

Nursing Facility Stakeholder Meeting

June 21, 2023

Agenda

- Announcement, Introductions
- NF Transitions Presentation
- P4P Updates
- HB23-1228 Bill Signed - Updates
- Sustainability/Innovation Plans
- PDPM Transition plan
- RUG/PDPM Data
- PETI/PNA Rule Update
- HB 22-1333 Cost Report Offset Feedback
- SFY 23-24 iC Reimbursement Rate
- SFY 23-24 Provider Fee & Supplemental Payment
- Public Comment

Group In Reach

Community Programs & Supports Informational

Presented by: Chanelle Pugh

Background

The 2022 DOJ findings letter, recommended the state of Colorado make improvements to the Home and Community Based System by:

1. Providing Information to prevent Unnecessary institutionalization
2. Providing Effective transition Services
3. Expanding Access to Colorado's Community-Based Service System

Purpose

The purpose of Group In-Reach is to educate individuals living in a Skilled Nursing Facility and their natural supports about community-based living options, waivers and supports in a group setting.

Progress to Date

- DOJ negotiation are still in process with hopes of reaching an agreement this summer
- Last fall stakeholders were informed on BA-07 budget request
 - proactively addresses the DOJ findings and recommendations
 - Included in that request are a number of policy changes that build upon the current structure
- Group and Individual In-Reach to be conducted bi-annually
 - Individual In-Reach is not expected to be implemented until 2024

Implementation

- Individual In-Reach will coincide with the current CMA timelines
- Over the next 12-16 months HCPF Internal team will complete Group In-Reach
 - At conclusion we will seek feedback on the process for continuance and improvements

Group In-Reach Meeting Format

- In Person group setting
- Held in the Skilled Nursing Facilities
- Visual presentation (where available) with handouts
- After presentation provide support with making referrals

Information to be Shared

- Qualifications for state programs
- Services and Supports
- Waiver Program
- Transition Services process
- Regional Contacts

Skilled Nursing Facility Specific Details

- In-Reach team will reach out to each contact person at SNF to schedule
- We will need space to gather all individuals interested in learning more about their options
- Support to inform members of the scheduled meetings
- We will bring a poster to hang with information (Best Practices)
- Please fill out and share the survey to help identify how best to work with your organization

Questions?



Contact Info

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In-Reach Unit Supervisor
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Thank you!

Open Comment

Pay for Performance

- Applications scored appeals finalized
- 17-1 Hospitalization data unavailable:

The Department has decided to award all homes who applied for this measure and who met all of the minimum requirements for 17-2 and 17-3 the full 3 points for the measure. Scores have been updated in the portal.



HB 23-1228 Updates

- Bill signed May 30th
- Initial MSB regulation adopted June 9th
 - 10% increase
 - PASRR and SBS increase
 - Removed references to RUG
- CMS SPA submitted- they have until 8/15 to respond
- Utilization and oversight regulations to follow

HB 23-1228-Audited Financials

- HB 23-1228 contained a requirement for financial oversight:
 - (I) ANNUAL AUDITED FINANCIAL STATEMENTS, PREPARED BY AN INDEPENDENT ACCOUNTANT, FOR A FACILITY, MANAGEMENT COMPANY, AND ANY RELATED PARTY CONDUCTING BUSINESS WITH A MEDICAID-CERTIFIED NURSING FACILITY, INCLUDING AUDITED AND CONSOLIDATED FINANCIAL STATEMENTS FOR ANY PARENT COMPANY THAT ACCEPTS, OR WHOSE SUBSIDIARIES ACCEPT, MEDICAID PAYMENTS FROM THE STATE OF COLORADO;
 - (II) DETAILS ON TRANSACTIONS BETWEEN RELATED PARTIES OR ENTITIES THAT HAVE COMMON OWNERSHIP; AND
 - (III) OWNERSHIP INTEREST IN REAL ESTATE, MANAGEMENT COMPANIES, FACILITY OPERATORS, AND ALL RELATED PARTIES.
- HCPF is looking for feedback on timing (i.e. with cost report?)

