

Centers for Medicare & Medicaid Services  
Skilled Nursing Facilities/Long Term Care Open Door Forum  
Moderator: Jill Darling  
October 6, 2022  
2:00 pm ET

Coordinator: Welcome, and thank you for standing by. At this time, all participants are in a listen-only mode until the question-and-answer session of today's conference. At that time, you may press Star 1 on your phone to ask a question. I would like to inform all parties that today's conference is being recorded.

If you have any objections, you may disconnect at this time. I will now turn the call over to Jill Darling. Thank you. You may begin.

Jill Darling: Great. Thank you, (Denise). Good morning and good afternoon, everyone. I'm Jill Darling in the CMS Office of Communications, and welcome to today's Skilled Nursing Facilities Long-Term Care Open Door Forum. One brief announcement before we get into the agenda today.

This open door forum is open to everyone, but if you are a member of the press, you may listen in, but please refrain from asking questions during the Q&A portion of the call. If you do have any inquiries, please contact CMS at [press@cms.hhs.gov](mailto:press@cms.hhs.gov). And first, we have Heidi Magladry, who has some SNF Quality Reporting Program updates. Heidi.

Heidi Magladry: Thanks, Jill. So, this is Heidi Magladry. I'm the SNF Quality Reporting Program Coordinator, and I have some updates for the SNF QRP. First, I'd

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like to highlight some recent resource documents now available on the SNF QRP pages. On September 21st, we posted the SNF QRP FAQs for fiscal year 2023.

This document has been updated to reflect the finalized policies for the SNF QRP in fiscal year 2023, and includes other useful resources available to providers. We also posted the fiscal year 2025 SNF QRP APU, or Annual Payment Update table for reporting assessment-based quality measures, and standardized patient assessment data elements, and SNF QRP collection, and final submission deadline documents for the fiscal year 2025. I've included a link to the SNF QRP pages where these documents can be found on the agenda.

Second, on or about October 26th, Care Compare and the Provider Data Catalog for the SNF QRP, will be updated. The data update for October 26 will be based on quality assessment data submitted by SNF to CMS from October 1, 2021, through October 4, 2021.

The data for claims-based measures will display data from quarter three 2019, through quarter four 2019, and then quarter three 2020, through quarter two 2021. And for the SNF Healthcare-Associated Infections Requiring Hospitalization measure, the data displayed will be quarter four of 2020, through quarter three of 2021.

Also, with the October Care Compare and Provider Data Catalog refresh, the Centers for Disease Control and Prevention measure adopted for the SNF QRP, the COVID-19 vaccination coverage among healthcare personnel, will

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be publicly reported for the first time as the SNF QRP measure. The data for the COVID-19 vaccination coverage among healthcare personnel measure, will display data submitted for quarter four 2021 for this release.

Finally, we wanted to take this opportunity to clear up some confusion that happened in the last week. On September 27th, the CDC National Healthcare Safety Network, or NHSN, provided a webinar to review updates to the Annual Healthcare Personnel Influenza Vaccination Summary data. It's reported through the NHSN Healthcare Personal Safety Component for the 2022, 2023 influenza season.

During that training and the subsequent email blast, it appears there was some confusion about which providers are required to report this measure. We wanted to take this opportunity to remind those that the SNF QRP applies to freestanding SNFs, SNFs affiliated with acute care facilities, and all non-critical access hospital swing bed rural hospitals.

The Influenza Vaccination Coverage Among Healthcare Personnel Measure, was adopted into the SNF QRP for fiscal year 2024 in last year's fiscal year 2023 SNF PPS rule. This rule was published in the Federal Register on August 3rd, 2022. The CDC has determined that the influenza vaccination season begins on October 1st, or when the vaccine becomes available, and ends on March 31st or the following year.

Therefore, to meet the minimum data submission requirements, CMS-certified Skilled Nursing Facilities are required to report Annual Healthcare Personnel Influenza Vaccination Summary data at the conclusion of the measure

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reporting period. That is October 1st through March 31st of the following year.

If SNFs submit data more frequently, such as on a monthly basis, that information would be used to calculate the summary score. The initial data submission period for SNF is this October, October 1st, 2022, through March 31st, 2023. The deadline to report the annual healthcare personnel influenza vaccination data for the fiscal year 2024 APU determination, is May 15th, 2023.

