



NEW JERSEY DEPARTMENT OF HUMAN SERVICES

Nursing Facility Rate Reporting

March 1, 2022

Agenda

- Introductions
- Human Services Resources for Nursing Facilities
- Review of SFY2022 Rate Calculations and Reporting
 - COVID-19 and Per Diem Increases
 - Appropriations Act updated mandated expenditures and recoupment
 - Quality Incentive Payment Program (QIPP)
- New Online Reporting Portal
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 - Portal Selection
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 - Wage Reporting Example
 - Workforce Summary Statistics
- How to Ask Questions

Human Services Resources for Nursing Facilities

Available at: <https://www.nj.gov/humanservices/coronavirus.html>

- 1. Webinar PPT: SFY2021 Rates and Reporting (October 16, 2020)**
 - Rate calculations for the revised state fiscal year and impact of law on quality incentive carry over.
 - Explanation of annual rate notification letters and data fields for reporting.
 - Mandated expenditures and wage reporting walkthrough.
 - Webinar was recorded for asynchronous viewing and review.
- 2. FAQ: SFY2021 Rate Increase (November 6, 2020)**
- 3. Instructions for Attestation and Wage Schedule (November 6, 2020)**
 - Updated with recoupment calculations and instructions (July 23, 2021).
 - Downloadable Attestation and Wage Schedule Excel Template (November 6, 2020).
- 4. Webinar PPT: SFY2021 Reporting and SFY22 Rates (July 21, 2021)**
 - Review of SFY2021 wage reporting.
 - SFY2022 Rate calculations, quality incentive refresh, and additional \$30 million per diem increase.
 - SFY2022 Wage reporting changes due to Appropriations Act.
 - Webinar was recorded for asynchronous viewing and review.

SFY2022 Rate Increases

- As proposed in the Governor’s Budget, the 10% COVID-19 increase in SFY2021 is continued.
- To support a full twelve months, total funding increases to \$174 million (\$87 million state).
- SFY2022 rates are also increased by \$30 million to support \$3.60 per diem increases.

- Appropriations Act

10% COVID-19 Increase: Notwithstanding the provisions of chapter 85 of Title 8 of the New Jersey Administrative Code or any other law or regulation to the contrary . . . (1) nursing facilities being paid on a fee-for-service basis shall be reimbursed at a per diem rate no less than the rate received on June 30, 2020, plus ten percent, minus the first provider tax add-on and any performance add-on amounts; (2) nursing facilities that are being paid by a Managed Care Organization (MCO) for custodial care through a provider contract that includes a negotiated rate shall receive that negotiated rate

10% COVID-19 Mandated Expenditures: (8) Each nursing facility shall use no less than sixty percent of the ten percent rate adjustment provided under section 1 above for the sole purpose of maintaining or increasing wages of staff providing direct care and, to ensure compliance, shall provide wage and cost data in a manner and form prescribed by the Commissioner of the Department of Human Services and shall return any of the sixty percent amount not used for this purpose;

(9) each nursing facility shall use the remainder of the ten percent rate adjustment provided under section 1 above for the sole purpose of COVID-19 infection control preparedness and response and shall return twenty percent of the ten percent increase if the nursing facility is cited by the Department of Health for two or more repeat infection control violations during the fiscal year; and

Per Diem Increase: (10) each nursing facility shall receive a per diem adjustment that shall be calculated based upon an additional \$15,000,000 in State and \$15,000,000 in federal appropriations.

10% Rate Increase Requirements

- Appropriations Act updated mandated expenditures and recoupment criteria.
 - At least 60% of the additional revenue must be used to increase wages or supplemental pay for **direct care** staff.
 - Reporting and recoupment requirements remain the same.
 - Change from “Certified Nurse Aides” to “direct care” does not expand the intent of the SFY2021 statute – it solely aligns the language with the previously issued [FAQ](#) to address a narrow issue at certain facilities:

Can the 60% component of the rate increase be used for employees who perform the same functions as CNAs but who hold additional credentials or licensure?

Yes, additional wage and supplemental payments may be made to staff fulfilling CNA functions, even if they hold a higher credential. Additional wage and supplemental payments may also be made to Nurse Aides that are working pursuant to emergency waivers for a limited time prior to passing their certification test.
 - Up to 40% of the additional revenue may be used to support COVID-19 preparedness and response requirements.
 - Half of this amount will be recouped if the nursing facility is cited by the Department of Health for two or more **repeat infection control violations** during the fiscal year (**single recoupment measure**).
- For SFY2022, a single final attestation is due August 12, 2022.
- The following slides will review the reporting fields for the online final attestation. In general, the portal mirrors the Final Attestation sheet of the [Excel file](#) used in SFY2021.
- The employee wage schedule is no longer required. However, the file may be useful when calculating the required summary statistics for employee counts and average wages.

