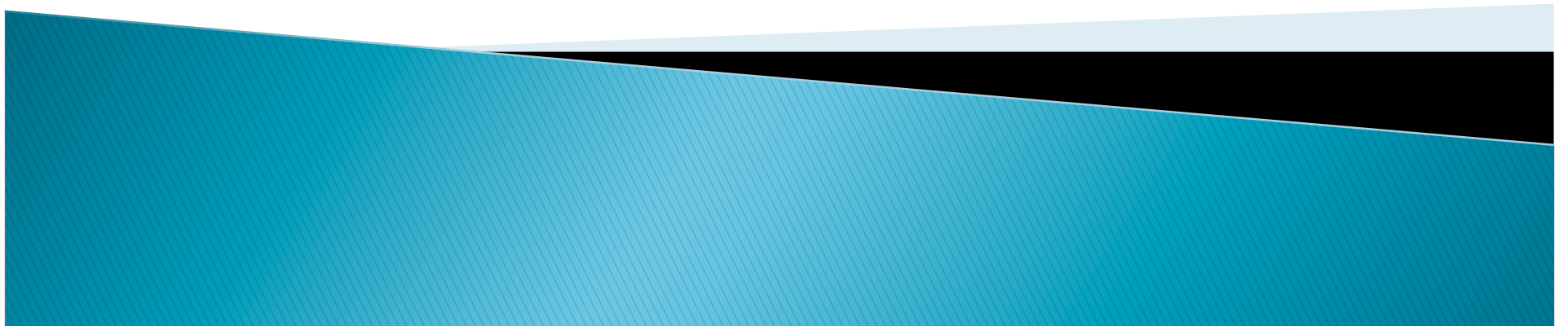# High Risk Infant Follow-Up (HRIF) Quality of Care Initiative (QCI) Reporting System Update

Erika E. Gray, BA
Project Manager, HRIF-QCI

CCS HRIF PROGRAM MEDICAL ELIGIBILITY CRITERIA

Data should be collected on infants/children under three years of age who meet California Children's Services (CCS) HRIF medical eligibility criteria, even if they were never a CCS client. **Infants are medically eligible for the HRIF Program when the infant:**

Met CCS medical eligible criteria for NICU care, in a CCS-approved NICU, regardless of length of stay, *(as per Number Letter 05-0502, Medical Eligibility in a CCS-approved NICU).*

or

Had a CCS eligible medical condition in a CCS-approved NICU, regardless of length of stay, *(as per California Code of Regulations, Title 22, Section 41800 through 41872, CCS Medical Eligibility Regulations).*

Birth weight < 1500 grams or the gestational age at birth < 32 weeks.

Birth weight ≥ 1500 grams and the gestational age at birth ≥ 32 weeks and one of the following criteria was met during the NICU stay.

A. Cardiorespiratory depression at birth (defined as pH less than 7.0 on an umbilical blood sample or a blood gas obtained within one hour of life) or an Apgar score of less than or equal to three at five minutes.

B. A persistently and severely unstable infant manifested by prolonged hypoxia, acidemia, hypoglycemia and/or hypotension requiring pressor support.

C. Persistent apnea which required medication (e.g. caffeine) for the treatment of apnea at discharge.

D. Required oxygen for more than 28 days of hospital stay and had radiographic finding consistent with chronic lung disease (CLD).

E. Infants placed on extracorporeal membrane oxygenation (ECMO).

F. Infants who received inhaled nitric oxide greater than four hours for persistent pulmonary hypertension of the newborn (PPHN).

G. History of documented seizure activity.

H. Evidence of intracranial pathology, including but not limited to, intracranial hemorrhage (grade II or worse), periventricular leukomalacia (PVL), cerebral thrombosis, cerebral infarction, developmental central nervous system (CNS) abnormality or "other CNS problems associated with adverse neurologic outcome".

