## Navigating Skilled Nursing Facilities and the Long Term Care Setting

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#### **Disclosures**

- I am employed as a Speech Language Pathologist at Oak Grove Health and Rehab Center and practice as a Speech Language Pathologist within the building.
- I am a contractor for the American Parkinson's Disease Association as a Support Group Leader.
- I am receiving discounted admission to the 2024 SHAV conference as reimbursement from SHAV for this presentation.
- Any clinical or operational recommendations provided are my own, and are not influenced by affiliate organizations or persons.

#### Purpose:

- This presentation will discuss the role of the speech language pathologist in the skilled nursing setting by illustrating the relationship between speech therapy services and facility "success" measures.
- -Attendees will learn to identify components of the Medicare Part A PDPM reimbursement system relevant to speech services, and how speech services positively impact reimbursement and patient outcomes.
- Attendees will learn to define and defend the need for speech therapy services and resources in the long term care setting by identifying speech language pathologist's impact on quality measures, facility CMS star rating, and Medicaid reimbursement.

#### Goal:

 By increasing the attendees ability to assess the need at their own facility and demonstrate high level knowledge of reimbursement and facility measurements of care, speech language pathologist's will be able to effectively illustrate necessity of interventions, resources, and evaluative imaging partnerships to their interdisciplinary team in a way that bridges the language divide often experienced by therapists attempting to advocate within the skilled nursing setting.

#### Intended Outcomes:

- Identify the structure of Medicare Part A reimbursement in the skilled nursing setting as it pertains to speech language pathology services.
- Define and defend the role of the SLP in the long term care setting, to include identifying resources within the setting and defending the necessity of evidenced based interventions required for patient care.
- Illustrate the relationship between speech services and overall patient outcomes in the skilled nursing/long term care setting.



# The Role of the SLP in Skilled Nursing and Long Term Care Settings

How do we establish ourselves as instrumental players in our respective facilities and why does it matter?

## The perceived landscape of the SNF/LTC SLP workplace

- Only SLP in the building
- Average rehab teams of <10 total therapists</li>
- Dieticians across multiple facilities
- Weak relationships with nursing leadership and unit managers
- Varied clinical outcomes based on access to equipment/services
- Therapist burn out/decreased morale across SLP's

#### SO WHAT DOES THIS MEAN?



As SLP's, we need to become operationally educated interdisciplinary team members to bridge the gap in services/resources and increase clinical success!

### Why should we understand SNF/LTC operations as SLP's?

- Implications for speech language pathologists lacking operational knowledge in the skilled nursing setting may include:
  - Reduced facility support and funding for dysphagia imaging partnerships, clinical resources, standardized assessment tools, and supplies necessary for completion of evidenced based interventions.
  - Reduced treatment time allocated to speech therapy services secondary to reimbursement needs and poor understanding of SLP treatment implications
  - Reduced referrals to speech language pathologist within facility to address resident deficits resulting in poor patient functional status and quality of life.

## What do we need to know to be operationally educated in our SNF/LTC settings?

- "Facility Success Measures"
- Skilled Nursing Facility Success Metrics
  - Medicare A Payers- Patient Driven Payment Model (PDPM) Reimbursement System
  - Short Term Care Quality Measure Metrics
  - The New "Payers" on the Block: Revival of Managed Medicare and Commercial Insurance Plans
- Long Term Care Setting Success Metrics
  - Long Term Care Quality Measure Metrics
  - CMS Star Rating
  - Medicaid Reimbursement Strategies: Increasing Facility Daily Rates in Medicaid Buildings

# Skilled Nursing Facility Success Measures

## Medicare A Payers- Patient Driven Payment Model (PDPM) Reimbursement System

- Clinical Case-Mix Reimbursement: Categories based upon clinical data to determine daily reimbursement rate under Medicare A for facilities
- ST Case Mix
  - **BIMS Score:** 12/15 or lower triggers for cognitive impairment
  - **Section K:** Any identified indicators trigger for swallowing
    - GERD considerations
  - **Diet Modifications:** Trigger for Altered Diet
  - **ST Co-morbidities:** CVA, hemiplegia, Traumatic Brain Injury
  - Examples:
    - SA- No identified speech indicators
    - SD- Cognition only
    - SL- Cognition, Swallowing, Co-morbidity: CVA, Altered Diet

SLP	
Case Mix	
SA	\$14.72
SB	\$39.40
SC	\$57.80
SD	\$31.61
SE	\$50.65
SF	\$64.51
SG	\$44.16
SH	\$61.91
SI	\$76.41
SJ	\$64.73
SK	\$80.09
SL	\$91.13

<u>Customer Login</u> (<u>nethealth.com</u>)/reports/pdpmcasemix/30dayretro



### How knowing the ST Case Mix helps us

- Increased ST case mix as the justification for increased speech therapy minutes allocation
- Justification for use of evaluative imaging partnerships (FEES contracts, MBS appt scheduling during skilled stays, additional evaluative services and referrals)
- Increased value and leverage with IDT for speech focused materials and interventions.
- Your clinical expertise can drastically impact facility revenue so you DO have a seat at the table with those KEY facility players.

