



Complete, Accurate, &
Timely Submission of
Payroll-Based Journal
(PBJ) Data to CMS
&
The WA State Minimum
Direct Care Nursing
(MDCN) 3.4 HPRD
Threshold.

Residential Care Services



AGENDA

- Section 1: Learn** about the **Federal Regulations, Policies** and **Training** materials that inform complete, accurate, and timely submission of PBJ data to CMS.
- Section 2: Understand** how to ensure **Accurate Reimbursement** by submitting complete and accurate PBJ data to CMS.
- Section 3: Understand** updated regulatory requirements for **Evaluation of PBJ Data** during survey.
- Section 4: Learn** how to access and use **CASPER and iQIES Reports** to ensure the PBJ data received by CMS is an accurate representation of facility staffing patterns for the quarter under review.
- Section 5: Learn** about WA State regulations, policies & procedures that inform the state **Minimum Direct Care Nursing (MDCN) 3.4 HPRD threshold**.

Federal Regulations, Policies, & Training Materials

Complete and Accurate Submission of Payroll-Based
Journal (PBJ) Data to CMS by Deadline

NH Staffing



The Centers for Medicare & Medicaid Services (CMS) have identified staffing as one of the vital components of a nursing home's ability to provide quality care.

CMS uses staffing data to more accurately and effectively gauge its impact on quality of care in nursing homes.

Staffing data is posted on the [CMS Nursing Home Compare website](#) and is used in the [Nursing Home Five Star Quality Rating System](#) to help consumers understand the level and differences of staffing in nursing homes.

Resources



To inform complete, accurate, and timely submission of PBJ data, CMS provides guidance and training at:

[Staffing Data Submission Payroll Based Journal \(PBJ\) | CMS](#)

- This is the CMS PBJ SharePoint page. Be sure to scroll to the bottom of the page for additional resources.

[Payroll Based Journal \(PBJ\) | QIES Technical Support Office \(QTSO\)](#)

- This page contains PBJ training modules & guidance documents.

Additional PBJ Policy and Guidance Materials

Electronic Staffing Data Submission PBJ – LTC Facility Policy Manual

- This manual is popularly known as the PBJ Policy Manual.

Electronic Staffing Data Submission Payroll-Based Journal (PBJ)

- This document contains PBJ Policy Manual FAQs.

Important PBJ Action Items 02-24-2022

- This document is a one-page PBJ “cheat sheet”.



Fiscal vs State Quarters & Submission Deadlines

Fiscal Quarters

Fiscal Quarter:	Timeframe:	Deadline for submission of PBJ data for quarter:
1	Oct 1 – Dec 31	Submissions must be received by the end of the 45 th calendar day after the last day in each fiscal quarter.
2	Jan 1 – March 31	
3	April 1 – June 30	
4	July 1 – Sept 30	

State Quarters

State Quarter:	Timeframe:	Deadline for submission of direct care nursing & GBHW data for quarter:
1	Jan. 1 - March 31	May 30th
2	April 1 – June 30	August 29th
3	July 1 – Sept 30	November 29th
4	Oct 1 – Dec 31	March 1st

Federal and State data submission deadlines are different.

Fiscal and State quarter timeframes are different.

Ensure the year and months identified in the data you are reviewing match the timeframe under review.

Federal Rule

- [Section 6106 of the Affordable Care Act](#) (ACA) requires facilities electronically submit complete and accurate direct care staffing information (including agency and contract staff) based on payroll and other auditable data. The data, when combined with census information, can then be used to report on the level of staff in each nursing home, as well as employee turnover and tenure, which can impact the quality of care delivered.
- [42 CFR 483.70](#)(p)(1-5) “Long-term care facilities must electronically submit to CMS complete and accurate direct care staffing information, including information for agency and contract staff, based on payroll and other verifiable and auditable data in a uniform format according to specifications established by CMS.”
- [F-Tag F851](#) provides additional information, guidance, and resources for evaluating compliance.
- If the facility demonstrates non-compliance with federal requirements at [42 CFR 483.70](#), a citation at [F-Tag F851](#) is required.

Direct Care Staff

“Direct Care Staff are those individuals who, through interpersonal contact with residents or resident care management, provide care and services to allow residents to attain or maintain the highest practicable physical, mental, and psychosocial well-being. Direct care staff does not include individuals whose primary duty is maintaining the physical environment of the long-term care facility (for example, housekeeping).” *(PBJ Policy Manual)*

Data for direct care service hours that are direct billed to Medicare, Medicaid, or Private Insurance, must not be included in the PBJ data submitted to CMS or WA State.

Care Compare Website – Nurse Staffing Data

[Design for Care Compare Nursing Home Five-Star Quality Rating System: Technical Users' Guide – July 2025:](#)

- CMS uses a set of exclusion criteria to identify facilities with highly improbable PBJ staffing data.
- Nurse staffing levels are not reported for these facilities. “Not Available” is displayed on the Care Compare website.
- Some of these nursing homes will also not receive a staffing rating; however, some will receive a one-star staffing rating due to scoring exceptions.

CMS Exclusion Criteria – PBJ Data

- Total nurse staffing (job codes 5-12), aggregated over all days in the quarter with at least one resident, is zero (0 hours per resident per day).
- Total nurse staffing (job codes 5-12), aggregated over all weekend days in the quarter with at least one resident, is zero (0 hours per resident per day).
- Total nurse staffing (job codes 5-12), aggregated over all days in the quarter with at least one resident, is excessively high (>12 hours per resident day).
- Total nurse staffing (job codes 5-12), aggregated over all weekend days in the quarter with at least one resident, is excessively high (>12 hours per resident day).
- Nurse aide staffing (job codes 10-12), aggregated over all days in the quarter with at least one resident, is excessively high (>5.25 hours per resident day).
- Nurse aide staffing (job codes 10-12), aggregated over all weekend days in the quarter with at least one resident, is excessively high (>5.25 hours per resident day).

More Federal Resources

[Important PBJ Action Items](#)

[Payroll Based Journal \(PBJ\) | QIES Technical Support Office \(cms.gov\)](#) – Training modules and guidance documents

[Fact Sheet: Nursing Home Compare Five-Star Quality Rating System](#)

[CASPER Reporting Provider User Guide](#)

[CASPER Reference & Manuals | QIES Technical Support Office](#)

[Sufficient Nursing Staff Pathway-Revised](#)

Federal Regulations, Policies, & Training, (Question 1)

If a nursing home resident receives services from a provider that direct bills Medicare, Medicaid, or Private Insurance, related hours are ineligible for inclusion in the direct care nursing HPRD threshold calculation.

- TRUE
- FALSE

Federal Regulations, Policies, & Training, (Answer 1)

The answer is true.

If a nursing home resident receives services from a provider that direct bills Medicare, Medicaid, or Private Insurance, related hours are ineligible for inclusion in the direct care nursing HPRD threshold calculation.

Ensure Accurate Reimbursement

Submit Complete and Accurate PBJ Data to CMS

Common PBJ Submission Errors

1. Incomplete Data:

- Required data is not submitted for mandatory staff.
- Agency Data is not submitted.

2. Inaccurate Data:

- Facilities fail to separate and report staff time spent performing their primary role from time spent completing tasks under a different job description category.
- Facilities report staff time spent in training and not available to provide direct care services for residents.
- Facilities fail to deduct mandatory meal periods.
- Hours are reported for staff that direct bill Medicare, Medicaid, or Private Insurance.
- Hours are reported that were not completed onsite at the facility.
- Inaccurate census due to required MDS tasks not being completed in a timely manner.

Facility Census Data

- CMS recommends that facilities run their CMS Census reports and check for inaccuracy prior to every submission deadline.
- Run the "3.0 MDS Roster" (under MDS 3.0 Provider Reports Header) and the iQIES "Daily MDSCensus Report." Review and compare to assess if residents are present on the listing who are no longer in house.
- For those residents who are no longer in house, ensure the Entry and Discharge MDS assessments match on MDS: Full Name, Birth date, Gender and social security number AND have been accepted into the state database. If there are discrepancies reach out to your MDS consultant or State RAI automation coordinator at: MDSHelpdesk@dshs.wa.gov.
- Ensure the CASPER MDS missing assessment report is clear.

