

Member Call Summary

December 5, 2025

Special Guest - Ryan Murphy, Iowa Workforce Development

HHS Repeals Federal Nursing Home Staffing Rule Following Legal Challenge by LeadingAge Iowa

The U.S. Department of Health and Human Services (HHS) has formally repealed portions of the 2024 minimum staffing standards for long-term care facilities, originally issued by the Centers for Medicare & Medicaid Services (CMS). This decision follows a successful legal challenge by a coalition of states and providers, including LeadingAge lowa.

The 2024 rule would have required Medicare- and Medicaid-participating nursing homes to guarantee a minimum of 3.48 hours of direct nursing care per resident per day, including a set amount from registered nurses, and mandated that a registered nurse be on-site 24/7. LeadingAge lowa advocated against these one-size-fits-all mandates that would disproportionately harm facilities in rural communities, where workforce shortages are already acute, and could jeopardize access to care.

Earlier in 2025, the U.S. District Court for the Northern District of Iowa vacated the provisions requiring 24/7 RN staffing and the fixed hours-per-resident mandate, ruling that CMS lacked statutory authority to impose such rigid nationwide requirements.

By withdrawing the staffing mandates, HHS has removed a significant regulatory burden, especially for providers serving rural communities. The repeal underscores a renewed federal emphasis on flexibility and local control in long-term care, and opens the door for more stakeholder engagement in future policy decisions.

For LeadingAge Iowa and its members, this outcome safeguards the ability to continue serving older adults in communities across Iowa without facing unsustainable staffing obligations. LeadingAge Iowa remains committed to supporting its provider members, advocating for practical policies that protect access to high-quality care while helping providers navigate regulatory challenges. To read more, click here.

2025 HCBS Provider Quality Self-Assessment Questionnaire

On November 20, Iowa Medicaid announces the release of the 2025 Home and Community-Based Services (HCBS) Provider Quality Self-Assessment questionnaire

due January 31, 2026. All HCBS waiver and Habilitation providers enrolled for the following services are required to complete this annual HCBS Provider Quality Self-Assessment:

- Adult Day Care
- Agency Consumer-Directed Attendant Care (CDAC)
- Assisted Living Service
- Behavior Programming (Brain Injury Waiver)
- Counseling (AIDS/HIV Waiver) Day Habilitation
- Elderly Waiver Case Management
- Family and Community Support Services (Children's Mental Health Waiver)
- Family Counseling and Training (Brain Injury Waiver)
- Home-Based Habilitation
- In-Home Family Therapy (Children's Mental Health Waiver)
- Interim Medical Monitoring and Treatment (IMMT)
- Medical Day Care for Children
- Mental Health Outreach (Elderly Waiver) Prevocational Services
- Residential-Based Supported Community Living (RBSCL)
- Respite
- Supported Community Living (SCL)
- Supported Employment (SE)

This year, the questionnaire must be completed in the Provider Self-Assessment Application in IMPA. HCBS organizations are required to view the training available on the HHS website for instructions on completing this required document.

Questions regarding the 2025 HCBS Provider Quality Self-Assessment should be directed to your organization's assigned <u>HCBS Specialist</u>.

Failure to submit by January 31, 2026, will jeopardize an organization's Medicaid enrollment, including managed care contracts, and may result in a sanction of payment suspension. If you have questions, please contact lowa Medicaid Provider Services or the appropriate MCO.

You can view the entire Informational Letter <u>here</u>.

Annual Submission Requirements Regarding Prevention and Detection of Medicaid Fraud and Abuse

On December 2, Iowa Medicaid released an <u>Informational Letter</u> regarding providers that receive \$5,000,000 or more from Iowa Medicaid in any federal fiscal year (October 1 to September 30).

