

SHP Solutions[™] for Agencies

Comprehensive Report Catalog

9/21/2018

Version 1.11

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Introduction

The purpose of this document is to list the dynamic reports that can be found in SHP and how they can be utilized.

Provider Selection

Advanced

For organizations with multiple agencies utilizing SHP, nearly all reports can be run and grouped by any combination of agencies in your enterprise. If your organization utilizes a hierarchy that groups agencies into regions, divisions or any other sub-grouping, SHP can be configured to utilize your organizational hierarchy. Once the hierarchy is configured in SHP by your Customer Manager, the "Report Parameters" page will reflect the levels that have been configured.

Basic		<u>~</u>
Level Division Memb	er Central Division	
	Central Division	N
Advanced	East Division	13
Advanced	Great Lakes Division West Division	
rovider(s)	Great Lakes Division West Division	
rovider(s) te: Select Provider(s) to include in this repo	Great Lakes Division West Division	

To run reports for a grouping of agencies other than the standard levels for your hierarchy, the "Advanced" section of the "Provider Selection" control can be used to select any combination of agencies.

Region 01 Region 02

Region 03 Region 04 Region 05

Advanced	
Central Division	*
East Division	
Region 04	=
Region 06	
Region 19	

If a custom hierarchy is not configured for your organization the "Provider Selection" control will only display groupings for "CCN" and "Provider".

Comprehensive Overview Reports

These reports can be used to obtain an overview of how your organization is performing in multiple areas of performance improvement.

Real-Time Home Health Compare (HHC)

Grouping: Clinical Performance

Required Access Level: Standard

Description: The Overview section of the HHC Report can be used to review the 7 improvement outcomes, 13 process measures, 2 utilization outcomes, and 5 HHCAHPS metrics (If your organization is utilizing SHP to administer your HHCAHPS surveys) that are part of Home Health Compare.

To view the "Percentile Goals" section of this report, use the "<u>Click to View Reference Percentiles</u>" link on the bottom right hand corner of the report. This page can be used to determine the percentage your agency needs to reach for each measure on the report in order to achieve a specific percentile ranking among your peers.

Parameters: Date Range, CMS Reporting Period, Override CMS Reporting Period, Require Claims, Payer Type, Process Measure Inclusion Options, Group or Batch, Telehealth

User Guide: Yes

Screenshots:

Overview

Your Overall Star Rating	Gally of Relations	會會	會會	*				
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nyovenedia Ballianshrig 👲 🔶 🔆 🖞	78.8% 12.8%	81.7%	49.0%		81.0%	70.0%	11.0%	12.05
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Percentile Reference



Real-Time Star Ratings Preview – Quality of Patient Care

Grouping: Clinical Performance

Required Access Level: Standard

Description: Lines 1-13 of the Initial Decile Rating section detail the Decile rating for each of the Quality Measures included in the Star Rating calculation. Lines 14-18 will show the impact of the adjustment logic applied by CMS to your final Star Rated score.

Parameters: Payer Type, Process Measure Inclusion Options, OASIS Version Inclusion, Telehealth, Group or Batch.

User Guide: Yes

		F	rocess Measures				Outcome	Measures		
	Initial Decile Rating	Timely Initiation of Cere	Drug Education All Medis	Plu Veccine Received	Improvement in Ambulation	Improvement in Bod Tif	Improvement in Bothing	Improvement in Pain	Improvement in Dyspnee	6D-Dey Hospital2etions
	High/Low Better (+/-)			3. * .				+		
2	0.5	0.0-81.2	0.0-89.1	0.0-41.8	0.0-50.6	0.0-43.3	0.0-50.6	0.0-47.8	0.0-40.2	21.3-100.0
3	1.0	81.3-87.5	89.2-94.3	41.9-57.0	50.7-58.3	43.4-52.D	50.7-60.3	47.9-58.7	40.3-54.1	19.4-21.2
4	1.5	87.6-50.7	94.4-96.4	57.1-65.6	58.4-63.2	52.1-58.0	60.4-65.8	58.8-64.5	54 2-62 0	18.2-19.3
5	2.0	90.8-92.9	96.5-97.6	65.7-71.3	63.3-66.7	58.1-62.4	65.9-69.5	64.6-68.8	62.1-67.2	17.2-18.1
6	2.5	93.0-94.7	97.7-96.4	71.4-75.3	66.8-69.4	62.5-65.7	69.6-72.5	68.9-72.6	67.3-71.2	16.4-17.1
7	3.0	94.8-95.9	98.5-99.0	75.4-78.8	69.5-71.9	65.8-68.7	72.6-75.3	72.7-76.4	71.3-74.7	15.5-16.3
8	3.5	96.0-97.0	99.1-99.4	78,9-82,2	72.0.74.4	68.8-71.6	75.4.78.3	76.5-80.6	74.6-78.0	14.5-15.4
9	4.0	97.1-97.9	99.5-99.5	82.3-85.6	74.5-77.6	71.7-75.1	78.4-81.9	80.7-85.3	78.1-81.7	13.1-14.4
10	4.5	98.0.99.0	99.9.99.9	85,7-90 5	77.7-83.1	75.2-80.2	82.0-87.1	85.4.92.8	81.8-86.6	11 3-13.0
11	5.0	99.1-100.0	100.0-100.0	90.6-100.0	83.2-100.0	80.3-100.0	87.2-100.0	92.9-100.0	88.7-100.0	0.0-11.2
12	Your HHA Score	99.0	99.7	84.5	78.5	76.5	91.3	90.4	81.7	11.1
13	Your Initial Decile Rating	4.5	4.0	4.0	4.5	4.5	5.0	4.5	4.0	5.0
14	Your Number of Cases (N)	1,341	1,327	831	1,084	1,076	1,090	960	1,090	525
15	National (All HHA) Median	94.7	98.5	75.4	69.5	85.8	72.5	72.7	71.3	16.3
16	Your Statistical Test Probability Value (p-value)	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
17	Your Statistical Test Results (Is the p-value < 0.050?)	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
8	Your HHA Adjusted Rating	4.5	4.0	4.0	4.5	4.5	5.0	4.5	4.0	5.0
19.	You	Average Advand Ball	20		1		4	4		
20	Your Ave	rage Adjusted Rating Ro	ounded				4	5		
sel.	Step: Convert Your Average Adjusted Rs	iting Rounded (Line 20)	to the 1.0 to 5.0 sti	er scale as sho	en below.	01				
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Clinical Executive Advantage

