



STATE OF NEW JERSEY

DEPARTMENT OF HEALTH

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)

May 14, 2015





STATE OF NEW JERSEY
DEPARTMENT OF HEALTH

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

Learning Collaborative Session Objectives

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





STATE OF NEW JERSEY

DEPARTMENT OF HEALTH

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

Summary of Prior Meeting Topic/ Discussion

April 9, 2015 Meeting:

- DY4 Annual DSRIP Application Renewal
- DY3 Q4 Progress Report
- Standard Reporting Workbook; Annual measure reporting
- March LC survey result review
- Industry guest speaker presentations



STATE OF NEW JERSEY

DEPARTMENT OF HEALTH

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

NJ DSRIP Program Updates

- NJ DSRIP hospitals submitted their deliverables by April 30, 2015
 - ✓ DY4 DSRIP Re-Application
 - ❖ 49 of the current 50 hospitals will continue to participate in DSRIP for DY4
 - ✓ DY3 Q4 Progress Report
 - ✓ April 2015 Annual Standard Reporting Workbook
 - ❖ 49 of the current 50 hospitals will continue to report performance measures
- Majority of the initial reviews have been sent to the hospitals, those requiring secondary review are in the process of re-review
- All DY3 Q3 Progress Report submissions have been approved by CMS





NJ DSRIP Program Updates

- Referencing the notification made to the Industry last week- moving forward, the Department and CMS has approved the permanent removal of the following Stage IV performance measures:

DSRIP #	Measure Name	NJ Data Source	Reporting Period
44	Gap in HIV Visits	MMIS	Annual: April
53	Inpatient Utilization – General Hospital/ Acute Care	MMIS	Annual: April
54	Intensive Care Unit Venous Thromboembolism Prophylaxis	Chart/ EHR	1 st SA = April 2 nd SA = October
56	Ischemic Vascular Disease (IVD): Use of Aspirin or Another Antithrombotic	Chart/ EHR	Annual: April
72	Pneumococcal Immunization (PPV 23)	Chart/ EHR	Annual: April
75	Preventive Care and Screening: High Blood Pressure	Chart/ EHR	Annual: April
77	Prophylactic Antibiotic Selection for Surgical Patients – Overall Rate	Chart/ EHR	Annual: April
78	Prophylactic Antibiotics Discontinued Within 24 Hours After Surgery End Time – Overall Rate	Chart/ EHR	Annual: April
82	Urinary catheter removed on Postoperative Day 1 (POD 1) or Postoperative Day 2 (POD 2) with day of surgery being day zero	Chart/ EHR	Annual: April
84	Venous Thromboembolism Patients Receiving Unfractionated Heparin with Dosages/ Platelet Count Monitoring by Protocol or Nomogram	Chart/ EHR	1 st SA = April 2 nd SA = October
85	Venous Thromboembolism Prophylaxis	Chart/ EHR	1 st SA = April 2 nd SA = October
86	Venous Thromboembolism Warfarin Therapy Discharge Instructions	Chart/ EHR	1 st SA = April 2 nd SA = October



STATE OF NEW JERSEY

DEPARTMENT OF HEALTH

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

NJ DSRIP Website Portal

- ✓ The next phase of the NJ DSRIP website portal enhancements is the Performance Measures “Acknowledgement Page.”
- ✓ Further instructions for use will be communicated before the site “goes live”.

The purpose of this screen/ page selection is:

- To present calculated results from the hospitals data;
- To give the hospitals an opportunity to acknowledge the data;
- To give the hospitals an opportunity to download a table of the results.





