



# Shipwrecked or Smooth Sailing

How to stay on course with GG and PDPM

April 13th, 2023

Presented By: Susan Krall, PT, CSO, QRM

# Agenda

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**Changes in Course!**

2

**GG Steering the Ship**

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**GG Missteps: Tips and Tools**

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**PDPM Essentials**

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**PDPM: Overcoming the Top 3 Misses**

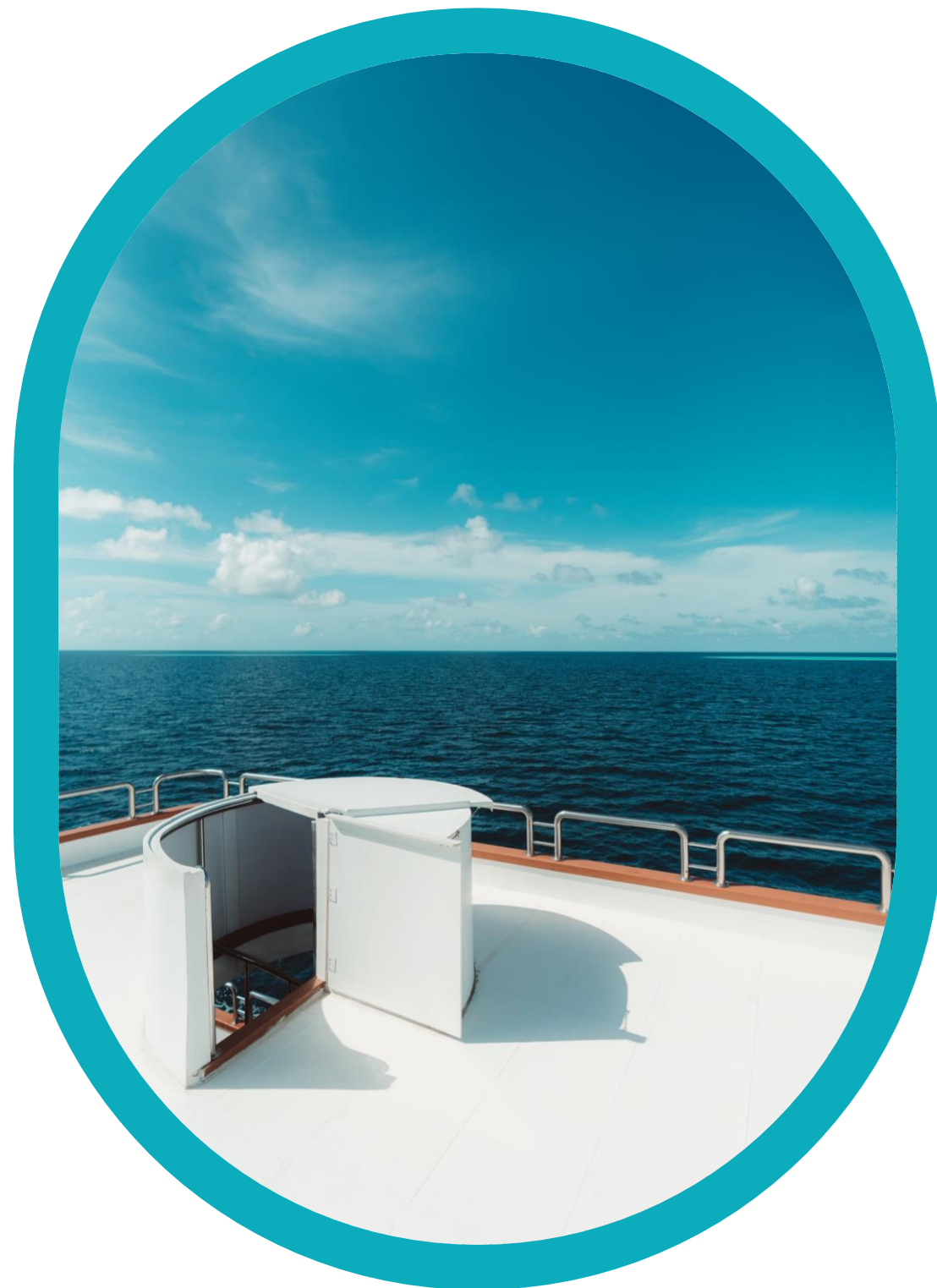
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**Our New Course: Resources**



# Why the focus on GG now?

It's time to batten down the hatches and prepare for G removal.



- G removal from the MDS data sets October 2023
  - G is currently utilized for Quality Measures - there has not yet been a replacement plan released
- 
- GG is the remaining mandated universal set of questions used across LTACHs, IRFs, SNFs and HH to assess functional levels in self care and mobility, a key factor in SNF QRPs (\$ Penalty for Dashing)
  - GG is utilized as a component of the PDPM Nursing Category and one of the drivers of reimbursement
- 
- States must replace RUG-based models with the loss of the OSA option at the end of 2025. Many are moving toward PDPM or subsets of PDPM

# MDS 3.0 Quality Measures - currently utilizing G ADLs

## Sailing into the great beyond

- Percent of residents who make improvement in function (SS)
- Percent of high-risk residents with pressure ulcers (LS)
- Percent of low-risk residents who lose control of their bowel or bladder (LS)
- Percent of residents whose need for help with ADLs has increased (LS)
- Percent of residents whose ability to move independently worsened (LS)

