



# Improving Medicare Post Acute Care Transformation Act of 2014



*Special Open Door  
Forum for Consumers*

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*September 15, 2016*

# Welcome

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- Centers for Medicare & Medicaid Services, along with its contractor, RAND Corporation, Welcomes You To Join this National Discussion

# Focus of this Special Open Door Forum

- The IMPACT Act: Facilitating Improved and Coordinated Care Delivery
  - The Goal of the IMPACT Act
  - Expected Impact on Outcomes
  - PAC Provider Roles in Improving Coordinated Care

# Improving Medicare Post-Acute Care Transformation (IMPACT) Act of 2014

- Bi-partisan bill introduced in March, U.S. House & Senate; passed on September 18, 2014 and signed into law by President Obama October 6, 2014
- Requires Standardized Patient Assessment Data that will enable:
  - Assessment and QM uniformity
  - Quality care and improved outcomes
  - Comparison of quality across PAC settings
  - Improve discharge planning
  - Interoperability
  - Facilitate care coordination
- Requires MedPAC and CMS to evaluate and recommend unified PAC payment models

# IMPACT Act Identifies Categories to Standardize Data

- Function (e.g., self care and mobility)
- Cognitive function and mental status (e.g., express & understand ideas; mental status, such as depression and dementia)
- Special services, treatments & interventions (e.g., need for ventilator, dialysis, chemotherapy, and total parenteral nutrition)
- Medical conditions and co-morbidities (e.g., diabetes, heart failure, and pressure ulcers)
- Impairments (e.g., incontinence; impaired ability to hear, see, or swallow)
- Other categories required by the Secretary

# Why These Data Categories?

Key Factors Important for Measuring patient complexity to

- Determine resource needs
- Monitor outcomes
- Pay providers equitably

# Why Standardize Assessment Data?

One in five Medicare FFS Beneficiaries are admitted to an Acute Hospital/Year.

- Of them, 42% of go to at least one PAC:
  - Home health agencies
  - Skilled nursing facilities
  - Inpatient rehabilitation hospitals
  - Long term care hospital
- A Substantial Number Use 2 or more PAC Services During an Episode of Care

# PAC Utilization Patterns Following Hospital Discharge

Episode Pattern <sup>1</sup>	Count (5% Sample)	Percent of PAC Users (N=109,236)	Cumulative Percent	Mean Episode Payment	Mean Episode Length of Stay
AH	25,238	23.1	23.1	\$12,696	48.9
AS	18,714	17.1	40.2	17,930	44.2
ASH	8,474	7.8	48.0	22,208	76.4
AO	6,533	6.0	54.0	8,165	40.0
AHA	4,909	4.5	58.5	25,035	57.2
AIH	3,066	2.8	61.3	30,915	69.3
AHO	2,941	2.7	64.0	14,250	88.0
ASAS	2,934	2.7	66.7	33,346	81.7
ASA	2,092	1.9	68.6	28,106	47.2
ASO	1,993	1.8	70.4	18,805	87.1
AHAH	1,635	1.5	71.9	26,956	171.5
AIO	1,467	1.3	73.2	27,270	79.1
AI	1,382	1.3	74.5	25,330	17.4

NOTES:

1. A=Acute Hospital; H=HHA; I=IRF; L=LTCH; O=Outpatient Therapy; S=SNF/

Source: Gage et al. (2009). *Examining post-acute care relationships in an integrated hospital system*, ASPE

# What Outcomes Are Expected from the IMPACT Act?

- Standard terminology to measure patient complexity:
  - At any point in time during the stay or across services
  - Evaluate outcomes: changes between admission and discharge from care
  - Communicate across caregivers (acute, PAC, social support)
  - Measure costs equitably
  - Set payments equitably

# What Outcomes Are Expected from the IMPACT Act?

## Improve the Value of Care

- Are “similar” patients discharged to different types of PAC??
- Do outcomes for “similar” patients differ by type of PAC used?

# How Can the IMPACT Act Help YOU Improve Care Coordination?

- Facilitate consistent and reliable definition of patient complexity and needs
- Improve communication across an episode of care by:
  - Using common language across medical professions to define patient complexity
  - Allowing interoperability of data across organizations involved in episode of care
- Improve care transitions by:
  - Preventing potential adverse events

# Roles of PAC Providers in Supporting Coordinated Care

- Improve communication with PAC liaisons about patient complexity before transfer
- Enable timely transfer of information about patient's:
  - Medical status
  - Functional status
  - Cognitive status
  - Care preferences
- Timely transfer of information to patient's other caregivers, including Primary Care Physician, family members, residential support systems

# Why Are We Having This Open Door Forum?

- Facilitate discussion with the array of PAC providers about how the IMPACT Act can help you:
  - improve care
  - measure outcomes
  - improve value, and
  - build systems that achieve the Triple Aim

# What Do We Hope To Gain Today?

Input from you on:

- Potential ways the IMPACT Act can help improve patient-centered care coordination and develop better healthcare delivery systems
- Potential barriers to improving care coordination and healthcare delivery systems
- Roles providers can play in implementing the IMPACT Act

# Some Questions to Get us Started

- How can standardized information help you improve care coordination?
  - As a provider, what information do you need to facilitate a safe, effective care transition? When would it be helpful to have this information? How would you suggest it be presented?
  - What elements do you think are important for distinguishing the value or importance of your care in the patient's episode of care?
  - What types of information do you currently share when coordinating patient care that you think could be better conveyed? And why is this information important to care coordination?

# Some Questions to Get us Started

Care Coordination: What type of information would be helpful for improving care coordination across an episode of care for ...?

- Hospital staff (hospitalist, surgeon, case manager)
- PAC staff (medical director, case manager, treatment team)
- Patient's primary care physician
- Patient's family and social support systems
- Patient

# Continued Opportunity for Stakeholder Engagement

- Small group discussions with PAC providers and Researchers
- Technical Expert Panels
- Conference Presentations
- Future Special Open Door Forums

# Summary

- Goal of the IMPACT Act is to improve care coordination/facilitate better care within and across services
- Discuss provider needs and how the IMPACT Act can help YOU facilitate better care coordination and improve care transitions
- Future Stakeholder Engagement Opportunities

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# THANK YOU

for taking the time to give us your  
input on this important national  
effort!!

# Want to Get Involved?

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Please send  
comments/questions/ ideas  
to the CMS IMPACT Mailbox:  
[PACQualityInitiative@cms.hhs.gov](mailto:PACQualityInitiative@cms.hhs.gov)