

On June 7, 2019, the Centers for Medicare & Medicaid Services released a series of short videos to assist providers with coding select Section GG items on the OASIS, IRF-PAI, LTCH CARE Data Set, and the MDS. The SNF PPS Patient Driven Payment Model (PDPM) relies on accurate coding of several MDS Section GG mobility and self-care items that impact the PT, OT, and Nursing component per-diem case-mix payment rates. For more info <u>click here</u>

FY 2020 SNF VBP Program performance scores have posted:

The SNF VBP Program rewards skilled nursing facilities (SNFs) with incentive payments based on the quality of care they provide to Medicare beneficiaries, as measured by a hospital readmissions measure. The second year of the SNF VBP Reports were published August 2, 2019. The VBP reports can be located in the CASPER reporting link on the 'Welcome to the CMS QIES Systems for Providers' web page. Please forward your VBP reports to our office to calculate the 10/1/19 Medicare rates.

Proposed Rule: CMS to Amend, Delay Certain Phase 3 Requirements of Participation:

This <u>proposed rule</u> would reform the Medicare and Medicaid long-term care requirements that the Centers for Medicare & Medicaid Services has identified as unnecessary, obsolete, or excessively burdensome. This rule would increase the ability of health care professionals to apportion resources to improving resident care by eliminating or reducing requirements that impede quality care or that divert resources away from providing high quality care.

Medicare & Medicaid Programs – Revision of Requirements for Long-Term Care Arbitration Agreements:

This <u>final rule</u> amends the requirements that Long-Term Care (LTC) facilities must meet to participate in the Medicare and Medicaid programs. Specifically, CMS is repealing the prohibition on the use of pre-dispute, binding arbitration agreements. CMS is also strengthening the transparency of arbitration agreements and arbitration in LTC facilities. This final rule supports residents' rights to make informed choices about important aspects of their health care.

Events, News & Notes

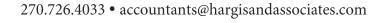
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Medicare Advantage and PDPM:

The implementation of Patient-Driven Payment Model (PDPM) is quickly approaching. PDPM will be replacing the Resource Utilization Group IV (RUG-IV) prospective payment system effective 10/1/19. There have been various rumblings of Medicare Advantage plans adopting or not adopting the PDPM payment model. Every facility should contact EACH Medicare Advantage Plan regarding the payment model that will be effective for 10/1/19.

Fiscal Year 2020 Payment and Policy changes or Medicare Skilled Nursing Facilities See CMS fact sheet Here. Contact your client Manager for more detail.



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