

FREQUENTLY ASKED QUESTIONS

PBJ quarterly check-in: Critical answers to your top PBJ questions

On Wed, Oct. 28, 2020, SimplePBJ™ hosted a live [webinar](#) on PBJ reporting, covering the latest PBJ updates and answering your questions in an extended Q&A session. Based on questions asked, Jenn Moenck Feige has prepared this follow-up FAQ document.

Telehealth/remote hours

Do telehealth services count for PBJ? During the pandemic, staff have worked from home - can work hours by MDS and Business Office staff working from home be included in PBJ?

Telehealth hours for non-nursing staff may be included. Telehealth hours for nursing staff may only be included in 40 Other Service Worker (Optional). ALL nursing hours included in PBJ reporting MUST be worked on-site.

Would nurse practitioner hours be countable via telehealth?

All nursing hours must be worked onsite in order to be included in PBJ reporting. Nursing hours - PBJ Job Titles 5-12 - are the hours used in your Five Star Staffing calculation. Nurse practitioner (PBJ Job Title 13) is not included in those nursing hours. So if your nurse practitioner was able to perform the same duties offsite that s/he would normally perform onsite, and you paid the nurse practitioner for those hours worked, then yes you should be able to count those telehealth hours.

If our medical director is not on site, can we still count his hours? He does practice over the phone.

With the expanded telehealth rules, CMS has said that if your medical director is providing the same services offsite that s/he had provided onsite (and you're paying for those hours worked) then you may include them.

Can consultants be recorded for PBJ submissions from offsite, such as Social Worker, Medical Director and Dietitian?

It comes down to “Do you pay the provider directly for the hours worked?” If you are paying someone for social work hours, and the services provided by the social worker offsite are the same as normally would have been provided onsite, then yes you can include the hours. Just remember you can only record the hours for which you directly paid. For example, if you contract (and pay) your medical director for 10 hours a month of medical director services, you can include those hours. Additional hours worked by the medical director in another capacity, such as other physician, cannot be included if the hours were not paid by the facility (but instead, for example, billed directly to Medicare, Medicaid or a third-party payor). There is an exception to this rule: therapy hours. CMS wants all therapy hours included in PBJ reporting, regardless of how those hours are paid.

Temporary positions

Is the waiver for PCAs still in place? What about temporary staffing during COVID-19?

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

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).

We had the National Guard in to cover shifts. How do I record that?

Hours worked by members of the National Guard or State strike teams deployed to facilities during the PHE can be reported in PBJ as long as the facility obtains a statement from FEMA or the State (a) verifying the staffing provided to the facility and (b) validating the hours reported by the facility for this additional staff.

What about EMT providing assistance with CNA work?

If the EMT is paid by the facility for the hours worked, then the hours could be counted as Nurse Aide in Training per the COVID waiver. If the EMT was volunteering, and not called in from the state as part of an emergency response to COVID, then no hours could not be counted.

We had staff provided by an agency and paid by NYC. The auditor is asking for pay stubs. What should I do?

According to CMS, if emergency staffing was paid directly to the agency by NYC because of the COVID public health emergency then the facility would need something official from NYC verifying (a) the staff provided and (b) the hours that were worked and paid in order to include them in PBJ reporting.

Classifying hours

If an LPN works as a CNA do you record her as an LPN (her highest level) or as a CNA (what she is currently working as for that shift)?

CMS requires that you record an individual in the primary role worked. So in this example, you would record the LPN as a CNA for the hours worked as a CNA.

I've always been told that, for example, LVN working a shift in a CNA role should be put in the role they are licensed for. Can you please clarify?.

CMS requires that you report hours based on the primary role worked. From the CMS PBJ Policy Manual, page 2-5:

Labor Classification/Job Title

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).

For PBJ, is there a limit on the number of hours and/or days an RN can work in a week?

Technically, there is not a limit. However, hours reported must be worked AND paid. So if a salaried employee works 12 hours and you only pay them for 8, you can only report 8 - unless you pay them an additional amount (above and beyond their salaried amount) for the additional hours worked and can show that additional amount as distinguishable from other payments (from an audit perspective).

You said hours an exempt nurse works over 8 hours do not count. Do they count if those extra hours were worked doing direct care?

If you only pay your exempt nursing staff for 40 hours a week, then - regardless of how many hours they actually work - you must cap the hours reported at 40/week.

The only time you are able to count hours worked by exempt staff in excess of 40 hours per week is if you pay that exempt person an amount above and beyond their salaried amount (yet commensurate with their salaried amount or the position filled) for those extra hours worked.

Whether the extra hours worked were doing direct care or not is irrelevant. CMS is looking at the total number of hours worked and the total number of hours paid.

