

Understanding the Data

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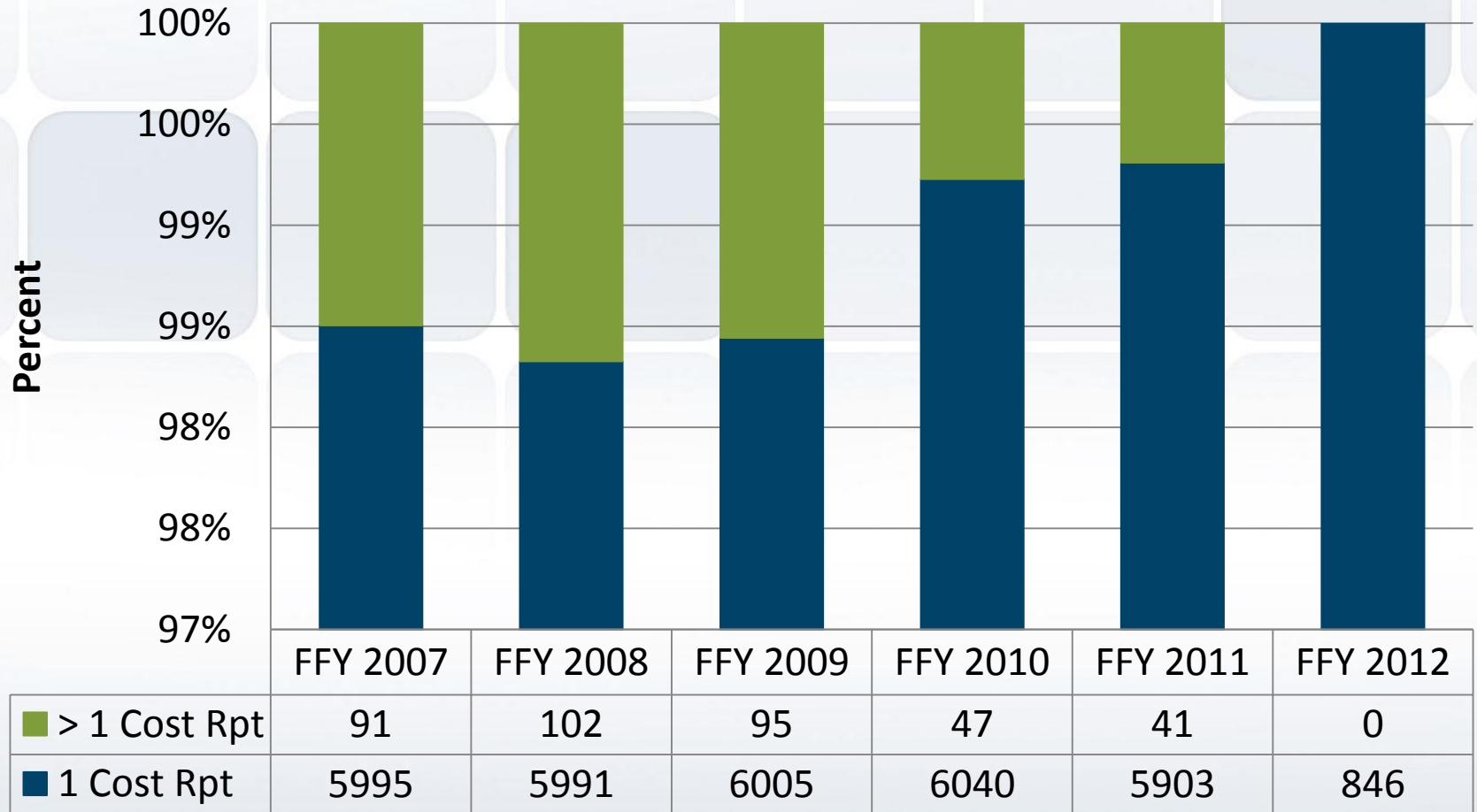
Objectives

- Understand how the processing impacts the data
- Recognize key issues
- Understand options to deal with issues

Annual Filing Requirements

- Annual filing of **12 months** or **13 four-week periods**
- May submit partial year reports or partial cost report, under certain circumstances
 - Change in provider's fiscal year
 - Change in provider ownership status
 - Low or no Medicare utilization
 - Initiate or terminate with the Medicare program
 - » Includes change from acute hospital to Long Term Care Hospital or Critical Access Hospital
- *Implication* is that multiple cost reports per provider per year exist.

