

Report Interpretation Guide  
Trended Process  
Measures

**Table of Contents**

Introduction ..... 3  
Quick View of Report Specifications ..... 3  
Sample Report..... 4  
    Page 1 ..... 4  
    Page 2..... 5  
Report Structure ..... 6  
    Header Definitions ..... 6  
    Row and Column Definitions ..... 6  
    Measures Definitions ..... 6  
    Measure Definition Notes ..... 8  
Other Resources ..... 8

## Introduction

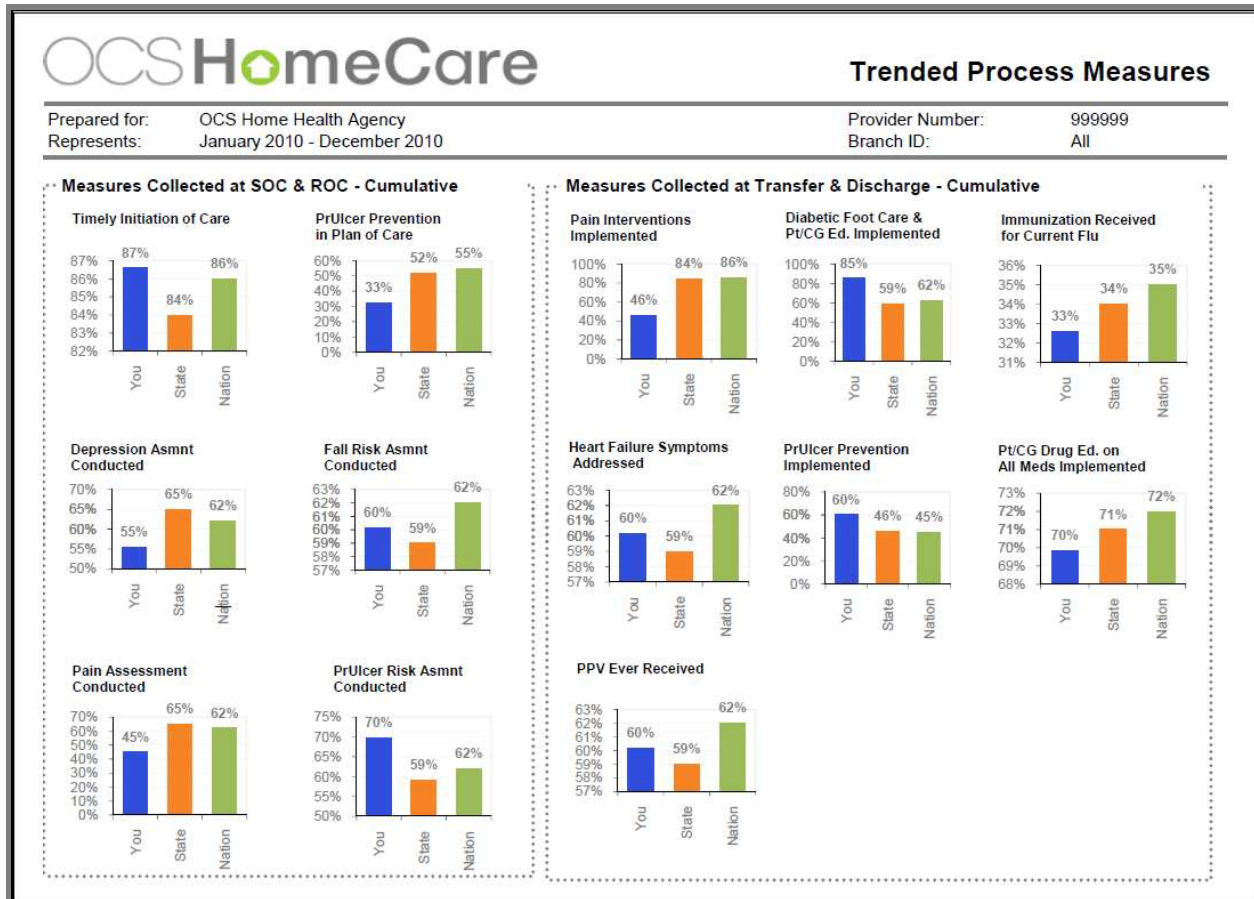
The Trended Process Measures is a high-level report provides home health organizations with performance data for the publicly-reported Home Health Compare (HHC) process measures. While the data that is published by CMS on HHC represents rolling one-year norms and is updated quarterly, this report provides norms for each of the previous twelve months along with a roll-up and is updated monthly.

