

## CDPH SNF QASP Quarterly Benchmark Rates SFY 2021–22 Quarter 2

### Overview

This report contains the preliminary results and statistics for the California Department of Public Health (CDPH) Skilled Nursing Facility (SNF) Quality and Accountability Supplemental Payment (QASP) Program for Quarter 2 of State Fiscal Year (SFY) July 1, 2021 through June 30, 2022. The measure rates are calculated across the performance period that is evaluated annually to determine incentive payment awards. This report includes two quarters of data: SFY Q1 and SFY Q2.

Table 1 provides an overview of the measures analyzed, including the statewide mean and 75th percentile, for the SFY 2021–22 Q2 aggregate. Only facilities meeting the minimum reporting requirements are included in the rate calculation for each measure (i.e., a quarterly minimum denominator of 5 and 7.5 for short- and long-stay measures, respectively). Based on this quarterly minimum threshold, the thresholds for the Q1 and Q2 Aggregate short- and long-stay measures are 10 and 15, respectively. The 30-Day SNF Rehospitalization measure, Staff Retention measure, and Infection Preventionist measure are calculated annually and represent the 2020–21 performance period. The 30-Day SNF Rehospitalization measure has a minimum denominator of 30. The Staff Retention measure does not have a minimum denominator.

The Infection Preventionist measure includes data from the SNF Mitigation Plan Inspections conducted by CDPH between January and April 2021. Please note that the Infection Preventionist measure indicates if the facility was compliant for all infection preventionist inspections during the measurement period. Table 1 excludes the Infection Preventionist measure since this measure assesses compliance/non-compliance and therefore the statewide average and 75th percentile are not applicable.

**Table 1—Overview of Measures and Rates (SFY 2021–22 Q2 Aggregate)**

^The Use of Physical Restraints (Long Stay) measure is a monitoring-only measure and will not be used to determine incentive payments for the Annual Report.

\*For the Influenza Vaccination (Short Stay), Pneumococcal Vaccination (Short Stay), and Staff Retention measures, a higher rate indicates better performance.

Measure	Statewide Mean	Statewide 75th Percentile
Use of Physical Restraints (Long Stay)^	0.124%	0.000%
Facility-Acquired Pressure Ulcer Incidence (Long Stay)	2.838%	0.000%
Influenza Vaccination (Short Stay)*	94.277%	100.000%
Pneumococcal Vaccination (Short Stay)*	93.714%	100.000%
Urinary Tract Infection (Long Stay)	1.513%	0.000%
Loss of Bowel or Bladder Control (Long Stay)	33.089%	17.391%
Self-Report Moderate to Severe Pain (Short Stay)	5.024%	0.000%

Measure	Statewide Mean	Statewide 75th Percentile
Self-Report Moderate to Severe Pain (Long Stay)	1.761%	0.000%
Increased Need for Help with Activities of Daily Living (Long Stay)	8.133%	3.571%
Received an Antipsychotic Medication (Long Stay)	2.713%	0.000%
30-Day SNF Rehospitalization	16.320%	13.262%
Staff Retention*	72.439%	81.818%

Starting with the SFY 2021–22 measurement period, the CDPH SNF QASP program includes the following methodology changes:

- 60-Day Rule—Excludes all assessments from the MDS data that had a submission date that was more than 60 days after the target date.
- All Assessments Methodology—Includes all assessments during the selection period within the resident’s most recent episode in the measure calculations for the Use of Physical Restraints (Long Stay), Received an Antipsychotic Medication (Long Stay), Urinary Tract Infection (Long Stay), Self-Report Moderate to Severe Pain (Short Stay), and Self-Report Moderate to Severe Pain (Long Stay) measures.

Please refer to the following documents on CDPH's QASP website for more information:

- [60-Day Rule](#)
- [All Assessments Methodology](#)

The following measures were modified for use in the CDPH SNF QASP program:

- The Percent of High-Risk Residents with Facility-Acquired Pressure Ulcer Incidence (Long Stay) measure was modified from Centers for Medicare & Medicaid Services’ (CMS’) specifications to ensure that the pressure ulcers are facility-acquired.
- The Influenza Vaccination (Short Stay) measure follows the MDS 3.0 Quality Measures User’s Manual, Version 8.0, in order to calculate a quarterly rate.
- The Received an Antipsychotic Medication (Long Stay) measure has been modified from CMS’ specifications to account for the addition of new conditions (manic depression, psychotic disorder, and traumatic brain injury) as exclusion criteria.

Table 2, on the next page, displays the performance period each quarter represents in this report.

**Table 2—Performance Periods for Quarterly Benchmarks Report**

Quarter	Performance Period
SFY 2021–22 Q1	July 1, 2021–September 30, 2021
SFY 2021–22 Q2	October 1, 2021–December 31, 2021
SFY 2021–22 Q2 Aggregate	July 1, 2021–December 31, 2021

The annual measures, 30-Day SNF Rehospitalization, Staff Retention, and Infection Preventionist, are not re-calculated on a quarterly basis. The rates presented in this report are limited to the facilities included in the SFY 2020–21 Annual Report. Due to the minimum denominator thresholds, the facilities eligible for reporting quality measures may differ between the quarterly benchmark report and the Annual Report. Additionally, facilities with fewer residents are more likely to have extreme rates, as a change of one resident in the numerator will have a larger impact on the rate.

## Use of Physical Restraints (Long Stay)

Figure 1 shows the rate distribution for the Use of Physical Restraints (Long Stay) measure in 5-percent intervals. Each interval includes all facilities whose score is equal to or greater than the lower interval and less than the higher interval. Note that for the Use of Physical Restraints (Long Stay) measure, a lower rate indicates better performance.