HB 23-1228-Sustainability plans

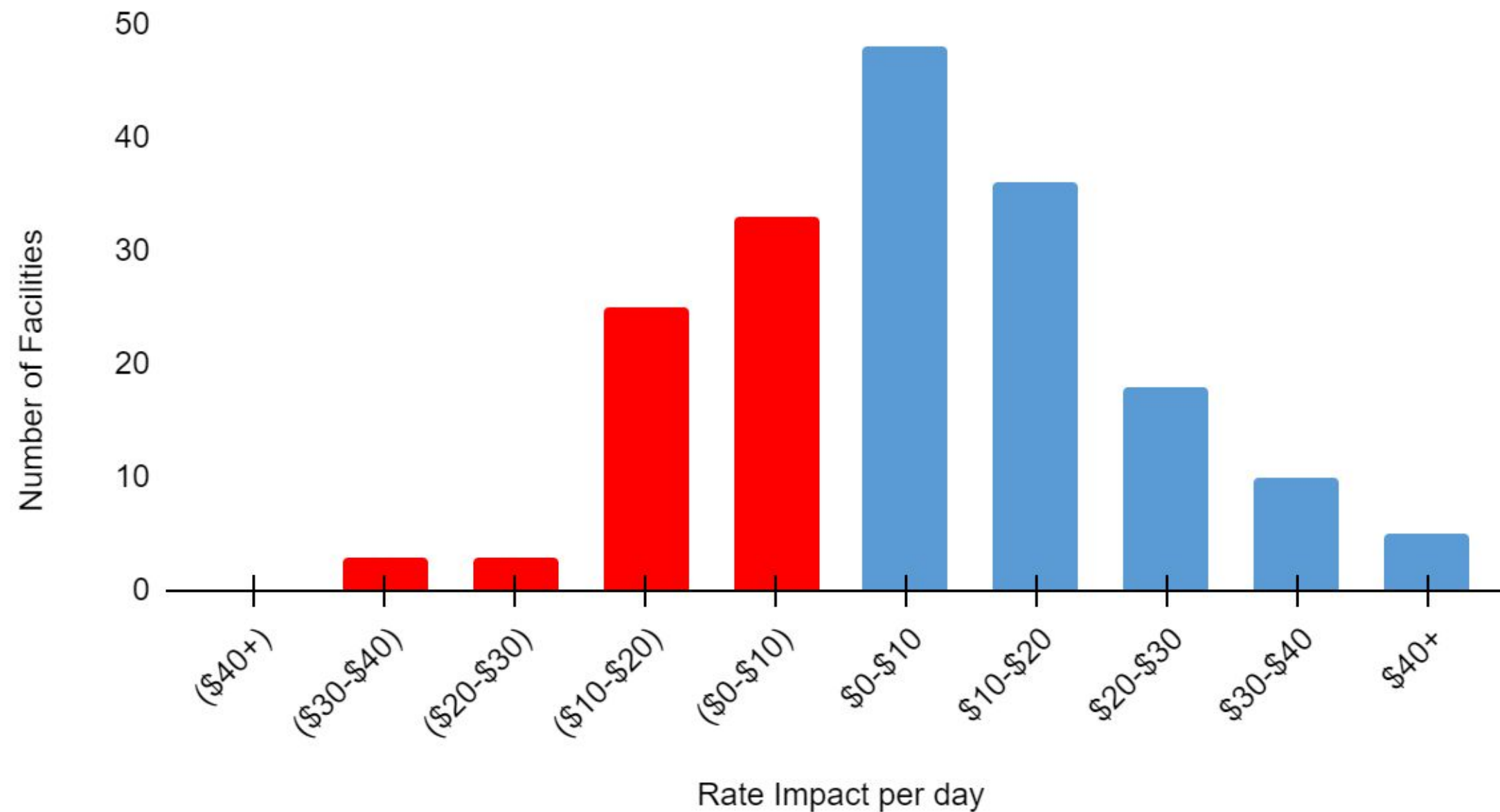
- HB 23-1228 contained a requirement for sustainability and innovations plans:
 - (15) (a) EACH NURSING FACILITY THAT RECEIVES MEDICAID FUNDS SHALL DEVELOP AND SUBMIT A PLAN TO THE STATE DEPARTMENT THAT MEETS STATE DEPARTMENT STANDARDS AND DEMONSTRATES HOW THE NURSING FACILITY WILL:
 - (I) IMPROVE THE HEALTH AND SAFETY OF THE NURSING FACILITY'S RESIDENTS, INCLUDING INFECTION CONTROL AND STAFFING;
 - (II) INCREASE ACCESS TO CARE;
 - (III) IMPROVE FINANCIAL SUSTAINABILITY, INCLUDING OPPORTUNITIES FOR DIVERSIFICATION OF BUSINESS LINES AND STABILIZATION OF REVENUE STREAMS; AND
 - (IV) PROMOTE INNOVATION TO MEET THE EMERGING NEEDS OF INDIVIDUALS WITH DISABILITIES AND AGING AND OLDER ADULTS
- HCPF is looking for feedback on timing (end of year?)

