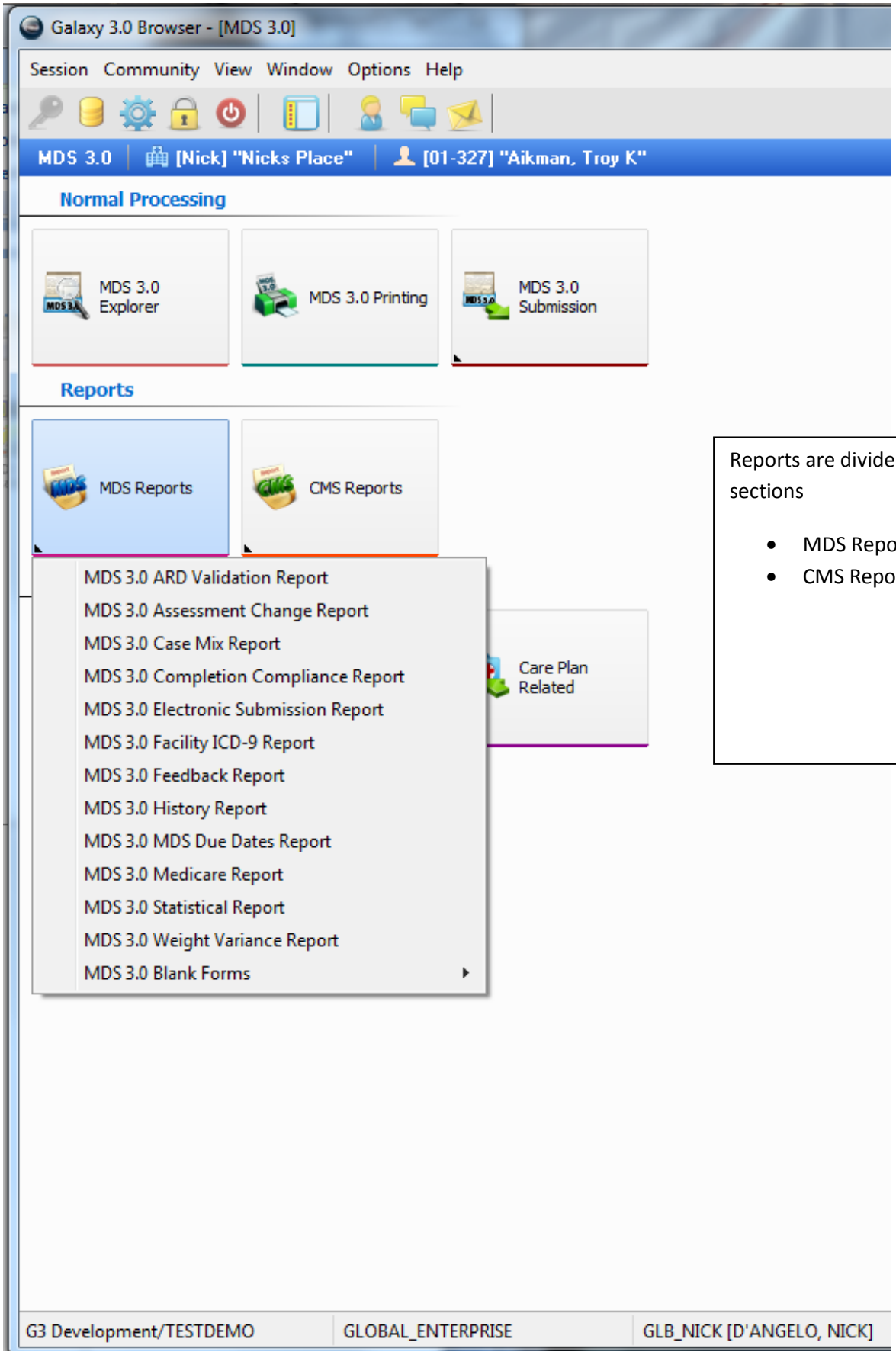
Galaxy Hosted Software

MDS 3.0 Reports

Nick M. D'Angelo, Sr

August 2012



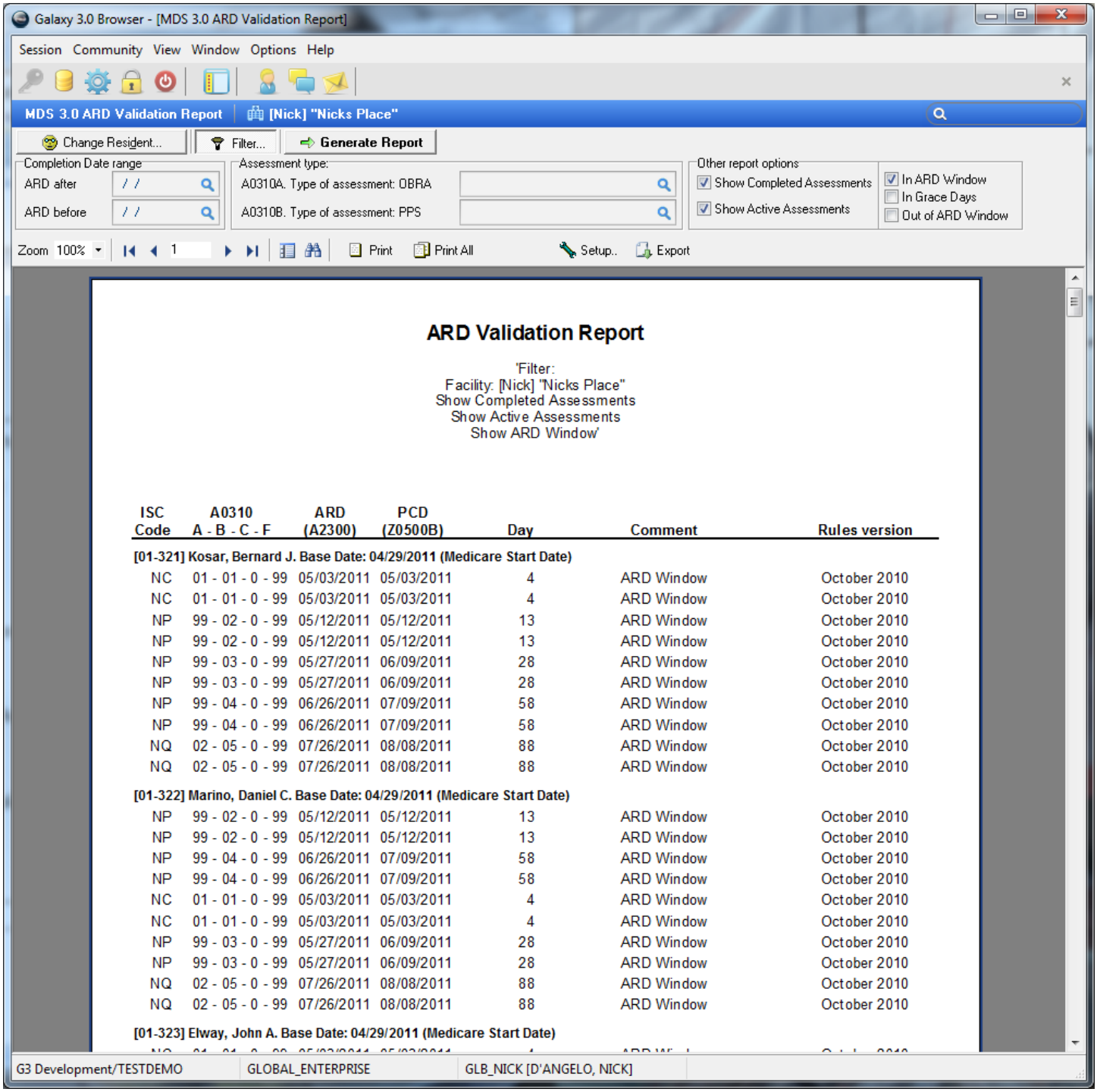
Reports are divided into two sections

- MDS Reports
- CMS Reports

The ARD Validation Report can be run to show you which assessments were completed

- in the ARD window
- in the ARD window using Grace Days
- out of the ARD window

This can be run based on completion date ranges or assessment types

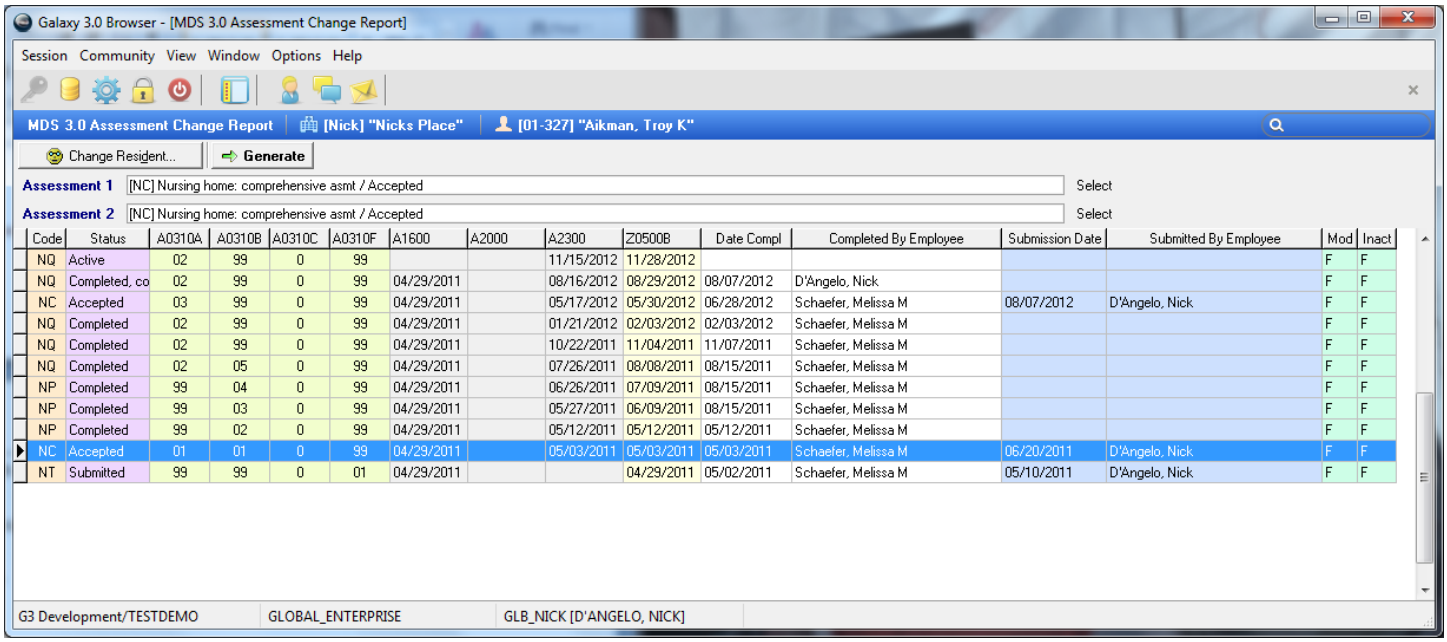


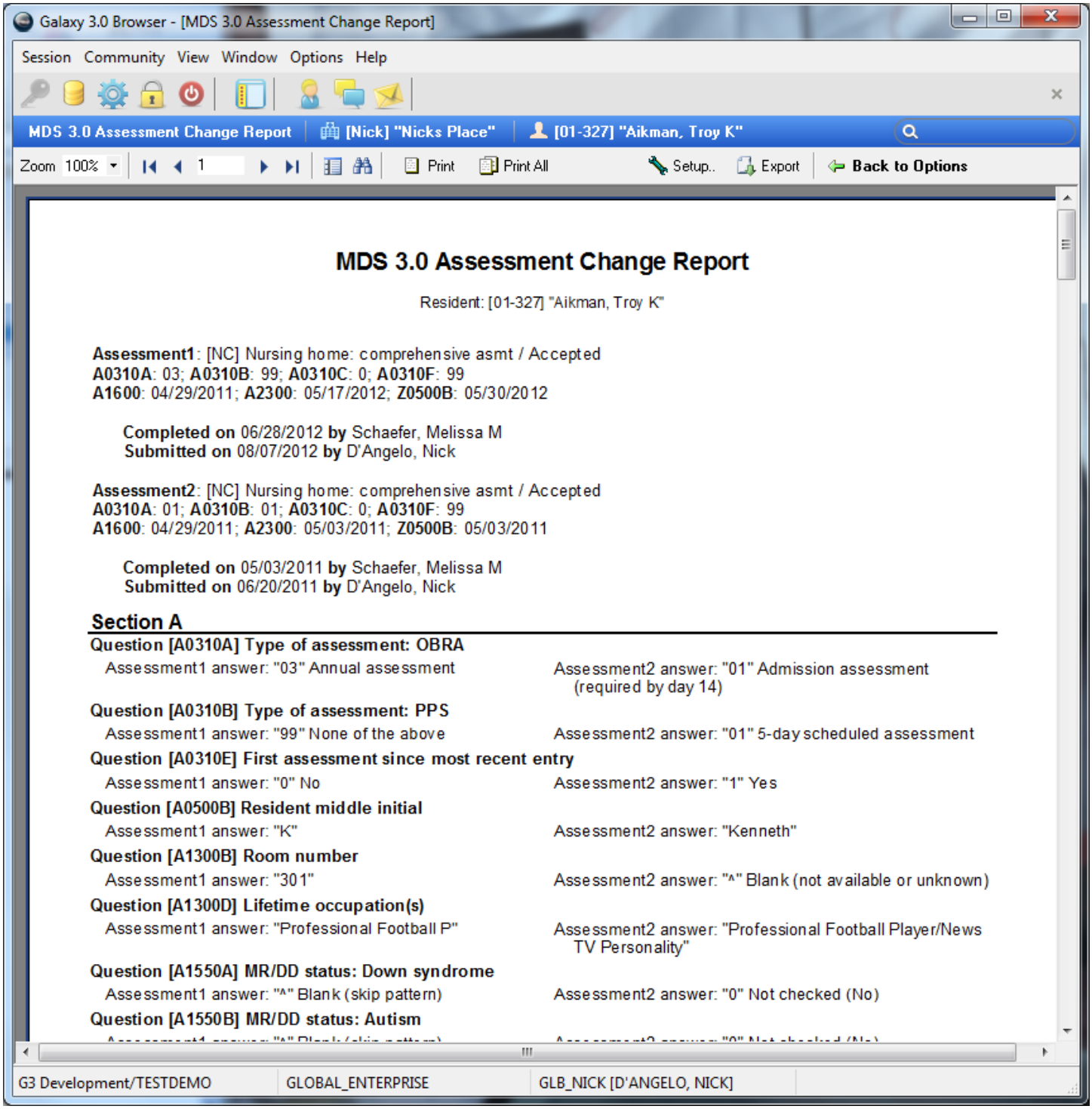
The MDS 3.0 Assessment Change report lists which MDS answers are different between the two chosen assessments

Use the runtime options to choose

- Assessment 1
- Assessment 2

These do not have to be the same type of assessment. If comparing two different types of assessments the report will list the questions that were answered in one but not the other as well as the answers that are different,

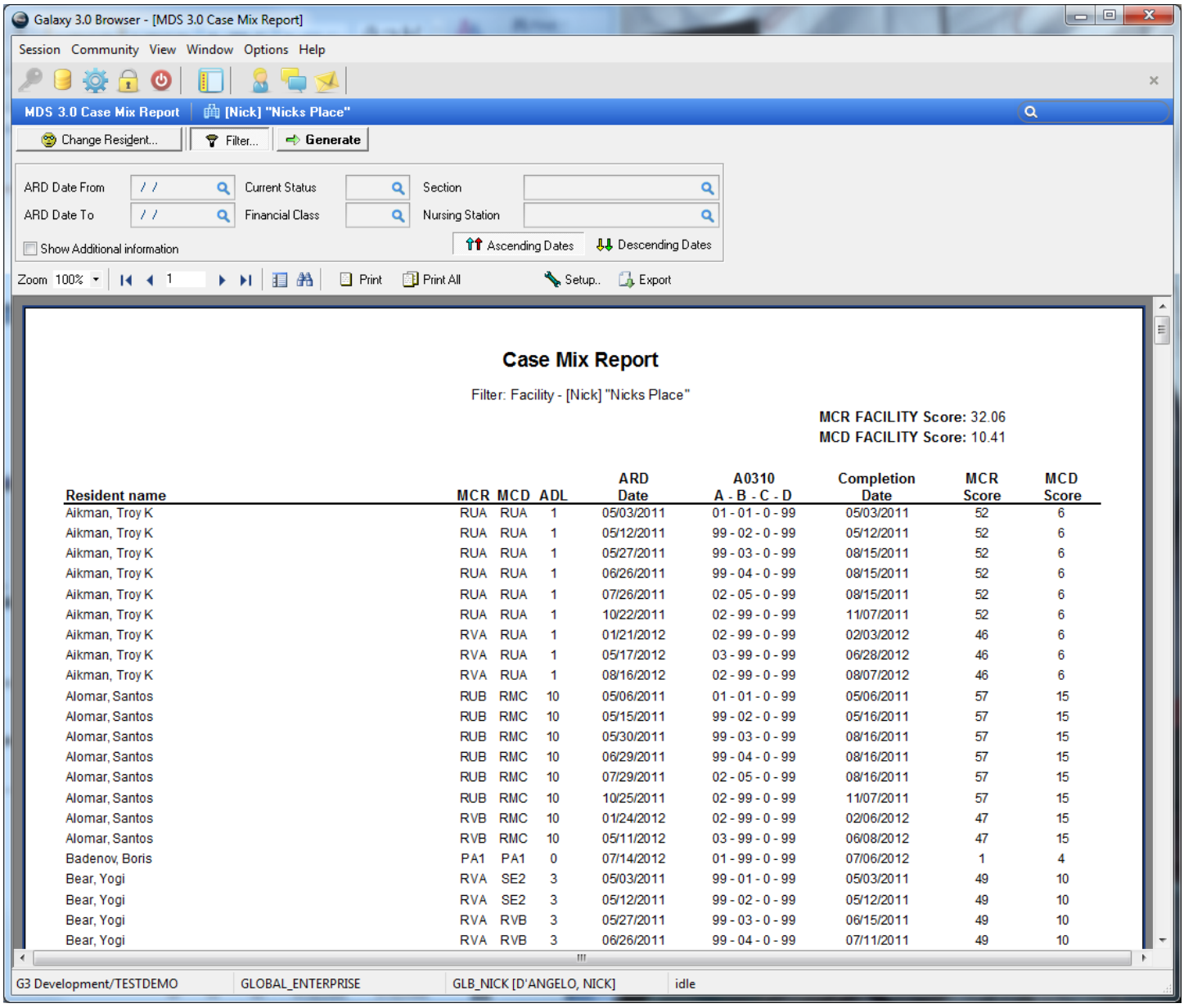



Galaxy 3.0 Browser - [MDS 3.0 Assessment Change Report]
Session Community View Window Options Help
MDS 3.0 Assessment Change Report
[Nick] "Nicks Place"
[01-327] "Aikman, Troy K"
Zoom 100%
Print
Print All
Setup..
Export
Back to Options
MDS 3.0 Assessment Change Report
Resident: [01-327] "Aikman, Troy K"
Assessment1: [NC] Nursing home: comprehensive asmt / Accepted
A0310A: 03; A0310B: 99; A0310C: 0; A0310F: 99
A1600: 04/29/2011; A2300: 05/17/2012; Z0500B: 05/30/2012
Completed on 06/28/2012 by Schaefer, Melissa M
Submitted on 08/07/2012 by D'Angelo, Nick
Assessment2: [NC] Nursing home: comprehensive asmt / Accepted
A0310A: 01; A0310B: 01; A0310C: 0; A0310F: 99
A1600: 04/29/2011; A2300: 05/03/2011; Z0500B: 05/03/2011
Completed on 05/03/2011 by Schaefer, Melissa M
Submitted on 06/20/2011 by D'Angelo, Nick
Section A
Question [A0310A] Type of assessment: OBRA
Assessment1 answer: "03" Annual assessment
Assessment2 answer: "01" Admission assessment (required by day 14)
Question [A0310B] Type of assessment: PPS
Assessment1 answer: "99" None of the above
Assessment2 answer: "01" 5-day scheduled assessment
Question [A0310E] First assessment since most recent entry
Assessment1 answer: "0" No
Assessment2 answer: "1" Yes
Question [A0500B] Resident middle initial
Assessment1 answer: "K"
Assessment2 answer: "Kenneth"
Question [A1300B] Room number
Assessment1 answer: "301"
Assessment2 answer: "^" Blank (not available or unknown)
Question [A1300D] Lifetime occupation(s)
Assessment1 answer: "Professional Football P"
Assessment2 answer: "Professional Football Player/News TV Personality"
Question [A1550A] MR/DD status: Down syndrome
Assessment1 answer: "^" Blank (skip pattern)
Assessment2 answer: "0" Not checked (No)
Question [A1550B] MR/DD status: Autism
G3 Development/TESTDEMO
GLOBAL_ENTERPRISE
GLB_NICK [D'ANGELO, NICK]

