

# IMPERIO!

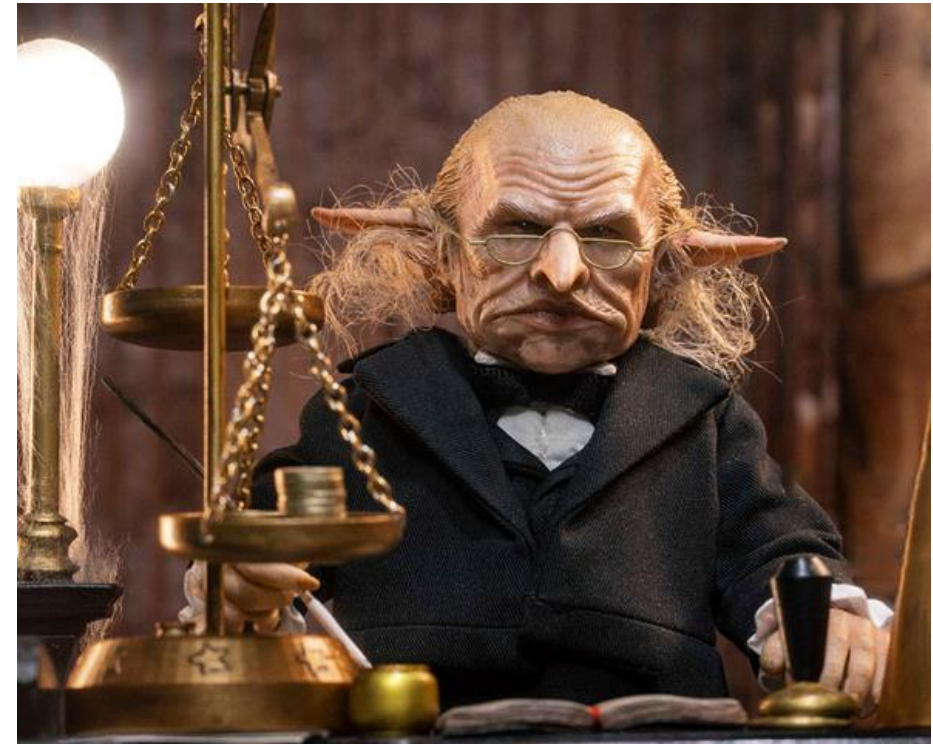
TAKING CONTROL OF YOUR QUALITY  
MEASURES: NO DOLLAR LEFT BEHIND

PRESENTED BY:

MARIA ARELLANO MS, RN, RAC-CT

AUGUST 18, 2022

PointRight® is now



# New Mexico Value Base Payment Programs

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## Two value-based payment programs

NMVBPP

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HCQS

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Largest part of the incentive is related to quality measures

# New Mexico Value Based Payment Program

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## NMVBP QM's

- LS Antipsychotic (150 pts)
- LS Urinary Tract Infection (50 pts)
- LS Pressure Ulcer (100 pts)
- PointRight<sup>®</sup> Pro Long Stay<sup>™</sup> (100 pts)

## HCQS QM's

- LS Falls w/Major Injury (100 pts)
- LS Depression (100 pts)
- LS Influenza Vaccine (100 pts)
- Pneumococcal Vaccine (100 pts)

**400 - point program maximum for both programs**

# Quality Measures

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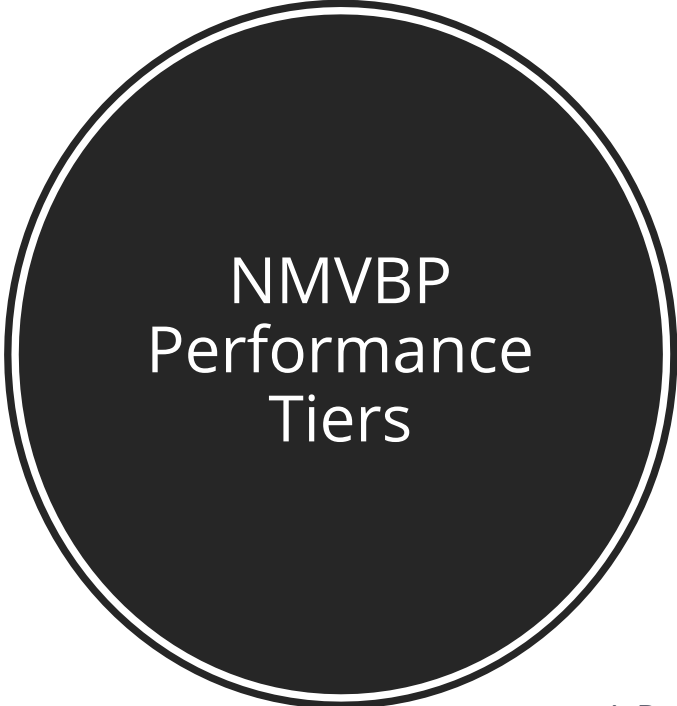


How well do you know the Quality Measures and what they are evaluating?

