

HB 153 Nursing Home Update – What the Data Says about Quality

HB 153 fully implements the pricing system enacted in 2005, links more of the Medicaid payment to direct care for residents and quality, and provides greater choice for seniors

- In 2005, the Ohio General Assembly enacted HB 66 to transition from a cost-based payment methodology for nursing facilities to a price-based system. The final budget completes the transition to a price-based system.
- The budget increases the portion of the rate that is related to direct care and quality from 52% in 2011 to 61% in 2013 and increases the actual amount spent (on average) statewide for resident services from \$93.04 to \$102.96 per person per day.
- The final budget enables seniors and people with disabilities to live with dignity in the setting they prefer, especially their own home, instead of a higher-cost setting like a nursing home. Overall Medicaid spending for long-term care services in 2013 is \$166 million more than in 2011, and the budget “rebalances” where the money is spent by increasing home- and community-based services from 36% today to 42% in 2013.

The Administration is closely monitoring the impact of the budget on quality of care

- The Administration has enhanced the tracking and sharing of data regarding nursing home quality so that policy makers, facilities and families receive regularly updated information. The Department of Health (ODH) is compiling facility survey data into quarterly Nursing Home Tracking Reports. The survey data is also updated weekly in the Department of Aging’s Long-Term Care Consumer Guide.
- According to the Ohio Long-Term Care Ombudsman, the number of nursing home complaints from July 1 to October 31 increased 3% from 2010 (3,432) to 2011 (3,537).
- Using Bureau of Vital Statistics data, “deaths in nursing homes from July 1 to Oct 31” increased 0.8% from 2010 (9,291) to 2011 (9,366).
- ODH surveys indicate that Immediate Jeopardy (IJ) reports in 2011 are about the same as 2007 and down compared to 2008 and 2009 (see below). There were more reports than normal in the 3rd quarter of 2010 (19 in 13 facilities) but much fewer than normal in the current 4th quarter to date. If the current trend holds, nursing facilities will have fewer IJs in the current quarter than in the average quarter of any previous year.

Calendar Year	Immediate Jeopardy Reports	Number of Facilities
2007	31	30
2008	46	44
2009	36	33
2010	21	20
2011	32	26

ODH, ODA and Ohio Medicaid will continue to respond on a case-by-case basis to complaints and deficiencies and monitor the data closely.