



# COLORADO

Q1.2.  
Welcome to the HTP Implementation Plan and Milestone Reporting Collection Tool.

## I. Background, Instructions and Timeline

### A. Implementation Plan

Hospitals that have been accepted into the Hospital Transformation Program (HTP) must submit an Implementation Plan detailing the strategies and steps they intend to take in implementing each of the intervention(s) outlined in their applications impacting the six program priority areas: (a) Care Coordination and Care Transitions; (b) Complex Care Management for Target Populations; (c) Behavioral Health and Substance Use Disorder Coordination; (d) Maternal Health, Perinatal Care and Improved Birth Outcomes; (e) Social Determinants of Health; and (f) Total Cost of Care.

Within those priorities, hospitals are expected to implement interventions that address quality measures across five HTP Focus Areas:

- Reducing Avoidable Hospital Utilization;
- Core Populations;
- Behavioral Health and Substance Use Disorder Coordination;
- Clinical and Operational Efficiencies;
- Population Health and Total Cost of Care.

Section II of the Implementation Plan will include the hospital's proposed organizational approach to implementation. Section III will include the approach to implementation of each intervention approved for participation via the Hospital Application. Hospitals must complete Section III for each intervention.

Implementation Plans cover the five-year duration of the HTP. Hospitals will have an opportunity to revisit their planned milestones and, if needed, submit milestone amendments and course corrections through the quarterly reporting process. The process for amending milestones and for course correction is outlined in the HTP Milestones Requirements section of this document.



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Q1.4.

## Background, Instructions and Timeline

### B. Implementation Plan Process and Timeline

Implementation Plans must be submitted during the Implementation Plan Submission period (from September 1, 2021 through September 30, 2021) after approval of the hospital's HTP application. Hospitals will submit their Implementation Plans in this online submission tool. The entirety of the Implementation Plan has been recreated in the Implementation Plan submission tool for hospitals to complete and submit by 11:59 pm on September 30, 2021. Certain elements of information will be pre-populated in the Implementation Plan submission tool from the approved HTP Application. HTP primary contacts will be emailed a unique link to the submission tool where they will be able to complete their Implementation Plan. The email with the link to the submission tool will also be made available in the HTP Colorado Collaboration, Performance, and Analytics System (CPAS) portal.

Following the submission date, the Department will have 20 business days to review and score all Implementation Plans. At the conclusion of the review period, participating hospitals may receive a request for information (RFI) or receive notification that the Implementation Plan has been approved without RFI. Hospitals that receive an RFI will have 10 business days to complete revisions within the Implementation Plan submission tool. Revised Implementation Plans will be reviewed within 10 business days.

1. September 1 – First day Implementation Plans may be submitted
2. 1 month time period / September 1 - September 30 - Implementation Plan Submission Period (Implementation Plan Deadline: September 30)
3. 20 business day period / October 1 - October 28 – Review Period: Twenty business day review period
4. 10 business day period / October 29 - November 12 - Revise and resubmit period: Ten business day period within which any plan requiring additional revisions and / or supporting details should be completed by hospital
5. 10 business day period / November 15 - November 29 – Final Review Period: Ten business day scoring period for revised and resubmitted Implementation Plans
6. 2 months following due date/ November 30 – Expected Final Implementation Plans approved

All hospital final Implementation Plans will be made public and posted online enabling stakeholders to review how their hospitals plan to achieve the goals of the Hospital Transformation Program.



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## Q1.6.

### Background, Instructions and Timeline

#### C. Implementation Plan Scoring

Implementation Plans collect the hospital approach on the *Organizational Approach to Implementation* and the *Approach to Intervention Implementation*. The Approach to Intervention Implementation must be completed for each of the hospital's interventions. Except for questions that are prepopulated from the Hospital Application, responses will be scored on either a pass / fail or a numerical basis as outlined below.

Pass / fail scores will be based on the following:

- Fail: The response is incomplete because it does not address one or more part(s) of the question asked. More information must be provided for the answer to be considered complete.
- Pass: A complete response was provided to all applicable aspects of the question.

Implementation Plans must earn passing scores for every pass / fail response to be approved. Any question receiving a failing score during the initial review period will be returned to the participant with specific instructions for revisions prior to resubmission.

Numerical scores will be based on a one to three (1-3) scoring rubric.

- A score of one (1) will be given to answers that need substantial revision. Scores of one indicate that responses are either incomplete (they do not address one or more part(s) of the question asked) or they do not demonstrate a satisfactory approach. Examples of responses that would not demonstrate a satisfactory approach include:
  - o A response to Question III.A.6. that does not include a plan for identifying and engaging the intervention's target population including addressing barriers to recruitment and resulting gaps in engagement.
  - o A response to Question III.A.7. that does not describe the resources that will need to be re-purposed from other areas, built, acquired, or secured through a partner or in some way.
  - o A response that describes supporting documentation for an impact milestone that is insufficient to validate its completion.
- A score of two (2) represents a generally complete and satisfactory response to the question (criteria for scores of one outlined above do not apply) with only limited clarification or additional information needed to ensure responses are detailed enough to provide the Department with a complete and accurate understanding of the response. Any additional information or clarification needed will be specifically cited by the Department.
- A score of three (3) represents a complete, sufficiently detailed and acceptable response and approach to the topic addressed (criteria for scores of one and two outlined above do not apply).

Participants must earn scores of three (3) for every response included in their Implementation Plan for it to be approved. Any question receiving a one (1) or two (2) during the initial Implementation Plan review period will be returned to the hospital with specific instructions for revision prior to resubmission.

The Department will provide technical assistance aimed at ensuring that Implementation Plans receive approval.



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## Q2.3. II. Organization Approach to Implementation

### A. Implementation Overview

#### II.A.1.a. Primary Contact Information

Please fill out the following information for the hospital's primary contact.

#### Q2.4. Name

Alison Keesler

#### Q2.5. Title

Program Manager, CIN and Risk Programs

#### Q2.6. Mailing Address

500 Eldorado BLVD Ste. 4200 Broomfield, CO 80021

#### Q2.7. Phone Number

303-813-5584

#### Q2.8. Email Address

alison.keesler@sclhealth.org



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#### Q2.10. Implementation Overview

Reporting Hospital: Good Samaritan Medical Center

Q2.11. II.A.1.b. Secondary Contact Information

Please fill out the following information for the hospital's secondary contact.

Q2.12. Name

Gaye Woods

Q2.13. Title

System Director, Community Benefit

Q2.14. Mailing Address

500 Eldorado BLVD Ste. 4200 Broomfield, CO 80021

Q2.15. Phone Number

303-813-5027

Q2.16. Email Address

gaye.woods@sclhealth.org



Q2.18.

**Implementation Overview**

Reporting Hospital: Good Samaritan Medical Center

Q2.19. II.A.2. Governance Structure

Describe how the governance structure outlined in response to Question 3 of the HTP Application will be engaged in the implementation and execution of the hospital's HTP participation. Address how leadership will

ensure oversight and support, including sign off/approval for resources, and address their role in the following functional areas, as applicable:

- People (Workforce / Training)
- Processes of Care
- Technology and Data Systems
- Patient Engagement

Please limit responses to 1,000 words.

There are three branches with governing functions to oversee the system wide initiative for HTP. The two branches that are closest to the program build and implementation are the HTP hospital care site team (a cross functional team of clinical subject matter experts organized by HTP measure area) and the System HTP Core Team (also organized cross-functionally). The HTP site and System teams work together to build an HTP plan for the entire organization that encompasses System support and resources and is attuned to each hospital care site needs, capacity, and ability for measure performance. The final governing function sits with the System Executive leadership team who provides consultation on the programs implementation plans, performance metrics, resource allocation, and approvals. Additionally, System Executive leadership is responsible for ensuring alignment with both the core values that support our mission-driven work and the organizational goals as outlined in Mission Forward 2025, our five-year strategic plan. Executive leaders will ensure the accountability structures support the viability and sustainability of the proposed interventions. People: System Executive leadership provides people support for HTP work at both the System level and the care site level with multidisciplinary teams in both settings. The work is woven into all areas of the organization under each applicable service line for each measure, overseen by the System and care site HTP teams. Having the interdisciplinary teams involved in the oversight is a sustainability strategy and helps to anchor the integration. Additionally, SCL Health strategic goals around clinical and operational transformation intersect with many of the identified priorities of the HTP program. HTP System Core Team: System-level, multi-disciplinary leadership team representing the following departments: Payer Contracting and Strategy, Community Benefit, Quality & Safety, Performance Improvement, Finance, and Information Technology & Digital Support (ITDS). HTP Site Steering Committee: Multi-disciplinary team established at each SCL Health hospital (care site) with responsibility for coordinating and managing care-site level implementation of HTP interventions and initiatives. Appointed leaders represent more than seven departments, including Executive Leadership, Quality and Safety, Finance, Performance Improvement, Case Management and Community Benefit Processes of Care: Implementation milestones have been reviewed and approved by the System Executive Leadership team. In addition routine reporting is delivered to the senior team in the form of progress reports where feedback is solicited. An HTP performance dashboard highlighting all measures is a planned milestone and should provide another line of sight for the executive leadership team. Technology and Data Systems: SCL Health system ITDS team members participate on the System HTP Core team and are active thought partners in the development of data management solutions. The team is led by the System Director of IT Operations. Patient Engagement/Target Population: Working internally with Quality, Case Management and Community Benefit as key data providers to understand trends, strengths and improvement areas will be a factor of regular oversight. The metrics will be used to anticipate workflow pivots, training assessments and resource changes. Externally, we will utilize feedback gathered through the CHNE process to enhance program design.



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**Q2.21. Approach to Intervention Implementation**  
Reporting Hospital: Good Samaritan Medical Center

**Q2.22. III. Approach to Intervention Implementation**

**A. Overview of Interventions**

Hospitals must complete the remainder of this Implementation Plan (Section III) in the Data Collection Tool separately for each of the interventions approved for inclusion in the HTP.



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Q3.2.

## Overview of Interventions - Intervention 1

Reporting Hospital	Good Samaritan Medical Center
Intervention	Readmissions Reduction Collaborative
Measure	SW-RAH1 - 30 day All-Cause Risk Adjusted Hospital Readmission

Q3.3. The next section deals with information on one of the hospital's proposed interventions.

Q3.4. III.A.4. Is this an existing intervention (an intervention that the hospital has previously planned and is currently implementing or executing)?

Yes

No



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Q3.6. Overview of Interventions

Reporting Hospital: Good Samaritan Medical Center

Intervention: Readmissions Reduction Collaborative

Q3.7.

III.A.5. The below chart is for principal internal and external administrative roles for this intervention. If there are more than five individuals working on this intervention, please list the five individuals with the greatest leadership roles or most time dedicated to this intervention.

Q3.8.

	Name of Individual	Intervention-Specific Role	Will This Individual Lead Implementation of the Intervention? (Y/N)	Name of Organization	Key Deliverables/ Responsibilities
Individual #1	System Director of Clinical Performance Improvement	Readmission Reduction Team	Yes	SCL Health	This position will lead the System readmission reduction efforts in collaboration with the readmission reduction team and hospital care sites
Individual #2	Quality and Safety Performance Improvement Specialist	Readmission Reduction Team	Yes	SCL Health	This position will lead the System readmission reduction efforts in collaboration with the readmission reduction team and hospital care sites
Individual #3	Vice President Care Management	Readmission Reduction Team	Yes	SCL Health	This position will lead the System readmission reduction efforts in collaboration with the readmission reduction team an
Individual #4	Director Performance Improvement	Hospital care site readmission initiatives	Yes	SCL Health	This position, in collaboration with System efforts will lead readmission efforts at the hospital care site in collaboration with others.
Individual #5					



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**Q3.10. Overview of Interventions**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Readmissions Reduction Collaborative

Q3.11. III.A.6.a. Briefly describe the intervention’s target population for the intervention. This should align with the hospital's approved HTP Application.

Please respond in no more than two sentences.



The target population for this measure will be any patient that has an identified risk of readmission or is identified as part of any sub-group as having a higher risk of readmission by nature of condition or subgroup criteria.

Q3.12. I.A.6.b. Describe how individuals within the target population will be identified and engaged in the intervention.

Please seek to limit response to 500 words.

The readmission intervention aims to identify populations that are at a higher risk of hospital readmission and perform one or more interventions that will prevent the patient from readmitting. While sub-populations can be identified in data now in order to target for the HTP measure intervention, it is anticipated that the target population will change over the course of HTP years and become more accurate as data and analytics are built out. The overarching goal of this intervention is to build a structure, strategy, and work plan to continually guide and support readmission reduction work during HTP years and beyond. The most important aspect of this measure is to build the intervention that supports the work to carry forward and it is important that the technology is built to accurately identify opportunities for readmission intervention as to support HTP efforts for healthcare efficiencies. Aside from the identification of a target population is the need to build a portfolio of intervention strategies to deploy. Therefore, the interventions will need to be built out before the target populations are fully established. Currently, this work is anticipated to encompass the building of a risk score model within SCL Health's EHR system, Epic. Once a risk score is assigned to patients and readmission and patient data is collected, then trends will be identified for any systematic interventions. Aside from systematic interventions, patients that screen high on a readmission risk score will be assessed for specific contributors, readmission risk, and countermeasures and then interventions will be performed at that time. During the HTP measure building period there will be an assessment and assignment of patient engagement with possibilities being navigators, care management teams, nurses, or post acute partners. When patients have become identified upon admission to the hospital they will be flagged for readmission potential and assigned a navigator, care managers, nurse, or other internal resources built out in this intervention.

Q3.13.  
III.A.7.a. Please describe what major functions and resources, supporting the intervention throughout the course of implementation are already in place, or are not in place and will need to be re-purposed from other areas, built, acquired, or secured through a partner or in some way.

Please address the following functional areas and resources at a minimum, when responding:

- People (Workforce / Training)
- Processes of Care
- Technology and Data Systems
- Patient Engagement

Q3.14.  
III.A.7.b. Use the following space to describe the major functions and resources that are already in place.

Please seek to limit response to 1,000 words.

In early 2020 SCL Health identified an intention to broadly work towards reducing readmissions across our facilities based on an understanding of it as a balancing measure to ongoing efforts to reduce length of stay as well as a key indicator of the health and well being of our patients. By ensuring adequate efforts are made to transition patients out of the acute setting we can promote their overall health in a way consistent with the goals of our patients. This work did not progress significantly in 2020 due to the ongoing COVID-19 Pandemic. The following functions and resources will be necessary to support reducing readmissions in the Medicaid population: People: Current workforce structure is robust to address initial plans for assessment and intervention. There will be training and education necessary to address new technology, scoring, and preparing patients for discharge, however the majority of this should not require substantial additional training. A shared resource with the Hospital Index measure will be the utilization of a planned navigator who will assist with the management of high resource utilization patients and planning for discharge/post discharge support. This resource is not currently in place at most SCL Health hospital care sites and therefore would need hiring and training. Process: The basic process and quality improvement structure and resources are in place with a shared system performance improvement team with individuals dedicated to supporting the readmissions initiative. In addition each hospital care site has a performance improvement or quality improvement team who can be leveraged to improve the processes associated with supporting readmissions reduction. The HTP support team anticipates a need to broaden the quality improvement knowledge and skill set across the teams associated with the HTP work and will target basic quality improvement training to these teams. Technology and Data Systems Within SCL Health there is a robust EHR that includes a data mart and data analytics that will be used for identifying patients at risk of readmissions, alerting staff to this risk, and the documentation and implementation of various readmission reduction tactics. The framework for developing these technological tools currently exists, however the majority of the tools are not yet in place. The project team will have a key responsibility to guide the development of these technical tools. Patient Engagement: Currently each hospital care site has a patient family advisory council which engages volunteer patients to inform their work. These groups have limited diversity and there is a gap and opportunity to engage a broader group of patients targeted specifically in this case to those who are at risk of readmission.

Q3.15. III.A.7.c. Use the following space to describe the major functions and resources that are not in place and will need to be re-purposed from other areas, built, acquired, or secured through a partner or in some way.

Please seek to limit response to 1,000 words.

People/training: Workforce challenges and risks are consistent across the various roles associated with supporting readmissions reduction. Turnover and challenges in hiring talent will be a risk throughout the project. In most cases these risks can be mitigated through the cross training of staff and ensuring no one individual manages all pieces of the interventions. In addition, SCL Health maintains a network of facilities with staff performing similar roles at other locations. Therefore, there is an opportunity to provide cross facility support both through the sharing of staff and the utilization of a core float pool to support care sites in need. Process: There is no streamlined nor intentional program or process currently in place to develop and address readmissions on a large scale. During HTP program years, a process for engaging in continual development of readmission interventions will be developed. Part of the process development will be to determine the components of a process that need to be in place to support such efforts, education around readmissions, identifying patients in real time, and parsing out tactics that influence readmission in real time. All to which will be worked on throughout HTP years. Technology: Currently in place is a robust Electronic Health Record (EHR) system that has the capabilities, not yet built out, for patient risk scoring, real time identification when patients are identified as being at a higher risk of readmission, and reports and flags to alert staff to the readmission risk. Over the HTP years there will be EHR development and build to support the goal of the Readmission Reduction Team. Patient Engagement: Likely the most challenging barrier and risk is engaging populations that are known high utilizers of hospital services and lack adequate resources for housing security, food security and proactive/supportive medical care. This group has historically proven difficult to engage in proactive efforts to reduce care utilization through active care management and navigation.

Q3.16.  
III.A.8.a. Describe any major challenges and risks to intervention implementation and how the hospital will mitigate those challenges and risks. In the response, specifically address the following areas:

- Workforce;
- Budget;

- Health Information Technology;
- Regulatory Barriers; and
- Challenges related to engaging difficult-to-reach populations.

Q3.17.

III.A.8.b. Use the following space to describe any major challenges and risks to intervention implementation.

Please seek to limit response to 750 words.

Major challenges and barriers can come up at any time during the program years and being ready for challenges is part of the program and project management such as with HTP. SCL Health has the Enterprise Project Management Office engaged with the HTP governance structure through the HTP System Core Team and can leverage risk assessments and mitigation tools. Barriers in the following areas might arise during HTP years: Workforce: barriers in the workforce are prevalent now more than ever as clinicians are exhausted over the hard work of managing care during a pandemic. While we realize it is difficult to hire for positions right now, it is also difficult to engage exhausted staff, and engage staff while their work is prioritized towards the COVID-19 response. Budget: budget risks and challenges exist that could impact the implementation of any expansion of the workforce to address readmissions intervention tactics. Budgets are also a concern with any downside program where upside dollars are not being received to fund the work. At present there is strong executive support for the work associated with HTP. Additionally, the organization is well positioned financially to continue to make workforce and technology investments which have short term costs in order to realize long term gains and optimal outcomes for our patients including not returning to the hospital. Despite these, a full ROI analysis will be performed with interventions requiring financial investments leveraging test roles or investments, as well as analysis of demonstration projects in the literature, in order to accurately make financial and investment decisions. Health Information Technology: the measure work will have to leverage the technology already in hand and will not be able to seek new technology. Regulatory Barriers: regulatory barriers to readmission work would be the lack of current detailed claims data from the State. For this measure work data can be pulled from internal instances of readmission but not external. When a patient is seen in an SCL Health hospital care site and then readmitted at another healthcare system, it will be hard to know if we do not have detailed current claims data. Having access to this current and detailed claims data will give a more accurate picture of readmission and thus lead to impacting readmission work that is based on actual trends as the patients experience them. Engaging difficult to reach populations: Historically, populations living on income below the federal poverty level are harder to engage due to social determinants of health and prioritizing emergent day to day needs over preventative needs. A population that has been historically harder to engage has been patients that are experiencing homelessness. Additionally, patients with chronic disease and little access to primary care have been patients that readmit with more frequency.

Q3.18.

III.A.8.c. Use the following space to describe how the hospital will mitigate the challenges and risks described above.

Please seek to limit response to 750 words.

There is an anticipation that any number of barriers or risks might come up during the five year program. Having resources and teams that support the work help to mitigate risks and barriers as gaps can be discussed quickly within the structures that are currently set up such as the structure of having a virtual health department with experts in this area, having available engagement from Legal and Compliance, and others throughout the organization. Additionally, having a governance structure in place lays a foundation for support of the work and decisions making when barriers seem insurmountable. The leadership that is engaged in the governance of each HTP measure can make decisions such as resource allocation, funding and cost, prioritizing for the organization, and decision to mitigate loss. Workforce: mitigation strategies to workforce shortages could be the deployment of cross training associated to fill roles when shortages are seen. Working in a healthcare system helps as multiple associates across multiple hospital care sites can be trained on the work and shuffled around to cover if shortages are being experienced. Budget: at present there is strong executive support for the work associated with HTP. Additionally, the organization is well positioned financially to continue to make workforce and technology investments which have short term costs in order to realize long term gains and optimal outcomes for our patients including not returning to the hospital. Despite these, a full ROI analysis will be performed with interventions requiring financial investments leveraging test roles or investments, as well as analysis of demonstration projects in the literature, in order to accurately make financial and investment decisions. Health Information Technology: the measure interventions will need to leverage the technology already in place or already in possession by the SCL Health hospital care sites. Regulatory Barriers: SCL Health will work with the State to advocate for data that is important to value based programs, such as current detailed claims data. Engaging patients/hard to reach patients: through the readmission measure work interventions will be developed to address populations that are hard to engage and populations that have increased risk of readmission, as well as populations that do remit with more frequency.

Q3.19. III.A.9. Describe how this intervention will benefit from the hospital's ongoing Community and Health Neighborhood Engagement efforts.

Please seek to limit response to 500 words.

A component of the ongoing Community and Health Neighborhood Engagement (CHNE) efforts includes the Community Health Needs Assessment (CHNA) which all Colorado based SCL Health care sites are in the process to complete in 2021. The CHNA process parallels the intent of the CHNE with emphasis on gathering community feedback to identify and analyze community health needs, as well as to increase engagement. Early results from the current process, gathered through a combination of feedback vehicles including online surveys, stakeholder interviews, focus groups and public data review reflects the ongoing concerns for improving access to healthcare, mental health and expanding resource supports such as transportation and care navigation. This intervention will benefit from the hospital's ongoing CHNE efforts by utilizing the feedback gained from patients and stakeholder organizations and working to connect patients to other available community based social supports (e.g. housing, food, primary care, etc.). The benefits associated with all CHNE efforts enable continuous improvement steps directed toward patient engagement. Several evidence based strategies hold promise to impact this area including providing access to interpreter services, health literacy education, and ensuring that family members and caregivers are included when communicating discharge instructions.

Q3.20. This concludes the information input for this intervention. Information input for the next intervention will now begin.



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Q4.2.

**Overview of Interventions - Intervention 2**

Reporting Hospital	Good Samaritan Medical Center
Intervention	Social Determinants of Health (SDOH) Screening and RAE Notification
Measure	SW-CP1 - Social needs screening and notification

Q4.3. The next section deals with information on one of the hospital's proposed interventions.

Q4.4. III.A.4. Is this an existing intervention (an intervention that the hospital has previously planned and is currently implementing or executing)?

- Yes
- No



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**Q4.6. Overview of Interventions**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Social Determinants of Health (SDOH) Screening and RAE Notification

Q4.7.

III.A.5. The below chart is for principal internal and external administrative roles for this intervention. If there are more than five individuals working on this intervention, please list the five individuals with the greatest leadership roles or most time dedicated to this intervention.

Q4.8.

Name of Individual	Intervention-Specific Role	Will This Individual Lead Implementation of the Intervention? (Y/N)	Name of Organization	Key Deliverables/Responsibilities

Individual #1	Vice President of Care Management	Executive Sponsor	Yes	SCL Health	Leading the project plans and engaging with stakeholders to roll out the screening tool, workflow process, and patient engagement
Individual #2	Director of IT Ops	Technology and data	Yes	SCL Health	Leads the building of IT tools to support measure, RAE notification method, and external vendor selection
Individual #3	System Director of Optimization Care Management and Utilization Review	Clinical Subject Matter Expert (SME)	Yes	SCL Health	Care Management and clinical process SME and EHR tool training engagement across the System
Individual #4	Director of Care Management	End user input	Yes	SCL Health	This position will serve to provide end user input the the screening tool EHR build
Individual #5	System Director Community Benefit	Community Engagement	Yes	SCL Health	Engages with community to learn of any community based streamlined approach to incorporate into internal workflow, engages with ITDS and Care Management to develop the post-acute referral network and vendor selection



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**Q4.10. Overview of Interventions**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Social Determinants of Health (SDOH) Screening and RAE Notification

Q4.11. III.A.6.a. Briefly describe the intervention’s target population for the intervention. This should align with the hospital's approved HTP Application.

Please respond in no more than two sentences.

The target population for this measure is all patients as all patients should be screened for social determinants of health factors.

Q4.12. I.A.6.b. Describe how individuals within the target population will be identified and engaged in the intervention.

Please seek to limit response to 500 words.

The target population, which is all patients, will be identified through a hospital-based screening process. The screening process is determined through a workflow that engages the Nursing and Care Management line of services. Typically, the need for a screening is determined through informal conversation with patients in which the need for a screening is identified. During the HTP years there will be a creation of a streamlined workflow and approach to screening all patients along with the development of an EHR tool to capture and coordinate the process with resources. If the patient screens positive and the Care Management line of services has not been involved to this point, they are brought in for additional screening determinations and the formation of social determinants care plans. The patient can expect to be engaged by a hospital care site staff for the screening, and receive resource referrals as appropriate. The patient can also expect to have a notification to the RAE. Patients will be engaged in a system wide streamlined process to receive evidence based clinical practices at all SCL Health hospital care sites. The patient will be engaged by care management teams or nurse care teams depending on their needs. The patient will be engaged not only in the screening process but with the connection of resources through a referral system. The patient could receive transitions of care support when barriers are identified through the social needs screening process. Part of the SCL Health work for this measure will aim towards collecting closed looped referrals for the purpose of analyzing the referral access post-discharge from the hospital. The collection of this data will be informative to tell our, as a healthcare system, where the gaps are in our resources as a community. Lastly, the RAEs might engage the patient once they receive the notification and determine if the notification is actionable. Some of the RAEs have stated that they will look at their internal high risk patient data against the notifications to determine those patients of high need for support services.

Q4.13.  
III.A.7.a. Please describe what major functions and resources, supporting the intervention throughout the course of implementation are already in place, or are not in place and will need to be re-purposed from other areas, built, acquired, or secured through a partner or in some way.

Please address the following functional areas and resources at a minimum, when responding:

- People (Workforce / Training)
- Processes of Care
- Technology and Data Systems
- Patient Engagement

Q4.14.  
III.A.7.b. Use the following space to describe the major functions and resources that are already in place.

Please seek to limit response to 1,000 words.

Major functional resources available for the development of this measure are in place and consist of the following: People: Each hospital care site has a care management department already in place and ready to support this measure work. The Nursing line of service currently engages with the Care Managers to identify patients with post-acute needs and barriers to care due to social determinant factors. These two lines of service are experts in working with patients and identifying needs. It is anticipated that there will be a need to augment the care management department to support the process of more robust screening plans, assessment, and intervention work. While the IT department has itself seen staffing shortages over the past year, there are experts in EHR building that are engaged in the current plans under the Director of IT Ops in Pop Health. (Hiring new staff is hard, leverage existing positions) Processes of Care: Development of training and orientation to the new SDOH screening tool will roll out before the program performance years. The VP of Care Management is taking on the development of the workflow process and time has been dedicated to that. The Director of IT Ops in Pop Health is taking on the build of a functional EHR screening tool which is already underway and in process. Currently there is a developed timeline to the development of workflow process and creating screening tool training for end users. (Staff being available to train on tool and workflow process) Technology and Data Systems: SCL Health has robust IT capabilities with the EHR to create a screening tool, assessment process, and a data review and analytics capability. With that build, the screening tool can be created and will encompass all domains required in the measure specs and any additional domains identified by internal associates as needed. The build is currently in process and supported by Care Management and the IT departments. The EHR can accommodate such a build and the internal associates are versed in such EHR building. (Utility is a hard domain, competing priorities might halt IT builds) Patient Engagement/Target Population: The Care Management Department and teams currently have resource files with information about community services in the form of brochures, handouts, and website information. During the measure building these resources will be incorporated into a vendor platform to streamline and integrate a workflow by the Care Management staff. The streamlined approach will create regulatory in screening processes to create equity in patient services. Patient engagement currently happens and the Nursing and Care Managers currently engage with patients every day. For this measure work, there will be a workflow created for patient engagement to capture engagement information at a System level to identify themed gaps in the whole system process of identifying patients needs, resource referrals, and the patient's ability to connect with post-acute resources. Currently each SCL Health hospital has their own workflow on patient engagement around social needs assessments along with their own resources within their catchment area. The development of a System wide streamlined approach is anticipated to open up more referral resources in the surroundings of the hospital catchment area which could be utilized to plug patient referral gaps.

Q4.15. III.A.7.c. Use the following space to describe the major functions and resources that are not in place and will need to be re-purposed from other areas, built, acquired, or secured through a partner or in some way.

Please seek to limit response to 1,000 words.

Currently not in place are the following: People: The Nursing and the Care Management lines of service are in place, however, if additional staffing resources are needed that are not currently in place there will need to be a hiring and training process. This process will be determined by the line of service with a comparison of workload to current staffing allocation to the measure work. Bringing in other support staff and not relying on the hiring process to perform measure work could mitigate hiring barriers. Process of Care: The workflow for the screening tool and patient engagement with the tool has not yet been determined. While current patient engagement around needs happens, it does not currently happen with the SDOH screening tool as the tool itself is not created yet. The stream linked work flow process has not been created and the expectation that screenings are done for every patient is additionally not in place. Technology: The screening tool has not been built out in the EHR as of yet. The tool will need to be built out with the domains according to the measure specs. The referral system has not yet been determined as the vendor for the referral platform has not been selected. The RAE notification piece is not currently built out and the capabilities to pull data on performance and the building of a measure dashboard are currently underway but not fully built out. While all these pieces are not indeed built out yet, they will be during the HTP building years and ready for performance. Patient Engagement: currently not every patient is engaged in a social determinants screening tool. The current work is on a screening needs basis. Through the measure work, the screening process will be rolled out to every patient. Once the process workflow, the screening tools, and training on both has been implemented, all patients should be engaged as per the measure specs.

Q4.16.  
III.A.8.a. Describe any major challenges and risks to intervention implementation and how the hospital will mitigate those challenges and risks. In the response, specifically address the following areas:

- Workforce;
- Budget;



- Health Information Technology;
- Regulatory Barriers; and
- Challenges related to engaging difficult-to-reach populations.

Q4.17.

III.A.8.b. Use the following space to describe any major challenges and risks to intervention implementation.

Please seek to limit response to 750 words.

Major challenges and barriers can come up at any time during the program years and being ready for challenges is part of the program and project management strategy used for HTP. SCL Health has the Enterprise Project Management Office engaged with the HTP governance structure through the HTP System Core Team and can leverage risk assessments and mitigation tools. The tools can assist to identify risks, assess the impact, organize the work, keep it on track, and therefore work to address and mitigate any potential program rollout issues. Barriers in the following areas might arise during HTP years: Workforce: Currently there is a shortage in healthcare workers due to exhaustion and burn out over the past year from the pandemic response to COVID-19. Along with many other industries that are experiencing staffing shortages, healthcare is no exception. If it is determined that additional staff is needed to perform in the measure such as additional nursing staff or care managers are needed to reach the target population there will be an evaluation of internal available resources that could be mitigated towards the solution and a risk assessment to determine the impact on HTP work and success. Budget: Budgetary concerns are always existent with downside risk programs. The determination of a cost center or cost appropriation can be difficult in these programs especially in a measure with significant expense such as the IT build out of the SDoH tool and the expense on the social network referral vendor platform. The cost appropriation is not only a one time cost such as a technological acquisition but also ongoing costs such as the hiring of staff and that ongoing salary expense, maintenance, and current staff time allocated to the maintenance of the screening tools if needed. Health Information Technology: A technical challenge to this measure could be competing priorities with other measures and other value based programs with similar deadlines. The demand on IT builds is high right now as hospitals are seeing many value based programs in the government payers space. These programs also have deadlines and need IT builds in order to meet the requirements and this will be an ongoing priority as we push demands on the IT department. Regulatory: The State requirement to send out a notification to the RAEs is a potential area that needs thought and development. A couple RAEs have informed us that they do not themselves have the resources needed to reach out to every patient that had a notification sent to them for every hospital in their region. It has also not been made clear what the RAEs required work role will be in this measure. To that point, this could create duplicative work if internal staff are reaching out to patients or following up to create a closed loop referral simultaneously with RAE care managers or care coordinators. No RAE has defined their role in the measure and this could be an area that needs to be talked through over the HTP years. When the RAEs learn more about their requirements from the State once they are developed, work can be done to collectively move towards a shared vision of filling gaps for patients. Furthermore if the RAEs enter into agreements with certain hospitals and not others to work in coordinated teams and have post-discharge engagement there could be inequities created for patients from region to region and hospital to hospital as some patients are on the receiving end of coordinated RAE services while others are not. Challenges related to engaging difficult to reach populations: Difficult populations to reach have historically been the non-compliant patient population. Convincing someone that they need resources and to utilize resources when they themselves do not believe they need them is a difficult feat. To overcome this barrier to patient engagement, trust must be earned and a one on one personal conversation needs to take place to create a safe place for a patient to open up about their financial positions, housing insecurity, and relationship health. This could especially prove difficult in an acute setting where the patient most likely does not have an existing patient to provider relationship with the attending doctor, the nurse, or the care manager. Screening in such a setting can prove to be impersonal and invasive to some and therefore non-compliant patients exist. Nurses and Care Managers are aware of the barriers to patient engagement and train in best practices in approaching patients. The continuation of training in conversations around the social determinants of health will need to take place throughout HTP years. Another barrier that has been seen and is anticipated over HTP years is that lack of community resources or the capacity of the current resources cannot meet the demand in which they are needed. This is seen in respite and shelter resources for the homeless. This can be especially challenging when a safe place for recovery is necessary for a homeless patient and this space is simply just not available. During the COVID-19 surge there was day to day coordination of homeless patients and more resources were available such as hotel rooms. The hospitals saw this as an optimal solution for this population during the surge but it is expected that fewer resources and support for the homeless will be available post surge.

Q4.18.

III.A.8.c. Use the following space to describe how the hospital will mitigate the challenges and risks described above.

Please seek to limit response to 750 words.

There is an anticipation that any number of barriers or risks might come up during the five year program. Having resources and teams that support the work help to mitigate risks and barriers as gaps can be discussed quickly within the structures that are currently set up such as the structure of having a virtual health department with experts in this area, having available engagement from Legal and Compliance, and others throughout the organization. Additionally, having a governance structure in place lays a foundation for support of the work and decisions making when barriers seem insurmountable. The leadership that is engaged in the governance of each HTP measure can make decisions such as resource allocation, funding and cost, prioritizing for the organization, and decision to mitigate loss. Mitigation strategies in the following areas can be expected: Workforce: The measure work will need to be resilient to staffing shortages and therefore measure work will initially be carried out by current staff and will not be depending on the hiring of additional or new positions. Cross training staff will be important to mitigate staffing challenges. There will also be System support to build out the tool, streamline the process, train and engage staff, create a measure dashboard, perform data review and measure analytics, and complete State reporting requirements. By taking this work on at a System level, it will not only lessen the program management burden but help meet the objective to streamline the process and roll out best practice at every care site. Additionally the analysis of the measure work will aid in the review of trends across multiple SCL Health hospital care sites and communities to look at bigger gaps that can be addressed to create whole community solutions and to participate in the bigger realm of the social determinants of health work. Budget: The Hospital Transformation Program has spaced out the implementation and performance into five years which creates time to work up a budget to support the measure work. If there is no budget in the current year to support work, there could be in the next program year when budgets are created. The evaluation of program downside risk amounts versus cost for implementation will need to be evaluated to determine budgetary needs. Health Information Technology: A technical challenge to this measure is the competing priorities with other measures and other value based programs with similar deadlines. The demand on IT builds is high right now as hospitals are seeing many value based programs in the government payers space. These programs also have deadlines and need IT builds in order to meet the requirements and this will be an ongoing priority as we push demands on the IT departments. Project Management techniques such as program timelines and the strategic mapping out of all program IT requirements can be utilized as needed. If competing priorities were to pose a great risk to measure success, the executive level leadership will need to determine the organization's priorities as it becomes a problem. Regulatory: Mitigating regulatory barriers such as undefined roles and responsibilities between RAEs and hospitals care sites might pose a potential risk if everyone is expecting the other to perform patient follow-up activity. There is also a realization that no one entity has the capacity to manage the entirety of the Medicaid population alone. During HTP years it will be important to work with the State and the RAEs to continue to hammer our roles and manage the collaborative work to ensure wasteful duplicative processes are address and there is a pathway for the State to advance in the ability to address the barriers currently seen in the process of screening for social determinant of health, referring patients to resources, follow-up with patients in a closed looped referrals system, and identifying the true trends that pose the biggest and most important gaps for patients. Challenges related to engaging difficult to reach populations: Creating a safe place for homeless patients to recover from their acute care services should be a priority but is also dependent on the community's ability to create the bed space. Over the pandemic this was possible with additional government resources to purchase hotel rooms. Communication from hospitals to government offices and community based resources will be important to come up with solutions for this population as resources diminish as the pandemic ceases. Assistance from technology and a referral vendor will be an important way to take on referrals that were previously managed by the Care Management Team. With a vendor in place in future years, the Care Management team could have additional capacity to perform patient engagement activities to assist in transition of care and assist the hard to reach patient population.

Q4.19. III.A.9. Describe how this intervention will benefit from the hospital's ongoing Community and Health Neighborhood Engagement efforts.

Please seek to limit response to 500 words.

A component of the ongoing Community and Health Neighborhood Engagement (CHNE) efforts includes the Community Health Needs Assessment (CHNA) which all Colorado based SCL Health care sites are in the process to complete in 2021. The CHNA process parallels the intent of the CHNE with emphasis on gathering community feedback to identify and analyze community health needs, as well as to increase engagement. Early results from the current process, gathered through a combination of feedback vehicles including online surveys, stakeholder interviews, focus groups and public data review reflects the ongoing concerns for improving access to healthcare, mental health and expanding resource supports such as transportation and care navigation. This intervention will benefit from the hospital's ongoing CHNE efforts by utilizing the feedback gained from patients and stakeholder organizations to improve care paths, assess additional barriers to utilization, as well as to understand other available community based supports. Through community partner engagement activities conducted on a regular basis across the SDoH core domains of housing, food insecurity, transportation, utility assistance and interpersonal safety, Community Benefit leaders will function as an essential bridge to expand social support referral organizations. Ongoing interactions with support agencies enables important data gathering to address infrastructure needs that will improve notification and data sharing. Finally, social support capacity limitations continue to be highlighted in CHNE conversations as an area of concern related to potential HTP volume and the current impact of the pandemic. This will be an important issue to navigate in implementing technical tools that streamline the speed of referral.

Q4.20. This concludes the information input for this intervention. Information input for the next intervention will now begin.



**COLORADO**

Q5.2.

**Overview of Interventions - Intervention 3**

Reporting Hospital	Good Samaritan Medical Center
Intervention	Collaborative Discharge Planning and RAE Notification
Measure	SW-BH1 - Collaboratively develop and implement a mutually agreed upon discharge planning and notification process with the appropriate RAE-s for eligible patients with a diagnosis of mental illness or substance use disorder (SUD) discharged from the hospital or ED

Q5.3. The next section deals with information on one of the hospital's proposed interventions.

Q5.4. III.A.4. Is this an existing intervention (an intervention that the hospital has previously planned and is currently implementing or executing)?

- Yes
- No



**COLORADO**

**Q5.6. Overview of Interventions**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Collaborative Discharge Planning and RAE Notification

Q5.7.

III.A.5. The below chart is for principal internal and external administrative roles for this intervention. If there are more than five individuals working on this intervention, please list the five individuals with the greatest leadership roles or most time dedicated to this intervention.

Q5.8.

	Name of Individual	Intervention-Specific Role	Will This Individual Lead Implementation of the Intervention? (Y/N)	Name of Organization	Key Deliverables/ Responsibilities
Individual #1	Manager Assessment & Referral	Notification to the RAE	Yes	SCL Health	Coordination of RAE notifications
Individual #2	Manager Care Management	Notification to the RAE	No	SCL Health	Coordination of RAE notifications and Follow up
Individual #3	Director of IT Operations-population health	IT Builds	No	SCL Health	Oversight of RAE notification solutions
Individual #4	Quality	HTP Partner	Yes	SCL Health	Position works with internal HTP partners to roll out requirements of HTP measure within the behavioral health line of service across all SCL Health hospital care sites
Individual #5	System Director Community Benefit	HTP Core Team	No	SCL Health	HTP Core Services



**COLORADO**

**Q5.10. Overview of Interventions**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Collaborative Discharge Planning and RAE Notification

Q5.11. III.A.6.a. Briefly describe the intervention's target population for the intervention. This should align with the hospital's approved HTP Application.

Please respond in no more than two sentences.

The target population for this measure would be any patient 18 years of age or older, enrolled into Health First Colorado, Colorado's Medicaid program that presents with a principal or secondary diagnosis of mental illness or substance use disorder at one of the SCL Health Colorado hospital care sites.

Q5.12. I.A.6.b. Describe how individuals within the target population will be identified and engaged in the intervention.

Please seek to limit response to 500 words.

The Target population for this measure are engaged when they come into the hospital care site or emergency department. All patients admitted to the hospital or emergency department are screened for risk of suicide using an evidence-based screening tool. Patients 18 years or older who have a primary or secondary mental health or SUD diagnosis, score positively for risk of suicide and who enrolled in Health First Colorado will be referred to the RAE within one business day. The RAEs will receive the patient's information, screening tool used, outcome of the tool, and discharge plan including any additional referrals provided. Additional information about the patient will be provided to the RAE upon request or to meet individual RAE initiatives based on the particular service region. Improving care coordination for this measure will depend on engaging the RAE and relevant community partners to create collaborative discharge processes that intentionally connect available resources with appropriate risk profiles.

Q5.13.  
III.A.7.a. Please describe what major functions and resources, supporting the intervention throughout the course of implementation are already in place, or are not in place and will need to be re-purposed from other areas, built, acquired, or secured through a partner or in some way.

Please address the following functional areas and resources at a minimum, when responding:

- People (Workforce / Training)
- Processes of Care
- Technology and Data Systems
- Patient Engagement

Q5.14.  
III.A.7.b. Use the following space to describe the major functions and resources that are already in place.

Please seek to limit response to 1,000 words.

People: We have dedicated teams at each care site that address behavioral health assessment and care planning. Dependent on the specific care site, the team could include a Behavioral Health clinician, Care Manager, Social Worker, Provider and/or Nurse. Process of care: The screening process for all patients includes utilizing the evidence based suicide assessment, as well as the Providers' initial medical evaluation which includes considerations for mental health and substance use disorders. Following the screening and evaluation, if a patient is identified to meet criteria a referral for further behavioral assessment is completed. Following that assessment a referral is placed to a community provider. Under the HTP intervention, an additional notification will be placed with the RAE. Determining the data format for the RAE notification is one of the early performance milestones that will be developed jointly within the work plan. Technology and Data Systems: The Suicide Risk Assessment is already an established tool used within the hospital setting, as well as the behavioral health consultation process. ITDS will support the next phase of data tools development needed to meet care coordination between the hospital and RAE (including determining the necessary file formats and reporting). Patient Engagement: Patients are engaged in each level of the screening process and offered ways to be an active participant in care planning. Currently the process is not streamlined across all service lines involved, nor is there current RAE engagement for patient notifications.

Q5.15. III.A.7.c. Use the following space to describe the major functions and resources that are not in place and will need to be re-purposed from other areas, built, acquired, or secured through a partner or in some way.

Please seek to limit response to 1,000 words.

People: While there are dedicated teams to address behavioral health at each care site, current staffing challenges and hiring needs present an ongoing concern in meeting patient volume demands related to this measure. Emphasis will be placed on creating work flow processes that can flex accordingly. Additional resources are needed to develop external partnerships who can support high-quality transitions of care. Process of care: Establishing new training protocols related to handling referrals, notification, and use of technology tools. No work flow agreements are in place between the hospital and the RAE. Technology: The technology to track patients and RAE referrals is not currently in place. Throughout the program years, the ability to build out the necessary measure tracking will be required. SCL Health will leverage the existing technology to perform in this measure. Currently the ability to send RAE notifications is also not in place. Flat files can be generated with existing technology however, if RAE notifications go through the Health Information Exchanges, then new HL7 capabilities will need to be built out. Patient Engagement: There is not a streamlined process to risk stratify suicide and SUD patients that meet the criteria of this measure spec. There is not currently a RAE engagement or RAE notification process. Additionally, standards to evaluate patient engagement related to this measure are not yet determined. Needed standards should factor intersections with other risk programs (e.g. HQIP) and RAE KPI's required for this population segment. Patient education materials will be developed and used in order to educate patients and families on the incidence, risk, and access to community based resources.

Q5.16.  
III.A.8.a. Describe any major challenges and risks to intervention implementation and how the hospital will mitigate those challenges and risks. In the response, specifically address the following areas:

- Workforce;
- Budget;

- Health Information Technology;
- Regulatory Barriers; and
- Challenges related to engaging difficult-to-reach populations.

Q5.17.

