



FY 2020 Quarterly Data Forums

September 20, 2019

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Health Services Cost
Review Commission



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Agenda

- ▶ **Background**
- ▶ **Announcements**
 - ▶ Update on Denials Data Collection and Annual Cost Report
 - ▶ Data Submission Regulation and Processes
 - ▶ Grouper Transition Update
 - ▶ Quality Update
- ▶ **Data Processing Vendor Transition Update**
- ▶ **Date Issues for Discussion**
 - ▶ Homeless zip code
 - ▶ SNF/LTC Provider Definitions
- ▶ **Next Steps & Topics for Next Meeting**
 - ▶ Volunteers for upcoming workgroups

Background



Why, When, Where

▶ **WHY?**

- ▶ Open and ongoing communication between HSCRC & industry
- ▶ Forum to ask questions about data
- ▶ Sharing of best practices

▶ **WHEN?**

- ▶ 10:00 am – 12:00 pm
- ▶ Friday, September 20, 2019
- ▶ Friday, December 13, 2019
- ▶ Friday, March 13, 2020
- ▶ Friday, June 12, 2020

▶ **WHERE?**

- ▶ HSCRC Large Conference Room and via Webinar

Announcements

- Data Submission Regulations and Processes
- Grouper Transition Update
- Financial Data Update
- Quality Data Collection Update



Data Submission Regulations (COMAR)

Collection of Outpatient Data

- ▶ **Sec 10.37.04.01:** Effective January 1, 2014, each hospital under the jurisdiction of the Health Services Cost Review Commission (Commission) shall submit the data elements as published in the Maryland Register and on the Commission's website (<http://www.hsrc.maryland.gov>) to the Commission within 15 days following the last day of the month during which the patient was discharged or died. The format for submission shall also be as published in the Maryland Register and on the Commission's website.

Collection of Inpatient Data

- ▶ **Sec. 10.37.06.01:** Beginning on January 1, 2014, each hospital under the jurisdiction of the Health Services Cost Review Commission shall submit to the Commission:
 - ▶ (1) The data elements required by this chapter within 15 days after the last day of the month when the patient was discharged or died; and
 - ▶ (2) The reconciliation of inpatient data between the discharge data and the financial data filed with the Commission.

Data Submission Regulations (COMAR)

- ▶ **Sec 10.37.01.03.R.(1):** A **hospital** under the jurisdiction of the Commission **which does not file any report** under the Enabling Act of the Commission, Health-General Article, Title 19, Subtitle 2, Annotated Code of Maryland, or under the regulations of the Commission, **is liable for a civil penalty of up to \$1,000 per day for each day** the filing of the report is delayed unless an extension is granted.
- ▶ **Sec 10.37.01.03.R.(4):** **Any required report submitted to the Commission which is substantially incomplete or inaccurate may not be considered timely filed.**

Data Submission Process

- ▶ Submit data by due date according to Production Schedule posted on the website
- ▶ If a hospital cannot submit data by due date because:
 - ▶ EHR/Conversion Issues
 - ▶ Data Quality Issues (Errors above 10% threshold, missing data)
- ▶ Submit a formal request for extension/skip submission **before** the due date:
 - ▶ For monthly preliminary data, hospitals can elect to skip the monthly submission or submit the data with errors
 - ▶ For quarterly final data, hospitals must submit a request for extension

When Things Don't Go As Planned....

- ▶ All requests for extensions, skipped submissions or submissions with errors must be approved by the Commission staff
- ▶ To request an extension
 - ▶ Submit a formal request to Oscar Ibarra or through DAVE (coming soon!)
 - ▶ Indicate data type (IP/OP/PSYC) and Timeframe (FYQ Prelim/Final)
 - ▶ Describe reason
 - ▶ Include magnitude of problem (\$/# cases impacted)
 - ▶ Indicate when the data will be submitted

Data Re-submission Process

- ▶ If **HSCRC** initiates a re-submission of a closed quarter:
 - ▶ HSCRC will send a formal letter (or via DAVE) requesting a re-submission
 - ▶ Processing fees are waived
 - ▶ No fines
- ▶ If a **hospital** initiates a re-submission of a closed quarter:
 - ▶ Submit a formal request for resubmission. If HSCRC accepts the request for resubmission:
 - ▶ Processing fees from hMetrix apply
 - ▶ Between \$80-98/per hour, per file, per quarter.
Contact hscrcteam@hmetrix.com for more information
 - ▶ Potential fines: of up to \$1,000 per day
 - ▶ For each quarter and data type, calculated from the due date to submission date
- ▶ Depending on the data issue, methodologies dependent on case mix data may not be updated to include the new data

