

2023 - 2024 SHIP Overview

- FY 23 grant period
 - June 1, 2023 to May 31, 2024
- Funds hospitals are eligible to receive \$11,938.95
- Funds must be spent on qualifying purchases during grant period

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2023-2024 SHIP Milestones

Milestone 1:

- Submission and approval of mid-year expense and activity report
- Due **December 31, 2023**
- Payment Amount \$2,469.95

Milestone 2:

- Submission and approval of end-of-year SHIP expense and activity report
- Due June 30, 2024
- Payment Amount \$2,469.00

Milestone 3:

- Data submission requirements met for Q4/2022 through Q3/2023
- Maximum Amount Available \$7,000.00

Grant Period: June 1, 2023 to May 31, 2024

Total Award: \$11,938.95

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			Si	ubmission Deadli	ne by Encounter Pe	riod	
Measure ID	Measure Name	Reported To	Q4 / 2022 Oct 1 - Dec 31	Q1 / 2023 Jan 1 - Mar 31	Q2 / 2023 Apr 1 - Jun 30	Q3 / 2023 Jul 1 - Sep 30	
opulation & Sampling	opulation & Sampling Submission inpatient and outpatient)	HQR via HARP Log In	May 1, 2023	August 1, 2023	November 1, 2023	February 1, 2024	
	Fibrinolytic therapy received within 30 minutes	HQR via Outpatient CART/Vendor	May 1, 2023	August 1, 2023	N/A Retired	N/A Retired	
	Median time to transfer to another facility for acute coronary intervention	HQR via Outpatient CART/Vendor	May 1, 2023	August 1, 2023	N/A Retired	N/A Retired	
P-18	Median time from ED Arrival to ED Departure for Discharged ED Patients	HQR via Outpatient CART/Vendor	May 1, 2023 August 1, 2023 November 1, 2023 February 1				
P-22	Patient left without being seen	HQR via HARP Log In	May 15, 2023 (Aggregate based on full calendar year 2022)				
ICP/IMM-3	Influenza vaccination coverage among health care personnel	National Healthcare Safety Network	May 15, 2023 (Aggregate based on Q4 2022/Q1 2023)				
DTC	Emergency Department Transfer Communication	QHI	Submit each month by the end of the following month				
ICAHPS	Hospital Consumer Assessments of Healthcare Providers and Systems	HQR via Vendor	April 5, 2023	July 5, 2023	October 4, 2023	January 3, 2024	
ntibiotic Stewardship	CDC NHSN Annual Facility Survey	National Healthcare Safety Network	March 1, 2024 (Survey year 2023)				
uality Program Assessment	National CAH Quality Inventory and Assessment	Healthworks	December 1, 2023				
	* The Federal Office of Rural Health currently has new MBQIP r	equirements under consideration. It is possible, additi	onal items will be added. We	will share more information	as it becomes available.		

2023-2024 Funding Priorities

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

- Meeting MBQIP Requirements (includes HCAHPS)
- ICD-11 Coding Readiness and/or Implementation

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

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SHIP Purchasing Menu

- MBQIP data collection process/related training or software (includes HCAHPS)
- 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 (not telecommunications)
- Community paramedicine training and hardware/software
- Health information technology training for value and ACOs including training, software and risk assessments for cybersecurity

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SHIP Purchasing Menu

- · ICD-11 software/training
- S-10 Cost Reporting training (charity care)
- · Pricing transparency training (chargemaster training)
- Efficiency or quality improvement training no projects
 - Patient experience of care
 - Patient safety
 - Immunizations
 - Reducing readmissions, reducing readmission disparities
 - Antibiotic stewardship
 Discharge planning
 - Hospital safety and emergency
 - preparedness
 - Lean, IHI Plan/Do/Study/Act, root cause analysis
- Team STEPPS
- Care coordination
- Health information exchange
- Swing bed utilization and quality

 measures
- Population health, social determinants
- of health

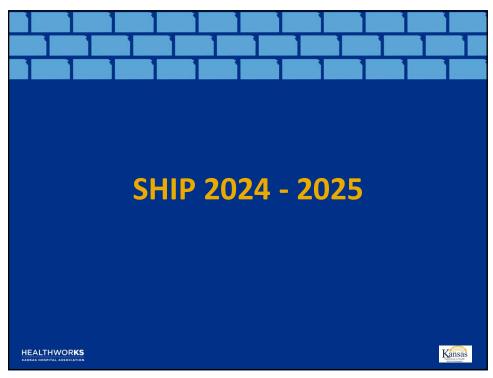
 Medicare spending per beneficiary
- Financial and operational improvements
- 340B
- Efficiency or quality improvement software
 - Medicare spending per beneficiaryNon-clinical operations
 - Health information exchange
 - Swing bed utilization and quality measures
- Care coordination
- Population health
- Social determinants of health

