Minnesota Risk Adjusted Quality Indicators

Kim Class, RN, QI Coordinator
Teresa Lewis, LTC Senior Research Associate
Minnesota Department of Human Services

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The Lake Superior Quality Innovation Network

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Minnesota Risk-Adjusted Quality Indicators

Kim Class RN, QI Coordinator
Teresa Lewis LTC Senior Research Associate
Minnesota Department of Human Services
Nursing Facility Rates and Policy
Minnesota’s Quality Measurement Tools

- Nursing Home Report Card
- Minnesota Quality Indicators (QI)
- Minnesota Resident Satisfaction and Quality of Life Survey (QOL)
- Minnesota Family Satisfaction Survey
- Annual Cost Report

Minnesota Nursing Home Report Card
http://nhreportcard.dhs.mn.gov

Resident Satisfaction & Quality of Life Survey

- Part of the Report Card
- Used to Measure Resident Satisfaction
- Completed Once a Year
- On Site Person to Person Interviews
- Has 12 Domains
- Results are given as Observed and Risk Adjusted
- Used in PIPP and QIIP Projects
Family Satisfaction Survey

- Measures Family Satisfaction
- Completed Yearly
- Mailed to Family Members
- 6 Domains
- Data used in some PIPP Projects
Minnesota Risk Adjusted Quality Indicators

- Part of the Minnesota Nursing Home Report Card
- Focus for Quality Improvement
- Measurement for Performance-based Incentive Payment Projects (PIPP) & Quality Improvement Incentive Payment (QIIP)
- Academic Research and State Policy Development

Minnesota Quality Indicators

- Specific to Minnesota only
- Not found on Federal Quality Measure Reports
- Covers a Broad Range of Care Areas in 10 Domains
- Extensively Risk Adjusted for Resident Conditions

Minnesota Risk-Adjusted Quality Indicators

- Found only on the MN DHS Nursing Facility Provider Portal
  https://nfportal.dhs.state.mn.us/
- Each facility has a user name and password and DHS can only give it to the Administrator
- Nursing Facility Rates & Policy staff are happy to resend login information to the Administrator if needed
How and When are the MN QIs run?

Daily:
- Nursing facility staff complete and submit MDS assessments

Weekly:
- Health Department shares MDS assessment data with DHS

Quarterly (about 45 days after each Mar, Jun, Sep, Dec):
- DHS calculates annual facility QI scores and posts them online on the NF Provider Portal (as detailed reports) and NF Report Card (as 1-to-5 star scores)

How do MN QIs compare to Federal QI/QMs?

MN QIs do differ from Federal QI/QMs on the "CASPER" reports:

<table>
<thead>
<tr>
<th>MN QIs</th>
<th>Federal QI/QMs (CASPER reports)</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Designed to monitor overall NF performance</td>
<td></td>
</tr>
<tr>
<td>• 4-quarter rolling average period used</td>
<td>• Designed to monitor specific residents’ care</td>
</tr>
<tr>
<td>• Extensive risk adjustment</td>
<td>• User-defined timeframe but 1-month or 1-quarter period typically used</td>
</tr>
<tr>
<td></td>
<td>• Little or no risk adjustment</td>
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**MN QIs use a rolling 4-quarter average**

- Each report is one year of data
- Clearer picture of overall performance for Report Card
- Especially important for smaller NFs or unstable QIs

**Risk Adjustment**

- The MN QIs are risk adjusted statistically
- Acknowledges health conditions/other resident characteristics facilities don’t directly control
- Levels the playing field as much as possible between facilities that serve different kinds of residents
- E.g., dementia, major debilitating conditions, and diagnoses

**Risk-Adjustment Example**

- Statistically, residents are at higher risk for falls with injuries if they have:
  - Decreased cognitive ability (CPS or BIMS)
  - High dependency on staff for mobility, transfer, ambulation, etc.
  - High dependency on staff for assistance with ADLs
  - Hypotension, CVA, paralysis, Parkinson’s, seizures, eye diseases affecting vision
Risk-Adjusted Example

• Statistically, resident would have a higher risk of worsening or serious behavior problems:
  
  – Decreased cognitive ability (CPS, BIMS)
  – CVA, Depression, Bipolar, Alzheimer's, dementia
  – Difficulty making self understood or understanding others

Exclusions

• Most common resident exclusions from the QIs are having end stage disease (J1400), or hospice (O100K 1 or 2).

