Minutes for Idaho Veterans Affairs Commission
May 13, 2020
Special Virtual Meeting via Microsoft Teams

Call to Order
The quarterly IVAC meeting scheduled for April in Lewiston was cancelled due to the COVID-19 pandemic.

This virtual meeting of the Idaho Veterans Affairs Commission was held on Wednesday, May 13, 2020, via Microsoft Teams. It began at 1:00 p.m. and was presided over by Idaho Division of Veterans Services Chief Administrator Marv Hagedorn due to the retirement of Commission Chairman Melvin Napier.

Attendees
Commission Members in attendance included: Patrick Grace, Jinny Cash, Art Gimpel and Josh Callihan.

Leo Dub was unable to attend due to a previously scheduled appointment.

IDVS Staff Members in attendance included: IDVS Chief Administrator Marv Hagedorn, IDVS Deputy Chief Administrator Tracy Schaner, IDVS Business Support Services Bureau Chief Paul Spannknebel, IDVS Financial Officer Debbie Spence, ISVH-Boise Administrator Rick Holloway, ISVH-Pocatello Administrator Josiah Dahlstrom, ISVH-Lewiston Administrator Mark High and Administrative Assistant Mitzi Cheldelin.

Tony Eldeen from the Idaho Division of Financial Management was in attendance.

Number of Citizens in attendance: 0

Announcements
The next IVAC meeting will be Wednesday, July 15, 2020 in Boise at the IDVS Central Support Office (if COVID-19 pandemic precautions do not preclude meeting).

Approval of Minutes
A motion to approve the minutes of the previous meeting on January 9, 2020 was made by Art Gimpel and seconded by Jinny Cash. Minutes were unanimously accepted.

Business Meeting
Election of Commission Chairman
1. Introduction of new Commission member Josh Callihan
2. Discussion of pros and cons of each member should they be elected as Chairman
3. It was decided it made the most sense to have the Chairman from the Treasure Valley area
4. Art Gimpel nominated Patrick Grace to be Chairman
5. **Jinny Cash** nominated **Josh Callihan** to be Vice-Chairman
6. Unanimous vote electing **Patrick Grace** Chairman and **Josh Callihan** Vice-Chairman
7. It was decided Chief Administrator **Marv Hagedorn** would finish presiding over this meeting due to its unique format via Microsoft Teams

**Nursing Home Charges – Presentation by Tracy Schaner**

1. Ancillary Charges - Recommendation of charging a flat fee of $16/day to the daily rate vs. charging for each medical supply ancillary charge to residents/day.
   a. Earlier this year received notice that by year end our medical supply tracking / inventory system will no longer be compatible with the recent changes to Microsoft Internet Explorer, thus this program will no longer be available once Microsoft deactivates the current Internet Explorer version. This would require us to purchase an entirely new system to charge the ancillary medical supplies to residents.
   b. With being required to purchase a new system, we felt it was proper timing to perform a cost analysis on the medical supply ancillary charges based on the FY19 actual private pay source charges and census within the Homes. This analysis was conducted to determine the overall impact should we proceed with a more simplified tracking system and include these charges as a flat fee in the daily rate cost of care. This change in chargeable only effects those who are private pay.
   c. This type of flat fee charge to the daily rate is a common practice in nursing facilities.
   d. Most resident payment types are Service Connected, Medicaid, or Medicare and this type of flat fee daily charge to our residents would not impact the cost these residents pay due to their payor source.
   e. After obtaining the private pay analysis we weighted the pros and cons of this cost structure and it was determined that including these charges in the daily rate may be the best solution based on the following factors:
      i. It would create increased staffing and operational efficiencies allowing our nursing staff to focus more on resident cares
      ii. It would create more consistency and fairness in these charges to private pay residents due to the historical challenges of the nursing staff and other trying to document and capturing these charges for each resident
      iii. It would allow provide for an increase in revenue correlated to the challenges of accurately capturing these charges
      iv. It would reduce confusion for resident and families who disagreed about the itemized charges and resolve any miscoding of charges
      v. It would allow the nursing department to be able to easily implement real time charting in our electronic medical record (EMR) system. We are currently not capable due to software issues directly related to these chargeable.
      vi. While only select number of private pay residents may see an increase in costs per day, it is likely that as these resident’s service and care needs progress this cost will balance out and they could possibly see a decrease.
      vii. It would simplify the process from an operational perspective while saving the cost of finding and purchasing a brand-new system that will integrate with the current clinical/billing software and the new upcoming statewide GL / expenditure system. Finding a new chargeable medical
supply system that will integrate with our other electronic systems is a challenging task.

f. Additionally, before making this recommendation to move forward with this modification (effective July 1, 2020), we reached out to the Medicaid Division with the Idaho Department of Health & Welfare, along with Myers & Stauffer and our Consultant who prepares our Medicaid Cost Report to get their feedback and see if they had any concerns with this change. Following these discussions, the Department approved for us to initiate a flat fee based on resident days to record the respective charges for each payer source (Medicaid, Medicare, Private, VA, etc.) for the medical supplies.

