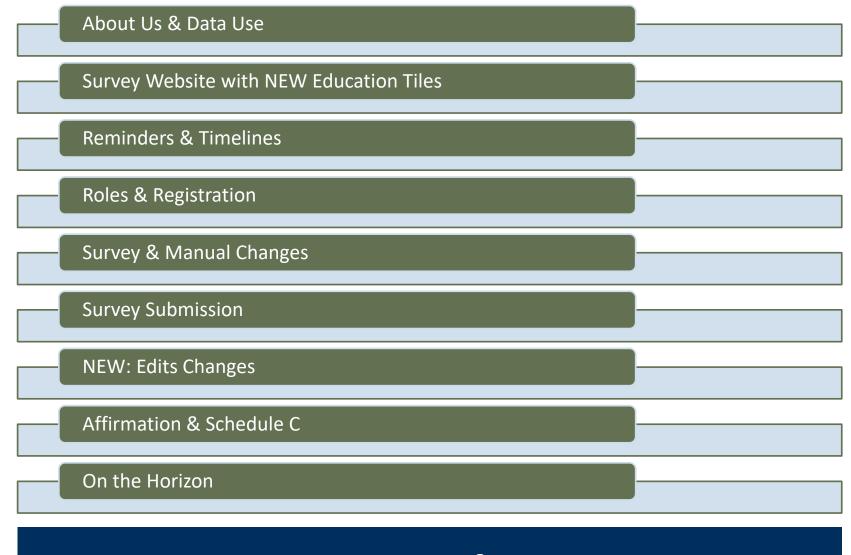


The respected source for health care data.

# Fall 2021 Survey Training

Suzy Staudenmayer, BS - Data Coordinator Jennifer Mueller, MBA, RHIA, FACHE, FAHIMA, SHIMSS – Vice President & Privacy Officer Cindy Case, BA, COC - Manager – Compliance, Education and Training WHA Information Center Annual Virtual Training *November 2021* 

Nelcome www.whainfocenter.com













Jennifer



Suzy







Alistair



Janice

Derek



**Tatrick** 







Emily

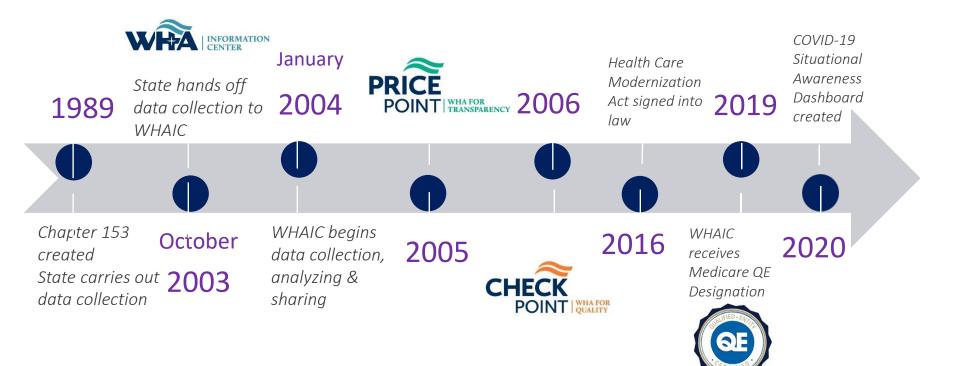
WHAIC Team





# **About Us: WHA Information Center**

WHA Information Center (WHAIC) is wholly owned subsidiary of the Wisconsin Hospital Association.





# **Information Center Data**

### Discharge/Claim Data Collected

- Hospital discharge claims (153)
- Ambulatory Surgery Centers (80)
  - Quarterly data submission/collecti on (3,000,000 records/qtr)

### Annual Survey Data/Collected

- Annual Survey of Hospitals
- Hospital Fiscal Survey
- Medicare Cost Report
- Personnel Survey
- Uncompensated Health Care Survey
- Hospital Rate Increases

### How the Data is Used

- Publications (Mandate)
  - Guide to Wisconsin Hospitals
  - Health Care Data Report
  - Uncompensated Health Care in Wisconsin Hospitals
  - Hospital Rate Increases
- Workforce Analysis & Predictions
- Quality Report/Quality Improvement
  - Readmission rates
  - Potentially Preventable Readmissions
  - Hospital Acquired Conditions penalties
  - Other specific adverse events
- Analytics
  - Kaavio
  - PricePoint
  - CheckPoint
  - Other analytics/custom requests



### Data not collected

- Professional/clinic:
- Pharmacy
- DME
- Nursing facilities

# Who Uses the Data?

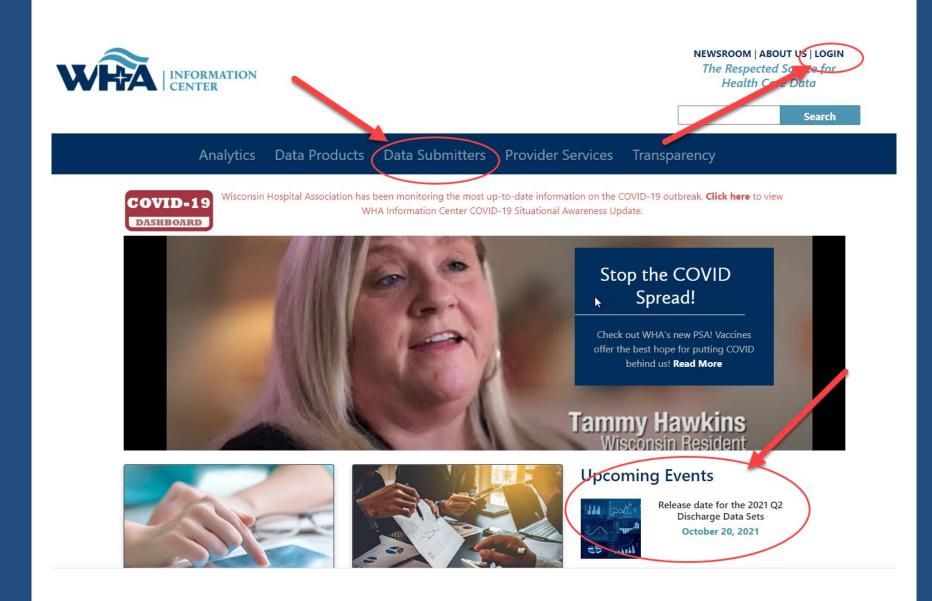
### Data Uses

- 86% of Wisconsin hospitals purchase data sets and/or custom data sets/reports from WHAIC.
- Other purchasers of custom data sets and/or reports include Insurers, Researchers and Universities.
- Data is used for Price and Quality Transparency (PricePoint & CheckPoint)

### **Analytics**

- WHAIC's data analytics tool (Kaavio) is provided at no charge to hospitals that purchase the data at the required level.
  - Users: 319
  - Hospitals: 93
- WHAIC and the Wisconsin Office of Rural Health (WIORH) offer the Rural Health Dashboard (RHD) as one way rural hospitals can use their SHIP program funding (Small Rural Hospital Improvement Grant).
  - There are 13 hospitals participating in 2021-2022.
  - The RHD consists of eleven (11) executive-level dashboards
  - Dashboards:
    - COVID-19 Situational Awareness Dashboard
    - Others...





