



**Centers for Medicare &
Medicaid Services**

**Electronic Staffing Data Submission
Payroll-Based Journal
Long-Term Care Facility
Policy Manual**

Version 1.0

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CHAPTER 1: Overview

1.1 Introduction

The Centers for Medicare and Medicaid Services (CMS) has long identified staffing as one of the vital components of a nursing home's ability to provide quality care. Over time, CMS has utilized staffing data for a myriad of purposes in an effort to more accurately and effectively gauge its impact on quality of care in nursing homes. Staffing information is also posted on the *CMS Nursing Home Compare* website, and it is used in the *Nursing Home Five Star Quality Rating System* to help consumers understand the level and differences of staffing in nursing homes.

Section 6106 of the Affordable Care Act requires facilities to electronically submit direct care staffing information (including agency and contract staff) based on payroll and other auditable data. The data, when combined with census information, can then be used to not only report on the level of staff in each nursing home, but also to report on employee turnover and tenure, which can impact the quality of care delivered.

Therefore, CMS has developed a system for facilities to submit staffing and census information – Payroll-Based Journal (PBJ). This system will allow staffing information to be collected on a regular and more frequent basis than currently collected. It will also be auditable to ensure accuracy.

This document provides basic information to be used for submitting staffing and census information through the PBJ system. Questions about this manual can be submitted to NHstaffing@cms.hhs.gov. Note: There are additional materials that provide technical specifications and instructions on how to submit data manually or upload automatically from a payroll or time and attendance system. Information about where to find these materials is found below in section 1.4.

1.2 Submission Timeliness and Accuracy

Staffing and census data will be collected quarterly, and is required to be timely and accurate.

Report Quarter: Staffing and census data will be collected for each fiscal quarter. Staffing data includes the number of hours worked by each staff member each day

within a quarter. Census data includes the facility's census on the last day of each of the three months in a quarter. The fiscal quarters are as follows:

Fiscal Quarter	Date Range
1	October 1 – December 31
2	January 1 – March 31
3	April 1 – June 30
4	July 1 – September 30

Deadline: Submissions must be received by the end of the 45th calendar day (11:59 PM Eastern Standard Time) after the last day in each fiscal quarter in order to be considered timely. Facilities may enter and submit data at any frequency throughout a quarter. The last accepted submission received before the deadline will be considered the facility's final submission. Facilities may view their data submitted through Certification and Survey Provider Enhanced Reports (CASPER). Note: The PBJ system will accept submissions after the deadline. However, these submissions will not be considered timely and will not be used to calculate a facility's staffing measures.

Accuracy: Staffing information is required to be an accurate and complete submission of a facility's staffing records. CMS will conduct audits to assess a facility's compliance related to this requirement.

Facilities that do not meet these requirements will be considered noncompliant and subject to enforcement actions by CMS.

1.3 Registration

Submission of staffing information through PBJ will be accessed through the Quality Improvement & Evaluation System (QIES). To connect to PBJ through QIES you must have a CMSnet user ID. Most long term care facilities will already have connectivity to QIES and CMSNet through submitting minimum data set (MDS) or other CMS data.

Individuals at facilities, vendors (e.g., payroll vendors), and/or corporate staff will need to register to submit data into the PBJ system. This is very similar to the process that has been in place with MDS data for years, and was recently updated to support both electronic plan of correct (ePOC) and hospice data submissions.

Registration for the PBJ system through QIES will begin in August 2015 for facilities that will submit data on a voluntary basis starting October 1, 2015 only. CMS will communicate more information at that time. Facilities that will not be submitting data voluntarily should not register at this time.

1.4 Methods of Submission

The PBJ system has been designed to accept two primary submission methods – 1) Manual data entry, and 2) Uploaded data from an automated payroll or time and attendance system. In addition, users can use both methods, or combinations of these methods, for submitting data as needed or desired.

- 1) Entering information manually will require an individual(s) at a facility to key in information about employees, hours worked, and census information directly into the PBJ User Interface. The system has been designed to be user-friendly and intuitively guide users to successfully complete the process. Sample screens of the user interface are included below. Note: The system is still in development at this time and some of the screens may change. Finalized screens will be available closer to the start of the voluntary submission period, and CMS will provide more information at that time.
- 2) Uploading data directly from an automated payroll or time and attendance system will function very similarly to how MDS data are submitted currently. The data will be required to meet very specific technical specifications in order to be successfully submitted. These requirements can be found at <http://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/NursingHomeQualityInits/Staffing-Data-Submission-PBJ.html>. Additionally, technical questions from vendors or software developers related to the PBJ Data Submission Specifications should be sent to: NursingHomePBJTechIssues@cms.hhs.gov.

