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For post-acute providers

# Consumer Decision Guide for Post-Acute Care

Evaluation criteria to aid post-acute decision-making

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# Why consumers need a decision guide

## Hurdles arise during patient and family post-acute decision-making

Every year, millions of patients and their families must decide where to receive post-acute care. From the patient and family perspective, the decision-making process is rarely smooth and often fraught with difficulties.

### Barriers to a smooth post-acute selection process



**Lack of accessible information** to understand post-acute options



**Time constraints** that speed up an emotional and difficult decision



**Limited consumer-facing resources** to guide decision-making

Although tools like CMS Compare datasets provide quality and performance data for different providers, patients and families still report trouble finding relevant information. This is because public-facing tools don't cover key factors like lifestyle or care expectations that patients and families rank as being most important in their decision-making.

## Consumer criteria provides transparency

This resource is intended to make the post-acute selection process more transparent for consumers. Post-acute operators should use this document and the corresponding template to identify and convey the information that is most relevant to patients and their families during the post-acute selection process. This can help patients better prepare for their post-acute stay and identify why your organization is best suited to meet their individual needs.

### USE this resource to:

- ✓ Help patients and families understand what to look for in a post-acute setting
- ✓ Share information that matches patient and family priorities
- ✓ Educate patients on what they can expect from their post-acute stay

### DO NOT use this resource to:

- ✗ Engage hospital contacts during partnership discussions or meetings
- ✗ Serve as the only source of quality and performance data shared with consumers

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# FAQs about the consumer decision guide

## What is included in the decision guide?

There are two separate documents included in the Consumer Decision Guide for Post-Acute Care. The first document provides a list of metrics and criteria that cover multiple aspects of a patient and family's choice regarding post-acute care. The second document is a corresponding template intended to be used by patients and families to help them assess available discharge options. Access the corresponding template [here](#).

## Who should I share this decision guide with?

Post-acute operators should share the corresponding decision guide template on their website to aid patients and families who may be researching care options understand decision-making factors and how your organization is suited to their specific consumer needs. It may also be worthwhile for post-acute operators to share this information with referral sources and discharge planners so they can understand how your organization is equipped to address important patient and family needs.

## What information should be included in the decision guide?

Pages 4-6 of this document include a list of evaluation criteria across three different categories—services and policies, quality of care, and patient experience—that address different components of patient and family decision-making. These metrics are not intended to be comprehensive, but rather a guide to understand the type of information that should be shared with patients and families. Include metrics not covered in this checklist with patients and families if your organizations considers them to be important. At the same time, the goal of this decision guide is to simplify the post-acute decision-making process. Keep in mind that not all metrics will be relevant or applicable for your organization. Therefore, use organization needs to determine the information included in the decision guide.

We suggest populating the corresponding template with information for your organization and including guidance for patients and families on how to use this criteria to select the post-discharge option that best meets their needs.

## Consumers already have access to CMS Compare datasets, what is the benefit of this guide?

CMS Compare datasets contain quality and performance information for LTACHs, IRFs, SNFs, home health, and hospice agencies. While this information is critical in helping patients and families understand the quality and outcomes data of available post-discharge options, many decision-makers indicate a need for resources that include basic information—like medical services or lifestyle policies—to better understand their post-acute options. This decision guide is not intended to replace CMS Compare datasets, but rather serve as a supplement to educate patients and families on available post-discharge options and how they can meet consumer priorities.

## What data sources should my organization use to pull this information?

The [Post-Acute Pathways Explorer](#), the [Annual Turnover, Vacancy, and Premium Labor Benchmarks](#), CMS Compare datasets, and internal organization data and surveys should provide adequate information to fill out this the template.

# Category 1: Services and policies

This category address the basics of what patients and families should expect from recommended post-acute options.

Evaluation criteria	Why this matters to consumers	Data source
<b>Basic services</b> (e.g. nursing, therapy, wound care, and other clinical services)	Patients and families typically have a vague and limited understanding of the type of care they will receive in different levels of post-acute care. Enumerating what medical services are covered can correctly set patient and family expectations prior to receiving care.	Internal organization data
<b>Specialty services</b> (e.g. clinical specialties, dedicated equipment to manage specific populations)	Highlight if your organization has a dedicated clinical program for select conditions (e.g. COPD, heart failure, stroke). Include specific offerings, like staff certifications or a unique clinical management model, covered in this specialization to help patients and families understand why this specialization is unique to your organization.	Internal organization data
<b>Insurance information</b>	Patients and families consistently rank financial burden as a key deciding factor that influences post-acute choice. List major insurance providers that your organization accepts and what services are, or aren't, typically covered by accepted insurance plans.	Internal organization data
<b>Staff to patient ratios</b> (e.g. Physician, NP/PA, RN, CNA, PT/OT/SLP to patient ratios.)	Often, patients and families are not aware of who is responsible for managing the overall and day-to-day aspects of a patient's care. Use staff to patient ratios to convey who is the part of the patient's clinical team.	CMS Compare datasets, internal organization data
<b>Staff service hours per day</b> (e.g. average number of hours nurses or therapists spend with patients daily)	The average daily time each type of staff spends with patients gives prospective patients and families better insight into what their day-to-day may look like and set expectations on the type of care they will receive.	CMS Compare datasets, internal organization data
<b>Languages spoken by staff</b>	Access to staff that are fluent in languages besides English is an important factor for patients who are non-English speakers or speak English as a second language.	Internal organization data
<b>Visitation rules</b> (e.g. visitor hours, number of visitors allowed, virtual visitation options)	Visitation policies are important for patients and families, especially when selecting a long-term care setting. In addition to visiting hour and number of allowed visitors, consider including tele-visit options as well to communicate the different ways patients and families can stay connected.	Internal organization data
<b>Pet policy</b>	Given the extended length of stay in many post-acute settings, bringing pets, therapy dogs, or other emotional support animals is an important consideration for many decision-makers. Sharing pet policies can provide patients with necessary information to weigh their options.	Internal organization data

