

# **OHIO HEALTH CARE ASSOCIATION REGULATORY COMMITTEE**

**April 10, 2025, 11:30 a.m.  
Zoom Meeting**

## **M I N U T E S**

Chair Santanna Rapp called the meeting to order. The table at the end of these minutes shows attendance.

The Chair asked the committee to review the OHCA Antitrust Compliance, Conflict of Interest, and Confidentiality Policies that were linked to the agenda and identify any conflicts.

Motion: To approve the minutes of the previous meeting.  
Seconded; motion carried.

Chair Rapp asked committee members about any recent survey experiences they wished to share. Amanda Brock said her company had quite a few surveys the week of the committee meeting that included many surveyors with degrees other than nursing. The surveyors focused on gradual dose reductions and psychotropics in general. They also spent a lot of time in the kitchen. Chair Rapp said they had an annual in an AL that last was surveyed in February 2024, even though they had two SNFs that were more than 30 months from their last annual. She agreed that surveyors were hyper-focused on the kitchen.

Tammy Cassidy reported that multiple buildings in northern Ohio had issues with wound care. The hospital didn't provide complete information, and the admitting nurse didn't document a description or measurement of the wound. Instead, they waited for the nurse practitioner or treatment nurse. As a result of the delay, no one could tell whether the wound improved or worsened after admission. Surveyors cited this issue at G level or higher. Ms. Cassidy added that surveyors were asking more questions about how the care plan was communicated to CNAs and expected to see the communication documented. EBPs were still a focus as well.

Gwynn Ryder commented that complaint surveys were supposed to be done only for IJ-level allegations, but all the recent complaint surveys she experienced were for frivolous complaints not alleging IJ or harm.

April Queener reported that her facility expected to receive 3 citations they planned to IDR. The surveyors spent 3 days in a conference room before doing observations. They didn't do a lot of the normal process. They said they would cite for not monitoring weights, but the weight loss was not significant. They also planned to cite a deficiency on antipsychotics for a resident when they were not due for GDR until October and the last few GDRs found reduction was contraindicated. The surveyors asked the NP generically whether a reduction in behaviors meant

a GDR should be done. The third issue was “unauthorized” donations by residents to their own congregation. The facility had not received the 2567 at the time of the committee meeting.

Heidi McCoy reviewed statistics from QCOR showing the number and percentage of facilities that had not had an annual for specific numbers of months. There was a slight improvement from the previous month. ODH did around 45 annuals during the last month. They had done 594 complaint surveys in 2025, with 214 were in the past month. Ms. McCoy also shared the numbers for the region.

The latest IJ Bulletin, for the fourth quarter of 2024, was linked to the agenda. ODH cited 27 IJs during the quarter. Ms. McCoy listed the most-cited IJ tags. There was a definite trend during the fourth quarter and extending into the first quarter of 2025 of IJs for elopement, in some cases resulting in resident death. She recommended being very careful about procedures such as locks, codes, and investigating alarms. These incidents tended to get media coverage.

Pete Van Runkle said HHS announced they were letting go 10,000 employees, on top of about the same number who previously resigned. Most of these employees were in other agencies than CMS, such as CDC. HHS also was reorganizing to eliminate or combine some agencies and reduce the number of regional offices.

OMB issued an RFI asking for suggestions for eliminating or replacing regulations, following up on the President’s executive order for a 10:1 ratio of eliminating regulations compared to adding them. CMS was to lose only 300 people, but the impact of the losses was unknown at the time of the committee meeting. The large personnel reduction at CDC could be a concern because we were expecting them to roll back the COVID guidelines.