• If there are not enough residents in the facility to calculate a QI, the facility will receive an average score based on the available QIs in the domain. If the entire domain is missing, facilities will get 0 points on that domain and will get a total score based on their performance on their available QIs.

Psychosocial Domain- 2 QIs

**Incidence of Worsening or Serious Behavior Problems (LS)**

NUMERATOR

  − Section E0200
    • A - Physical behavior symptom towards others
    • B - verbal behavior symptom towards others
    • C - other behavioral symptom not directed towards others
    − Increase in frequency of behavior symptom A, B or C
    OR
    − All behaviors (A, B and C) coded as occurring daily (3) on the current and previous assessment

DENOMINATOR

• ALL RESIDENTS NOT EXCLUDED

EXCLUSIONS

• Comatose, and Short Stay
Psychosocial Domain- 2 QIs

Prevalence of Depressive Symptoms (LS)

**NUMERATOR**
- Based on the results of the Resident Mood Interview or the Staff Assessment of Resident Mood in section D of the MDS (14 day look back).
- Coded a frequency of least 2 (half or more of the days) for 5 or more items and must include:
  - Little interest or pleasure in doing things AND/OR
  - Feeling down, depressed or hopeless

**DENOMINATOR**
- ALL RESIDENTS NOT EXCLUDED
- Exclusions
  - Comatose, and Short Stay

Quality of Life Domain- 1QI

Prevalence of Physical Restraints (LS)

**NUMERATOR**
- P0100 - Trunk restraint(B) or limb restraint(C) used in bed (note: does not include bed rails) used daily (2)
- P0100 - Trunk restraint(E), limb restraint (F) or chair prevents rising (G) used in chair or out of bed used daily (2)

**DENOMINATOR**
- ALL RESIDENTS NOT EXCLUDED
- Exclusions
  - Short Stay

Continence Domain- 7 QIs

Incidence of Worsening or Serious Bowel/Bladder Incontinence (LS) – 2 QIs

**NUMERATOR**
- H0400 - Bowel
- H0300 – Bladder
- Resident coded as 3 “always incontinent” on both the current and previous assessments

**DENOMINATOR**
- ALL RESIDENTS NOT EXCLUDED
- Exclusions
  - Comatose, Short Stay, End Stage Prognosis, Hospice, Ostomy, and Paraplegia/Quadriplegia.
### Continence Domain- 7 QIs

**Incidence of Improved or Maintained Bowel/Bladder Incontinence (LS) – 2 QIs**

**NUMERATOR**
- H0400 - Bowel
- H0300 - Bladder
  - Resident coded for improving continence since last assessment or
  - Resident coded for full continence on the current and previous assessment

**DENOMINATOR**
- ALL RESIDENTS NOT EXCLUDED

**Exclusions**
- Comatose, Short Stay, End Stage Prognosis, Hospice and Ostomy (for Bowel Only)

### Continence Domain- 7 QIs

**Prevalence of Occasional to Full Bladder Incontinence without a Toileting Plan (LS)**

**NUMERATOR**
- H0200A = 0 or H0200C = 0 (No toileting plan AND
- H0300 = 1, 2, 3
  - Occasional to full bowel incontinence, no toileting plan

**DENOMINATOR**
- ALL RESIDENTS EXCEPT EXCLUSIONS

**Exclusions**
- Toileting Independence, Complete Continence, and Short Stay

### Continence Domain- 7 QIs

**Prevalence of Occasional to Full Bowel Incontinence without a Toileting Plan (LS)**

**NUMERATOR**
- H0500A = 0 (No toileting plan
- H0400 = 1, 2, 3
  - Occasional to full bowel incontinence, no toileting plan

