

Mandated report: Developing a unified payment system for post-acute care

ISSUE: Section 2(b)(1) of the Improving Medicare Post-Acute Care Transformation (IMPACT) Act of 2014 requires the Commission to develop a prototype prospective payment system (PPS) spanning the post-acute care (PAC) settings, using the uniform assessment data gathered previously during CMS’s Post-Acute Care Payment Reform Demonstration (PAC-PRD) (completed in 2011). The Act requires the Commission to submit a report by June 30, 2016, presenting an approach for a unified, cross-setting PAC payment system and, to the extent feasible, consider the impacts of moving to such a system.

KEY POINTS: This month we address issues raised during the Commission’s previous discussion at the September meeting.

ACTION: Commissioners should discuss the material presented and provide guidance to staff on the overall approach to fulfilling the mandate and initial findings.

STAFF CONTACT: Carol Carter (202-220-3724) and Dana Kelley (202-220-3703)