

# *Colorado Hospital Transformation Program:*

## Implementation Plan Training

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# *Hospital Transformation Program (HTP) Overview*



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# HTP Overview

- Five-year program to implement hospital-led strategic initiatives through the establishment of an alternative payment incentive program.
- Leverage supplemental payment funding generated through existing healthcare affordability and sustainability fees.
- Payments used as incentives in the HTP to improve patient outcomes through care redesign and integration with the community, optimize Medicaid costs through reductions in avoidable care, prepare hospitals for future value-based care.



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# HTP GOALS

01

**Improve** patient outcomes through care redesign and integration of care across settings

02

**Improve** patient experience in the delivery system by ensuring appropriate care in appropriate settings

03

**Lower** Medicaid costs through reductions in avoidable hospital utilization and increased effectiveness and efficiency in care delivery

04

**Accelerate** hospitals' organizational, operational and systems readiness for value-based payment

05

**Increase** collaboration between hospitals and other providers, particularly Regional Accountable Entities (RAEs)



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# ***HTP PRIORITIES & FOCUS AREAS***

1. Avoidable hospital utilization.
2. Core populations.
3. Behavioral health and substance use disorder (SUD).
4. Clinical and operational efficiencies.
5. Community development efforts to address population health and total cost of care.



# *Four Principles of Success*

1. What is our measurable impact on meaningful metrics?
2. What actions/interventions/processes of care are affecting that impact?
3. What are our learning systems for continuous improvement and what are we learning from our activity and performance?
4. How are we building a culture of engagement and how are we engaging our communities regarding what we measure, what interventions we do, and in our learning and feedback loops?



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# *Program and Implementation Plan Timeline*



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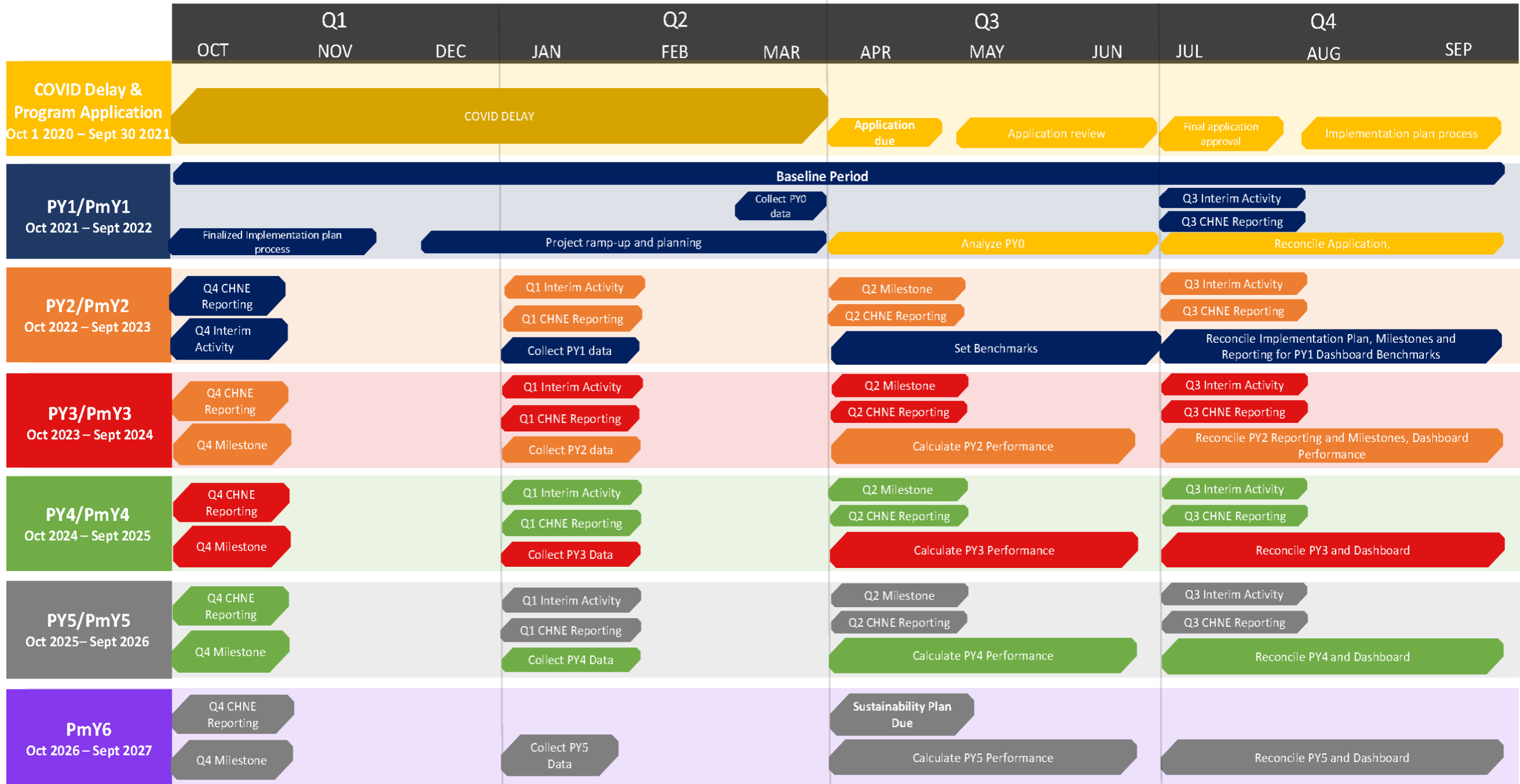


