Dateline: August 3, 2012

Deadlines Near for PARF 2012 Annual Conference

Deadlines are nearing for the PARF 2012 Annual Conference to be held from Tuesday, September 18 to Friday, September 21, 2012, at the Nittany Lion Inn, State College, PA. For information on the conference see www.parf.org. The 2012 PARF Annual Conference brochure and the Conference registration form are available at the PARF website at www.parf.org and on the PARF Conference webpage at http://www.parf.org/site2/?page_id=11. The deadline for early bird registration and discounted rates is Friday, August 10. Register by August 10 to obtain special rate. Special Conference rates for lodging at the Nittany Lion Inn are in effect until 11:59 pm on Saturday, August 18. Please make arrangements for rooms as soon as possible. Space at the Nittany Lion Inn is limited. Special rates for lodging for conference participants are in effect only until 11:59 pm on Saturday, August 18, 2012. Registrants should identify themselves as a participant of the 2012 PARF Annual Conference (#PARI12B) to receive special rates. Hotel reservations should be made directly with the Nittany Lion Inn by calling 1-800-233-7505 or by visiting www.pshs.psu.edu/nittanylioninn. This year’s annual conference – Rehabilitation 2012: Challenges & Commitments – features three keynote presentations that open each day’s events, an annual meeting of PARF members, an awards luncheon and thirty-eight conference sessions. To register, please use the attached Word document and email the completed registration to parfeducation@parf.org. If more information is needed, contact PARF at parfeducation@parf.org.

Nominations Due for PARF 2012 Awards

PARF is seeking nominations for its 2012 PARF Annual Awards. The awards will be presented at the Annual Awards Luncheon, to be held Thursday, September 20, 2012 during the PARF Annual Conference at the Nittany Lion Inn, State College, PA. PARF Annual Awards will be presented in the following categories: Distinguished Career Award, Empowerment Happens Award, Distinguished Service Award, Rehabilitation Agency Recognition Award, and Rehabilitation Leadership Award. PARF Awards nomination materials are available to PARF members by contacting parfmail@parf.org. Deadline for submitting nominations is Friday, August 10, 2012. For more information, contact PARF at (717) 657-7608 or parfmail@parf.org.

PARF Seeks Comment on Impact of PA State Budget

The FY 2012-13 state budget has been enacted, restoring some of the cuts proposed initially by Governor Tom Corbett for hospital and long term care facilities but cutting by 10% funding for state-county human services programs and reducing funding for services to people with disabilities. The budget remains below budgeted 2008-09 levels. On July 26 PA Department of Public Welfare officials reviewed the budget cuts and program changes with its advisory committee. See related stories below. For a budget analysis see http://pennbpc.org/final-2012-13-budget-analysis. PARF is seeking comment from PARF members concerning changes that they are planning or implementing in their own programs as a result of the state budget decisions. Please forward comments to parfmail@parf.org.
DPW Sends Revised Human Services Block Grant Applications to PA Counties

On August 1 the PA Department of Public Welfare forwarded to Pennsylvania counties a revised human services block grant application. DPW said that any county intending to apply to participate in the block grant program should focus its request on its interest and qualifications in being considered for a block grant. Act 80 of 2012 which establishes the Human Services Block Grant Pilot Program presents twenty (20) counties with more autonomy in managing state-only funding for human services programs at the county level. Participating pilot counties will be able to decide how they allocate specified non-Medicaid and non-IDEA county appropriations including: Mental Health Community Programs, Intellectual Disabilities Community Base, County Child Welfare Special Grants, Homeless Assistance Program, Act 152, Behavioral Health Services and Human Service Development Fund. Counties participating in the block grant pilot program will have the option to phase-in the block grant or waive the phase-in and fully manage their block grant funds. Applications must be completed and submitted to DPW by Friday, August 17, 2012 in order to be considered for the pilot program. Counties must submit the application online at http://www.zoomerang.com/Survey/WEB22GCVVPWBBZ. Included with the application itself, counties must submit a letter signed by at least two commissioners and/or the county executive indicating their intent to pursue the block grant. In addition, counties will be receiving program planning and fiscal reporting documents shortly. Act 80 of 2012 streamlined the planning and reporting processes. All Counties must provide to DPW by October 1, 2012 a plan on the utilization of human services funding included in the seven state only county allocations. The unified plan will be in lieu of the plans currently submitted by counties under the current categorical programs included in the block grant. The new fiscal reporting document will also replace current annual fiscal reporting associated with the seven categorical programs. FMI: See www.dpw.state.pa.us.

