

Medi-Cal Update

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3. Revised Quality Assurance Fee for Skilled Nursing Facilities

Health and Safety Code Section 1324.20(4)(A), mandated by Assembly Bill X1 19 (Chapter 4, Statutes of 2011) provides that beginning with the 2011–2012 rate year, and every rate year thereafter, a unit that provides freestanding pediatric subacute care services in a Skilled Nursing Facility (NF), shall not be exempt from the Quality Assurance Fee (QAF) requirements.

The Department of Health Care Services (DHCS) obtained approval from the Centers for Medicare & Medicaid Services (CMS) on June 18, 2012, for the inclusion of pediatric subacute facilities, which requires the QAF per diem to be revised for all non-exempt Freestanding (FS) NFs and Freestanding Skilled Adult Subacute Nursing Facility Level B's (FS/NF-Bs).

Effective retroactively for dates of service on or after January 1, 2012, DHCS will collect the following revised QAF per diem:

- FS/NF-Bs with total annual resident days equal to or greater than 100,000: \$13.46 per resident day.
- FS/NF-Bs with total annual resident days less than 100,000: \$14.42 per resident day.

Claims paid at the prior QAF per diem for services rendered on or after January 1, 2012, will be reprocessed for retroactive rate adjustments. Information pertaining to the implementation of the repayment process (timeframe of payments/claims) will be posted on the [Long Term Care Reimbursement AB 1629](#) page of the DHCS website.

The DHCS Third-Party Liability and Recovery Division (TPLRD) will send a notice to each non-exempt FS/NF-B.

Providers may submit questions by e-mail to AB1629@dhcs.ca.gov or by telephone at (916) 552-8613.

For payment invoice questions providers may contact the FS/NF-B QAF coordinator by calling (916) 650-0583, and you will be directed to the facility's representative.