## Quick View of Report Specifications

Report Attribute	Specification
Patient Universe	Depends on the measure. See measure descriptions for more information.
Payers	No limitations; all payers for patients included in patient universe.
Time period	Results presented for 12 individual months. Cumulative and comparative columns are for the complete 12-month window.
OASIS Version & Time Points	OASIS-C; Time points depend on the measure. See measure descriptions for more information.
Data Source	OASIS instrument.
Minimum Data Requirement	OASIS-C instrument must be complete; two OASIS assessments (for example, an SOC assessment and a discharge assessment) are required for some measures.
Agency Uses	Clinical, OBQI
Report Frequency	A new month's data will be made available on the 1st of the following month, likewise for quarter and year timeframes. Norms for previous timeframes will be recalculated daily.
Report Location	Connection / OnDemand tab / Clinical Outcomes Folio / Trended Proc Meas tab
Comparative Groups	National and State norms
Risk Adjustment	Data is not risk adjusted; CMS has not yet released risk adjustment methodology for OASIS-C measures, nor have they definitely announced plans to risk adjust process measure results.

### Sample Report

#### Page 1



Legend		Num = Numerator	Den = Denominator	Rate = Observed Rate	Cum. = Cumulative									
<b>Timely Care</b>														
<b>Timely Initiation of Care</b>														
		Jan.	Feb.	Mar.	Apr.	May	Jun.	Jul.	Aug.	Sept.	Oct.	Nov.	Dec.	Cum.
Your Agency	Num.	52	28	36	46	38	62	59	42	44	53	57	73	590
	Den.	57	34	37	52	41	65	65	47	50	58	60	75	641
	Rate	91.2%	82.4%	97.3%	88.5%	92.7%	95.4%	90.8%	89.4%	88.0%	91.4%	95.0%	97.3%	92.0%
National		89.5%	89.9%	90.2%	90.4%	90.4%	90.7%	91.0%	91.1%	91.0%	90.5%	90.9%	91.3%	90.6%
State		89.1%	88.8%	89.4%	89.0%	89.6%	89.8%	90.0%	90.4%	89.8%	88.8%	90.5%	90.8%	89.7%
<b>Assessment</b>														
<b>Depression Assessment Conducted</b>														
		Jan.	Feb.	Mar.	Apr.	May	Jun.	Jul.	Aug.	Sept.	Oct.	Nov.	Dec.	Cum.
Your Agency	Num.	55	34	36	53	41	65	64	46	50	57	60	75	636
	Den.	57	34	37	53	41	65	65	47	50	58	60	75	642
	Rate	96.5%	100.0%	97.3%	100.0%	100.0%	100.0%	98.5%	97.9%	100.0%	98.3%	100.0%	100.0%	99.1%
National		91.7%	92.8%	93.5%	94.1%	94.5%	95.0%	95.3%	95.6%	96.0%	96.3%	96.5%	96.8%	94.9%
State		96.8%	97.5%	96.8%	97.1%	97.0%	97.6%	97.4%	97.9%	97.8%	98.0%	97.9%	98.5%	97.5%
<b>Fall Risk Assessment Conducted</b>														
		Jan.	Feb.	Mar.	Apr.	May	Jun.	Jul.	Aug.	Sept.	Oct.	Nov.	Dec.	Cum.
Your Agency	Num.	51	30	34	47	36	56	59	45	44	50	49	94	595
	Den.	51	30	34	47	36	56	59	45	44	50	49	94	595
	Rate	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
National		94.4%	94.7%	94.4%	94.2%	94.0%	93.8%	93.9%	93.6%	93.7%	93.5%	93.7%	93.6%	93.9%
State		97.2%	96.8%	97.2%	97.4%	97.0%	97.0%	96.9%	96.4%	97.1%	96.9%	96.7%	96.5%	96.9%
<b>Pain Assessment Conducted</b>														
		Jan.	Feb.	Mar.	Apr.	May	Jun.	Jul.	Aug.	Sept.	Oct.	Nov.	Dec.	Cum.
Your Agency	Num.	56	32	36	52	40	65	65	46	49	58	60	75	634
	Den.	57	34	37	53	41	65	65	47	50	58	60	75	642
	Rate	98.2%	94.1%	97.3%	98.1%	97.6%	100.0%	100.0%	97.9%	98.0%	100.0%	100.0%	100.0%	98.8%
National		97.0%	97.4%	97.6%	97.8%	97.8%	97.9%	97.9%	98.0%	98.1%	98.2%	98.2%	98.3%	97.9%
State		96.9%	96.7%	96.3%	96.7%	96.6%	97.8%	97.7%	97.8%	98.1%	98.1%	98.3%	98.4%	97.4%
<b>Pressure Ulcer Risk Assessment Conducted</b>														
		Jan.	Feb.	Mar.	Apr.	May	Jun.	Jul.	Aug.	Sept.	Oct.	Nov.	Dec.	Cum.
Your Agency	Num.	56	34	36	53	41	65	64	46	50	57	59	75	636
	Den.	57	34	37	53	41	65	65	47	50	58	60	75	642
	Rate	98.2%	100.0%	97.3%	100.0%	100.0%	100.0%	98.5%	97.9%	100.0%	98.3%	98.3%	100.0%	99.1%
National		96.5%	96.7%	97.0%	97.2%	97.3%	97.4%	97.5%	97.6%	97.7%	97.9%	98.0%	98.1%	97.4%
State		94.6%	94.8%	95.2%	94.8%	95.3%	95.7%	96.3%	96.1%	95.3%	96.2%	96.5%	96.4%	95.6%
<b>Care Planning</b>														
<b>Pressure Ulcer Prevention in POC</b>														
		Jan.	Feb.	Mar.	Apr.	May	Jun.	Jul.	Aug.	Sept.	Oct.	Nov.	Dec.	Cum.
Your Agency	Num.	7	3	2	2	2	2	3	7	16	23	20	21	108
	Den.	12	12	20	46	34	55	41	22	27	23	22	23	337
	Rate	58.3%	25.0%	10.0%	4.3%	5.9%	3.6%	7.3%	31.8%	59.3%	100.0%	90.9%	91.3%	32.0%
National		87.9%	88.8%	89.6%	90.1%	90.8%	91.0%	91.4%	91.7%	92.1%	92.9%	93.3%	93.3%	91.1%
State		90.3%	90.3%	91.2%	88.7%	87.2%	87.3%	89.0%	89.4%	88.7%	89.4%	88.3%	89.6%	89.1%

