

DEVELOPING OUTPATIENT THERAPY PAYMENT ALTERNATIVES (DOTPA): COMMUNITY-BASED PARTICIPATING PROVIDER ROLES

INVITATION: The Centers for Medicare & Medicaid Services (CMS) currently have a major initiative underway to learn more about the characteristics, treatment and outcomes of the Medicare populations using physical therapy, occupational therapy, and speech language pathology therapy services reimbursed under Medicare Part B. The goal of this research project is to refine Medicare payment methodology and to test the DOTPA assessment items, which are standardized patient assessment items for institutional settings and community-based settings. The instrument to be used in community-based settings is called the CARE-C instrument and it contains both patient self-assessment items and clinician-reported items. Your organization's participation in this initiative will ensure that the populations you treat are included in Medicare's efforts to improve and refine its case-mix measurement. Furthermore, your experience in this project will help CMS make appropriate refinements to the Medicare Part B payment systems.

As a participant, your organization will be asked to provide feedback to CMS on the standardized assessment items. Your input is critical to CMS' effort to identify a concise set of items that target the complexity of your Part B patient population. The experience of participating providers will help streamline and refine these assessment instruments.

RTI, the contractor carrying out this project, will work closely with you to develop a streamlined data collection plan based on what works best for you and your staff. Ongoing support and consultation will be provided throughout the 4-6 month project period.

GENERAL PROJECT ACTIVITIES:

- **Community-Based Setting Patient Assessments:** New Medicare Part B admissions in your practice will be assessed using the DOTPA CARE-C instrument. Data collection will occur over a period of up to 6 months or less, until a total of 150 patients are assessed. A representative therapist from each type of therapy a patient receives will complete their own provider information section. The CARE-C also includes a section intended for patient self-report. Patients will be assessed at the start and end of Medicare-covered Part B services.
- **Data Submission:** Assessment data will be primarily submitted to RTI on paper, although electronic processing is available. Assistance is available to establish these procedures as needed. Data security will be maintained at your site by storing data forms in accordance with HIPAA regulations and by following the project's mailing procedures for batches of assessment forms.

PROJECT SET-UP:

We will ask each participating setting to identify a liaison with whom we can discuss and identify the following:

- **Participating staff** in your organization to be included in the project.
- **Site Coordinators (two)** who will help with set-up of the initial webinar training and manage the day-to-day data collection activities in your organization. Additional information about the Site Coordinator team is detailed below.
- **Your organization's current operational practices** for patient assessments, other current Medicare Part B data submission practices, or other data entry practices that may be related to DOTPA data collection. We have simple, basic processes for the project and will work with each organization individually to streamline these efforts within your current operations and workflow.

ORGANIZATIONAL COMMITMENTS:

- **Site Coordinator Team:** Within each setting, a team of one administrator and one clinician will be identified to act as the administrator/clinician (A/C) team for the project. The A/C team you identify for this study will be trained by RTI and will be responsible for overseeing the data collection and submission in your setting and participating with other A/C teams in monthly coordinator calls. The DOTPA Help Desk and project website will serve as important A/C team resources.
- **In-Service Trainings** – RTI will provide live Webinar training sessions for the A/C team and participating clinicians and office staff. This interactive web-based seminar will be offered weekly and repeated as needed. The RTI training team also will assist the coordinators in setting up the in-service webinar trainings within your setting. RTI will provide all training materials.
- **Procedures Tailored to Your Site** –RTI staff will work with you to establish data collection and submission procedures that are consistent with your setting’s current workflow practices. The CARE-C tools will be kept at central locations in your offices, procedures for data collection will be established, and other helpful resources will be provided to the A/C team. The coordinators will be asked to use their familiarity with your setting to identify the most efficient procedures to be used.
- **Collect Assessments** – Collect assessments on newly admitted Medicare Part B patients during a 4- to 6-month window. The length of your participation will depend on the frequency of new Medicare admissions at your site. RTI will help you establish procedures to ensure a scientifically representative set of patients is selected.
- **Receive Ongoing Support** – RTI will continue to work with the A/C team and staff throughout the project. Our team of experienced clinicians will assist the coordinators in such activities as identifying and correcting problems in data collection and submission, as well as providing refresher CARE–C tool training throughout the project, as needed.

For further information, please contact:

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*The Centers for Medicare & Medicaid Services thank you in advance
for your interest in this exciting and ground-breaking initiative.*