

# Quarterly PBJ Webinar

The latest answers on PBJ,  
staffing, and more before  
the **May 15 deadline**

## Q2 2024 Edition

THU, APR 25 | 11 AM CT

**SimplePBJ**<sup>™</sup>



**Netsmart**



# PBJ SUBMISSION GIVEAWAY

Submit your PBJ early & you could win!

*The PBJ deadline is Wednesday, May 15*



Submit your PBJ data through SimplePBJ by midnight on May 8 for a chance to win

1<sup>st</sup> prize: \$100 Visa gift card (*use anywhere*)

2<sup>nd</sup> prize: 40 oz. Stanley tumbler (*choose your color*)

*Winners announced May 13*



# Your Speakers



**Nate Hoard**

*Senior PBJ Specialist – Simple*



**Josh Miller**

*Client Success Director – Simple*

# Agenda

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- New PDPM Case-Mix Calculation
- CMS Finalizing “Minimum Staffing Standards” Rule
- Additional Requirements Added to the Facility Assessment
- Minimum HRD and Onsite Nursing Requirements
- Exemptions to the New Rule
- CMS’ Nursing Home Staffing Campaign
- Live Q&A

# Live Poll



What component of your PBJ data are you the most confident in?

# New PDPM Case-Mix Calculation

- In July, Five-Star Reports will start showing HRD staffing scores based on a new PDPM Case-Mix calculation
- This is due to the change to the MDS assessment in October 2023
- The April, May, and June Five-Star Reports will show frozen HRD measures from what was calculated in January 2024
- The 3 HRD staffing measures are:
  - Adjusted Total Nurse Staffing
  - Adjusted RN Staffing
  - Adjusted Weekend Total Nurse Staffing

# New PDPM Case-Mix Calculation

Now Simple customers who subscribe to SimplePBJ *and* SimpleAnalyzer can see an enhanced HRD prediction of the new calculations:

☖ Total Nurse Hours Per Resident Day

Total nursing hours per resident day

Average Resident Census  
95.0000

(Manually Entered in SimplePBJ)

		Aides	LPNs	RNs	Total Nursing
<b>Reported Hours</b>	<b>Actual</b>	29,436.00 <input type="text"/> <input type="button" value="↺"/> <input type="button" value="↻"/>	9,367.25 <input type="text"/> <input type="button" value="↺"/> <input type="button" value="↻"/>	1,857.50 <input type="text"/> <input type="button" value="↺"/> <input type="button" value="↻"/>	40,660.75
<b>Staffing Cost</b>	<b>Current Cost</b>	\$412,104.00 <small>\$14.00</small>	\$206,079.50 <small>\$22.00</small>	\$78,015.00 <small>\$42.00</small>	\$696,198.50
<input type="button" value="☑ Update Staff Salary"/>	<small>Average Wage</small>				
<b>Staffing Percent</b>	<b>Current Percent</b>	72%	23%	5%	100%
<b>Reported HRD</b>		3.368 <small>(Reported Hours / Census / Days)</small> 3 hrs 22 mins	1.072 1 hr 4 mins	0.213 13 mins	4.652 4 hrs 39 mins
<b>Case-Mix HRD</b>	<b>simple. Live Case-Mix</b>	1.9698235535481978 1 hr 58 mins <small>(Last Updated 04/09/2024)</small>	0.7515707025662323 45 mins	0.415355996609 <input type="text"/> <input type="button" value="↺"/> <input type="button" value="↻"/>	3.136750252723 <input type="text"/> <input type="button" value="↺"/> <input type="button" value="↻"/> 3 hrs 8 mins
<input type="button" value="⬇ Test Previous Actual"/>	<b>Reported to Case-Mix HRD Ratio</b>	1.710 <small>(HRD Reported / HRD Case-Mix)</small>	1.426	0.513	1.483
<input type="button" value="⬇ Test Live Simple Case-Mix"/>	<b>National Average Case-Mix HRD</b>	2.0915 2 hrs 5 mins <small>(Mean of national average from 2024 1st Quarter, 2023 4th Quarter, and 2023 3rd Quarter)</small>	0.798 48 mins	0.44101 26 mins	3.33051 3 hrs 20 mins
<b>Adjusted HRD</b> <input type="button" value="i"/>				0.226 14 mins	4.939 4 hrs 56 mins

