



Volume 107

Powered by The Valley Health System and Kindred Hospitals

Newsletter

May 2024

TRANSITIONAL CARE MANAGEMENT

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SilverStateACO@ SilverStateACO.com Studies have shown that patients who see their Primary Care Provider soon after being discharged from the hospital achieve much better results than those who don't. In fact, a review of actual Silver State ACO data proved this unequivocally.

The Centers for Medicare and Medicaid Services (CMS) acknowledges this and has designed a program which incentivizes practices to bring their patients into the clinic as soon as possible after discharge from an acute facility. CMS has developed specific billing codes for these post-acute services, called Transitional Care Management (TCM) visits. CMS configured these visits to be easy and straightforward. And, because CMS sees the great benefit to patients and improved outcomes, they pay extremely generously, sometimes as much as three or four times the regular rate for a clinic visit.

In brief, the patient must be called within two business days of discharge and seen in the office within 7 or 14 days. There are different billing codes based on level of disease complexity as well as whether the patient was seen within 7 or within 14 days. At the visit, a

reconciliation of medications must be done. This is, in fact, a main focus of a TCM visit. So many patients arrive home from a hospital stay with a stack of new prescriptions. Once home, they go back to their regimen of prescriptions they had been taking "for years". Voila. Bad interactions.



Centennial Hills Hospital • Desert Springs Hospital • Henderson Hospital (2016 Spring Valley Hospital • Summerlin Hospital • Valley Hospital

The sooner a medical professional reviews all the patient's medications, the sooner a problem can be averted. And, the sooner a problem is averted, the less likely the patient will be readmitted to the hospital.

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This is all wonderful. BUT... How can practices know if/when their patient is discharged from the hospital? Some patients might eventually call, but almost never within two days of being discharged! Most practices can't know. However, Silver State ACO Participants can – and do – know. Each Participant practice has access to the Experian MemberMatch portal. This system, originally designed in conjunction with SSACO, notifies a practice when one of its patients is discharged from the hospital. Although Experian does not contract with every single hospital, it does have a large network which covers most of Nevada.

The availability of this system has provided great insight for practices, as well as increased revenue, improved quality scores and



lower readmission rates for its patients. All of these benchmarks also improve the probability that Silver State ACO will earn Shared Savings. Most importantly, it's extremely beneficial to the patient by allowing the practice to reach out to its vulnerable, recently discharged, patients rather than relying on the patient to think of doing so. Truly a win, win, win situation.

Attached to the newsletter email is a recently updated CMS document with further detail on

requirements and coding. In addition, section I of the Silver State ACO 2024 Provider Manual contains resources, guidelines and a checklist. Silver State ACO highly recommends that practices review the requirements and their staffing and protocols for TCM visits or, if they have not already done so, implement a system for following up on the Experian notifications. Quality Coordinators can answer many questions about the system or can direct practices to other SSACO staff for assistance.

IMPROVING QUALITY SCORES: ANNUAL WELLNESS VISITS

Quality Measures dictated by the Centers for Medicare and Medicaid Services (CMS) play an

essential role in assessing the performance of participating practices in quality incentive programs such as Accountable Care Organizations (ACOs). Achieving high quality scores is significant as it is one of the main components evaluated by CMS to determine if an ACO receives any Shared Savings it may generate.



SPOTLIGHT

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As the healthcare landscape changes, attention to preventive care is becoming increasingly important. Among the many initiatives focused on promoting proactive healthcare, Annual Wellness Visits (AWV) are at the forefront. While its primary goal is enhancing patient well-being, the AWV also presents a significant opportunity to improve quality scores.

An AWV is a comprehensive benefit introduced by CMS in 2011 to encourage beneficiaries to take control of their health through check-



ups and screenings. Annual Wellness Visits prioritize preventive care and the early detection of potential health risks. The patient has no out-of-pocket cost for the AWV. During an Annual Wellness Visit, the healthcare provider conducts a thorough assessment of the beneficiary's current health status. This is based on medical history,

including social and familial risk factors, medications, and assessments for fall risk, hearing impairment, home safety and the ability to perform Activities of Daily Living (ADL's). A <u>Health Risk Assessment</u>, which involves screenings for depression is also done. A Health Risk Assessment is an essential tool during the AWV as it can be utilized to satisfy several quality metrics. This eliminates the need to "chase down" beneficiaries throughout the year in order to ensure that these measures have been completed and documented properly.

Since providers are not absorbed in addressing acute problems, they are able to engage in communicating preventive health measures, lifestyle modifications, and disease management strategies with beneficiaries. Doing so in a more relaxed, personalized manner should result in the patient becoming more engaged in his/her own care.

Providers then supply a personalized prevention plan, along with a list of recommended preventative services appropriate for the individual. This plan, along with the list of recommended services, is discussed and updated every subsequent year, during the AWV. The

additional time an AWV provides allows for efficiency in addressing the needs of the patient and following up on the coordination of any outstanding care components such as cancer screenings, vaccinations, and other preventive services.

