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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-0005

Submitter Information

Name: Tina Stallings

General Comment

May 27, 2019

Centers for Medicare & Medicaid Services
Office of Strategic Operations and Regulatory Affairs
Division of Regulations Development
Attention: CMS-10630 (OMB control number: 0938-1327)
http://www.regulations.gov

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

I am writing on behalf of Franciscan PACE to respond to the Centers for Medicare & Medicaid Services (CMS) request for comment on the PACE 2020 Audit Protocol published in the Federal Register on March 15, 2019. We share CMS commitment to ensuring PACE participants access to high quality care consistent with PACE regulatory requirements. With this being our primary focus every day, we appreciate the opportunity to provide feedback on the proposed audit protocol, related burden estimates and supporting documentation.

Franciscan PACE has 2 centers in Louisiana, serving over 300 participants. We have served the elderly for over 10 years. I am the Manager of Quality at Franciscan PACE. We have successfully undergone numerous CMS audits.

As a member of the National PACE Association (NPA), we want to express our support for the comments submitted by NPA on the PACE 2020 Audit Protocol. We support NPAs recommendations for changes to the protocol which would significantly reduce the burden imposed by the audit on PACE organizations overall and, most importantly, on PACE organizations provider/clinical staff. The audit as currently implemented and as proposed for 2020 requires an excessive amount of time from providers who are then not available for participant care. Impact analyses can be requested of PACE organizations for weeks following the onsite portion of the audit so that demands on providers extend well beyond the two-week audit fieldwork period. We believe that NPAs recommendations accomplish the goal of reducing burden without compromising CMS ability to assess compliance with key regulatory requirements. More specifically, we agree with NPA that:

The burden estimates of 600 hours and \$41,250 provided by CMS for the PACE 2020 Audit Protocol are too low and fall short of reflecting the time and resources required of PACE organizations being audited, especially for medium and large size programs. NPAs estimates of burden, based on input from many PACE organizations, are more than double these figures. In large part, this is due to requirements for information that often is only accessible by undertaking in-depth medical record reviews involving significant numbers of providers. It is extremely important that CMS take steps to reduce the burden of the audit process which, as proposed, is excessive and will harm our PACE organizations ability to provide care to the participants we serve.

It is possible to effectively and comprehensively audit PACE organizations using a less burdensome protocol more consistent with those developed for other types of providers. At a minimum, the proposed PACE 2020 Audit Protocol should be modified to reduce burden in numerous ways consistent with recommendations offered by NPA in its comment. These recommendations include: 1) reducing the number of requests for information that can be met only by undertaking exhaustive medical record reviews; 2) clarifying expectations of PACE organizations with respect to service delivery requests and grievances; 3) raising thresholds for requiring PACE organizations to undertake Root Cause Analyses (RCAs) and Impact Analyses (IAs); and, very importantly, 4) using a sampling methodology that allows PACE organizations to initially undertake IAs for a sample, e.g., of participants, with 100% samples being required only in much more limited situations. We refer you to NPAs comment for more detail. I feel the time burden is overwhelming. Based on my experience with CMS audits, the time investment for numerous PACE staff is a burden. This burden will increase with the proposed changes with the 2020 Audit.

Thank you for considering Franciscan PACEs input and experience in assessing the impact of the PACE 2020 Audit Protocol on PACE organizations. We are hopeful that CMS will consider these and NPAs comments to revise the proposed protocol in ways that will reduce the burden experienced by PACE organizations when they are audited by CMS. If you have questions or need for follow-up, please do not hesitate to contact me at Tina Stallings, tina.stallings@fmolhs.org.

Sincerely,

Tina Stallings, RN Manager of Quality Franciscan PACE 7436 Bishop Ott Drive Baton Rouge, Louisiana 70806