

# CA State Report HHA

FAQ

*Prepared for*

**myUnity Essentials Financial**



**Netsmart**

---

[www.ntst.com](http://www.ntst.com)

11100 Nall Avenue  
Overland Park, KS 66211  
800.842.1973

© 2020 Netsmart Technologies, Inc. Confidential and Proprietary to Netsmart Technologies, Inc.

# Table of Contents

---

Overview.....	1
Section 2 – Persons Receiving Services (line 30) .....	1
Section 3 – Patients & Visits by Age (lines 1-11).....	2
Section 3 - Admissions by Source of Referral (lines 15-28).....	3
Section 3 - Discharges by Reason (lines 30-45).....	4
Section 3 - Visits by type of Staff (lines 50-60) .....	5
Section 3 - Visits by Primary Source of Payment (lines 65-73).....	6
Section 4 – Patients and Visits by Principal Diagnosis (lines 1-35) .....	7
Section 4 - Patients and Visits by Principal diagnosis (lines 40–41).....	10

# Overview

The State of California requires home health agencies to submit an [Annual Utilization Report](#). Follow the steps below to retrieve the necessary data from myUnity Essentials Financial. These reports can also be run from a central location under File > Report Groups for “System” Group Type. Review the [Report Groups User Guide](#) or contact Support for assistance if needed. If using the Reports Group, use the Override Dates selection to enter the reporting year, but confirm all other selection criteria (Unit, Modality, etc.) prior to previewing/printing the report.

**Note:** per the ALRTS specifications some patient counts are duplicated while some are unduplicated. As such, your patient counts may vary for different sections of the report.

## Section 2 – Persons Receiving Services (line 30)

Go to **Patient > Admission Report** or press the **Alter** button if running from **Report Groups**.

### General Options tab

**Report Sequence:** Unit.

**Selection Type:** Unit. Select unit(s) on the Specific Includes tab.

**Date Selection:** Reporting Year

**Top Sequence:** Unit (if reporting for multiple agencies)

**Report Type:** Active

**Report Detail:** leave unchecked

### More Options tab

**Only Include if Visit Within Date Range:** check this option

**Unduplicated Counts:** check this option

Press **Preview** and use the “Un-Dup Count” number.

5/12/2021 3:21:25 PM  
 Unit Sequence  
 LOS Totals are Average Days

**Section 2 - Line 30**  
 Units From: 1/1/2017 To: 12/31/2017

Active Patients Page 1  
 Home & Hospice Care Services  
 Home Health Unit

	Admit Count	Disch Count	Un-Dup Count	Active Count	LOS
Home Health Unit:	36	22	34	14	457
<b>Grand Totals:</b>	36	22	34	14	457

## Section 3 – Patients & Visits by Age (lines 1-11)

Go to **Stats > Services Provided** or press the **Alter** button if running from **Report Groups** for a duplicated patient count by age.

### General Options tab

**Sequence:** Unit. If submitting one report to the State for multiple units, add age category totals for each unit together.

**Selection Type:** Unit. Use Specific Includes tab specify the unit(s).

**Care Type:** leave all checked except for non-visit types (ex. supplies).

**Billed/Not Billed:** All-Chgs

**Report Detail:** check “Age” (Note: when Age is checked, the program defaults to “Patient” detail also)

**Charge Date Selection:** enter the reporting year

**Date Type:** Charge Date

### ‘More Options’ tab

**Age Categories:** set according to State reporting requirements.

**Show Case Totals:** check this option for a duplicated patient count

The screenshot displays two windows of the 'Statistical Analysis - Section 3 - Lines 1-11' software. The left window shows the 'General Options' tab with various configuration options. The right window shows the 'More Options' tab, where the 'Age Categories' section is highlighted with a red box, showing a range of 10 to 120. The 'Show Case Totals' checkbox is also checked in the 'More Options' tab.

Press **Preview** and use the Patients and Visits counts from the last page of the report.

