



Nursing Facility Value-Based Purchasing Program: Program Mechanics Walk-Through

Agenda

- ❑ Background
- ❑ Program Mechanics
- ❑ Program Domain and Measures
- ❑ Program Performance and Payment Timelines
- ❑ Next Steps

What is the Nursing Facility Value-Based Purchasing Program?

In 2021, the Virginia General Assembly directed the Department to develop a unified, value-based purchasing (VBP) program for NFs under Medicaid to begin by July 1, 2022.

What

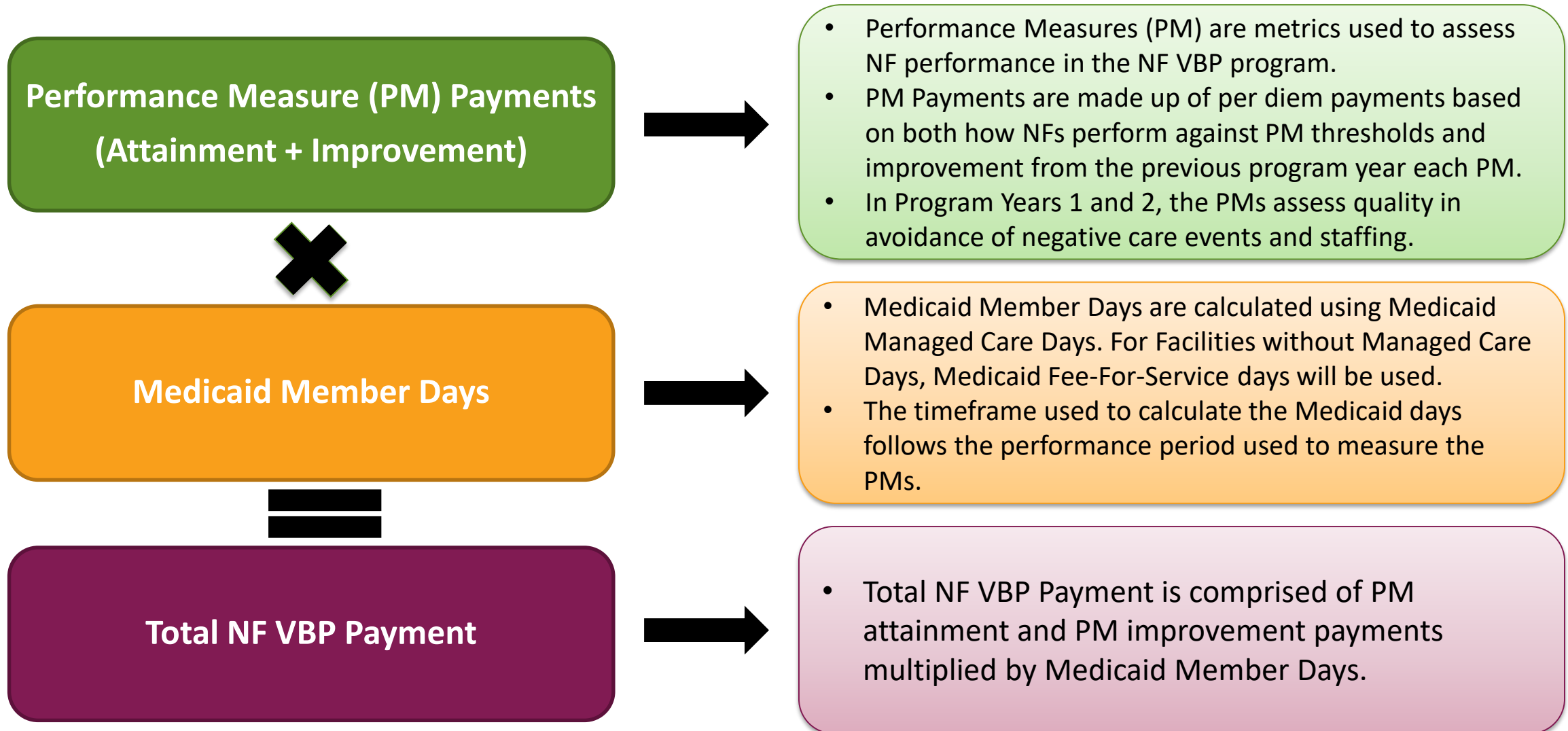
- The Value-Based Purchasing Program (VBP) provides rewards for performance and improvement among eligible Nursing Facilities (NF).