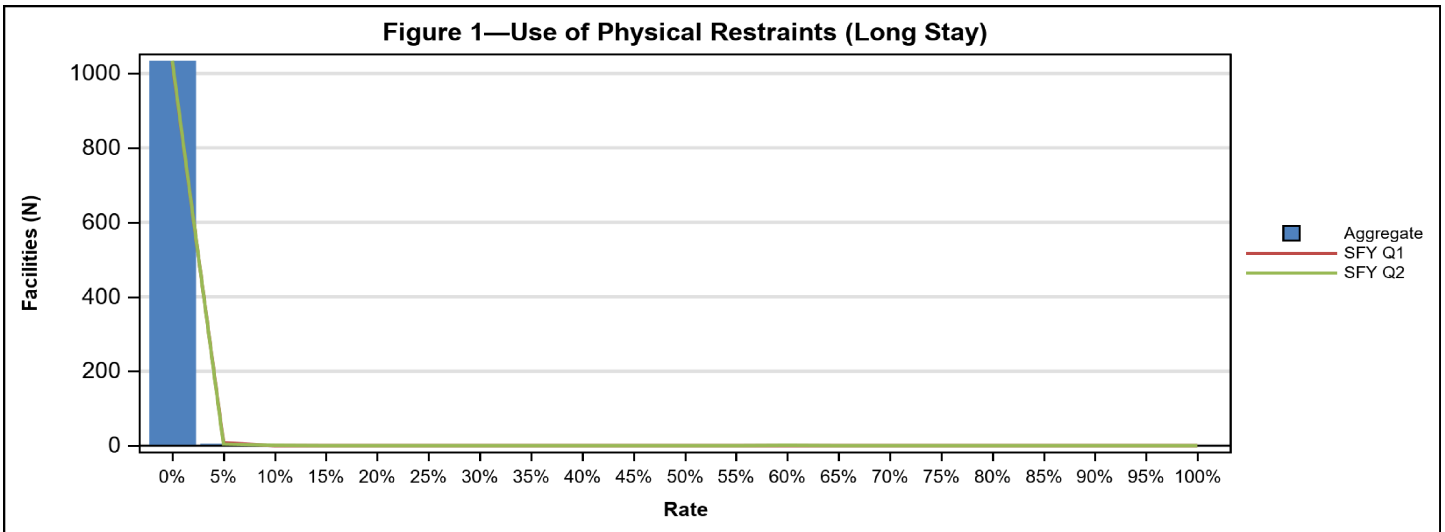


Table 3 shows the number of facilities evaluated, percentile distribution, mean, minimum, and maximum rate for the Use of Physical Restraints (Long Stay) measure.

**Table 3—Use of Physical Restraints (Long Stay)**

Performance Period	Number of Facilities	10th Percentile	25th Percentile	50th Percentile	75th Percentile	90th Percentile	Mean	Minimum Rate	Maximum Rate
SFY Q1	1,039	0.00%	0.00%	0.00%	0.00%	0.00%	0.13%	0.00%	7.81%
SFY Q2	1,040	0.00%	0.00%	0.00%	0.00%	0.00%	0.18%	0.00%	62.50%
Aggregate	1,039	0.00%	0.00%	0.00%	0.00%	0.00%	0.12%	0.00%	9.09%

## Facility-Acquired Pressure Ulcer Incidence (Long Stay)

Figure 2 shows the rate distribution for the Facility-Acquired Pressure Ulcer Incidence (Long Stay) measure in 5-percent intervals. Each interval includes all facilities whose score is equal to or greater than the lower interval and less than the higher interval. Note that for the Facility-Acquired Pressure Ulcer Incidence (Long Stay) measure, a lower rate indicates better performance.

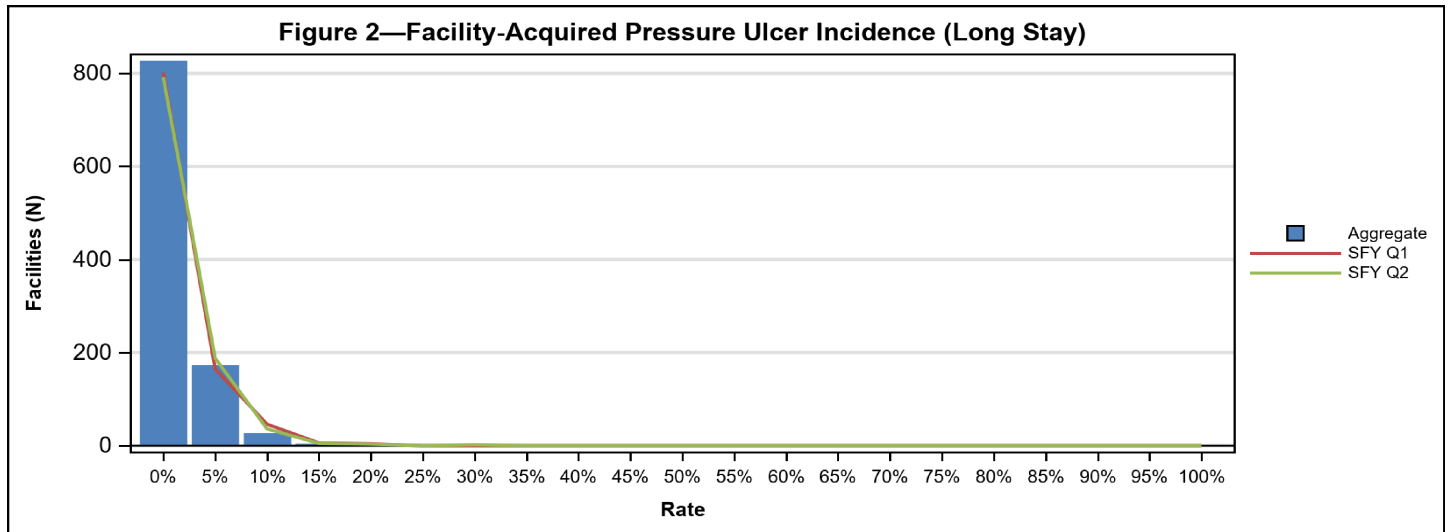


Table 4 shows the number of facilities evaluated, percentile distribution, mean, minimum, and maximum rate for the Facility-Acquired Pressure Ulcer Incidence (Long Stay) measure.

