Primary Contact Name: Lisa Davis

FY 2024 SHIP PERFORMANCE NARRATIVE

I. FY 2023 Progress on Activities

The Pennsylvania Office of Rural Health (PORH) has administered the State's Small Rural Improvement Program (SHIP) since its inception and continues to implement the program and participating hospitals. For FY 2023, 24 of 24 SHIP-eligible hospitals in Pennsylvania chose to participate in the program and selected activities from at least one of the three approved investment categories. In April 2023, one hospital in the State converted to a State classification of an Outpatient Emergency hospital, and as a result, was no longer eligible to receive SHIP funding. HRSA directed that this funding be returned by reporting funds as an unobligated balance on the FFR for FY 2023. All 24 hospitals have participated in ICD-11 training, the Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS), and continue to complete quarterly CMS reporting requirements.

For the FY 2023 period of performance, 18 hospitals selected activities in Value-Based Purchasing (VBP), nine (9) hospitals selected activities in ACO or Shared Savings, and three (3) hospitals selected activities in Payment Bundling and Prospective Payment System (PB/PPS). The majority of hospitals chose investment activities related to HCAHPS data collection and quality improvement (QI) training. A significant number of hospitals also chose to invest in telehealth hardware, software, and training. A few of the hospitals selected a variety of activities including training in disease registry, computerized provider order entry implementation, community paramedicine, and price transparency.

PORH's program monitoring strategy includes regular communication with participating hospitals throughout the period of performance and FY 2023 is no exception. Pennsylvania's SHIP hospitals have a strong history of project completion and timely expenditure of funds. Eight hospitals have already completed their FY 2023 SHIP activities; the remaining 16 hospitals have initiated their projects and are confident they all funds will expended by the end of the period of performance, May 31, 2024. FY 2023 impacts from ongoing hospital-selected SHIP activities include improvements in HCAHPS scores and patient satisfaction, price transparency requirement implementation and training, enhanced patient safety and outcomes, and ICD-11 readiness training.

H. FY 2023 Noteworthy Accomplishment

Pennsylvania's most noteworthy accomplishment for the FY 2023 performance period is the State's SHIP hospitals' success in completing their activities and expending funding by the end of the performance period. Pennsylvania's SHIP hospitals have experienced significant turnover and staffing shortages due to early retirements, terminations, leaving health care for other careers, illness, and the death of hospital employees. SHIP hospital leadership and staff have demonstrated exceptional commitment and resiliency and continue providing high quality patient care while meeting other obligations to the best of their capabilities.

Primary Contact Name: Lisa Davis

At the 2023 National Organization of State Offices of Rural Health (NOSORH) Annual Meeting, PORH was invited to present *Creating Efficiencies: Improving a Streamlining Process for the Small Rural Hospital Improvement Program.* The presentation described the approach developed and implemented by PORH to create efficiencies in the SHIP program by providing extensive technical assistance to hospital CEOs and staff, distributing pre-populated applications and contracts to hospitals, implementing a mid-year survey to assess progress on expending funds, and disseminating ongoing reminders on reporting requirements. These efforts significantly increased timely data collection and report submission. Although the positive impacts demonstrated by the SHIP Streamlining Process were specific to Pennsylvania's hospital needs, this presentation can serve as a resource for other State Offices of Rural Health to streamline and improve their SHIP process.

The SORH served as a trusted source for meeting ICD-11 readiness requirements. At the fall 2023 Pennsylvania Rural Health Care Transformation Summit, a training was coordinated on *Transitioning to and Implementing ICD-11: What you Need to Know.* This 90-minute session focused on ICD-11, including background on the code, differences between ICD-11 and ICD-10-CM, readiness requirements, and resources to prepare for ICD-11 implementation. Each Pennsylvania SHIP hospital received a copy of the World Health Organization's (WHO) ICD-11 toolkit, PowerPoint presentations, funding recommendations, and an ICD-11 fact sheet from NOSORH. PORH continues to provide additional technical assistance and support to hospital staff regarding the transition to ICD-11.

