

CMS CHANGES –NEW RULES PUBLISHED. MEASURE SUPPRESSION POLICY ADOPTED.

Due to recent and rapid changes in COVID 19 care and outcomes:

1. Significant deviation in national performance results
2. Rapid changes in
 - a. Clinical guidelines, care delivery, treatment, drugs, diagnostic tools
 - b. Generally accepted scientific understanding of the disease
3. Significant national shortages or changes in
 - a. Healthcare personnel
 - b. Medical supplies, equipment, diagnostic tools
 - c. Patient volumes or facility case mix

CHANGES TO CMS QUALITY PROGRAMS

VBP

- FY 2022 -
 - neutral payment adjustment
- Suppress Pneumonia Mortality measure (FY2023)
- Exclude patients with secondary dx of COVID 19 in mortality and complication measures (FY2023)
- Removal of PSI 90 (FY2023)
- Revised baselines for FY2024
 - HCAHPS, HAI and MSPB use CY 2019

HAC

- Suppress 3rd & 4th Q20 HAC penalties for FY 2022 and 2023
- HAIs
 - FY 2022: Jan 1-Dec 31, 2019
 - FY 2023: Jan 1-Dec 31, 2021
 - FY 2024: Unchanged
- PSI 90
 - FY 2022: Jul 1, 2018-Dec 31, 2019
 - FY 2023: Jul 1 – Dec 31, 2019 AND Jan 1 – June 30, 2021
 - FY 2024: Jan 1, 2021- Jun 30, 2022

Readmissions

- Exclude data from 1st & 2nd Q20 for FY 2022, 2023 & 2024
- FY 2022 performance period would be **7/1/17-12/31/19**
- Exclude pneumonia readmission measure for FY 2023/monitor for future
- Exclude those with secondary dx code for COVID19 for FY 2023 and beyond payment adjustment for remaining 5 measures

7.1 READMISSIONS



Medicare Readmissions

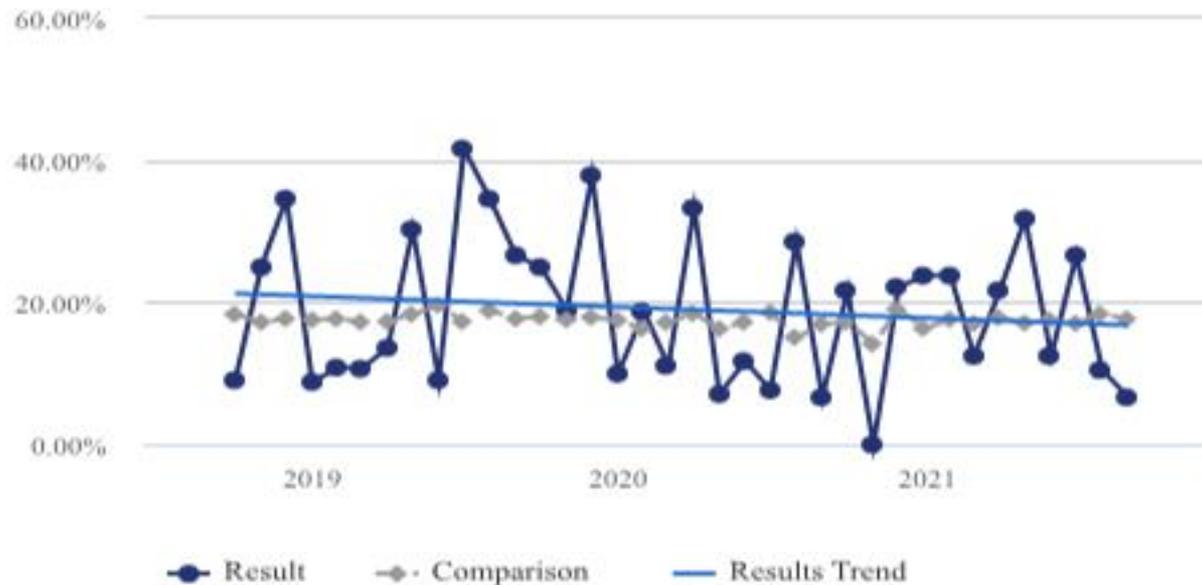
Medicare Average:

No difference from National Average for all hospitals and following diagnoses: HF, COPD, PN, AMI



