



STRATEGIC HEALTHCARE PROGRAMS

SHP FOR AGENCIES

102: Reporting and Performance Improvement



Zeb Clayton
Vice President of Client Services



Technical Tips

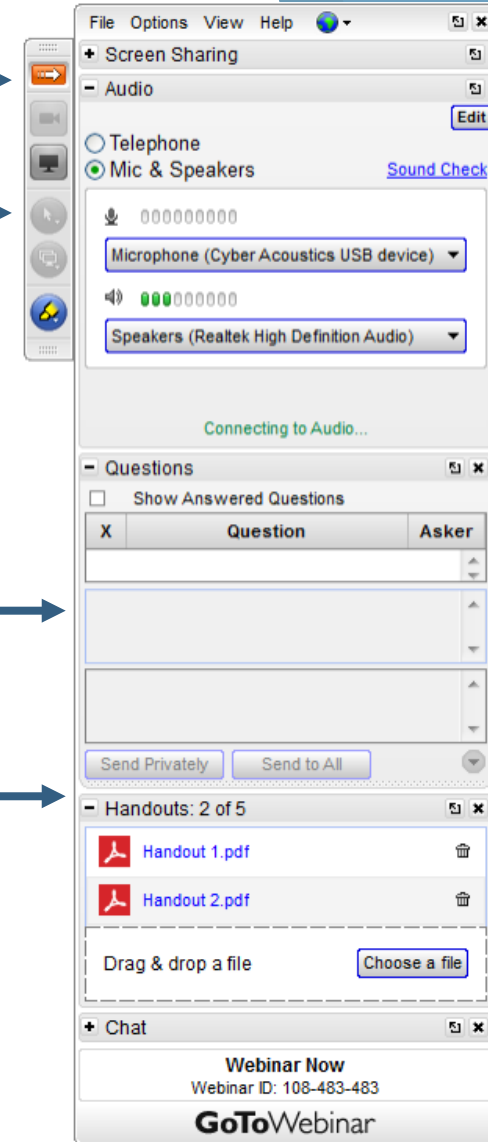
Click the red arrow on the upper left to hide the GoToWebinar control panel

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Make sure the volume on your speakers or phone is turned up as high as necessary
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All presentations are recorded, so if you have technical problems, all is not lost!

Agenda

102: Reporting and Performance Improvement

- ▶ Reporting Basics
- ▶ SHP Dashboard
- ▶ Report Review
 - Clinical Performance
 - Home Health Compare 360°
 - Improvement Outcomes
 - Process Measures
 - Potentially Avoidable Events
 - Hospital Utilization
 - Financial Reporting
 - Scorecards
- ▶ SHP Report Review Accountabilities and Responsibilities

Reporting Basics

Reporting Basics

▶ Standard Benchmarking Reports

- ✓ Static
- ✓ Can't be customized
- ✓ Not available on-demand
- ✓ Not real-time



▶ SHP Benchmarking Reports

- ✓ On-demand
- ✓ Real-time
- ✓ Custom parameters
- ✓ Dynamic drill-downs



Reports Menu

Each Report is Categorized:

REPORTS

- ▶ My Recent Reports
 - Survey Administration (HCAHPS)
 - Home Health Compare (Agencies)
 - Clinical Executive Advantage (Agencies)
 - Scores & Benchmarks (HCAHPS)
 - HHC Enterprise Overview (Agencies)
 - Scorecard (Agencies)
 - Scorecard Overview (Agencies)
 - 60-Day Acute Care Hospitalization Trended (Agencies)
 - Survey Results Data Export (HCAHPS)
 - Star Ratings Preview - Quality of Patient Care (Agencies)

REPORTS

- ▶ My Recent Reports
- ▼ Agencies
 - ▼ Clinical Performance
 - Home Health Compare
 - Home Health Compare Percentile Reference
 - Star Ratings Preview - Quality of Patient Care
 - Clinical Executive Advantage
 - Outcomes Trended
 - Outcomes Patient Detail
 - Process Measure Overview
 - Process Measures Patient Detail
 - Potentially Avoidable Events Overview
 - Potentially Avoidable Events Patient Detail

REPORTS

- ▶ My Recent Reports
- ▼ Agencies
 - ▶ Clinical Performance
 - ▼ Hospital Utilization
 - Rehospitalization
 - Hospitalization and Emergent Care
 - Rehospitalization Patient Detail
 - 60-Day Hospitalization Patient Detail

REPORTS

- ▶ My Recent Reports
- ▼ Agencies
 - ▶ Clinical Performance
 - ▶ Hospital Utilization
 - ▼ Financial/Operational
 - Financial Executive Advantage
 - Financial Patient Detail
 - SHPAAlert™ Financial Impact Overview
 - SHPAAlert™ Financial Detail
 - Visit Utilization by Diagnosis and HHRG
 - Case Mix Distribution
 - Case Weight Map
 - Direct Cost Per Visit

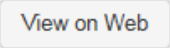
REPORTS

- ▶ My Recent Reports
- ▼ Agencies
 - ▶ Clinical Performance
 - ▶ Hospital Utilization
 - ▶ Financial/Operational
 - ▼ Scorecards
 - Scorecard Overview
 - Scorecard
 - ▶ Custom



Note: Financial features such as HHRG Worksheets and financial reports require a “Financial” role on your SHP login. Contact your internal “SHP Administrator” to have that role added to your login.

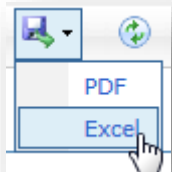
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Last Login:	7/7/2011
Phone:	(314) 989-2541
Job Title:	Branch Manager
Pwd Expires:	10/13/2011
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<input type="checkbox"/>	Can View Enterprise Reports
<input checked="" type="checkbox"/>	Can View Financial Reports

How to Run Reports

- ▶ From the Reports menu, select the report you wish to run
- ▶ Set your parameters
- ▶ Click  and the report will open in a new window
- ▶ Drill-down to patient detail or export to a file as desired
 - ▷ To drill-down, click on any number in the report that has blue text

Your Overall Star Rating		Quality of Patient Care: ★★★★★								
Managing Daily Activities DC/TRF - You/SHP: 1/15 - 12/15 CMS: 10/14 - 9/15		You			State (AZ)		National		Your % Rank	
		Actual	CMS	Risk Adj	CMS	SHP	CMS	SHP	CMS	SHP
Improvement in Ambulation	★★★★★	81.8%	70.9%	73.4%	60.3%	67.7%	65.2%	70.2%	78.1%	82.8%
Improvement in Bed Transferring	★★★★★	78.3%	68.8%	72.4%	57.9%	61.8%	60.8%	66.5%	81.6%	87.7%
Improvement in Bathing	★★★★★	84.2%	78.7%	79.5%	68.5%	70.6%	69.7%	73.2%	83.4%	82.0%

- ▷ To navigate back to the parent report, click the  icon in the header.
- ▷ To export to a file, click the  icon, then select the appropriate format



Report User Guides

- ▶ Many reports have **User Guides** that can be found on SHP University™.
- ▶ Download the **Comprehensive Report Catalog** from **SHP University → Links & Resources → Report User Guides** for a thorough review of every report

SHP
SHP UNIVERSITY :: Links and Resources

DASHBOARD
APPLICATIONS
REPORTS
SEND DATA
ADMIN TOOLS
SHP University™
→ Classes & Manuals
→ Winning Wednesday Webinars™
→ Links & Resources
SUPPORT

Links & Resources

SHP Documents and User Guides

Application User Guides

- [SHP Secure Website](#)
- [Alert Manager 2.0.2](#)
- [SHP User Manager](#)
- [Dashboard \(beta\) User Guide](#)
- [Hospice FAQ: Supporting the Hospice Item Set \(HIS\)](#)
- [Survey Sample Review Quick Reference Guide](#)

Report User Guides

- [Comprehensive Report Catalog](#)
- [Scorecard Overview and Scorecard Report Suite](#)
- [Real-Time HQRP Executive Advantage](#)
- [Home Health Compare](#)
- [Real-Time Star Rating Preview](#)
- [Rehospitalization](#)
- [Hospitalization and Emergent Care](#)
- [Rehospitalization Patient Detail](#)
- [Visit Utilization by Diagnosis and HHRG](#)
- [Case Mix Distribution](#)
- [Patient Satisfaction Comments Review](#)

Hierarchical Reporting

Provider Selection

Note: List contains all available providers with the applicable product.

Enterprise Superior Outcomes Home Health

Division East Division

CMS Reporting Period
Note: SHP recommends selecting ensure that the report constrains a

- East Division
- North Division
- South Division
- West Division

Region Division 1

CMS Reporting Period
Note: SHP recommends selecting ensure that the report constrains a

Date Expected: 07/2016

- Division 1
- Division 2
- Division 3
- Division 4
- Division 5

CCN (999991) Superior Outcomes - Ventura

CMS Reporting Period
Note: SHP recommends selecting ensure that the report constrains a

Date Expected: 07/2016

- (999991) Superior Outcomes - Ventura
- (999992) Superior Outcomes - Oxnard
- (999993) Superior Outcomes - Santa Barbara
- (999994) Superior Outcomes - Los Angeles
- (999995) Superior Outcomes - San Diego

Provider (999991) Superior Outcomes - Ventura

OASIS Accuracy

The Foundation:

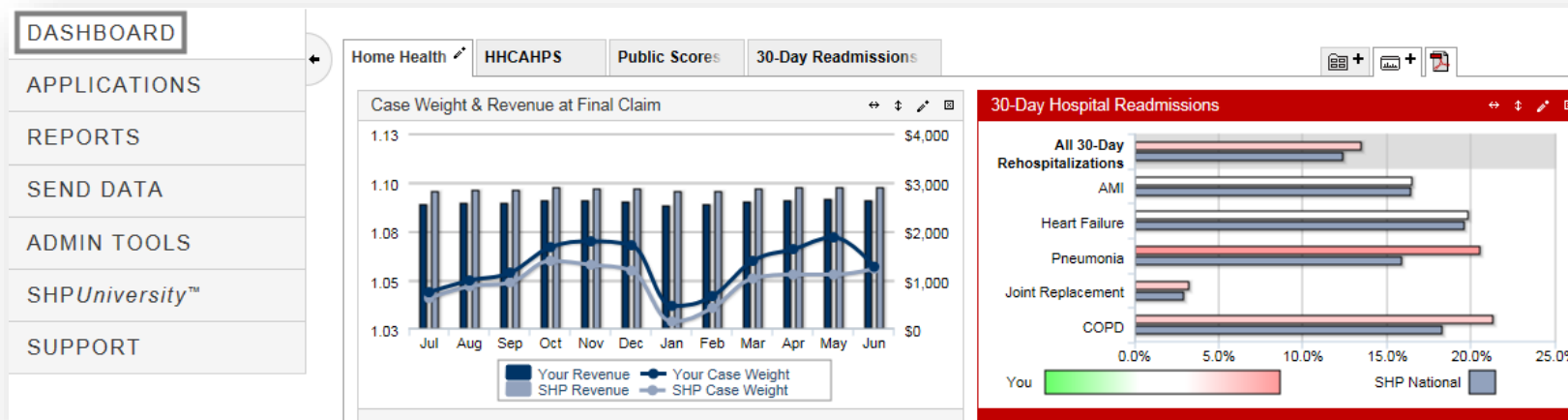
- ▶ Before starting any performance improvement initiatives
 - ▷ Ensure that SHP alerts are being addressed in a timely manner
 - ▷ Ensure that OASIS assessments correctly and accurately reflect your patient's condition
- ▶ When your data is clean, then your performance improvement efforts will have the **maximum** effect



SHP Dashboard

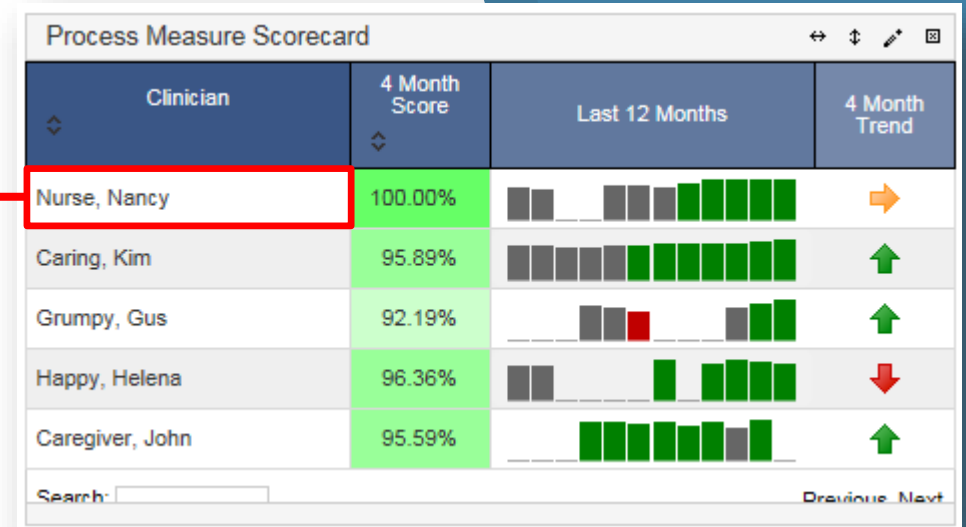
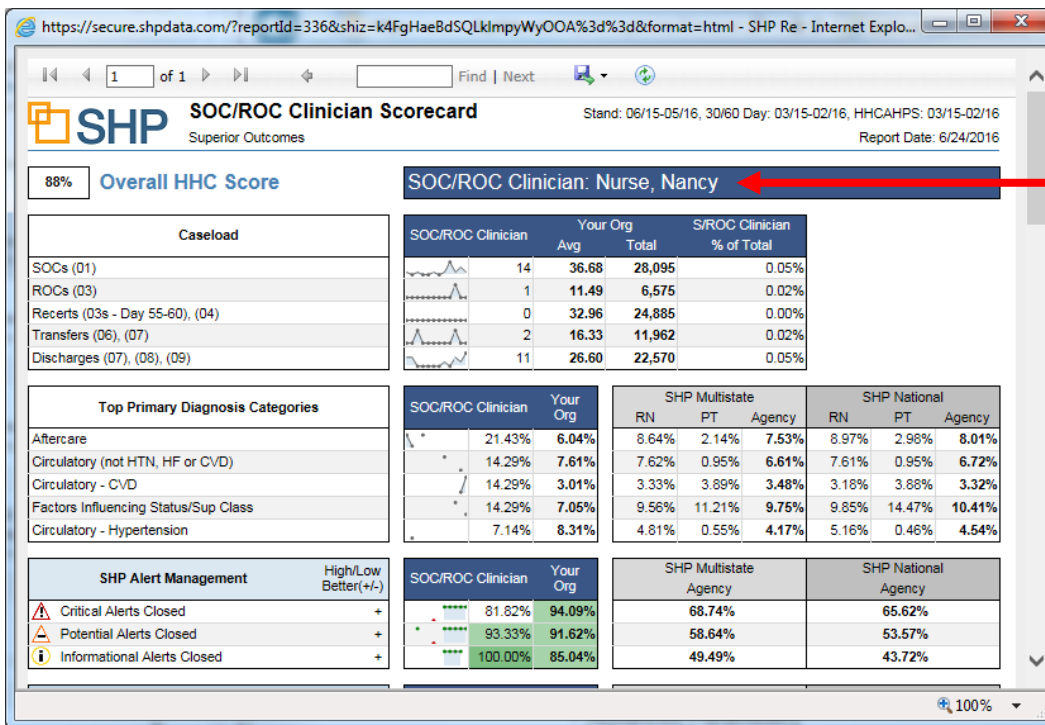
What is the SHP Dashboard?

- ▶ The SHP Dashboard helps you to:
 - ▷ Monitor performance across all of your business lines
 - ▷ Be notified immediately of issues by “alert thresholds”
 - ▷ Drill-down to detail reports once a problem is identified
 - ▷ Drag-and-drop tabs and widgets, this is your dashboard
 - ▷ View your most recent data, all measures are real-time
- ▶ Access this tool by clicking the **Dashboard** section of the left-hand navigation bar:



The Dashboard: Your Portal to SHP Reports

- ▶ From any widget, click on the data point you want to drill-down on
- ▶ The example below shows how you can click on a clinician name and drill-down directly to the Clinician Scorecard



How to Learn More

View Our Recorded Training Webinar

- ▶ Log into your SHP account.
- ▶ Click on “SHP University” → “Winning Wednesday Webinars”
- ▶ Scroll down until you find the webinar entitled “Using the New SHP Solutions Dashboard”

DASHBOARD
APPLICATIONS
REPORTS
SEND DATA
ADMIN TOOLS
SHP <i>University</i> ™
→ Classes & Manuals
→ Winning Wednesday Webinars™
→ Links & Resources
SUPPORT

Using the New SHP Solutions™ Dashboard

Wednesday, April 17, 2013 | 11:00 AM Pacific

Achieve, sustain and accelerate exceptional clinical, operational, financial and patient satisfaction performance.



