



NATIONAL BACKGROUND CHECK PROGRAM FOR LONG-TERM CARE PROVIDERS: ASSESSMENT OF STATE PROGRAMS CONCLUDED BETWEEN 2013 AND 2016

The HHS Office of the Inspector General (OIG) has published [the second in a series of reports](#) designed to assist CMS and States continuing in the NBCP, to promote program improvements and increase protections for vulnerable population.

The NBCP, enacted by legislation in 2010, provides grants to States to develop systems to conduct Federal and State background checks. Congress mandated the HHS to produce an evaluation of the Program within 180 days of Program completion, which could occur as late as 2024. Grant beginning and end dates stagger, with 10 States concluding participation between 2013 and 2016, and 19 States continuing participation past 2016.

CMS NEWS AND ANNOUNCEMENTS

CMS announced in a [press release](#) that it will make changes to skilled nursing facility (SNF) inspections, staffing requirements and new quality measures in April 2019. Changes include further enhancing details about facilities' staffing numbers and reducing the number of days SNFs can function without a registered nurse (RN). CMS Administrator Seema Verma said, "Our updates to Nursing Home Compare reflect more transparent and meaningful information about the quality of care that each nursing home is giving its residents. Our goal is to drive quality improvements across the industry and empower consumers to make decisions, with more confidence, for their loved ones."

Revisions made in the next month include a lift on the current freeze of health inspection ratings. CMS froze the health inspection star ratings category after implementing a new survey process for Long-Term Care facilities. The facilities received the surveys at different times and so some were surveyed under the old process and some under the new. The freeze was placed to avoid having the facilities scored under two different evaluation processes and having inaccurate data. The freeze lasted until all nursing homes were surveyed under the new process.

CMS is also setting higher thresholds and evidence-based standards for nursing homes' staffing levels. The press release said, "CMS found that as staffing levels increase, quality increases and is therefore assigning an automatic one-star rating when a Nursing Home facility reports "no registered nurse is onsite." In April 2019, the threshold for the number of days without an RN onsite in a quarter that triggers an automatic downgrade to one-star will be reduced from seven days to four days. CMS is also making changes to the quality component on Nursing Home Compare that would improve identifying differences in quality among nursing homes, raise expectations for quality, and incentivize continuous quality improvement." CMS is making the nursing home search process easier for consumers by amending the quality rating thresholds among nursing homes. There is also a separate quality rating system for short-stay and long-stay residents.

NBCP NURSE AIDE REGISTRY (NNAR)

The NBCP Nurse Aide Registry (NNAR) is one web service designed to automatically check an applicant's demographic information (including aliases) against the NAR for each participating State regardless of whether the applicant has reported living or working in the State. The NNAR provides an efficient and effective way for State regulatory agencies or nursing homes to complete a nationwide search of any State NAR.

Under current practice, federal law requires each State to maintain a NAR with specific individual data. The format in which the data is retained and the requirements to access the data vary greatly from State to State, yet nursing homes seeking to employ a direct care worker or State regulatory agencies conducting background screening on behalf of the nursing homes must check their State NAR AND manually enter the applicant's demographic information into EACH State NAR the applicant has reported as living or working.

- NNAR is an initiative of the NBCP, supported by CMS via the NBCP:
- 14 States currently providing data
 - Over 1 million searches in 16 months
 - At least 15 ineligible individuals identified in other States
 - NNAR can be available to all states without large investment or grant
 - Facilitates compliance with federal regulations- pre-employment screening
- For more information, contact stateliasion@cna.org

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The Forum's most recent webinar was on Thursday, March 28, 2019; the Forum webinars are scheduled every other month. These calls are held to help address emerging issues and questions faced by current, graduated, and non-grantee States. Forum calls also include updates from CMS and CNA representatives. States are encouraged to submit discussion topics prior to the call to [Jane Lengel](#) or [Brenda Dreher](#). As a reminder, States can submit questions to the group at any time through the Forum's group email at background-checksforum@googlegroups.com.

Planning for the 2019 NBCP Track at the AHFSA Conference is underway. The Forum will provide updates regarding session topics and for which sessions it needs additional presenters soon. If you have questions or conference ideas, please contact [Melanie Madore](#) or [Meghan Shears](#).

For more information on Forum activities and to join, please visit the [Forum's page](#) on the AHFSA website and email backgroundcheckforum@gmail.com.

UPCOMING AHFSA MEETINGS:

AHFSA Annual Conference,
August 4 - 7, 2019, New Orleans, LA

OHIO MEDICAID EXCLUSION LIST ADDED TO ARCS

On Tuesday, February 19, 2019, Ohio's NBCP added the Ohio Medicaid Exclusion and Suspension List to its Automated Registry Check System (ARCS). The list identifies individuals who are excluded from employment by a Medicaid provider because they have been terminated for cause. Individuals on this list may also appear on the Office of Inspector General (OIG) and the System for Award Management (SAM) lists. The Ohio Department of Medicaid updates the list every two weeks. The list is also part of the monthly registry recheck of all applications in ARCS.

Why is it important to check this list?

According to federal law, an individual or company on this list may not be an owner in whole or in part, officer or partner, authorized agent, associate, manager, or employee of a Medicaid provider. The individual or company is prohibited from owning, contracting for, arranging for, rendering, or ordering services for Medicaid recipients, or receiving direct or indirect reimbursement of Medicaid funds in the form of salary, shared fees, contracts, kickbacks, or rebates from or through any participating provider or risk contractor. History has shown that providers who have been excluded or suspended from Medicaid will apply to work for other organizations that receive Medicaid funds. Ohio's providers now can auto-check this list to identify these individuals and exclude them from employment.

BACKGROUND CHECK SOLVES 20 YEAR FLORIDA COLD CASE

Florida has very strong laws when it comes to the protection of its most vulnerable population. Most employees who work in health care facilities in the State of Florida are required to be screened in the Care Provider Background Screening Clearinghouse (Clearinghouse). Part of the law is that the employee has their fingerprints scanned and retained and a photo taken at the time of screening. The criminal history and photo are then processed and stored in the Clearinghouse.

[CNN](#) reports that a 20 year old cold case was solved due to a fingerprint-based background check. On Monday, August 24, 1998, Sondra Better was murdered at Lu Shay's Consignment Shop in Delray Beach, Florida. A witness to the crime saw the killer leave behind a trail of blood and fingerprints. Police had entered the fingerprints into the Automated Fingerprint Identification System (AFIS) database, but did not find any matches until December 2018. Todd Barket of Brandon, Florida, submitted his fingerprints as part of a nursing assistant job application. There was a hit on AFIS as his blood and fingerprints matched the samples taken from the crime scene in 1998.

The fingerprints taken for employment purposes of the individual mentioned in the article were able to be used to match him to a 20 year old unsolved murder. Because his fingerprints were retained, the Clearinghouse received notification within hours after he was arrested for murder. His employment eligibility was updated in the Clearinghouse and the health care provider was immediately notified of the change in his eligibility all in the same day.

QUARTERLY REPORTS DUE APRIL 30, 2019

Reports for the quarter ending March 31, 2019, are due by close of business on **April 30, 2019**. Please be sure to use the new Cost Report that includes your State's name. The report templates are available on the [NBCP BGCheckInfo](#) website. Graduating States must complete [grant closeout](#) in addition to final quarterly reports.

CMS and Office of Acquisition and Grants Management have a process that must be followed for closeout of the National Background Check Program grant. For more information, see the [NBCP Website](#).

