



Colorado FFY 2022-23 CHASE Model Data Collection Training Webinar

PRESENTERS:
Tamara Barnes, CPA
Shannon Langowski

MODERATOR:
Kyle Jefferson, CPA



**MYERS AND
STAUFFER**_{LC}
CERTIFIED PUBLIC ACCOUNTANTS

February 2, 2022

HOUSEKEEPING

- **Webinar Recording**
 - This webinar is being recorded and will be made available for future reference.
- **Have Questions?**
 - Feel free to submit them at any time using the chat box. The Moderator will monitor the chat box throughout the presentation for any questions.
- **PowerPoint**
 - Slide deck is available for download and printing through WebEx.

AGENDA

- Introductions
- Overview
- Resources
- Changes From Prior Year
- Data Collection and Reporting
- Timeline
- Introduction to the HIS web portal

INTRODUCTIONS

- Meet your presenters
- Meet the project teams

Myers and Stauffer LC

Name	Title
Tamara Barnes	Senior Manager
Shannon Langowski	Senior Specialist
Kyle Jefferson	Manager
Michele Kang	IT Development Senior Consultant
David Wendling	IT Development Manager



HCPF - CHASE Program

Name	Title
Jeff Wittreich	Provider Fee Unit Supervisor
Riley De Valois	Provider Fee Analyst
Mete Ozcorekci	Provider Fee Analyst



Overview

Overview



The purpose of the annual CHASE Model Data Collection process is to aggregate data from multiple sources necessary for the department to calculate:

- Hospital provider fee model
- Upper payment limit
- DSH limit calculations
- Net patient revenue

Overview



Time Periods

- CHASE Model
 - Federal Fiscal Year 2022-23
- Data Collection Cost Reporting Period
 - Cost Reporting Periods Ending in Calendar Year
2020

Overview



Data Sources

- Hospital Medicare Cost Report (CMS 2552-10)
- Colorado's Medicaid Management Information System (MMIS)
- Hospital Internal Accounting Records

Resources

Resources



- Hospital Data Aggregation Survey Instructions – Surveys and instructions will be uploaded on February 4, 2022
- Webinar Recording will be made available on the Help Resources tab of the HIS Web Portal.
- Help Desk Email – HISHelpDesk@mslc.com

Changes from the Prior Year

Consolidated Appropriations Act for 2021

Third Party Payments

Beginning with the adoption of the 2008 DSH rule, the **cost** of services related to dually-enrolled (Medicare and Medicaid or private insurance and Medicaid) individuals has been included in the DSH calculation of uncompensated care costs.

This act now only allows the inclusion of costs and payments for services for which the Medicaid state plan or waiver is the primary payor for such services. Therefore, the act entirely excludes both the **cost and payments** for services related to dually-enrolled individuals from uncompensated care costs.

Consolidated Appropriations Act for 2021

Exception

Some hospitals may still qualify for an exception to continue to include the dually-enrolled individuals (costs and payments) in their uncompensated care costs as is currently done under the Medicaid DSH limit calculations, if it results in a higher DSH limit.

CMS recently issued a State Medicaid Director Letter indicating additional guidance is forthcoming on the exception.

Consolidated Appropriations Act for 2021

What this means for the Data Aggregation Survey

- Hospitals should classify claims into correct payer columns on the Data Aggregation Survey.
- Refer to the Data Aggregation Survey instructions for details.
- In general, data should exclude CHIP (Title 21) and other non-Medicaid (Title 19) services, non-hospital services, and professional fees.

Medicaid FFS Not Included in the State's MMIS (NEW)

- Internal hospital records.
- Should not include any claims with payments other than Medicaid and self-pay.

Other Medicaid Eligibles

- Internal hospital records.

Consolidated Appropriations Act for 2021

Significant Items to Note:

Medicaid FFS Not Included in the State's MMIS (NEW)

- Internal hospital records.
- Medicaid primary FFS claims not included in State's MMIS.
- Should not include any claims with payments other than Medicaid and self-pay.

Other Medicaid Eligibles

- Internal hospital records.
- Medicaid secondary claims not reported elsewhere and not in the State's MMIS FFS or Crossover Data.

HIS Web Portal

Colorado Hospital Information Systems (HIS) Web Portal

- All data will be exchanged through the Colorado Hospital Information Systems (HIS) Web Portal.
 - Data requests, data aggregation surveys, and IHRs.
 - Surveys with incomplete data will be rejected by the portal..
 - PHI/PII should NOT be exchanged through the web portal.

