

Transforming America's Nursing Homes



*National Medicare
Education Program Webinar
September 9, 2015*

*Shari M. Ling, MD
Deputy Chief Medical Officer
Center for Medicare & Medicaid
Services (CMS)
Center for Clinical Standards
and Quality (CCSQ)*

CMS Quality Strategy

Foundational Principals

- Enable Innovation
- Foster learning organizations
- Eliminate disparities
- Strengthen Infrastructure and data systems

Goals

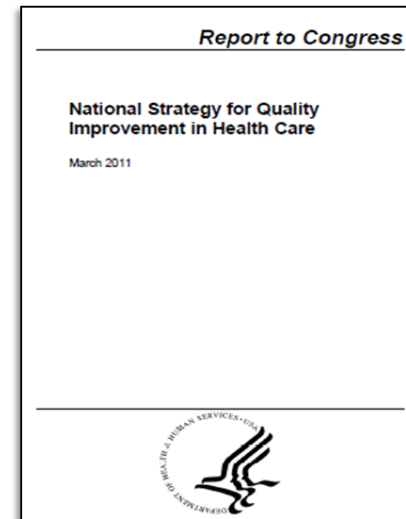
- Make care safer
- Strengthen person and family center care
- Promote effective communications and care coordination
- Promote effective prevention and treatment
- Promote best practices for healthy living
- Make care affordable



The National Quality Strategy

Six Priorities

- Make care safer by reducing harm caused in the delivery of care
- Ensure that each person and family are engaged as partners in their care
- Promote effective communication and coordination of care
- Promote effective prevention and treatment practices for the leading causes of mortality, starting with cardiovascular disease
- Work with communities to promote wide use of best practices to enable healthy living
- Make quality Care more affordable for individuals, families, employers, and governments by developing and spreading new health care delivery models



CMS Affinity Groups

CMS established Quality Affinity Groups to facilitate alignment and coordination across the agency on topics that crosses multiple components



Nursing Home Convergence

- Establish the vision for nursing homes in the future
- Align all available resources to accomplish the vision
 - Policy
 - Quality
 - Survey
 - Measurement
 - Payment
 - Innovation
- Build/Support the Infrastructure for high quality systems to emerge
- Engage Stakeholders/Patients/Residents/Families in this process

Vision/Mission (DRAFT)

- **Vision:** America's Nursing Homes: The care you need to live as life you love.
- **Mission:** To optimize health outcomes in nursing homes through system transformation, innovative and fair payment models, quality improvement practice, sound science and in the absence of harm with respect for an individual's wishes, culture, and special conditions.

Proposed Rule to Reform the Requirements for Long-Term Care Facilities

- The requirements for Long-Term Care (LTC) Facilities are the health and safety standards that LTC facilities must meet in order to participate in the Medicare or Medicaid Programs.
- The current requirements are found at 42 CFR 483 Subpart B.
- These requirements have not been comprehensively updated since 1991 despite significant changes in the industry
- The proposed revisions reflect advances in the theory and practice of service delivery and safety, and implement sections of the Affordable Care Act (ACA).
- The proposed rule includes a crosswalk to help readers find where existing provisions have been incorporated.

The Rule Overview

- Quality
 - An overarching principle
 - QAPI
- Alignment with HHS priorities
 - Reducing unnecessary re-hospitalization
 - Reducing unnecessary use of antipsychotics
- Implementation of Legislation
 - ACA (QAPI, Compliance and Ethics, Reporting Suspicions of a Crime, Dementia and Abuse Training)
 - Impact Act (discharge planning)

The Rule Overview (continued)

- Comprehensive Review and Modernization
 - Reorganized, Updated, Consistent with current health and safety standards
- Person-Centered Care
 - Protections maintained
 - Keeping residents and their representatives informed, involved, and in control
- Facility Assessment, Competency-Based Approach
 - Not a one-size fits all approach
 - Accounts for and allows for diversity in facilities and the populations they serve

Intent of Proposals

- Our intent is to require facilities to make thoughtful, informed staffing plans and decisions that are focused on meeting resident needs, including maintaining or improving resident function and quality of life.
- A competency-based staffing approach that takes into account a facility's self-assessment of its capabilities and capacity as well as the number, acuity, and diagnoses of its residents.
- The proposed rule contains a discussion of nurse staffing concerns and research as well as the options we considered to address this issue.
- Requirement for a physician, NP, PA or CNS to evaluate a resident prior to a non-emergent transfer to a hospital intends to mitigate unnecessary hospitalizations and ED transfers(one way to identify opportunities to treat in place).
- Antibiotic stewardship to curb development and spread of treatment resistant bacteria.

