

Progress Notes

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Hospitals Question Regs Governing Outpatient Clinic Services Payments

The proposed rule issued by the federal government directing reimbursements to hospital-based outpatient departments under the site-neutral provisions of the Bipartisan Budget Act of 2015 is inflexible and unworkable, according to hospital leaders. The agency seeks to make no facility payments to newer “non-expected” hospital outpatient departments (those that began billing after November 2, 2015 either due to pending construction or planned expansion) for services they provide to Medicare beneficiaries beginning in 2017. These services could include labs, imaging, and nursing among others; only physician services would be reimbursed under the proposal.

The Bipartisan Budget Act precludes hospitals from receiving the higher outpatient reimbursement rate for off-campus, hospital-owned clinics that opened after November 2, 2015, when the act was passed. Clinics that were already providing services on that date are considered “excepted” and will continue to receive the hospital-based rate, but according to the proposed rule they will lose their grandfathered status if they relocate

and expand. The Bipartisan Budget Act’s 2015 law established a site-neutral payment policy. Care is reimbursed at the same rate regardless of whether the care is delivered in a physician’s office or hospital-based clinic, which has higher overhead expenses.

Hospital leaders maintain that this new proposed rule hinders the ability of hospitals, particularly those in landlocked and dense suburban regions, to expand care into communities. Ironically, federal reform efforts are asking hospitals to provide more integrated, primary care. The Suburban Hospital Alliance, along with the Healthcare Association of New York State and other regional partners, is asking the federal government to delay implementation of the site-neutral rules.

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Marketplace 2017 Rates Released

Open enrollment begins in 10 weeks

November 16, 2016 begins the start of open enrollment – the fourth season since the New York State of Health insurance marketplace became operational in 2013 under the Affordable Care Act. The Department of Financial Services recently approved an average 16.6 percent premium increase for individual plans, a 2.7 percent reduction from the 19.3 percent requested by insurers. For the small group market, the department approved an average 8.3 percent increase, a 4.0 percent reduction from the 12.3 percent requested by insurers. Rising medical costs, especially the high cost of specialty pharmaceuticals, drove the rate increases.

More than 2.8 million people signed up for health insurance through January 31, 2016, the date the third open enrollment season ended, according to the New

York State Department of Health’s 2016 Official Health Plan Marketplace Report. Overall enrollment increased by 33 percent from 2015. Since the Marketplace opened in 2013, the number of uninsured New Yorkers has declined by nearly 850,000.

The fourth open enrollment season will end January 31, 2017. On Long Island, the Nassau-Suffolk Hospital Council, a hospital association that is part of the Suburban Hospital Alliance, is one of three state-appointed navigator agencies serving the region. The Hudson Valley region is serviced by the Community Service Society of New York, Maternal Infant Services Network of Orange, Sullivan and Ulster counties, and the Westchester County and Rockland County Departments of Health.

SPOTLIGHT ON: *Quality*



By Kate Warner, Director of Quality and Education

Report Examines Sepsis Risk Factors

On August 23, the Centers for Disease Control and Prevention (CDC) released the report “Epidemiology of Sepsis: Prevalence of Health Care Factors and Opportunities for Prevention”. The report summarizes the findings of a small retrospective study conducted at four New York hospitals in an effort to determine trends in patient demographics and risk factors for severe sepsis and septic shock. During the study, researchers examined the charts of 316 patients – 246 adult and 70 pediatric – for a series of factors that would indicate trends among patients with the infection, but with specific focus on the location of onset, recent interactions with healthcare providers, and the presence of co-morbidities and chronic conditions.

Researchers found that 72 percent of patients diagnosed with severe sepsis or septic shock had a “healthcare factor” (i.e. nursing home stay, surgery, wound therapy, IV antibiotics, etc.) 30 days before hospital admission, or had a chronic condition for which they received frequent medical care.