Grouping: Clinical Performance

Required Access Level: Standard

Description: This report can be used to review key metrics at the agency, state, enterprise, and national level. The report includes sections that percentile rank the 11 outcomes, 2 potentially avoidable events, 16 process measures, and 5 HHCAHPS metrics (If your organization is utilizing SHP to administer your HHCAHPS surveys) that are part of Home Health Compare as of January 2010.

Drill Down: When viewing the report in the "Report Viewer", click on the links in any column to drill down to the corresponding patient detail for the measure you are researching.

Parameters: Date Range, Payer Type, Process Measure Inclusion Options, OASIS Version **Screenshot:**

	Media	are Trad	Donal	Met	Sicare H	мо	Medica	ald Tradi	lanot	Ma	Sicald His	0		Other		Tota	Episod	961
Episodes Started Assessment Types (01) (03)	Admits (01)	Re- admits (03)	Total	Admits (01)	Re- admits (03)	Total	Admits (01)	Re- admits (03)	Total	Admits (Q1)	Re- admts (03)	Total	Admits (01)	Re- admits (03)	Total	Admits (01)	Re- admits (03)	Total
nterprise	7,580	1,164	8,544	3,835	336	2,433	833	193	1,092	30	19	118	3,711	369	4,100	14,200	1,963	16,172
uperior Home Care of Ventura	1.315	276	1.524	212	36	248	247	58	305		1	5	590	99	682	2.047	375	2.422
nterprise (CA)	1,318	276	1,554	212	36	248	247	58	305	4	1	5	590	59	685	2,647	375	2,422
uperior Home Care of Scottsdale	77	14	91	13	2	15	9	1	10	0	0	0	10	2	12	99	18	117
uperior Home Care of Phoenix	2,698	425	3,123	1,444	169	1,615	350	88	438	60	13	73	1,453	151	1,604	5,752	795	6,547
uperior Home Care of Flagstaff	302	25	327	2	0	2	10	1	11	0	0	0	77	3	80	385	29	414
uperior Home Care of Gilbert	920	125	1,045	90	17	107	57	9	66	2	0	2	258	22	280	1,278	164	1,442
uperior Home Care of Mesa	1,515	230	1,745	1,067	147	1,214	114	17	131	22	2	24	940	66	1,006	3,406	427	3,833
nterprise (AZ)	5,512	813	6,331	2,616	335	2,951	540	116	656	H	15	93	2,738	244	2,562	18,520	1,433	12,353
uperior Home Care of Las Vegas	550	69	619	207	27	234	112	19	131	11	3	14	363	46	429	1,242	155	1,397
nterprise (NV)	556		615	207	27	234	112	19	131	11	3	14	383	46	427	1,342	155	1,337

Rehospitalization Report

Grouping: Hospital Utilization

Required Access Level: Standard

Description: The Rehospitalization Report provides an analysis of the 30-day rehospitalization rate that will appear on Home Health Compare in 2015. Further metrics include breakdowns by the 5 hospital diagnosis penalty groups of AMI, Heart Failure, Pneumonia, Joint Replacement, and COPD. The second page of this report identifies the score your organization must achieve in order to score in each percentile bucket. Additional breakdowns include rehospitalizations by day of the week and patients rehospitalized within 0-7 days, 0-14 days, 0-30 days, 0-60 days, and 0-90 days.

Drill Down: When viewing the report in the "Report Viewer", click on the links in any column to drill down to the corresponding patient detail for the measure you are researching.

Parameters: Date Range, Payer Type, Require Claims, Telehealth, Exclude CMS Ineligible DX Categories

User Guide: Yes

Screenshots (Page 7):



Rehospitalization Patient Detail

Grouping: Hospital Utilization

Required Access Level: Standard

Description: This report can be used to review all patients that were readmitted to the hospital after a hospital discharge. The report can be sorted by any column.

