STATE OF IOWA DEPARTMENT OF

Health AND Human

SERVICES

Direct Care Worker
In Nursing Facilities
Turnover Report

December, 2022

IOWA HHS

I. Introduction and Background

The 2001 Iowa Acts (HF 740) directed the Iowa Department of Health and Human Services (HHS) to begin reimbursing nursing facilities under a modified price-based case-mix reimbursement system beginning July 1, 2001. The components of the case mix reimbursement system resulted from a series of meetings that involved providers, industry association representatives, advocacy organizations, and state agency staff.

Throughout the process, the advocacy organizations stressed the importance of including a provision in the reimbursement structure that would financially recognize a nursing facility's capacity to provide quality of life and appropriate access to medical assistance program beneficiaries in a cost-effective manner. With consensus and support of the organizations that participated in the discussions, reference to an Accountability Measures initiative was included in the legislation. The legislation directed HHS to implement a process to collect data for measurements and develop a program to increase nursing facility payments effective July 1, 2002, based on achievement of multiple favorable outcomes.

Following passage of the legislation, HHS convened a workgroup comprised of industry representatives, advocacy groups, state agency representatives and others interested in long-term care. The charge to the workgroup was to refocus reimbursement on quality, encourage compliance with the Health Care Financing Association (HCFA) (now the Centers for Medicare and Medicaid Services, or CMS) quality indicators and survey process, and to do so in a format that was measurable. Per the legislation, a portion of the Medicaid rates under the new case mix system would be based on a facility's achievement of certain accountability measures that would, in turn, link to reimbursement.

The workgroup ultimately settled on ten measures which then went through the administrative rule review process resulting in enactment of 441 IAC 81.6(16)g. Each measure developed was designed to be an "objective" and "measurable" nursing facility characteristic that indicated quality care, efficiency or a commitment to care for special populations. Members of the workgroup recognized that no single measure ensured a "good facility". There was also recognition that the measures would need to be reviewed and modified as more data became available.

One of the ten measures implemented was High Employee Retention Rate. This data was not available prior to the implementation of the Accountability Measures. Therefore, the cost report form, (HHS Form 470-0030, Financial and Statistical Report) was modified to include an additional schedule (Schedule I) to collect employee retention data. All nursing facilities are required to submit the Financial and Statistical Report to Iowa Medicaid on an annual basis within five months after the nursing facilities fiscal year end.

A workgroup consisting of industry representatives, advocacy groups, state agency representatives and other interested parties, met annually to review the Accountability Measures in context of the goals developed when the Accountability Measures were initially implemented in SFY 2001. In early 2008, based on research the workgroup concluded that a measure for employee turnover would better align with the work being completed by Medicare. The employee turnover measure would allow Iowa data to be compared to national data.

In order to determine if a change of the measure to Employee Turnover rather than Employee Retention was warranted, additional data was needed. In order to collect the information, a new employee turnover form was developed by the workgroup and sent to nursing facilities requesting that

they complete the form and voluntarily submit to the Iowa Medicaid. Nursing facilities were requested to complete the form for the period January 1, 2007 through December 31, 2007. This would allow the department and workgroup to collect and analyze the information to allow for future recommendations to the Accountability Measures.

The 2008 general assembly acknowledged in House File (HF) 2539, Section 71 that employee turnover rates in nursing facilities should be documented but also recognized that this information was not currently being collected. The department was directed to modify the nursing facility cost report to capture information on the turnover rates of direct care and other employees of nursing facilities. The department was also required to submit a report on an annual basis to the governor and general assembly which provides an analysis of direct care worker and other nursing facility employee turnover by individual nursing facility, a comparison of the turnover rate in each individual nursing facility with the state wide average, and an analysis of any improvement or decline in meeting any accountability goals or other measures related to turnover rates. The annual report was to include any data available regarding turnover rate trends, and other information the department deemed appropriate.

The department provided public notice on November 13, 2008, of the changes to the cost report and submission requirements. The cost report was modified to include a new schedule that required nursing facilities to report turnover rates of direct care and other employees of the nursing facility. This schedule is identified as Schedule I-1 and is required to be submitted for all cost reports completed on or after December 1, 2008. The department submitted a Medicaid State Plan Amendment reflecting this change to the Centers for Medicare and Medicaid and received approval effective December 1, 2008.

The 2009 general assembly further required in House File (HF) 811, Section 32, that the department implement a system to recognize nursing facilities that provide improved quality of life and appropriate access to medical assistance program beneficiaries in a cost-effective manner. The department adopted administrative rules which rename the program as the "Pay for Performance" program and would direct its implementation. As part of the pay for performance program, the employee retention benchmark was changed to a measure of employee turnover. The legislature did not provide funding for the program in 2010 and has not funded the program since that time; however, employee turnover data continues to be collected annually.

Beginning with cost reports with fiscal years ending during calendar year 2019, a revised Form 470-0030 was utilized to report financial and statistical information. The cost report was updated to better capture information related to the facility and how business is conducted. More job classifications are presented to better reflect the workforce in a nursing facility. As such, the information presented has different categories than in previous years.

II. Observations

The summary below uses data from nursing facilities who submitted Schedule I of the Financial and Statistical Report, Form 470-0030 with fiscal year ends occurring during calendar year 2020 and 2021. However, due to changes in ownership, closings and openings not all nursing facilities submitted data could be used in the analysis.