III.A.8.b. Use the following space to describe any major challenges and risks to intervention implementation.

Please seek to limit response to 750 words.

Major challenges and barriers can come up at any time during the program years and anticipating challenges is part of the program and project management required with HTP. SCL Health has the Enterprise Project Management Office engaged with the HTP governance structure through the HTP System Core Team and can leverage risk assessments and mitigation tools. Barriers in the following areas might arise during HTP years:

**Workforce:** Barriers in the workforce are prevalent now more than ever as clinicians are exhausted over the demanding work of providing and managing care during the pandemic. While we realize it is difficult to hire for positions right now, it is also difficult to engage fatigued staff, as well as engaging staff while their work efforts are prioritized towards the COVID-19 response.

**Budget:** Budgetary concerns always exist with downside risk programs. The determination of a cost center or cost appropriation can be difficult in these programs. There is a need to determine which department will take on the cost without the upside dollars to fund the work. The cost appropriation might go beyond a one time cost such as a technological acquisition, to an ongoing costs such as the hiring of staff and the related salary expense.

**Productivity management** for current staff time allocated to the reporting and intervention work is also a concern, along with competing patient deliverables.

**Health Information Technology:** Barriers exist in information technology as hospitals are seeing a sharp increase in the number of health programs mandated by government payer sources. These programs are often risk based and require new builds or the acquisition of new technology in order to support the required level of outcomes reporting. There is a barrier in discerning program priority for technology implementation. The healthcare industry has seen a sharp staff reduction and the IT field has been no exception. There is additionally a technology barrier in the hospital care site as clinicians and associates are focused on pandemic work and lack the bandwidth needed to learn new technological processes. Time, technology and staffing availability are all in competition in the current patient care environment.

**Patient Engagement:** Patient engagement barriers can include health literacy to understand the medication directives, successfully contacting the patient in the post-acute space to follow-up with care plan compliance, and addressing patient barriers to following their care plan. Solving for the complexities of a patients social determinants of health needs, as well as the limited availability of behavioral health resources will certainly be risk barriers to developing trust and engagement.

Q5.18.

III.A.8.c. Use the following space to describe how the hospital will mitigate the challenges and risks described above.

Please seek to limit response to 750 words.

There is an anticipation that any number of barriers or risks might develop during the five year program. Having resources and teams that support the work help to mitigate risks and barriers as gaps can be discussed quickly within the structures that are currently set up such as the structure of having a cross-functional team of experts, having available engagement from Legal and Compliance, and executive leaders throughout the organization. Additionally, having a governance structure in place lays a foundation for support of the work and decisions making when barriers seem insurmountable. The leadership that is engaged in the governance of each HTP measure can make decisions such as resource allocation, funding and cost, prioritizing for the organization, and decision to mitigate loss. Workforce: the associates involved in the case management will need to work hand in hand with Human Resources to collectively communicate and address recruiting barriers, when needed. The recruitment for vacant positions will need to be a priority. Budget: The budget for this measure will have to be compared to the downside risk amount of the program. From there, organizational priorities will be determined to develop a budget. Health Information Technology: The technology for this measure is predominantly in place and technological barriers are not perceived to be of issue. The predominant technological need for this measure will be the building out of tracking and data collection for subsets of the patient population. This activity will be time intensive and required technology for this such as an EHR and data analytics system is already in place. Patient Engagement: Care Management interventions pursued for HTP and work plans under other measures such as social determinants of health and transitions of care screening for adults with disabilities, and readmission work are all being pursued to develop more robust patient engagement activities to identify barriers that patients have to healthcare or barriers that healthcare workers have in reaching patients for intervention work.

Q5.19. III.A.9. Describe how this intervention will benefit from the hospital's ongoing Community and Health Neighborhood Engagement efforts.

Please seek to limit response to 500 words.

A component of the ongoing Community and Health Neighborhood Engagement (CHNE) efforts includes the Community Health Needs Assessment (CHNA) which all Colorado based SCL Health care sites are in the process to complete in 2021. The CHNA process parallels the intent of the CHNE with emphasis on gathering community feedback to identify and analyze community health needs, as well as to increase engagement. Early results from the current process, gathered through a combination of feedback vehicles including online surveys, stakeholder interviews, focus groups and public data review reflects the ongoing concerns for improving access to healthcare, mental health and expanding resource supports such as transportation and care navigation. Across SCL Health care sites in Colorado, behavioral health has been consistently identified and prioritized in stakeholder feedback as a pressing need area. Highlighted issues include a lack of care coordination among providers, inconsistent care for chronic disease management and restrictive barriers for data sharing. Community members list opportunities for hospital improvements through transitions of care, early intervention around other social needs, and co-located behavioral healthcare. This intervention will benefit from the hospital's ongoing CHNE efforts by utilizing the feedback gained from patients and stakeholder organizations to improve care paths, assess additional barriers to utilization, as well as to understand other available community based supports. Finally, CHNE efforts will assist to inform the development of technology supports, caregiver engagement resources and improvement strategies that advance integrated care.

Q5.20. This concludes the information input for this intervention. Information input for the next intervention will now begin.



**COLORADO**



Q6.2.

**Overview of Interventions - Intervention 4**

Reporting Hospital	Good Samaritan Medical Center
Intervention	ALTO and Opioid Safety
Measure	SW-BH3 - Using Alternatives to Opioids (ALTO's) in hospital ED-s: Decrease use of opioids and Increase use of ALTO-s.

Q6.3. The next section deals with information on one of the hospital's proposed interventions.

Q6.4. III.A.4. Is this an existing intervention (an intervention that the hospital has previously planned and is currently implementing or executing)?

- Yes
- No



**COLORADO**

**Q6.6. Overview of Interventions**

Reporting Hospital:

Good Samaritan Medical Center

Intervention: ALTO and Opioid Safety

Q6.7.

III.A.5. The below chart is for principal internal and external administrative roles for this intervention. If there are more than five individuals working on this intervention, please list the five individuals with the greatest leadership roles or most time dedicated to this intervention.

Q6.8.

Name of Individual	Intervention-Specific Role	Will This Individual Lead Implementation of the Intervention? (Y/N)	Name of Organization	Key Deliverables/Responsibilities
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Individual #1	Director of Clinical Performance Improvement-Quality and Safety	HTP measure partner	Yes	SCL Health	Position will work with HTP to understand measure criteria and assist to roll out criteria within ALTO and pharmacy lines of services
Individual #2	Senior Quality Data Specialist Pharmacy Admin	Data source	No	SCL Health	Position will work with internal HTP teams to collect and report data
Individual #3	Director of Nursing	ALTO oversight	No	SCL Health	ALTO oversight
Individual #4	Physician Administrator	ALTO oversight	No	SCL Health	ALTO oversight
Individual #5					



**COLORADO**

**Q6.10. Overview of Interventions**

Reporting Hospital:  
 Good Samaritan Medical Center  
 Intervention: ALTO and Opioid Safety

Q6.11. III.A.6.a. Briefly describe the intervention’s target population for the intervention. This should align with the hospital's approved HTP Application.

Please respond in no more than two sentences.

The target population for this measure are patients that come into the hospital care site for services and treatment in the identified pain pathways for ALTO.

Q6.12. I.A.6.b. Describe how individuals within the target population will be identified and engaged in the intervention.

Please seek to limit response to 500 words.

Patients are engaged in this measure work when they come into the hospital care site seeking care for a condition or procedure that has been identified as a pain pathway through the work of the American College of Emergency Physicians in collaboration with Colorado Hospital Association. Once the patient is identified as being in an ALTO pain pathway, they will be given the ALTO as their care path requires and allows. Any patient in the ED requiring pain medication for an identified pain pathway that has been determined as an appropriate use of alternative pain medication to opioid medication will be the population in focus for this measure. The patient will receive information on the ALTO pathway and can learn about the initiatives in place at SCL Health hospitals. Additionally, community updates on the battle against opioid addiction will be included in periodic communication through the Community Health Neighborhood Engagement efforts to share information on the role that hospitals plan in combating the opioid epidemic.

Q6.13.

III.A.7.a. Please describe what major functions and resources, supporting the intervention throughout the course of implementation are already in place, or are not in place and will need to be re-purposed from other areas, built, acquired, or secured through a partner or in some way.

Please address the following functional areas and resources at a minimum, when responding:

- People (Workforce / Training)
- Processes of Care
- Technology and Data Systems
- Patient Engagement

Q6.14.

III.A.7.b. Use the following space to describe the major functions and resources that are already in place.

Please seek to limit response to 1,000 words.

SCL Health has previously partnered with the Colorado Hospital Association (CHA) to implement the ED ALTO program that was developed through the pilot project in Colorado. As a result of these efforts much of the functional areas have been addressed for that initial implementation. At present there are opportunities to optimize these items in order to improve outcomes further. Technology & Data Systems: Currently the SCL Health EHR is structured to export opioid administration equivalents and has functional groupers built to match the ALTO and Opiate groupers listed in the original CHA program. Modifications of these groupers will need to occur to adjust measurement to correspond with the HTP measure specifications. This will need to be developed into a dashboard for near real time monitoring of performance for improvement purposes. Workforce & Training: The workforce has already been trained on opiates and alternatives to opiates as well as managing pain in the emergency department using these alternative methods. Opportunities exist to train providers further in local anesthetic, trigger point injections, and block techniques to further decrease opiate administration. Other additional training can be leveraged for improving understanding of pain and pain management physiology as well as the harmful impacts of opioids and efficacy of alternatives. Process: Current quality improvement structures and processes are in place for continuous improvement to decrease opiate administrations. An ED Collaborative structure exists with ED physician and operational leadership participation facilitated by the quality department. Each care site has identified physician, nursing and pharmacy champions. Finally, all sites have support from their quality or performance improvement departments for this work. Additional just in time quality improvement training will likely happen with these improvement teams in order to further the work and overcome hurdles. Patient Engagement Currently each hospital has a patient family advisory council which engages volunteer patients to inform their work. These groups have limited diversity and there is a gap and opportunity to engage a broader group of patients targeted specifically in this case to those who may be treated for pain in the ED's. Additionally, when treating and managing pain in the ED's it is imperative to communicate and educate the patient on the treatment methods, how they work, and the hospital and providers commitment to minimizing their exposure to opioids.

Q6.15. III.A.7.c. Use the following space to describe the major functions and resources that are not in place and will need to be re-purposed from other areas, built, acquired, or secured through a partner or in some way.

Please seek to limit response to 1,000 words.

The HTP team does not anticipate any major barriers to continuous improvement in this area in workforce, budget, Health IT, Regulatory, or difficult to reach populations. It is anticipated that the biggest challenge will be to reduce opiate administrations further beyond current improvements that have already been realized. This will require additional quality improvement and pain treatment strategies that may be more cumbersome or challenging to implement. People (Workforce/Training): If additional pain pathways are implemented, the staffing and training will have to be identified and in place in order to accomplish such an expansion. Process: Shall additional pain pathways or treatment strategies be identified or developed there will need to be an internal process of care defined or quality improvement processes implemented. Resources are not currently in place to support new pain pathways. Technology and Data: The identification and review of Medicaid patient data and performance within the ALTO data sets is not currently in place. The resources exist to pull the data. Through HTP years, the periodicity of pulling payer specific data will be determined. Patient Engagement: The resources are in place to perform in this measure to identify and engage patients. If additional pain pathways are created in the future, resources will need to be determined to identify patients as they come into the hospital care setting for treatment and services.

Q6.16.

III.A.8.a. Describe any major challenges and risks to intervention implementation and how the hospital will mitigate those challenges and risks. In the response, specifically address the following areas:

- Workforce;
- Budget;
- Health Information Technology;
- Regulatory Barriers; and
- Challenges related to engaging difficult-to-reach populations.

Q6.17.

III.A.8.b. Use the following space to describe any major challenges and risks to intervention implementation.

Please seek to limit response to 750 words.

Major challenges and barriers can come up at any time during the program years and being ready for challenges is part of the program and project management such as with HTP. SCL Health has the Enterprise Project Management Office engaged with the HTP governance structure through the HTP System Core Team and can leverage risk assessments and mitigation tools. Barriers in the following areas might arise during HTP years: Workforce: Barriers in the workforce are prevalent now more than ever as clinicians are exhausted over the hard work of managing care during a pandemic. While we realize it is difficult to hire for positions right now, it is also difficult to engage exhausted staff, and engage staff while their work is prioritized towards the COVID-19 response. There also needs to be sensitivity toward staff and not ask for too much too soon after recovery from pandemic work as this could also lead to poor retention. Budget: Budgetary concerns always exist with downside risk programs. The determination of a cost center or cost appropriation can be difficult in these programs. There is a need to determine which department will take on the cost without the upside dollars to fund the work. The cost appropriation might not be a one time cost such as a technological acquisition but also ongoing costs such as the hirings of staff and that ongoing salary expense, maintenance, and current staff time allocated to the reporting and intervention work. ALTOs are part of hospital reimbursement through covered benefits and this measure is built to scale and budgetary barriers are not anticipated in this measure. Health Information Technology: Currently, there are no identified technological barriers in this measure. The pharmacy technology is in place, the data collection is in place. If and when payer data is pulled on ALTO performance, there will need to report building. This building can happen with technologies already in place and canned reporting from the EHR. The time to build out such reports will be the major need for this work. The Information Technology and Data Services department will place this on their strategic calendar with other program and measure builds. Regulatory Barriers: There are no identified regulatory barriers currently in this measure. Engaging difficult to reach populations: There are no identified barriers in engaging difficult to reach populations as the target population comes into the hospital seeking care and receives it. The ALTO administration is determined by the clinicians servicing the patients.

Q6.18. III.A.8.c. Use the following space to describe how the hospital will mitigate the challenges and risks described above.

Please seek to limit response to 750 words.

There is an anticipation that any number of barriers or risks might come up during the five year program. Having resources and teams that support the work help to mitigate risks and barriers as gaps can be discussed quickly within the structures that are currently set up such as the structure of having a virtual health department with experts in this area, having available engagement from Legal and Compliance, and others throughout the organization. Additionally, having a governance structure in place lays a foundation for support of the work and decisions making when barriers seem insurmountable. The leadership that is engaged in the governance of each HTP measure can make decisions such as resource allocation, funding and cost, prioritizing for the organization, and decision to mitigate loss. Workforce: The workforce responsible for this work is currently in place with support of the SCL Health System Quality Department. Budget: The budget for this measure's work has already been determined and allocated. The only future expense identified is the time allocation of the associates that will work on HTP reporting over the HTP program years. The reporting will come from the SCL Health System Quality Department in collaboration with the System HTP Core team. Regulatory Barriers: There are no identified regulatory barriers to this work and therefore no mitigation plan. This measure is well supported by officials, experts, and clinicians to fight the opioid epidemic. Engaging patients/hard to reach patients: Patients are seen in the hospital for care and the patients present themselves to the clinicians. There are no identified hard to reach patients within this measure.

Q6.19. III.A.9. Describe how this intervention will benefit from the hospital's ongoing Community and Health Neighborhood Engagement efforts.

Please seek to limit response to 500 words.

A component of the ongoing Community and Health Neighborhood Engagement (CHNE) efforts includes the Community Health Needs Assessment (CHNA) which all Colorado based SCL Health care sites are in the process to complete in 2021. The CHNA process parallels the intent of the CHNE with emphasis on gathering community feedback to identify and analyze community health needs, as well as to increase engagement. Early results from the current process, gathered through a combination of feedback vehicles including online surveys, stakeholder interviews, focus groups and public data review reflects the ongoing concerns for improving access to healthcare, mental health and expanding resource supports such as transportation and care navigation. This intervention will benefit from the hospital's ongoing CHNE efforts by utilizing the feedback gained from patients and stakeholder organizations to improve care paths, assess additional barriers to utilization, as well as to understand other available community based supports. Working in partnership with the care delivery teams, community benefit leads will assist with the dissemination of information that describes the hospital's role in combating the opioid epidemic. CHNE efforts will also focus on delivering preventive education as a part of regular community outreach events.

Q6.20. This concludes the information input for this intervention. Information input for the next intervention will now begin.



**COLORADO**

Q7.2.  
**Overview of Interventions - Intervention 5**

Reporting Hospital	Good Samaritan Medical Center
Intervention	Hospital Index-Care Redesign
Measure	SW-COE1 - Hospital Index

Q7.3. The next section deals with information on one of the hospital's proposed interventions.

Q7.4. III.A.4. Is this an existing intervention (an intervention that the hospital has previously planned and is currently implementing or executing)?

- Yes
- No



# COLORADO

## Q7.6. Overview of Interventions

Reporting Hospital: Good Samaritan Medical Center

Intervention: Hospital Index-Care Redesign

## Q7.7.

III.A.5. The below chart is for principal internal and external administrative roles for this intervention. If there are more than five individuals working on this intervention, please list the five individuals with the greatest leadership roles or most time dedicated to this intervention.

## Q7.8.

	Name of Individual	Intervention-Specific Role	Will This Individual Lead Implementation of the Intervention? (Y/N)	Name of Organization	Key Deliverables/ Responsibilities
Individual #1	Senior Administrator of the Front Range Network and Risk Programs	Measure lead	Yes	SCL Health	-Rolling out the foundational structure for the Hospital Index measure -engaging service line leadership when barriers and gaps are identified - internal non-clinical stakeholder identification
Individual #2	Manager -Value Based Programs	Data analysis	No	SCL Health	-data analysis of Prometheus data - reporting out to stakeholders
Individual #3	System Director of Population Based Health and Consumer Applications- Information Technology	IT support	No	SCL Health	-responsible for IT builds that accompany the measure structure and performance
Individual #4					
Individual #5					



# COLORADO

## Q7.10. Overview of Interventions

Reporting Hospital:

Good Samaritan Medical Center

Intervention: Hospital Index-Care Redesign

Q7.11. III.A.6.a. Briefly describe the intervention's target population for the intervention. This should align with the hospital's approved HTP Application.

Please respond in no more than two sentences.

The target population are Medicaid patients within the lines of service identified through HTP years within the Prometheus data sets and verified in internal data.

Q7.12. I.A.6.b. Describe how individuals within the target population will be identified and engaged in the intervention.

Please seek to limit response to 500 words.

Engagement of the target population depends on if gaps or barriers are identified as impacting patients. Patients can indirectly be impacted when an internal process is deemed part of the Adverse Actionable Event (AAE) and the patient does not need to be engaged if the impact is indirect. Other times, it could be determined that the gap or barrier is related to the patient's engagement itself and in this scenario, the patient will be engaged. As the Prometheus data is analyzed and improvement is assessed, it will be determined if the patients are directly involved with the identified gap or barrier within the episode of care. When working within cost and care components in episodes of care, patients can be engaged through patient navigators, post-acute check-ins, and online tools such as accessible patient portals. All of these options will be evaluated throughout the program years. Patient navigators can be leveraged to connect to patients while they are in the hospitals. Navigators will then create a plan with the patient to create smooth transitions of care for the patients once they discharge. Creating supports for transitions of care increase the continuity of care that patients experience in their care continuum which could reduce future Adverse Actionable Events. Post-acute check-ins allow for patient engagement to support the patient between their discharge and next avenue of care. This action can become especially important when patients see barriers to their post-acute follow up such as availability of appointments with a specialist or primary care provider. When a patient cannot connect with their next line of service in their care continuum, they could end up readmitting to the hospital because they do not know where else to go. Post-acute patient check-ins can be a patient engagement tactic that reduces Adverse Actionable Events when post-acute barriers are present. Access to a patient portal can improve a patient's post-acute success when health information is available to the patient to review after discharge. Documents on care instructions or a post acute summary can engage a patient into their plan of care. It is expected that over the HTP years that the episodes with high AAE will change from year to year. This has been the case to date, after reviewing the data updates in Prometheus provided by The State. The intent for SCL Health is to perform careful evaluation of the Prometheus data as it gets refreshed from year to year. The goal is to look for trends that make a difference in patient experience, patient care, and long term cost and care efficiencies. Improvement activities will be thoughtful and thorough and not reactive to perceived outliers.



Q7.13.  
III.A.7.a. Please describe what major functions and resources, supporting the intervention throughout the course of implementation are already in place, or are not in place and will need to be re-purposed from other areas, built, acquired, or secured through a partner or in some way.

Please address the following functional areas and resources at a minimum, when responding:

- People (Workforce / Training)
- Processes of Care
- Technology and Data Systems
- Patient Engagement

Q7.14.  
III.A.7.b. Use the following space to describe the major functions and resources that are already in place.

Please seek to limit response to 1,000 words.

There are some resources in place for the Hospital Index measure that consist of the following: People: The major resources in place for the workforce are the lead team with their extensive experience in managed care, population health initiatives, episode based government risk models, and data analytics. The lead team can build a sustainable structure to analyze State data, engage with internal service lines and departments that support improvement and transformation, and host collaborative cross-functional work that supports risk models such as HTP. Process: There is currently a process in place with a Federal program which has some similarities to HTP's Hospital Index measure. The current process will be analyzed for use with the Hospital Index measure. The process involves data analyses, cost targets, identification of episodes that exceed the cost targets, and cross-functional collaborative engagement with applicable lines of service. While the Hospital Index measure does not carry cost targets within the episodes of care, the process might look similar as both programs require the identification of cost and care in efficiencies within certain service lines. Technology and Data Systems: SCL Health has advanced capabilities to analyze data. In place is an advanced EHR capable of capturing and reporting out on patient data along with other platforms which can be leveraged to collect patient or performance data. While the Hospital Index Prometheus data might change from year to year, it is expected that different data sources or internal resources will be identified as they become applicable to certain lines of service in which improvement activities will be engaged. Patient Engagement: Patients are not currently engaged in any intervention work specifically related to the hospital index measure, at this time. There has been activity where patients have been engaged through a Navigator program for another program. The Navigator works with the patient while the patient is in the hospital and maintains communication into the post-acute space after the patient discharges. The purpose of the Navigator is to create continuity of care in their care continuum and create patient success in their recovery from their hospital visit. Throughout the Hospital Transformation Program, especially for continuous improvement activities, there will be an evaluation of hiring and using Navigators to support patient engagement activities in HTP measure activity.

Q7.15. III.A.7.c. Use the following space to describe the major functions and resources that are not in place and will need to be re-purposed from other areas, built, acquired, or secured through a partner or in some way.

Please seek to limit response to 1,000 words.

People: While internal stakeholders are not engaged outside the lead team, it is anticipated that lines of service and internal departments at both SCL Health System office and SCL Health hospital care sites will be engaged throughout program years. The internal stakeholders will change from year to year depending on lines of service impacted and as identified in the Prometheus data sets. It is possible that there could be a gap in internal stakeholders but that is not identified at this time. Process: The gaps associated with the process of care for this measure is that the episodes within Prometheus data run out 90 days. This means that when a patient leaves an SCL Health hospital and continues in their care path, the episode will follow them for cost and care analyses for 90 days. Other non-SCL Health providers in that 90-day period impact the Hospital's scoring of that episode. There is not currently an identified process of care with post-acute providers to collaborate as a network to avoid Adverse Actionable Events. All improvement activities would have to be within the SCL Health care system. Technology: Currently there is no way to ingest the data from Prometheus into internal platforms to analyze. The SCL Health Information Technology and Data Systems Department is currently looking at ways to pull data into an internal dashboard or platform in order to analyze the data against internal data. This process needs to happen in order to pull medical charts for physician review to confirm aspects of the patient's care while in an SCL Health hospital care site. Additionally, the Prometheus data set does not have enough identifying patient information to easily find and confirm the exact patient in the hospital's Electronic Health Record (EHR). Prometheus provides the Patient's Medicaid State ID which is not searchable in the EHR, it has the claims number which is also not searchable in the EHR, and it has the patient's name and date of birth but no other identifying information to confirm patient identity. There will need to be a back and forth patient by patient comparison between patient name, date of birth, State ID, and claim number from Prometheus data to internal data. The data cannot be automatically matched to internal data. Due to this, there will be a heavy manual process that will need to be created in order to match Prometheus data to internal data and SCL Health will have to assign the staff to this large project. Lastly, The Prometheus data sets do not contain current data and in order to make the data in Prometheus actionable and wishfully proactive, it will need to have current claims data. When episodes are identified as having Adverse Actionable Events (AAE), it will be important to verify that the AAE is still happening in today's care or else it is not actionable. If that confirmation happens, then improvement activities can be planned. The confirmation that the AAE is current to today's will need to come from current claims. If an episode in Prometheus is identified as having significant AAE that takes place in the post-acute space, there will be no way to confirm the episode in today's data without current claims data. For these reasons, there are big gaps in technology and data within this measure. Patient Engagement: There will be an evaluation of patient Navigators for HTP that could impact improvement activities associated with the Hospital Index measure. The barriers to having Navigators will mostly be cost. In a downside risk program where dollars are not earned to cover expenses, it will be difficult to come up with a cost center to cover the expense of navigators. Another potential barrier to hiring navigators will be availability within the workforce. During the COVID-19 pandemic there have been hiring shortfalls in the healthcare field.

Q7.16.

III.A.8.a. Describe any major challenges and risks to intervention implementation and how the hospital will mitigate those challenges and risks. In the response, specifically address the following areas:

- Workforce;
- Budget;
- Health Information Technology;
- Regulatory Barriers; and
- Challenges related to engaging difficult-to-reach populations.

Q7.17.

III.A.8.b. Use the following space to describe any major challenges and risks to intervention implementation.

Please seek to limit response to 750 words.

Major challenges and barriers can come up at any time during the program years and being ready for challenges is part of the program and project management of HTP. SCL Health has the Enterprise Project Management Office engaged with the HTP governance structure through the HTP System Core Team and can leverage risk assessments and mitigation tools. Barriers in the following areas might arise during HTP years: Workforce: Currently there is a shortage in healthcare workers due to exhaustion and burn out over the past year from the pandemic response to COVID-19. Along with many other industries that are experiencing staffing shortages, healthcare is no exception. Budget: Budgetary concerns are always existent with downside risk programs. The determination of a cost center or cost appropriation can be difficult in these programs. There is a need to determine which department will take on the cost without the upside dollars to fund the work. The cost appropriation might not be a one time cost such as a technological acquisition but also ongoing costs such as the hirings of staff and that ongoing salary expense, maintenance, and current staff time allocated to the reporting and intervention work. Health Information Technologies: A technical challenge to this measure could be competing priorities with other measures and other value based programs with similar deadlines. The demand on IT builds is high right now as hospitals are seeing many value based programs in the government payers space. These programs also have deadlines and need IT builds in order to meet the requirements and this will be an ongoing priority as we push demands on the IT department. The major challenges and barriers in this measure will be the availability of current Prometheus data, updated claims data, and the elimination of outlier data that might lead improvement activities down the wrong path. To date, the Prometheus dashboard has been refreshed each year over the last three years. Each year, there are different episodes identified as being high in AAE. There is a concern that if we select improvement activities one year, they will not be relevant the next year. Regulatory: Regulatory barriers are seen in this measure such as lack of Stark Law waivers to create post-acute provider networks to manage 90-day episodes. Internal analysis has shown that having a network connection to post-acute providers can assist in creating a community of healthcare lines of service that work together to provide coordinated care. Federal programs that look at episodes of care have offered waivers to such legal barriers in order to create these community networks of care to reduce the adverse care and exceptional cost. The Hospital Index measure and the Prometheus tool are good ideas and exciting to engage with; however, there is some tool refinement that would need to happen to set hospitals up for success in this measure to ensure that the measure can reach its intended purpose. Challenges related to engaging difficult to reach populations: Challenges could exist in certain lines of service and in certain patient sub-populations. Previous data from the State and anecdotal information from SCL Health hospital care sites tell us that the homeless population can be a difficult population to reach for interventions and process of care improvements. The homeless by nature are harder to engage in the post acute space to set up support through a 90-day episode as they do not have a phone, an address, or any ability to be contacted.

Q7.18. III.A.8.c. Use the following space to describe how the hospital will mitigate the challenges and risks described above.

Please seek to limit response to 750 words.

There is an anticipation that any number of barriers or risks might come up during the five year program. Having resources and teams that support the work help to mitigate risks and barriers as gaps can be discussed quickly within the structures that have been created to support HTP. Having a governance structure in place lays a foundation for support of the work and decisions making when barriers seem insurmountable. The leadership that is engaged in the governance of each HTP measure can make decisions such as resource allocation, funding and cost, organizational priorities, and loss mitigation strategies. Below are some ways in which SCL Health hospital care sites might mitigate the challenges listed above: Workforce: This is a difficult barrier to surmount this year as we have seen many industries suffering from inability to hire staff. Healthcare has been no exception. There is a hope that the pandemic will wind down and COVID-19 will not be an ongoing threat. If this is the case, there is hope that human capital resources will flourish again and people will re-enter and return to the workforce. If we continue to see diminishing resources and cannot staff programs, we would not be able to perform in measures. Budget: Due to this program being extended for five years, there will be time to reallocate budgets to fund such measure work that requires investment into technology and staffing. Information Health Technology: SCL Health hospital care sites and the System HTP Core team will work with the State to communicate the technology needs within the Prometheus tool. There is a current commitment from the SCL Health Information Technology and Data Systems team to come up with solutions for ingesting the data from Prometheus for measure work. There are internal associates working on solutions. There are options to look at vendor work and consider vendor solutions if internal resources are not able to fill barriers and gaps. Regulatory: Advocacy with the State is the main approach to eliminating regulatory barriers within the program and within the measure work. The State has been open to comments and suggestions and workgroup activity. The State and hospitals have been willing to come together to form a successful program and there is confidence that the State and hospitals will maintain the collaborative approach to this program in order to see success. Challenging patients to engage: Through the initial program work, it has become apparent that multiple measures will impact the Hospital Index measure. Some of this overlap measure work will help to break barriers in hard to reach populations. Specifically, the Social Determinants of Health measure will engage with difficult to reach populations and attempt to find solutions through the connection of community based resources, and RAE notifications to add support to patients during their care continuum. The potential of navigators for patient engagement could further the ability to work with patients to create transitions of care supports and create plans of communication in the post-acute care continuum.

Q7.19. III.A.9. Describe how this intervention will benefit from the hospital's ongoing Community and Health Neighborhood Engagement efforts.

Please seek to limit response to 500 words.

A component of the ongoing Community and Health Neighborhood Engagement (CHNE) efforts includes the Community Health Needs Assessment (CHNA) which all Colorado based SCL Health care sites are in the process to complete in 2021. The CHNA process parallels the intent of the CHNE with emphasis on gathering community feedback to identify and analyze community health needs, as well as to increase engagement. Early results from the current process, gathered through a combination of feedback vehicles including online surveys, stakeholder interviews, focus groups and public data review reflects the ongoing concerns for improving access to healthcare, mental health and expanding resource supports such as transportation and care navigation. This intervention will benefit from the hospital's ongoing CHNE efforts by utilizing the feedback gained from patients and stakeholder organizations to improve care paths, assess additional barriers to utilization, as well as to understand other available community based supports. The benefits associated with all CHNE efforts enable continuous improvement steps directed toward patient engagement. The Community Benefit team will work closely with the care management team on community outreach and engagement activities.

Q7.20. This concludes the information input for this intervention. Information input for the next intervention will now begin.



**COLORADO**

Q8.2.

**Overview of Interventions - Intervention 6**

Reporting Hospital	Good Samaritan Medical Center
Intervention	Patient Flow - Length of Stay (LOS)
Measure	SW-PH1 - Severity Adjusted Length of Stay (LOS)

Q8.3. The next section deals with information on one of the hospital's proposed interventions.

Q8.4. III.A.4. Is this an existing intervention (an intervention that the hospital has previously planned and is currently implementing or executing)?

Yes

No



# COLORADO

## Q8.6. Overview of Interventions

Reporting Hospital: Good Samaritan Medical Center

Intervention: Patient Flow - Length of Stay (LOS)

Q8.7.

III.A.5. The below chart is for principal internal and external administrative roles for this intervention. If there are more than five individuals working on this intervention, please list the five individuals with the greatest leadership roles or most time dedicated to this intervention.

Q8.8.

	Name of Individual	Intervention-Specific Role	Will This Individual Lead Implementation of the Intervention? (Y/N)	Name of Organization	Key Deliverables/Responsibilities
Individual #1	VP Care Management	Measure partner to HTP	Yes	SCL Health	Individual or individual's delegate will report LOS care pathway work to HTP committee for reporting. Role will facilitate meeting and work for LOS performance such as organizing structural approach for work. Individual sits on Transformation Team
Individual #2	System Transformation Officer/Hospital Operations President GSMC	Oversee all transformation initiatives including LOS	Yes	SCL Health	Transformation lead for the entire SCL Health system. The role leads team meeting to review potential initiatives in hospital transformation such as for LOS initiatives. The transformation team will decide on and finalize work plan on agreed upon initiatives

Individual #3	Hospital Site Chief Medical Officer	Oversees hospital care site LOS initiatives	Yes	SCL Health	Work in collaboration with internal teams to decide on LOS initiatives and monitor performance
Individual #4	Operations Improvement Managers	LOS improvement manager	Yes	SCL Health	This role will assist leadership roles in the development of LOS processed to include project planning and LOS initiative identification
Individual #5					



**COLORADO**

**Q8.10. Overview of Interventions**

Reporting Hospital: Good Samaritan Medical Center  
 Intervention: Patient Flow - Length of Stay (LOS)

Q8.11. III.A.6.a. Briefly describe the intervention’s target population for the intervention. This should align with the hospital's approved HTP Application.

Please respond in no more than two sentences.

The target population are patients that would benefit from improved patient flow activity under the Length of Stay (LOS) measure or populations that are identified as having improvement opportunities in their Length of Stay.

Q8.12. I.A.6.b. Describe how individuals within the target population will be identified and engaged in the intervention.

Please seek to limit response to 500 words.

The Transformation Team will review data and LOS patient flow opportunities and in this process the care path and patient flow is determined. From this work, the patient engagement is identified. Over the HTP years, there will be more information to report on which populations the initiatives will engage and the details of that engagement. The Length of Stay measure is not one intervention over the HTP program, it is a series of interventions with new interventions selected every year. Once a population is identified through a selected intervention, the patient will become engaged when they enter into the hospital care site and meet the patient flow targeted care path or episode of care requirements for engagement. Part of building the LOS measure in the construction years of HTP is to determine the initiatives that will impact the patient's length of stay. Depending on the initiative, the intervention could engage with patients if it is determined to be a significant part of the intervention. When patients are engaged with interventions it is related to clinical best practices in patient care. Initiatives within the LOS portfolio could enhance care management coordination of services for patient populations with complex medical care and social needs such as those seen in the Medicaid beneficiary populations as being prevalent. This includes patients with complex social needs, frequent or high cost utilizers, housing insecure individuals such as the homeless population, and medical complex patients such as those individuals on waivers. A significant goal within the LOS initiatives is to get patients the care they need in the most appropriate setting. Social determinants that accelerate medical conditions could potentially be addressed with the connection of resources that address the social determinant. Within this initiative, the patients would experience Care Management engagement for screenings, they will receive referrals for positive screens, and potential post-acute engagement to provide support through their care continuum while recognizing that lack of resources could contribute to worsening of condition.

Q8.13.

III.A.7.a. Please describe what major functions and resources, supporting the intervention throughout the course of implementation are already in place, or are not in place and will need to be re-purposed from other areas, built, acquired, or secured through a partner or in some way.

Please address the following functional areas and resources at a minimum, when responding:

- People (Workforce / Training)
- Processes of Care
- Technology and Data Systems
- Patient Engagement

Q8.14.

III.A.7.b. Use the following space to describe the major functions and resources that are already in place.

Please seek to limit response to 1,000 words.

The Length of Stay measure has supports in place that consist of the following: Workforce/Training: Training on the LOS dashboard use and methodology is in place for our current LOS dashboard but additional training/education will be needed on the Medicaid views dashboard. The LOS team, under the Transformation Team, will be leveraged to educate all team members during team meetings in order to show how to pull this data and what the methodology means for this data. The education will include a review of the targets and benchmarks and how the data relates to these benchmarks. Although the work has not been accomplished to date, the structure is in place to facilitate the work. Training for performance appraisals and action plans have a current model but will need to be readjusted for new initiatives. Again, the LOS team will train and educate staff during review meetings on the appraisals and action plans and how to utilize these plans. Process: There are processes of care in place for every service line that is consistent with clinical best practice. As initiatives get rolled out, there will be new processes of care for those work plans that do not have an established process. The structure of creating this process is in place. Technology: SCL Health has an advanced ability for technological capabilities. There are options to use the EHR and other platforms to collect data. The capabilities to collect Medicaid specific data to track and evaluate Medicaid performance is not currently in place however, SCL Health's Information Technology and Data Systems, Informatics, and the Enterprise Business Analytics Departments are capable of building tools for data collection and analysis. Patient Engagement There has been previous patient engagement in the formed Patient Flow work team however a more robust program will roll out with patient engagement as the measure work rolls out over HTP years.

Q8.15. III.A.7.c. Use the following space to describe the major functions and resources that are not in place and will need to be re-purposed from other areas, built, acquired, or secured through a partner or in some way.

Please seek to limit response to 1,000 words.

Currently the major functional resources not in place consist of the following: Workforce: The next phase of implementation based on Institute for Healthcare Improvement (IHI) portfolio of LOS change ideas is not in place, the first wave of implementation has been completed but the second phase has not begun. We will enlist the LOS transformation team to discuss and finalize what elements of the IHI initiatives are appropriate for implementation and prioritize that work in order of importance. After this has been identified, the people and training will take place. Process: Project plan creation for the next phase of work has not been implemented. The Operations Improvement Manager will put together a draft of the next phase of work including the prioritized efforts. Operations Improvement Manager will collaborate with the LOS team to develop an appropriate timeline of milestones. Technology: Tracking and following LOS measure performance specifically for one payer population, Medicaid, is not currently in place. For HTP, the measure work will include the building out of a dashboard to track Medicaid patients specifically. The goal would be to integrate this dashboard into the currently existing LOS dashboard. The LOS leadership will be leveraged to provide clinical oversight to ensure correct measures and targets are created. Collaborative efforts will be made with the internal Information Technology and Data Systems teams, Analytics, and Financial Departments to build a robust encompassing dashboard with accurate data fields and financial data. Stakeholders will review data for feedback before production and work with our provider groups for buy-in. Patient Engagement: Patient engagement is not currently in place for the LOS initiatives that will roll out at the beginning of the HTP years. The LOS work associated with patient flow will be determined once the analyses of IHI initiatives are determined.

Q8.16.

III.A.8.a. Describe any major challenges and risks to intervention implementation and how the hospital will mitigate those challenges and risks. In the response, specifically address the following areas:

- Workforce;
- Budget;
- Health Information Technology;
- Regulatory Barriers; and
- Challenges related to engaging difficult-to-reach populations.

Q8.17.

III.A.8.b. Use the following space to describe any major challenges and risks to intervention implementation.

Please seek to limit response to 750 words.



Major challenges and barriers can come up at any time during the program years and being ready for challenges is part of the program and project management strategy used for HTP. SCL Health has the Enterprise Project Management Office engaged with the HTP governance structure through the HTP System Core Team and can leverage risk assessments and mitigation tools. The tools can assist to identify risks, assess the impact, organize the work, keep it on track, and therefore work to address and mitigate any potential program rollout issues. Barriers in the following areas might arise during HTP years: Workforce: Barriers in the workforce are prevalent now more than ever as clinicians are exhausted over the hard work of managing care during a pandemic. While we realize it is difficult to hire for positions right now, it is also difficult to engage exhausted staff, and engage staff while their work is prioritized towards the COVID-19 response. While this measure has the staff in place to guide the measure, the lines of service associated with LOS initiatives could be impacted if they have seen high turn-over. Budget: Budgetary concerns always exist with downside risk programs. The determination of a cost center or cost appropriation can be difficult in these programs. There is a need to determine which department will take on the cost without the upside dollars to fund the work. The cost appropriation might not be a one time cost such as a technological acquisition but also ongoing costs such as the hirings of staff and that ongoing salary expense, maintenance, and current staff time allocated to the reporting and intervention work. Health Information Technology: A technical challenge to this measure could be the competing priorities with other measures and other value based programs with similar deadlines. The demand on IT builds is high right now as hospitals are seeing many value based programs in the government payers space. These programs also have deadlines and need IT builds in order to meet the requirements and this will be an ongoing priority as we push demands on the IT department. Regulatory Barriers: There are no anticipated regulatory barriers to the LOS measure for HTP. Challenges related to engaging difficult-to-reach populations: Challenges to engaging difficult to reach populations within the LOS measure can be the act of matching patients up with the most appropriate care at the right time in the most appropriate setting when their condition is not the determining factor. Patients can experience inappropriate lengths of stay due to other circumstances such as the social determinants of health. Addressing the root causes behind the inappropriate lengths of stay is essential in addressing system barriers to healthcare. This has been seen with the homeless population and instances when it has been safer to keep them admitted to the hospital to ensure a safe recovery rather than discharging with post-acute orders that cannot be met. The LOS work spans greatly beyond the work that happens inside the hospitals as finding solutions to homelessness for safe recovery depends on coordination from hospitals to post-acute support services, the available resources of the community, and safety net programs.

Q8.18. III.A.8.c. Use the following space to describe how the hospital will mitigate the challenges and risks described above.

Please seek to limit response to 750 words.

There is an anticipation that any number of barriers or risks might come up during the five year program. Having resources and teams that support the work help to mitigate risks and barriers as gaps can be discussed quickly within the structures that are currently set up such as the structure of having a virtual health department with experts in this area, having available engagement from Legal and Compliance, and others throughout the organization. Additionally, having a governance structure in place lays a foundation for support of the work and decisions making when barriers seem insurmountable. The leadership that is engaged in the governance of each HTP measure can make decisions such as resource allocation, funding and cost, prioritizing for the organization, and decision to mitigate loss. Workforce: While there is an anticipation that staffing shortages may become a problem, the mitigation strategy is to assign the measure work to staff that already exists and not to become dependent on filling positions to complete the measure work. The work that is planned for this measure can be integrated into positions that already exist. System level support should additionally ease the burden with already exhausted staff in order to create a workflow and streamlined process with System support for IT builds and data analysis. Budget Mitigating budget barriers can happen over the program years as budgets can be shifted or organizational priorities will be made to reallocate resources. Health Information Technology In building large programs like HTP there will need to be a development of a strategic timeline for technology implementation. Such strategies can be made in partnership with the Information Technology and Data Systems team to map out which measure or which programs will be built out along the strategic map. Engaging with the project management resources involved in HTP will be of great value in forming the strategic mapping. Regulatory Barriers Any regulatory barriers that may come up in future HTP years can be addressed through advocacy work to convey messages of best clinical practice and to build, in partnership with the State, programs that last and programs that can be successful. Regulatory barriers, especially those that impact patient care, will need solutions over time and while hospitals are one piece of the healthcare industry, the patients will need advocacy when the insurance plan doesn't cover needed healthcare services, especially as it relates to services included in the HTP measures. Challenges related to engaging difficult-to-reach populations: Addressing the social determinants of health can overlap with the LOS measure when patient engagement is determined to be addressing non-medical root causes behind inappropriate lengths of stay. The System Vice President of Care Management is involved in the leadership of this measure and utilizing care management interventions for patients care will be evaluated and considered for the LOS measure. After analyzing current data and opportunities there will be more information on non-medical root causes behind inappropriate lengths of stay. At that time, it will be determined if leveraging the Care Management team will be part of the intervention strategy.

Q8.19. III.A.9. Describe how this intervention will benefit from the hospital's ongoing Community and Health Neighborhood Engagement efforts.

Please seek to limit response to 500 words.

A component of the ongoing Community and Health Neighborhood Engagement (CHNE) efforts includes the Community Health Needs Assessment (CHNA) which all Colorado based SCL Health care sites are in the process to complete in 2021. The CHNA process parallels the intent of the CHNE with emphasis on gathering community feedback to identify and analyze community health needs, as well as to increase engagement s. Early results from the current process, gathered through a combination of feedback vehicles including online surveys, stakeholder interviews, focus groups and public data review reflects the ongoing concerns for improving access to healthcare, mental health and expanding resource supports such as transportation and care navigation. This intervention will benefit from the hospital's ongoing CHNE efforts by utilizing the feedback gained from patients and stakeholder organizations and working to connect patients to other available community based social supports (e.g. housing, food, transportation, primary care, etc.). The benefits associated with all CHNE efforts enable continuous improvement steps directed toward patient engagement. The Community Benefit team will work closely with the care management team on community engagement activities.

Q8.20. This concludes the information input for this intervention. Information input for the next intervention will now begin.



**COLORADO**

Q9.2.  
**Overview of Interventions - Intervention 7**

Reporting Hospital	Good Samaritan Medical Center
Intervention	Patients with Ischemic Stroke Discharged with Statin Medications
Measure	RAH4 - Percentage of patients with ischemic stroke who are discharged on statin medication

Q9.3. The next section deals with information on one of the hospital's proposed interventions.

Q9.4. III.A.4. Is this an existing intervention (an intervention that the hospital has previously planned and is currently implementing or executing)?

- Yes
- No



# COLORADO

## Q9.6. Overview of Interventions

Reporting Hospital: Good Samaritan Medical Center

Intervention: Patients with Ischemic Stroke Discharged with Statin Medications

## Q9.7.

III.A.5. The below chart is for principal internal and external administrative roles for this intervention. If there are more than five individuals working on this intervention, please list the five individuals with the greatest leadership roles or most time dedicated to this intervention.