Employee & PBJ System ID #s

- Facilities must ensure each staff for whom PBJ data is being submitted has both an employee and PBJ System ID #.
- The ID #s must be unique identifiers and not duplicated with any current or previous staff.
- If a change in vendors occurs, the facility must do everything possible to retain the same employee ID #s. If this is not possible, facilities must link the old employee ID with the new one, using the linking table.
- The process for creating and submitting the employee ID linking file is the same as all other XML submissions.
 - The technical submission XML file template and instructions to create linked IDs is located here: <https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/NursingHomeQualityInits/Downloads/PBJ-Admin-Excel-to-XML-Template-V-1-00-0.zip>

Complete & Accurate PBJ Data

PBJ data must accurately and completely reflect the facility's staffing records.

Reporting must be based on each staff's primary role and their official categorical title.

All nursing hours must be worked onsite to be reported to PBJ. This includes hours for nursing positions with administrative duties. All nursing staff must be available to provide direct care to residents, if required.

Accurate PBJ data must be submitted for all mandatory positions, to include the labor code, job code, and description for each employee and agency staff.

- Required Labor Codes, Job Codes, and Descriptions are located within Table 1 on pages 2-10 through 2-14 of the [PBJ Policy Manual](#).

Accurate PBJ Time Entry

Time entered into the PBJ system is calculated in fractions, not as direct hours and minutes. Submitters must round to the nearest 10th when converting minutes to fractions. When entering a staff's hours, the following conversions must be used:

- 01 to 06 Minutes = 0.1
- 07 to 12 Minutes = 0.2
- 13 to 18 Minutes = 0.3
- 19 to 24 Minutes = 0.4
- 25 to 30 Minutes = 0.5
- 31 to 36 Minutes = 0.6
- 37 to 42 Minutes = 0.7
- 43 to 48 Minutes = 0.8
- 49 to 54 Minutes = 0.9
- 55 to 60 Minutes = 1.0

Facilities may choose to round to the nearest 100th when entering hours. The actual minutes worked shall not be reported.

- Example: If an employee works 7 hours and 33 minutes, 7.33 must not be reported. The correct time to report would be 7.6 hours or 7.55 hours.



PBJ Midnight Cut-Off

PBJ hours must be reported by the calendar day.

Midnight is the cutoff for each day reported.

Example:

An RN works a shift that begins at 11:00pm on 4/5/25 and ends at 7:00am on 4/6/25.

- 1 hour is reported for DOS 4/5/25,
- 6.5 hours are reported for DOS 4/6/25,
- 6.5 rather than 7 hours are reported for DOS 4/6/25 due to the mandatory meal period deduction.



Mandatory Meal Period Deductions

Mandatory meal periods must not be reported with PBJ data.

A minimum 30-minute meal period must be deducted for every 8 hours worked. There are no exceptions to this requirement.

If a staff meal period exceeds 30 minutes, the entire meal period must be deducted.

The mandatory meal period deduction applies regardless of the following:

- The meal period is paid or unpaid,
- The staff member doesn't take a meal break.

Reporting Staff Hours

CMS recognizes that staff may completely shift primary roles during day.

- Example 1: An RN works the first four hours of an 8-hour shift as the unit manager, and the last four hours of the shift as a floor nurse.
 - In this situation, the facility reports four hours as an RN with administrative duties, and four hours as an RN (without administrative duties).
- Example 2: An NAC works the first four hours of an 8-hour shift providing direct care nursing tasks for residents and the last four hours of the shift performing housekeeping tasks.
 - In this situation, the facility reports four hours as NAC and four hours as housekeeping.

Staff in training: Hours for staff who are attending training (onsite or offsite) and not available to provide resident care, must not be reported.



Please Note:

Every hour submitted must be auditable against either facility payroll or agency invoice documents.

Prior to Submission Deadline – Confirm the Data Received by CMS

Once the final data file is uploaded, the facility should check their Final File Validation Report, which can be accessed in their CASPER folder, to verify that the data was successfully submitted. It may take up to 24 hours to receive the validation report, so facilities must allow for time to correct any errors and resubmit, if necessary.

- CASPER PBJ On Demand Final File Validation Report;
- CASPER PBJ Submitter Final File Validation Report; and
- iQIES PBJ Census Report.

The PBJ system will not accept any submissions after deadline.

CMS will conduct audits to assess a facility's compliance related to this requirement.

Reminder:

PBJ & census data cannot be corrected
after submission deadline.

Enhanced Facility-Wide Assessment

CMS requires that every NH have staff on duty twenty-four hours daily, sufficient in number and qualifications to carry out the policies, responsibilities, and programs of the facility.

Ongoing facility-wide assessment must be completed to determine if staffing in excess of federal and state minimum staffing standards is required to meet resident acuity and care needs.

- [DPL NH #2024-039](#) – Enhanced Facility Wide Assessment,
- [eCFR :: 42 CFR 483.71 -- Facility assessment](#),
- [QSO-24-13-NH](#),
- [F-TagHelp F838](#).

Ensure Accurate Reimbursement (Question 1)

If the ongoing facility-wide assessment demonstrates the need for direct care nursing staff, in excess of minimum direct care nursing thresholds, the facility must consistently maintain the higher level of staffing.

- TRUE
- FALSE

Ensure Accurate Reimbursement (Answer 1)

The answer is **TRUE**.

If the ongoing facility-wide assessment demonstrates the need for direct care nursing staff, in excess of minimum direct care nursing thresholds, the facility must consistently maintain the higher level of staffing.

Evaluation of PBJ Data During Survey

Updated Regulatory Requirements

Updated Regulatory Guidance for Evaluation of PBJ Data During Survey

On 7/23/25 CMS published updated versions of the following reference materials:

- [QSO-25-14-NH](#) - Revised Long-Term Care (LTC) Surveyor Guidance: Significant revisions to enhance quality and oversight of the LTC survey process,
- [SOM Appendix PP](#),
- [Sufficient and Competent Nurse Staffing Review](#) – Critical Element Pathway.

Updated requirements for evaluation of PBJ data during recertification surveys (or as applicable, abbreviated surveys) are included in these updates.

F-Tag F851 - Key Elements of Noncompliance

If the surveyor's investigation shows that the facility failed to do one or more of the following, a citation at [F851](#) is required:

- Submit the required staffing information - based on payroll data - in a uniform format; or
- Submit complete data for the entire reporting period, such as hours paid for all required staff, each day; or
- Submit accurate data; or
- Submit data by the required deadline.

If the facility failed to submit the required PBJ Staffing Data, F851 must be cited as a Severity and Scope of "F".

Additional F-Tags

Noncompliance at F851 focuses on the submission of staffing data.

If potential concerns related to any of the following are identified:

- Registered nurse (RN) coverage eight hours a day ([F727](#))
- Licensed nurse (LN) coverage 24-hour a day ([F725](#))
- Sufficient staffing ([F725](#))

The survey team investigates using:

- [Sufficient and Competent Nurse Staffing Review](#) - Critical Element Pathway
- [42 CFR 483.35](#) Nursing Services
- [SOM Appendix PP](#)

Potentially Incongruent/Invalid PBJ Data

If potentially incongruent or invalid data is identified during the evaluation of PBJ data, an email will be sent to NHStaffing@cms.hhs.gov outlining the concern.

CMS contracted auditors will complete a data audit.

Evaluation of PBJ Data During Survey – Question 1

A citation at F851 is required if:

(Select all that apply.)

- A) The facility fails to submit required staffing information – based on payroll data - in a uniform format.
- B) The facility fails to submit complete data for the entire reporting period, such as hours paid for all required staff, each day.
- C) The facility fails to submit data for housekeeping and dietary staff.
- D) The facility fails to submit accurate data.
- E) The facility fails to submit data by the required submission deadline.

