

2012-2013 SMALL HOSPITAL IMPROVEMENT PROGRAM FREQUENTLY ASKED QUESTIONS

QUESTION: When were the 2012-2013 SHIP contracts sent out to hospitals?

Contracts were mailed out to hospitals in mid-September (the week of September 16-22). Included with the contract was a one-page contact sheet requesting hospitals to complete and return with the signed contract.

QUESTION: How can I check on the status of our SHIP contract?

Email SHIP program staff at ruralhealth@kdheks.gov and we will respond back in a timely manner.

QUESTION: How can I update the point of contacts for our hospital?

Email SHIP program staff at ruralhealth@kdheks.gov with the name, title, and email address. We will respond back to the email when the update has been made.

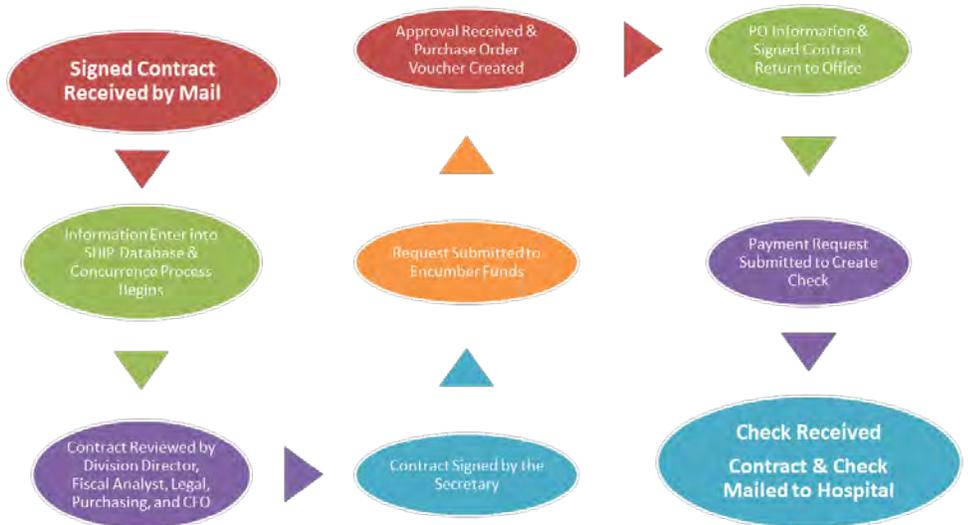
QUESTION: On average, how long will it take for my hospital to receive the grant funds?

Once the signed contract from the hospital is received, the Office will enter the hospital information into our SHIP database and start the contract through the contract concurrence process. If the Hospital has not completed the 2011-2012 year-end report with supporting documents, the concurrence process will be delayed until items are completed.

The contract is reviewed and signed by the Secretary of KDHE. Then a request must be made to encumber the federal grant funds. Finally a payment request is submitted to pay the hospital

(SEE DIAGRAM to LEFT)

From start to finish, this process may take anywhere between 4 to 6 weeks.



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QUESTION: How much money will our hospital receive for the 2012-2013 SHIP grant year?

Each hospital will receive \$8,525. The hospital will receive \$5,000 upon execution of the contract. A second payment of \$3,525 will be made upon receipt of the hospital's mid-year activity and expense report.

QUESTION: How long will the process take to receive the second grant payment?

The time frame for processing the second payment is shorter. Once the SHIP staff has reviewed the mid-year report submitted by the hospital, the payment request is submitted to purchasing. This will take approximately 1 to 2 weeks.



QUESTION: When are the SHIP activity and expense reports due?

Hospitals must submit the mid-year report by March 15, 2013 and a year-end report by September 15, 2013.

QUESTION: Can the hospital submit its mid-year report early and receive the second payment before March 15?

Yes – the hospital may submit the mid-year report before the deadline. The mid-year report should show how the hospital has used the full \$5,000 received in the initial grant payment.

QUESTION: Where should the hospital send the mid-year report to?

It is preferred that the SHIP reports are submitted electronically, although copies by mail or fax will be accepted. The hospital can email the report to ruralhealth@kdheks.gov. Upon receipt, SHIP staff will respond back to confirm that we have received your email.

QUESTION: What information must be found on supporting documents submitted with report?

The supporting documents must show a date of purchase between the beginning and the end of the contract period – September 1, 2012 and August 31, 2013.