Downloads:

[Handouts](#)
[Dashboard User Guide](#)
[Q&A](#)

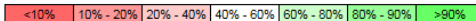
Clinical Performance

Home Health Compare & Clinical Executive Advantage

- ▶ Real-Time Star Ratings
- ▶ ALL HHC Outcomes
- ▶ ALL HHC Process Measures
- ▶ 30 and 60-day Hospitalizations
- ▶ ALL HHC HCAHPS Measures

Clinical Executive Advantage									
Superior Outcomes Home Health									
Standard: 06/01/2015 - 05/31/2016, Offset: 03/01/2015 - 02/29/2016									
Report Date: 6/28/2016									
Outcome: Bed Transferring									
	Eligible	#	%	Risk Adjusted	Eligible	#	%	Your % Ranking	
Division	4,467	3,378	75.6%	64.5%	4,501	56	1.2%	71%	53%
SHP National Database			69.6%				1.7%		
Superior Outcomes - Indianapolis	719	519	72.2%	62.0%	713	9	1.3%	62%	41%
Division (IN)	719	519	72.2%	62.0%	713	9	1.3%	62%	41%
SHP Database (IN)			67.9%				2.1%		
Superior Outcomes - Cleveland	714	414	58.0%	68.4%	718	11	1.5%	27%	72%
Superior Outcomes - Columbus	637	516	81.0%	63.4%	634	11	1.7%	85%	48%
Superior Outcomes - Portsmouth	229	183	79.9%	58.8%	227	3	1.3%	82%	27%
Division (OH)	1,580	1,113	70.4%	65.0%	1,579	25	1.6%	57%	56%
SHP Database (OH)			67.6%				1.8%		
Superior Outcomes - Pittsburgh	983	839	85.4%	64.6%	995	5	0.5%	92%	54%
Superior Outcomes - York	423	258	61.0%	63.9%	446	10	2.2%	33%	50%
Division (PA)	1,406	1,097	78.0%	64.4%	1,441	15	1.0%	77%	53%
SHP Database (PA)			70.9%				1.4%		
Superior Outcomes - Roanoke	480	423	88.1%	67.9%	482	5	1.0%	95%	69%
Superior Outcomes - Suffolk	282	226	80.1%	63.1%	286	2	0.7%	83%	46%
Division (VA)	762	649	85.2%	66.1%	788	7	0.9%	92%	61%
SHP Database (VA)			70.7%				1.5%		

Measure used in Home Health Compare Star Ratings



SHP Real-Time Home Health Compare										
Superior Outcomes Home Health										
HHC Publication Date: 04/2016										
Report Date: 6/28/2016										
Your Overall Star Rating					Quality of Patient Care: ★★★★★					
Managing Daily Activities										
DC/TRF - You/SHP: 10/14 - 9/15 CMS: 10/14 - 9/15										
Improvement in Ambulation	★★★★★	75.3%	68.4%	65.9%	64.5%	68.2%	65.2%	69.0%	70.5%	48.6%
Improvement in Bed Transferring	★★★★★	63.9%	64.0%	62.6%	62.4%	63.7%	60.8%	64.7%	68.9%	54.9%
Improvement in Bathing	★★★★★	76.7%	77.6%	77.6%	68.7%	73.1%	69.7%	72.1%	81.2%	79.0%
Managing Pain and Treating Symptoms										
DC/TRF - You/SHP: 10/14 - 9/15 CMS: 10/14 - 9/15										
Pain Assessment Conducted	100.0%	100.0%		98.6%	99.2%	98.9%	99.1%		99.0%	99.0%
Pain Interventions	99.9%	99.9%		97.9%	98.5%	98.8%	99.0%		56.8%	70.8%
Improvement in Pain	★★★	68.9%	67.5%	67.3%	69.4%	70.1%	69.2%	69.9%	50.0%	43.4%
Heart Failure Symp Addressed	100.0%	100.0%		100.0%	100.0%	98.0%	98.0%		99.0%	99.0%
Improvement in Dyspnea	★★★	74.1%	66.1%	65.9%	68.1%	70.6%	68.1%	71.5%	49.2%	31.4%
Treating Wounds/Preventing Pressure Sores										
DC/TRF - You/SHP: 10/14 - 9/15 CMS: 10/14 - 9/15										
Improvement in Status of Surgical Wounds	93.4%	95.7%	95.4%	89.9%	89.2%	89.6%	89.9%		78.5%	76.0%
Pres Ulc Risk Assess Conducted	99.9%	99.9%		98.4%	99.1%	98.7%	99.3%		71.5%	69.0%
Pres Ulc Prevention in POC	99.4%	99.4%		97.5%	97.9%	98.1%	98.2%		43.6%	47.5%
Pres Ulc Prevention	99.6%	99.6%		96.5%	97.4%	97.4%	97.8%		60.9%	69.2%
Preventing Harm										
DC/TRF - You/SHP: 10/14 - 9/15 CMS: 10/14 - 9/15										
Timely Initiation of Care	94.4%	94.4%		91.1%	93.5%	92.0%	92.3%		56.9%	49.5%
Drug Education All Meds	98.9%	98.0%		95.2%	96.3%	95.1%	95.7%		74.5%	72.5%
Improvement in Mgmt of Oral Meds	68.3%	62.5%	62.9%	55.0%	59.4%	54.9%	58.7%		81.3%	76.6%
Fall Risk Assessment Conducted	98.7%	98.7%		99.0%	98.9%	98.8%	98.7%		21.0%	19.1%
Depression Assessment Conducted	99.3%	99.2%		97.5%	98.6%	97.9%	98.3%		53.3%	55.2%
Flu Vaccine Received	82.3%	82.5%		71.7%	76.0%	69.9%	73.6%		81.3%	74.2%
PPV Received	88.4%	89.5%		75.0%	80.3%	72.0%	76.1%		86.3%	83.7%
Diabetic Foot Care & Education	99.4%	99.4%		94.7%	96.0%	95.7%	96.2%		69.5%	76.5%
Preventing Unplanned Hospital Care										
SOC - You/SHP: 7/14 - 6/15										
CMS EC: 7/14 - 6/15 CMS Hosp: 7/14 - 6/15										
Note: In this section, lower scores are better.										
30-Day Rehospitalizations	13.2%			12.7%		12.6%				44.6%
60-Day Hospitalizations	14.0%	15.5%	14.7%	16.2%	16.6%	16.0%	15.8%		49.6%	70.8%
30-Day EC without Hospitalizations										
60-Day EC without Hospitalizations	9.4%			12.6%		12.3%				76.0%
HCAHPS										
Sample Months - You/SHP: 10/14 - 9/15 CMS: 10/14 - 9/15										
Care of Patients	88.6%	88.0%		88.0%	89.6%	88.0%	89.1%		44.8%	42.9%
Communications	87.0%	88.0%		85.0%	87.0%	85.0%	86.3%		68.9%	54.5%
Specific Care Issues	87.3%	85.0%		82.0%	86.0%	83.0%	85.6%		58.7%	63.1%
% who Rated Agency 9,10	83.8%	84.0%		85.0%	85.2%	84.0%	83.9%		46.5%	48.4%
% who would Recommend	78.4%	79.0%		79.0%	80.9%	79.0%	79.7%		46.8%	44.3%

Real-Time HHC

- ▶ Get **real-time** access to your HHC Star Ratings and measure scores months before they are posted
- ▶ Easily **target measures** for improvement using percentile rank shading
- ▶ **Drill-down** to patient detail from every section using the [blue](#) drill-down links
- ▶ **Compare** your agency to all 12,000+ providers in the nation

Best Practice: Focus your improvement efforts on the measures shaded **dark red** that are significantly below the SHP Benchmark

SHP Real-Time Home Health Compare		HHC Publication Date: 04/2016								
Superior Outcomes Home Health		Report Date: 6/26/2016								
Your Overall Star Rating		Quality of Patient Care: ★★☆☆☆								
Managing Daily Activities DC/TRF - You/SHP: 10/14 - 9/15 CMS: 10/14 - 9/15		You		State (IN)		National		Your % Rank		
		Actual	CMS	CMS	SHP	CMS	SHP	CMS	SHP	
Improvement in Ambulation	★★★★★	75.3%	68.4%	65.9%	64.5%	68.2%	65.2%	69.0%	70.5%	48.6%
Improvement in Bed Transferring	★★★★☆	63.9%	64.0%	62.6%	62.4%	63.7%	60.8%	64.7%	68.9%	54.9%
Improvement in Bathing	★★★★★	76.7%	77.6%	77.6%	68.7%	73.1%	69.7%	72.1%	81.2%	79.0%
Managing Pain and Treating Symptoms DC/TRF - You/SHP: 10/14 - 9/15 CMS: 10/14 - 9/15		You		State (IN)		National		Your % Rank		
		Actual	CMS	CMS	SHP	CMS	SHP	CMS	SHP	
Pain Assessment Conducted	PM	100.0%	100.0%		98.6%	99.2%	98.9%	99.1%	99.0%	99.0%
Pain Interventions	PM	99.9%	99.9%		97.9%	98.5%	98.8%	99.0%	56.8%	70.8%
Improvement in Pain	★★★☆☆	68.9%	67.5%	67.3%	69.4%	70.1%	69.2%	69.9%	50.0%	43.4%
Heart Failure Symp Addressed	PM	100.0%	100.0%		97.9%	98.1%	98.0%	98.0%	99.0%	99.0%
Improvement in Dyspnea	★★★☆☆	74.1%	66.1%	65.9%	68.1%	70.6%	68.1%	71.5%	49.2%	31.4%
Treating Wounds/Preventing Pressure Sores DC/TRF - You/SHP: 10/14 - 9/15 CMS: 10/14 - 9/15		You		State (IN)		National		Your % Rank		
		Actual	CMS	CMS	SHP	CMS	SHP	CMS	SHP	
Improvement in Status of Surgical Wounds	PM	93.4%	95.7%	95.4%	89.9%	89.2%	89.6%	89.9%	78.5%	76.0%
Pres Ulc Risk Assess Conducted	PM	99.9%	99.9%		98.4%	99.1%	98.7%	99.3%	71.5%	69.0%
Pres Ulc Prevention in POC	PM	99.4%	99.4%		97.5%	97.9%	98.1%	98.2%	43.6%	47.5%
Pres Ulc Prevention	PM	99.6%	99.6%		96.5%	97.4%	97.4%	97.8%	60.9%	69.2%
Preventing Harm DC/TRF - You/SHP: 10/14 - 9/15 CMS: 10/14 - 9/15		You		State (IN)		National		Your % Rank		
		Actual	CMS	CMS	SHP	CMS	SHP	CMS	SHP	
Timely Initiation of Care	PM	94.4%	94.4%		91.1%	93.5%	92.0%	92.3%	56.9%	49.5%
Drug Education All Meds	PM	98.9%	99.0%		95.2%	96.3%	95.1%	95.7%	74.5%	72.5%
Improvement in Mgmt of Oral Meds	PM	68.3%	62.5%	62.9%	55.0%	59.4%	54.9%	58.7%	81.3%	76.6%
Fall Risk Assessment Conducted	PM	98.7%	98.7%		99.0%	98.9%	98.8%	98.7%	21.0%	19.1%
Depression Assessment Conducted	PM	99.3%	99.2%		97.5%	98.6%	97.9%	98.3%	53.3%	55.2%
Flu Vaccine Received	PM	82.3%	82.5%		71.7%	76.0%	69.9%	73.6%	81.3%	74.2%
PPV Received	PM	89.4%	89.5%		75.0%	80.3%	72.0%	76.1%	86.3%	83.7%
Diabetic Foot Care & Education	PM	99.4%	99.4%		94.7%	96.0%	95.7%	96.2%	69.5%	76.5%
Preventing Unplanned Hospital Care SOC - You/SHP: 7/14 - 6/15 CMS EC: 7/14 - 6/15 CMS Hosp: 7/14 - 6/15		You		State (IN)		National		Your % Rank		
		Actual	CMS	Projected	CMS	SHP	CMS	SHP	CMS	SHP
30-Day Rehospitalizations	PM	13.2%			12.7%		12.6%			44.6%
60-Day Hospitalizations	PM	14.0%	15.5%	14.7%	16.2%	16.6%	16.0%	15.8%	49.6%	70.8%
30-Day EC without Hospitalizations	PM									
60-Day EC without Hospitalizations	PM		9.4%		12.6%		12.3%			76.0%
HHC/AHPS Sample Months - You/SHP: 10/14 - 9/15 CMS: 10/14 - 9/15		You		State (IN)		National		Your % Rank		
		Actual	CMS	CMS	SHP	CMS	SHP	CMS	SHP	
Care of Patients		88.6%	88.0%	88.0%	89.6%	88.0%	89.1%	88.0%	44.8%	42.9%
Communications		87.0%	88.0%	85.0%	87.0%	85.0%	86.3%	85.0%	68.9%	54.5%
Specific Care Issues		87.3%	85.0%	82.0%	86.0%	83.0%	85.6%	83.0%	58.7%	63.1%
% who Rated Agency 9,10		83.8%	84.0%	85.0%	85.2%	84.0%	83.9%	84.0%	46.5%	48.4%
% who would Recommend		78.4%	79.0%	79.0%	80.9%	79.0%	79.7%	79.0%	46.8%	44.3%

Advanced Filtering

- ▶ Use the **Advanced Filtering Options** box at the bottom of the Home Health Compare report parameter page to filter the report by Referral Source, Primary Payer Name or Prior Inpatient Facility

Advanced Filtering Options
 Note: Supports filtering results by Referral Source, Primary Payer Name, Prior Inpatient Facility or Custom Group. These options may need to be re-enabled and re-selected if changes are made to the Provider Selection, Reporting Dates, or Payer Type 1, after initial activation.

Enable advanced options

Referral Source | Primary Payer Name | Prior Inpatient Facility | Custom Group

Hold [Ctrl] or [Shift] to select/deselect multiple values (up to 100), data from multiple selected values will be grouped.

- (Not Assigned)
- JOHN DOE
- GENERAL HOSPITAL
- JANE DOE
- COMMUNITY HOSPITAL**
- CARING HOSPITAL
- UNCARING HOSPITAL
- CARING CLINIC
- DOCTOR AMAZING
- DOCTOR FANTASTIC
- SUNNY SMILES NURSING HOME
- FROWNY FRIDAYS NURSING HOME
- MEDIOCRE MONDAYS NURSING HOME

Real-Time Home Health Compare Unpublished Date Ranges Selected
Report Date: 11/11/2015

Superior Outcomes Home Health | Ref Src: COMMUNITY HOSPITAL

Your Overall Star Rating: ☆☆☆☆ Quality of Patient Care: ☆☆☆☆

Managing Daily Activities	You			State		National		Your % Rank	
	Actual	CMS	Risk Adj	CMS	SHP	CMS	SHP	CMS	SHP
DC/TRF - You/SHP: 7/14 - 6/15 CMS: 4/14 - 3/15	80.5%	-	70.7%	-	67.7%	63.5%	67.9%	-	81.6%
Improvement in Ambulation	☆☆☆☆								
Improvement in Bed Transferring	79.3%	-	67.7%	-	63.1%	58.9%	63.5%	-	81.6%
Improvement in Bathing	89.8%	-	81.4%	-	71.2%	68.5%	71.4%	-	90.7%

Managing Pain and Treating Symptoms	You			State		National		Your % Rank	
	Actual	CMS	Risk Adj	CMS	SHP	CMS	SHP	CMS	SHP
DC/TRF - You/SHP: 7/14 - 6/15 CMS: 4/14 - 3/15	99.6%	-		-	99.2%	98.8%	99.2%	-	51.6%
Pain Assessment Conducted	PN								
Pain Interventions	99.6%	-		-	98.8%	98.5%	98.8%	-	53.1%
Improvement in Pain	☆☆☆☆		82.5%	-	68.5%	68.0%	69.0%	-	91.3%
Heart Failure Symp Addressed	97.1%	-		-	97.7%	98.0%	97.9%	-	26.9%
Improvement in Dyspnea	☆☆☆☆		73.4%	-	70.1%	66.0%	70.4%	-	67.4%

Treating Wounds/Preventing Pressure Sores	You			State		National		Your % Rank	
	Actual	CMS	Risk Adj	CMS	SHP	CMS	SHP	CMS	SHP
DC/TRF - You/SHP: 7/14 - 6/15 CMS: 4/14 - 3/15	100.0%	-	100.0%	-	89.9%	89.4%	89.6%	-	99.0%
Improvement in Status of Surgical Wounds	OO								
Pres Ulc Risk Assess Conducted	PN			-	99.2%	98.7%	99.3%	-	99.0%
Pres Ulc Prevention in POC	PN			-	98.4%	97.8%	98.4%	-	99.0%
Pres Ulc Prevention	PN			-	97.3%	96.7%	97.5%	-	54.9%

Preventing Harm	You			State		National		Your % Rank	
	Actual	CMS	Risk Adj	CMS	SHP	CMS	SHP	CMS	SHP
DC/TRF - You/SHP: 7/14 - 6/15 CMS: 4/14 - 3/15									

Note: Ask your SHP Customer Manager if these fields are currently provided via the SHP interface with your EMR

Real-Time Star Rating Preview

- ▶ Use this report to see which measures have the most potential for improving your publicly reported Star Ratings on HHC
- ▶ Drill-down to patient detail for Outcomes and Process Measures to research poor scores

1 Initial Decile Rating		Process Measures			Outcome Measures					
High/Low Better (+/-)		Timely Initiation of Care	Drug Education All Meds	Flu Vaccine Received	Improvement in Ambulation	Improvement in Bed Trf	Improvement in Bathing	Improvement in Pain	Improvement in Dyspnea	60-Day Hospitalizations
		+	+	+	+	+	+	+	+	-
2	0.5	0.0-80.4	0.0-84.4	0.0-37.5	0.0-44.8	0.0-36.8	0.0-46.3	0.0-43.9	0.0-35.0	20.2-100.0
3	1.0	80.5-86.3	84.5-90.9	37.6-50.9	44.9-52.3	36.9-45.3	46.4-55.7	44.0-54.5	35.1-48.6	18.4-20.1
4	1.5	86.4-89.4	91.0-93.9	51.0-59.1	52.4-57.0	45.4-50.6	55.8-61.0	54.6-60.0	48.7-56.9	17.2-18.3
5	2.0	89.5-91.6	94.0-95.7	59.2-64.9	57.1-60.5	50.7-54.7	61.1-64.7	60.1-64.1	57.0-62.4	16.3-17.1
6	2.5	91.7-93.3	95.8-97.0	65.0-69.6	60.6-63.1	54.8-58.1	64.8-67.8	64.2-67.5	62.5-66.3	15.5-16.2
7	3.0	93.4-94.9	97.1-97.9	69.7-73.6	63.2-65.6	58.2-61.2	67.9-70.6	67.6-70.9	66.4-69.9	14.6-15.4
8	3.5	95.0-96.1	98.0-98.7	73.7-77.4	65.7-68.2	61.3-64.2	70.7-73.6	71.0-75.0	70.0-73.2	13.5-14.5
9	4.0	96.2-97.3	98.8-99.3	77.5-81.5	68.3-71.5	64.3-67.8	73.7-76.8	75.1-80.0	73.3-77.0	12.2-13.4
10	4.5	97.4-98.5	99.4-99.9	81.6-86.8	71.6-76.8	67.9-73.3	76.9-82.7	80.1-87.6	77.1-82.4	10.2-12.1
11	5.0	98.6-100.0	100.0-100.0	86.9-100.0	76.9-100.0	73.4-100.0	82.8-100.0	87.7-100.0	82.5-100.0	0.0-10.1
12	Your HHA Score	94.4	98.9	82.3	65.9	62.6	77.6	67.3	65.9	14.7
13	Your Initial Decile Rating	3.0	4.0	4.5	3.5	3.5	4.5	2.5	2.5	3.0
14	Your Number of Cases (N)	998	994	598	789	787	795	679	744	480
15	National (All HHA) Median	93.4	97.1	69.6	63.1	58.2	67.9	67.5	66.4	15.4
16	Your Statistical Test Probability Value (p-value)	0.114	0.000	0.000	0.055	0.006	0.000	0.471	0.391	0.337
17	Your Statistical Test Results (Is the p-value ≤ 0.050?)	No	Yes	Yes	No	Yes	Yes	No	No	No
18	Your HHA Adjusted Rating	3.0	4.0	4.5	3.0↓	3.5	4.5	2.5	2.5	3.0
19	Your Average Adjusted Rating									3.4
20	Your Average Adjusted Rating Rounded									3.5
Final Step: Convert Your Average Adjusted Rating Rounded (Line 20) to the 1.0 to 5.0 star scale as shown below.										
21	Your Overall Star Rating (1.0 to 5.0)									
Average Adjusted Rating Rounded		Overall HHC Star Rating				% of CCNs with Rating (04/2016)				
4.5 and 5.0		(5.0) ★★★★★				3.13%				
4.0		(4.5) ★★★★☆				8.44%				
3.5		(4.0) ★★★☆☆				16.50%				
3.0		(3.5) ★★★★★				21.70%				
2.5		(3.0) ★★★★★				21.70%				
2.0		(2.5) ★★★☆☆				16.42%				
1.5		(2.0) ★★☆☆☆				9.43%				
1.0		(1.5) ★☆☆☆☆				2.49%				
0.5		(1.0) ★☆☆☆☆				0.19%				

Hyphens indicate data not available. Italicized scores are CMS closest match.
 CMS cut points used (Pub: Outcomes/Process Measures-04/2016, Hospitalizations-04/2016). ★ Data parameters match star rating. ☆ Data parameters do not match star rating.