## Q9.8.

	Name of Individual	Intervention-Specific Role	Will This Individual Lead Implementation of the Intervention? (Y/N)	Name of Organization	Key Deliverables/ Responsibilities
Individual #1	Director of Neuroscience service line	Measure partners to System HTP core team	Yes	SCL Health	This position will work with the System HTP core team to identify measure requirements, create work plans, and communicate with all stroke coordinators and directors at each SCL Health Colorado hospital care site about the program.
Individual #2	Stroke Coordinator	Carry out patient engagement measure work	Yes	SCL Health	All Stroke Coordinators at every SCL Health Colorado hospital care site will be responsible for carrying out the stroke work as defined by the HTP measure requirements
Individual #3					
Individual #4					
Individual #5					



# COLORADO

## Q9.10. Overview of Interventions

Reporting Hospital: Good Samaritan Medical Center

Intervention: Patients with Ischemic Stroke Discharged with Statin Medications

Q9.11. III.A.6.a. Briefly describe the intervention's target population for the intervention. This should align with the hospital's approved HTP Application.

Please respond in no more than two sentences.

The target population for this measure would be any patient enrolled into Health First Colorado, Colorado's Medicaid program that presents with ischemic stroke at one the SCL Health Colorado hospital care sites.

Q9.12. I.A.6.b. Describe how individuals within the target population will be identified and engaged in the intervention.

Please seek to limit response to 500 words.

Patients are engaged when they initially come into one the the SCL Health Colorado hospital care sites with symptoms of ischemic stroke. The patient is immediately assessed for stroke and if the patient is having an ischemic stroke they are observed and treated with clinical interventions. The performed interventions are according to stroke center certified best practice. After the patient is treated and is ready for discharge, they are given a statin medication prescription. In the post-discharge space there is patient follow-up from the Stroke Coordinators or Directors to support patients in their recovery and address any medication barriers along with answering any questions about statin medication adherence. Throughout the measure work roll out there will be a sharing of best practice on engaging patients post-discharge, as this is not always an easy task. The Medicaid population could have social determinants to health that could pose as a barrier to successful medication adherence. Examples of such barriers include: lack of utility support to keep a phone line active or a safe place to recover for housing insecure individuals, or health literacy barriers. There is potential in this measure to utilize additional telemedicine technologies if the professionals within the line of service determine during the continuous improvement phase. The System Virtual Health Department could become a future partner to this measure if more telemedicine services were to be utilized for patient engagement. Additionally, engagement with the readmission reduction team as part of the initiative to reduce readmissions could prove to be successful in both this measure and the readmission measure and might deploy patient engagement tactics to prevent readmissions amongst patients with ischemic stroke. The engagement would be during the continuous improvement phase once Medicaid specific data is identified and analysed. The Care Management could partner with Stroke Coordinators to identify ischemic stroke patients with social determinants of health and deliver patient engagement tactics to create post-acute care plans to address social resources barriers. Again, this work would happen in the continuous improvement phase of the measure. Lastly, patients that have a stroke and are not medication adherence in the post acute space have a higher potential for a sequential stroke. Strokes can cause disabilities and when patients have disabilities they will engage with transition of care support. The Stroke Coordinators and Directors will collaborate in future HTP years to identify ways that this measure overlaps with the transitions of care in adults with disabilities HTP measure.

Q9.13.

III.A.7.a. Please describe what major functions and resources, supporting the intervention throughout the course of implementation are already in place, or are not in place and will need to be re-purposed from other areas, built, acquired, or secured through a partner or in some way.

Please address the following functional areas and resources at a minimum, when responding:

- People (Workforce / Training)
- Processes of Care
- Technology and Data Systems
- Patient Engagement

Q9.14.

III.A.7.b. Use the following space to describe the major functions and resources that are already in place.

Please seek to limit response to 1,000 words.

There are currently major resources in place for the measure work. Some of these major functional resources are: Technology and Data Systems: These are already in place. SCL Health hospital care sites are certified stroke centers, and have electronic databases that contain the information needed to support this initiative. SCL Health has the capabilities to develop data analytics to be able to capture and examine patient readmission rates or other pertinent details of the stroke population. Workforce / Training: The workforce for this initiative is already trained and in place. The Stroke Coordinators will be the leads at each of the applicable SCL Health hospital care sites and they have been capturing the data and historically, plan and implement process improvement initiatives. Quality Improvement: This functional area is already in place. Each SCL Health Colorado hospital care site is either a Primary Stroke Center (PSC) or a Comprehensive Stroke Center (CSC). These certifications require that the hospital care sites have robust quality improvement philosophies, and that each hospital care site shows documented improvement in treatment delivery and patient outcomes each time they are surveyed. Because of this requirement the Stroke Coordinators are well versed at quality improvement initiatives and work very closely with the hospital care site Performance Improvement Department. Each hospital care site has a Stroke Committee that meets monthly. At this committee all current projects and data are reviewed by a multidisciplinary team (including the Stroke Coordinator and the Performance Improvement Specialist) and confirmed that they are on track. Patient Engagement: This functional area is already in place. Each of the SCL Health Colorado hospital care sites have robust community outreach initiatives for patient education. When the patients are discharged from the hospital they are given an education packet that has been tailored to their specific educational needs and outlines their specific risk factors. Included in this packet are the medications they are being prescribed, and why they need to take them. After discharge, the patients receive a follow up phone call within 7 days to review their information and which gives the patient, or caregiver, the option to indicate they have questions and they will get a call back from a Stroke Coordinator. The outreach calls happen again at 90 days post discharge. SCL Health hospital care sites also offer Stroke Support Groups for our patients to utilize. This is always an opportunity to check in with patients, answer questions, and help remove any obstacles following through with their care plans.

Q9.15. III.A.7.c. Use the following space to describe the major functions and resources that are not in place and will need to be re-purposed from other areas, built, acquired, or secured through a partner or in some way.

Please seek to limit response to 1,000 words.

There currently exists core support for the measure work with the previously developed resources in the major functional areas. Additional resources in these major areas could be considered to be the following: Technology and Data Systems: Further development of technological capabilities to use already captured measure data for drilling down into trends within sub populations such as the Medicaid population are not currently in place. The data could tell stories of barriers to successful implementation of measure work or patient engagement in the post discharge period. Workforce/training: There are no perceived supports that are not in place for this measure work. The workforce to support this work is in place at each of the SCL Health hospital care sites with engagement from Quality and Performance Improvement professionals at both the System level and the hospital care site level. Process: Partners engaged in this work such as System and hospital care site Quality and Performance Improvement professionals have their work in place for this measure. Throughout HTP continuous improvement years there could be new perspectives added to this work such as looking at patient care and outcomes with a health equity lens and trends in barriers to successful recovery according to language, race, ethnicity, and social determinants of health. Patient Engagement: As stated above, there is a robust program to engage with patients on the clinical performance of this measure. The successful recovery from the stroke in the post-acute space with a statin medication prescription is essential to preventing future strokes and disabilities. During the continuous improvement years of HTP, if it is determined that patient engagement post-discharge is not as successful as it needs to be, then there will be an evaluation into patient engagement tactics and tools.

Q9.16.

III.A.8.a. Describe any major challenges and risks to intervention implementation and how the hospital will mitigate those challenges and risks. In the response, specifically address the following areas:

- Workforce;
- Budget;
- Health Information Technology;
- Regulatory Barriers; and
- Challenges related to engaging difficult-to-reach populations.

Q9.17.

III.A.8.b. Use the following space to describe any major challenges and risks to intervention implementation.

Please seek to limit response to 750 words.

Major challenges and barriers can come up at any time during the program years and being ready for challenges is part of the program and project management such as with HTP. SCL Health has the Enterprise Project Management Office engaged with the HTP governance structure through the HTP System Core Team and can leverage risk assessments and mitigation tools. Barriers in the following areas might arise during HTP years: Workforce: Barriers in the workforce are prevalent now more than ever as clinicians are exhausted over the hard work of providing and managing care during a pandemic. While we realize it is difficult to hire for positions right now, it is also difficult to engage exhausted staff, and engaging staff while their work is prioritized towards the pandemic COVID-19 response is difficult. Budget: Budgetary concerns always exist with downside risk programs. The determination of a cost center or cost appropriation can be difficult in these programs. There is a need to determine which department will take on the cost without the upside dollars to fund the work. The cost appropriation might not be a one time cost such as a technological acquisition but also ongoing costs such as the hirings of staff and that ongoing salary expense, maintenance, and current staff time allocated to the reporting and intervention work. Health Information Technology: Barriers exist in information technology as the healthcare system to include hospitals are seeing a sharp increase of health programs mandated by government payer sources. The programs are often risk based and require new builds or the acquisition of new technology. There is a barrier in discerning program priority for technology implementation. The healthcare industry has seen a sharp staff reduction and the IT field has been no exception. There is additionally a technology barrier in the hospital care site as clinicals and associates are focused on pandemic work and learning new technological processes to perform in a measure might compete with their time toward treating patients. Patient Engagement: Patient engagement barriers can include health literacy to understand the medication directives, getting ahold of the patient in the post-acute space to follow-up with care plan compliance, and addressing patient barriers to following their care plan.

Q9.18.  
III.A.8.c. Use the following space to describe how the hospital will mitigate the challenges and risks described above.

Please seek to limit response to 750 words.

There is an anticipation that any number of barriers or risks might come up during the five year program. Having resources and teams that support the work help to mitigate risks and barriers as gaps can be discussed quickly within the structures that are currently set up such as the structure of having a virtual health department with experts in this area, having available engagement from Legal and Compliance, and others throughout the organization. Additionally, having a governance structure in place lays a foundation for support of the work and decisions making when barriers seem insurmountable. The leadership that is engaged in the governance of each HTP measure can make decisions such as resource allocation, funding and cost, prioritizing for the organization, and decision to mitigate loss. Workforce: the associates involved in the stroke line of service will need to work hand in hand with Human Resources to collectively communicate and address recruiting barriers. The stroke Coordinators, Directors, and service line leadership are essential staff to hospitals as each SCL Health hospital is a certified stroke center. The recruitment for vacant positions will need to be a priority. Budget: The budget for this measure will have to be compared to the downside risk amount of the program. From there, organizational priorities will be determined to develop a budget. Health Information Technology: The technology for this measure is predominantly in place and technological barriers are not perceived to be of issue. The predominant technological need for this measure will be the building out of tracking and data collection for subsets of the patient population. This activity will be time intensive and required technology for this such as an EHR and data analytics system is already in place. Patient Engagement: Care Management interventions pursued for HTP and work plans under other measures such as social determinants of health and transitions of care screening for adults with disabilities, and readmission work are all being pursued to develop more robust patient engagement activities to identify barriers that patients have to healthcare or barriers that healthcare workers have in reaching patients for intervention work.

Q9.19. III.A.9. Describe how this intervention will benefit from the hospital's ongoing Community and Health Neighborhood Engagement efforts.

Please seek to limit response to 500 words.

A component of the ongoing Community and Health Neighborhood Engagement (CHNE) efforts includes the Community Health Needs Assessment (CHNA) which all Colorado based SCL Health care sites are in the process to complete in 2021. The CHNA process parallels the intent of the CHNE with emphasis on gathering community feedback to identify and analyze community health needs, as well as to increase engagement. Early results from the current process, gathered through a combination of feedback vehicles including online surveys, stakeholder interviews, focus groups and public data review reflects the ongoing concerns for improving access to healthcare, mental health and expanding resource supports such as transportation and care navigation. This intervention will benefit from the hospital's ongoing CHNE efforts by utilizing the feedback gained from patients and stakeholder organizations to improve care paths, assess additional barriers to utilization, as well as to understand other available community based supports. Community Benefit leads will work to ensure that discharge planning includes access to internal and external program supports such as Stroke Support groups and related caregiver services.

Q9.20. This concludes the information input for this intervention. Information input for the next intervention will now begin.



**COLORADO**

Q10.2.

**Overview of Interventions - Intervention 8**

Reporting Hospital	Good Samaritan Medical Center
Intervention	Maternal Mental Health Collaborative
Measure	CP6 - Screening and Referral for Perinatal and Post-Partum Depression and Anxiety and notification of positive screens to the Regional Accountable Entities (RAE)

Q10.3. The next section deals with information on one of the hospital's proposed interventions.

Q10.4. III.A.4. Is this an existing intervention (an intervention that the hospital has previously planned and is currently implementing or executing)?

Yes

No





# COLORADO

## Q10.6. Overview of Interventions

Reporting Hospital: Good Samaritan Medical Center

Intervention: Maternal Mental Health Collaborative

Q10.7.  
 III.A.5. The below chart is for principal internal and external administrative roles for this intervention. If there are more than five individuals working on this intervention, please list the five individuals with the greatest leadership roles or most time dedicated to this intervention.

Q10.8.

	Name of Individual	Intervention-Specific Role	Will This Individual Lead Implementation of the Intervention? (Y/N)	Name of Organization	Key Deliverables/Responsibilities
Individual #1	RN Educator	Screening Patients	N	SCL Health	Screen patient with EPDS
Individual #2	RN Educator/Case Management Director	Notification to RAE	N	SCL Health	Coordination of RAE notification work
Individual #3	Quality and Safety Clinical Performance Improvement Industrial Engineer	HTP partner	Yes	SCL Health	Position works with internal HTP partners to roll out requirements of HTP measure within the maternal health line of service across all SCL Health hospital care sites
Individual #4	Director of IT Operations-population health efforts	IT builds	Yes	SCL Health	Oversight of RAE notification solutions
Individual #5	Application Analyst Application Services	IT and data analytics	Yes	SCL Health	RAE notification builds



# COLORADO

## Q10.10. Overview of Interventions

Reporting Hospital: Good Samaritan Medical Center

Intervention: Maternal Mental Health Collaborative

Q10.11. III.A.6.a. Briefly describe the intervention's target population for the intervention. This should align with the hospital's approved HTP Application.

Please respond in no more than two sentences.

The Target population for this measure are perinatal patients who are pregnant or in their post-partum period of up to 60-days.

Q10.12. I.A.6.b. Describe how individuals within the target population will be identified and engaged in the intervention.

Please seek to limit response to 500 words.

The Target population for this measure are engaged when they come into the hospital care site and are in their perinatal period. Patients will be identified for the evidence-based screening from their inpatient status and department location. The screening will take place and the patient will receive the outcome of their screening. When the patient screens positive for depression or anxiety they will be referred on to resources and the RAE within one business day. The RAEs will receive the patient's information, screening tool used, outcome of tool, and care plan. Additional information about the patient will be provided to the RAE upon request or to meet individual RAE initiatives from region to region. If the patient has engaged with an SCL Health primary care office and has recent screening on file, that screening will be confirmed with the patient and the RAE notification made for positive screening results. When a perinatal patient screens positive for depression or anxiety, they will receive a stage based response determined by the screening outcome. Determined by the screening outcomes the patient will experience a stage based response that can consist of further health evaluations, appropriately times behavioral health interventions, or an emergency response protocol. Patient education materials will be developed and used in order to educate patients and families in regard to the incidence, risk, and resources related to perinatal mood and anxiety disorders. Through these education materials, patients will also be oriented to SCL Health's rationale for universal screening both during pregnancy and after; these materials will be updated as needed to reflect the most recent information and resources. The measure objectives are to implement a screening process for patients in order for patients to get connected to the mental and behavioral health services needed. Through this process, the connection for patients and resources to include RAE resources for the Medicaid mental and behavioral health provider network will be easier to access.

Q10.13.

III.A.7.a. Please describe what major functions and resources, supporting the intervention throughout the course of implementation are already in place, or are not in place and will need to be re-purposed from other

areas, built, acquired, or secured through a partner or in some way.

Please address the following functional areas and resources at a minimum, when responding:

- People (Workforce / Training)
- Processes of Care
- Technology and Data Systems
- Patient Engagement

Q10.14.

III.A.7.b. Use the following space to describe the major functions and resources that are already in place.

Please seek to limit response to 1,000 words.

The implementation of a streamlined hospital based screening for the perinatal population will be an ongoing process of engagement between the internal maternal safety bundle team, SCL Health Hospital Care Sites, and SCL Health System offices to develop a streamlined best-practice approach. Here are the current supports in place for the measure work: Workforce/ Training: A system for creating e-module training already exists within SCL Health. SCL Health's basic maternal mental health e-module will be updated annually to reflect the most recent and relevant evidence, information and best practices. Additional e-modules that train on specifics of patient interaction and workflow will be created for both the inpatient and outpatient settings. Process: Recently developed was a process to implement the perinatal screening tool. The tool will be rolled out in all SCL Health hospital care sites. SCL Health will work with the RAEs to develop the most effective and efficient notification and referral practices for patients who screen positive. Ongoing feedback will be solicited from the RAEs, necessary for best practices to continue evolving. Technology and Data Systems: The electronic medical record currently supports use of the Edinburgh Postnatal Depression Scale, however does not not automatically send case management referrals on patients with positive screens to support the maternal mental health screening and referral workflow. Information technology will build an automatic referral rule to promote workflow compliance. Information technology is working to create a dashboard which will make maternal mental health data points available to the user. Patient Engagement: Patients are currently engaged at some SCL Health hospital care sites through a site process. Patient education materials will be developed and used in order to educate patients and families in regard to the incidence, risk, and resources related to perinatal mood and anxiety disorders. Through these education materials, patients will also be oriented to SCL Health's rationale for universal screening both during pregnancy and after; these materials will be updated as needed to reflect the most recent information and resources. Marketing and Communications will support this work and patient education materials will be made available electronically in order to reduce paper use and cost.

Q10.15. III.A.7.c. Use the following space to describe the major functions and resources that are not in place and will need to be re-purposed from other areas, built, acquired, or secured through a partner or in some way.

Please seek to limit response to 1,000 words.

People (Workforce/Training): Even though there are some structural supports in place for telemedicine development as listed above there has not been a stakeholder engagement process to recruit and engage key decision makers in a regular process to continually develop telemedicine solutions. These key stakeholders are the clinical leaders within the hospital care sites. The roll out of the telemedicine measure intervention will include the process of developing a team of engaged stakeholder for the continual identification of telemedicine interventions. Process: There is no streamlined nor intentional program or process to develop telemedicine currently. During HTP program years, a process for engaging in continual development of telemedicine interventions will be developed. Part of the process development will be to determine the components of a process that need to be in place to make for successful telemedicine interventions. Such components might be the identification of the line of service, a responsible associate within the line of services, a patient care path through the telemedicine intervention, the deployment of technology solutions within the intervention, review and analysis of process after deployment, and recording of performance rates. Technology and Data: Currently we believe we have technological capacity to roll out most telemedicine interventions such as video visit technological capabilities and other telemedicine platforms. It is currently unknown where the technology gaps might be and we will most likely identify where the gaps are as the SCL Health hospital care sites develop more and more telemedicine interventions throughout the program years. This process might come to light when an idea comes up in a later HTP program year during the continuous improvement period. At that point it could be recognized that SCL Health does not possess the technology to support the idea. The System Virtual Health Department will then identify the cost and through analysis it will be determined if that technology will be acquired or not. Patient Engagement: SCL Health hospitals selected the telemedicine measure for HTP to grow the ability to deliver services through technology. During the COVID-19 pandemic it became apparent that patients are willing to engage in telemedicine services and some lines of service are more accessible, such as mental health services. Previous to the pandemic patients did not engage in telemedicine to the extent they are currently. There is not currently a robust telemedicine program to support the demands of the patient population. Through HTP years, that program will be put in place. SCL Health has seen success in this work in the Montana hospital care sites and plans to expand this good work to SCL Health's Colorado hospital care sites. The difference between Montana and Colorado hospital care sites is great in that Montana has a large rural community and creating telemedicine interventions in rural areas engages patients in geographical access that makes healthcare services available when they are otherwise not. This looks different in Colorado as the majority of the population living in Colorado reside in urban areas where geographical access might not be the barriers. The barriers to patient engagement are different on the Front Range and Western Slope in Grand Junction from rural communities and these different factors have to be taken into account. The same technologies that were used in Montana might not be applicable in the urban hospital setting. The factors predominantly seen in Colorado urban communities are related to social determinants of health along with preventative health education and advocacy. The focus of the SCL Health Colorado hospital care site telemedicine program will need to be analyzed through the barriers that are identified in an urban setting.

Q10.16.

III.A.8.a. Describe any major challenges and risks to intervention implementation and how the hospital will mitigate those challenges and risks. In the response, specifically address the following areas:

- Workforce;
- Budget;
- Health Information Technology;
- Regulatory Barriers; and
- Challenges related to engaging difficult-to-reach populations.

Q10.17.

III.A.8.b. Use the following space to describe any major challenges and risks to intervention implementation.

Please seek to limit response to 750 words.

Major challenges and barriers can come up at any time during the program years and being ready for challenges is part of the program and project management such as with HTP. SCL Health has the Enterprise Project Management Office engaged with the HTP governance structure through the HTP System Core Team and can leverage risk assessments and mitigation tools. Barriers in the following areas might arise during HTP years: Workforce: Barriers in the workforce are prevalent now more than ever as clinicians are exhausted over the hard work of managing care during a pandemic. While we realize it is difficult to hire for positions right now, it is also difficult to engage exhausted staff, and engage staff while their work is prioritized towards the COVID-19 response. There also needs to be sensitivity toward staff and not ask for too much too soon after recovery from pandemic work. While the staff are currently in place for this position, if that changes in coming years, this could become a barrier to measure performance. Budget: Budgetary concerns always exist with downside risk programs. The determination of a cost center or cost appropriation can be difficult in these programs. There is a need to determine which department will take on the cost without the upside dollars to fund the work. The cost appropriation might not be a one time cost such as a technological acquisition but also ongoing costs such as the hirings of staff and that ongoing salary expense, maintenance, and current staff time allocated to the reporting and intervention work. This measure is supported by HTP, HQIP, and safety bundle dollars and might not experience budgetary barriers as much as some of the other measures that are not supported by upside dollars. Health Information Technology: A technical challenge to this measure could be competing priorities with other measures and other value based programs with similar deadlines. The demand on IT builds is high right now as hospitals are seeing many value based programs in the government payers space. These programs also have deadlines and need IT builds in order to meet the requirements and this will be an ongoing priority as we push demands on the IT department. This measure requires the identification of Medicaid patients and ability to pull data on this population. This priority of this build with the Information Technology and Data Services department will be determined by their strategic calendar of builds. Regulatory Barriers: The regulatory barriers that exist are unclear definitions of measure work by the RAEs. Maternal Health is part of the RAEs KPIs as assigned by the State. Additionally, the RAEs hold the Healthy Communities contract that required the outreach, connection of benefit, and connection to providers for children and perinatal patients. Different RAEs have made different expectations for the hospitals and there is no streamlined approach to this work statewide. Ultimately, the lack of process creates duplicative work and uneven work across hospitals and systems as the patient might have a different experience depending on the RAE region. The patient may experience uneven access to resources, benefit information, and their mental and behavioral health provider network, depending on the work of the RAEs. A workgroup between RAEs and hospital systems in the State would be beneficial to address roles and responsibilities within this measure.

Q10.18.

III.A.8.c. Use the following space to describe how the hospital will mitigate the challenges and risks described above.

Please seek to limit response to 750 words.

There is an anticipation that any number of barriers or risks might come up during the five year program. Having resources and teams that support the work help to mitigate risks and barriers as gaps can be discussed quickly within the structures that are currently set up such as the structure of having a virtual health department with experts in this area, having available engagement from Legal and Compliance, and others throughout the organization. Additionally, having a governance structure in place lays a foundation for support of the work and decisions making when barriers seem insurmountable. The leadership that is engaged in the governance of each HTP measure can make decisions such as resource allocation, funding and cost, prioritizing for the organization, and decision to mitigate loss. Workforce: Mitigating workforce shortages can happen over time as people return to the workforce. The work under this measure can be mitigated to other staff for the screening process. If staffing shortages are seen over time, the mitigation to those staff will be determined by lead roles within the maternal safety bundle team. Budget: The budget for this measure will have to be compared to the downside risk amount of the program. From there, organizational priorities will be determined to develop a budget. The dollars from overlapping programs such as the safety bundle and the HQIP dollars can contribute to the support of this program. Health Information Technology: Due to the slow roll out of HTP, it will create plenty of time for the Information Technology and Data Services department to plan accordingly and place this work on their strategic calendar to get in place previous to measure performance. Regulatory Barriers: SCL Health will work with the State to advocate for development of this measure to include options that SCL Health associates and clinicians see as best practice in the virtual health field. While advocacy can take place for reimbursement, there has been positive signals from the Federal Government that they are ready to embrace the expansion of hospital based telemedicine reimbursement and SCL Health will eagerly contribute to federal request for comments or any feedback opportunities that are presented to advocate for expansion of services not only to create efficiencies, update technological capabilities in the field, but also to create access which is believed to in turn reduce cost. Engaging patients/hard to reach patients: Reaching patients that are hard to reach has always been a challenge and utilizing partnerships with the RAEs and SCL Health primary care offices will contribute to the success in following up with hard to reach patients. It is anticipated that connected patients with resources that they can themselves access along with Medicaid benefit information, and access to the Medicaid mental and behavioral health provider network will be key in creating continuity for patients in this measure population. The more a patient has to do to access care, the less likely they are to access it. When benefits, provider options, and resources are easy to access, it is more likely that they will be accessed. SCL Health will work with each RAE to find a process that works for everyone involved with the addition of advocacy to the State to create definition around RAE roles to avoid duplicative work that could stunt the time available for this collaborative approach.

Q10.19. III.A.9. Describe how this intervention will benefit from the hospital's ongoing Community and Health Neighborhood Engagement efforts.

Please seek to limit response to 500 words.

A component of the ongoing Community and Health Neighborhood Engagement (CHNE) efforts includes the Community Health Needs Assessment (CHNA) which all Colorado based SCL Health care sites are in the process to complete in 2021. The CHNA process parallels the intent of the CHNE with emphasis on gathering community feedback to identify and analyze community health needs, as well as to increase engagement. Early results from the current process, gathered through a combination of feedback vehicles including online surveys, stakeholder interviews, focus groups and public data review reflects the ongoing concerns for improving access to healthcare, mental health and expanding resource supports such as transportation and care navigation. The recently released Health First Colorado Maternity report highlighted many opportunities to close disparity gaps. CHNE outreach efforts will be essential to cultivate access points with target populations represented in the report, in addition to connecting women to resources that underscore the importance of first trimester prenatal care and depression screening (during pregnancy and postpartum). This intervention will benefit from the hospital's ongoing CHNE efforts by expanding perinatal data acquisition and quality through feedback gained from patients and stakeholder organizations to improve care paths, identify barriers to utilization, as well as to understand other available community based supports.

Q10.20. This concludes the information input for this intervention. Information input for the next intervention will now begin.



**COLORADO**

Q11.2.  
**Overview of Interventions - Intervention 9**

Reporting Hospital	Good Samaritan Medical Center
Intervention	Screening for transitions of care in Adults with Disabilities
Measure	CP4 - Screening for transitions of care supports in adults with disabilities

Q11.3. The next section deals with information on one of the hospital's proposed interventions.

Q11.4. III.A.4. Is this an existing intervention (an intervention that the hospital has previously planned and is currently implementing or executing)?

- Yes
- No



# COLORADO

## Q11.6. Overview of Interventions

Reporting Hospital: Good Samaritan Medical Center

Intervention:

## Q11.7.

III.A.5. The below chart is for principal internal and external administrative roles for this intervention. If there are more than five individuals working on this intervention, please list the five individuals with the greatest leadership roles or most time dedicated to this intervention.

## Q11.8.

	Name of Individual	Intervention-Specific Role	Will This Individual Lead Implementation of the Intervention? (Y/N)	Name of Organization	Key Deliverables/Responsibilities
Individual #1	System Vice President of Care Management	Executive Sponsor	Y	SCL Health	Implementation plan development, implementation plan guidance, and being accountable for measure development and performance.
Individual #2	System Director of Outcome Optimization-Care Management and Utilization Review	Measure Lead	Y	SCL Health	This position will contribute through clinical subject matter expertise to incorporate into the building of this measure, internal training on the screening tool, and lead for the quality improvement process development.
Individual #3	System Director of Pop Health Information Technology	Lead Information Technology resource	Y	SCL Health	This position will lead the development of Epic tools and electronic reporting methodology
Individual #4	Hospital Care Site Director of Care Management	Lead of hospital intervention work	Y	SCL Health	Implementation of process and use of tool at hospital care site.
Individual #5					



# COLORADO

## Q11.10. Overview of Interventions

Reporting Hospital: Good Samaritan Medical Center

Intervention: Screening for transitions of care in Adults with Disabilities

Q11.11. III.A.6.a. Briefly describe the intervention's target population for the intervention. This should align with the hospital's approved HTP Application.

Please respond in no more than two sentences.

The target population will be adults with disabilities that are 18 years of age or older.

Q11.12. I.A.6.b. Describe how individuals within the target population will be identified and engaged in the intervention.

Please seek to limit response to 500 words.

Patients that fall into this measure work will include patients or beneficiaries from all payers in accordance with the HTP measure specs, to include Medicaid patients. First, patients will need to be identified as having a disability upon their arrival at the hospital. Such patient information is collected by the hospital's Patient Access team upon arrival and registration through insurance eligibility verification processes. Once the patients are identified, the Care Management team will engage with the patients for a transition of care screening process, which will be developed through the HTP measure building period. The identified patients will receive a screening by the Care Management Team and support service gaps for post acute transitions will be identified and addressed by the Care Management Team. Care Managers will work with patients to share a post acute transitions support plan that is mutually agreed upon by the patients, caregivers, or patient representative for the objectives to create a successful recovery after hospital discharge. The goals under the patient engagement for this measure are to increase continuity of care between acute and ambulatory services for the patients. The second goal is to create an action plan that supports the objective of creating continuity of care and that the action plan is available to those giving care to the patient and the patient is aware of the action plan. The measure intervention work includes usage of technological resources to implement a screening tool and a process of creating a whole system work flow to birth a streamlined approach across all SCL Health hospitals. This would include an expectation that the work is required and being accomplished which will show in measure performance. Having tools in hand and a process in place means that all patients will receive this process of care and we would not expect for this care service to be occasional, uncoordinated, or optional. The formation of this measure work will create patient identification and engagement for the purpose to serve patients with the dignity and the health equity they deserve in their healthcare experience.

Q11.13.



III.A.7.a. Please describe what major functions and resources, supporting the intervention throughout the course of implementation are already in place, or are not in place and will need to be re-purposed from other areas, built, acquired, or secured through a partner or in some way.

Please address the following functional areas and resources at a minimum, when responding:

- People (Workforce / Training)
- Processes of Care
- Technology and Data Systems
- Patient Engagement

Q11.14.

III.A.7.b. Use the following space to describe the major functions and resources that are already in place.

Please seek to limit response to 1,000 words.

The measure work of screening adults with disabilities for transitions of care supports has ample support from leadership throughout the organization such as an executive level sponsor, the VP of Care Management, and Care Management Directors at each SCL Health Colorado hospital care site. The People: Each SCL Health hospital care site is staffed with Care Managers who are key to the measure work. The Care Managers will work directly with patients to perform the measure screenings. The Care Management staff may need to be augmented if the volume of needed screenings is higher than the current Care Managers have capacity to perform. SCL Health has support from the System's Enterprise Learning and Professional Development Department to train associates on new processes or tools. Once a new tool is created and a process for the tool is designed, the training will be carried out with all end users through a supported process. Lastly, the System's Information Technology and Data Services (ITDS) Department has recently developed a Population Health team that is dedicated to building and creating tools for programs such as HTP. In summary, there is ample support from the people aspect of the measure work to carry out the tasks associated with building this measure work and performing under this measure. Over the course of the HTP years Process: There is currently no formal process or tool in place to perform or report on this measure work. All measure process work will need to be built out and created. The resources are currently available to create a process. The main resources needed in creating a process would be to have an executive sponsor to oversee the work, having a team to come up with the details of how the work will be accomplished according to best practice, the technology to implement the process, training on how to use the process, and review of the process for improvement opportunities. All listed attributions to creating a process are in place or available for the measure work. Technology: SCL Health currently has a functional EHR that is capable of building a formal process to meet the technological needs to roll out the measure work. The pop health ITDS team has created a measure work plan with the VP of Care Management to meet the technology requests for measure performance. The EHR will allow for patient identification and screening tools. Patient Engagement/Target Population: Currently in place is a care management team that is skilled in identifying patient needs and can work directly with the patient to identify gaps in disability resources or identify patients that may qualify for disability interventions. The Care Managers work closely with the Community Benefit team to identify resources in the community such as community based organizations, safety net programs, and post-acute resources such as durable medical supply and rehabilitation centers.

Q11.15. III.A.7.c. Use the following space to describe the major functions and resources that are not in place and will need to be re-purposed from other areas, built, acquired, or secured through a partner or in some way.

Please seek to limit response to 1,000 words.

Currently not in place for this measure is a patient identification process. The ITDS team, Care Manager, and Patient Access and Registration stakeholders will work in a collaborative group to create a method for patient identification and a process in which the patients will flow into the Care Managers daily routine. Not in place is a process for using the tool once the patient has been identified. The stakeholders involved will need to determine a process in which the screening tool will be used and how the patients will be engaged along with determining the connection of post acute transitions of care support. The screening tool is another piece of this measure that is not in place. Between now and the first performance year, the measure stakeholders will work together to create a screening tool, a process for that tool, and training on how to use the tool. Lastly and ideally, there will be a process in place which streamlines referrals into post-acute resources and providers and the creation of closed looped referrals. This process will most likely depend on the selection of a community resource referral vendor and will overlap with the Social Determinants of Health screening and referral process. Although there is overlap, these two measures have two distinct objectives and the needs of the population under this measure will not always be community based social resources but instead could be medical accessibility and the creation of communication between providers in the patient's care continuum to create the continuity of care that makes for a safe and successful recovery after the patient is discharged from the hospital. The formalization of this measure is not built out; however, once built out across all SCL Health Colorado hospitals care sites, the analysis of true patient care gaps can start to take place. Currently it is difficult to determine true care gaps as there is no standardization nor process. The feedback is anecdotal at this point and through the building and performance of measure work, there will be both quantitative and qualitative data to guide best practice.

Q11.16.

III.A.8.a. Describe any major challenges and risks to intervention implementation and how the hospital will mitigate those challenges and risks. In the response, specifically address the following areas:

- Workforce;
- Budget;
- Health Information Technology;
- Regulatory Barriers; and
- Challenges related to engaging difficult-to-reach populations.

Q11.17.

III.A.8.b. Use the following space to describe any major challenges and risks to intervention implementation.

Please seek to limit response to 750 words.

Major challenges and barriers can come up at any time during the program years and being ready for challenges is part of the program and project management strategy used for HTP. SCL Health has the Enterprise Project Management Office engaged with the HTP governance structure through the HTP System Core Team and can leverage risk assessments and mitigation tools. The tools can assist to identify risks, assess the impact, organize the work, keep it on track, and therefore work to address and mitigate any potential program rollout issues. Barriers in the following areas might arise during HTP years: Workforce: Currently there is a shortage in healthcare workers due to exhaustion and burn out over the past year from the pandemic response to COVID-19. Along with many other industries that are experiencing staffing shortages, healthcare is no exception. Budget: Budgetary concerns are always existent with downside risk programs. The determination of a cost center or cost appropriation can be difficult in these programs. There is a need to determine which department will take on the cost without the upside dollars to fund the work. The cost appropriation might not be a one time cost such as a technological acquisition but also ongoing costs such as the hirings of staff and that ongoing salary expense, maintenance, and current staff time allocated to the reporting and intervention work. Health Information Technologies: A technical challenge to this measure could be competing priorities with other measures and other value based programs with similar deadlines. The demand on IT builds is high right now as hospitals are seeing many value based programs in the government payers space. These programs also have deadlines and need IT builds in order to meet the requirements and this will be an ongoing priority as we push demands on the IT department. This measure requires the identification of patients living with disabilities and a screening tool in the EHR to create the measure objectives of streamlining a process across all SCL Health hospitals and all patients living with disabilities. Regulatory: A concern that the Care Managers have in this measure is that challenges might arise due to Health First Colorado Medicaid potentially not covering the post acute services needed for patients to get the appropriate care post hospital discharge. Such examples would be approving care in a selected location to oversee a safe recovery, and authorization approvals on post-acute inpatient stays for mental and behavioral health treatment. Regulatory challenges can also be broader in scope than definitive to each measure. Duplicative work for multiple programs can be a regulatory challenge, especially with complex programs with heavy attestation reporting requirements. For every attestation report that is written and information is gathered from the hospital care teams, that add on to the time spent away from patient care. When looking at one program at a time, it doesn't seem like a lot but when there are many programs at both the State and Federal level, the reporting adds up and takes up a large chunk of time. Challenges related to engaging difficult to reach populations: Challenges could potentially arise when technologies and resources are needed for a successful recovery but are not ADA compliant when needed. There has been feedback from hospital care sites that the homeless population living with disabilities can be a harder population to assist through transitions of care support as they might not have a means to communicate in the post acute space with workers such as care coordinators or patient navigators.

Q11.18. III.A.8.c. Use the following space to describe how the hospital will mitigate the challenges and risks described above.

Please seek to limit response to 750 words.

There is an anticipation that any number of barriers or risks might come up during the five year program. Having resources and teams that support the work help to mitigate risks and barriers as gaps can be discussed quickly within the structures that are currently set up such as the structure of having a virtual health department with experts in this area, having available engagement from Legal and Compliance, and others throughout the organization. Additionally, having a governance structure in place lays a foundation for support of the work and decisions making when barriers seem insurmountable. The leadership that is engaged in the governance of each HTP measure can make decisions such as resource allocation, funding and cost, prioritizing for the organization, and decision to mitigate loss. The Hospital Transformation Program has spaced out the implementation and performance into five years which creates time to work up a budget to support the measure work. If there is no budget in the current year to support work, there could be in the next program year when budgets are created. Additional risk mitigation tactics can be used for the following areas: Workforce: While there is an anticipation that staffing shortages may become a problem the mitigation strategy is to assign the measure work to staff that already exists and not to become dependent on filling positions to complete the measure work. The work that is planned for this measure can be integrated into positions that already exist. System level support should additionally ease the burden with already exhausted staff in order to create a workflow and streamlined process with System support for IT builds and data analysis. Budget: Mitigating budget barriers can happen over the program years as budgets can be shifted or organizational priorities will be made to reallocate resources. Health Information Technology: In building large programs like HTP there will need to be a development of a strategic timeline for technology implementation. Such strategies can be made in partnership with the Information Technology and Data Systems team to map out which measure or which programs will be built out along the strategic map. Engaging with the project management resources involved in HTP will be of great value in forming the strategic mapping. Regulatory: Regulatory barriers can be addressed through advocacy work to convey messages of best clinical practice and to build, in partnership with the State, programs that last and programs that can be successful. Regulatory barriers, especially those that impact patient care, will need solutions over time and while hospitals are one piece of the healthcare industry, the patients will need advocacy when the insurance plan doesn't cover needed healthcare services, especially as it relates to services included in the HTP measures. Challenges related to engaging difficult to reach populations: HTP measure interventions have included the robust development of care management services. Through these services techniques will be reviewed for patient engagement and patients that are hard or challenging to reach. Engagement with community partners and efforts such as the SHIE group, RAE work, and engaging with other hospital systems will be important to addressing the barriers associated with this measure.

Q11.19. III.A.9. Describe how this intervention will benefit from the hospital's ongoing Community and Health Neighborhood Engagement efforts.

Please seek to limit response to 500 words.

A component of the ongoing Community and Health Neighborhood Engagement (CHNE) efforts includes the Community Health Needs Assessment (CHNA) which all Colorado based SCL Health care sites are in the process to complete in 2021. The CHNA process parallels the intent of the CHNE with emphasis on gathering community feedback to identify and analyze community health needs, as well as to increase engagement. Early results from the current process, gathered through a combination of feedback vehicles including online surveys, stakeholder interviews, focus groups and public data review reflects the ongoing concerns for improving access to healthcare, mental health and expanding resource supports such as transportation and care navigation. Specifically for populations managing disabilities, prevalence data for Colorado shows mobility and cognition disabilities as most represented followed by independent living. Demographically, thirty-four percent are age 65+, twenty percent represent ages 45-64 and fifteen percent 18-44 (according to Behavioral Risk Factor Surveillance System/BRFSS 2019). Improving population targets is another benefit of CHNE efforts. Data shows health disparities around obesity, smoking, diabetes and heart disease for this population are an opportunity for additional intervention support. These chronic health conditions are also represented as CHNA priority program initiatives within community benefit. This intervention will benefit from the hospital's ongoing CHNE efforts by utilizing the feedback gained from patients and stakeholder organizations to improve care paths, assess additional barriers to utilization, as well as to understand other available community based supports. Additionally, through an emphasis on equity and inclusion strategies, the CHNE process addresses staff education and training to influence improvements in service delivery particularly for patient factors such as poor health literacy and communication skills. Caregivers who support this population also present an opportunity for support and engagement as an essential member on the care coordination team.

Q11.20. This concludes the information input for this intervention. Information input for the next intervention will now begin.



**COLORADO**

Q12.2.  
**Overview of Interventions - Intervention 10**

Reporting Hospital	Good Samaritan Medical Center
Intervention	Telehealth Implementation and Expansion
Measure	COE2 - Implementation/expansion of telemedicine visits

Q12.3. The next section deals with information on one of the hospital's proposed interventions.

Q12.4. III.A.4. Is this an existing intervention (an intervention that the hospital has previously planned and is currently implementing or executing)?

- Yes
- No



# COLORADO

**Q12.6. Overview of Interventions**

Reporting Hospital: Good Samaritan Medical Center  
 Intervention: Telehealth Implementation and Expansion

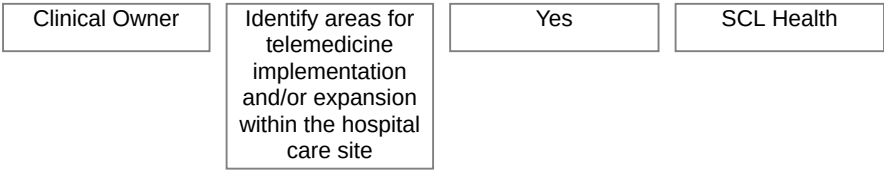
Q12.7.  
 III.A.5. The below chart is for principal internal and external administrative roles for this intervention. If there are more than five individuals working on this intervention, please list the five individuals with the greatest leadership roles or most time dedicated to this intervention.

Q12.8.

	Name of Individual	Intervention-Specific Role	Will This Individual Lead Implementation of the Intervention? (Y/N)	Name of Organization	Key Deliverables/Responsibilities
Individual #1	Director of System Virtual Health	Partner with hospitals to engage in gap analysis and implement telemedicine	Cross-functional partnership and virtual health support services	SCL Health	

The Virtual Health team's role is to support care sites in their virtual health goals and partner towards solutions that make an impact on the problem or opportunity. We provide support by: Virtual Health portfolio management for new services and platforms including: Act as a consultant to the Virtual Health Clinical Owner for onboarding new providers on existing services or standing up new services Lead the execution of the virtual health toolkit Coordinate activities across operations, compliance, billing, coding, system services, and ITDS teams Organize and communicate telehealth issues, risks, action items Transition to operational ownership once service is live Act as and Coordinate with Subject Matter Experts on Virtual Health: Reimbursement options Telehealth laws Best practices across industry for workflows

Individual #2



Be available to participate in meetings and complete action items during planning and implementation (availability is crucial) Have a full understanding of the project scope and how the service will be utilized to meet a need Direct staff and provider training activities Be the main point of contact for the service once the service is live Lead in areas of utilization and optimization once the service is live Be the service "Cheerleader" Lead the operational and clinical components of delivering telemedicine Weigh in on workflow optimizations Lead change management activities for clinical associates, Serve as point person for ongoing oversight of the clinical service The clinical owner will partner with the Virtual Health Team who will be responsible for coordinating activities specific to virtual health across system services teams.

Individual #3

Legal-General Counsel	Review telemedicine ideas from a legal standpoint	No	SCL Health	Vet telemedicine ideas and requests for billing, coding compliance and legal components.
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Individual #4

Director Coding Physicians Ops	Review telemedicine ideas from a coding standpoint	No	SCL Health	Vet telemedicine ideas and request for billing and coding components to determine accuracy in event capture
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Individual #5

Senior Director System Compliance and Privacy	Review telemedicine ideas from a compliance standpoint	No	SCL Health	Vet telemedicine ideas and requests for the analysis of compliance components
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# COLORADO

## Q12.10. Overview of Interventions

Reporting Hospital: Good Samaritan Medical Center

Intervention: Telehealth Implementation and Expansion

Q12.11. III.A.6.a. Briefly describe the intervention's target population for the intervention. This should align with the hospital's approved HTP Application.

Please respond in no more than two sentences.

The target population would be patients that are seen for specific treatment in which the telemedicine intervention is used.

Q12.12. I.A.6.b. Describe how individuals within the target population will be identified and engaged in the intervention.

Please seek to limit response to 500 words.

