

Nursing Facility Stakeholder Meeting

July 19, 2023

Agenda

- Announcement, Introductions
- Center for Behavioral Health in Nursing Facilities
- HB23-1228 - Audited Financial plan
- Sustainability/Innovation Plans
- July & August Fee/Payment Transactions
- CHOW Process
- SFY 23-24 iC Reimbursement Rates
- Public Comment



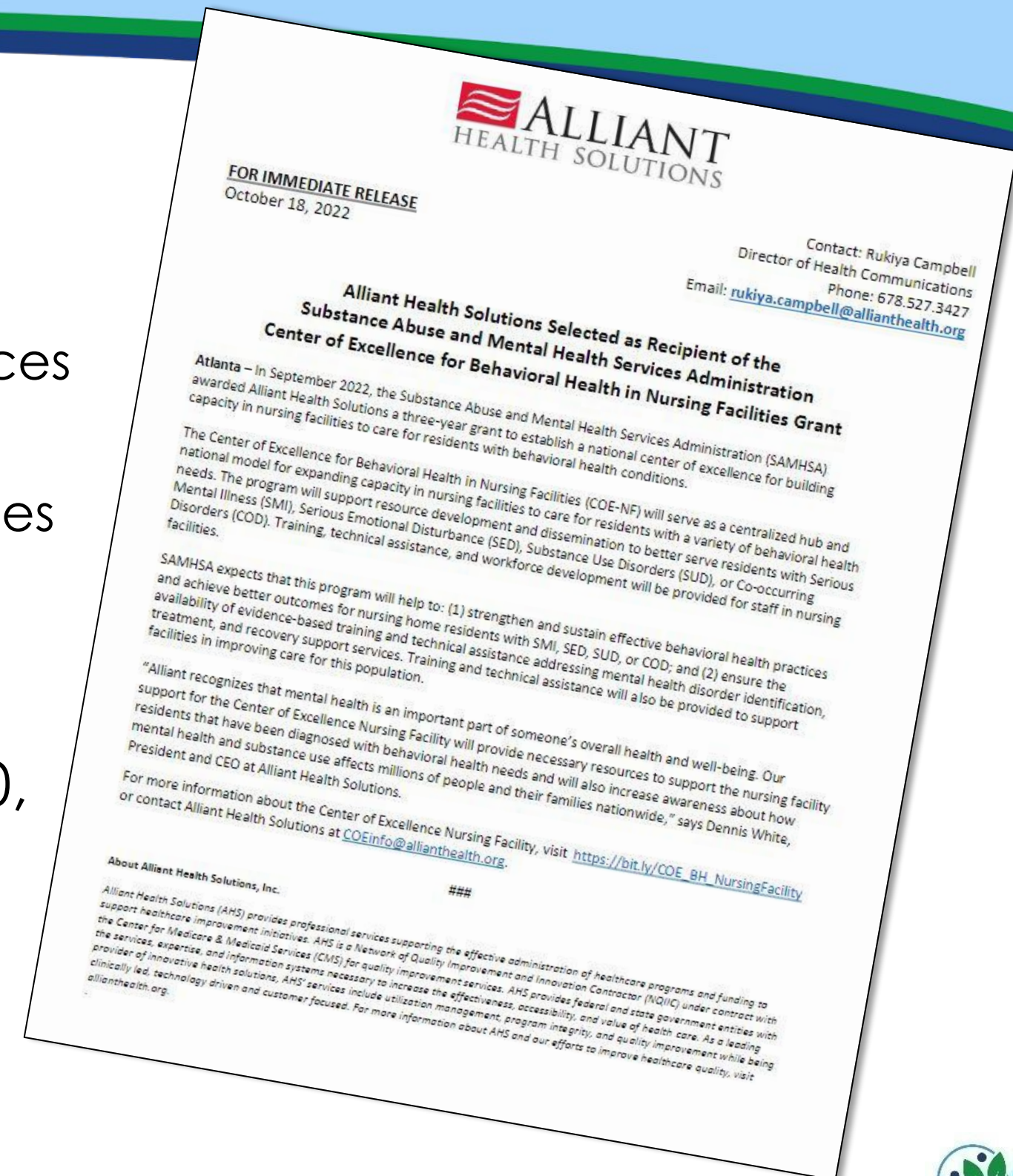
Center of Excellence Overview



CENTER OF
EXCELLENCE
FOR BEHAVIORAL HEALTH
IN NURSING FACILITIES

Center of Excellence for Behavioral Health In Nursing Facilities

- Cooperative agreement between two federal agencies:
 - Substance Abuse and Mental Health Services Administration (SAMHSA)
 - Centers for Medicare and Medicaid Services (CMS)
- Awarded to Alliant Health Solutions
- Three-year grant: Started September 30, 2022



SAMHSA Center of Excellence Model

SAMHSA Centers of Excellence Model:

Provide training and technical assistance on behavioral health needs of special populations.



Examples of other SAMHSA Centers of Excellence:

- E4 Center of Excellence for Behavioral Health Disparities in Aging
- African American Behavioral Health Center of Excellence
- Center of Excellence for Infant and Early Childhood Mental Health Consultation
- LGBTQ+ Behavioral Health Equity Center of Excellence

COE-NF Purpose

Purpose: The COE-NF serves as a centralized hub for expanding capacity in CMS certified nursing facilities to care for residents with a variety of behavioral health conditions. Training, technical assistance, and workforce development are provided to staff in nursing facilities.

Behavioral health areas of focus:

- Serious Mental Illness (SMI)
- Serious Emotional Disturbance (SED)
- Substance Use Disorders (SUD)
- Co-Occurring Disorders (COD)
- Updated CMS nursing facility guidance (behavioral health, resident rights, quality of care)

COE-NF National Staffing Model

Regional Behavioral Specialists Model

- Experienced behavioral health professionals
- 10 COE-NF Behavioral Specialists
 - Alliant regions 1,2,3,4,5,7
- Each specialist is dedicated to an HHS region
- They live and work in the region they serve

Comagine Health

- Partner
- Cohort Learning
- Supporting regions 6,8,9,10

Additional Support

- Recovery specialist
- Training and education lead
- Subject matter experts on a variety of behavioral health topics



COE-NF Behavioral Specialist Region 8



