MassHealth
Nursing Facility Bulletin 132
February 2012

TO: All Nursing Facilities Participating in MassHealth

FROM: Julian J. Harris, M.D., Medicaid Director

RE: Reestablishment of the Nursing Facility Pay for Performance (NF P4P) Program

Background

The purpose of this bulletin is to describe the MassHealth Nursing Facility Pay for Performance (NF P4P) program for FY12 and the requirements nursing facilities must meet in order to participate in and receive incentive payments under that program.

Participation in the program is voluntary. Interested facilities must submit an application by March 30, 2012, as further described in this bulletin.

About the Program

The intent of the NF P4P program is to encourage nursing facilities to focus quality improvement efforts on a consistent staff assignment model of care.

The NF P4P program also seeks to:
• promote culture change in nursing facilities by encouraging facilities to implement the consistent assignment model of care, whereby certified nursing assistants (CNAs) are consistently assigned to the same residents on each unit on most shifts (85% of their shifts);
• support provider-initiated quality improvement efforts; and
• ensure that the appropriate number of staff is providing intimate care to be consistent with maintaining patient dignity.

The program awards incentive payments to eligible nursing facilities in an effort to improve quality of care within facilities. Funding is based on the total budget for the NF P4P program ($2.8 million) and the number of facilities that apply and meet the threshold requirements. MassHealth will determine the number of facilities that qualify and the amount of incentive payments to be made to those qualifying facilities based on the criteria set forth below.

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About the Program (cont.)

The NF P4P program will incentivize nursing facilities for developing and improving new or existing quality improvement programs focused on consistent staff assignment. The program requires participating facilities to undertake a performance-based quality improvement project and submit a baseline performance rate for consistent staff assignment.

Program Participation Requirement

Participation in the NF P4P program is a two-step process.

First, nursing facilities must meet certain threshold requirements (see Step 1: Threshold Requirements below). Upon meeting these thresholds, they must complete and submit the application in the prescribed format (see Step 2: Application Requirements below).

Step 1: Threshold Requirements

To be considered eligible for the program, nursing facilities must meet the following five threshold requirements for the program.

1. Facilities must not have an immediate jeopardy designation by the Massachusetts Department of Public Health, or be designated by the Centers for Medicare & Medicaid Services (CMS) as a special focus facility between July 1, 2011, and June 30, 2012.
2. Facilities must be enrolled as a MassHealth nursing facility for at least one day between July 1, 2011, and June 30, 2012.
3. Facilities must have at least one paid MassHealth day during the measurement year of FY 2012 (July 1, 2011, through June 30, 2012).
4. Facilities must demonstrate the existence of the Cooperative Effort policy.

A Cooperative Effort policy is defined as the establishment of a committee whose purpose is to help improve quality of care within a facility for the NF P4P program.

a. The MassHealth NF P4P program does not envision that individual nursing facilities will create a new committee for this program. The policy can leverage the resources used for the Quality Assurance Committee (QC) that currently exists within facilities to focus on quality improvement efforts on a consistent staff assignment model of care and that, at a minimum,

i. has at least quarterly meetings; and

ii. for all committee discussions about the MassHealth NF P4P program, consists of a physician or designee, a nurse manager focused on training and quality, the administrator or designee, and at least three non-licensed direct care staff commensurate with the number of management and licensed staff.

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Step 1: Threshold Requirements
(cont.)

Additional staff that attends the QC meetings for other items not related to the NF P4P program can leave the committee meeting once the program components are discussed.

b. Demonstration of the Cooperative Effort policy

i. The facility will sign and return to MassHealth an attestation (see Attachment A), indicating compliance with this policy, as defined above in item 4(a). Along with the attestation, the facility will also submit a copy of its written Cooperative Effort policy and minutes from the last QC meeting. Minutes must include names of the key members attending the meeting. Information in the minutes that do not pertain to the MassHealth NF P4P program must be redacted from the minutes submitted to MassHealth.

ii. The facility will extend full cooperation to MassHealth, if audited, to ensure that the policy is as defined in items 4 and 4(a) above and contains the documentation indicated in 4(b)(i) above.

This may include, but is not limited to

1. review of documentation about the QC that consists of
   a. committee roster;
   b. meeting agendas;
   c. meeting minutes; and
   d. other documentation that MassHealth deems appropriate to determine the existence of the committee and its focus on quality improvement efforts on consistent staff assignment; and

2. on-site audit activities such as:
   a. interviewing staff involved in committee to validate participation in the committee and involvement developing quality improvement projects focused on consistent assignment; or
   b. other relevant activities as determined by Office of Long Term Services and Supports (OLTSS).

