

5 Star Report User Tutorial

How to use the 5 Star Report on CHS.care

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CHS.care



Report Overview & Key Benefits

What this report offers

- Your projected Five-Star rating based on the most recent available data
- How each Quality Measure (QM) impacts your score
- Where improvement efforts will have the greatest impact
- How many residents are needed to change your rating

How the data is presented

- Five Star Points Summary Cards (Short, Long, Total)
- Quality Measures Table
- Measure Details (resident-level drilldown)

CHS Care

Division: All | Region: All | Facility: All | Quarter: CURRENT | PREVIOUS | 3 QTR AGO

QM Points / Stars: Short: 561 ★★★★★ | Long: 775 ★★★★★ | Total: 1336 ★★★★★

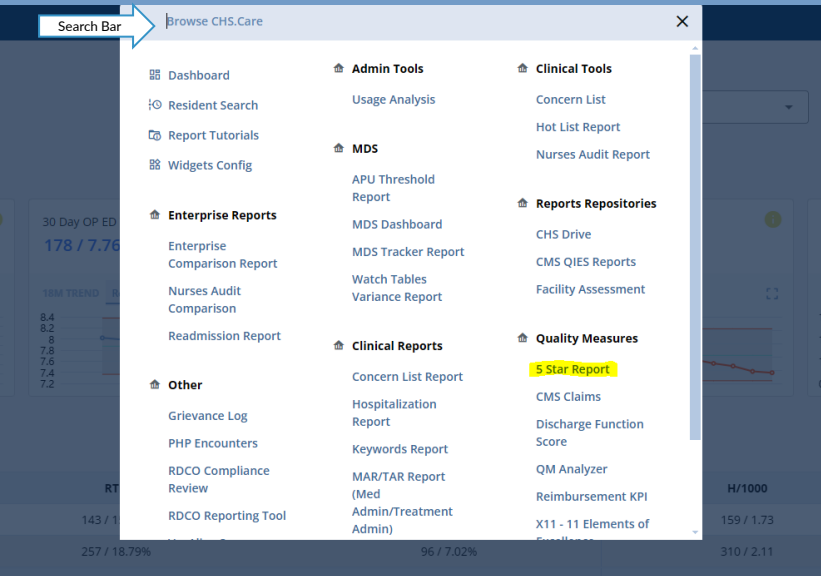
Q1 RATING THRESHOLDS

Rating	Short Stars	Long Stars	Total Stars
★ ★ ★ ★ ★	600-650	700-800	1300-1350
★ ★ ★ ★	450-500	550-650	1000-1100
★ ★ ★	300-350	400-500	700-800
★ ★	150-200	200-300	350-450
★	50-100	100-150	150-200

Quality Measure	Data Date Range	Score Details		Score Details		Five Star Points			
		Numerator	Denominator	Observed Score	Adjusted Score	Points / Out Of	To Lower	To Higher	To Max
Falls w/Inj Injury (I)	01/01/25 - 12/31/25	15	384	- 3.91%	- 3.91%	40 / 100	5	-2	-10
UTI (I)	01/01/25 - 12/31/25	0	383	- 0.00%	- 0.00%	100 / 100	3	-	-
Cath Inserted/Left Bladder (I)	01/01/25 - 12/31/25	0	356	- 0.00%	- 0.00%	100 / 100	2	-	-
Prof ADL Help (I)	01/01/25 - 12/31/25	13	329	- 3.95%	- 3.95%	150 / 150	9	-	-
Antipsych Med (I)	01/01/25 - 12/31/25	18	366	- 4.92%	- 4.92%	135 / 150	10	-3	-1
Move In/Dep W/Injury (I)	01/01/25 - 12/31/25	4	98	- 4.08%	- 4.08%	150 / 150	5	-	-
Pressure Ulcers (Long Stay)	01/01/25 - 12/31/25	28	385	- 7.27%	- 7.29%	40 / 100	1	-2	-19
Hospitalizations per 1,000 resident days (I)	10/01/24 - 09/30/25	-	-	-	- 1.94%	30 / 150	-	-	-
ED visits per 1,000 resident days (I)	10/01/24 - 09/30/25	-	-	-	- 2.11%	30 / 150	-	-	-
Antipsych Med (S)	01/01/25 - 12/31/25	0	208	- 0.00%	- 0.00%	100 / 100	1	-	-
Pressure Ulcer/Injury (QRP)	07/01/24 - 06/30/25	1	48	- 2.08%	- 1.50%	80 / 100	1	-1	-1
Discharge Function Score (QRP)	07/01/24 - 06/30/25	12	22	- 54.55%	- 54.55%	80 / 150	-1	1	4
Hospital Readmission (S)	10/01/24 - 09/30/25	-	-	- 44.70%	- 32.30%	15 / 150	-	-	-
ED Visits (S)	10/01/24 - 09/30/25	-	-	- 13.20%	- 10.20%	80 / 150	-	-	-
Discharge to Community (QRP)	10/01/22 - 09/30/24	-	-	- 31.40%	- 45.70%	45 / 150	-	-	-

