

WEBINAR | DEC 13, 2022

Making sense of the SNF data deluge

*Which metrics matter most &
how to focus on them*



Your Speaker



Steven Littlehale
Chief Innovation Officer
Zimmer Healthcare



The Cheese Has Moved

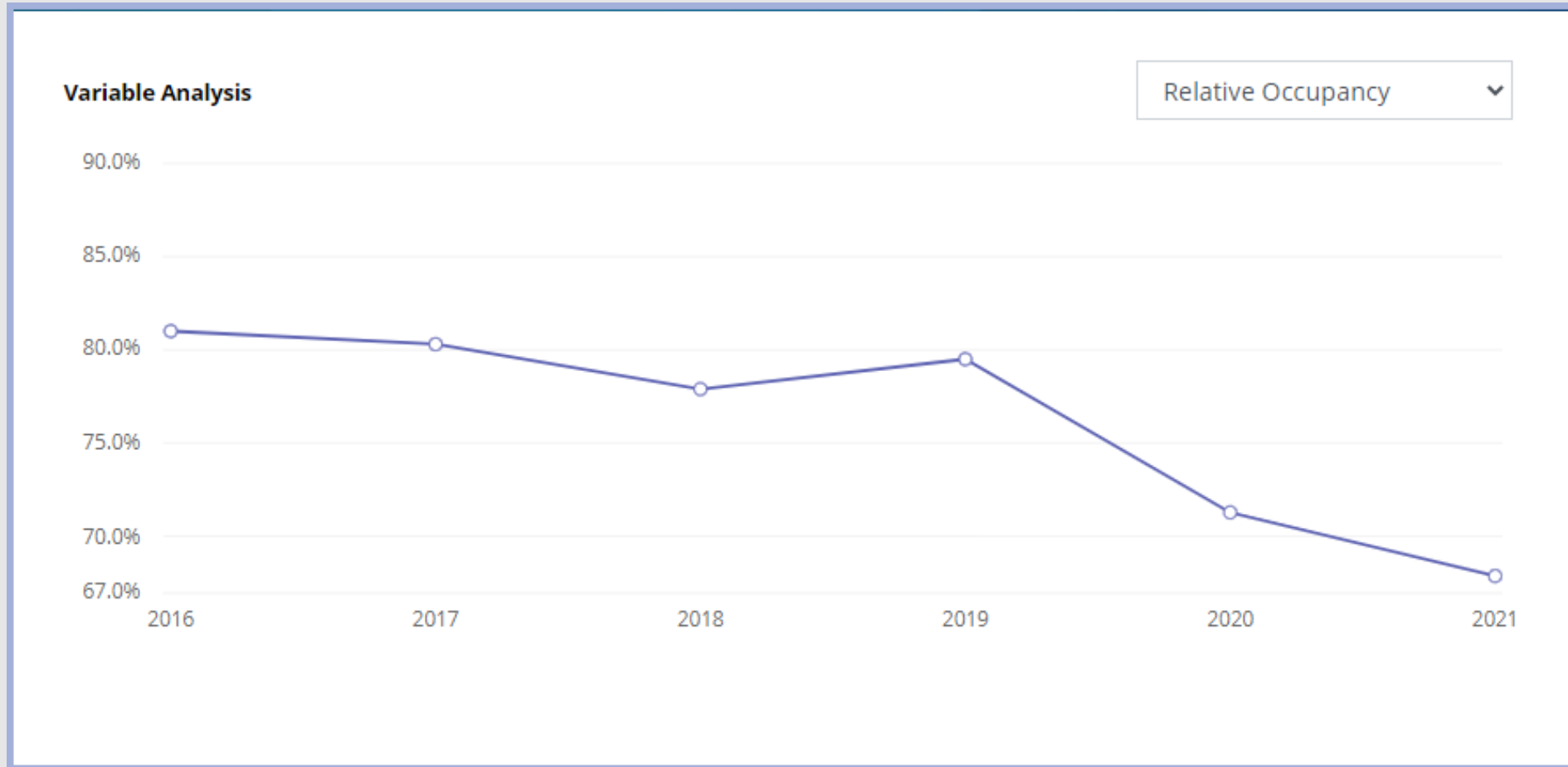
- The Consumers
- The Payors
- Other Stakeholders

And so has the data

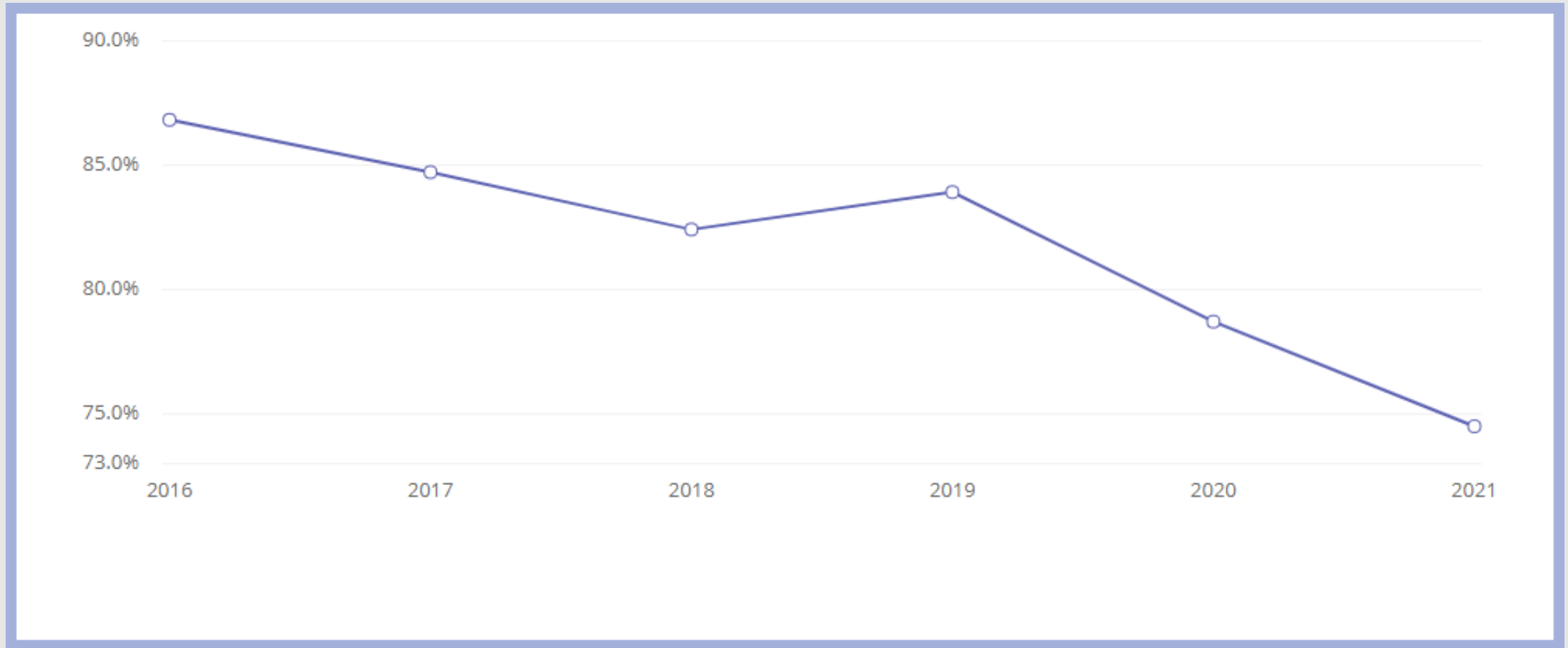


[This Photo](#) by Unknown Author is licensed under [CC BY-ND](#)