Why

- In an effort to support appropriate staffing and improve the quality of care furnished to Medicaid members in nursing facilities (NF) across Virginia.

Program Mechanics

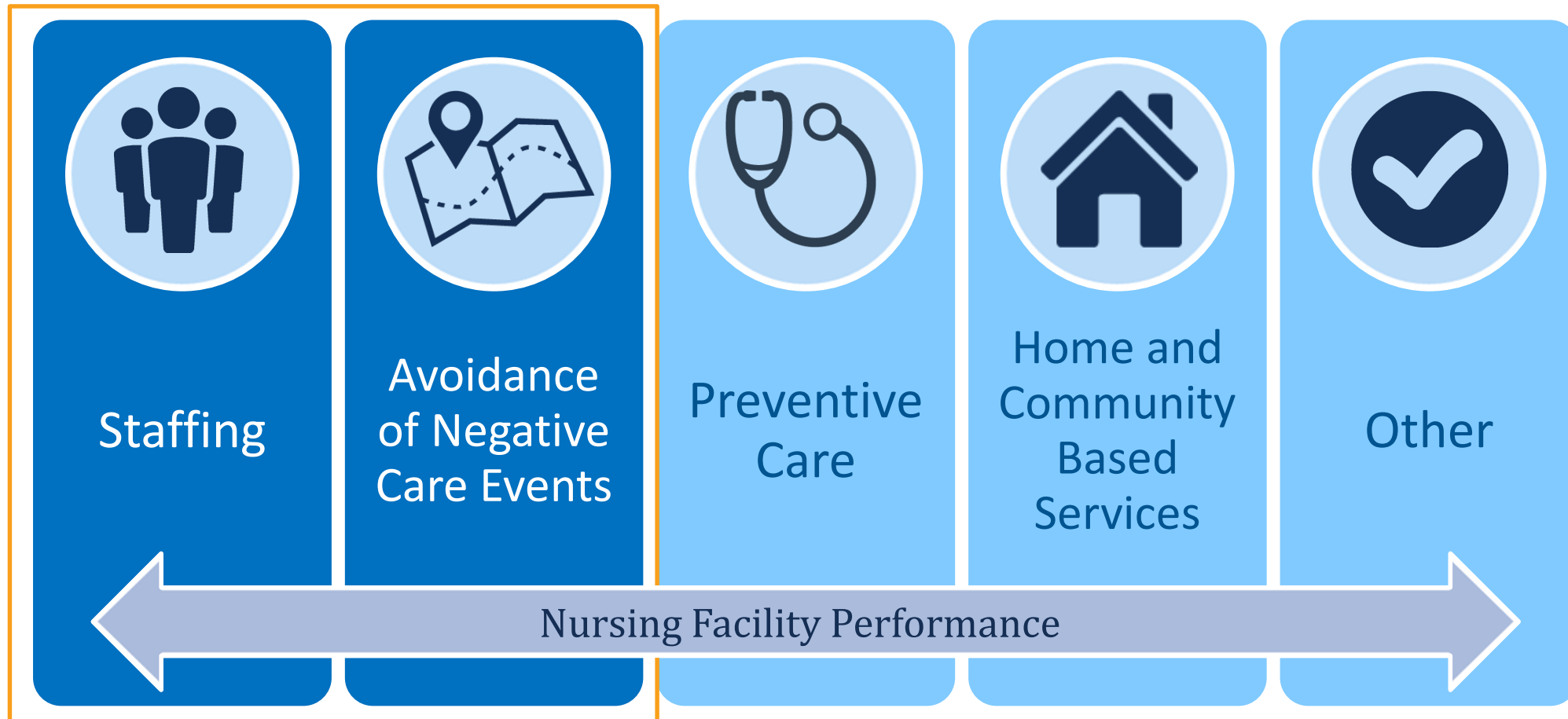
Program Year 1 Performance Components





Program Domains and Measures

Performance Measure Domains

Consistent with enacting Budget language, all Performance Measure domains are listed. Program Year 1 (SFY23) measures will prioritize staffing and avoidance of negative care events.



