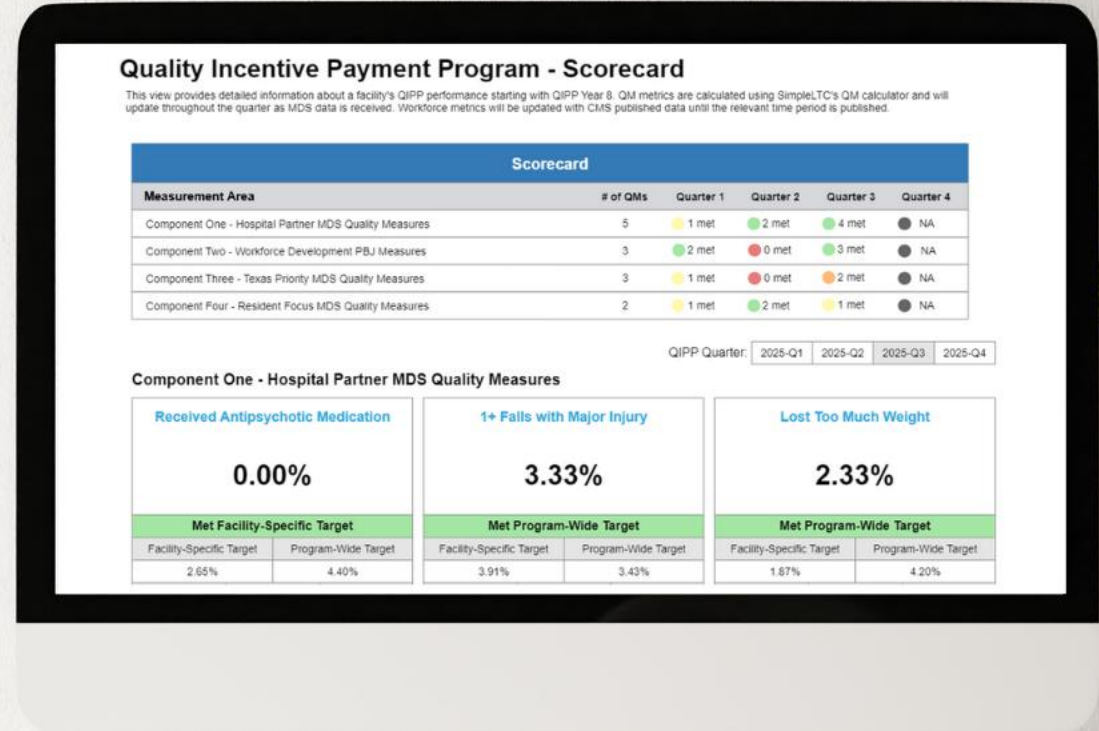


FREE WEBINAR

TUE, JUL 9 | 1 PM CT

Keeping up with TX QIPP

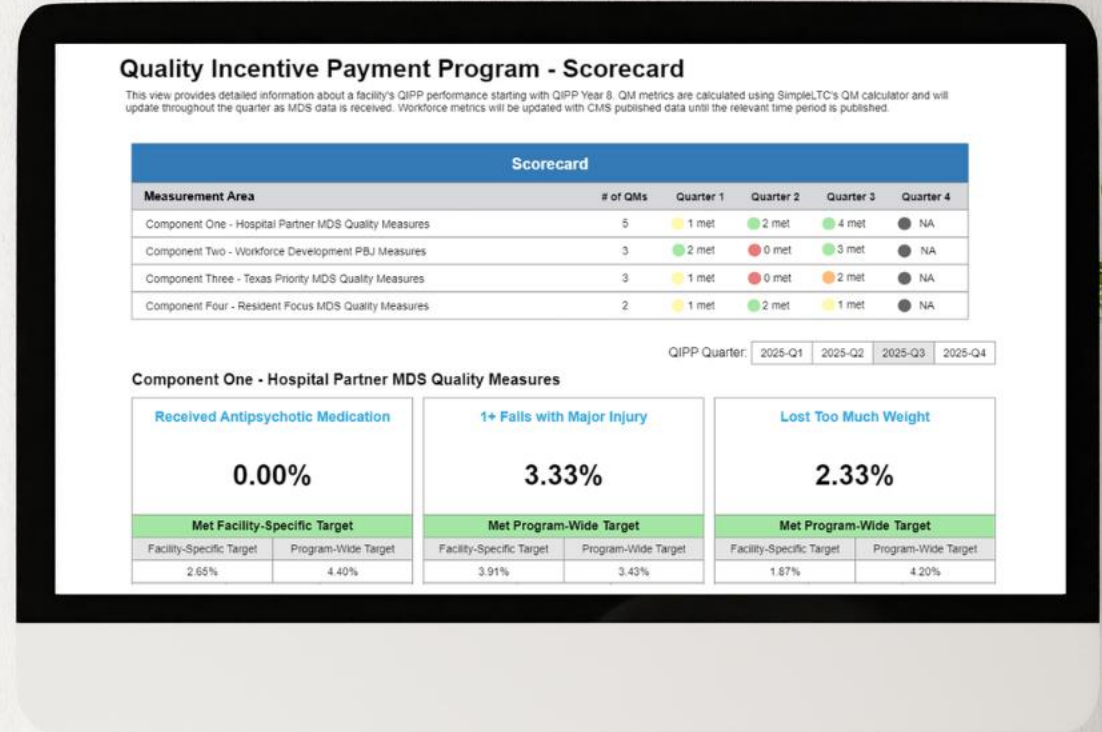
How to navigate QIPP Year 8 with SimpleAnalyzer™



