



**Department
of Health**

New York State 2019 Nursing Home Quality Initiative (NHQI)

**New York State Department of Health
February 27, 2019**

History of the NHQI

History of the Nursing Home Quality Initiative (NHQI)

- Established in the 2010-11 NYS Executive Budget
 - The Department of Health (DOH) convened a sub-workgroup of industry experts to assist us in developing the Nursing Home Quality Initiative.
- First year, 2012, Pay for Reporting Year
 - Timely submission of Cost Report and Employee Flu data.
- In 2013, \$50 million, self-funded pool
 - Early in 2013, we released benchmark results. Results were only shared with facilities and were not made public.
- Aligns with federal initiatives, such as Quality Assurance & Performance Improvement (QAPI) program

History of the NHQI - continued

- Points earned based on performance compared to peers, ranking of performance into quintiles (approx. 600 Nursing Homes)
- Implementation of the Nursing Home Quality Pool was on-hold due to litigation
 - The litigation was settled and award/contributions for 2013-2017 years were calculated and summed to obtain one NET award/contribution.
- Contribution/payment occurred in cycle #2152 and #2153, in December 2018

2019 NHQI

2019 NHQI Structure

Based on 100 points

Quality Component: 70 points

- Percent of Long Stay High Risk Residents With Pressure Ulcers*
- Percent of Long Stay Residents Who Received the Pneumococcal Vaccine
- Percent of Long Stay Residents Who Received the Seasonal Influenza Vaccine
- Percent of Long Stay Residents Experiencing One or More Falls with Major Injury
- Percent of Long Stay Residents Who have Depressive Symptoms
- Percent of Low Risk Long Stay Residents Who Lose Control of Their Bowels or Bladder
- Percent of Long Stay Residents Who Lose Too Much Weight*
- Percent of Long Stay Antipsychotic Use in Persons with Dementia (PQA)
- Percent of Long Stay Residents Who Self-Report Moderate to Severe Pain*
- Percent of Long Stay Residents Whose Need for Help with Daily Activities Has Increased
- Percent of Long Stay Residents with a Urinary Tract Infection
- Percent of Employees Vaccinated for Influenza
- Rate of Staff Hours per Day
- Percent of Contract/Agency Staff Used

Compliance Component: 20 points

- NYS Regionally Adjusted Five-Star Quality Rating for Health Inspections
- Timely Submission of Nursing Home Certified Cost Reports
- Timely Submission of Employee Influenza Immunization Data

Efficiency Component: 10 points

- Number of Potentially Avoidable Hospitalizations per 10,000 Long Stay Days*

* denotes risk adjustment by NYSDOH



Exclusions

- Certain facility or specialty units within facilities are excluded from the NHQI
 - Non-Medicaid
 - CMS Special Focus Facilities
 - Continuing Care Retirement Centers
 - Transitional Care Units
 - Specialty-only Facilities
 - Facilities with small sample size (less than 30 in the denominator) on a majority of the quality measures
 - Any Assessments indicating the resident is in a specialty unit (Section S-S0160)
 - Discrete AIDS, Ventilator dependent, Traumatic Brain Injury, Behavioral Intervention, Pediatric or Neurodegenerative

Quality Component

- 70 Points
- 14 Measures

Percent of Long Stay High Risk Residents With Pressure Ulcers*

Percent of Long Stay Residents Who Received the Pneumococcal Vaccine

Percent of Long Stay Residents Who Received the Seasonal Influenza Vaccine

Percent of Long Stay Residents Experiencing One or More Falls with Major Injury

Percent of Long Stay Residents Who have Depressive Symptoms

Percent of Low Risk Long Stay Residents Who Lose Control of Their Bowels or Bladder

Percent of Long Stay Residents Who Lose Too Much Weight*

Percent of Long Stay Antipsychotic Use in Persons with Dementia (PQA)

Percent of Long Stay Residents Who Self-Report Moderate to Severe Pain*

Percent of Long Stay Residents Whose Need for Help with Daily Activities Has Increased

Percent of Long Stay Residents with a Urinary Tract Infection

Percent of Employees Vaccinated for Influenza

Rate of Staff Hours per Day

Percent of Contract/Agency Staff Used

- All measures are calculated by NYSDOH using MDS, cost report, or employee influenza data

