

SFY 21-22 Nursing Home Provider Fee

7/21/21

Presented by: Jeff Wittreich

Provider Fee

- \$2.9 million decrease in total fee
 - Fee decrease from \$59.3M to \$56.4M

Item	SFY 20-21	SFY 21-22	\$ Change	% Change
Provider Fee	\$ 59,300,000	\$ 56,400,000	\$(2,900,000)	-4.9%

Provider Fee

*SFY 21-22 Per Diem Fee = (SFY 20-21 Per Diem Fee * **Inflation**) * **Non-Medicare days***

- **\$4.3 million decrease** due to Non-Medicare days
 - Decrease from 5,200 to 4,750, a 9% decrease
- **\$1.4 million increase** due to 2.57% inflation factor

Supplemental Payments

*Total Payment = Total Provider Fee * 50% FMAP*

- \$5.6 million decrease in total payment
 - Payment decrease from \$117.9M to \$112.3M

Item	SFY 20-21	SFY 21-22	Difference
Supplemental Payments	\$ 117,880,000	\$ 112,310,000	\$ (5,570,000)

Medicaid Utilization

$$\text{Payment} = \text{Provider Fee} * \text{Medicaid Percent}$$

- \$1.6 million decrease
 - Due to provider fee decrease
 - Average Medicaid Percent increase 74% to 75%

Item	SFY 20-21	SFY 21-22	\$ Change	% Change
Medicaid Utilization	\$ 46,130,000	\$ 44,510,000	\$ (1,620,000)	-3.5%

Acuity

*Payment = (SFY 20-21 Acuity Rate - 7/1/20 Core Rate) * Days Applied to Acuity Rate*

- \$1.0 million increase
 - Large 2nd acuity rate increase due to COVID-19 pandemic

Item	SFY 20-21	SFY 21-22	\$ Change	% Change
Acuity	\$ 4,060,000	\$ 5,090,000	\$ 1,030,000	25.5%

P4P

*Payment = CY 2020 Medicaid Days * Per-Diem*

P4P Score	<i>Per-Diem</i>	SFY 20-21	SFY 21-22
0-20	\$ -	92	98
21-45	\$ 1	17	0
46-60	\$ 2	30	16
61-79	\$ 3	54	56
80-100	\$ 4	37	57

Item	SFY 20-21	SFY 21-22	\$ Change	% Change
P4P	\$ 9,030,000	\$ 9,470,000	\$ 440,000	5%

PASRR Resident

$$\text{Payment} = (\text{PASRR Resident Count} * 365 \text{ Days}) \\ * \text{PASRR Per Diem Rate}$$

- \$750 thousand decrease
 - Due to PASRR resident count decrease
 - Decrease from 2,240 to 1,940, a 20% decrease

Item	SFY 20-21	SFY 21-22	\$ Change	% Change
PASRR Resident	\$ 4,210,000	\$ 3,460,000	\$ (750,000)	-17.9%

CPS

$$\text{Payment} = \text{CPS Days} * \text{Dollar Add-On}$$

- \$10 thousand decrease
 - CPS resident count decrease from 4,600 to 3,600
 - Dollar Add-on increase from \$1.53 to \$1.61

Item	SFY 20-21	SFY 21-22	\$ Change	% Change
CPS	\$ 660,000	\$ 650,000	\$ (10,000)	-1%

Core Component

$$\text{Payment} = ((7/1/21 \text{ Core Rate} - 7/1/21 \text{ iC Rate}) * \text{CY 2020 Medicaid Days}) * \% \text{ Funded}$$

- \$4.5 million decrease
 - % Funded decrease from 59.25% to 45.88%

Item	SFY 20-21	SFY 21-22	\$ Change	% Change
Core Component	\$51,800,000	\$ 47,300,000	\$ (4,500,000)	-8.7%

Net Benefit

Item	SFY 20-21	SFY 21-22	Difference
Positive Net Benefit <i>(for all facilities)</i>	184	187	3
Zero Net Benefit <i>(fee exempt non-Medicaid)</i>	23	24	1
Negative Net Benefit <i>(for all facilities)</i>	20	16	(4)
Positive Net Benefit <i>(for Medicaid facilities)</i>	184	187	3
Negative Net Benefit <i>(for Medicaid facilities)</i>	2	0	(2)

UPL

- Limit on Medicaid payment to nursing homes
 - UPL Gap = Medicaid Cost - Medicaid Payment

Item	SFY 21-22
UPL	\$ 1,120,000,000
iC Payments (projected)	\$ (876,000,000)
Supplemental Payments	\$ (112,000,000)
UPL Gap	\$ 132,000,000
UPL Gap Parentage	88.2%

NPR

- Limit on Fees assessed on nursing homes
- Net Patient Revenue

Item	SFY 20-21	SFY 21-22
NPR	\$ 1,200,000,000	\$ 1,140,000,000
Provider Fee	\$ 59,400,000	\$ 56,400,000
Fee % of NPR	4.96%	4.95%

Increase Fee (?)

- SFY 21-22 provider fee at 4.95% NPR
- \$9.73 million net benefit increase if fee increase to 5.75% NPR

Item	4.95% NPR	5.75% NPR	\$ Change
Provider Fee	\$ 56,400,000	\$ 65,500,000	\$ 9,100,000
Supplemental Payment	\$ 112,300,000	\$ 130,200,000	\$ 17,900,000
Net Benefit	\$ 55,900,000	\$ 64,700,000	\$ 8,800,000

Increase Fee (?)

- \$7.24 million Utilization payment increase due to \$9.18 million fee increase
- \$10.65 million Core payment increase due to allowable percent funded increase to 56.20%

Item	4.95% NPR	5.75% NPR	\$ Change
Utilization	\$ 44,510,000	\$ 51,750,000	\$ 7,240,000
Core	\$ 47,350,000	\$ 58,000,000	\$ 10,650,000

Increase Fee (?)

Net Benefit						
Item	\$ of SNFs	4.95% NPR	5.75% NPR	\$ Change	% Change	\$ change (per SNF)
Large MD SNF	79	\$ 33.1M	\$ 38.2M	\$ 5.1M	15.5%	\$ 64,000
Small MD SNF	57	\$ 11.7M	\$ 13.5M	\$ 1.8M	15.5%	\$ 32,000
Fee-Exempt MD SNF	52	\$ 12.1M	\$ 14.1M	\$ 2.0M	16.0%	\$ 39,000
Non-MD SNF	17	\$ (1M)	\$ (1.2M)	\$ (200k)	-16.0%	\$ (9,000)
Fee-Exempt non-MD SNF	22	\$ -	\$ -	\$ -	0.00%	0
Total	205	\$ 55.9M	\$ 64.6M	\$ 8.7	15.50%	\$ 38,000

Fee Increase (?)

- Have we been close to 5.75% NPR?
- Also limited to UPL

Item	17-18	18-19	19-20	20-21	21-22
NPR	5.50%	4.90%	4.90%	4.95%	4.95%
UPL	97.25%	95.4%	95.3%	92.3%	88.2%

Fee Increase (?)

- What does this all mean?
 - 1) Can keep current methodology
 - 2) Increase per-diem fee
 - a) *statute change*
 - 3) Revise methodology to keep non-MD at current per-diem fee
 - a) *Statute change*
 - b) *New B1/B2 waiver*



Questions?

Thank you!