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The mission of the Department of Health is to improve health through leadership and innovation.

NJ DSRIP Learning Collaborative

New Jersey Department of Health (NJDOH)

April 9, 2015





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Learning Collaborative Session Objectives

- ✓ DSRIP Updates
- ✓ Summary of Last Meeting Topics/ Discussions
- ✓ Survey Response Review
- ✓ Hospital-Led Presentations
- ✓ Q&A





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Summary of Prior Meeting Topic/ Discussion

March 12, 2015 Meeting:

- 2015 Timeline of Activities
- Performance Measurement
- DY3 Findings and DY4 Progress Report Recommendations
- February LC survey result review
- DY4 Annual DSRIP Application Renewal
- NJ DSRIP Website Log-in Process
- Industry guest speaker presentations





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NJ DSRIP Program Updates

- ✓ DY4 DSRIP Re-Application is due April 30, 2015
 - Will include CMS requested updated information from the application approvals.
 - Suggested (not mandatory) budget template available
- ✓ DY3 Q4 Progress Report is due by April 30, 2015
 - Refer to the Guidance document for detailed expectations for this quarter
 - Suggested (not mandatory) budget template available
 - This is the last quarter in which you can complete non-quarterly Stage I (Infrastructure Development) and Stage II (Pilot, Pilot Evaluation and Full Implementation) activities. Failure to complete an activity will result in a forfeiture of funds allocated to that activity. Forfeited funds will go to the Universal Performance Pool (UPP).





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NJ DSRIP Program Updates

- ✓ Data Reporting due: **April 30, 2015**; Submit using the NJ DSRIP Standard Reporting Workbook, located under Resources/Documents for Download/Databook and Standard Reporting Workbook
 - Completed document must be submitted via the Myers and Stauffer secure FTP site
 - **DSRIP has determined that hospitals will not be required to go back and oversample due to exclusions.**
 - All Stage III outpatient measures remain due by April 2015 and were not deferred. DSRIP# 31, Controlling High Blood Pressure, is applicable for Stage III reporting.
 - There has been no communication from CMS regarding retired measure reporting or modifying the number of Stage IV reported measures at this time.
 - Webinar 9 was offered April 7, 2015 from 1- 2:30p.m. to answer any last minute questions. Slides will be available for viewing by the end of this week
 - Webinar 8 Performance Measurement and Attribution slide 7 lists the Stage IV measures that were deferred for this reporting period





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Survey Completion and Submission Improvement Needed

- ✓ ***NEW SURVEY QUESTIONS CAPTURED EACH MONTH***
- ✓ 3 hospitals sent in the wrong survey
 - Each month the survey questions change and need to be downloaded from the NJ DSRIP website <http://dsrip.nj.gov/LC/LC>
- ✓ 11 hospitals didn't fill in the meeting evaluation portion; is noted that there was an issue with the drop down boxes that was corrected once identified
 - With only 78% of the hospitals responding, an accurate representation of the meeting evaluation can't be made
- ✓ 3 hospitals didn't provide match rate information
- ✓ 14 hospitals did not submit a survey by the March 20 due date