More than half of the cases reviewed (58 percent) were classified as healthcare–associated and researchers determined that in 18 percent of those cases, onset of the infection occurred in the hospital. According to the report, hospitalizations and nursing home stays were the most common healthcare factors associated with the onset of sepsis. In cases for which onset was determined to occur in the community, 50 percent of the patients had chronic conditions that would indicate, “frequent encounters with healthcare providers.” Examples provided in the report included diabetes mellitus with complications, cancer, or congestive heart failure.

The CDC indicated that the findings would be used to inform their recommendations for prevention, early recognition, and treatment strategies, as well as resources for clinician and patient education.

Hospitals across New York State have spent a significant amount of time and effort complying with new sepsis-related federal and state reporting requirements and implementing policies and programs to reduce hospital acquired conditions including sepsis. The report seemed to indicate that the CDC would continue working collaboratively with the New York State Department of Health to use the information collected by the state to inform future resources and recommendations.

Click the link below to access the full report:

http://www.cdc.gov/mmwr/volumes/65/wr/mm6533e1.htm?s_cid=mm6533e1_w#contribAff

News Briefs

Suburban Hospital Alliance Launches Webinar Services on New Medicare Standards – On August 25, jointly with the Rochester Regional Healthcare Association, SHANYS launched a series of webinars to educate members about proposed or finalized changes to the Medicare Conditions of Participation (CoPs). CoPs are the minimum health and safety standards, which healthcare providers are required to meet as a condition of receiving Medicare reimbursement. Hospitals are routinely inspected by state surveyors, working as agents for CMS, to determine whether the CoPs are being met. The frequency and unpredictability of these state surveys in recent years has become a major advocacy issue for the Suburban Hospital Alliance. The first webinar focused on proposed changes to discharge planning requirements; upcoming sessions will focus on patient restraints and seclusion, pharmacy and medication standards, and patients' rights. For more information or to register for one of the remaining sessions, contact Kate McCale at kmccale@seagatealliance.com.

DEC Proposes to Mandate Food Donations, Composting – The New York State Department of Environmental Conservation held a series of roundtable discussions across the state in August to preview its proposal to reduce the amount of food waste sent to landfills. DEC officials unveiled a plan that would require large institutions, including

healthcare providers, to donate edible food to local food shelters and separate inedible food scraps from their regular waste streams to be carted to an organic recycler. At forums in New Paltz and Stony Brook, Suburban Hospital Alliance CEO Kevin Dahill and vice president Wendy Darwell, respectively, raised concerns about the cost, operational requirements and safe storage challenges this unfunded mandate would present for hospitals. DEC is still finalizing the proposal but intends to ask for legislative consideration early next year.

Auxilian Institute – Registration is open for HANYS' 50th Annual Institute for Healthcare Auxiliaries and Volunteer Leaders, October 24 and 25 at the Albany Marriott. View the educational programming, the complete program brochure, and register for the event online at www.hanys.org.

Organ Donors – The Governor has signed into law a bill authorizing a person age 16 years or older to make an anatomical gift by enrolling in the Donate Life Registry. This Law takes effect February 14, 2017. New York State has the third-highest need for donors—with 10,000 residents currently waiting for organ transplants—but the lowest percentage of registered donors.

New Funding Opportunity – The Department of Health issued [an RFA for the Statewide Health Care Facility Transformation Program \(SHCFTP\)](#), which will provide up to \$195 million in new funding dedicated to hospitals and other healthcare providers for capital and debt restructuring purposes. The program will provide funding for both capital and non-capital projects for varied types of healthcare providers. Applications must be submitted by September 16. .

Weigh In With Congress – Congress is in recess until Early September; please take this opportunity to meet with your members of Congress while they are home and urge their support on key issues affecting your hospital or health system. HANYS's Washington office stands ready to facilitate meetings with your members of Congress during the summer recess. Suggested topics include:

- HOPD Site-Neutral Law: more flexibility needed
- Hospital Star Ratings and the Hospital Quality Rating Transparency Act of 2016 (H.R. 5927)
- Socioeconomic status risk adjustment for Medicare readmissions program, Helping Hospitals Improve Patient Care Act (H.R. 5273)
- Appropriations for behavioral health and opioid programs, and the Comprehensive Addiction and Recovery Act (S. 524)
- Rural hospital priority bills, the Critical Access Hospital Relief Act of 2015 (S. 258/H.R. 169), the Protecting Access to Rural Therapy Services Act (H.R. 1611/S. 257), and the Rural Hospital Access Act (S. 322/H.R. 663)
- Meaningful Use flexibility
- Simplicity for MACRA/MIPS

