



# **Impact of Healthcare Reform on Nurse Education and Training**

- Healthcare Reform
  - Quality and Efficiency
- Related Issues
  - Nursing Shortage?
  - Institute Of Medicine Report
  - Electronic Medical Records
- Education and Training
  - Aligning to new industry demand
  - Quality education initiatives



Health Care Reform: Controlling Costs, Paying for Quality

# **FINANCIAL IMPLICATIONS**



# **Financial Implications of Health Reform Facing the Health System**

- Elimination of Payments for
  - Select re-admissions
  - Healthcare-Acquired Conditions/Serious Adverse Events
  - Disproportionate share hospitals
- Value Based Purchasing (Pay-for-Performance)
  - Hospital Consumer Assessment of Healthcare Providers & Survey (HCAHPS)
  - Core Measures
- Nursing Homes
  - Shift to home and community based settings



# Medicare Pay-for-Performance Provisions

	Inpatient Quality Reporting (IQR)	Hospital Acquired Conditions (HAC)	Value-Based Purchasing (VBP) (starts 10/1/11)	Readmissions	HAC Penalties	Meaningful Use
FY 2005	0.40%					
FY 2007	2.00%					
FY 2009	2.00%	No Higher \$				
FY 2013	2.00%	No Higher \$	-1.00%	-1%		
FY 2014	2.00%	No Higher \$	-1.25%	-2%		
FY 2015	-.25% MB*	No Higher \$	-1.50%	-3%	-1%	-.25% MB
FY 2016	-.25% MB	No Higher \$	-1.75%	-3%	-1%	-.25% MB

\*Medicare Market Basket



# Hospital Readmissions

2013 Hospitals will lose reimbursement for higher than expected readmission rates for specific conditions

2012 Conditions that will impact in 2013:

- Acute myocardial infarction
- Congestive heart failure
- Pneumonia

2015 Conditional conditions will be added:

- Chronic obstructive pulmonary disease
- Coronary artery bypass graft (CABG)
- Percutaneous transluminal coronary angioplasty
- Other vascular conditions