CMS measure PQA measure

NYS measure



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* denotes risk adjustment by NYSDOH

Scoring Details - Quality Component

The data is divided into five approximately equal groups

- Quintile 1: 5 points
- Quintile 2: 3 points
- Quintile 3: 1 point
- Quintiles 4 and 5: 0 points

Two measures were awarded 5 or 0 points based on threshold values:

1. Percent of Contract/Agency Staff Used (5 points for a rate of less than 10%)
2. Percent of Employees Vaccinated for Influenza (5 points for a rate of 85% or higher)

Twelve measures were eligible for improvement points based on the previous year's quintile

1. Percent of Long Stay High Risk Residents With Pressure Ulcers
2. Percent of Long Stay Residents Experiencing One or More Falls with Major Injury
3. Percent of Long Stay Residents Who have Depressive Symptoms
4. Percent of Low Risk Long Stay Residents Who Lose Control of Their Bowels or Bladder
5. Percent of Long Stay Residents Who Lose Too Much Weight
6. Percent of Long Stay Residents Who Self-Report Moderate to Severe Pain
7. Percent of Long Stay Residents Whose Need for Help with Daily Activities Has Increased
8. Percent of Long Stay Residents with a Urinary Tract Infection
9. Percent of Long Stay Residents who Received the Seasonal Influenza Vaccine
10. Percent of Long Stay Residents who Received the Pneumococcal Vaccine
11. Percent of Long Stay Antipsychotic Use in Persons with Dementia
12. Rate of Staff Hours per Day

2018 Performance						
2019 Performance	Quintile	1	2	3	4	5
	1 (best)	5	5	5	5	5
	2	3	3	4	4	4
	3	1	1	1	2	2
	4	0	0	0	0	1
	5	0	0	0	0	0

If 2018 NHQI performance was in the third quintile, and 2019 NHQI performance was in the second quintile, the facility received 4 points. This is 3 points for attaining the second quintile and **1 point for improvement** from the previous year's third quintile.



Scoring Details-Compliance and Efficiency Components

Compliance Component

- **NYS Regionally Adjusted Five-Star Quality Rating for Health Inspections**
 - Used CMS health inspection survey scores as of May 2019 to calculate cut points for each region in the state
 - Regions include the Metropolitan Area, Western New York, Capital District, and Central New York
 - Within each region, the top 10% of nursing homes received five stars, the middle 70% received four, three, or two stars, and the bottom 20% received one star
 - Each nursing home was awarded a Five-Star Quality Rating based on the cut points calculated from the health inspection survey scores **within its region**
 - 10 points for 5 stars, 7 points for 4 stars, 4 points for 3 stars, 2 points for 2 stars, 0 points for 1 star
- **Timely Submission of Nursing Home Certified Cost Reports** – 5 points
- **Timely Submission of Employee Influenza Immunization Data** – 5 points

Efficiency Component

- **Potentially Avoidable Hospitalizations**
 - Quintile 1: 10 points
 - Quintile 2: 8 points
 - Quintile 3: 6 points
 - Quintile 4: 2 points
 - Quintile 5: 0 points

CMS measure

NYS measure



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Efficiency Component

- The Potentially Avoidable Hospitalization (PAH) measure was derived by NYSDOH, based on a CMS Nursing Home Value Based Purchasing Demonstration measure.
- Using the primary discharge diagnosis from the Department's all-payer inpatient file, SPARCS, a hospitalization is considered a PAH if it was for:
 - Congestive Heart Failure
 - Respiratory Infection
 - Electrolyte Imbalance
 - Sepsis
 - Anemia
 - Urinary Tract Infection

Efficiency Component - continued

- The PAH measure is risk-adjusted
- Twenty-three covariates are used in multinomial logistic regression model, some examples:
 - Age
 - Activities of daily living: bathing
 - Activities of daily living: locomotion
 - Cancer
 - Diabetes
 - Depression Cognitive skills for daily decision making
 - Falls with minor or major injury
 - Feeding tube
 - Gender

Scoring Details

- Points from quality, compliance and efficiency are summed to a total score
- Total score and base points (maximum attainable points) are used to calculate overall score
- Facilities are ranked from quintile 1 to quintile 5 based on the overall score
- Base adjustment:
 - In the event that a measure cannot be used due to small sample size or unavailable data, the maximum attainable points will be reduced for that facility.
 - For example, if a facility has a small sample size on two of its quality measures (each 5 points), the maximum attainable points will be 90 rather than 100. The sum of its points will be divided by 90 to calculate its overall score.



