1. Where are the vendor specifications on the QTSO page?
The vendor specifications can be found at:

2. What software do you recommend to facilities for PBJ reporting?
We do not recommend any specific software vendors. What we do recommend is for you to talk with your payroll and timekeeping vendor to find out what they are capable of doing for you. Are they going to be able to assist you? Will they be able to submit electronically? We suggest you request their final process by May 1.

3. Does contracted staff, such as dietary or therapy staff required to complete PBJ reporting?
Dietician yes, other dietary staff no. Therapy that you are billing for must be captured, including each therapist and their hours on a daily basis.

4. Is there an example of PBJ done in excel format that can be saved as an XML file?
You will have to check with your vendor.

5. The guideline asks for night shifts to be split and recorded on the actual day worked, but our payroll system does not store data that way. We store the shifts entirely on the day that they begin, even if they cross midnight. Is there an option to report the entire shift on a single day? Night shift must be split between dates. CMS will not accept all hours from multiple days on one date.

6. Can more than one person have a CMSNet User ID?
You may have two CMSNet User IDs.

7. If I have an ID to access MDS submission, can I use the same MDS000 number to transmit PBJ?
If you have a CMSNet User ID, you can use the existing number. If not, you need to apply for the CMSNet User ID.

8. If we pull data from our payroll system, who is determining what part of those hours are actual direct care? (ex. are we keeping breaks, lunch, phone calls, inventory counting, supply collection, etc.)
All hours worked are to be added. You do not need to separate breaks, meals, etc.

9. If you have contract therapy and dietary companies, should they give the hours to the facility and let the facility submit everything together rather than submitting hours on the facility’s behalf?
You may manually submit those hours.

10. Is there a template from CMS for entering manual info from agency consultants, medical director, or those not on our payroll system that is easier to use than the XML format?
No, CMS is leaving the tracking and submission up to the facility. To upload electronically, it must meet the CMS XML submission requirements. For manual submissions, assign an employee number to make sure you have an auditable system, and then upload manually.
11. Can the submissions be transmitted via SFTP?  
No, only XML is accepted.

12. Can the ID be a SS#?  
No, the employee ID should not contain any PHI.

13. How do we upload employee data into the PBJ system? Can we make up ID numbers for agency, contract, non-employees?  
Refer to the QTSO PBJ education for upload instructions. You can assign any ID numbers to employees and non-employees.

14. We are a long-term care facility attached to a hospital. Do we use total hours for positions such as social worker and dietary department that are serving both the long-term care and the hospital? Or is the expectation that they will be split out and only use nursing home hours?  
You can only use hours worked in the nursing home.

15. How do we report when a salaried director of nursing covers a CNA shift?  
According to CMS, you can enter additional hours over the 8 hours if a salaried person covers a shift for another employee. Make sure you do have a system to verify those hours (i.e. they clock in for those hours).

16. Do all of the employees’ records need to be entered manually and prior to July 1, 2016? Can they be populated?  
They can be electronically populated through an XML file set up to meet CMS specifications.

17. We have a long-term care unit attached to the hospital that our dietary staff prepares the meals for. How would we record the dietary staff hours since they do not solely provide meals to the LTC unit?  
You will only enter dietician and paid nursing assistant hours within the dietary department.

18. For contact employees like PT, do we enter each person into QTIES system as a new employee and keep track of their start/end dates?  
Yes.

19. If you have an employee terminate and then rehired, do you use the same ID number they had originally?  
The same employee ID can be used.

20. Our employees all have unique ID’s but if one employee transfers to a different facility, they have an additional employee ID for the new facility. Is this an issue?  
No, each facility has their own submission.

21. If our medical director is set up to be paid one hour per pay period, do we only list one hour in submission? If so, how would we post it to a specific day?  
If, by contract, your medical director is only paid one hour, you will only list one hour. Post to the day that the medical director is onsite.

22. What about lab or x-ray services? Do we have to report their hours as well?  
You can list those that are for services billed to you. If the lab or x-ray is billing for those services, you will not list. You need to decide if this is information important to track.

23. If we have contract staff through a company that goes to other facilities (not connected with us), they may only be here four days out of the year, what is considered their start date? The day they were here the first time (it may have been a year ago or even longer).  
The start date is the first date they are in your facility. You will not have to enter them until they are in your facility after July 1, 2016.

24. Under Consultants – does that include Pharmacy?  
Yes, your pharmacy consultant can be listed.
25. Do you count hours spent in training orientation, staff meetings, all employee meetings, etc? Or is that “non-productive time”?
If the employee is not on the unit working, you will not enter that time.

26. If we upload the file, do we need to enter employee’s information or would the download handle all of the information?
All information can be uploaded as long as the file meets CMS specifications.

27. When an exempt EE works more than eight paid hours, ex. 10 hours in a single day, is the two hours worked over not reportable, even if two hours were direct care?
You are allowed to add additional hours to an exempt employee if they are working in another capacity doing direct care.

28. How does an RN’s time get allocated or reported between direct care vs. administrative time?
All RN time can be captured.

29. If an employee is working in multiple departments and one of their primary departments is not direct care, but they clock in under a direct care department when they are working it, can we claim those hours for direct care even though it’s not the primary department?
Yes, any direct care hours can be captured. List the job code as the direct care job in the PBJ system.

30. How do we report partial hours?
Round to the closest hour.

31. Do you need to set staff up manually in the system if you plan to submit data files?
No, you can electronically upload as long as it meets PBJ specifications.