I. Other problems that could result in neurologic abnormalities (e.g., history of CNS infection, documented sepsis, bilirubin in excess of usual exchange transfusion level, cardiovascular in stability, hypoxic ischemic encephalopathy, et cetera.

HRIF Program Referral Process:

1. HRIF QCI Referral/Registration Form is completed by the discharging CCS-approved NICU.
2. Communication is between the CCS-approved NICU and HRIF Program.
3. Service Authorization Request (SAR) is submitted by the HRIF Program to the local CCS office. (Service Code Group [SCG] 06, should be requested).
   http://www.dhcs.ca.gov/services/ccs/cmsnet/Pages/SARTools.aspx
4. Copy of the NICU discharge summary is provided to the HRIF Program.

Medical eligibility for the HRIF Program is determined by the County CCS Program or Regional Office staff. The CCS Program is also required to determine residential eligibility. As the HRIF Program is a diagnostic service, there is no financial eligibility determination performed at the time of referral to CCS. However, insurance information shall be obtained by CCS. An infant or child is eligible for the HRIF Program from birth up to three years of age.

Update

- 66/114 (58%) CCS NICUs have a HRIF Program
- 64/66 (97%) HRIF Programs reporting online
  - 21 Regional
  - 41 Community
  - 2 Intermediate
- 17/48 (35%) referring CCS NICUs reporting online
  - 15 Community
  - 2 Intermediate
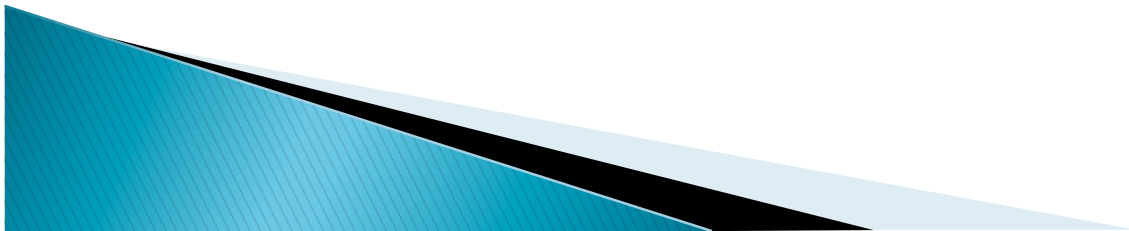
Small Baby Referral Rate

	2009 BIRTHS	
	CPQCC	**HRIF–QCI** (May 2011)
Enrolled	**17,008**	**6,553**
Small Babies (SB) BW $\leq$ 1500 grams	6,080 (36%)	3,476 (53%)
Big Babies (BB) BW > 1500 grams	10,928 (64%)	3,077 (47%)

2,604 (43%) CPQCC infants ($\leq$1500 grams) were eligible for the HRIF Program, but were not referred. (May 2011)

Reporting Submissions

	BIRTH YEAR					
	2009		**2010**		**2011**	
	N	%	N	%	N	%
Ref/Registration	6553		5838		698	
Standard #1	4212	60%	2104	36%	1	
Standard #2	2333	55%	172	1%		
Standard #3	306	13%	3			
No Visits	2341	36%	3734	64%	697	100%

Reporting Submissions

	BIRTH YEAR					
	2009		2010		2011	
	N	%	N	%	N	%
Additional Visit	689		311		10	
Neuro/Dev	457	66%	181	58%	1	10%
Case Management	167	24%	110	35%	9	90%
Other	49	7%	12	4%	0	
Social Risk	16	3%	8	3%	0	

Reporting Submissions

|	2009		2010		2011	
BIRTH YEAR						
	N	%	N	%	N	%
Client Not Seen	2431		829		8	
No Show/Reason Unk	800	33%	312	38%		
Unable to Contact	484	20%	136	16%	1	13%
Parent Comp. Priorities	242	10%	68	8%		
Other	182	7%	49	6%	1	13%
Parent Refused Service	145	6%	57	7%	1	13%
Family Moved	143	6%	38	5%	2	25%
Illness/Hospitalization	119	5%	48	6%		
Expired, Parent Ill, Trans	115	5%	34	4%		
Insurance Auth/CCS Denied	110	5%	54	7%		
Seen at Another HRIF Prog	91	4%	33	4%	3	38%

