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# **Webinar 2: Completing the Application and Fulfilling the Project Scope**

August 14, 2013

New Jersey Department of Health (NJDOH)





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## Objectives

- ✓ DSRIP Status Update
- ✓ To understand the finer points of completing the Hospital DSRIP Plan Application
- ✓ To understand how to fulfill the scope of your selected project
- ✓ Review Frequently Asked Questions (FAQs)





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## DSRIP Update

- ✓ CMS approved the protocol materials. All documents are considered **final** and can be accessed on the <http://dsrip.nj.gov/> website
  - ❖ No major changes were required
- ✓ State continues to collaborate with CMS on review plans and reporting requirements
- ✓ The Quality and Measures Committee will start their DSRIP work this month





## DSRIP Update

- ✓ Extension of Transition funding was approved to continue through December 2013.

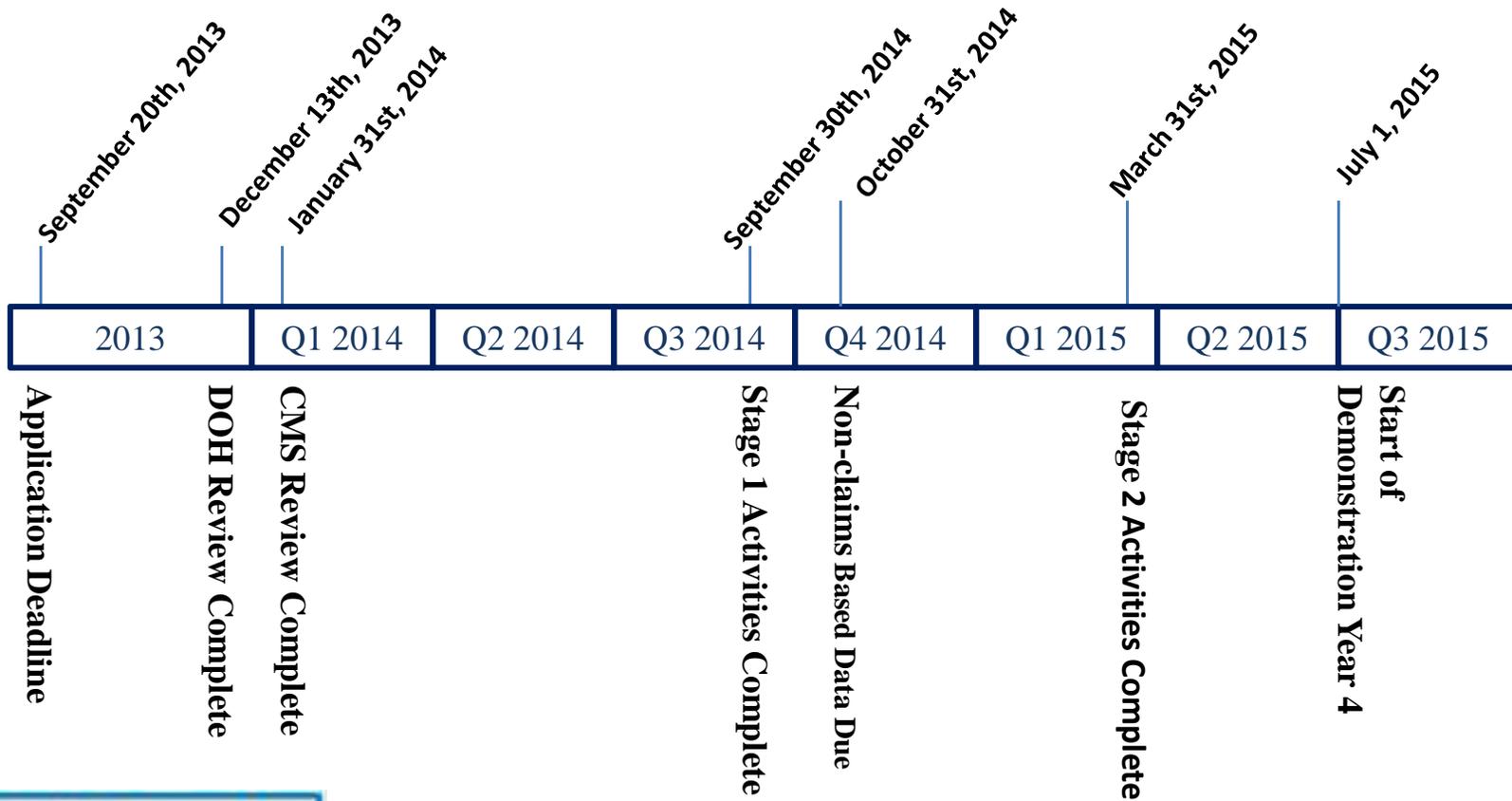
Demonstration Year 1	Transition Period	October 2012 – June 2013
Demonstration Year 2	Transition Period DSRIP Implementation	July 2013 – December 2013 January 2014 – June 2014
Demonstration Year 3	DSRIP Implementation	July 2014 – June 2015
Demonstration Year 4	DSRIP Implementation	July 2015 – June 2016
Demonstration Year 5	DSRIP Implementation	July 2016 – June 2017



