Purpose:

• $50 Million Initiative established as part of the 2010-2011 State Budget as means to reward high-quality care compared to peers
• DOH working with industry to design quality scoring system using existing data sources
• Recognizes and rewards improvements over time
• Redistributes funds from poor performers to high quality performers (“Robin Hood” Principle)
Facility Scoring (Updated for 2015 NHQI):

Three major components:

- 14 Quality Measures (70 points)
- Three Compliance Measures (20 points)
- One Efficiency Measure - Potentially Avoidable Hospitalizations (10 points)
Key Changes for 2015 NHQI:

• Long stay resident antipsychotic medication measure now uses the Pharmacy Quality Alliance Measure.
  • http://pqaalliance.org/measures/default.asp
• Long stay resident pneumococcal vaccination measure now assigns points based on a quintile system.
Quality Measures:

1. Contract/Agency Staff: Threshold +/- 10%
2. CMS 5 Star Rating for Staffing: Points awarded based on # of Stars Earned
3. Employees Flu Vaccine: Threshold +/- 85%
4. Percent of High Risk Residents with Pressure Ulcers: Results sorted into quintiles (Risk Adjusted)
5. Percent of Residents who receive Pneumococcal Vaccine: Results sorted into quintiles
6. Percent of Residents who receive Flu Vaccine: Results sorted into quintiles
Quality Measures (continued):

7. Percent of Long Stay Residents who fall with major injury: Results sorted into quintiles

8. Percent of Long Stay Residents with Depressive Symptoms: Results sorted into quintiles

9. Percent of Long Stay, Low Risk Residents with loss of bowel/bladder control: Results sorted into quintiles

10. Percent of Long Stay Residents who lose too much weight: Results sorted into quintiles (Risk Adjusted)
Quality Measures (continued):

11. Percent of Long Stay Residents who receive Antipsychotic Medication: Results sorted into quintiles (Pharmacy Quality Alliance statistic used)

12. Percent of Long Stay Residents who report moderate to severe pain: Results sorted into quintiles (Risk Adjusted)

13. Percent of Long Stay Residents whose need for assistance with daily activities increased: Results sorted into quintiles

14. Percent of Long Stay Residents with Urinary Tract Infections: Results sorted into quintiles
Quality Measures (continued):

Quality Measures eligible for additional points based on year over year improvement:

- All quality measures eligible, except for:
  - Measure #1 (Contract/Agency Staff)
  - Measure #2 (CMS 5 Star Rating for Staffing)
  - Measure #3 (Employee Flu Vaccine)
  - Measure #5 (Long Stay Resident Pneumococcal vaccine)
Compliance Measures:

1. CMS Five Star Quality Rating for Health Inspections: Points awarded based on # of Stars Earned
2. Timely Submission of Employee Flu Immunization Data: Points awarded if 11/15 and 5/1 deadlines are met
3. Timely Submission of RHCF-4 Cost Report: Points awarded if deadline is met
Efficiency Measures:

1. Potentially Avoidable Hospitalizations
   a) Indicator developed based on Nursing Home Value Based Purchasing demonstration
   b) Long Term Stays (101 + days) threshold for inclusion in measurement population.
   c) SPARCs data used to match hospital discharges and nursing home readmissions. Primary diagnosis code is the driver for the measurement.
   d) Results sorted into quintiles.
### Overall Scores: Statewide (2015 NHQI)

<table>
<thead>
<tr>
<th>Quintile</th>
<th>2015 NHQI Quintile Min Score</th>
<th>2015 NHQI Quintile Max Score</th>
<th>Number of Facilities</th>
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</thead>
<tbody>
<tr>
<td>1</td>
<td>61</td>
<td>89</td>
<td>110</td>
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<td>52.6</td>
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Statewide results include all counties within New York State.
Overall Scores: Long Island (2015 NHQI)

<table>
<thead>
<tr>
<th>Quintile</th>
<th>2015 NHQI Quintile Min Score</th>
<th>2015 NHQI Quintile Max Score</th>
<th>Number of Facilities</th>
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<tr>
<td>5</td>
<td>21</td>
<td>38</td>
<td>10</td>
</tr>
</tbody>
</table>

Long Island Region includes Nassau and Suffolk Counties
## Overall Scores: NYC (2015 NHQI)

<table>
<thead>
<tr>
<th>Quintile</th>
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<th>2015 NHQI Quintile Max Score</th>
<th>Number of Facilities</th>
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<tr>
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<td>38</td>
<td>29</td>
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</tbody>
</table>

NYC Region includes New York, Bronx, Kings, Queens, and Richmond Counties
### Overall Scores: New Rochelle (2015 NHQI)

<table>
<thead>
<tr>
<th>Quintile</th>
<th>2015 NHQI Quintile Min Score</th>
<th>2015 NHQI Quintile Max Score</th>
<th>Number of Facilities</th>
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<tr>
<td>5</td>
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<td>38</td>
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</tbody>
</table>

New Rochelle Region includes Westchester, Rockland, Orange, Putnam, Sullivan, Ulster, and Dutchess Counties
Financial Impact:

- 2013 and 2014 NHQI Impacts have not yet been paid/recouped.
- Issues preventing payment or recoupment of NHQI Impacts:
  - Approval of a State Plan Amendment by CMS allowing payment
  - Resolution of litigation challenging the constitutionality of the NHQI. This litigation was excluded from the Universal Settlement process.
- Stakeholders, including Managed Care Plans and Consumers, are utilizing the NHQI Ratings as part of their provider evaluation methodology.
Evaluating Your Results:

1. Did you take advantage of the “Easy Points”?
   a) 5 Points for filing your RHCF on time
   b) 5 Points for filing your employee flu immunization data on time

2. Did you improve your performance from the 2014 NHQI Results?
   a) NHQI methodology rewards improvement in quintile measures by awarding additional points.
   b) These points are in addition to points awarded for achieving high quality performance.
Evaluating Your Results (continued):

3. Are you monitoring your CMS Five-Star Ratings?
   a) CMS Five-Star measures included as part of the NHQI methodology include:
      a) CMS Five Star Rating for Staffing
      b) CMS Five Star Rating for Health Inspections
   b) For these measures, more points are awarded for higher star ratings.
   c) For 2015 NHQI, CMS Five Star Ratings were as of 4/1/15.

4. Do you ask for the Primary Diagnosis Code from the Hospital upon Hospital Discharge and Nursing Home Admission?
Evaluating Your Results (continued):

5. Is your Nursing Staff trained on the key Quality indicators and their clinical triggers?

6. Is your Medical Director trained on the key Quality indicators and their clinical triggers?

7. Does your facility have a program to encourage employees to receive the flu vaccine?

8. Does your facility have procedures to collect and analyze key quality and financial indicators? Review the results with staff?
Questions? Concerns?

- HMM and HMM Consulting offer a full array of consulting services to assist facilities, including:
  - Adapting to the Managed Care Environment
  - Creating a plan for the future.
  - Choosing and Implementing EMR Solutions
  - Data Collection and Data Analysis programs.
- Contact our office at (631)-265-6289 with any questions.
Additional Information

- New York State Department of Health
  - https://www.health.ny.gov/health_care/medicaid/redesign/nursing_home_quality_initiative.htm
- Centers for Medicare and Medicaid Services
- Pharmacy Alliance Quality Measure
  - http://pqaalliance.org/measures/default.asp
- HMM, CPAs LLP
  - http://horanmm.com/nhqi