

Encore Rehabilitation's monthly publication, designed to give you updates on trends we are seeing in the Post-Acute Care industry.

2022

HAPPY NEW YEAR

ENCORE IS INVITING YOU TO WALK AROUND THE WORLD!!

Encore communities, departments, and partners let's all join together to collectively walk the 24,902 miles it takes to walk around the world. We encourage individuals, teams, and residents to get out their pedometers and become involved in this adventure. Based on our calculations, we should reach our goal of Walking Around the World within a 3-month timeframe.

Imagine all of the sights we will see during our travels as we log our combined steps and learn about new travel destinations along our journey. Places such as Colorado's Rocky Mountains, California's Disney Land theme park, the Hawaiian Islands, and Tokyo, Japan.

Participation in this event is easy. All that is required is for daily steps to be tracked and submitted to the Therapy Program Manager. As our journey Around the World advances, be sure to look for the company-wide weekly results posted on social media to see where our travel adventures take us.

Fun facts! Did you know that 2,000 steps = 1 mile? Or that 10,000 steps = 5 miles? Together we will circle the world in no time.

Let's join together, put on our walking shoes, and begin this fun-filled Walk Around the World adventure!

ENCORE OFFERINGS 2022

Encore provides both its employees and customers a level of support services and initiatives which generate a foundation for excellence in our approach to care delivery and customer service offerings.



Compliance



Regulatory Updates



Impact on Business



National Speaking Engagements



Social Media



Diversity & Inclusion Focus



State Survey Preparedness



Appeals Management



Patient Safety – Risk Management



Resident Satisfaction Surveys (RSS)

2021 IN REVIEW

As 2021 comes to an end, we reflect on all of the events that have taken place throughout the year, the patients we have served, and the partnerships we have been fortunate enough to continue to strengthen. We know the COVID journey has been very difficult, and we are truly grateful for all of our and our partners' employees who continued to show up. We have forged many new paths towards maintaining Encore's mission of being the therapy service provider of choice, and the employer of preference, as the many twists and turns of navigating the pandemic and its ripple effects have unfolded.

With every twist and turn comes opportunity. Opportunity to learn, to grow, to think outside of our traditional approaches, and to look toward the future with continued optimism. At Encore, we have chosen to embrace the change, to utilize the talents of our employees to come together and create an even stronger and more forward-thinking and cohesive organization.

With gratitude, we thank all of those who have given themselves to caring for those individuals who needed exceptional care during these challenging times. Our

patients continue to rely on us to not only help them achieve their goals for physical wellness, but to also incorporate an understanding of their mental wellness into our daily treatment approaches.

As we move through the coming year Encore has many innovative and exciting projects in the works that will benefit all aspects of our organization, our partners, and those patients we serve. Encore Rehabilitation Services is ready for whatever challenges come our way, and we look forward to being the foundation of strength and leader in innovation that our employees and partners can rely on as we move into 2022 and beyond.

Sincerely,

Sean Whelan

Chief Executive Officer

Clare Coleman

President and Chief Operating Officer

PROTECTING MEDICARE AND AMERICAN FARMERS FROM SEQUESTER CUTS ACT (S. 610)

Friday, December 10th, President Biden signed the provider relief legislation entitled the *Protecting Medicare and American Farmers from Sequester Cuts Act (S. 610)* into law. The legislation addresses several payment decreases that were in the CY 2022 Physician Fee Schedule and set to go into effect on January 1, 2022. The following specific provisions are of impact to providers:

- Provides a one-year increase (through December 31, 2022) in the Medicare Physician Fee Schedule of 3.0%, which reduces the overall conversion factor cut to .75% for CY 2022.
- Provides a three-month delay of the full 2% Medicare sequestration payment reduction (January 1, 2022 – March 31, 2022) and a three-month, 1% reduction in Medicare sequester payment reduction (April 1, 2022 – June 30, 2022), followed by implementation of the full 2% reduction to take effect July 1, 2022 – December 31, 2022. As a reminder, Medicare sequestration, a 2% payment reduction, applies across-the-board to all Medicare Programs, including Part A, Part B, and Medicare Advantage plans under Part C;
- Prevents the statutory Pay-As-You-Go (PAYGO) sequestration through 2022, mitigating an additional automatic across-the-board 4% cut to the Medicare program, among other programs.