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## DSRIP: Major Milestones





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# Hospital DSRIP Plan Application

## Key Elements to Consider

- ✓ **Partners** – Partners may include schools, behavioral health provider groups, and should also include primary care practices
- ✓ **Budgeting** – Budgeting analysis should include the dollar investment for direct, indirect and capital costs. Economic value must be quantified as part of the hospital application and annual reporting. Economic value includes but is not limited to current cost savings, future cost savings, cost avoidance and directional care cost savings.
- ✓ **Public Input** – could include any of the following: open community forum, any process for receiving public comment, plan for engagement with public stakeholders
- ✓ **Starting Point** – if a current project is being expanded (levels of care, patient populations, new facilities, etc.) hospital must describe what is currently in place and what additional resources are required





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## Application Activities – Complete No Later than September 20<sup>th</sup>, 2013

Activity 1 - Identify key program components and goals. <ul style="list-style-type: none"><li>• Gap analysis, budget analysis, identification of partners, identification of target population.</li></ul>	<i>Required</i>
Activity 2 - Identify project protocols and interventions. <ul style="list-style-type: none"><li>• Develop discharge planning interventions, determine case management/care coordination needs of the target population for the project, etc.</li></ul>	<i>Required</i>
Activity 3 - Identify multi-therapeutic medical and support team.	<i>Required</i>
Activity 4 - Identify staff education needs.	<i>Required</i>
Activity 5 - Identify physical space/ settings/ supplies.	<i>Required</i>
Activity 6 - Identify patient supplies and equipment.	<i>As applicable</i>
Activity 7 - Identify technical needs.	<i>As applicable</i>
Activity 8 - Identify data needs.	<i>As applicable</i>
Activity 9 - Identify marketing/ outreach needs.	<i>As applicable</i>
Activity 10 - Report Baseline Data for Non-Claims Based Stage 3 and Stage 4 Metrics.	<i>Required</i>

**The hospital must briefly explain the rationale if the associated activity is considered to be not applicable.**



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## Stage 1 – 2 Activities

**These activities will be completed at a future date.**

**For these activities, when completing the application, the hospital must:**

- ✓ Include in the Application the high level requirements/ outline regarding how your hospital proposes to achieve each activity.
- ✓ Consider the minimum submission requirements. These requirements will need to be submitted to confirm that an incentive award for that activity has been earned.
- ✓ Hospitals should map out their projects from start to finish. Be conservative in your estimation of the targeted completion dates for the activities.