Performance Measure & Weights, Program Years 1 and 2

Domain	Measure	Description	Weight
Staffing 	Days without Minimum RN Staffing	Facility reported RN staffing hours each day within a quarter. Required standards addressed 42 CFR§ 483.35(b).	20%
	Total Nurse Staffing, Case-Mix Adjusted	Total nurse staffing hours per resident day within a quarter, adjusted for case-mix.	20%
Avoidance of Negative Care Events 	Number of Hospitalizations per 1,000 Long-Stay Resident Days	Number of unplanned inpatient admissions or outpatient observation stays that occurred during a one-year period among long-stay residents.	15%
	Number of Outpatient Emergency Department Visits per 1,000 Long-Stay Resident Days	Number of all-cause outpatient ED visits occurring in a one-year period while the individual is a long-term NH resident.	15%
	Percentage of long-stay High-Risk Residents with Pressure Ulcers	Percentage of long-stay, high-risk residents with Stage II-IV or unstageable pressure ulcers.	15%
	Percentage of long-stay Residents with a Urinary Tract Infection (UTI)	Percentage of long-stay residents who have had a UTI within the past 30 days.	15%

The NF VBP program uses existing measures from federal data sources to reduce additional reporting burden on Nursing Facilities. Please see the program methodology for more information regarding data sources.

Performance Measure Attainment Thresholds

Performance Tiers*

Best: Performance at or above the 75th percentile.

Better: Performance at the median and below the 75th percentile.

Fair: Performance between the 25th percentile and the median.

Below: Performance below the 25th percentile.

Percent Earned of Per Diem

100%

75%

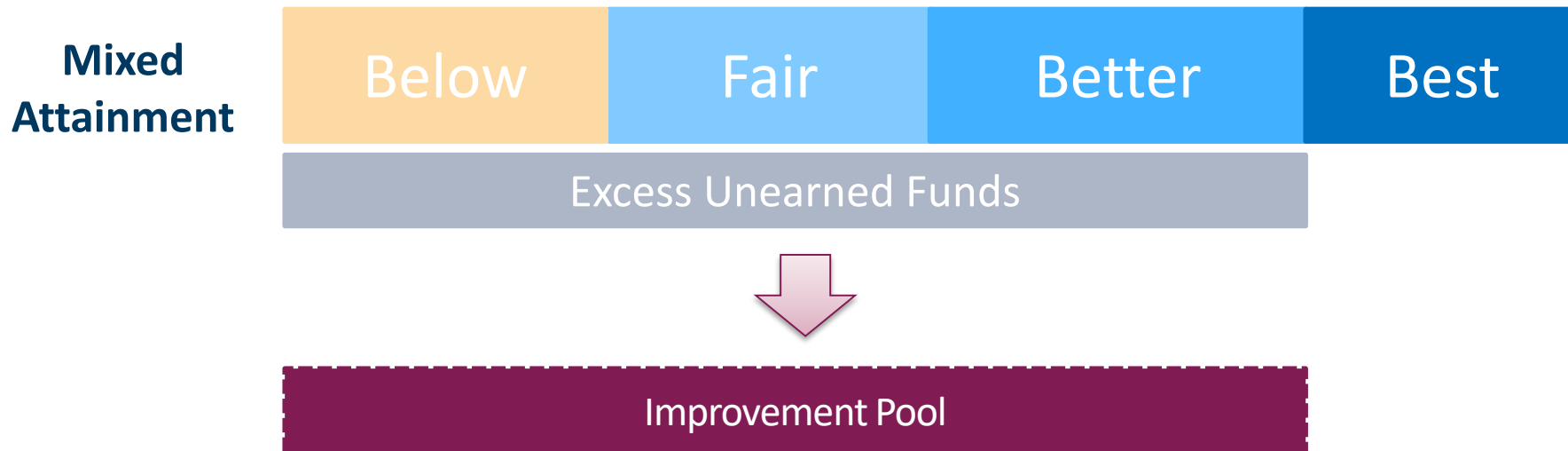
50%

0%

*Days without Minimum RN Hours does not follow this performance tier breakdown based on percentile but rather adjusted to federal standards.