SNFs should use the influenza vaccination summary option under the NHSN HPS component to report the number of healthcare personnel who received the influenza vaccination among the total number of healthcare personnel in the facility for at least one working day between October 1st, and March 31st of the following year, regardless of clinical responsibility or patient contact.

We will note, for healthcare personnel influenza vaccination rates for swing bed providers, that this data is submitted by the parent facility in which the swing bed reside. For example, if the swing bed exists within the long-term care hospital or acute hospital, the measure data for that parent hospital type would include the swing beds within the facility.

For additional resources, I've included a link to the CDC - to one of the CDC pages. Also, for those that may have missed the training and a repeat of this training on the Annual Healthcare Personnel Influenza Vaccination Summary data, through the NHSN HPS component, will be repeated on October 19th at

1:00 p.m. Eastern Standard Time. I included a link to that as well on the agenda.

This concludes the updates for the SNF QRP. And at this time, I'll hand it off to my colleague, Ellen Berry.

Ellen Berry: Thanks, Heidi. Good afternoon, or good morning to all. On the last ODF, I announced that CMS will be transitioning the MDS to iQIES in early 2023. This is a reminder that the onboarding process for security officials is ongoing. We have approximately 40% of the providers with a security official.

Links related to the onboarding process are included with the agenda. In order to have a smooth and successful transition to iQIES, every nursing home must have a security official in place. CMS asks - expects that the security official is familiar with provider staff and what their level of access should be.

It is imperative that all entities ensure that access to MDS data is minimum necessary, as you would also ensure this when it comes to your medical records. You don't allow any and all staff to access medical records. This is the same for CMS systems.

Given the type of data within iQIES, CMS expects that a provider security official be a provider staff person, not a vendor staff. Vendor staff will not know what level of role a person should have in the provider setting. If you have allowed your vendor to be a security official, you must work with your vendor to ensure that you have a staff person with a security official role.

Providers who use a vendor to submit assessments on their behalf, may also allow this with iQIES. As I mentioned on the previous ODF, the process for submitting XML files will not change or be impacted. The change will simply be where you go to submit the records.

There are not any data specification changes required for the transition to iQIES. That's all I have for today. Thank you very much.

Jill Darling: Great. Thank you, Ellen, and to Heidi. That is the - that concludes today's agenda. So, (Denise), will you please open the lines for Q&A, please?

Coordinator: Thank you. If you would like to ask a question, please press Star 1, and - let's see. Star 1, unmute your phone and record your name. It does take a few moments for the questions to come through. One moment, please. All right. I do have several questions. The first one is from Joel VanEaton. Your line is open.

Joel VanEaton: Thank you so much for taking my call and my questions today. I just have two questions real quick. First of all, with the release of MDS 3.0 version 1.18.11, can you give us some indication as to when we'll begin to receive resources related to the major changes that have occurred to that particular document with the comprehensive dataset that's been put out, like the RAI manual or updated quality measure specifications, especially related to the elimination of section GG. Also, the cost specifications and the five-star ratings and so forth, everything that'll be affected pretty much by the elimination of section G, some guidance on that, when we can expect that.

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And then also just a follow-up to the comments that Ellen made just a minute ago related to iQIES. The initial announcements indicated that general onboarding for nursing home and swing bed hospital staff would begin November 15th and going forward so with the provider security officer onboard. Is there a deadline for when we need to have our general onboarding, those that would be submitting MDSs and so forth? Thank you.

Ellen Berry: I'll take the second part of your question, Joel. Well, before you submit assessments in, when we open up iQIES to MDS, and that date is still to be determined, but we are, like I said, hoping early 2023. It's not going to be January, I will tell you that. Most likely sometime in March, but that's still a little bit flexible at this point.

However, keep in mind, staff and even vendor communities, if you require manual process for your identification portion of the onboarding process, that can take several weeks. So, we highly recommend that you don't wait that long. Your account will not be frozen or anything if you haven't used it.

There's nothing to do right now, obviously, in iQIES. So, you're okay in that sense. You're not going to have to reset your password initially. So, the sooner you obtain your user ID, the better off you are.

Joel VanEaton: Okay.

