



CHASE

Colorado Healthcare Affordability and
Sustainability Enterprise

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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](#) for additional information and resources.