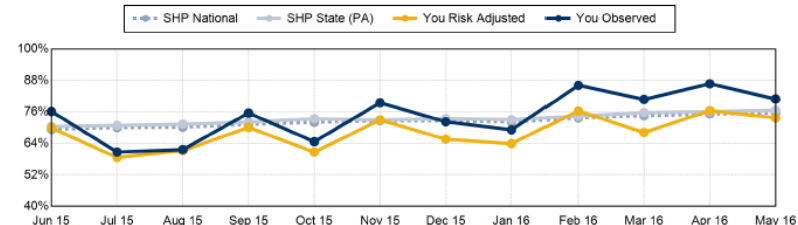
Outcome Improvement

- ▶ Trended outcomes
- ▶ Outcomes patient detail
- ▶ Outcomes decline alerts

Patient	S/ROC Clinician	S/ROC Case Mgr	DC	Length of Service	Functional Outcomes				Health Status Outcomes								Utilization Outcomes			
					ADLs	IADLs	★	★	★	★	★	★	★	★	★	★	★	★		
DEMO Afford, Leslie (DEMO00000196X)	DEMO Clinician 5	DEMO Case Manager 5	05/15/12	8	▲	▲	★	★	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲		
DEMO Afford, Leslie (DEMO00000196X)	DEMO Clinician 5	DEMO Case Manager 5	08/15/12	8	▲	▲	★	★	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲		
DEMO Afford, Leslie (DEMO00000196X)	DEMO Clinician 5	DEMO Case Manager 5	11/15/12	8	▲	▲	★	★	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲		
DEMO Afford, Leslie (DEMO00000196X)	DEMO Clinician 5	DEMO Case Manager 5	02/15/13	8	▲	▲	★	★	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲		
DEMO Allison, Basia (DEMO00000070X)	DEMO Clinician 7	DEMO Case Manager 7	05/01/12	28	▲	▲	★	★	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲		
DEMO Allison, Basia (DEMO00000070X)	DEMO Clinician 7	DEMO Case Manager 7	08/01/12	29	▲	▲	★	★	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲		
DEMO Allison, Basia (DEMO00000070X)	DEMO Clinician 7	DEMO Case Manager 7	11/01/12	29	▲	▲	★	★	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲		
DEMO Allison, Basia (DEMO00000070X)	DEMO Clinician 7	DEMO Case Manager 7	02/01/13	29	▲	▲	★	★	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲		
DEMO Austin, Abel (DEMO00000168X)	DEMO Clinician 2	DEMO Case Manager 2	05/11/12	25	▲	▲	★	★	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲		
DEMO Austin, Abel (DEMO00000168X)	DEMO Clinician 2	DEMO Case Manager 2	08/11/12	26	▲	▲	★	★	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲		
DEMO Austin, Abel (DEMO00000168X)	DEMO Clinician 2	DEMO Case Manager 2	11/11/12	26	▲	▲	★	★	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲		
DEMO Austin, Abel (DEMO00000168X)	DEMO Clinician 2	DEMO Case Manager 2	02/11/13	26	▲	▲	★	★	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲		
DEMO Beach, Wing (DEMO00000363X)	DEMO Clinician 4	DEMO Case Manager 4	05/25/12	28	▲	▲	★	★	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲		
DEMO Beach, Wing (DEMO00000363X)	DEMO Clinician 4	DEMO Case Manager 4	08/25/12	29	▲	▲	★	★	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲		
DEMO Beach, Wing (DEMO00000363X)	DEMO Clinician 4	DEMO Case Manager 4	11/25/12	29	▲	▲	★	★	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲		
DEMO Beach, Wing (DEMO00000363X)	DEMO Clinician 4	DEMO Case Manager 4	02/25/13	29	▲	▲	★	★	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲		
DEMO Becker, Brynn (DEMO00000312X)	DEMO CLINICIAN 1	DEMO Case Manager 1	07/28/12	8	▲	▲	★	★	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲		
DEMO Becker, Brynn (DEMO00000312X)	DEMO CLINICIAN 1	DEMO Case Manager 1	10/28/12	8	▲	▲	★	★	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲		

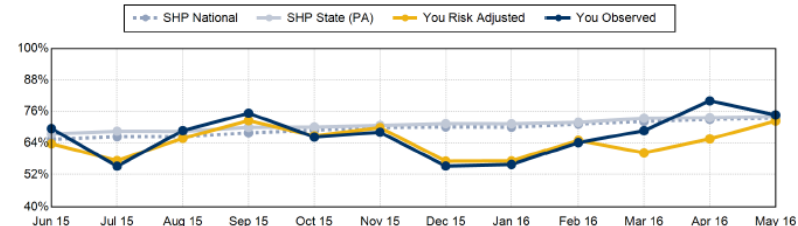
Improvement in Ambulation

Date	Events	Total Patients	You Observed	You RAO	SH _P State (PA)	SH _P National
May 2016	55	68	80.88%	73.69%	76.61%	75.61%
12 Months	722	976	73.98%	67.79%	73.40%	72.46%



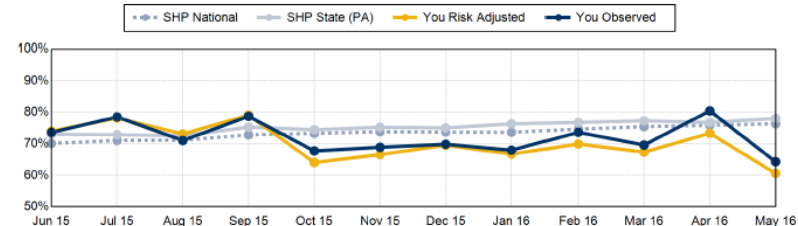
Improvement in Bed Transferring

Date	Events	Total Patients	You Observed	You RAO	SH _P State (PA)	SH _P National
May 2016	50	67	74.63%	72.32%	74.02%	73.45%
12 Months	634	951	66.67%	64.36%	70.92%	69.61%



Improvement in Pain Interfering with Activity

Date	Events	Total Patients	You Observed	You RAO	SH _P State (PA)	SH _P National
May 2016	36	56	64.29%	60.58%	77.99%	76.33%
12 Months	546	757	72.13%	70.54%	75.29%	73.51%



Trended Outcomes

- ▶ Example of negative trend
 - ▷ Look at the overall risk-adjusted trends compared to the benchmarks
 - ▷ Click on any month in the chart to drill-down to the patient detail

SHP Outcomes Patient Detail 06/01/2015 - 05/31/2016
Report Date: 6/28/2016

Ambulation
Eligible Unimproved

- ▲ Positive Outcome
- ◁ Stabilized (Not Eligible to Improve)
- ◁ Stabilized (Eligible to Improve)
- ▼ Negative Outcome
- Home Health Compare Measure
- ★ Star Rating Measure

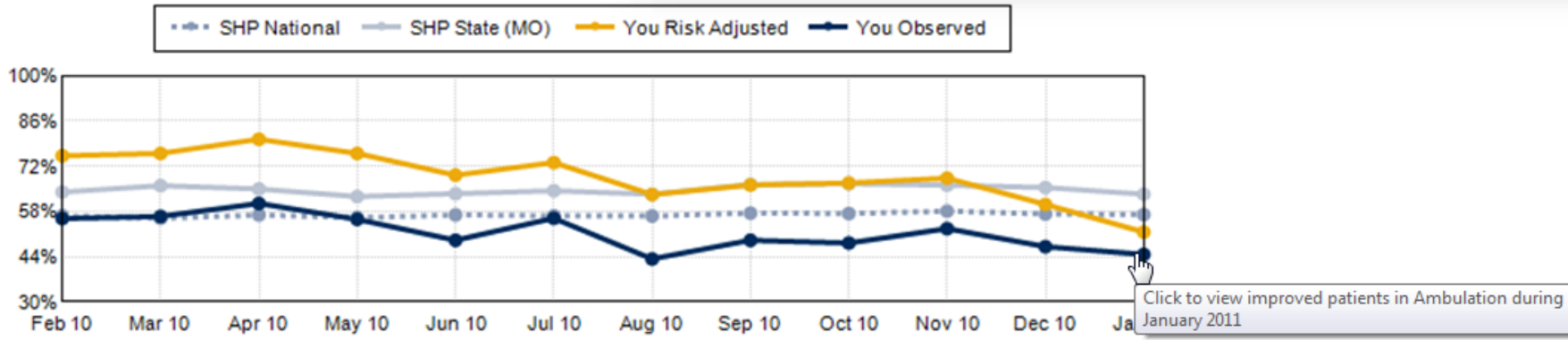
Select Report Mode:

- Eligible Unimproved
- Improved
- Stabilized
- Declined
- All Patients

Patient	S/ROC Clinician	S/ROC Case Mgr	DC	Length of Service	Functional Outcomes				Health Status Outcomes						Utilization Outcomes		
					ADLs	IADLs	ADLs	IADLs	Pain Interfering w/ Activity	Status of Surgical Wounds	Urinary Tract Infection	Urinary Incontinence	Bowel Incontinence	Cognition Frequency	Cognitive Function	Behavior Problem Frequency	EC without Hospitalization
DEMO Alford, Leslie (DEMO00000198X)	DEMO Clinician 5	DEMO Case Manager 5	05/15/12	8	★	★	★	★	★	★	★	★	★	★	★	★	★
DEMO Alford, Leslie (DEMO00000198X)	DEMO Clinician 5	DEMO Case Manager 5	08/15/12	8	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲
DEMO Alford, Leslie (DEMO00000198X)	DEMO Clinician 5	DEMO Case Manager 5	11/15/12	8	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲
DEMO Alford, Leslie (DEMO00000198X)	DEMO Clinician 5	DEMO Case Manager 5	02/15/13	8	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲
DEMO Allison, Basia (DEMO00000070X)	DEMO Clinician 7	DEMO Case Manager 7	05/01/12	28	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲
DEMO Allison, Basia (DEMO00000070X)	DEMO Clinician 7	DEMO Case Manager 7	08/01/12	29	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲
DEMO Allison, Basia (DEMO00000070X)	DEMO Clinician 7	DEMO Case Manager 7	11/01/12	29	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲	▲

Improvement in Ambulation

Date	Events	Total Patients	You Obs	You Risk Adjusted	SHP State (MO)	SHP National
January 2011	38	85	44.7%	56.93%	64.76%	68.11%
12 Months	568	1,116	50.90%	56.93%	64.76%	68.11%

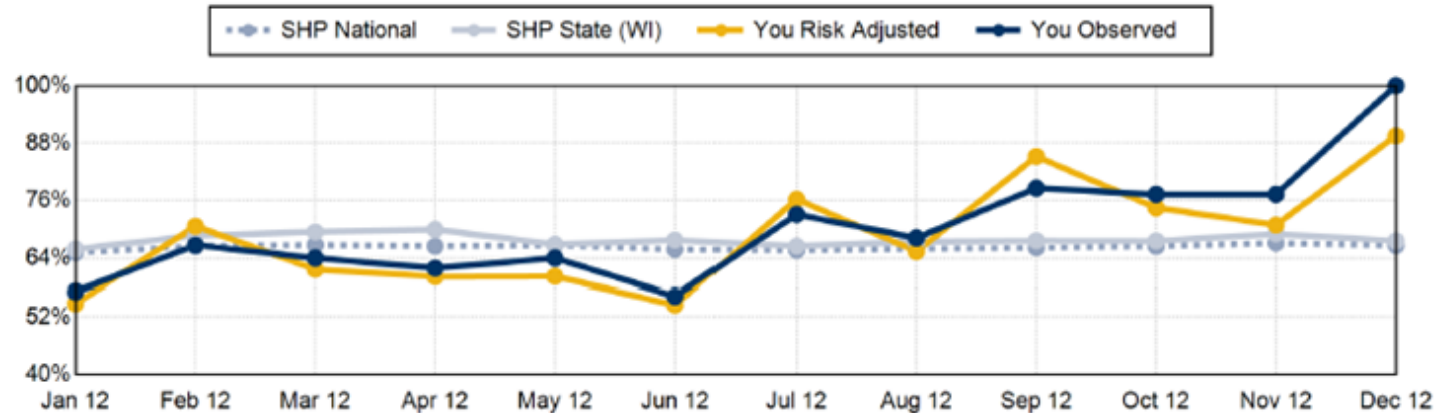


Trended Outcomes

- ▶ Example of **positive** trend
 - ▷ Month to month averages are constantly improving
 - ▷ Current months are well above the benchmarks

Improvement in Ambulation

Date	Events	Total Patients	You Observed	You RAO	SHP State (WI)	SHP National
December 2012	20	20	100.00%	89.50%	67.56%	66.62%
12 Months	185	264	70.08%	68.37%	67.87%	66.27%



Outcomes Patient Detail

- ▶ Select an outcome to analyze by clicking on the outcome name
- ▶ Choose a “Report Mode” (example: eligible unimproved as shown below)
- ▶ Sort by any column
- ▶ Drill-down to Episode Einstein by clicking on the patient name

Outcomes Patient Detail

06/01/2016 - 06/30/2016
Report Date: 6/28/2016

Ambulation Eligible Unimproved

▲ Positive Outcome
(↻) Stabilized (Not Eligible to Improve)
(↻) Stabilized (Eligible to Improve)
▼ Negative Outcome
🏠 Home Health Compare Measure
★ Star Rating Measure

Select Report Mode:

Eligible Unimproved
 Improved
 Stabilized
 Declined
 All Patients

Patient	S/ROC Clinician	S/ROC Case Mgr	DC	Length of Service	Functional Outcomes				Health Status Outcomes						Utilization Outcomes				
					ADLs	IADLs	Management of Oral Meds	Pain Interfering w/ Activity	Status of Surgical Wounds	Urinary Tract Infection	Bowel Incontinence	Confusion Frequency	Anxiety Level	Behavior Problem Frequency	EC without Hospitalization	Acute Care Hospitalization	Discharge to Community		
DEMO Becker, Brynn (DEMO00000312X)	DEMO CLINICIAN 1	DEMO Case Manager 1	07/28/12	8	★	★			★	★									
DEMO Becker, Brynn (DEMO00000312X)	DEMO CLINICIAN 1	DEMO Case Manager 1	10/28/12	8															

SHP Episode Einstein

M0990 SOC: 02/04/2012
M0990 DCYRN: 06/01/2012

(03) ROC M0990: 05/01/2012

Clinician: DEMO CLINICIAN 1
Case Mgr: DEMO Case Manager 1
Team: DEMO Team 1

Episode Category: Early / 0 - 13
HHRG: C2721
HHRG: 10000
Case Mix Weight: 1.0009
NRS Payment: \$14.37
Total Revenue: \$2,630.75

M1020 & M1022	1	2	3	4
M1020	1	2	3	4
M1022	1	2	3	4

HHC Outcome Summary

Ambulation: 🟡
 Transferring: 🟡
 Bathing: 🟡
 Pain Int w/ Activity: 🟡
 Dyspnea: 🟡
 Stat Prob Ora SW: 🟡
 Mgt of Oral Meds: 🟡

Other Measure Summary

Urinary Incont: 🟡
 ECR: Wnd Status: 🟡
 EC w/o Hospital: 🟡
 Acute Care Hosp: 🟡
 DC to Community: 🟡

Process Measures

- ▶ Process Measure Overview
- ▶ Process Measure Patient Detail
- ▶ Process Measure Alerts

Home Health Compare Process Measure Summary	You	SHP National	SHP State (CA)
Timely Initiation Of Care	92.4%	92.3%	89.8%
Depression Assess Conducted	58.8%	98.2%	97.6%
Fall Risk Assess Conducted	89.7%	97.9%	97.8%
Pain Assess Conducted	87.2%	99.0%	98.9%
Pres Ulc Risk Assess Conducted	78.9%	99.2%	98.7%
Pres Ulc Prevention in POC (Plan of Care)	73.3%	98.0%	98.2%
Diabetic Foot Care & Education	80.9%	95.7%	95.7%
Heart Failure Symp Addressed	90.5%	98.1%	98.1%
Pain Interventions	92.3%	98.8%	99.1%
Drug Education All Meds	81.6%	94.8%	95.1%
Flu Vaccine Received - Current Season	89.9%	75.2%	75.1%
PPV Received - Ever	83.7%	76.2%	77.8%
Pres Ulc Prevention	84.1%	97.5%	98.2%

Patients without Depression Assessment Conducted				Timely Care	Assessment	Care Planning	Care Plan Implementation	Education	Prevention
Patient	S/ROC Clinician	S/ROC Case Mgr	Length of Service	Timely Initiation of Care	Assessment	Care Planning	Care Plan Implementation	Education	Prevention
DEMO Alford, Lucian	DEMO Clinician 4	DEMO Case Manager 4	05/23/12 35	Yes	Yes	Yes	Yes	Yes	Yes
DEMO Alford, Lucian	DEMO Clinician 4	DEMO Case Manager 4	08/23/12 36	No	No	No	No	No	No

Review of all Process Measures

Measure	Cases	Count	Incidence
Timely Initiation Of Care	HHC 995	919	You 92.4%
Medication Reconciliation	HHC 452	356	You 78.8%
Depression Assessment Conducted	HHC 971	571	You 58.8%
Pain Assessment Conducted	HHC 931	835	You 89.7%
Pain Assess Conducted	HHC 1,003	875	You 87.2%
Pres Ulc Risk Assess Conducted	HHC 1,003	791	You 78.9%

Note: Cases = Eligible episodes (denominator), Count = Episodes in which process measure achieved (numerator), Count/Cases = Incidence.