Do you know what the exclusions are?

What is your level of confidence that your quality measures are accurate?

**QM's = \$\$\$\$\$**



**Tier 1**

**Tier 2**

**Tier 3**

**Tier 4**

**Tier 5**

**280  
points  
or more**

220 to  
279  
points

160 to  
219  
points

100 to  
159  
points

99  
points  
or less

- A Performance Tier shall be assigned to each facility's corresponding point total earned from quality measures
- Per diem rate X applicable tier percentage X **Medicaid Bed Days** = Quality payment

	<b>Tier 1</b>	<b>Tier 2</b>	<b>Tier 3</b>	<b>Tier 4</b>	<b>Tier 5</b>
3rd year (CY 2022)	100%	85%	75%	50%	10%



Tier 1	Tier 2	Tier 3	Tier 4	Tier 5
320 points or more	319 to 260 points	259 to 200 points	199 to 140 points	139 points or less

Tier Percentages	Tier 1	Tier 2	Tier 3	Tier 4	Tier 5
1st year	100%	100%	100%	100%	100%
2nd year	100%	95%	90%	85%	75%
3rd year	100%	85%	75%	65%	50%
4th year	100%	75%	50%	25%	0%



**(Per diem \* Tier Percentage) \* Adjusted Medicaid Bed Days = Initial Quality Performance Amount**

**Per Diem Rate \* Enhanced Tier Percentage \* Facility Adjusted Medicaid Bed Days = Total Quality Payment**

# What's the Difference?

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- Q1 2022 NMVBP Average Payment\* = \$ 10,355.77
- Q1 Per Diem Rate = \$2.87

Tier	Adjusted Per Diem
Tier 1 (100%)	Full per diem
Tier 2 (85%)	\$2.44
Tier 3 (75%)	\$2.15
Tier 4 (50%)	\$1.43
Tier 5 (10%)	\$0.28

\* Quality component only

# What's the Difference?

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- Q4 FY2022 HCQS Average Incentive Payment = \$ 352,589.63
- Q4 FY2022 Per Diem Rate = \$ 76.47

Tier	Adjusted Per Diem
Tier 1 (100%)	Full per diem
Tier 2 (75%)	\$ 57.35
Tier 3 (50%)	\$ 38.23
Tier 4 (25%)	\$ 19.11
Tier 5 (0%)	\$ 0



# Quality Measure Specifications Review

# Long Stay Record Definitions

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- Long stay. An episode with CDIF greater than or equal to 101 days as of the end of the target period. Long stays may include one or more interruptions, indicated by Interrupted Stay (A0310G1 = [1]).
- Target assessment Selection period Most recent 3 months (the long stay target period).
- Qualifying RFAs A0310A = [01, 02, 03, 04, 05, 06] or A0310B = [01] 8 or A0310F = [10, 11]
- Look-back Scan - Scan all qualifying RFAs within the current episode that have target dates no more than 275 days prior to the target assessment. If used, it is specified in the definitions of measures that utilize the look-back scan.

# LS Antipsychotic Medication

**Table 2-29**  
**Percent of Residents Who Received an Antipsychotic Medication (LS)<sup>28</sup>**  
**(CMS ID: N031.03) (NQF: None)**

Measure Description
This measure reports the percentage of long-stay residents who are receiving antipsychotic drugs in the target period.
Measure Specifications
<p><b>Numerator</b></p> <p>Long-stay residents with a selected target assessment where the following condition is true: antipsychotic medications received. This condition is defined as follows:</p> <ol style="list-style-type: none"> <li>For assessments with target dates on or after 04/01/2012: (N0410A = [1, 2, 3, 4, 5, 6, 7]).</li> </ol> <p><b>Denominator</b></p> <p>Long-stay nursing home residents with a selected target assessment except those with exclusions.</p> <p><b>Exclusions</b></p> <ol style="list-style-type: none"> <li>The resident did not qualify for the numerator and <b>any</b> of the following is true:             <ol style="list-style-type: none"> <li>For assessments with target dates on or after 04/01/2012: (N0410A = [-]).</li> </ol> </li> <li><b>Any</b> of the following related conditions are present on the target assessment (unless otherwise indicated):             <ol style="list-style-type: none"> <li>Schizophrenia (I6000 = [1]).</li> <li>Tourette's syndrome (I5350 = [1]).</li> <li>Tourette's syndrome (I5350 = [1]) on the prior assessment if this item is not active on the target assessment and if a prior assessment is available.</li> <li>Huntington's disease (I5250 = [1]).</li> </ol> </li> </ol>
Covariates
Not applicable.