Evaluation of PBJ Data During Survey – Answer 1

A citation at F851 is required if any of the following are true:

- A) The facility fails to submit required staffing information – based on payroll data - in a uniform format.
- B) The facility fails to submit complete data for the entire reporting period, such as hours paid for all required staff, each day.
- C) D) The facility fails to submit accurate data.
- E) The facility fails to submit data by the required submission deadline.

CASPER & iQIES Reports

Access and Use

QIES (CASPER)

- Log in to QIES at: [QIES National System Login - CASPER Reporting \(qiesnet.org\)](https://qiesnet.org).
- If you don't yet have a QIES account, you'll need to create one:
 - [Create a HARP Account](#),
 - [HARP Login](#),
 - [QIES User Maintenance Application User's Guide](#),
- If you're unable to access the above link, and don't know how to add a staff member to your facility account, review instructions available at [Important PBJ Action Items 02-24-2022](#).
- [CASPER Reference & Manuals | QIES Technical Support Office](#)

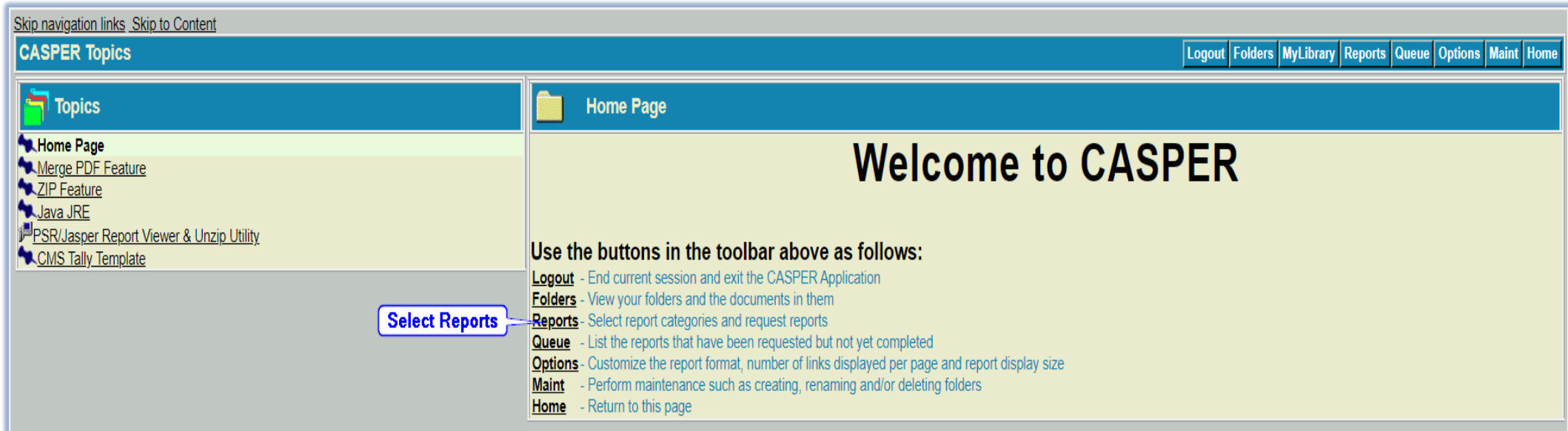
Prior to Deadline - Ensure Successful Submission of PBJ Data

After you upload facility PBJ data to CMS:

1. Check the "My Submissions" page to review the status of the zip file.
2. Check CASPER for a system generated "PBJ Final File Validation Report" within 24 hours of submission. If no FFVR appears, run a "PBJ Submitter Final File Validation Report" to check your file for errors.
3. Run the "PBJ 1702D" (by Employer) report to verify that the PBJ data received by CMS is a complete and accurate representation of the facility's direct care staffing data for the quarter under review.
4. For additional assistance, contact the QIES Help desk at iqies@cms.hhs.gov.

Welcome to QIES/CASPER

Use this link to log into CASPER- [QIES National System Login - CASPER Reporting \(qiesnet.org\)](http://qiesnet.org).



Skip navigation links [Skip to Content](#)

CASPER Topics Logout Folders MyLibrary Reports Queue Options Maint Home

Topics

- Home Page
- Merge PDF Feature
- ZIP Feature
- Java JRE
- PSR/Jasper Report Viewer & Unzip Utility
- CMS Tally Template

Home Page

Welcome to CASPER

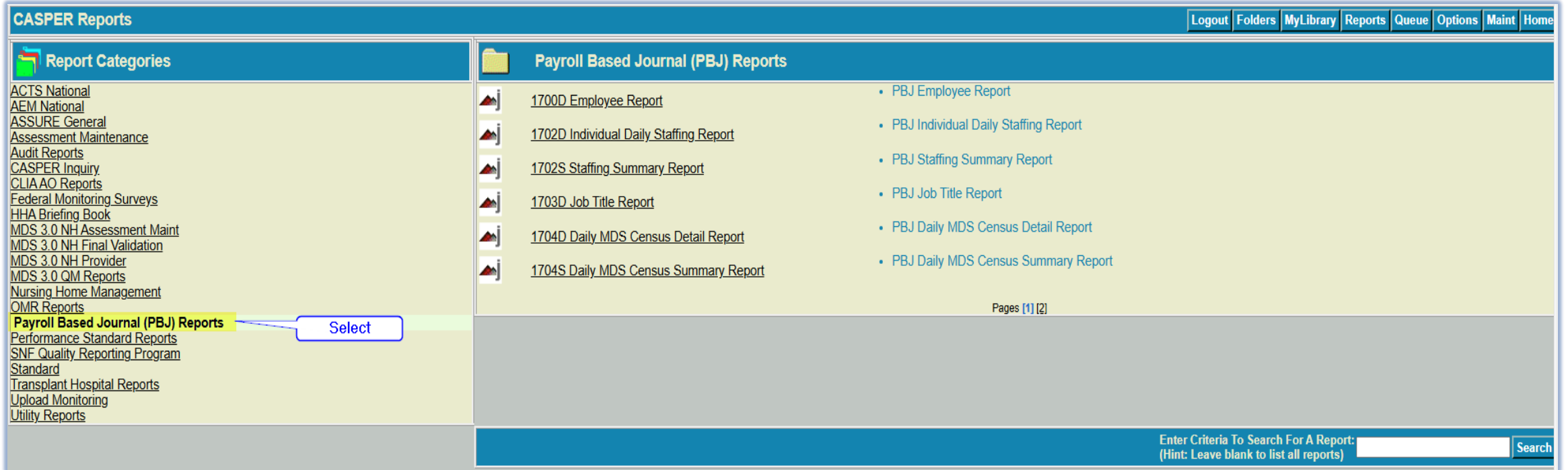
Use the buttons in the toolbar above as follows:

- Logout** - End current session and exit the CASPER Application
- Folders** - View your folders and the documents in them
- Reports** - Select report categories and request reports
- Queue** - List the reports that have been requested but not yet completed
- Options** - Customize the report format, number of links displayed per page and report display size
- Maint** - Perform maintenance such as creating, renaming and/or deleting folders
- Home** - Return to this page

Select Reports

Select "Reports"

CASPER Reports Screen



The screenshot shows the CASPER Reports interface. At the top right, there are navigation links: Logout, Folders, MyLibrary, Reports, Queue, Options, Maint, and Home. The main content area is divided into two columns. The left column, titled "Report Categories", lists various report types. The "Payroll Based Journal (PBJ) Reports" category is highlighted in yellow, and a blue callout box with the word "Select" points to it. The right column, titled "Payroll Based Journal (PBJ) Reports", displays a list of specific reports with folder icons to the left and bullet points to the right. At the bottom right of the main content area, there is a search bar with the text "Enter Criteria To Search For A Report: (Hint: Leave blank to list all reports)" and a "Search" button. Below the main content area, there is a dark blue box with white text that reads "Select 'Payroll Based Journal (PBJ) Reports'".