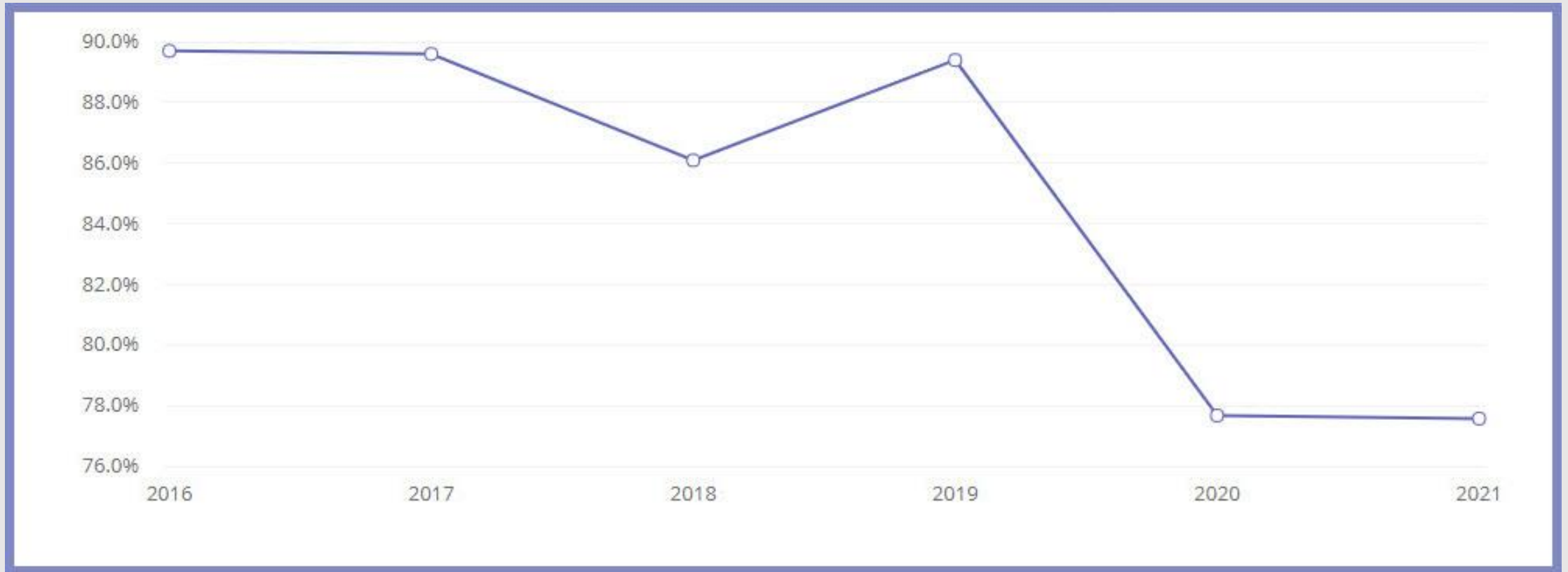
Nation: Relative Occupancy



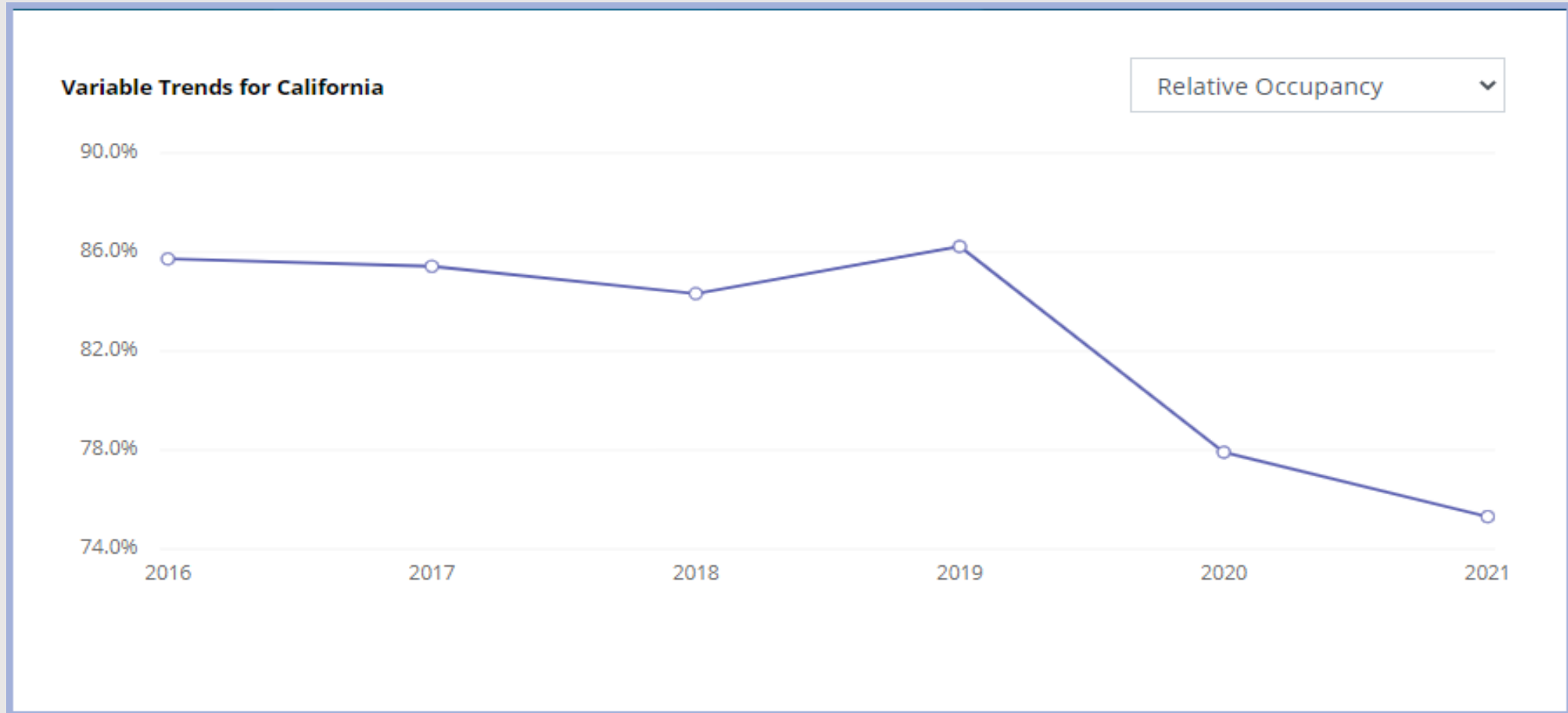
Kentucky: Relative Occupancy



New York: Relative Occupancy



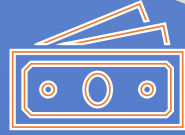
California: Relative Occupancy





Consumers

- Generational shifts
- Greatest Generation to Silent Generation to Baby Boomers



Payors

- FFS
- Managed Care
- CMMI
- ACOs
- Bundles
- VBP
- Managed Medicaid



Stakeholders

- REIT
- PE
- Politicians
- NYT
- Up/Down stream providers
- Anyone “At Risk”
- You!

