



# Payroll Based Journal: *Frequently Asked Questions*

# Overview & Impact of PBJ

Payroll-Based Journal (PBJ) is the Centers for Medicare & Medicaid Services (CMS) system that all Medicare and Medicaid certified long-term care facilities are required to use to electronically submit detailed, auditable staffing data on a quarterly basis. PBJ data is used by CMS to assess staffing levels, support survey prioritization, and publicly report staffing information on Nursing Home Compare, making it a critical component of both regulatory oversight and public transparency.



The impact of PBJ is significant for providers. Submitted data directly influences a facility's Five-Star Rating, particularly the staffing domain, and can trigger survey scrutiny when staffing thresholds are not met or data is missing. Because CMS does not allow corrections after submission deadlines, inaccuracies or late submissions can result in downgraded ratings and increased regulatory risk. As a result, PBJ has elevated the importance of strong internal payroll processes, timely data validation, and ongoing monitoring to ensure compliance and avoid unintended consequences tied to publicly reported data.

# SUBMISSION REQUIREMENTS

## Who Must Be Reported

PBJ requires facilities to report hours for all direct care staff who provide resident care, whether employed or contracted. CMS defines direct care staff as **“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.”** Hours reported must reflect actual time worked and paid, not scheduled time.

## Direct Care Staff Include:

- RN, LPN, CNA
- Contract/agency nursing staff
- DON, ADON, other administrative nurse hours when they provide direct care

## What Hours Must Be Reported

Facilities must submit paid hours only, supported by payroll or other auditable source documents.

## Not reportable:

- Meal breaks
- Training or orientation unless providing resident care

## Required Source Documentation

All PBJ data must be tied to verifiable, auditable records.

## Acceptable sources:

- Payroll records
- Timecards or electronic timekeeping
- Contract invoices with detailed hours

## Key expectation:

Documentation must clearly support the hours submitted for each individual staff member.

# SUBMISSION REQUIREMENTS

## Submission Timing & Format

PBJ data must be submitted quarterly either using the XML upload or manual entry through the CMS PBJ portal.

## Requirements:

- Submit by the CMS-published quarterly deadline
- Validate data before upload
- Ensure all job codes match CMS PBJ coding tables
- Maintain documentation for audit readiness

## Verification of Submission

Within 24 hours of submission check for the system generated PBJ Final File Validation Report. Facilities should review this report **PRIOR TO THE DEADLINE** to confirm successful submission or correct any errors for resubmission.

## Reporting Period Deadlines

Fiscal Quarter	Reporting Period	Due Date	NH Care Compare Update
1	October 1 - December 31	February 14	Last Wednesday in April
2	January 1 - March 31	May 15	Last Wednesday in July
3	April 1 - June 30	August 14	Last Wednesday in October
4	July 1 - September 30	November 14	Last Wednesday in January

# STAFFING & HOURS REPORTING

## **Should administrative or non-care staff be included?**

Only staff who provide direct resident care should be included. Administrative, maintenance, and dietary staff are excluded unless they also perform direct care duties.

## **Do the 8 hours of RN coverage that are required per day need to be consecutive?**

The 8 hour RN requirement must be a consecutive 8 hours worked. Facilities may choose to have differing tours of duty (e.g., 8 hour- or 12-hour shifts) for their licensed nursing staff. Regardless of the approach, the facility is responsible for ensuring the 8 hours worked by the RN are consecutive within each 24-hour period. The requirement for 8 consecutive hours of RN services can be met by any RN or multiples of RNs. The hours worked by the DON would be considered applicable towards the requirement.

## **If an exempt DON or Administrator works LESS than 8 hours, but are paid for 8 hours, what do you record?**

Report the actual direct care hours worked by the exempt employee. For example, if they worked 4 hours and took 4 hours of sick time, report 4 hours. If the DON worked 4 hours on Thursday and came in Saturday for 4 hours, the actual hours worked on each day are reported.

## **Does training or working from home count toward PBJ hours?**

- Training time does not count.
- Non-exempt staff working from home without direct care duties hours cannot count.
- Direct care hours must be actual care delivered at the facility to be counted.

## **Reporting telework hours for a medical director?**

Remote hours can be reported if the medical director is attending a meeting or training off-site that is part of their duties as a medical director and they can be reached by phone if needed. In addition, if some of the activities a medical director is contracted for are conducted offsite, it is OK to report those hours, however, the facility should have very clear and detailed information about those activities to support the hours submitted.

## **Can hours for nurse aides in training (classroom) be reported?**

Only hands-on care counts. Classroom hours for nurse aides do not count.

