



**Department
of Health**

New York State Nursing Home Quality Initiative – 2020 Results, 2021/2022 Proposals

**New York State Department of Health
December 15, 2021**

Status Updates

Nursing Home Quality Pool (NHQP) – 2019 Payment Update

- The 2019 NHQP payment - Facilities receiving an award received it in Medicaid cycle check # 2262 with release date of January 13, 2021.
- The 2019 NHQP was calculated using the following:
 - 2019 NHQI quintile scoring (MDS year 2018)
 - January 1, 2019 Medicaid Rate
 - 2019 Cost Report Days
- Facilities who scored in quintiles 1, 2 and 3 received payout
- Facilities who scored in quintiles 4 and 5 had their amount due offset by the 1% Nursing Home Restoration payment

Nursing Home Quality Pool (NHQP) – 2020 Payment Update

- The 2020 NHQP payment - Facilities receiving an award will receive it in Medicaid cycle check # 2311 with release date of December 22, 2021.
- The 2020 NHQP was calculated using the following:
 - 2020 NHQI quintile scoring (MDS year 2019)
 - January 1, 2020 Medicaid Rate
 - 2020 Cost Report Days
- Facilities who scored in quintiles 1, 2 and 3 will receive payout
- Facilities who scored in quintiles 4 and 5 will have their amount due offset by the 2% Nursing Home Restoration payment

2020 NHQI

2020 Nursing Home Quality Initiative (NHQI)

- 2020 NHQI State Planning Amendment was approved by CMS on May 12, 2020.
- The NHQI score was reduced from 100 points to 90 points.
 - Two measures were removed due to the COVID-19 public health emergency.
 - Percent of employees vaccinated for influenza
 - Timely submission of employee influenza immunization data
- Final results were released to the facilities on August 31, 2021.
- Quintile rankings, continued top performer list, and downloadable data on Health Data NY were released in September 2021

2020 NHQI Structure (90 points)

Quality Component: ~~70 points~~ 65 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 Long Stay Low Risk Residents Who Lose Control of Their Bowel or Bladder
- Percent of Long Stay Residents Who Lose Too Much Weight*
- Percent of Long Stay Residents with Dementia Who Received an Antipsychotic Medication (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 (removed)~~
- Rate of Staffing Hours per Resident Per Day
- Percent of Contract/Agency Staff Used

Compliance Component: ~~20 points~~ 15 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 (removed)~~

Efficiency Component: 10 points

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

*denotes risk adjustment by NYSDOH

2020 NHQI Measure Statistics



Measures Higher Rate is Better	Statewide Average		P100 (max)		P80		P60		P40		P20		P0 (min)	
	2019	2020	2019	2020	2019	2020	2019	2020	2019	2020	2019	2020	2019	2020
	Overall score	50	54	89.3	92.2	59	64.4	53	56.7	47	50	40	43.3	14.7
Percent of long stay residents who received the pneumococcal vaccine	77	76	100	100	89	88	83	82	76	74	67	64	20	5.0
Percent of long stay residents who received the seasonal influenza vaccine	82	83	100	100	91	91	87	87	82	82	76	76	19	49
Rate of staffing hours per resident per day	3.6	3.6	8.2	7	4.4	4.3	4.0	3.9	3.6	3.6	3.3	3.3	2.3	2.4

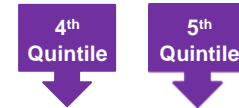
Measures Lower Rate is Better	Statewide Average		P0 (min)		P20		P40		P60		P80		P100 (max)	
	2019	2020	2019	2020	2019	2020	2019	2020	2019	2020	2019	2020	2019	2020
	Percent of long stay low risk residents who lose control of their bowel or bladder	53.8	54.1	3.0	2	40	40	51	51	60	60	69	70	100
Percent of long stay residents who have depressive symptoms	6.5	7.4	0	0	0.3	0.6	1.2	1.8	2.8	4.1	7.8	9.6	88.5	89.2
Percent of long stay residents with dementia who received an antipsychotic medication	7.8	7.9	0	0	3.0	3.0	6.0	6.0	9.0	9.0	13	13.0	29	29
Percent of long stay residents whose need for help with daily activities has increased	12.6	12.8	2.0	1	8.0	9.0	11	11	14	14	17	17	33	32
Percent of long stay high risk residents with pressure ulcers	6.4	8.2	0.5	0	3.8	5.5	5.4	7.1	6.9	9.0	9.0	11.1	19.9	19.9
Percent of long stay residents who lose too much weight	6.1	5.7	0.8	0	4.1	3.7	5.5	5.0	6.6	6.3	8.2	7.7	20.2	18
Number of potentially avoidable hospitalizations per 10,000 long stay days	4.5	4.7	0	0	2.6	2.7	3.8	4.2	4.9	5.2	6.8	7.1	17.8	20.4