And With These Changes, So Have the Rules, Data and Measures

Consumers

Social Media

CareCompare.gov

Payors

Their
Accountability
Metrics

Public Metrics

Stakeholders

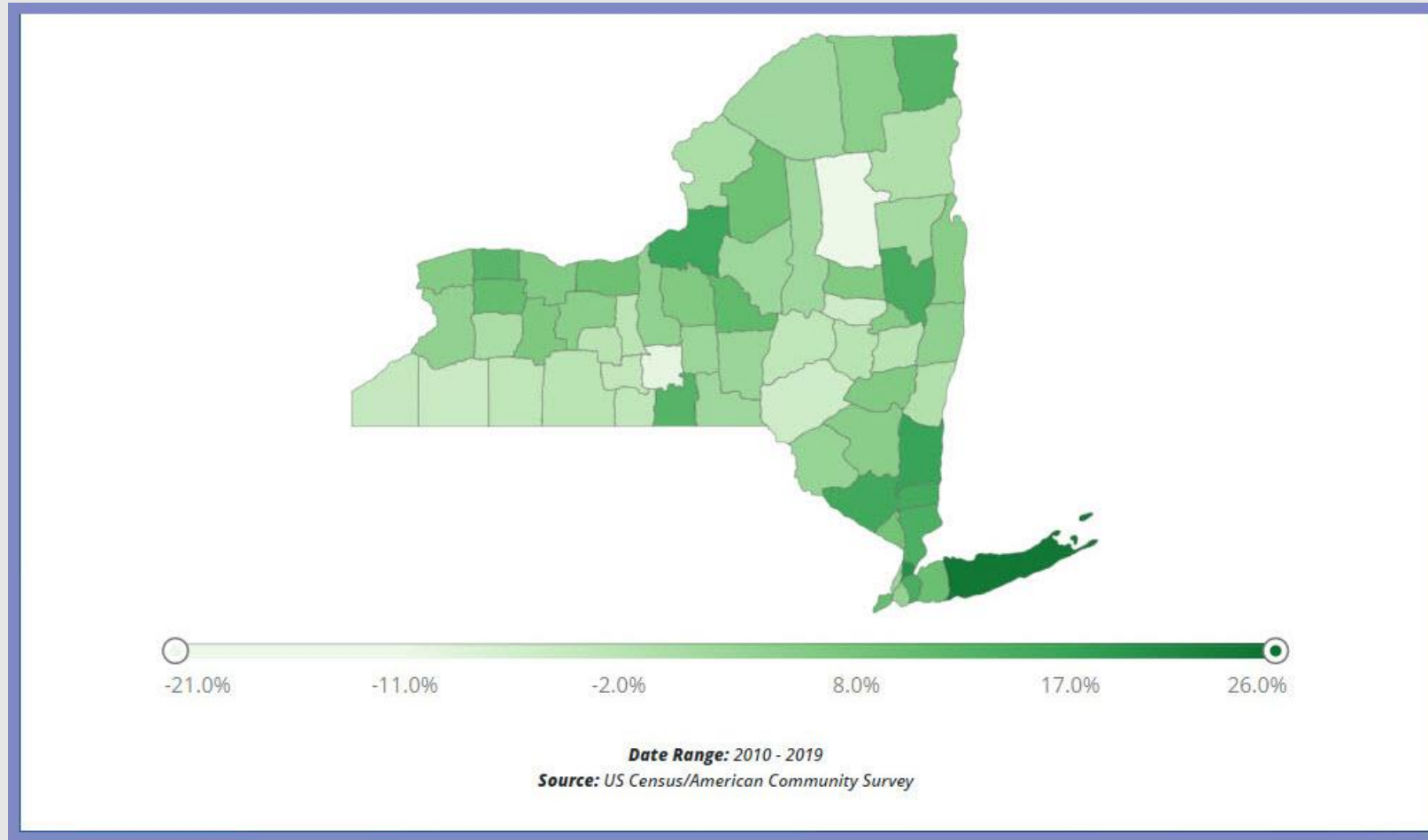
Five-Star

Social Media

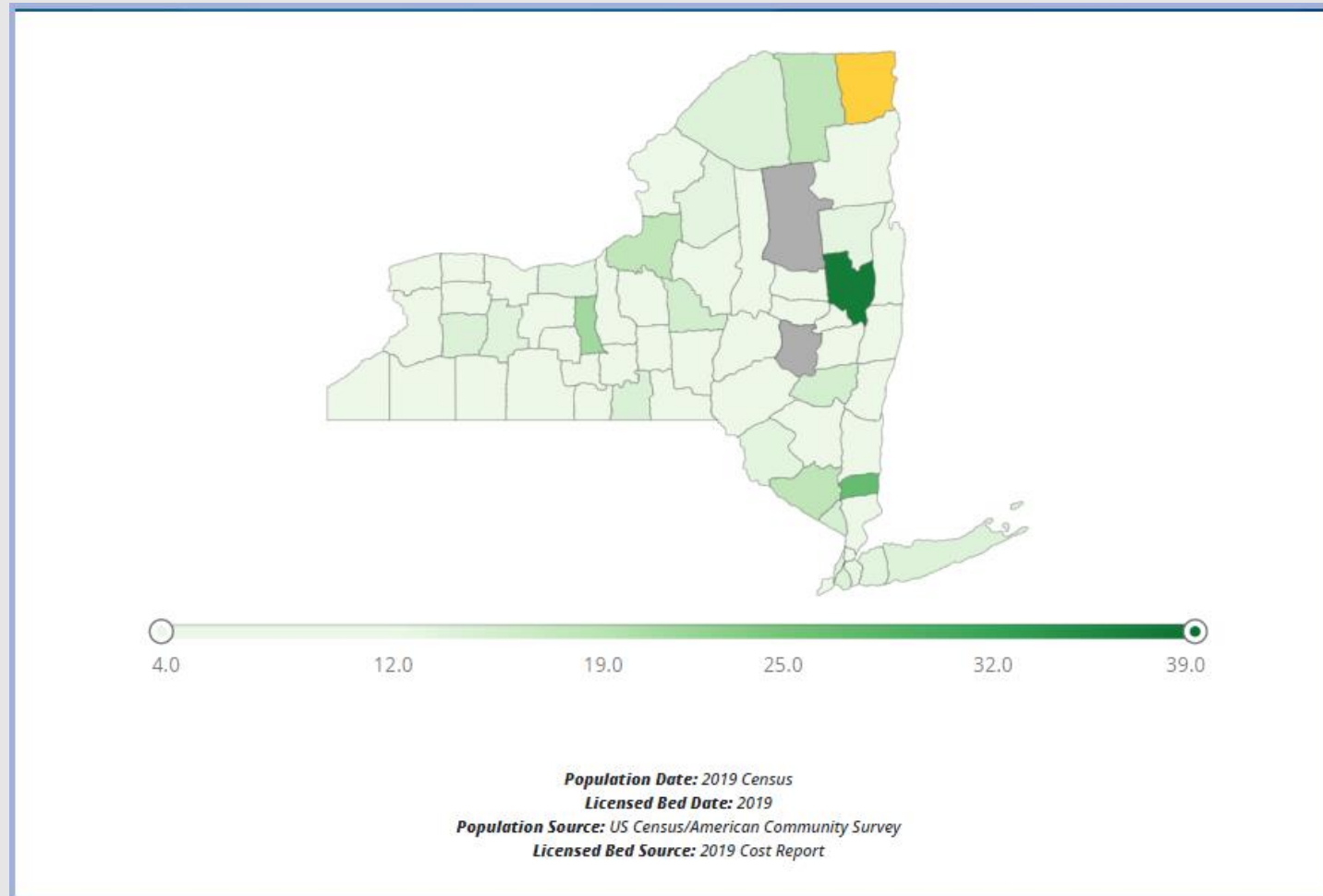
New York Demographics

Variable	2014	2015	2016	2017	2018	2019	2020	2021	2022
Number of Certified SNFs	-	626	623	622	619	618	616	613	-
Licensed SNF Beds	-	116,115	115,332	115,026	114,800	114,968	114,711	114,387	-
Saturation: Beds / 1,000 FFS Beneficiaries	-	19.7	19.8	19.9	19.9	19.9	19.9	20.0	-
SNF Occupancy %	90.4%	90.2%	90.3%	90.5%	90.4%	90.3%	78.6%	79.0%	81.7%
Relative Occupancy ?	-	-	89.7%	89.6%	86.1%	89.4%	77.7%	77.6%	-
Medicare Part A Share	-	11.7%	11.8%	10.8%	11.3%	11.8%	14.6%	-	-
Medicaid Share ?	-	68.7%	63.7%	57.7%	54.2%	52.6%	56.3%	-	-
Other Share	-	19.5%	24.4%	31.5%	34.5%	35.6%	29.1%	-	-
Medicare ALOS (days) ?	-	-	-	27.6	30.2	31.3	35.0	37.6	-
Medicare Advantage Enrollment %	-	37.3%	37.6%	39.6%	41.2%	42.3%	44.2%	46.8%	-
Medicare Advantage Growth Rate	-	2.5%	0.8%	5.3%	4.0%	2.7%	4.5%	5.9%	-
Special Focus Facilities (SFF)	-	<u>3</u>	<u>2</u>	<u>3</u>	<u>3</u>	<u>3</u>	<u>3</u>	<u>3</u>	-
Special Focus Facilities Candidates	-	-	-	-	-	<u>15</u>	<u>15</u>	<u>15</u>	-
SNF Ownership Changes	-	-	<u>24</u>	<u>27</u>	<u>15</u>	<u>10</u>	<u>5</u>	<u>1</u>	-