Quality Incentive Payment Program (QIPP)

- **Due to SFY2021 legislation, SFY2020 QIPP add-ons carried over for SFY2021.**
- **For SFY2022, QIPP is updated to reflect changes in performance and one additional measure. Facilities can earn up to a \$3.60 per diem:**
 - Measures: Physical restraint, Antipsychotic medication, Falls with major injury, High risk residents with a pressure ulcer, Influenza vaccination (new) and CoreQ survey participation
 - SFY21 QIPP (effective 10/1/20): Carryover MDS data from Q2-4 2017 and Q1 2018. CoreQ data from 2018.
 - SFY22 QIPP: MDS data from Q1-4 2019. CoreQ data from 2021.
 - **Appropriations Act**

(6) the add-ons used for fiscal year 2021 shall be applied from July 1, 2021, through September 30, 2021 and the first add-on as calculated in section 4 above shall be applied to both MCO and fee-for-service per diem reimbursement rates effective October 1, 2021; (7) each Class I, Class II, and Class III nursing facility that has, not later than November 17, 2020, submitted to the Department of Human Services (DHS) the DHS Fiscal Year 2022 CoreQ Long-Stay Survey Size Calculation Grid with affirmative answers, as defined by the Department, to validated Hospital Utilization Tracking system use, CoreQ vendor intent, and completion of the CoreQ Long-Stay Survey sample size calculation and, if eligible for CoreQ, not later than November 27, 2020, submitted demographics to the CoreQ vendor to initiate the CoreQ survey process, (a) shall receive a performance add-on of \$.60 for each of the following CMS nursing home long stay quality measures where the nursing facility has not failed to report data for any of the reporting periods Q1 2019, Q2 2019, Q3 2019 and Q4 2019, and the simple average of the quarters, as calculated by the Department with available data, is at or below the national average, as calculated by CMS, for the percentage of long stay residents who are: physically restrained, receiving antipsychotic medication, experiencing one or more falls with major injury, and high risk residents with a pressure ulcer, (b) shall receive a performance add-on of \$0.60 if the percentage of long-stay residents who are assessed and/or given, appropriately, the influenza vaccination is at or above the national average for the 2019 CMS reporting year, and (c) shall receive a performance add-on of \$0.60 if the nursing facility has been deemed eligible to participate in the CoreQ survey process as determined by the Department and received a composite score of 75 percent or greater on the CoreQ Resident and Family Experience Survey for the fiscal year 2022 survey period;