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	as FAQs for FY23 .krhop.net	SH	IP -	
	KRHOP Kansas Rural Hospitals Optimizing Performa	ance		
	The Kansas Small Hospital Improvement Program is a federal-supported program to support small rural hospitals activities related to quality improvement and investments towards meaningful use of health information technology. The Kansas SHIP is managed by the by State Office of Rural Health within the Bureau of Community Health Systems at the Kansas Department of Health and Environment, KDH Enas contracted with Healthwork to administer this program. The SHIP is funded by the Federal Office of Rural Health Policy in the Health Resources and Services Administration. 2023-2024 Grant Year Documents Purchasing Guidelines SHIP Purchasing Menu FY 23 D 7023 SIJIO Biomobility Community (Community Community Commu	We offer a "list lets members o all subscribers. SHIP group, ple below. Allow to processing. Name	o the SHIP email group serv" email group that the list send emails to To apply for joining the sase complete the form to business days for Email	
HEALTHWORKS	Forms The FY23 SHIP Mid-Year Expense Report is due Dec. 31, 2023. Choose the version that is easier be submitted from each fadility, even if no expenditures are listed. If submitting expenditures, rewith the expenditures. FY23 SHIP Mid-Year Expense Report (WDT version) FY23 SHIP Mid-Year Expense Report (PDT version) 2023 BLANK SHIP and MBQIP Quality information			

Topic	Question	Answer		
e-learning platforr 7 training	ms for Can we use SHIP grant funds for Care Learning or Health Stream employee training for safety, quality, risk, emergency preparedness?	Subscriptions to ongoing or on-demand training (at-will training) are unallowable expenses. Subscriptions that "happen to include" a SHIP-approved expenditure should be avoided.		
8 HCAHPS	How do we use grant funds for HCAHPS?	In order for SHIP grant funds to be used, the date of service have to fall within the SHIP grant period, not the billed date. Also, only HCAHPS can be used for this grant - no emergency department or clinic surveys can be paid.		
9 Pharmacy Service:	Can we pay for the services of the pharmacist/telepharmacy contract with grant funds?	The cost of personnel, medications, medication delivery, refilling pre-packaged medication, or assistants for direct patient care are unallowable. Training, hardware, and software that support the application and implementation of remote pharmacy (telepharmacy) services are allowable.		
Physical Plant and		No - this would not be an allowable expense. "Patient healthcare safety, security, and equipment that aids in treating a patient may alst increase patient safety. The three are not the same, and direct patient care and hospital security measures are unallowable even if those measures increase patient safety measurements.		



2024 - 2025 SHIP Overview

- FY 24 grant period
 - June 1, 2024 to May 31, 2025
- Funds hospitals are eligible to receive \$11-12K
- Funds must be spent on qualifying purchases during grant period

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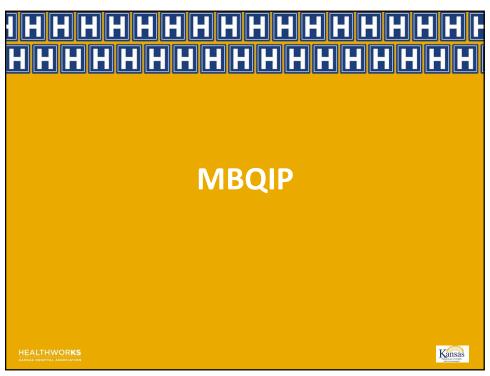
2024 – 2025 SHIP Agreement

- Waiting for final award from federal office
- KDHE needs to contract with Healthworks
- Agreements will be sent from Healthworks to CEOs and SHIP Contacts
- Your hospital must respond back by executing and returning the agreement

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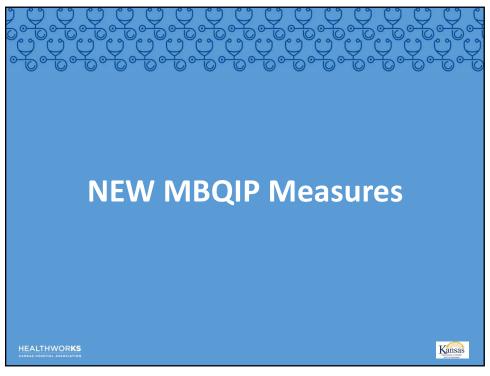
MBQIP's Tie to SHIP

