

Understanding CMS's Five-Star Ratings

David Gifford MD MPH
Chief Medical Officer

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AMERICAN HEALTH CARE ASSOCIATION

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History & Purpose

- 1998 Nursing Home Compare
- 2008 Five Star Created

Purpose: “CMS created the Five-Star Quality Rating System to help consumers, their families, and caregivers compare nursing homes more easily and to help identify areas about which you may want to ask questions”

Five Star Expanded Uses

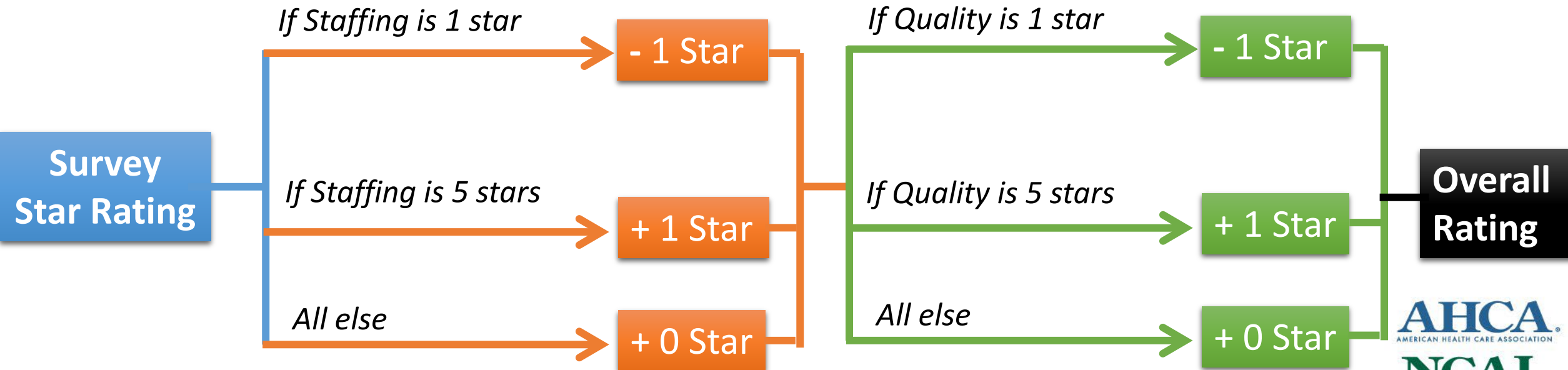
- Five Star ratings are now used
 - Medicaid VBP programs (5 states)
 - Managed Care
 - Contracting
 - MA VBP
 - HUD loan applications

Five-Star Overall Rating Calculation

- Start with Survey (Health Inspection) rating
- Then add, subtract, or maintain your star rating based on Staffing and Quality Rating;
- Apply any penalties
- [CMS Five star Technical Manual](#) for details

Factor in Staffing Rating

Factor in Quality Rating

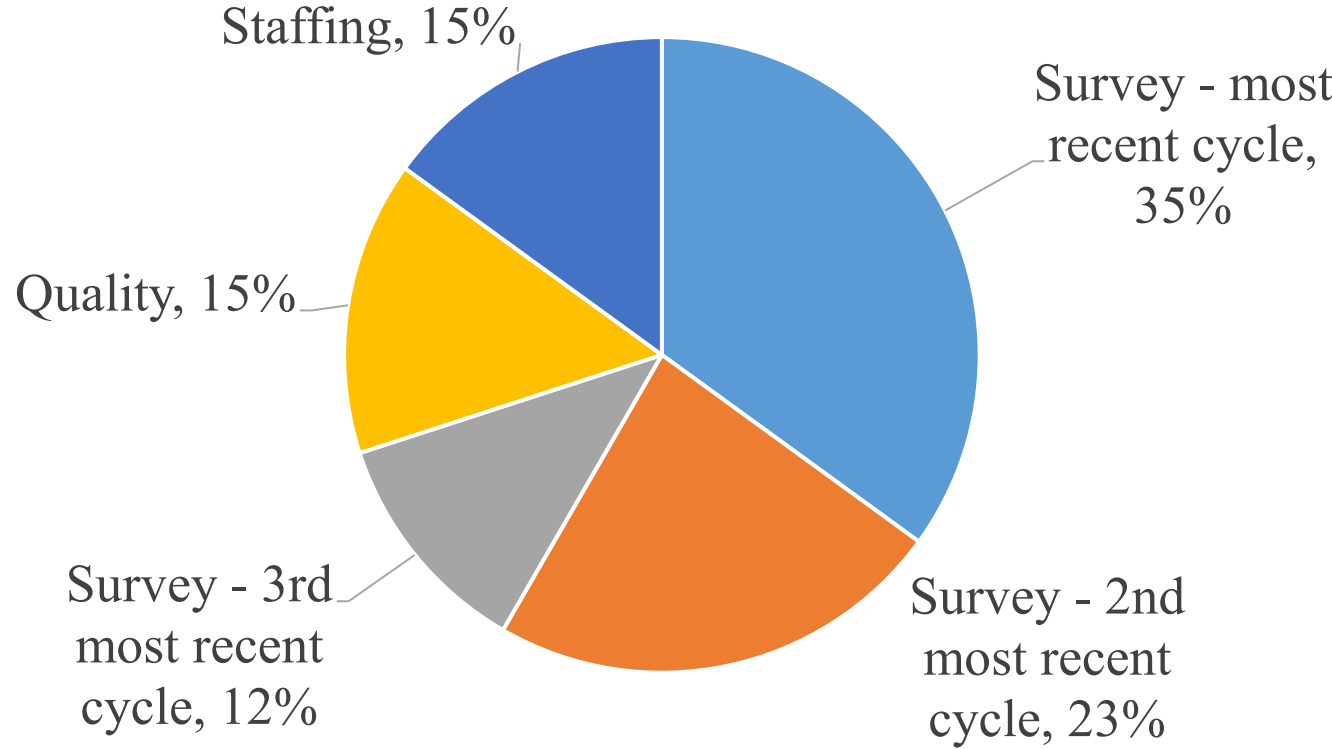


Five Star Penalties

- If star at 1 star on survey; can only gain a max of 1 more star
- SFF focus facility data and five star rating suppressed
- PBJ data submission missing
 - Force staffing component to 1 star
- RN hours at 0 for >4 days in a quarter (regs require 8 hrs per day)
 - Force staffing component to 1 star
- Abuse icon caps survey rating to 2 stars

What determines your overall rating?

Percent of Variance in Overall Five Star Rating explained by each component



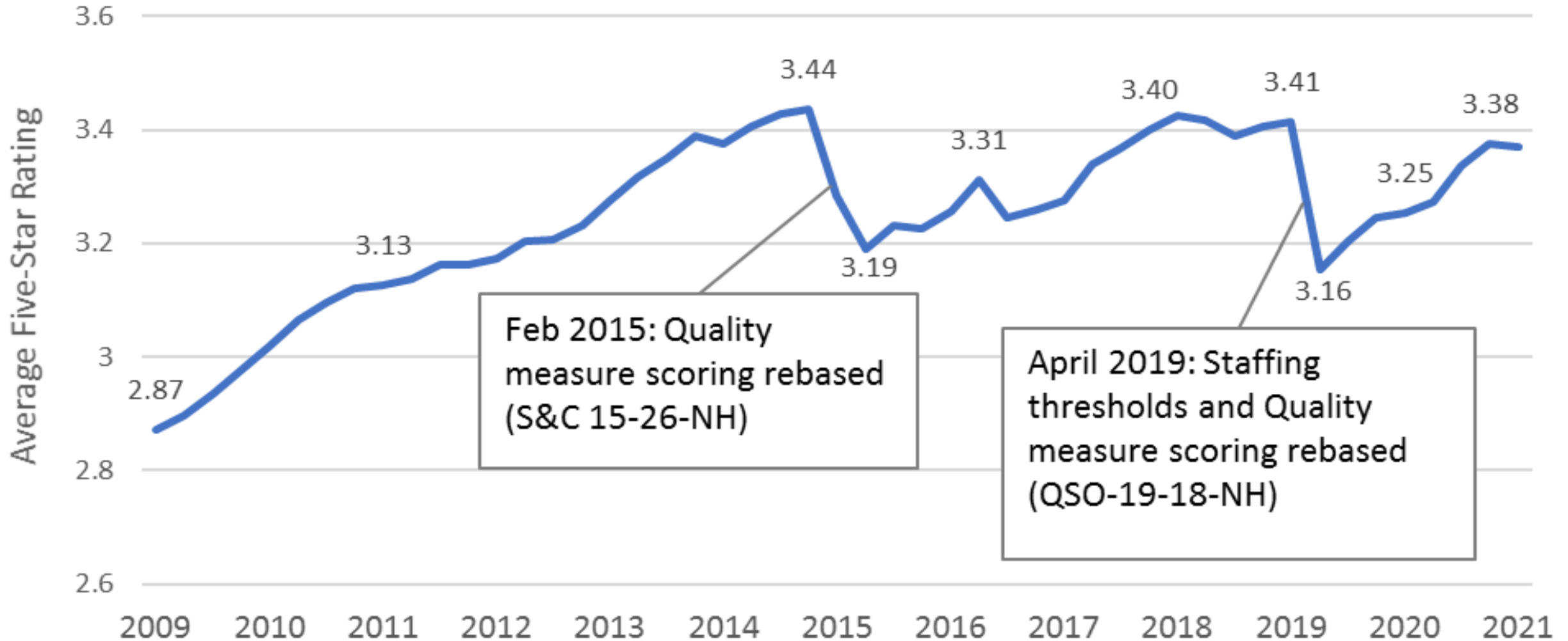
Five-Star Rating Update Pattern

- CMS's Care Compare website is updated the last Wednesday of every month
- Survey ratings are updated every month
- Staffing and Quality ratings updated every quarter
- During Pandemic CMS froze Five-Star rating components in 2020 until Jan 2021