Debbie Jenkins discussed the minimum staffing litigation. Litigation was one of three routes to eliminate the staffing requirements. The Monday before the committee meeting, the court in the AHCA/NCAL case issued a decision vacating the challenged components of the staffing rule. The facility assessment and payment transparency provisions were not included. CMS could appeal the court’s decision. The administrative and Congressional routes remained unchanged. Mike Bassett of AHCA/NCAL had told us previously that Congress could count the savings from legislatively repealing the rule so long as appeals were pending. The administration might decide to file an appeal just to keep this option open. As of now, though, the court decision was great news. Ms. Jenkins discussed the rationale for the decision.

Another good-news item was that the REIT language was removed from the state budget that the House passed the day before the committee meeting. The Governor’s budget would have denied a license to any SNF operator who entered into a new lease with a REIT. We were early in the budget process, though, so we would need to educate the Senate. If neither the House nor Senate bill had the language, Ms. Jenkins did not expect it to come back in conference committee.

Mr. Van Runkle said the House-passed bill did not make any changes to the PDPM transition as proposed in the executive budget. It still called for a CMI freeze for first six months beginning July 1, 2025, and then a phase-in of PDPM using only the nursing component. The phase-in would be a 1/3-2/3 approach starting January 1, 2026, and ending December 31. This was only the House

version, though. In the Senate, we would continue to advocate for a blend of nursing with SLP and NTAs and a phase-in with smaller increases and decreases. There also were some technical issues that needed to be addressed.

Under any version of the transition, it was highly likely that PDPM scores would apply beginning January 1, using data from MDSs completed during the second and third quarters of 2024. Members should be sure to prepare complete and accurate PDPM assessments on Medicaid residents and to capture the key data elements. Tammy Cassidy had prepared a list of key items for nursing, NTAs, and SLP that was linked to the agenda. Ms. Cassidy added that even if the latter two components ended up not being used for Medicaid, they were relevant for Medicare and Medicare Advantage.

Ms. Cassidy said Myers and Stauffer had restarted exception reviews. She reminded the committee of the policies Myers and Stauffer sent out before the reviews. They didn't want summary notes and there was an argument about date-specificity. Interpretations were inconsistent even with the same reviewer. On the PHQ-2/9, they wanted interviews of staff on all 3 shifts. The date in item Z0400 had to be signed off within the assessment period.

In the ODH MDS questions-of-the-month document, Ms. Cassidy was surprised by the answer about not completing interviews within the assessment period, which was not in accordance with the RAI Manual but was helpful. She noted the other answers in the document.

CMS released the draft RAI Manual and assessments for October 1, 2025. It would be finalized in a couple months. Section R did not pull in all the social determinants of health and would apply only if the resident was in the facility 366 days or fewer. In Section O, days and minutes of therapy no longer would be documented except for a checkbox on the end-of-Medicare assessment. There were additional clarifications in Sections GG and A.

Mr. Van Runkle pointed out AHCA/NCAL and ODH emergency preparedness resources linked to the agenda and noted that the HHS OIG issued a report criticizing CMS's EP guidance.

Chair Rapp commented that the exception reviews were very inconsistent. Myers and Stauffer would only accept a few conditions as respiratory disorders otherwise not classified, saying it was at their discretion and was an Ohio rule. Ms. Cassidy said providers were being told that ODM instructed the reviewers what to accept.

Cathy Hamblen shared that the OIG filed a False Claims Act complaint against a wound care physician group. SNFs may get requests for documentation relating to this case. It had to do with "cut-and-paste" software that tended to frequently lead to debridement.

The Chair said the next meeting was tentatively set for May 1.

The meeting was adjourned.

