



Louisiana Department of Health Bureau of Health Services Financing

MEMORANDUM

DATE: October 16, 2025

TO: Administrator or Corporate Officer

FROM: Lindsey Nizzo, Medicaid Program Manager

SUBJECT: Nursing Home Cost Report Filing Changes and Updates

CMS-2540-24 Effective for CRYE 9/30/2025

All cost reports and supporting documentation are to be filed with our cost report acceptance contractor Myers & Stauffer LC. In addition, all Louisiana Medicaid NF cost reports are to be completed using the appropriate version of the Microsoft Excel template. Cost report period ends with a September 30, 2025 year-end and later must be completed using version 6.19 dated 9/30/2025 which has been updated to reflect the changes in CMS-2540-24. Cost report periods ending before September 30, 2025 year-end must be completed using version 6.18 dated 4/11/2025. Cost reports submitted using an inappropriate version of the Microsoft Excel template will be rejected as incomplete and will not satisfy the requirements for timely filing. Both versions of the Medicaid NF cost report are located on the web at the below link under the "Downloads" section: https://myersandstauffer.com/client-portal/louisiana/louisiana-case-mix/

Cost Penorts are due five (5) months after the pursing facility's cost report period ands. Thus, cost re

Cost Reports are due five (5) months after the nursing facility's cost report period ends. Thus, cost reports with a September 30, 2025 year-end are due to Myers & Stauffer LC by March 2, 2026.

Refer to the Louisiana Medicaid NF cost report "Instructions" and "Cover" tabs and "Schedule L: Required Items" when preparing your facility's cost report. Any cost report submitted to Myers & Stauffer with missing documents, signatures, home office or management company's cost report and supporting documentation, etc., as noted on Schedule L will be considered incomplete and will not satisfy the requirements for timely filing. As stated in Section C-2(d) of your Provider Agreement with the State of Louisiana, a non-refundable penalty of 5% of the total monthly payment for each month of non- compliance will be imposed. This penalty may be progressive by 5% for each succeeding month until all completed information is received. Please review the Detailed Instructions for Filing Nursing Home Costs Report(s) for 2025 beginning on page 3 of this letter. Provider should pay close attention to the requirements in those instructions in order to accurately and timely complete their cost reporting packages for FY2025.

Version 6.19 of the Medicaid excel template incorporates the below changes to align with the Form CMS-2540-24. There are a number of changes in CMS-2540-24. More information related to the Medicare cost report changes can be found on the CMS website. The primary CMS-2540-24 changes that impact the Louisiana Medicaid NF cost report are detailed below. Please see the Instructions tab within the template for more information.

1. CMS-2540-24

- a. Worksheet A: Included a column to separately identify contract labor, added new cost centers, and removed obsolete cost centers
- 2. Louisiana Medicaid NF Cost Report
 - a. Schedules E-1, F, G, I-1, and J have been updated to include the Worksheet A cost center line numbers and descriptions as indicated on CMS-2540-24.

- b. Note: Salary should be selected for costs reported in Column 1 (Salaries & Wages) and Other should be selected for costs reported in Column 2 (Contract Labor) and Column 4 (Other) of W/S A on CMS-2540-24.
- c. Ancillary Service Statistic section on Schedule J has been limited to the first 10 cost centers plus a final cost center (line 37) which is designated as "All Other Ancillary Service Cost Center Statistics". This line will be utilized for any other ancillary service cost center statistics not explicitly listed on lines 27-36.
- d. Schedule L Form 941s are not required to be filed with cost reports for periods 9/30/25 and after.

If you require further information, please contact Lindsey Nizzo at Lindsey.Nizzo@la.gov.

Attachment

LNN

cc: Catie Mellott
Missy Peroyea

DETAILED INSTRUCTIONS FOR FILING NURSING HOME COST REPORT(S) FOR 2025

The cost report packet submitted to Myers & Stauffer will be reviewed to determine if all required information was received timely. The packet must include an electronic copy of the Louisiana Medicaid NF cost report in the appropriate Excel template (v. 6.18 dated 4/11/2025 for CRYE prior to 9/30/2025 and v. 6.19 dated 9/30/2025 for CRYE 9/30/2025 and after), an electronic copy of the Medicare cost report in ECR format and all of the applicable supporting documentation as listed on Schedule L of the Louisiana Medicaid NF cost report.