STATE OF NEW JERSEY
DEPARTMENT OF HEALTH

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

Initial MMIS Measurement Results Selection

GOVERNOR CHRIS CHRISTIE • LT. GOVERNOR KIM GUADAGNO
 NJ Home | Services A to Z | Departments/Agencies | FAQs

STATE OF NEW JERSEY
DEPARTMENT OF HEALTH

Logout

DOH Home	DSRIP Home	DSRIP Hospitals	Learning Collaborative	Resources	DSRIP Program Management	Contact Us
					Performance Measurement	MMIS Measure Acknowledgement

User: Jane Franklin
 Provider: General Hospital

Performance Measurement MMIS Measurement Results Selection

Hospital:

Performance Period:

Results to be viewed:

Drop Down list will include:
 - 2013

Drop Down list will include:
 - Both
 - Stage 3 Data 2013 (MMIS)
 - Stage 4 Data 2013 (MMIS)





MMIS Measurement Results Available for Download

GOVERNOR CHRIS CHRISTIE • LT. GOVERNOR KIM GUADAGNO
NJ Home | Services A to Z | Departments/Agencies | FAQs

STATE OF NEW JERSEY
DEPARTMENT OF HEALTH

Logout

The information identified below represents 2013 Stage 3 and Stage 4 MMIS calculated measure results. These results have been provided for your review. To download the tables please select the "Download Chart" button located above each individual table. Before leaving this page, please ensure you have provided acknowledgement of the results by selecting the "Submit Acknowledgement" button located on the bottom right of this page.

Stage 3 2013 Data (MMIS) Download Chart

Project Name: Extensive Patient CHF-Focused Multi-Therapeutic Model

DSRIP #	Project Code	Measure Name	Stratification	Performance Period	Num	Denom	Results	Type
17	1.1	CAC-1 Relievers for Inpatient Asthma		2013				P4R
14	31	Asthma In Younger Adults Admission		2013				P4R
14	31	Asthma In Younger Adults Admission	Age 3-11	2013				P4R
14	31	Asthma In Younger Adults Admission	Age 12-17	2013				P4R
14	31	Asthma In Younger Adults Admission	Total (Age 3-17)	2013				P4R
83	1.3	Use of Appropriate Medications for People with Asthma		2013				P4P

Stage 4 2013 Data (MMIS) Download Chart

DSRIP #	Universal Code	Measure Name	Stratification	Performance Period	Num	Denom	Results
30	17	Comprehensive Diabetes Care: LDL-C Control <100mg/dL*					
72	3	Pneumococcal Immunization [PPV 23]	Age 5-64				
72	3	Pneumococcal Immunization [PPV 23]	Age 65 and above				

We have reviewed our 2013 Stage 3 & Stage 4 MMIS calculated measure results.

Date Acknowledged	User Name	Submit Acknowledgement

Results Tables are filtered to each provider's DRP.





NJ DSRIP Program Updates

Enhanced Reporting Partners

Criteria	Community-based Reporting Partner	Enhanced Reporting Partner
Is NOT a hospital-based clinic that bills under the hospital's provider identifier with specified revenue codes 510 – 519		
Is a Medicaid-enrolled clinic, facility or physician practice group that can/ will comply with reporting outpatient data		
Has/ will have a Data Use Agreement, or other formal data sharing arrangement in place by	October 2014	July 2015
Employment relationship or ownership with the hospital/ hospital system	May have an existing relationship	May Not have an existing relationship
Eligible for an incentive adjustment from 10% to 8% Gap Reduction	If patient volume \geq 1000 NJ DSRIP Low Income	

