



Assisted Living Report Card Advisory Group

Friday, March 15, 10:30a.m. - 12:30a.m.

Organizations represented on the Advisory Group

- AARP Minnesota
- Alzheimer's Association
- Care Providers of Minnesota
- Diverse Elders Coalition (Minnesota Leadership Council on Aging)
- Elder Voice Family Advocates
- LeadingAge Minnesota
- Managed Care Organizations
- Minnesota Board on Aging
- Minnesota Department of Health
- Minnesota Elder Justice Center
- Ombudsman for Long Term Care
- Stratis Health
- Residential Providers Association of Minnesota (RPAMN)

Review of 2023 Advisory Group meeting topics

- Topics covered in recent meetings include:
 - Updates on AL Report Card website launch
 - Building measures from AL licensing survey data: resident health, safety, and staffing measures
 - Exploring the use of maltreatment investigations findings for quality measures

Meeting agenda

Topic	Presenter	Time
AL QOL survey and report card updates	DHS	10:35am-11:05am
Resident health, safety, and staffing measure development updates	UMN	11:05am-12:05pm
Next steps and closing	DHS	12:05-12:10pm



Resident and Family Survey Updates

Updates from Vital Research: data collection progress

- Tier 1 resident surveys began in February and are scheduled to end March 31.
 - Tier 1 includes 192 facilities located in Northern MN.
- 70 facilities completed as of March 4, 2024
 - 1149 AL interviews completed (not counting incompletes)
 - 69 facilities met MOE
- Vital Research will continue to conduct Tier 1 surveys into April as needed.

Updates from Vital Research: data collection progress continued

- No facilities have refused to participate in surveys.
- First batch of family surveys was mailed the week of March 4.
 - 80 facilities included
 - 2200 representatives included
- Tier 2 surveys are scheduled to begin in April and end June 30, 2023.
 - Tier 2 includes facilities located in the seven county Twin Cities metro area.



Assisted Living Report Card Updates

Assisted Living Report Card usage

- The AL Report Card was publicly launched on January 29, 2024.
- Advisory group members have expressed interest in learning how many people have viewed the report card since launch.
- 181 unique users visited the website between 3/7 and 3/12.
 - The data available to DHS currently is limited.
 - DHS is working with MNIT to obtain more data ongoing and will provide updates to the advisory group at future meetings.

Responding to advisory group input: facility rank

- Providers raised concerns about displaying “facility rank” on the report card.
- UMN recommended removing facility rank based on their analysis.
- DHS decided to remove facility rank from the report card.