PA Ends PA GA Cash Assistance Program

On August 1 the PA General Assistance - Cash Assistance Program administered by the PA Department of Public Welfare (DPW) that had provided cash assistance to approximately 61,000 Pennsylvanians was ended. The state-funded General Assistance (GA) program provided monthly cash payments between $174 and $215 to eligible individuals. The program was targeted for elimination by the Corbett administration in February 2012 in order to save about $150 million annually. The program had initially been scheduled for elimination on July 1, but, as part of state budget negotiations in late June, lawmakers decided to delay the elimination until August 1. DPW says that it is attempting to assist former GA recipients in finding other types of assistance, such as county-provided services or federal programs. At the July 26 meeting of the DPW Medical Assistance Advisory Committee, DPW officials noted that an OIM Operations Memorandum (Ops Memo) was issued to the County Assistance Offices (CAOs) to address the elimination of the cash payment. It was noted that GA eligible recipients will maintain their MA eligibility and that OIM currently has three Ops Memos under development that address the work requirements as well as the exemption process for temporary or permanently disabled determinations and the need for health sustaining drugs. The Employability Assessment Form (PA 1663) has been revised. DPW officials said the goal is to obtain a determination of disability for a federally reimbursed program as quickly as possible. Ops Memos currently in development will not be available to the public until they are formally issued. FMI: Contact PARF at parfmail@parf.org.
DPW Reviews Approved State Budget for FY2012-13

On July 26 PA Department of Public Welfare officials presented to its Medical Assistance Advisory Committee (MAAC) a review and update on the impact of the state budget on various DPW programs. In reviewing the Medical Assistance budget DPW Deputy Secretary of Medical Assistance Vince Gordon said that DPW projects a 2.0% caseload increase (before considering any expansion under the Affordable Care Act). Gordon said that there were no reductions to inpatient and outpatient payments, MCO rates did not receive an increase, and MA Transportation funding received a 5.0% increase. Concerning decisions on whether or not to expand MA enrollment as allowed in ACA, Gordon said that there is ongoing analysis on this issue being conducted by Department of Insurance, Governor’s Policy Office, and DPW. In reviewing the Office of Long Term Living (OLTL) budget, OLTL Director Ann Henry said that the total OLTL budget is $1.3 billion for FY 2012-13 and that OTL would implement several initiatives in FY 2012-2013, including the collection of delinquent nursing home assessment payments, collaboration with OMAP on the review of high cost cases, and implementation of adult protective services for persons aged 19 to 59. DPW Deputy Secretary for Developmental Programs Kevin Friel provided an overview of the ODP budget, noting that there was a decrease in funding of autism intervention services but that ODP is looking to use savings from contract services to restore the funds. Friel said that $17.0 million dollars has been dedicated to the ODP waiting list. He noted that cost based rates total $1.4 billion (total funds) of the total waiver services spending level of $1.92 billion. Friel said that ODP is recognizing cost growth or rate adjustment factors and that there will also be a vacancy adjustment factor. Sherry Snyder, Office of Mental Health and Substance Abuse Services (OMHSAS), did not present the budget for OMHSAS because of the impact of the Human Services Block Grant pilot program on the budget. Snyder noted the 10% reductions to the OMHSAS county services. Brendan Harris, newly appointed Chief of Staff to DPW Secretary Gary Alexander, provided an update on the human services block grant pilot program. Harris said that DPW issued applications to the counties on July 20 and responses are due from the interested counties by August 18. Harris said that an executive review team will review the submitted application. The review process will be similar to the RFP review process. DPW is still developing specific review criteria. Selected county programs will be expected to submit implementation plans sometime in October. Counties selected will be expected to conduct two public hearings on the plan, while non-participating counties will be required to hold one hearing. MAAC meeting minutes are posted on the DPW website. See www.dpw.state.pa.us. PARF members interested in obtaining meeting handouts should contact parfmail@parf.org to request a copy of DPW presentations.

DPW Receives CSG Award for Program Integrity Initiative

The Council of State Governments (CSG) has awarded the Pennsylvania Department of Public Welfare with its 2012 Innovation Award for the department’s Enterprise Program Integrity Initiative. The DPW Enterprise Program Integrity Initiative was selected as one of two East Region winners out of 65 national entries from four regions. FMI: For information on the CSG award see www.dpw.state.pa.us. For information on the CMS probe see http://www.governing.com/news/state/mct-cms-probes-sharp-drop-in-pennsylvania-medicaid-rolls.html. For background information on the eligibility determinations see http://www.phlp.org/wp-content/uploads/2012/01/Jan2012PHLN.pdf.
PA Department of State Announces New Voter ID-Card

