



Nursing Home Weekly: Recap of LeadingAge Updates

December 2, 2022

Upcoming LeadingAge Coronavirus Calls. All calls are at 3:30 PM ET. On Monday December 5, Ryan Brooks, Senior Principal, Healthcare Strategy at National Investment Center for Seniors Housing & Care (NIC) will join us to talk about NIC's latest WAVE of its survey of senior living and nursing home operators. We'll talk to ryan about the new questions that were added in this wave about portfolio diversification and about the finding that 25% of respondents said they are planning to downsize or close their nursing home and or short-term rehab units.

On Wednesday, December 7, Dr. Dan Kelly, from the University of California, San Francisco (UCSF) will join us to discuss their latest study on the impact of vaccines and boosters. Kelly and his team identified 1.6 million people who were fully vaccinated. Three quarters of them were over age 65 and 70% had a pre-existing condition that put them at greater risk of becoming seriously ill from COVID. Even while Delta and Omicron were circulating, these vaccinated and boosted individuals, reported in JAMA, were less likely to experience breakthrough infection and serious illness than those who had not been vaccinated and boosted.

If you haven't registered for LeadingAge Update Calls, [you can do so here](#). You can also find previous call recordings [here](#). Note that to access recordings of the calls you need a LeadingAge password. Any staff member of any LeadingAge member organization can set up a password to access previous calls and other "members only" content.

LeadingAge Letter to the Editor on New Yorker Article: Katie Smith Sloan sent a letter to the editors of the New Yorker regarding the story "How Hospice Became a For Profit Hustle." Please see the letter [here](#) that underscores that differences between our nonprofit and mission driven members and those described in the article as well as a call for action. Member talking points in response to the article can be found [here](#).

SNF VBP Quarterly Reports Now Available. The December 2022 Quarterly Confidential Feedback Reports for the fiscal year (FY) 2024 Skilled Nursing Facility Value-Based Purchasing (SNF VBP) Program are now available to download via the Quality Improvement and Evaluation System (QIES)/Certification and Survey Provider Enhanced Reports (CASPER) reporting system. These reports contain facility and stay-level data and results for the SNF 30-Day All-Cause Readmission Measure (SNFRM) for FY 2019, the FY 2024 SNF VBP Program baseline period. SNFs may submit corrections to their FY 2019 readmission measure rate up to 30 days following this report being made available, until December 31, 2022. Corrections are limited to errors made by CMS or its contractors when calculating a SNF's readmission measure rate. SNFs must submit correction requests to SNFVBP@rti.org with the subject line "SNF VBP Review and Correction Inquiry" along with your SNF's CMS Certification Number (CCN), SNF's name, correction request, and reason for requesting the correction.

2022 Measures Under Consideration (MUC) List Published, Comments due December 7. As part of a newer process, CMS annually issues its Measures Under Consideration (MUC) list that compiles all the

measures that have been submitted for consideration for future inclusion into various value-based and quality reporting programs. Here are the relevant home health and skilled nursing facility proposed measures from the latest [MUC list](#), which includes 2 home health quality reporting program (QRP) measures, 2 SNF QRP measures and 5 SNF Value-Based Purchasing Program (VBP) measures. LeadingAge will be reviewing these measures with the Home Health Network and Quality & Risk Management Networks in the coming days and using this member input for inclusion in our comments back to CMS. Public comments on these measures are due **December 7 at 6:00 PM ET**. If members wish to submit their own comments on these measures, they can do so [here](#). In addition, these measures will be reviewed by the Measures Application Partnership Post Acute Care and Long Term Care Work Group on **December 12**. LeadingAge sits on this work group and will use any feedback from LeadingAge members to contribute to the discussion of these proposed measures.

CDC Clarifies Infection Control Practices. On December 1, the Centers for Disease Control and Prevention clarified and posted revisions to its [Core Infection Prevention and Control Practices for Safe Healthcare Delivery in All Settings](#). CDC states these fundamental standards should be implemented in all settings where healthcare is delivered. Two new practices were added, one on injection and medication safety and the other on minimizing potential exposure. Further, CDC added consideration for broader use of source control during periods of higher levels of community respiratory virus transmission to the section on Minimizing Potential Exposures.

Nursing Home Administrator Turnover. CMS began posting staffing data on Care Compare in January 2022. This data was incorporated into the Five Star Quality Rating System beginning in July 2022 and we have recently heard concern from several members about how administrator turnover is calculated and displayed. Specifically, when an administrator goes on leave for more than 60 days, they are counted as administrator turnover. In most cases, a temporary administrator is filling in and leaves or returns to their previous position when the original administrator returns from leave. This, too, counts as administrator turnover. We have pointed out to CMS that data showing a correlation between administrator turnover and quality of care does not distinguish between true administrator turnover and turnover reflective of administrators on leave and suggested that CMS create a process to adjust Care Compare in these circumstances. CMS has agreed to examine the data and continue this conversation.