III. FY 2023 Health Equity Activities

All of PORH's activities, including the SHIP initiatives, are focused on health equity due to addressing rural/urban disparities. In the SHIP FY 2023 funding period, PORH's Quality Improvement (QI) Coordinator and Director continue to serve as health equity experts. The Director has served on the Pennsylvania Department of Health Office of Health Equity's Advisory Committee since its inception in 2007 and presents across the State and nation on rural health disparities. In FY 2023, PORH continued to develop strategies to maximize health equity in rural Pennsylvania, expand existing collaborations, and develop new partnerships.

Outreach also includes addressing rural workforce training. The QI Coordinator served as an advisor to a graduate family nurse practitioner student on a rural health equity capstone project and participated in a series of interviews on issues facing rural health care and the importance of providers in the rural health care landscape. The QI Coordinator and Director gave their annual rural health presentation to graduate nursing students at the University of Pittsburgh.

The QI Coordinator has a well-established QI page on PORH's website which includes evidence-based toolkits to enhance health equity across Pennsylvania. The resources include, but are not limited:

 $\underline{https://www.ruralcenter.org/resources/toolkits/health-equity\#promising-practices}\\\underline{https://www.porh.psu.edu/?s=health+equity}$

https://health.gov/healthypeople/priority-areas/health-equity-healthy-people-2030

Primary Contact Name: Lisa Davis

PORH continues to advance all aspects of health equity, social drivers of health, and health literacy and will continue to serve as a bridge to ensure health equity for Pennsylvania.

IV. FY 2023 Significant Changes

There were no significant changes occurring during the FY 2023 reporting period that required the submission of a prior approval request, including changes of scope and/or key personnel.

V. Plan for Upcoming FY 2024 Budget Year

For FY 2024, 24 Pennsylvania hospitals are eligible for SHIP funding and all hospitals chose to participate. All 24 hospitals will participate in ICD-11 readiness training.

The following 18 hospitals selected activities in Value Based Purchasing (VBP) Investments:

| SHIP-eligible Hospital | How SHIP Funds Will Be Utilized |
|----------------------------------|---|
| Barnes-Kasson County Hospital | A: Quality reporting data collection/related training |
| | or software |
| | Collecting inpatient HCAHPS and improvement |
| | based on results. |
| | D: Alternative Payment Model & Quality Payment |
| | Program training/education |
| | Provide training /education to staff on alternative |
| | payment models |
| Bucktail Medical Center | B: MBQIP data collection process/related training- |
| | Quality Improvement training to staff based on |
| | inpatient MBQIP results |
| DLP Conemaugh Meyersdale Medical | B: HCAHPS data collection process/related |
| Center | training |
| DLP Conemaugh Miners Medical | B: HCAHPS data collection process/related |
| Center | training |
| | C: Efficiency or QI training in support of VBP- |
| | related initiatives |
| | Patient safety |
| DLP Conemaugh Nason Hospital | A: Quality reporting data collection/related training |
| | or software |
| | Collecting inpatient HCAHPS and improvement |
| | based on results |
| Endless Mountains Health System | B: HCAHPS data collection process/related |
| | training |
| Fulton County Medical Center | A: Quality reporting data collection/related training |
| | or software |
| | Collecting inpatient HCAHPS and improvement |
| | based on results |

