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## **Quality Based Reimbursement Timely Follow Up After Discharge for Rate Year 2025**

By CRISP, last updated 5/3/2023



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## Quality Based Reimbursement Program

The user guide is specifically for the Timely Follow Up After Discharge reports on Medicare and Medicaid data. The Health Services Cost Review Commission (HSCRC) is measuring Timely Follow Up After Discharge for the Medicare and Medicaid population as part of the RY 2025 Quality Based Reimbursement (QBR) program, in alignment with the Statewide Integrated Health Improvement Strategy (SIHIS). For more information about the QBR policy, please visit the following HSCRC webpage [https://hscrc.maryland.gov/Pages/init\\_qi\\_qbr.aspx](https://hscrc.maryland.gov/Pages/init_qi_qbr.aspx).

### Methodology

- Pull **IP Acute Admissions** with primary ICD-10 code mapped to the six chronic conditions (asthma, hypertension, heart failure, coronary artery disease, chronic obstructive pulmonary disease, and diabetes) with a discharge status of Home or Home Health; (i.e., do not pull interim claims).
  - IP Admissions sourced from MD regulated acute-care hospitals
  - For mapped chronic conditions:
    - Primary Diagnosis is one of the six conditions; \*or\*
    - Primary Diagnosis is **Related** AND any Secondary Diagnosis is one of the six conditions (see codes in Follow-Up Code Set Document)
- Pull **Outpatient claims with Revenue codes in the Emergency Department and/or Observation** with ICD-10 primary diagnosis mapped to the six chronic conditions.
  - For MD only regulated acute care hospitals
  - Primary Diagnosis is Sufficient or Primary Diagnosis is Related and any Secondary Diagnosis is Sufficient (Codes can be found here: <https://impaqint.com/measure-information-timely-follow-after-acute-exacerbations-chronic-conditions>)
- Pull **Relevant Follow-up codes**, defined as Outpatient Clinic Claims and all Professional Claims:
  - See codes in Timely Follow-Up Code Set Document
- Calculate denominator as all IP/ED/Obs visits for the 6 chronic conditions that resulted in patient being discharged to the community



- Calculate the Reverse Numerator for those in the Denominator **without** a follow up visit in OP Clinic and/or Professional claims within the specified follow-up time frame in Table 1 below:
  - **Table 1. Timeliness of Follow-up by Chronic Condition**

Chronic Condition	Follow Up Days
Asthma	14
Coronary Artery Disease (CAD)	14
Chronic Obstructive Pulmonary Disease (COPD)	30
Diabetes (DIAB)	30
Congestive Heart Failure (HF)	14
Hypertension (HYPER)	7

- NOTE: Reverse Numerator is used to reduce computational burden in the larger (i.e. National) datasets
- Calculate percentage follow up as: (Denominator - Reverse Numerator)/Denominator

\*Note: Those who died during the follow up period are excluded from the denominator

## Benchmarks/Thresholds

The most up to date benchmarks and thresholds can be found on the tab of the current year of the report. As of May 2023, the threshold is 69.93% and the benchmark is 77.67% for the Medicare Population. As of May 2023, the threshold is 51.04% and the benchmark is 64.41% for the Medicaid Population.

## Data Sources

Timely Follow Up Medicare- The Medicare Claims and Claim-Line Feed (CCLF) dataset is used for this report. The specific CCLF dataset used for each year is enumerated on the report's cover sheet. NOTE: The CCLF dataset only includes Medicare Fee For Service (FFS) beneficiaries who are seen in Maryland hospitals. For more information on the CCLF dataset, please view the [CCLF User Guide](#). Benefaries who are dually eligible for Medicare and Medicaid are only in the Medicare report.

Timely Follow Up Medicaid- Medicaid Claims Data. This dataset includes Medicaid Managed Care Organizations and Medicaid Fee for Service. Please note that claims may not be complete as Medicaid MCOs providers have six months to bill, and fee-for-service providers have 12 months.




## Static Reports User Guide

### QBR Report Access/Card

The Follow Up after Discharge Reports can be accessed by visiting [reports.crisphealth.org](https://reports.crisphealth.org) and logging-in with a CRS username and password. There are both summary and detail-level static reports available for both populations. Note: Users may only access the detail-level reports if they are credentialed for PHI access. Timely Follow Up on Medicaid population detail-level report requires explicit approval from hospital POC.

**Step 1.** To access the QBR Report card, a user must first login to the CRISP Reporting Services Portal by visiting [reports.crisphealth.org](https://reports.crisphealth.org). Once in the CRS Portal, a dashboard of different blue report “cards” will appear based on the access permissions of the user. Clicking the card named “HSCRC Regulatory Repots” will bring up the available reports for this category. The following screenshots represent the user’s workflow.

