Connecticut Association for Healthcare at Home
Clinical & Regulatory Update

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HOME HEALTH

CMS announces start dates for five-state prior authorization demo

Source: Decision Health

Despite concern from industry stakeholders about the burden of a prior authorization requirement and how it will restrict access to care, CMS has moved forward with a three-year Medicare pre-claim review demonstration for home health agencies in five states.

This demonstration will begin in Illinois no earlier than Aug. 1, in Florida no earlier than Oct. 1, in Texas no earlier than Dec. 1, and in Michigan and Massachusetts no earlier than Jan. 1, 2017, according to the rule posted in the Federal Register on June 8.

Under the demonstration, agencies will be encouraged to submit to their Medicare Administrative Contractor (MAC) a request for pre-claim review along with relevant documentation to support coverage.

Continue Reading
Home Care and Hospice Salary & Benefits Studies Currently Underway

Source: NAHC, June 9, 2016

The Hospital & Healthcare Compensation Service (HCS), in a cooperative effort with the National Association for Home Care & Hospice (NAHC), has announced that the annual Home Care and Hospice Salary & Benefits studies are currently underway. Now in their 25th year of publication, the Reports are recognized as the authoritative source for comprehensive marketplace data for home health and hospice agencies.

Both studies include data on 60-plus jobs from CEO, CFO, to RN, LPN, MSW, and HCA, to Clinical Support Staff. Data are reported by county, state, revenue size, profit type, and agency type. The results also include 19 fringe benefits, turnover rates, shift differentials, productivity data and more! New this year: Coder, Oasis Specialist, and Performance Improvement Specialist jobs, as well as how per visit staff are compensated for PTO/Vacation.

There is no cost to participate. Participants may purchase either or both Reports at 50% off the publication price.

Following are the deadlines to participate:
   - Home Care/Hospice Submission Deadline: August 8th
   - Publication Date: Home Care October 2016, Hospice November 2016

HCS is also conducting a brief Rehabilitation Salary & Benefits study. The results report data on 19 rehab jobs and benefits for home health, long-term care, and hospitals.
   - Rehab Submission Deadline: July 11th
   - Publication Date: September 2016

Questionnaires are available on the HCS website: [https://www.hhcsinc.com/survey-questionnaires.html](https://www.hhcsinc.com/survey-questionnaires.html). Any questions on participation can be sent directly to Rosanne Zabkaatzabka@hhcsinc.com. HCS, founded in 1971, is recognized as the leader in national healthcare salary and benefits research.

New Hand Hygiene Campaign Launched by CDC

Source: NAHC

The Centers for Disease Control and Prevention (CDC) recently launched the new "Clean Hands Count" campaign to encourage health care professionals, patients and their families to prevent the spread of infections by practicing good hand hygiene. The goal of the campaign is to improve healthcare provider adherence to CDC hand hygiene recommendations. The CDC stated that on average health care professionals clean their hands "less than half of the times that they should."

"Patients depend on their medical team to help them get well, and the first step is making sure healthcare professionals aren't exposing them to new infections," said CDC Director Tom Frieden, M.D., M.P.H. "Clean hands really do count and in some cases can be a matter of life and death."

The campaign also addresses what the CDC calls "myths and misconceptions" about hand hygiene, including the mistaken belief that using alcohol-based hand sanitizer contributes to antibiotic resistance or that it is damaging to hands.

In addition, the campaign attempts to empower patients by encouraging them to speak to their health care team about the importance of cleaning their hands. The CDC stated that "an estimated 722,000 healthcare-associated infections occur each year in U.S. hospitals, and about 75,000 patients with these infections die during their hospital stays."

The campaign materials are available here: [www.cdc.gov/handhygiene](http://www.cdc.gov/handhygiene).
Comments on OASIS-C2 focus on wound guidelines, burden to agencies

Source: HHL, Published Jun 13, 2016

CMS should consider the time and cost for home health agencies to train on the OASIS-C2 data set, and the new assessment items should account for updated wound care guidelines, according to the stakeholders who commented before the comment period ended May 31.