Heidi Magladry: Hey, this is Heidi. I can address some of the other questions. As we stated when we released the draft NC items set in September, we anticipate releasing

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the other version 1.1 8.11 draft item sets before the end of the year. And at that time when we release those, we will also plan to update the item set change history so that you're able to see that.

In terms of the manual release, we don't typically release the manual till, you know, later in the process. So, I'm anticipating it will be, you know, sometime in the second quarter of 2023. The other question you had was about the G to GG work on the quality measures.

I do know that that work is ongoing, and I don't have a timeline for the release of that information, but it will certainly be released well in advance of when it becomes effective. My measure person isn't on the call right now. What else?

Joel VanEaton: I guess the - one of the concerns too, or not concern, I guess, but just the question I think a lot of us have is surrounding the -of course, the STRIVE study that risk adjusts or acuity adjusts for staffing on the five-star with all the staffing changes now.

The five-star, will that - how will that be affected? Or maybe you don't know the answer to that, but resources to be able to understand the G to GG possible inflections on that, or indications for how the STRIVE study data under the RUG system might be affected by the change from G to GG.

Ellen Berry: I'm going to attempt that, Heidi. This is Ellen. So, we don't have our measure person on the call. We apologize for that, but we do know that they are looking at this. But I would say, you know, however they're adjusting, is not going to be RUG because we're not going to have that, but yes, neither Heidi,

nor I, know that answer at this point. So, perhaps if you submit your questions.

Joel VanEaton: Sure.

Ellen Berry: Yes.

Joel VanEaton: I think the encouragement to all, just I think from the provider community is, the sooner, the better, as far as getting this information, knowing so many big changes and understanding that flow of data and how that's going to work before we get started, will be helpful. So, thank you very much for taking my call.

Ellen Berry: Yes. And, you know, we want to get the information out to you as soon as possible, but we also want to make sure it's as error-free as possible also.

Joel VanEaton: Exactly. Yep.

Ellen Berry: And clear. Yep.

Joel VanEaton: Yes. Yep. Thank you.

Coordinator: Thank you. The next question comes from Susan LaPadula. Your line is open.

Susan LaPadula: Yes. Hi, good afternoon. Thank you for providing the links in the agenda, both to Heidi and Ellen. That's very helpful. My question, Joel asked most of

it. However, I'd like to ask about the drop-dead date for the new conversion for the MDS data going to, I believe, it's called iQIES?

Ellen Berry: Can you clarify, because there's no conversion of data. It's still an XML file as it is today. It would be the same file as today. So, it's just, you're going - instead of going to QIES, you're going to be going to iQIES. It will look a little bit different than what QIES looks like when you go to upload your file, but it's, you know, you press a button, and it asks you what files you want to load and that's what you do, so.

Susan LaPadula: Can we still upload, Ellen, as frequently as we like, or is there a ...

Ellen Berry: Oh, yes.

Susan LaPadula: Okay.

Ellen Berry: Nope. We have not changed anything like that.

Susan LaPadula: Wonderful. Thank you so much for clarifying that.

Ellen Berry: Sure.

Coordinator: Thank you. The next question is from (Kimberly Jim-Morrow). Your line is open.

(Kimberly): Hi. Two questions, one on the iQIES. For those already permissioned in the system, do they need to be repermissioned? And then separately for Heidi,

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when you covered the 10/26 Care Compare update, if you would please restate those dates for the timeframes for the MDS claims and HAI measure. Thank you.

Heidi Magladry: I can do this.

Ellen Berry: Oh, go ahead, Heidi. Go.

Heidi Magladry: So, for - on the October refresh, the assessment data submitted by SNFs, so the assessments will be quarter one 2021, through quarter four 2021. The data for claims-based measures, which are updated annually with this refresh, will be quarter three 2019 to quarter four 2019.

And then we will skip over quarter one and quarter two 2020, because those were exempted due to the COVID-19 PHE. So, this claims date will be, again, quarter three and four of 2019 and quarter three 2020, through quarter four of - through quarter two of 2021.

The SNF HAI healthcare-associated infections requiring hospitalization measure, this is a one-year measure, claims-based measure. So, this measure will just display quarter four 2020, through quarter three 2021. And when we release our announcement, as we often do, alerting providers to the availability of this refresh, all those dates are, again, contained in that messaging. So, you don't have to remember.