85+ Population Growth



85+ Population per SNF Bed

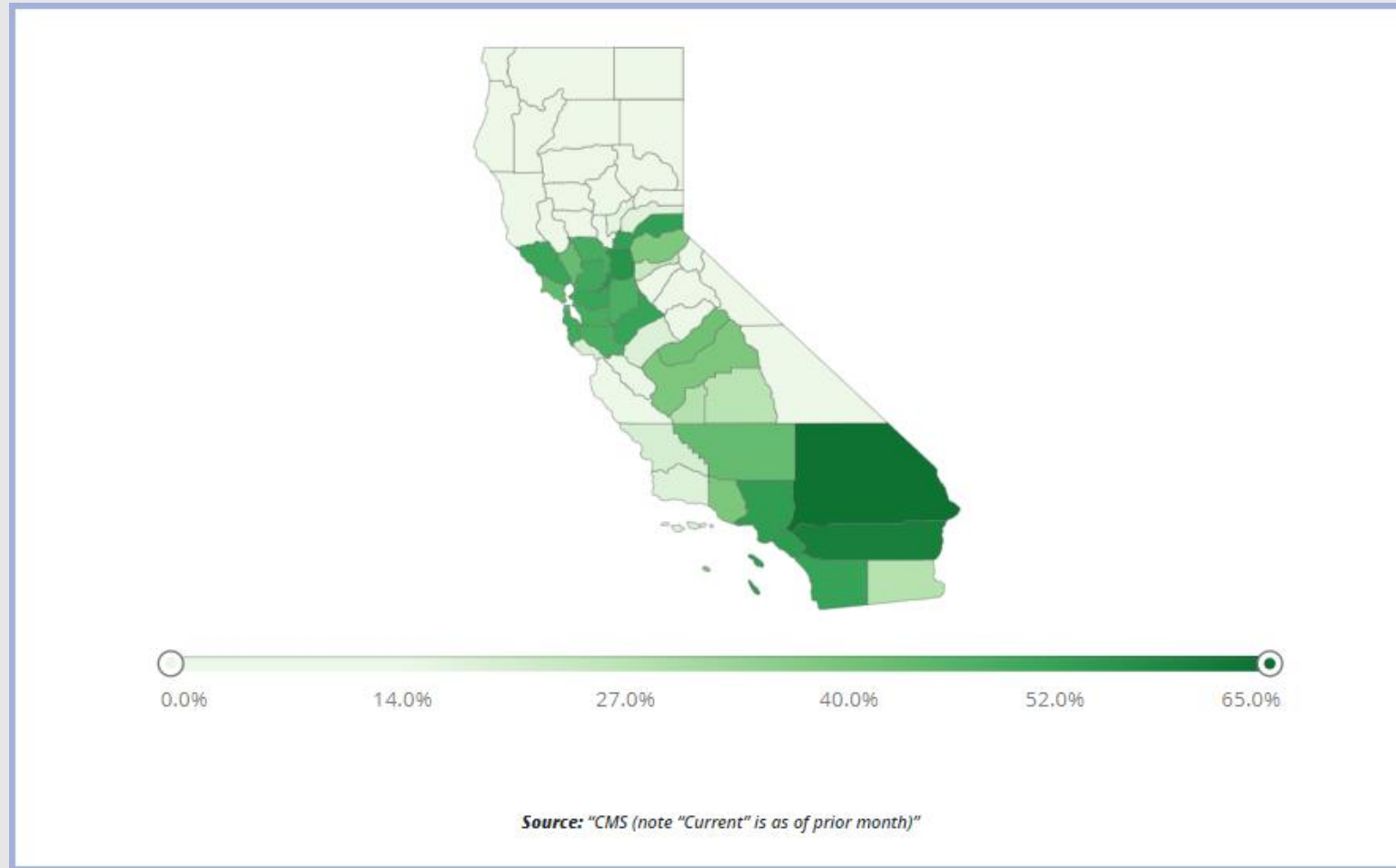


Projected Alzheimer's Rate by State and Change

State	Projected Number with Alzheimer's (in thousands)		Percentage Increase
	2020	2025	2020-2025
New Hampshire	26	32	23.1
New Jersey	190	210	10.5
New Mexico	43	53	23.3
New York	410	460	12.2
North Carolina	180	210	16.7
North Dakota	15	16	6.7
Ohio	220	250	13.6



Current MA Penetration Rate



MA Penetration Growth Rate (3-Year Trend)



Garnet Health Medical Center: SNF Referrals

Name	Distance (Miles Away) ^①	Amt Paid to SNF ^①	% Discharges to SNF ^①	Re-Admit from SNF ^①	Five-Star Rating
Highland Rehabilitation and Nursing Center	2.8	\$785,244	15.2%	23.8%	★
Middletown Park Rehab & Health Care Center	1.0	\$882,985	12.7%	9.4%	★★★★★
The Valley View Center For Nursing Care and Rehab	5.9	\$508,351	9.7%	33.3%	★★
Sapphire Nursing and Rehab at Goshen	4.4	\$554,099	9.4%	24.1%	★★
Campbell Hall Rehabilitation Center Inc	4.6	\$405,881	9.1%	37.0%	★
Delaware Valley Skilled Nursing & Rehabilitation C	19.7	N/A	8.0%	18.2%	★
Montgomery Nursing and Rehabilitation Center	9.8	\$402,007	7.5%	23.5%	★★★
Glen Arden Inc	4.9	\$153,425	N/A	N/A	★★★★★

Garnet Health Medical Center: MD Referrals

<u>MD Name</u>	<u>Amt Paid to SNF</u>	<u># Referrals to SNF</u>	<u>SNF ALOS</u>	<u>Hosp Re-Admit</u>
SINGH, BIKRAMJIT	\$122,096	18	23.3	62.5%
OSMAN, SAMI	\$311,326	16	28.8	14.3%
SMOTRA, SUMEET	\$281,320	14	31.3	25.0%
REZVIN, EUGENE	\$197,960	14	35.7	0.0%
SHARMA, RITA	\$213,821	13	41.1	14.3%
MYAT, KHIN	\$131,926	12	25.3	25.0%
QUILATAN, ROMEO	\$86,899	12	13.4	50.0%
MUSTAFA, NADIA	\$236,944	12	31.5	18.2%
LLUKANI, ELTON	\$152,275	11	38.0	0.0%
PARALKAR, MAYUR	\$150,421	11	23.2	44.4%

Garnet Health Medical Center

<u>Description</u>	<u>Amt Received by Hosp</u> ^①	<u>Total Medicare Claims</u> ^①	<u>Re-Admit</u> ^①	<u>SNF Re-Admit</u> ^①
Septicemia Or Severe Sepsis W/O Mv 96+ Hours W MCC	\$3,037,410	138	18.8%	19.4%
Respiratory Infections & Inflammations W MCC	\$2,666,896	114	12.3%	22.7%
Infectious & Parasitic Diseases W O.R. Procedure W MCC	\$961,920	19	31.6%	N/A
Septicemia Or Severe Sepsis W Mv 96+ Hours	\$957,747	15	0.0%	N/A