### **Data Submitters**

WHA Information Center (WHAIC) has been collecting hospital, ASC and survey discharge data as authorized by the Wisconsin Department of Administration, since 2003 as defined by Chapter 153, Wisconsin Statutes.

Inpatient and outpatient data is collected quarterly through a secure, web-based tool known as **WIpop** to produce public use data sets, custom data sets and three annual publications.

In addition, all Wisconsin hospitals submit Annual, Fiscal, Personnel and Uncompensated Care survey data annually. Data collected from these surveys are used for trending, benchmarking, and oner key statistics.

For more information and access to the WIPC or Survey Data Submission Manuals, calendars, training materials, and other updates click on one of the pictures below.

#### **Reporting Requirements**





Surveys



#### WHAIC Portal Login

# **Survey Website**

### Surveys

All Wisconsin licensed, Medicare certified, hospitals, including psychiatric hospitals are required to submit survey data on an annual basis to the Wisconsin Hospital Association Information Center (WHAIC). Submissions include data in areas such as utilization, fiscal, and personnel to be used in publications, datasets, and workforce development. WHAIC collects data pursuant to Chapter 153 of the Wisconsin State Statutes and subject to all terms and conditions as described in ss. DHS120.



https://www.whainfocenter.com/Data-Submitters/Survey

### **Education & Training**

WHAIC provides training for new and seasoned survey submitters throughout the year. Please reach out to whainformationcenter@wha.org for more information on upcoming training sessions. We welcome feedback on past trainings and ideas for content of upcoming training sessions.





### **NEW:** Survey Process Manual

**Coming Soon:** Training Videos!

### WHAIC Internal Survey Process



### Start

Surveys Open the end of October



### Train

Annual Survey Training



### Answer

Answer Submitter Questions and Send Newsletters



### Remind

Send reminders about survey deadlines



### Validate

Internal Validation



### Publish

Create Publications and Release the Data



### Submission Timelines and Data Releases



DHS 120.12 Data submission procedures

"Every hospital shall annually file with the department within 120 calendar days following the close of the hospital's fiscal year."

"The department may grant an extension for up to 30 calendar days."

#### Survey Submission & Hospital Rate Increase Timeline - 2021 Fiscal Year End Dates

#### Surveys will be open for submission on November 1

Annual, Fiscal, Personnel, and Uncompensated Survey Submission	Date					
MARCH - JUNE FYE*						
March - June 30 FYE Extension Request Deadline	12/13/21					
March - June 30 Standard Submission Deadline	12/21/21					
March - June 30 Extended Submission Deadline (file online request by deadline)	1/31/22					
March - June 30 Affirmation Deadline	2/15/22					
JULY - SEPTEMBER FYE						
July - September 30 FYE Extension Request Deadline	1/23/22					
July - September 30 FYE Standard Submission Deadline	1/31/22					
July - September 30 FYE Extended Submission Deadline (file online request by deadline)	3/2/22					
July - September 30 Affirmation Deadline	3/16/22					
DECEMBER FYE						
December 31 FYE Extension Request Deadline	4/22/22					
December 31 FYE Standard Submission Deadline	5/2/22					
December 31 FYE Extended Submission Deadline (file online request by deadline)	6/2/22					
December 31 FYE Affirmation Deadline	6/16/22					
Medicare Cost Report Submission	Date					
January – June FYE Submission Deadline	1/31/22					
January – June FYE Schedule C Deadline to Upload Copy in Data Deliverables	2/15/22					
July – December FYE Submission Deadline	6/2/22					
July – December FYE Schedule C Deadline to Upload Copy in Data Deliverables	6/16/22					

The above timeline reflects adjusted survey submission timelines to benefit hospital to improve efficiency and prevent/reduce duplication of work and requests for additional time.

\*If you are part of a state or county facility – please note the adjusted timeline accounts for additional time allowed for in the statute

Health System Survey Submission	Date
Health System Survey Deadline for all Health Systems	07/18/22

https://www.whainfocenter.com/SurveySubmissionTimeline

### Reminders

Automated emails sent to remind survey submitters of upcoming deadlines on the calendar.

- Standard Deadline & Extended Deadline
  - First Reminder 2 weeks prior
  - Second Reminder The day before
- Affirmation and Cost Report Deadline
  - First Reminder A week prior
  - Second Reminder The day before

Additional emails such as surveys open, past due and special reminders sent manually by the *WHAIC staff*.

### **Extensions**

### Filing an extension

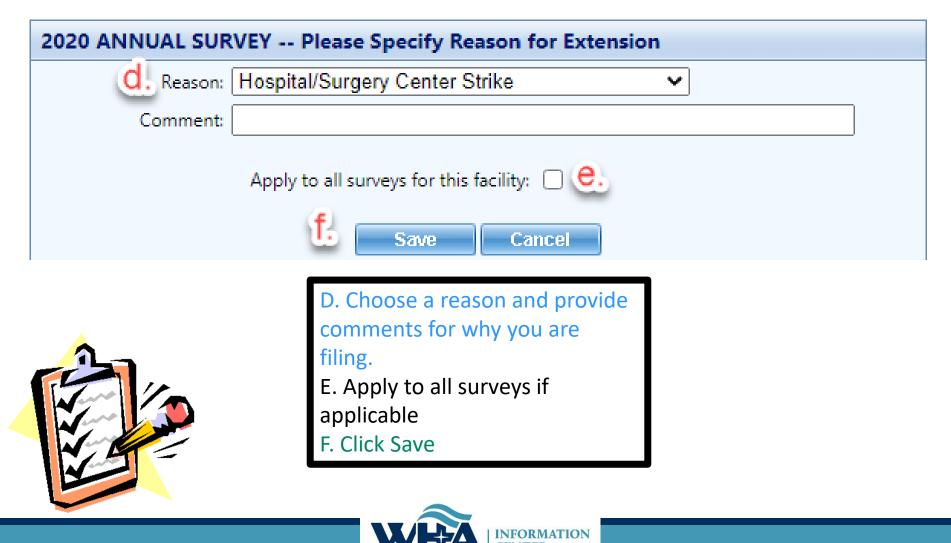
Ho	ome მ. Extensions		b	),	
	Select a Hospital	Surt By ID		Year	
	035 - Fort HealthCare	· (Fort Atkinson)	•	2020 - View	Hospital

#### 035 - Fort HealthCare -- (Fort Atkinson), FY End: 09/30

Hospital Survey Grid:						
Survey Name	Request Exte	nsion	Status	Extension	Progr	
2020 ANNUAL SURVEY			•			
2020 FISCAL SURVEY		Δ	Click on Exter	nsions Tah		
2020 MEDICARE COST REPORT SURVEY	1		<ul> <li>Select Hospital and current submission year then View</li> </ul>			
2020 PERSONNEL SURVEY	1					
2020 UNCOMPENSATED HEALTH CARE PLAN	1		Hospital			
			Click on the p pencil icon ur Extension.	•	est	

### **Extensions**

### Filing an extension



Open	SURVEYS OPEN: End of October
Timeline	Follow calendar to submit data by due date listed (based on FYE).
Affirm	Once all surveys are submitted, hospitals will receive an automated email notifying them that their affirmation statement is available.
Validate	Validate data, reopen surveys to make changes if necessary, provide responses to action edits.
Submit	Submit Affirmation Statement and Copy of Schedule C by the Due Date.

