

OHIO HEALTH CARE ASSOCIATION HOME CARE AND HOSPICE BOARD

**November 17, 2021, 1:00 p.m.
Conference Call**

MINUTES

David Walsh, Chair, opened the meeting with a brief introduction and welcome to our meeting. The OHCA antitrust compliance, conflict of interest and confidentiality policies were indicated as in the board folder and members acknowledged policies. Mr. Walsh pointed to the items in the consent agenda, including the previous board call minutes and home care and hospice committee minutes, and requested a motion to approve. Mark Knepper made a motion to approve, and Gen Stelzer provided a second. Participant attendance is confirmed through zoom, and the results are in a table at the end of this document.

The meeting started with a review of the OHCA Home Care and Hospice Membership report. Since our last meeting, 1 agency member has been approved; Premier Home Health. Two additional agencies will be on the membership report for tomorrow; A&M Friends and JFSA Caring Hands. No agencies have been terminated in the same time period. OHCA is reviewing a plan to offer discounted Convention booths for OHCA hospice members in an effort to attract more hospice agencies.

Pete Van Runkle then discussed the first Advocacy Agenda item for 2021, the American Rescue Plan Act (ARPA) dollars and how those dollars were divided between the State and Local dollars and the home and community based services (HCBS) funds. The home and community based services (HCBS) fund accumulates through a 10% FMAP for existing services on payments made through March 2022. The state issued a plan responding to a demand from CMS. OHCA was disappointed by the decision to cut our ask of 20% revenue in provider payments down to 10%, and move the dollars to program enhancements that are not eligible for a federal match. Through a Developmental Disability coalition, OHCA revised the plan to return to our original ask of 20%. This would apply to all HCBS providers. The plan was submitted last Tuesday, and we have received no formal response. However, we have heard anecdotally from one of the state agencies that they are looking at it favorably. We have also sent the plan to the Ohio Council for Home Care and Hospice, and they are supportive of the actions. For Hospice providers, an ARPA allocation would come through the state and local dollars, which have already had a large distribution allocated. About \$800 million remains for potential allocation to our other provider types. OHCA is drafting legislation that encompasses all of our distributions, and we are currently on advocacy pathway with the legislature.

Mark Knepper asked if there was an update on the Staffing Agency Regulation legislation. Mr. Van Runkle responded that there exists a current legislation not drafted by OHCA that will not likely make any progress. The current legislature is not open to placing pricing caps on any industry. Price gouging is also an unlikely avenue for the state of Ohio. He then explained that we are exploring preferred provider relationships with staffing agencies that OHCA has formed

a relationship with to offer better pricing for our members. Gen Stelzer added that for her agency, she has been unable to find a Registered Nurse who is willing to work in home care, even through a staffing agency.

Ms. Begin then reported on the Build Back Better Act, a replacement for the Better Care Better Jobs Act. In this act, \$150 Billion has been earmarked for Medicaid HCBS. This includes a 6% increase in FMAP, requirement of the state to cover personal care and respite care services, payments that support recruitment and retention of workforce and a requirement to review HCBS rates every 3 years. There are also several grant opportunities available for the states and providers relating to workforce development that directly impact home health and hospice providers.

Ms. Begin also provided an update on the Workforce Committee activities. OHCA recently submitted a proposal to Director McElroy on the use of a \$27 million grant for long term care facilities. This proposal includes Student Loan Repayment, Recruitment Campaigns, and funding direct staffing for a nursing home strike force team. This can help provide us a framework for our future HCBS grant opportunity submissions. OHCA is also working towards allowing more Career Technical Education Centers to offer high school LPN programs, and creating pathways to advanced placement in community colleges for the RN Program. This includes revision of rules through the Ohio Board of Nursing on nurse educator requirements, working with the Ohio Department of Education on recruitment of students, working with the OACTE on career center engagement and working with the Administration on funding options to remove barriers for startup costs. OHCA is also working to revise STNA training program requirements to allow for virtual education and larger class size ratios. This has a tangential impact on HHAs and hospices who utilize STNAs for home health and hospice aides.

