

## Report on Medicare Compliance Volume 29, Number 3. January 27, 2020 Abuse Icon, Infection Control May Factor Into Compliance With Discharge Planning Rule

By Nina Youngstrom

About a month before the new patient discharge planning regulation<sup>[1]</sup> took effect Nov. 29, CMS began posting an icon on the Nursing Home Compare website<sup>[2]</sup> next to skilled nursing facilities (SNFs) and nursing facilities (NFs) cited for abuse, neglect or exploitation. The red warning sign may come up for SNFs and NFs that otherwise are considered high quality, either on Medicare Compare or a hospital's own performance metrics, and case managers and social workers should be prepared to address the incongruence with patients.

The abuse icon is one of many considerations for hospitals as they comply with the discharge planning regulation, which expanded Medicare patient-choice requirements. The abuse icon isn't necessarily a disqualifier for high-performance SNFs and NFs, said Mary Beth Pace, vice president of care management at Trinity Health, at a Jan. 21 webinar [3] sponsored by RACmonitor.com. The reasons for the icon run the gamut from true abuse to falls with a resulting injury. "We're not saying every nursing facility with an abuse icon is a bad place," she explained. "We think patients should have a conversation with the SNF and, depending on the response from the SNF, consider them if they're in our performance network." Just don't gloss over the icon. "It's a trust factor," Pace said. Hopefully, in its forthcoming interpretive guidelines on the discharge planning regulation, which modified Medicare's conditions of participation, CMS will shed more light on what hospitals should do if one of their high-performing SNFs has an icon.

The patient discharge regulation presents challenges in other areas, including infection control and the newly revised Important Message from Medicare and Detailed Notice of Discharge. They're magnified now that hospitals are required to give patients a list of more types of post-acute care (PAC) providers in the geographic area of their choice even if they don't have an available bed, [4] including SNFs, home health agencies, long-term acute care hospitals, inpatient rehabilitation hospitals and critical access hospitals. Hospitals must provide information about the PAC providers on quality and resource use in accordance with the Improving Medicare Post-Acute Care Transformation (IMPACT) Act. [5] The quality data is available at Medicare Compare websites, although hospitals are awaiting more information about how to use them in the interpretive guidelines for surveyors, Pace said.

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