



American Hospital
Association

Regulatory *Action Alert!*

Friday, January 3, 2014

NEED ACTION FROM..... *Hospital leaders, including key clinical staff*
ACTION..... *Submit a presentation and testify at
upcoming CMS advisory meeting*

WHEN..... *Submissions due Jan. 31 (electronic copy)
and Feb. 7 (hard copy); meeting is March 10-
11 in Baltimore*

WHY..... *CMS advisory panel to consider level of
supervision for individual outpatient
therapeutic services*

HOSPITALS NEED TO WEIGH-IN ON SUPERVISION POLICY FOR OUTPATIENT THERAPEUTIC SERVICES

As of Jan. 1, the Centers for Medicare & Medicaid Services (CMS) ended its prohibition on enforcing the direct supervision rules in critical access hospitals (CAHs) and small rural hospitals, so your input is more important than ever!

On March 10-11, the Advisory Panel on Hospital Outpatient Payment (HOP Panel), which advises CMS regarding the appropriate level of supervision for hospital outpatient therapeutic services, will hear testimony from hospital and health system leaders on this issue, among others.

The AHA strongly encourages hospitals interested in this issue to have their chief medical officer, chief nursing officer or other clinical staff identify specific outpatient therapeutic services that require only general supervision and request an opportunity to provide testimony before the HOP Panel.

As of Jan. 1, CMS ended the direct supervision enforcement moratorium for CAHs and small rural hospitals. This means that direct supervision requirements will be enforceable in all hospitals. However, the HOP Panel will meet in March and August. **Therefore, the March meeting will be the first opportunity in 2014 to have individual outpatient therapeutic services re-designated as “general supervision” services.**

The number and variety of services that the HOP Panel considers will directly depend on how many hospitals request to testify before the panel and the services they present for evaluation. Based on recommendations made by five hospitals that presented at the 2012 HOP Panel meetings, CMS reduced the level of supervision for 49 outpatient therapeutic services from “direct” to “general” supervision. In the outpatient prospective payment system final rule that ended the enforcement moratorium, CMS encouraged hospitals to continue to request changes in supervision levels through this process and specifically identified as candidates for consideration blood transfusion, chemotherapy, radiation therapy and wound care services.

Several examples of hospital presentations that CMS has accepted for previous HOP Panel meetings are available at: <http://www.aha.org/advocacy-issues/medicare/opps/resources.shtml>.

While the AHA continues to pursue a legislative solution, the end to the enforcement delay puts all hospitals not compliant with direct supervision at risk for significant enforcement penalties, including payment recoupment, as of Jan. 1. This is your chance to make the case for designating more services as appropriate for “general supervision.”

WHAT YOU CAN DO:

- Submit a presentation to CMS recommending general supervision for specific outpatient therapeutic services and request to testify during the March meeting.
- Refer to the notice in the [Dec. 6 Federal Register](#) for detailed instructions on CMS’s requirements. The deadline for [submitting an email copy of a presentation](#) and a completed [Form CMS – 20017](#) is **Jan. 31**; the deadline for submitting a hard copy of a presentation is **Feb. 7**. **You must submit all three documents.**
- CMS will review all requests and select who will testify at the HOP Panel meeting.
- Presenters and other individuals interested in attending the March meeting in person must [register online](#) between Jan. 20 and Feb. 21.
- Review the attached [AHA Factsheet](#) for more information.

Questions? Contact Roslyne Schulman, director of policy, at rschulman@aha.org or 202-626-2273.