

About 5 Star

A facility's overall 5 Star rating incorporates ratings in three categories: survey results, Quality Measures (QMs), and staffing levels. The survey rating forms the base "star" rating with stars being added or subtracted depending upon a facility's star rating for QMs and staffing respectively. The overall rating for a facility cannot be greater than 5 Stars or less than 1 Star; however, new facilities where there is insufficient data could receive a rating of "N/A."

The overall rating for a facility is a composite score based on the following three categories. Here's how CMS will calculate a facility's 5 Star rating for Survey:

1. Survey Rating

CMS calculates the survey star rating based on points that a facility accrues based on health citations noted in the past 3 years of standard and substantiated complaint surveys and survey revisits. CMS assigns more points to facilities with deficiencies of greater scope or severity (i.e., facilities with less serious deficiencies or isolated incidents will receive fewer points) and recent surveys – **both for standard surveys as well as for complaint surveys [NEW INFO from 12.17.08 call]** – are weighted more heavily (i.e., most recent survey accounts for half of the points, the previous survey accounts for one-third of the points and the next most recent survey accounts for one-sixth of the points for the survey rating category).

CMS takes each facility's overall point score (between 0 and 136) and ranks it **by state** – not nationally – a step that the agency hopes will help to balance out known discrepancies among survey regions. The top 10% of each state's facilities receive a 5 Star rating for Survey and the bottom 20% receive 1 Star ratings, while the remaining facilities within a state are assigned 2, 3 or 4 Stars for the survey component of 5 Star based on an even distribution of this middle 70% of facilities within a state.

2. QM Rating

CMS calculates the QM component of 5 Star by assigning points based on 10 of the 19 QMs that are currently posted to *Nursing Home Compare* – including 7 long-stay and 3 short-stay measures (details for each of the 19 QMs remains posted to *Nursing Home Compare*). CMS averages the three most recent quarters worth of QM data. Performance related to the QMs for both ADL Decline and Mobility Decline accounts for 40% of a facility's QM rating on the long-stay measures (i.e., these 2 QMs are weighted 1.6667 times as high as other QMs); these two measures will be compared to state averages whereas the remaining 8 QMs will be compared to a national benchmark.

CMS compares these point totals according to a national average. The top 10% of facilities receive a 5 Star rating for QMs and the bottom 20% receive 1 Star ratings, while the remaining facilities are assigned 2, 3 or 4 Stars for the QM component of 5-Star based on an even distribution of this middle 70% of facilities nationwide. A QM rating of 5 Stars can "bump up" a facility's overall score by 1 Star, whereas a 1 Star rating in the QM category will downgrade the overall rating by subtracting 1 Star.

3. Staffing Rating

CMS calculates the Staffing component of 5 Star by calculating the average number of hours and minutes of nursing care per resident per day (including registered

nurses (RN), licensed practical nurses (LPN), and certified nurse aides (CNAs) – and those under contract to a facility). This average will be case-mix adjusted to account for variations in residents' Resource Utilization Group (RUG) categories within a facility. Then, CMS will assign Staff ratings for both total staffing and RN staffing. Facilities cannot receive a 5 Star rating for the Staffing component unless it meets the threshold of 4.08 per resident day total staffing to include a minimum of .55 RN hours. Overall Staffing rates of 4 or 5 stars can “bump up” a facility's overall score by 1 Star, whereas a 1 Star rating in the Staffing category will downgrade the overall rating by subtracting 1 Star.

Because 5 Star uses state-based comparisons for the survey component and portions of the QM component, consumers will not be able to use this system to compare facilities across states.