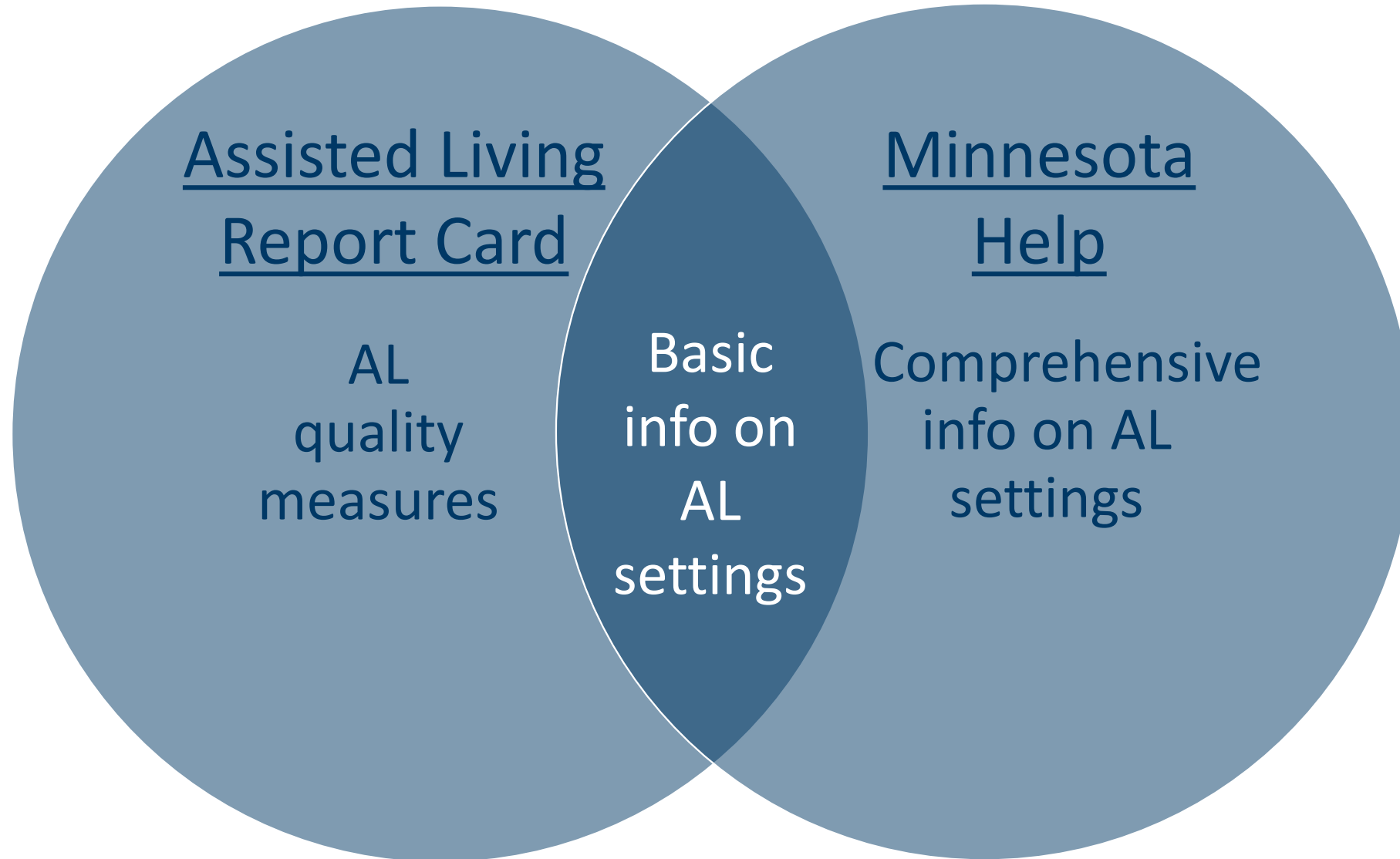
Resident Quality of Life - Details

Domains	Facility	State	Facility Rank (#1 is best)
Overall	80.4	81	80 of 498
People Who Work Here	89.7	80.6	90 of 498
Physical Environment	89.7	90.3	90 of 498
Food	89.6	75.5	90 of 498
Meaningful Activities	96.7	85.8	97 of 498
Choice Autonomy	73.6	85.7	74 of 498
Religion Spirituality	83.6	80.6	84 of 498
Safety Privacy	85.3	85.8	85 of 498
Finances	83.6	75.5	84 of 498

Responding to advisory group input: facility size

- Providers raised concerns that 2024 quality of life (QOL) scores will be based on surveys being conducted in facilities with less than 20 residents for the first time.
 - UMN will analyze 2024 QOL survey data by provider size before ratings are published.
 - DHS will decide whether to risk adjust QOL scores by provider size based on UMN's recommendation.
- Consumer advocates and providers recommended adding facility size to the report card.
 - DHS has decided to add a facility's licensed capacity to the report card.
 - This change will be implemented in a future update.

What's in scope for the Assisted Living Report Card?



Responding to advisory group input: reconsiderations

- Providers raised concerns that publishing ratings based on MDH's initial licensure survey findings will hurt providers whose reconsiderations result in a changed or removed citation.
 - Statutes provide 60 days for MDH to make a determination on a reconsideration. According to MDH, there is currently a delay of several months.
 - DHS is working with MDH and UMN to explore options that will allow us to provide consumers with timely information while accounting for the reconsideration process and timelines.

Revised timelines for additional report card ratings: MDH licensing survey and investigations findings measures

- DHS plans to begin publishing MDH licensing survey and investigations findings measures in early 2025.
 - New ratings will be added quarterly.
- DHS will use licensing surveys completed on or after July 1, 2024 for ratings.
 - Communications plan includes GovDelivery e-mail and MDH website announcement to AL providers before July 1.
- DHS will use a threshold for star ratings that will be updated annually.
 - UMN is establishing a star rating threshold for 2025 MDH licensure ratings based on surveys completed between September 2021 and December 2023.