5/12/2021 3:32:04 PM  
 Unit Sequence  
 Actual-Gross/Time  
 Selected Charge Dates

**Section 3 - Lines 1-11**  
 Units From: 1/1/2017 To: 12/31/2017

All-Chgs Page 2  
 Home & Hospice Care Services  
 Home Health Unit

	Patients	Gross	Net	Allowance	Time	Billed-Qty	Actual-Qty
<b>Home Health Unit</b>							
Age	Patients	Visits	Age	Patients	Visits		
0 - 10:	0	0	61-70:	10	73		
11-20:	2	34	71-80:	5	57		
21-30:	0	0	81-90:	8	35		
31-40:	1	20	91-120:	4	29		
41-50:	1	5	Over 120:	0	0		
51-60:	3	8	Total:	34	261		
<b>Grand Totals:</b>	34	52,134.17	33,042.50	3,289.67	694.54	338	261

## Section 3 - Admissions by Source of Referral (lines 15-28)

Go to **Patient > Admission Report** or press the 'Alter' button if running from Report Groups. Clinical users should obtain this information from the clinical system.

General Options tab

**Report Sequence:** Ref-Source or Ref-Type (Type only works if Referral Sources have been assigned to a Referral Type in the Billing Module).

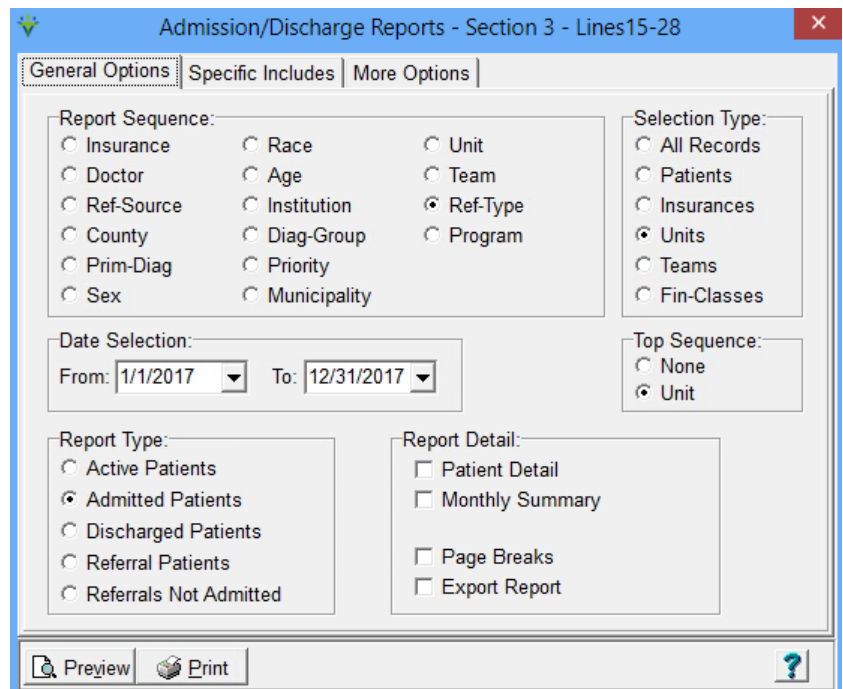
**Selection Type:** Unit. Select unit(s) on the Specific Includes tab.

**Date Selection:** Reporting Year

**Top Sequence:** Unit (if reporting for multiple agencies)

**Report Type:** Admitted

**Report Detail:** leave unchecked



Press **Preview** and use the "Admit Count" number.

5/12/2021 3:48:38 PM  
 Ref-Type Sequence  
 LOS Totals are Average Days

**Section 3 - Lines 15-28**  
 Units From: 1/1/2017 To: 12/31/2017

Admitted Patients Page 1  
 Home & Hospice Care Services  
 Home Health Unit

	Admit Count	Disch Count	Un-Dup Count	Active Count	LOS
<b>Home Health Unit</b>					
Another HHA:	1	0	1	1	670
Doctor:	4	2	4	2	460
Hospital:	3	1	3	2	535
Other:	1	0	1	1	1369
zzz No referral Type:	50	28	48	22	477
<b>Unit Totals:</b>	<b>59</b>	<b>31</b>	<b>57</b>	<b>28</b>	<b>497</b>
<b>Grand Totals:</b>	<b>59</b>	<b>31</b>	<b>57</b>	<b>28</b>	<b>497</b>

## Section 3 - Discharges by Reason (lines 30-45)

Go to **Patient > Admission Report** or press the 'Alter' button if running from Report Groups.

