

**Nursing Home National Provider Survey for the
National Impact Assessment of CMS Quality and Efficiency Measures**

Version 2.0
October 1, 2014

ACKNOWLEDGMENTS

This survey is being developed/prepared under contract to the Centers for Medicare & Medicaid Services (CMS) by:
Health Services Advisory Group, Inc. (HSAG) and
The RAND Corporation
1776 Main Street
Santa Monica, CA 90401

The survey may not be circulated or used without permission from CMS, HSAG, and the RAND Corporation. All questions related to the development or use of this survey should be sent to Beverly Weidmer of the RAND Corporation at Beverly_Weidmer@rand.org or Kyle Campbell of HSAG at kcampbell@hsag.com.

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is **0938-NEW**. The time required to complete this information collection is estimated to average 40 minutes per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

DEFINITION OF KEY TERMS IN THIS SURVEY

CMS quality and efficiency measures: Measures of clinical processes and outcomes, patient experience with care, patient safety, resource use or cost of care, and structural measures (such as nursing home's use of clinical database registries). These measures are reported by nursing homes to the Centers for Medicare & Medicaid Services (CMS) and can be found at <http://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/NursingHomeQualityInits/index.html>. Measures come from resident assessment data that nursing homes routinely collect on the residents at specified time intervals during their stay. These measures assess the resident's physical and clinical conditions and abilities, as well as preferences and life-care wishes.

Accountable Care Organizations (ACO): ACOs are networks of healthcare providers and organizations (usually hospitals and ambulatory care physician groups, and possibly including nursing homes, home health, and hospice organizations) that agree to take some financial responsibility for reducing the costs and improving the quality of care for a defined patient population.

Clinical decision support (CDS): CDS encompasses a variety of tools to enhance decision-making in the clinical workflow. These tools include computerized alerts and reminders to care providers and patients; clinical guidelines; condition-specific order sets; focused patient data reports and summaries; documentation templates; diagnostic support; and contextually relevant reference information, among other tools.¹

Culture of safety: Organizations with a positive safety culture are characterized by communications founded on mutual trust, by shared perceptions of the importance of safety, and by confidence in the efficacy of preventive measures.

Integrated Delivery System (IDS): An IDS is an integrated network of healthcare providers and organizations (such as nursing home, primary and specialty care, hospital, rehabilitation, home health care, and hospice) that provides or arranges to provide a coordinated continuum of services to a defined population. It may own or be closely aligned with an insurance product, usually a form of managed care.

Lean/Six Sigma Engineering: Redesign or re-engineering concepts that were originally developed to increase the efficiency of production and reduction of errors within manufacturing companies. Lean/Six Sigma has been adopted by healthcare organizations to identify problems or inefficiencies and take actions to address these issues. "Lean" and "Six Sigma" emphasize focusing on customer satisfaction, problem solving, and elimination of waste and involving employees in identifying and resolving the problem.

¹ Source: <http://www.healthit.gov/policy-researchers-implementers/clinical-decision-support-cds>

Learning Organization: An organization that encourages and supports continuous employee learning, critical thinking, and risk-taking with new ideas.

Plan, Do, Study Improvement Cycles (PDSA): PDSA is a tool that is used for accelerating quality improvement that involves developing a **plan** to test the change (**Plan**), carrying out the test (**Do**), observing and learning from the consequences (**Study**), and determining what modifications should be made to the test (**Act**).

Situation Background Assessment Recommendation (SBAR): SBAR Situation Background Assessment Recommendation (SBAR) is a standardized way of communicating that promotes patient safety by helping individuals communicate with each other with a shared set of expectations. Staff and physicians can use SBAR to share patient information in a concise and structured format.

YOUR NURSING HOME'S EXPERIENCE WITH CMS MEASURES

1. In the last 12 months, has your nursing home's performance on CMS measures...

- Improved across the board on all measures
- Improved on some measures but not on others
- Approximately stayed the same
- Declined on some measures but not on others
- Declined across the board on all measures

2. In your opinion, how well does your nursing home's performance on the CMS measures reflect the improvements in care that your nursing home makes?