Help/Support | Confidential information for quality assurance and performance improvement. Data is accurate as of 04/20/2025 6:02 AM. Powered by StarEdge.

Accessing the 5 Star Report



Where do I find this tool?

1. Log in to chs.care.
2. Click anywhere in the search bar located at the top center of your screen.
3. The 5 Star Report is located in the **Quality Measures** section of the menu.

Figure 1: Navigating to the 5 Star Report from the Search Bar menu



Pro Tip: Type the number 5 in the search box for quick navigation to the report.

Default View at a Glance

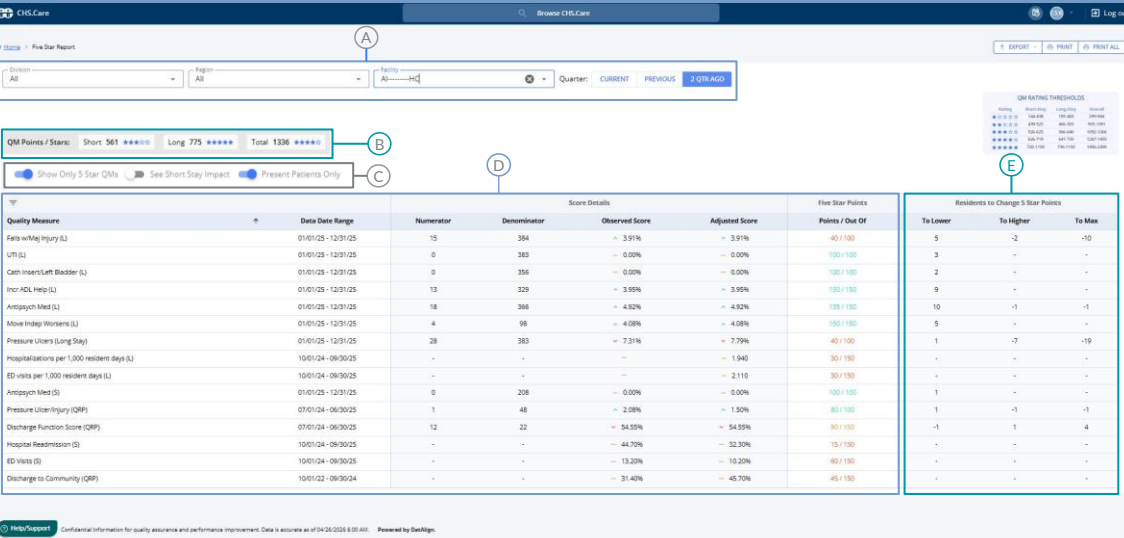
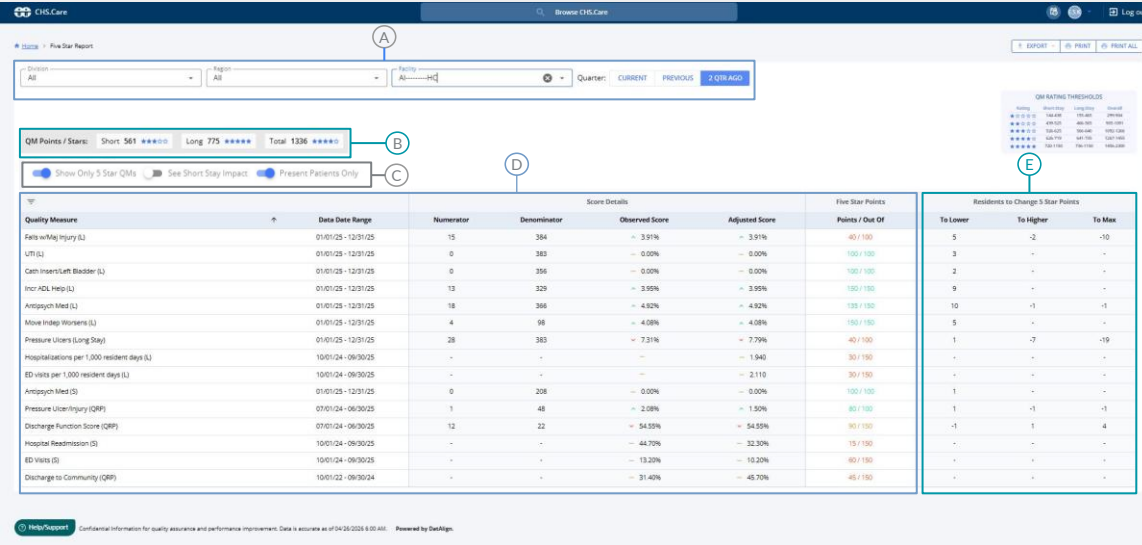


