

Missouri Association of Nursing Home Administrators



Committee Chairs Appointed

President Tim Nye appointed the following committee chairs. If you would like to serve on a committee contact Cindy Wrigley at cindyw@mlnha.org.

Education Committee

– Penny Worthley

Convention Committee

– Lisa Young

Legislative Committee

– Don Yost

Membership Committee

– Joyce Leffert

Nominating Committee

– Joe Shafer



Missouri Association of Nursing Home Administrators

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Board Elects 2019-20 MANHA Executive Committee



Tim Nye Elected President

Tim Nye was elected President of the MANHA Board of Director at the first meeting of the new Board.

The remainder of the newly elected Executive Committee is:

Vice President - Joseph Shafer, *Prime Healthcare Management*

Secretary - Dottie Sharpe, *New Haven Care Center, New Haven, MO*

Treasurer - Janie Thomas, *Tri-County Care Center, Vandalia, MO*

Member-at-Large - Joyce Leffert, *Foxwood Springs, Raymore, MO*

Three Members Elected to the Board of Directors

Three new members were elected to the Board of Directors at the Annual Meeting in June at the Lake of the Ozarks. The new members will serve a three-year term. They are:

Stephanie Grant, *Springfield Rehab;*

Jordan Wagner, *Meyer Care Center;* and

April Zordel, *Good Shepherd Care Center.*



MANHA offers our warmest welcome to the following new members. We look forward to working with you in the years to come!

Tracy Chamberlain

Adrian Manor health & Rehab

Lydia Coulliette

Arbors at Parkside

Rebecca Pennick

Camelot Nursing and Rehabilitation

Angela Herd

Carthage Health & Rehabilitation Center

Pares Chapple

Chariton Park Health Care

Pierre Smith

Gietner Home

Kimberly McDaniel

Greenville Healthcare

Kaylon Williams

Gregory Ridge Living Center

Cory Sterling

Heritage Hall Skilled Nursing

Ryan Leiker

Ignite Medical Resorts

Amy Lombardo

Mockingbird Manor Residential Care

Angela Barrett

Moore-Few Care Center

Eric Windham

Neighborhoods at Quail Creek

James Wilson

Nick's Healthcare

Charmaine Williams

Parkway Health Care Center

Matthew Woods

Pioneer Skilled

Denice Marsh

St. Clair Nursing Center

Angela Wendel

Warrensburg Manor Care Center

SAVE THE DATE

State-Sponsored Provider Meetings

September 4, 2019

Region 6

Capitol Plaza Hotel & Convention Center, Jefferson City

September 10, 2019

Region 4

Stoney Creek Hotel & Conference Center, St. Joseph

September 11, 2019

Region 3

Adams Pointe Conference Center, Blue Springs

September 18, 2019

Region 7

Holiday Inn St. Louis SW - Route 66, St. Louis

September 19, 2019

Region 2

Drury Plaza Hotel Cape Girardeau Conference Center, Cape Girardeau

October 2, 2019

Region 1

Oasis Hotel and Convention Center, Springfield

October 4, 2019

Region 5

Quality Inn & Suites, Hannibal



Make Your Plans to Attend!

RAI PROCESS
FROM START TO FINISH

August 6-7 – *Columbia*
October 15-16 – *Springfield*

MEDICARE
FROM START TO FINISH

September 17 – *Chesterfield*
November 13 – *Columbia*

ALZHEIMER'S DISEASE/DEMENTIA
CARE SEMINAR

October 22 – *Jefferson City*

COUNTDOWN TO
PHASE III IMPLEMENTATION

September 24 – *Springfield*
September 25 – *Blue Springs*
September 26 – *Macon*
September 27 – *St. Louis*

QAPI - FACILITY NEEDS
ASSESSMENT - COMPLIANCE &
ETHICS: MAKING IT ALL WORK
TOGETHER

October 9 – *Blue Springs*
October 10 – *Springfield*
October 16 – *Macon*
October 17 – *St. Louis*

This fall, MANHA & MHCA are scheduling two one-day seminars to help you comply with Phase III.

Count Down to Phase II
Implementation:

- Part 1 – Review of Phase II Requirements-Checking the Boxes
- Part 2 – Compliance and Ethics Requirements

The Part 1 session will be in the morning and will consist of a review of the remaining ROP requirements due November 29, 2019. Among items to be reviewed include, but are not limited to, the requirements for Infection Preventionist, QAPI, Facility Assessment, and Trauma Informed Care.

The Part 2 session will be devoted to the review of regulatory requirements and the development of the Compliance and Ethics Program required to be in place in November 2019.

QAPI-Facility Needs Assessment –
Compliance and Ethics: Making it All
Work Together!

In CMS's responses to public comments on the regulations, CMS wrote that facilities should be integrating the information and data they collect or that arises out of their compliance and ethics programs into their Quality Assurance and Performance improvement (QAPI) program and also use the facility assessment they developed in developing and maintaining their compliance and ethics programs.

