

December 29, 2023

Message From the President



Facility Members & Business Partners,

As we say goodbye to 2023 and welcome 2024, I think we should be proud of the accomplishments of last year mixed with a healthy dose of optimism for the coming year. This past year presented different challenges than the previous year and although the challenges were different, they were no less significant. The staffing crisis persists, and census has not yet fully recovered to pre-pandemic levels. We continue to work with the Governor's office and the legislature for additional funding opportunities such as another rebase of our Medicaid rates. We also continue to work with the American Health

Care Association (AHCA) to assist in whatever way we can on the proposed minimum staffing standard and other federal challenges. Thanks to the AHCA's letter writing campaign, and your active participation in that campaign, we produced thousands of comments to CMS regarding the minimum staffing standard. When we use our collective and unified voice, whether it be at the state or federal level, we can and will be heard. Thank you for doing your part!!

The next five months will be critical for the association as we prepare for and then navigate the legislative session while also assisting the AHCA with their ongoing efforts to combat the minimum staffing standard and other challenges. The association staff and contract lobbyists have been in regular communication with the Governor's office and with legislators during the bill pre-filing process. Please be prepared to do your part over the next few months. This may include hosting legislators at your facility, calling on elected officials, or possibly traveling to Jefferson City to meet with them at the Capitol. To achieve our goals, we will all need to step up as an industry with a unified and organized voice. Please be prepared to participate in that effort when you are called upon to do so.

I also want to provide you with a brief update on the search for the MHCA's next Executive Director. First, I want to remind everyone that Nikki Strong continues to serve in that role and will continue to do so until her replacement is found and starts as Executive Director. At that point Nikki will transition to her new role focused solely on Government Relations. We received a significant response to our job posting and are in the process of narrowing that list down to a handful of top targets. I am thrilled with the volume of the response but more importantly with the quality of the candidates that have expressed an interest. I hope to have good news on this to report to you soon.

I will conclude by wishing you a Happy New Year!! A new year means a new chapter. Let's hope that 2024 brings our facilities health and happiness!

Sincerely,

Eric Doerhoff
MHCA President 2023-2024

In This Issue. . .

- [Reimbursement & Budget](#)..2-3
- [Legislative Update](#).....3-4
- [COVID-19 Updates](#) 4-8
- [Certificate of Need](#)..... 8
- [AHCA & National News](#).. 9-10
- [Regulatory Update](#) 10-20
- [Quality, Programs & Resources](#)..... 21-24
- [Assisted Living Update](#) 25
- [Membership Updates & Services](#).....25
- [2023 Sponsors](#) 26
- [Education & Events](#)..... 27
- [District Events](#)..... 28
- [AHCA Education](#)..... 28



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Missouri Health Care Association

Reimbursement and Budget Updates

CMS APPROVES FY24 \$10 PPD and VBP Incentive Increases

CMS has approved the State Plan Amendment (SPA) for the \$10 PPD rate increase and the \$.87 increase to the VBP incentive effective July 1, 2023. The state is working to get its emergency regulation filed and will begin going through its internal processes in order to timely institute the increases.

Please note, upon CMS approval of a SPA, it typically takes the state between 4-6 weeks to process the increase. An emergency regulation must be filed and approved. Once the emergency regulation takes effect, which is approximately 10 days after it is filed, the state can begin working on rate letters and other processes it must follow before paying the new rates. We anticipate facilities will receive their rate letters and begin being paid their new rate around the first half of February.

Once facilities begin receiving their new rate, then state will begin to work on the retro payment back to July 1, 2023. We anticipate facilities will see the retro payment within 2 – 4 weeks after the new rate is paid. Please note, and as further explained below, the state will utilize the retro payment for the 7/1/23 \$10 PPD and VBP increase to offset any recoupments necessary as a result of decreases to rates for the semi-annual CMI/VBP adjustments on 1/1/23, 7/1/23 and 1/1/24.

We have cleared the biggest hurdle of this process now that CMS has finally approved the plan amendment. The state has assured us they will get the rate processed as quickly as possible. We will keep you updated when we learn anything new regarding timing; however, do not expect to learn anything new until after the first of the year.

Update on January 1, 2023 and July 1, 2023 CMI/VBP Rate Adjustment Retro Pay/Recoupments

The December 22 Medicaid payment included the 7/1/23 retro payments due to the facilities whose rates increased due to CMI/VBP adjustments on both 1/1/23 and 7/1/23. However, please note, if your facility's rate increased 7/1/23 but decreased on 1/1/23 – you did not receive a retro payment because the state will use the 7/1/23 rate increase to offset the 1/1/23 decrease and associated recoupment. The state will make these recoupments in conjunction with the retro payment of the \$10 PPD and VBP incentive approved by CMS as it will utilize the retro payment of the \$10 increase and any increases to their Medicaid rated effective 7/1/23 and 1/1/24 to offset any recoupments necessary.

It is our hope that all the recoupments can be covered through this process; however, if there is a situation where the recoupment is more than the retro payment, we will work with MHD on developing the best plan possible for the facilities that may still be in a recoupment situation. We don't know if any facilities will be in a situation where further recoupment is necessary, but if they are, MHD has committed to working on a fair recoupment process.

Update on Status of January 1, 2024 Rate Letters Based on CMI/VBP Semi-Annual Adjustment

MHD has changed its plan regarding the timing of issuing the January 1, 2024 rate letters for the semi-annual CMI/VBP adjustment. Since CMS surprised them with the SPA approval for the \$10 PPD increase and \$.87 VBP incentive increase prior to January 1, MHD will wait to adjust the 1/1/24 rates and send rate letters in conjunction with the \$10 PPD and VBP increase which will include the 1/1/24 CMI/VBP adjustment at the same time. This should result in a smoother process for not only the state, but also facilities.

As a result of this decision, you will not receive your 1/1/24 rate letter or payment of the new rate until after the first of the year. Once the 1/1/24 rate letter is released it will be inclusive of the \$10 PPD and VBP

increase. As stated above, the state believes it will be able to process the new rate around the first of February. Therefore, any adjustments upward or downward as a result of the 1/1/24 CMI/VBP will be part of the retro mass adjusted payment of the \$10 and increase in VBP incentive payment. Again, we will keep you updated as we learn more.

Legislative Update

2024 Legislative Session - Just Around the Corner

The 2024 Regular Legislative Session is right around the corner, commencing on Wednesday January 3rd. Legislators are allowed to file bills before the legislative session starts during a period called “pre-filing.” This began on December 1st and we have seen a record number of bills filed during the prefiling period.

SNF Medicaid Funding:

Our number one priority this session will be to advocate for additional SNF Medicaid reimbursement. Our goal will be to secure a rebase to the SNF Medicaid rate to capture your post-COVID costs. As you know the last rebase was based on FY2019 costs and didn't capture the significant increase in costs you have incurred post COVID.

Renewal of the FRA:

This session we must also renew the Federal Reimbursement Allowance (FRA) program. As you know, the FRA is a program that draws down federal funds and is responsible for approximately \$3.3 billion in the Medicaid budget. The Nursing Facility program or Nursing Facility Reimbursement Allowance (NFRA) provides nearly 40% of the funding to our SNF Medicaid rate. Other providers like hospitals, emergency services and pharmacists also rely on this funding mechanism for their own Medicaid rate. This year, Senator Hough (the Senate Appropriations Chair) has filed the renewal of the FRA as Senate Bill 748.

As we previously have mentioned, the importance of this program will cause other legislators to threaten its passage if their politically charged priorities are not added to the bill as amendments. The last time the FRA program was up for renewal we were forced into a special session as several legislators would not allow it to pass the regular session without a completely unrelated abortion amendment. That amendment would have jeopardized the FRA program and likely put the Missouri Medicaid program out of compliance with CMS. This year will be no different and the Missouri Right to Life is already engaging with legislators who are threatening to stop the passage of the renewal of the FRA if an amendment related to abortion is not included in the bill (which is completely unrelated to the FRA program). We will keep you updated as this progresses and will likely ask our members to reach out to their legislators, at the appropriate time, through a “call to action” and explain how vital this program is to our Medicaid rate and to pass this without any unrelated amendments that would likely jeopardize the program.

Other Legislation Impacting the Long Term Care Industry:

Finally, we will be looking to promote legislation that help alleviate the workforce shortage in Missouri as well as look to defeat any legislation that could be cumbersome and damaging for our industry. Although many bills will be filed, keep in mind that the budget bills will not be filed until later in January after the Governor has announced his budget priorities and recommendations for the rest of the budget items. We will begin updating you on legislation of importance in the next month.

Host a Legislative Tour

Thank you to all who have hosted a legislator for a tour of your facility. Legislative visits and your grassroots efforts are VITAL to our ability to be successful in passing another rebase to the SNF Medicaid rates during the 2024 legislative session. PLEASE reach out to your legislators and set a time for them to tour your facility. Also, please be prepared to outline your continued financial struggles. These meetings are working as we had MANY legislators advocating for SNF Medicaid rate increases during the 2023 legislative session. WE NEED TO KEEP UP THIS MOMENTUM!

