



## Nursing Home Weekly: Recap of LeadingAge Updates

April 14, 2023

**No LeadingAge Policy Updates calls on April 17 and 19, the week of the Leadership Summit.** On **Monday, April 24**, Mark SooHoo, Health Lead at Meteorite and Health Action Alliance, will join us to talk about the recent publication, "[Three Years of COVID-19: Lessons Learned and Next Steps for Employers](#)". You can also find previous call recordings of every 3:30 LeadingAge call [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.

**Upcoming Healthcare Workforce Hearing.** On April 19, 10am ET, House Energy and Commerce Committee Chair Cathy McMorris Rodgers (R-WA) and Health Subcommittee Chair Brett Guthrie (R-KY) will hold a legislative hearing examining current federal government programs to support health care work force and improve primary care. Ms. Carole Johnson, the Administrator of the Health Resources and Services Administration, is among the witnesses scheduled to testify at the two-panel hearing. [More information can be found here.](#) [The hearing can be streamed here.](#)

**MACPAC Discusses Status of Medicaid Unwinding.** The Medicaid and CHIP Payment Advisory Commission (MACPAC) is monitoring state activities related to the end of continuous Medicaid coverage. Commissioners voiced support for elevation of best practices, including small changes to call center processes that share wait times or add call-back options. Materials from the full meeting are available [here](#). Best practices were noted in some states including targeted outreach to populations like dual eligibles that are likely to remain eligible but could be at risk of disenrollment for administrative reasons like failure to complete and return eligibility forms. For populations receiving Medicaid for access to Medicaid funded services like nursing home or home and community-based services, there may be delays on state asset verification systems causing disenrollments; providers should remain aware of these timeframes and your state's plan for unwinding. It is important that all people who remain eligible for Medicaid complete their eligibility packets and we urge providers to have conversations with any staff or residents who may be Medicaid eligible about their forthcoming eligibility redetermination packets. All questions on Medicaid Unwinding are welcome, email [Georgia](#). Additional information from LeadingAge is available [here](#); you can access a high level QuickCast on the topic [here](#).

**National Stakeholder Call with the CMS Administrator.** On April 25, 1- 2pm ET, CMS Administrator Chiquita Brooks-LaSure and her leadership team will provide an update on CMS' recent accomplishments and how CMS' cross-cutting initiatives are advancing [CMS' Strategic Plan](#). **RSVP for the call [here](#).**

**PRF Late Reporting Request for RP4 – Due by April 28.** Provider organizations that missed the March 31 Provider Relief Fund (PRF) Reporting Period 4 (RP4) deadline due to extenuating circumstances have a one-time opportunity to submit a late reporting request between April 17 and April 28 at 11:59pm ET. If upon review the Health Resources and Services Administration grants the request, providers will submit their RP4 reports May 15 to June 2, 2023. Providers who do not submit required reports will be required to return the PRF dollars they received and will be ineligible for any future funds as they are out of

compliance with the PRF Terms & Conditions. RP4 covers PRF and ARP Rural funds received between July 1 and December 31, 2021. More information on making a late reporting request due to extenuating circumstances can be found [here](#). Here is a LeadingAge [article](#) with additional details about how to submit a request.

**Milbank Looks at Healthcare Licensure Compacts.** A new [blog](#) from the Milbank Memorial Fund looks at how healthcare licensure compacts can impact access to care. “Although health care licensing is traditionally a state function, rigid state borders can be ill-suited to meet needs in terms of access to care for underserved populations, emergency preparedness, and the changing nature of telemedicine-based care delivery,” the blog says. The piece highlights research and includes a map of states participating in interstate licensure compacts for physicians, nurses, and/or licensed psychologists. As LeadingAge reported in March, [Congress](#) is considering eliminating barriers from interstate compacts to increase healthcare access. Read the Milbank blog, “Can Interstate Licensure Compacts Enhance the Health Care Workforce?,” [here](#).

**HHS Establishes Transition Period for Post-PHE Telehealth Compliance.** The Department of Health and Human Services, Office of Civil Rights [announced](#) the expiration of COVID-19 Public Health Emergency HIPAA Notifications of Enforcement Discretions. With the announcement of the end of the PHE in January, using HIPAA non-compliant communications platforms for telehealth will expire with the PHE on May 11, 2023. OCR stepped in to clarify their regulatory enforcement discretions will give health care providers utilizing noncompliant telehealth a 90-day transition period to come into compliance with the HIPAA rules around telehealth provision. Instead of the waiver for non-compliant telehealth services ending May 12, 2023 with the end of the PHE, non-compliant telehealth services can be used until August 9, 2023. This is with the expectation that providers are working to come into compliance with HIPAA expectations. During this time, from May to August, OCR will not impose penalties on covered providers for noncompliance in connection with good faith provision of telehealth services. OCR stated they will have additional resources for providers during the transition period. Resources for compliance support:

- [HIPAA and Telehealth](#)
- [HHS Releases Guidance on Audio-Only Telehealth Services](#)

