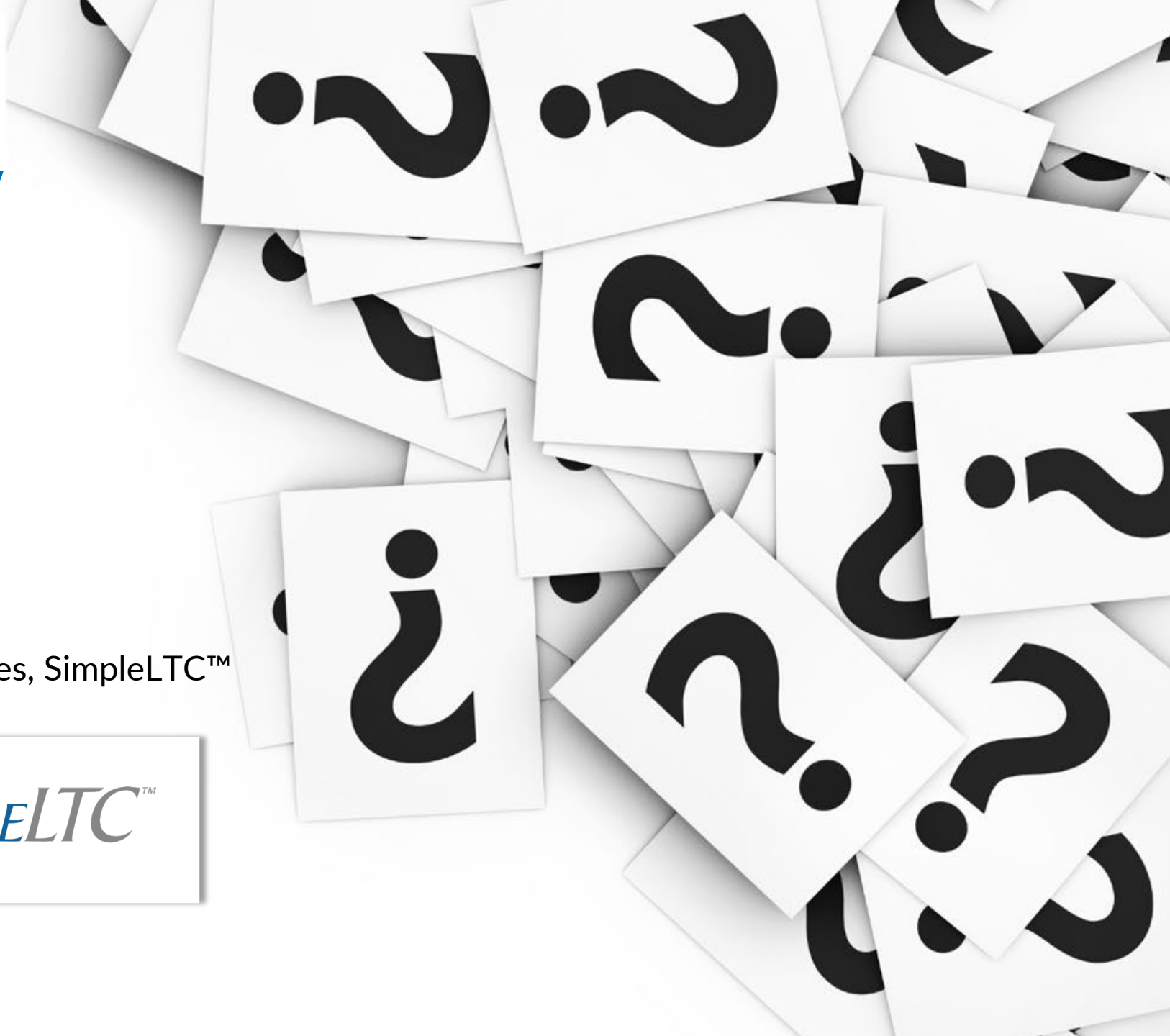# PBJ quarterly check-in

Prepping for PBJ quarterly success: Critical answers to your top questions

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SimplePBJ™ **SimpleLTC**™

Oct 27, 2021

Agenda

- Current Updates
- In the News
- Five-Star Staffing Calculations
- Back to Basics
- Live Q&A
- Best Practices

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Submit early, enter to win!

