Nursing Facility Quality Incentive Payment Program
Fiscal Year 2023

DIVISION OF AGING SERVICES (DOAS)
DIVISION OF MEDICAL ASSISTANCE AND HEALTH SERVICES (DMAHS)

NOVEMBER 2021
Agenda

- Nursing Facility Quality Incentive Payment Program (NF QIPP)
- NF QIPP Mandatory Requirements
- CoreQ Survey Process
- DHS NF Reporting Portal
- CoreQ Eligibility, Demographic Submissions, and Timeline
- Questions and Answers
The Department of Human Services in collaboration with the Department of Health and participation from stakeholders will review the NF QIPP Program, Any Willing Provider provision, and opportunities for value based payment and quality improvement strategies in the upcoming months.

The NF QIPP process for state Fiscal Year 2023 (FY23) will begin with the CoreQ survey period and collection of Hospital Utilization Tracking (HUT) software use. There will be no change to these two requirements but all components of the NF QIPP will be under review per recent legislation and program evolution and are subject to change.
Nursing Facility Quality Incentive Payment Program

FISCAL YEAR 2023
Nursing Facility Quality Incentive Payment Program (NF QIPP)

- Collection of quality metrics to improve quality for individuals receiving care in a Medicaid certified Nursing Facility (NF) or Special Care Nursing Facility (SCNF)
- Streamlined CoreQ sample size calculation process based on the experience and input from last year’s survey period
- Enhancements include:
  - Web-based portal for calculation grid submission
    - Same portal used for FY22 rate attestation submissions, but with 2 submission options
    - Streamline, reduce administrative burden, and reduce errors
    - Submission confirmation via web portal and email notification
  - Inclusion of CoreQ vendor intent and HUT software questions into one form
Mandatory Requirement #1 for NF QIPP Consideration: Validated HUT Software Use

1. Use of a Validated Hospital Utilization Tracking Software System
   - In order to qualify for NF QIPP consideration, a facility must certify to its use of a software system specifically designed for hospital utilization tracking
   - Known software includes but may not be limited to:
     - INTERACT™
     - Advancing Excellence
     - LTC Trend Tracker\textsuperscript{sm}
   - This information is collected within the CoreQ calculation grid via the web portal
The CoreQ Long-Stay Minimum Survey Sample Size Calculation Grid is utilized by the facility to:

- Identify all long-term stay residents and their families at the time of submission
- Apply the CoreQ Exclusions
- Determine CoreQ survey eligibility for each long-stay resident and their family member
- Determine the total number of eligible residents and families eligible to participate in the CoreQ survey process
- If CoreQ survey sample size requirements are met, facility will utilize the calculation grid information to submit demographic information for the eligible residents and families to the CoreQ vendor
2. Mandatory participation in calculating a CoreQ Long-Stay Minimum Survey Sample Size:
   - Each NJ Medicaid certified facility is required to submit a CoreQ Calculation Grid to DoAS via web portal regardless of CoreQ vendor intent, facility type, facility size, or ability to meet minimum sample size.
   - The submitter must be a representative of the NF (Contracted CoreQ vendors not permitted to submit on behalf of NF).
   - Submitter will receive a confirmation.
   - The calculation grid is reviewed and verified for accuracy within 3 business days of receipt.
     - DoAS may request corrections and resubmission which must be completed and submitted by the required due date.
   - DoAS staff will notify the facility via letter of their CoreQ survey eligibility and required next steps within 10 business days of receipt.
2a. Mandatory participation in calculating a CoreQ Long-Stay Minimum Survey Sample Size Calculation via the state mandated calculation grid and

2b. If minimum survey size met, submit demographics to initiate the CoreQ survey process within the specified timeframes

One or both processes, as applicable, must be completed within the required timeframes in order to qualify for NF QIPP consideration.
CoreQ Long Stay Surveys
CoreQ is a short, reliable, and validated questionnaire to calculate a set of quality measures for long-stay residents of facilities.