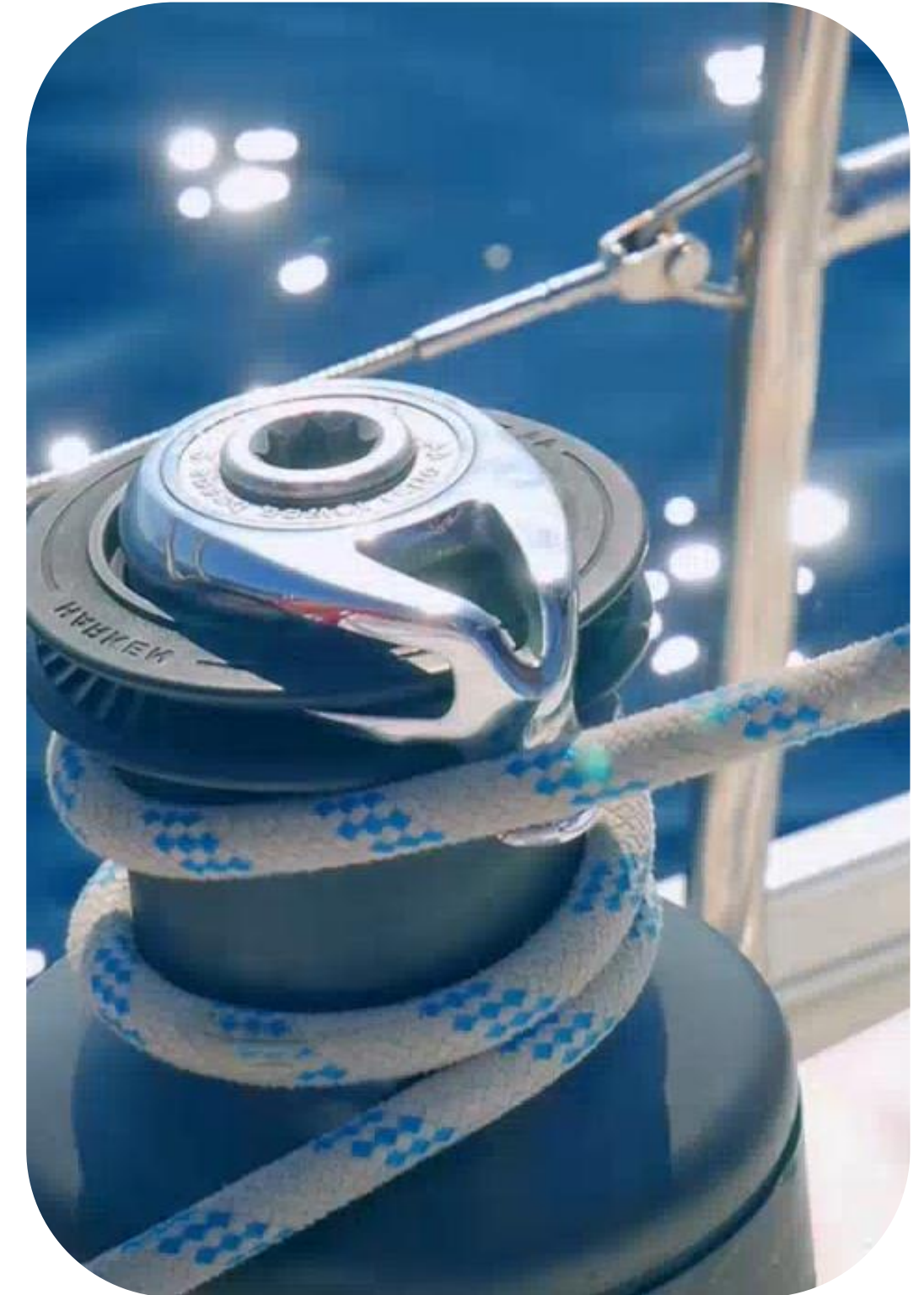


# SNF GG Essentials

## Learn the ropes.

Mandated set of questions utilized to determine self care and mobility functional levels assessed upon admission prior to the benefit of intervention through DC

- Capture of “usual performance” in 3-day window
- Foundation for establishing individualized goals and care plans
- Utilized by CMS to set expected outcomes
- October 2023 - included in Admission, Discharge, and OBRA/Interim completion
- Driver of reimbursement under PDPM models for PT/OT and Nursing
  - PT/OT - estimation of amount and cost of therapy needed
    - More **independence** = higher reimbursement
  - Nursing - reimbursement for level of effort to provide self care and mobility support
    - More **dependence** = higher reimbursement



# GG Rules

Gain your sea legs.

## The GG Rules

Assessment based on direct observation, resident self-reports and reports from qualified clinicians, care staff and/or family.

- Admission - first 3 days prior to the benefit of intervention
- IPA, OBRA and DC - ARD and 2 days prior

Documentation to support coding across all shifts and final determination

## Simplify Coding Capture

- 06** - Independent
- 05** - Set Up/Clean-up Assist
- 04** - Supervision/Touching
- 03** - Partial/Moderate (<1/2 the effort)
- 02** - Substantial/Max (>1/2 the effort)
- 01/07/09/10/88** - Not Attempted/Refused/Dependent

# CMS GG Training Videos

Keep your coding shipshape.



**GG0170C. Lying to Sitting on Side of Bed**

GG0170. Mobility	
1. Admission Performance	2. Discharge Goal
Enter Codes in Boxes	
02	<input type="checkbox"/>
C. Lying to sitting on side of bed: The ability to move from lying on the back to sitting on the side of the bed with no back support.	

**CODE 02** Substantial/maximal assistance



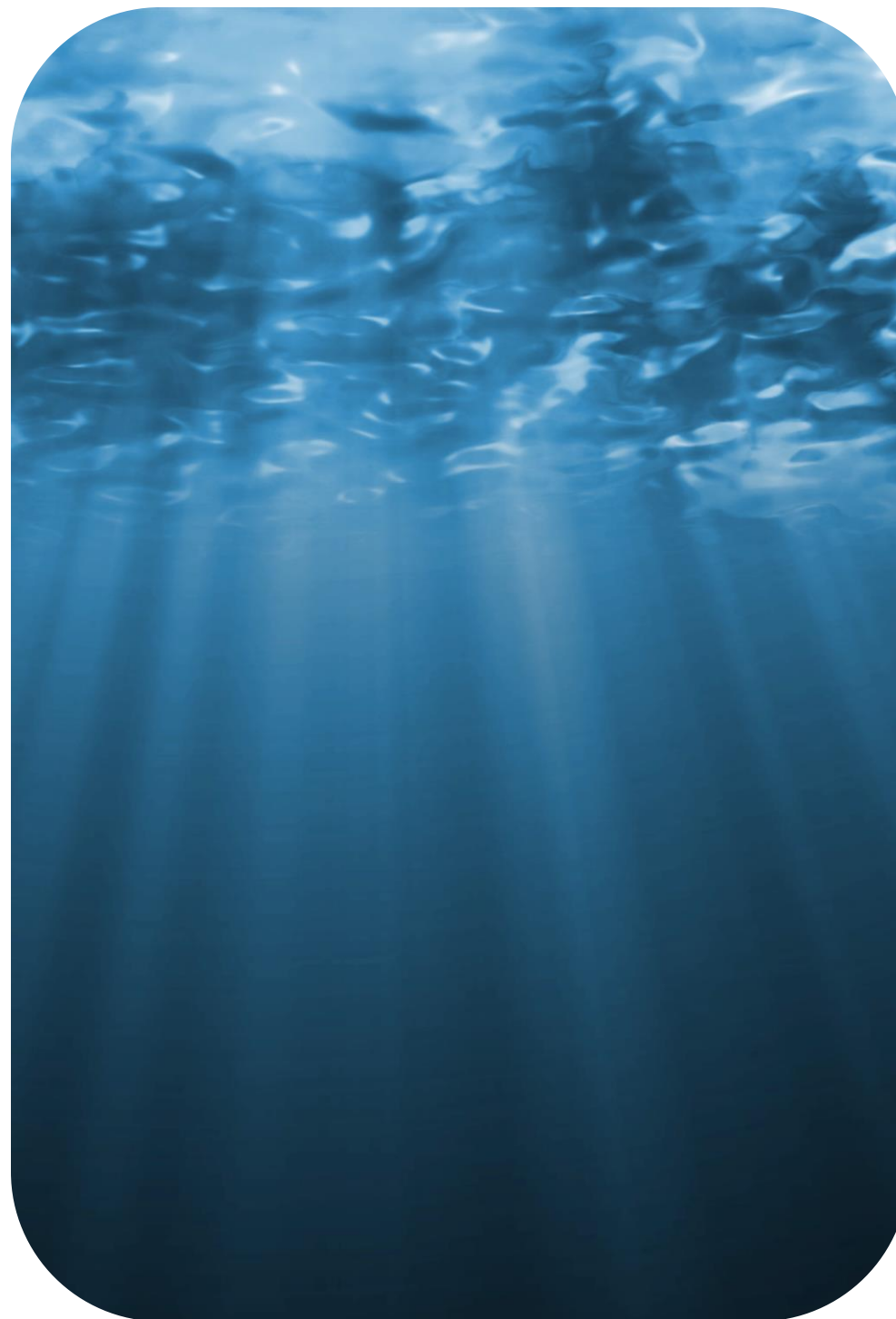
**GG0170C. Lying to Sitting on Side of Bed**

GG0170. Mobility	
1. Admission Performance	2. Discharge Goal
Enter Codes in Boxes	
03	<input type="checkbox"/>
C. Lying to sitting on side of bed: The ability to move from lying on the back to sitting on the side of the bed with no back support.	

**CODE 03** Partial/moderate assistance

# GG Missteps

What lies below the surface.



## Capture

- Defaulting to therapy eval coding
- Capturing 1x/day vs. each shift
- Overlooking patients and family's input
- Lack of a signed and dated source document (assessment) that correlates with the actual GG recorded values (must be by day 3)

## Consequences

- Inaccurate identification of level of assist
- Inappropriate goals
- CMS Expected Outcomes set too high - QRP impact
- Payment not commensurate with services provided
- Payment placed at risk under audit
- Will QM's begin pulling from GG for functional improvements vs. G?



# Poll Question #1

# Medical Review

Take the helm and run a tight ship.

## Impact of GG Accuracy

Lack of substantiation of MDS Section GG is frequently a citation among medical review findings, especially from Managed Care audit contractors. In absence of GG supporting documentation, reviewers are determining a resident's function score to be consistent with independent performance.

