



Missouri Health Care Association

# Weekly Update

March 29, 2024

## CMS Issues FY2025 Proposed Payment Rule

Yesterday, the Centers for Medicare & Medicaid Services (CMS) issued the [proposed rule](#) for the skilled nursing facility (SNF) prospective payment system (PPS) for fiscal year (FY) 2025.

Highlights include:

- The proposed rule would **increase SNF PPS rates by 4.1%**, or approximately \$1.3 billion, beginning October 1, 2024. This is based on the proposed SNF market basket increase of 2.8%, plus a 1.7% market basket forecast error adjustment, and a negative 0.4% productivity adjustment.
- The above impact figures do not incorporate the SNF Value-Based Purchasing (VBP) reductions for certain SNFs subject to the net reduction in payments under the SNF VBP; those adjustments are estimated to total \$196.5 million in FY 2025. CMS is proposing several operational and administrative proposals for the SNF VBP program.
- The proposed rule includes updated guidelines surrounding enforcement authority, related to Civil Monetary Penalties (CMP). Under the proposed rule, State Survey Agencies, along with CMS would have the authority to issue Per Diem and Per Instance CMPs on the same survey, and the authority to issue multiple Per Instance CMPs for the same type of noncompliance.
- CMS also proposes updates to the SNF Quality Reporting Program (QRP) and to update the SNF PPS wage index.

Learn more in the CMS [fact sheet](#) and view the proposed rule in the [Federal Register](#).

AHCA is currently reviewing the proposed rule in greater detail and will share a more detailed summary in the coming days. AHCA will also host a member webinar on **Friday, April 5, 2024**. More information, including the registration link, will be provided soon. The webinar will be recorded for those unable to participate in person.

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## FY2024 SNF Medicaid Reimbursement Update

The new SNF Medicaid rates reflecting the \$10 PPD increase and \$.87 VBP incentive were keyed into the state's system on Wednesday, March 6. All Medicaid days billed on or after that date were paid at the new rate and should have been included in your March 19 payment. All Medicaid days billed before March 6 were paid at the old rate

on March 19. The difference in the old rate and new 1/1/24 and 7/1/23 rates for all Medicaid days paid at the old rate will be included in your retro payment. **Please note: if your March 19 payment was not paid at the new rate, it was a timing issue and your next payment should reflect the new rate.**

The state projects the retro payment for any increases you received to your rate on 7/1/23 and 1/1/24 will be paid with your April 25 payment.

Please remember, if you have a recoupment owed to the state due to rate reductions as a result of a decrease in your 1/1/23, 7/1/23 and/or 1/1/24 CMI/VBP incentive – that recoupment will be taken out of any retro payment due to you. In regard to the recoupments, I have been told there are a small number of facilities whose recoupments were larger than the amount owed to them for the \$10 retro pay. MO HealthNet will work with us on a fair recoupment process for any facilities in that situation.

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## **Upcoming Webinars: Understanding Changes in COVID-19 Vaccine Reporting Starting April 1**

The NHSN will host a webinar on [Tuesday, April 2 at 1:00 pm CST](#), providing an overview of important updates to the definition of long term care reporting for COVID-19 vaccines. Advance registration is required to receive an email confirmation with the webinar details.

As previously announced, starting Monday, April 1, the criteria for begin considered up to date with COVID-19 vaccine reporting will change. These changes are in alignment with the latest recommendations from the Advisory Committee on Immunization Practices and the CDC. The adjustment ensures the most effective vaccine protection for residents aged 65 years and older.

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## **CDC Adds Resources and Information to Implement Enhanced Barrier Precautions**

The CDC has a suite of tools and resources to assist nursing homes with implementing [Enhanced Barrier Precautions \(EBP\)](#) as outlined in [CMS' recent memo QSO-24-08-NH](#). CMS is updating its infection prevention and control guidance at F880 to align with the CDC's recommendations to protect residents from the threat of multidrug-resistant organisms (MDROs).

