

EW Residential Services Tips, Alerts, and Guidance

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Contact Information

For help with RS Tool completion, error emails, and reports

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For help with MMIS service authorizations

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For help with general issues and problems uploading to MN-ITS

1. First, review the section on [Handling Issue with Up-Loading CL Tools to MN-ITS](#)
2. If you are still unable to resolve the issue, contact the Provider Call Center at 651-431-2700 or 1-800-366-5411. Do not call between 12:00 P.M. and 12:45 P.M. as they are closed. When you get to the menu system:
 - Select 1 for provider help line.
 - Next, select the choice for the selection corresponding to your NPI or UMPI number (1, 2 or 3). You will be asked to enter your provider number (do not enter anything for a leading letter. Only enter the digits).
 - After you have entered your provider number, select 4 for waiver help.
3. Finally, if you have contacted the Provider Call Center and are still unable to resolve the issue, contact Cher Rudolph at either (651) 431-3305 or Cheryl.Rudolph@state.mn.us

Useful Links

EW CL Tool Main DHS Web Site

[EW Customized Living, Foster Care and Residential Care Website](#)

[Comprehensive Policy on Elderly Waiver \(EW\) Customized Living Bulletin](#)

[EW Residential Services Workbook](#) for download

[Instructions for Completion and Use of Residential Services Workbook \(PDF\)](#)

[Customized Living Component Service Definitions Guide \(DHS-6790-H-ENG\)](#)

[EW Residential Services Tools Instructions \(PDF\)](#) for uploading RS Tools to MN-ITS

[EW Residential Services Tools Release Notes \(PDF\)](#)

[EW Residential Services Workbook \(PDF printable copy\)](#) (Not for submission!)

[Instructions for finding the HFID Number for Housing with Services Establishments](#)

MMIS Documentation

[Instructions for Completing and Entering the LTCC Screening Document and Service Agreement \(DHS 4625-ENG\)](#)

MMIS Service Agreement Approval Process EW Customized Living Services

Instructions for newly entered suspended service agreements

1. Initial suspended service agreement posts edits 140 and 414 on customized living (CL) line item(s) T2030 or T2030 with modifier TG. Edit 414 prevents lines from being approved and will route the service agreement for DHS review when it is saved. While the lines may be changed to a pend or deny status by the worker, the line status must remain in a suspended (S) status for edit to post.
2. Case manager may approve all other services except for CL lines. A letter will be sent for other approved, pend, or denied services if the header status is a T. In order for the service agreement to route to DHS for review of the CL lines, *the following day*, the header status must be either S or T. All other edits *except* for 140 and 414 and any edits with a status of 6 (informational) needs to be resolved.
3. Edit 414 routes the service agreement to DHS queue the following day. You can see that it has routed successfully by viewing the service agreement in inquiry (NOT C mode). The ASA1 screen will show CURR LOC/DT 584 (date) in the top right hand corner.
4. DHS staff has up to five working days to review the CL lines against the workbook. There are three outcomes.
 - a. Approve line
 - b. Suspend line
 - c. Deny line
5. For item b, DHS staff will:
 - a. Make a determination that the workbook does not support the service agreement line item(s).
 - b. Add the county of service code to the OVR LOC field on the ASA2 screen in order to route the service agreement to the lead agency's queue. A message is added to the DHS Comments Screen indicating why the line(s) cannot be approved.
 - c. Keep the header status as Suspend (S) or Partially Suspended (T) if other lines are approved.
6. Case manager checks for the service agreement in their agency queue or in inquiry mode using the PMI number or authorization number. If the ASA1 screen shows CURR LOC/DT (agency's 3 digit code) (date) in the top right hand corner, the review was completed. If the CLS lines were not approved:
 - a. Check the DHS Comment Screen for an explanation of what prevents the lines from being approved.
 - b. Make correction to the workbook and/or service agreement. Resubmit a new or corrected workbook as needed.
 - c. Keep the CL line(s) on the service agreement in a suspended status.
 - d. Delete your agency code or enter "584" into the OVR LOC field on the ASA2 screen of MMIS.
 - e. Edit 414 posts to allow the service agreement to re-route to DHS for review.
 - f. Header status must remain in Suspense or Partially Suspended.
 - g. Add a message to the DHS Comments Screen indicating what correction was made.
 - h. Save the service agreement.
 - i. DHS staff has up to five working days to review. Once the CL lines are changed to a pend, approved, or deny status and the header status is changed from suspense, letters will be sent for the CL lines.

Instructions for approved or pended service agreements when a new line for CL is added

1. The approved or pend service agreement posts edits 414 and 140 on CL line item(s) T2030 or T2030 with modifier TG. Edit 414 prevents lines from being approved. While the line may be changed to a pend or deny status by the worker, the line status must remain in a suspended (S) status for edit to post.
2. Case manager must change the header status to T. Keep the CL line items in a suspended status. Correct all edits except for 414. 140, and any edit in a 6 – informational status. Save the service agreement which routes to the DHS queue overnight.
3. All instructions beginning with item 3 above is applied to these service agreements.

Finding the HFID for a Housing with Services Establishment

1. Go to the [Minnesota Department of Health's provider directory webpage](#). You may want to bookmark this page for ease of reference in the future.
2. Complete the three steps in the box below:
 - Select 'Housing With Services' in the provider type dropdown box.
 - Select additional criteria to focus search: by county, city or provider name.
 - Click 'Submit'.

3. The HFID is the 5 digit ID listed in the left-hand column (See below).

ID	Provider Information
11111	<p>Name: Homes R US Address: 304 First Ave Niceville MN 55999 Phone: 555-555-5555 Fax: 555-555-5556 Administrator: MS. MERRY HOUSE</p> <p>Minnesota Classifications: (Housing With Services) (*See Note Below)</p>
99999	<p>Name: CASTLES R US Address: 305 Defense Drive Remoatville MN 55999 Phone: 555-555-5557 Fax: 555-555-5558 Administrator: Lance Knight</p> <p>Minnesota Classifications: (Housing With Services) (*See Note Below)</p>

Tool Request Protocol

If you are getting a client for whom you believe a Residential Services Tool (RS Tool) should have been completed, you can save time if you can work with the electronic workbook and not a printout of the RS Tool. Below is a list of steps you should follow to obtain a copy.

1. Ask the prior case manager to send a copy by encrypted email or other secure means. They are required to do this as part of the transfer.
2. If the prior case manager has deleted the RS Tool, or if they have no means to get it to you securely, have the prior case manager send DHS an email requesting the RS Tool be sent to you. The requesting email should:
 - Indicate the reason for sending the RS Tool.
 - The client's PMI#, DOB, and approximate date the last version was submitted to DHS. Do not send other detailed client information unless it is by secure method.
 - Contact information of the person and organization to whom the RS Tool should be sent, including an accurate email address.
1. If the prior case manager will not cooperate, you may request the RS Tool yourself. Send a SECURE email with **all** of the following:
 - A copy of the Print RS Plan, if you have it
 - The client's name
 - PMI
 - DOB
 - A statement of the reason you are requesting the RS Tool be sent
 - A statement you have attempted and failed to get the RS Tool directly from the prior case manager
 - A statement indicating you have the authority to receive the client's information
 - Your *complete* contact information

We will attempt to locate the RS Tool and respond by secure email.

We realize this is a bit of trouble to go through these steps, but it will ensure HIPAA compliance.

We would also like to point out that while you may start with the previous RS Tool, we expect you to review it in detail and make your own independent assessment of the client's needs and how they can be best met.

Up-Loading RS Tools to MN-ITS

When uploading corrected or modified Residential Services Tools (RS Tools) to MN-ITS, if you get an error telling you the file already exists, you have already sent a file with the name of the file you are trying to upload. Simply change the name slightly and try again. You might add a 'b', 'corrected', or other indicator to the end of the name. If you include the date in the file name you might change it to the date of the correction. The choice is up to you and can be whatever is most meaningful to you in tracking your changed submissions.

