

Five-Star and Nursing Home Compare Changes: Detailed Summary

Survey Domain: *A return to three survey cycles with lifting of Survey freeze*

- During the health inspection “freeze,” CMS conducted analyses to determine whether to change the health inspection rating methodology as a result of changes to the survey process. CMS found that the average number of deficiencies cited in the new survey process is relatively consistent with the average number of citations cited under the former process, noting a slight increase in deficiencies under new process that CMS equates to the increase in the total number of requirements.
- In April 2019, the freeze will end and health inspections conducted on or after November 28, 2017 will be calculated into a facility’s overall star rating.
- The survey rating will continue to be based off three cycles of inspections and will return to pre-“freeze” weightings for each cycle.
 - Cycle 1 [most recent period] will have a weight factor of 1/2
 - Cycle 2 [previous period] will have a weight factor of 1/3
 - Cycle 3 [third period] will have a weight factor of 1/6
- CMS will be suppressing star ratings for Special Focus Facilities (~90 facilities). These facilities will be identified by an icon and text indicating their SFF status, but their star ratings will not be displayed.

Staffing Domain: *New PBJ staffing thresholds and an emphasis on RN Staffing*

- CMS has updated the Total Staffing Hours Per Resident Day (HPRD) and RN Staffing HPRD cut points for the Overall Staffing and RN Staffing Ratings. These updates utilize the 2018 Q4 PBJ data submissions by facilities across the country and have shifted based on PBJ distributions and the relationship between staffing and quality.
- Previously, CMS restricted the Five-Star Staffing and Five-Star RN Staffing to 1-star for those facilities with 7 or more days in a reporting quarter where there were one or more residents but no RN staffing hours. This restriction has been decreased to 4 or more days in a reporting quarter.
- The Five-Star Staffing is calculated by the Total Staffing HPRD and RN Staffing HPRD, and CMS has decided to emphasize RN staffing levels by rounding the Five-Star Staffing toward the RN Staffing rating.
 - For example - If a nursing home earns 4 stars on Total staffing (4.038-4.403 HPRD) and 5 stars on RN staffing (≥ 1.042 HPRD), the average would be 4.5. This is rounded toward the RN rating value (5) and the nursing home would receive a 5-Star Staffing Rating.
 - The tables below highlight the old and new thresholds and the red boxes show where the new rounding method has an impact

Old Cut Points and Rounding Method

Table 5
Staffing Hours and Rating (updated April 2018)

RN rating and hours	Total nurse staffing rating and hours (RN, LPN and nurse aide)				
	1	2	3	4	5
	< 3.176	3.176 – 3.551	3.552 – 4.009	4.010 – 4.237	≥4.238
1 < 0.246	★	★	★★	★★	★★★
2 0.246 - 0.382	★	★★	★★★	★★★★	★★★★
3 0.383 – 0.586	★★	★★★	★★★★	★★★★★	★★★★★
4 0.587 – 0.883	★★	★★★	★★★★	★★★★★	★★★★★
5 ≥0.884	★★★	★★★	★★★★	★★★★★	★★★★★

Note: Adjusted staffing values are rounded to three decimal places before the cut points are applied.

New Cut Points and Rounding Method (Red Boxes Highlight Changes)

Table 4
Staffing and Rating (updated April 2019)

RN rating and hours	Total nurse staffing rating and hours (RN, LPN and nurse aide)				
	1	2	3	4	5
	< 3.107	3.107 – 3.573	3.574 - 4.037	4.038 – 4.403	≥4.404
1 < 0.316	★	★	★★	★★	★★★
2 0.316 - 0.500	★★	★★	★★	★★★	★★★★
3 0.501 – 0.723	★★	★★★	★★★★	★★★★★	★★★★★
4 0.724 – 1.041	★★★	★★★	★★★★	★★★★★	★★★★★
5 ≥1.042	★★★	★★★★	★★★★	★★★★★	★★★★★

Note: Adjusted staffing values are rounded to three decimal places before the cut points are applied.

- Lastly, CMS previously suppressed the Five-Star Staffing and Five-Star RN Staffing for facilities that had 5 or more days with residents and no nurse staffing hours reported. This will no longer occur, and the star rating will be calculated and publicly reported based on the hours submitted through the PBJ reporting process.