# Survey Submission Timeline

# Where does my data go?

#### Annual Survey

- Collects hospital information Part of a system, type of hospital, certifications, etc. Reports the services that are provided at the hospital, number of beds, utilization, FTEs, and physicians.
  - <u>Guide to Wisconsin Hospitals</u>
- Fiscal Survey
  - Collects information on revenue and expense figures, gross patient charges and contractual adjustments by payer, balance sheet figures, and charity care and bad debt.
    - Guide to Wisconsin Hospitals & the Uncompensated Health Care report
- Uncompensated Health Care
  - Collects definitions related to eligibility for uncompensated care; income thresholds for financial assistance; and policies and procedures determining a patients' ability to pay.
    - <u>Uncompensated Health Care Survey</u>
- Personnel Survey
  - "Addendum" to Annual Survey
  - Collects vacancies of select employee categories; number of employees 55 and over; number of employee separations;
    - Customs & Workforce Development
- Medicare Cost Report Schedule C
  - Used to calculate hospital tax

See our <u>Data Products</u> webpage for more information on publications, custom reports, and data sets.



**Survey Roles –** designations assigned by the facility to manage and oversee statutorily required and timely survey submissions and corrections to the annual surveys.

The Survey site is for authorized users only. Individual users must have their own login.



Authorized users shown here should be reviewed regularly by Primary Contacts.

Email <u>whainfocenter@wha.org</u> with any changes.

#### Authorized Users for Selected Hospital:--

Please take a moment to review your hospital's list of users authorized to access the WHAIC secure Survey Site. Should any of the names please contact <u>whainfocenter@wha.org</u>, as it is the hospital's responsibility to notify WHAIC with any staff updates or corrections.

First Name	Last Name	Title	Email	Survey Role	Annual	Fiscal	Medicare	Uncompensated	Personnel
Thaddeus	Coulis	Associate Measurement Analyst	thaddeus.coulis2@froedtert.com	Primary	1	<ul> <li>Image: A second s</li></ul>	1	<b>V</b>	<b>V</b>
Mike	Everson	Director of Reimbursement	Michael.Everson@froedtert.com	Secondary			1		
Angela	Zaeske	Program Manager	Angela.Zaeske@froedtert.com	Primary	1	1	1		V





We cannot add new users. Users must register for the appropriate access.

If any changes are needed with existing users, please email <u>whainfocenter@wha.org</u>.

### **Registration & Other Resources**

This section provides additional information to assist you in the submission of hospital surveys.

Please note: WHAIC cannot register users. For new registrants, please see Roles & Registration. Once registered, WHAIC will review all access requests and respond within 24-48 hours.





**Survey Primary:** recommended for users involved in submission process who need regular communications with WHAIC and have authorization to sign off on survey data (CFO, CEO or delegate).

- Have access to the survey site to make changes and to all reports.
- Receive all communication from WHAIC such as automated and targeted reminders, site specific emails, newsletters, and bulletins.

### **Other roles:**

Note: The following users will receive our newsletters and bulletins but will not receive regular reminders about deadlines and site-specific emails.

**Survey Secondary** – This is great for CEO's and CFO's who do not want regular contact with WHAIC but want to be able to access the survey and affirmation statement.

**Survey User** – This is for users who only enter some of the data, but do not make decisions on the data or oversee the process of submission.

https://www.whainfocenter.com/Data-Submitters/Survey/Resources/surveyregister





W		RMATION 'ER				
	Log In					
Please e	enter your Username and F	Password				
Passa This system is for authorized used without authority, or in excess of y or transactional information may electronic communication reso monitoring and is advised that violation, system personnel may p	your authority, is strictly prol be conducted to ensure the urces. Anyone using this sys if such monitoring reveals po	computer system and/or network hibited. Monitoring of transmissions proper functioning and security of tem expressly consents to such ssible criminal activity or policy nonitoring to law enforcement or to				
Register	Forgot Password	Change Password				
WHA Information Cente	About Us   Contact Us   © 2003 - 2019, WHA Information Center WHA Information Center - 5510 Research Park Dr Madison - WI - 53711 Phone: 800.231.8340 / 608.274.1820					
	SECURED SITE register.com 256 bit Encryption o					

#### https://portal.whainfocenter.com/Account/Login.aspx

### From this screen you can:

- Login
- Request Password Reset (Forgot Password)
- Change Password

### Important:

- Passwords must be changed annually.
- Accounts deactivate if inactive for 15 months.
- Contact WHAIC if existing account is inactive, do not reregister.





### Survey & Manual Changes

### **Past Improvements**

#### **Going Green**

- Online affirmation process and schedule C upload
- Updates to registration

#### Updates to the Annual Survey manual

- Updated look and feel
- Removed Obsolete Answer Choices & HIM Coding Questions
- Added Appendices (definitions & facility list) and Change Log

#### Updated website

- Addition of tiles to make it more user friendly
- Updated timelines to make it more consistent from year to year

#### Updated application

- Submission
  - Added question details
  - Added colors inside the surveys to allow for noticeable edits that were easy to correct as you go
  - Allowed for rounding of numbers
- · Updates to front page of the application to make it more user friendly



### **Current Improvements**

#### Survey

- Added SDOH Questions to Annual Survey
- Added additional information to Question 11 of Health System Survey
- Prefill questions to allow for less validation error

#### **Fiscal Survey Manual**

- Updated look and feel
- Removed Obsolete Questions
- Consistent look and feel with Annual Manual such as formatting, contact list, and change log

#### Survey Process Manual

• Instructional how-to manual

#### **Education & Training**

- Additional tiles added for the expansion of training materials
- Includes Survey Process Manual



