

Eli's Rehab Report

Payment Models: Multidisciplinary Care Planning Payment Incentives to Hit Select SNFs

Make plans for more staff training.

Better care planning could equal bigger bucks for skilled nursing facilities this fall, and it may not be long before other post-acute settings follow suit.

CMS is on a mission to trim avoidable hospitalizations, and they're testing a new payment system on 250 select SNFs to see if that will help. The agency will "provide new payments to practitioners for engagement in multidisciplinary care planning activities," according to a press release.

Participating SNFs will also receive payments to provide additional treatment for common medical conditions that often lead to re-hospitalizations. CMS lists those as pneumonia, dehydration, congestive heart failure, urinary tract infections, skin ulcers, and asthma.

Plus: SNF physicians would receive equal payments as hospital physicians for conducting a comprehensive assessment. (Medicare currently pays less for a comprehensive assessment at a SNF.)

Great Therapy Doesn't Equal Great Teamwork

Participating SNFs will be expected to enhance their staff training, according to CMS. And some facilities may need it more than others.

"Currently facilities where each department functions independently, even when they are providing excellent service and care, will fall short because of the lack of a cohesive interdisciplinary approach to the care of the patient," says **Kim Gabourel, MSPT**, senior director of rehab for **Infinity Rehab** in Wilsonville, OR. "Successful facilities will demonstrate a setting where nursing and social services know and support the therapy goals, and therapy knows and supports the nursing and social services goals and communication is paramount."

Heads up: Even if your SNF isn't selected in this payment demo, chances are, you could see a model like this down the pike, especially with the move toward outcomes-based, bundled payments.

"Although there will likely be modifications to the way the model looks now, I believe this change is necessary and inevitable, and each provider is going to have to find a way to be successful within it while meeting or exceeding the needs of each beneficiary," Gabourel says.

For more on this initiative, visit

<https://www.cms.gov/Medicare-Medicaid-Coordination/Medicare-and-Medicaid-Coordination/Medicare-Medicaid-Coordination-Office/InitiativeToReduceAvoidableHospitalizations/AvoidableHospitalizationsamongNursingFacilityResidents.html>.