REPORTS

Five Star

Five Star Overall Report: Provides the user a summary of the organization's Five Star Rating Report, to include overall, staffing, health inspection, and quality measures rating. (Source: CMS Five Star Report)

Five Star Staffing Rating Report: Provides the user a summary of the organization's Five Star Staffing Rating. Includes a tool that allows the user to identify possible ways to increase their Five Star Rating based on changes in staffing. (Source: CMS Five Star Report)

Survey

CASPER Citation Report: Combined Health Survey: Information provided in this report incorporates both the Annual Health Survey and Complaint Health Survey(s). (Source: CMS 2567)

CASPER Citation Report: Standard Health Survey: This report supplies results for the Annual Health Survey. (Source: CMS 2567)

CASPER Citation Report: Complaint Health Survey: This report provides results for Complaint Health Survey(s) for a center. (Source: CMS 2567)

CASPER Citation Report: Life Safety Survey: This report contains the results for the annual Life Safety Code Survey. (Source: CMS 2567)

Resident Characteristics

CASPER Resident Report: This report provides a detailed review of the organization's resident characteristics. This information is the same information that you provide the state agency on the Annual Health Survey. (Source: CMS 802 and 672 forms that are completed at time of Annual Health Survey)

Quality Measure (All) Report: Provides quality measure performance data utilizing information found on NH Compare. Includes seven long-stay measures and three short-stay measures. (Source: CMS Nursing Home Compare, measures derived from MDS 3.0 data)

Staffing

CASPER Staffing Report: This report utilizes information that is reported to the survey team during the Annual Health Survey via the 671 form (staffing matrix). (Source: 671 form that is completed during Annual Health Survey)

Staff Turnover and Retention Report: This report will allow users to access their center/ organization t organizations that have completed the annual AHCA survey their turnover and retention rate for the following positions: All Staff, Administrator, Director of Nursing, LPN/LVN, Staff RN, CNA, and Direct Care Staff. (Source: AHCA Annual Turnover and Retention Survey)

Financial

Cost Report: This report is generated from the Medicare cost report data that the organization submits to MAC. (Source: Medicare Cost Report)

Post-Acute

RUGs Medicare Utilization Report: This report provides a comprehensive review of the organization's RUG rates and Medicare utilization. (Source: This information is uploaded to LTC Trend Tracker directly by AHCA members.)

Hospitalization Rate AHCA Measure Report: This report allows the user to track the center's risk-adjusted rehospitalization rate. (Source: MDS 3.0 PointRight & Brown University)

Discharge to Community AHCA Measure Report: This report allows users to track their risk-adjusted discharge to community rate. (Source: MDS 3.0)

30-Day Rehospitalization & Discharge to Community Reports

Total Annual Admissions: the number of patients admitted from a hospital to a Medicare stay in the nursing center during a year

Average Annual Admissions: the average number of admissions from a hospital to a Medicare stay in nursing center during a year for the selected peer group.

NA(1) - Small Sample Size: Rate not calculated because less than 30 admissions a year

NA(2) - Patient Matching Issues (>5): Rate not calculated because discharge MDS completion rate is less than 95%

NA(3) - Sample Size and Matching Issues: Rate not calculated because less than 30 admissions a year and less than 95% completion rate on discharge MDS.

Actual Rate: Total percent of Medicare admissions discharged to the hospital within 30 days of admission

Adjusted Rate: Expected Rate divided by Actual Rate multiplied by National Average

Expected Rate: Center's average number of patients that are expected to be readmitted to an acute care hospital based on certain risk factors.

Tools

Five Star Quality Measure Predictor Tool: Provides the user a summary of the organization's Five Star Quality Measure Rating. Includes a tool that allows the user to identify possible ways to increase their Five Star Rating based on changes to individual Quality Measures. Use this report to select focus QMs to impact your Five Star Rating. (Source: CMS Five Star Report)

SNF Value Based Purchasing (VBP) Predictor Tool: Enables providers to access key information about their predicted Medicare reimbursement and the potential impact it can have on the organization. This tool, allows skilled nursing organizations to plan for future financial disbursements based on their facility's performance in managing hospital readmissions. The SNF VBP Predictor tool allows member to access timely information and valuable insight about their own performance as well as benchmarks through which they can guide performance changes.

TAG GROUPS

My Organization Tags: This set of F- or K-Tags was selected by your organization to be a priority focus. The Account Administrator for your Organization can modify this list. For step-by-step Account Administrator instructions, see Navigating User Admin Screens.

My Tag Groups: This list of "My Focus Tags" is selected by the individual user. Create ONE list of tags for future use during report generation for Health and Life Safety survey reports. **TIP**: Use this feature to save a list of tags that you frequently review (see See Only Specific Tags below). For example, if you want to run a report of the tags currently under

review by your quality committee, manually select those tags and click the "Save My Focus Tags" button. The next time you run this report, choose "My Focus Tags" to run a report based on this pre-defined list.

Tag Categories: Select groups of tags indicated by the category label. For example: "Category: Admission, Transfer, and Discharge Rights contains the F-Tags 201 through 208 for that category. Multiple categories can be selected for a single report.

