

## TACPAC Task Force Proposed Meeting Calendar

Meeting	Setting	Topic	Focus / Charges
<b>#1</b> January 15	-	-	-
<b>#2</b> February 5	Hospital	Hospital Discharge Planning and Case Management Processes	<b>Complexities of hospital discharge planning and the barriers hospitals face:</b> <ol style="list-style-type: none"> <li>1. Hospital discharge planning and case management practices (<i>Section 25(a)i</i>)</li> <li>2. Payer administrative barriers to discharge (ii)</li> <li>3. Legal and regulatory barriers to discharge (iii)</li> </ol>
<b>#3</b> February 26	Hospital	Hospital Discharge/Case Management Payment Structures	<b>Hospitals' rates and reimbursement, and the financial barriers hospitals face:</b> <ol style="list-style-type: none"> <li>1. Efforts to increase public awareness of health care proxies and the importance of designating a health care agent (iv)</li> <li>2. Administrative day rates and the cost to hospitals of discharge delays (vi)</li> <li>3. Enhanced hospital case management practices and reimbursement for wraparound services (vii)</li> </ol>
<b>#4</b> March 19	Post-Acute Facilities	Post-Acute Placement Processes and Barriers	<b>Placement in and the capacity of post-acute settings:</b> <ol style="list-style-type: none"> <li>1. Post-acute care capacity constraints and additional opportunities to provide financial incentives to increase capacity (v)</li> <li>2. Adequacy of post-acute care facility insurance networks and the establishment of an out-of-network rate for post-acute care facilities (viii)</li> <li>3. Adequacy of state resources and infrastructure to place complex case discharges in appropriate post-acute care settings, including, but not limited to, patients with dementia diagnoses, geriatric patients with psychiatric diagnoses, patients with behavioral health diagnoses, patients with substance use disorder diagnoses, justice-involved patients and patients who have been unable to find an</li> </ol>

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			<p>appropriate placement for post-acute care for 6 months or longer (xiv)</p> <p>4. Effectiveness of interagency coordination to resolve complex case discharges (x)</p>
<b>#5</b> April 16	Post-Acute Facilities	Post-acute Facilities Payment Structures	<p><b>Post-acute facilities' and community services' rates and reimbursement, and the financial barriers they face.</b></p> <ol style="list-style-type: none"> <li>1. Post-acute care capacity constraints and additional opportunities to provide financial incentives to increase capacity (v)</li> <li>2. Adequacy of post-acute care facility insurance networks and the establishment of an out-of-network rate for post-acute care facilities (viii)</li> <li>3. Expanding MassHealth Limited coverage to include post-acute and long-term care services (ix)</li> <li>4. Adequacy of state resources and infrastructure to place complex case discharges in appropriate post-acute care settings, including, but not limited to, patients with dementia diagnoses, geriatric patients with psychiatric diagnoses, patients with behavioral health diagnoses, patients with substance use disorder diagnoses, justice-involved patients and patients who have been unable to find an appropriate placement for post-acute care for 6 months or longer (xiv)</li> </ol>
<b>#6</b> April 30	Post-Acute Community Settings	Community-based Services/ Supports, including LTSS, and Public Education	<p><b>Community services available to support individuals post-acute discharge, and the barriers faced</b></p> <ol style="list-style-type: none"> <li>1. Enhanced hospital case management practices and reimbursement for wraparound services (vii)</li> <li>2. Expanding MassHealth Limited coverage to include post-acute and long-term care services (ix)</li> </ol>
<b>#7</b> May 21	Post-Acute Community Settings	Community Services	<p><b>Understanding community-based services, with recommendations for improving outcomes</b></p>

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		Payment Structures	<ol style="list-style-type: none"> <li>1. Adequacy of reimbursement rates of MassHealth and commercial carriers for nonemergency medical transportation (xi)</li> <li>2. Opportunities to expand coverage and reimbursement for services delivered by mobile integrated health programs certified by the department of public health and by participating providers in the federal Centers for Medicare and Medicaid Services acute hospital care at home program (xii)</li> </ol>
<b>#8</b> June 18	-	-	<b>Report writing</b>
<b>#9</b> July 9	-	-	<b>Report writing</b>
<b>July 31</b>	<b><i>Submission of Report to the Legislature</i></b>		