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Official CMS news from the Medicare Learning Network

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News & Announcements

CMS Takes Action to Lower Prescription Drug Costs by Modernizing Medicare

On November 26, CMS published a proposed rule for Medicare Parts C and D that would strengthen negotiations with prescription drug manufacturers to lower costs and increase transparency for patients. The proposed policies for 2020 would ensure that Medicare Advantage and Part D plans have more tools to negotiate lower drug prices, and CMS is also considering a policy that would require pharmacy rebates to be passed on to seniors to lower their drug costs at the pharmacy counter. Comment on these proposals and other policies under consideration by January 25.

For More Information:

- [Proposed Rule](#)
- [Press Release](#)
- [Fact Sheet](#)
- [Blog](#)

Nursing Homes: Efforts to Improve Patient Safety, Quality of Care

On November 20, CMS announced upcoming efforts to support better care and outcomes for nursing home residents under the Civil Money Penalty Reinvestment Program (CMPRP). This three-year initiative aims to

improve residents' quality of life by equipping nursing home staff, administrators, and stakeholders with technical tools and assistance to enhance resident care.

As part of the CMPRP, we will develop a variety of work products for nursing home professionals, such as staff competency assessment tools, instructional guides, training webinars, and technical assistance seminars. These supports aim to help staff reduce adverse events, improve dementia care, and strengthen staffing quality, including by reducing staff turnover and enhancing performance.

We released our first toolkit in the CMPRP series, the Nursing Home Staff Competency Assessment and supporting materials; see the Downloads section of the [CMPRP](#) webpage. The competency assessment is designed to help nursing home frontline and management staff evaluate their skills. It includes several questions to gauge staff knowledge about behavioral, technical, and resident-based capabilities.

See the full text of this excerpted [CMS Press Release](#) (issued November 20), which describes our other initiatives to strengthen safety and health outcomes for nursing home residents.

New Online Tool Displays Cost Differences for Certain Surgical Procedures

On November 27, CMS launched a new online tool that allows consumers to compare Medicare payments and copayments for certain procedures that are performed in both hospital outpatient departments and ambulatory surgical centers. The Procedure Price Lookup tool displays national averages for the amount Medicare pays the hospital or ambulatory surgical center and the national average copayment amount a beneficiary with no Medicare supplemental insurance would pay the provider.

For More Information:

- [Procedure Price Lookup Tool](#)
- [Blog](#)

Improved eCQI Resource Center Website

Visit the updated and redesigned [Electronic Clinical Quality Improvement \(eCQI\) Resource Center](#) website. The eCQI Resource Center is a one-stop shop for federal eCQI initiatives that includes the most current electronic clinical quality measure (eQIM) specifications, as well as links to the tools, standards, education, and materials critical to support development, testing, implementation, and reporting of eQIMs. Send suggestions for improvement, news, events, and content to ecqi-resource-center@hhs.gov.

Hospital-Based Incident Command Systems: Real Experiences and Practical Applications

A [presentation and recording](#) are available from the November 14 Hospital-Based Incident Command Systems: Real Experiences and Practical Applications webinar hosted by the HHS Office of the Assistant Secretary for Preparedness and Response [Technical Resources, Assistance Center, and Information Exchange](#). Learn from large health care organizations who recently experienced an emergency.

World AIDS Day is December 1

World AIDS Day raises awareness of the global impact of HIV and AIDS. People aged 50 and older have many of the same HIV risk factors as younger people but may be less aware of their risk. Use this opportunity to talk to your patients about the importance of HIV prevention and recommend screening if appropriate.

For More Information:

- [Preventive Services](#) Educational Tool
- [HIV/AIDS](#) website, Centers for Disease Control and Prevention (CDC)

- [World AIDS Day](#) webpage, CDC

Visit the [Preventive Services](#) website to learn more about Medicare-covered services.