**Table 4—Facility-Acquired Pressure Ulcer Incidence (Long Stay)**

Performance Period	Number of Facilities	10th Percentile	25th Percentile	50th Percentile	75th Percentile	90th Percentile	Mean	Minimum Rate	Maximum Rate
SFY Q1	1,024	7.69%	4.55%	1.54%	0.00%	0.00%	2.80%	0.00%	22.22%
SFY Q2	1,026	7.41%	4.62%	2.04%	0.00%	0.00%	2.89%	0.00%	30.77%
Aggregate	1,032	7.27%	4.23%	2.02%	0.00%	0.00%	2.84%	0.00%	21.74%

## Influenza Vaccination (Short Stay)

Figure 3 shows the rate distribution for the Influenza Vaccination (Short Stay) measure in 5-percent intervals. Each interval includes all facilities whose score is greater than the lower interval and less than or equal to the higher interval. Note that for the Influenza Vaccination (Short Stay) measure, a higher rate indicates better performance.

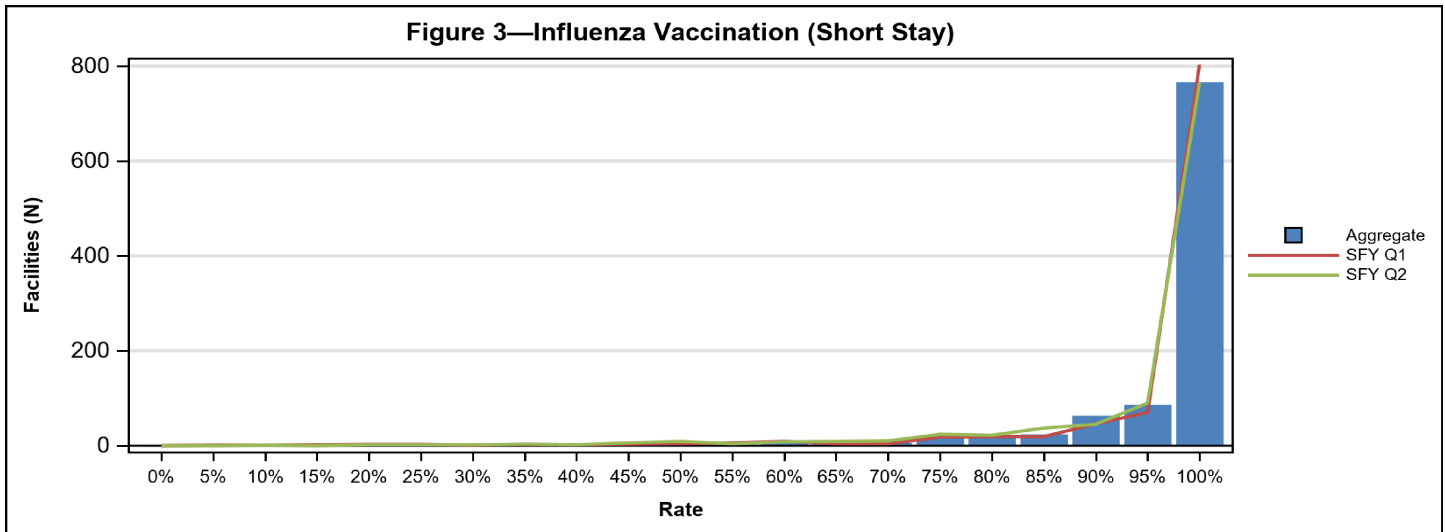


Table 5 shows the number of facilities evaluated, percentile distribution, mean, minimum, and maximum rate for the Influenza Vaccination (Short Stay) measure.

**Table 5—Influenza Vaccination (Short Stay)**

Performance Period	Number of Facilities	10th Percentile	25th Percentile	50th Percentile	75th Percentile	90th Percentile	Mean	Minimum Rate	Maximum Rate
SFY Q1	1,022	85.19%	97.30%	100.00%	100.00%	100.00%	94.93%	4.32%	100.00%
SFY Q2	1,041	80.46%	94.52%	100.00%	100.00%	100.00%	93.97%	7.14%	100.00%
Aggregate	1,030	83.10%	94.86%	99.55%	100.00%	100.00%	94.28%	5.87%	100.00%

## Pneumococcal Vaccination (Short Stay)

Figure 4 shows the rate distribution for the Pneumococcal Vaccination (Short Stay) measure in 5-percent intervals. Each interval includes all facilities whose score is greater than the lower interval and less than or equal to the higher interval. Note that for the Pneumococcal Vaccination (Short Stay) measure, a higher rate indicates better performance.