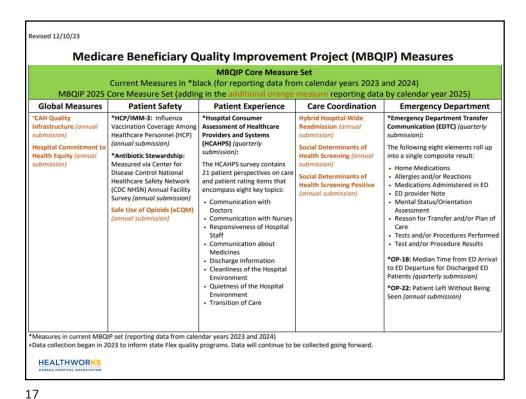
Kansas CAHs must actively participate in the Medicare Beneficiary Quality Improvement Project [MBQIP] to qualify for full funding.

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 CAH Quality Program Assessment and Services Inventory – due 12/01/23 and annually

NEW MBQIP Measures - ALL Annual

- Hybrid Hospital-Wide All Cause Readmission 3Q24 2Q25 due 9/30/25
- Safe Use of Opioids Concurrent Prescribing (eCQM) Inpatient CY 2025 due 2/27/26
- Hospital Commitment to Health Equity CY 2025 due 5/15/26
- Screening for Social Drivers of Health CY 2025 due 5/15/26
- Screen Positive for Social Drivers of Health CY 2025 due 5/15/26

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Submissions

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What Can You Do Now?

- Register for New MBQIP Measure virtual training on July 11 @ 1000
- https://registration.kha-net.org/

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			Submission Deadline by Encounter Period					
Measure ID	Measure Name	Reported To	Q4 / 2023 Oct 1 - Dec 31	Q1 / 2024 Jan 1 - Mar 31	Q2 / 2024 Apr 1 - Jun 30	Q3 / 2024 Jul 1 - Sep 30		
Population & Sampling	Population & Sampling Submission (inpatient and outpatient)	Hospital Quality Reporting (HQR) portal	May 1, 2024	August 1, 2024	November 1, 2024	February 1, 202		
OP-18	Median time from ED Arrival to ED Departure for Discharged ED Patients	HQR portal via Outpatient CART/Vendor	May 1, 2024 August 1, 2024 November 1, 2024 Fet					
OP-22	Patient left without being seen	Hospital Quality Reporting (HQR) portal	May 15, 2024 (Aggregate based on full calendar year 2023)					
HCAHPS	Hospital Consumer Assessments of Healthcare Providers and Systems	Hospital Quality Reporting (HQR) portal via Vendor	April 3, 2024	July 3, 2024	October 2, 2024	January 3, 202		
HCP/IMM-3	Influenza vaccination coverage among health care personnel	National Healthcare Safety Network (NHSN)	May 15, 2024 (Aggregate based on Q4 2023/Q1 2024)					
Antibiotic Stewardship	CDC NHSN Annual Facility Survey	National Healthcare Safety Network (NHSN)	March 1, 2025 (Survey year 2024)					
EDTC	Emergency Department Transfer Communication	QHi	Submit each month by the end of the following month					
Quality Program Assessment	National CAH Quality Inventory and Assessment	Healthworks	December 1, 2024					
Social Drivers of Health	Identification of Team Leader	Healthworks	Submitted as part of SHIP mid-year report					
Health Equity	Identification of Team Leader	Healthworks	Submitted as part of SHIP mid-year report					
	id Hospital-Wide All Cause Readmission, Safe Use o red as part of MBQIP reporting in the next grant cy		vers of Health, Screen Po	sitive for Social Drivers	of Health, and Hospital Co	emmitment to Health		

CAH Quality Program Assessment

- Mid-Sept to November
- Official dates are TBD by FORHP soon
- Working on definitions/details of "what makes a YES"
- Completed detail was emailed when submitted in 2023
- Some sections will be EOY the 2024 version will be shorter; but in 2025 all questions will come back

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OP Reporting Deadlines

1Q24 Submissions due August 1, 2024

<u>Population & Sampling</u> ED Throughput (OP-18) – optional

Outpatient Quality Reporting
ED Throughput (OP-18) (arrival to departure time)

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OP-18 Updated Public Reporting

Set Measure ID #	Performance Measure Name
OP-18a	Median Time from ED Arrival to ED Departure for Discharged ED Patients –
OP-16a	Overall Rate
OP-18b	Median Time from ED Arrival to ED Departure for Discharged ED Patients –
	Reporting Measure
OP-18c	Median Time from ED Arrival to ED Departure for Discharged ED Patients –
OP-180	Psychiatric/Mental Health Patients
OP-18d	Median Time from ED Arrival to ED Departure for Discharged ED Patients –
OP-180	Transfer Patients