- A long-stay resident is defined as a resident whose cumulative days in the facility is equal to or greater than 100 days.
- There are two groups included in each survey sample
  - Long-stay residents
  - Families of long-stay residents
The CoreQ surveys are initiated annually.

Facilities must complete a CoreQ Long-Stay Survey Size Calculation Grid and receive a notification from DHS of their CoreQ survey eligibility.

Facilities and vendors must comply with the timeframes for submission of resident demographics and data outcomes.

All information is confidential and will only be used for the survey. Individual surveys completed by the resident or family member will not be shared with the facility.

DHS has contracted with Dr. Nicholas Castle to collect data and calculate results annually.

Dr. Castle will not provide CoreQ composite scores to individual facilities.
CoreQ Questions

For the resident, the three questions are as follows:

1. In recommending this facility to your friends and family, how would you rate it overall?
2. Overall, how would you rate the staff?
3. How would you rate the care you receive?

For the family, the three questions are as follows:

1. In recommending this facility to your friends and family, how would you rate it overall?
2. Overall, how would you rate the staff?
3. How would you rate the care your family member receives?

The response scale is as follows with one being the lowest and five being the highest:

- One (1) – Poor
- Two (2) – Average
- Three (3) – Good
- Four (4) – Very Good
- Five (5) – Excellent
Excluded from the survey are the following long-stay residents or family members of long-stay residents.

<table>
<thead>
<tr>
<th>Long-Stay Resident Exclusions</th>
<th>Family Members of Long-Stay Residents Exclusions</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Residents who have lived in the facility for less than 100 days  o This is recorded in the MDS Section A1600 and/or A1900.</td>
<td>• Families of residents who have lived in the facility for less than 100 days  o This is recorded in the MDS Section A1600 and/or A1900.</td>
</tr>
<tr>
<td>• <strong>Residents with BIMS scores of equal to or less than 7 or equal to 99 are excluded.</strong>  o Residents who have poor cognition as identified through MDS assessment Section C0200-C0500.</td>
<td>• Family members who reside in another country.</td>
</tr>
<tr>
<td>• Residents receiving hospice:  o This is recorded in the MDS as Hospice (MDS O0100K2 = 2).</td>
<td>• Families of residents receiving hospice:  o This is recorded in the MDS as Hospice (O0100K2 = 2).</td>
</tr>
<tr>
<td>• Residents with court appointed legal guardians for all decisions.  o Identify from the facility health information system.</td>
<td>• Families of residents who have court appointed legal guardians for all decisions  o Identify from the facility health information system.</td>
</tr>
</tbody>
</table>

*Family member refers to a designated authorized representative and may consist of a family member, friend, or other relation.*
A CoreQ score is calculated based on the results of the questionnaires that meet the valid sample criteria. A valid sample is:

1) A minimum of 30 residents and 30 families eligible to be surveyed each cycle;

2) A minimum of 20 returned and useable surveys within each survey group (e.g., the numerator must be > 20 residents and >20 families = 40 returned and useable surveys)

3) A minimum response rate of 30% or greater. The response rate is calculated by counting all the valid responses divided by the number of people who were given the survey to complete

4) Responses recorded and submitted to DHS by the specified survey close date
The calculation grid is collecting and calculating:

- Submitter information including date of submission
- CoreQ Vendor Intent
- Hospital Utilization Tracking Software Use
- Resident and Family Tracking
- CoreQ Exclusions
- Total Survey Sample Size
# CoreQ Long-Stay Survey Sample Size Calculation Grid

**Facility Name:** ABC  
**Date of Submission:** 11/5/2021  
**CMS Provider #:** 123456789  
**Year:** FY23  
**Name of Person Completing Grid:** SAMPLE  
**Email Address:** SAMPLE@email.com