General Options tab

**Report Type:** Discharged Patients

**Report Sequence:** Reason

**Selection Type:** Unit. Select unit(s) on the Specific Includes tab.

**Date Selection:** Reporting Year

**Top Sequence:** Unit (if reporting for multiple agencies)

**Report Detail:** leave unchecked

The screenshot shows a software window titled "Admission/Discharge Reports - Section 3 - Lines 30-45". It has three tabs: "General Options", "Specific Includes", and "More Options". The "General Options" tab is selected and contains the following settings:

- Report Sequence:**
  - Insurance
  - Doctor
  - Ref-Source
  - County
  - Prim-Diag
  - Sex
  - Race
  - Age
  - Institution
  - Diag-Group
  - Priority
  - Municipality
  - Unit
  - Team
  - Ref-Type
  - Program
  - Reason
  - Disposition
  - Condition
- Selection Type:**
  - All Records
  - Patients
  - Insurances
  - Units
  - Teams
  - Fin-Classes
- Date Selection:**
  - From: 1/1/2017
  - To: 12/31/2017
- Top Sequence:**
  - None
  - Unit
- Report Type:**
  - Active Patients
  - Admitted Patients
  - Discharged Patients
  - Referral Patients
  - Referrals Not Admitted
- Report Detail:**
  - Patient Detail
  - Monthly Summary
  - Page Breaks
  - Export Report

At the bottom of the window, there are buttons for "Preview" and "Print", and a help icon.

Press **Preview** and use the "Disch Count" number.

5/12/2021 3:51:49 PM  
Reason Sequence  
LOS Totals are Average Days

**Section 3 - Lines 30-45**  
Units From:1/1/2017 To:12/31/2017

Discharged Patients Page 1  
Home & Hospice Care Services  
Home Health Unit

	Admit Count	Disch Count	Un-Dup Count	Active Count	LOS
<b>Home Health Unit</b>					
Admitted to SN Facility:	9	9	9	0	159
Alternate Care Program:	3	3	3	0	77
Discharged for cause:	1	1	1	0	369
Expired:	3	3	3	0	52
Goals Met:	21	21	20	0	162
HOSPITAL:	1	1	1	0	76
Moved out of Service Area:	1	1	1	0	120
Not Eligible:	3	3	3	0	1
Transferred to another agency:	1	1	1	0	60
Unit Totals:	43	43	42	0	136
Grand Totals:	43	43	42	0	136

## Section 3 - Visits by type of Staff (lines 50-60)

Go to **Stats > Services Provided** or press the 'Alter' button if running from Report Groups.

General Options tab

**Sequence:** Modality

**Selection Type:** Unit. Use Specific Includes tab specify the unit(s).

**Care Type:** leave all checked except for non-visit types (ex. supplies).

**Billed/Not Billed:** All-Chgs

**Report Detail:** leave all unchecked

**Charge Date Selection:** enter the reporting year

**Date Type:** Charge Date

'More Options' tab

**Show Case Totals:** unchecked



Press **Preview** and use the “Actual-Qty” number.