The target population will be those patients that are seen for services that align with the service line and telemedicine criteria in the interventions. When telemedicine interventions are developed on an ongoing basis over the HTP years from initial implementation to ongoing continuous improvement implementation, the patients will be identified according to the lines of services that are impacted by the telemedicine intervention. Part of the planning and implementation for a telemedicine intervention is the process of care and patient engagement in that intervention. The patient population will change from intervention to intervention as the program measure develops over time while not eliminating previous populations of engagement. Once the patient population has been outlined in the process of the telemedicine intervention, the patient will be directly engaged as they seek services within the criteria of that intervention. The hospital care site associates and clinicians will have a patient care path outlined for each telemedicine intervention for the purpose of identifying those patients that meet criteria for the telemedicine intervention. To that end, when a patient comes into the hospital for treatment, it will be determined whether or not they will qualify for engagement in the telemedicine intervention depending on their identified care path. SCL Health hospital care sites will work with the State to further clarify rules and regulations on what counts for telemedicine engagement within interventions. To advocate and promote optimal telemedicine abilities to engage patients will be important to fill gaps and barriers for patients, especially those experiencing social determinants of health or those hard to reach populations. During the COVID-19 pandemic, the use of telemedicine services saw an increase of 2,600% according to a recent study from CIVHC. Medicaid patients being the highest utilizers of telemedicine and mental and behavioral health services being the highest utilized service via telemedicine. The idea behind this measure selection was to keep this momentum going for telemedicine services and especially to break patient barriers to care when access is the barrier.

Q12.13.



III.A.7.a. Please describe what major functions and resources, supporting the intervention throughout the course of implementation are already in place, or are not in place and will need to be re-purposed from other areas, built, acquired, or secured through a partner or in some way.

Please address the following functional areas and resources at a minimum, when responding:

- People (Workforce / Training)
- Processes of Care
- Technology and Data Systems
- Patient Engagement

Q12.14.

III.A.7.b. Use the following space to describe the major functions and resources that are already in place.

Please seek to limit response to 1,000 words.

The implementation and expansion of telemedicine interventions will be an ongoing process of engagement between SCL Health System office and SCL Health Hospital Care Sites to identify the ongoing opportunities to leverage telemedicine and virtual health in the hospital care setting. Here are the current supports in place for the measure work: People (Workforce/Training): Already in place to support this work is the SCL Health System Virtual Health Department which consists of experts in the field of virtual health deployment. The SCL Health Hospital Care Sites have support through the System's Virtual Health experts to work hand in hand to identify best options, recommendations, and viability of ideas that come out of the gap analysis process. Additional support comes from the System Triage Team that would meet to review programmatic or telemedicine ideas to review the viability of the idea from a compliance, billing and coding, legal, and revenue integrity lens. The Triage Team can assist with recommendations that make interventions compliant with regulations. Each SCL Health hospital care site has support on telemedicine development through the hospital care site HTP teams conveying program information to service line and clinical leaders within the hospital care sites. Finally there is existing training material on how to use telemedicine equipment such as video platform training, job aids, videos, and workflows to assist in the roll out of telemedicine interventions. Process: the process of vetting ideas through a triage team is the only process currently in place and has been leveraged for telemedicine in SCL Health Hospital Care Sites in other States and in Colorado on an as needed basis. There is currently a developed process of recording the telemedicine intervention within the patient's medical record and capability to pull reports to obtain a visit count. Technology and Data: The System Virtual Health Department has technology and equipment on hand to deploy interventions as needed such as video platforms and electronic medical record tools, job aids and training, videos, and workflows on telemedicine interventions. Patient Engagement: currently patients are engaged in a telestroke intervention. When a patient comes into an SCL Health hospital care site with stroke symptoms they receive a telemedicine assessment. The results of this assessment determine the patient's care path.

Q12.15. III.A.7.c. Use the following space to describe the major functions and resources that are not in place and will need to be re-purposed from other areas, built, acquired, or secured through a partner or in some way.

Please seek to limit response to 1,000 words.

The implementation and expansion of telemedicine interventions will be an ongoing process of engagement between SCL Health System office and SCL Health Hospital Care Sites to identify the ongoing opportunities to leverage telemedicine and virtual health in the hospital care setting. Here are the current supports in place for the measure work: People (Workforce/Training): Already in place to support this work is the SCL Health System Virtual Health Department which consists of experts in the field of virtual health deployment. The SCL Health Hospital Care Sites have support through the System's Virtual Health experts to work hand in hand to identify best options, recommendations, and viability of ideas that come out of the gap analysis process. Additional support comes from the System Triage Team that would meet to review programmatic or telemedicine ideas to review the viability of the idea from a compliance, billing and coding, legal, and revenue integrity lens. The Triage Team can assist with recommendations that make interventions compliant with regulations. Each SCL Health hospital care site has support on telemedicine development through the hospital care site HTP teams conveying program information to service line and clinical leaders within the hospital care sites. Finally there is existing training material on how to use telemedicine equipment such as video platform training, job aids, videos, and workflows to assist in the roll out of telemedicine interventions. Process: The process of vetting ideas through a triage team is the only process currently in place and has been leveraged for telemedicine in SCL Health Hospital Care Sites in other States and in Colorado on an as needed basis. There is currently a developed process of recording the telemedicine intervention within the patient's medical record and capability to pull reports to obtain a visit count. Technology and Data: The System Virtual Health Department has technology and equipment on hand to deploy interventions as needed such as video platforms and electronic medical record tools, job aids and training, videos, and workflows on telemedicine interventions. Patient Engagement: Currently in place in all SCL Health Colorado hospital care sites is a telemedicine intervention for telestroke to screen patients that come into the hospital with stroke symptoms. Additionally, SCL Health has robust experience in implementing patient engagement through telemedicine services in the SCL Health Montana hospital care sites. The SCL Health System Virtual Health Department is skilled at identifying the patient engagement process through telemedicine technologies and will support the work of HTP with contributions of their expertise. Along with direct patient engagement technologies on hand such as pads, i.e. Ipads, and telephones, SCL Health has tools such as online EHR patient engagement to send follow-up messages and documents to patients.

Q12.16.

III.A.8.a. Describe any major challenges and risks to intervention implementation and how the hospital will mitigate those challenges and risks. In the response, specifically address the following areas:

- Workforce;
- Budget;
- Health Information Technology;
- Regulatory Barriers; and
- Challenges related to engaging difficult-to-reach populations.

Q12.17.

III.A.8.b. Use the following space to describe any major challenges and risks to intervention implementation.

Please seek to limit response to 750 words.

Major challenges and barriers can come up at any time during the program years and being ready for challenges is part of the program and project management such as with HTP. SCL Health has the Enterprise Project Management Office engaged with the HTP governance structure through the HTP System Core Team and can leverage risk assessments and mitigation tools. Barriers in the following areas might arise during HTP years: Workforce: Barriers in the workforce are prevalent now more than ever as clinicians are exhausted over the hard work of managing care during a pandemic. While we realize it is difficult to hire for positions right now, it is also difficult to engage exhausted staff, and engage staff while their work is prioritized towards the COVID-19 response. There also needs to be sensitivity toward staff and not ask for too much too soon after recovery from pandemic work. Budget: Budgetary concerns always exist with downside risk programs. The determination of a cost center or cost appropriation can be difficult in these programs. There is a need to determine which department will take on the cost without the upside dollars to fund the work. The cost appropriation might not be a one time cost such as a technological acquisition but also ongoing costs such as the hirings of staff and that ongoing salary expense, maintenance, and current staff time allocated to the reporting and intervention work. By nature of this measure, there will be a significant cost if purchasing telemedicine technology above and beyond what is currently stocked for SCL Health is required. Technology or vendor contracts for telemedicine solutions are pricey. Due to the fact that there are no upside dollars, there is currently no budget in place. This will have to be developed over the program years. Health Information Technology: Barriers that are currently seen is the implementation of new processes to use the technology required of telemedicine interventions. Currently hospital associates and clinicians are focused on the COVID-19 pandemic and learning new processes takes them away from this priority. The pandemic has halted certain activities such as HTP in the hospital care sites. Another barrier is the cost of purchasing additional technologies to implement robust technological interventions. As the world recovers from the pandemic and the reimbursement for telemedicine ceases to its pre-pandemic state, there will be no reimbursement for use of telemedicine technology. Regulatory Barriers: The regulatory barriers that exist in this measure consist of payer reimbursement for telemedicine services. In the pre-pandemic world hospital based telemedicine services were not reimbursed by Medicare. Typically Medicare rules set standards for services as they are the major regulatory payer source in which hospitals are bound to. When a major payer like Medicare does not cover services, it is extremely difficult to carve out processes for patients when they have different insurance types and payer resources. SCL Health cannot carve out separate processes for separate payers and treat patients according to their insurance. All patients should receive the same care and quality of care regardless of their insurance and payer source. Another regulatory barrier is the inconsistency between the measure specs and the verbal instructions by the State to identify which telemedicine services can and cannot be included in the performance for this measure, despite what the measure specs say. The verbal measure specs given by the State have vastly reduced the services that can be counted for this measure, such as remote patients monitoring. Remote patient monitoring fits into the measure specs but the State has verbally advised that this form of telemedicine does not count in the performance numbers. Remote patient monitoring can contribute to readmission reduction and incentivizing it would contribute to reduced ED utilization and costs. Engaging difficult to reach populations: the barriers that could exist are language barriers when engaging patients in technology or ability to use technology due to lack of tech knowledge. Other barriers seen in this measure are when interventions include post-acute follow up and patients do not have the technological capabilities to engage in the intervention.

Q12.18.

III.A.8.c. Use the following space to describe how the hospital will mitigate the challenges and risks described above.

Please seek to limit response to 750 words.

There is an anticipation that any number of barriers or risks might come up during the five year program. Having resources and teams that support the work help to mitigate risks and barriers as gaps can be discussed quickly within the structures that are currently set up such as the structure of having a virtual health department with experts in this area, having available engagement from Legal and Compliance, and others throughout the organization. Additionally, having a governance structure in place lays a foundation for support of the work and decisions making when barriers seem insurmountable. The leadership that is engaged in the governance of each HTP measure can make decisions such as resource allocation, funding and cost, prioritizing for the organization, and decision to mitigate loss. Workforce: The hospital work force cannot be mitigated from the pandemic at this time. The System supports such as the System Virtual Health Department and the System HTP Core team will need to plan as much as possible until the hospital care site staff and clinicians are available to engage. The structural support of the System office can create organization around this measure work to make the processes of engagement easier on the hospital care site associates and clinicians. Budget: The budget for this measure will have to be compared to the downside risk amount of the program. From there, organizational priorities will be determined to develop a budget. Health Information Technology: the measure interventions will need to leverage the technology already in place or already in possession by the SCL Health hospital care sites. Regulatory Barriers: SCL Health will work with the State to advocate for development of this measure to include options that SCL Health associates and clinicians see as best practice in the virtual health field. While advocacy can take place for reimbursement, there has been positive signals from the Federal Government that they are ready to embrace the expansion of hospital based telemedicine reimbursement and SCL Health will eagerly contribute to federal request for comments or any feedback opportunities that are presented to advocate for expansion of services not only to create efficiencies, update technological capabilities in the field, but also to create access which is believed to in turn reduce cost. Engaging patients/hard to reach patients: Patients that come into the hospital are not hard to engage once they are within the hospital care site. Language barriers can be addressed through translation lines that are already in place at each SCL Health hospital care site. It could be determined, through the mapping out of the patient process of engagement, that when patients are identified as having technological barriers that there is a route for direct face to face engagement instead of the telemedicine intervention. Porta acute engagement barriers can arise when patients do not have technological means to connect to the post-acute intervention. These barriers will be addressed patient by patient and according to their individual barriers. The measure is meant to create access to case and engagement where none might exist. For these reasons, an analysis according to technological capabilities of the patient will need to be part of the evaluation of this measure.

Q12.19. III.A.9. Describe how this intervention will benefit from the hospital's ongoing Community and Health Neighborhood Engagement efforts.

Please seek to limit response to 500 words.

A component of the ongoing Community and Health Neighborhood Engagement (CHNE) efforts includes the Community Health Needs Assessment (CHNA) which all Colorado based SCL Health care sites are in the process to complete in 2021. The CHNA process parallels the intent of the CHNE with emphasis on gathering community feedback to identify and analyze community health needs, as well as to increase engagement. Early results from the current process, gathered through a combination of feedback vehicles including online surveys, stakeholder interviews, focus groups and public data review reflects the ongoing concerns for improving access to healthcare, mental health and expanding resource supports such as transportation and care navigation. The pandemic increased the awareness and acceptance of telemedicine in the delivery of medical services for patients and providers. As we continue to move through the current public health crisis, hospitals have an opportunity to expand telemedicine as a care improvement tool that can increase patient engagement, reduce common barriers (e.g. transportation), and ensure continuity of care. This intervention will benefit from the hospital's ongoing CHNE efforts by utilizing the feedback gained from patients and stakeholder organizations to improve care paths, assess additional barriers to utilization, as well as to understand other community based supports that can be delivered virtually such as support groups or health education. Additionally, the CHNE will provide another data point for quality measurement through gathering root cause insights from community partners who serve the target population. The ongoing CHNE engagement also benefits the intervention to reveal service or technology gaps experienced by community based organizations.

Q12.20. This concludes the information input for this intervention. Information input for the next intervention will now begin.

Q13.1. Co

*This question was not displayed to the respondent.*

Q13.2.

### Overview of Interventions - Intervention 11

Reporting Hospital	Good Samaritan Medical Center
Intervention	NA
Measure	NA

*This question was not displayed to the respondent.*

Q13.3. The next section deals with information on one of the hospital's proposed interventions.

*This question was not displayed to the respondent.*

Q13.4. III.A.4. Is this an existing intervention (an intervention that the hospital has previously planned and is currently implementing or executing)?

*This question was not displayed to the respondent.*

Q13.5. Co

*This question was not displayed to the respondent.*

### Q13.6. Overview of Interventions

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

*This question was not displayed to the respondent.*

**Q13.7.**  
III.A.5. The below chart is for principal internal and external administrative roles for this intervention. If there are more than five individuals working on this intervention, please list the five individuals with the greatest leadership roles or most time dedicated to this intervention.

*This question was not displayed to the respondent.*

**Q13.8.**

*This question was not displayed to the respondent.*

**Q13.9. Co**

*This question was not displayed to the respondent.*

**Q13.10. Overview of Interventions**  
Reporting Hospital: Good Samaritan Medical Center  
Intervention: NA

*This question was not displayed to the respondent.*

**Q13.11.** III.A.6.a. Briefly describe the intervention's target population for the intervention. This should align with the hospital's approved HTP Application.

Please respond in no more than two sentences.

*This question was not displayed to the respondent.*

**Q13.12.** I.A.6.b. Describe how individuals within the target population will be identified and engaged in the intervention.

Please seek to limit response to 500 words.

*This question was not displayed to the respondent.*

**Q13.13.**  
III.A.7.a. Please describe what major functions and resources, supporting the intervention throughout the course of implementation are already in place, or are not in place and will need to be re-purposed from other areas, built, acquired, or secured through a partner or in some way.

Please address the following functional areas and resources at a minimum, when responding:

- People (Workforce / Training)
- Processes of Care
- Technology and Data Systems
- Patient Engagement

*This question was not displayed to the respondent.*

Q13.14.

III.A.7.b. Use the following space to describe the major functions and resources that are already in place.

Please seek to limit response to 1,000 words.

*This question was not displayed to the respondent.*

Q13.15. III.A.7.c. Use the following space to describe the major functions and resources that are not in place and will need to be re-purposed from other areas, built, acquired, or secured through a partner or in some way.

Please seek to limit response to 1,000 words.

*This question was not displayed to the respondent.*

Q13.16.

III.A.8.a. Describe any major challenges and risks to intervention implementation and how the hospital will mitigate those challenges and risks. In the response, specifically address the following areas:

- Workforce;
- Budget;
- Health Information Technology;
- Regulatory Barriers; and
- Challenges related to engaging difficult-to-reach populations.

*This question was not displayed to the respondent.*

Q13.17.

III.A.8.b. Use the following space to describe any major challenges and risks to intervention implementation.

Please seek to limit response to 750 words.

*This question was not displayed to the respondent.*

Q13.18.

III.A.8.c. Use the following space to describe how the hospital will mitigate the challenges and risks described above.

Please seek to limit response to 750 words.

*This question was not displayed to the respondent.*

Q13.19. III.A.9. Describe how this intervention will benefit from the hospital's ongoing Community and Health Neighborhood Engagement efforts.

Please seek to limit response to 500 words.

*This question was not displayed to the respondent.*

Q13.20. This concludes the information input for this intervention. Information input for the next intervention will now begin.

*This question was not displayed to the respondent.*

Q14.1. Co

*This question was not displayed to the respondent.*

Q14.2.

### Overview of Interventions - Intervention 12

Reporting Hospital	Good Samaritan Medical Center
Intervention	NA
Measure	NA

*This question was not displayed to the respondent.*

Q14.3. The next section deals with information on one of the hospital's proposed interventions.

*This question was not displayed to the respondent.*

Q14.4. III.A.4. Is this an existing intervention (an intervention that the hospital has previously planned and is currently implementing or executing)?

*This question was not displayed to the respondent.*

Q14.5. Co

*This question was not displayed to the respondent.*

### Q14.6. Overview of Interventions

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

*This question was not displayed to the respondent.*

Q14.7.

III.A.5. The below chart is for principal internal and external administrative roles for this intervention. If there are more than five individuals working on this intervention, please list the five individuals with the greatest leadership roles or most time dedicated to this intervention.

*This question was not displayed to the respondent.*

Q14.8.

*This question was not displayed to the respondent.*

#### Q14.9. Co

*This question was not displayed to the respondent.*

#### Q14.10. Overview of Interventions

Reporting Hospital: Good Samaritan Medical Center  
Intervention: NA

*This question was not displayed to the respondent.*

Q14.11. III.A.6.a. Briefly describe the intervention's target population for the intervention. This should align with the hospital's approved HTP Application.

Please respond in no more than two sentences.

*This question was not displayed to the respondent.*

Q14.12. I.A.6.b. Describe how individuals within the target population will be identified and engaged in the intervention.

Please seek to limit response to 500 words.

*This question was not displayed to the respondent.*

#### Q14.13.

III.A.7.a. Please describe what major functions and resources, supporting the intervention throughout the course of implementation are already in place, or are not in place and will need to be re-purposed from other areas, built, acquired, or secured through a partner or in some way.

Please address the following functional areas and resources at a minimum, when responding:

- People (Workforce / Training)
- Processes of Care
- Technology and Data Systems
- Patient Engagement

*This question was not displayed to the respondent.*

#### Q14.14.

III.A.7.b. Use the following space to describe the major functions and resources that are already in place.

Please seek to limit response to 1,000 words.

*This question was not displayed to the respondent.*

Q14.15. III.A.7.c. Use the following space to describe the major functions and resources that are not in place and will need to be re-purposed from other areas, built, acquired, or secured through a partner or in some way.

Please seek to limit response to 1,000 words.



*This question was not displayed to the respondent.*

Q14.16.

III.A.8.a. Describe any major challenges and risks to intervention implementation and how the hospital will mitigate those challenges and risks. In the response, specifically address the following areas:

- Workforce;
- Budget;
- Health Information Technology;
- Regulatory Barriers; and
- Challenges related to engaging difficult-to-reach populations.

*This question was not displayed to the respondent.*

Q14.17.

III.A.8.b. Use the following space to describe any major challenges and risks to intervention implementation.

Please seek to limit response to 750 words.

*This question was not displayed to the respondent.*

Q14.18.

III.A.8.c. Use the following space to describe how the hospital will mitigate the challenges and risks described above.

Please seek to limit response to 750 words.

*This question was not displayed to the respondent.*

Q14.19. III.A.9. Describe how this intervention will benefit from the hospital's ongoing Community and Health Neighborhood Engagement efforts.

Please seek to limit response to 500 words.

*This question was not displayed to the respondent.*

Q14.20. This concludes the information input for this intervention. Information input for the next intervention will now begin.

*This question was not displayed to the respondent.*

Q15.1. Co

*This question was not displayed to the respondent.*

Q15.2.

**Overview of Interventions - Intervention 13**

Reporting Hospital	Good Samaritan Medical Center
Intervention	NA
Measure	NA

*This question was not displayed to the respondent.*

Q15.3. The next section deals with information on one of the hospital's proposed interventions.

*This question was not displayed to the respondent.*

Q15.4. III.A.4. Is this an existing intervention (an intervention that the hospital has previously planned and is currently implementing or executing)?

*This question was not displayed to the respondent.*

Q15.5. Co

*This question was not displayed to the respondent.*

#### Q15.6. **Overview of Interventions**

Reporting Hospital: Good Samaritan Medical Center  
Intervention: NA

*This question was not displayed to the respondent.*

Q15.7.  
III.A.5. The below chart is for principal internal and external administrative roles for this intervention. If there are more than five individuals working on this intervention, please list the five individuals with the greatest leadership roles or most time dedicated to this intervention.

*This question was not displayed to the respondent.*

Q15.8.

*This question was not displayed to the respondent.*

Q15.9. Co

*This question was not displayed to the respondent.*

#### Q15.10. **Overview of Interventions**

Reporting Hospital: Good Samaritan Medical Center  
Intervention: NA

*This question was not displayed to the respondent.*

Q15.11. III.A.6.a. Briefly describe the intervention's target population for the intervention. This should align with the hospital's approved HTP Application.

Please respond in no more than two sentences.

*This question was not displayed to the respondent.*

Q15.12. I.A.6.b. Describe how individuals within the target population will be identified and engaged in the intervention.

Please seek to limit response to 500 words.

*This question was not displayed to the respondent.*

Q15.13.

III.A.7.a. Please describe what major functions and resources, supporting the intervention throughout the course of implementation are already in place, or are not in place and will need to be re-purposed from other areas, built, acquired, or secured through a partner or in some way.

Please address the following functional areas and resources at a minimum, when responding:

- People (Workforce / Training)
- Processes of Care
- Technology and Data Systems
- Patient Engagement

*This question was not displayed to the respondent.*

Q15.14.

III.A.7.b. Use the following space to describe the major functions and resources that are already in place.

Please seek to limit response to 1,000 words.

*This question was not displayed to the respondent.*

Q15.15. III.A.7.c. Use the following space to describe the major functions and resources that are not in place and will need to be re-purposed from other areas, built, acquired, or secured through a partner or in some way.

Please seek to limit response to 1,000 words.

*This question was not displayed to the respondent.*

Q15.16.

III.A.8.a. Describe any major challenges and risks to intervention implementation and how the hospital will mitigate those challenges and risks. In the response, specifically address the following areas:

- Workforce;
- Budget;
- Health Information Technology;
- Regulatory Barriers; and
- Challenges related to engaging difficult-to-reach populations.

*This question was not displayed to the respondent.*

Q15.17.

III.A.8.b. Use the following space to describe any major challenges and risks to intervention implementation.

Please seek to limit response to 750 words.

*This question was not displayed to the respondent.*

Q15.18.

III.A.8.c. Use the following space to describe how the hospital will mitigate the challenges and risks described above.

Please seek to limit response to 750 words.

*This question was not displayed to the respondent.*

Q15.19. III.A.9. Describe how this intervention will benefit from the hospital's ongoing Community and Health Neighborhood Engagement efforts.

Please seek to limit response to 500 words.

*This question was not displayed to the respondent.*

Q15.20. This concludes the information input for this intervention. Information input for the next intervention will now begin.

*This question was not displayed to the respondent.*

Q16.1. Co

*This question was not displayed to the respondent.*

Q16.2.

### **Overview of Interventions - Intervention 14**

Reporting Hospital	Good Samaritan Medical Center
Intervention	NA
Measure	NA

*This question was not displayed to the respondent.*

Q16.3. The next section deals with information on one of the hospital's proposed interventions.

*This question was not displayed to the respondent.*

Q16.4. III.A.4. Is this an existing intervention (an intervention that the hospital has previously planned and is currently implementing or executing)?

*This question was not displayed to the respondent.*

Q16.5. Co

*This question was not displayed to the respondent.*

**Q16.6. Overview of Interventions**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

*This question was not displayed to the respondent.*

Q16.7.

III.A.5. The below chart is for principal internal and external administrative roles for this intervention. If there are more than five individuals working on this intervention, please list the five individuals with the greatest leadership roles or most time dedicated to this intervention.

*This question was not displayed to the respondent.*

Q16.8.

*This question was not displayed to the respondent.*

Q16.9. Co

*This question was not displayed to the respondent.*

**Q16.10. Overview of Interventions**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

*This question was not displayed to the respondent.*

Q16.11. III.A.6.a. Briefly describe the intervention's target population for the intervention. This should align with the hospital's approved HTP Application.

Please respond in no more than two sentences.

*This question was not displayed to the respondent.*

Q16.12. I.A.6.b. Describe how individuals within the target population will be identified and engaged in the intervention.

Please seek to limit response to 500 words.

*This question was not displayed to the respondent.*

Q16.13.

III.A.7.a. Please describe what major functions and resources, supporting the intervention throughout the course of implementation are already in place, or are not in place and will need to be re-purposed from other areas, built, acquired, or secured through a partner or in some way.

Please address the following functional areas and resources at a minimum, when responding:

- People (Workforce / Training)
- Processes of Care
- Technology and Data Systems
- Patient Engagement

*This question was not displayed to the respondent.*

Q16.14.

III.A.7.b. Use the following space to describe the major functions and resources that are already in place.

Please seek to limit response to 1,000 words.

*This question was not displayed to the respondent.*

Q16.15. III.A.7.c. Use the following space to describe the major functions and resources that are not in place and will need to be re-purposed from other areas, built, acquired, or secured through a partner or in some way.

Please seek to limit response to 1,000 words.

*This question was not displayed to the respondent.*

Q16.16.

III.A.8.a. Describe any major challenges and risks to intervention implementation and how the hospital will mitigate those challenges and risks. In the response, specifically address the following areas:

- Workforce;
- Budget;
- Health Information Technology;
- Regulatory Barriers; and
- Challenges related to engaging difficult-to-reach populations.

*This question was not displayed to the respondent.*

Q16.17.

III.A.8.b. Use the following space to describe any major challenges and risks to intervention implementation.

Please seek to limit response to 750 words.

*This question was not displayed to the respondent.*

Q16.18.

III.A.8.c. Use the following space to describe how the hospital will mitigate the challenges and risks described above.

Please seek to limit response to 750 words.

*This question was not displayed to the respondent.*

Q16.19. III.A.9. Describe how this intervention will benefit from the hospital's ongoing Community and Health Neighborhood Engagement efforts.

Please seek to limit response to 500 words.

*This question was not displayed to the respondent.*

Q16.20. This concludes the information input for this intervention. Information input for the next intervention will now begin.

*This question was not displayed to the respondent.*

Q17.1. Co

*This question was not displayed to the respondent.*

Q17.2.

### Overview of Interventions - Intervention 15

Reporting Hospital	Good Samaritan Medical Center
Intervention	NA
Measure	NA

*This question was not displayed to the respondent.*

Q17.3. The next section deals with information on one of the hospital's proposed interventions.

*This question was not displayed to the respondent.*

Q17.4. III.A.4. Is this an existing intervention (an intervention that the hospital has previously planned and is currently implementing or executing)?

*This question was not displayed to the respondent.*

Q17.5. Co

*This question was not displayed to the respondent.*

### Q17.6. Overview of Interventions

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

*This question was not displayed to the respondent.*

Q17.7.  
III.A.5. The below chart is for principal internal and external administrative roles for this intervention. If there are more than five individuals working on this intervention, please list the five individuals with the greatest leadership roles or most time dedicated to this intervention.

*This question was not displayed to the respondent.*

Q17.8.

*This question was not displayed to the respondent.*

Q17.9. Co

*This question was not displayed to the respondent.*

Q17.10. **Overview of Interventions**

Reporting Hospital: Good Samaritan Medical Center  
Intervention: NA

*This question was not displayed to the respondent.*

Q17.11. III.A.6.a. Briefly describe the intervention's target population for the intervention. This should align with the hospital's approved HTP Application.

Please respond in no more than two sentences.

*This question was not displayed to the respondent.*

Q17.12. I.A.6.b. Describe how individuals within the target population will be identified and engaged in the intervention.

Please seek to limit response to 500 words.

*This question was not displayed to the respondent.*

Q17.13.  
III.A.7.a. Please describe what major functions and resources, supporting the intervention throughout the course of implementation are already in place, or are not in place and will need to be re-purposed from other areas, built, acquired, or secured through a partner or in some way.

Please address the following functional areas and resources at a minimum, when responding:

- People (Workforce / Training)
- Processes of Care
- Technology and Data Systems
- Patient Engagement

*This question was not displayed to the respondent.*

Q17.14.



III.A.7.b. Use the following space to describe the major functions and resources that are already in place.

Please seek to limit response to 1,000 words.

*This question was not displayed to the respondent.*

Q17.15. III.A.7.c. Use the following space to describe the major functions and resources that are not in place and will need to be re-purposed from other areas, built, acquired, or secured through a partner or in some way.

Please seek to limit response to 1,000 words.

*This question was not displayed to the respondent.*

Q17.16.

III.A.8.a. Describe any major challenges and risks to intervention implementation and how the hospital will mitigate those challenges and risks. In the response, specifically address the following areas:

- Workforce;
- Budget;
- Health Information Technology;
- Regulatory Barriers; and
- Challenges related to engaging difficult-to-reach populations.

*This question was not displayed to the respondent.*

Q17.17.

III.A.8.b. Use the following space to describe any major challenges and risks to intervention implementation.

Please seek to limit response to 750 words.

*This question was not displayed to the respondent.*

Q17.18.

III.A.8.c. Use the following space to describe how the hospital will mitigate the challenges and risks described above.

Please seek to limit response to 750 words.

*This question was not displayed to the respondent.*

Q17.19. III.A.9. Describe how this intervention will benefit from the hospital's ongoing Community and Health Neighborhood Engagement efforts.

Please seek to limit response to 500 words.

*This question was not displayed to the respondent.*

Q17.20. This concludes the information input for this intervention. Information input for the next intervention will now begin.

*This question was not displayed to the respondent.*



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Q18.2.

**B. Intervention Milestones**

The next section concerns program milestones for this intervention.

Hospitals must propose and record in the Implementation Plan submission tool one milestone in both Quarters 2 and 4 (Q2 and Q4) for each Program Year (PY) starting with PY2Q2 (Jan-Mar 2023). Milestones should be discrete tasks that, when completed, have an easily identifiable, quantifiable, and definable goal that has been reached or action that has been completed. The milestones established must be completed by the end of the quarter for which the milestone is applicable (Q2 or Q4).

All milestones should be associated with their applicable phase: Planning and Implementation or Continuous Improvement, Distinct milestone requirements apply to each phase, and timing of the phases depends on whether the intervention is new or existing. Planning and Implementation should be completed no later than PY3Q4 (Jul-Sep 2024) and Continuous Improvement milestones should begin no later than PY4Q2 (Jan-Mar 2025), with accelerated milestones for existing interventions subject to the timeline outlined in this document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. Additionally, unique considerations apply for the Hospital Index measure, as outlined in the Milestone Requirements section of this document.

This submission tool will guide hospitals through recording milestones per intervention for each applicable program year quarter. Hospitals will indicate the milestone phase and whether it is an impact milestone. Interventions will be prepopulated in the submission tool based on the hospital's approved HTP Application.



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Q19.2.

**Intervention Milestones - Intervention 1**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Readmissions Reduction Collaborative

Milestone: PY2Q2

**B. Intervention Milestones**

Q19.3. III.B. Please answer the following questions with information related to this intervention's PY2Q2 milestone.

Q19.4.  
What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

- Planning and Implementation
- Continuous Improvement



Q19.6.  
**Intervention Milestones**  
Reporting Hospital: Good Samaritan Medical Center  
Intervention: Readmissions Reduction Collaborative  
Milestone: PY2Q2

Q19.7.  
Is this the impact milestone for this intervention?

*The final milestone of the Planning and Intervention Phase should be an impact milestone. If this is the impact milestone for this intervention, please keep in mind:*

- The impact milestone should address all functional areas applicable to the intervention.*
- The impact milestone functional area descriptions and supporting documentation should demonstrate that the intervention has been fully implemented.*

- Yes
- No

Q19.8. Please indicate which Functional Area(s) applies to this milestone. Select all that apply. Impact milestones must include all Functional Areas.

- People
- Process
- Technology
- Patient Engagement / Target Population



Q19.10.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Readmissions Reduction Collaborative

Milestone: PY2Q2

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

**Q19.11. People Functional Area**

*This question was not displayed to the respondent.*

Q19.12.

Please include a brief description of the People Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

Q19.13.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

**Q19.14. Process Functional Area**

*This question was not displayed to the respondent.*

**Q19.15.** Please include a brief description of the Process Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

**Q19.16.**

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

### **Q19.17. Technology Functional Area**

**Q19.18.** Please include a brief description of the Technology Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

Create internal data measurement and validate

**Q19.19.**

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Technology - Supporting documentation will be the identification of technological tools to be used, measurements used, and validation process identified

### **Q19.20. Patient Engagement / Target Population Functional Area**

*This question was not displayed to the respondent.*

Q19.21. Please include a brief description of the Patient Engagement / Target Population Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

Q19.22.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

Q19.23. Co

*This question was not displayed to the respondent.*

Q19.24.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Readmissions Reduction Collaborative

Milestone: PY2Q2

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

Q19.25. Please include a brief description of the milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q19.26. Please describe the supporting documentation which will be provided in support of this milestone.

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*



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Q19.28.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Readmissions Reduction Collaborative

Milestone: PY2Q4

Q19.29. III.B. Please answer the following questions with information related to this intervention's PY2Q4 milestone.

Q19.30.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

- Planning and Implementation
- Continuous Improvement



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**COLORADO**

Q19.32.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Readmissions Reduction Collaborative

Milestone: PY2Q4

Q19.33.

Is this the impact milestone for this intervention?

*The final milestone of the Planning and Intervention phase should be an impact milestone. If this is the impact milestone for this intervention, please keep in mind:*

- *The impact milestone should address all functional areas applicable to the intervention.*
- *The impact milestone functional area descriptions and supporting documentation should demonstrate that the intervention has been fully implemented.*

Yes

No

Q19.34. Please indicate which Functional Area(s) applies to this milestone. Select all that apply. Impact milestones must include all Functional Areas.

People

Process

Technology

Patient Engagement / Target Population



**COLORADO**

Q19.36.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Readmissions Reduction Collaborative

Milestone: PY2Q4

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Q19.37. **People Functional Area**

*This question was not displayed to the respondent.*



Q19.38. Please include a brief description of the People Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

Q19.39.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

#### Q19.40. **Process Functional Area**

*This question was not displayed to the respondent.*

Q19.41.

Please include a brief description of the Process Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

Q19.42.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

#### Q19.43. **Technology Functional Area**

Q19.44. Please include a brief description of the Technology Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

Technology--use of data and technological tools to identify patients and subsets of patient populations that are at a higher risk for readmissions. The tool/s will give data that can lead to cohort identifications.

Q19.45.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

Technology - Screenshot of tool used to identify cohorts and results of analysis with tool.

**Q19.46. Patient Engagement / Target Population Functional Area**

Q19.47. Please include a brief description of the Patient Engagement / Target Population Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

Patient engagement-identify population/patient cohorts for intervention

Q19.48. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

Patient engagement - preliminary results of data evaluation and cohorts identified

Q19.49. Co

*This question was not displayed to the respondent.*

Q19.50.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Readmissions Reduction Collaborative

Milestone: PY2Q4

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

Q19.51. Provide a brief description of the milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q19.52.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*



**COLORADO**

Q19.54.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Readmissions Reduction Collaborative

Milestone: PY3Q2

Q19.55. III.B. Please answer the following questions with information related to this intervention's PY3Q2 milestone.

Q19.56.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

Planning and Implementation



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# COLORADO

Q19.58.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Readmissions Reduction Collaborative

Milestone: PY3Q2

Q19.59.

Is this the impact milestone for this intervention?

*The final milestone of the Planning and Intervention phase should be an impact milestone. If this is the impact milestone for this intervention, please keep in mind:*

- *The impact milestone should address all functional areas applicable to the intervention.*
- *The impact milestone functional area descriptions and supporting documentation should demonstrate that the intervention has been fully implemented.*

Yes

No

Q19.60.

Please indicate which Functional Area(s) applies to this milestone. Select all that apply. Impact milestones must include all Functional Areas.

People

Process

Technology

Patient Engagement / Target Population



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# COLORADO

Q19.62.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Readmissions Reduction Collaborative

Milestone: PY3Q2

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

**Q19.63. People Functional Area**

*This question was not displayed to the respondent.*

Q19.64. Please include a brief description of the People Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

Q19.65.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

**Q19.66. Process Functional Area**

Q19.67. Please include a brief description of the Process Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone*

Process - work plan related to patient engagement structure

Q19.68.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

Process - Support documentation will be a submission of the work plan.

#### **Q19.69. Technology Functional Area**

*This question was not displayed to the respondent.*

**Q19.70.**

Please include a brief description of the Technology Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

**Q19.71.** Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

*This question was not displayed to the respondent.*

#### **Q19.72. Patient Engagement / Target Population Functional Area**

**Q19.73.** Please include a brief description of the Patient Engagement / Target Population Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

Patient engagement-assess patient reasons for readmission through structured readmission assessment

**Q19.74.** Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

Q19.75. Co

*This question was not displayed to the respondent.*

Q19.76.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Readmissions Reduction Collaborative

Milestone: PY3Q2

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

Q19.77. Provide a brief description of the milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q19.78. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*



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**COLORADO**

Q19.80.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Readmissions Reduction Collaborative

Q19.81. III.B. Please answer the following questions with information related to this intervention's PY3Q4 milestone.

Q19.82.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

- Planning and Implementation
- Continuous Improvement



**COLORADO**

Q19.84.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Readmissions Reduction Collaborative

Milestone: PY3Q4

Q19.85. Is this the impact milestone for this intervention?

*The final milestone of the Planning and Intervention phase should be an impact milestone. If this is the impact milestone for this intervention, please keep in mind:*

- *The impact milestone should address all functional areas applicable to the intervention.*
- *The impact milestone functional area descriptions and supporting documentation should demonstrate that the intervention has been fully implemented.*

- Yes
- No



Q19.86. Please indicate which Functional Area(s) applies to this milestone. Select all that apply. Impact milestones must include all Functional Areas.

- People
- Process
- Technology
- Patient Engagement / Target Population



**COLORADO**

Q19.88.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Readmissions Reduction Collaborative

Milestone: PY3Q4

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

**Q19.89. People Functional Area**

Q19.90. Please include a brief description of the People Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

People-stakeholders are engaged with readmission reduction process

Q19.91. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

People - a stakeholder analyses

### Q19.92. **Process Functional Area**

Q19.93. Please include a brief description of the Process Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

Process- summary of process identified for intervention implementation

Q19.94. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Process - documentation for processes impacted or being changed can include things like process maps, flow charts, Standard Operating Procedures, etc.

### Q19.95. **Technology Functional Area**

Q19.96. Please include a brief description of the Technology Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

Technology-technology is built and gives data to guide decision making

Q19.97. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

Technology - screenshot of internal data

**Q19.98. Patient Engagement / Target Population Functional Area**

Q19.99. Please include a brief description of the Patient Engagement / Target Population Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

Patient engagement-patients have informed the development of interventions likely to prevent readmissions

Q19.100. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

Patient engagement - summary of results from patient feedback

Q19.101. Co

*This question was not displayed to the respondent.*

Q19.102.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Readmissions Reduction Collaborative

Milestone: PY3Q4

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

*This question was not displayed to the respondent.*

Q19.103. Provide a brief description of the milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q19.104. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*



Q19.106.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Readmissions Reduction Collaborative

Milestone: PY4Q2

Q19.107. III.B. Please answer the following questions with information related to this intervention's PY4Q2 milestone.

Q19.108.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

Continuous Improvement



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Q19.110.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Readmissions Reduction Collaborative

Milestone: PY4Q2

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Q19.111. Provide a brief description of the milestone (no more than two sentences).

Determine readiness of current quality improvement capacity by assessing the readmissions team in quality improvement and performance improvement capacity and skill set.

Q19.112. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

People - Supporting documentation will be a written summary of the improvement readiness assessment results



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Q19.114.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Readmissions Reduction Collaborative

Milestone: PY4Q4

Q19.115. III.B. Please answer the following questions with information related to this intervention's PY4Q4 milestone.

Q19.116.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

Continuous Improvement



**COLORADO**

Q19.118.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Readmissions Reduction Collaborative

Milestone: PY4Q4

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Q19.119. Provide a brief description of the milestone (no more than two sentences).

Evaluate initial interventions and tests of change. Refresh and analyze a current data set, evaluate the initial test of change, reassess stakeholders to ensure correct stakeholders are engaged for initiatives according to current data set, and adjust interventions as needed for new data set and continuous improvement as identified in this process. This process will include an evaluation from a health equity lens to include race, ethnicity, gender, and demographic variables.

Q19.120. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

Supporting documentation will be data and intervention analysis summary and any new intervention plans if applicable, documentation of stakeholders engaged at this point along with roles and responsibilities and those engaged in data and intervention analysis.



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Q19.122.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Readmissions Reduction Collaborative

Milestone: PY5Q2

Q19.123. III.B. Please answer the following questions with information related to this intervention's PY5Q2 milestone.

Q19.124.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

Continuous Improvement



# COLORADO

Q19.126.

## **Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Readmissions Reduction Collaborative

Milestone: PY5Q2

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Q19.127. Provide a brief description of the milestone (no more than two sentences).

Complete a readmission data refresh and analyze data to determine which patient characteristics are associated with the highest rates of avoidable readmissions in this timeframe. Data will be reviewed to determine how interventions are performing in the target population and if strategies and tactics need to be adjusted for success.

Q19.128. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Process - Support documentation will be a summary of current data and intervention analysis and summary of any identified gaps and any new intervention plans to be deployed.





**CO L O R A D O**

Q19.130.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Readmissions Reduction Collaborative

Milestone: PY5Q4

Q19.131. III.B. Please answer the following questions with information related to this intervention's PY5Q4 milestone.

Q19.132.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

Continuous Improvement



**CO L O R A D O**

Q19.134.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Readmissions Reduction Collaborative

Milestone: PY5Q4

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Q19.135. Provide a brief description of the milestone (no more than two sentences).

Complete a readmission data refresh and analyze data to determine which patient characteristics are associated with the highest rates of avoidable readmissions in this timeframe. Data will be reviewed to determine how interventions are performing in the target population and if strategies and tactics need to be adjusted for success.

Q19.136. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Process - Support documentation will be a summary of current data and intervention analysis and summary of any identified gaps and any new intervention plans to be deployed.



**COLORADO**

Q19.138.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Readmissions Reduction Collaborative

This concludes the information input for this intervention's milestones. Information input for the next intervention's milestones will now begin.



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Q20.2.

**Intervention Milestones - Intervention 2**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Social Determinants of Health (SDOH) Screening and RAE Notification

Milestone: PY2Q2

**B. Intervention Milestones**

Q20.3. III.B. Please answer the following questions with information related to this intervention's PY2Q2 milestone.

Q20.4.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

- Planning and Implementation
- Continuous Improvement



**COLORADO**

Q20.6.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Social Determinants of Health (SDOH) Screening and RAE Notification

Q20.7.

Is this the impact milestone for this intervention?

*The final milestone of the Planning and Intervention Phase should be an impact milestone. If this is the impact milestone for this intervention, please keep in mind:*

- *The impact milestone should address all functional areas applicable to the intervention.*
- *The impact milestone functional area descriptions and supporting documentation should demonstrate that the intervention has been fully implemented.*

Yes

No

Q20.8. Please indicate which Functional Area(s) applies to this milestone. Select all that apply. Impact milestones must include all Functional Areas.

People

Process

Technology

Patient Engagement / Target Population



**COLORADO**

Q20.10.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Social Determinants of Health (SDOH) Screening and RAE Notification

Milestone: PY2Q2

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Q20.11. **People Functional Area**

*This question was not displayed to the respondent.*

Q20.12.

Please include a brief description of the People Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

Q20.13.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

#### Q20.14. **Process Functional Area**

Q20.15. Please include a brief description of the Process Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

Process-workflow development for a SDoH needs screening and referral process of positive screens

Q20.16.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Process - documentation will include a copy of the workflow process

#### Q20.17. **Technology Functional Area**

Q20.18. Please include a brief description of the Technology Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

Technology-creation of a SDoH domains in the EHR in order to identify patients with SDoH needs

Q20.19.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

Technology - Documentation will be screenshots of the EPIC tool with SDoH domains in the EHR

**Q20.20. Patient Engagement / Target Population Functional Area**

*This question was not displayed to the respondent.*

Q20.21. Please include a brief description of the Patient Engagement / Target Population Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

Q20.22.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

*This question was not displayed to the respondent.*

Q20.23. Co

*This question was not displayed to the respondent.*

Q20.24.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Social Determinants of Health (SDOH) Screening and RAE Notification

Milestone: PY2Q2

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

Q20.25. Please include a brief description of the milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q20.26. Please describe the supporting documentation which will be provided in support of this milestone.  
*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*



**COLORADO**

Q20.28.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Social Determinants of Health (SDOH) Screening and RAE Notification

Milestone: PY2Q4

Q20.29. III.B. Please answer the following questions with information related to this intervention's PY2Q4 milestone.

Q20.30.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

- Planning and Implementation
- Continuous Improvement



Q20.32.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Social Determinants of Health (SDOH) Screening and RAE Notification

Milestone: PY2Q4

Q20.33.

Is this the impact milestone for this intervention?