**Do you have a contracted CoreQ Vendor for Resident Surveys? (Yes/No):** Yes

**If yes, list the name of the CoreQ vendor:** ABC Vendor

**Do you have a contracted CoreQ Vendor for Family Surveys? (Yes/No):** Yes

**Hospital Utilization Tracking (HUT) Tool: Do you track and trend hospital inpatient utilization with the use of a validated software system? (Yes/No):** Yes


<table>
<thead>
<tr>
<th>Column A</th>
<th>Column B</th>
<th>Column C</th>
<th>Column D</th>
<th>Column E</th>
<th>Column F</th>
<th>Column G</th>
<th>Column H</th>
<th>Column I</th>
<th>Column J</th>
<th>Column K</th>
<th>Column L</th>
</tr>
</thead>
<tbody>
<tr>
<td>Resident Identifier (Resident Initials or Resident Number)</td>
<td>LTC Resident with Stay ≥ 100 Days</td>
<td>Resident BIIMS Score</td>
<td>Resident on Hospice (Y/N)</td>
<td>Resident has Legal Guardian (Y/N)</td>
<td>Resident Appropriate for CoreQ Survey (Y/N)</td>
<td>Family Member Initials</td>
<td>Address for the family (Y/N) if no family will be inappropriate for CoreQ</td>
<td>Family Members Living in Another Country (Y/N)</td>
<td>Family Appropriate for CoreQ Survey (Y/N)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>Column requires value</td>
<td>Column requires value</td>
<td>Column requires value</td>
<td>Column requires value</td>
<td>Column requires value</td>
<td>Column requires value</td>
<td>Column requires value</td>
<td>Column requires value</td>
<td>Column requires value</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Totals:**

- Total # of Resident Identifier
- Total # of LTC Residents with Stay ≥ 100 Days
- Total # of Resident BIIMS Score
- Total # of Residents on Hospice
- Total # of Residents Who Has a Legal Guardian
- Total # of Residents Appropriate for CoreQ Survey
- Total # of Family Members
- Total # of Family Members Living in Another Country
- Total # of Family Appropriate for CoreQ Survey

**Totals:**

- 0
- 0
- 0
- 0
- 0
- 0
- 0
- 0
- 0
- 0
The CoreQ Long-Stay Survey Sample Size Calculation Grid is submitted to DoAS by the provider at [http://njdoas-ua.force.com/NF](http://njdoas-ua.force.com/NF).

The grid submission via the online portal either:

- Direct data entry and calculation (new process)
- Upload of a spreadsheet file (process from FY22)

The Grid and Instructions including information on the CoreQ exclusions is available at [https://www.state.nj.us/humanservices/doas/resources/](https://www.state.nj.us/humanservices/doas/resources/).

The due date for the calculation grid is **11/29/21** at 5pm EST.
Nursing Facility Reporting Portal

HTTP://NJDOAS-UA.FORCE.COM/NF
Instructions for Nursing Facility Reporting Portal

Before beginning the upload process, you will need:

1. Nursing Facility Name,
2. Medicaid NF Provider #, and
3. the completed Attestation and Wage Schedule Excel file.

To login, enter your Medicaid NF Provider # exactly as it appears on the Rate Notification Letter. If the code is correct, you will be able to see the Nursing Facility name associated with the code and will be able to proceed.

Enter your First Name, Last Name, Phone, Email and Notes on the form.

To upload the document, you will need the completed Attestation and Wage Schedule Excel file/FY22 CoreQ Long Stay Survey file on your device. The format for Attestation and Wage Schedule file is shown in the embedded template below. Please click on below link to download the file.

Attestation and Wage Schedule File Format

For upload process, click the ‘Upload File’ button. Locate the document on your device and select it. Then click the ‘Done’ button. You will see the name of your document under ‘File Name’ once attached successfully. If you need to delete the document, click the icon to delete. You will need to re-attach it.

Click on ‘Submit’ button to submit the application.