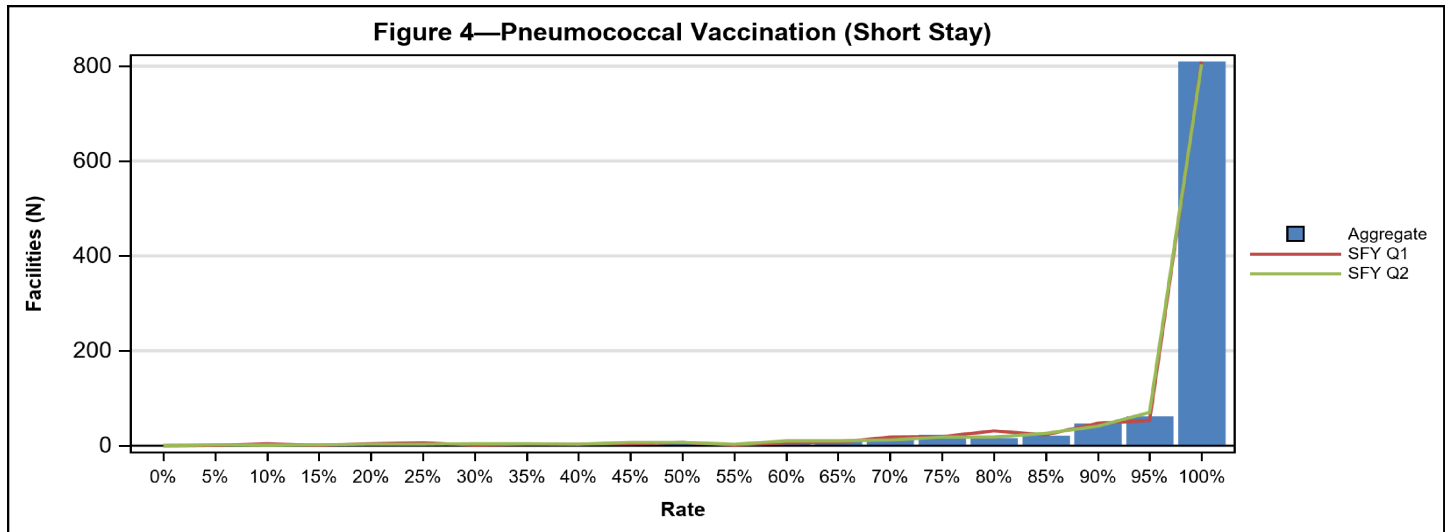


Table 6 shows the number of facilities evaluated, percentile distribution, mean, minimum, and maximum rate for the Pneumococcal Vaccination (Short Stay) measure.

**Table 6—Pneumococcal Vaccination (Short Stay)**

Performance Period	Number of Facilities	10th Percentile	25th Percentile	50th Percentile	75th Percentile	90th Percentile	Mean	Minimum Rate	Maximum Rate
SFY Q1	1,050	79.10%	96.23%	100.00%	100.00%	100.00%	93.76%	5.00%	100.00%
SFY Q2	1,048	80.00%	95.63%	100.00%	100.00%	100.00%	93.70%	4.55%	100.00%
Aggregate	1,049	78.91%	95.91%	99.67%	100.00%	100.00%	93.71%	6.25%	100.00%

## Urinary Tract Infection (Long Stay)

Figure 5 shows the rate distribution for the Urinary Tract Infection (Long Stay) measure in 5-percent intervals. Each interval includes all facilities whose score is equal to or greater than the lower interval and less than the higher interval. Note that for the Urinary Tract Infection (Long Stay) measure, a lower rate indicates better performance.

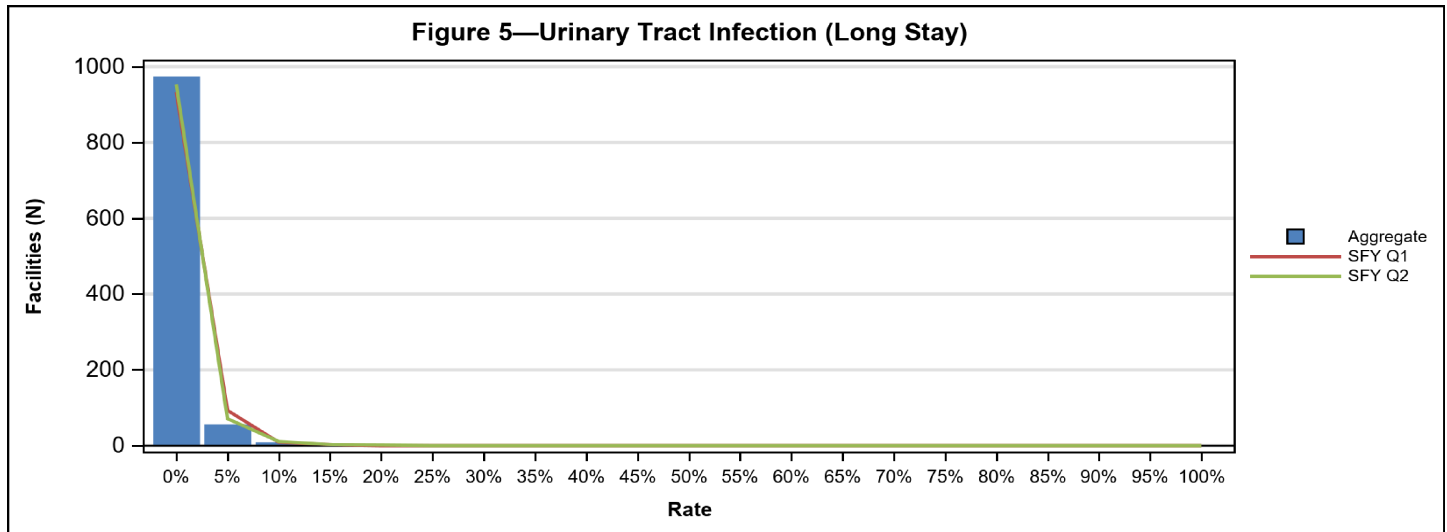


Table 7 shows the number of facilities evaluated, percentile distribution, mean, minimum, and maximum rate for the Urinary Tract Infection (Long Stay) measure.

**Table 7—Urinary Tract Infection (Long Stay)**

Performance Period	Number of Facilities	10th Percentile	25th Percentile	50th Percentile	75th Percentile	90th Percentile	Mean	Minimum Rate	Maximum Rate
SFY Q1	1,039	5.00%	2.44%	0.00%	0.00%	0.00%	1.56%	0.00%	16.67%
SFY Q2	1,040	4.46%	2.22%	0.00%	0.00%	0.00%	1.48%	0.00%	22.22%
Aggregate	1,039	3.97%	2.17%	0.90%	0.00%	0.00%	1.51%	0.00%	14.12%



## Loss of Bowel or Bladder Control (Long Stay)

Figure 6 shows the rate distribution for the Loss of Bowel or Bladder Control (Long Stay) measure in 5-percent intervals. Each interval includes all facilities whose score is equal to or greater than the lower interval and less than the higher interval. Note that for the Loss of Bowel or Bladder Control (Long Stay) measure, a lower rate indicates better performance.

