1. When logging in, please include a first name and initial of your last name.
2. Once you have logged in, please select “Connect to Audio” and select any of the three options under “Audio Connection”.
3. If you select “I Will Call In”, please follow the instructions and enter your Attendee ID.
Ask questions in two ways:

1. **Submit questions through the chat.**
   
   If the chat box does not automatically appear on the screen’s right panel, hover over the bottom of your screen and click the chat bubble icon, circled in red.

2. **‘Raise your hand’ to ask a question through your audio connection.**
   
   Once we see your hand raised, we will call on you and unmute your line.

   Please introduce yourself and let us know what organization you are from.

Email njdsrip@pcgus.com with any additional questions.
Warm Up Poll

Which is your favorite NJ band/singer?

a. Bon Jovi
b. **Bruce Springsteen**
c. Lauryn Hill
d. Frankie Valli (The Four Seasons)
e. Whitney Houston

*Winner!*
NJ DSRIP April 2019 Webinar

April 09, 2019

Today’s Speakers:

• Emma Trucks, PCG

Clara Maass Medical Center

• Lori Willmot, MS, MBA
  (Director Nursing Finance and Special Projects)
• Jackielou Ferrer-Labbao, RN
• Madonna Merene, RN, BSN
  (Transitional Care Coordinators)

Office of Healthcare Financing

Robin Ford, MS
Executive Director

Michael D. Conca, MSPH
Health Care Consultant

Alison Shippy, MPH

Prepared by Public Consulting Group
Objectives

• By the end of this webinar, participants will be able to:

1. Interpret the specifications for DSRIP 03: 30-Day All-Cause Readmission Following Heart Failure (HF) Hospitalization.
2. Learn some successful strategies to address DSRIP 03.
3. State all materials due on April 30th for DSRIP program.
4. Identify new measures available in the performance dashboard.
5. Discuss the opportunity to present on future webinars with your DSRIP team.

Prepared by Public Consulting Group
Agenda

1. DSRIP 03 Specification Review: 30-Day All-Cause Readmission Following Heart Failure (HF) Hospitalization
2. Hospital Presentation on DSRIP 03
3. April 30th Deadline Review
   • SRW, MVT, DY7 SA2 Progress Report, DY8 Annual Report
4. Dashboard Update – DY7 SA1 additional measures
5. Future Webinar Call for Presentations
6. Q&A
7. Evaluation

Prepared by Public Consulting Group
Measure Review

DSRIP 03: 30-Day All-Cause Readmission Following Heart Failure (HF) Hospitalization
Measure Description and Context

**DSRIP 03 Description**

30-day all cause readmission rate following heart failure (HF) hospitalization.

**Public Health Context**

- NJ HF death rate better than US according to CDC data from 2016 (141.1 vs. 168.6)*
- HF death rate varies by NJ county*
- NJ Low-Income Pop. HF readmission rate improved since DY4 universal reporting

*Interactive Atlas of Heart Disease & Stroke Rate per 100,000; 2014-2016; Age 35+
Measure Logic

Numerator: # unplanned discharges in 30 days post index discharge for patients who have been members of the NJ Low-Income Population for 365 days prior through 30 days after index discharge.

Denominator: # of discharges with acute admission with HF as principle diagnosis.

Exclusions

- Patients who die during index HF admission
- Patients discharged against medical advice
- Patients who transfer from your acute care facility to another acute care facility (ie. admission to another acute care facility within 1 day of discharge)
If there are multiple unplanned discharges within 30 days after index admission discharge, only 1\textsuperscript{st} is considered a readmission.

An unplanned admission within 30 days but taking place after a planned admission – not considered readmission.
Clara Maass Medical Center:
30-Day All-Cause Readmission
Following Heart Failure (HF)
Hospitalization

Today’s Speakers:
Lori Willmot, MS, MBA Director Nursing Finance and Special Projects
Jackielou Ferrer-Labbao, RN Transitional Care Coordinator
Madonna Merene, RN, BSN Transitional Care Coordinator
Clara Maass Medical Center & Team

The Medical Center

Clara Maass Medical Center is located in Belleville, part of RWJBarnabas Health System, a 465 bed community hospital.

The Team

Transitional Care Team (Nurses & NP) works closely with all disciplines in & outside the Hospital to coordinate safe discharge to avoid unnecessary readmissions.
# Clara Maass DSRIP 03 Background

## Quality Project Context

<table>
<thead>
<tr>
<th>Project</th>
<th>DY1-3</th>
<th>DY4-6</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Care transition intervention model to reduce 30 day readmissions for chronic cardiac conditions.</td>
<td>• Essex County had one of the highest All-Cause Re-Hospitalization rate in NJ (21% compared to 18%).</td>
<td>• Readmission Rates for AMI and HF started to show improvement in DY5 and DY6</td>
</tr>
<tr>
<td>• Significant opportunities to improve health outcomes and reduce cost</td>
<td>• Essex County residents have a significantly higher age adjusted mortality rate for heart disease than national benchmarks</td>
<td>• DY7 our Readmission Rates are below the targets set by Corporate.</td>
</tr>
</tbody>
</table>
Clara Maass Improvement Strategy to Reduce Readmissions