NOTE: You will want to periodically open the 'Production Failed' folder in your MN-ITS email account. If you find RS Tool files in this folder, you will know you accidentally sent the workbooks to the Production rather than Miscellaneous folder. You will need to properly resubmit the RS Tool or it will show up as a missing RS Tool on the Rate Validation Analysis Report.

Occasionally, other unusual errors occur when attempting an upload. These are generally of two types:

1. Sometimes only the Production folder option is available. **Do not use this option.** You should always upload to the Miscellaneous folder when sending RS Tools, not the Production folder. Closing the browser and re-trying often helps.
2. You get a message that there was an error in uploading the file and a suggestion you try again later.

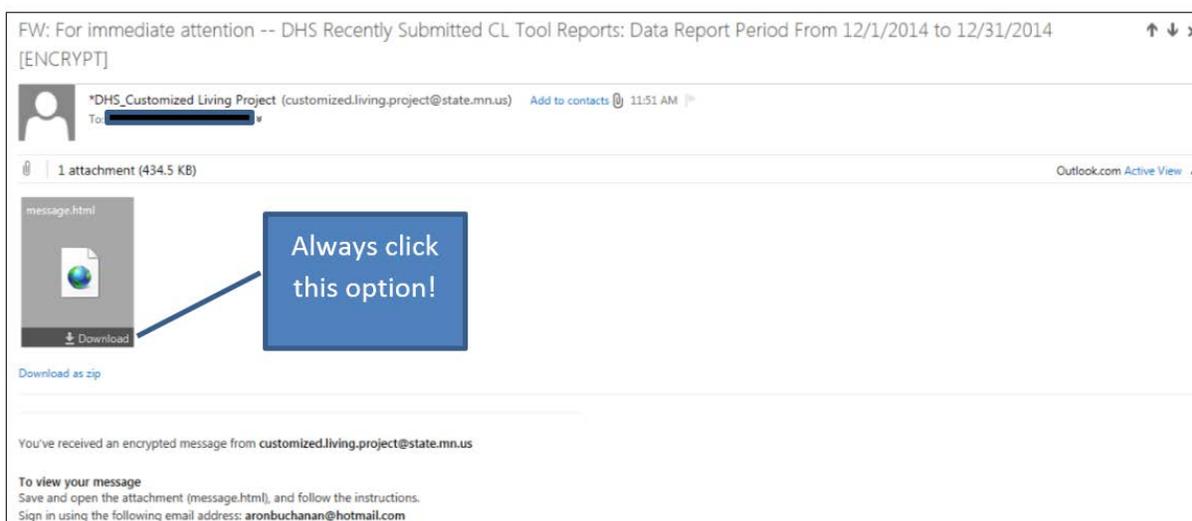
When these situations occur, try the following:

1. Close your browser and wait at least 15 minutes. Re-open and try the operation again.
2. If the error persists, you will need to clear the browser cookies, close the browser, reopen, and try again. To clear the cookies, follow these steps:
 - Click Tools at the top of your browser.
 - Next pick Internet Options
 - Under Browsing History click Delete.
 - Choose Delete Cookies.
 - Confirm the deletion.
 - Close
 - Click OK
 - Close the browser
 - Reopen
 - Try the upload again.
3. If you still have issues, contact Cher Rudolph with MN-ITS at either (651) 431-3305 or cheryl.rudolph@state.mn.us

Secure Emails

Opening Secure Emails

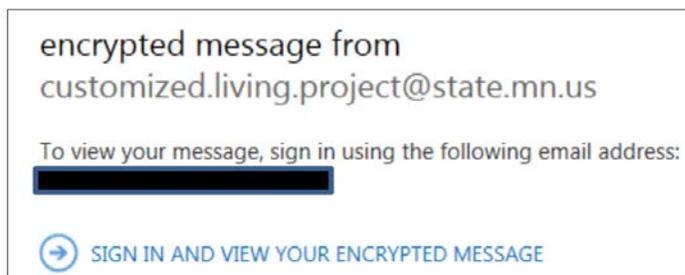
In order to ensure privacy, DHS utilizes Microsoft Office 365 Message Encryption service. When you receive an encrypted email from DHS, be sure to choose the Download option when opening attachments.



You will then see a File Save Dialogue box similar to what's displayed below. Click 'Save,' and then click 'Open.'



The following will then display. Click 'Sign In and View Your Encrypted Message.'



You will then see the following display. Click 'Microsoft account.'

Which account would you like to sign in with to view your encrypted message?

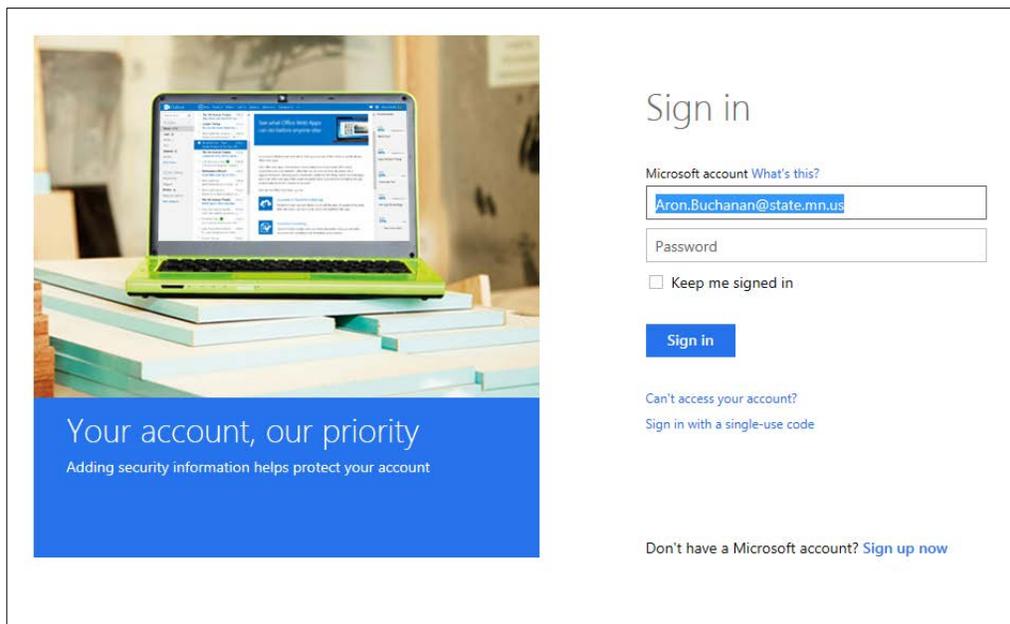


Microsoft account
Sign in with the account you use for OneDrive, Xbox LIVE, Outlook.com, or other Microsoft services.



Organizational account
Sign in with the account provided by your work or school to use with Office 365 or other Microsoft services.

Sign in with your password. If you do not have a password, click the 'Sign up now' link, create your account, and then go back to the email to open it.



Sign in

Microsoft account [What's this?](#)

Keep me signed in

[Sign in](#)

[Can't access your account?](#)
Sign in with a single-use code

Don't have a Microsoft account? [Sign up now](#)

Secure Email Troubleshooting

If you have trouble with accessing the secure emails you receive from DHS or have difficulties with opening the attachments within the email, **please follow all of the below suggestions before contacting DHS for assistance.**

1. Contact your IT Department for assistance and have them check to make sure any security settings are not interfering with opening emails or attachments.
2. Make sure the 32 bit version of Microsoft Office, not the 64 bit version, is installed.
3. In order to read an encrypted message, you must use a web browser to access specific sites. Because web filtering of Internet content is standard practice for organizations today, some organizations that block web based email and collaboration may not be able to view encrypted email messages. In order for organizations to be able to view an encrypted message through the

message viewing secure portal, the following URL's will need to be allowed in the recipient organizations web content filtering solution.

