

Skilled Nursing Facility Quality Reporting Program (SNF QRP)

Help Desk
Questions and Answers (Q+As)
and Quarterly Updates

December 2018

The Skilled Nursing Facility (SNF) Quality Reporting Program (QRP) was implemented on October 1, 2016. This document is intended to provide guidance on questions that were received by the SNF QRP Help Desk from July 2018 – September 2018 (Section 1). This document also contains quarterly updates and events from July 2018 – September 2018 (Section 2) as well as upcoming updates for the next quarter, from October 2018 – December 2018 (Section 3). Guidance contained in this document may be time-limited and may be superseded by guidance published by CMS at a later date.

Section 1: Help Desk Frequently Asked Questions and Answers

Question	Answer
	General SNF QRP
What dates will be used to calculate a facility's	The FY 2020 program year is based on the submission of all of the data
Annual Payment Update (APU) for FY 2020.	from January 1, 2018 through December 31, 2018. This means that starting
	on October 1, 2019 (FY 2020) your APU will be updated based on the
	compliance determination from the data submitted for admissions to the
	SNF on and after January 1, 2018 and discharges from the SNF up to and
	including December 31, 2018. The calculation for APU is based on the
	completion of items on a record regardless of whether the stay has been
	completed. You may wish to refer to the Technical Specifications for
	Reporting Assessment-Based Measures for FY 2020 at:
	https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-
	Instruments/NursingHomeQualityInits/Downloads/SNF-QRP-Table-for-
	Reporting-Assessment-Based-Measures-for-the-FY-2020-SNF-QRP-
	APU.pdf. For further information including an FAQ, "How are APU
	thresholds calculated?", please refer to the SNF QRP Quick Reference
	Guide at https://www.cms.gov/Medicare/Quality-Initiatives-Patient-
	Assessment-Instruments/NursingHomeQualityInits/Downloads/PAC-SNF-
	Quick-Reference-Guide-FY2020-v1-0.pdf.

Question	Answer

Compliance Notifications

Were all Skilled Nursing Facilities notified if they were found to be compliant/non-compliant with the SNF QRP for FY 2019?

CMS provided notifications only to facilities that were determined to be out of compliance with Skilled Nursing Facility (SNF) Quality Reporting Program (QRP) requirements for CY 2017, which affected their FY 2019 Annual Payment Update (APU). Non-compliance notifications were mailed by the Medicare Administrative Contractors (MACs) and were placed into facilities' CASPER folders in QIES on July 9, 2018. SNFs may file for reconsideration within thirty (30) days from the date at the top of the non-compliance notification letter distributed electronically using QIES if they believe the finding of non-compliance is in error, or they have evidence of the impact of extraordinary circumstances which prevented timely submission of data.

For more information, please refer to the CMS SNF QRP Reconsideration and Exception & Extension webpage linked here:

https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/NursingHomeQualityInits/Skilled-Nursing-Facility-Quality-Reporting-Program/SNF-QR-Reconsideration-and-Exception-and-Extension.html.

For information, regarding compliance for FY 2020 please refer to the <u>SNF</u> <u>QRP Requirements for the Fiscal Year FY2020 Program Year</u> available on the SNF Quality Reporting Program Data Submission Deadlines webpage and the <u>SNF QRP Table for Reporting Assessment-Based Measures for the FY 2020 SNF QRP APU</u> available on the SNF QRP Measures and Technical Information webpage.

