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Improving Medicare Post-Care Care Transformation (IMPACT) Act: Connecting Post-Acute Care Across the Care Continuum

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CMS Quality Strategy

Foundational Principles
- Enable Innovation
- Foster learning organizations
- Eliminate disparities
- Strengthen infrastructure and data systems

Goals

- Make care safer
- Strengthen person and family centered care
- Promote effective communications and care coordination
- Promote effective prevention and treatment
- Promote best practices for healthy living
- Make care affordable

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Standardized PAC Patient Assessment Data for Quality Measures

IMPACT Act requires PAC providers to report standardized assessment data for the following Quality Measure Domains by the following dates:

	LTCH	IRF	SNF	HH
Quality Measure Domains				
Functional status/ cognitive function	10/1/18	10/1/16	10/1/16	1/1/19
Skin integrity	10/1/16	10/1/16	10/1/16	1/1/17
Medication reconciliation	10/1/18	10/1/18	10/1/18	1/1/17
Incidence of major falls	10/1/16	10/1/16	10/1/16	1/1/19
Communicating the existence of and providing for the transfer of health information and care preferences	10/1/18	10/1/18	10/1/18	1/1/19

The measure domains provided in the Act are not exhaustive.

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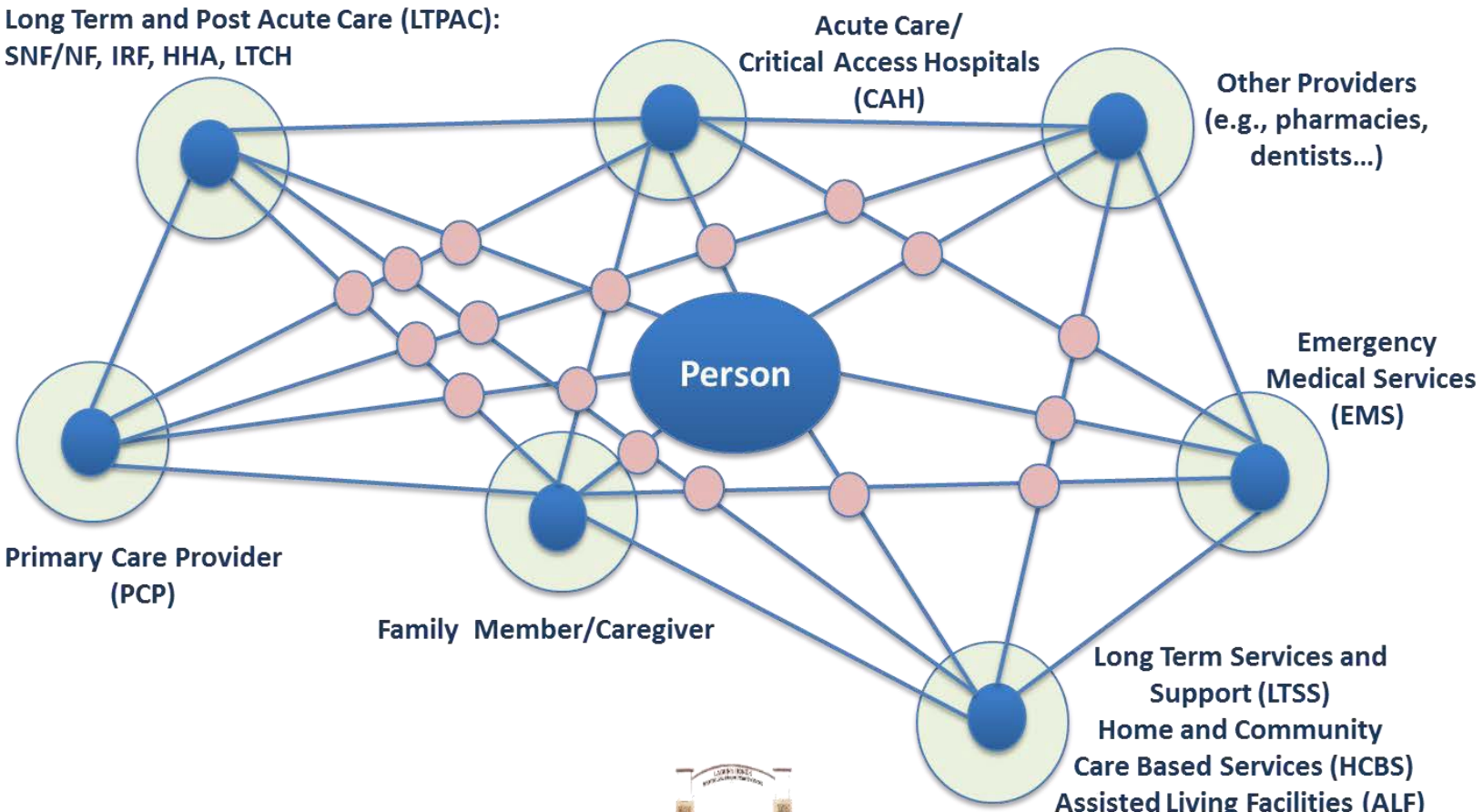
Interoperability

Data Follows the Person



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What Will IMPACT Give Us?

