

Long-Term Care Survey Alert

Quality Reporting Trends: Prepare for Changes to Nursing Home Compare

More detailed staffing info may help provide the 'rest of the story' for some facilities.

The Nursing Home Compare website is slated for some changes mandated by the Affordable Care Act healthcare reform legislation.

During an Aug. 30 stakeholders meeting attended by representatives from major trade groups and consumer advocacy groups, CMS reviewed the changes in the works, says attendee **Christie Teigland, PhD,** director of Health Informatics and Research for the New York Association of Homes and Services for the Aging.

Specifics: "CMS discussed three elements of what must be reported on NHC," says **Lyn Bentley, MSW,** director of regulatory affairs for the American Health Care Association, who attended the meeting. These include staffing data, which is already there but will be much more detailed, enforcement actions, including civil monetary penalties, and complaints.

Complaints to Become More Detailed, Easy to Find

"If you drill down into the survey data that is on NHC now, you can see complaints," says Bentley. "But you have to really ferret out which are complaint surveys and which are standard surveys. With the changes CMS is making, this is going to be much more specific."

The healthcare reform law says NHC must report substantiated complaints, says Bentley, noting, however, that discussion occurred at the stakeholders meeting about including unsubstantiated complaints.

The American Association of Homes & Services for the Aging wants to see complaints broken out to differentiate between self-reported issues and external complaints, reports **Evvie Munley**, senior health policy for the trade group. Currently, all self-reports are categorized as complaints, which is misleading, in her view. A facility could have a strong quality assurance program that identifies, self-reports, and corrects quality issues, Munley points out.

Based on the healthcare reform law, the changes are supposed to go into effect in March 2011, says Bentley. "CMS did not address the agency's technical capabilities for accomplishing the changes in that timeframe." But she notes that "the volume and depth of the information is massive," leading her to predict CMS may try to phase in the changes.

CMS must also put a link for each facility that takes you to the state website where consumers can see a copy of the facility's CMS 2567 forms and plans of correction, Bentley adds. "The healthcare reform law requires three years of information to be available." This requirement will pose challenges for some states already facing staffing and technical capability constraints, she predicts. "Some states already host the survey information for each facility on their websites, but many do not."

CMS Focusing on Staffing Data Collection to Broaden Reporting

CMS will be focusing on collection of staffing data through facilities' electronic payroll data, which won't include all facilities but rather a large portion of those using big electronic payroll systems, like Paychex, says Teigland.

How it works now: "The staffing data is currently reported on the CMS form 671 during the survey," says Teigland. Surveyors and CMS don't validate or audit the data. And "it's really only gathered once a year ... and only provides about a two-week snapshot, which may not be a good representation of staffing levels." The staffing data also doesn't include



types of staff who may "be critical to quality of care, such as rehabilitation therapists."

By tapping payroll data, however, CMS can collect other types of staffing information. At the stakeholder meeting, says Teigland, "we had a long discussion about what that [information] should be and how it should be reported, etc." CMS is also discussing reporting temporary contract/agency staffing separately. "Most of the people at the meeting thought it should be reported as the percentage of [employed nursing] staff."

CMS will also be required to report staffing turnover rates and how long staff members have been at the facility.

Agency representatives and stakeholders debated whether that information should be reported at the position level or the facility level, says Teigland. CMS proposed reporting the information at the corporate level, which some stakeholders opposed because individual facilities could differ within a system.

The staffing information that CMS is going to collect and what the agency may do with the information is still "very much in the formative stages," says Teigland.

Looming challenge: Overall, "it sounds like there is so much information" to be posted on NHC that "it will have to be presented very, very well in order to be useful to consumers," concludes Bentley.