On July 20 the PA Department of State announced the creation of a new card that can be issued to voters who need photo identification under Pennsylvania’s voter ID law. The PA Department of State voter cards are to be issued by the Pennsylvania Department of Transportation. The cards will be available to registered voters who are not able to provide all of the documents they would normally need to obtain a photo ID from PennDOT, such as a birth certificate. The Department of State said that new voter photo identification cards are scheduled to be available at PennDOT Drivers License Centers beginning the last week of August. The identification cards can be issued to registered voters who may not have all of the documents necessary to obtain a non-driver’s license photo ID from PennDOT, primarily a birth certificate. The IDs, which are free, will be issued to voters for a 10-year period and can only be used for voting purposes. For Pennsylvania-born voters, PennDOT will still use the process of confirming birth records electronically with the Pennsylvania Department of Health to issue non-driver’s license photo IDs for voting. The Department of State advised that when requesting these IDs, voters will need to affirm they do not possess any other approved identification for voting purposes. They will be asked to provide two proofs of residence, such as a utility bill, along with their date of birth and Social Security number, if the customer has an assigned number. PennDOT will validate the voter registration status with the Department of State while the voter is in the PennDOT office. Upon confirmation of this information, the voter will be issued the voter card before leaving the PennDOT facility. These cards will be issued by PennDOT up to and through Election Day, November 6, 2012, and thereafter. FMI: See www.dos.state.pa.us.

PA Commonwealth Court Considers Challenge to Voter ID

On August 2 the PA Commonwealth Court concluded its hearing regarding a legal challenge to the state’s Voter ID law with closing arguments from both sides. Commonwealth Court said a decision will be issued the week of August 13; however, both parties in the case have said they plan to appeal an unfavorable ruling to the state Supreme Court. Meanwhile, the Pennsylvania Budget and Policy Center (PBPC) released a survey of the Commonwealth's procedures for implementing the new voter ID law, finding that there are barriers for Pennsylvanians seeking photo ID required to vote. The PBPC report concludes that although a new process to obtain an ID card at PennDOT centers will be implemented at the end of August, it is unlikely that the new process can be implemented efficiently in the short time left before the election. PBPC recommended a delay in implementing the law.

Repeal of Voter ID Law Considered

On July 19 members of the PA Senate were contacted asking them to sign on as cosponsors of a bill that would repeal the Voter ID bill recently signed into law by Governor Tom Corbett. The co-sponsorship memo cites reports from the PA Department of State that 9.2% of registered Pennsylvanians (750,000 state citizens) would be disenfranchised under Voter ID. The memo makes reference to news reports that uncovered additional, specific problems with the Voter ID law and recent court action striking down less restrictive Voter ID laws. The bill would increase, to 10 years in prison, the penalty for impersonating a voter. FMI: See www.pasenate.com and http://www.pasenate.com/?p=10820
PA Department of Insurance Continues Study of Health Insurance Exchanges

The PA Department of Insurance is continuing to evaluate the requirements affecting its determination of the essential healthcare benefits for the insurance exchanges mandated by the Affordable Care Act. PARF has been monitoring the progress of the Department of Insurance in planning for health insurance exchanges and deciding on the essential health benefits in insurance plans. In discussion with the Department of Insurance this week officials said that the Department is also studying its options for Medicaid expansion option as a result of the Supreme Court decision. Deloitte has been engaged as a consultant and will review 10 healthcare plans that are under consideration for benchmarking purposes. The identified plans consist of the top four (4) largest small group plans, the top four (4) largest state employee plans, and the largest private HMO and Federal employees healthcare plan. Deloitte will be providing analysis of the 10 plans but will not be making recommendations. The analysis will hopefully identify the likely default plan for the Commonwealth. Deloitte is expected to release the report in the middle to late August. Once the report is final, it will be posted on the Insurance Department’s website.

Officials also said that the Department is studying its options for Medicaid expansion option as a result of the Supreme Court decision. The department is also evaluating who actually has legal standing within the Commonwealth to make the final decision on the exchanges, e.g. the Governor versus the Insurance Commissioner. FMI: See www.insurance.state.pa.us. See www.state.pa.us

PA House Democratic Policy Committee Reviews Implementation of ACA in PA

On July 17 the PA House Democratic Policy Committee received testimony from health care advocates on state implementation of the federal Patient Protection and Affordable Care Act. The hearing was focused on the impact of the health care law on Pennsylvania, including changes in health care benefits, Medicaid expansion, development of the health insurance exchange, etc. Those testifying at the hearing included: Kati Sipp, executive vice president, SEIU Health Care Pennsylvania; Laval Miller-Wilson, executive director, Pennsylvania Health Law Project; and Antoinette Kraus, project director, Pennsylvania Health Access Network. For more information about the Policy Committee visit www.pahouse.com/PolicyCommittee. FMI: See http://www.pahouse.com/PolicyCommittee/documents/2012/hdpc071712.pdf.

