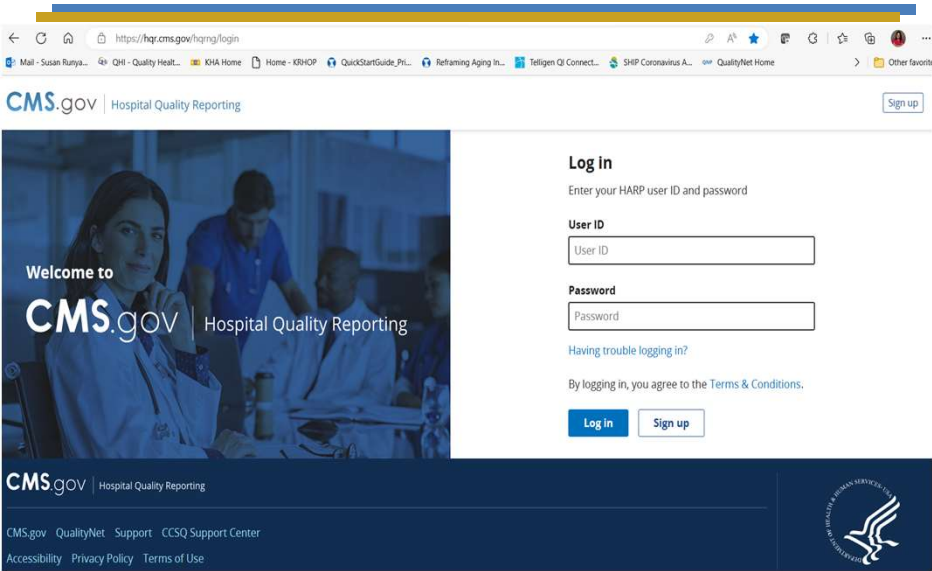
Deadline: May 15, 2022

Patient left without being evaluated
by a qualified medical professional

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HQR – Log In



Browser address bar: <https://hqr.cms.gov/hqmg/login>

CMS.gov | Hospital Quality Reporting Sign up

Welcome to
CMS.gov Hospital Quality Reporting



Log in

Enter your HARP user ID and password

User ID

Password


Having trouble logging in?

