OHIO HEALTH CARE ASSOCIATION BOARD OF DIRECTORS

September 10, 2025 9:00 am Meeting

MINUTES

President Shane Craycraft called the meeting to order. The roster at the end of these minutes shows Board attendance.

The President asked Board members to avail themselves of the OHCA Antitrust Compliance, Conflict of Interest, and Confidentiality Polices linked to the agenda and to bring forward any conflicts.

CONSENT AGENDA

Without objection, the Board approved the consent agenda, which consisted of the meeting minutes from Activities Professionals, Billing, ID/DD Board, OHCA Board, Regulatory and Workforce Committees.

FINANCIALS

Secretary/Treasurer Joe Cilone provided a report on the June financials. As of the end of June, the Board will see, on OHCA's balance sheet, that Net Assets are at \$14.6M with \$2.5M in cash and cash equivalents. On the Income Statement, monthly Income from Operations was negative mainly driven by timing of Convention expenses which were budgeted in May. Year to date, Income from Operations was \$290k to the positive or about \$285k above budget. Major revenue drivers include \$80k overage in other contributions, which include golf outing revenue which will be reallocated by year-end, approximately \$53k for convention and about \$38k overage in dues revenue. YTD investments are up with OHCA gaining about \$300k and EFOHCA gaining about \$180K. The financial statements and check register where filed for audit.

MEMBERSHIP

Diane Dietz provided the September membership report.

Motion: To approve Assisted Living Ministry Services, 18 ICF/IID Homes affiliated with I Am

Boundless, I Am Boundless ID/DD Waiver provider and Kimes at Home Hospice provider.

Seconded and motion carried.

Motion: To terminate Park Terrace and McKinley Health Care as NF members and Integrity Home

Care due to being 120-days past due on their membership dues Seconded and motion

carried.

Motion: To approve 2 new Industry Partners, reinstate 1 Partner, affirm 11 renewals and

terminate 8 Industry Partners due to non-payment of membership dues. Seconded and

motion carried.

MANDAMUS

Diane Dietz began with an overview of the unanimous opinion of the Ohio Supreme Court to the mandamus, thanking Rolf for all their hard work and congratulating everyone on our success. Unfortunately, soon after the opinion was rendered, ODM filed a motion to stay the execution of the judgement. In the stay, ODM stated that they would be filing a reconsideration asking for clarification on paying out the back periods and, once again, stating their arguments related to appropriations. The stay went on to highlight the hardship paying out this court-ordered award would have on the state of Ohio, and felt the Supreme Court overlook evidence provided by ODM and mis-interpreted the statue.

Discussion ensured as to why ODM would file the stay when faced with an unanimous Court decision. Aric Martin provided the Board an overview of the stay and what was anticipated with respect to ODM's reconsideration assuring the OHCA Board that our legal team stand has already begun formulating our aggressive response.

Diane Dietz then discussed next steps as it relates to work that was being done prior to the stay. She explained that priority #1 was to get with ODM and immediately ask them to recalculate the July 1, 2025 rates. She then discussed priority #2 which was a discussion as to how ODM was going to recalculate past periods. She told leadership that she had reached out to Denise Leonard at Plante & Moran to see if they had the data necessary to calculate the past four rating periods. After a bit of work, Plante & Moran was able to obtain the actual dates of every CHOP that occurred from July 1, 2023 thru June 30, 2025. Based on that and on cost report data, they were able to arrive at a pretty good calculation by Medicaid ID as to what was owned each provider over the past four rating cycles. Diane thanked Denise Leonard and the Plante & Moran team for doing this work for us. At the appropriate time and in the spirt of collaboration, the data will be share with ODM as a way to either jump start the recalculation of past periods or as a way to verify the calculations run by ODM.

Discussion then turned to member requests on the value per point calculations going back to July 1, 2023 as well as projected calculations going forward. Discussion then ensued on the role the Association should play related to giving members actual calculations that would eventually be run by ODM. After much discussion, consensus was to give members a range and always caution members that OHCA's preliminary calculations are only estimates.

LEGISLATIVE COMMITTEE

President Shane Craycraft then told the Board that it was his intention to create a new Legislative Committee with the goal to formally establish OHCA talking points on what OHCA is seeking now and into the future. The Legislative Committee would also oversee our legislative strategy and formulate our grassroots activities. Appointment of a chair and formation of the committee will occur soon.

