

Using the “Rate Table – CDI LabID Data for LTCH PPS” Output Option

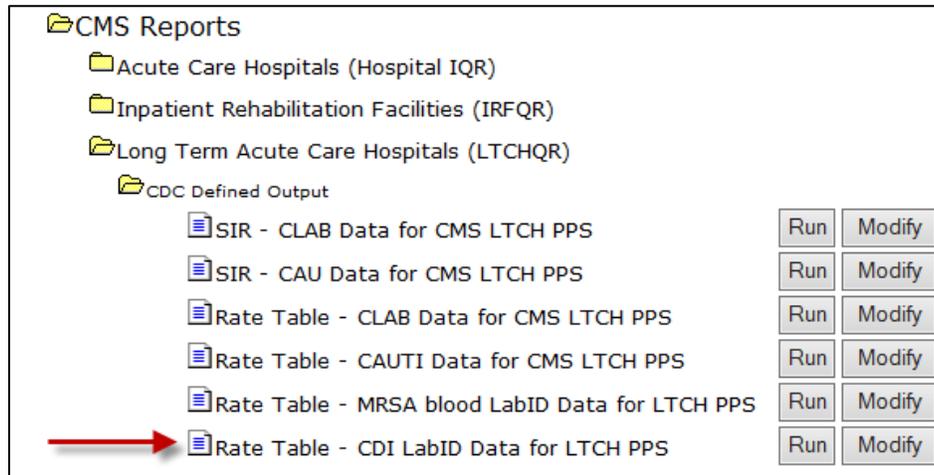
The NHSN Analysis Output Option, “Rate Table – CDI LabID Data for LTCH PPS” was created in order to allow long term care hospitals (known as long term acute care hospitals, or LTACs, in NHSN) to review those data that would be submitted to CMS on their behalf. It’s important to keep in mind the following as you begin to use this report:

- a. These data will only be submitted for those facilities that are participating in the CMS Long Term Care Hospital Quality Reporting Program, as indicated by their CCN recorded in NHSN.
- b. This report will only include **in-plan FACWIDEIN CDI LabID data for each LTAC beginning with January 2015 data**. Earlier time periods for which you may have reported FACWIDEIN CDI LabID data will not be included in this output.
- c. **IMPORTANT!** Facilities must appropriately **Report No Events** for those locations and months for which no CDI LabID events were identified.
- d. This output option provides rates for each LTAC, not each CCN. If your LTAC shares a CCN, the rates will only represent the data that your LTAC has contributed to the overall rate for all LTACs that share the CCN. You may wish to use the Group function in NHSN to be able to view the rates for all LTACs that share a CCN. More information about the Group function can be found here: <http://www.cdc.gov/nhsn/group-users/index.html>.
- e. The rates that will be shared with CMS and presented in this output option are calculated at the FACWIDEIN level only.
- f. The data in this report will represent data current as of the last time you generated datasets. Data changes made in NHSN will be reflected in the next monthly submission to CMS.
EXCEPTION: Quarterly data are frozen as of the final submission date for that quarter (e.g., Q1 data will be frozen as of 1am ET on May 16th); any changes made to these data in NHSN after the final submission deadline will not be reflected in data shared with CMS.
- g. The information in this document should be used in conjunction with the document, “ “Helpful Tips for FACWIDEIN CDI LabID Reporting for the Centers for Medicare and Medicaid Services’ Long Term Care Hospital Quality Reporting Program”, available from http://www.cdc.gov/nhsn/PDFs/CMS/Helpful-Tips-for-CDI-Reporting_LTCH.pdf.

Example of the “Rate Table – CDI LabID Data for LTCH PPS” Output Option:

Before running this output option, remember to generate your datasets for the most up-to-date data reported to NHSN by your facility! To generate datasets, go to Analysis > Generate Data Sets, then click “Generate New”.

1. After selecting Analysis > Output Options, navigate through the following folders: CMS Reports > Long Term Acute Care Hospitals (LTCHQR) > CDC-Defined Output. Click “Run” next to “Rate Table – CDI LabID Data for LTCH PPS”, as shown below:



2. By default, the results will appear in an HTML window. If a second window does not pop-up, please be sure to check your pop-up blocker and allow pop-ups from *.cdc.gov.
3. A single table titled “Rate Table – CDI LabID Data for LTCH PPS” will be presented in the pop-up HTML window. The table presents rates for each calendar-year quarter, for the FACWIDEIN location. This is the information that will be submitted to CMS for your facility.

Sample output for the “Rate Table – CDI LabID Data for LTCH PPS” output option is displayed below:

National Healthcare Safety Network
 Rate Table - CDI LabID Data for LTCH PPS
 CDI Incidence - Inpatient Facility CDIF Healthcare Facility-Onset Incidence Rate
 Date Range: LABID_RATESCDIFLTAC summaryYr After and Including 2015

orgID=12345 locCDC=''

summaryYQ	months	location	CDIF_facIncHOCcount	numpatdays	CDIF_HOIncRate
2015Q1	3	FACWIDEIN	1	1931	5.179

Source of aggregate data: Not available

From this output, we can conclude the following:

- For the first quarter of 2015, this LTAC reported three months of FACWIDEIN CDI LabID data (*months*).
 - NOTE: for each quarter, there should be three months of data reported. If the “months” column shows a value less than 3, then the data for that quarter are **incomplete**. Please see step 4 below for information about how to troubleshoot incomplete quarters.
 - In those three months, the facility reported 1 incident, healthcare facility-onset CDI LabID event (*CDIF_facIncHOCCount*) and 1,931 patient days (*numpatdays*), which results in a FACWIDEIN CDI Healthcare facility onset incidence rate of 5.179 per 10,000 patient days (*CDIF_HOIncRate*).
4. What can be done if data are incomplete, or if the number of LabID events or patient days is incorrect?
- i. Check that the summary data for the FACWIDEIN location have been entered for each month in the quarter. This includes patient days and admissions.
 - ii. If summary data have been entered, double-check your monthly reporting plan for each month in the quarter. Check to make sure that the monthly reporting plans include FACWIDEIN for CDI LabID Data.
 - iii. If summary data have been entered and no CDI LabID events have been identified, be sure to check the ‘Report No Events’ box on the summary record.
 - iv. If the number of CDI LabID events is less than you reported *and* you’ve confirmed that the summary data have been entered in-plan, double check the LabID events in NHSN using the “Line Listing for All CDIF LabID Events” output option.

REMEMBER: If you have made any changes to your data, regenerate your datasets in order to review your output options with the most up-to-date data in NHSN.

Additional Resources:

Operational Guidance: <http://www.cdc.gov/nhsn/PDFs/CMS/LTACH-CDI-Op-Guidance2015.pdf>

CMS Resources for NHSN Users: <http://www.cdc.gov/nhsn/cms/index.html>

Analysis Quick Reference Guides: <http://www.cdc.gov/nhsn/PS-Analysis-resources/reference-guides.html>