- Very well
- Somewhat well
- Not well at all

3. Thinking about the full list of CMS nursing home measures, do you think the CMS measures are clinically important?

- Yes
- Mostly yes
- Mostly no
- No

4. Do you think nursing homes should be held responsible for performance on the CMS measures?

- Yes
- Mostly yes
- Mostly no
- No

5. Have you experienced difficulties with improving performance on any of the CMS measures?

- Yes on many of the measures
- Yes on some of the measures
- No → If "No," go to question 8

6. Based on your nursing home's experience, is it more difficult to improve on certain types of measures than on others? Such as....

(Mark one in each row)

- | | | |
|---|-----|----|
| a. Clinical process measures (for example: Percent of patients who were assessed and appropriately given the seasonal Influenza vaccine [Short Stay]) | Yes | No |
| b. Patient outcomes measures (for example: Percent of Residents with a Urinary Tract Infection [Long Stay]) | Yes | No |
| c. Patient Experience measures (for example: CAHPS Nursing Home Survey results) | Yes | No |
| d. Patient Safety measures (for example: Percent of residents experiencing one or more falls [Long Stay]) | Yes | No |

7. Have any of the following contributed to your nursing home's difficulties with improving performance on the CMS measures?

(Mark one in each row)

- | | | |
|---|-----|----|
| a. Difficulty identifying improvement strategies | Yes | No |
| b. Difficulty implementing improvement strategies | Yes | No |
| c. Difficulty identifying processes of care that lead to Improved patient outcomes | Yes | No |
| d. Difficulty getting front-line staff to change behavior to improve performance | Yes | No |
| e. Insufficient resources (e.g., staffing, training, tools) | Yes | No |
| f. Inadequate Health Information Technology (IT) resources and capabilities (e.g., clinical decision support, longitudinal tracking of outcomes, electronic medication administration system) | Yes | No |
| g. Staff turnover | Yes | No |
| h. Lack of senior leadership support | Yes | No |
| i. Lack of sufficient support from patient's physicians, nurses or other staff | Yes | No |
| j. Lack of sufficient time for patient's physicians, nurses or other staff to participate | Yes | No |
| k. Difficulty with coding or documentation (e.g., lack of consistency across staff, insufficient documentation) | Yes | No |
| l. Lack of training on improvement processes | Yes | No |
| m. A challenging or complex patient population | Yes | No |
| n. Culture that does not support improvement efforts | Yes | No |
| o. Other reason (please specify: _____) | Yes | No |

INNOVATIONS IN THE DELIVERY OF CARE

8. We are interested in understanding what changes your nursing home has made in the way care is being delivered to improve its quality performance. Has your nursing home made any of the following changes in order to improve performance on the CMS measures?

Type of Change or Innovation	Has this change or innovation been made in your nursing home?	If change was made, has it helped improve your nursing home's performance on one or more CMS measures?
Organizational Culture		
a. Adopted practices to become a "learning organization."	<input type="checkbox"/> Yes <input type="checkbox"/> <input type="checkbox"/> No <input type="checkbox"/>	<input type="checkbox"/> Yes, definitely <input type="checkbox"/> Yes, somewhat <input type="checkbox"/> No <input type="checkbox"/> Don't know/Not sure
b. Implemented a "culture of safety."	<input type="checkbox"/> Yes <input type="checkbox"/> <input type="checkbox"/> No <input type="checkbox"/>	<input type="checkbox"/> Yes, definitely <input type="checkbox"/> Yes, somewhat <input type="checkbox"/> No <input type="checkbox"/> Don't know/Not sure
Health Information Technology		
c. Implemented an electronic health record (EHR).	<input type="checkbox"/> Yes <input type="checkbox"/> <input type="checkbox"/> No <input type="checkbox"/>	<input type="checkbox"/> Yes, definitely <input type="checkbox"/> Yes, somewhat <input type="checkbox"/> No <input type="checkbox"/> Don't know/Not sure
d. Implemented electronic tools to support frontline clinical staff, such as clinical decision support (CDS), condition-specific electronic alerts, automated prompts, or medication administration system (MAR).	<input type="checkbox"/> Yes <input type="checkbox"/> <input type="checkbox"/> No <input type="checkbox"/>	<input type="checkbox"/> Yes, definitely <input type="checkbox"/> Yes, somewhat <input type="checkbox"/> No <input type="checkbox"/> Don't know/Not sure
e. Implemented an <u>electronic</u> health information system that shares key patient information with providers in the community (e.g., hospitals and ambulatory care providers).	<input type="checkbox"/> Yes <input type="checkbox"/> <input type="checkbox"/> No <input type="checkbox"/>	<input type="checkbox"/> Yes, definitely <input type="checkbox"/> Yes, somewhat <input type="checkbox"/> No <input type="checkbox"/> Don't know/Not sure