The 15% therapy assistant cut for CY 2022 was unfortunately not addressed in this provider relief legislation.

Encore will continue to work with NASL, NARA and our therapy professional organizations to advocate for the passing of Stabilizing Medicare Access to Rehabilitation and Therapy (SMART) Act (H.R. 5536) which would provide for a temporary delay to a reimbursement reduction in the CY 2022 Medicare Physician Fee Schedule. The goal of the bill is to protect beneficiary access to therapy services by mitigating the impact of the impending Medicare 15% payment differential for services furnished by physical therapist assistants (PTAs) and occupational therapy assistants (OTAs) beginning on Jan. 1, 2022. Specifically, the bill would delay the implementation date of the Medicare 15% therapy assistant differential to January 1, 2023.

MIND, BODY, AND SPIRIT

The New Year is the time to recharge and reset. We can use this time to also assess our relationships with those we have been charged to care for each day. Hippocrates indicated in “Precepts” that the healing power was in the doctor-patient relationship. During the past 25 years the approach has emerged that holds true that the clinician/healer must both address the disease and know the patient as a person.

What does this mean for those of us in our industry? We must understand the medical condition facing the patient but just as important, we must be aware of the impact that condition has on his or her life and spirit. Because of the mind/body/spirit connection the quality of that understanding can truly impact and affect medical outcomes, reminding us of the insight of Hippocrates. The human spirit sustains our will to live even when faced with serious, chronic, or terminal illness. Our job is to treat the medical condition with an attitude that inspires the patient’s spirit and will to live.

COVID-19 continues to be the bearer of fears that affect us all and cause many of us to face unparalleled difficulties. But amidst this predicament, we should remember that healthcare is a lifeforce of our civilization that allows us and the people we care for to meet and overcome whatever comes our way. The past two years have been more than challenging to our industry, but we need to remind ourselves of our purpose and that is to care for those in our charge. If we can change anything for the better, then change it, smile more, renew our excitement for our mission. We should do new, inventive things. Get rid of attitudes that harm us and our patients. Unfollow negative people on social media. Go to bed early and wake up early. Be fierce and don’t gossip. Let’s show more gratitude and do things that challenge us. Let’s be brave! Our residents deserve us to be the best version of ourselves so that we can help them have the will to overcome all the challenges that are before them.

TIPS TO AVOID RECOUPMENT

Medicare audit programs are back underway after being temporarily suspended due to the public health emergency. The audits are intended to review selected medical records in order to validate that claims are being correctly billed. After review, if the services are determined to not be medically necessary, or if errors are identified, takeback of payment will occur and the provider can be placed under further reviews.

Many of the errors identified can be easily prevented or corrected. A routine internal review process can help to ensure common issues that result in denial of payment or recoupment are addressed before records are requested. The Encore Appeals Specialist assigned to the facility is also a resource to participate in reviewing the record prior to responding to audits, to address any potential issues and reduce the possibility of recoupment.

Some common denial reasons that result in payment takebacks are:

- Missing physician signatures on facility cert/recert forms.
- No date present with the physician signature for certs, therapy evals, and orders.
- Incomplete certifications; the cert/recerts are required to include specific components that include but are not limited to:
 - o The reason for inpatient care
 - o Estimated time period that inpatient care is needed
 - o Plans for post-SNF care
- Diagnosis coding on the MDS is not supported in the record.
 - o To code an Active Diagnosis in Section I, the condition must first be present on a physician-documented record within the last 60 days.
 - o Next, it must have a direct relationship to the resident’s current function, cognition, mood/behavior, medical treatments, nursing monitoring, or risk of death during the 7-day look back period (*except for UTI with 30 day lookback).
- Missing the deadline to respond to the requests or not responding to the request for records. Late or no submission will result in funds being recouped.

With some due diligence to ensure processes are consistently followed, the burden of audit responses can be reduced and takebacks avoided! In partnership with Encore, please reach out to any member of the Appeals team with any questions or for additional resources.