These tours provide a great chance for legislators to learn more about long term care especially in their district. It has helped provide real world context to the underfunding of the SNF Medicaid rate and gives specific examples of the extreme impact COVID has had on facility operations and cost of care. Please consider opening up your facility to your elected officials, especially those with the most direct impact on the appropriations process. If you are interested, contact Sarah Schlemeier Henke at sarah@mohealthcare.com. These tours only last an hour and our team is prepared to provide any level of support your facility needs to make these tours successful.

Advocacy Spotlight: Gideon Care Center

This month we want to recognize Gideon Care Center in Gideon Missouri for hosting a tour with Senator Jason Bean! Senator Bean represents the far Southeast portion of the state and sits on the Senate Appropriations Committee. The Gideon Care Center was able to host the tour on the same day they held their ornament decorating activity for the residents. Showing Senators and Representatives the extra steps facilities go for their residents leaves an impact. Senator Bean said he learned a lot from the tour and that Gideon is basically his hometown so it was great to see so many familiar faces.

COVID-19 & Influenza Updates

CDC Advisory on Low Vaccine Uptake

The CDC [issued a Health Advisory](#) to health care providers about low vaccination rates against influenza, COVID-19, and RSV (respiratory syncytial virus) in all settings and populations. These low vaccination rates, coupled with ongoing increases in respiratory disease, could lead to more severe disease and increased health care capacity strain in the coming weeks. Currently, the highest respiratory disease activity in the United States is occurring across the southern half of the country, with increasing activity in northern states. In the past four weeks, hospitalizations among all age groups increased by [200% for influenza](#), [51% for COVID-19](#), and [60% for RSV](#).

The CDC is asking health care providers to:

- Administer influenza, COVID-19, and RSV immunizations now to patients who are eligible.
- Recommend antiviral medications for influenza and COVID-19 for all eligible patients when they first test positive, especially patients at high-risk of progression to severe disease such as older adults and people with certain underlying medical conditions.
- Counsel patients about testing and other preventive measures, including covering coughs/sneezes, staying at home when sick, improving ventilation at home or work, and washing hands to protect themselves and others against respiratory diseases.

Influenza, COVID-19, and RSV can result in severe disease, more frequently among unvaccinated persons not up to date. Infants, older adults, pregnant people, and people with certain underlying medical conditions

remain at increased risk of severe COVID-19 and influenza disease that can lead to hospitalizations or worse. Infants and older adults remain at the highest risk of severe RSV disease.

AHCA/NCAL encourages LTC providers to continue the work of educating and offering these vaccines to residents and staff, including going back to those that initially declined. The [#getvaccinated website](#) contains resources and tools to help support vaccine conversations, encourage vaccine uptake and information to help navigate the payment and delivery system.

Please contact your local public health agency or the Missouri Department of Health and Senior Services' (DHSS) Bureau of Communicable Disease Control and Prevention at 573-751-6113 or 800-392-0272 (24/7) with questions regarding the CDC Health Advisory. You can also contact COVID19@ahca.org with any questions.

How to Get Reimbursed for Paxlovid

With the commercialization of Paxlovid, reimbursement for Paxlovid for Medicare beneficiaries is now covered under Part D. However, not all residents are covered by Part D because:

1. Approximately 20% of Medicare beneficiaries do not have part D coverage.
2. Part D coverage does not extend to Part A SNF stays.
3. The coverage by Medicare Managed Care plans varies, and how the MA plan treats "out of network" providers is unclear, which many nursing homes are considered if they don't have a MA signed contract.

Through December 31, 2024, anyone uninsured or covered by federal programs, such as Medicare or Medicaid, can receive USG-procured, NDA-labeled Paxlovid at no cost through the USG PAP operated by Pfizer (see [COVID-19 Therapeutics Commercialization Transition Guide, October 20, 2023 \(hhs.gov\)](#)). HHS has confirmed that the USG PAP can be used for residents during their SNF Part A stay.

Through this program, participating PAP dispensing sites will be reimbursed for any product dispensed, along with a dispensing fee. Pharmacy enrollment in the Paxlovid USG PAP is managed by Pfizer and its partner, AssistRx. Pharmacies that would like to learn more about participating in the U.S. Government PAP should contact the program vendor at PharmacyNetworkContract102101@assistrx.com.

A patient needs to sign up to participate in this program and will receive a voucher that can then be provided to a participating pharmacy to receive Paxlovid at no cost. They can visit [this website](#) or call 1-877-219-7225 (1-877-C19-PACK).

A challenge with the USG PAP program is that not all LTC Pharmacies are aware of the program or have completed the enrollment process. Providers are encouraged to talk to your LTC pharmacy if they plan to participate in the USG PAP program. If they are unaware of the program, please provide them with the information above or direct them to the [CDC site](#).

New CDC Report Highlights Vaccination Rates Among Adults and Nursing Home Residents

The CDC recently released two reports in Morbidity and Mortality Weekly Report (MMWR) on vaccination coverage and treatment for respiratory viruses in the United States. The reports examined vaccination coverage among [adults in the United States](#) and [nursing home residents](#). The CDC found significantly higher rates of vaccine coverage among nursing home residents than the general population, but vaccination rates among the general population over the age of 65 were slightly higher than in nursing homes.

Of note:

- By December 9, 2023, a CDC survey of vaccination rates among adults found the following estimated

vaccination rates:

- COVID-19: 18.3%
 - Influenza: 42.2%
 - RSV (adults >60): 17.0%
- As of December 10, 2023, among 97% nursing homes reporting COVID-19 vaccination rates to the NHSN and approximately 20% of SNFs voluntarily reporting influenza and RSV vaccination rates, CDC data indicates the following resident vaccination rates:
 - COVID-19: 33.1%
 - Influenza: 72.0%
 - RSV: 9.8%

It also found that vaccine rates among nursing home residents was lowest in the most socially vulnerable counties. In its discussion, the CDC contributes the low vaccination rates among nursing home residents to vaccine fatigue, inaccurate health information, and vaccine hesitancy.

The study also found that uptake was higher among all three vaccines in small nursing homes. The CDC contributes this to [trust building](#) between medical directors and other providers in light of lower patient-to-provider ratios. A recent [Washington Post op-ed](#) highlights the methods implemented by a medical director to achieve high vaccination rates among his residents in a South Dakota facility. These same methods can be employed by facilities in other areas of the country and with larger populations.

The AHCA/NCAL [#GetVaccinated website](#) contains resources to support providers in securing and administering vaccines in their facilities, as well as resources to help encourage residents and staff to receive the vaccine. AHCA/NCAL also provides trust building resources through its free, online program – [Building Trust in LTC](#).

The two studies can be found here:

- [Coverage with Influenza, Respiratory Syncytial Virus, and Updated COVID-19 Vaccines Among Nursing Home Residents – NHSN, December 2023, MMWR \(cdc.gov\)](#)
- [Influenza, Updated COVID-19, and Respiratory Syncytial Virus Vaccination Coverage Among Adults – Fall 2023, MMWR \(cdc.gov\)](#)

New Report from the CDC Addresses COVID-19 Rebound

The CDC recently released two reports in Morbidity and Mortality Weekly Report (MMWR) and the association between COVID-19 rebound and receiving antiviral treatment. These studies found that COVID-19 rebound can happen whether a patient receives antiviral treatment or not.

Rebound appears to reflect COVID-19 viral fluctuation that is part of the natural disease process early in the course of illness. A person's risk of experiencing rebound could be related to a range of factors, such as immunosuppression, delayed viral clearance, and overall immune response. Rebound was not associated with the use of the antiviral Paxlovid.

The CDC concludes that the benefits of COVID-19 antiviral treatment for reducing the risk of severe illness, hospitalization, and death outweighs any potential risk of viral rebound. The two studies can be found here:

- [SARS-CoV-2 Rebound with and without use of COVID-19 Oral Antivirals – MMWR \(cdc.gov\)](#)
- [Evaluation of SARS-CoV-2 RNA Rebound after Nirmatrelvir/Ritonavir Treatment in Randomized, Double-Blind, Placebo-Controlled Trials – United States and International Sites, 2021-2022 – MMWR \(cdc.gov\)](#)

Updates from the SLCR Regarding COVID, Influenza, and RSV

Below is important information regarding modifications to the Long-term Care Facility COVID-19/Respiratory Pathogens Module and the COVID-19/Respiratory Pathogens Vaccination Module. The changes described below are visible within the NHSN application and took effect the week of December 17, 2023. Resources on the [NHSN LTCF COVID-19/Respiratory Pathogens Module](#) webpage and the [COVID-19/Respiratory Pathogens Vaccination Modules](#) webpage are updated, where indicated, with revised forms, instructions, FAQs, and CSV templates.

Geolocation

The geolocation function is now available within the application. To complete this item, select the icon on the alerts page that is labeled "Facility Geolocation."

