



This manual is for training purposes only and should not be used for official purposes as the Axxess solutions are continuously subject to updates, improvements and enhancements.



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LOGIN

Navigate to <u>www.axxess.com</u>. Select LOGIN.



User inputs credentials and selects Secure Login.



A Login Successful confirmation shows, select OK.



Axxess Planner

The Axxess Planner displays pertinent information specific to a user. Shortcuts have been placed on the left side of the page to allow for easy access to the Axxess applications the organization is using. Clinicians are also able to see upcoming visits, past due visits, unread messages, and a map of today's visits. To access CAHPS survey data, select the name of the organization below CAHPS Hospice on the left side of the page.

3



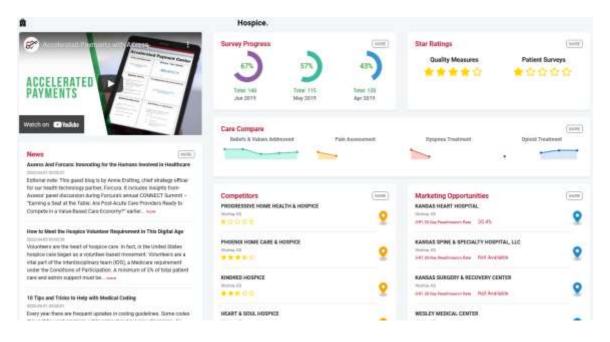


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vzess CARE			4	5		1	-		VICKERY PLACE	(Table Table)	
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Once inside CAHPS Hospice, select the Axxess Planner menu button to go back to the previous screen.

Dashboard

The landing page of CAHPS Hospice is the Dashboard. It shows Survey Progress, Star Ratings, Care Compare, Competitors, Marketing Opportunities, News and Axxess media.







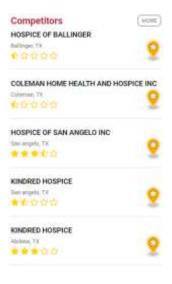
Survey Progress - Shows the percentage graphic of the progress of completed surveys per month. Select the **MORE** button for the progress details.

	Survey Progress	s	MORE	
	38%	49%	36%	
	Total: 143 Nov 2020	Total: 140 Oct 2020	Total: 139 Sep 2020	
Star Ratings - Shows the Patient Surveys. Select the st	•		•	of either rating.
	Quality Measures		Patient Surveys	
	****	3	****	

Care Compare - Shows if the organization's improvement scores are trending up or down. Select the **MORE** button to get more details.

Care Compare			MORE
Beliefs & Values Addressed	Pain Assessment	Dyspnea Treatment	Opioid Treatment
		-	

Competitors - Shows the organization's competitors by name and star rating in the area. Select the **MORE** button to get more details.

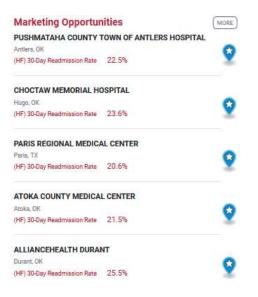


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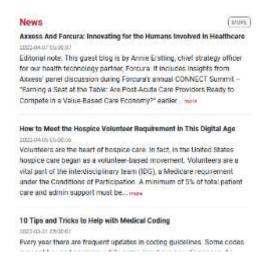




Marketing Opportunities - Shows a list of hospitals based off their location and 30-Day Readmission Rate. Select the **MORE** button to get more details.



News - Shows recently published articles from the Axxess Blog. Select the **MORE** button for more news, events, legislation and clinical insights.



Axxess Media - An embedded link to Axxess educational and informational videos designed to aide and educate organizations using Axxess.





HOSPICE COMPARE

Select one of the **MORE** buttons from the Dashboard tiles to see a list of reports. Any report chosen will still show the reports menu on the left side of the screen.

Hospice Compare
Quality Measures
Quarterly
 Annual
 Star Ratings
Patient Surveys
 Quarterly
 Star Ratings
Levels Of Care
 Quarterly
Annual
Medical Conditions
Quarterly
Annual
Location of Care
 Quarterly
5 B

Annual

The reports have common buttons featured in most sections:

- The Brint button sends the data to the printer.
- The Download button has options to either generate a PDF version or Excel spreadsheet of the data to be saved to the user's computer and/or printed out.
- The ¹/₁2020 ¹/₂ button to change the year by selecting the calendar drop down.
- Select measures hyperlinks or the ⁽²⁾ icon to see what comprises the Domains & Measures category. It shows the Care Compare Description,

7





Measure Calculation (Numerator and Denominator) and Data Sources (tutorial when available) and a link to the **HIS Reference**.

Hospice Visits When Death is Imminent, Measure 1

×

Care Compare Description

Percentage of patients receiving at least one visit from registered nurses, physicians, nurse practitioners, or physician assistants in the last 3 days of life.

