

CMS is announcing the following updates related to Nursing Home Compare and Payroll-Based Journal data (released June 22, 2018 via SNF Open Door Forum announcement):

Long-Stay Hospitalization Quality Measure:

CMS continues to focus on reducing hospitalizations to improve the health and safety of nursing home residents. Hospitalizations are expensive, disruptive, and place residents at risk for an increased decline in health. Over the last several years, CMS has launched initiatives aimed at reducing hospitalizations, such as the [Skilled Nursing Facility Value Based Purchasing program](https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/Value-Based-Programs/Other-VBPs/SNF-VBP.html) (<https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/Value-Based-Programs/Other-VBPs/SNF-VBP.html>) and the [Initiative to Reduce Avoidable Hospitalizations among Nursing Facility Residents](https://www.cms.gov/Medicare-Medicaid-Coordination/Medicare-and-Medicaid-Coordination/Medicare-Medicaid-Coordination-Office/InitiativeToReduceAvoidableHospitalizations/AvoidableHospitalizationsamongNursingFacilityResidents.html) (<https://www.cms.gov/Medicare-Medicaid-Coordination/Medicare-and-Medicaid-Coordination/Medicare-Medicaid-Coordination-Office/InitiativeToReduceAvoidableHospitalizations/AvoidableHospitalizationsamongNursingFacilityResidents.html>). In 2015, CMS added a [quality measure to the Nursing Home Compare website](https://www.medicare.gov/NursingHomeCompare/About/nhcinformation.html) (<https://www.medicare.gov/NursingHomeCompare/About/nhcinformation.html>) and Five Star Quality Rating System which reported the percentage of short-stay residents who were re-hospitalized. Posting this quality measure was aimed at informing stakeholders about the rates of re-hospitalizations for each nursing home, and incentivizing nursing homes to implement interventions to reduce these instances and improve quality. Similarly, CMS will begin posting rates of hospitalizations of long-stay residents for the same objectives. In July 2018, CMS will provide rates of hospitalizations for long-stay residents in each facility's confidential "Nursing Home Compare Five-Star Ratings of Nursing Homes Provider Rating Report." In October 2018, the long-stay hospitalization measure will be posted on the Nursing Home Compare website as a long-stay quality measure. In the spring of 2019, this quality measure will be included in the Five Star Quality Rating System. Additionally, in July 2018 we will update the other claims-based quality measures reported on the Nursing Home Compare website.

Payroll-Based Journal Data

In 2017, CMS began posting the number of hours worked by nursing staff submitted through the Payroll-Based Journal (PBJ) system on data.cms.gov (<https://data.cms.gov>) (see [S&C memorandum 17-45-NH](https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/SurveyCertificationGenInfo/Downloads/Survey-and-Cert-Letter-17-45-NH) <https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/SurveyCertificationGenInfo/Downloads/Survey-and-Cert-Letter-17-45-NH>). To increase transparency, we will begin posting the number of hours worked by other staff (i.e., non-nursing) in July 2018. Facilities are required to submit hours for all other staff as listed in Table 1 of the [PBJ Policy Manual](https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/NursingHomeQualityInits/Downloads/PBJ-Policy-Manual-Final-V24.pdf) (<https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/NursingHomeQualityInits/Downloads/PBJ-Policy-Manual-Final-V24.pdf>). We will also distinguish between hours submitted for direct employees and contract staff. We encourage stakeholders to use this information to learn how different categories of staff can improve quality and outcomes for residents. The information will be posted on data.cms.gov (<https://data.cms.gov>) and will include the total number of hours submitted for each staff category. As a reminder, CMS recently announced the use of PBJ data to calculate staffing measures and facilities' star ratings (see [QSO memorandum 18-17-NH](https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/SurveyCertificationGenInfo/Downloads/QSO18-17-NH) <https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/SurveyCertificationGenInfo/Downloads/QSO18-17-NH>).

Health Inspection Rating Freeze

In February 2018, CMS implemented a temporary "freeze" of the health inspection domain of the Nursing Home Five Star Quality Rating System by holding each facility's health inspection rating constant for approximately one year. During the freeze, inspections conducted after November 28, 2017, are not included in facility's star ratings calculation. This action is part of CMS's implementation of a new inspection process and Phase Two of the revised Requirements for Participation for Long Term Care Facilities (see [S&C memorandum 18-04-NH](https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/SurveyCertificationGenInfo/Downloads/Survey-and-Cert-Letter-18-04.pdf) <https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/SurveyCertificationGenInfo/Downloads/Survey-and-Cert-Letter-18-04.pdf>). In October 2019,

we will resume posting the average number of citations per inspection for each state and nationally. CMS is monitoring outcomes of the new inspection process and plans to resume health inspection rating calculations (i.e., end the freeze) in the spring of 2019. CMS will communicate more details about this prior to its implementation.

For questions related to this information, please email bettercare@cms.hhs.gov.