



knowledge  
**GAINED**



**PDPM AND MEDICARE 2020 LANDSCAPE  
AND BEYOND: A FIRST LOOK**

**LISA TRUNDY-WHITTEN**



## **PATIENT DRIVEN PAYMENT MODEL (PDPM): NEWS FROM THE FIRST FEW MONTHS**

- Therapy layoffs
- Increase in payments
- More winners than losers
- Future CMS rate adjustments



## **PDPM: STUMBLING BLOCKS**

- Delayed information upon admission
- Missed reimbursement opportunities
- Difficulties capturing information Section GG
- Disconnects between MDS and UB-04



## **WHAT IS NEXT? HOW WILL YOU ADAPT?**

### **“Invest in Innovation”**

- Adjustments to operational processes
- Shift from contract therapy to in-house model
- Evaluate higher level clinical programming
- Create stronger relationships with hospitals and provider networks



## **WHAT IS NEXT? HOW WILL YOU ADAPT?**

- Assure processes in place to capture best and most accurate ICD-10 coding
- Capture nursing acuity
- Prepare for increased audit activity
- Changes to Medicaid reimbursement



## **QUALITY REPORTING**

- Transfer of Health Information
  - Provider - Post Acute Care
  - Patient - Post Acute Care
- Standardized Patient Assessment Data Elements (SPADEs) reporting begins October 1, 2020



## **OTHER REGULATIONS IN 2020**

- Value Based Purchasing
- Special Focus Facility Designation
- Nursing Home Compare Abuse Icon





**AND BEYOND...**

Medicare Advantage and Special Needs Programs



# TYPES OF MEDICARE COVERAGE

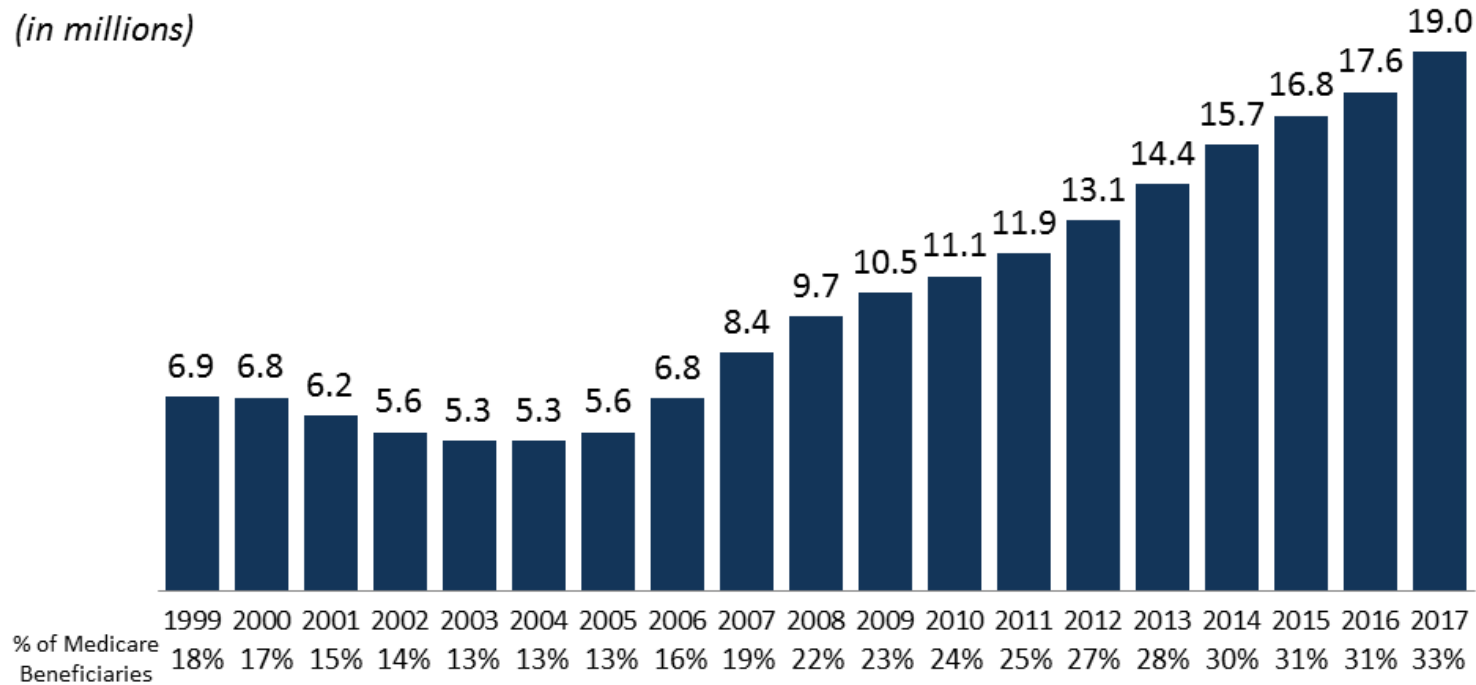
MEDICARE						
Medicare Advantage					Original Fee-For-Service (FFS)	
Traditional Medicare Advantage		Special Needs Plans			Medicare Supplemental Insurance	Prescription Drug Plan (PDP)
MA only	MA PD (includes Part D)	Institutional (ISNP)	Dual Eligible (DSNP)	Chronic Condition (CSNP)		