Data Collection and Reporting

Data Collection

Hospital data aggregation survey

- Version Info.
- Instructions
- Survey Certification
- Data Gap
- Sec. A-B General Info
- Sec. C Managed Care Days
- Sec. D Provider Tax
- Sec. E-F DSH Eligibility
- Sec. G Medicaid Days
- Sec. H. In-State MD Elig_Unins
- Sec. J-K Transplant

Survey Certification

**Colorado Department of Health Care Policy and Financing
Hospital Data Aggregation Survey
FFY 2022-23 CHASE Model
Data from Cost Reporting Period Ending in Calendar Year 2020
Survey Certification**

The following certification is to be completed by the hospital's CEO or CFO:

I hereby certify that the information submitted in this Hospital Data Aggregation survey is true and accurate to the best of our ability, and supported by the financial and other records of the hospital. I understand that this information will be used to calculate the CHASE Model. I certify that detailed support exists for all information and amounts reported in this survey and these records will be retained for a period of not less than 6 years following the due date of the survey and will be made available for inspections when requested. Furthermore, my hospital had no restrictions on the retaining

Hospital CEO or CFO Signature

Hospital CEO or CFO Printed Name

Title

Hospital CEO or CFO Telephone Number

Hospital CEO or CFO E-Mail

Date

Data Gap

FFY 2022-23 CHASE Model

Data from Cost Reporting Period Ending in Calendar Year 2020

General Information

Data Gap

Data Gap

Data elements collected in this template are necessary for the calculations included in the CHASE Model. Missing data elements will affect the calculations.

The table below summarizes the required data elements and their location within the workbook. The Data Validation column indicates whether or not a data element is missing (Data Gap) or potentially missing (Potential Data Gap).

The Data Validation column indicates whether or not a data element is missing (Data Gap) or potentially missing (Potential Data Gap).

For any Data Element Description indicating **Data Gap**, complete the required data prior to uploading your hospital's survey to the web portal. Surveys with missing data will be considered incomplete and rejected.

For any Data Element Description indicating a **Potential Data Gap**, explain the reason for the missing data in the Provider Comments column. Items identified as Potential Data Gaps must include an explanation or the Survey will be considered incomplete and rejected.

The reason for missing data must be entered here if Data Validation reflects "Potential Data Gap."

Worksheet	Line	Data Element Description	Data Validation	Provider Comments
Sec. A-B General Info	4	Licensed Beds	Data Gap	
Sec. A-B General Info	5	Hospital City	Data Gap	
Sec. A-B General Info	6	Hospital County	Data Gap	
Sec. A-B General Info	7	NICU Level	Data Gap	
Sec. A-B General Info	8	Teaching Hospital	Data Gap	
Sec. A-B General Info	9	Critical Access Hospital	Data Gap	
Sec. A-B General Info	10	CICP Hospital	Data Gap	
Sec. A-B General Info	13	Significant Changes	Data Gap	
Sec. A-B General Info	1	Affiliated Hospital System	Data Gap	
Sec. C Managed Care Days	1-4	Total Managed Care Days	Data Gap	
Sec. C Managed Care Days	11	Managed Care Days - Variance Explanation	Data Gap	
Sec. D Provider Tax	1	Gross Provider Fee Assessment from GL	Data Gap	
Sec. D Provider Tax	1a	WTB Account Type		
Sec. D Provider Tax	2	Gross Provider Fee Assessment included in Cost Report		
Sec. D Provider Tax	2	w/s A Line Number		

Sec. C Managed Care Days

C. Managed Care Patient Days

The inpatient provider fee is assessed based on managed care and non-managed care days.

Report total managed care days for the following payer types: Commercial Managed Care, Medicaid Managed Care, Medicare Managed Care and Other Managed Care.

Managed Care Days – Sum of days for which the primary payer is a managed care health plan, including these plans: Health Maintenance Organization, Preferred Provider Organization, and Exclusive Provider Organization. Other managed care days may include CHIP or Tricare.

Note: The Accountable Care Collaborative (ACC) administered by a Regional Care Collaborative Organization (RCCO) or a Regional Accountable Entity (RAE) after July 1, 2018 is not Managed Care.

Report total managed care days for the following payers. Enter zero if there are no days associated with the cost reporting period:

- 1 Commercial Managed Care
- 2 Medicaid Managed Care
- 3 Medicare Managed Care
- 4 Other Managed Care
- 5 **Total Managed Care Days**

Managed Care Days
0

ENTER NUMBER OF DAYS. IF NONE, ENTER ZERO.
 ENTER NUMBER OF DAYS. IF NONE, ENTER ZERO.
 ENTER NUMBER OF DAYS. IF NONE, ENTER ZERO.
 ENTER NUMBER OF DAYS. IF NONE, ENTER ZERO.

