APPENDIX

BUNDLED PAYMENTS FOR CARE IMPROVEMENT INITIATIVE

KEY FEATURES OF BUNDLED PAYMENT MODELS COMPARED

	MODEL 2 –				
MODEL		Inpatient Stay plus	MODEL 3 -		
	MODEL 1 –	Post-discharge	Post-discharge	MODEL 4 –	
FEATURE	Inpatient Stay Only	Services	Services Only	Inpatient Stay Only	
Eligible Awardees	 Physician group practices Acute care hospitals paid under the IPPS Health systems Physician-hospital organizations Conveners of participating health care providers 	 Physician group practices Acute care hospitals paid under the IPPS Health systems Physician-hospital organizations Post-acute providers Conveners of participating health care providers 	 Physician group practices Acute care hospitals paid under the IPPS Health systems Long-term care hospitals Inpatient rehabilitation facilities Skilled nursing facilities Home health agency Physician-hospital organizations Conveners of participating health care providers 	 Physician group practices Acute care hospitals paid under the IPPS Health systems Physician-hospital organizations Conveners of participating health care providers 	
Payment of	Discounted IPPS	Retrospective	Retrospective	Prospectively set	
Bundle and	payment; no separate	comparison of target	comparison of target	payment	
Target Price	target price	price and actual FFS	price and actual FFS		
Clinical	All MS-DRGs	Applicants to propose	Applicants to propose	Applicants to propose	
Conditions	All WO-DRGS	based on MS-DRG for	based on MS-DRG for	based on MS-DRG for	
Targeted		inpatient hospital stay	inpatient hospital stay	inpatient hospital stay	
Types of	Inpatient hospital	 Inpatient hospital and 	Post-acute care	 Inpatient hospital and 	
Services	services	physician services	services	physician services	
Included in		 Related post-acute 	Related	Related	
Bundle		care services	readmissions	readmissions	
		 Related readmissions 	 Other services defined in the bundle 		
		Other services	defined in the bundle		
		defined in the bundle			
Expected	To be proposed by	To be proposed by	To be proposed by	To be proposed by	
Discount	applicant; CMS	applicant; CMS	applicant	applicant; subject to	
Provided to	requires minimum	requires minimum		minimum discount of	
Medicare	discounts increasing	discount of 3% for 30-		3%; larger discount	
	from 0% in first 6 mos. to 2% in Year 3	89 days post- discharge episode;		for MS-DRGs in ACE Demonstration	
	10 2 /0 III 1 Edi 3	2% for 90 days or		וטווסוומנוטוו	
		longer episode			
Payment from	Acute care hospital:	Traditional fee-for-	Traditional fee-for-	Prospectively	
CMS to	IPPS payment less	service payment to all	service payment to all	established bundled	
Providers	pre-determined	providers and	providers and	payment to admitting	
	discount	suppliers, subject to	suppliers, subject to	hospital; hospitals	
	Physician: Traditional	reconciliation with predetermined target	reconciliation with predetermined target	distribute payments from bundled	
	fee schedule	price price	price price	payment	
	payment (not included in episode	Piloe	Piloe	paymont	
	incidued in episode	l	1		

	or subject to discount)	
Quality Measures	All Hospital IQR measures and additional measures to be proposed by applicants	To be proposed by applicants, but CMS will ultimately establish a standardized set of measures that will be aligned to the greatest extent possible with measures in other CMS programs

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