NON-STATE GOVERNMENT-OWNED NURSING FACILITY QUALITY INCENTIVE PAYMENT PROGRAM (QIPP) ADD-ON RATE PROGRAM.

Nursing facility means a licensed nursing facility as defined in section 135C.1 that is a freestanding facility or a nursing facility operated by a hospital licensed pursuant to chapter 135B. Nursing facility includes a non-state government-owned nursing facility if the nursing facility participates in the non-state government-owned nursing facility Quality Incentive Payment Program add-on rate.

This does not include the following:

- A distinct-part skilled nursing facility (SNF) unit or a swing-bed unit operated by a hospital, or
- A nursing facility owned by the state or federal government.

Non-state governmental entity (NSGE) means a city or county hospital authority, hospital district or health care district.

Non-state government owned (NSGO) means a nursing facility that is owned or operated by a NSGE and for which a NSGE holds the nursing facility's license and is party to the nursing facility's Medicaid contract. The nursing facility must be a NSGO prior to submitting the participation agreement to participate in the Quality Incentive Payment Program (QIPP) add-on rate. Iowa Medicaid will notify providers of the due date for the participation agreement on an annual basis.

Provider Name	Address	City, State, Zip	County
Akron Care Center	991	Akron, IA 51001	Plymouth
	Highway 3		
Franklin General	1720	Hampton, IA	Franklin
Hospital	Central	50441	
	Avenue E		
Henry County	407 S White	Mount Pleasant,	Henry
Health Center	St	IA 52641-2242	
Buchanan County	1600 1st	Independence, IA	Buchanan
Health Center	Street E	50644	
Story County	630 Sixth	Nevada, IA 50201	Story
Medical Center	Street		
Sunnycrest Manor	2375	Dubuque, IA	Dubuque
	Roosevelt	52001	
	Street		
Thomas Rest Haven	217 Main	Coon Rapids, IA	Carroll
	Street	50058	
-	Akron Care CenterFranklin General HospitalHenry County Health CenterBuchanan County Health CenterStory County Medical CenterSunnycrest Manor	Akron Care Center991 Highway 3Franklin General1720 Central Avenue EHospitalCentral Avenue EHenry County407 S White Health CenterBuchanan County1600 1st Street EBuchanan County630 Sixth Street EStory County630 Sixth StreetStory County630 Sixth StreetSunnycrest Manor2375 Roosevelt StreetThomas Rest Haven217 Main	Akron Care Center991 Highway 3Akron, IA 51001Franklin General Hospital1720 Central Avenue EHampton, IA 50441Henry County Health Center407 S White StMount Pleasant, IA 52641-2242Buchanan County Health Center1600 1st Street EIndependence, IA 50644Story County Medical Center630 Sixth StreetNevada, IA 50201 StreetSunnycrest Manor2375 StreetDubuque, IA S2001Thomas Rest Haven217 MainCoon Rapids, IA

The following providers in Iowa meet the definition of a NSGO:

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1104939040	Palo Alto County	3201 W 1st	Emmetsburg, IA	Palo Alto
	Hospital	Street	50536	
1912089848	Humboldt County	1000 N 15th	Humboldt, IA	Humboldt
	Memorial Hospital	Street	50548	
1013987007	Prairie Ridge Care	1005 7th	Orange City, IA	Sioux
	Center	Street NE	51041-1967	

Intergovernmental transfer means a transfer of state share funds from a non-state governmental entity to the Iowa Medicaid, Department of Human Services.

QIPP add-on rate calculation period means the fiscal year for which QIPP add-on rate amounts are calculated based on adjudicated claims for days of service provided.

Upper payment limit means a reasonable estimate of the amount that would be paid for the services furnished by a facility under Medicare payment principles.

The QIPP add-on rate shall be made to a qualified NSGO to promote, maintain, and improve resident quality of care and health outcomes.