News from the Long Island Region

A Report on Nassau-Suffolk Hospital Council member hospital achievements and notable activities



7 of the Best – *U.S. News & World Report* released its 27th annual list of Best Hospitals, with seven Long Island Hospitals being ranked best in the metropolitan region. *St. Francis Hospital* in Roslyn, *Winthrop-University Hospital* in Mineola, *Long Island Jewish Medical Center* in New Hyde Park, *Huntington Hospital*, *North Shore University Hospital* in Manhasset, *John T. Mather Memorial Hospital* in Port Jefferson and *Stony Brook University Hospital* were all ranked in the top 22 hospitals. For the fifth straight year, *St. Francis Hospital* ranked highest among Long Island hospitals, ranking 5th in the metropolitan region. *St. Francis Hospital* and many others were also recognized for their high performance in various categories of specialized care and procedures.

Quality Improvement – *Winthrop-University Hospital* received the New York State Perinatal Quality Collaborative (NYSPQC) Obstetrical Improvement Project's 2015 Quality Improvement Award. The NYSPQC aims to provide the best and safest care for women and infants in the state, to evaluate women for hemorrhage risk and provide education on the signs and symptoms of postpartum preeclampsia.

Most Wired – Five Long Island hospitals were awarded the American Hospital Association's Health Forum and the College of Healthcare Information Management Executive's 17th annual HealthCare's Most Wired™ award. *Long Island Jewish Medical Center*, *North Shore University Hospital*, *Southside Hospital*, *Stony Brook University Hospital* and *Winthrop-University Hospital* were five of only 22 hospitals in New York State to be recognized with the Most Wired award, which is given for utilizing IT protocols to achieve maximum healthcare performance.

Star Patient Experience – The Centers for Medicare & Medicaid Services (CMS) has awarded *John T. Mather Memorial Hospital* four stars – the highest of any Long Island hospital – for patient experience based on publicly reported data from the Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) Survey. Only five hospitals in the New York metro area received four stars or more in the latest ratings, and only 13 in New York State.

If you have news to share about your hospital's achievements, please send to Janine Logan at jlogan@nshc.org

News from the Hudson Valley Region

A Report on Northern Metropolitan Hospital Association member hospital achievements and notable activities



Meeting the Triple Aim – *Northern Westchester Hospital* was recognized for meeting the NYS Triple Aim with the institution of a food quality improvement and patient satisfaction program, Food Is Care. Read their story and submit your hospital achievements at www.HANYS.org.

Nursing Excellence – *Orange Regional Medical Center* achieved Magnet recognition as a reflection of its nursing professionalism, teamwork and superiority in patient care. Only six percent of U.S. health care organizations have achieved Magnet recognition from the American Nurses Credentialing Center, whose Magnet Recognition Program distinguishes organizations that meet rigorous standards for nursing excellence.

Quality Improvement – *Northern Dutchess Hospital* received the New York State Perinatal Quality Collaborative (NYSPQC) Obstetrical Improvement Project's 2015 Quality Improvement Award. The NYSPQC aims to provide the best and safest care for women and infants in the state, to evaluate women for hemorrhage risk and provide education on the signs and symptoms of postpartum preeclampsia.

Regionally Best – *U.S. News & World Report* released its 27th annual list of Best Hospitals, with three NorMet Hospitals being ranked best in the metropolitan region. *White Plains Hospital*, *Northern Westchester Hospital* in Mount Kisco, and *Westchester Medical Center* in Valhalla were all ranked in the top 22 hospitals. These hospitals and others were also recognized for their high performance in various categories of specialized care and procedures.