Reporting Portal – Online Login

<http://njdoas-ua.force.com/NF>

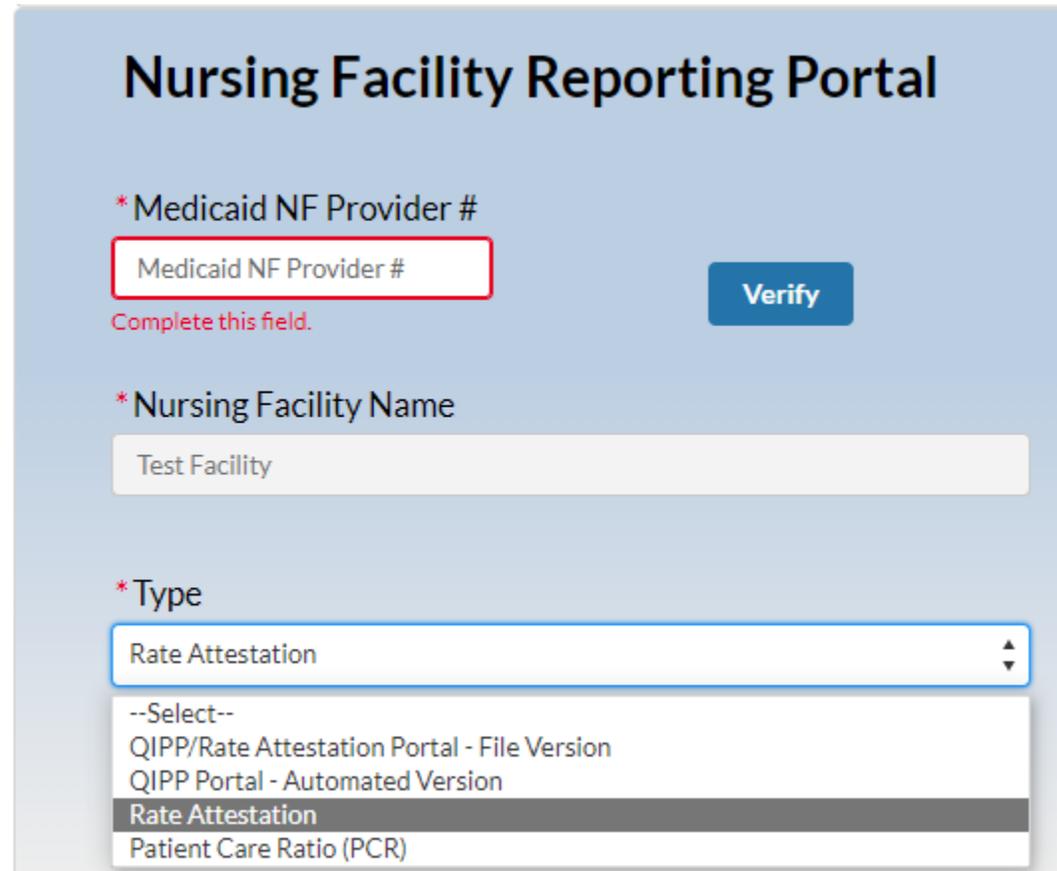
- Same login page as facilities used for SFY2021 wage reporting and QIPP data collection.
- Will also be used for Patient Care Ratio (PCR) reporting at the close of CY2022.
- Open for facility testing soon – please submit feedback to NFSubmissions@dhs.nj.gov.



The screenshot shows the login page for the Nursing Facility Reporting Portal. At the top, there is a banner for the New Jersey Department of Human Services, Division of Aging Services, featuring a collage of people and the DHS logo. Below the banner, the text "Nursing Facility Reporting Portal" is displayed. A label "* Medicaid NF Provider #" is positioned above a text input field. The input field contains the placeholder text "Medicaid NF Provider #". A blue "Verify" button is located below the input field.

Reporting Portal – Selection

- Under Type, select the “Rate Attestation” portal from the dropdown list.
- After clicking “Submit” a pop-up will appear for confirmation of the provider number and name.



Nursing Facility Reporting Portal

* Medicaid NF Provider #

Medicaid NF Provider #

Complete this field.

* Nursing Facility Name

Test Facility

* Type

Rate Attestation

--Select--
QIPP/Rate Attestation Portal - File Version
QIPP Portal - Automated Version
Rate Attestation
Patient Care Ratio (PCR)

Reporting Portal – Informational Fields



New Jersey Department of
Human Services
Division of Aging Services

[Logout](#)

Nursing Facility Portal

Nursing Facility Name: Test Facility Medicaid NF Provider#: 1234 Type: Rate Attestation

Please Enter the information of the person submitting the data.

* Federal Tax Id:

Complete this field.

* Reporting Officer Name:

Complete this field.

Reporting Officer Title:

* Reporting Officer Phone#:

Complete this field.

* Reporting Officer Email:

Complete this field.

* Payroll Date of Data:

Complete this field.

Notes:

By submitting this attestation, I certify that am an authorized representative for the above named Nursing Facility and hereby affirm and attest that in accordance with the State of New Jersey Fiscal Year 2022 Appropriations Act, the below amount of additional funding was received and expended by the Nursing Facility due to the Medicaid rate increase, calculated as follows:

Reporting Portal – Example

- A facility receiving a \$20.00 increase and billing 5,000 Medicaid days would collect an additional \$100,000 in Medicaid revenue, of which \$60,000 (60%) must be used for staff compensation.
- Facility calculates additional SFY2022 compensation of \$51,000, split 70% wage and 30% bonus.
- Facility completes the “10% Rate Increase Reporting” portal section, which captures the impact for the entire reporting period, even if some employees are no longer on payroll as of June 30, 2022.

