HRIP HOSPITAL RATE IMPROVEMENT PROGRAM

A Kentucky Success Story



Helping Hospitals Serve Their Patients and Communities

HRIP Overview



- HRIP allows hospitals to **be paid closer to the average commercial rate** for **Medicaid inpatients** and **outpatients**.
- HRIP brings **\$2.2 Billion in additional funding** annually to hospitals **at NO cost to the state**, because hospitals provide the state match.
- **CMS must approve** continuation of HRIP annually.
- The HRIP Program is Value-Based 10% of HRIP funds must be earned by hospitals achieving specific quality measures.



- HRIP has provided the crucial additional resources for hospitals to invest in staff and training to improve outcomes.
- More than 1,100 hospital staff, both clinical and non-clinical, have been trained since 2022.
- HRIP's focus on key quality measures across all hospitals has produced statewide improvements in impactful areas that align with the Medicaid quality strategy.
- HRIP represents a tremendous collaboration between DMS and Kentucky's hospitals working through the Kentucky Hospital Association (KHA).

Reduced Medicaid Readmissions



Readmission reduction is important because:

- Medicaid has been found to have high readmission rates among adults.
- In 2020, the cost of a readmission was 12.4% higher than the original admission.
- Kentucky's access challenges combined with high numbers of patients with multiple chronic disease contributes to readmissions.

Medicaid readmissions have been reduced from a 10% baseline to 6% in just one year (2022-2023).

Patients are Screened and Treated for Sepsis and Other Infections are Being Prevented



Sepsis is the body's overwhelming and life-threatening response to infection.

- If not identified and treated early, it can quickly lead to expensive ICU care, organ failure, and even death.
- In 2020, KHA established a statewide Sepsis Consortium that provides expertise to help hospitals develop and implement procedures to identify and treat sepsis.
- Under HRIP, 98% of ED patients are being screened for sepsis, and those screening positive are receiving timely treatment.



- Kentucky hospitals have also lowered rates of other types of infections from 2022-2023.
 - This benefits the Medicaid program by avoiding longer lengths of stay in the hospital and associated costs.
 - CAUTI (catheter-associated urinary tract infection) lowered by 24%.
 - C. Difficile (a germ causing diarrhea and colitis) lowered by 26%.

Hospitals are Lowering Use of Opioids



In 2019, KHA established a Statewide Opioid Stewardship (SOS) program to reduce opioid prescribing and addiction. The SOS program receives KORE funding from CHFS for its initiatives.

Several SOS measures have been incorporated into HRIP:

- Virtually no patients (<2%) leave the hospital with multiple opioids after their hospital stay.
- 87% of patients presenting to an ED with an ankle sprain are being treated with an alternative to an opioid for pain relief.
- Virtually every new mother with an uncomplicated vaginal delivery does not receive opioids at discharge for pain relief.



Maternal Depression and Substance Use:

- About one-half of all births in Kentucky are covered by Medicaid.
- Post partum depression puts women at increased risk of death, especially during the first year after diagnosis.
- Kentucky hospitals are screening for depression and substance use two weeks following discharge and referring to resources when indicated.
- Maternal Screening began in January of 2024 more than 21,000 new mothers have been screened under HRIP during the first 8 months.

Efforts to Prevent Suicide



- Suicide is the second leading cause of death for youth and young adults in Kentucky.
- Suicide screening began in January of 2024 hospitals are screening over 90% of all emergency department patients over the age of 11 and making referrals to behavioral health resources.
- I million Kentuckians have been screened for suicide in the ED under HRIP.

Reducing Health Disparities



Social Drivers of Health are Being Identified and Addressed.

- Social Drivers of Health (SDoH), such as lack of transportation and food insecurity, play a key role in readmissions.
- 58,000 Medicaid inpatients were screened in 2023 and more than 63,000 were screened in 2024, with referrals to resources.
- In many instances, hospitals have developed initiatives to provide the resources patients need, such as food pantries and transport.
- KHA established a Food is Medicine program in partnership with the Department of Agriculture and CHFS to address food insecurity and improve patient consumption of locally grown, healthy food.

KHA Role



- Collect quality data from hospitals for DMS.
- Provide hospitals ongoing feedback on performance.
- Provide best practice resources and bring subject matter experts to assist hospitals with performance improvement.
- Provide and fund training for hospital staff >1,100 trained (2022-2023)
 - Charge Nurse Training
 - Wound Care Certification
 - Certified Health Care Environmental Services (CHEST)
 - APIC EPI Intensive training for infection prevention and control
 - Society of Infections Diseases Pharmacist (SIDP) Antimicrobial Stewardship Certificate
 - Certified Professional in Healthcare Quality (CPHQ) for quality leadership
 - Healthcare Accreditation Certified Professional accreditation prep and compliance

Hospitals Have Invested in Their Staff



- HRIP has allowed Kentucky hospitals to increase staff salaries 5% while the U.S. average was only .12%.
- Investments in wages have contributed to lower hospital staff vacancies, which improves patient care:
 - There were 4,150 fewer total vacancies in 2023, compared to 2022.
 - There were 853 fewer RN vacancies in 2023, compared to 2022.



While hospitals across the country are closing and reducing services, the opposite is true in Kentucky.

Kentucky hospitals are now able to make needed improvements in infrastructure, maintain and expand access to services, improve patient outcomes, and invest in their workforce in a way that simply did not exist prior to the program.

Without HRIP, Kentucky hospitals would have a negative 6% operating margin and that would mean less access to patient care.

Summary



Kentucky hospitals have successfully improved health outcomes in every HRIP measure saving the state scarce resources. We have seen great strides in:

- 30-day all cause unplanned readmissions
- Sepsis screening and timely treatment
- Infection Reduction
- Reduced Opioid Prescribing
- Kentucky hospitals have implemented three new screenings for patients and increased referrals to resources:
 - Social Drivers of Health food insecurity, transportation, etc.
 - Maternal Depression and substance use disorder
 - Suicide screening in the ED

Summary - continued



- HRIP funding enhances the health of our patients, helps the state stretch scarce resources, has preserved access to care in rural Kentucky, and saved lives in all parts of Kentucky.
- States across the country have scrambled to follow our lead. It is truly a Kentucky success story in which we can all take pride.