Navigating the Innovation of Bundled Payments

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BACKGROUND

The Bundled Payments for Care Improvement (BPCI) initiative began in 2013 with four different models. This voluntary pilot program launched by the Center for Medicare and Medicaid Services (CMS) is aimed at:

- Increasing communication and accountability among health care providers
- Improving care and care transitions
- Reducing re-hospitalizations
- Decreasing Medicare health care costs

The Model 3 program is the primary model that affects skilled nursing facilities. At Model 3 sites, any patient admission with a Medicare qualifying hospital stay can “fall into” a bundle. This means the SNF is then financially responsible for the quality of that person’s care for the next 30, 60, or 90 days after admission.

INTRODUCTION

There are currently over 800 Model 3 organizations in the U.S. participating in the BPCI initiative and 14 of those sites are in Wisconsin.

Ingleside joined the initiative as a risk-bearing Model 3 episode initiator in April of 2015. The facility had little/no systems in place to handle this program effectively initially. There were two major needs:

1) A system is needed to identify and track patients
2) Staff need to be educated and “buy-in” to the program

INITIAL STEPS

- Set-up systems to efficiently obtain MS-DRGs (Diagnosis Related Groups) from hospitals within 10 days of admission
- Create a tool to quickly list current bundle patients
- Set-up educational meetings with staff and quiz them on sections
- Set a timeline for patient identification

METHODS

Process for admission/patient identification:

1. Identify patient’s primary diagnosis upon admission
2. Schedule initial care conference within 48 hours
3. Contact hospital within 6 days to check on DRG (assign a possible DRG if not available yet)
4. If DRG is not ready, contact hospital within 3 add. days
5. Add BPCI patients to tracking form and software within 10 days for nurse follow-up
   Confirm patient follow-up within 3 days of DC.

Staff education meetings

- Taught nursing staff the basics of the BPCI initiative and introduced new tools the facility will be using that will affect them.
- Held three informational meetings with social services, admissions, therapy, nurse managers, and business office to introduce the basics of the initiative and facilitate a Q & A session. Short quizzes were involved to increase participation.

Hospital Contact List

- Contacted each hospital to find out what contact method would be most efficient/who to contact.

Tracking Tool

- Created easily accessible tool for meetings.

RESULTS

The “Days to Final DRG” is important to keep low so that bundle patients can be identified. One hospital’s billing department was more difficult to get this data from and there was often a delay in when they finalized this information and when Ingleside was able to get it.

All surveyed staff rated the importance of the BPCI initiative as “extremely important” or “very important.” 50% of staff reported that communication about Medicare patients had become “much better” and 33% stated that it was “somewhat better” since implementing tools for tracking BPCI patients.

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