The portal will retain a record of your submission that you can view by entering your information. However, you will not be able to view or download the file once it is uploaded. Please keep a copy of the Attestation and Wage Schedule for your records.
Option One:
Use of the portal to complete the calculation grid
Select “Automated Version”
Confirmation message

Confirm your Nursing Facility details are correct in order to continue.

Medicaid NF Provider #: 1234
Nursing Facility Name: CARE ONE AT LIVINGSTON

[Buttons: Confirm, Cancel]
Enter Facility Data and CoreQ Intent, then click SAVE
Add resident records

CoreQ Long-Stay Sample Size Calculation Grid

```
<table>
<thead>
<tr>
<th>Sr. No.</th>
<th>Resident Identifier</th>
<th>LTC Resident with Stay ≥ 100 Days</th>
<th>Resident BIMS Score</th>
<th>Resident on Hospice</th>
<th>Resident has Legal Guardian</th>
<th>Resident Appropriate for CoreQ Survey</th>
<th>Family Member Identifier (Initials Only)</th>
<th>Family Members Living in Another Country</th>
<th>Address for the family</th>
<th>Family Appropriate for CoreQ Survey</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

+ Add Records
```

By uploading form, I certify that: 1) I am an authorized representative for the above named Nursing Facility, 2) the information provided accurately reflects facility records for the full census of the facility at the time of submission, and 3) the file submission will determine the facility eligibility, including supplemental payments, for the Nursing Facility Quality Incentive Payment Program (NF QIPP) and CoreQ resident and family experience survey. I understand that the date, time and device IP address used for submission will be recorded.

Submit
Click the “+” sign at the end off the first line to add more records

<table>
<thead>
<tr>
<th>S.No</th>
<th>Resident Identifier</th>
<th>LTC Resident with Stay &gt; 100 Days</th>
<th>Resident BMI Score (0-15,99)</th>
<th>Resident on Hospice</th>
<th>Resident has Legal Guardian</th>
<th>Resident Appropriate for CoreQ Survey</th>
<th>Family Member Identifier (Initials Only)</th>
<th>Family Members Living in Another Country</th>
<th>Address for the family</th>
<th>Family Appropriate for CoreQ Survey</th>
</tr>
</thead>
</table>
Responses will result in auto-complete as per CoreQ Exception Rules. Select SAVE to save entries.

![CoreQ Calculation grid](image)

**CoreQ Calculation grid**

<table>
<thead>
<tr>
<th>S.No</th>
<th>Resident Identifier</th>
<th>LTC Resident with Stay ≥ 100 Days</th>
<th>Resident BIMS Score (0-15, 99)</th>
<th>Resident on Hospice</th>
<th>Resident has Legal Guardian</th>
<th>Resident Appropriate for CoreQ Survey</th>
<th>Family Member Identifier (Initiate Only)</th>
<th>Family Members Living in Another Country</th>
<th>Address for the family</th>
<th>Family Appropriate for CoreQ Survey</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>123</td>
<td>Y</td>
<td>N</td>
<td>N</td>
<td>N</td>
<td>Green</td>
<td>AB</td>
<td>N</td>
<td>Y</td>
<td>N/A</td>
</tr>
<tr>
<td>2</td>
<td>234</td>
<td>Y</td>
<td>N</td>
<td>N</td>
<td>N</td>
<td>Green</td>
<td>AB</td>
<td>N</td>
<td>Y</td>
<td>N/A</td>
</tr>
<tr>
<td>3</td>
<td>345</td>
<td>N</td>
<td>N</td>
<td>N</td>
<td>N</td>
<td>Green</td>
<td>AB</td>
<td>N</td>
<td>Y</td>
<td>N/A</td>
</tr>
<tr>
<td>4</td>
<td>456</td>
<td>Y</td>
<td>N</td>
<td>N</td>
<td>N</td>
<td>Green</td>
<td>AB</td>
<td>N</td>
<td>Y</td>
<td>N/A</td>
</tr>
</tbody>
</table>

![Message from webpage](image)

**Message from webpage**

![CoreQ details saved successfully.](image)