Section 6032 of the Deficit Reduction Act of 2005 (Pub L. 109-171) mandates that any provider or provider entity that receives payments, in any federal fiscal year, of \$5,000,000 or more from any state Medicaid program must have written policies for all

employees, including management, and for all employees of any contractor or agent, that provide detailed information about the following:

- The Federal False Claims Act established under section 3729 through 3733 of Title 31, United State Code.
- Administrative remedies for false claims and statements established under Chapter 38 of Title 31, United States Code.
- State laws pertaining to Civil or Criminal penalties for false claims and statements.
- Whistleblower protections under such laws, with respect to the role of such laws in preventing and detecting fraud, waste and abuse in Federal health care programs.

Providers are not required to send copies of their policies but must complete and return the Attestation of Compliance with Section 6032 of the Federal Deficit Reduction Act form (470-5506) annually. The form can be found on the HHS web page at https://hhs.iowa.gov/medicaid/provider-services/provider-forms.

For the federal fiscal year ending September 30, 2025, the attestation form must be received by the Iowa Medicaid by January 31, 2026. Please include the entity National Provider Identifiers (NPIs) and Tax Identification Number/Employer Identification Number (TIN/EIN) when submitting the form.

Compliance with these requirements is mandatory for providers or entities receiving \$5,000,000 or more from the Iowa Medicaid program in any federal fiscal year. The \$5,000,000 amount is based on claims paid by the Iowa Medicaid and its contracted Managed Care Entities (MCEs), net of any adjustments to those claims. The \$5,000,000 threshold is calculated based on payments made to a TIN/EID.

The form may be faxed to:

Iowa Medicaid Program Integrity (PI) Unit:

- Fax: 1-515-725-1354
- Address: Iowa Medicaid Program Integrity (PI) Unit P.O. Box 36390 Des Moines, IA 50315

State and federal laws require that any provider or provider entity that fails to comply with this requirement will be subject to sanction, including probation, suspension, or termination of participation in the lowa Medicaid program.

If you have questions, please contact Iowa Medicaid Provider Services here.

We Want to Hear From You: Help Shape the Future of Our Friday Member Calls

As we prepare for the year ahead, LeadingAge Iowa is taking a look at how we can make our Friday Member Calls even more valuable, timely, and relevant for you and your teams. These calls have become an important touchpoint for sharing updates,

discussing challenges, and staying connected across the state, and now we are asking for your input to help guide their future.

We have created a short <u>Member Call Feedback Survey</u> to gather your thoughts on what is working well, what could be improved, and what topics and formats you would like to see moving forward. Whether you join the calls every week or only occasionally, your perspective is important.

Your feedback will help us ensure these calls continue to provide meaningful support and insights for providers navigating constant change in our sector.

Please take a few minutes to complete the survey and share your ideas. Together, we can shape a member call series that best meets the needs of the LeadingAge lowa community.

Thank you in advance for your time and input, and for all you do to support aging services in lowa.

You're Invited: LeadingAge Iowa Public Policy Forum – Wednesday, December 17

LeadingAge lowa members are invited to join us for our upcoming **Public Policy** Forum on Wednesday, December 17, from 2:00–3:00 p.m. This virtual gathering offers an important opportunity for members to stay informed, engaged, and connected as we close out the year and prepare for the policy work ahead.

During the forum, we will take a look back at the significant public policy accomplishments achieved over the past year. This work was made possible through the strong partnership between LeadingAge lowa and our members across the state. We will highlight key advocacy wins, provide updates on priority issues, and share how member input has shaped our efforts.

We will also look forward to the **2025 legislative session**, offering insight into what we can expect at the Capitol, the challenges and opportunities that are likely to arise, and how we plan to position aging services providers throughout the state for success. Members will have the chance to hear early forecasts, ask questions, and offer feedback that will help guide our policy strategy in the months ahead.

Your voice continues to be essential in strengthening our advocacy efforts and advancing legislation that supports the people and communities you serve.

Register here. We hope you will join us on Wednesday, December 17, from 2–3 p.m. for this important conversation and help us kick off the upcoming legislative session with a strong, unified voice.