Revised timelines for additional report card ratings: Resident quality of life and family satisfaction survey measures

- DHS plans to use a threshold approach for star ratings.
- 2024 resident and family survey ratings will be published semi-annually.
 - Jan. – Jun. 2024 QOL survey ratings will be published in late 2024/early 2025.
 - Jul. – Dec. 2024 QOL survey ratings will be published in the first half of 2025.
- In the future, thresholds will be updated annually, and scores will be published quarterly.

Questions?



Recommendations on MDH licensure survey measures

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Goals/objectives

- Establish a methodology for weighting tags according to scope and severity and developing a system for calculating scores and star ratings.
- Determine the need and parameters for implementing risk adjustment.
- Define a schedule for updating scores across all measures, including MDH licensure surveys and resident and family quality of life surveys.

How we calculate scores based on scope and severity

- For national skilled nursing facility provider ratings, CMS calculates a health inspection score based on points assigned to deficiencies identified at each provider's most recent recertification.
- We used the smaller values listed in this points system.

Table 1
Health Inspection Score: Weights for Different Types of Deficiencies

Severity	Scope		
	Isolated	Pattern	Widespread
Immediate jeopardy to resident health or safety	J 50 points* (75 points)	K 100 points* (125 points)	L 150 points* (175 points)
Actual harm that is not immediate jeopardy	G 20 points	H 35 points (40 points)	I 45 points (50 points)
No actual harm with potential for more than minimal harm that is not immediate jeopardy	D 4 points	E 8 points	F 16 points (20 points)
No actual harm with potential for minimal harm	A 0 point	B 0 points	C 0 points

Tag distributions

	Citation Scope/Severity												Grand Total
	A	B	C	D	E	F	G	H	I	J	K	L	
Domain	0	0	0	4	8	16	20	35	45	50	100	150	
Resident Health Outcome													
Proportion at this SS Level	0%	0%	0%	47%	11%	35%	2%	1%	4%	0%	0%	0%	100%
Citation Count	2	4	20	2,049	486	1,536	101	27	168	1	0	0	4,394
Safety													
Proportion at this SS Level	0%	0%	1%	14%	4%	78%	1%	0%	3%	0%	0%	0%	100%
Citation Count	3	2	45	767	212	4,272	40	20	142	0	0	0	5,503
Staffing													
Proportion at this SS Level	0%	0%	4%	38%	9%	46%	0%	0%	3%	0%	0%	0%	100%
Citation Count	9	2	97	910	205	1,116	6	0	64	0	0	0	2,409
Total Proportion at this SS Level	0%	0%	1%	30%	7%	56%	1%	0%	3%	0%	0%	0%	100%
Total Citation Count	14	8	162	3,726	903	6,924	147	47	374	1	0	0	12,306

Calculating 5-star ratings for licensure surveys

- We propose the 5-star rating system:
 - 5 Stars: Mean plus $1\frac{1}{2}$ standard deviations or top 7%
 - 4 Stars: Mean plus $\frac{1}{2}$ to $1\frac{1}{2}$ standard deviations
 - 3 Stars: Mean plus or minus $\frac{1}{2}$ standard deviations
 - 2 Stars: Mean minus $\frac{1}{2}$ to $1\frac{1}{2}$ standard deviations
 - 1 Star: Mean minus $1\frac{1}{2}$ standard deviations

Calculating 5-star ratings, cont.

- Once a facility has 2 eligible surveys, we propose weighting surveys using a similar method that CMS uses for nursing homes (surveys completed prior to 7/1/24 will be excluded).
 - Current survey will be weighted $\frac{2}{3}$ and the previous survey $\frac{1}{3}$.
 - If there is only 1 survey, it will be weighted by 1.

Peer approach for licensure surveys

- A peer group is a group of facilities with the similar characteristics. We explored: 1) geography, 2) size, and 3) licensure type (ALF, ALF-DC)

Facility Size**	Geography**	License Type
Micro (1-5 beds)	Twin Cities Metro (TCM)	ALF
Small (6-50 beds)	Rest of the State (ROS)	ALF-DC
Large (51+ beds)		

** we recommend peering by size and geography

Response to recommendations

- What are your responses to our proposed recommendations?
 - Weighting by scope and severity
 - Standard deviation for star ratings
 - Combining 2 rounds of licensure surveys and weighing them differently
 - Peering recommendations