#### XIII. SOCIAL DETERMINANTS OF HEALTH (SDOH) General

Instructions and Guidelines:									
Social determinants include societal and environmental conditions such as food, housing, transportation, education, violence, social support, health behaviors and employment. Note: The term "facility" refers to hospital and/or health system.									
71. Does your facility screen patients for social ne	eds?								
○ Yes, for all patients	$\bigcirc$ No, (skip to question 274)								
72. If yes, please indicate which social needs are	assessed. (Check all that apply)								
Housing (instability, quality, financing)	Interpersonal violence	Education	Other, please descri						
Food insecurity or hunger	Transportation	Social isolation (lack of family and social support)							
Utility needs	Employment and income	$\square$ Health behaviors							
73. If yes, does your facility record the social need	ds screening results in your EHR?								
⊖Yes ●No									
174. Does your facility utilize outcome measures (for a ddress patients' social needs?	or example, cost of care or readmiss	ion rates) to assess the effectiveness of the interventions							
🔾 Yes 💿 No									
75. Has your facility been able to gather data indic any of the following? (Check all that apply)	cating that activities used to address	the SDOH and patient social needs have resulted							
Better health outcomes for patients									
Decreased utilization of hospital or health syste	m services								

Decreased health care costs

Improved community health status

### **Fiscal Survey Manual Updates**

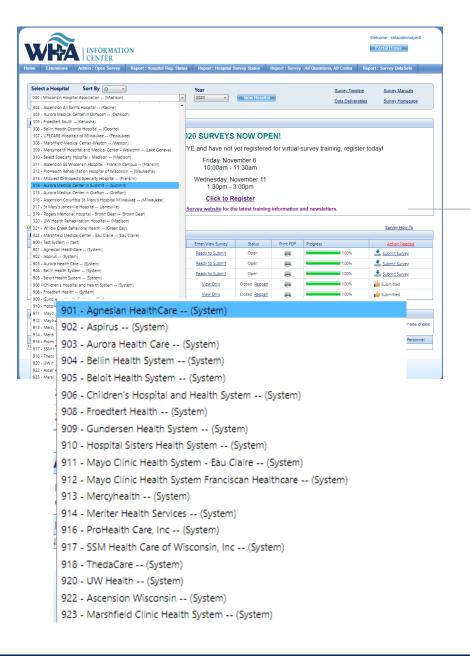
- **Questions clarified by adding examples and bullets.**
- □ More cohesive look between the Annual and Fiscal Manual.
- □ Removed outdated questions 41, 50, and 56 as they referenced GAMP.
  - **Questions removed will show as obsolete**

#### 56. OBSOLETE



Health System Survey Changes





# Health System Survey

Health System Survey:

### Listed as a 9XX facility ID

Email sent in June, due in July

- Email sent to all primary survey contacts
- Those with current portal accounts given access upon request
- Available as a selection when new users register

Health System Surveys are entered under a system name, not by facility

II. HEALTHCARE SYSTEM FINANCIAL SURVEY Services/Programs Other than Hospital

2

11. System Health Care Services/Programs Other than Hospital: (specify number, zero or blank if not applicable)

Physician Clinics	
Lab	
Home Health	
Pharmacy	
Assisted Living	
Dialysis	
Nursing Home	
Hospice	
Other	
If "Other", describe	

# Survey Submission



www.whainfocenter.com

Select a Hospital         Sort By         ID         ID           079 - Froedtert Hospital (Milwaukee)	Year ▼ 2021 ▼	View Hospital	$\langle$	<u>Survey Timeline</u> Data Deliverables	Survey Manuals Survey Homepage
Message From WHA Information Center:					
2021 S	urveys Open M	londay, Noven	nber 1		
	Tentative Virtual	Training Dates:			
	Wednesday, November	r 3, 1:30pm - 3:00pm			
	Thursday, November 11	1, 10:00am - 11:30pm			
Remember to check out	the <u>Survey website</u> for th	ne latest training inform	ation and newslet	ters.	
Per NGS, beginning 6/21 CMS will no longer	support the IE browser.	Going forward Chrome	will need to be use	ed to upload cost rep	orts.
Important Note: Cares Act fundi	ing should be noted on the	Fiscal Survey in non-oper	rating revenue as a	n unusual event.	
<b>Operating revenue</b> is generated by a company's primary business activities. C separated out from <mark>n</mark> u	Operating revenue can be com on-operating revenue that occ			pany and its operations. O	perating revenue should be

078 - Froedtert Hospital (Milwaukee), FY End: 06/30					Survey How-To
Hospital Survey Grid:					
Survey Name	Enter/View Survey	Status	Print PDF	Progress	Action Needed
2021 ANNUAL SURVEY	Continue	Open	=	49%	
2021 FISCAL SURVEY	New	Open	-	0%	
2021 MEDICARE COST REPORT SURVEY	New	Open	-	0%	
2021 PERSONNEL SURVEY	New	Open	-	0%	
2021 UNCOMPENSATED HEALTH CARE PLAN	New	Open	-	0%	

#### Authorized Users for Selected Hospital:--

Please take a moment to review your hospital's list of users authorized to access the WHAIC secure Survey Site. Should any of the names listed no longer require access to the Survey or if changes need to be made, please contact whanfocentercowha.org, as it is the hospital's responsibility to notify WHAIC with any staff updates or corrections.

First Name	Last Name	Title	Email	Survey Role	Annual	Fiscal	Medicare	Uncompensated	Personnel
Thaddeus	Coulis	Associate Measurement Analyst	thaddeus.coulis2@froedtert.com	Primary	1	<b>√</b>	<b>~</b>	<b>V</b>	~
Mike	Everson	Director of Reimbursement	Michael.Everson@froedtert.com	Secondary			1		
Angela	Zaeske	Program Manager	Angela.Zaeske@froedtert.com	Primary					

### Survey Submission

#### **3-Digit ID**

The unique 3-digit identification number assigned to each facility by WHAIC.

You will notice this ID in the Select a Hospital drop-down. Please include this number in the subject line when contacting WHAIC.

Select a Hospital	Sort By ID	
000 - Wisconsin Hospita	Association (Madison)	-
000 - Wisconsin Hospita	al Association (Madison)	<b>_</b>
001 Amery Regional M	1edical Center (Amery)	
002 - Aspirus Langlade H	Hospital (Antigo)	
003 - ThedaCare Region	nal Medical Center - Appleton, Inc (Appleton)	
004 - Ascension St. Elizabeth Hospital, Inc (Appleton)		
006 Memorial Medical Center (Ashland)		
007 - Western Wisconsir	n Health (Baldwin)	
008 - St Clare Hospital 8	& Health Services (Baraboo)	e
009 - Mayo Clinic Health System – Northland in Barron (Barron)		
010 - Marshfield Medica	al Center – Beaver Dam (Beaver Dam)	5
011 - Beloit Health Syste	em (Beloit)	
1 A 4 3 4 1 4 1 4 1 4 1 4 1 4 1 4 1 4 1 4 1	ter a le la le	

