



# Real-Time Home Health Compare Report

## Quick Reference Guide V2.16

### General Overview

SHP Real-Time Home Health Compare		Unpublished Date Range Selected	
Superior Home Health		Report Date: 10/20/23	
<b>Missing Daily Activities</b> JCTWP - Vis 472-492 CMS 472-492			
1. Improved in Activities	64.2%	69.5%	67.7%
2. Improved in Bed Transferring	58.1%	62.1%	58.2%
3. Improved in Walking	69.8%	64.1%	67.0%
<b>Missing Pain and Treating Symptoms</b> JCTWP - Vis 472-492 CMS 472-492			
4. Pain Assessment Conducted	100.0%	100.0%	100.0%
5. Pain Medication in Short Term ROC	88.2%	100.0%	88.2%
6. Improved in Pain-Interfering with Ability	67.2%	67.1%	68.8%
7. Head/Pain/Body Addressed in Short Term ROC	100.0%	100.0%	100.0%
8. Improved in Diaper	71.8%	69.1%	70.2%
<b>Treating Wounds/Preventing Pressure Sores</b> JCTWP - Vis 472-492 CMS 472-492			
9. Improvement in Relief of Sore/Pressure	84.2%	89.1%	84.1%
10. Free Lb. Red Areas Conducted	100.0%	100.0%	100.0%
11. Free Lb. Prevention in ROC	100.0%	100.0%	100.0%
12. Free Lb. Prevention in Short Term ROC	100.0%	100.0%	100.0%
<b>Preventing Falls</b> JCTWP - Vis 472-492 CMS 472-492			
13. Train Individual on Care	75.8%	81.1%	75.8%
14. Drug/Alcohol AB Use in Short Term ROC	88.8%	89.1%	88.8%
15. Improved in Management of Oral Meds	61.8%	69.1%	61.1%
16. Fall Risk Assessment Conducted	88.7%	89.1%	88.7%
17. Depression Assessment Conducted	100.0%	100.0%	100.0%
18. Flu Vaccine Received - Current Season	75.8%	79.1%	75.8%
19. HPI Received - Fall	75.7%	79.1%	75.7%
20. Checked Post-Care in Short Term ROC	100.0%	100.0%	100.0%
<b>Preventing Unplanned Hospital Care</b> ROC - Vis 472-492 CMS 472-492 CMS 472-492			
21. Managed Care without Hospitalization** (30 Day)	13.2%	13.2%	13.2%
22. Hospitalization*	13.2%	13.2%	13.2%
<b>HHCAHPS</b> HHCAHPS - Vis 472-492 CMS 472-492			
23. Complete 1: Care of Problems	64.2%	69.1%	67.7%
24. Complete 2: Communication	62.4%	67.1%	63.2%
25. Complete 3: Health Care Issues	61.0%	69.1%	61.8%
26. Complete 4: Staff Care Issues	61.0%	69.1%	61.8%
27. Complete 5: Who Refers Agency to or from	61.0%	69.1%	61.8%
28. Complete 6: Who Refers Agency to or from	61.0%	69.1%	61.8%

The intent of this report is to provide a real-time preview of what will be published for your agency on the CMS Home Health Compare website. Over the years the publicly reported data has grown in complexity and this report has evolved with it. With the introduction of Process Measures, HHCAHPS, and the 60-Day Hospitalization measure there is now an array of metrics published by CMS that are reported based on slightly different time points and criteria.

To accommodate the complexity of the public data while making the report as easy as possible to use, SHP has preconfigured all reporting parameters to always default in a way that will provide the most accurate prediction possible of what your HHC scores will be in the next CMS publication cycle. Of course, the report also supports a high degree of customization so that power users can take advantage of SHPs advanced parameterization options.

In addition to the default report parameters, this report groups and organizes the measures to match the formatting used by CMS on the Home Health Compare website.

Probably the most important new feature in this report is the inclusion of the new 60-Day Hospitalization measure, with an SHP Predicted score. No one else in the industry is able to provide this type of reporting. Another new feature is the inclusion of actual Home Health Compare reported data, allowing you to see what your public scores are directly from the report without having to go to the Home Health Compare website. This also means you can now access historical HHC data that is no longer even available on Home Health Compare. There are a host of other behind-the-scenes data analysis enhancements that make this report the most accurate HHC predictor available.