	Qtr 1			Qtr 2			Qtr 3			Qtr 4		
	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Typical Year	Survey Staff Qlty	Survey	Survey	Survey Staff Qlty	Survey	Survey	Survey Staff Qlty	Survey	Survey	Survey Staff Qlty	Survey	Survey

SNF Trends in Overall Star Rating

Average Five-Star Overall Rating (Nation)



Five-Star Overall Rating for the Nation

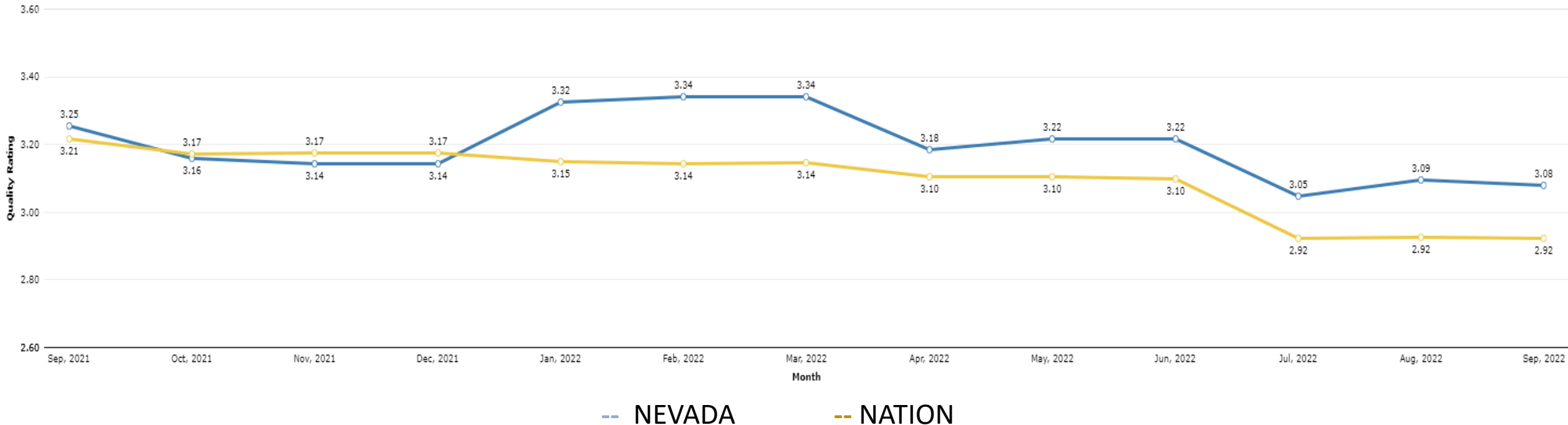
Change in Overall Rating from Dec 2020 - Jan 2021



Nevada vs Nation Avg Overall Star Rating

SNF Five-Star Measures Report: Report Summary - Five-Star Overall - Overall Rating - Monthly

My Buildings: NEVADA HEALTH CARE ASSOCIATION (67 Currently Active Buildings). Peers: Peers in Entire Nation; No peer type restriction; Centers from My Org are not included in peer group (15212 Currently Active Buildings).



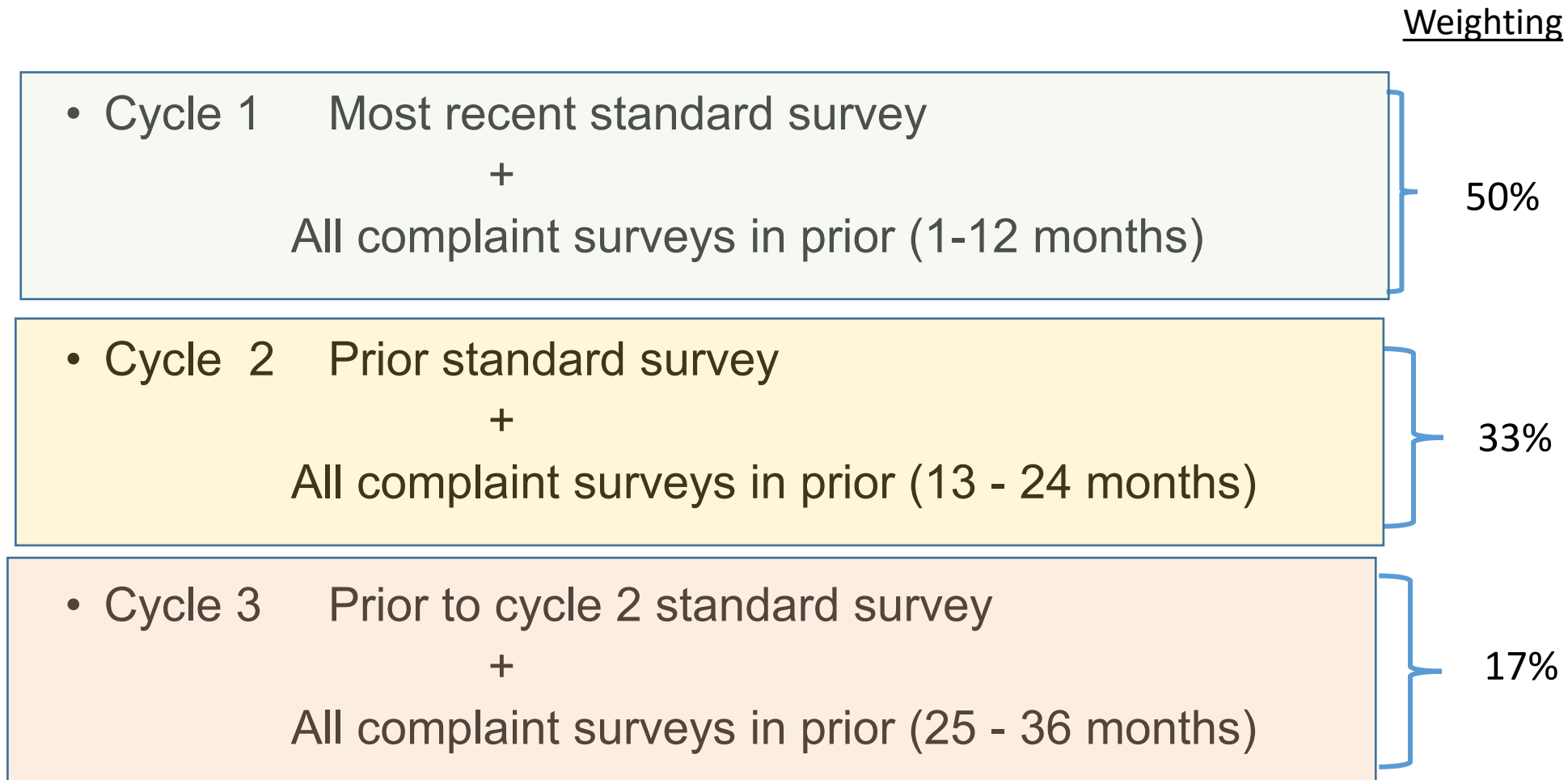


Survey Component of Five Star

Survey Component Methodology

- Step 1: Calculate weighted “3-year” average survey score
- Step 2: Rank all centers within each state based on their scores
- Step 3: Assign one to five stars based on forced distribution of ranking within each state
- Step 4: If abuse icon, Cap survey star rating at 2 stars

Survey Score in Five-Star

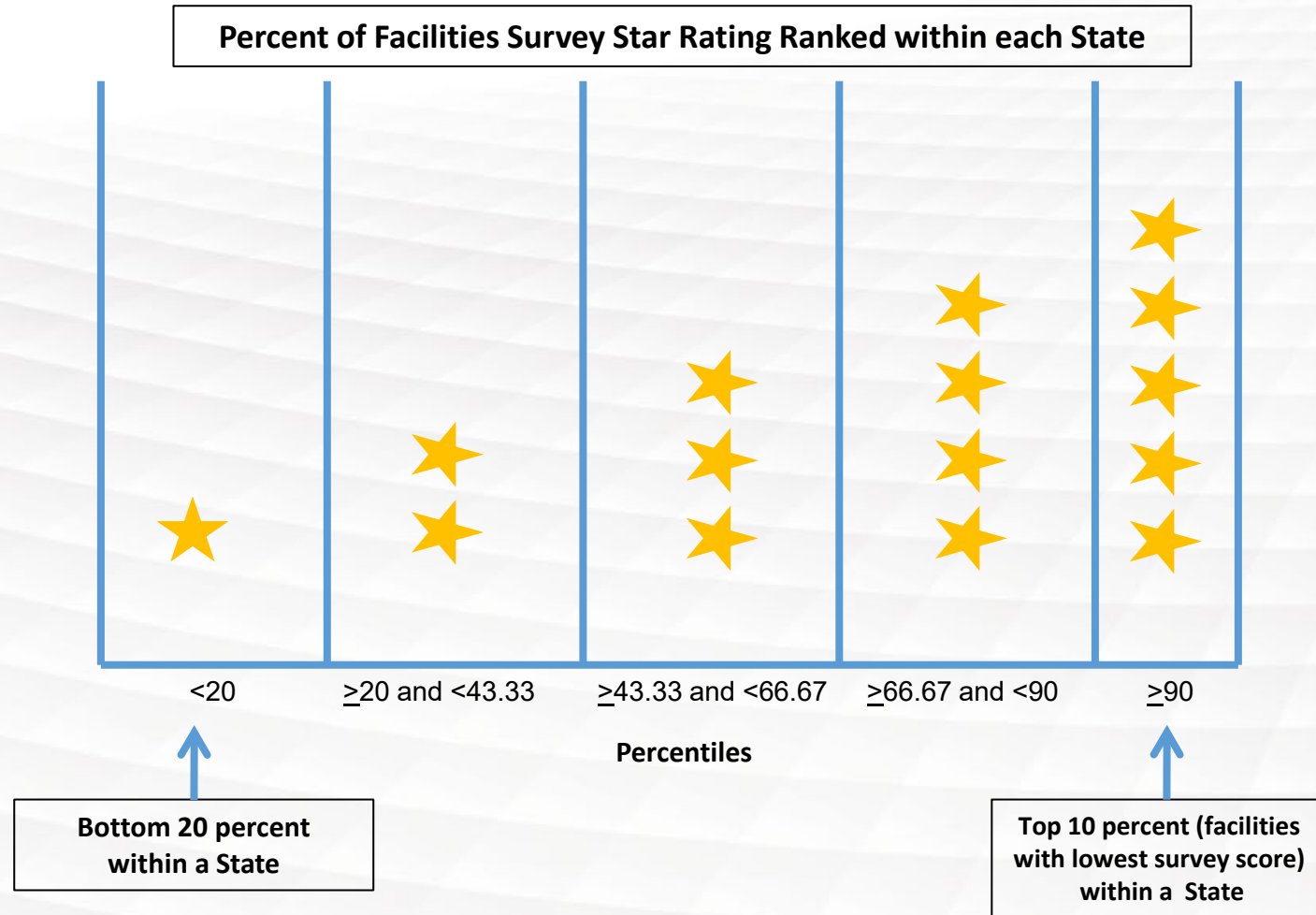


How is Survey Score Calculated?