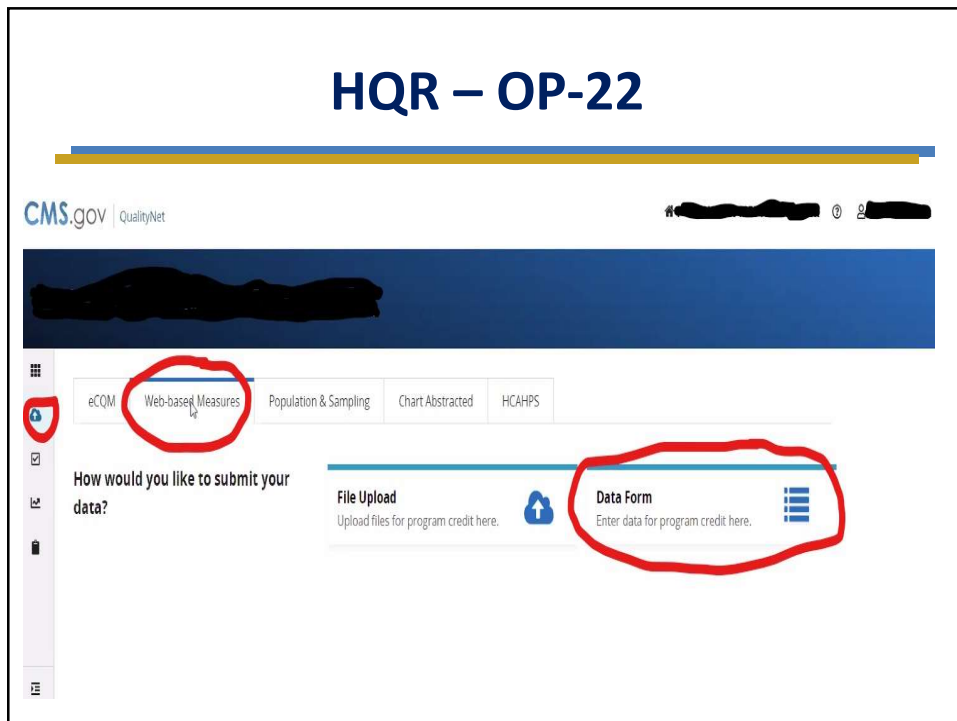
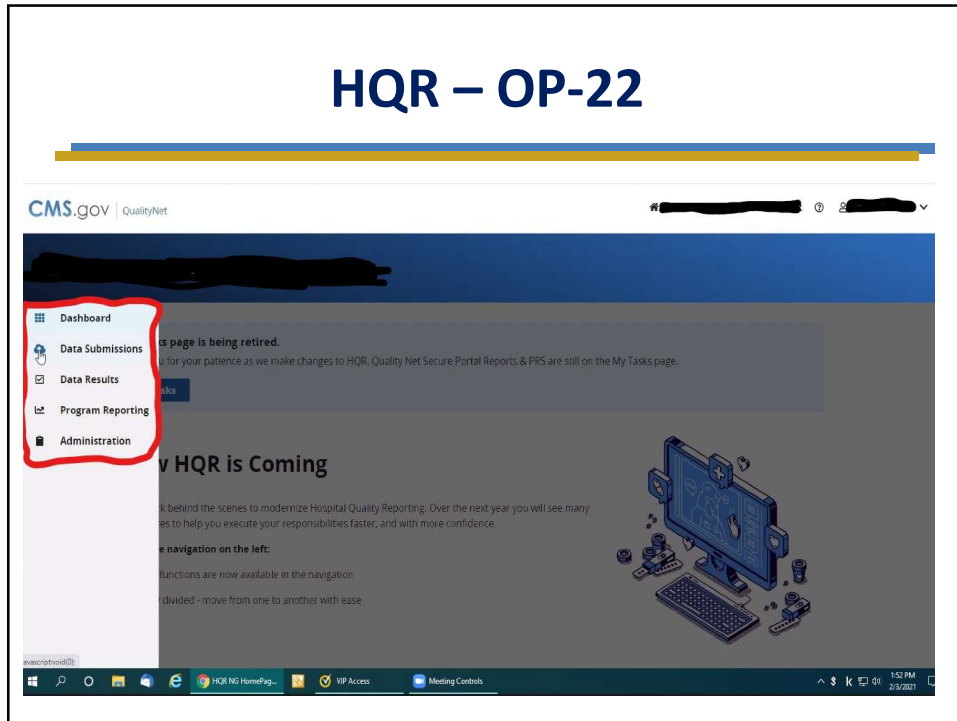
By logging in, you agree to the [Terms & Conditions](#).

CMS.gov | Hospital Quality Reporting

CMS.gov QualityNet Support CCSQ Support Center

[Accessibility](#) [Privacy Policy](#) [Terms of Use](#)





HQR – OP-22

The screenshot shows the CMS.gov QualityNet interface. At the top, there is a navigation bar with the CMS.gov logo and a user profile dropdown. Below this is a dark blue header. The main content area features a navigation menu with tabs for 'eCQM', 'Web-based Measures', 'Population & Sampling', 'Chart Abstracted', and 'HCAHPS'. The 'Web-based Measures' tab is selected and circled in red. Below the navigation menu, there are two buttons: 'File Upload' and 'Data Form', with the 'Data Form' button circled in red. A message states: 'You have selected Data Form submission. You can choose a different method at any time.' Below this, a section titled 'Select the Data Form' contains three buttons: 'IQR', 'OQR', and 'PI', each with a 'Launch Data Form' link. The 'OQR' button is circled in red.

