

Hospital Transformation Program Newsletter



COLORADO
Department of Health Care
Policy & Financing

Hello HTP Stakeholders,

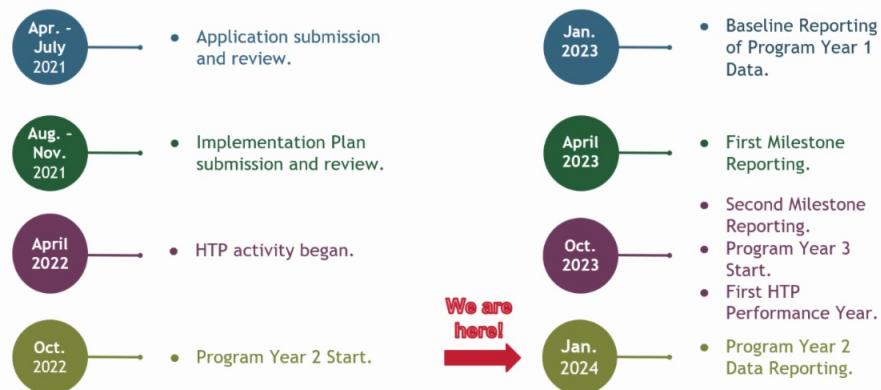
“Happy New Year!” and welcome to the January 2024 edition of the Hospital Transformation Program (HTP) newsletter. As we begin 2024, we are resolute in our commitment to supporting the hospitals and their community partners along their HTP journey. The structured changes that we began seeing implemented in the past year will only be accelerating in this new year. 2024 is the year of “Go-Live!” for the HTP. January is a busy month for hospitals as in addition to interim activity and CHNE reporting, they are also submitting their self-reported measures data for program year 2. We’ve got some great info, trainings, and opportunities for you to look forward to in this month’s newsletter. Thank you for reading.



Matt Haynes
Special Finance Projects Manager

HTP Timeline

HTP Timeline & Milestones



HTP Workgroups

The [HTP Hospital Workgroup](#) will occur Jan. 18 from 10 a.m. to 12 p.m. The agenda will include general and performance year FAQ Updates. The workgroup will also cover Program Year 2 Reporting, Quarterly Reporting scoring, timeline and scoring review and reconsideration period (SSRP). If applicable, Performance Measure updates will also be discussed. This will be a great HTP workgroup that covers all the great things happening in the HTP and we are excited to see you there!

The Naloxone Project (TNP) Has Expanded into Health Clinics!

In an effort to get naloxone access to every community in Colorado, The Naloxone Project (TNP) has expanded into health clinics. After working with 108 Emergency Departments and 50 Labor & Delivery rooms across the state, TNP received requests

from clinics to receive naloxone for patients who are uninsured, underinsured, have poor access to health care, and patients at risk of opioid overdose. In March 2023, TNP received 6,000 doses of Narcan through the Colorado Department of Public Health and Environment's (CDPHE) Naloxone Bulk Fund. Since March, 5,442 of the 6,000 doses have been distributed to 53 clinics across Colorado. A diverse group of clinics have enrolled; primary care, OB/GYN, behavioral health, dental, and orthopedics. TNP is honored to support these clinics in distributing this life-saving drug to their communities.

The goal is to enroll 45-50 more clinics in the program with this second donation of naloxone. If your clinic is interested in receiving free naloxone for your patients, please respond to [this survey](#). If you have any questions, please contact our outpatient project manager, Ms. Kristen Ashworth, at kristen@naloxoneproject.com.

New Screening, Brief Intervention, and Referral to Treatment (SBIRT) Trainings!

[November and December training dates are posted!](#) This includes trainings for SBIRT skills, motivational interviewing, and the new SBIRT implementation 101 series!

Screening assists providers in identifying and intervening with patients at risk for health problems due to alcohol and other drug use.

Learning Objectives:

- Summarize the relationship between substance use and health
- Describe SBIRT as an evidence-based public health approach for screening patients for alcohol, tobacco, and other drug use
- Demonstrate how to incorporate SBIRT into practice

Contact SBIRTinfo@peerassistanceservices.org to schedule a training for your organization.

Assistance in Lowering HQIP Primary Cesarean rate

The Colorado Perinatal Care Quality Collaborative is launching a 1-year [SOAR Learning Collaborative](#) to support Colorado hospitals to achieve and maintain the Healthy People 2030 cesarean target rate of 23.9% among first-time, low-risk birthing people.

The [SOAR](#) Learning Collaborative leads hospitals in implementing the [Safe Reduction of Primary Cesarean Birth AIM Patient Safety Bundle](#). To do this, they facilitate a free, collaborative learning environment for hospitals to foster partnerships and accelerate quality improvement. Each hospital in Colorado faces both universal and unique challenges when approaching Quality Improvement, so in 2024, CPCQC will offer a 2-track model to tailor their support to hospital needs:

- The Learning Collaborative offers intensive support to hospitals with cesarean birth rates [above](#) the Healthy People 2030 goal of 23.6%.
- The Sustainability Collaborative assists hospitals with average cesarean birth rates [below](#) 23.6% to sustain the high-quality care that makes this possible.