*The final milestone of the Planning and Intervention phase should be an impact milestone. If this is the impact milestone for this intervention, please keep in mind:*

- *The impact milestone should address all functional areas applicable to the intervention.*
- *The impact milestone functional area descriptions and supporting documentation should demonstrate that the intervention has been fully implemented.*

- Yes
- No

Q20.34. Please indicate which Functional Area(s) applies to this milestone. Select all that apply. Impact milestones must include all Functional Areas.

- People
- Process
- Technology
- Patient Engagement / Target Population





# COLORADO

Q20.36.

## **Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Social Determinants of Health (SDOH) Screening and RAE Notification

Milestone: PY2Q4

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

## Q20.37. **People Functional Area**

Q20.38. Please include a brief description of the People Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

People-end user identification for those involved in screening patients and/or implementing interventions

Q20.39.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

People - Documentation will be list of those identified as end users and stakeholders

## Q20.40. **Process Functional Area**

Q20.41.

Please include a brief description of the Process Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

Process-education materials to be developed for internal measure stakeholders

Q20.42.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Process - documentation will include education and training documents which end users will receive and any listing of education and training dates

### Q20.43. Technology Functional Area

*This question was not displayed to the respondent.*

Q20.44. Please include a brief description of the Technology Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

Q20.45.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

### Q20.46. Patient Engagement / Target Population Functional Area

*This question was not displayed to the respondent.*

Q20.47. Please include a brief description of the Patient Engagement / Target Population Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

Q20.48. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

*This question was not displayed to the respondent.*

Q20.49. Co

*This question was not displayed to the respondent.*

Q20.50.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Social Determinants of Health (SDOH) Screening and RAE Notification

Milestone: PY2Q4

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

*This question was not displayed to the respondent.*

Q20.51. Provide a brief description of the milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q20.52.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

*This question was not displayed to the respondent.*



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**COLORADO**

Q20.54.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Social Determinants of Health (SDOH) Screening and RAE Notification

Milestone: PY3Q2

Q20.55. III.B. Please answer the following questions with information related to this intervention's PY3Q2 milestone.

Q20.56.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

- Planning and Implementation
- Continuous Improvement



**COLORADO**

Q20.58.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Social Determinants of Health (SDOH) Screening and RAE Notification

Milestone: PY3Q2

Q20.59.

Is this the impact milestone for this intervention?

*The final milestone of the Planning and Intervention phase should be an impact milestone. If this is the impact milestone for this intervention, please keep in mind:*

- *The impact milestone should address all functional areas applicable to the intervention.*
- *The impact milestone functional area descriptions and supporting documentation should demonstrate that the intervention has been fully implemented.*

- Yes

No

Q20.60.

Please indicate which Functional Area(s) applies to this milestone. Select all that apply. Impact milestones must include all Functional Areas.

- People
- Process
- Technology
- Patient Engagement / Target Population



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Q20.62.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Social Determinants of Health (SDOH) Screening and RAE Notification

Milestone: PY3Q2

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Q20.63. **People Functional Area**

Q20.64. Please include a brief description of the People Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

People-consent by the RAEs to send the notifications according to the developed process

Q20.65.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

People - RAE meeting minutes in which the RAEs agree on referral process

**Q20.66. Process Functional Area**

Q20.67. Please include a brief description of the Process Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone*

Process-a process in which the hospital care site will send the RAE notification

Q20.68.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

Process - an outline or diagram of identified process

**Q20.69. Technology Functional Area**

Q20.70.

Please include a brief description of the Technology Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

Technology-Identifying mechanism to send secure electronic notification of SDoH to the RAE

Q20.71. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

Technology - Documents will include a summary document of screening criteria to identify patients with positive RAE needs with example of flat file or other method used

#### Q20.72. Patient Engagement / Target Population Functional Area

*This question was not displayed to the respondent.*

Q20.73. Please include a brief description of the Patient Engagement / Target Population Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

Q20.74. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

*This question was not displayed to the respondent.*

#### Q20.75. Co

*This question was not displayed to the respondent.*

Q20.76.

#### **Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Social Determinants of Health (SDOH) Screening and RAE Notification

Milestone: PY3Q2

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

*This question was not displayed to the respondent.*

Q20.77. Provide a brief description of the milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q20.78. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

*This question was not displayed to the respondent.*



**COLORADO**

Q20.80.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Social Determinants of Health (SDOH) Screening and RAE Notification

Milestone: PY3Q4

Q20.81. III.B. Please answer the following questions with information related to this intervention's PY3Q4 milestone.

Q20.82.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

- Planning and Implementation
- Continuous Improvement





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**COLORADO**

Q20.84.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Social Determinants of Health (SDOH) Screening and RAE Notification

Milestone: PY3Q4

Q20.85. Is this the impact milestone for this intervention?

*The final milestone of the Planning and Intervention phase should be an impact milestone. If this is the impact milestone for this intervention, please keep in mind:*

- *The impact milestone should address all functional areas applicable to the intervention.*
- *The impact milestone functional area descriptions and supporting documentation should demonstrate that the intervention has been fully implemented.*

Yes

No

Q20.86. Please indicate which Functional Area(s) applies to this milestone. Select all that apply. Impact milestones must include all Functional Areas.

- People
- Process
- Technology
- Patient Engagement / Target Population



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**COLORADO**

Q20.88.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Social Determinants of Health (SDOH) Screening and RAE Notification

Milestone: PY3Q4

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

**Q20.89. People Functional Area**

Q20.90. Please include a brief description of the People Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

People-trained and able to properly identify and screen patients per workflow expectations

Q20.91. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

People - education and training documents on workflow

**Q20.92. Process Functional Area**

Q20.93. Please include a brief description of the Process Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

Process-workflows established for screening and interventions that may be applicable and RAE notification are being sent

Q20.94. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

Process - referral tracking documentation to show referral count to RAE and/or resources

### Q20.95. **Technology Functional Area**

Q20.96. Please include a brief description of the Technology Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

Technology-Community Resource Locator integrated into the EHR

Q20.97. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

Technology - Documentation will include vendor selection documentation

### Q20.98. **Patient Engagement / Target Population Functional Area**

Q20.99. Please include a brief description of the Patient Engagement / Target Population Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

Patient Engagement-patients are discharged home from inpatient admissions with screening results and positive referrals included in reporting

Q20.100. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

Patient engagement - Count of screens to reflect process is in use

Q20.101. Co

*This question was not displayed to the respondent.*

Q20.102.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Social Determinants of Health (SDOH) Screening and RAE Notification

Milestone: PY3Q4

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

*This question was not displayed to the respondent.*

Q20.103. Provide a brief description of the milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q20.104. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

*This question was not displayed to the respondent.*



# COLORADO

Q20.106.

## Intervention Milestones

Reporting Hospital: Good Samaritan Medical Center

Intervention: Social Determinants of Health (SDOH) Screening and RAE Notification

Milestone: PY4Q2

Q20.107. III.B. Please answer the following questions with information related to this intervention's PY4Q2 milestone.

Q20.108.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

Continuous Improvement



# COLORADO

Q20.110.

## Intervention Milestones

Reporting Hospital: Good Samaritan Medical Center

Intervention: Social Determinants of Health (SDOH) Screening and RAE Notification

Milestone: PY4Q2

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Q20.111. Provide a brief description of the milestone (no more than two sentences).

Establish a quality improvement process to include a health equity evaluation for reviewing performance and identifying any needed improvements for all patients and to include performance gaps for patients based on race, ethnicity, gender, and other demographic variables. Process-create quality improvement process for review of data and identification of improvement opportunities

Q20.112. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Process - Documented meeting minutes and identification of quality review process



Q20.114.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Social Determinants of Health (SDOH) Screening and RAE Notification

Milestone: PY4Q4

Q20.115. III.B. Please answer the following questions with information related to this intervention's PY4Q4 milestone.

Q20.116.

What phase does this milestone fall under?

Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).

● Continuous Improvement



Q20.118.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Social Determinants of Health (SDOH) Screening and RAE Notification

Milestone: PY4Q4

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Q20.119. Provide a brief description of the milestone (no more than two sentences).

Monitor RAE referral data to identify improvement opportunities Process- implementation of quality improvement process with data review and identification of improvement opportunities and actions to improve performance, as needed

Q20.120. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Process - Documentation will include meeting minutes or document identifying data review occurred with identification of improvement opportunities, if any, and actions to improve performance



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Q20.122.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Social Determinants of Health (SDOH) Screening and RAE Notification

Milestone: PY5Q2

Q20.123. III.B. Please answer the following questions with information related to this intervention's PY5Q2 milestone.

Q20.124.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

Continuous Improvement



**COLORADO**

Q20.126.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Social Determinants of Health (SDOH) Screening and RAE Notification

Milestone: PY5Q2



*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Q20.127. Provide a brief description of the milestone (no more than two sentences).

Monitor community resource partner vendor performance for gaps in community coverage opportunities Process- review reporting data from community resource locator vendor to identify performance or gaps in community coverage; share feedback with vendor and continue to monitor vendor performance

Q20.128. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Process - Documentation will include example of performance reports and/or meeting minutes indicating review and follow up



Q20.130.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Social Determinants of Health (SDOH) Screening and RAE Notification

Milestone: PY5Q4

Q20.131. III.B. Please answer the following questions with information related to this intervention's PY5Q4 milestone.

Q20.132.

What phase does this milestone fall under?

Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).

Continuous Improvement



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Q20.134.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Social Determinants of Health (SDOH) Screening and RAE Notification

Milestone: PY5Q4

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Q20.135. Provide a brief description of the milestone (no more than two sentences).

Creation of future vision of SDoH work to include sustainability plan on how to leverage structure put in place over HTP years toward future vision  
Process-identification of a defined path for future work and sustainability of structure that has been put in place over last five HTP program years

Q20.136. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Process - Documentation will include outline or high level attestation of sustainability plan.



**COLORADO**

Q20.138.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Social Determinants of Health (SDOH) Screening and RAE Notification

This concludes the information input for this intervention's milestones. Information input for the next intervention's milestones will now begin.



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Q21.2.

**Intervention Milestones - Intervention 3**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Collaborative Discharge Planning and RAE Notification

Milestone: PY2Q2

**B. Intervention Milestones**

Q21.3. III.B. Please answer the following questions with information related to this intervention's PY2Q2 milestone.

Q21.4.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

- Planning and Implementation
- Continuous Improvement



Q21.6.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Collaborative Discharge Planning and RAE Notification

Milestone: PY2Q2

Q21.7.

Is this the impact milestone for this intervention?

*The final milestone of the Planning and Intervention Phase should be an impact milestone. If this is the impact milestone for this intervention, please keep in mind:*

- The impact milestone should address all functional areas applicable to the intervention.*
- The impact milestone functional area descriptions and supporting documentation should demonstrate that the intervention has been fully implemented.*

- Yes
- No

Q21.8. Please indicate which Functional Area(s) applies to this milestone. Select all that apply. Impact milestones must include all Functional Areas.

- People
- Process
- Technology
- Patient Engagement / Target Population



# COLORADO

Q21.10.

## **Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Collaborative Discharge Planning and RAE Notification

Milestone: PY2Q2

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

## Q21.11. **People Functional Area**

Q21.12.

Please include a brief description of the People Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

People-BH leads/RAE stakeholders are engaged to review and agree on project framework and needed builds

Q21.13.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

People - Meeting minutes document roles of individuals included in meetings with RAEs to determine process for RAE notifications

#### Q21.14. Process Functional Area

Q21.15. Please include a brief description of the Process Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

Process - Coordinate with RAEs to determine patient profile targets / risk criteria

#### Q21.16.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Process - Meeting Minutes reflecting coordination with RAE & action items

#### Q21.17. Technology Functional Area

*This question was not displayed to the respondent.*

Q21.18. Please include a brief description of the Technology Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

#### Q21.19.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

#### Q21.20. Patient Engagement / Target Population Functional Area

*This question was not displayed to the respondent.*

Q21.21. Please include a brief description of the Patient Engagement / Target Population Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

Q21.22.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

Q21.23. Co

*This question was not displayed to the respondent.*

Q21.24.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Collaborative Discharge Planning and RAE Notification

Milestone: PY2Q2

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

Q21.25. Please include a brief description of the milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q21.26. Please describe the supporting documentation which will be provided in support of this milestone.

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*



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**COLORADO**

Q21.28.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Collaborative Discharge Planning and RAE Notification

Milestone: PY2Q4

Q21.29. III.B. Please answer the following questions with information related to this intervention's PY2Q4 milestone.

Q21.30.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

- Planning and Implementation
- Continuous Improvement



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**COLORADO**

Q21.32.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Collaborative Discharge Planning and RAE Notification

Milestone: PY2Q4



Q21.33.

Is this the impact milestone for this intervention?

*The final milestone of the Planning and Intervention phase should be an impact milestone. If this is the impact milestone for this intervention, please keep in mind:*

- *The impact milestone should address all functional areas applicable to the intervention.*
- *The impact milestone functional area descriptions and supporting documentation should demonstrate that the intervention has been fully implemented.*

Yes

No

Q21.34. Please indicate which Functional Area(s) applies to this milestone. Select all that apply. Impact milestones must include all Functional Areas.

People

Process

Technology

Patient Engagement / Target Population



**COLORADO**

Q21.36.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Collaborative Discharge Planning and RAE Notification

Milestone: PY2Q4

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

**Q21.37. People Functional Area**

Q21.38. Please include a brief description of the People Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

People-Documentation demonstrating SME leads (Case Mgt., RAE, BH, Quality, ITDS) involved in process

Q21.39.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

People - Documentation of roles included in development of discharge workflow / project plan

Q21.40. **Process Functional Area**

Q21.41.

Please include a brief description of the Process Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

Process-Team develops a formal discharge workflow plan

Q21.42.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Process - Formal Discharge Workflow; Project plan

Q21.43. **Technology Functional Area**

Q21.44. Please include a brief description of the Technology Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

Technology - Documentation demonstrating how we will transfer data to the RAE based on collaborative meetings

Q21.45.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Technology - Screenshot or outline of discharge workflow process in EHR

#### Q21.46. Patient Engagement / Target Population Functional Area

*This question was not displayed to the respondent.*

Q21.47. Please include a brief description of the Patient Engagement / Target Population Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

Q21.48. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

Q21.49. Co

*This question was not displayed to the respondent.*

Q21.50.

#### **Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Collaborative Discharge Planning and RAE Notification  
Milestone: PY2Q4

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

Q21.51. Provide a brief description of the milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q21.52.  
Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*



Q21.54.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Collaborative Discharge Planning and RAE Notification

Milestone: PY3Q2

Q21.55. III.B. Please answer the following questions with information related to this intervention's PY3Q2 milestone.

Q21.56.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting*

- Planning and Implementation
- Continuous Improvement



**COLORADO**

Q21.58.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Collaborative Discharge Planning and RAE Notification

Milestone: PY3Q2

Q21.59.

Is this the impact milestone for this intervention?

*The final milestone of the Planning and Intervention phase should be an impact milestone. If this is the impact milestone for this intervention, please keep in mind:*

- *The impact milestone should address all functional areas applicable to the intervention.*
- *The impact milestone functional area descriptions and supporting documentation should demonstrate that the intervention has been fully implemented.*

- Yes
- No

Q21.60.

Please indicate which Functional Area(s) applies to this milestone. Select all that apply. Impact milestones must include all Functional Areas.

- People
- Process
- Technology
- Patient Engagement / Target Population



# COLORADO

Q21.62.

## **Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Collaborative Discharge Planning and RAE Notification

Milestone: PY3Q2

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

## Q21.63. **People Functional Area**

Q21.64. Please include a brief description of the People Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

People-Cross functional team to represent program intersection

Q21.65.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

People - Documentation of roles included in cross functional team to develop workflow and review performance

**Q21.66. Process Functional Area**

Q21.67. Please include a brief description of the Process Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone*

Process-Establish performance targets for phase one (cross functional)

Q21.68.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

Process - Description of quality targets and performance benchmarks

**Q21.69. Technology Functional Area**

Q21.70.

Please include a brief description of the Technology Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

Technology-develops tracking/reporting tool

Q21.71. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

## Q21.72. Patient Engagement / Target Population Functional Area

*This question was not displayed to the respondent.*

Q21.73. Please include a brief description of the Patient Engagement / Target Population Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

Q21.74. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

## Q21.75. Co

*This question was not displayed to the respondent.*

Q21.76.

### **Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Collaborative Discharge Planning and RAE Notification

Milestone: PY3Q2

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

Q21.77. Provide a brief description of the milestone (no more than two sentences).

*This question was not displayed to the respondent.*



Q21.78. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*



**COLORADO**

Q21.80.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Collaborative Discharge Planning and RAE Notification

Milestone: PY3Q4

Q21.81. III.B. Please answer the following questions with information related to this intervention's PY3Q4 milestone.

Q21.82.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

- Planning and Implementation
- Continuous Improvement



**COLORADO**

Q21.84.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Collaborative Discharge Planning and RAE Notification

Milestone: PY3Q4

Q21.85. Is this the impact milestone for this intervention?

*The final milestone of the Planning and Intervention phase should be an impact milestone. If this is the impact milestone for this intervention, please keep in mind:*

- *The impact milestone should address all functional areas applicable to the intervention.*
- *The impact milestone functional area descriptions and supporting documentation should demonstrate that the intervention has been fully implemented.*

Yes

No

Q21.86. Please indicate which Functional Area(s) applies to this milestone. Select all that apply. Impact milestones must include all Functional Areas.

- People
- Process
- Technology
- Patient Engagement / Target Population



**COLORADO**

Q21.88.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Collaborative Discharge Planning and RAE Notification

Milestone: PY3Q4

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

**Q21.89. People Functional Area**

Q21.90. Please include a brief description of the People Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

People-SCL Health care site teams involved in pilot roll out

Q21.91. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

People - Documentation of roles included in roll out of workflow

**Q21.92. Process Functional Area**

Q21.93. Please include a brief description of the Process Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

Process-Implementing planned workflow

Q21.94. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

Process - Performance Dashboard (measure numerator/denominator) example indicating workflow is implemented

**Q21.95. Technology Functional Area**

Q21.96. Please include a brief description of the Technology Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

Technology-Data collection, analysis and management

Q21.97. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

Technology - example outline or screenshot of Performance Dashboard

**Q21.98. Patient Engagement / Target Population Functional Area**

Q21.99. Please include a brief description of the Patient Engagement / Target Population Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

Patient engagement- care coordination begins

Q21.100. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

Patient engagement - documentation of measure numerator/denominator information indicating patients are engaged in the process

Q21.101. Co

*This question was not displayed to the respondent.*

Q21.102.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Collaborative Discharge Planning and RAE Notification

Milestone: PY3Q4

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

*This question was not displayed to the respondent.*

Q21.103. Provide a brief description of the milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q21.104. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

*This question was not displayed to the respondent.*



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Q21.106.

### Intervention Milestones

Reporting Hospital: Good Samaritan Medical Center

Intervention: Collaborative Discharge Planning and RAE Notification

Milestone: PY4Q2

Q21.107. III.B. Please answer the following questions with information related to this intervention's PY4Q2 milestone.

Q21.108.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

Continuous Improvement



**COLORADO**

Q21.110.

### Intervention Milestones

Reporting Hospital: Good Samaritan Medical Center

Intervention: Collaborative Discharge Planning and RAE Notification

Milestone: PY4Q2

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Q21.111. Provide a brief description of the milestone (no more than two sentences).

First evaluation point to make necessary adjustments in workflow to address barriers, successes, and lessons learned to include a data review against defined performance targets, BH (behavioral health) Team /Quality review, analysis, adjustments with the addition of a health equity component to include a review of disparities based on race, ethnicity, gender, and demographic variables.

Q21.112. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

Supporting documentation will include an evaluation paper describing barriers, successes and lessons learned and documentation of roles included in data review, analysis, adjustments



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Q21.114.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Collaborative Discharge Planning and RAE Notification

Milestone: PY4Q4

Q21.115. III.B. Please answer the following questions with information related to this intervention's PY4Q4 milestone.

Q21.116.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

- Continuous Improvement



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Q21.118.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Collaborative Discharge Planning and RAE Notification

Milestone: PY4Q4

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Q21.119. Provide a brief description of the milestone (no more than two sentences).

Solidify on-going executive review & counsel (includes RAE) to ensure progression of intervention beyond Phase One, includes performance improvement to include a determination of evaluation process of performance thru Phase One and Executive review and input on performance progression

Q21.120. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Supporting documentation to include a list of executive review counsel, defined responsibilities, governance, & review schedule and an outlined governance, & review schedule



**COLORADO**



Q21.122.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Collaborative Discharge Planning and RAE Notification

Milestone: PY5Q2

Q21.123. III.B. Please answer the following questions with information related to this intervention's PY5Q2 milestone.

Q21.124.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

- Continuous Improvement



**COLORADO**

Q21.126.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Collaborative Discharge Planning and RAE Notification

Milestone: PY5Q2

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Q21.127. Provide a brief description of the milestone (no more than two sentences).

Continuous monitoring of intervention performance and evaluation of reporting and meeting cadence with the internal behavioral health team working on this measure.

Q21.128. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

documentation will include a summary of the established meeting schedule, date and times, and meeting minutes with topics that include intervention performance and evaluation. Position attendance will be noted in the Minutes to show teams that work with patients are coming together to discuss the intervention, measure performance, evaluation, and improvement. The summary will additionally include a copy of the report developed as a regular feedback tool to engaged teams during the meetings. The report will show inclusion of community engagement attempts and/or inputs with outreach attempts or engagement with partners and the inclusion of their input into the continuous improvement decisions.



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Q21.130.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Collaborative Discharge Planning and RAE Notification

Milestone: PY5Q4

Q21.131. III.B. Please answer the following questions with information related to this intervention's PY5Q4 milestone.

Q21.132.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

Continuous Improvement



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Q21.134.

## **Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Collaborative Discharge Planning and RAE Notification

Milestone: PY5Q4

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Q21.135. Provide a brief description of the milestone (no more than two sentences).

Creation of future vision of BH care management and patient flow work to include sustainability plan on how to leverage structure put in place over HTP years toward future vision

Q21.136. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Supporting documentation could include project plan focused on additional intervention phases; Development of Sustainability model



**COLORADO**

Q21.138.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Collaborative Discharge Planning and RAE Notification

This concludes the information input for this intervention's milestones. Information input for the next intervention's milestones will now begin.



**COLORADO**

Q22.2.

**Intervention Milestones - Intervention 4**

Reporting Hospital: Good Samaritan Medical Center

Intervention: ALTO and Opioid Safety

Milestone: PY2Q2

**B. Intervention Milestones**

Q22.3. III.B. Please answer the following questions with information related to this intervention's PY2Q2 milestone.

Q22.4.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

Planning and Implementation

Continuous Improvement



Q22.6.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: ALTO and Opioid Safety

Milestone: PY2Q2

Q22.7.

Is this the impact milestone for this intervention?

*The final milestone of the Planning and Intervention Phase should be an impact milestone. If this is the impact milestone for this intervention, please keep in mind:*

- *The impact milestone should address all functional areas applicable to the intervention.*
- *The impact milestone functional area descriptions and supporting documentation should demonstrate that the intervention has been fully implemented.*

Yes

No

Q22.8. Please indicate which Functional Area(s) applies to this milestone. Select all that apply. Impact milestones must include all Functional Areas.

People

Process

Technology

Patient Engagement / Target Population



# COLORADO

Q22.10.

## **Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: ALTO and Opioid Safety

Milestone: PY2Q2

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

## Q22.11. **People Functional Area**

Q22.12.

Please include a brief description of the People Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

People-Hospital associates and stakeholders are identified to oversee the measure work and performance for HTP

Q22.13.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

People - list of individuals identified to oversee HTP measure work and description of their role.

#### Q22.14. **Process Functional Area**

Q22.15. Please include a brief description of the Process Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

Process-review CHA updates in the measure specs for compliance

Q22.16.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Process - documentation of any changes that are made to the internal specs per approved CHA updates

#### Q22.17. **Technology Functional Area**

Q22.18. Please include a brief description of the Technology Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

Technology-Reporting logic to incorporate changes in measure specs to accommodate HTP reporting has been built.

Q22.19.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Technology - Documentation showing ability to pull performance rate according to new CHA specs.

**Q22.20. Patient Engagement / Target Population Functional Area**

Q22.21. Please include a brief description of the Patient Engagement / Target Population Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

Patient engagement-patients are receiving intervention

**Q22.22.**

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

Patient Engagement - Performance count demonstrated patients are engaged as part of measure specifications

**Q22.23. Co**

*This question was not displayed to the respondent.*

**Q22.24.**

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: ALTO and Opioid Safety

Milestone: PY2Q2

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

*This question was not displayed to the respondent.*



Q22.25. Please include a brief description of the milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q22.26. Please describe the supporting documentation which will be provided in support of this milestone.  
*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*



Q22.28.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: ALTO and Opioid Safety

Milestone: PY2Q4

Q22.29. III.B. Please answer the following questions with information related to this intervention's PY2Q4 milestone.

Q22.30.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

- Planning and Implementation
- Continuous Improvement

Q22.31. Co

*This question was not displayed to the respondent.*

Q22.32.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: ALTO and Opioid Safety

Milestone: PY2Q4

*This question was not displayed to the respondent.*

Q22.33.

Is this the impact milestone for this intervention?

*The final milestone of the Planning and Intervention phase should be an impact milestone. If this is the impact milestone for this intervention, please keep in mind:*

- The impact milestone should address all functional areas applicable to the intervention.*
- The impact milestone functional area descriptions and supporting documentation should demonstrate that the intervention has been fully implemented.*

*This question was not displayed to the respondent.*

Q22.34. Please indicate which Functional Area(s) applies to this milestone. Select all that apply. Impact milestones must include all Functional Areas.

*This question was not displayed to the respondent.*

Q22.35. Co

*This question was not displayed to the respondent.*

Q22.36.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: ALTO and Opioid Safety

Milestone: PY2Q4

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

Q22.37. **People Functional Area**

*This question was not displayed to the respondent.*

Q22.38. Please include a brief description of the People Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

Q22.39.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

**Q22.40. Process Functional Area**

*This question was not displayed to the respondent.*

Q22.41.

Please include a brief description of the Process Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

Q22.42.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

**Q22.43. Technology Functional Area**

*This question was not displayed to the respondent.*

Q22.44. Please include a brief description of the Technology Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

Q22.45.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

**Q22.46. Patient Engagement / Target Population Functional Area**

*This question was not displayed to the respondent.*

Q22.47. Please include a brief description of the Patient Engagement / Target Population Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

Q22.48. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

*This question was not displayed to the respondent.*



**COLORADO**

Q22.50.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: ALTO and Opioid Safety

Milestone: PY2Q4

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

Q22.51. Provide a brief description of the milestone (no more than two sentences).

As part of the continuous improvement process to include a health equity component to review barriers to measure performance seen in populations according to race, ethnicity, gender, and demographic variables. This process will include: validate internal data processes, results, and analyze current performance

Q22.52.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*



# COLORADO

Q22.54.

## Intervention Milestones

Reporting Hospital: Good Samaritan Medical Center

Intervention: ALTO and Opioid Safety

Milestone: PY3Q2

Q22.55. III.B. Please answer the following questions with information related to this intervention's PY3Q2 milestone.

Q22.56.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

- Planning and Implementation
- Continuous Improvement

Q22.57. Co

*This question was not displayed to the respondent.*

Q22.58.

## Intervention Milestones

Reporting Hospital: Good Samaritan Medical Center

Intervention: ALTO and Opioid Safety

Milestone: PY3Q2

*This question was not displayed to the respondent.*

Q22.59.

Is this the impact milestone for this intervention?

*The final milestone of the Planning and Intervention phase should be an impact milestone. If this is the impact milestone for this intervention, please keep in mind:*

- The impact milestone should address all functional areas applicable to the intervention.*
- The impact milestone functional area descriptions and supporting documentation should demonstrate that the intervention has been fully implemented.*

*This question was not displayed to the respondent.*

Q22.60.

Please indicate which Functional Area(s) applies to this milestone. Select all that apply. Impact milestones must include all Functional Areas.

*This question was not displayed to the respondent.*

Q22.61. Co

*This question was not displayed to the respondent.*

Q22.62.

### **Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: ALTO and Opioid Safety

Milestone: PY3Q2

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

Q22.63. **People Functional Area**

*This question was not displayed to the respondent.*

Q22.64. Please include a brief description of the People Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

Q22.65.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

#### Q22.66. **Process Functional Area**

*This question was not displayed to the respondent.*

Q22.67. Please include a brief description of the Process Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone*

*This question was not displayed to the respondent.*

Q22.68.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

#### Q22.69. **Technology Functional Area**

*This question was not displayed to the respondent.*

Q22.70.

Please include a brief description of the Technology Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

Q22.71. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

#### Q22.72. **Patient Engagement / Target Population Functional Area**

*This question was not displayed to the respondent.*

Q22.73. Please include a brief description of the Patient Engagement / Target Population Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

Q22.74. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

*This question was not displayed to the respondent.*



Q22.76.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: ALTO and Opioid Safety

Milestone: PY3Q2

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

Q22.77. Provide a brief description of the milestone (no more than two sentences).

Assess the data and current state of measure performance and intervention tactics, analyze data to check if there are gaps or opportunities for performance or intervention improvements.

Q22.78. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*



Supporting documentation will be a written summary of the analysis and results of the analysis to include any improvement activities planned to address any gaps or opportunities as identified from this continuous improvement process.



**COLORADO**

Q22.80.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: ALTO and Opioid Safety

Milestone: PY3Q4

Q22.81. III.B. Please answer the following questions with information related to this intervention's PY3Q4 milestone.

Q22.82.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

- Planning and Implementation
- Continuous Improvement

Q22.83. Co

*This question was not displayed to the respondent.*

Q22.84.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: ALTO and Opioid Safety

Milestone: PY3Q4

*This question was not displayed to the respondent.*

Q22.85. Is this the impact milestone for this intervention?

*The final milestone of the Planning and Intervention phase should be an impact milestone. If this is the impact milestone for this intervention, please keep in mind:*

- *The impact milestone should address all functional areas applicable to the intervention.*
- *The impact milestone functional area descriptions and supporting documentation should demonstrate that the intervention has been fully implemented.*

*This question was not displayed to the respondent.*

Q22.86. Please indicate which Functional Area(s) applies to this milestone. Select all that apply. Impact milestones must include all Functional Areas.

*This question was not displayed to the respondent.*

Q22.87. Co

*This question was not displayed to the respondent.*

Q22.88.

### **Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: ALTO and Opioid Safety

Milestone: PY3Q4

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

Q22.89. **People Functional Area**

*This question was not displayed to the respondent.*

Q22.90. Please include a brief description of the People Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

Q22.91. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

*This question was not displayed to the respondent.*

#### **Q22.92. Process Functional Area**

*This question was not displayed to the respondent.*

Q22.93. Please include a brief description of the Process Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

Q22.94. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

*This question was not displayed to the respondent.*

#### **Q22.95. Technology Functional Area**

*This question was not displayed to the respondent.*

Q22.96. Please include a brief description of the Technology Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

Q22.97. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

*This question was not displayed to the respondent.*

#### **Q22.98. Patient Engagement / Target Population Functional Area**

*This question was not displayed to the respondent.*

Q22.99. Please include a brief description of the Patient Engagement / Target Population Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

Q22.100. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

*This question was not displayed to the respondent.*



Q22.102.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: ALTO and Opioid Safety

Milestone: PY3Q4

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

Q22.103. Provide a brief description of the milestone (no more than two sentences).

Current quality improvement assessment of performance to include an analysis of stakeholders involved in the intervention process and roles and that responsibilities match intervention targets.

Q22.104. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

Supporting documentation will be a written summary of quality improvement assessment and stakeholder assessment that was performed and the results of the assessment included in the summary



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Q22.106.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: ALTO and Opioid Safety

Milestone: PY4Q2

Q22.107. III.B. Please answer the following questions with information related to this intervention's PY4Q2 milestone.

Q22.108.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

Continuous Improvement



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Q22.110.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: ALTO and Opioid Safety

Milestone: PY4Q2

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Q22.111. Provide a brief description of the milestone (no more than two sentences).

Data will be refreshed, pulled, and analyzed for review of performance gaps and opportunities as a continuous improvement activity. Interventions that have been put in place in order to enhance measure performance will be assessed to determine if they are meeting intended targets and if not, new interventions will be evaluated and implemented depending on the findings of this continuous improvement activity.

Q22.112. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Supporting documentation will be a written summary of the findings from the data and intervention analysis and a list of any new interventions implemented with description of the intervention and reason for implementation as defined through this process. If no gaps or opportunities exist due to current interventions meeting the set targets, such language will be written in the summary.



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Q22.114.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: ALTO and Opioid Safety

Milestone: PY4Q4

Q22.115. III.B. Please answer the following questions with information related to this intervention's PY4Q4 milestone.

Q22.116.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

Continuous Improvement



Q22.118.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: ALTO and Opioid Safety

Milestone: PY4Q4

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Q22.119. Provide a brief description of the milestone (no more than two sentences).

Data will be refreshed, pulled, and analyzed for review of performance gaps and opportunities as a continuous improvement activity. Interventions that have been put in place in order to enhance measure performance will be assessed to determine if they are meeting intended targets and if not, new interventions will be evaluated and implemented depending on the findings of this continuous improvement activity.

Q22.120. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Supporting documentation will be a written summary of the findings from the data and intervention analysis and list of any new interventions implemented with description of the intervention and reason for implementation as defined through this process. If no gaps or opportunities exist due to current interventions meeting the set targets, such language will be written in the summary.



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Q22.122.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: ALTO and Opioid Safety

Milestone: PY5Q2

Q22.123. III.B. Please answer the following questions with information related to this intervention's PY5Q2 milestone.

Q22.124.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

Continuous Improvement



**COLORADO**



Q22.126.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: ALTO and Opioid Safety

Milestone: PY5Q2

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Q22.127. Provide a brief description of the milestone (no more than two sentences).

Data will be refreshed, pulled, and analyzed for review of performance gaps and opportunities as a continuous improvement activity. Interventions that have been put in place in order to enhance measure performance will be assessed to determine if they are meeting intended targets and if not, new interventions will be evaluated and implemented depending on the findings of this continuous improvement activity.

Q22.128. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Supporting documentation will be a written summary of the findings from the data and intervention analysis and list of any new interventions implemented with description of the intervention and reason for implementation as defined through this process. If no gaps or opportunities exist due to current interventions meeting the set targets, such language will be written in the summary.



**COLORADO**

Q22.130.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: ALTO and Opioid Safety

Milestone: PY5Q4

Q22.131. III.B. Please answer the following questions with information related to this intervention's PY5Q4 milestone.

Q22.132.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

- Continuous Improvement



**COLORADO**

Q22.134.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: ALTO and Opioid Safety

Milestone: PY5Q4

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Q22.135. Provide a brief description of the milestone (no more than two sentences).

Data will be refreshed, pulled, and analyzed for review of performance gaps and opportunities as a continuous improvement activity. Interventions that have been put in place in order to enhance measure performance will be assessed to determine if they are meeting intended targets and if not, new interventions will be evaluated and implemented depending on the findings of this continuous improvement activity.

Q22.136. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Supporting documentation will be a written summary of the findings from the data and intervention analysis and list of any new interventions implemented with description of the intervention and reason for implementation as defined through this process. If no gaps or opportunities exist due to current interventions meeting the set targets, such language will be written in the summary.



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Q22.138.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: ALTO and Opioid Safety

This concludes the information input for this intervention's milestones. Information input for the next intervention's milestones will now begin.



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Q23.2.

**Intervention Milestones - Intervention 5**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Hospital Index-Care Redesign

Milestone: PY2Q2

**B. Intervention Milestones**

Q23.3. III.B. Please answer the following questions with information related to this intervention's PY2Q2 milestone.

Q23.4.

What phase does this milestone fall under?

Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).

- Planning and Implementation
- Continuous Improvement



**COLORADO**

Q23.6.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Hospital Index-Care Redesign

Milestone: PY2Q2

Q23.7.

Is this the impact milestone for this intervention?

*The final milestone of the Planning and Intervention Phase should be an impact milestone. If this is the impact milestone for this intervention, please keep in mind:*

- *The impact milestone should address all functional areas applicable to the intervention.*
- *The impact milestone functional area descriptions and supporting documentation should demonstrate that the intervention has been fully implemented.*

- Yes
- No

Q23.8. Please indicate which Functional Area(s) applies to this milestone. Select all that apply. Impact milestones must include all Functional Areas.

- People
- Process
- Technology
- Patient Engagement / Target Population



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Q23.10.

## **Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Hospital Index-Care Redesign

Milestone: PY2Q2

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

## Q23.11. People Functional Area

Q23.12.

Please include a brief description of the People Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

People-develop governance structure to determine engaged staff to engage in hospital index activities for current Prometheus data set. Staff Engagement-identify the structure in which the staff, outlined in the governance structure are engaged in the Hospital Index measure and continual improvement upon episodes identified in the current Prometheus data set. Professional Development-determine how quality improvement techniques will be deployed and how staff are engaged.

Q23.13.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

People -The supporting documentation will be a written description of governance structure with roles and responsibilities identified to engage in continuous improvement activities related to opportunities for improvement in current Prometheus data sets. Staff Engagement-documentation of how these staff identified in the governance structure will be engaged in the process of continuous improvement for the current data set. Professional Development-written summary of when quality improvement techniques will be deployed and how staff will be engaged in those techniques.

#### Q23.14. Process Functional Area

Q23.15. Please include a brief description of the Process Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

Process-identify process for identifying AAE episodes, determination of actions, determine which QI and PI process will be deployed

Q23.16.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Process - a high level summary of determined process to identify top AAE episodes

#### Q23.17. Technology Functional Area

Q23.18. Please include a brief description of the Technology Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

Technology-determining how to ingest data from State into internal systems for analysis and how to use data to drive decisions

Q23.19.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Technology - screenshot or high level summary of how technology will be used and how patients will be identified

**Q23.20. Patient Engagement / Target Population Functional Area**

Q23.21. Please include a brief description of the Patient Engagement / Target Population Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

Patient engagement-determine how to identify patients that fall into high AAE episodes and trends

Q23.22.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

Patient engagement - screenshot or high level summary of how technology will be used and how patients will be identified

Q23.23. Co

*This question was not displayed to the respondent.*

Q23.24.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Hospital Index-Care Redesign

Milestone: PY2Q2

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

*This question was not displayed to the respondent.*

Q23.25. Please include a brief description of the milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q23.26. Please describe the supporting documentation which will be provided in support of this milestone.  
*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*



Q23.28.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Hospital Index-Care Redesign

Milestone: PY2Q4

Q23.29. III.B. Please answer the following questions with information related to this intervention's PY2Q4 milestone.

Q23.30.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

- Planning and Implementation
- Continuous Improvement

Q23.31. Co

*This question was not displayed to the respondent.*



Q23.32.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Hospital Index-Care Redesign

Milestone: PY2Q4

*This question was not displayed to the respondent.*

Q23.33.

Is this the impact milestone for this intervention?

*The final milestone of the Planning and Intervention phase should be an impact milestone. If this is the impact milestone for this intervention, please keep in mind:*

- *The impact milestone should address all functional areas applicable to the intervention.*
- *The impact milestone functional area descriptions and supporting documentation should demonstrate that the intervention has been fully implemented.*

*This question was not displayed to the respondent.*

Q23.34. Please indicate which Functional Area(s) applies to this milestone. Select all that apply. Impact milestones must include all Functional Areas.

*This question was not displayed to the respondent.*

Q23.35. Co

*This question was not displayed to the respondent.*

Q23.36.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Hospital Index-Care Redesign

Milestone: PY2Q4

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

Q23.37. **People Functional Area**

*This question was not displayed to the respondent.*

Q23.38. Please include a brief description of the People Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

Q23.39.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

Q23.40. **Process Functional Area**

*This question was not displayed to the respondent.*

Q23.41.

Please include a brief description of the Process Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

Q23.42.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

Q23.43. **Technology Functional Area**

*This question was not displayed to the respondent.*

Q23.44. Please include a brief description of the Technology Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

Q23.45.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

Q23.46. **Patient Engagement / Target Population Functional Area**

*This question was not displayed to the respondent.*

Q23.47. Please include a brief description of the Patient Engagement / Target Population Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

Q23.48. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*



**COLORADO**

Q23.50.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Hospital Index-Care Redesign

Milestone: PY2Q4

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Q23.51. Provide a brief description of the milestone (no more than two sentences).

Assessment of current state, continuous improvement activities-impact and reporting, and stakeholder assessment to include a current state assessment of top five AAE episodes and determination of whether the episodes will be improved or maintained. Assessment of top five episodes in relation to health equity and disparities based on race, ethnicity, gender, and demographic variables.

Q23.52.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Supporting documentation will be a list of the top five AAE episodes with descriptive information about episode and identified trends. Summary of QI and PI process details and scope. People - a list of identified stakeholders with roles and responsibilities and a description of stakeholder readiness.



**COLORADO**

Q23.54.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Hospital Index-Care Redesign

Milestone: PY3Q2

Q23.55. III.B. Please answer the following questions with information related to this intervention's PY3Q2 milestone.

Q23.56.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

- Planning and Implementation
- Continuous Improvement

Q23.57. Co

*This question was not displayed to the respondent.*

Q23.58.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Hospital Index-Care Redesign

Milestone: PY3Q2

*This question was not displayed to the respondent.*

Q23.59.

Is this the impact milestone for this intervention?

*The final milestone of the Planning and Intervention phase should be an impact milestone. If this is the impact milestone for this intervention, please keep in mind:*

- *The impact milestone should address all functional areas applicable to the intervention.*
- *The impact milestone functional area descriptions and supporting documentation should demonstrate that the intervention has been fully implemented.*

*This question was not displayed to the respondent.*

Q23.60.

Please indicate which Functional Area(s) applies to this milestone. Select all that apply. Impact milestones must include all Functional Areas.

*This question was not displayed to the respondent.*

Q23.61. Co

*This question was not displayed to the respondent.*

Q23.62.

### **Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Hospital Index-Care Redesign

Milestone: PY3Q2

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

Q23.63. **People Functional Area**

*This question was not displayed to the respondent.*

Q23.64. Please include a brief description of the People Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

Q23.65.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

*This question was not displayed to the respondent.*

#### **Q23.66. Process Functional Area**

*This question was not displayed to the respondent.*

Q23.67. Please include a brief description of the Process Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone*

*This question was not displayed to the respondent.*

Q23.68.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

*This question was not displayed to the respondent.*

#### **Q23.69. Technology Functional Area**

*This question was not displayed to the respondent.*

Q23.70.

Please include a brief description of the Technology Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

Q23.71. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

*This question was not displayed to the respondent.*

#### **Q23.72. Patient Engagement / Target Population Functional Area**

*This question was not displayed to the respondent.*

Q23.73. Please include a brief description of the Patient Engagement / Target Population Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

Q23.74. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

*This question was not displayed to the respondent.*



Q23.76.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Hospital Index-Care Redesign

Milestone: PY3Q2

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

Q23.77. Provide a brief description of the milestone (no more than two sentences).

Continuous improvement activity-impact and reporting to include an analysis of QI and PI process and performance, scope of future QI and PI cycle, and stakeholder engagement in continuous improvement activities

Q23.78. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*



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Q23.80.

## **Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Hospital Index-Care Redesign

Milestone: PY3Q4

Q23.81. III.B. Please answer the following questions with information related to this intervention's PY3Q4 milestone.

Q23.82.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

- Planning and Implementation
- Continuous Improvement

Q23.83. Co

*This question was not displayed to the respondent.*

Q23.84.

## **Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Hospital Index-Care Redesign

Milestone: PY3Q4



*This question was not displayed to the respondent.*

Q23.85. Is this the impact milestone for this intervention?

*The final milestone of the Planning and Intervention phase should be an impact milestone. If this is the impact milestone for this intervention, please keep in mind:*

- The impact milestone should address all functional areas applicable to the intervention.*
- The impact milestone functional area descriptions and supporting documentation should demonstrate that the intervention has been fully implemented.*

*This question was not displayed to the respondent.*

Q23.86. Please indicate which Functional Area(s) applies to this milestone. Select all that apply. Impact milestones must include all Functional Areas.

*This question was not displayed to the respondent.*

Q23.87. Co

*This question was not displayed to the respondent.*

Q23.88.

### **Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Hospital Index-Care Redesign

Milestone: PY3Q4

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

Q23.89. **People Functional Area**

*This question was not displayed to the respondent.*

Q23.90. Please include a brief description of the People Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

Q23.91. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

### **Q23.92. Process Functional Area**

*This question was not displayed to the respondent.*

Q23.93. Please include a brief description of the Process Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

Q23.94. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

### **Q23.95. Technology Functional Area**

*This question was not displayed to the respondent.*

Q23.96. Please include a brief description of the Technology Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

Q23.97. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

### **Q23.98. Patient Engagement / Target Population Functional Area**

*This question was not displayed to the respondent.*

Q23.99. Please include a brief description of the Patient Engagement / Target Population Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

Q23.100. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

*This question was not displayed to the respondent.*



Q23.102.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Hospital Index-Care Redesign

Milestone: PY3Q4

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

Q23.103. Provide a brief description of the milestone (no more than two sentences).

Current state assessment of top 5 episodes and Continuous Improvement Activity-Impact and Reporting to include Top AAE episode data review, QI and PI analysis and scope planning for next cycle, and engagement of identified stakeholder in analysis and planning

Q23.104. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

Supporting documentation will be a summary of top 5 episodes and information about episode details and trends and a summary of next QI/PI cycle to include scope of work, performance of QI and PI cycle; and documentation demonstrating stakeholder engagement for QI and PI analysis



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Q23.106.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Hospital Index-Care Redesign

Milestone: PY4Q2

Q23.107. III.B. Please answer the following questions with information related to this intervention's PY4Q2 milestone.

