



December 2023
Quality Improvement Program - New Jersey
(QIP-NJ) Announcements & Updates

Dear QIP-NJ Program Participants,

The Department of Health (DOH) encourages hospitals and other interested parties to review this newsletter to help ensure your teams stay up-to-date on important news and announcements regarding QIP-NJ. As always, all newsletters will be posted to the QIP-NJ Documents & Resources webpage within approximately one week of distribution. If you have any questions, concerns, or to unsubscribe from this newsletter, please email QIP-NJ@pcgus.com. Thank you!

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DOH Corner

MY3 of QIP-NJ concludes on December 31st, which is just around the corner. To that end, DOH wants to sincerely thank all of our hospital partners as they work to complete MY3 and close out any remaining deliverables.

As we look forward, DOH wants to remind our hospital partners that MY4 starts on January 1, 2024, subject to federal approval by CMS. More information regarding CMS approval will be released once it becomes available.

As we look ahead towards the new year and MY4 of QIP-NJ, DOH wishes all of our hospital partners and their families a happy and healthy holiday season!

As always, should participating hospitals have any questions or concerns, please reach out to the QIP-NJ team via email at QIP-NJ@pcgus.com. Thank you

Update: QIP-NJ Maternal Learning Collaborative (MLC)

Message from the MLC Director

Dear MLC Participants,

The MLC team and I want to express my sincere gratitude to each of you for the effort and passion you brought to the MLC to improve the identification and timely treatment of SHTN in pregnancy. Teams dedicated countless hours to collect and review data, create action plans and test practice changes leading to lasting improvements in the care and experience of your patients. We can recall that the latest available NJ Maternal Mortality Report from 2016-2018 indicated that pregnancy related deaths associated with hypertension was one of the leading causes of maternal death, all of which the NJ MMRC determined to be preventable. This year our team carefully reviewed your data submissions and Storyboards, and I am proud to know that each team found success during the MLC to improve this outcome.

Some teams gained valuable quality improvement skills. Some teams established data collection and monitoring systems that they didn't have before for key process measures. Some teams considered patients'

experience and health related social needs, especially patients experiencing SHTN and patients identifying as Black women and birthing people. Finally, some teams found dramatic improvement in our process and outcome measures. As a cohort we can celebrate that patients in New Jersey experience timelier treatment of SHTN, making growing families in NJ safer and healthier.

I am especially proud of our collective effort to stratify MLC data by race and ethnicity and create action plans to close disparities. Just this week, the New York Times published an [article](#) (R. Rabin, Dec. 12, 2023) about implicit bias negatively impacting the experience and health outcomes of Black women in health systems across the country. The practice changes and improvements your teams have made in QIP-NJ and the MLC show how your hospitals are investing time and resources to combat this disparity, and I know you will continue to improve.

In the words of our faculty member, Debra Bingham, saving just one life makes all your effort worthwhile. This is true and I will add that your impact on the lives of patients goes much further than your life-saving clinical improvements. We had patients emailing the QIP-NJ team seeking assistance with social needs like finding diapers after delivery; and your teams took up the call to help those families. We heard stories from your peer teams about how staff, dedicated to outreach and follow-up processes, identified women having acute health crises and got them treatment in time. I know that quality improvement projects seem to never have a true 'ending,' however I hope that your team can take a moment now to celebrate the impact you've had. You can share the [MLC highlight video](#) with your teams to hear some of the MLC's success stories! Our team is proud to know that even though we asked you to take on more work and responsibility to achieve the MLC goals, most of you indicated experiencing an increased joy in work from participating in this effort.

The MLC team is still here to support you. The portal will remain open for at least 6 months to ensure that you can access and download any and all materials. Please reach out to us if you need anything as QIP-NJ continues. Your work has value and makes a difference, and we thank you for allowing us to support you in this effort!

MLC Final Learning (and Celebration!) Event Materials

The QIP-NJ MLC Final Learning Event was held on December 1, 2023, from 12:00PM to 1:00PM EST. During the event, MLC faculty shared the program's outcome data and hospital teams shared their accomplishments throughout their participation in the MLC. You can find the materials from the session below:

- [MLC Final Learning and Celebration Event recording](#)
- [MLC Final Learning and Celebration Event slides](#)
- [MLC Highlight Video](#) (please share with your teams!)

MLC Portal Materials

Please note that the MLC participant portal will remain active until at least May 1st, 2024. The MLC resources and key documents will be archived after the close of the portal and available upon request. Hospital teams can continue to reach out to QIP-NJ@pcgus.com for additional support or questions regarding MLC materials.

Quality Improvement Resources

Participant responses to the MLC final program evaluation survey demonstrated a commitment to continuing to use the quality improvement (QI) methods and tools covered during the MLC. The MLC team acknowledges that some hospital teams were using these approaches before the MLC, while others learned new skills that can apply to work related to maternal health and other areas of focus now and into the future. The resources listed below can also be found on the Resources page of the [MLC portal](#).

