

SPECIAL EDITION

Friday, September 18, 2020

News

- CMS Announces New Guidance for Safe Visitation in Nursing Homes During COVID-19 Public Health Emergency
- CMS Announces Transformative New Model of Care for Medicare Beneficiaries with Chronic Kidney Disease
- CMS Announces Innovative Payment Model to Improve Care, Lower Costs for Cancer Patients

News

CMS Announces New Guidance for Safe Visitation in Nursing Homes During COVID-19 Public Health Emergency

On September 17, CMS issued revised guidance providing detailed recommendations on ways nursing homes can safely facilitate visitation during the coronavirus disease 2019 (COVID-19) pandemic. After several months of visitor restrictions designed to slow the spread of COVID-19, CMS recognizes that physical separation from family and other loved ones has taken a significant toll on nursing home residents. In light of this, and in combination with increasingly available data to guide policy development, CMS is issuing revised guidance to help nursing homes facilitate visitation in both indoor and outdoor settings and in compassionate care situations. The guidance also outlines certain core principles and best practices to reduce the risk of COVID-19 transmission to adhere to during visitations.

See the full text of this excerpted CMS Press Release (issued September 17).

CMS Announces Transformative New Model of Care for Medicare Beneficiaries with Chronic Kidney Disease

Model focuses on reducing costs and improving quality of care for patients

On September 18, CMS announced it has finalized the End-Stage Renal Disease (ESRD) Treatment Choices (ETC) Model, to improve or maintain the quality of care and reduce Medicare expenditures for patients with chronic kidney disease. The ETC Model delivers on President Trump's Advancing Kidney Health Executive Order and encourages an increased use of home dialysis and kidney transplants to help improve the quality of life of Medicare beneficiaries with ESRD. The ETC Model will impact approximately 30 percent of kidney care providers and will be implemented on January 1, 2021 at an estimated savings of \$23 million over five and a half years.

"Over the past year, the Trump Administration has taken more action to advance American kidney health than we've seen in decades," said HHS Secretary Alex Azar. "This new payment model helps address a broken set of incentives that have prevented far too many Americans from benefiting from enjoying the better lives that could come with more convenient dialysis options or the possibility of a transplant."

For More Information:

- Full Press Release
- Fact Sheet

CMS Announces Innovative Payment Model to Improve Care, Lower Costs for Cancer Patients

Radiation Oncology Model will modernize Medicare payments for radiotherapy services

On September 18, CMS finalized a new Innovation Center model expected to improve the quality of care for cancer patients receiving radiotherapy and reduce Medicare expenditures through bundled payments that allow providers to focus on delivering high-quality treatments. The new Radiation Oncology (RO) Model allows this focus on value-based care by creating simpler, more predictable payments that incentivize cost-efficient and clinically effective treatments to improve quality and outcomes. The RO Model, part of a final rule on specialty care models issued by CMS, will begin on January 1, 2021 and is estimated to save Medicare \$230 million over 5 years.

"President Trump knows that, for cancer patients, what matters is their quality of life and beating their cancer. But today, Medicare payment for radiotherapy is based on the number of treatments a patient receives and where they receive it, which can lead to spending more time traveling for treatment with little clinical value," said CMS Administrator Seema Verma. "That's why the Trump administration has developed a new innovative model that allows patients and providers to focus on better outcomes for patients."

For More information:

- Full Press Release
- Fact Sheet
- <u>Radiation Oncology Model</u> webpage

These Models are a part of a CMS <u>final rule</u> on Medicare Program; Specialty Care Models To Improve Quality of Care and Reduce Expenditures (CMS-5527-F).

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