Skilled Nursing Facility (SNF) Workforce and Quality Incentive Program (WQIP)

September 25, 2024 Stakeholder Webinar



Introduction

- In addition to the Microsoft Teams webinar, members of the public may call in to +1 279-895-6425 and enter phone conference ID: 548 597 841#.
- » Please visit <u>SNF WQIP (ca.gov)</u> for meeting materials and information on how to join upcoming meetings.
- » Stakeholders can sign up for the AB 186 email ListServ at this website.

Introductions

- » Kate Bravo, Health Program Specialist II, Quality and Population Health Management
- » Jeff Norris, MD, Value-Based Payment Branch Chief, Quality and Population Health Management
- » Eric Lichtenberger, Branch Chief, Health Care Financing

Agenda

- » Data Sharing
- » MDS Data Completeness
- » Claims Based Clinical Measures
- » Final Payment Process for SNF WQIP
- » PY2 Weight Loss Measure
- » PY3 MDS Measures
- » DHCS Support of MCPs in SNF WQIP
- » General SNF WQIP Updates
- » Public Comment

Data Sharing



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Data Sharing

» Data dashboards are still forthcoming.

- Will create a helpful visual representation
- The Open Data Portal will drive the dashboards
- Types of data in the dashboard would not be different than what is already posted on the Open Data Portal. Only measurement periods might change to be shorter, allowing for a rolling view of performance data.

» Data suppression:

- » Shorter measurement periods may result in multiple facilities not having data posted due to data suppression requirements.
- » DHCS is evaluating how short of a measurement period can be posted while still ensuring most facilities can see rates in the dashboards.
- » Currently, DHCS are already posting data as soon as we can to the Open Data Portal.

MDS Data Completeness



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MDS Data Completeness

- » DHCS updated the Minimum Data Set (MDS) Data Completeness Metric methodology to use a 150-day exclusion approach.
 - This methodology change aligns with CMS' approach for identifying active residents.
 - DHCS continues to encourage facilities to submit timely MDS assessments, including discharge assessments.
- » This change is **effective retroactively for PY1** of SNF WQIP.
- » The Technical Program Guide for PY2 will include similar methodology.
- » SNF WQIP PL 24-002 MDS Data Completeness Updated Methodology and <u>Clarification</u> policy letter was disseminated to SNF stakeholders and published to the SNF WQIP webpage.

Claims-Based Clinical Measures



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Claims Based Clinical Measures

- » DHCS and its contractor Health Services Advisory Group (HSAG) have determined that multiple Medi-Cal MCPs were unable to report on or had biased rates for the Managed Care Accountability Sets (MCAS) Long-Term Care (LTC) measures (see page 9 of MCAS measures for measurement year 2023).
- The LTC measures are the basis for the facility-specific "claims-based clinical metrics" in the SNF WQIP.
- » Due to these data issues, HSAG will calculate facility-specific rates for the claims-based clinical metrics for SNF WQIP.
- » Due to the timing of data availability, this change will push back the timeline for the Final Payment PY1 SNF WQIP Report to December 2024.
- » SNF WQIP PL 24-003 Claims-Based Clinical Metrics Update policy letter was disseminated to SNF stakeholders on 9/6/2024 and is published to the SNF WQIP webpage.

Final Payment Process for SNF WQIP





Final Payment Process for SNF WQIP

- » DHCS published a policy letter (PL) outlining the provisional guidance for the SNF WQIP to assist SNFs and MCPs with planning the reconciliation and payment processes for CY 2023 final payments (<u>SNF</u> WQIP PL 24-001 Provisional Guidance on SNF WQIP Payment Process).
- » The PL was published to the SNF WQIP webpage and disseminated to SNF stakeholders on 7/2/2024.
- » Stated in the PL was a request that stakeholders provide feedback no later than within 15 calendar days.
- » The All Plan Letter (APL) directed to the MCPs is forthcoming.