### Report Enhancements

- **Addition of the 60-Day Hospitalization measure with a proprietary SHP Projected score**  
Because OASIS data does not reflect all 60-day hospitalization occurrences, SHP has created an algorithm to calculate a "Projected" score based on OASIS data that has been adjusted to provide greater reporting accuracy.
- **Inclusion of actual Home Health Compare scores for quick reference**  
This report includes CMS publicly reported data for comparison purposes. If the report is run for date ranges that do not match CMS reported periods, the CMS periods shown are based on the end date of your selected date ranges. Even when using the preset CMS publication dates, there are situations where not all measures are available in the CMS data for all periods (new measures do not exist in old data). For this reason, each type of measure will use a 'CMS best fit' when data is not available for the specific date range you have selected. Different 'CMS best fit' periods can be used on the same report, but the date ranges for the CMS data used is always specified in the section headers.  
  
Note that the **60-Day Emergent Care without Hospitalization** measure cannot be calculated from OASIS data. The only data available for this measure is the data published by CMS which is included on the report.
- **Ability to individually parameterize sections by date to ensure that all measures are in synch with CMS publication cycles**
- **Parameter defaults that are preconfigured to always show your scores for the upcoming CMS publication cycle with the highest degree of accuracy possible**

## Parameter Overview

### Provider Selection

This parameter is available to users with access to more than one provider. It allows the report to be run for any level of their organization or any group of available providers.

Enterprise  Demonstration and Test Accounts

### Date Range Selection

Since the intent of the report is to present data that reflects the upcoming CMS reporting period, the date range selection control, by default, presents the available options in the context of 'CMS Reporting Periods'. It is necessary to do this since the data that CMS publishes on the Home Health Compare website each quarter contains a rolling 12 months of data for each measure but the start and end points for this data varies by measure. For example, HHCAHPS and the 60-Day Utilization Outcomes data are staggered back three months behind the Functional Outcomes and Process Measures because there is a longer data collection cycle for these measures.

The default selection is always the upcoming Home Health Compare release, the period that CMS has not yet published. Two future periods and all past periods are always available via this selector.

**CMS Reporting Period**  
Note: SHP recommends selecting one of the Home Health Compare publication dates. This will ensure that the report constrains all measures to match the data published by CMS.

Date Expected: 10/2013

Override CMS Reporting Period dates with custom settings

To select date ranges that do not conform with a CMS Reporting Period, for example, a single month, simply click the box 'Override CMS Reporting Period dates with custom settings' and the advanced date selection options will become accessible. From here, each of the three measure groups can be parameterized for any date range.

SHP recommends selecting date ranges ending at least two months in the past for the Utilization Outcomes and the HHCAHPS Sample Months. This is because, to be included in the hospitalization measure, a patient must have been admitted at least 60 days before the present date. As for HHCAHPS, survey data is displayed by sample month and it can take two months for SHP to have a sufficient number of returned surveys from any given sample month.

**CMS Reporting Period**  
Note: SHP recommends selecting one of the Home Health Compare publication dates. This will ensure that the report constrains all measures to match the data published by CMS.

Date Expected: 10/2013

Override CMS Reporting Period dates with custom settings

Outcomes & Process Measures (DC/TRF Date)	From	07-2012 <input type="button" value="v"/>	To	06-2013 <input type="button" value="v"/>
Utilization Outcomes (SOC Date)	From	05-2012 <input type="button" value="v"/>	To	04-2013 <input type="button" value="v"/>
HHCAHPS Sample Months	From	05-2012 <input type="button" value="v"/>	To	04-2013 <input type="button" value="v"/>

### 60-Day Hospitalization Data and Payer Type Inclusion

This measure is calculated using OASIS data, however, the accuracy of the measure can be improved if the 'Require claims' box is checked. By requiring claims we are able to reference the 837 claim data and identify LUPAs which are excluded from the calculation. When claims are required (as they are by default), the Payer Type dropdown is grayed out and Medicare Traditional is selected. This matches the way CMS parameterizes the data for this measure.

The 'Require claims' box is optional so that agencies that do not transmit all claim files to SHP can still benefit from this measure, even though LUPAs will be included thereby decreasing the accuracy of the measure slightly. When the 'Require claims' box is unchecked, the standard payer type options are available.

#### 60-Day Hospitalization Data and Payer Type Inclusion

Note: When claims are required (recommended), only Medicare Traditional is available.

Require claims

Medicare Traditional ▼

### Payer Type

All measures other than 60-Day Hospitalization can be parameterized by any one of the standard payer type selection options via this parameter.

#### Payer Type

Medi-Medi ▼

### Process Measure Inclusion Options

By default, this parameter is set to include 'Complete Episodes' only to match the CMS inclusion criteria for Process Measure reporting. Since it is possible to calculate many Process Measures on incomplete episodes, this parameter has been made available.

