

Quantifying Care Transformation Initiatives (CTI)

Version: 7/10/19

This form allows hospitals to propose a Care Transformation Initiatives (CTI) to the HSCRC. There are four fields which are required for hospital submission and an additional two which HSCRC staff will fill out. Please submit the form [hscrc.care-transformation@maryland.gov](mailto:hscrc.care-transformation@maryland.gov).

<b>Required from Hospital: Background Components</b>	
Title of Initiative	Holy Cross Health inpatient palliative care intervention
<p>Overview</p> <ul style="list-style-type: none"> <li>Description of current or upcoming program/initiative which hospitals may be implementing to impact patient outcomes, population health and total cost of care performance under Global Budget Revenues (GBR).</li> </ul>	<p>Inpatient palliative care service providers increased in 2018 and expanded on-site support to Holy Cross Germantown Hospital to daily presence. Chaplain service expand role to address goals of care discussion with high risk patients</p> <p>Hospitalists provided additional education and communication tools on goals of care discussion and completion of MOLST forms</p> <p>Ethics consultation service widely available</p>
<p>Defined Care Interventions</p> <ul style="list-style-type: none"> <li>Briefly describe a standardized intervention pathway to address unmet clinical or social needs.</li> <li>Identify care partners at the hospital, or in the community, who will implement the intervention.</li> </ul>	<p>All patients admitted with initial risk of mortality of 4, will be reviewed by palliative care service with criteria-based consultation</p>
<b>Required from Hospital: Analytic Components</b>	
<p>Identifiable Intervention Population</p> <ul style="list-style-type: none"> <li>Medicare FFS beneficiaries only, until further payer data available</li> <li>Must be identifiable in Medicare claims based on clinical condition, patient history and/or other criteria; cannot be identified with an EHR or clinical data point</li> </ul>	<p>Medicare FFS beneficiaries admitted to Holy Cross Hospital and Holy Cross Germantown Hospital in all medical DRGs with ROM 4. (FY19 23% of age &gt;65 admissions N=4677).</p>
<p>Episode Trigger</p> <ul style="list-style-type: none"> <li>A “trigger” event, or combination of factors, to identify when a beneficiary is enrolled in the intervention</li> <li>Must be identifiable in Medicare claims; cannot be triggered with an EHR or clinical data point</li> </ul>	<p>Admission to hospital. Measure all costs including index hospitalization for six months. Expired patients remain in population.</p>
<b>For HSCRC Analysis and Consideration:</b>	
<p>TCOC Impact and Duration of Episode</p> <ul style="list-style-type: none"> <li>From the information above, HSCRC will estimate the TCOC savings related to the initiatives by calculating the difference in costs for the intervention population before and after the initiative went into effect.</li> </ul>	

Reconciliation Payments

- HSCRC staff will calculate the reconciliation payment that will be made to the hospital for the savings that they produce as part of a CTI.
- The reconciliation payments will be included when the State calculates the TCOC run rate and the required savings for the TCOC Model. The costs may be offset through the MPA-EC in order to ensure any reconciliation payments will remain cost neutral and reward hospitals that meaningfully engage in CTIs.