- <https://outlook.office365.com>
 - <https://signup.live.com>
 - <https://account.live.com>
 - <https://login.live.com>
 - <https://login.micorsoftonline.com>
4. If you are unable to login, you can request support from Microsoft at the [Microsoft Password Reset Site](#).
 - Chose the "I know my password, but can't sign in" option.
 5. If you are unable to open the attachments, the issue is likely due to the web browser you are using. According to Microsoft, Office 365 is designed to work best with the current or previous versions of Internet Explorer, Firefox, Chrome, or Safari. Microsoft provides code fixes for these versions only and recommends upgrading your browser to the latest browser version for full functionality. Version 8 of Internet Explorer, in particular, is noted to have diminished user experience. Full Office 365 system requirements are found in [Microsoft's Library](#).
 6. Review [Microsoft Office 365 Message Encryption FAQ's](#)
 7. Review [Microsoft Support's Troubleshooting Guide](#)
 8. Contact Microsoft Office staff for technical assistance by:
 - Clicking the before mentioned link, then
 - Choose the 'Contact Answer Desk' option, then
 - Choose "Services and apps" then
 - Choose "Office or Office 365 for Windows," then
 - Choose "Technical support," then
 - Choose your preferred method for discussing the issue with Microsoft.

You can also contact Microsoft Office Support by phone at 1-866-425-4826 and their Professional Support Department can be contacted at 1-800-936-4900. To receive technical assistance from the Professional Support Department you will need your Microsoft Office Agreement Number or SA Access ID Number. If you do not have an Agreement Number or SA Access ID Number, Microsoft can discuss your options in order to receive their technical assistance.

Residential Services Tool Load Successful Emails

When a RS Tool is successfully processed at DHS, you will receive an email to let you know the tool you submitted for the recipient has been loaded successfully. This email shows:

- The file name (the MN-ITS account number through which the Tool was submitted is prepended)
- The recipient's PMI
- The rate start date
- Monthly RS rate

Do not forget to send copies of the RS Plan and Rate Guide to both the recipient and the provider.

The RS Tool is valid and there is nothing more you need to do with this tool at this time.

Watch for this recipient and tool in the next Recently Submitted Tools report. You will see this recipient and the values we have loaded from the current tool. Make certain all data, such as dates, provider, health plan and rate are as you expect. This is necessary because the tool you submitted may have errors you did not notice when submitted.

Handling DHS Load Error Emails without Prior Period Rate Errors

If DHS is unable to load a submitted RS Tool, you will receive a load error email explaining DHS had problems loading the attached RS Tool, the RS Tool was not accepted, and the client's rate is not valid. The RS Tool will need to be corrected and resubmitted through MN-ITS. If you do not correct the RS Tool and resubmit it through MN-ITS, the client will appear on the Missing Tools Report. You will get one error email for each RS Tool you submit in error on a client.

Determining What Data Load Errors are Being Reported

To determine what errors are being reported in the error email, refer to the Error Report in the RS Tool or the error message reproduced in the body of the error email.

Load errors occur when the information entered about you, the client, or the provider does not match data in MMIS or the MDH provider file. A typical error message looks like this:

1.) Mismatches with MMIS Client Data were Found: Unless RS Tool values were blank, we kept the values on the RS Tool. If these are wrong you need to correct them and use the MMIS values in the future to avoid this error. If the PMI on the CL Tool is correct, you may override this error using the Validate OK button.

MMIS Address= 2574 Dunlap St N -- Tool Address= 3801 Hart Blvd Ne
MMIS City= Roseville -- Tool City= Columbia Heights
MMIS ZipCode= 55113 -- Tool ZipCode= 55421

What You Need To Do

In order to properly handle load error emails, follow these steps:

1. You must edit the *attached* file you received in the load error email, not the original.
2. Double check the ID values (PMI, NPI, HFID) and make certain there are no errors in the number.
3. Correct any errors found in the tool. Corrections are made by providing data matching the MMIS and/or MDH data provided in the Error Report and the email. You can copy and paste from the error message in the body of the email or simply type the corrections in the RS Tool. The main concern is to ensure the ID values (PMI, your NPI, the provider HFID) are correct.
4. Correcting the RS Tool data is preferred but the MMIS or MDH data can be wrong or inappropriate at times. For example, the client's address in MMIS may be for a relative and the RS Tool address is the client's residential address. If the data on the RS Tool is more correct or appropriate, leave the RS Tool data as is and validate the error as okay to ignore by using the Validate OK to Ignore Data Load Errors button found on the Error Report worksheet. This will clear the load errors on the Error Report and the tab should be white.
5. Once corrections are complete, you should save the RS Tool using a slightly different name (perhaps changing the date, or adding a 'B' at the end of the name). Leave the .xlsm extension intact. Resubmit this edited RS Tool version through MN-ITS in the usual manner.

On future RS Tools, use the data as corrected and validated to avoid returned RS Tools.

NOTE: There are a couple of cases when you will get an error email and there may be no real error. You still need to validate the error is okay to ignore and resubmit the tool, but no correction may be needed or possible:

- If you left the HFID blank and we could match the provider name and zip code, we used that information to automatically provide an HFID. You will get an email letting you know the HFID we found. You should verify it if possible, and use it on future RS Tools.
- You requested an AutoGen HFID using the Over Ride Limits button. We will send you the requested HFID for your use on future RS Tools until an actual HFID becomes available.
- Finally, the same applies for provider NPIs. If an AutoGen value or other match was possible, we will send you an email with the information to verify.

In these three cases, provide the correct HFID or NPI if it is now available, or use the supplied one in the future. You will not receive new error emails if you do so.

Handling DHS Load Error Emails with Prior Period Rate Errors

If DHS is unable to load a submitted Residential Services Tool (RS Tool) with an incorrect prior period rate (PPR), you will receive a load error email similar to the standard load error email which will need to be handled similarly with the addition of needing to address the prior period rate. If a valid DHS rate is currently on file, it is shown in the Error Message section of the body of the email. If no valid DHS rate was found, this is indicated and the rate as submitted in the current RS Tool is shown. Check the values shown in the Error Message section.

Causes of DHS Prior Period Rate Data Load Errors

The PPR should always be verified and entered accurately. Only certain conditions will trigger a prior PPR error email being sent to you. For the RS Tool to be rejected and a prior period rate error to be included in the returned RS Tool, all three of the following conditions must occur:

1. For customized living services the tool Prior Rate Use field must be set to 'Apply for this Provider.' For adult foster care or residential care, the Has Prior Tool field must also be set to 'yes.'
2. There is no rate on file at DHS or the last valid rate does not match the value you provided (is not within \$2.00 of matching).
3. Other standard DHS load errors must have occurred.

What You Need To Do

In addition to fixing the other standard DHS load errors and validating the changes/retained values, the following needs to be done:

If the service start date is the first of the month:

- The prior period rate (PPR) on the RS Tool does not affect the rate for the first month of service.
- Check the PPR on the RS Tool. If the rate is in error, correct it in the RS Tool. The RS Tool does not need to resubmitted to DHS.
- If the PPR is correct on the RS Tool, then this indicates there is a missing RS Tool that needs to be submitted. If the missing tool was completed by a prior lead agency and you do not have the tool, as a courtesy, contact the prior lead agency to inform them the tool is missing and needs to be resubmitted.

If the service start date is other than the first of the month:

- The PPR affects the rate for the first month of service.
- Check the PPR on the RS Tool. If the rate is in error, correct it in the RS Tool, reprint the Rate Guide and Individual RS Plan to give to the client and provider, and correct the authorization for the first month of service. The RS Tool does not need to resubmitted to DHS.
- If the PPR is correct on the RS Tool, then this indicates there is a missing RS Tool that needs to be submitted. If the missing tool was completed by a prior lead agency and you do not have the tool, as a courtesy, contact the prior lead agency to inform them the tool is missing and needs to be resubmitted.