Primary Contact Name: Lisa Davis

| B: HCAHPS data collection process/related training Geisinger Jersey Shore Hospital A: Quality reporting data collection/related trainin or software Collecting inpatient HCAHPS and improvement based on results A: Quality reporting data collection/related trainin or software Collecting inpatient HCAHPS and improvement based on results Guthrie Troy Community Hospital A: Quality reporting data collection/related trainin or software. C: Efficiency or QI training in support of VBP-related initiatives-emergency preparedness training LECOM Health Corry Memorial Hospital Titusville Area Hospital A: Quality reporting data collection process/related training A: Quality reporting data collection/related training A: Quality reporting data collection/related training |
|---|
| Geisinger Jersey Shore Hospital A: Quality reporting data collection/related training or software Collecting inpatient HCAHPS and improvement based on results A: Quality reporting data collection/related training or software Collecting inpatient HCAHPS and improvement based on results Guthrie Troy Community Hospital A: Quality reporting data collection/related training or software. C: Efficiency or QI training in support of VBP-related initiatives-emergency preparedness training LECOM Health Corry Memorial Hospital B: HCAHPS data collection process/related training Titusville Area Hospital A: Quality reporting data collection/related training or software |
| or software Collecting inpatient HCAHPS and improvement based on results A: Quality reporting data collection/related trainin or software Collecting inpatient HCAHPS and improvement based on results Guthrie Troy Community Hospital A: Quality reporting data collection/related trainin or software. C: Efficiency or QI training in support of VBP-related initiatives-emergency preparedness training LECOM Health Corry Memorial Hospital B: HCAHPS data collection process/related training Titusville Area Hospital A: Quality reporting data collection/related trainin or software |
| Collecting inpatient HCAHPS and improvement based on results A: Quality reporting data collection/related trainin or software Collecting inpatient HCAHPS and improvement based on results Guthrie Troy Community Hospital A: Quality reporting data collection/related trainin or software. C: Efficiency or QI training in support of VBP-related initiatives-emergency preparedness training LECOM Health Corry Memorial Hospital B: HCAHPS data collection process/related training Titusville Area Hospital A: Quality reporting data collection/related trainin or software |
| Based on results A: Quality reporting data collection/related trainin or software Collecting inpatient HCAHPS and improvement based on results Guthrie Troy Community Hospital A: Quality reporting data collection/related trainin or software. C: Efficiency or QI training in support of VBP-related initiatives-emergency preparedness training LECOM Health Corry Memorial Hospital B: HCAHPS data collection process/related training Titusville Area Hospital A: Quality reporting data collection/related trainin or software |
| Geisinger Muncy Hospital A: Quality reporting data collection/related training or software Collecting inpatient HCAHPS and improvement based on results A: Quality reporting data collection/related training or software. C: Efficiency or QI training in support of VBP-related initiatives-emergency preparedness training LECOM Health Corry Memorial Hospital Titusville Area Hospital A: Quality reporting data collection process/related training A: Quality reporting data collection/related training A: Quality reporting data collection/related training |
| or software Collecting inpatient HCAHPS and improvement based on results A: Quality reporting data collection/related trainin or software. C: Efficiency or QI training in support of VBP-related initiatives-emergency preparedness training LECOM Health Corry Memorial Hospital B: HCAHPS data collection process/related training A: Quality reporting data collection/related training A: Quality reporting data collection/related training A: Quality reporting data collection/related training |
| Collecting inpatient HCAHPS and improvement based on results Guthrie Troy Community Hospital A: Quality reporting data collection/related trainin or software. C: Efficiency or QI training in support of VBP-related initiatives-emergency preparedness training LECOM Health Corry Memorial Hospital B: HCAHPS data collection process/related training A: Quality reporting data collection/related trainin or software |
| Guthrie Troy Community Hospital A: Quality reporting data collection/related training or software. C: Efficiency or QI training in support of VBP-related initiatives-emergency preparedness training LECOM Health Corry Memorial Hospital B: HCAHPS data collection process/related training A: Quality reporting data collection/related training or software |
| Guthrie Troy Community Hospital A: Quality reporting data collection/related training or software. C: Efficiency or QI training in support of VBP-related initiatives-emergency preparedness training LECOM Health Corry Memorial Hospital B: HCAHPS data collection process/related training A: Quality reporting data collection/related training A: Quality reporting data collection/related training |
| or software. C: Efficiency or QI training in support of VBP- related initiatives-emergency preparedness training B: HCAHPS data collection process/related training Titusville Area Hospital A: Quality reporting data collection/related trainin or software |
| C: Efficiency or QI training in support of VBP- related initiatives-emergency preparedness training B: HCAHPS data collection process/related training Titusville Area Hospital A: Quality reporting data collection/related training or software |
| related initiatives-emergency preparedness training LECOM Health Corry Memorial Hospital B: HCAHPS data collection process/related training A: Quality reporting data collection/related training or software |
| related initiatives-emergency preparedness training LECOM Health Corry Memorial Hospital B: HCAHPS data collection process/related training A: Quality reporting data collection/related training or software |
| Hospital training Titusville Area Hospital A: Quality reporting data collection/related training or software |
| Titusville Area Hospital A: Quality reporting data collection/related trainin or software |
| or software |
| or software |
| |
| UPMC Bedford C: Efficiency or QI training in support of VBP |
| initiatives, patient experience, Huron consulting to |
| improve hourly rounding and patient experience |
| UPMC Cole A: Quality reporting data collection/related trainin |
| or software |
| C: Efficiency or QI training in support of VBP- |
| related initiatives |
| Emergency preparedness training |
| UPMC Kane A: Quality reporting data collection/related training |
| or software |
| UPMC Muncy A: Quality reporting data collection/related training |
| or software |
| C: Efficiency or QI training in support of VBP- |
| related initiatives |
| Improve telemedicine services and QI for inpatien |
| UPMC Wellsboro A: Quality reporting data collection/related training |
| or software. |
| C: Efficiency or QI training in support of VBP- |
| related initiatives |
| Improve telemedicine services and QI for inpatien |
| Washington Health System Greene A: Quality reporting data collection/related training |
| or software |