All participating hospitals benefit from collaborative learning meetings, rapid cycle data feedback, and tailored quality improvement coaching. Their goal is to offer hospitals the support needed to sustain care delivery and outcome improvements beyond participation in their programming.

[Enroll your hospital in the 2024 program at this link!](#)

The deadline for enrollment is Jan. 15. Email info@cpcqc.org to request an extension. Participation in this free program is a 1-year commitment and is kicked off by our SOAR Forum on Feb. 9, a free event focused on Primary Cesarean reduction which is open to

any L&D caregiver or hospital administrator regardless of hospital participation in the SOAR program. [Register](#) to attend the in-person SOAR Forum today.

New Inpatient Referrals Platform

This electronic platform is being developed by the Behavioral Health Administration (BHA) so that agencies and local hospitals/medical centers will have access and transparency to find out when/where psychiatric beds are available across the state and in real-time. This platform hopes to assist and support inpatient and residential referrals through emerging technologies. | **Launching this month!**

Project Overview:

- Colorado's Behavioral Health Administration is currently building an Inpatient Referrals Platform guided by [House Bill HB19-1287](#).
- This platform will allow behavioral health providers and other providers of social services to gather accurate residential treatment availability information and facilitate the referrals and placement process.
- In future iterations of the platform, the BHA may expand the scope to include outpatient services as well as other services that support Social Determinants of Health.

Stay in the Loop!

You can participate in the creation of this platform. Email abigail.fisher.state.co.us if you want to be considered to be a test user for the platform.

Rural Provider Access and Affordability Stimulus Advisory Committee

The [Rural Provider Access and Affordability Stimulus Advisory Committee](#) and the HCPF Executive Director have reached a consensus for award recommendations for the Rural Provider Access and Affordability Stimulus Grant of \$10,600,000. HCPF is now working with hospitals to get set up to receive funding. There are seven executed grant agreements, and hospitals are launching these projects.

For more information and to view the list of grant awardees, their projects, and the estimated award amounts [visit the rural provider access and affordability webpage](#). Additional information regarding more grant opportunities is posted on HCPF's [American Rescue Plan Act \(ARPA\) Grant webpage](#).

Please direct any questions to hcpf_RuralGrantProgram@state.co.us.

CO-CARES

CDPHE has officially [launched](#) the Colorado Alliance for Resilient and Equitable Systems (CO-CARES) program aimed at providing support for health care workers across the state. The initiative is a direct result of Senate Bill 22-226: Programs to Support Health Care Workforce.

The Colorado Hospital Association, which led a coalition of health care organizations in supporting the bill, is serving as the hospital outreach partner for the program and collaborating with CDPHE and the University of Colorado to connect health care workers with resources to support workforce wellness, pandemic recovery, individual and organizational resilience, and more.

Learn more about the program on the CO-CARES [website](#) or reach out to cha.communications@cha.com for more information.

Colorado Safety Net Collaborative

The Colorado Safety Net Collaborative has received its IRS nonprofit designation. The Collaborative represents the 40 safety net clinics in Colorado that are not Federally Qualified Health Centers nor Rural Health Centers. The clinics serve Health First Colorado members and the uninsured.

As a result, they are transitioning to independent status and will no longer be using a fiscal intermediary.

In addition, our new email address is live: cosafetynet@gmail.com.

These clinics serve people across Colorado in areas CDPHE has identified as high-risk health communities. These clinics provide services at little or no cost to patients, whether they are using Health First Colorado, or they are uninsured or underinsured, which is a growing population that they serve.

Telligen Learning Assets and Support

[Telligen QI Connect™](#) provides [no-cost support throughout CO](#). The Centers for Medicare and Medicaid Services (CMS) funds and calls upon both the Telligen Quality Innovation Network-Quality Improvement Organization (QIN-QIO) and Hospital Quality Improvement Contractor (HQIC) teams to help with many of the same challenges you are tackling head on through your HTP and HQIP work locally. You are invited by Telligen QI Connect™ to:

- Join any of the QIN-QIO and/or HQIC events on the [events calendar](#).
 - Receive push notifications of QIN-QIO events and resources by [joining the \(no cost, no obligation\) QIN-QIO network](#).
 - Think of Telligen QI Connect™ as [no-cost workforce extenders](#). Do you have vacant positions, gaps in internal resources, employee orientation or education needs for specific topic areas, or a wish/to do list of important tasks that you haven't been able to get to? [Ask us if we can help!](#)
 - Request [enhanced technical assistance](#) by [submitting a request here](#).
 - Contact Meredith Koob, mkoob@telligen.com with any questions.
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Community Engagement Resource

The Assessing Community Engagement project from the National Academy of Medicine (NAM) [Leadership Consortium: Collaboration for a Value & Science-Driven Health System](#) is funded by the Robert Wood Johnson Foundation. Guided by a committee of national and community leaders who reflect diverse backgrounds and perspectives, the project aims to provide community-engaged, effective, and evidence-based tools to those who want to measure engagement to ensure that it is meaningful and impactful, with a special emphasis on ensuring equity as a critical input and outcome. As part of this effort, the Organizing Committee developed the [Assessing Community Engagement Conceptual Model \(ACE-CoM\)](#), which identifies outcomes associated with meaningful community engagement. More information is on their [website](#).