SOURCE: LEADINGAGE

Figure 1

## Enrollment in Medicare Advantage plans has steadily increased since 2004

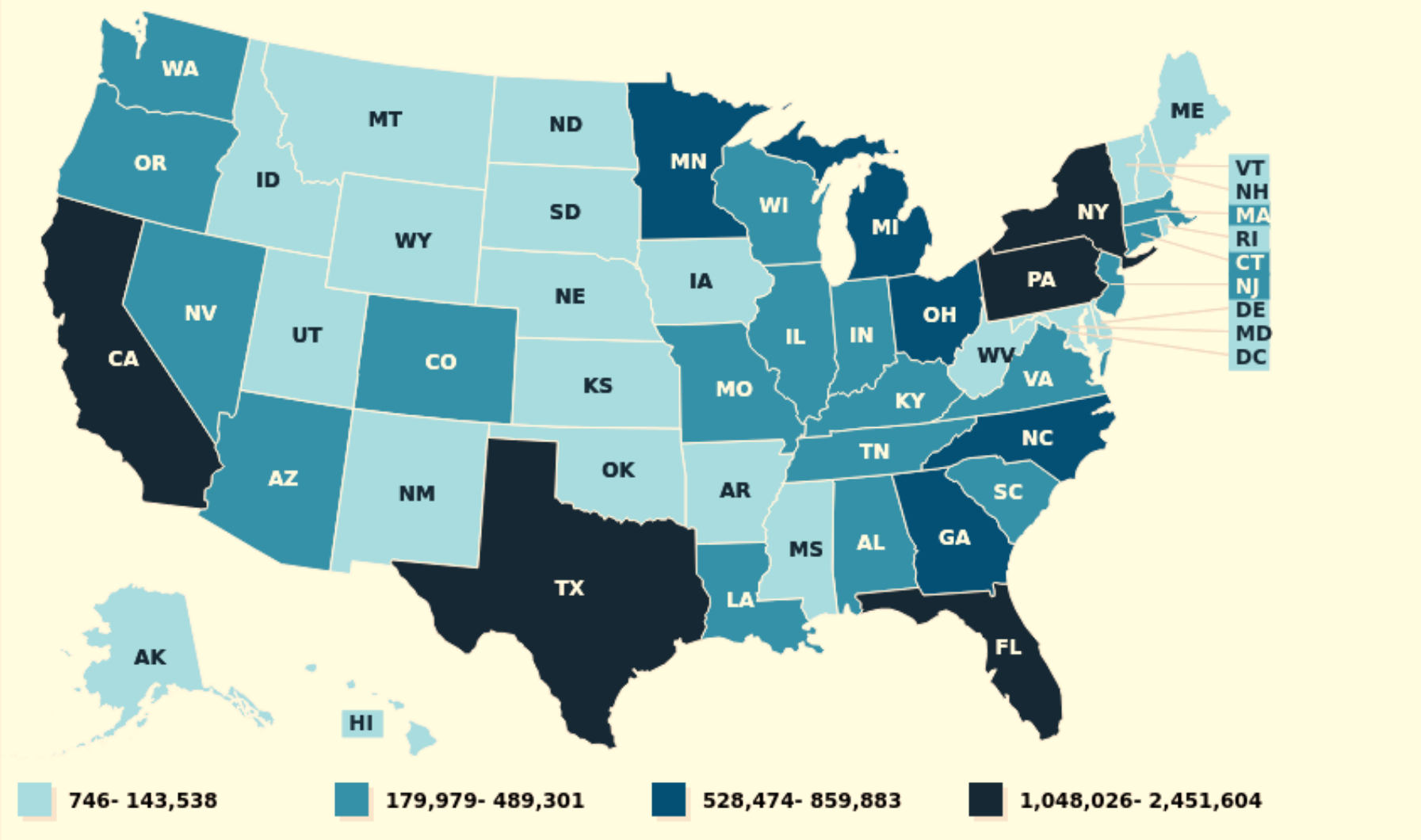
Total Medicare Private Health Plan Enrollment, 1999-2017  
(in millions)



NOTE: Includes MSAs, cost plans, demonstration plans, and Special Needs Plans as well as other Medicare Advantage plans. Excludes beneficiaries with unknown county addresses and beneficiaries in territories other than Puerto Rico.

SOURCE: Authors' analysis of CMS Medicare Advantage enrollment files, 2008-2017, and MPR, "Tracking Medicare Health and Prescription Drug Plans Monthly Report," 1999-2007; enrollment numbers from March of the respective year, with the exception of 2006, which is from April.

# MEDICARE ADVANTAGE: TOTAL ENROLLMENT: OVERALL, 2018



SOURCE: KAISER FAMILY FOUNDATION'S STATE HEALTH FACTS



## **SPECIAL NEEDS PLANS (SNPs)**

Medicare SNPs are a type of Medicare Advantage Plan (like an HMO or PPO). Medicare SNPs limit memberships to people with specific diseases or characteristics. Medicare SNPs tailor their benefits, provider choices, and drug formularies to best meet the specific needs of the groups they serve.

- Dual eligibles SNP for those eligible for both Medicare and Medicaid
- Institutional SNP for those requiring 90 days+ of nursing home care
- Chronic Care SNP for one of fifteen chronic medical conditions (e.g., ESRD)

## SNP REQUIREMENTS

- Must comply with Medicare Advantage plan rules but some additional requirements apply
- Eligibility is limited to targeted population for each SNP
- Part D prescription drug coverage
- Must have an evidence-based Model of Care (MOC) aligned with the National Committee for Quality Assurance (NCQA) standards and approved by CMS