# No Reimbursement for Certain Hospital Acquired Conditions

sample list FY 2011

Surgery performed on  
wrong body part

Surgery performed on  
wrong patient

Wrong surgical  
procedure on a patient

Falls and Trauma

Blood Incompatibility

Catheter Associated  
UTI

Surgical Site Infection  
Following Coronary  
Artery Bypass Graft

Manifestations of Poor  
Glycemic Control

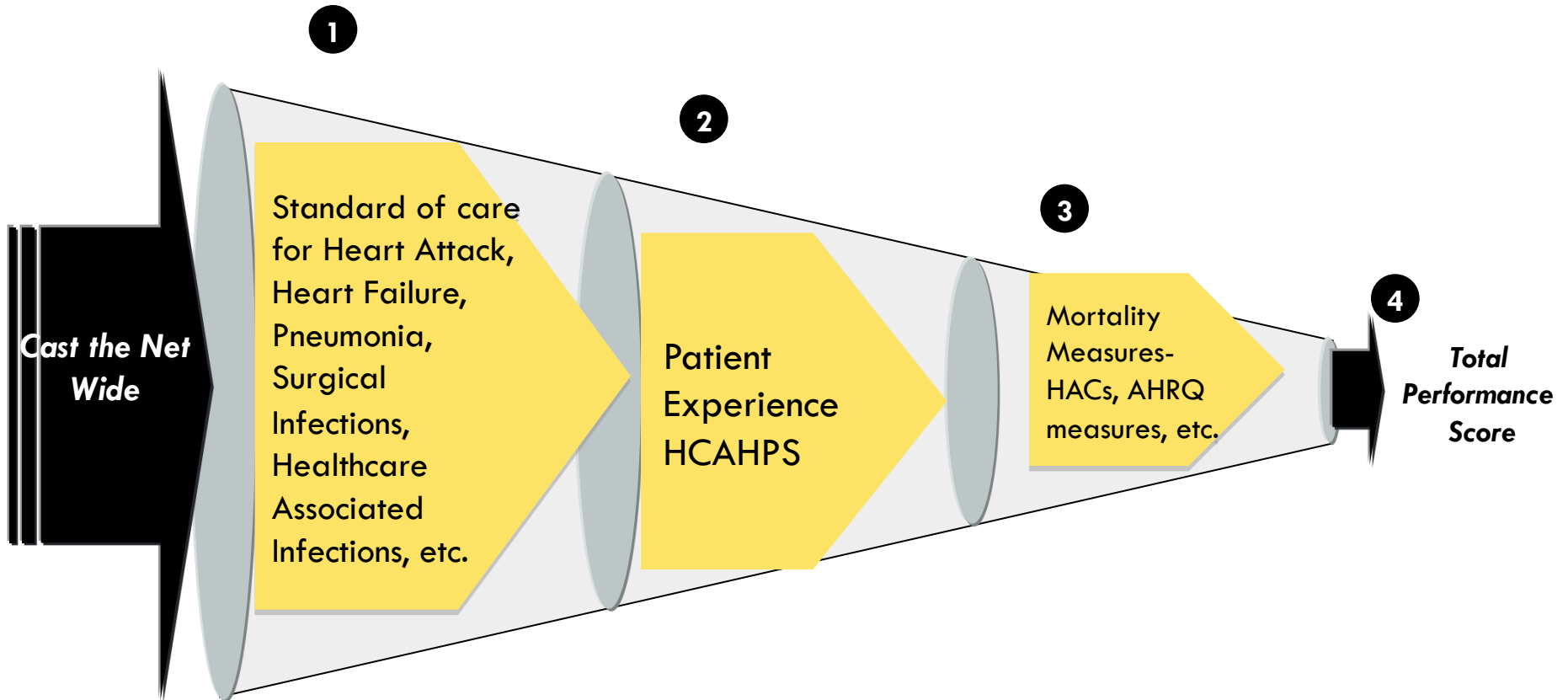
Deep Vein Thrombosis  
or Pulmonary  
Embolism Followed by  
Certain Orthopedic  
Procedures



# Value-Based Purchasing Measures

2013	2014	2015+
Clinical Process of Care measures (17)	Outcome Measures (20)	Outcomes
<ul style="list-style-type: none"><li>•Acute Myocardial Infarction (3)</li><li>•Heart Failure (3)</li><li>•Pneumonia (4)</li><li>•Healthcare Associated Infections (4)</li><li>•Surgical Care Improvement (3)</li></ul>	<ul style="list-style-type: none"><li>•Mortality (3)</li><li>•Hospital Acquired Conditions (8)</li><li>•AHRQ Patient Safety Indicators (PSIs) (5)</li><li>•AHRQ Inpatient Quality Indicators (IQIs) (2)</li><li>•AHRQ Composite Measures (2)</li></ul>	<ul style="list-style-type: none"><li>•Medicare Spending per beneficiary</li><li>•Other internal efficiency metrics</li></ul>
Patient Experience of Care/ Hospital Consumer Assessment of Healthcare Providers and Systems (8)		

# Total Performance Scores







# National Healthcare Reform for Nursing Homes – Value Based Purchasing 2014



Focus on prevention
Expansion of community and home-based services
Emphasis on lower-cost options and high quality
QAPI – Quality Assurance Performance Improvement

Focus on prevention

Expansion of community and home-based services

Emphasis on lower-cost options and high quality

QAPI – Quality Assurance  
Performance Improvement



# Financial Implications for Nursing Homes - Documentation

## MDS 3.0 (Minimum Data Set)

Data collection tool (40 pages) that is completed for *every* nursing home resident at least 4 times a year

Data is used to develop resident's plan of care

Aggregate data used to calculate reimbursement for  
nursing home



# Nursing Homes - Financial Implications

## Quality Indicator Survey

- Greater consistency, objectivity across states
- Focus based on data from MDS 3.0 forms
- Emphasis on person-centered care