**DENOMINATOR**
- ALL RESIDENTS EXCEPT EXCLUSIONS

**Exclusions**
- Toileting Independence, Complete Continence, Ostomy, and Short Stay
Continence Domain- 7 QIs

**Prevalence of Indwelling Catheter (LS)**

**NUMERATOR**
- H0100A = 1
- Indwelling Catheter

**DENOMINATOR**
- ALL RESIDENTS NOT EXCLUDED

**Exclusions**
- End Stage Prognosis, Hospice, Neurogenic Bladder, Obstructive Uropathy, and Short Stay

Infection Domain- 2 QIs

**Prevalence of Urinary Tract Infection (LS)**

**NUMERATOR**
- I2300 = 1
- UTI in Past 30 Days

**DENOMINATOR**
- ALL RESIDENTS NOT EXCLUDED

**Exclusions**
- End Stage Prognosis, Hospice, and Short Stay

Infection Domain- 2 QIs

**Prevalence of Infections (LS)**

**NUMERATOR**
- I1700 = 1 or I2000 or I2100 or I2400 or I2500
- Presence of 1 or more of the following: Multidrug-resistant organism; Pneumonia; Septicemia; Viral Hepatitis; or Wound Infection

**DENOMINATOR**
- ALL RESIDENTS NOT EXCLUDED

**Exclusions**
- End Stage Prognosis, Hospice, and Short Stay
### Accident Domain- 1 QIs

**Prevalence of Falls with Major Injury (LS)**

**NUMERATOR**
- J1900C in 1.2
- One or more Falls with Significant Injury since Admission/Prior Assessment

**DENOMINATOR**
- **Exclusions**
  - All Residents Not Excluded
  - Short Stay

### Nutrition Domain- 1 QIs

**Prevalence of Unexplained Weight Loss (LS)**

**NUMERATOR**
- K0300=2
- Weight Loss of 10% or more in Last 6 Months without Physician Diet Order

**DENOMINATOR**
- **Exclusions**
  - All Residents Not Excluded
  - End Stage Prognosis, Hospice, and Short Stay

### Skin Care Domain- 3 QIs

**Prevalence of New or Worsening Pressure Ulcers (SS)**

**NUMERATOR**
- M0800A>0 or M0800B>0 or M0800C>0
- Any New or Worsening Pressure Ulcer at Discharge Since Prior Assessment or Last Entry/Reentry

**DENOMINATOR**
- **Exclusions**
  - All Residents Not Excluded
  - Discharge Assessment, and Long Stay
Skin Care Domain - 3 QIs

Percent of High-Risk Residents with Pressure Ulcers (LS)
NUMERATOR
- Any of M0300B1, M0300C1, or M0800D1 > 0
- Presence of Stage 2 or Higher Pressure Ulcer
DENOMINATOR
- ALL RESIDENTS NOT EXCLUDED
Exclusions
- Residents not at high risk of a pressure ulcer (Not needing extensive or total assistance for bed mobility or transfers, not comatose, and not malnourished) and Short Stay

Incidence of Healed Pressure Ulcers (LS)
NUMERATOR
- Any of M0900B, M0900C, or M0900D > 0
- Any Stage 2,3 or 4 Ulcers that have Healed Since Prior Assessment
DENOMINATOR
- ALL RESIDENTS NOT EXCLUDED
Exclusions
- No Pressure Ulcers on Prior Assessment, and Short Stay

Psychotropic Domain - 1 QIs
Prevalence of Antipsychotic Medications without a Diagnosis of Psychosis (LS)
NUMERATOR
- Any of N4900A > 0, N0410A > 0
- Use of Antipsychotic Medication at least once in the last week
DENOMINATOR
- ALL RESIDENTS NOT EXCLUDED
Exclusions
- Psychosis or related DX: Schizophrenia, Tourette's Syndrome, Huntington's, Bipolar Disorder, Hallucinations, Psychotic Disorder, Other Affective Psychosis DX, End Stage Prognosis, Hospice and Short Stay
Functioning Domain- 5 QIs

**Incidence of Improved or Maintained Functional Independence (LS)**

**NUMERATOR**
- G01101: Bed mobility, transfers, locomotion on the unit, dressing, eating, toilet use and personal hygiene
- Sums the items (item = 4 if it didn’t occur, 0 if it occurred once or twice)
- Sum is lower on current compared to previous assessment OR
- Sum is 0 on current and previous assessments