If the PPR does not apply for the provider or a RS Tool has never been completed for the client:

- There should be no prior period rate.
- Set the Prior Rate Use field to 'None or doesn't apply.'
- Clear the prior period rate in the RS Tool and resubmit the RS Tool to DHS with this correction.
- If the service start is other than the first of the month, the rate for the first month of service will change. Reprint the Rate Guide and Individual RS Plan to give to the client and provider and correct the authorization for the first month of service.

Handling DHS Prior Period Rate Error Warning Emails

If a RS Tool is submitted with a prior period rate error but no other load errors, you will receive a warning email indicating the RS Tool was accepted and the client's monthly rate is valid. You will need to address the prior period rate error or the client may appear on the next Missing Tool Error Report and/or you may have authorized the wrong first month's rate. This corrective action may involve correcting the value in the RS Tool and reprinting the Rate Guide and Individual RS Plan or submitting a missing RS Tool. Further instructions are presented in the next section.

Causes of DHS Prior Period Rate Data Load Errors

The PPR should always be verified and entered accurately. Only certain conditions will trigger a prior PPR error email being sent to you. For the RS Tool to be rejected and a prior period rate error to be included in the returned RS Tool, the following conditions must occur:

1. For customized living services the tool Prior Rate Use field must be set to 'Apply for this Provider.' For adult foster care or residential care, the Has Prior Tool field must also be set to 'yes.'
2. There is no rate on file at DHS or the last valid rate does not match the value you provided (is not within \$2.00 of matching).

What You Need To Do

If the service start date is the first of the month:

- The prior period rate (PPR) on the RS Tool does not affect the rate for the first month of service.
- Check the PPR on the RS Tool. If the rate is in error, correct it in the RS Tool. The RS Tool does not need to resubmitted to DHS.
- If the PPR is correct on the RS Tool, then this indicates there is a missing RS Tool that needs to be submitted. If the missing tool was completed by a prior lead agency and you do not have the tool, as a courtesy, contact the prior lead agency to inform them the tool is missing and needs to be resubmitted.

If the service start date is other than the first of the month:

- The PPR affects the rate for the first month of service.
- Check the PPR on the RS Tool. If the rate is in error, correct it in the RS Tool, reprint the Rate Guide and Individual RS Plan to give to the client and provider, and correct the authorization for the first month of service. The RS Tool does not need to resubmitted to DHS.
- If the PPR is correct on the RS Tool, then this indicates there is a missing RS Tool that needs to be submitted. If the missing tool was completed by a prior lead agency and you do not have the tool, as a courtesy, contact the prior lead agency to inform them the tool is missing and needs to be resubmitted.

If the PPR does not apply for the provider or a RS Tool has never been completed for the client:

- There should be no prior period rate.
- Set the Prior Rate Use field to 'None or doesn't apply.'
- Clear the prior period rate in the RS Tool and resubmit the RS Tool to DHS with this correction.
- If the service start is other than the first of the month, the rate for the first month of service will change. Reprint the Rate Guide and Individual RS Plan to give to the client and provider and correct the authorization for the first month of service.

Understanding and Responding to Monthly Management Reports

DHS sends monthly management Excel reports containing data on submitted RS Tools for lead agency use. The first four reports (tabs) require your attention and action to make certain authorizations for provider payment are correct and any missing tools are properly submitted. The remaining reports are summary information to help monitor rates and costs of the service. These will often show summary statistics for all clients and then the same information on your clients only. The first four reports are:

- Rate Validation Analysis Report
- Rate Validation Analysis Report Sorted First by Case Manager NPI
- Paid Clients Without Any Tools Submitted by Case Manager Report
- Tools Recently Submitted and Accepted at DHS by Case Manager Report

The reports provide information on the rates submitted and approved at DHS, the amounts the provider has been paid each month, and missing RS Tools.

The reporting period is shown at the top of each report. The date the reports were run is part of the Excel file name. The following sections review each of the first four reports in detail, and provide a general overview of the remaining reports.

Rate Validation Analysis Report

Report Purpose

1. Show, for each client, the amount paid each month and the rate documented and allowed on RS Tools submitted to DHS.
2. Identify clients for whom we have received no RS Tool and allow identification of rate changes made without RS Tool documentation.
3. Identify providers who were over paid.

Client Selection

The reports are specific to each lead agency. A client is determined as belonging to your health plan if the last RS Tool submitted shows your health plan in the Health Plan field. If the Health Plan field is set to none, in the case of fee-for-service clients, the report is sent to the client's county of residence. If the RS Tool is missing or no health plan is provided on the RS Tool, the last paying agency is used. All payment information on the client is shown. This means some payment and RS Tool authorized amounts may be from a previous payer. This is fairly common, but the previous payer is most often the county.

A client is included in the report if payments for the client are found in the DHS claims or encounter data during the data reporting period shown in the report title area. Only final EW claims for customized living services, adult foster care, and residential care are included.

If residential services are paid for a client, DHS expects a RS Tool to document the rate. If a RS Tool is not found, it is considered missing. Typically, many missing RS Tools are identified, so we attempts to focus on claims with more significant charges in two ways. First, clients must have had at least two months of claim data. Second, the total of all claims must exceed \$300.00.

RS Tools where the total amount allowed and the total amount paid is within a few dollars are not reported.

Report Content

For each client, a thirteen month time span detailing the monthly amount the RS Tool on file supports and the monthly amount paid in MMIS or submitted in encounter data is shown. A summary total for the amount the RS Tool(s) on file support versus what was paid is displayed, with the overall difference between these two amounts shown on the 'Amt Over Allowed' line.

'Amt Over Allowed' amounts in parenthesis () indicate the provider was paid less than what the RS Tool(s) would have permitted. An 'Amt Over Allowed' without () indicates an overpayment, which requires heightened attention. Blank or \$0.00 months indicate no payment was made or no tool justifies an amount for the month. As time goes on, these columns will be filled with paid amounts and new monthly columns will be added. Tool allowed amounts will be filled in as missing tools are submitted or tool corrections are submitted.

An OK check box is provided for your use to indicate the resolution status of each client.

Information is organized into two sorted sections down the page.

- The first section shows clients with large overpaid amounts (positive 'Amt Over Allowed' values). These overpaid amounts are shown in descending order so the largest problems are at the top of the report.
- The second section shows clients with large underpaid amounts (negative 'Amt Over Allowed' values). These underpaid amounts are shown in descending order so the largest problems are at the top of the section.

If the difference between allowed and paid is less than \$25.00, the client is not reported.

Report Use

- Missing RS Tools may be identified using the report. Missing RS Tools can be of two types:
The first is most serious and should be the first area to focus attention (These are listed again in the 'Tools Never Submitted' report where they are easily viewed). These clients had at least two months and \$300.00 of payments during the reporting period and DHS has never received a RS Tool. These can be easily identified using the third column the report. They will have CL Tool allowed values of \$0.00. These RS Tools must be submitted on the latest version of the RS Tool ASAP.
The second class of missing RS Tools is harder to identify. When the amount allowed differs from the amount paid (either under or over) the rate may have changed and a RS Tool to document the change has not been submitted. These problems should be your next focus.
Many times, case managers do submit an RS Tool, but the tools cannot be processed as submitted. Reasons for this include: tools with load errors, tools without "EWCL" in the file name, tools loaded to MN-ITS Production folder instead of the correct Miscellaneous folder. In any case, the RS Tool is missing, and it must be corrected and properly re-submitted on the latest version of the RS Tool ASAP.
- Possible overpayments can be identified when the paid amount exceeds the allowed amount. Several reasons may exist, for example, improper amounts were authorized in your system for payment, or a tool justifying the new rate may be missing.

- Possible underpayments can be identified when the paid amount is less than the allowed amount. For example, improper amounts were authorized in your system for payment, a RS Tool justifying a new, lower rate may be missing, the provider properly reduces billing to reflect days absent, or the amount billed was reduced to reflect a client's spend-down obligation.