Nursing Home Ownership Data. CMS began posting nursing home ownership data on Care Compare in April 2022. We have recently been contacted by a number of members who observed errors in the information. CMS states that the ownership information displayed publicly is based on the 855 Provider Enrollment form. Should you notice errors in your publicly reported ownership data, CMS encourages nursing homes to reach out to your Medicare Administrative Contractor (MAC) to make corrections. Find out who the MAC is for your area [here](#).

NIC Wave 47 Results Released. The National Investment Center has released its latest executive survey results, known as [WAVE 47](#). *The findings will be the topic of our guest discussion on the LeadingAge Coronavirus Update Call on Monday, December 5 (see item #1 for details).* The survey featured new questions on portfolio diversification and acuity of services across the continuum. Smaller organizations (those with fewer than 9 properties) were more likely to be considering portfolio diversification into low acuity services, and 25% of respondents indicated they were planning to downsize or shutter their SNFs and/or short-term rehab facilities over the next 12 months. Larger organizations, defined as those with

26 or more properties, were overwhelmingly not considering diversification at all (78%), with only 22% considering expanding into low acuity services and none considering adding higher acuity/ SNF settings. In terms of care segment changes in the next 12 months, the majority were considering expanding into active adult (53%) or IL (49%) settings, with 24% planning to downsize SNF and 12% planning to downsize short term rehab. Independent Living providers continued to report a steady deceleration (26%) of move-ins, as seen in the last four WAVE Surveys. Reasons for this continued deceleration included a slow down in leads and sales, family member considers, routine seasonality and natural disasters. SNF providers, on the other hand, reported a slight acceleration of move-ins, at 33%. Survey participants this time represented 46 senior living providers across the country - both for and not for profit, and roughly 30% of those were Life Plan Communities.

HHS Proposed Changes to Rules Governing Substance Use Treatment Records. On Nov. 28 the U.S. Health and Human Services Department, through the Office for Civil Rights (OCR) and the Substance Abuse and Mental Health Services Administration (SAMHSA), [announced proposed rules](#) designed to increase provider coordination in treatment for substance use disorder (SUD) and to increase protections for patients concerning records disclosure to avoid discrimination. Among other issues the announcement notes that regulations specific to SUD treatment records impose different requirements than the HIPAA Privacy rule, creating barriers to information sharing by patients and among health care providers, and that Congress has directed HHS to create greater alignment. LeadingAge will review the [proposed rule](#), which is set to be formally published on Dec. 2, and a [fact sheet is available here](#). HHS will accept comments through Jan. 31, 2023, then proceed to issue a final rule. The proposed effective date of a final rule would be 60 days after its publication and the compliance date would be 22 months after the effective date.

Meeting on Medicare Coverage of Vaccines. On November 29, LeadingAge staff attended an invitation only coalition event to discuss policy options for improving vaccination rates (for influenza, COVID-18, pneumococcal, and Hepatitis B) among Medicare beneficiaries and coverage for these vaccines. The group is focusing on: closing the Medicare vaccination coverage gap (9% of Medicare beneficiaries do not have prescription drug coverage); restoring and improving vaccination rates across all recommended vaccinations; improving vaccination readiness and pandemic preparedness; and equity. We were the only aging services provider organization included in the group. Others included organizations representing pharmacies, health plans, and physicians. The conveners of the November 29 meeting will use the discussion to develop an options paper, with a target date of December 31 for a draft paper.

Long-Term Care Imperative Admissions Survey Reiterates Minnesota's Senior Care Staffing Crisis. Minnesota's Long-Term Care Imperative, a collaboration of LeadingAge Minnesota and Care Providers of Minnesota, recently conducted a survey on admission policies of its members designed to gauge access to long-term care around the state. LeadingAge Minnesota [summarizes](#) the key findings of the survey, conducted October 27 – November 22, stating "Minnesota's staffing shortage in senior care is a crisis, affecting seniors and families in every corner of the state. Seniors and their families are waiting for the care they need because there aren't enough caregivers." A few key takeaways that illustrate the significant challenges facing providers statewide:

- More than 60% of assisted living facilities in Minnesota report turning down 1 to 5 admission referrals during October 2022;

- 35% of Minnesota nursing facilities denied more than 21 or more admission referrals in October;
- Nearly 70% of Minnesota assisted living facilities have placed a hold on admissions, and report turning away more hospital admissions than before the pandemic;
- 69% of Minnesota nursing homes and 29% of assisted living locations have placed limits on new resident admissions because of an inability to fill staff positions; and
- 54% of Minnesota nursing homes and 38.5% of assisted living found admissions over the weekends were very difficult to process, due to insufficient staffing.