Performance Attainment and Improvement

- ✓ With performance tiers for attainment, there is the possibility that there are unearned funds.
- ✓ Unearned funds will rollover into an **Improvement Pool**.
 - The Improvement Pool is contingent on unearned funds from attainment.
 - Staffing improvement will not be awarded above attainment in the Best tier, so as not to incentivize excess staffing above a certain level.



Performance Measure Thresholds: Program Years 1 and 2

Performance Measure Tiers	Fair Thresholds	Better Thresholds	Best Thresholds	Improvement Thresholds
Days without Minimum RN Hours	13.00 – 16.00	5.00 – 12.00	0.00 – 4.00	≥5%; Up to the Best tier*.
Total Nurse Staffing Hours per resident day (RN, LPN, CNA) – case-mix adjusted	3.08 – 3.19	3.20 – 3.30	3.31+	≥0.5%; Up to the Best tier*.
Number of hospitalizations per 1,000 long-stay resident days	1.36 – 1.75	1.00 – 1.35	0 – 0.99	≥5%
Number of outpatient ED visits per 1,000 long-stay resident days	0.64–0.95	0.39 – 0.63	0 – 0.38	≥5%
Percentage of long-stay high-risk residents with pressure ulcers	8.06– 10.92	5.43 – 8.05	0 – 5.42	≥5%
Percentage of long-stay Resident with a Urinary Tract Infection (UTI)	2.39– 4.36	1.31 – 2.38	0 – 1.30	≥5%

*NF can earn improvement when they move into a higher tier than previously held.

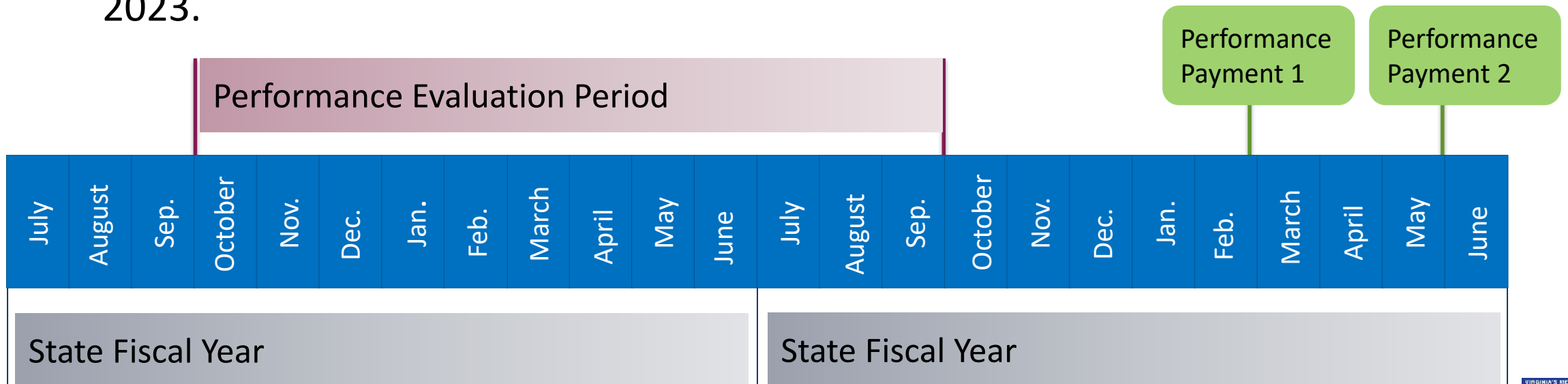
Performance Measure Per Diem Values: Program Year 1