The National Association for Home Care & Hospice (NAHC) says CMS should adopt the National Pressure Ulcer Advisory Panel (NPUAP) wound staging guidelines revised in April. Those guidelines changed the terminology from pressure ulcer to pressure injury and revamped wound descriptions to be more specific (HHL 4/25/16).

HOSPICE

NHPCO Releases Talking Points on FY2017 Hospice Wage Index Proposed Rule

Since the CMS publication of the FY2017 hospice wage index proposed rule, NHPCO has been hard at work analyzing the proposed rule, seeking input from members through two listening sessions, and detailed discussions with both the Regulatory Committee and the Quality and Standards Committee. Access NHPCO’s talking points and send your own comments in to CMS on this proposed rule.

NHPCO: OIG Releases 2016 Mid-Year Workplan Update

The OIG issued a mid-year update on the FY2016 work plan, which includes reports on some hospice issues. They include concerns with fraud, waste and abuse in hospice, future planning for additional oversight on hospice care, oversight of certification surveys and hospice-worker licensure requirements, as well as a report currently underway examining election statements for patients in GIP, review of medical records to address the appropriate level of care and determine whether plans of care are developed in accordance with Medicare requirements. Find a copy of the full OIG update.

NAHC Advocacy Leads CMS to Rethink Electronic Submission of NOE/NOTR

Source: AHC, June 6, 2016

In response to advocacy by the National Association for Home Care & Hospice (NAHC), the Centers for Medicare & Medicaid Services (CMS) is now actively pursuing efforts to allow for use of the institutional claim (837I) to submit hospice Notices of Election (NOEs) and related transactions via Electronic Data Interchange (EDI). This action, in CMS' words, "would reduce, and potentially eliminate, problems with NOEs that result from errors during the Direct Data Entry (DDE) process." CMS' Provider Billing Group is currently in discussions with its National Standards Group (NSG) in the Office of Enterprise Information to explore the potential for allowing hospices to submit NOEs via EDI using a non-standard implementation of the 837I transaction. Once the Provider Billing Group receives an opinion from NSG and has planned its next steps, it will provide a status report to NAHC.
Since October 2014, one of the most administratively burdensome and costly issues that hospices have dealt with has been meeting the timely filing requirements for NOE and Notices of Termination/Revocation (NOTR). Since that time the National Association for Home Care & Hospice (NAHC) and other stakeholders have worked diligently to address the growing number of problems associated with the timely filing policy. Last year NAHC and NHPCO jointly sponsored a hospice survey to help quantify NOE/NOTR-associated costs and financial losses, and the findings of the survey indicated that the financial impact of the requirement has been considerable. Over the last year NAHC has also sought a number of clarifications from CMS and its Medicare Administrative Contractors (MACs) with the goal of easing some of the negative consequences of using direct data entry (DDE) to meet these time-sensitive requirements. While some of these efforts have met with success, each -- on its own -- has made only a relatively modest impact overall, and additional problems continue to emerge in this area.

Most Doctors Unsure How to Discuss End-of-Life Care, Survey Says
This story was authored By Barbara Feder Ostrov and is reprinted from Kaiser Health News, a nonprofit national health policy news service that is part of the nonpartisan Henry J. Kaiser Family Foundation

Source: HHCN

Doctors know it's important to talk with their patients about end-of-life care.

But they're finding it tough to start those conversations - and when they do, they're not sure what to say, according to a national poll released [April 14]. Such discussions are becoming more important as baby boomers reach their golden years. By 2030, an estimated 72 million Americans will be 65 or over, nearly one-fifth of the U.S. population.

Medicare now reimburses doctors $86 to discuss end-of-life care in an office visit that covers topics such as hospice, living wills and do-not-resuscitate orders. Known as "advance care planning," the conversations can also be held in a hospital.

Questions? Comments? Concerns?
Contact Tracy Wodatch
Connecticut Association for Healthcare at Home
Vice President of Clinical & Regulatory Services
wodatch@cthealthcareathome.org

CT Assoc for Homecare and Hospice, 110 Barnes Road, Wallingford, CT 06492

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