PDPM POST-IMPLEMENTATION:
How do you really know how you're doing?

Now that the Patient-Driven Payment Model (PDPM) has arrived, skilled nursing facilities (SNFs) are preparing for the next steps to survive and thrive. Health Dimensions Group (HDG) has been at the forefront of helping clients from across the country prepare for and optimize performance under this payment model. In addition to our on-demand and live webinars, **we have developed a suite of services to help address key challenges.**

PDPM IMPLEMENTATION CHALLENGE	HDG SOLUTIONS
CODING ACCURACY & COMPLETENESS At present, it can be difficult for SNFs to understand whether they have missed or under-coded important patient characteristics that drive Medicare payment. Missing or inaccurate MDS items create underpayment and compliance risk; this challenge cannot be cured by software alone.	• Clinical Coding & Reimbursement Audit • Independent Benchmarks of PDPM Case Mix Indices & Rate Projections • PDPM Toolkit
STAFF TURNOVER & NEED FOR RETRAINING PDPM is significantly more complicated than RUGs. New and existing staff will need refreshers and ongoing training to keep important payment nuances top-of-mind.	• PDPM Education & Training
ACCURATE BUDGET FORECASTING Given limited experience under PDPM, projecting PDPM revenue for budgeting purposes can be challenging. Understanding how revenue flows by clinical category is even more challenging.	• Rate Projections by PDPM Component
EVALUATING THERAPY MOVING FORWARD Providers lack benchmarks for the provision of high-quality, efficient therapy. Benchmarks are needed for setting realistic expectations of therapy utilization for different clinical categories, evaluating fairness of therapy contracts, or weighing the advisability of providing therapy in-house.	• Therapy Utilization Benchmarks by Clinical Category
LACK OF INSIGHT ABOUT REFERRING HOSPITALS' NEEDS & COMPETITOR PERFORMANCE Insight is essential as SNFs consider increasing their medical complexity as part of a strategy to improve occupancy and drive value.	• Market Analysis & Clinical Service Line Development

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CLINICAL CODING & REIMBURSEMENT AUDIT

An experienced HDG consultant can **audit patient clinical records** to validate accuracy and completeness of MDS scoring, as well as compliance with billing requirements and best practices in documentation. The review is conducted using HDG's proprietary PDPM clinical documentation tool and can be conducted either on site or remotely through access to the electronic medical record (EMR).

PDPM EDUCATION & TRAINING

HDG provides SNF staff with PDPM **education and training** through live and on-demand access to HDG's suite of training webinars that focus on all core operational areas impacted by PDPM. Some of those topics include:

- PDPM operational priorities
- Proper ICD-10 coding, MDS completion, and clinical documentation
- Restructuring rehabilitation services
- Considerations for making the pivot to medically complex care

ON-SITE EDUCATION & IMPLEMENTATION SUPPORT

HDG PDPM consultants are available for **on-site assistance** to ensure a provider's conversion to PDPM is a success. HDG consulting services focus on an array of implementation areas, including clinical program development, staff competency development, and market outreach support.

PDPM TOOLKIT

HDG has a suite of **checklists** and **user-friendly tools** to assist in accurately capturing and documenting patient information necessary for PDPM payment and for compliance risk reduction. These tools include:

- Pre-admission assessment
- Utilization review (case mix group determination process)
- Section GG tool
- Medicare meeting checklist
- ICD-10 coding checklist
- Non-therapy ancillary collection tool
- BIMS/depression scales
- Triple check, billing, and Medicare log
- Clinical documentation guides and auditing checklist
- Decision tree for interim payment assessments (IPAs)
- Case studies for proper diagnoses coding, section GG, therapy, and IPAs

INDEPENDENT BENCHMARKS OF PDPM CASE MIX INDICES & RATE PROJECTIONS BY COMPONENT

HDG has developed a model which **projects Medicare Part A payment rates** by component and PT/OT clinical categories and compares those rates to what otherwise would have been paid under RUGs in an apples-to-apples format. The rate projection is derived from two years of claims data and is driven by the MS-DRG from the prior qualifying hospital stay, subsequent SNF utilization, and known inter-relationships between PDPM components. Our model yields stable estimates that are independent of monthly variations in acuity or changes in coding practices. This approach is one of the few ways that SNFs can reliably project PDPM revenues for budgeting purposes and develop independent **case mix index (CMI) benchmarks** to evaluate current coding practices.

THERAPY UTILIZATION BENCHMARKS BY CLINICAL CATEGORY

HDG has developed a database of therapy utilization by PDPM clinical category derived from claims data. The database includes a series of **risk-adjusted therapy utilization benchmarks** (e.g., median, 25th percentile) based on a cohort of over 5,000 SNFs that met quality rating and functional outcome thresholds. Each SNF's recent historical utilization is compared to risk-adjusted benchmarks displayed by PDPM clinical category and adjusted to reflect potential scenarios of group and concurrent therapy. This data is extremely useful in establishing an objective basis for therapy utilization targets under PDPM for in-house providers, as well as in determining equitable therapy pricing strategies for contracted providers. HDG can also review and advise on **therapy contract terms and conditions.** We have experience with providers large and small from all over the country and provide unbiased guidance.

MARKET ANALYSIS & CLINICAL SERVICE LINE DEVELOPMENT

Using the claims database and our exclusive PDPM model, this analysis includes a review of patient discharges from a SNF's **top referring hospitals** in order to identify clinical categories which are creating longer lengths of stay in the inpatient setting and, thus, represent the best opportunity for clinical service line expansion. In addition, the analysis provides a snapshot of the SNF's **top competitors for referrals.** The snapshot includes risk-adjusted performance data on length of stay, 30-day unplanned readmissions, quality scores, and PDPM impact. This data has been described by clients as "eye opening", as it provides deep insight into service line opportunities under PDPM and competitive challenges.

As a complement to the market analysis, or as a standalone engagement, HDG can assist SNFs in **development of clinical service lines** (e.g., cardio-pulmonary programs) designed to address opportunities presented by PDPM. These engagements are staffed by seasoned operators with a track record of implementing such programs in post-acute environments.

WHY HDG?

The HDG team comprises experienced operators and consultants and can offer an unbiased opinion as you navigate the challenges of this new payment model. If you would like to learn more about how we can assist your organization in optimizing performance under PDPM, please contact us at info@hdgi1.com, 763.537.5700, or healthdimensionsgroup.com.