#### Inpatient Hospital Review Program (IHRP) 2.0: Joint Operating Committee (JOC)

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Mission: Improving health care equity, access and outcomes for the people we serve while saving Coloradans money on health care and driving value for Colorado.



# Agenda

- Introduction
- Updates
- Frequently Asked Questions Answered
- Post Admission Review
- Questions



# Program Updates

- Providers can begin submitting cases to Kepro on April 3, 2023
  - (And highly encouraged)
- Claims submitted to the Fiscal Agent will not deny for lack of a PAR until Dates of Service on/after May 1, 2023
- The Department and Kepro will be using the period April 3, 2023-May 1, 2023 as a "Soft Launch"
  - We will be monitoring the Providers submitting Authorizations to determine areas of improvement and opportunity, and where additional education or training may be beneficial



# **Frequently Asked Questions**

- Why are we restarting this program if the Public Health Emergency (PHE) has been extended?
- What is the turnaround time (TAT)?
- Are you using the Inpatient Only (IPO) List?
- Why do we have to re-enter the same information for Admission Review that we entered for the surgery PAR?
- What if someone is already admitted and needs one of the surgeries that requires Pre Admission Review while they are inpatient?



# **Frequently Asked Questions**

- Once a Pre Admission Review has been done, must the service be performed inpatient?
- Will Labor and Delivery require IP notification for both mom and baby?
- In IHRP 1.0 we had issues with members that did not have an ID yet (mostly NICU/babies), what do we do for those that we do not yet have a Medicaid ID?



#### Frequently Asked Questions-Clinical

- What criteria are you using to make medical necessity determinations on Admission Reviews?
- Will the state developed criteria be shared with the hospitals?



# Post Admission Review

- Day 6 Post Admission review for select DRGs
- 30 Day Increment Post Admission Review for all admissions, beginning at Day 30 (30, 60, 90)
- Why did HCPF select Day 6 for Post Admission Review (Concurrent Review)?
- Why is HCPF looking at these codes for Day 6 versus other ones? Is HCPF open to identifying another method to identify these DRGs not based on outlier days?
- What if a hospital does not submit Post Admission Reviews (concurrent reviews)?



## Post Admission Review (cont)

- What if we have an already existing relationship with the RAEs?
- What if the RAEs do not utilize the data sent to them as part of the Program? What is the RAEs' specific requirement to respond on this data sharing?
- What if a member does not have any needs identified at Day 6? Do we still have to enter a Day 6 Post Admission review?



### **Post Admission Review Details**

- What exactly is in the Post Admission Review?
  - Answer questions in the PAR portal, Atrezzo
  - Providers will not have to supply additional documents or attach anything to these cases
- The Post Admission Review Information you will have to provide will be shared in the next few slides



#### **Post Admission Review Details**

- Member has a complex discharge/transition plan, does the hospital request outreach and assistance from the Member's RAE? Provide any additional details for the RAEs in notes section.
- Has a Health-Related Social Needs Screening (HRSN) been completed? If so, please identify which needs were identified check all that apply. (Check Boxes)
- What is the anticipated level of care upon discharge/transition? (Check Boxes)
- Are there barriers to member's discharge anticipated or identified? If yes, please identify the barriers. (Yes/No checkbox with text field for additional details)



#### **Post Admission Review Details**

- Are there identified comorbidities and/or chronic conditions that are affecting or preventing the members transition or discharge? If yes, please identify in the text box.
- Is Member expected to discharge/transition with more than 10 medications? Provide any additional details in notes section.
- Member is pending transition/discharge but has new needs that may be a barrier to transition/discharge? (Check All that Apply): DME, Supplies, PDN, Home Health, Personal Care Services, PT, OT, ST, Other
- Has the hospital identified a risk of readmission for the member?
- Additional Clinical Notes and information for the RAEs





# Questions



## **Contact Information**

Contact us at <u>hcpf\_um@state.co.us</u> Visit the IHRP webpage at <u>https://hcpf.colorado.gov/IHRP</u>



# Thank you!