Field	\$	Source
(1) 10% Daily Rate Increase (From notification letter)	\$20.00	Facility entry – see sample slide
(2) Medicaid days billed 07/01/2021 – 06/30/2022	5,000	Facility entry
(3) Additional funding = (1) * (2)	\$100,000	Calculated field
(4) Minimum applied to wages = (3) * 60%	\$60,000	Calculated field
(5) Direct care wages, additional amount expended	\$35,700	Facility calculation – see example slide
(6) Direct care bonus/supplemental pay	\$15,300	Facility calculation – see example slide
(7) Total CNA payments = (5) + (6)	\$51,000	Calculated field
(8) Amount (below) wage minimum = (7) - (4)	- \$9,000	Calculated field, Negative = recoupment

Reporting Portal – Example data entry

10% Rate Increase Reporting

(1) 10% Daily Rate Increase (From notification letter)	<input type="text" value="\$20.00"/>	* (2) Medicaid days billed 07/01/2021 - 06/30/2022	<input type="text" value="5,000"/>
<hr/>			
(3) Additional funding = (1) * (2)	<input type="text" value="\$100,000.00"/>	(4) Minimum applied to wages = (3) * 60%	<input type="text" value="\$60,000.00"/>

Total Expenditure Reporting

Total for 07/01/2021 - 06/30/2022

* (5) Direct care wages, additional amount expended	<input type="text" value="\$35,700.00"/>	* (6) Direct care bonus/supplemental pay	<input type="text" value="\$15,300.00"/>
<hr/>			
(7) Total CNA payments = (5) + (6)	<input type="text" value="\$51,000.00"/>	(8) Amount (below) wage minimum = (7) - (4)	<input type="text" value="-\$9,000.00"/>

Calculating "Direct care wages, additional amount expended:"

Difference in total compensation to the twelve-month value of the last pre-increase quarter

Total Compensation 07/01/2021 to 06/30/22 (minus) [Total Compensation 07/01/2020 to 06/30/20 * 4]

Notification Letter – 10% Rate Increase

Sample Rate Calculation

Rate Components	Amount
Case Mix Rate	\$191.36
10% Increase per Appropriations Act con't	19.32
<i>Raw Rate as of 10/01/2020 (reflects online rate schedule)</i>	\$210.68
Additional Funding per Appropriations Act	3.60
Performance Add-On (up to \$3.60)	.60
Provider Assessment Distribution	13.67
Total rate	\$228.55

Reporting Portal – Example

Calculating total additional compensation

- For SFY2022, the 10% rate increase was maintained. This means a facility would continue receiving the same per diem increase it had been collecting since October 1, 2020.
- Facilities must use this revenue to continue the corresponding increase in staff compensation.
- Therefore, the additional compensation calculation should show that staff compensation increased compared to the pre-increase time period.
- A simple approach is to compare total compensation in SFY2022 to annualized compensation in the quarter before the original 10% rate increase. However, please contact the Help Desk with alternative proposals if warranted by individual facility circumstances:

- **Difference in total compensation to the annualized value of the last pre-increase quarter**

Total Compensation 07/01/2021 to 06/30/2022 (minus) [Total Compensation 07/01/2020 to 09/30/20 * 4]

Reporting Portal – Workforce

- Summary statistics for employees on payroll as of June 30, 2022.

I affirm and attest to the following workforce totals:

Staff Reporting as of 06/30/2022 (employed and contracted)	# Employed	Average Hourly Wage
Certified Nurse Aide, Full Time	<input type="text" value="20"/>	<input type="text" value="\$19.00"/>
Certified Nurse Aide, Part Time	<input type="text" value="15"/>	<input type="text" value="\$18.00"/>
Certified Nurse Aide, Per Diem	<input type="text" value="10"/>	<input type="text" value="\$17.00"/>
Other Direct Care	<input type="text" value="5"/>	<input type="text" value="\$16.00"/>
<hr/>		
Total Employed and Average Wage	<input type="text" value="50"/>	<input type="text" value="\$17.50"/>

[Save](#)

Please click on "Save" to update information and enable final submission below.

Attestation for Total Expenditures

I affirm and attest that, as detailed in the Total Expenditure Reporting no less than sixty percent of the Medicaid rate adjustment provided was used for the sole purpose of increasing wages or supplemental pay for certified nurse aides providing direct care. By uploading this file, I further affirm and attest that the foregoing statements made by me are true and are supported by documentation that would meet the standards of an independent auditor. I understand that if this information is not true and supported by such documentation, the State reserves all rights of remedy and enforcement, including but not limited to recoupment of funds and offset of future payments, reimbursements and any other amounts payable to Nursing Facility by the State. I understand that the date, time and device IP address used for submission will be recorded.

[Submit](#)

Data submission History

Application PDF	Submitted Date

How to Ask Questions

**For questions, comments and technical assistance,
please email our dedicated help desk:**

NFSubmissions@dhs.nj.gov



Thank you!