The Case Mix Report will show you the RUGs information for your completed assessments

Use the runtime options to choose

- Current Status (usually ADM)
- Section
- Nursing Station
- Financial Class
- ARD Date Range



Resident name	MCR	MCD	ADL	ARD Date	A0310 A - B - C - D	Completion Date	MCR Score	MCD Score
Aikman, Troy K	RUA	RUA	1	05/03/2011	01 - 01 - 0 - 99	05/03/2011	52	6
Aikman, Troy K	RUA	RUA	1	05/12/2011	99 - 02 - 0 - 99	05/12/2011	52	6
Aikman, Troy K	RUA	RUA	1	05/27/2011	99 - 03 - 0 - 99	08/15/2011	52	6
Aikman, Troy K	RUA	RUA	1	06/26/2011	99 - 04 - 0 - 99	08/15/2011	52	6
Aikman, Troy K	RUA	RUA	1	07/26/2011	02 - 05 - 0 - 99	08/15/2011	52	6
Aikman, Troy K	RUA	RUA	1	10/22/2011	02 - 99 - 0 - 99	11/07/2011	52	6
Aikman, Troy K	RVA	RUA	1	01/21/2012	02 - 99 - 0 - 99	02/03/2012	46	6
Aikman, Troy K	RVA	RUA	1	05/17/2012	03 - 99 - 0 - 99	06/28/2012	46	6
Aikman, Troy K	RVA	RUA	1	08/16/2012	02 - 99 - 0 - 99	08/07/2012	46	6
Alomar, Santos	RUB	RMC	10	05/06/2011	01 - 01 - 0 - 99	05/06/2011	57	15
Alomar, Santos	RUB	RMC	10	05/15/2011	99 - 02 - 0 - 99	05/16/2011	57	15
Alomar, Santos	RUB	RMC	10	05/30/2011	99 - 03 - 0 - 99	08/16/2011	57	15
Alomar, Santos	RUB	RMC	10	06/29/2011	99 - 04 - 0 - 99	08/16/2011	57	15
Alomar, Santos	RUB	RMC	10	07/29/2011	02 - 05 - 0 - 99	08/16/2011	57	15
Alomar, Santos	RUB	RMC	10	10/25/2011	02 - 99 - 0 - 99	11/07/2011	57	15
Alomar, Santos	RVB	RMC	10	01/24/2012	02 - 99 - 0 - 99	02/06/2012	47	15
Alomar, Santos	RVB	RMC	10	05/11/2012	03 - 99 - 0 - 99	06/08/2012	47	15
Badenov, Boris	PA1	PA1	0	07/14/2012	01 - 99 - 0 - 99	07/06/2012	1	4
Bear, Yogi	RVA	SE2	3	05/03/2011	99 - 01 - 0 - 99	05/03/2011	49	10
Bear, Yogi	RVA	SE2	3	05/12/2011	99 - 02 - 0 - 99	05/12/2011	49	10
Bear, Yogi	RVA	RVB	3	05/27/2011	99 - 03 - 0 - 99	06/15/2011	49	10
Bear, Yogi	RVA	RVB	3	06/26/2011	99 - 04 - 0 - 99	07/11/2011	49	10

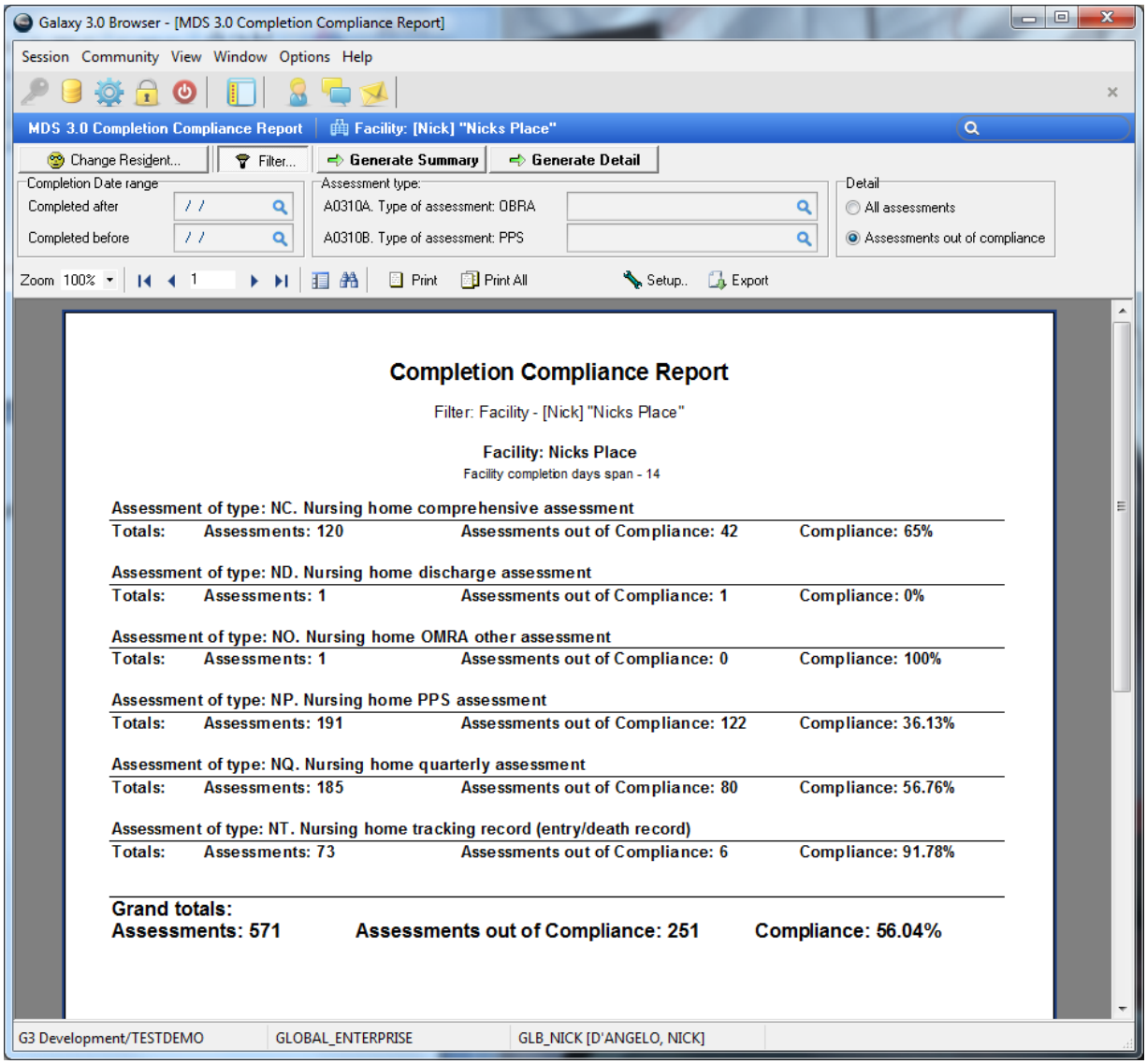
The Completion Compliance Report will show you which assessments were completed in their scheduled time.

Use the runtime options to choose

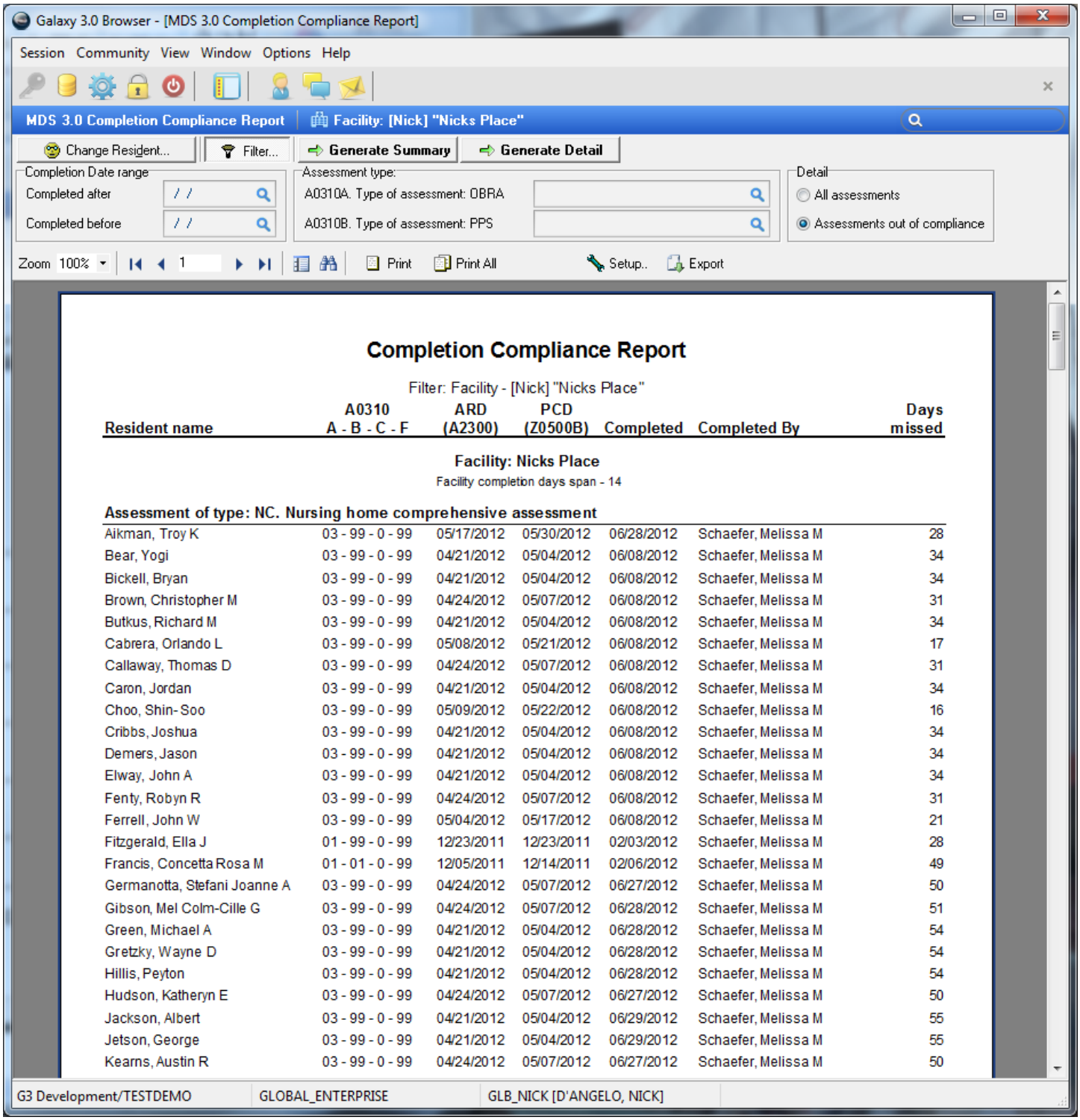
- Completed After
- Completed Before
- Assessment Type
    - A0310A (OBRA option)
    - A0310B (PPS option)

*Assessment type can be left blank for general report

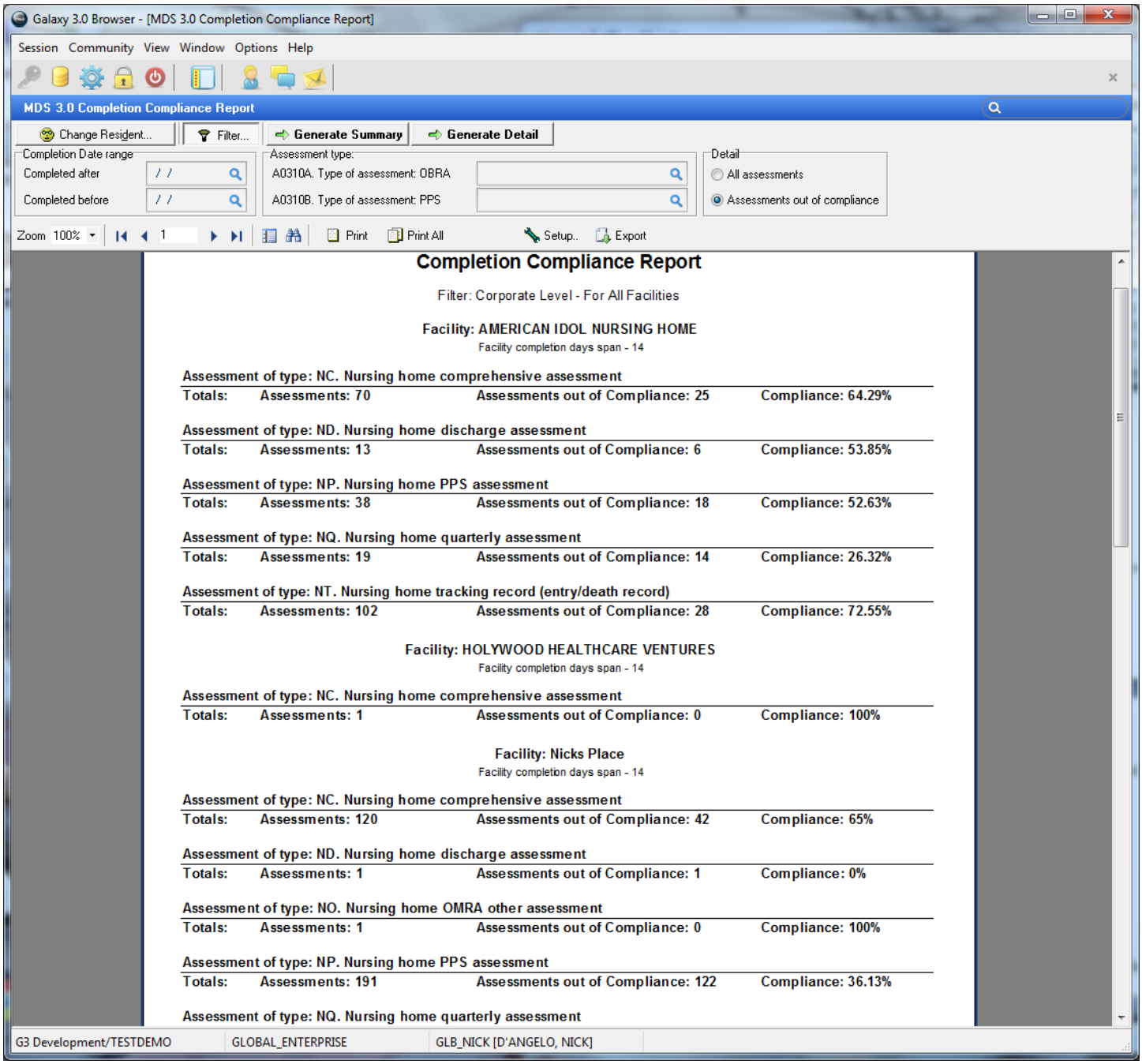
It can be run in Summary Form



Or it can be run in Detail Form

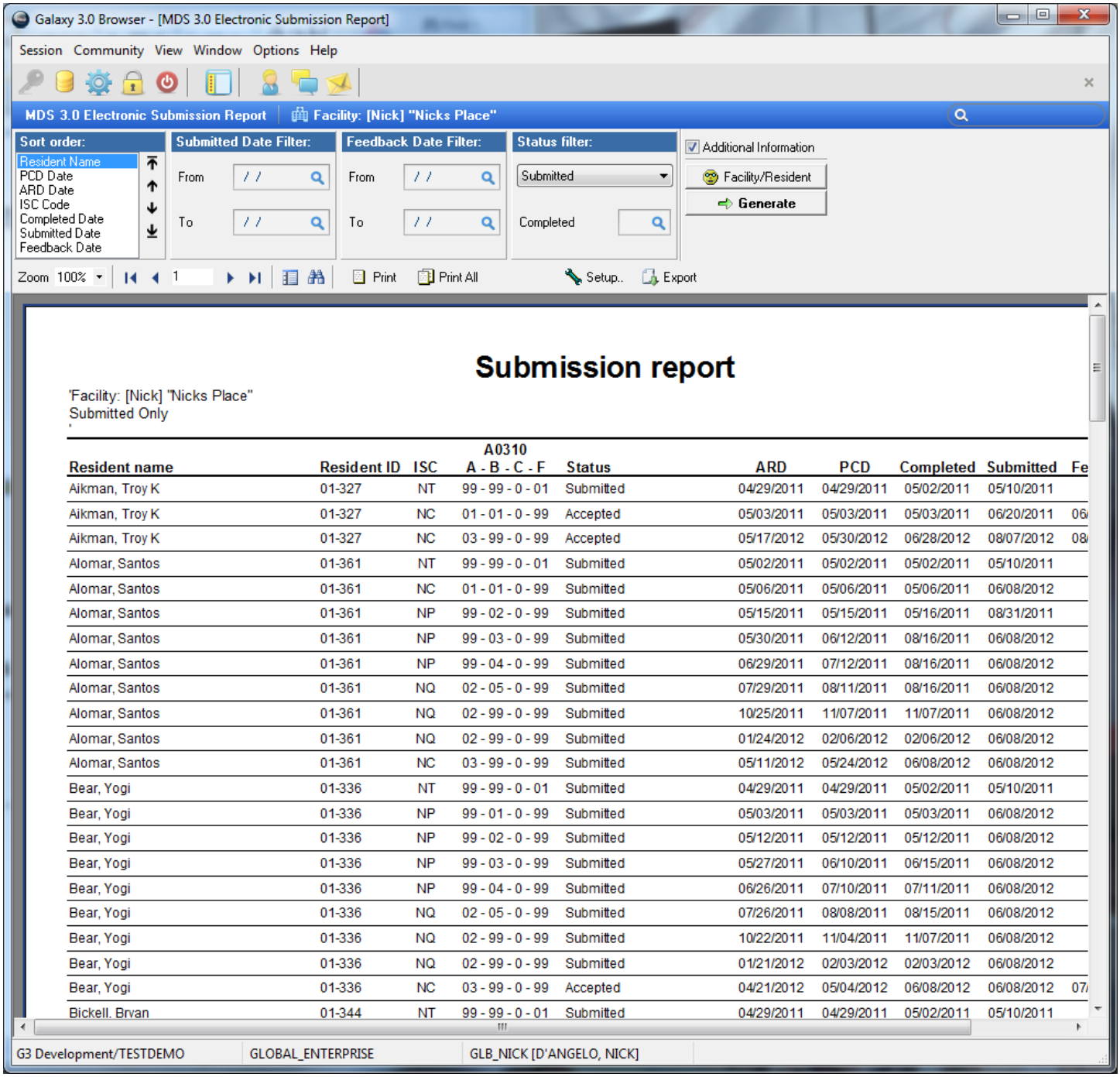


The Completion Compliance Report is a GREAT report to run by Facility group to give a larger picture idea of how your homes are doing.