- Standardized and interoperable data elements
- Exchangeable information across the care continuum including hospitals, post acute care facilities, home health agencies, and other providers (e.g., home and community based service providers and pharmacists)
- So what? Why do we need Standardized and Interoperable data elements?
  - Currently, these providers and other actors don't really need to work well together
  - They are only working well enough to be successful with FFS

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Value Based Payments Replaces Fee For Service

- Value Based Payments (VBP) pays for outcomes and not for the volume of services
- Total cost of care for a population
- Must focus on the most complex individuals who:
  - Drive most of the costs; and
  - Get care in multiple sites from multiple providers

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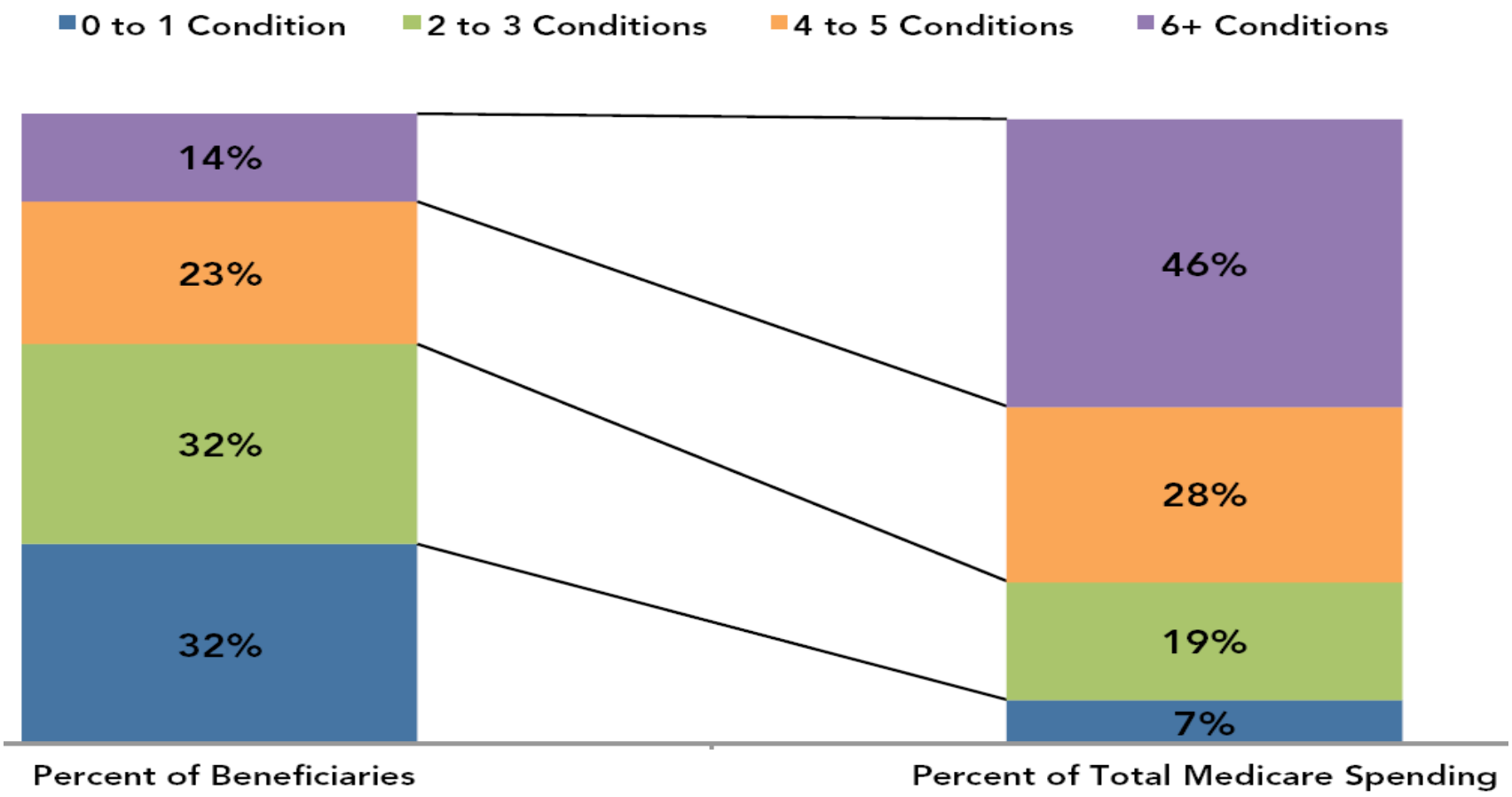
Proportion of Medicare Spending



Source: 2012 Medicare Chart Book: https://www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/Chronic-Conditions/2012ChartBook.html

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Social Determinants

- Social determinants drive a greater proportion of health care spending than do clinical conditions
- Social determinants include:
  - Race, class, gender, education, employment, housing, community/family supports, food insecurity, forensic history, chronic severe mental illness, substance abuse

