

Commonwealth of Massachusetts Executive Office of Health and Human Services Office of Medicaid www.mass.gov/masshealth

> MassHealth Nursing Facility Bulletin 163 March 2021

TO: Nursing Facilities Participating in MassHealth

FROM: Daniel Tsai, Assistant Secretary for MassHealth

RE: Reporting on Staff Hours and Staffing Preparedness for Nursing Facilities

Background

In accordance with 101 CMR 206.13: *Average Staffing Hours Incentive*, MassHealth is requiring nursing facilities to report on their staffing levels each month, including information demonstrating the facility's average staffing hours per patient day, and whether the facility holds a signed contract with one or more temporary nursing agencies registered with the Department of Public Health (DPH), as described below.

The requirements described in this bulletin are in effect beginning April 1, 2021, and apply to nursing facilities that are enrolled as MassHealth providers.

These reporting requirements are meant to align with and supplement the quarterly reporting on staffing levels required by 42 CFR 483.70(q) and will be used to determine facilities' standard rate adjustments under 101 CMR 206.13(2).

Definitions

For the purposes of this bulletin, the terms listed below will have the following meanings.

<u>Contract hours</u>. Hours worked by individuals under contract, as well as individuals who provide services through organizations that are under contract (e.g. temporary nursing agencies).

Day. Each 24-hour period from 12:00 a.m. (midnight) through 11:59 p.m.

<u>Exempt hours</u>. Hours worked by employees of the nursing facility who are not subject to the federal Fair Labor Standards Act and who therefore are not entitled to overtime pay.

<u>Non-exempt hours</u>. Hours worked by employees of the nursing facility who are subject to the federal Fair Labor Standards Act and who therefore may be entitled to overtime pay.

<u>Reporting period</u>. Each month-long period reported as part of a single report submission, in accordance with the schedule attached to this bulletin as Appendix B.

<u>Reporting deadline</u>. The tenth business day of each month by 12:00 p.m. (noon), reporting on the previous month-long reporting period, in accordance with the schedule attached to this bulletin as Appendix B.

Reporting Requirements and Attestation Requirements

All nursing facilities must complete the reporting requirements of this provider bulletin, as described below.

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As part of the report, each facility must provide the following information, which must be complete, accurate, and up-to-date as of the date of submission.

- The exempt hours, non-exempt hours, and contract hours worked each day of the reporting period, as well as the total exempt hours, non-exempt hours, and contract hours worked by each of the following staff categories:
 - o Registered nurses who are directors of nursing
 - o Registered nurses who have administrative duties
 - o Registered nurses who are not directors of nursing or administrators
 - o Licensed practical nurses or vocational nurses who have administrative duties
 - o Licensed practical nurses or vocational nurses who do not have administrative duties
 - Certified nursing assistants
 - Nurse aides in training¹
 - Medication aides or technicians
- The number of residents present in the facility on each day of the reporting period, not including residents on medical or non-medical leave of absence for the entire 24 hours of the day.

The reporting requirements described above are intended to align, in an abbreviated form, with the quarterly staffing level reporting requirements under 42 CFR 483.70(q). Therefore, nursing facilities should follow the same guidelines for reporting that they do when submitting such quarterly reporting. Specifically, nursing facilities should refer to <u>guidance</u> issued by the Centers for Medicare & Medicaid Services (CMS), including the <u>Electronic Staffing Data Submission Payroll-</u> <u>Based Journal Long-term Care Facility Policy Manual, Version 2.5</u> for further details on data submission specifications for the data fields required by this bulletin.

The administrator or other appropriate representative from each nursing facility must submit a report, including all of the information described above, using the prescribed reporting form via the <u>CHIA Submissions web portal</u> by 12:00 p.m. (noon) on the tenth business day of each month, reflecting the previous month-long reporting period, with the first submission under this bulletin due by 12:00 p.m. (noon) on Friday, May 14, 2021. This first submission on May 14, 2021, will be for the reporting period from April 1, 2021, through April 30, 2021. A login is not required to access the CHIA Submissions web portal.

The administrator or other appropriate representative from each nursing facility must also submit, on a quarterly basis, a signed and scanned copy of the executed attestation, attached to this nursing facility bulletin as Appendix A. Within one calendar month after the end of each calendar quarter, CHIA will provide each facility with a summary of the information submitted by the facility over the previous quarter. Facilities will then have ten business days to review the summary, make any necessary corrections to their reports submitted in accordance with this bulletin for the previous quarter through the CHIA Submissions web portal, and attest through a signed and scanned copy of the attestation, attached to this bulletin as Appendix A, that the information submitted through such reports during the previous quarter is complete and accurate. This attestation must be

¹ Resident care assistants may be included in the nurse aides in training category until the latter of the end of the federal state of emergency, declared due to the novel coronavirus disease 2019 (COVID-19) outbreak, or the end of the state of emergency declared in the Commonwealth, due to COVID-19.