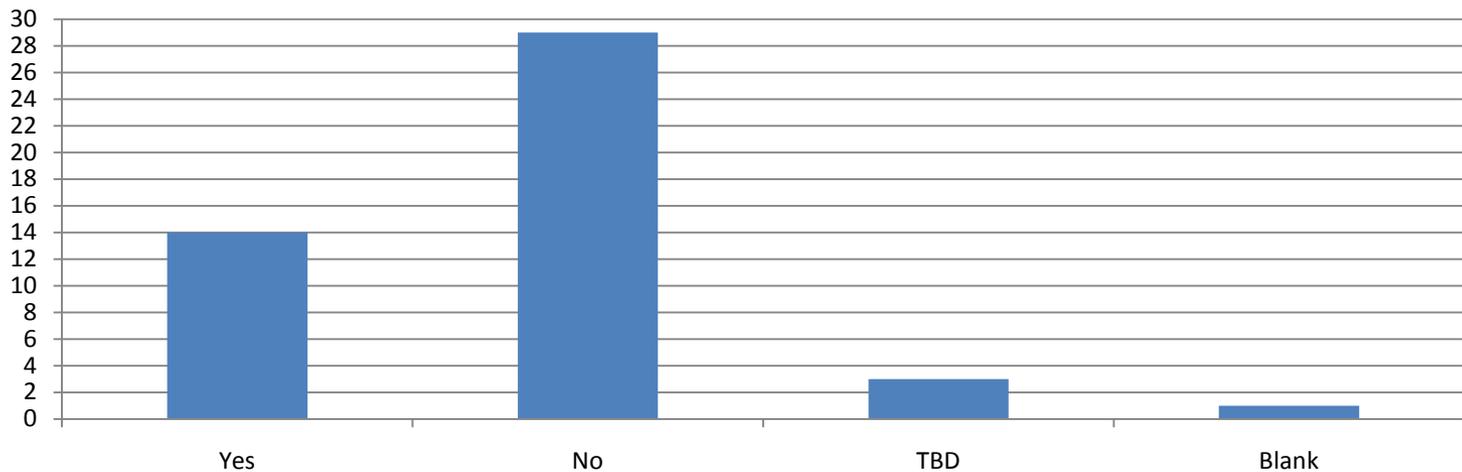
- Hospitals will be expected to submit information regarding selecting enhanced reporting entities **by July 1, 2015**
- Please refer to Webinar 6: Project Partners and Attribution and Webinar 9: Performance Measurement



Survey Review: April 2015 Enhanced Reporting Partners

➤ Section II: Project Implementation- *Support*

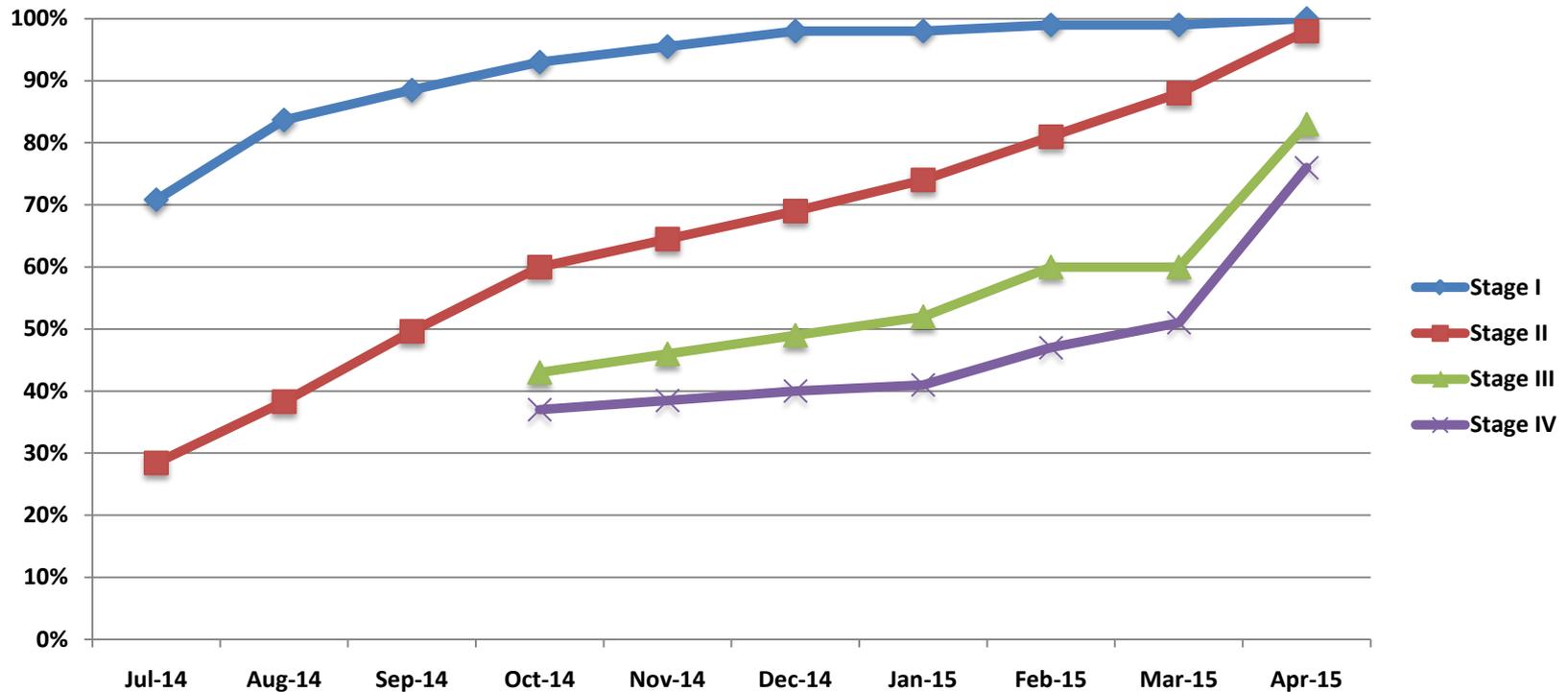
- Of the 43 hospitals that submitted a response, 32% are intending to add enhanced reporting partners to their program by July 1, 2015.
- This is not a requirement for continued participation in the NJ DSRIP program, but a desired enhancement for the program overall.





