



# NDLTCA Newsletter

## July 8, 2025

**All Members - *All Members***  
**Assisted Living - *AL***  
**Basic Care and Adult Residential - *BC***  
**Nursing Facilities - *NF***

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Thank you to our Platinum Sponsor, Sysco for your continued support!



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## CMS Updates

### Alert: Medicare Fraud Scheme Involving Phishing Fax Requests

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CMS has identified a fraud scheme targeting Medicare providers and suppliers via fax. [Read More](#)

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# Important Update: Daily MDS Census and Provider History Reports Moving to iQIES on July 14, 2025

*NF*

Effective July 14, 2025, collection of all NH provider demographic and survey and certification data will move from the Automated Survey Processing Environment (ASPEN) in the Quality Improvement and Evaluation System (QIES) to the Internet Quality Improvement and Evaluation System (IQIES).

Update to PBJ Manual posted 7-1-25: [Version 2.7](#)

Three key changes that added additional clarity:

- Run census reports and confirm accuracy of census data prior to the submission deadline.
- No single individual can have more than 22.5 hours of work reported for any one day.
- Nursing hours must be worked on-site.

Key highlights:

- Surveyors are aware of the PBJ meal break policy and will not cite a facility if the facility can prove 8 consecutive hours of RN on-site coverage 7 days a week.
- Facilities with RN waivers should contact CMS.
- If an employee's salary and contract are based on a work week exceeding 40 hours and the total hours are specified, all hours worked – excluding meal breaks – may be reported.
- Three new FAQs related to PBJ audits were included.

As part of this migration, two commonly accessed reports by NH providers in the Certification and Survey Provider Enhanced Reports (CASPER) Reporting application will also move into IQIES. The reports listed below will no longer be available in CASPER on July 14:

- CASPER 1704D Daily MDS Census Detail report
  - Located in the Payroll Based Journal (PBJ) Reports report category
- CASPER 1704S Daily MDS Census Summary report
  - Located in the Payroll Based Journal (PBJ) Reports report category
- MDS 0003D/0004D Package Report
  - Located in the MDS 3.0 NH Provider report category

Submissions must be received by the end of the 45th calendar day (11:59 PM Eastern Standard Time) after the last day in each fiscal quarter to be considered timely.

**Plan Ahead – Submit Early:** To avoid delays or complications with data submission, we strongly encourage all users to **submit their PBJ data as early as possible, ideally before July 14**. Early reporting ensures smoother processing and minimizes the risk of last-minute issues.

***NOTE: Payroll Based Journal (PBJ) data submissions and reporting will continue to occur in the QIES environment until a PBJ migration date is announced.***

Resources:

- Payroll-Based Journal: Best Practices for Submitting Data
- [Payroll-Based Journal FAQs](#)
- [Reporting Hours in PBJ for RNs](#)
- [Reporting Hours in PBJ Checklist](#)
- Questions: [staffdatacollection@ahca.org](mailto:staffdatacollection@ahca.org)

**ND long term care facilities will need to use iQIES for submitting electronic Plans of Correction (ePoCs), accessing specific reports, and continuing Minimum Data Set (MDS) submissions.** CMS has provided guidance and instructional materials to facilities regarding this transition, including steps for creating HARP accounts and assigning Provider Security Roles to access ePoCs and other iQIES features.

Many of our long term care facilities already have users in iQIES due to the prior transition of MDS.

Mary Dillman [mjdillman@nd.gov](mailto:mjdillman@nd.gov) from the Health Facilities office at HHS has shared relevant information with the facilities and continues to offer support as needed.

Once ePOC functionality is enabled in iQIES, the current ePOC system will be disabled.

Nursing home staff that currently use ePOC will need to request the Provider ePOC Administrator role in iQIES **on or after July 14, 2025**.

This request may only be done after the user signs up for [HCQIS Access Roles & Profile \(HARP\)](#) access.

Nursing Home User Training – Provider ePOC Administrator Role is now available in [QSEP](#).

Facilities that currently utilize ePOC should have all designees review this training module and the accompanying [User Manual](#).

Per CMS, “old” POCs will transition to iQIES for facilities and SSAs to reference them in the future.

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## **REMINDER: August 1 Mandatory SNF Provider Enrollment Revalidation Deadline**

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**Skilled nursing facility (SNF) providers enrolled in Medicare or Medicare/Medicaid must [submit](#) a mandatory off-cycle provider enrollment revalidation by August 1, 2025, or risk having enrollment suspended or revoked.** The Centers for Medicare and Medicaid Services (CMS) issued this mandatory process last September and extended the deadline following AHCA/NCAL advocacy efforts for relief on the extensive new reporting requirements.

