

*Data & Technology:
Applications for Medicare &
Medicare PDPM Management*

November 19, 2024

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Not All State Transitions Are Created Equal

Source: CMI/Connect

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Transitioning to PDPM Medicaid
Preparing for the Unknown

- Review current Medicare PDPM performance & educate facility staff on payment drivers
- Implement tools to monitor trends & prepare for possible dual system management
- Enhance clinical assessments & interventional proficiency
- Install consistent interdisciplinary processes to identify clinical changes
- Ensure documentation is compliant with Federal and State requirements

Rate Component	Top 10% Providers	CORE Average	Bottom 10% Providers
PT / OT	\$185	\$186	\$183
SLP	\$54	\$47	\$42
Nursing	\$251	\$216	\$167
NTA	\$165	\$139	\$109
NCM	\$110	\$110	\$110
Total	\$765	\$698	\$611

Source: CORE Analytics database of claims, January 2024 to June 2024; rates displayed as an APR-1

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Introducing the "ZMI"

Neutralized Case-Mix to Account for State CMI Differences

- For Medicare Zimmet Healthcare invented the "Z-Rate" at a neutralized wage index of 1.0
- Meet the "ZMI" a new measure for neutralized CMI to account for State system differences
- Allows operators to compare performance within a portfolio from State-to-State
- Offers industry standard metric for operators in one state or an individual SNF to compare
- Implications beyond CMI management include transactions and underwriting

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Early ZMI Capture Trends

Provider Performance Varies Significantly

	Bottom Quartile	Average	Top Quartile
Neutralized "ZMI"	1.20	1.46	1.79
Extensive Services	0.0%	4.0%	12.5%
Special Care High	8.7%	27.5%	49.0%
Depression	0.1%	27.2%	58.8%
Physical Function	50.6%	33.4%	16.9%
GG Function Score "A"	41.0%	21.0%	5.0%

Source: OIR Connect & PDPM Connect

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Special Care High

Medicaid PDPM

PDPM Medicaid Avg.
27.5%

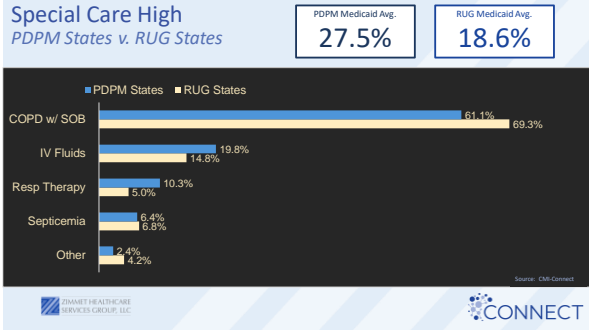
Projection at "Maturity"
48.5%

Source: OIR Connect

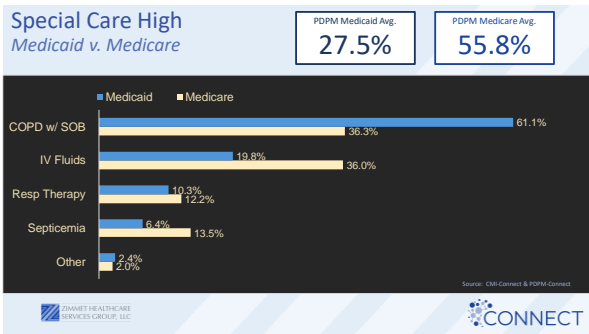
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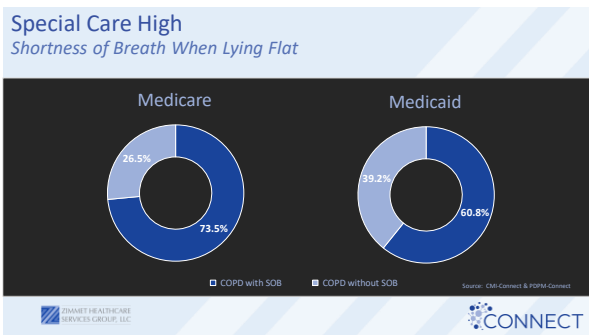
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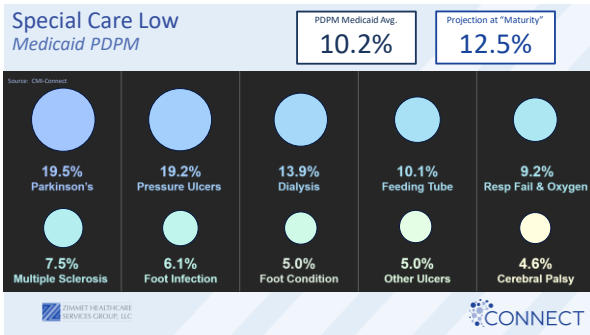
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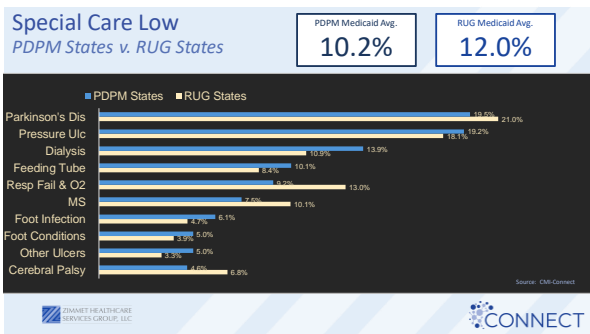
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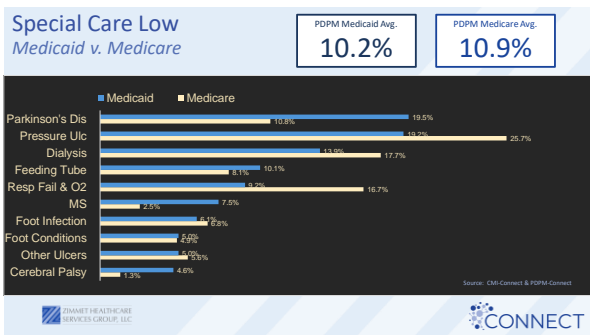
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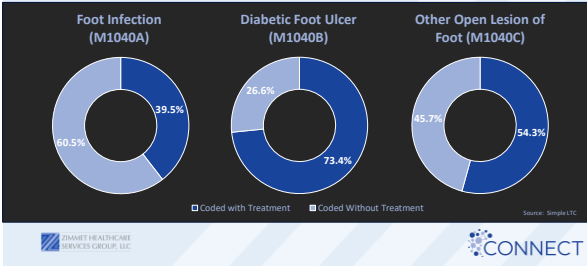