YOUR SPEAKER



Ethan Tayne
Senior Solution Strategist



POLL #1

How are you feeling about the QIPP Year 8 changes?

1. Feeling confident
2. Not sure yet
3. Need to know more
4. Still in the dark

TODAY'S AGENDA

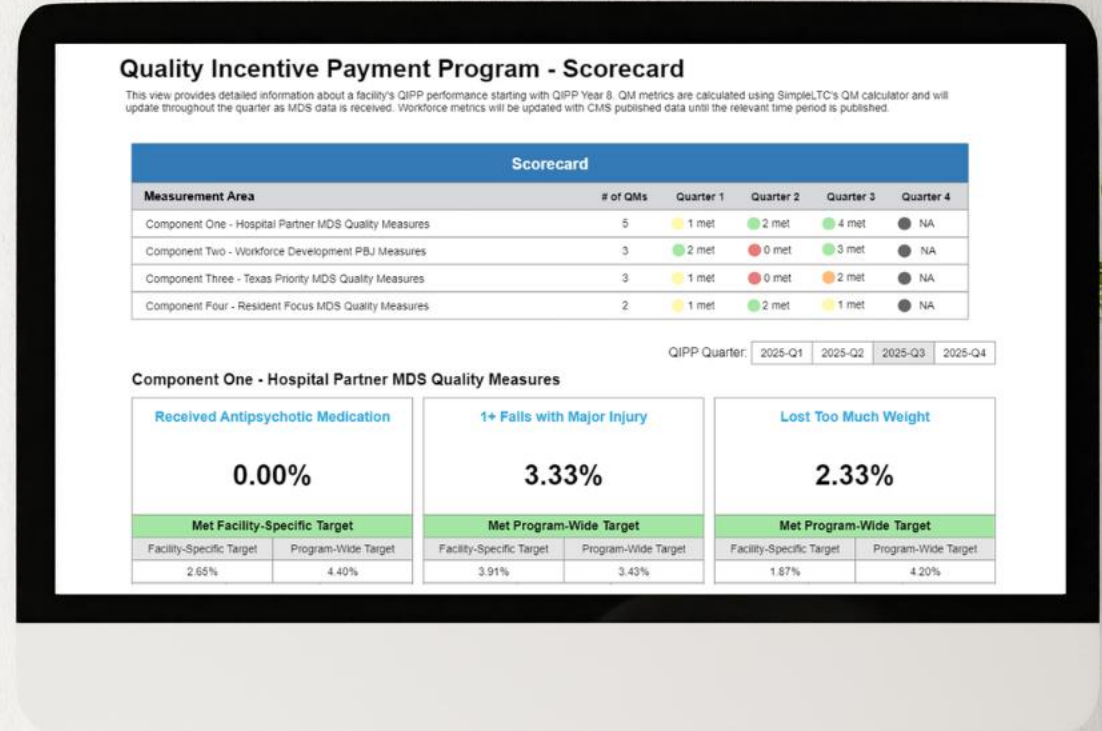


Discuss QIPP 8 Differences

- Sources
- Timing

Define QIPP 8 Terms

- Components
- Targets



Not just another year

- QIPP Year 8 is a major departure from the program structure.
 - Four components but no self-reported data.
 - 4 MDS Quality Measures >> 10 MDS Quality Measures
 - Self-Reported Staffing >> 3 PBJ metrics
 - Quarterly reporting cadence but aligned with calendar quarters.
 - QIPP Quarter 1 – 07/01/2024-09/30/2024
 - QIPP Quarter 2 – 10/01/2024-12/31/2024
 - QIPP Quarter 3 – 01/01/2025-03/31/2025
 - QIPP Quarter 4 – 04/01/2025-06/30/2025

Let's define our terms

- **Component**
 - Component Metrics
 - Achievement Threshold
- **Facility-Specific Targets**
 - Facility Baseline
 - Improvement Target
- **Program-Wide Targets**
 - Program Baseline
 - Allowed Margin of Decline

Let's define our terms

- **Component**

- Component Metrics
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Component 1 – Hospital Partner QMs (NSGO)

[MDS]

Meet 2 metrics to achieve 100% of available funds.