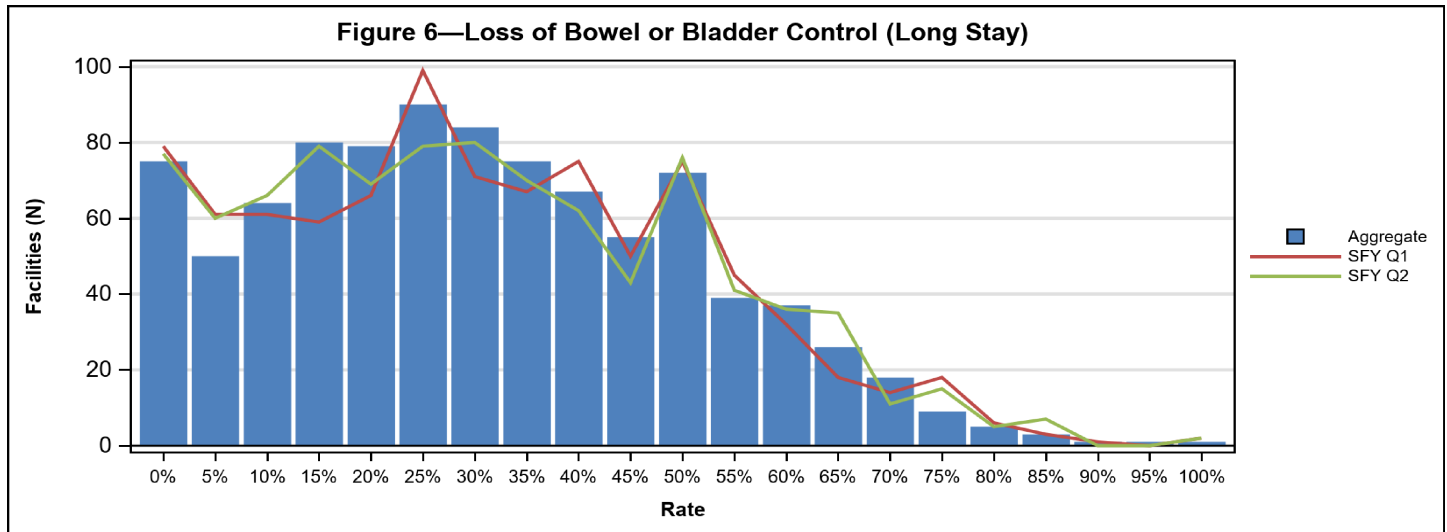


Table 8 shows the number of facilities evaluated, percentile distribution, mean, minimum, and maximum rate for the Loss of Bowel or Bladder Control (Long Stay) measure.

**Table 8—Loss of Bowel or Bladder Control (Long Stay)**

Performance Period	Number of Facilities	10th Percentile	25th Percentile	50th Percentile	75th Percentile	90th Percentile	Mean	Minimum Rate	Maximum Rate
SFY Q1	903	60.00%	47.92%	31.43%	16.67%	5.88%	33.01%	0.00%	100.00%
SFY Q2	913	62.50%	48.65%	31.25%	16.67%	6.25%	33.01%	0.00%	100.00%
Aggregate	931	60.71%	47.62%	31.75%	17.39%	6.25%	33.09%	0.00%	100.00%

## Self-Report Moderate to Severe Pain (Short Stay)

Figure 7 shows the rate distribution for the Self-Report Moderate to Severe Pain (Short Stay) measure in 5-percent intervals. Each interval includes all facilities whose score is equal to or greater than the lower interval and less than the higher interval. Note that for the Self-Report Moderate to Severe Pain (Short Stay) measure, a lower rate indicates better performance.

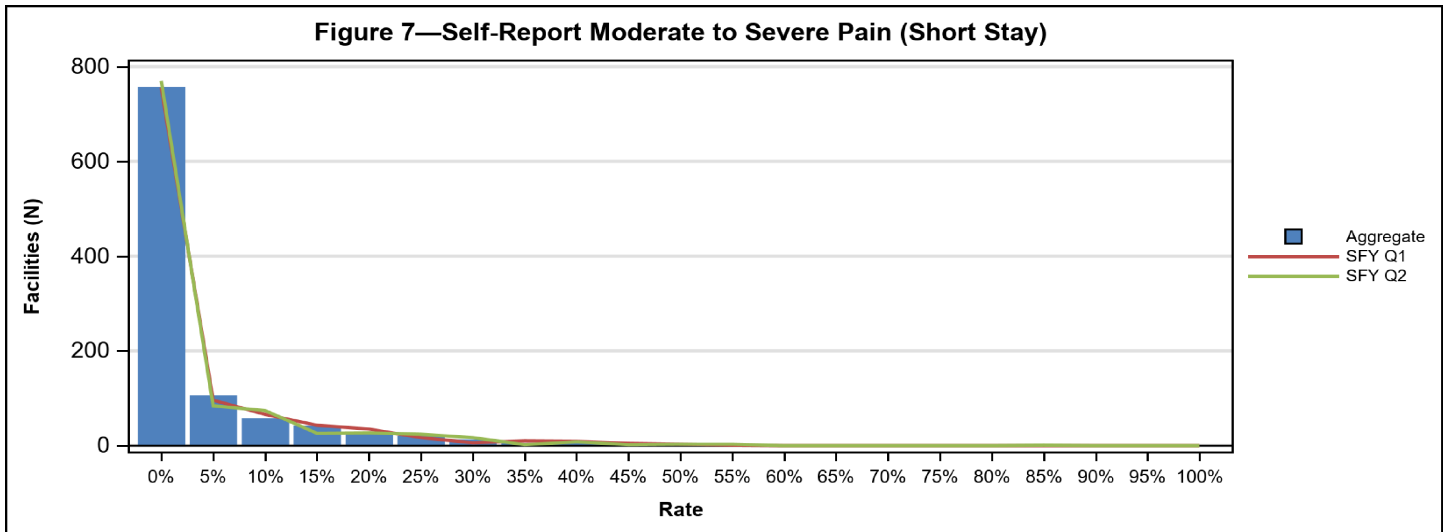


Table 9 shows the number of facilities evaluated, percentile distribution, mean, minimum, and maximum rate for the Self-Report Moderate to Severe Pain (Short Stay) measure.