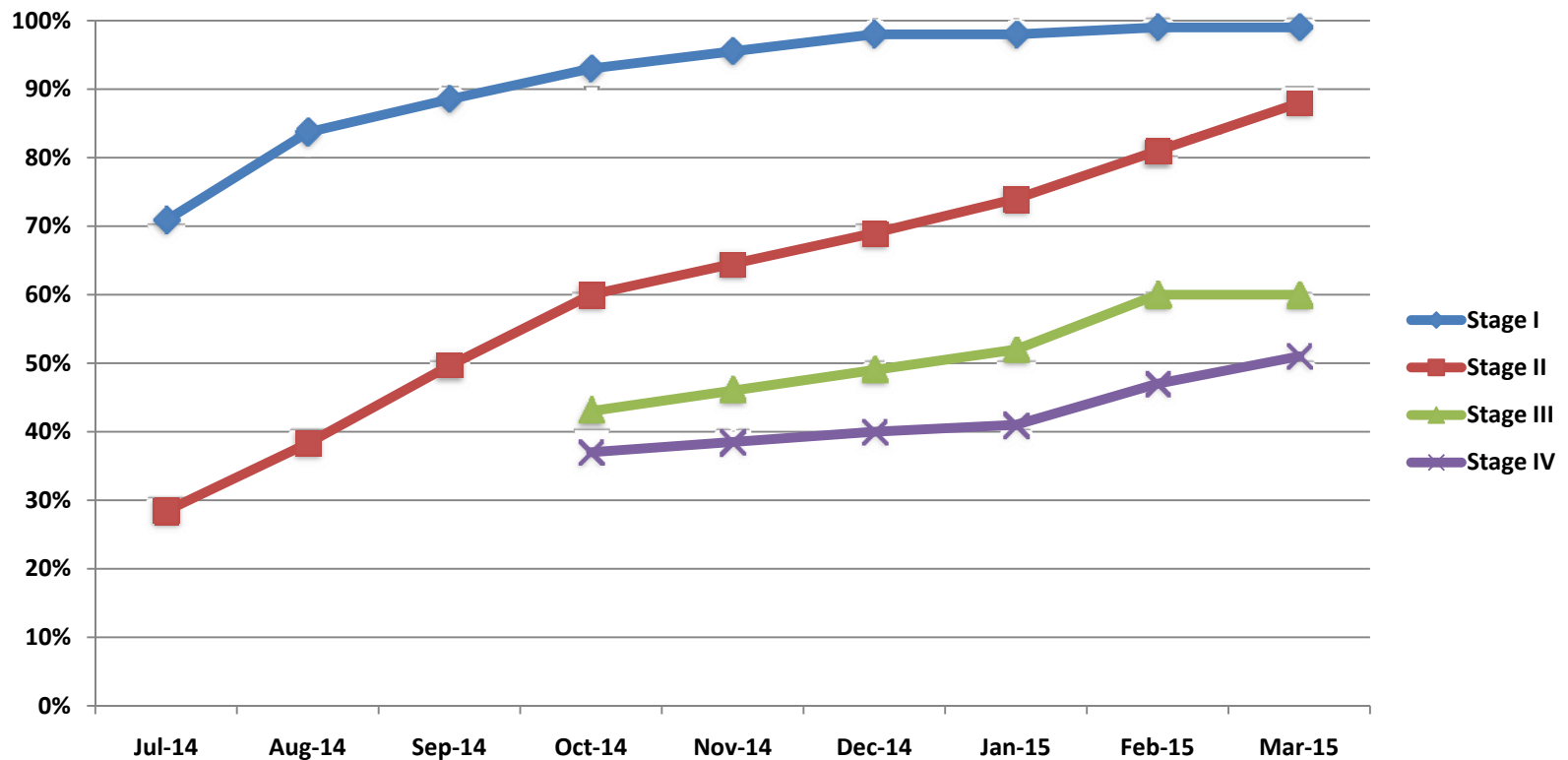
Survey completion supports your Stage II Activity 6 quarterly submission requirements as well as supporting information for the DSRIP Program Evaluation (*Planning Protocol Pg 50*)

Due to these multiple irregularities, March survey results are independently related to the total number of submissions for each question since there was such a variance of response within the survey.