## Quality Assurance Performance Improvement

- CMS initiative – will be mandatory in all nursing homes by 2013
- Focus on deep system-wide changes to improve procedures
- Initial focus – reduce falls; psychotropic medications

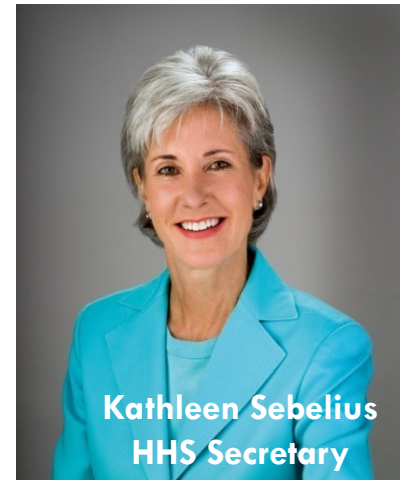


Health Care Reform: Quality Care

**INNOVATION**

# \$\$\$ to Motivate Innovation

- Center for Medicaid and Medicare –  
\$10 billion over 10 years
- Enhanced Federal Medicaid Assistance Percentage (FMAP)  
\$ for state programs to coordinate care for dual eligible consumers





## **Healthcare Delivery Focused On:**

- Prevention
- Chronic Disease Management
- Person and Resident Centered Care
- Coordinated Care
- Seamless Care Transitions
- Whole Person Care
- Information Transparency
- Right Care, Right Place, Right Time

# Be recognized for promoting health and wellness





# **New Models of Delivery**

- Coordination for Dual Eligible Consumers
- Health Homes/Patient Centered Medical Homes
- Accountable Care Organizations



- [illegible]



# Experience for the Consumer



Health Home  
Primary Care  
Provider  
(Coordination)

Links to  
Specialty  
Care

Community  
Resources  
Health  
Coaching

Wellness  
Chronic  
Disease  
Management



External Environment for Nurses

# **OTHER FACTORS**



80% of nurses should have BSN by 2020



# Will the Role of the RN Change?

- The impact Health Reform and Changes to the Delivery of Health Care will have on the R.N.
  - Shift from inpatient to outpatient care management
  - Focus on chronic disease management
  - Reimbursement dependant upon coordination of care and efficiencies
  - Creation of new job titles and expansion of scope of professional practice
    - Increased need for advanced practice nurses



# **PA Nursing Shortage?**



# **New Models Will Require a Shift in R.N. Roles and Focus**

Bedside to community

- Manage transitions in care
  - Team approaches
- Learn new skills to manage care in:
  - Medical home
  - Accountable care organizations
  - Long term care facilities
  - Public Health Settings/Clinics
  - Schools
- Increase need for additional advance practice nurses in clinics and homecare
- Advance health information technology skills
  - Telemedicine and
  - Tele-homecare
  - Patient education
  - Coordination of patient care and experience



# The Challenge: How do we get there?

## Education and Collaboration

- Prepare and educate nurses on the impact of health reform on the nursing profession
- Partner with Academia to develop new programs for the nurse of the future, which is today!
- Increase nursing articulation programs
  - RN to BSN
  - BSN to Masters or Advance Practice Nurse
- Partner with management to begin to organize and develop programs that are aligned with the vision of the organization

## Adopt Culture Change Skills

- Position R.N.'s to lead the development and implementation of Transition- in-Patient-Care
  - IHI Best Practices
- Offer programs to enhance skills:
  - Communication
  - HIT
  - Team work
  - Assessment
  - Triage
  - Time management





## **More Expanded Roles**

- **Patient Advocate**
- **Admissions and Patient Assessment Coordinator**
- **Care Managers**
- **Decision Support System**
- **NSQUIP surgical data and trending**
- **Care Coordination Home Tele-health (CCHT)**
- **Home Health / Extended Care / HBPC (Home Based Primary Care)**
- **Informatics Nurse**
- **Quality and Patient Safety Experts**