

Centers for Medicare & Medicaid Services

Questions and Answers from Open Door Forum: Skilled Nursing Facilities/Long Term Care

November 4, 2021

1. Will this call today at all address the CMS interim final rule that was recently released regarding COVID-19 vaccinations?
 - a. There's actually a call going on at the same time right now. It has reached capacity, but it will be recorded for those that were not able to get in. And so, it will be recorded and it will be posted.
2. My question is about the waiver for the QHS. We were seeking clarification if the residents can use it any time since March 2020, and now as long as they meet the other criteria, or if they only have one time to start their skilled care, even if the hospital had to have them move early to make beds available.
 - a. The QHS waiver is one that can be used multiple times. The benefit period waiver, which allows for a beneficiary to re-access a 100-day benefit period without the traditional 60-day wellness period, that can only be used once. Before, there used to be a wellness period in between. So, but the QHS waiver can be used multiple times, as long as the patient meets the relevant criteria.
3. Could you please restate what was indicated about criminal background checks?
 - a. Federal Criminal Background Checks are also known as the fingerprinting process that newly enrolling high-risk providers must comply with in order to enroll in Medicare. To find more about the providers' supplier caps that are designated at high risk, you can visit the Federal Register. The CFR citation is 42424.518. So, if this isn't something that you've had to - again, this only applies at initial enrollment for categorical high-risk providers.
4. Do you all anticipate - CMS anticipate that the QHS and benefit period waivers will last for the entirety of the PHE?
 - a. What we can say is that the waivers are currently in effect, and that we've not given any sort of indication that they were going to be terminated early. So, whether or not they're going to, whether or not they will remain through the PHE, I suppose is an open question. But at this point, they are still in effect and they will remain in effect for the time being.

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5. What the website is or where these recorded meetings are for - in reference to the one that is going on at the same time as this one?
 - a. It could possibly be put up on our outreach and education or our stakeholder calls. If you Google CMS stakeholder calls, you could potentially find it there.
(since the SNF/LTC ODF call on November 4th, the IFC-6 webinar recording can be found on: <https://www.cms.gov/About-CMS/Agency-Information/Emergency/EPRO/Current-Emergencies/Current-Emergencies-page>)
6. There seems to be a lot of confusion about the waiver of the three-day requirement for admission to (SNFs). Are there any criteria that has to be met to waive that three-day requirement?
 - a. In order to use the qualified hospital stay waiver, the requirement - really and the requirement that has sort of existed throughout this period, is that the person still needs to be - to require skilled care on a daily basis, but as a practical matter, cannot be delivered as an outpatient. All the standard qualification criteria that exists for any sort of coverage, and if they exist, the only thing that's really different is that in order to access that stay, that covered stay, the person doesn't need to have a three-day qualifying prior hospitalization.
7. Early on in the pandemic in 2020, we were given some grace related to PBJ staffing reporting. Given the shortage going on for staffing around the country, and facilities concentrating ancillary staff that might have been office workers to help out with the actual patient care, such as delivering meals and doing - ordering supplies, everybody's being reshuffled. And the five-star reports that are coming out are starting to really wreak havoc on providers. I'm just curious if there can be some discussion related to star ratings and what's happening. So, and the other piece to that is, I have a number of clients with this most recent five-star that were trying to submit because employees were either out ill with COVID, or were not available. And so, they needed to send their staff again, but it didn't go through. So, there's a whole bunch of things that are going on that are really hurting providers because they're starting to lose contracts with managed care companies and things like that.
 - a. Staffing in nursing homes has a substantial impact on the quality of care and outcomes that residents experience. Although CMS waived the requirement for staffing data submission in March 2020, approximately 60 percent of facilities still submitted their data. Furthermore, we continue to emphasize the importance of staffing based on its relationship to quality. Therefore, CMS ended the blanket emergency waiver of 42 CFR 483.70(q) on June 25, 2020, and all

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nursing homes were required to resume submission of staffing data through the PBJ system as required by the regulation. Providers are given 45 days from the end of the quarter to submit their staffing data. Providers are encouraged to submit their staffing data well in advance of the deadline so that they have adequate time to address any issues that may occur. We understand that these are unprecedented times but with the direct correlation found between staffing levels and quality of care, there are no plans at this time to reinstate any waivers of the staffing data submission requirement. If you have any further questions, please email NHStaffing@cms.hhs.gov.

8. Just a suggestion that the open-door forum call for SNFs might possibly be moved longstanding to three o'clock because these other national calls that get scheduled urgently, always drop in at 2:00. And as you can tell by many of the commenters today, many of us have two different calls and two different ears. We're trying to keep track of it all.
 - a. Yes, we are aware and we always do our best with scheduling and there's many factors involved, but these calls are recorded and we do post them so that it is available to folks that are unable to, right, make everything - make all the calls that we host. So, thank you.
9. We heard earlier this year that a 60-day notice would be provided before we ended the - before the waiver was ended for the three-day hospital stay and benefit period. Is that a fact?
 - a. We do intend to provide notice on when the waivers would be - when they would be ending. Yes.

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