Resources from the CDC include a continuing education (CE) webinar recording and slides from November 15, 2022, a pre-implementation planning tool, an observations tool, an observations tool summary spreadsheet, a template letter you can modify for nursing home leadership as well as videos and print resources. Please find links to these helpful resources below:

**[\(READ MORE\)](#)**

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## **REMINDER: CDC NHSN Open Office Hours for Annual Health Care Personnel Influenza Vaccine Reporting**

The CDC has scheduled an upcoming open office hours for reporting the annual Healthcare Personnel Influenza Vaccination Data (registration is required). **Facilities are required to report this data by May 15, 2024, under the Skilled Nursing Facility Quality Reporting Program (SNF QRP) or may face a two percent reduction to their Medicare annual payment update for FY 2025.**

The next upcoming open office hours is [Thursday April 25, 2024 at 2pm EST](#). Pre-registration is required.

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## **Change Healthcare Update: Payer Contacts and Resources**

Recently, the U.S. Department of Health and Human Services (HHS), CMS, and the Administration for Strategic Preparedness and Response (ASPR) provided additional [information and resources](#) for providers impacted by the Change Healthcare security incident. Resources include information to help providers connect with payers, links to payer resources, information on advanced payments, and more.

The multi-agency letter notes that the federal government continues to hear from providers having difficulty getting answers from some health care plans about the availability of prospective payments or flexibilities that are needed until the Change Healthcare disruptions are resolved. Providers who have been unsuccessful in obtaining needed flexibilities or payment help from their health plan's local or regional contacts should contact the [HHS helpdesk](#).

The multi-agency letter also encourages providers, as this situation resolves, to consider reviewing and implementing HHS's voluntary [Healthcare and Public Health Cybersecurity Performance Goals](#). If you have additional questions for HHS regarding the Change Healthcare cyberattack, please reach out to [HHScyber@hhs.gov](mailto:HHScyber@hhs.gov).

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## **Facility-Initiated Transfers and Discharges**

As a reminder, facility-initiated transfers and discharges (including emergency situations) are required to be sent to the regional ombudsman office. Please see the attached [letter](#) for more details. An updated email address for each ombudsman office is listed on the attached [map](#).

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## **OSHA Regulation of Infectious Disease in Long-Term Care**

While OSHA does not currently have a specific infection prevention standard tailored for long term care facilities, it regulates employee exposure to infectious disease through the [OSHA General Duty Clause](#) and existing standards, like the [Bloodborne Pathogen Standard](#). OSHA is also drafting and expected to issue a more comprehensive infectious disease standard.

### Current Regulation Status

Traditionally, OSHA has focused on disease transfer through blood or other potentially infectious fluids because the Bloodborne Pathogen Standard narrowly addressed those modes of transmission. Years before the emergence of COVID-19, however, OSHA began to look at the spread of infectious disease more broadly, and it continued those efforts throughout the pandemic.

Currently, OSHA requires health care providers to continue following the Bloodborne Pathogen Standard and to implement known and feasible methods of preventing the spread of infection through contact, droplet, and airborne transmission. OSHA has published [guidelines on infection control](#), many of which may already be used by health care providers to address patient or resident safety. OSHA enforces compliance with those guidelines through the General Duty Clause as discussed previously in [Ergonomics 201: Controls, State Regulations](#), and Resources and

[Workplace Violence in LTC](#). Within those standards and guidelines, providers should also be mindful of related OSHA standards, like the [Respiratory Protection Standard 1910.134](#), which is triggered when addressing airborne hazards, or the [1910.132 – PPE General Requirements](#), which includes other precautions, like gloves, gowns, and eye protection.

[\(READ MORE\)](#)

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## **2024 AHCA/NCAL Award Nominations Open on April 1**

**Nominations for the 2024 AHCA/NCAL Awards Program will open on April 1 and run through May 31, 2024.** All nominations will be available via [Award Force](#). Members are encouraged to check back on each of AHCA and NCAL's award pages for more information, including rules and guidelines.