Garnet Health Medical Center

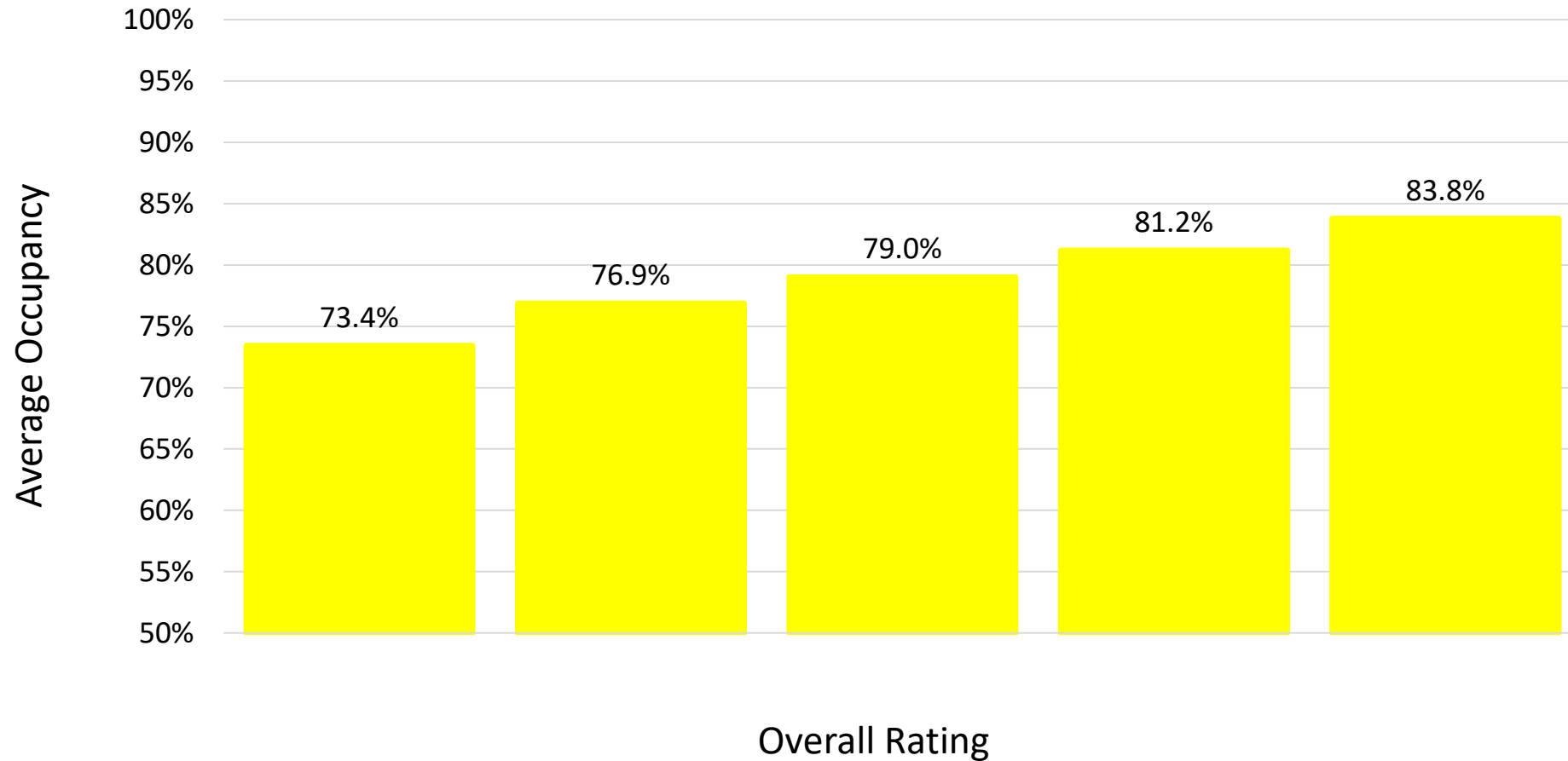
<u>Description</u>	<u>Amt Received by Hosp</u> ^⓪	<u>Total Medicare Claims</u> ^⓪	<u>Re-Admit</u> ^⓪
Cardiac Arrhythmia & Conduction Disorders W MCC	\$160,092	13	38.5%
Nonspecific Cerebrovascular Disorders W MCC	\$203,028	12	33.3%
Infectious & Parasitic Diseases W O.R. Procedure W MCC	\$961,920	19	31.6%
Renal Failure W CC	\$159,879	18	27.8%
Misc Disorders Of Nutrition, Metabolism, Fluids/Electrolytes W/O MCC	\$106,234	15	26.7%
G.I. Hemorrhage W CC	\$294,882	27	25.9%
Simple Pneumonia & Pleurisy W CC	\$91,998	12	25.0%
Cellulitis W/O MCC	\$103,268	12	25.0%
Chronic Obstructive Pulmonary Disease W MCC	\$141,782	13	23.1%
Pulmonary Edema & Respiratory Failure	\$670,503	50	20.0%
Heart Failure & Shock W MCC	\$751,828	63	19.1%



A close-up photograph of a steaming bowl of soup. The bowl is dark and filled with a light-colored, bubbling liquid. A single green leaf garnish is visible on the left side of the bowl. A large plume of white steam rises from the bowl, filling the upper half of the frame. The background is dark, making the steam and the bowl stand out.