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# Colorado Hospital Transformation Program Timeline

For the purposes of this program timeline, the following abbreviations will be used  
PY = Program year; PmY = Payment year



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# HTP Timeline

**APR.**  
2021

- Hospital Application due.

**MAY  
/JUN.**  
2021

- HCPF and consultant review applications, request revisions if necessary.
- Complete applications to Oversight Committee.

**JUL.**  
2021

- Oversight Committee completes reviews, sends results to HCPF.

**AUG.**  
2021

- Additional application revisions and review, if needed.
- Presentation to CHASE Board.
- Final application review period ends and applications published.

**SEP.**  
2021

- Implementation Plan submission window.

**OCT. -  
NOV.**  
2021

- Implementation Plan review period.

**DEC. -  
MAR.**  
2022

- Project ramp-up and planning.

**APR.**  
2022

- HTP activity begins.

**JUL.**  
2022

- First activity reporting for prior quarter.

# *Implementation Plan Submission and Review*

- **September 1** - First day Implementation Plans may be submitted
- **September 1 - September 30** - Implementation Plan Submission Period
- **September 30** - Implementation Plan submission deadline
- **20 business days** - Review Period: Twenty business day Department review period
- **10 business days** - Revise and resubmit period: Ten business day period within which any plan requiring additional revisions and / or supporting details should be completed by hospital
- **10 business days** - Final Review Period: Ten business day scoring period for revised and resubmitted Implementation Plans
- **November 30** - Expected final Implementation Plans approved



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# *Implementation Plan and Review Criteria*



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# Implementation Plan

Hospitals must submit an Implementation Plan that addresses *each* intervention approved for participation in the HTP.

The Implementation Plan (IP) is broken into three sections:

- I. Background, Instructions and Timeline (informational only)
- II. Organizational Approach to Implementation
  - Includes contact, governance structure
- III. Approach to Intervention Implementation
  - Intervention-specific
  - Includes key roles, target population, functions and resources, challenges and risks
  - Establishes intervention milestones



# *Section I*

## **Background, Instructions and Timeline**

- Informational only
- HTP overview
- Implementation plan introduction
- Submission and review timeline
- Scoring framework



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# Section II

## Organizational Approach to Implementation

Section	Component	Question	Scoring
Section II Implementation Overview	Points of Contact	II.A.1.a. II.A.1.b.	Pass / Fail
	Role of Governance Structure	II.A.2.	Pass / Fail



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# Section II

**Question II.A.2.** Describe how the governance structure outlined in response to Question 3 of the HTP Application will be engaged in the implementation and execution of the hospital's HTP participation. Address how leadership will ensure oversight and support, including sign off/approval for resources, and address their role in the following functional areas, as applicable.

