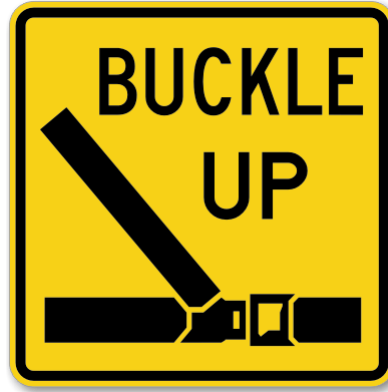


CMS 2025 OPPS Final Rule Overview

11/11/24



Hospital & CAH Condition of Participation Updates

2025 OPPS Final Rule

Health and Safety Standards for Obstetrical Services in Hospitals and Critical Access Hospitals

- New Condition of Participations (CoPs) establishing baseline standards for obstetrical services
- Update to Quality Assessment Performance Improvement (QAPI) CoPs to include OB-related activities
- Update to emergency services CoPs to include protocols, provisions, & training
- Update to hospital discharge planning CoP to include transfer protocols
- All requirements apply to hospitals/CAHs providing OB services outside emergency department
 - The only requirement that applies to **NON-Birthing Hospitals** is the update to emergency services CoPs

Update to Emergency Services CoPs Effective 07/01/2025

- Maintain protocols consistent with Complexity and Scope of services offered and aligned with Nationally recognized evidence-based guidelines for care of patients with emergency conditions.
 - Including, but not limited to, OB emergencies, complications, and immediate post-delivery care
 - Facility must “be able to articulate their standards and sources and to demonstrate that their standards are based on evidence and nationally recognized sources”

Update to Emergency Services CoPs Effective 7/1/25

- Maintain adequate provisions readily available to treat emergencies
 - Including equipment, supplies, drugs, blood & blood products, and biologicals commonly used in life-saving procedures
 - Call-in system for each patient in each emergency services treatment area (clarifications in future sub-regulatory guidance)

Update to Emergency Services CoPs Effective 7/1/25

- Train applicable staff annually on protocols and provisions
 - Governing body must identify and document staff to be trained
 - Must be informed by QAPI program findings
 - Must document successful completion of training in staff personnel records
 - Must be able to demonstrate staff knowledge on training topics

Update to Hospital Discharge Planning CoP (07/01/2025)

- Maintain written Policies & Procedures for transferring patients (not just OB patients) to appropriate level of care promptly and without delay to meet specific patient's needs
- Including transfers from ED to inpatient admission, transfers between inpatient units within hospital, and inpatient transfers to different hospital

New CoPs - Obstetrical Services

Organization and staffing (01/01/2026)

- OB services must be integrated with other departments
- OB facilities must be supervised by experienced MD/DO, NPP, or RN
 - CMS did not provide a definition for “experienced”
- OB privileges must be delineated for all practitioners based on competencies

New CoPs - Obstetrical Services

Delivery of services (01/01/2026)

- Provisions and protocols for OB emergencies, complications, post-delivery care, other health/safety events consistent with nationally recognized and evidence-based guidelines
- At a minimum, call-in system (call-light), cardiac monitor, and fetal doppler or monitor must be readily available (vs. present in every room)
 - Crash cart, hemorrhage carts, etc. will suffice.
 - CMS did not define readily available

New CoPs - Obstetrical Services

Staff training (01/01/2027)

- Governing body must identify and document which staff must complete initial and **biannual** training on evidence-based best practices/protocols and QAPI program-identified needs
- Governing body may delegate task but retains responsibility
 - Each facility will need to take request for delegation to their boards to get this back to a front-line leader level
- Initial training as part of new staff orientation
- Hospital/CAH must “be able to articulate their standards and the source(s) to demonstrate that their staff training requirements are based on evidence-based best practices.”
- Use findings from QAPI program to inform staff training needs
- Hospital/CAH must document successful completion of training in staff personnel records
- Hospital/CAH must be able to demonstrate staff knowledge on training topics

Update to QAPI CoPs (01/01/2027)

- OB leadership must engage in QAPI to assess and improve health outcomes & disparities among OB patients
- Analyze data and quality indicators by diverse subpopulations among OB patients
- Measure, analyze, and track health equity data, measures, and quality indicators on patient outcomes and disparities in processes of care, services and operations, and outcomes among OB patients
- Analyze and prioritize identified outcomes and disparities, develop and implement actions to improve outcomes and disparities, and track performance to ensure improvements are sustained
- Actively performing at least one measurable OB-focused PI project each year (can utilize the same project year over year if still aligns with QAPI findings).
- Include process for incorporating state/local Maternal Mortality Review Committee data and recommendations into QAPI program
 - CMS to publish sub-regulatory guidance on how surveyors will assess compliance

Health and Safety Standards for Obstetrical Services in Hospitals and Critical Access Hospitals

- July 1, 2025
 - Emergency services readiness
 - Hospital transfer protocols
- January 1, 2026
 - Baseline standards for OB services (except OB staff training requirements)
- January 1, 2027
 - OB staff training requirements
 - QAPI program for OB services



Questions

Thank you!

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