



Center for Clinical Standards and Quality/Quality, Safety & Oversight Group

Ref: QSO-20-02-NH

DATE: October 07, 2019

TO: State Survey Agency Directors

FROM: Director
Quality, Safety & Oversight Group

SUBJECT: Updates to the *Nursing Home Compare* website and the *Five Star Quality Rating System*

Memorandum Summary

- CMS is removing the quality measures related to residents' reported experience with pain from the *Nursing Home Compare* website and the *Five Star Rating System*.
- We are also advising providers we will be updating the thresholds for quality measure ratings, according to the plan introduced in CMS Memorandum QSO-19-08-NH, in which the thresholds will be updated every six months. The first update will take place April 2020.
- We are listing the dates the *Nursing Home Compare* website and the *Five Star Rating System* will be updated over the next few months.

Updates to the Nursing Home Compare website and Five Star Quality Rating System

Removal of quality measures related to pain:

In March 2019, CMS released the CMS Roadmap for Fighting the Opioid Crisis. One aspect of this roadmap is a directive to address how quality measures may provide incentives for inappropriate opioid prescribing. We believe facilities have taken strong actions to prevent the overuse of opioids. However, due to the severity of the Opioid Crisis, we want to avoid any potential scenario where a facility's performance on the pain quality measures may inappropriately contribute to their decision to seek the administration of an opioid. To support this, CMS will be removing two quality measures from the *Nursing Home Compare* website and the *Five Star Quality Rating System* in October 2019. These measures are:

- *Percentage of short-stay residents who report moderate to severe pain.*
- *Percentage of long-stay residents who report moderate to severe pain.*

Increase of Quality Measure Thresholds

In April 2019, CMS implemented changes to the *Five Star Quality Rating System* to help consumers identify differences in quality between facilities, and incentivize quality improvement among facilities (<https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/SurveyCertificationGenInfo/Downloads/QSO19-08-NH.pdf>). One of these

changes was to increase the thresholds for quality measures every six months. This action seeks to drive continuous quality improvement by raising the standards for all facilities to achieve certain ratings. It also helps prevent larger threshold adjustments on an unscheduled bases. Therefore, in April 2020, CMS will begin increasing quality measure (QM) thresholds by 50% of the average rate of improvement in QM score, and will do so every six months. For example, if there is an average rate of improvement of 2%, the QM threshold would be raised 1%. In addition to incentivizing continuous quality improvement, this action reduces the need to have larger adjustments to the thresholds in the future.

As CMS changes the QM thresholds, some nursing homes will see a decline in their rating in these areas until they make further improvements. Also, because the QM ratings are also used as part of the overall rating, some nursing homes will see a decline in their overall five star rating. We note that a decline in a nursing home's Five Star rating, absent any new inspection information, does not necessarily represent a sudden decline in quality. In other words, if a facility's rating changes, it may not have been due to any change in how the facility operates or the level of care provided. In these cases, the change in rating would represent a change in the methodology for calculating certain measures. We believe these changes help consumers distinguish performance differences among nursing homes and communicate the expectation that nursing homes should continuously improve.

CMS also recognizes that some providers are concerned about how the changes will impact their participation in other programs, such as CMS Center for Medicare and Medicaid Innovation (CMMI) demonstrations (e.g., accountable care organizations (ACOs), bundled payment models) and Medicare Advantage plan networks. Each of these, and other programs should review the changes described in this memorandum so they can evaluate any potential impact, and make any changes they feel warranted. For questions about how the *Five-Star Quality Rating System* is used or impacts participation in these programs, we encourage nursing homes to communicate directly with the program's specific organizational or primary contact.

Lastly, we recognize that each individual has their own specific needs and goals. The *Nursing Home Compare* website and *Five Star Quality Rating System* are one source of information about nursing homes, but consumers should seek other sources as well. For example, we encourage families to visit facilities and speak to the administrator, other staff, current residents, or the family or resident council. Through a variety of sources, consumers can find the nursing home that is most suited for their needs or the needs of a loved one.

Nursing Home Compare Update Schedule:

Normally, the *Nursing Home Compare* website and *Five Star Quality Rating System* are updated the last Wednesday of each month. However, due to the holidays (Thanksgiving, Christmas, and New Year's Day), the website and rating system will not be updated on its normal schedule.

Below are the dates of the updates over the next few months:

- October 23, 2019
- December 4, 2019
- January 29, 2020

Future updates will continue to occur on the last Wednesday of each month.

For more information about all the changes described in this memorandum, please see the “Five-Star Users’ Guide October 2019” in the downloads section of the following link:

<https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/CertificationandCompliance/FSQRS.html>

Contact: For questions on this memorandum, please email: BetterCare@cms.hhs.gov.

Effective Date: October 23, 2019.

/s/
David Wright
Director

cc: Survey and Certification Regional Office Management