**Table 9—Self-Report Moderate to Severe Pain (Short Stay)**

Performance Period	Number of Facilities	10th Percentile	25th Percentile	50th Percentile	75th Percentile	90th Percentile	Mean	Minimum Rate	Maximum Rate
SFY Q1	1,048	17.11%	6.25%	0.17%	0.00%	0.00%	5.07%	0.00%	57.14%
SFY Q2	1,041	16.05%	5.26%	0.23%	0.00%	0.00%	4.95%	0.00%	87.50%
Aggregate	1,045	17.24%	5.88%	0.65%	0.00%	0.00%	5.02%	0.00%	68.18%

## Self-Report Moderate to Severe Pain (Long Stay)

Figure 8 shows the rate distribution for the Self-Report Moderate to Severe Pain (Long Stay) measure in 5-percent intervals. Each interval includes all facilities whose score is equal to or greater than the lower interval and less than the higher interval. Note that for the Self-Report Moderate to Severe Pain (Long Stay) measure, a lower rate indicates better performance.

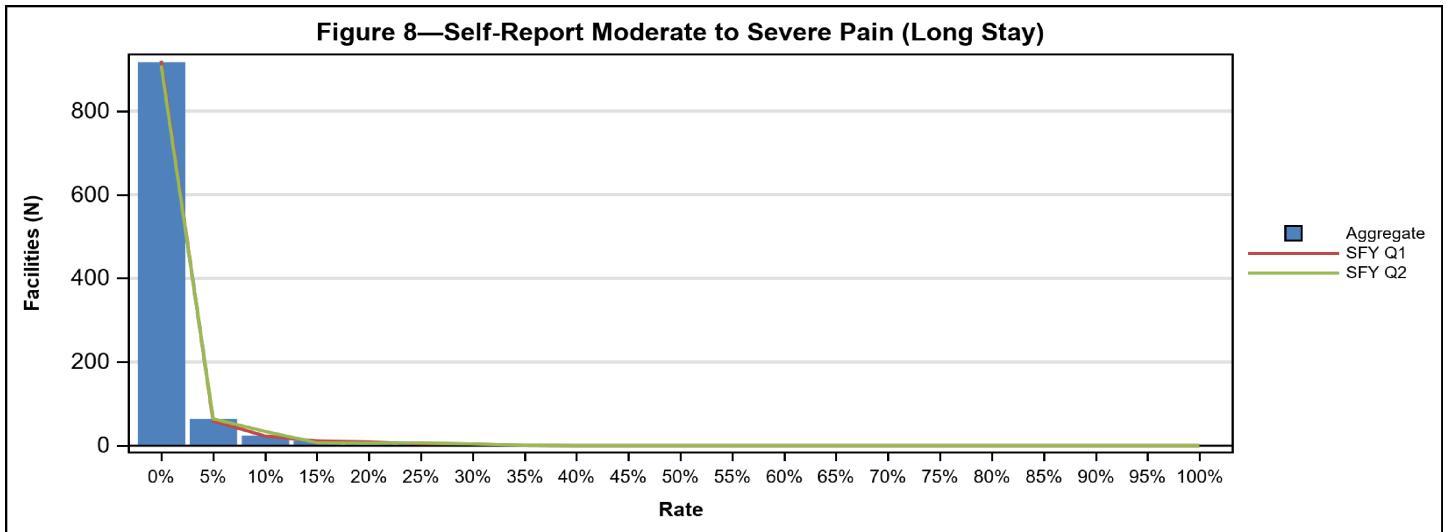


Table 10 shows the number of facilities evaluated, percentile distribution, mean, minimum, and maximum rate for the Self-Report Moderate to Severe Pain (Long Stay) measure.

**Table 10—Self-Report Moderate to Severe Pain (Long Stay)**

Performance Period	Number of Facilities	10th Percentile	25th Percentile	50th Percentile	75th Percentile	90th Percentile	Mean	Minimum Rate	Maximum Rate
SFY Q1	1,033	5.33%	0.00%	0.00%	0.00%	0.00%	1.73%	0.00%	38.46%
SFY Q2	1,032	6.25%	1.04%	0.00%	0.00%	0.00%	1.78%	0.00%	37.04%
Aggregate	1,032	5.77%	1.42%	0.00%	0.00%	0.00%	1.76%	0.00%	35.53%

## Increased Need for Help with Activities of Daily Living (Long Stay)

Figure 9 shows the rate distribution for the Increased Need for Help with Activities of Daily Living (Long Stay) measure in 5-percent intervals. Each interval includes all facilities whose score is equal to or greater than the lower interval and less than the higher interval. Note that for the Increased Need for Help with Activities of Daily Living (Long Stay) measure, a lower rate indicates better performance.