Monthly Survey Review: LC Aggregate Over Time

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

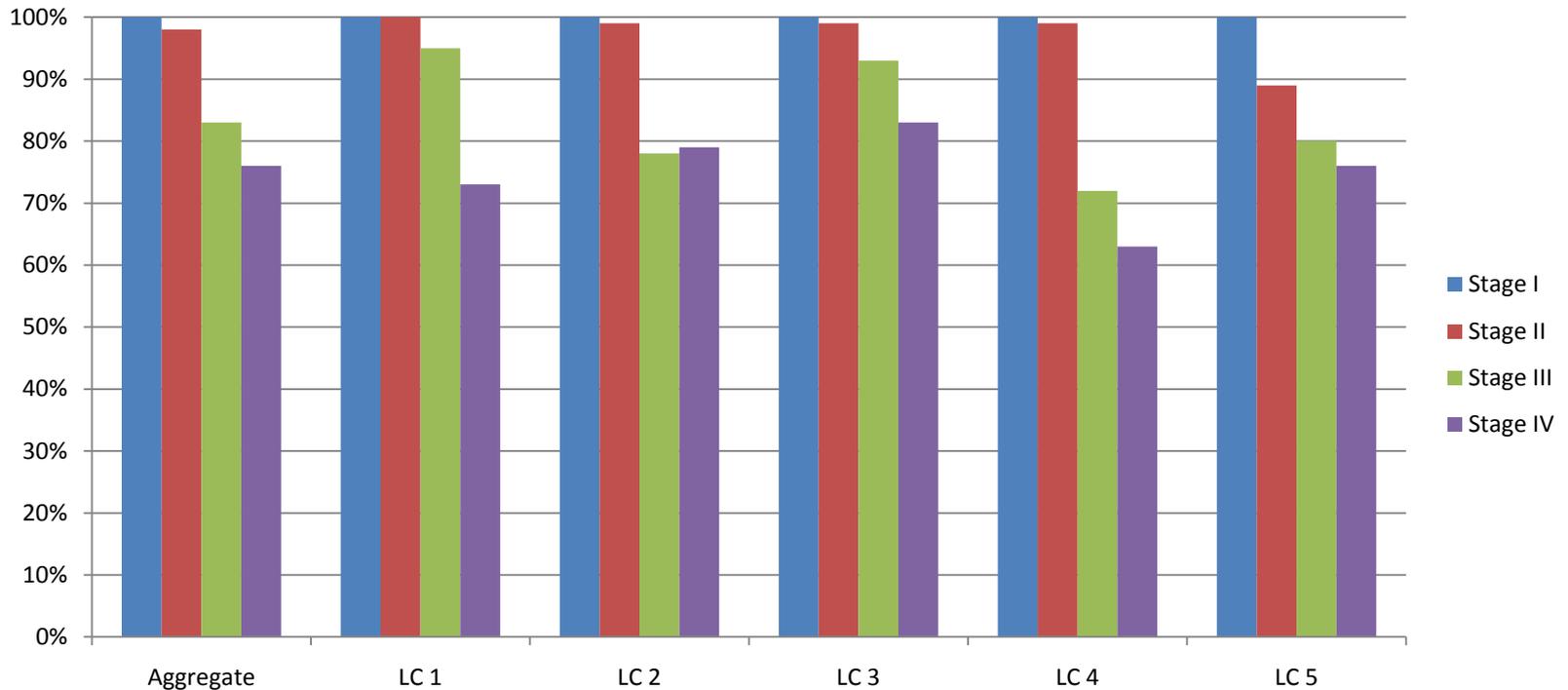


*NR- 1 hospital



Monthly Survey Review: April 2015 Comparison

➤ Section III: Project Implementation- *Tracking*



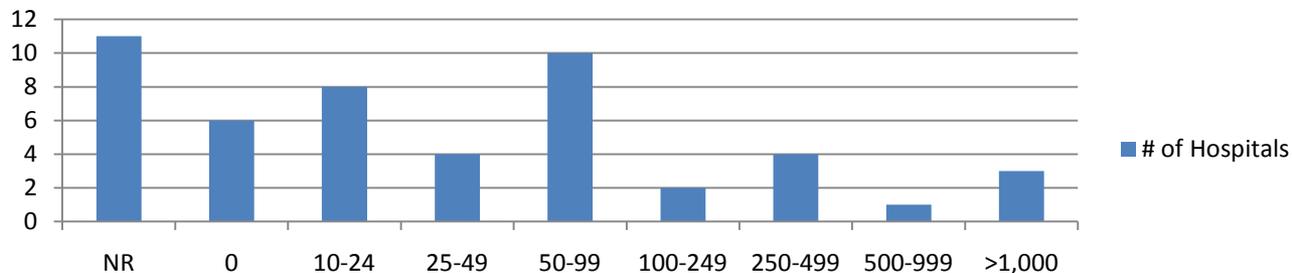
*NR- 1 hospital



Survey Review: April 2015 Program Enrollment

➤ Section IV: Project Implementation- *Observations*

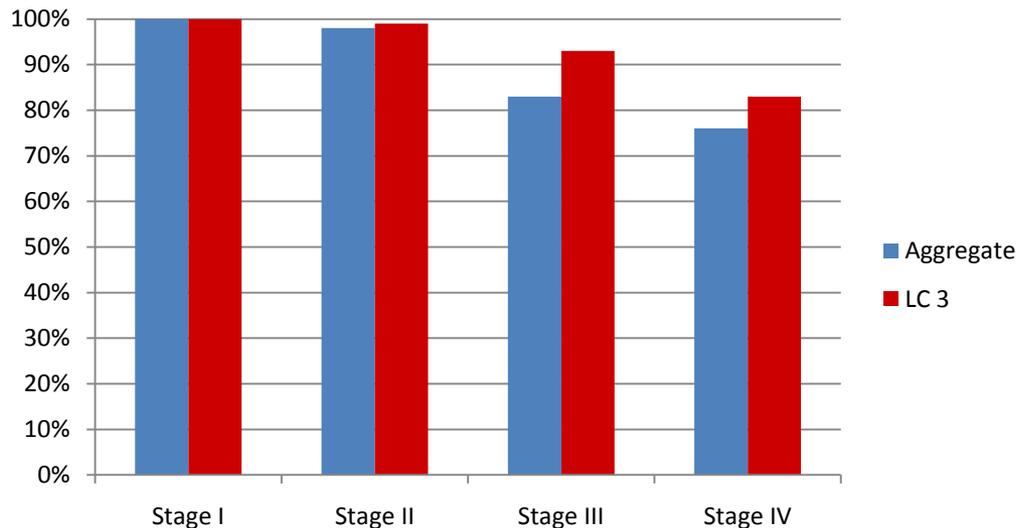
- This is a monthly snap-shot from the hospitals to their current attributed enrollment of Low Income population patients in their NJ DSRIP project program.
 - Enrollment was captured as a range along the X axis. Number of hospitals per range on the Y axis.
 - “NR” were from completed surveys where the hospital indicated it was not applicable at this time or the cell was left blank.
 - Zero was captured where a zero was entered into the survey.
- The intent will be to report the most recent 3 months of information at a time . March 2015 was the first time this information was requested on the LC survey.