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## Stage 1 Activities – Complete No Later than September 30<sup>th</sup>, 2014

Activity 1 - Develop methodology to identify pilot population.	<i>Required</i>
Activity 2 - Develop health assessment/ risk stratification tool to assist in identifying the health risk of project participants.	<i>Required</i>
Activity 3 - Procure multi-therapeutic medical and support team that will be dedicated to the DSRIP project.	<i>Required</i>
Activity 4 - Procure partners.	<i>Required</i>
Activity 5 - Procure staff education needs.	<i>Required</i>
Activity 6 - Procure physical space/ settings/ supplies.	<i>As applicable</i>
Activity 7 - Procure patient supplies and equipment.	<i>As applicable</i>
Activity 8 - Procure technical needs.	<i>As applicable</i>
Activity 9 - Procure data needs.	<i>As applicable</i>
Activity 10 - Procure marketing/ outreach needs.	<i>As applicable</i>
Activity 11 - Establish project protocols and interventions.	<i>Required</i>
Activity 12 - Develop quality improvement .	<i>Required</i>



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## Stage 1 Activities – Conduct Quarterly beginning March 2014

Activity 13 – Conduct patient satisfaction survey.	<i>As applicable</i>
Activity 14 – Conduct staff education/training sessions on all applicable project tools, checklists, processes, protocols and intervention procedures.	<i>As applicable</i>
Activity 15 – Project Staff Evaluation/Assessment.	<i>Required</i>





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## Stage 2 Activities – Complete No Later than March 31st, 2015

Activity 1 – Initiate pilot project.	<i>Required</i>
Activity 2 – Evaluate pilot program and re-engineer and/or re-design based on pilot results.	<i>Required</i>
Activity 3 – Initiate program protocols and interventions for entire population.	<i>Required</i>

## Stage 2 Activities – Conduct Quarterly beginning September 2014

Activity 4 – Ongoing monitoring of program outcomes.	<i>Required</i>
Activity 5 – Provide feedback to hospital administrators and participating providers.	<i>Required</i>
Activity 6 – Provide feedback to the learning collaborative.	<i>Required</i>

Hospitals must initiate full implementation of program protocols and interventions no later than March 31, 2015.



Hospitals who already have infrastructure in place may be able to pilot earlier and implement sooner than March 31, 2015. The target time frame for the pilot period should be justified and explained in the application.



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## Example – Hospital A: selects Project 3 - Integrated Health Home for the SMI