• Engage Key Stakeholders
  • Formed Monthly DSRIP Steering Committee
  • Formed a Resource Team for Transitional Care/Case Management
  • Provide education & raise awareness of program & available resources
• Patient Flagging/Tracking
• Intensive Case Management
  • Coleman Model
  • DSRIP population vs population at large
• Next Steps
  • Resource Team–
    • We started with the internal Multi-Disciplinary Team and Plan to expand to the SNF’s, Dialysis and Home Care Agencies.
Performance

INITIATED DSRIP STEERING COMMITTEE

YEARS

2014  2015  2016  2017  2018

Readmission Rate

18.15  21.79  23.29  23.99  22.22

Full Population

Attributed Population (2018 data is for DY7 SA2 Only)
DSRIP PROGRAM UPDATES

Reporting Deadline
DOH began circulating a monthly program newsletter in February to the entire DSRIP contact list.

Have you been reviewing these newsletters each month?

a. Yes (76%)
b. No (24%)
April 30th Reporting Deadline

Due April 30 via SFTP

Standard Reporting Workbook
Measure Validation Template
DY7 Semi-Annual 2 Progress Report
DY8 Renewal Application

Helpful Tips

1. Link to SFTP and SFTP user guide: https://dsrip.nj.gov/Resources.html
2. February/March webinars review report details: https://dsrip.nj.gov/LC.html
3. PDSA Action plan worksheet from In-Person Learning Collaborative can help answer question #5 on progress report
April 30th Reporting Deadline

Due April 30 via SFTP

New

CLABSI Attestation

Standard Reporting Workbook
Measure Validation Template
DY7 Semi-Annual 2 Progress Report
DY8 Renewal Application

Helpful Tips

1. Link to SFTP and SFTP user guide: https://dsrip.nj.gov/Resources.html
2. February/March webinars review report details: https://dsrip.nj.gov/LC.html
3. PDSA Action plan worksheet from In-Person Learning Collaborative can help answer question #5 on progress report
CLABSI Attestation (DSRIP 21 and 63)

Why?

- Some hospitals reported DY6 CLABSI results that do not comply with reporting requirements in Databook v4.0
- CLABSI reporting requirements consistent in Databook v4.0, v4.1 and v5.0.
- Hospitals must report DY7 CLABSI data according to Databook v5.0 specs.
- DY6 data correction needed to enable performance trending for payment.

How

All Hospitals Submit Completed Attestation by 4/30

Did DY6 data adhere to Databook v4.0 specs?

- NO
- YES

Did you have any numerator events in DY6?

- NO
- YES

Resubmit DY6 Data by 5/17

No Further Action

Find Supplemental Docs on SFTP

Attestation Attached to April Newsletter

Prepared by Public Consulting Group
Dashboard Poll

Have you accessed the DSRIP Performance Dashboard to review DY7 SA1 yet?

a. Yes
b. No
Performance Dashboard

• 22 Measures already included in DY7 SA1 update: 1-3, 5-7, 13, 14, 20, 27, 28, 32, 34, 42, 66, 67, 81, and 88.

• New DY7 SA1 measure data added for: 8, 60, 62, 83

• All DY7 SA1 Data now aiming to be live in dashboard by the end of April.

• Attribution for DY7 SA1 data matches that from your recent attribution rosters.

• DY7 SA1 performance results only reflect claims from January 1, 2018 – June 30, 2018.

Resources

Delivery System Reform Incentive Payment (DSRIP)

The Delivery System Reform Incentive Payment (DSRIP) Program is one component of the New Jersey’s Comprehensive Medicaid Waiver as approved by the Centers for Medicare & Medicaid Services (CMS). DSRIP is a demonstration program designed to result in better care for individuals (including access to care, quality of care, health outcomes), better health for the population, and lower costs by transitioning hospital funding to a model where payment is contingent on achieving health improvement goals.

Hospitals may qualify to receive incentive payments for implementing quality initiatives within their community and achieving measurable, incremental clinical outcome results demonstrating the initiatives’ impact on improving the New Jersey health care system.

The DSRIP program supports the Healthy New Jersey 2020 vision: “For New Jersey to be a state in which all people live long, healthy lives.”

Announcements

News

New Jersey Department of Health Program Announcement

Next DSRIP Webinar on April 9th, 2019 @ 3pm
Webex information and agenda to be circulated before event. Recording, slides and Q&A from March 2019 webinar now posted in learning collaborative webpage.
### Finding New Data on the Dashboard

**NJ DSRIP Dashboard**

**Hospital Sandbox**
Create your own data visualization for individual measures.

<table>
<thead>
<tr>
<th>Hospital Name</th>
<th>Measure Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>CentraState Medical Center</td>
<td>CD4 T-Cell Count</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Measure Stage</th>
<th>Stratification</th>
</tr>
</thead>
<tbody>
<tr>
<td>Stage 3</td>
<td>N/A</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>DSRIP ID</th>
<th>Measure Name</th>
<th>Improvement Direction</th>
<th>Numerator</th>
<th>Denominator</th>
</tr>
</thead>
<tbody>
<tr>
<td>20</td>
<td>CD4 T-Cell Count</td>
<td>Higher</td>
<td>The number of HIV-infected patients who had 2 or more CD4 T-cell counts performed at least 3 months apart during the measurement year. (Appendix A-153)</td>
<td>Of the hospital’s attributable New Jersey Low income population, those HIV-infected patients (Appendix A-154) who had a medical visit (Appendix A-357) with a provider with prescribing privileges, (i.e. MD, NP) at least once during the measurement year.</td>
</tr>
</tbody>
</table>
This is the sandbox section of the dashboard.
Finding New Data on the Dashboard

NJ DSRIP Dashboard

Hospital Sandbox
Create your own data visualization for individual measures.