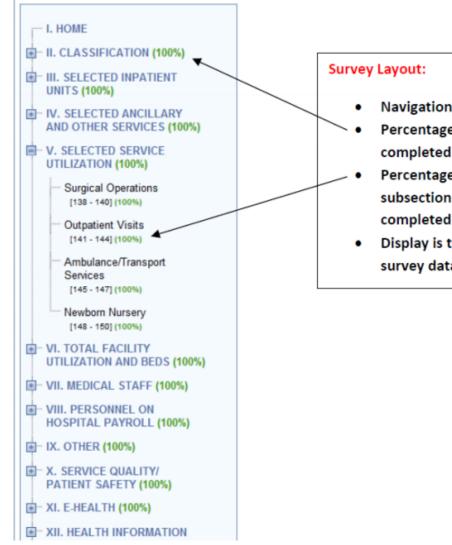
#### 079 - Froedtert Hospital -- (Milwaukee), FY End: 06/30

Hospital Survey Grid:		
Survey Name	Enter/View Survey	
2021 ANNUAL SURVEY	Continue	
2021 FISCAL SURVEY	New	
2021 MEDICARE COST REPORT SURVEY	New	
2021 PERSONNEL SURVEY	New	
2021 UNCOMPENSATED HEALTH CARE PLAN	New	

#### 000 - Wisconsin Hospital Association -- (Madison), FY End: 12/31

Hospital Survey Grid:		
Survey Name	Enter/View Survey	
2020 ANNUAL SURVEY	View Only	
2020 FISCAL SURVEY	View Only	
2020 MEDICARE COST REPORT SURVEY	View Only	
2020 PERSONNEL SURVEY	Ready to Submit	
2020 UNCOMPENSATED HEALTH CARE PLAN	View Only	

# **Survey Submission**



- Navigational Tree Control
- Percentage of each section completed
- Percentage of each subsection of questions completed
- Display is the same for all survey data types

# Survey Submission

# **Survey Submission**

### Each question shows additional details by clicking on the line number.

Question 34       X         Obstetrics (include LDRP, exclude gynecology)         Help         2019 Answer:         Level of Care: 1         Beds set-up and staffed last day of fiscal year: 1         Number of discharges: 93         Inpatient days for fiscal year: 178         Discharge days: 178         Service Code: 1	Level of Care	P, exclude gynecology) Beds set-up and staffed last day of fiscal year	Number of discharges	Inpatient days for fiscal year 178	Discharge days	
Help         2019 Answer:         Level of Care: 1         Beds set-up and staffed last day of fiscal year: 1         Number of discharges: 93         Inpatient days for fiscal year: 178         Discharge days: 178			n 34			x
ОК			Help 2019 Answer: Level of Care: 1 Beds set-up and staffed Number of discharges: 9 Inpatient days for fiscal y Discharge days: 178 Service Code: 1	last day of fiscal year: 1 3		



Survey Name	Enter/View Survey	Status	Print PDF	Progress	Action Needed							
2021 ANNUAL SURVEY	Continue	Open	-	49%								
2021 FISCAL SURVEY	New	Open	=	0%								
2021 MEDICARE COST REPORT SURVEY	New	Open	-	0%								
2021 PERSONNEL SURVEY	New	Open 📑	II. HOSPITAL	INFORMATION								
2021 UNCOMPENSATED HEALTH CARE PLAN	New	Open	AND CLASSI	FICATION (33%)								
e Service is provided in or by the hospital in a DIST		Description	• IX. OTHER (1		be provided for inpa							
units. Service is provided in or by the hospital but NOT IN A DISTINCT AND SEPARATE UNIT.												
	IN A DISTINCT AND SEF	ARATE UNIT.	Service is provided by the hospitals Health Care System in the community.									
Service is provided in or by the hospital but NOT												
Service is provided in or by the hospital but NOT	System in the community. t is available, in the hospit		y, through a FORI	MAL CONTRACTUAL	arrangement with ar							
Service is provided in or by the hospital but NOT Service is provided by the hospitals Health Care s Service IS NOT MAINTAINED by the hospital but	System in the community. t is available, in the hospit ventures.	al or another facilit			arrangement with an							
Service is provided in or by the hospital but NOT Service is provided by the hospitals Health Care is Service IS NOT MAINTAINED by the hospital but hospital or provider, including networks and joint SERVICE NOT AVAILABLE either by the hospital	System in the community. t is available, in the hospit ventures. I or through a formal contr	al or another facilit ractual arrangemer			arrangement with an							
Service is provided in or by the hospital but NOT Service is provided by the hospitals Health Care Service IS NOT MAINTAINED by the hospital but hospital or provider, including networks and joint	System in the community. t is available, in the hospit ventures. I or through a formal contr	al or another facilit ractual arrangemen <u>Description</u>	it with another ho	spital or provider.								

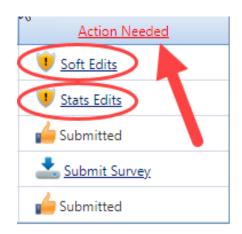


## **Survey Submission - Edits**

#### 2020 FISCAL SURVEY : Wisconsin Hospital Association, Madison, 53725.

	1
V. HOSPITAL INPATIENT UTILIZATION BY PAY SOURCE	
Pay Source %)	
Validation Checks :	
There are no page-level errors. There are no hard edits.	
There are 2 stats edits.	
Validation Checks : There are no page-level errors. There are no hard edits. There are no soft edits.	

Edits will appear at the top of the page when you save, the section will change color, and will show under the Action Needed on the Hospital Survey Grid once 100% complete.





# **Survey Submission - Edits**

Below is an example of hard edits that you may see at the top of the screen. If you do not have any for that section, it will say "There are no page-level errors".

#### Validation Checks :--

#### Validation Rule 3379 Failed:

The sum of line 199 full-time persons through line 234 full-time persons must equal line 235 full-time persons. Difference: 1

#### Validation Rule 3380 Failed:

The sum of line 199 part-time persons through line 234 part-time persons must equal line 235 part-time persons. Difference: 217

Validation Rule 3604 Failed: Response required for line(s): 199 Part Time Total No. of Persons (less than 36 Hr/Wk)







[37 - 50] (100%)



UNITS (100%) General Medical/Surgical [26 - 36] (100%) ICU/CCU [37 - 50] (100%)

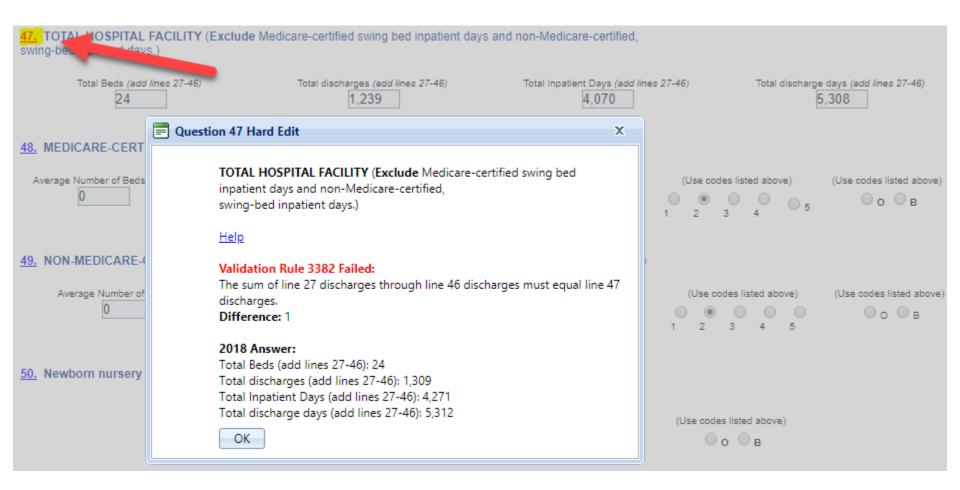
Red = Hard Edit Gold = Soft Edit Purple = Stats Edit *Hard Edit* – Mathematical or logical error: Edit that must be fixed to submit survey (e.g., fiscal survey line 1 + line 4 must equal line 5).