Point of Care (POC) Test Reporting Tool

No enhancements

State Veterans Homes COVID-19 Event Reporting Tool

No enhancements

COVID-19/Respiratory Pathogens Pathway Data Reporting

- Optional Influenza/RSV Tab
- NEW! Data reported to the optional Influenza/RSV tab can now be viewed as a report/line list by using the Analysis tab within the application. The analysis function is a tool that can be used to view data reported to NHSN. Please note – reporting to the Influenza/RSV tab is OPTIONAL.

COVID-19/Respiratory Pathogens Vaccination Influenza and RSV Line List Report for Residents

New! You can now use the Influenza / RSV line listing report to review your facility's data (or your group's data) submitted for weekly reporting of Influenza and RSV vaccination rates for residents. These data are included in the line list "Line Listing: All COVID-19 Vaccination Cumulative Summary Data – Residents" found under COVID-19 Module > COVID-19 Vaccination in the analysis tab within the NHSN application.

COVID-19/Respiratory Pathogens Vaccination Summary Form Changes for Healthcare Personnel

New! Form changes take place 1/1/2024 (Quarter 1, 2024)

- Questions related to COVID-19 primary series vaccination will be removed.
- The question about HCP being up to date with COVID-19 vaccination (formerly Question #4) is moved up on the form to Question #2.
- Questions 3.1-3.3 will now refer to those who are not up to date in Question #2.
- HCP should not be considered up to date for COVID-19 vaccination unless they received the updated 2023-2024 COVID-19 vaccine.

COVID-19/Respiratory Pathogens Vaccination Trainings

Webinar dates posted below and on the website under the "Announcement Section"

- Initial Session
When: January 4, 2024, 1:30 PM Eastern Time (US and Canada)
Topic: Updates to Weekly COVID-19 Vaccination Healthcare Personnel Summary Form: Long Term Care Component
Register in advance for this webinar: https://cdc.zoomgov.com/webinar/register/WN_3CPOEhCYQp-bEXz1JexBaA
- Replay Session
When: January 9, 2024, 2:30 PM Eastern Time (US and Canada)
Topic: Updates to Weekly COVID-19 Vaccination Healthcare Personnel Summary Form: Long Term Care Component

Register in advance for this webinar: https://cdc.zoomgov.com/webinar/register/WN_woL3InfGQkKXa8mCK26_-w

- Replay Session

When: January 16, 2024, 1:30 PM Eastern Time (US and Canada)

Topic: Replay: Updates to Weekly COVID-19 Vaccination Healthcare Personnel Summary Form: Long Term Care Component

Register in advance for this webinar: https://cdc.zoomgov.com/webinar/register/WN_TZHB8MsHQ0atRx9N3tNRuA#/registration

After registering, you will receive a confirmation email containing information about joining the webinar.

The HQI “Your Health Can’t Wait, Vaccinate!” Campaign

Health Quality Innovators (HQI) has the *Your Health Can’t Wait, Vaccinate!* campaign, which features a variety of [free campaign materials](#), which include social media messaging (images and sample posts), informational pocket cards, customizable letters, sample email signatures, and flyers, to help encourage community members, healthcare providers, and older adults to get and stay current with their vaccinations. Bookmark the [HQIN Resource Center](#) and visit often to access the latest additions from nationally recognized agencies and organizations (CDC, ACIP, etc.).

Certificate of Need

On November 6, 2023, the Missouri Health Facilities Review Committee (MHFRC) met in Jefferson City, MO. To view the Certificate of Need (CON) decisions for this meeting, please click [here](#). To view the CON decisions for all other past meetings, please click [here](#).

The next scheduled CON meeting is January 8, 2024, in Jefferson City, MO. To view the tentative agenda for the January 8 meeting, please click [here](#). To view the compendium for the January 8 meeting, please click [here](#). To view the tentative agenda for the March 4 meeting, please click [here](#). MHCA encourages you to periodically review the agenda, the compendium, and the proposed applications **IN ADVANCE** of the scheduled CON meetings to determine if there is anything that may be of concern to you.

The MHFRC meets approximately every eight weeks, in Jefferson City, to consider applications and attend to administrative matters. Once per month, the MHFRC also considers expedited applications by way of a ballot vote conducted by mail, fax, and e-mail. To view the 2024 Letter of Intent and Application Review Calendar, please click [here](#).

AHCA/NCAL & National News

Message From AHCA President and CEO, Mark Parkinson

Please click [here](#) to read an important message from AHCA President and CEO Mark Parkinson that summarizes the status of the LTC industry for 2023 and looks ahead to 2024.

Advocacy on the Hill

As Congress heads home for the holidays, the work of AHCA/NCAL on Capitol Hill has been strong. AHCA/NCAL members accepted the challenge to fight the minimum staffing proposal and have engaged in Washington D.C. and locally from the beginning of 2023 until the end. AHCA/NCAL will finish the year with more than 160 Congressional facility and community tours. Over 70 of these tours were with members of Congress on key committees impacting long term care.

Advocacy efforts also included around 100 AHCA/NCAL members flying into D.C. to participate in Hill visits. During these fly ins, over 225 offices of members of Congress were visited and told about the minimum staffing proposal. These visits included more than 60 offices of members of Congress on key committees impacting long term care.

Finally, the efforts of AHCA/NCAL members included more than 18,000 comments through AHCA/NCAL's system on CMS' proposed minimum staffing rule. This number is more than any other grassroots campaign in AHCA/NCAL history.

These advocacy efforts have made a significant impact on the Hill in Congressional and Leadership offices. It has paved the way for a bipartisan, bicameral bill to be introduced, [Protecting Rural Seniors' Access to Care \(S. 3410/H.R. 5796\)](#).

The work is not done until the proposal is defeated. AHCA/NCAL will pick up in 2024 right where they left off with more facility/community tours, D.C. fly ins, and more. If you are interested in hosting a facility or community tour or would like to participate in a D.C. fly in, please contact [Matthew Smyth](#) or [Heather Posthumus](#).

AHCA/NCAL's Mark Parkinson and Clifton J. Porter, II Recognized with Top Honors

In a notable acknowledgment of exceptional leadership in long term care advocacy, Mark Parkinson, President and CEO, and Clifton J. Porter II, Senior Vice President, Government Relations, of the American Health Care Association/National Center for Assisted Living (AHCA/NCAL), have been named *The Hill's* Top Lobbyists 2023. Porter has also been named *McKnight's* Pinnacle Industry Ally Award winner.

This is Porter's first time to receive both honors. Parkinson has received the Top Lobbyist recognition for 11 years running and received the *McKnight's* Pinnacle Award in 2022. He was also honored among the [100 Most Influential People in Healthcare by Modern Healthcare](#) just last week.

These distinctions reflect their unwavering dedication to advocating on behalf of the long term and post-acute care profession. *The Hill's* Top Lobbyists 2023 list recognizes the dynamic duo's exceptional results and highlights their significant contributions to the nation's health care advocacy landscape. *McKnight's* Pinnacle Industry Ally Award recognizes leaders for driving change, setting new standards, and inspiring others.

For more information, view [The Hill's Top Lobbyists 2023](#) and [McKnight's Pinnacle Industry Ally Award](#).

Save the Date - Diversity Executive Leadership Program Nominations Opening Mid-January

AHCA/NCAL is gearing up to open nominations for the second class of its Diversity Executive Leadership Program (DELP) on January 14, 2024.

Fifteen exceptional individuals will be selected to participate in the program next year. DELP provides support and access to leadership opportunities for those traditionally underrepresented in long term care.

To qualify, applicants must:

- Be full-time employees of an AHCA/NCAL provider member in good standing.
- Belong to an underrepresented identity group and hold mid- to senior-level or C-suite positions.
- Demonstrate at least three years' experience in mid- to senior-level long-term care management or one year as a C-suite executive.
- Highlight leadership experience in professional, volunteer, or civic/community settings.

During the two-year program, DELP scholars will receive complimentary registration and travel to attend key events. For those ready to embrace this transformative journey, visit the [DELP website](#) for additional information and the application process.

AHCA/NCAL Data and Research

AHCA/NCAL develops and compiles cutting edge, comprehensive research and data concerning the long term and post-acute care sector. Whether conducted by AHCA/NCAL and prestigious research agencies or gathered from government agencies, AHCA/NCAL aims to provide a clear picture about the state of skilled nursing facilities. Please click [here](#) to view the COVID-19 Nursing Home Dashboard, SNF Occupancy Data and other Fast Facts.

AHCA/NCAL Reports, Notes and Members-Only Newsletters

Please click [here](#) to access AHCA/NCAL Annual Reports and Notes and to sign up for the Capitol Connection, a biweekly email that provides the latest updates and happenings on Capitol Hill and throughout Washington D.C.

Regulatory Updates

Provider Relief Fund Reporting Period 6 Opens January 1

The Provider Relief Fund (PRF) Reporting Period 6 (RP6) opens January 1, 2024, and will remain open through March 31, 2024, at 11:50 pm EST.

