This fact sheet answers questions you may have about the Minnesota Nursing Home Report Card. The report card includes important information on all nursing homes in certified to participate in Minnesota’s Medical Assistance (MA) payment program.¹

Overview and purpose

What is the purpose of the nursing home report card?
The Minnesota Department of Human Services and the Minnesota Department of Health, collaborating with the University of Minnesota, created the site to help you compare nursing homes in important areas of quality:
- Long-stay resident quality of life
- NEW – Short-stay resident experience
- Family satisfaction
- Clinical quality of care
- NEW – Rates of hospitalizations and discharges to the community
- State inspection results
- Hours of direct care
- Staff retention
- Use of temporary nursing staff
- Proportion of beds in single rooms

What are some helpful features of the nursing home report card?
- Daily prices for care and private rooms
- Multiple ways to search for facilities
  - NEW – By long or short stay
  - By quality performance
  - By city or Zip code
  - On a map
- Side-by-side facility comparisons
- Five years of quality information for each facility
- Print or save an Excel file for any page

Each nursing home receives from one to five stars on each quality measure. You can view lists of facilities in the area of the state in which you are seeking a home. You can also sort your facility list by what quality measure(s) are most important to you.

The Minnesota nursing home report card is state of the art. It shares valuable information in a way is easy to understand and that compares nursing homes fairly.

Why doesn’t the report card show daily prices for short stay care?
Almost all short stay care is paid by the federal Medicare health insurance program and/or private health insurance companies. Please contact your insurance provider or the nursing home for more information on the cost of short stay care.

Is this the only information I need when choosing a nursing home?
This report card alone should not be the only information you use when choosing a home. You should also visit the homes you are considering, and talk with friends, family and staff members of the facility before making a final decision.

The Get Help link at the top of the report card includes more information you may find helpful in choosing a home.

¹ Minnesota is interested in adding its Veterans’ Homes to the Report Card in the future.
How does the report card affect overall quality in Minnesota’s nursing homes?
In addition to providing information to help consumers choose a nursing home, the report card promotes a high standard of quality as facilities strive to get the best scores possible.

The state works to improve nursing home quality through regular inspections, free advocacy services, and by setting payment rates depending on quality. The state does not directly reward or punish facilities on the report card. Rather, it publishes this information to better inform people needing care, facilities, referral agents and the public.

Is there a report card for assisted living and memory care facilities?
The state is developing a similar report card for these providers, which offer a lower level of nursing and professional staff support than nursing homes. Minnesota plans to introduce the Assisted Living Report Card in 2021.

Do any other states have report cards?
Almost every state offers some kind of nursing home report card. Minnesota’s is the most comprehensive, including interview and survey results with residents and families of nearly every nursing home in the state.

Why are two state agencies involved?
The Minnesota Department of Health enforces nursing home quality. The Minnesota Department of Human Services purchases nursing home services. Both departments share a common goal to help providers improve quality. Better information about health care helps to promote safer, higher quality, more efficient care for everyone.

Using the report card

What if I don’t have Internet access?
Call the Linkage Line, 1-800-333-2433. Linkage Line hours are Monday to Friday 8AM to 4:30PM; messages can be left at any time.

What does it mean when quality information is missing for a nursing home?
If information is missing on the report card, the nursing home offers few or no services on that topic, has not been open long enough to collect the information, and/or is too small to report reliable scores. For more information, contact the nursing home or Teresa Lewis, DHS at 651-431-4208 or Teresa.Lewis@state.mn.us.

Where can I get technical information about the quality data?
Go to the report card website and click on the Get Help link at the top of the page.

How do I get help or share comments?
Please click the Contact Us link at the top of each page to ask questions or offer suggestions about the report card.

Minnesota nursing homes today

The state has 358 Medicaid-certified nursing homes with about 27,200 beds.

Medicaid pays for over half of all resident days. Minnesota’s Medicaid program, Medical Assistance (MA), is administered by the Department of Human Services. The federal Medicare program covers another 10 percent of resident days for short-term rehabilitation.

The average person needing long-term care in a MA-certified nursing home in Minnesota can expect to pay about $260 per day, or about $95,000 per year.
How can I get more information about nursing home quality?
Visit the nursing homes you are considering, observe the care provided, look at the Medicare Nursing Home Compare website (www.medicare.gov/NHCompare), look at state inspection survey and complaint reports (www.health.state.mn.us), talk with people you know who are using different nursing homes, and/or talk with managers or staff in nursing homes you are considering.