N0410. Medications Received	
Indicate the number of DAYS the resident received the following medications by pharmacological classification, not how it is used, during the last 7 days or since admission/entry or reentry if less than 7 days. Enter "0" if medication was not received by the resident during the last 7 days	
Enter Days 7	A. Antipsychotic
Enter Days 0	B. Antianxiety
Enter Days 7	C. Antidepressant
Enter Days 0	D. Hypnotic
Enter Days 0	E. Anticoagulant (e.g., warfarin, heparin, or low-molecular weight heparin)
Enter Days 0	F. Antibiotic
Enter Days 0	G. Diuretic
Enter Days 0	H. Opioid

# LS Falls with Major Injury

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**Table 2-12**  
**Percent of Residents Experiencing One or More Falls with Major Injury (LS)<sup>23</sup>**  
**(CMS ID: N013.02) (NQF: 0674)**

Measure Description
This measure reports the percent of long-stay residents who have experienced one or more falls with major injury reported in the target period or look-back period.
Measure Specifications
<b><i>Numerator</i></b> Long-stay residents with one or more look-back scan assessments that indicate one or more falls that resulted in major injury (J1900C = [1, 2]).
<b><i>Denominator</i></b> All long-stay nursing home residents with one or more look-back scan assessments except those with exclusions.
<b><i>Exclusions</i></b> Resident is excluded if the following is true for <i>all</i> look-back scan assessments: 1. The number of falls with major injury was not coded (J1900C = [-]).
Covariates
Not applicable.

\* 275 day look back scan

# PointRight Solutions to Support Improving Quality Measures

# Preventing Inaccurate QM's – starts with Data Integrity Audit (DIA)

Executive Dashboard / DIA / Assessment List

## Assessment List

Show all ARDs from: Last 90 Days Search Assessments Show/Hide Filters

Showing 1 to 15 of 708 rows 15 rows per page

+ Name	↑ DOB	Gender	MRN	Room #	ARD	OBRA	PPS	Submission Date	Submitted By	Number of Issues
+ ADZSQJO, NQECSC	03/21/1934	Male	100017474	NS0800805A	05/29/2022	Discharge: Return Not Anticipated	PPS Discharge	07/22/2022 07:04:52 PM	User, PointRight	0
+ AFFSMT, ZDREUXL	09/02/1928	Female	100017827	NS0600619B	07/09/2022	Quarterly	None	07/22/2022 07:13:28 PM	User, PointRight	3 ▲
+ AFFSMT, ZDREUXL	09/02/1928	Female	100017827	NS1301318B	06/10/2022	None	5-Day	07/22/2022 07:13:26 PM	User, PointRight	3 ▲
+ AFFSMT, ZDREUXL	09/02/1928	Female	100017827	NS0600619B	06/10/2022	Admission	None	07/22/2022 07:13:23 PM	User, PointRight	3 ▲
+ AFGDEUY, OPLLBJBXN	09/02/1945	Male	100017734	NS0800805B	05/28/2022	Discharge: Return Not Anticipated	PPS Discharge	07/22/2022 07:07:49 PM	User, PointRight	0
+ AFGDEUY, OPLLBJBXN	09/02/1945	Male	100017734	NS0800805B	05/26/2022	None	5-Day	07/22/2022 07:07:48 PM	User, PointRight	3 ▲
+ AFGDEUY, OPLLBJBXN	09/02/1945	Male	100017734	NS0800805B	05/20/2022	Entry	None	07/22/2022 07:07:47 PM	User, PointRight	0
+ AFMSMV, BZBDX	10/11/1953	Female	100018229	NS0800804B	07/09/2022	Discharge: Return Not Anticipated	None	07/22/2022 07:16:33 PM	User, PointRight	2 ▲
- AFMSMV, BZBDX	10/11/1953	Female	100018229	NS0800804B	07/05/2022	None	5-Day	07/22/2022 07:16:31 PM	User, PointRight	4 ▲

**Triggered Quality Measure(s)**

- Depression
- Antianxiety/Hypnotic
- Antianxiety/Hypnotic (Surveyor)

**PDPM Reimbursement** See Coding Details

HIPPS Code: CAND1

Primary Medical Condition: i

ICD-10: Z47.1

**QM Alert:**

Issue D4

**Description:**

- Resident has had self-reported symptoms of depression (D0200A2 or D0200B2 and D0300) during the two week lookback period.

**Why this is an issue:**

- This assessment will trigger the Depression Quality Measure if the resident is in the long stay population.

