Completing the IP Template & Supplemental Workbook

11 April 2019

CRISP

hMetrix

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Webinar Recordings

All webinars will be recorded and available for download at

https://hscrc.maryland.gov/Pages/CareRedesign.aspx

Questions can be directed to

Care.Redesign@crisphealth.org

Agenda

1. Implementation Protocol Track Template
2. Supplemental Excel workbook
3. Discussion / Q & A

Implementation Protocol Track Template

Overview of Care Redesign Administrative Structure

- Care redesign program (CRP) Participation Agreement is the governing document for all care redesign tracks

- PA refers to track implementation protocols

- "Track template" is the blank form—the hospital's completed form becomes the "implementation protocol" reviewed by HSCRC/CMS

- Track templates outline basic program parameters, hospitals have flexibility to propose program design

- Hospitals starting in July will need to resubmit implementation protocol for January 2020, and then annually thereafter

Additional Administrative Requirements for Hospitals

- Governed by CMS CRP Calendar—on HSCRC care redesign webpage

- Submission of care partners for federal vetting of eligibility to participate in Medicare
  - Annual master list, with opportunity to submit additional names quarterly
  - Vetting is not specific to a given care redesign track or to a particular hospital

- Quarterly submission of "certified care partners" who've signed on to participate in the track
  - Certifying individual providers makes them eligible to be considered for MACRA bonuses—certify them even if you're not paying incentives
  - If you're not paying incentives you don't need to certify facilities

- Quarterly CRP reports

Supplemental Excel Workbook

- Accommodates a large degree of potential variation in hospital program design

- Workbook is where hospitals indicate:
  - Selected clinical episode categories,
  - Care partner provider types,
  - Care redesign interventions for each episode category,
  - Condition(s) of payment care partners must meet for each intervention to be eligible for incentive payments, and
  - Incentive distribution plan for each care partner provider type

ECIP Timeline

- **Wednesday, May 1ˢᵗ** - Submit implementation protocol and supplemental Excel workbook to CRISP

- **Friday, June 14ᵗʰ** - Submit certified care partner lists to CRISP for Q3 2019
  - Individual providers: Excel file with first name, last name, and individual NPI
  - Facility providers: Excel file with the following information at the individual facility (not corporate) level:
    - Facility legal entity name
    - Facility D/B/A name
    - Individual facility TIN
    - CMS Certification Number (CCN)
    - Individual facility address

- **Monday, July 1ˢᵗ** - Program starts for new participants

Supplemental Workbook

Workbook Functionality

The workbook uses macros to make data entry more efficient; be sure to enable macros when prompted. If macros are permanently disabled at your facility for security reasons, email care.redesign@crisphealth.org for support.

Be sure to indicate on this first page whether you intend to share incentive payments

Use the navigation buttons provided to make your way through the workbook to ensure proper collection of responses.

Episode Care Improvement Program (ECIP)
Episode Selection and Care Partner Engagement Workbook

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Be sure to 'Enable Macros' when prompted on opening this workbook, or it will not function correctly.

This Episode Selection and Care Partner Engagement Workbook is intended to accompany the ECIP Implementation Protocol Track Template to facilitate faster, easier documentation of your selected clinical episode categories, care partners, incentive distribution plan, and allowed care redesign interventions. If you have any questions or need help during the application process, please email care.redesign@crisphealth.org

Please answer the following question before beginning:

Is your hospital planning on sharing incentive payments with care partners for model year 1?

Yes

Start   Use the buttons like the one at left throughout the workbook to navigate through the application.

Episode & Care Partner Selection (No Incentives)

Use navigation buttons to continue after making selections

Episode Care Improvement Program (ECIP)

Use the buttons at right to navigate through the workbook

| Back | Continue |

Step 1: Clinical Episode Category and Care Partner Provider Type Selection (No Incentive Distribution)

Please indicate which clinical episode category or categories your hospital will participate in (column 'Participation'), and then select the provider types you will engage as care partners from the available categories. Use the 'Select All' and 'Clear Selection' helper buttons to quickly add or remove selections. After you've made your selections, hit 'Continue.'