Stephanie Smith, MSW, LCSW

Behavioral Specialist: Region 8
Lives in Colorado

Region 4: Montana, North Dakota, South Dakota, Wyoming, Utah, and Colorado



COE-NF Services Audience

- COE-NF offers training and resources for all nursing facility staff
 - Administrators, directors of nursing, social workers, activities, nurses, nurses aides, rehabilitation, environmental services, and dietary team members
- All staff benefit from knowledge and skills regarding resident's behavioral needs, and CMS guidance on behavioral health education.

Services Available to Nursing Facilities

Foundational Trainings

- Behavioral health trainings identified needs assessment (literature review/interviews)
- Frequently offered and available on a monthly rotation
- Multiple facilities participate in same training session
- Trainings are inclusive of, but not limited to:
 - **De-Escalation Strategies** (Certificate program)
 - **Mental Health First Aid** (Certificate program)
 - **Question, Persuade, Refer** (Certificate program)
 - **Mental Health 101**
 - **Substance Use 101**
 - **Trauma-Informed Care**



Online Resource Hub

- All resources on SMI/SED/SUD/COD topics with a specialized focus on nursing facility considerations
- On-demand learning modules – utilize when most convenient for staff
- Bite-sized learnings
- Fact sheets and educational flyers



Services Available to Nursing Facilities

Customized Technical Assistance

- Facility level behavioral health individualized technical assistance
- Provided by behavioral specialists based out of the region they cover
- Customized training opportunities to match facility's needs



Cohort Learning Initiative

- Join a group of facilities to learn together and from each other
- Monthly series of learning opportunities
- Each session has educational component and group sharing/learning component
- Coming September 2023



Eligibility

- COE-NF is funded to serve CMS Certified nursing facilities
- Facilities should be listed on the CMS Care Compare site as a **nursing facility** or **skilled nursing facility**
- Nursing facilities that are **not** CMS-certified assisted living facilities are **not** eligible for services
- Ineligible facilities can still access the COE-NF free online resource hub, however those facilities are not eligible for technical assistance or trainings.