## **Meal breaks:**

For every eight hours of work, providers must deduct a 30-minute meal break. Even if payroll shows a shorter break, PBJ data must show the full 30-minute deduction. Facilities do not need to individually adjust payroll clock-outs; a global 30-minute deduction for each 8-hour shift is acceptable.

# STAFFING & HOURS REPORTING

## **Time spent driving residents to appointments:**

Cannot be reported. Only direct care (e.g., assisting residents to the restroom) can be counted.

## **How should time be rounded for reporting?**

Rounding is to the nearest tenth. Facilities may round to the nearest 100th if they choose. This is explained in the [PBJ manual](#) beginning on Page 2-4.

## **Strike team or state-provided staff:**

Hours may be reported if the facility obtains a statement from the agency with employee names, dates, and hours worked is obtained.

## **How can hours for nurses with provisional licenses be reported in PBJ?**

Only licensed nurses can be reported in PBJ. A graduate nurse's hours are not reportable until they are fully licensed.

## **If a provider has a small subset of nurses and they spend 30 minutes a day doing blood draws, etc. that are billed to Medicare, would the facility need to separate those hours out when reporting to PBJ?**

Yes, they would need to separate out those hours. Hours cannot be reported for any services that are billed to Medicare in PBJ.

## **If a provider can prove that they had a RN on-site for 8 consecutive hours and in PBJ they report 7.5 hours because they must take out 30 minutes for lunch will that adversely impact them when surveyors review RN coverage?**

PBJ is not looking for the 8 hours a day. It simply looks for some RN hours reported every day. Surveyors would look for this, but the facility should be able to show a surveyor that they deducted time for a meal and for services that were not paid for by the facility when submitting hours in PBJ. The facility should not be cited if they can show proof that there was an RN on-site for 8 consecutive hours a day, 7 days a week.

## **If a SNF is co-located with a critical access hospital (CAH), then is the facility able to count hours from the RNs from the CAH?**

Only the hours for the services provided to SNF residents are to be entered in PBJ. If the RNs from the CAH are providing services to the SNF residents, then these hours could be reported.

**If there are facilities that have a waiver for the RN 8 hrs./7 days, are they able to share this information with CMS for consideration in the PBJ submissions?**

The facility would just need to contact CMS and CMS could verify that they do have the RN waiver and add them to an edits list so that they would not be downgraded to a 1 star for staffing as long as they did have an RN on-site for a minimum of 40 hours per week as is required by regulation when an RN waiver is granted.

**Can hours for an administrator in training (AIT) be reported?**

There is no job code for AIT. If you wanted to report these hours, you could report them under the “other” job code.

# EMPLOYEE IDENTIFICATION

**Each staff member must have a unique employee ID:**

Do not utilize the same employee ID for more than one individual.

**Crosswalk/Linking Employee IDs:**

Providers should follow the instructions in the employee ID linking file to link an old employee’s ID with a new one. This ensures continuity in reporting an employee’s hours when their ID changes (e.g., due to a change of vendor).

**Agency staff and turnover calculation:**

Agency employees count toward turnover only when there is a 60-day gap in hours worked. If the agency employee returns after a 60+ day break, they are considered a new employee.



**Review your data prior to the submission deadline to ensure all hours and job codes are accurate and complete.**

# COMPLIANCE AND VALIDATION

## **What happens if PBJ data is not submitted on time?**

Failure to submit PBJ data by the deadline can result in noncompliance citations, forced downgrade to 1 star staffing rating for a quarter, exclusion from public reporting on the Care Compare website.

## **How can facilities correct PBJ errors?**

Facilities can resubmit corrected data **BEFORE** the quarterly deadline. Once the submission window closes, no further changes can be made for that quarter.

## **Is it possible to submit corrections to PBJ data after the deadline for a quarter has passed?**

Unfortunately, **it is not possible to submit or correct PBJ data once a submission deadline has passed.** There are no exceptions. To post staffing measures and ratings for all facilities on a set schedule, it is critical that the submission deadline is met. CMS calculates the measures for all 15,600 facilities at once (not individual facility's measures one-by-one).

Providers should be running the staffing reports that are available in CASPER to check the accuracy and completeness of their final submission before the deadline has passed so that any errors can be corrected. These reports show exactly what was included in the final PBJ submission.

## **If a facility is not participating in Medicare/Medicaid, may they still use PBJ to report staffing information (as optional)?**

If a facility is not listed on Care Compare, then they should not be reporting staffing data in PBJ.

# AUDIT PROCESS

## **Our understanding is that “significant discrepancies between the hours reported and verified” would trigger a failed PBJ audit. Is that correct? Are there any other conditions that would trigger a PBJ audit failure?**

It would be a significant variance between what was reported and what was verifiable. This could also include census information, not just staffing hours. In addition, a failure to respond to an audit request would also trigger a failed PBJ audit. But typically, it is the significant variance between hours reported and hours verified that would trigger the audit failure.