Submit your PBJ report to CMS by **November 5*** and get automatically entered to win one of five $100 Target gift cards.

*Must submit through SimplePBJ to qualify

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Current Updates - Public Health Emergency Extended

COVID IMPACT

The U.S. Department of Health and Human Services extended the COVID-19 Public Health Emergency (PHE) on Oct 15, 2021 for another 90 days.

https://www.phe.gov/emergency/news/healthactions/phe/Pages/COVDI-15Oct21.aspx

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Current Updates - Nurse Aides

COVID IMPACT

Is the waiver for PCAs still in place? Can I include temp nurse aides hired during COVID-19 in PBJ reporting?

Waivers for (a) the Training and Certification of Nurse Aides and (b) In-Service Training are currently still in effect. If you want to include the hours of these temporary aides, you need to classify them as Nurse Aide in Training (PBJ Job Title 11). You cannot include their hours as Certified Nurse Aide (PBJ Job Title 10).

https://www.cms.gov/files/document/summary-covid-19-emergency-declaration-waivers.pdf

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In the News - State Staffing Regulations

More than a dozen states have proposed and/or passed minimum staffing and/or reporting requirements.

States include: Arkansas, California, Connecticut, Florida, Illinois, Massachusetts, New Jersey, New York, Ohio, Oklahoma, Oregon, Rhode Island and Washington.
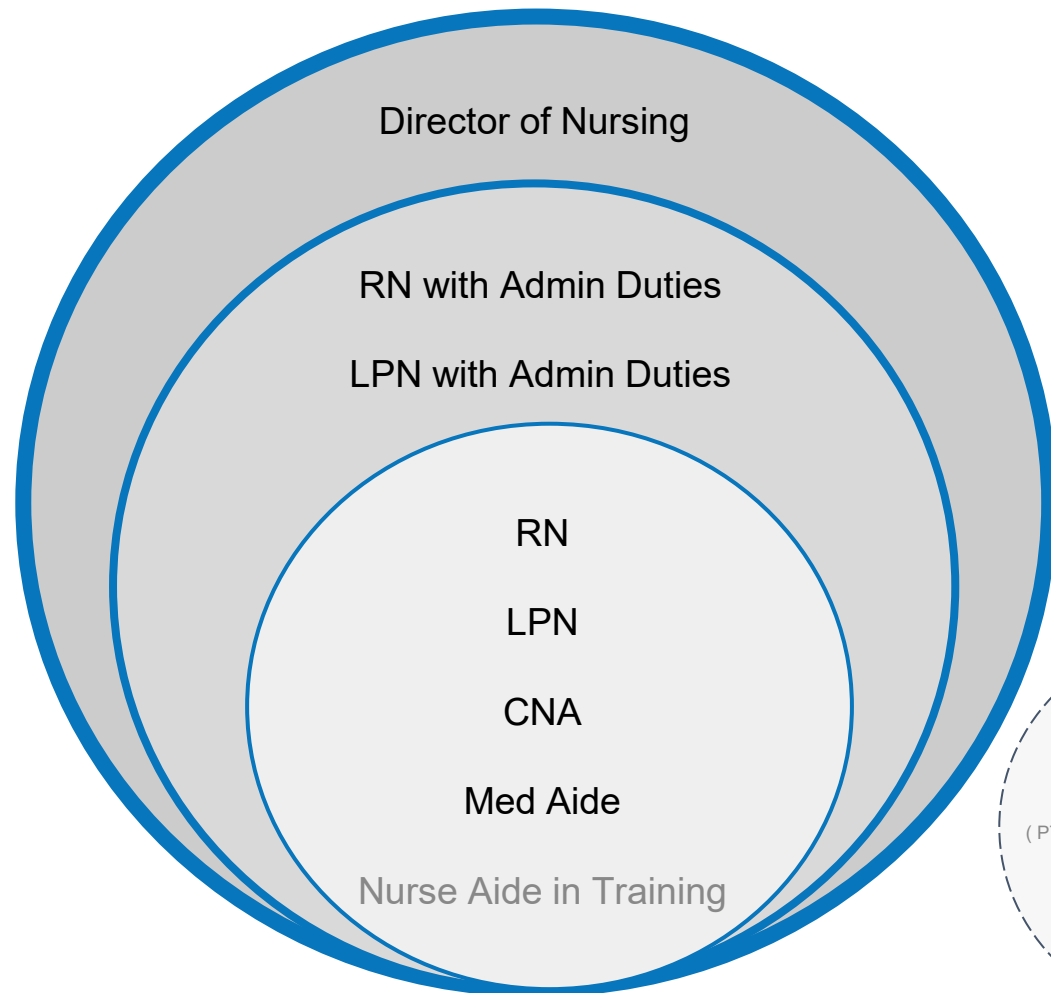
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In the News - State Staffing Regulations