Figure 2: 5 Star Report default view

Area	Description
A. Filters	Division, Region, Facility, and Quarter control what data is shown.
B. QM Points / Stars	Displays Short Stay, Long Stay, and Total points with star ratings
C. Display Toggles	<ul style="list-style-type: none"> Show Only 5 Star QMs See Short Stay Impact Present Patients Only
D. Quality Measures Table	Displays performance and scoring for each measure
E. Residents to Change	Shows how changes to the numerator (adding or removing residents) will move the measure up or down

Using the 5 Star Report

Step by Step Walkthrough – Summary



Set your scope (A)

- Select Division, Region, and Facility
- Narrow for facility review or leave broad for system view

Select your quarter (A)

These represent projected CMS reporting periods

- Current = projection based on the most recent MDS data ending the current quarter
- Previous = projection based on the most recent MDS data ending the prior quarter
- 2 QTR Ago = most recent completed period ending 2 Quarters ago (the Current Quarter's MDS date range used by CMS)

The report updates automatically

Review overall performance (B)

- Focus on Total Points and Star Rating
- For facilities with Short Stay Rating Only – evaluate Short Stay impact

Understand the measures (D)

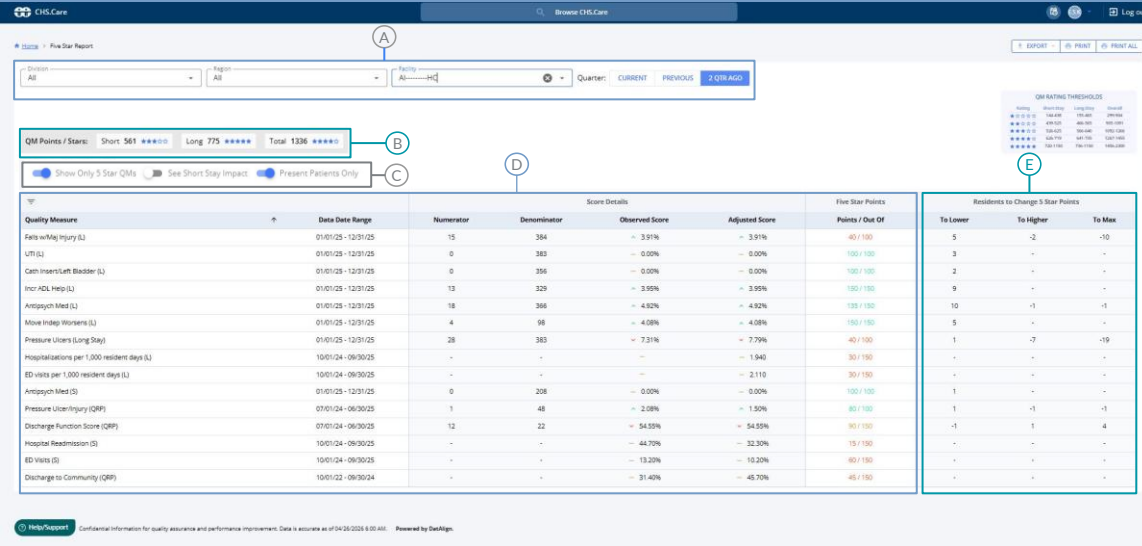
- Each row represents a Quality Measure
- Scores are based on numerator and denominator values

Explore measure details (D & E)

- “Residents to Change” shows how changes to the numerator affect the score
- For most measures, adding residents to the numerator lowers the score; for some measures, the relationship is reversed.