Measure Calculation - Numerator

Number of patients from the denominator receiving at least one visit from registered nurses, physicians, nurse practitioners or physician assistants in the last 3 days of life.

Measure Calculation - Denominator

All patients, except for those with exclusions.

Data Sources

- (05000) Level of care in final 3 days
- (05010) Number of hospice visits in final 3 days
- (05020) Level of care in final 7 days

HIS Reference

Quality Measures

Quarterly

Summary of the data collected per quarter. The numbers in the columns indicate how the organization scored for each survey composite per quarter compared to the state and national averages.





ALITY MEASURES - QUARTERLY			2. DO	wnload -	000	wnload	⊖Print ■2020
Measures		Q1- 2020	Q2- 2020	Q3- 2020	State	National	Sample Date Range
Hospice and Palliative Care Composite Process Measure	0	100.00	100.00	100.00	98.62	99.30	Oct 1, 2018 - Sep 30, 201
Hospice Visits When Death is Imminent, Measure 1	0	97.20	97.90	96.50	96.24	97.50	Oct 1, 2018 - Sep 30, 201
	HISC	omprehens	ive Assess	ment			
Hospice and Palliative Care – Treatment Preferences	0	86.10	93.80	96.50	95,87	97.10	Oct 1, 2018 - Sep 30, 201
Beliefs & Values Addressed (if desired by the patient)	0	73.90	81.50	76.70	92.59	92.40	Oct 1, 2018 - Sep 30, 201
Hospice and Palliative Care – Pain Screening	0	91.70	95.80	96.50	98.38	08.50	Oct 1, 2018 - Sep 30, 201
Hospice and Palliative Care – Pain Assessment	0	96.60	91,70	90.50	97.59	96.80	Oct 1, 2018 - Sep 30, 201
Hospice and Palliative Care – Dyspnea Screening	0	0.00	0.00	0.00	97.50	94.30	Oct 1, 2018 - Sep 30, 201
Hospice and Palliative Care – Dyspnea Treatment	0	64.50	73.30	70.90	86.54	68.40	Oct 1, 2018 - Sep 30, 201
Patient Treated with an Opioid Who Are Given a Bowel Regimen	0	88.90	88,90	88.40	85.34	82.40	Oct 1, 2018 - Sep 30, 201

NOTE: CAHPS survey data is typically submitted quarterly per CMS protocols. Annual

This report allows organizations to see how their scores on each measure are trending annually including the average. The trending column graphically shows per measure whether the organization is trending up or down.

UALITY MEASURES - ANNUAL			2	Download *	🕀 Print	8 2020 -
Domains & Measures		Q1-2020	Q2-2020	Q3-2020	Annual Average	Trending
Hospice and Palliative Care Composite Process Measure	0	100.00	100.00	100.00	100.00	-
Hospice Visits When Death is Imminent, Measure 1	0	97.20	97.90	96.50	97.20	
Patient Preferences		80.00	87.65	86.60	84,75	
Hospice and Palliative Care - Treatment Preferences	0	86.10	93.80	96.50	92.13	•
Beliefs & Values Addressed (if desired by the patient)	0	73.93	81.50	76.70	77.37	• •
Managing Pain and Treating Symptoms		68.34	69.94	69.26	69.18	-
Hospice and Palliative Care - Pain Screening	Θ	91.70	95.80	96.50	94.67	
Hospice and Pallative Care - Pain Assessment	0	96.60	91.70	90.50	92.93	-
Hospice and Palliative Care - Dyspinea Screening	0	0.00	0.00	0.00	0.00	-
Hospice and Palliative Care - Dyspnea Treatment	0	64.50	79.30	70.90	69.57	• •
Patient Treated with an Opioid Who Are Given a Bowel Regimen	0	88.90	88.90	68.40	88.73	-

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Star Ratings

The organization's patient care five-star rating report will be displayed. Scores for specific star ratings are explained in the Hospice Star Rating Scorecard table on the right side of the page.

