This form allows hospitals to propose a Care Transformation Initiatives (CTI) to the HSCRC. There are four fields which are required for hospital submission and an additional two which HSCRC staff will fill out. Please submit the form hscrc.care-transformation@maryland.gov.

Required from Hospital: Background Components	
Title of Initiative	**Free Discharge Clinic Referrals to PCPs**
Overview • Description of current or upcoming program/initiative which hospitals may be implementing to impact patient outcomes, population health and total cost of care performance under Global Budget Revenues (GBR).	**Refer patients visiting the Discharge clinic to a PCP of their choice**
Defined Care Interventions • Briefly describe a standardized intervention pathway to address unmet clinical or social needs. • Identify care partners at the hospital, or in the community, who will implement the intervention.	**For Medicare patients seen at a Discharge Clinic, set up an appt at a PCP office.**
Required from Hospital: Analytic Components	
Identifiable Intervention Population • Medicare FFS beneficiaries only, until • Must be identifiable in Medicare claims based on clinical condition, patient history and/or other criteria; cannot be identified with an EHR or clinical data point	**All Medicare FFS patients discharged from hospital** • Identified Population 1. Age 65 and older 2. High risk with 2 or more Admissions, ED visits, or Obs visits during past 90 days. 3. Identified in Medicare claims Medicare FFS patients with diagnosis of CHF, COPD, or diabetes. 4. Duration is 90 days.
Episode Trigger • A "trigger" event, or combination of factors, to identify when a beneficiary is • Must be identifiable in Medicare claims; cannot be triggered with an EHR or clinical data point	**All Medicare FFS patients discharged from hospital** • Identified Population 1. Age 65 and older 2. High risk with 2 or more Admissions, ED visits, or Obs visits during past 90 days. 3. Identified in Medicare claims Medicare FFS patients with diagnosis of CHF, COPD, or diabetes. 4. Duration is 90 days.
For HSCRC Analysis and Consideration:	

TCOC Impact and Duration of Episode
• From the information above, HSCRC will estimate the TCOC savings related to the initiatives by calculating the difference in costs for the intervention population before and after the initiative went into effect.

Reconciliation Payments
• HSCRC staff will calculate the reconciliation payment that will be made to the hospital for the savings that they produce as part of a CTI. • The reconciliation payments will be included when the State calculates the TCOC run rate and the required savings for the TCOC Model. The costs may be offset through the MPA-EC in order to ensure any reconciliation payments will remain cost neutral and reward hospitals that meaningfully engage in CTIs.