Providers who received one or more PRF (general or targeted) and/or American Rescue Plan Rural payment(s) exceeding \$10,000 in the aggregate from July 1, 2022, to December 31, 2022, must report on their use of funds in RP6. The deadline to use funds from RP6 is December 31, 2023. The [Allowable Expenses webpage](#) provides more information on appropriate uses of the payments.

Additionally, details on reporting requirements are available in the [Post-Payment Notice of Reporting Requirements Notice](#).

Tips to Get Started on Reporting

- Enter the [PRF Reporting Portal](#). The reporting process begins with registration. Providers who registered during previous reporting periods do not need to register again and may log into the Portal with their username, Tax Identification Number (TIN), and password.
- Review the available reporting resources on the [PRF Reporting Resources webpage](#).
- Resources are also available on the [Nursing Home and Infection Control \(NHIC\) Distribution webpage](#) for providers who received an NHIC payment(s).
- Please note that the [Notice of Reporting Requirements](#) indicates that the opportunity to apply PRF payments (excluding the NHIC Distribution) and/or ARP Rural payments toward lost revenues would be available from the beginning of the period of availability up to June 30, 2023, the end of the quarter in which the Public Health Emergency ended. Providers should report any funds that were applied to lost revenues up through June 30, 2023.

You can visit the [PRF Reporting webpage](#) and [Frequently Asked Questions](#) for more information. The Provider Support Line is also available at (866) 569-3522; for TTY, dial 711. The hours of operation are 8 am to 8 pm Central Time, Monday through Friday.

Candida Auris Health Advisory and Informational Webinar

Please see the DHSS Health Alert entitled, "[Emerging Candida auris Infection Cases in Missouri Health Care Facilities](#)." *Candida auris* (*C. auris*) is considered an urgent threat according to the Centers for Disease Control and Prevention. Should you have any questions, please contact the Missouri Department of Health and Senior Services' Bureau of Communicable Disease Control and Prevention at 573-751-6113 or 800-392-0272 (24/7) or info@health.mo.gov.

The Healthcare-Associated Infections/ Antimicrobial Resistance (HAI/AR) Program at the Department of Health and Senior Services held a webinar on Wednesday, December 20 to outline recommended actions resulting from recent cases of *C. auris* detected in Missouri.

The informational webinar on the emerging *C. auris* situation in MO has been posted along with the PowerPoint presentations. The recording and PowerPoints can be found here: <https://health.mo.gov/data/hai/index.php> under the heading "**Candida auris Informational Webinar**".

Missouri's Minimum Wage Rate Will Increase on January 1, 2024

The minimum wage rate in Missouri for private employers will increase from \$12.00 to \$12.30 per hour effective January 1, 2024. After 2023, the minimum wage rate for all private and non-exempt businesses will be based on the increase or decrease in the cost of living pursuant to the Consumer Price Index. Employers engaged in retail or service businesses whose annual gross income is less than \$500,000 are not required to pay the state minimum wage rate. Employers not subject to the minimum wage law can pay employees wages of their choosing.

For more information on the minimum wage rate, please click [here](#) to visit the Missouri Department of Labor's website. In addition, all employers subject to any of the provisions of this law must post a summary of the law and regulations in their buildings. For your convenience, the Division of Labor Standards has created a summary Minimum Wage Poster for Missouri employers, which can be accessed [here](#).

Long-Term Care Ombudsman Program Bed and Service Availability Portal

The Covid-19 Long-Term Care Bed Availability portal has been replaced with the Long-Term Care Ombudsman Program Bed and Service Availability portal. Long-Term Care Homes (all levels of care) have the option to fill out an electronic survey weekly to report how many beds they have available, and which residents they can serve (i.e. memory care, behavioral health, bariatric, etc.). This tool can be used by facilities, families, hospital discharge planners and the general public to determine bed availability and services throughout the state.

Please access this [training video](#) for instructions on how to complete the survey. The survey can be accessed from this link: [survey](#). If you have any questions about the survey, please contact the Long-Term Care Ombudsman Program via email LTCOmbudsman@health.mo.gov or call 800-309-3282. More information will be coming soon about how to use the data created from the survey.

Supplemental Health Care Services Agency (SHCSA) Regulation

You can view the status of a SHCSA application or registration because the [dashboard](#) shows in real time all SHCSA applications received to date and registrations issued. As a reminder, any agency that operates in Missouri and falls within statute 198.640(6): A supplemental health care services agency is defined as a person, firm, corporation, partnership or association engaged for hire in the business of providing or procuring temporary employment in health care facilities for health care personnel, including a temporary nursing staffing agency as defined in section 383.130, or that operates a digital website or digital smartphone application that facilitates the provision of the engagement of health care personnel and accepts requests for health care personnel through its digital website or digital smartphone application shall register with the department pursuant to statute 198.642.1.

Initial registration applications and fees should be received as soon as possible, but before **December 31, 2023**. Please email SHCSA@health.mo.gov with any questions or concerns.

The link can also be accessed on the DHSS main webpage (<https://health.mo.gov/safety/shcsa/index.html>) under the Agency Registration Status bullet point:

- [Laws & Regulations](#)
- [Registration Application](#)
- [Pay Online](#)
- [Agency Registration Status](#) 

Veterans Administration Gives Significant Boost to SNF VCA Rates

The Veterans Administration (VA) recently posted updated [Veterans Care Agreements \(VCAs\) rates](#) for participating SNF providers. This is great news for the profession because the **VCA SNF payment rates for short-stay SNF care have increased by approximately 50%, and long-stay veteran care payments have increased by approximately one-third.** These rate increases apply retroactively for dates of service beginning October 1, 2023.

As you may know, AHCA has been working collaboratively with the VA and on Capitol Hill for many years to advocate for VCAs, which increases the opportunity for veterans to obtain non-VA extended care from local providers. VCAs help to ensure that our nation's veterans can remain in their communities or close to loved ones to receive vital and often life-sustaining medical services rather than having to go to a distant VA facility.

VCA agreements also offer a more streamlined and less burdensome participation process for providers. Initially, the VCA rates were not attractive and, in some cases, insufficient to cover the cost of care. Few providers elected to participate, leaving geographic gaps across the country where veterans continued to face challenges accessing nursing home care.

Members with a current VCA provider agreement and those who may be interested in obtaining this agreement are encouraged to review this [additional important information](#), including VA points of contact. This content is for MHCA members only and requires a login to access. AHCA will also host a member webinar with the VA in early 2024; more information will be available soon.

Navigating OSHA Recordkeeping: Introduction, Insights, and New Regulation

As [reported in July](#), OSHA is expanding its requirements to electronically submit employee injury data through its Final Rule on [Improving Tracking of Workplace Injuries and Illnesses](#). Nearly all LTC providers are already required to maintain OSHA 300 Logs, Form 301, and Form 300A, but for the last several years have only submitted the 300A summary to OSHA – typically by March 2nd of the following year. The updated regulation requires electronic submission of OSHA 300 logs and Form 301 (incident reports), in addition to the 300A summaries that are already submitted electronically.

Under the updated [Final Rule](#), OSHA will require electronic submission of 300, 300A, and 301 documents for employers in ‘high-risk’ industries with 100 or more employees. Those industries are listed in [Appendix B](#) and specifically include LTC providers, meaning that LTC providers with 100 or more employees will now be required to submit these documents electronically. If you are unsure whether your establishment is covered by these additional requirements, you can use OSHA’s [ITA Coverage Application](#).

Importantly, much of the submitted information will be published publicly by OSHA, so employers must redact any employee-identifying information from the submitted forms to ensure privacy and comply with regulatory requirements.

The following includes a brief, but not exhaustive, list of potential changes to practices of many employers:

- OSHA has previously accepted alternative documents to Form 301 if they are provided same or similar incident information. Going forward, employers who are required to submit the information electronically must keep a separate Form 301.
- As stated above, employers have the burden to redact specific information that would allow the employee to be identified before submitting the forms. As a result, employers should implement additional review for employee-identifying information before submission.
- Employees will have greater access to the recorded information because it will be publicly reported (they should already have access “upon request”). As a result, employers should conduct additional verification to ensure the information is recorded accurately.

It’s essential to understand that while this updated regulation goes into effect on January 1, 2024, it applies to the 2023 data you’ll be submitting **before March 2024**. **Meaning, the current year (2023) 300 logs, Form 301, and 300A summaries must comply with this new requirement and be submitted before March 2, 2024.** Included below are resources to assist with electronic submission and to provide you with additional information from OSHA. OSHA’s Injury Tracking Application (ITA) will begin accepting 2023 injury and illness data on January 2, 2024.

- [Recordkeeping – Final Rule Issued to Improve Tracking of Workplace Injuries and Illnesses \(OSHA.gov\)](#)
- [Frequently Asked Questions \(FAQs\) – OSHA.gov](#)

Safe Resident Handling and Prevention of Musculoskeletal Injuries: Ergonomics in LTC Communities

Musculoskeletal disorders (MSDs) are a significant concern in the health care industry, including long term care (LTC) facilities. Common MSDs associated with resident handling include strains, sprains, and other injuries resulting from overexertion, awkward postures, and repetitive movements. MSDs are addressed in OSHA terms, by implementing “ergonomic” practices and controls.