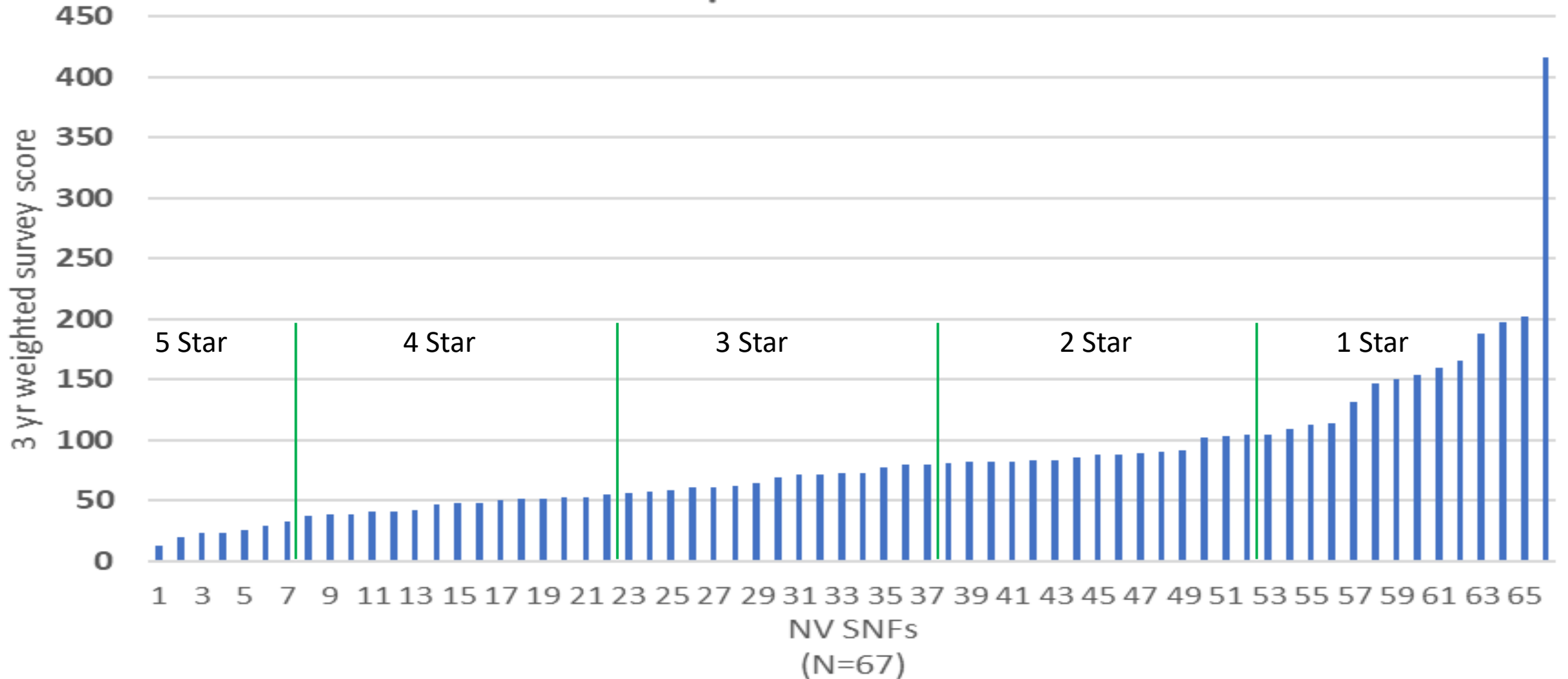
Table 1
Health Inspection Score: Weights for Different Types of Deficiencies

Severity	Scope		
	Isolated	Pattern	Widespread
Immediate jeopardy to resident health or safety	J 50 points* (75 points)	K 100 points* (125 points)	L 150 points* (175 points)
Actual harm that is not immediate jeopardy	G 20 points	H 35 points (40 points)	I 45 points (50 points)
No actual harm with potential for more than minimal harm that is not immediate jeopardy	D 4 points	E 8 points	F 16 points (20 points)
No actual harm with potential for minimal harm	A 0 point	B 0 points	C 0 points

Survey Component Star Rating



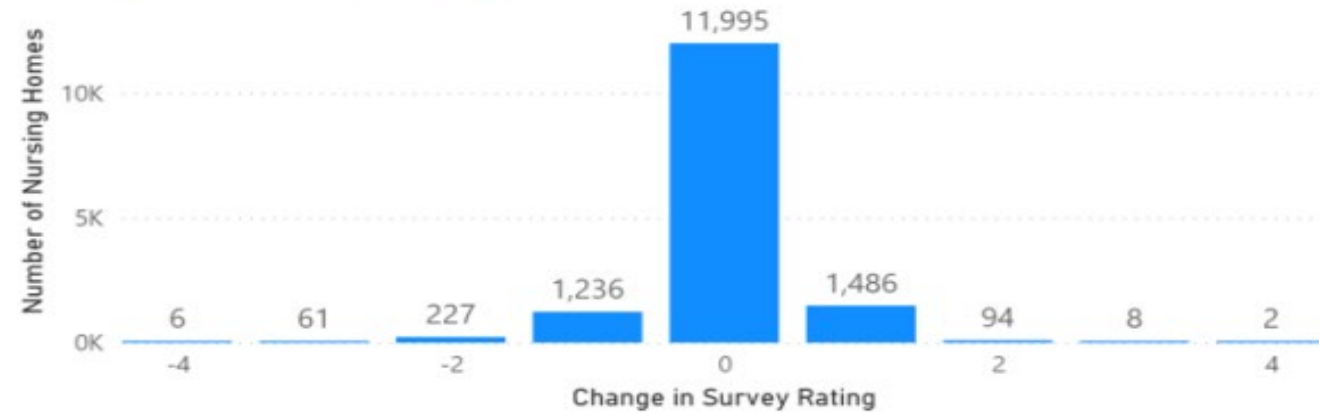
Neveda 3 yr Weighted Survey Score Sept 2022



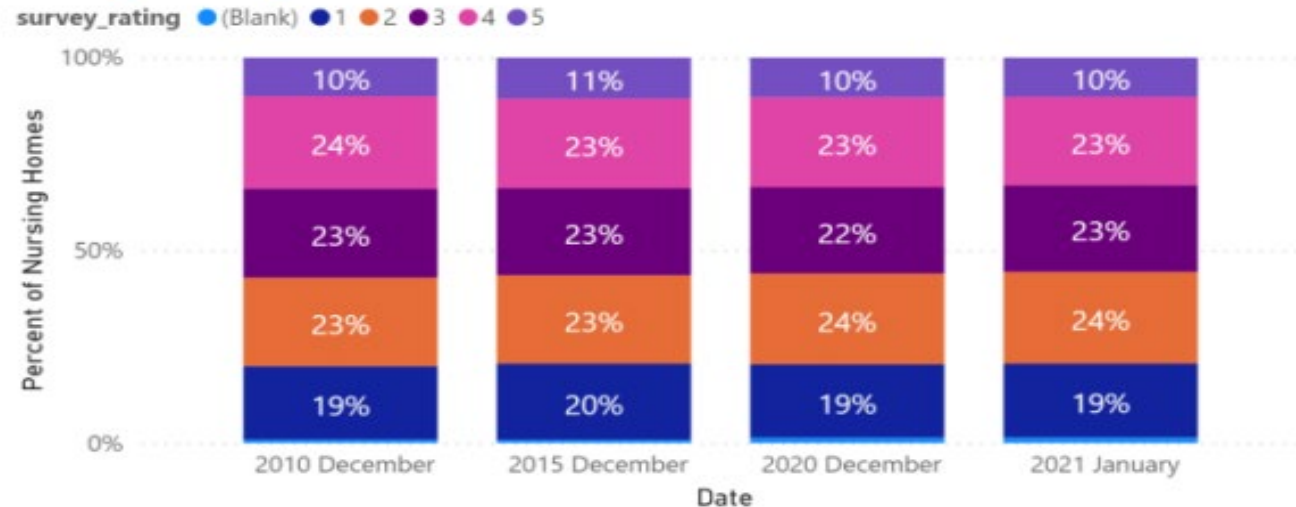
Health Inspection Rating Changes

- Starting in January 2021, [Infection Control Survey](#) Deficiencies were added to Five-Star ([F880 tag](#))
- As the graphs show, the impact was minimal on ratings in the nation
- Distribution is kept constant