Electronic Submission Report

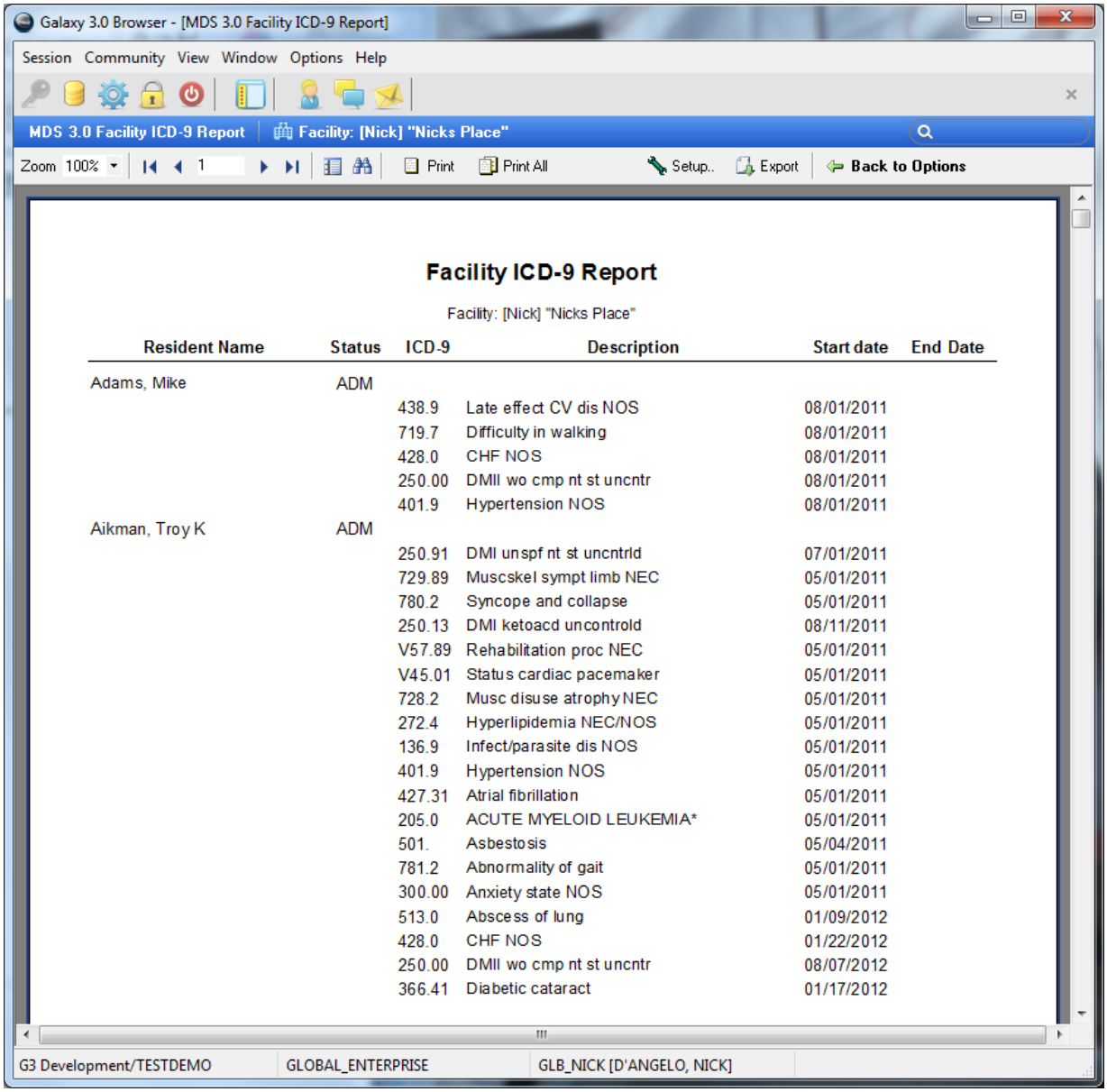
This will give you detailed information about all the assessments that have been electronically submitted through Galaxy



The Facility ICD-9 report lists each resident and the ICD-9's associated with that resident.
Use the runtime options to choose

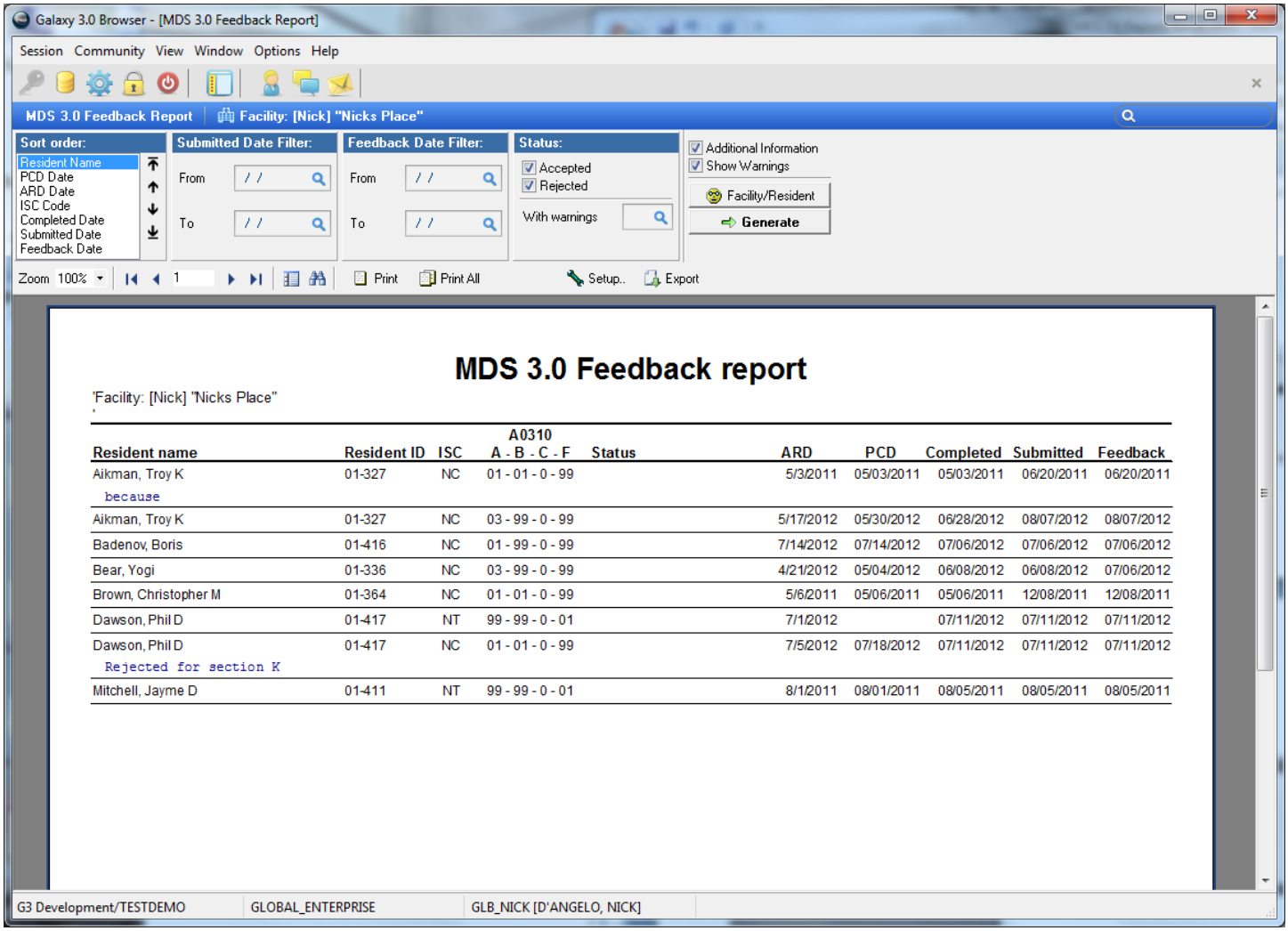
- Diagnosisi ICD9 start and end dates
- Diagnosis Date Span (normally left blank)
- Financial Class
- Type of ICD-9
    - Primary
    - Admitting
    - PT
    - OT
    - ST
    - All Types

*Type of ICD-9 defaults to All Types – this will run report for all
Resident Status (usually ADM)



Feedback Report

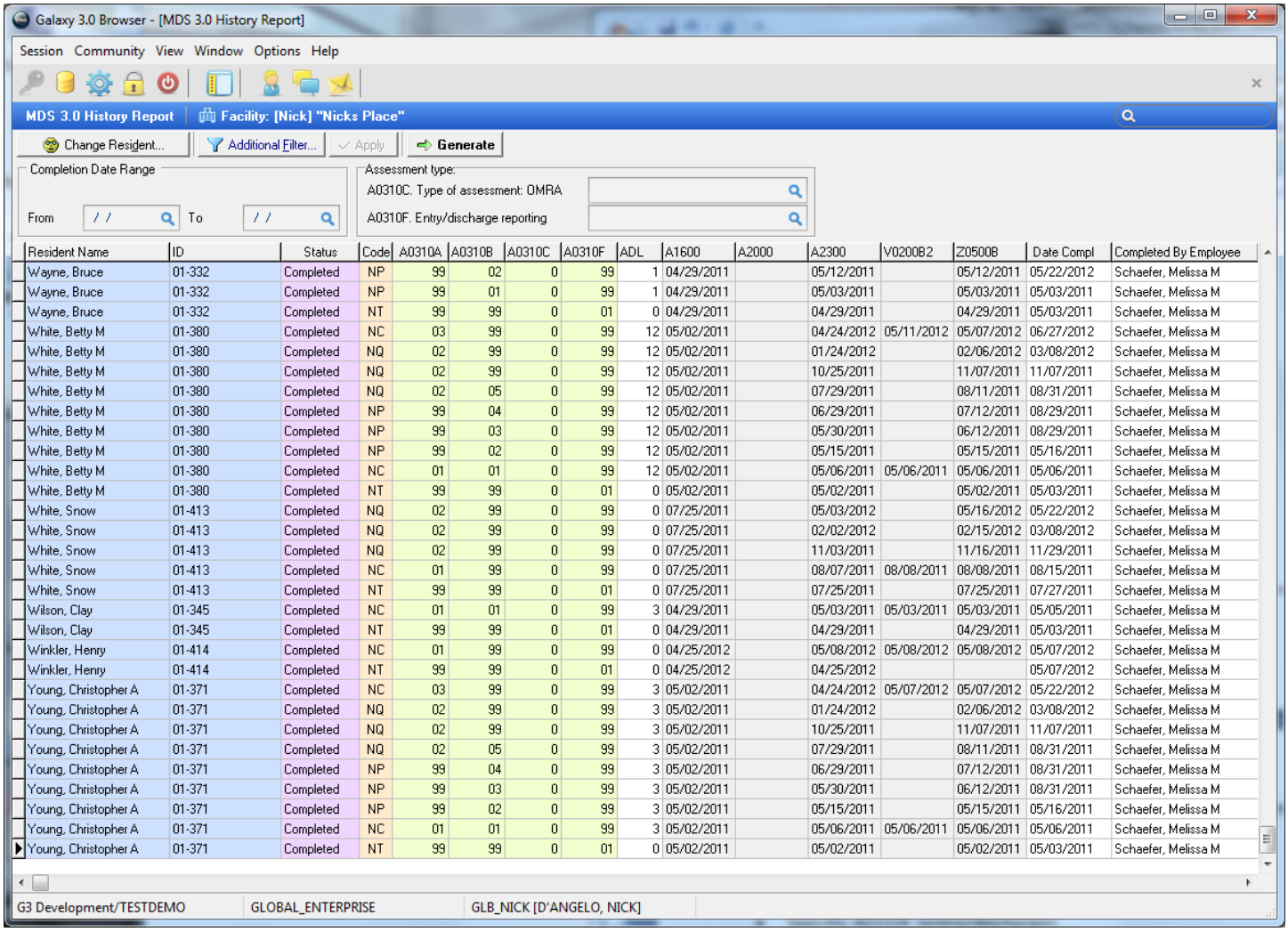
Provides feedback information on assessments



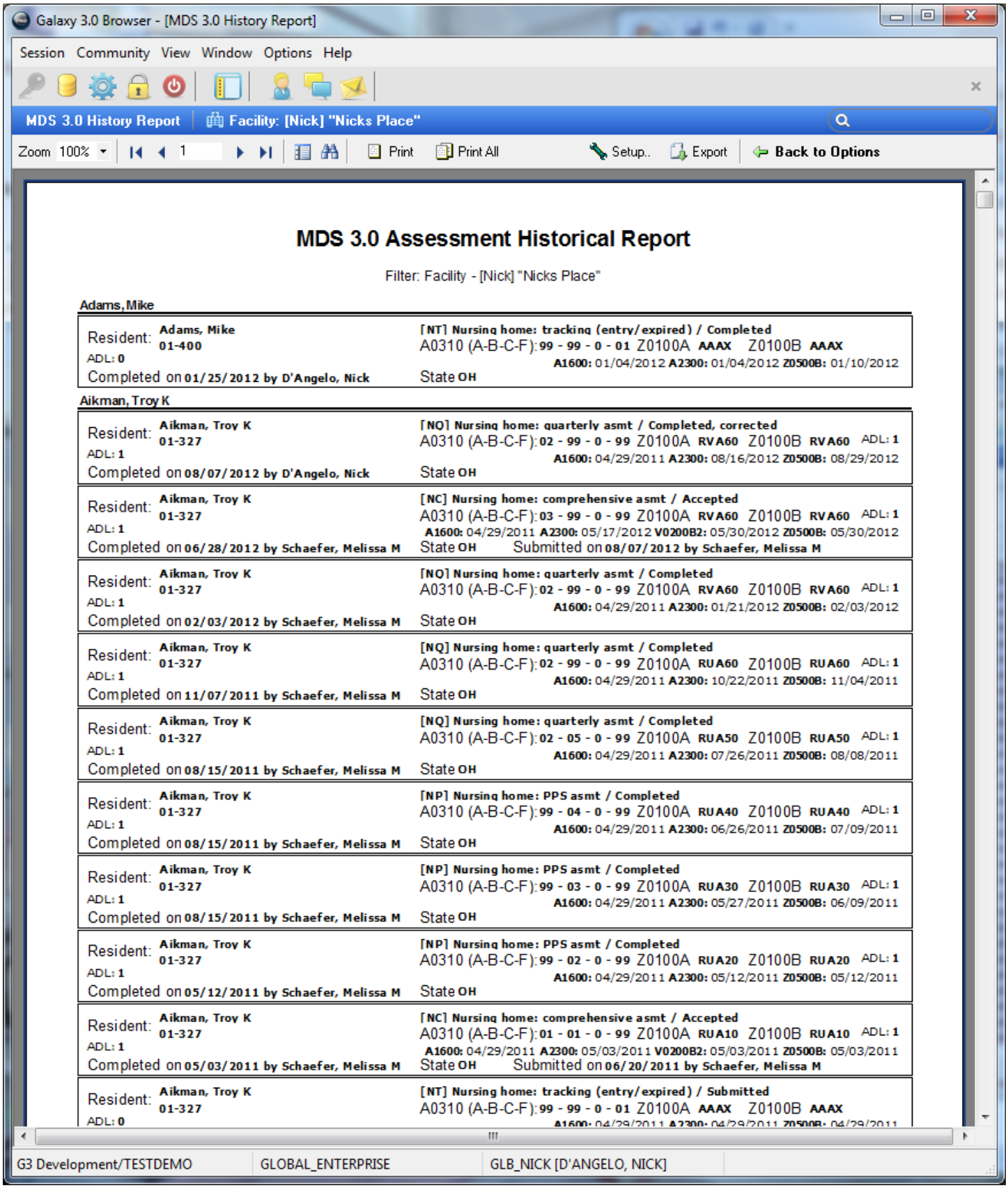
The MDS 3.0 History report lists all the assessment done for a given resident (or even whole facility)
Use the runtime options to choose

- Completion Date Range (leave blank for all)
- Specific A0310C (therapy)
- Specific A0310F (entry/discharge)

*Assessment type usually left blank

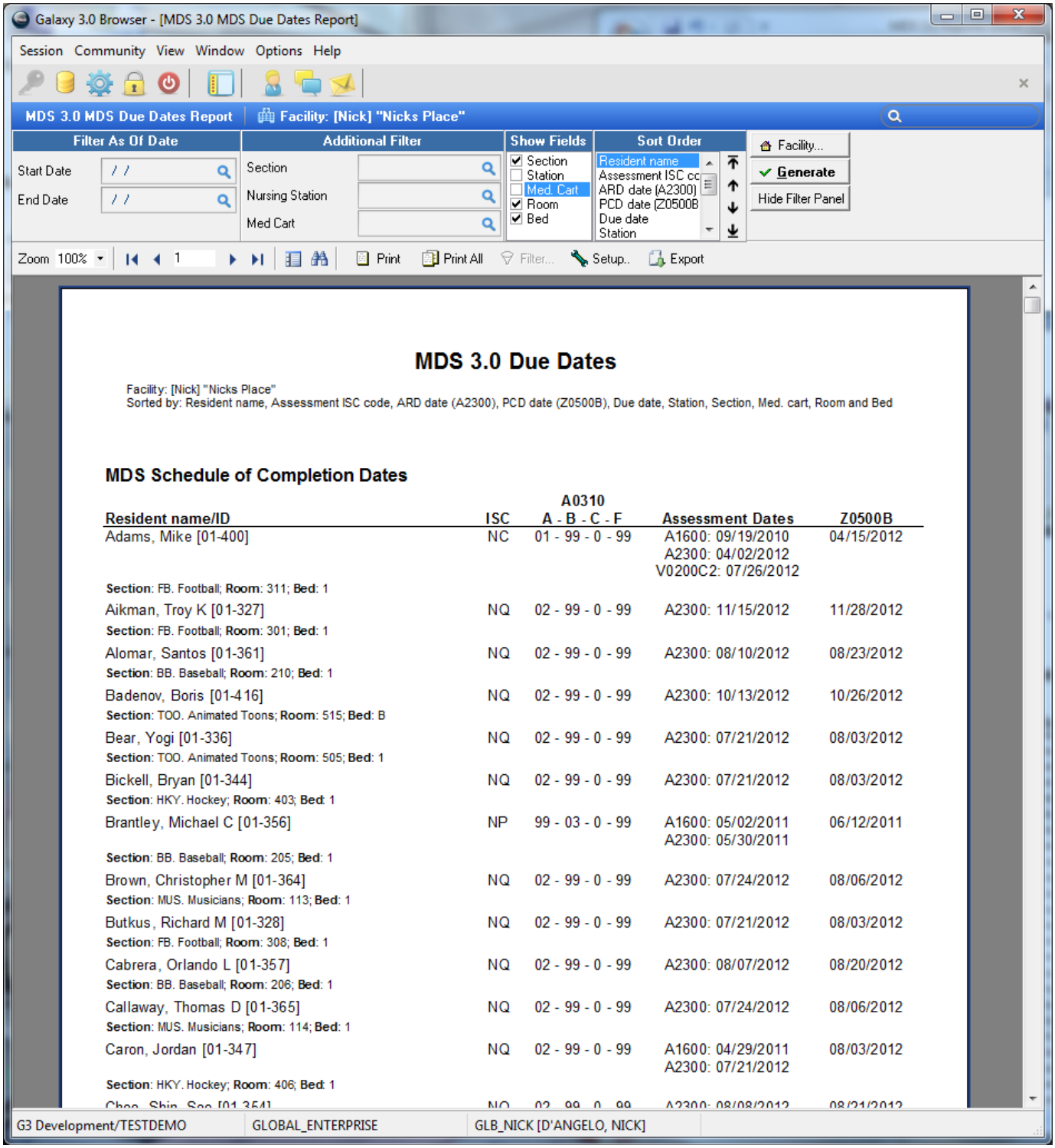


Resident Name	ID	Status	Code	A0310A	A0310B	A0310C	A0310F	ADL	A1600	A2000	A2300	V0200B2	Z0500B	Date Compl	Completed By Employee
Wayne, Bruce	01-332	Completed	NP	99	02	0	99	1	04/29/2011		05/12/2011		05/12/2011	05/22/2012	Schaefer, Melissa M
Wayne, Bruce	01-332	Completed	NP	99	01	0	99	1	04/29/2011		05/03/2011		05/03/2011	05/03/2011	Schaefer, Melissa M
Wayne, Bruce	01-332	Completed	NT	99	99	0	01	0	04/29/2011		04/29/2011		04/29/2011	05/03/2011	Schaefer, Melissa M
White, Betty M	01-380	Completed	NC	03	99	0	99	12	05/02/2011		04/24/2012	05/11/2012	05/07/2012	06/27/2012	Schaefer, Melissa M
White, Betty M	01-380	Completed	NQ	02	99	0	99	12	05/02/2011		01/24/2012		02/06/2012	03/08/2012	Schaefer, Melissa M
White, Betty M	01-380	Completed	NQ	02	99	0	99	12	05/02/2011		10/25/2011		11/07/2011	11/07/2011	Schaefer, Melissa M
White, Betty M	01-380	Completed	NQ	02	05	0	99	12	05/02/2011		07/29/2011		08/11/2011	08/31/2011	Schaefer, Melissa M
White, Betty M	01-380	Completed	NP	99	04	0	99	12	05/02/2011		06/29/2011		07/12/2011	08/29/2011	Schaefer, Melissa M
White, Betty M	01-380	Completed	NP	99	03	0	99	12	05/02/2011		05/30/2011		06/12/2011	08/29/2011	Schaefer, Melissa M
White, Betty M	01-380	Completed	NP	99	02	0	99	12	05/02/2011		05/15/2011		05/15/2011	05/16/2011	Schaefer, Melissa M
White, Betty M	01-380	Completed	NC	01	01	0	99	12	05/02/2011		05/06/2011	05/06/2011	05/06/2011	05/06/2011	Schaefer, Melissa M
White, Betty M	01-380	Completed	NT	99	99	0	01	0	05/02/2011		05/02/2011		05/02/2011	05/03/2011	Schaefer, Melissa M
White, Snow	01-413	Completed	NQ	02	99	0	99	0	07/25/2011		05/03/2012		05/16/2012	05/22/2012	Schaefer, Melissa M
White, Snow	01-413	Completed	NQ	02	99	0	99	0	07/25/2011		02/02/2012		02/15/2012	03/08/2012	Schaefer, Melissa M
White, Snow	01-413	Completed	NQ	02	99	0	99	0	07/25/2011		11/03/2011		11/16/2011	11/29/2011	Schaefer, Melissa M
White, Snow	01-413	Completed	NC	01	99	0	99	0	07/25/2011		08/07/2011	08/08/2011	08/08/2011	08/15/2011	Schaefer, Melissa M
White, Snow	01-413	Completed	NT	99	99	0	01	0	07/25/2011		07/25/2011		07/25/2011	07/27/2011	Schaefer, Melissa M
Wilson, Clay	01-345	Completed	NC	01	01	0	99	3	04/29/2011		05/03/2011	05/03/2011	05/03/2011	05/05/2011	Schaefer, Melissa M
Wilson, Clay	01-345	Completed	NT	99	99	0	01	0	04/29/2011		04/29/2011		04/29/2011	05/03/2011	Schaefer, Melissa M
Winkler, Henry	01-414	Completed	NC	01	99	0	99	0	04/25/2012		05/08/2012	05/08/2012	05/08/2012	05/07/2012	Schaefer, Melissa M
Winkler, Henry	01-414	Completed	NT	99	99	0	01	0	04/25/2012		04/25/2012			05/07/2012	Schaefer, Melissa M
Young, Christopher A	01-371	Completed	NC	03	99	0	99	3	05/02/2011		04/24/2012	05/07/2012	05/07/2012	05/22/2012	Schaefer, Melissa M
Young, Christopher A	01-371	Completed	NQ	02	99	0	99	3	05/02/2011		01/24/2012		02/06/2012	03/08/2012	Schaefer, Melissa M
Young, Christopher A	01-371	Completed	NQ	02	99	0	99	3	05/02/2011		10/25/2011		11/07/2011	11/07/2011	Schaefer, Melissa M
Young, Christopher A	01-371	Completed	NQ	02	05	0	99	3	05/02/2011		07/29/2011		08/11/2011	08/31/2011	Schaefer, Melissa M
Young, Christopher A	01-371	Completed	NP	99	04	0	99	3	05/02/2011		06/29/2011		07/12/2011	08/31/2011	Schaefer, Melissa M
Young, Christopher A	01-371	Completed	NP	99	03	0	99	3	05/02/2011		05/30/2011		06/12/2011	08/31/2011	Schaefer, Melissa M
Young, Christopher A	01-371	Completed	NP	99	02	0	99	3	05/02/2011		05/15/2011		05/15/2011	05/16/2011	Schaefer, Melissa M
Young, Christopher A	01-371	Completed	NC	01	01	0	99	3	05/02/2011		05/06/2011	05/06/2011	05/06/2011	05/06/2011	Schaefer, Melissa M
Young, Christopher A	01-371	Completed	NT	99	99	0	01	0	05/02/2011		05/02/2011		05/02/2011	05/03/2011	Schaefer, Melissa M