In this session we will review the QAPI Process and discuss ways to make it successful. We will then review QAPI, Facility Needs Assessment and Compliance and Ethics regulatory requirements and develop methodology for making the three work together to improve the overall quality of care, life and services for the residents you serve.



Medicare & Medicaid Programs; Requirements for Long-Term Care Facilities: Regulatory Provisions to Promote Efficiency and Transparency

On July 16, 2019 the Centers for Medicare & Medicaid Services (CMS) announced a proposed rule, “*Medicare & Medicaid Programs; Requirements for Long-Term Care Facilities: Regulatory Provisions to Promote Efficiency and Transparency*” (CMS-3347-P). The proposed rule would remove requirements for participation identified as unnecessary, obsolete, or excessively burdensome on long-term care (LTC) facilities, also known as “nursing homes”. The rule is part of the agency’s five-part approach to ensuring a high-quality LTC facility system that focuses on strengthening requirements for such facilities, working with states to enforce statutory and regulatory requirements, increasing transparency of facility performance, and promoting improved health outcomes for facility residents. CMS expects the provisions in the rule, if finalized, to achieve \$616 million in savings annually for these facilities.

This proposed rule would increase facilities’ ability to devote their resources to improving resident care. This would be achieved by the elimination or reduction in the hours and resources that clinicians and providers spend on obsolete and redundant requirements that

could impede or divert resources away from the provision of high-quality resident care. Many of the proposed provisions would simplify and/or streamline the Medicare health and safety standards long-term care facilities must meet in order to serve their residents. Importantly, in identifying opportunities for reducing burden, CMS would maintain resident health and safety standards.

Background

President Trump’s January 30, 2017 Executive Order 13777, “*Reducing Regulation and Controlling Regulatory Costs*”, directs federal agencies to eliminate regulations that are outdated, unnecessary, or ineffective, as well as those that impose costs that exceed benefits, and create inconsistencies. On October 4, 2016, CMS issued a final rule titled, “*Medicare and Medicaid Programs; Reform of Requirements for Long-Term Care Facilities*” (81 FR 68688). The October 2016 final rule significantly

Efficiency and Transparency *(from page 4)*

revised the requirements that LTC facilities must meet to participate in the Medicare and Medicaid programs.

In the Fiscal Year 2018 Skilled Nursing Facility Prospective Payment System (SNF PPS) proposed rule (82 FR 21014) published in the **Federal Register** on May 4, 2017, CMS solicited feedback regarding areas of burden reduction and cost savings in LTC facilities. In response to the May 2017 request for information, 620 stakeholders responded. Many indicated that certain provisions of the October 2016 final rule were unnecessarily burdensome and costly. Based on stakeholder feedback and in compliance with Executive Order 13777, CMS identified a number of existing LTC requirements which could reduce unnecessary burdens on facilities if they were simplified, or eliminated. In identifying these opportunities for reducing burden, we proposed to maintain resident health and safety standards.

In April 2019, CMS Administrator Seema Verma published a five-part approach guiding the agency as it ensures safety and quality in LTC facilities. Administrator Verma noted that all facility residents have the right to be treated with dignity and respect. In addition to promoting the concept of putting patients over paperwork, the five-part approach included enhanced enforcement and stronger oversight.

As part of the five-part approach, this proposed rule would, among other provisions:

- Reduce the frequency that LTC facilities are required to conduct a facility assessment.
- Allow LTC facilities the flexibility to streamline their compliance and ethics programs.
- Reduce the requirements for individuals responsible for the compliance and ethics program and reduce the frequency for the program's review.
- Increase flexibility by providing that those who have performed as the director of food and nutrition services for a minimum of two years by allowing them to continue doing so without obtaining additional certification. Newly hired directors of food and nutrition services or those with less than two years of experience would need to complete, at a minimum, a course in food safety and management.

- Allow facilities greater flexibility in tailoring their Quality Assurance Program Improvement (QAPI) program to the specific needs of their individual facility by eliminating prescriptive requirements.
- Update Informal Dispute Resolution (and independent process) by adding timeframes on process, and increased provider transparency.

We believe that these changes would save time and resources for LTC facilities so they may focus on caring for residents.

In order to give facilities enough time to respond to these proposed changes, CMS also proposes to delay the implementation of certain phase 3 QAPI and compliance and ethics related requirements that are directly impacted by the proposed changes in the regulation to one year following the effective date of this proposed rule, if finalized, to avoid confusion and promote transparency. The revised LTC facility requirements for participation set forth in the October 2016 final rule are being implemented in three phases. Phases 1 and 2 were implemented in November of 2016 and 2017 respectively. Phase 3 includes additional regulatory provisions that could be implemented as early as November 28, 2019.

*CMS looks forward to feedback on the proposed rule and will accept comments until **September 16, 2019**. Comments may be submitted electronically here:*

<https://www.federalregister.gov/documents/2019/07/18/2019-14946/medicare-and-medicaid-programs-requirements-for-long-term-care-facilities-regulatory-provisions-to>