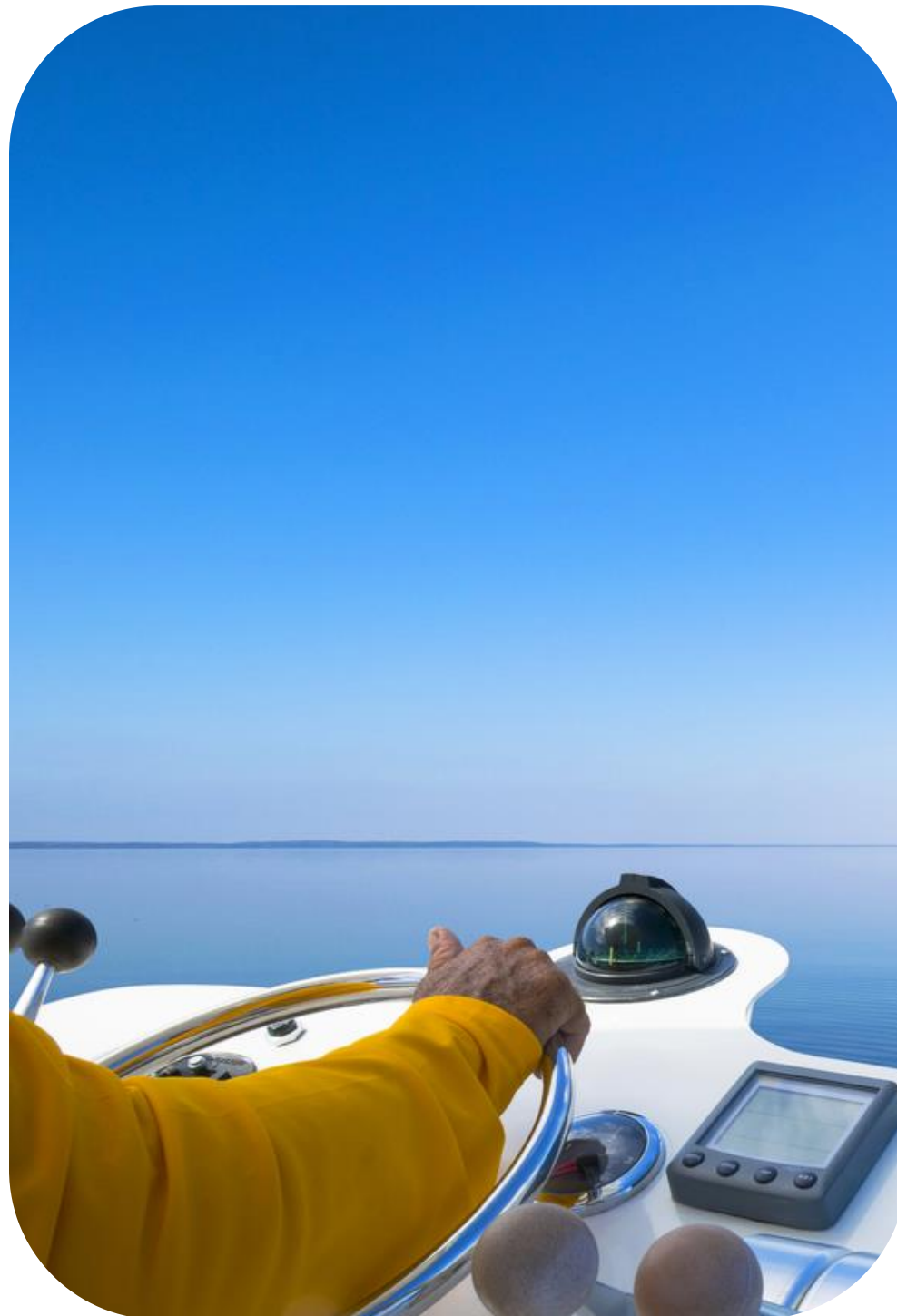
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**Example:** Recent findings on 3 separate claims cited lack of signed and dated assessments within days 1-3 equaling on average >\$1,500/claim and the only PDPM findings.



# Medical Review

Take the helm and run a tight ship.



## Ensure accuracy of values captured in Section GG

- Review scores recorded in MDS Section GG against the signed/dated assessment
- Confirm all values are supported by source documentation
- Verify source documentation and assessment are contained within the Electronic Medical Record for ease of location in event of an audit

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**Note:** *As review of GG items is often a quick win for medical review contractors, taking time to solidify processes and documentation tools will contribute to audit success.*

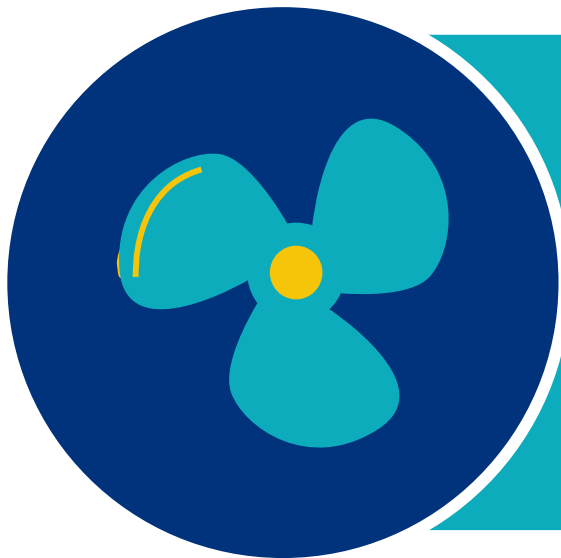
# GG Strategies

All hands on deck.



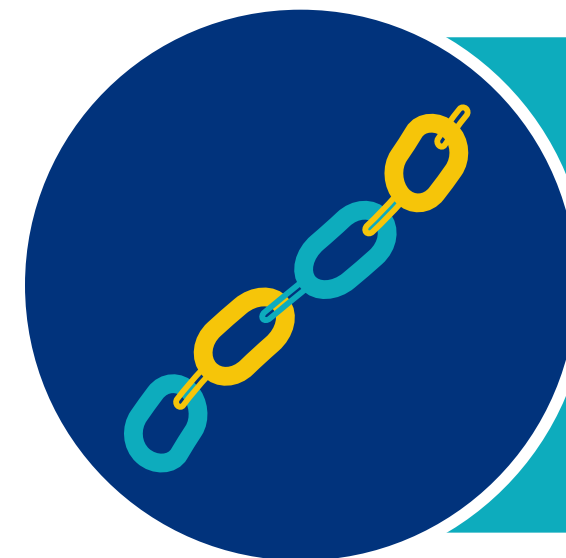
## Assign GG Champion

- Oversee capture process
- Review daily
- Assess and share score with IDT



## Educate

- Simplify questions for caregivers, families and patients per RAI definitions



## Communicate

- Discuss GG activities and level of assist each shift
- Gather from IDT
- Review in UR