5/12/2021 3:56:02 PM  
Modality Sequence  
Actual-Gross/Time  
Selected Charge Dates

**Section 3 - Lines 50-60**  
Units From: 1/1/2016 To: 12/31/2016

**All-Chgs** Page 1  
Home & Hospice Care Services  
Home Health Unit

	Patients	Gross	Net	Allowance	Time	Billed-Qty	Actual-Qty
Co-Pay/Co-Insurance	1	350.00	350.00	0.00	0.00	1	1
Home Health Aide	4	16,462.50	14,129.00	0.00	244.33	179	176
Homemaker	1	374.00	374.00	0.00	3.75	4	4
LPN	1	160.00	0.00	0.00	0.25	1	1
Physical Therapy	4	21,195.00	1,330.00	2,393.00	65.66	121	102
PTA	2	384.00	192.00	0.00	2.58	2	2
Skilled Nursing	10	7,800.00	1,141.00	411.00	33.98	49	40
<b>Grand Totals:</b>	<b>23</b>	<b>46,725.50</b>	<b>17,516.00</b>	<b>2,804.00</b>	<b>350.55</b>	<b>357</b>	<b>326</b>

**Note:** This report provides duplicated patient counts and as such may be higher than the census from the Admission Report. The Patient Grand Total figure may also change when running this report with different sequencing options for the same reason.

## Section 3 - Visits by Primary Source of Payment (lines 65-73)

Go to **Stats > Services Provided** or press the **Alter** button if running from **Report Groups**.

General Options tab

**Sequence:** Financial Class

**Selection Type:** Unit. Use Specific Includes tab specify the unit(s).

**Care Type:** leave all checked except for non-visit types (ex. supplies).

**Billed/Not Billed:** All-Chgs

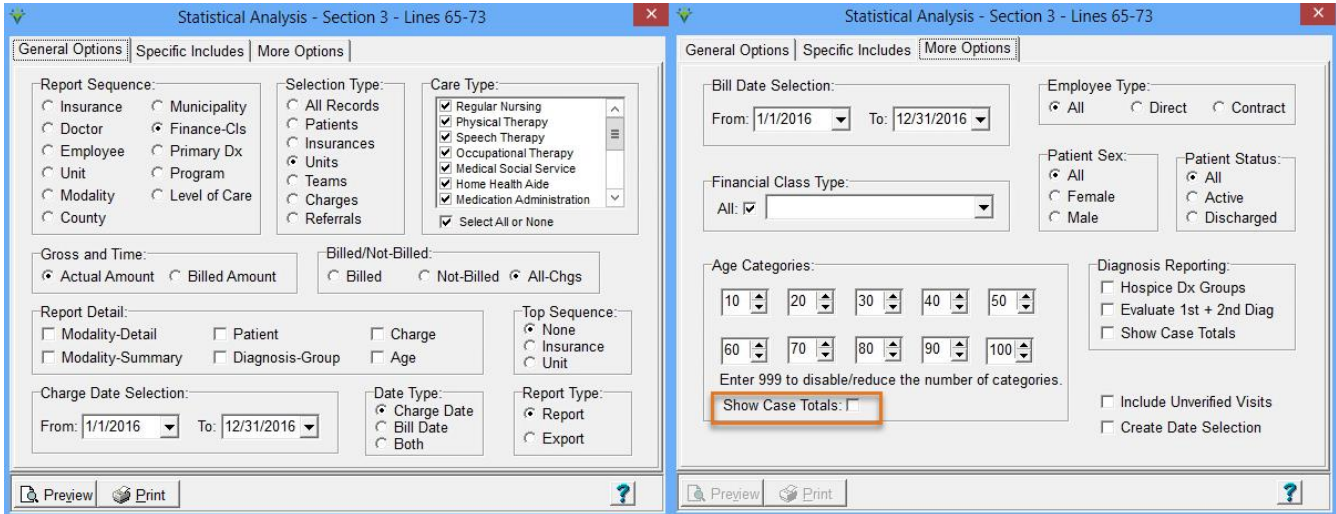
**Report Detail:** leave all unchecked

**Charge Date Selection:** enter the reporting year

**Date Type:** Charge Date

'More Options' tab

Show Case Totals: unchecked



Press 'Preview' and use the "Actual-Qty" number.