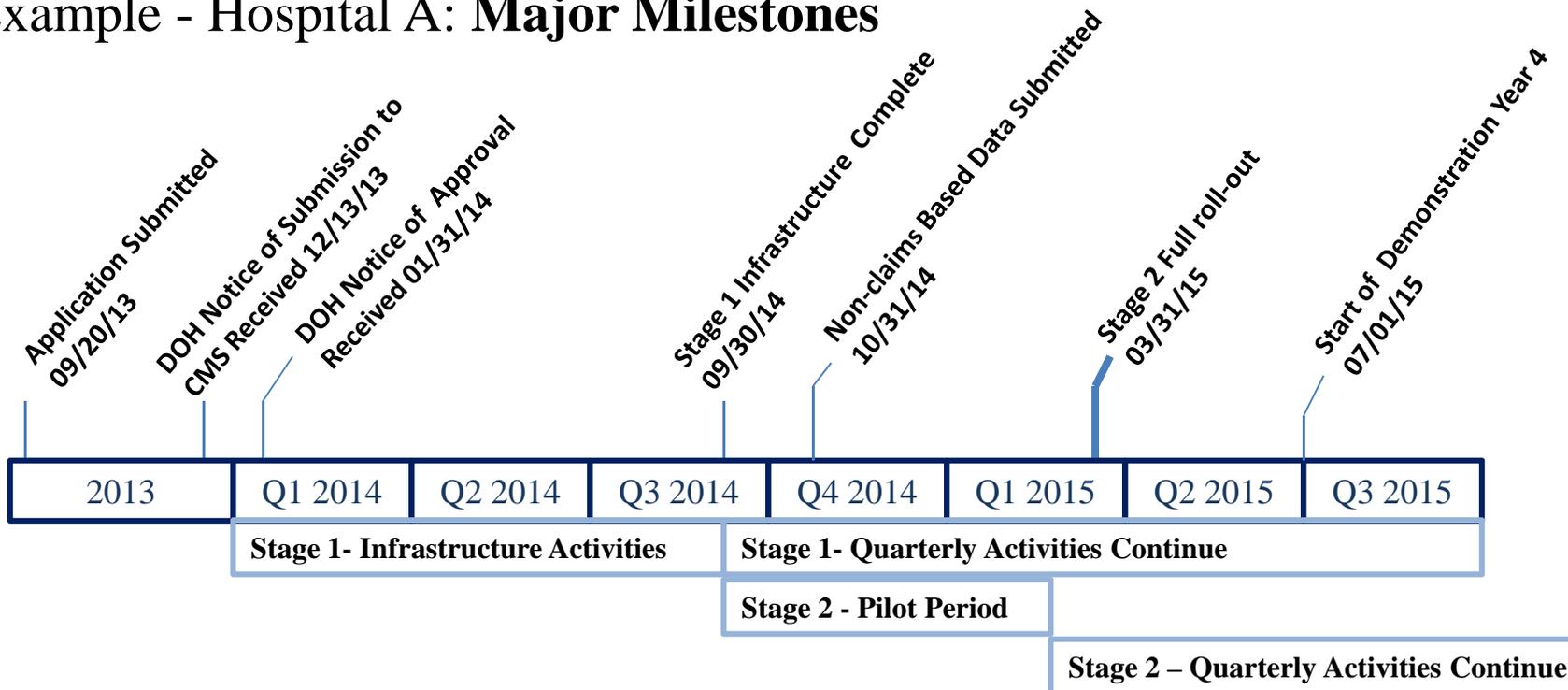
- 
- **Application Stage** – 10 total pre-defined activities; 6 required, 4 as applicable
    - Hospital A selects 9 pre-defined activities because the hospital determined that activity 9 (marketing) is not required for the project as all patients who are currently receiving behavioral health services will receive the enhanced integrated care. Hospital A describes and documents in detail all activities.
- 
- **Stage 1** – 15 total pre-defined activities; 8 required, 7 as applicable
    - Hospital A selects 14 pre-defined activities and does not include activity 10 (marketing) as that does not apply to the project. Hospital A describes at a high level the plan for accomplishing each activity.
- 
- **Stage 2** – 6 total pre-defined activities; 6 required, 0 as applicable
    - Hospital A selects all 6 pre-defined activities and describes at a high level the plan for accomplishing each activity. Hospital A targets pilot completion for 02/28/15 and full roll-out for 03/31/15.
- 
- **Stage 3** – 9 Total Measures; 6 MMIS measures, 3 EHR/Chart measures
    - Hospital A documents their plan to report the 3 measures by October 31<sup>st</sup>, 2014 within the Challenges section of the application.
- 
- **Stage 4** – 45 Total Measures; 26 MMIS measures, 19 Chart/ HER measures
    - Hospital A documents their plan to report the 19 Chart/ EHR measures by October 31<sup>st</sup>, 2014 within the Challenges section of the application.



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## Example - Hospital A: Major Milestones





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## Project Scope

- Hospitals may expand the scope of the project or add activities believed to be key elements that will enhance achievement of the project objectives

Keep the following in mind when detailing the project methodology:

- Do not deviate from the Project Objective
- The design must meet ALL Project Objectives
- Consider what activities need to be implemented to achieve Pay for Performance (P4P) measures
- If the design includes language “may” or “such as” or “XX” – the hospital must specify the project details
- If the design does not include flexible language – ALL aspects of the methodology are expected to be fulfilled and the hospital must further drill-down to specifics





## Project Scope - Hospital-Based Educators Teach Optimal Asthma Care Example 1

### Objective:

Hospital-Based Asthma Educators provide education to patients, providers, and community members on optimum asthma care resulting in a decrease in inpatient admissions and Emergency Department visits.