Hours Adjusted HRD = (Hours Reported HRD / Hours Case-Mix HRD) \* Hours National Average HRD

Learn more here about this feature on our blog: <https://www.simpleltc.com/new-pdpm-case-mix-prediction-from-simple/>

# Turnover – Current Calculation Timeline

Lookback Timeline: Total Nursing and RN Turnover (April 2024 – June 2024 Five-Star Reports)					
Q0	Q1	Q2	Q3	Q4	Q5
Jul – Sep 2022	Oct – Dec 2022	Jan – Mar 2023	Apr – Jun 2023	Jul – Sep 2023	Oct – Dec 2023
Denominator					
	Numerator				

**12-Month Reporting Period: Administrator Turnover**  
 October 2022 – September 2023



# CMS Finalizing “Minimum Staffing Standards” Rule

As first proposed in September 2023, a new rule is in the finalization process at CMS that will enforce new requirements for Skilled Nursing Facilities.

**The biggest changes are:**

1. Additional requirements added to the Facility Assessment
2. New nursing minimum staffing HRD requirements
3. New 24/7 onsite RN requirement
4. Implementation of “Medicaid Institutional Payment Transparency”

# Staggered Implementation Timeline

## Non-Rural Facilities

- Phase 1 — Within **90 days** of the final rule publication, facilities must meet the facility assessment requirements.
- Phase 2 — Within **two years** of the final rule publication, facilities must meet the 3.48 HPRD total nurse staffing requirement and the 24/7 RN requirement.
- Phase 3 — Within **three years** of the final rule publication, facilities must meet the 0.55 RN and 2.45 NA HPRD requirements.

<https://www.cms.gov/newsroom/fact-sheets/medicare-and-medicaid-programs-minimum-staffing-standards-long-term-care-facilities-and-medicaid-0>

# Staggered Implementation Timeline

## Rural Facilities

- Phase 1 — Within **90 days** of the final rule publication, facilities must meet the facility assessment requirements.
- Phase 2 — Within **three years** of the final rule publication, facilities must meet the 3.48 HPRD total nurse staffing requirement and the 24/7 RN requirement.
- Phase 3 — Within **five years** of the final rule publication, facilities must meet the 0.55 RN and 2.45 NA HPRD requirements.

<https://www.cms.gov/newsroom/fact-sheets/medicare-and-medicaid-programs-minimum-staffing-standards-long-term-care-facilities-and-medicaid-0>

# Additional Requirements Added to the Facility Assessment

## Added requirements for the Facility Assessment

- Facilities must use evidence-based methods when care planning for their residents, including consideration for those residents with behavioral health needs.
- Facilities must use the facility assessment to assess the specific needs of each resident in the facility and to adjust as necessary based on any significant changes in the resident population.
- Facilities must include the input of the nursing home leadership, including but not limited to, a member of the governing body and the medical director; management, including but not limited to, an administrator and the director of nursing; and direct care staff, including but not limited to, RNs, LPNs/LVNs, and NAs, and representatives of direct care staff as applicable. The LTC facility must also solicit and consider input received from residents, resident representatives, and family members.
- Facilities are required to develop a staffing plan to maximize recruitment and retention of staff consistent with what was described in the [President's April Executive Order on Increasing Access to High-Quality Care and Supporting Caregivers](#).

<https://www.cms.gov/newsroom/fact-sheets/medicare-and-medicaid-programs-minimum-staffing-standards-long-term-care-facilities-and-medicaid-0>

# Minimum HRD and Onsite Nursing Requirements

## Comprehensive Minimum Nurse Staffing Requirements for SNFs

- **3.48 Hours per Resident per Day (HRD)** of total direct nursing care to residents
  - Must include **.55 HRD** of care provided by RNs
  - Must include **2.45 HRD** of care provided by nurse aids
  - Additional **.48 HRD** of required direct care can be from care provided by RNs, nurse aids, or LPN/LVNs

<https://www.cms.gov/newsroom/fact-sheets/medicare-and-medicaid-programs-minimum-staffing-standards-long-term-care-facilities-and-medicaid-0>

# Minimum HRD and Onsite Nursing Requirements

## Onsite RN Requirement

- Onsite RN direct-care coverage required **24 hours/day, 7 days/week**
- Must be available for direct resident care
- Can be filled by the DON, as long as they are available to provide direct resident care

