

**Current State Practices Related to Payments to Providers for Health Care-Acquired Conditions (HCAC)**

**Survey (DATE)**

The Patient Protection and Affordable Care Act of 2010 (Affordable Care Act, Public Law 111-148), enacted March 23, 2010 includes provisions prohibiting Federal Financial Participation to States for payments for health care-acquired conditions (HCACs). Section 2702(a) specifically requires that the Secretary identify current State practices that prohibit payment for HCACs and incorporate those practices or elements of those practices which the Secretary deems appropriate for application to the Medicaid program.

In accordance with section 2702(a) of the Affordable Care Act, CMS is issuing this survey to States to obtain information on current State Medicaid practices for prohibiting payments for HCACs. These questions are asked and should be answered in relation to any payment policy and/or program that the State Medicaid Agency has implemented, or interpreted to have implemented, prohibiting or limiting State Medicaid payments for hospital acquired conditions (HACs), the National Quality Forum’s list of Serious Reportable events (commonly referred to as “Never Events”), HCACs, and/or critical incidents related to health care (Critical Incidents).

We are seeking information on existing State programs with the intention of incorporating effective State practices into Federal regulations regarding the prohibition of payments to States for HCACs. The survey questions are specific to HACs, HCACs, Never Events, and Critical Incidents as defined by the State. This includes provisions outlined within the Medicaid State plan or otherwise and those provisions that the State has interpreted to implement related policy without State plan provisions or amendments.

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is **0938-XXXX**. The time required to complete this information collection is estimated to average 30 minutes to an hour per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

*Note: The respondent may attach additional sheets as necessary to elaborate on essay responses.*

**Section 1 – General Information**

State:

Name of the Person Responding to this Survey:

Title:

Phone Number:

E-mail:

*Continue to Section 2*

**Section 2 – Existing State Policy**

1. Does the State have an existing policy prohibiting or limiting State Medicaid payment for HACs, HCACs, Never Events, and/or Critical Incidents as defined by the State?

Yes

No

2. Does the State have an existing policy prohibiting or limiting State Medicaid payment for Medicare crossover claims related to HACs, HCACs, Never Events, and/or Critical Incidents?

Yes

No

*If the State has answered no to both items 1 and 2 the survey is complete.*

*If the State has answered yes to either or both 1 and 2, continue to Section 3.*

**Section 3 – State Definitions**

3. How does the State define the terms:

- A. Hospital Acquired Conditions (HACs)
- B. Health Care-Acquired Conditions (HCACs)
- C. Never Events
- D. Critical Incidents

4. Does the State use any term(s) other than HACs, HCACs, Never Events, or Critical Incidents to express similar policies?

Yes

No

5. If yes, please list that term(s) and provide the State's definition of that term(s) for payment and/or reporting purposes.

6. Has the State adopted the definitions and standards of a particular organization such as Medicare, or the National Quality Forum, to set measures or qualify non-payable events?

Yes

No

7. If yes, list the organization(s), as well as the definitions and standards adopted by the State.

*Continue to Section 4*

**Section 4 – State Policy Prior to July 13, 2008**

8. Did the State have a policy prohibiting or limiting State Medicaid provider payments for HACs, HCACs, Never Events, and/or Critical Incidents prior to the issuance of the July 31, 2008 SMDL regarding HACs and Never Events?

Yes

No

9. If yes, please provide a summary describing the policy including the providers impacted, the payment adjustments required, and whether the State currently follows the policy.

10. Was the policy articulated in the State's Medicaid plan?

Yes

No

11. Is there State legislation related to this policy?

Yes

No

12. If yes, please provide the citation.

13. How does the State currently calculate rates for Medicaid inpatient hospital providers?

- A. DRG
- B. Per Diem
- C. Cost
- D. Other (please describe)

14. Did the State have to modify its existing Medicaid inpatient hospital rate structure to implement HACs, HCACs, Never Events, Critical Incidents or other similar payment policies?

Yes

No

15. If yes, please describe the modifications to the State's existing Medicaid inpatient hospital rate structure including why they were necessary.