NHQI 2020: Methodological Changes

The scoring methodology was changed from **quintiles to threshold** for three measures which were topping out:

- Percent of Long Stay Residents Experiencing One or More Falls with Major Injury
- Percent of Long Stay Residents with a Urinary Tract Infection
- Percent of Long Stay Residents Who Self-Report Moderate to Severe Pain

Measures Lower Rate is Better	Statewide Average		P0 (min)		P20		P40		P60		P80		P100 (max)	
	2018	2019	2018	2019	2018	2019	2018	2019	2018	2019	2018	2019	2018	2019
Percent of long stay residents experiencing one or more falls with major injury	2.6	2.4	0	0	1.3	1.1	2.1	2.0	2.9	2.9	4.1	4.2	11	12.3
Percent of long stay residents with a urinary tract infection	2.5	2.0	0	0	1.1	0.8	1.9	1.5	2.9	2.3	4.4	3.5	14	18.3
Percent of long stay residents who self-report moderate to severe pain	3.9	3.4	0	0	0.5	0.5	1.8	1.4	3.9	3.3	7.3	6.1	26.4	22.4



Threshold Scoring:

- Rate = < 5% will receive 5 points
- Rate > 5% will receive 0 points

The Effect of Scoring Methodology Change

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

NHQI 2020

Quintile (Quintile-based scoring)	Points (Threshold- based scoring)	Frequency	Percentage
1	5	119	20.62
2	5	115	19.93
3	5	118	20.45
4	5	114	19.76
5	5	42	7.28
5	0	69	11.96
		Total: 577	

- Based on the Quintile system (Quintiles 4 & 5), 225 facilities (114+42+69) would have lost points.
- Based on the threshold system, 156 (114+42) of those 225 facilities will now receive 5 points.

The Effect of Scoring Methodology Change

- Percent of Long Stay Residents with a Urinary Tract Infection

NHQI 2020

Quintile (Quintile-based scoring)	Points (Threshold- based scoring)	Frequency	Percentage
1	5	128	22.18
2	5	113	19.58
3	5	109	18.89
4	5	118	20.45
5	5	74	12.82
5	0	35	6.07
		Total: 577	

- Based on the Quintile system (Quintiles 4 & 5), 227 facilities (118+74+35) would have lost points.
- Based on the threshold system, 192 (118+74) of those 227 facilities will now receive 5 points.

The Effect of Scoring Methodology Change

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

NHQI 2020

Quintile (Quintile-based scoring)	Points (Threshold- based scoring)	Frequency	Percentage
ss	Base adjusted	41	7.11
1	5	110	19.06
2	5	106	18.37
3	5	108	18.72
4	5	84	14.56
4	0	21	3.64
5	0	107	18.54
		Total: 577	

- Based on the Quintile system (Quintiles 4 & 5), 212 facilities (84+21+107) would have lost points.
- Based on the threshold system, 84 of those 212 facilities will now receive 5 points.

Quality Component – Improvement Results

- Facilities will receive one point for improvement if the 2020 NHQI quintile for a measure is an improvement from the 2019 NHQI quintile
- 9 measures are eligible for improvement points based on the previous year's quintile (compared to 11 measures in NHQI 2019)
- 91% of facilities received at least one improvement point in 2020 NHQI (compared to 95% in 2019 NHQI)

Number of Improved Quality Measures	Percent Facilities		
	2018 NHQI	2019 NHQI	2020 NHQI
1	13	17	24
2	24	23	28
3	22	22	18
4	16	17	14
5 or more	20	16	7
Total	95	95	91

Compliance Component and Deficiencies

Compliance

- Timely Submission of Nursing Home Certified Cost Reports – 5 points
 - 100% (N=577) of facilities were timely
- ~~Timely Submission of Employee Influenza Immunization Data~~ – This measure is removed from NHQI 2020

Deficiencies

- Measurement period of July 1, 2019 - June 30, 2020
- 1.2% (N=7) of facilities received a J, K, or L deficiency, compared to 1.0% (N=6) in 2019 NHQI

Number of facilities with a J, K, or L deficiency in 2020 NHQI compared to 2019, by Quintile

NHQI Year	Quintile 1	Quintile 2	Quintile 3	Quintile 4	Quintile 5	Total Facilities with a Deficiency	Total Facilities
2019	0	1	1	2	2	6	578
2020	1	2	0	1	3	7	577