**Soft Edit** – Possible error; values imply unusual situation: Edit that must be verified to submit survey. (e.g., annual survey – line 160 – Admissions are more than 3% higher/lower than inpatient days in Section III. Are you sure?).

Statistical Comparison (Stats Edits) – Possible error; values are substantially different than reported in previous survey. Edits run after hard and soft edits are addressed. If value is 30% more or less than submitted in previous year, an edit will appear. (e.g., if total gross revenue is \$1.0 million for FY 2016 and \$1.3 million for FY 2017, an edit will appear).

# **Survey Submission - Edits**

## More edit details on the edit can be found by clicking on the question number.





spital Survey Grid:						
vey Name		Enter/View Survey	Status	Print PDF	Progress	Action Needed
0 ANNUAL SURVEY		Incomplete	Open	=		U Stats Edits
0 FISCAL SURVEY		Incomplete	Open	=		🗍 europe
0 MEDICARE COST REPORT SURVEY		View Only	Closed <u>Reopen</u>	=		U Stats Edits
0 PERSONNEL SURVEY		Incomplete	Open	=		🦕 Submitted
0 UNCOMPENSATED HEALTH CARE PLAN		View Only	Closed <u>Reopen</u>	-		U Stats Edits
Wisconsin Hospital Association						Submitted
Wisconsin Hospital Association	2020 FISCAL SU	RVEY	-	Make	Changes	Submitted
				Make	Changes	-

I have reviewed this statistical alert and have determined that the submitted value(s) is/are accurate.

I Agree

Wisconsin Hospital Association Madison, 53725

2020 FISCAL SURVEY

W

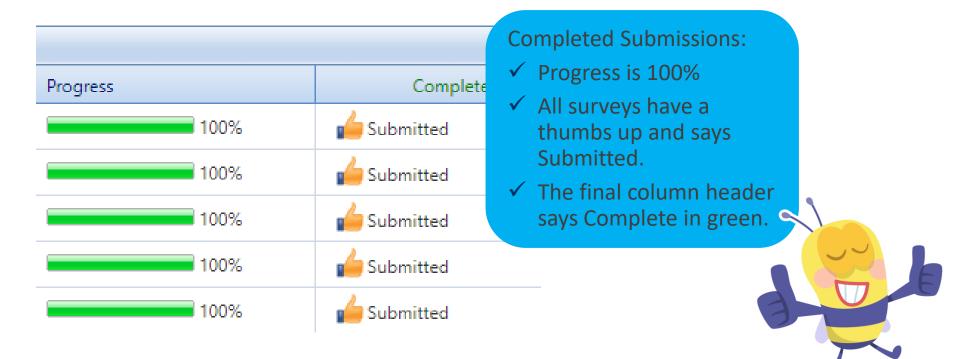
7/

Make Changes

| INFORMATION | CENTER Print Clo

Close Window

	ter/View Survey	Status	Print PDF	Progress	Action Needed
	<u>Only</u>	Closed <u>Reopen</u>	=	100%	🖕 Submitted
Not done yet!	<u>uly</u>	Closed <u>Reopen</u>	=	100%	🖕 Submitted
,,	unly	Closed <u>Reopen</u>	=	100%	🖕 Submitted
	<u>y to Submit</u>	Open	=	100%	Length Survey
	View Only	Closed <u>Reopen</u>	=	100%	🖕 Submitted



## **Affirmation & Schedule C**

### **1. Click on Data Deliverables**



### 2. Click on Survey Affirmations and Schedule C

2



		Welcome sstaudenmayer8! [Portal Home]				
Home	File Downloads	File Admin	Provider Based Locations	Rate Increases	Data Affirmations	Survey Affirmations & Schedule C

Welcome to the WHA Information Center Data Deliverables site. Posted files will remain online for 30 days.

\*\*Effective with Q2 2021, profile and validation reports are no longer encrypted, and therefore do not require 7-Zip. We rely on hospitals to implement their own best practices and follow HIPAA and other Security Standards. Please be sure to download your reports and save there to your own secured system for a rolling 5 quarters of data to accurately validate and trend the history of reporting.



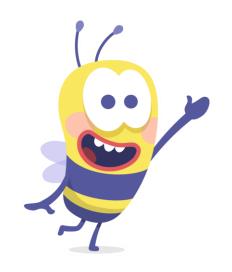
# You will access your affirmation by clicking links under the Select column. For more information - click Definitions and Frequently Asked Questions.

Survey Affirmations and Schedule C		chedule C Definitions and Frequently	Definitions and Frequently Asked Questions				Filt	er for Yea	r: 2020 🗸
Select	ID	Facility	Year	FYE	Submitted	Approved By	Sche	dule C	Validated
Complete Affirmation	0	Wisconsin Hospital Association (Madison)	2020	12/31	No	test	No	Upload	<
Download	001	Amery Reg. Medical Center (Amery)	2020	12/31		-	No	Upload	<
Download	002	Aspirus Langlade Hospital (Antigo)	2020	06/30			No	Upload	<

### Instructions for Survey Affirmations and Schedule C Table

- Filter for Year defaults to the current year, but users may change that to view affirmations for prior years.
- Four columns are sortable, Facility, ID, Submitted and Schedule C
- Select has three possible values:
  - 1. **Complete Affirmation** means that all required surveys have been submitted. Click the link to open the affirmation for submission.
  - 2. Surveys Incomplete means that not all required surveys have been submitted. Can do nothing with this facility now, except upload Schedule C.
  - 3. **Download** means the affirmation has already been submitted. Can download the completed affirmation, but can make no further changes.
- Under Schedule C, the values are
  - Yes or No, depending on whether the MCR Schedule C has been uploaded. Note that Yes is a hyperlink, which if clicked will download the previously uploaded Schedule C file.
  - 2. Upload. Clicking prompts the user to select and upload the Schedule C file. Upload may be visible even after a file has been uploaded, in case the user wants to upload again, overwriting the previous file. Upload is available until a) a file has been uploaded, and b) the affirmation has been submitted. After that point, the record is considered locked.