Annual Quality Audit Summary

- 2,604 (43%) CPQCC infants ($\leq$1500 grams) were eligible for the HRIF Program, but <u>NOT</u> referred:
  - Referring NICU not aware of their responsibility to refer eligible infants
  - HRIF Programs ONLY submitting data for CCS clients
  - Programs ONLY submitting data when infant comes to clinic
- 4 Reasons to complete a Client Not Seen Form:
  - No Shows (did not show for a scheduled core visit)
  - Eligible for HRIF Program, but parent (primary caregiver) declines services
  - HRIF Program staff unable to contact parent (primary caregiver) to schedule an initial core visit
  - Infant expired, insurance denial, family relocates, etc.

Annual Quality Audit Summary

- Referral/Registration Forms are <u>incomplete</u> or <u>not</u> submitted at time of discharge

  - **Missing Data:** CPQCC Reference #, Insurance, Infant/Mother's Race, Primary Caregiver Information.

- HRIF Program and NICU data collectors backlogged or NOT submitting data in a timely manner
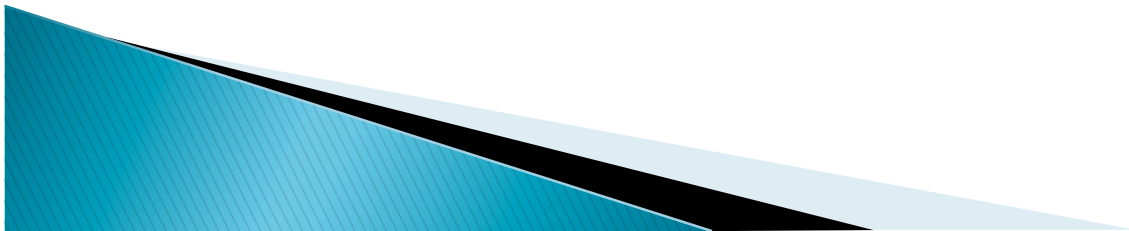
BEST PRACTICE PROCESS

Data should be submitted using the online "HRIF QCI Reporting System" for infants/children under three years of age who meet California Children's Services (CCS) HRIF medical eligibility criteria, **even if they were never a CCS client**.

NICU

Responsible for ensuring that **ALL** high-risk infant's discharged from a CCS NICU are referred to a HRIF Program.

1. Identify infant's that meet the CCS HRIF Program medical eligibility criteria. *(Request the CPQCC Network ID number from the CPQCC Data Contact, **ONLY** if the infant met the CPQCC eligibility criteria. **NOTE:** Non-CPQCC eligible infants are coded as "99999".)*

2. Complete and submit the "HRIF-QCI Referral/ Registration Form" online at https://www.ccshrif.org/

3. Provide a copy of the infant's discharge summary to the referred HRIF Program

HRIF PROGAM

As part of HRIF Program evaluation, quality improvement activities and program monitoring, HRIF Programs will be required to report outcome and service data to the CMS Branch.

HRIF Program will complete and submit the following forms to CPQCC online at https://www.ccshrif.org/

1. Referral/Registration Form *(completed by the CCS NICU)*

2. Standard Visit Form

   Recommended time periods:

   - Core Visit #1 (4 - 8 months)
   - Core Visit #2 (12 - 16 months)
   - Core Visit #3 (18 – 36 months)

3. Additional Visit Form

4. Client Not Seen Form

Best Practice Process

Referring CCS NICUs:

- Staff identifies CCS HRIF Program eligible infants

- Staff completes the "Referral/Registration Form" at the time of discharge

  - Contact the CPQCC Data Contact to identify CPQCC eligible infants. If eligible, obtain the CPQCC Network ID Number and include on the "Referral/Registration Form" as the CPQCC Reference Number. If NOT eligible, code infant as "99999"