Example Nursing Home Facility Quality Pool scoring sheet

Measure name	Value	Quintile	Points
1. Quality Component			
Percent of contract/agency staff used	5.0	NA	5.0
Percent of employees vaccinated for influenza*	92.0	NA	5.0
Percent of long stay high risk residents with pressure ulcers	7.0	3	1.0
Percent of long stay low risk residents who lose control of their bowel or bladder	76.0	5	0.0
Percent of long stay residents experiencing one or more falls with major injury	4.7	5	0.0
Percent of long stay residents who have depressive symptoms	0.2	1	5.0
Percent of long stay residents who lose too much weight	7.0	4 [^]	1.0
Percent of long stay residents who received the pneumococcal vaccine*	85.0	3	1.0
Percent of long stay residents who received the seasonal influenza vaccine*	89.0	2	3.0
Percent of long stay residents who self-report moderate to severe pain	13.6	5	0.0
Percent of long stay residents whose need for help with daily activities has increased	17.0	4	0.0
Percent of long stay residents with a urinary tract infection	3.1	3 [^]	2.0
Percent of long stay residents with dementia who received an antipsychotic medication	8.0	2 [^]	4.0
Rate of staff hours per day	2.7	3	1.0
2. Compliance Component			
NYS regionally adjusted five-star quality rating for health inspections	3	NA	4.0
Timely submission of employee influenza immunization data	Yes	NA	5.0
Timely submission of nursing home certified cost reports	Yes	NA	5.0
3. Efficiency Component			
Number of potentially avoidable hospitalizations per 10,000 long stay days	7.9	4	2.0
4. Scoring			
Overall score			44.0
Quintile rank		FOURTH	
5. Determination of Ineligibility			
J/K/L deficiency between July 1, 2016 and June 30, 2017	No		

* denotes higher value is better, ^ denotes improvement from 2016 NHQI quintile
 DNS: Facility did not submit by deadline/data not properly certified/inaccurate data, NA: Not applicable, SS: Small sample size (measure was suppressed)

Funding and Distribution of \$50 million

Funding of the Nursing Home Quality Pool

- The New York State Nursing Home Quality Pool is a \$50 million budget-neutral pool where non-specialty nursing homes contribute to the funding of the \$50 million.
- Nursing homes contribute their share of the \$50 million based on a percentage of their Medicaid revenue:
 - Nursing home specific revenue divided by total statewide nursing home revenue multiplied by the \$50 million Nursing Home Quality Pool.

Note – specific nursing home revenue is calculated utilizing the nursing home rate x total Medicaid days.



Distribution of the Nursing Home Quality Pool

- Distribution plan
 - Quintile ranking of final overall scores
 - Using the number of Medicaid days which aligns with the MDS data year and facility's Medicaid rate per day from the subsequent year
 - For example, the 2019 NHQI uses 2018 MDS, 2018 Medicaid days, and 1/1/2019 Medicaid rate
 - Award factor for top three quintiles
 - 1st quintile : Award factor 3
 - 2nd quintile : Award factor 2.25
 - 3rd quintile : Award factor 1.5
 - Bottom two quintiles (4th & 5th) receive zero dollars



Feedback of 2018 Results

Feedback Results

- Delay due to incomplete SPARCS data for the 4th quarter of 2017
- Opportunity to review compliance on timely submission of cost report or employee influenza data

Resources

- NHQI Methodology and results:
 - https://www.health.ny.gov/health_care/medicaid/redesign/nursing_home_quality_initiative.htm
- Health data NY - Nursing Home Quality Initiative: Beginning 2012
 - <https://health.data.ny.gov/Health/Nursing-Home-Quality-Initiative-Beginning-2012/aruj-fgbm>
- NYS Nursing Home Profiles
 - https://profiles.health.ny.gov/nursing_home



Questions/Comments

Methodology

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Rate Adjustments

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