HQR – OP-22

The screenshot shows the CMS.gov QualityNet interface for Outpatient Quality Reporting (OQR). The page title is 'Outpatient Quality Reporting (OQR)'. A note states: 'NOTE: Proceeding with data submission will change a Provider's status to Participating if currently Participating or Withdrawn.' Below this, there is a 'Payment Year' dropdown menu set to '2022', which is circled in red. A large red oval highlights the following information: 'Payment Year 2024', 'Submission Period: 1/1/23 – 5/15/23', and 'Reporting Period: 1/1/22 – 12/31/23'. Below this, there is a 'CMS Certification Number' field with a red circle around it, containing a redacted value. The 'Submission Period' is '01/01/2021 - 05/17/2021' and the 'With Respect to Reporting Period' is '01/01/2020 - 12/31/2020'. The 'Current Submission Period' is 'Open'. There are three buttons: 'Enter', 'Preview', and 'Submit', with the 'Submit' button circled in red. At the bottom, there is a 'Start Measure' button and a checkbox for 'Please enter zeros for this measure as I have no data to submit'.

HQR – OP-22

CMS Certification Number: ██████
Submission Period: 01/01/2021 - 05/17/2021
With Respect to Reporting Period: 01/01/2020 - 12/31/2020

Payment Year 2024
Submission Period: 1/1/23 – 5/15/23
Reporting Period: 1/1/22 – 12/31/22

Current Submission Period: Open

Enter Preview Submit

OP-22
Left Without Being Seen [Start Measure](#)

Please enter zeros for this measure as I have no data to submit

OP-29
Appropriate Follow-up Interval for Normal Colonoscopy in Average Risk Patients [Start Measure](#)

Please enter zeros for this measure as I have no data to submit

OP-31
Improvement in Patient's Visual Function within 90 Days Following Cataract Surgery [Start Measure](#)

Please enter zeros for this measure as I have no data to submit

HQR – OP-22

[< Back](#)

OP-22
Left Without Being Seen

Payment Year 2024
Submission Period: 1/1/23 – 5/15/23
Reporting Period: 1/1/22 – 12/31/22

Please enter zeros for this measure as I have no data to submit

Numerator
* What was the total number of patients who left without being evaluated by a physician/APN/PA?

Denominator
* What was the total number of patients who presented to the ED?

CMS Certification Number: ██████
Submission Period: 01/01/2021 - 05/17/2021
With Respect to Reporting Period: 01/01/2020 - 12/31/2020
Last Updated: -

HQR – OP-22

OP-22
Left Without Being Seen

Payment Year 2024
Submission Period: 1/1/23 – 5/15/23
Reporting Period: 1/1/22 – 12/31/22

Please enter zeros for this measure as I have no data to submit

Numerator
* What was the total number of patients who left without being evaluated by a physician/APN/PA?

Denominator
* What was the total number of patients who presented to the ED?

CMS Certification Number:
[REDACTED]

Submission Period:
01/01/2021 - 05/17/2021

With Respect to Reporting Period:
01/01/2020 - 12/31/2020

Last Updated:
2/3/2021 2:49 PM

HQR – OP-22

Current Submission Period: Open

Enter Preview Submit

+ OP-22 [Edit Measure](#)
Complete
Left Without Being Seen

Score for this measure

0%

0

500

Lower score is better

OP-29
Appropriate Follow-up Interval for Normal Colonoscopy in Average Risk Patients
 Please enter zeros for this measure as I have no data to submit.

OP-31
Improvement in Patients's Visual Function within 90 Days Following Cataract Surgery
 Please enter zeros for this measure as I have no data to submit.

HQR OP-22

Web-based Measure submissions have been updated in Hospital Quality Reporting (HQR) System.

- You can now submit Web-based measures for OQR individually. In addition, there is no longer a 'save' button on the Data Form. Once data has been entered for the measure, select **submit** and your updates will be submitted.
- Submission of OQR Web-based measure data to the [HQR System](#) begins January 1, 2023 and closes on May 15, 2023 at 11:59 PT.

