



DPW/OLTL Regulation and Policy Updates

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Agenda

- Payment and Policy
- Paper Bulletins Discontinued
- Version 5010 and ICD-10
- MDS Activities
- Assisted Living

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Nursing Facility Payment and Policy:

- Rates
 - 2010-11 Final Rates
 - 2011-12 Rates
- Budget Adjustment Factor (BAF) for 2011-12
- 2011-12 NF Assessments
- Participation Review, Final Regulations
- NF PSAE Final Bulletin
- NF Rate Setting System Review

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Rates

- 2010-11 Final Rates for Non-Public NFs:
 - Before We Can Process Retro Claim Adjustments,
 - Need to:
 - Have 5.12 Regs Approved by IRRC
 - Publish Final "5.12" Regs
 - Publish Final Rate Notice in PA Bulletin
 - Issue Final Rate Letters

NOTE: Proposed Rates have been on our website.

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Rates (cont'd)

- 2011-12 County Home Rates:
 - Before we can begin paying at 2011-12 rates,
 - Need to:
 - Publish Proposed Rates Notice
 - Legislature Must Reauthorize BAF in NF Rate Setting
 - Receive CMS's Approval of BAF SPA
 - Publish Final Rates Notice
 - Issue Final Rate Letters

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Rates (cont'd)

- 2011-12 Non-public NF Rates:
 - Before we can begin paying at 2011-12 rates,
 - Need to:
 - Finalize the 5.12 Regulations
 - Publish Proposed Rates Notice
 - Publish Final Rates Notice
 - Issue Final Rate Letters

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Budget Adjustment Factor (BAF)

- Tentative BAF Calculation Expected
 - Subject to Legislative Reauthorization
 - Based Upon Governor's Proposed Budget
 - Subject to Change Based on Outcome of the Budget Process
 - BAF Public Notice
 - Subject to CMS Approval of SPA
 - Quarterly BAF Calculations per Litigation Settlement

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Nursing Facility Assessments FY 2011-12

- Public Notice Proposed Assessments:
- Federal Provider Tax Limit Increases Oct 1
- Proposed Assessment Rates:
 - CCRCs, 0 to 50 Beds, and County Facilities:
 - \$6.59 per non-Medicare Day
 - All Other Non-exempt Facilities:
 - \$28.04 per Non-Medicare Day
- "Supplemental" payments for non-public facilities
\$15.01 per MA day

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Nursing Facility Assessments (Cont'd)

- Proposed Assessment-Funded MDOI per diem for County Facilities: [\\$8.34](#)
- Waiver Request To Be Submitted to CMS:
- Final Assessment Notice
- Posting of “Important Dates” for Submission of Days [\(After all of the above\)](#)
- NOTE: NF Assessment Program Needs to Be Reauthorized in Legislation Next Year

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Participation Review Final Regs

- Revised Statement of Policy Published [April 3, 2010](#)
 - Current Requests for New Bed, Reviewed Under the April 2010 SOP
 - Proposed Participation Review Regs published, [Nov 6, 2010](#)
 - Includes Provisions for Review of Requests for New Beds and for Bed Transfers
 - Final regs need to be published

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NF PSAE Final Bulletin

- Proposed PSAE Bulletin
 - Published for Comments October 15, 2010, Comment Period Ended November 16, 2010
 - 33 Commenters, 300+ Comments and Questions Received
 - Responses are Required in the Final Notice per the PSAE Legislation
- Final Bulletin
 - Anticipated publication August, 2011
 - Effective on date of publication

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Nursing Facility Rate Setting System Review... Consultant Contract

**On hold,
Pending the new administration's review .**

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Enhanced Supplemental Payments (ESP)

- 598 Nursing facilities were eligible for the ESP
- 543 Nursing facilities accepted the ESP
 - 90.8% acceptance rate
 - Over 66.6 million dollars paid

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Survey Access to Behavioral Health Services For NF Residents

- Originally sent to all MA Nursing Facilities on April 4th, via email
- Received feedback from facilities about concerns of potential compliance ramifications.
- We revised the survey to protect facility's anonymity.
- Sent the revised survey, via email, on April 26

Please complete the revised survey, or re-complete it if you already submitted the previous survey

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Discontinued Mailing of Bulletins

- July 1, 2011, paper bulletin mailing will be discontinued
- Effects all MA enrolled providers and interested parties
- How will I receive the bulletins beginning July 2011?

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Bulletins (Cont'd)

- **To sign up for electronic notifications:** Providers that wish to receive notification of a new MAB may sign up for email notifications by doing one of the following:
 - Log on to the [PROMISe™](https://promise.dpw.state.pa.us/portal) internet site (<https://promise.dpw.state.pa.us/portal>) and access ePEAP to choose the option to receive MABs by email and enter a valid email address.