How to establish a scoring method with rolling data collection

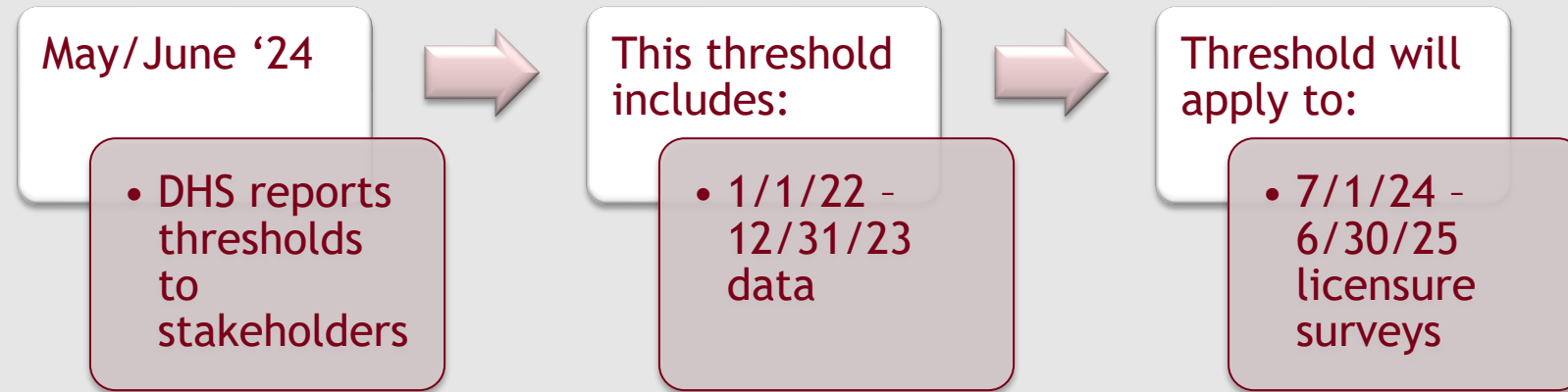
- Licensure surveys are conducted every 24 months using rolling data collection
- *This may result in the earliest participants getting more stars for lower scores and the later participants getting less stars for higher scores because of the differences in sample composition (could go either direction).*
- A way to lessen this issue is to develop thresholds that will be used as a benchmark for all facilities. Thresholds are based on the previous round of survey data.

Calculating a threshold from licensure surveys

- What is a threshold?
 - For our purposes, a threshold is a fixed score that defines the boundaries for each 5-star category for a given peer group.
 - Each 5-star category will have an upper and lower boundary
 - An example: 5-star (0-16), 4-star (17-39), 3-star (40-83), 2-star (84-127) and 1-star (128 or higher)
- Licensure survey thresholds will be communicated to stakeholders before thresholds will be applied- informing all of benchmarks for the coming year
- Thresholds will be updated yearly

Frequency of updates for licensure surveys

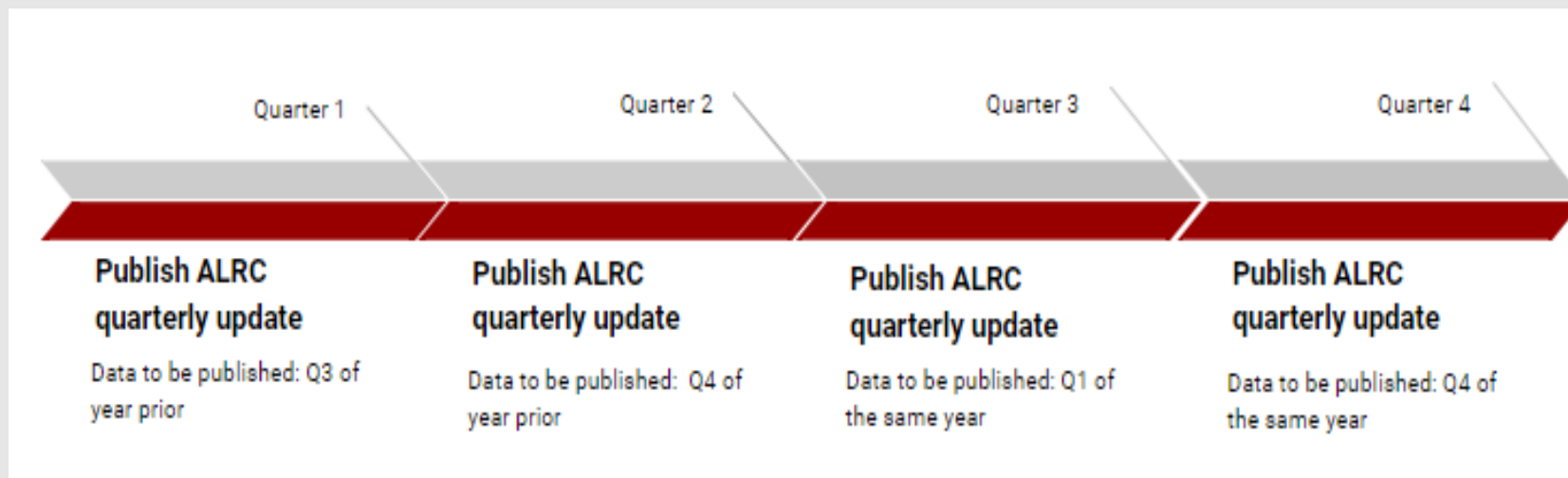
- Thresholds will be updated yearly using the previous 2 years of licensure survey data