Attention then turned to a study that was originally discussed by Ronnie Wilhelm and Todd Bergdoll with Scripps Gerontology. The study had two components which included an update of their January 2025 study called, Understanding the Financial Performance of Ohio's Nursing Homes During and After the Pandemic. That update would encompass the data through the 2024 Medicare cost report. The other part of the study, which was nearly double the cost of the first, would be a survey of Ohio NFs to determine their average payment rates under various payor sources. Discussion ensured around the costs and aspects of this study. Consensus was reached that an independent study by Scripps was indeed needed but we wanted it to include more information on Medicaid costs related to the cost versus payment gap over the past several years as well as comparisons of neighboring state Medicaid

rates to the Medicaid rates of Ohio. The Board authorized Diane Dietz to negotiate those additional components and set a funding cap of no more than \$100,000 to complete everything. Time is of the essence and the hope is that the study can be complete by early January 2026 at the latest.

AHCA DUES INCREASE

Diane Dietz gave a brief overview of the call the OHCA Executive Committee had with Cliff Porter to discuss the proposed 3-year dues increase that is coming before the Council of States at the October Convention. Bill Wiesberg and Chris Chirumbolo, as AHCA Board members, weighed in. They both felt if AHCA needed the dues increase, they would fully support it. However, no concrete explanation has been given as to why this dues increase, set to continue over the next three years, was actually needed. AHCA's overriding arguments have been related to reserves to ensure AHCA had the resources to fight "the next battle" as well as having the financial resources to keep top DC talent at the Association's to continue to deliver for the membership. Much discussion ensued as to the appropriate reserves an Association needs as well as other operational aspects of AHCA and based on that discussion, the following motion was made:

Motion: For OHCA not to vote in favor of the compounded, 3-year automatic dues increase that will come before the AHCA Council of States in October. Seconded and motion carried.

MEDICAID ISSUES

Diane Dietz began the Medicaid issues report with the NF Private Room Monitoring Fact Sheet that was revised on September 2, 2026 to include a link to the portal to which approved providers must attest to the additional July 1, 2026 program requirements. Those requirements were to have had a policy in place for prioritization of individuals in private rooms beginning July 1, 2025 as well as attesting to active participation in the upcoming resident and family satisfaction survey. It was important to note that if any NF missed the 30-day compliance window, they would be removed from the program and would need to apply again for either the category 1 or category 2 private room program.

Erin Hart then provided the Board with an update on where things stand with the recoupment process. While members have complied with the ODM timeframe requirements to identifying errors, OHCA has received no confirmation from members that any actual data reviews have begun, nor has any providers been contacted to begin next steps.

Erin continued along with her update on other Medicaid payment issues and unfortunately there appears to be another significant issue affecting our members. ODM has confirmed that the recent retroactive patient liability (PL) changes reported by nursing facilities are the result of yet another system issue. Over the past several days, OHCA has shared multiple examples from providers to help ODM identify the scope of the problem. Thankfully, a communication has been sent to all NFs acknowledging the problem and stating that they are working closely with their vendors to implement a solution. While the error had been fixed according to ODM, members are still reporting isolated issues and need to reach out directly to the IHS helpdesk for assistance. In addition, the first week of September, members also reported multiple problems with Medicaid remittance advice (RA) reports for their weekly room and board payments. While claims submitted show a paid date in the Provider Network Management (PNM) system for this week, the associated remits were delayed, and in some cases, still have not been posted. Some providers have reported that the remits are missing altogether, while others have found that the files are present but cannot be opened. Erin said she is continuing to work these ongoing issues and will provide assistance and information to members as things change.

Debbie Jenkins then shared with the Board that during our recent Financial Management Conference, a member reported a possible discrepancy in the ODM's timeline for full PDPM implementation. The confusion stems from temporary law contained within House Bill 96. OHCA's initial interpretation of the temp law language was that rates determined for fiscal year 2027, including both July 1 and January 1 rate settings, would utilize the two-thirds/one-third split. However, a recent communication from an ODM representative to the conference attendee stated rates will be completely PDPM starting January 1, 2027. OHCA is in communication with ODM representatives for clarification and will advise members accordingly.

Tammy Cassidy then covered the preliminary case mix scores that were recently issued. She reported to the Board that ODM previously said the preliminary case mix reports for Quarter 2 2025 would be posted during the week of September 1st. However on September 7th, ODM posted that eligibility data for the QRT 2 2025 MDS Quarterly Reports continued to be reviewed for accuracy. Revised preliminary QRT 2 2025 MDS Quarterly Reports would be generated and posted as soon as notification is received that all issues have been resolved. As a reminder, providers will be given a week from the posting to review and the final MDS quarterly rosters will be generated.

REGULATORY

Tammy continued along with the regulatory updates including informing the Board of the free MDS member webinar and additional training she will doing for the membership. She then covered the upcoming Governor's Conference on Improving Quality in Nursing Homes. She highlighted the speakers and encouraged all facilities to register. Since the free conference only allows two individuals to register from each organization, corporate staff should be able to register via the parent corporation.

