

**OHIO HEALTH CARE ASSOCIATION
SKILLED NURSING FACILITY BILLING COMMITTEE
MEETING MINUTES**

March 18, 2025, 11:00 a.m.

Chair Pam Skrzynski opened the OHCA Skilled Nursing Facility Billing Committee meeting, pointing to the meeting minutes and OHCA Antitrust, Conflict of Interest, and Confidentiality policies emailed earlier in the day. Chair Skrzynski requested that attendees who called in email Erin Hart for attendance purposes. Attendance for this meeting can be found at the bottom of this document.

Erin Hart opened the meeting discussing the recent webinar with CGS Administrators on NOMNCs effective January 1, 2025. She noted that many attendees were not satisfied with the information provided. She shared that she had reached out to Livanta, the BFCC-QIO, to provide direct answers to the questions members raised on the use of the new forms and that she would share the response upon receipt. She also mentioned that the Federal Continuing Resolution passed on Friday for the federal government, and it included extensions to the telehealth flexibilities that have been in place since the pandemic. These flexibilities allow SNF providers to bill telehealth services for outpatient therapists and eliminate the geographic index requirements as well, freeing up originating site fees for a host of telehealth services to SNF residents. The new deadline is in September 2025, unless there is legislative action to make the flexibility permanent. She pointed out that the fee schedule cuts were not reversed in this CR and the rates would not change, unlike in years past.

Ms. Hart also recalled previous committee meeting conversations regarding the Medicare Observation Status appeal ruling. She stated that there has been some confusion relating to the applicability of these appeals. She clarified that patients must be admitted inpatient and later changed to observation status to qualify for the appeal, because that was the circumstance in the Centers for Medicare Advocacy lawsuit that led to these appeals. She reiterated that patients who are initially outpatient and admitted later as inpatient due to timing of physician order do not qualify for these appeals.

Ms. Hart then moved the discussion to Medicaid issues. She referenced the overpayments that were initially created in 2023 due to providers duplicate billing in PNM/MITS at the onset of PNM as well as a mass reprocessing of claims by ODM in December of 2023 in an attempt to correct erroneous claim payments. These adjustment claims submitted by ODM did not have any patient liability applied, resulting in large overpayments to providers. Subsequently, in February 2024, ODM attempted to recoup some of these overpayments but did so incorrectly. Since that time, ODM has been working on a plan to recoup the overpayments over a period of time, at the request of the provider associations. At the beginning of March, ODM sent a communication to providers, which most did not receive, indicating that they had been identified as receiving an overpayment and would receive a report to review the potential

takebacks and agree or dispute. Payments would then be recouped gradually. Unfortunately, two days later, providers had not received a report and began to report massive recoupments on their remittance advice. Luckily, it was not a payment week. OHCA reached out to ODM and requested the recoupments be reversed. ODM did reverse the recoupments, except for about a dozen that we have identified, but not before remittance advice reports were sent to clearinghouses containing the recoupments. This resulted in multiple versions of the remittance advice as well as two separate payments issued last week, one titled "LTC Correction payment". She stated that many members have reported issues balancing the remits. She advised members to couple the remit in PNM with the remit from the clearinghouse to balance. She stated that if this didn't work, that providers would have to submit tickets to the Integrated Help Desk to resolve. She encouraged providers to email her if they experienced unexpected recoupments. Anne Marie Riley asked about the email address Medicaid uses for communication, and Ms. Hart stated that she would follow up with ODM.

Ms. Hart then discussed the taking back of payments that were made and the denials of claims when they were billed as waiver. She also mentioned the update to PNM on February 24th, which retroactively updated people's eligibility files back to 2022. She asked for examples of the waiver span issue and the LTC Correction payments not balancing to address these with Medicaid. She also mentioned that not everyone who received a payment got a correction payment, but everyone who got a recoupment with their payment should have gotten a correction payment.

Ms. Hart discussed issues with private room add-ons for various insurance providers. She noted that Aetna was not processing claims with the add-on until they update their coding system and advised members to submit claims without the private room add-on. She also noted that UnitedHealthcare had reprocessed all December claims as of February 15th. She also mentioned that Buckeye, Amerihealth, and Humana were being defensive about their claims, and she requested more examples of denied claims from these providers. She also clarified that Aetna was not denying claims with the add-on, but rather not processing them at all. She concluded by mentioning that Aetna would no longer be a managed care payer after the end of the year.