What You Need To Do

1. First, correct over payments:
 - Submit totally missing RS Tools. Begin at the top of the report and address large total over payments first and then work down the list. If there was a prior CM who should have submitted the RS Tool, please contact them and let them know they have a missing RS Tool that must be submitted.
 - Then, submit missing RS Tools to justify rate changes.
 - Correct authorizations so future payments do not continue to create errors and cost money.
 - Correct errors in your payment system and/or submit, or resubmit, encounter claims data (if needed) so correct data is in the encounter claims.
2. Next address under payments:
 - You need to address these if the under payment is the result of a missing RS Tool that would have lowered the rate. These missing RS Tools must be submitted.
 - You need to address missing MMIS exit documents, or if the client is no longer receiving a residential service but did not leave EW, you must submit and Exit RS Tool.
 - Other errors may be ignored, unless you stumble on a client where the amount authorized is less than what is allowed on the RS Tool. In general, we expect providers to spot and address these errors, but fixing the problem is a courtesy and assures the provider is paid appropriately.

Rate Validation Analysis Report Sorted First by Case Manager NPI

This report has the same information as the Rate Validation Analysis Report, but it is sorted first by case manager NPI so each case manager can view and work on their clients in problem priority order. Follow the same action steps to handle this report as the Rate Validation Analysis Report.

Paid Clients Without Any Tools Submitted by Case Manager Report

This 'Tools Never Submitted' report lists, by case manager, clients for which there were at least two months and \$300.00 of payments during the reporting period and DHS has never received a RS Tool. The months for which tools are missing are delineated on the previous two reports. Follow the same action steps to handle this report as the Rate Validation Analysis Report.

Tools Recently Submitted and Accepted at DHS by Case Manager Report

Individual case managers receive a monthly Recently Submitted Tools Report for their clients. This report compiles all of these reports for every case manager with your lead agency. The report contains data on RS Tools accepted for the month prior to when you receive the report (the exact time period is shown at the top of the report). This report is meant to give you feedback on the RS Tools successfully submitted and the rate approved for the client. The report is sorted by case manager and then by load date.

When a RS Tool is submitted through MN-ITS, several problems can occur which prevent the successful loading and acceptance of the RS Tool. These include technical problems, file naming errors, submitting a file that is not a RS Tool, failing to provide a valid email address, or load errors.

In many cases the system detects an error and sends the case manager a Tool Load Error email. If properly corrected and re-submitted, the RS Tool will then load. When the case manager does not receive an error email, they may assume the RS Tool loaded properly. However, the system is not able to detect every error, so this is not a safe assumption. Often the first time a case manager learns a RS Tool they thought they submitted is missing is when it is listed in the 'Tools Never Submitted' report or indicated in the 'Rate Validation Analysis Report' report sent monthly. These large reports make corrections hard to spot. By getting a list of successfully loaded and accepted RS Tools on a monthly basis, the case manager can verify the acceptance of all RS Tools and be able to resubmit RS Tools that are missing.

Report Use

Review your internal information about tools you believe were submitted during this time period, and find the submitted RS Tool on the report. You can do this by PMI, client name, or file name. Note that MN-ITS prepends the MN-ITS account number to the file name at time of submission. The file name on your system should match the part after the first number.

Once you find the RS Tool(s), check the assessment change, assessment effective, and service start dates. Finally check the rate. Make certain all these items match the RS Tool you wanted to be accepted. This is necessary because if the 'Are you making a correction' field is marked improperly or multiple RS Tools are submitted in the wrong order, the system may have picked the wrong RS Tool to accept.

What You Need To Do

If you find an error in a submitted RS Tool or you find a RS Tool is missing, make certain you get the RS Tool into the most current version and submit it, or re-submit it, with any corrections.

Remaining Summary and Management Information Reports

Tabs 5 through 16 include the remaining reports, which show summary information or information to better manage the service in general. These require no immediate action but may be used to inform training service authorization in the future.

Two broad categories of reports may be seen. The first type includes all clients statewide with service start dates in the reporting period. The companion report provides the same information, but for your clients only.

Following is a list of the reports:

- Tabs 5 and 6: Summary Major Service Level Cost by Case Mix-All Clients (and then your clients)
- Tabs 7 and 8: Summary Delta Statewide Totals to Date-Overall (and then your clients)
- Tab 9: Summary Delta Urban Rural-Overall
- Tab 10: Listing of Your Clients Other Services Costs by Case Manager
- Tabs 11 and 12: Summary Delta Statewide Totals To Date: By Case Mix: All Cases Mixes Regardless of Change (and then your clients)

- Tabs 13 and 14: Summary Delta Statewide Totals To Date-By Case Mix: Case Mixes Unchanged from Prior Year (and then your clients)
- Tabs 15 and 16: Summary Delta Statewide Total To Date-By Case Mix: Case Mixes Changed from Prior Year (and then your clients)

Where a prior rate, current rate, and change are reported; the data was selected and reported as follows:

- DHS takes the most recently submitted RS Tool and calculate the rate being paid at the reporting period end date. This represents the cost of the program now.
- DHS finds the RS Tool that was in effect one year before the latest tool's service start date and calculate the rate that was being paid at the reporting period start. This is used as the prior rate.
- If a RS Tool that is not from at least one year ago does not exist, we try to find the oldest prior RS Tool. This is used to determine the prior rate.
- If no other RS Tools exist, the client is not included in the report.

The 'Summary Major Service Level Costs by Case Mix' reports display data on major service area by case mix. The major services are comprised of individual component services listed in the as indicated in the [CL Component Service Definitions Guide](#).

RS Tool Service Levels - Current 65th to 95th Percentile Standards

The following table displays the 65th, 75th, 85th, and 95th statewide percentiles for each component service and case mix. The time entered for each percentile represents the percentage of clients with less time planned for that particular component service. For example, the 65th percentile for light housekeeping for a case mix A is 4.698. This means that 65 percent of case mix A clients with this component service planned for have less than 4.698 hours planned per month.

Case Mix	Component Service	65 th Percentile	75 th Percentile	85 th Percentile	95 th Percentile
A	LtHseKeeping	4.698	5.067	5.067	7.6
A	HvyHseKeeping	2.165	3.17	4.33	4.33
A	Laundry-Pers	3.248	4.33	4.33	5.773
A	Laundry-linen	2.165	2.165	3.248	4.33
A	Shopping	2	2.165	3.198	4.33
A	MealPrepOwnUnit	7.6	10.133	15.2	17.365
A	MakeAppointment	0.5	0.5	1	2.165
A	MoneyMan	1	1.083	2	4.33
A	ArrgNonMedTrans	0.5	0.5	1	2
A	Socialization	4.09	5.544	8.187	13.359
A	Dress/Groom	10.133	10.133	15.2	15.2
A	Bathing	4.33	4.33	6.495	8.66
A	Continence Care	5.067	7.6	10.133	15.2
A	Positioning	4.4	5.067	5.067	7.803
A	Eating	10.133	10.133	15.707	22.8
A	Walking	9.987	10.133	15.2	20.267
A	Wheeling	5.067	7.22	10.132	15.2
A	Transferring	5.067	5.067	7.6	10.133
A	MedAdminSetup	12.667	15.2	15.2	22.8
A	Verb/Vis MedRem	7.6	10.033	12.316	15.2
A	InsulinInject	7.6	7.6	10.133	12.667
A	TherapyExcer	8.66	10.133	10.884	15.2
A	DelegateClinMon	5.067	6.08	7.6	10.133
A	OtherServices	4.33	5.078	7.6	12.854
A	MedSetupMon	2.165	2.165	3.248	4.33
A	Insulin Draws	2.533	3.144	5.067	7.6
A	Wander/Orient	5.067	7.6	7.6	12.667
A	Behavior	5.067	6.498	7.6	13.197
A	OtherCognitive	4.737	5.067	5.067	7.6
A	Combined Service Levels	45.441	52.758	61.273	68.655
B	LtHseKeeping	5.067	5.067	7.564	7.6
B	HvyHseKeeping	2.165	3.248	4.231	4.33
B	Laundry-Pers	3.248	4.33	4.33	6.495