- People (Workforce / Training)
- Processes of Care
- Technology and Data Systems
- Patient Engagement / Target Population





# Section II

## Question II.A.2. (continued)

### Scoring Criteria:

- Pass / Fail, reviewed for completeness
- Does response address how governance structure will be engaged in the implementation and execution of the hospital's HTP participation?
- Does response address how leadership will ensure oversight and support, including sign off / approval for resources?
- Does response specifically address leadership's role in each of the functional areas?



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# Section III

## Approach to Intervention Implementation

Section	Component	Question	Scoring
Section III.A Overview of Intervention	Reporting Hospital	III.A.1.	Prepopulated
	Name of Intervention	III.A.2.	Prepopulated
	Primary Quality Measure(s)	III.A.3.	Prepopulated
	Identification of Existing Interventions	III.A.4.	Pass / Fail
	Principal Administrative Roles	III.A.5.	Pass / Fail
	Target Population	III.A.6.	1 - 3
	Major Functions and Resources	III.A.7.	1 - 3
	Challenges and Risks	III.A.8.	1 - 3
	Ongoing CHNE	III.A.9.	Pass / Fail
Section III.B Intervention Milestones	Milestones	III.B.1. III.B.2. III.B.3.	1 - 3



*Implementation Plan*  
*Section III.A:*  
*Overview of Intervention*



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# Section III.A

**Question III.A.4. Is this an existing intervention?**

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## **Scoring Criteria:**

- Pass / Fail, reviewed for completeness
- Reviewed for consistency with HTP application



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# Section III.A

**Question III.A.5.** The below chart is for principal internal and external administrative roles for this intervention. If there are more than five individuals working on this intervention, list the five individuals with the greatest leadership roles or most time dedicated to this intervention.

	Name	Intervention-Specific Role	Role will lead implementation of intervention (Y / N)	Name of Organization	Key Deliverables / Responsibilities
Individual 1					
Individual 2					
Individual 3					
Individual 4					
Individual 5					



# Section III.A

## Question III.A.5. (continued)

### Scoring Criteria:

- Pass / Fail, reviewed for completeness
- If there are not five individuals with roles in the intervention's implementation, fewer than five individuals may be listed
- A minimum of one individual must be listed to receive a passing score
- External partner administrative roles refers to organizations that are partners with the hospital on the intervention, if applicable



# Section III.A

**Question III.A.6.a.** Briefly describe the intervention's target population for the intervention. This should align with the hospital's approved HTP Application.

---

## Scoring Criteria:

- Numerical score (1 - 3), reviewed for completeness and approach
- Does response describe the target population?
- Does target population align with the measure(s) selected?



# Section III.A

**Question III.A.6.b.** Describe how individuals within the target population will be identified and engaged in the intervention.

---

## Scoring Criteria:

- Numerical score (1 - 3), reviewed for completeness and approach
- Does response demonstrate how individuals within the target population will be identified?
- Does the response describe how individuals within the target population will be engaged by involving them in their healthcare?





# Section III.A

**Question III.A.7.a.** Describe what major functions and resources, supporting the initiative throughout the course of implementation are already in place, or are not in place and will need to be re-purposed from other areas, built, acquired, or secured through a partner or in some way.

Please address the following functional areas and resources, at a minimum, when responding:

- People (Workforce / Training)
- Processes of Care
- Technology and Data Systems
- Functions for Patient Engagement / Target Population



# Section III.A

## Question III.A.7.a. (continued)

This question is addressed through responses to:

- **Question III.A.7.b.** - Major functions and resources already in place
- **Question III.A.7.c.** - Major functions and resources that are not in place and will need to be re-purposed from other areas, built, acquired, or secured through a partner or in some way



# Section III.A

## Question III.A.7.a. to III.A.7.c. (continued)

### Scoring Criteria:

- Numerical score (1 - 3), reviewed for completeness and approach
- Do responses address the major functions of the intervention?
- Do responses address the major resources needed for the intervention?
- Do responses address all functional areas (or explain why some functional areas are not applicable)?