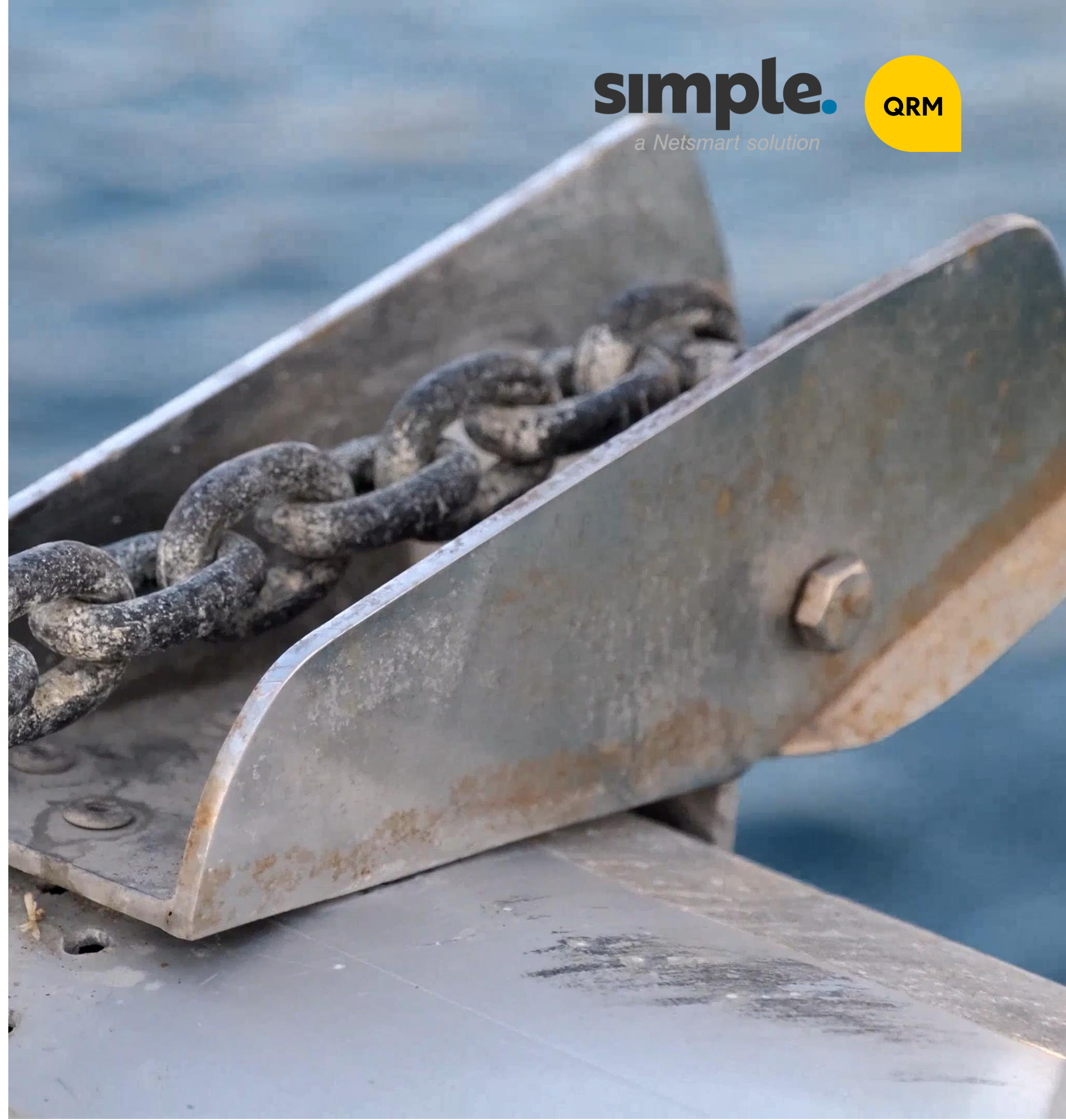


## Document

- Utilize 3-Day q shift tool
- IDT sign off on usual decision
- Enter into medical record

# Hoisting the anchor and full speed ahead to PDPM

**simple.**  
a Netsmart solution



# PDPM Essentials

Anchor your team in a safe harbor.



HIPPS Coding - 4 letter plus 1 number coding providing insight into specific diagnosis, conditions and functional levels - 100% from MDS

**\*Each letter ties to a CMI which is a multiplier of the base rate for each component**

# PDPM Essentials

Anchor your team in a safe harbor.

## 1<sup>st</sup> Letter: PT/OT Component (A-P)

- Primary reason for SNF stay, surgical HX and GG score

## 2<sup>nd</sup> Letter: ST Component 2 categories (A-L)

- Co-morbidities, cognitive impairment, neuro DX as primary
- Swallowing disorder and mechanically altered diet

## 3<sup>rd</sup> Letter: Nursing Component (A-Y)

- Clinical conditions
- Cognition (BIMS)
- GG score
- Depression (PHQ9)
- Behavior
- Restorative

## 4<sup>th</sup> Letter: NTA (A-F)

- 50 active DX and conditions

## 5<sup>th</sup> Number: Assessment Type

- 0 = IPA
- 1 = PPS assessment
- 6 = OBRA assessment



# PDPM Worksheet



## PDPM Component Criteria

PT/OT Component				SLP Component			
Items impacting CMG: Clinical Category & PT/OT Functional (GG UP) Score				Items impacting CMG: Clinical Category, BIMS, Diet, Section K, SLP Comorbidities			
	Collapsed Clinical Category	PT/OT GG UP Score	PT/OT Case Mix Group	SLP Related Comorbidities – MDS Item		SLP Related Comorbidities – ICD-10 Codes	
<input type="checkbox"/>	Major Joint Replacement or Spinal Surgery	0-5	TA	<input type="checkbox"/>	Aphasia I4300	<input type="checkbox"/>	Laryngeal Cancer I8000
<input type="checkbox"/>		6-9	TB	<input type="checkbox"/>	CVA, TIA, Stroke I4500	<input type="checkbox"/>	Apraxia I8000
<input type="checkbox"/>		10-23	TC	<input type="checkbox"/>	Hemiplegia or Hemiparesis I4900	<input type="checkbox"/>	Dysphagia I8000
<input type="checkbox"/>		24	TD	<input type="checkbox"/>	Traumatic Brain Injury I5500	<input type="checkbox"/>	ALS I8000
<input type="checkbox"/>	Other Orthopedic	0-5	TE	<input type="checkbox"/>	Tracheostomy Care while a resident O0100E2	<input type="checkbox"/>	Oral Cancers I8000
<input type="checkbox"/>		6-9	TF	<input type="checkbox"/>	Vent or Respirator Care while a resident O0100F2	<input type="checkbox"/>	Speech & Language Deficits I8000
<input type="checkbox"/>		10-23	TG	<b>Section K Swallowing Disorders</b>			
<input type="checkbox"/>		24	TH	Loss of liquids from mouth when eating or drinking		<input type="checkbox"/>	
<input type="checkbox"/>	Medical Management	0-5	TI	Holding food in mouth/cheeks or residual food in mouth after meals		<input type="checkbox"/>	
<input type="checkbox"/>		6-9	TJ	Coughing or choking during meals or when swallowing medications		<input type="checkbox"/>	
<input type="checkbox"/>		10-23	TK	Complaints of difficulty or pain with swallowing		<input type="checkbox"/>	
<input type="checkbox"/>		24	TL	None of the above		<input type="checkbox"/>	
<input type="checkbox"/>	Non-Orthopedic Surgery and Acute Neurologic	0-5	TM	<input type="checkbox"/> Clinical Category = Acute Neuro <input type="checkbox"/> SLP-Related Comorbidity <input type="checkbox"/> Cog Impairment: BIMS < 13; CPS > 0		<input type="checkbox"/> Mech Altered Diet <input type="checkbox"/> Section K Swallowing Disorder	
<input type="checkbox"/>		6-9	TN			SLP Case Mix Group	
<input type="checkbox"/>		10-23	TO	None	Neither	<input type="checkbox"/>	SA
<input type="checkbox"/>		24	TP	None	Either	<input type="checkbox"/>	SB
				Both	<input type="checkbox"/>	SC	
			Any One	Neither	<input type="checkbox"/>	SD	
			Any One	Either	<input type="checkbox"/>	SE	
			Any One	Both	<input type="checkbox"/>	SF	
			Any Two	Neither	<input type="checkbox"/>	SG	
			Any Two	Either	<input type="checkbox"/>	SH	
			Any Two	Both	<input type="checkbox"/>	SI	
			Any Three	Neither	<input type="checkbox"/>	SJ	
			Any Three	Either	<input type="checkbox"/>	SK	
			Any Three	Both	<input type="checkbox"/>	SL	