Your Overall Star Rating		*****	.00)					. Here	ice Star i	tating So	precard			
Measures	Your Score	Your Star Rating	State	National	0.5	1,0	1.5	2.9	2.5	3.0	3.5	4.0	4.5	5.0
tospice and Pallative Care Treatment Preferences	96,50	(4.50)	95.87	97.18	0.0- 74.48	71.4)- 85.00	85.01- -89.10	89,11- 92,25	92.31- 94.02	94.01- 45.30	#5.31- #6.50	98,51- 97,70	\$7,75- 10,90	98.9
ellets & Values Addressed If desired by the patient) 😡	76.70	(2.50)	92.59	92.40	10 81.91	42.9% (12.80	15.81 80.18	80.11. 34.90	84.61) 87.80	47.61. 30.70	94.15- 92.70	62,7% 99,20	45.21- 97.50	97.8 105
ruspice and Pallative Care Pain Screening O	96.50	(4.00)	98.38	96.50	0.0- 63.80	45.81- 74.40	74.51- 81.30	81.33- 84.75	84.7% 31.68	57.65- 90.40	95.45- 92.95	92.81- 35.20	93.21- 97.60	100
Fospice and Pallative Care Pain Assessment	90,50	(3.00)	97.59	96.90	60- 52.81	52.91- 62.68	42.01- A9.85	18.81- 75.55	75.56 81.11	86.17- 84.55	81.35- 33.52	86.51- 93.53	#2.36- 10.20	90.2 100
fospice and Pathative Care Dyapnee Screening O	0.00	(0.50)	07:50	84.30	-8-0- 77/18	77.18 61.10	82,91- 37,25	87.26 30.11	00:15 91:29	17.36. 52.15	11.86 15.27	95.25 95.22	10.85 72.45	(HL4 108
tospice and Pallative Care Dyspries Trestment	70.90	(2,00)	00.54	88.40	0.0- 73.76	78.7% 80.00	80.0% 84.10	8471- 96.52	04,51- 84.00	91.20 91.20	81.25 33.41	85.40	95.81- 97.80	97.4 105
atient Treated with an Ipicid Who Are Silven a Icovel Regimen	88.40	(4.00)	95.34	82.40	60- 87.83	67.90- 78.76	78.75 84.35	84.21- 87.48	87.45 16.15	9630- 82.45	92.45- 94.35	94.58- 36.25	96.22- 36.15	94.1

Patient Surveys

Quarterly

The organization's patient surveys quarterly report will be displayed compared to the state and national averages. Select the ¹/₂ icon to see the top, middle and bottom values.

	Measures		Q1-2020	Q2-2020	Q3-2020	State	National	Sample Du	ste Range
0	Emotional and Spiritual Support	0	0.00	0.00	0.00	88.67	90.00	Oct 1, 2017 -	Sep 30, 2019
0	Rating of Hospice Care	0	0.00	0.00	0.00	79.63	81.00	Oct 1, 2017 -	Sep 30, 2011
0	Willingness to Recommend Hospice	0	0.00	0.00	0.00	82.37	84.00	Oct 1, 2017 -	Sep 30, 201
0	Treating Patient with Respect	0	0.00	0.00	0.00	89.95	91.00	Oct 1, 2017 -	Sep 30, 2019
0	Getting Timely Help	0	0.00	0.00	0.00	77.34	78.00	Oct 1, 2017 -	Sep 30, 2019
0	Help for Pain and Symptoms	0	0.00	0.00	0.00	75.16	75.00	Oct 1, 2017 -	Sep 30, 201
0	Communication with Family	0	0.00	0.00	0.00	.79,74	81.00	Oct 1, 2017 -	Sep 30, 2019
0	Training Family to Care for Patient	0	0.00	5.00	0.00	75.92	76.00	Oct 1, 2017 -	Sep 30, 2010





Star Ratings

The organization's patient surveys star ratings report will be displayed. Scores for specific Star Ratings are explained in the Hospice Star Rating Scorecard table on the right side of the page.

TIENT SURVEYS - STA	RRATI	NG									8P	int	篇 (3)-	2020 -
Your Overall Star Rating		+0000	1.09					Henp	ice Star (lating Se	arecard			
Measures	Your Score	Your Star Rating	State	National	0.5	1.0	1.5	2.0	2.5	3.0	3.5	4.0	4.5	5.0
Emotional and Spiritual Support	0.00	10.50)	88.69	90.00	90- 76 m	70.2%- 74.00	74.01 77.00	77.DI- 80.30	80.01- 89.55	83.51- 87.00	87.05- 90,00	90.01+ 95.08	93.01- 96.00	98.2 105
lating of Hospice Care 🛛 🛛 🔒	0.00	(0.50)	79.90	81.00	00- 11.00	92.01- 60.00	95.01- 63.00	68.01- 70.18	70.01- 74.55	74.51- 79.00	78.01- 84.05	84.01- 85.08	84.00	843
Willingness to Recommend Rospice	0.00	* 0 0 0 0 (0.50)	12.44	84.00	0.0	\$7.5% 62.00	82.01- 87.00	67:01- 72.06	72.03- 76.50	78.21- 81.00	81.25 96.00	96.01- 61.00	91.01- 86.00	96.0
leating Patient with Respect	0.00	(0.50)	89.96	91.00	0.0- 73.00	73.8% 75.50	76.51- 79.52	78.51- 82.52	82.51- 85.52	85.21- 89.30	86.25 11.30	91.91- 64.58	64.5% 97.50	67.5 100
letting Timery Help 🛛 🛛 😡	0.00	(0.50)	77.14	78.00	0.0- 54.00	54.01- 59.00	93.01- 64.00	66.01- 89.00	68.07- 79.50	73.31- 79.50	78.01- 83.52	82.01+ 88.05	00.07- 95.05	\$3.0 100
sep for Pain and Symptoms	0.00	1 0 0 0 0 0 (0.50)	75,47	75.00	0.0 54.00	54.0% 59.00	55.01- 63.00	68.01- 68.00	66.01- 72.50	72.8%- 77.00	77.5% 82.00	81.01- 86-30	86.01- 91.00	91.0 100
communication with Family 🧿	0.00	(0.50)	79.75	81.00	0.0. 82.00	80.0% 04.00	64,01- 60.00	88.01- 72.06	712.01- 76,00	76.01- 80.00	80.21- 84.00	54,01) 88,00	86.01- 62.00	92.0 100
Training Family to Care for Intent	0.00	(0.50)	76.09	76.00	0.0- 10.00	90.01- 10.00	56.0% 81.00	\$1.01- 86.00	66.01- 71.55	71.31- TT-00	17.05- 82.00	152.071- 87.00	87.01- 82.00	\$2.0 100