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# Section III.A

**Question III.A.8.a.** Describe any major challenges and risks to intervention implementation and how the hospital will mitigate those challenges and risks. In the response, specifically address the following areas:

- Workforce;
- Budget;
- Health Information Technology;
- Regulatory Barriers; and
- Challenges related to engaging difficult-to-reach populations.



# Section III.A

## Question III.A.8.a. (continued)

This question is addressed through responses to:

- **Question III.A.8.b.** - Major challenges and risks to intervention implementation
- **Question III.A.8.c.** - How the hospital will mitigate the challenges and risks identified



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# Section III.A

## Question III.A.8.a. to III.A.8.c. (continued)

### Scoring Criteria:

- Numerical score (1 - 3), reviewed for completeness and approach
- Do responses address the major challenges and risks for the intervention in one or more of the areas listed?
- Given the challenges and risks that exist, does response describe how the hospital will mitigate the impact on the success of the intervention?



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# Section III.A

**Question III.A.9.** Describe how this intervention will benefit from the hospital's ongoing Community and Health Neighborhood Engagement efforts.

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## Scoring Criteria:

- Pass / Fail score, reviewed for completeness
- Does response describe how the hospital will use Community and Health Neighborhood Engagement (CHNE) as a learning opportunity and explain how the intervention will benefit from and be supported by the ongoing CHNE efforts?



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# *Questions*



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# *Implementation Plan*

## *Section III.B:*

### *Milestones*



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# Section III.B - Milestones

- **Milestones are discrete tasks that, when completed, have an easily identifiable, quantifiable, and definable goal that has been reached or action that has been completed.**
- Hospitals must propose one milestone in Quarters 2 and 4 (Q2 and Q4) for each Program Year (PY) starting with PY2Q2 (January - March 2023).
- The Implementation Plan submission tool will guide hospitals through the process of establishing milestones for each intervention for the duration of the HTP.
- Supporting documentation is required to substantiate milestone completion.



# Milestone Phases

## Planning and Implementation Phase:

- These milestones document the process through which all necessary preliminary activities (e.g. preparation, gap assessments) are completed.
- The final set of this phase's milestones focuses on implementation activities resulting in the intervention's inception.

## Continuous Improvement Phase:

- Second phase of milestones focuses on incorporating continuous quality improvement practices into ongoing intervention operation.
- Could include documented progress toward deploying quality improvement teams, cycle completions for quality improvement exercises, or the development and use of quality improvement forums, technical assistance programs or other quality improvement capacity development.



# Milestone Functional Areas

Planning and Implementation milestones are assigned to functional areas:

**People:** Activities related to workforce development, including training new or existing staff members, redeploying staff members into materially new roles or identifying key project personnel.

**Process:** Activities related to a material shift in how clinical processes will be completed as a result of the proposed intervention.

**Technology:** These milestones apply to the updating, acquisition or repurposing of underlying electronic health data storage, use or exchange either within or across the HTP participant's primary service units or with the state's health information exchange.

**Patient Engagement / Target Population:** Includes the identification and enrollment of patients that fall within target populations. Patient Engagement milestones must include quantifiable impact milestones to reach full engagement of the target population.

# *Impact Milestones*

- The final milestone for each intervention’s “Planning and Implementation” phase
- Demonstrates intervention has been fully implemented
- Addresses all functional areas
- For functional areas of the impact milestone that are fully implemented prior to the impact milestone, the impact milestone will demonstrate the ongoing operation or maintenance of the functional area since implementation in an earlier quarter.