OK
Review totals, details and verify all info is recorded and accurate.
Certify data by checking off the Attestation and select SUBMIT
Confirm for Final Submission.
Once OK is clicked, submission is final with no changes allowed.
Final Submission Data will Display. Select LOGOUT
Option Two:
Upload a completed calculation grid Excel document
Select “File Version”
Click on the CoreQ grid file button
Nursing Facility Name: CARE ONE AT LIVINGSTON  Medicaid NF Provider#: 1234

Enter the information of the person submitting the data.

| Last Name | Smith |
| First Name | John |
| Phone | |
| Notes | |
| Email | example@careonelivingston.com |

Upload Excel (XLS, CSV, or XLSX) file with your information.

<table>
<thead>
<tr>
<th>File#</th>
<th>File Type</th>
<th>File Name</th>
<th>Upload</th>
<th>Delete</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Attestation and Wage Schedule</td>
<td>FY2021 Attestation and Wage Schedule (8).xlsx</td>
<td>Upload Files</td>
<td></td>
</tr>
<tr>
<td>2.</td>
<td>CoraQ Calculation Grid</td>
<td>FY22 CoraQ Long-Stay Survey file (1).xlsx</td>
<td>Upload Files</td>
<td></td>
</tr>
</tbody>
</table>

Submit

Files cannot be deleted once submitted.
Verification Message prior to Submission

Warning

Are you sure you want to submit the file?

Continue

Files cannot be deleted once submitted.
Once submitted, no deletion permitted. No further submission in same web session.
### File Submission History

<table>
<thead>
<tr>
<th>S.No#</th>
<th>File Name</th>
<th>File Type</th>
<th>Submitted Date</th>
<th>Submitter Name</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>FY2021 Attestation and Wage Schedule.xlsx</td>
<td>Attestation and Wage Schedule</td>
<td>Oct 29, 2020</td>
<td>John Smith</td>
<td>None</td>
</tr>
<tr>
<td>2</td>
<td>FY22 CoreQ Long-Stay Survey file (I)</td>
<td>CoreQ Calculation Grid</td>
<td>Oct 29, 2020</td>
<td>John Smith</td>
<td>None</td>
</tr>
</tbody>
</table>
Email confirmation of submission

Nursing Facility Reporting Portal :: CoreQ Calculation Grid Document Received

Hello John Smith

Following CoreQ Calculation Grid document has been received on 10-29-2020 through the Nursing Facility Reporting Portal. FY22 CoreQ Long-Stay Survey file (1).xlsx

Thank you,
DHS
Physical spreadsheet upload

✓ Recommended naming convention:
  ✓ FY23 Calculation Grid Facility Name Date of Submission
  ✓ i.e. FY2CalculationGridXYZCareCenter110421
Within 10 business days* of receipt of the CoreQ Long-Stay Survey Sample Size Calculation Grid data, DoAS will provide a letter outlining NF QIPP and CoreQ eligibility:

1. Facility does not meet the minimum sample size
   - There are no additional requirements for these facilities
2. Facility meets the minimum sample size
   - The CoreQ survey process must be initiated, completed and outcome data sent to the DHS CoreQ Vendor by established due dates

*NOTE: Provider will be outreached to address errors identified on the grid which may impact timeframe.
Following notification of CoreQ eligibility, the facility is responsible for initiating the CoreQ survey process

1. DoAS will provide eligible facilities the DHS CoreQ Long-Stay Demographics for Residents and Families standardized template for completion

2. Facilities are responsible for documenting the resident and family demographics and submitting the DHS template to the applicable CoreQ vendor

3. **Demographic submissions to the DHS Vendor, Dr. Nick Castle, are required no later than December 6, 2021 at 5pm EST.**
   
   1. Email address: castlen@coreq.biz
   2. Submitter will receive an email confirmation of receipt from Dr. Castle
   3. Corrections may be requested by Dr. Castle and must be submitted by the submission deadline