Levels of Care

Quarterly

The Quarterly Levels of Care show the average of daily census and level of cares provided on average per quarter versus the state and national average.

LEVELS OF CARE - QUARTERLY	EVELS OF CARE - QUARTERLY						₩ 2020 -
Measures	Q1- 2020	Q2- 2020	Q3- 2020	State	National	Sample Da	te Range
Average Daily Census	19.90	19.90	19.90	54.93	68.50	Jan 1, 2017 - I	Dec 31, 2017
Provided Routine Home Care and other levels of care	0.00	0.00	0.00	0.00	95.10	Jan 1, 2015 - I	Dec 31, 2017
Provided Routine Home Care only	0.00	0.00	0.00	0.00	4.90	Jan 1, 2015 - I	Dec 31, 2017

Annual

The Annual Levels of Care shows how their scores on the domains and measures are trending annually including the average. The trending column graphically shows per measure whether the organization is trending up or down.





VELS OF CARE - ANNUAL				🛓 Download 👻	🔒 Print	₩ 2020
Domains & Measures	Q1-2020	Q2-2020	Q3-2020	Annual Ave	rage	Trending
Average Daily Census	13.70	13.70	13.70	13.70		••
Provided Routine Home Care and other levels of care	0.00	0.00	0.00	0.00		°•
Provided Routine Home Care only	0.00	0.00	0.00	0.00		· · · ·

Medical Conditions

Quarterly

The Quarterly Medical Conditions show the average of daily census and percentages of cancer, heart disease, dementia, respiratory, stroke and other conditions on average per quarter versus the state and national average.

EDICAL CONDITIONS - QUARTERLY	≜ De	wnioad =	000	bedinw	🖶 Print	# 2020		
Measures		Q1- 2029	Q2- 2020	93- 2020	State	National	Sample D	ate Range
Average Daily Census	0	13.70	13.70	13.70	54,93	68.50	Jan 1, 2017 -	Dec 31, 2017
Percent of Patients with Cancer		32.00	32.00	32.00	23.36	(1997) (1997)		5
Percent of Patients with Circulatory/heart disease	0	26.00	26.00	26.00	25.77	355	3	
Percent of Patients with Dementia	0	0.00	0.00	0.00	8.85	2.45		5
Percent of Patients with All other conditions	0	11.00	11.00	11.00	12.67	953	1	
Percent of Patients with Respiratory disease	0	0.00	0.00	0.00	7.41	325		3
Percent of Patients with Stroke	0	0.00	0.00	0.00	2.93	1.00		

Annual

The Annual Medical Conditions show the average of daily census and percentages of cancer, heart disease, dementia, respiratory, stroke and other conditions on average per quarter including the annual average. The Trending column graphically shows per measure whether the organization is trending up or down.







Measures		01-2020	02-2020	03-2020	Annual Average	Trending
Average Daily Census	Ð	13.70	13.70	13.70	13,70	
Percent of Patients with Cancer	0	32.00	32.00	32.00	32.00	
Percent of Patients with Circulatory/heart disease	0	26.00	26.00	26.00	26.00	
Percent of Patients with Dementia	0	0.00	0.00	0.00	0.60	
Percent of Patients with All other conditions	e	11.00	11.00	11.00	11.00	
Percent of Patients with Respiratory disease	0	0.00	0.00	0.00	0.00	
Percent of Patients with Stroke	0	0.00	0.00	0.00	0.00	

Location of Care

Quarterly

The Quarterly Location of Care shows the average of daily census and percentages of care provided including ALF, home, inpatient hospice and hospital facilities, NF, SNF and all other locations. It also shows the average per quarter versus the state and national average.