Can I include MDS nursing hours in PBJ?

MDS nursing hours worked onsite at the facility are generally included as RN with Administrative Duties or LPN/LVN with Administrative Duties. Definitions of both listed in the CMS PBJ Policy Manual:

RN 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.

LPN/LVN with Administrative Duties: Those persons licensed to practice as licensed practical/vocational nurses in the State where the facility is located, and do not perform direct care functions. Also include other nurses whose principal duties are spent

conducting administrative functions. For example, the LPN Charge Nurse is conducting educational/in-service, or other duties which are not considered to be direct care giving.

Can we include hours if we have an MDS Cord. working as a LVN? We have the MDS clock in and out for the LVN hours and pay for those hours.

That's a perfect way to capture those different job titles/positions worked with a clock-in and clock-out approach. CMS has said they want you to record the primary role filled for the person that worked the shift. If someone is serving as an MDS nurse on some days and an LVN on-the-floor nurse on other days, that's exactly how you would want to capture it (with the hours worked as MDS coordinator captured in PBJ Job Title 8 - LVN with Administrative Duties and the hours worked on the floor as LVN captured in PBJ Job Title 9 - LVN).

What is the deal with lunch deductions? Do I have to record lunch deductions even if my employee didn't take lunch? Do I have to record lunch deductions for my exempt staff?

Meal breaks (paid or unpaid) shall not be reported for any staff (exempt, nonexempt and/or contract). Facilities must deduct a meal break from each employee's daily hours. The amount of time deducted should follow a facility's work rules. At a minimum, for each 8-hour 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).

Can you clarify the exempt hours and meal deductions? If my DON is exempt and paid for 40 hours a week, but may work the floor as a charge nurse on occasion, I'm only able to report 7.5 hours per shift for her, correct? So in essence, it is not going to help if I use her on the floor for PBJ hours.

The max hours (in most cases*) you can include for your exempt employees are 40 hours a week. Whether you are able to report 7.5 hours or 8 hours worked each shift depends upon your meal break rules. Many organizations state - in their policy manual, employee handbook, or in the contract with their exempt staff - something to the effect of: you are expected to work a minimum of 8.5 hours per day, which includes a 30 minute meal break. If that is the case, you could record 8 hours worked per shift (8.5 hours worked less a 30 minute meal break). If the exempt individual is only in the office 8 hours each day, then you would need to remove 30 minutes for the meal break and report 7.5 hours worked per shift.

*The only time you are able to count hours worked by exempt staff in excess of 40 hours per week is if you pay that exempt person an amount above and beyond their salaried amount (yet commensurate with their salaried amount or the position filled) for those extra hours worked.

What about night shift hours? Do I have to break down the reporting days if the employee clocks in at 2300 10/1 and leaves at 0730 10/2? So, 1 hour for 10/1 and 7 hours for 10/2?

That's correct. PBJ reporting requires hours submitted for employees to be on the actual date the hours were worked. When PBJ initially came out, CMS thought the requirement would not be terribly burdensome since payroll/timekeeping systems already captured the data. What they didn't realize is that most systems capture the hours worked on the date the (overnight) shift started - not the date the (overnight) hours were actually worked. This means facilities must now break down overnight hours to report hours worked *before* midnight on the first day (the punch in date) and hours worked *after* midnight on the second day (the punch out date).

What constitutes patient feeders? Do they have to have some type of cert or training?

Facilities often incorrectly categorize their dietary workers as paid feeding assistants (PBJ Job Title 17). To include an individual as a paid feeding assistant for PBJ reporting, that individual must have completed a state-approved training course and must work under the direct supervision of an RN or LPN.

The official CMS definition of a paid feeding assistant for PBJ Reporting:

Person who meets the requirements specified in C.F.R. Section 483.60(h)(1)(i) and 483.60(h)(1)(ii) and who is paid to feed residents by a facility, or who is used under an arrangement with another agency or organization. Paid feeding assistants can only feed residents who do not have complicated feeding problems that would require the training of a nurse or nurse aide. Paid feeding assistants must not feed any residents with complicated feeding problems or perform any other nursing or nursing-related tasks. A feeding assistant must work under the supervision of an RN or a LPN.

Most organizations capture their dietary aides in Job Title 39 (Housekeeping Service Worker Optional) or 40 (Other Service Worker Optional).

Training hours

Can I include training hours in PBJ? How do I code education hours?

You can include training hours only if the following conditions are met: (1) the individual in the training/conducting the training was already scheduled to work the shift in which the training occurs, (2) the individual in the training/conducting the training is available to residents during the training should the need arise, and (3) the facility has not called in another employee to replace/fill the position for the hours spent in training.

