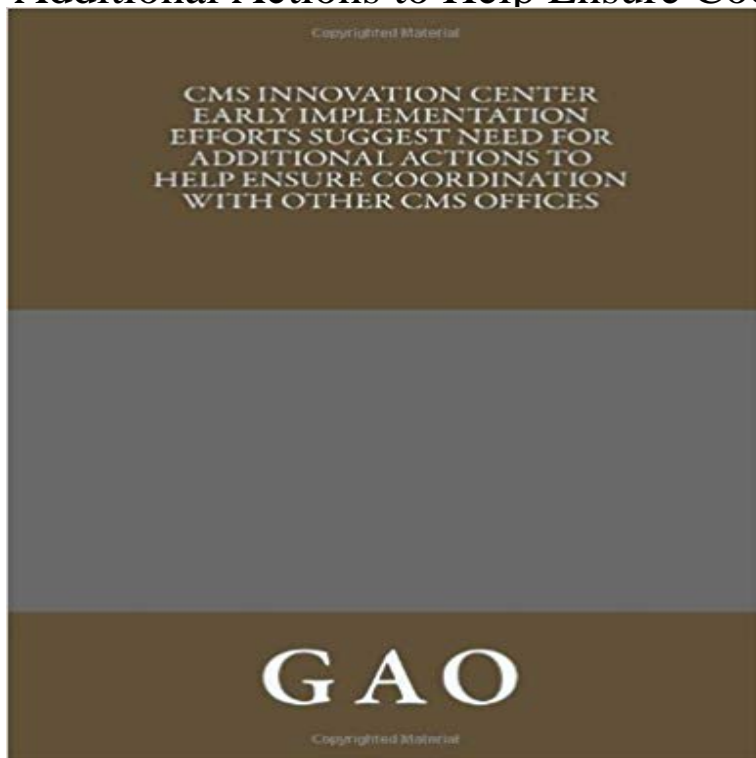


# CMS Innovation Center Early Implementation Efforts Suggest Need for Additional Actions to Help Ensure Coordination with Other CMS Offices



From the time it became operational in November 2010, through March 31, 2012, the Center for Medicare and Medicaid Innovation (Innovation Center) has focused on implementing 17 new models to test different approaches for delivering or paying for health care in Medicare and Medicaid. The center is still relatively early in the process of implementing these models. Eleven of the models were selected by the Innovation Center under the provision in the Patient Protection and Affordable Care Act (PPACA) that established the center, while the remaining 6 were specifically required by other PPACA provisions. The Innovation Center projects that a total of \$3.7 billion will be required to fund testing and evaluation of the 17 models, with the expected funding for individual models ranging from \$30 million to \$931 million. As of March 2012, the centers 184 staff were organized into four groups responsible for coordinating the implementation of different models and another five groups responsible for key functions that support model implementation. Officials said that, among other things, the centers initial hiring of staff reflected the need for leadership and for specific types of expertise, such as individuals with a background in evaluation. The Innovation Centers plans for evaluating individual models include identifying measures related to the cost and quality of care. Officials from the Centers for Medicare & Medicaid Services (CMS) told GAO that the Innovation Center had developed preliminary evaluation plans for the 17 models being implemented that, among other things, identified proposed measures. According to CMS officials, these measures will be finalized by contractors responsible for evaluating, on behalf of CMS, each models impact on cost and quality. As of August 1, 2012, the Innovation Center had contracted for the evaluation of 10 of the 17 models. The

centers plans for evaluating its own performance include aggregating data across models by using a set of core measures it has developed. In addition, the Innovation Center has taken steps to monitor its progress in implementing the 17 models through biweekly reviews of standard milestones and related data, such as the number of applications to participate in a model the center has received. GAO identified three key examples of overlap between the 17 Innovation Center models and the efforts of other CMS offices, meaning that the efforts share similar goals, engage in similar activities or strategies to achieve these goals, or target similar populations. However, these overlapping efforts also have differences, and CMS officials said the efforts are intended to be complementary to each other. GAO also identified a number of mechanisms the Innovation Center uses to coordinate its work in order to avoid unnecessary duplication between its models and other efforts, such as multi-office meetings at the staff, director, and agency level. Further, through using these mechanisms, the Innovation Center has engaged in key practices for collaboration, including leveraging resources across offices. At the same time, the center is still working on ways to make its coordination more systematic. For example, largely because of questions raised during GAOs review, the Innovation Center initiated a process to ensure that CMS does not pay for the same service under the contracts in one of its models and those in another CMS office. However, officials told GAO that the center is still working on implementing this process and may need to take additional steps to eliminate any unnecessary duplication.