LOCATION OF CARE - QUARTERLY	± 0)ownload 👻	- 8 0	ownload	🖨 Print 🗰 2020 ▾		
Measures		Q1- 2020	Q2- 2020	Q3- 2020	State	National	Sample Date Range
Average Daily Census	Ø	13.70	13.70	13.70	54.93	68.50	Jan 1, 2017 - Dec 31, 2017
Care Provided in Assisted Living Facility	Ø	0.00	44.00	44.00	62.59		
Care Provided in Home	0	0.00	0.00	0.00	14.48		
Care Provided in Inpatient Hospice Facility	0	0.00	55.00	55.00	18.22		-
Care Provided in Inpatient Hospital Facility	0	0.00	1.00	1.00	4.20		-
Care Provided in Nursing Facility	0	0.00	0.00	0.00	0.48		
Care Provided in All other locations	0	0.00	0.00	0.00	0.55		
Care Provided in Skilled Nursing Facility	0	0.00	0.00	0.00	0.79		

Annual

The Annual Location of Care shows the average of daily census and percentages of care provided including ALF, home, inpatient hospice and hospital facilities, NF, SNF and all other locations. The trending column graphically shows per measure whether the organization is trending up or down.





LOCATION OF CARE - ANNUAL	CATION OF CARE - ANNUAL						
Measures		Q1-2020	Q2-2020	Q3-2020	Annual Average	Trending	
Average Daily Census	0	13.70	13.70	13.70	13.70	·•	
Care Provided in Assisted Living Facility	0	0.00	44.00	44.00	29.33		
Care Provided in Home	0	0.00	0.00	0.00	0.00	·•	
Care Provided in Inpatient Hospice Facility	0	0.00	55.00	55.00	36.67		
Care Provided in Inpatient Hospital Facility	0	0.00	1.00	1.00	0.67	·•	
Care Provided in Nursing Facility	0	0.00	0.00	0.00	0.00	·•	
Care Provided in All other locations	0	0.00	0.00	0.00	0.00	·•	
Care Provided in Skilled Nursing Facility	Ø	0.00	0.00	0.00	0.00	••	

SURVEYS

Survey Administration

The first report in the **Surveys** section is **Survey Administration** which shows a transparent view into the survey administration process with specific details on each month of the survey process.

- <u>Survey</u> Shows the survey period and method.
- <u>Survey Preparation</u> Shows how many patients were uploaded, eligible and how many were sampled to be contacted for the survey.
- <u>Survey Result</u> Shows how many surveys are currently ongoing, have not been completed, complete and the monthly response rate (organization).
- <u>CMS Submission</u> Confirms the sample CMS submission date and status.

NOTE: CAHPS survey data is typically submitted quarterly per CMS protocols.





WACL 1	DMINIST	SALIDA							Devertual 7	Brint
- 84	weg .	1	iner Preparati	63 -		640	ng Rosult		OVER	Artistics .
faint	Method	Optimized	ingen.	Surgist	they have	Unrequisited	Complete	Response form	Date	linter.
1011	Mood	301	200	140	187	1.	- 12	37.89%		Westerlas
1.2022	Most	501	204	147			42	43.39%		Unaffortes
1001	Mast	314	2006-	144				66.44%		Unsufferties
1-2821	Advand	801	200-	148		. 96	44	31.43%		Unartherida
0.2021	Mood	\$33	201	943		- 62	19	41.84%		Unarthuring
19-2001	Mort	819	205	1944		- E	(E)	35.475	Jair 10, 2023	Second
6-2021	Mant	406	203	142		99.	-63	30.29%	Jan 10, 2022	Sameria/
17-3302-1	Mont	907	200	142	6			42.23%	Jan 10, 2022	Security
1072-0	Minor	308	2008	142	- 14	1	. 65	42,94%	Get 18, 2821	territold
6-3021	Mued	7	19	2			- 84	21041	01818.2021	Baileophi
1022	Mort	hav	200	148		1	63	455	Gat 18, 2021	Second
193202-1	Madel	334	200	141	1.		10	37.89%	AJ 18, 2021	Balmahi

Survey Summary

Provides a summary of all patients that have completed a survey for the month chosen. The composite scores in the report match those on the publicly recorded CMS Home Health Compare website. Change the month by selecting the

calendar drop down February 2022 button in the top right. Patients that have consented to have their names taken will show in the summary, those who have not will be represented by anonymous asterisks.

URVEY SUMMAR	Y: FEBRUAR	Y 2022		≜ 00	• baolmu	Print Fi	February 2022 -	
Tracking Number	Name	S1-Care of Patients O	52- Communication O	S3-Specific Care Issues 😡	G1-Rating 9 or 10 😧	62- Recommended O	Comments	
Z\$9JH7H3MFGMAIGJ		0%	50%	100%	0%	0%	-	
MBDUUK3YAZOLWCPB	Eldora Fay	0%	50%	100%	0%	0%	Yes	
PIVD4M7YIFHCMD6E		0%	50%	100%	0%	0%	5	
2YJADC9ITF9Z5DWQ	Cletus Bode	0%	50%	100%	0%	0%	Yes	
PBBN076HPRLA9KYH	Morgan Poillich	0%	50%	100%	0%	0%	Yes	
IDJSHCA84CETK3GU	Zelda Alterwerth	0%	50%	100%	0%	0%	8	
HI6AJOLJTWL7RH1R	Moshe Waelchi	0%	50%	100%	0%	0%	Yes	

Hover over the question mark **?** icon to see which survey questions comprise that category. Select the bold Sample ID to see the details of the survey including how each question was answered.