- Submit the "Referral/Registration Form" to the HRIF Program using the online Reporting System

- Fax a copy of the discharge summary to the HRIF Program
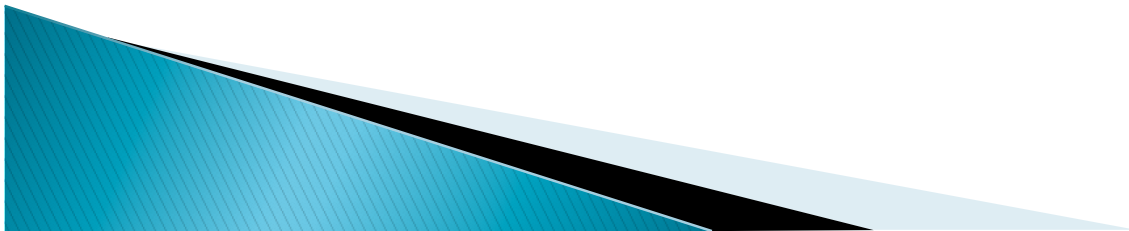
Best Practice Process

HRIF Programs

- Enroll CCS HRIF Program eligible infants, if they were not previously indentified and referred by the discharging CCS NICU

  - Contact the discharge or birth CCS-approved NICU CPQCC Data Contact to identify CPQCC eligible infants. If eligible, obtain the CPQCC Network ID Number and include on the "Referral/Registration Form" as the CPQCC Reference Number. If NOT eligible, code infant as "99999"

- Complete a "Standard Visit Form" for each infant/child during the following core visit time frames:

  - Visit #1 (4 – 8 months)

 - Visit #2 (12 – 16 months)

  - Visit #3 (18 – 36 months)
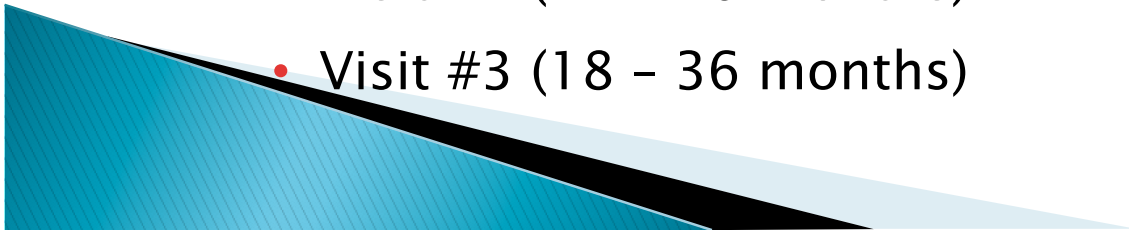
Best Practice Process

HRIF Programs – *continue*

- Standard Visit #3
  - Developmental Test MUST be performed
  - Autism Optional Section is highly recommended
- Complete an "Additional Visit Form" for an infant/child who requires additional visits between the recommended core visit time frames
- Complete a "Client Not Seen Form" for an infant/child who:
  - No Shows (did not show for a scheduled core visit)
  - Is eligible for HRIF Program, but parent (primary caregiver) declines services
  - HRIF Program staff unable to contact parent (primary caregiver) to schedule an initial core visit
  - Infant expired, insurance denial, family relocates, etc.

