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Legend Healthcare
210-564-0100

Legend welcomes criticism and reform of nursing home 5-star rating system

A recent [article by The New York Times](#) stated that the 5-star rating system, used since 2009 for measuring nursing home quality, is based on incomplete information that can mislead consumers, investors and others about conditions at the homes. The *Times* reported, “The Medicare ratings, which have become the gold standard across the industry, are based in large part on self-reported data by the nursing homes that the government does not verify.” A home’s rating is based on three criteria: its performance on annual health inspections, its staffing levels and its performance on quality indicators that are collected for every patient. But only the health inspections are performed by the government on behalf of the Center for Medicaid and Medicare Services (CMS); the other two are self-reported by the homes.

Legend Healthcare, an advocate of reforming the Medicare rating system, agrees the system can be misleading and is not always an accurate representation of a nursing facility’s quality of care. Legend’s Senior Vice President, Denise Helms, echoed the criticism remarking, “It is my belief as well that some highly ranked 5-star facilities do not reflect 5-star care. Legend Healthcare takes great pride in the accuracy of the data our facility’s report and I would welcome any initiative to validate all facility data to ensure that all are working with the same level of accuracy.”

The first category, the government reported Health Inspection, is performed by a government survey team. Initiatives to standardize the survey process to make it more objective rather than subjective are underway; however, today’s process leaves much of the survey outcome to a surveyor’s subjective interpretation. The second category, Staffing Levels, relates to the number of hours of nursing care provided per patient per day. As noted by the *Times* article, a nursing home could conceivably increase its staff rating by ramping up employee staffing levels prior to an inspection when it completes its self-reported staffing form. Legend Healthcare has no way to measure the impact of that alleged practice, but would point out that inspections are conducted unannounced. A more prominent flaw facing staff reporting is the lack of consideration given to the number of licensed therapists providing care in a facility. The third category, Quality Measures, is dependent on the facility sending CMS clinical data on every Medicare and Medicaid patient. There are 19 clinical patient outcome measurements such as pain control, decubiti development, and UTI’s. Because of the dramatic increase in patient clinical complexity and multiple comorbidities, these indicators are not uncommon issues and may be unavoidable. As a result, this category often reflects poorly on facilities that specialize in treating medically complex patients. The 5-star system is not necessarily indicative of the care provided by the facility.

In response to the New York Times article, Rep. Elijah Cummings (D-MD) has called for an evaluation of the nursing home 5-star rating system. Legend Healthcare welcomes assessment of the system, and supports initiatives to create more accurate measurements of the quality of healthcare received in nursing facilities.

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