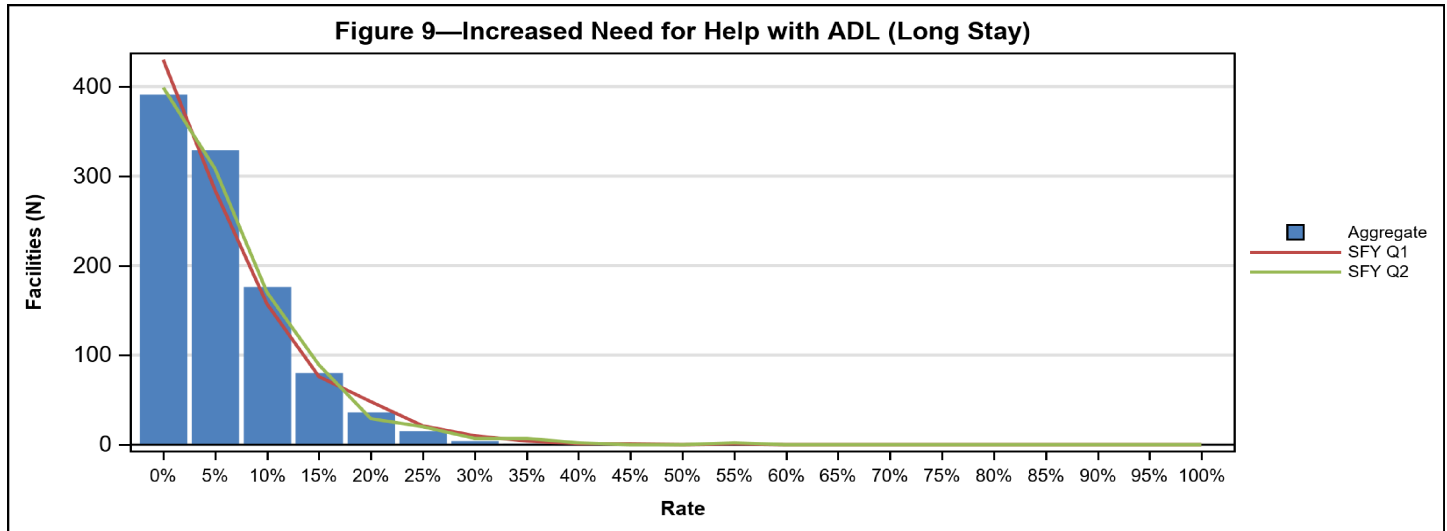


Table 11 shows the number of facilities evaluated, percentile distribution, mean, minimum, and maximum rate for the Increased Need for Help with Activities of Daily Living (Long Stay) measure.

**Table 11—Increased Need for Help with Activities of Daily Living (Long Stay)**

Performance Period	Number of Facilities	10th Percentile	25th Percentile	50th Percentile	75th Percentile	90th Percentile	Mean	Minimum Rate	Maximum Rate
SFY Q1	1,034	18.37%	11.54%	6.30%	2.56%	0.00%	8.05%	0.00%	55.56%
SFY Q2	1,033	17.39%	11.11%	6.67%	3.13%	0.00%	8.21%	0.00%	56.52%
Aggregate	1,034	16.67%	11.28%	6.67%	3.57%	1.49%	8.13%	0.00%	48.08%

## Received an Antipsychotic Medication (Long Stay)

Figure 10 shows the rate distribution for the Received an Antipsychotic Medication (Long Stay) measure in 5-percent intervals. Each interval includes all facilities whose score is equal to or greater than the lower interval and less than the higher interval. Note that for the Received an Antipsychotic Medication (Long Stay) measure, a lower rate indicates better performance.

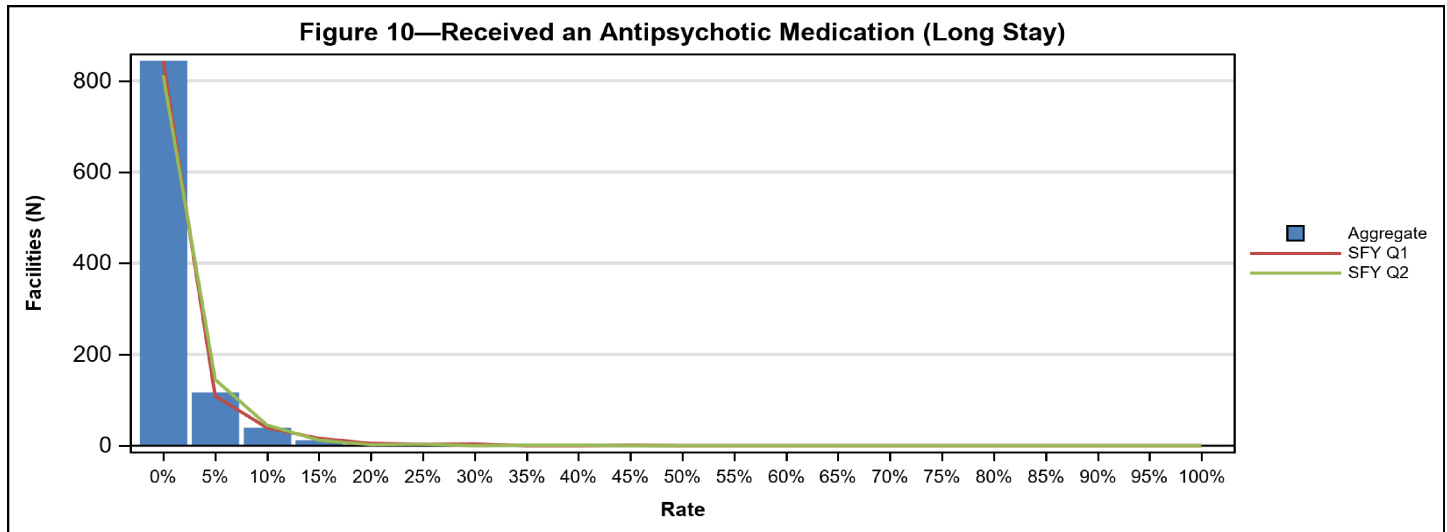


Table 12 shows the number of facilities evaluated, percentile distribution, mean, minimum, and maximum rate for the Received an Antipsychotic Medication (Long Stay) measure.

**Table 12—Received an Antipsychotic Medication (Long Stay)**

Performance Period	Number of Facilities	10th Percentile	25th Percentile	50th Percentile	75th Percentile	90th Percentile	Mean	Minimum Rate	Maximum Rate
SFY Q1	1,022	8.00%	3.57%	0.00%	0.00%	0.00%	2.68%	0.00%	47.62%
SFY Q2	1,021	8.11%	3.85%	0.00%	0.00%	0.00%	2.64%	0.00%	40.00%
Aggregate	1,023	7.32%	3.54%	1.15%	0.00%	0.00%	2.71%	0.00%	43.48%

## 30-Day SNF Rehospitalization

Figure 11 shows the rate distribution for the 30-Day SNF Rehospitalization measure in 5-percent intervals. Each interval includes all facilities whose score is equal to or greater than the lower interval and less than the higher interval. Note that for the 30-Day SNF Rehospitalization measure, a lower rate indicates better performance.