OSHA does not have a specific standard dedicated solely to ergonomics or MSDs. However, OSHA addresses ergonomic concerns through the General Duty Clause of the Occupational Safety and Health Act.

What is the General Duty Clause?

The [General Duty Clause](#) (Section 5(a)(1)) states that employers must provide a workplace free from recognized hazards that are causing or likely to cause death or serious physical harm to employees. As a result, if OSHA finds that an employer has failed to provide a safe workplace, it can issue a citation under the General Duty Clause even where no specific OSHA standard applies.

Ergonomics and safe resident handling in LTC facilities are one of the areas that OSHA applies the General Duty Clause. To further their compliance efforts, employers can refer to OSHA’s guidelines, publications and resources (see [Guidelines for Nursing Homes](#)) that provide recommendations for preventing MSDs and encouraging safe patient handling.

Understanding OSHA Expectations for Ergonomics and Safe Resident Handling

OSHA’s guidelines aim to minimize the risk of injuries associated with patient handling and promote ergonomic practices to enhance workplace safety. These standards cover various aspects, including patient lifting, transferring, and repositioning, with the primary goal of reducing MSDs among health care workers.

Examples of Controls to Protect Employees

1. Mechanical Lifts and Transfer Devices:

- Mechanical lifts and transfer devices, such as ceiling lifts and floor-based lifts, can significantly reduce the physical strain on healthcare workers during patient transfers.
- OSHA has [indicated](#) that mechanical lifting equipment reduces exposure to manual lifting injuries by up to 95% among health care workers.

2. Training and Education Programs:

- Training programs for health care workers on proper lifting techniques, body mechanics, and the use of assistive devices are frequently offered in nursing and aid certification course curriculum (e.g., nursing school) and should also be part of the employer’s training regular regimen.
- According to a study published in the Journal of Occupational and Environmental Medicine, facilities with robust training programs experienced a notable decrease in work-related injuries.

3. Ergonomic Equipment and Furniture:

- Investing in ergonomic furniture and equipment, such as adjustable beds and chairs, can contribute to a more comfortable and safer working environment.

Examples of Controls to Protect Residents and Employees

1. Individualized Care Plans:

- Utilizing the information provided in individualized care plans for residents ensures that their specific needs and limitations are considered during transfers and movements.
- From an employee safety perspective, these care plans can serve as individualized hazard assessments to identify appropriate lifting and transfer methods.

2. Assistive Devices for Residents

- Providing residents with assistive devices, such as grab bars and mobility aids, enhances their independence, and reduces the need for manual assistance, thereby promoting employee safety.

Conclusion

Incorporating OSHA guidelines for ergonomics and safe resident handling in LTC facilities can be beneficial for protecting both employees and residents. The implementation of controls, such as mechanical lifts, training programs, ergonomic equipment, individualized care plans, and assistive devices, can significantly contribute to a safer and more comfortable environment.

Navigating the OSHA Hazard Communications Standard in LTC Communities

In addition to infectious disease, ergonomic, and workplace violence issues, workers in health care settings encounter several other workplace hazards. These include chemicals (e.g., sterilants), hazardous drugs (e.g., antineoplastic drugs), materials that cause allergic reactions (e.g., latex), and sometimes physical agents (e.g., radiation).

The Hazard Communication Standard, also known as the “Right to Know” standard, was enacted by OSHA to ensure that employers and employees are aware of the chemical hazards present in their workplace. The standard provides a comprehensive framework for classifying, labeling, and communicating information about hazardous chemicals to workers. It also requires employers to implement a written hazard communication program and provide training for employees.

Applicability to Long Term Care

Health care communities use various chemicals for cleaning, sanitation, and medical treatments. While many make an effort to use less hazardous chemicals to promote resident or patient safety, the presence of any hazardous chemicals still triggers the applicability of OSHA’s Hazard Communication standard for employee safety. As such, identifying and minimizing potentially hazardous chemicals in a health care community, as required by the Hazard Communication standard, can both enhance resident safety and protect employees.

Key Components of Compliance:

1. Chemical Inventory – Long term care (LTC) facilities and communities must maintain a comprehensive inventory of all hazardous chemicals used on-site. This includes cleaning supplies, medical treatment supplies, and any other substances that pose potential hazards. The chemical inventory serves as the starting point for implementing the Hazard Communication Standard.
2. Safety Data Sheets (SDS): LTC employers are required to obtain and maintain Safety Data Sheets for each hazardous chemical in use. These are required to be available from the manufacturer or supplier of the chemical. SDSs provide detailed information on the properties, hazards, safe handling, and cleanup of chemicals.
3. Labeling: Containers of hazardous substances must be labeled with the following:
 - a) Product name.
 - b) Signal word – such as “Danger” or “Warning”.
 - c) Hazard Statements – describes the nature of the hazard(s) of a chemical, including, where appropriate, the degree of hazard.
 - d) Precautionary Statements – describes recommended measures such as safe handling, use, storage.
 - e) Pictogram(s) of the hazards.
 - f) Name, address, and telephone number of the chemical manufacturer, importer, or other responsible party.
 - With only rare exception, there should be no unlabeled bottles or containers in the facility.
4. Employee Training: OSHA mandates that employees receive training on the hazards of chemicals present in the workplace and the protected measures in place. Training should cover the use of personal protective equipment (PPE), emergency procedures, pictograms found on chemical labels, and the importance of reporting any unsafe conditions. Employees should also know where SDSs can be found in the facility.
5. Written Hazard Communication Program: LTC providers must develop and implement a written hazard communication program. This program outlines how the facility will comply with the Hazard Communication Standard, including procedures for labeling, SDS management, and employee training.

Conclusion

By taking proactive measures, such as maintaining accurate chemical inventories, providing comprehensive

employee training, and implementing clear labeling practices, LTC facilities and communities can create a secure environment where the risks associated with hazardous chemicals are minimized. Embracing the principles of the Hazard Communication Standard not only promotes a culture of safety but also underscores a commitment to the health and welfare of everyone within the LTC setting.

Other Resources:

- [Hazard Communication – Questions and Answers/Occupational Safety and Health Administration \(osha.gov\)](https://www.osha.gov/hazcom)
- [Hazardous Drugs – Overview/Occupational Safety and Health Administration \(osha.gov\)](https://www.osha.gov/hazcom)

HHS Issues Important Cybersecurity Notice for Health Care Operators

The Department of Health and Human Services (HHS) Health Sector Cybersecurity Coordination Center has [released a notice](#) strongly encouraging health care organizations to upgrade their devices due to a vulnerability. **Known as “Citrix Bleed”, this vulnerability has been ongoing since August 2023 and could allow hackers to access private health care information by bypassing passwords and multifactor authentication.**

Those systems vulnerable to Citrix Bleed include NetScaler ADC (formerly Citrix ADC) and NetScaler Gateway (formerly Citrix Gateway). Versions include:

- NetScaler ADC and NetScaler Gateway 14.1 before 14.1-8.50
- NetScaler ADC and NetScaler Gateway 13.1 before 13.1-49.15
- NetScaler ADC and NetScaler Gateway 13.0 before 13.0-92.19
- NetScaler ADC and NetScaler Gateway version 12.1 (EOL)
- NetScaler ADC 13.1FIPS before 13.1-37.163
- NetScaler ADC 12.1-FIPS before 12.1-55.300
- NetScaler ADC 12.1-NDcPP before 12.1-55.300

Citrix released a patch for this vulnerability in early October, but these compromised sessions will still be active after a patch has been implemented. **Administrators should follow Citrix’s guidance to upgrade their devices and remove any active or persistent sessions with the following commands:**

- kill aaa session -all
- kill icaconnection -all
- kill rdp connection -all
- kill pcoipConnection -all
- clear lb persistentSessions

Additional recommended actions for investigating any potential Citrix Bleed exploits have been provided by [NetScaler](#). Further technical details, threat activity, and indicators of compromise can be obtained [here](#) and [here](#). Users and administrators are strongly encouraged to review these recommended actions and upgrade devices to prevent serious damage.

As a reminder, everyone must remain vigilant – DO NOT click on [suspicious emails](#). AHCA/NCAL will provide additional updates as available.

CMS Publishes CY 2025 Medicare Advantage Proposed Rule

CMS recently published its contract year (CY) 2025 Medicare Advantage and Part D [proposed rule](#). The proposed rule furthers beneficiary protections by including an independent, fast-track appeals process for non-hospital services, curbs inappropriate marketing practices, expands access to behavioral health services, promotes health equity and further advances Medicare-Medicaid integration. [Comments](#) are due by **4 pm CST on January 5, 2024**.

AHCA/NCAL has developed a [members-only summary](#) of the proposed rule (*member log-in required*) and will continue analyzing it prior to submitting comments. Please reach out to [Nisha Hammel](#) for additional information on this topic or to provide feedback within the comment period.