Clinical Episode Group	Clinical Episode Category	Participation	Care Partner Engagement										
			Physician	Nurse	PA	PT	SNF	HHA	LTCH	Hospice	IRF		
Cardiology	Acute myocardial infarction (AMI)	X	X	X								Select all care partner types	Clear selection
Cardiology	Cardiac arrhythmia											Select all care partner types	Clear selection
Cardiology	Cardiac valve											Select all care partner types	Clear selection
Cardiology	Congestive heart failure (CHF)											Select all care partner types	Clear selection
Cardiology	Coronary artery bypass graft surgery (CABG)											Select all care partner types	Clear selection
Cardiology	Pacemaker											Select all care partner types	Clear selection
Cardiology	Percutaneous coronary intervention (PCI)											Select all care partner types	Clear selection
Cardiology	Stroke											Select all care partner types	Clear selection
General	Cellulitis											Select all care partner types	Clear selection
General	Chronic obstructive pulmonary disease (COPD), bronchitis/asthma											Select all care partner types	Clear selection
General	Renal failure											Select all care partner types	Clear selection

Use the drop-downs to indicate which clinical episode categories you intend to participate in, and for each, which care partners you intend to engage through care redesign interventions

Quickly clear or select all with buttons at right

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Episode & Care Partner Selection (With Incentives)

Episode Care Improvement Program (ECIP)

Use the buttons at right to navigate through the workbook

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Step 1: Clinical Episode Category and Care Partner Provider Type Selection (Incentive Distribution)

Please indicate which clinical episode categories your hospital will participate in (column 'Participation') and provide the distribution of incentive payments you will make between the available care partners types. If you are not planning on engaging a particular care partner type, or not distributing incentives to that care partner type, just leave the cell empty. The 'Hospital Retained Incentive' column will update automatically to reflect the remainin proportion of potential incentive payments retained by the hospital. Make sure that the distribution for each clinical episode category totals 100%, or you will be asked to correct your distributions before continuing. After you've made your elections, hit 'Continue.'

Clinical Episode Group	Clinical Episode Category	Participation	Hospital Retained Incentive	Care Partner Incentive Distribution									Valid?
				Physician	Nurse	PA	PT	SNF	HHA	LTCH	Hospice	IRF	
Cardiology	Acute myocardial infarction (AMI)	X	0%	50%				50%					Yes
Cardiology	Cardiac arrhythmia		100%										
Cardiology	Cardiac valve		100%										
Cardiology	Congestive heart failure (CHF)		100%										
Cardiology	Coronary artery bypass graft surgery (CABG)		100%										
Cardiology	Pacemaker		100%										
Cardiology	Percutaneous coronary intervention (PCI)		100%										
Cardiology	Stroke		100%										
General	Cellulitis		100%										
General	Chronic obstructive pulmonary disease (COPD), bronchitis/asthma		100%										
General	Renal failure		100%										
General	Sepsis		100%										

Check to ensure each row is valid (totals 100%) before continuing

The proportion of incentive payments retained by the hospital will update automatically as care partner distributions are filled in

For each clinical episode category, enter the proportion of incentive payments that will be allocated to each care partner type. Enter zero for engaged care partners who will not receive incentive payments

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Entering General Intervention Descriptions

If you don't have any interventions that apply to all episodes, you can 'Skip' this page. If you don't have any episode-specific interventions, you may hit 'Done' when the tables on this page are complete. Otherwise, use Continue to proceed to the episode-specific interventions after describing the general interventions on this page.

For the first two columns, select from the allowed intervention drop-down boxes. The remaining three columns are free-text entry

If you need to add or delete rows to add or remove additional interventions, just use these buttons to do so. You may add as many interventions as you like, but keep in mind that every clinical episode category must have at least one intervention / condition of payment (latter only applies if incentives are being distributed)

Completing Intervention Descriptions

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| Back | Continue | Skip | Done |

Use the buttons at right to navigate through the workbook

Step 2: Allowable Interventions

For episode group: All

| Add Row | Delete Last Row |

Enter any clinical interventions here that will apply to all selected episode categories. If this does not apply, simply press 'Skip' to move on to episode-specific interventions. Otherwise, fill out the table below to explain plans for implementation of allowable ECIP interventions. If you have opted to distribute incentive payments, please include the Condition of Payment (CoP) measure that will be used to evaluate success; if you selected not to distribute incentive payments, this column will auto-populate with NA and is not applicable. Once complete, hit 'Continue' to move on to any episode-specific interventions. If you do not wish to enter episode-specific interventions (e.g. all interventions will be the same across all clinical episode groups), you may select 'Done' after completing this worksheet to move to the next section.

					Care Partners Engaged	
Intervention Category	Intervention	Description (< 200 words)	Tracking & Measurement	Condition of Payment (CoP)	Physician	SNF
Clinical Care / Care Redesign	Standardized, evidence-based protocol implementation	Intervention description	Measured by X	CoP measurement description 1	X	
Clinical Care / Care Redesign	Other (describe)	Other described intervention	Measured by Y	CoP measurement description 2		

Example of a completed intervention table.

