

July 1, 2015

**RE: State Fiscal Year (SFY) 2016 Quality Improvement Incentives**

Dear Administrator:

The following is an introduction to the SFY 2016 Quality Improvement Incentives. These programs have CMS approval.

This letter is to provide general guidance for these programs. The Utah State Plan Attachment 4.19-D is the definitive source of information for these programs.

**Quality Improvement Incentive (A.K.A. QII 1)**

In setting the nursing home rates for SFY 2016, an amount of \$1,000,000 was held in reserve for a Quality Improvement Incentive (A.K.A. QII 1). The qualifications for this incentive are similar to last year. Please note, however, the element added previously requiring an “action plan to address survey items rated below average for the year.” In order to qualify under this requirement, a facility must identify each survey item that was scored below average (e.g., industry average) and include an action plan of how the facility is addressing the below average scoring.

In order to receive the quality incentive payment, you need to ensure that your application form and all supporting documentation is postmarked or faxed no later than May 31, 2016. Failure to include all required supporting documentation precludes a facility from qualification.

Facilities should not delay in arranging for the required third-party customer satisfaction surveys **in each quarter of the incentive period**, etc. As a point of clarification on the surveys, a survey covering the entire quarter is not required; rather surveys need to be completed at some point in the quarter. Please be sure that your surveys are done in a timely manner to qualify.

If you do not **postmark or fax** a completed application along with needed supporting documentation by May 31, 2016, your facility will be omitted from the incentive payment calculation.

Facilities should not wait for the deadline to submit their **completed** applications. Rather, as soon as all required information is available (e.g., once the SFY 4<sup>th</sup> quarter survey is completed) the facility should submit its application.

**Quality Improvement Incentive 2 (A.K.A. QII 2)**

In addition to the above mentioned incentive program, in setting the nursing home rates for SFY 2016, an additional amount of \$4,275,900 was held in reserve for a new Quality Improvement Incentive. This program is for SFY 2016 only and is in addition to the QII 1 Incentive program. This program has eleven initiatives, which are:

- i. Purchase or enhance nurse call systems. (A.K.A. QII 2(i)) – Must be compliant with “Guidelines for Design and Construction of Nursing Facilities”, must not use overhead paging, calls must be distinct from regular staff call system and only turn off at the resident’s location, must activate an annunciator panel at the staff work or other area, must activate a visual signal in the corridor or activate a staff pager indicating the recipient’s name or room location, and must track response times.

- ii. Purchase new patient lift systems. (A.K.A. QII 2(ii)) – Must purchase at least one new patient lift capable of lifting 400 pounds.
- iii. Purchase new patient bathing systems. (A.K.A. QII 2(iii)) – May be one or more of the following: Purchase at least one new side-entry bathing system allowing the resident to enter the bathing system without having to step over or be lifted into the bathing area, purchase heat lamps or warmers, purchase bariatric equipment for the bathing system, or make general improvements to the patient bathing/shower areas.
- iv. Purchase patient life enhancing devices. (A.K.A. QII 2(iv)) – Must purchase telecommunications enhancements, wander management systems, patient security enhancements, computers and game consoles, garden enhancements, furniture enhancements for patients, wheelchair washers, automatic doors, flooring enhancements, automatic electronic defibrillators (AED devices), energy efficient windows, bed spreads/comforters (not blankets or sheets) or exercise equipment for group fitness classes.
- v. Staff training on quality. (A.K.A. QII 2(v)) – Must provide staff with training on quality, by an industry organization, focused on improving quality of life or care for patients.
- vi. Purchase or improve Vans or Van Equipment. (A.K.A. QII 2(vi)) – Must purchase or make improvements to vans or van equipment for patient use.
- vii. Purchase or enhance clinical information systems hardware or software or backup power system. (A.K.A. QII 2(vii)) – Must purchase or lease new or enhance existing clinical information systems software, which incorporates advanced technology into improved patient care including better integration, capturing more information at the point of care, more automated reminders, etc. The software must include the following minimum tracking requirements: care plans, current conditions, medical orders, activities of daily living, medication administration records, timing of medications, medical notes and point of care data tracking. Facilities may also purchase or enhance clinical information system hardware which must facilitate the tracking of patient care and integrate data collection into clinical information system software that meets all the criteria listed. An additional option is to purchase an electrical backup power system.
- viii. Purchase or enhance heating, ventilating and air-conditioning. (A.K.A. QII 2(viii)) – Must purchase new or enhance existing heating, ventilating and air conditioning.
- ix. Improved Dining Experience. (A.K.A. QII 2(ix)) – May include meal ordering, changes to dining times or hours, atmosphere, or more food choices.
- x. Outcome Proven Awards. (A.K.A. QII 2(x)) – Facilities can be reimbursed for costs related to preparing, reviewing, and submitting the application for the AHCA Quality First Award, or the Malcolm Baldrige Award.
- xi. Worker Immunization. (A.K.A. QII 2(xi)) – Facilities may receive reimbursement for flu or pneumonia immunizations provided to its workers free of charge.
- xii. Patient Dignity. (A.K.A. QII 2(xii)) – Facilities must purchase a bladder scanner and/or bariatric scale capable of weighing patients up to at least 600 pounds.

### **Quality Improvement Incentive 3 (A.K.A. QII 3)**

Additionally, the remaining amount not paid out in QII 2 is available for payout to qualifying facilities. In order to qualify, the facility needs to qualify for QII 1 and at least one of the initiatives of QII 2. Also, the facility must document how the following three resident choice areas have been implemented:

- i. Awake time (when the resident wants to wake up and/or go to sleep),
- ii. meal time, and

iii. bath time

Detailed requirements for qualification under these new QI Incentive programs, along with potential payout amounts, can be had by downloading the application forms from our website. That website address is <http://health.utah.gov/medicaid/stplan/longtermcare.htm>.

**Only currently certified Medicaid providers are eligible for these incentives.** Providers considering a change in ownership should submit prior to the effective date of that change.

Additional information may be found in the associated Rule R414-504-4.  
(<http://www.rules.utah.gov/publicat/code/r414/r414-504.htm>)

The following are a few key items to ponder when submitting your applications for consideration:

1. Has the facility met all of the requirements of the specific incentive program?
2. Does the facility have all appropriate supporting documentation for the application?
  - a. Proof of purchase/lease as well as proof of payment?
3. Is the supporting documentation presented in an organized, clear and concise manner?
4. Is the **spreadsheet** detailing the documented expenditures completed and understandable?
5. Is the application going to be **postmarked or faxed** in time?
6. If the application is missing supporting documentation and the deadline of May 31, 2016 has past, then the facility will not, or at least, will not fully qualify. (Please plan ahead.)

**Facilities failing to submit their completed application(s) along with all needed supporting documentation by the required date, May 31, 2016, will not be considered for the incentive payment calculation.**

Facilities should not wait for the deadline to submit their **completed** applications. Rather, as soon as all required information is available the facility should submit its applications and supporting documentation. Further, each of the incentive programs is separate, so please submit individual applications and supporting documentation as they are completed.

Should you have questions, please contact me. We hope that these programs will be of great value to your facility and the residents you serve.

Sincerely,

*Steven Jones*

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