CHAPTER 2: Definitions

2.1 Employee Record

Figure 1: Sample Employee Entry Screen

a) Employee ID

All staff (direct employees and contract staff) must be entered into the system by assigning each staff member an Employee ID. Employee names and any personally identifiable information (PII) will not be stored in the system. The ID must be a unique identifier and not duplicated with any other current or previous staff. This ID should also not contain any PII, such as a Social Security Number (SSN).

For example (employee named Dylan Smith):

Employee ID: 54bgs714

Hire Date: June 20, 2013

Termination Date: February 19, 2016

No other staff can be assigned the Employee ID of 54bgs714. Also, Dylan's ID should not change during his employment. However, if the facility or provider's business process or system allows for reuse of an employee ID, when an individual leaves (terminated) and then returns to valid employment, the previous ID can be reused.

b) Hire Date

The first date of a staff member's employment and is paid for services delivered, either through direct employment or under contract.

c) Termination date

The last date a staff member's employment and is paid for services delivered, either through direct employment or under contract.

d) Work Type Code

Classification of whether the staff member is full-time or part-time staff.

Work Type Code	Work Type Description
1	Full Time
2	Part Time

e) Pay Type Code

Classification of whether the staff member is a direct employee of the facility (exempt or non-exempt), or employed under contract paid by the facility.

Employees whose jobs are governed by the Fair Labor Standards Act (FLSA) are either "exempt" or "nonexempt." Non-exempt employees are entitled to overtime pay. Exempt employees are not.

Contract staff includes individuals under contract (e.g., a contracted physical therapist) as well as individuals who provide services through organizations that are under contract (e.g., an agency to provide nurses).

NOTE: Only staff that meet these criteria are to be recorded. For example, physicians that are salaried by the facility should be recorded. Whereas physicians who provide services to many residents in a facility, but bill Medicare directly, should not.

Pay Type Code	Pay Type Description
1	Exempt
2	Non-Exempt
3	Contract

2.2 Staffing Hours Record

Figure 2: Sample Staffing Hours Entry Screen

a) Work Day, Date

The day and date associated with the number of hours worked.

b) Hours

Facilities must submit the number of hours each staff member is paid to deliver services for each day worked. Do not count hours paid for any type of leave or non-work related absence from the facility. If an individual provides service in more than one capacity, separate out the hours in each service performed. For example, if a staff person has worked a total of 8 hours in a day but has worked as an activity aide and as a Certified Nurse Aide, separately count the hours worked as a CNA and hours worked as an activity aide to reflect but not to exceed the total hours worked in that day (8).

c) Job Title Code

A code identifying the CMS defined Job Title(s) that matches the role(s) of the staff member for the associated number of hours that the role(s) was performed (see Table 1).

d) Labor Category Code

A code identifying the CMS defined labor category groupings of associated Job Titles (see Table 1).

2.3 Labor and Job Codes and Descriptions

Table 1 below provides the labor code, job code, and a description of the services associated with each type of staff to be recorded in the PBJ system.

Table 1: Labor and Job Codes and Descriptions

Labor Category Code	Job Title Code	Labor Description	Job Description	Description of Services
1	1	Administration Services	Administrator	The administrative staff responsible for facility management such as the administrator, assistant administrator, and other staff in the individual departments who do not perform services described below. Do not include the food service supervisor, housekeeping services supervisor, or facility engineer.
2	2	Physician Services	Medical Director	A physician designated as responsible for implementation of resident care policies and coordination of medical care in the facility in accordance with 483.75(i).
2	3	Physician Services	Other Physician	A salaried physician, other than the medical director, who supervises the care of residents when the attending physician is unavailable, and/or a physician(s) available to provide emergency services 24 hours a day.
2	4	Physician Services	Physician Assistant	A graduate of an accredited educational program for physician assistants who provides healthcare services typically performed by a physician, under the supervision of a physician.
3	5	Nursing Services	Registered Nurse Director of Nursing	Professional registered nurse(s) administratively responsible for managing and supervising nursing services within the facility. Do not additionally reflect these hours in any other category.
3	6	Nursing Services	Registered Nurse with Administrative Duties	Nurses (RN) who, as either a facility employee or contractor, perform the Resident Assessment Instrument function in the facility and do not perform direct care functions. Also include other RNs whose principal duties are spent conducting administrative functions. For example, the Assistant Director of Nursing is conducting educational/in-service, or other duties which are not considered to be direct care giving. Facilities with an RN waiver who do not have an RN as DON report all administrative nursing hours in this category.
3	7	Nursing Services	Registered Nurse	Those persons licensed to practice as registered nurses in the State where the facility is located. Includes geriatric nurse practitioners and clinical nurse specialists who primarily perform nursing, not physician-delegated tasks. Do not include Registered Nurses' hours reported elsewhere.