Type of Change or Innovation	Has this change or innovation been made in your nursing home?	If change was made, has it helped improve your nursing home's performance on one or more CMS measures?
Care Process Redesign		
f. Implemented risk prediction tools to identify and manage high-risk patients.	<input type="checkbox"/> Yes <input type="checkbox"/> <input type="checkbox"/> No <input type="checkbox"/>	<input type="checkbox"/> Yes, definitely <input type="checkbox"/> Yes, somewhat <input type="checkbox"/> No <input type="checkbox"/> Don't know/Not sure
g. Implemented standardized care protocols or checklists.	<input type="checkbox"/> Yes <input type="checkbox"/> <input type="checkbox"/> No <input type="checkbox"/>	<input type="checkbox"/> Yes, definitely <input type="checkbox"/> Yes, somewhat <input type="checkbox"/> No <input type="checkbox"/> Don't know/Not sure
h. Implemented appropriateness criteria to guide physician decision making for selected procedures, imaging studies, or tests.	<input type="checkbox"/> Yes <input type="checkbox"/> <input type="checkbox"/> No <input type="checkbox"/>	<input type="checkbox"/> Yes, definitely <input type="checkbox"/> Yes, somewhat <input type="checkbox"/> No <input type="checkbox"/> Don't know/Not sure
i. Adopted care redesign/re-engineering (e.g., Deming/Lean Engineering, Six Sigma, Plan, Do, Study, Act (PDSA) improvement cycles).	<input type="checkbox"/> Yes <input type="checkbox"/> <input type="checkbox"/> No <input type="checkbox"/>	<input type="checkbox"/> Yes, definitely <input type="checkbox"/> Yes, somewhat <input type="checkbox"/> No <input type="checkbox"/> Don't know/Not sure
j. Implemented interdisciplinary rounds or team "huddles" or formation of multi-specialty patient care teams.	<input type="checkbox"/> Yes <input type="checkbox"/> <input type="checkbox"/> No <input type="checkbox"/>	<input type="checkbox"/> Yes, definitely <input type="checkbox"/> Yes, somewhat <input type="checkbox"/> No <input type="checkbox"/> Don't know/Not sure
k. Implemented or changed communication protocols to support or improve collaboration among clinicians and staff (i.e., Situation Background Assessment Recommendation (SBAR), hand off, or paging protocols, etc.)	<input type="checkbox"/> Yes <input type="checkbox"/> <input type="checkbox"/> No <input type="checkbox"/>	<input type="checkbox"/> Yes, definitely <input type="checkbox"/> Yes, somewhat <input type="checkbox"/> No <input type="checkbox"/> Don't know/Not sure
Feedback and Monitoring of Performance		
l. Developed a system for tracking patient outcomes.	<input type="checkbox"/> Yes <input type="checkbox"/> <input type="checkbox"/> No <input type="checkbox"/>	<input type="checkbox"/> Yes, definitely <input type="checkbox"/> Yes, somewhat <input type="checkbox"/> No <input type="checkbox"/> Don't know/Not sure