LC 3 Monthly Survey Review: Care Transitions Intervention Model

- Section III: Project Implementation- Tracking



Please be sure to reflect the correct completion percentage on your surveys.





STATE OF NEW JERSEY

DEPARTMENT OF HEALTH

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

LC 3 Monthly Survey Review: Care Transitions Intervention Model

- Section IV: Observations

Implementation Challenge(s)

- “The reporting tool used to actively identify DSRIP patients in house with CHF required several iterations as it at first missed identifying patients and then over identified patients.” *Hackensack UMC*
- “We continue to face challenges related to maintaining telephone contact with patients after hospital discharge. Challenges also remain in the area of appropriate in-hospital referrals.” *Our Lady of Lourdes Medical Center*

Suggestions to Overcome Barrier(s)

- “Yes, the DSRIP team met with the IT department and utilized our EHR to show IT how they identify the patients manually. From there IT was able to appropriately build the report.” *Hackensack UMC*
- “There have been some improvements in maintaining contact due to DSRIP coaches diligently confirming contact phone numbers given on admission. More success is noted when the coaches are able to initially meet the pt. while in the hospital. In-hospital referrals have improved slightly through the collaboration between the coach and nursing and case management.” *Our Lady of Lourdes Medical Center*





STATE OF NEW JERSEY

DEPARTMENT OF HEALTH

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

LC 3 Monthly Survey Review: Care Transitions Intervention Model

- Section IV: Observations

Notable Success

- “Popularity of the Smart hearts community high risk screening for women. We had offered initially with 2 people registered and have since offered 3 more times with a waiting list. This is a screening offered free to the community for early detection for cardiac risk and setting up resources as needed. Additional dates have been scheduled.” *Clara Maass Medical Center*
- “Individual patient success stories, Physicians calling to enroll their patients in DSRIP.” *Englewood Hospital & Medical Center*

Lesson(s) Learned/Best Practice(s)

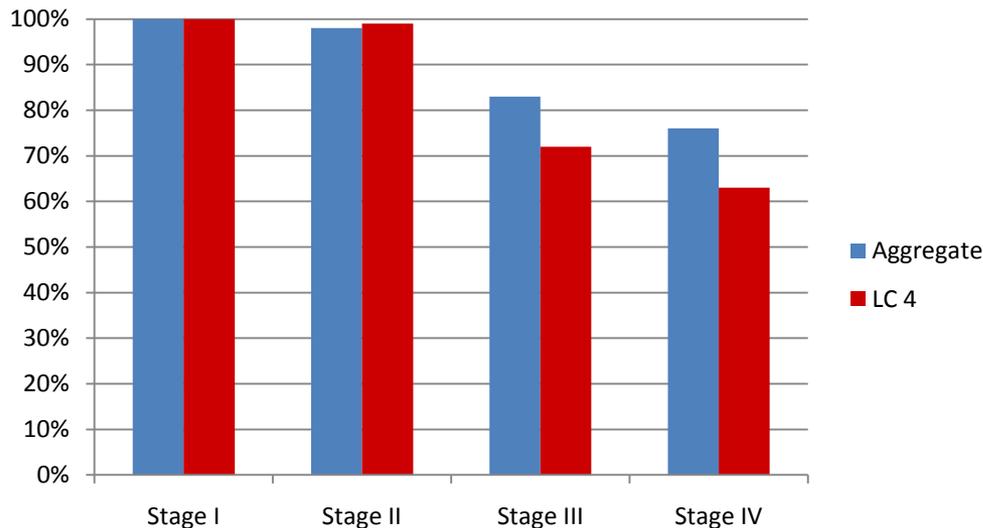
- “Individualized medication reconciliation conducted with patient and prescription bottles yields valuable information and has averted significant medication errors.” *Lourdes Medical Center Burlington County*
- “Coordination of home visits with Home Health Agencies consulted to DSRIP patients optimizes the amount of follow-up a patient receives and reduces duplication of services when the Home Health Nurse and the APN visits a patient on the same day.” *East Orange General Hospital*