Change in Survey Rating from Dec 2020- Jan 2021



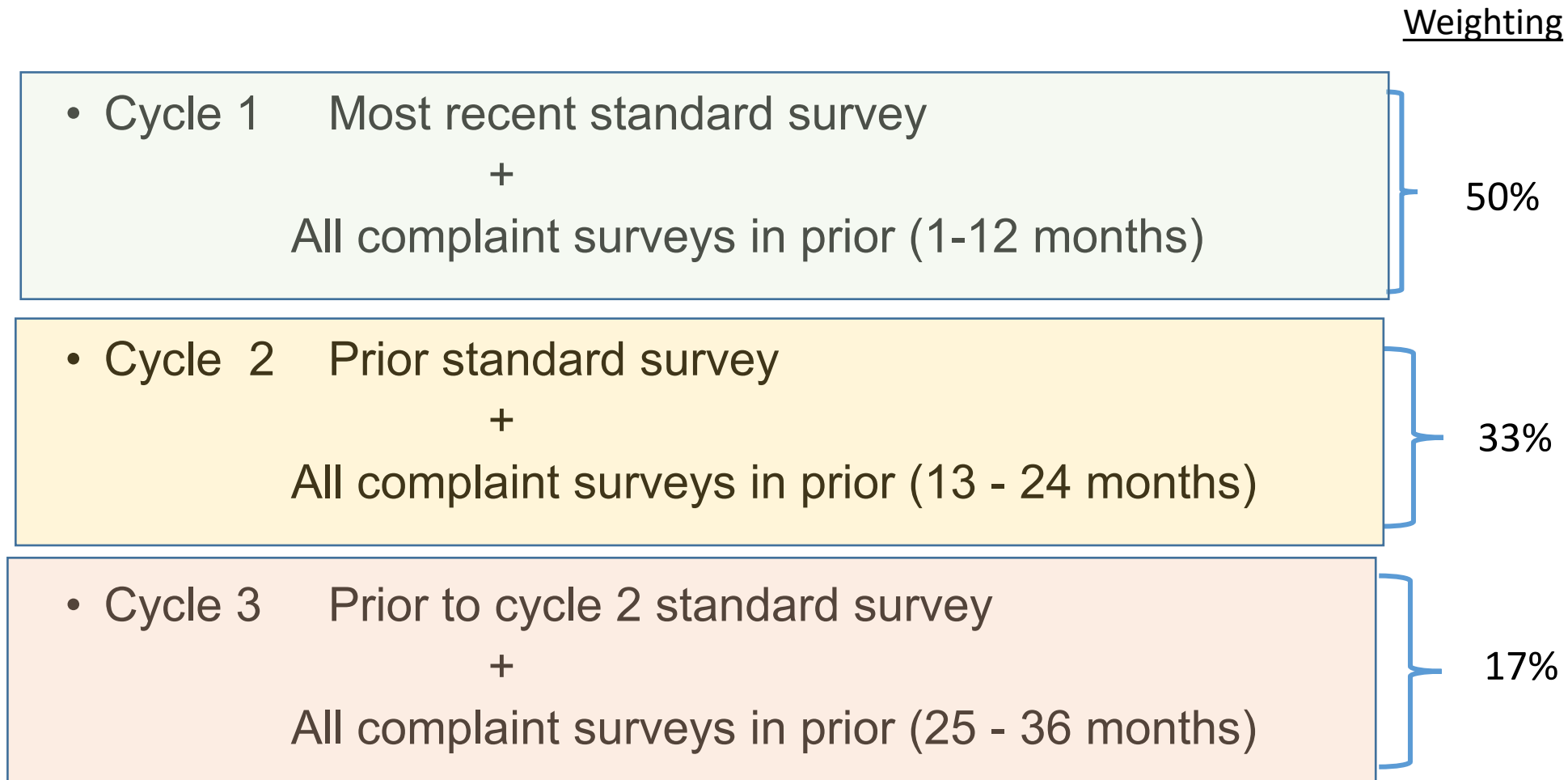
Survey Rating Distribution Over Time



Why and When does your Survey Star Rating Change?

- When New Survey (Standard, complaint or revisit)
OR
- IDR/IIDR resolution
- “aging” of complaint surveys

Survey Score in Five-Star





Abuse Icon

- Response to 2019 US Senate Finance Committee hearing
- Health Inspection rating will be capped at 2 stars

	Standard or Complaint Survey	
	Most Recent ¹	2 nd Most Recent ²
Scenario 1 Scope/Severity:	G or higher	
Scenario 2 Scope/Severity:	D or higher	D or higher
Removal: No abuse for...	Standard: Full cycle	Complaint: 12 months

Tags:

F600: Free from abuse and neglect

F602: Free from misappropriation/exploitation

F603: Free from involuntary seclusion

1. Recent Complaint Survey from the past 12 months

2. 2nd Most Recent Complaint Survey from the prior 12 months (13 to 24 months ago)

Nevada F-tag Frequency FY 2022

Tag #	Tag Description	# Citations	% SNFs (N=67)
F0884	Reporting - National Health Safety Network	89	37.3%
F0812	Food Procurement, Store/Prepare/Serve Sanitary	36	46.3%
F0656	Develop/Implement Comprehensive Care Plan	32	37.3%
F0761	Label/Store Drugs and Biologicals	32	44.8%
F0684	Quality of Care	31	35.8%
F0880	Infection Prevention & Control	27	32.8%
F0689	Free of Accident Hazards/Supervision/Devices	23	26.9%
F0655	Baseline Care Plan	18	22.4%
F0609	Reporting of Alleged Violations	17	19.4%
F0690	Bowel/Bladder Incontinence, Catheter, UTI	16	19.4%
F0694	Parenteral/IV Fluids	16	17.9%
F0550	Resident Rights/Exercise of Rights	16	20.9%
F0755	Pharmacy Svcs/Procedures/Pharmacist/Records	14	19.4%
F0677	ADL Care Provided for Dependent Residents	13	13.4%
F0759	Free of Medication Error Rts 5 Prcnt or More	13	16.4%
F0610	Investigate/Prevent/Correct Alleged Violation	13	16.4%
F0695	Respiratory/Tracheostomy Care and Suctioning	13	19.4%
F0698	Dialysis	12	14.9%
F0686	Treatment/Svcs to Prevent/Heal Pressure Ulcer	12	14.9%
F0580	Notify of Changes (Injury/Decline/Room, etc.)	11	10.4%
F0600	Free from Abuse and Neglect	10	11.9%
F0602	Free from Misappropriation/Exploitation	4	6.0%
F0603	Free from Involuntary Seclusion	3	3.0%

Themes Across All Deficiencies

- Surveyors

- inconsistent in scope and severity and
- how they explain what practices trigger deficiency

- Providers

- Inconsistent following of P&P, care plan or orders
- P&P or care plan stated as absolute or go beyond regulations
- Not recognizing trends in resident's change of status
- Timely notification of clinician, family, SSA or residents change of status or acute events



Staffing Component



OLD Staffing Star Assignment Grid

Table 4
Staffing and Rating (updated April 2019)

RN rating and hours		Total nurse staffing rating and hours (RN, LPN and nurse aide)				
		1	2	3	4	5
		< 3.108	3.108 – 3.579	3.580 - 4.037	4.038 – 4.407	≥4.408
1	< 0.317	★	★	★★	★★	★★★
2	0.317 - 0.507	★★	★★	★★	★★★	★★★
3	0.508 – 0.730	★★	★★★	★★★	★★★	★★★★
4	0.731 – 1.048	★★★	★★★	★★★★	★★★★	★★★★
5	≥1.049	★★★	★★★★	★★★★	★★★★★	★★★★★

Loose 1 Star



Gain 1 Star



Note: Adjusted staffing values are rounded to three decimal places before the cut points are applied.

Six PBJ Staffing Measures used in Five Star as of July 2022

- Total Nursing HPRD
 - Case Mix adjusted total nurse (RN, LPN/LVN, aide) staffing levels (hours per resident per day)
- Total RN HPRD
 - Case-mix adjusted RN staffing levels (hours per resident per day)
- Total Nursing HPRD weekends
 - Case-mix adjusted total nurse (RN, LPN/LVN, aide) staffing levels (hours per resident per day) on the weekend
- Total Nursing Turnover
 - Total nurse turnover, defined as the percentage of nursing staff that left the nursing home over a twelve-month period
- RN Turnover
 - Registered Nurse (RN) turnover, defined as the percentage of RN staff that left the nursing home over a twelve-month period
- Administrator turnover
 - Administrator turnover, defined as the number of administrators who left the nursing home over a twelve-month period.