Galaxy 3.0 Browser - [MDS 3.0 History Report]
Session Community View Window Options Help
MDS 3.0 History Report
Facility: [Nick] "Nicks Place"
Zoom 100%
Print
Print All
Setup..
Export
Back to Options
MDS 3.0 Assessment Historical Report
Filter: Facility - [Nick] "Nicks Place"
Adams, Mike
Resident: Adams, Mike 01-400
ADL: 0
Completed on 01/25/2012 by D'Angelo, Nick
[NT] Nursing home: tracking (entry/expired) / Completed
A0310 (A-B-C-F): 99 - 99 - 0 - 01 Z0100A AAAX Z0100B AAAX
A1600: 01/04/2012 A2300: 01/04/2012 Z0500B: 01/10/2012
State OH
Aikman, Troy K
Resident: Aikman, Troy K 01-327
ADL: 1
Completed on 08/07/2012 by D'Angelo, Nick
[NQ] Nursing home: quarterly asmt / Completed, corrected
A0310 (A-B-C-F): 02 - 99 - 0 - 99 Z0100A RVA60 Z0100B RVA60 ADL: 1
A1600: 04/29/2011 A2300: 08/16/2012 Z0500B: 08/29/2012
State OH
Resident: Aikman, Troy K 01-327
ADL: 1
Completed on 06/28/2012 by Schaefer, Melissa M
[NC] Nursing home: comprehensive asmt / Accepted
A0310 (A-B-C-F): 03 - 99 - 0 - 99 Z0100A RVA60 Z0100B RVA60 ADL: 1
A1600: 04/29/2011 A2300: 05/17/2012 V0200B2: 05/30/2012 Z0500B: 05/30/2012
State OH Submitted on 08/07/2012 by Schaefer, Melissa M
Resident: Aikman, Troy K 01-327
ADL: 1
Completed on 02/03/2012 by Schaefer, Melissa M
[NQ] Nursing home: quarterly asmt / Completed
A0310 (A-B-C-F): 02 - 99 - 0 - 99 Z0100A RVA60 Z0100B RVA60 ADL: 1
A1600: 04/29/2011 A2300: 01/21/2012 Z0500B: 02/03/2012
State OH
Resident: Aikman, Troy K 01-327
ADL: 1
Completed on 11/07/2011 by Schaefer, Melissa M
[NQ] Nursing home: quarterly asmt / Completed
A0310 (A-B-C-F): 02 - 99 - 0 - 99 Z0100A RUA60 Z0100B RUA60 ADL: 1
A1600: 04/29/2011 A2300: 10/22/2011 Z0500B: 11/04/2011
State OH
Resident: Aikman, Troy K 01-327
ADL: 1
Completed on 08/15/2011 by Schaefer, Melissa M
[NQ] Nursing home: quarterly asmt / Completed
A0310 (A-B-C-F): 02 - 05 - 0 - 99 Z0100A RUA50 Z0100B RUA50 ADL: 1
A1600: 04/29/2011 A2300: 07/26/2011 Z0500B: 08/08/2011
State OH
Resident: Aikman, Troy K 01-327
ADL: 1
Completed on 08/15/2011 by Schaefer, Melissa M
[NP] Nursing home: PPS asmt / Completed
A0310 (A-B-C-F): 99 - 04 - 0 - 99 Z0100A RUA40 Z0100B RUA40 ADL: 1
A1600: 04/29/2011 A2300: 06/26/2011 Z0500B: 07/09/2011
State OH
Resident: Aikman, Troy K 01-327
ADL: 1
Completed on 08/15/2011 by Schaefer, Melissa M
[NP] Nursing home: PPS asmt / Completed
A0310 (A-B-C-F): 99 - 03 - 0 - 99 Z0100A RUA30 Z0100B RUA30 ADL: 1
A1600: 04/29/2011 A2300: 05/27/2011 Z0500B: 06/09/2011
State OH
Resident: Aikman, Troy K 01-327
ADL: 1
Completed on 05/12/2011 by Schaefer, Melissa M
[NP] Nursing home: PPS asmt / Completed
A0310 (A-B-C-F): 99 - 02 - 0 - 99 Z0100A RUA20 Z0100B RUA20 ADL: 1
A1600: 04/29/2011 A2300: 05/12/2011 Z0500B: 05/12/2011
State OH
Resident: Aikman, Troy K 01-327
ADL: 1
Completed on 05/03/2011 by Schaefer, Melissa M
[NC] Nursing home: comprehensive asmt / Accepted
A0310 (A-B-C-F): 01 - 01 - 0 - 99 Z0100A RUA10 Z0100B RUA10 ADL: 1
A1600: 04/29/2011 A2300: 05/03/2011 V0200B2: 05/03/2011 Z0500B: 05/03/2011
State OH Submitted on 06/20/2011 by Schaefer, Melissa M
Resident: Aikman, Troy K 01-327
ADL: 0
[NT] Nursing home: tracking (entry/expired) / Submitted
A0310 (A-B-C-F): 99 - 99 - 0 - 01 Z0100A AAAX Z0100B AAAX
G3 Development/TESTDEMO
GLOBAL_ENTERPRISE
GLB_NICK [D'ANGELO, NICK]

The MDS Due Date Report shows the Schedule of

- Completion Dates
- Section V Dates
- Submission Dates
- Submission Feedback Dates
- Rejected Submission Due Dates
- NT's Needed



MDS Schedule of Section "V" Dates

Resident name/ID	ISC	A0310 A - B - C - F	Complete Date	Projected VB2
Aldean, Jason [05-621]	NC	01 - 01 - 1 - 99	11/11/2011 2:11:15	10/10/2011
Galaxy, Suzanne Q [54-123]	NC	01 - 01 - 0 - 99	11/10/2011 3:10:12	11/07/2011
Section: SNF. Skilled Nursing Section; **Room**: 500; **Bed**: C				
Iglesias, Julio J [05-101]	NC	01 - 99 - 0 - 99	11/16/2011 11:08:17	11/14/2011
Section: SNF. Skilled Nursing Section; **Room**: 214; **Bed**: A				
LaBelle, Patricia L [05-042]	NC	01 - 01 - 0 - 99	06/07/2011 1:04:40	05/14/2011
Section: SNF. Skilled Nursing Section; **Room**: 112; **Bed**: B				
Morris, Stevland H [05-098]	NC	01 - 99 - 0 - 99	06/15/2011 1:29:17	06/02/2011
Section: SNF. Skilled Nursing Section; **Room**: 110; **Bed**: A				
Robinson, Smokey W [05-068]	NC	01 - 99 - 0 - 99	06/20/2011 11:05:01	06/14/2011
Section: SNF. Skilled Nursing Section; **Room**: 115; **Bed**: A				
Rogers, Keneth R [05-039]	NC	01 - 99 - 0 - 99	05/23/2011 3:45:22	05/18/2011
Section: SNF. Skilled Nursing Section; **Room**: 102; **Bed**: A				

MDS Schedule of Submission Dates

Resident name/ID	ISC	A0310 A - B - C - F	Assessment Dates	Z0500B	Submit No Later Than
Adams, Mike [01-400]	NT	99 - 99 - 0 - 01	A1600: 01/04/2012 A2300: 01/04/2012	NT	01/11/2012
Section: FB. Football; **Room**: 311; **Bed**: 1					

MDS Schedule of Submission Feedback Dates

Resident name/ID	ISC	A0310 A - B - C - F	Complete Date	VC2 Date	Submitted
Aikman, Troy K [01-327]	NT	99 - 99 - 0 - 01	05/02/2011		05/10/2011
Section: FB. Football; **Room**: 301; **Bed**: 1					
Alomar, Santos [01-361]	NC	01 - 01 - 0 - 99	05/06/2011	05/13/2011	06/08/2012
Section: BB. Baseball; **Room**: 210; **Bed**: 1					
Alomar, Santos [01-361]	NC	03 - 99 - 0 - 99	06/08/2012	05/31/2012	06/08/2012
Section: BB. Baseball; **Room**: 210; **Bed**: 1					
Alomar, Santos [01-361]	NP	99 - 02 - 0 - 99	05/16/2011		08/31/2011
Section: BB. Baseball; **Room**: 210; **Bed**: 1					
Alomar, Santos [01-361]	NP	99 - 03 - 0 - 99	08/16/2011		06/08/2012

MDS NT Needed (Implicit from ADT)

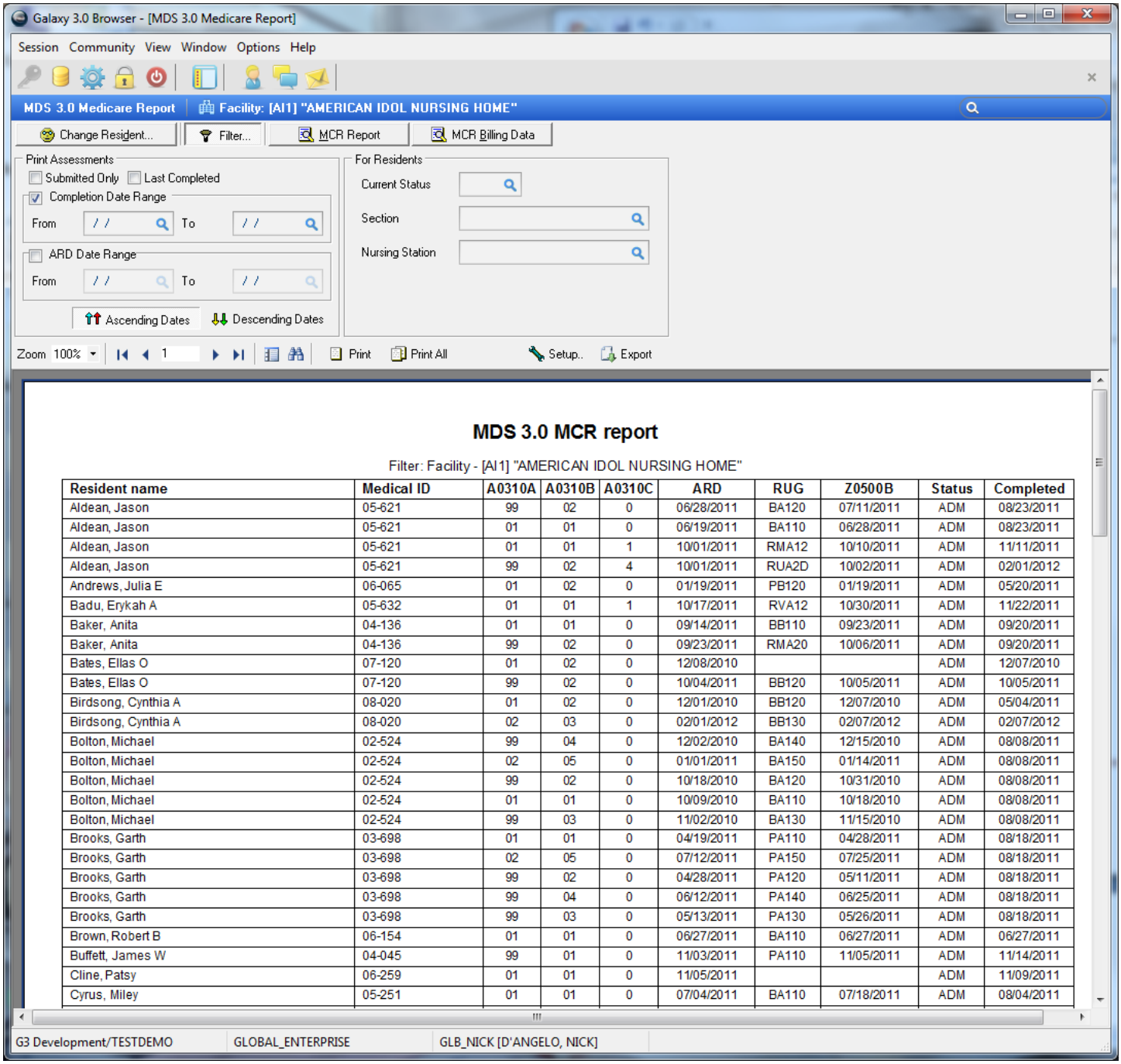
Resident name/ID	Admission Date
Campbell, Glen T [08-052]	07/12/2009
Section: SNF. Skilled Nursing Section; **Room**: 222; **Bed**: A	
Diamond, Neil L [06-029]	01/01/2009
Section: SNF. Skilled Nursing Section; **Room**: 102; **Bed**: B	
Dong, Ding [111]	09/19/2011
Estefan, Gloria [06-110]	07/28/2008
Section: SNF. Skilled Nursing Section; **Room**: 212; **Bed**: B	
McCartney, Paul J [05-032]	08/28/2008
Section: SNF. Skilled Nursing Section; **Room**: 111; **Bed**: B	
Newton-John, Olivia [04-151]	04/11/2009
Section: SNF. Skilled Nursing Section; **Room**: 205; **Bed**: B	
Ozbourne, Ozzy J [06-165]	12/29/2006
Section: SNF. Skilled Nursing Section; **Room**: 111; **Bed**: A	

The Medicare Report is actually broken into two separate reports.
Use the runtime options to choose

- Current Status (usually ADM)
- Section
- Nursing Station
- Print Submitted Only or Last Completed
- Completion Date Range (leave blank for all)
- ARD Date Range

The basic MCR report option will give you

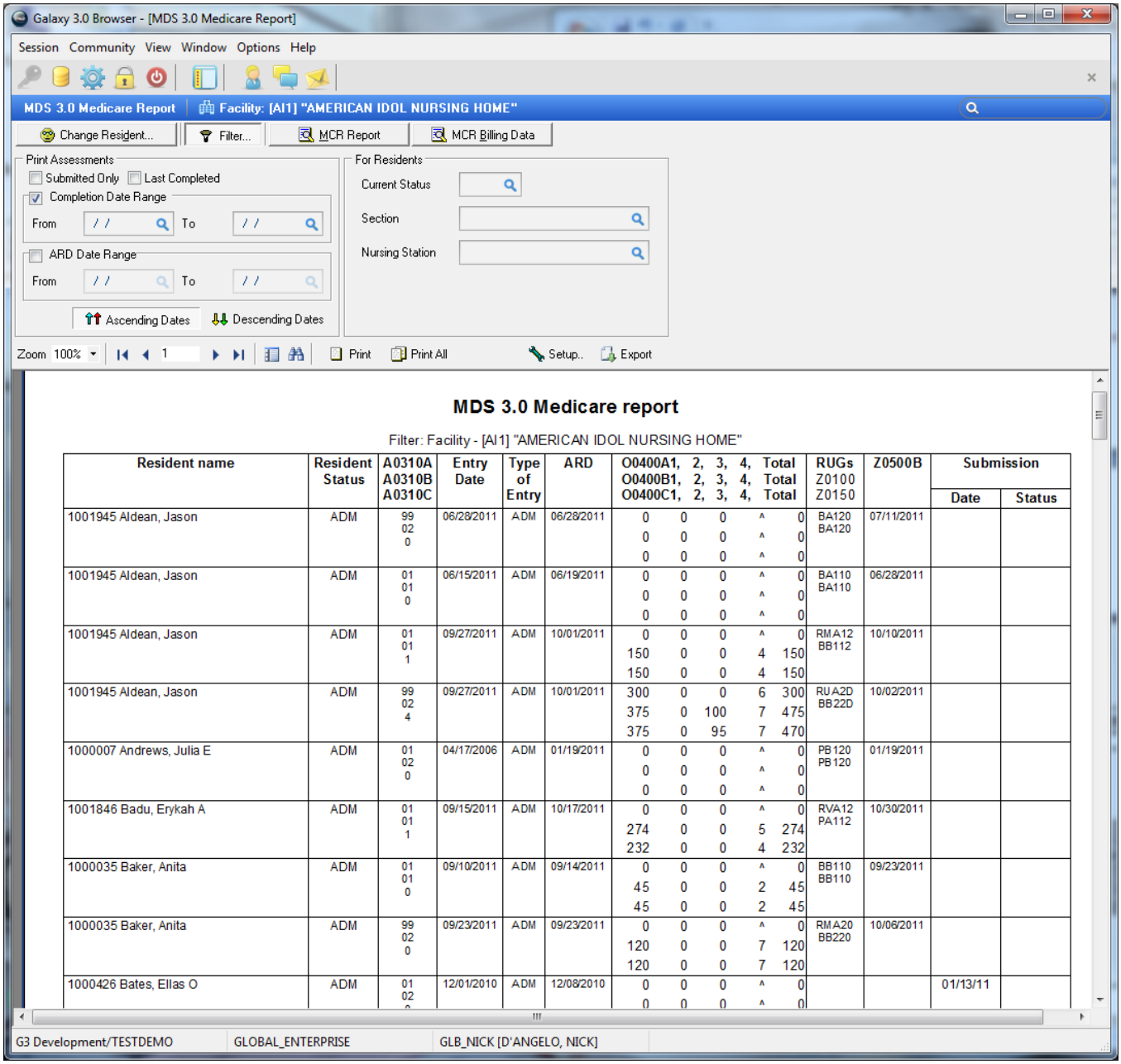
- Resident Name & Medical ID
- ARD
- PCD
- A0310A & A0310B
- RUG score
- Status
- Completed Date
-