In addition to this effort, AHCA/NCAL has been working as part of a coalition with other post-acute care associations and the Center for Medicare Advocacy. This group recently submitted a letter to CMS on the CY 2024 MA Final Rule requesting sub-regulatory guidance to ensure that the constraints around prior authorizations and medical necessity provisions included in the final rule are adhered to and plans are held accountable. The letter is available for AHCA/NCAL members to view [here](#).

End of the Year Wrap-Up for Regulatory Resources

As 2023 ends, the AHCA Regulatory Department has provided a wrap-up of resources released throughout the year. Each of the resources were prepared with the members in mind. The goal is to support the membership and ensure that you have the tools to stay compliant with a variety of regulatory requirements.

[Discharges – Making the Safest Transition for Your Residents](#): *Discharges – Making the Safest Transition for your Residents* is a webinar created by AHCA Regulatory staff to assist facility staff in understanding regulations related to planning, preparing, and discharging residents safely. The webinar provides real-life scenarios of difficult discharge situations and how to stay in compliance when these situations arise. **Registration is free to AHCA/NCAL Members. The cost is \$65 for non-members.**

[IDR/IIDR Toolkit](#): A sub-group of the Survey Regulatory Committee developed the webinar and toolkit titled *Informal Dispute Resolution (IDR)*. Both the toolkit and the webinar were developed to assist facilities in determining if an IDR is an appropriate tool to use after survey where the results need to be disputed by the facility. Additionally, the webinar assists facilities through the process of completing an IDR and informs learners about areas that may vary based on state processes. The IDR process is not one that providers do often, so this tool is a helpful aid in completing a task that can sometimes seem confusing and intimidating. **Registration is free to AHCA/NCAL members. The cost is \$65 for non-members.**

[Abuse and Neglect](#): This three-part webinar reviews regulations related to abuse, neglect, and misappropriation of resident property, how and when to report abuse, how to complete an abuse investigation, and helpful tips for achieving past noncompliance (PNC) for these deficiencies. The webinars also include real life scenarios, how to avoid deficiencies in these scenarios, and tools for achieving PNC. **Registration is free to AHCA/NCAL members. The cost is \$65 for non-members.**

[Training Requirements](#): Training requirements is a document that provides a list of annual training requirements for all positions, in one place. The document also provides additional space to add any state specific training requirements. **This is free and accessible to AHCA members only.**

[Accidents – How to Stay Ahead of F689 and Keep Your Residents Safe](#): The Accidents webinar will review regulations related to supervision to avoid accidents. It also pulls together various resources available on ahancaled, as well as external resources. The webinar provides resources for development of policies to remain compliant with accident regulations. Finally, real-life case studies will be reviewed with explanations for what facilities should do if similar events occur. **Facility registration is \$100 for AHCA/NCAL members, and subscription access is available for one year.**

MDS Updates Effective October 1, 2023: On August 24, 2023, CMS released the final MDS Item Sets version 1.18.11v5 and on August 22, 2023, it released the final MDS 3.0 RAI User's Manual version 1.18.11. AHCA has developed tools to assist with implementation of the new changes. These tools cover the changes to the MDS 3.0 Final Item set as well as incorporate the RAI manual guidance into consideration for application. **Registration is free to AHCA/NCAL members.**

Considerations for Care and Services for LGBTQ+ Residents: The provision of care and services offered by nursing homes must be individualized and person-centered, and equally and universally applied to all residents, including those who identify as transgender or gender diverse (TGD). Furthermore, as a condition of licensure, the nursing home must remain in compliance with federal, state, and local laws and professional standards, which includes requirements of nondiscrimination. **This is free and accessible to AHCA members only.**

Pressure Injury Prevention and Wound Management in LTC: This pressure injury prevention and wound management webinar is presented by Jeanine Maguire, a wound consultant and educator with almost three decades of wound care focus and expertise. In this webinar, Jeanine emphasizes a patient-centric approach and the importance of routine and comprehensive risk assessment and skin checks. She discusses the challenges of Deep Tissue Injury and the controversy over whether pressure injuries are a result of end-of-life or a combination of factors. Jeanine highlighted the need for accurate documentation and understanding of medically unavoidable wounds. She also stresses the importance of a multidisciplinary team approach, ongoing monitoring, and communication. Lastly, Jeanine provides links to CMS F tag 686, the critical element pathway, PAWSIC (the Wound Provider Group checklist), and NPIAP for further reference. *Note that some information shared will change with the RAI updates in October, but the presentation discusses how to prepare for those changes. **Registration is free to AHCA/NCAL members. The cost is \$65 for non-members.**

Building a Lasting Relationship with Surveyors - Before, During, and After Surveys: Building a Lasting Relationship with Surveyors is a tool prepared by the AHCA Survey Regulatory Committee. The tool provides useful information on preparing for surveys, ahead of the survey by building lasting relationships with surveyors. Additionally, the tool provides best practices for during a survey and after the survey is complete. Finally, there are resources within the provided webinar, as well as audit tools to prepare for surveys and for use during a survey. **This is free and accessible to AHCA members only.**

Facility Assessments 101 – The Driver of Resources, Training, and Competencies: The Facility Assessment webinar begins by explaining the regulatory requirements of the Facility Assessment; it is mentioned over 100 times throughout the State Operations Manual! This information is built upon through explaining the relationship between the Facility Assessment and everything else facilities do on a day-to-day basis. The webinar reviews how to complete a facility assessment and how to then determine which competencies are necessary, based upon that assessment. A sample Facility Assessment is also provided as a resource along with many resources on Facility Assessments and competencies. **The cost is \$50 for AHCA members and \$75 for non-members. 1.25 NAB CEs and 1.0 contact hour through the Iowa Board of Nursing are available upon course completion.**

Please send any questions to regulatory@ahca.org.

\$40 Million in HUD Funding Available for Service Coordinators

The Department of Housing and Urban Development recently announced \$40 million in new funding for service coordination programs in affordable senior housing. The grants will fund approximately 160 programs across the country. The deadline to apply for the funding is March 11, and more details on the funding – including eligibility details and allowable uses of the funding – can be found [here](#).

It is important to note that NCAL endorses the [Expanding Service Coordinators Act](#), which would increase funding for and make reforms to service coordinator programs to expand the national service coordinator workforce, which is currently strained. Service coordinators connect individuals and families living in federally assisted housing with a wide range of social services, including health care, meals, transportation, job training, and education.

Geriatric Workforce Enhancement Program (GWEP)

There is a new funding opportunity available! The Health Resources and Services Administration (HRSA) released a New Notice of Funding Opportunity (NOFO) to educate and train the health and supportive care workforces to care for older adults by collaborating with community partners. **Applications accepted until February 26, 2024.**

The Geriatrics Workforce Enhancement Program (GWEP) aims to have applicants maximize patient and family engagement to address care gaps and improve health outcomes for older adults by integrating geriatrics with primary care and other appropriate specialties using the Age-Friendly Health Systems Framework.

Eligible applicants include:

- Schools of Allopathic Medicine, Osteopathic Medicine, Nursing, Allied Health, Pharmacy, Dentistry, Public Health, Optometry, Chiropractic, Veterinary Medicine, or Podiatric Medicine
- Physician Assistant Education Programs
- Graduate programs for Health Administration or Behavioral Health and Mental Health Practice, including Clinical Psychology, Clinical Social Work, Professional Counseling, or Marriage and Family Therapy
- Health care facilities
- Programs leading to certification as a certified nurse assistant
- Partnership of a school of nursing and health care facility
- Partnership of a program leading to certification as a certified nurse assistant, and a health care facility
- Community-based organizations, if otherwise eligible
- Tribes, and Tribal organizations, if otherwise eligible

You can view the [grant opportunity](#) for complete eligibility information.

ASPR TRACIE Disaster Preparedness Conference

The U.S. Department of Health and Human Services, Administration for Strategic Preparedness and Response (ASPR) [Technical Resources, Assistance Center, and Information Exchange](#) (TRACIE) is pleased to host the Medical Leadership in Disaster Preparedness and Response Virtual Conference **February 7-8, 2024**. This two half-day virtual, interactive conference will feature individuals who have a medical direction role during disasters for their health care facility, public health department, emergency medical services agency, health care coalition, or other entity discussing the spectrum of their medical leadership responsibilities and some of the specific challenges of the role.

Participants are encouraged to attend the entire virtual conference, but you **MUST** register for each day you would like to attend.

Day One (*February 7, 2024, 12:30-5:00 PM ET*) of the virtual conference will set the stage with panels focusing on:

- Providing a framework for disaster medicine leadership
- How we can measure our effectiveness
- The intersection of clinical care and emergency management
- Preparing future leaders for the role

Day Two (*February 8, 2024, 12:30-5:00 PM ET*) will focus on specific topics of interest to the community, including:

- Medical Operations Coordination Centers
- Crisis Standards of Care
- Disaster medicine in rural areas
- Equitable disaster planning and access to care
- The role of public/private partnerships

For additional details and to register for the virtual conference, please visit [ASPR TRACIE's Conference Information Page](#). Attendance will be limited; register early.

