# Inpatient Hospital Review Program (IHRP) 2.0: Joint Operating Committee (JOC) March 16, 2023

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

#### Welcome/Introductions

Ms. Dobler welcomed participants and reviewed the agenda.

## <u>Updates/Reminders</u>

- 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.

#### **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
- 5. Colorado Ordering Provider Training

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

The newest training type, Colorado Ordering Provider Training, targets physicians and mid-level admitting providers. It is a brief power point document that can be reviewed in 15 minutes or less.

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.

#### FAQ Update

The Department will update the Q&A document on the IHRP website to include these additional items:

1. Why do we have to re-enter the same information for Admission Review that we entered for the surgery PAR?

We understand the frustration if you are duplicating the work on the surgery and the Pre Admission Review PARs. This as an issue we would like to improve. Unfortunately, we have been unable to do away with the requirement, because the two PARs are required to pay two different claim types (surgical procedure and inpatient stay). Not every provider completes this process in the same way; some surgeons' offices submit only the surgical PAR and not the inpatient PAR (the hospital completes the inpatient PAR). Other providers submit both the surgical and inpatient PAR.

There is a "copy" function in the Atrezzo system that makes the process easier for providers submitting both the surgical and admission PARs. Use of this functionality has been included in the training for IHRP 2.0. The Department and Kepro will continue to work together to make improvements to this process as we are able.

2. If a patient is scheduled for a surgery that needs a Pre Admission Review (and the procedure PAR is already approved) that is NOT intended to be inpatient, but they suffer a complication during surgery and DO need to be admitted, what happens?

Enter a retroactive PAR for the inpatient admission along with pertinent clinical information on the complication. This is the existing process for all PAR submissions. DO NOT DELAY CARE TO SUBMIT THE PAR.

3. Is a Pre Admission Review required for patients who have Medicaid as the secondary payer?

No. When Medicaid is secondary, PARs are not required. IHRP 2.0 is only for members with Medicaid as the primary payer.

#### Resources

The IHRP website includes several resources to support providers. One example is the Post Admission Review Questionnaire. Please review and become familiar with these questions and start thinking about your facility's processes to collect and submit this care collaboration information. Specifically:

When will you plan on collecting the information?

Discharge planning and care coordination begin when the patient is admitted, will you collect the information then?

Who will collect this information?

The discharge planner or bedside nurse?

How will you collect this information?

EHR assessment, EHR alerts, Google form, Excel spreadsheet

## **Upcoming JOC Meetings**

Beginning April 6<sup>th</sup>, JOC meetings will occur **weekly** on Thursdays at 1pm. Our focus will include:

- Soft Launch April 3rd, 2023
- Collaborate with hospitals regarding the functionality of IHRP 2.0
- Experiences with submitting PARs for Step 1
- Experiences with submitting Post Admission Review Questionnaire for Step 2 and Step 3

If you have a topic or question for discussion, please send it to the UM inbox (<a href="https://hcpf\_um@state.co.us">hcpf\_um@state.co.us</a>) with "IHRP" in the subject line.

# **Questions/Discussion**

- For retroactive IP PARs (Pre Admission Reviews), what is the allowed timeframe?
   Please submit as soon as possible, and definitely within existing timely filing.
- 2. Are you removing CPT codes from the Pre Admission Review requirements?
  - Yes. The CPT will be linked to procedure codes, and as we finalize the list we have removed some of the codes that might cause claims payment issues.
- 3. Based on the direction to collect the information for the post admit review, does this mean the information from the review will come directly from the hospitals to the RAE?
  - Kepro will produce reports daily that are sent to RAEs.
- 4. How should we submit Newborn NICU notifications when the newborn does not have a MCD ID #?

As this was addressed in training, Kepro can assist with a description of the process.

# Wrap Up

Ms. Dobler thanked everyone for their participation and input. She reminded participants to contact the Department's UM Team at <a href="https://hcpf.colorado.gov/IHRP">https://hcpf.colorado.gov/IHRP</a>. and visit the IHRP 2.0 webpage at https://hcpf.Colorado.gov/IHRP.

The next JOC meeting is March 30, 2023 and 1:00 MST.