#### Process Measure Inclusion Options

Note: Some Process Measures can be calculated on incomplete episodes, please specify which episodes to include. The CMS reports will only include completed episodes.

Complete Episodes ▼

### Group or Batch


Users with access to multiple providers have the option to run their report in either the group or batch mode. Group mode rolls the data up into one aggregate report combining the data for all selected providers. Batch mode runs a separate report for each of the selected providers but makes them available in one file.

#### Group or Batch

Note: When run for a large batch of providers, the report may run for up to 30 minutes.

Group ▼

## Report Data Key

1		2		3		4		5		6		7		8		9		10		11	
<b>Managing Daily Activities</b> DC/TRF - You/SHP: 04/12-04/12 CMS: 07/11-06/12				<b>You</b>		<b>CM</b>		<b>Risk</b>		<b>State (CA)</b>		<b>National</b>				<b>Your % Rank</b>					
				Actual		S		Adj		CMS		SHP		CMS		SHP		CMS		SHP	
1 Improvement in Ambulation 				61.2%		60%		60.6%		58%		63.6%		56%		62.1%		89%		64%	

- Measure Groups & Measure Names** - Measures are grouped and ordered into the same categories used by CMS on the Home Health Compare website.

**Date Ranges** - The dates shown in the section headers indicate the dates of the data shown in the report. Note that the 'You' dates and the 'CMS' dates do not always match. This is because the CMS data is only made publicly available in rolling 12 month periods that are published quarterly. When run for a date range that does not exactly match a published CMS period, the report uses a 'best-fit' CMS period based on the end date of the selected date range for that measure group.

Note that the date ranges also indicate which time point the date range is based on, in the example shown here, the measures in this category are based on DC and TRF date. Both date ranges can vary section by section depending on how the report is configured, the report adjusts the CMS data automatically to best match the selected date range for each section.

- Measure Type Icon** - All Outcomes (O) and Process Measures (PM) have their measure type indicated with an icon.
- You Actual** - Your actual scores using CMS methodology. Note these numbers drill down to the corresponding Patient Detail or Survey Summary report where you can see exactly which patients adversely impacted your score.
- You CMS** - Your actual published CMS Home Health Compare scores. These scores are shown in black when all report parameters match those used by CMS *and* the CMS published data matches your selected dates. They are shown in gray italics when CMS "best-fit" data is used. When run with default settings, these will be in gray italics because the report defaults to run for the next future CMS period. This will also be noted in the CMS date ranges in each section header.
- You Risk Adjusted/Projected** - Your Outcomes scores calculated using the latest CMS risk adjustment model. Note that Process Measures are not risk adjusted.

The 60-Day Emergent Care without Hospitalization measure cannot be calculated from OASIS data and has no available risk adjustment model. The only data available for this measure is the data published by CMS.

The 60-Day Hospitalization measure includes a Projected rather than a Risk Adjusted score. Unlike CMS, SHP uses a mix of OASIS and home health claim data to calculate the hospitalization measure. It is necessary to do so because SHP does not have access to hospital claims. Consequently, SHP is unable to directly apply the risk adjustment calculation used by CMS. In its place, SHP developed a proprietary projected score that can be used to forecast your future results on Home Health Compare.

To ensure accuracy, projected scores are not calculated unless there are at least 40 episodes in the SHP database prior to the selected reporting period and 40 episodes in the selected reporting period.

- State CMS** - The actual published CMS Home Health Compare benchmark scores for your state. Note that the same logic described in the 'You CMS' details applies to the gray/italicized behavior used for these scores. When the report is run for a selection of providers that spans multiple states, this column will be blank.
- State SHP** - The SHP benchmark scores for your state. When the report is run for a selection of providers that spans multiple states, this column will be blank.
- National CMS** - The actual published CMS Home Health Compare national benchmark. Note that the same logic described in the 'You CMS' details applies to the gray/italicized behavior used for these scores.

9. **National SHP** - The SHP national benchmark scores.
10. **Your % Rank CMS** - Your CMS scores ranked against the entire CMS Home Health Compare database. Note, these percentile ranked scores are not available through the Home Health Compare website. These scores are color coded to help you see at a glance which measures you are ranking well in and where you are ranking poorly.
11. **Your % Rank SHP** - Your SHP scores ranked against the entire SHP database. Risk Adjusted/Projected scores are used for the percentile ranking when applicable. These scores are color coded to help you see at a glance which measures you are ranking well in and where you are ranking poorly.

For more information please contact SHP Support at:  
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