Domain	Performance Measure	Fair	Better	Best
		Per Diem Award	Per Diem Award	Per Diem Award
Staffing	Days without Minimum RN Hours	\$0.88	\$1.31	\$1.75
	Total Nurse Staffing Hours per resident day (RN, LPN, CNA) – case-mix adjusted	\$1.38	\$2.06	\$2.75
Avoidance of Negative Care Events	Number of hospitalizations per 1,000 long-stay resident days	\$1.00	\$1.50	\$2.00
	Number of outpatient ED visits per 1,000 long-stay resident days	\$1.00	\$1.50	\$2.00
	Percentage of long-stay High-Risk Residents with Pressure Ulcers	\$1.00	\$1.50	\$2.00
	Percentage of long-stay Resident with a Urinary Tract Infection (UTI)	\$1.00	\$1.50	\$2.00

Program Performance and Payment Timelines

NF VBP Program Timeline Overview

- ✓ The performance period for NF VBP is October 1 through September 30.
 - Program Year 1 Performance Period is October 1, 2021 – September 30, 2022.
 - Program Year 2 Performance Period is October 1, 2022 – September 30, 2023.
- ✓ The performance payments are made in February and May
 - Program Year 1 Performance Payments will be initiated in February and May of 2023.



Performance Payment Details

- ✓ Nursing Facilities in managed care will receive payments from one attributed MCO.
- ✓ Nursing Facilities not in managed care will receive payments from DMAS.

Performance Measure Payment 1

(Staffing, UTI, Pressure Ulcer)

Data Collection Period:

Oct. 2021 – Sept. 2022

Estimated Timing of Payment:

February 2023

70% of Total Program Payment

Performance Measure Payment 2

(ED, Hospital Utilization)

Data Collection Period:

Oct. 2021 – Sept. 2022

Estimated Timing of Payment:

May 2023

30% of Total Program Payment

Program Reports

A Tableau Dashboard is available on the DMAS website to view individual facility baseline performance. Program year performance and corresponding payment amounts will be viewable once data and payment calculations are final. Additional information and trainings will be available for the Tableau Dashboard.

Facility ABC						
Attributed MCO to Make Payment		Program Year		Medicaid Days		
MCO Name		Baseline Year		23,000		
Total Possible Performance Payment	Total Attainment and Improvement Payment	Performance Attainment Payment	Improvement Payment			
\$0	\$0	\$0	\$0			
Total February Payment: \$0						
Measure	Program Year	Threshold Met (Below, Fair, Better, Best)	Measure Result	Attainment Payment	Improvement Payment	Total Performance Payment
Days without 8 RN Hours	Baseline Year	Best	0.00	\$0	\$0	\$0
Pressure Ulcers	Baseline Year	Best	5.00	\$0	\$0	\$0
Urinary Tract Infection	Baseline Year	Fair	3.99	\$0	\$0	\$0
Weighted Case Mix Hours	Baseline Year	Best	3.35	\$0	\$0	\$0
Total May Payment: \$0						
Measure	Program Year	Threshold Met (Below, Fair, Better, Best)	Measure Result	Attainment Payment	Improvement Payment	Total Performance Payment
ED Visits	Baseline Year	Best	0.30	\$0	\$0	\$0
Hospitalizations	Baseline Year	Better	1.30	\$0	\$0	\$0

The screenshot of the NF VBP facility report card shown on this slide provides a sample for a single report card.

For consistency, payment amounts displayed on this sample report are \$0 because no payments were made in the baseline year.

Next Steps

The Program Year 1 performance period ends in September 2022. The Program Year 2 performance period begins in October 2022. Additional trainings and information regarding the tableau dashboard, MCO attribution, and Program Year 2 methodology will be made available.

Communication



- If you have any questions please contact:
ovbp@dmas.virginia.gov.

Materials



- All materials available at:
<https://www.dmas.virginia.gov/about-us/value-based-purchasing/> under Nursing Facility Value-Based Purchasing Program.