

Changes to Nursing Home Compare & Five-Star

AHCA Member Webinar

March 4, 2016



Changes to Five-Star

- October 2014
 - President Obama directive to CMS to expand reported Five-Star measures
- February 2015
 - CMS adds 2 antipsychotic measures and partially rebases the scoring cut points
- March 2016
 - CMS announces 5 new measures starting in July 2016, with preview on Nursing Home Compare in April



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Overview of New Changes

- This week CMS announced
 - 6 **new** measures will be added to **Nursing Home Compare** in April 2016
 - 5 of them will be added to **Five-Star** in July 2016
 - How they will be added or impact your star ratings...CMS has not yet announced



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Six New Measures**

- Short-Stay:
 1. Discharge to Community*
 2. Emergency Room Use*
 3. Rehospitalization*
 4. Improvement in Function Since Admission*
- Long-Stay:
 5. Decline in Mobility*
 6. Use of Hypnotics/Anxiolytics

* To be added to Five-Star in July 2016

** Summary of measure specifications available on AHCA website; CMS to post full details in near future



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Points on New Measures

- 3 measures are based on Medicare claims and include events that occur **after** discharge from the SNF
 - Rehospitalization rate
 - Emergency Room Use
 - Discharge to Community



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Percentage of short-stay residents who were **re-hospitalized** after a nursing home admission

- Applies only to FFS Medicare Beneficiaries
- Counts rehospitalizations for any reason to any hospital within 30 days of admission to a SNF from a hospital
 - Counts readmissions both during & **after** SNF stay, if they are within 30 days of admission to SNF
 - Uses Medicare claims Part A and Part B to determine rehospitalizations or observation admissions.
 - Excludes
 - planned readmissions
 - admissions to SNF not directly from hospital (e.g. from IRF)
 - Enrolled in hospice
- Risk-adjusted
 - (actual rate/expected rate) x national average
- Rolling 12 month window, updated semi-annually
 - Data posted in April is from July 1st 2014 to June 30th 2015



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Percentage of short-stay residents who have had an outpatient **emergency department visit**

- Applies only to FFS Medicare Beneficiaries
- Counts any ER visit during 30 days after admission to a SNF from a hospital that does not result in admission
 - Uses Medicare Part B claims to determine ER visits
 - Multiple ER visits during the time window count once
- Risk-adjusted
 - (actual rate/expected rate) x national average
- Rolling 12 month window, updated semi-annually
 - Data posted in April is from July 1st 2014 to June 30th 2015



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Percentage of short-stay residents who were successfully **discharged to the community**

- Applies only to FFS Medicare Beneficiaries
- Counts discharges to community within 100 days following admission to the SNF from a hospital who remain in community alive for the next 30 days
 - Discharge to community is based on MDS discharge assessment
 - Uses Medicare claims to determine whether the discharge was successful at staying out of hospital or SNF or did not die 30 days after SNF discharge
 - Excludes individuals who resided in SNF prior to being hospitalized
- Risk-adjusted
 - (actual rate/expected rate) x national average
- Rolling 12 month window, updated semi-annually
 - Data posted in April is from July 1st 2014 to June 30th 2015



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Preview Data Available in April

- CMS will make data available to SNFs to preview before posting on Nursing Home Compare
- Preview your rates on 6 measures on QIES
 - Your MDS coordinator probably has access to QIES
 - Instructions for accessing your preview data in the QIES system is on AHCA website
 - Data may be available around 3rd week in April (one week before CMS posting on NHC)



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Potential Impact on Five-Star Ratings

- CMS has *not* announced how they plan to incorporate the 5 measures into Five-Star
- SNFs performance on the new measures will likely change a SNF's ratings for QM component
- Recall, how the QM component impacts your overall star rating
 - Add 1 star when QM component = 5 stars
 - Lose 1 star when QM component = 1 star
 - No change when QM component = 2, 3, or 4 stars



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AHCA Requests About July Changes

- AHCA is concerned how CMS may incorporate the 5 new measures into Five-Star in July 2016
- AHCA requests to CMS are:
 - Phase in any changes
 - Do not go back to setting ratings on a curve
 - No rebasing
 - If any rebasing occurs, CMS needs to provide:
 - Public notice that the new ratings can **not** be compared to old ratings and do not reflect changes in quality
 - Notification to organizations (e.g. ACOs, CJR hospitals, MA plans, HUD, etc.) that changes in star ratings do not reflect changes in quality



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Future Changes to Five-Star

- CMS plans to add additional quality measures to Five-Star in 2017 or 2018
 - Staffing turnover and retention
 - Staffing levels based on data from mandatory staffing data collection from payroll – PBJ
 - Other measures from IMPACT Act



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What You Can Do?

- Begin now to review the measures and start to focus your efforts to improve before the measures are added to Five-Star
- Collect data on your current rates for rehospitalization, ER use and DC to community using a *free* tracking spread sheet by Advancing Excellence at <https://www.nhqualitycampaign.org>



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What Else Can You Do?

- Access the following resources:
 - Links to CMS site and presentation at www.AHCANCAL.ORG/FiveStar
 - Measure specifications, instructions to access QIES, and links to webinars at <https://educate.ahcancal.org/LearnED>
 - Additional resources will continue to be added to ahcancalED



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Updating LTC Trend Tracker

- Adding new measures as soon as CMS posts them on Nursing Home Compare (*estimate* by end of April)
- Updating the Five-Star prediction tools for July 2016, which will show:
 - How many points you got for each new measure
 - Which measures & by how much you need to improve to increase your star ratings



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Open for Questions



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