Parameters: Date Range, Payer Type, Require Claims, Telehealth, Exclude CMS Ineligible DX Categories

User Guide: Yes

Screenshot:

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Pane	SMOC CIRIEUS	SINDS Case My	(N1005)	500 (M0330)	(M0505)	Days	AME	CABG	COPD	mP	JUNE	Ptee	PERMAN	10-Day
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MR (200803)	NANCY, NURCH		TD6/2014	1012014	1112016	20							04.00	
MIT 120202-0	NANCY, NURSE		10/12016	108:2016	10/3/00/16						1		247.3	
MR 1000000	NANCY, NURSE	WANNAGER, CASEY	10/19/2016	10/20/2016	1116/2016	25							V62.81	
NOSERS AARON	NANCK, NURSE		10/0/2010	10/5/2016	10150510								E11.545	
SROW, ROB	NANCY, NURSE	WANAGER, CASEY	10/25/2016	10.26.2016	11020010	28							144.1	
SURLEY, 1000	MANCY NUMBER		10/10/2018	10182018	112021	12							248.82	
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TZGCTALD, LANTY														
SHR \$200010	NOOS 1, NUMBE		1011-02015	1010/2010	125021	N							144.1	
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MR 1000012)	NANEY, NURSE	MANAGER, CASEY	10010010	10232015	111112210	20							69.395	
MADY, TOW	NANCK NURSE	WANAGER, CALEY	10/8/2014	1045/2019	107/0198	1.8						10	216.3	
WLOCH, RUGGELL	MANGY, NUMBER		10/20/2015	10292919	11/2/00/14								62.10	

Hospital and Emergent Care Utilization

Grouping: Hospital Utilization

Required Access Level: Standard

Description: The Hospital and Emergent Care Utilization Report provides a complete picture of your Acute Care Hospitalization and Emergent Care rates using the OASIS data set. Further breakdowns include risk-factor analysis, diagnosis breakdowns, and "Reason" breakdowns.

Drill Down: Coming soon

Parameters: Date Range, Payer

Type User Guide: Yes

Screenshots:



Hospitalization Patient Detail

Grouping: Hospital Utilization Required Access Level: Standard Description: The Hospitalization Patient Detail report will recognize patients of varying hospitalization risk ranging from low to high. Parameters: Provider selection, Date Type User Guide: Yes Screenshot:

	iospitalization Patier	nt Detail							01010	1218 - 12 of Date	10:201													
Vex Post		Patients (HH SOCa/ROCa):	1.010	30-Cay Ref	tonga: 40		80-Dwy Hosp	a 10	All Acurs Car	e Hospi	-	205						Hoage 3d		. 10	wite Heat	N 8	C to Comm ?	800
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Patent	SIROC Circles	S/ROC Case Mp	Sales Sales	SNETCU CTHP		1	100 Fm	201 × 102	ROC	HINKY HICO # ROC	Numerous South	797	TRF to Inpit Facility	Unsched Hosp Court	045 SOC	P AM	040	A H	1	CH Hanges	N House	Cisp	ostion	To Community
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Mauldin, Alan (827987987)	Augurs, Lisa	Lisa Rogers	07/28/18				012715 248.5	ET2 Low		-	1	-			1	1	1	1	-	11	-			2
Lee, Alex (124124124)	Jonah, Cassandra	Davis, Austr	08/02/18				060318 (21.4	Med								1	1	1			1000			
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Balley, Aydon (\$23623823)	Mahone, Jasmine	Thompson, Hadley	08/10/18				001118 (25.1	d Low								12					1000			
Brian, Breanna (897897897)	Preston, Sophie	Davis, Austh	05/05/18				08/07/18 144.1	Low								1	1			TI				
Rogers, Britary (324324324)	Smith, Jamie	Paters, Rani	05/13/18				051518 145.8	1 Mad	052018 14	11.0	Med.	05/10/12	Hangila	242						. 0				0
Bryce, Lori (029029029)	Terry, Liliana	Donna, Hanid	05/30/18				09/02/18 144.9	Low								1	1		2	11	-			
Ranger, Colley (245245245)	Report, Lina	Davis, Aurth	08/07/18				080818 181 1	tto Meet								1								
Courtway, Patricia (728728728)	Ropers, Line	Peters, Rani	07/23/18				07/20/16 121.4	Mad	0728/18 8	97.1	Mot					1				TI	-			
Miguel, Devon (8161616)	Broth, Jamia	Paters, Rani	68/12/18				081218 125.1	0 Low				081918	Hanpital			1		1		• • •				0
Devena, Emmanuel (962992992)	Ropers, Liaa	Davis, Austin	05/07/18				050818 (25.7	0 Low								1				TT	-			
Brown, Grant (245245345)	Druth, Jamie	Rans Paters	0512115				081418 121.4	1.00				07/13/18	Hespital	Tef1	2	1 2			0	0 0				0
Jaden, Jeremy (212131)	Devers, Heather	Paters, Rami	04/20/18				042118 (21.4	Low	042618 (2	018.810	Mod					1					H 05/14	18 Community	wie Assat	0
Davis, Jocatyn (\$45454)	Mahore, Jasnine	Thompson, Hadley	01/26/18				070918 121.4	High	081218 15	4.8	Har					1		25						
Jordyn, Karby (512532532)	Harold, Conna	Harold, Doma	05/11/15				081218 (21.4	Low								1				TI	-			
Kaleb, Kalth (\$07907507)	Smith, Jamie	Paters, Rani	05/05/18				000810 125.1	0 Mod	09/09/19 10	15.10	Mod	08/08/18	Hungital	202	1	1 1		1		. 0	н			0
Kendall, Marcus (345845845)	Roberts, Charlie	Davis, Austin	67/28/18				07/29/18 R261	10 Low								1		1		T				
Manssa, Morgan (903903003)	Anah, Cassandra	Peters, Reni	10/10/18				101318 L53.6	a Mart								1								
Allen, Payton (781781781)	Juden, Erica	Thompson, Hadey	09/20/18				092218 121.4	Low								1		1			1			
Titlary Charyl (\$23823823)	Janie Smith	Paters, Rami	08/02/18				08/03/18 111.0	Med				08/0618	Hangellad	teft	1	1		1	0	0 0				9
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Shevens, Morgan (809009009)	Artonia, Courtney	Thompson, Haday	1128/18				110018 (25.9	0 Med	12/03/18 (2	15.10	High.					1					H 1225	15 Community	wie Assat	0
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60-Day Hospitalization Patient Detail