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QUESTION: What does the expense and activity reporting form look like?

The expense and activity report looks similar to the report form used in the previous year with some modifications. For reporting ease, six different categories of SHIP activities have been pre-listed in the expense report:

- *Planning and Preparation for ICD-10 Transition*
- *Improve Data Collection & Reporting to CMS Hospital Compare*
- *Electronic Health Records/Meaningful Use/Health Information Exchange*
- *Maintain and Improve Billing & Coding Systems*
- *Lean Six Sigma/Other Performance Management Activity*
- *Other Quality Improvement/Continuity of Patient Care Activity*

These six categories represent hospital activities under the federal SHIP core areas:

- *improving quality data collection (VBP)*
- *improving quality outcomes (ACO)*
- *maintaining accurate billing & coding (PPS); and*
- *building accountability across the continuum of care (Payment Bundling).*

Hospitals must use at least \$1,000 towards Planning and Preparation for ICD-10 Transition, and/or Improve Data Collection and Reporting to CMS Hospital Compare.

Hospitals may use up to \$7,525 towards activities that fall under the remaining four categories listed.

On the expense and activity form, hospitals will select the activity category that best fits how funds were spent and enter the dollar amount according to the type of goods/services your hospital purchased.

QUESTION: What type of purchases can the SHIP grant be used for?

SHIP funds may be used to purchase training and education, computer hardware and software, technical assistance (i.e. consultant services/assessments). SHIP funds cannot be used to supplement hospital employee salaries but can be used to contract with consultants for education and training.

Example 1: Hospital sends the Director of Nursing to LEAN Six Sigma Training.

- *SHIP grant can pay for the costs of attending the training – registration, travel, etc.*
- *SHIP grant cannot pay for the hospital staff time to attend the training*

Example 2: Hospital brings a consultant to the hospital to provide LEAN Six Sigma training to staff.

- *SHIP grant can pay for the costs of the consultant - time, travel, etc.*
- *SHIP grant cannot pay for the hospital staff time to attend the training by the consultant*

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2012-2013 Grant Requirement - In lieu of the state-wide consortium activities...

Hospital must use at least \$1,000 of the SHIP award towards:

- ✓ Planning and Preparation for ICD-10 Transition; and/or
- ✓ Improving Data Collection Activities in order to Report to CMS Quality Net/Hospital Compare.

QUESTION: How much of the SHIP grant can the hospital put towards activities that fall under these two categories?

Hospitals must use at least \$1,000 towards Planning and Preparation for ICD-10 Transition, and/or Improve Data Collection and Reporting to CMS Hospital Compare. If desired, the hospital may spend more or even all of its SHIP grant funds towards these two categories

QUESTION: Can the hospital put money towards more than one activity that fall under these two categories?

It is the hospital's decision. The hospital may use the \$1,000 (minimum) to focus on just one of these categories or the hospital may use the funds towards both categories.

IDEAS & RESOURCES: Planning and Preparation for ICD-10 Transition

KHIMA's ICD-10 Resource Page <<http://www.khima.com/information/information2.html>>

National Rural Health Resource Center <http://www.ruralcenter.org/search/apachesolr_search/icd-10%20TRANSITION>

CMS' ICD-10 Web-site <<http://www.cms.gov/Medicare/Coding/ICD10/index.html?redirect=/ICD10>>

IDEAS & RESOURCES: Improving Data Collection Activities and Reporting to CMS Quality Net/Hospital Compare

- ✓ Staff training to improve the quality of data collection, reporting and benchmarking,
- ✓ Software to improve data collection, storage, analysis and reporting to Hospital Compare
- ✓ Staff training and education focused on streamlining data collection
- ✓ Pay for costs related to HCHAPS and CMS data collection. This includes vendor fees for HCHAPS data collection and analyzing as well as hardware to submit CMS quality standards data. This also includes advancement of hospital staff proficiencies in data collecting and reporting

HCAHPS Webinars: The Technical Assistance and Services Center (TASC) recently hosted two webinars: HCAHPS 101 and Moving HCAHPS into Practice in CAHs. The webinar recordings and supporting materials are now available on the TASC website and can be found at <http://www.ruralcenter.org/events/tasc>.

For a directory of certified national vendors, click here: [Hospital Consumer Assessment of Healthcare Providers and Systems \(HCAHPS\) Vendor Directory Overview](#).