

NF General Updates



Presentation to Utah Healthcare Association Spring Conference

April 12, 2023

ICF/IID Updates

Click to add subtitle

- Rates
- QII(1)
- QII(2)(i, ii and iii)

ICF/IID Rates

- Rate increases for 7/1/2023
 - Facilities with ≤ 16 beds will get \$61.95 added to their base
 - Facilities with > 16 beds will get \$37.17 added to their base
 - FRV will then amend overall rates
 - New Medically Complex Add-on rate (pending CMS approval) of \$20 per day

ICF/IID QII

- QII(1) Qualifications (\$200,000 pool):
 - Completed application meeting all the requirements
- QII(2)(i) – (*Bed Dignity Program will not exist in SFY 2024+*)
- QII(2)(ii) – Ongoing funding of \$667,700 (Pending CMS approval):
 - Choose 2 of 5 programs to complete
 - Proposal for Quarter 1 and Execution Applications for Quarters 2-4.

NF Funding

Click to add subtitle

- Funding
 - Assessment
 - MDS for UPL
 - MDS for Case Mix
-

Funding

- NF Funding from legislature
 - \$5 million General Funds appropriated for rate increase
 - \$14,700,000 total funds for rates to cover wage increases
 - *How to Measure Success? "They will be required to report back to DHHS and the legislature on how they increased staff wages."*

Funding

- NF Funding
 - Assessment Increase of \$0
 - \$0 Total Funds for rates
 - Increase based upon requests to stay near the 6% assessment limit (using the audited SFY 21 FCP data, we are already very, very close to the 6% cap.)

Funding

- NF Assessment rate update to UAC R414-401
 - No change in assessment rate for NFs or ICF/IIDs
 - Monthly assessment reporting
 - Be sure to use the fillable PDF form created last year
 - <https://medicaid.utah.gov/stplan/longtermcarebar/>

Assessment Timing

- UCA 26-35a-104(3)
Each nursing care facility shall, on or before the end of the month next succeeding each calendar monthly period, file with the department:
 - (a) a report which includes:
 - (i) the total number of patient days of care the facility provided to non-Medicare patients during the preceding month;
 - (ii) the total gross revenue the facility earned as compensation for services provided to patients during the preceding month; and
 - (iii) any other information required by the department; and
 - (b) a return for the monthly period, and shall remit with the return the assessment required by this chapter to be paid for the period covered by the return.
- **Two** items are due by the end of the month...

Utah State Plan Attachment 4.19-D Updates

- Updates to Case-Mix Methodology for rates (moving to PDPM)
- Adding numbering to pages
- Updating terminology/language (i.e. ICF/MR to ICF/IID, UDOH to DHHS, etc.)
- Remove Section 926 Under-Served Areas
- Update Sections 930-931 (Behaviorally Challenging Patient and Specialized Rehabilitation Services Add-on) to include updated language and combine sections

MDS for Case Mix

- Working to update State Plan for case mix
 - Needed to identify means to get away from RUGs for case mix given they're going away (RUGs won't be available after October 1, 2023 without OSA)
 - Use the PDPM value, 100th day rate, Salt Lake City wage area as weight

Optional State Assessment (OSA)

- All facilities will be required to submit an OSA beginning July 1, 2023 (even non-UPL facilities)
- This is required for us to gather RUG data to calculate a UPL
- This should be familiar to many MDS Coordinators
- Contact Erin Lloyd with questions/concerns regarding OSA submissions

Quality Improvement Incentive (QII) Programs

Click to add subtitle

- QII(1)
- QII(2)
- QII(3)

NF QII(1)

- \$1,000,000 pool – available to NF's who submit:
 - Meaningful QI plan that includes involvement of residents and family (50%)
 - 4 quarterly customer satisfaction surveys
 - A plan for culture change (25%)
 - An employee satisfaction program (25%)

*immediate jeopardy violation = do not qualify

*F, H, I, J, K, or L = 50% of qualifying amount

NF QII(1)