She then addressed issues with Humana take-backs and a problematic update to the Medicaid PNM/FI system in February 2024. The update caused widespread eligibility errors, including incorrect retroactive enrollments and coordination of benefits changes, leading to improper recoupments by managed care plans. She advised providers to check multiple sources for eligibility verification and save all responses due to the ongoing issues.

Ms. Hart discussed issues with the search button in the PNM system, which sometimes disappears for users with limited access. She also addressed the transition to PDPM in Ohio, explaining that the base rate will be based on a component built off of the scores from the PDPM assessment. She also mentioned the change in Social Security Administration's policy, which could result in residents receiving large payments and needing to spend down. She sought help in finding examples where the lump sum did not work in the PNM system.

In relation to the topic of lump sum payments from the social security administration, Heather House added that residents have 9 months to spend down and that only the recurring monthly income can be run through the QIT. Erin Hart and Chair Skrzyzynski discussed the issue of surveyors potentially penalizing a situation related to QIT. Heather House agreed to send an email containing specific questions and the OAC rule applied to Ms. Hart for further review. Ms. Hart also raised concerns about direct deposits to QIT and the process of handling large lump sums. Heather House clarified that lump sums should not be deposited in QIT and should be removed as quickly as possible. Tammy Davis asked about the timeframe for opening a QIT when the new SSA amount exceeds the limit, and Ms. Hart confirmed that it should be set up before the next payment hits.

Ms. Hart then briefly discussed ongoing issues with managed care plans regarding bed hold payments, emphasizing that these plans must pay for all services under the Ohio Revised Code. She also highlighted a new policy from Molina for prepayment reviews of nursing facility ventilator services. She mentioned that Amerihealth is addressing coding errors and incorrect TPL denials, and Care Source is conducting medical reviews. Lastly, she provided a letter from Care Source to be included with Medicare bad debt reports to ensure valid remits.

The committee was invited to discuss any other issues. Hearing no further issues, the meeting was adjourned.

Next Meeting: April 15, 2025

First Name	Last Name	3/18/25
Adrienne	W	X
Ann Marie	Riley	X
Amy	Bryant	X
Amy	Carpenter	X
Amy	Martin	X
Breyonna	Walter	X
Becky	Morse	X
Beth	Neu	X
Brandis	Kosonovich	X
Brittany	Lawrence	X
C	Thomas	X
C	Wheating	X
Candie	Mayer	X
Christina	Boehm	X
Courtney	Fuchs	X
Crystal	Villareal	X
Darlene	Dewey	X
David	Melton	X

Debra	Moran	X
Denise	Leonard	X
Edgar	Silalahi	X
Erin	Hart	X
Gabrielle	Durbin	X
Gina	Toigo	X
H	Grether	X
Heather	House	X
Heather	Serban	X
J	Metz	X
Jana	Smith	X
Janet	Harris	X
Jennifer	Butler	X
Jennifer	Kreiger	X
Jennifer	May	X
Jennifer	Rumbaugh	X
Jennifer	Wiefering	X
Jolynda	Myers	X
Jennifer	Wilson	X
Joe	Rotunda	X
Judy	Cline	X
Julie	Schoster	X
Justin	Tolliver	X
K	Lautzenheiser	X
Karen	Hacker	X
Kimberly	Farmer	X
Kristen	Massa	X
Kristin	Stivason	X
Kristin	Beckler	X
Kristy	Carroll	X
Lisa	Dryer	X
Lori	VanDyke	X
L	Phillips	X
Marcy	Gray	X
Mary Beth	Montgomery	X
Mike	Shoffner	X
Nancy	Cain	X
Nicole	Holt	X
Pamela	Skrzynski	X
Pauline	Siler	X
Pete	Van Runkle	X
Rebecca	Wheeler	X
Roxie	Howard	X

Sabrina	Low	X
Sandy	Drabish	X
Shannon	Gray	X
Sharon	Graf	X
Shauna	Harper	X
Sue	Cannon	X
Tammy	Moyer-Wilson	X
Tabby	Preston	X
Tammy	Davis	X
Tammy	Johnston	X
Taneisha	Jackson	X
Tate	Schmid	X
Tiffany	Lockhart	X
Tina	Simmons	X
Tracey	Zeestraten	X
Tracie	D'Amato	X
Will	Levering	X
Yelena	Koltsova	X