Assessment: 04/19/2016 (03) ROC
 Patient: DEMO Alford, Lucian
 Patient ID: DEMO00000195X
 Age: 49 (7/28/1966)
 Telehealth? No

View Revenue: Incomplete Assessment
 Clinician: DEMO Clinician 4
 Case Mgr: DEMO Case Manager 4
 Team: DEMO Team 2
 Physician: KAUFMANN, DAVID

ProviderID: 99012
 SHP#: 45469713

Alert Type: Process Measure 106003
 Unaddressed

Process Measure Not Met: Depression Assessment Conducted

Relevant Measures	Current Assessment
M1730 Depression Screening	0 - No, patient not screened
M1710 When Confused	0 - Never
M1720 When Anxious	1 - Less often than daily
M1700 Cognitive Functioning	0 - Alert/oriented

Process Measures Overview

- ▶ Focus on the HHC Process Measures first
- ▶ Green or red shading indicates that a measure is better or worse than the SHP national benchmark
- ▶ Click on any measure to interactively drill-down to the Process Measures Patient Detail Report
- ▶ The detail report will be automatically filtered to show just the patients that had a negative result for that measure

<i>Home Health Compare Process Measure Summary</i>			
	You	SHP National	SHP State (CA)
Timely Initiation Of Care	74.1%	92.2%	89.1%
Depression Assess Conducted	99.4%	98.5%	98.3%
Fall Risk Assess Conducted	99.4%	99.3%	99.0%
Pain Assess Conducted	98.8%	99.2%	99.2%
Pres Ulc Risk Assess Conducted	99.4%	99.3%	99.0%
Pres Ulc Prevention in POC (Plan of Care)	100.0%	98.7%	99.0%
Diabetic Foot Care & Education	98.3%	96.7%	96.3%
Heart Failure Symp Addressed	88.9%	97.9%	97.8%
Pain Interventions	99.3%	99.1%	99.2%
Drug Education All Meds	99.4%	96.4%	97.0%
Flu Vaccine Received - Current Season	92.4%	78.7%	79.0%
PPV Received - Ever	90.5%	77.9%	79.5%
Pres Ulc Prevention	100.0%	98.0%	98.4%

Process Measures Patient Detail

- ▶ Analyze a process measure by clicking on the process measure name
- ▶ Sort by any column (Example: Sort by clinician as shown below)
- ▶ Drill-down to Episode Einstein by clicking on the patient name
- ▶ Drill-down to the process measure details by clicking on the arrows

Patients without Timely Initiation Of Care

Patient	SOC/ROC Clin	Case Mgr	Episode Completed DC Date (M0906)	Length of Service	Telehealth	Timely Care	Care Cont	Assessment	Care Planning	Care Plan Implementation	Education	Prevention
DEMO Cochran, Jesie	DEMO Clinician 5	DEMO Case Manager 5	01/04/10	2	▲	▲	▲	▲	▲	▲	▲	▲
DEMO Collins, Yoshio	DEMO Clinician 6	DEMO Case Manager 6	01/08/10	5	▲	▲	▲	▲	▲	▲	▲	▲
DEMO Gonzales, Mia	DEMO Clinician 1	DEMO Case Manager 1	01/16/10	1	▲	▲	▲	▲	▲	▲	▲	▲
DEMO Johnston, Yuli	DEMO Clinician 7	DEMO Case Manager 7	01/26/10	8	▲	▲	▲	▲	▲	▲	▲	▲

Assessment: 04/20/2016 (01) SOC
 Patient: DEMO Adkins, Sara
 Patient ID: DEMO00000014X
 Age: 72 (6/2/1944)
 Telehealth? No

View Revenue: C2F1S3
 Clinician: DEMO Clinician 7
 Case Mgr: DEMO Case Manager 7
 Team: DEMO Team 1
 Physician: MERSCH, ALAN

ProviderID: 99012
 SHP#: 45468845

Alert Type: Process Measure 106001
 Process Measure Not Met: Timely Initiation of Care

Relevant Measures	Current Assessment
M0104 Date of Referral	04/14/2012
M1005 Inpat DC Date	04/11/2012
M0030 Start of Care Date	04/18/2012

Need an Enterprise Solution?

- ▶ Run the **Clinical Executive Advantage** in order to easily compare locations within your organization to each other for every publicly reported HHC measure
- ▶ Drill-down to outcomes, process measures, hospitalizations, and HHCAHPS patient detail

Document Map

- [-] Clinical Executive Advantage
 - [-] Episodes
 - Episodes Started
 - Episodes Transferred
 - Episodes Ended
 - Episodes Completed
 - Patient Age at Admission
 - Length of Stay
 - [-] Managing Daily Activities
 - Ambulation
 - Bed Transferring**
 - Bathing
 - [-] Managing Pain and Treating Symptoms
 - [-] Treating Wounds/Preventing Pressure S
 - [-] Preventing Harm
 - [-] Preventing Unplanned Hospital Care
 - [-] HHCAHPS

Clinical Executive Advantage									Standard: 06/01/2015 - 05/31/2016, Offset: 03/01/2015 - 02/29/2016	
Superior Outcomes Home Health									Report Date: 6/28/2016	
Outcome: Bed Transferring	Improved				Declined			Your % Ranking		
	Eligible	#	%	Risk Adjusted	Eligible	#	%	Observed	Risk Adjusted	
Division	4,467	3,378	75.6%	64.5%	4,501	56	1.2%	71%	53%	
SHP National Database			69.6%				1.7%			
Superior Outcomes - Indianapolis	719	<u>519</u>	72.2%	62.0%	713	<u>9</u>	1.3%	62%	41%	
Division (IN)	719	519	72.2%	62.0%	713	9	1.3%	62%	41%	
SHP Database (IN)			67.9%				2.1%			
Superior Outcomes - Cleveland	714	<u>414</u>	58.0%	68.4%	718	<u>11</u>	1.5%	27%	72%	
Superior Outcomes - Columbus	637	<u>516</u>	81.0%	63.4%	634	<u>11</u>	1.7%	85%	48%	
Superior Outcomes - Portsmouth	229	<u>183</u>	79.9%	58.8%	227	<u>3</u>	1.3%	82%	27%	
Division (OH)	1,580	1,113	70.4%	65.0%	1,579	25	1.6%	57%	56%	
SHP Database (OH)			67.6%				1.8%			
Superior Outcomes - Pittsburgh	983	<u>839</u>	85.4%	64.6%	995	<u>5</u>	0.5%	92%	54%	
Superior Outcomes - York	423	<u>258</u>	61.0%	63.9%	446	<u>10</u>	2.2%	33%	50%	
Division (PA)	1,406	1,097	78.0%	64.4%	1,441	15	1.0%	77%	53%	
SHP Database (PA)			70.9%				1.4%			
Superior Outcomes - Roanoke	480	<u>423</u>	88.1%	67.9%	482	<u>5</u>	1.0%	95%	69%	
Superior Outcomes - Suffolk	282	<u>226</u>	80.1%	63.1%	286	<u>2</u>	0.7%	83%	46%	
Division (VA)	762	649	85.2%	66.1%	768	7	0.9%	92%	61%	
SHP Database (VA)			70.7%				1.5%			

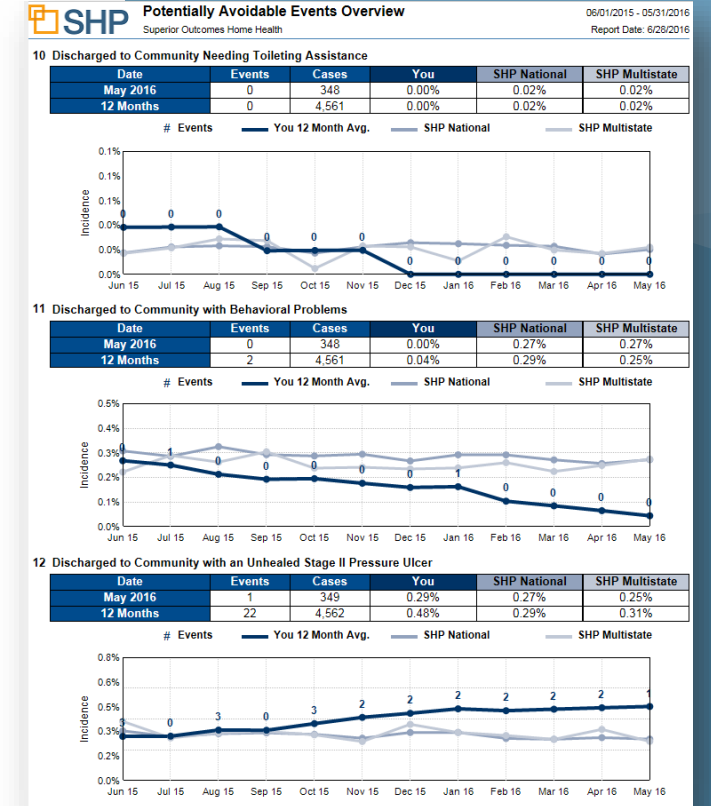
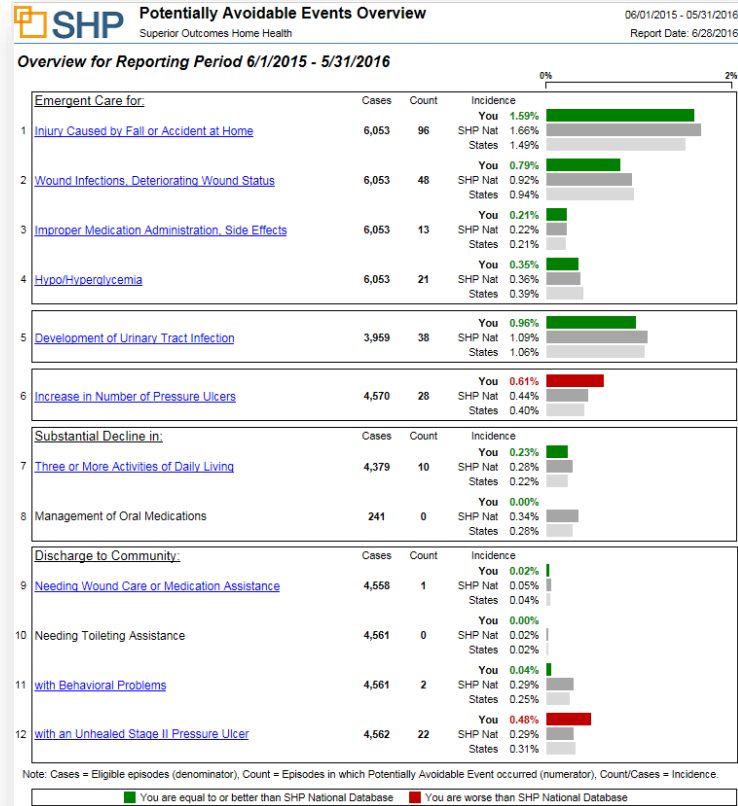
Measure used in [Home Health Compare Star Ratings](#)

< >

<10% 10% - 20% 20% - 40% 40% - 60% 60% - 80% 80% - 90% >90%

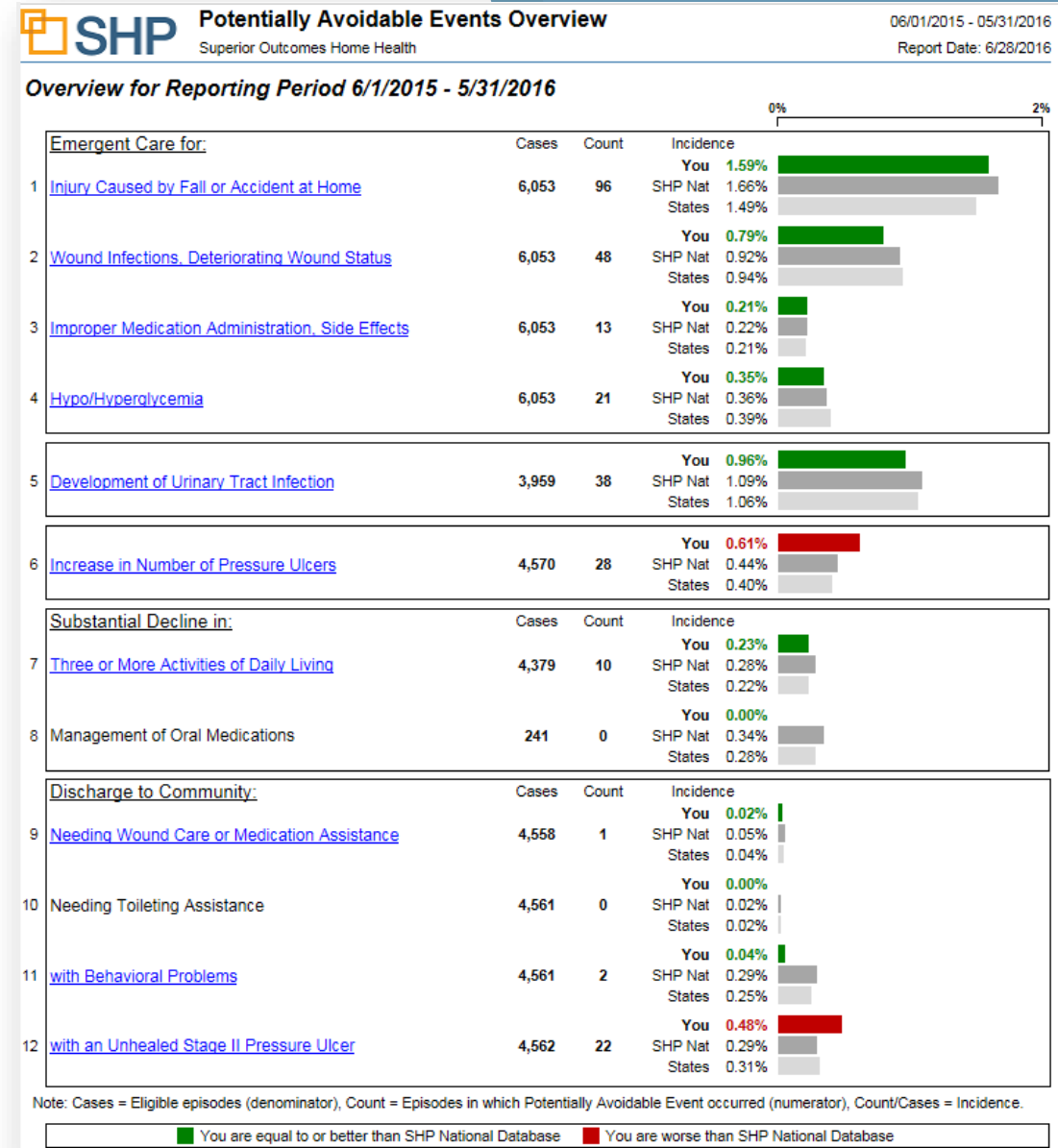
Potentially Avoidable Events (PAEs)

- ▶ PAE Overview
- ▶ PAE Patient Detail
- ▶ PAE Trends



PAE Overview

- ▶ Use the Overview section to determine which events have higher occurrence rates than the benchmarks
- ▶ **Green** or **red** shading indicates that a measure is better or worse than the SHP National benchmark
- ▶ Click on any PAE to interactively drill-down to the Patient Detail report



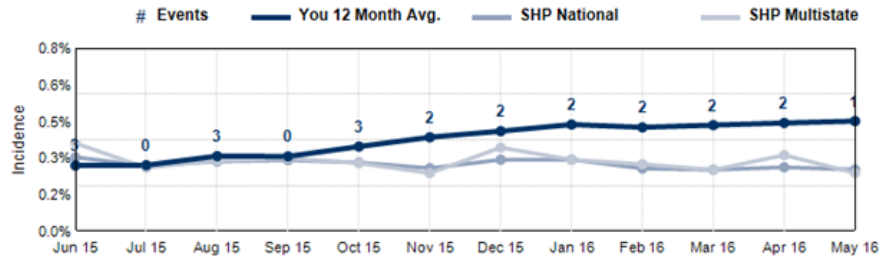
PAE Overview

- ▶ Use the Trended section of the report to determine which events are trending upward and need immediate action
- ▶ Trends should ALWAYS be downward for PAE's

BAD Trend

12 Discharged to Community with an Unhealed Stage II Pressure Ulcer

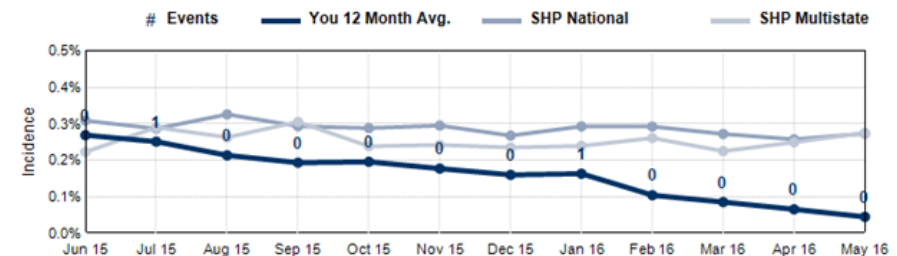
Date	Events	Cases	You	SHP National	SHP Multistate
May 2016	1	349	0.29%	0.27%	0.25%
12 Months	22	4,562	0.48%	0.29%	0.31%



GOOD Trend

11 Discharged to Community with Behavioral Problems

Date	Events	Cases	You	SHP National	SHP Multistate
May 2016	0	348	0.00%	0.27%	0.27%
12 Months	2	4,561	0.04%	0.29%	0.25%



PAE Patient Detail

- ▶ Click on any PAE in the Overview section to view the patient details
- ▶ Click on any link in the “Assessment” column to view the alert details
- ▶ Click on any patient name to open up their Episode Einstein™

SHP Potentially Avoidable Events Patient Detail 01/01/2016 - 06/30/2016
Report Date: 6/28/2016
Superior Outcomes Home Health

Events: Emergent Care for Wound Infections, Deteriorating Wound Status Events: 7

Patient	S/ROC Clinician	S/ROC Case Mgr	S/ROC	ICD	Event Type	Assessment
Test, Patient 1 (00000001)	Nancy, Nurse	Manager, Casey	10/02/2015	Z47.81	EC - Wound Infection/Status	11/12/2015 (07) TRF - DC
Test, Patient 2 (00000002)	Nancy, Nurse	Manager, Casey	07/08/2015	707.03	EC - Wound Infection/Status	08/31/2015 (07) TRF - DC
Test, Patient 3 (00000003)	Nancy, Nurse	Manager, Casey	09/17/2015	V54.16	EC - Wound Infection/Status	11/04/2015 (09) DC
Test, Patient 4 (00000004)	Nancy, Nurse	Manager, Casey	12/16/2014	681.10	EC - Wound Infection/Status	08/17/2015 (06) TRF - No DC
00000005	Nancy, Nurse	Manager, Casey	07/23/2015	V58.73	EC - Wound Infection/Status	08/12/2015 (09) DC
00000006	Nancy, Nurse	Manager, Casey	07/23/2015			
00000007	Nancy, Nurse	Manager, Casey	11/12/2015			

SHP Episode Einstein
MONROE DOCTRINE 00012012

Case No: 00000001
Case Mgr: Nancy, Nurse
Case Mgr Email: nancy.nurse@shp.com

NHC Outcome Summary

Other Measure Summary

Alerts

Assessment

Assessment: 11/12/2015 (07) Transfer

Patient: **Test, Patient 1** Clinician: Nancy, Nurse
 Patient ID: 00000001 Case Mgr: Manager, Casey
 Age: 88 (7/7/1927) Team: Blue Team
 Telehealth? No Physician: Dr. Capable

