



MMDA Public Policy Update

Public Policy Update

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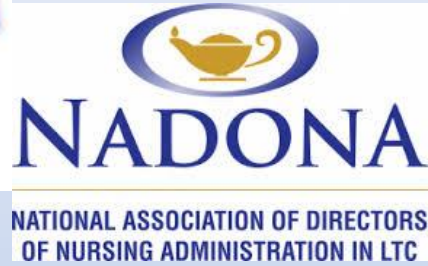
11/12/21

How Does AMDA Advocate

- Direct Lobbying
 - Congress
 - Federal Agencies
- Grassroots
- AMA House of Delegates
- AMA Relative Value Scale Update Committee (RUC) - group of 32 physicians who advise Medicare on how to value a physician's work
- Many technical expert panels, coalitions etc



Our Usual Partners



Right Now

- Reconciliation package – Build Back Better Act
 1. Funding to improve the accuracy of SNF data by appropriating \$50 million to improve MDS, PBJ, and VBP data.
 2. \$250 to audit SNF cost reports
 3. \$325 in survey and audit improvements which adds infection control deficiencies and also staff provisions.
 4. \$50 million for studies on staff to resident ratios in SNF which includes recommendations on minimum staffing levels.
- Lots of politics – unclear of path forward but likely to move forward soon

Advocacy Around COVID-19

- Weekly calls with CMS/CDC
- Continued conversations with Congressional staff
- Project ECHO
- Media Attention
- Top Issues:
 - mAB Availability
 - Strike Team Funding
 - Booster shots
 - Major staffing crisis (strike teams)
 - Public Medical Director Listing
 - Long-term impact



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PHE Expires January 15, 2022

(rumor is will be extended as far as
June 2022)

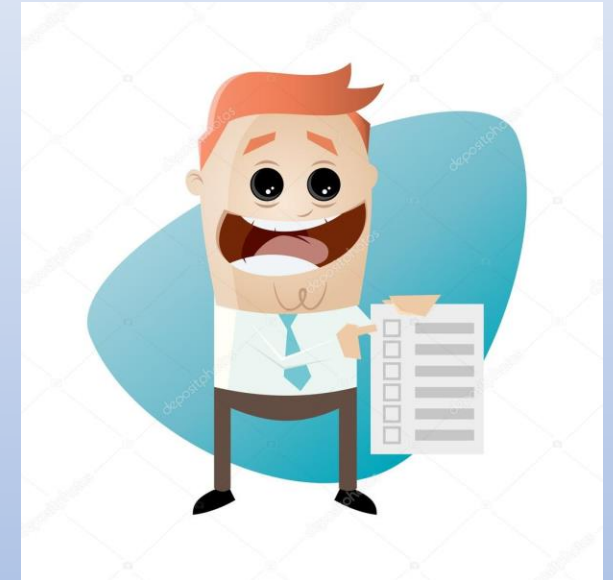
COVID-19 State Advocacy

- Decisions are made locally
- AMDA members grassroots meeting to discuss best practices and share ideas
- AMDA State Advocacy Task Force
 - New York Task Force specifically calls out NYMDA
 - California legislation on medical director certification
 - Pennsylvania plan for vaccine distribution
 - Maryland Strike Teams and Post-Acute Summit
 - Kentucky Governors Task-Force



Public Medical Director Registry/Listing

- Bi-partisan letter from Congress asking CMS to implement
- States have begun conversations to implement on state level
- Continued discussions with CMS
- Clear need given COVID/other crisis communication
- Public must have access to information on clinical leadership
- **Update:** California Legislation signed October 2021 mandates a CMD and public listing of the medical director



Strike Team Funding

- \$500 million authorized in American Rescue Plan 2021
- Authorized for nursing homes with suspected COVID
- New guidance released to states <https://paltc.org/publications/cdc-releases-guidance-nursing-home-strike-team-funding>
- Funding available now! Make sure you are involved in discussions!
- Important to be at the table – AMDA policy brief <https://paltc.org/sites/default/files/Policy%20Brief%20on%20NH%20Strike%20Teams%20final%20v4.pdf>

