

Meeting summary for OHCA NF Member Call (10/01/2024)

Quick recap

Rachael, pete, and Anthony discussed the timing and protocol for a meeting, with pete sharing updates and emphasizing the importance of communication about significant developments. They also discussed ongoing legal cases, the interpretation of terms in legislation, and the slow progress of private room approvals. Other topics included issues with Medicaid tax letters, aggressive cutting of skilled stays, upcoming Medicare ID changes, and the potential transition to PDPM in Ohio.

Next steps

- Providers to continue performing OSAs if they did not freeze their CMI in October 2023.
 - Providers to be vigilant for notifications about Medicare revalidation through the MAC and involve legal counsel in completing the required information.
 - OHCA to analyze the PDPM data received from Medicaid and develop recommendations for implementation in Ohio.
 - Providers to check eligibility benefits for traditional skilled Medicare residents on October 15th and 16th due to potential Medicare ID number changes.
 - Providers to review the CMS QSO on voting rights and ensure compliance in facilitating residents' voting.
 - Providers experiencing issues with Caroline (Anthem Blue Cross Blue Shield) aggressively cutting skilled stays to send examples to Erin.
 - Providers to monitor correspondence folders in Q&M for franchise fee tax letters, expected by October 1st.
-

Summary

Ohca SNF Member Call Updates

Rachael and iPhone discussed the timing of a meeting, which was confirmed to start at 3 PM. pete then joined the call, mentioning that he had received some data but hadn't had time to analyze it due to being on calls all day. Anthony raised a concern about a bad link he received, which pete clarified was likely an isolated issue. Mandy then welcomed everyone to the Ohca Snf member call, explaining the protocol for those joining via Zoom or phone. pete then took over, mentioning that he would be sharing updates and that he would be joining on his computer to post to the chat. He also mentioned that there were no massive updates to discuss but a few updates from Aaron and himself.

Mandamus Case Update and Rate Discussion

pete discussed the ongoing mandamus case, which had reached a one-month anniversary since their response to the State's response to their refiling of the petition. He noted that the court's average time to decide on such cases is 10 months, which would push the decision to December. pete emphasized that the process is tightly controlled and there's no way to predict when or what the court will do. He assured that any significant updates would be immediately communicated to members. Joe and pete discussed the term 'rate' in the context of a current piece of legislation. pete clarified that 'rate' is used throughout the statute and is a component that forms the overall rate. They also discussed the Supreme Court's understanding of the term 'rate'. The main issue they addressed was the conflation of 'rate' and 'price' by the Department, which pete argued was false and contradicted by the statute.

Private Room Approvals and Progress Discussion

pete discussed the slow progress of private room approvals, noting that only two approvals had been received as of the meeting. He mentioned that these approvals were for providers undergoing renovations, with the understanding that the rest of the rooms would be approved once completed. pete also noted that there had been no communication from the department regarding these approvals, only acknowledging receipt of applications. He encouraged others to share if they had received any approvals, and expressed hope that more approvals would be seen as the week progressed.

Medicaid Tax Issues, Skilled Stays, and Medicare Updates

Erin addressed issues with Medicaid tax letters and aggressive cutting of skilled stays by Anthem. She requested examples for the latter. She informed about upcoming Medicare ID changes to be updated on specific dates. pete discussed continuing OSA for facilities that didn't freeze CMI, upcoming methodology changes, and Medicare's off-cycle revalidation process. He mentioned the potential Medicaid transition to PDPM in Ohio from July 2025 and ongoing national conversations.

CMS Data Refresh and Voting Rights Discussion

pete discussed the upcoming CMS data refresh, which is expected to include two quarters of unfrozen data and two quarters of frozen data for the 3rd and 4th quarters of 2024, unless changes are made in the budget bill. He mentioned that CMS will not calculate a 4-quarter average using frozen data. pete also highlighted a recent QSO on voting rights, emphasizing that facilities must facilitate residents' ability to vote. Joe asked about the budgeted amount for private rooms, and pete clarified that \$160 million was budgeted for the current fiscal year, while any unused funds from the previous fiscal year's appropriation cannot be carried over to the next budget period.