When to Request Help from the COE-NF

Request assistance with:

- Gaps identified in staff knowledge or skills in meeting behavioral health needs of residents
- Difficulty meeting a particular resident's behavioral health needs
- Where to start and how to prioritize training and skills development for staff around behavioral health needs of residents

Inquiries We Refer:

- Assistance in non-behavioral health areas
- Requests or concerns from residents or care partners
- Requests from providers that are not CMS certified nursing facilities
- Emergencies - call 911



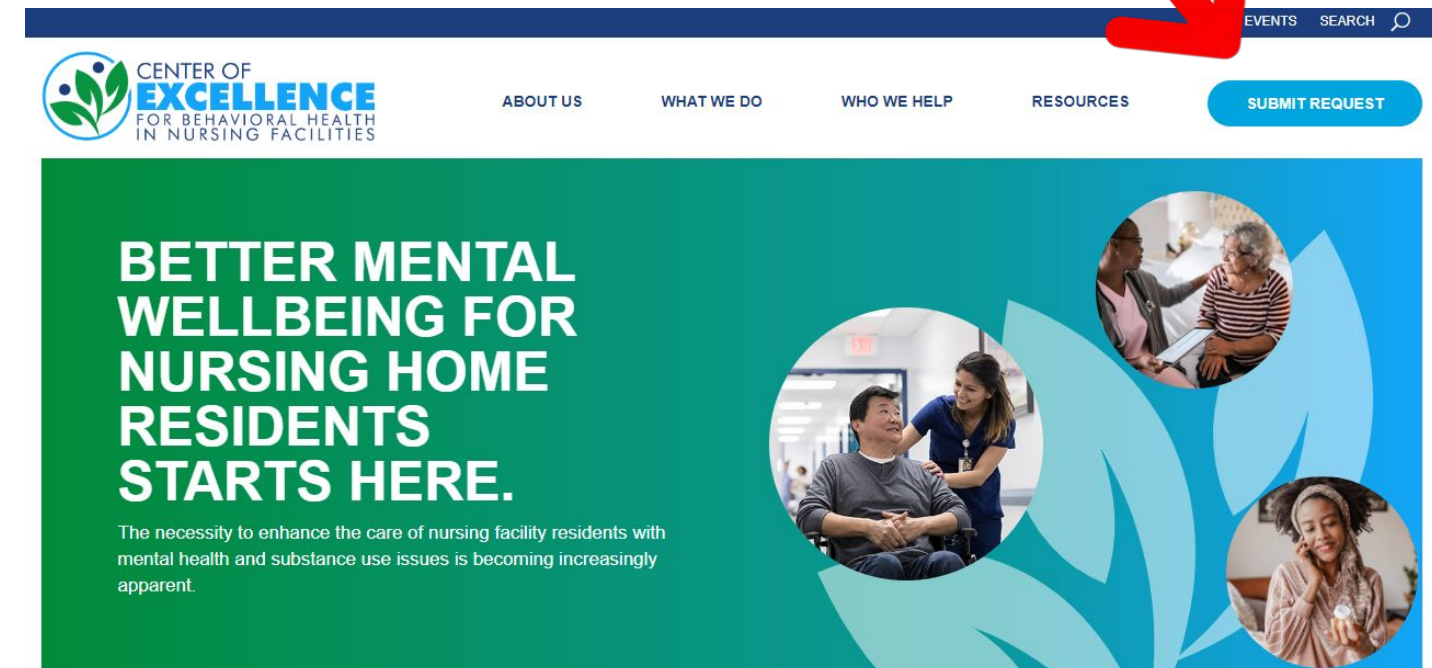
How to Submit a Request

Dedicated Website

- Online form where nursing facilities can submit consultation requests
- Include CCN number and full facility name
- Online requests are responded to within **48 hours**
- <https://nursinghomebehavioralhealth.org/request-assistance>