2. Medicaid Reimbursement Methodology
   a. In addition to the conversations we've had about the ancillary charges with the Medicaid Division with the Idaho Department of Health & Welfare, along with Myers & Stauffer and our Consultant who prepares our Medicaid Cost Report, we've also had multiple conversations with them, over the past year, about our Medicaid reimbursement methodology.
   b. Although our three Homes are all currently self-sufficient (receiving no support from the general fund), we are seeing fluctuations and decreases in our payment sources which could result in needed general fund appropriation soon. As such, we have been proactively looking at probable solutions that will lessen the need for general fund use to include a cost-based Medicaid reimbursement model where we can be reimbursed for the Medicaid portion of all of our costs without the caps on indirect and direct costs so that we can receive 100% of our allowable costs.
   c. This would align our reimbursement methodology with that currently used to calculate the Medicaid rates paid to State Hospital South (ISH-Syringa).
   d. With this reimbursement change, we would no longer be able to participate in the IGT/UPL supplemental payment program because our new Medicaid rates would likely be more than what Medicare would pay us for those Medicaid days.
   e. Our Consultant, who prepares our Medicaid Cost, put together an analysis utilizing all Myers & Stauffer's numbers, and it reflected that this new payment methodology would be a better route for the Veterans Homes. Although this, in turn, would have a negative impact on IDHW's budget as funding is being switched from the UPL (which is 100% Federal) to a 70/30 Federal/State match, overall it would be in the best interest of the State. Rather than IDVS needing to request 100% general funds for the difference in the coming years, the 70/30 Federal/State match was shown in this analysis to be the more fiscally responsible direction to go between the two agencies.
   f. This new reimbursement methodology would not require any CFR, Statute or IDAPA change. Instead, it will only require an IDHW state plan amendment. If approved, the state plan amendment would take approx. 5-6 months due to tribal and legal notice requirements and approval timelines.

3. Art Gimpel motioned to adopt the new fee structure for private pay residents.
4. Josh Callihan seconded the motion
5. Unanimous vote to adopt the new payment structure beginning July 1, 2021.
Veterans Recognition Fund

1. It had been previously discussed and suggested that the $139,000 allotted by the legislature for the Veterans Recognition Fund could be distributed in the following way:
   a. $25,000 – Wyakin Foundation
   b. $22,000 – Legacy Corps
   c. $20,000 – Higher Ground
   d. $17,000 – Bravehearts
   e. $15,000 – Idaho State University Veteran Services
   f. $15,000 – Harvest Heroes
   g. $25,000 – IDVS Veteran Support Fund
2. Each organization was discussed briefly and the benefit each brings to Idaho Veterans.
3. Bravehearts is no longer part of the Idaho Veterans Assistance League (IVAL) and their leadership has changed. There was discussion whether to fund Bravehearts this year.
4. Jinny Cash made a motion to defund Bravehearts and transfer the $17,000 to the IDVS Veteran Support Fund to help more Idaho Veterans across the State.
5. Patrick Grace seconded the motion.
6. Motion passed unanimously, making the funding breakdown as follows:
   a. $25,000 – Wyakin Foundation
   b. $22,000 – Legacy Corps
   c. $20,000 – Higher Ground
   d. $15,000 – Idaho State University Veteran Services
   e. $15,000 – Harvest Heroes
   f. $42,000 – IDVS Veteran Support Fund
7. Changes will take effect with the 2021 Fiscal Year on July 1, 2020

Chief Administrator Comments

1. We have been very proactive and taken numerous precautions and we are happy to report there is no COVID-19 virus in any of the Idaho State Veterans Homes to date.
2. There will be June Groundbreaking for the new Post Falls Home – date to be announced.
3. Education Bureau Chief Doug Jacobson will be leaving on May 29, 2020 to pursue a business opportunity with Amazon in Salt Lake City.
4. The tentatively planned Korean War Veterans Recognition in Idaho Falls in July will be cancelled due to COVID-19 concerns.
5. The opening of the Blackfoot Cemetery is still on track for November.

Adjournment

Commissioner Art Gimpel moved the meeting be adjourned, seconded by Commissioner Jinny Cash and was adjourned at 2:17 p.m.

Mitzi Cheldelin
Administrative Assistant
Idaho Division of Veteran Services