

Florida Nursing Home Uniform Reporting System (FNHURS) Manual

Agency for Health Care Administration

Abstract

This documentation provides information and tutorials for the use of the Agency's Provider Data Submission System for FNHURS submissions.

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Introduction

Purpose and Goals

The Provider Data Submission System (System) allows for Nursing Home Providers and Supervisory Authorities, such as Home Offices, to electronically submit their audited financial statements and financial information directly to the Agency for Health Care Administration (Agency). The System is also used to submit Medicaid Cost Reports.

The System is primarily for the collection of information, and certain validations and edits have been put in place to ensure data is as clean and accurate as possible. The System allows for direct communication between Providers and Agency Analysts within the System so that there does not have to be an exchange of emails or multiple resubmissions. Ideally, when the Agency accepts a Submission, it will have been thoroughly reviewed by both the Agency and Provider, with any outstanding issues resolved or overridden by the Agency, if applicable.

Navigation

The URL for the System is https://apps.ahca.myflorida.com/crs.

The System is compatible with the following internet browsers: Chrome, Edge, Safari, and Firefox.

Note: the System is not compatible with Internet Explorer. If you attempt to log in, you may receive the message below.



Screen Sizing

While every attempt has been made to develop the System to be adjustable across all platforms, some of the text on the pages may wrap or appear out of alignment when viewed on smaller screens, like a laptop or tablet, or minimized on a larger screen.

The pages themselves can be adjusted for better viewing by using the Zoom Level within the browser. For Chrome and Edge, click the three little dots in the top right corner of the screen.



Use the **Zoom** minus (-) (and/or plus (+)) sign to adjust the screen.



Support

If you have additional questions about how to use the System, please contact the Financial Analysis staff via email at <u>AHCAFNHURS@ahca.myflorida.com</u>.

Sign-Up/Log-In, Security, and Permissions

Sign-Up

Provider and Home Office Users will first have to <u>Sign Up</u> to access the System using a valid, unique email address and password. The sign-up is a one-time operation for individuals. If someone has previously signed up for access to PDSS for the Cost Report System, a new account is not needed; please skip to the next section 'Log-In'.

Click <u>here</u> for the Sign-Up Instructions, and once the sign-up is completed successfully, users will have access to the <u>Provider Registration</u> page.

Log-In

After a user has signed-up for the System, login using the email address and password used to sign-up whenever access is needed.

Note: If a user has the login page open too long before entering the login information, the user may receive an error message when login is attempted.



Just re-enter the URL for the System to return to the login screen and enter the information to log in.

Security

When Sign-Up for the System is successful, an Email Verification process must be completed.

Permissions

Users will be assigned roles based on the type of work they will perform in the System. They will be given a separate User Role for each of the Providers and/or Supervisory Authorities for which they are given access. The role of Administrator (Admin) is the highest level of access, so users designated as Administrators will have augmented permissions, which include the ability to grant access and assign Roles to other staff and contracted employees for those Providers/Supervisory Authorities they have Administrative access for. The Admins have access to all System tabs and have create, edit, and delete access permissions for the content of their Providers and Supervisory Authorities.

The System Roles (access levels) include:

- Access Requested The user has requested access to a Provider and/or Supervisory Authority. This user will not have access to the System beyond the *Request Provider Access* page until a Role has been assigned to at least one Provider or Supervisory Authority.
- Access Granted The user has been given access to a Provider or Supervisory Authority. This user can create and send Submissions to the Agency. They can view all the Submissions for the Provider or Supervisory Authority, but only update and submit the Submissions they 'own' or are assigned.
- Admin Access Granted The user has been given Administrative access to a Provider or Supervisory Authority. This user has the same permissions as *Access Granted* plus the ability to update and submit any of the Submissions for the Provider or Supervisory Authority. They are also able to assign Roles and re-assign Submissions to another 'owner', or user.
- Read-Only Access Granted The user has been given read-only access to a Provider or Supervisory Authority. This user cannot create Submissions or enter (or change) information on the Worksheets. They can view Submissions for the Provider or Supervisory Authority, including the Worksheets, Reports, Comments, and Error Check.