**Please Note: Must meet the objective to educate  
1) patients, 2) providers and 3) community**



### Methodology:

Develop a program where hospital-based certified asthma educators may perform **any of the following:**

- Internal training of hospital staff on up-to-date asthma care including new medications and/or guidelines;
- Training of Primary Care Practices on up-to-date asthma care including new medications and/or guidelines.
- Education sessions with staff in childcare centers.
- Work with nurses within the school system(s) to provide education on up-to-date asthma care and champion use of asthma action management and school plans.
- Provide pharmacists with a web-based form they can use to alert physicians when a patient is frequently refilling a quick-relief asthma medication or has failed to refill an asthma controller medication.
- Face-to-face meetings with individuals with asthma and their families to provide self-management instructions. Educator also contacts patient or parent/guardian for minors XX month(s) after the initial session to check on the patient's status and assess further educational needs.
- Work with patient to ensure he or she has access to medications.



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## **Project Scope - Pediatric Asthma Case Management and Home Evaluation Example 2**

### **Objective:**

To implement Case Management and Home Evaluations in an effort to reduce admissions, Emergency Department visits and missed school days related to Asthma

**Please Note: Must meet the objective to implement 1) case management and 2) home evaluations when you determine the methodology**





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## Project Scope - Integrated Health Home for the Seriously Mentally Ill (SMI) Example 3

**Objective:** To fully integrate behavioral health and physical health services for those with a serious mental illness (SMI) diagnosis in order to provide evidence-based whole-person care.

**Please Note:**  
**All of these items must be accomplished and accounted for on the submitted Plan.**

**Methodology:**

Ensure that each SMI-diagnosed patient has an ongoing relationship with a Medical and Psychiatric Licensed Independent Practitioner (LIP) in a co-located facility.

Ensure coordination and access to chronic disease management, including self-management support to those SMI individuals and their families.

Ensure the development of a single Treatment Plan that includes the member's behavioral health issues, medical issues, substance abuse and social needs. This includes incorporating traditional medical interventions, such as gym memberships, nutrition monitoring and healthy lifestyle coaching.

Ensure that the Plan is maintained in one ambulatory Electronic Health Record (EHR) to ensure that information is shared across the treatment team and continuum of care spectrum.

Ensure that the treatment outcomes are evaluated and monitored for quality and safety for each patient.





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## **Project Scope - Day Program and School Support Expansion Example 4**

**Objective:** School aged children and adolescents suspended from classrooms due to severe behavioral health issues may be left unsupervised pending approval to return to school. Failure to properly manage the suspension of these students impedes treatment and can delay their return to the school setting.

This pilot program has two primary objectives. The first is to provide space, therapy and instruction at the hospital's ambulatory behavioral health center until the students are able to return to full-day attendance within the school setting. Treatment is provided by certified therapists and psychiatrists using evidence-based protocols for pediatric and adolescent care. The second is to expand the relationships and linkages between the behavioral health provider and the school district to ensure that the schools are supported in their efforts to assist students with behavioral health diagnoses.

**Please Note: Both objectives must be described in the submitted Plan.**

- The plan must include specifics as to how the project participants will provide the expanded day program requirements.
- The Plan must also describe in detail how the project participants will expand linkages and support between the behavioral health provider and the school district.





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## **Project Scope - Electronic Self-Assessment Decision Support Tool Example 5**

**Objective:** Implement an electronic self-assessment decision support tool that patients complete prior to visits with outpatient mental health providers in order to improve mental health consultations and treatment including efficiency and effectiveness of treatment planning, adherence and communication between the patient and the provider.

