

The Academy Weekly

News & Information for LTC Providers



The Academy of Senior Health Sciences, Inc.

www.seniorhealthsciences.org

Week of 17 September 2023

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Ohio News

ODM provides more guidance on CMI freeze

The Ohio Department of Medicaid provided more information regarding the decision for SNF providers to choose to freeze their CMI score at the March 2023 level or continue using the RUGs system and corresponding Optional State Assessment.

CHOPs and CMI choice: The entering provider has to keep the exiting provider's choice, since statute mandates decisions are made by October 1, 2023.

PDPM or OSA for PA1/2: During this biennium, those providers who have opted to continue with RUGs will use the RUGs information to determine PA1-2s. They will not be required to use both PDPM and RUGs criteria to identify the PA1-2s. Those providers who opt to freeze their case mix must rely on PDPM results to

identify PA1-2s.

Exception reviews and "frozen" providers: Providers who have frozen their case mix as of March 2023 will not be subject to Exception Reviews during this biennium.

Providers are also reminded that the September 1 guidance regarding billing is correct: "If a new or existing resident groups into the PDPM PA1 or PA2 group, then the flat rate must be billed for the time that MDS is current, whether or not the facility case mix is frozen. If a new or existing resident groups into a higher acuity category while the facility case mix score is frozen, the rate will be the frozen rate. The freeze relates to the facility case mix score, not the case mix score of the individual residents."

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CMI freeze decision deadline is October 1

The Ohio Department of Medicaid sent out a reminder to providers regarding the choice of using the Optional State Assessment and RUGs or freezing their case-mix score at the March 2023 level for rate setting. It also includes important instruction information.

"Please take a moment to complete the ODM Nursing Facility Case Mix Survey. Instructions sent on 9/1/23 can be found below. **Reminder, this survey must be completed by October 1, 2023, for your selection to be properly recorded.** Submit any questions to MDSCaseMix@medicaid.ohio.gov. ODM sincerely thanks you for your participation in this process.

This online survey asking nursing facilities to select whether to use their quarterly Resource Utilization Groups (RUGs) scores or freeze their case mix score to determine their direct care rate is now available.

Completed surveys must be submitted to the Ohio Department of Medicaid (ODM) by October 1, 2023. Failure to respond to the survey will result in the provider defaulting to maintaining the current process of utilizing quarterly RUGs scores, which will require completion of the Optional State Assessment (OSA). Providers should select how they would like to calculate their direct care rates by deciding if they would like to:

- Continue to have quarterly RUGs scores calculated, which will require completion of OSAs, OR

- Freeze the case mix score for the next two years by using the quarterly case mix score from March 2023, and thereby eliminating the need for submission of OSAs.

Instructions:

- Click [HERE](#) to open the survey.
- Enter your Medicaid Provider ID.
- Enter the name and email address of the person completing the survey.
- Select one of the two drop-down options on the survey. As described in previous communications and above, the choices are:
 - Option 1- Continue to have quarterly RUGs scores calculated, which will require completion of OSAs, OR
 - Option 2- Freeze the case mix score for the next two years by using the quarterly case mix score from March 2023, and thereby eliminating the need for submission of OSAs.
- Select “Submit.”.
- The person completing the form will receive a confirmation email.

Please note that once a valid Medicaid Provider ID is entered and “Next” is selected, that Provider ID is locked into that survey response until “Submit” is selected. If you are completing the survey for more than one NF, you must close and relaunch a new survey for each Medicaid Provider ID response. Please be sure to confirm the Medicaid Provider ID is correct before selecting “Next”. If you have not hit “Submit”, simply using the “Back” button will not clear the first Medicaid Provider ID entered. To ensure accurate responses, please begin a new survey for each NF." ([Back to top.](#))