Report Category	Report Name	Report Description
ACTS National		
AEM National		
ASSURE General		
Assessment Maintenance		
Audit Reports		
CASPER Inquiry		
CLIAAO Reports		
Federal Monitoring Surveys		
HHA Briefing Book		
MDS 3.0 NH Assessment Maint		
MDS 3.0 NH Final Validation		
MDS 3.0 NH Provider		
MDS 3.0 QM Reports		
Nursing Home Management		
OMR Reports		
Payroll Based Journal (PBJ) Reports		
Performance Standard Reports		
SNF Quality Reporting Program Standard		
Transplant Hospital Reports		
Upload Monitoring		
Utility Reports		

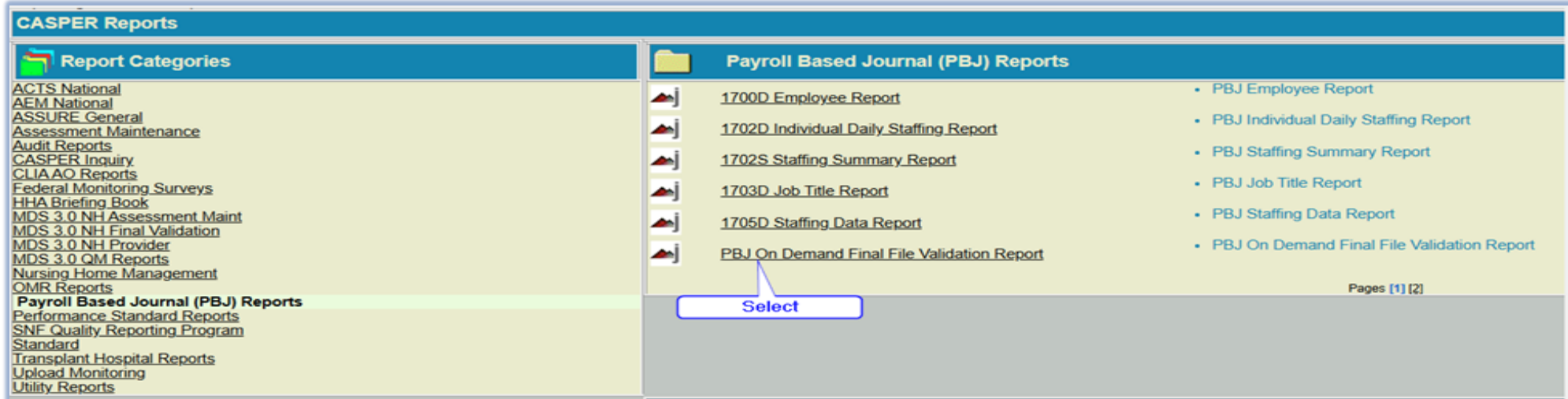
Report Name	Report Description
1700D Employee Report	• PBJ Employee Report
1702D Individual Daily Staffing Report	• PBJ Individual Daily Staffing Report
1702S Staffing Summary Report	• PBJ Staffing Summary Report
1703D Job Title Report	• PBJ Job Title Report
1704D Daily MDS Census Detail Report	• PBJ Daily MDS Census Detail Report
1704S Daily MDS Census Summary Report	• PBJ Daily MDS Census Summary Report

Pages [1] [2]

Enter Criteria To Search For A Report: (Hint: Leave blank to list all reports)

Select "Payroll Based Journal (PBJ) Reports"

PBJ On Demand Final File Validation Report



CASPER Reports

Report Categories

- ACTS National
- AEM National
- ASSURE General
- Assessment Maintenance
- Audit Reports
- CASPER Inquiry
- CLIA/AO Reports
- Federal Monitoring Surveys
- HHA Briefing Book
- MDS 3.0 NH Assessment Maint
- MDS 3.0 NH Final Validation
- MDS 3.0 NH Provider
- MDS 3.0 QM Provider
- Nursing Home Management
- OMR Reports
- Payroll Based Journal (PBJ) Reports**
- Performance Standard Reports
- SNF Quality Reporting Program Standard
- Transplant Hospital Reports
- Upload Monitoring
- Utility Reports

Payroll Based Journal (PBJ) Reports

- 1700D Employee Report
- 1702D Individual Daily Staffing Report
- 1702S Staffing Summary Report
- 1703D Job Title Report
- 1705D Staffing Data Report
- PBJ On Demand Final File Validation Report**

- PBJ Employee Report
- PBJ Individual Daily Staffing Report
- PBJ Staffing Summary Report
- PBJ Job Title Report
- PBJ Staffing Data Report
- PBJ On Demand Final File Validation Report

Pages [1] [2]

Select

To select the “PBJ On Demand Final File Validation Report”, click on the link that’s identified on this slide.

Set the Parameters for the PBJ On Demand Final Validation Report

CASPER Reports Submit Logout Folders MyLibrary Reports Queue Options Maint Home

Report: PBJ On Demand Final File Validation Report

Facility ID: Find By Name Add Facility ID

1

Remove Facility ID

Submission Dates

* from (mm/dd/yyyy): 2

* thru (mm/dd/yyyy): 3

* The submission date range selected cannot span more than 150 days and thru date must be at least 60 days prior to today's date.
Validation Reports for files submitted within the last 60 days can be found in the CASPER Reports folder for your facility.

Template Folder: 4

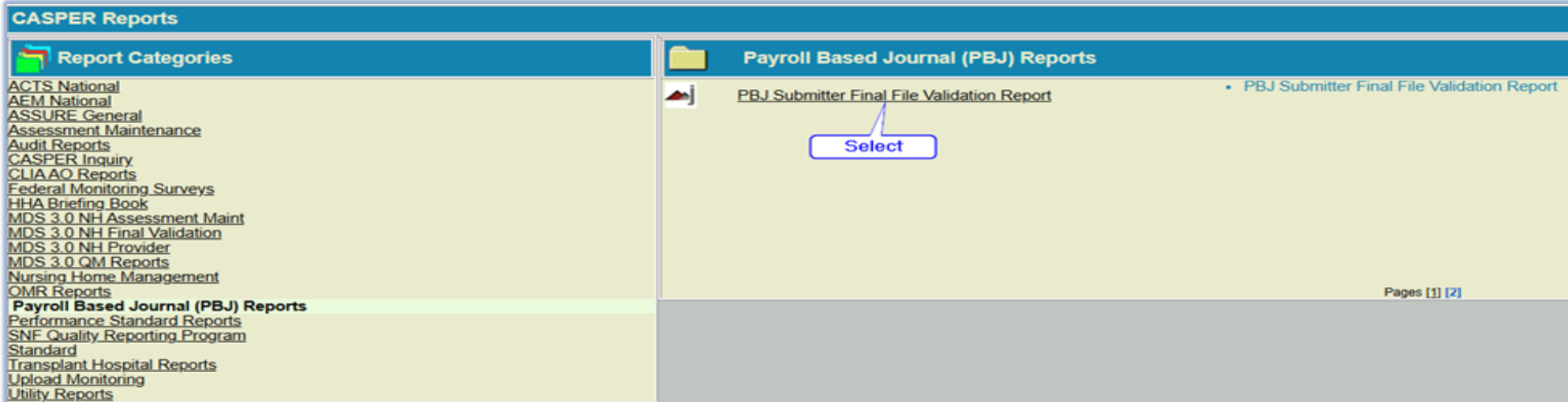
Template Name:

Submit Back

Save & Submit Save

1. Search by facility name or ID #.
2. Add the 1st day of the quarter under review.
3. Add the last day of the quarter under review.
4. Submit

PBJ Submitter Final File Validation Report



CASPER Reports

Report Categories

- ACTS National
- AEM National
- ASSURE General
- Assessment Maintenance
- Audit Reports
- CASPER Inquiry
- CLIAAQ Reports
- Federal Monitoring Surveys
- HHA Briefing Book
- MDS 3.0 NH Assessment Maint
- MDS 3.0 NH Final Validation
- MDS 3.0 NH Provider
- MDS 3.0 QM Reports
- Nursing Home Management
- OMR Reports
- Payroll Based Journal (PBJ) Reports**
- Performance Standard Reports
- SNF Quality Reporting Program
- Standard
- Transplant Hospital Reports
- Upload Monitoring
- Utility Reports