Log in to CRISP Reporting Services (CRS) Portal

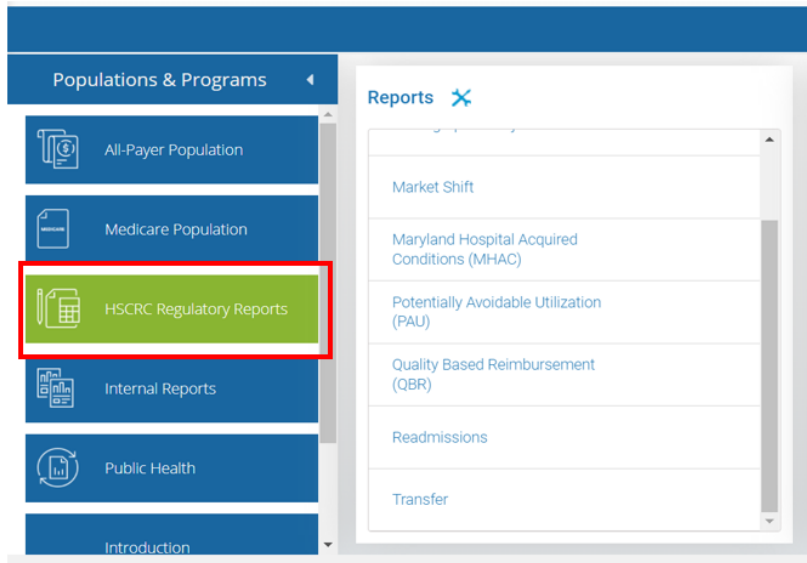
[Reset your password?](#)

Warning: CRISP policy prohibits username and password sharing.  
Violation could result in account termination.

Next

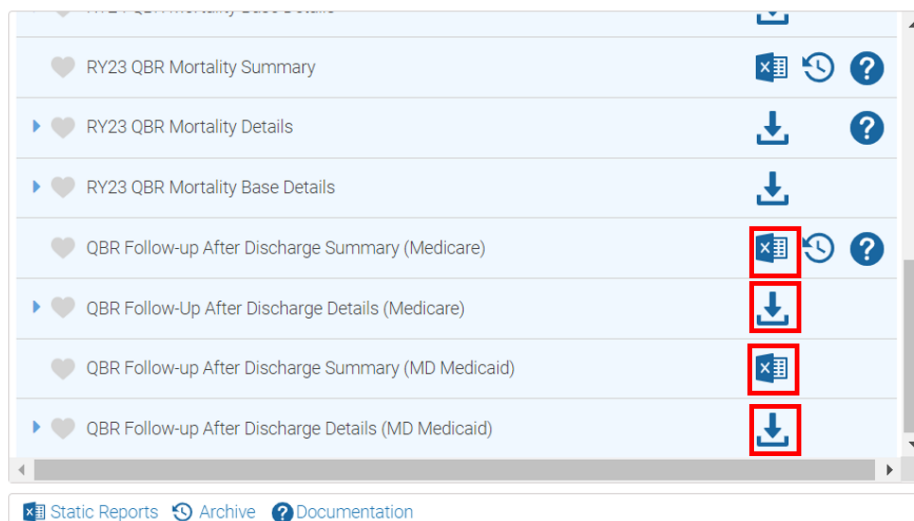


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**Step 2.** By clicking the excel icon as shown below, you will access the most recent static summary file. An excel workbook will open with all available tabs. If you have permission, you will also see the detail level static files as shown below.

## Quality Based Reimbursement (QBR)





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## **Follow Up After Discharge Reports**

You can view the QBR Calculation sheet at the [HSCRC website](#) under the Data Workbooks section to see a more detailed breakdown on scoring.

Sheets included in workbook:

1. Cover Sheet
2. Statewide Tracking
3. Follow Up by Hospital CY\_



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## 1. Cover sheet

The cover sheet provides an overview of each sheet available in the Follow Up After Discharge Report as well as updates and notes about the report.