Use the drop-downs to select which care partners will be included for each intervention described. This table will be generated automatically based on the care partners you select on the first screen.

Episode-Specific Intervention Designation

Episode Care Improvement Program (ECIP)

| Back | Continue | Skip |

Use the buttons at right to navigate through the workbook

Step 2: Allowable Interventions

For episode group: Cardio

| Add Row | Delete Last Row |

In the tables below right, select the anticipated Care Partners and Episode Categories for which a given intervention will apply.

Then, for each of the selected clinical episode categories, fill out the table below to explain plans for implementation of allowable ECIP interventions. If you have opted to distribute incentive payments, please include the Condition of Payment (CoP) measure that will be used to evaluate success; if you selected not to distribute incentive payments, this column will auto-populate with NA and is not applicable.

| | | | | | Care Partners Engaged | | Episode Categories |
Intervention Category	Intervention	Description (< 200 words)	Tracking & Measurement	Condition of Payment (CoP)	Physician	SNF	AMI
Care Coordination and Care Transitions	Interdisciplinary team meetings address patients' needs and progress.	Sample description	Sample tracking	CoP 1	X		X
(Select one)	(Select one)						

Episode-specific interventions are grouped into clinical areas: cardiology, general, GI, and orthopedic. You can use these four worksheets to designate interventions that only apply to a subset of your episode categories.

Complete the episode-specific intervention descriptions in the same way you did for the general interventions. The only addition for this page is a new table that also allows you to select which clinical episode categories to which a given intervention applies. Be sure to use the drop-down to select episode categories as appropriate for each row. This table will be generated automatically based on the episodes you select on the Episode Selection screen.

Generate Incentive Worksheet

After checking to ensure all previous worksheets are complete and accurate, click the 'Generate incentive worksheets' button to create the last set of sheets for completion. You must click this button before continuing.

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Participation Election Workbook

Care Redesign Section Complete

Please review to ensure all care redesign interventions have been completely and accurately filled out before continuing.

Press the button below to generate the incentive payment worksheets

Generate incentive worksheets

Back   Continue

If you need to make edits to previous sheets later, use the navigation buttons to return to the previous intervention worksheets to make changes. After returning, hit 'Generate Incentive Worksheets' again to update.

Condition of Payment Weighting

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Use the buttons at right to navigate through the workbook

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Step 3: Incentive Payments

For each care partner type within each episode category, set the weights for each condition of payment. By default, all weights are set equal - if this is acceptable, you may simply review and then hit 'Continue.' The weights for any given clinical episode category - care partner combination must equal 100%.

Episode Family	Episode Category	Condition of Payment (copied from previous sheets, you may edit for clarity)	CoP Weights		
			Physician	SNF	HHA
Cardiology					
	AMI	Sample CoP	25%	25%	25%
		Sample CoP - Cardio	25%	25%	25%
		Sample CoP - Cardio	25%	25%	25%
		Sample CoP	25%	25%	25%
			100%	100%	100%
General					
	Urinary tract infection	Sample CoP	33%	33%	33%
		Sample COP - General	33%	33%	33%
		Sample CoP	33%	33%	33%
			100%	100%	100%
Orthopedics					
	Upper extremity replacement / Other lower extremity procedure	Sample CoP	33%	33%	33%
		Sample CoP - Ortho	33%	33%	33%
		Sample CoP	33%	33%	33%
			100%	100%	100%

Adjust the desired weight given to each condition of payment. By default, all are weighted equally. You may enter zero if a condition of payment will not apply to a given care partner type. Ensure all weights for each care partner type total 100% before continuing.

Condition of payment descriptions are generated from the previous worksheets. You may edit to add additional detail here if desired

Print, Save, and Close

Episode Care Improvement Program (ECIP)

Participation Election Workbook

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Thank you for completing the ECIP participation election workbook. Please ensure the workbook and attached Word document are completely filled out and email to **care.redesign@crisphealth.org** with the subject line **"ECIP IP Track Template 2019"**

| Back | Save & Close | Print PDF |

Be sure to save the completed workbook when you are finished and email along with the completed Track Template to care.redesign@crisphealth.org for review. These buttons are simply helper functions and will have the same result as selecting File -> Save As and Quit as you would normally for excel.

After completing the workbook, generate a PDF copy for your records. This is a helper function and will generate the same output as selecting File -> Print -> PDF if you have issues with the macro functionality.

Q & A

Next up:

ECIP Office Hours (April 18)