- Click any Quality Measure row to open the resident detail panel

Using the 5 Star Report

Step by Step Walkthrough – Measure Analysis



Interpret the measure (D)

- Review the Observed and Adjusted scores
- Points are assigned based on where the score falls within the scoring thresholds

Understand “Residents to Change” (E)

- Adding residents to the numerator will lower the score
- Removing residents from the numerator will increase the score
- Calculations assume the denominator remains constant

Score movement

- To Higher = residents needed to move up one scoring level
- To Lower = residents that would drop the score one level
- To Max = residents needed to reach maximum points

Drill into the data

- Click the measure to view the resident-level numerator and denominator
- Use this view to identify the residents driving the score

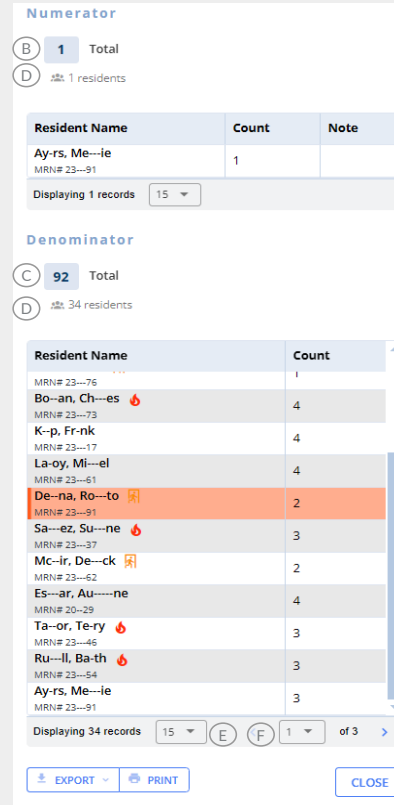
Viewing Quality Measure Details

Step by Step Walkthrough

Figure 3: QM Detail Panel (Summary)



Figure 4: QM Detail Panel (Resident Detail)



Open the detail panel

- Click any Quality Measure row
- The detail panel opens on the right

A. Show only present residents (toggle)

- By default, non-present residents are highlighted and excluded from the current calculation
- Turn off **Show only present residents** to include non-present residents in the calculation and remove highlighting

B. Numerator (summary + list)

- Shows total qualifying instances and contributing residents
- Count reflects the number of qualifying instances per resident
- A resident may contribute more than once during the reporting period

