Meeting summary for OHCA Home Care & Hospice Member Call (05/14/2025)

Quick recap

Pete provided an update on the Federal budget and the ongoing debate in the House of Representatives' Energy and Commerce Committee, highlighting the potential impacts of the Biden Administration's proposed rule changes on Medicaid and provider taxes. Erin discussed the upcoming changes to MyCare Ohio and the transition to a new model, as well as the proposed role for the Hospice payment and the need for flexibility in the home health face-to-face encounter. Heidi thanked attendees of the recent Ohca Annual Convention and encouraged feedback for future improvements, and also announced the next monthly member call on June 11th at 10 AM.

Next steps

• OHCA members to contact Erin if they have not been contacted by the My Care Ohio contracting canvassing team or received an amendment to their existing My Care contract.
• OHCA members to review the My Care Ohio rollout schedule and prepare for contracting based on their county's implementation date.
• OHCA members to read the updated HOPE Guidance Manual and review the item sets for admission, update visits, and discharge.
• OHCA members to prepare for the transition from HIS to HOPE starting October 1st, 2023.
• OHCA members to prepare for mandatory OASIS submission on all payers starting July 1st, 2023.
• OHCA members to contact Erin immediately if they experience issues with EVV implementation or claims payment for managed Medicaid starting June 1st.
• OHCA members to provide feedback to Heidi on the Annual Convention and Expo, particularly regarding the home health and hospice day.

Summary

Federal Budget Update and Medicaid Cuts

Pete provided an update on the Federal budget, specifically focusing on the ongoing debate in the House of Representatives' Energy and Commerce Committee. The committee is considering a bill that aims to address Medicaid cuts and changes, resulting in savings. The bill is currently in the markup stage, with the committee expected to pass it out. The bill has been scored at over 700 billion dollars in savings over the 10-year planning horizon. Pete also mentioned that the bill is part of a larger

package that includes bills from other committees. The next steps include the bill passing through the budget committee and the house floor before Memorial Day.

Biden's Medicaid Rule Changes Impact
Pete discussed the potential impacts of the Biden Administration's proposed rule changes on Medicaid and provider taxes. He highlighted the risk of a 10-year moratorium on frequent redeterminations, the reduction of retroactive coverage, and the freezing of provider taxes. Pete also mentioned the potential impact on Ohio's budget, particularly the hospital provider tax, and the need for vigilance in relation to the completion of the State budget. He clarified that the proposed rule changes do not affect Ohio's managed care plan tax and that the Federal funding for the expansion population is not cut. However, he noted that there are still concerning aspects to the legislation, particularly the impact on cost-sharing for Medicaid beneficiaries and the rolling back of subsidies for marketplace plans.

Federal Budget Changes and Strategy
Pete discussed the potential changes in the federal budget, including the executive order on drug pricing and the timeline for the House to pass the bill. He also mentioned the ongoing state budget process, including the Senate's hearings and the proposed amendments for home and community-based services. Pete highlighted the need for a rate review process to ensure budget neutrality and the potential for rate increases in the future. He also mentioned the upcoming Medicaid Committee hearing and the strategy to submit amendments for the Senate's consideration.

MyCare Ohio Transition and Hope Guidance
Erin discussed the upcoming changes to MyCare Ohio, set to begin in January 2026, where the current 29 counties will transition to a new model with all four plans (Buckeye, Care Source, Molina, and Anthem) available. She emphasized the need for providers to get on the rosters and be included in agreements before the rollout. Erin also mentioned that beneficiaries in the current non-selected plans will be placed into a new plan, with an opportunity to change if desired. She encouraged reaching out to her for any questions or difficulties. Heidi then took over to discuss the updated Hope Guidance Manual, which is 34 pages long and provides comprehensive information. She encouraged everyone to read it in its entirety and offered help with any questions.

Hospice Payment and Transition Concerns
Erin discussed the proposed role for the Hospice payment, which included a 2.4% rate increase for those meeting the Hospice hospital quality reporting deadlines. She also mentioned the Hospice cap increase and the addition of admission flexibility for Hospice admission recommendations. Erin expressed concerns about the transition from HIS to Hope, which is coinciding with a transition to iKeys, and the potential for errors due to the concurrent rollout of the Hope tool and the iKeys methodology. Heidi then discussed the deregulation requests for information from OMB, which the Alliance signed on to,

including suggestions for home care and hospice. Erin added specific recommendations for Ohca, including a quarter hold harmless on the date submission for the New Hope tool. She also discussed the Medicaid electronic visit (Evv) and the need for flexibility in the home health face-to-face encounter.

Oasis All Payer Requirement Update
Erin discussed the ongoing advocacy efforts and the need for staff to report any issues. She also reminded the team that the Oasis All Payer requirement will become mandatory from July 1st, affecting all skilled home house services recipients. Heidi thanked attendees of the recent Ohca Annual Convention and encouraged feedback for future improvements. She also announced the next monthly member call on June 11th at 10 AM.

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