Grouper Transition: MHAC, RRIP, QBR

Rate Year	APR/PPC Version	Timeline	Implementation Date
RY2021:	APR/PPC: Version 36	<u>Base Year:</u> MHAC: FY 2017-2018 QBR/Mortality: FY 2018 RRIP: CY2016 <u>Performance Year:</u> All Programs: CY2019	Base: Available on CRS Portal Performance: Ongoing through CY 2019 data processing

Grouper Transition: Methodology Programs

Rate Year	APR/PPC/EAPG Version	Timeline	Implementation Date
RY2021	Temporary Market Shift		
	(<u>January – June</u>) APR: Version 35 EAPG: Version 3.12	<u>Base Period:</u> January – June 2018 <u>Performance Period:</u> January – June 2019	January 2020
	Full Year Market Shift		
	(<u>January – December</u>) APR: Version 36 EAPG: Version 3.14	<u>Base Period:</u> January – December 2018 <u>Performance Period:</u> January – December 2019	July 2020

Grouper Transition: Case Mix Weights

Rate Year	APR/PPC/EAPG Version	Timeline	Implementation Date
RY2021	Weights Used in Temporary Market Shift		
	(January – June) IP weights: Version 35 OP weights: Version 3.12	Using Data from: CY 2016 applied to CY 2019	January 2020
	Weights Used in Full Year Market Shift		
	(January – December) IP weights: Version 36 OP weights: Version 3.14	Using Data from: CY 2018 applied to CY 2019	July 2020

Financial Data Update

- ▶ **New Denied Admission Instructions**
- ▶ **Annual Cost Report Update**

Quality Update

- ▶ Sexual Orientation & Gender Identity (SOGI) Survey
- ▶ Social Determinants of Health (SDoH) Memo
- ▶ AMA Coding Issue

Data Processing Vendor Transition Update



Vendor Role Changes

- ▶ **The Saint Paul Group:** Contractor for the Repository, the centralized home for all HSCRC hospital data. The Repository is how hospitals submit data to the HSCRC. This is the current process and remains unchanged.
- ▶ **hMetrix:** Contractor for data processing support. hMetrix will begin processing data in November.

Data Moratorium

- ▶ Implemented during the transition period
- ▶ Ending October 31,2019
- ▶ Requestors can choose where to get HSCRC data:
 - ▶ hMetrix
 - ▶ CRISP
 - ▶ St. Paul Group (for non-confidential data)
- ▶ Requests still need to be approved by the HSCRC before data is released.

About hMetrix & Burton Policy

- ▶ Skilled Multi-disciplinary Team
- ▶ State-of-the-art Technology
- ▶ Mature Processes
- ▶ Partnership Model
 - ▶ Communication
 - ▶ Transparency
 - ▶ Trust



Points of Contact

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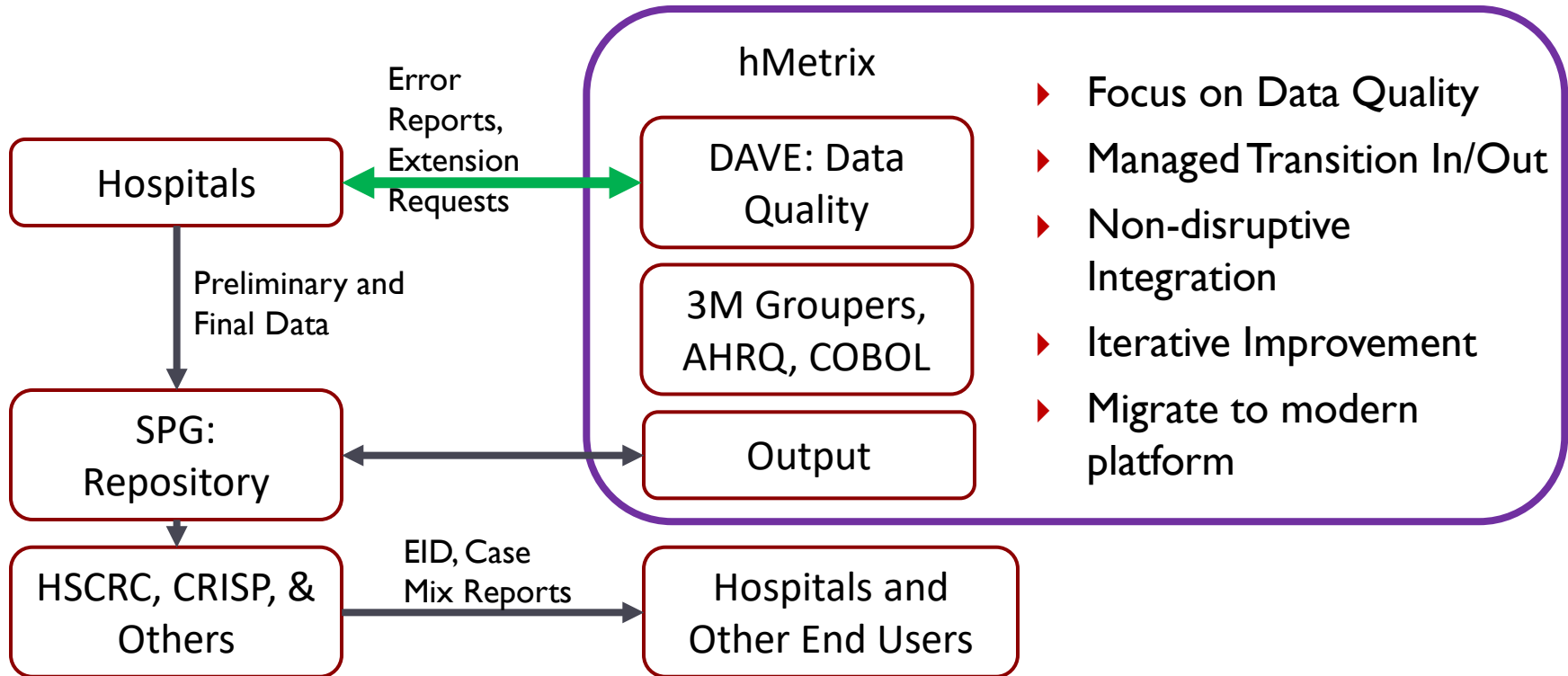