Quality Domain: *Alongside the addition of quality measures comes a new weighting system and separate short-stay and long-stay star ratings*

- **Removing one, replacing two, and adding two measures.**
 - Long-stay restraints will no longer be factored into the Quality Measure (QM) rating, as performance on it has topped out.
 - The short-stay pressure ulcer and short-stay discharge community measures currently used in Five-Star will be replaced with their analogous Quality Reporting Program (QRP) measure to avoid duplication and reduce confusion. Both QRP measures were added to Nursing Home Compare in October 2018.
 - Long-stay hospitalizations and long-stay outpatient emergency department (ED) visits will be included in determining the QM rating. Both are claims-based measures, which means they only measure Medicare Part A Fee-For-Service residents and exclude managed care residents, such as those covered by Medicare Advantage plans. Long-stay hospitalizations has been reported on Nursing Home Compare since October 2018.

Long-stay ED visits has not been reported publicly before and will be added to Nursing Home Compare.

- **Two different sets of weights and updated thresholds on a routine basis.** Previously, all measure rates were scored from 0-100 points. Moving forward 9 measures will be scored from 0-150 points and 8 measures will be scored from 0-100 points. The rationale for scoring some measures on a scale of 0-150 is clinical significance and opportunity for improvement.
 - **Nine Measures Scored 0-150 points.** These measures are long-stay ADL worsening, long-stay antipsychotic medication, long-stay mobility decline, the two new claims-based long-stay measures, short-stay functional improvement, and three claims-based short-stay measures (readmissions, discharge to community, and ED visits). Points will be assigned in 15-point increments, and the thresholds are based on deciles. The decile thresholds are drawn from the latest publicly available data.
 - **Eight Measures Score 0-100 points.** These measures include long-stay pain, long-stay pressure ulcer, long-stay catheter, long-stay urinary tract infection, long-stay falls, short-stay pain, short-stay pressure ulcer, and short-stay antipsychotic medication. Points will be assigned in 20-point increments, and the thresholds are based on quintiles, except for short-stay pressure ulcer and short-stay antipsychotic. Nursing homes will have to have a rate of zero to achieve 100 points on these two measures. The quintile thresholds are drawn from the latest publicly available data.
 - **QM thresholds update every 6 months.** The QM thresholds will increase by 50% of the average rate of improvement in QM scores every six months. For example, if the average rate of improvement is 2% for functional improvement, the thresholds for functional improvement will increase by 1%. This is to reduce the need to have large adjustments in the future.
- **Adding a Long-Stay QM and a Short-Stay QM Rating alongside an Overall QM Rating.** The points for the ten long-stay quality measures will be added to provide a Long-Stay QM Rating. The seven short-stay quality measures will be added and multiplied by a factor of 1250/900 to provide a Short-Stay QM Rating. The 1250/900 factor is applied so short-stay and long-stay measures have equal weights when contributing to the Overall QM rating. The Overall QM score is the sum of the long-stay and short-stay QM scores. The thresholds for converting QM score to QM stars are summarized below.

Table 6
Point Ranges for the QM Ratings (as of April 2019)

QM Rating	Long-Stay QM Rating Thresholds	Short-Stay QM Rating Thresholds	Overall QM Rating Thresholds
★	175 – 524	167 – 541	342 - 1066
★★	525 – 619	542 – 638	1067 – 1258
★★★	620 – 704	639 – 714	1259 – 1419
★★★★	705 – 799	715 – 805	1420 – 1605
★★★★★	800 - 1250	806 – 1250	1606 - 2500

Note: the short-stay QM rating thresholds are based on the adjusted scores (after applying the factor of 1250/900 to the unadjusted scores)

- **No change in imputations.** For nursing homes with not enough cases to meet the minimum denominator requirements, the imputation rules remain the same when applicable.

Overall Five-Star Rating: *The calculation of the Overall rating will remain the same.*

1. Start with the health inspection rating. If the health inspection rating is one star, the overall cannot be higher than three stars after factoring in staffing and quality.
2. Add one star if staffing is four or five stars and greater than the health inspection rating. Subtract one star if the staffing rating is one star.
3. Add one star if the overall quality measure rating is five stars; subtract one star if the overall quality measure rating is one star. The new short-stay and long-stay quality ratings have no impact.