**Resolution**

No Action

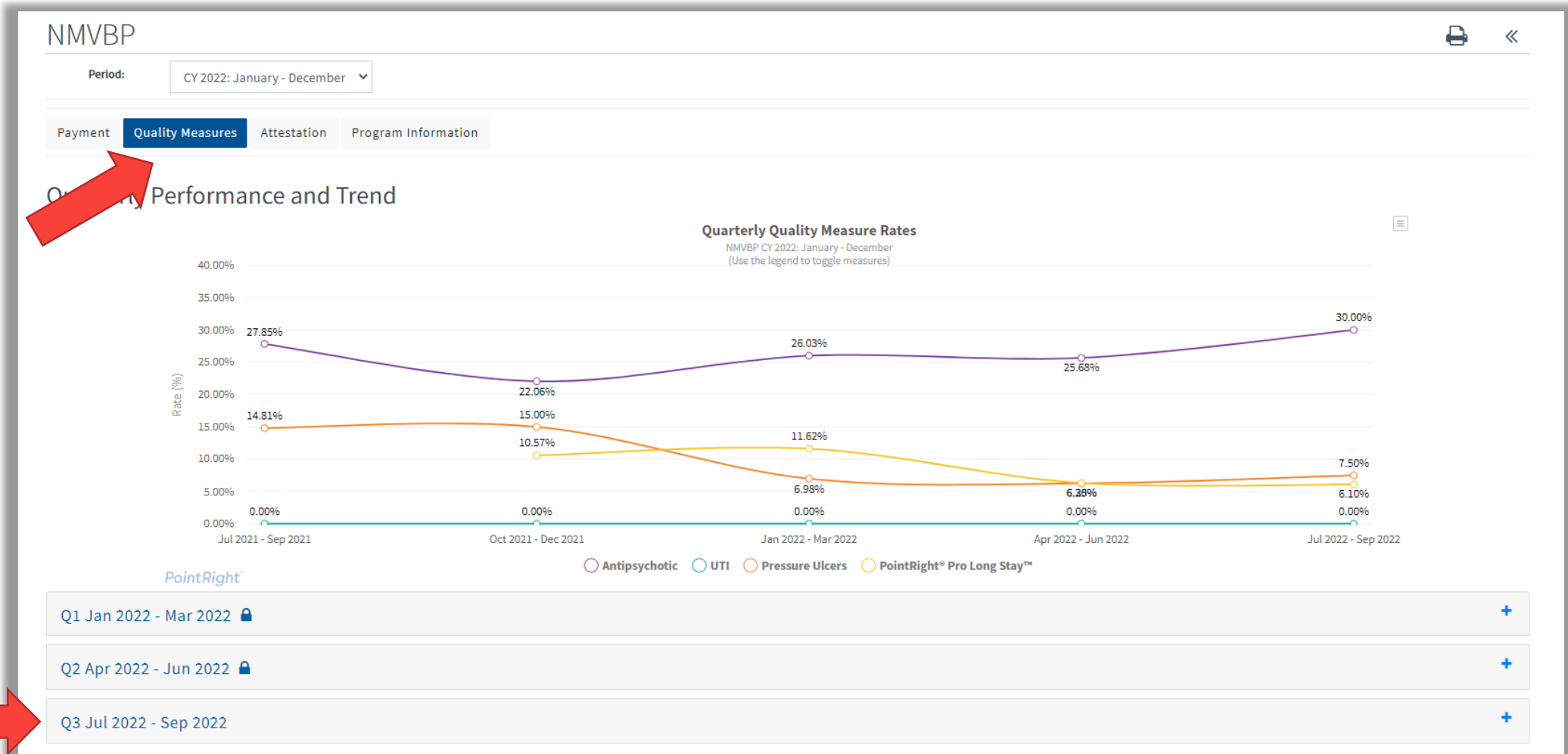
Change MDS

Explanation

MDS coding and the potential QM trigger are accurate.

