



FOR PROVIDERS.
BY PROVIDERS.

DISTINCTION IN CLINICAL RESPIRATORY PATIENT MANAGEMENT (CRPM)

OVERVIEW

- Topics

- What is a Distinction
- About ACHC Clinical Respiratory Patient Management Distinction
- Requirements
- Q&A

- Panelists

- Cindy Roberts, RRT, RPFT, RCP - Senior Corporate Surveyor
- Tim Safley, MBA, RCP, RRT – ACHC Program Director
- Kris Ravotti, RRT, RCP – Clinical Compliance Educator

WHAT IS A DISTINCTION?

- Definition
 - “Excellence that sets someone or something apart from others”
- Accreditation Distinction
 - Accreditation distinction offers healthcare organizations an additional way to set their business apart through measurable, evidence-based best practices.
 - Allows healthcare organizations to demonstrate their ability to meet standard requirements that exceed industry expectations in the specified field.
 - Earning a distinction differentiates an organization from other healthcare providers
 - It represents written assurance by a third party of the conformity of a process or service to specified requirements.

DISTINCTION IN CRPM

- What is the Distinction in CRPM?
 - The provision of managed care to patients with acute or chronic respiratory conditions
 - Services focus on care by licensed Respiratory Care Practitioners (RCPs) or other qualified healthcare professionals that can be monitored and managed outside a hospital environment.
 - The goal:
 - Better clinical outcomes that reduce hospital readmissions, support activities of daily living, and enhance quality of life for the patient.

DISTINCTION IN CRPM

- Why was the Distinction in CRPM developed?
 - Evolving climate for care of the respiratory patient in the home environment
 - Recognition of Respiratory Care during the Pandemic
 - Care/service “accountability”
 - Impact of care/service on patient outcomes
 - Cost justification
 - Recognition of a collaborative approach to patient care in the home
 - Realization of increasing number of providers who are committed to improving outcomes for their respiratory patients and looking for recognition of the role they play in improving those outcomes

CREATING A NETWORK OF PROVIDERS



ARTICLE IN HME NEWS

- Seeing & treating the whole patient
 - The launch of the chronic respiratory program grew out of a pilot program that reduced readmission rates from 24% to 9% over a 12-month period for 50 patients who were identified as “high utilizers.”
 - The success of that pilot program led to grant funding from the state to expand and to develop a population health division as well as to create a network of partners to ensure patients have access to the resources they need to successfully transition back home.
- <https://www.homecaremag.com/august-2020/building-respiratory-network-better-outcomes>

DISTINCTION IN CRPM

- Why should providers consider adding the Distinction in CRPM?
 - The ACHC Distinction in CRPM is the first in the DMEPOS industry to offer recognition for this area of specialty care
 - It demonstrates a provider's commitment to delivering consistent, quality care and enhancing patient outcomes – “over and above” service/care
 - Improved outcomes can lead to reduced hospital readmissions, and lower costs for providers, patients, and payors.
 - Allows home/durable medical equipment (HME) organizations to offer hospitals and other healthcare facilities a validated, quality service that documents care and helps keep patients in the home.
 - It can strengthen trust and confidence in an organization, setting the business apart from competitors, leading to additional referrals.

DISTINCTION IN CRPM

- How is CRPM different from current CRCS Accreditation?
 - Standards focus on
 - Identifying unique needs of each patient
 - Developing individualized plans of care
 - Goals and outcome monitoring
 - Emphasis on patient outcomes
 - Diagnosis driven education
 - Creating a collaborative approach with the healthcare community of patient providers
 - Ensure patients have access to the resources they need to successfully transition back home

DISTINCTION IN CRPM

- What must I do over and above my CRCS accreditation?
 - Develop additional P&P's
 - Advanced directives
 - Education of CRPM staff
 - Update requirements for CRPM patient records
 - Update evaluations and/or assessment
 - Update plan of care requirements
 - Update transfer or discharge requirements
 - Update cleaning/maintenance requirements for patient assessment and diagnostic equipment
 - CRPM patient education
 - Add additional PI indicators and monitoring processes
 - Outcome based
 - Infections
 - Readmissions

DISTINCTION IN CRPM

- What else must I do over and above my current CRCS accreditation?
 - Additional Requirements:
 - W-2 Respiratory Care Practitioner or qualified healthcare professional
 - Storage and access to advance directives
 - Review of plan of care at least every 60 days
 - Review of medications at each visit
 - Monitoring readmissions
 - Tracking infections

DISTINCTION IN CRPM

- How do I add this distinction?
 - Must currently be accredited by ACHC for HME services
 - If a new provider; apply for HME and CRPM
 - Notify Account Advisor of interest
 - Develop P&P's and infrastructure/operations support to meet distinction standards
 - Undergo additional 1/2 day survey
 - Since distinction is not CMS required, it can be a scheduled survey
 - If adding at time of HME survey, will need to be unannounced



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QUESTIONS?