OR:

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Bulletins (Cont'd)

- **To sign up for electronic notifications (cont'd)**
 - Go to the provider page on the DPW website (<http://www.dpw.state.pa.us/provider/index.htm>) and click on 'eBulletins' Listserv option
 - Click 'Join or leave the list (or change settings)'
 - Enter the provider's name and email address.
 - Click 'Join eBulletins'. A confirmation email will be sent, and the provider will be required to click a link from the email to fully join the list.

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*Version 5010 and ICD-10 are coming.
Will you be ready?*

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Overview of X12 v5010

- HIPAA mandated the use of a standardized format for conducting electronic healthcare transactions
 - X12 v4010 is being used today
 - Format Defined in 2001
 - X12 v5010 is an upgrade of X12 v4010
 - Format Defined in 2008
 - Implementation date January 1, 2012
- ** CMS Federal Mandate through the Health Insurance Portability and Accountability Act (HIPAA) of 1996 **

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What is an Electronic Healthcare Transaction?

- When a provider performs any of the following business procedures through a computer system, it is an electronic transaction that is processed by PROMISe™.
 - Verify Eligibility
 - Submit a Claim
 - Claim Status Inquiry
 - Receive a Remittance Advice (how much will you be reimbursed)
- ** Starting January 1, 2012, diagnosis codes will be required on all healthcare transactions **

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What do I have to do to be ready for January 1, 2012?

- If you use the PROMISe™ Internet Portal:
 - You don't need to do anything. The PROMISe™ Internet Portal will automatically be upgraded
<https://promise.dpw.state.pa.us/portal/Default.aspx?alias=promise.dpw.state.pa.us/portal/provider>
- If you use Provider Electronic Solutions (PES):
 - Ensure you have downloaded the most up-to-date version (v3.57)
 - Before 01/01/2012, ensure you have downloaded and installed the v5010 version of PES (v3.58)
<http://promise.dpw.state.pa.us/ePROM/ ProviderSoftware/softwareDownloadMain.asp>

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What do I have to do to be ready for January 1, 2012?

- If you use an in-house program, 3rd party software, or clearinghouse vendor:
 - Contact them tomorrow!
 - Ask them what their v5010 plans are.
 - Will they be ready?
 - Are they aware of the Department's requirements for certifying software?
- Certification:
 - DPW is requiring all trading partners and covered entities, who are currently certified under v4010 to recertify using the new transaction versions.
 - Includes Clearinghouses, Service Bureaus, Software Vendors, Individual Providers, Provider Groups, County Consolidated Community Reporting and Managed Care Organizations.

<http://www.dpw.state.pa.us/provider/promise/certification/index.htm>

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ICD-10 Introduction

- The Internal Classification of Diseases (ICD) is the international standard for diagnostic classification for many health management purposes
- CMS Federal Mandate through the Health Insurance Portability and Accountability Act (HIPAA) of 1996
- Effective Date: **Claims with Dates of Service Starting October 1st, 2013**

ICD-9-CM Diagnosis Codes	ICD-10-CM Diagnosis Codes
3-5 characters in length	3-7 characters in length
Approximately 13,000 codes	Approximately 68,000 available codes
Lacks specific detail: E917.0 Striking against or struck accidentally in sports without subsequent fall	Very specific: 24 New Codes for specifying type of sport where injury occurred

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Websites

- CMS Website
 - Resources that can help you with the v5010 and ICD-10 standards
 - http://www.cms.gov/ElectronicBillingEDITrans/18_5010D0.asp
 - <http://www.cms.gov/icd10>
- DPW v5010 Website Content includes
 - Links to Provider QuickTips
 - Links to Bulletins
 - Vendor letter introducing certification requirements
 - FAQs

<http://www.dpw.state.pa.us/provider/doingbusinesswithdpw/softwareandservicevendors/hipaa5010d.0upgradeinformation/index.htm>

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MDS, RUGs and Rate Setting

- July 1, 2010
 - MDS 2.0
 - RUG-III v. 5.12 44 group
 - New normalized CMI based on 2/1/10 picture date
 - Select latest classifiable assessment
 - Payment phase-in
- October 1, 2010
 - MDS 3.0 implemented
 - Use CMS crosswalk of MDS items to do comparable RUG-III classification

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Goals of the Field Operations Summer Review

- Verify
 - that the MDS item responses
 - that there is sufficient documentation in the resident's record to support the MDS response
 - that the CMI Report of 2/1/11 accurately reflects the resident population and the MA for MA Case Mix status on that picture date
- Provide technical assistance

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Review Details

- MDS profile reviews will contain only positive items
- Evaluate recently completed assessments
 - Standard for evaluation is CMS guidance found in RAI Manual
- Greater selection of assessments for MA residents

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Assisted Living Residences (ALR)

- Regulations became effective 1/18/11
- As of 4/25/11, 19 applications have been received
- First license issued 4/21/11 to The Arbors at Buck Run in Bucks County

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ALR

What are we seeing ?

- Policies and procedures have not been updated to reflect the ALR requirements
- The switch to ALR contracts, assessments and support plans may take time for large sites
- Some are struggling with new training requirements

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Questions – Discussion

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Thank you!

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