Monthly Survey Review: LC aggregate over time

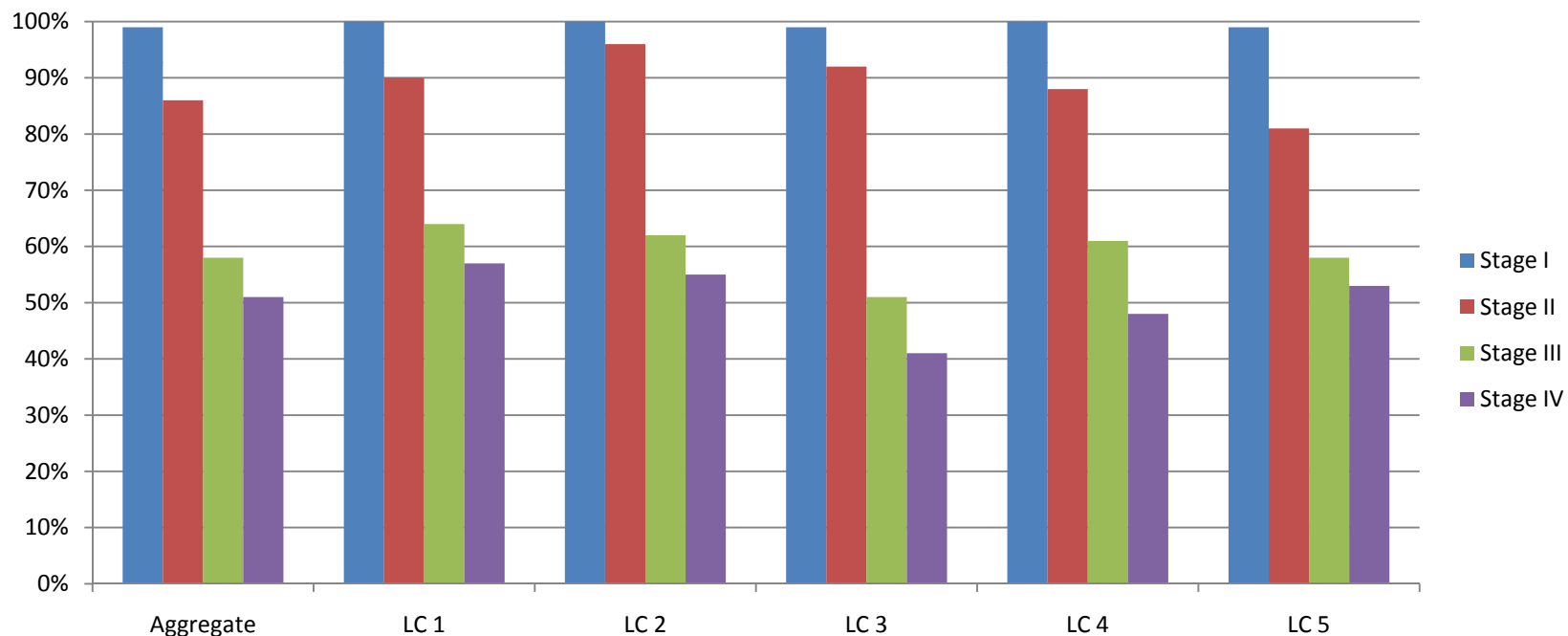
➤ Section III: Project Implementation- *Percentage of Stage Completion*





Monthly Survey Review: March 2015 comparison

➤ Section III: Project Implementation- *Percentage of Stage Completion*





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Final Patient Attribution Match Rates:

