

## **Eli's Hospice Insider**

## Strategy: Waste No Time In Initiating Payment Reform Prep

## Run the numbers to see how proposed rule will impact your bottom line.

Your reimbursement may change drastically under Medicare's proposed hospice payment reform. Take steps now to meet the challenge head on.

**<u>Recap</u>**: In its 2016 proposed rule for hospice payment, the **Centers for Medicare & Medicaid Services** proposes to pay routine home care at two different rates based on length of stay, as well as add visit-related add-on payments in the last seven days of life (see details in Eli's Hospice Insider, Vol. 8, No. 6). But those add-on payments would not apply to nursing home patients.

Don't wait around to see what the final rule includes. CMS has been planning hospice payment reform for a long time, and observers don't expect to see major changes to its proposed methodology.

Consider these actions to prepare for the big pay change [] before it takes a serious toll on your bottom line and agency health:

**Step 1:** Hospices should be analyzing their patient data to determine how the two-tiered payment rate will impact them, advises the **National Hospice & Palliative Care Organization.** 

**Step 2:** Conduct a second analysis that includes the hours of RNs and social workers as reported on the claim form for the seven days prior to a patient's death to see how the service intensity add-on (SIA) would impact you, counsels NHPCO's **Judi Lund Person.** 

**Step 3:** Determine how hospice patients residing in nursing homes would fare in this proposed payment structure [] both with the length of stay modeling and with the SIA payment not being available, Lund Person urges.

Note: See the details of the rule at www.gpo.gov/fdsys/pkg/FR-2015-05-05/pdf/2015-10422.pdf.