A signed and completed Medicare Home Office cost report and Louisiana Medicaid NF cost report and ALL required attachments for both cost reports should be completed and submitted for all home offices.

Cost Report Submission via Cost Report Web Portal:

Myers and Stauffer has developed a cost report web portal for use by nursing facilities to submit their cost reports and supporting documentation. This web portal is distinct from the MDS web portal facilities are currently using, and is a secure method of submitting Protected Health Information (PHI).

Cost Report files and all support **MUST** be submitted electronically to Myers & Stauffer via the Myers and Stauffer Cost Report Web Portal.

Before sending cost reports or supporting documents electronically:

Review the file name format requirements listed at the bottom of Schedule L. Review all files for readability and legibility.

Review the Validation Edits tab for errors as well as each worksheet (including red highlights which indicate an invalid value)

All cost reports MUST have original macros enabled in order to be accepted (i.e. "Add Row" and "Delete Extra Rows" must still be visible in the Add-Ins section of Excel)

If the provider chooses to print spreadsheets to PDF files prior to submission:

- o Do not reduce files below 50% reduction
- o Use appropriate page orientation (portrait vs. landscape) for each file
- o Include row and column headings on each page

All PHI must be submitted in a secure, HIPAA compliant manner.

 The Myers and Stauffer Cost Report Web Portal contains a built in, secure uploading system

In order to submit via the web portal, each facility must have active logins with valid IP addresses. In order to ensure that all appropriate parties have access to the web portal for submission purposes, please plan on testing your login a minimum of two weeks before the submission deadline. Any issues resulting in changes to IP addresses may result in a 2-3 business day processing turnaround.

Should there be any changes to users who need to access the web portal for your facility, you may download the Web Portal Registration Form available on Myers and Stauffer's website under Case-Mix Resources \rightarrow Downloads: https://myersandstauffer.com/client-portal/louisiana/louisiana-case-mix/

All registration forms should be sent to Myers and Stauffer at <u>LACostReports@mslc.com</u>. Please allow for 2-3 business days for processing.

A pre-recorded web portal training is available on Myers and Stauffer's website under Case-Mix Resources → Provider Training: https://myersandstauffer.com/client-portal/louisiana/louisiana-case-mix/.

Any submission or web portal related questions should be directed to (800) 375-6858 or LACostReports@mslc.com.

Below are other issues which require your attention:

Input requirements:

All amounts on the template should be rounded to the nearest dollar. Red highlights throughout the spreadsheet indicate invalid entries (i.e. cents). Only per diem amounts reported on Schedules D & J should include cents. All per diems should be rounded to the nearest penny. **Do not copy and paste amounts with cents into the template.**

Rate Warning:

LDH will include costs in your Medicaid case-mix rate and direct care/care-related floor calculations based on both your Medicare cost report and your Louisiana Medicaid NF cost report. To ensure all of the appropriate costs are included in your rate and your floor calculations, it is important that you review the Case Mix Cross-Walk tab of the Medicaid Excel cost report template to see which cost centers are included from your Medicare cost report and then properly complete your Medicare cost report and your Louisiana Medicaid NF cost report.

While the Medicare regulations may allow more than one option for classifying costs, Medicaid will only recognize costs in a rate and floor component based on the case mix cross-walk shown on the Case Mix Cross-Walk Tab of the Medicaid Excel cost report template. If a facility chooses to classify cost on their Medicare cost report in a manner that excludes that cost from their direct care or care-related rate component and floor, then the cost will forever be excluded from the direct care and care-related rate and floor, unless adjusted at audit or desk review. If there are any questions related to the cross-walk, please contact LDH or Myers and Stauffer for clarification.

Signatures – Original signatures are required on the Louisiana Medicaid NF cost report, the Medicare cost report (2540-24) and the home office cost report (287-22) to be scanned and electronically submitted via the Myers and Stauffer Web Portal.

Louisiana Medicaid NF Cost Report – All items reported on the Louisiana Medicaid NF cost report must tie to that amount on the Medicare cost report when indicated. Pay attention to all instructions on the Louisiana Medicaid NF cost report which indicate when

a specific amount or description should be obtained from the Medicare cost report. Any submitted cost reports which are inaccurate and do not tie to the Medicare cost report where applicable will be sent back to the provider and will be required to be revised before the cost report packet is considered complete.