Resident name	Medical ID	A0310A	A0310B	A0310C	ARD	RUG	Z0500B	Status	Completed
Aldean, Jason	05-621	99	02	0	06/28/2011	BA120	07/11/2011	ADM	08/23/2011
Aldean, Jason	05-621	01	01	0	06/19/2011	BA110	06/28/2011	ADM	08/23/2011
Aldean, Jason	05-621	01	01	1	10/01/2011	RMA12	10/10/2011	ADM	11/11/2011
Aldean, Jason	05-621	99	02	4	10/01/2011	RUA2D	10/02/2011	ADM	02/01/2012
Andrews, Julia E	06-065	01	02	0	01/19/2011	PB120	01/19/2011	ADM	05/20/2011
Badu, Erykah A	05-632	01	01	1	10/17/2011	RVA12	10/30/2011	ADM	11/22/2011
Baker, Anita	04-136	01	01	0	09/14/2011	BB110	09/23/2011	ADM	09/20/2011
Baker, Anita	04-136	99	02	0	09/23/2011	RMA20	10/06/2011	ADM	09/20/2011
Bates, Ellas O	07-120	01	02	0	12/08/2010			ADM	12/07/2010
Bates, Ellas O	07-120	99	02	0	10/04/2011	BB120	10/05/2011	ADM	10/05/2011
Birdsong, Cynthia A	08-020	01	02	0	12/01/2010	BB120	12/07/2010	ADM	05/04/2011
Birdsong, Cynthia A	08-020	02	03	0	02/01/2012	BB130	02/07/2012	ADM	02/07/2012
Bolton, Michael	02-524	99	04	0	12/02/2010	BA140	12/15/2010	ADM	08/08/2011
Bolton, Michael	02-524	02	05	0	01/01/2011	BA150	01/14/2011	ADM	08/08/2011
Bolton, Michael	02-524	99	02	0	10/18/2010	BA120	10/31/2010	ADM	08/08/2011
Bolton, Michael	02-524	01	01	0	10/09/2010	BA110	10/18/2010	ADM	08/08/2011
Bolton, Michael	02-524	99	03	0	11/02/2010	BA130	11/15/2010	ADM	08/08/2011
Brooks, Garth	03-698	01	01	0	04/19/2011	PA110	04/28/2011	ADM	08/18/2011
Brooks, Garth	03-698	02	05	0	07/12/2011	PA150	07/25/2011	ADM	08/18/2011
Brooks, Garth	03-698	99	02	0	04/28/2011	PA120	05/11/2011	ADM	08/18/2011
Brooks, Garth	03-698	99	04	0	06/12/2011	PA140	06/25/2011	ADM	08/18/2011
Brooks, Garth	03-698	99	03	0	05/13/2011	PA130	05/26/2011	ADM	08/18/2011
Brown, Robert B	06-154	01	01	0	06/27/2011	BA110	06/27/2011	ADM	06/27/2011
Buffett, James W	04-045	99	01	0	11/03/2011	PA110	11/05/2011	ADM	11/14/2011
Cline, Patsy	06-259	01	01	0	11/05/2011			ADM	11/09/2011
Cyrus, Miley	05-251	01	01	0	07/04/2011	BA110	07/18/2011	ADM	08/04/2011

The MCR Billing Data report option will give you

- Resident Name
- A0310A, A0310B & A0310C
- ARD
- PCD
- Entry Date
- Type of Entry
- O0400A1, O0400A1, O0400A1, O0400A1 & Total
- O0400B1, O0400B1, O0400B1, O0400B1 & Total
- O0400C1, O0400C1, O0400C1, O0400C1 & Total
- RUG scores (Z0100 & Z0150)
- Submission Date & Status

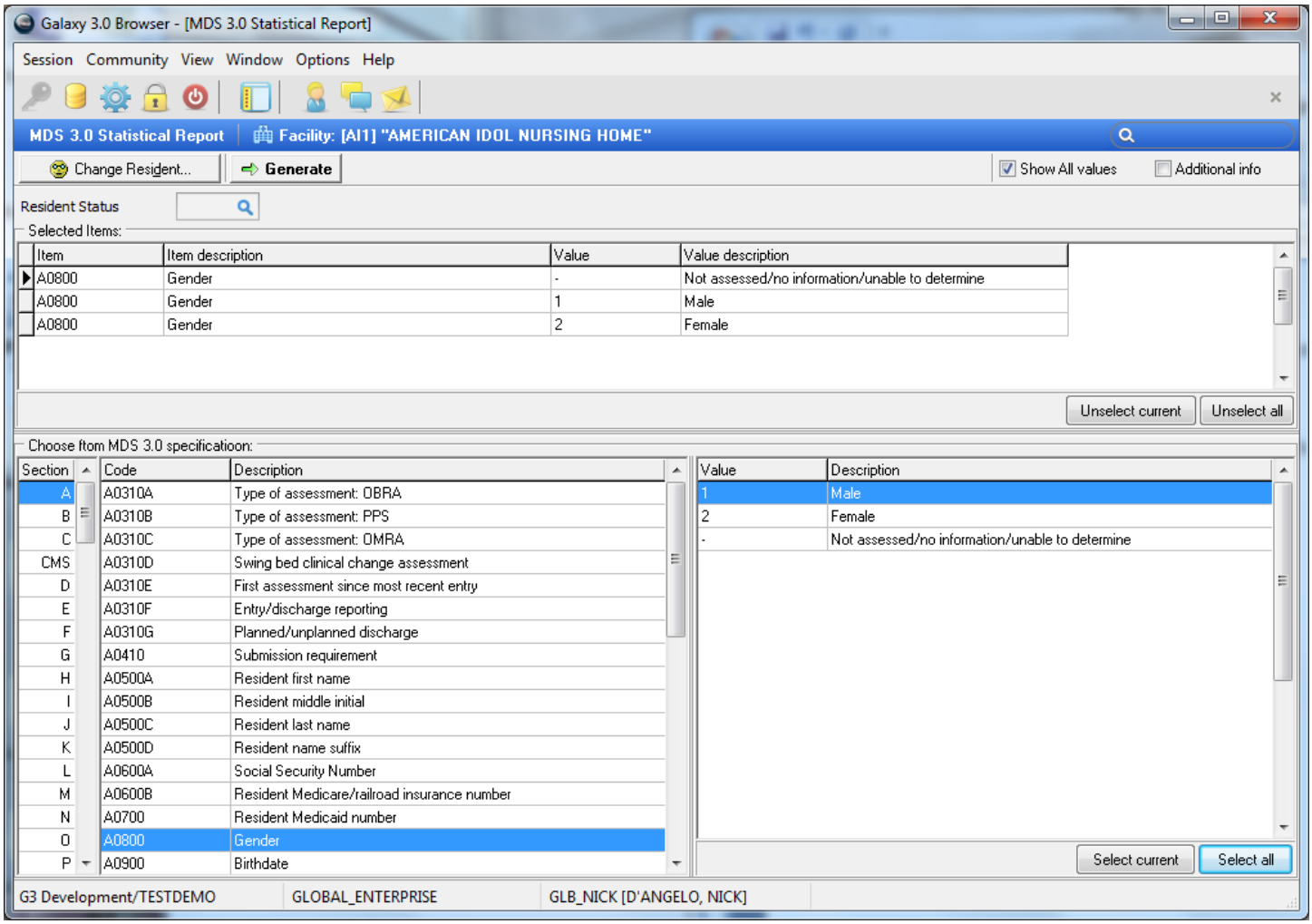


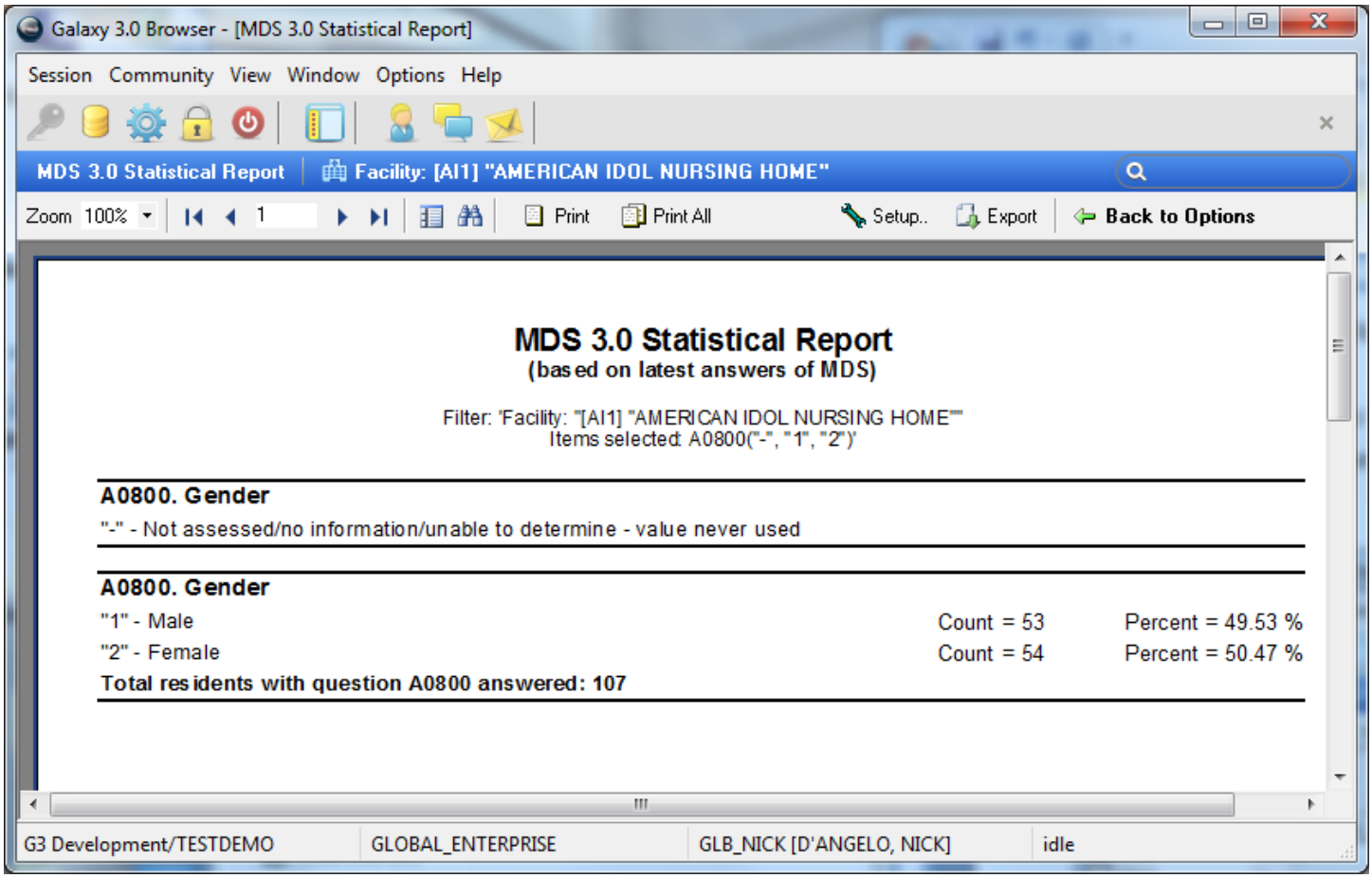
Resident name	Resident Status	A0310A A0310B A0310C	Entry Date	Type of Entry	ARD	O0400A1, 2, 3, 4, Total O0400B1, 2, 3, 4, Total O0400C1, 2, 3, 4, Total	RUGs Z0100 Z0150	Z0500B	Submission Date	Submission Status
1001945 Aldean, Jason	ADM	99 02 0	06/28/2011	ADM	06/28/2011	0 0 0 ^ 0 0 0 0 ^ 0 0 0 0 ^ 0	BA120 BA120	07/11/2011		
1001945 Aldean, Jason	ADM	01 01 0	06/15/2011	ADM	06/19/2011	0 0 0 ^ 0 0 0 0 ^ 0 0 0 0 ^ 0	BA110 BA110	06/28/2011		
1001945 Aldean, Jason	ADM	01 01 1	09/27/2011	ADM	10/01/2011	0 0 0 ^ 0 150 0 0 4 150 150 0 0 4 150	RMA12 BB112	10/10/2011		
1001945 Aldean, Jason	ADM	99 02 4	09/27/2011	ADM	10/01/2011	300 0 0 6 300 375 0 100 7 475 375 0 95 7 470	RUA2D BB22D	10/02/2011		
1000007 Andrews, Julia E	ADM	01 02 0	04/17/2006	ADM	01/19/2011	0 0 0 ^ 0 0 0 0 ^ 0 0 0 0 ^ 0	PB120 PB120	01/19/2011		
1001846 Badu, Erykah A	ADM	01 01 1	09/15/2011	ADM	10/17/2011	0 0 0 ^ 0 274 0 0 5 274 232 0 0 4 232	RVA12 PA112	10/30/2011		
1000035 Baker, Anita	ADM	01 01 0	09/10/2011	ADM	09/14/2011	0 0 0 ^ 0 45 0 0 2 45 45 0 0 2 45	BB110 BB110	09/23/2011		
1000035 Baker, Anita	ADM	99 02 0	09/23/2011	ADM	09/23/2011	0 0 0 ^ 0 120 0 0 7 120 120 0 0 7 120	RMA20 BB220	10/06/2011		
1000426 Bates, Elias O	ADM	01 02	12/01/2010	ADM	12/08/2010	0 0 0 ^ 0 0 0 0 ^ 0			01/13/11	

The MDS 3.0 Statistical Report allows you to choose certain answers from MDS questions and get statistical/comparison information on them.

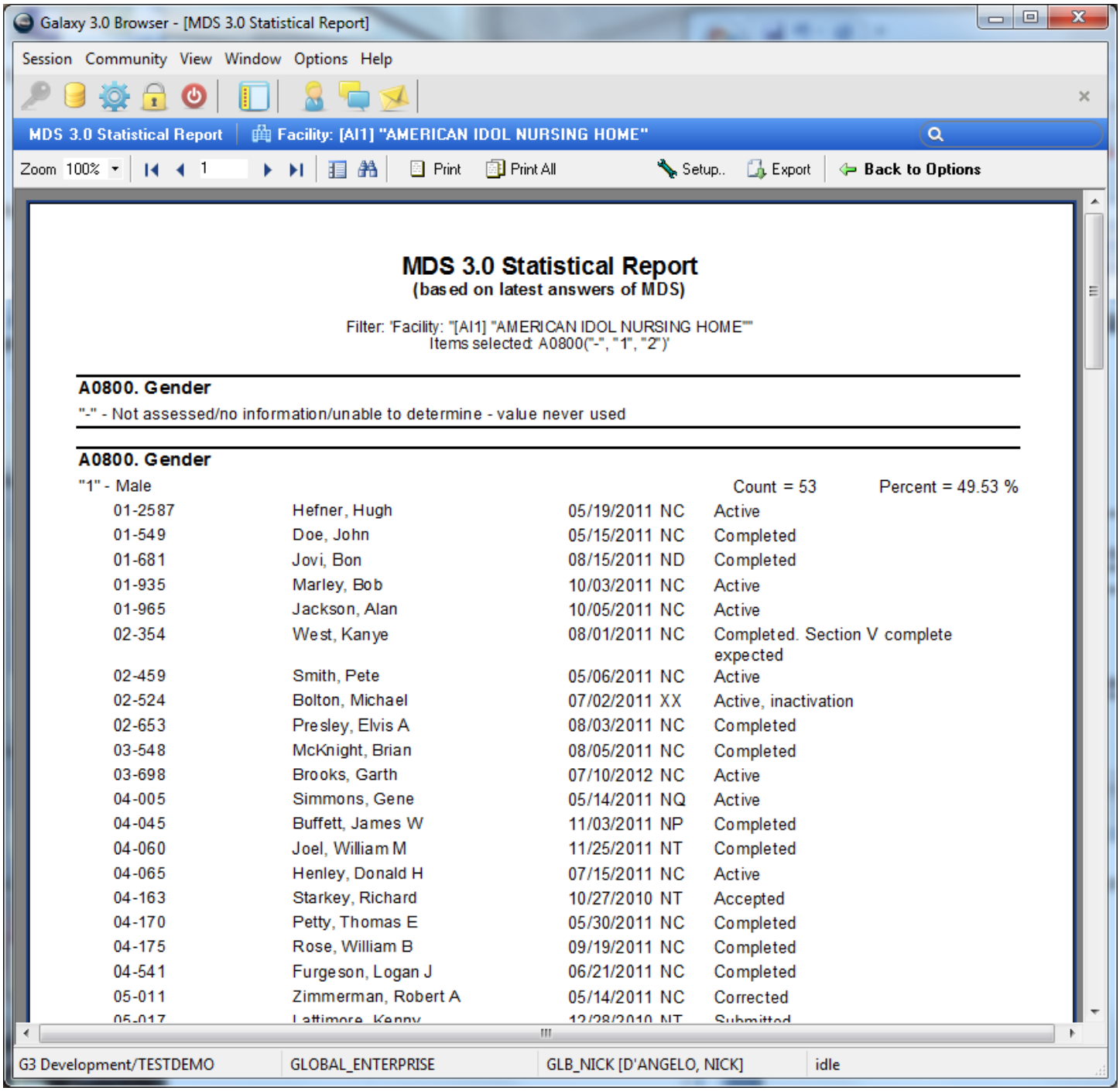
Use the runtime options to choose

- Specific MDS question, followed by which values you want to run statistics on.




Galaxy 3.0 Browser - [MDS 3.0 Statistical Report]
Session Community View Window Options Help
MDS 3.0 Statistical Report
Facility: [AI1] "AMERICAN IDOL NURSING HOME"
Zoom 100%
Print
Print All
Setup..
Export
Back to Options
MDS 3.0 Statistical Report
(based on latest answers of MDS)
Filter: 'Facility: "[AI1] "AMERICAN IDOL NURSING HOME""
Items selected: A0800("-", "1", "2")'
A0800. Gender
"-" - Not assessed/no information/unable to determine - value never used
A0800. Gender
"1" - Male Count = 53 Percent = 49.53 %
"2" - Female Count = 54 Percent = 50.47 %
Total residents with question A0800 answered: 107
G3 Development/TESTDEMO
GLOBAL_ENTERPRISE
GLB_NICK [D'ANGELO, NICK]
idle

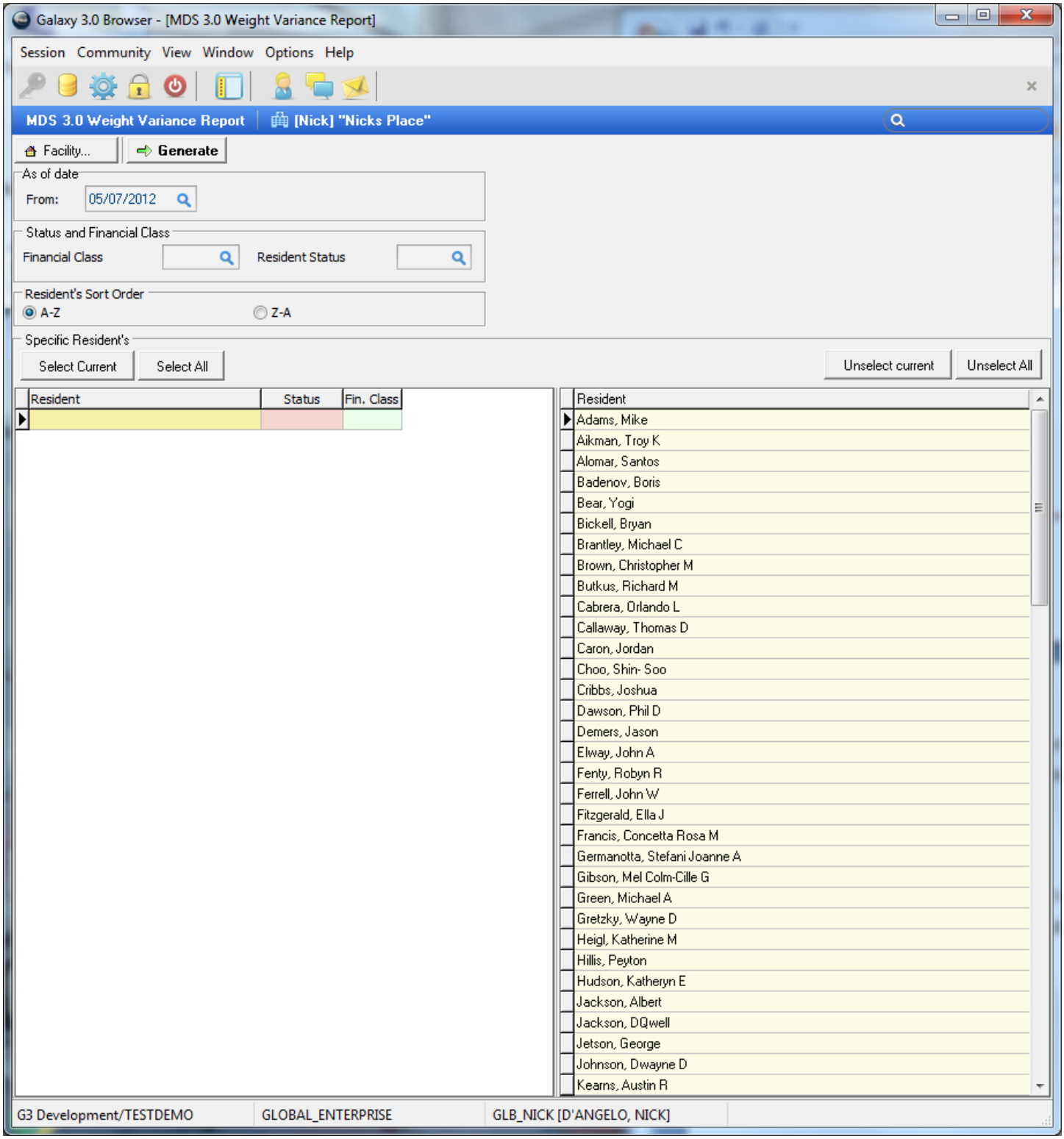
You can run the Statistical report with the additional info option checked to see exactly which assessments the data is pulling from.