## Report Structure

### Header Definitions

Element	Definition
Prepared for:	Agency Name
Provider Number:	Agency ID (M0010)
Represents:	Assessments completed between the start and end months
Branch ID:	Branch ID (M0016)

### Row and Column Definitions

Element	Definition
Numerator	Number of patients who received the process in question
Denominator	Total number of patients who were appropriate to receive the process
Rate	The numerator divided by the denominator for the month
Cumulative Score (Cum.)	The numerator, denominator, and rate for year-to-date
National Norm	The rate for all US agencies
State Norm	The rate for agencies in the same state

### Measures Definitions

Element	Numerator	Denominator
<b>Timely Care</b>		
Timely Initiation of Care	Count of SOC/ROC assessments in which the SOC/ROC (M0030/M0032) date was on or before the physician-specified date (M0102) OR within 2 days of the referral date (M0104) or inpatient discharge date (M1005) whichever is later	Count of end assessments (RFA = 6, 7, 8, or 9) where M0102, M0104, or M1005 was answered at SOC/ROC
<b>Assessment</b>		
Depression Assessment Conducted	Count of SOC/ROC assessments in which the patient was screened for depression (using a standardized depression screening tool) at SOC/ROC (M1730, M1710, M1720)	Count of end assessments (RFA = 6, 7, 8, or 9); excludes episodes for which the patient is nonresponsive
Fall Risk Assessment Conducted	Count of SOC/ROC assessments in which the patient, if 65 or older, had a multi-factor fall risk assessment at SOC/ROC (M1910)	Count of end assessments (RFA = 6, 7, 8, or 9) where patient was 65 years and older at SOC/ROC