PBJ Job Codes used in measures

- RNs: Includes
 - RN director of nursing (job code 5)
 - RNs with administrative duties (job code 6)
 - RNs (job code 7)
- Total Nurses: Includes
 - RN director of nursing (job code 5)
 - RNs with administrative duties (job code 6)
 - RNs (job code 7)
 - LPNs with administrative duties (job code 8)
 - LPNs (job code 9)
 - certified nurse aides (job code 10)
 - aides in training (job code 11)
 - medication aides/technicians (job code 12)
- Nursing home administrators (job code 1)

Turnover Measure

- Based on working at least 120 hours in 90-day period
- No gap of >60 consecutive days with no work from last work day
- AIT should not be coded as Administrators (job code 1) or it will inflate your turnover figure

Rating Methodology Staffing Component

Step 1: Calculate six different staffing measures

Step 2: Rank SNFs on each measure and assign to deciles

Step 3 Assign points for each decile

Step 3: Aggregate points across measures

Step 4: Compare aggregate points to established thresholds to assign star rating

Step 5: Apply any penalties

Penalties

- Penalties (Staffing Capped at 1 star)
 - Failed to submit PBJ data
 - ≥ 4 days with no RN staffing hours (job codes 5-7)
 - Fail CMS audit of PBJ data
- No rating given
 - PBJ data felt to be invalid due to abnormally high or low values

Staffing Points

Measure	Point Thresholds	Max Points
Total nurse HPRD	5 points per Decile	100
RN HPRD	5 points per Decile	100
Weekend Total Nurse HPRD	5 points per Decile	50
Total nurse turnover	5 points per Decile	50
RN turnover	5 points per Decile	50
Administrator turnover	0 = 30 points, 1 = 25 and $\geq 2 = 10$	30
	Total Possible Points	380

Staffing HPRD Point Thresholds

Total Nurse HPRD			Total Nurse HPRD (Weekend)			Total Nurse HPRD		
Points	Lower limit	Upper limit	Points	Lower limit	Upper limit	Points	Lower limit	Upper limit
100	4.95	Or higher	50	4.33	Or higher	100	1.30	Or higher
90	4.43	4.95	45	3.90	4.33	90	0.99	1.30
80	4.11	4.43	40	3.62	3.90	80	0.82	0.99
70	3.87	4.10	35	3.38	3.62	70	0.69	0.82
60	3.65	3.87	30	3.17	3.38	60	0.59	0.69
50	3.45	3.65	25	2.99	3.17	50	0.51	0.59
40	3.25	3.44	20	2.81	2.98	40	0.43	0.50
30	3.03	3.25	15	2.61	2.81	30	0.35	0.43
20	2.75	3.03	10	2.35	2.61	20	0.26	0.35
10	0.00	2.75	5	0.00	2.35	10	0.00	0.26

Staffing Turnover Point Thresholds

Total Nurse Turnover			RN Turnover		
Points	Lower limit	Upper limit	Points	Lower limit	Upper limit
50	0.00	34.42	50	0.00	24.53
45	34.42	40.59	45	24.53	33.11
40	40.60	44.85	40	33.11	39.62
35	44.85	48.70	35	39.62	45.16
30	48.70	52.35	30	45.16	49.12
25	52.35	56.39	25	49.12	56.98
20	56.39	60.70	20	56.98	62.96
15	60.70	65.74	15	62.96	71.05
10	65.74	72.68	10	71.05	81.08
5	72.68	100.00	5	81.08	100.00

Point Thresholds for Star Rating

Table 3

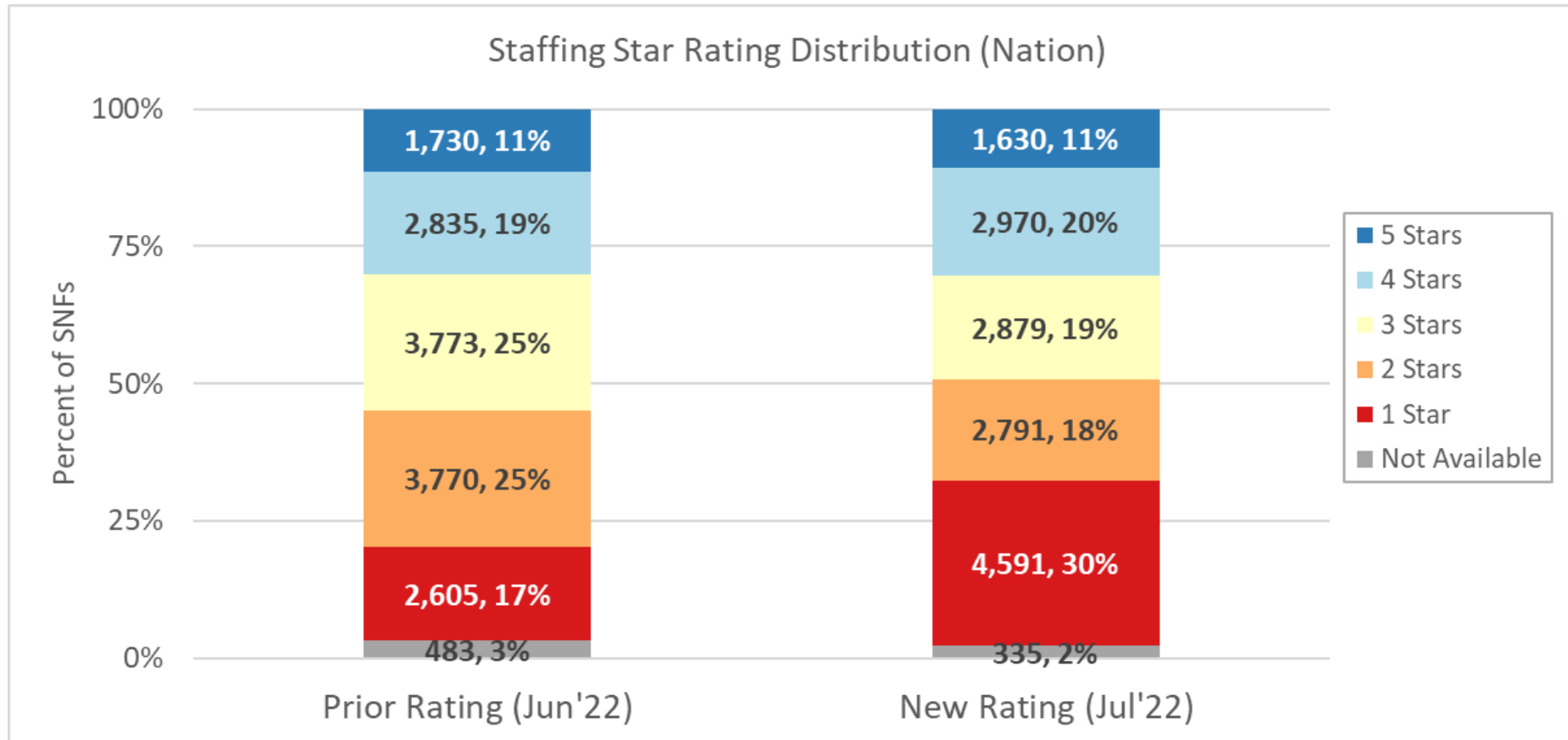
Point Ranges for the Staffing Rating (maximum possible score = 380 points)

1 star	2 stars	3 stars	4 stars	5 stars
< 155	155 - 204	205 - 254	255 - 319	320 - 380

Note: These cut points are applied after any necessary rescaling of the staffing score to have a maximum possible value of 380 points. The rescaled score is rounded to the nearest integer. Cut points for each of the six measures that contribute to the total staffing Score are shown in Appendix Table A2.