HCBS waiver services proposed rule changes webinar

The Ohio Department of Medicaid is proposing significant changes to Appendix K and related rules. Appendix K are the Medicaid waiver services. The changes relate to the flexibilities granted states during the pandemic and the continued use of some of those flexibilities. ODM posted slides from the September 21, 2023 webinar *Appendix K Stakeholder Update: Rule 5160-44-32 Home and Community Based Medicaid Waiver Program Provider and Direct Care Worker Relationships* on the [ODM resuming routine Medicaid eligibility operations webpage](#) under “Appendix K Resources” and [here](#). As a reminder, this webinar addressed the Ohio Administrative Code Rule 5160-44-32, which has evolved significantly from the initial rough draft of the rule as a direct result of feedback received through stakeholder engagement

activities. At the webinar, ODM provided a broad overview of the feedback received and changes made to the proposed rule as a result of this feedback. The most recent draft of the proposed rule may also be found on the [ODM resuming routine Medicaid eligibility operations webpage](#). ODM appreciates your continued engagement and again thank you for your thoughtful feedback, which was invaluable to this rule development process. If you have any further questions, please direct them to AppendixKQuestions@medicaid.ohio.gov." ([Back to top](#).)



National News

CMS issues memo on QMs during MDS change

During the last national stakeholder call, CMS noted that the removal of Section G on the MDS would impact four quality measures (QMs) and the adjusted staffing measure. CMS has issued a QSO Memo that addresses that issue. ([QSO-23-21-NH](#)).

For the staffing measure, ***beginning in April 2024***, CMS will freeze (i.e., hold constant) the staffing measures for three months while we make this transition. ***In July 2024, CMS will post nursing home staffing measures based on the new PDPM methodology.*** To minimize the potential disruption associated with the implementation of the new case-mix adjustment methodology, CMS will revise the staffing rating thresholds to maintain the same overall distribution of points for affected staffing measures.

For the QMs (Percentage of Residents Who Made Improvements in Function (short stay); Percent of Residents Whose Need for Help with Activities of Daily Living Has Increased (long-stay); Percent of Residents Whose Ability to Move Independently Worsened (long stay); Percent of High-Risk Residents with Pressure Ulcers (long stay)), ***starting in April 2024***, CMS will freeze (hold constant) these four measures on Nursing Home Care Compare. ***In October 2024, CMS will replace the short-stay functionality QM*** with the new cross-setting functionality QM, which is used in the SNF Quality Reporting Program (QRP). ***The remaining three measures will continue to be frozen until January 2025*** while the data for the equivalent measures are collected.

Please see the memo for more information. (Back to top.)

NHSN webinars regarding up to date, reporting

From the NHSN Vaccination Team: We will be hosting multiple webinars to review important changes to the surveillance definition of Up to Date with COVID-19 vaccines for long-term care facilities reporting vaccination data and RIFC Pathway data through the NHSN Vaccination and COVID-19 Modules.

Key Points:

- FDA approved updated 2023-2024 COVID-19 vaccines for this fall/winter season. The bivalent vaccines are no longer authorized as of 9/12/2023.
- CDC recommends everyone aged 6 months and older should receive the 2023-2024 updated COVID-19 vaccine to protect against serious illness from COVID-19 and to remain up to date.
- **Under the new recommendations, most individuals will not be up to date with COVID-19 vaccines until they receive the 2023-2024 updated COVID-19 vaccine.**
- The new definition of up to date with COVID-19 vaccines will apply for NHSN surveillance beginning the week of **September 25, 2023 – October 1, 2023** (the first week of reporting Quarter 4 2023).
- The new definition applies to both the **NHSN Weekly HCP and Resident Vaccination Forms** and the **NHSN COVID-19 Surveillance Pathways (RIFC Form)**.

Webinar Dates and Registration:

Topic: Up to Date Vaccination Status: Surveillance Definition Change for Long Term Care Facilities (Replay)

When: September 25, 2023, 1:00PM Eastern Time (US and Canada)

Register in advance for this webinar:

https://cdc.zoomgov.com/webinar/register/WN_JGOOXuiSAW1VF2zS-baw

Topic: Up to Date Vaccination Status: Surveillance Definition Change for Long Term Care Facilities (Replay)

When: October 2, 2023, 1:00PM Eastern Time (US and Canada)

Register in advance for this webinar:

https://cdc.zoomgov.com/webinar/register/WN_TDnotOroSbiPut3-2-5RtQ

Registration Information for Upcoming Training Webinars

Please register in advance and plan to attend the initial session and/or the replay to

learn more about the new updates. After registering, you will receive a confirmation email containing information about joining the webinar. The initial webinar and the webinar replays will cover the same information; therefore, you may only need to attend once but may attend more than one.