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submitted no later than 11:59 p.m. on the tenth business day after CHIA sends the facility its quarterly report summary.

For reference, a schedule of the month-long reporting periods and their submission deadlines through the end of calendar year 2021, as well as a schedule of the calendar quarters, are attached to this bulletin as Appendix B.

Non-compliance

All participating MassHealth nursing facility providers must submit the reporting and attestation forms required by this bulletin. As of January 1, 2021, the information reported and attested to, as required by this bulletin or MassHealth Nursing Facility Bulletin 154, is being used to determine the facility's average staffing hours per patient day for each calendar quarter. A facility that falls below an average of 3.58 staffing hours per patient day for the calendar quarter will receive a 2% downward adjustment on its standard per diem rates for that calendar quarter, in accordance with 101 CMR 206.13(2). Such downward adjustment will be recouped as an overpayment from a facility after each calendar quarter that the facility failed to meet the 3.58 staffing hours per patient day threshold established in 101 CMR 206.13(2).

Late submissions of any of the reporting requirements of this bulletin will subject the facility to a reduction in its average staffing hours per patient day for the reporting period covered by the late submission, equal to 0.01 hours for each day the submission is late. Such reductions in the average staffing hours per patient day for late submissions will be included when determining if the facility met the required 3.58 average staffing hours per patient day in each quarter, under 101 CMR 206.13(2).

Furthermore, if MassHealth determines that a nursing facility provider has made false or misleading representations through the submissions required by this bulletin, MassHealth may pursue sanctions against the provider under 130 CMR 450.238: *Sanctions: General.* MassHealth reserves the right to request and review documentation, conduct on-site audits, or use any information available to it to determine if a facility is accurately representing its staffing levels through its submissions under this bulletin.

MassHealth will also refer providers to the Medicaid Fraud Division in the Attorney General's Office, as appropriate.

MassHealth Website

This bulletin is available on the <u>MassHealth Provider Bulletins</u> web page.

To sign up to receive email alerts when MassHealth issues new bulletins and transmittal letters, send a blank email to <u>join-masshealth-provider-pubs@listserv.state.ma.us</u>. No text in the body or subject line is needed.

Questions

If you have questions about the information in this bulletin, please email your inquiry to <u>CHIANursingFacilityData@massmail.state.ma.us</u>.

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Appendix A

Nursing Facility Provider Attestation to Staff Hours and Staffing Preparedness Reporting Accuracy

I,______, hereby certify under the pains and penalties of perjury that I am the administrator or other duly authorized officer or representative of _______, located at______, (hereinafter "nursing facility") and that the information provided in this attestation is a true and accurate representation.

Specifically, I represent and warrant that the information submitted to MassHealth for the previous quarter, from _______ to _______, via the Center for Health Information Analysis (CHIA) Submissions web portal, in accordance with the requirements of MassHealth Nursing Facility Bulletin 163, is a complete and accurate representation of the staff hours and staffing preparedness at my nursing facility over such previous quarter, measured by staffing hours per patient day and resident census at my nursing facility for each reporting period.

Under the pains and penalties of perjury, I hereby certify that the above information is true and correct.

Printed Name:	
Title:	
Signature:	
Date:	

Please submit a scanned copy of the executed attestation via the <u>CHIA Submissions web portal</u> by the attestation submissions deadline established in MassHealth Nursing Facility Bulletin 163.

The nursing facility should maintain the original executed copy of each submitted attestation, along with the all reports submitted for each reporting periods in each quarter and any accompanying documentation, in its files.

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Appendix B

I. Calendar Quarter Schedule

First Quarter	January 1 – March 31	
Second Quarter	April 1 – June 30	
Third Quarter	July 1 – September 30	
Fourth Quarter	October 1 – December 31	

II. Nursing Facility Provider Staff Hours and Staffing Preparedness Reporting Submission Schedule through Calendar Year 2021

	ing Period onthly)	Submission Deadline (12:00 p.m. (noon) on the tenth business day of each month)
Start Date	End Date	
Thursday, April 1, 2021	– Friday, April 30, 2021	Friday, May 14, 2021
Saturday, May 1, 2021	– Monday, May 31, 2021	Monday, June 14, 2021
Tuesday June 1, 2021	– Wednesday, June 30, 2021	Thursday, July 15, 2021
Thursday, July 1, 2021	– Saturday, July 31, 2021	Friday, August 13, 2021
Sunday, August 1, 2021	– Tuesday, August 31, 2021	Wednesday, September 15, 2021
Wednesday, September 1, 2021	– Thursday, September 30, 2021	Friday, October 15, 2021
Friday, October 1, 2021	– Sunday, October 31, 2021	Monday, November 15, 2021
Monday, November 1, 2021	– Tuesday, November 30, 2021	Tuesday, December 14, 2021
Wednesday, December 1, 2021	– Friday, December 31, 2021	Friday, January 14, 2022