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MARYLAND MEDICAL ASSISTANCE PROGRAM
Nursing Home Transmittal No. 297
November 15, 2024

To: Nursing Facility Administrators

From: Jamie Smith, Director *Jamie Smith*
Office of Long Term Services and Supports

Subject: Fiscal Year 2024 Nursing Facility Pay-for-Performance Scores

Note: Please ensure that appropriate staff members in your organization are informed of the contents of this transmittal.

This transmittal provides nursing facilities in Maryland with the 2024 pay-for-performance (P4P) results.

In accordance with Maryland Code, Health-General Article § 19-310.1, authorizing the Nursing Facility Quality Assessment, the Maryland Department of Health (the “Department”) distributes a portion of the revenue generated by the assessment to nursing facilities. The Department distributes the revenue based on accountability measures that indicate quality care or a commitment to quality of care.

The Department assesses facility quality using the following measures:

- Maryland Health Care Commission Family Satisfaction Survey (30%)
- Staffing Levels in Nursing Facilities (20%)
- Staffing Stability in Nursing Facilities (15%)
- Minimum Data Set Quality Indicators (30%)
- Staff Immunizations (5%)

Per legislation, continuing care retirement communities and facilities with fewer than 45 beds are not subject to the quality assessment and, consequently, are not eligible for participation in P4P. The Department also excludes facilities that meet the following criteria during the one-year period ending March 31, 2024:

- Identified by the federal Centers for Medicare and Medicaid Services as a special focus facility;
- Denied payment for new admissions by the Department; or

- Identified by the Department as delivering substandard quality of care in accordance with 42 CFR PART 488 Subpart E §488.301.

The Department will be issuing enclosures with this transmittal to each Medicaid-enrolled nursing facility indicating that facility's eligibility for P4P or P4I. The enclosure will notify eligible facilities of their scores on each of the quality measures, a total score, rank among all eligible facilities, and a projected award. The Department will still provide ineligible facilities with their quality measure scores and total scores as a means of performance feedback.

The provider's enclosure will include the facility's projected award. The Department issues a P4P payment to the highest scoring facilities representing 40 percent of the eligible days of care. The P4P payment ranges from \$5.22 to \$10.43 per Medicaid patient day. The Department also issues a pay-for-improvement (P4I) score to facilities who did not receive the P4P payment, but who have improved from the previous year. The P4I payments range from \$1.41 to \$2.81 per Medicaid patient day. Payment amounts for P4P and P4I vary annually. In total, the Department will distribute approximately \$14.3 million to providers through the P4P and P4I payments.

Providers have 30 days from the date of this transmittal to review results. Providers cannot submit supplemental data for inclusion in the P4P or P4I results. The Department bases all P4P scores on data previously submitted by, and accepted from, each provider. If the Department determines errors in the calculation of P4P results are present and will require significant modifications to scoring or the award, an additional 30-day review period will be given to providers.

Providers should direct comments or questions regarding this transmittal to Jarrod Terry, Chief, Division of Institutional Services at (410) 767-6764 or at jarrod.terry@maryland.gov.