- Tentative schedule: thresholds are calculated using the calendar year (Jan-Dec) and they will apply to surveys in the following state fiscal year (July-June). Every year, thresholds will be applied to surveys starting in July and reported to providers ahead of July.

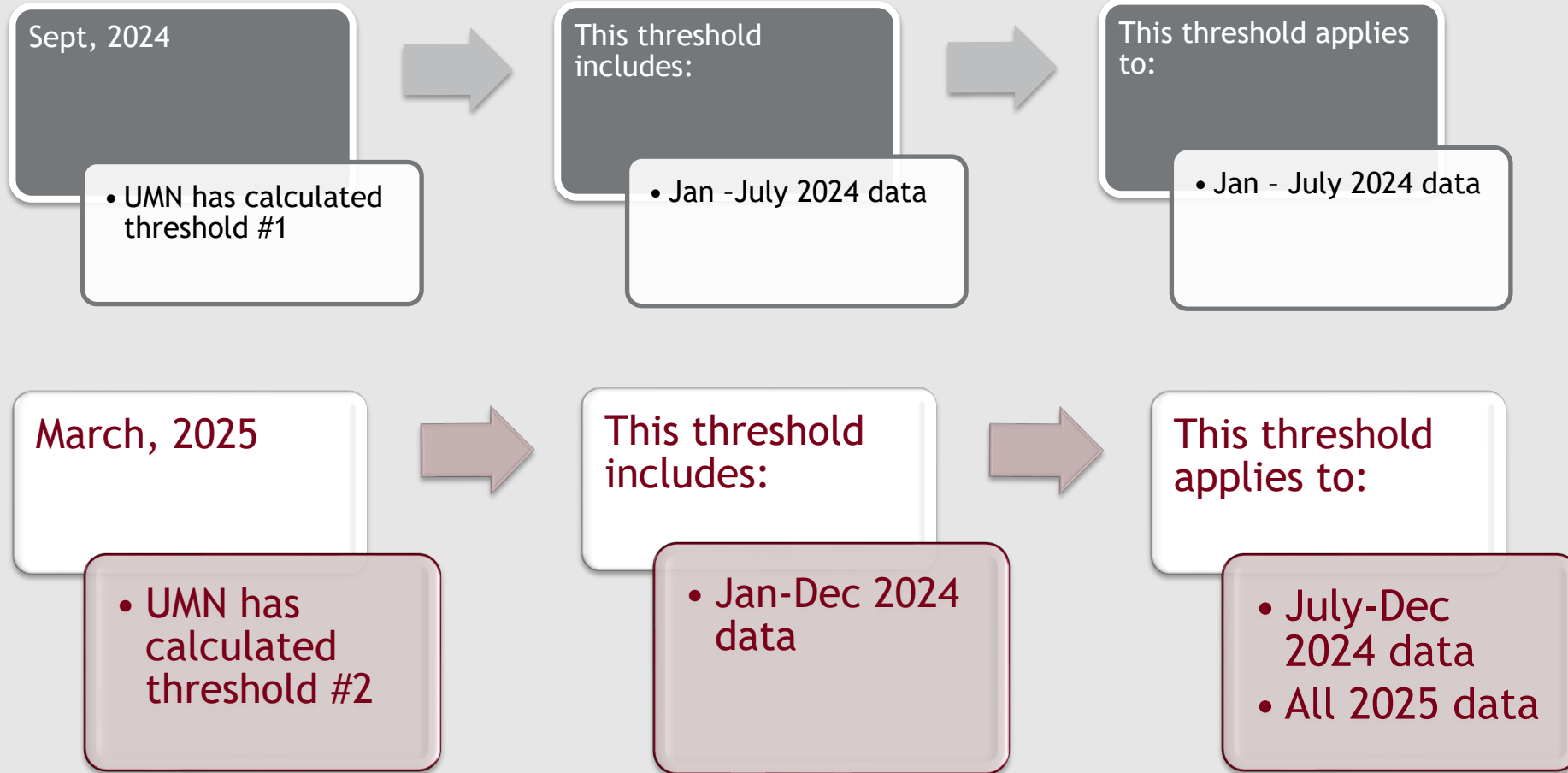
Frequency of updates for licensure surveys