Attendance:

Last Name	First Name	7/11/24	8/8/24	9/5/24	10/3/24	11/7/24	12/12/24	1/2/25	2/6/25	3/13/25	4/10/25
Abraham	Joe			P		P	P		P	P	
Adkins	Dee										
Allen	Amy		P	P	P	P	P		P	P	P
Anderson	Josh							P			
Asher	Bryan	P	P			P			P		P
Beatrice	Edward	P		P	P	P		P	P		P
Bell	Kayla				P		P				
Bookshar	Dawn	P	P	P	P	P					
Bower	Danielle	P									
Bower	Scott										
Brock	Amanda		P	P	P	P		P	P	P	P
Butler	Lashea	P		P	P		P		P	P	
Cahill	Tim										
Campbell	Pam										
Campbell	Tuesdie			P	P	P	P	P	P		P
Carter	Linda										
Cassidy	Tammy			P					P	P	P
Costello	Colleen	P		P	P						P
Coury	Eli	P		P		P					
Craycraft	Shane								P		
Crowley	Jennifer	P			P		P				
DeBerry	Guinevere					P		P			
Dietz	Diane	P		P	P	P	P				
Dobbelare	Lisa										
Dorn	Josh								P	P	P
Douglas	Cassie	P						P	P		
Fidram	Anthony										
Fogle	Heather	P									
Francisco	Teresa				P	P					P
Freas	Heidi		P							P	
Grimm	Jarrod										
Hall	Bonnie				P		P	P	P		P
Hall	Tiffany	P	P		P		P		P	P	
Hamblen	Cathy	P	P	P		P		P	P	P	P
Hamilton	Lisa		P	P	P	P		P			

Hammond	Christina										
Hart	Erin	P	P	P		P	P	P	P		
Havenar	Janell		P								
Heineman	Lorelei			P							
Heller	David	P									
Humenik	Theresa			P		P		P	P	P	
Jablonski	Nicole		P	P		P					P
Jenkins	Debbie	P	P			P	P	P	P	P	P
Johnson	Cindy			P	P		P	P	P	P	
Kennedy	Keith										
Kenney	Christine	P	P		P						
Koch	Sarah	P	P	P		P	P	P	P		
Kostolich	Dee										
Kuhlor	Aysha									P	
Leahy	Kelly		P		P	P					
Lichtenstein	Mordecai										
Masternick	Marc										
McCoy	Heidi		P		P	P	P	P	P	P	P
Moore	Angie		P			P		P			
Motolik	Victoria		P		P	P	P	P	P	P	P
Murray	Matt	P	P		P				P	P	P
Nichols	Casey			P					P		P
Nordhoff	Jackie							P	P		P
Notter	Josephine	P	P	P	P	P		P	P	P	
Overla	Erin									P	P
Perreault	Shanna		P								
Petrella	Bradley	P					P		P		
Piccirilli	Trista	P				P		P	P	P	
Queener	April	P		P	P		P	P		P	P
Rapp	Santana	P		P	P	P	P	P	P		P
Ratliff	Derrick	P	P	P		P	P	P	P	P	P
Rejonis	Carri								P	P	
Remy	Teresa	P	P	P	P	P		P			
Rohrs	Jennifer	P			P	P				P	P
Romes	Kerri	P									
Rutherford	Seana		P								
Ryder	Gwynn	P	P	P		P		P	P		P
Schmidt	Melissa										
Selnick	Blake	P	P	P	P	P	P	P	P	P	

Selvey	Tammy		P	P		P			P		
Shah	Hemant			P			P				P
Skul	Cassandra							P	P	P	P
Smith	Mandy	P			P	P					P
Stewart	Hannah		P		P	P		P	P		P
Stewart	Shane	P			P		P	P	P	P	P
Suber	Ladina		P				P		P		
Suing	Rob	P	P	P	P	P	P	P	P	P	P
Tapocsi	Greg										
Thompson	Trey						P	P			P
Tolliver	Justin									P	P
Tost	Christopher	P	P	P	P	P	P	P	P	P	P
Uhler	Julie									P	
Van Runkle	Pete	P	P	P	P	P	P	P	P	P	P
Vordermark	Sarah	P	P	P	P			P	P	P	P
Welch	Dottie				P						
Williams	Candace		P								
Wolf	Jennifer										
Youell	Valerie				P		P	P	P		
Zamudio	Jennifer		P								P