Direction of Payment

- » DHCS will direct MCPs to make payments on a per-diem basis, rather than a lump sum basis.
- » DHCS will require MCPs:
 - To identifying SNF WQIP-eligible days for payment purposes.
 - Make per-diem payments to each facility for all qualifying bed days rendered and billed under a network agreement.
 - To include bed days under a network agreement and attributable to long-term care (LTC) claims, including bed hold days and discharge days, for CY 2023 dates of service billed by a qualifying facility (excludes hospice days and days where Medi-Cal was not the primary payer).
 - Net out any previously directed interim payment amounts from the final payment and, if applicable, recoup or withhold any amounts related to Class AA or A citations.

» Providers generally must submit claims to the MCP within 12 months of date of service.

Class AA and A Citations

- » DHCS will direct MCPs to withhold SNF WQIP payments for facilities with one or more Class AA or A citations issued by the California Department of Public Health (CDPH) for violations that occurred wholly or in part in the program year (regardless of when violations are issued).
- » DHCS will notify MCPs of any additional applicable Class AA and A citations reported to DHCS by CDPH.
- » If DHCS or an MCP becomes aware of an applicable citation for a calendar year after the time of an interim or final payment, DHCS will require the MCP to recoup and withhold the applicable payments retroactively for that calendar year.
- » For citations that are appealed, DHCS will require MCPs to withhold the applicable payments until all appeals are exhausted and, if applicable, to release the applicable payments based on the final disposition of the citation, without regard to the length of the appeals process.

Bed Day & Payment Reconciliation

- » DHCS will require MCPs:
 - To establish policies and procedures to reconcile qualifying bed days with facilities.
 - Provide member-level data to facilities detailing qualifying bed days in a machine-readable format on a regular basis (at least quarterly).
 - To establish policies and procedures to accept, acknowledge, and resolve provider grievances related to the processing or non-payment of SNF WQIP payments.
 - To identify a single designated point of contact for providers for questions and technical assistance related to SNF WQIP (<u>MCP Contact List</u>).

Final Reporting & Payment Timeline

- » DHCS will direct MCPs to calculate the number of SNF WQIP qualifying bed days and make payments to facilities within 45 calendar days of receiving payment exhibits from DHCS or within 30 calendar days of receiving a clean claim from the provider, whichever is later.
- » Payment exhibits will only include the final SNF WQIP score and per-diem for each facility.
- » DHCS will calculate the final separate payment term made by DHCS to MCPs based on qualifying bed days reported by MCPs to the Post-Adjudicated Claims and Encounters System (PACES) by October 15, 2024, that have been accepted by DHCS, subject to actuarially appropriate adjustments.
- The October 15, 2024 deadline will not impact MCPs' obligations to make SNF WQIP per-diem payments to each facility for all qualifying bed days rendered under a network agreement as detailed in the "Direction of Payment" section.

PY2 Weight Loss Measure



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PY 2 Percent of Residents Who Lose Too *Much Weight, Long Stay*

- DHCS provided an opportunity for consultation regarding the Percent of Residents Who Lose Too Much Weight, Long Stay measure on January 31, 2024.
- DHCS has updated the measurement period for this measure to start as of 30 days after notice was sent to and consultation with SNF stakeholders.
- The updated measurement period for this measure will now be March 1, 2024, through June 31, 2024.
- SNF WQIP PL 24-006 SNF WQIP Weight Loss Measure Update for PY2 (2024) was disseminated to SNF stakeholders on 9/23/2024 and is published to the SNF WQIP.