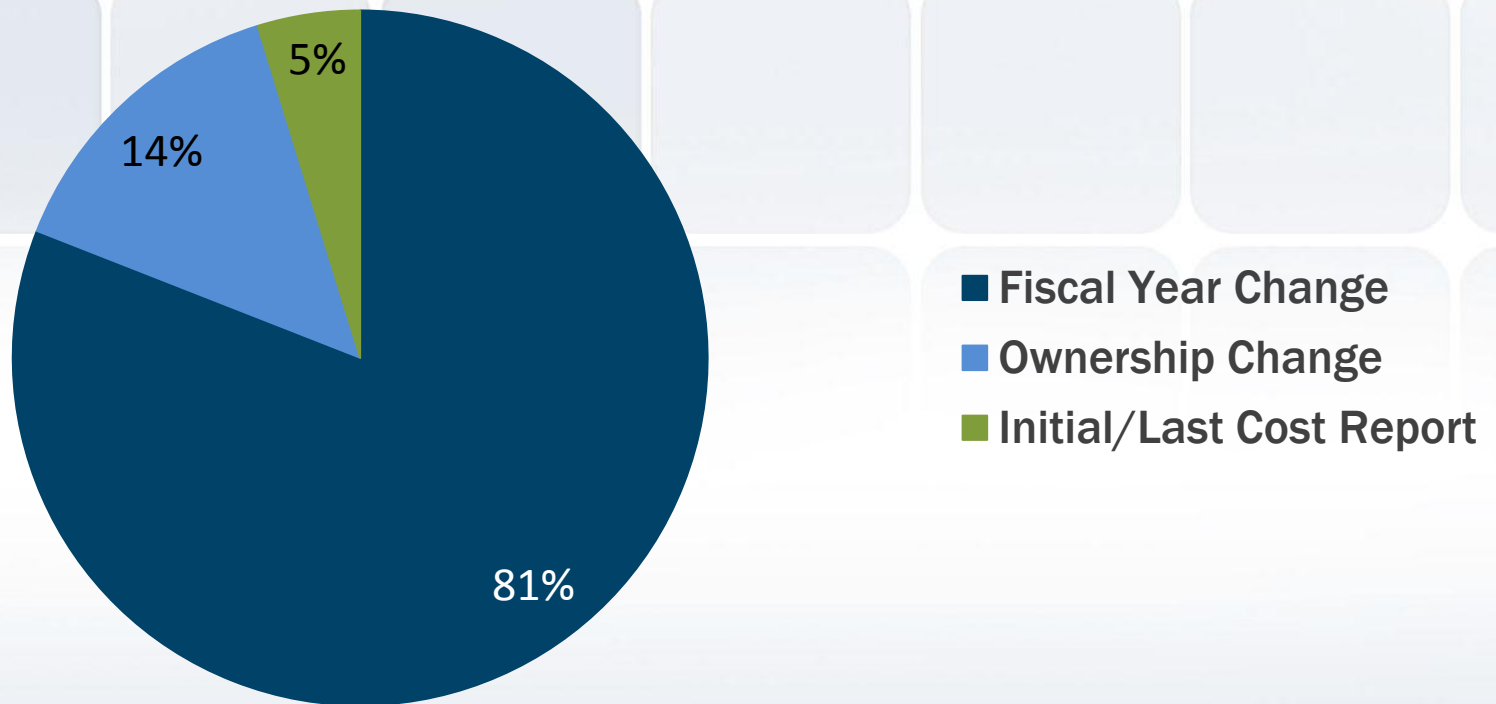
Providers with Multiple Cost Reports by Year