# PDPM Worksheet

Nursing Component						
Items impacting CMG: Extensive services, Specialized services, IV's, Co-Morbidities and Conditions, Nursing Functional (GG UP) Score, PHQ-9, BIMS, restorative therapies, respiratory therapy						
Extensiv	Trach care AND vent or respirator care while a resident Trach care OR vent or respirator care While a resident Infection isolation while a resident	Nursing Functional (GG UP) Score = 0-14		ES3 ES2 ES1	<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C	
		GG UP 0-14	Dep. Criteria			
Special Care High	<ul style="list-style-type: none"> <li>Comatose &amp; dependent</li> <li>Septicemia/Sepsis</li> <li>Diabetes with BOTH: Daily injections and Insulin order changes on 2+ days</li> <li>Quadriplegia &amp; GG UP score ≤ 11</li> <li>COPD AND SOB with lying flat</li> <li>Respiratory therapy x 7 days</li> </ul>	<ul style="list-style-type: none"> <li>Fever with one of the following:                             <ul style="list-style-type: none"> <li>Pneumonia</li> <li>Vomiting</li> <li>Weight loss</li> <li>Feeding tube</li> </ul> </li> <li>Parenteral/IV feedings while a resident n /*(K0510A1) or while not a resident (K0510A2)</li> </ul>	0-5 0-5 6-14 6-14	Yes No Yes No	HDE2 HDE1 HBC2 HBC1	<input type="checkbox"/> D <input type="checkbox"/> E <input type="checkbox"/> F <input type="checkbox"/> G
Special Care Low	<ul style="list-style-type: none"> <li>CP, MS, Parkinson's with GG UP score ≤ 11</li> <li>Respiratory failure and O2 therapy while a resident</li> <li>Feeding tube average across 7day lookback**</li> <li>Radiation therapy while a resident</li> <li>Dialysis while a resident</li> <li>2+ stage 2 pressure ulcers with 2+ skin treatments</li> </ul>	<ul style="list-style-type: none"> <li>Any stage 3 or 4 pressure ulcer OR unstageable with slough or eschar with 2+ skin treatments</li> <li>2+ venous/arterial ulcer with 2+ skin treatments</li> <li>Stage 2 pressure ulcer x1 and venous/arterial x1 with 2+ skin treatments</li> <li>Foot infection, diabetic foot ulcer, or other open lesion of foot with dressings</li> </ul>	0-5 0-5 6-14 6-14	Yes No Yes No	LDE2 LDE1 LBC2 LBC1	<input type="checkbox"/> H <input type="checkbox"/> I <input type="checkbox"/> J <input type="checkbox"/> K
Clinically Complex	Extensive services, special care high or special care low with GG UP score = 15-16 Pneumonia Hemiplegia/hemiparesis & GG UP ≤ 11 Surgical wounds or open lesion with treatments Burns While a resident: Chemotherapy, Oxygen Therapy, IV medications, Transfusions	GG UP 0-16	Dep. Criteria	CDE2 CDE1 CBC2 CA2 CBC1 CA1	<input type="checkbox"/> L <input type="checkbox"/> M <input type="checkbox"/> N <input type="checkbox"/> O <input type="checkbox"/> P <input type="checkbox"/> Q	
Behavioral & Cog	Cognitive impairment (BIMS score ≤ 9 or CPS > 3) Hallucinations Delusions Physical behavior symptoms towards others Verbal behavior symptoms towards others Other behavioral symptoms no directed towards others Rejection of care Wandering Restorative Nursing Services - see below Reduced Physical Function for RNP criteria	GG UP 11-16	Rest. Criteria	BAB2 BAB1	<input type="checkbox"/> R <input type="checkbox"/> S	
Reduced Physical	Restorative Nursing Services administered x 15 minutes per RNP program for ≥ 6 days:	GG UP 0-16	Rest. Criteria	PDE2 PDE1 PBC2 PA2 PBC1 PA1	<input type="checkbox"/> T <input type="checkbox"/> U <input type="checkbox"/> V <input type="checkbox"/> W <input type="checkbox"/> X <input type="checkbox"/> Y	

Non-Therapy Ancillary Component & Checklist		
12+ Points=NA; 9-11 Points=NB; 6-8 Points=NC; 3-5 Points=ND; 1-2 Points=NE; 0 Pts.=NF	Pts	
<input type="checkbox"/>	7	Parenteral IV Feeding: Level High (K0510A2, K0710A2)
<input type="checkbox"/>	3	Parenteral IV Feeding: Level Low (K0510A2, K0710A2, K0710B2)
<input type="checkbox"/>	2	Asthma, COPD, Chronic Lung Disease (I6200)
<input type="checkbox"/>	1	Cardio-Respiratory Failure and Shock (I8000)
<input type="checkbox"/>	2	Chronic Myeloid Leukemia (I8000)
<input type="checkbox"/>	1	Cirrhosis of Liver (I8000)
<input type="checkbox"/>	1	Complications of Specified Implanted Device or Graft (I8000)
<input type="checkbox"/>	1	Cystic Fibrosis (I8000)
<input type="checkbox"/>	2	Diabetes Mellitus (I2900)
<input type="checkbox"/>	1	Diabetic Retinopathy (I8000)
<input type="checkbox"/>	1	End-Stage Liver Disease (I8000)
<input type="checkbox"/>	1	Endocarditis (I8000)
<input type="checkbox"/>	1	Epilepsy - Intractable (I8000)
<input type="checkbox"/>	1	Inflammatory Bowel Disease (I1300)
<input type="checkbox"/>	1	Immune Disorders (I8000)
<input type="checkbox"/>	3	Lung Transplant Status (I8000)
<input type="checkbox"/>	2	Major Organ Transplant Status, Except Lung (I8000)
<input type="checkbox"/>	1	Malnutrition (I5600)
<input type="checkbox"/>	1	Morbid Obesity (I8000)
<input type="checkbox"/>	1	Myelodysplastic Syndromes and Myelofibrosis (I8000)
<input type="checkbox"/>	1	Multi-Drug Resistant Organism (MDRO) (I1700)
<input type="checkbox"/>	2	Multiple Sclerosis (I5200)
<input type="checkbox"/>	1	Narcolepsy and Cataplexy (I8000)
<input type="checkbox"/>	1	Pancreatitis - Chronic (I8000)
<input type="checkbox"/>	1	Psoriatic Arthropathy and Systemic Sclerosis (I8000)
<input type="checkbox"/>	1	Pulmonary Fibrosis and Other Chronic Lung Disorders (I8000)
<input type="checkbox"/>	1	Respiratory Arrest (I8000)
<input type="checkbox"/>	1	Systemic Lupus Erythematosus, Other Connective Tissue Disorders (I8000)
<input type="checkbox"/>	1	Aseptic Necrosis of Bone (I8000)
<input type="checkbox"/>	2	Bone/Joint/Muscle Infections/Necrosis (I8000)
<input type="checkbox"/>	1	Disorders of Immunity (I8000)
<input type="checkbox"/>	8	HIV/AIDS (SNF Claim)
<input type="checkbox"/>	2	Opportunistic Infections (I8000 - see Dx Mapping Tool)
<input type="checkbox"/>	1	Specified Hereditary Metabolic/Immune Disorders (I8000)
<input type="checkbox"/>	2	Wound Infection Code (I2500)
<input type="checkbox"/>	1	Foot Infections, Ulcers and Open Wounds (M1040A, M1040B, M1040C)
<input type="checkbox"/>	1	Severe Skin Burn or Condition (I8000)
<input type="checkbox"/>	1	Unhealed Pressure Ulcer - Stage 4 (M0300D1)
<input type="checkbox"/>	1	Bladder and Bowel: Intermittent Catheterization (H0100D)
<input type="checkbox"/>	1	Bladder Bowel: Ostomy inc. Urostomy, Ileostomy, and Colostomy (H0100C)
<input type="checkbox"/>	1	Feeding Tube (K0510B2)
<input type="checkbox"/>	5	Intravenous Medication (O0100H2)
<input type="checkbox"/>	1	Isolation (O0100M2)
<input type="checkbox"/>	1	Radiation (O0100B2)
<input type="checkbox"/>	2	Transfusion (O0100I2)
<input type="checkbox"/>	1	Suctioning (O0100D2)
<input type="checkbox"/>	1	Tracheostomy Care (O0100E2)
<input type="checkbox"/>	4	Ventilator or Respirator (O0100F2)

# PDPM Top Misses

Get back on course.