### **Methodology:**

Create, or implement an off-the-shelf decision support tool that a client completes immediately prior to their outpatient mental health visit. This tool would be available and utilized at the practitioner's office (via a private computer terminal, I-pad, etc.).

**Please Note: This must be an electronic decision support tool that meets all the specifications outlined in the project sheet. The selection of the tool is at the discretion of the hospital, but must meet all the requirements. E.g.:**

- It must have the ability to generate an immediate consultation report
- It must allow the patient to report on their physical and behavioral health symptoms, medication compliance, etc.
- It must instantly graph and identify key areas of possible concern





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## **Project Scope - Care Transitions Intervention Model to Reduce 30-Day Readmissions for Chronic Cardiac Conditions**

### **Example 6**

**Objective:** To create an evidence-based Care Transitions Intervention Model for cardiac care. This includes the development and support of the use of hospital Patient Navigators to assist in accessing prevention and follow-up treatment for patients experiencing chronic cardiac illness.

### **Methodology (excerpt only provided for training):**

The hospital will implement an evidence-based Care Transitions Intervention Model for cardiac care, **such as** the model developed by Dr. Eric A Coleman, MD, MPH, Associate Professor of Medicine within the Divisions of Health Care Policy and Research and Geriatric Medicine at the University of Colorado Health Sciences, aimed at improving quality and safety during times of care “hand-offs”. ( *Note:* Additional methodology for this project not included on slide).

**Please Note: This must be an evidence-based Care Transitions Intervention Model. This must include Patient Navigators.**





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**Project Scope - Improve Overall Quality of Care for Patients Diagnosed with Diabetes Mellitus and Hypertension**

**Example 7**

**Objective:** The objective for this project is to develop and implement a patient centered medical home for patients with diabetes mellitus and hypertension resulting in improved overall quality of care.

**Methodology:**

Develop and **implement a patient centered medical home** for patients with diabetes mellitus and hypertension. Patients **will be** entered into the program via the ambulatory care department, emergency department, inpatient services, same day service locations and community health screenings conducted by hospital staff.

The program **may include:**

- Utilizing multi-therapeutic outpatient evidence based management,
- Lifestyle modification,
- Nutritional consultation,
- Intensive hospital discharge planning,
- A dedicated patient navigation system,
- Improve social services

**Please Note: The focus area for this project is Diabetes. The patient must be either a Type 1 or Type 2 Diabetic and have a diagnosis of Hypertension. The project does not define which diagnoses must be primary versus secondary, however there are associated measurements within this project where one diagnosis will be principal to the other based on episode of care.**





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## Project Scope - Diabetes Group Visits for Patients and Community Education Example 8

**Objective:** The objective for this project is twofold, first, to ensure that all newly diagnosed diabetics have a clear understanding of their plan of care and are knowledgeable regarding expected outcomes and disease management. Secondly, to improve the opportunity for medical staff to gain continued and ongoing education from endocrinology areas.

### **Methodology:**

Develop a diabetic education model that serves to educate patients as well as to facilitate endocrinologists educating Primary Care Physicians (PCPs) and other medical staff on best-practice guidelines in Diabetes care, and move towards an innovative model of inter-professional learning in undergraduate and graduate medical education.

Enroll patients to participate in a new group visit model for managing chronic disease. Patients will be enrolled in group visits; **sessions of xx minutes each**, whereby a primary care physician along with medical specialists that **could include** an endocrinologist, medical students, residents, fellows, RN, LPN, psychologist, and nurse practitioner provide a ‘focused care model that is patient-centered, evidenced-based, and enables peer-to-peer empowerment and education.’

Group visit patients receive not only medical therapy during the sessions, **but also screening for depression and individual counseling services.**



Please note : If there is “XX” the project participant specifies the length of the group visit.