And then finally, I'm sorry, the CDC COVID-19 vaccination coverage, the SNF QRP version will reflect data submitted for quarter four 2021.

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Ellen Berry: This is Ellen.

(Kimberly): Thank you. And then I just had the question on those already permissioned in iQIES, if they need to repermission.

Ellen Berry: So, what do you mean by permission? So, you mean you have a role like with Oasis, and now you want one with MDS?

(Kimberly): Within - I think I'm referring to the correct system. Within iQIES, is that where we access ePOC and Payroll Based Journal, and CASPER reporting?

Ellen Berry: So, are you a provider?

(Kimberly): Yes.

Ellen Berry: Okay. So, with iQIES, you'll have to - if you look at the links, there's the HARP onboarding or account training video. You'll want to go there, because you have to start with a HARP account. So, you need a whole new user ID to access iQIES.

Your QIES user ID will not carry over to iQIES. We have a new process with regards to ensuring people are who they say they are, and that is a CMS requirement for all our systems. So, if you have a QIES user ID, you will have to go through the new process.

If you already have an iQIES user account, you may need to go in and update your role, your access. So, there are some people who have multiple types of providers. So, they have an IRF and a nursing home, and they'll be submitting for both, while our IRF providers are already associated with our iQIES, and they have user IDs. So, they would just have to go in and update their role.

But hopefully, I've answered your question.

(Kimberly): You did. Thanks so much.

Coordinator: Thank you. The next question is from Janice Hornberger. Your line is open.

Janice Hornberger: Hi. Thank you. Thanks for taking my question. I just had a couple of questions. So, I had heard - and it's around iQIES. So, I had heard that there is going to be a vendor call around the iQIES transition, and I was wondering if you knew the date for that. And then I also had a question around, is it - will there be any kind of a sandbox or test environment that vendors can use as they prepare for this transition? Some vendors do submit on behalf of customers.

Ellen Berry: So, we do not have a date for the vendor call. Our goal is before November 15th, there will not be a sandbox. As I mentioned earlier, you'll be using the same data specs that are in existence today. And so, it's still an XML file if you upload, and that process is basically the same. It will look different because it's not QIES. It's now iQIES. There - you can test with the VUT. We still have the VUT that applies.

Janice Hornberger: Right. So, yes. And I guess just to kind of clarify where I'm coming from, so it's not really the XML file per se that we need specifications for, or want to understand, but because we do automate this process for our clients, because it is a new Web site and a new look and feel, then we have to account for that process and those changes to, you know, the new Web site and how we handle the automated process.

And so, therefore that - I guess that's where we're really looking for some type of a sandbox environment to where we could submit assessments prior to going live and having to do it with, you know, real life PHI. So, just wanted to, I guess, throw that out there as kind of the rationale for the ask.

Ellen Berry: What I suggest is when we request questions for the vendor call, that you submit that question.

Janice Hornberger: Okay.

Ellen Berry: Or suggestions.

Janice Hornberger: Appreciate that.

Ellen Berry: But, you know, there should not be automated submissions. There needs to be a person on the other end submitting the assessments.

Janice Hornberger: Okay. Thank you.

Coordinator: And then you're ready for the next question.

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Jill Darling: Yes, we are.

Coordinator: The next question is from - that's from Grant Edelstone. Your line is open.

Grant Edelstone: Thank you for taking my call. This has to do with the (FAM) changes for October 24th. Will there be another release of that? The one we - that I have is the advance copy from two plus months ago when it was published in the Federal Register. Will there be something else coming out, or will we use that to prepare to be in compliance? Thank you.

Christine Teague: Hi, this is Christine Teague with the Division of Nursing Homes. There will be a final copy of the (SOM) published either before or on October 24th. We don't have an exact date, but it will come out. We are not anticipating changes, other than maybe minor technical edits, but we are not anticipating any large changes to that. So, yes, there will be a final version posted in the coming weeks.

Grant Edelstone: And a related question - thank you. Will there be any anticipated changes to the CEPs, other than what was already put out with the - a few of them?

Christine Teague: I do not have information on whether there will be any changes to the pathways at this time, but they will also be released sometime between now and October 24th.