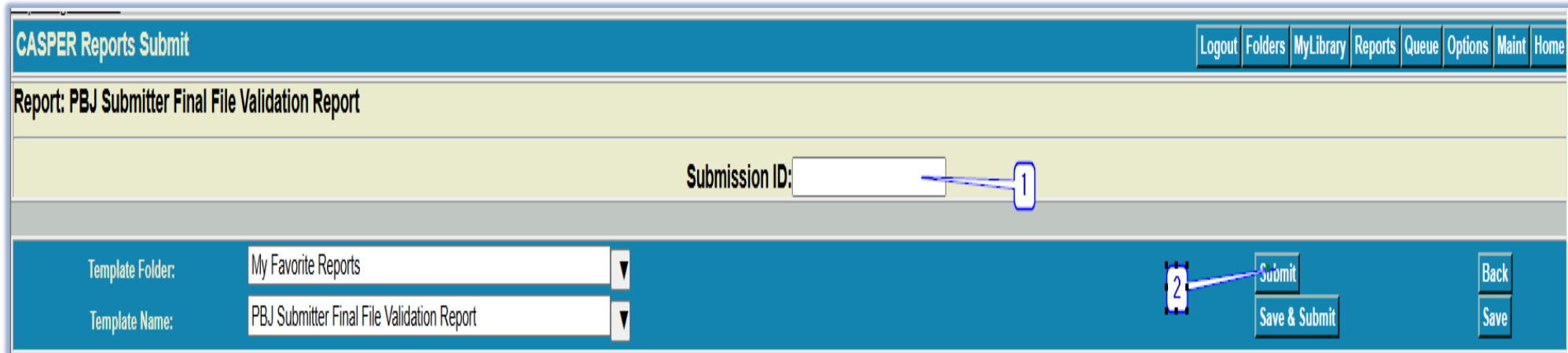
Payroll Based Journal (PBJ) Reports

- [PBJ Submitter Final File Validation Report](#) • PBJ Submitter Final File Validation Report

Pages [1] [2]

To select the “PBJ Submitter Final File Validation Report”, click on the link that’s identified on this slide.

Set the Parameters for the PBJ Submitter Final File Validation Report



CASPER Reports Submit Logout Folders MyLibrary Reports Queue Options Maint Home

Report: PBJ Submitter Final File Validation Report

Submission ID:

Template Folder: My Favorite Reports







Template Name: PBJ Submitter Final File Validation Report

1. Add the submission ID #.
2. Submit.

CASPER 1702D Individual Daily Staffing Report

Skip navigation links [Skip to Content](#)

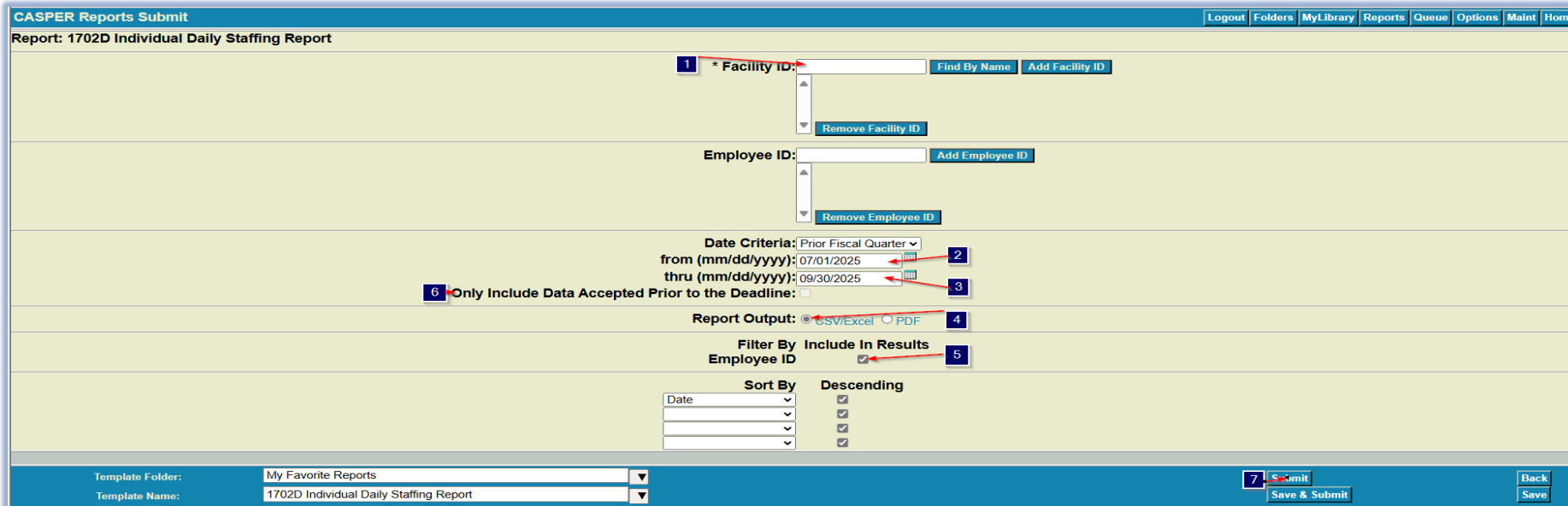
CASPER Reports [Logout](#) [Folders](#) [MyLibrary](#) [Reports](#) [Queue](#) [Options](#) [Maint](#) [Home](#)

Report Categories	Payroll Based Journal (PBJ) Reports
ACTS National	 1700D Employee Report <ul style="list-style-type: none">• PBJ Employee Report
AEM National	 1702D Individual Daily Staffing Report <ul style="list-style-type: none">• PBJ Individual Daily Staffing Report
ASSURE General	 1702S Staffing Summary Report <ul style="list-style-type: none">• PBJ Staffing Summary Report
Assessment Maintenance	 1703D Job Title Report <ul style="list-style-type: none">• PBJ Job Title Report
Audit Reports	 1704D Daily MDS Census Detail Report <ul style="list-style-type: none">• PBJ Daily MDS Census Detail Report
CASPER Inquiry	 1704S Daily MDS Census Summary Report <ul style="list-style-type: none">• PBJ Daily MDS Census Summary Report
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HHA Briefing Book	
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MDS 3.0 QM Reports	
Nursing Home Management	
OMR Reports	
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Performance Standard Reports	
SNF Quality Reporting Program Standard	
Transplant Hospital Reports	
Upload Monitoring	
Utility Reports	

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Select "1702D Individual Daily Staffing Report"

Create Report Parameters



CASPER Reports Submit

Report: 1702D Individual Daily Staffing Report

1 * Facility ID: Find By Name Add Facility ID

Remove Facility ID

Employee ID: Add Employee ID

Remove Employee ID

Date Criteria: Prior Fiscal Quarter

from (mm/dd/yyyy): 07/01/2025 2

thru (mm/dd/yyyy): 09/30/2025 3

6 Only Include Data Accepted Prior to the Deadline:

Report Output: CSV/Excel PDF 4

Filter By Include In Results 5

Employee ID

Sort By Descending

Date

Template Folder: My Favorite Reports

Template Name: 1702D Individual Daily Staffing Report

7 Submit Save & Submit Back Save

1. Search by facility name or ID #.
2. Add the 1st day of the quarter under review.
3. Add the last day of the quarter under review.
4. Check the box labeled "CSV/Excel".
5. Ensure box labeled "Include in Results – Employee ID" is checked.
6. To obtain "Only include Data Accepted Prior to the Deadline", click on the box with that name in the middle of the screen.
7. Submit

View Your CASPER Reports

Select "Folders" on the CASPER reports submit screen.