C. Denominator (summary)

- Shows the full population evaluated for the measure

D. Denominator (resident list)

- A resident may be included more than once during the reporting period

E. Sort and navigate

- Click column headers to sort
- Use paging controls to move through the list

F. Export or close

- Use Export or Print to work with the data outside the system
- Click Close or outside the panel to return to the report

Showing Short Stay Impact

The screenshot shows the CHS Care Five Star Report interface. At the top, there are filters for Division (All), Region (All), Facility (Ad-HC), and Quarter (CURRENT, PREVIOUS, 2 QTR AGO). Below these are summary statistics: QM Points / Stars: Short 589 (4 stars), Long 935 (5 stars), Total 1524 (5 stars). There are three toggle buttons: 'Show Only 5 Star QMs' (off), 'See Short Stay Impact' (on), and 'Present Patients Only' (off). A table of quality measures is displayed with columns for Quality Measure, Data Date Range, Numerator, Denominator, Observed Score, Adjusted Score, Five Star Points (Points / Out Of), and Residents to Change 5 Star Points (To Lower, To Higher, To Max). The 'Discharge to Community (QRP)' row is highlighted in orange, indicating it is an estimated measure. A callout box 'A' points to the 'See Short Stay Impact' toggle.

Quality Measure	Data Date Range	Score Details				Five Star Points	Residents to Change 5 Star Points		
		Numerator	Denominator	Observed Score	Adjusted Score		Points / Out Of	To Lower	To Higher
Falls w/Maj Injury (L)	07/01/25 - 06/30/26	0	304	- 0.00%	- 0.00%	100 / 100	5	-	-
UTI (L)	07/01/25 - 06/30/26	0	304	- 0.00%	- 0.00%	100 / 100	3	-	-
Cath Insert/Left Bladder (L)	07/01/25 - 06/30/26	0	274	- 0.00%	- 0.00%	100 / 100	2	-	-
Incr ADL Help (L)	07/01/25 - 06/30/26	10	267	- 3.75%	- 3.75%	150 / 150	8	-	-
Antipsych Med (L)	07/01/25 - 06/30/26	18	279	- 6.45%	- 6.45%	135 / 150	3	-5	-5
Move Indep Wonders (L)	07/01/25 - 06/30/26	1	92	- 1.09%	- 1.09%	150 / 150	7	-	-
Pressure Ulcers (Long Stay)	07/01/25 - 06/30/26	9	302	- 2.98%	- 3.38%	80 / 100	4	-2	-2
Hospitalizations per 1,000 resident days (L)	10/01/24 - 09/30/25	-	-	-	- 1.280	90 / 150	-	-	-
ED visits per 1,000 resident days (L)	10/01/24 - 09/30/25	-	-	-	- 2.070	30 / 150	-	-	-
Antipsych Med (S)	07/01/25 - 06/30/26	0	102	- 0.00%	- 0.00%	100 / 100	1	-	-
Pressure Ulcer/Injury (QRP)	01/01/25 - 12/31/25	1	18	- 5.56%	- 4.30%	40 / 100	1	-1	-1
Discharge Function Score (QRP)	01/01/25 - 12/31/25	7	12	- 58.33%	- 58.33%	105 / 150	-1	1	2
Hospital Readmission (S)	10/01/24 - 09/30/25	-	-	-	- 25.10%	45 / 150	-	-	-
ED Visits (S)	10/01/24 - 09/30/25	-	-	-	- 12.49%	45 / 150	-	-	-
Discharge to Community (QRP)	10/01/22 - 09/30/24	-	-	-	- 50.57%	75 / 150	-	-	-

When this applies

- Some facilities do not have enough Short Stay QMs to generate a Short Stay star rating
- In these cases, the Overall rating is based on Long Stay measures only

What the toggle does

- **Show Short Stay Impact** provides a projected Overall rating that includes Short Stay measures

How the projection is calculated

- MDS measures use facility-level data
- Claims measures are estimated using state averages (QRP measures use national averages)
- Estimated measures are displayed in orange

How to use it

- Compare the default view to the Short Stay Impact view
- Use the difference to understand how Short Stay performance may influence future ratings

Q: Why does the “Current” quarter not match the current calendar quarter?