# Milestones for New Interventions

Phase	Q	PY2 (Oct. 2022 - Sept. 2023)	PY3 (Oct. 2023 - Sept. 2024)	PY4 (Oct. 2024 - Sept. 2025)	PY5 (Oct. 2025 - Sept. 2026)
Planning and Implementation Phase Milestones	Q2	Impact Milestone: Y/N; Milestone Functional Area(s) and Description	Impact Milestone: Y/N; Milestone Functional Area(s) and Description	N/A	N/A
	Q4	Impact Milestone: Y/N; Milestone Functional Area(s) and Description	Impact Milestone: Y/N; Milestone Functional Areas and Description	N/A	N/A
Continuous Improvement Phase Milestones	Q2	N/A	N/A	Milestone Description	Milestone Description
	Q4	N/A	N/A	Milestone Description	Milestone Description

*The final “Planning and Implementation” milestone (impact milestone) must be completed by PY3Q4.*



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# Milestones for Existing Interventions

Phase	Q	PY2 (Oct. 2022 - Sept. 2023)	PY3 (Oct. 2023 - Sept. 2024)	PY4 (Oct. 2024 - Sept. 2025)	PY5 (Oct. 2025 - Sept. 2026)
Planning and Implementation Phase Milestones	Q2	Impact Milestone: Y/N; Milestone Functional Area(s) and Description	Impact Milestone: Y/N; Milestone Functional Area(s) and Description	N/A	N/A
	Q4	Impact Milestone: Y/N; Milestone Functional Area(s) and Description	N/A	N/A	N/A
Continuous Improvement Phase Milestones	Q2	N/A	N/A	Milestone Description	Milestone Description
	Q4	N/A	Milestone Description	Milestone Description	Milestone Description

*The final “Planning and Implementation” milestone (impact milestone) must be completed by PY3Q2.*

# Section III.B - Milestones

## Questions III.B.1. to III.B.3.

Responses provided to Questions III.B.1. through III.B.3. for each milestone.

Question III.B.3. has up to three parts: III.B.3.a. - III.B.3.c.

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## Scoring Criteria:

- Numerical score (1 - 3) assigned to each milestone for Questions III.B.1. to III.B.3.
- Reviewed for completeness, adherence to HTP requirements, and approach (as applicable).



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# Section III.B - Milestones

**Question III.B.1.** What phase does this milestone fall under?

- Planning and Implementation
- Continuous Improvement

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## Scoring Criteria:

- Does response reflect an acceptable phase given the following factors?
  - The quarter of the program the milestone relates to
  - Whether the intervention is new or existing
  - The measure(s) that the intervention will address



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# Section III.B - Milestones

**Question III.B.2.** Is this the impact milestone for the intervention?

Yes

No

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## Scoring Criteria:

- Is this the final milestone for the “Planning and Implementation” phase of the intervention?
  - If so, is the response “yes”?
  - If not, is the response “no”?



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# Section III.B - Milestones

**Question III.B.3.a.** Please indicate which Functional Area(s) apply to this milestone. Select all that apply. Impact milestones must include all functional areas.

- People
- Process
- Technology
- Patient Engagement / Target Population

*Note: This question is only applicable to Planning and Implementation phase milestones.*



# *Section III.B - Milestones*

**Question III.B.3.a. (continued)**

## **Scoring Criteria:**

Responses will be reviewed for completeness and adherence to applicable program requirements.

- If this is an impact milestone, were all functional areas selected?



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# Section III.B - Milestones

## Question III.B.3.b.

If in Planning and Implementation phase:

Please include a brief description of the applicable [*People, Process, Technology, Patent Engagement / Target Population*] Functional Area(s) for this milestone.

If in Continuous Improvement phase:

Please include a brief description of the milestone.



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# Section III.B - Milestones

## Question III.B.3.b. (continued)

### Scoring Criteria:

Responses will be reviewed for completeness, approach, and adherence to applicable program requirements.

- Does response contain a short description of the actions that will constitute completion of the milestone?
- Is the milestone sufficiently concrete that the hospital can identify whether the milestone was completed and provide documentation to verify completion?
- Does the milestone specified correspond to the “Planning and Implementation” or “Continuous Improvement” phase selected in Question III.B.1.?



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# Section III.B - Milestones

## Question III.B.3.b. (continued)

### Scoring Criteria (continued):

- If a “Planning and Implementation” phase milestone, is the activity relevant to the functional area selected in Question III.B.3.a.?
- If an “Impact Milestone” was selected in Question III.B.2., does the milestone address all functional areas, and does the milestone demonstrate completion of the “Planning and Implementation” phase?
- If the hospital index measure was selected for the intervention, do the milestones align with the specifications set forth in the *HTP Implementation Plan Template and Milestone Requirements*?



