#25-Nutrition and PDPM for Prevention and Management of Malnutrition

Brenda Richardson,

Thursday 11/21/2019

2 PM - 3 PM

KBN # 5-0002-12-19-583
Nutrition and PDPM for Prevention and Management of Malnutrition

Thursday, November 21, 2019
2:00-3:00 PM

Presenter:
Brenda Richardson, MA, RDN, LD, CD, FAND

Objectives:
After attending this session attendees will be able to:
• Identify key components for sustainable success with the CMS Patient Driven Payment Model (PDPM).
• Present key Non-Therapy Ancillary (NTA) Components Diagnostic Criteria and SLP-Component of Presence of swallowing disorder or mechanically altered diet related to Nutrition.
• Discuss critical collaborative steps for successful integration of nutrition services into PDPM.

Let's Talk About Malnutrition
• Coalition of 80 organizations and stakeholders working to defeat older adult malnutrition
• Goal: Achieve recognition of malnutrition as a key indicator and vital sign of older adult health risk
• Work to achieve a greater focus on malnutrition screening and intervention through regulatory and/or legislative change across the nation's health care system
• http://defeatmalnutrition.today
Malnutrition Quality Improvement Initiative

Malnutrition eCQMs Align with the Malnutrition Care Workflow

Malnutrition eCQMs:
- NQF #3087: Completion of a Malnutrition Screening within 24 hours of Admission
- NQF #3088: Completion of a Nutrition Assessment for Patients identified as At-Risk for Malnutrition after a Completed Nutrition Assessment
- NQF #3089: Nutrition Care Plan for Patients identified as Malnourished after a Completed Nutrition Assessment
- NQF #3090: Appropriate Documentation of a Malnutrition Diagnosis
CMS' duty to monitor the safety of the nation's hospitals, nursing homes, and other providers, is a unique governmental task which lies at the core of government's role in health care.

This duty is especially important when it comes to the care provided for some of the most vulnerable in our society, Americans residing in nursing homes.

I have directed my team at CMS to undertake a comprehensive review of our regulations, guidelines, internal structure, and processes related to safety and quality in nursing homes. America deserves nursing homes.

Ensuring Safety and Quality in America's Nursing Homes
Seema Verma, Administrator, Centers for Medicare & Medicaid Services (4/19/19)

We have demonstrated our commitment to this path by developing a five-part plan:
1. Strengthen Oversight
2. Enhance Enforcement
3. Increase Transparency
4. Improve Quality
5. Put Patients Over Paperwork
NTA Score and Potential Revenue Loss: Malnutrition

### Quality Measures will Continue!!

**IMPACT Act's Quality Reporting Program (QRP) measures**
- Measured for FY2020
- Pressure ulcer
- Pressure ulcer history
- Application of falls
- Application of functional assessment
- Change in mobility
- Discharge self-care score
- Discharge to home
- Discharge to community
- Potentially preventable 30-day post discharge readmission

### Remember

As when RUGs were implemented, extensive regulatory clarifications, sub-regulatory guidance, information technology development, and operational changes will support PDPM.
Looking Ahead “Big Picture”
Unified Prospective Payment System for Post-Acute Care

- Congress mandated MedPAC develop a prototype design and estimate the impacts of a unified PAC PPS.
- MedPAC says:
  - Feasible to design a PAC PPS that spans the four settings
  - Uniformly base payments on patient characteristics
  - Recommend to begin to phase-in for 2018
  - Significant reform on regulations must take place to level the playing field

4 PAC Settings:
- Self Manage
- LIC
- SNF
- Inpatient Rehab Facilities

Keys to Prevention & Management of Malnutrition with PDPM

- Identify your residents (Acuity) and nutrition services using your Facility Assessment
- Have Adequate staff with Skills and Competencies
  - Hours for staff/consultants
  - RDNs/NDTRs/Food and Nutrition Services Department (Staff and Consultants)
- Remember Scope of Practice
  - Academy of Nutrition and Dietetics (Academy) for RDNs/NDTRs
  - Association of Nutrition and Foodservice Professionals (ANFP) for CDMs

Incorporate Best Practice:
- Implement Validated Nutrition Screening for Older Adults with a Scoring Matrix for Malnutrition and “At Risk” for Malnutrition
- Some potential screening tools to consider
  - Mini-nutritional assessment tool (MNA©)
  - Malnutrition Screening Tool (MST)
  - Malnutrition Universal Screening Tool (MUST)
- ADVANTAGES OF VALIDATED TOOL
  - More likely to correctly identify clients who truly need help.
  - Less likely to miss those who need intervention.
  - Reduced waste of limited resources on those who do not truly need intervention.
  - Helps demonstrate effectiveness related to positive health outcomes.
  - User Friendly
  - Not intended for completion by a specific individual/position or type.
Accurate Diagnosis and MDS Coding.

- Prompt Referral and Assessment by RDN with nutrition documentation to support the medical diagnosis.
- Academy and ASPEN Consensus Statement: Characteristics for the Identification and Documentation of Adult Malnutrition.
- Global Leadership Initiative on Malnutrition (GLIM) criteria for the diagnosis of malnutrition (complements the Academy/ASPEN Consensus Statement).

MNA Questions GLIM Criteria for Diagnosis of Malnutrition
- Decline in food intake Reduced food intake or assimilation
- Weight loss in past 3 months Weight loss
- Mobility Reduced muscle mass
- Psychological/acute disease Disease burden/inflammation
- Dementia or depression
- BMI (< 19 = 0 points) Low BMI (< 20 or < 22 if ≥ 70 years

Practice “Person-Centered” nutrition Interventions.

It takes a village

- Best practice and knowledge of reimbursement/codes
- Nursing/therapies
- MDS Team
- QAPI
- Health information/medical records
- Physician/physician extenders
- Residents/families/poa/community
- Health systems
- Others

Resources

CMS Patient Driven Payment Model (PDPM):
https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/SNFFPS/PDPM.html

Professional Healthcare Organizations: AHCA, LeadingAge, Academy of Nutrition and Dietetics, State Healthcare Organizations
Thank You and Questions

Email: Brenda@BrendaRichardson.com