15



	anth: Moy. 2023 Jumber: XFVIYM50			
🖨 Print		ef Presidua	1 of 1	Nert X
	Question	Respor	ne	
Q1	How are you related to the person listed on the survey cover letter?	My par	ent	
Q2	For this survey, the physics "family member" refers to the person listed on the survey cover letter. In what locations did your family member receive care from this hospice? Please choose one or more.	Assist	ed living	facility
Q3	While your family member was in hospice care, how often did you take part in or oversee care for him or her?	Usually	e -	
Q4	For this survey, the hospice team includes all the nurses, doctors, social workers, chaplains and other people who provider hospice care to your family member. While your family member was in hospice care, did you need to contact the hospice team during evenings, weekends, or holidays for questions or help with your family members care?	1 Yes		

Survey Result

Shows monthly results of patient surveys along with specific patient surveys. Select the month to view or find a specific Survey Result by using the search bar. Sort through results list by selecting the 1 icon. A description of the different statuses is listed on the right of the page. Selecting the bold Sample ID to see the details of the survey including how each question was answered.

					Parts of Providentian				
arch					Status Description Completed	Survey com	pleted		
Tracking Number	Patient Name	Wave 1 - Mail †	Wave 2 - Phone	Final Status	Break-Off	Patient star survey	ted but did	not fully complete	
ZS9JH7H3MFGMAJGJ			-	Completed	Deceaned	Patient deceased and unable to complete survey			
MBDUUK3YAZOLWCPB	Eidora Fay		-	Completed	Denied Service	Patient den health agen		ig service from home	
PIVD4M7YIFHCMD6E	2008-0001		÷.,	Completed	Ineligible	Patient inel		12.20	
2YJADC9ITF9Z5DWQ	Cletus Bode		-	Completed	No Proxy Available	patient	varable to r	complete on bemail o	
PB8N076HPRLA9KYH	Morgan			Completed	Refused Survey	Patient dec		e survey s for patient	
	Pollich				Invalid Number	19201000	1601223	cted number for patient	
DJSHCAB4CETK3GU	Zelda Alterwerth		-	Completed	Maximum Attempta	Maximum n reach paties		tlempts made to	
					Queued	Survey not	nitiated		
HI6AJOLJTWL7RH1R	Mothe Waelchi		-	Completed	Ongoing	Began proc	ess to mac	h patient	
	TORNET				No Response	Completed	survey not	returned	
RVISZQLYEPWPLC30				Completed					

Navigate through surveys using the **Previous** and **Next** buttons.



2 3 4 5 Next



Survey Comments

Provides a summary of all patient comments. Navigate ranges of dates by using the button in the top right which lets users filter between past month, past three months, past six months, past 12 months and custom range. The page also features a tag cloud, which is a visual representation of the keywords mentioned often during surveys. The bigger the word, the more it was mentioned. Patient Name (asterisks if no consent), Comment Tone icon and Patient Comments are shown for each entry.

SURVEY COMMENTS			A Download +	Bhm	# 2022 Sep- 2025 Sep
		delivered bed next another busband's ill hospital hospice lenity weeks husband nurse first just came week men first just			
Patient Norre	Construent Toxic	Patient Comments			
	٥	While mp hundband was in the hospital the counselor curve in to talk about because. I was made to discharge my hundbard, Them another muse curve in welfs the field telling the 1 to safety my hundbard better. He was very II. We were parted out of the frequent will pape of a DF at the hospital. Apparently i ready don't have a short. The bod discharge to us arm very badly and part let first blend. The need 6 weeks talks and the day out regist, a tag Another near sense Talweeks lane, when could about talk and sense. The bod discharge to be dependent on the sense talk and the blended badle tables. The part of the first badle and the Another near sense Talweeks lane, when could about tables. Meeks we was telleved experience. There was once that there are all ney family was ensing. She dont all 1 the distances when the could give present in the was my whole the and I was indel Lanety all of the before tarming my hashard's heapies.	ski alog around for a long in salling from Lantty sugrey freque before the men with an came case time the first v of 9.00pm. No viotructions, it call: She showed up again	to, Next thing so a bed would be a ring fundamit. The real: She said we I was affold to or The rate! weak. N	meche was saying t was lefnered. It was the runns nar men cut my haatarefs woodd get supples. e them. This was an anful to cut i sent her away. All in

Survey Measures - Monthly

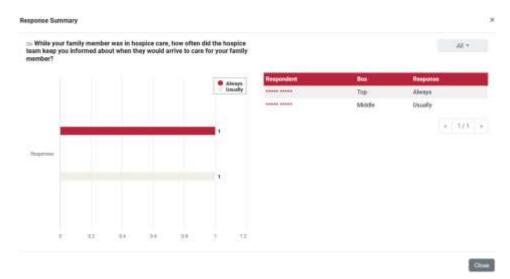
Summary of the data collected for a specific month. The graphs at the top of the page indicate how the organization scored for each survey composite compared to the state and national averages.

