

# Nursing Facility Quality Payment Program Work Group

October 23, 2019

1:30pm to 3:00pm

Conference Room D-East

## Agenda

### Introductions

**Phone/WebEx:** Kenny Hutchison (CBSI), Amy Seils (Ensign), Paul Arnell (Cascadia)

**In-Person:** NF Representatives - Kris Ellis (IHCA), James Winfield (Cascadia, IHCA), Steve La Forte (Cascadia, IHCA), Rick Holloway (Boise VA), Bill Ulrich (CBSI) and Chris Hansen (Ensign)

Myers and Stauffer – Tammy Martin, Krista Steffani and Darin Lloyd

Medicaid – Alexandra Fernández, Aaron Howard, Angela Toomey, KayLee Leavitt and Alexandria Childers-Scott

### Updates regarding the Patient Driven Payment Model and UPL

- Idaho is not adopting the optional state assessment at this time.
- Information Release from the Department was posted on September 26<sup>th</sup>, 2019
- <https://healthandwelfare.idaho.gov/Portals/0/Providers/Medicaid/MA1913.pdf>

### Discrepancy Process

- Alternate in case of conflict of interest
- The work group acknowledged this was a good idea. An alternate will be selected if the opportunity arises.

### Pain Quality Measure

- No longer a measure that can be used in the NFQPP, alternate is needed
- A stakeholder suggested not replacing the pain measure and leaving the 9 quality measures. The work was amenable to this. Myers and Stauffer and Medicaid will review potential impact to providers by removing the measure from next year's quality measure scores. Concern for facilities working to improve this measure over the last 3 quarters being negatively impacted was raised by Medicaid.
- Myers and Stauffer mentioned that the physical restraint quality measure is no longer on the CMS Five Star but they still have access to the data in order to continue use of this quality measure for the NFQPP.

- Stakeholders noted that CMS may remove section G from the MDS which would impact the mobility and late loss ADLs quality measures. If this occurs the work group will have to evaluate other quality measure options.

## UPL Pool and BCUs

This year's UPL pool was less than prior years. Most likely this can be contributed the recent increase in number of approved Behavioral Care Units (BCUs). IHCA has a subcommittee discussing this concern further.

It was requested for the state to explain the BCU designation. BCU is an Idaho Medicaid designation to nursing facilities that have applied and demonstrated the following:

- At least 20% of total bed days must be dedicated to BCU participants
- Meet program standards as outlined in IDAPA 16.03.10.266
- BCU participants must have a qualifying medical or mental health diagnosis and present with one of the following behaviors at a frequency that demonstrates need for additional direct care interventions:
  - Physical Abuse (i.e. hitting, pinching, slapping of staff or peers)
  - Verbal Abuse (i.e. profanities, threats to staff or peers)
  - Socially inappropriate behaviors (i.e. yelling, screaming, undressing in common areas, may or may not be directed at anyone but is disruptive to peers and requires intervention)
  - Wandering (i.e. intrusive to other residents' rooms or areas off limits to residents and requires intervention)
  - Resisting Cares (i.e. refusals that have or most likely will increase risk of exacerbation of chronic conditions, skin breakdown, infections.)

There are currently 21 BCUs in the state with two nursing facility applications pending. This equates to roughly 1/3 of nursing facilities in Idaho.

The workgroup discussed various potential changes that would impact both BCU and non-BCU facilities. A few are listed below:

- Remove the quality measure incentive for BCUs, currently receive the better of their actual score or the state median for Pain, Late Loss ADLs and Antipsychotic Use
- Increase the 20% bed day threshold
- Place a cap on number of BCUs that can operate in the state (Has access improved for individuals with behaviors?)
- Place BCUs within their own UPL class

The subcommittee will provide a proposal for any changes to the UPL provider classes, potential BCU rule changes and/or changes to the quality measures for the BCU facilities. The proposal will be submitted to the Department no later than 12/31/2019 to allow time for review, research and maintain compliance with federal and state rules for implementing any proposed changes.

## Open Discussion

A stakeholder raised questions in regards to the Shadow Payment Letter that was sent to participating nursing facilities earlier this month. This question then raised concerns that nursing facilities providers were not aware of how the NFQPP will affect their payments starting next year. The Department requested that stakeholders reach out to their colleagues to see if additional education was needed, such as via WebEx. IHCA offered some time for the Department to provide training at their February 6, 2020 meeting as most facilities have a representative attend. The Department will also send out an additional educational letter to nursing facility administrators and post the educational letter on the DHW website.

## Adjourn

The next meeting will be held in April or May of 2020 after the legislative session concludes. The workgroup may convene sooner if needed.