ProviderID: 99999
SHP#: 75721353

Alert Type: Potentially Avoidable Events 50002 Unaddressed

EC for Wound Infections, Deteriorating Status: Potentially Avoidable Event

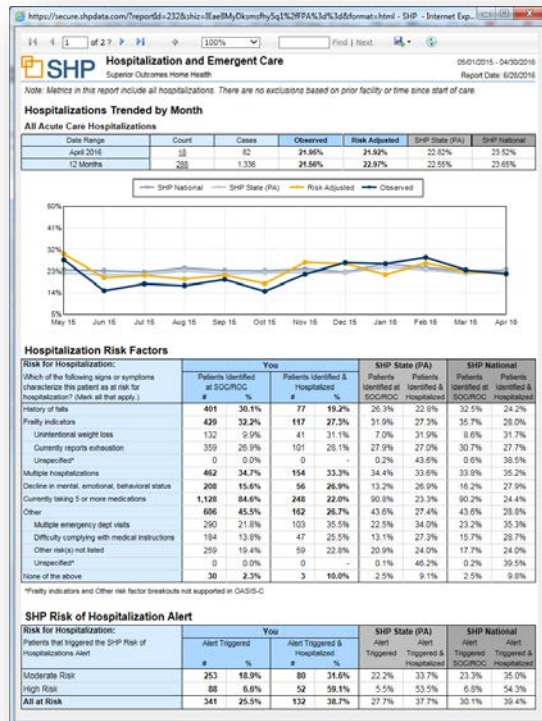
Relevant Measures	Current Assessment
M2300 Emergent Care: Since last OASIS	1 - Yes, WITHOUT hospital admission
M2310 Reason for Emergent Care	15 - Wound infection or deterioration

Hospital Utilization

Hospitalizations Three Ways

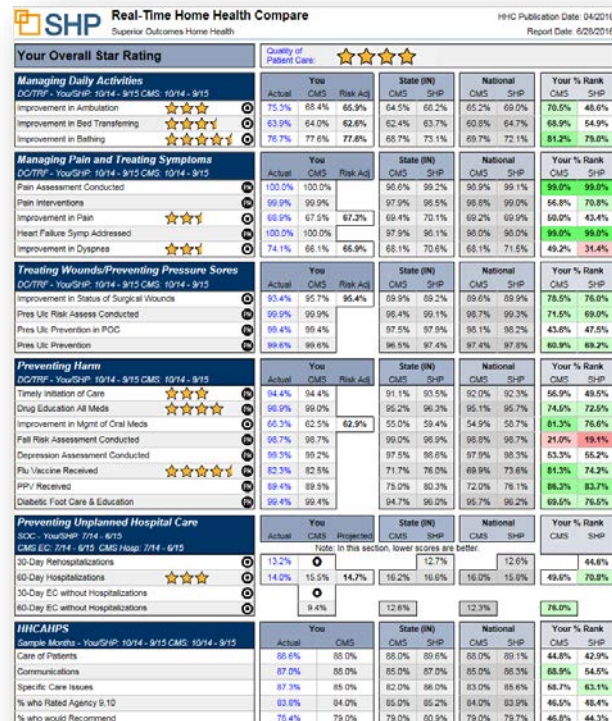
SHP offers three different ways to analyze your hospitalization rates

Hospital & Emergent Care Report:
Acute Care Hospitalization rates
(SOC/ROC to DC/Transfer)



Note: Includes about 99% of Medi-Medi SOC episodes

Home Health Compare Report:
60-day Hospitalization rates



Note: Includes about 80% of Medi-Medi SOC episodes

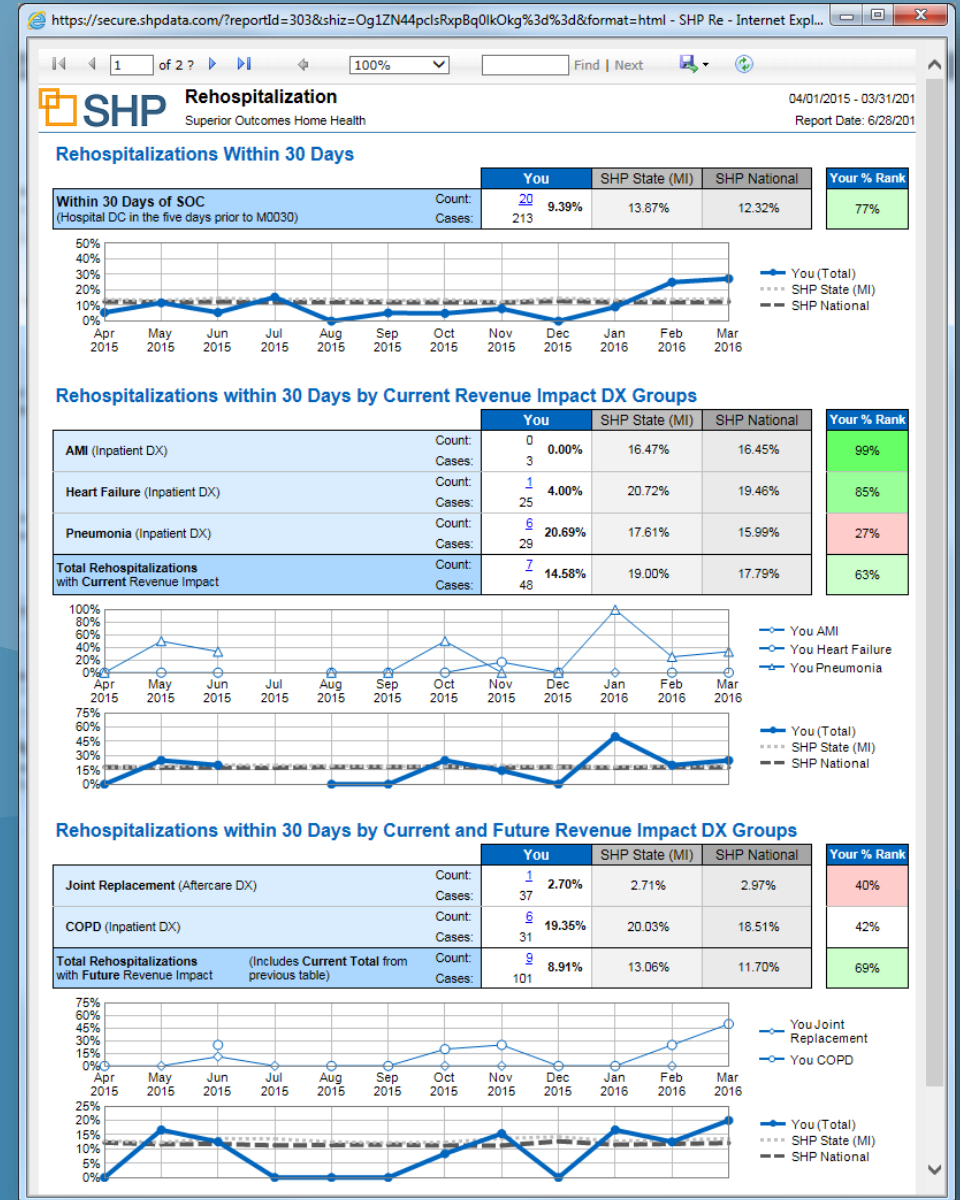
Rehospitalization Report:
30-day Rehospitalization rates



Note: Includes about 35% of Medi-Medi SOC episodes

Rehospitalization Report

- ▶ Uses the CMS logic for 30-day Rehospitalizations currently reported on HHC
- ▶ Also includes breakouts for the hospital DX penalty groups of AMI, Heart Failure, Pneumonia, Joint Replacement and COPD
- ▶ Rehospitalizations by day-of-the-week
- ▶ Rehospitalizations within 0-7, 8-14, 15-30, 31-60, 60-90, and 91+ days
- ▶ Includes a telehealth/non-telehealth filter on the parameter page



Rehospitalization Patient Detail

- ▶ Drill-down to the Rehospitalization Patient Detail report from any report that includes 30-day Rehospitalization rates and view the patients behind your scores

Rehospitalizations within 30 Days by Current and Future Revenue Impact DX Groups

		You	SHP State (MI)	SHP National	Your % Rank
Joint Replacement (Aftercare DX)	Count:	1	2.71%	2.97%	40%
	Cases:	37			
COPD (Inpatient DX)	Count:	6	20.03%	18.51%	42%
	Cases:	31			
Total Rehospitalizations with Future Revenue Impact (Includes Current Total from previous table)	Count:	9	13.06%	11.70%	69%
	Cases:	101			

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1 of 1 100% Find | Next

SHP Rehospitalization Patient Detail 04/01/2015 - 03/31/2016
Superior Outcomes Home Health Report Date: 6/28/2016

Rehospitalizations within 30 Days, Aftercare DX Group Joint Replacement

Patient	S/ROC Clinician	S/ROC Case Mgr	Inpat DC (M1005)	SOC (M0030)	TRF (M0906)	Days*	Inpatient/Aftercare DX Group					Primary HH DX	30-Day Inelig**
							AMI	HF	Pneu	Joint	COPD		
Patient, Test 1 (00000001)	Nurse, Nancy	Manager, Casey	6/1/2015	6/2/2015	6/28/2015	27				✓		V54.81	

*Days - Days from SOC (M0030) to TRF (M0906)
**30-Day Inelig - Patient ineligible for 30-day measure based on CMS measure exclusions (select psych and cancer inpatient ICD codes)

Home Health Compare (60-Day)

- ▶ Use the Home Health Compare report to view your 60-day rates as currently reported on Home Health Compare
- ▶ This report drills down to the **60-day Hospitalization Patient Detail report**

Preventing Unplanned Hospital Care SOC - You/SHP: 7/14 - 6/15 CMS EC: 7/14 - 6/15 CMS Hosp: 7/14 - 6/15	You			State (IN)		National		Your % Rank	
	Actual	CMS	Projected	CMS	SHP	CMS	SHP	CMS	SHP
30-Day Rehospitalizations	13.2%	12.7%	12.6%					44.6%	
60-Day Hospitalizations ★ ★ ★	14.0%	15.5%	14.7%	16.2%	16.6%	16.0%	15.8%	49.6%	70.8%
30-Day EC without Hospitalizations									
60-Day EC without Hospitalizations		9.4%		12.6%		12.3%		76.0%	

Note: In this section, lower scores are better.

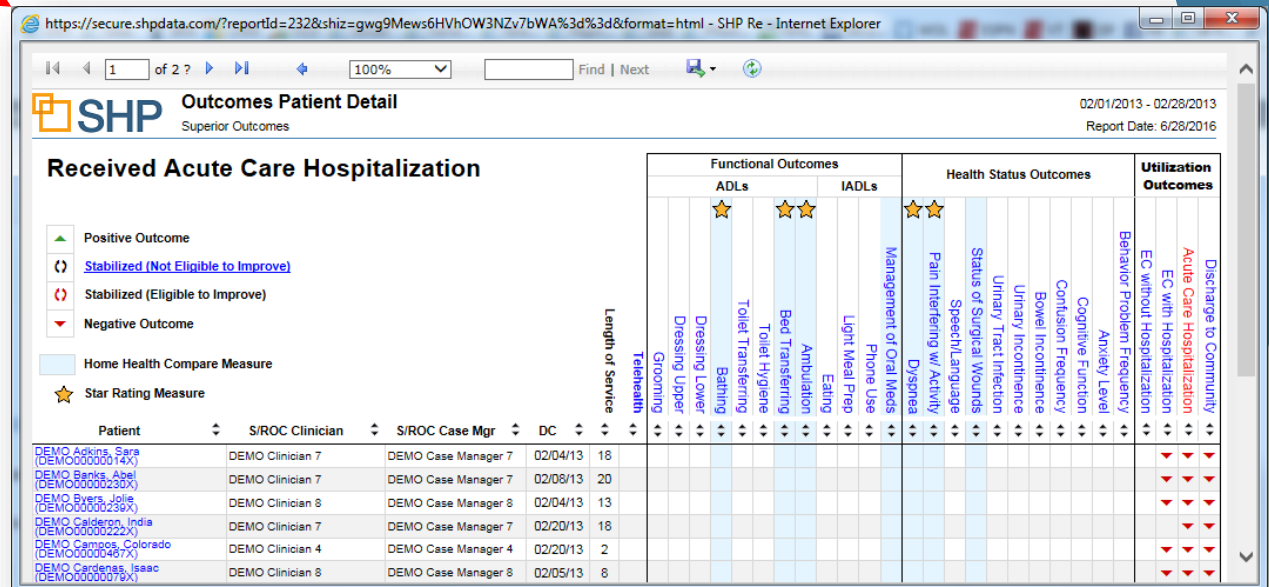
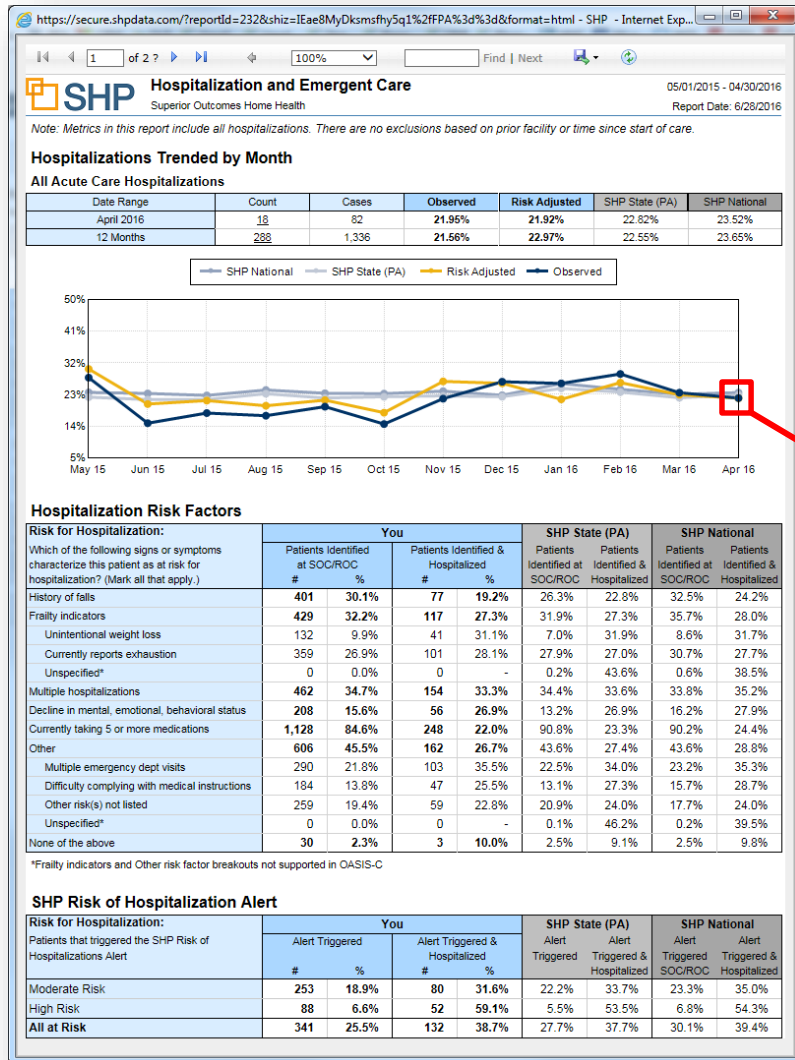
SHP Superior Outcomes Home Health 04/15/2016 - 04/29/2016
Report Date: 6/28/2016

Total 60-Day Hospitalizations in Report: 6

Patient ↕	S/ROC Clinician ↕	S/ROC Case Mgr ↕	SOC Date (M0030) ↕	TRF to Hospital (M0906)		Days From SOC ↕	Home Health Primary ICD ↕
				Type ↕	Date ↕		
Test, Patient 1 (00000001)	Nurse, Nancy	Manager, Casey	04/28/2016	(06)	04/29/2016	2	J44.9
Test, Patient 2 (00000002)	Nurse, Nancy	Manager, Casey	04/23/2016	(06)	05/05/2016	13	R26.89
Test, Patient 3 (00000003)	Nurse, Nancy	Manager, Casey	04/26/2016	(06)	05/10/2016	15	M54.5
Test, Patient 4 (00000004)	Nurse, Nancy	Manager, Casey	04/21/2016	(06)	05/27/2016	37	Z47.81
Test, Patient 5 (00000005)	Nurse, Nancy	Manager, Casey	04/20/2016	(06)	05/10/2016	21	C15.9
Test, Patient 6 (00000006)	Nurse, Nancy	Manager, Casey	04/16/2016	(06)	05/02/2016	17	I21.4

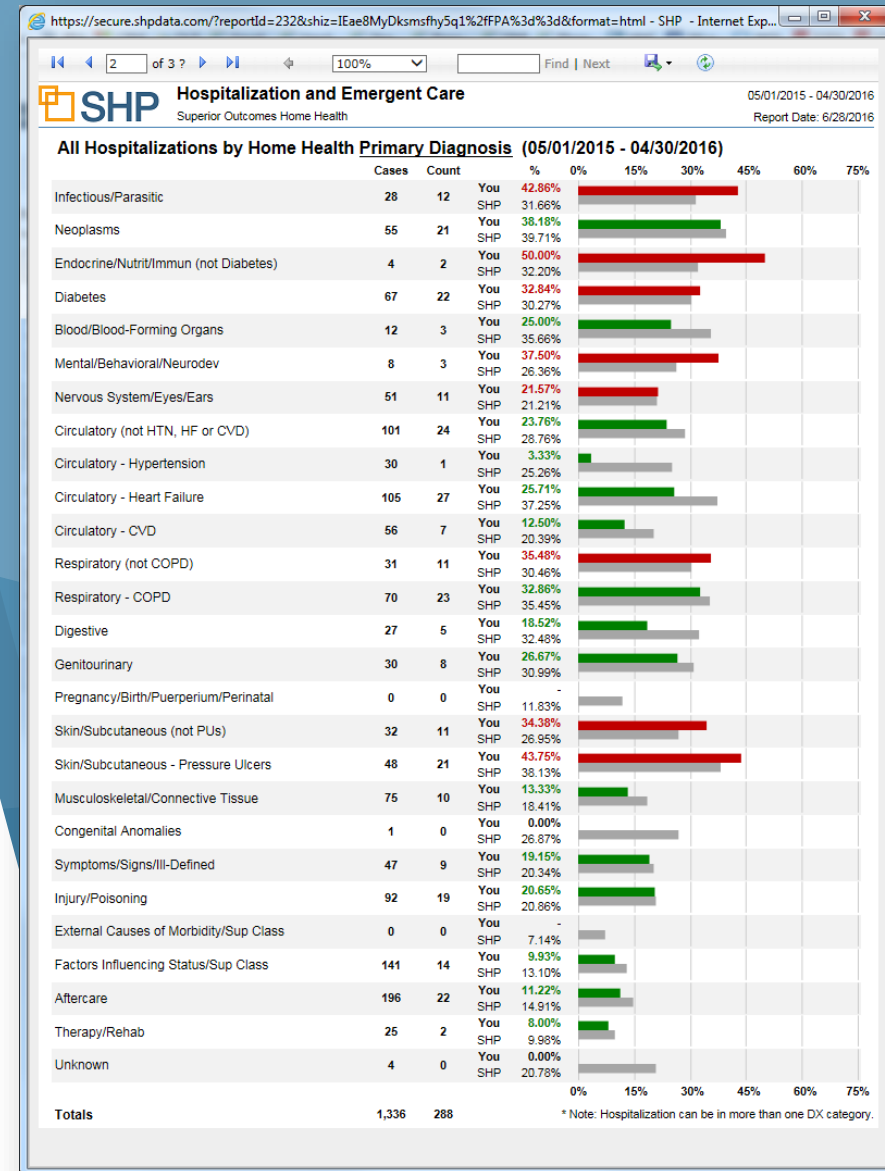
Hospitalization and Emergent Care

- ▶ Trends of Acute Care Hospitalization & Emergent Care measures
- ▶ Analysis of M1033 Risk Factors
- ▶ Analysis of SHP Risk of Hospitalization alert