Type of Change or Innovation	Has this change or innovation been made in your nursing home?	If change was made, has it helped improve your nursing home's performance on one or more CMS measures?
Changing Provider Incentives		
m. Provided routine feedback on your nursing home's performance on CMS measures to physicians, nurses, and other staff.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes, definitely <input type="checkbox"/> Yes, somewhat <input type="checkbox"/> No <input type="checkbox"/> Don't know/Not sure
n. Used performance on CMS measures as a basis for determining pay for nurses or other staff.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes, definitely <input type="checkbox"/> Yes, somewhat <input type="checkbox"/> No <input type="checkbox"/> Don't know/Not sure
o. Implemented an internal incentive or bonus program for senior clinical leaders and/or senior management based on performance on CMS measures.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes, definitely <input type="checkbox"/> Yes, somewhat <input type="checkbox"/> No <input type="checkbox"/> Don't know/Not sure
p. Gave nursing home staff awards or other special recognition tied to quality performance.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes, definitely <input type="checkbox"/> Yes, somewhat <input type="checkbox"/> No <input type="checkbox"/> Don't know/Not sure
Changes in Staffing		
q. Increased the number of staff dedicated to quality improvement or quality management. <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes, definitely <input type="checkbox"/> Yes, somewhat <input type="checkbox"/> No <input type="checkbox"/> Don't know/Not sure
r. Identified Physician/Nurse champions for quality improvement initiatives or projects.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes, definitely <input type="checkbox"/> Yes, somewhat <input type="checkbox"/> No <input type="checkbox"/> Don't know/Not sure
s. Implemented changes to how nursing staff is deployed (e.g., change in staffing levels or work hours, use of contract or contingent staff)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes, definitely <input type="checkbox"/> Yes, somewhat <input type="checkbox"/> No <input type="checkbox"/> Don't know/Not sure

Type of Change or Innovation	Has this change or innovation been made in your nursing home?	If change was made, has it helped improve your nursing home's performance on one or more CMS measures?
Other		
t. Provided training to nurses, nurses' aides, and other staff on quality improvement strategies.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes, definitely <input type="checkbox"/> Yes, somewhat <input type="checkbox"/> No <input type="checkbox"/> Don't know/Not sure
u. Implemented quality improvement initiatives targeted to specific CMS measures.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes, definitely <input type="checkbox"/> Yes, somewhat <input type="checkbox"/> No <input type="checkbox"/> Don't know/Not sure
v. Obtained technical assistance from CMS (i.e., a CMS Quality Improvement Organization) or from private organizations (e.g., quality improvement collaboratives, consulting firms) to collect and report CMS quality measures.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes, definitely <input type="checkbox"/> Yes, somewhat <input type="checkbox"/> No <input type="checkbox"/> Don't know/Not sure
w. Other change or innovation. Please specify:	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes, definitely <input type="checkbox"/> Yes, somewhat <input type="checkbox"/> No <input type="checkbox"/> Don't know/Not sure

9. Have the changes your nursing home has made in response to the CMS measures led to improvements in areas of care not measured by CMS?

- ¹ Yes
² No → If "No," go to question 11
³ Don't know

10. Has your nursing home measured or documented the actual improvements in the areas of care not measured by CMS?

- ¹ Yes
² No

CHALLENGES TO REPORTING THE CMS MEASURES

11. Has your nursing home experienced difficulties in reporting the CMS measures?

¹ Yes

² No → If "No," go to question 13

12. Which of the following reasons have contributed to your nursing home's difficulties in reporting CMS measures?

(Mark all that apply)

¹ Difficulty capturing the data needed for measure construction

² Difficulty extracting the data from the EHR or other data systems/registries

³ Difficulty interpreting measure specifications

⁴ Insufficient or inadequate staffing or other resources

⁵ Challenges with CMS reporting tools or interface

⁶ Other reason (please specify: _____)

FACTORS ASSOCIATED WITH CHANGE IN QUALITY PERFORMANCE

13. There are many factors that influence a nursing home's decision to invest in efforts to improve its quality performance. Please rank the importance of each of the following factors in your nursing home's decision to invest or not invest in quality improvement efforts for CMS measures.