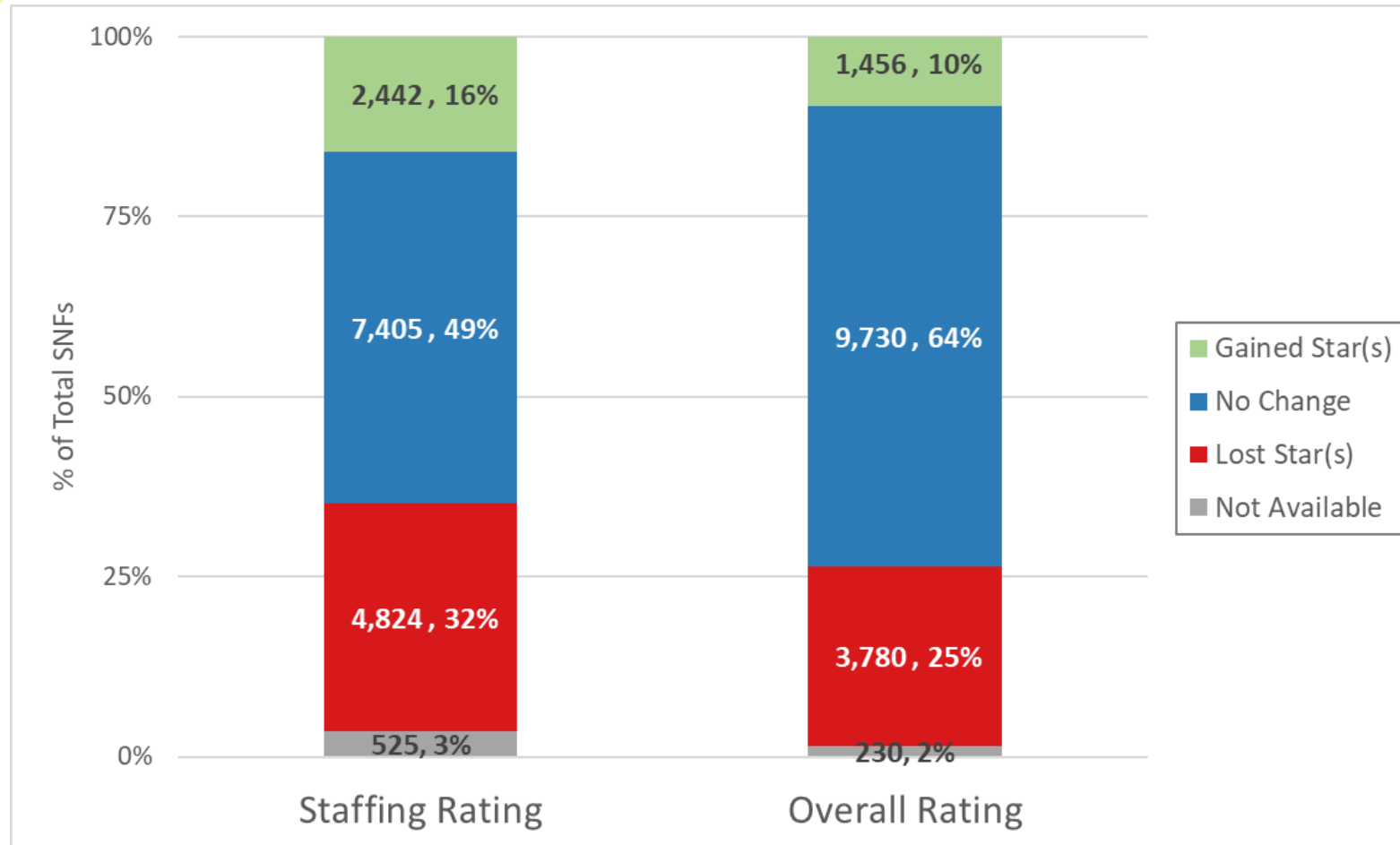


National Distribution of Staffing Star Ratings: June 2022 vs July 2022



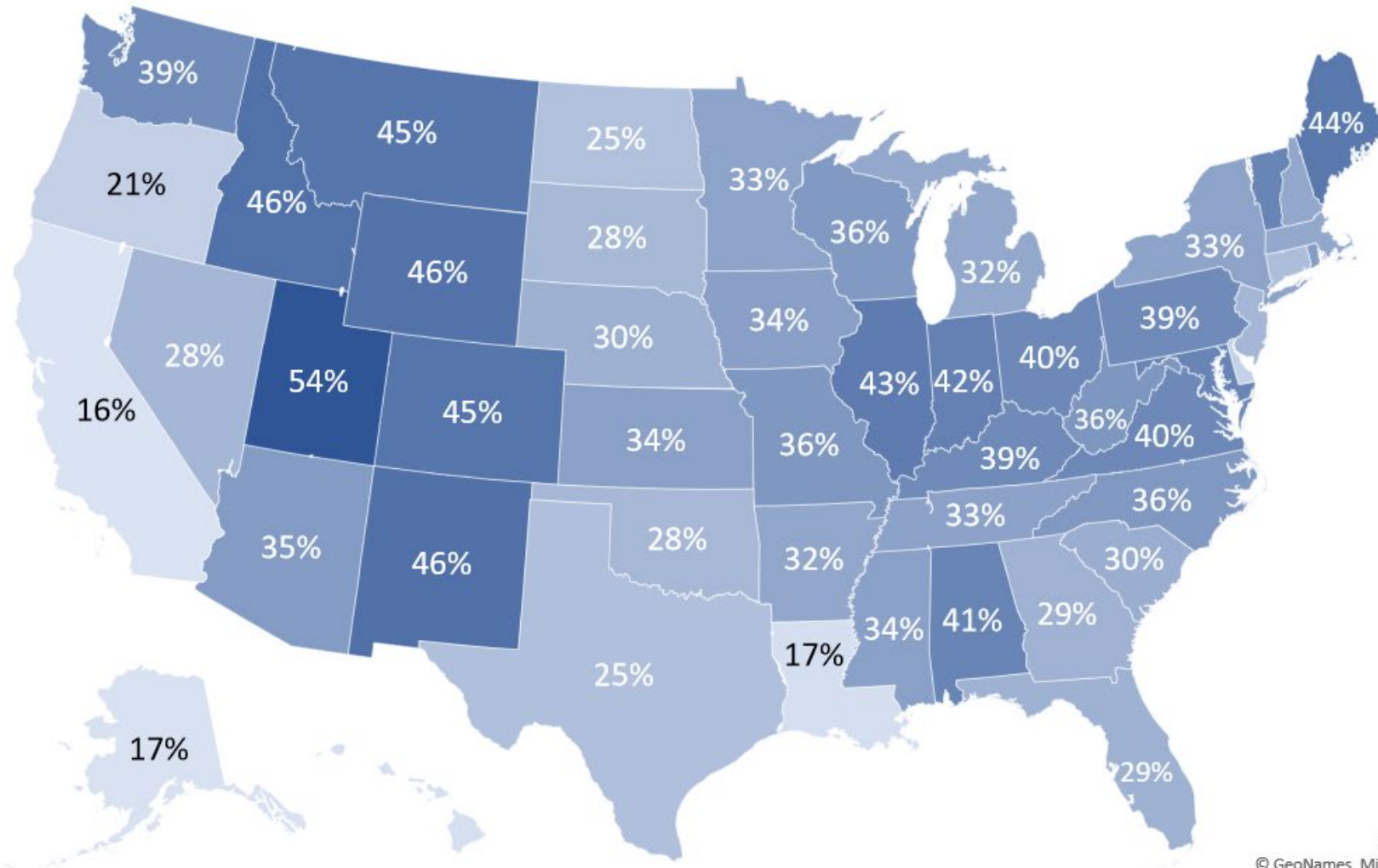


Change in Star Ratings June to July 2022



Percent of Nursing Homes that Lost a Staffing Star

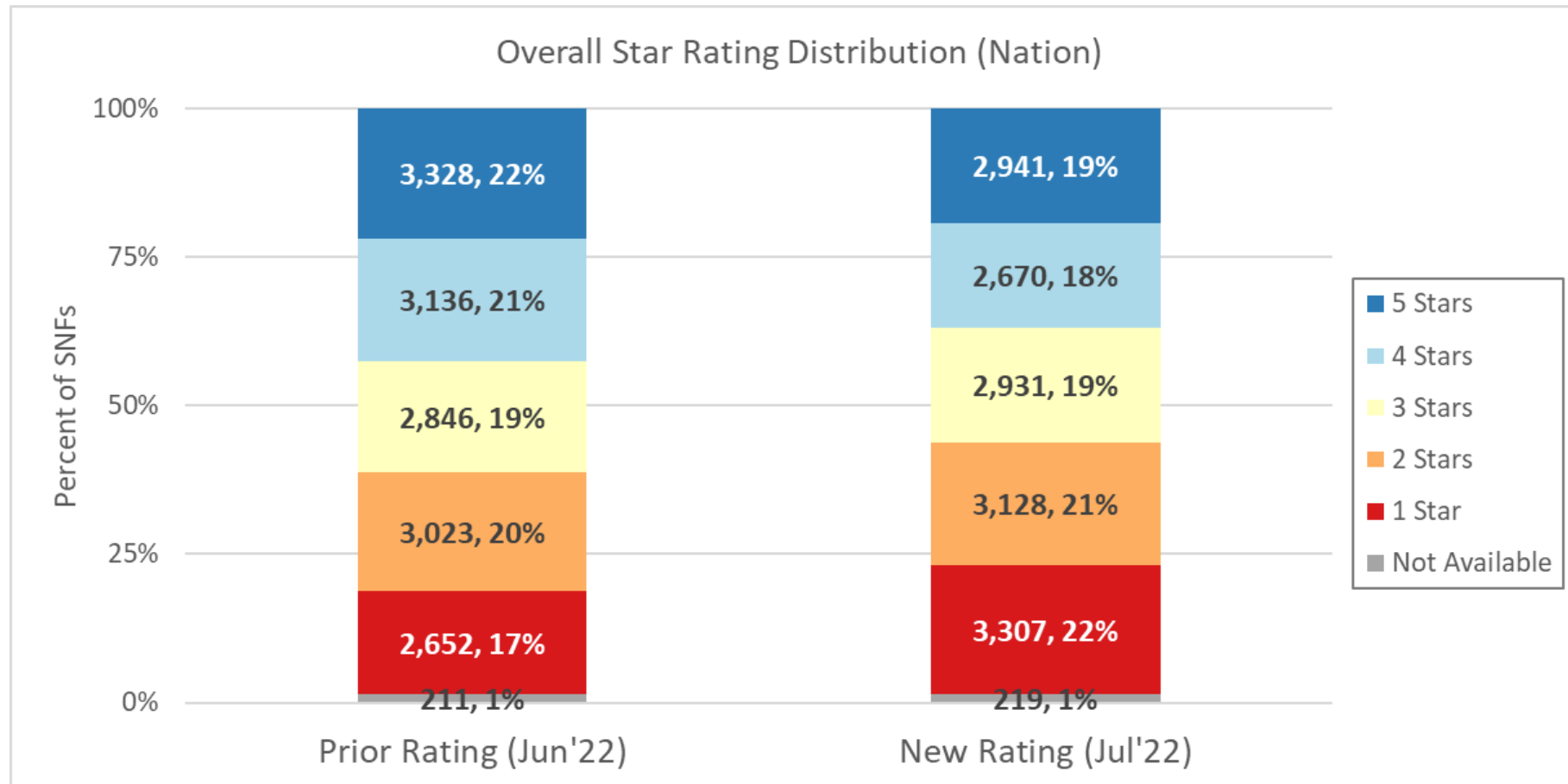
Lost a Staffing Star 
16% 54%




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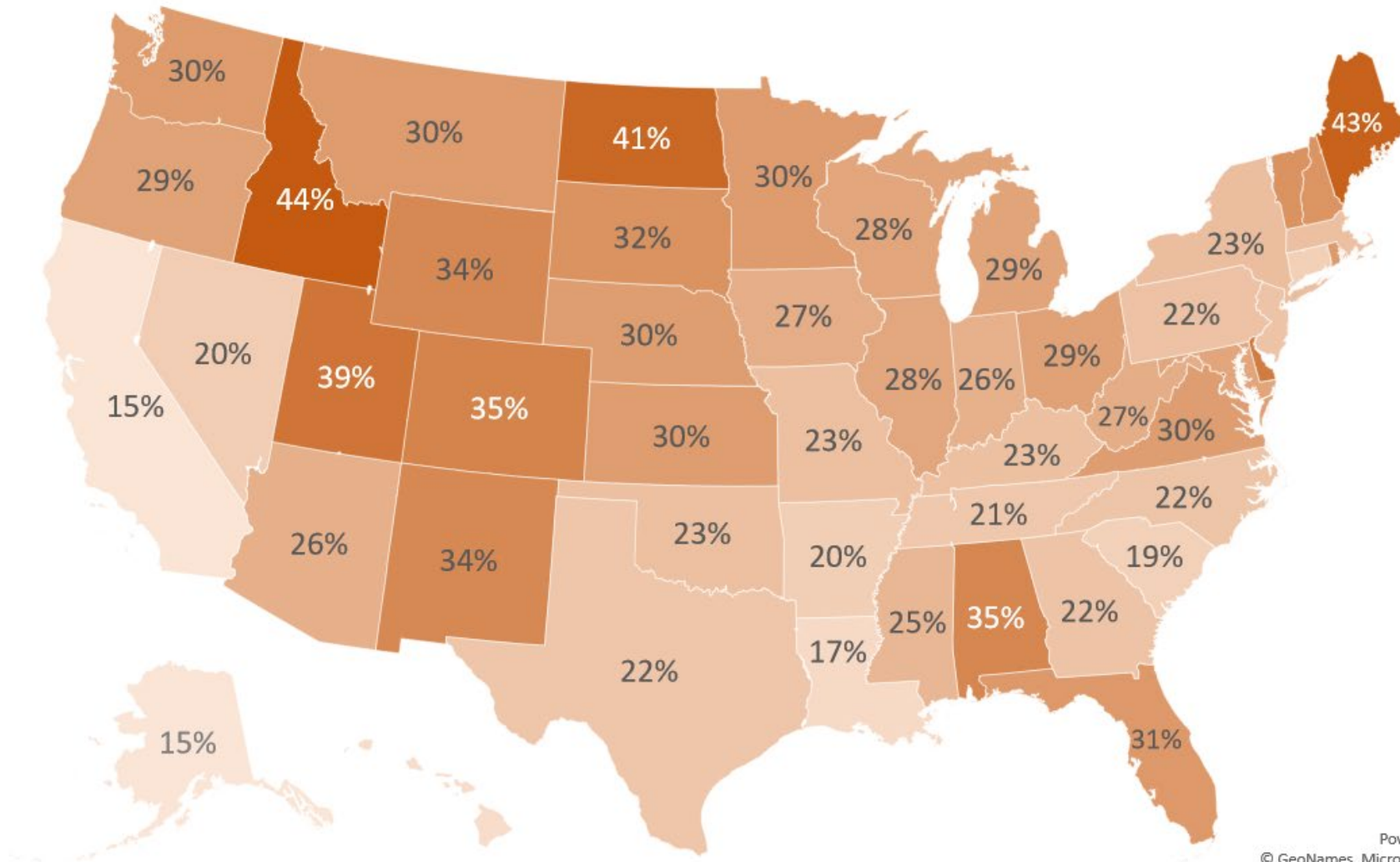


National Distribution of Overall Star Ratings: June 2022 vs July 2022



Percent of Nursing Homes that Lost an Overall Star

Lost an Overall Star 
15% 44%



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Staffing Rating Tidbits

- Avoid penalties
 - Make sure you have RN each day coded in PBJ
- Make sure your submitting data
 - Deadline 45 days after the close of the quarter
 - Don't wait to close to deadline
 - Submit more frequently (e.g. monthly)
- When staff change positions make sure link employee ID if it changes
- Try to make sure staff (and agency) work at least 1 time per 60 days



Quality Measure Component of
Five Star

Rating Methodology – QM Component

- Step 1: Calculate QMs divided into Long Stay and Short Stay
- Step 2: Compare to established thresholds to assign points f
- Step 3: Add up points for all LS and all SS QMs
- Step 4: Compare Aggregate score against established thresholds*
cut-points to assign Stars for LS and SS
- Step 5: Two scores are combined to count equally and compared to
thresholds

**Note: thresholds for aggregate scores increase by 50% of the national trend change in
aggregate score every six months*

Improving Lives by Delivering Solutions for Quality Care

Current Measures: Long-Stay

Used in QM Star Rating

Antipsychotics - 150

Falls - 100

Pressure Ulcers - 100

UTIs - 100

Catherer - 100

ADL - 150

Mobility - 150

Hospitalizations* - 150

ED Visits* - 150

Not used in QM Star Rating

Restraints

Weight Loss

Depression

Flu vaccine

Pneumonia Vaccine

Antianxiety or hypnotic medication

Incontinence

*Claims based. All other are MDS based

