Meeting summary for OHCA NF Member Call (07/30/2024)

Quick recap

pete discussed the current status of the mandamus case, the issues related to House Bill 45 reporting, and the delay in releasing new vent rates for skilled nursing facilities. He also addressed changes in the staffing measure calculation for the quality incentive, the Department of Aging's efforts to improve nursing home data, and the recent signing of Senate Bill 144. Lastly, he clarified the requirements of the Quality Improvement Project for the Ohio Department of Aging and provided guidance on the facility assessment.

Next steps

- Pete will review the contracts of Medicaid hospice residents to determine if the private room add-on will be necessary and if any contract changes are required.
- The Quality Improvement Project for the Ohio Department of Aging will continue to be conducted every 2 years, with the option to select from the Department's list or create a project of their own preference, as long as it is workforce-related.

Summary

Senate Bill 1 44 and Member Call Overview

pete and Anthony discussed the Senate Bill 1 44, with pete confirming his intention to address it. pete also welcomed everyone to the member call, despite having fewer team members than usual. He assured everyone of their best efforts to answer questions and provide updates. The discussion was set to begin with an overview of the updates, although the specifics were not detailed in this segment.

Mandamus Case Update and Next Steps

pete provided an update on the current status of the mandamus case. The case was initially dismissed due to technical issues but was refiled with revised affidavits. The state had previously filed a motion for discovery and a case schedule, but no ruling was made on this until the case was dismissed. With the case now refiled, the state has the option to refile their motion, file a different motion, or respond to the refiled petition. pete highlighted the uncertainty surrounding the next steps, as the opposing party has 21 to 30 days to respond after their refiling on Friday, and the court's decision on the case's future is uncertain. He assured that they would keep everyone updated on any developments.

House Bill 45 Reporting Deadline Update

pete discussed the ongoing issues related to House Bill 45 reporting. He clarified that the reporting process ended on July 31st, marking the conclusion of the five different reporting periods. The Office of Budget and Management (OBM) reminded everyone about this deadline and sent out emails to those who needed to fix their reports. pete advised those who couldn't find their summary report to contact Stacy Massey from OBM, who could assist them. He also mentioned a generic email box for those who wanted to verify their reports.

Delay in New Vent Rates and Non-Invasive Vents

pete discussed the delay in releasing new vent rates for skilled nursing facilities and advised against billing for these rates until they are officially published. He also clarified that there were no changes to the non-invasive vents or AVAP, with the state having removed all references to invasive vents in their proposed rule and fact sheet. However, this proposed rule has not been finalized or entered into the formal rulemaking process. pete further explained the Department of Medicaid's current stance on billing for non-invasive vents, stating that it's acceptable to bill for these vents when used as a substitute for CPAP or BIPAP for individuals who require them and these other modalities are insufficient. He also mentioned that some healthcare providers have recently started admitting patients on non-invasive vents and that there had been ongoing discussions about this issue in the past few weeks.

Staffing Measure Changes for Quality Incentive

pete discussed the changes in the staffing measure calculation for the quality incentive, particularly for the upcoming January period. He explained that the data for this period would be based on the July release of 2024, as the August and September data are yet to be released. He also noted that the staffing measure, along with other measures, would be adjusted by Pdpm, and the new cut points for the staffing measure would be applied. pete emphasized that the 25th percentile for the state quality incentive would remain at 28.5 points, despite potential changes in individual scores. He cautioned that providers might still receive points even if they don't have enough qualifying records for any quarter in the 4-quarter period due to the way CMS calculates the average.

Improving Nursing Home Data Quality

pete addressed the Department of Aging's efforts to improve the quality of nursing home data. He highlighted that providers were required to complete a survey, but noted that many had not responded. He emphasized that each facility must complete the survey they receive individually and cannot use the same link for multiple facilities. Additionally, he discussed the communication strategy regarding Senate Bill 144, suggesting that facility managers use the email posted for this purpose to ensure better responses.

Senate Bill 144 Implementation Discussion

pete discussed the recent signing of Senate Bill 144 and its effective date 90 days later, on October 23rd. He explained that the provisions of the bill, such as the use of the

CNA abbreviation and the ability for medication aids to administer additional drugs, would take effect on this date. However, some provisions, like those concerning the CON, would not take effect until March due to a 6-month waiting period. pete also mentioned that some administrative actions would be required, such as revisions to the curriculum requirements for medication aids and approval processes for nurse aid training programs by Odh.

Quality Improvement Project and Medicaid Add-On

pete clarified the requirements of the Quality Improvement Project for the Ohio Department of Aging, stating that while the project must be conducted every two years, the choice of project is now more flexible, allowing for a focus on workforce improvement. Anthony sought clarification on whether the project must still be selected from the Department of Aging's list, to which pete confirmed that while the list is still available, it is no longer mandatory. Dwayne raised a question about the potential impact of a new Medicaid add-on for private rooms, and pete advised him to review his contract to determine if the Medicaid rate would apply. Lastly, pete provided guidance on the facility assessment, advising to use broad language and considerations, rather than specific numbers, when determining staffing.

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