

## SNF Open Door Forum- July 9, 2009

### SPECIAL PRESENTATION- 5 Star Quality Rating System

Review of developments and current issues related to 5-star.

- Helpline will now only be available on a quarterly basis to coincide with the updates to the quality measure data-July, October, January and April. Facilities can still email questions/concerns to [www.bettercare@cms.hhs.gov](mailto:www.bettercare@cms.hhs.gov) at any time.
- 12-14 days prior to posting the updated 5-star rating-facilities will be able to preview their ratings. (This occurs monthly)- was previously 5 days prior to posting.

Quality Measures-Only updated on a quarterly basis -looks at most recent 3 months or 9 months of data depending on number of MDS assessments submitted.

Health Inspection and Staffing- Updated monthly as new survey result are added to the CMS data base

### CHANGES

**January 2009** - Risk adjustments and methodology for the QMs were refined.

- Duplicate deficiencies were eliminated- if a facility received the same deficiency (i.e. from a complaint survey) either at the time of the standard survey and/or 2 weeks prior to or after the standard survey, then the duplicate deficiency will not be counted.

**February 2009**- Refinements related to staffing:

- Case Mix that was present in the SNF in the nearest quarter to the time that the staffing data was reported is now used, instead of monthly as previously used.
- Edits changed so that nursing homes with higher staffing or CCRC would not be penalized nor have their staffing data kicked out because staffing ratios appeared higher. This improved their quality star rating.

**April 2009**- Technical user guide and technical web site updated

- State-level cut point tables have been moved into a new document: Five-Star Quality Rating System: State-Level Cut Point Tables (see CMS webpage:

[http://www.cms.hhs.gov/CertificationandCompliance/13\\_FSQRS.asp](http://www.cms.hhs.gov/CertificationandCompliance/13_FSQRS.asp)

(page 9)

- Removal of Table A3 – information is contained in Tables 3 and 4 in the text (pages 9,10)
- Added link to downloadable file containing facility-level “expected” and “reported” staffing times that are used in the staffing star calculations (page 9)
- Brief description of each Five-Star domain for which State-level cut points are used (pages 1,2)
- Updated State-level cut point tables for:
  - o Health Inspection Scores (pages 3,4)
  - o ADL QM Late Loss ADL Worsening (pages 5,6)
  - o ADL QM Worsening Locomotion (pages 7,8)

CMS is reviewing the following issues for future changes/updates or inclusion in the 5-star quality program: Also inviting public comments:

#### Health Inspection Rating:

- Looking at fixed numerical values versus current percentiles to determine ratings.
- Facilities are only compared to other facilities in same state
- Can the SNF be improved based on fixed rather than relative values?
- Fixed values may put the SNF at a disadvantage due to the increase in the average number of deficiencies.
- With improvements in the survey process-the percentile (relative values) would help the SNF more.

#### Staffing Rating:

- Looking at a Quarterly reporting system that is electronically based on payroll info; will look at other variables including turnover rates and retention rates.
- Need to look at definition of labor categories i.e. therapist and other employees in the SNF
- Need to look at collection of verification methods and continue to look at case mix adjustments

#### Quality Measure Ratings:

- Looking at hospital based facilities and Medicare only facilities to possibly separate them out and compared against each other rather than compared to all other SNFs.
- Develop more post-acute quality measures so that more aspects of care are measured, especially for the short-stay facilities. May look at rehabilitative measures and discharge status (to home, return to acute care hospital, etc.) Will also need more risk adjustments.
- Looking at also adding the most recent 9 months of data to Nursing Home Compare

Resident and Family feedback and satisfaction:

- Looking at ways to include this on Nursing Home Compare (NHC):
- Three levels of involvement identified:
  - Report on NHC whether or not the facility uses a consumer/family feedback system.
  - Develop some criteria that are considered characteristic of an effectively working resident and family feedback system and go through a process of endorsing those, then identify SNFs that have resident/family feedback systems that meet those criteria.
  - National single resident/family feedback system that is administered by a 3<sup>rd</sup> party.