

PUBLIC SUBMISSION

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Docket: CMS-2019-0049

Programs of All-Inclusive Care for the Elderly (PACE) 2020 Audit Protocol (CMS-10630)

Comment On: CMS-2019-0049-0002

Agency InformationCollection Activities; Proposals, Submissions, and Approvals

Document: CMS-2019-0049-DRAFT-0002

Submitter Information

Name: Sherri Wolken

General Comment

I would like to ask CMS for clarity on the definition of a service request. Clarity in the regulation would provide a clear foundation on which to audit. For example, can a clinician act in their scope of practice to assess for and give a cane during a visit or must they delay care by waiting and bringing the request to team first? Is asking to see their PCP a service request? We recommend CMS allow the option of a face to face assessment prior to it being brought to IDT so as not to unnecessarily burden the PO to send that clinician out for a second visit. The impact analysis is unreasonably burdensome to PO. Audit teams are asking for full chart reviews of over 240 charts for a 6 month window at our organization. This taking days to complete and pulling resources away from direct patient care and operations. Could a statistically significant sample size be used to evaluate impact? I would recommend revising/decreasing review period for universes and impact analysis. Audit team has been responsive and followed up quickly with any questions we had.