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Hospital Transformation Program

**SW-PH1 Severity Adjusted Length of Stay is being replaced by Inpatient Hospital Transitions Program (IHT)**

**Overview**

* **The Severity Adjusted Length of Stay (SLOS)** measure (SW-PH1) will be retired from HTP and will be replaced with requirements of participation in the Inpatient Hospital Transitions (IHT) program.
* **Inpatient Hospital Transitions (IHT)** will be implemented as a replacement complementary effort for measuring hospital’s existing interventions around care coordination and utilization review. The transition has been initiated with plans to finalize by **October 1, 2024**.
* We utilized the following principles to determine the appropriate replacement:

**Guiding principles**

* Measures/Requirements must be aligned with current hospital intervention efforts
* Hospitals will not be required to implement new interventions
* All hospitals that currently have SW-PH1 will be required to and shall be eligible to participate in the new measure
* Replacement should be aligned with other requirements and build on success seen in the current interventions
* Replacement should serve a benefit to and contribute towards HTP sustainability
* All at-risk will be awarded for SW-PH1 for PY3

**Details**

* HTP Hospitals that have SW-PH1 as a measure will be **required** to participate in the Inpatient Hospital Transitions Program (IHT) and will be measured for adherence to the program in **HTP Program Years (PY) 4 and 5.**
* The HEDIS Average Length of Stay (Avg LOS) measure will be calculated as a maintenance measure with **no risk** associated.
* The measure will continue to be tracked under the measure SW-PH1, which will replace the previous SLOS data moving forward. The previous SLOS data will be **archived** but not used for performance measurement.

**SW-PH1 Inpatient Hospital Transitions: Measure Specifications**

* **Definition:** For Medicaid patients with complex inpatient hospital transitions, care coordination notifications are sent to the RAE to request RAE support in discharge planning.
* All hospitals that selected **SW-PH1** must participate in the Inpatient Hospital Transitions (IHT) program and make at least one **IHT referral**, in accordance with the IHT guidelines. An IHT referral must be made for every IHT qualified stay occurrence at each **30-day interval** (exception NICU) to earn the associated at-risk.

**Measure Steward:** Colorado Department of Health Care Policy and Financing

**Data Source:** Medicaid Claims and Atrezzo Provider Portal

**Numerator:** IHT referrals.

**Denominator:** Number of IHT qualified hospital stay occurrences.

**Benchmark Information:**

* There will be **no benchmark** for **PY3** and all at-risk will be granted.
* The benchmark for **PY4** will be met if **100%** of qualified IHT stay occurrences have IHT referrals.
* The benchmark for **PY5** will be met if **100%** of qualified IHT stay occurrences have IHT referrals.
* The **Measure Specifications** and **Scoring Framework** documents will be updated in the upcoming weeks prior to the initiation of the new measure.

**Inpatient Hospital Transitions** are:

* A mechanism for hospitals to share focused member-specific information with the RAEs to ensure successful discharge planning.
* The first step in the official communication from hospitals to the RAEs when the hospitals need assistance for a member discharge or transition.
* Focused on complex inpatient hospital transitions from one level of care to another.
* Not associated with authorization for inpatient stay or provider reimbursement.

**SW-PH1 Inpatient Hospital Transitions: Next Steps and Resources**

* The IHT program held training and open hours during the week of **October 7th.**
* Hospitals are also encouraged to visit the [IHT Website](https://hcpf.colorado.gov/iht) for additional information and resources.