Case Mix	Component Service	65 th Percentile	75 th Percentile	85 th Percentile	95 th Percentile
B	Laundry-linen	2.165	2.165	3.248	4.33
B	Shopping	1.583	2.165	2.533	4.33
B	MealPrepOwnUnit	7.6	10.133	15.2	20.267
B	MakeAppointment	0.5	1	1	2
B	MoneyMan	1	1.083	1.85	3
B	ArrgNonMedTrans	0.5	0.75	1	2
B	Socialization	6.238	8.453	11.259	18.416
B	Dress/Groom	10.133	14.262	15.2	17.733
B	Bathing	4.33	4.33	6.495	8.66
B	Continance Care	7.6	10.133	15.2	22.8
B	Positioning	2.533	4.966	5.067	7.6
B	Eating	15.2	15.2	22.8	25.333
B	Walking	9.336	10.133	15.2	15.2
B	Wheeling	5.067	7.6	10.133	15.2
B	Transferring	5.067	5.067	7.6	10.133
B	MedAdminSetup	15.2	15.2	20.267	25.333
B	Verb/Vis MedRem	10.133	10.133	15.2	20.267
B	InsulinInject	7.6	10.021	10.133	15.2
B	TherapyExcer	10.133	10.133	11.976	15.2
B	DelegateClinMon	6.149	7.6	10.133	12.667
B	OtherServices	5.067	7.097	10.133	15.7
B	MedSetupMon	2.165	3	4.053	5.067
B	Insulin Draws	2.533	2.533	4.885	6.207
B	Wander/Orient	9.35	10.494	15.2	22.8
B	Behavior	10.133	15.2	15.2	29.319
B	OtherCognitive	7.6	7.6	12.667	18.448
B	Combined Service Levels	71.039	78.192	82.449	87.004
C	LtHseKeeping	5.067	5.559	7.6	8.66
C	HvyHseKeeping	2.165	3.248	4.33	5.294
C	Laundry-Pers	4.058	4.33	4.33	6.454
C	Laundry-linen	2.165	3.248	4.33	4.33
C	Shopping	1.999	2.165	3.248	4.33
C	MealPrepOwnUnit	9.743	10.133	14.185	15.2
C	MakeAppointment	1	1	1.443	2.165
C	MoneyMan	1	1.083	2.316	3
C	ArrgNonMedTrans	0.722	1	1.083	1.083
C	Socialization	5.319	7.178	9.208	17.538
C	Dress/Groom	10.133	15.2	15.2	17.311
C	Bathing	4.33	4.58	6.495	8.66
C	Continance Care	10.133	15.2	16.082	22.8
C	Positioning	5.027	5.067	7.6	10.133

Case Mix	Component Service	65 th Percentile	75 th Percentile	85 th Percentile	95 th Percentile
C	Eating	15.161	15.2	15.2	15.2
C	Walking	15.2	15.2	15.2	22.537
C	Wheeling	4.059	5.573	9.5	15.707
C	Transferring	4.907	5.067	5.067	7.6
C	MedAdminSetup	15.739	20.267	22.8	30.4
C	Verb/Vis MedRem	10.133	10.133	10.133	14.693
C	InsulinInject	10.133	11.773	15.2	20.269
C	TherapyExcer	7.001	8.82	10.479	20.613
C	DelegateClinMon	10.133	15.2	15.2	22.8
C	OtherServices	10.133	11.469	15.2	22.8
C	MedSetupMon	2.996	4	4.33	10.133
C	Insulin Draws	5.067	7.6	10.133	15.2
C	Wander/Orient	7.6	7.6	10.133	15.2
C	Behavior	10.133	12.39	15.2	22.927
C	OtherCognitive	5.067	8.8	11.925	20.267
C	Combined Service Levels	85.177	92.482	96.305	100.616
D	LtHseKeeping	5.067	5.573	7.6	8.683
D	HvyHseKeeping	2.165	3.248	4.33	4.698
D	Laundry-Pers	3.248	4.33	4.33	6.495
D	Laundry-linen	2.165	2.887	3.608	4.33
D	Shopping	1.083	2	2.165	4.33
D	MealPrepOwnUnit	7.6	10.133	15.2	22.8
D	MakeAppointment	0.5	0.722	1	2
D	MoneyMan	0.991	1	1.389	2.165
D	ArrgNonMedTrans	0.5	0.722	1	1.992
D	Socialization	5.329	7.178	9.465	16.12
D	Dress/Groom	15.2	16.283	20.267	30.4
D	Bathing	4.33	6.495	6.495	9.734
D	Continance Care	15.2	16	22.8	30.4
D	Positioning	5.067	5.067	7.6	10
D	Eating	15.143	15.2	15.2	22.8
D	Walking	12	15.2	15.2	22.8
D	Wheeling	7.6	10.133	15.2	16.622
D	Transferring	7.6	10.133	15.165	19.143
D	MedAdminSetup	15.2	15.2	20.267	29.928
D	Verb/Vis MedRem	9.123	10.133	15.2	22.8
D	InsulinInject	7.6	10.133	10.133	15.2
D	TherapyExcer	8.66	10.133	15.022	15.2
D	DelegateClinMon	7.6	8.158	10.133	15.599
D	OtherServices	5.395	7.6	10.383	17.678
D	MedSetupMon	2.165	3	4.2	5.067

Case Mix	Component Service	65 th Percentile	75 th Percentile	85 th Percentile	95 th Percentile
D	Insulin Draws	2.887	5.067	7.599	10.133
D	Wander/Orient	7.6	7.6	10.497	15.2
D	Behavior	5.067	7.6	8.05	15.2
D	OtherCognitive	7.448	7.6	15.2	22.8
D	Combined Service Levels	89.59	97.78	101.779	106.339
E	LtHseKeeping	5.067	7.41	7.6	10.133
E	HvyHseKeeping	2.165	3	3.616	4.38
E	Laundry-Pers	4.183	4.33	4.33	6.495
E	Laundry-linen	2.165	3.181	4.326	4.33
E	Shopping	1.083	1.947	2.165	4.33
E	MealPrepOwnUnit	7.6	10.133	15.2	22.617
E	MakeAppointment	0.5	0.979	1	2
E	MoneyMan	0.722	1	1.083	2.165
E	ArrgNonMedTrans	0.578	0.998	1	2
E	Socialization	9.012	11.538	16.12	24.38
E	Dress/Groom	17.733	20.267	22.8	30.4
E	Bathing	4.33	6.458	6.495	8.683
E	Continance Care	20.267	23.05	30.4	34.73
E	Positioning	5.067	5.067	7.6	10.133
E	Eating	15.2	15.2	20.267	22.8
E	Walking	12.667	15.2	15.2	22.517
E	Wheeling	7.6	8.107	12.16	15.2
E	Transferring	7.6	10.133	10.133	15.2
E	MedAdminSetup	15.2	15.2	20.267	29.879
E	Verb/Vis MedRem	10.133	15.2	20.267	30.4
E	InsulinInject	7.6	10.133	10.133	15.2
E	TherapyExcer	7.6	10.133	10.825	15.2
E	DelegateClinMon	7.6	7.6	10.133	15.2
E	OtherServices	5.573	7.85	10.855	19.527
E	MedSetupMon	2.165	2.916	4.041	5.067
E	Insulin Draws	2.533	4.33	5.067	7.6
E	Wander/Orient	13.165	15.2	17.733	29.894
E	Behavior	14.857	15.2	20.267	30.4
E	OtherCognitive	7.6	10.133	15.2	22.8
E	Combined Service Levels	115.071	117.41	120.1	124.758
F	LtHseKeeping	5.067	7.6	7.6	10.133
F	HvyHseKeeping	2.165	3.137	3.608	4.33
F	Laundry-Pers	3.248	4.33	4.33	6.495
F	Laundry-linen	2.165	2.887	3.608	4.33
F	Shopping	1.083	1.966	2.165	3.871
F	MealPrepOwnUnit	10.133	11.339	15.2	20.584

