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SunSolutions **SPOTLIGHT** News Break

March 15, 2012, CMS Update: CMS Announces New Initiative to Reduce Costly and Avoidable Hospitalizations Announcement of Request for Applications

NEW OPPORTUNITY FOR BETTER CARE FOR NURSING FACILITY RESIDENTS THROUGH ENHANCED COORDINATION EFFORTS

Overview

In March 2012, the Centers for [Medicare](#) & Medicaid Services (CMS) issued a request for applications to participate in the Initiative to Reduce Avoidable Hospitalizations among Nursing Facility Residents. This new effort aims to improve the quality of care for people residing in nursing facilities.

CMS will support organizations that will partner with nursing facilities to implement evidence-based interventions to improve the quality and costs of care. The initiative is focused on long-stay nursing facility residents who are enrolled in the [Medicare and Medicaid](#) programs, with the goal of reducing avoidable inpatient hospitalizations.

Background

Too often, nursing facility residents experience potentially avoidable inpatient hospitalizations. These hospitalizations are expensive, disruptive and disorienting for frail elders and people with disabilities. Nursing facility residents are especially vulnerable to the risks that accompany hospital stays and transitions between nursing facilities and hospitals, including medication errors and hospital-acquired infections.

Many nursing facility residents are enrolled in both the Medicare and



Corporate Compliance Review

Be Proactive...

With ever increasing regulatory transparency and the recent OIG activities for facility audits, now more than ever it is important to have an effective compliance program. Did you know that an effective compliance program can reduce fines under federal sentencing guidelines?

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SunSolutions offers peace of mind by assisting your facility in development and oversight of a Corporate Compliance program. SunSolutions Corporate Compliance products are customized and designed to address areas of high risk.

On-site in depth risk

Medicaid programs (Medicare-Medicaid enrollees). CMS research on Medicare-Medicaid enrollees in nursing facilities found that approximately 45% of hospital admissions among those receiving either Medicare skilled nursing facility services or Medicaid nursing facility services could have been avoided, [accounting](#) for 314,000 potentially avoidable hospitalizations and \$2.6 billion in Medicare expenditures in 2005.

Initiative

Through this initiative, CMS will partner with eligible, independent, non-nursing facility organizations (referred to as “enhanced care & coordination providers”) to implement evidence-based interventions that reduce avoidable hospitalizations. Eligible organizations can include physician practices, care management organizations, and other public and not-for-profit entities.

The enhanced care & coordination providers will collaborate with States and nursing facilities, with each enhanced care & coordination provider implementing its intervention in at least 15 partnering nursing facilities.

Applicants will propose an intervention that meets the objectives of the initiative, which those selected will then implement. All enhanced care & coordination providers in this initiative must:

- Hire staff who maintain a physical presence at nursing facilities and partner with nursing facility staff to implement preventive services;
- Work in cooperation with existing providers;
- Facilitate residents’ transitions to and from inpatient hospitals and nursing facilities;
- Provide support for improved communication and coordination among existing providers; and
- Coordinate and improve management and monitoring of prescription drugs, including psychotropic drugs.

For example, past demonstrations have reduced avoidable hospitalizations by deploying nurse practitioners in nursing facilities to manage residents’ medical needs on the spot, when possible. Others have implemented quality improvement and communications tools to identify, assess, communicate, and document changes in resident status.

Interventions will be evaluated for their effectiveness in improving health outcomes and providing residents with a better care experience. This initiative is expected to last for four years from August 2012 to August 2016.

Application Process

Organizations interested in applying to participate in this initiative must submit a proposal by June 14, 2012. The Request for Applications is available by searching for CFDA Number 93.621 at www.grants.gov. Applicants must include letters of support from the relevant State Medicaid Director and State [Survey](#) & Certification Director and letters of intent from at least 15 nursing facility partners in the same State. Notices of Intent to Apply are due April 30, 2012.

assessment to:

- Billing Practices
- Policies and Procedures
- Personnel and Contractor Records
- Admission/Discharge Data

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- PPS Analysis
- Medicare Program Training
- MDS/RUG Review and Training
- Final Rule Mitigation Audit and Training
- RAC/ADR Preparation & Analysis
- Operations Assessment
- Case Mix analysis/Training Medicare Institute
- Medicare Compliance and MDS Accuracy Review

Quick Questions to Ask Yourself:

- Are you confident you're not at risk for billing default days?
- Does your MDS Nurse understand the new policies for COT and EOT OMRA Assessments?
- Are you doing everything possible to secure your Medicare Rate?

If you answered no to any of the above questions, you can't afford not to contact SunSolutions Consulting.

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Contact Info

Contact SunSolutions Consulting at

CMS will give preference to applications for initiatives in geographic locations where there are high Medicare costs, high hospital readmission rates, and where Medicare-Medicaid enrollees account for a high percentage of nursing facility residents.

Additional Information

This initiative was developed jointly by the CMS' Center for Medicare and Medicaid Innovation (Innovation Center) and the Medicare-Medicaid Coordination Office, which were created by the Affordable Care Act. Both offices offer various opportunities and supports to further efforts to strengthen the Medicare and Medicaid programs and improve care. The Innovation Center works across the Medicare and Medicaid programs and Children's Health Insurance Program to deliver better care for individuals, better health for populations, and lower growth in expenditures. The Medicare-Medicaid Coordination Office works to better integrate the Medicare and Medicaid programs to ensure full access to seamless, high-quality care in a cost-effective manner.

sunsolutionsconsulting@sunh.com or tollfree - (888) 867 2220 for a listing of products, services or to schedule an educational seminar/ teleconference.

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