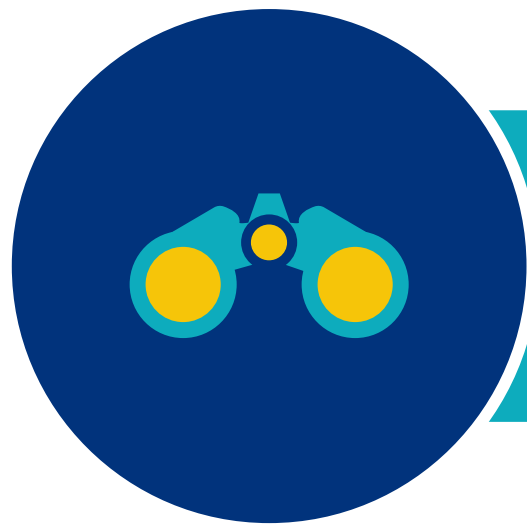


**ST**

Swallowing disorder

**ST**

Mechanically altered diet

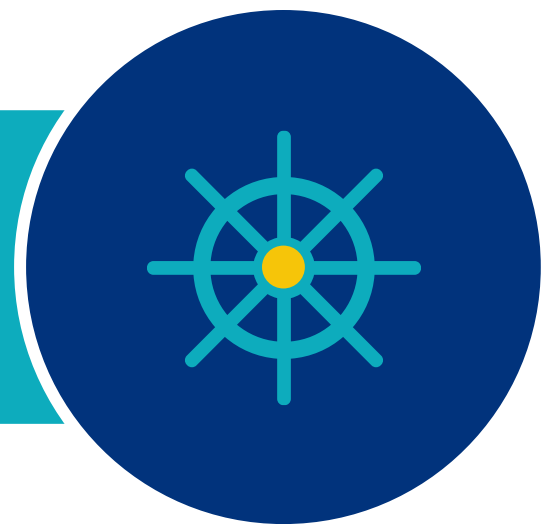


**Nursing**

Shortness of breath while lying flat with COPD

**NTA**

Failing to report conditions/DX in all MDS capture sites



# CMS % Capture Averages by Category

Reported by CORE Analytics

PDPM Category	Target Area	National %
PT/OT	Non-Orthopedic surgery and acute neurologic	21.6%
SLP 1	All three	7.3%
SLP 2	Both (mech altered diet & swallowing disorder) (SC)	15.2%
Nursing	Special care high (D-G)	35.1%
Nursing	Extensive services (A-C)	7.8%
Nursing	Depression end-split	19.7%
NTA	3-5 points (D) Note: E=1-2 and F = 0	33.0%
NTA	6-8 points (C)	9.5%
NTA	9-11 points (B)	3.8%
NTA	12+ points (A)	1.6%
N/A	PPD rate (AWI=1)	\$627
N/A	Average length of stay	26.3

**FY 2023 CMI and Base Rates**

Classification	PT CMI	PT Rate	OT CMI	OT Rate	SLP CMI	SLP Rate	Nursing Case Mix Group	Nursing CMI	Nursing Rate	NTA CMI	NTA Rate
<b>Rural</b>											
A	1.49	\$112.2	1.45	\$100.28	0.66	<b>\$20.51</b>	ES3	3.95	\$434.58	3.15	\$261.45
B	1.65	\$124.25	1.59	\$109.96	1.77	<b>\$54.99</b>	ES2	2.99	\$328.96	2.46	\$201.18
C	1.83	\$137.8	1.64	\$113.12	2.60	\$80.78	ES1	2.85	\$313.56	1.79	\$148.57
D	1.87	\$140.81	1.49	\$103.05	1.42	\$44.12	HDE2	2.33	<b>\$256.35</b>	1.29	<b>\$107.07</b>
E	1.38	\$103.91	1.37	\$94.75	2.28	\$70.84	HDE1	1.94	<b>\$213.44</b>	0.93	<b>\$77.19</b>
F	1.57	\$118.22	1.56	\$107.89	2.90	\$90.1	HBC2	2.18	<b>\$239.84</b>	0.70	<b>58.1</b>
G	1.62	\$121.99	1.60	\$110.66	1.98	\$61.52	HBC1	1.81	<b>\$199.14</b>		
H	1.13	\$85.09	1.12	\$77.46	2.78	\$86.37	LDE2	2.02	\$222.24		
I	1.10	\$82.83	1.15	\$79.53	3.43	\$106.57	LDE1	1.68	\$184.83		

**2023 CMI and Rate by HIPPS**

# Poll Question #2

# Overcoming the Misses

Break through the waves and educate your team on Section K.

## Swallowing and Mechanically Altered Diet

### Impact of Accuracy

- Early identification of potential swallowing problem that could lead to serious complications including the possibilities of aspiration, pneumonia and hospitalization
- Loss of ST component revenue capture commensurate with care

### Why the Miss

- Identification and evaluation of complications after the close of the assessment window
- IDT lack of education and information surrounding the 4 Section K questions driving capture of “swallowing disorder” for ST component (refer to PDPM worksheet)
- Mechanically altered diets not captured if upgraded during the window

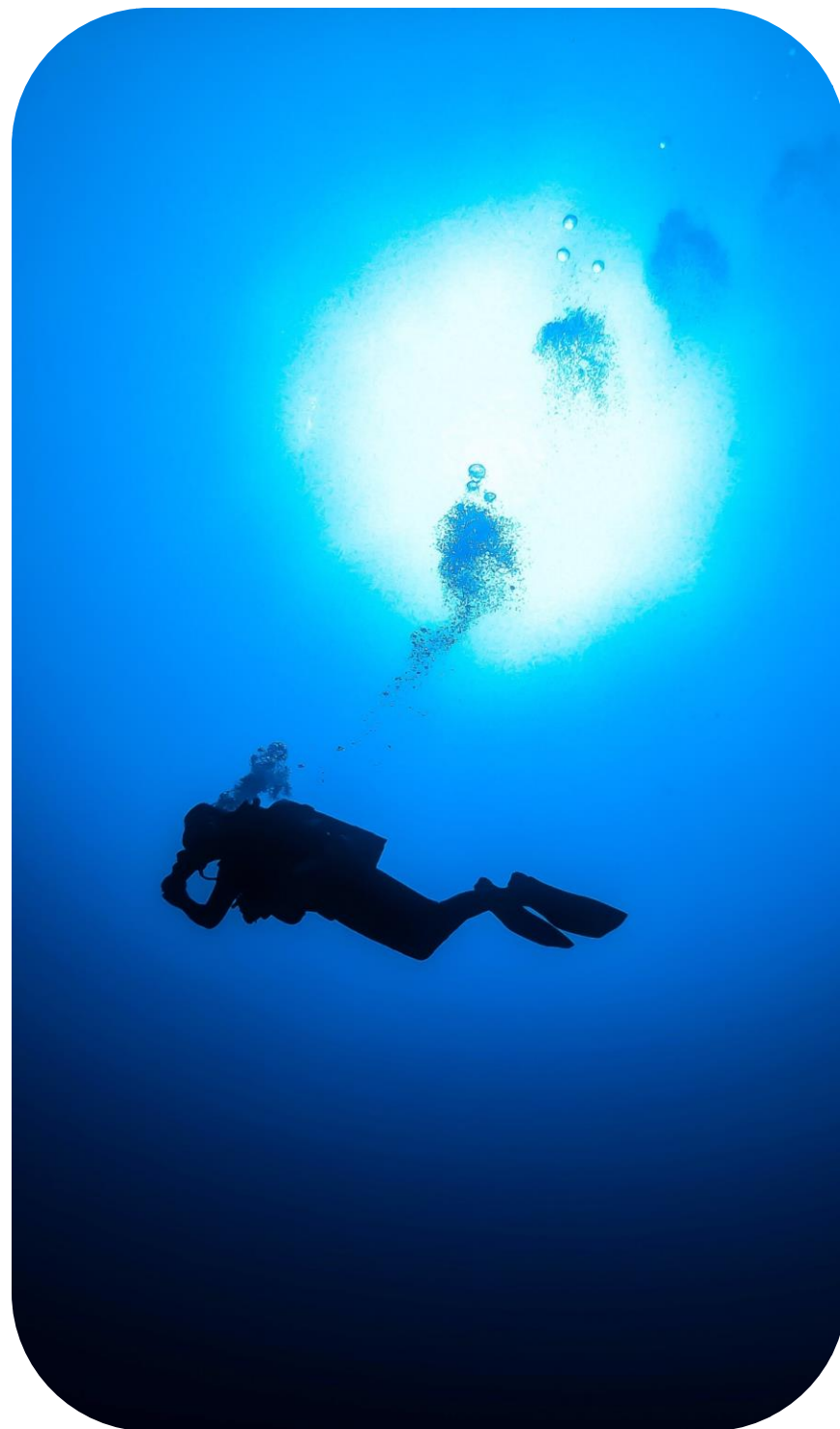
**Note:** *If ordered and consumed even once during look back it should be captured*

Myth: Must have a DX of Dysphagia to capture swallow disorder - however, identification of a problem leads to further evaluation and assessment



# Overcoming the Misses

Dive into the unknown.