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CART OP Sex Demographic Changes

Effective July 1, 2024

- Data Element: Sex
- Changes to Data Element: Sex Assigned at Birth

Select all that apply:

- 1 = Male
- · 2 =

Assigned/Designate d Male at Birth

- 3 = Female
- 4 =

Assigned/Designate d Female at Birth

- 5 = LGBTQ
- 6 = Unknown

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CART OP Sex Demographic Changes

Effective July 1, 2024

Data Element: Sex Assigned at Birth

Allowable Values:

1 = Female

2 = Male

3 = Intersex

4 = None of the Above, Other, or Unable to Determine

5 = Preferred Not to

Answer

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CART OP Sex Demographic Changes

Effective July 1, 2024
Data Element:
Gender Identity

Allowable Values: Select all that apply:

1 = Man

2 = Woman

3 = Non-binary

4 = Transgender

5 = None of the Above, Other, or Unable to

Determine

6 = Preferred Not to

Answer

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CART OP Sex Demographic Changes

Effective July 1, 2024
Data Element:
Sexual Orientation

Allowable Values:

1 = Gay

2 = Lesbian

3 = Straight (Not Gay

or Lesbian)

4 = Bisexual

5 = None of the Above,

Other, or Unable to

Determine

6 = Preferred Not to

Answer

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OP Reporting Demographic Changes

Section 2 - Alphabetical Data Element List and Data Dictionary

Impacts: Alphabetical Data Dictionary

Rationals: Three data elements (See Assigned at Birth, Sexual Orientation, and Gender Identity) are being updated or added in order to bring (NS closes to alignment with best practices and the United States Core Data for Interoperability without requiring additional data collection. The Sex Assigned at Birth clement [set] of the Company of Company (See Assigned at Birth Centeral [set])

Add: new data elements:

Gender Identity

Sexual Orientation

Change: Sex data element to:

Sex Assigned at Birth

Section 5 - Hospital Outpatient Quality Measure Data Transmission

Impacts: Hospital Outpatient Clinical Data File Layout

Rationals: This update is to include an additional Hospital Outpatient Clinical Data File Layout

Rationals: This update is to include an additional Hospital Outpatient Clinical Data File Layout

Add: Hospital Outpatient Clinical Data File Layout (Q3 – Q4 2024 reporting period)

Section 6 - Tools and Resources

Impacts: OP-29. Appropriate Follow-up Interval for Normal Colonoscopy in Average Risk Patients

OP-29 Tool Decorption of Change(S)

Add: Hospital Outpatient Clinical Data File Layout (Q3 – Q4 2024 reporting period)

Section 6 - Tools and Resources

Impacts: OP-29. Appropriate Follow-up Interval for Normal Colonoscopy in Average Risk Patients

OP-29 Denominator Codes

Hospital OQR Specifications Manual

Encounter dates 01-01-24 (1024) through 12-31-24 (4Q24) v17.0a

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OP Reporting Demographic Changes

- The <u>Hospital Outpatient Quality Reporting Program specifications</u> includes a change in Sex data elements that will impact future OP-18 data submission. The Sex data element will be replaced by the Sex Assigned at Birth data element beginning with **July 1, 2024, encounters**. This will impact OP-18 data abstractions. The Sex data element will continue to be used for abstractions for encounter dates up to June 30, 2024.
- The numeric allowable values will be changed for encounters beginning July 1, 2024. This will impact your February 1, 2025, data submission which will need to contain this change from the Sex data element to the Sex Assigned at Birth data element. You will continue to report the Sex data elements for OP-18 for the August 1, 2024, data submission (Q1 2024 encounters) and the November 1, 2024 data submission (Q2 2024 encounters). For CART users you will continue to report as you have using version CART version 1.24.0 until further notice.

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OP Reporting Demographic Changes

- What can hospitals do to prepare for this change?
- Inform EMR vendors and IT teams of this change beginning with July 1, 2024, encounters. It is important to align data elements with these changes for ease of abstraction of these encounters for the February 1, 2025, submission.
- CART users can continue using CART version 1.24.0 for submissions of Q1 2024 encounters and Q2 2024 encounters. The RQITA team anticipates a new version of CART will be released for encounters starting July 1, 2024, to use for submission due February 1, 2025.
- Connect with hospital leadership and clinical teams to ensure this information is captured for patient encounters starting July 1, 2024.
- Review the measure specifications. Page 2-48 of the <u>Hospital Outpatient Measure Specifications</u> version 17.0a contains detailed information regarding the changes.
- Sign up for the CART listserv to be the first to know about changes https://qualitynet.cms.gov/listserv-signup.