#### Affirmation Summary Data FY Summary Report Action Edits Sign & Submit Affirmation Download / Reopen Surveys Cancel

#### 2020 Survey Affirmation

ey Summary Data

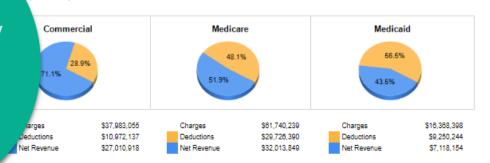
#### 000-Wisconsin Hospital Association (Madison)

According to the Department of Health Services (DHS) 120.11, hospitals must adhere to standard data verification, review, and comment procedures. This must occur before the data is signed off on via the affirmation statement.

Portions of the Annual and/or Fiscal survey data is publicly available on the WHAIC website in various <u>publications</u>, custom reports, and <u>PricePoint</u> to display Payer Mix details for various payers as well as Charity/Other Uncompensated care. For more information and validation of this data, see the Preliminary Fiscal Year Summary Report on the left toolboar.

Review the Summary Data in the charts and table below for accuracy. Line items listed in red indicate a significant variation of 30% or greater from the previous years reporting. \*Review these changes carefully as they are often the focus of public interest. If changes are required for the current year, use the toolbar on the left to reopen the appropriate survey and make a necessary corrections. If no corrections to the figures below are required, but you choose to provide a comment, you do so prior to submitting your electronic affirmation.

Start on Affirmation Survey Data. The links will turn green when on the active page.



	Current Year	Previous Year	Percent Change
Gross Patient Revenue	\$120,702,741	\$120,702,741	0.0%
Less Deductions	\$59,343,330	\$59,343,330	0.0%
Net Patient Revenue	\$81,359,411	\$81,359,411	0.0%
Plus Other Operating Revenue	\$1,202,150	\$1,202,150	0.0%
Total Revenue	\$82,581,581	\$82,561,581	0.0%
Less Expenses	\$81,533,214	\$81,533,214	0.0%
Operating Margin	\$1,028,347	\$1,028,347	0.0%
Operating Margin %	1.6%	1.6%	0.0%
Non-Operating (Gains/Losses)	\$1,073,081	\$1,073,081	0.0%
Net Income (Total Margin)	\$2,101,428	\$2,101,428	0.0%
Total Margin %	3.3%	3.3%	0.0%

	Current Year	Previous Year	Percent Change
Bad Debt	\$2,301,601	\$2,301,601	0.0%
Charity Care	\$1,221,881	\$1,221,881	0.0%
Inpatient Discharges	1,138	1,138	0.0%
Total Outpatient Visits	113,870	113,870	0.0%
Total FTEs	338.0	313.4	7.8%
Total Beds	18	18	0.0%

\*Fields highlighted in red indicate 30% or more variance from last year.

May also advance sections by clicking next,

Next

#### 2020 Survey Affirmation

Affirmation Summary Data

Sign & Submit Affirmation

Download / Reopen Surveys

FY Summary Report

Action Edits

Cancel

#### 000-Wisconsin Hospital Association (Madison)

This document represents a compilation of what will be displayed in the Guide to Wisconsin Hospitals and is produced for your review prior to publication. WHAIC encourages you to review this information carefully for accuracy. Once the data is processed and published on the WHAIC website any egregious errors or misrepresented data cannot be adjusted. This is your last opportunity to validate the data and make any corrections.

This FY Summary Report provides detailed information about your hospital, including (as applicable) general medical-surgical, long-term acute-care, psychiatric, alcohol and other drug abuse, and rehabilitation. The information is drawn from responses to the Annual Survey of Hospitals, the Hospital Fiscal Survey, and the Personnel Survey. Tables present selected measures of utilization, service, staffing and finance. Once the data is published in the Guide, comparison data for hospitals of the same type, in the same analysis area, and for the same patient volume group will be displayed.

To make any corrections, re-open the applicable survey, make corrections and resubmit (including going through the edit process). This will prompt your reports to refresh. Contact WHAIC staff if you have questions.

nload Preliminary Fiscal Year Summary R	leport - Printable PD	F		FY Summary F
000 Wisconsin Hospital Association 5510 Research Park Dr PO Box 259038 Madison, WI 53725		Fiscal Year: Type:	02/01 to 12/31 GMS Critical Access Hospital	County: Analysis Area: ()
608-274-1820		Control:	Other Not-For-Profit	
Selected Utilization Statistics	FY 2020	FY 2019	Ratio	
Occupancy Rate (%)				1
Adult Medical-Surgical	52.9%	53.0%	6 1.00	
Obstetrics	48.6%	48.8%	6 1.00	
Pediatrics	0.0%	0.0%	6 N/A	
Total Hospital	70.3%	70.5%	6 1.00	
Average Census (Patients)				
Adult Medical-Surgical	5.3	5.3	3 1.00	
Obstetrics	0.5	0.5	5 1.00	
Pediatrics	0.0	0.0	D N/A	
Total Hospital	12.7	12.7	7 1.00	
Average Length of Stay (Days)				
Adult Medical-Surgical	2.9	2.9	9 1.00	
Obstetrics	1.9	1.9	9 1.00	
Pediatrics	0.0	0.0	0 N/A	

The FY Summary Report is a preview of the 3-page document that will be published in The Guide to Wisconsin Hospitals.

Action edits must have an explanation provided for the edit. If the edit brings attention to an error, surveys should be reopened and corrected before signing off.

Affirmation Summary Data FY Summary Report Action Edits Sign & Submit Affirmation Download / Reopen Surveys	2020 Survey Affirmation The following action edits were marked as accurate at th below for each questionable Action Edit in order to con If you would like to review the Action Edits in the survey changes are needed, the survey must be reopened. Once in order to regenerate a new Affirmation Statement.	nplete submissi y and/or make a	on of the one of the o	vey. An explar electronic affi sary changes	nation and/ rmation sta	/or reasoning is atement. eft tool bar "Dow	nload/Reopen Surv	e provided
Cancel	Question	Survey 202	0 2019	% Change	2018	Trend		
		ANNUAL 2,76		_		_/		
		FISCAL 3,29	3 93	3441%	120			
								Next



Surveys can be reopened in two ways. From the Download/Reopen page of the Affirmation or from the Survey Application.

Note: Once the affirmation is submitted, surveys must be reopened by WHAIC staff and the affirmation will need to be resubmitted.

Affirmation Summary Data	2020 Survey Affirmation	000-Wisconsin Hospital Association (Madison)
Action Edits Sign & Submit Affirmation	This section is optional. You may download a printable PDF of this affirmation or any survey: Survey Affirmation	n Statement   Download
Download / Reopen Surveys Cancel	If survey data needs to be changed, you can reopen the desired survey(s) by clicking the You can then make the changes at the Survey site. Reopening will close and reset this Annual Survey Only O Fiscal Survey Only O Annual and Fiscal Surveys O A Reopen the survey(s) and close this form	affirmation form.