Question	Answer
	Reporting
Where on Nursing Home Compare is the new SNF QRP Quality Measure data for my facility located?	On the CMS Nursing Home Compare website, under each skilled nursing facility, is a tab labeled "Quality of Resident Care." You will find the relevant SNF QRP quality measure information under the "short-stay residents" drop-down menu, then under the section "Additional quality measures". This includes the facility's performance as well as national averages.
Upon running our facility's report, we encountered error message -3907 but are unsure how to make the appropriate correction. Could you provide additional clarification?	Section 1888(e)(6)(B)(i)(II) of the Improving Medicare Post-Acute Care Transformation Act of 2014 (IMPACT Act of 2014) amended the Social Security Act requiring that SNFs submit data, including data on quality measures. SNFs that fail to submit such data are subject to a 2 percentage-point reduction to their Annual Payment Update. In turn, CMS established a data completion threshold for such data reporting. SNFs must report 100 percent of the data elements necessary to calculate the SNF QRP measures, as well as standardized patient assessment data elements, on at least 80 percent of the Minimum Data Set (MDS) assessments they submit for the program year involved. SNFs that do not meet this requirement are subject to a two percent reduction in their Annual Payment Update.
	To assist SNFs, CMS announced new Skilled Nursing Facility (SNF) Annual Payment Update (APU) warning edits are being incorporated into the MDS technical submission specifications. These warning edits appear as both pop-up messages in jRAVEN, the free CMS software that allows SNFs to submit MDS data to CMS in the proper format, and also on the MDS 3.0 Final Validation Report (FVR). The edits will appear when required standardized patient assessment data elements and data elements required for quality measure calculation for the purposes of the SNF QRP are dashed. These warning edit have displayed on FVR as error identification numbers:-3897, -3907 or -3908. Error code -3907 has been confusing to providers and was retired on November 12, 2018. Warning edits do not prevent MDS 3.0 assessment from being accepted by the Assessment Submission and Processing (ASAP) system.

Question	Answer	
Reporting (continued)		
Upon running our facility's report, we encountered error message -3907 but are unsure how to make the appropriate correction. Could you provide additional clarification? (continued)	A staggered release of the items associated to the APU warning edits is planned, at the completion of this process all APU required data elements will trigger a warning edit. The first release of warning edits was implemented on September 9th, 2018. Future releases of warning edits will be announced on the SNF Quality Reporting Program Spotlights and Announcements webpage. For more details on warning edits please refer to MDS 3.0 Providers User's Guide, Section 5- Error Messages.	
Section GG Coding		
For Item GG0170O, can you clarify if going up and down 12 stairs must be continuous, or could a resident go up and down 4 stairs 3 times in a row?	In a scenario where the facility does not have access to 12 stairs to assess the resident's ability for item GG0170O, 12 Steps, a simulation of the activity may be used. The combination of climbing and descending 4 stairs 3 times consecutively, in this case, is an acceptable alternative to meet the requirements to complete this activity.	
If a resident is not able to ascend/descend 4 or 12 stairs, are GG0170N and GG0170O coded as 88, Not attempted due to medical condition or safety concerns since the task item was not completed?	Code GG0170N (The ability to go up and down 4 steps with or without a rail) and GG0170O (The ability to go up and down 12 steps with or without a rail) based on the amount of assistance the resident required. If the resident is unable to complete the activity and the helper did not complete the activity for the resident, code 88, Not attempted due to medical condition or safety concerns.	

Question	Answer	
Provider Training		
Where can provider find the training materials from the July 31 – August 1, 2018 SNF QRP Provider Training?	Post-training materials from the July 31-August 1, 2018 SNF QRP Provider Training are available in the downloads section of the SNF Quality Reporting Program Training webpage linked here: https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/NursingHomeQualityInits/Skilled-Nursing-Facility-Quality-Reporting-Program/SNF-Quality-Reporting-Program-Training.html	
	Video recordings of the presentations can be found here: https://www.youtube.com/playlist?list=PLaV7m2-zFKpiyCcrhLkmYp3xl6286NFMs	

Section 2: What you may have missed from Quarter 3, 2018

SNF QRP Provider Preview Reports

Hurricane Florence - Disaster Exceptions/Exemptions for Medicare Certified Providers Affected by Severe Storms and Flooding

The Centers for Medicare & Medicaid Services (CMS) is granting exceptions under certain Medicare quality reporting and value-based purchasing programs located in areas affected by Hurricane Florence. These healthcare providers and suppliers will be granted exceptions without having to submit a request if they are located in one of the counties listed in the memo posted on October 11, 2018, all of which have been designated by the Federal Emergency Management Agency (FEMA) as a major disaster county. Please check this site for the most up to date list of affected counties.