In addition, all lines and columns in all sections of the Medicaid NF cost report should be completed even if the appropriate response is "none" or "not applicable" or "\$0".

All error messages noted in the excel template must be resolved by the provider before submitting the cost report.

Electronic Files – The electronic files required **MUST** be in the correct electronic cost report format: Medicaid NF cost reports in Excel (file extensions .xls or .xlsm <u>only</u>) and Medicare cost report in ECR format (SN.22A). These cost reports and any electronic supporting documentation are to be submitted via the Myers and Stauffer Web Portal. Files submitted in the incorrect format or an outdated version will be rejected.

Salary Maximums – Please refer to the table below for the maximum allowable salary for the Administrator (Civil Service title: Long Term Care Hospital Administrator - AS624) and the Assistant Administrator (Civil Service title: Long Term Care Hospital Associate Administrator - AS622Documentation to support the administrator and assistant administrator salaries must be submitted. Such documentation would include payroll journals and W-2's. Note: W-2s are on the cash basis and should be reconciled to the accrual basis salary reported on the cost report. Non-calendar year providers are not required to submit a reconciliation of the calendar year salaries per the W-

2 to the fiscal year salaries reported on the cost report. However, other support must be submitted. The administrator salary maximum also applies to all home office personnel. These limits are based on one full-time equivalent. Limits should be pro-rated for part-time personnel.

1/1/2024 to 12/31/2024	Maximum Administrator	\$147,555
	Maximum Assistant	\$128,877
	Administrator	
1/1/2025 to 12/312025	Maximum Administrator	\$155,043
	Maximum Assistant	\$135,408
	Administrator	

Crosswalk to Worksheets A, C, G, G-2, G-3 – The grouping schedule submitted with the cost report must be sorted and grouped by cost center totals that agree to columns

1, 2 and 4 on Worksheet A and to Worksheets C, G, G-2, and G-3 of the CMS Form 2540. Trial balances that do not sort the general ledger accounts by cost report line or without cost center and column totals will be rejected as insufficient support for the amounts reported on Worksheets A, C, G, G-2, and G-3. The crosswalk should clearly show which accounts are included in each cost center. Account numbers and account titles should be included for all accounts. For example:

Acct Number	Acct Title	Amount
444	Administrator Salary	\$1,000
445	Asst. Admin Salary	\$1,000
446	Clerical Salaries	\$2,000
Total A&G Salaries		\$4,000 – this total should agree to Worksheet A, col 1

Home Office Crosswalk to Schedules A, G and G-1 – The grouping schedule submitted with the cost report must include cost center totals that agree to column 1 on Schedule A and to Schedules G and G-1 of CMS Form 287. The grouped format above should be used for all crosswalks. Trial balances that do not have the general ledger accounts sorted and grouped by cost report line or without cost center totals will be rejected as insufficient support for the amounts reported on Schedules A, G and G-1. The crosswalk should clearly show which accounts are included in each cost center and be sorted in Schedule A line-item order.

Facility Medicare Worksheets A-6, A-8 and A-8-1 and Medicaid Schedule I-1 adjustments & Home office Medicare Schedules A-6, A-8, A-8-1 and Medicaid Schedule I-2 adjustments

Supporting documentation for all facility and home office Medicare and Medicaid cost report adjustments must include general ledger account numbers, explanations, amounts and/or computational schedules for each adjustment. A listing of the adjustments that restates the cost report adjustment amounts without explanation or computation, if necessary, is **NOT** acceptable documentation.

Schedule B of the Louisiana Medicaid NF Cost Report:

1. Census days for each payer type is required on Line 4.00

- a. <u>Census Days</u> Census days reported on Schedule B of the Medicaid NF cost report and Worksheet S-3 of the Medicare cost report must agree to the sum of the monthly detailed census reports maintained by the provider.
- b. <u>Allowable Leave Days</u> All hospital and home leave days paid by Medicaid MUST be reported on Line 4.00, column (m) on Schedule B of the Louisiana Medicaid NF Cost Report. The census records maintained by the provider must properly identify and accumulate all hospital and home leave days paid by Medicaid to support the days reported on the Louisiana Medicaid NF Cost Report.
- c. <u>Paid Bed Hold Days</u> All hospital and home leave days paid by non-Medicaid payers and excess home and hospital leave days for Medicaid residents for which a payment is received from the resident or responsible party must be reported on Line 4.00, column (n) of Schedule B of the Louisiana Medicaid NF Cost Report.