Case Mix	Component Service	65 th Percentile	75 th Percentile	85 th Percentile	95 th Percentile
F	MakeAppointment	1	1	1.443	2.451
F	MoneyMan	1	1	1.083	2.875
F	ArrgNonMedTrans	0.5	0.967	1	1.454
F	Socialization	8.012	9.646	12.807	22.129
F	Dress/Groom	15.2	17.733	20.267	26.99
F	Bathing	4.33	6.222	6.495	8.66
F	Contenance Care	17.542	21.933	24.902	30.761
F	Positioning	5.067	5.067	7.6	7.6
F	Eating	15.2	15.2	20.267	23.687
F	Walking	10.133	14.821	15.2	20.881
F	Wheeling	7.6	8.1	10.133	15.2
F	Transferring	7.6	10.133	12.667	20.004
F	MedAdminSetup	15.2	20.267	22.8	30.4
F	Verb/Vis MedRem	10.133	13.933	15.2	15.2
F	InsulinInject	10.133	10.133	13.623	15.904
F	TherapyExcer	7.6	7.6	8.613	14.325
F	DelegateClinMon	10.133	12.757	15.2	22.8
F	OtherServices	8.2	10.283	15.2	20.267
F	MedSetupMon	3	3.608	4.33	7.465
F	Insulin Draws	4	4.964	5.723	10.133
F	Wander/Orient	10.133	14.621	15.2	24.573
F	Behavior	9.806	11.653	15.2	22.8
F	OtherCognitive	9.981	14.86	17.733	23.307
F	Combined Service Levels	119.173	121.059	123.531	127.952
G	LtHseKeeping	5.067	5.974	7.6	8.681
G	HvyHseKeeping	2.165	2.526	3.248	4.33
G	Laundry-Pers	3.558	4.33	4.33	6.263
G	Laundry-linen	2.165	2.811	3.248	4.33
G	Shopping	1	1.083	2.054	3.744
G	MealPrepOwnUnit	7.6	9.95	15.2	22.397
G	MakeAppointment	0.5	0.691	1	1.354
G	MoneyMan	0.5	0.722	1	2
G	ArrgNonMedTrans	0.5	1	1.208	2.165
G	Socialization	6.357	8.411	11.649	19.709
G	Dress/Groom	20.267	22.8	27.36	30.4
G	Bathing	4.33	6.495	6.859	10.272
G	Contenance Care	27.34	30.4	30.4	40.534
G	Positioning	7.6	7.6	10.133	15.2
G	Eating	21.787	121.787	221.787	321.787
G	Walking	12.667	15.2	15.2	22.8
G	Wheeling	9.105	10.133	15.071	15.2

Case Mix	Component Service	65 th Percentile	75 th Percentile	85 th Percentile	95 th Percentile
G	Transferring	14.718	15.2	15.2	22.8
G	MedAdminSetup	15.2	15.2	19.749	22.8
G	Verb/Vis MedRem	10.133	10.133	12.287	15.2
G	InsulinInject	7.6	10.064	10.133	14.898
G	TherapyExcer	7.6	10.133	11.812	15.2
G	DelegateClinMon	5.067	7.6	7.6	10.35
G	OtherServices	5.788	7.85	10.133	17.216
G	MedSetupMon	2.165	2.526	3.248	5.067
G	Insulin Draws	2.898	3.537	5.067	7.6
G	Wander/Orient	7.6	7.6	10.133	15.2
G	Behavior	5.067	7.6	10.133	15.2
G	OtherCognitive	5.788	6.875	7.6	14.791
G	Combined Service Levels	123.286	125.048	127.08	131.342
H	LtHseKeeping	5.067	7.116	7.6	10.123
H	HvyHseKeeping	2.165	2.533	3.248	4.33
H	Laundry-Pers	4.242	4.33	4.33	7.576
H	Laundry-linen	2.165	3	4.316	4.33
H	Shopping	1	1.083	1.824	4.33
H	MealPrepOwnUnit	7.6	10.133	15.2	30.4
H	MakeAppointment	0.5	0.722	1	1.5
H	MoneyMan	0.5	0.722	1	1.976
H	ArrgNonMedTrans	0.5	0.722	1	1.083
H	Socialization	9.229	11.813	16.12	24.131
H	Dress/Groom	22.442	22.8	30.4	30.4
H	Bathing	5.277	6.495	7.217	10.103
H	Continance Care	30.4	30.4	32.934	45.6
H	Positioning	7.6	7.6	10.133	15.2
H	Eating	n/a	n/a	n/a	n/a
H	Walking	14.988	15.2	15.2	22.8
H	Wheeling	8.107	10.133	14.88	15.2
H	Transferring	11.147	15.2	15.2	22.8
H	MedAdminSetup	15.2	15.2	20.267	25.333
H	Verb/Vis MedRem	9.28	11.4	15.2	23.053
H	InsulinInject	7.6	7.6	10.133	12.667
H	TherapyExcer	9.863	10.133	15.2	17.678
H	DelegateClinMon	6.022	7.6	10.133	15.2
H	OtherServices	6.208	7.961	11.651	19.956
H	MedSetupMon	2.165	2.665	3.248	5
H	Insulin Draws	2.533	3.8	5.067	7.6
H	Wander/Orient	10.133	12.667	15.2	22.8
H	Behavior	12.667	15.2	17.733	27.867

Case Mix	Component Service	65 th Percentile	75 th Percentile	85 th Percentile	95 th Percentile
H	OtherCognitive	7.6	9.56	12.212	15.2
H	Combined Service Levels	142.921	144.909	147.296	152.394
I	LtHseKeeping	5.067	5.067	7.6	7.6
I	HvyHseKeeping	2.165	2.168	3.248	4.33
I	Laundry-Pers	3.248	4.212	4.33	6.495
I	Laundry-linen	2.165	2.887	3.248	4.33
I	Shopping	1	1.082	1.443	2.165
I	MealPrepOwnUnit	9.765	13.173	15.069	22.667
I	MakeAppointment	0.5	0.5	0.99	1.083
I	MoneyMan	0.489	0.5	1	1.083
I	ArrgNonMedTrans	0.5	0.722	1	1.417
I	Socialization	9.667	11.937	17.301	26.378
I	Dress/Groom	22.432	22.8	30.288	30.4
I	Bathing	4.33	6.48	6.504	10.133
I	Continence Care	30.4	30.4	32.934	45.6
I	Positioning	7.6	10.133	12.667	20.267
I	Eating	20.267	22.8	22.8	30.4
I	Walking	10.133	15.2	15.2	20.267
I	Wheeling	9.768	10.133	14.938	15.2
I	Transferring	12	15.2	15.2	20.267
I	MedAdminSetup	14.711	15.2	16.86	22.8
I	Verb/Vis MedRem	10.133	10.133	10.767	12.033
I	InsulinInject	7.6	10.098	10.133	15.48
I	TherapyExcer	7.6	9.758	10.133	14.427
I	DelegateClinMon	7.587	7.6	8.075	13.533
I	OtherServices	5.067	7.579	8.59	15.2
I	MedSetupMon	2.165	2.165	3.232	4.33
I	Insulin Draws	3.843	5.067	7.545	9.151
I	Wander/Orient	8.096	10.133	15.2	17.733
I	Behavior	9.083	10.133	15.2	22.4
I	OtherCognitive	7.6	8.36	14.838	22.8
I	Combined Service Levels	147.461	149.174	150.903	156.494
J	LtHseKeeping	5.067	5.5	7.6	9.611
J	HvyHseKeeping	2.165	2.17	3.248	4.883
J	Laundry-Pers	3.87	4.33	4.33	7.515
J	Laundry-linen	2.165	3.248	4.33	5.32
J	Shopping	1	1.082	1.944	2.995
J	MealPrepOwnUnit	5.219	8.233	13.185	17.36
J	MakeAppointment	0.5	0.5	1	1.083
J	MoneyMan	0.5	0.5	1	1.882
J	ArrgNonMedTrans	0.5	0.722	0.998	1.263