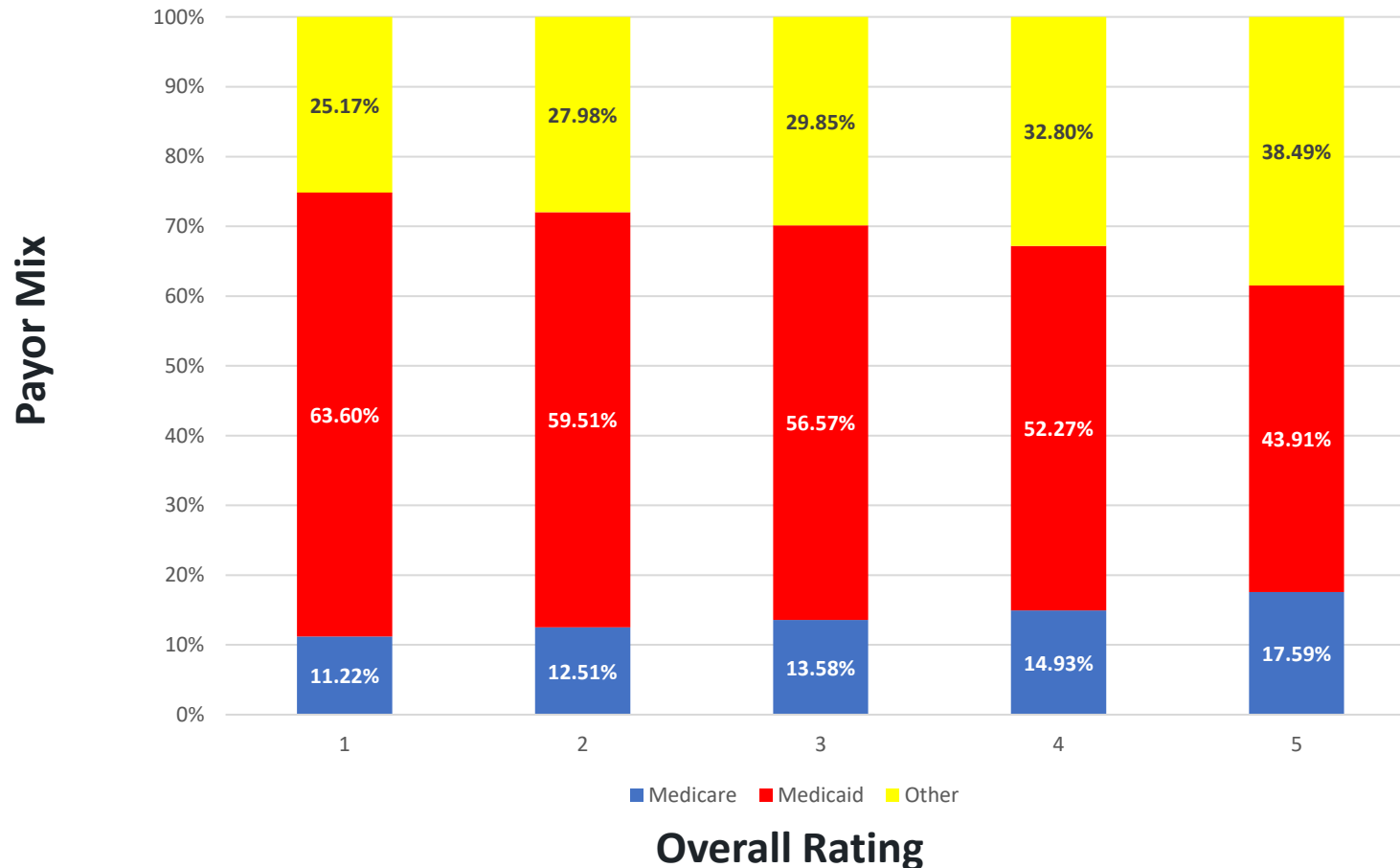
Five-Star and Staffing

As Overall Star Rating Increases, So Does Average Occupancy



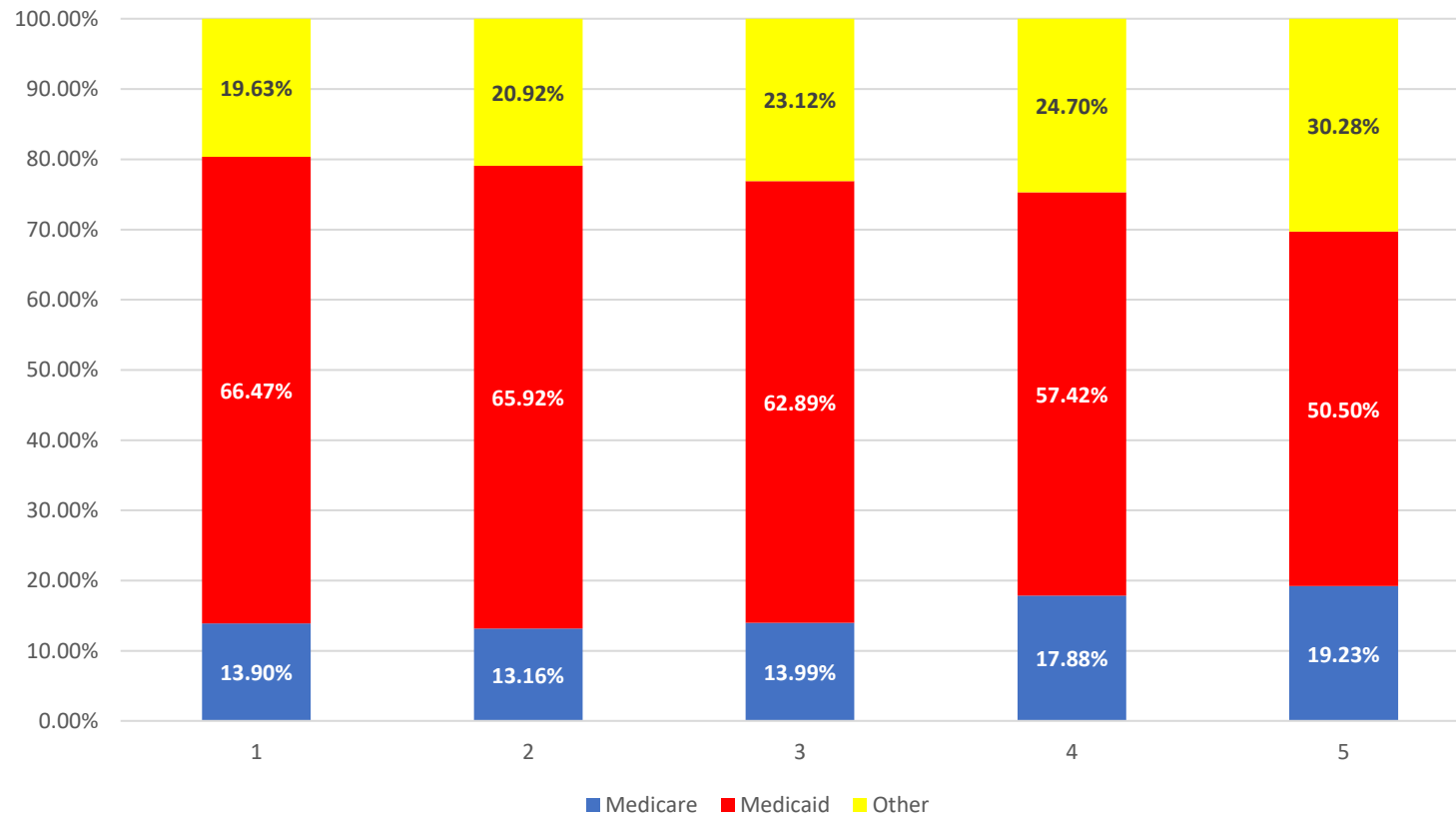
As Overall Star Rating Increases, SNFs Become Less Dependent on Medicaid...

National Payer Mix by Overall Rating

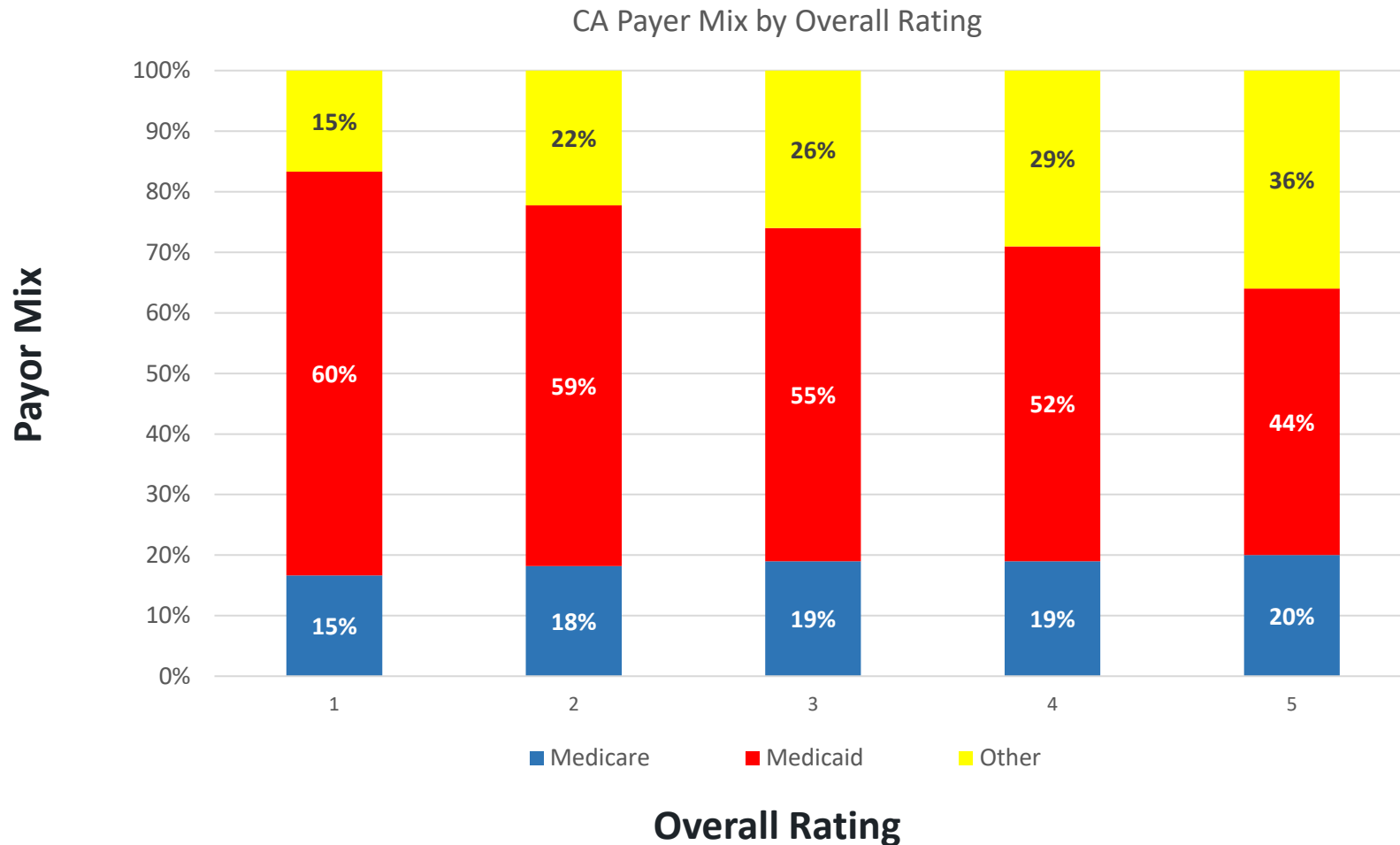


As Overall Star Rating Increases, SNFs Become Less Dependent on Medicaid...

NY State Payer Source and Overall Rating



As Overall Star Rating Increases, SNFs Become Less Dependent on Medicaid...