**LeadingAge Advises OSHA – Don’t Duplicate Existing Requirements and Avoid Overly Prescriptive Rules.** On April 7 LeadingAge submitted a comment letter to the Occupational Safety and Health Administration, with feedback on a possible future rule related to incidents of workplace violence perpetrated by patients/residents/clients and visitors toward employees in health care and social assistance settings. LeadingAge’s letter specifically said that OSHA should not duplicate existing requirements and must be general rather than overly prescriptive since aging services organizations differ vastly according to size, setting, and the population served. At this stage OSHA has not issued a proposed regulation. Rather, the agency has developed a framework that shows its current thinking about provisions a future rule could include, which it recently brought forward for review and discussion through a [Small Business Advocacy Review \(SBAR\) Panel](#). An article about this OSHA initiative, with a link to our comment letter, [is available here](#).

**Medicare FFS ABN Form Updated:** CMS released an updated Medicare Fee for Service (FFS) Advanced Beneficiary Notice (ABN) (Form CMS-R-131). The ABN is issued by providers, including skilled nursing facilities, home health, and hospice, to FFS beneficiaries in situations where Medicare payment is

expected to be denied. The renewed form is available for use immediately and will be required beginning June 30, 2023. The form expires 01/31/2026. Providers can access Form CMS-R-131 [here](#). Note that skilled nursing facilities should use Form CMS-R-131 for Part B services only and should access Form CMS-10055 [here](#) for Part A services.

**Leadership Summit Policy Session Includes CMS Chief Transformation Officer.** On Wednesday, April 19 at 11:00 AM ET Session 29F – Strategies for Shaping Medicaid’s Next Decade will include Dr. Doug Jacobs who is the Chief Transformation Officer for CMS and CMMI. He will be joined by two other panelists: LeadingAge member Larry Gumina from Ohio Living and Fred Bentley, Managing Partner at ATI Advisory. The panel will discuss where Medicare, Medicare Advantage and CMMI models are headed and strategies for how aging services providers can effectively position themselves for this future. This session is an opportunity to hear from leadership at CMS/CMMI but also for them to hear about the challenges with MA plans and how aging service providers can play a key role in accountable care models.

**Overview of SNF PPS Rule.** The FY 2024 SNF PPS proposed rule was released on April 4 and printed to the Federal Register on April 10. The rule includes a +3.7% payment update and several proposed changes to the SNF QRP and VBP programs. Read an overview of the rule [here](#). A more detailed analysis of the rule will be available for members soon. Comments on the rule are due June 5. LeadingAge will be soliciting feedback from members for comments and providing resources to assist members in submitting comments independently.

**Save the Date: ERC Office Hours.** Calling all LeadingAge members who have decided to pursue the Employee Retention Credit; we are hosting a panel of experts from Venable law firm, CliftonLarsonAllen and Forvis to answer your questions about the complexities you’ve encountered in navigating the ERC. ERC Office Hours will be held on Tuesday, April 25th from 3:30 - 4:30 PM ET; please email Dee ([DPekruhn@leadingage.org](mailto:DPekruhn@leadingage.org)) to register and receive the Zoom link. All members are welcome; this session is specifically tailored to those who have already pursued and/or filed for the ERC.

**Did COVID Change LTC Insurance?** Many LeadingAge members are interested in trends in LTC insurance sales, purchase, coverage, etc. The **Long-Term Care Discussion Group** will meet on Thursday, April 27, from 2:00 – 3:00 PM ET to hear from Sandy Jones, Partner, Faegre Drinker, about “How COVID has Changed Long-Term Care Insurance.” The discussion will include a holistic review of how the LTC insurance industry has been affected in many ways. For example, it will cover claims and policy administration practices, company hiring and staffing/retention, company-wide consistency issues, country-wide care shortages, accommodations, policy and claims exceptions, and increasing experience with fraud, waste, and abuse. No pre-registration needed. To join the call, simply connect to:

[Join Zoom Meeting](#)

<https://ahip-org.zoom.us/j/83679926540?pwd=K3d3NnhHTGE4aGYvTzNRS0c4WEhoZz09>

Meeting ID: 836 7992 6540

Passcode: 071916

One tap mobile

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**New QuickCasts for Nursing Homes on End of PHE.** LeadingAge released a 2-part QuickCast series on the LeadingAge Learning Hub on April 6 to assist nursing home members in navigating the May 11 end of the public health emergency. [Part 1](#) is an 11-minute QuickCast that provides an overview of what nursing homes need to *know* about the end of the PHE while [Part 2](#) is a 16-minute QuickCast outlining what nursing homes need to *do* about the end of the PHE. The 2-part series is available at no cost for LeadingAge members.

**LeadingAge Hosts Discussion on NSPIRE Proposed Scoring Notice.** Following

**Last Week's Recap : Nursing Home Weekly Update from April 7, 2023.** Here is your weekly [Nursing Home Update](#).