

# Nursing Home *Methods*Public Meeting

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August 30, 2016 10 a.m. - 12 p.m. 1. W. Wilson St. Rm 751



# **Agenda**

- Welcome and Opening Remarks
- Methods Changes
- Rate Scenario Modeling Results
- Next Steps



# **Opening Remarks**

#### Welcome!

- Housekeeping items
  - ✓ Sign-in sheet
  - ✓ Teleconference attendance
  - ✓ Use of mute button
- Meeting materials available on <u>https://www.dhs.wisconsin.gov/nh-rates/index.htm</u>



### **Methods** Changes

#### Direct Care Target Window – § 3.124(3)

- The Case-Mix-Neutral Nursing Service Allowance (CMNNSA) is determined as follows:
  - If Case-Mix-Neutral Expense (CMNE) is greater than or equal to the Nursing Services Target (NST) minus \$2.00, then CMNNSA = NST.
  - If CMNE is less than NST minus \$2.00 then CMNNSA = CMNE.



## Proposed Methods Changes

# Supplemental Payments for Local Units of Government — § 3.775

- Two separate calculations; an interim payment calculation; an interim settlement and a final settlement
- Two payments in December and June, eliminating the April interim settlement
- Purpose: administrative efficiency



### **Methods** Changes

# Changes to Developmentally Disabled (DD) Levels of Care – § 3.110

Required by Division of Quality Assurance (DQA) process improvements

DQA will no longer set DD Levels of Care



## **Methods** Changes

# Changes to Developmentally Disabled (DD) Levels of Care – § 3.110

The current four DD Revenue Codes will be collapsed into DD1A level of care (revenue code 190 rate)

- Rates will increase for 13 residents statewide who were at DD2 or DD3.
- Preadmission Screening and Resident Review (PASRR) screens will be completed on DD residents in skilled nursing facilities (SNFs) at a minimum of every two years to continue receiving the enhanced rate.

#### Rate Modeling

Medicaid Access Incentive and Funds for Rate-Setting

Labor Factors

Case Mix Index and Behavioral/Cognitive Impairment Incentive Scores

Inflation Factors

Scenario Results

Jim Robinson, CHSRA



#### **Next Steps**

#### Key upcoming events

- Review of Methods document by provider associations
- Submittal of *Methods* to Centers for Medicare and Medicaid Services (CMS) no later than September 30, 2015
- 2016 cost report template release
- Field audits ongoing through winter



#### **Thank You**

The annual Methods update process relies on provider feedback and expertise.

The audit team appreciates your engagement and commitment.