A. A NSGO nursing facility shall qualify for participation in the program if all the following conditions are met:

(1) The NSGO nursing facility has executed a participation agreement with the Department.

(2) The NSGO nursing facility has provided proof that the entity holds the NSGO nursing facility's license and has complete operational responsibility for the NSGO nursing facility.

(3) The NSGO nursing facility has filed a certification of eligibility application for the QIPP add-on rate program with the Department and has received approval from the Department for participation in the program.

(4) The NSGO nursing facility is in compliance with all care criteria requirements.

B. A NSGO shall qualify for participation in the program if all the quality measures published annually <u>here</u> are met.

(1) The NSGE has executed a nursing facility provider contract with an NSGO nursing facility.

(2) The NSGE has provided and identified the source of state share dollars for the intergovernmental transfer.

(3) The NSGO has provided proof of ownership, if applicable, as the licensed operator of the NSGO nursing facility.

(4) The NSGO has provided, to the Department, an executed management agreement between the NSGE and the NSGO nursing facility manager if applicable.

(5) If at any time a provider is determined not eligible due to not meeting survey standards, they will be disqualified for the remainder of the year.

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C. Timing

(1) A provider must submit the Intent to Participation Agreement on or before September 30 each year, include all necessary documentation related to the quality measures.

(2) Upon receipt of the participation agreement, the Department will complete a determination of eligibility based on the care criteria defined above.

(3) Providers will be notified of their eligibility annually within sixty days of the agreement due date.

D. QIPP add-on rate.

(1) The nursing facility QIPP add-on rate provided to a participating NSGO under the program shall not exceed Medicare payment principles pursuant to 42 C.F.R. §447.272 and shall be calculated pursuant to 42 C.F.R. §438.6. The QIPP add-on rate shall be calculated and paid as follows:

(a) The methodology utilized to calculate the upper payment limit shall be based on the data available during the calculation period.

(b) The eligible amount used in determining the QIPP add-on rate shall be the difference between the state Medicaid payment and the Medicare upper payment limit as determined, on an annual basis.

(c) The difference calculated under subparagraph division (b) shall be divided by total patient days as determined under subparagraph division (b).

(d) The QIPP add-on rate shall be paid prospectively.

E. Change of ownership.

(1) A participating NSGO nursing facility shall notify the Department of any change of ownership that may affect the participating NSGO nursing facility's continued eligibility for the program, at minimum of thirty days prior to such change.

(2) If a participating NSGO nursing facility changes ownership to a privately owned entity, on or after the first day of the QIPP add-on rate calculation period, the privately owned provider is no longer eligible for the QIPP add-on rate.

F. Participating providers.

(1) All program documentation shall be available online for NSGO providers to complete.

(2) All eligible participating NSGO's quality score card will be available online annually.

(3) Providers that do not meet eligibility requirements above will be notified via mail what metrics were not met. The scorecard will not be posted online.

G. Payment to participating NSGO nursing facilities.

A participating NSGO nursing facility shall secure allowable intergovernmental transfer funds from a participating NSGE to provide the state share amount. The process for the intergovernmental transfer shall comply with the following:

(1) The Department, or the Department's designee, shall notify the participating

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NSGO of the state share amount to be transferred in the form of an intergovernmental transfer for purposes of seeking federal financial participation for the QIPP add-on rate, within fifteen business days after the end of each month. The participating NSGO shall have until the end of the month to remit payment of the state share amount in the form of an intergovernmental transfer to the Department or the Department's designee.

(2) If there are any outstanding intergovernmental transfer amount at the end of the payment period the provider will not be able to participate in the following year.

The QIPP add-on rate shall only be implemented upon receipt by the Department of approval of the Medicaid state plan amendment by CMS, and if such approval is received, the add-on rate is applicable no earlier than the first day of the state fiscal year following the date of receipt of such approval.

Additional documentation regarding the QIPP quality measures and agreements can be found at <u>https://dhs.iowa.gov/ime/providers/csrp/QIPP</u>.

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