

# FORHP Policy Updates – August 10, 2016

- Proposed Rule: Hospital and Critical Access Hospital Changes to Promote Innovation, Flexibility, and Improvement in Patient Care
  - Requirements include:
    - Maintaining a data-driven quality assessment and performance improvement (QAPI) program;
    - Written non-discrimination policies;
    - Regularly evaluating the care provided by practitioners at the CAH;
    - Maintaining active infection prevention, infection control, and antibiotic stewardship programs.
  - Recognition of [Medicare Beneficiary Quality Improvement Project \(MBQIP\)](#) as a national quality measurement and reporting program.
    - The proposed rules would require CAHs to collect data to measure the quality of care they provide and CAH participation in MBQIP is one way for CAHs to meet this data collection requirement.
- **Comments are due by August 15**



# FORHP Policy Updates – Continued

- **Bundled Payments for Cardiac Care and Hip Fractures:**
  - For the new cardiac bundles, hospitals in 98 randomly-selected metropolitan statistical areas would be required to participate
  - Rural counties are excluded from the models
  - CAHs can be episode payment model collaborators in providing post discharge care
  - CMS proposes that the first performance period would run from July 1, 2017 to December 31, 2017.
  - **Comments are due by October 3, 2016**
- **New FORHP Policy Email:** If you have any questions related to policy updates, please contact us at [RuralPolicy@hrsa.gov](mailto:RuralPolicy@hrsa.gov).