To support use of run charts to display and analyze data, below are two videos that provide information and instructions on run chart development and use:

[Part 1: What is a run chart?](#)

[Part 2: How to analyze a run chart](#)

[Updated Data Visualization Tool](#)

To support your system in their current and future improvement work, below are a few resources available to the public:

The Institute for Healthcare Improvement has a [QI Essentials toolkit](#) that is available free of charge, with instructions and fillable tools to support your work.

The National Health Service in the United Kingdom has created a [Sustainability Model and Guide](#) which can help teams think through key aspects of their initiative and support sustainment over time.

The MOCHA Model helps QI teams articulate goals around sustainability by focusing on measurement, ownership, communication & training, hardwiring changes, and assessing workloads. You can find the MOCHA Model for Sustainability [here](#).

We wish you good luck on your future improvement work!

Important: MY 2 Non-Claims Based Results

QIP-NJ is currently reviewing Non-Claims Based appeals. Results will be combined with MMIS results, MY 3 targets, and payment amounts in a forthcoming notice in January. QIP-NJ estimates that Medicaid Managed Care Organizations will be authorized to make MY 2 payments within 2024 Q1.

Reminder: MY 4 LOI Materials Due

MY 4 LOI materials were distributed earlier this month and required all NJ acute care hospitals to affirmatively respond indicating whether they intend to participate in MY 4 of QIP-NJ. In confirming or declining participation, hospitals must have acknowledged and agreed to the set of conditions listed in the LOI materials. The LOI materials are available on the [Documents and Resources](#) page of the QIP-NJ website. Responses from hospitals were due **December 22, 2023**. While the QIP-NJ LOI is a formal indication to DOH of a hospital's intention, it is not a legally binding document.

MY 4 Preprint

DOH and the Department of Human Services (DHS), submitted the MY 4 Preprint under 438.6c for QIP-NJ to CMS last month. DOH will provide regular updates as our team works with CMS to secure necessary approvals.

Quality Measures Committee (QMC) #10 Meeting

Following the tenth QMC meeting for QIP-NJ, DOH invited QMC members to review codes adjustment for consideration in the Value Set Compendium (VSC) and Databook for MY 4. Feedback from QMC members is being incorporated into the final MY 4 VSC and Databook that will be disseminated in early 2024, pending CMS approval of the program design.

Other State Initiatives and Programs

- **Advanced Life Support in Obstetrics (ALSO)** training is an evidence-based training used by birthing providers and interprofessional maternity care teams to handle obstetric emergencies. NJ DOH encourages teams to look into the components of the training. You can find more information on the training program [here](#).
- The **Nurture NJ Strategic Plan**, which aims to make NJ the safest and most equitable place in the national to deliver and raise a baby. Please check the [Nurture NJ website](#) for more information and to discover new ways to become engaged.
- The **NJ Maternal Care Quality Collaborative (NJMCQC)** aims to achieve a significant and sustained improvement in overall maternal and infant morbidity and mortality rates statewide. The final public meeting for this year was held on December 12, 2023. Additional information, including meeting materials, will be published on the [NJMCQC website](#), so please continue to check back regularly. For additional information about the NJMCQC, please also feel free to email the team at doh-mcqc@doh.nj.gov.
- Funded by DOH, **NJ Quit Centers** provide residents of New Jersey with resources and support to stop or reduce their use of tobacco including e-cigarettes, disposables, pouches, and other related products. Quit Centers can and do play an integral role in helping clinical facilities meet their goal of advancing statewide quality improvements for BH under QIP-NJ Measure BH8: Substance Use Screening and Intervention Composite. More information regarding Quit Centers, including contact information for the Inspira Quit Center and RWJ Barnabas Health Institute for Prevention and Recovery (IFPR) Nicotine and Tobacco Recovery Program, can be found here: <https://www.tobaccofreenj.com/quit-smoking>.
- **DHS' Division of Mental Health and Addiction Services (DMHAS)**, which serves as the Single State Agency (SSA) for Substance Abuse and the State Mental Health Authority (SMHA), as designated by the U.S. Substance Abuse and Mental Health Services Administration

(SAMHSA), also oversees NJ's adult system of community-based BH services. Please [check DMHAS' website](#) for more information and discover new ways to become engaged.

- **DHS' Episode of Care (EOC) Pilot** is a three-year pilot to test a new alternative payment model for prenatal, labor, and postpartum services statewide. More information regarding the EOC Pilot can be found on DHS' [website](#) at the link below. Performance Period 1 (15 months) of the EOC Pilot ran from April 1, 2022 through June 30, 2023. Performance Period 2 (12 months) began on July 1, 2023 and will run through June 30, 2024. Performance Period 3 (12 months) will run from July 1, 2024 through June 30, 2025. For more information about the EOC Pilot, please visit DHS' website at: [Episode of Care Pilot \(nj.gov\)](#). For questions, please send an email to the DHS team at mahs.maternityepisode@dhs.nj.gov.