If you have concerns, ask the nursing home’s managers what plans they have for improving their quality.

To file a formal complaint, contact the Minnesota Adult Abuse Reporting Center at 1-844-880-1574, or the resident advocates of the Minnesota Office of the Ombudsman for Long-Term Care at 1-800-657-3591.

About the quality measures
Which of the quality measures is most important?
Because people have different priorities about nursing home quality, the report card allows you to select the three measures you feel are most important to you. Based on your preferences, the report card ranks facilities within your chosen geographic region, or allows you to skip that step and see information about facilities in the area sorted alphabetically.

How current is the information?
1. Clinical quality indicators and hospitalizations are from assessments performed by facility staff between July 2018 and June 2019. Community discharges are from April 2018 to March 2019. This information is updated quarterly.
2. Short-stay resident experience information was last collected fall 2017 through summer 2018. This information is updated annually.
3. Long-stay resident quality of life information was last collected in fall 2018. This information is updated annually.
4. Family satisfaction information was last collected in fall and winter 2018. This information is updated annually.
5. State inspection results were taken from the state database July 10, 2019. This information is updated quarterly.
6. Hours of direct care are for the year ending September 30, 2018. This information is updated annually.
7. Staff retention is for the year ending September 30, 2018. This information is updated annually.
8. Use of temporary nursing staff is for the year ending September 30, 2018. This information is updated annually.
9. Proportion of beds in single bedrooms was reported as of September 4, 2019. This information is updated quarterly.

How reliable is the information?
A great deal of effort goes into making sure the data reported by facilities or gathered by independent third parties are done so consistently, in accordance with detailed definitions. The statistics have been compiled using methods and, in some cases, consultants from the University of Minnesota. Clinical, staffing and single-bed room information is provided by nursing home staff and is audited by the state.

If a facility discovers an error in their information, will the state correct it?
If a facility or the state discovers an error in their current or past star ratings, the state will correct it as quickly as possible.
If I want to view facilities ranked by my most important quality measures, how is the list of facilities created?
The report card selects all facilities within your chosen area of the state. It then determines a score for each facility based on the three prioritized measures, and sorts the list by that score. The score equals the number of stars for the first measure multiplied by four, plus the number of stars for the second measure multiplied by three, plus the number of stars for the third measure multiplied by two. Ties are sorted by the total number of stars on the remaining five measures. Any facilities that are still tied are listed alphabetically.

Overall performance of Minnesota’s nursing homes

What is the quality of the state’s nursing homes?
We believe the report card shows a high level of quality in Minnesota’s nursing homes:
- Clinical quality steadily improves each year across almost all topic areas.
- The average facility provides residents almost six hours of direct care staff time per day.
- Seventy percent of all direct care staff stay on the job for a year or more.
- Less than three percent of nursing staff hours are provided by temporary workers.
- Sixty percent of beds are in private rooms.

The average nursing home does better in some of these quality measures than others. However, it is rare for a nursing home to have low scores across multiple areas. This usually indicates a systemic problem at the facility.

Where can Minnesota nursing homes do better?
About a quarter of people living in nursing homes long-term respond negatively when asked about their relationships with staff and other residents. This includes the opportunity for meaningful conversation and connection with others. Almost half of long-stay residents say they are lonely.

For almost half of the state’s nursing homes, inspectors have found problems on their current or prior inspection, or on their one-year complaint record. These problems include harm, substandard quality of care, or a large number of deficiencies. Facilities may face reinspection, fines and/or denial of new admissions until they are back in compliance.

Where are Minnesota nursing homes doing especially well?
Eighty percent of long-stay residents give their nursing home high ratings for offering meaningful things to do. Nursing homes have steadily improved in this area, branching out from traditional offerings such as bingo to provide engaging, individual options.

Ninety percent of short-stay residents are happy with the physical, occupational and/or speech therapy at the facility. Most people seek short-term nursing home care for rehabilitation after a hospital stay.

For more information
Please contact Teresa Lewis, Nursing Facility Rates and Policy, DHS at 651-431-4208 or Teresa.Lewis@state.mn.us.