



805 15th Street NW, Suite 650 | Washington, DC 20005 | (202) 466-8700
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The Critical Care News Summary is an update from the Roundtable on Critical Care Policy. For further information on the Roundtable, please visit our website at www.CriticalCareRoundtable.org.

Roundtable News

Please Save the Date!

Congressional Outreach Day

When: Wednesday, October 5, 2011
8:30a.m. – 2:30p.m.

Where: Capitol Hill
Washington, D.C.

Additional details and a formal invitation to follow shortly.

Capitol Hill Events and Updates

As we detailed on Tuesday, President Obama and Congressional leaders reached an agreement to raise the debt ceiling by \$900 billion in 2012 and reduce the deficit by at least \$2.1 trillion over the next 10 years. The budget proposal creates a 12-person bipartisan, bicameral committee tasked with finding \$1.5 trillion in future deficit reductions by November 23 — including tax reforms, discretionary spending and entitlements. A failure to adopt the committee’s recommendations would result in \$1.2 trillion in spending cuts divided equally between defense and domestic spending. The Budget Control Act of 2011 will not make immediate cuts to Medicare spending or mandatory spending programs, however, cuts to these programs remain possible in the near term. Kaiser Health News has compiled a list of FAQs on how the budget deal will affect federal health care programs. To view their guide on how the committee’s deliberations could influence Medicare and Medicaid, please click [here](#).

Federal Activity

Centers for Medicare & Medicaid Services

CMS Announces New Quality Tools and Initiatives

Today, the Centers for Medicare & Medicaid Services (CMS) announced a new tool for patients and caregivers and other enhanced initiatives intended to aid consumers in making more informed choices about their health care, and to help improve the quality of care in America’s hospitals, nursing homes, physician offices, and other health care settings.

The steps announced today include:

- A Quality Care Finder to provide consumers with one online destination to access all of Medicare's Compare tools – comparison information on hospitals, nursing homes and plans: www.Medicare.gov/QualityCareFinder.
- An updated *Hospital Compare* website, which now includes data about how well hospitals protect outpatients from surgical infections and whether hospitals care for outpatients who are treated for suspected heart attacks with proven therapies that reduce death: www.hospitalcompare.hhs.gov
- An enhanced Quality Improvement Organization (QIO) Program under which QIOs provide technical assistance and resources to health care providers across the country to assist them in changing how care is delivered in hospitals, nursing homes, physician offices, and across care settings.

A press release and fact sheets regarding this announcement are attached. More information is available about *Hospital Compare* online at www.hospitalcompare.hhs.gov and on the QIO Program on the CMS website at www.cms.gov/qualityimprovementorgs.

CMS Issues Final FY 2012 Acute Care and Long-Term Care Hospital Rule

On Monday, CMS issued its final payment and policy updates for hospitals for fiscal year 2012. The final rule will increase payment rates to general acute care hospitals under the Inpatient Prospective Payment System by 1.0 percent, compared with -0.5 percent in the proposed rule, and will increase payment rates to long-term care hospitals (LTCHs) by 2.5 percent, compared with 1.9 percent in the proposed rule. The payment increase is largely due to the adoption of a higher than originally projected market basket update.

In addition to finalizing the payment rates for hospitals, the final rule also:

- Establishes the initial readmissions measures and benchmarks for the Hospital Readmissions Reduction Program (authorized by the Affordable Care Act). These measures will cover three conditions: acute myocardial infarction (AMI), heart failure, and pneumonia.
- Adopts a new measure—Medicare spending per beneficiary—for both the Hospital Based Purchasing program and Hospital Inpatient Quality Reporting Program (IQR). The measure will assess Part A and Part B beneficiary spending that spans from three days prior to admission to 30 days after the patient is discharged. According to CMS the goal of this measure is to promote greater efficiencies across care settings.
- Establishes the first measure set for reporting under the LTCH quality reporting program.

CMS projects that the rate increase together with other policies in the final rule and projected utilization of inpatient services will increase Medicare's operating payments to acute care hospitals by \$1.13 billion, or 1.1 percent, in FY 2012 compared with FY 2011. Medicare payments to LTCHs in FY 2012 are projected to increase by \$126 million or 2.5 percent. The final rule, which will apply to approximately 3,400 acute care hospitals and 420 LTCHs, will generally be effective for discharges occurring on or after Oct. 1, 2011.

The final rule can be downloaded from the *Federal Register* [here](#). Supplemental tables and appendices may be downloaded on the CMS website [here](#). For more detailed information on the quality measures, please click [here](#).

Patient-Centered Outcomes Research Institute

The Patient-Centered Outcomes Research Institute (PCORI) is seeking public feedback on eight initial topics for a series of “Tier 1” pilot projects that will:

- assist PCORI in establishing national priorities for research,
- support the development of novel methods or the collection of preliminary data that can be used to advance the field of patient-centered outcomes research (PCOR), and
- inform the development of a future PCORI research agenda.

PCORI will issue a request for applications (RFA) for pilot project grants in late September, which will focus on methods and approaches appropriate to PCOR, including observational methodologies, systematic reviews, mixed methods and qualitative methodologies, simulations, small pragmatic pilot trials and survey methods.

PCORI is holding a 30-day input period on the eight topics that begins today and concludes on Aug. 31. Individuals and organizations are invited to provide feedback through PCORI’s website, pcori.org, or by returning a questionnaire by email or standard mail. The initial topics for the “Tier 1” pilot projects are provided on PCORI’s website along with detailed information on how to provide input, which can be found [here](#).

This opportunity is distinct from the opportunity announced on July 20, where PCORI is seeking feedback on the working definition of patient-centered outcomes research.

National Institutes of Health

The National Institute of Nursing Research (NINR), a component of the National Institutes of Health, and its partners will host The Science of Compassion: Future Directions in End-of-Life and Palliative Care. This trans-NIH summit aims to examine the current status of end-of-life and palliative care research and practice; propose strategies to address current barriers to care; and prioritize action items to stimulate research in this area. Participants include scientists, researchers, health care providers, educators, representatives from professional organizations and members of the public. The summit will begin with The Ethics of Science at the End-of-Life: A Town Hall Discussion, an evening where leading ethicists will engage with the public on critical issues facing end-of-life research and practice. A keynote presentation by Dr. Ira Byock, three plenary discussions, break-out sessions, an evening juried poster reception, and closing remarks by Dr. J. Randall Curtis will compose the remainder of the scientific program.

When: August 10-12, 2011

- Wednesday, 7 p.m. — 9 p.m.: Town hall discussion
- Thursday, 8 a.m. — 7 p.m.: Keynote address, plenary sessions, lunch presentation: "Parents & Clinicians as Partners in Research," and evening poster reception
- Friday, 8:30 a.m. — 2 p.m.: Plenary session and closing keynote remarks

Where: Hyatt Regency Bethesda, One Bethesda Metro Center, Bethesda, Md. 20814

The program is open to the public and free of charge. Registration is required and seating is limited. For additional information and registration, please click [here](#). For more information about NINR, please click [here](#).