3	8	Nursing Services	Licensed Practical/Vocational Nurse with Administrative Duties	Those persons licensed to practice as licensed practical/vocational nurses in the State where the facility is located, and do not perform direct care functions. Also include other nurses whose principal duties are spent conducting administrative functions. For example, the LPN Charge Nurse is conducting educational/in-service, or other duties which are not considered to be direct care giving.
3	9	Nursing Services	Licensed Practical/Vocational Nurse	Those persons licensed to practice as licensed practical/vocational nurses in the State where the facility is located. Do not include those hours of LPN/LVNs reported elsewhere.
3	10	Nursing Services	Certified Nurse Aide	Individuals who have completed a State approved training and competency evaluation program, or competency evaluation program approved by the State, or have been determined competent as provided in 483.150(a) and (3) and who are providing nursing or nursing-related services to residents. Do not include volunteers.
3	11	Nursing Services	Nurse Aide in Training	Individuals who are in the first 4 months of employment and who are receiving training in a State approved Nurse Aide training and competency evaluation program and are providing nursing or nursing-related services for which they have been trained and are under the supervision of a licensed or registered nurse. Do not include volunteers.
3	12	Nursing Services	Medication Aide/Technician	Individuals, other than a licensed professional, who fulfill the State requirement for approval to administer medications to residents.
3	13	Nursing Services	Nurse Practitioner	A registered nurse with specialized graduate education who is licensed by the state to diagnose and treat illness, independently or as part of a healthcare team.
3	14	Nursing Services	Clinical Nurse Specialist	A registered nurse with specialized graduate education who provides advanced nursing care.
4	15	Pharmacy Services	Pharmacist	The licensed pharmacist(s) who a facility is required to use for various purposes, including providing consultation on pharmacy services, establishing a system of records of controlled drugs, overseeing records and reconciling controlled drugs, and/or performing a monthly drug regimen review for each resident.
5	16	Dietary services	Dietitian	A person(s), employed full, part-time or on a consultant basis, who is either registered by the Commission of Dietetic Registration of the American Dietetic Association, or is qualified to be a dietitian on the basis of experience in identification of dietary needs, planning and implementation of dietary programs.

5	17	Dietary services	Food Service Worker	Persons (excluding the dietitian) who carry out the functions of the dietary service (e.g., prepare and cook food, serve food, wash dishes). Includes the food services supervisor.
6	18	Therapeutic Services	Occupational Therapist	Persons licensed/registered as occupational therapists according to State law in the State in which the facility is located. Include OTs who spend less than 50 percent of their time as activities therapists.
6	19	Therapeutic Services	Occupational Therapy Assistant	Person(s) who, in accord with State law, have licenses/certification and specialized training to assist a licensed/certified/registered Occupational Therapist (OT) to carry out the OT's comprehensive plan of care, without the direct supervision of the therapist. Include OT Assistants who spend less than 50 percent of their time as Activities Therapists.
6	20	Therapeutic Services	Occupational Therapy Aide	Person(s) who have specialized training to assist an OT to carry out the OT's comprehensive plan of care under the direct supervision of the therapist, in accord with State law.
6	21	Therapeutic Services	Physical Therapist	Persons licensed/registered as physical therapists, according to State law where the facility is located.
6	22	Therapeutic Services	Physical Therapy Assistant	Person(s) who, in accord with State law, have licenses/certification and specialized training to assist a licensed/certified/registered Physical Therapist (PT) to carry out the PT's comprehensive plan of care, without the direct supervision of the PT.
6	23	Therapeutic Services	Physical Therapy Aide	Person(s) who have specialized training to assist a PT to carry out the PT's comprehensive plan of care under the direct supervision of the therapist, in accordance with State law.
6	24	Therapeutic Services	Respiratory Therapist	Persons(s) who are licensed under state law (except in Alaska) as respiratory therapists.
6	25	Therapeutic Services	Respiratory Therapy Technician	Person(s) who provide respiratory care under the direction of respiratory therapists and physicians
6	26	Therapeutic Services	Speech/Language Pathologist	Persons licensed/registered, according to State law where the facility is located, to provide speech therapy and related services (e.g., teaching a resident to swallow).
6	27	Therapeutic Services	Therapeutic Recreation Specialist	Person(s) who, in accordance with State law, are licensed/registered and are eligible for certification as a therapeutic recreation specialist by a recognized accrediting body.
6	28	Therapeutic Services	Qualified Activities Professional	Person(s) who meet the definition of activities professional at 483.15(f)(2)(i)(A) and (B) or 483.15(f)(2)(ii) or (iii) or (iv) and who are providing an on-going program of activities designed to meet residents' interests and physical, mental or psychosocial needs. Do not include hours reported as Therapeutic Recreation Specialist, Occupational Therapist, OT Assistant, or other categories listed above.