- N031 – Antipsychotic Medication
- N013 – 1+ Falls with Major Injury
- N029 – Lost Too Much Weight
- N024 – Urinary Tract Infection
- N035 – Walking Ind Worsened

[5★]

[5★]

[5★]

[5★]

Component 2 – Workforce Development

[PBJ]

Meet 2 metrics to achieve 100% of available funds.

- Reported Total Nursing Staff HPRD
- Reported Certified Nursing Assistant (CNA) HPRD
- Reported Licensed Nursing HPRD

Component 3 – Texas Priority QMs

[MDS]

Meet 3 metrics to achieve 100% of available funds.

- N030 – Depressive Symptoms
- N046 – New/Worsened Bowel or Bladder
- N036 – Used Antianxiety or Hypnotic Medication

[5★] [v18]

Component 4 – Resident Focus QMs (NSGO)

[MDS]

Meet 2 metrics to achieve 100% of available funds.

- N045 – Pressure Ulcers
- N026 – Catheter Left in Bladder

[5★] [v18]

Let's define our terms

- Component
 - Component Metrics
 - Achievement Threshold
- **Facility-Specific Targets**
 - Facility Baseline
 - Improvement Target
- Program-Wide Targets
 - Program Baseline
 - Allowed Margin of Decline

Each facility has a specific target for each quarter set to the **facility baseline** minus **improvement target**.

- **Facility Baseline** – QM rate from 1/1/2023-12/31/2023
- **Improvement Target** - 5% quarterly for MDS. 1% quarterly for PBJ.

MDS Example: improvement target 5% quarterly

- Baseline Performance 10.00%
- QIPP Q1 Target 9.50%
- QIPP Q2 Target 9.00%
- QIPP Q3 Target 8.50%
- QIPP Q4 Target 8.00%

PBJ Example: improvement target 1% quarterly

- Baseline Performance 2.823 HPRD
- QIPP Q1 Target 2.851 HPRD
- QIPP Q2 Target 2.879 HPRD
- QIPP Q3 Target 2.908 HPRD
- QIPP Q4 Target 2.936 HPRD

Let's define our terms

- Component
 - Component Metrics
 - Achievement Threshold
- Facility-Specific Targets
 - Facility Baseline
 - Improvement Target
- **Program-Wide Targets**
 - Program Baseline
 - Allowed Margin of Decline

Equal to our better than the **program baseline** without declining in performance beyond the **allowed margin of decline**.

- **Program Baseline** – State/National mean from 1/1/2023-12/31/2023
- **Allowed Margin of Decline** – absolute 2% decline from baseline

MDS Example: better than program baseline

- Program Baseline 15.00%
- Facility Performance 10.00% - 2.00% = 12.00%
- **Program-Wide Target 12.00%**

MDS Example: worse than program baseline

- Program Baseline 5.00%
- Facility Performance 10.00% - 2.00% = 12.00%
- **Program-Wide Target 5.00%**

PBJ Example:

- Program Baseline 2.567 HPRD
- Facility Performance 2.823 HPRD - 2.00% = 2.766 HPRD
- **Program-Wide Target 2.766 HPRD**