# *Section III.B - Milestones*

## **Question III.B.3.c.**

If in Planning and Implementation phase:

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone.

If in Continuous Improvement phase:

Please describe the supporting documentation which will be provided in support of this milestone.



# Section III.B - Milestones

## Question III.B.3.c. (continued)

### Scoring Criteria:

- Does response contain a short description of the supporting documentation that will be provided in support of the milestone's completion?
- Does the response state explicitly and unambiguously what piece(s) of documentation will be provided?
- Is the documentation sufficient to verify or prove milestone completion?
- If the milestone contains multiple elements, does the documentation allow verification of each element's completion?



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# *Questions*



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# *Implementation Plan Milestone Examples*



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# Example Intervention

<b>Intervention Name:</b>	<b>Intervention 1 - Standardized Social Needs Assessment and Referral</b>
<b>Intervention Measure(s):</b>	SW-CP1 - Social Needs Screening and Notification
<b>Intervention Type:</b>	New
<b>Intervention Overview:</b>	<p>To implement social needs screening, the hospital will utilize functionality available in the current electronic health record (EHR) to screen patients for social needs and refer patients to appropriate organizations for services. The EHR contains questions explicitly addressing all five domains outlined in the HTP measures overview: food insecurity, transportation, utilities, housing, and interpersonal safety (specifically, domestic violence). Questions are also available that cover substance use, mental health, physical activity, social supports, and stress. The hospital will determine which questions to use for the intervention, and will consider further customizing the questions. The hospital will explore the option to administer the assessment via the patient portal. All positive screens will be eligible for case management team follow-up. Additionally, every patient with a positive screen will have their information sent to the RAE and referred to the appropriate community-based organization(s). The intervention will be implemented and improved over the course of the HTP by a multi-disciplinary Social Needs Committee (SNC).</p>



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# Example P&I Milestone

<b>Performance Period:</b>	<b>PY2Q4</b>
<b>Milestone Description/Code:</b>	<b>INT1.PY2Q4</b>
Milestone Phase:	Planning and Implementation
Impact Milestone (Y / N):	N
Functional Area:	Process
FA Milestone Description:	The SNC has customized the social needs questionnaire by selecting and modifying the questions. The SNC has drafted protocols for case management follow-up and notification to the RAE.
Supporting Documentation:	<ol style="list-style-type: none"> <li>1. Initial draft of the social needs screening questionnaire</li> <li>2. Written protocols to incorporate positive screens into hospital workflow for case management follow-up and notification to the RAE</li> </ol>
Functional Area:	Technology
FA Milestone Description:	The hospital has developed technology for three methods patients will use to complete the social needs screen electronically: (1) patient portal, (2) tablets in waiting rooms, (3) verbal Q&A session with practitioner entered directly into EHR. Additionally, a secure, automated process for electronic transmission of positive screens to the RAE has been established.
Supporting Documentation:	<ol style="list-style-type: none"> <li>1. Screenshots of patient portal and tablet interface for a test account</li> <li>2. Agreement with the RAE, which describes the technology used for secure transmission of positive screens to the RAE</li> <li>3. Screenshot showing how the hospital tracks transmissions to the RAE (summary screen without patient information)</li> </ol>