5. Nursing facilities must enroll in the Advancing Excellence in America’s Nursing Homes Campaign, as described at www.nhqualitycampaign.org/star_index.aspx?controls=mission (Copy and paste this link into your Internet browser to get to the appropriate page.) and select Consistent Assignment as an organizational goal, which is defined by Advancing Excellence as being regularly cared for by the same caregiver (www.nhqualitycampaign.org/star_index.aspx?controls=resByGoal#goal2).
Step 2: Application Requirements

To be considered for participation in the program, applicants must submit a completed NF P4P program application, prepared by the facility’s QC, to MassHealth by March 30, 2012. The application form is available at www.mass.gov/masshealth, on the MassHealth Provider Forms page.

You can send the application electronically via e-mail to NFP4PPProgram@state.ma.us or by mail to the following address.

Nursing Facility Pay for Performance Program
Office of Long Term Services and Supports
One Ashburton Place, 5th Floor
Boston, MA 02108

All applications must use the application form (see Attachment A) and be no more than 15 pages in length, including attachments, and must include all submission information described below. Any applications received after March 30, 2012, will not be considered for participation in the FY12 NF P4P program.

Each application should be prepared by the applicant facility’s QC. If you have questions, please submit an e-mail to NFP4PPProgram@state.ma.us.

Submission Items

Applicants should submit the following by March 30, 2012.

1. Application: Submit the NF P4P program application completed by the nursing facility’s QC that includes the following elements:
   a. the legal name of the facility, facility address, name and contact information, including e-mail address, for the primary contact for the P4P applications, as well as the name and contact information for the facility’s administrator; and
   b. the goals and measurable objectives for the NF P4P project that reflect the 2011 Advancing Excellence in America’s Nursing Homes Campaign’s definition for consistent assignment, defined as:

   at least 85% of long stay residents (over 100 days) in the nursing home have no more than eight CNA caregivers over a four week period, and at least 85% of short stay residents (100 days or less) have no more than eight CNA caregivers over a two week period. CNAs must be those who provide actual care for the resident.

   Please Note: Based on discussions with Advancing Excellence, the algorithm for calculating the benchmark may change during FY12. However, for purposes of FY12 incentive payments, Advancing Excellence’s benchmark for 2011 described above will apply. Any changes to this benchmark as it pertains to future incentive payments will be communicated in the beginning of FY13;

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Submission Items

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c. a description of how data demonstrating consistent assignment, as described above, will be collected, analyzed, and reported.

d. The submission of baseline data. Baseline data for FY12 submission will consist of the current level of consistent staff assignment used by the facility as calculated using previously developed methodology from the Advancing Excellence in America’s Nursing Homes Campaign. Consistent staff assignment should be calculated using Advancing Excellence’s Tool for Calculating Consistent Assignment found by going to http://www.nhqualitycampaign.org/star_index.aspx?controls=resByGoal#goal2, selecting Goal 2: Consistent Assignment, and then selecting Tool for Calculating Consistent Assignment. Submit a copy of the Summary tab from the tool, which will contain consistent assignment data;

e. analyses done to date of barriers and facilitators to consistent staff assignment (root cause analysis), if available. This includes supplying any root cause analyses performed to identify barriers encountered by the facility and facilitators discovered in addressing consistent assignment within the organization;

f. an action plan to implement and sustain the use of consistent staff assignment in the facility. Proposed changes are based on best practice methods and strategies for designing and implementing quality improvement (e.g., Advancing Excellence’s Implementation Guide: Goal 2: Improving Consistent Assignment in Nursing Home Staff. The Guide is found at http://www.nhqualitycampaign.org/files/impguides/2_ConsistentAssignment_TAW_Guide.pdf); and

g. a proposed intervention to address any issues or problems uncovered by the analyses in item 1(e), which includes active involvement by all levels of staff, including administrators, direct care staff, and others, as well as residents and their families.

2. Attestation: Sign the attestation that the Cooperative Effort policy has been met and that the nursing facility is not in jeopardy and not a special focus facility during the measurement year (July 2011 through June 2012). Attestation must be accompanied by

a. a written policy for a cooperative effort process; and

b. minutes from the most recent Quality Committee meeting.
**NF P4P Incentive Payments**  
The FY12 incentive payments will be distributed from the total amount of the NF P4P budget for FY12 (July 1, 2011 through June 30, 2012) on a pro rata basis to all the participating nursing facilities that meet the threshold, application, and submission requirements described above.