Skip navigation links

CASPER Reports Submit [Logout](#) [Folders](#) [MyLibrary](#) [Reports](#) [Queue](#) [Options](#) [Maint](#) [Home](#)

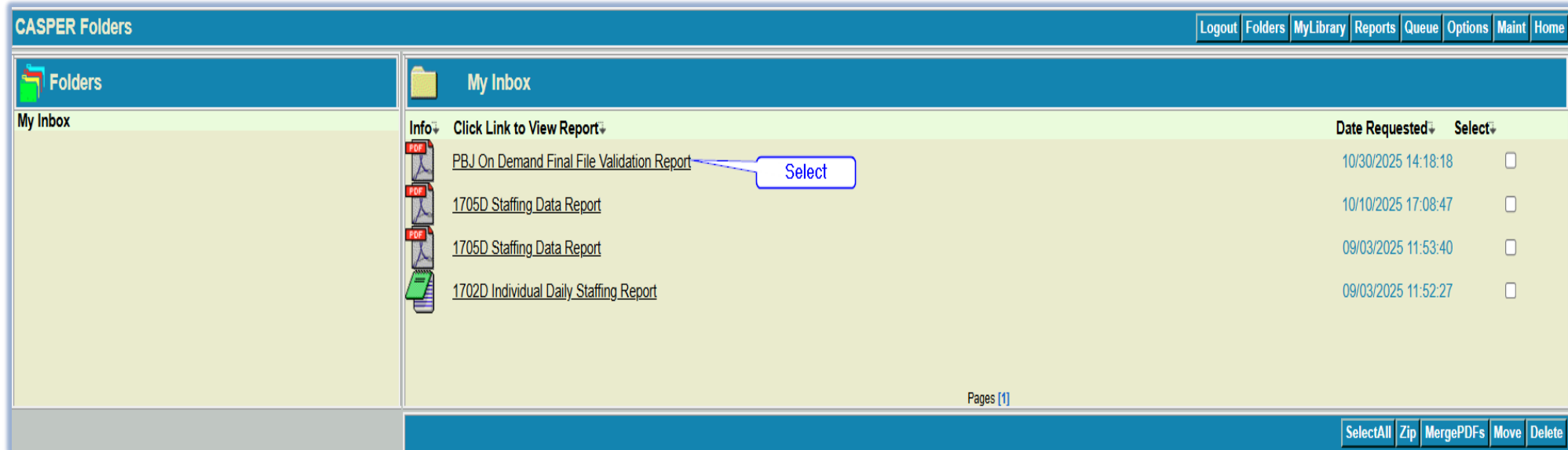
Queueing Report QID:113543332 Name:1702D Individual Daily Staffing Report for user JLAMOREAUX
Completed reports will appear in your inbox on the Folders page.

[Back](#) [Folders](#) [Reports](#)

SELECT "FOLDERS"

View the CASPER Report (Continued)

Select the report you want to open by clicking on it as shown below.







CASPER Folders Logout Folders MyLibrary Reports Queue Options Maint Home

Folders

My Inbox

My Inbox

Info	Click Link to View Report	Date Requested	Select
	PBJ On Demand Final File Validation Report	10/30/2025 14:18:18	<input type="checkbox"/>
	1705D Staffing Data Report	10/10/2025 17:08:47	<input type="checkbox"/>
	1705D Staffing Data Report	09/03/2025 11:53:40	<input type="checkbox"/>
	1702D Individual Daily Staffing Report	09/03/2025 11:52:27	<input type="checkbox"/>

Pages [1]

SelectAll Zip MergePDFs Move Delete

Access iQIES

If you don't have access to iQIES, instructions are provided at: [iQIES Account Set-Up](#)

Log into iQIES at: [iQIES Portal - iQIES Portal – Login](#)

[iQIES Help](#) provides “Getting Started” Materials to include:

- A Welcome letter that introduces HARP, iQIES, and how to get started in both.
- A manage user info & quick start checklist that describes how to update and manage your information in iQIES and HARP.
- The User Role Matrix that shows all available iQIES roles and their permissions in the system.
- A video catalog that details all available iQIES training videos.

iQIES Resources

- [CCSQ Support Central](#) – Contact the service center, track existing tickets, HARP password help.
- [iQIES Video Catalog](#) – Library of video tutorials for iQIES users.
- [iQIES Reference & Manuals](#)
- [iQIES Reports User Manual](#)

iQIES Reports - Uses

- Assure CMS received all PBJ & MDS data submissions using **Validation Reports.**
- Increase the efficiency and efficacy of care planning using **Quality Assurance and Performance Improvement (QAPI) Reports.**
- Predict staffing needs and reduce turnover using **Activity Reports.**
- Provide market share using **Care Compare** and **Quality Measure reports.**

Payroll Based Journal Reports

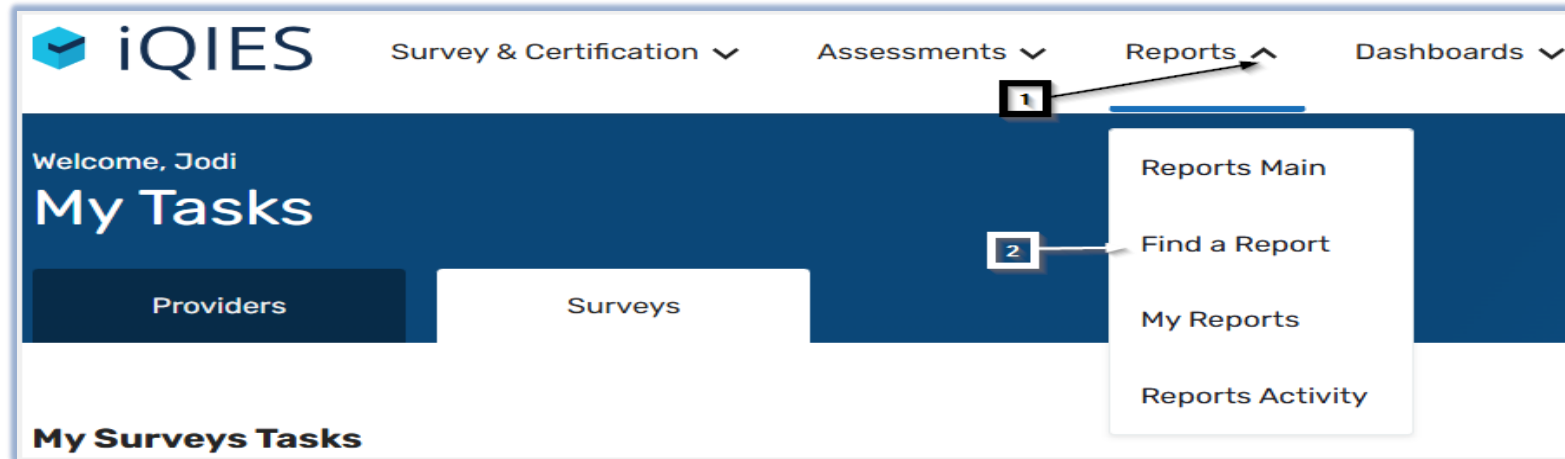


https://qtso.cms.gov/system/files/qtso/PBJ_Provider_User_Guide_4.0_0.1.pdf

The Direct Care Nursing (DCN) HPRD Threshold is calculated by dividing the total # of eligible hrs worked by direct care nursing staff by the facility's total census days for the quarter under review.

Ensure discharge assessments are completed in a timely manner to ensure the facility census is accurate or the DCN HPRD threshold will be inaccurate.

Find an iQIES Report



Log into iQIES

1. Click on "Reports"

2. Select "Find a Report"

Obtain the
iQIES PBJ
Census
Report

Find a Report

Search by report keyword, or category and type.

Report Keyword

Report Category

Payroll-Based Journal (PBJ) ▼

Report Type

Census

Find Report

Reset

1. "Report Category" - Select "Payroll -Based Journal (PBJ)"
2. "Report Type" - Select "Census"
3. Click on "Find Report"

Obtain an iQIES Report

Providers

Search for providers and "Add" providers for each report run.

State * Washington × Select... × ▾

Provider Keyword 1 2 [Search](#)

Enter at least 4 characters to search by Provider Name, CCN, or Facility ID.

Add Providers (up to 5)

1 Provider 0 Providers Added

Provider Name ▾	CCN ▾	Address ▾	City ▾	State ▾	ZIP Code ▾	Actions 3
BRIDGES TO HOME	100000	10000 (BLAZE) WASH DC	WASHINGTON	Washington	98101	Add

1. "Provider Keyword" – Search by provider name, CCN, or facility ID
2. Click on "Search"
3. Find your facility on the list and Click "Add"

Obtain an iQIES Report 2

1. Add begin and end dates for the timeframe under review.

2. Click "Run Report" box.

Dates

Date Range
Prior Fiscal Quarter

Begin Date *

This field is required

End Date *

This field is required

Include Details
Selecting this box will produce the full detailed report for each date within the date specified above.