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# Example Impact Milestone

<b>Performance Period:</b>	<b>PY3Q4</b>
<b>Milestone Description/Code:</b>	<b>INT1.PY3Q4</b>
<b>Milestone Phase:</b>	Planning and Implementation
<b>Impact Milestone (Y / N):</b>	Y
<b>Functional Area:</b>	People
<b>FA Milestone Description:</b>	The hospital has identified which individuals / departments need training on various aspects of the intervention. The SNC has developed training materials, and has provided the training to the appropriate staff members. The SNC has established a process to receive feedback on the intervention from hospital employees.
<b>Supporting Documentation:</b>	<ol style="list-style-type: none"> <li>1. List of departments / individuals that received training</li> <li>2. Training materials, including the training schedule with dates</li> <li>3. The process established by the SNC to obtain feedback from hospital employees on the intervention</li> </ol>
<b>Functional Area:</b>	Process
<b>FA Milestone Description:</b>	The protocols were finalized for delivering the social needs screen, providing case management follow-up, and communicating positive screens to the RAE in a previous quarter. The intervention has been rolled out, and the SNC continues to review and refine protocols.
<b>Supporting Documentation:</b>	<ol style="list-style-type: none"> <li>1. Meeting minutes from the SNC documenting discussion of process improvements, and addressing employee feedback (if any)</li> <li>2. Updated intervention protocols/policies</li> </ol>



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# Example Impact Milestone

(continued)

<b>Performance Period:</b>	<b>PY3Q4</b>
<b>Milestone Description/Code:</b>	<b>INT1.PY3Q4</b>
Milestone Phase:	Planning and Implementation
Impact Milestone (Y / N):	Y
Functional Area:	Technology
FA Milestone Description:	The technology associated with the intervention has been tested for proper function. Inputs from patients flow into the EHR, notifications occur as designed, and automated transmission to the RAE takes place as planned.
Supporting Documentation:	1. Report that describes testing that took place and results of the testing as expected (screen shots for a test patient will be included in the report)
Functional Area:	Patient Engagement / Target Population
FA Milestone Description:	The target population is being screened for social needs, and receiving case management follow-up as needed. Positive screens are transmitted to the RAE.
Supporting Documentation:	1. Raw counts and daily averages of screens since the intervention was rolled out 2. A blank example patient consent form



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# Example CI Milestone

<b>Performance Period:</b>	<b>PY5Q2</b>
<b>Milestone Description/Code:</b>	<b>INT1.PY5Q2</b>
<b>Milestone Phase:</b>	Continuous Improvement
<b>Milestone Description:</b>	The SNC has continued monitoring and improving the intervention as laid out in the schedule of ongoing monitoring activities and PDSA (plan-do-study-act) rapid-cycle improvement framework. Additional PDSA cycles have been completed, including analysis of the intervention’s impact disaggregated by race, ethnicity, gender, and other demographic variables related to populations that experience health disparities.
<b>Supporting Documentation:</b>	<ol style="list-style-type: none"> <li>1. Summary of monitoring activities completed, with reports, communication, and other materials to substantiate completion of monitoring activities</li> <li>2. A summary of the most recent PDSA cycle, including analysis of the intervention’s impact disaggregated by race, ethnicity, gender, and other demographic variables related to populations that experience health disparities.</li> </ol>



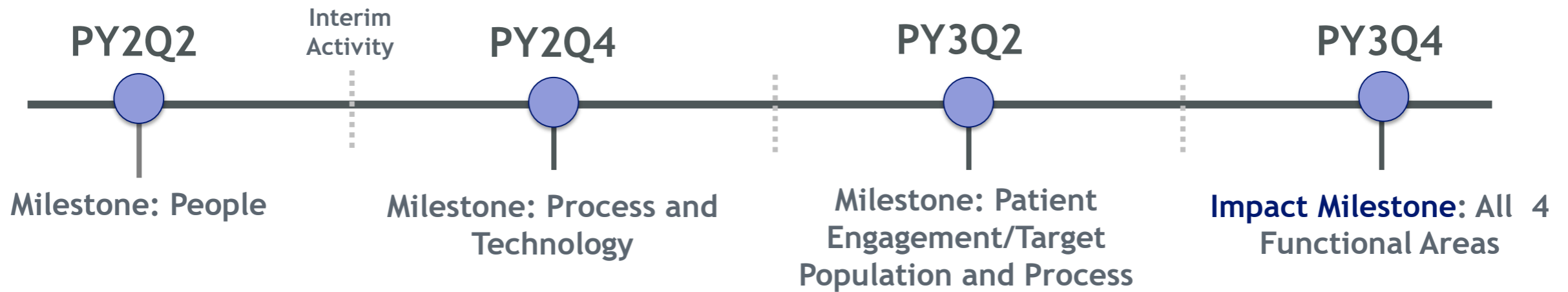
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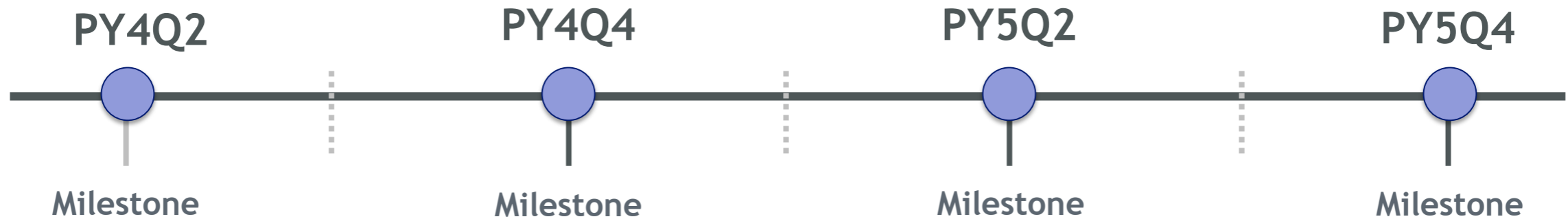