5/13/2021 2:37:37 PM  
 Finance-Cls Sequence  
 Actual-Gross/Time  
 Selected Charge Dates

**Section 3 - Lines 65-73**  
 Units From: 1/1/2016 To: 12/31/2016

All-Chgs Page 1  
 Home & Hospice Care Services  
 Home Health Unit

	Patients	Gross	Net	Allowance	Time	Billed-Qty	Actual-Qty
Commercial Class	3	18,147.50	16,607.50	1,514.00	210.53	180	175
Med Advantage PPS Class	1	200.00	0.00	0.00	3.00	1	1
Medicare Class	7	24,099.50	0.00	1,290.00	121.74	141	129
Self Pay Class	3	878.50	908.50	0.00	2.37	18	4
VA Class	2	3,400.00	0.00	0.00	12.91	17	17
<b>Grand Totals:</b>	<b>16</b>	<b>46,725.50</b>	<b>17,516.00</b>	<b>2,804.00</b>	<b>350.55</b>	<b>357</b>	<b>326</b>

## Section 4 – Patients and Visits by Principal Diagnosis (lines 1-35)

Go to **Stats > Services Provided** or press the **Alter** button if running from **Report Groups**.

General Options tab

**Sequence:** Primary Dx.

**Selection Type:** Unit. Use Specific Includes tab specify the unit(s).

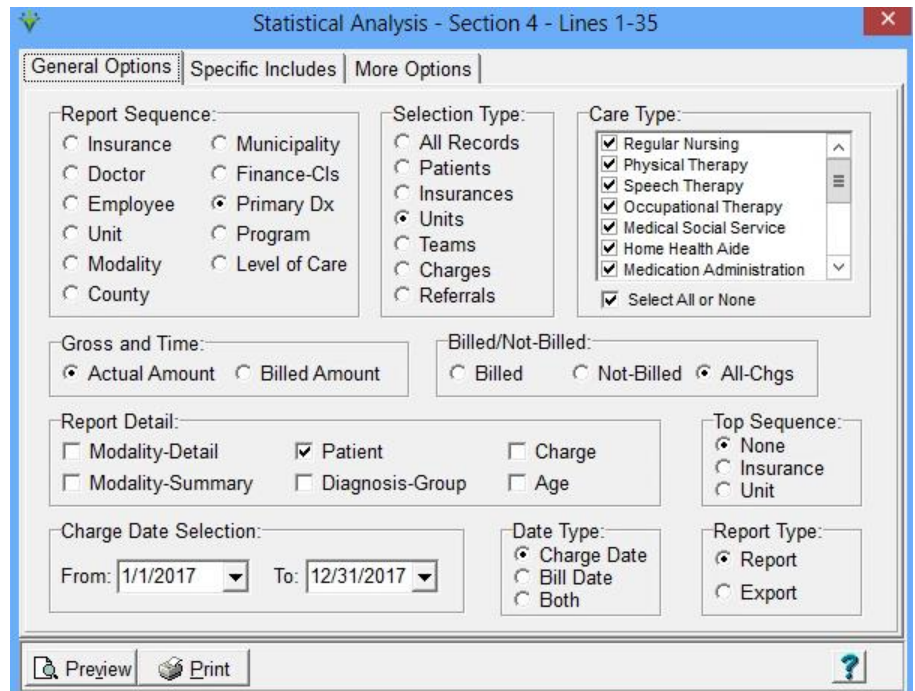
**Care Type:** leave all checked except for non-visit types (ex. supplies).

**Billed/Not Billed:** All-Chgs

**Report Detail:** check Patient

**Charge Date Selection:** enter the reporting year

**Date Type:** Charge Date



Press **Preview** and jump to the last page of the report for “Admits” in Diagnosis Group totals.

**Important:** For error in ALIRTS that the total patients on the Principal Diagnosis table cannot be less than the unduplicated persons total in Section 2, Line 30, refer to the ‘No Group’ diagnosis code information listed after the totals. This list of diagnosis codes did not belong to the code groupings provided in the CA OSHPD form. On the first page of this report, use the binoculars (upper left of preview window) to enter and search for a No Group diagnosis code (use first 4 digits of diagnosis code only). The number of patients listed for that specific code should be added to your ALIRTS report for the appropriate group.