IRRC Approves Regulations on Electronic Prescribing and IV Therapy

In the Saturday, August 4, 2012 edition of the Pennsylvania Bulletin the Independent Regulatory Review Commission (IRRC) published notice that it had met on July 19, 2012 and had approved two regulations affecting health care practice, namely State Board of Pharmacy #16A-5428: Electronic Prescribing of Controlled Substances (amends 49 Pa. Code Chapter 27) and State Board of Nursing #16A-5122: IV Therapy Functions for Licensed Practical Nurses (amends 49 Pa.Code Chapter 21). The rule by the State Board of Pharmacy on Electronic Prescribing of Controlled Substances will permit pharmacists to accept electronically transmitted prescriptions for Schedule II controlled substances. The rule by State Board of Nursing on IV Therapy Functions for Licensed Practical Nurses establishes standards for licensed practical nurses (LPNs) related to intravenous (IV) procedures, updates existing education and training provisions that LPNs must complete before providing IV therapy functions, and revises provisions related to the functions or scope of practice of an LPN. See www.pabulletin.com.
Timeline for ODP SCO Monitoring Revised

On July 26 the PA DPW Office of Developmental Programs announced a revised timeline for the SCO self-assessment phase of ODP’s SCO monitoring process. In ODP Announcement 063-12 ODP says that it will release the Zoomerang link to the SCO Monitoring Tool on the first Monday in August of every year. This year the link to the tool and individual samples will be sent out on August 6, 2012, and must be completed by September 28, 2012. As part of the SCO Monitoring process, SCOs must complete the SCO Monitoring Tool survey. The purpose of the self-reporting phase is to assist SCOs with assessing their compliance with ODP requirements and to assess their level of preparedness for the next phase of SCO monitoring, the on-site audit conducted by ODP. ODP says that each SCO should complete one survey submission for the entire organization before the self reporting phase concludes on September 28, 2012. ODP says that by the end of the day Monday, August 6, 2012, each SCO entity will receive an e-mail from the ODP SCO Monitoring mailbox (ra-odpscomonitoring@state.pa.us) requesting they complete the SCO Monitoring Tool survey. This e-mail will contain a unique link to the SCO Monitoring Tool survey, which is launched using the Zoomerang platform. FMI: See ODP Announcement 063-12 at www.odpconsulting.net.

Psychiatric Rehabilitation Services Practitioner Orientation Training

On September 27 and 28 and on October 11 and 12 PAPSRS (Pennsylvania Association Psychiatric Rehabilitation Services) will offer Psychiatric Rehabilitation Services Practitioner Orientation Training. The training programs on September 27 and 28 will be offered in Hermitage PA, and the October 11 and 12 trainings will be offered in Eddystone. The training is for individuals who are employed or expect to be employed in programs licensed by DPW/OMHSAS to provide Psychiatric Rehabilitation Services (PRS) and is authorized by DPW/OMHSAS to satisfy the mandatory requirement of current Standards for licensing PRS as well as the expectation of the Proposed PRS Regulations for 12 Hour PRS Orientation Training. FMI: See www.papsrs.org.

Training on Corporate Compliance to be held on August 23

On Thursday, August 23, 2012 from 8:30 am to 4:30 pm ET the Pennsylvania Community Providers Association will host Compliance Boot Camp: Making the Grade After Health Reform. The program will be held at the NHS Training Center, 350 Sentry Parkway East, Bldg 640 (2ndFloor), Blue Bell, Pennsylvania 19422. Phone 610-825-4135. The workshop is focused on implementing an effective corporate compliance program that prioritizes the highest risks and implements an effective strategy for protecting assets and minimizing financial liabilities. The workshop was recently presented as a pre-conference university at the 42nd National Council Mental Health and Addictions Conference and received rave reviews. The session is being provided to Pennsylvania providers at a significant discount. PCPA/Pennsylvania Association of Rehabilitation Facilities members can attend at the early bird rate of $119 and non-members for $149. More details and registration information can be accessed online at http://www.cvent.com/events/compliance-boot-camp-making-the-grade-after-health-reform/event-summary-cda0beee1f61422eaddd6286a29b6b20.aspx. Questions about the workshop or the online registration process may be directed to Jen Bankard at jen@papproviders.org.
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PARF Members to Contact U.S. Representatives and Senators in Current Recess