Transition to hMetrix:

Goal of Minimum Disruption

- ▶ **Transition-In (June – October '19)**
 - ▶ **Follow current processes for:**
 - ▶ Notifications/reminders for (re)submissions
 - ▶ Data (re)submission through repository
 - ▶ Error reports sent via email
 - ▶ **New:**
 - ▶ Training to use DAVE to view and download Error reports
 - ▶ No changes in staff allocation except for training DAVE (max. 4 hours)
 - ▶ No new data requests – moratorium till end of October 2019
- ▶ **Post Transition-In (Nov '19 onwards)**
 - ▶ **Follow current process:** Data Submission and Resubmission through repository
 - ▶ **New:** Automated Notifications and Reminders from DAVE
 - ▶ **New:** Error reports and submission status in DAVE

Transition to hMetric: *Goal of Minimum Disruption*



- ▶ Focus on Data Quality
- ▶ Managed Transition In/Out
- ▶ Non-disruptive Integration
- ▶ Iterative Improvement
- ▶ Migrate to modern platform

Data Accuracy Verification Engine (DAVE)

- ▶ Performs data quality checks and saves error report
- ▶ Hospitals can:
 - ▶ Review defects
 - ▶ View error reports
 - ▶ Request data submission extensions
- ▶ HSCRC can:
 - ▶ Review defects
 - ▶ View statewide submission trends
 - ▶ View hospital or statewide error reports
 - ▶ Manage data submission extensions
- ▶ Manage decision to proceed without a hospital's data in a specific update
- ▶ DAVE communicates via
 - ▶ email
 - ▶ web-based review of real-time status

Data Accuracy Verification Engine (DAVE)

- ▶ **Phased approach for roll out of DAVE**
 - ▶ Phase 1 (Nov – Dec) – DAVE to be used for viewing current error reports and managing data submission extensions
 - ▶ Phase 2 (Q3 Contract Year 1) – Additional data quality checks to be added to DAVE
 - ▶ Phase 3 - TBD
- ▶ **Set up training environment for DAVE**
 - ▶ Hands-on training during each phase
 - ▶ Mary Pohl will assist with the training

DAVE Training

- ▶ **Webinar 10AM – 12 Noon**
 - ▶ 10/9/2019
 - ▶ 10/17/2019
 - ▶ 10/25/2019
 - ▶ 10/29/2019
- ▶ **User credentialing worksheet will be emailed out to current case mix liaison primary point(s) of contact**

Data Issues Discussion



Reporting Homeless Zip Code in Case Mix

- ▶ Recently (CY 2018) zip code 88888 was made a valid zip code
- ▶ Zip code 88888 is now North Pole, D.C.
 - ▶ No population
- ▶ Internal hospital mapping of zip codes may result in homeless patients being identified as non-MD residents
- ▶ HSCRC maps zip codes to residency during processing and identifies the homeless patients as MD residents
- ▶ This is causing a variance in the in-state reconciliation with financial data
- ▶ Solution: HSCRC can post internal zip code list on website

