

Quality Incentive Awards

This issuance describes the Quality Incentive Awards program and criteria for supplemental payments available, pursuant to V.D.R.S.R. §9.5(a), to Vermont nursing homes participating in the Medicaid program. Up to five awards of \$25,000 each will be made annually in May, during National Nursing Home Week, to nursing facilities providing and sustaining a superior quality of care in an efficient and effective manner. The awards must be used to enhance the quality of service provided to residents of the facility.

Basic Criteria

The following criteria will be applied to facility data up through March 31 each year to determine eligibility for the award to be presented in May. In order to be eligible for the award, a facility must participate in the Vermont Medicaid program and meet **all** of the following criteria:

1. The most recent health survey report resulted in a score of five or less, no deficiency with a scope and severity greater than "D" level, with no more than two "D" level deficiencies in the general categories of Quality of Care, Quality of Life, or Resident Rights.
2. No substantiated complaints in previous 12 months related to quality of care, quality of life, or residents' rights.
3. Designated Gold Star Provider.
4. Resident satisfaction survey results above the statewide average.

Ranking of Eligible Facilities

All eligible facilities will be ranked according to their quality of care by the Division of Licensing and Protection based on the basic criteria. The five facilities with the highest quality of care will receive an award. If, based on the basic criteria, there are ties which would cause more than five facilities to be equally qualified, the tied facilities will be ranked according to the efficiency criteria set out below to determine those facilities that will receive the award.

Efficiency Criteria

The efficiency rankings shall be based upon the sum of the Nursing, Resident Care, Indirect Care and DON allowable costs per day from each facility's most recently settled Medicaid cost report. The lowest cost per day will be deemed the most efficient. Cost per day will be calculated using actual resident days for the same fiscal period.

Effective: March 6, 2006

s/Susan Besio _____

Susan Besio, Director

s/Patrick Flood _____

Patrick Flood, Commissioner