✓ Vary by state
✓ Higher staffing minimums than defined by CMS
✓ More restrictive *direct care staff* definition
✓ Administrative and monetary penalties for non-compliance

Example: California requires 3.5 direct care service hours per patient day, of which a minimum of 2.4 hours per patient day must be performed by CNAs

- Direct caregiver means a registered nurse, as referred to in section 2732 of the Business and Professions Code; a licensed vocational nurse, as referred to in section 2864 of the Business and Professions Code; a psychiatric technician, as referred to in section 4516 of the Business and Professions Code; and a certified nurse assistant, or a nursing assistant participating in an approved training program, as defined in HSC section 1337, while performing nursing services as described in CCR Title 22, section 72309, section 72311, and section 72315.

- A licensed nurse serving as a minimum data set coordinator is a direct caregiver and CDPH will include the hours worked in producing resident assessments in the nursing hours computation. A person serving as the director of nursing services (DON) in a facility with 60 or more licensed beds or a director of staff development (DSD) is considered a direct caregiver when providing nursing services beyond the hours required to carry out the duties of these positions, as long as these additional nursing hours are separately documented.

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In the News - State Staffing Regulations

CMS PBJ REQUIREMENTS

Director of Nursing

RN with Admin Duties

LPN with Admin Duties

RN

LPN

CNA

Med Aide

Nurse Aide in Training

Physician | PA

Therapy
(PT | OT | Resp Therapist | Speech-Lang)

Psychiatrist | Mental Health

STATE-SPECIFIC REQUIREMENTS

Reportable Hours
Direct Care | Indirect Care
Administrative Duties | Non-Administrative Duties

Reportable Staff
Nursing Staff
Direct Care Staff

Reporting Frequency
Day | Week | Month
Shift - Day | Evening | Night

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In the News - State Staffing Regulations

Using PBJ Data for State Staffing Reporting Requirements

- Consider pulling out hours worked on the floor in nursing administrative positions (e.g., RN with Admin Duties and/or LPN/LVN with Admin Duties) and coding those hours as non-administrative (e.g., RN or LPN/LVN) for PBJ reporting

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Live Poll

In the News - State Staffing Regulations

TAKEAWAYS

- More states will mandate staff reporting requirements

- More states will adopt minimum staffing requirements

- Minimum staffing requirements will be tied to monetary penalties

- Minimum staffing requirements will be tied to rate reimbursement

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Five-Star Staffing Calculation

$$\text{Hours}_{\text{Adjusted}} = (\text{Hours}_{\text{Reported}}/\text{Hours}_{\text{Case-Mix}}) * \text{Hours}_{\text{National Average}}$$

Adjusted HPRD = (Reported HPRD / Case Mix HPRD) x National Average HPRD

HPRD = Hours Per Resident Day
HPRD = Total Hours / Total Census
HPRD = Total Hours / Average Daily Census / Number of Days in the Quarter