(Please rank by order of importance where 1 is the most important and 4 is the least important)

_____ a. Potential to receive financial incentives for improved performance (i.e., pay for performance)

_____ b. Threat of financial penalties for low performance (e.g., non-payment for nursing home readmissions within 30 days or for nursing home-acquired infections)

_____ c. Public reporting of your nursing home's performance results on the CMS Nursing Home Compare website

_____ d. Participation in alternative payment models (e.g., ACOs, bundled payment arrangements) where there is an opportunity for shared reward (savings) and shared financial risk

14. Many different factors may help a nursing home improve its performance. Please rank the **top 3 factors** that have helped your nursing home improve performance on some or all of the CMS measures.

Mark here if your nursing home has had no improvement on any CMS measures → Go to question 15.

(Rank order the 3 most important from 1-3. Assign 1 to the most important factor, 2 to the next most important factor, and 3 to the next most important factor.)

- _____ a. Your nursing home's organizational culture
- _____ b. Nursing home leadership support and engagement
- _____ c. Effective relationship between management and staff
- _____ d. Having dedicated resources for quality improvement
- _____ e. Internal incentives tied to performance on CMS measures
- _____ f. Internal accountability for performance on CMS measures
- _____ g. Having strong data systems
- _____ h. Providing feedback to physicians, nurses, and other staff on performance on CMS measures
- _____ i. Having a system-wide focus on quality and quality improvement
- _____ j. Networking with other nursing homes and health systems to identify elements of high-performing organizations
- _____ k. Investments in care redesign or re-engineering
- _____ l. Investments in patient safety
- _____ m. Other (please specify: _____)

UNDESIRE D EFFECTS OF CMS QUALITY MEASUREMENT PROGRAMS

The use of quality and efficiency measures may potentially result in undesired effects. The next questions ask about your nursing home's knowledge of or experience with undesired effects of the CMS measures and their use in public reporting and pay for performance. All of the responses you provide are confidential and are intended to help CMS in modifying reporting programs so as to avoid the programs' causing undesired effects. Your candid feedback is important in helping CMS improve these programs so that they work well for providers and their patients.

15. Has your nursing home observed any undesired effects stemming from using or reporting CMS measures?

- ¹ Yes, definitely
² Yes, somewhat
³ No

16. In your opinion, do you think any of the following has occurred in your nursing home as a result of your nursing home being held accountable for performance on CMS measures?

(Mark one in each row)

- | | | |
|--|-----|----|
| a. Fewer resources for quality improvement in areas of clinical care that are <u>not the focus of</u> CMS performance measures | Yes | No |
| b. Focus on narrow improvement for specific measures rather than across the board improvement in care | Yes | No |
| c. Overtreatment of patients to ensure that a measure is met | Yes | No |
| d. Increased focus on documentation or coding of data to attain a higher score | Yes | No |
| e. Changing coding of data or documentation to ensure that a measure is met | Yes | No |
| f. Avoiding sicker or more challenging patients when providing care | Yes | No |

The next questions ask about other nursing homes' experience with undesired effects of the CMS measures and their use in public reporting and pay for performance.

17. To your knowledge, have other nursing homes observed any undesired effects stemming from the CMS measures and their use in public reporting and for payment/value-based purchasing?

- ¹ Yes, definitely
² Yes, somewhat
³ No
⁴ Don't know

18. To your knowledge, have any of the following occurred in other nursing homes as a result of being held accountable for performance on CMS measures?