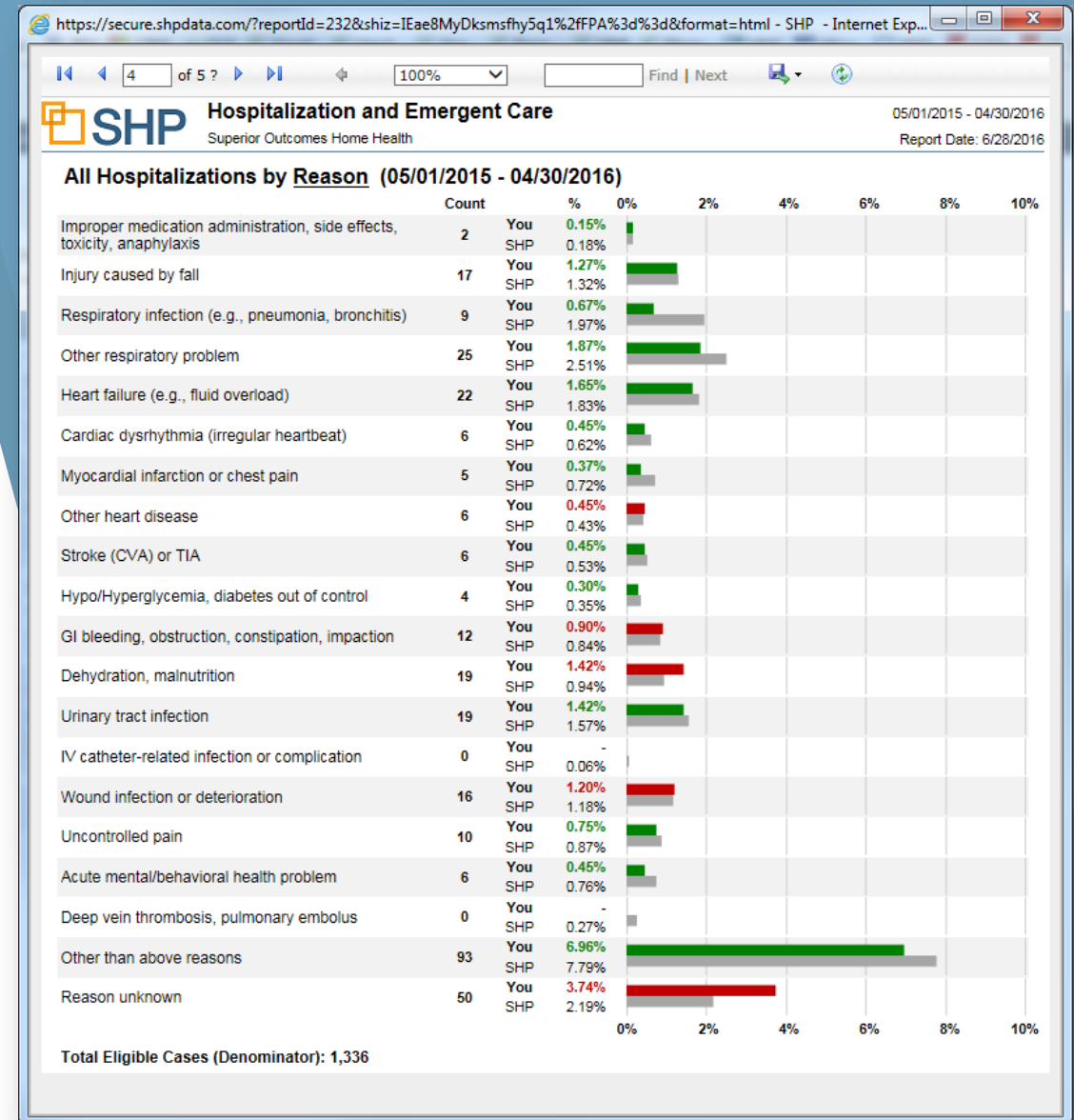
By Diagnosis

- Breakdown of Acute Care Hospitalization and Emergent Care by Primary and/or ANY diagnosis



By Reason

- Breakdown of Acute Care Hospitalization and Emergent Care by Reason



Predictive Alerts

- ▶ Use the “Risk of Hospitalization” & “Candidate for Hospice Referral” alerts to help keep patients out of the hospital and ensure that they are being cared for in the appropriate setting

Patient: DEMO Puckett, Carolyn

Assessment: 02/25/2013 (03) ROC

Patient: DEMO Puckett, Carolyn Clinician: DEMO Clinician 4

Patient ID: DEMO00000323X Case Mgr: DEMO Case Manager 4

Age: 35 (4/13/1978) Team: DEMO Team 2 ProviderID: 99012

Telehealth? No Physician: LEVINE, STEVEN SHP#: 45477974

P Alert Type: Predictive 110054 Unaddressed

Patient may be a candidate for hospice referral.

Relevant Measures	Current Assessment
M1810 Dressing Upper	3 - Totally dependent
M1820 Dressing Lower	3 - Totally dependent
M1830 Bathing	6 - Totally dependent
M1840 Toilet Transferring	4 - Totally dependent
M1850 Transferring	5 - Bedfast, unable to transfer, unable to turn or position self
M1860 Ambulation	5 - Chairfast, unable to ambulate and unable to wheel self
M1620 Bowel Incontinence Freq	4 - On a daily basis
M1034 Overall Status	2 - Likely to remain in fragile health with ongoing high risk

P Alert Type: Predictive 110058 Unaddressed

Patient is at high risk of hospitalization.

Relevant Measures	Current Assessment
M1030 Therapies received at home	1 - Intravenous or infusion therapy (excludes TPN)
M1018 Cond prior to reg change/inpat stay - past 14 days	2 - Indwelling/suprapubic catheter
M1022b Other Severity Rating	03
M1610 Urinary Incontinence	2 - Patient requires urinary catheter
M1000 Inpatient Facilities DCd from - past 14 days	3 - Short-stay acute hospital (IPP S)
M1830 Bathing	6 - Totally dependent
M1860 Ambulation	5 - Chairfast, unable to ambulate and unable to wheel self
M1810 Dressing Upper	3 - Totally dependent
M2020 Mgt of Oral Meds	3 - Unable to take unless administered
M1100 Patient Living Situation	6 - Lives w/ other(s), 24 hr assistance
M1720 When Anxious	2 - Daily, not constantly
M1242 Freq of Pain Interfering Activity	3 - Daily but not constantly
M1800 Grooming	3 - Totally dependent
M1620 Bowel Incontinence Freq	4 - On a daily basis

Financial/Operational Reporting

Financial Executive Advantage

- ▶ Episode Overview: Episodes Started and Completed

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Document Map

- Financial Executive Advantage
 - Episodes Started
 - Episodes Completed
 - RAC Metrics
 - LUPA Metrics
 - Avg Case Weight RAP vs Final
 - Visits by Discipline
 - Therapy Visit Tiers - Revenue & Distrib
 - Therapy Visit Tiers - Case Weight & Dis
 - Service Category - Revenue
 - Service Category - Case Weight
 - Service Category - Distribution
 - 0-5 Therapy Visits - Revenue
 - 0-5 Therapy Visits - Case Weight
 - 0-5 Therapy Visits - Distribution

SHP Financial Executive Advantage Superior Outcomes Home Health

10/1/2015 - 3/31/2016
Report Date: 6/28/2016

Episodes Started Assessment Types (01) (03) (04)	Medicare Traditional				Medicare HMO				Medicaid Traditional				Medicaid HMO				Other				All Payers Total
	SOCs (01)	ROC (03)	Re- certs (04)	Total	SOCs (01)	ROC (03)	Re- certs (04)	Total	SOCs (01)	ROC (03)	Re- certs (04)	Total	SOCs (01)	ROC (03)	Re- certs (04)	Total	SOCs (01)	ROC (03)	Re- certs (04)	Total	
Division	1,561	23	431	2,015	1,218	17	277	1,512	8	1	2	11	12	2	2	16	328	4	147	479	3,997
Superior Outcomes - Ft. Wayne	241	2	46	289	245	1	35	281	0	0	0	0	1	0	0	1	54	0	76	130	698
Division (IN)	241	2	46	289	245	1	35	281	0	0	0	0	1	0	0	1	54	0	76	130	698
Superior Outcomes - Cleveland	219	7	84	310	237	5	45	287	1	0	0	1	0	1	0	1	21	0	2	23	622
Superior Outcomes - Columbus	220	3	100	323	149	2	60	211	3	1	2	6	2	0	0	2	59	1	10	70	608
Superior Outcomes - Portsmouth	99	1	29	129	35	1	17	53	2	0	0	2	1	0	0	1	10	1	19	30	214
Division (OH)	538	11	213	762	421	8	122	551	6	1	2	9	3	1	0	4	90	2	31	123	1,444
Superior Outcomes - Pittsburgh	239	4	48	291	330	7	80	417	0	0	0	0	1	0	2	3	82	1	25	108	802
Superior Outcomes - York	124	1	27	152	106	1	10	117	0	0	0	0	6	1	0	7	39	0	3	42	315
Division (PA)	363	5	75	443	436	8	90	534	0	0	0	0	7	1	2	10	121	1	28	150	1,117
Superior Outcomes - Roanoke	217	0	35	252	91	0	19	110	0	0	0	0	1	0	0	1	26	0	6	32	392
Superior Outcomes - Suffolk	202	5	62	269	25	0	11	36	2	0	0	2	0	0	0	0	37	1	6	44	346
Division (VA)	419	5	97	521	116	0	30	146	2	0	0	2	1	0	0	1	63	1	12	76	738

* Since an episode may have multiple payers or no payers, the sum of the payer counts may not be equal to the Total Episodes column.

Audit Risk Metrics

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 - 0-5 Therapy Visits - Distribution

SHP Financial Executive Advantage
Superior Outcomes Home Health

10/1/2015 - 3/31/2016
Report Date: 6/28/2016

RAC Metrics	% Down-codes	LUPA Rate	Outliers			Therapy Visits			Payment Thresholds					
			Total Episodes	Rate	Avg Outlier Payment	Avg* Expected	Avg Actual	% Difference	6-7 Visits		14-15 Visits		20-21 Visits	
									#	%	#	%	#	%
Division	13.0%	13.0%	3	0.2%	\$697	4.56	5.70	24.9%	234	12.8%	71	3.9%	24	1.3%
SHP National Database	15.1%	9.8%		2.3%	\$1,730	6.75	7.16	6.0%		8.9%		5.2%		2.2%
Superior Outcomes - Ft. Wayne	16.7%	16.0%	0	0.0%		4.53	5.14	13.7%	27	10.5%	15	5.8%	2	0.8%
Division (IN)	16.7%	16.0%	0	0.0%		4.53	5.14	13.7%	27	10.5%	15	5.8%	2	0.8%
SHP Database (IN)	15.5%	9.1%		1.9%	\$881	6.88	7.96	15.6%		8.7%		5.4%		2.4%
Superior Outcomes - Cleveland	9.3%	12.9%	1	0.4%	\$1,043	5.21	7.54	44.7%	29	10.4%	16	5.7%	14	5.0%
Superior Outcomes - Columbus	1.0%	12.8%	0	0.0%		2.16	4.04	87.4%	39	13.4%	6	2.1%	3	1.0%
Superior Outcomes - Portsmouth	16.5%	10.7%	0	0.0%		3.45	3.94	14.4%	16	13.2%	3	2.5%	0	0.0%
Division (OH)	7.1%	12.4%	1	0.1%	\$1,043	3.62	5.44	50.3%	84	12.2%	25	3.6%	17	2.5%
SHP Database (OH)	12.8%	9.4%		3.6%	\$1,200	6.80	7.52	10.6%		7.8%		4.9%		2.2%
Superior Outcomes - Pittsburgh	10.7%	11.4%	1	0.4%	\$336	6.00	7.27	21.2%	36	12.9%	16	5.7%	2	0.7%
Superior Outcomes - York	25.8%	15.9%	0	0.0%		5.85	5.87	0.5%	16	10.6%	4	2.6%	1	0.7%
Division (PA)	16.0%	13.0%	1	0.2%	\$336	5.95	6.78	14.0%	52	12.1%	20	4.6%	3	0.7%
SHP Database (PA)	17.6%	11.6%		2.3%	\$967	5.91	6.53	10.6%		9.6%		4.5%		1.6%
Superior Outcomes - Roanoke	17.9%	12.4%	1	0.5%	\$711	5.49	5.34	2.7%	34	15.6%	4	1.8%	0	0.0%
Superior Outcomes - Suffolk	16.2%	11.9%	0	0.0%		3.97	5.40	36.0%	37	15.7%	7	3.0%	2	0.9%
Division (VA)	17.0%	12.1%	1	0.2%	\$711	4.70	5.38	14.3%	71	15.7%	11	2.4%	2	0.4%
SHP Database (VA)	17.2%	10.4%		2.0%	\$1,343	7.61	7.84	3.0%		9.6%		5.1%		2.4%

* Providers without final claims within the reporting period are omitted.

Financial Patient Detail Report

- ▶ Available as a drill-down from Financial Executive Advantage or as a stand-alone report

https://secure.shpdata.com/?reportId=160&shiz=WMSFP7yJ%2fVJp%2byF5pV1Zcg%3d%3d&format=html - SH - Internet Explorer

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SHP Financial Patient Detail Superior Outcomes Home Health 10/01/2015 - 03/31/2016 Report Date: 6/28/2016

Episodes in Report: 15

Patient Name	Ep Start	M0030	S/ROC Clinician	Down-code	Ther Visits	All Visits	HHRG	HIPPS	Case Weight	NRS Payment	Expected Revenue	Potential Revenue	Tier	Ep #	P E P	LUPA/Outlier
Patient ID	Ep End	M0906	S/ROC Case Mgr	ICD												
Patient, Test 1	12/11/2015 (01)	12/11/2015	Nurse, Nancy		RAP: 6		C2F3S2	1BHLS	0.9325	\$14.36	\$2,432.04	\$211.44	Early	1		
M0100002078101	02/04/2016	02/04/2016	Nurse, Nancy	S72.001D	Final: 15	20	C2F2S1	2BGK1	1.3809	\$14.36	\$3,594.60		14-19			
Patient, Test 2	09/11/2015 (01)	09/11/2015	Nurse, Nancy		RAP: 8		C2F3S3	1BHMS	1.0765	\$14.07	\$2,996.67		Early	1		
M0100002271101	10/27/2015	10/27/2015		491.21	Final: 15	19	C2F2S1	2BGK1	1.3497	\$14.07	\$3,753.61		14-19			
Patient, Test 3	11/17/2015 (01)	11/17/2015	Nurse, Nancy		RAP: 2		C2F3S1	1BHKS	0.8299	\$14.07	\$2,313.43		Early	1		
M0100002639401	12/22/2015	12/22/2015	Nurse, Nancy	M17.0	Final: 15	19	C2F2S1	2BGK1	1.3497	\$14.07	\$3,753.61		14-19			
Patient, Test 4	09/24/2015 (01)	09/24/2015	Nurse, Nancy		RAP: 14		C1F2S1	2AGKS	1.2657	\$14.07	\$3,520.88		Early	1		
M0100002460001	11/10/2015	11/10/2015	Nurse, Nancy	V54.13	Final: 14	28	C1F2S1	2AGK1	1.2657	\$14.07	\$3,520.88		14-19			
Patient, Test 5	11/17/2015 (01)	11/17/2015	Nurse, Nancy		RAP: 12		C3F3S5	1CHPT	1.4353	\$50.32	\$3,860.08		Early	1		
M0100002638301	01/15/2016	01/11/2016	Nurse, Nancy	S72.142D	Final: 14	21	C3F2S1	2CGK2	1.5053	\$50.32	\$4,045.89		14-19			
Patient, Test 6	12/01/2015 (01)	12/01/2015	Nurse, Nancy		RAP: 8		C2F3S3	1BHMS	1.0633	\$13.94	\$2,836.29		Early	1		
M0100002659601	01/27/2016		Nurse, Nancy	M54.2	Final: 15	15	C3F3S1	2CHK1	1.5805	\$13.94	\$4,209.11		14-19			
Patient, Test 7	10/22/2015 (01)	10/22/2015	Nurse, Nancy		RAP: 12		C3F3S5	1CHPS	1.4780	\$14.07	\$4,109.08		Early	1		
M0100002540301	11/27/2015	11/27/2015		I69.354	Final: 15	20	C3F2S1	2CGK1	1.5288	\$14.07	\$4,249.83		14-19			

LUPA Breakdowns

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LUPA Metrics	Non LUPAs					LUPAs					All				
	Episodes	Avg Revenue RAP	Avg Revenue Final	Case Wt RAP	Case Wt Final	Episodes	Avg Revenue RAP	Avg Revenue Final	Case Wt RAP	Case Wt Final	Episodes	Avg Revenue RAP	Avg Revenue Final	Case Wt RAP	Case Wt Final
Division	1,594	\$2,628	\$2,864	0.95	1.04	238	\$2,233	\$400	0.80	0.76	1,832	\$2,577	\$2,544	0.93	1.01
SHP National Database		\$3,012	\$3,122	1.06	1.08		\$2,437	\$409	0.84	0.73		\$2,956	\$2,857	1.04	1.05
Superior Outcomes - Ft. Wayne	216	\$2,630	\$2,848	0.96	1.04	41	\$2,198	\$380	0.80	0.75	257	\$2,561	\$2,454	0.93	0.99
Division (IN)	216	\$2,630	\$2,848	0.96	1.04	41	\$2,198	\$380	0.80	0.75	257	\$2,561	\$2,454	0.93	0.99
SHP Database (IN)		\$2,931	\$3,114	1.05	1.12		\$2,327	\$384	0.83	0.73		\$2,876	\$2,865	1.03	1.08
Superior Outcomes - Cleveland	244	\$2,507	\$3,088	0.90	1.12	36	\$2,206	\$400	0.79	0.74	280	\$2,469	\$2,742	0.89	1.07
Superior Outcomes - Columbus	253	\$2,328	\$2,693	0.82	0.96	37	\$2,299	\$400	0.81	0.79	290	\$2,325	\$2,401	0.82	0.94
Superior Outcomes - Portsmouth	108	\$2,453	\$2,543	0.92	0.96	13	\$2,189	\$414	0.83	0.79	121	\$2,424	\$2,315	0.91	0.94
Division (OH)	605	\$2,423	\$2,826	0.87	1.02	86	\$2,244	\$402	0.80	0.77	691	\$2,400	\$2,524	0.86	0.99
SHP Database (OH)		\$2,865	\$3,000	1.05	1.08		\$2,266	\$381	0.82	0.72		\$2,808	\$2,753	1.03	1.05
Superior Outcomes - Pittsburgh	248	\$2,771	\$2,979	1.05	1.14	32	\$2,253	\$361	0.85	0.79	280	\$2,712	\$2,680	1.03	1.10
Superior Outcomes - York	127	\$2,982	\$2,946	1.03	1.02	24	\$2,137	\$432	0.73	0.71	151	\$2,848	\$2,547	0.98	0.97
Division (PA)	375	\$2,842	\$2,968	1.04	1.10	56	\$2,203	\$392	0.80	0.76	431	\$2,759	\$2,633	1.01	1.05
SHP Database (PA)		\$2,851	\$2,993	1.00	1.05		\$2,295	\$401	0.80	0.72		\$2,786	\$2,691	0.98	1.01
Superior Outcomes - Roanoke	191	\$2,811	\$2,789	1.01	1.01	27	\$2,302	\$460	0.83	0.76	218	\$2,748	\$2,500	0.99	0.98
Superior Outcomes - Suffolk	207	\$2,670	\$2,876	0.97	1.04	28	\$2,246	\$377	0.80	0.76	235	\$2,619	\$2,578	0.95	1.01
Division (VA)	398	\$2,738	\$2,834	0.99	1.03	55	\$2,273	\$418	0.82	0.76	453	\$2,681	\$2,541	0.97	0.99
SHP Database (VA)		\$3,040	\$3,106	1.11	1.12		\$2,409	\$399	0.87	0.75		\$2,975	\$2,825	1.08	1.08

* Providers without final claims within the reporting period are omitted.