## **How is the initial audit request shared?**

The initial audit request is sent via email and sent via certified mail.

## **If a provider fails a PBJ audit and would like to appeal the decision, is there a way for them to do so?**

Yes. Providers are given instructions on how to file for a reconsideration in their audit results letter. There are some reasons why a facility would fail an audit where no reconsideration would be available. For example, if an audit reveals that a facility grouped contract employees under one ID instead of creating a unique ID for each contract employee, the audit is not completed. Grouped IDs will cause a significant variance because turnover cannot be calculated accurately. In that case, the results letter would not contain reconsideration instructions

# 5-STAR RATING

## **Are my Five-Star ratings suppressed during a PBJ audit?**

No, your ratings are not changed during an audit. Only the result of the audit may impact your ratings.

## **When and how will I know if my Five-Star rating will be impacted by an audit?**

The audit results letter will indicate whether your Five-Star rating will be impacted by the findings of the audit.

## **If an audit is failed, what will be the impact on my Five-Star rating?**

The impact on Five-Star ratings varies depending on the findings of the audit. A penalty letter at the end of the audit will provide specific details. Generally, if an audit is failed, a facility will see their Five-Star Staffing rating reduced to 1 star for a quarter, which can reduce their Overall rating by 1 star.

Additionally, the data for that audited quarter would be marked as invalid by CMS and not be used to calculate turnover measures, which would impact Five-Star Staffing scoring for six quarters. See the [Five-Star Technical manual](#) for more details on how missing turnover measures impact staffing rating calculations.

# SUPPORT & RESOURCES

## **Where can PBJ specifications and guidance be found?**

Official PBJ policy manuals, XML specifications, and training materials are available on the [CMS PBJ Website](#).

## **CMS FAQ:**

<https://www.cms.gov/medicare/quality-initiatives-patient-assessment-instruments/nursinghomequalityinits/downloads/pbj-policy-manual-faq-11-19-2018.pdf>

## **Are there tools to help with PBJ compliance?**

Many payroll and timekeeping systems offer PBJ reporting modules. CMS also provides sample XML templates and validation tools to assist with compliance.

## **Who can be contacted for PBJ technical support?**

For technical issues, contact the **CMS QIES Help Desk** or the facility's state PBJ coordinator for assistance.

- Email: [iqies@cms.hhs.gov](mailto:iqies@cms.hhs.gov)
- Schedule a service call via CCSQ Support Central
- Live Chat via CCSQ Support Central

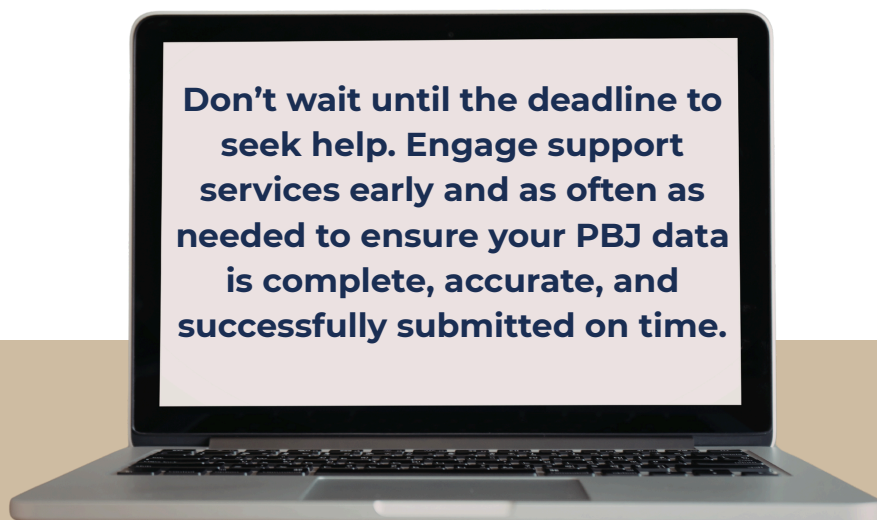
## **For policy questions:**

- [NHStaffing@cms.hhs.gov](mailto:NHStaffing@cms.hhs.gov)

## **AHCA Resources:**

- <https://www.ahcancal.org/Survey-Regulatory-Legal/Pages/PBJ.aspx>
- (Insert PBJ Webinar)
- (MD PBJ Tip Sheet)

**Members may direct PBJ questions to [regulatory@ahca.org](mailto:regulatory@ahca.org).**





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