Health Education Unit Updates

The DHSS Health Education Unit does not have any Instructor Information Meet Ups scheduled at this time. They are currently revamping this with new times to help reach those who are teaching a class or working. Please check their [website](#) often for updates. If you have questions, please call the Health Education Unit directly at 573-526-5686.

The HEU and Headmaster met with their Test Advisory Panel in March to address some changes in the skills test and knowledge test. These changes were effective on July 1, 2023, so please check the Missouri Headmaster Website for the most recent version of the Candidate Handbook.

CNA Testing Events

All regional dates are viewable on the online calendar at <https://mo.tmutest.com/calendar>. **IMPORTANT** – these are not the only test sites available. If you need a different testing location, please call Headmaster D&S (1-800-393-8664) and ask for the Missouri Team. **PLEASE NOTE:** There have been changes to scheduling tests through TMU and to the paperwork for RN Observers. Please reach out to Headmaster with questions. missouri@hdmaster.com.

Knowledge and Skill testing is available on January 22nd and February 12th at MHCA. Please contact shellie@mohealthcare.com to reserve a time slot.

Updated List of Excluded Individuals and Entities (LEIE) Database File

The Office of Inspector General (OIG) has released its updated List of Excluded Individuals and Entities (LEIE) database file, which reflects all OIG exclusions and reinstatement actions up to, and including, those taken in December 2023. This new file replaces the updated LEIE database file available for download last month. Individuals and entities that have been reinstated to federal health care programs are not included in this file.

The updated files are posted on OIG's website [here](#). Healthcare providers have an "affirmative duty" to check to ensure that excluded individuals are not working in their facilities or face significant fines. As a best practice, long term care providers should check the LEIE on a regular basis.

Workforce Shortage - Utilizing MO Division of Developmental Disabilities and Nexus to Fill Shortages in Non-Clinical Positions

MHCA and the other long-term care associations participated in a call with the SLCR, the MO Division of Developmental Disabilities, and Nexus to discuss utilizing persons with barriers to employment to fill non-clinical jobs in long-term care facilities. There is a lot of opportunity out there for both the employees and providers. If you are interested in learning more, please click on the following links:

- [MO Division of Developmental Disabilities](#) - On this webpage, there is a tab "Where can I find employment service providers?" and within this tab, there is a listing by region of contract employment providers who assist to connect participants with businesses seeking talent.
- Nexus – To learn more about this organization, please see their [brochure](#), [business flier](#), and [territory map](#).

Quality, Programs and Resources

AHCA Unveils Theme for National Skilled Care Nursing Week 2024

AHCA Unveils *'Radiant Memories – A Tribute to the Golden Age of Radio'* as the 2024 Theme for National Skilled Nursing Care Week. AHCA has unveiled the theme for National Skilled Nursing Care Week (NSNCW), which will take place from Sunday, May 12 to Saturday, May 18, 2024. The annual, national observance celebrates the essential role that skilled nursing care facilities play in providing safe and effective 24-hour nursing care to millions of individuals each year.

The 2024 theme "Radiant Memories – A Tribute to the Golden Age of Radio" embraces a time when the airwaves resonated with captivating stories and melodies. More than nostalgia, "Radiant Memories" is a call to honor the enduring legacy of skilled nursing facilities. In these facilities, residents and staff contribute to the creation of radiant memories, akin to the cherished moments shared through music and stories over the radio waves.

Radio broadcasts have played a pivotal role in American life, from Presidential fireside chats and war updates to old-time radio dramas and American Top 40 hits. Families and friends gathered around the radio to hear the latest music and tune into their favorite shows.

Established by AHCA in 1967, NSNCW starts each year on Mother's Day and encourages skilled nursing facilities around the country to host a variety of events that shine a light on the individuals who reside, work, and volunteer in nursing facilities while adhering to infection control requirements.

The "Radiant Memories – A Tribute to the Golden Age of Radio" logo is now available for download on nsncw.org. In February 2024, AHCA will release a comprehensive planning guide and exclusive products to assist in creating a meaningful and unforgettable NSNCW experience. Participants are asked to share their radiant memories leading up to NSNCW on social media with the hashtag #NSNCW.

Keep Working on Your Quality Award Applications

Completing a successful Quality Award application takes time to prepare. We encourage you over the next few weeks to keep working on your applications and submit them before the **deadline on Thursday, January 25, 2024**. If you have not already done so, take advantage of the free resources!

Bronze Quality Award Workshop

The National Quality Award team is hosting a virtual workshop for members interested in submitting a 2024 Bronze Quality Award on **Wednesday, January 10, 2024, at 1 pm CST**. Join hosts Pamela Truscott, Director of Quality Improvement at NCAL, and Tim Case, Administrator of the Quality Award Program, as they guide you through the nuances of the Bronze application process.

Participants will gain valuable insights and strategies to improve the application process:

- Participants will become aware of ways by which the Bronze criteria can form the foundation for a robust quality improvement culture.
- Participants will become aware of key 2024 Bronze award dates and headlines.
- Participants will understand ways to leverage the insight gained through the Bronze application to align management, the workforce, priorities and quality efforts.
- Participants will produce complete or near complete responses to the 5 most-missed Bronze criteria.
- Participants will be prepared to use the Bronze Series of videos to complete a full application.

Please click [here](#) to register to secure your spot for this FREE event, which is open to everyone interested in elevating their commitment to quality. Whether you've submitted an intent to apply or not, you can attend the

workshop and apply before the deadline on Thursday, January 25.

The Criteria Series

Watch the Criteria Series, a series of short videos covering an individual application question or category in the criteria to help guide you through the process.

- [Bronze Criteria Series – Watch Now](#)
- [Silver Criteria Series – Watch Now](#)
- [Gold Criteria Series – Watch Now](#)

Criteria Submission Templates

If you are submitting a silver or gold application, then don't forget to use the [Criteria Submission Templates](#) as these can help you create a phenomenal application.

How to Navigate the Portal

Need help with the Portal? Take some time to review these Help documents to ensure a smooth submission process.

- [Logging in to the Quality Award Portal](#)
- [Gaining Access to your Facility](#)
- [Submitting an Online Application](#) (Bronze Applicants Only)
- [Uploading a PDF Application](#) (Silver and Gold Applicants Only)
- [Submitting an Application Fee Payment](#)

Visit the [National Quality Award website](#) to access essential resources. If you have any questions, contact the [Quality Award team](#).

The Center for Excellence for Behavioral Health in Nursing Facilities

Beginning September 2023, the Center of Excellence for Behavioral Health in Nursing Facilities (COE-NF) will host six (6) one-hour monthly cohort sessions. **These sessions are FREE to attend!** Join them for the opportunity to learn industry best practices from other nursing facilities and behavioral health subject matter experts. With the support of COE-NF behavioral health specialists, you will be able to implement the learnings in your facility. The last two cohort sessions are:

January 18, 2024: Incorporating BH & SUD into Individualized Assessment & Person-Centered Care
February 15, 2024: De-escalating Behavior

Please see the [flyer](#) and [register here](#).

COE-NF continues to offer [on-demand training videos](#), which includes bite-sized learnings and longer video modules with pre/posttests on topics such as Schizophrenia, Bipolar Disorder, Mental Health, and Substance Use. They also offer a wide array of resources on a multitude of mental health topics via the [resource hub](#). One of the newest resources available is a [tip sheet](#) to help manage residents with the holiday blues.

Other Links:

- [The Center of Excellence Fact Sheet](#)
- [December 2023 Newsletter](#)
- [Sign up for the monthly newsletter](#)

QIPMO

QIPMO has a [dedicated website](#) with important information and helpful links on COVID-19 and how to prevent the spread in nursing homes. Your QIPMO nurses and LTC Leadership Coaches are always available to help and guide you with any questions or concerns you may have. Their contact information is available [here](#). Provided below is some resources and services from QIPMO that can benefit your facility in maintaining and enhancing your infection prevention and control processes:

- [Infection Control Manual](#)
- [Infection Preventionist Zip Kit](#)
- [Infection Control Assessment and Response \(ICAR\) Team evaluation](#) - ICAR assessments are free of charge and provide non-punitive feedback on your existing practices. You will receive immediate feedback during an ICAR assessment (virtual or onsite), followed by a detailed report. Your ICAR feedback report can be used as an internal working document to support your existing Quality Assessment and Assurance (QAA) program. For more information or to schedule an ICAR for your facility, email musonicarproject@missouri.edu.

New Region 1 / Springfield QIPMO Nurse and ICAR Advisor Coverage

QIPMO is happy to announce that they've filled the Region 1/Springfield nurse position. Andrea Jones started on December 1. Here is her contact information:

Andrea Jones
MSN, MHA, RN, CCP
andrea.jones@missouri.edu
(417) 576-4614

If you have general questions, contact musonqipmo@missouri.edu.