National Call Center: (844) 314-1433

- Staffed by COE-NF behavioral specialists
- Assistance with completing the consultation request form
- Live Monday-Friday from 1-5 p.m. EST
- Messages will be responded to within **one (1) business day**



Engagement Strategies

Monthly Newsletter

- Shares behavioral health resources
- Provides nursing facility behavioral health regulatory updates
- Announces upcoming training opportunities

Social Media Profiles

- LinkedIn: www.linkedin.com/company/nursinghomebh/
- Twitter: twitter.com/NursingHomeBH
- Facebook: www.facebook.com/NursingHomeBH
- YouTube: www.youtube.com/channel/UCgnRi9EFB9rXApnIUwS09sw

Text Messaging Platform

- Enables nursing facility staff to receive COE-NF updates on their smartphone

SCAN ME



**Scan QR code to
sign up for the
COE newsletter.**



Questions ?



Presenter Contact Information

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Connect with Us!

Subscribe to receive text messages from COE-NF!

Scan the QR code or visit <https://bit.ly/COETextList> to stay up-to-date on COE-NF services and news.

Contact us:

For more information or to request assistance, we can be reached by phone at **1-844-314-1433** or by email at coeinfo@allianthealth.org.

Visit the website:

nursinghomebehavioralhealth.org



Thank You!



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.

HB 23-1228-Audited Financials

- HCPF- Tentative outline of requirements:
 - Audited Financial Statements for each facility, or
 - Audited/Consolidated Financial Statements for the full chain with a supplemental schedule that specifies facility level income and financial data
 - A Combination of the two (in the event individual facilities/ related parties are not part of an existing consolidated statement.)
 - Declaration of shared ownership interests in any entity receiving funds claimed as expenses on cost report.
 - Transaction details will be upon request.

HB 23-1228-Audited Financials

CONSOLIDATING STATEMENT OF OPERATIONS YEAR ENDED DECEMBER 31, 2023					
	Facility 1	Facility 2	Facility 3	Eliminations	Consolidated Total
REVENUE AND OTHER SUPPORT					
Patient Service Revenue:					
Private	\$ X,XXX,XXX	\$ -	\$ -	\$ -	\$ X,XXX,XXX
Medicaid	X,XXX,XXX	-	-	-	X,XXX,XXX
Medicare	XXX,XXX	-	-	-	XXX,XXX
Ancillary	XXX,XXX	-	XX,XXX	-	XXX,XXX
Special Events, Net of Direct Cost	XXX,XXX	-	-	-	XXX,XXX
Contributions	X,XXX,XXX	X,XXX	XXX	(XX,XXX)	X,XXX,XXX
Dining and Domestic	XX,XXX	-	-	-	XX,XXX
Miscellaneous Income	XX,XXX	-	-	-	XX,XXX
Beauty and Barber	-	-	XXX	-	XXX
Bistro and Gift Shop Income	-	-	XX,XXX	-	XX,XXX
Recreation	-	-	XX,XXX	-	XX,XXX
Net Assets Released from Restrictions	-	XXX,XXX	-	-	XXX,XXX
Total Revenue and Other Support	XX,XXX,XXX	XXX,XXX	XXX,XXX	(XX,XXX)	XX,XXX,XXX
OPERATING EXPENSES					
Salaries, Wages, and Related Benefits	X,XXX,XXX	XXX,XXX	XX,XXX	(XX,XXX)	X,XXX,XXX
Contract Services	X,XXX,XXX	-	XX,XXX	-	X,XXX,XXX
Routine Services and Repairs	XXX,XXX	XXX	XX,XXX	-	XXX,XXX
Utilities	XXX,XXX	-	XX,XXX	-	XXX,XXX
Supplies	X,XXX,XXX	X,XXX	XX,XXX	-	X,XXX,XXX
Advertising and Marketing	XX,XXX	-	XXX	-	XX,XXX
Education	XX,XXX	XXX	XX	-	XX,XXX
Insurance	XXX,XXX	-	-	-	XXX,XXX
Property Taxes	-	XX,XXX	-	-	XX,XXX
Depreciation and Amortization	X,XXX,XXX	X,XXX	XXX,XXX	-	X,XXX,XXX
Interest	XX,XXX	-	XXX	-	XX,XXX
Bad Debt	XX,XXX	-	XXX	-	XX,XXX
General and Administrative	XXX,XXX	XX,XXX	XX,XXX	-	XXX,XXX
Total Operating Expenses	XX,XXX,XXX	XXX,XXX	XXX,XXX	(XX,XXX)	XX,XXX,XXX
LOSS FROM OPERATIONS	(XXX,XXX)	(XXX,XXX)	(XXX,XXX)	-	(X,XXX,XXX)
NONOPERATING INCOME					
Investment Income, Net of Investment Fees	-	XXX,XXX	-	-	XXX,XXX
Total Nonoperating Income	-	XXX,XXX	-	-	XXX,XXX
EXCESS (DEFICIT) OF REVENUES OVER EXPENSES	(XXX,XXX)	XXX,XXX	(XXX,XXX)	-	(XXX,XXX)
Transfer of Net Assets	XXX,XXX	(XXX,XXX)	XXX,XXX	-	-
CHANGE IN NET ASSETS WITHOUT DONOR RESTRICTIONS	(XXX,XXX)	(XXX,XXX)	(XXX,XXX)	-	(XXX,XXX)
NET ASSETS WITH DONOR RESTRICTIONS					
Contributions	-	XXX,XXX	-	-	XXX,XXX
Investment Income, Net of Investment Fees	-	XXX,XXX	-	-	XXX,XXX
Net Assets Released from Restrictions	-	(XXX,XXX)	-	-	(XXX,XXX)
Change in Net Assets with Donor Restrictions	-	XXX,XXX	-	-	XXX,XXX
CHANGE IN NET ASSETS	(XXX,XXX)	XXX,XXX	(XXX,XXX)	-	XXX,XXX
Net Assets - Beginning of Year	X,XXX,XXX	XX,XXX,XXX	X,XXX,XXX	-	XX,XXX,XXX
NET ASSETS - END OF YEAR	<u>\$ X,XXX,XXX</u>	<u>\$ XX,XXX,XXX</u>	<u>\$ X,XXX,XXX</u>	<u>\$ -</u>	<u>\$ XX,XXX,XXX</u>

