

MICAH QN Mission Statement: As a premier system of quality, the Michigan Critical Access Hospital Quality Network (MICAH QN) will be a model in developing processes that demonstrate the high-quality service provided by CAHs. MICAH QN will identify opportunities for change that lead to continued improvement in the health status of the population we serve.

**MICAH QUALITY NETWORK
February 18th, 2022**

Topic	Summary	Action Assignment
Welcome: Introductions and Roll Call	Mariah, MICAH QN President, welcomed everyone. Crystal Barter took roll call.	
Safety Story: Lessons Learned Note: MICAH QN members are encouraged to use this time to <u>share lessons learned surrounding patient safety with their peers.</u>	The group had a robust discussion on the increased volume of patients with behavioral health issues, and increased violence against caregivers. What is your process for debriefing after an incident? What tools are you using? What are you doing to keep staff morale up after an incident? This impacts Culture of Safety – how are you navigating this in your setting? Please be prepared to share related to the topic above (share tools, scenarios, etc).	Example Debriefing Document (KMHC) MHA Workplace Violence Resources
MICAH QN Membership – Inventory of our Expansive Expertise	The MICAH QN is looking to assess the wide variety of expertise that the network membership brings. To do so, let’s get a better understanding of how each member identifies as a resource on a variety of topics!	Please fill out this brief survey.
The Crisis of the Hour: Workforce. <ul style="list-style-type: none">Update from MHA on efforts related to Workforce	Lauren LaPine, Director, Small & Rural Hospitals & Policy Programs, MHA provided an update on the MHA advocacy efforts related to the unprecedented workforce crisis that hospitals are facing. Key highlights below: <ul style="list-style-type: none">Governor signed on Feb. 16 (MHA to work with MDHHS on expediting distribution). Previous grants have taken 4 – 12 weeks to process.\$225 Million allocated to MHA to distribute to acute care and behavioral health hospitals. Minimum 10% dedicated to small and rural, critical access hospitals. Cannot be used to reimburse costs prior to Dec. 1. Cannot be distributed based upon vaccination status.Broad flexibility on how funds can be spent, with some limits, including but not limited to: Student loan payment assistance, Tuition assistance, Training programming, Cash retention bonuses (no more than 20%), Cash recruitment bonuses (no more than 25%)Funding distribution likely based on number of employees (pre-COVID numbers).	
Healthcare Staff Resilience and Wellbeing <ul style="list-style-type: none">Link to Video	Dr. Bryan Sexton, Duke Center for Healthcare Safety and Quality presented on the Well-Being Program starting on March 29 th , 2022.	Click here for more information and to enroll.
Strategy Group #2 – Data Management and Analysis.	Q2 2021 MICAH QN Core Measures Data – Click here for the presentation and the appendices. Jen Monzo provided a great update on reminders and updates related to MICAH	Reminder of resources: MBQIP Data Submission Deadlines

MICAH QN Vision Statement: MICAH QN will be known as the statewide and national leader in the measurement of healthcare quality for Critical Access Hospitals (CAHs).

	<p>QN/MBQIP measures.</p> <ul style="list-style-type: none"> • March 1st – NHSN Annual Facility Survey (see PowerPoint for additional resources) • May 16th – IMM-3/HCP (click here for NHSN resources) • May 16th – OP-22 (Patient LWBS) (see PowerPoint for additional resources) <p>CMS Star Ratings: The CMS announced it will delay updating the Overall Hospital Quality Star Ratings on the Care Compare website from April until July so it can correct a calculation error in the calendar year 2021 results for the OP10 outpatient imaging efficiency measure.</p>	<p>MBQIP Measure Fact Sheets</p>
<p>Strategy Group #3 – Effective Communication and Coordination of Care</p>	<p>Click here for the presentation.</p> <p>Highlights:</p> <ul style="list-style-type: none"> • Making Progress on Goal reducing COPD Readmissions (any facility) by 20% (13.6%) on claims December 31, 2021 (reported March 2022). Currently at 14.65%. • Shifting focus to Care Coordination and measuring success via HCAHPS (Discharge Planning Measure & Care Transitions) 	
<p>BCBS PG5 P4P Update</p>	<p>BCBS PG5 P4P Program Year 2022-2023 Rollout</p> <p>Click here for the Program Guide</p> <p>Click here for the presentation</p> <p>Presentation highlights:</p> <ul style="list-style-type: none"> • Changes were made to the Participating Hospital Agreement for PG5 P4P • New PHA moves PG5 P4P from 6% to 2%, fully allocated to HIE • Important to note: PG5 P4P scores are based on year over-year adjustments – the change from 6% to 2% does NOT mean a 4% reduction in rates • PG5 P4P will transition into this setup during the 2021-2022 program year • Starting with program year 2021-2022, HIE will be allocated 2% of the 6% • 10/1/23 adjustment will only be based on the HIE portion – worth 2% in both years <p>Timeline</p> <ul style="list-style-type: none"> • April 2021–March 2022 PG5 P4P program was a transition year, still based on 6% • April 2022–March 2023 - first program year under the new PHA based on 2% • 10/1/23 adjustments from April 2022-March 2023 program will only apply to the 2% allocated to HIE 	<p>Review slide deck for program changes.</p> <p>Joshua Amundson is the primary contact for overall program questions (jamundson@bcbsm.com).</p> <p>Theresa Anderson is the primary contact related to questions on the HIE component (tanderson2@bcbsm.com)</p>

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