

CMS Quality Conference 2015: Industry Leaders Discuss IMPACT Act

Tara McMullen:

Improving Medicare Post-Acute Care Transformation Act is a, or was a, bipartisan bill passed on September 18th by Congress and later signed into law by President Obama on October 6th, 2014.

Dr. Shari Ling:

The IMPACT Act creates a tremendous opportunity for not only our post-acute care providers but healthcare providers in general to, for the first time, be able to know, quantify, and measure the patients' functional status and in a way that's consistent across post-acute care settings.

Dr. Kate Goodrich:

What the IMPACT Act does is, it requires that we implement uniform, standardized data elements into the healthcare assessments that we currently require for post-acute care settings. Care data set for the long-term care; for the rehab facilities, the earth PAI or Patient Assessment Instrument; OASIS for home health; and the minimum data set for nursing homes.

Tara McMullen:

There are many reasons why the IMPACT Act basically was mandated into law, or was brought into law and is now the mandate which we follow for standardization. Many reasons occur because of standardization itself. The lack of comparable standardized data actually undermines the ability to evaluate the appropriate settings of care for individuals, so it actually takes away the decision-making abilities for beneficiaries and their families to choose the most appropriate setting of care.

Dr. James Lett:

I'm a long-term care physician, geriatrician. I practice not only from an office at one time but also through all the post-acute care systems; health, long-term acute care hospitals, inpatient rehab facilities, and especially skilled nursing facilities. What we have never had is continuity of communication between the sides of care. We could never compare apples to apples; it was apples to oranges because each side of care has its own assessment issue.

Catherine Fulton:

The IMPACT Act is probably long overdue and very welcome. It's a good opportunity to move the skilled nursing facilities, long-term care, home health, and inpatient rehab facilities forward together to make post-acute documents usable across the systems, across the settings for quality improvement payment. It's too bad it's not -- this was not done prior with inpatient hospital programs, but to move forward together at this point in time is a wonderful, wonderful step forward.

Tara McMullen:

Making care safer, strengthen person and family engagement, promote effective communication and coordination in care -- that's a key stone to the IMPACT Act. Making care affordable, another key stone to the IMPACT Act. Work with communities to promote best practices of healthy living and promote effective prevention and treatment.

Debbie Hattery:

So because we always want to encourage collaboration between patients' providers and communities, this is really a golden opportunity to give us the information to be able to do that in a very great way.

Dr. Lett:

Well, it's what we've needed for years and years, again to be able to compare patients across sites of care, deliver that information from one side of care to another so that there is the best possible continuity for patients throughout the entire acute illness, chronic illness improvement and hopefully returning home.