The Registration information seen above is also available on [LTCF | Weekly HCP & Resident COVID-19 Vaccination | NHSN | CDC](#)

For any questions, please send an e-mail to the NHSN Helpdesk at NHSN@cdc.gov with “COVID-19 Vaccination” in the subject line of the e-mail, along with your facility type.

We appreciate your efforts with reporting these data through NHSN. ([Back to top.](#))

CMS created cue cards for interview sections

The Centers for Medicare & Medicaid Services (CMS) is offering cue cards to assist providers in conducting the **Brief Interview for Mental Status (BIMS)** in writing, the **Resident Mood Interview (PHQ-2 to 9)**, the **Pain Assessment Interview**, and the **Interview for Daily and Activity Preferences**, as referenced in the MDS 3.0 RAI v1.18.11 coding guidance. This resource is intended to be utilized as a supplemental communication tool that provides a visual reference for residents. More detailed instructions regarding the use of cue cards and the administration of the BIMS in writing can be found in the MDS 3.0 RAI v1.18.11 Manual. The cue cards can be viewed or printed and are available in the **Downloads** section of the [SNF QRP Training](#) page. If you have questions about accessing the resources or feedback regarding the trainings, please email the [PAC Training Mailbox](#). Content-related questions should be submitted to the [SNF QRP Help Desk](#). ([Back to top.](#))

MLN Connects Newsletter

News

- [CMS Announces Resources and Flexibilities to Assist with the Public Health Emergency in the State of Georgia](#)
- [Organ Transplantation Affinity Group: Strengthening Accountability, Equity, And Performance](#)
- [Psychotherapy for Crisis: Medicare Pays for Services](#)
- [Flu Shot: Encourage Preferred Vaccines for Patients 65+](#)
- [Help Reduce Health Gaps for Hispanic or Latino Patients](#)

MLN Matters® Articles

- [Limitation on Recoupment of Overpayments](#)
- [Inpatient & Long-Term Care Hospital Prospective Payment System: FY 2024 Changes](#)

[Information for Patients](#)

- [HHS Takes the Most Significant Action in a Decade to Make Care for Older Adults & People with Disabilities More Affordable and Accessible](#)

[To view MLN Connects online, click here.](#)

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ODDS AND ENDS

CMS Publishes Study on the Prevalence of Oral Health Problems Among Nursing Home Residents

September 12: In a paper titled [Oral Health Among Medicare Beneficiaries in Nursing Homes](#), published in JAMA Network OPEN, CMS analyzed oral health problems among Medicare beneficiaries in nursing homes, finding considerable prevalence and disparities across various demographic and clinical factors, and highlighting the need for targeted interventions that address oral health among vulnerable nursing home residents. Improved access to oral health services and coverage is a key strategic initiative CMS is working on to help people achieve the best health outcomes possible.

Vaccine decision making tool

The new monovalent COVID-19 vaccines authorized by the FDA and recommended by the CDC for all people aged 5 and over are now available. Last week, the National Adult and Influenza Immunization Summit released a new resource: [**Fall 2023 Respiratory Season Vaccination Decision**](#)

NOTABLE DATES OR EVENTS

[ODM CMI freeze survey](#)
Closes 1 October 2023

[MDS RAI 1.18.11](#)
Effective 1 October 2023

[Click here for QIN-QIO education calendar](#)

[Click here for IPRO Learn online learning](#)

[Click here for CMS QSEP Portal](#)

[Click here to view CGS Part A training events](#)

[Click here to view CGS Part B training events](#)

Making for People 60 and Over that provides vaccine
coadministration strategies based on various scenarios.

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