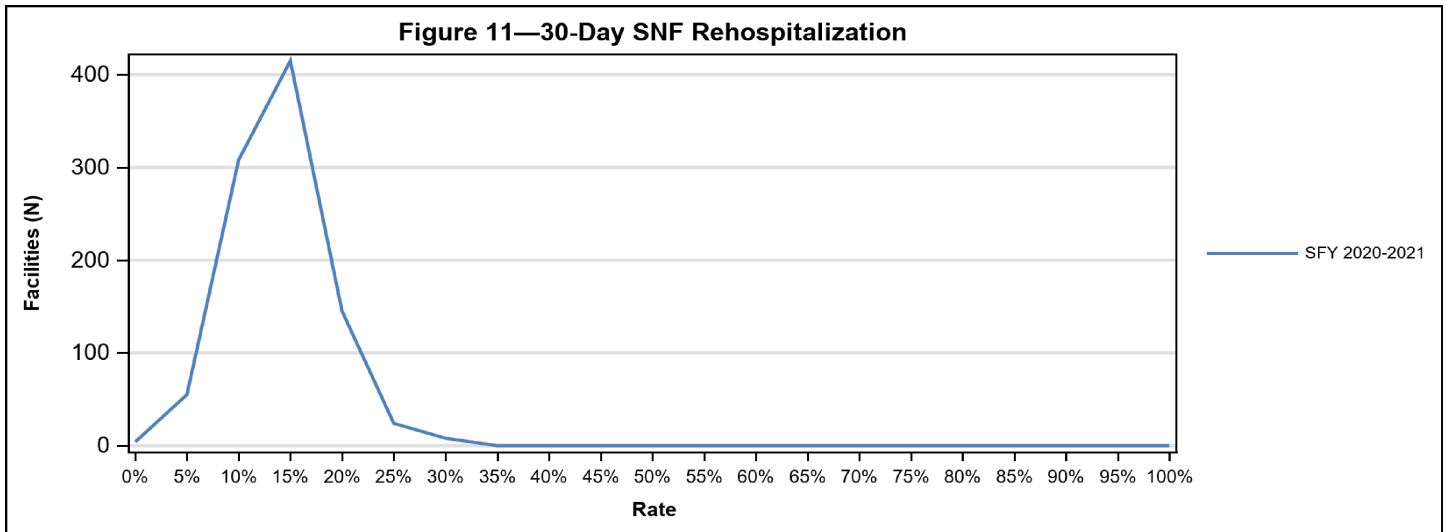


Table 13 shows the number of facilities evaluated, percentile distribution, mean, minimum, and maximum rate for the 30-Day SNF Rehospitalization measure.

**Table 13—30-Day SNF Rehospitalization**

Performance Period	Number of Facilities	10th Percentile	25th Percentile	50th Percentile	75th Percentile	90th Percentile	Mean	Minimum Rate	Maximum Rate
SFY 2020–21	959	21.82%	18.92%	16.07%	13.26%	11.19%	16.32%	3.34%	33.28%

## Staff Retention

Figure 12 shows the rate distribution for the Staff Retention measure in 5-percent intervals. Each interval includes all facilities whose score is greater than the lower interval and less than or equal to the higher interval. Note that for the Staff Retention measure, a higher rate indicates better performance.

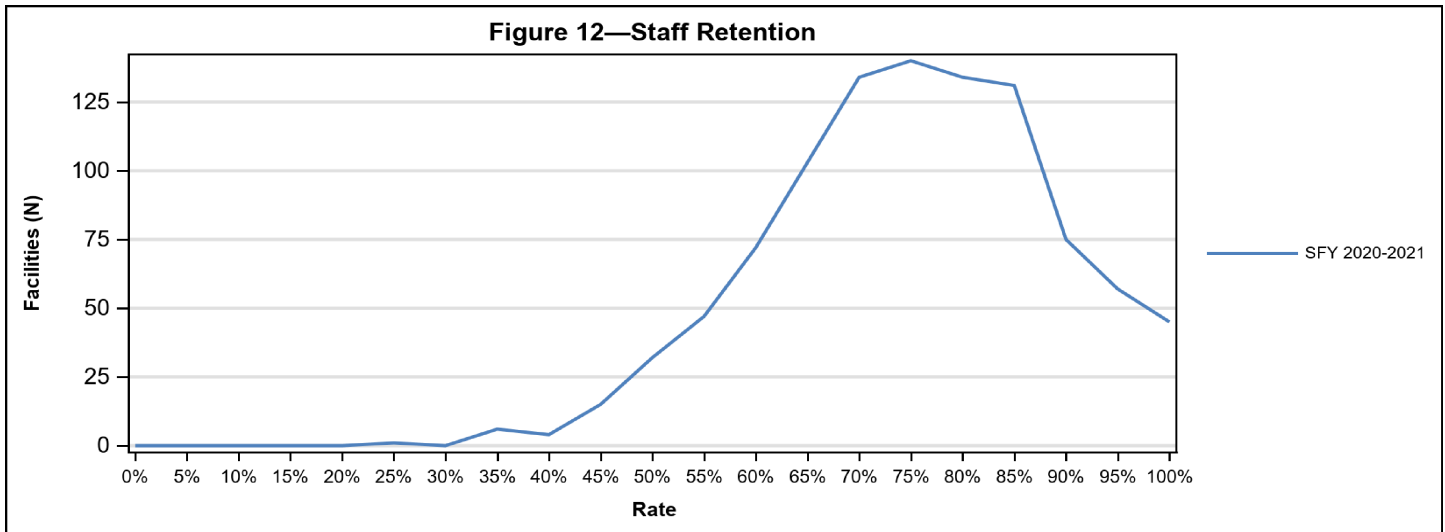


Table 14 shows the number of facilities evaluated, percentile distribution, mean, minimum, and maximum rate for the Staff Retention measure.

**Table 14—Staff Retention**

Performance Period	Number of Facilities	10th Percentile	25th Percentile	50th Percentile	75th Percentile	90th Percentile	Mean	Minimum Rate	Maximum Rate
SFY 2020–21	996	54.40%	63.64%	72.93%	81.82%	90.24%	72.44%	20.43%	100.00%

## Infection Preventionist

Table 15 shows the percent of facilities that were compliant, non-compliant, or received a Not Reported (NR) for the Infection Preventionist measure. NR indicates that the facility was not inspected for IP compliance.

**Table 15—Infection Preventionist**

Performance Period	Number of Facilities	Percentage Compliant	Percentage Non-Compliant	Percentage NR
SFY 2020–21	1,075	83.16%	1.58%	15.26%