SNF/LTC Provider Definitions

- ▶ In response to hospital suggestions, the HSCRC revised the Source of Admission and Patient Disposition Codes to align with CMS UB codes in FY 2018.
 - ▶ Reduce burden on hospitals mapping UB to HSCRC codes internally
 - ▶ Improve data consistency and coding
- ▶ In April 2017, the HSCRC convened a workgroup to align the HSCRC Source of Admission and Patient Disposition Codes
 - ▶ Hospitals and EHR vendors were represented
 - ▶ 2 meetings

SNF/LTC Provider Definitions

Source of Admission

Old HSCRC Code	Old HSCRC Definition	CMS UB Code	CMS UB Definition
44	ADMIT FROM A CHRONIC HOSPITAL	05	Transfer from a Skilled Nursing Facility (SNF) or Intermediate Care Facility (ICF): The patient was admitted to this facility as a transfer from a SNF or ICF where he or she was a resident.
45	ADMIT FROM OTHER FACILITY AT WHICH SUBACUTE SERVICES WERE PROVIDED		
50	ADMIT FROM LONG TERM CARE FACILITY:A FACILITY THAT PROVIDES ACUTE INPATIENT CARE WITH AN AVERAGE LENGTH OF STAY OF 25 DAYS OR GREATER		
51	ADMIT FROM A SKILLED NURSING FACILITY:A MEDICARE-CERTIFIED NURSING FACILITY IN ANTICIPATION OF SKILLED CARE		

SNF/LTC Provider Definitions

Patient Disposition

Old HSCRC Code	Old HSCRC Definition	CMS UB Code	CMS UB Definition
43	TO A CHRONIC HOSPITAL	63	Discharged/Transferred to a Medicare Certified Long Term Care Hospital (LTCH)
44	TO A LONG TERM CARE FACILITY:A FACILITY THAT PROVIDES ACUTE INPATIENT CARE WITH AN AVERAGE LENGTH OF STAY OF 25 DAYS OR GREATER	63	
45	TO A SUBACUTE FACILITY:A FACILITY THAT PROVIDES MORE INTENSIVE CARE THAN TRADITIONAL NURSING FACILITY BUT LESS THAN ACUTE CARE.	03	Discharged/Transferred to a Skilled Nursing Facility (SNF) with Medicare Certification in Anticipation of Skilled Care.
51	TO A SKILLED NURSING HOME FACILITY (SNF): A MEDICARE-CERTIFIED NURSING FACILITY IN ANTICIPATION OF SKILLED CARE	03	

SNF/LTC Provider Definitions

- ▶ **Issue: Definition of LTC/SNF is different for source of admission and patient disposition**
 - ▶ Source of admission meaning related to long term residency
 - ▶ Patient disposition meaning is related to level of care
- ▶ **Adding to confusion:**
 - ▶ In provider list, a facility can be designated as LTC & SNF (same Medicare provider number)
 - ▶ If a new provider is not on the list, what code should be used?
 - ▶ 660004: Other MD Skilled Nursing Facility (non-Medicare)
 - ▶ 660005: Other MD Long Term Care Facility (non-Medicare)
- ▶ **How are hospitals distinguishing between LTC & SNF?**

Future Case-Mix Working Groups

- Data Quality Checks and Error Threshold
- Revisiting Source of Admission and Patient Disposition Codes



Future Working Groups

- ▶ **Data Quality Checks and Error Thresholds**
 - ▶ Purpose: To discuss the current edit checks being implemented, propose additional checks, and revise error thresholds
 - ▶ Duration: 2-3 meetings (in-person is preferred)
 - ▶ Membership: 6-7 members
 - ▶ Timing: Winter 2019 – Spring 2020
- ▶ **Data Submission Requirements Review Workgroup**
 - ▶ Purpose: To review and edit the final FY DSR for accuracy and consistency
 - ▶ Duration: 1-2 meetings (conference calls), annually
 - ▶ Membership: 4-5 members
 - ▶ Timing: March – May 2020

Email Oscar.Ibarra@Maryland.gov to volunteer for these sub-groups.

Future Working Groups, Cont.

- ▶ **Revisit Source of Admission/Patient Disposition Codes**
 - ▶ Purpose: To discuss the current codes and potentially refine
 - ▶ Duration: 3-4 meetings (in-person is preferred)
 - ▶ Membership: 6-7 members
 - ▶ Timing: TBD

Email Oscar.Ibarra@Maryland.gov to volunteer for these sub-groups.