Mr. Walsh then moved to reporting of key Issues. Ms. Begin discussed vaccine mandates. For hospice, there is a much more straightforward applicability of the CMS vaccine mandates. For home health, due to the manner in which agencies are structured, there are nuances to which mandate applies. The CMS mandate applies to all medicare certified home health agencies. The OSHA healthcare ETS applies to waiver providers/entities staff that go into the field. Strictly administrative offices of waiver providers would fall under the OSHA Vaccine ETS. Ms. Begin asked what our members needed in the way of policy development, as many have asked for assistance and AHCA/NCAL template does not meet the needs of all of our members. David Walsh responded that he had purchased a policy from a local labor attorney in Cincinnati. His agency was sending communication with a notice of vaccination. Mark Knepper stated they were reviewing exemptions on a case by case basis and taking a very strict approach. Gen Stelzer stated that they were taking a more lenient approach on religious exemptions under EEOC, and the policy was developed by their in-house legal team. David Walsh added that hospices have an added layer due to SNFs requiring their staff be vaccinated to enter the building. The Rolf policy sent by some buildings does allow for exemptions. However, some facilities are taking a more hard line approach. Pete Van Runkle noted that this is incorrect, and they must address the exemptions for all staff, including hospice. Accommodations should

include wearing source control and getting testing. Mark Knepper noted that this would exacerbate access issues once again.

Ms. Begin then moved on to the Home Health Final Rule for CY2022. This rule did not contain many big changes. The biggest news was the delay of nationwide implementation of Value Based Payments for Home Health to January 1, 2023 from January 1, 2022. The national cohorting of agencies is still included, as well as an overall payment increase of 2.6% and rebasing of case-mix weights/wage indexes. Revisions to the conditions of participation regarding home health aide supervision will necessitate a revision of the OHCA survey manual, to be issued in January 2022. The home health final rule also finalized changes included in the Consolidated Appropriations Act of 2021 for hospice survey enforcement. The October 1, 2021 items will go into effect January 1, 2022 with an enforcement date of March 1, 2022. Those items include publishing the 2567 results and aligning surveyor training requirements. CAHPS survey results will be posted on Care Compare no later than May 2022. Enforcement remedies, such as Civil Money Penalties, will begin no later than October 2022. Special Focus Programs has been delayed until FY2023 rulemaking, pending the review of a technical expert panel.

Ms. Begin then discussed an issue with Aetna Hospice Room and Board payments resulting in very large takebacks statewide. This issue has been under resolution for several weeks, and hospice providers are still not seeing their funds returned. OHCA requested assistance from the Managed Care Policy team at ODM and they are now tracking directly with Aetna.

Ms. Begin point to a recent call for presentations for convention and requested that board members send requests for sessions to her. She also noted that the Workforce Summit was coming up in January for all member types. Lastly, she provided a brief update on Education. OHCA is moving most HCH education to virtual offerings, including the CEHCH program, due to member feedback. Mark Knepper affirmed that the virtual education has been very helpful for his staff.

Mr. Walsh thanked committee members for their contributions to the board, and the meeting was adjourned.

First Name	Last Name	Company/Agency	11/17/2021
Erin	Begin	OHCA Staff	X
Bryan	Casey	Buckeye Hospice and Palliative Care	X
Mark	Knepper	VITAS Healthcare	X
Kathy	Chapman	OHCA Staff	X
Mike	McConnell	Absolute Home Health and Hospice	X

Eric	Talbert	Heartland Home Health and Hospice	X
Genevieve	Stelzer	Heritage Home Care	X
Bill	Levering	TLC Home Health Care	
David	Walsh	Hospice of Southwest Ohio/ Carebridge	X
Pete	Van Runkle	OHCA Staff	X