Also, the Region 1/Springfield ICAR Advisor, Linda Hagler-Reid, has resigned from her position with the ICAR team to pursue a new career path. Effective December 1, the other ICAR advisors are stepping up to offer assistance for facilities in the southwest area, as noted below **by county**. Please reach out to them if you need any clinical/educational assistance.

Carolyn Gasser
gasserc@missouri.edu
(913) 626-9723

Barry | Barton | Cedar | Dade | Greene | Henry | Jasper | Lawrence | St. Clair | Vernon

Shari Kist
kistse@missouri.edu
(636) 489-8154
Dallas | Hickory | Laclede | Polk

Sue Shumate
shumatase@missouri.edu
(636) 489-8270
Christian | Douglas | Ozark | Stone | Taney | Webster | Wright

For ICAR inquiries, email musonicarproject@missouri.edu.

Enhanced Leadership Development Academy for LTC Leaders

Do you.....

- need a leadership course that addresses the unique challenges SNF leaders face?
- want to feel inspired and passionate about leading your SNF?
- want to connect with other SNF leaders and have access to free professional development, tools, and resources?
- want free CE credit without sacrificing quality and practical application?
- want to have the flexibility to learn at the pace and place the works best for you?

If you answer YES to any of these questions, this course may be for YOU! Open to RNs, NHAs and LPNs! For more information visit this [web site](#), download the [postcard](#) or contact Todd Winterbower at winterbower@missouri.edu. Please take the [survey](#) now to see if you qualify for FREE registration.

HQIN Assistance

Health Quality Innovators (HQI) serves as the CMS-designated Quality Improvement Organization (QIO) for Missouri. Facilities throughout the state partner with the Health Quality Innovation Network (HQIN) on various projects to improve operational processes and clinical outcomes.

HQIN is funded by CMS to deliver no-cost education, resources, and technical assistance to nursing homes through the Quality Innovation Network - Quality Improvement Organization (QIN-QIO) Program, a role formerly held by Primaris. HQIN's team of nursing home experts will help you create an action plan to establish a strong infection control and surveillance plan so you can comply with new CMS requirements and ensure the safety of your residents and staff. To learn more about HQI and HQIN, visit www.hqin.org or contact Judy Carte, jcarte@hqi.solutions.

Save the Date for Careers in Aging Month

In the past, AHCA/NCAL and providers across the country have celebrated Careers in Aging Week to bring recognition to the numerous career opportunities available in long term care and aging services and to celebrate current caregivers in the industry. In 2024, they are extending the celebration, and the month of March will now be dedicated to Careers in Aging month! You can join AHCA/NCAL in promoting these rewarding careers for the month-long observation.

Working in long term care provides endless opportunities, including the chance to serve one of our nation's most vulnerable, special populations. The focus in these roles is on treating the whole person, not just a medical condition, and there is amazing potential for career advancement. Along with these benefits and more, working in the long term care community truly improves the lives of millions in positive and supportive work environments. A career in long term care brings a sense of purpose, turns residents and caregivers into family, and can be a great steppingstone to kickstart a successful career in health care.

During Careers in Aging Month, AHCA/NCAL will share stories, resources, and more. You can help them spread the word by retweeting on Twitter or sharing their posts on Facebook and using the hashtag #CareersinCaring. Learn more about [how you can participate](#) or visit www.careersinaging.com for more resources.

Assisted Living Update

Assisted Living Survey Preparedness Document

The Assisted Living Survey Preparedness document is available on the [AHCA/NCAL website here](#). Survey preparedness is an essential element for assisted living leadership. Understanding what may be included in the assisted living survey can help assisted living facilities understand the critical components that surveyors may be looking at upon inspection.

The information contained within this document is not all-inclusive but will identify elements to include in an effective mock survey, such as environmental services, food service, personnel, medication management, and nursing.

Membership Updates & Services

January 2023 - Employee Recognition Program

In the month of January, MHCA will recognize **Activity Professionals**. To request certificates for your personnel, please click [here](#) or login to your member account to fill out the online form. Or if you have the ability to print color certificates, click [here](#) to fill in names and print directly at your facility. This is a members only service, so please sign in to view/print the certificates.

Career Opportunities In Long-Term Care

Administrator - Country Club Care Center has an immediate opening for an Administrator at their location in Warrensburg, MO. For full details, please click [here](#).

To place an ad with us, go to the [Career Center](#) on our website and login using your Website Login information (not your Account Login information) or email [Teresa Baysinger](mailto:Teresa.Baysinger), Accounts Manager.

Request For Updated Information for Facilities

Has your administrator or DON recently changed? Has your facility recently undergone an Owner or Operator change? If so, we want to know! For MHCA to keep your facility record as current as possible, we ask that any facility member who has experienced a change in administrator, owner, or operator within the last 30 days please inform us of this change as soon as possible. It is our goal to keep our member facilities and their owners/operators up to date on the most current issues in the long-term care industry. If we do not have the most up to date contact information, we are not able to accurately provide these important updates to you or your owners/operators. Please click on the appropriate form below that best meets your change request. Fill out the form in full and then click submit. Once the form is received, the information will be updated.

If you have questions, please contact Teresa Baysinger, teresa@mohealthcare.com or 573-893-2060.

- [Change of Facility Administrator form](#)
- [Change of Facility Owner form](#)
- [Change of Facility Operator form](#)

2023 MHCA SPONSORS!

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Education Sessions, Meetings & Events

Workshops & Seminars: In-Seat and Hybrid

[Insulin Training Workshop](#)

January 9, 2024 | 12:00 p.m. - 4:00 p.m. | Jefferson City

[CMT/Insulin Certification Workshop](#)

January 9 - March 12, 2024 | 4:00 p.m. - 8:00 p.m. | Jefferson City & Virtual

[Clinical Supervisor Hybrid Workshop](#)

February 7 | 8:00 a.m.—12:00 p.m. | Jefferson City & Virtual

[CNA Instructor Hybrid Workshop](#)

February 7 | 12:15 p.m. - 4:00 p.m. | Jefferson City & Virtual

[CMT Instructor Hybrid Workshop](#)

February 8 | 8:00 a.m. - 12:00 p.m. | Jefferson City & Virtual

Virtual Workshops & Webinars

[Online Activity Director Workshop](#) & [Online Social Service Designee Workshop](#). Both courses are held on a monthly basis. Next courses are January 2, 2024 - February 6, 2024

[Deconstructing IJ & High Risk Tags Webinar Series - “Immediate Jeopardy Risk: Elopement”](#)

January 9 | Live Webinar

To register for the full 2024 series, please [click](#) here.

[Documentation in Depth Webinar Series - “Documentation for Falls & Accidents”](#)

January 16 | Live Webinar

To register for the full 2024 series, please [click](#) here.

[Updates on Wound Regulations in Long-Term Care |](#)

January 18 | Live Webinar

[Behavioral Health: Care Process for Residents with Dementia Webinar Series](#)

February 8, 15, 22, 29 | Live Webinars

[Deconstructing IJ & High Risk Tags Webinar Series - “Immediate Jeopardy Risk: Falls & Accidents”](#)

February 12 | Live Webinar

To register for the full 2024 series, please [click](#) here.

[Documentation in Depth Webinar Series - “Documentation for Behavior Health & Mental Illness”](#)

February 20 | Live Webinar

To register for the full 2024 series, please [click](#) here.

Online C.N.A. Student Training and more can be found at: <https://www.staffdevelopmentsolutions.com/eb-courses/>

MHCA is proud to partner with [CEUSrEZ](#) to provide our membership with discounted online CEU! Use Promocode MHCA2023 for 20% off!

[NAB Preceptor Training](#) - This online training program for Preceptors is divided into four unique modules of education. Preceptors will be able to earn NAB-approved continuing education (CE) for completion of each of the modules below and successfully passing the post-test. Each module is worth 1.25 NAB-Approved CEs.

District Events

- District 3 [Holiday Party](#) | February 1 | St. Louis Wine Market, St. Louis
District 6 [Business Meeting](#) | January 12 | Fiddlestiks Food & Spirits, Hannibal
District 7 [Holiday Party](#) | January 25 | Prison Brews, Jefferson City

AHCA/NCAL Webinars - Online Training

- [Facility Assessments 101: The Driver of Resources, Training, and Competencies](#) - Online Training
- [Mindfulness-Based Stress Reduction Training](#) - Online Training
- [Prepare for Compliance Now](#) - Online Training
- [Building Trust: A Strategy to Improve Patient Safety, Staff Wellbeing & Vaccine Uptake in Long Term Care](#) Free Four-Lesson Virtual Program
- [PHI Coaching Supervision](#) - Online Training
- [Infection Preventionist Specialized Training - IPCO Version 2](#) - Online, Self-Study Program
- [Using UV-C Disinfection to Advance Environmental Safety in Healthcare](#) - On-Demand Webinar
- [Creating Inclusive Communities for LGBTQI and HIV+ Older Adults](#) - Online Training
- [Functional Outcomes Improvement](#) - Online Training