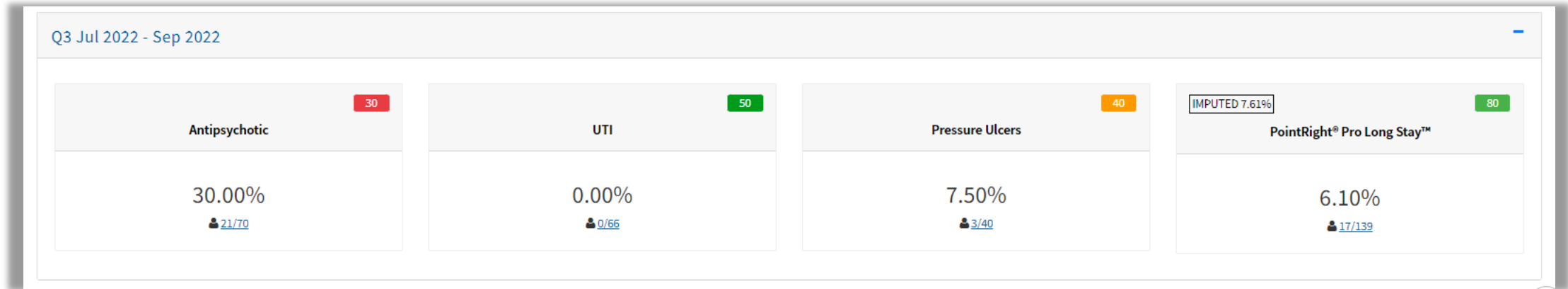
Documentation Complete

# P4P Scorecard for both NMVBP and HCQS



# Quarterly Performance

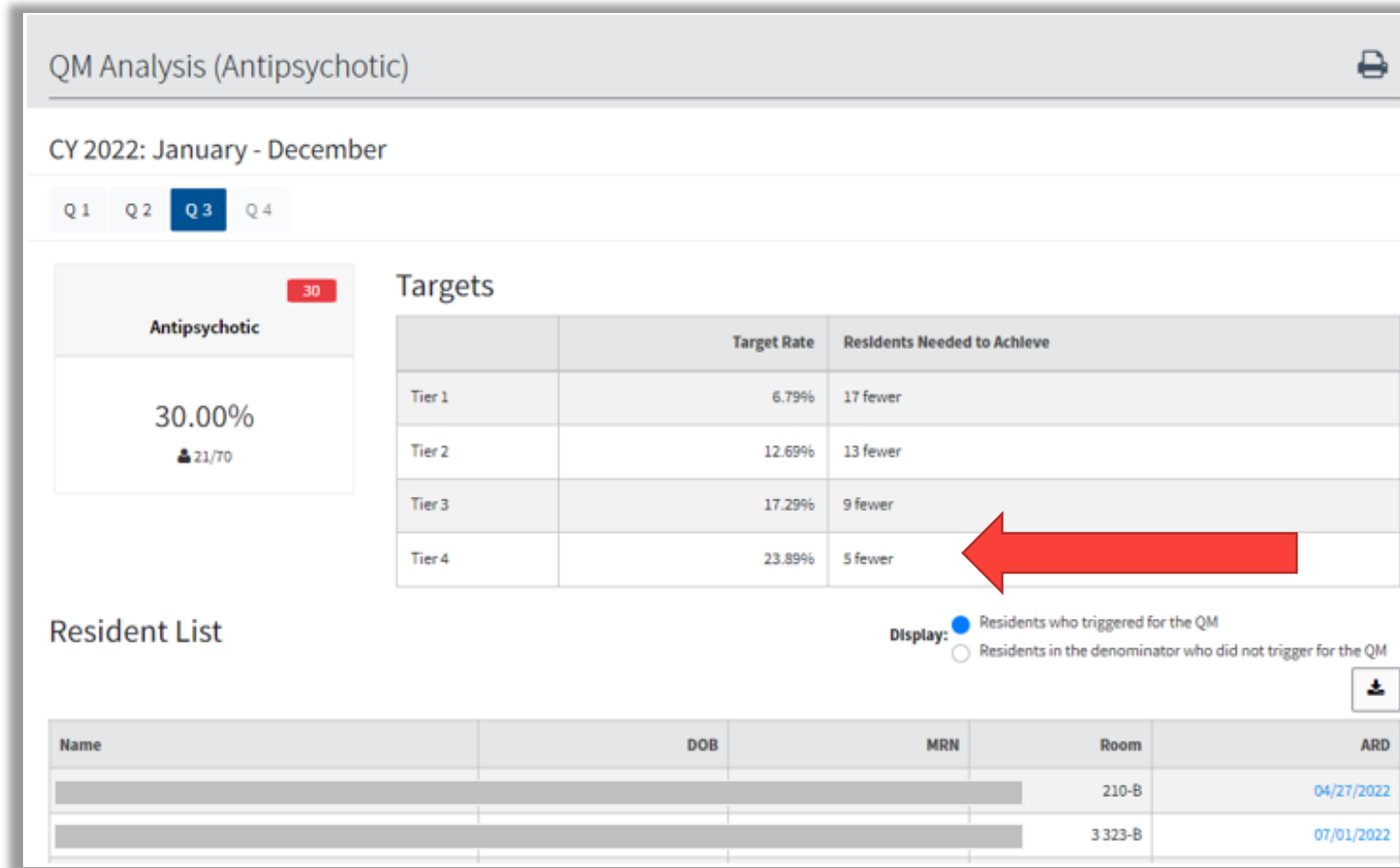
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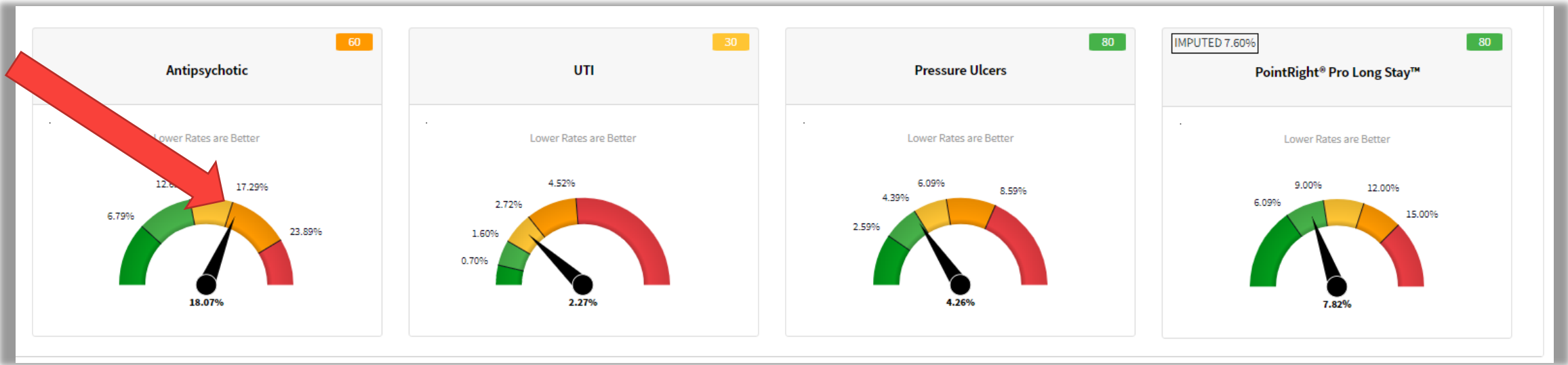
- ✓ Updated nightly for all new MDS submissions to PointRight
- ✓ Drill into numerator/denominator to determine which residents are triggering