Nursing Home Requirements

Reform of Nursing Home Requirements published for comment

- Includes QAPI regulation
- Comment period closed 5pm, 9/14/15
- View the proposed rule at <http://www.gpo.gov/fdsys/pkg/FR--/pdf/-2015-17207.pdf>
 - Submit comments at: <http://www.regulations.gov>
 - Enter file code CMS-3260-P
 - Click on “Submit a Comment”

Quality Assurance Performance Improvement (QAPI)

Nursing Home Providers

- QAPI webpage <http://go.cms.gov/Nhqapi>
 - Tools
 - Links to resources
- MLN Connect Calls
- OIG Report: Adverse Events in SNFs-
Incidence among Medicare Beneficiaries

Adverse Events in Nursing Homes

Focused Survey on Medication Safety Systems

- Identify preventable adverse drug events that have occurred or may occur
- Determine whether facilities identify residents' risk factors for adverse drug events and implement individualized interventions to eliminate or mitigate those risk factors
- Determine if the facility has implemented effective systems to prevent adverse drug events as well as recognize and respond to adverse drug events that do occur in order to minimize harm for the individual and prevent recurrence of the event

Adverse Drug Event Trigger Tool

- Released via Survey & Certification Policy Memo 15-47 on July 17, 2015
- <http://www.cms.gov/Medicare/Provider-Enrollment-and-Cerrification/SurveyCertificationGenInfo/Policy-and-Memos-to-States-and-Regions.html>

National System to Report Staffing for each Nursing Home

- Levels, turnover, and tenure Auditable back to payroll data
- Section 6106 of the Affordable Care Act
- Funding provided by the IMPACT Act of 2014
- Finalized through FY16 SNF PPS Rule as 42 CFR 483.75(u)
(<https://www.federalregister.gov/articles/2015/08/04/2015-18950/medicare-program-prospective-payment-system-and-consolidated-billing-for-skilled-nursing-facilities>)
- Information and technical specifications posted at:
<http://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/NursingHomeQualityInits/Staffing-Data-Submission-PBJ.html>
- Voluntary submission by facilities: October 2015 (**Still time for facilities to volunteer**)
- Mandatory submission: July 2016