Element	Numerator	Denominator
Pain Assessment Conducted	Count of SOC/ROC assessments in which the patient was assessed for pain, using a standardized pain assessment tool, at SOC/ROC (M1240)	Count of end assessments (RFA = 6, 7, 8, or 9)
Pressure Ulcer Risk Assessment Conducted	Count of SOC/ROC assessments in which the patient was assessed for risk of developing pressure ulcers at SOC/ROC (M1300)	Count of end assessments (RFA = 6, 7, 8, or 9)
<b>Care Planning</b>		
Pressure Ulcer Prevention in Plan of Care	Count of SOC/ROC assessments in which interventions to prevent pressure ulcers were included in the physician-ordered plan of care for patients assessed to be at risk for pressure ulcers (M2250_f = Yes)	Count of end assessments (RFA = 6, 7, 8, or 9) where M2250_f answered Yes/No at SOC/ROC
<b>Care Plan Implementation</b>		
Heart Failure Symptoms Addressed <sup>[1]</sup>	Count of short term episodes of care in which the patient exhibited symptoms of heart failure and appropriate actions were taken (M1500, M1510)	Count of short term episodes of care (RFA = 6, 7, or 9) in which the patient exhibited symptoms of heart failure
Pain Interventions Implemented <sup>[1]</sup>	Count of short term episodes of care in which the patient had pain and pain interventions were included in the physician-ordered plan of care and implemented (M2400_d = Yes)	Count of short term episodes of care (RFA = 6, 7, or 9) in which the patient had pain and M2400_d answered Yes/No at SOC/ROC
Diabetic Foot Care and Patient/Caregiver Education Implemented <sup>[1]</sup>	Count of short term episodes of care in which diabetic foot care and education were included in the physician-ordered plan of care and implemented for patients with diabetes (M2400_a = Yes)	Count of short term episodes of care (RFA = 6, 7, or 9) in which the diabetic foot care and education are appropriate for the patient; episodes are excluded if the patient is not diabetic or is a bilateral amputee
<b>Education</b>		
Drug Education on All Medications Provided to Patient/Caregiver <sup>[1]</sup>	Count of short term episodes of care in which the patient/caregiver was instructed on how to recognize potential adverse effects, and how and when to report problems (M2015 = Yes)	Count of short term episodes of care (RFA = 6, 7, or 9) in which education is appropriate for the patient; assessments are excluded if the patient is not taking any drugs
<b>Prevention</b>		
Immunization Received for Current Flu Season	Count of episodes of care in which the patient received influenza immunization for the current flu season or had a valid reason for not receiving flu immunization (M1040, M1045)	Count of episodes of care (RFA = 6, 7, or 9); episodes are excluded if the entire episode of care is outside the influenza season

Element	Numerator	Denominator
PPV Ever Received	Count of episodes of care in which the patient was determined to have ever received Pneumococcal Polysaccharide Vaccine (PPV) (M1050, M1055)	Count of episodes of care (RFA = 6, 7, or 9)
Pressure Ulcer Prevention Implemented <sup>[1]</sup>	Count of short term episodes of care in which interventions to prevent pressure ulcers were included in the physician-ordered plan of care and implemented for patients assessed to be at risk for pressure ulcers (M2400_e = Yes)	Count of short term episodes of care (RFA = 6, 7, or 9) in which episodes are excluded if formal assessment indicates the patient was not at risk of pressure ulcers since the last OASIS assessment

<sup>[1]</sup> Measure requires that the episode qualifies as short term: EOC is less than 60 days from the SOC/ROC there were no recertification assessments between the SOC/ROC and the EOC

### Measure Definition Notes

1. Measures require that the SOC/ROC assessment associated with the EOC assessment occurred on or after 1/1/2010
2. In cases where the patient had a SOC and ROC assessment in their episode, the most recent ROC assessment is being used

### Other Resources

For more information or guidance, please contact OCS HomeCare Client Support at 866.641.8324 or refer to the information available on the e-Learning Network, located on the Support tab in Connection.