**NOTE:** Submissions after 12/6/21 at 5pm EST will not be processed by Dr. Castle
Facilities Currently Collecting CoreQ Information Through a Contracted Vendor:

The facility is responsible to submit resident and family member contact information to their vendor. The CoreQ contracted vendor is responsible to initiate the CoreQ surveys and submit survey response data to Dr. Castle to be calculated. It is the facility’s responsibility to ensure the vendor is complying with the requirements.
NF Contracted CoreQ Vendors:

- Collect CoreQ information from long-stay residents and families of long-stay residents annually;
- Provide the number of long-stay residents and families of long-stay residents given CoreQ surveys annually during the established CoreQ cycle; and
- Provide Dr. Castle with CoreQ data results annually by established due date.
Facilities will only receive the demographics template from DHS if eligible for CoreQ.

The template is required for providers using Dr. Castle to conduct the CoreQ survey process. The names of the residents and name/address of the families who have been determined eligible for CoreQ on the calculation grid are to be submitted on the provided template to Dr. Castle by the due date.
Facilities will only receive the demographics template from DHS if eligible for CoreQ. The template is required for providers using Dr. Castle to conduct the CoreQ survey process. The names of the residents and name/address of the families who have been determined eligible for CoreQ on the calculation grid are to be submitted on the provided template to Dr. Castle by the due date.
Each NJ Medicaid certified facility is required to submit CoreQ Calculation Grid data to DoAS via web portal regardless of CoreQ vendor intent, facility type, facility size, or ability to meet minimum sample size.

Calculation Grid will be available on the DoAS webpage at https://nj.gov/humanservices/doas/resources/

Submission through DHS NF Reporting Portal at http://njdoas-ua.force.com/NF
The online NF portal is to be used for submission of all calculation grid data.

The data is reviewed and verified for accuracy within 3 business days of receipt.

DoAS may request corrections and resubmission which must be completed prior to due date. Request will be made to submitter.

DoAS staff will notify the facility via letter of their CoreQ survey eligibility and required next steps within 10 business days of receipt of an error free calculation grid.

Facilities eligible for CoreQ surveys will receive the CoreQ Survey Demographics Template and additional instructions for the state’s DHS vendor, if applicable.

DoAS will record all submitted information for QIPP purposes.
• **Facilities Using the DHS CoreQ Vendor:** The facility is responsible to submit resident and family member contact information to Dr. Castle on the designated form (after receiving the notification of eligibility from DHS, if applicable) within the specified timeframe. Surveys will be sent to residents and families from Dr. Castle via the U.S. Postal Service. The resident and family member will return the survey directly to Dr. Castle.

• **Facilities Currently Collecting CoreQ Information Through a Contracted Vendor:** The facility is responsible to submit resident and family member contact information to their vendor. These vendors are responsible to initiate the CoreQ surveys and submit survey response data to Dr. Castle to be calculated by the established due date. It is the facility responsibility to ensure the vendor is complying with the requirements.

*NOTE: No CoreQ Long-Stay Demographics for Facilities Templates will be accepted by Dr. Castle after 12/6/21.*
# CoreQ Administration Requirements

<table>
<thead>
<tr>
<th>Facilities With NF Contracted CoreQ Vendors</th>
<th>Facilities using the DHS CoreQ Vendor (Dr. Castle)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Calculate and submit to DHS the CoreQ Long-Stay Survey Sample Size Calculation Grid</td>
<td>1. Calculate and submit to DHS the CoreQ Long-Stay Survey Sample Size Calculation Grid</td>
</tr>
<tr>
<td>2. Submit long-stay resident and family data to contracted CoreQ vendor</td>
<td>2. Submit long-stay resident and family data to DHS vendor - Dr. Castle</td>
</tr>
<tr>
<td>3. Contracted vendor to initiate and collect survey data within the data collection period</td>
<td>3. DHS vendor to initiate and collect survey data within the data collection period on behalf of NFs without a CoreQ vendor</td>
</tr>
<tr>
<td>4. Contracted vendor to provide Dr. Castle with CoreQ data by established due date</td>
<td>4. DHS vendor will collect CoreQ data from CoreQ vendors contracted with NFs</td>
</tr>
<tr>
<td></td>
<td>5. DHS vendor will calculate CoreQ composite scores by established due date and report to DHS.</td>
</tr>
</tbody>
</table>
Facilities whose vendor may have only conducted surveys on one population should work with their contracted vendor to complete the second set of surveys within the timeframe specified.