RY2023 Quality Based Reimbursement (QBR) Follow Up After Discharge		
<b>Data Source:</b>	Medicare Claims and Claim Line Feed	
	CY16 -17 - PP22 CCLF Dataset	
	CY18 - PP39 CCLF Dataset	
	CY19 - PP46 CCLF Dataset	
	CY20 - PP50 CCLF Dataset	
<b>INCLUDED IN THIS EXCEL WORKBOOK:-</b>	<b>Sheet Name</b>	<b>Description</b>
	2. Statewide SIHIS Tracking	State wide aggregation between CY16-20 for NQF 3455 measures.
	3. Follow Up by Hospital CY16	Calendar Year (CY) 2016 performance period data for NQF 3455 measures.
	4. Follow Up by Hospital CY17	Calendar Year (CY) 2017 performance period data for NQF 3455 measures.
	5. Follow Up by Hospital CY18	Calendar Year (CY) 2018 performance period data for NQF 3455 measures.
	6. Follow Up by Hospital CY19	Calendar Year (CY) 2019 performance period data for NQF 3455 measures.
	7. Follow Up by Hospital CY20	Calendar Year (CY) 2020 performance period data for NQF 3455 measures.
<b>Updates:</b>		
<b>Notes:</b>	1. Detailed level reports viewable by hospitals are available for viewing patient level details by hospitals	







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## 3. Follow Up by Hospital CY

These sheets allow users to track the number of eligible discharges and follow-up rates in the specified calendar year by hospital for the six chronic conditions.

For RY25, the base period is FY2022 and the performance period is CY2023.

