OPTIMISTIC Phase 2 Eligibility Overview

Who is eligible to start OPTIMISTIC Phase 2?

- Residents who have been in your facility for 101 cumulative days, starting from their primary date of admission to your facility are eligible to start OPTIMISTIC Phase 2, and to receive services covered by the new CMS codes.

  **AND**
  - Are enrolled in Medicare (Part A and Part B FFS)
  - Are NOT enrolled in a Medicare managed care plan (e.g., Medicare Advantage).
  - Reside in a Medicare or Medicaid certified LTC facility bed.
  - Have not elected to opt-out of OPTIMISTIC Phase 2.

Who is ineligible to start OPTIMISTIC Phase 2?

- Residents who have been in the facility for less than 101 cumulative days.
- Residents who are enrolled in a Medicare managed care plan (e.g., Medicare Advantage), who receive Medicare through the Railroad Retirement Board.
- Residents who are currently on the hospice benefit, even if they are receiving the benefit in the facility.

What counts towards the 101 days?

- If a resident is eligible, days spent physically in the facility. These days do not need to be consecutive, unless the resident has been out of the facility for 60 consecutive days or more.

**If the resident has been out of the facility for 60 or more consecutive days:**

- If the resident returns to the facility after 60 or more days, and are otherwise still eligible for OPTIMISTIC, the 101-day clock resets. Their date of return would count as Day 1. The resident will not be eligible until an additional 101 days of residence.
What does not count towards the 101 days?

- Days on Hospice: If a resident in your facility elects the hospice benefit, their days on this benefit do not count towards the 101 days. If the resident later elects to stop this benefit, you may resume counting towards the 101-day requirement, but the days spent on hospice cannot be applied towards this total.
- Days out of the Facility:
  - Days in the hospital
  - Therapeutic Leave
  - Days in another facility
  - Days in Hospice outside of the facility

What special circumstances might affect eligibility?

- If an eligible resident elects the Medicare hospice benefit, but later discontinues that benefit, that individual’s eligibility would be restored after they disenroll as long as other criteria remain applicable. Days in hospice do not count toward the 101 day minimum.
- A resident who enrolls in Medicare Advantage and later disenrolls becomes eligible for OPTIMISTIC Phase 2 if they meet the other criteria. If they disenroll, the days of residence while on Medicare Advantage enrollment would then count toward the 101 day minimum.

How to use the OPTIMISTIC Phase 2 Scenarios: Counting the 101 Days in Facility

The attached graphic presents five hypothetical examples of determining whether a resident has reached the 101-day requirement. The color of the boxes indicates whether the days count towards this criteria, as follows:

- These days DO count towards the 101-day total
- These days DO NOT count towards the 101-day total; Not eligible to start
- This resident has 101 days or more and is eligible to start

Who to Contact with Questions

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## OPTIMISTIC Phase 2 Scenarios: Counting the 101 Days in Facility

<table>
<thead>
<tr>
<th>Resident</th>
<th>Hospitalization</th>
<th>In Facility</th>
<th>Hospital Transfer &amp; Admission</th>
<th>Readmit to Facility on SNF Benefit (Medicare A)</th>
<th>Off of Skilled Benefit Private Pay or Medicaid</th>
<th>Total Days</th>
<th>Eligibility</th>
</tr>
</thead>
<tbody>
<tr>
<td>Resident A</td>
<td>Hospitalization</td>
<td>75 days as of 10/1/2016</td>
<td>4 days</td>
<td>16 days</td>
<td>26 days</td>
<td>117</td>
<td>Eligible for OPTIMISTIC</td>
</tr>
<tr>
<td>Resident B</td>
<td>Former Hospice</td>
<td>86 days as of 10/1/2016</td>
<td>4 days</td>
<td>30 days</td>
<td>15 days</td>
<td>101</td>
<td>Eligible for OPTIMISTIC</td>
</tr>
<tr>
<td>Resident C</td>
<td>SNF Benefit</td>
<td>Enters Facility on SNF Benefit (Medicare A) 41 days as of 10/1/2016</td>
<td>35 days</td>
<td>14 days</td>
<td>36 days</td>
<td>112</td>
<td>Eligible for OPTIMISTIC</td>
</tr>
<tr>
<td>Resident D</td>
<td>On Medicare Advantage</td>
<td>Nursing Facility Stay 60 days</td>
<td>Enrolls in Medicare Advantage OPTUM, IUH, etc. 120 days</td>
<td>6 days</td>
<td>15 days</td>
<td>60</td>
<td>Not Eligible for OPTIMISTIC</td>
</tr>
<tr>
<td>Resident E</td>
<td>Off of Medicare Advantage</td>
<td>Nursing Facility Stay In Facility 30 days as of 10/1/2016</td>
<td>Enrolls in Medicare Advantage 120 days</td>
<td>Disenrolls in Medicare Advantange</td>
<td>Nursing Facility Stay Private Pay or Medicaid 12 days</td>
<td>162</td>
<td>Eligible for OPTIMISTIC</td>
</tr>
</tbody>
</table>