AHCA/NCAL continues to advocate for additional relief. However, as this deadline still stands, it is important for SNF providers notified by their MAC to ensure completion of the revalidation submission process by August 1. CMS recently [issued a reminder](#) in its MLN Connects newsletter and will soon send reminders through MACs to SNF providers that are required to complete the process by this deadline but have not yet done so.

### **AHCA/NCAL Resources**

AHCA/NCAL offers a variety of SNF provider enrollment resources available on the [Reimbursement webpage](#) under *Resources and Documents*. SNF providers should also review the two most recent AHCA/NCAL office hours calls – [March 28](#) and [April 4](#) – that reflect the updated changes to the sub-regulatory guidance. The call recordings and downloadable slides are available.

Please contact [855Revalidation@ahca.org](mailto:855Revalidation@ahca.org) with any questions.

### **CMS Resources**

SNF providers can find detailed sub-regulatory guidance information on the new organizations and individual parties required to be reported on the [CMS website](#). CMS also offers a step-by-step [screenshot](#) of instructions on completing an application via the Medicare Provider Enrollment, Chain, and Ownership System (PECOS).

If you need support with PECOS, please contact the External User Services ([EUS](#)) Help Desk via [email](#) or call (866) 484-8049. Hours of operation are Monday through Friday, 7 AM – 7 PM Eastern.

Providers unsure about whether they are required to submit the revalidation information should contact their [MAC provider enrollment helpdesk](#).

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## Federal Policy Update

### Understanding the Impacts of Reconciliation on Long Term Care in North Dakota

#### *All Members*

Recent discussions about federal reconciliation legislation have raised questions in the community about how long term care services in North Dakota may be affected. We want to share some information and context to help clarify how the bill relates to the programs and services older adults rely on.

First, the bill's provider tax provisions have been a significant topic in national conversations. In North Dakota, however, long term care providers are not subject to these provider taxes. As it relates to other states, the legislation includes an explicit carve-out for long term care to help ensure access is maintained in states where provider taxes could have created additional challenges.

It is also important to note that long term care services remain available through a combination of Medicaid and private pay arrangements. Assisted living continues to be private pay, while skilled nursing facilities, basic care, and adult residential care programs are all Medicaid-eligible in North Dakota.

Major provisions to note:

- **Moratorium on the staffing mandate:** There is a 10-year delay of the federal staffing mandate for nursing homes, which – in Congressional terms – is essentially a repeal. We have been pushing Congress to resolve this rule since it was finalized and are pleased to see it in the final package. The parts of the rule already enacted remain in place (i.e. facility assessment), and we are seeking relief from the Trump Administration on that paperwork requirement. Meanwhile, we continue to defend our lawsuit and monitor other legal challenges. We are confident that the positive rulings in both Texas and Iowa will stand, and this unrealistic regulation will be rescinded once and for all.
- **Retroactive Medicaid coverage:** The bill maintains a 60-day retroactive eligibility window, an increase from the originally proposed 30 days. While this is still shorter than the traditional 90-day timeframe and presents challenges for providers, it offers some relief in managing coverage approvals.
- This bill also includes a **new Rural Health Transformation Fund**. This program would allocate \$50 billion in funds over 5 years to implement certain health-related activities. Half of the \$50 billion would be appropriated equally among all 50 states. 40% would be allocated to states through a mechanism determined by the Administrator of the Centers for Medicare and Medicaid Services (CMS) with consideration given to states with high rural populations and a high proportion of rural facilities.
  - The bill defines rural health facilities as all rural hospital designations, rural health clinics, federally-qualified health centers, and certain behavioral health providers located in rural areas.

Throughout the development of this legislation, NDLTCA has been in regular communication with North Dakota’s congressional delegation to share input and ensure the perspectives of residents and providers were considered. We appreciate their openness and engagement on these issues.

We remain committed to supporting access to quality long term care across North Dakota and to working collaboratively with policymakers, community organizations, and other stakeholders.

We hope this information is helpful in understanding how the bill relates specifically to long term care in ND.

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## House Lawmakers Introduce Legislation Easing Three-Day Stay Rule For Medicare Coverage

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[McKnight's Long-Term Care News](#) (7/1, Marselas) reports, "A bipartisan group of House lawmakers is making another run at softening hospital-stay requirements needed to qualify for Medicare nursing home coverage." Pairs of Republicans and Democrats "have introduced the Improving Access to Medicare Coverage Act of 2025, which would keep a 60-year-old three-day hospital prerequisite but allow it to be a mixture of inpatient and observation stay time."