Schedule Report Run ⓘ

iQIES PBJ Census Report

To obtain the total census days for the quarter under review, highlight all the numbers in column titled "Census" and sum.

State	Facility ID	Facility Name	City	Date	Census
WA	WA [REDACTED]	[REDACTED]	[REDACTED]	12/18/2023	28
WA	WA [REDACTED]	[REDACTED]	[REDACTED]	12/19/2023	29
WA	WA [REDACTED]	[REDACTED]	[REDACTED]	12/20/2023	30
WA	WA [REDACTED]	[REDACTED]	[REDACTED]	12/21/2023	31
WA	WA [REDACTED]	[REDACTED]	[REDACTED]	12/22/2023	32
WA	WA [REDACTED]	[REDACTED]	[REDACTED]	12/23/2023	32
WA	WA [REDACTED]	[REDACTED]	[REDACTED]	12/24/2023	31
WA	WA [REDACTED]	[REDACTED]	[REDACTED]	12/25/2023	31
WA	WA [REDACTED]	[REDACTED]	[REDACTED]	12/26/2023	30
WA	WA [REDACTED]	[REDACTED]	[REDACTED]	12/27/2023	30
WA	WA [REDACTED]	[REDACTED]	[REDACTED]	12/28/2023	30
WA	WA [REDACTED]	[REDACTED]	[REDACTED]	12/29/2023	30
WA	WA [REDACTED]	[REDACTED]	[REDACTED]	12/30/2023	30
WA	WA [REDACTED]	[REDACTED]	[REDACTED]	12/31/2023	30
					2617

Find & View iQIES MDS Reports

[Find Report](#)[View My Reports](#)

Frequently Run Reports

Report	Category	Last Run Date	Actions
MDS 3.0 NH Final Validation Report	Provider	09/08/2023 4:00 PM	Run Report
MDS 3.0 Missing OBRA Assessment Report	Provider	09/06/2023 2:07 PM	Run Report
MDS 3.0 Roster Report	Provider	09/18/2023 2:32 PM	Run Report
MDS 3.0 Facility-Level Quality Measure (QM) Report	Quality Measure	08/28/2023 1:06 PM	Run Report
MDS 3.0 Activity Report	Provider	09/19/2023 10:25 AM	Run Report

Check Your Knowledge – CASPER & iQIES Reports (Question 1)

Which of the following reports is accessed using iQIES?

- (A) The Individual Daily Staffing Report
- (B) The PBJ Census Report
- (C) The Staffing Summary Report
- (D) The Staffing Data Report

Check Your Knowledge - CASPER & iQIES Reports (Answer 1)

The answer is (B) – The PBJ Census Report is accessed using iQIES.

WA State Minimum Direct Care Nursing (MDCN) 3.4 HPRD Threshold

State Regulations, Policies, & Procedures

Rules and Reminders

These rules inform the WA State minimum direct care nursing (MDCN) 3.4 HPRD threshold:

- [RCW 74.42.360](#) - Adequate staff – Minimum staffing standards – Exceptions – Definition
- [WAC 388-97-1090](#) - Direct care hours

REMINDER: The current WA State 3.4 direct care nursing HPRD threshold is the minimum required level of required nurse staffing.

CMS and WA State require that every LTC facility have staff on duty twenty-four hours daily that are sufficient in number and qualifications to carry out the policies, responsibilities, and programs of the facility.

The enhanced facility-wide assessment must be completed, in compliance with [42 CFR 483.71](#), to determine if staffing in excess of federal and state minimum staffing standards is required to meet resident acuity and care needs.

More State Resources

[DPL NH #2018-013](#)

[DPL NH #2019-005](#)

[DPL NH #2019-005](#)

[DPL NH # 2023-036](#)

[DPL NH #2024-034](#)

[Dear Provider Letter NH #2024-038](#)

[DPL NH #2024-039](#)

[DPL NH #2025-015](#)

WA State 3.4 HPRD Calculation

Direct care hours completed by the following nursing positions are included in the WA State minimum direct care nursing 3.4 HPRD threshold calculation:

- RNs & RNs with administrative duties
- Director of Nursing (DON) - in facilities with 60 or fewer LTC beds
- LPNs & LPNs with administrative duties
- NACs & Certified Medication Aides
- Nurse Aides in Training (*Only hours spent providing direct care for residents can be reported. Hours spent in training – onsite or offsite – cannot be reported.*)

Geriatric Behavioral Health Worker (GBHW)

- Facilities that don't meet the state minimum direct care nursing 3.4 HPRD threshold may potentially have a **portion** of eligible GBHW hours, completed by eligible GBHW staff, added to the HPRD threshold calculation.
- GBHW qualifications, supervision, training requirements, and procedures for submission of eligible GBHW hours are very specific.

Geriatric Behavioral Health Worker (GBHW) 2

- Statewide inaccuracies in reporting GBHW hours have been identified. As a result, the policy unit is tasked with validating the eligible portion of GBHW hours, submitted by deadline, for inclusion in the state HPRD calculation.
- [Dear Provider Letter NH #2024-038](#) – Updated: GBHW hour validation process ongoing.
- Eligible GBHW hours must be submitted to rcspolicy@dshs.wa.gov prior to deadline.

GBHW Rule

The following Rules provide regulatory guidance for GBHW eligibility, qualifications, specialized training, and supervision:

- [RCW 74.42.010\(4\)](#) – Definitions,
- [RCW 74.42.360\(1\)\(c\)](#) – Adequate staff – Minimum staffing standards – Exceptions – Definition,
- [RCW 74.39A.078](#) – Rules for the approval of curricula for facility-based caregivers serving people with behavioral health needs and geriatric behavioral health workers – Curricula requirements,
- [WAC 388-97-1090](#) – Direct care hours,
- [Chapter 388-112B WAC](#) – Behavioral Health Workers – Facility Based Workers – Geriatric Behavioral Health Worker Training and Curriculum Requirements.



GBHW Data Submission Deadlines

State Quarter:	Timeframe:	Deadline for submission of direct care nursing & GBHW data for quarter:
1	Jan. 1 - March 31	May 30th
2	April 1 – June 30	August 29th
3	July 1 – Sept 30	November 29th
4	Oct 1 – Dec 31	March 1st

Facility requests for validation of eligible GBHW hours, completed by eligible GBHW staff, and all required documents, must be received by the RCS Policy Unit no later than the deadline identified above.

Requests that are received after the above deadlines cannot be accepted.

State Owned LTC Facilities

- LTC facilities that are owned and operated by the State of WA are required to submit complete and accurate PBJ data to CMS by deadline.
- The PBJ data submitted by these facilities is not reported to the state, state surveyors do not evaluate the data, and when necessary, CMS completes data audit.
- If necessary, PBJ data submitted by these facilities can be reviewed using CASPER reports.
- These facilities are required to comply with the WA State MDCN 3.4 HPRD threshold or staffing requirements identified in the facility-wide assessment – whichever is higher.
- As of October 2025, the following facilities are owned and operated by WA State:
 - Lakeland Village Nursing Facility,
 - Fircrest Nursing Facility,
 - Yakima Valley School.

State-Only Licensed LTC Facilities

- Facilities that are licensed by the state, but not CMS enrolled/certified, are not required to submit PBJ data to CMS.
- These facilities are required to comply with the WA State minimum direct care nursing (MDCN) 3.4 HPRD threshold.
- WA State minimum direct care nursing HPRD data must be submitted to MSD/Rates @ Melissa.Ayala@dshs.wa.gov, by deadline.
- Franke Tobey Jones and Sunrise Haven are the only state-only licensed facilities in WA State.

0 Data Facilities

0 data facilities include:

- Facilities that failed to submit PBJ data to CMS by deadline; or
- Facilities for whom CMS suppresses PBJ data for one of the following reasons:
 - CMS has identified the facility as a special focus facility (FSS); or
 - The facility is newly enrolled/certified by CMS; or
 - CMS is concerned about the validity of the PBJ data submitted.

