



OANH Special Services



Sedgwick CMS
CompManagement, Inc.

OANH Premier Partners



Become a
Premier
Partner!

FRIDAY, JULY 18, 2008 HEADLINES:

[Therapy cap exceptions extended](#)

[Last chance for Disaster Summit “Early Bird” discount](#)

[HOME Choice rules committee meets to review PASRR rules](#)

[CON Study Committee debates criteria](#)

[Convention sleeping rooms and booths are going fast](#)

[DME competitive bidding delayed](#)

[House subcommittee passes nursing home arbitration bill](#)

[Academy moving August 1; office furniture for sale](#)

[Directory can help showcase your company name](#)

[OPC3 seeking officers](#)

Therapy cap exceptions extended – The Medicare Improvements for Patients and Providers Act of 2008 was enacted on July 15, 2008. One provision of this legislation extends the effective date of the exceptions process to the therapy caps to December 31, 2009. Outpatient therapy service providers may now resume submitting claims with the KX modifier for therapy services that exceed the cap furnished on or after July 1, 2008. For physical therapy and speech language pathology services combined, the limit on incurred expenses is \$1,810 for calendar year 2008. For occupational therapy services, the limit is \$1,810. Deductible and coinsurance amounts applied to therapy services count toward the amount accrued before a cap is reached. Services that meet the exceptions criteria and report the KX modifier will be paid beyond this limit. Before this legislation was enacted, outpatient therapy service providers were previously instructed to not submit the KX modifier on claims for services furnished on or after July 1, 2008. The extension of the therapy cap exceptions is retroactive to July 1, 2008. As a result, providers may have already submitted some claims without the KX modifier that would qualify for an exception. Providers submitting these claims using the 837 institutional electronic claim format or the UB-04 paper claim format would have had these claims rejected for exceeding the cap. These providers should resubmit these claims appending the KX modifier so they may now be processed and paid. Providers submitting these claims using the 837 professional electronic claim format or the CMS-1500 paper claim format would have had these claims denied for exceeding the cap. These providers should request to have their claims adjusted in order to have the contractor pay the claim. In all cases, if the beneficiary was notified of their liability and the beneficiary made payment for services that now qualify for exceptions, any such payments should be refunded to the beneficiary. More information on therapy caps is available at <http://www.cms.hhs.gov/TherapyServices/> (Source: Centers for Medicare and Medicaid Services). ([Back to top](#)).

Last chance for Disaster Summit “Early Bird” discount – Time is running out for the early registration discount for the upcoming **“Disaster Summit: You’re Not as Ready as You Think!” Monday, July 21 is the early bird discount deadline.** Don’t miss this two day program, scheduled for Monday-Tuesday, August 4-5, 2008 at Quest Business Center in Columbus. OANH, OHCA, AOPHA and OALA are jointly sponsoring this program which offers twelve BENHA CEUs. Members of any of the four associations may attend this program for only \$225. This price includes conference materials, lunch and breakfast. Topics will include how to prepare for a variety of disasters, and information on life safety code and facility disaster drills. Registration materials have been mailed to all facilities in Ohio. You can view the registration brochure at

<http://www.oanh.org/educationalofferings.shtml> or register online at www.efohca.org/seminars. For more information concerning this exciting new program contact [Dawn Kennedy](#). ([Back to top](#)).

HOME Choice rules committee meets to review PASRR rules – The HOME Choice rules committee, comprised of state officials and interest groups, met this week to review Preadmission Screening and Resident Review (PASRR) rules. The group continued to review changes proposed by the administration. Most of the discussion focused on the process and timeline of a PAS determination and the subsequent review period by the appropriate government agency. Concerns were raised over the placement of individuals and payment sources during the review period, especially for very short stays in the psychiatric hospital. The committee also discussed concerns over nursing facilities providing uncompensated care because of denial of payment and what is construed as a 'safe placement' for discharge. The committee is scheduled to meet July 28 to discuss options for the acute inpatient hospital stay exemption and attempt to reach a consensus on controversial changes to the PASRR rules. For more information, contact [Chris Murray](#). ([Back to top](#)).

CON Study Committee debates criteria – The Certificate of Need (CON) Study Committee created from a recommendation of the Unified Long Term Care Budget Workgroup met earlier this week to discuss changes to the criteria used to evaluate CON applications. The Academy expressed several concerns over the proposed criteria changes, including a 90 percent occupancy requirement for a facility acquiring beds, a requirement that the applicant provide the data for the state to compare the application to the State Plan, and the inability for the applicant to change operation or ownership information after the CON has been deemed complete. The Academy also suggested that instead of 'tweaking' the current rules, the committee should look at the current criteria to see if they are relevant to the current objectives of the CON. The committee would then remove unnecessary or redundant criteria and possibly create new criteria that better address the goals of the program. Jodi Govern, chair of the committee, was open to any suggested changes or new criteria for the CON program. The committee will meet on July 29 to discuss any proposals for changes to the CON review criteria, finalize the language for the pilot program to move beds across county lines, and review a draft of a committee report to the Director of Health relating to the short-term goals of the committee. For more information or to suggest changes to the CON program, please contact [Chris Murray](#) ([Back to top](#)).