Staffing/Workforce

- AMDA's updated position statement (evolving)
- Public Pressure:
 - Center for Medicare Advocacy – staffing levels impact COVID deaths
<https://medicareadvocacy.org/nursing-home-staffing-is-key-to-covid-deaths/>
 - Health Affairs in March 2021 – staff turnover exceeds 100%
 - More pressure on minimum staffing levels
 - Full time infection control specialist
 - 24hr RN coverage
 - Infection control specialist

AMDA statements:

- Staffing and trained workforce are key to quality care
- Benefits/career ladders and training all factors for direct care workforce
- Continued support Geriatric Workforce Enhancement Program (GWEP) and Geriatric Academic Career Awards (GACA)



Any decisions about staffing need to consider broader issues, including:

- the complexity and acuity of a facility's population;
- the functional level of residents and services required;
- creating consistent work schedules that are flexible to accommodate the changing needs of the residents along with improving consistent communication and documentation regarding the care needs of residents;
- the existence of staffing shortages for some types of staff in some geographic locations, and temporary staffing shortages due to such events as employee illness or termination;
- defining and including other categories of caregivers, such as medication aides, feeding assistants, restorative aides, family members, and activities professionals;
- the quality, competence, and engagement of staff leadership and supervision;
- addressing adequacy of training and skills development, and
- the career and educational development of staff (especially among newly licensed nurses).

Telehealth

- PHE 1135 waiver remains in effect! All telehealth is allowed with no limitations
 - Paid at the same rate as in person visit
 - Use modifier 95
- Nursing homes can bill per encounter as an originating site using code Q3014
- After PHE:
 - CMS finalized once every 14 days restriction on subsequent care nursing home codes (99307-99310)
 - Initial visit codes (99304-99306) **NOT** included post PHE
 - Added home/domiciliary established patient codes to telehealth list for the rest of the year in the year in which the PHE ends
 - Looking to test others
 - No geographic restrictions
- AMDA Telehealth workgroup working on use cases around telehealth
- Advocating for removal of barriers to telehealth
- Advocating for RUSH Act re-introduction
- **Update:** Proposed physician fee schedule released on 7/13/21 does NOT make any changes to telehealth for nursing home codes





Healing Together Campaign

A Campaign by AMDA's Behavioral & Mental Health Advisory Council

Healing Together addresses COVID-related grief and trauma while teaching and celebrating resilience in post-acute and long-term care leadership and staff. We will discuss themes of survivor guilt, burnout, compassion fatigue, complicated grief, and deep convictions for doing their jobs well and staying “strong.”

Highlights to include:

- Free webinar series starting July 22nd with a new live webinar every 6 weeks (non CME, recordings will be made available on AMDA's website).
- Discussions & mental health resources accessible in “AMDA Social” on the *AMDA Mobile App*
- Trauma informed conversation guides and teachings on self-compassion.
- Ability to connect and share with other professionals in the PALTC community



Phew...

Questions so far?

Evaluation and Management Coding

- Drs. Chuck Crecelius/Bob Zorowitz represented AMDA/AGS on AMA CPT/RUC Evaluation and Management Workgroup chaired by Drs. Pete Hollman and Barb Levy
- Same process that revised office outpatient office E&M that is in effect in 2021
- Thank you to all who participated in the survey!