Case Mix	Component Service	65 th Percentile	75 th Percentile	85 th Percentile	95 th Percentile
J	Socialization	10.769	14.27	17.69	27.613
J	Dress/Groom	22.571	23.153	30.4	30.4
J	Bathing	6.495	6.495	8.66	11.564
J	Continance Care	30.4	30.4	35.467	45.6
J	Positioning	7.6	10.133	12.667	17.458
J	Eating	20.267	22.8	22.8	30.4
J	Walking	12.6	15.2	15.2	22.8
J	Wheeling	7.6	10.133	12.387	15.2
J	Transferring	12.667	15.2	15.2	22.62
J	MedAdminSetup	14.838	15.2	17.733	22.8
J	Verb/Vis MedRem	2.533	102.533	202.533	302.533
J	InsulinInject	7.6	7.6	10.117	10.419
J	TherapyExcer	7.6	10.126	10.133	15.2
J	DelegateClinMon	5.067	7.6	8.485	15.2
J	OtherServices	5.067	6.149	8.679	15.2
J	MedSetupMon	2.165	2.165	3.247	4.33
J	Insulin Draws	2.533	4.053	5.067	7.6
J	Wander/Orient	9.938	10.133	15.2	21.28
J	Behavior	15.198	15.2	20.267	30.4
J	OtherCognitive	9.12	11.385	14.986	17.423
J	Combined Service Levels	159.489	161.054	162.997	167.952
K	LtHseKeeping	7.424	7.6	7.6	10.133
K	HvyHseKeeping	2.887	3.248	4.33	7.6
K	Laundry-Pers	4.33	4.33	6.334	8.564
K	Laundry-linen	3.248	4.33	4.33	8
K	Shopping	1.443	2	2.165	4.083
K	MealPrepOwnUnit	7.6	7.6	10.133	30.4
K	MakeAppointment	1	1.065	1.83	4
K	MoneyMan	0.5	0.729	1	1.083
K	ArrgNonMedTrans	0.837	1	1.083	2
K	Socialization	12.258	16.55	20.871	31.915
K	Dress/Groom	24.993	30.4	30.4	35.504
K	Bathing	6.495	7.931	10.131	17.512
K	Continance Care	30.4	30.4	36.699	45.6
K	Positioning	15.2	15.2	21.736	30.4
K	Eating	22.8	22.8	30.4	34.749
K	Walking	15.2	15.2	19.942	22.8
K	Wheeling	10.133	13.726	15.2	20.169
K	Transferring	15.2	15.2	20.267	30.133
K	MedAdminSetup	17.733	20.267	22.8	30.4
K	Verb/Vis MedRem	17.987	20.267	20.267	31.794

Case Mix	Component Service	65 th Percentile	75 th Percentile	85 th Percentile	95 th Percentile
K	InsulinInject	10.133	15.18	15.2	22.8
K	TherapyExcer	9.899	10.133	12.793	15.2
K	DelegateClinMon	10.835	15.2	15.2	22.8
K	OtherServices	10.133	15.103	20.267	30.4
K	MedSetupMon	3.248	4.33	4.33	10.054
K	Insulin Draws	4.599	6.391	7.6	10.133
K	Wander/Orient	10.133	12.667	15.2	22.8
K	Behavior	14.926	15.2	19.756	30.4
K	OtherCognitive	7.727	11.633	15.2	15.2
K	Combined Service Levels	186.777	189.429	192.985	199.414
L	LtHseKeeping	2.533	3.248	5.058	6.135
L	HvyHseKeeping	2.165	2.165	3.248	4.33
L	Laundry-Pers	2.165	2.417	3.248	4.33
L	Laundry-linen	2.165	2.165	2.17	4.268
L	Shopping	1.083	1.981	2.165	4.33
L	MealPrepOwnUnit	7.6	10.133	15.2	22.8
L	MakeAppointment	0.47	0.5	0.722	1.083
L	MoneyMan	0.361	0.5	1.072	2
L	ArrgNonMedTrans	0.361	0.5	1	2.033
L	Socialization	2.623	3.602	5.32	8.821
L	Dress/Groom	4.869	5.067	7	10.091
L	Bathing	3.248	4.204	4.33	6.495
L	Continence Care	n/a	n/a	n/a	n/a
L	Positioning	1.083	1.624	3.616	7.6
L	Eating	2.533	4.053	5.573	9.12
L	Walking	5.067	7.6	7.6	9.635
L	Wheeling	2.533	4.084	5.72	9.757
L	Transferring	2.314	2.533	2.533	5.067
L	MedAdminSetup	7.6	7.6	9.657	11.932
L	Verb/Vis MedRem	7.222	7.6	7.633	15.2
L	InsulinInject	2.533	4.053	5.067	7.6
L	TherapyExcer	3.164	4.689	5.827	9.385
L	DelegateClinMon	2.533	2.877	5.048	7.6
L	OtherServices	2.165	2.533	4.808	7.505
L	MedSetupMon	2.002	2.165	2.165	4.053
L	Insulin Draws	1.299	1.786	2.183	2.533
L	Wander/Orient	2.533	2.602	5.067	7.6
L	Behavior	2.533	4.33	5.067	7.6
L	OtherCognitive	2.533	2.533	5.067	7.6
L	Combined Service Levels	20.439	21.783	23.726	30.701
V	LtHseKeeping	4.33	4.33	6.651	8.973

Case Mix	Component Service	65 th Percentile	75 th Percentile	85 th Percentile	95 th Percentile
V	HvyHseKeeping	1.083	1.083	2.676	4.27
V	Laundry-Pers	4.33	4.33	4.33	4.33
V	Laundry-linen	4.33	4.33	4.33	4.33
V	Shopping	0.5	0.916	1.416	1.915
V	MealPrepOwnUnit	n/a	n/a	n/a	n/a
V	MakeAppointment	1	101	201	301
V	MoneyMan	n/a	n/a	n/a	n/a
V	ArrgNonMedTrans	n/a	n/a	n/a	n/a
V	Socialization	24.824	25.074	25.075	25.076
V	Dress/Groom	24.32	30.4	30.4	30.4
V	Bathing	8.66	8.66	8.66	8.66
V	Continance Care	9.12	10.133	11.147	12.16
V	Positioning	2.165	102.165	202.165	302.165
V	Eating	15.2	115.2	215.2	315.2
V	Walking	n/a	n/a	n/a	n/a
V	Wheeling	n/a	n/a	n/a	n/a
V	Transferring	n/a	n/a	n/a	n/a
V	MedAdminSetup	22.8	122.8	222.8	322.8
V	Verb/Vis MedRem	30.4	130.4	230.4	330.4
V	InsulinInject	10.133	110.133	210.133	310.133
V	TherapyExcer	n/a	n/a	n/a	n/a
V	DelegateClinMon	10.133	15.2	15.2	15.2
V	OtherServices	n/a	n/a	n/a	n/a
V	MedSetupMon	3.248	3.248	3.248	3.248
V	Insulin Draws	n/a	n/a	n/a	n/a
V	Wander/Orient	5.067	105.067	205.067	305.067
V	Behavior	30.4	30.4	30.4	30.4
V	OtherCognitive	n/a	n/a	n/a	n/a
V	Combined Service Levels	152.16	153.53	153.758	153.985