Variables Needed: ✓ Reported Nursing Hours
✓ Case-Mix Hours
✓ National Average Hours
✓ Census

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Five-Star Staffing Calculation

Currently: all RN positions equally weighted | all LPN and Aide positions equally weighted

RN staff = Registered Nurse Director of Nursing **+** Registered Nurse with Administrative Duties **+** Registered Nurse

Total Nursing Hours = Total RN **+** Total LPN **+** Total Aide

Registered Nurse Director of Nursing + Registered Nurse with Administrative Duties + Registered Nurse + Licensed Practical/Vocational Nurse with Administrative Duties + Licensed Practical/Vocational Nurse + Certified Nurse Aide + Nurse Aide Training + Medication Aide/Technician

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Five-Star Staffing Calculation

CMS PBJ Job Title	CMS PBJ Description of Service
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.
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.
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.

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Five-Star Staffing Calculation

Direct Care Staff: Direct Care Staff are those **individuals who, through interpersonal contact with residents or resident care management, provide care and services to allow residents to attain or maintain the highest practicable physical, mental, and psychosocial well-being.** Direct care staff does not include individuals whose primary duty is maintaining the physical environment of the long term care facility (for example, housekeeping).

- Reporting shall be based on the employee's primary role and their official categorical title. It is understood that most roles have a variety of non-primary duties that are conducted throughout the day (e.g., helping out others when needed). Facilities shall still report just the total hours of that employee based on their primary role.

- CMS recognizes that staff may completely shift primary roles in a given day. For example, a nurse who spends the first four hours of a shift as the unit manager, and the last four hours of a shift as a floor nurse. In these cases, facilities can change the designated job title and report four hours as a nurse with administrative duties, and four hours as a nurse (without administrative duties).

https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/NursingHomeQualityInits/Downloads/PBJ-Policy-Manual-Final-V25-11-19-2018.pdf

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How can I raise my Staffing Five-Star rating?

Holding census and acuity constant, increase your reported nursing hours

- ✓ Increase RN hours
- ✓ Increase total nursing hours

Holding RN and total nursing hours constant, lower your case-mix and/or census

- ✓ Drop in acuity
- ✓ Drop in census

$$\text{Hours }_{\text{Adjusted}} = (\text{Hours }_{\text{Reported}} / \text{Hours }_{\text{Case-Mix}}) * \text{Hours }_{\text{National Average}}$$

Overall Staffing Hours and Rating

RN Rating		Total Nurse Staffing Rating (RN, LPN and Nurse Aide)				
		1	2	3	4	5
		< 3.108	3.108 - 3.579	3.580 - 4.037	4.038 - 4.407	≥ 4.408
1	< 0.317	★	★	★★	★★	★★★
2	0.317 - 0.507	★★	★★	★★	★★★	★★★
3	0.508 - 0.730	★★	★★★	★★★	★★★	★★★★
4	0.731 - 1.048	★★★	★★★	★★★★	★★★★	★★★★
5	≥ 1.049	★★★	★★★★	★★★★	★★★★★	★★★★★

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

Add One Star to Overall Rating (if greater than health inspection rating)	Subtract One Star from Overall Rating

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Overall Five-Star Strategy

Staffing

Quality Measures

Five-Star Rating

Health Inspection

Overall Five-Star Rating Calculation

Step 1: Start with the health inspection rating.

Step 2: Add one star to the Step 1 result if the staffing rating is four or five stars and greater than the health inspection rating; subtract one star if the staffing rating is one star. The overall rating cannot be more than five stars or less than one star.

Step 3: Add one star to the Step 2 result if the quality measure rating is five stars; subtract one star if the quality measure rating is one star. The overall rating cannot be more than five stars or less than one star.

Note: If the health inspection rating is one star, then the overall rating cannot be upgraded by more than one star based on the staffing and quality measure ratings.