Higher is better

Lower is better

Current Measures: Short-Stay

Used in QM Star Rating

Antipsychotics - 100

Pressure Ulcers - 100

Functional Improvement - 150

Rehospitalizations* - 150

ED Visits* - 150

Discharge to Community* - 150

Not used in QM Star Rating

Falls

Flu vaccine

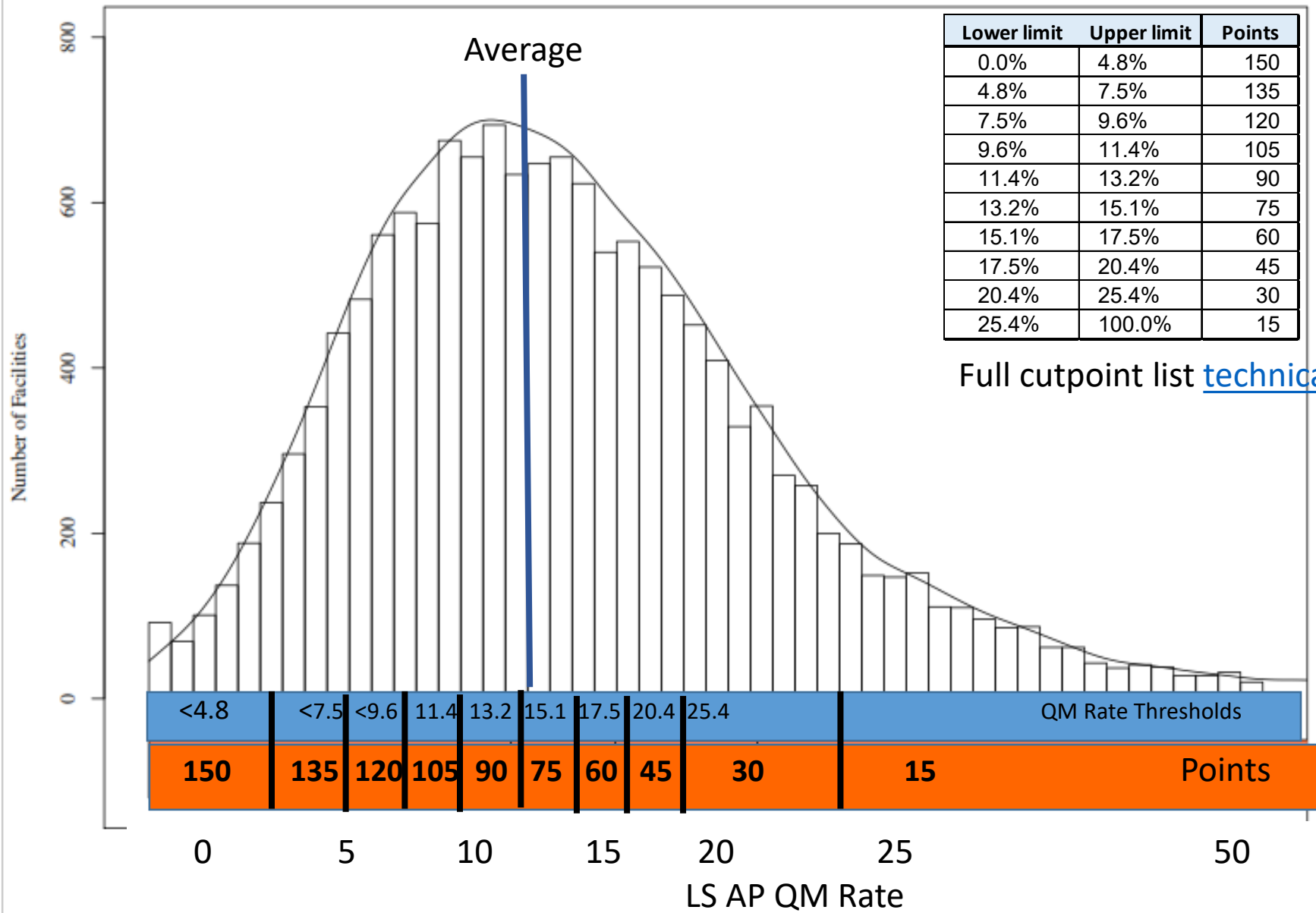
Pneumonia Vaccine

*Claims based. All other are MDS based

Higher is better

Lower is better

LS Antipsychotic Use



Aggregate Point Thresholds for Star Assignment

Table 5

Point Ranges for the QM Ratings (as of October 2022)

QM Rating	Long-Stay QM Rating Thresholds	Short-Stay QM Rating Thresholds	Overall QM Rating Thresholds
★	155–483	144–491	299–975
★★	484–581	492–588	976–1,170
★★★	582–663	589–678	1,171–1,342
★★★★	664–755	679–766	1,343–1,522
★★★★★	756–1,150	767–1,150	1,523–2,300
<p>Note: the short-stay QM rating thresholds are based on the adjusted scores (after applying the factor of 1,150/800 to the unadjusted scores)</p>			



- Trend Five Star Data
 - Helps answer “Are we getting better or worse?”
- Benchmark Five Star Data
 - Helps answer “Is my rate good or bad?”
- Access to LTC Trend Tracker is included in your membership to Utah Health Care Association.
- Email help@lctrendtracker.com for any assistance

LTC Trend Tracker QM Predictor Tool



- [🏠 Notifications](#)
- [📊 Dashboards](#)
- [📄 Run a Report](#)
- [📅 Save or Schedule a Report](#)
- [📁 Saved & Scheduled Reports](#)
- [★ Five-Star QM Predictor Tool](#)
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- [📊 COVID-19 Data](#)

Five-Star Summary

Overall Five-Star Points

Short-Stay Five-Star Points

Long-Stay Five-Star Points

Five-Star, Short-Stay

Star Rating Predictor

Five-Star Summary	Performance		Five-Star Points Scale					Next Cut-Point Goals	Goal Totals
	Star	Points	<<Worsens		Improves>>				
Overall Five-Star Points	5	1790	967	299	967	1161	1331	1510	1897
Short-Stay Five-Star Points			489	144	489	586	675	763	877 (Unadjusted Total: 610)
Long-Stay Five-Star Points	5	895	478	155	478	575	656	747	1020