- 5-star ratings: The long-term goal is to update licensure survey 5-star ratings quarterly. Below is an example timeline



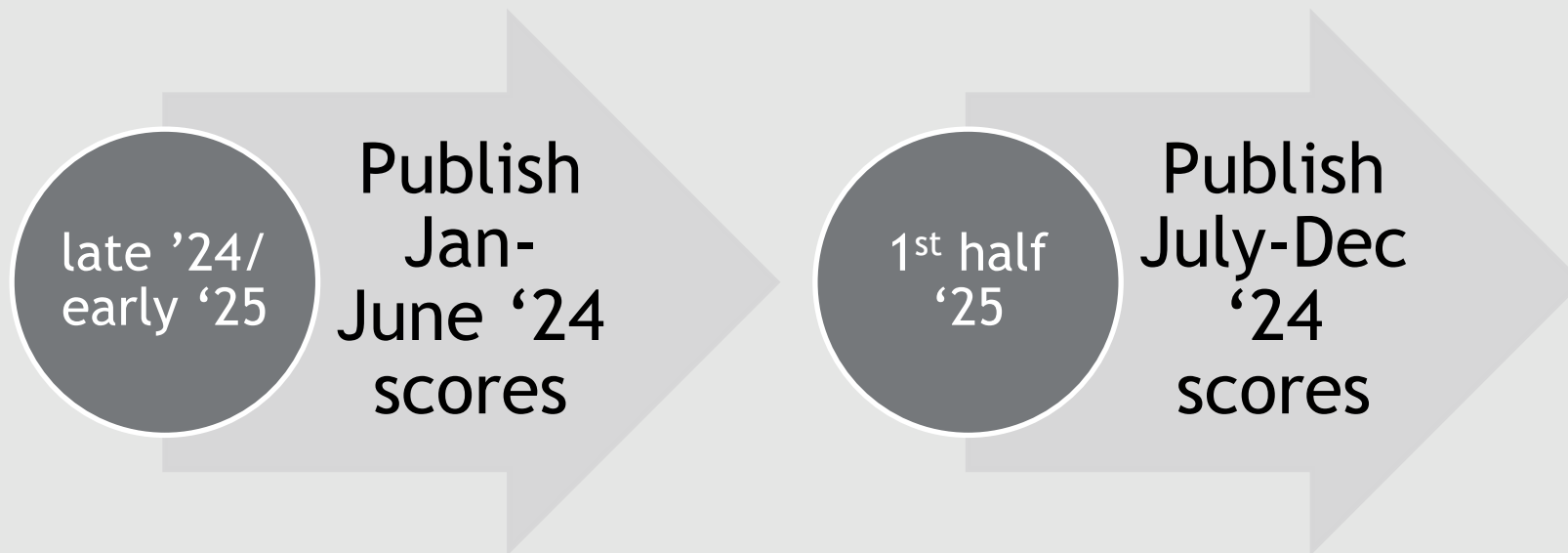
Frequency of updates: resident/ family surveys

- Thresholds: In 2024 and 2025, 2 thresholds will be used



Frequency of updates: resident/family surveys

- 5-star ratings: The 2024 round of ratings will be published semi-annually. The goal is to move towards quarterly updates of 5-star ratings.





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Next steps and Q&A

Next steps for the Advisory Group

- Today's meeting slides and notes will be posted to the project webpage:
www.mn.gov/dhs/assisted-living-report-card
- Our next meeting is TBD. Topics will likely include:
 - UMN updates on licensing survey measure development.
 - DHS/Vital Research updates on 2024 resident and family surveys.



Questions?

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