Therapy Visit Analysis

- ▶ Average Revenue, Case Weight, % of Episode Breakdowns

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SHP Financial Executive Advantage
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Services Category (Therapy Visits) Distribution	Early								Late								All
	0-5 Visits	6 Visits	7-9 Visits	10 Visits	11-13 Visits	14-15 Visits	16-17 Visits	18-19 Visits	0-5 Visits	6 Visits	7-9 Visits	10 Visits	11-13 Visits	14-15 Visits	16-17 Visits	18-19 Visits	
Division	44.5%	6.6%	14.6%	3.9%	8.6%	3.6%	2.2%	1.3%	9.7%	0.2%	0.5%	0.3%	0.3%	0.3%	0.1%	0.0%	3.3%
SHP National Database	33.7%	3.9%	11.0%	3.0%	7.6%	4.3%	3.7%	2.4%	16.8%	0.5%	1.6%	0.4%	1.2%	0.9%	0.9%	0.4%	7.9%
Superior Outcomes - Ft. Wayne	51.0%	5.8%	12.5%	1.9%	7.0%	5.4%	1.9%	1.2%	8.9%	0.0%	0.4%	0.0%	0.0%	0.4%	0.0%	0.0%	3.5%
Division (IN)	51.0%	5.8%	12.5%	1.9%	7.0%	5.4%	1.9%	1.2%	8.9%	0.0%	0.4%	0.0%	0.0%	0.4%	0.0%	0.0%	3.5%
SHP Database (IN)	33.3%	3.8%	11.1%	3.2%	8.2%	4.8%	4.0%	2.9%	14.0%	0.5%	1.2%	0.3%	0.8%	0.6%	0.6%	0.3%	10.3%
Superior Outcomes - Cleveland	37.9%	5.4%	12.9%	2.1%	8.6%	5.7%	2.9%	2.5%	10.4%	0.4%	0.7%	0.0%	0.7%	0.0%	0.0%	0.0%	10.0%
Superior Outcomes - Columbus	54.1%	9.7%	8.3%	3.1%	3.8%	1.7%	0.7%	1.0%	14.1%	0.0%	0.3%	0.7%	0.0%	0.3%	0.0%	0.0%	2.1%
Superior Outcomes - Portsmouth	62.0%	8.3%	8.3%	1.7%	8.3%	2.5%	2.5%	0.0%	5.8%	0.0%	0.8%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Division (OH)	48.9%	7.7%	10.1%	2.5%	6.5%	3.5%	1.9%	1.4%	11.1%	0.1%	0.6%	0.3%	0.3%	0.1%	0.0%	0.0%	4.9%
SHP Database (OH)	33.3%	3.5%	9.9%	2.5%	6.3%	4.1%	3.7%	2.5%	18.6%	0.4%	1.6%	0.4%	1.0%	0.8%	0.8%	0.5%	10.2%
Superior Outcomes - Pittsburgh	33.2%	4.6%	18.2%	5.7%	15.0%	5.4%	1.4%	1.8%	8.2%	0.4%	0.4%	0.4%	0.4%	0.4%	0.4%	0.0%	4.3%
Superior Outcomes - York	41.7%	6.6%	17.9%	4.6%	9.9%	2.0%	3.3%	2.0%	9.3%	0.0%	0.0%	0.7%	0.0%	0.7%	0.0%	0.0%	1.3%
Division (PA)	36.2%	5.3%	18.1%	5.3%	13.2%	4.2%	2.1%	1.9%	8.6%	0.2%	0.2%	0.5%	0.2%	0.5%	0.2%	0.0%	3.2%
SHP Database (PA)	42.5%	4.7%	11.5%	2.9%	7.4%	4.1%	3.2%	2.1%	11.7%	0.4%	0.9%	0.3%	0.7%	0.4%	0.4%	0.2%	6.7%
Superior Outcomes - Roanoke	40.4%	6.4%	24.3%	7.3%	5.5%	1.8%	1.8%	0.5%	9.6%	0.0%	0.9%	0.5%	0.5%	0.0%	0.0%	0.0%	0.5%
Superior Outcomes - Suffolk	43.4%	6.4%	14.9%	4.7%	11.1%	2.6%	3.8%	0.4%	8.5%	0.9%	0.9%	0.0%	0.9%	0.4%	0.0%	0.0%	1.3%
Division (VA)	41.9%	6.4%	19.4%	6.0%	8.4%	2.2%	2.9%	0.4%	9.1%	0.4%	0.9%	0.2%	0.7%	0.2%	0.0%	0.0%	0.9%
SHP Database (VA)	34.8%	4.3%	13.0%	3.4%	8.6%	4.5%	3.7%	2.6%	11.8%	0.4%	1.2%	0.3%	0.8%	0.6%	0.5%	0.2%	9.4%

Visit Utilization

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SHP Financial Executive Advantage
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Average Visits by Discipline	Non LUPAs							LUPAs							All						
	SN	HHA	PT	OT	ST	MSW	All	SN	HHA	PT	OT	ST	MSW	All	SN	HHA	PT	OT	ST	MSW	All
Division	6.13	1.05	5.05	1.22	0.20	0.09	13.75	2.15	0.02	0.46	0.06	0.00	0.02	2.71	5.61	0.92	4.46	1.07	0.17	0.08	12.32
SHP National Database	8.19	1.42	5.67	1.80	0.40	0.18	17.66	2.02	0.03	0.52	0.07	0.02	0.03	2.69	7.59	1.29	5.16	1.63	0.37	0.16	16.20
Superior Outcomes - Ft. Wayne	6.46	2.00	4.60	1.33	0.11	0.20	14.71	2.22	0.00	0.37	0.02	0.00	0.05	2.66	5.78	1.68	3.93	1.12	0.09	0.18	12.79
Division (IN)	6.46	2.00	4.60	1.33	0.11	0.20	14.71	2.22	0.00	0.37	0.02	0.00	0.05	2.66	5.78	1.68	3.93	1.12	0.09	0.18	12.79
SHP Database (IN)	7.67	1.77	5.79	2.51	0.40	0.16	18.30	1.98	0.04	0.48	0.10	0.01	0.03	2.64	7.15	1.61	5.30	2.29	0.37	0.15	16.87
Superior Outcomes - Cleveland	6.69	1.40	6.52	1.65	0.40	0.15	16.80	2.08	0.08	0.53	0.06	0.00	0.00	2.75	6.10	1.23	5.75	1.44	0.35	0.13	14.99
Superior Outcomes - Columbus	5.60	0.27	3.59	0.70	0.26	0.00	10.42	1.95	0.00	0.57	0.03	0.00	0.00	2.54	5.13	0.24	3.21	0.61	0.22	0.00	9.41
Superior Outcomes - Portsmouth	6.55	0.17	3.14	1.21	0.00	0.01	11.07	2.38	0.00	0.54	0.00	0.00	0.00	2.92	6.10	0.15	2.86	1.08	0.00	0.01	10.20
Division (OH)	6.21	0.71	4.69	1.17	0.27	0.06	13.11	2.07	0.03	0.55	0.03	0.00	0.00	2.69	5.69	0.62	4.18	1.03	0.23	0.05	11.81
SHP Database (OH)	8.60	1.85	5.63	2.13	0.49	0.18	18.87	2.02	0.03	0.46	0.09	0.02	0.02	2.65	7.97	1.68	5.14	1.94	0.44	0.16	17.34
Superior Outcomes - Pittsburgh	5.60	0.67	5.38	2.46	0.31	0.10	14.52	1.97	0.00	0.41	0.13	0.00	0.03	2.53	5.19	0.60	4.81	2.19	0.27	0.09	13.15
Superior Outcomes - York	6.21	1.81	5.89	1.01	0.00	0.17	15.09	2.33	0.04	0.38	0.08	0.00	0.04	2.88	5.60	1.53	5.01	0.86	0.00	0.15	13.15
Division (PA)	5.81	1.06	5.55	1.97	0.20	0.13	14.71	2.13	0.02	0.39	0.11	0.00	0.04	2.68	5.33	0.92	4.88	1.72	0.18	0.11	13.15
SHP Database (PA)	8.26	1.29	5.06	1.90	0.37	0.12	17.00	2.15	0.02	0.39	0.07	0.02	0.02	2.67	7.55	1.14	4.52	1.69	0.33	0.11	15.33
Superior Outcomes - Roanoke	5.52	0.95	4.90	0.96	0.15	0.06	12.53	2.33	0.00	0.52	0.19	0.00	0.04	3.07	5.13	0.83	4.35	0.86	0.13	0.06	11.36
Superior Outcomes - Suffolk	6.72	1.15	5.82	0.16	0.10	0.05	14.01	2.14	0.00	0.39	0.00	0.00	0.00	2.54	6.18	1.01	5.17	0.14	0.09	0.05	12.64
Division (VA)	6.15	1.05	5.38	0.54	0.12	0.06	13.30	2.24	0.00	0.45	0.09	0.00	0.02	2.80	5.67	0.92	4.78	0.49	0.11	0.05	12.03
SHP Database (VA)	7.94	0.89	6.23	1.86	0.57	0.10	17.58	1.88	0.02	0.69	0.09	0.03	0.01	2.72	7.31	0.80	5.65	1.67	0.51	0.09	16.04

* Providers without final claims within the reporting period are omitted.

Visit Utilization by DX and HHRG



Visit Utilization by Diagnosis and HHRG

Superior Outcomes Home Health

06/01/2015 - 05/31/2016

Report Date: 6/28/2016

Visits by Primary Diagnosis

Primary Diagnosis Group	Your Average Visits								SHP State (PA)							SHP National						
	SN	PT	OT	ST	MSW	HHA	All	Episode Count	SN	PT	OT	ST	MSW	HHA	All	SN	PT	OT	ST	MSW	HHA	All
Infectious/Parasitic	7.2	4.0	0.6	0.0	0.2	1.4	13.4	18	7.8	3.6	1.4	0.1	0.1	1.1	14.1	8.0	4.1	1.4	0.2	0.2	1.1	14.9
Neoplasms	6.2	2.9	0.8	0.3	0.3	1.1	11.6	37	7.7	2.5	0.9	0.2	0.2	1.2	12.6	7.4	3.1	1.0	0.3	0.2	1.3	13.3
Endocrine/Nutrit/Immun (not Diabetes)	4.0	3.0	0.7	0.0	0.3	0.0	8.0	3	7.5	3.1	1.0	0.2	0.1	1.0	12.8	7.5	3.1	1.0	0.2	0.2	1.3	13.3



Visit Utilization by Diagnosis and HHRG

Superior Outcomes Home Health

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Visits by HHRG without LUPAs

HHRG	Your Average Visits								SHP State (PA)							SHP National						
	SN	PT	OT	ST	MSW	HHA	All	Episode Count	SN	PT	OT	ST	MSW	HHA	All	SN	PT	OT	ST	MSW	HHA	All
C1F1S1	6.3	-	-	-	0.2	0.2	6.8	13	7.6	-	-	-	0.1	0.8	8.5	7.7	-	-	-	0.2	1.0	8.8
C1F1S2	6.3	-	-	-	0.5	4.5	11.3	4	5.5	-	-	-	0.1	1.4	7.0	5.4	-	-	-	0.2	1.3	6.9
C1F1S3	6.7	-	-	-	0.0	3.3	10.0	3	6.3	-	-	-	0.1	1.2	7.7	5.6	-	-	-	0.2	1.2	6.9
C1F1S4	-	-	-	-	-	-	-	0	5.2	-	-	-	0.2	0.4	5.8	5.3	-	-	-	0.2	0.5	6.0
C1F1S5	0.0	-	-	-	0.0	0.0	0.0	1	5.9	-	-	-	0.2	0.4	6.5	5.6	-	-	-	0.2	0.6	6.4
C1F2S1	6.3	-	-	-	0.3	0.7	7.2	52	7.8	-	-	-	0.1	1.2	9.1	8.4	-	-	-	0.2	1.4	9.9
C1F2S2	4.5	-	-	-	0.3	0.0	4.8	8	5.7	-	-	-	0.1	1.0	6.8	5.7	-	-	-	0.2	1.2	7.0
C1F2S3	6.8	-	-	-	0.1	1.4	8.3	12	5.9	-	-	-	0.1	1.0	7.0	5.8	-	-	-	0.2	1.1	7.0
C1F2S4	5.8	-	-	-	0.2	0.0	6.0	5	6.2	-	-	-	0.1	0.9	7.2	6.0	-	-	-	0.2	1.0	7.2
C1F2S5	6.9	-	-	-	0.5	3.4	10.8	8	6.6	-	-	-	0.1	1.2	8.0	6.4	-	-	-	0.2	1.2	7.8
C1F3S1	7.3	-	-	-	0.2	2.8	10.3	16	7.7	-	-	-	0.1	1.8	9.6	8.4	-	-	-	0.2	1.9	10.5
C1F3S2	5.0	-	-	-	0.0	1.9	6.9	7	5.7	-	-	-	0.1	1.0	6.9	5.7	-	-	-	0.2	1.2	7.0
C1F3S3	4.4	-	-	-	0.3	0.4	5.1	12	5.9	-	-	-	0.1	1.1	7.2	6.0	-	-	-	0.2	1.2	7.4
C1F3S4	10.0	-	-	-	0.5	4.5	15.0	2	6.0	-	-	-	0.1	1.3	7.4	6.2	-	-	-	0.2	1.2	7.6
C1F3S5	7.3	-	-	-	0.5	0.5	8.3	6	6.4	-	-	-	0.2	1.5	8.1	6.5	-	-	-	0.2	1.3	8.0
C2F1S1	6.2	-	-	-	0.1	0.1	6.5	25	8.5	-	-	-	0.1	0.7	9.4	8.3	-	-	-	0.2	0.9	9.4
C2F1S2	12.0	-	-	-	1.0	0.0	13.0	1	6.6	-	-	-	0.1	1.5	8.3	6.4	-	-	-	0.2	1.4	8.0
C2F1S3	-	-	-	-	-	-	-	8	5.6	-	-	-	0.1	-	-	-	-	-	-	-	-	-

Scorecards

Setting Parameters

- ▶ First, download and review the **User Guide** for the report in order to understand the parameters that can be set
- ▶ Next select either the **Scorecard Overview** or **Scorecard**, depending on which report you wish to run

Best Practice Recommendation:

*It is typically easiest to run the **Scorecard Overview** report first, then drill-down to the individual **Scorecard** report that you wish to view.*

REPORTS :: Select Report Parameters - Scorecard Overview

DASHBOARD

APPLICATIONS

REPORTS

- ▶ My Recent Reports
- ▼ Agencies
 - > Clinical Performance
 - > Hospital Utilization
 - > Financial/Operational
 - ▼ **Scorecards**
 - **Scorecard Overview**
 - Scorecard
 - > Custom
- ▶ Custom Reporting
- ▶ HHCAHPS
- ▶ Home Infusion
- ▶ Hospice
- ▶ CAHPS Hospice
- ▶ Patient Satisfaction

SEND DATA

ADMIN TOOLS

SHPUniversity™

Scorecard Overview

Provides a high level overview of all your d... CCNs, referral sources, payers, DX categories, prior facilities, physicians, or custom groupings in one sortable report. Metrics include patient volume, SHP Alert usage, case weight, hospitalization rates, outcomes, process measures, PAEs, HHCAHPS, and more. Drill down to the full detailed Scorecard for any person or group.