Primary Contact Name: Lisa Davis

The following 10 hospitals selected activities in **ACO/Shared Savings Investments**:

| SHIP-eligible Hospital | How SHIP Funds Will Be Utilized |
|---------------------------------|---|
| Barnes Kasson Hospital | D: Social Drivers of Health (SDoH) |
| - | Software/Training- SDoH software |
| | G: Telehealth and mobile health hardware/software |
| | (not communications) |
| | Mobile hardware for conducting SDoH screenings |
| | and telehealth |
| Endless Mountains Health System | D: Social Drivers of Health Screening |
| Fulton County Medical Center | G: Telehealth and mobile health hardware/software |
| | (not communications) |
| | Expand telehealth capabilities |
| Penn Highlands Brookville | I: Health Information Technology training for value |
| | and ACOs |
| | AmWell to maintain telehealth software |
| Penn Highlands Elk | I: Health Information Technology training for value |
| | and ACOs |
| | AmWell to maintain telehealth software |
| Penn Highlands Huntingdon | I: Health Information Technology training for value |
| | and ACOs |
| | AmWell to maintain telehealth software |
| Penn Highlands Tyrone | I: Health Information Technology training for value |
| | and ACOs |
| | AmWell to maintain telehealth software |
| Punxsutawney Area Hospital | D: Social Drivers of Health (SDoH) |
| | Software/Training |
| | SDoH software |
| UPMC Muncy | G: Telehealth and mobile health hardware/software |
| UPMC Wellsboro | G: Telehealth and mobile health hardware/software |

The following 3 hospitals selected activities in **Payment Bundling/Prospective Payment System Investments**:

| SHIP-eligible Hospital | How SHIP Funds Will Be Utilized |
|---------------------------|--|
| Bucktail Medical Center | A: ICD-11 Software-to help cover costs of ICD-11 |
| | software |
| | B: ICD-11 training-Continued training of ICD-11 |
| | to providers and staff. |
| | D: S-10 Cost Reporting training- S-10 training |
| | E: Price transparency training |
| St Luke's Miners Hospital | A: ICD-11 Software-to help cover costs of ICD-11 |
| | software, 3M 360-Encoder ICD-11 software |

Primary Contact Name: Lisa Davis

| | B: ICD-11 training |
|----------------------------|---|
| | Continued training of ICD-11 360 encoder to |
| | providers and staff |
| Punxsutawney Area Hospital | B: ICD-11 training-Continued training of ICD-11 |
| | to providers and staff |
| | Develop transition plan for ICD-11 implementation |

No programmatic changes are anticipated for the FY 2024 period of performance. SHIP hospitals have selected activities for FY 2024 that can be completed by May 31, 2025, such as HCAHPS vendor selection and training.

Attachments

PA Attachment 1: FY24 Current (FY23) Work Plan Matrix

PA Attachment 2: FY24 Future (FY24) Work Plan Matrix

PA Attachment 3: FY24 Budget Justification Narrative

PA Attachment 4: FY24 Staffing Plan and Position Descriptions

PA Attachment 5: FY24 Biographical Sketches or Resumes

PA Attachment 6: FY24 Current (FY23) Hospital Deviation Table

PA Attachment 7: FY24 Penn State Negotiated Fringe Benefit Rate Agreement

PA Attachment 8: FY24 Penn State Negotiated Facilities and Administration Rate Agreement