Thanks to the Community Advisory Council (CAC) for sharing this resource.

Fentanyl Accountability and Prevention Act (HB22-1326)

[House Bill 1326](#) officially dubbed the Fentanyl Accountability and Prevention Act, will go into effect July 1, 2023. There is a lot that the bill implements. One area of note for HTP hospitals implementing interventions to initiate Medication-Assisted Treatment (MAT) in the emergency department, is that the bill requires community correctional facilities to begin providing MAT - considered the gold-standard way to treat opioid-use

disorders. If they can't offer MAT, the programs must help inmates assess MAT providers in the community.

Colorado AIM Substance Use Disorder Learning Collaborative

[Colorado AIM: Substance Use Disorder Learning Collaborative \(CO AIM: SUD\)](#) is a cohort of hospital labor and delivery units (L&Ds) receiving technical assistance and peer-learning opportunities to improve the quality of patient care for pregnant and postpartum people in Colorado experiencing substance use, depression, or anxiety. This can boost your team's performance if you've chosen measures on HTP related to screening and referral for perinatal depression and anxiety, social needs screening and notification, or discharge planning with RAE notification for mental illness or substance use disorder.

In 2023, CO AIM: SUD has some exciting new offerings!

The opportunity to sign up for a new program through [IMPACT BH](#) to receive one-on-one, hands-on support from a team of experts on initiating medication for opioid use disorder (MOUD) and dispensing take-home naloxone on inpatient L&D. Each L&D will receive \$2,000 for staff appreciation for participating! This new offering is funded by the Behavioral Health Administration; hospitals can partake even if they do not participate in CO AIM: SUD.

A new CPCQC QI Awards Program offers any participating CO AIM: SUD team the ability to earn up to \$400 for staff appreciation funds per quarter, per L&D, for active participation in the project! Hospitals will also be eligible to earn year-end awards.

[Supporting Vaginal Delivery for Low-Risk Mothers \(SOAR\)](#) is an initiative to reduce unnecessary cesarean delivery for low-risk, first-time mothers. CPCQC works with hospital L&D units to provide technical assistance in implementing recommendations on NTSV Cesarean reduction from ACOG and the Society for Maternal-Fetal Medicine (SMFM). This initiative can help you meet your primary Cesarean goals for CMS or the HQIP Cesarean section measure.

SOAR has exciting new opportunities this year for hospital teams!

A new CPCQC QI Awards program offers any SOAR team the ability to earn up to \$200 for staff appreciation funds per quarter, per L&D, for quarterly data submissions. Hospitals will also be eligible to earn year-end awards.

To learn more, email info@cpcqc.org.

Prescriber Tool

The Prescriber Tool helps Coloradans save money on health care by empowering providers with information on prescription drug costs and affordable alternatives. It reduces administrative burden for providers, while also improving convenience for patients. The Prescriber Tool is a complementary statewide effort under the Hospital Transformation Program and completion of the attestation process.

[You can also visit our Prescriber Tool Project webpage for more information.](#)

Public Dashboard

The Collaboration, Performance and Analytics System (CPAS) hospitals will be using for HTP has a public dashboard that stakeholders can access to view each participating hospital's measures and interventions. The information is sortable and can be exported into Microsoft Excel. This is a nice tool for exploring all the interventions that the hospitals will be implementing and the measures that the interventions are focused on. Go to the [dashboard](#).

Community Advisory Council

The Community Advisory Council has suspended meetings into 2024. At this time, no update is available

The Council has yet to discuss the next steps as it pertains to providing perspective to the HTP and the community awareness of and engagement with the program. Previous agendas, materials and notes from previous meetings are on the [Community Advisory Council website](#).

Colorado Healthcare Affordability and Sustainability Enterprise (CHASE) Board meeting

The next Colorado Healthcare Affordability and Sustainability Enterprise (CHASE) Board meeting will take place [via Zoom](#) on **Tuesday, Feb. 27, at 3 p.m.**

Additional information about the board, as well as meeting materials, are on the [CHASE Board website](#).

Helpful Links & Program Contact

[HTP Communications archive](#)

[Community Advisory Council website](#)

[CHASE Board website](#)

[HTP website](#)

Email HTP Program
Contact

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