A: “Current” reflects a projected rating based on the most recent four quarters of available MDS data, ending with the current quarter. CMS Five-Star ratings for MDS QMs are published with approximately a two-quarter lag.

Hovering over the Current, Previous, and 2 QTR Ago labels shows the CMS reporting period being projected (for example, in Q2 2026: Current = Q4 2026, Previous = Q3 2026, 2 QTR Ago = Q2 2026).

Q: What do the counts next to resident names represent in the QM detail panel?

A: Five-Star points are calculated using a rolling four-quarter period, so a resident may contribute multiple qualifying instances over time.

Each resident appears once in the detail list, and the Count column shows how many times that resident contributed to the numerator or denominator during the reporting period.

Q: What does “Residents to Change” mean?

A: It shows how many residents would need different outcomes (added to or removed from the numerator, assuming the denominator remains

constant) to move the measure to the next scoring threshold.

Q: Why doesn’t my facility have a Short Stay rating?

A: CMS requires a minimum number of Short Stay QMs to calculate a rating. If that threshold is not met, only Long Stay measures are used. The Show Short Stay Impact toggle provides a projected view of how Short Stay performance could affect your rating to account for the possibility that your facility may meet this threshold.

Q: What does “present” vs “not present” mean?

A: This reflects whether a resident was present in the facility at all during the current quarter (see QM Analyzer tutorial for details).

Q: Why does the “Show only present residents” toggle matter?

A: It allows you to focus on residents whose outcomes can still be influenced. Residents not present in the facility during the current period may affect the score but typically cannot be changed through new documentation or assessments.

Q: Why are some measures not clickable?

A: Claims-based measures do not support resident-level drilldown and therefore cannot be opened in the detail panel.

Tips | Troubleshooting

Tips

- Use the Five-Star Report to prioritize action, not just review results. Focus first on measures with the smallest **Residents to Change**, as these represent the fastest opportunities to improve your score.
- Use the **detail panel** to understand which residents are contributing to each measure. The goal is not just to see the number, but to identify patterns and drivers behind the result.
- Compare **Current vs Previous** views to understand direction of change. This helps distinguish between one-time variation and sustained trends.
- When Short Stay data is limited, use **Show Short Stay Impact** to anticipate how future performance may affect your overall rating. This is especially useful for planning ahead of upcoming CMS reporting periods.
- Finally, remember that counts reflect **instances over time**, not just unique residents. A small number of residents may be driving multiple occurrences within a measure.

Troubleshooting

“The star-rating doesn’t match CMS or another report”

The Five-Star Report is a **projection tool**, not a replica of published CMS results. CMS ratings are released with a delay and may use additional methodologies (such as imputation) that are not fully replicated here. Claims-based measures are also sourced from the most recent available CMS data and will not align exactly with the projected period.

“The numbers changed since the last time I looked”

Results update as new data becomes available and as rolling lookback periods shift. This is expected behavior and reflects how CMS measures are calculated over time.

“A resident appears, even though there is nothing I can do to impact them”

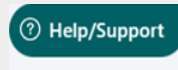
Residents may still appear due to their contribution during the four-quarter rolling reporting period even if they are no longer in the facility.

“I do not see a Short Stay rating for my facility”

The facility may not meet CMS minimum requirements. Use **Show Short Stay Impact** to understand how Short Stay performance may affect future ratings once sufficient data becomes available.

Support / Contact

If you encounter any issues while using this report, please use the



button at the bottom of the report page to open a support ticket.

To ensure effective assistance, please include the following with your ticket:

- A screenshot of the issue.
- A comprehensive description, including all pertinent details like the facility name, to help us understand your experience.