Total Hospital Days Reported on Medicare Cost Report

- 6 Worksheet S-3

203,085

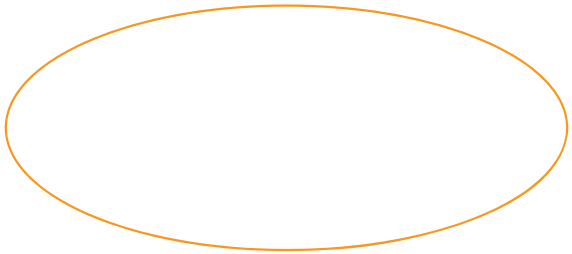
Please review and provide an explanation for any significant variances from the prior year which appear below.

7

8

9

Comparison to PY Explanation(s)



Sections D-F

Sec. D – Provider Tax

- Validation checks.

Sec. E – DSH Eligibility OB Req't

- Validation checks and comparison to PY eligibility added.

Sec. F – LIUR

- Validation checks added.

Sec. G Medicaid Days

Colorado Department of Health Care Policy and Financing
Hospital Data Aggregation Survey
FFY 2022-23 CHASE Model
Data from Cost Reporting Period Ending in Calendar Year 2020
Medicaid Days

0 The Hospital's DSH OB requirement eligibility determination is as follows:

Not DSH Eligible

COMPLETE SECTION G. BELOW.

G. Medicaid Eligible Patient Days

Medicaid Eligible Days - Enter the number of total inpatient days attributable to patients who (for such days) were eligible for medical assistance under the State plan (regardless of whether such patients receive medical assistance on a fee-for-service basis or through a managed care entity).

1 In-State Medicaid Managed Care Days

2 In-State Medicaid Other Medicaid Eligible Days

3 Out-of-State Medicaid Fee for Service Days

4 Out-of-State Medicaid Managed Care Days

5 Out-of-State Medicare Crossovers (Medicaid Secondary) Days

6 Out-of-State Other Medicaid Eligible Days

7 Total Medicaid Days

Medicaid Days
0

ENTER NUMBER OF DAYS. IF NONE, ENTER ZERO.

ENTER NUMBER OF DAYS. IF NONE, ENTER ZERO.

ENTER NUMBER OF DAYS. IF NONE, ENTER ZERO.

ENTER NUMBER OF DAYS. IF NONE, ENTER ZERO.

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ENTER NUMBER OF DAYS. IF NONE, ENTER ZERO.

8 Total Hospital Days Reported on Medicare Cost Report Worksheet

203,085

Sec. J-K Transplant

**Sec. J – Organ Acquisition Costs – In-State
Medicaid and Uninsured**

**Sec. K – Organ Acquisition Costs – Out-of-State
Medicaid**

Data Collection and Reporting

Individual Hospital Report

- General information
- Data anomalies
- DSH limit calculations
- MMIS data
- UPL calculations

Timeline

Timeline



- Web Portal Access Forms due – January 28, 2022
- Provider Training Webinar – February 2, 2022
- Surveys made available to hospitals – February 4, 2022
- Surveys due from hospitals – March 22, 2022
- Individual Hospital Reports (IHRs) uploaded to hospitals – by May 16, 2022
- Hospital responses to IHRs due – within 10 business days of being uploaded
- Final Aggregated Data Report to HCPF – September 30, 2022

Introduction to the HIS Web Portal

Introduction to the HIS Web Portal

Background

- The Colorado Hospital Information Systems (HIS) is a web portal developed by Myers and Stauffer for the Colorado Department of Health Care Policy & Finance (HCPF).
- This web portal will be used for data collection, data storage, data analytics, file sharing, and provider communication.
- The data collected through this portal will be used for the following programs and reports:
 - Colorado Healthcare Affordability & Sustainability Enterprise (CHASE)
 - Colorado Indigent Care Providers (CICP)
 - Hospital Community Benefit Accountability (HB 19-1320)
 - Hospital Transparency Measures to Analyze Efficacy (HB 19-1001)

Introduction to the HIS Web Portal

Web Portal Access

- <https://HCPF-HIS.mslc.com>
- User accounts have been established for all providers who submitted user access request forms.
- When logging on for the first time, use the “Forgot Password” link to set a new password.

Hospital Information Systems

Welcome to the Colorado Department of Health Care Policy & Financing (HCPF) Hospital Information Systems, operated by Myers & Stauffer LC. This website serves as a portal for data collection, data storage, data analytics, file sharing, and provider communication. The data collected through this portal is used to create datasets/reports used for the following programs:

- Colorado Healthcare Affordability & Sustainability Enterprise (CHASE)
- Colorado Indigent Care Providers (CICP)
- Hospital Community Benefit Accountability (HB 19-1320)
- Hospital Transparency Measures To Analyze Efficacy (HB 19-1001)

Registration and log information will only be granted to those approved by providers and by HCPF staff. Questions can be emailed to the HISHelpDesk@mslc.com.