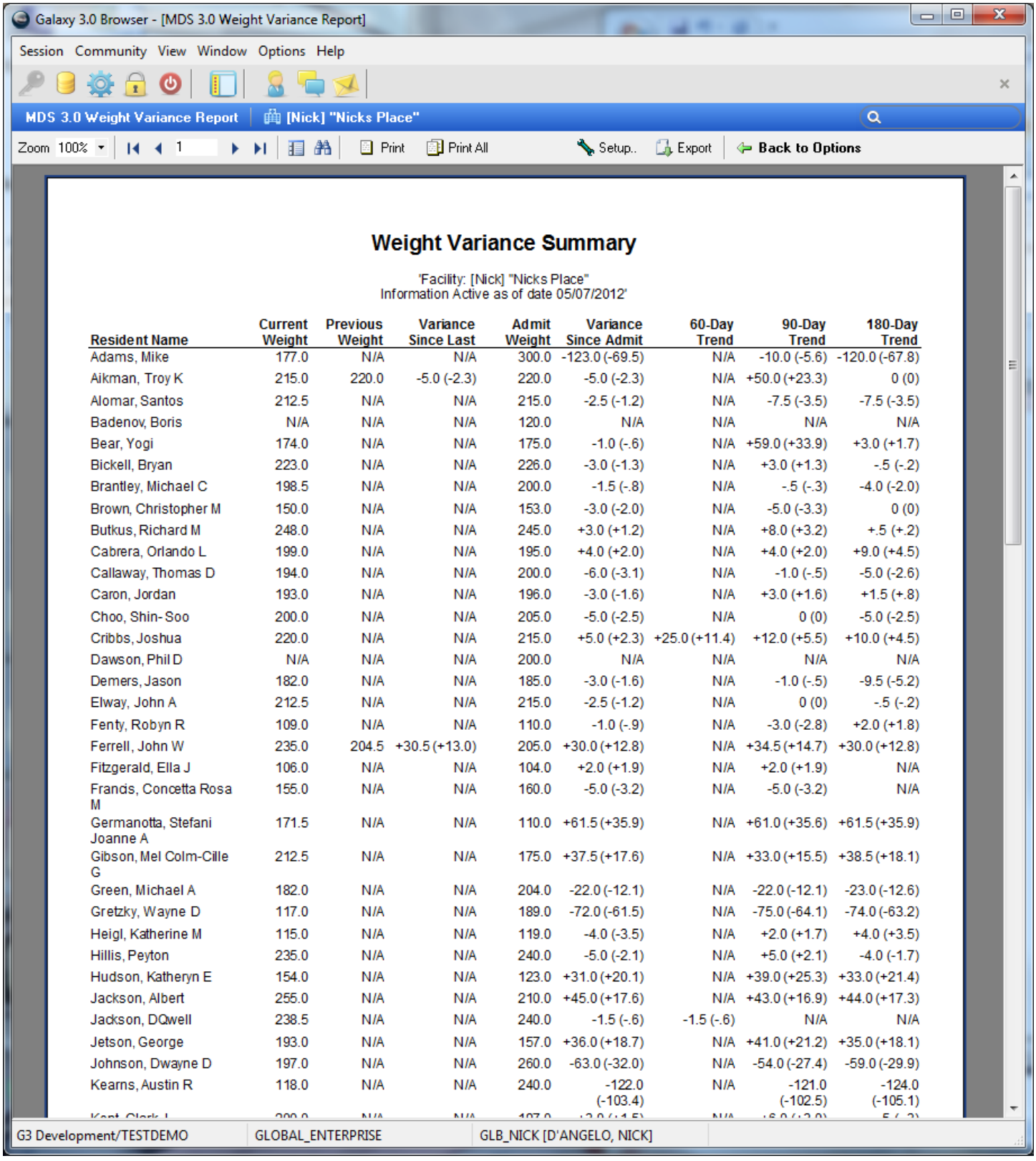


The MDS 3.0 Weight Variance Report shows the monthly weight, variance and percentage difference for your residents. The monthly weights should be entered into the Vital Signs module in MDS 3.0

Use the runtime options to choose

- Resident Status
- Financial Class
- As of date (leave blank for current - recommended)
- Select individual residents, groups of residents or entire facility


Galaxy 3.0 Browser - [MDS 3.0 Weight Variance Report]
Session Community View Window Options Help
MDS 3.0 Weight Variance Report
[Nick] "Nicks Place"
Facility...
Generate
As of date
From: 05/07/2012
Status and Financial Class
Financial Class
Resident Status
Resident's Sort Order
A-Z
Z-A
Specific Resident's
Select Current
Select All
Unselect current
Unselect All
Resident
Status
Fin. Class
Resident
Adams, Mike
Aikman, Troy K
Alomar, Santos
Badenov, Boris
Bear, Yogi
Bickell, Bryan
Brantley, Michael C
Brown, Christopher M
Butkus, Richard M
Cabrera, Orlando L
Callaway, Thomas D
Caron, Jordan
Choo, Shin- Soo
Cribbs, Joshua
Dawson, Phil D
Demers, Jason
Elway, John A
Fenty, Robyn R
Ferrell, John W
Fitzgerald, Ella J
Francis, Concetta Rosa M
Germanotta, Stefani Joanne A
Gibson, Mel Colm-Cille G
Green, Michael A
Gretzky, Wayne D
Heigl, Katherine M
Hillis, Peyton
Hudson, Katheryn E
Jackson, Albert
Jackson, DQwell
Jetson, George
Johnson, Dwayne D
Kearns, Austin R
G3 Development/TESTDEMO
GLOBAL_ENTERPRISE
GLB_NICK [D'ANGELO, NICK]



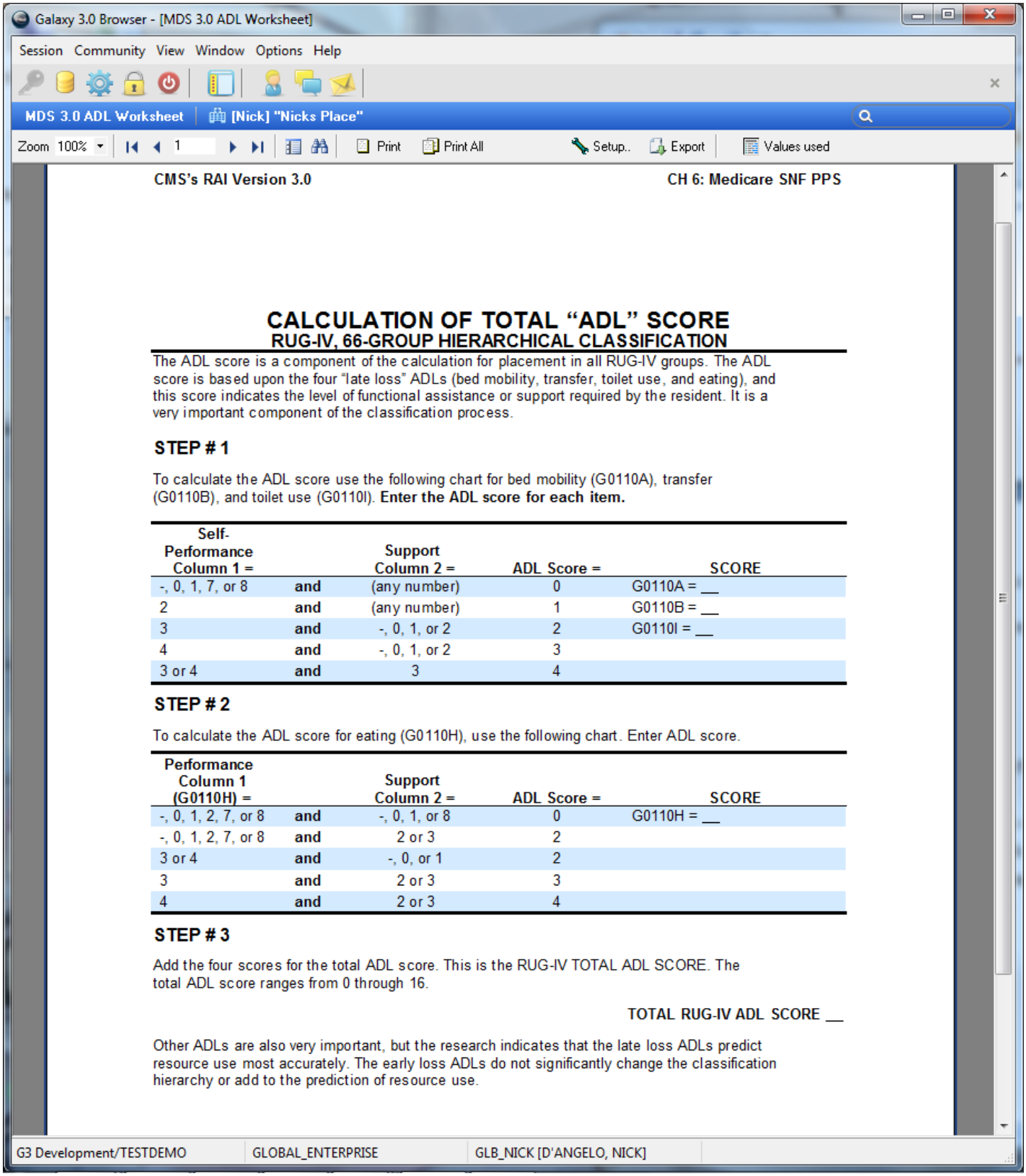
Weight Variance Summary

'Facility: [Nick] "Nicks Place"
Information Active as of date 05/07/2012'

Resident Name	Current Weight	Previous Weight	Variance Since Last	Admit Weight	Variance Since Admit	60-Day Trend	90-Day Trend	180-Day Trend
Adams, Mike	177.0	N/A	N/A	300.0	-123.0 (-69.5)	N/A	-10.0 (-5.6)	-120.0 (-67.8)
Aikman, Troy K	215.0	220.0	-5.0 (-2.3)	220.0	-5.0 (-2.3)	N/A	+50.0 (+23.3)	0 (0)
Alomar, Santos	212.5	N/A	N/A	215.0	-2.5 (-1.2)	N/A	-7.5 (-3.5)	-7.5 (-3.5)
Badenov, Boris	N/A	N/A	N/A	120.0	N/A	N/A	N/A	N/A
Bear, Yogi	174.0	N/A	N/A	175.0	-1.0 (-.6)	N/A	+59.0 (+33.9)	+3.0 (+1.7)
Bickell, Bryan	223.0	N/A	N/A	226.0	-3.0 (-1.3)	N/A	+3.0 (+1.3)	-.5 (-.2)
Brantley, Michael C	198.5	N/A	N/A	200.0	-1.5 (-.8)	N/A	-.5 (-.3)	-4.0 (-2.0)
Brown, Christopher M	150.0	N/A	N/A	153.0	-3.0 (-2.0)	N/A	-5.0 (-3.3)	0 (0)
Butkus, Richard M	248.0	N/A	N/A	245.0	+3.0 (+1.2)	N/A	+8.0 (+3.2)	+.5 (+.2)
Cabrera, Orlando L	199.0	N/A	N/A	195.0	+4.0 (+2.0)	N/A	+4.0 (+2.0)	+9.0 (+4.5)
Callaway, Thomas D	194.0	N/A	N/A	200.0	-6.0 (-3.1)	N/A	-1.0 (-.5)	-5.0 (-2.6)
Caron, Jordan	193.0	N/A	N/A	196.0	-3.0 (-1.6)	N/A	+3.0 (+1.6)	+1.5 (+.8)
Choo, Shin-Soo	200.0	N/A	N/A	205.0	-5.0 (-2.5)	N/A	0 (0)	-5.0 (-2.5)
Cribbs, Joshua	220.0	N/A	N/A	215.0	+5.0 (+2.3)	+25.0 (+11.4)	+12.0 (+5.5)	+10.0 (+4.5)
Dawson, Phil D	N/A	N/A	N/A	200.0	N/A	N/A	N/A	N/A
Demers, Jason	182.0	N/A	N/A	185.0	-3.0 (-1.6)	N/A	-1.0 (-.5)	-9.5 (-5.2)
Elway, John A	212.5	N/A	N/A	215.0	-2.5 (-1.2)	N/A	0 (0)	-.5 (-.2)
Fenty, Robyn R	109.0	N/A	N/A	110.0	-1.0 (-.9)	N/A	-3.0 (-2.8)	+2.0 (+1.8)
Ferrell, John W	235.0	204.5	+30.5 (+13.0)	205.0	+30.0 (+12.8)	N/A	+34.5 (+14.7)	+30.0 (+12.8)
Fitzgerald, Ella J	106.0	N/A	N/A	104.0	+2.0 (+1.9)	N/A	+2.0 (+1.9)	N/A
Francis, Concetta Rosa M	155.0	N/A	N/A	160.0	-5.0 (-3.2)	N/A	-5.0 (-3.2)	N/A
Germanotta, Stefani Joanne A	171.5	N/A	N/A	110.0	+61.5 (+35.9)	N/A	+61.0 (+35.6)	+61.5 (+35.9)
Gibson, Mel Colm-Cille G	212.5	N/A	N/A	175.0	+37.5 (+17.6)	N/A	+33.0 (+15.5)	+38.5 (+18.1)
Green, Michael A	182.0	N/A	N/A	204.0	-22.0 (-12.1)	N/A	-22.0 (-12.1)	-23.0 (-12.6)
Gretzky, Wayne D	117.0	N/A	N/A	189.0	-72.0 (-61.5)	N/A	-75.0 (-64.1)	-74.0 (-63.2)
Heigl, Katherine M	115.0	N/A	N/A	119.0	-4.0 (-3.5)	N/A	+2.0 (+1.7)	+4.0 (+3.5)
Hillis, Peyton	235.0	N/A	N/A	240.0	-5.0 (-2.1)	N/A	+5.0 (+2.1)	-4.0 (-1.7)
Hudson, Katheryn E	154.0	N/A	N/A	123.0	+31.0 (+20.1)	N/A	+39.0 (+25.3)	+33.0 (+21.4)
Jackson, Albert	255.0	N/A	N/A	210.0	+45.0 (+17.6)	N/A	+43.0 (+16.9)	+44.0 (+17.3)
Jackson, DQwell	238.5	N/A	N/A	240.0	-1.5 (-.6)	-1.5 (-.6)	N/A	N/A
Jetson, George	193.0	N/A	N/A	157.0	+36.0 (+18.7)	N/A	+41.0 (+21.2)	+35.0 (+18.1)
Johnson, Dwayne D	197.0	N/A	N/A	260.0	-63.0 (-32.0)	N/A	-54.0 (-27.4)	-59.0 (-29.9)
Kearns, Austin R	118.0	N/A	N/A	240.0	-122.0 (-103.4)	N/A	-121.0 (-102.5)	-124.0 (-105.1)
Kent, Clark J	200.0	N/A	N/A	197.0	+3.0 (+1.5)	N/A	+6.0 (+3.0)	-5 (-.2)

We also include two (2) blank forms for your use

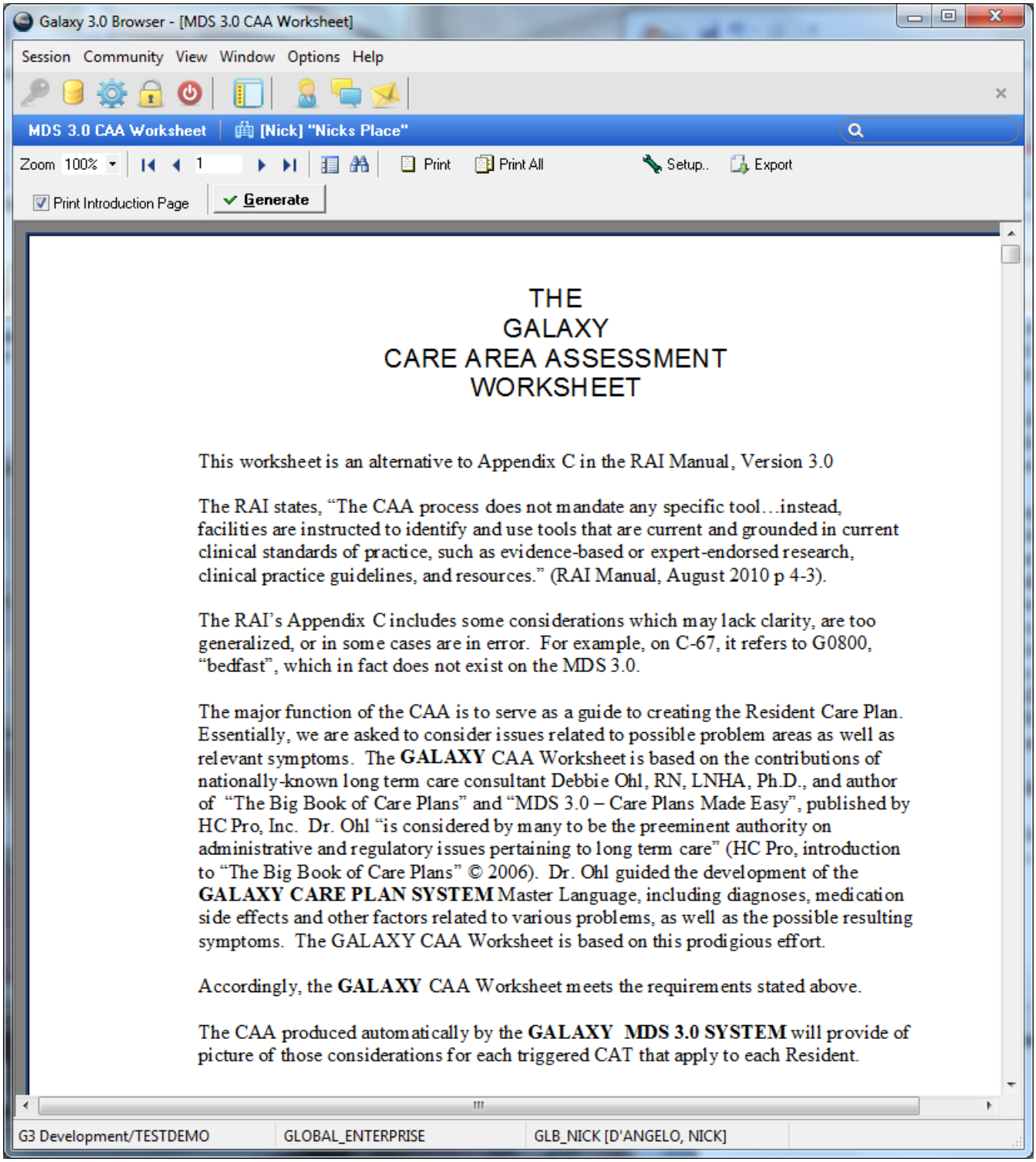
ADL Worksheet - if you need to manually calculate a residents ADL score.