# Identify Residents and Target Rates to Achieve Higher Tier



# Quarterly Performance – Quality Measures



Look for the lower hanging fruit!

# PointRight Quality Measures

Executive Dashboard / PointRight® QM / Facility Summary

## PointRight® QM: Facility Summary



Date Range:  To

Assessments:  Include All

Exclude PPS That Are Not Medicare Part A

Short-Stay MDS-Based



Long-Stay MDS-Based



+	Measure	Numerator ⓘ	Denominator ⓘ	Observed Rate ⓘ	Adjusted Rate ⓘ	PointRight® National Average ⓘ	PointRight® National Percentile ⓘ
+	Falls (Surveyor)	86	272	31.6%		39.5%	29
+	Falls with Major Injury	5	272	1.8%		2.9%	43
+	Pain	0	196	0%	0%	6.6%	0
+	Pressure Ulcers (High-Risk Residents)	12	160	7.5%		8.7%	49
+	UTI	0	209	0%		2.3%	0
+	Incontinence (Low-Risk Residents)	16	82	19.5%		49.5%	10
+	Catheter	0	198	0%	0%	1.4%	0
+	Physically Restrained	0	272	0%		0.1%	0
+	ADL Decline	19	185	10.3%		14.1%	39
+	Worsened Independent Movement	23	130	17.7%	15.5%	17.8%	49
+	Weight Loss	25	194	12.9%		5.9%	93 🚩
+	Depression	20	241	8.3%		8.1%	76 🚩
+	Antianxiety/Hypnotic	22	261	8.4%		17.1%	19

# PointRight Quality Measures

+	Antianxiety/Hypnotic (Surveyor)	5	197	2.5%		4.8%	43
+	Behavior (Surveyor)	21	256	8.2%		14.3%	39
+	Influenza Vaccine <a href="#">🔗</a>	264	269	98.1%		95.1%	54
+	Pneumococcal Vaccine	263	272	96.7%		92.1%	57
-	Antipsychotic <i>Percentage of long-stay residents who newly received an antipsychotic medication.</i> Lower Rates are better.	15	259	5.8%		13.5%	21
+	PointRight® Pro Long Stay™ Hospitalization <a href="#">🔗</a>	Residents	NA	8.0%	5.3%	13.2%	14

For measures where lower is better, Click on numerator to see a list of who triggered the QM.

# PointRight Quality Measures

## Antipsychotic (LS)

Facility Name: Northeast Nursing and Rehab (DD-PRNE5)  
 Reporting Period: May 2022 - Jul 2022  
 Displaying: Residents who triggered for the QM

Name
MLRRRPQ, LITORXV
NQIUB, KROQR
KKFYY, TOEIJR
FBNMGZW, ZULHOQU
YJEI, HQUCBM
HUWF, WBANHB
KQOE, TMRRIJ
EYPVHI, HZWQRY
JKNOXRHM, UHPCYWQ
FID, LIWUCWR

Showing 1 to 10 of 15 rows

## QM MDS Details for MLRRRPQ, LITORXV



Facility Name: Northeast Nursing and Rehab (DD-PRNE5)  
 Room Number: NS0600610A  
 Reporting Period: May 2022 - Jul 2022  
 Quality Measure: Antipsychotic (LS)

Search...

ARD	A0310A	A0310B	A0310F	I5250	I5350	N0410A
07/01/2022	03	99	99	0	0	7
04/03/2022	02	99	99	0	0	7
01/10/2022	02	99	99	0	0	7
10/20/2021	02	99	99	0	0	7
07/30/2021	03	99	99	0	0	7

**N0410A: Medications Received Antipsychotic**  
 0-7 Number of days the resident received antipsychotic medication in the last 7 days.

Showing 1 to 5 of 11 rows 5 rows per page

(\*) Represent MDS items that are inactive for that assessment.