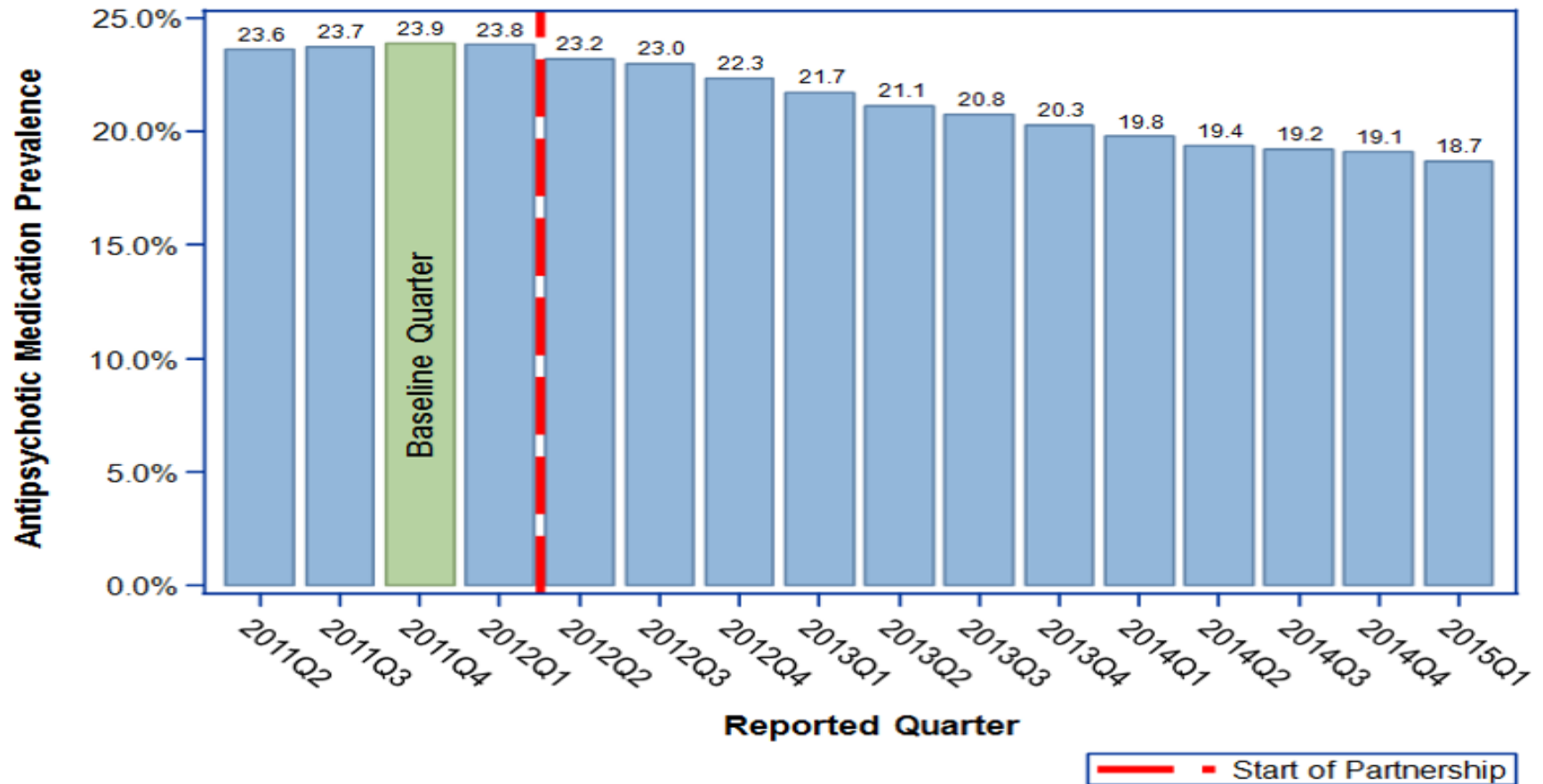
National Partnership to Improve Dementia Care in Nursing Homes

2015 & 2016 Goals

- Reduce the national prevalence of antipsychotic medication use in long-stay nursing home residents:
 - By 25 percent by the end of 2015
 - By 30 percent by the end of 2016
 - Discover ways to implement new practices
 - To enhance quality of life
 - To protect residents from substandard care
 - To promote goal-directed, person-centered care approaches

[View related press release at <http://www.cms.gov/Newsroom/MediaReleaseDatabase/Press-releases/2014-Press-releases-items/2014-09-19.html>](http://www.cms.gov/Newsroom/MediaReleaseDatabase/Press-releases/2014-Press-releases-items/2014-09-19.html)

Antipsychotic Use for Long-Stay Nursing Home Residents, 2011Q2 to 2015Q1



The National Nursing Home Quality Care Collaborative (NNHQCC) Aim

- Ensure every nursing home resident receives the highest quality care
- Instill quality and performance improvement practices
- Eliminate healthcare acquired conditions
- Improve resident satisfaction

Thank you!

Shari.Ling@cms.hhs.gov

Questions/Contacts

NHC contact - Jade.Perdue@cms.hhs.gov

To comment on the proposed rule visit

<http://www.regulations.gov>

QAPI email - Nhqapi@cms.hhs.gov

NNHQCC contact - Carmen.Winston@cms.hhs.gov

Dementia Partnership contact -

Michele.Laughman@cms.hhs.gov

IMPACT contact - Tara.McMullen@cms.hhs.gov

SNF VBP contact - Shannon.Kerr1@cms.hhs.gov