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## Hospital DSRIP Plan Application

### Other Focus Area/Off-Menu Projects

*What is an Other Focus Area or Off-Menu Project?*

#### *Other Focus Area*

- Project developed for a condition other than one of the 8 conditions listed in the DSRIP protocols

**Example :** Project for patients with a primary diagnosis of Sickle Cell Anemia, Cancer, or Hepatitis

#### *Off-Menu*

- Project that is not from the pre-defined project menu, but may be within the 8 conditions

**Example :** A project for the HIV/AIDS patient population that is not a patient centered medical home project





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## Hospital DSRIP Plan Application

### Other Focus Area/Off-Menu Projects Requirements

- Hospital must develop the project's defined objective, high level methodology, anticipated outcomes, and project-specific metrics
- Analysis must present **strong and compelling justification** for the project.
- Required documentation includes:
  - Internal and external data used to develop project
  - Project is responsive to community needs
  - Project is in an area of poor performance and/or health care disparity important to the Medicaid and/or uninsured population
  - Why the project is innovative or promising
  - Employs an evidence-based approach with literature clearly cited

*Note : Greater levels of justification and examination will occur.*





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## Hospital DSRIP Plan Application

### Other Focus Area/Off-Menu Projects

*Specific data entry requirements:*

- For DSRIP Focus Area, select “Other/Unique Focus Area\*\*”
- Enter Project Title

**DSRIP Focus Area:**

OTHER/UNIQUE FOCUS AREA\*\*

**Project Title:**

Free Text





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## Hospital DSRIP Plan Application

### Other Focus Area/Off-Menu Projects

*Specific data entry requirements:*

- For Rows 12-64, the “Project Specific” fields will remain blank
- All “Hospital Specific” fields for Rows 12-64 are required
- All activities listed on the application that state “REQUIRED” are required for all projects
- Due September 9<sup>th</sup>, 2013





# Hospital DSRIP Plan Application Other Focus Area/Off-Menu Projects

- Rows 494 – 509 shown below are ONLY to be completed if the hospital has selected an Other Focus Area or Off-Menu project

## Stage III. Other Focus Area/Off-Menu Projects - Proposed Measures

Measure	Measure Name	HQF	Measure Steward	NJ Data Source	P4P?
1					
2					
3					
4					
5					
6					
7					
8					





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## Stage 3 and Stage 4: Fast Facts

481	482	483	484	485	486	487	488	489
481	<b>Stage III. Quality Improvements</b>							
482						Included?	Approved/Refused?	Target Completion
483	Stage III Activity 1:	Report Stage III Project-Specific Metrics for DY2.						Month/Year
484	Actions/Milestone 1	→ Report Stage III Project-Specific Metrics for DY2.	Yes		See Metric Reporting Requirements			Funding Year
485	Stage III Activity 2:	Report Stage III Project-Specific Metrics for DY3.						
486	Actions/Milestone 1	→ Report Stage III Project-Specific Metrics for DY3.	Yes		See Metric Reporting Requirements			

Where the Application indicates “See Metric Reporting Requirements” this refers to information about the metrics, but will specifically refer to the databook when it is made available.

On the read-only tab 7, the measures highlighted with the **blue rows** are the measures that the **hospital will be required to report**.





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## Hospital DSRIP Plan Application Reminders

Questions regarding the NJ DSRIP Plan Application or any other questions relating to the DSRIP program may be forwarded to [NJDSRIP@mslc.com](mailto:NJDSRIP@mslc.com)

The preferred method of submission is via the Myers and Stauffer Secure File Transfer Protocol (FTP) site

- Use of the FTP requires user to provide Myers and Stauffer basic information and sign a user agreement form
- Upon receipt of these documents, each individual user will receive a private username and password in order to upload documents to the site; limited to two users per hospital
- User Agreement Forms must be received by **September 2, 2013** in order to ensure access to the FTP site





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# FAQs

Prepared by : Myers and Stauffer LC





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# Q&A

Prepared by : Myers and Stauffer LC