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## Basic Care Cost Report

### 2025 Basic Care Cost Report Template

*BC*

An updated cost report template has been posted to HHS's website:

<https://www.hhs.nd.gov/healthcare/medicaid/provider/facility-cost-reporting>

Because of the changes outlined below, the updated template must be used. The updated template has Rev. 06-25.

- Sch C-2a – bad debt has been linked to the correct field on Sch T(C19)
- Sch D – passthrough line has been added so the amounts transfer to Sch C-1
- Sch D-1 – line 88 for Nonallowable Bad Debt has been removed. Line 57 has been renamed to Nonallowable Bad Debt and will populate from Schedule T cells C15 and C16.
- Sch F – GL Account # has been unlocked

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## Assisted Living

### Move In/Move Out

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#### [Moving Into An Assisted Living Residence: Making A Successful Transition](#)

This consumer guide aims to help new residents prepare for the transition of moving into an assisted living community.

#### [Preparing Residents For Moving Out Of Assisted Living Communities](#)

This guide will explain the strategies involved in successfully transitioning a resident move-out during nonmedical, non-emergency situations.

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# Quality

## 2026 National Quality Award Program Kick-Off

### *All Members*

Join National Quality Award Program staff for essential information and insights to commence your 2026 application process with precision and efficacy. This webinar will outline crucial deadlines, pivotal dates, and resources tailored to enhance applicant support. Participants will gain insight into new educational tools, as well as updates to existing resources. Participants will understand the significance of program policies and how they impact their application. Additionally, participants will also have the chance to get their questions answered.

[Registration](#) is free to AHCA/NCAL members.

Includes a **Live Web Event on 07/31/2025 at 2:00 PM (CST)**

If you are not able to attend live, the recording will be provided to you. A certificate of attendance will be available after webinar. (No CEs)

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## Become a QAPI Certified Professional!

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## **Administrators - DONs - Nurse Leaders - Infection Preventionists - Leadership Teams**

Nursing facilities must have data-driven QAPI Programs that address the full range of care and services offered. Developed by AAPACN, this five-course program trains leaders and teams to provide high-value care and services while positioning your business for continuous growth and sustained performance improvement.

[Visit QAPIprep.com](http://QAPIprep.com)

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## **BCBS Update**

### **Need Assistance with BCBSND, Medicaid Expansion, or NextBlue?**

*NF*

*Hello,*

*Hope you are doing well! It has been awhile since I checked in with you all. I wanted to pass along my contact information in the event you need to escalate anything with BCBSND, Medicaid Expansion or NextBlue.*

*Please be sure to share with your teams that are working through prior authorizations, claims, etc. As always, the appropriate Customer Contact Centers are best resource for specific questions, but always reach out if you have anything that needs to be escalated, and I will be*

*happy to help.*

*Nicole Pesta*

701-282-1131

[nicole.pesta@bcbsnd.com](mailto:nicole.pesta@bcbsnd.com)

*We do also hold regular SNF meetings around our senior market products, our last one of 2025 is October 13th. If you are not already part of these meetings and would like to be, please let me know.*

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## **VA**

### **Veterans Excited About Being Able To Choose Assisted Living For Long-Term Care, Sen. Collins Says**

*AL*

[McKnight's Senior Living](#) (7/3, A. Bowers) reports, "The prospect of being able to choose assisted living for long-term care has 'created a great deal of excitement among veterans who rely on long-term care facilities,' Sen. Susan Collins (R-ME) said at a recent hearing of the Senate Appropriations Subcommittee on Military Construction, Veterans Affairs, and Related Agencies." Collins "was referring to a planned VA-funded pilot program that will enable some veterans to make that choice," which NCAL has been advocating for "for several years."

Learn more...<https://www.ahcancal.org/News-and-Communications/Blog/Pages/VA-Assisted-Living-Pilot-Updates.aspx>

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## Workforce

### NDLTCA Website: Keep Your Job Listings Up to Date!

*All Members*

Are your job postings current?

We're encouraging all members to take a few moments to review the job postings listed on our website:

👉 [NDLTCA Job Openings](#)

If any of the positions you've posted are no longer open or need to be updated, please let us know so we can make the necessary changes. Keeping this page current helps job seekers find the right opportunities—and ensures your organization stays visible to top talent.

#### **Have a new job to share?**

We'd love to include it! Simply send us the following:

- The job title and description
- Any important details (e.g., location, application deadline)
- A link to the job posting on your organization's website

You can send updates or new listings to Belma at [belma@ndltca.org](mailto:belma@ndltca.org)

Thank you for helping us keep our job board accurate and helpful for everyone!



Contact us at 701-222-0660 or email Nikki at [nikki@ndltca.org](mailto:nikki@ndltca.org) or Peggy at [peggy@ndltca.org](mailto:peggy@ndltca.org).