Provider Compliance

Payment for Outpatient Services Provided to Beneficiaries Who Are Inpatients of Other Facilities — Reminder

In a recent report, the Office of the Inspector General (OIG) determined that Medicare inappropriately paid acute-care hospitals for outpatient services provided to beneficiaries who were inpatients of other facilities, including long term care hospitals, inpatient rehabilitation facilities, inpatient psychiatric facilities, and critical access hospitals. As a result, beneficiaries were unnecessarily charged outpatient deductibles and coinsurance payments.

All items and non-physician services provided during a Medicare Part A inpatient stay must be provided directly by the inpatient hospital or under arrangements with the inpatient hospital and another provider. Use the following resources to bill correctly:

- [Medicare Inappropriately Paid Acute-Care Hospitals for Outpatient Services They Provided To Beneficiaries Who Were Inpatients of Other Facilities](#). OIG Report, September 2017.
- [MLN Matters® Special Edition Article](#)
- [Provider Compliance Tips for Ordering Hospital Outpatient Services](#) Fact Sheet
- [Acute Care Hospital Inpatient Prospective Payment System](#) Fact Sheet: See payment information on page 3
- [Items and Services Not Covered Under Medicare](#) Booklet, Page 12
- [Medicare Claims Processing Manual, Chapter 3](#), Section 10.4

Upcoming Events

IPPS Final Rule: Changes to the Medicare Promoting Interoperability Program Webinar — December 5

Wednesday, December 5 from 12 to 1 pm ET

[Register](#) for this webinar.

During this webinar on the 2019 Inpatient Prospective Payment System (IPPS) final rule, CMS explains major changes to the Medicare Promoting Interoperability Program for 2019 and 2020. Topics:

- 2019 and 2020 Electronic Health Record (EHR) reporting period
- 2015 edition requirements for certified EHR technology
- Performance-based scoring methodology
- Objective/measure changes for 2019

Palliative Care for Dually Eligible Older Adults Webinar — December 5

Wednesday, December 5 from 12 to 1:30 pm ET

[Register](#) for this webinar.

This webinar shares strategies for skillful communication, recognition, and response to needs of beneficiaries and their families throughout the course of serious illness and engagement of palliative care consultants as an added layer of support. Continuing Medical Education (CME) and Continuing Education (CE) credits may be available.

SNF PPS: New Patient Driven Payment Model Call — December 11

Tuesday, December 11 from 1:30 to 3 pm ET

[Register](#) for Medicare Learning Network events.

On October 1, 2019, the new Patient Driven Payment Model (PDPM) is replacing Resource Utilization Group, Version IV (RUG-IV) for the Skilled Nursing Facility (SNF) Prospective Payment System (PPS). Topics:

- Overview of PDPM, a new case-mix classification system for SNF Part A beneficiaries
- Changeover from RUG-IV to PDPM

For more information, review the FY 2019 SNF PPS [final rule](#), and visit the [PDPM](#) webpage. A question and answer session follows the presentation; however, attendees may email questions in advance to PDPM@cms.hhs.gov with “December 11 Call” in the subject line. These questions may be addressed during the call or used for other materials following the call.

Target Audience: SNF facilities, administrators, and clinicians.

Medicare Learning Network® Publications & Multimedia

FQHC PPS Recurring File: CY 2019 Update MLN Matters Article — New

A new MLN Matters Article MM10990 on [Update to the Federally Qualified Health Center \(FQHC\) Prospective Payment System \(PPS\) for Calendar Year \(CY\) 2019 - Recurring File Update](#) is available. Learn about changes to the payment rate and geographic adjustment factors.

Home Health Call: Audio Recording and Transcript — New

An [audio recording](#) and [transcript](#) are available for the [November 13](#) call on the Home Health Services: Review Choice Demonstration. Find out about the new demonstration that will begin in Illinois.

Medicare Basics: Commonly Used Acronyms Educational Tool — Revised

A revised [Medicare Basics: Commonly Used Acronyms](#) Educational Tool is available. Learn about:

- Acronyms frequently used in Medicare publications
- Webpage references for certain acronyms
- Creating a personalized list of the acronyms you use

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