Five-Star Has Been Adopted in Unexpected and Unintended Ways

Intended Uses

- Consumer placement
- Consumer monitoring of care

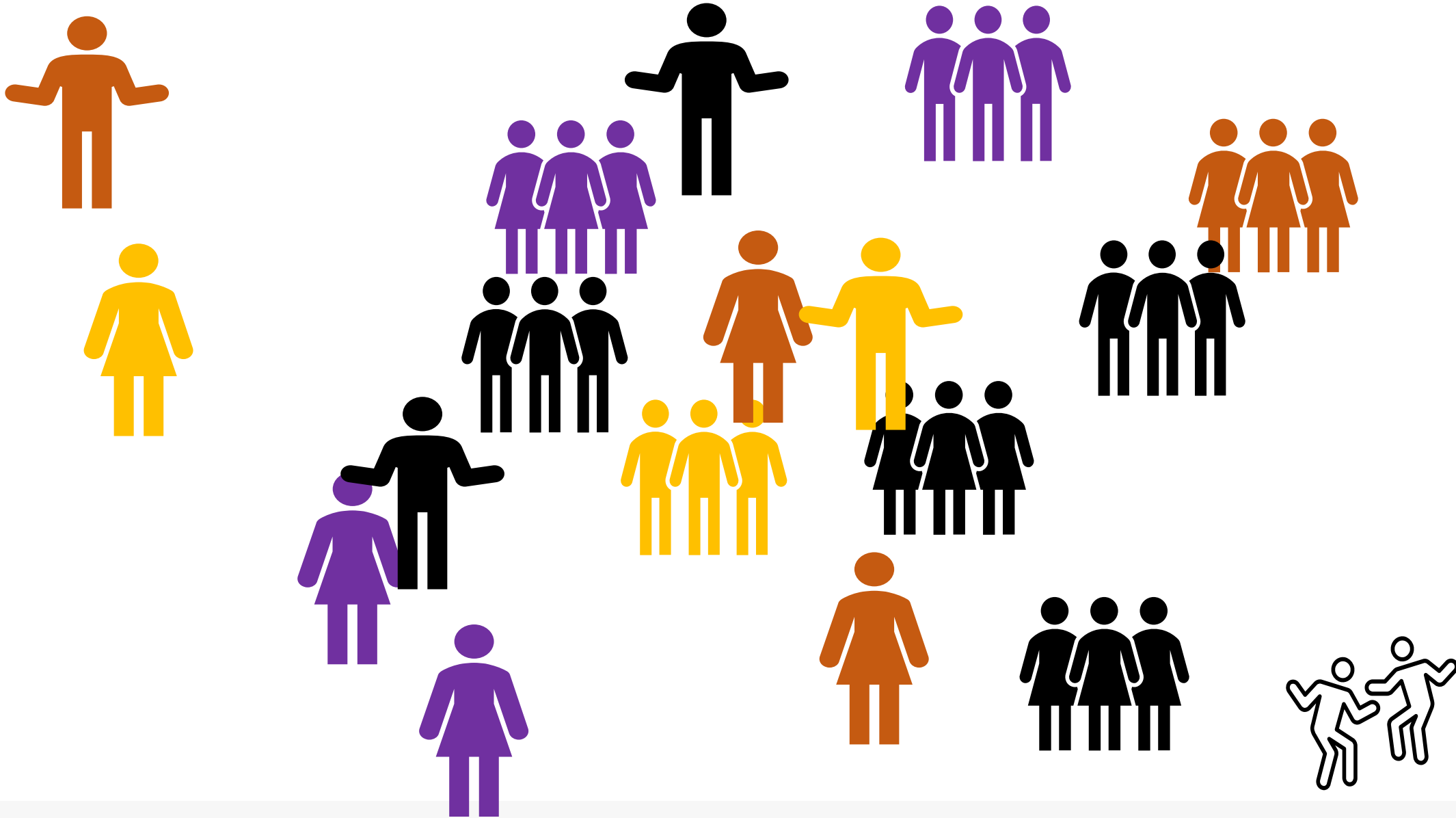
Unintended Uses

- APM (ACOs, Bundles)
- Lending/HUD
- Commercial payers/MCOs
- DOJ/OIG
- Plaintiff/Defense attorneys
- REITs
- Media/Politicians

It's All About the Three-Day Waiver

- **Medicare Requirement:**
Qualifying inpatient hospital stay of 3 consecutive days (midnights) or more (plus additional criteria)
- **Waiver:**
For eligible nursing homes, CMS will waive the requirement for a 3-day inpatient hospital stay prior to a Medicare-covered, post-hospital extended care service for eligible beneficiaries

Most APMs have the waiver and require that nursing homes have a three-Stars or more to participate



“

I have seen hospital discharge planners go to CareCompare and show families a nursing home's Five-Star ratings. But they specifically have them look at staffing ratings


”

Six Staffing Measures (1 / 2)

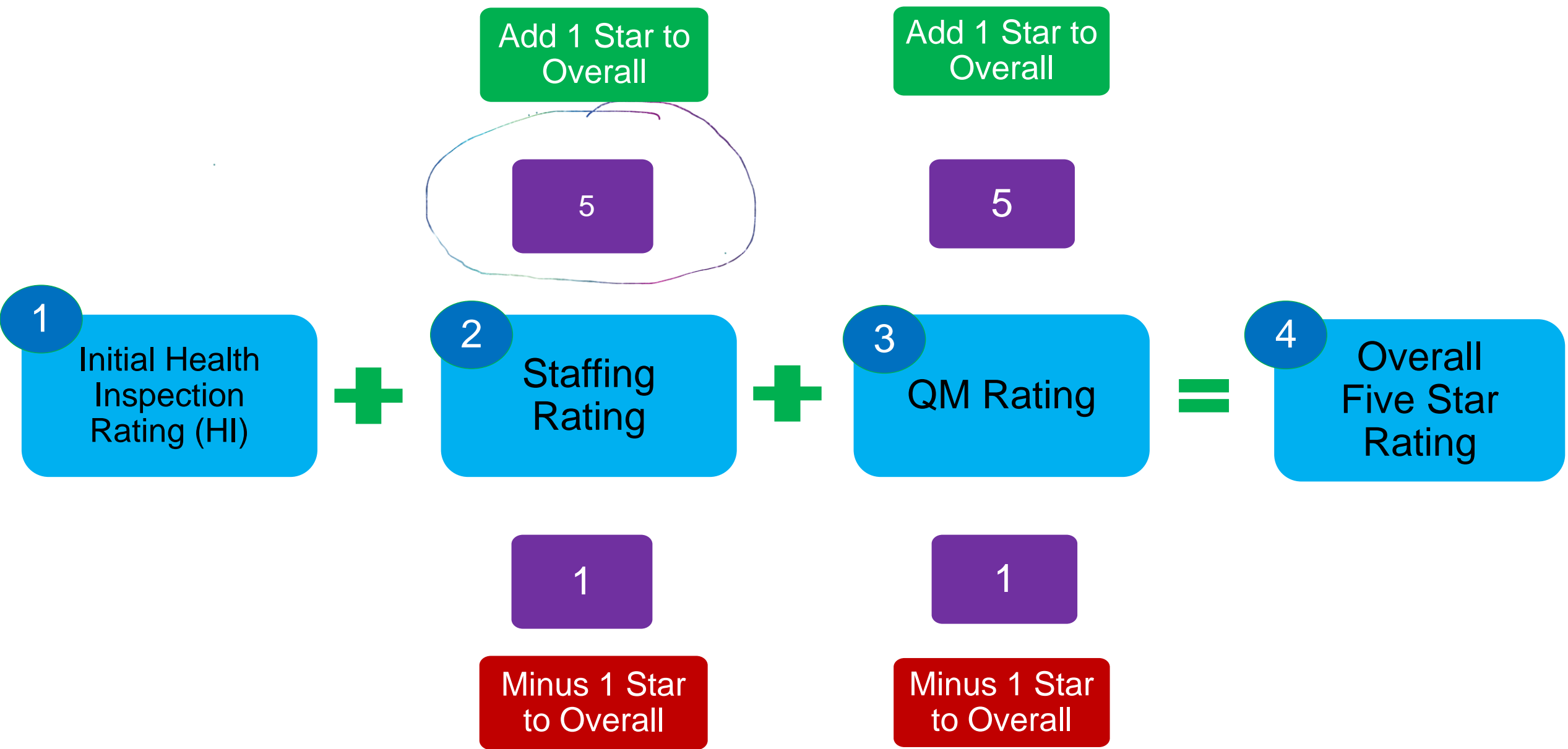
1. Case-mix adjusted total nursing hours per resident day (registered nurse (RN) + licensed practical nurse (LPN) + nurse aide hours) for a quarter averaged across all days (weekdays and weekends)
2. Case-mix adjusted RN hours per resident day for a quarter, averaged across all days (weekdays and weekends)
3. **Case-mix adjusted total nursing hours per resident day (RN + LPN + nurse aide hours) for a quarter averaged across all weekend days (*just* Saturdays and Sundays)**

Six Staffing Measures (2 / 2)

4. The percentage of total nursing staff that left the nursing home over a twelve-month period.
5. The percentage of RNs that left the nursing home over a twelve-month period.
6. The number of administrators that left the nursing home over a twelve-month period.