00 - Wisconsin Hospital Association (Madison), FY End: 12/31 Hospital Survey Grid:			<u>Survey How-To</u>		
Enter/View Survey		Progress	Action Needed		
Continue	Open	4%			
New		0%			
New	Open	0%			
<u>View Only</u>	Closed Person	100%	🖕 Submitted		
New	Closed <u>Reopen</u>	0%			
	Continue       New       New       View Only.	Continue     Open       New     Open       New     Open       View Only.     Closed Reopen	Enter/View Survey     Progress       Continue     Open     4%       New     Open     0%       New     Open     0%       View Only.     Closed Reopen     100%		

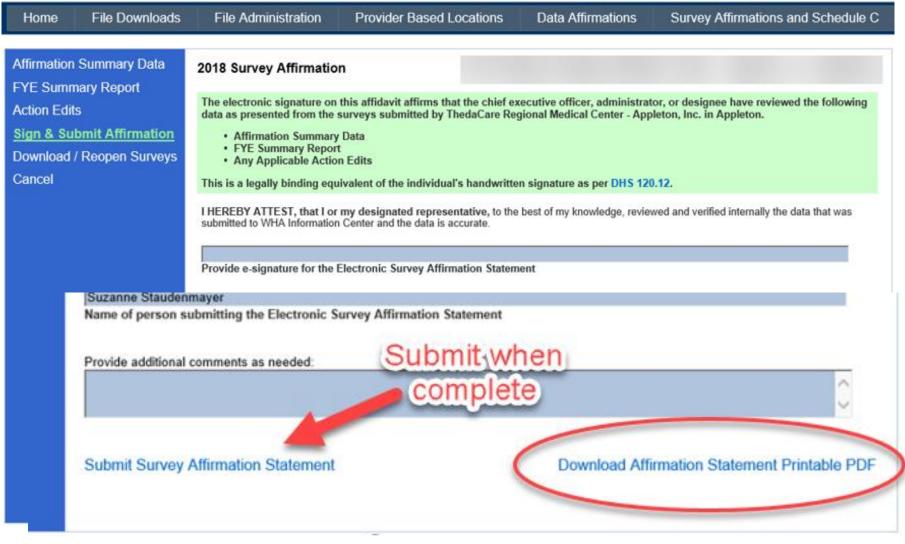


## **Affirmations & Schedule C**

Home	File Downloads	File Administration	Provider Based Locations	Data Affirmations	Survey Affirmations and Schedule C
FYE Sumn Action Edit Sign & Su	n Summary Data nary Report ts <u>ibmit Affirmation</u> / Reopen Surveys		this affidavit affirms that the chief ex urveys submitted by ThedaCare Reg Data		tor, or designee have reviewed the following eleton, Inc. in Appleton.
Cancel		This is a legally binding equi I HEREBY ATTEST, that I or is submitted to WHA Information Provide e-signature for the E Suzanne Staudenmayer Name of person submitting to Provide additional comments	administrator, signature attes and verified in may designate their behalf. T	or designee. Sts that the daternally by the someone to of the name of the can be different	provided by the CEO, The electronic ata has been reviewed e hospital. The signee electronically sign on he person submitting ent and will populate htials.
		Submit Survey Affirmation	on Sta		e provided to explain ne Action Edits page.



## **Affirmations & Schedule C**





### From this screen, you can also upload your schedule C. Click Upload.

Remember we need a copy of your schedule C only, not your whole cost report.



	ile Down					rmations	Survey Affin		and Sch	iedule C									
Select	ID			d Que	stions														
		Facili	ity Y					-11	ter for Yea	Survey Affirmations and Schedule C Definitions and Frequently Asked Questions									
Download	000			Year	FYE	Submitted	Approved By	Sche	lule C	Validated									
Dominouu	1	Wisconsin Hospital Association (Madis	on) 2	2018	12/31	7/23/2019	ttt	Yes		<b>~</b>									
Complete Affirmat	tion 001	Amery Regional Medical Center (Amer	y) 2	2018	12/31	No		No	Upload										
Complete Affirmat	tion 002	Aspirus Langlade Hospital (Antigo)		2018	06/30	No		No	Upload										
Complete Affirmat	tion 003	ThedaCare Regional Medical Center - Appleton, Inc. (Appleton)		2018	12/31	No		No	Upload										
Complete Affirmat	tion 004	Ascension St. Elizabeth Hospital, Inc. (Appleton)		2018	06/30	No		No	Upload										
Complete Affirmat	tion 006	Memorial Medical Center (Ashland)		2018	09/30	No		No	Upload										
Complete Affirmat	tion 007	Western Wisconsin Health (Baldwin)	2	2018	09/30	No		No	Upload										
Complete Affirmat	tion 008	St Clare Hospital & Health Services (Baraboo)		2018	12/31	No		No	Upload										
Complete Affirmat	tion 009	Mayo Clinic Health System – Northland	d in Barron (Barron) 2	2018	12/31	No		Yes	Upload										
Complete Affirmat	mation 010 Beaver Dam Community Hospitals Inc (Beaver Dam)		(Beaver Dam) 2	2018	06/30	No		No	Upload										



### As mentioned, we only need a copy of your Worksheet C, which looks like the example below. Some larger facilities have many more lines, but the layout is similar.

#### COMPUTATION OF RATIO OF COST TO CHARGES

WORKSHEET C PART I

	CHARGES							
	COST CENTER DESCRIPTIONS	Inpatient	Outpatient	Total (column 6 + column 7)	Cost or Other Ratio	TEFRA Inpatient Ratio	PPS Inpatient Ratio	
		6	7	8	9	10	11	
	INPATIENT ROUTINE SERVICE COST CENTERS							
30	Adults & Pediatrics							
	ANCILLARY SERVICE COST CENTERS							
62.30	BLOOD CLOTTING FOR HEMOPHILIACS							_
76	UNBUNDLING							
76.97	CARDIAC REHABILITATION							
76.98	HYPERBARIC OXYGEN THERAPY							_
76.99	LITHOTRIPSY							
	OUTPATIENT SERVICE COST CENTERS							
90.02	ADULT OUTPATIENT							
90.04	CATC IN-HOME, DAY TRMNT & OP							
91	Emergency							
92	Observation Beds (Non-Distinct Part)							
92.01	OBSERVATION BEDS-DISTINCT							
	OTHER REIMBURSABLE COST CENTERS							
200	Subtotal (sum of lines 30 thru 199)							
201	Less Observation Beds							
202	Total (line 200 minus line 201)							

## **On the Horizon**

Creating internal validation reports. Continue to evaluate edits. Review existing software for potential future transition. Training Videos

- Updating FAQ
- Revision of Uncomp and Personnel Manuals



# Any Questions?

## **Contact Information**

You can find more information online at:



www.whainfocenter.com



whainfocenter@wha.org



sstaudenmayer@wha.org