# Category 2: Quality of care

This category covers relevant quality and performance metrics to help patients and families distinguish high-performing providers from underperforming providers.

Evaluation criteria	Why this matters to consumers	Data source
<b>CMS Star Ratings</b>	If available, share CMS Star Ratings for your organization since Star Ratings can be a helpful measure of facility quality. Consider sharing both long-stay and short-stay ratings to aid patient decision-making for different types of post-acute care.	CMS Compare datasets
<b>Improvement in patient function measures</b>	Share how your organization can improve patient function and ability to perform activities of daily living. This metric can also set achievable expectations on how your organization can—and cannot—meet patient goals.	CMS Compare datasets
<b>Facility performance metrics</b> (e.g. readmission rate, length of stay)	Performance metrics like readmission rates or average length of stay are frequently used to differentiate high-quality providers. Share facility-wide metrics to communicate your organization’s quality outcomes to prospective patients and families.	Post-Acute Pathways Explorer
<b>Condition-specific performance metrics</b> (e.g. readmissions rate, length of stay)	Outcomes measure for top diagnoses referred to your organization can help patients and families understand the quality and care experience your organization delivers for relevant diagnoses.	Post-Acute Pathways Explorer <i>Note: Consider including risk-adjusted and diagnoses-adjusted national percentile rankings for readmissions and length of stay. This data is accessible through the System Outcomes report.</i>
<b>Staff turnover data</b>	While staff turnover is an industry-wide problem, emphasize these metrics if your organization outperforms national, state, and local turnover averages. Staff turnover and related labor metrics are helpful data points to convey strong quality.	Annual Turnover, Vacancy, and Premium Labor Benchmarks, Internal organization data
<b>Staff specialty certifications</b>	Special trainings, licenses, or certifications held by clinical staff can help patients and families understand how your staff are trained to meet their unique medical needs.	Internal organization data
<b>Covid-19 related safety protocols</b>	Due to Covid-19 outbreak fears, patients and families value information around safety protocols post-acute. Consider sharing staff vaccination rates, Covid-19 testing and monitoring protocols for visitors and staff, and other safety investments like air filtration machines or electrostatic cleaning devices.	Internal organization data

## Category 3: Patient experience

This category covers the day-to-day lifestyle expectations that patients and families should consider during the decision-making process.

Evaluation criteria	Why this matters to consumers	Data source
<b>Facility demographics</b>	<p>Since post-acute lengths of stay typically span several weeks, providing patients with the resident and staff demographics at your organization can improve patient comfort and understanding, especially for patients that belong to non-dominant<sup>1</sup> or LGBT+ groups.</p> <p><i>Note: Home health agencies should consider sharing staff demographics as that may be more meaningful for patients who opt to receive care in the home.</i></p>	Internal organization data
<b>Patient and family satisfaction scores</b> (e.g. NPS <sup>2</sup> , CAPHS <sup>3</sup> )	Since many patients and families already place a high emphasis on other patients' experiences when selecting a post-acute provider, use NPS scores or other patient satisfaction metrics to proactively share what matters to prospective patients.	Yelp, Google Reviews, patient satisfaction surveys
<b>Staff net promoter scores</b>	Patient and family rank experience with staff and perceived staff friendliness and happiness as strong indicators of whether they would receive care at a certain organization.	Glassdoor, Google Reviews, staff satisfaction surveys
<b>Dining options</b> (e.g. meal service times, ordering options, coverage of non-medical dietary needs)	Dining services are an important aspect of a patient's experience. Clarify dining expectations such as how meals are delivered and served, if non-medical dietary needs (e.g. vegetarian, halal, Kosher) are met, and what meal customizations are available.	Internal organization data
<b>Social activities</b>	Social isolation can be a big concern for patient and family decision-makers. Share available socialization opportunities to convey how your organization can meet these needs.	Internal organization data
<b>Wellness therapies</b> (e.g. art therapy, music therapy, massage therapy, spiritual services)	While access to additional therapies may not be the main deciding factor for patients and families, sharing access to these services can help distinguish your organization from market competitors.	Internal organization data
<b>Other amenities</b> (e.g. Transportation, co-located medical services)	Share additional amenities that are not covered in other categories here to help distinguish how your organization can improve patient and family experience.	Internal organization data

1. A group that does not make up the majority of race, religion, and/or language.

2. Net promoter scores are a measure of how likely a consumer is to recommend your service to a friend or colleague.

3. Consumer Assessment of Healthcare Providers and Systems Survey.

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