When we hire new nursing staff, should I be taking the hours out that they are doing orientation on the floor with another staff member?

CMS has said that you can include "training hours" if (a) the individual participating in and/or conducting the training was already scheduled to work, (b) you didn't bring in another employee to cover for that individual, and (c) that individual is available to residents should the need arise.

Here are the exact wording from page 2-7 of the PBJ Policy Manual:

Staff in Training

Hours for staff (e.g. CNA) who are attending training (either onsite or offsite) and are not available to perform their primary role, such as providing resident care, shall not be reported. Also, if another staff member is called in to fill in for staff (e.g. nurse) that is participating in training, the hours for the called-in nurse shall be submitted. However, the hours for the nurse in training shall not be submitted.

Agency hours

Does agency staffing decrease your overall staffing rate?

No. All nursing hours - whether provided in-house or via contract/agency - are currently counted in your Five Star Staffing calculation. Agency hours are not counted/weighted less than in-house hours. Eventually CMS wants to use PBJ reporting to capture staff turnover and retention. Agency staff, from that perspective, may not perform as well as exempt and non-exempt staff.

How do I record agency hours if they do not use the time clock?

- Hours worked recorded by the agency for payment by the facility
- Facility sign-in/sign out logs
- Hours specified in the contract (non-nursing staff)

As far as therapy hours, so Physical Therapy and Speech Therapy does not get counted even if they are agency hours contracted at the facility on a daily basis?

Therapy hours are published in the Staffing section on Nursing Home Compare, but therapy hours are not included in the calculation used for your Five Star Staffing rating. Only PBJ Job Titles 5 - 12 are used in your Five Star Staffing calculation.

PBJ waiver

What if we need to put in information for Q3 and I now see that we have until Nov 14 to input those and it wont let me report from June 15 through June 30? How do I go about inputting those numbers by Nov. 14?

The deadline extension was for Q2 2020 (January - March data). Q3 2020 (April - June data) was due by August 14.

What happens if we did submit the optional quarter data? I submitted on time.

Because the results of the optional submission aren't going to be published to Nursing Home Compare, there really isn't a benefit from that perspective (Five Star Staffing). Looking at it more holistically, CMS will be publishing the data from the optional submission in a public use file available to anyone. So were those numbers ever needed from a historical standpoint, your submission means they are recorded and available in that public use file. This takes on additional meaning with the current public health emergency (PHE), where CMS is publishing your average daily staffing count, as well as your average daily nursing count, and making those numbers available to the public. The stated goal in publishing the data is to assist agencies in the distribution of COVID-19 testing and PPE supplies, meaning it might ultimately be in your best interest to submit.

Five-Star staffing calculation

Can you please repeat the calculation?

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

Where do I find the Case Mix HPRD?

CMS publishes the Case-Mix HPRD in the quarterly dataset it makes available here:

<https://data.medicare.gov/Nursing-Home-Compare/Provider-Info/4pq5-n9py>

If the facility employees Physical Therapy Aides, do those hours count in the Five-Star?

No, therapy is not counted in the Five Star Staffing calculation.

Are Restorative Aides counted in hours counted for Five-Star?

If your Restorative Aide is being captured in the CNA or CMA position, yes - those hours are counted toward your Total Nursing Hours.

Where does the census data pull from?

CMS pulls census data directly from your MDS assessments. If your census appears high, you are likely missing some discharge assessments. Detailed methodology on the census calculation can be found on pages 6-7 in the Nursing Home Compare Technical Users' Guide:

<https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/CertificationandCompliance/Downloads/usersguide.pdf>

Software/tools

How would we find out if your software program is compatible with our current payroll software?

SimplePBJ is compatible with virtually all payroll software. We are happy to schedule a demo and import data from your software into SimplePBJ.

**Will data that was entered into ezPBJ website be transferred to SimplePBJ website?
When will ezPBJ be going away?**

While all data entered into ezPBJ will also show in SimplePBJ, it is in your best interest to migrate away from ezPBJ and start using SimplePBJ (app.simplepbj.com). Don't forget to bookmark the new SimplePBJ site and save your password. There is no set date for ezPBJ going away; we want to give organizations sufficient time to make the transition. After that point, if you try to login to ezPBJ you will simply be redirected to the new SimplePBJ site.

Do you have a webinar that will walk you through the ezPBJ entries, step by step? I am new in the scheduling position and have not used the program.

No, not at this time. Our support team would be happy to assist: support@ezpbj.com

Is there a template I can use for my report and if so, is there a link to it?

The CMS PBJ website has an excel to XML template available in the Downloads section:
<https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/NursingHomeQualityInits/Staffing-Data-Submission-PBJ>