Questions/Comments
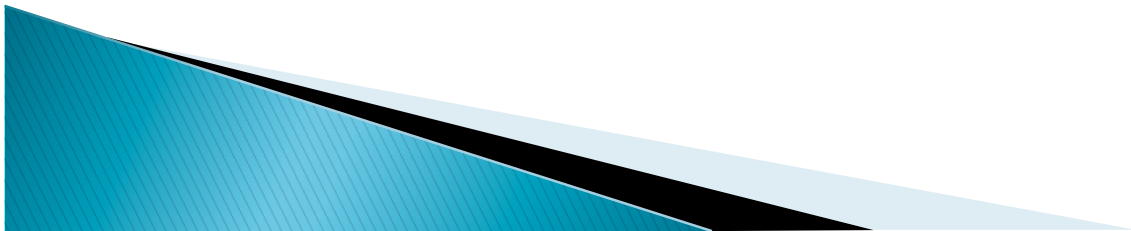
Essential Data Quality Gaps

- CCS NICUs not referring eligible infants
- CCS HRIF Program medical eligibility criteria (Centers ONLY referring CCS clients)
- Transferring data in a timely manner (NICU to HRIF Program)
- Referral/Registration Forms not submitted at the time of discharge
- HRIF Programs ONLY submitting data at initial core visit
- No relationship with NICU CPQCC Data Collector (CPQCC Network ID)

- No Response/Unknown data submission

  Referral/Registration Form:

  - Birth Order; Gender; Infant's Ethnicity and Race; Biological Mother's Ethnicity and Race; Insurance; Primary Caregiver; Primary Caregiver Education and Employment; and Language

- Standard Visit Forms are <u>incomplete</u>

  - No Neurologic Exam or Developmental Assessments performed

Solutions/Improvements

DATA COLLECTION:

- Update Reporting System Forms and Manual – June 2011
  Referral/Registration Form
  - New Item – CPQCC Non eligible check box
  - New Required Fields: Hospital DC Home, DC Date, and Medical Eligible Profile Section
- CPQCC & HRIF-QCI Directory (update every 6 months)
- CPQCC NICU Quarterly Report, purpose to transfer data from NICU ➔ HRIF Programs
- Combine CPQCC, CPeTS & HRIF-QCI Data Trainings (October/ November 2011)
- Continue to work with the CPQCC Data Center to improve data collection
- Develop Reference Tools
  - Parent Questionnaire, to obtain demographics
  - Core Visit Flow Chart, to visualize when visits should be scheduled
- Continue Annual Quality Audits with each HRIF Program

Solutions/Improvements

REPORTING SYSTEM:

➢ Validation "Alert" System "This form is closed" check box

➢ Referral/Registration Forms closed at 18 months, purpose to validate data submission (ONLY data entered in the Hospital/Center Information section can be modified)

➢ CPQCC Reference Number page, purpose to update/enter multiple CPQCC ID Numbers

➢ Generate System Reports page

➢ Management and Tracking system for Core Visits

CPQCC & HRIF-QCI Directory

- Located on the CPQCC and HRIF-QCI Websites:

  www.cpqcc.org

  www.ccshrif.org

- Password to open directory: datacontact

- An update will be released in April & October Erika if any of the information is inaccurate or needs to be updated

---

CPQCC & HRIF QCI DIRECTORY

Lucile Packard Children's Hospital at Stanford (LPCH @ Stanford)
CCS NICU Level: **Regional**
OSHPD Facility Code: **434040**

725 Welch Road
Palo Alto, CA 94304
Phone:

HRIF Program Onsite: Yes
Hospital Providing HRIF Program Services:

CPQCC MEMBER CONTACTS

DATA
Name: Michelle J. Padreddii, RN
Title: Perinatal Database Coordinator
Phone: 650-724-5851
Fax: 650-497-8465
Email: mpadreddii@lpch.org

DATA #2
Name: Noel Gonzales
Title:
Phone: 650-497-8393
Fax: 650-723-6410
Email: ngonzales@lpch.org

REPORT
Name: William D. Rhine, MD
Title: Prof. Of Pediatrics
Phone: 650-723-5711
Fax: 650-725-8351
Email: wrhine@stanford.edu

NEONATOLOGIST
Name: William D. Rhine, MD
Title: Prof. Of Pediatrics
Phone: 650-723-5711
Fax: 650-725-8351
Email: wrhine@stanford.edu