Medicaid/CHIP & Charity Care

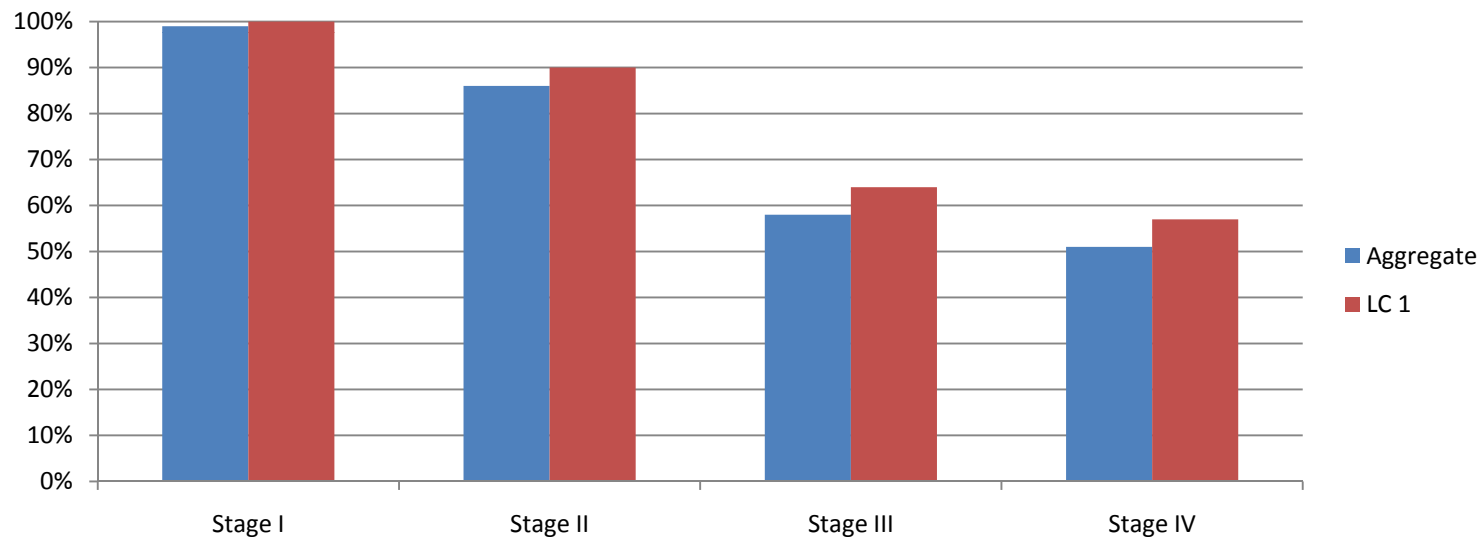
- 96% (48 hospitals) submitted final attribution match rates
- Of those hospitals that submitted a response, 83% (40 Hospitals) had 90%, or better, match rates
 - 8% (4 hospitals) had less than 50% match rates
 - Reach out to the DSRIP Team if you are still significantly below the expected 90th percentile match rate
- With the February 2015 survey, 72% (36 hospitals) attempted to match their preliminary attribution patient list with 22% (11 Hospitals) having 90%, or better, match rates





LC 1 Monthly Survey Review: Asthma/ Pneumonia

- Section III: Project Implementation- Tracking





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LC 1 Monthly Survey Review: Asthma/ Pneumonia

➤ Section IV: Observations

Implementation Challenge(s)

- “Emergency Department referral and evidence based treatment has been slow to come on board.” *Jersey Shore UMC*

Suggestions to overcome barrier(s)

- “ED Physician leadership has recently become more engaged and is working with us to implement so basic changes to discharge planning.” *Jersey Shore UMC*
- “It was also very nice to have Dr. B. Suarez and Ms. Natalie Tortorello from PACNJ/ALA, having their support is very valuable as well.” *RWJ University Hospital at Hamilton*





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LC 1 Monthly Survey Review: Asthma/ Pneumonia

➤ Section IV: Observations

Notable Success

- “122 members are enrolled. Sixth Patient & Family Asthma Support group was completed with great turnout each month.” *Jersey City Medical Center*
- “We continue with the positive feedbacks and we hope that our data will eventually show a reduction in re-admissions and increase in patient satisfaction.” *St. Joseph’s Regional Medical Center*
- “Community agencies are starting to call to have us provide education to their constituents. Our residents physicians are now classifying all asthma patients and prescribing controller medications on discharge for persistent asthmatics.” *Jersey Shore UMC*

Lesson(s) Learned/Best practice(s)

- “Earlier and more aggressive engagement with potential reporting partners.” *St. Barnabas Medical Center*
- The “Bergen Regional Medical Center presenter presented information on their project and covered how they identified target population for the Shared Decision Making project... we will investigate how we could possibly use some of their experience to enhance our program.” *RWJ University Hospital at Hamilton*





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TODAY'S LC 1 PRESENTERS ARE:

St. Barnabas Medical Center

RWJ University Hospital at Hamilton





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May 14, 2015 PRESENTERS

Jersey City Medical Center

**Jersey Shore Medical
Center**

- ❖ Please have a 10 minute presentation to speak on the following items, when called upon:
 1. Describe at a high-level what project intervention(s) your hospital is implementing
 2. Discuss your hospital's responses to the Monthly Survey
 3. Discuss your hospital's project achievement to date
 4. Offer any project observations, challenges and noted successes to date
- ❖ If a presentation is provided, please have it in a PowerPoint format, since that is optimal for our conference provider and continuity for posting to the NJ DSRIP website.





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Q & A