There are a number of ways that Silver State ACO supports its participating practices in



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identifying patients due for an Annual Wellness Visit. Each month, our

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dedicated Quality Coordinators provide an <u>AWV Incomplete Report</u>. This report identifies patients currently due for a wellness visit (based on claims data) to assist in ensuring these visits are captured annually. There is also a component within SSACO's *IllumiCare* ribbon that displays the date of the last AWV performed for each patient. This is extremely beneficial as it provides quick access to any staff member opening the patient's chart, including scheduling and medical assistants who may not have direct access to the monthly <u>AWV</u> <u>Incomplete Report</u>.

By prioritizing preventive care, Silver State ACO participating practices can boost their quality performance, improve health outcomes and increase overall patient satisfaction. Please reach out to your Quality Coordinator if you have any questions.

SECURITY REMINDER: REMAIN VIGILANT! Securing Mobile Devices

Spring has sprung! It is time for Spring Cleaning! Everyone -especially those involved in the healthcare system – should review the status of all devices to be sure they are have the latest software updates. This includes phones! Having



updated software can help secure important and/ or protected information.

The following are some guidelines for securing telephones (from HealthIT.gov):

- Update all security software regularly and *always* when told to do so by the manufacturer.
- Enable encryption for sensitive information.
- Install *remote* wiping / disabling capability so that data can be deleted permanently from a lost or stolen device.
- Be sure the device has a firewall installed and is kept updated.
- Install security software to protect against viruses, spyware, malware and other attacks.
- Be wary and suspicious of all "apps" (applications) before using.



Research the app and the company to ensure that it is trusted and reputable, and that the app will perform only the function for which you intend it. Do your homework *before* downloading or installing to a mobile device.

• Don't send or receive sensitive or protected health information when

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connected to public Wi-Fi unless the device uses a secure, encrypted connection.

- Keep track of the device! The new update for iPhone includes a Stolen Device Protection feature. The iPhone will require FaceID if you are away from your home or work.
- Wipe all data stored on a mobile device before discarding it. Whether giving the device to another person or throwing it in the trash, always use a software tool intended for the specific purpose of deleting all stored secure health information to protect against unauthorized access.



Remember that nothing is as valuable or secure as an attentive, caring person. Any staff member who uses or accesses a mobile device is, ultimately, the most important security "device". Be sure to educate employees, share best practice ideas, and require maintenance of apps, passwords, etc.

PRACTICE MEETINGS

The second round of Practice Meetings for 2024 will be held on May 1st and 2nd in Southern and Northern Nevada, respectively. Please be sure to attend. The meetings are a great opportunity to learn how to



improve scores, meet CMS requirements, and become acquainted with other Participants. We can all learn from one another. In Northern Nevada, this month's practice meeting will take place at the National Auto Museum. A fun evening for all! See

more details, below. And, to be entered to win a prize at one of the meetings, please respond to the email to which this newsletter was attached with "Proud to be with SSACO" in the subject line.

SOUTHERN NEVADA

Wednesday, May 1, 2024 Wednesday, July 31, 2024 Wednesday, November 6, 2024 All Southern Nevada Practice meetings will be held at <u>Summerlin Hospital and begin at</u> 11:30 a.m. Lunch is served.

NORTHERN NEVADA

<u>Thursday, May 2, 2024</u> The May 2nd practice meeting will be held at the <u>National Auto</u> <u>Museum at 5 pm</u>, immediately preceding the Silver State ACO Northern Nevada Networking event.

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The event is free and allows you to bring a guest. Registration is required; there will be no walk-ins allowed. We hope that you will join us. Additional information on the attached flier.

Please register here:

RSVP HERE

Thursday, August 1, 2024 Thursday, November 7, 2024 Other than the May meeting, Northern Nevada Practice Meetings are generally held at <u>Northern Nevada Sparks Medical Building</u>, Suite 201. Meet & Greet begins at 5 pm; <u>Meeting begins at 5:30</u>.

2025 ON THE HORIZON

As any Silver State ACO Participant knows, Accountable Care Organizations (ACOs) are strictly governed by CMS rules, regulations and timelines. CMS has announced its calendar for allowing ACOs to add Participant practices. Silver State ACO has begun its recruitment campaign for 2025. Practices need to be vetted by SSACO and their participation needs to be accepted by CMS. These practices would become Participants effective January 1, 2025. However, the deadline for them to sign an Agreement to join is in early summer.

Please let us know if you are aware of any high quality practice that would benefit from the programs and assistance that Silver State ACO offers, and that would contribute to the overall quality and success of SSACO. An introduction is all we ask. We will do the rest.

> "Like it or not, we live in an imperfect world so, like it or not, you've got to stand up and fight." Joe Lieberman, (1942-2024) Politician, Lawyer, US Senator

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