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EDTC Reporting Deadlines

2Q24 Submissions due August 1, 2024

- April 2024
- May 2024
- June 2024

KS Report is due to FORHP by August 10, 2024

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IP Reporting Deadlines

NO Abstracted IP Measures

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NEW Kansas to FORHP Reporting Change

- The Federal Office of Rural Health Policy has announced a change to the Kansas annual report
- Every MISSED reporting deadline will have to be 'explained' for each facility
 - If 3Q24 OP-18 is 'N/A' instead of just Susan R reaching out to ensure a process is in place to avoid missing future deadlines, Kansas will have to 'dig deeper' and report to FORHP what happened that contributed to the omission
 - More details to come

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FMT MBQIP Reports

- EDTC
- IP/OP Core Measure
- HCAHPS
- > Waiting for all three reports to 'update' so we can send these out to the data and quality contacts
- ➤ Last sent out in early April
- ➤ For assistance reading reports, view the QCC recording from May 2023

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State-Level Care Transition Core Measures/EDTC Report Quarter 4 - 2022

Generated on 03/31/23

	MBQIP Quality Measure	Your State's Performance by Quarter				State Current Quarter			National Current Quarter		Bench- mark	
		Q1 2022	Q2 2022	Q3 2022	Q4 2022	Aggregate for All Four Quarters	# CAHs Report- ing	Average Current Quarter	90th Per- centile	# CAHs Report- ing	Average Current Quarter	Average Current Quarter
EDTC-All	Composite	84%	84%	81%	82%	83%	81	82%	100%	1,178	90%	100%
	Home Medications	93%	92%	92%	91%	92%	81	91%	100%	1,178	94%	100%
	Allergies and/or Reactions	96%	95%	94%	93%	94%	81	93%	100%	1,178	96%	100%
	Medications Administered in ED	96%	94%	94%	93%	94%	81	93%	100%	1,178	96%	100%
	ED Provider Note	91%	91%	89%	90%	90%	81	90%	100%	1,178	95%	100%
	Mental Status/Orientation Assessment	95%	93%	92%	91%	93%	81	91%	100%	1,178	96%	100%
	Reason for Transfer and/or Plan of Care	96%	96%	94%	95%	95%	81	95%	100%	1.178	97%	100%
	Tests and/or Procedures Performed	95%	94%	93%	93%	94%	81	93%	100%	1.178	96%	100%
	Tests and/or Procedures Results	94%	93%	92%	93%	93%	81	93%	100%	1,178	96%	100%
	Total Medical Records Reviewed (N)	N=1.897	N=2.238	N=2.339	N=2.370	N=8.844	N=2.370			N=48.876		

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2024 Upcoming Webinars

- SHIP Quarterly Webinars @ noon
 - September 12 and December 12
- Quality Corner Calls @ noon
 - August 14 Heartbeat Behind the Headlines Susan Runyan and Doug Morse
 - October 15 Measures Under Consideration(MUC) and Trends for the Future
 - November 14 NRHA Awards, Full SHIP Grant Recognition and Most Improved

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2024 Upcoming Offerings

- New Quality Director Orientation (formerly known as Quality 101)
 - June 20 & 21
- New MBQIP Measure Virtual Training
 - July 11
- Health Equity: Transportation Challenges in Kansas
 - July 31

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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

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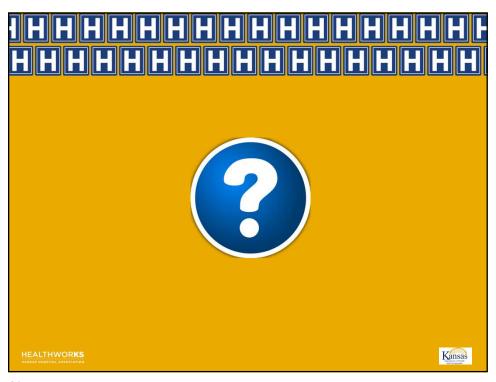
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Resources

- www.krhop.net
 - SHIP
 - SHIP 23-24
 - SHIP 24-25
 - MBQIP
 - Quality/MBQIP
 - Abstraction
- www.kha-net.org
 - Education
 - Education Brochures
 - Register for Healthworks/KHA Events Online https://registration.kha-net.org/

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