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Overall Five-Star Strategy

Live Poll

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Back to Basics - Meal Breaks

If an employee only takes 28 minutes for lunch (to not exceed the 30 minutes allowed) should I add the extra 2 minutes to their lunch? What if an employee works 8 hours but skips lunch? Do we still remove 30 min for lunch?

To be in compliance with CMS PBJ reporting requirements, you would need to subtract another 2 minutes to bring the total meal break time to 30 minutes. You must remove a minimum of 30 minutes for lunch regardless of whether the employee took a lunch break.

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Back to Basics - Meal Breaks

CMS PBJ Policy Manual, page 2-4:

Meal times, paid or unpaid, shall not be reported for any staff (exempt, nonexempt and/or contract). Facilities must deduct the time allotted for meals from each employee's daily hours. At a minimum: For each full shift that staff (exempt, nonexempt and/or contract) are paid to work, a 30 minute meal break must be deducted from their shift (whether or not the employee actually takes a meal break).

Audit note: The actual amount deducted should follow your internal work rules.

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Back to Basics - Meal Breaks

How do others handle RN hours when there must be 8 RN hours per day but a lunch break must be taken - which leaves a 7.5 hour day?

For PBJ reporting requirements, you would report 7.5 hours worked instead of 8 hours worked.

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Live Poll

Back to Basics - RN Hours

What are RN hours? How do I record RN hours?

Total RN hours are the sum of hours in the 3 RN categories defined in the PBJ Policy Manual: Director of Nursing hours + RN with Administrative Duties hours + RN hours. (Each is currently equally weighted.)

Hours should be recorded in the primary PBJ Job Title worked.

- Reporting shall be based on the employee's primary role and their official categorical title. It is understood that most roles have a variety of non-primary duties that are conducted throughout the day (e.g., helping out others when needed). Facilities shall still report just the total hours of that employee based on their primary role.

- CMS recognizes that staff may completely shift primary roles in a given day. For example, a nurse who spends the first four hours of a shift as the unit manager, and the last four hours of a shift as a floor nurse. In these cases, facilities can change the designated job title and report four hours as a nurse with administrative duties, and four hours as a nurse (without administrative duties).

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Back to Basics - RN Hours

What are the specific criteria to be considered as Direct Patient Care for nursing staff? Whose hours should be included besides floor staff?

Direct Care Staff: Direct Care Staff are those **individuals who, through interpersonal contact with residents or resident care management, provide care and services to allow residents to attain or maintain the highest practicable physical, mental, and psychosocial well-being.** Direct care staff does not include individuals whose primary duty is maintaining the physical environment of the long term care facility (for example, housekeeping).

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Back to Basics - RN Hours

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Back to Basics - RN Hours

Can DON hours be used for the RN coverage requirement?

- For PBJ reporting, the Director of Nursing can be included.

- For federal Rules of Participation, the Director of Nursing may only count toward the 8-hour RN requirement when the facility has an average daily occupancy of 60 or fewer residents and/or has received a waiver.

- For state reporting, it depends on state.

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Back to Basics - RN Hours

If a RN or LPN work as a CNA, would we change the code or leave them as their primary job?

For PBJ reporting, if the primary role worked for the shift is RN or LPN – but they performed some CNA functions – you could leave the job code as RN or LPN. If the primary role worked for the shift is CNA, you should change the job code from RN or LPN to CNA.

- Reporting shall be based on the employee's primary role and their official categorical title. It is understood that most roles have a variety of non-primary duties that are conducted throughout the day (e.g., helping out others when needed). Facilities shall still report just the total hours of that employee based on their primary role.

- CMS recognizes that staff may completely shift primary roles in a given day. For example, a nurse who spends the first four hours of a shift as the unit manager, and the last four hours of a shift as a floor nurse. In these cases, facilities can change the designated job title and report four hours as a nurse with administrative duties, and four hours as a nurse (without administrative duties).

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Live Poll

Back to Basics - Exempt Nursing Hours

My salaried staff pick up shifts on the floor but don't get any additional compensation besides their salary. Can I count the hours? What if they receive a bonus?