Log on using your email address. Use the “Forgot Password?” feature the first time you log in

Hospital Information Systems Login

[Forgot Password?](#)

Login



Send Forgot Password

Email



[Try another](#)

Enter the text you see above:

Send Forgot Password Email



CHASE

Colorado Healthcare Affordability and Sustainability Enterprise

Hospital Information Systems

Email: SLANGOWSKI@MSLC.COM

Role: PROVIDER

Selected Program:

[Change Program](#)

[Help Resources](#)

[Log Out](#)



Program
CHASE



CHASE

Colorado Healthcare Affordability and
Sustainability Enterprise

Hospital Information Systems

Email: SLANGOWSKI@MSLC.COM

Role: PROVIDER

Selected Program: CHASE

[Change Program](#)

[Stat Log](#)

[Help Resources](#)

[Log Out](#)



Please select an option from the above menu.



CHASE

Colorado Healthcare Affordability and Sustainability Enterprise

Hospital Information Systems

Email: SLANGOWSKI@MSLC.COM

Role: PROVIDER

Selected Program: CHASE

[Change Program](#)

[Stat Log](#)

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[Log Out](#)



Select Cost Report Period

[Search For Provider](#)

Provider

Select...

Fiscal Year
Begin Date

Fiscal Year
End Date

Use the drop down list to select your hospital (displayed in alphabetical order). You will only see the hospitals assigned to you.

Select Cost Report Period

[Search For Provider](#)

Provider

Fiscal Year Begin Date: 7/1/2019
 Fiscal Year End Date: 6/30/2020 - Data Agg

Image Legend - Hover for details (Click to hide/show)

Needs Review	Review is OK	Item not accepted	Upload	Download	Report Issue	View Issue
Show Details	Refresh					

History

[Mass-Download](#)

Event Date	Event	Due Date	Response Date	User ID	Action	Details
01/25/2022	Initial Request (Please Download)			slangowski@mslc.com		
01/25/2022	Upload - Initial Request (Please Download)		01/25/2022	slangowski@mslc.com		
01/25/2022	Survey			slangowski@mslc.com		
01/25/2022	Survey Certification - Signed			slangowski@mslc.com		
01/25/2022	Initial IHR Results			slangowski@mslc.com		
01/25/2022	Final IHR Results			slangowski@mslc.com		

Upload File
6 - County Memorial Hospital
FYE: 06/30/2020



File: No file chosen
Notes:

Stat Log Help Resources


Select

Provider

County

 Need
 Show

History

Mass-Download 

Event Date	Event	Due Date	Response Date	User ID	Action	Details
01/25/2022	Initial Request (Please Download)			slangowski@mslc.com		
01/25/2022	Upload - Initial Request (Please Download)		01/25/2022	slangowski@mslc.com		
01/25/2022	Survey			slangowski@mslc.com	 	
01/25/2022	Survey Certification - Signed			slangowski@mslc.com	 	
01/25/2022	Initial IHR Results			slangowski@mslc.com		
01/25/2022	Final IHR Results			slangowski@mslc.com		



CHASE

Colorado Healthcare Affordability and Sustainability Enterprise

Hospital Information Systems

Email: SLANGOWSKI@MSLC.COM

Role: PROVIDER

Selected Program: CHASE

[Change Program](#)

[Stat Log](#)

[Help Resources](#)

[Log Out](#)



File Upload Successful.

Select Cost Report Period

[Search For Provider](#)

Provider

County Memorial Hospital - 6

Fiscal Year
Begin Date

7/1/2019

Fiscal Year
End Date

6/30/2020 - Data Agg

Image Legend - Hover for details (Click to hide/show)

Needs Review	Review Is Ok	Item not accepted	Upload	Download	Report Issue	View Issue
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Mass-Download



Event Date	Event	Due Date	Response Date	User ID	Action	Details
01/25/2022	Initial Request (Please Download)			slangowski@mslc.com		
01/25/2022	Upload - Initial Request (Please Download)		01/25/2022	slangowski@mslc.com		
01/25/2022	Survey			slangowski@mslc.com		
01/25/2022	Upload - Survey		01/25/2022	slangowski@mslc.com		
01/25/2022	Survey Certification - Signed			slangowski@mslc.com		
01/25/2022	Initial IHR Results			slangowski@mslc.com		
01/25/2022	Final IHR Results			slangowski@mslc.com		

1 of 25

1 of 1 pages (7 items)

CONTACT US

HIS Help Desk

HISHelpDesk@mslc.com



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Questions?

Thank you!