- Example

Question	12-Month Average	National Average	Difference
Overall Satisfaction	3.54	4.06	-0.52
Nursing Care	3.68	4.25	-0.57
Dining Service	3.13	3.96	-0.84
Quality of Food	2.92	3.57	-0.66
Cleanliness	4.56	4.39	0.16
Individual Needs	3.91	4.20	-0.29
Laundry Service	3.50	4.11	-0.61
Communication	3.89	4.14	-0.25
Response to Problems	4.11	4.15	-0.04
Dignity and Respect	4.32	4.50	-0.18
Recommend to Others	3.95	4.20	-0.24
Activities	3.00	4.24	-1.24
Professional Therapy	4.75	4.44	0.31
Admission Process	3.60	4.49	-0.89
Safety and Security	4.44	4.55	-0.10
Combined Average	3.92	4.23	-0.31

NF QII(2)

- \$4,275,900 pool – available to NF's who submit:
 - Complete application form
 - Invoice
 - Check/Proof of Payment
 - If seeking reimbursement for more than one item on a single application, please attach a spreadsheet detailing each item

NF QII(2)

- To reduce confusion (especially with turnover), we have implemented the following information in an email following an application:
 - Current application reimbursement amount
 - Previously approved amounts
 - Remaining amount

	Current Application	Verified Amount	Previously Approved	Eligible Amount	Submitted Payment
Nurse Call	\$0.00		\$0.00	\$22,678.00	\$0.00
Patient Lifts	\$0.00		\$2,147.80	\$5,220.00	\$0.00
Bathing	\$0.00		\$2,132.30	\$6,380.00	\$0.00
Patient Life Enhancement	\$0.00		\$12,115.26	\$34,249.58	\$0.00
Educating Staff	\$0.00		\$0.00	\$6,380.00	\$0.00
Van	\$0.00		\$0.00	\$18,560.00	\$0.00
Clinical Software Hardwar	\$13,046.58	\$13,046.58	\$0.00	\$34,249.58	\$13,046.58
HVAC	\$0.00		\$0.00	\$9,396.00	\$0.00
Dining Enhancement	\$0.00		\$0.00	\$11,600.00	\$0.00
Outcome Proven Awards	\$0.00		\$0.00	\$5,800.00	\$0.00
Worker Immunizations	\$0.00		\$0.00	\$870.00	\$0.00
Patient Dignity	\$0.00		\$0.00	\$5,800.00	\$0.00
Covid Vaccination	\$0.00		\$0.00	\$2,900.00	\$0.00
	\$13,046.58	\$13,046.58	\$16,395.36	\$34,249.58	\$13,046.58

NF QII(2)

- SFY 2023 YTD (4/11/2022):
 - QII(2) monies paid - **\$2,071,059.48**
 - Number of NF's achieving max payout: **26**
 - Number of applications received/rejected (7/152) of **4.6%** rejection rate

NF QII(2)

- SFY 2023 YTD
 - Turn Around Time (submission date to paid date)
 - Q1: 29.9 days (8 applications)
 - Q2: 12.3 days (23 applications)
 - Q3: 6.0 days (121 applications)
 - If it has been more than 30 days since you submitted an application and no payment has been made, please reach out and inquire.

NF QII(2)

- Be smart with your QII(2) reimbursement
 - It is more effective to submit one or two “big-ticket” items compared to twenty “small-ticket” items (knowing the rejection rate)?
 - Last year, we had one facility submit 13 separate applications totaling 60% of eligible amount.
 - This year we had one facility submit a single application maximizing their eligible amount.

NF QII(3)

- Unused QII(2) monies fund this QII
- Qualifications:
 - QII(1) – 100%
 - QII(2) – at least one approved
 - Resident choice program
 - Requires specific evidence of:
 - Awake time
 - Meal time
 - Bathing time

See: <https://medicaid.utah.gov/stplan/longtermcarenfqi/>

NF QII(3)

- Non-qualifying Examples:

Meal Times

Meals are served in the dining room three times each day. Breakfast is served at 7:30 am, lunch at 12:20 pm, and dinner at 5:30 pm. Snacks and sandwiches are available 24 hours at each nursing station. And the kitchen is staffed from 6:00 am to 7:00 pm daily, to meet special requests.

Would you like to be awake and brought into the dining room for breakfast by 7:30 am?

