



CASE STUDY

Implementing the Nursing Facility Payment Incentives

Nursing Facility: Charles T. Sitrin Health Care Center

Location: New Hartford, NY

Number of Beds: 188

Number of NY-RAH Payment Eligible Residents: 64

CMS Nursing Home Compare Star Rating: 5 (highest rating)

NY-RAH Group: A

ORGANIZATION DESCRIPTION

Charles T. Sitrin Health Care Center is a subsidiary of the Charles T. Sitrin Network of Homes & Services, Inc., located just outside of Utica, New York. Sitrin offers a variety of services along the continuum, including residential-style long-term care homes; independent senior living apartments; assisted living; military rehabilitation; adult day health care; aquatic therapy; respite care; and the Sitrin NeuroCare specialty unit for individuals with Huntington's disease and ALS.

ACTIONS TAKEN

Educate Frontline Staff and Practitioners

At the start of Phase Two in November 2016, to prepare staff to implement best practices for treating the six conditions, policies were updated to include guidance for treating each of the conditions that aligns with the required clinical criteria and documentation procedures. Checklists were created for each condition and were placed on the facility's intranet to accommodate access for all clinical staff. Clinical staff were trained on the new policies and procedures, and practitioners were educated about the new documentation requirements and the need to provide on-site confirmation within two days of the onset of symptoms.

Create the NY-RAH Team

Sitrin formed a NY-RAH team comprised of Nursing Supervisors, Attending Physicians, and Finance and Administration staff members. The team keeps in constant contact from the onset of a resident's symptoms and routinely discusses NY-RAH-eligible conditions at an interdisciplinary morning report meeting.

Conduct Monthly Audits

The team also meets monthly to review which residents were treated for one of the six conditions, missed opportunities, and other ways to improve the process. A monthly audit is conducted to ensure all protocols were followed and documentation is complete to support the billing of the payment incentives.

Increase Capabilities and Services

To increase the staff's ability to treat certain conditions in-house (e.g., COPD and CHF), the facility implemented policies and training for IV push medications, including Lasix and Solu-Medrol. The facility also forged a relationship with a local infusion company to allow for essential IV supplies, including antibiotics, to be housed internally in order to increase the speed of delivery/treatment to the residents.

EVALUATED MEDICAL MODEL

Sitrin changed the facility medical model halfway through Year One of Phase Two, going from six community-based practitioners to two practitioners who work full-time at the facility and across the campus. The two practitioners, former hospitalists, created documentation procedures for themselves to follow, and they participate in the monthly NY-RAH team meeting to review cases. In addition, both practitioners advocate for advance care planning and participate in the nursing facility conferences. With the additional revenue received from participating in NY-RAH, the facility has invested in more RN staffing as more residents are being treated in-house with IV medications. The facility also increased supplies, such as IV pumps.

RESIDENT STORIES

Acute Care Treatment for the Six Conditions (G9679-G9684)

Resident A has a diagnosis of multiple sclerosis and neurogenic bladder, and is prone to recurrent aspiration pneumonia and UTIs leading to sepsis. Since 2012, Resident A was admitted to one area hospital nine times, with six additional emergency department (ED) visits and the resident often required ICU utilization. Since NY-RAH participation began, Resident A has had zero readmissions and ED visits. Resident A reports satisfaction that he can remain at his residential-style home while receiving acute treatment for recurrent infections.

Nursing Facility Conference (G9686)

Resident B arrived at Sitrin with an established diagnosis of inoperable uterine cancer, which was approaching end-stage. Upon admission, Resident B had poorly defined goals of care and quickly declined clinically. Her husband served as her health care proxy, and multiple family members were involved in her treatment. Each of these parties had differing expectations and health care goals. Medical providers determined that further treatment would be futile and would likely cause significant distress to Resident B. Nursing staff expressed concerns that family directives were incongruous with optimal management of symptoms in this terminally ill patient. Our physicians held several family meetings, including a NY-RAH nursing facility conference, to better define goals of care. This enabled a process of family education as well as trust-building with our providers, which led to improved communication and more effective medical care. Resident B ultimately passed away with symptoms well controlled and the family satisfied that care was consistent with their wishes.

CHALLENGES

Missed Opportunities for Billing

When frontline staff identifies and reports a resident with one of the six conditions to the Nursing Supervisor, it was sometimes found that the symptoms started a couple days earlier. Therefore, the facility missed the opportunity to bill for days that the resident first experienced signs and symptoms. Also, when a resident who was still experiencing a change of condition needed to be reevaluated following the end of a five- or seven-day episode, the practitioners sometimes missed the opportunity to reassess the resident and the enhanced payment opportunity was lost.

New Billing Procedures

As with any new type of billing, it took a couple months to work the claims through the system until the facility was paid.

Increased Medicare Advantage Enrollment

Sitrin still follows the same policies, procedures, and protocols for these residents, but is limited to the regular facility daily rate, which puts a strain on budgets that are already spread very thin.