a a	EY MEASURES			A Download 🛛 🖶 P	New 202		Top Bom *
	 Harby of this Houses 02, Millingness 12 (3) Conversionation with Reconversed Has Houses Tarity 	Agency 1 Stat	SI. Teating Patient with Respect	54. Entertaniai anti bpantual Temporti	35. Halp he free and Spreatures	25. Tranto 10	g Family SI Ga (Passed)
bersti		Responses	Bep 2022	Nov 2022		State	Nation
61	Rating of this Hospion	2	100%	1.00		125	83%
62	Willingness to Recommend this Hospice	3	300%	1.00		80%	82%
51	Communication with Family		11675			77%	81%
Q6	Hospice team kept family informed about arrival	3	302%	100		-60%	00%
00	Hospice team explained things in a way easy to understand	1	100%			42%	87%
90	Hospice team kept informed of family member's condition	1	7082%			76%	87%
10	Hospice team gave confusing or contradictory information	28	5005	1943		88%	87%
ş14	Haspice team listened about problems with family member's hospice care	1	724	622		71%	77%

f in 🕑 👗 /Axxess

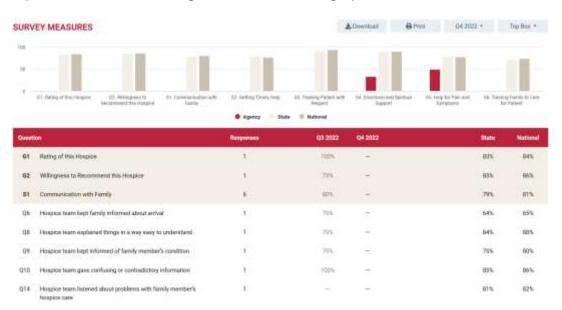


Select the question to see specifics including the Response Summary and Corresponding Respondents.



Survey Measures - Quarterly

Summary of the data collected for a specific quarter. The graphs at the top of the page indicate how the organization scored for each survey composite compared to the state and national averages. Below the graphs are a summary of all the data collected for the quarter. This report allows organizations to view the individual questions and how they are summarized in composite scores and how they impact the organization's ratings. This can also be used to monitor and identify potential improvement. Included is the Trendline that graphically shows per question whether the organization is trending up or down.

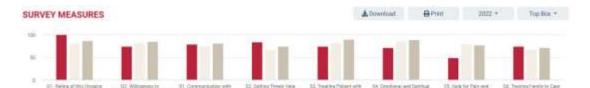






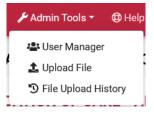
Survey Measures - Annual

This report provides a summary of the data collected for that year. The graphs at the top of the page indicate how well the organization scored for every survey composite compared to the state and national averages. Below the graphs are a summary of all the data collected for the year. This report allows users to view the individual questions and how they are summarized in composite scores and how they impact the organization's ratings.



A Agency Clute IP National 2022 Rating of this Hospice 100% 61 4 02% 67% 62 Willingness to Recommend this Hospice ÷ 75% 825 89% Communication with Family 80% 82% 06 Hospice team kept family informed about arrival 4 75% 50% 65% Hospice team explained things in a way easy to understand 75% 881 08 Hospice team kept informed of family member's condition 75% 09 z 22% BO'L 010 Hospice team gave confusing or contradictory information 1005 014 Hospicy team Extend about problems with family member's 1 055 tion. Uspice care

ADMIN TOOLS



User Manager

Users can be viewed, searched for, added and removed. To remove users, select the **Remove User** button to the far right. Select the **Add New User** button to add a user.





AGENCY'S USER MANAGEMENT

Find a user:		Add New User
Search by name or email		
Name	Email	Actions
Aahat Bhatnagar	@axxess.com	A* Remove User
Aayush Kumar	@access.com	Ar Remove User
Abdul Baute	@axxess.com	Ar Remove User
Abdulmujib Hashim	@axxess.com	A* Remove User
Abdulmumin Shehu	@axxess.com	A* Remove User

Enter the Email Address then select the Add button.

Add New User	×
First Name:	
Intel	
Last Name:	
Doe	
Email Address:	
email@example.com	
	Add

Upload File

Axxess Hospice users do not need to upload monthly patient files for CAHPS Hospice surveying. Organizations not using Axxess electronic health record systems must upload monthly patient information files before the fifth of each month. To upload, select **Choose file** and select the patient file. Select the red **Upload** button to complete the upload process.





Upload Patient File

Upload for:	HOSPICE INC		File Specifications
CAHPS Type:			Please upload your patient files according to our CAHPS file specification.
Hospice		٠	You can download a template file, Excel or CSV, and a Guide that
Select patient file (CSV, I	Excel):		describes each field of the template file below.
Choose file		Browse	Hospice
1 Upload			Excel Template CSV Template File Specification Guide
A Your patient data file will be	securely uploaded to us.		