<https://www.cms.gov/newsroom/fact-sheets/medicare-and-medicaid-programs-minimum-staffing-standards-long-term-care-facilities-and-medicaid-0>

# Exemptions to the New Rule

LTC facilities may qualify for a temporary hardship exemption from the minimum nurse staffing HPRD standards and the 24/7 RN requirement only if they meet the following criterion for geographic staffing unavailability, financial commitment to staffing, and good faith efforts to hire:

- The facility is located in an area where the supply of RN, NA, or total nurse staff is not sufficient to meet area needs as evidenced by the applicable provider-to-population ratio for nursing workforce (RN, NA, or combined licensed nurse and nurse aide), which is a minimum of 20% below the national average, as calculated by CMS using data from the U.S. Bureau of Labor Statistics and the U.S. Census Bureau.
- The facility may receive an exemption from the total nurse staffing requirement of 3.48 HPRD if the combined licensed nurse and nurse aide to population ratio in its area is a minimum of 20% below the national average.
- The facility may receive an exemption from the 0.55 RN HPRD requirement, and an exemption of eight hours a day from the RN on-site 24 hours per day for seven days a week requirement, if the RN to population ratio in its area is a minimum of 20% below the national average.
- The facility may receive an exemption from the 2.45 NA HPRD requirement if the NA to population ratio in its area is a minimum of 20% below the national average.

<https://www.cms.gov/newsroom/fact-sheets/medicare-and-medicaid-programs-minimum-staffing-standards-long-term-care-facilities-and-medicaid-0>

# CMS Nursing Home Staffing Campaign

## CMS' Nursing Home Staffing Campaign

- CMS to invest over \$75 million to "increase the number of nurses in nursing homes"
  - § Providing financial incentives for nurses to work in the SNF industry
    - Tuition reimbursement is possible
    - "Streamlining" the training and placement process for nurse aids
    - Campaign to promote awareness of nursing programs and the benefits of working in the SNF industry

<https://www.cms.gov/newsroom/fact-sheets/medicare-and-medicaid-programs-minimum-staffing-standards-long-term-care-facilities-and-medicaid-0>



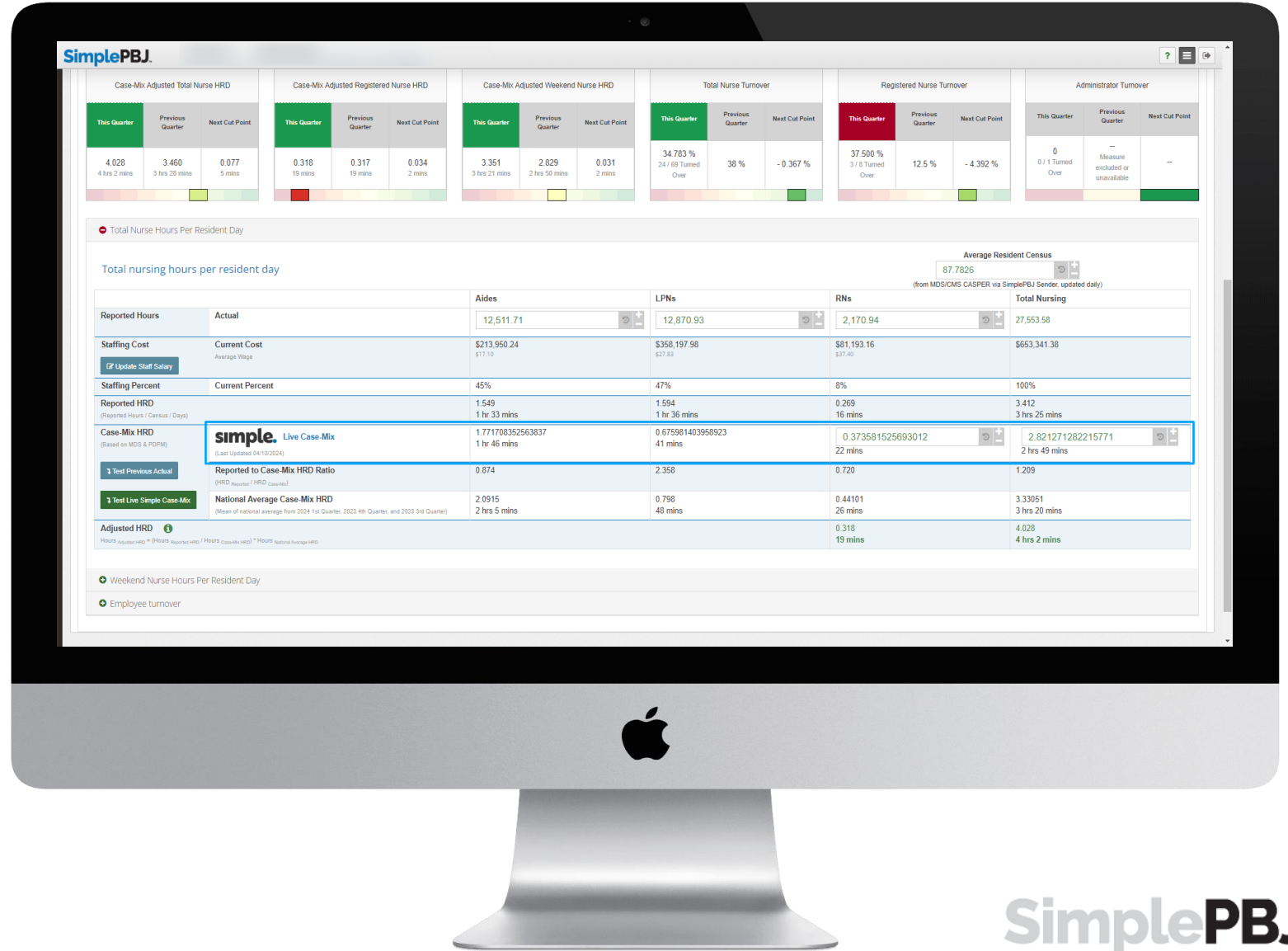
# Medicaid Institutional Payment Transparency