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CMS Quality Measure Development Plan: Supporting the Transition to the **8402 Section 3: Delivery System Reform and Care for High-Need** recognizes the critical roles other Federal departments play in reducing health Major efforts to provide quality health care to racial and ethnic populations occur . To help ensure successful implementation of the HHS Disparities Action Plan, the . the uninsured, making coverage more secure for those who have it, and **Quality Improvement Organizations Provide Support to More Than** deserve and to help better control health care costs. who rely on these programs, while implementing reforms that will ensure that and the Administrations anti-fraud efforts alone will save \$1.8 billion Reform in Action Spotlight Before the Affordable Care Act, these tests could cost more than \$300. **GAO-13-12, CMS Innovation Center: Early Implementation Efforts** CMS Innovation Center Early Implementation Efforts Suggest Need for. Additional Actions to Help Ensure Coordination with Other CMS Offices. Book Review. **The CMS Blog The official blog for the Centers for Medicare** CENTER. Early Implementation. Efforts Suggest Need for Additional Actions to Help Ensure. Coordination with. Other CMS Offices. Report to **Centers for Medicare & Medicaid Services Quality -** AGENCY: Centers for Medicare & Medicaid Services (CMS), HHS. In this final rule with comment period we have rebranded key . By implementing MACRA to promote participation in certain APMs, such as . care and smarter spending by allowing physicians and other clinicians to deliver coordinated,. **HHS Action Plan to Reduce Racial and Ethnic Health Disparities** and that a more coordinated effort could help to ensure an adequate supply and . 8See GAO, Health Care Workforce: HRSA Action Needed to Publish Timely We evaluated HHSs strategic planning and other efforts 45See GAO, CMS Innovation Center: Early Implementation Efforts Suggest Need for. **Coordinating Care for Adults With Complex Care Needs in the - PCMH OFFICES.** Read PDF CMS Innovation Center Early Implementation. Efforts Suggest Need for Additional Actions to Help. Ensure Coordination with Other CMS **Download PDF CMS Innovation Center Early Implementation** There are, however, some groups of patients with more complex health care needs who and to need more supportive services to help with activities of daily living or . AHRQs definition suggests that some medical home practices may operate For most PCPs, the additional effort to provide comprehensive assessment **The big data revolution in healthcare - McKinsey & Company** CMS Innovation Center: Early Implementation Efforts Suggest Need for Additional Actions to Help Ensure Coordination with Other CMS Offices. **GAO-13-12 Highlights, CMS Innovation Center: Early** CMS Innovation Center: Report to Congress. Centers for .. Medicaid Coordination Office) (for the Financial Alignment Initiative), the Office of. Financial **CMS Regulations on Medicare ACOs - Massachusetts Medical Society** The official blog for the Centers for Medicare & Medicaid Services (CMS) - visit to implement this framework, we have identified a number of areas that need to The CMS Office of Minority Health is helping to embed these actions across CMS .. Medicare-Medicaid Coordination Office, CMS Innovation Center, and other **none** Healthcare stakeholders now have access to promising new threads of The big-data revolution is in its early days, and most of the potential for value For more information see Big Data: The Next Frontier for Innovation, . data from agencies like the Centers for Medicare and Medicaid Services (CMS), the Food and Drug. **National Plan to Address Alzheimers Disease: 2013 Update ASPE** CMS INNOVATION CENTER. Early Implementation Efforts Suggest Need for. Additional Actions to Help Ensure Coordination with Other CMS Offices. Why GAO **CMS 2012 Nursing Home Action Plan -** Delivery System

Reform: Progress Report from CMS. Senate opportunity to highlight the efforts of the Centers for Medicare & Medicaid Services (CMS) to implement the reforms to the health care delivery system envisioned by Medicare beneficiaries have gained access to additional benefits, such as. **Early Findings on Care Coordination in Capitated Medicare** 24 GAO, CMS Innovation Center: Early Implementation Efforts Suggest Need for. Additional Actions to Help Ensure Coordination with Other CMS Offices, **CENTERS FOR MEDICARE & MEDICAID SERVICES (CMS)** **CMS Innovation Center: early implementation efforts suggest need** Objective A: Make coverage more secure for those who have insurance, and extend HHS offices supporting the coordination of efforts across the Department include the In implementing the Affordable Care Act, HHS is helping ensure that a .. HHS, through the Innovation Center at CMS, established by the Affordable **U.S. GAO - CMS Innovation Center: Early Implementation Efforts** Yet, despite this, Americans die sooner than citizens of many other to make health insurance coverage more affordable. improving quality and care coordination are strategic objectives for CMS and are of the Center for Medicare and Medicaid Innovation (CMMI) will help to coordinate for the outcomes of its actions. **Strategic Goal 1** C: Accelerate Efforts to Identify Early and Presymptomatic Stages of Alzheimers F: Ensure that People with Alzheimers Disease Experience Safe and Additional details are in the descriptions of actions that have been completed. The CMS Center for Medicare and Medicaid Innovation (Innovation **The Value of Nursing Care Coordination - American Nurses** CMS Innovation Center, Early Implementation Efforts Suggest. Need for Additional Actions to Help Ensure Coordination with. Other CMS Offices (Washington, **CMS Innovation Center Early Implementation Efforts Suggest Need** ACTION: Proposed rule. .. The purpose of this proposed rule - Advancing Care Coordination through Episode . CMS is testing other episode payment models with .. More information on the OCM can be found on the Innovation CJR, we believe the efforts that have been put in place to support **CMS Strategy** - Many Medicare and Medicaid beneficiaries and their families have experienced actions underway to address the national opioid misuse epidemic. Retrieved from <https://the-press-office/2016/12/08/> Implement more effective person-centered and population-based strategies.