6	29	Therapeutic Services	Other Activities Staff	Persons providing an on-going program of activities designed to meet residents' needs and interests. Do not include volunteers or hours reported elsewhere.
6	30	Therapeutic Services	Qualified Social Worker	Person licensed to practice social work in the State where the facility is located, or if licensure is not required, persons with a bachelor's degree in social work, a bachelor's degree in a human services field including but not limited to sociology, special education, rehabilitation counseling and psychology, and one year of supervised social work experience in a health care setting working directly with elderly individuals.
6	31	Therapeutic Services	Other Social Worker	Person(s) other than the qualified social worker who are involved in providing medical social services to residents. Do not include volunteers.
7	32	Dental Services	Dentist	Persons licensed as dentists, according to State law where the facility is located, to provide routine and emergency dental services.
8	33	Podiatry Services	Podiatrist	Persons licensed/registered as podiatrists, according to State law where the facility is located, to provide podiatric care.
9	34	Mental Health Services	Mental Health Service Worker	Staff (excluding those included under therapeutic services) who provide programs of services targeted to residents' mental, emotional, psychological, or psychiatric well-being and which are intended to: <ul style="list-style-type: none"> • Diagnose, describe, or evaluate a resident's mental or emotional status; • Prevent deviations from mental or emotional well-being from developing; or • Treat the resident according to a planned regimen to assist him/her in regaining, maintaining, or increasing emotional abilities to function. Among the specific services included are psychotherapy and counseling, and administration and monitoring of psychotropic medications targeted to a psychiatric diagnosis.
10	35	Vocational Services	Vocational Service Worker	Evaluation and training aimed at assisting the resident to enter, re-enter, or maintain employment in the labor force, including training for jobs in integrated settings (i.e., those which have both disabled and nondisabled workers) as well as in special settings such as sheltered workshops.
11	36	Clinical Laboratory Services	Clinical Laboratory Service Worker	Entities that provide laboratory services and are approved by Medicare as independent laboratories or hospitals.
12	37	Diagnostic X-ray Services	Diagnostic X-ray Service Worker	Radiology services, ordered by a physician, for diagnosis of a disease or other medical condition.
13	38	Administration & Storage of	Blood Service Worker	Blood bank and transfusion services.

14	39	Housekeeping Services	Housekeeping Service Worker	Services, including those of the maintenance department, necessary to maintain the environment. Includes equipment kept in a clean, safe, functioning and sanitary condition. Includes housekeeping services supervisor and facility engineer.
15	40	Other Services	Other Service Worker	Record total hours worked for all personnel not already recorded (For example, librarian).

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2.4 Census Record

Figure 3: Sample Census Data Entry Screen

Manual Census Data Entry

Facility: * DEMO01 - DEMO 1 - DUMMY FACILITY

Fiscal Quarter: * Q2 (Jan 1st 2015 - Mar 31st 2015)

Census Records

Q2 (January 1, 2015 - March 31, 2015)

Date of Census	Medicare Census	Medicaid Census	Other Census	Total Census
January 31, 2015	200	150	330	680
February 28, 2015	200	150	332	682
March 31, 2015				

SAVE CHANGES

This website was developed under contract with the Centers for Medicare & Medicaid Services (CMS).

a) **Month End Date:**

Facilities must enter the resident census for the categories below on the last date of each month. For facilities entering census data manually, the Payroll Based Journal system will list the last date of each month for facilities to enter the associated census. Facilities uploading data from another system will need to adhere to the requirements in the technical specifications.

b) **Medicaid:** Number of residents whose primary payer is Medicaid.

c) **Medicare:** Number of residents whose primary payer is Medicare.

d) **Other:** Number of residents whose primary payer is neither Medicaid or Medicare.