**COPD/Asthma/Chronic Lung Disorder with shortness of breath while lying flat**

## Impact of Accuracy

- Potential lack of management of increased fluid on the lungs, difficulty breathing and potential lack of oxygen
- Miss of potential Nursing special care high reimbursement commensurate with care

## Why the Miss

- Lack of DX capture of active COPD or Chronic Lung Disorder by practitioner
- Absent documentation
- Head of bed elevated or resident sleeping in recliner without the reason found in the EMR

# Overcoming the Misses

Explore uncharted waters.

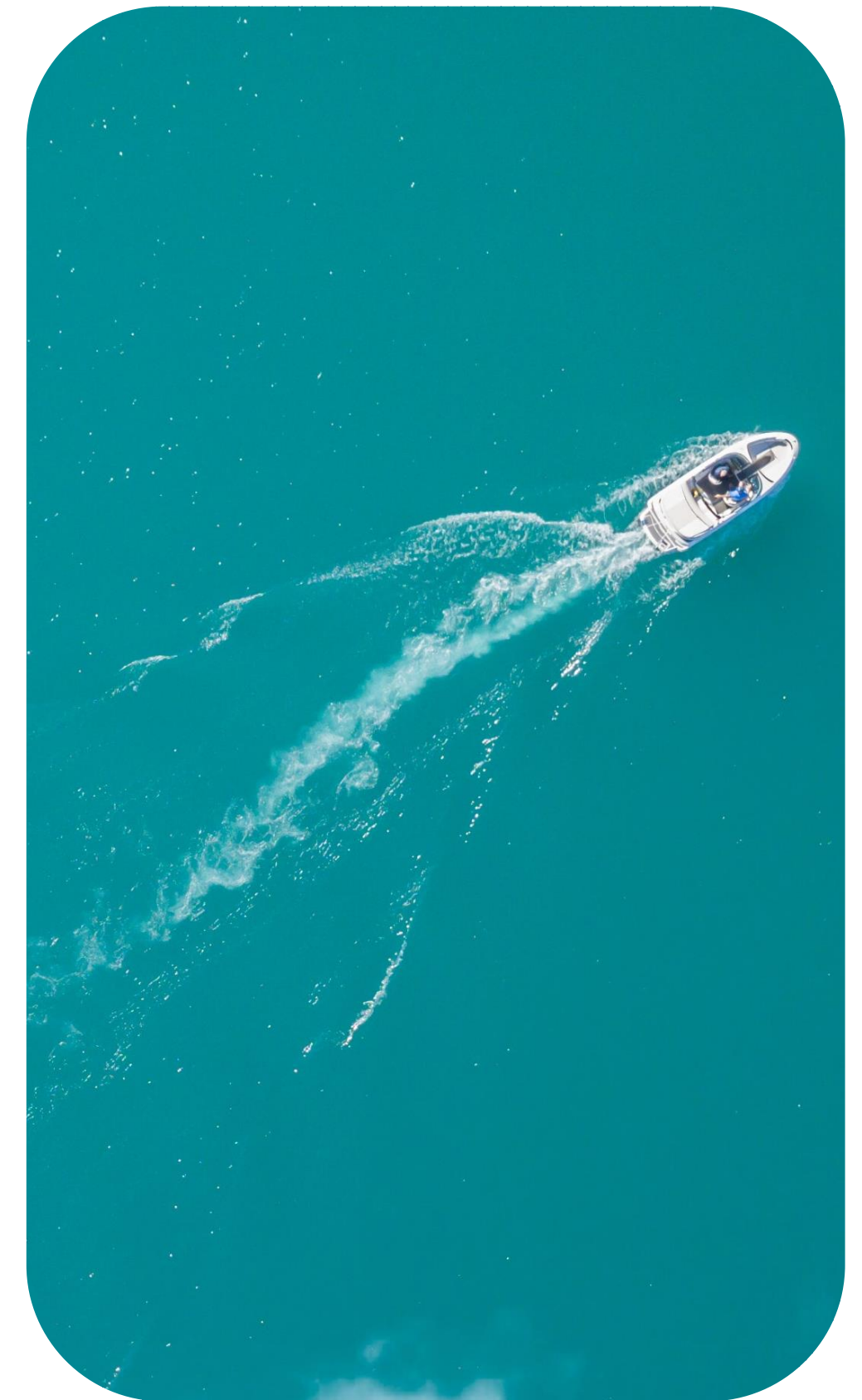
## NTA

### Impact of Accuracy

- Capture of all active DX and conditions leads to improvements in delivery of care, care planning and resolution of medical complications for successful outcomes.
- NTA value is TRIPLED day 1-3 for payment (hundreds of dollars at risk for medications and care provided)

### Why the Miss

- Lack of DX capture in I0020B AND in I8000
- Lack of DX in I8000
- Lack of check on MDS indicating an active DX or condition
- Absent provider DX in medical record to support capture
- Absent documentation in the medical record to support overall capture on MDS





# Smooth Sailing Beyond 2023

## Strategies for success

- Invest in education of your IDT members
- Identify gaps in capture, processes and communication
- Implement strategies for monitoring capture prior to ARD (UDA)
- Utilize your partners for support
- Trend and review your PDPM capture by Component
- Tune into state-by-state Medicaid reimbursement re-Modeling
- QM's - watch for updates from CMS on G replacement



# Resources

[MDS 3.0 Final Item Sets](#)

[Color Coded MDS from Briggs](#)

[RAI Manual](#)

[CMS GG Training Video](#)

[QRM PDPM Worksheet](#)

[AAPACN GG Tracker \(OBRA Assessment Example\)](#)

[QRM PDPM Rate Calculator with CMI Tab](#)

[Diagnosis List](#)

[QRM Physician Query Form](#)

[CMS Proposed Rule Fact Sheet](#)

[CMS Full Proposed Rule](#)

# A Rising Tide Lifts All Boats

Our next voyage: September 14, 2023



# Additional Service Offerings

QRM keeps you afloat.

## LTC Branding & Marketing

- Branding & Logo Design
- Website Design & Management
- Search Engine Optimization (SEO)
- Social Media Management
- Google Listing
- Print Collateral

[View Portfolio](#)

## MDS Oversight

- Monitoring MDS Submissions
- MDS Compliance Reporting
- Reimbursement Capture
- Regulatory Compliance
- MDS Support Hotline
- 5-Star Analysis
- RAI Education

[Learn More](#)

## Multi-Claim Contractor Audits

- MAC Probe Review
- SMRC Review
- UPIC Review

[Learn More](#)

