

Assessing payment adequacy and updating payments: ambulatory surgical centers

ISSUE: By law, each year the Commission is required to review Medicare payment policies and to make recommendations to the Congress. In the March 2015 report, the Commission will examine whether payments to ambulatory surgical centers (ASCs) are adequate and how they should be updated in 2016.

KEY POINTS: We evaluate several factors to determine the adequacy of Medicare payments for ASC services: beneficiaries' access to services, ASCs' access to capital, and change in revenue from the Medicare program.

ACTION: Commissioners should review the findings in preparation for a vote on the draft recommendation at the January 2015 meeting.

STAFF CONTACT: Ariel Winter (202-220-3700); Dan Zabinski (202-220-3722).

Assessing payment adequacy and updating payments: Outpatient dialysis services

ISSUE: By law, each year the Commission is required to review Medicare payment policies and to make recommendations to the Congress. The Commission asks whether payments for outpatient dialysis services are adequate and how they should be updated in 2015.

KEY POINTS: At this meeting, we will examine information about the adequacy of current aggregate outpatient dialysis payments. We will look at information about:

- Access to care: supply of providers and volume of services
- Quality of dialysis care
- Access to capital
- Medicare payments and costs.

ACTION: Commissioners should review the findings and be prepared to vote on the draft payment update recommendation.

STAFF CONTACT: Nancy Ray (202-220-3723)

Assessing payment adequacy and updating payments: Hospice services

ISSUE: By law, each year the Commission is required to review Medicare payment policies and to make recommendations to the Congress. The Commission asks whether payments to hospice are adequate and how they should be updated in 2016.

KEY POINTS: At this meeting, we will review information about the adequacy of current aggregate hospice payments, including:

- Access to care: supply of providers and volume of services
- Quality of care
- Providers' access to capital
- Medicare payments and providers' costs in 2012.

ACTION: At the meeting, the Commissioners will vote on the draft payment update recommendation.

STAFF CONTACTS: Kim Neuman (202-220-3700)

Assessing payment adequacy and updating payments: Inpatient rehabilitation facility services

ISSUE: By law, each year the Commission is required to review Medicare payment policies and to make recommendations to the Congress. The Commission asks whether payments to inpatient rehabilitation facilities (IRFs) are adequate and how they should be updated in 2016.

KEY POINTS: At this meeting, we will review information about the adequacy of Medicare's current payments to IRFs.

ACTION: Commissioners should review the findings in preparation for voting on the draft recommendation.

STAFF CONTACT: Dana Kelley (202-220-3703)

Assessing payment adequacy and updating payments: Long-term care hospital services

ISSUE: By law, each year the Commission is required to review Medicare payment policies and to make recommendations to the Congress. The Commission asks whether payments to long-term care hospitals (LTCHs) are adequate and how they should be updated in 2016.

KEY POINTS: At this meeting, we will review information about the adequacy of current aggregate Medicare LTCH payments. We will look at information about: beneficiaries' access to care, the supply of LTCHs, changes in the volume of services furnished, quality of care, providers' access to capital, and Medicare's payments and costs.

ACTION: Commissioners should review findings and be prepared to discuss at the January meeting.

STAFF CONTACT: Stephanie Cameron (202-220-3729)