- In these instances, 2 calculation grids must be submitted.
  - This is due to lack of direct alignment between reported residents and families.
## FY23 CoreQ Timeline for Collection, Transmission, and Reporting for Facilities using NF Contracted CoreQ Vendor

### Table

<table>
<thead>
<tr>
<th>Timeframe</th>
<th>Due Date</th>
<th>Survey Collection</th>
<th>Transmission by NF</th>
<th>Dr. Castle Reporting to DHS</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>November 2021</strong></td>
<td><strong>11/29/21</strong></td>
<td>DHS CoreQ Long-Stay Survey Sample Size Calculation Grid</td>
<td>To DHS via <a href="http://njdoas-ua.force.com/NF">http://njdoas-ua.force.com/NF</a></td>
<td>N/A</td>
</tr>
<tr>
<td>Determined by NF Contracted CoreQ Vendor</td>
<td></td>
<td>CoreQ Long-Stay Demographics for Facilities</td>
<td>To NF Contracted CoreQ Vendor</td>
<td>N/A</td>
</tr>
<tr>
<td><strong>July 1, 2021 – February 28, 2022</strong></td>
<td></td>
<td>CoreQ Surveys Initiated and Responses Received</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td><strong>March 2022</strong></td>
<td><strong>3/4/22</strong></td>
<td>CoreQ data Submitted to DHS CoreQ Vendor</td>
<td>To DHS Contracted CoreQ Vendor via <a href="mailto:castlen@coreq.biz">castlen@coreq.biz</a></td>
<td>March 2022</td>
</tr>
</tbody>
</table>

All due dates have a 5pm EST cutoff time. No data will be accepted after the established due date.
## FY23 CoreQ Timeline for Collection, Transmission, and Reporting for Facilities using DHS CoreQ Vendor

<table>
<thead>
<tr>
<th>Timeframe</th>
<th>Due Date</th>
<th>Survey Collection</th>
<th>Transmission by Facility</th>
<th>Dr. Castle Reporting to DHS</th>
</tr>
</thead>
<tbody>
<tr>
<td>November 2021</td>
<td>11/29/21</td>
<td>DHS CoreQ Long-Stay Survey Sample Size Calculation Grid</td>
<td>To DHS via <a href="http://njdoas-ua.force.com/NF">http://njdoas-ua.force.com/NF</a></td>
<td>N/A</td>
</tr>
<tr>
<td>November 2021</td>
<td>12/6/21</td>
<td>CoreQ-Long-Stay Demographics for Facilities</td>
<td>To DHS CoreQ Vendor via <a href="mailto:castlen@coreq.biz">castlen@coreq.biz</a></td>
<td>December 2021</td>
</tr>
<tr>
<td>December 1, 2021- February 28, 2022</td>
<td></td>
<td>CoreQ Surveys Initiated and Responses Received</td>
<td>N/A</td>
<td></td>
</tr>
<tr>
<td>March 2022</td>
<td></td>
<td>CoreQ survey calculations</td>
<td>N/A</td>
<td>March 2022</td>
</tr>
</tbody>
</table>

All due dates have a 5pm EST cutoff time. No datea will be accepted after the established due date.
The Fiscal Year 2023 CoreQ Survey Period for contracted vendors runs from July 1, 2021 – February 28, 2022.