Q23.108.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

Continuous Improvement



**COLORADO**

Q23.110.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Hospital Index-Care Redesign

Milestone: PY4Q2

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Q23.111. Provide a brief description of the milestone (no more than two sentences).

Continuous Improvement Activity-Impact and Reporting to include analysis of QI and PI process and performance, scope of future QI and PI cycle and stakeholder engagement in continuous improvement activities

Q23.112. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Supporting documents will be a high level summary of QI and PI cycle to include scope of work, analysis of QI and PI performance; and list of stakeholders engaged in the process



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Q23.114.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Hospital Index-Care Redesign

Milestone: PY4Q4

Q23.115. III.B. Please answer the following questions with information related to this intervention's PY4Q4 milestone.

Q23.116.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing*

interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).

Continuous Improvement



Q23.118.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Hospital Index-Care Redesign

Milestone: PY4Q4

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Q23.119. Provide a brief description of the milestone (no more than two sentences).

Current State Assessment of top 5 episodes and Continuous Improvement Activity-Impact and Reporting to include top AAE episode data review, QI and PI analysis and scope planning for next cycle, and engagement of identified stakeholder in analysis and planning

Q23.120. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Supporting documentation will be a summary of top 5 episodes and information about episode details and trends and a summary of next QI/PI cycle to include scope of work, performance of QI and PI cycle; and documentation demonstrating stakeholder engagement for QI and PI analysis



**COLORADO**

Q23.122.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Hospital Index-Care Redesign

Milestone: PY5Q2

Q23.123. III.B. Please answer the following questions with information related to this intervention's PY5Q2 milestone.

Q23.124.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

Continuous Improvement



**COLORADO**

Q23.126.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Hospital Index-Care Redesign

Milestone: PY5Q2

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Q23.127. Provide a brief description of the milestone (no more than two sentences).

Continuous Improvement Activity-Impact and Reporting to include an analysis of QI and PI process and performance, scope of future QI and PI cycle, and stakeholder engagement in continuous improvement activities

Q23.128. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Supporting documents will be a high level summary of QI and PI cycle to include scope of work, analysis of QI and PI performance, and supporting documentation will include a list of stakeholders engaged in the process



**COLORADO**

Q23.130.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Hospital Index-Care Redesign

Milestone: PY5Q4

Q23.131. III.B. Please answer the following questions with information related to this intervention's PY5Q4 milestone.

Q23.132.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing*



interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).

Continuous Improvement



Q23.134.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Hospital Index-Care Redesign

Milestone: PY5Q4

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Q23.135. Provide a brief description of the milestone (no more than two sentences).

Current State Assessment of top 5 episodes and Continuous Improvement Activity-Impact and Reporting to include Top AAE episode data review, QI and PI analysis and scope planning for next cycle, and engagement of identified stakeholder in analysis and planning

Q23.136. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Supporting documentation will be a summary of top 5 episodes and information about episode details and trends and a summary of next QI/PI cycle to include scope of work, performance of QI and PI cycle; and documentation demonstrating stakeholder engagement for QI and PI analysis



**COLORADO**

Q23.138.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Hospital Index-Care Redesign

This concludes the information input for this intervention's milestones. Information input for the next intervention's milestones will now begin.



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Q24.2.

**Intervention Milestones - Intervention 6**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Patient Flow - Length of Stay (LOS)

Milestone: PY2Q2

**B. Intervention Milestones**

Q24.3. III.B. Please answer the following questions with information related to this intervention's PY2Q2 milestone.

Q24.4.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

Planning and Implementation

Continuous Improvement



**COLORADO**

Q24.6.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Patient Flow - Length of Stay (LOS)

Milestone: PY2Q2

Q24.7.

Is this the impact milestone for this intervention?

*The final milestone of the Planning and Intervention Phase should be an impact milestone. If this is the impact milestone for this intervention, please keep in mind:*

- *The impact milestone should address all functional areas applicable to the intervention.*
- *The impact milestone functional area descriptions and supporting documentation should demonstrate that the intervention has been fully implemented.*

Yes

No

Q24.8. Please indicate which Functional Area(s) applies to this milestone. Select all that apply. Impact milestones must include all Functional Areas.

People

Process

Technology

Patient Engagement / Target Population



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Q24.10.

## **Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Patient Flow - Length of Stay (LOS)

Milestone: PY2Q2

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

## Q24.11. **People Functional Area**

Q24.12.

Please include a brief description of the People Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

People-stakeholders are engaged to review and agree on initiatives

Q24.13.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

People - Supporting documents will be a list of stakeholders/steering committee members with an initiative review summary to identify agreed upon LOS patient flow initiative to be pursued

#### **Q24.14. Process Functional Area**

*This question was not displayed to the respondent.*

Q24.15. Please include a brief description of the Process Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

Q24.16.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

#### **Q24.17. Technology Functional Area**

*This question was not displayed to the respondent.*

Q24.18. Please include a brief description of the Technology Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

Q24.19.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

#### **Q24.20. Patient Engagement / Target Population Functional Area**

*This question was not displayed to the respondent.*

Q24.21. Please include a brief description of the Patient Engagement / Target Population Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

Q24.22.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

*This question was not displayed to the respondent.*

Q24.23. Co

*This question was not displayed to the respondent.*

Q24.24.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Patient Flow - Length of Stay (LOS)

Milestone: PY2Q2

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

*This question was not displayed to the respondent.*

Q24.25. Please include a brief description of the milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q24.26. Please describe the supporting documentation which will be provided in support of this milestone.

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

*This question was not displayed to the respondent.*



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Q24.28.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Patient Flow - Length of Stay (LOS)

Q24.29. III.B. Please answer the following questions with information related to this intervention's PY2Q4 milestone.

Q24.30.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

- Planning and Implementation
- Continuous Improvement



**COLORADO**

Q24.32.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Patient Flow - Length of Stay (LOS)

Milestone: PY2Q4

Q24.33.

Is this the impact milestone for this intervention?

*The final milestone of the Planning and Intervention phase should be an impact milestone. If this is the impact milestone for this intervention, please keep in mind:*

- The impact milestone should address all functional areas applicable to the intervention.*
- The impact milestone functional area descriptions and supporting documentation should demonstrate that the intervention has been fully implemented.*

- Yes
- No

Q24.34. Please indicate which Functional Area(s) applies to this milestone. Select all that apply. Impact milestones must include all Functional Areas.

- People
- Process
- Technology
- Patient Engagement / Target Population



**COLORADO**

Q24.36.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Patient Flow - Length of Stay (LOS)

Milestone: PY2Q4

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Q24.37. **People Functional Area**

Q24.38. Please include a brief description of the People Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

People-leadership is engaged for feedback, review, and approval

Q24.39.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*



People - list of leadership titles that have now been engaged in the work and their feedback is documented and written in a n attestation that states their titles and their feedback/input and engagement to date.

#### Q24.40. **Process Functional Area**

Q24.41.

Please include a brief description of the Process Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

Process-a plan is created for the initiatives

Q24.42.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Process - Documentation will be an approved project plan

#### Q24.43. **Technology Functional Area**

*This question was not displayed to the respondent.*

Q24.44. Please include a brief description of the Technology Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

Q24.45.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

#### **Q24.46. Patient Engagement / Target Population Functional Area**

*This question was not displayed to the respondent.*

Q24.47. Please include a brief description of the Patient Engagement / Target Population Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

Q24.48. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

#### **Q24.49. Co**

*This question was not displayed to the respondent.*

Q24.50.

#### **Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Patient Flow - Length of Stay (LOS)

Milestone: PY2Q4

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

Q24.51. Provide a brief description of the milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q24.52.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*



**COLORADO**

Q24.54.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Patient Flow - Length of Stay (LOS)

Milestone: PY3Q2

Q24.55. III.B. Please answer the following questions with information related to this intervention's PY3Q2 milestone.

Q24.56.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

- Planning and Implementation
- Continuous Improvement



**COLORADO**

Q24.58.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Patient Flow - Length of Stay (LOS)

Milestone: PY3Q2

Q24.59.

Is this the impact milestone for this intervention?

*The final milestone of the Planning and Intervention phase should be an impact milestone. If this is the impact milestone for this intervention, please keep in mind:*

- *The impact milestone should address all functional areas applicable to the intervention.*
- *The impact milestone functional area descriptions and supporting documentation should demonstrate that the intervention has been fully implemented.*

Yes

No

Q24.60.

Please indicate which Functional Area(s) applies to this milestone. Select all that apply. Impact milestones must include all Functional Areas.

People

Process

Technology

Patient Engagement / Target Population



**COLORADO**

Q24.62.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Patient Flow - Length of Stay (LOS)

Milestone: PY3Q2

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Q24.63. **People Functional Area**

*This question was not displayed to the respondent.*

Q24.64. Please include a brief description of the People Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

Q24.65.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

### Q24.66. **Process Functional Area**

Q24.67. Please include a brief description of the Process Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone*

Process-process development in which the Medicaid patient population will be tracked against other patients and the creation of HTP/Medicaid filter on data and benchmarks

Q24.68.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Process - A statement of targets and benchmarks established for the Medicaid population and process in which the process for revising Medicaid specific data and performance will be maintained.

### Q24.69. **Technology Functional Area**

Q24.70.

Please include a brief description of the Technology Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

Technology-benchmarks from selected initiatives are built into a LOS dashboard

Q24.71. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

Technology - screenshot of LOS dashboard with benchmark information

Q24.72. **Patient Engagement / Target Population Functional Area**

*This question was not displayed to the respondent.*

Q24.73. Please include a brief description of the Patient Engagement / Target Population Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

Q24.74. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

*This question was not displayed to the respondent.*

Q24.75. Co

*This question was not displayed to the respondent.*

Q24.76.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Patient Flow - Length of Stay (LOS)

Milestone: PY3Q2

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

Q24.77. Provide a brief description of the milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q24.78. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*



Q24.80.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Patient Flow - Length of Stay (LOS)

Milestone: PY3Q4

Q24.81. III.B. Please answer the following questions with information related to this intervention's PY3Q4 milestone.

Q24.82.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

- Planning and Implementation
- Continuous Improvement



**COLORADO**

Q24.84.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Patient Flow - Length of Stay (LOS)

Milestone: PY3Q4

Q24.85. Is this the impact milestone for this intervention?

*The final milestone of the Planning and Intervention phase should be an impact milestone. If this is the impact milestone for this intervention, please keep in mind:*

- *The impact milestone should address all functional areas applicable to the intervention.*
- *The impact milestone functional area descriptions and supporting documentation should demonstrate that the intervention has been fully implemented.*

Yes

No

Q24.86. Please indicate which Functional Area(s) applies to this milestone. Select all that apply. Impact milestones must include all Functional Areas.

- People
- Process
- Technology
- Patient Engagement / Target Population



**COLORADO**



Q24.88.

### **Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Patient Flow - Length of Stay (LOS)

Milestone: PY3Q4

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

### **Q24.89. People Functional Area**

Q24.90. Please include a brief description of the People Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

People-associates and clinicians have been identified to carry out LOS initiatives and are engaged and in agreement of the initial work plan. These associates and clinicians are those that have been identified as being experts or working in roles that are associated and impact the identified intervention.

Q24.91. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

People - Supporting documents is a list of those involved in LOS work listed by initiative and their roles and responsibilities in that initiative. This list of engaged clinicians and associates is different from previous quarters. In previous quarters, stakeholders are identified as those who will work in planning teams to accomplish the previous milestones of setting up the structure and identifying intervention work. The list of those involved here are stakeholders such as associated and clinician, listed by titles, that have been identified and agree to carry out the intervention work that was previously decided on by the LOS team.

### **Q24.92. Process Functional Area**

Q24.93. Please include a brief description of the Process Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

Process-there is a defined process for the intervention

Q24.94. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

Process - documentation of initiative work flow / work plan

#### Q24.95. **Technology Functional Area**

Q24.96. Please include a brief description of the Technology Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

Technology-data is being collected, analyzed by the targeted stakeholders, and data can be used for improvement activities

Q24.97. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

Technology - screenshot of internal tool that tracks numerator and denominator performance

#### Q24.98. **Patient Engagement / Target Population Functional Area**

Q24.99. Please include a brief description of the Patient Engagement / Target Population Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

Patient engagement-Interventions have been rolled out to or for Medicaid patients.

Q24.100. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

Patient engagement - supporting documentation will be a performance report on intervention.

Q24.101. Co

*This question was not displayed to the respondent.*

Q24.102.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Patient Flow - Length of Stay (LOS)

Milestone: PY3Q4

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

*This question was not displayed to the respondent.*

Q24.103. Provide a brief description of the milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q24.104. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

*This question was not displayed to the respondent.*



**CO L O R A D O**

Q24.106.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Patient Flow - Length of Stay (LOS)

Milestone: PY4Q2

Q24.107. III.B. Please answer the following questions with information related to this intervention's PY4Q2 milestone.

Q24.108.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

Continuous Improvement



**CO L O R A D O**

Q24.110.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Patient Flow - Length of Stay (LOS)

Milestone: PY4Q2

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Q24.111. Provide a brief description of the milestone (no more than two sentences).

Performance appraisal and clinicians are committed to reviewing scorecards, identify appraisal tool i.e potential scorecard and review process created. Process will include an identified health equity component to evaluate data based on race, ethnicity, gender, and demographic disparities, and the use of technology used to display tool to stakeholders

Q24.112. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Supporting documentation will include a summary of the appraisal tool to be used, a scorecard template screenshot if one has been established as needed, a list of associates and clinicians included in review of appraisal tool



**COLORADO**

Q24.114.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Patient Flow - Length of Stay (LOS)

Milestone: PY4Q4

Q24.115. III.B. Please answer the following questions with information related to this intervention's PY4Q4 milestone.

Q24.116.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing*

interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).

Continuous Improvement



# COLORADO

Q24.118.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Patient Flow - Length of Stay (LOS)

Milestone: PY4Q4

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Q24.119. Provide a brief description of the milestone (no more than two sentences).

Leadership accountability and action planning process with performance improvement tool and plan. This includes the creation and use of a performance improvement tool based on data from appraisal, and that stakeholders are using the tool, and that tool is created

Q24.120. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Supporting documentation will include a three legged stool document of triad leadership that explains leadership engagement in measure accountability; and a screenshot or description of tool



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**CO L O R A D O**

Q24.122.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Patient Flow - Length of Stay (LOS)

Milestone: PY5Q2

Q24.123. III.B. Please answer the following questions with information related to this intervention's PY5Q2 milestone.

Q24.124.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

Continuous Improvement



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**CO L O R A D O**

Q24.126.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Patient Flow - Length of Stay (LOS)

Milestone: PY5Q2

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Q24.127. Provide a brief description of the milestone (no more than two sentences).

Continuous monitoring of O/E LOS to include a regular cadence is established for performance review using data from LOS initiatives, performance appraisal, and performance improvement tool. SCL associates are committed to this monitoring process and a cadence of review is in place

Q24.128. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Supporting documentation will be a meeting schedule and a list of committed stakeholders that will review LOS data at the scheduled meetings;



Q24.130.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Patient Flow - Length of Stay (LOS)

Milestone: PY5Q4

Q24.131. III.B. Please answer the following questions with information related to this intervention's PY5Q4 milestone.

Q24.132.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing*



interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).

Continuous Improvement



Q24.134.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Patient Flow - Length of Stay (LOS)

Milestone: PY5Q4

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Q24.135. Provide a brief description of the milestone (no more than two sentences).

Future vision of LOS and patient flow work to include sustainability plan on how to leverage structure put in place over HTP years toward future vision. This means that there a defined path for future work and sustainability of structure that has been put in place over last five HTP program years

Q24.136. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Supporting documentation will be an outline or high level summary of an ongoing project plan with lessons learned and future goals.



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**COLORADO**

Q24.138.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Patient Flow - Length of Stay (LOS)

This concludes the information input for this intervention's milestones. Information input for the next intervention's milestones will now begin.



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**COLORADO**

Q25.2.

**Intervention Milestones - Intervention 7**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Patients with Ischemic Stroke Discharged with Statin Medications

Milestone: PY2Q2

**B. Intervention Milestones**

Q25.3. III.B. Please answer the following questions with information related to this intervention's PY2Q2 milestone.

Q25.4.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

Planning and Implementation

Continuous Improvement



Q25.6.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Patients with Ischemic Stroke Discharged with Statin Medications

Milestone: PY2Q2

Q25.7.

Is this the impact milestone for this intervention?

*The final milestone of the Planning and Intervention Phase should be an impact milestone. If this is the impact milestone for this intervention, please keep in mind:*

- *The impact milestone should address all functional areas applicable to the intervention.*
- *The impact milestone functional area descriptions and supporting documentation should demonstrate that the intervention has been fully implemented.*

Yes

No

Q25.8. Please indicate which Functional Area(s) applies to this milestone. Select all that apply. Impact milestones must include all Functional Areas.

People

Process

Technology

Patient Engagement / Target Population



# COLORADO

Q25.10.

## **Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Patients with Ischemic Stroke Discharged with Statin Medications

Milestone: PY2Q2

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

## Q25.11. **People Functional Area**

Q25.12.

Please include a brief description of the People Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

People-There is a formalized governance structure in place and socialized with the work leads and committees to oversee the work. Leading up to this milestone there will be decisions made to determine a process and governance structure to oversee the measure work and performance. Ideally, there will be a committee in which the work and performance under this measure will take place. This work will be done by the impact milestones and therefore the people portal of this milestone will be in place by this impact milestone.

Q25.13.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

People - an organizational chart to include roles and responsibilities to be signed off on by the neuroscience council.

#### Q25.14. **Process Functional Area**

Q25.15. Please include a brief description of the Process Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

Process-will be put in place by this milestone to execute work under this measure to meet measure performance criteria. Identified interventions will need to run through this process in order to perform. By this milestone, the process will be in place and will be used for performance.

Q25.16.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Process - The supporting documents will be a diagram of a process in which the intervention/s will be executed. This document will display that there is a process structure in place to execute the measure performance.

#### Q25.17. **Technology Functional Area**

Q25.18. Please include a brief description of the Technology Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

Technology- the technology needed to to monitor measure performance will be at scale by this milestone. The technology needed is an ability to build reports per the measure specs, build out a reporting functionality from the data in order to report back to the measure governance team, such as those outlined in the milestones People section. Previous to this milestone, the work of building out all the items needed to collect data, monitor performance, and report out will be in place. This milestone will signify that all is to scale by having functionality to pull data, monitor data, and report out information from the data.

Q25.19.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Technology - supporting documentation will be a screenshot and description of the mentioned technology in place with the exception of PHI.

### Q25.20. Patient Engagement / Target Population Functional Area

Q25.21. Please include a brief description of the Patient Engagement / Target Population Functional Area for this milestone (no more than two sentences).  
*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

Patient engagement- Patients will be engaged in the Stroke intervention.

Q25.22.  
Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

Patient Engagement - supporting documentation will be a report showing a patient count in the intervention.

### Q25.23. Co

*This question was not displayed to the respondent.*

### Q25.24.

#### **Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Patients with Ischemic Stroke Discharged with Statin Medications

Milestone: PY2Q2

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

*This question was not displayed to the respondent.*

Q25.25. Please include a brief description of the milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q25.26. Please describe the supporting documentation which will be provided in support of this milestone.  
*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*



Q25.28.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Patients with Ischemic Stroke Discharged with Statin Medications

Milestone: PY2Q4

Q25.29. III.B. Please answer the following questions with information related to this intervention's PY2Q4 milestone.

Q25.30.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

- Planning and Implementation
- Continuous Improvement

Q25.31. Co

*This question was not displayed to the respondent.*

Q25.32.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Patients with Ischemic Stroke Discharged with Statin Medications

Milestone: PY2Q4

*This question was not displayed to the respondent.*

Q25.33.

Is this the impact milestone for this intervention?

*The final milestone of the Planning and Intervention phase should be an impact milestone. If this is the impact milestone for this intervention, please keep in mind:*

- The impact milestone should address all functional areas applicable to the intervention.*
- The impact milestone functional area descriptions and supporting documentation should demonstrate that the intervention has been fully implemented.*

*This question was not displayed to the respondent.*

Q25.34. Please indicate which Functional Area(s) applies to this milestone. Select all that apply. Impact milestones must include all Functional Areas.

*This question was not displayed to the respondent.*

Q25.35. Co

*This question was not displayed to the respondent.*

Q25.36.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Patients with Ischemic Stroke Discharged with Statin Medications

Milestone: PY2Q4

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

Q25.37. **People Functional Area**

*This question was not displayed to the respondent.*

Q25.38. Please include a brief description of the People Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*



Q25.39.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

**Q25.40. Process Functional Area**

*This question was not displayed to the respondent.*

Q25.41.

Please include a brief description of the Process Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

Q25.42.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

**Q25.43. Technology Functional Area**

*This question was not displayed to the respondent.*

Q25.44. Please include a brief description of the Technology Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

Q25.45.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

**Q25.46. Patient Engagement / Target Population Functional Area**

*This question was not displayed to the respondent.*

Q25.47. Please include a brief description of the Patient Engagement / Target Population Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

Q25.48. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

*This question was not displayed to the respondent.*



Q25.50.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Patients with Ischemic Stroke Discharged with Statin Medications

Milestone: PY2Q4

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

Q25.51. Provide a brief description of the milestone (no more than two sentences).

As part of continuous improvement, the STK-6 data will be migrated into an internal SCL Health neuroscience dashboard to create monitoring alignment in the organization for efficiencies.

Q25.52.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*



**COLORADO**

Q25.54.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Patients with Ischemic Stroke Discharged with Statin Medications

Milestone: PY3Q2

Q25.55. III.B. Please answer the following questions with information related to this intervention's PY3Q2 milestone.

Q25.56.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

- Planning and Implementation
- Continuous Improvement

Q25.57. Co

*This question was not displayed to the respondent.*

Q25.58.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Patients with Ischemic Stroke Discharged with Statin Medications

Milestone: PY3Q2

*This question was not displayed to the respondent.*

Q25.59.

Is this the impact milestone for this intervention?

*The final milestone of the Planning and Intervention phase should be an impact milestone. If this is the impact milestone for this intervention, please keep in mind:*

- *The impact milestone should address all functional areas applicable to the intervention.*
- *The impact milestone functional area descriptions and supporting documentation should demonstrate that the intervention has been fully implemented.*

*This question was not displayed to the respondent.*

Q25.60.

Please indicate which Functional Area(s) applies to this milestone. Select all that apply. Impact milestones must include all Functional Areas.

*This question was not displayed to the respondent.*

Q25.61. Co

*This question was not displayed to the respondent.*

Q25.62.

### **Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Patients with Ischemic Stroke Discharged with Statin Medications

Milestone: PY3Q2

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

Q25.63. **People Functional Area**

*This question was not displayed to the respondent.*

Q25.64. Please include a brief description of the People Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

Q25.65.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

*This question was not displayed to the respondent.*

#### **Q25.66. Process Functional Area**

*This question was not displayed to the respondent.*

Q25.67. Please include a brief description of the Process Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone*

*This question was not displayed to the respondent.*

Q25.68.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

*This question was not displayed to the respondent.*

#### **Q25.69. Technology Functional Area**

*This question was not displayed to the respondent.*

Q25.70.

Please include a brief description of the Technology Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

Q25.71. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

*This question was not displayed to the respondent.*

#### **Q25.72. Patient Engagement / Target Population Functional Area**

*This question was not displayed to the respondent.*

Q25.73. Please include a brief description of the Patient Engagement / Target Population Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

Q25.74. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

*This question was not displayed to the respondent.*



Q25.76.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Patients with Ischemic Stroke Discharged with Statin Medications

Milestone: PY3Q2

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

Q25.77. Provide a brief description of the milestone (no more than two sentences).

First round of STK-6 compliance review done by full governance structure and improvement opportunities identified. This means that the first STK-6 compliance review completed by full governance structure and opportunities for improvement identified if performance is not on target. Additionally, the review of improvement activities based on information related to race, ethnicity, gender, and other demographic variables through a health equity approach.

Q25.78. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

Supporting documentation to include meeting minutes from each of the applicable committees and neuroscience dashboard review, attestation of improvement identified or if none identified, the justification.



**COLORADO**

Q25.80.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Patients with Ischemic Stroke Discharged with Statin Medications

Milestone: PY3Q4

Q25.81. III.B. Please answer the following questions with information related to this intervention's PY3Q4 milestone.

Q25.82.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

- Planning and Implementation
- Continuous Improvement

Q25.83. Co

*This question was not displayed to the respondent.*

Q25.84.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Patients with Ischemic Stroke Discharged with Statin Medications

Milestone: PY3Q4

*This question was not displayed to the respondent.*

Q25.85. Is this the impact milestone for this intervention?

*The final milestone of the Planning and Intervention phase should be an impact milestone. If this is the impact milestone for this intervention, please keep in mind:*

- *The impact milestone should address all functional areas applicable to the intervention.*
- *The impact milestone functional area descriptions and supporting documentation should demonstrate that the intervention has been fully implemented.*

*This question was not displayed to the respondent.*

Q25.86. Please indicate which Functional Area(s) applies to this milestone. Select all that apply. Impact milestones must include all Functional Areas.

*This question was not displayed to the respondent.*

Q25.87. Co

*This question was not displayed to the respondent.*

Q25.88.

### **Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Patients with Ischemic Stroke Discharged with Statin Medications

Milestone: PY3Q4

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

Q25.89. **People Functional Area**

*This question was not displayed to the respondent.*

Q25.90. Please include a brief description of the People Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

Q25.91. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*



*This question was not displayed to the respondent.*

### **Q25.92. Process Functional Area**

*This question was not displayed to the respondent.*

Q25.93. Please include a brief description of the Process Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

Q25.94. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

### **Q25.95. Technology Functional Area**

*This question was not displayed to the respondent.*

Q25.96. Please include a brief description of the Technology Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

Q25.97. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

### **Q25.98. Patient Engagement / Target Population Functional Area**

*This question was not displayed to the respondent.*

Q25.99. Please include a brief description of the Patient Engagement / Target Population Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

Q25.100. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

*This question was not displayed to the respondent.*



Q25.102.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Patients with Ischemic Stroke Discharged with Statin Medications

Milestone: PY3Q4

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

Q25.103. Provide a brief description of the milestone (no more than two sentences).

Second round of full review done by full governance structure - any required PI projects active by this time and hospital care site should be at expected targets. This means the second STK-6 compliance review completed by full governance structure with any performance improvement projects active and in place, and stakeholders/hospital care site associates required to be at target performance by this time, engagement with stakeholders for data review, and patients are receiving interventions if any were identified and planned

Q25.104. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

Supporting documentation will be meeting minutes from each of the applicable committees or hospital associate engagement; a summary of the required performance improvement plans, if applicable; a written summary of patient population engaged.



**CO L O R A D O**

Q25.106.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Patients with Ischemic Stroke Discharged with Statin Medications

Milestone: PY4Q2

Q25.107. III.B. Please answer the following questions with information related to this intervention's PY4Q2 milestone.

Q25.108.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

Continuous Improvement



**CO L O R A D O**

Q25.110.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Patients with Ischemic Stroke Discharged with Statin Medications

Milestone: PY4Q2

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Q25.111. Provide a brief description of the milestone (no more than two sentences).

Complete review of STK-6 compliance done by full governance structure. Hospital Care Sites expected to be at target performance and/or performance improvement projects in place to achieve targets and will include STK-6 compliance review completed by full governance structure with any performance improvement projects active and in place, stakeholders/hospital care site associates required to be at target performance by this time, engagement with stakeholders for data review, and patients are receiving interventions if any were identified and planned

Q25.112. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Supporting documentation will be meeting minutes from each of the applicable committees or hospital associate engagement; a summary of the required performance improvement plans, if applicable; and a written summary of patient population engaged.



Q25.114.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Patients with Ischemic Stroke Discharged with Statin Medications

Milestone: PY4Q4

Q25.115. III.B. Please answer the following questions with information related to this intervention's PY4Q4 milestone.

Q25.116.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing*

interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).

Continuous Improvement



**COLORADO**

Q25.118.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Patients with Ischemic Stroke Discharged with Statin Medications

Milestone: PY4Q4

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Q25.119. Provide a brief description of the milestone (no more than two sentences).

Complete review of STK-6 compliance done by full governance structure. All Care Sites expected to be at target performance and/or performance improvement projects in place to achieve target performance. This includes STK-6 compliance review completed by full governance structure with any performance improvement projects active and in place, stakeholders/hospital care site associates required to be at target performance by this time, engagement with stakeholders for data review, and patients are receiving interventions if any were identified and planned

Q25.120. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Supporting documentation meeting minutes from each of the applicable committees or hospital associate engagement; a summary of the required performance improvement plans, if applicable; and a written summary of patient population engaged.



**CO L O R A D O**

Q25.122.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Patients with Ischemic Stroke Discharged with Statin Medications

Milestone: PY5Q2

Q25.123. III.B. Please answer the following questions with information related to this intervention's PY5Q2 milestone.

Q25.124.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

Continuous Improvement



**CO L O R A D O**

Q25.126.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Patients with Ischemic Stroke Discharged with Statin Medications

Milestone: PY5Q2

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Q25.127. Provide a brief description of the milestone (no more than two sentences).

Complete review of STK-6 compliance done by full governance structure. All Care Sites expected to be at target performance and/or performance improvement projects in place to achieve target performance. This includes STK-6 compliance review completed by full governance structure with any performance improvement projects active and in place, stakeholders/hospital care site associates required to be at target performance by this time, engagement with stakeholders for data review Patient engagement-patients are receiving interventions if any were identified and planned

Q25.128. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Supporting documentation will be meeting minutes from each of the applicable committees or hospital associate engagement; a summary of the required performance improvement plans, if applicable; and a written summary of patient population engaged.



Q25.130.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Patients with Ischemic Stroke Discharged with Statin Medications

Milestone: PY5Q4

Q25.131. III.B. Please answer the following questions with information related to this intervention's PY5Q4 milestone.

Q25.132.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing*

interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).

Continuous Improvement



**COLORADO**

Q25.134.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Patients with Ischemic Stroke Discharged with Statin Medications

Milestone: PY5Q4

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Q25.135. Provide a brief description of the milestone (no more than two sentences).

Complete review of STK-6 compliance done by full governance structure. All Care Sites expected to be at target performance and/or performance improvement projects in place to achieve target performance. This includes STK-6 compliance done by full governance structure with all Care Sites required to be at target performance. If a Care Site is not at target performance active performance improvement plans in place with a timeline of expected target performance.

Q25.136. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Supporting documentation will be meeting minutes from each of the applicable committees or hospital associate engagement; a summary of the required performance improvement plans, if applicable; and a written summary of patient population engaged.





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Q25.138.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Patients with Ischemic Stroke Discharged with Statin Medications

This concludes the information input for this intervention's milestones. Information input for the next intervention's milestones will now begin.



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**COLORADO**

Q26.2.

**Intervention Milestones - Intervention 8**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Maternal Mental Health Collaborative

Milestone: PY2Q2

**B. Intervention Milestones**

Q26.3. III.B. Please answer the following questions with information related to this intervention's PY2Q2 milestone.

Q26.4.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

Planning and Implementation

Continuous Improvement



**COLORADO**

Q26.6.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Maternal Mental Health Collaborative

Milestone: PY2Q2

Q26.7.

Is this the impact milestone for this intervention?

*The final milestone of the Planning and Intervention Phase should be an impact milestone. If this is the impact milestone for this intervention, please keep in mind:*

- *The impact milestone should address all functional areas applicable to the intervention.*
- *The impact milestone functional area descriptions and supporting documentation should demonstrate that the intervention has been fully implemented.*

Yes

No

Q26.8. Please indicate which Functional Area(s) applies to this milestone. Select all that apply. Impact milestones must include all Functional Areas.

People

Process

Technology

Patient Engagement / Target Population



# COLORADO

Q26.10.

## **Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Maternal Mental Health Collaborative

Milestone: PY2Q2

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

## Q26.11. **People Functional Area**

Q26.12.

Please include a brief description of the People Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

People-Engagement with internal associates and clinicians that are subject matter experts in screening tools or the maternal health and maternal mental health service lines. Engagement will seek input from the users on the screening tool which is the measure objective.

Q26.13.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

People - list of internal stakeholder positions involved and summary of input

#### Q26.14. Process Functional Area

*This question was not displayed to the respondent.*

Q26.15. Please include a brief description of the Process Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

Q26.16.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

#### Q26.17. Technology Functional Area

Q26.18. Please include a brief description of the Technology Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

Technology- identify and build workflow into EHR

Q26.19.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Technology - a screenshot of screening tool in EHR

#### Q26.20. Patient Engagement / Target Population Functional Area

*This question was not displayed to the respondent.*

Q26.21. Please include a brief description of the Patient Engagement / Target Population Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

Q26.22.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

Q26.23. Co

*This question was not displayed to the respondent.*

Q26.24.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Maternal Mental Health Collaborative

Milestone: PY2Q2

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

Q26.25. Please include a brief description of the milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q26.26. Please describe the supporting documentation which will be provided in support of this milestone.

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*



**COLORADO**

Q26.28.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Maternal Mental Health Collaborative

Milestone: PY2Q4

Q26.29. III.B. Please answer the following questions with information related to this intervention's PY2Q4 milestone.

Q26.30.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

- Planning and Implementation
- Continuous Improvement



**COLORADO**

Q26.32.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Maternal Mental Health Collaborative

Milestone: PY2Q4

Q26.33.

Is this the impact milestone for this intervention?

*The final milestone of the Planning and Intervention phase should be an impact milestone. If this is the impact milestone for this intervention, please keep in mind:*

- *The impact milestone should address all functional areas applicable to the intervention.*
- *The impact milestone functional area descriptions and supporting documentation should demonstrate that the intervention has been fully implemented.*

Yes

No

Q26.34. Please indicate which Functional Area(s) applies to this milestone. Select all that apply. Impact milestones must include all Functional Areas.

People

Process

Technology

Patient Engagement / Target Population



Q26.36.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Maternal Mental Health Collaborative

Milestone: PY2Q4

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

**Q26.37. People Functional Area**

Q26.38. Please include a brief description of the People Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

People - flow and process of referrals signed off by SCL leadership and RAE

Q26.39.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

People - a diagram of flow and process of RAE referrals and signed off by SCL service line HTP leader and RAE

Q26.40. **Process Functional Area**

Q26.41.

Please include a brief description of the Process Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

Process-Flow and processed of referrals signed off by SCL Health leadership and RAE

Q26.42.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Process- supporting documentation: a diagram of flow and process of RAE referrals and signed off by SCL Health service line HTP leader and RAE.

Q26.43. **Technology Functional Area**



Q26.44. Please include a brief description of the Technology Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

Technology-RAE referral tools built

Q26.45.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Technology - a screenshot of the tool and a high level summary

#### Q26.46. Patient Engagement / Target Population Functional Area

*This question was not displayed to the respondent.*

Q26.47. Please include a brief description of the Patient Engagement / Target Population Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

Q26.48. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

Q26.49. Co

*This question was not displayed to the respondent.*

Q26.50.

#### **Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Maternal Mental Health Collaborative  
Milestone: PY2Q4

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

Q26.51. Provide a brief description of the milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q26.52.  
Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*



**COLORADO**

Q26.54.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Maternal Mental Health Collaborative

Milestone: PY3Q2

Q26.55. III.B. Please answer the following questions with information related to this intervention's PY3Q2 milestone.

Q26.56.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

- Planning and Implementation
- Continuous Improvement



**COLORADO**

Q26.58.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Maternal Mental Health Collaborative

Milestone: PY3Q2

Q26.59.

Is this the impact milestone for this intervention?

*The final milestone of the Planning and Intervention phase should be an impact milestone. If this is the impact milestone for this intervention, please keep in mind:*

- *The impact milestone should address all functional areas applicable to the intervention.*
- *The impact milestone functional area descriptions and supporting documentation should demonstrate that the intervention has been fully implemented.*

- Yes
- No

Q26.60.

Please indicate which Functional Area(s) applies to this milestone. Select all that apply. Impact milestones must include all Functional Areas.

- People
- Process
- Technology
- Patient Engagement / Target Population



# COLORADO

Q26.62.

## **Intervention Milestones**

Reporting Hospital:

Intervention: Maternal Mental Health Collaborative

Milestone: PY3Q2

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

## Q26.63. **People Functional Area**

Q26.64. Please include a brief description of the People Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

People-staff have tools to engage in process training

Q26.65.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

People - document of workflow process with list of associate positions involved in the workflow

## Q26.66. Process Functional Area

Q26.67. Please include a brief description of the Process Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone*

Process-developed patient screening tool workflow process

Q26.68.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Process - supporting documentation will be the summary of or diagram of workflow process that have been developed.

## Q26.69. Technology Functional Area

*This question was not displayed to the respondent.*

Q26.70.

Please include a brief description of the Technology Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

Q26.71. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

## Q26.72. Patient Engagement / Target Population Functional Area

*This question was not displayed to the respondent.*

Q26.73. Please include a brief description of the Patient Engagement / Target Population Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

Q26.74. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

Q26.75. Co

*This question was not displayed to the respondent.*

Q26.76.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Maternal Mental Health Collaborative

Milestone: PY3Q2

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

Q26.77. Provide a brief description of the milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q26.78. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*



**COLORADO**

Q26.80.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Maternal Mental Health Collaborative

Milestone: PY3Q4

Q26.81. III.B. Please answer the following questions with information related to this intervention's PY3Q4 milestone.

Q26.82.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

- Planning and Implementation
- Continuous Improvement



**COLORADO**

Q26.84.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Maternal Mental Health Collaborative

Milestone: PY3Q4

Q26.85. Is this the impact milestone for this intervention?

*The final milestone of the Planning and Intervention phase should be an impact milestone. If this is the impact milestone for this intervention, please keep in mind:*

- *The impact milestone should address all functional areas applicable to the intervention.*
- *The impact milestone functional area descriptions and supporting documentation should demonstrate that the intervention has been fully implemented.*

Yes

No

Q26.86. Please indicate which Functional Area(s) applies to this milestone. Select all that apply. Impact milestones must include all Functional Areas.

- People
- Process
- Technology
- Patient Engagement / Target Population



**COLORADO**

Q26.88.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Maternal Mental Health Collaborative

Milestone: PY3Q4

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Q26.89. **People Functional Area**

Q26.90. Please include a brief description of the People Functional Area for this milestone (no more than two sentences).



*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

People-staff have been trained in the previously developed process and the screening tools

Q26.91. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

People-Supporting documentation will be a list of those trained, titles only, in the workflow process and in the screening tools. The list of those trained will be signed off by the Quality and Safety Clinical Performance Improvement Industrial Engineer to certify the training happened.

**Q26.92. Process Functional Area**

Q26.93. Please include a brief description of the Process Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

Process flow has been established

Q26.94. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

Process-workflow signed off on by service line leadership

**Q26.95. Technology Functional Area**

Q26.96. Please include a brief description of the Technology Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

Technology is in place to include screening tools technology and RAE notifications

Q26.97. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Technology-screenshot demonstrating performance (screening rates and RAE notification rate)

**Q26.98. Patient Engagement / Target Population Functional Area**

Q26.99. Please include a brief description of the Patient Engagement / Target Population Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

Patients are receiving screenings according to developed process

Q26.100. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Patient engagement-rates demonstrate patients are being screened and notifications are taking place

*This question was not displayed to the respondent.*

Q26.102.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Maternal Mental Health Collaborative

Milestone: PY3Q4

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

Q26.103. Provide a brief description of the milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q26.104. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*



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**COLORADO**

Q26.106.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Maternal Mental Health Collaborative

Milestone: PY4Q2

Q26.107. III.B. Please answer the following questions with information related to this intervention's PY4Q2 milestone.

Q26.108.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

Continuous Improvement



Q26.110.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Maternal Mental Health Collaborative

Milestone: PY4Q2

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Q26.111. Provide a brief description of the milestone (no more than two sentences).

Establish a quality improvement process for reviewing performance and identifying any needed improvements create quality improvement process for review of data and identification of improvement opportunities. The process will have a health equity component to review process, data, and engagement through a health equity lens. People-identify and engage stakeholders that are key to improvement

Q26.112. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Supporting documentation will be a statement of identified quality review process and metrics reviewed; and a statement of quality/metric review process along with list of engaged stakeholders



**COLORADO**

Q26.114.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Maternal Mental Health Collaborative

Milestone: PY4Q4

Q26.115. III.B. Please answer the following questions with information related to this intervention's PY4Q4 milestone.

Q26.116.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

Continuous Improvement



**COLORADO**

Q26.118.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Maternal Mental Health Collaborative

Milestone: PY4Q4

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Q26.119. Provide a brief description of the milestone (no more than two sentences).

Monitor data and continue to identify improvement opportunities to include that meetings are taking place, QI and PI process is engaged, improvement opportunities can be identified

Q26.120. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Supporting documentation will be meeting minutes showing data review, identification of improvement opportunities; meeting minutes showing data review, identification of improvement opportunities, and stakeholders are contributing



Q26.122.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Maternal Mental Health Collaborative

Milestone: PY5Q2

Q26.123. III.B. Please answer the following questions with information related to this intervention's PY5Q2 milestone.

Q26.124.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

- Continuous Improvement



Q26.126.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Maternal Mental Health Collaborative

Milestone: PY5Q2

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Q26.127. Provide a brief description of the milestone (no more than two sentences).

Monitor data and continue to identify improvement opportunities to include that meetings are taking place, QI and PI process is engaged, improvement opportunities can be identified

Q26.128. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Supporting documentation will include meeting minutes showing data review, identification of improvement opportunities; and meeting minutes showing data review, identification of improvement opportunities, and stakeholders are contributing



**COLORADO**

Q26.130.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Maternal Mental Health Collaborative

Milestone: PY5Q4

Q26.131. III.B. Please answer the following questions with information related to this intervention's PY5Q4 milestone.

Q26.132.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

- Continuous Improvement



**COLORADO**



Q26.134.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Maternal Mental Health Collaborative

Milestone: PY5Q4

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Q26.135. Provide a brief description of the milestone (no more than two sentences).

Creation of future vision of MMH (maternal mental health) CP6 screenings and notifications work to include sustainability plan on how to leverage structure put in place over HTP years toward future vision

Q26.136. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Supporting documentation showing outline or high level attestation of sustainability plan



**COLORADO**

Q26.138.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Maternal Mental Health Collaborative

This concludes the information input for this intervention's milestones. Information input for the next intervention's milestones will now begin.



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**CO L O R A D O**

Q27.2.

**Intervention Milestones - Intervention 9**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Screening for transitions of care in Adults with Disabilities

Milestone: PY2Q2

**B. Intervention Milestones**

Q27.3. III.B. Please answer the following questions with information related to this intervention's PY2Q2 milestone.

Q27.4.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

- Planning and Implementation
- Continuous Improvement



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**CO L O R A D O**

Q27.6.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Screening for transitions of care in Adults with Disabilities

Q27.7.

Is this the impact milestone for this intervention?

*The final milestone of the Planning and Intervention Phase should be an impact milestone. If this is the impact milestone for this intervention, please keep in mind:*

- *The impact milestone should address all functional areas applicable to the intervention.*
- *The impact milestone functional area descriptions and supporting documentation should demonstrate that the intervention has been fully implemented.*

Yes

No

Q27.8. Please indicate which Functional Area(s) applies to this milestone. Select all that apply. Impact milestones must include all Functional Areas.

People

Process

Technology

Patient Engagement / Target Population



**COLORADO**

Q27.10.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Screening for transitions of care in Adults with Disabilities

Milestone: PY2Q2

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Q27.11. **People Functional Area**

*This question was not displayed to the respondent.*

Q27.12.

Please include a brief description of the People Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

Q27.13.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

#### Q27.14. **Process Functional Area**

Q27.15. Please include a brief description of the Process Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

Process-building out workflow for screening tool

Q27.16.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Process - Documented workflow process

#### Q27.17. **Technology Functional Area**

Q27.18. Please include a brief description of the Technology Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

Technology-building out a screening tool in Epic

Q27.19.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

Technology - screenshot of Epic EHR tool

**Q27.20. Patient Engagement / Target Population Functional Area**

*This question was not displayed to the respondent.*

Q27.21. Please include a brief description of the Patient Engagement / Target Population Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

Q27.22.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

*This question was not displayed to the respondent.*

Q27.23. Co

*This question was not displayed to the respondent.*

Q27.24.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Screening for transitions of care in Adults with Disabilities

Milestone: PY2Q2

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

Q27.25. Please include a brief description of the milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q27.26. Please describe the supporting documentation which will be provided in support of this milestone.

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*



**COLORADO**

Q27.28.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Screening for transitions of care in Adults with Disabilities

Milestone: PY2Q4

Q27.29. III.B. Please answer the following questions with information related to this intervention's PY2Q4 milestone.

Q27.30.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

- Planning and Implementation
- Continuous Improvement



**COLORADO**

Q27.32.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Screening for transitions of care in Adults with Disabilities

Milestone: PY2Q4

Q27.33.

Is this the impact milestone for this intervention?

*The final milestone of the Planning and Intervention phase should be an impact milestone. If this is the impact milestone for this intervention, please keep in mind:*

- *The impact milestone should address all functional areas applicable to the intervention.*
- *The impact milestone functional area descriptions and supporting documentation should demonstrate that the intervention has been fully implemented.*

- Yes
- No

Q27.34. Please indicate which Functional Area(s) applies to this milestone. Select all that apply. Impact milestones must include all Functional Areas.