Grouping: Clinical Performance

Required Access Level: Standard

Description: This report can be used to review all patients that were hospitalized within 60-days of their home health start-of-care date. The report can be sorted by any column.

Parameters: Date Range, Require Claims, Payer Type, Time Elapsed Since SOC

User Guide: No

	Bullet of Bullet	5140	ADD CENTRAL	SOC Date	TRP to Hoe	pital (M0006)	Oays From		Home Heal	En Primary DX
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21012	Gaffgan, Jim	99999		\$2180012	(06)	04/12/2012		-98	425.0	CHF NDS
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Outcomes Reports

These reports can be used to obtain an overview of how your organization is performing in regards to outcomes.

Outcomes Trended

Grouping: Clinical Performance

Required Access Level: Standard

Description: This report displays both actual and risk-adjusted trended outcomes data along with the state and national benchmarks for the selected time period.

Drill Down: To research trends, click on the links in the "Events" column or click on individual months on the blue "You Observed" trend line to drill down to the "Outcomes Patient Detail" and show all patients that "Improved" in that month for the outcome you are reviewing. In the "Outcomes Patient Detail Report", the "Report Mode" can be changed to view eligible unimproved, improved, stabilized, declined, or all patients.

Parameters: Report End Date, Payer Type, OASIS Episode Inclusion Options, Telehealth **Screenshot:**

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Outcomes Patient Detail

Grouping: Clinical Performance

Required Access Level: Standard

Description: This report can be used to review all completed clinical episodes for any given time period. After selecting the outcome you wish to analyze by clicking on the outcome name in the header, the "Report Mode" can be changed to view eligible unimproved, improved, stabilized, declined, or all patients. The report can also be sorted by any column. Each patient name links to the Episode Einstein Report for the selected patient.

Parameters: Date Range, Payer Type, Outcome, Outcome Type, Telehealth, OASIS Episode Inclusion Options

Screenshot (Page 11):

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Outcomes Analyzer

Grouping: This web query can be found on the SHP Secure Portal under Applications \rightarrow Agencies \rightarrow Outcomes Analyzer.

Required Access Level: Standard

Description: This web query can be used to run custom queries on your organization's outcomes by Primary Diagnosis, Month, Clinician, Clinician Specialty, Case Manager, Team, Customer Defined Groups, or Provider.

Parameters: Outcome, Payment Type, Date Range, Diagnosis Group, Group By, Enterprise

Outcomes - Updated for OAS	<mark>/S-</mark>	C C	ved to our	new dyn	amic re	norte	
Please see the Home Health Cor	npa	are repo	ort or the	Trended	Outcom	ies report.	
Dutcome: Acute Care Hospitalization Diagnosis (primary or secondary):	[Payr Mec Grou	ment Type: di-Medi up By: nth	•	Results Screen	To:	Date Range: 1/1/2011 4/30/2011 Enterprise: SHP Current Provider SUP cutomit
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m	1 2 3 4	Date Jan '11 Feb '11 Mar '11 Apr '11	Number of Events 14 10 9 9	Total Episodes 59 46 63 72	Your Rate 23.7% 21.7% 14.3% 12.5%	SHP Benchmark 27.4% 26.0% 24.6% 25.2%	

Process Measures Reports

These reports can be used to obtain an overview of how your organization is performing in regards to the Home Health Process Measures that started being tracked by CMS as of January 2010.

Process Measures Overview

Grouping: Clinical Performance

Required Access Level: Standard

Description: This report can be used to review all 47 CMS Process Measures for any given time period compared to State and National averages.

Drill Down: Click on any measure to drill down to the Process Measure Patient Detail Report. The Process Measure Patient Detail Report will be automatically filtered to show only the patients for whom the selected process measure was not "met".

