DEPARTMENT OF HEALTH & HUMAN SERVICES Centers for Medicare & Medicaid Services 7500 Security Boulevard, Mail Stop C2-21-16 Baltimore, Maryland 21244-1850



# Center for Clinical Standards and Quality/Quality, Safety & Oversight Group

**Ref: QSO 19-02-NH** 

**DATE:** November 30, 2018

**TO:** State Survey Agency Directors

**FROM:** Director

Quality, Safety & Oversight Group

**SUBJECT:** Payroll Based Journal (PBJ) Policy Manual Updates, Notification to States and

New Minimum Data Set (MDS) Census Reports

### **Memorandum Summary**

- Notification to States The Centers for Medicare & Medicaid Services (CMS) will provide CMS Regional Offices (ROs) and State Survey Agencies with a list of facilities with potential staffing issues to support survey activities for evaluating sufficient staffing and improving resident health and safety.
- Updates in the PBJ Policy Manual and Frequently Asked Questions (FAQs) We are expanding the guidance on the meal breaks policy to ensure consistency. In addition, we are adding guidance regarding reporting hours for "Universal Care Workers."
- Additional Technical Support for Facilities New MDS-based census reports in the Certification and Survey Provider Enhanced Reporting (CASPER) system.

### **Background**

Staffing in long-term care nursing facilities significantly affects the care delivered to residents. Since July 2016, nursing homes have been submitting data electronically through the PBJ system as required under section 1128I(g) of the Social Security Act (the Act) and 42 CFR §483.70(q). The data submitted by facilities are the number of hours direct care staff are paid to work each day. All data submitted is auditable back to payroll and other verifiable sources.

In April 2018, CMS began using PBJ data to calculate staffing levels and star ratings on the *Nursing Home Compare* website and in the *Five Star Quality Rating System*. For more information on this change, please see memorandum QSO-18-17-NH (<a href="https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/SurveyCertificationGenInfo/Downloads/QSO18-17-NH.pdf">https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/SurveyCertificationGenInfo/Downloads/QSO18-17-NH.pdf</a>). At this time, over 97 percent of facilities have been able to report staff hours through the PBJ system. We sincerely appreciate their efforts to support public reporting and improve quality.

# **Notification to States and CMS Regional Offices**

While CMS is encouraged by facilities' efforts to improve staffing, we are also concerned about some of the findings from the new PBJ data. For example, some facilities are reporting several days in a quarter without a registered nurse (RN) onsite and/or significantly low nurse staffing levels on weekends (see QSO-18-17-NH). Since nurse staffing is directly related to the quality of care that residents' experience, CMS is very concerned about the risk to resident health and safety that these situations may present. Therefore, CMS will begin informing state survey agencies of facilities with potential staffing issues: facilities with significantly low nurse staffing levels on weekends; and facilities with several days in a quarter without an RN onsite.

# Facilities identified as having low staffing on weekends:

The State Operations Manual, Chapter 7, section 7207.2.2, requires states to conduct at least 10 percent of the standard health surveys on the weekend or before 8:00 a.m. or after 6:00 p.m. (i.e., "off-hours"). States shall [now be required to] conduct at least fifty percent of the required off-hours surveys on weekends using the list of facilities provided by CMS.

## Facilities identified as having reported days with no RN onsite:

We are aiding surveyors' investigations by identifying facilities who have higher risk of noncompliance with the RN staffing requirement. When conducting a scheduled standard or complaint survey (regardless of the type of complaint), surveyors should investigate compliance with 42 CFR 483. 35(b)(1), which is the requirement for a facility to provide the services of an RN seven days a week, eight hours a day. If a surveyor confirms that this requirement has not been met, the facility shall be cited for noncompliance under deficiency F-tag 727.

### **PBJ Policy Manual and FAQ Updates**

CMS is making the following updates to the PBJ Policy Manual and FAQ document. These documents can be found in the downloads section of the PBJ website at <a href="https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/NursingHomeQualityInits/Staffing-Data-Submission-PBJ.html">https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/NursingHomeQualityInits/Staffing-Data-Submission-PBJ.html</a>

## Meal Break Policy:

We are expanding the guidance in the PBJ Policy Manual related to deducting time for meal breaks. Note: This is not a change in policy, but that we are only providing additional details. The guidance includes information for deducting meal times for specific shifts (e.g., eight-hour shifts, twelve-hour shifts, etc.). We have also added a Q&A to the PBJ Policy FAQs that explains the rationale for the meal break policy.

#### Universal Care Workers

Some facilities employ "Universal Care Workers," who are typically certified nurse aides (CNAs) who perform additional duties outside of the nurse aide role, such as food preparation or light housekeeping services. CMS has added language to both the PBJ Policy Manual and the PBJ Policy FAQ to instruct facilities that they must use a reasonable methodology to allocate the hours that these employees are providing CNA services and report these hours accordingly. Hours spent on other duties (i.e. housekeeping, cooking etc.) must not be reported as CNA hours.

These hours can be reported under housekeeping or other services; however, reporting of these hours is not required.

## **MDS Census Reports**

CMS has created two reports for providers to help ensure data is submitted accurately and in a timely manner. These reports use the same methodology CMS uses to calculate each facility's census, which is then used to calculate the number of staff hours per resident per day posted on the *Nursing Home Compare* website. The reports are:

<u>The MDS Census Summary Report:</u> Allows users to retrieve the daily MDS-based resident census (i.e., count of residents) for each day in a quarter.

<u>MDS Census Detail Report:</u> Allows users to retrieve a list of the residents that the MDS-based census is comprised of on a given date or dates.

More information on these reports can be found at the following links:

- For State Survey Agencies: <a href="https://web.qiesnet.org/qiestosuccess/training.html">https://web.qiesnet.org/qiestosuccess/training.html</a>
  - o Look for the section called CASPER Reporting User's Guide.
  - o From the dropdown list highlight Section 49 Payroll Based Journal (PBJ) Reports and click on Select.
  - o Find the specific report you would like to run and go to the page number cited.
  - o Follow the steps to pull the report.
- For facilities: <a href="https://qtso.cms.gov/reference-and-manuals/casper-reporting-users-guide-pbj-providers">https://qtso.cms.gov/reference-and-manuals/casper-reporting-users-guide-pbj-providers</a>
  - Select Section 12 Payroll Based Journal (PBJ) Reports from the right side in the blue box.
  - o Find the specific report you would like to run and go to the page number cited.
  - o Follow the steps to pull the report.

**Point of Contact:** For questions related to this information, please contact <a href="https://NHStaffing@cms.hhs.gov">NHStaffing@cms.hhs.gov</a>.

**Effective Date:** Immediately. This policy should be communicated with all survey and certification staff, their managers and the State/Regional Office training coordinators within 30 days of this memorandum.

/s/ Karen Tritz Acting Director

cc: Survey and Certification Regional Office Management