[View on Web](#)

[Report User Guide](#)

Parameters

Provider Selection

Enterprise Superior Outcomes

Data Type

SOC/ROC Clinician

Report Layout

Use Recommended

Reporting Period

June 2015 → May 2016 Standard Metrics (DC/TRF Date where applicable)

March 2015 → February 2016 30 & 60 Day Hospitalizations (SOC Date)

March 2015 → February 2016 HHCAHPS (Sample Months)

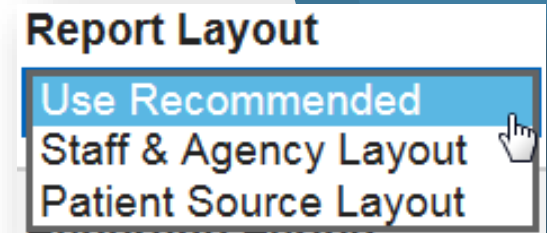
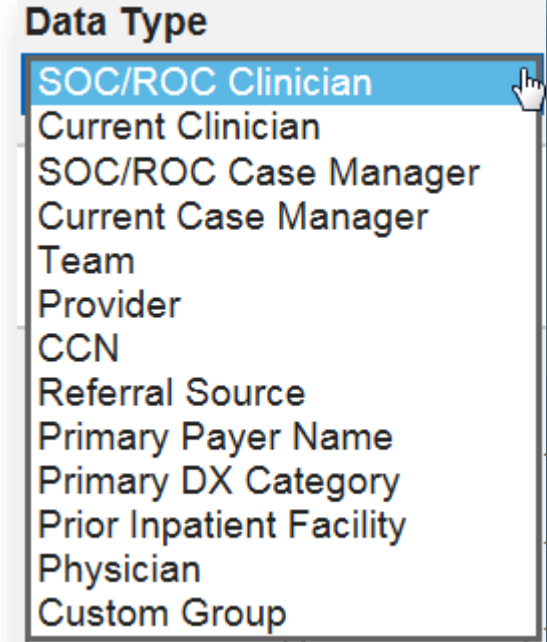
Use CMS Reporting Period dates

Date Expected: 01/2017

Data Types and Report Layouts

- ▶ Use the **Data Type** drop-down to select which element you would like to run the report by (e.g. – SOC/ROC Clinician, Team, Referral Source, etc.)
 - ▶ **NOTE:** Some of the new data types must be specifically added to the SHP interface by your home health software vendor.

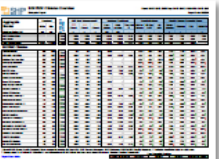
If you are not sure which of these fields your vendor provides, please contact your SHP Customer Manager for assistance.
- ▶ Depending on which **Data Type** you select, one of the two available **Report Layouts** will be automatically selected. However, you can use the drop-down to manually select either **Report Layout** for any **Data Type**.



Running the Report

- ▶ Now that the parameters are set, you're ready to run the report by clicking the [View on Web](#) button.

Scorecard Overview



Provides a high level overview of all your clinicians, case managers, teams, providers, CCNs, referral sources, payers, DX category groupings in one sortable report. Metrics include weight, hospitalization rates, outcomes, process more. Drill down to the full detailed Scorecard

[View on Web](#)

SHP Report Viewer - Internet Explorer


1 of 1 Find | Next

SHP Primary DX Category Overview
Superior Outcomes Home Health

Stand: 06/15-05/16, 30/60 Day: 03/15-02/16, HHCAHPS: 03/15-02/16
Report Date: 6/13/2016

Aggregate Scores	Caseload		HHC Score Overall*	Payer Mix			Medicare Traditional		Hospitalizations				Quality Measure Composite Scores			
	SOCs	DCs		Medicare Trad	Medicare HMO/Adv	Non Medicare	Case Weight	Visits (all disc)	30-Day Rehos All	Rehos Rev DX	60-Day ACH	All ACH	Process Measures	Outcomes	PAEs	HHCAHPS
High/Low Better (+/-)	n/a	n/a		n/a	n/a	n/a	n/a	n/a	-	-	-	-	+	+	-	+
SHP National Avg			88%	61%	23%	17%	1.05	16.22	12%	12%	16%	24%	95%	72%	0.53%	86%
SHP State (FL)			88%	80%	13%	7%	1.15	18.07	13%	13%	16%	24%	95%	73%	0.46%	86%
Your Organization	6,792	5,886	88%	65%	34%	1%	1.16	12.94	12%	14%	16%	21%	96%	77%	0.31%	82%
Primary DX Category																
Aftercare	631	739	91%	58%	39%	2%	1.15	13.10	8%	6%	9%	12%	96%	82%	0.12%	90%
Blood/Blood-Forming Organs	37	32	86%	73%	22%	5%	0.95	9.53	29%	0%	29%	30%	97%	62%	0.78%	79%
Circulatory - CVD	314	287	89%	67%	33%	0%	1.51	15.99	11%	33%	17%	21%	95%	81%	0.25%	80%
Circulatory - Heart Failure	306	247	89%	77%	23%	0%	1.14	12.82	21%	22%	25%	38%	96%	75%	0.20%	85%
Circulatory - Hypertension	148	126	88%	74%	24%	1%	1.07	10.62	6%	0%	10%	20%	95%	76%	0.49%	85%
Circulatory (not HTN, HF or CVD)	585	499	89%	73%	26%	1%	1.04	10.93	16%	8%	20%	22%	95%	78%	0.25%	83%
Congenital Anomalies	3	4	90%	71%	29%	0%	0.66	8.00	0%	-	0%	20%	90%	84%	0.00%	94%
Diabetes	155	137	88%	52%	47%	1%	1.13	12.57	11%	0%	11%	21%	95%	73%	0.91%	83%
Digestive	198	172	88%	68%	32%	0%	1.07	10.87	13%	0%	17%	24%	95%	78%	0.20%	80%
Endocrine/Nutrit/Immun (not Diabetes)	25	25	87%	67%	33%	0%	1.00	11.00	9%	100%	14%	21%	95%	74%	0.34%	73%
Factors Influencing Status/Sup Class	1,144	957	90%	61%	38%	1%	1.06	11.23	8%	5%	11%	13%	95%	83%	0.22%	84%

Sorting the Overview Report

- ▶ To sort the report, click on the  buttons at the top of each column.
- ▶ To sort by a different column, simply click on the  for that column.

SHP Report Viewer - Internet Explorer

1 of 1 Find | Next

SHP Primary DX Category Overview Stand: 06/15-05/16, 30/60 Day: 03/15-02/16, HHCAHPS: 03/15-02/16
Superior Outcomes Home Health Report Date: 6/16/2016

Aggregate Scores	Caseload		Overall* HHC Score	Payer Mix			Medicare Traditional		Hospitalizations				Quality Measure Composite Scores			
	SOCs	DCs		Medicare Trad	Medicare HMO/Adv	Non Medicare	Case Weight	Visits (all disc)	30-Day Rehos All	Rehos Rev DX	60-Day ACH	All ACH	Process Measures	Outcomes	PAEs	HHCAHPS
High/Low Better (+/-)	n/a	n/a		n/a	n/a	n/a	n/a	n/a	-	-	-	-	+	+	-	+
SHP National Avg			88%	61%	23%	17%	1.05	16.22	12%	12%	16%	24%	95%	72%	0.53%	86%
SHP State (CA)			87%	49%	37%	15%	0.98	13.56	11%	10%	13%	18%	95%	68%	0.48%	84%
Your Organization	6,792	5,886	88%	65%	34%	1%	1.16	12.94	12%	14%	16%	21%	96%	77%	0.31%	82%
Primary DX Category																
Mental/Behavioral/Neurodev	27	29	85%	62%	38%	0%	1.09	10.89	20%	100%	6%	15%	95%	69%	0.63%	79%
(Disclosure Not Authorized)	0	0	-	-	-	-	-	-	-	-	-	-	-	-	-	70%
Endocrine/Nutri/Immun (not Diabetes)	25	25	87%	67%	33%	0%	1.00	11.00	9%	100%	14%	21%	95%	74%	0.34%	73%
Infectious/Parasitic	69	54	88%	71%	29%	0%	1.09	11.46	13%	67%	13%	19%	94%	79%	0.65%	74%
Skin/Subcutaneous - Pressure Ulcers	102	76	86%	57%	42%	1%	1.07	14.87	28%	0%	30%	41%	96%	61%	1.16%	78%
Blood/Blood-Forming Organs	37	32	86%	73%	22%	5%	0.95	9.53	29%	0%	29%	30%	97%	62%	0.78%	79%
Neoplasms	152	116	88%	64%	36%	1%	1.05	11.53	0%	-	36%	39%	95%	74%	0.15%	79%
Digestive	198	172	88%	68%	32%	0%	1.07	10.87	13%	0%	17%	24%	95%	78%	0.20%	80%
Circulatory - CVD	314	287	89%	67%	33%	0%	1.51	15.99	11%	33%	17%	21%	95%	81%	0.25%	80%
Diabetes	155	137	88%	52%	47%	1%	1.13	12.57	11%	0%	11%	21%	95%	73%	0.91%	83%
Circulatory (not HTN, HF or CVD)	585	499	89%	73%	26%	1%	1.04	10.93	16%	8%	20%	22%	95%	78%	0.25%	83%
(No DX)	0	0	-	-	-	-	-	-	-	-	-	-	-	-	-	84%
Factors Influencing Status/Sup Class	1,144	957	90%	61%	38%	1%	1.06	11.23	8%	5%	11%	13%	95%	83%	0.22%	84%
Injury/Poisoning	608	488	89%	63%	36%	1%	1.18	16.26	11%	9%	14%	19%	96%	76%	0.38%	85%
Circulatory - Hypertension	148	126	88%	74%	24%	1%	1.07	10.62	6%	0%	10%	20%	95%	76%	0.49%	85%
Circulatory - Heart Failure	306	247	89%	77%	23%	0%	1.14	12.82	21%	22%	25%	38%	96%	75%	0.20%	85%
Pregnancy/Birth/Puerperium/Perinatal	1	0	-	0%	0%	100%	-	-	-	-	-	-	-	-	-	-
Therapy/Rehab	1	1	-	100%	0%	0%	1.08	7.00	-	-	0%	0%	100%	83%	0.00%	-

Drilling-Down to the Scorecard Report

- ▶ Click on any of the blue names in the left-hand column of the **Overview** report to open up the **Scorecard** for that value.

SHP Report Viewer - Internet Explorer

Primary DX Category Overview
Superior Outcomes Home Health
Stand: 06/15-05/16, 30/60 Day: 03/15-02/16, HHCAHPS: 03/15-02/16
Report Date: 6/13/2016

Aggregate Scores	Caseload		Overall HHC Score	Payer Mix			Medicare Traditional		Hospitalizations			Quality Measure Composite Scores				
	SOCs	DCs		Medicare Trad	Medicare HMO/Adv	Non Medicare	Case Weight	Visits (all disc)	30-Day Rehos All	60-Day ACH Rev DX	All ACH	Process Measures	Outcomes	PAEs	HHCAHPS	
High/Low Better (+/-)	n/a	n/a		n/a	n/a	n/a	n/a	n/a	-	-	-	+	+	-	+	
SHP National Avg			88%	61%	23%	17%	1.05	16.22	12%	12%	16%	24%	95%	72%	0.53%	86%
SHP State (FL)			88%	80%	13%	7%	1.15	18.07	13%	13%	16%	24%	95%	73%	0.46%	86%
Your Organization	6,792															

Primary DX Category

- Aftercare** 631
- Blood/Blood-Forming Organs 37
- Circulatory - CVD 314
- Circulatory - Heart Failure 306
- Circulatory - Hypertension 148
- Circulatory (not HTN, HF or CVD) 585
- Congenital Anomalies 3
- Diabetes 155
- Digestive 198
- Endocrine/Nutrit/Immun (not Diabetes) 25
- Factors Influencing Status/Sup Class 1,144

SHP Report Viewer - Internet Explorer

Primary DX Category Scorecard
Superior Outcomes Home Health
Stand: 06/15-05/16, 30/60 Day: 03/15-02/16, HHCAHPS: 03/15-02/16
Report Date: 6/13/2016

91% Overall HHC Score

Primary DX Category: Aftercare

Caseload	Primary DX Category	Your Org Avg	Your Org Total	Primary DX % of Total
SOCs (01)	631	271.68	6,792	9.29%
ROCs (03)	41	34.30	789	5.20%
Recerts (03s - Day 55-60), (04)	68	63.17	1,453	4.68%
Transfers (06), (07)	114	71.09	1,635	6.97%
Discharges (07), (08), (09)	739	245.25	5,886	12.56%



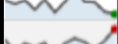




Top Primary Diagnosis Categories - Not applicable when run by Primary DX Categories

Primary DX Category	Your Org	SHP State (FL) Agency	SHP National Agency

Spark Lines

What are spark lines?

- ▶ **Spark lines** are small graphics used to demonstrate trended historical performance.
- ▶ These mini-trends appear next to each score and indicate the high and low point for each measure over the 12 month period covered by the graph.

Medicare Traditional	High/Low Better(+/-)	SOC/ROC Clinician	SOC/ROC Clinician	Your Org
Financial Performance/RAC Metrics				
Avg Case Wt (9,253 Pymt Eps Completed)	na		1.17	1.17
Avg Therapy Visit Δ	-		3.06	3.06
LUPAs	-		6.44%	6.44%
Downcodes	-		23.35%	23.35%
Outliers	-		2.47%	2.47%
Recert Rate ((SOCs + Recerts) / SOCs)			2.08	2.08
Avg Length of Stay (Days / Episode of Care)			68.86	68.86

Drilling-down to Patient Detail

- ▶ When viewing the Scorecard report in the Report Viewer, you can drill-down to patient detail reports for Financial metrics, Outcomes, Process Measures, Potentially Avoidable Events and all Hospitalization measures.

The image shows two overlapping browser windows from the SHP Report Viewer. The background window displays a 'Report User Guide' for 'Page 2' titled 'SOC/ROC Clinician: DEMO Clinician 4'. It features a table of 'Home Health Compare Outcome Measures' with columns for 'High/Low Better(+/-)', 'SOC/ROC Clinician', and 'Your Org'. The 'Dyspnea' row is highlighted, showing a risk-adjusted improvement of 80.31% and an actual improvement of 76.92%.

The foreground window displays the 'Outcomes Patient Detail' report for 'Dyspnea Declined' from 06/01/2012 to 05/31/2016. It includes a legend for 'Select Report Mode' (Eligible Unimproved, Improved, Stabilized, Declined, All Patients) and a grid of 'Functional Outcomes' (ADLs, IADLs) and 'Health Status Outcomes'. A red box highlights the 'Dyspnea' outcome in the grid, with an arrow pointing to the patient detail table below. The table lists patient information (Name, S/ROC Clinician, S/ROC Case Mgr, DC) and performance metrics (Length of Service, and various outcome scores).

Patient	S/ROC Clinician	S/ROC Case Mgr	DC	Length of Service	ADLs	IADLs	Health Status Outcomes	Utilization Outcomes
DEMO Aguilar, Oprah (DEMO00000051X)	DEMO Clinician 4	DEMO Case Manager 4	06/04/12	59	★	★	★	★
DEMO Aguilar, Oprah (DEMO00000051X)	DEMO Clinician 4	DEMO Case Manager 4	09/04/12	60	★	★	★	★
DEMO Aguilar, Oprah (DEMO00000051X)	DEMO Clinician 4	DEMO Case Manager 4	12/04/12	59	★	★	★	★
DEMO Aguilar, Oprah (DEMO00000051X)	DEMO Clinician 4	DEMO Case Manager 4	03/04/13	57	★	★	★	★
DEMO Miranda, Ulia (DEMO000000347X)	DEMO Clinician 4	DEMO Case Manager 4	08/17/12	11	⊖	⊖	⊖	⊖
DEMO Miranda, Ulia (DEMO000000347X)	DEMO Clinician 4	DEMO Case Manager 4	11/17/12	11	⊖	⊖	⊖	⊖
DEMO Miranda, Ulia (DEMO000000347X)	DEMO Clinician 4	DEMO Case Manager 4	02/17/13	11	⊖	⊖	⊖	⊖

SHP Report Review Accountabilities and Responsibilities

Download SHP Report Review Process Documents

- ▶ SHP University → Classes & Manuals → SHP for Agencies™ Educational Catalog → Course Materials
- ▶ There are 4 versions available

SHP for Agencies Education Catalog

Course Materials

Document	
SHP for Agencies™ Education Guide	Download
101 Course Presentation Handouts	Download
102 Course Presentation Handouts	Download
SHP Utilization Sample Workflow: Point-of-Care	Download
SHP Utilization Sample Workflow: Manual/Paper	Download
SHP Report Review Process: Executive Managers (C-Suite)	Download
SHP Report Review Process: Clinical Managers/Supervisors	Download
SHP Report Review Process: PI Manager/Coordinator	Download
SHP Report Review Process: QR Nurse (OASIS Review)	Download

Modify the Process Documents As Needed

- ▶ Tailor to fit your specific structure and job function
- ▶ Use the document as a reminder of which reports to look at and how often to review them



Executive Management Report Review Schedule SHP Solutions™ for Agencies

Report Purpose	Report Name	Frequency
Review real-time widgets to identify issues. Drill-down on widgets with red borders (indicates threshold exceeded).	SHP Dashboard <i>Configure the Dashboard to show the metrics most relevant to you.</i>	Weekly
Monitor RAC Risk, LUPA's, Outliers, Revenue & Case Weight, Visit Utilization and Therapy Utilization with drill-down to patient detail.	Financial Executive Advantage™ <i>Birds-eye view of key financial measures</i>	Monthly
Review case-mix scoring factors to ensure correct reimbursement.	Case Mix Distribution Report	Monthly or Quarterly
Review publicly reported scores with drill-downs to patient detail. <i>Note: Use Clinical Executive Advantage™ for comparison between locations</i>	Home Health Compare Report & Clinical Executive Advantage™ <i>Color coded to identify issues</i>	Monthly
Monitor 30-day rehospitalization rates, including breakouts for DX penalty groups.	Rehospitalization Report <i>Key report for demonstrating value in Transitions in Care partnerships</i>	Monthly
Monitor traditional hospitalization and emergent care rates (SOC/ROC to DC/Transfer) as well as breakouts by diagnosis and reason.	Hospital & Emergent Care Utilization Report <i>Provides a comprehensive analysis of all hospitalizations.</i>	Monthly
Identify specific outcomes targeted for improvement, drill-down to patient detail, set goals and monitor.	Trended Outcomes™ <i>Track your progress on a 12-month rolling average</i>	Quarterly
Monitor individual staff performance, identify areas for commendation and improvement to enhance accountability.	Scorecards <i>Review quality & financial measures for staff members</i>	Quarterly
Review the 5 core HHCAHPS patient satisfaction measures, drill-down to clinician and patient detail.	HHCAHPS Scores & Benchmarks with Drill Down <i>Key metric for referrals</i>	Quarterly
Monitor and benchmark Direct Costs by Discipline.	Direct Cost Per Visit	Quarterly

Final Review

What's Next?



- ▶ Make sure that your staff members have SHP access and have attended training
- ▶ Include SHP education for new staff members during orientation
- ▶ Download the SHP Report Review process documents and use them to establish which reports you will review on a weekly, monthly, and quarterly basis
- ▶ Review current reporting to see if SHP can simplify and/or replace existing processes
- ▶ Set goals for your agency, monitor improvement, and reward your staff as goals are met





STRATEGIC HEALTHCARE PROGRAMS

Thank you for attending!

Questions? Please Contact Us At:

Support@SHPdata.com

or call (805) 963-9446