BH SYSTEMWIDE HEART FAILURE

% 30 Day Readmits w/ Excludes (Any APR-DRG) - System-AllPhysicians

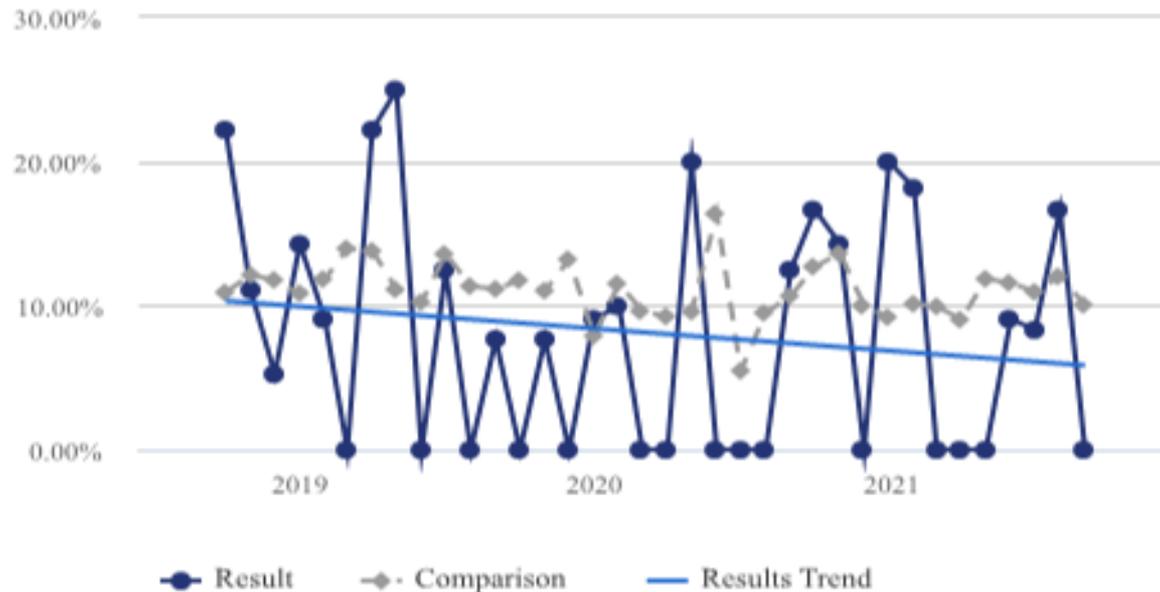


National Observed Rate 21.7%

Oct 2018- Sept 2021
BH Observed Rate 19.3%

BH SYSTEMWIDE ACUTE MYOCARDIAL INFRACTION

% 30 Day Readmits w/ Excludes (Any APR-DRG) - System-AllPhysicians

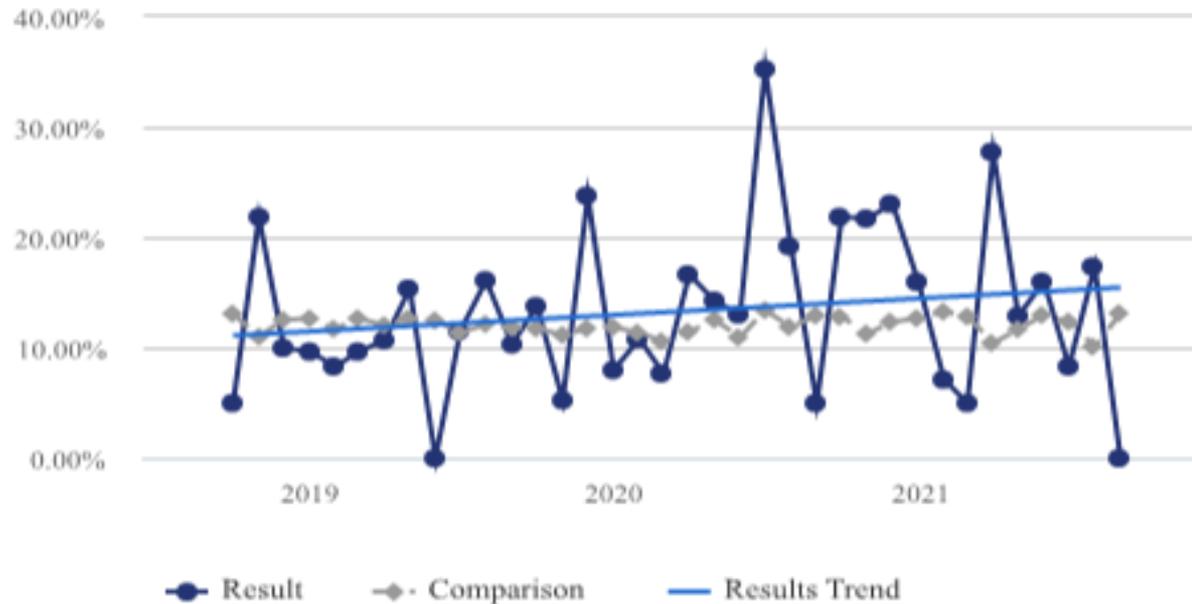


National Observed
Rate 15.7%

Oct 2018 – Sept 2021
BH Observed Rate
8.0%

BH SYSTEMWIDE PNEUMONIA

% 30 Day Readmits w/ Excludes (Any APR-DRG) - System-AllPhysicians

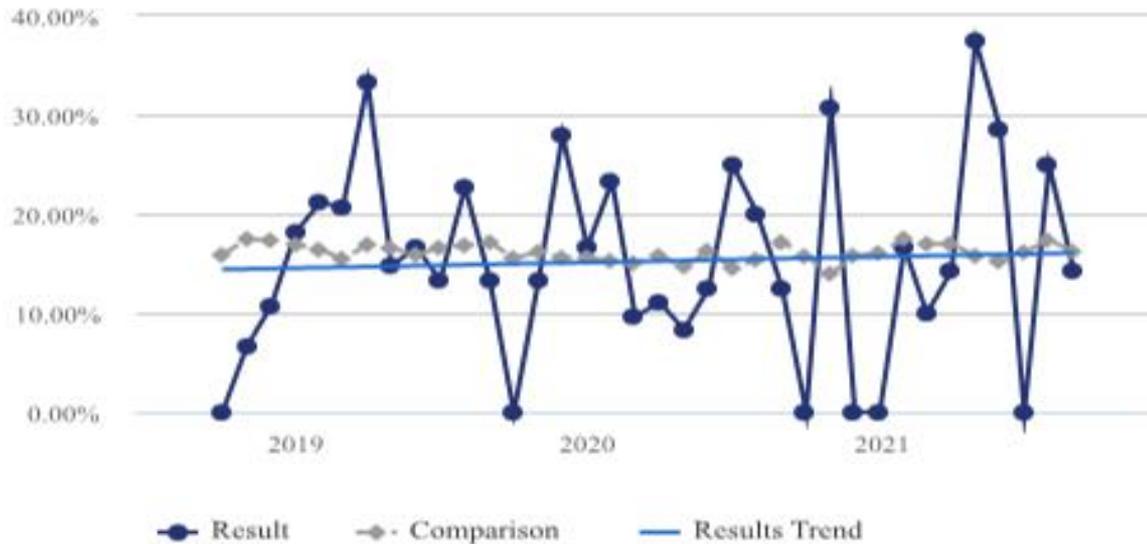


National Observed Rate 16.6%

Oct 2018- Sept 2021
BH Observed Rate 13.2%

BH SYSTEMWIDE CHRONIC OBSTRUCTIVE PULMONARY DISEASE

% 30 Day Readmits w/ Excludes (Any APR-DRG) - System-AllPhysicians



National Observed
Rate 19.6%

Oct 2018- Sept 2021
BH Observed Rate
16.6%

BROWARD HEALTH

COST OF READMISSIONS

3% OF MEDICARE

	Medicare Budget	FY 20 Actual Penalty	FY21 Potential Max Penalty	FY21 Estimated Penalty
BHMC	40,121,500	213,800	1,203,600	TBD
BHCS	13,786,200	90,800	413,600	TBD
BHN	29,727,300	49,000	891,800	TBD
BHIP	12,280,900	58,300	368,400	TBD
<i>Total</i>	<i>95,915,900</i>	<i>411,900</i>	<i>2,877,400</i>	TBD

CMS MEDICARE READMISSION CHANGES

- Feedback from safety-net hospitals.
- Patients are likely to suffer complications after leaving the hospital through no fault of the institutions, but rather because they cannot afford medications or don't have regular doctors to monitor their recoveries.
- Medicare sanctions have been especially painful for safety-net hospitals, so many of their patients carry low-paying insurance or none at all.
- Major change CMS ceased judging each hospital against all others.
- CMS assigned hospitals to five peer groups of facilities with similar proportions of low-income patients.
- Hospital's readmission rates July 2014 through June 2017 against the readmission rates of its peer group during those three years to determine if they warranted a penalty.