The Long-Term Care Imperative's goal is to utilize the data to bolster their argument with lawmakers to increase nursing home and waiver rates, so they can pay their skilled, dedicated caregivers the wages they deserve in the upcoming months and throughout the 2023 session. You can access the survey data at LeadingAgeMN.org/resources, and also review the "[Summary - Nov. 2022 Admissions Survey](#)."

OIG Report Finds Providers Didn't Comply with Advance Care Billing Requirements. As of January 1, 2016, Medicare began paying for advance care planning conversations. Payments for these services from 2016 through 2019 totaled more than \$340 million but a new Office of Inspector General (OIG) [report](#) with [brief](#) found \$42.3 million of those payments did not comply with requirements for the services. Specifically, most providers failed to identify how much time during the face-to-face visit was spent on discussions of advance care planning. OIG recommended to CMS more education to providers on documentation and time requirements for advance care planning discussions, recommended Medicare Administrative Contractors work to recoup the identified overpayments and instruct providers on identifying, reporting, and returning any overpayments, and finally that CMS outline when multiple advance care planning services are appropriate, and the documentation required to support these services.

Senators Seeking Data and Recommendations to Better Serve Duals. On November 22, Senators Cassidy, Tim Scott, Cornyn, Warner, and Menendez, released a [request for information](#) (RFI) seeking data and policy recommendations to improve care and coordination for individuals who are dually eligible for Medicare and Medicaid. While dually eligible individuals comprise only 19% of all Medicare beneficiaries, they constitute 34% of Medicare spending; they are 14% of Medicaid beneficiaries accounting for 30% of the program's spending. These individuals were the most likely to contract COVID and were three times as likely to be hospitalized to treat it. LeadingAge will consult with members through member network meetings and other venues as we develop comments to submit.

What Do Policy Makers Need to Know About the Impact of Federal Nursing Home Requirements During the Pandemic? You can weigh in and make sure your voice is heard by taking advantage of this voluntary opportunity. The University of Southern California Sol Price School of Public Policy invites nursing home administrators or other senior nursing facility staff to participate in a research project that will document the types and timing of policies implemented in response to the COVID-19 pandemic and the prevailing attitudes of both staff and residents/families to these policies. The researchers are looking for one response per facility from at least 500 nursing homes. The survey [https://usc.qualtrics.com/jfe/form/SV_6WLP0rPSnA4RGzI] is confidential; your responses will not be linked to individual respondents in the final analysis. The research team plans to publish their aggregate findings in a peer-reviewed journal manuscript that will describe key similarities and differences across

regions and facility types and use these insights to make evidence-based policy recommendations for future public health crises. Some respondents may be contacted for optional additional follow-up interviews. You can learn more about this research project on the [Greenwall Foundation](#) website and in this [Information Sheet](#) (please review before responding to the survey). For additional questions, please contact Prof. Jakub Hlávka and the study team at LTCstudy@usc.edu.

2023 Call for Session Deadline is December 5. The deadline for the 2023 Call for Session is rapidly approaching! Submit your original session idea for the opportunity to speak at the 2023 LeadingAge Annual Meeting + EXPO in Chicago, IL. [Read the full guidelines and submit your proposal here.](#)

New Education on the LeadingAge Learning Hub. Several new and recently recorded learning opportunities are available on the LeadingAge Learning Hub.

- December 14 Webinar: Join us on December 14 at 2:00 p.m. ET for the follow-up webinar to the June 2022 [Active Shooter Preparedness webinar](#). The new webinar, [Active Shooter Events: Creating and Maintaining a Secure Environment](#) will detail the appropriate controls residential communities should have in place to recognize, assess, and manage security threats and active shooter situations.
- New DEI QuickCast: [Cultivating Cultures of Belonging is a 20-minute QuickCast](#) about the role of privilege and cultural humility in creating organizations where everyone feels a sense of belonging.
- November Webinar Recording: Already one of the most viewed webinars of the year, [the New MDS V1.18.11: Are You Prepared? webinar](#) offers a detailed look at the new MDS draft and helps skilled nursing providers plan for the changes coming in 2023.
- Medicare Open Enrollment: [In this 18-minute QuickCast](#), Nicole Fallon, LeadingAge Vice President of Health Policy and Integrated Services Policy, reviews what providers can (and cannot) do to educate older adults and their families about Medicare and Medicare Advantage plans.