32. Do you need to separate out hours spent by therapists providing Med B services as opposed to Med A therapy services?
As long as the facility is billing for Med B services, it shouldn’t be any different. Only enter hours for your residents.

33. For lab and x-ray staff under Medicare Part A, we receive a per diem. Lab and x-ray are paid by us out of the Medicare payment. Do we have to submit those hours? In other instances, lab and x-ray bill insurance directly.
You can track the hours for Medicare A residents but not for those that others bill.

34. What if hourly employees are scheduled to work more than eight hour shifts? For example, our nurse managers work four days a week, 10 hours a day.
You would be able to add 40 hours per week for them.

35. Would a chaplain that is contracted for the facility need to be included?
There is no category for chaplain but you could add them as other (40).

36. How would you record a director of nursing who oversees two nursing homes (16 and 8 beds respectively) and a hospital unit (16 bed)?
Each facility should capture the actual hours for the DON. You might consider having the hours identified in the individual’s job description. You would not be able to capture the hospital unit hours.

37. I have registered as a vendor twice, but am not receiving any confirmation or other response. How do I know that it properly registered me?
Contact help@qtso.com.

38. If your vendor will not interface, what position in the facility would do it manually? Payroll, HR or staffing coordinator?
You would decide that internally. You may want to perform a trial prior to July 1 so you can see the time commitment.
39. Are you able to send electronically and also enter manually other staff that are not in the electronic file?
   You can submit manually or electronically or a combination of both.

40. Rules state that we can upload files as many times as we want for a quarter, but it only takes the last one submitted. How do I submit data by uploading files multiple times throughout the quarter and have it take all the files?
   If you use the “merge” function, it will only add to your data or change data that you changed. You would use the “replace” function only if you want all data replaced.

41. What if staff clock in under education on the time clock if they are attending an in-service and they are already in the facility working? Or if they come in on their day off to attend?
   Staff time in training should not be counted. If they come in just for training, those hours should not be included.

42. Can the start date of an employee be changed?
   Am I allowed to change IDs when an employee becomes married? If I make an error, can I perform edits?
   Contact help@qtso.com.

43. What about Hospices that come into our facility?
   Hospices bill Medicare so you would not capture those hours.

44. Can we send in mixed data? ex: contractors manually organization XML?
   Yes.

45. Are there requirements to submit dollars? Shift premiums? Or is it only hours?
   Only hours.

46. Do job codes/job descriptions indicate what tasks will be considered part of direct care reporting? ex: charting/exchanging report from nurse to nurse, etc.?
   All hours related to patients are included.

47. For overnight shifts, we do not know if the unpaid break occurs before or after midnight. So when we develop an algorithm to split the shift we plan to assume the unpaid break occurred in the larger portion. Is that arbitrary choice acceptable?
   You should capture their total hours paid but split between the dates.

48. To help clarify reporting for “other physicians,” do we report the hours for physicians who directly bill CMS for their Medicare B reimbursements or only those who are included in our organization’s Medicare Part A submissions?
   Only those that do not bill for their services themselves.

49. Is non-productive time defined as PTO/sick/vacation? What about in-service, meetings, and seminars?
   Same.

50. Can salaried staff work more than 40 hours per week or 80 hours in a pay period?
   Yes, but you will only capture what they are paid for.

51. If we are only giving census last day of month, how is direct care ratio accurate?
   That is the way the system is set up.

52. When we have podiatry services, vision services, etc. come in to the facility, they are billing for services. Do we count their hours?
   Not if they are billing Medicare B themselves.

53. Do you include billable bed-holds in the census numbers?
   No, bed-holds are not counted.
54. Do the Medicare census numbers include the Medicare Advantage plans or just traditional Medicare?

The census numbers include traditional Medicare. Medicare Advantage plans are counted as “other.”

55. A nun who is the director of nursing at a Catholic nonprofit is not on the company payroll because she receives pay through her order, not the company. Are her hours still reported?

As long as her hours can be tied back to something that is auditable and verifiable, for instance, a contract or invoice. Then yes, her hours can be reported.

56. Does the entry of data into the PBJ system have an audit trail on who did the entry or changed data that was submitted in an XML file?

For XML submissions, the user id of the submitter will show up on the validation report.

---

Larry Lester (llester@wipfli.com) has extensive experience in the financial management of long-term care facilities. He is extremely knowledgeable in preparing and analyzing financial budgets, determining the reimbursement of operational decisions, and presenting in-depth seminars on these and other critical issues.

Larry possesses in-depth knowledge of Medicare and Medicaid as these programs relate to the long-term care environment. He has assisted facilities in managing operational decisions to ensure appropriate Medicaid reimbursement and has assisted facilities in appealing audit adjustments. He has also provided educational sessions to facility staff on consolidated billing regulations.

Pat Boyer (pboyer@wipfli.com) brings more than 30 years of experience to Wipfli LLP’s senior living health care practice. Her clients appreciate her deep knowledge and understanding of the challenges they face and her assistance with achieving performance improvement and process development as well as meeting and exceeding state and federal compliance standards.

Pat has extensive experience in evaluating facility processes, documentation systems, and developing performance improvement plans to improve efficiency and effectiveness of facility systems. Pat has conducted numerous workshops on related topics at the national, state, and local levels. Pat also authors the monthly Ask the Payment Expert column in McKnights Long-Term Care News.