

Agenda

- GHCA Quality Incentive Program
- Program Requirements
- Reports

Georgia Nursing Home QIP Program

- Quality Incentive began in 2003
- Longest running satisfaction measurement program for nursing homes
- Partnership with Georgia Healthcare Association and Dept. of Community Health

Georgia QIP Requirements

- Skilled Nursing Homes
- Medicaid Provider
- Annual Resident and Family Survey
- Annual Employee Survey
- Monthly Quality Metrics data collection

Quality Incentive Reports

- Each quarter NRC Health prepares a report and sends the results to the Georgia Department of Community Health (DCH)
- Each center receives an individual Quarterly Report
- Reports show scores and add-on incentive earned

Quarterly Reports

- 5 non-clinical measures
- 6 clinical measures
- Additional points/add-ons can be earned for AHCA Quality awards or Joint Commission accredited Centers

ABC Health and Rehab				
State Provider Number 00140005A		123 Street B Anytown GA 30300		
Quarterly Quality Incentive Report				
Data: Q1 2024		Effective: July 1st, 2024		
Criteria	Facility Score	Thresholds	Points Earned	Total Points
5 Non-Clinical Measures via NRC QP Data				
Resident/Family satisfaction	2023 / 80.0%	2023 to current - 81.7%	0	3
Employee satisfaction	September 2023	2023 to current	1	
RL/LVN Stability	69.2	64.6	1	
CNA/NA Stability	67.4	57.5	1	
AHCA Bronze Quality Award	--	Active Winner	0	
6 Clinical Measures via CMS or NRC Data				
CMS - Percentage of high risk long-stay residents with pressure ulcers	11.2%	10.2%	0	5
CMS - Percentage of long-stay residents who were physically restrained	0%	0.1%	1	
NRC - Residents w unplanned weight loss/gain	1.4%	6.3%	1	
CMS - Percentage of long-stay residents assessed and appropriately given the seasonal influenza vaccine	97.3%	94.7%	1	
CMS - Percentage of long-stay residents experiencing one or more falls with major injury	0%	3.3%	1	
NRC - Residents w pressure sores worsened	0.2%	0.4%	1	
QUALITY INCENTIVE ADD-ON				2%

Non-clinical data = 1 point each

- Employee survey – survey from the last calendar year
- Resident/family recommendation – combined score from the last calendar year

(failure to participate in the annual survey affects eligibility for entire year)

Non-clinical data = 1 point each

Monthly data submission to NRC Health:

- Nursing Staff stability – Licensed Nurses, RNs, LPNs
- Nursing Staff stability – Certified Nursing Assistants, CNAs

AHCA Bronze Quality Award

Clinical Data = 1 point each

Quarterly data pulled from CMS:


- % of high risk long-stay residents w pressure sores
 - % of long-stay residents physically restrained
 - **% of Residents with unplanned weight loss/gain**
 - % of long stay residents who received influenza vaccine
 - % of long stay residents w one or more falls with major injury
 - % of residents with pressure sores worsened
- ❖ NRC Quality metrics entered monthly will be used in the event the above CMS data is not available.

Eligibility Requirements for Quality Data

- Must have submitted as at least two months of NRC Quality data during the reporting quarter
- Data must be submitted by the 10th of the month for the previous months data

Data entry

<https://go.nrchealth.com/ghca-resources>



Human Understanding®

Georgia Health Care Association Quality Incentive Program by NRC Health

This is your monthly quality metric data collection survey. Data collected from this survey will be used for the quarterly Georgia Department of Community Health Incentive Payment Program. Each month one designated individual for your Center must enter the Quality Incentive Metrics required in order to earn additional possible add-ons from the Department of Community Health quarterly incentive information or instructions see the Resources below.

We respectfully request that data for be submitted by the 10th of the month for the previous months data. For example: January data be entered by February 10th.

[ENTER DATA HERE](#)

- [Quality Incentive \(QIP\) Program - Resources >](#)
- [Pre Survey Tool Kit - Resources >](#)
- [Use Results Toolkit - Resources >](#)

Timing

- 1st of the month (Feb 1-10 for January data)
- You are responsible for ensuring NRC Health is notified if there are changes in your leadership or facility/corporation name
- Data is due by the 10th of the month



Georgia Health Care Association Quality Incentive Program by NRC Health

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[Quality Incentive \(QIP\) Program - Resources >](#)

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FOR MORE ABOUT NRC HEALTH
Call 800.388.4264 or visit nrchealth.com.