PARF is encouraging its own members to invite representatives in Congress as well as candidates for Congress to visit their facilities during the current recess and discuss Congressional actions that can help or hurt rehabilitation services. The Congress will be in recess during August and be returning from Washington often during September and October. Visits to district or state offices, letters to the Representative and Senators, conversations with their staff, and telephone calls to their offices are also encouraged. To find contact information for your members, visit www.senate.gov and www.house.gov. Medical rehabilitation service providers should share their concerns with action that Congress may take on Medicare, taxes and deficit reduction in the session following the November 6th elections that would harm medical rehabilitation services. Proposals include a 1.1 percent market basket cut, establishment of site neutral payments, and reinstatement of the 75% Rule. Meanwhile, medical providers are seeking support for an extension of the Medicare therapy caps exceptions process beyond December 31, 2012. Providers of residential and vocational services may engage their Representative and Senators in a discussion of various issues, including: (1) CMS proposed regulations on home and community based services and the definition of home and community-based settings; (b) legislation that eliminates the sub-minimum wage certificate (HR 3086) and its adverse impact on employment options for people with disabilities sponsorship; (3) the need for adequate Medicaid funding of services in order to preserve quality supports and services for your program participants and avoid more costly services such as emergency rooms and institutional care; and (4) Support for reauthorization of the WIPA program. Providers of brain injury services may focus attention on support for The Traumatic Brain Injury (TBI) Act (H.R. 4238) which was introduced by Representative Bill Pascrell, Jr. (D-NJ) and Representative Todd Russell Platts (R-PA) on March 21, 2012 in the House of Representatives.

Congress Plans for Continuing Resolution on FY 2013 Federal Budget

On July 31 Congressional leaders and the White House reached agreement on a six-month continuing resolution to operate the federal government from the beginning of fiscal year 2013 on October 1, 2012 through March 2013. The six-month agreement funds the federal government at $1.047 trillion, conforms to the Budget Control Act of 2011 (PL 112-25), exceeds House appropriation levels, and is less than the President’s budget request. The CR deal marks a $4 billion increase in discretionary spending compared to fiscal 2012 levels. Both the House and Senate will not vote on the spending measure until September following the five-week August recess. The CR, if passed, will not address the automatic spending cuts under sequester, which must be dealt with separately. Provided the CR measure is approved, this will permit Congress to focus its attention during the lame duck session on the sequestration and expiring Bush-era tax cuts that will go into effect at the beginning of next year, as well as expiring authorizations for several federal programs, including Temporary Assistance for Needy Families (TANF). The CR allows Congress to focus on expiring authorizations for several government programs, expiring tax cuts and the sequestration – automatic cuts in defense and domestic spending that may be triggered in the event Congress does not reach agreement on debt limitation. The language of the continuing resolution has not been released and the vote on the continuing resolution may not occur until September 30. The White House described the budget extension as a welcome development. See www.whitehouse.gov
U.S. Congress Approves Bill Requiring a Report on Sequestration

On July 25 the U.S. Senate unanimously approved the Sequestration Transparency Act of 2012 (HR 5872). The bill was passed by the House of Representatives on July 18. The bill requires that the administration produce a report within 30 days that indicates how federal agencies would implement the $109 billion in spending cuts scheduled to occur at the beginning of next year. The White House said that President Obama would sign the bill. The White House said that sequester would be a devastating cut in defense and domestic investments and that it was passed by Congress not as a policy to be enacted but as a mechanism to force Congress to act on deficit reduction. See www.senate.gov and www.house.gov. For a copy of the bill see http://democrats.senate.gov/2012/07/25/senate-floor-wrap-up-for-wednesday-july-25-2012/

U.S. Senate Reports on Impact of Sequestration on Health, Education and Labor Programs

On July 25 the U.S. Senate Appropriations Subcommittee on Labor, Health and Human Services, Education, and Related Agencies received testimony at a hearing on The Impact of Sequestration on Non-Defense Jobs and Services. At the hearing, subcommittee chairman Tom Harkin (D-IA) released a report, describing the impact of the cuts on the Department of Health and Human Services (HHS). The report indicates that reductions of more than $26 million in Survey and Certification of Health Care and Long-Term Care Facilities; more than $42 million in Maternal and Child Health Block Grant; more than $2 million in National Institutes of Health (NIH) budget; more than $73 million from the AIDS Drug Assistance Program; and more than $48 million from Public Health Emergency Preparedness Grants. See www.senate.gov and http://harkin.senate.gov/blogitem.cfm?i=5eff931f-7820-4f5f-84d3-1e80eb145900