HB 23-1228-Audited Financials

- HCPF- Tentative outline of timeline:
 - Facilities will need to provide evidence they have entered into a contract to have an audit conducted by the time their cost report is submitted.
 - Audited Financials are due to Dept. within 60 days of completion.

Feedback before moving to regulation?

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

HB 23-1228-Sustainability plans

- Give some time to allow impact of rate update before fully defining this. Tentative plan will include:
 - Impact on Wages
 - Examples of Infection control investments
 - Examples of Technology or Innovation investments
 - Etc.

Fee / Payment Transactions

- July 2023 Transaction
- Cannot implement SFY 23-24 until August SPA Approval
- Transaction equals May 2023 transaction amounts
- Will communicate this to all nursing homes this week

Fee / Payment Transactions

- **August 2023 Transaction**
- Transactions based on SFY 23-24 Model
- Includes reconciliation for July 2023
 - 1/12th of SFY 23-24 minus July actual
- Transaction included in fee/payment letters provided to nursing homes later this month

CHOW Process

- Considerable increase in CHOWs over last several years
- CHOWs taking 6+ months to complete
- Previously held fee/payment until CHOW complete
 - Ownership transfer occurred at start of CHOW
- Creates issues for State & nursing homes
 - State Cash Accounting
 - Funds held by State and not nursing homes

CHOW Process

- Proposal - Continue transaction process with prior owner until CHOW process is complete
- Both parties (previous & new owners) receive communications on transactions during CHOW process

SFY 23-24 iC Reimbursement Rate

- **Calculation** - 10% increase in statewide average iC rate, not 10% in nursing home iC rate
- Not nursing home specific
 - Core Components Rate * 84.39%
- Two nursing homes incorrectly report cost/utilization data, grossly reducing their Core Components Rate
-

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

- **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?*

Open Comment