BROWARD HEALTH

Region 4 -BHMC

18 Florida Hospitals
Penalties ranged from
2.07% to 0.04%

BHMC was at 0.62%
8 were higher and
7 were lower

Region 2 – BHCS & BHIP

45 Florida Hospitals
Penalties ranged from
3% to 0%

BHIP was at 0.63%
BHCS was at 0.73%
33 were higher and
9 were lower

Region 3 -BHN

24 Florida Hospitals
Penalties ranged
2.07% to 0.04%

BHN was at 0.27%
20 were higher and
3 were lower

READMISSIONS ACTION PLAN

Discharge Process

- D/C education to patient & caregiver
- Follow up appointment made by CM
- Discharge med packets: ABX, Rescue inhaler and Medrol dose packs.

High Risk Readmissions

- Readmission Assessments implemented in Cerner.
- High Risk Daily census sent to CM staff daily.
- Implementation of discharge disposition with readmission.
- CM & CMO Disease specific readmissions teams.
- Intense Analysis data drill down of opportunities.

Transition of Care

- Readmission follow up calls.
- CM referrals to Pop Health via Ensocare.
- CHF & COPD task forces appointment center for follow up care.
- Business cards for appointment center for BHPG primary and specialty care referrals.



Centralized Access Center

1608 S.E. 3rd Ave., Suite 206 • Fort Lauderdale, FL 33316
Schedule an appointment: t 954.759.7500 f 954.759.7510

7.2 JOINT COMMISSION UPDATE



DISEASE SPECIFIC CERTIFICATIONS

BHIP

- Advanced Primary Stroke Center 12/10/2021
- Heart Failure
5/2020

BHMC

- Advanced Comprehensive Stroke Center 6/2021
- Joint Replacement Hip/Knee
8/2021
- Palliative Care submitted application to review program

DISEASE SPECIFIC CERTIFICATIONS

BHN

- Advanced Total Hip & Knee Replacement 3/2020
- Alzheimers Disease 1/2020
- Spine Surgery 11/2019

BHCS

- Advanced Primary Stroke Center 9/2021
- Minimally Invasive Colorectal Surgery 8/2021

FULL ACCREDITATION

BHIP **10/9/2021**

- Full accreditation survey
 - Evidence of Compliance due 12/8/2021
 - 15 findings
 - 7 Life Safety/Environment of care
 - 8 Clinical

BHCS **11/2/2021**

- Full accreditation survey
 - Evidence of Compliance due 1/8/2022
 - 22 findings
 - 12 Life Safety/Environment of care
 - 10 Clinical

FULL ACCREDITATION

BHMC

11/1/2021

- Full accreditation survey
 - Evidence of Compliance due 1/17/2022
 - 31 findings
 - 11 Life Safety/Environment of care
 - 20 Clinical

BHN

12/10/2021

- Full accreditation survey
 - Evidence of Compliance due TBD
 - 26 findings
 - 18 Life Safety/Environment of care
 - 8 Clinical

7.3 LEAPFROG UPDATE



LEAPFROG FALL 2021

- *BHIP* *B* Process/Structural
 - All Regions maximized points
 - Safety Survey- Regions 100 compliant
 - HCAHPS- steady improvements
- *BHCS* *B*
- *BHN* *B* Outcome Measures
 - Hospital Acquired Infections
 - Steady improvements
 - Reduce SIR < 1
 - Patient Safety Indicators
 - Quality & Coding review all potential HACs & PSI
 - Reduction in Hospital Acquired Pressure Injuries
- *BHMC* *B*

Next Public Reporting Period Spring 2022

LEAPFROG FALL 2021

- So close to an A
- BHCS 3.174 (-0.028)
- BHIP 3.168 (-0.034)
- BHN 3.029 (-0.173)
- BHMC 3.0198 (-0.1822)

Grade	Safety Grade Criteria (at or above cut point)	Percentage of Hospitals
A	≥ 3.202	32%
B	≥ 2.991	26%
C	≥ 2.464	35%
D	≥ 1.938	7%
F	< 1.938	<1%

Higher is Better

LEAPFROG FALL 2021

Leapfrog History					
		BHMC	BHN	BHIP	BHCS
Fall	2017	C	B	C	C
Fall	2018	D	A	C	C
Fall	2019	C	C	B	B
Fall	2020	C	C	A	B
Fall	2021	B	B	B	B