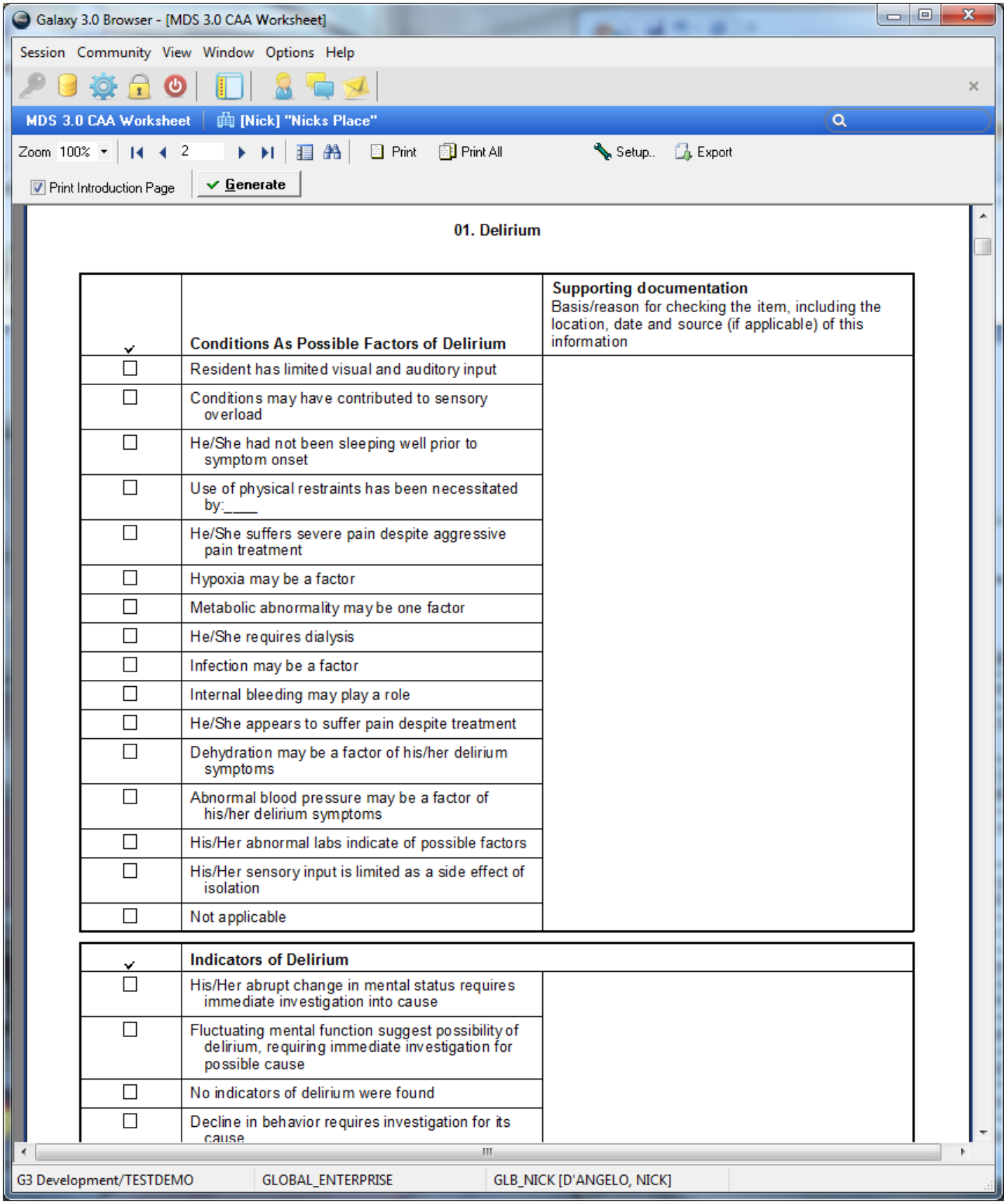


Since the CAA's are integrated directly into our MDS 3.0 program, you do NOT need to manually create your CAA reports anymore.

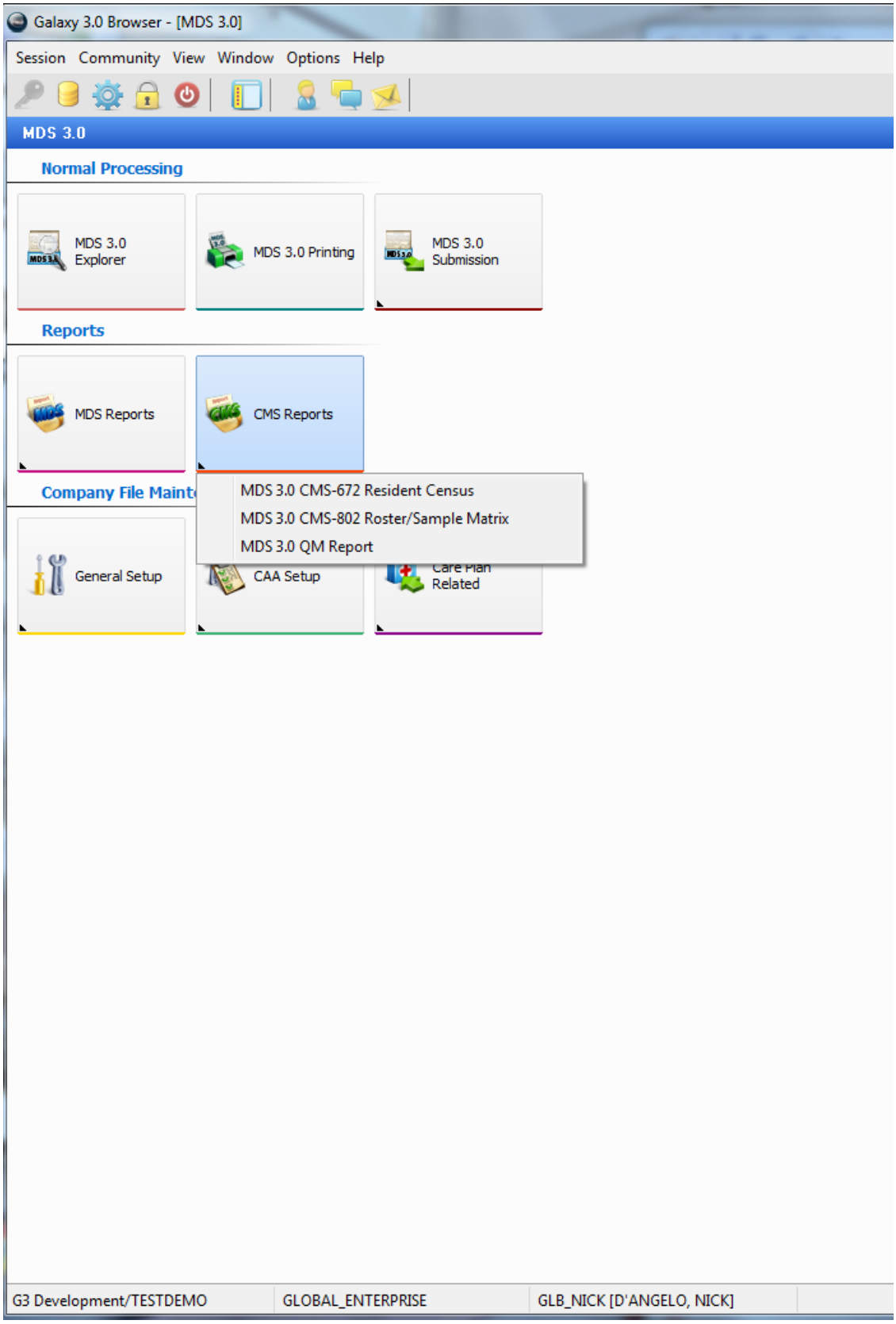
We have included the MDS 3.0 CAA worksheet that shows (in 88 pages) what our program looks at to create the CAA report. You are able to print a blank report for manual entry at any time.

This also includes an introduction page that explains how we came up with the system.



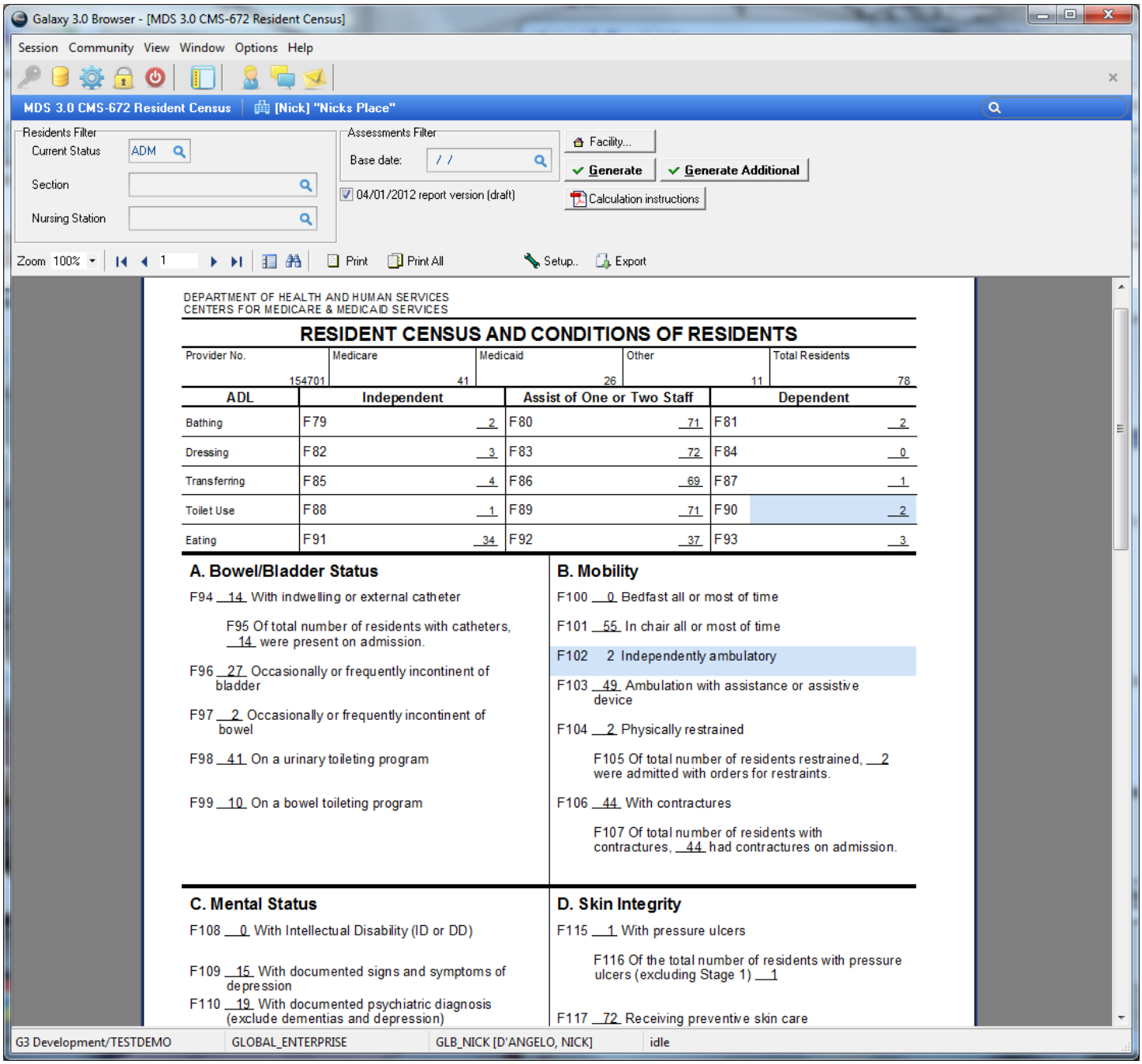

Galaxy 3.0 Browser - [MDS 3.0 CAA Worksheet]
Session Community View Window Options Help
MDS 3.0 CAA Worksheet
[Nick] "Nicks Place"
Zoom 100%
2
Print
Print All
Setup..
Export
Print Introduction Page
Generate
01. Delirium
✓
Conditions As Possible Factors of Delirium
Supporting documentation
Basis/reason for checking the item, including the location, date and source (if applicable) of this information
Resident has limited visual and auditory input
Conditions may have contributed to sensory overload
He/She had not been sleeping well prior to symptom onset
Use of physical restraints has been necessitated by:____
He/She suffers severe pain despite aggressive pain treatment
Hypoxia may be a factor
Metabolic abnormality may be one factor
He/She requires dialysis
Infection may be a factor
Internal bleeding may play a role
He/She appears to suffer pain despite treatment
Dehydration may be a factor of his/her delirium symptoms
Abnormal blood pressure may be a factor of his/her delirium symptoms
His/Her abnormal labs indicate of possible factors
His/Her sensory input is limited as a side effect of isolation
Not applicable
✓
Indicators of Delirium
His/Her abrupt change in mental status requires immediate investigation into cause
Fluctuating mental function suggest possibility of delirium, requiring immediate investigation for possible cause
No indicators of delirium were found
Decline in behavior requires investigation for its cause
G3 Development/TESTDEMO
GLOBAL_ENTERPRISE
GLB_NICK [D'ANGELO, NICK]

The second set of reports are the CMS Reports

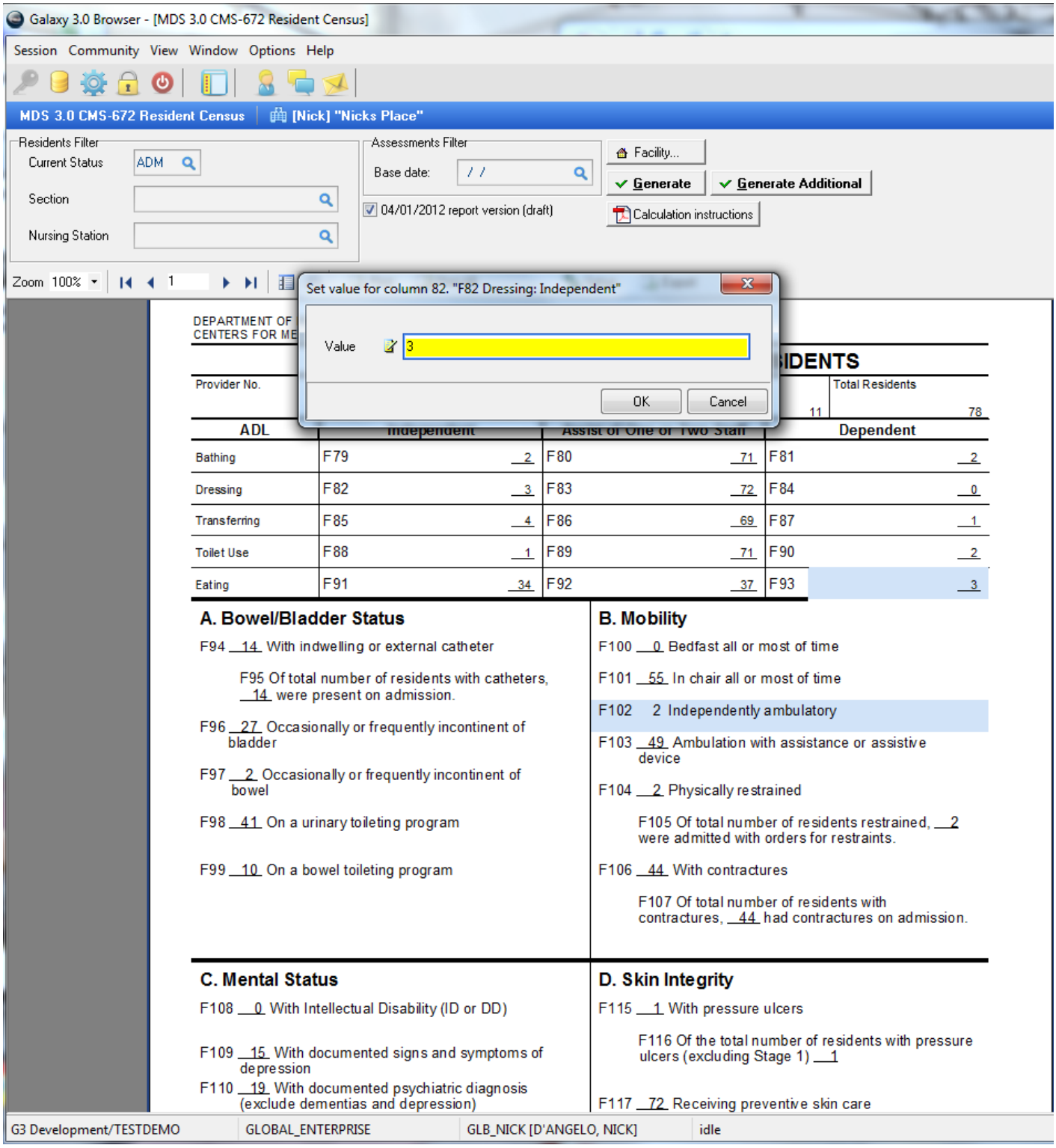


The data in the 672 report is completely editable. You can click on any answer (or lack of) and add/change the data. Use the runtime options to choose

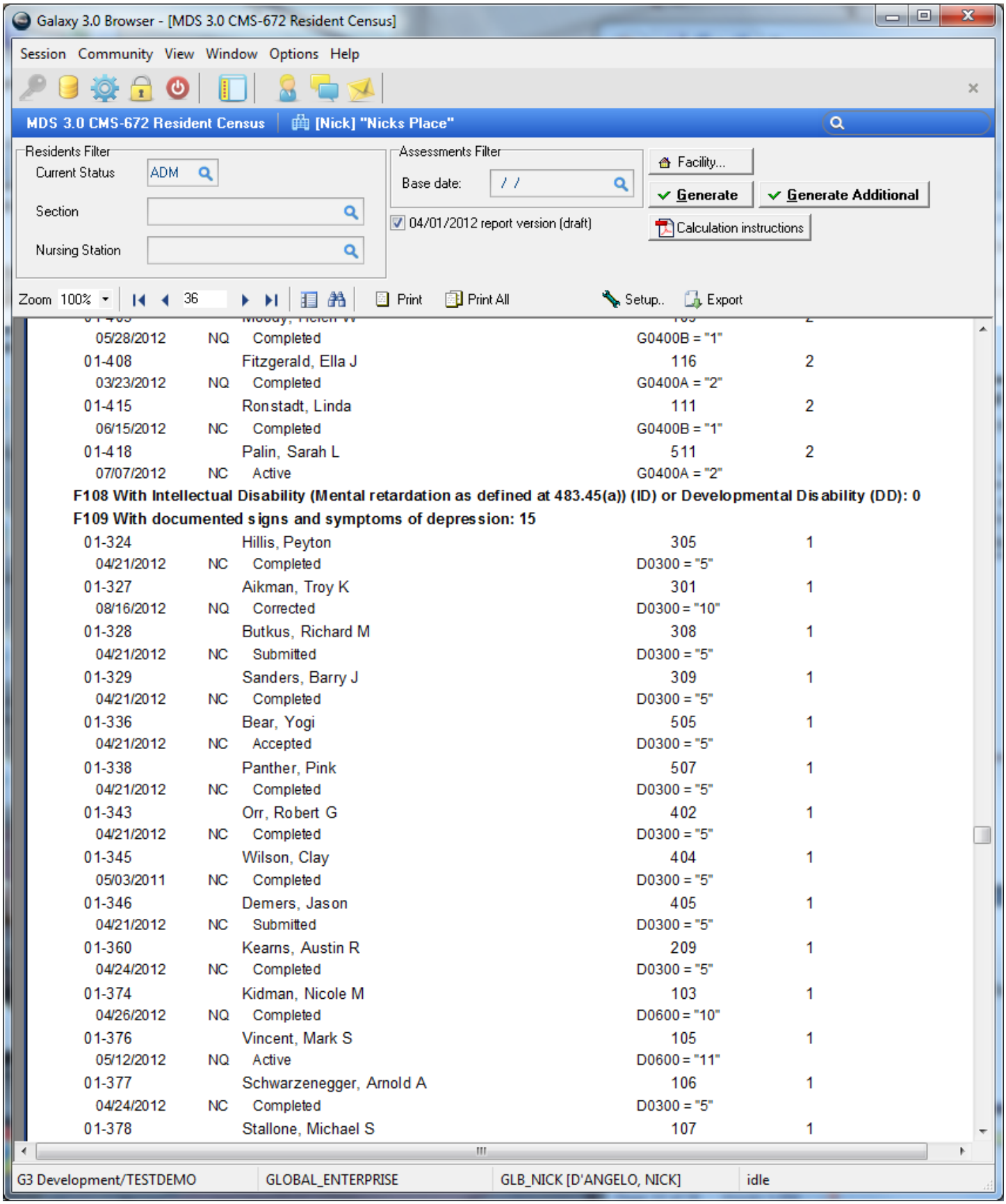
- Current Status (usually ADM)
- Section
- Nursing Station
- Facility
- Base date (LEAVE BLANK for current) *recommended setting

