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Governor



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TO: Administrators of Nursing Facilities (Certified for Medicaid Only)
Administrators of Skilled Nursing Facilities / Nursing Facilities With Distinct
Part NF Beds
Administrators of Facilities Requesting Enrollment in or Readmission to Medicaid

FROM: Bureau of Long Term Care Facilities / Facility Contracting Section

SUBJECT: **Mandatory Participation by Nursing Facilities in the Medicare Program**

This is to inform you of the requirement for mandatory participation by nursing facilities (NFs) in the Medicare program. In accordance with Ohio Administrative Code (OAC) rule 5101:3-3-02.4, all Medicaid certified NF beds that are included in the Medicaid provider agreement also must be Medicare certified skilled nursing facility (SNF) beds.

I. TRANSITION OF CURRENTLY PARTICIPATING NFs:

On or before January 1, 2007, all NFs must become both dually and fully participating Medicare and Medicaid SNF/NFs. Every Medicaid certified NF bed also must be a Medicare certified SNF bed, and must be included in the Medicaid provider agreement. The Ohio Department of Job and Family Services (ODJFS) may terminate a NF provider agreement if the operator has not obtained Medicare certification for all Medicaid certified beds on or before January 1, 2007.

II. TRANSITION OF DUALY PARTICIPATING SNF/NFs:

On or before January 1, 2007, all SNF/NFs that operate with distinct part NF beds must become fully participating Medicare and Medicaid SNF/NFs. Every Medicaid certified NF bed in a SNF/NF also must be a Medicare certified SNF bed, and must be included in the Medicaid provider agreement. ODJFS may terminate a SNF/NF provider agreement if the operator has not obtained Medicare certification for all Medicaid certified beds on or before January 1, 2007.

III. ENROLLMENT OF NEW FACILITIES IN THE MEDICAID PROGRAM

Facilities enrolling in Medicaid after October 1, 2005 must provide documentation of their request for full participation in the Medicare SNF program. If ODJFS is notified by the Centers for Medicare and Medicaid Services (CMS) that a facility's request has been denied and all appeals have been exhausted, ODJFS will propose termination of the NF's provider agreement.

IV. READMISSION OF A FACILITY TO THE MEDICAID PROGRAM

Facilities requesting readmission to the Medicaid program on or after October 1, 2005 must provide documentation of their request for admission or readmission in the Medicare program.

- If a facility's participation in the Medicaid program ends after April 1, 2006 due to voluntary withdrawal and the facility requests readmission to the Medicaid program, enrollment will be processed in the same manner as for a new facility.
- If a facility's participation in the Medicaid program ends after April 1, 2006 due to involuntary termination, cancellation, or non-renewal by ODJFS, and the Ohio Department of Health (ODH) recommends that the facility receive certification, ODJFS may issue a provider agreement that begins on or after the effective date of Medicare certification or recertification.

V. FACILITIES UNDERGOING A CHANGE OF OPERATOR

If a SNF/NF undergoes a change of operator that results in a change of provider agreement, the entering operator must either accept or refuse assignment of the exiting operator's provider agreements. If the entering operator refuses assignment of the Medicaid provider agreement, the facility must undergo a new certification survey. In such cases, there may be gaps in Medicaid coverage for residents at the facility. If the entering operator refuses assignment of only the Medicare provider agreement, the entering operator must meet the requirements in section III of this letter.

If you have any questions, please contact the Facility Contracting Section at (614) 466-9088.