- People
- Process
- Technology
- Patient Engagement / Target Population



# COLORADO

Q27.36.

## **Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Screening for transitions of care in Adults with Disabilities

Milestone: PY2Q4

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

## Q27.37. **People Functional Area**

Q27.38. Please include a brief description of the People Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

People-All screening tool users and stakeholders in the measure work and performance will be trained in the workflow process and EHR tool

Q27.39.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

People - supporting documentation will be a list of those that were trained in the workflow process and EHR tool. The list will include titles of the positions only.

## Q27.40. **Process Functional Area**



Q27.41.

Please include a brief description of the Process Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

Process-there has been a workflow process developed for the screening tool and training material for the process has been created.

Q27.42.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Process - supporting documentation will be the material that was created to support the training of the developed workflow process. The material will show a process has been created.

### Q27.43. Technology Functional Area

*This question was not displayed to the respondent.*

Q27.44. Please include a brief description of the Technology Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

Q27.45.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

### Q27.46. Patient Engagement / Target Population Functional Area

*This question was not displayed to the respondent.*

Q27.47. Please include a brief description of the Patient Engagement / Target Population Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

Q27.48. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

*This question was not displayed to the respondent.*

Q27.49. Co

*This question was not displayed to the respondent.*

Q27.50.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Screening for transitions of care in Adults with Disabilities

Milestone: PY2Q4

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

*This question was not displayed to the respondent.*

Q27.51. Provide a brief description of the milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q27.52.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

*This question was not displayed to the respondent.*



**COLORADO**

Q27.54.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Screening for transitions of care in Adults with Disabilities

Milestone: PY3Q2

Q27.55. III.B. Please answer the following questions with information related to this intervention's PY3Q2 milestone.

Q27.56.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

Planning and Implementation

Continuous Improvement



**COLORADO**

Q27.58.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Screening for transitions of care in Adults with Disabilities

Milestone: PY3Q2

Q27.59.

Is this the impact milestone for this intervention?

*The final milestone of the Planning and Intervention phase should be an impact milestone. If this is the impact milestone for this intervention, please keep in mind:*

- The impact milestone should address all functional areas applicable to the intervention.*
- The impact milestone functional area descriptions and supporting documentation should demonstrate that the intervention has been fully implemented.*

Yes

No

Q27.60.

Please indicate which Functional Area(s) applies to this milestone. Select all that apply. Impact milestones must include all Functional Areas.

- People
- Process
- Technology
- Patient Engagement / Target Population



**COLORADO**

Q27.62.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Screening for transitions of care in Adults with Disabilities

Milestone: PY3Q2

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Q27.63. **People Functional Area**

*This question was not displayed to the respondent.*

Q27.64. Please include a brief description of the People Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

Q27.65.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

*This question was not displayed to the respondent.*

#### **Q27.66. Process Functional Area**

*This question was not displayed to the respondent.*

Q27.67. Please include a brief description of the Process Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone*

*This question was not displayed to the respondent.*

Q27.68.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

*This question was not displayed to the respondent.*

#### **Q27.69. Technology Functional Area**

Q27.70.

Please include a brief description of the Technology Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

Technology-build out process or mechanism for identifying patients living with disabilities

Q27.71. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

Technology - supporting documentation will be a written explanation of the criteria used to identify disabled patients, explanation of how the mechanism captures the patient's disability status. Additional documentation will be a screenshot of the EHR coding or diagram of the process. Summary of steps to develop the data extraction of the logic in the EHR to identify the patient population.

## Q27.72. Patient Engagement / Target Population Functional Area

*This question was not displayed to the respondent.*

Q27.73. Please include a brief description of the Patient Engagement / Target Population Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

Q27.74. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

## Q27.75. Co

*This question was not displayed to the respondent.*

Q27.76.

### **Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Screening for transitions of care in Adults with Disabilities

Milestone: PY3Q2

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

Q27.77. Provide a brief description of the milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q27.78. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*



**COLORADO**

Q27.80.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Screening for transitions of care in Adults with Disabilities

Milestone: PY3Q4

Q27.81. III.B. Please answer the following questions with information related to this intervention's PY3Q4 milestone.

Q27.82.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

- Planning and Implementation
- Continuous Improvement



**COLORADO**

Q27.84.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Screening for transitions of care in Adults with Disabilities

Milestone: PY3Q4

Q27.85. Is this the impact milestone for this intervention?

*The final milestone of the Planning and Intervention phase should be an impact milestone. If this is the impact milestone for this intervention, please keep in mind:*

- *The impact milestone should address all functional areas applicable to the intervention.*
- *The impact milestone functional area descriptions and supporting documentation should demonstrate that the intervention has been fully implemented.*

Yes

No

Q27.86. Please indicate which Functional Area(s) applies to this milestone. Select all that apply. Impact milestones must include all Functional Areas.

- People
- Process
- Technology
- Patient Engagement / Target Population



**COLORADO**

Q27.88.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Screening for transitions of care in Adults with Disabilities

Milestone: PY3Q4

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*



## Q27.89. People Functional Area

Q27.90. Please include a brief description of the People Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

People-staff are trained in EHR tool and are able to perform screenings

Q27.91. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

People - supporting documentation will be a list of titles of the associates that are performing the screenings to display that internal people are engaged in the measure screenings.

## Q27.92. Process Functional Area

Q27.93. Please include a brief description of the Process Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

Process-jobs aid are created for the workflow process that was previously built out. The job aids assist the screeners in using the process and tools as they have now been developed.

Q27.94. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Process - supporting documentation includes a copy of the job aids created.

**Q27.95. Technology Functional Area**

Q27.96. Please include a brief description of the Technology Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

Technology-measure patient population identification is in place and Care Managers are able to identify patients for screenings in real time, Epic EHR tool is being used

Q27.97. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

Technology - documentation showing pull of performance numbers

**Q27.98. Patient Engagement / Target Population Functional Area**

Q27.99. Please include a brief description of the Patient Engagement / Target Population Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

Patient Engagement-disabled patients are receiving screening for transition of care supports

Q27.100. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

Patient engagement - documentation showing pull of performance numbers indicating patients are receiving TOC screening

Q27.101. Co

*This question was not displayed to the respondent.*

Q27.102.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Screening for transitions of care in Adults with Disabilities

Milestone: PY3Q4

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

*This question was not displayed to the respondent.*

Q27.103. Provide a brief description of the milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q27.104. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

*This question was not displayed to the respondent.*



Q27.106.

### Intervention Milestones

Reporting Hospital: Good Samaritan Medical Center

Intervention: Screening for transitions of care in Adults with Disabilities

Milestone: PY4Q2

Q27.107. III.B. Please answer the following questions with information related to this intervention's PY4Q2 milestone.

Q27.108.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

Continuous Improvement



**COLORADO**

Q27.110.

### Intervention Milestones

Reporting Hospital: Good Samaritan Medical Center

Intervention: Screening for transitions of care in Adults with Disabilities

Milestone: PY4Q2

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Q27.111. Provide a brief description of the milestone (no more than two sentences).

Establish a quality improvement process for reviewing performance and identifying any needed improvements. Additionally the review of data and improvement process will look at measure performance through a health equity lens to identify disparities based on race, ethnicity, gender, and other demographic variables.

Q27.112. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

Supporting documentation will be a summary of the quality improvement tool or process to be used with defined metrics



Q27.114.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Screening for transitions of care in Adults with Disabilities

Milestone: PY4Q4

Q27.115. III.B. Please answer the following questions with information related to this intervention's PY4Q4 milestone.

Q27.116.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

- Continuous Improvement



**COLORADO**

Q27.118.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Screening for transitions of care in Adults with Disabilities

Milestone: PY4Q4

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Q27.119. Provide a brief description of the milestone (no more than two sentences).

Monitor data and continue to identify improvement opportunities. This work includes identify stakeholders to be engaged in data review and quality improvement process and set cadence for performance review

Q27.120. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Supporting documentation will be a list of stakeholders involved in process; an outline of meeting cadence, and meeting minutes identifying data review occurred with identification of improvement opportunities as applicable



**COLORADO**

Q27.122.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Screening for transitions of care in Adults with Disabilities

Milestone: PY5Q2

Q27.123. III.B. Please answer the following questions with information related to this intervention's PY5Q2 milestone.

Q27.124.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

- Continuous Improvement



**COLORADO**

Q27.126.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Screening for transitions of care in Adults with Disabilities

Milestone: PY5Q2

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Q27.127. Provide a brief description of the milestone (no more than two sentences).

Monitor data and improvements made from opportunities identified, and performance review using data

Q27.128. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

Supporting documentation of meeting minutes which will include metrics that were decided on and payor deviation analysis for any deviations between payor sources, and if applicable documentation of quality improvement opportunities



**COLORADO**

Q27.130.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Screening for transitions of care in Adults with Disabilities

Milestone: PY5Q4

Q27.131. III.B. Please answer the following questions with information related to this intervention's PY5Q4 milestone.

Q27.132.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

Continuous Improvement





# COLORADO

Q27.134.

## **Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Screening for transitions of care in Adults with Disabilities

Milestone: PY5Q4

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Q27.135. Provide a brief description of the milestone (no more than two sentences).

Future vision of transitions of care (TOC) of adults with disabilities screening work to include sustainability plan on how to leverage structure put in place over HTP years toward future vision.

Q27.136. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Supporting documentation of outline or high level attestation of sustainability plan



**COLORADO**

Q27.138.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Screening for transitions of care in Adults with Disabilities

This concludes the information input for this intervention's milestones. Information input for the next intervention's milestones will now begin.



**COLORADO**

Q28.2.

**Intervention Milestones - Intervention 10**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Telehealth Implementation and Expansion

Milestone: PY2Q2

**B. Intervention Milestones**

Q28.3. III.B. Please answer the following questions with information related to this intervention's PY2Q2 milestone.

Q28.4.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

Planning and Implementation

Continuous Improvement



Q28.6.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Telehealth Implementation and Expansion

Milestone: PY2Q2

Q28.7.

Is this the impact milestone for this intervention?

*The final milestone of the Planning and Intervention Phase should be an impact milestone. If this is the impact milestone for this intervention, please keep in mind:*

- *The impact milestone should address all functional areas applicable to the intervention.*
- *The impact milestone functional area descriptions and supporting documentation should demonstrate that the intervention has been fully implemented.*

Yes

No

Q28.8. Please indicate which Functional Area(s) applies to this milestone. Select all that apply. Impact milestones must include all Functional Areas.

People

Process

Technology

Patient Engagement / Target Population



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Q28.10.

## **Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Telehealth Implementation and Expansion

Milestone: PY2Q2

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

## Q28.11. **People Functional Area**

*This question was not displayed to the respondent.*

Q28.12.

Please include a brief description of the People Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

Q28.13.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

## Q28.14. **Process Functional Area**

Q28.15. Please include a brief description of the Process Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

Process- create a process in which System's Virtual Health Dept. and Hospital Care Site can engage to generate ideas for telemedicine interventions done through a gap analysis of patient needs and cost inefficiencies

Q28.16.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Process - Documentation of gap analysis and list of ideas from hospital care site

**Q28.17. Technology Functional Area**

*This question was not displayed to the respondent.*

Q28.18. Please include a brief description of the Technology Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

Q28.19.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

**Q28.20. Patient Engagement / Target Population Functional Area**

*This question was not displayed to the respondent.*

Q28.21. Please include a brief description of the Patient Engagement / Target Population Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

Q28.22.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

*This question was not displayed to the respondent.*

Q28.23. Co

*This question was not displayed to the respondent.*

Q28.24.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center  
Intervention: Telehealth Implementation and Expansion  
Milestone: PY2Q2

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

*This question was not displayed to the respondent.*

Q28.25. Please include a brief description of the milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q28.26. Please describe the supporting documentation which will be provided in support of this milestone.

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

*This question was not displayed to the respondent.*



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Q28.28.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center  
Intervention: Telehealth Implementation and Expansion

Q28.29. III.B. Please answer the following questions with information related to this intervention's PY2Q4 milestone.

Q28.30.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

- Planning and Implementation
- Continuous Improvement



Q28.32.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Telehealth Implementation and Expansion

Milestone: PY2Q4

Q28.33.

Is this the impact milestone for this intervention?

*The final milestone of the Planning and Intervention phase should be an impact milestone. If this is the impact milestone for this intervention, please keep in mind:*

- The impact milestone should address all functional areas applicable to the intervention.*
- The impact milestone functional area descriptions and supporting documentation should demonstrate that the intervention has been fully implemented.*

- Yes
- No

Q28.34. Please indicate which Functional Area(s) applies to this milestone. Select all that apply. Impact milestones must include all Functional Areas.

- People
- Process
- Technology
- Patient Engagement / Target Population



**COLORADO**

Q28.36.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Telehealth Implementation and Expansion

Milestone: PY2Q4

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

**Q28.37. People Functional Area**

Q28.38. Please include a brief description of the People Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

People-Cross functional teams that are responsible for vetting telehealth ideas through the SCL Health system are engaged and reviewing telehealth ideas that came out of previous milestones.

Q28.39.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*



People - supporting documentation will include a list of those involved in the cross-functional teams to vet telehealth ideas through the SCL Health system process. List will include titles only.

#### Q28.40. **Process Functional Area**

Q28.41.

Please include a brief description of the Process Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

Process-vetting triage process of telemedicine ideas

Q28.42.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Process - Diagram showing triage process and documentation detailing outcome

#### Q28.43. **Technology Functional Area**

*This question was not displayed to the respondent.*

Q28.44. Please include a brief description of the Technology Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

Q28.45.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

#### **Q28.46. Patient Engagement / Target Population Functional Area**

*This question was not displayed to the respondent.*

Q28.47. Please include a brief description of the Patient Engagement / Target Population Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

Q28.48. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

#### **Q28.49. Co**

*This question was not displayed to the respondent.*

Q28.50.

#### **Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Telehealth Implementation and Expansion

Milestone: PY2Q4

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

Q28.51. Provide a brief description of the milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q28.52.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*



**COLORADO**

Q28.54.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Telehealth Implementation and Expansion

Milestone: PY3Q2

Q28.55. III.B. Please answer the following questions with information related to this intervention's PY3Q2 milestone.

Q28.56.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

- Planning and Implementation
- Continuous Improvement



**COLORADO**

Q28.58.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Telehealth Implementation and Expansion

Milestone: PY3Q2

Q28.59.

Is this the impact milestone for this intervention?

*The final milestone of the Planning and Intervention phase should be an impact milestone. If this is the impact milestone for this intervention, please keep in mind:*

- *The impact milestone should address all functional areas applicable to the intervention.*
- *The impact milestone functional area descriptions and supporting documentation should demonstrate that the intervention has been fully implemented.*

Yes

No

Q28.60.

Please indicate which Functional Area(s) applies to this milestone. Select all that apply. Impact milestones must include all Functional Areas.

People

Process

Technology

Patient Engagement / Target Population



Q28.62.

### **Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Telehealth Implementation and Expansion

Milestone: PY3Q2

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Q28.63. **People Functional Area**

Q28.64. Please include a brief description of the People Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

People-Service line associates and clinicians are engaged to bring telehealth ideas that were identified and approved in the cross-functional vetting committee, to implementation.

Q28.65.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

People - supporting documentation will be a list of those engaged in the implementation process within the service line, by titles.

#### Q28.66. **Process Functional Area**

Q28.67. Please include a brief description of the Process Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone*

Process-build out a process for new interventions. Job aids are already developed

Q28.68.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Process - supporting documentation will be a high level service summary for each telemedicine service that has been developed for implementation.

## Q28.69. Technology Functional Area

Q28.70.

Please include a brief description of the Technology Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

Technology-have technology in place for intervention performance

Q28.71. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Technology - supporting documentation will be to have a high level summary of the technology for each intervention implementation

## Q28.72. Patient Engagement / Target Population Functional Area

*This question was not displayed to the respondent.*

Q28.73. Please include a brief description of the Patient Engagement / Target Population Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

Q28.74. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

Q28.75. Co

*This question was not displayed to the respondent.*

Q28.76.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center  
Intervention: Telehealth Implementation and Expansion  
Milestone: PY3Q2

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

Q28.77. Provide a brief description of the milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q28.78. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*



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**COLORADO**

Q28.80.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center  
Intervention: Telehealth Implementation and Expansion  
Milestone: PY3Q4

Q28.81. III.B. Please answer the following questions with information related to this intervention's PY3Q4 milestone.

Q28.82.

What phase does this milestone fall under?

Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).

- Planning and Implementation
- Continuous Improvement



**COLORADO**

Q28.84.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Telehealth Implementation and Expansion

Milestone: PY3Q4

Q28.85. Is this the impact milestone for this intervention?

*The final milestone of the Planning and Intervention phase should be an impact milestone. If this is the impact milestone for this intervention, please keep in mind:*

- *The impact milestone should address all functional areas applicable to the intervention.*
- *The impact milestone functional area descriptions and supporting documentation should demonstrate that the intervention has been fully implemented.*

- Yes
- No

Q28.86. Please indicate which Functional Area(s) applies to this milestone. Select all that apply. Impact milestones must include all Functional Areas.

- People
- Process
- Technology
- Patient Engagement / Target Population





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Q28.88.

## **Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Telehealth Implementation and Expansion

Milestone: PY3Q4

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

## **Q28.89. People Functional Area**

Q28.90. Please include a brief description of the People Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

People- staff are using telemedicine intervention and are trained on process and are able to deliver telemedicine.

Q28.91. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

People - supporting documentation will be a performance count report indicating the intervention/s are implemented as in order to implement, associates have to be engaged with the intervention/s to implement it. By nature of having an intervention/s count, it shows that associates are engaged in the intervention/s.

## **Q28.92. Process Functional Area**

Q28.93. Please include a brief description of the Process Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

Process-there is a process in place for telemedicine intervention.

Q28.94. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Process - supporting documentation will be a final process workflow

#### Q28.95. **Technology Functional Area**

Q28.96. Please include a brief description of the Technology Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

Technology- appropriate equipment and platforms deployed to support telemedicine needs.

Q28.97. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Technology - technology supporting documentation is a high level summary of the technology that is in place for each intervention and a screenshot of the intervention count under that intervention. This will show that the technology in place is being used for a care delivery service and there is a count of the times it was used.

## Q28.98. Patient Engagement / Target Population Functional Area

Q28.99. Please include a brief description of the Patient Engagement / Target Population Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

Patient engagement-patients are engaged in telemedicine interventions and are receiving care via telemedicine

Q28.100. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Patient engagement - supporting documentation will be a performance summary report showing a numerator and denominator for measure performance. This shows that patients are engaged as there is a count on the number of patients that received the intervention.

Q28.101. Co

*This question was not displayed to the respondent.*

Q28.102.

### **Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Telehealth Implementation and Expansion

Milestone: PY3Q4

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

Q28.103. Provide a brief description of the milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q28.104. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*



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Q28.106.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center  
Intervention: Telehealth Implementation and Expansion  
Milestone: PY4Q2

Q28.107. III.B. Please answer the following questions with information related to this intervention's PY4Q2 milestone.

Q28.108.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

- Continuous Improvement



**COLORADO**

Q28.110.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center  
Intervention: Telehealth Implementation and Expansion  
Milestone: PY4Q2

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Q28.111. Provide a brief description of the milestone (no more than two sentences).

Routine meetings between Hospital Care site and System's Virtual Health Department for continual feedback on how build out services are performing for patient, clinician, and service line. Analysis and continual review of new potential telemedicine service ideas to implement and expand telehealth at SCL Health hospital care site. This work means that there is a formal process in place to identify improvement opportunities that includes continual communication and quality improvement forum meetings between hospital care sites and System's Virtual Health Dept. Part of this process will be to include analysis using a health equity lens to determine disparities based on race, ethnicity, gender, and other demographic variables. Associates and applicable services lines are engaged in continual meeting process, and continual quality improvement technology check-in with service lines impacted by telemedicine services.

Q28.112. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Supporting documentation of cadence for quality improvement forum meetings; a list of associates and clinicians committed to the process and new ideas that arise and will go through triage process; and documentation of technology review component in meeting minutes



**COLORADO**

Q28.114.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center  
Intervention: Telehealth Implementation and Expansion  
Milestone: PY4Q4

Q28.115. III.B. Please answer the following questions with information related to this intervention's PY4Q4 milestone.

Q28.116.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

Continuous Improvement



Q28.118.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Telehealth Implementation and Expansion

Milestone: PY4Q4

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Q28.119. Provide a brief description of the milestone (no more than two sentences).

Routine meetings between Hospital Care site and System's Virtual Health Department for intervention feedback and analysis and continual review of new potential telemedicine interventions. This work includes the process of quality improvement forum meetings are still in place, scheduled, and continual communication is happening between hospital care sites and System's Virtual Health Dept. Associates and applicable services lines are engaged and attending meetings to provide feedback, engage in gap analyses, and any new telemedicine ideas are identified and documented for triage process, and continual quality improvement technology check-ins through quality improvement forum meetings with service lines impacted by telemedicine interventions.

Q28.120. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Supporting documentation will include meeting minutes for quality improvement forum meetings, a list of associates and clinicians that attended and any new ideas that arise that will go through triage process; and documented review of technology feedback in meeting minutes and any action items



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Q28.122.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Telehealth Implementation and Expansion

Milestone: PY5Q2

Q28.123. III.B. Please answer the following questions with information related to this intervention's PY5Q2 milestone.

Q28.124.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

Continuous Improvement



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Q28.126.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center  
Intervention: Telehealth Implementation and Expansion  
Milestone: PY5Q2

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Q28.127. Provide a brief description of the milestone (no more than two sentences).

Routine meetings between Hospital Care site and System's Virtual Health Department for intervention feedback and analysis and continual review of new potential telemedicine interventions. This includes a process of quality improvement forum meetings are still in place, scheduled, and continual communication is happening between hospital care sites and System's Virtual Health Dept. Associates and applicable services lines are engaged and attending meetings to provide feedback, engage in gap analyses, and any new telemedicine ideas are identified and documented for triage process, and a continual quality improvement technology check-ins through quality improvement forum meetings with service lines impacted by telemedicine interventions.

Q28.128. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Supporting documentation will include meeting minutes for quality improvement forum meetings; a list of associates and clinicians that attended and any new ideas that arise that will go through triage process; and documented review of technology feedback in meeting minutes and any action items



**COLORADO**

Q28.130.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center  
Intervention: Telehealth Implementation and Expansion  
Milestone: PY5Q4

Q28.131. III.B. Please answer the following questions with information related to this intervention's PY5Q4 milestone.



Q28.132.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

Continuous Improvement



Q28.134.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center  
Intervention: Telehealth Implementation and Expansion  
Milestone: PY5Q4

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Q28.135. Provide a brief description of the milestone (no more than two sentences).

Routine meetings between Hospital Care site and System's Virtual Health Department for intervention feedback and analysis and continual review of new potential telemedicine interventions. This includes the process of quality improvement forum meetings are still in place, scheduled, and continual communication is happening between hospital care sites and System's Virtual Health Dept. Associates and applicable services lines are engaged and attending meetings to provide feedback, engage in gap analyses, and any new telemedicine ideas are identified and documented for triage process, and a continual quality improvement technology check-ins through quality improvement forum meetings with service lines impacted by telemedicine interventions.

Q28.136. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

Supporting documentation will include meeting minutes for quality improvement forum meetings; A list of associates and clinicians that attended and any new ideas that arise that will go through triage process; and documented review of technology feedback in meeting minutes and any action items



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Q28.138.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: Telehealth Implementation and Expansion

This concludes the information input for this intervention's milestones. Information input for the next intervention's milestones will now begin.

Q29.1. Co

*This question was not displayed to the respondent.*

Q29.2.

**Intervention Milestones - Intervention 11**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY2Q2

**B. Intervention Milestones**

*This question was not displayed to the respondent.*

Q29.3. III.B. Please answer the following questions with information related to this intervention's PY2Q2 milestone.

*This question was not displayed to the respondent.*

Q29.4.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting*

*This question was not displayed to the respondent.*

Q29.5. Co

*This question was not displayed to the respondent.*

Q29.6.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY2Q2

*This question was not displayed to the respondent.*

Q29.7.

Is this the impact milestone for this intervention?

*The final milestone of the Planning and Intervention Phase should be an impact milestone. If this is the impact milestone for this intervention, please keep in mind:*

- The impact milestone should address all functional areas applicable to the intervention.*
- The impact milestone functional area descriptions and supporting documentation should demonstrate that the intervention has been fully implemented.*

*This question was not displayed to the respondent.*

Q29.8. Please indicate which Functional Area(s) applies to this milestone. Select all that apply. Impact milestones must include all Functional Areas.

*This question was not displayed to the respondent.*

Q29.9. Co

*This question was not displayed to the respondent.*

Q29.10.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY2Q2

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

### **Q29.11. People Functional Area**

*This question was not displayed to the respondent.*

### **Q29.12.**

Please include a brief description of the People Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

### **Q29.13.**

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

### **Q29.14. Process Functional Area**

*This question was not displayed to the respondent.*

**Q29.15.** Please include a brief description of the Process Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

### **Q29.16.**

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

### **Q29.17. Technology Functional Area**

*This question was not displayed to the respondent.*

**Q29.18.** Please include a brief description of the Technology Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

Q29.19.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

Q29.20. **Patient Engagement / Target Population Functional Area**

*This question was not displayed to the respondent.*

Q29.21. Please include a brief description of the Patient Engagement / Target Population Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

Q29.22.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

Q29.23. Co

*This question was not displayed to the respondent.*

Q29.24.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY2Q2

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

Q29.25. Please include a brief description of the milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q29.26. Please describe the supporting documentation which will be provided in support of this milestone. *Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

*This question was not displayed to the respondent.*

Q29.27. Co

*This question was not displayed to the respondent.*

Q29.28.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY2Q4

*This question was not displayed to the respondent.*

Q29.29. III.B. Please answer the following questions with information related to this intervention's PY2Q4 milestone.

*This question was not displayed to the respondent.*

Q29.30.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

*This question was not displayed to the respondent.*

Q29.31. Co

*This question was not displayed to the respondent.*

Q29.32.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY2Q4

*This question was not displayed to the respondent.*

Q29.33.

Is this the impact milestone for this intervention?

The final milestone of the Planning and Intervention phase should be an impact milestone. If this is the impact milestone for this intervention, please keep in mind:

- The impact milestone should address all functional areas applicable to the intervention.
- The impact milestone functional area descriptions and supporting documentation should demonstrate that the intervention has been fully implemented.

*This question was not displayed to the respondent.*

Q29.34. Please indicate which Functional Area(s) applies to this milestone. Select all that apply. Impact milestones must include all Functional Areas.

*This question was not displayed to the respondent.*

Q29.35. Co

*This question was not displayed to the respondent.*

Q29.36.

### **Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY2Q4

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

Q29.37. **People Functional Area**

*This question was not displayed to the respondent.*

Q29.38. Please include a brief description of the People Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

Q29.39.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

#### **Q29.40. Process Functional Area**

*This question was not displayed to the respondent.*

#### **Q29.41.**

Please include a brief description of the Process Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

#### **Q29.42.**

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

#### **Q29.43. Technology Functional Area**

*This question was not displayed to the respondent.*

**Q29.44.** Please include a brief description of the Technology Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

#### **Q29.45.**

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

#### **Q29.46. Patient Engagement / Target Population Functional Area**

*This question was not displayed to the respondent.*

**Q29.47.** Please include a brief description of the Patient Engagement / Target Population Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*



Q29.48. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

*This question was not displayed to the respondent.*

Q29.49. Co

*This question was not displayed to the respondent.*

Q29.50.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY2Q4

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

*This question was not displayed to the respondent.*

Q29.51. Provide a brief description of the milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q29.52.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

*This question was not displayed to the respondent.*

Q29.53. Co

*This question was not displayed to the respondent.*

Q29.54.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY3Q2

*This question was not displayed to the respondent.*

Q29.55. III.B. Please answer the following questions with information related to this intervention's PY3Q2 milestone.

*This question was not displayed to the respondent.*

Q29.56.  
What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

*This question was not displayed to the respondent.*

Q29.57. Co

*This question was not displayed to the respondent.*

Q29.58.  
**Intervention Milestones**  
Reporting Hospital: Good Samaritan Medical Center  
Intervention: NA  
Milestone: PY3Q2

*This question was not displayed to the respondent.*

Q29.59.  
Is this the impact milestone for this intervention?  
*The final milestone of the Planning and Intervention phase should be an impact milestone. If this is the impact milestone for this intervention, please keep in mind:*

- The impact milestone should address all functional areas applicable to the intervention.*
- The impact milestone functional area descriptions and supporting documentation should demonstrate that the intervention has been fully implemented.*

*This question was not displayed to the respondent.*

Q29.60.  
Please indicate which Functional Area(s) applies to this milestone. Select all that apply. Impact milestones must include all Functional Areas.

*This question was not displayed to the respondent.*

Q29.61. Co

*This question was not displayed to the respondent.*

Q29.62.

## **Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY3Q2

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

### **Q29.63. People Functional Area**

*This question was not displayed to the respondent.*

Q29.64. Please include a brief description of the People Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

Q29.65.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

### **Q29.66. Process Functional Area**

*This question was not displayed to the respondent.*

Q29.67. Please include a brief description of the Process Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone*

*This question was not displayed to the respondent.*

Q29.68.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

### Q29.69. **Technology Functional Area**

*This question was not displayed to the respondent.*

### Q29.70.

Please include a brief description of the Technology Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

Q29.71. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

### Q29.72. **Patient Engagement / Target Population Functional Area**

*This question was not displayed to the respondent.*

Q29.73. Please include a brief description of the Patient Engagement / Target Population Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

Q29.74. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

### Q29.75. Co

*This question was not displayed to the respondent.*

### Q29.76.

#### **Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY3Q2

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

Q29.77. Provide a brief description of the milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q29.78. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

Q29.79. Co

*This question was not displayed to the respondent.*

Q29.80.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY3Q4

*This question was not displayed to the respondent.*

Q29.81. III.B. Please answer the following questions with information related to this intervention's PY3Q4 milestone.

*This question was not displayed to the respondent.*

Q29.82.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

*This question was not displayed to the respondent.*

Q29.83. Co

*This question was not displayed to the respondent.*

Q29.84.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY3Q4

*This question was not displayed to the respondent.*

Q29.85. Is this the impact milestone for this intervention?

*The final milestone of the Planning and Intervention phase should be an impact milestone. If this is the impact milestone for this intervention, please keep in mind:*

- The impact milestone should address all functional areas applicable to the intervention.*
- The impact milestone functional area descriptions and supporting documentation should demonstrate that the intervention has been fully implemented.*

*This question was not displayed to the respondent.*

Q29.86. Please indicate which Functional Area(s) applies to this milestone. Select all that apply. Impact milestones must include all Functional Areas.

*This question was not displayed to the respondent.*

Q29.87. Co

*This question was not displayed to the respondent.*

Q29.88.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY3Q4

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

Q29.89. **People Functional Area**

*This question was not displayed to the respondent.*

Q29.90. Please include a brief description of the People Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

Q29.91. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

*This question was not displayed to the respondent.*

#### **Q29.92. Process Functional Area**

*This question was not displayed to the respondent.*

Q29.93. Please include a brief description of the Process Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

Q29.94. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

*This question was not displayed to the respondent.*

#### **Q29.95. Technology Functional Area**

*This question was not displayed to the respondent.*

Q29.96. Please include a brief description of the Technology Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

Q29.97. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

*This question was not displayed to the respondent.*

## Q29.98. Patient Engagement / Target Population Functional Area

*This question was not displayed to the respondent.*

Q29.99. Please include a brief description of the Patient Engagement / Target Population Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

Q29.100. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

Q29.101. Co

*This question was not displayed to the respondent.*

Q29.102.

### **Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY3Q4

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

Q29.103. Provide a brief description of the milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q29.104. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

Q29.105. Co



*This question was not displayed to the respondent.*

Q29.106.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY4Q2

*This question was not displayed to the respondent.*

Q29.107. III.B. Please answer the following questions with information related to this intervention's PY4Q2 milestone.

*This question was not displayed to the respondent.*

Q29.108.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

*This question was not displayed to the respondent.*

Q29.109. Co

*This question was not displayed to the respondent.*

Q29.110.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY4Q2

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

Q29.111. Provide a brief description of the milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q29.112. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

*This question was not displayed to the respondent.*

Q29.113. Co

*This question was not displayed to the respondent.*

Q29.114.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY4Q4

*This question was not displayed to the respondent.*

Q29.115. III.B. Please answer the following questions with information related to this intervention's PY4Q4 milestone.

*This question was not displayed to the respondent.*

Q29.116.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

*This question was not displayed to the respondent.*

Q29.117. Co

*This question was not displayed to the respondent.*

Q29.118.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY4Q4

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

*This question was not displayed to the respondent.*

Q29.119. Provide a brief description of the milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q29.120. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

Q29.121. Co

*This question was not displayed to the respondent.*

Q29.122.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY5Q2

*This question was not displayed to the respondent.*

Q29.123. III.B. Please answer the following questions with information related to this intervention's PY5Q2 milestone.

*This question was not displayed to the respondent.*

Q29.124.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

*This question was not displayed to the respondent.*

Q29.125. Co

*This question was not displayed to the respondent.*

Q29.126.

### **Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY5Q2

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

Q29.127. Provide a brief description of the milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q29.128. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

Q29.129. Co

*This question was not displayed to the respondent.*

Q29.130.

### **Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY5Q4

*This question was not displayed to the respondent.*

Q29.131. III.B. Please answer the following questions with information related to this intervention's PY5Q4 milestone.

*This question was not displayed to the respondent.*

Q29.132.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

*This question was not displayed to the respondent.*

Q29.133. Co

*This question was not displayed to the respondent.*

Q29.134.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY5Q4

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

Q29.135. Provide a brief description of the milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q29.136. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

Q29.137. Co

*This question was not displayed to the respondent.*

Q29.138.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

This concludes the information input for this intervention's milestones. Information input for the next intervention's milestones will now begin.

*This question was not displayed to the respondent.*

Q5939. Co

*This question was not displayed to the respondent.*

Q5940.

## Intervention Milestones - Intervention 12

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY2Q2

### B. Intervention Milestones

*This question was not displayed to the respondent.*

Q5941. III.B. Please answer the following questions with information related to this intervention's PY2Q2 milestone.

*This question was not displayed to the respondent.*

Q5942.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

*This question was not displayed to the respondent.*

Q5943. Co

*This question was not displayed to the respondent.*

Q5944.

### Intervention Milestones

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY2Q2

*This question was not displayed to the respondent.*

Q5945.

Is this the impact milestone for this intervention?

*The final milestone of the Planning and Intervention Phase should be an impact milestone. If this is the impact milestone for this intervention, please keep in mind:*

- The impact milestone should address all functional areas applicable to the intervention.*
- The impact milestone functional area descriptions and supporting documentation should demonstrate that the intervention has been fully implemented.*

*This question was not displayed to the respondent.*

Q5946. Please indicate which Functional Area(s) applies to this milestone. Select all that apply. Impact milestones must include all Functional Areas.

*This question was not displayed to the respondent.*

Q5947. Co

*This question was not displayed to the respondent.*

Q5948.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY2Q2

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

Q5949. **People Functional Area**

*This question was not displayed to the respondent.*

Q5950.

Please include a brief description of the People Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

Q5951.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

Q5952. **Process Functional Area**

*This question was not displayed to the respondent.*

Q5953. Please include a brief description of the Process Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

Q5954.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

*This question was not displayed to the respondent.*

**Q5955. Technology Functional Area**

*This question was not displayed to the respondent.*

Q5956. Please include a brief description of the Technology Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

Q5957.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

*This question was not displayed to the respondent.*

**Q5958. Patient Engagement / Target Population Functional Area**

*This question was not displayed to the respondent.*

Q5959. Please include a brief description of the Patient Engagement / Target Population Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

Q5960.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

*This question was not displayed to the respondent.*

Q5961. Co



*This question was not displayed to the respondent.*

Q5962.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY2Q2

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

Q5963. Please include a brief description of the milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q5964. Please describe the supporting documentation which will be provided in support of this milestone.

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

Q5965. Co

*This question was not displayed to the respondent.*

Q5966.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY2Q4

*This question was not displayed to the respondent.*

Q5967. III.B. Please answer the following questions with information related to this intervention's PY2Q4 milestone.

*This question was not displayed to the respondent.*

Q5968.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting*

Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).

*This question was not displayed to the respondent.*

Q5969. Co

*This question was not displayed to the respondent.*

Q5970.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY2Q4

*This question was not displayed to the respondent.*

Q5971.

Is this the impact milestone for this intervention?

*The final milestone of the Planning and Intervention phase should be an impact milestone. If this is the impact milestone for this intervention, please keep in mind:*

- The impact milestone should address all functional areas applicable to the intervention.*
- The impact milestone functional area descriptions and supporting documentation should demonstrate that the intervention has been fully implemented.*

*This question was not displayed to the respondent.*

Q5972. Please indicate which Functional Area(s) applies to this milestone. Select all that apply. Impact milestones must include all Functional Areas.

*This question was not displayed to the respondent.*

Q5973. Co

*This question was not displayed to the respondent.*

Q5974.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY2Q4

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

### **Q5975. People Functional Area**

*This question was not displayed to the respondent.*

Q5976. Please include a brief description of the People Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

Q5977.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

### **Q5978. Process Functional Area**

*This question was not displayed to the respondent.*

Q5979.

Please include a brief description of the Process Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

Q5980.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

### **Q5981. Technology Functional Area**

*This question was not displayed to the respondent.*

Q5982. Please include a brief description of the Technology Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

Q5983.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

*This question was not displayed to the respondent.*

**Q5984. Patient Engagement / Target Population Functional Area**

*This question was not displayed to the respondent.*

Q5985. Please include a brief description of the Patient Engagement / Target Population Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

Q5986. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

*This question was not displayed to the respondent.*

Q5987. Co

*This question was not displayed to the respondent.*

Q5988.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY2Q4

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

*This question was not displayed to the respondent.*

Q5989. Provide a brief description of the milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q5990.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

*This question was not displayed to the respondent.*

Q5991. Co

*This question was not displayed to the respondent.*

Q5992.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY3Q2

*This question was not displayed to the respondent.*

Q5993. III.B. Please answer the following questions with information related to this intervention's PY3Q2 milestone.

*This question was not displayed to the respondent.*

Q5994.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

*This question was not displayed to the respondent.*

Q5995. Co

*This question was not displayed to the respondent.*

Q5996.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY3Q2

*This question was not displayed to the respondent.*

Q5997.

Is this the impact milestone for this intervention?

*The final milestone of the Planning and Intervention phase should be an impact milestone. If this is the impact milestone for this intervention, please keep in mind:*

- The impact milestone should address all functional areas applicable to the intervention.*
- The impact milestone functional area descriptions and supporting documentation should demonstrate that the intervention has been fully implemented.*

*This question was not displayed to the respondent.*

Q5998.

Please indicate which Functional Area(s) applies to this milestone. Select all that apply. Impact milestones must include all Functional Areas.

*This question was not displayed to the respondent.*

Q5999. Co

*This question was not displayed to the respondent.*

Q6000.

### **Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY3Q2

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

Q6001. **People Functional Area**

*This question was not displayed to the respondent.*

Q6002. Please include a brief description of the People Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

Q6003.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

#### **Q6004. Process Functional Area**

*This question was not displayed to the respondent.*

Q6005. Please include a brief description of the Process Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone*

*This question was not displayed to the respondent.*

Q6006.

Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

#### **Q6007. Technology Functional Area**

*This question was not displayed to the respondent.*

Q6008.

Please include a brief description of the Technology Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

Q6009. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

#### **Q6010. Patient Engagement / Target Population Functional Area**

*This question was not displayed to the respondent.*

Q6011. Please include a brief description of the Patient Engagement / Target Population Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

Q6012. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

*This question was not displayed to the respondent.*

Q6013. Co

*This question was not displayed to the respondent.*

Q6014.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY3Q2

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

*This question was not displayed to the respondent.*

Q6015. Provide a brief description of the milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q6016. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone’s completion.*

*This question was not displayed to the respondent.*

Q6017. Co

*This question was not displayed to the respondent.*

Q6018.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY3Q4

*This question was not displayed to the respondent.*



Q6019. III.B. Please answer the following questions with information related to this intervention's PY3Q4 milestone.

*This question was not displayed to the respondent.*

Q6020.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

*This question was not displayed to the respondent.*

Q6021. Co

*This question was not displayed to the respondent.*

Q6022.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY3Q4

*This question was not displayed to the respondent.*

Q6023. Is this the impact milestone for this intervention?

*The final milestone of the Planning and Intervention phase should be an impact milestone. If this is the impact milestone for this intervention, please keep in mind:*

- The impact milestone should address all functional areas applicable to the intervention.*
- The impact milestone functional area descriptions and supporting documentation should demonstrate that the intervention has been fully implemented.*

*This question was not displayed to the respondent.*

Q6024. Please indicate which Functional Area(s) applies to this milestone. Select all that apply. Impact milestones must include all Functional Areas.

*This question was not displayed to the respondent.*

Q6025. Co

*This question was not displayed to the respondent.*

Q6026.

## **Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY3Q4

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

### **Q6027. People Functional Area**

*This question was not displayed to the respondent.*

Q6028. Please include a brief description of the People Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

Q6029. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

### **Q6030. Process Functional Area**

*This question was not displayed to the respondent.*

Q6031. Please include a brief description of the Process Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

Q6032. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

### Q6033. Technology Functional Area

*This question was not displayed to the respondent.*

Q6034. Please include a brief description of the Technology Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

Q6035. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

### Q6036. Patient Engagement / Target Population Functional Area

*This question was not displayed to the respondent.*

Q6037. Please include a brief description of the Patient Engagement / Target Population Functional Area for this milestone (no more than two sentences).

*Functional Area Description Definition – A short description of the actions that will constitute the completion of the milestone.*

*This question was not displayed to the respondent.*

Q6038. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

Q6039. Co

*This question was not displayed to the respondent.*

Q6040.

#### **Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY3Q4

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

Q6041. Provide a brief description of the milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q6042. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

Q6043. Co

*This question was not displayed to the respondent.*

Q6044.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY4Q2

*This question was not displayed to the respondent.*

Q6045. III.B. Please answer the following questions with information related to this intervention's PY4Q2 milestone.

*This question was not displayed to the respondent.*

Q6046.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

*This question was not displayed to the respondent.*

Q6047. Co

*This question was not displayed to the respondent.*

Q6048.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY4Q2

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

Q6049. Provide a brief description of the milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q6050. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

Q6051. Co

*This question was not displayed to the respondent.*

Q6052.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY4Q4

*This question was not displayed to the respondent.*

Q6053. III.B. Please answer the following questions with information related to this intervention's PY4Q4 milestone.

*This question was not displayed to the respondent.*

Q6054.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

*This question was not displayed to the respondent.*

Q6055. Co

*This question was not displayed to the respondent.*

Q6056.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY4Q4

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

Q6057. Provide a brief description of the milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q6058. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

Q6059. Co

*This question was not displayed to the respondent.*

Q6060.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY5Q2

*This question was not displayed to the respondent.*

Q6061. III.B. Please answer the following questions with information related to this intervention's PY5Q2 milestone.

*This question was not displayed to the respondent.*

Q6062.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

*This question was not displayed to the respondent.*

Q6063. Co

*This question was not displayed to the respondent.*

Q6064.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY5Q2

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

Q6065. Provide a brief description of the milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q6066. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).

*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

Q6067. Co

*This question was not displayed to the respondent.*

Q6068.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY5Q4

*This question was not displayed to the respondent.*

Q6069. III.B. Please answer the following questions with information related to this intervention's PY5Q4 milestone.

*This question was not displayed to the respondent.*

Q6070.  
What phase does this milestone fall under?  
*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

*This question was not displayed to the respondent.*

Q6071. Co

*This question was not displayed to the respondent.*

Q6072.  
**Intervention Milestones**  
Reporting Hospital: Good Samaritan Medical Center  
Intervention: NA  
Milestone: PY5Q4

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

Q6073. Provide a brief description of the milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q6074. Please describe the supporting documentation which will be provided in support of the Functional Area for this milestone (no more than two sentences).  
*Supporting Documentation Definition – The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

Q6075. Co



*This question was not displayed to the respondent.*

Q6076.

### **Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

This concludes the information input for this intervention's milestones. Information input for the next intervention's milestones will now begin.

*This question was not displayed to the respondent.*

Q31.1. Co

*This question was not displayed to the respondent.*

Q31.2.

### **Intervention Milestones - Intervention 13**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY2Q2

### **B. Intervention Milestones**

*This question was not displayed to the respondent.*

Q31.3. III.B. Please answer the following questions with information related to this intervention's PY2Q2 milestone.

*This question was not displayed to the respondent.*

Q31.4.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

*This question was not displayed to the respondent.*

Q31.5. Co

*This question was not displayed to the respondent.*

Q31.6.

### **Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY2Q2

*This question was not displayed to the respondent.*

Q31.7.

Is this the impact milestone for this intervention?