PY 2 Percent of Residents Who Lose Too *Much Weight, Long Stay*

- » DHCS will use a shortened measurement period. However, performance during the shorter measurement period will continue to have the same weight in the overall SNF WQIP score (approximately 7%).
- » Previous measurement period for Percent of Residents Who Lose Too Much Weight, Long Stay measure
 - July 1, 2023- June 30, 2024
- » New measurement period for Percent of Residents Who Lose Too Much Weight, Long Stay measure
 - March 1, 2024- June 30, 2024

DHCS Support of MCPs in SNF WQIP





DHCS Support of MCPs in SNF WQIP

- » DHCS hosted a webinar for MCPs relating to the <u>SNF WQIP PL 24-001</u> Provisional Guidance on SNF WQIP Payment Process.
 - Webinar slides can be referenced (<u>SNF WQIP Policy Letter Webinar 7-</u> <u>31-24</u>)
- » All Plan Letter (APL) forthcoming on new payment process.
- » **Upcoming webinar for MCPs** regarding final payment process and APL update on 10/10.
- » Ongoing support will be provided to MCPs in SNF WQIP.

PY 3 Changes



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PY 3 MDS Measures

» MDS Clinical Measures for **PY 3 are unchanged from PY 2**:

- MDS Clinical Metrics and Consensus-Based Entity (CBE) ID (if applicable)
 - Percent of Residents Who Lose Too Much Weight, Long Stay (CBE ID 0689)
 - *Percent of Residents Experiencing One or More Falls with Major Injury, Long Stay* (CBE ID 0674)
 - Percent of Residents Who Received an Antipsychotic Medication, Long Stay
- Measure Steward/Developer:
 - Centers for Medicare & Medicaid Services (CMS)
- Data Source:
 - MDS
- » DHCS plans to provide PY 3 benchmarks in December 2024 for the MDS measures listed.
- » <u>SNF WQIP PL 24-004 SNF WQIP MDS Measures for PY3 (2025)</u> policy letter is published to the SNF WQIP webpage and communication sent to SNF stakeholders on August 23, 2024.

PY 3 Claims-Based and Staffing Measures

- At this time, there are no planned changes to the Claims-Based and Staffing measures for PY3 (2025) from PY2 (2024).
- » DHCS plans to release prospective benchmarks for staffing measures.

- » Claims-Based Clinical Metrics:
 - Outpatient ED Visits per 1,000 Long-Stay Resident Days
 - Healthcare Associated Infections Requiring Hospitalization
 - Potentially Preventable 30-Day Post Discharge Readmission
- » Acuity-Adjusted Staffing Hour Metrics:
 - » Acuity-Adjusted Total Nursing Hours
 - » Acuity-Adjusted Weekend Total Nursing Hours
 - » Acuity-Adjusted RN Hours
 - » Acuity-Adjusted LVN Hours
 - » Acuity-Adjusted CNA Hours
- » Staffing Turnover Metric:
 - » Staffing Turnover

Other Potential PY3 Changes

- DHCS intends to introduce a floor for improvement points for MDS measures, as previously communicated, to minimize the chance that a facility receives an incentive and sanction under the Accountability Sanctions Program (ASP) on the same MDS measure.
- > Change measurement of disproportionate share measure to be through MDS
 - Would **require facilities to ensure that the A0700 (Medicaid ID) field is populated** in all applicable MDS assessments starting 1/1/2025; this will simplify data collection and reporting for this measure.
 - DHCS is considering whether, under this new proposed MDS methodology, to count stays where Medi-Cal is the primary payer and dually-eligible Medicare stays should be counted.

Other Potential PY3 Changes

- Removal of MDS Racial and Ethnic Completeness measure as this measure is now topped out since the field is a hard stop in MDS interface; DHCS still determining where to allocate 3% attributable to this measure.
- » Please provide feedback on potential changes for PY3 to the SNF WQIP Inbox at <u>SNFWQIP@dhcs.ca.gov</u>.

General WQIP Updates



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General SNF WQIP Updates

» PY2 (2024)

- WQIP Technical Program Guide: was disseminated to SNF stakeholders on 9/23/2024 and will be published to the SNF WQIP webpage soon.
- Changes to PY1 Technical Program Guide can be found in the <u>SNF WQIP PL</u> <u>24-005 PY1 (2023) Technical Program Guide Updates</u> policy letter.
- SNF WQIP Webpage updated format to better organize growing content and make it easier for stakeholders to navigate.
 - Please send any suggestions to this new platform to the SNF WQIP Inbox at <u>SNFWQIP@DHCS.CA.GOV</u>
 - Policy Letters are published to the SNF WQIP webpage.