Parameters: Date Range, Payer Type, Process Measure Inclusion Options

Screenshot:

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Process Measures Patient Detail

Grouping: Clinical Performance

Required Access Level: Standard

Description: This report can be used to review all 47 CMS Process Measures for any given time period at the patient level. By clicking on any process measure name in the report you can filter the report and view all patients that had a negative result for the selected Process Measure. You can also sort by any column by clicking on the arrows next to each column header.

Drill Down: Click the Patient Name to open Episode Einstein[™] or click the *▲* arrow

👅 arrow

to

open up the alert details and see the individual OASIS items related to the event.

Parameters: Date Range, Payer Type, Process Measure Inclusion Options Screenshot:



Potentially Avoidable Events Reports

These reports can be used to obtain an overview of how your organization is performing in regards to the Potentially Avoidable Events (Adverse Events) that are tracked by CMS.

Potentially AvoidableEvents

Grouping: Clinical Performance

Required Access Level: Standard

Description: This report can be used to review all Potentially Avoidable Events that are tracked by CMS for any given time period compared to State and National averages.

Drill Down: From the Overview section, click on any measure to drill down to the Patient Detail section. From the Patient Detail section, click the Patient Name to open Episode Einstein[™] or click the "Assessment" column to open up the alert details for the event.

Parameters: Date Range, Payer Type, OASIS Episode Inclusion Options

Screenshots:

<text>

Overview

Patient Detail

					_			Events a
Patient Name	Patient ID	SOC/ROC Clin	SHP ID	SROC	KOD	Description	Event Type	Assessment
DEMO Cardenas. Selda	DEMC0000005	DEMO Clinician 5	99012	03/08/2013	VOLET	Aftercare joint replace	EC - Wound Infection/Status	03/12/2013 (06) TRF - No DC
EMO Harrington, Ryder	DEMC0000018 SX	DEMO Clinician 2	99012	01/20/2013	V58.30	Attn rem nonsurg dressing	EC - Fall or Accident at Home	05/15/2013 (06) TRF - No DC
CEMO Macdunald, Neo	DEMC0000001	DEMO Clinician 8	99012	02/16/2013	430.51	Lt ef oth paral dom side	EC - Wound Infection/Status	03/15/2013 (06) TRF - No DC
DEMO Meja, Mary	DEMC0000002	DEMO Olinician 2	99012	02/02/2013	998.32	Disrup-external op wound	EC - Wound Infection/Status	05/15/2013 (06) TRF - No DC
DEMO Notelson. Dren	DEMC0000054 EX	DEMO Clinician 3	99012	03/05/2013	V54.81	Aftercare joint replace	Development of UTI	05/22/2013 (09) DC
DEMO Reyes, Jason	DEMC0000007	DEMO Dinisian 7	99012	01/29/2013	805.8	Vertebral fr NOS-closed	EC - Fall or Assident at Home	03/17/2013 (06) TRF - No DC
DEMO Romeno,	DEMICO000038	DEMO Clinician 4	90012	02/20/2015	V54.81	Aftercare joint replace	Development of UTI	05/09/2013 (09) DC
DEMO Wiey, Jesse	DEMC0000011	DEMO Clinician 3	99012	01/11/2013	V54.12	Afrore traum fx low arm	Decline - Mynt of Oral Meds	03/11/2013 (09) DC

Financial/Operational

These reports can be used to obtain an overview of how your organization is performing in various financial and operational categories.

Real-Time VBP Total Performance Score

Grouping: Financial/Operational

Required Access Level: Financial

Description: This report is used to evaluate performance at the CCN level for all measures contributing Value Based Purchasing. The report will show in-depth information regarding where your scores will place you compared with the most recent CMS cut points.

Parameters: Reporting Period End Date

Drill Down: Click on the percentages found under the "Your Current Period SHP Score Section". **Screenshot:**

Value Based Purchasing (VBP) Measured				E This C.A.	Concerns and the		the second se		
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nte Relei Agency 8,10	1	84.80%	* 88.00%	05.00%	* 90.00%	8.21	7.83	821	until 87%
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Financial Executive Advantage

Grouping: Financial/Operational

Required Access Level: Financial

Description: This report can be used to review key financial metrics at the agency, state, enterprise, and national level. The report includes the following financial and demographic metrics: Overview of Payment Episodes Started and Completed, RAC Risk Metrics, LUPA Analysis, Average Case Weight Analysis, Visit Utilization, Therapy Visit and Service Category by Revenue, Case Weight, and percentage of total episodes, including a thorough breakdown of the "0-5" visit category.

Parameters: Date Range, Payer Type, Financial Date Type (Financial Episode Completed Date or Final Claim End Date)

Drill Down: Click on the links in any column to drill down to the Financial Patient Detail report for the measure you are researching.

Screenshot (Page 15):

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Financial Patient Detail

Grouping: Financial/Operational

Required Access Level: Financial

Description: This report can be used to review 60-day payment episodes individual episode level. The report includes details on Therapy Visits, All Visits, HHRG, HIPPS, Case Weight, NRS Payment, Expected Revenue, Potential Revenue, Payment Tier, LUPA/Outlier indicators, and more.