*The final milestone of the Planning and Intervention Phase should be an impact milestone. If this is the impact milestone for this intervention, please keep in mind:*

- 1. The impact milestone should include targets that demonstrates that the intervention has been fully implemented.*
- 2. The impact milestone should address all functional areas applicable to the intervention.*

*This question was not displayed to the respondent.*

Q31.8. If this is the impact milestone, please describe the demonstrated magnitude of the impact milestone and a short description of the actions that will constitute its completion. (If it is not, please write N/A in the text box)

*This question was not displayed to the respondent.*

Q31.9. Which functional areas is this milestone geared towards impacting? (If this is the hospital's impact milestone, please select all four functional areas. If any functional area is not applicable to your intervention, please explain that on the next screen.)

*This question was not displayed to the respondent.*

Q31.10. Co

*This question was not displayed to the respondent.*

Q31.11.

### **Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY2Q2

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

Q31.12. **People Functional Area**

*This question was not displayed to the respondent.*

Q31.13. Please include a brief description of the People Functional Area for this milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q31.14. Please describe the supporting documentation which will be provided in support of the People functional area for this milestone.

*This question was not displayed to the respondent.*

**Q31.15. Process Functional Area**

*This question was not displayed to the respondent.*

Q31.16. Please include a brief description of the Process Functional Area for this milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q31.17. Please describe the supporting documentation which will be provided in support of the Process functional area for this milestone.

*This question was not displayed to the respondent.*

**Q31.18. Technology Functional Area**

*This question was not displayed to the respondent.*

Q31.19. Please include a brief description of the Technology Functional Area for this milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q31.20. Please describe the supporting documentation which will be provided in support of the Technology functional area for this milestone.

*This question was not displayed to the respondent.*

**Q31.21. Patient Engagement Functional Area**

*This question was not displayed to the respondent.*

Q31.22. Please include a brief description of the Patient Engagement Functional Area for this milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q31.23. Please describe the supporting documentation which will be provided in support of the Patient Engagement functional area for this milestone.

*This question was not displayed to the respondent.*

Q31.24. Co

*This question was not displayed to the respondent.*

Q31.25.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY2Q2

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

Q31.26. Provide a brief description of the milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q31.27. Please describe the supporting documentation which will be provided in support of this milestone.

*This question was not displayed to the respondent.*

Q31.28. Co

*This question was not displayed to the respondent.*

Q31.29.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY2Q4

*This question was not displayed to the respondent.*

Q31.30. III.B. Please answer the following questions with information related to this intervention's PY2Q4 milestone.

*This question was not displayed to the respondent.*

Q31.31.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

*This question was not displayed to the respondent.*

Q31.32. Co

*This question was not displayed to the respondent.*

Q31.33.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY2Q4

*This question was not displayed to the respondent.*

Q31.34.

Is this the impact milestone for this intervention?

*The final milestone of the Planning and Intervention Phase should be an impact milestone. If this is the impact milestone for this intervention, please keep in mind:*

- 1. The impact milestone should include targets that demonstrates that the intervention has been fully implemented.*
- 2. The impact milestone should address all functional areas applicable to the intervention.*

*This question was not displayed to the respondent.*

Q31.35. If this is the impact milestone, please describe the demonstrated magnitude of the impact milestone and a short description of the actions that will constitute its completion. (If it is not, please write N/A in the text box)

*This question was not displayed to the respondent.*

Q31.36. Which functional areas is this milestone geared towards impacting? If this is the hospital's impact milestone, please select all four functional areas. If any functional area is not applicable to your intervention, please explain that on the next screen.)

*This question was not displayed to the respondent.*

Q31.37. Co

*This question was not displayed to the respondent.*

Q31.38.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY2Q4

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

**Q31.39. People Functional Area**

*This question was not displayed to the respondent.*

Q31.40. Please include a brief description of the People Functional Area for this milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q31.41. Please describe the supporting documentation which will be provided in support of the People functional area for this milestone.

*This question was not displayed to the respondent.*

**Q31.42. Process Functional Area**

*This question was not displayed to the respondent.*

Q31.43. Please include a brief description of the Process Functional Area for this milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q31.44. Please describe the supporting documentation which will be provided in support of the Process functional area for this milestone.

*This question was not displayed to the respondent.*

**Q31.45. Technology Functional Area**

*This question was not displayed to the respondent.*

Q31.46. Please include a brief description of the Technology Functional Area for this milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q31.47. Please describe the supporting documentation which will be provided in support of the Technology functional area for this milestone.

*This question was not displayed to the respondent.*

**Q31.48. Patient Engagement Functional Area**

*This question was not displayed to the respondent.*

Q31.49. Please include a brief description of the Patient Engagement Functional Area for this milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q31.50. Please describe the supporting documentation which will be provided in support of the Patient Engagement functional area for this milestone.

*This question was not displayed to the respondent.*

Q31.51. Co

*This question was not displayed to the respondent.*

Q31.52.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY2Q4

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

Q31.53. Provide a brief description of the milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q31.54. Please describe the supporting documentation which will be provided in support of this milestone.

*This question was not displayed to the respondent.*

Q31.55. Co

*This question was not displayed to the respondent.*

Q31.56.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY3Q2

*This question was not displayed to the respondent.*

Q31.57. III.B. Please answer the following questions with information related to this intervention's PY3Q2 milestone.

*This question was not displayed to the respondent.*

Q31.58.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

*This question was not displayed to the respondent.*

Q31.59. Co

*This question was not displayed to the respondent.*

Q31.60.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY3Q2

*This question was not displayed to the respondent.*

Q31.61.

Is this the impact milestone for this intervention?

*The final milestone of the Planning and Intervention Phase should be an impact milestone. If this is the impact milestone for this intervention, please keep in mind:*

- 1. The impact milestone should include targets that demonstrates that the intervention has been fully implemented.*
- 2. The impact milestone should address all functional areas applicable to the intervention.*

*This question was not displayed to the respondent.*



Q31.62. If this is the impact milestone, please describe the demonstrated magnitude of the impact milestone and a short description of the actions that will constitute its completion. (If it is not, please write N/A in the text box)

*This question was not displayed to the respondent.*

Q31.63. Which functional areas is this milestone geared towards impacting? (If this is the hospital's impact milestone, please select all four functional areas. If any functional area is not applicable to your intervention, please explain that on the next screen.)

*This question was not displayed to the respondent.*

Q31.64. Co

*This question was not displayed to the respondent.*

Q31.65.

### **Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY3Q2

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

Q31.66. **People Functional Area**

*This question was not displayed to the respondent.*

Q31.67. Please include a brief description of the People Functional Area for this milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q31.68. Please describe the supporting documentation which will be provided in support of the People functional area for this milestone.

*This question was not displayed to the respondent.*

Q31.69. **Process Functional Area**

*This question was not displayed to the respondent.*

Q31.70. Please include a brief description of the Process Functional Area for this milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q31.71. Please describe the supporting documentation which will be provided in support of the Process functional area for this milestone.

*This question was not displayed to the respondent.*

Q31.72. **Technology Functional Area**

*This question was not displayed to the respondent.*

Q31.73. Please include a brief description of the Technology Functional Area for this milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q31.74. Please describe the supporting documentation which will be provided in support of the Technology functional area for this milestone.

*This question was not displayed to the respondent.*

Q31.75. **Patient Engagement Functional Area**

*This question was not displayed to the respondent.*

Q31.76. Please include a brief description of the Patient Engagement Functional Area for this milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q31.77. Please describe the supporting documentation which will be provided in support of the Patient Engagement functional area for this milestone.

*This question was not displayed to the respondent.*

Q31.78. Co

*This question was not displayed to the respondent.*

Q31.79.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY3Q2

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

Q31.80. Provide a brief description of the milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q31.81. Please describe the supporting documentation which will be provided in support of this milestone.

*This question was not displayed to the respondent.*

Q31.82. Co

*This question was not displayed to the respondent.*

Q31.83.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY3Q4

*This question was not displayed to the respondent.*

Q31.84. III.B. Please answer the following questions with information related to this intervention's PY3Q4 milestone.

*This question was not displayed to the respondent.*

Q31.85.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

*This question was not displayed to the respondent.*

Q31.86. Co

*This question was not displayed to the respondent.*

Q31.87.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY3Q4

*This question was not displayed to the respondent.*

Q31.88.

Is this the impact milestone for this intervention?

*The final milestone of the Planning and Intervention Phase should be an impact milestone. If this is the impact milestone for this intervention, please keep in mind:*

- 1. The impact milestone should include targets that demonstrates that the intervention has been fully implemented.*
- 2. The impact milestone should address all functional areas applicable to the intervention.*

*This question was not displayed to the respondent.*

Q31.89. If this is the impact milestone, please describe the demonstrated magnitude of the impact milestone and a short description of the actions that will constitute its completion. (If it is not, please write N/A in the text box)

*This question was not displayed to the respondent.*

Q31.90. Which functional areas is this milestone geared towards impacting? (If this is the hospital's impact milestone, please select all four functional areas. If any functional area is not applicable to your intervention, please explain that on the next screen.)

*This question was not displayed to the respondent.*

Q31.91. Co

*This question was not displayed to the respondent.*

Q31.92.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY3Q4

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

### **Q31.93. People Functional Area**

*This question was not displayed to the respondent.*

**Q31.94.** Please include a brief description of the People Functional Area for this milestone (no more than two sentences).

*This question was not displayed to the respondent.*

**Q31.95.** Please describe the supporting documentation which will be provided in support of the People functional area for this milestone.

*This question was not displayed to the respondent.*

### **Q31.96. Process Functional Area**

*This question was not displayed to the respondent.*

**Q31.97.** Please include a brief description of the Process Functional Area for this milestone (no more than two sentences).

*This question was not displayed to the respondent.*

**Q31.98.** Please describe the supporting documentation which will be provided in support of the Process functional area for this milestone.

*This question was not displayed to the respondent.*

### **Q31.99. Technology Functional Area**

*This question was not displayed to the respondent.*

**Q31.100.** Please include a brief description of the Technology Functional Area for this milestone (no more than two sentences).

*This question was not displayed to the respondent.*

**Q31.101.** Please describe the supporting documentation which will be provided in support of the Technology functional area for this milestone.

*This question was not displayed to the respondent.*

### **Q31.102. Patient Engagement Functional Area**

*This question was not displayed to the respondent.*

Q31.103. Please include a brief description of the Patient Engagement Functional Area for this milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q31.104. Please describe the supporting documentation which will be provided in support of the Patient Engagement functional area for this milestone.

*This question was not displayed to the respondent.*

Q31.105. Co

*This question was not displayed to the respondent.*

Q31.106.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY3Q4

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

Q31.107. Provide a brief description of the milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q31.108. Please describe the supporting documentation which will be provided in support of this milestone.

*This question was not displayed to the respondent.*

Q31.109. Co

*This question was not displayed to the respondent.*

Q31.110.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY4Q2

*This question was not displayed to the respondent.*

Q31.111. III.B. Please answer the following questions with information related to this intervention's PY4Q2 milestone.

*This question was not displayed to the respondent.*

Q31.112.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

*This question was not displayed to the respondent.*

Q31.113. Co

*This question was not displayed to the respondent.*

Q31.114.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY4Q2

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

Q31.115. Provide a brief description of the milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q31.116. Please describe the supporting documentation which will be provided in support of this milestone.

*This question was not displayed to the respondent.*

Q31.117. Co

*This question was not displayed to the respondent.*

Q31.118.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA  
Milestone: PY4Q4

*This question was not displayed to the respondent.*

Q31.119. III.B. Please answer the following questions with information related to this intervention's PY4Q4 milestone.

*This question was not displayed to the respondent.*

Q31.120.  
What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

*This question was not displayed to the respondent.*

Q31.121. Co

*This question was not displayed to the respondent.*

Q31.122.  
**Intervention Milestones**  
Reporting Hospital: Good Samaritan Medical Center  
Intervention: NA  
Milestone: PY4Q4

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

Q31.123. Provide a brief description of the milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q31.124. Please describe the supporting documentation which will be provided in support of this milestone.

*This question was not displayed to the respondent.*

Q31.125. Co



*This question was not displayed to the respondent.*

Q31.126.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY5Q2

*This question was not displayed to the respondent.*

Q31.127. III.B. Please answer the following questions with information related to this intervention's PY5Q2 milestone.

*This question was not displayed to the respondent.*

Q31.128.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

*This question was not displayed to the respondent.*

Q31.129. Co

*This question was not displayed to the respondent.*

Q31.130.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY5Q2

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

Q31.131. Provide a brief description of the milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q31.132. Please describe the supporting documentation which will be provided in support of this milestone.

*This question was not displayed to the respondent.*

Q31.133. Co

*This question was not displayed to the respondent.*

Q31.134.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY5Q4

*This question was not displayed to the respondent.*

Q31.135. III.B. Please answer the following questions with information related to this intervention's PY5Q4 milestone.

*This question was not displayed to the respondent.*

Q31.136.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

*This question was not displayed to the respondent.*

Q31.137. Co

*This question was not displayed to the respondent.*

Q31.138.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY5Q4

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

Q31.139. Provide a brief description of the milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q31.140. Please describe the supporting documentation which will be provided in support of this milestone.

*This question was not displayed to the respondent.*

Q31.141. Co

*This question was not displayed to the respondent.*

Q31.142.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

This concludes the information input for this intervention's milestones. Information input for the next intervention's milestones will now begin.

*This question was not displayed to the respondent.*

Q32.1. Co

*This question was not displayed to the respondent.*

Q32.2.

**Intervention Milestones - Intervention 14**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY2Q2

**B. Intervention Milestones**

*This question was not displayed to the respondent.*

Q32.3. III.B. Please answer the following questions with information related to this intervention's PY2Q2 milestone.

*This question was not displayed to the respondent.*

Q32.4.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

*This question was not displayed to the respondent.*

### Q32.5. Co

*This question was not displayed to the respondent.*

### Q32.6.

#### **Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY2Q2

*This question was not displayed to the respondent.*

### Q32.7.

Is this the impact milestone for this intervention?

*The final milestone of the Planning and Intervention Phase should be an impact milestone. If this is the impact milestone for this intervention, please keep in mind:*

- 1. The impact milestone should include targets that demonstrates that the intervention has been fully implemented.*
- 2. The impact milestone should address all functional areas applicable to the intervention.*

*This question was not displayed to the respondent.*

Q32.8. If this is the impact milestone, please describe the demonstrated magnitude of the impact milestone and a short description of the actions that will constitute its completion. (If it is not, please write N/A in the text box)

*This question was not displayed to the respondent.*

Q32.9. Which functional areas is this milestone geared towards impacting? (If this is the hospital's impact milestone, please select all four functional areas. If any functional area is not applicable to your intervention, please explain that on the next screen.)

*This question was not displayed to the respondent.*

### Q32.10. Co

*This question was not displayed to the respondent.*

### Q32.11.

#### **Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY2Q2

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

### **Q32.12. People Functional Area**

*This question was not displayed to the respondent.*

Q32.13. Please include a brief description of the People Functional Area for this milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q32.14. Please describe the supporting documentation which will be provided in support of the People functional area for this milestone.

*This question was not displayed to the respondent.*

### **Q32.15. Process Functional Area**

*This question was not displayed to the respondent.*

Q32.16. Please include a brief description of the Process Functional Area for this milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q32.17. Please describe the supporting documentation which will be provided in support of the Process functional area for this milestone.

*This question was not displayed to the respondent.*

### **Q32.18. Technology Functional Area**

*This question was not displayed to the respondent.*

Q32.19. Please include a brief description of the Technology Functional Area for this milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q32.20. Please describe the supporting documentation which will be provided in support of the Technology functional area for this milestone.

*This question was not displayed to the respondent.*

### **Q32.21. Patient Engagement Functional Area**

*This question was not displayed to the respondent.*

Q32.22. Please include a brief description of the Patient Engagement Functional Area for this milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q32.23. Please describe the supporting documentation which will be provided in support of the Patient Engagement functional area for this milestone.

*This question was not displayed to the respondent.*

Q32.24. Co

*This question was not displayed to the respondent.*

Q32.25.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY2Q2

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

Q32.26. Provide a brief description of the milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q32.27. Please describe the supporting documentation which will be provided in support of this milestone.

*This question was not displayed to the respondent.*

Q32.28. Co

*This question was not displayed to the respondent.*

Q32.29.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY2Q4

*This question was not displayed to the respondent.*

Q32.30. III.B. Please answer the following questions with information related to this intervention's PY2Q4 milestone.

*This question was not displayed to the respondent.*

Q32.31.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

*This question was not displayed to the respondent.*

Q32.32. Co

*This question was not displayed to the respondent.*

Q32.33.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY2Q4

*This question was not displayed to the respondent.*

Q32.34.

Is this the impact milestone for this intervention?

*The final milestone of the Planning and Intervention Phase should be an impact milestone. If this is the impact milestone for this intervention, please keep in mind:*

- 1. The impact milestone should include targets that demonstrates that the intervention has been fully implemented.*
- 2. The impact milestone should address all functional areas applicable to the intervention.*

*This question was not displayed to the respondent.*

Q32.35. If this is the impact milestone, please describe the demonstrated magnitude of the impact milestone and a short description of the actions that will constitute its completion. (If it is not, please write N/A in the text box)

*This question was not displayed to the respondent.*

Q32.36. Which functional areas is this milestone geared towards impacting? If this is the hospital's impact milestone, please select all four functional areas. If any functional area is not applicable to your intervention, please explain that on the next screen.)

*This question was not displayed to the respondent.*

Q32.37. Co

*This question was not displayed to the respondent.*

Q32.38.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY2Q4

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

Q32.39. **People Functional Area**

*This question was not displayed to the respondent.*

Q32.40. Please include a brief description of the People Functional Area for this milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q32.41. Please describe the supporting documentation which will be provided in support of the People functional area for this milestone.

*This question was not displayed to the respondent.*

Q32.42. **Process Functional Area**

*This question was not displayed to the respondent.*

Q32.43. Please include a brief description of the Process Functional Area for this milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q32.44. Please describe the supporting documentation which will be provided in support of the Process functional area for this milestone.

*This question was not displayed to the respondent.*

Q32.45. **Technology Functional Area**



*This question was not displayed to the respondent.*

Q32.46. Please include a brief description of the Technology Functional Area for this milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q32.47. Please describe the supporting documentation which will be provided in support of the Technology functional area for this milestone.

*This question was not displayed to the respondent.*

**Q32.48. Patient Engagement Functional Area**

*This question was not displayed to the respondent.*

Q32.49. Please include a brief description of the Patient Engagement Functional Area for this milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q32.50. Please describe the supporting documentation which will be provided in support of the Patient Engagement functional area for this milestone.

*This question was not displayed to the respondent.*

Q32.51. Co

*This question was not displayed to the respondent.*

Q32.52.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY2Q4

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

Q32.53. Provide a brief description of the milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q32.54. Please describe the supporting documentation which will be provided in support of this milestone.

*This question was not displayed to the respondent.*

Q32.55. Co

*This question was not displayed to the respondent.*

Q32.56.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY3Q2

*This question was not displayed to the respondent.*

Q32.57. III.B. Please answer the following questions with information related to this intervention's PY3Q2 milestone.

*This question was not displayed to the respondent.*

Q32.58.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

*This question was not displayed to the respondent.*

Q32.59. Co

*This question was not displayed to the respondent.*

Q32.60.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY3Q2

*This question was not displayed to the respondent.*

Q32.61.

Is this the impact milestone for this intervention?

*The final milestone of the Planning and Intervention Phase should be an impact milestone. If this is the impact milestone for this intervention, please keep in mind:*

1. The impact milestone should include targets that demonstrates that the intervention has been fully implemented.
2. The impact milestone should address all functional areas applicable to the intervention.

*This question was not displayed to the respondent.*

Q32.62. If this is the impact milestone, please describe the demonstrated magnitude of the impact milestone and a short description of the actions that will constitute its completion. (If it is not, please write N/A in the text box)

*This question was not displayed to the respondent.*

Q32.63. Which functional areas is this milestone geared towards impacting? (If this is the hospital's impact milestone, please select all four functional areas. If any functional area is not applicable to your intervention, please explain that on the next screen.)

*This question was not displayed to the respondent.*

Q32.64. Co

*This question was not displayed to the respondent.*

Q32.65.

#### **Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY3Q2

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

Q32.66. **People Functional Area**

*This question was not displayed to the respondent.*

Q32.67. Please include a brief description of the People Functional Area for this milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q32.68. Please describe the supporting documentation which will be provided in support of the People functional area for this milestone.

*This question was not displayed to the respondent.*

### **Q32.69. Process Functional Area**

*This question was not displayed to the respondent.*

Q32.70. Please include a brief description of the Process Functional Area for this milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q32.71. Please describe the supporting documentation which will be provided in support of the Process functional area for this milestone.

*This question was not displayed to the respondent.*

### **Q32.72. Technology Functional Area**

*This question was not displayed to the respondent.*

Q32.73. Please include a brief description of the Technology Functional Area for this milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q32.74. Please describe the supporting documentation which will be provided in support of the Technology functional area for this milestone.

*This question was not displayed to the respondent.*

### **Q32.75. Patient Engagement Functional Area**

*This question was not displayed to the respondent.*

Q32.76. Please include a brief description of the Patient Engagement Functional Area for this milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q32.77. Please describe the supporting documentation which will be provided in support of the Patient Engagement functional area for this milestone.

*This question was not displayed to the respondent.*

### **Q32.78. Co**

*This question was not displayed to the respondent.*

Q32.79.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY3Q2

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

Q32.80. Provide a brief description of the milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q32.81. Please describe the supporting documentation which will be provided in support of this milestone.

*This question was not displayed to the respondent.*

Q32.82. Co

*This question was not displayed to the respondent.*

Q32.83.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY3Q4

*This question was not displayed to the respondent.*

Q32.84. III.B. Please answer the following questions with information related to this intervention's PY3Q4 milestone.

*This question was not displayed to the respondent.*

Q32.85.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

*This question was not displayed to the respondent.*

Q32.86. Co

*This question was not displayed to the respondent.*

Q32.87.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY3Q4

*This question was not displayed to the respondent.*

Q32.88.

Is this the impact milestone for this intervention?

*The final milestone of the Planning and Intervention Phase should be an impact milestone. If this is the impact milestone for this intervention, please keep in mind:*

- 1. The impact milestone should include targets that demonstrates that the intervention has been fully implemented.*
- 2. The impact milestone should address all functional areas applicable to the intervention.*

*This question was not displayed to the respondent.*

Q32.89. If this is the impact milestone, please describe the demonstrated magnitude of the impact milestone and a short description of the actions that will constitute its completion. (If it is not, please write N/A in the text box)

*This question was not displayed to the respondent.*

Q32.90. Which functional areas is this milestone geared towards impacting? (If this is the hospital's impact milestone, please select all four functional areas. If any functional area is not applicable to your intervention, please explain that on the next screen.)

*This question was not displayed to the respondent.*

Q32.91. Co

*This question was not displayed to the respondent.*

Q32.92.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY3Q4

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

### **Q32.93. People Functional Area**

*This question was not displayed to the respondent.*

Q32.94. Please include a brief description of the People Functional Area for this milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q32.95. Please describe the supporting documentation which will be provided in support of the People functional area for this milestone.

*This question was not displayed to the respondent.*

### **Q32.96. Process Functional Area**

*This question was not displayed to the respondent.*

Q32.97. Please include a brief description of the Process Functional Area for this milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q32.98. Please describe the supporting documentation which will be provided in support of the Process functional area for this milestone.

*This question was not displayed to the respondent.*

### **Q32.99. Technology Functional Area**

*This question was not displayed to the respondent.*

Q32.100. Please include a brief description of the Technology Functional Area for this milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q32.101. Please describe the supporting documentation which will be provided in support of the Technology functional area for this milestone.

*This question was not displayed to the respondent.*

## Q32.102. Patient Engagement Functional Area

*This question was not displayed to the respondent.*

Q32.103. Please include a brief description of the Patient Engagement Functional Area for this milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q32.104. Please describe the supporting documentation which will be provided in support of the Patient Engagement functional area for this milestone.

*This question was not displayed to the respondent.*

Q32.105. Co

*This question was not displayed to the respondent.*

Q32.106.

### **Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY3Q4

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

Q32.107. Provide a brief description of the milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q32.108. Please describe the supporting documentation which will be provided in support of this milestone.

*This question was not displayed to the respondent.*

Q32.109. Co

*This question was not displayed to the respondent.*

Q32.110.

### **Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA



Milestone: PY4Q2

*This question was not displayed to the respondent.*

Q32.111. III.B. Please answer the following questions with information related to this intervention's PY4Q2 milestone.

*This question was not displayed to the respondent.*

Q32.112.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

*This question was not displayed to the respondent.*

Q32.113. Co

*This question was not displayed to the respondent.*

Q32.114.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY4Q2

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

Q32.115. Provide a brief description of the milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q32.116. Please describe the supporting documentation which will be provided in support of this milestone.

*This question was not displayed to the respondent.*

Q32.117. Co

*This question was not displayed to the respondent.*

Q32.118.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY4Q4

*This question was not displayed to the respondent.*

Q32.119. III.B. Please answer the following questions with information related to this intervention's PY4Q4 milestone.

*This question was not displayed to the respondent.*

Q32.120.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

*This question was not displayed to the respondent.*

Q32.121. Co

*This question was not displayed to the respondent.*

Q32.122.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY4Q4

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

Q32.123. Provide a brief description of the milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q32.124. Please describe the supporting documentation which will be provided in support of this milestone.

*This question was not displayed to the respondent.*

Q32.125. Co

*This question was not displayed to the respondent.*

Q32.126.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY5Q2

*This question was not displayed to the respondent.*

Q32.127. III.B. Please answer the following questions with information related to this intervention's PY5Q2 milestone.

*This question was not displayed to the respondent.*

Q32.128.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

*This question was not displayed to the respondent.*

Q32.129. Co

*This question was not displayed to the respondent.*

Q32.130.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY5Q2

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

Q32.131. Provide a brief description of the milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q32.132. Please describe the supporting documentation which will be provided in support of this milestone.

*This question was not displayed to the respondent.*

Q32.133. Co

*This question was not displayed to the respondent.*

Q32.134.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY5Q4

*This question was not displayed to the respondent.*

Q32.135. III.B. Please answer the following questions with information related to this intervention's PY5Q4 milestone.

*This question was not displayed to the respondent.*

Q32.136.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

*This question was not displayed to the respondent.*

Q32.137. Co

*This question was not displayed to the respondent.*

Q32.138.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY5Q4

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

Q32.139. Provide a brief description of the milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q32.140. Please describe the supporting documentation which will be provided in support of this milestone.

*This question was not displayed to the respondent.*

Q32.141. Co

*This question was not displayed to the respondent.*

Q32.142.

### **Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

This concludes the information input for this intervention's milestones. Information input for the next intervention's milestones will now begin.

*This question was not displayed to the respondent.*

Q33.1. Co

*This question was not displayed to the respondent.*

Q33.2.

### **Intervention Milestones - Intervention 15**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY2Q2

### **B. Intervention Milestones**

*This question was not displayed to the respondent.*

Q33.3. III.B. Please answer the following questions with information related to this intervention's PY2Q2 milestone.

*This question was not displayed to the respondent.*

Q33.4.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

*This question was not displayed to the respondent.*

Q33.5. Co

*This question was not displayed to the respondent.*

Q33.6.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY2Q2

*This question was not displayed to the respondent.*

Q33.7.

Is this the impact milestone for this intervention?

*The final milestone of the Planning and Intervention Phase should be an impact milestone. If this is the impact milestone for this intervention, please keep in mind:*

- 1. The impact milestone should include targets that demonstrates that the intervention has been fully implemented.*
- 2. The impact milestone should address all functional areas applicable to the intervention.*

*This question was not displayed to the respondent.*

Q33.8. If this is the impact milestone, please describe the demonstrated magnitude of the impact milestone and a short description of the actions that will constitute its completion. (If it is not, please write N/A in the text box)

*This question was not displayed to the respondent.*

Q33.9. Which functional areas is this milestone geared towards impacting? (If this is the hospital's impact milestone, please select all four functional areas. If any functional area is not applicable to your intervention, please explain that on the next screen.)

*This question was not displayed to the respondent.*

Q33.10. Co

*This question was not displayed to the respondent.*

Q33.11.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY2Q2

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

### **Q33.12. People Functional Area**

*This question was not displayed to the respondent.*

**Q33.13.** Please include a brief description of the People Functional Area for this milestone (no more than two sentences).

*This question was not displayed to the respondent.*

**Q33.14.** Please describe the supporting documentation which will be provided in support of the People functional area for this milestone.

*This question was not displayed to the respondent.*

### **Q33.15. Process Functional Area**

*This question was not displayed to the respondent.*

**Q33.16.** Please include a brief description of the Process Functional Area for this milestone (no more than two sentences).

*This question was not displayed to the respondent.*

**Q33.17.** Please describe the supporting documentation which will be provided in support of the Process functional area for this milestone.

*This question was not displayed to the respondent.*

### **Q33.18. Technology Functional Area**

*This question was not displayed to the respondent.*

**Q33.19.** Please include a brief description of the Technology Functional Area for this milestone (no more than two sentences).

*This question was not displayed to the respondent.*

**Q33.20.** Please describe the supporting documentation which will be provided in support of the Technology functional area for this milestone.

*This question was not displayed to the respondent.*

### Q33.21. Patient Engagement Functional Area

*This question was not displayed to the respondent.*

Q33.22. Please include a brief description of the Patient Engagement Functional Area for this milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q33.23. Please describe the supporting documentation which will be provided in support of the Patient Engagement functional area for this milestone.

*This question was not displayed to the respondent.*

Q33.24. Co

*This question was not displayed to the respondent.*

Q33.25.

#### **Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY2Q2

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

Q33.26. Provide a brief description of the milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q33.27. Please describe the supporting documentation which will be provided in support of this milestone.

*This question was not displayed to the respondent.*

Q33.28. Co

*This question was not displayed to the respondent.*

Q33.29.

#### **Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center



Intervention: NA  
Milestone: PY2Q4

*This question was not displayed to the respondent.*

Q33.30. III.B. Please answer the following questions with information related to this intervention's PY2Q4 milestone.

*This question was not displayed to the respondent.*

Q33.31.  
What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

*This question was not displayed to the respondent.*

Q33.32. Co

*This question was not displayed to the respondent.*

Q33.33.  
**Intervention Milestones**  
Reporting Hospital: Good Samaritan Medical Center  
Intervention: NA  
Milestone: PY2Q4

*This question was not displayed to the respondent.*

Q33.34.  
Is this the impact milestone for this intervention?

*The final milestone of the Planning and Intervention Phase should be an impact milestone. If this is the impact milestone for this intervention, please keep in mind:*

- 1. The impact milestone should include targets that demonstrates that the intervention has been fully implemented.*
- 2. The impact milestone should address all functional areas applicable to the intervention.*

*This question was not displayed to the respondent.*

Q33.35. If this is the impact milestone, please describe the demonstrated magnitude of the impact milestone and a short description of the actions that will constitute its completion. (If it is not, please write N/A in the text box)

*This question was not displayed to the respondent.*

Q33.36. Which functional areas is this milestone geared towards impacting? If this is the hospital's impact milestone, please select all four functional areas. If any functional area is not applicable to your intervention, please explain that on the next screen.)

*This question was not displayed to the respondent.*

Q33.37. Co

*This question was not displayed to the respondent.*

Q33.38.

### **Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY2Q4

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

Q33.39. **People Functional Area**

*This question was not displayed to the respondent.*

Q33.40. Please include a brief description of the People Functional Area for this milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q33.41. Please describe the supporting documentation which will be provided in support of the People functional area for this milestone.

*This question was not displayed to the respondent.*

Q33.42. **Process Functional Area**

*This question was not displayed to the respondent.*

Q33.43. Please include a brief description of the Process Functional Area for this milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q33.44. Please describe the supporting documentation which will be provided in support of the Process functional area for this milestone.

*This question was not displayed to the respondent.*

Q33.45. **Technology Functional Area**

*This question was not displayed to the respondent.*

Q33.46. Please include a brief description of the Technology Functional Area for this milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q33.47. Please describe the supporting documentation which will be provided in support of the Technology functional area for this milestone.

*This question was not displayed to the respondent.*

Q33.48. **Patient Engagement Functional Area**

*This question was not displayed to the respondent.*

Q33.49. Please include a brief description of the Patient Engagement Functional Area for this milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q33.50. Please describe the supporting documentation which will be provided in support of the Patient Engagement functional area for this milestone.

*This question was not displayed to the respondent.*

Q33.51. Co

*This question was not displayed to the respondent.*

Q33.52.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY2Q4

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

Q33.53. Provide a brief description of the milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q33.54. Please describe the supporting documentation which will be provided in support of this milestone.

*This question was not displayed to the respondent.*

Q33.55. Co

*This question was not displayed to the respondent.*

Q33.56.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY3Q2

*This question was not displayed to the respondent.*

Q33.57. III.B. Please answer the following questions with information related to this intervention's PY3Q2 milestone.

*This question was not displayed to the respondent.*

Q33.58.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

*This question was not displayed to the respondent.*

Q33.59. Co

*This question was not displayed to the respondent.*

Q33.60.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY3Q2

*This question was not displayed to the respondent.*

Q33.61.

Is this the impact milestone for this intervention?

*The final milestone of the Planning and Intervention Phase should be an impact milestone. If this is the impact milestone for this intervention, please keep in mind:*

- 1. The impact milestone should include targets that demonstrates that the intervention has been fully implemented.*
- 2. The impact milestone should address all functional areas applicable to the intervention.*

*This question was not displayed to the respondent.*

Q33.62. If this is the impact milestone, please describe the demonstrated magnitude of the impact milestone and a short description of the actions that will constitute its completion. (If it is not, please write N/A in the text box)

*This question was not displayed to the respondent.*

Q33.63. Which functional areas is this milestone geared towards impacting? (If this is the hospital's impact milestone, please select all four functional areas. If any functional area is not applicable to your intervention, please explain that on the next screen.)

*This question was not displayed to the respondent.*

Q33.64. Co

*This question was not displayed to the respondent.*

Q33.65.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY3Q2

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

Q33.66. **People Functional Area**

*This question was not displayed to the respondent.*

Q33.67. Please include a brief description of the People Functional Area for this milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q33.68. Please describe the supporting documentation which will be provided in support of the People functional area for this milestone.

*This question was not displayed to the respondent.*

**Q33.69. Process Functional Area**

*This question was not displayed to the respondent.*

Q33.70. Please include a brief description of the Process Functional Area for this milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q33.71. Please describe the supporting documentation which will be provided in support of the Process functional area for this milestone.

*This question was not displayed to the respondent.*

**Q33.72. Technology Functional Area**

*This question was not displayed to the respondent.*

Q33.73. Please include a brief description of the Technology Functional Area for this milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q33.74. Please describe the supporting documentation which will be provided in support of the Technology functional area for this milestone.

*This question was not displayed to the respondent.*

**Q33.75. Patient Engagement Functional Area**

*This question was not displayed to the respondent.*

Q33.76. Please include a brief description of the Patient Engagement Functional Area for this milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q33.77. Please describe the supporting documentation which will be provided in support of the Patient Engagement functional area for this milestone.

*This question was not displayed to the respondent.*

Q33.78. Co

*This question was not displayed to the respondent.*

Q33.79.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY3Q2

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

Q33.80. Provide a brief description of the milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q33.81. Please describe the supporting documentation which will be provided in support of this milestone.

*This question was not displayed to the respondent.*

Q33.82. Co

*This question was not displayed to the respondent.*

Q33.83.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY3Q4

*This question was not displayed to the respondent.*

Q33.84. III.B. Please answer the following questions with information related to this intervention's PY3Q4 milestone.

*This question was not displayed to the respondent.*

Q33.85.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

*This question was not displayed to the respondent.*

Q33.86. Co

*This question was not displayed to the respondent.*

Q33.87.

### **Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY3Q4

*This question was not displayed to the respondent.*

Q33.88.

Is this the impact milestone for this intervention?

*The final milestone of the Planning and Intervention Phase should be an impact milestone. If this is the impact milestone for this intervention, please keep in mind:*

- 1. The impact milestone should include targets that demonstrates that the intervention has been fully implemented.*
- 2. The impact milestone should address all functional areas applicable to the intervention.*

*This question was not displayed to the respondent.*

Q33.89. If this is the impact milestone, please describe the demonstrated magnitude of the impact milestone and a short description of the actions that will constitute its completion. (If it is not, please write N/A in the text box)

*This question was not displayed to the respondent.*

Q33.90. Which functional areas is this milestone geared towards impacting? (If this is the hospital's impact milestone, please select all four functional areas. If any functional area is not applicable to your intervention, please explain that on the next screen.)

*This question was not displayed to the respondent.*

Q33.91. Co



*This question was not displayed to the respondent.*

Q33.92.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY3Q4

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

**Q33.93. People Functional Area**

*This question was not displayed to the respondent.*

Q33.94. Please include a brief description of the People Functional Area for this milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q33.95. Please describe the supporting documentation which will be provided in support of the People functional area for this milestone.

*This question was not displayed to the respondent.*

**Q33.96. Process Functional Area**

*This question was not displayed to the respondent.*

Q33.97. Please include a brief description of the Process Functional Area for this milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q33.98. Please describe the supporting documentation which will be provided in support of the Process functional area for this milestone.

*This question was not displayed to the respondent.*

**Q33.99. Technology Functional Area**

*This question was not displayed to the respondent.*

Q33.100. Please include a brief description of the Technology Functional Area for this milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q33.101. Please describe the supporting documentation which will be provided in support of the Technology functional area for this milestone.

*This question was not displayed to the respondent.*

Q33.102. **Patient Engagement Functional Area**

*This question was not displayed to the respondent.*

Q33.103. Please include a brief description of the Patient Engagement Functional Area for this milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q33.104. Please describe the supporting documentation which will be provided in support of the Patient Engagement functional area for this milestone.

*This question was not displayed to the respondent.*

Q33.105. Co

*This question was not displayed to the respondent.*

Q33.106.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY3Q4

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

Q33.107. Provide a brief description of the milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q33.108. Please describe the supporting documentation which will be provided in support of this milestone.

*This question was not displayed to the respondent.*

Q33.109. Co

*This question was not displayed to the respondent.*

Q33.110.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY4Q2

*This question was not displayed to the respondent.*

Q33.111. III.B. Please answer the following questions with information related to this intervention's PY4Q2 milestone.

*This question was not displayed to the respondent.*

Q33.112.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

*This question was not displayed to the respondent.*

Q33.113. Co

*This question was not displayed to the respondent.*

Q33.114.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY4Q2

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

Q33.115. Provide a brief description of the milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q33.116. Please describe the supporting documentation which will be provided in support of this milestone.

*This question was not displayed to the respondent.*

Q33.117. Co

*This question was not displayed to the respondent.*

Q33.118.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY4Q4

*This question was not displayed to the respondent.*

Q33.119. III.B. Please answer the following questions with information related to this intervention's PY4Q4 milestone.

*This question was not displayed to the respondent.*

Q33.120.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

*This question was not displayed to the respondent.*

Q33.121. Co

*This question was not displayed to the respondent.*

Q33.122.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY4Q4

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.

*This question was not displayed to the respondent.*

Q33.123. Provide a brief description of the milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q33.124. Please describe the supporting documentation which will be provided in support of this milestone.

*This question was not displayed to the respondent.*

Q33.125. Co

*This question was not displayed to the respondent.*

Q33.126.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY5Q2

*This question was not displayed to the respondent.*

Q33.127. III.B. Please answer the following questions with information related to this intervention's PY5Q2 milestone.

*This question was not displayed to the respondent.*

Q33.128.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

*This question was not displayed to the respondent.*

Q33.129. Co

*This question was not displayed to the respondent.*

Q33.130.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA  
Milestone: PY5Q2

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

Q33.131. Provide a brief description of the milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q33.132. Please describe the supporting documentation which will be provided in support of this milestone.

*This question was not displayed to the respondent.*

Q33.133. Co

*This question was not displayed to the respondent.*

Q33.134.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

Milestone: PY5Q4

*This question was not displayed to the respondent.*

Q33.135. III.B. Please answer the following questions with information related to this intervention's PY5Q4 milestone.

*This question was not displayed to the respondent.*

Q33.136.

What phase does this milestone fall under?

*Planning and Implementation milestones should be completed no later than PY3Q4 and Continuous Improvement milestones should begin no later than PY4Q2, with accelerated milestones for existing interventions subject to the timeline outlined in the Milestones Requirement Document. Hospitals may complete Planning and Implementation milestones at any point prior to PY4Q2 and begin reporting Continuous Improvement milestones. More information can be found on the [Hospital Transformation Program website](#).*

*This question was not displayed to the respondent.*

Q33.137. Co

*This question was not displayed to the respondent.*

Q33.138.

**Intervention Milestones**

Reporting Hospital:

Intervention: NA

Milestone: PY5Q4

*Milestone/Functional Area Description Definition - A short description of the actions that will constitute the completion of the milestone.*

*Supporting Documentation Definition - The name and a brief description of the materials that will be submitted as evidence of the milestone's completion.*

*This question was not displayed to the respondent.*

Q33.139. Provide a brief description of the milestone (no more than two sentences).

*This question was not displayed to the respondent.*

Q33.140. Please describe the supporting documentation which will be provided in support of this milestone.

*This question was not displayed to the respondent.*

Q33.141. Co

*This question was not displayed to the respondent.*

Q33.142.

**Intervention Milestones**

Reporting Hospital: Good Samaritan Medical Center

Intervention: NA

This concludes the information input for this intervention's milestones. Information input for the next intervention's milestones will now begin.

*This question was not displayed to the respondent.*



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**COLORADO**

Q34.2.

Thank you for filling out the HTP Implementation Plan. The milestones that you have submitted will become the basis of your quarterly reports. You will also have the opportunity to amend milestones prospectively in

future quarterly reports.

Please print the full name of the individual submitting this Implementation Plan, as well as their title and the date.

By completing this form the individual identified attests that they are authorized to complete this Plan on behalf of the hospital indicated and that the Implementation Plan has been completed truthfully and accurately.

Alison Keesler, Program Manager CIN and Risk Programs 01/26/2022

**Embedded Data**



**FileID:** 2bfe9809-65af-475f-91b2-e82ef46f91ea

**Hospital Summary - HS1 - HospitalName:** Good Samaritan Medical Center

**Intervention 1 - IP1 - NameofIntervention:** Readmissions Reduction Collaborative

**Intervention 1 - Measurement:** SW-RAH1 - 30 day All-Cause Risk Adjusted Hospital Readmission

**Intervention 10 - IP1 - NameofIntervention:** Telehealth Implementation and Expansion

**Intervention 10 - Measurement:** COE2 - Implementation/expansion of telemedicine visits

**Intervention 11 - IP1 - NameofIntervention:** NA

**Intervention 11 - Measurement:** NA

**Intervention 12 - IP1 - NameofIntervention:** NA

**Intervention 12 - Measurement:** NA

**Intervention 13 - IP1 - NameofIntervention:** NA

**Intervention 13 - Measurement:** NA

**Intervention 14 - IP1 - NameofIntervention:** NA

**Intervention 14 - Measurement:** NA

**Intervention 15 - IP1 - NameofIntervention:** NA

**Intervention 15 - Measurement:** NA

**Intervention 2 - IP1 - NameofIntervention:** Social Determinants of Health (SDOH) Screening and RAE Notification

**Intervention 2 - Measurement:** SW-CP1 - Social needs screening and notification

**Intervention 3 - IP1 - NameofIntervention:** Collaborative Discharge Planning and RAE Notification

**Intervention 3 - Measurement:** SW-BH1 - Collaboratively develop and implement a mutually agreed upon discharge planning and notification process with the appropriate RAE-s for eligible patients with a diagnosis of mental illness or substance use disorder (SUD) discharged from the hospital or ED

**Intervention 4 - IP1 - NameofIntervention:** ALTO and Opioid Safety

**Intervention 4 - Measurement:** SW-BH3 - Using Alternatives to Opioids (ALTO's) in hospital ED-s: Decrease use of opioids and Increase use of ALTO-s.

**Intervention 5 - IP1 - NameofIntervention:** Hospital Index-Care Redesign

**Intervention 5 - Measurement:** SW-COE1 - Hospital Index

**Intervention 6 - IP1 - NameofIntervention:** Patient Flow - Length of Stay (LOS)

**Intervention 6 - Measurement:** SW-PH1 - Severity Adjusted Length of Stay (LOS)

**Intervention 7 - IP1 - NameofIntervention:** Patients with Ischemic Stroke Discharged with Statin Medications

**Intervention 7 - Measurement:** RAH4 - Percentage of patients with ischemic stroke who are discharged on statin medication

**Intervention 8 - IP1 - NameofIntervention:** Maternal Mental Health Collaborative

**Intervention 8 - Measurement:** CP6 - Screening and Referral for Perinatal and Post-Partum Depression and Anxiety and notification of positive screens to the Regional Accountable Entities (RAE)

**Intervention 9 - IP1 - NameofIntervention:** Screening for transitions of care in Adults with Disabilities

**Intervention 9 - Measurement:** CP4 - Screening for transitions of care supports in adults with disabilities

#### Location Data

**Location:** ([39.731796264648](#), [-104.96690368652](#))

**Source:** GeolIP Estimation