# PointRight Quality Measures

+	Antianxiety/Hypnotic (Surveyor)	5	197	2.5%		4.8%	43
+	Behavior (Surveyor)	21	256	8.2%		14.3%	39
-	Influenza Vaccine ⓘ <i>Percentage of long-stay residents assessed and given, appropriately, the seasonal influenza vaccine.</i> Higher Rates are better.	264	269	98.1%		95.1%	54
+	Pneumococcal Vaccine	263	272	96.7%		92.1%	57
-	Antipsychotic <i>Percentage of long-stay residents who newly received an antipsychotic medication.</i> Lower Rates are better.	15	259	5.8%		13.5%	21
+	PointRight® Pro Long Stay™ Hospitalization ⓘ	Residents	NA	8.0%	5.3%	13.2%	14

For measures where higher is better, Click on denominator to see a list of who did NOT trigger the QM

\*Example: Vaccination Measures

# PointRight Quality Measures

**PointRight** Location: Northeast Nursing and Rehab (DD-PRNE5) Maria Arellano

## Influenza Vaccine (LS)

Facility Name: Northeast Nursing and Rehab (DD-PRNE5)  
Reporting Period: May 2022 - Jul 2022  
Displaying: Only residents who did not trigger for the

Name
VZZM, WAMQ
ARFUCOYDIDF, AJGUOYHYI
KKFYY, TOEIJR
QZFJRDSVNF, FDSUQXVTN
HZACISVHKF, XAADDX

Showing 1 to 5 of 5 rows

**PointRight** Location: Northeast Nursing and Rehab (DD-PRNE5) Maria Arellano

## Influenza Vaccine (LS)

Facility Name: Northeast Nursing and Rehab (DD-PRNE5)  
Reporting Period: May 2022 - Jul 2022  
Displaying: Only residents who did not trigger for the QM

Search...

Name	Room	ARD
VZZM, WAMQ	NS1001007P	06/22/2022
ARFUCOYDIDF, AJGUOYHYI	NS1501517P	06/21/2022
KKFYY, TOEIJR	NS1501509P	05/25/2022
QZFJRDSVNF, FDSUQXVTN	NS1101101P	05/18/2022
HZACISVHKF, XAADDX	NS0600602C	04/29/2022

Showing 1 to 5 of 5 rows

# ProLong Stay Hospitalization

+	Physically Restrained		0	38	0%		0.1%	0	
+	ADL Decline		6	32	18.8%		14.1%	76 🚩	
+	Worsened Independent Movement		6	28	21.4%	18.1%	17.8%	59	
+	Weight Loss	<p>This measure requires a 60-day lag time in order for hospitalization outcome data to be complete. Consequently, rates for the two most recent months are not final as soon as the rates are available. For example, the March 2020 rate is not final until May 2020. Please exercise discretion in using these rates before they are final. The numerator is the sum of hospitalizations of the four quarterly denominator populations, where hospitalizations are discharges directly from the SNF to an acute care hospital. Each quarterly denominator population consists of long stay residents present in the SNF on the first day of the quarter. (Long stay is a cumulative length of stay in the facility of more than 100 days.) The denominator for the measure is the sum of the four quarterly denominators in the 12-month measure period. Because this measure includes all payer types, it will only show data when the All Payer option is selected.</p>	0	31	0%		5.9%	0	
+	Depression		0	38	0%		8.1%	0	
+	Antianxiety/Hypnotic		3	32	9.4%		17.1%	22	
+	Antianxiety/Hypnotic (Surveyor)		2	25	8.0%		4.8%	81 🚩	
+	Behavior (Surveyor)		13	38	34.2%		14.3%	95 🚩	
+	Influenza Vaccine		36	37	97.3%		95.1%	60	
+	Pneumococcal Vaccine		13	38	34.2%		92.1%	97 🚩	
+	Antipsychotic		4	37	10.8%		13.5%	44	
-	PointRight® Pro Long Stay™ Hospitalization Rate of hospitalization of long-stay residents. Lower Rates are better. This rate has been risk adjusted.		number of stays in each quarter.	Residents	NA	7.2%	5.6%	13.2%	15

🚩 Indicates that the facility has a percentile of 75 or greater.



# ProLong Stay Hospitalization

**PointRight** Location: Northeast Nursing and Rehab (DD-PRNE5) Maria Arellano

PointRight® Pro Long Stay™ Hospitalization (LS) 🖨️

Facility Name: Northeast Nursing and Rehab (DD-PRNE5)  
 Reporting Period: May 2022 - Jul 2022  
 Displaying: Residents with Hospitalizations