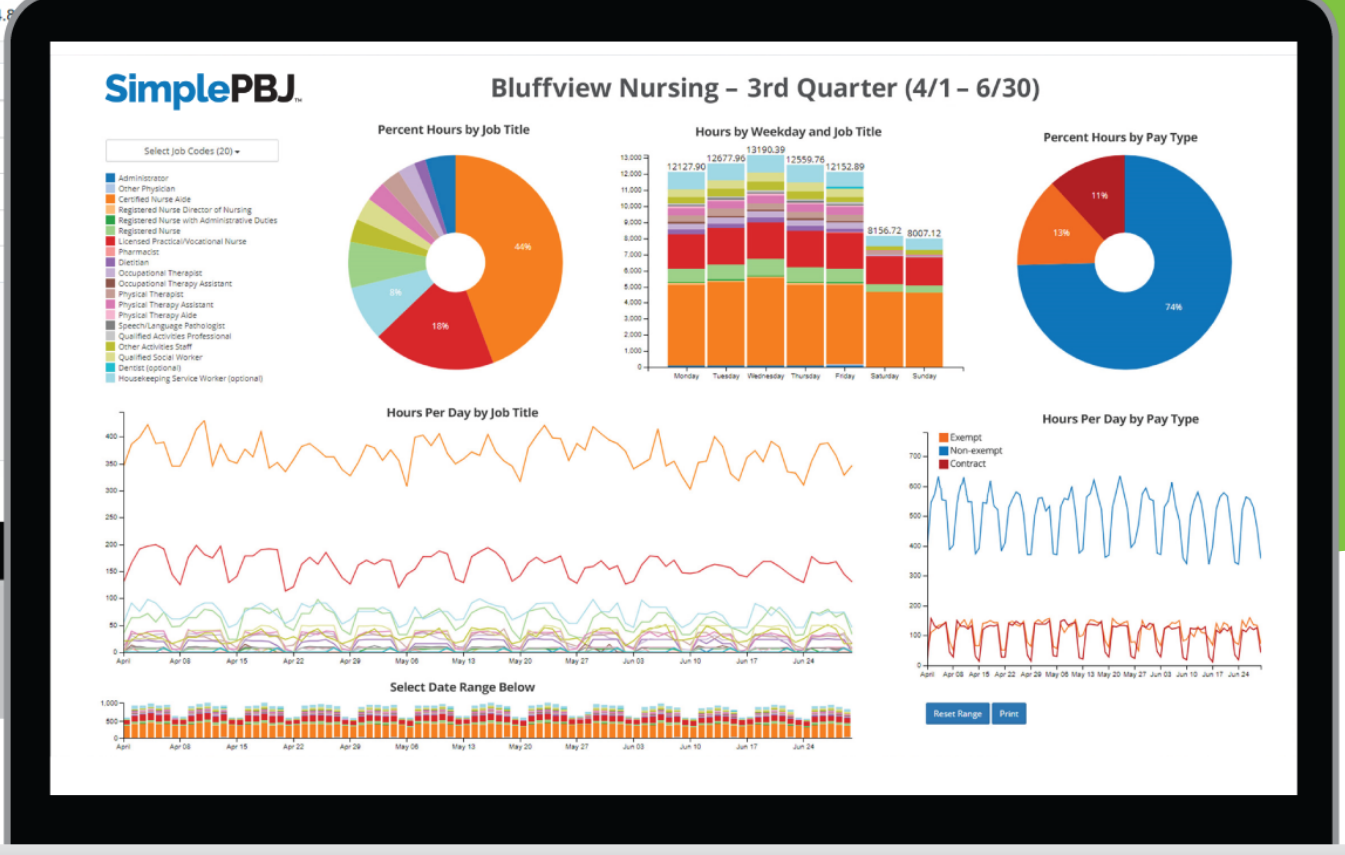
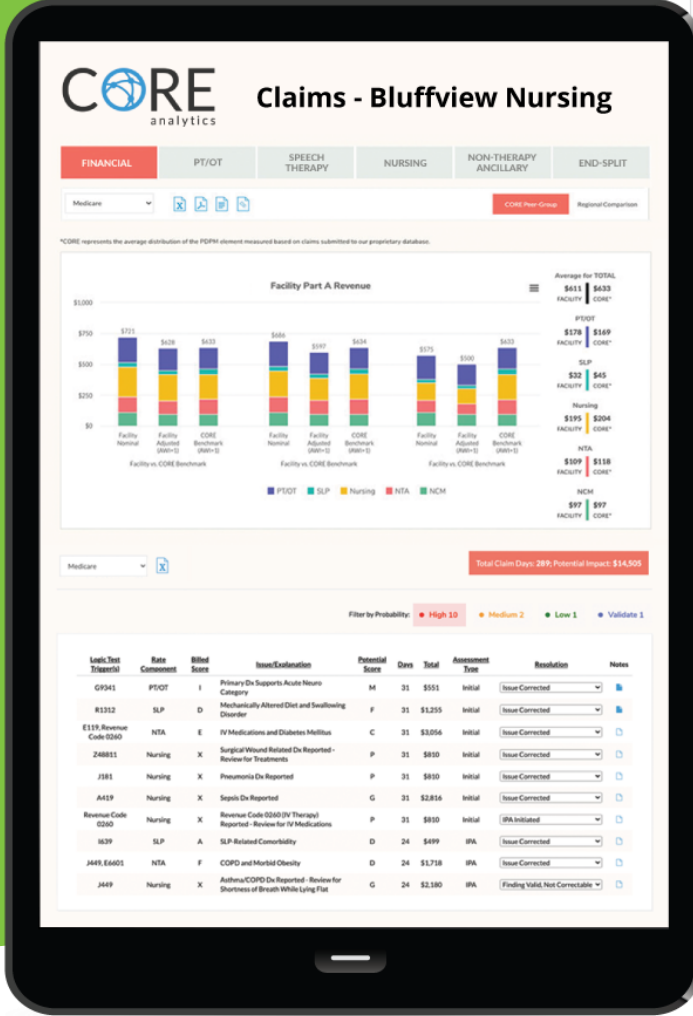
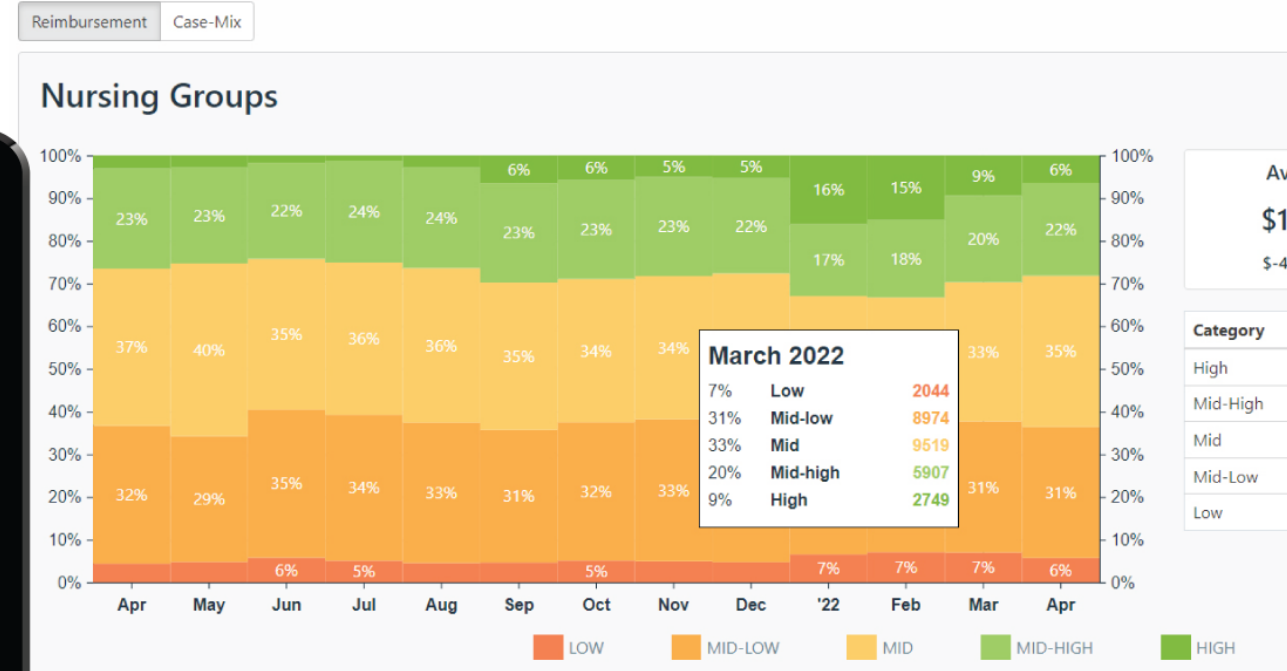


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# Questions?

Thank you for attending

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