LC 4 Monthly Survey Review: Congestive Heart Failure Projects

- Section III: Project Implementation- Tracking



Please be sure to reflect the correct completion percentage on your surveys.





STATE OF NEW JERSEY

DEPARTMENT OF HEALTH

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

LC 4 Monthly Survey Review: Congestive Heart Failure Projects

- Section IV: Observations

Implementation Challenge(s)

- “Patient engagement is an ongoing challenge. While on the inpatient unit, a patient may be willing to say they will attend a Transitional Care Center appointment, but then not keep the appointment.” *Newark Beth Israel Medical Center*
- “As previously described, recruiting the right resources into the team has been challenging, but successful to date.” *University Hospital*

Suggestions to Overcome Barrier(s)

- “We have addressed this by developing other engagement options, such as expanded Lifestyle classes. **We would, however, welcome any suggestions from the Learning Collaborative.**” *Newark Beth Israel Medical Center*





STATE OF NEW JERSEY

DEPARTMENT OF HEALTH

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

LC 4 Monthly Survey Review: Congestive Heart Failure Projects

- Section IV: Observations

Notable Success

- “Patient satisfaction continues to remain high.” *Hoboken University Medical Center, Christ Hospital, Bayonne Medical Center*
- “The use of the DocView mobile application to monitor patients remotely.” *Overlook Medical Center*

Lesson(s) Learned/Best Practice(s)

- “We have learned that active, proactive communication from our team to our patients in anticipation of their concerns goes a long way to setting expectations and improving understanding of our plan for the patients' care.” *University Hospital*
- “Utilizing our retail pharmacy patients are able to get medications free of charge.” *Bayonne Medical Center*





STATE OF NEW JERSEY

DEPARTMENT OF HEALTH

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

TODAY'S LC 3 & 4 PRESENTERS ARE:

Overlook Hospital

Newton Memorial Hospital

Chilton Memorial Hospital





STATE OF NEW JERSEY

DEPARTMENT OF HEALTH

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

June 11, 2015 is ON-SITE AT THE NJHA 2:00 p.m. to 4:00 p.m.

- ❖ Presenters will be shared with the Industry once they have been confirmed
- ❖ Remember to have your **two** hospital representatives attend and sign the attendance sheets. The post survey will be available on-line only.
 1. One hospital representative that is either the DSRIP Champion or DSRIP Project Manager
 2. Another hospital representative or a DSRIP stakeholder (such as project partner)
 - ✓ A single representative from a hospital system (i.e. multiple hospitals) is allowed to attend in addition to the two required LC representatives **OR**
 - ✓ A system representative may represent each DSRIP hospital in their system along with another hospital representative, as long as one of these individuals is a DSRIP Champion or DSRIP Project Manager





STATE OF NEW JERSEY

DEPARTMENT OF HEALTH

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

Q & A



New survey for May

Find it on the NJ DSRIP web site

<https://dsrip.nj.gov/LC/LC>