Drill Down: HHRG Worksheet

Parameters: Date Range, Payer Type, OASIS Version, Financial Date Type (Financial Episode Completed Date or Final Claim End Date), LUPA or Outlier filter

	1 1494-0 1400														-		
Fatient Natur Fatient ID	Ep Start Ep End	M0000	Clinician Case Manager	DX Calegory KD		Ther Visits	AZ	HRG	HPPS	Case Weight	NRS Payment	Expedial Revenue	Potential Revenue	Tw	£9.4		LUPA/ Outlier
DOE, JOHN	05/04/2010 (04)	03/14/2014	NURSE, NANCY	SkotSuboutaneous (Not PUA) 706.0	RAP.	0		C3F251	380KU	0.0420	\$139.35 \$139.35	\$1,523.61 \$1,643.11		Line 5-13	٠		0.6
DOE JOHN	05172015 (34)	03/29/2010	NURSE, NANCY	Couldby just	RAF	10	-	CIFISI	2695	1.2270	314.07	\$5 287 55	_	47		-	
214197840	07/10/2015	07162016		HTN, HF er CVD) #10.72	Fine	21	28	C1F257	SACK1	1.0031	314.07	\$4,984.54		200	1		
PATIENT ATEM	0515001104	06/20/00/4	NURSE, NANCY	Decriments.	HAP	0	-	(29935)	WWS	1420	314.40	\$1.479.85	_	1.00		-	-
21497100	07/14/2016	07162016	MINAGER CASEY	174.0	Inc	0		C2F257	TROACE.	0.4920	314.40	41.470.85		0-13			
SIDK DAVE	05070015 (01)	05/01/2015	NURSE, NANCY	Responsive (not	RAP	0	-	C9F157	10PKU	0.6961	\$143.53	\$1,853.52	_	Entre		-	-
234747690	07/05/2014	00110016	MANAGER CASEY	479.30	The			carses	1000	0.4041	\$141.15			0-13			
HURT HARRY	05/07/2015 (14)	11/12/2014	NURSE, NANCY	Respiratory -	RAP	0		C2F35/	384415	0.6457	114.40	\$1.615.35		1.00		-	-
214587800	0709/2015		MINAGER CASEY	4918	Fend	0	- 18	C2F11+	3844(1	1.0417	-	\$1.618.25		0-13	1		
ANON. AMOS	07/01/00/15 (01)	01/31/2016	NURSE, NANCY	Mactions.Parasite	RAP	0	-	C#/25/	100KT	0.0042	\$40.40	\$2,343.78		Eate			1100
234087890	07/03/0016	0800004	MANAGER CASEY	010.0	Find		2	C197251	10042	1.6342	10.00	1341.67		0-13			2 Viete
ACHIGON JANE	06/07/02/15 (01)	osich porte	NURDE NANCY	BLandoidalata/Cr	INF	16	-	02/152	2841.0	1.8142	\$14.40	\$3,735.63		Farty			_
254587660	07/02/2018	0740/2015		723.1	Feat	12	12	C2F258	19021	1,2100	314.40	\$1,047.75		0.12			
SINL JOSAHOL	07/17/2015 (01)	01112018	NURDE, NANCY	Neiglasra	BAP:	10		007254	10 CPUS	1.5182	\$14.42	\$2,785.87	_	Early			LUPA
234567690	07.00/2015	0105/0010	MANAGER CASEY	237.8	Find.	0	2	029251	18GK1	0.7962	\$0.00	\$362.11		0-13			2 Vete
SMITH, JOHN	08/08/2015 (24)	08/13/2014	NURSE, NANCY	Genteurinary	RAP	1		C2735/	189-915	6.4294	\$14.40	\$2,056.11		Early			
254387660	07/21/2010	01210018	MANAGER, CASEY	100.01	THE			Dan	staarg					0.12			
SARTH, JANE	0515/2015 (24)	11/26/2012	NURSE, NANCY	Attention	INF:	D		C27251	380KU	1.6420	\$141.52	\$1,009.80		Lee	10		LIPS
234557660	07/10/2010		MANAGER CASEY	V05.5	THE	0	2	C2F251	SECKU	0.6920	\$0.00	\$212.38		0.12			2 1/1010
IONES, ED	05/15/2015 (04)	0118/2016	NURSE, NANCY	Klental Behavioral	RAP.	0		C1#25/	BACHS	0.6748	\$14.40	\$1,428.05		Lee	2		
234957890	07/14/2010	07142015	MANAGER CASEY	294.20	THE	0		C1F251	34045	0.0740	\$14.49	\$1,428.65		0.13			
IONES, JANE	05(21(2015 (04)	01/29/2010	NURSE, NANCY	Croulatory:	RAP	0		C1F251	BAGHS	0.6740	\$14.49	\$1,428.05		Lev			
214957660	07/21/2010		MANAGER, CASEY	403.80	FILE	0		C1F25/	SACKS	0.0140	314.42	\$1,428.05		0-13			
ROY, ROB	05070015 (14)	03/13/2018	NURSE, NANCY	Circulatory - Heart	RAP:	0		C1#221	100KS	0.6042	\$14.49	\$2,642.06		Early	2		
234987860	07/10/2018		MANAGER CASEY	428.0	Fest	0	23	CIF251	10061	0.6342	\$14.40	\$2,042.08		9-13			
CAMPER, HAPPY	05/08/2015 (04)	0109/2015	NURSE, NANCY	TherapyRetub	RAP	12		C3F258	38095	1.2278	\$14.07	\$3,288.12		Late	3		
254567600	07/07/0014	010000-6		WAT I	Date	14	- 14	CIENSI	44.011	1.5407	\$14.07	\$1 334 CT		14.03			