- **New institutional payment reporting requirements** requiring states to report to CMS on the percentage of Medicaid payments for services in nursing facilities and ICFs/IID that is spent on compensation for direct care workers (such as nursing and therapy staff) and support staff (such as housekeepers and drivers providing transportation for residents). These requirements apply regardless of whether a state's LTSS delivery system is fee-for-service or managed care.
- **Support for quality care and worker safety** by excluding costs of travel, training, and personal protective equipment (PPE) from the calculation of the percent of Medicaid payments going to compensation. Excluding the costs of training, travel, and PPE from the calculation will help ensure that nursing facilities and ICFs/IID continue to invest in these critical activities and items, without providers being concerned that these costs will count against their spending on compensation to direct care workers and support staff.
- **Providing an exemption** for the Indian Health Service and Tribal health programs subject to 25 U.S.C. 1641 from the reporting requirements.
- **Promoting the public availability of Medicaid institutional payment information**, by requiring that both states and CMS make the institutional payment information reported by states available on public-facing websites.

<https://www.cms.gov/newsroom/fact-sheets/medicare-and-medicaid-programs-minimum-staffing-standards-long-term-care-facilities-and-medicaid-0>

# Latest SimplePBJ Updates

Live PDPM Case-Mix!  
Be the first to see your  
facility's HRD predictions





# Your one-stop shop for PBJ success

Assemble, validate and submit your PBJ

Predict Staffing Five-Star ratings

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# Questions



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# Thanks for attending!

Recording & slides available here:  
[www.simpleltc.com/pbj-q2-2024](http://www.simpleltc.com/pbj-q2-2024)

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# Resources

<https://www.cms.gov/newsroom/fact-sheets/medicare-and-medicaid-programs-minimum-staffing-standards-long-term-care-facilities-and-medicaid-0>

<https://www.regulations.gov/docket/CMS-2023-0144/comments>

<https://www.federalregister.gov/documents/2023/09/06/2023-18781/medicare-and-medicaid-programs-minimum-staffing-standards-for-long-term-care-facilities-and-medicaid>

<https://www.federalregister.gov/public-inspection/2024-08273/medicare-and-medicaid-programs-minimum-staffing-standards-for-long-term-care-facilities-and-medicaid>

<https://public-inspection.federalregister.gov/2024-08273.pdf>