LeadingAge Advocacy Win on Care Compare Updates

Following a <u>letter</u> to the Centers for Medicare and Medicaid Services (CMS) on November 13 requesting consideration of specific priorities following the end of the federal government shutdown, LeadingAge was notified that Nursing Home Care Compare was updated on November 20. The Health Inspection domain and rating was frozen since August and was scheduled to update on October 29, along with the Staffing and Quality Measures domains and the overall Five Star rating as part of the quarterly refresh. However, the quarterly refresh could not take place during the shutdown. LeadingAge requested CMS to consider an off-cycle refresh rather than waiting for the next refresh in January 2026. LeadingAge is pleased with the off-cycle refresh that includes updates to all three domains and the overall Five-Star rating. The next quarterly refresh is scheduled for January and will include a <u>revised long-stay antipsychotic measure</u> that incorporates claims data in the measure calculation. Providers that note any errors in their Five Star Rating or domain ratings should reach out to CMS using the Care Compare HelpDesk email at bettercare@cms.hhs.gov.

DIAL Monthly Updates

On November 24, the Iowa Department of Inspections, Appeals, and Licensing hosted their monthly association update call. The updates from DIAL included:

HHA & Hospice:

The Home Health OASIS classes are resuming as they were paused during the government shutdown. DIAL provided a reminder to all Home Health Agencies (HHAs) that if you are going to cease operations that you must provide timely notification to DIAL. Upon ceasing operations, the HHA must ensure that patients/clients are safely transitioned to another care provider and that appropriate notifications are given to patients/clients and a public notice is issued. DIAL reported that there was an incident they investigated recently where an HHA did not provide timely notice of relocation which resulted in their patient/clients not being safely transitioned with a new provider and the Centers for Medicare and Medicaid Services (CMS) cautioned DIAL that this could result in involuntary termination of the provider agreement based on the severity of circumstances.

Hospice surveys continued during the government shutdown without any interruptions and no updates to report.

AL/RCF/ADS:

Continuing care surveys were able to be completed during the government shutdown as there is no associated federal funding for the programs. As reported in the survey trends report, Assisted Living surveys are expected to return to the 24-month recertification period within the next couple of months and the number of past due complaints has significantly decreased.

LTC:

During the government shutdown, survey activity including processing survey results stopped unless there was harm or immediate jeopardy. DIAL indicated that while they had to pause most survey activity, they were able to catch up on the triaged harm level complaints. Unfortunately, the inability to process surveys left approximately 250 surveys to process but DIAL reported that they reduced this by half in the last week.

DIAL also indicated that when the surveys are processed and the CMS-2567 issued, CMS has directed the survey agency to include the exit date as the date the CMS-2567 is issued. However, if the provider has a good plan in place including the deficiencies being completed shortly after the surveyors exiting, the exit date can be amended. If you have a recent survey that you would like to have the exit date amended, you can reach out to your program coordinator.

During the shutdown, DIAL indicated that they were able to reassign long-term care surveyors to complete Nurse Aide Training and Competency Evaluation Program (NATCEP) surveys. During this process there were some concerns identified that will be addressed with the community colleges and NATCEP programs. Additionally, DIAL is going to implement quarterly meetings with providers that have NATCEP programs.

DIAL Provider/Surveyor Training

The Department of Inspections, Appeals, and Licensing (DIAL) opened registration for their second provider/surveyor education event of the year. Due to the recent government shutdown, long-term care surveyors were significantly impacted and DIAL indicated that they likely will not have many surveyors on site for the education event. This meeting is hybrid, and providers are able to attend virtually if desired. You can view the agenda and meeting link here.

When: Monday, December 8 from 9 a.m. – 1 p.m.

Where: State Historical Society of Iowa

600 East Locust Street

Des Moines, Iowa 50319

New Member Resources

Special Considerations when Using Chemotherapy one-pager

Driving Quality: Navigating Healthcare with LeadingAge Illinois/Iowa webcast on the two long-term stay quality measure related to falls.

Upcoming Events

MDS Virtual Program (virtual)

December 10-12, 2025 from 11 a.m.-3 p.m.

Regional Networking Meeting (in-person)

January 8, 2026 from 1-3 p.m.

Location: Brio of Johnston, 6901 Peckham Street, Johnston, IA