

CTI – Performance Year 4: Application Process and HOPD Thematic Area

April 2024



CTI Learning System: https://www.crisphealth.org/learning-system/cti/

CTI Policy Resources and Documentation:

- <u>CTI Introduction Policy Guide</u> this document will cover the overarching goals of the program, the program structure and key policy components critical for participation
- <u>CTI Specification and Methodology</u> this document is a comprehensive reference on the methodology and implementation of the program
- <u>CTI Technical Review</u> this document is intended to allow a user to walkthrough the construction of a CTI episode from base claims to reconciliation. A recording of the technical review can be viewed on the learning system.

Contact <u>hscrc.care-transformation@maryland.gov</u> or <u>care.redesign@crisphealth.org</u> for questions on CTIs



Performance Year 4 - CTI Submissions



PY 4 - Timeline for New/Revised CTIs

Performance Year 4: July 2024 – June 2025

There were one new submission for CTI Thematic Area, which is now available in addition to the five existing thematic areas.

- Application period for new / revised CTI opened Monday, April 8th , 2024.
- The application period ends Friday, May 31st, 2024
- Hospitals may add, deactivate or modify existing CTI during this time.
- Hospitals that want to continue an existing CTI without changing the definitions, are not required to resubmit
 - By default, CTIs with no changes and no deactivation notification will rollover to PY4 in their existing definition
- Hospitals that want to deactivate an existing CTI for PY4, must inform HSCRC: <u>hscrc.care-transformation@maryland.gov</u>
 - Hospitals cannot disenroll in the middle of a performance period
 - Hospitals will continue to see results for deactivated CTI through the reconciliation period of PY3

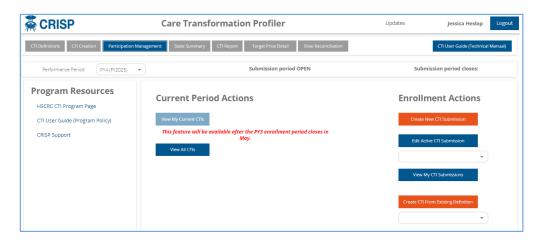
Application Process

All new CTI applications will be made through the Care Transformation Profiler

- Each hospital has designated up to three (3) users to be provisioned as a CTI Submitter. Only those users will have the additional navigation button of "Participation Management"
 - Hospitals should reach out if they need to add or modify these users

Hospitals will be able to use the CTP to calculate the number of beneficiaries that are in the baseline prior to submission.

• Hospitals will also be able to assess their expected MSR prior to the submitting.





Important Considerations During Submission

Baseline:

- In PY4, calendar year 2022 and FY 2023 are also available.
 - Note: New CTIs in PY5 and beyond will be limited to using calendar year 2022 or 2023, or FY 2023 or 2024

Chronic Conditions Flag

- CTIs using baseline CY22 or FY23 baseline year will use Chronic Condition Flag v30
 - All other baselines use CC v27

APR DRGs

- PY4 will use v39 APR DRGs
- All participants should use this version when creating submissions and review/update prior submissions as needed



New Thematic Area: Hospital Outpatient Services (HOPD)



Overview for the New Thematic Areas

- The Hospital Outpatient Services CTI, is the sixth thematic area to be approved
- This CTI is intended for hospitals that have deployed interventions to manage and better direct care of outpatient services (i.e., surgeries, therapies).
- For example, the goals of a CTI could include reducing post-operative complications, improving patient experience, decreasing readmissions, decreasing recovery time and decreasing length of stay.
- Creating a CTI in this new thematic area can be completed in the CTP, following the standard submission process and deadlines
- Please notify CRISP of a new HOPD submission, as we will be completing additional validation

Population Definition for Hospital Outpatient Services



Episode Trigger:

	CPT/HCPCS Codes	NPI Attribution**
Trigger Criteria	Hospitals must submit at least one CPT/HCPCS codes to define their CTI population	All hospitals must provide at least one NPI

^{**} NPI participating in EQIP would not be eligible to participate in this Thematic CTI

Episode Criteria:

	Baseline period	Age	Geographic Service Area	Number of Chronic Conditions	Prior Utilization	Episode Length
Criteria Options	FY2023 (or later as it becomes available)	Hospitals can determine the age range their intervention target	Hospitals may provide a list of 5-digit zip-codes	 Indication a number of chronic conditions, AND.OR Hospital may provide a list of chronic conditions 	 Prior hospitalization OR ED utilization threshold, AND/OR Time window for how recent that utilization was 	Hospitals mya submit an episodes length of: 30, 60, 90, 120, 150, 180
Default if Criteria is not Specified	FY23: July 1, 2022 to June 30, 2023	All Medicare beneficiaries (65+)	Use no geographic restriction	Any condition and no threshold of chronic conditions	No requirement on prior utilization	90 day episode window





CTP Demonstration



Thank You

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