- Resident List
- MDS History – IN/OUT Chronological Order

Gender: Female

☰ Search... 🔍

ARD	OBRA	PPS	Entry Date	Entered From	Admission Date	Discharge Date	Discharge Status	Length of Stay (Days)
6/24/2022	Quarterly	None	N/A	N/A	N/A	N/A	N/A	N/A
6/8/2022	None	PPS Discharge	N/A	N/A	N/A	N/A	N/A	N/A
5/25/2022	None	5-Day	N/A	N/A	7/23/2021	N/A	N/A	N/A
5/20/2022	Entry	None	5/20/2022	Acute hospital	N/A	N/A	N/A	N/A
5/17/2022	Discharge: Return Anticipated	None	N/A	N/A	N/A	5/17/2022	Acute hospital	70
3/25/2022	Quarterly	None	N/A	N/A	N/A	N/A	N/A	N/A
12/23/2021	Quarterly	None	N/A	N/A	N/A	N/A	N/A	N/A
12/8/2021	None	PPS Discharge	N/A	N/A	N/A	N/A	N/A	N/A
9/23/2021	Significant Change	5-Day	N/A	N/A	7/23/2021	N/A	N/A	N/A
8/26/2021	Admission	None	N/A	N/A	7/23/2021	N/A	N/A	N/A
8/20/2021	Entry	None	8/20/2021	Acute hospital	N/A	N/A	N/A	N/A
7/25/2021	Discharge: Return Anticipated	5-Day	N/A	N/A	7/23/2021	7/25/2021	Acute hospital	2
7/23/2021	Entry	None	7/23/2021	Acute hospital	N/A	N/A	N/A	N/A

Name
BOQQEL, DKXWEE
CAKEHHU, CFVMRKTG
EVLAFF, PPGMM
EYPVHI, HZWQRY
FEIR, GABHJCCW
FVMOSMNZ, GPTXSOA
HPGML, RFTZYND
KCDRJGQAJL, LECS
LQPMT, ZWWXD
NQIUB, KROQR

Showing 1 to 10 of 21 rows

# Best Way to Prevent Unnecessary Hospitalizations?

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- ✓ Ensuring Advance Directives in Place
- ✓ Identifying Residents with High Mortality Risk
- ✓ Identify Residents who are High Risk for Hospitalization
- ✓ Appropriate Referrals to Hospice

# RADAR® - Care Management Solution

Executive Dashboard / RADAR® / RADAR®: Resident Roster

## RADAR®: Resident Roster

08/12/2022 Search Show/Hide Filters [Reference Guide](#)

Short Stay **Long Stay**

### Current Residents

Showing 1 to 25 of 125 rows 25 rows per page

Resident Information								Descriptive Scales (Impairment)				Predictive Scales (Risk)				Complexity
Name	Room Number	ARD	OBRA	PPS	Admission Date	Level of Care	ADL	Cognition	Mood	Pain	Falls	Pressure Ulcer	Hospitalization	Mortality	Return to SNF	Discharge Planning
Fvmosmznz, Gpbxsoa	NS0500512P	06/22/2022	Significant Change	None	09/20/2021	Custodial	Red	Yellow	Green	Green	Green	Red	Red	Red	Red	100
Buvr, Uvxoeyx Hospice	NS0500509B	07/06/2022	Significant Change	None	06/03/2022	Custodial	Red	Red	Green	Green	Yellow	Red	Green	Red	Red	98
Ctfyd, Thmufq Hospice	NS0600619A	06/05/2022	Significant Change	None	05/04/2022	Custodial	Red	Red	Green	Green	Green	Red	Green	Red	Yellow	72
Ffrauytn, Jbwfwkqj Hospice	NS0500524B	05/29/2022	Significant Change	None	05/04/2022	Custodial	Red	Red	Green	Green	Green	Red	Green	Red	Red	98
Cxmcdi, Ljbbodb Hospice	NS0600616B	06/10/2022	Quarterly	None	05/11/2021	Custodial	Red	Red	Green	Green	Green	Red	Green	Red	Red	97
Dcszis, Npypcdq	NS0500529A	07/04/2022	Admission	None	06/22/2022	Custodial	Green	Red	Green	Green	Green	Red	Yellow	Red	Red	88
Gkffpbe, Dpndfbbxn Hospice	NS0500523A	05/27/2022	Admission	None	05/20/2022	Custodial	Green	Yellow	Green	Green	Green	Red	Green	Red	Red	50
Pxxfpord, Dushgp Hospice	NS0600610B	05/27/2022	Significant Change	None	02/27/2015	Custodial	Red	Red	Green	Green	Green	Red	Green	Red	Red	95
Wtpvn, Jkvqpto Hospice	NS0600609A	06/02/2022	Significant Change	None	11/08/2019	Custodial	Red	Red	Yellow	Green	Green	Red	Green	Red	Red	85
Kcvmqg, Dlhev	NS0600601A	07/12/2022	Quarterly	None	09/10/2018	Custodial	Red	Red	Yellow	Green	Green	Red	Red	Red	Red	100
Pryfv, Npntbby	NS0300317P	05/05/2022	Quarterly	None	02/09/2022	Custodial	Red	Red	Green	Green	Green	Red	Red	Red	Red	98

QUESTIONS?