OMB Releases Guidance on Sequestration

On July 31 the White House Office of Management and Budget (OMB) issued guidance on issues related to potential sequestration under the Budget Control Act. The White House said that it is calling on Congress to avoid the across-the-board spending cuts. OMB said that it will work with agencies, as necessary, on issues raised by the sequestration. OMB said that once fiscal 2013 funding levels are defined, OMB will gather the necessary information from agencies to calculate the percentage reductions required under the sequestration. OMB will instruct agencies in the meantime to “continue normal spending and operations. FMI: See www.whitehouse.gov. See http://www.whitehouse.gov/omb/. For a copy of the July 31 OMB memorandum see http://www.whitehouse.gov/sites/default/files/omb/memoranda/2012/m-12-17.pdf For a copy of the Budget Control Act see http://thomas.loc.gov/cgi-bin/query/z?c112:S.365:
CMS Publishes FY 2013 PPS SNF Update

On August 2 the Centers for Medicare and Medicaid Services (CMS) published a notice in the Federal Register (Volume 77, Pages 46213-46255) announcing an update to payment rates for Medicare-certified skilled nursing facilities (SNFs) under the SNF Prospective Payment System (PPS). The new rates will be effective for services furnished in fiscal year (FY) 2013, beginning October 1, 2012. The FY 2013 market basket increase factor is 2.5 percent which, when combined with a negative 0.7 percentage point multifactor productivity adjustment mandated by the Affordable Care Act, results in a net FY 2013 payment update of 1.8 percent. The FY 2013 SNF PPS notice also provides an update on SNF monitoring activities intended to monitor the impact of FY 2012 SNF policy changes on the SNF PPS. See www.cms.gov. See https://www.federalregister.gov/articles/2012/08/02. See also https://www.federalregister.gov/articles/2012/08/02/2012-18719/medicare-program-prospective-payment-system-and-consolidated-billing-for-skilled-nursing-facilities.

CMS Issues Rule on Acute Inpatient PPS and Long Term Care Hospital Payments

On August 1 the Centers for Medicare & Medicaid Services (CMS) issued a rule updating Medicare payment policies and rates for inpatient stays in acute-care hospitals under the Inpatient Prospective Payment System (IPPS) and hospitals paid under the Long-Term Care Hospitals (LTCH) Prospective Payment System (PPS) in Fiscal Year (FY) 2013. The rule also finalizes the payment update that will be used to calculate FY 2013 target amounts for certain hospitals excluded from the IPPS, such as cancer and children’s hospitals, and religious nonmedical health care institutions. The rule, which applies to approximately 3,400 acute-care hospitals and approximately 440 LTCHs, will generally be effective for discharges occurring on or after October 1, 2012. The rule also changes the Hospital Inpatient Quality Reporting (IQR) Program, finalizes new policies and measures for the Hospital Value-Based Purchasing (VBP) Program, and establishes the framework for two new quality reporting programs that will apply to PPS-Exempt Cancer Hospitals and psychiatric hospitals and psychiatric units paid under the Inpatient Psychiatric Facilities (IPF) PPS. A fact sheet on payment changes is available on the CMS Web page at www.cms.gov/apps/media/fact_sheets.asp. The final rule will appear in the August 31, 2012 Federal Register, and will take effect October 1, 2012. The final rule can be downloaded at: http://www.ofr.gov/inspection.aspx?AspxAutoDetectCookieSupport=1

CMS Proposes Rules for CY 2012 Outpatient PPS and Ambulatory Surgical Centers

On July 30 CMS published in the Federal Register its proposed rule for the CY 2012 Outpatient Prospective Payment System and Ambulatory Surgical Centers. The rule affects Hospital Outpatient Prospective and Ambulatory Surgical Center Payment Systems and Quality Reporting Programs, the Electronic Reporting Pilot, the Inpatient Rehabilitation Facilities Quality Reporting Program, and Quality Improvement Organization (Proposed Rule CMS, 1589-P, July 30, 2012 Federal Register) the proposed rules affecting rehabilitation providers include procedural changes to the IRF Quality Reporting Program, clarification of the supervisory requirements for therapy services, a proposal to remove total knee replacement surgery from the inpatient (only) list and allowing the procedure to be performed in an outpatient department and by ambulatory surgical centers. CMS proposes specific procedures for retaining, updating, substantially revising or removing measures concerning quality reporting. See www.cms.gov and click on Regulations.
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CMS Publishes FY 2013 IRF PPS Notice and Update