Special Tag Groups: You may select from among the following groups of tags to see displayed on your report:

- Most Current Survey Tags – most frequently cited tags from the recent certification surveys for the center or centers included in the report
- Most Frequent Tags (Nation) - most frequently cited tags from the recent certification survey for all centers in the national database.
- Most Frequent Tags (State) - most frequently cited tags from the recent certification survey for the state (or states) for the center or centers included in the "Center/Organization Selection" step.
  SOURCE: Most recent survey on file from CMS

See Only Specific Tags: Use this pick list to select individual tags you wish to see displayed on your report for the selected center/centers and the identified peer groups. You may create a manual list for one time use, or click "Save Selected Tags as My Focus Tags" to quickly select the same group of tags to run a future report. (see My Tag Groups above). Each user can save only one set of focus tags – clicking "Save Selected Tags as My Focus Tags" overwrites previous selections.

GEOGRAPHIC AREAS

Nation: Includes all centers in the CMS database of skilled nursing facilities.

State: Includes all centers the state (or states) for the center or centers included in the report, or specific state selected by the user when building the report.

County: Includes all centers in the county (or counties) for the center or centers included in the report, or the specific county selected by the user when building the report.

City: Includes all centers in the city (or cities) for the center or centers included in the report, or the specific city selected by the user when building the report.

Zip Code: Includes all centers in the zip code (or codes) for the center or centers included in the report, or the specific zip code selected by the user when building the report.

Congressional District: Includes all centers in the congressional district (or districts) for the center or centers included in the report, or the specific district selected by the user when building the report.

CMS Region: Includes all centers in the CMS Region for the center or centers included in the report, or the specific CMS Region selected by the user when building the report. The CMS has ten Regional Offices (ROs):

- Region 1 - Boston Regional Office (Connecticut, Maine, Massachusetts, New Hampshire, Rhode Island, Vermont)
- Region 2 - New York Regional Office (New Jersey, New York, Puerto Rico, Virgin Islands)
- Region 3 - Philadelphia Regional Office (Delaware, Washington DC, Maryland, Pennsylvania, Virginia, West Virginia)

- Region 4 - Atlanta Regional Office (Alabama, Florida, Georgia, Kentucky, Mississippi, North Carolina, South Carolina, Tennessee)
- Region 5 - Chicago Regional Office (Illinois, Indiana, Michigan, Minnesota, Ohio, Wisconsin)
- Region 6 - Dallas Regional Office (Arkansas, Louisiana, New Mexico, Oklahoma, Texas)
- Region 7 - Kansas Regional Office (Iowa, Kansas, Missouri, Nebraska)
- Region 8 - Denver Regional Office (Colorado, Montana, North Dakota, South Dakota, Utah, Wyoming)
- Region 9 - San Francisco Regional Office (Arizona, California, Hawaii, Nevada, Pacific Territories)
- Region 10 - Seattle Regional Office (Alaska, Idaho, Oregon, Washington)

Core Based Statistical Area/MSA: Includes all centers in the Core Based Statistical Area (CBSA) (or CBSAs) for the center or centers included in the report or the specific CBSA selected by the user when building the report. CBSAs are geographic entities defined by the Office of Management and Budget (OMB) and used by the Centers for Medicare and Medicaid Services (CMS), and refer to a metropolitan area around a city that contains a core urban area of 50,000 or more population. Each metro consists of one or more counties and includes the counties containing the core urban area, as well as any adjacent counties that have a high degree of social and economic integration (as measured by commuting to work) with the urban core.

Saved Custom Geography: Created by the user. See How to Generate a Report help document section on Customizing Reports for step-by-step instructions for creating custom geographies for peer group selection.

PEER GROUPS

*NOTE: Unless user checks the box "Include my selected centers in peer results," the center (or centers) selected in the initial step of building the report **are excluded** from the "Peer Group" results for comparison purposes.*

Government: Includes all centers owned or operated by a federal, state or local governmental entity, and located within the selected geographic area.

Bed Size: Includes all assisted living or nursing homes (depending on measure selected) within selected bed size categories. Please note that assisted living and nursing data will not be combined

Not-for Profit: Includes all centers — if operated under voluntary or other non-profit auspices — not government-owned, and located within the selected geographic area

For profit: Includes all centers — if operated under private commercial ownership — either owned by individual, partnership or corporation, and located within the selected geographic area

Independent Owner: Includes all centers that are not part of a multi-center chain (i.e., independent center) and are located within the selected geographic area

Part of a Multi-Center Organization: Includes all centers that are part of a multi-center chain and are located within the selected geographic area

Free Standing center: Includes all centers not owned by or operated in conjunction with a hospital and located within the selected geographic area

Associated with a Hospital: Includes all centers owned by or operated in conjunction with a hospital and located within the selected geographic area

Rural: Includes all centers not located within a CBSA within the selected geographic area (i.e., not urban).

Urban: Includes all centers within all of the CBSAs located within the selected geographic area

Not a Continuing Care Retirement Home: Includes all nursing homes that are not part of a Continuing Care Retirement Community and are located within the selected geographic area (**Note**: A CCRC is any center that operates under state regulation as a continuing care retirement community).

Continuing Care Retirement Home: Includes all nursing homes that are part of a Continuing Care Retirement Community and are located within the selected geographic area (**Note**: A CCRC is any center that operates under state regulation as a continuing care retirement community).

Not a State Veterans Home: Includes all centers that are not state veterans homes and are located within the selected geographic area

State Veterans Home: Includes all centers that are operated as state veterans homes and are located within the selected geographic area

Non-CPAC Member: Includes all centers that belong to organizations that are not members of the AHCA Council for Post-Acute Care and are located within the selected geographic area

CPAC Member: Includes all centers that belong to organizations that are members of the AHCA Council for Post-Acute Care and are located within the selected geographic area