Payment for Nursing Home Services - Review

- AMDA advocacy helped avoid a nursing home/assisted living services, home health, and therapy services faced upwards of 10% cut for 2021
- AMDA members sent more the 1,000 letters to Congress talking about impact of cuts to nursing home/AL/home health services
- Consolidated Appropriations Act of 2021 enacted December 27, 2020
 - Provided a 3.75% increase in MPFS payments for CY 2021
 - Suspended the 2% payment adjustment (sequestration) through March 31, 2021
 - Reinstated the 1.0 floor on the work Geographic Practice Cost Index (GPCI) through CY 2023
 - Delayed implementation of the inherent complexity add-on code for evaluation and management services (G2211) until CY 2024

Payment for Nursing Home Service: Update

- Proposed physician fee schedule includes a budget neutrality adjustment and end to 3.75% increase for CY 2021. Results in 3-5% cut to nursing home services for CY2022
- Congressional intervention possible (hopefully likely)
- Other E&M services including nursing facility revised. Next year's rule will be important

Defining the Core Skills and Activities of the Attending Physician in Post-Acute and Long-Term Care



A recent article in JAMDA details an ABPLM job analysis of attending physicians in long term/post-acute care that documents the unique and specific role they play in this setting.

- AMDA – The Society for Post-Acute and Long-Term Care Medicine and the ABPLM continue to investigate options for recognition of physicians in PALTC.
- A promising option for recognition is as part of the American Board of Medical Specialties' (ABMS) Focused Practice Designation.
 - These areas are more limited in scope than those covered by subspecialty designation or may be procedural but without the extensive scientific, clinical, and organizational underpinnings of a separate subspecialty.

DOI: <https://doi.org/10.1016/j.jamda.2021.06.007>



Transitions can be difficult...

Antipsychotics/Neuropsychiatric Symptoms

- CMS has not issued final rule on PRN Antipsychotics (proposed rule issued in 2019)
- Project PAUSE - Psychoactive Appropriate Use for Safety and Effectiveness
 - Collaboration with ASCP, Gerontological Society of America, Alliance for Aging Research to develop an alternative process measure for appropriate use of antipsychotics
 - Regular meetings with CMS to discuss updates
 - May be on the agenda for Congressional hearings
 - States also interested. NY informed consent legislation
 - Impact of COVID?
- AMDA Clinical Issues Subcommittee Updating AMDA Positions
- **Update:** Signed onto Caregiver Action Network Letter to Congressional Task Force on Alzheimer's Disease and Congressional Neuroscience Caucus:
 - “People living with dementia, their caregivers and their treating physicians need a safe and effective treatment option for dementia-related psychosis and other neuropsychiatric symptoms. We feel a sense of urgency to address the lack of progress in this area. The promise of helping many more people living with the neuropsychiatric symptoms of dementia and their families with safe and effective innovative treatments is an important part of addressing the overall problem of Alzheimer's disease.”