Stakeholder Feedback

- » Please provide any written questions or feedback to:
 - Skilled Nursing Facility (SNF) Workforce and Quality Incentive Program (WQIP) <u>SNFWQIP@dhcs.ca.gov</u>
- » AB 186 E-mail Distribution List
 - This e-mail service (ListServ) has been created so interested stakeholders can receive relevant updates on the AB 186 programs (including the Accountability Sanctions Program (ASP) and Workforce Standards Program (WSP).
 - Sign up for the e-mail distribution list.

Public Comment



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Public Comment

- » DHCS welcomes public comment. DHCS staff may briefly respond to requests for clarification on this presentation.
- » Speakers are requested to introduce themselves and their organization.
- » Audience members are muted until they are called on by the moderator. Please use the "raise hand" button in Microsoft Teams to be added to the speaker queue. Once you are called on, you must unmute yourself in Microsoft Teams. If you are calling-in please press *5 to raise your hand.
- >> Please provide any written questions or feedback to:
 - Skilled Nursing Facility (SNF) Workforce Quality Incentive Program (WQIP) -<u>SNFWQIP@dhcs.ca.gov</u>

Questions and Answers from the Webinar





Questions & Answers

Stakeholder: Flagging concern about first paragraph on Slide 14 regarding Class AA & A citations.

- DHCS: Program Technical Guide specifies that violations are based on when violations occurred wholly or in part during the program year, not when the actual citation was issued.
 DHCS: DHCS agreed and edited slide 14 before sent out to stakeholders.
- Stakeholder: Unable to receive data from MCPs for reconciliation processes. Requested for a standardized process to receive and process the data. For example, it's difficult for providers to receive 24 different formats from 24 different MCPs.

• DHCS: We will take this back and evaluate.

Questions & Answers

- Stakeholder: Clarification on the October 15, 2024, deadline for data reconciliation. If plans do not reconcile or give DHCS corrected data by October 15, 2024, would the payment come from the MCPs funding?
 - DHCS: The data submitted by MCPs by October 15, 2024 will be used to calculate the capitation paid by DHCS to MCPs to fund their SNF WQIP payment obligations. <u>MCPs are responsible for paying on all WQIP qualifying days</u>, regardless of what is submitted to DHCS. Therefore, if MCPs fail to submit complete, accurate data to DHCS, MCPs risk getting underfunded. That in no way impacts their financial obligation to SNFs.
- Stakeholder: The state is relying on the PBJ data for payment. When there is no appeals process for PBJ data inaccuracies at the federal level, it was never intended to be a payment metric and as such does not come with a federal appeal mechanism. Also on the state side, there is no appeal mechanism. The stakeholder recommended DHCS to consult with OLS.
 - DHCS: We suggest that you send the question/feedback to the SNF WQIP inbox.

Questions & Answers

- Stakeholder: Regarding the Weight Loss MDS measure, what are the specifications for residents with significant weight loss that are currently on hospice? Is there a look back period for 12 months?
 - DHCS: Residents receiving hospice care are excluded from this measure. Please refer to Appendix A: Clinical Metrics Domain Metric Specifications on page 79 in the PY2 WQIP Technical Program Guide.
- Stakeholder: For MDS Data Completeness, they found duplicate data, same item represented twice with two different IDs.
 - DHCS: Please send example and question to the SNF WQIP inbox.
- Stakeholder: Requested more timely access to claims-based data.
 - DHCS: In current state, this is not possible since claims-based clinical measures are only produced after the PY is over. Additionally, claims data always has significant lag. However, DHCS understands the rationale behind wanting more timely data and will explore if any options exist for the future.