**Questions**  
If you have any questions about the information in this bulletin, please e-mail your inquiry to NFP4PProgram@state.ma.us.
Application Instructions
Applications must not exceed 15 pages in length and must not be handwritten. All applications must be submitted to MassHealth by March 30, 2012. A copy of the written policy for a cooperative effort process and minutes from the most recent Quality Committee meeting must be included with this application.

Please Note: Facilities may attach an additional page for a question if the response exceeds the space provided, as long as the total number of pages for the entire application, including all submission items, does not exceed 15 pages.

Applications can be sent electronically to NFP4PP@program.state.ma.us or by U.S. mail to the following address:
Nursing Facility Pay for Performance Program
Office of Long Term Services and Supports
One Ashburton Place, 5th Floor
Boston, MA 02108

Facility Information
Facility legal name: ____________________________________________

Facility address: _____________________________________________

Primary contact name: _________________________________________

Primary contact e-mail address: _________________________________

Facility administrator’s name: _________________________________

Facility administrator’s e-mail address: __________________________
**Program Information**

1. State the goals and measurable objectives for the consistent assignment P4P project.
Program Information (cont.)

2. Describe how data demonstrating consistent assignment will be collected, analyzed, and reported.
Program Information (cont.)

3. Submit baseline data providing the facility’s current level of consistent staff assignment. Use Advancing Excellence’s methodology and Tool for Calculating Consistent Assignment found at www.nhqualitycampaign.org/files/ConsistentAssignment.xls. Submit a copy of the Summary tab from the tool, which will contain consistent assignment data.
Program Information (cont.)

4. Describe what analyses, if any, have been performed to date of any barriers and facilitators to consistent staff assignment. This includes supplying any root cause analyses performed to identify barriers encountered by the facility discovered in addressing consistent assignment within the organization.
Program Information (cont.)

5. Describe the action plan to implement and sustain the use of consistent staff assignment in the facility.
Program Information (cont.)

6. Describe the proposed intervention to address any issues or problems uncovered by the root cause analysis in item 4.
If you have any questions about this application, please send inquiries to NFP4PPProgram@state.ma.us.

Attestation (Please read carefully and sign.)

I certify under the pains and penalties of perjury that the information on this form and any attached statement that I have provided has been reviewed and signed by me, and is true, accurate, and complete, to the best of my knowledge. I also certify that I am the provider or, in the case of a legal entity, duly authorized to act on behalf of the provider. I understand that I may be subject to civil penalties or criminal prosecution for any falsification, omission, or concealment of any material fact contained herein.

I also certify that this nursing facility is in compliance with the Cooperative Effort Policy for participation in the Nursing Facility P4P Program. This policy includes the existence of a committee that is comprised of a physician or designee, nurse manager focused on training and quality, administrator or designee, and at least three non-licensed direct care staff commensurate with the number of management and licensed staff.

I understand that the Office of Long Term Services and Supports (OLTSS) may audit this facility to ensure that the standard is being met. This may include, but not be limited to, providing documentation regarding the committee, on-site review of documentation, and discussions with applicable facility staff, and other activities as determined necessary by OLTSS.

Provider’s signature (Signature and date stamps, or the signature of anyone other than the provider or a person legally authorized to sign on behalf of a legal entity, are not acceptable):

________________________________________________________________________

Printed legal name of provider:

________________________________________________________________________

Printed legal name of individual signing (if the provider is a legal entity):

________________________________________________________________________

Date:
Nursing Facility Pay for Performance Program
FY 12 Application Checklist

Use the following checklist to ensure that all required components for the application are included in your submission.

**Submission items**

**Threshold Items**
- Signed Attestation
- Written policy for a cooperative effort process
- Minutes from most recent meeting

**Application Components**
- Legal name of facility, facility address, name, and contact information
- Goals and measurable objectives that reflect Advancing Excellence’s campaign definition for consistent staff assignment
- Description of data collection, analysis, and reporting
- Baseline data of the current level of consistent staff assignment, as shown in Advancing Excellence’s Tool for Calculating Consistent Assignment (provide a copy of the tool showing the baseline rate)
- Analyses done to date
- Action plan to implement and sustain use of consistent assignment
- Proposed intervention