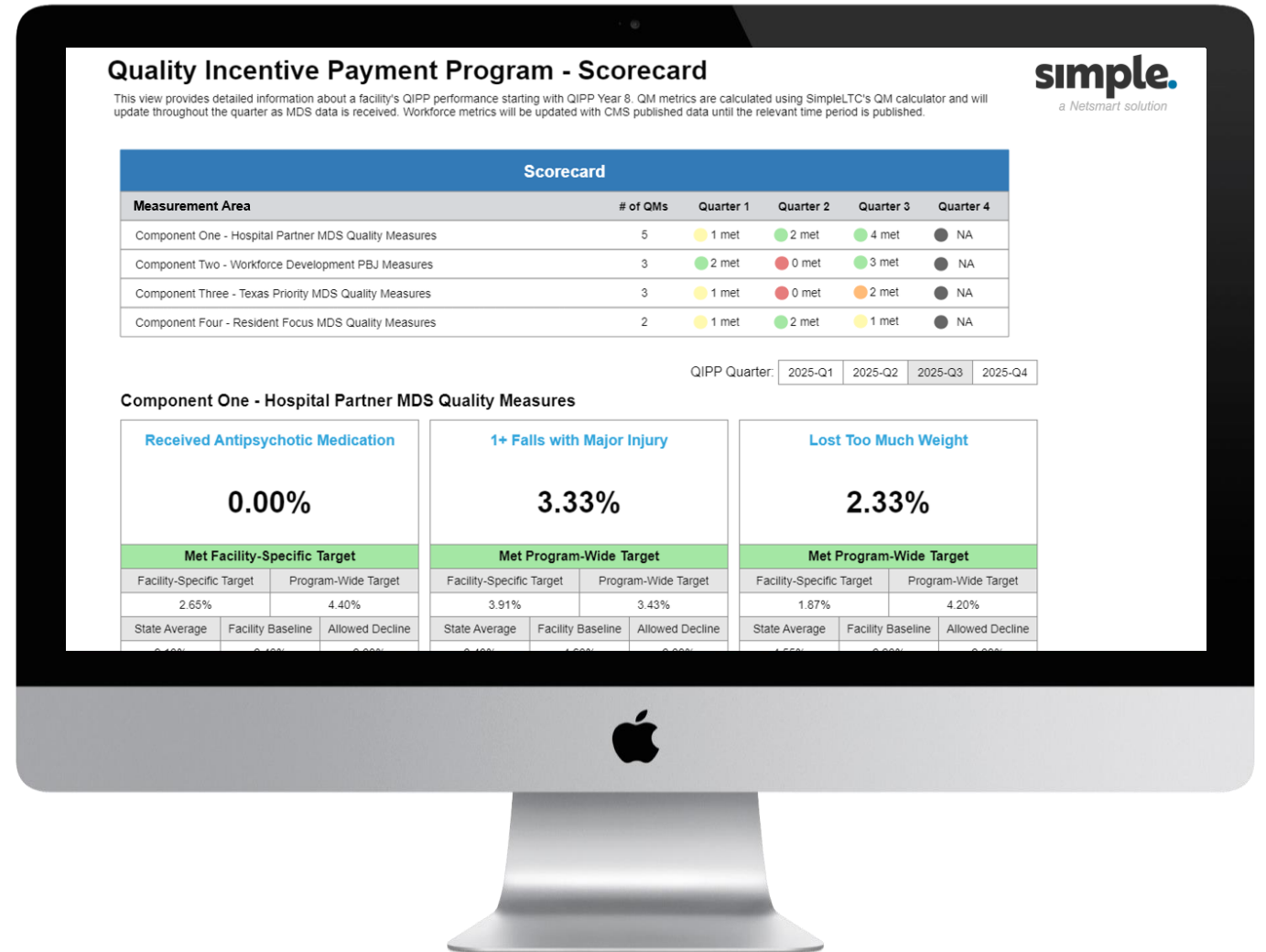
	Component 1 Hospital Partner QMs	Component 2 Workforce Development	Component 3 Texas Priority QMs	Component 4 Resident Focus QMs
<i>Component Metrics</i>	5 x MDS	3 x PBJ	3 x MDS	2 x MDS
<i>Achievement Threshold</i>	2 metrics = 100% 1 metric = 90%	2 metrics = 100% 1 metric = 70%	3 metrics = 100% 2 metrics = 66% 1 metric = 33%	2 metrics = 100% 1 metric = 50%
<i>Facility Baseline</i>	Facility rate from 1/1/2023-12/31/2023 <i>*Baseline performance for new measures (N045 and N046) are set to 2023-Q4 performance.</i>			
<i>Improvement Target</i>	5% quarterly	1% quarterly	5% quarterly	5% quarterly
<i>Program Baseline</i>	State Mean	National Mean	National Mean	State Mean
	<i>All mean values derived from baseline period of 1/1/2023-12/31/2023</i>			
<i>Allowed Margin of Decline</i>	Absolute 2% allowed margin of decline for all metrics.			

SimpleAnalyzer™



Your source for real-time QIPP Year 8 performance

Unlock visibility into this new program and track metrics in real-time against QIPP performance targets.



Scan code or visit simplelhc.com/demo to get started



Q&A SESSION



Thanks for attending!

Recording will be available in the SimpleAnalyzer™ app

(Click “Help” > “Video Demos”)

<https://secure.simpleltc.com>