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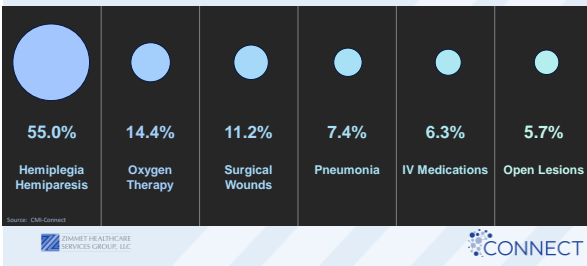
Special Care Low
Skin Issues & Treatments



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Clinically Complex
Medicaid PDPM

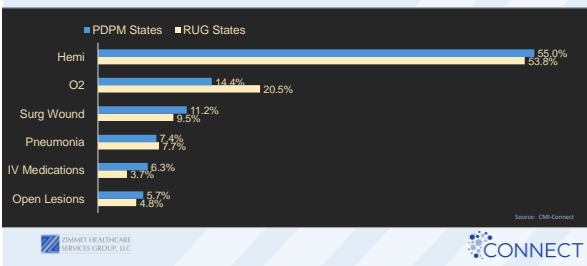
PDPM Medicaid Avg. **14.7%**
Projection at "Maturity" **10.0%**



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Clinically Complex
PDPM States v. RUG States

PDPM Medicaid Avg. **14.7%**
RUG Medicaid Avg. **16.4%**

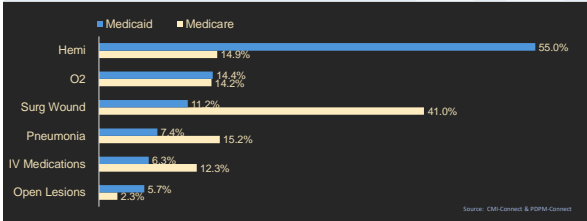


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Clinically Complex Medicaid v. Medicare

PDPM Medicaid Avg.
14.7%

PDPM Medicare Avg.
12.1%



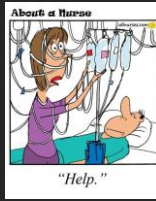
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Special Care Low / Clinically Complex Operational Concerns

- Clinical proficiency with high acuity interventions (IV medications)
- Medical team involvement with diagnosis coding certification
- Section GG assessment & coding
- Skin/wound care assessment and interventions (treatments)
- Identification of conjunctive acuities (Respiratory failure + O2)



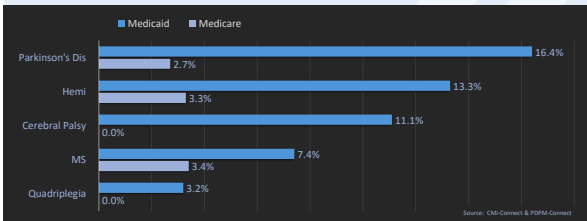
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Section GG Coding

Medicaid "Acuity Eliminator" GG Coding ≥ 12

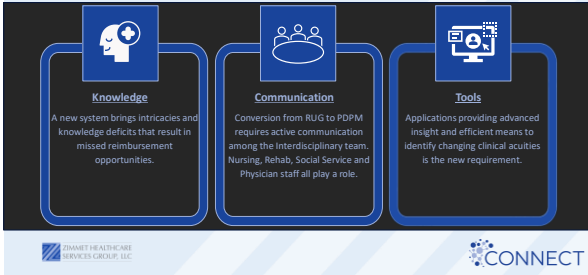


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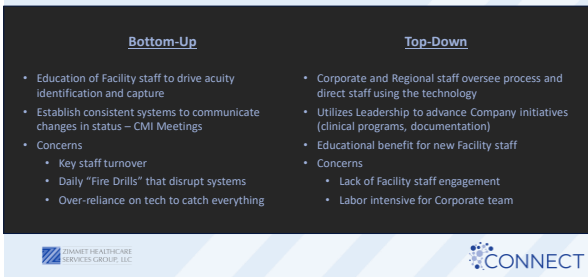
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Clinical Reimbursement Management Three Fundamental Imperatives



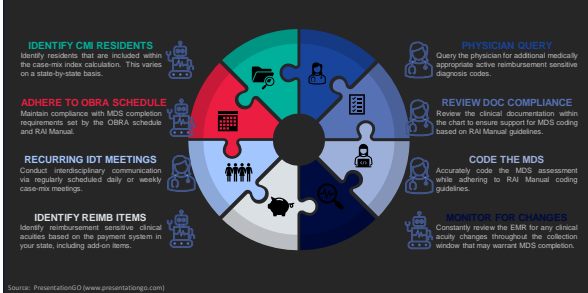
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Effective Case-Mix Management Technology Implementation



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Medicaid Step-By-Step Reimbursement Process



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Thank You!



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