2021 NHQI

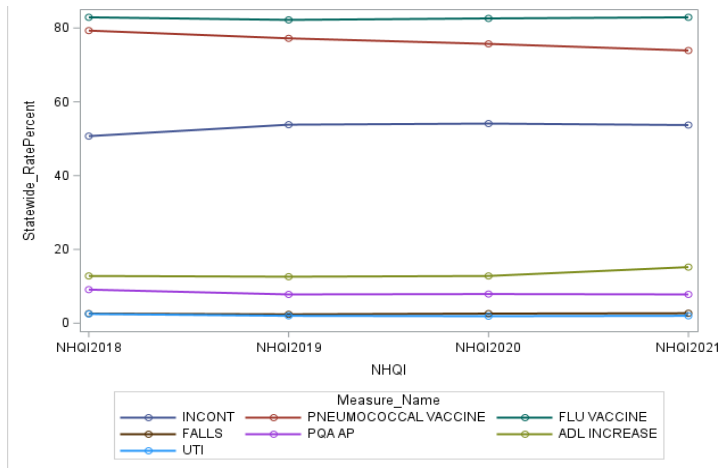
NHQI 2021

- 2021 NHQI State Planning Amendment is in development
- The NHQI 2021 score is reduced to 80 points
- Four measures are removed
 - Three measures are removed to offset the impact of COVID-19
 - Percent of Long Stay High Risk Residents With Pressure Ulcers (5 points)
 - Percent of Long Stay Residents Who have Depressive Symptoms (5 points)
 - Percent of Long Stay Residents Who Lose Too Much Weight (5 points)
 - One measure was retired by CMS (Oct 2019)
 - Percent of Long Stay Residents Who Self-Report Moderate to Severe Pain (5 points)

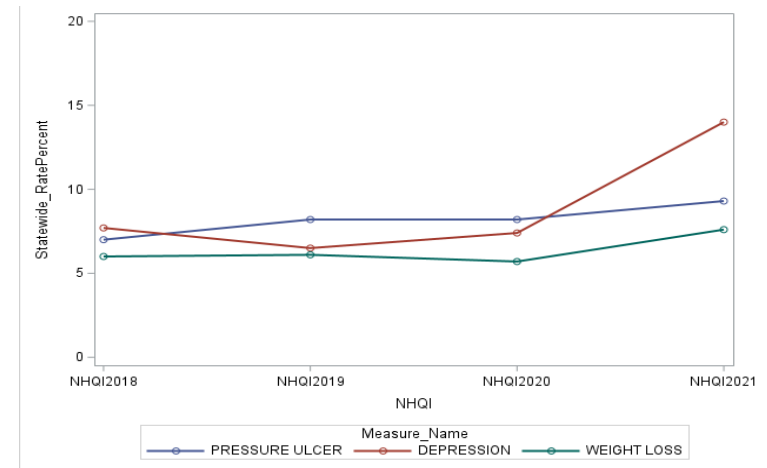
NHQI Quality Measures Over Time (NHQI 2018 – NHQI 2021)

Most of the measures showed a stable trend. The pressure ulcer, weight loss and depression measures showed an upward trend in NHQI 2021.

Measures with stable rates over time



Measures impacted by COVID-19



NHQI 2021 - Staffing Measures

- Two staffing measures
 - Rate of Staffing Hours per Resident Per Day
 - Percent of Contract/Agency Staff Used
- Staffing measures are based on the CMS's Payroll-Based Journal (PBJ) data
- Due to the public health emergency, the submission of Q12020 PBJ data was not mandatory
- NHQI 2021 staffing measures will be based on Q22020, Q32020 & Q42020

NHQI 2021 - PAH Measure

POTENTIALLY AVOIDABLE HOSPITALIZATION (PAH) MEASURE:

- This measure is based on the Department's Statewide Planning and Research Cooperative System (SPARCS) data.
- SPARCS 2020 data is incomplete as the compliance enforcement was paused in 2020 due to COVID-19.
- Hospitals have until December 31, 2021 to submit complete SPARCS records.
- This measure will be reevaluated in January 2022.

2021 NHQI Structure (base score 80 points)

Quality Component: 50 points

- ~~Percent of Long Stay High Risk Residents With Pressure Ulcers* (removed)~~
- 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 (removed)~~
- Percent of Low Risk Long Stay Residents Who Lose Control of Their Bowel or Bladder
- ~~Percent of Long Stay Residents Who Lose Too Much Weight* (removed)~~
- Percent of Long Stay Residents with Dementia Who Received an Antipsychotic Medication (PQA)
- ~~Percent of Long Stay Residents Who Self-Report Moderate to Severe Pain* (removed)~~
- 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 Staffing Hours per Resident 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*

2022 NHQI

Proposed 2022 NHQI Structure (MDS 2021)

Quality Component: 65 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 Bowel or Bladder
- Percent of Long Stay Residents Who Lose Too Much Weight*
- Percent of Long Stay Residents with Dementia Who Received an Antipsychotic Medication (PQA)
- ~~Percent of Long Stay Residents Who Self-Report Moderate to Severe Pain*~~ (measure retired by CMS)
- 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 Staffing Hours per Resident per Day
- Percent of Contract/Agency Staff Used

Compliance Component: 20 points

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Efficiency Component: 10 points

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

*denotes risk adjustment by NYSDOH

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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