For SNF's outside the FEMA-designated counties affected by Hurricane Florence, please follow the directions related to requesting an exemption or extension, as listed on the SNF Quality Reporting Reconsideration and Exception & Extension

CMS SNF QRP Trainings:

- The Centers for Medicare & Medicaid Services (CMS) hosted 3 trainings on the following topics:
 - o July 31, 2018 August 1, 2018: SNF QRP Provider Training
 - o August 27, 2018: Section N Follow-up Webinar
 - o September 12, 2018: Section GG Follow-up Webinar
- Links to the post-training materials and recordings are available on the SNF QRP Training webpage: https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/NursingHomeQualityInits/Skilled-Nursing-Facility-Quality-Reporting-Program/SNF-Quality-Reporting-Program-Training.html

SNF QRP Resources Available to Providers

There are a number of important resources available to providers on the CMS SNF QRP website at: https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/NursingHomeQualityInits/Skilled-Nursing-Facility-Quality-Reporting-Program/SNF-Quality-Reporting-Program-IMPACT-Act-2014.html

- The SNF QRP home page provides an overview of the program.
- The <u>Spotlights and Announcements</u> page is frequently updated with information about upcoming SNF QRP activities, including program updates and deadlines, trainings, and the posting location of new resources.
 - O The Measures and Technical Information page features the Skilled Nursing Facility Quality Reporting Program Measure Calculations and Reporting User's Manual Version 2.0 that can be found in the "Downloads" section at the bottom of the page. Also available on this webpage is the SNF QRP Table for Reporting Assessment-Based Measures for the FY 2020 SNF QRP APU that contains information about items necessary to calculate the measures, item values that may count against APU.
- The <u>FAQ</u> page will be updated periodically with documents containing frequently asked questions from the SNF QRP Help Desk and responses to these questions.
 - o The most recent FAQs can be found at the following link: https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/NursingHomeQualityInits/Downloads/SNF-QRP-Q_A-Quarterly-Update-October-2018_508C-003.pdf
 - The <u>Fact Sheet on Transitions for New Quality Measures and Data Elements Effective October 1, 2018</u> is available for download on the SNF-Quality-Reporting-Program-FAQs webpage. This Fact Sheet contains information about the completion of MDS 3.0 Assessments and APU information for data elements and new measures effective October 1, 2018 for the Skilled Nursing Facility Quality Reporting Program (SNF QRP).
- The <u>SNF QRP Training</u> page provides information about upcoming SNF QRP trainings and post-training materials and recordings.
- The SNF QRP Public Reporting page provides information regarding the various reports available to SNF providers.
- The <u>Reconsideration and Exception & Extension</u> page outlines the process for submitting a reconsideration request to CMS if a provider is found non-compliant with SNF QRP requirements for a given fiscal year. The page also includes information about requesting an exception or extension from CMS.
- The Help page provides contact information for the various Help Desks that are available for SNF providers.
 - Do NOT submit patient-identifiable information (e.g., date of birth, social security number, and health insurance claim number) to the SNF Quality Report Program (<u>SNFQualityQuestions@cms.hhs.gov</u>) and SNF QRP Public Reporting (<u>SNFQRPPRQuestions@cms.hhs.gov</u>). Submitting patient-level data or protected health information may be a violation of

your facilities' policies and procedures as well as violation of federal regulations (HIPAA). If you are unsure of whether the information you are submitting is identifiable, please contact your institutions' Privacy Officer.

• The SNF PPS FY2019 Final Rule was published on August 8, 2018 on the Federal Register website: https://www.federalregister.gov/documents/2018/08/08/2018-16570/medicare-program-prospective-payment-system-and-consolidated-billing-for-skilled-nursing-facilities

Section 3: What's coming up

What's new for Skilled Nursing Facilities (SNFs)

Inaugural Release of SNF QRP Data on Nursing Home Compare:

In accordance with Section 1899B(g)(1) of the Social Security Act, which requires CMS to provide for the public reporting of SNF provider performance on the quality measures, CMS announced the inaugural release of the Skilled Nursing Facility (SNF) Quality Reporting Program (QRP) quality data on Nursing Home (NH) Compare.

NH Compare allows you to find and compare nursing facilities that are certified by Medicare and/or Medicaid. This website contains quality of resident care and staffing information for more than 15,000 nursing homes around the country, and will now additionally include SNF QRP quality data that can be used to compare SNF providers by their performance on important indicators of quality, such as the percentage of patients with new or worsening pressure ulcers, or the percentage of patients that experienced a fall and sustained a major injury. For additional information, including a list of the new measures on NH Compare, we refer you to the SNF Quality Reporting Public Reporting webpage.

Please continue to monitor the <u>SNF Quality Reporting Program Spotlights and Announcements</u> webpage for ongoing up-to-date announcements and information regarding the SNF Quality Reporting Program.