Case Mix Distribution Report

Grouping: Financial/Operational

Required Access Level: Standard

Description: This report can be used to obtain a breakdown of which PPS revenue rules (Table 2A/Table 4) fire the most frequently for your organization compared to the SHP Benchmark. This can be useful in obtaining a breakdown of the clinical conditions that are generating revenue for your organization.

Drill Down: In the multi-provider version of the report, click on the Agency Name in the report header to drill down to the single site report. If run for a single site the report will show monthly groupings for the date range that the report was run for.

Parameters: Date Range, Payer Type

User Guide: Yes



Case Weight Drill Down

Grouping: This web query can be found on the SHP Secure Portal under Applications \rightarrow Agencies \rightarrow Case Weight Drill Down.

Required Access Level: Standard

Description: This web query can be used to analyze your organization's RAP and Final Case Weight by Month, Clinician, Clinician Specialty, Case Manager, Team, or PPS Rule. In the Clinician and PPS Rule groupings there are additional columns that display OASIS accuracy percentages as well as SHP edit resolution percentages.

Drill Down: Group the query by "Clinician" or "PPS Rule" then click on the **blue arrow** in the left-hand margin to drill down and view more details on the case-mix breakdown.

Parameters: Date Range, Episode Start/Episode End, Group By, Payer Type **Screenshot:**



Staff Performance

These reports can be used to obtain an overview of how each clinician, case manager, or team in your organization is performing in selected financial and outcomes related metrics. These reports can be used for quarterly or annual staff reviews to determine where your staff excels or need to improve.

Overview

Grouping: Staff Performance

Required Access Level:

Standard

Description: This report can be used to compare financial metrics, SHP usage, outcomes, process measures, potentially avoidable events and HHCAHPS performance for all clinicians at your agency compared to your agency, SHP State and SHP National benchmarks. Each column on the overview report can be sorted by clicking on the $\widehat{}$ arrow above each column.

Drill Down: Click on a name to drill down to the full scorecard for a specific clinician

- **Parameters:** Date Range, Data Type (Multiple individuals, teams, providers can be selected), Clinical Payer Type, Financial Payer Type, Process Measure Inclusion Options, OASIS Episode Inclusion Options. You will also have the opportunity to choose your clinicians from "Clinician SOC/ROC" (Clinical scores will be attributed to the SOC/ROC clinician) or "Clinician Current" (Clinical Scores will be attributed to the Discharge/Transfer clinician).
- Layout: "Use Recommended" will automatically toggle between either the "Staff & Agency", or the "Patient Source" layout options, depending upon which of the Data Type parameter you select. The "Staff & Agency" layout will identify both positive results and opportunities for performance improvement for your organization in key metrics, and will feature important information regarding the management of SHP Alerts. The "Patient Source" layout will highlight your organization's payer mix, along with a more in-depth look at your hospitalization rates (this layout is preferred when run for a Referral Source). The "Patient Source" layout will not highlight areas where declines occurred for Outcomes.

User Guide: Yes

Clinician Mapping: If duplicate clinician names are shown in the list of clinicians, utilize the "Clinician Mapping" tool on the "Admin" page to merge duplicate records.

