

Inpatient Hospital Review Program (IHRP) 2.0: Joint Operating Committee (JOC)
March 2, 2023

Presenter: Katie Dobler RN MSN, HCPF Clinical Operations Nurse Consultant

Welcome/Introductions

Ms. Dobler welcomed participants and reviewed the agenda.

Updates/Reminders

- IHRP is required by SB 18-266 Controlling Medicaid Costs.
- The original program was suspended on April 1, 2020.
- The Department and Kepro reviewed historical data and best UM practices to develop the next generation of IHRP – called IHRP 2.0.
- Goals include appropriate utilization, enhanced care coordination, leveraging Kepro’s superior systems capabilities and having a positive impact on quality of care for Health First Colorado Members.
- IHRP 2.0 will commence with a soft launch from April 3, 2023 to April 30, 2023. Providers are encouraged to submit Pre Admission and Post Admission Reviews during this time to test internal processes and connectivity. We also welcome your help in identifying areas of opportunity and improvement.
- Claims to the Fiscal Agent will begin denying for lack of Pre Admission Review for dates of service May 1, 2023 and beyond.

IHRP 2.0 Program Components

Many resources, including an updated infographic, have been posted to the [Department’s IHRP website \(https://hcpf.colorado.gov/IHRP\)](https://hcpf.colorado.gov/IHRP).

- Surgery PAR should be completed first.
- Kepro reviewers will look for a completed Surgery PAR prior to completing a Pre Admission review.
- Kepro will review the inpatient admission to confirm that the inpatient admission is appropriate (they will not re-review the medical necessity of the surgery, as that determination has already been rendered through the procedure PAR).
- The Pre Admission Review may result in denial if the review of the medical appropriateness of the inpatient stay determines it is not appropriate.

Example Patients/Case Reviews

1. 55-year-old male, scheduled for Lumbar Fusion:
 - A surgical procedure PAR should be submitted and approved for the Lumbar Fusion before the surgery date.
 - The surgical procedure PAR is approved.

- Because the patient will require an inpatient stay after this surgical procedure, and because Lumbar Fusion is included on Step 1 (Pre Admission Review) of IHRP 2.0, an inpatient PAR should be submitted prior to admission to an inpatient bed.
2. 45-year-old male, admitted inpatient for Cellulitis of Left Lower Extremity, for IV antibiotic therapy and wound care:
 - No Pre Admission Review required.
 - Day 3: initial broad-spectrum antibiotic therapy.
 - Day 4: wound culture provides sensitivity to different antibiotic.
 - Day 6: patient continues therapies, not expected to discharge for 3 more days. Complete Step 2 (Post Admission Review) to collaborate with RAE regarding discharge needs based on patient's primary diagnosis.
 3. 16-year-old, female, multi-system trauma patient admitted 30 days ago. Inpatient stay has included intensive care, progressive care, and medical surgical care.
 - Plan to discharge in 10 to 14 days.
 - Complete Step 3 (Post Admission Review) to collaborate with RAE regarding discharge needs.
 4. 30-year-old female, G2 P1, with history of normal sterile vaginal delivery, admitted through ED with SROM, delivers vaginally with no complications.
 - Patient has uncomplicated post-partum care and simple discharge planning.
 - She discharges home after 2 days.
 - This patient bypasses IHRP 2.0 because:
 - ✓ A vaginal Labor and Delivery stay does not require a Pre Admission Review, bypassing Step 1.
 - ✓ The patient's length of stay is 2 days, bypassing Step 2 and Step 3.

Post Admission Review Questions

The questions that will be included in the Post Admission Reviews on Day 6, 30, 60 and every 30 days thereafter are listed below. Each question must be answered.

1. Member has a complex discharge/transition plan, does the hospital request outreach and assistance from the Member's RAE?

Answer: Yes/No and free text box for explanation (Note: if you select "yes," an explanation is required)

2. Has a Health-Related Social Needs Screening (HRSN) been completed?

Answer: Yes/No and clickable options for identified determinants (housing, food, transportation, financial, interpersonal safety, none) and free text box for explanation

3. What is the anticipated level of care upon discharge/transition?

Answer: clickable options (SNF, LTAC, Home with skilled nursing, ALF, Home, and Other) and free text box for explanation

4. Have any barriers for the member's discharge been anticipated or identified?

Answer: Yes/No and free text box for explanation

5. Are there identified comorbidities and/or chronic conditions that are affecting or preventing the members transition or discharge?

Answer: Yes/No and free text box for explanation

6. Is the Member expected to discharge/transition with more than 10 medications?

Answer: Yes/No and free text box for explanation

7. Member is pending transition discharge but has new needs that may be a barrier to transition/discharge?

Answer: clickable options (DME, Supplies, PDN, Home Health, Personal Care Services, PT, OT, SLP, Other) and free text box for explanation

8. Has the hospital identified a risk of readmission for the member?

Answer: Yes/No and free text box for explanation

9. Please provide any additional information for the RAEs not previously mentioned:

Answer: free text box

Training

Training began 2/21/23. The training sessions (in order they should be taken) are:

1. Intro to IHRP 2.0-completed
2. System Overview-happening now
3. IHRP Benefit Specific Training
4. Q&A Sessions

All trainings will be recorded and posted on the IHRP webpage. The schedule can also be found there.

If you have feedback or additional training questions or requests, please use the Kepro email (coproviderissues@kepro.com) or customer contact center (720) 689-6340 and/or the Department UM Inbox (HCPF_UM@state.co.us) to alert us.

Discussion

1. Can a surgery (procedure) PAR be approved but the IHRP Pre Admission Review be denied, indicating that the surgery is approved but only as an outpatient procedure?

Yes.

2. Are Day 30 Post Admission Reviews only for patients who are inpatient?

Yes. But you can use the RAE contacts we are providing to support IHRP and reach out for assistance on others.

3. If a surgical procedure PAR is approved and the patient isn't expected to be inpatient, but then has a complication, do they need a PAR?

Yes. The inpatient Pre Admission Review can be entered retro with clinical information to explain why.

4. Do doctor's offices submit the procedure PAR and hospitals submit the inpatient PAR?

Depends on the hospital, but yes, this is true in some cases.

5. What if we disagree with a Pre Admission Review denial?

The same appeals process applies to these determinations.

6. What trainings should RAEs attend?

The UM Team has attended meetings with RAEs and the ACC team and will continue to be available there. If you have topics you'd like to hear about or discuss, please ask there.

Upcoming JOC Meetings

If you have a topic or question for discussion, please send it to the UM inbox (hcpf_um@state.co.us) with "IHRP" in the subject line.

Wrap Up

Ms. Dobler thanked everyone for their participation and input. The next JOC meeting is March 16, 2023 and 1:00 MST.