- CoreQ vendors may initiate surveys during the following time period:
  - July 1, 2021 through February 28, 2022
- CoreQ vendors may collect survey results during the following time period:
  - July 1, 2021 through February 28, 2022
- CoreQ vendors may submit survey result data to Dr. Castle during the following time period. Please ensure that all data is collected prior to submission. Additional survey results will not be permitted after the data is accepted and validated as useable.
  - January 1, 2022 through March 4, 2022
The CoreQ contracted vendor is responsible for translating each person’s response to each of the three CoreQ questions into a numeric response.

- One (1) – Poor
- Two (2) – Average
- Three (3) – Good
- Four (4) – Very Good
- Five (5) – Excellent
- NR – No Response
CoreQ Vendor Survey Results Submission

- Electronic submission via email to Dr. Castle (castlen@coreq.biz)
  - Password protected email formats can be used
  - Email response of receipt within 3 business days of receipt
  - Email response of acceptable data within 5 business days of receipt

- **By deadline of March 4, 2022:**
  - All submissions including error or data format corrections are due no later than 3/4/22
  - No data, including requested corrections will be accepted after 3/4/22, 5pm.
Format for the Data

- Excel readable file
- Flat file preferred
- Responses coded to follow CoreQ scoring
Elements in the file should include:

- 2 clearly labeled and separate tabs
  - 1 tab for Resident Surveys
  - 1 tab for Family Surveys
- Facility Name
- Facility CMS ID Number
- Provide the total number of residents and number of families submitted for the survey process
- Provide a line for each resident and each family included in the survey sample, regardless of survey responses
- Code scores or NR (no response/return) for each of the three CoreQ questions
<table>
<thead>
<tr>
<th>Resident</th>
<th>Q1</th>
<th>Q2</th>
<th>Q3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Resident 1</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Resident 2</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Resident 3</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Resident 4</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Data Submission Format: Family Tab

<table>
<thead>
<tr>
<th>Facility Name:</th>
<th>Facility CMS ID:</th>
</tr>
</thead>
</table>

**Number of Families Attempted for Survey:**

<table>
<thead>
<tr>
<th>Family Member</th>
<th>Q1</th>
<th>Q2</th>
<th>Q3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Family Member 1</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Family Member 2</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Family Member 3</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
**Facility Name:** April View Nursing Center

**Facility CMS ID:** 315999

**Number of residents attempted for survey:** 35

<table>
<thead>
<tr>
<th></th>
<th>Q1</th>
<th>Q2</th>
<th>Q3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Resident 1</td>
<td>5</td>
<td>5</td>
<td>5</td>
</tr>
<tr>
<td>Resident 2</td>
<td>4</td>
<td>5</td>
<td>4</td>
</tr>
<tr>
<td>Resident 3</td>
<td>3</td>
<td>3</td>
<td>3</td>
</tr>
<tr>
<td>Resident 4</td>
<td>NR</td>
<td>NR</td>
<td>NR</td>
</tr>
<tr>
<td>Resident 5</td>
<td>NR</td>
<td>NR</td>
<td>NR</td>
</tr>
<tr>
<td>Resident 6</td>
<td>5</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>...</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Resident 35</td>
<td>4</td>
<td>4</td>
<td>4</td>
</tr>
</tbody>
</table>
What if a vendor collects information for only one population - residents or families?

The NF should select a vendor to survey the second population.

What if not enough responses are received?

All data results must be submitted to Dr. Castle for analysis and calculation. Inability to meet the minimum valid sample size will result in No Score for the CoreQ Composite Score for the survey period.

Will the CoreQ Composite Score be posted by DHS?

Yes. DHS posts NF QIPP data including CoreQ Scores on the DHS website.
For questions regarding this presentation and NF QIPP, please contact:

Division of Aging Services
NFInquiry@dhs.nj.gov
For questions regarding CoreQ, please contact:

Dr. Nicholas Castle  
DHS CoreQ Vendor

E-mail: castlen@coreq.biz