

## Meeting summary for OHCA NF Member Call (05/13/2025)

### Quick recap

Debbie provided updates on the state budget process and federal developments, emphasizing the main advocacy points and discussing the proposed Medicaid provisions in the Reconciliation Bill. Erin discussed funding recoupment and the transition to Next Generation MyCare Ohio, and encouraged participation in National Skilled Nursing Care Week. Pete provided an update on the quality incentive calculations for Medicaid reimbursement, the status of the licensure rules, and upcoming changes to licensure rules, as well as discussing recent changes to discharge notice requirements in Appendix PP.

### Next steps

- Providers to review and reconcile Medicaid payments from last week and this week, reporting any shortages exceeding 10% of normal payments to OHCA.
- Providers to prepare for Next Generation MyCare Ohio by contacting the four plans (Molina, CareSource, Buckeye, and Anthem) for contracting if not already done.
- Providers to participate in National Skilled Nursing Care Week promotional activities using the hashtag #NSNCW2025.
- Providers to review the Department of Health's proposed skilled nursing facility licensure rules and submit any concerns to OHCA by May 29th.
- Providers to ensure timely submission of PVJ and QRP (vaccination reporting) data by the upcoming Thursday deadline.
- OHCA to conduct a free member webinar on the finalized licensure rules once they are published.
- OHCA to resubmit relevant deregulatory suggestions to HHS in response to their new notice.

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### Summary

#### OHCA SNIFF Member Call Update

Debbie welcomes attendees to the OHCA SNIFF member call and thanks those who attended the annual convention last week, which had about 3,000 participants including attendees, exhibitors, and speakers. She mentions that scholarships were awarded and a premiere of "People Worth Caring About" was shown. Debbie apologizes for not having the meeting last week due to the convention and announces that they will cover updates on the state budget and federal matters.

#### State Budget Process and Federal Developments

Debbie provides an update on the state budget process and federal developments. At the state level, hearings are ongoing with various department directors and public testimonies. Amendments are due this week, and a substitute bill is expected in the Senate after Memorial Day. The main advocacy points remain focused on private rooms, PDPM transition, and fair rental value system implementation. On the federal side, draft language for the Budget Reconciliation process has been released, aiming to find \$880 billion in savings through the Energy and Commerce Committee. Debbie emphasizes that this is preliminary and subject to change.

### **Medicaid Provisions in Reconciliation Bill**

Debbie discusses the proposed Medicaid provisions in the Reconciliation Bill, which aim to save \$715 billion but may result in 13 million Americans losing coverage. She highlights positive aspects, including a 10-year moratorium on implementing the minimum staffing rule for nursing homes. Debbie also explains potential changes to provider taxes, including a moratorium on new or increased taxes, and mentions a proposed rule by CMS to eliminate loopholes in provider tax waivers. Additionally, she notes provisions for modifying retroactive Medicaid coverage, reducing FMAP rates for certain expansion populations, and introducing community engagement requirements for able-bodied Medicaid recipients.

### **Medicaid Recoupments and Prescription Drug Pricing**

Debbie provides a federal update, mentioning an executive order signed by the President regarding prescription drug pricing. The order aims to ensure the United States pays the lowest or equal to the lowest rate for prescription drugs compared to other countries. Erin then discusses Medicaid recoupments, explaining that recent recoupments were to offset long-term care correction payments made in March. She notes that while providers are not out a large amount of cash, there are discrepancies in the amounts recouped and potential inaccuracies in the overpayment calculations. Erin advises providers to notify them if they find they are short more than 10% of their normal payment after reconciling recent transactions.

### **Funding Recoupment and MyCare Ohio Transition**

Erin discusses two main topics: funding recoupment and the transition to Next Generation MyCare Ohio. She explains that the organization is actively working to resolve the funding recoupment issue with the department, aiming to review the recoupment before it occurs. Regarding MyCare Ohio, Erin outlines the changes coming on January 1, 2026, including new plan assignments and the need for providers to update their contracts. She emphasizes the importance of providers proactively reaching out to the new plans (CareSource, Buckeye, Molina, and Anthem) to ensure they are included in the contracting efforts for the Next Generation MyCare Ohio program.

### **National Skilled Nursing Care Week**

Erin discusses National Skilled Nursing Care Week, an annual promotional event starting on Mother's Day, and encourages participation using specific hashtags and resources available on their website. She also announces the premiere of a docuseries called "People Worth Caring About," featuring episodes about workers in various long-term care settings. Erin mentions that promotional materials, training resources, and social media kits related to the docuseries will be rolled out in the coming weeks, with an announcement expected in about two weeks. Pete then shares that CMS has published data used for quality points, which is now available for download as an Excel sheet.

### **Medicaid Reimbursement Quality Incentive Update**

Pete provides an update on the quality incentive calculations for Medicaid reimbursement. He estimates the 25th percentile will likely be 31.75 points, a significant increase from the previous 28.5 points. The value per point is estimated at \$1.07, though this is imprecise due to various factors. Pete mentions that legislative action on the quality incentive is currently on hold due to ongoing litigation. He also notes that the Department of Health's skilled nursing facility licensure rules are open for comments until May 29th.

### **Licensure Rules Update and CHOP Penalty**

Pete provides an update on the status of the licensure rules, which are nearing the end of the process. He explains that the current draft is in the "original file" stage, initiating a formal rulemaking process that includes a public hearing and review by the Joint Committee on Agency Rule Review (JCAR). Pete notes that while there is an opportunity for public comment, significant changes are unlikely unless there are objections at JCAR. He also clarifies that rumors about the removal of the quality incentive penalty for change of operator (CHOP) transactions are false, and the penalty still applies, lasting 6 to 12 months depending on the timing of the transaction.

### **Licensure Rule Changes and Feedback**

Pete discusses upcoming changes to licensure rules, expected to be finalized around July 1st. He encourages members to review the proposed changes and provide feedback. Key changes include increasing administrator hours for facilities with 100 or more beds from 16 to 30 hours, allowing non-licensed administrators to fill in during temporary absences, and expanding reportable incidents to include all elopements and certain financial issues. Pete also mentions that OHCA has submitted deregulatory suggestions to the Office of Management and Budget, including a proposal to eliminate recent changes to Appendix PP, particularly regarding discharge notices.

### **Discharge Notice Requirements and QRP Deadlines**

Pete discusses recent changes to discharge notice requirements in Appendix PP. CMS has removed language specifying that notices are only required for facility-initiated discharges, potentially requiring notices for all discharges, including voluntary ones. The

Ohio Department of Health (ODH) is seeking clarification from CMS on this interpretation. Pete advises facilities to consider their risk tolerance when deciding how to proceed in the interim. He also reminds participants of upcoming deadlines for PVJ submissions and Quality Reporting Program (QRP) vaccination reporting, emphasizing the importance of timely submissions to avoid penalties.

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