LTC Trend Tracker Predictor Tool

See where I need to gain points and by how much

Five-Star Summary			<<Worsens					Improves>>						
Overall Five-Star Points	5	1790	967	299	967	1161	1331	1510						
Short-Stay Five-Star Points			489	144	489	586	675	763						
Long-Stay Five-Star Points	5	895	478	155	478	575	656	747						

Five-Star, Short-Stay	Rate	Points	<<Worsens					Improves>>															
SS Antipsychotic Medication	1.4%	60	20	40	60	80	100	2.8%	100.0%	2.8%	1.6%	0.9%	0.0%										
SS Rehospitalization	NA	150	15	30	45	60	75	90	105	120	135	150	30.3%	100.0%	30.3%	27.4%	25.5%	24.0%	22.6%	21.1%	19.5%	17.7%	15.0%
SS ED Visit	NA	30	15	30	45	60	75	90	105	120	135	150	17.5%	100.0%	17.5%	14.6%	12.7%	11.2%	10.0%	8.8%	7.6%	6.4%	4.7%
SS Improvement in Function	80.2%	135	15	30	45	60	75	90	105	120	135	150	50.2%	0.0%	50.2%	56.7%	61.0%	64.3%	67.4%	70.4%	73.7%	77.5%	82.8%
SS Pressure Ulcers New or Worsened (QRP)	3.7%	60	20	40	60	80	100	6.4%	100.0%	6.4%	3.9%	2.1%	0.0%										
SS Discharge to Community (QRP)	NA	120	15	30	45	60	75	90	105	120	135	150	37.7%	0.0%	37.7%	42.7%	46.1%	49.2%	51.8%	54.6%	57.0%	59.8%	63.4%

Five-Star, Long-Stay	Rate	Points	<<Worsens					Improves>>															
LS Antipsychotic Medication	2.8%	150	15	30	45	60	75	90	105	120	135	150	25.3%	100.0%	25.3%	20.3%	17.4%	15.0%	13.2%	11.3%	9.6%	7.4%	4.7%
LS High Risk Pressure Ulcers	5.0%	80	20	40	60	80	100	10.5%	100.0%	10.5%	7.8%	5.8%	3.7%										
LS Falls with Injury	4.1%	40	20	40	60	80	100	5.1%	100.0%	5.1%	3.5%	2.4%	1.3%										
LS ADL Decline	14.9%	75	15	30	45	60	75	90	105	120	135	150	23.2%	100.0%	23.2%	19.7%	17.5%	15.8%	14.4%	12.9%	11.4%	9.5%	7.1%
LS Worsening Mobility	14.4%	105	15	30	45	60	75	90	105	120	135	150	27.4%	100.0%	27.4%	23.9%	21.5%	19.5%	17.6%	15.6%	13.5%	11.2%	8.2%
LS Catheter	1.1%	80	20	40	60	80	100	3.5%	100.0%	3.5%	2.1%	1.2%	0.5%										
LS UTI	1.5%	80	20	40	60	80	100	4.5%	100.0%	4.5%	2.7%	1.6%	0.6%										
LS ED Visit	0.20	150	15	30	45	60	75	90	105	120	135	150	1.90	1,000.00	1.90	1.46	1.20	1.02	0.87	0.73	0.62	0.49	0.34
LS Hospitalization	0.88	135	15	30	45	60	75	90	105	120	135	150	2.72	1,000.00	2.72	2.32	2.06	1.86	1.67	1.49	1.31	1.11	0.85

Five-Star, Long-Stay	Rate	Points	<<Worsens	Improves>>	Goal	Points
LS Antipsychotic Medication	9.9%	105			9.5 %	120
LS High Risk Pressure Ulcers	6.1%	60			5.7 %	80
LS Falls with Injury	1.6%	80			1.2 %	100
LS ADL Decline	12.1%	105			11.3 %	120
LS Worsening Mobility	19.2%	45			21.4 %	60

Chronic Care	Q1 2021	Q4 2020	Q2 2020	Q4 2019	... 4 Quarters Ending
+ LS Antipsychotic Medication ⁽⁵⁾	14.5%	13.3%	13.8%	14.7%	My Centers
	13.6%	12.9%	12.5%	12.9%	My Peers
+ LS Pain ⁽⁵⁾	NA	NA	NA	NA	My Centers
	NA	NA	NA	NA	My Peers
+ LS High Risk Pressure Ulcers ⁽⁵⁾	11.4%	10.3%	11.4%	13.7%	My Centers
	5.7%	5.6%	5.8%	6.2%	My Peers
+ LS Physical Restraint ⁽⁵⁾	0.0%	0.0%	0.4%	0.4%	My Centers
	0.0%	0.0%	0.0%	0.1%	My Peers
+ LS Depressive Symptoms ⁽⁵⁾	6.0%	8.0%	10.1%	4.2%	My Centers
	11.6%	11.3%	9.8%	7.9%	My Peers
+ LS Antianxiety/Hypnotics Medication ⁽⁵⁾	14.1%	13.3%	11.5%	10.1%	My Centers
	23.1%	23.2%	23.0%	23.0%	My Peers
+ LS Falls with Injury ⁽⁵⁾	1.9%	3.7%	6.7%	5.7%	My Centers
	3.0%	3.1%	3.3%	3.4%	My Peers
+ LS Weight Loss ⁽⁵⁾	5.2%	5.3%	4.3%	2.6%	My Centers
	5.8%	5.4%	4.3%	4.3%	My Peers
+ LS ADL Decline ⁽⁵⁾	14.1%	15.2%	16.2%	20.3%	My Centers
	12.2%	12.1%	12.2%	12.4%	My Peers
+ LS Worsening Mobility ⁽⁵⁾	32.1%	28.9%	23.5%	22.8%	My Centers
	20.0%	19.2%	16.2%	15.6%	My Peers

Performance is improving and better than state average

Performance is declining, but still better than state average

“Your Top-Line”

– LTC Trend Tracker Publication



Your Top-Line

- PDF summarizing a facility's Five-Star rating through graphics and the latest available resources
- Updated quarterly
- Distributed via email with direct link and accessible within Trend Tracker

Publication Number: 2021-Q3

Survey Rating



Your center is ranked 82nd out of 96 centers in your state. For more on how your survey score was calculated and to see if you a Special Focus Facility Candidate, see page 6

For more on your survey score, see Page 6.

Staffing Rating



Your Staffing Rating is currently based on 2021-Q1 Payroll-Based Journal (PBJ) data.

For more on your staffing breakdown, see Page 7.

Quality Measure Rating



The greatest opportunity to improve your QJM rating is on **SS Functional Improvement**, where you are currently earning 15 points based on a rate of 41.7%.

See your performance on all Quality Measures on Page 8.

Overall Rating



Your Overall Rating Calculation

+ 1 Star (From your Survey Rating being 1 Star)

+ 0 Stars (From your Staffing Rating being 1 Star)

+ 1 Star (From your Quality Rating being 5 Stars)

2 Stars is your Overall Rating

“Your Resident Profile”

– LTC Trend Tracker Publication





Your Resident Profile

- Summary of Resident medical conditions
- Looks for trends in how resident characteristics are changing

Resident Statistics by Year		Oct 2018-Sep 2019				Oct 2019-Sep 2020					
High-Level Counts	Average Census										
		Licensed Beds:	124				124				
		MDS Calculated Daily Census:	96				88				
	PBJ		PBJ Daily Census:	96				96			
			Daily Total Nursing Staffing HPRD:	3.18				3.3			
			Daily RN Staffing HPRD:	0.61				0.56			
Resident Statistics by Year		Episodes in Category	% of All Episodes	Resident Days in Category	% of All Resident Days	Episodes in Category	% of All Episodes	Resident Days in Category	% of All Resident Days		
Disease or Condition Category											
	Cancer:	31	9%	3,227	9%	18	9%	3,996	12%		
	Heart/Circulation:	312	90%	31,930	90%	182	93%	29,960	93%		
	Gastrointestinal:	79	24%	8,789	24%	54	27%	11,072	33%		
	Renal Insufficiency, Renal Failure, or ESRD:	58	18%	5,348	15%	36	18%	6,474	21%		
	Other Genitourinary:	104	30%	9,649	27%	72	36%	10,995	33%		



101 Course on ahcancalED

The screenshot shows the ahcancalED website interface. At the top, there is a blue header with the logo 'ahcancalED' and a lightbulb icon. To the right of the logo is the tagline 'Learning, Inspiring, Sharing' and a search bar with the text 'Search this site' and a 'FIND' button. Below the header is a navigation bar with links for 'Home', 'Visit AHCA Website', and 'Visit NCAL Website'. The main content area features a sidebar on the left with buttons for 'LOG IN', 'CONTENT LIBRARY', 'RECOMMENDED FOR YOU', 'NEED HELP?', and 'UPCOMING WEBINARS'. The main content area displays the course title 'How do I use LTC Trend Tracker as a Skilled Nursing Facility?' and a 'REGISTER' button. Below the title are navigation tabs for 'How to Login and Register', 'Overview', 'Contents (9)', and 'Handouts'. A key legend is shown with icons for 'Complete', 'Next', 'Failed', 'Available', and 'Locked'. The first item in the list is '1. Welcome to the LTC Trend Tracker 101 course' with a lock icon and the text 'Open to view video.' A yellow box on the right side of the page contains the text 'YOU MUST REGISTER TO ACCESS.'

<https://educate.ahcancal.org/products/how-do-i-use-ltc-trend-tracker-as-a-skilled-nursing-facility>

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DELIVERING SOLUTIONS *for*
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