Convention sleeping rooms and booths are going fast – Hilton Columbus at Easton: Make sure you have a place to rest after all the glitz and glamour of the Hollywood themed 2008 Annual Convention & Trade Show. Sleeping rooms sell out fast, so secure yours today. The Academy has negotiated a special discounted rate of \$164 per room/per night. To make a reservation call the Hilton at 614/414-5000 and mention the **group code NRS**. The 2008 convention will be held Wednesday - Friday, October 22-24, 2008 at the Hilton Columbus at Easton. **Convention booths:** If you haven't secured your booth for the 2008 OANH Annual Convention & Trade Show act quickly, as there are still a few great booths available! The convention will feature great education sessions, fun networking opportunities and a chance to show attendees how YOUR product can improve their facility. Booth prices are as follows:

- Regular Booth Pricing
OANH Member: \$975
Non-Member: \$1075
- Premium Booth Pricing
Premium booths are only available to OANH members
\$1,275

Exhibitors at the OANH Annual Convention & Trade Show are able to participate in education sessions and social events at no additional charge! This includes obtaining CEUs. You can view the Exhibitor Prospectus at <http://www.oanh.org/2007.shtml> or you can contact [Dawn Kennedy](#) to reserve your booth. ([Back to top](#)).

DME competitive bidding delayed – The Medicare Improvements for Patients and Providers Act of 2008 passed Tuesday, July 15 delayed the implementation of the Durable Medical Equipment (DME) Competitive Bidding Program, which affects only Medicare beneficiaries in traditional fee-for-service in 10 competitive bidding areas, has been delayed. Medicare beneficiaries may use **any** Medicare-approved supplier for Durable Medical Equipment. If a beneficiary changed suppliers when this new program started (July 1, 2008), they can either continue to use the new supplier or choose another supplier. The original DME payment rates in effect prior to July 1 are reinstated retroactively.

All Medicare households in the 10 competitive bidding areas will be notified of this change directly in a letter from CMS within two weeks. The DME Competitive Bidding areas are: (1) Charlotte-Gastonia-Concord, NC-SC, (2) Cincinnati-Middletown, OH-KY-IN, (3) Cleveland-Elyria-Mentor, OH, (4) Dallas-Fort Worth-Arlington, TX, (5) Kansas City, MO-KS, (6) Miami-Fort Lauderdale-Miami Beach, FL, (7) Orlando-Kissimmee, FL, (8) Pittsburgh, PA, (9) Riverside-San Bernardino-Ontario, CA, and (10) San Juan, PR. Information on payment rates and claims processing will be communicated to DME suppliers in the coming days. More information on DME is available at <http://www.cms.hhs.gov/DMEPOSCompetitiveBid/> (Source: Centers for Medicare and Medicaid Services). ([Back to top](#)).

House subcommittee passes nursing home arbitration bill – The House Judiciary Subcommittee on Commercial Law and Administrative Law Tuesday approved the Fairness in Nursing Home Arbitration Act, which would outlaw signing an arbitration agreement as a prerequisite to admission in a nursing home. Republicans on the subcommittee voted against the measure but came up short in a 5-4 vote. Some members tried to add amendments that would remove some of the sting for nursing homes. Rep. Chris Cannon (R-UT) tried to add language that would exclude physicians and providers in nursing homes from the bill, ensure the bill would not be retroactive, as well as other provisions. All these amendments were shouted down in voice votes. The subcommittee's approval moves the bill one step closer to becoming law. Long-term care advocates oppose the legislation, arguing that arbitration agreements allow them to channel limited Medicare and Medicaid resources to providing quality care instead of funding lengthy court trials. (Source: McKnight's Long-Term Care News & Assisted Living, 7/17/08, www.mcknights.com) ([Back to top](#)).

Academy moving August 1; office furniture for sale – The Academy will be moving to new office space effective August 1. The move coincides with Cummins, Krasik & Hohl's move to a new office building downtown. Located in the same building at Two Miranova Place, the Academy will relocate to Suite 390. In order to facilitate the move, the Academy is selling a few pieces of office furniture, including:

- **computer desk:** L-shaped, dark wood, 4 drawers, computer friendly, good condition. \$200
- **office cubicles:** two 7' cubicles (for three offices), soft-sided, dark wood trim finish with windows, comes with five mountable shelves (4' long, 1' deep, side mounting bar 10" high), excellent condition. \$500

For more information, contact the Academy at 614/461-1922 or 800/999-6264. ([Back to top](#)).

Directory can help showcase your company name – If you're looking for a great marketing tool to help showcase your company name in the long-term care industry, consider purchasing an ad in the *2008 OANH Membership Directory and Resource Guide*. Contact the Academy today to secure your ad space! Ads can be emailed to [Christina O'Neal](mailto:Christina.O'Neal@oanh.org) in a JPG or PDF format. **The deadline for all advertisements is Friday, July 25**—ads received after this date may not be published. For more information on advertising opportunities, go to <http://www.oanh.org/bus-dev.pdf>. ([Back to top](#)).

OPC3 seeking officers – The Ohio Person Centered Care Coalition is currently seeking the following officers for the organization: Vice President, Secretary and Treasurer. All nominations are due **close of business on Thursday, July 31** to [Elise Tareshawty](mailto:Elise.Tareshawty@opc3.org). For a better understanding of the expectations, contact Elise at 216/226-0282. ([Back to top](#)).