<table>
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<tr>
<th>Hospital Name</th>
<th>Measure Name</th>
<th>Stratification</th>
<th>Denominator</th>
</tr>
</thead>
</table>
| CentraState Medical Center    | CD4 T-Cell Count   | N/A            | Of the hospital's attributable New Jersey Low Income population, those HIV-infected patients who had a medical visit (Appendix A-154) with a provider with prescribing privileges, (i.e. MD, NP) at least once during the measurement year.
Finding New Data on the Dashboard

Select your hospital from the drop down

Hospital Sandbox
Create your own data visualization for individual measures.
Finding New Data on the Dashboard

Select your hospital from the drop down

- CentraState Medical Center
- Clara Maass Medical Center
- Community Medical Center
- Cooper University Health Care
- East Orange General Hospital
Finding New Data on the Dashboard

Select a measure from the drop down
Finding New Data on the Dashboard

I selected DSRIP 3: 30 Day All-Cause Readmission Following HF
Now that you’ve made your selections, you should be able to scroll down and view the chart.

### 30-Day All-Cause Readmission Following Heart Failure (HF) Hospitalization

![Graph showing 30-Day All-Cause Readmission Following Heart Failure (HF) Hospitalization](image)
Finding New Data on the Dashboard

<table>
<thead>
<tr>
<th>DSRIP ID</th>
<th>Measure Name</th>
<th>Improvement Direction</th>
<th>Numerator</th>
<th>Denominator</th>
</tr>
</thead>
<tbody>
<tr>
<td>3</td>
<td>30-Day All-Cause Readmission Following Heart Failure (HF) Hospitalization</td>
<td>Lower</td>
<td>The number of unplanned 30-day all-cause readmissions from the date of discharge having a principle diagnosis of heart failure (HF) admission (Appendix A-344).</td>
<td>Of the hospital’s attributed New Jersey Low income population, the total number of hospital discharges with an acute admission having a principal diagnosis of heart failure (HF) (Appendix A-344).</td>
</tr>
</tbody>
</table>

Goal Line (Adjustable) 100.00

Note that the improvement direction is “lower”, so we need to adjust the goal line.

30-Day All-Cause Readmission Following Heart Failure (HF) Hospitalization

![Graph showing demonstration year & quarter performance](image-url)
I adjusted the goal line to “0” which is the ITG for this measure.

Goal Line (Adjustable)
0.00

30-Day All-Cause Readmission Following Heart Failure (HF) Hospitalization
Finding New Data on the Dashboard

Notice that the y-axis automatically adjusted to best reflect the values on the chart.
Notice the DY7 Q2 (aka. Semi-annual 1) data is appearing for this measure.

30-Day All-Cause Readmission Following Heart Failure (HF) Hospitalization
Call for Presentations!

Measure Name | DSRIP #
---|---
Heart Failure Admission Rate | 45
COPD Admission Rate | 32
30-Day All-Cause Readmission Following Acute Myocardial Infarction (AMI) Hospitalization | 1
Ambulatory Care – Emergency Department Visits | 8
Percentage of Live Births Weighing Less Than 2,500 grams | 67

What to Expect

- Order of topics to be based on presentation interest.
- Presentations may range from 5-15 minutes.
- Depending on interest, presentations may be single hospital or panel.
- DSRIP Team will assist you craft and prepare presentation.
- Content can be based on reporting practices or improvement strategies.
- Share hard work, best practices, and successes with your DSRIP colleagues!
Q & A
Ask questions in two ways:

1. Submit questions through the chat.
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2. ‘Raise your hand’ to ask a question through your audio connection.
   Once we see your hand raised, we will call on you and unmute your line.
   Please introduce yourself and let us know what organization you are from.

Email njdsrip@pcgus.com with any additional questions.
Evaluation

- Please answer the following evaluation questions

1. How would you rate this activity?
   5 = Excellent; 1 = Very Poor

2. Did you feel that this webinar’s objectives were met?
   - Interpret the specifications for DSRIP 03 - 30-Day All-Cause Readmission Following Heart Failure (HF) Hospitalization
   - Learn some successful strategies to address DSRIP 03
   - State all materials due on April 30th for DSRIP program.
   - Identify new measures available in the performance dashboard
   - Discuss the opportunity to present on future webinars with your DSRIP team.

3. Please provide suggestions to improve our measure specification review.

4. Please provide suggestions on how to improve this educational session.

Prepared by Public Consulting Group