File Upload History

This page is the history of uploads of patient sample files. The files have occurred for the organization either by the organization or automatically by Axxess allowing organizations to confirm that the CAHPS reports have been successfully uploaded into the system. The page is split into eight columns. The branch, period, type, uploaded by, records, status and upload date. There are three different statuses for upload files: pending, success and error.

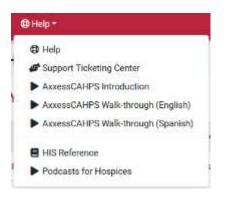
Branch		Period	Type	Uploaded By	Records	Status	Reason	Upload Date
	SPICE INC	02-2022	Hospice	Axxess Research	6	Success		Mar 1, 2022
	SPICE INC	01-2022	Hospice	Axxess Research	8	Success		Feb 8, 2022
HO	SPICE INC	12-2021	Hospice		8	Success		Jan 5, 2022
HC	SPICE INC	10-2021	Hospice		12	Success		Dec 7, 2021
HC	SPICE INC	11-2021	Hospice		9	Success		Dec 7, 2021
revious 1 1	ext.						Showin	ig 1 to 5 of 5 ent

UPLOAD HISTORY

HELP MENU







Help

Sends users to the Axxess Help Center CAHPS section that has links, instructional videos and tutorial for Axxess CAHPS.



Support Ticketing Center

The Support Ticketing Center allows designated super-users from each organization to directly engage with the Axxess support team to request help or to recommend feature enhancements.

HIS Reference

This page is a reference page for HIS questions. Navigate through the list of hospice items by selecting any of the categories on the left side which expands the category.





HIS REFERENCE

	Α.	A:	m	-	1	÷	171
- 10	tor	m	á1	0	a.		

- F. Prelevences
 I. Active Chappones
- J Health Conditions
- (Pain and Dyspries) • N. Madications
- + D. Service Utilization
- Z. Record
 Administration

A. ADMINISTRATIVE INFORMATION

A0050 Type of Record

Harn-Specific

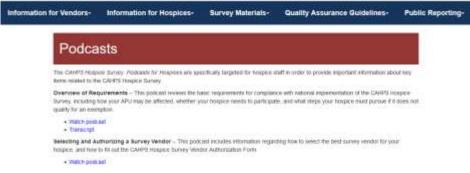
Instructions

- Indicate whether a HIS Incord is a new record to be added to the Buaity improvement beaution System (ORB) Assessment Bubmission and Processing (ASAP) system or if a HIS record that was pare/outly submitted and accepted in the QES ASAP system requires modification or inscrimition.
 - Code 1, Add new record: Select code 1 if this is a new HIE record that has not been previously submitted and accorded in the DES ABAP artiform
 If there is an existing record for the same patient, the same hospics, with the same reason for record, and the same event date(a) (for example, edmission
 - date, or discharge date), then the current record would be a duplicate and not a new record. In this case, when submitted, the record will be rejected by the DES ASAP system and a fast error will be reported to the provider on the Prox Validation Report. Further details on the Prox Validation Report can be found in Chapter 3
 - Code 2, Modify existing record: Select code 1 if this is a request to mostly data for a record that always has them submitted and accepted in the QFE ASAP system. Selecting occurs 2 markers a Modification Request that is used where a His second bas been previously submitted and accepted in the QFE ASAP system, but the record contains arrow. The types of errors that may be converted in a Modification Request incluse errors in the system. Get errors that may be converted in a Modification Request incluse errors in the system, data errors, the types of errors that may be converted in a Modification Request incluse errors in the system, data errors, other errors in the system contact. Then completion, and/or utilities errors in the system contact and the system.
 - Entris in most terms on a HB record can be corrected with a Modification Request, with some exceptions. For more details on Modification Requests, see Chapter 3 of This manual

Podcasts for Hospices

Direct link to hospicecahpssurvey.org which has 10 different podcasts ranging from the overview of requirements to the public reporting of survey scores.

CAHPS[®] Hospice Survey



PROFILE

Hover over the username in the top right of the page to switch between organizations (if assigned to more than one) or **Logout**.



🖾 Axxess Planner 🛛 🚊 Christoper CJ 🔻
Switch Agency:
曲 Testing Home Health Agency, Inc.
🕩 Logout

HELP CENTER

A great resource that is available 24/7 is our Help Center. It is a place to get answers to frequently asked questions or watch videos of all Axxess products. It can be accessed by going to <u>https://www.axxess.com/help/</u>

	DUR COMPLETE SUITE OF SOLUTIONS KNOWLEDGE BASE	
Getr	lelp Anytime, Anyw	nere
~	6	^
Home Health	Hospice	Home Care
\$		8
Revenue Cycle	Patient Engagement	Staffing

