

MDS Alert

CMS Updates: Know These QM Adjustments, and Survey and Agency Updates

CMS aims to ensure safety and quality of nursing homes and increase transparency about how residents fare in facilities.

Pain has always been a tough experience to quantify, and the opioid crisis has heightened public and regulatory scrutiny of opioid prescriptions and usage. The Centers for Medicare & Medicaid (CMS) has recently changed its Quality Measures to eliminate evaluating residents' reported pain as a reflection of a facility's quality.

Watch Opioid Prescription Rate

"Due to the severity of the Opioid Crisis, we want to avoid any potential scenario where a facility's performance on the pain quality measures may inappropriately contribute to their decision to seek the administration of an opioid," says **David Wright**, director of Quality, Safety & Oversight Group at **CMS** in Baltimore, in an October memorandum.

Wright says the following two measures will be removed from both the Nursing Home Compare website and the Five Star Quality Rating System, as of October 2019:

- Percentage of short-stay residents who report moderate to severe pain
- Percentage of long-stay residents who report moderate to severe pain

Note Increased Survey Oversight

Seema Verma, CMS administrator, announced that CMS has enacted new strategies to strengthen oversight of nursing facilities.

"Nursing home patient and resident safety is a top priority for the Trump Administration. Abuse and neglect are never acceptable," Verma says in a press release. "After careful study of state inspector performance, CMS is taking action to increase oversight of inspectors and ensure States are conducting thorough and appropriate inspections."

Verma suggests that the new regulations are aimed at making sure surveyors are evaluating facilities equally and applying any disciplinary penalties consistently, and that increasing its oversight of the State Performance Standards System (SPSS) and State Survey Agencies (SSA) will translate to residents receiving better care in nursing facilities.

The following are aspects of SPSS oversight that CMS plans to focus on for fiscal year 2020, according to Wright:

- 1) "Frequency: Conducting survey activities in accordance with required timelines;
- 2) "Quality: Ensuring survey agencies are properly identifying and documenting noncompliance; and
- 3) "Coordination of Provider Noncompliance: Ensuring survey agencies are taking action quickly to ensure remedies are imposed for provider noncompliance."

"By holding inspectors accountable for conducting timely and consistent inspections, we're holding nursing homes accountable for providing safe, high-quality care - helping ensure safe nursing home environments," Verma says.

This latest push is a facet of the "Strengthen Oversight pillar" of a five-part approach to ensure safety and quality of facilities. The other "pillars" include Enhance Enforcement, Increase Transparency, Improve Quality, and Put Patients Over Paperwork.

Highlights from the new measures to "strengthen oversight" include:

- Reviewing new metrics with more frequency to increase monitoring of SSAs and ensure that they're conducting surveys in a "timely manner."
- Introducing "State Performance Indicators" that will be reviewed quarterly, in an effort to help CMS catch and address problems before they worsen. (Previously, CMS had performed such evaluations only once, at the end of the fiscal year.) The new indicators use metrics that focus on citation rates and the timelines of investigations into complaints, which CMS hopes will quickly mitigate any issues.
- Holding SSAs accountable for navigating immediate jeopardy situations, in which residents' health or safety is compromised through formally measuring the timeliness and accuracy of SSA communications about immediate jeopardy with facilities.
- Increasing flexibility for CMS to add state-specific measures so any CMS resources can be utilized for targeted troubleshooting. "For example, a State experiencing specific problems with the complaint investigation process could employ a measure related to the complaint investigation process. This flexibility will help States focus on any specific challenges they face in their work to keep patients and residents safe," CMS says.
- Centralizing CMS data and providing more access for SSAs, in an effort to remove redundant or duplicative data, freeing up surveyor time and bandwidth to carry out inspections and check nursing facilities for compliance.

"We also plan to significantly enhance our oversight of how SAs handle complaints and facility-reported incidents (FRIs). This includes how each state prioritizes reports of abuse or neglect, the timeliness of the investigation of reports, and the quality of these investigations," Wright says, noting that such issues have been addressed by the Office of Inspector General and the Government Accountability Office.

CMS will be revising SA policies for complaint investigations and FRIs, which can be found in Chapter 5 of the State Operations Manual and will update SPSS guidance once they've made those revisions, Wright says.

Read the release here: www.cms.gov/newsroom/press-releases/trump-administration-strengthens-oversight-nursing-home-inspections-keep-patients-and-residents-safe.

Look for New Alert Icon

CMS will now display a special icon on the Nursing Home Compare website to alert any interested parties to any facility that has been cited for abuse. The icon, which is a red circle with a hand making the "stop" signal, is live on Nursing Home Compare as of late October. The icon signifies two things: "1) that abuse that led to harm of a resident within the past year; and 2) abuse that could have potentially led to harm of a resident in each of the last two years," CMS says.

Although Nursing Home Compare is updated quarterly, CMS is committed to updating this particular measure monthly, when CMS inspection results are updated. "This means consumers will not be forced to wait for CMS' quarterly updates to see the latest-related information - and nursing homes will not be flagged for longer than necessary if their most recent inspections indicate they have remedied the issues that caused the citations for abuse or potential for abuse and no longer meet the criteria for the icon," CMS says in a release.

The icon is being used in addition to other information available on Nursing Home Compare; it is supplementing, rather than supplanting, the ratings and other quality information on the website. CMS is careful to note that ratings alone may not paint the entire picture of the facility.

"There are many factors that indicate a nursing home's quality, and the Star Ratings may not capture some nuances. For example, a nursing home cited for an incident of abuse may have adequate staffing numbers and provide excellent dementia or rehabilitative care. Previously, consumers would clearly see this facility's performance in these areas through the Star Ratings, but abuse complaint allegation information may not have been as clear," CMS says.

This move by CMS falls under the Trump Administration's "transparency pillar" of its five-part plan to ensure safety and quality in nursing homes. "... the Trump Administration is putting critical information at consumers' fingertips,

empowering them and incentivizing nursing homes to compete on cost and quality,” Verma says in a release.

To read more about this move, read the release, here: www.cms.gov/newsroom/press-releases/trump-administration-empowers-nursing-home-patients-residents-families-and-caregivers-enhancing.