*Continue to Section 5 if the State has an existing policy prohibiting or limiting State Medicaid payments for Medicare cross over claims related to HACs, HCACs, Never Events, and/or Critical Incidents.*

**Section 5 – State Payment Policy for Medicare Crossover Claims**

16. Does the State currently prohibit or limit State Medicaid inpatient hospital payments for Medicare crossover claims related to HACs, HCACs, Never Events, and/or Critical Incidents?

Yes

No

17. If yes, please detail the methodology of the payment process for this policy including information on how the State adjusts payments to providers, what triggers a payment adjustment, and how the State determines the adjustment amount.

18. If yes to 16, is this policy articulated in the State's Medicaid plan?

Yes

No

19. If yes to 16, is there State legislation related to this policy?

Yes

No

20. If yes to 19, please provide the citation.

21. What data sources are used to determine claims for non-payment or reduced payment?

22. Did the State have to acquire new or additional resources to implement this policy?

Yes

No

23. If yes, please describe the resources and how where they utilized.

24. Please describe how the State identifies Medicare cross over claims that result from Medicare's HAC payment adjustment policy.

25. Please describe any barriers the State has faced in implementing this policy?

26. What other options did the State consider prior to implementing its current policy?

27. Why did the State forego those options?

*Continue to Section 6 if the State has an existing policy prohibiting or limiting State Medicaid payments HACs, HCACs, Never Events, and/or Critical Incidents.*

**Section 6 – State Medicaid Payment Policy**

28. Does the State currently prohibit or limit State Medicaid inpatient hospital payments related to HACs, HCACs, Never Events, and/or Critical Incidents?

Yes

No

29. If yes, please detail the methodology of the payment process for this policy including information on how the State adjusts payments to providers, what triggers a payment adjustment, and how the State determines the adjustment amount.

30. If yes to 28, is the policy articulated in the State's Medicaid plan?

Yes

No

31. If yes to 28, is there State legislation related to this policy?

Yes

No

32. If yes to 31, please provide the citation.

33. What data sources are used to determine claims for non-payment or reduced payment?

34. Did the State have to acquire new or additional resources to implement this policy?

Yes

No

35. If yes, please describe the resources and how where they utilized.

36. What barriers has the State faced in implementing this policy?

37. What other options did the State consider prior to implementing its current policy?

38. Why did the State forego those options?

*Continue to Section 7*

### **Section 7 – Access and Reporting**

39. Has there been a demonstrated impact on beneficiary access to inpatient hospital care related to State prohibited or limited payment of HACs, HCACs, Never Events and /or Critical Incidents?

Yes

No

40. If yes, please provide detailed information on how the State determined the policy's impact on access.

41. Has the State taken measures to limit adverse impacts on beneficiary access to inpatient hospital care related to State prohibited or limited payment of HACs, HCACs, Never Events and /or Critical Incidents?

Yes

No

42. If so, please describe actions taken by the State to limit adverse impacts on beneficiary access.

43. Does the State require that providers report occurrences of HACs, HCACs, Never Events and /or Critical Incidents?

Yes

No

44. If yes, please provide a summary of the State's requirements to include the method and frequency of reporting, as well as any penalties for not reporting.

45. Does the State publish HACs, HCACs, Never Events and /or Critical Incidents reported to the State?

Yes

No

46. Does the State require that providers publish HACs, HCACs, Never Events and /or Critical Incidents?

Yes

No

47. Has the State implemented a universal reporting system for reportable events?

Yes

No

48. Please cite all State statutes and regulations which require reporting of HACs, HCACs, Never Events, or Critical Incidents relating to health care.

49. Has the State taken other measures to improved quality care and limit HACs, HCACs, Never Events, and/or Critical Incidents?

Yes

No

50. If yes, please describe the measures the State has taken.

*Continue to Section 8*

**Section 8 – Other Providers**

51. Has the State applied HACs, HCACs, Never Events, and/or Critical Incidents policies to providers providing services other than inpatient hospital services?

Yes

No

52. If yes, please provide a detailed summary of the HACs, HCACs, Never Events, and/or Critical Incidents policies the State has applied to providers providing services other than inpatient hospital services.

53. Please provide any additional information about the State's HACs, HCACs, Never Events, and/or Critical Incidents payment policies that is applicable.