HRIF PROGRAM CONTACTS

COORDINATOR
Name: Colleen Marcisz
Title: HRIF Coordinator
Phone: 650-724-5513
Fax: 650-724-6500
Email: cmarcisz@lpch.org

HRIF PROGRAM OTHER
Name: Janaye Zamora
Title:
Phone: 650-725-3802
Fax: 650-724-6500
Email: jzamora@lpch.org

MEDICAL DIRECTOR
Name: Heidi Feldman, MD
Title: HRIF Med Director
Phone: 650-725-8995
Fax:
Email: hfeldman@stanford.edu

NICU DISCHARGE CONTACT
Name:
Title:
Phone:
Fax: 650-724-6500
Email:

Last Updated: 11/16/2010

NOTE: The following contact information is for CPQCC Members and HRIF Programs to identify and contact each other.

Salinas Valley Memorial Healthcare System

CCS NICU Level: **Community**
OSHPD Facility Code: **270875**

450 East Romie Lane
Salinas, CA 93901
Phone: 831-757-4333

HRIF Program Onsite: No
Hospital Providing HRIF Program Services:
Lucile Packard Children's Hospital at Stanford (LPCH @ Stanford)

CPQCC MEMBER CONTACTS

DATA
Name: Estee Perez
Title: Secretary
Phone: 831-759-3262
Fax: 831-753-5514
Email: eperez@svmh.com

DATA #2
Name: Robert Castro, MD
Title: Neonatologist
Phone: 831-759-3071
Fax: 831-753-5514
Email: rocastro@svmh.com

REPORT
Name: Robert Castro, MD
Title: MD, Phd, Medical Director, NICU
Phone: 831-759-3071
Fax: 831-753-5514
Email: rocastro@svmh.com

NEONATOLOGIST
Name: Robert Castro, MD
Title: Neonatologist
Phone: 831-759-3262
Fax: 831-753-5514
Email: rocastro@svmh.com

HRIF PROGRAM CONTACTS

COORDINATOR
Name:
Title:
Phone:
Fax:
Email:

HRIF PROGRAM OTHER
Name:
Title:
Phone:
Fax:
Email:

MEDICAL DIRECTOR
Name:
Title:
Phone:
Fax:
Email:

NICU DISCHARGE CONTACT
Name: Michaele Serasio
Title: NICU Case Manager
Phone: 831-753-5866
Fax: 831-772-1382
Email: mserasio@svmh.com

Last Updated: 11/16/2010

NOTE: The following contact information is for CPQCC Members and HRIF Programs to identify and contact each other.
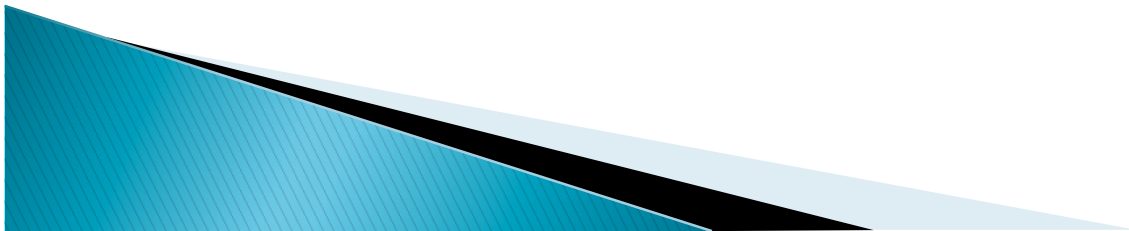
2011 Reporting System Data Training Sessions

NOW ACCEPTING ONLINE REGISTRATIONS

www.ccshrif.org

Thursday, June 16, 2011 - San Jose, CA

Monday, June 20, 2011 - Orange, CA

Thursday, June 23, 2011 - Loma Linda, CA

Questions/Comments

Contact Information

Erika Gray
eegray22@stanford.edu
Ph: 650-725-1306

HRIF-QCI Website:
www.ccshrif.org