Providers with Multiple Cost Reports

Reasons for Multiple Cost Reports

Federal Fiscal Year 2011



Multiple Cost Reports

Options for handling multiple cost reports

- **Fiscal year changes:**
 - Use all cost reports provided to come up with an overall average
 - Use the cost report that represents the majority of the fiscal year
- **Ownership change:**
 - Need to keep the cost reports separate because the change in ownership could change how information is reported in the cost reports
- **Low or no Medicare utilization**
 - No information will be available for these facilities
- **Initiate or terminate with Medicare**
 - Use the information that is available

Quarterly Updates to Data Files

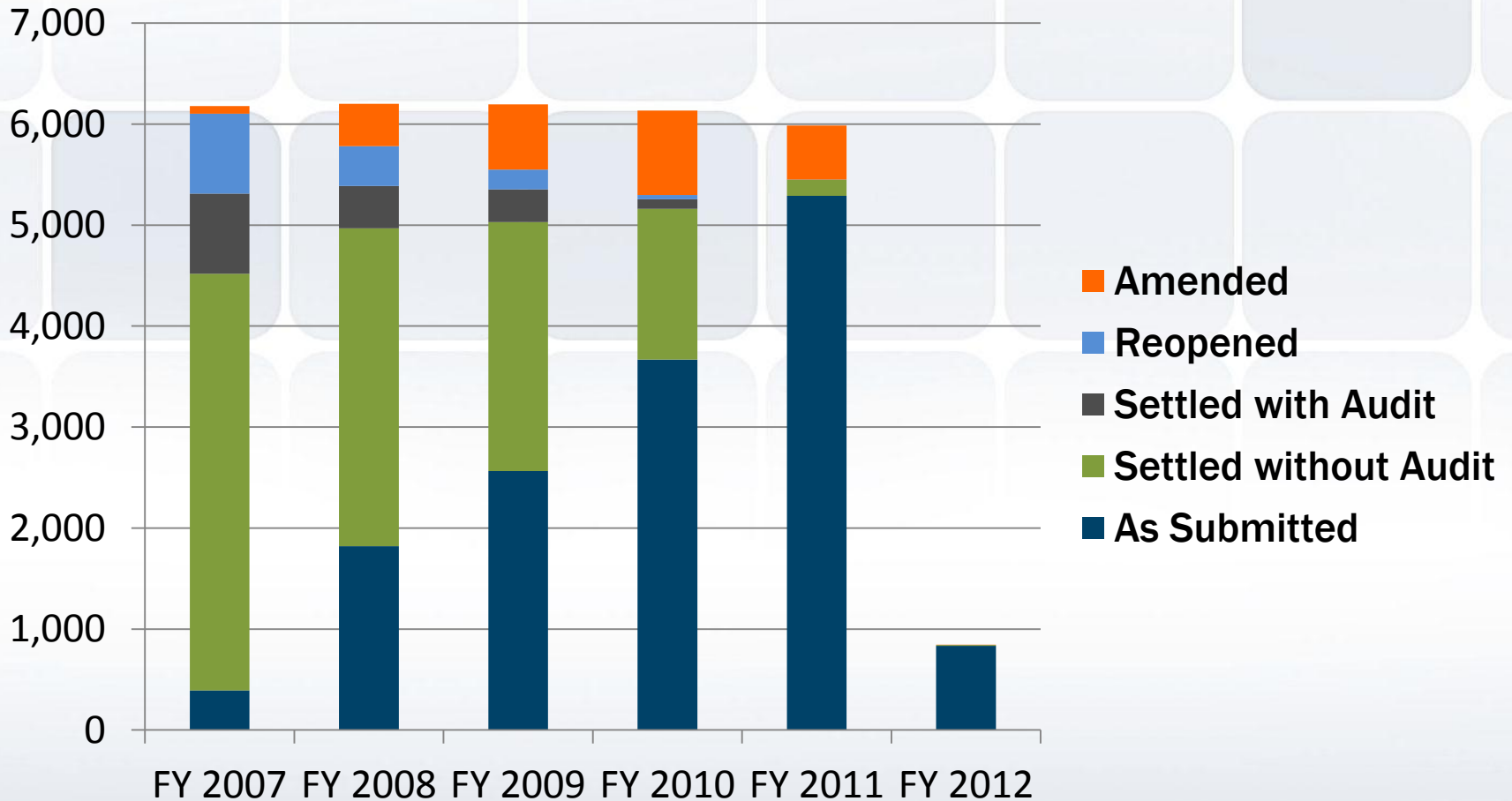
- **CMS overwrites the cost report data in HCRIS each quarter with the highest status cost report.**
- **Changes in status codes indicate changes to the data files.**
- **It is not easy to identify the changes with each download.**