Erin Hart then discuss the NATCEP rules and shared OHCA's comments. As Board members may recall, OHCA supported the changes from Senate Bill 144, which were designed to expand access and align Ohio with federal flexibilities, but she said we have raised concerns that some draft language could create new barriers. Our key recommendations centered around 1) testing options--allowing educational institutions to use the state-developed test rather than requiring them to create their own; 2) observer flexibility--broadening eligibility so that RNs or LPNs with relevant experience can serve as test observers, instead of limiting to RNs with nursing home backgrounds and 3) facility proctoring-requiring state approval of procedures at initial review and annual reevaluation, not direct observation at every exam.

MINIMUM STAFFING

Debbie Jenkins then provided the Board with the latest development on the minimum staffing rule. She reported that HHS appealed the Iowa district court ruling that found CMS exceeded its authority with the minimum staffing rule. Subsequent to that, CMS sent an interim final rule to OMB repealing the staffing rule. The interim final rule will take effect immediately upon filing, with a comment period to follow. However, it is unclear if the IFR will rescind the entire rule or just the staffing provisions - which were the targets of the two court decisions. Additional information will not be available until CMS files the interim final rule. This filing will take place after OMB completes its review. Unfortunately, there is no required timeline for OMB's review.

CEO SEARCH UPDATE

With Greg Miller in Greece, Diane Dietz asked if any of the search committee members had an update. Janet Harris said the search was going well and wanted all search committee members to review the recorded interviews if they were not able to participate in an candidate interview live.

OTHER BUSINESS

With the no other issues before the group, the meeting adjourned in preparation for the start of the Fall Conference. The next meeting will be virtual to be held tentatively on Thursday, October 16 at 10 am.

ATTENDANCE ROSTER

Name	Status	24-Jul	21-Aug	10-Sep
Shane Craycraft	P-ALT	Р	Р	Р
Michael Scharfenberger	1	Р	Р	Р
Kenn Daily	2	Р	Р	
Scott Unverferth	3	Р	Р	Р
Jim Taylor	4	Р	Р	
Jill Herron	5	Р	Р	Р
Bill Levering	6	Р		Р
Ronnie Wilheim	7		Р	
Bill Weisberg	8	Р	Р	Р
Scott Sprenger	IPP-9	Р	Р	Р
Janet Harris	10	Р	Р	Р
Dan D'Amico	11	Р	Р	Р
Nicole Sprenger	12	Р	Р	Р
Michael Coury	13		Р	Р
Robin Hillier	14	Р	Р	
Shane Stewart	15	Р	P	Р
Linda Black-Kurek	ALT	Р	Р	
Chris Chirumbolo	ALT	Р		Р
Joe Cilone	ATL	P	Р	Р
Chase Kohn	ATL		P	
Diane Liliestedt	ATL			
Greg Miller	ATL	Р	Р	
Jerry Schroer	ATL	Р	Р	Р
Danielle Russo	AL	P	Р	
Gen Stelzer	НСН	Р	Р	
Joe Kowalski	ID		Р	Р
John Renner	NP	Р	Р	
Sarah Koch	13A	Р		Р
Victoria Barkin	AL B			
Brent Classen	AL B	Р	Р	
Amy Francis	AL B			
Charlotte Kister	AL B			
Matt Pool	AL B	Р		
Gwynn Ryder	AL B	Р	Р	

Kyle Schmidlap			P	P
Tim Dotson	ID B			
Chelsea Pozderac	ID B	Р	Р	
Sherry Rinck	ID B			
Becky Sharp	ID B			
Jo Spargo	ID B			
Bill Arfaras	нсн в	Р	Р	
Bryan Casey	нсн в		Р	
Gina Covelli	нсн в			
Laura Dales	нсн в			
Andrea Henderson	нсн в			
Mark Knepper	нсн в			
John Fleischer	GST			
Brian Hennis	GST	Р	Р	
David Hennis	GST	Р	Р	Р
Tadd Hunt	GST			
Denise Leonard	GST	Р		Р
Aric Martin	GST	Р	Р	Р
David Parker	GST	Р	Р	
Deanne Sprenger	GST			
Todd Bergdoll	STAFF	Р	Р	Р
Tammy Cassidy	STAFF		Р	Р
Erin Hart	STAFF	Р	Р	Р
Debbie Jenkins	STAFF	Р		Р
Heidi MCcCoy	STAFF	Р	Р	Р
Kathy Chapman	STAFF	Р	Р	Р
Diane Dietz	STAFF	Р	Р	Р

Certified:			
Joe Cilone, Secretary/Treasurer	 Date	_	