On July 30 the Centers for Medicare and Medicaid Services (CMS) updated its Medicare Inpatient Rehabilitation Facility (IRF) Prospective Payment System (PPS) for federal fiscal year 2013. In its notice CMS updates the FY 2013 IRF PPS rates by a market basket increase factor and applies a 0.1 percentage point reduction and a 0.8 percent productivity adjustment. CMS says that IRFs are provided with a net increase in payments and that overall no IRFs are estimated to experience a net decrease in payments as a result of the updates. The updated IRF PPS rates are effective for IRF discharges occurring on or after October 1, 2012 and on or before September 30, 2013 (FY 2013). In the notice CMS updates the FY 2013 IRF PPS relative weights and average length of stay values, the FY 2013 IRF PPS payment rates by the FY 2013 wage index and the labor-related share in a budget neutral manner, the outlier threshold amount for FY 2013, and the cost-to-charge ratio (CCR) ceilings and urban/rural average CCRs for FY 2013. The CMS notice describes the calculation of the IRF Standard Payment Conversion Factor for FY 2013. The notice does not contain any revisions to existing regulation text. The IRF PPS Addenda along with other supporting documents and tables in the notice are available at http://www.cms.hhs.gov/Medicare/Medicare-Fee-for-Service-Payment/InpatientRehabFacPPS/. FMI: To view the update, see http://www.ofr.gov/OFRUpload/OFRData/2012-18433_PI.pdf. Contact Gwendolyn Johnson at (410) 786-6954 for general information about the notice and Susanne Seagrave at (410) 786-0044 for information about payment policies and rates.

CMS PMD Demonstration to Start on September 1

On August 1 the Centers for Medicare and Medicaid Services (CMS) announced that it would implement its Power Mobility Devices (PMD) demonstration on September 1, 2012. CMS said that it would implement a prior authorization process for scooters and power wheelchairs for people with fee-for-service Medicare who reside in seven states with high populations of fraud- and error-prone providers (CA, IL, MI, NY, NC, FL and TX). The demonstration aims to ensure that a beneficiary's medical condition warrants their medical equipment under existing coverage guidelines. Additional information is available on the Prior Authorization of Power Mobility Devices Demonstration web page. FMI: See https://www.cms.gov/Research-Statistics-Data-and-Systems/Monitoring-Programs/CERT/PADemo.html. See also www.cms.gov.

Special Open Door Forum on Manual Medical Review of Therapy Claims

A Centers for Medicare and Medicaid Services (CMS) Special Open Door Forum on Manual Medical Review of Therapy Claims is scheduled for Tuesday August 7 from 2:00 pm to 3:30 pm ET. The Special Open Door Forum (ODF) provides an opportunity for providers to ask questions about the mandated manual medical review of therapy services from October 1-December 31, 2012 that was enacted by the Middle Class Tax Relief and Job Creation Act of 2012. A transcript and audio recording of this Special ODF will be posted to the Special Open Door Forum website and will be accessible for downloading at http://www.cms.gov/Outreach-and-Education/Outreach/OpenDoorForums/ODFSpecialODF.html. To participate, dial (800) 603-1774 and enter Conference ID: 16032541. For automatic emails of Open Door Forum schedule updates (E-Mail list subscriptions) and to view Frequently Asked Questions please visit the Open Door Forum website at http://www.cms.gov/Outreach-and-Education/Outreach/OpenDoorForums/index.html?redirect=/opendoorforums/.
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CMS Special Forum on IRF Quality Reporting Program

CMS will be hosting a series of monthly Inpatient Rehabilitation Facility (IRF) Special Open Door Forums through October. The upcoming IRF Special Open Door Forums will be held on Thursday, August 16; 1-2:30pm ET, Thursday, September 20; 1-2:30pm ET, and Thursday, October 18; 1-2:30pm ET. The purpose of these Open Door Forums will be to address issues related to the upcoming implementation of the Affordable Care Act (ACA) Section 3004 IRF Quality Reporting Program. CMS will present various topic and guest speakers each month. A question and answer session will take place at the end of each Open Door Forum.