YES

NO

NF QII(3)

- Non-qualifying Examples:

Long term or short term?:	
Activity Preferences (Interview /family, Review records, Observe patient to collect data)	
(F0500/F0800) While patient is in this facility how important is it to: (If F0800 check boxes)	
choose what clothes you wear	Mo
take care of your personal belongings or things	
choose between a shower, bed bath, or sponge bath	
have snacks available between meals	Coc
choose your own bedtime	BIN
have your family/close friend involved in discussion/care	
be able to use the phone in private	
have a place to lock your things to keep them safe	Cor
have books, newspapers, and magazines to read:	
listen to music of interest:	

***Missing bathing time and meal time options

NF QII(3)

- Good Example:

"My Way" Care Preferences

Sleep/wake cycle:

Wake up:

Go to bed:

Do you like to nap during the day:

Self-care routines/ Preferred grooming habits:

Bathing/when do you prefer your bath or shower (please get a specific shift/time):

Dressing/Undressing:

Eating Habits/when do you prefer to eat your meal:

Breakfast:

Lunch:

Dinner:

NF NSGO UPL Quality Improvement Program

Click to add subtitle

- R414-516

New UPL QI Program

- Metrics based QI Program that began SFY 2023
- Each facility achieve 6 of 9 metrics
 - Better than industry average, or
 - Improve in metric compared to previous year

New UPL QI Program

- Metrics based QI Program that began SFY 2023

9 Metrics used for R414-516		
CASPER (7 metrics = above national average or improve)	Nursing Hours (1 metric = above national average or improve)	Survey (1 metric = p/f no deficiency at level indicated)
UTI	Total Adjusted Nursing Hours	No F, H, I, J, K, or L
pressure ulcer		
falls with injury		
antipsychotic med		
lose too much weight		
seasonal influenza		
ability to move worsened		

New UPL QI Program

- In the past few months, I have had several facilities and management companies reach out to me not understanding the program or what they “need to submit” for compliance
- There is no compliance form. We simply pull down the data when CMS makes it available and analyze for compliance

New UPL QI Program

- Data was recently pulled and analyzed for SFY 2022
- 21 of 71 facilities would have been “non-compliant” if the program would have been in effect.
- 8 facilities would have been removed from the UPL contract based on SFY 2022 data (non-compliant 2 consecutive years).
- Please watch those 9 metrics for each facility. Medicaid does not get real time data so only you have access to what you report for those metrics.

Various Updates and Reminders

Click to add subtitle



MDS Oddities

- Reports being sent periodically
- People are doing a good job of responding
 - Work with your management/owner MDS leadership
- If appropriate, payments may be withheld (R414-1-31)

Case Mix Reports

- Reports historically have only been sent to administrators for each facility
- We will now send case mix reports to the administrator and MDS contact to each facility
 - If you want to add a second MDS contact (i.e. regional or corporate MDS coordinator), email, by facility, the person's name, email, and phone number to nf_rates@utah.gov
- The Case Mix report using PDPM (starting in May) will be exactly the same but replacing the RUG weight with the PDPM weight
- If a request is made and no response is provided within 2 weeks, please contact the administrator or secondary contact
 - If it was not received, contact Ed or Trent

Contacts

- We, in Financial Services, have a contacts DB
- Quarterly, emails are sent to the contacts asking for updates
- Apparently, those emails are not always replied to with pertinent updates
- Suggest a key person be responsible to reply with updates
- Suggest generic accounts, e.g., admin@facilityname.com
- When key information is emailed out, failure to have alerted us to contact updates is the providers' responsibility
- Please, please, please respond with contact updates (you don't need to wait, you could proactively send updates too)

Reminders

- Any reminders from staff about important deadlines are bonus
- Providers should determine best means to identify and meet deadlines
- Failure to submit (whatever) by the deadline because a reminder was not sent isn't compelling
- If you see a rate or payment that doesn't make sense, reach out immediately
 - We cannot go back years or even months to modify discrepancies with rates

Thank You Questions?

Trent Brown, MOT, OTR/L, ATP, CFPS, CGCP, BCG

Reimbursement Unit Manager

SNF Quality Improvement Program Manager

trentbrown@utah.gov