In the case of 0 data facilities, RCS must establish the WA State MDCN HPRD threshold.

The RCS policy unit completes this task. Please submit requests to rcspolicy@dshs.wa.gov.

Facilities That Submit Incomplete and/or Inaccurate PBJ Data to CMS

- PBJ data cannot be modified after submission deadline.
- If a facility submits incomplete and/or inaccurate data to CMS, a request for assistance with data correction - related only to the WA State MDCN HPRD threshold - can be submitted to the RCS policy unit @ rcspolicy@dshs.wa.gov.
- All requests must include a detailed explanation of the unique circumstances that resulted in the error and the steps taken to resolve related issues.
- The RCS policy unit will contact the facility to provide next step information specific to facility circumstances.



The 3.4 HPRD Staffing Data Spreadsheet

Facilities requesting data correction assistance, because incomplete data was submitted to CMS, will be required to complete a 3.4 HPRD Staffing Data & Coding Spreadsheet.

An example of the spreadsheet and a link to obtain it are provided on the right side of this slide.

3.4 HPRD Staffing Data & Coding Spreadsheet.

1	STAFF NAME	EMPLOYEE ID #	PBL SYSTEM ID #	Qualification: RN, LPN, CNA	Role	NH OR AGENCY STAFF	DATE	# OF HRS NOT PREVIOUSLY SUBMITTED UNDER ANY CATEGORY TO CMS W/OUT MEAL PERIODS	# OF HRS FROM PAYROLL OR AGENCY INVOICE W/OUT MEAL PERIODS	ADDITIONAL INFORMATION
2	EXAMPLE: Jane Smith	xxx	xxxxxxx	LPN	Charge Nurse	Agency	08/04/2023		0	
3										
4										
5										
6										
7										
8										
9										
10										
11										
12										
13										
14										
15										
16										

Click Here 

[3.4 HPRD Staffing Data Spreadsheet](#)



Validating Data Against Payroll or Agency Invoice Documents

To establish the WA State direct care nursing HPRD threshold for the timeframe under review, all direct care nursing hours must be validated against detailed payroll or agency invoice documents.

LTC facilities must submit payroll and agency invoice documents upon request. Each document must contain each staff's full name, date, and hours paid – minus mandatory meal period deductions and in compliance with guidance found in the [PBJ Policy Manual](#).

Staffers		INVOICE		Invoice No.	Invoice Amount		
Customer ID	Invoice Date	Due Date	Payment Terms				
			Net 30				
Customer Name:							
For Services Rendered at:							
Date	Shift Worked	Caregiver	Description	Type	Units	Rate	Amount Due
Employee: [Name]							
12/26/2023	Tue 02:17 PM-10:47 PM	[Name]	CNA - Certified Nursing Assistant	Reg	8.00	40.00	\$320.00
12/27/2023	Wed 02:22 PM-10:52 PM	[Name]	CNA - Certified Nursing Assistant	Reg	8.00	40.00	\$320.00
12/28/2023	Thu 06:20 AM-02:45 PM	[Name]	CNA - Certified Nursing Assistant	Reg	7.92	40.00	\$316.80
12/28/2023	Thu 02:46 PM-10:45 PM	[Name]	CNA - Certified Nursing Assistant	Reg	7.48	40.00	\$299.20
12/29/2023	Fri 06:49 AM-02:34 PM	[Name]	CNA - Certified Nursing Assistant	Reg	7.25	40.00	\$290.00
12/29/2023	Fri 02:34 PM-03:55 PM	[Name]	CNA - Certified Nursing Assistant	Reg	1.35	40.00	\$54.00
12/29/2023	Fri 03:55 PM-10:40 PM	[Name]	CNA - Certified Nursing Assistant	WOT	6.25	60.00	\$375.00
Total This Employee:							\$1,975.00
Employee: [Name]							
12/26/2023	Tue 02:31 PM-10:39 PM	[Name]	CNA - Certified Nursing Assistant	Reg	7.64	40.00	\$305.60
12/27/2023	Wed 02:26 PM-10:48 PM	[Name]	CNA - Certified Nursing Assistant	Reg	7.87	40.00	\$314.80
12/28/2023	Thu 02:36 PM-10:45 PM	[Name]	CNA - Certified Nursing Assistant	Reg	7.65	40.00	\$306.00
12/29/2023	Fri 02:35 PM-10:35 PM	[Name]	CNA - Certified Nursing Assistant	Reg	7.50	40.00	\$300.00
Total This Employee:							\$1,226.40
Employee: [Name]							
12/27/2023	Wed 10:00 AM-10:45 PM	[Name]	CNA - Certified Nursing Assistant	Reg	12.75	40.00	\$510.00
12/28/2023	Thu 06:24 AM-02:40 PM	[Name]	CNA - Certified Nursing Assistant	Reg	8.27	40.00	\$330.80
12/28/2023	Fri 06:30 AM-02:45 PM	[Name]	CNA - Certified Nursing Assistant	Reg	8.25	40.00	\$330.00
12/30/2023	Sat 06:30 AM-02:45 PM	[Name]	CNA - Certified Nursing Assistant	Reg	8.25	40.00	\$330.00
Total This Employee:							\$1,500.80

Timecard		10/1/2023 - 10/31/2023	
Employee:	[Name]	Payroll ID:	[ID]
Company Code:	[Code]	Supervisor:	[Name]
Week 1	In - Out	Pay Code	Hours
Sun 10/01	-		0.00
Mon 10/02	-		0.00
Tue 10/03	-		0.00
Wed 10/04	02:00 PM - 06:00 PM		4.00
Wed 10/04	06:30 PM - 10:30 PM		4.00
Thu 10/05	02:10 PM - 11:37 PM		9.40
Fri 10/06	02:07 PM - 05:23 PM		3.30
Fri 10/06	05:53 PM - 10:15 PM		4.40
Sat 10/07	02:07 PM - 04:45 PM		2.70
Sat 10/07	05:12 PM - 10:30 PM		5.30
Week 1 Totals			
Week 2	In - Out	Pay Code	Hours
Sun 10/08	-		0.00
Mon 10/09	02:02 PM - 05:11 PM		3.20
Mon 10/09	05:35 PM - 10:27 PM		4.90
Tue 10/10	02:11 PM - 05:06 PM		2.90
Tue 10/10	05:28 PM - 10:32 PM		5.00
Wed 10/11	01:56 PM - 06:19 PM		4.40
Wed 10/11	06:53 PM - 10:35 PM		3.70
Thu 10/12	02:20 PM - 06:39 PM		4.40
Thu 10/12	07:05 PM - 11:01 PM		3.90
Fri 10/13	-		0.00
Sat 10/14	-		0.00

WA State MDCN 3.4 HPRD Threshold, Question 1

PBJ data can be modified after submission deadline.

- TRUE
- FALSE

WA State MDCN 3.4 HPRD Threshold, Answer 1

The answer is **False**.

PBJ data cannot be modified after submission deadline.

WA State MDCN 3.4 HPRD Threshold, Question 2

In the case of 0 data facilities, the RCS Policy Unit will assist the facility to establish the WA State MDCN HPRD threshold.

- TRUE
- FALSE

WA State MDCN 3.4 HPRD Threshold, Answer 2

The answer is **True**.

In the case of 0 data facilities, the RCS Policy Unit will assist the facility to establish the WA State MDCN HPRD threshold.

Reminder - Help is Available!

Questions? Need Help?

No Worries!!!!

Submit a [Policy Inbox Ticket](#) and an RCS Policy Program Manager will be happy to walk you through each task and/or process, in real time, using TEAMS.



DSHS

WASHINGTON STATE
Department of Social
and Health Services

thank you

tusind tak
謝謝 dakujem vám
ありがとうございます
ngiyabonga

dziękuję
merci
baie dankie
धन्यवाद molte grazie

suksema
danke
gracias
obrigada
obrigado
teşekkür ederim
شكرا
tack så mycket

takk
gràcies
tānan
dank u
teşekkür edire
mahalo