Get with the Guidelines – *NewYork-Presbyterian/Lawrence Hospital* received the American Heart Association/American Stroke Association's Get With The Guidelines® Stroke Gold Plus Quality Achievement Award with Target: StrokeSM Honor Roll. The award recognizes the hospital's commitment to providing the most appropriate stroke treatment.

If you have news to share about your hospital's achievements, please send to Janine Logan at jlogan@normet.org.

NSHC Events & Meeting Reports

Corporate Compliance Committee – On August 2, the committee received updates about the Medicare Outpatient Observation Notice (MOON) and delayed audits of the Medicare two-midnights rule from NSHC vice president Wendy Darwell. NSHC General Counsel Mark Thomas reported on recent audits of HIPAA business associate agreements and developments in federal anti-trust enforcement.

Quality Committee – Director of quality and education Kate McCale briefed the committee on August 18 on advocacy activities regarding the Medicare hospital star ratings system and summarized the final Medicare inpatient payment rule for the 2017 fiscal year. Ms. Darwell led a discussion about recent experiences with DOH and Joint Commission surveys, and reported to the group on the Council's advocacy efforts on these issues.

Revenue Cycle Committee – At the August 12 meeting, Ms. Darwell provided a briefing on the proposed rules to implement the new Medicare payment policy that equalizes reimbursement rates between hospital-owned and other outpatient clinics. The committee discussed the proliferation of new discount cards or faith-based benefit cards, which are similar to insurance products but do not have the same protections under the law. The committee also received updates on implementation of the Medicare two-midnights rule and a change in partial hospitalization billing for behavioral health patients.

Long Island Health Collaborative – The Collaborative met on August 11 at the Catholic Health Services of Long Island building in Melville. Updates were given by representatives of the island's two Performing Providers Systems, and each of the LIHC's active workgroups. Program manager Sarah Ravenhall announced the Collaborative's upcoming community-based organization events in October, one each in Nassau and Suffolk counties. Ms. Ravenhall announced the formation of a new workgroup, dedicated to behavioral health issues, education, and stigma. Michael Corcoran, data analyst, gave the first of a two-part presentation on regional behavioral health statistics

NSHC Member Hospitals

Brookhaven Memorial Hospital Medical Center

Catholic Health Services of Long Island

- Good Samaritan Hospital Medical Center
- Mercy Medical Center
- St. Catherine of Siena Medical Center
- St. Charles Hospital
- St. Francis Hospital – The Heart Center
- St. Joseph Hospital

Eastern Long Island Hospital

John T. Mather Memorial Hospital

Nassau University Medical Center

Northwell Health

- Franklin Hospital
- Glen Cove Hospital
- Huntington Hospital
- North Shore University Hospital
- Peconic Bay Medical Center
- Plainview Hospital
- Southside Hospital
- Syosset Hospital

Stony Brook University Hospital

Southampton Hospital

South Nassau Communities Hospital

Veterans Affairs Medical Center

Winthrop-University Hospital

NorMet Member Hospitals

Blythedale Children's Hospital

Bon Secours Charity Health System

- Bon Secours Community Hospital
- Good Samaritan Hospital
- St. Anthony Community Hospital

Burke Rehabilitation Hospital

Catskill Regional Medical Center

Ellenville Regional Hospital

HealthAlliance Hospital

- Broadway Campus
- Mary's Avenue Campus

Helen Hayes Hospital

Keller Army Community Hospital

Montefiore Health System

- Mt. Vernon Hospital
- New Rochelle Hospital

The New York Presbyterian Hospitals

- Lawrence Hospital Center
- Hudson Valley Hospital
- Westchester Division

Northern Dutchess Hospital

Northern Westchester Hospital

Orange Regional Medical Center

Phelps Memorial Hospital Center

Putnam Hospital Center

St. Joseph's Medical Center/St. Vincent's Hospital

St. Luke's Cornwall Hospital

St. Vincent's Westchester (Division of St. Joseph's Medical Center)

Vassar Brothers Medical Center

VA Hudson Valley Health Care System

Westchester Medical Center Health Network

- Westchester Medical Center
- MidHudson Regional Hospital

White Plains Hospital