CMS caps the amount of allowable PBJ hours for Exempt Staff at 40/week. CMS only allows the reporting of hours in excess of 40 under the following conditions: (1) The payment must be directly correlated to the hours worked and must be distinguishable from other payments. (e.g., cannot be a performance-based or holiday bonus). (2) Additionally, the bonus payment must be reasonable compensation for the services provided.

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Back to Basics - Nursing Consultant Hours

Are nursing consultants supposed to count in PBJ? Can clinical nurse consultant time be counted in PBJ?

Hours for a nursing consultant would only be included if the consultant was performing duties at the facility involving resident care, not hours spent performing monitoring tasks (e.g., helping the facility prepare for survey or resident chart reviews).

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Back to Basics – Remote Nursing Hours

Can I include remote nurses for PBJ reporting?

While CMS has broadened the umbrella for remote work during the COVID Public Health Emergency, you can only include nursing hours that were worked at the physical facility for PBJ reporting.

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Back to Basics - Training Hours

Should in-service education/training time and orientation time in the classroom be excluded from PBJ?

Hours for staff who are attending training (either onsite or offsite) and are not available to perform their primary role (e.g., providing resident care) shall not be reported. Additionally, if another staff member fills in for the staff member participating in training, the hours for the staff member in training shall not be reported.

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Back to Basics - Contract Hours

What is contracted labor?

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). All contract and agency staff must each have a unique Employee ID when entered into the system.

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Back to Basics - Therapy Hours

Is there a difference between in-house therapy and contract therapy for PBJ?

All therapy hours must be included in PBJ. If in-house therapy staff are employees of your organization, they should be coded as Exempt (i.e., Salary) or Non-Exempt (i.e., Hourly). If therapy staff are contracted employees, they should be coded as Contract.

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Back to Basics – Temporary CNA Hours

Can I record rehabilitation employees working temporarily as CNAs?

The waiver for temporary Nurse Aides still requires that (a) facilities not use any individual working as a nurse aide for more than four months, on a full-time basis, unless that individual is competent to provide nursing and nursing related services and (b) facilities ensure nurse aides are able to demonstrate competency in skills and techniques necessary to care for residents' needs, as identified through resident assessments, and described in the plan of care.

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Back to Basics – MDS and PBJ

How does MDS affect PBJ?

(1) CENSUS

CMS automatically calculates your Average Daily Resident Census based on your MDS assessments.

- CMS assumes a resident is at your facility until you tell them otherwise (i.e., submit a resident discharge assessment)
- Missing discharge assessments will artificially inflate your Average Daily Resident Census - which can in turn can decrease your Staffing Five-Star rating

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Back to Basics – MDS and PBJ

How does MDS affect PBJ?

(2) ACUITY

CMS adjusts for case-mix using the daily distribution of residents by RUG-IV group compared to estimates from the CMS STRIVE Study.

- A higher case-mix will increase your denominator, which can in turn lower your Staffing Five-Star rating

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Back to Basics - Submission

How can I validate my PBJ data? How do I know all of my RN hours were captured in my submission file?

- Use PBJ software (like SimplePBJ) to validate your data before you submit

- Run the following CASPER reports to review the data you submitted
  - 1700D   Employee Report
  - 1702D   Individual Daily Staffing Report
  - 1702S   Staffing Summary Report
  - 1703D   Job Title Report
  - 1704D   Daily MDS Census Detail Report
  - 1704S   Daily MDS Census Summary Report

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Live Q&A

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Top PBJ Mistakes

1. Not removing meal breaks for all employees

2. Submitting overnight hours by shift start or end date

3. Underestimating the importance of census and acuity

4. Not auditing your data before submitting

5. Waiting until the last minute to submit

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PBJ Best Practices

- Know your data

- Know the PBJ rules

- Know how your Five-Star rating is calculated

- Know your competition

- Know your goals

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Thank you for attending!

Recording and handouts are available at

https://www.simpleltc.com/pbj-quarterly-check-in-q4-2021/

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