And if that
wasn't
enough!



DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
7500 Security Boulevard, Mail Stop C2-21-16
Baltimore, Maryland 21244-1850



Center for Clinical Standards and Quality/Quality, Safety & Oversight Group

Ref: QSO-23-01-NH

DATE: October 21, 2022
TO: State Survey Agency Directors
FROM: Director, Quality, Safety & Oversight Group (QSOG)
SUBJECT: Revisions to Special Focus Facility (SFF) Program

“ Additionally, because of the importance of nursing home staffing, CMS is informing State Survey Agencies (SAs) to consider a facility’s staffing levels data when selecting SFFs from the SFF candidate list. ”

A Time to Look Inward

GUEST COLUMNS

Staffing challenges: A time to look inward



STEVEN LITTLEHALE

SEPTEMBER 16, 2022

SHARE ▾



Steven Littlehale

As the Biden administration marches toward some type of minimum staffing requirement for nursing homes, it's easy for providers to feel like helpless, angry victims. Even as a proponent of acuity-based staffing standards in some form, I too am annoyed.

How can we authentically work toward [nursing home reform](#) if our efforts are based upon decades-old staffing studies that don't acknowledge the diversity of residents, specialization of providers and caregivers, and

technologies in nursing homes today?

SNF VBP Program Expansion: Total Nursing Hours per Resident Day Staffing (Total Nurse Staffing) - FY 2026 Program Year

- This year's final Rule CMS is finalizing the adoption of three new measures into the SNF VBP Program – two claims-based measures and one **payroll-based journal staffing measure**.
- Propose to report an average rate of total nurse staff per resident day across available quarters in the 1-year performance period



Expanding the VBP

In the FY 2023 Proposed Rule CMS requested input on potential measures it might add to the SNF VBP in the future

Requests for Information (RFI) for SNF VBP

- Staffing Turnover Measure that consists of the percent of total nurse staff that have left the SNF over the last year
- National Healthcare Safety Network (NHSN) COVID-19 Vaccination Coverage Among Healthcare Personnel Measure

What makes outcomes better? Two Needs with One Deed

1. MDS Accuracy
2. ARD Planning
3. Supportive Documentation
4. Proper QAPI



Two Needs with One Deed

4. Evidence-Based P+P
5. Reduction in Duplication
6. “Patients over Paperwork”
7. Accurate PBJ submissions



**ARE YOU SATISFIED WITH YOUR
FIVE-STAR RATING?**



ZIMMET HEALTHCARE
SERVICES GROUP, LLC

INTRODUCING

ZHSG Five-Star Improvement and Oversight Service

FIVE-STAR IS YOUR BOTTOM LINE

Five-Star directly influences provider referrals - a superior rating drives participation in preferred networks and select CMS innovation programs. Your facility's score can make or break relationships across an array of facility stakeholders and, as importantly, shapes the public's first impression of your brand.

YOU CAN DO BETTER AND SUSTAIN A HIGHER RATING!

Zimmet Healthcare has combined our advanced analytics with clinical/operational guidance to help our clients

- Gave back 30min per CNA per shift
- Reduced false triggers in QMs
- Strategic staffing to resident
- Excellence in PBJ accuracy
- Survey readiness 24/7
- Paperwork reduction!

Making Sense of the Data Deluge!

- Know your role in Five-Star
- Influence staffing metrics
- Never forget WHY





ZIMMET HEALTHCARE SERVICES GROUP, LLC

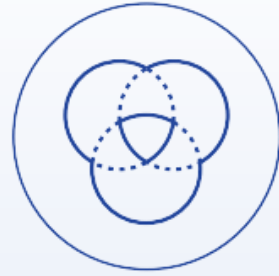
www.zhealthcare.com

(877) SNF-2001

info@zhealthcare.com



ZIMMET HEALTHCARE SERVICES GROUP, LLC



Due Diligence & Transaction Advisory



Compliance



Clinical Reimbursement & Quality Reporting



Billing & Cost Reporting



Audit Defense

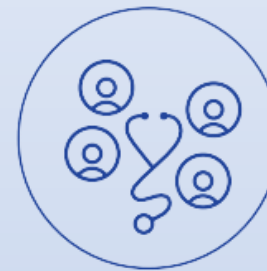
Expanding our Post-Acute Services Group



Five Star Service



Litigation Support



Managed Care

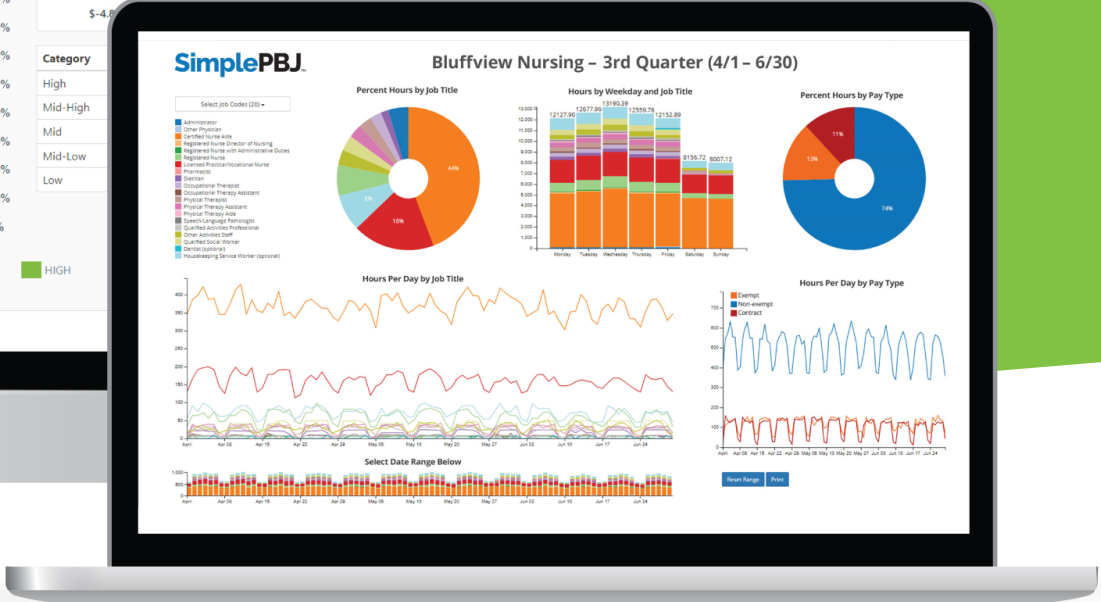
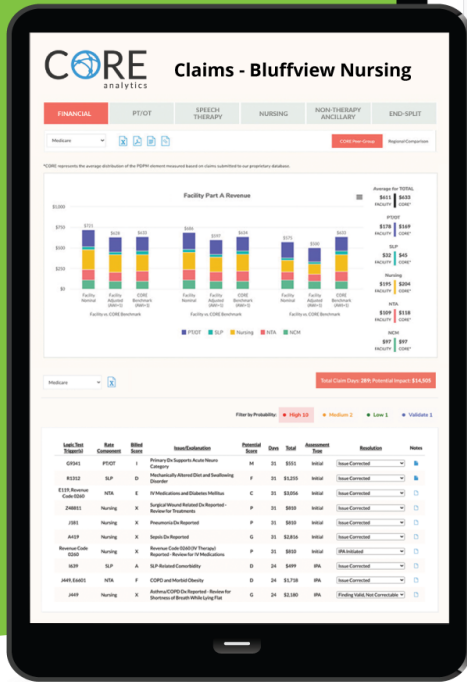


Strategy & Analytics



Z-Radar

CORE Analytics joins the Simple/Netsmart family!



simple.
a Netsmart solution

+ CORE
analytics

=

The first **complete** view of
Claims + MDS + Staffing

For your free demo, email sales@simpleltc.com

Questions



Thanks for attending!

Zimmet Healthcare Services Group, LLC
200 Route 9 North, Suite 500
Manalapan, NJ 07726
877.SNF.2001 / 732.970.0733

info@zhealthcare.com

www.zhealthcare.com