Grant Edelstone: Thank you.

Coordinator: The next question comes from Carlene Gordon. Your line is open.

Carlene Gordon: All right. Thank you for taking my call. My question is, is there a specific link that gives us direction of how to proceed with the new - getting the new user ID for submitting MDSs?

Ellen Berry: Yes. You want us start with the HARP account training video. You'll need to obtain a HARP account, and then once you have that, you can submit your request for your user role. Now, if you are the provider security official, that is approved by CMS, and that person needs to be in place prior to any other roles being requested.

The other roles being requested are approved by your security official, not by CMS, because CMS does not know the staff.

Carlene Gordon: When you say provider personnel, I'm the MDS coordinator/manager, would that be a different person from me, or would that be me?

Ellen Berry: It could be you. That's a business decision, but we want it to be somebody associated with the provider. Now, we also recommend that you have more than one provider security official because people go on vacation.

Carlene Gordon: Right.

Ellen Berry: And other things like that, so.

Carlene Gordon: Yes, we have a few, about three of us. Yes.

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Ellen Berry: Yes? Okay. Yep. It can be you. That's up to you.

Carlene Gordon: And is there a specific number to call, or it's just the site to go to get this information?

Ellen Berry: It's the site. You have to - it's all via the internet.

Carlene Gordon: I'm sorry, what's the site? What's the (unintelligible)?

Ellen Berry: You'll have to - well, within the agenda are the links that will take you.

Carlene Gordon: Okay. Thank you.

Ellen Berry: Okay. Yes.

Coordinator: The next question is from Jennifer Roberts. Your line is open.

Jennifer Roberts: Hi. Thank you for taking my question, but somebody else has already asked it, and it's been answered.

Jill Darling: We'll take our next question, please.

Coordinator: Thank you. I'm so sorry. I was getting their name. That is from Joel VanEaton. Your line is open.

Joel VanEaton: Thanks for taking another question real quick. Any indication as to when the technical users guide will come out for five-star if it changes October? Primarily just interested in knowing the cut point changes and what those look like. Thank you.

(Laura): Hi. This is (Laura) (unintelligible) from the Division of Nursing homes. We do not have that information yet, and we will let the provider community know as soon as we do.

Joel VanEaton: All right. Thank you.

Coordinator: We do have another question from Michelle Wilkinson. Your line is open.

Michelle Wilkinson: Hi. Thank you for taking my call. I may have missed it when Ellen was talking about it, but I'll ask real quickly. Regarding vendors and provider security official role, what we had happen with our company is, the vendor reached out to CMS and received provider security official access without our permission. So, it was a little bit odd. I'm confused. Are they supposed to be at that level, or is there a different level for vendors?

Ellen Berry: Correct. We did learn about that late last week, and that's why I made the announcement that it should not be the vendor who should be requesting that role, because we do not know who providers use as their vendor, if they use a vendor. And that's why we do request that.

That was a mistake on our end. So, if you do not want that your vendor to be your provider - your second provider security official, because you're allowed

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to have more than one security official, then you will need your vendor to either remove his or her role completely, and then you apply, or you have the vendor "security official," approve a person security official role, and then you would delete that vendor's role.

Michelle Wilkinson: And what is the proper ...

Ellen Berry: (Unintelligible) with that.

Michelle Wilkinson: What is the proper level for a vendor besides provider security official?  
What's the right access do you - can you advise on that?

Ellen Berry: I cannot. I would suggest you look at the role matrix to figure out the best role for that person. And I don't know that by heart, so I apologize for that, but there are several different roles that your vendor could use. Like they may just do submissions for you, or they may also look at some reports for you. So, you know, if you look at the role matrix, hopefully, that will assist you with your decision.

Michelle Wilkinson: Great. Thank you so much.

Coordinator: Thank you. And there are no other questions at this time.

Jill Darling: All right. Well, thank you, everyone, for joining and to all of our speakers able to answer your questions. If you think of any questions after today's open door forum call, please send them into the email that is listed on the agenda at

[SNF\\_LTCDF-L@CMS.HHS.gov](mailto:SNF_LTCDF-L@CMS.HHS.gov). And that concludes today's call. Thanks, everyone, for joining.

Coordinator: Thank you for participating in today's conference, and you may disconnect.

End