Quality Incentive (QIP) Program - Resources

WORKSHEETS AND MORE

- [GHCA QIP Data Entry → \(.pdf\)](#)
- [QM Data Entry Worksheet → \(.docx\)](#)
- [Georgia Performance Incentive matrix → \(.xlsx\)](#)
- [Quality Incentive Program Overview → \(.ppb\)](#)

Georgia Quality Incentive Program



Georgia QIP Monthly Data Entry





SKILLED NURSING FACILITY QUALITY METRICS DATA-ENTRY SCREEN

Category		Data
Data entered by		
Date of entry		
Metric for month of		Year of
Occupancy		
Number of residents in the facility on the last Friday of the month		
Nursing Staff (excludes agency)		
Employed by the facility		
Number of full- and part-time RNs/LPNs on the facility's payroll on the last Friday of the month		
Number of full- and part-time CNAs/NAs on the facility's payroll on the last Friday of the month		
Length of employment		
Number of full- and part-time RNs/LPNs who have been employed for one year or more on the last Friday of the month		
Number of full- and part-time CNAs/NAs who have been employed for one year or more on the last Friday of the month		
Shifts and absenteeism		
Number of shifts scheduled for RNs/LPNs from the first day through the last day of the month		
Number of shifts for which RNs/LPNs did not report to work from the first day through the last day of the month		
Number of shifts scheduled for CNAs/NAs from the first day through the last day of the month		
Number of shifts for which CNAs/NAs did not report to work from the first day through the last day of the month		

SKILLED NURSING FACILITY QUALITY METRICS DATA-ENTRY SCREEN

Required Pressure Sores	
Number of pressure sores on the last Friday of the month	
Number of residents with documentation of pressure ulcer(s) upon admission	
Number of pressure sores that worsened	
Number of pressure sores on the last Friday of the month	
Number of Physical restraints	
Number of Physical restraints on the last Friday of the month	
Number of unintended weight loss/gain	
Number of unintended weight loss/gain on the last Friday of the month	
Number of influenza vaccine	
Number of influenza vaccine on the most recent influenza season inside the facility or outside the facility	
Falls	
Number of falls or injury from the first	

Number of falls or injury from the first shot of all facilities nationwide enrolled in the GHCA QIP and other research statistics.

Quarterly Reports

- Threshold for each metric will determine points earned
- Family Resident Satisfaction- must be at or above combined % (Top3 Box CoreQ Recommendation) responses to recommendation to others across participating facilities
- No threshold is required for Employee or Bronze Award Winners

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QUALITY INCENTIVE ADD-ON				2%
<p>A facility is eligible for an award based on the following:</p> <ol style="list-style-type: none"> 1. Participation in NRC Family or Resident Satisfaction Survey after January 1, 2023. 2. Then, to earn the 1% add-on, a facility must score at least one point from the four Non-Clinical measures, one point from the six Clinical measures, and a third point from either the Clinical or Non-Clinical measures. 3. To earn the 2% add-on, a facility must score at least one point from the four Non-Clinical measures, three points from the six Clinical measures, and the remaining two points from either the Clinical or Non-Clinical measures. 4. A Facility can earn additional Quality Points which will be verified by DCH and added to the quarterly incentive over and above what appears in this report. AHCA Active Silver Quality Award Winner will earn an additional 1%. AHCA Active Gold Quality Award winner or a Joint Commission Accredited Center will earn an additional 2%. 				
<p>NOTE: To earn a point for all Clinical Measures besides the Flu Vaccine, the Facility Score must be less than or equal to the Threshold. For the Flu Vaccine measure, the Facility Score must be greater than or equal to the Threshold.</p>				

Thresholds

- Nursing Stability
- CNA Stability
- Clinical Metrics

Equal to or greater than the GA quarterly average of other participating facilities in the program will earn 1 point per metric

CMS Clinical metrics- must be = to or less than threshold

***Exception: Influenza vaccine must be = to or greater than threshold**

Sample Report

This facility earned 3 points for Non-clinical, 5 points for clinical = 2% add-on

1% add on = at least 1 point from 5 non-clinical, 1 from 6 clinical and a 3rd point from either

2% add on = at least one point from 5 Non-clinical, 3 points from 6 clinical and 2 points from either

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Reports Timing

- Quarter 1: January-March Data collection
- Quarterly Incentive Reports (QIP) delivered late June (end of Q2)
- Impacts Incentives payments for Q3 (July 1)
 - Q2 reports delivered in late Sept for Q4 incentives (Oct 1)
 - Q3 reports delivered in late Dec for Q1 incentives (Jan 1)
 - Q4 reports delivered in late March for Q2 incentives (April 1)



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