Cost Report Status Codes

- **The order of the status codes is (lowest to highest):**
 - **As Submitted**
 - **Settled without Audit**
 - **Settled with Audit**
 - **Reopened**
 - **Amended**

Status Codes by Fiscal Year

Fiscal Years 2007-2011, March 2013 download



Changes to the Data Files

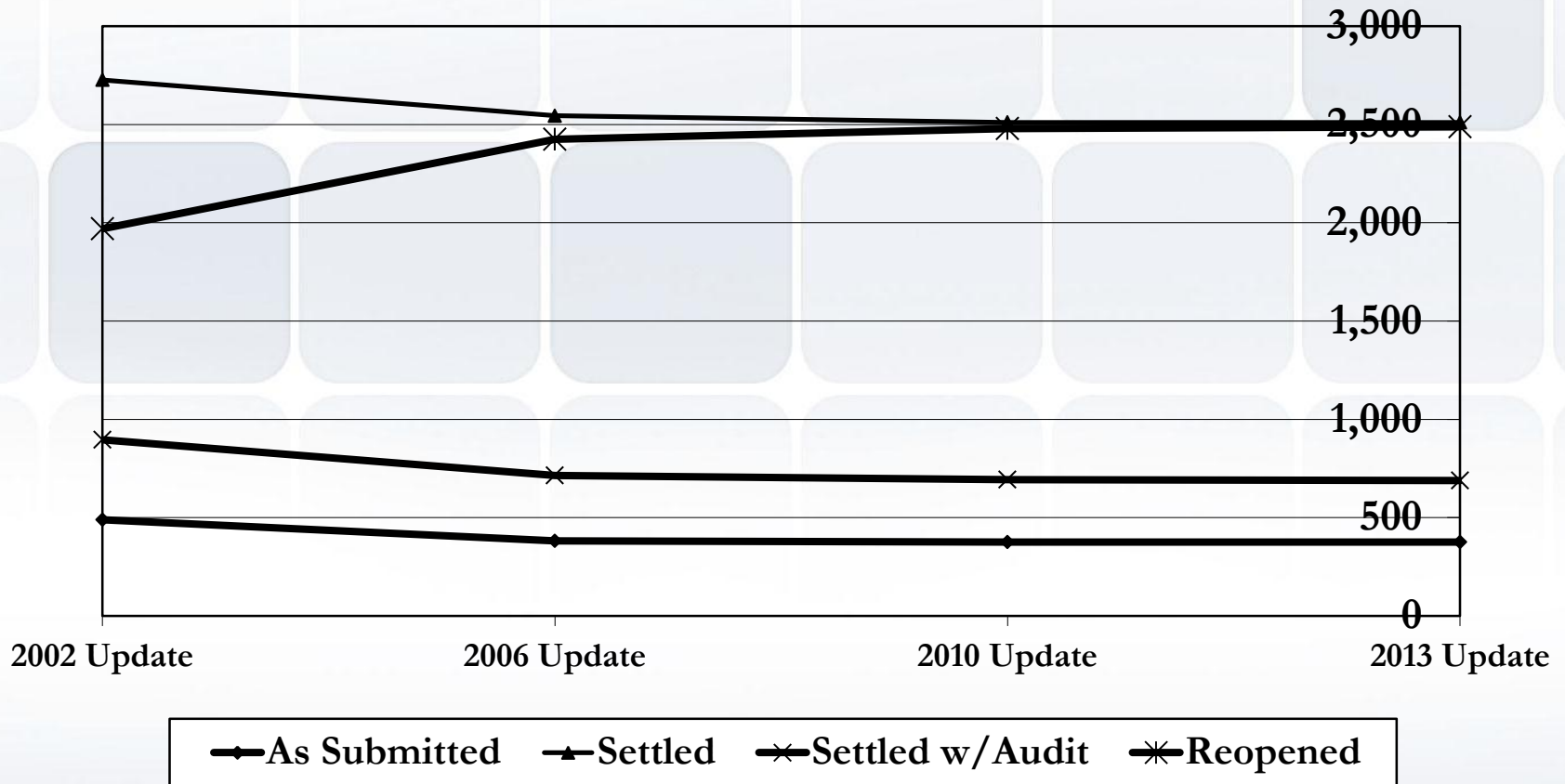
Options for handing changes to the data files