Recommendations for topics to be addressed at these Open Door Forums should be sent to IRF.questions@CMS.hhs.gov. The IRF Special Open Door Forums will be held on the following dates and times: Thursday, August 16; 1-2:30pm ET, Thursday, September 20; 1-2:30pm ET, and Thursday, October 18; 1-2:30pm ET. The IRF Quality Reporting Program requires that beginning on October 1, 2012, an IRF must begin to submit quality measure data to CMS on two measures. These measures are: A urinary catheter-associated urinary tract (CAUTI) infection measure and a measure for new or worsening pressure ulcers. Data for the CAUTI measure will be submitted to CMS via the Center for Disease Control (CDC) National Healthcare Safety Network (NHSN). Data for the pressure ulcer measure will be collected using the IRF-PAI instrument. For an IRF not complying with the requirements of the new IRF quality reporting program, the annual federal update payment will be reduced by two percentage points beginning in rate year 2014 and for each subsequent rate year.


SAMHSA Advisory Committee Meetings in August

On August 9 the U.S. Substance Abuse and Mental Health Services Administration (SAMHSA) will host a joint meeting of its advisory committees in a live webcast meeting from 10 a.m. to 3:30 p.m. The discussion will feature comment on the impact of Federal health reform and state budgets on mental health and substance abuse programs, a report from the SAMHSA Administrator, an update on the SAMHSA budget and an update on health care reform. The following advisory councils and committees will be participating in this joint meeting: SAMHSA National Advisory Council; Center for Mental Health Services National Advisory Council; Center for Substance Abuse Prevention National Advisory Council; Center for Substance Abuse Treatment National Advisory Council; Advisory Committee for Women's Services; and the Tribal Technical Advisory Committee. On August 10 the SAMHSA National Advisory Council will hold a webcast meeting from 10 a.m. to 2:45 p.m. The meeting will include updates from the SAMHSA Administrator. The discussions will focus on the Behavioral Health Quality Framework. See http://blog.samhsa.gov/2012/08/06/live-webcast-samhss-national-advisory-council-meetings/ and http://www.gpo.gov/fdsys/pkg/FR-2012-07-20/pdf/2012-17690.pdf. FMI: See www.samhsa.gov.
Senate HELP Committee Releases Report, Recommendations on Disability Employment

On July 16 Senator Tom Harkin (D-IA), Chairman of the Senate Committee on Health, Education, Labor and Pensions, released a report detailing the current state of employment for adults with disabilities and describing policy recommendations that would help to increase labor force participation. The report outlines the steps to be taken to achieve the goal of raising the number of Americans with disabilities in the labor force to six million by 2015. Senator Harkin said he plans to introduce legislation to (a) improve outcomes in competitive, integrated employment for youth and young adults who are transitioning from school to higher education and work; (b) increase contracting opportunities for disability-owned businesses; (c) create incentives for states to develop and test innovative initiatives that can lay the foundation for modernizing our largest programs providing income support, health care, and long-term services and supports to our citizens with disabilities; and (d) encourage savings and wage support that will help people with disabilities leave poverty and enter the middle class. FMI: See http://www.help.senate.gov/newsroom/press/release/?id=fbf20a90-cad2-4ba8-a236-df6bbc623a8a&groups=Chair. For the full report see http://harkin.senate.gov/documents/pdf/500469b49b364.pdf.

WISE Seminar on Ticket to Work on August 22

The National Work Incentives Seminar Event (WISE) Webinar Ticket to Work: "Support Services for People Who Have a Disability and Are Ready to Work" will be held on Wednesday, August 22, 2012 at 3:00 pm. The national WISE webinar will present information about special Social Security programs and rules that may apply to you. Disability benefits experts will teach you about: Ticket to Work and Work Incentives, frequently asked questions (FAQs), and sources of information. Register online at www.choosework.net/wise or call 1-866-968-7842 (V) or 1-866-833-2967 (TTY/TDD). Approximately 2 days before the event, registrants will receive an email with instructions on how to log in to the webinar. The instructions will also include a link and access code for closed-captioning and a link to download the presentation materials in fully accessible PDF and text-only versions.

DOL to Establish TA Center for Increasing Employment of People with Disabilities

On August 2 U.S. Department of Labor (DOL) Office of Disability Employment Policy (ODEP) announced the availability of a $1.1 million grant to establish the National Center on Leadership for the Employment and Advancement of People with Disabilities. The national technical assistance center will focus on improving employment outcomes and promoting the economic advancement of people with disabilities. The LEAD Center will conduct policy and research initiatives on improving employment outcomes, including job retention, for job seekers with disabilities. A key component of the center's work will be translating emerging and successful solutions as identified through demonstration projects and research into policy and practice. The center also will support ODEP in encouraging innovative practices and facilitating their implementation at both the workforce system and individual levels, which includes providing technical assistance and training to workforce-related entities. The full announcement is at http://www.grants.gov. Applications will be accepted until August 31, 2012. See also http://www.dol.gov/opa/media/press/odep/ODEP20121576.htm.