**DENOMINATOR**
- ALL RESIDENTS NOT EXCLUDED

**Exclusions**
- End Stage Prognosis, Hospice and Short Stay

**Incidence of Worsening or Serious Functional Dependence (LS)**

**NUMERATOR**
- G01101: Bed mobility, transfers, eating, and toilet use
- Increase of 2 or more steps in at least one item on current vs. previous OR
- Increase of 1 or more steps in at least two items OR
- Full dependency on all four items

**DENOMINATOR**
- ALL RESIDENTS NOT EXCLUDED

**Exclusions**
- Comatose, End Stage Prognosis, Hospice Quadriplegia, and Short Stay

**Incidence of Walking as Well or Better than at Previous Assessment (LS)**

**NUMERATOR**
- G011001 & G0110C1: Walking in room/corridor
- For the 2 items, look at the 1 with the better self-performance on the last assessment
- Item is lower or the same on the current assessment

**DENOMINATOR**
- ALL RESIDENTS NOT EXCLUDED

**Exclusions**
- Comatose, End Stage Prognosis, Hospice , Lack of Walking/Balance, and Short Stay
Functioning Domain- 5 QIs

**Incidence of Worsening or Serious Mobility Dependence (LS)**

**NUMERATOR**
- G0110E1: Locomotion on Unit
- Increased dependence or continued total dependence on current vs. last assessment

**DENOMINATOR**
- ALL RESIDENTS NOT EXCLUDED
- Exclusions
  - Comatose, End Stage Prognosis, Hospice, Quadriplegia, and Short Stay

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Functioning Domain- 5 QIs

**Incidence of Worsening or Serious Range of Motion Limitation (LS)**

**NUMERATOR**
- G0400A&B: Increase in ROM limitation or Continued Bilateral Impairment of both upper & lower extremities

**DENOMINATOR**
- ALL RESIDENTS NOT EXCLUDED
- Exclusions
  - Quadriplegia, and Short Stay

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Pain Domain- 3 QIs

**Decrease in Pain when Admitted on a Pain Medication Regimen (SS)**

**NUMERATOR**
- Section J: Pain medication on Admit, and Decrease in Self-Reported Pain on the current assessment

**DENOMINATOR**
- ALL RESIDENTS NOT EXCLUDED
- Exclusions
  - No Prior Assessment or admit/discharge on the same assessment, No Pain on Admission or drugs on Admission, and Long Stay
Pain Domain- 3 QIs

Prevalence of Residents who Report Moderate to Severe Pain, Short Stay and Long Stay – 2 QIs

NUMERATOR
- Section J: Self-Reported Moderate to Severe Pain at least frequently, or very severe/horrible pain at any frequency

DENOMINATOR
- ALL RESIDENTS NOT EXCLUDED

Exclusions
- Not Self-Report

QUESTIONS

Contact Information

Kim Class, RN QI Coordinator, NFRP
651-431-2274
Kimberly.class@state.mn.us

Teresa Lewis, LTC Senior Research Associate, NFRP
651-431-4208
Teresa.lewis@state.mn.us

Valerie Cooke, Manager, Quality and Research, NFRP
651-431-2263
Valerie.cooke@state.mn.us
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What's in it for me?

- **Free** expertise and practical assistance with the goal of improving systems of care that lead to better quality outcomes for your nursing home residents

What's in it for me?

- **Free** access to the latest evidence-based practices and resources to support overall nursing home quality
What’s in it for me?

- **Free** educational opportunities, webinars, in-person sessions, conference calls, etc., including practical assistance to help you succeed in efforts you are already doing (PIPP, QIIP, QAPI implementation, improvement in 5 Star rating, and composite score)

What’s in it for me?

- **Free** opportunities to come together in collaborative educational sessions for learning, sharing, and networking
- **Free** quarterly data reports to help you track your progress

To Join

- Go to the electronic participation agreement: [http://www.cvent.com/d/y4qbg4](http://www.cvent.com/d/y4qbg4)
- Complete and sign Participation Agreement (must be signed by CEO, COO, Administrator, or Owner)
- Submit the participation agreement electronically
To Join

For questions about the NNHQCC contact:
Kristi Wergin
Program Manager, Stratis Health
kwergin@stratishealth.org
952-853-8561

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