- **Depending on your study, researchers may need to**
 - **Download a point in time cost report data set and work with that set for the project**
 - **Download the cost report data each quarter in order to have the most up to date information**

Reopened Cost Reports

- Cost reports can be “Reopened”, which means that it was opened again by the provider, the Medicare Administrative Contractor (MAC), or CMS
- Cost report can be reopened for up to 3 years starting from the settlement date otherwise known as Notice of Program Reimbursement (NPR).
- If not reopened within 3 years, the cost report becomes final.
- Only exception to this rule is in the case of fraud.

FY 1996 Cost Reports Status Changes



Reopened Cost Reports

Options for handing reopened cost reports

- **Same situation as constantly changing download**
- **Depending on your study, researchers may need to**
 - **Download a point in time cost report data set and work with that set for the project**
 - **Download the cost report data each quarter in order to have the most up to date information**

Time Lag

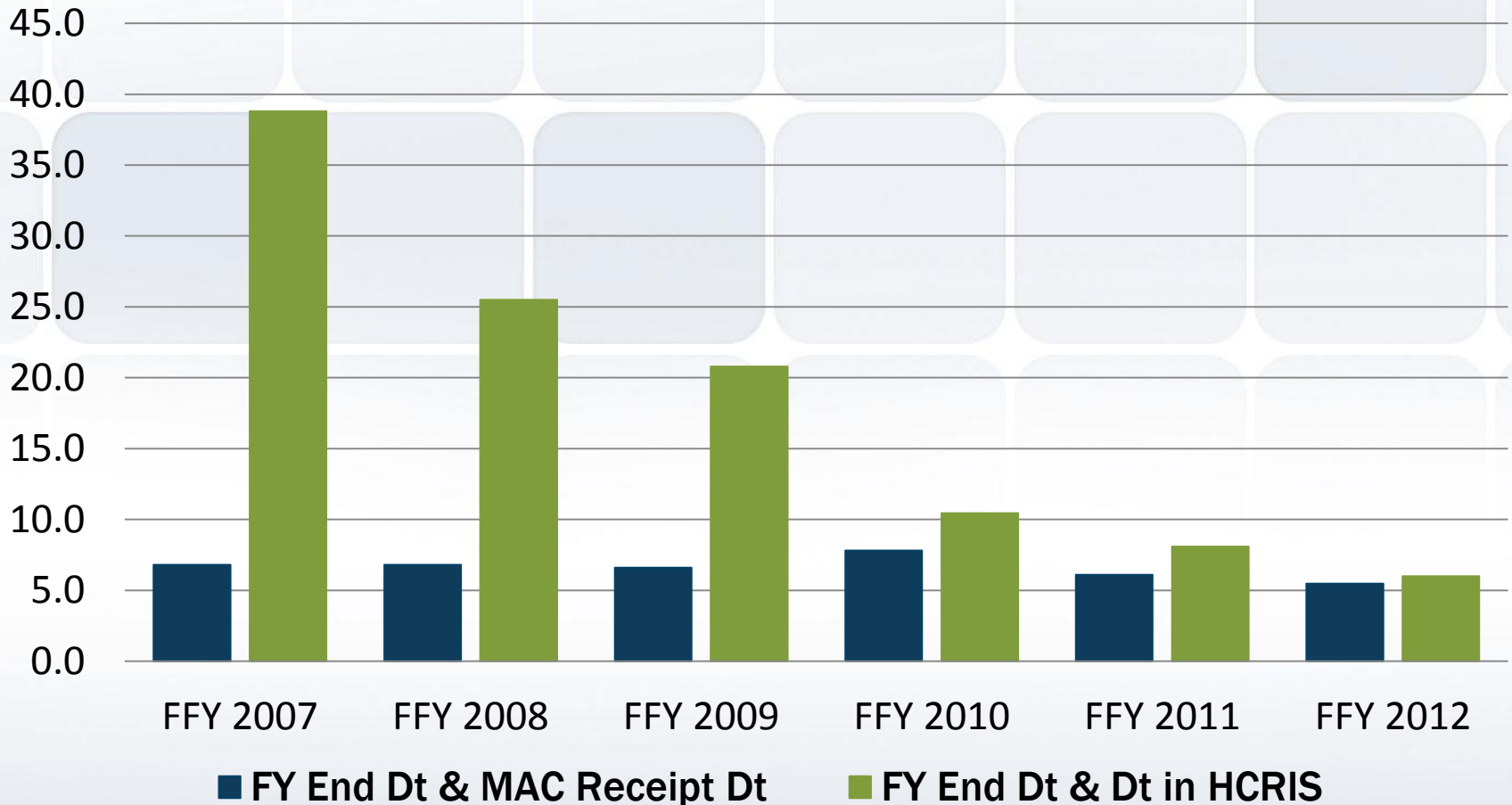
- Cost Report due to Fiscal Intermediary (FI) 5 months after the close of the provider's Fiscal Year.
- Usually takes about 12-18 months for the latest FFY to be complete.
- See flow chart at the end of this segment.

