

OPTIMISTIC

A Demonstration Project in the CMS Initiative to Reduce Avoidable Hospitalizations Among Nursing Facility Residents

Visit our website for
supportive resources
and FAQs



Vision

To revolutionize
nursing home care.

Mission

To optimize the quality of life of nursing
home residents by implementing evidence-
based strategies to improve medical,
transitional, and palliative care.

1

optimistic-care.org

OPTIMISTIC
TRANSFORMING CARE

OPTIMISTIC

TRANSFORMING CARE

Operations Learning Community Webinar

June 13, 2017

- Please mute your line (*2) during the initial slides
- Unmute (*2 again) to speak

Fielding questions today ...



Erin O'Kelly-Phillips,
Analytics Team



Ellen Miller,
Education &
Training Team
Lead



Laura Holtz, Senior
Research Manager
& Payment Model
Specialist

1

Billing Updates

Billing Information and Questions

- Check optimistic-care.org
- Contact Laura Holtz, Senior Research Manager and Payment Model Specialist:
holtzl@iupui.edu



2

Data and Analytics Team Updates

Change in submission schedule

- Based on your feedback, we have revised our submission policy
- Beginning in July, you may choose to submit data monthly
 - You may submit July's data (7/1/2017 through 7/31/17) during the first week of August
 - Submissions are due by the 7th of the month

Submission schedule (con't)

- Your facility may choose to continue submitting weekly
- The REDCap system will not change
 - We will revise the calendar in REDCap with the monthly due dates
 - If the 7th falls on a weekend, your submission is due on that Friday

Submission schedule (con't)

2017 OPTIMISTIC Facility Data Monthly Submission Dates		
MONTH START DATE <i>First Day of Month</i>	MONTH STOP DATE <i>Last Day of Month</i>	SUBMISSION DUE DATE
7/1/2017	7/31/2017	8/7/2017
8/1/2017	8/31/2017	9/7/2017
9/1/2017	9/30/2017	10/6/2017
10/1/2017	10/31/2017	11/7/2017
11/1/2017	11/30/2017	12/7/2017
12/1/2017	12/31/2017	1/5/2018

Change in Condition

- The only conditions for billing and reporting are:
 - Pneumonia
 - Dehydration
 - Congestive Heart Failure
 - Urinary Tract Infection
 - Skin ulcers/cellulitis
 - COPD/Asthma
- Please include an end reason when you report the billing end date

Change in Condition (con't)