# Milestone Timeline

## Planning and Implementation Phase



## Continuation Phase



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# *Hospital Index Measure Milestones*



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# *Milestones for Hospital Index Measure*

- The SW-COE1 Hospital Index Measure is a statewide measure of potentially avoidable care/actionable events across procedural episodes
- Designed to stand up and support a continuous learning environment
- May then be leveraged for other interventions or hospital processes
- There are pre-defined milestones to support achievement of the Hospital Index Measure



# Hospital Index Measure Milestones

Phase	Q	PY2 (Oct. 2022 - Sept. 2023)	PY3 (Oct. 2023 - Sept. 2024)	PY4 (Oct. 2024 - Sept. 2025)	PY5 (Oct. 2025 - Sept. 2026)
Planning and Implementation Phase Milestones	Q2	Impact Milestone	N/A	N/A	N/A
		N/A	Milestone Description; Continuous Improvement Activities, Impact and Reporting	Milestone Description; Continuous Improvement Activities, Impact and Reporting	Milestone Description; Continuous Improvement Activities, Impact and Reporting
Continuous Improvement Phase Milestones	Q4	Milestone Description; Current State Assessment; Stakeholder Assessment; Continuous Improvement Activities, Impact and Reporting	Milestone Description; Current State Assessment; Continuous Improvement Activities, Impact and Reporting	Milestone Description; Current State Assessment; Continuous Improvement Activities, Impact and Reporting	Milestone Description; Current State Assessment; Continuous Improvement Activities, Impact and Reporting

*Under the Hospital Index Measure, hospitals only complete one impact milestone, during PY2Q2 (Jan. - Mar. 2023). Continuous Improvement milestones begin PY2Q4 (Jul. - Sept. 2023) and continue for the remainder of the program.*



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# *Milestones for Hospital Index Measure*

- Prescriptive requirements apply to each milestone for the duration of the program
- Specifications for the hospital index measure milestones are detailed in the *HTP Implementation Plan Template and Milestone Requirements*
- This document can be found here:  
<https://hcpf.colorado.gov/colorado-hospital-transformation-program>



# *Questions*



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# *Next Steps and Resources*



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# Next Steps

Upcoming training prior to September 1, 2021 will cover:

- Obtaining hospital-specific link to Implementation Plan submission tool
- CPAS portal walk-through
- Completing the online Implementation Plan submission tool
- Additional question and answer session



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# Resources

## Reference materials:

- Implementation Plan Template and Milestone Requirements
  - HTP website
- Implementation Plan Review Criteria
  - HTP website
- Example Milestones - Social Needs Screen - email
- Implementation Plan Quick Reference Guide - email

## Website link:

<https://hcpf.colorado.gov/colorado-hospital-transformation-program>



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# *Thank You*

Department of Health Care Policy & Financing



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