EDTC Reporting Deadlines

1Q23 Submissions due May 1, 2023

- January 2023
- February 2023
- March 2023

REMINDER – download 2023 file from QHi

KS Report is due to FORHP by May 10, 2023

IP Reporting Deadlines

NONE



FMT MBQIP Reports

- EDTC
- IP/OP Core Measure
- HCAHPS

sent to data and quality contacts by Susan Pattie end of February

Kansas

State-Level Care Transition Core Measures/EDTC Report Quarter 3 - 2022

Generated on 01/11/23

MBQIP Quality Measure	Your State's Performance by Quarter				State Current Quarter				National Current Quarter		Benchmark
	Q1 2021	Q1 2022	Q2 2022	Q3 2022	Aggregate for All Four Quarters	# CAHs Reporting	Average Current Quarter	90th Percentile	# CAHs Reporting	Average Current Quarter	Average Current Quarter
EDTC-All Composite	83%	84%	84%	81%	83%	82	81%	100%	1,175	90%	100%
Home Medications	91%	93%	92%	92%	92%	82	92%	100%	1,175	94%	100%
Allergies and/or Reactions	95%	96%	95%	94%	95%	82	94%	100%	1,175	96%	100%
Medications Administered in ED	96%	96%	94%	94%	95%	82	94%	100%	1,175	96%	100%
ED Provider Note	90%	91%	91%	89%	90%	82	89%	100%	1,175	95%	100%
Mental Status/Orientation Assessment	94%	95%	93%	92%	93%	82	92%	100%	1,175	96%	100%
Reason for Transfer and/or Plan of Care	96%	96%	96%	94%	96%	82	94%	100%	1,175	97%	100%
Tests and/or Procedures Performed	94%	95%	94%	93%	94%	82	93%	100%	1,175	96%	100%
Tests and/or Procedures Results	92%	94%	93%	92%	93%	82	92%	100%	1,175	96%	100%
Total Medical Records Reviewed (N)	N=1,924	N=1,897	N=2,238	N=2,339	N=8,398	N=2,339			N=49,873		

"N/A" indicates that no CAH data were submitted for this state.

Don't **MISS** KHC Office Hours for HQIC Hospitals

March 22, 2023, | 10:00-11:00a.m.
It's All About the Data

- + Eric Cook-Wiens from KHC, Brenda Olson from the Great Plains Health Alliance and Sally Othmer from the Kansas Hospital Association discuss how the administrative claims data system is created and managed as well as how this dataset can be used to support ongoing quality improvement efforts in your hospital.

KHC Office Hours series registration link:
www.khconline.org/officehours

All hospitals are welcome to register and attend our KHC Office Hours

COMPASS | HOSPITAL QUALITY
 IMPROVEMENT CONTRACTOR

KHC
 Kansas Healthcare
 COLLABORATIVE

2023 Upcoming Webinars

- SHIP Quarterly Webinars
 - June 14
 - September 14
 - December 14
- Quality Corner Calls
 - May 3 – FMT Report Review and Resources
 - August 24 – TBD
 - October 19 – NRHA Awards, Full SHIP Grant Recognition and Most Improved
 - November 21 – TBD

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2023 Upcoming Trainings

- Abstraction Training (Virtual)
 - March 30 from 1130 to 1330
- Employee Health & Safety Cohort
 - Informational Webinar – May 11 at 1000
 - Kick Off – June 21
- Quality 101 & 102
 - June 15 and 16 in Topeka

Site Visits (In-person or Zoom)

MBQIP Reporting Reviews (5/quarter)

- Current requirements to continue receiving the SHIP grant
- Flex Monitoring Team reports reviewed
- Discussion of who reports what elements at your facility
- Clearing up any questions your facility may have about reporting of this data to meet the deadlines

Resources

- www.krhop.net
 - SHIP
 - SHIP 22-23
 - COVID-19 SHIP Testing and Mitigation
 - MBQIP
 - Quality/MBQIP
 - Abstraction
- www.kha-net.org
 - Education
 - Education Brochures
 - Register for Healthworks/KHA Events Online
<https://registration.kha-net.org/>



Contact Us

Jennifer Findley

jfindley@kha-net.org

785.233.7436

Susan Runyan

srunyan@kha-net.org

620.222.8366

Susan Pattie

spattie@kha-net.org

785.276.3119



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