(Mark one in each row)

- | | | | |
|--|-----|----|------------|
| a. Fewer resources for quality improvement in areas of clinical care that are <u>not the focus of</u> CMS performance measures | Yes | No | Don't know |
| b. Focus on narrow improvement for specific measures rather than across the board improvement in care | Yes | No | Don't know |
| c. Overtreatment of patients to ensure that a measure is met | Yes | No | Don't know |
| d. Increased focus on documentation or coding of data to attain a higher score | Yes | No | Don't know |
| e. Changing coding of data or documentation to ensure that a measure is met | Yes | No | Don't know |
| f. Avoiding sicker or more challenging patients when providing care | Yes | No | Don't know |

PERSPECTIVES OF NURSING HOME LEADERSHIP AND OTHER STAKEHOLDERS

19. Does your nursing home have a board of directors?

- ¹ Yes
² No → If "No," go to question 23

20. How often do meetings of your nursing home's board of directors include a review and discussion of the nursing home's performance on the CMS measures? *(Mark one)*

- ¹ More than four times per year
² Quarterly
³ Twice per year
⁴ Annually
⁵ Less than once per year

21. Which of the following best describes your nursing home's board of directors?

(Mark one)

¹ Board is more engaged in financial performance issues than quality performance issues.

² Board is equally engaged in financial performance issues and quality performance issues.

³ Board is more engaged in quality performance issues than financial performance issues.

22. On a scale from 0 to 10, where 0 is not at all supportive and 10 is extremely supportive, how would you describe the nursing home board of director's support of your nursing home's efforts to improve performance on CMS measures?

0 – Not at all supportive

1

2

3

4

5

6

7

8

9

10 – Extremely supportive

23. On a scale from 0 to 10, where 0 is not at all supportive and 10 is extremely supportive, how would you describe the nursing home leadership's (e.g., the C-Suite executive management) support of your nursing home's efforts to improve performance on CMS measures?

0 – Not at all supportive

1

2

3

4

5

6

7

8

9

10 – Extremely supportive

24. On a scale from 0 to 10, where 0 is not at all and 10 is a great deal, how much does your nursing home leadership promote a culture of quality?

0 – Not at all

1

2

3

4

5

6

7

8

9

10 – A great deal

25. On a scale from 0 to 10, where 0 is not at all supportive and 10 is extremely supportive, how would you describe the nursing staff's support of your nursing home's efforts to improve performance on CMS measures?

0 – Not at all supportive

1

2

3

4

5

6

7

8

9

10 – Extremely supportive

26. On a scale from 0 to 10, where 0 is not at all supportive and 10 is extremely supportive, how would you describe your physician staff's support of your nursing home's efforts to improve performance on CMS measures?

0 – Not at all supportive

1

2

3

4

5

6

7

8

9

10 – Extremely supportive

USE OF HEALTH INFORMATION TECHNOLOGY

These next questions are about your nursing home's use of and outside provider access to Health Information Technology.

27. Does your nursing home have an electronic health record (EHR)?

- ¹ Yes
² No → If "No," go to question 33

28. Is your nursing home's EHR able to exchange information electronically across all units in the nursing home?

- ¹ Yes
² No

29. Are health providers in your community (i.e., ambulatory care physicians, hospitals) able to access your nursing home's EHR or health information system to obtain key clinical data on patients?

- ¹ Yes, all key clinical data
² Yes, some key clinical data
³ No → If "No," go to question 31

30. Which of the following types of information are health providers in your community (i.e., ambulatory care physicians, hospitals) able to access electronically through your nursing home's EHR or health information system?

(Mark one in each row)

a. Diagnostic/treatment summary	Yes, all	Yes, Some	No
b. Lab tests/Imaging results	Yes, all	Yes, Some	No
c. Prescribed medications	Yes, all	Yes, Some	No

31. Is your nursing home able to access electronically information on your patients from other providers in your community (i.e., ambulatory care physicians, hospitals)?