Patient Drive Payment Model Insights



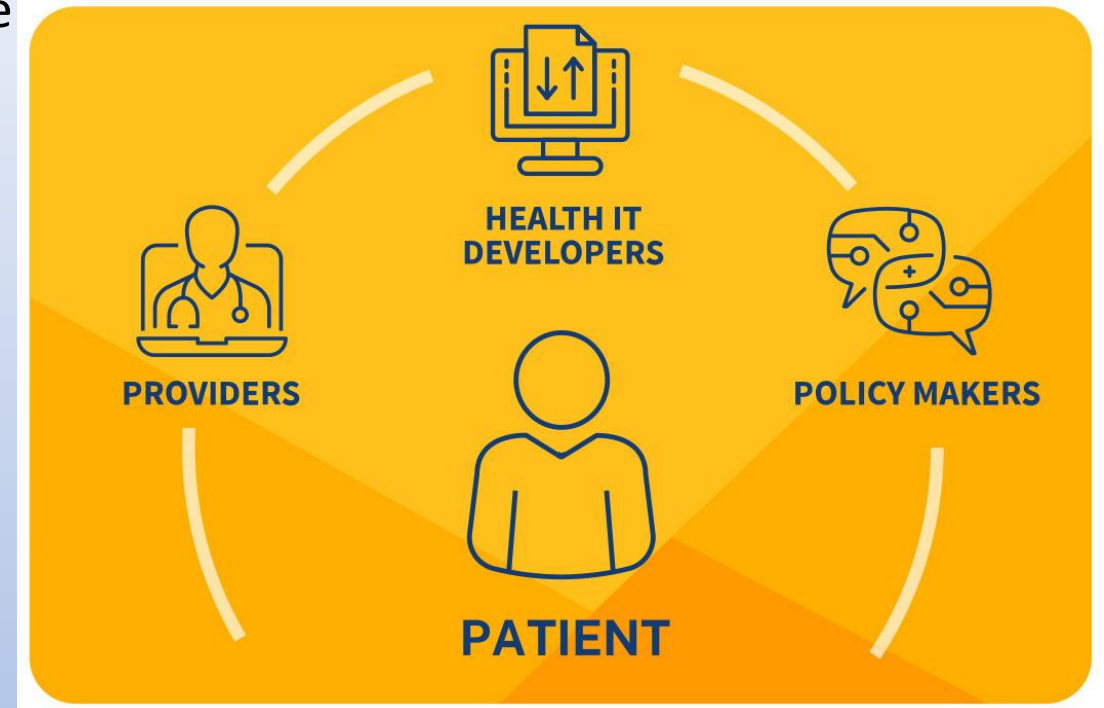
- Started Nov 2019
- Daily Rate on avg is better than anticipated, yet leaving \$ on the table
- Audits and Rug Pull haven't manifested due to pandemic, still to come
- COVID patients helping facilities take advantage of skilling in place
- 3-day waiver under utilized
- Accurate and comprehensive diagnosis coding is lacking (Missed opportunities and Non Therapy Ancillary points)
- Subpar involvement of medical team in the PDPM assessment/coding process
- Medical provider collaboration with facilities is meaningful

SNF Final Payment Rule

- Issued 4/10/2021:
<https://www.cms.gov/newsroom/fact-sheets/fiscal-year-2021-proposed-medicare-payment-and-policy-changes-skilled-nursing-facilities-cms-1737-p>
- Parity adjustment based on projected payment to SNFs. Propose a cut to adjust for budget neutrality
- Adding vaccination reporting data to Care Compare for FY 2023 (old Nursing Home Compare)
- Updates to PDPM Clinical Mappings
- Changes to SNF Value-Based Purchasing
- AMDA submitted comments
- Final rule expected soon

Health IT

- **ONC Final Rule Implementing CURES Act** – sweeping rule passes a year ago finalizing provisions on:
 - Interoperability standards
 - Data Blocking
 - Patient Access
- **PACIO Projects:**
 - Drs. Steve Buslovich, Dheeraj Mahajan working on project to standardize data flow from setting to setting using new FHIR standard
 - New Advance Care Planning project lead by Maria Moen (ADVault)
 - Clinical must connect with technological – need your expertise!
 - <http://pacioproject.org/about/>
- **Data Element Library/USCDI/TEFCA** – all efforts by CMS/ONC to provide standardized data for developers to work from to create exchange of information



<https://www.healthit.gov/curesrule/>

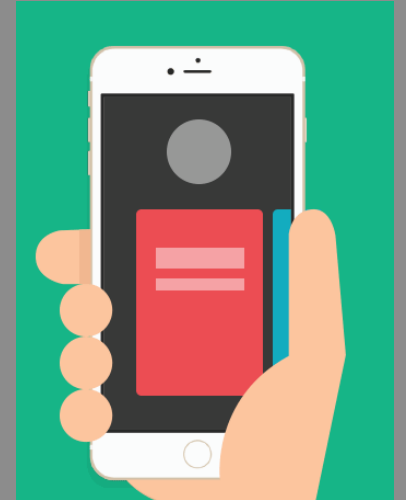


<https://paltc.org/policy>

AMDA PALTC APP

The Foundation, **YOUR** Foundation,
was proud to fund the development of the new
AMDA PALTC APP.

This is the type of project
that was possible because
of your **support.**





We made it... so far

Questions??