### Short Term Care Quality Measure Metrics

- Percentage of residents who were re-hospitalized after SNF admission
- Percentage of residents who made improvements in function
- <u>Facility Impact</u>: Quality Measure Star Rating and the CMS Facility Star Rating
- SLP Impact:
  - Fall Prevention
  - Aspiration Pneumonia
  - AAC/Expressive-Receptive Communication Efforts
  - Memory Care Outcomes

#### CMS Links for more information:

- Quality Measures | CMS
- Find Healthcare Providers: Compare Care Near You | Medicare



High Quality Work and Why It Matters - SabbaghELA (dearbornschools.org)



## It's a Commercial Insurance Takeover: The Expansion of Managed Medicare and Commercial Insurance Plans

- Medicare Managed Insurance Companies: Humana, Optima, United Health Care, Optum, Anthem
- What are the key differences in clinical management and reimbursement?
  - Managed by insurance hired case managers for determining length of therapy and facility stays, often of a nursing background
  - Daily Rates/Levels
    - Determined by OUR clinical evaluations, recommendations from therapy and MD, and medical stability
  - 95% PDPM reimbursement
    - Percentage of what PDPM reimbursement would be
- Communication with Administrator, Social Work, MDS Nursing Team(nursing billers) and Families crucial with these payers to maximize insurance support for continued services.
- Is your building cutting these payers early? Are they leaning on you for clinical justification to case managers? If not- here is your chance to shine! Make your value known.

# Long Term Care Setting Success Measures

### Long Term Care Quality Measure Metrics

- SLP Applicable Quality Measures for LTC:
  - Percent of Residents Whose Ability to Move Independently Worsened
  - Percent of Residents Whose Need for Help with Activities of Daily Living Has Increased
  - Percent of Residents Experiencing One or More Falls with Major Injury
  - Percent of Residents Who Lose Too Much Weight
- Ways we can become involved and increase our footprint:
  - Establish REFERRAL PATTERNS in response to falls, weight loss, change in conditions noted by nursing or other facility providers
  - Advocate for SLP led services to be utilized in order to prevent recurrence of incidents and changes that would impact facility quality measure star rating.
  - Educate facility on speech interventions that can positively impact independence with ADLs, weight stability, fall prevention, overall independence on the unit

#### **CMS Star Rating**

- Overall Star Rating:
  - Annual Health Inspection/Survey
  - Staff Rating
  - Quality Measure Rating
- 1-5 Star Averaging
- How do we impact Star Rating as SLP's:
  - Quality Measure Rating Impact
  - Annual Health Inspection Impact-Tag Prevention and QOL assurance by providing ST services timely and thoughtfully



CMS Five-Star Quality Rating Awarded to MediLodge of Monroe! - MediLodge of Monroe



## Medicaid Reimbursement Strategies: Increasing Facility Daily Rates in Medicaid Buildings

- Medicaid Reimbursement is established by MDS billing nurses on a Quarterly and Annual basis to determine daily rate reimbursement (RUG score) for facilities by reporting:
  - functional and medical status
  - therapy services rendered
  - Changes in condition with ADLs, mobility, and cognition/swallowing
- How do we impact Medicaid Rates:
  - Addressing weight loss
  - Treating cognitive decline as it impacts communication, participation in ADLs, and overall medical stability
  - Provide services to prevent hospitalization
  - Identify medical changes early to prevent decline/changes in condition that may otherwise negatively impact reimbursement
- Services we can justify by using this knowledge:
  - On-site and off-site evaluative imaging, purchasing of specialized standardized assessments, increased speech minutes, increased speech therapy supplies and resources, increased support for collaborating with specialists: neurology, cardiology, psychiatric specialists, AAC technicians etc.



### Put it in motion:

CULTIVATE increased support for our discipline by being operationally educated

#### **Answering Outcome 1**

- Identify the structure of Medicare Part A reimbursement in the skilled nursing setting as it pertains to speech language pathology services.
  - Know the ST Case-Mix and its impact on daily rate
  - Understand the diagnoses and scores that increase reimbursement and show our value to skilled nursing facilities by providing increased identification... and patient clinical success as a result!

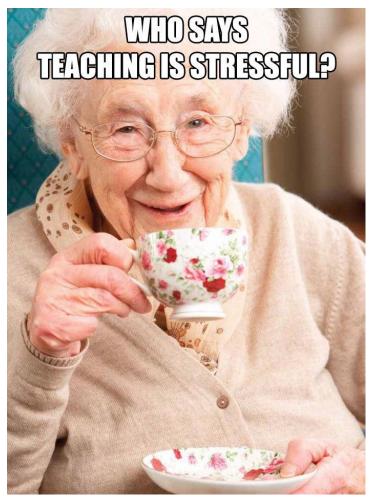




#### **Answering Outcome 2**

- Define and defend the role of the SLP in the long term care setting, to include identifying resources within the setting and defending the necessity of evidenced based interventions required for patient care.
  - We ARE key players in clinical outcomes and reimbursement
  - Educate on the importance of establishing SLP focused referral patterns and establishing clinical interventions early
  - Outline our impact on Quality Measures
  - Justify our need for resources and supplies with clinical AND operational jargon

#### **Answering Outcome 3**



50 Teacher Memes That Will Make Teachers Laugh, Then Cry | Bored Panda

- Illustrate the relationship between speech services and overall patient outcomes in the skilled nursing/long term care setting.
  - SLP's address cognition, dysphagia, dysarthria, voice disorders, expressive and receptive language impairments
  - Educate others on how ST services positively impact fall prevention, weight management, ADL participation, independence on the unit, and many other quality measures
  - Teach our IDT's that when properly supported and utilized, we are REVENUE BUILDERS



## Questions?



Questions you have? Ask them you must - Baby Yoda | Make a Meme

#### References

- https://www.cms.gov/
- https://go.nethealth.com/physical-therapy-software
- <a href="https://www.cms.gov/medicare/quality-initiatives-patient-assessment-instruments/nursinghomequalityinits/nhqiqualitymeasures">https://www.cms.gov/medicare/quality-initiatives-patient-assessment-instruments/nursinghomequalityinits/nhqiqualitymeasures</a>
- Find Healthcare Providers: Compare Care Near You | Medicare