2. Census days for private room conversions is required on Line 8.00

a. Days related to Medicaid residents that are in a room that has been approved as a private room conversion bed must be reported on Line 8.00 of Schedule B of the CR. The census records maintained by the provider must properly identify and accumulate all days paid by Medicaid in the approved private beds to support the days reported on the Louisiana Medicaid NF Cost Report. The provider should develop a unique census code to identify such census days.

Schedule F-4 Reconciliation of Pass Through Costs to Supporting Documentation – The purpose of this schedule is to assist providers in gathering the required documentation needed to support property taxes and property insurance reported on Schedule F-1 of the Medicaid cost report. Detailed instructions are included in the Instructions tab of the excel template. The totals on Schedule F-4, or provider specific calculations submitted in lieu of Schedule F-4, should agree to the sum of Lines 1.00 and 1.01 for property taxes and the sum of Lines 2.00 and 2.01 for property insurance. Copies of all property tax notices and copies of all property insurance invoices/premium notices must be submitted with the cost report. Also, allocation schedules which reconcile property insurance invoice amounts to the property insurance expense amounts reported on the cost report must be submitted. Note: Copies of policies and cancelled checks are not required unless this documentation supports the allocation of premium amounts between property and other insurance.

Property Taxes – All property taxes should be reported on lines 1 and 2 on Worksheet A of the Medicare cost report. Property taxes reported on lines 1.00 and 1.01 on Schedule F-

1 of the Louisiana Medicaid NF cost report should agree to the property taxes reported on Worksheet A of the Medicare cost report. If facility property taxes paid by a related party lessor are added to allowable costs on Worksheet A-8-1, the provider should include these property taxes on lines 1.00 and 1.01 on Schedule F-1 of the Louisiana Medicaid NF cost report. Property taxes related to the home office should not be reported on Schedule F-1 of the facility's Louisiana Medicaid NF cost report. Copies of the **property tax notices** are the required supporting documentation for property taxes. This documentation requirement includes any property taxes paid by a related party lessor that are reported as allowable costs on Worksheet A. If a provider is exempt from property taxes, please affirmatively note that exemption in the supporting documentation submitted with the cost report. If the provider's cost report period is not the same as the property tax period, the provider must include all property tax notices that relate to the cost report period and a supporting schedule documenting the amount of each tax notice recorded in the cost report period. Property tax expense unrelated to resident care, such as property taxes on vacant land, property held for expansion, non-business property, prior locations, etc. should not be reported on Worksheet A of the Medicare cost report or Schedule F-1 of the Medicaid cost report.

Property Insurance – Only property insurance (including autos) should be reported on lines 1 and 2 on Worksheet A of the Medicare cost report. Other insurance such as general liability, malpractice or employee related health insurance should be reported appropriately in other cost centers. If the provider's general ledger does not segregate insurance for appropriate reporting on Worksheet A of the cost report, the provider must perform an analysis of the insurance amount(s) and make reclassification entries, as necessary, on Worksheet A-6 of the cost report. Property insurance reported on lines 2.00 and 2.01 on Schedule F-1 of the Louisiana Medicaid NF cost report should agree to property insurance reported on Lines 1 and 2 Worksheet A of the Medicare cost report. Property insurance related to the home office should not be reported on Schedule F-1 of the facility's Louisiana Medicaid NF cost report. Copies of invoices/premium notices for property insurance are the required supporting documentation for property insurance. A copy of the financing document should also be submitted, if applicable. The invoice (and any related supporting schedule) must segregate the property insurance from other types of insurance and must include the policy period. If a supporting schedule is included, it should reconcile to the invoices submitted and to the allowable property insurance reported on Worksheet A and Schedule F-1. Also, if the property insurance premium period is not the same as the provider's cost report period, the provider must include all invoices that relate to the cost report period and a supporting schedule documenting the amount of each invoice recorded in the cost report period. In addition, if the property insurance invoice relates to multiple facilities, an allocation schedule documenting the allocation of property insurance to each facility is required.

