

MassHealth Nursing Facility Direct Care Cost Quotient (DCC-Q) Frequently Asked Questions (FAQ)

This document provides additional clarifying information on the filing requirements for the MassHealth Nursing Facility Direct Care Cost Quotient, required pursuant to [101 CMR 206.12: Standard Payments to Nursing Facilities](#) and the related [Administrative Bulletin 21-02: Nursing Facility Direct Care Cost Quotient](#).

Information on DCC-Q Interim and Final Reporting Informational Requirements

Question 1: What payers should be included in “Nursing Facility Payer Revenue?”

Answer: All payers (Medicare, Medicaid, Managed Care, Private insurance, etc.) should be included in this line item.

Question 2: What is “Restorative Therapy”?

Answer: “Restorative Therapy” includes speech therapists, physical and occupational therapists and related aides and assistants, whether they are through a contracted rehab company or directly employed by a facility.

Question 3: Can any staff with a title of “Administrator” or “Executive Director” be included in this filing?

Answer: No, anyone with "administrator" or "executive director" in their title should be excluded.

Question 4: On which line should Nurse Supervisors, Unit Managers and Case Managers be reported in Section A of the filing?

Answer: They should be included under the appropriate license level, such as the “Registered Nurses” line item.

Question 5: Do you intend for all staff working onsite, other than Administrators, to be included in this filing? For instance, would a facility include human resources, purchasing, medical records or scheduling staff?

Answer: Facilities should report on-site staff who regularly works with residents, caregivers, or both.

Question 6: Should a provider include any State/Federal COVID-19 or federal Department of Health and Human Services stimulus related funding in “Nursing Facility Payer Revenue?”

Answer: Yes, this type of funding should be included in the revenue, unless it is a loan.

Question 7: Should a provider report Paycheck Protection Program (PPP) loans as revenue?

Answer: No, PPP loans should not be reported as revenue.

Question 8: What is included in “MassHealth Fee-for-Service and Managed Care Days?”

Answer: All MassHealth Days, including Fee-for-Service and Medicaid managed care. Medicaid Managed Care includes any of the [Senior Care Options](#) plans, [Medicaid MCO or ACO](#) plans , or [MassHealth One Care](#) Plans.

Question 9: Where should contracted Occupational Therapists, Physical Therapists, and Speech Therapists be reported on the webform?

Answer: This information should be included within Line 18, column 2 (Restorative Therapy).

Question 10: Where should activities staff be reported on the webform?

Answer: Under "Recreational Therapy" (line 19).

Question 11: What should be included in Section F, Line 46? Medicaid managed care days (SCO days) or managed care skilled days?

Answer: Medicaid SCO days should be reported in this line.

Question 12: Should facilities report on a cash or accrual basis?

Answer: All data reported on the Interim and Final Compliance Forms must be reported on an accrual basis.

Question 13: If a facility has been acquired during the interim reporting period, how should it report the data?

Answer: Facilities should obtain data from the seller of the facility if needed to complete the filing. A provider that purchased a facility during, or after, the reporting period remains responsible for ensuring that a complete filing is made in compliance with EOHHS regulations.

Question 14: If a facility has a Health Reimbursement Account (HRA) program that pays a portion of employee's insurance copay/coinsurance, may it report those expenses?

Answer: The facility may report the amounts paid for employee copayments, deductibles, and coinsurance as compensation. Do not include the administrative fee charged by the HRA administrator.

Question 15: What is permissible to report for contracted plant/operations maintenance?

Answer: Facilities may report the labor portion of contracted services related to the operation, upkeep, and maintenance of the facility, including, but not limited to, landscaping services, plumbers, sanitation, and elevator maintenance. The facility may not include the costs for the parts component of the service. For example, if the facility hired a contractor to repair an elevator, it may claim the labor charge from the vendor, but it may not include the charges for the elevator parts. Facilities should not report any expenses for contracts related to major improvements that would ordinarily be capitalized and depreciated over its useful life under the facility's capital asset policy.

Question 16: Why are certain expenses excluded from the form, such as house supplies, personal protective equipment, etc.?

Answer: The primary purpose of this form is to compare staff compensation amounts to facility revenues; therefore, most supply and non-personnel expenses are not included. MassHealth will determine if it will make additional changes to the DCC-Q formula after a review of the interim DCC-Q report data.

Question 17: Would the Medicare Ancillary Costs also include Managed Care products and the SCO Skilled population or is It exclusively Medicare Part A Ancillary costs only?

Answer: Include Medicare ancillary costs if the costs are related to any Medicare product, including the SCO population.

Question 18: Would the onsite exclusion of business office staff still be applicable if they were only working remotely because of COVID but would otherwise be onsite?

Answer: Compensation for clerical staff employees who are working remote temporarily, who regularly work with residents or caregivers, can be reported on line 6.

Information on DCC-Q Interim and Final Payment Reporting Process

Question 19: How does a facility file the interim and final financial report?

Answer: Each facility is required to **electronically submit** to EOHHS interim and final financial reports using the interim and final financial reporting forms (the “forms”), which can be accessed on and filed through the same web portal used for the direct care add-on reporting requirements. If you have any issues (1) accessing the portal, (2) with your portal password, (3) or any other general issues, please contact NFRreporting@umassmed.edu.

(Note, if you use Firefox, you may need to change your settings to allow the website to load (via Advanced button)).

Question 20: How does a facility obtain access to the Interim and Final Financial Reporting Forms?

Answer: Individuals filing on behalf of a nursing facility can access the both the DCC-Q Interim Financial Reporting Form and Final Financial Reporting Form through the UMASS Medical School Nursing Facility Reporting website. The portal can be accessed at <https://www.uenter.org/NF/>.

Question 21: What should I do if I need to reset my password?

Answer: If a registered user forgot, or needs to reset, their password please email NFRreporting@umassmed.edu for assistance. Please **DO NOT** call the phone number listed on the webpage you are directed to after clicking on “Forgot Password.”

Question 22: Is the interim financial report mandatory and, if so, what is the filing date?

Answer: Yes, all facilities that are MassHealth providers must submit the interim financial report, using the interim financial reporting form no later than March 1, 2021.

Question 23: What categories of staff does the multiplier apply to and who decided which staff types were applicable?

Answer: Social Workers and Recreational Therapy staff have a 1.5 multiplier whereas all other listed staff types have a 1.0 multiplier. The multiplier amounts were determined by MassHealth.

Question 24: Will EOHHS audit a facility’s reporting of the Direct Care Cost Quotient to ensure the reporting was in accordance with the requirements set forth in 101 CMR 206.12: Standard Payments to Nursing Facilities?

Answer: All data reported as part of the interim or final financial reports is subject to review and audit by EOHHS. Audits may include field or desk reviews, and facilities may be required to provide additional supporting documents to support reported amounts, including, but not limited to, payroll registers and invoices.

Question 25: What does a facility do if it has questions on reporting requirements?

Answer: EOHHS has created an e-mail address for facilities if they have questions concerning DCC-Q or completing required reporting. Facilities may send their questions to the following e-mail address:

NFReporting@umassmed.edu.