[\(READ MORE\)](#)

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## **Administrator License Renewals**

**IMPORTANT:** Missouri licensed administrators (NHA or RCAL) expiring June 30, 2024, are due for license renewal. If you plan to renew, please visit the BNHA website at <https://health.mo.gov/bnha> for important information regarding continuing education and license renewal.

Once your renewal has been successfully processed, you will be issued a current license via email. Please note if you fail to renew by June 30, 2024, you cannot practice as a licensed administrator after that date.

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## **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](mailto: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.

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## **Health Education Unit Updates**

The DHSS Health Education Unit is conducting Weekly Instructor Info Webinars/Q&A Meetups. These sessions will be held the same day and time each week - **every Tuesday at 2:00 pm**. Click this [link](#) to join these weekly meetings. If you have questions, call the Health Education Unit 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 will be effective

on July 1, 2023, so please check the Missouri Headmaster Website for the most recent version of the Candidate Handbook.

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## CNA Testing Information From TMU/Headmaster

Below are the links for the CNA test Candidate Handbook and the Mock Skills. If you have students in your facility who are ready to test with TMU/Headmaster, please make sure they have access to both documents. It is very difficult for a student to pass without reviewing these documents. These are updated often.

- <https://health.mo.gov/safety/cnaregistry/pdf/missouri-candidate-handbook.pdf>
- <https://www.hdmaster.com/testing/cnatesting/missouri/forms/MO%20MOCK%20SKILLS%207.2023.pdf>

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## CNA Testing Events

All regional dates are viewable on the online calendar at <https://mo.tmutest.com/calendar>. To help with scheduling your testing event, contact Headmaster a few days after the CNA course starts. **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](mailto:missouri@hdmaster.com).

Knowledge and Skill testing is available March 25, April 8, and April 15 at MHCA. Please contact [shellie@mohealthcare.com](mailto:shellie@mohealthcare.com) to reserve a time slot.

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## HQIN Strategies to Use During Your Nursing Home Stand-Up Meetings

HQIN is presenting an educational series tailored for nursing home stand-up meetings, aimed at decreasing preventable emergency room (ED) visits and hospital readmissions. HQIN is sending out talking points that can be included in daily stand-up meetings to increase staff knowledge on relevant topics like effective communication, adverse drug events and infection prevention. The program is designed to empower nursing home staff with practical knowledge to foster a safer environment.

This week's strategies include **Falls**. Below is an overview of information and resources.

**(READ MORE)**

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## The Center Of Excellence For Behavior Health in Nursing Facilities

The COE-NF released [new education events for March](#) that offers Accreditation Council for Continuing Medical Education (ACCME) credits. The COE-NF also continues to provide [tailored technical assistance](#), such as an individualized plan to assist your facility with specific behavioral health needs to include training as needed.

The COE-NF also has [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, Substance Use, Trauma Informed Care, and Alcohol Use Disorder. They also offer a wide array of resources on a multitude of mental health topics via the [resource hub](#).

Other Links:

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

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## **Want to Improve Your COVID-19 Vaccination Rates? HQIN Can Help!**

Vaccines protect us all from illness and disease, but they are especially critical for our most vulnerable populations. Particularly, the COVID-19 vaccine provides increased protection to adults ages 65 years and older.

In their continued effort to support the health and well-being of older adults, the Health Quality Innovation Network (HQIN) provides FREE COVID-19 vaccination clinic support, through a partnership with [CPESN-USA](#), a clinically integrated network of community-based pharmacies. Their team of experts can assist you in securing vaccine doses and coordinating healthcare professionals to immunize and provide vaccine education to residents and staff. In addition to COVID-19 vaccines, support is also available for pneumococcal and influenza vaccines. Simply complete the [Nursing Home COVID-19 Vaccine Clinic Support Request Form](#) to start the process today!

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