PDPM Transition Data

- RUG acuity is being phased out.
- HCPF is using the higher of PDPM vs. RUG for July 2023 rates
 - 117 of 181 will use PDPM rates
 - 64 of 181 will use RUG

PDPM Transition Data

Impact of Transition to PDPM from RUG (pre-safety net)



PNA / PETI Regulation

- HCPF is also updating PNA / PETI Regulations including general updates to 8.400
- Intended to clarify and enforce PNA account rules
 - Direct comments to Richard and Christine
- Estate Recovery clarifications are being added
- Draft Rules available by Friday June 23rd

HB 22-1333 min wage cost report offset

- HB 22-1333 contained a requirement to offset revenues against the cost report.
- HCPF intends to use the same formula imposed for HB 22-1247
 - *The offset should be allocated between direct health care, other health care, and Administrative & General (A&G) costs based on the percentage of wages reported in these categories to total wages. These offsets should then be made against Schedule C, Lines 4, 27 and 35.*

SFY 23-24 iC Reimbursement Rate

- **Changes to iC rate calculation**
 - Statewide average iC rate increase from 3% to 10%
 - Greater-of PDPM and RUG (for SFY 23-24 only)

SFY	Average Core Rate	General Fund Limit	Average iC Rate
SFY 22-23	\$ 296.32	3.00%	\$ 251.07
SFY 23-24	\$ 327.25	10.00%	\$ 276.17
# Difference	\$ 30.93	7.00%	\$ 25.10
% Difference	10.44%		10.00%

SFY 23-24 iC Reimbursement Rate

- **Delayed iC Rate implementation**
 - 10% allowable increase requires State Regulation and Federal State Plan approval
 - Received State Regulation approval May 9th
 - Will receive Federal State Plan approval by August 15th
 - CMS (Federal Medicaid partners) has 90 days to approve

SFY 23-24 iC Reimbursement Rate

- **Cannot utilize SFY 23-24 iC rates until 8/16/23**
 - Claims billed during 7/1/23 - 8/15/23 with a DOS 7/1/23 - 8/15/23 will pay using SFY 22-23 iC Rates
 - For claims billed on/after 8/16/23 with a DOS on/after 8/16/23 will pay using SFY 23-24 iC Rates
 - Late August 2023 will mass adjust all previously paid claims with DOS 7/1/23 - 8/15/23

SFY 23-24 iC Reimbursement Rate

- **Mass Adjustment of Previously Paid Claims**
 - Lower-of pricing methodology
 - (Billed Amount & Calculated Amount)
 - With rate increase through mass adjustment, claim originally paid using lower-of Billed Amount will not pay with new (higher) SFY 23-24 iC rate.
 - *What is Usual & Customary charges utilized by providers?*

SFY 23-24 Fee Model

- **Change to Fee and Payment**
 - Non-Medicare days increase (*117k (2.7%) increase*)
 - Per-diem fee increase w inflation (*3.32% increase*)

SFY	Fee	Payment
SFY 22-23	\$ 53.4M	\$ 106.8M
SFY 23-24	\$ 55.2M	\$ 110.4M
# Difference	\$ 1.8M	\$ 3.6M
% Difference	3.5%	3.5%

SFY 23-24 Fee Model

- **CPS and PASRR Payments**
 - Per-diem * Resident Days
 - Per-diem based on % of Core rate
 - CPS increasing from 1% to 2%
 - PASRR increasing from 2% to 4%
 - Payments limited by fee/federal matching funds
 - CPS/PASRR payment increase means corresponding Core Component payment decrease

SFY 23-24 Fee Model

- **Delay in model utilization**
 - Cannot implement until after Rule/State Plan approval
 - July fees & payments will be SFY 22-23 monthly fees and payments
 - August fees & payments will be SFY SFY 23-24 monthly fees and payments with July reconciliation
 - SFY 23-24 monthly transaction - July transaction

SFY 22-23

Wage Enhancement Payment

- Letters provided to all eligible nursing homes June 13th
- Payment will be made to eligible nursing homes on Friday, June 30, 2023

Open Comment