Schedule I-1, Line 16.00-

This line is for a Medicaid only reclassification to a facility's as-filed Medicare cost report for CareRise vendor expense. The provider will need to identify on line 16.00 of Schedule I-1 the general ledger account where the expense is recorded (col b), the amount (col. c), Medicare cost report line number (col. d), line description (col. e), and column (col. f) in which the CareRise vendor expense is reported. This will allow the CareRise vendor expense to be classified in the appropriate rate component.

Support for Medicare cost report Worksheet B-1 square footage statistical information- The provider is required to maintain appropriate documentation supporting the statistical information reported on Worksheet B-1 of the Medicare cost report. Specifically, to support square footage, the provider should maintain detailed documentation of the measurement of the facility. This measurement should reconcile to the square footage by cost center that is reported on Worksheet B-1 of the Medicare cost report. This measurement would ideally be obtained from the detailed blueprint or architect's drawing of the facility. If that is not available, the provider should engage a qualified professional to perform a measurement, or perform a measurement themselves.

Food costs – Food costs reported on line 4.00 on Schedule F-1 of the Louisiana Medicaid NF cost report should include food supplements and enterals reported on Line 8 of the Medicare cost report. Also, if the statistics related to meals provided to guests or other facilities/programs are properly reported in a nonreimbursable cost center on Worksheet B-

1 of the Medicare cost report, the food costs reported on Schedule F-1 should not be reduced by the revenue related to the meals reported in the nonreimbursable cost center on Worksheet B-1.

Contract Services – Contract services reported on lines 3.00 and 3.01 on Schedule F-1 of the Louisiana Medicaid NF cost report should **ONLY** include contract nursing staff (RNs, LPNs and aides providing direct care services where services were obtained from outside staffing companies). Consultant RN's, physicians, pharmacists, etc., should **NOT** be included.

Nurse Aide Training & Testing costs – The Medicare Worksheet A line and column number must be disclosed for any nurse aide training and testing costs reported on Schedule E-1 of the Louisiana Medicaid NF cost report. Also, salaries and benefits reported on Schedule E-1 of the Louisiana Medicaid NF cost report should be that of instructors only, not the nurse's aides in training.

Schedule J, Line 7 – This line must now be completed for all filings to verify that the Employee Benefit Statistical Basis selected on Line 6 is correct when compared to calculated statistics. In summary, the statistical basis can be determined based on the following guidance:

Gross Salaries: Select the "Gross Salaries" option if the worksheet B-1, column 3 employee benefit statistics (column 4 for 2552-10 providers) are calculated using the worksheet A, column 1 salary amounts only or using the worksheet A, column 1 salary amounts plus all worksheet A-6 salary reclassifications.

Net Salaries: Select the "Net Salaries" option if the worksheet B-1, column 3 (column 4 for 2552-10 providers) employee benefit statistics are calculated using the worksheet A, column 1 salary amounts plus all worksheet A-6 salary reclassifications and worksheet A-8 salary adjustments.

Other: Select the "Other" option when the worksheet B-1, column 3 employee benefits statistics were calculated using a method other than the two above.

• If the provider has home office/related party salary adjustments on worksheet A-8-1 and the provider has deemed these salary adjustments to not be appropriate to include in the worksheet B-1, column 3 (column 4 for 2552-10 providers) employee benefit statistics, then the "Other" option MUST be selected and line 7 must be completed.

Protected Health Information (PHI) and Personally Identifiable Information (PII)- Please be aware that Protected Heath Information (PHI) should not be submitted to Myers & Stauffer in an unsecured format. Any information that can be used to identify an individual is considered PHI. It would be prudent to review your internal company policy and procedures in regards to the secure transfer of documents containing PHI. This should also be considered with Personally Identifiable Information (PII) which includes things such as W-2 records for employees. For any documents containing PHI or PII, you should only submit the minimum required support. Any documents that Myers and Stauffer receives that contain PHI or PII and have not been secured will be reported to Myers and Stauffer's HIPAA Compliance Committee.

Please let Myers and Stauffer know if you have any questions by contacting them at (800) 374-6858.