



REVENUE BOOSTING SOLUTIONS FOR A SUCCESSFUL CMI SYSTEM.

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The impact of resident care and accurately identifying the acuity of a resident are the defining drivers of reimbursement for Skilled Nursing Facilities (SNFs). The management of these systems will determine whether a SNF can remain financially stable during very challenging times. A vital strategy to safeguard Skilled Nursing Facilities is the establishment of a comprehensive approach designed to guide facilities to success under case-mix reimbursement.

What is Case Mix?

A case-mix or acuity-based reimbursement system is the structure defined by CMS on reimbursement to facilities for Medicaid residents based on their acuity and resource requirements. Active medical diagnosis, care needs, comorbidities, functional status, and other resident-specific criteria will determine which Resource Utilization Group (RUG) most accurately reflects a resident's status. The RUG score is assigned a case mix index (CMI) which accounts for the resources needed to care for this resident. The higher the CMI, the more care and resources the resident requires.

How are Case Mix and Facility Medicaid Rate Determined?

On July 7th, 2021, New York implemented a new CMI system with six-month capture windows. March 31st is the deadline for the first submission of the year, and September 30th for the second submission. During these six months, all OBRA assessments will be averaged together to determine a Medicaid CMI score for the SNF. Residents may have at least two qualifying assessments, if not more, during the CMI window. Careful management of the ARD periods to accurately reflect the resident's acuity will be imperative for success.

STEPS to Build a Successful CMI Program



Many facilities rely on reaching a goal without implementing a strategic plan in place to reach that goal. The CMI process is no different. If consistent systems are not developed that are collaborative and efficient, the CMI process will break down. Preferred Therapy Solutions has advanced a comprehensive model with a Six-Step Approach for CMI Success. By implementing these procedures and adhering to program maintenance CMI success is attainable.

STEP 1 Staff Education

Educating and empowering staff continues to be an excellent motivator and team-building experience. At Preferred Therapy Solutions, we thrive in creating successful programs and sharing in the success of our models especially working in a system designed to capture the knowledge of clinicians and the skilled care they deliver. Providing pertinent education and training on CMI and why it is utilized for determining reimbursement is a required step and cannot be overlooked. It is imperative for the nursing and therapy departments to become versed in what is required and how their impact affects CMI. Education sessions provide key performance indicators in understanding specific resident focus areas when analyzing CMI.



STEP 2 Create a CMI Team

Interdisciplinary Teams (IDT) are crucial to the success of a CMI structure. The team should consist of the Administrator, DNS, MDS, Nurse Managers, Rehab Director, Dietary, and Social Services. These departments have a critical part in the CMI process.



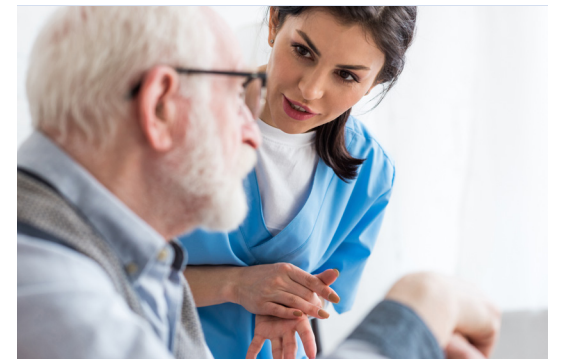
STEP 3 Provide Excellent Care and Document It

As per the 2020 NY OMIG report, approximately \$118 million was taken back by Medicaid through RACs and Provider Audits. A SNF's success is becoming increasingly dependent on knowing residents' acuity, providing quality care, and the correct documentation of care. A systematic chart review should be completed to gather diagnoses and care requirements upon admission and continued with updated information throughout the resident's stay. Documentation procedures on units should be thorough, skilled, and timely. As the saying goes, "if it wasn't documented, then it didn't happen." Inaccurate and lack of detailed documentation leaves a facility vulnerable to poor audit results and potential recoupment of reimbursement.



STEP 4 Collaborative Rounding Systems

Develop regular CMI procedures to become efficient with identifying resident needs and ensuring that all measures are uncovered. Resident rounds allow for a systematic review of the plan of care with the IDT. Active diagnoses and treatments are reviewed to confirm they are still in line with the resident's medical picture and needs. If there is a change in status, the IDT can accurately document the change without delay certifying the medical record is reflective of the change. Supporting resident care with documentation is a critical component that is necessary for CMI success.



STEP 5 Regular CMI meetings

SNFs are still struggling with the aftereffects of the COVID-19 pandemic. There are staffing shortages, overworked personnel, and burnout; everyone is running in a million different directions. It is now more important than ever that during project overload, it is imperative to make sure certain resident information is received and shared among departments. A successful CMI team works in tandem to ensure all parties involved are on point and heading in the right direction. Regular CMI meetings provide a forum for open discussion, clinical updates, and consistency for information to be exchanged. Have there been changes in medical status i.e., fever, IV medications, falls? Has a new treatment been ordered? Did therapy services begin? Does MDS need to change the ARD to best reflect the resident status? A weekly CMI meeting will allow the



MDS and Rehab should also set up separate meetings to discuss residents who are in therapy to ensure that the ARD selections match the timeframe of the care that is being provided. These collaborative meetings keep all required departments informed about what is occurring with the resident and any course of action that may be required.

STEP 6 Data Collection and Tracking

Collecting, tracking, and interpreting data will also lead to a successful CMI system. Understanding the CMI history of your facility will help to identify past performance and guide future strategy. Focus areas for analysis should include a percentage of rehab capture, ADL index, and hybrid capture. In addition, SNFs should analyze the distribution of RUGs amongst the nursing categories to confirm skilled nursing services are accounted for accurately and appropriately. Data analysis identification improves potential areas of opportunity to enhance CMI capture and reimbursement.



The success of a CMI program will be dependent upon implementing a team approach. Every department plays a role. An engaged Administrator and management team who can provide the support and resources needed are a critical component of the program. Having a solid clinical team that is educated on CMI will ensure that a facility is properly reimbursed for the care they are providing. With the change in the assessment window that was finalized in 2021 coinciding with the challenges of the PHE, many facilities have not been able to adapt their CMI strategies to align with this change. To learn more about the Preferred Therapy Solutions and how our *Six-Step Approach for CMI Success* can assist your facility, contact Jim MacManus, Director of Business Development at jmacmanus@preftherapy.com. #itsallaboutthepatient.



ABOUT PREFERRED THERAPY SOLUTIONS

Preferred Therapy Solutions is a full-service rehabilitation management organization dedicated to providing state-of-the-art clinical, management, billing, and information technology solutions to the post-acute and long-term care industry. Preferred Therapy Solutions is able to assist in developing a strategic road map designed to increase SNFs market share by identifying potential referral targets and providing useful information on competitor's performance. Preferred Therapy Solutions abilities significantly enhance the quality, productivity, scope, and efficiency of any facility's rehabilitation department while maintaining a focus on achieving high levels of patient satisfaction and providing excellent customer service.