- ¹ Yes, for all or most patients
² Yes, for some patients
³ No

32. Does your nursing home's EHR have an interface or other tools that help with...

(Mark one in each row)

- | | | |
|--|-----|----|
| a. Medication tracking and reconciliation? | Yes | No |
| b. Evidence-based treatment or clinical decision support? | Yes | No |
| c. Collection of CMS measures? | Yes | No |
| d. Reporting of CMS measures? | Yes | No |
| e. Tracking or monitoring of quality of care
and/or patient outcomes? | Yes | No |
| f. Administration of medication? | Yes | No |

33. Not including an EHR, does your nursing home use any other software or electronic tools that help with....

(Mark one in each row)

- | | | |
|--------------------------------|-----|----|
| a. Collection of CMS measures? | Yes | No |
| b. Reporting of CMS measures? | Yes | No |

CHARACTERISTICS OF YOUR NURSING HOME

These next questions will help us to describe the nursing homes that participate in this survey.

34. Is your nursing home affiliated with a nursing home system?

- ¹ Yes
² No

35. Is your nursing home part of an integrated delivery system?²

- ¹ Yes
² No

36. How many competitor nursing homes exist within your nursing home's service area?

- ¹ 0
² 1
³ 2
⁴ 3
⁵ 4
⁶ 5
⁷ 6 or more

37. Compared to your competitors, how well does your nursing home perform on the CMS quality measures?

- ¹ Better
² About the same
³ Worse
⁴ Don't know

38. Do you face a shortage of nurses in your area?

- ¹ Yes
² No

39. Does your nursing home participate in any of the following types of Accountable Care Organizations (ACO's)?

² An Integrated Delivery System (IDS) is a network of healthcare providers and organizations (i.e., nursing home, primary and specialty care, rehabilitation, home health care, hospice) that provides or arranges to provide a coordinated continuum of services to a defined population. It may own or be closely aligned with an insurance product, usually a form of managed care.

(Mark one in each row)

- | | | |
|--|-----|----|
| a. Medicare Shared Savings Program | Yes | No |
| b. Medicare Pioneer ACO | Yes | No |
| c. Medicare's Advanced Payment Model ACO | Yes | No |
| d. Medicaid ACO | Yes | No |
| e. A private, commercially insured ACO arrangement
(within an HMO or PPO) | Yes | No |

40. Is your nursing home participating in any other type of alternative payment model that may have shared savings or shared risk (e.g., *Global budgets, bundled payments for selected procedures*)?

- ¹ Yes
² No

41. Does your nursing home participate in other non-CMS quality and efficiency measure reporting programs sponsored by:

(Mark one in each row)

- | | | |
|---|-----|----|
| a. Medicaid | Yes | No |
| b. The state where your nursing home is located | Yes | No |
| c. Commercial insurers | Yes | No |
| d. Employer or multi-stakeholder collaboratives | Yes | No |

42. Across your nursing home's entire book of business, approximately what percentage of your patients is comprised of...?

(Please provide your best estimate. Your estimates should add to 100%.)

- _____ % Medicare only patients
_____ % Medicaid only and Dual eligible (Medicare and Medicaid) patients
_____ % Commercially-insured patients
_____ % Private-pay patients
_____ % Uninsured patients

RESPONDENT BACKGROUND

43. Which of the following best describes your job title or position within this nursing home?

(Mark one)

- 1 Chief Executive Officer
- 2 Chief Medical Officer
- 3 Chief Nursing Officer
- 4 Senior leader responsible for quality of clinical care (e.g., VP for Quality)
- 5 Member of a team responsible for measuring and reporting quality of clinical care
- 6 Some other role (Please specify: _____)

44. How many years have you been in your current position within this nursing home?

- 1 Less than one year
- 2 One to three years
- 3 More than 3 years

45. Are you a physician?

- 1 Yes (please specify Specialty: _____)
- 2 No

46. Did anyone else help you complete this survey?

- 1 Yes
- 2 No → Thank you for completing this survey!

47. What is the job title or position of the other person or persons who helped you complete the survey?

Thank you for taking the time to complete the survey.

Please make a copy for yourself and send the original back to the [VENDOR NAME] in the pre-paid envelope to:

[INSERT VENDOR ADDRESS HERE]