

2013 Nursing Home Quality Initiative Measure Descriptions

Below is a description of the measures included in the 2013 NHQI file for each component of the NHQI.

Quality Component (60 points)

The quality component contains 14 quality measures. Facilities were awarded points based on their performance in each measure using different methods. Some measures were based on meeting threshold values, while quintiles were calculated for other measures. The threshold values for such qualifying measures are described in Table 1. Measures that followed the quintile method were awarded points based on the following structure:

- First quintile = 4.29 points
- Second quintile = 2.57 points
- Third quintile = 0.86 point
- Fourth and fifth quintiles = 0 points

If data was not available or the sample size was too small for a measure, the points were redistributed across the remaining quality measures. Therefore, the quality measures for some facilities may be worth more than 4.29 points. For example, if a facility had two measures for which the data was unavailable or the sample size too small, the two measures were suppressed and the 60 quality points were distributed across the remaining 12 measures. In this example, each measure was then worth five points. Facilities with more than three quality measures needing to be suppressed were excluded from the NHQI. If data was unavailable for a quality measure because the facility did not submit the necessary data, the facility lost points for that measure, and the quality points were **not** distributed to the other measures.

For the measures that utilize 2012 MDS 3.0 data, the CMS measure specifications can be found at <http://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/NursingHomeQualityInits/downloads/MDS30QM-Manual.pdf>.

Table 1: Quality Measures

Measure	Measure ID	Data Source	Point Method	Notes
Annual level of temporary contract/agency staff used*	1	2012 nursing home certified cost reports	Threshold; maximum points are awarded if the rate is less than 10%, and zero points if the rate is 10% or greater	The proportion of annual contract staff hours worked over the sum of annual full-time and contract staff hours worked. See note*
CMS five-star quality rating for staffing	2	CMS Five-Star Provider Ratings	Quintiles	As of April 1, 2013 5 stars means best performance
Percent of employees vaccinated for the flu**	3	Healthcare Personnel Influenza Vaccination Report for the 2012-2013 influenza season	Quintiles	See note**
Percent of long stay high risk residents with pressure ulcers	4	2012 MDS 3.0 data	Quintiles	Risk adjusted by the NYS DOH

Table 1: Quality Measures

Measure	Measure ID	Data Source	Point Method	Notes
Percent of long stay low risk residents who lose control of their bowel or bladder	5	2012 MDS 3.0 data	Quintiles	
Percent of long stay residents assessed and given, appropriately, the pneumococcal vaccine	6	2012 MDS 3.0 data	Threshold; maximum points are awarded if the rate is 85% or greater, and zero points if the rate is less than 85%	
Percent of long stay residents assessed and given, appropriately, the seasonal influenza vaccine	7	2012 MDS 3.0 data	Threshold; maximum points are awarded if the rate is 85% or greater, and zero points if the rate is less than 85%	
Percent of long stay residents experiencing one or more falls with major injury	8	2012 MDS 3.0 data	Quintiles	
Percent of long stay residents who have depressive symptoms	9	2012 MDS 3.0 data	Quintiles	
Percent of long stay residents who lose too much weight	10	2012 MDS 3.0 data	Quintiles	Risk adjusted by the NYS DOH
Percent of long stay residents who received an antipsychotic medication.	11	2012 MDS 3.0 data	Quintiles	In addition to the exclusions put forth by CMS, NYS excludes the diagnosis of bipolar disorder/manic depression
Percent of long stay residents who self-report moderate to severe pain	12	2012 MDS 3.0 data	Quintiles	Risk adjusted following the CMS model
Percent of long stay residents whose need for help with daily activities has increased	13	2012 MDS 3.0 data	Quintiles	
Percent of long stay residents with a urinary tract infection	14	2012 MDS 3.0 data	Quintiles	

* Some facilities' reported rates may include contract hours outside of the nursing facility and may not be an accurate level of contract staff in the facility.

**Superstorm Sandy in October 2012 had an impact on some facilities' ability to immunize their healthcare workers. For these facilities, the employee flu vaccination measure was suppressed if it resulted in a higher overall score for the facility affected. In these cases, the quality points were redistributed across the remaining quality measures.

Compliance Component (20 points)

The compliance component contains three measures. The CMS five-star quality rating for health inspections is worth 10 points, while the two timely submission measures are each worth five points.

Table 2: Compliance Measures

Measure	Measure ID	Data Source	Point Method	Notes
CMS five-star quality rating for health inspections	15	CMS Five-Star Provider Ratings	5 stars = 10 points 4 stars = 7 points 3 stars = 4 points 2 stars = 2 points 1 star = 0 points	CMS ratings as of April 1, 2013
Timely submission of employee flu immunization data*	16	Healthcare Personnel Influenza Vaccination Report for the 2012-2013 influenza season, reported to the Bureau of Immunization by May 1, 2013	5 points for timely submission, 0 points if not timely	See note*
Timely submission of complete nursing home certified cost reports	17	2012 nursing home certified cost reports, reported to the Bureau of Finance by August 1, 2013 for calendar year filers, and September 30, 2013 for fiscal year filers	5 points for timely, certified, and complete submission, 0 points if not timely, certified, or complete	

*Superstorm Sandy in October 2012 had an impact on some facilities' ability to submit their employee immunization data by the designated deadline. For these facilities, the points were redistributed to the timely submission of nursing home certified cost reports measure. This measure was worth 10 points instead of five.

Efficiency Component (20 points)

The efficiency component contains one measure for potentially avoidable hospitalizations (PAH), worth 20 points. This measure was developed using the CMS Nursing Home Value Based Purchasing (NHVBP) Demonstration that began in 2009. The PAH measure closely mirrors the appropriate hospitalizations methodology used in the demonstration. More information on the CMS NHVBP demonstration can be found at <http://innovation.cms.gov/initiatives/Nursing-Home-Value-Based-Purchasing/>.

Table 3: Efficiency Measure

Measure	Measure ID	Data Source	Point Method	Notes
Potentially avoidable hospitalizations (PAH)	18	2012 MDS 3.0 and SPARCS data	Quintiles Quintile 1 = 20 points Quintile 2 = 16 points Quintile 3 = 12 points Quintile 4 = 4 points Quintile 5 = 0 points	Risk adjusted by the NYS DOH

Overall Score and Quintile

The overall score is the sum of points awarded in each component. Nursing homes are ranked into overall quintiles based on their overall scores.

Ineligible for Quintile Ranking

If health inspection survey deficiency data showed a level J, K, or L deficiency between January 1 of the measurement year (2012) and June 30 of the reporting year (2013), this will be indicated in the NHQI data set. J, K, and L deficiencies indicate a Level 4 immediate jeopardy, which is the highest level of severity for deficiencies on a health inspection. Immediate jeopardy indicates that the deficiency resulted in noncompliance and immediate action was necessary, and the event caused or was likely to cause serious injury, harm, impairment or death to the resident(s). Because of the severity of these deficiencies, they are incorporated into the NHQI and these nursing homes are considered ineligible to be ranked into overall quintile. The overall score and quintile will be displayed for each of these ineligible nursing homes as a reference. This is to show the data user where the nursing home would have placed in the rankings if it had not received a level J, K, or L deficiency.