FFY 2012 Hospital Cost Reports Completion

Update	Percent Complete
March 2013 (6-months past FFY end)	14%
June 2013 (9-months past FFY end)	53%

Cost Reports Time Lags

Median Number of Months



Time Lags

Options for handling time lag

- **Be aware that it may take some time for the cost reports to appear in the download**
- **This may influence the years you include in your analysis**

Free-Standing Facilities vs Provider Based

- **Cost report download includes free-standing facility and any provider-based facility**
- **The forms used to collect the information differ between free-standing facilities and provider-based facilities.**

Free-Standing Facilities vs Provider Based

- **Some provider cost reports are located in multiple databases**
 - **SNF (found in 2 downloads)**
 - » Free-standing SNF and Hospital download
 - **RHC (found in 4 downloads)**
 - » Free-standing RHC, Hospital, SNF, HHAs
 - **HHA (found in 3 downloads)**
 - » Free-standing HHA, Hospital, SNF
 - **Hospice (found in 4 downloads)**
 - » Free-standing Hospice, Hospital, SNF, HHA
 - **Renal (found in 2 downloads)**
 - » Free-standing Renal facilities, Hospital

Determining Reliability of Data

- **Consult the instructions for completing the worksheet (PRM 15-2)**
 - **Is the Worksheet or variable required?**
 - » **Within the PRM 15-2 (“pr2_40” for Hospitals)**
 - **Is the Worksheet or variable audited?**
 - » **Within the Electronic Reporting Specifications (“R3P240S”), Table 6: Edits, Level I & II**
 - **What electronic edit checks are in place for this variable?**
 - » **Within the Electronic Reporting Specifications (“R3P240S”), Table 6: Edits, Level I & II**

Determining Reliability of Data

- Determine if the variable is used in the settlement summary
 - Worksheet E
- Check the number of missing or extreme values in the data

Why Use the Cost Report Data?

But remember...

- **Only national data available for all types of providers**
 - Non-profit
 - For-profit
 - Government