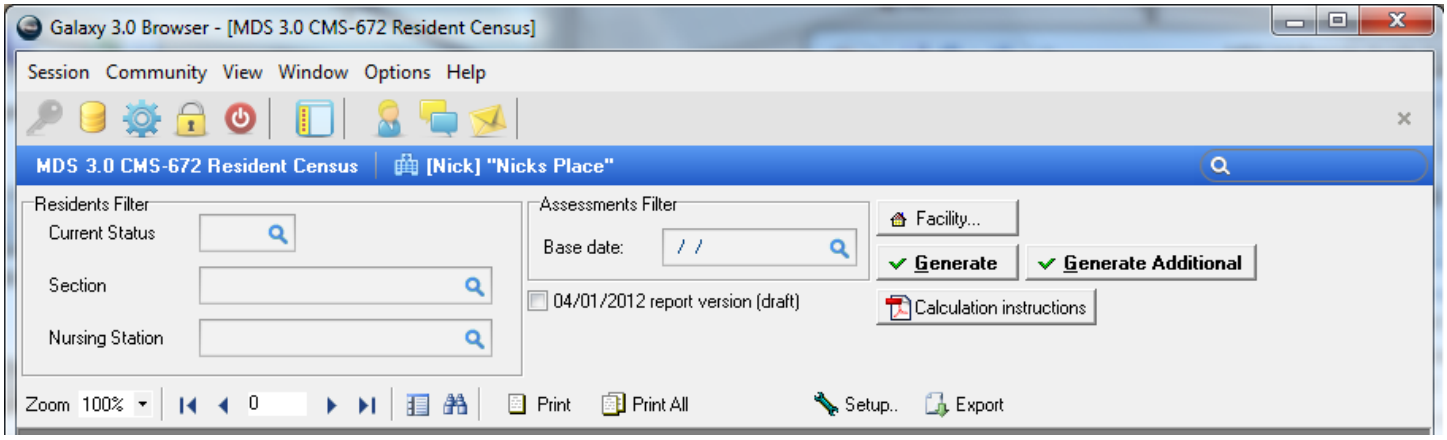


You can edit any of the fields

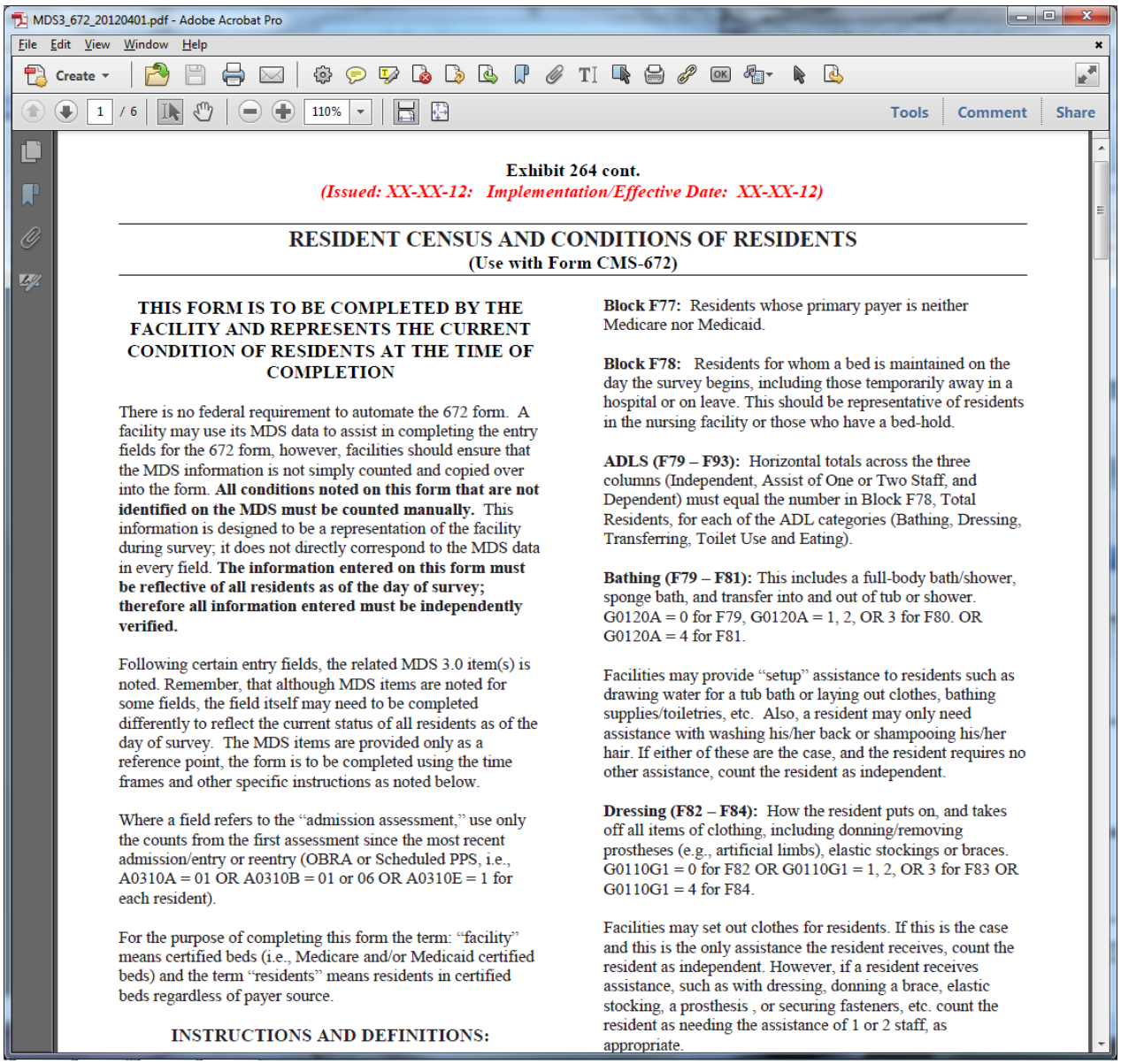


Click the Generate Additional button in the runtime options to see exactly which assessments triggered the answers in the report





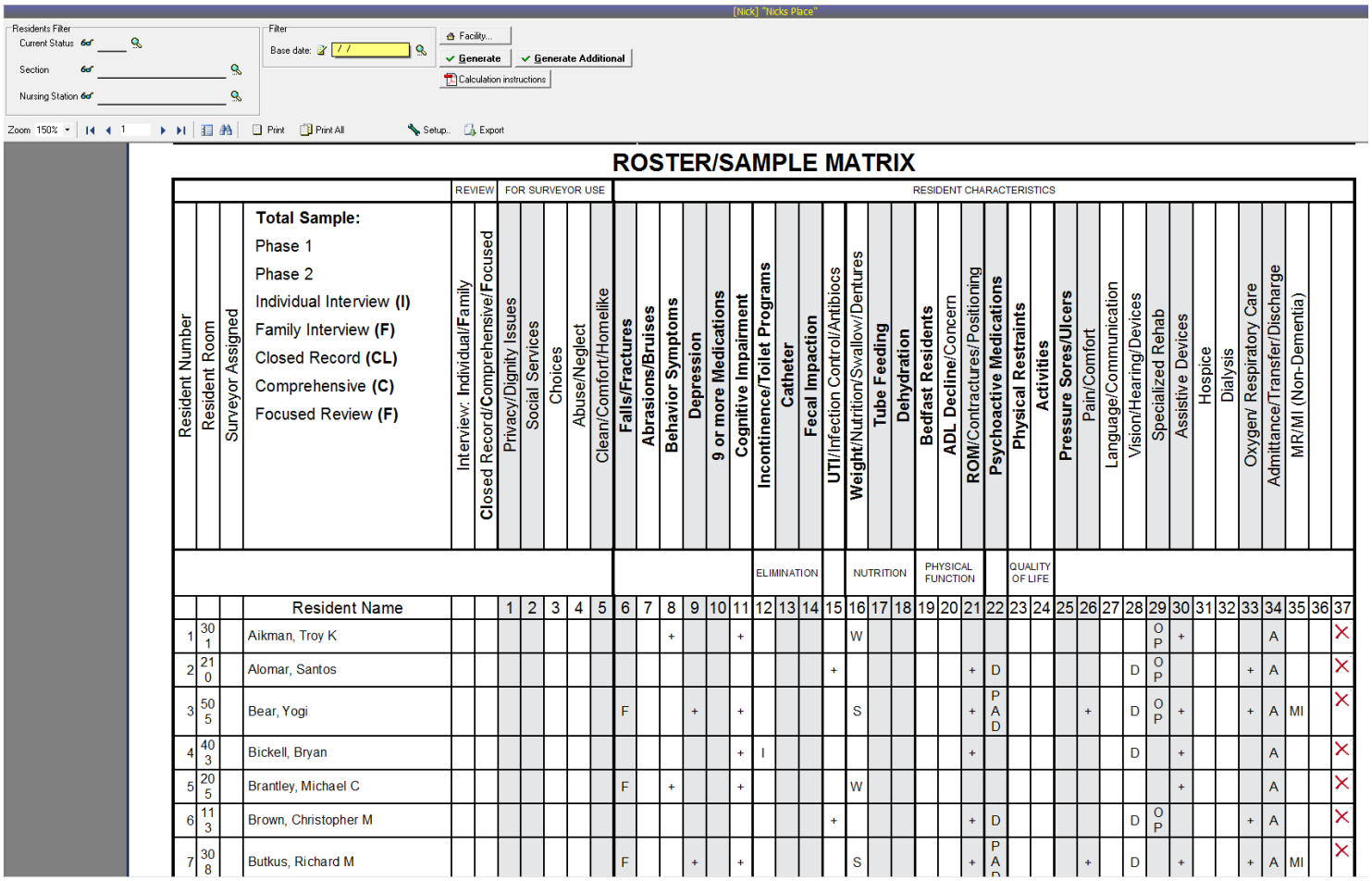
You can also click the calculation instructions to see the CMS instructions for this worksheet



The data in the 802 report is completely editable. You can click on any answer (or lack of) and add/change the data. The red X allows you to delete the resident from the report altogether if need be.

Use the runtime options to choose

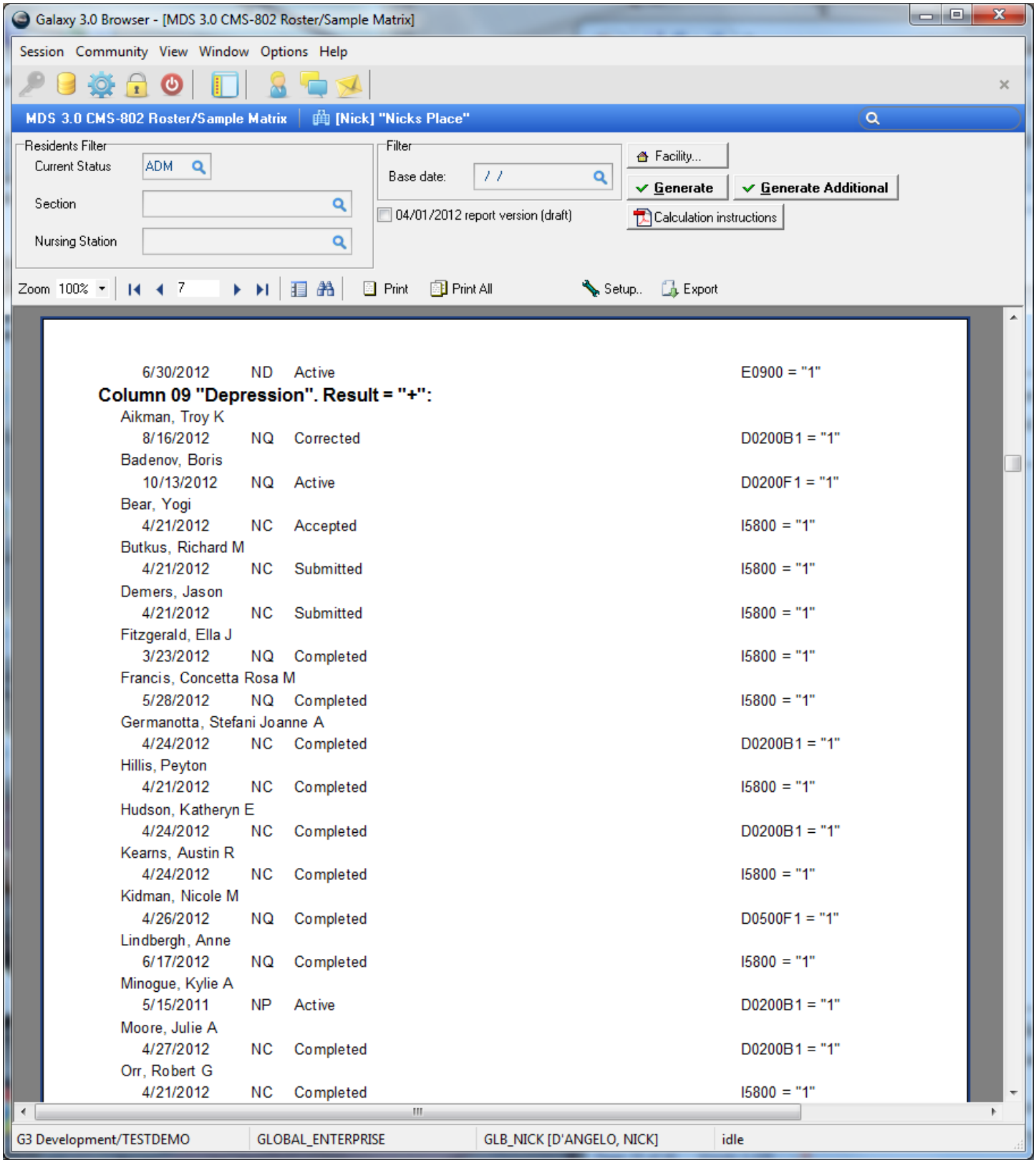
- Current Status (usually ADM)
- Section
- Nursing Station
- Facility



ROSTER/SAMPLE MATRIX

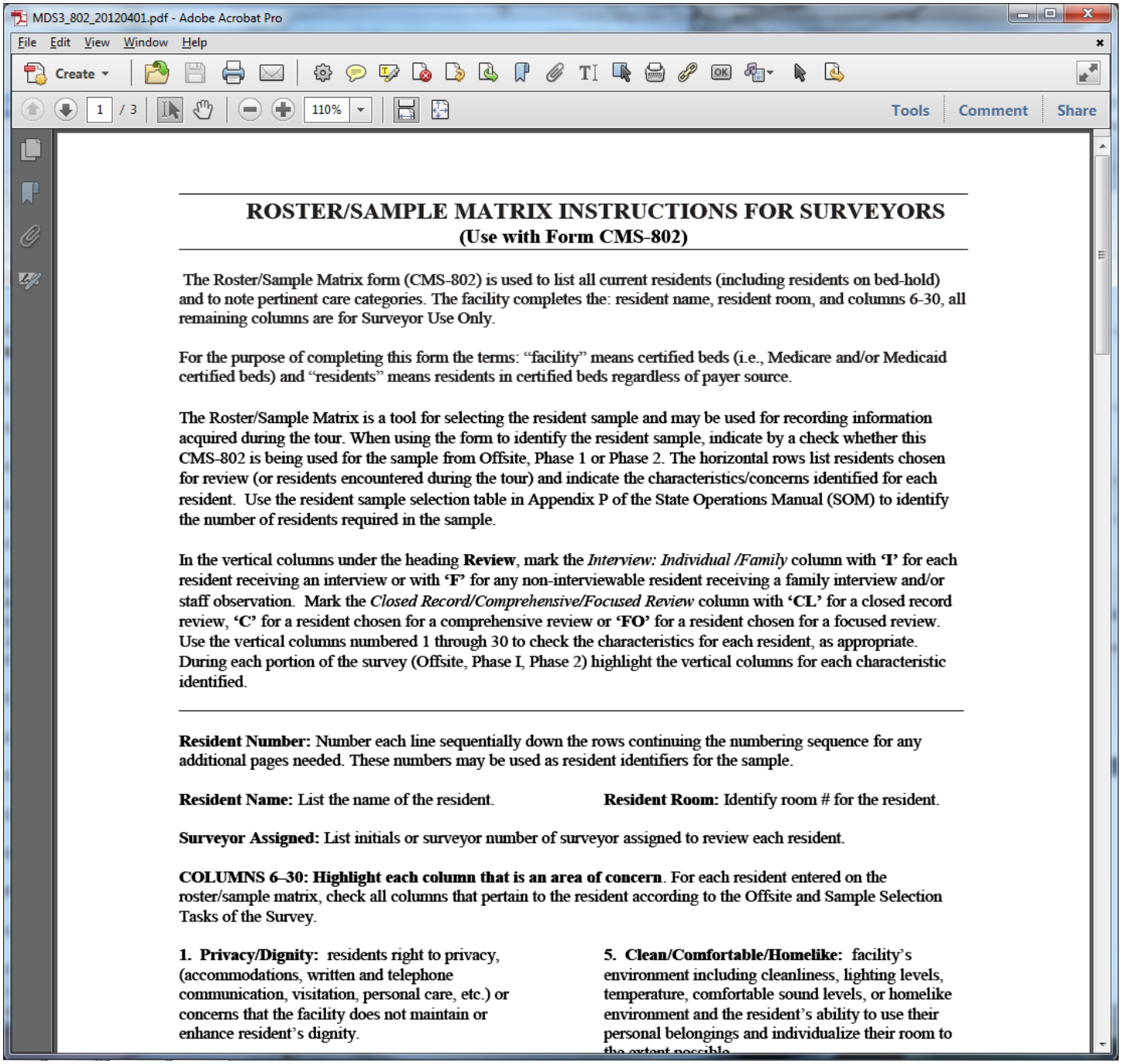
				REVIEW		FOR SURVEYOR USE					RESIDENT CHARACTERISTICS																																	
Resident Number	Resident Room	Surveyor Assigned	**Total Sample:** Phase 1 Phase 2 Individual Interview **(I)** Family Interview **(F)** Closed Record **(CL)** Comprehensive **(C)** Focused Review **(F)**	Interview: Individual/Family	Closed Record/Comprehensive/Focused	Privacy/Dignity Issues	Social Services	Choices	Abuse/Neglect	Clean/Comfort/Homelike	**Falls/Fractures**	**Abrasions/Bruises**	**Behavior Symptoms**	**Depression**	**9 or more Medications**	**Cognitive Impairment**	**Incontinence/Toilet Programs**	**Catheter**	**Fecal Impaction**	**UTI**/Infection Control/Antibiocs	**Weight**/Nutrition/Swallow/Dentures	**Tube Feeding**	**Dehydration**	**Bedfast Residents**	**ADL Decline**/Concern	**ROM**/Contractures/Positioning	**Psychoactive Medications**	**Physical Restraints**	**Activities**	**Pressure Sores/Ulcers**	Pain/Comfort	Language/Communication	Vision/Hearing/Devices	Specialized Rehab	Assistive Devices	Hospice	Dialysis	Oxygen/ Respiratory Care	Admittance/Transfer/Discharge	MR/MI (Non-Dementia)		
																	ELIMINATION				NUTRITION			PHYSICAL FUNCTION				QUALITY OF LIFE															
			Resident Name			1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37
1	301		Aikman, Troy K										+			+					W													OP	+				A			X
2	210		Alomar, Santos																	+						+	D						D	OP				+	A			X
3	505		Bear, Yogi								F			+		+					S					+	PAD				+		D	OP	+			+	A	MI		X
4	403		Bickell, Bryan													+	I									+							D		+				A			X
5	205		Brantley, Michael C								F		+			+					W														+				A			X
6	113		Brown, Christopher M																	+						+	D						D	OP				+	A			X
7	308		Butkus, Richard M								F			+		+					S					+	PAD				+		D		+			+	A	MI		X

Click the Generate Additional button in the runtime options to see exactly which assessments triggered the answers in the report



You can click the Calculation Instructions button for a PDF of the report instructions directly from CMS.

This will also allow you to print blank copies of the report for manual entry if you so desire.



ROSTER/SAMPLE MATRIX INSTRUCTIONS FOR SURVEYORS
(Use with Form CMS-802)

The Roster/Sample Matrix form (CMS-802) is used to list all current residents (including residents on bed-hold) and to note pertinent care categories. The facility completes the: resident name, resident room, and columns 6-30, all remaining columns are for Surveyor Use Only.

For the purpose of completing this form the terms: "facility" means certified beds (i.e., Medicare and/or Medicaid certified beds) and "residents" means residents in certified beds regardless of payer source.

The Roster/Sample Matrix is a tool for selecting the resident sample and may be used for recording information acquired during the tour. When using the form to identify the resident sample, indicate by a check whether this CMS-802 is being used for the sample from Offsite, Phase 1 or Phase 2. The horizontal rows list residents chosen for review (or residents encountered during the tour) and indicate the characteristics/concerns identified for each resident. Use the resident sample selection table in Appendix P of the State Operations Manual (SOM) to identify the number of residents required in the sample.

In the vertical columns under the heading **Review**, mark the *Interview: Individual /Family* column with **'I'** for each resident receiving an interview or with **'F'** for any non-interviewable resident receiving a family interview and/or staff observation. Mark the *Closed Record/Comprehensive/Focused Review* column with **'CL'** for a closed record review, **'C'** for a resident chosen for a comprehensive review or **'FO'** for a resident chosen for a focused review. Use the vertical columns numbered 1 through 30 to check the characteristics for each resident, as appropriate. During each portion of the survey (Offsite, Phase I, Phase 2) highlight the vertical columns for each characteristic identified.

Resident Number: Number each line sequentially down the rows continuing the numbering sequence for any additional pages needed. These numbers may be used as resident identifiers for the sample.

Resident Name: List the name of the resident. **Resident Room:** Identify room # for the resident.

Surveyor Assigned: List initials or surveyor number of surveyor assigned to review each resident.

COLUMNS 6–30: Highlight each column that is an area of concern. For each resident entered on the roster/sample matrix, check all columns that pertain to the resident according to the Offsite and Sample Selection Tasks of the Survey.

1. Privacy/Dignity: residents right to privacy, (accommodations, written and telephone communication, visitation, personal care, etc.) or concerns that the facility does not maintain or enhance resident's dignity.

5. Clean/Comfortable/Homelike: facility's environment including cleanliness, lighting levels, temperature, comfortable sound levels, or homelike environment and the resident's ability to use their personal belongings and individualize their room to the extent possible.