5/13/2021 2:45:08 PM  
 Primary Dx Sequence  
 Actual-Gross/Time  
 Selected Charge Dates

**Section 4 - Lines 1-35**  
 Units From: 1/1/2017 To: 12/31/2017

All-Chgs Page 4  
 Home & Hospice Care Services  
 Home Health Unit

	Patients	Gross	Net	Allowance	Time	Billed-Qty	Actual-Qty
<b>Grand Totals:</b>	35	52,134.17	33,042.50	3,289.67	694.54	338	261

**Patients and Visits by Principal Diagnosis**

Group	Diagnosis-Group-Description	Patients	Admits	Visits	Dischs	Deaths	LOS
1	Infectious and parasitic diseases (exclude H	2	2	9	1		1380
4	Malignant neoplasms: Breast	1	1	1	1		369
6	Malignant neoplasms: All other sites	1	1	8	1		60
8	Diabetes mellitus	3	3	17	3		218
10	Diseases of blood and organs	0	1	15	1		76
11	Mental disorder	2	2	3	1		1714
12	Alzheimers disease	2	2	13	1	1	1410
13	Diseases of nervous system/sense organs	1	1	32	1		59
14	Diseases of cardiovascular system	4	4	44	2		3254
17	Diseases of respiratory system	1	1	23			1577
18	Diseases of digestive system	1	1	1			1237
23	Diseases of musculoskeletal and tissue	3	3	14	1		3024
24	Congenital anomalies/erinatal conditions	1	1	20	1	1	120
25	Symptoms signs ill-defined conditions	4	4	30	2		4592
26	Fractures exclude birth/path/mal-nonunion	1	1	1			1504
27	All other injuries	2	2	8	2	1	124
28	Poisonings and adverse external causes	1	1	6	1		61
32	Health hazards related to diseases	4	4	15	3		1877
99	Diagnosis in groups not listed above	1	1	1			1504
		35	36	261	22	3	24160

No group: Z809000;

**Note:** per the Annual Utilization report guidelines, patients are counted only once if readmitted with the same primary diagnosis code in the reporting year but twice if readmitted with a different primary diagnosis. As such, the patient count here may differ from the duplicated and/or unduplicated patient counts on other sections of the report.

# Section 4 - Patients and Visits by Principal diagnosis (lines 40–41)

Go to **Stats > Services Provided** or press the 'Alter' button if running from Report Groups.

General Options tab

Same as step above (no changes)

'More Options' tab

**Evaluate 1<sup>st</sup> + 2<sup>nd</sup> Diag:** check this box to get count of HIV and Alzheimer's Disease based on primary or secondary diagnosis.



Press **'Preview'** and jump to the last page of the report for HIV and Alzheimer's totals.

5/13/2021 2:54:00 PM

**Section 4 - Line 40-41**

All-Chgs

Page 2

Primary Dx Sequence  
Actual-Gross/Time  
Selected Charge Dates

Units From: 1/1/2016 To: 12/31/2016

Home & Hospice Care Services  
Home Health Unit

	Patients	Gross	Net	Allowance	Time	Billed-Qty	Actual-Qty
<b>Grand Totals:</b>	19	57,599.00	18,491.00	4,157.00	436.46	448	393

**Patients and Visits by Principal Diagnosis**

Group	Diagnosis-Group-Description	Patients	Visits
1	Infectious and parasitic diseases (exclude H	1	11
2	HIV infections	1	1
4	Malignant neoplasms: Breast	2	91
6	Malignant neoplasms: All other sites	1	12
10	Diseases of blood and organs	1	19
12	Alzheimers disease	1	2
14	Diseases of cardiovascular system	2	22
23	Diseases of musculoskeletal and tissue	1	1
25	Symptoms signs ill-defined conditions	4	192
27	All other injuries	2	22
32	Health hazards related to diseases	3	20
		19	393
	No group:		