

Meeting summary for OHCA NF Member Call (11/12/2024)

Quick recap

Pete and Diane discussed the off-cycle revalidations for Medicare and the ongoing mandamus case, emphasizing the need for members to actively work on the revalidation process and the uncertainty of the case's outcome. They also discussed the status of private room applications, the potential challenge of maintaining the current level of private rooms in the next budget, and the timeline for filing evidence in the mandamus case. Lastly, Debbie provided an update on the Department of Labor overtime rule lawsuit, the potential end of COVID-19 telehealth waivers, and the continued suspension of frequency limitations on nursing facility visits.

Next steps

- Members to continue working on the 855A revalidation process, not delaying until April 1st due to the complexity and time required.
- Members who have not received a decision on their private room applications to contact the NF Private Rooms email box or notify OHCA.
- OHCA to consider surveying members about private room utilization for Medicaid residents after the December 18th implementation to inform future budget planning.

Summary

Off-Cycle Revalidations and Office Hours

In the meeting, Pete welcomed everyone to the Snp Member Call and informed that the call would not be held next week, with an announcement to be made over the weekend. Diane then took over to discuss the off-cycle revalidations for Medicare. She explained that all skilled nursing facilities would receive a notice in October, November, or December, but the revalidation deadline has been postponed to May 1st. Diane also mentioned that new operators waiting for initial certification or revalidation/reactivation would also have until May 1st to complete the new 855a. She encouraged everyone to actively work on the revalidation process, as it would take time and involve gathering ownership information from outside entities. Diane also announced that ACA would be hosting a series of office hour webinars to provide the latest information and answer questions. The first webinar is scheduled for November 15th, with subsequent ones on December 6th, January 10th, and January 31st.

Mandamus Case Implications and Payments

Pete discussed the ongoing mandamus case and its implications. He clarified that despite the Supreme Court's preliminary ruling in their favor, the outcome is not guaranteed and it's premature to discuss payment details. He suggested that if they win,

the state might not reprocess all claims but instead calculate a lump sum payment for each provider based on their Medicaid days and rate differences. Pete also mentioned the possibility of verifying the state's calculations before issuing payments. He cautioned against premature celebrations, emphasizing that the case is not yet decided and the process could take time.

Private Room Applications and Budget

Pete discussed the status of private room applications and the utilization of the \$19 million remaining in the cap for these applications. He emphasized the need for members to inform the department about any pending applications, especially those relying on Medicaid billing. He also mentioned the potential challenge of maintaining the current level of private rooms in the next budget if utilization exceeds the 50% assumption. Additionally, the team clarified the timeline for filing evidence in the mandamus case, with the team being the first to file.

Overtime Rule Lawsuit Update and More

Debbie provided an update on the Department of Labor overtime rule lawsuit, indicating that the judge seemed to lean towards the government's position that the Department of Labor may have overstepped its bounds. The decision is expected before January 1st, although the exact timing is uncertain. She also mentioned that the new administration might not pursue the FTC's appeal against non-compete clauses. JAbraham brought up a Venice update regarding the NLRB's stay or pay provisions, to which Debbie responded that no cases have been seen yet. Erin then discussed the finalization of the Medicare Part B physician fee schedule rule, the potential end of COVID-19 telehealth waivers, and the continued suspension of frequency limitations on nursing facility visits.

AI-generated content may be inaccurate or misleading. Always check for accuracy.