- WARDEN AND	Casa	lo.ed	Z	SHP AN	eri Manage	the l ^{at}	Made	are Traditio	inal	He	-	***	Quali	V Manura ((ampealine)	Scores .
Aggregate Scores	SOC.	DC.	HC Sc	A	Clesed	1 Clessed	Case	Visits (38 disc)	Ther Visit	30-Cay Rehosp	60 Day ACH	AL ACH	Process Measures	Oukceses	PAEs	HICAHPO
High/Low Detter (+/-)	n/a	nb	2 T				10/3	n'a								
SHP National Avg			88%	63%	53%	43%	1.05	16.22	3.15	12%	16%	24%	35%	72%	0.53%	85%
SHP State (OH)			88%	68%	50%	50%	1.05	17.29	3.52	12%	16%	25%	95%	71%	0.53%	86%
Your Organization	377	330	83%	88%	79%	63%	1.20	17.90	2.35	11%	15%	24%	27%	75%	0.62%	85%
SOC/ROC Clinician																
NURSE, NANCY	67	85	92%	\$0%	94%	85%	1.31	14.75	3.12	7%	12%	12%	96%	80%	0.27%	93%
CAREGINER, JOHN		55	92%	91%	84%	73%	1.42	17.65	3.30	0%	05	75	99%	82%	0.49%	89%
NOVISIT, NEVILLE	0	1	-		-			-	-	-	0%	0%	100%	67%	0.00%	100%
SMITH, JANE	27	20	90%	100%	74%	60%	1.17	12.91	2.08	0%	19%	28%	90%	74%	0.03%	20%
JOHNSON, JOHN	- 64	64	92%	65%	72%	80%	1.15	10.01	1.50	10%	54%	215	90%	77%	0.92%	80%
THERAPIST, TAWNY		0	84%	89%	80%	64%	1.19	24.00	1.67	-	60%	45%	92%	67%	0.00%	1
ONTIME, ONEIDA	33	58	92%	85%	34%	795	1.00	18.29	3.29	39%	33%	305	90%	74%	2.21%	100%
				0.00	0.04/	674	1.68	18 03	6.44	0%	11%	16%	955	60%	0.42%	87%
BUSY, BETTY	50	41	845	10.74	04.94											
BUSY, BETTY CARINO, CATHY * Overall HHIC (Home Health C ** Scores show % of Critical (I) Report User Oscie	50 21 ompare) Score , Potential (-), an	41 25 ampost of Inform	erduder notuder	100% 100% 60-Day AC SHP Alerts	71% 71% Hit HHC Pe that have b	AD'S.	123 ures, HHC O (Resolved, R	20.23 Utomes & Ferro	2.63 EICAIPS Ing Danie	17% Quality Me serii)	27% Mutes	43% Indicates Percentil	sers) insufficient of a Ranking	füith ata for valid i	0 eons	785
BUSY, BETTY CARINO, CATHY * Overall HIC (Home Health C * Scores show % of Critical (f) Report User Outle	50 21 ompane) Soore Potential (-), at	41 25 composite of Inform	enduder notider	100% 50-Day AC SHP Alerts	71% 71% Put Nave b	A0%	1.23 ures, HHC O (Resolved, R	28.23 Utcomes & I Incolve Perc	2.63 HICANPS Sing Dania 10.30%	17% Quality Me seri): 20%-40	27% Moutes Your Ma	42% Indicates Percentil 40-00	Ranking S	eans ata for valid r 60.60%	0.40%	29%

Scorecard

Grouping: Staff Performance

Required Access Level:

Standard

Description: This report can be used to review total admissions and discharges, top 5 primary diagnosis categories, SHP usage, financial performance, outcomes, process measures, potentially avoidable events, visit utilization and HHCAHPS performance for a specific clinician at your agency compared to your agency, SHP State (by discipline) and SHP National (by discipline) benchmarks.

Drill Down: In the "Outcome Measures" and "Process Measures" sections, click on the links in the "SOC Clinician" or "Your Agency" sections to drill down to the "Patient Detail Reports" and see all patients that contributed to the measure you are reviewing. In the "Outcomes Patient Detail Report", the "Report Mode" can be changed to view eligible unimproved, improved, stabilized, declined, or all patients.

- **Parameters:** Date Range, Date Type (choose from a number of individuals, teams, providers which can be selected) Clinical Payer Type, Financial Payer Type, Process Measure Inclusion Options, OASIS Episode Inclusion Options. You will also have the opportunity to choose your clinicians from Clinician SOC/ROC (Clinical scores will be attributed to the SOC/ROC clinician) or Clinician Current (Clinical Scores will be attributed to the Discharge/Transfer clinician). If multiple clinicians are selected they will be grouped together in the report.
- **Layout:** "Use Recommended" will automatically toggle between either the "Staff & Agency", or the "Patient Source" layout options, depending upon which of the Data Type parameter you select. The "Staff & Agency" layout will identify both positive results and opportunities for performance improvement for your organization in key metrics, and will feature important information regarding the management of SHP Alerts. The "Patient Source" layout will highlight your organization's payer mix, along with a more in-depth look at your hospitalization rates (this layout is preferred when run for a Referral Source). The "Patient Source" layout will not highlight areas where declines occurred for Outcomes.
- **Clinician Mapping:** If duplicate clinician names are shown in the list of clinicians, utilize the "Clinician Mapping" tool on the "Admin" page to merge duplicate records.

User Guide: Yes





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Ambulation	Inprovements - Aduat		13	25%	13.225	72.42%	71.54%	72.20%	71.54%	77.39%	72,515
	Decines		mark 1	89%	1.67%	2.27%	1.21%	2115	2.19%	0.65%	1.627
÷	Improvemente - Risk Argusted		#5	176	85.12%						
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betring.	Improvements - Artus		1 28	46%	28.44%	75.02%	67.47%	73.70%	75.17%	75.0TN	75.125
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¢	Improvements - Plak Aclianted	*	and The	42%	73.495						
Park Interfactive	p Improvements - Artuel	•	200. 74	115	74.81%	7437%	71.39%	73.86%	73.58%	73.57%	73.841
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	Declines		m 2	1974	2.68%	4.79%	3.80%	4.82%	3.50%	2.37%	3.547
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Surgical Wed	Improvements - Actual	•	Must 93	28%	83.29%	92.42%	62.54%	92.58%	80.77%	90.00%	96.675
_	Decknes		mo	32%	0.32%	1.09%	1.95	0.83%	0.612	0.48%	0.631
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lpecific Carla I		•	mile #5	28%	85.28%	85.27%	82.28%	54.31%	88.12%	43.67%	85.755
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