		CY 2016 Follow-Up Rates																							
Hosp ID	Hospital Name	ASTHMA Eligible Discharg	ASTHMA Follow-Up Receive	ASTHMA Follow-Up Rate	CAD Eligible Discharg	CAD Follow-Up Receive	CAD Follow-Up Rate	CHF Eligible Discharg	CHF Follow-Up Receive	CHF Follow-Up Rate	COPD Eligible Discharg	COPD Follow-Up Receive	COPD Follow-Up Rate	DIABETES Eligible Discharg	DIABETES Follow-Up Receive	DIABETES Follow-Up Rate	HTN Eligible Discharg	HTN Follow-Up Receive	HTN Follow-Up Rate	TOTAL Eligible Discharg	TOTAL Follow-Up Receive	TOTAL Follow-Up Rate			
210001	Meritus	283	201	71.02%	451	358	79.38%	709	547	77.15%	570	489	85.79%	292	213	72.95%	115	95	82.61%	2,420	1,903	78.64%			
210002	UMMC	99	60	60.61%	173	109	63.01%	263	155	58.94%	177	147	83.05%	165	100	61.95%	61	35	57.38%	956	606	64.74%			
210003	UM-PGHC	82	41	50.00%	264	174	65.91%	340	195	57.35%	171	123	71.93%	121	63	52.07%	97	59	60.82%	1,075	655	60.93%			
210004	Holy Cross	142	102	71.83%	365	255	69.86%	541	360	66.54%	266	214	80.45%	168	99	58.93%	172	117	68.02%	1,654	1,147	69.35%			
210005	Frederick	338	262	77.51%	466	365	78.33%	755	577	76.42%	585	511	87.35%	289	206	71.28%	195	132	67.69%	2,628	2,053	78.11%			
210006	UM-Hanford	93	61	65.59%	116	87	75.00%	233	163	69.96%	211	178	84.36%	121	75	61.98%	64	44	68.75%	839	608	72.55%			
210008	Mercy	105	63	60.00%	139	82	58.99%	264	171	64.77%	178	142	79.78%	114	69	60.53%	48	30	62.50%	848	557	65.68%			
210009	Johns Hopkins	195	109	55.90%	347	217	62.54%	641	377	58.81%	286	220	76.92%	285	151	52.98%	96	52	54.17%	1,850	1,126	60.86%			
210011	St. Agnes	210	111	52.86%	361	212	58.73%	547	315	57.59%	466	352	75.54%	278	180	64.75%	166	104	62.65%	2,028	1,274	62.82%			
210011	Sinai	197	105	53.30%	331	211	63.75%	566	339	59.89%	329	247	75.08%	244	146	59.84%	151	88	58.28%	1,918	1,136	59.29%			
210013	Grace Medical center	30	15	50.00%	42	20	47.62%	89	46	51.69%	64	44	68.75%	40	24	60.00%	33	15	45.45%	288	164	56.94%			
210015	MedStar Ft. Square	356	218	61.24%	738	465	63.01%	1,136	799	69.54%	851	665	78.14%	449	261	58.13%	334	210	62.87%	3,964	2,618	66.04%			
210016	Adventist White Oak	83	52	62.65%	264	183	69.32%	286	194	67.83%	118	99	83.90%	100	64	64.00%	67	40	59.70%	918	632	68.85%			
210017	Garrett	31	18	58.06%	34	19	55.88%	60	37	61.67%	61	37	60.49%	26	20	76.92%	13	8	61.54%	245	157	63.78%			
210018	MedStar Montgomery	104	71	68.27%	191	149	78.01%	377	291	77.19%	229	194	84.72%	151	110	72.85%	122	87	71.31%	1,174	902	76.83%			
210019	Peninsula	333	245	73.57%	418	274	65.55%	602	427	70.93%	514	441	85.80%	287	207	72.13%	124	80	64.52%	2,278	1,674	73.49%			
210022	Suburban	151	116	76.82%	193	148	76.68%	379	288	75.99%	266	229	86.09%	146	98	67.12%	115	78	67.83%	1,250	957	76.56%			
210023	Anne Arundel	330	239	72.42%	445	321	72.13%	848	598	70.52%	605	523	86.45%	386	261	67.62%	173	128	73.99%	2,787	2,070	74.27%			
210024	MedStar Union Mem	153	98	64.05%	421	270	64.13%	451	293	64.97%	248	188	75.81%	140	82	58.57%	87	51	58.62%	1,500	982	65.47%			
210027	Western Maryland	146	105	71.92%	317	255	80.44%	441	348	78.91%	324	279	86.11%	176	144	81.82%	126	98	77.78%	1,530	1,229	80.33%			
210028	MedStar St. Mary's	115	81	70.43%	255	202	79.22%	445	343	77.08%	288	257	89.24%	162	119	73.46%	100	75	75.00%	1,365	1,077	78.90%			
210029	W. View	173	110	63.58%	290	188	64.83%	549	372	67.76%	395	321	81.27%	262	160	61.07%	101	62	61.39%	1,770	1,113	62.89%			
210030	UM-Chestertown	68	39	57.35%	53	37	69.81%	143	88	61.54%	153	105	68.63%	92	51	55.43%	38	21	55.26%	527	341	64.71%			
210032	ChristianaCare Union	149	111	74.50%	146	117	80.14%	288	221	76.74%	306	271	88.56%	162	123	75.93%	89	70	78.65%	1,140	913	80.09%			
210033	Carroll	197	134	68.02%	264	203	76.89%	394	293	74.37%	412	345	83.74%	214	141	65.89%	140	102	72.86%	1,621	1,218	75.14%			
210034	MedStar Harbor	115	68	59.13%	174	117	67.24%	346	223	64.45%	277	200	72.20%	131	81	61.83%	67	42	62.69%	1,110	731	65.86%			
210035	UM-Charles Regional	152	84	55.26%	114	65	57.02%	347	237	68.30%	296	244	82.43%	207	133	64.25%	65	47	72.31%	1,661	928	56.47%			
210037	UM-Easton	218	144	66.06%	188	128	68.09%	501	376	75.05%	430	341	79.30%	225	133	59.11%	99	59	59.60%	1,641	1,131	68.92%			
210038	UMMC Midtown	48	22	45.83%	58	32	55.17%	143	81	56.64%	100	68	68.00%	77	40	51.95%	40	23	57.50%	466	266	57.08%			
210039	Calvert	85	57	67.06%	185	153	82.70%	283	219	77.39%	204	173	84.80%	131	74	56.49%	66	45	68.18%	954	721	75.58%			
210040	Northwest	227	140	61.67%	226	139	61.50%	613	405	66.07%	452	347	76.77%	308	183	59.42%	232	152	65.52%	2,058	1,366	66.38%			
210041	UM-BWMC	222	137	61.71%	297	223	75.08%	472	337	71.40%	454	378	83.26%	301	188	62.46%	165	122	73.94%	1,911	1,385	72.48%			
210044	GMCC	105	67	63.81%	93	60	64.52%	202	133	65.84%	157	134	85.35%	172	111	64.53%	61	44	72.13%	790	549	69.49%			
210045	McCready	10	7	70.00%	14	10	71.43%	34	24	70.59%	34	25	73.53%	25	16	64.00%	12	9	75.00%	129	91	70.54%			
210048	Howard County	299	201	67.22%	241	169	70.12%	656	430	65.55%	471	384	81.53%	320	204	63.75%	150	96	64.00%	2,137	1,484	69.44%			
210048	UM-Upper Chesapeake	254	182	71.65%	378	278	73.54%	593	429	72.34%	485	405	83.51%	284	203	71.48%	167	111	66.47%	2,161	1,618	74.87%			
210051	Doctors	220	144	65.45%	187	128	68.45%	641	454	70.83%	347	284	81.84%	318	212	66.67%	139	93	66.91%	1,852	1,315	71.00%			
210055	Laurel	47	26	55.32%	59	40	67.80%	142	87	61.27%	79	57	72.15%	99	28	28.28%	40	30	75.00%	426	268	62.91%			
210056	MedStar Good Sam	203	116	57.14%	457	355	77.68%	830	574	69.16%	454	337	74.23%	284	152	53.52%	198	145	73.23%	2,426	1,679	69.21%			