Schedule I collects data for the following job classifications: administrator, business office, advertising and marketing, laundry, housekeeping, maintenance, director of nursing, administrative nursing, medical record wages, medical director, activities, social services, dietary services, pharmacy consultant, registered nurse, licensed practical nurse, certified aides, other direct care, universal worker, and other. An employee turnover rate is calculated for each job classification, a total facility rate and a total nursing rate. Total nursing rate includes the director of nursing, registered nurse, licensed practical nurse and certified nurse's aide. Contracted employees are not reported. Turnover is used to describe any separation from the job description and may include separation reasons such as resignations, termination, promotions or leaving after seasonal help (e.g. college students returning after summer break).

The "Number of Providers" will be the count of providers reporting at least one individual employee per job classification. Individuals within any job classification may be filled by a contract employee and not considered an employee of the facility.

The report shows that the average turnover for nursing staff (registered nurses (RN), licensed practical nurses (LPN) and certified nursing assistants (CNA) is higher than that for administrative staff (administrator and business office). No further analysis has been done related to this report in regards to any improvement or decline in meeting the measures for the pay-for-performance program as the program has never been funded.

The table below provides a summary of the employee turnover rates reported by job classification for cost reports with fiscal year ends occurring during calendar year 2021. See *Appendix A* for employee turnover rates by job classification for each nursing facility that submitted data.

Job Classification	Number of Providers	Number of providers with Zero Turnover	Minimum Turnover Rate	Maximum Turnover Rate	Average Turnover Rate
Administrator	392	295	0%	1200%	47%
Business Office	404	224	0%	800%	41%
Advertising & Marketing	54	402	0%	1200%	38%
Laundry	319	268	0%	1200%	47%
Housekeeping	377	101	0%	2400%	78%
Maintenance	403	212	0%	800%	42%
Director of nursing	392	251	0%	1200%	51%
Administrative nursing	238	304	0%	600%	52%
Medical Record Wages	138	391	0%	1200%	27%
Medical Director	34	418	0%	100%	13%
Activities	399	227	0%	1200%	42%
Social Services	334	306	0%	1800%	41%
Dietary Service	393	40	0%	600%	82%
Pharmacy Consultant	15	421	0%	0%	47%
R.N.	418	37	0%	800%	56%
Licensed Practical Nurses	418	68	0%	12600%	54%
Certified Aides	420	5	0%	462%	74%
Other Direct Care	182	299	0%	2000%	70%
Universal Worker	60	380	0%	600%	85%
Other Staff	171	328	0%	1200%	48%
Total Facility	420	1	0%	385%	66%
Total Nursing	420	2	0%	400%	69%

The table below provides a summary of the employee turnover rates by job classification for each nursing facility cost report with fiscal year ends occurring in calendar year 2021, (identified as 2022 Report) and cost reports with fiscal year ends occurring in calendar year 2020 (identified as 2021 Report).

Job Classification	Number of Providers		Number of providers with Zero Turnover		Percent of Providers With Zero Turnover		Minimum Turnover Rate		Maximum Turnover Rate		Average Turnover Rate	
	2021 Report	2022 Report	2021 Report	2022 Report	2021 Report	2022 Report	2021 Report	2022 Report	2021 Report	2022 Report	2021 Report	2022 Report
Administrator	358	392	341	295	95%	75%	0%	0%	400%	1200%	23%	47%
Business Office	387	404	263	224	68%	55%	0%	0%	345%	800%	27%	41%
Advertising & Marketing	57	54	399	402	700%	744%	0%	0%	303%	1200%	25%	38%
Laundry	316	319	262	268	83%	84%	0%	0%	588%	1200%	43%	47%
Housekeeping	380	377	97	101	26%	27%	0%	0%	1250%	2400%	66%	78%
Maintenance	395	403	253	212	64%	53%	0%	0%	606%	800%	29%	42%
Director of nursing	403	392	307	251	76%	64%	0%	0%	1250%	1200%	28%	51%
Administrative nursing	234	238	340	304	145%	128%	0%	0%	800%	600%	23%	52%
Medical Record Wages	144	138	387	391	269%	283%	0%	0%	400%	1200%	20%	27%
Medical Director	25	34	412	418	1648%	1229%	0%	0%	48%	100%	12%	13%
Activities	390	399	239	227	61%	57%	0%	0%	588%	1200%	34%	42%
Social Services	324	334	334	306	103%	92%	0%	0%	600%	1800%	28%	41%
Dietary Service	386	393	44	40	11%	10%	0%	0%	335%	600%	63%	82%
Pharmacy Consultant	12	15	413	421	3442%	2807%	0%	0%	0%	0%	17%	47%
R.N.	411	418	51	37	12%	9%	0%	0%	303%	800%	47%	56%
Licensed Practical Nurses	411	418	70	68	17%	16%	0%	0%	376%	12600%	46%	54%
Certified Aides	411	420	12	5	3%	1%	0%	0%	235%	462%	61%	74%
Other Direct Care	131	182	327	299	250%	164%	0%	0%	2500%	2000%	58%	70%
Universal Worker	52	60	373	380	717%	633%	0%	0%	1765%	600%	82%	85%
Other Staff	168	171	322	328	192%	192%	0%	0%	800%	1200%	37%	48%
Total Facility	411	420	2	1	0%	0%	0%	0%	166%	385%	53%	66%
Total Nursing	411	420	5	2	1%	0%	0%	0%	225%	400%	57%	69%

III. Appendices

Appendix A: Employee Turnover Rates by Job Classification for Each Nursing Facility. Additional detail about Nursing Facility Rates, Reports, and Data may be accessed through our website here:

https://dhs.iowa.gov/ime/providers/csrp/nfr/nfr-2023