

Appendix 1. Sample Interview Guide for Administrators

<p>Introduction (5 minutes)</p>	<p>Thank you for agreeing to talk with us. I'm _____ from the University of Pennsylvania. My colleague _____ is also present to take notes. We are speaking with hospital administrators to learn about organizational strategies your hospital is adopting to improve post-acute care coordination for patients undergoing joint replacement. We are hoping to identify challenges, opportunities, and best practices in this highly variable area of care delivery. We will treat your answers as confidential. We will not include your name, your hospital name, or any other information that could identify you in any reports we write. We will destroy the notes and audiotapes after we complete our study and publish the results. We'd also be happy to share the results with you.</p> <p>Do you agree to participate in this interview?</p> <p>Do you agree to be audio-recorded?</p> <p>Do you have any questions about the study?</p>
<p>Topic #1 (10 minutes)</p>	<p>Topic #1: Changes to discharge practices</p> <ol style="list-style-type: none"> 1. To begin, please describe how your hospital coordinated post-acute care for joint replacement patients prior to participating in the CJR (or BPCI) program. 2. Please describe changes that have occurred as a result of this program. <ol style="list-style-type: none"> a. PROBE: What other changes have been implemented? For example, some hospitals are sending healthier patients home, or are changing their care delivery processes in the hospital. <i>(If haven't been brought up)</i> <ol style="list-style-type: none"> i. How do you decide who goes home and who goes to SNF? ii. How do you monitor patient outcomes after they leave the hospital? iii. Have you hired new staffing for these activities? iv. What are some of the challenges of getting people home and how do you address that? v. <i>If any response is about home health care, ask about ownership or other relationships.</i> b. PROBE: How does your hospital measure success of the program? <i>(for example, lower rates of readmissions, cost-savings, lower rates of discharging to SNFs)</i> c. PROBE: In response to this program, some hospitals have decided to select SNFs to which they preferentially discharge patients. To your knowledge, has your hospital done something like this? <i>If answer is no, ask to topic #3 (question 7). If yes, then go to topic #2 (question 3).</i>
<p>Topic #2 (10 minutes)</p>	<p>Topic #2: SNF selection</p> <ol style="list-style-type: none"> 3. What criteria has your hospital used to select preferred SNFs? <ol style="list-style-type: none"> a. PROBE: To the best of your ability, can you estimate the total number of SNFs to which your patients were discharged, prior to this program? Now, how many preferred SNF partners does your hospital have? b. PROBE: How often are preferred SNF partners used, and for what types of patients? c. PROBE: How does your hospital convince SNFs to become preferred partners? Is there a reciprocal arrangement of any kind? d. PROBE: Has your hospital adopted any gain-sharing or other financial incentive to encourage SNFs to participate? 4. How do you find out which SNFs are high quality? Specifically, what criteria and information do you use? <ol style="list-style-type: none"> a. PROBE: What quality measures does your hospital use? <i>(ask also about CMS Nursing Home Compare if not brought up)</i>

<p>Topic #3</p> <p>(15 minutes)</p>	<p>Topic #3: Relationships</p> <ol style="list-style-type: none"> 5. Please share how your hospital coordinates care with SNFs. Specifically, describe whether there are shared providers, data/electronic medical record systems, formal reporting, cross-facility meetings, or other mechanisms by which you are able to follow-up with a SNF's performance or a given patient's post-discharge outcomes. <u>Please provide specifics.</u> <ol style="list-style-type: none"> a. PROBE: Does your hospital own a SNF? What is your relationship with the SNF(s) you own? b. PROBE: What mechanisms are in place to monitor outcomes and performance once a patient has been discharged? c. PROBE: How does the hospital review and feedback SNF performance? d. PROBE: How do you assess the productivity or success of a SNF partnership? Under what circumstances do you or would you change this arrangement? If this has already happened, please give an example. 6. How does the hospital's care coordination differ, if at all, between SNFs on the hospital's preferred provider list and those which are not? (<i>skip if no preferred network</i>) 7. In some cases, there may be differences in where the hospital wishes to discharge patients and where the patient wishes to go. How does the hospital encourage patients to go to specific SNFs? <ol style="list-style-type: none"> a. PROBE: How often do patients choose to go to SNFs that are on the hospital's preferred SNF list? (<i>skip if no preferred network</i>)
<p>Final Thoughts</p> <p>(5 minutes)</p>	<p>Those were all of the questions that we wanted to ask.</p> <ol style="list-style-type: none"> 8. Do you have any final thoughts about the CJR (or BPCI) program in general? Now that CMS is making this a voluntary program, how do you think your hospital will respond? 9. Any other comments? <p>Thank you for your time.</p>