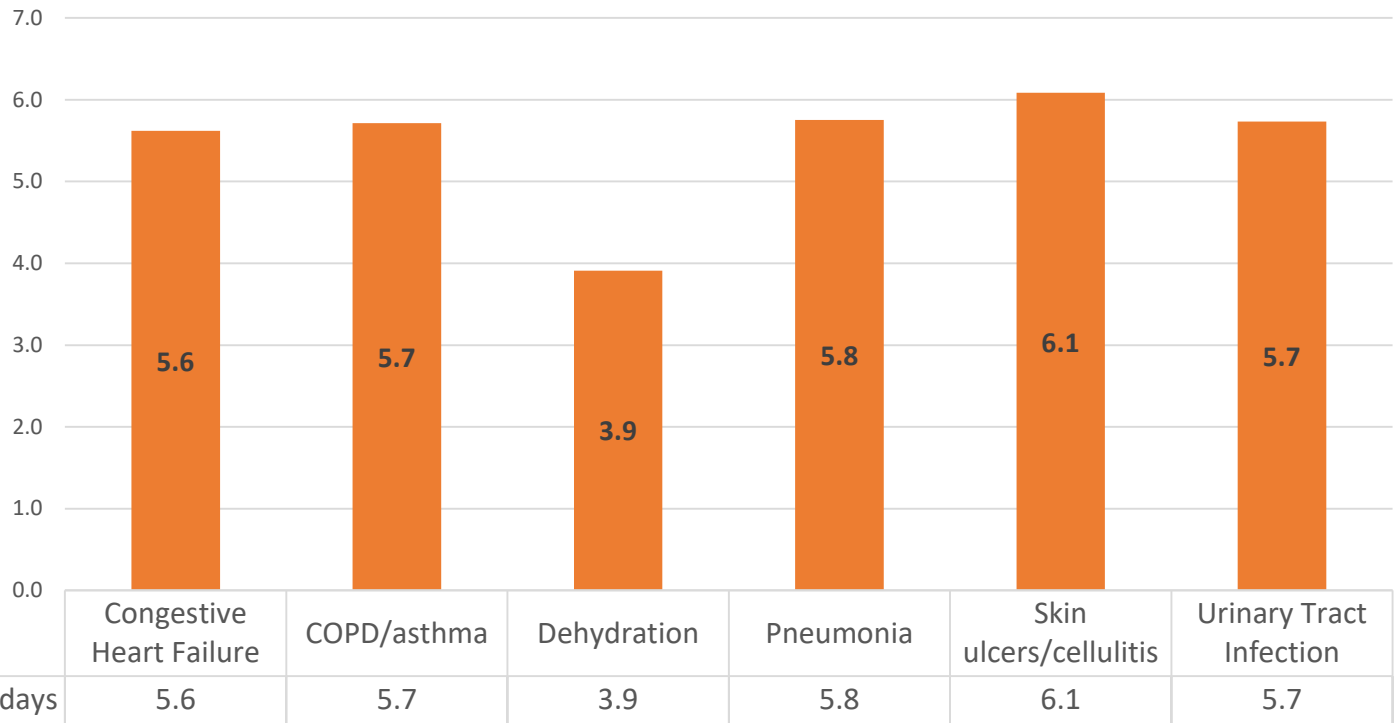
- Only submit changes in condition on this template if:
 - The resident is eligible for OPTIMISTIC
 - A provider has certified that they have one of the six conditions
 - Your facility has billed, or will submit a bill, for this episode under one of the OPTIMISTIC codes

Other

- Ensure correct MRN for the resident on every row that they are listed- even if it is on multiple rows
- If you submit corrections to the Data Team, please make sure that you apply these corrections to all future submissions.

Data Tidbit

Average length of certification by condition



Fielding questions today ...



Erin O'Kelly-Phillips,
Analytics Team



Ellen Miller,
Education &
Training Team
Lead



Laura Holtz, Senior
Research Manager
& Payment Model
Specialist



3

Wounds, Cellulitis, Skin Infection

**Participating facility:
Swiss Village**

Alma Ahmetovic, VP of Healthcare Services

Qualifying Diagnosis

Skin Infection

(maximum benefit duration 7 days)

New onset of painful, warm and/or swollen/indurated skin infection requiring oral or parenteral antibiotic therapy

If associated with a skin ulcer or wound there is an acute change in condition with signs of infection such as purulence, exudate, fever, new onset of pain, and/or induration.

Facility Code: G9682

Practitioner Acute Nursing Facility Care Code: G9685

Facility Payment for Six Qualifying Conditions: Skin Infection

Billing Code

- G9682

Facility Services Required to be Available

- Frequent turning
- Nutritional assessment and/or supplementation
- At least daily wound inspection and/or periodic wound debridement
- Cleansing, dressing changes, and antibiotics (oral or parenteral)

Maximum Benefit Period

- 7 days

Key Learning Points for Nurses

- Inspect skin per facility guidelines
- Inspect wound daily (if wound present)
- Monitor for skin or wound infection
- Assess and monitor nutritional status
- Assure wound dressing completed as ordered - initial, date and time all dressings

Key Learning Points for CNAs

- Reposition residents routinely
- Keep skin clean, dry and protected as appropriate from moisture, urine and feces
- Report change in skin condition to nursing staff immediately
- Report to nursing if wound dressings dislodged or soiled so it can be replaced

Clinical Presentation of Skin Infection (Cellulitis) / Wound Infection

New onset of:

- Advancing erythema (redness)
- Induration (hardness)
- Warmth
- Edema / Swelling
- Pain
- Fever
- Purulence (if wound present)
- Acute change in condition

OPTIMISTIC

A Demonstration Project in the CMS Initiative to Reduce Avoidable Hospitalizations Among Nursing Facility Residents

Visit our website for
supportive resources
and FAQs