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Changing to VBP Means Changing Communications

- Requires effective communication between sites
- To create safer transitions of care for those with the most complex issues
- To improve coordination of care across all sites with a shared care plan
- These new connections will rely on the electronic exchange of standardized and interoperable information

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IMPACT on Nursing Care and Assessment

Implications:

- Timely submission of data
  - SNFs that do not submit required quality reporting data to CMS by October 1, 2017, will have their annual payment reduction lowered by two percentage points for FY 2018, which begins October 1, 2017
- Prompt and Comprehensive Assessment:
  - To initiate interventions to resolve problems
  - Correct coding on MDS and IRF PAI
  - Avoid worsening ADL functions and skin integrity

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IMPACT on Nursing Care and Assessment

Completed Actions:

- System Application Upgrade
  - IT upgrade to IRF PAI application IRVEN in August 2016 to sync with new changes
- Trainings
  - 3 DAY MDS Training in September 2016 for MDS Coordinators, Licensed Nurses and other Clinicians to learn additional MDS fields and other changes
  - IRF PAI Training on coding changes and additional sections
- Webinars
  - CMS Webinars on milestones and updates
  - California Hospital Associations webinars on impact to payments and quality
  - AANAC webinar on coding changes

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IMPACT on Nursing Care and Assessment

Performance Improvement Plan For Improved Outcomes:

- Centers of Excellence for
  - Dementia Care
  - Rehabilitation
  - Geriatric
  - Palliative Care
  - Respite
  - HIV Care
  - Behavior Management
  - General SNF
- True North Metrics Goals
  - Pressure Ulcer
  - Falls with Major Injury

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IMPACT on Medication Reconciliation

- Medication Reconciliation is the formal process of ascertaining an accurate medication list during transitions of care
  - Completed by pharmacy for all admissions and discharges to the community
  - IMPACT act will create formalized data capture
  - LHH Pharmacy working on standardizing process

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IMPACT on Rehabilitation Services

Clinical Documentation

SFGetCare – July 2017

- Improve communication of care plans to entire treatment team within LHH and with our Network partners after patient transitions to another level of care
- Improve efficiency of communication of IRF-PAI and MDS information
- Improved operational efficiency of Therapy team, reducing redundant and time consuming workflow's, allowing for more focus of staff attention on direct patient care.

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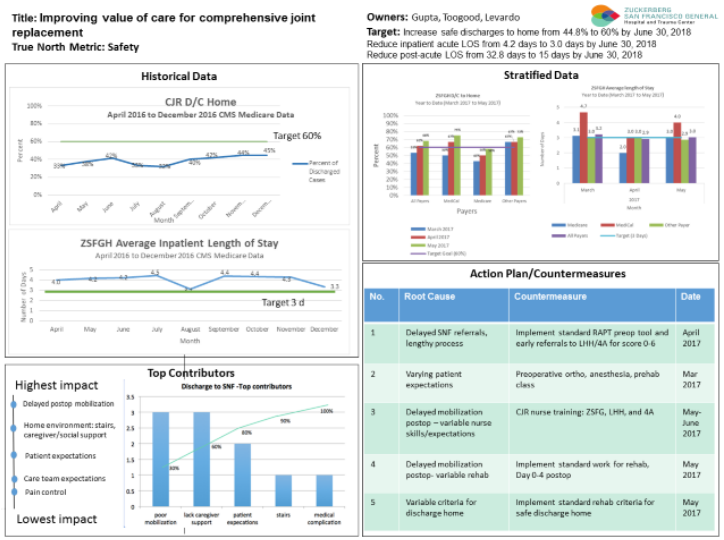
IMPACT on Rehabilitation Services

Performance Improvement Work

- Actively participating in Network Comprehensive Care for Joint Replacement Model (CJR)
  - Mapping out current care delivery model
  - Looking for opportunities to standardize and operationalize best practice
  - Developing standard work:
    - Communication
      - Improving lines of communication both internally at LHH and with our Network Partners
    - Developing clinical pathways in effort to standardize best practice to optimize outcomes and minimalize utilization of Rehab Services
- Lessons learned from CJR could apply to many other common clinical pathways.



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IMPACT on Discharge Planning

- Promote person-centered care with discharge planning
  - Continue discharge planning from acute care
  - Strengthen resident/family engagement as partners in their care
  - Emphasize prevention and treatment of chronic disease
  - Support community re-integration

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Opportunities For Care Transitions

- Improve communication and coordination of care pre and post-transfer from these settings (including sharing data for analysis and performance improvement):
  - Acute Care
  - Skilled Nursing Facility
  - Health at Home
  - Primary Care
  - Transitions
  - San Francisco Health Plan

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Questions and Answers

Thank you!

Note:

Certain slides in this presentation were taken directly from CMS presentation on the IMPACT Act: Connecting Post-Acute Care across the Care Continuum National Provider Call that was held on February 4, 2016, by the Medicare Learning Network.