 Access Denied – The user has been refused access to, or had access removed from, a Provider or Supervisory Authority. This user can still log into the System, but will not have access to Provider(s) and Supervisory Authority(ies) for which they have been denied access.

The initial Admins for Providers and Supervisory Authorities will be given Admin access by the Agency. The Admins will then give access to, or remove access from, other users as needed. The Admins are also able to change the roles of users for their Providers. If a user is granted access to a Provider and/or Supervisory Authority, they will have that access until an Admin changes it or sets the user's access to *Access Denied*. Access must be revoked for a user to no longer have access to a Provider and/or Supervisory Authority. Each Provider's Admins are responsible for user maintenance.

Note: Even if a user is denied access to all their Providers and Supervisory Authorities, they will still be able to log into the System, but the Provider Registration page is the only page they will be able to see.

Providers may allow access to as many users as needed to perform the data entry and submission of financial reporting information to the Agency. There is no limit to the number of users that can access a single Provider.

Provider Data Submission System

Sign Up Instructions

Provider Users will start by signing up to access the Provider Data Submission System using a valid, unique email address and password.

The email address used to sign-up for the System will be used for verification; an email will be sent from the System to the address for the user to complete the <u>Email Verification</u> process. It is also the email address that will be used for forgotten passwords and for the automated notifications sent from the System resulting from various activities that take place.

Once the application URL has been entered into the browser and the page displays, select **Sign Up** in the box.

PD	SS
	Sign LIn
Vours@exam	iple.com
SIGN	
1	 yours@exam your passwol

Enter a valid email address. Enter a valid password according to the criteria designated for passwords and click **SIGN UP**.



When **Sign Up** is successful, the initial landing page for the System will be the <u>Provider Registration</u> page.

Provider Data Submission System		dmc.young@outtook.com dmc.young@outook.com Carister
Report Dashboard		Go to AHCA's Home Page
Provider Registration Use the lists on this screen to request access to a provider for the purpose of submitti	ng cost data to the agency.	
How to Use This Screen	Current Registration Requests	Available Providers
Please note: your browser will automatically bring you to this screen utili you have been granted access to at least one provider. You can rehut to this screen at any time to request access to other providen or remove any of your current providers. You can click this link to leg out. When you log back in, the page will inferient with any modifications' lapplicable. You can also come out also sends a notification if applicable. You can also come so that a sends a notification to the verified email when the review le complete. This page allows registered users to request access to provider for the purpose of creating and/or working on a cost report submission. To request access, select a program type and find the provider in the list shown. Once your downed run the box on the list. One or more providers can be diagod over bafore the Save Changes button is clicked. Once the Save Changes button is clicked, a notification will be sent to the provider downs the bottom of each entry for the provider submission. The request aboves requested You can not the bottom of each entry to use requestation. Request at he bottom of each entry to use the details of your request. You can return to this screen at any time to request access to additional providers.	Drag entries here to request access and click Save Save Changes Changes to send your request.	Select a Program

The email address of the user logged in will display in the upper right corner of the page.

\square	Provider Data St	bmission System	dmc.young@outlook.com dmc.young@outlook.com
	Report Dashboard		Go to AHCA's Home Page
Provide	r Registration		

There will be an indicator – an exclamation point in a red circle – if the email address has not been verified yet. The <u>Email Verification</u> must be done before work within the System can begin.

	Medicaid Provider Cost Reporting System	dmc.young@outlook.com dmc.young@outlook.com om every Duranted C Go to AHCA's Home rage
Provide	r Registration	

From the top right corner is the ability to access the **User Profile** and **Logout**.

	Provider Data Submission System	example@test.com example@test.com Click to Eat Go to AHCA's Home Page
Provider	Registration	

User Profile: Select the **Click to Edit** link, and then select **User Profile** from the drop-down for the <u>Manage Your User Profile</u> page.

\square	Provider Data Submission System	example@test.com example@test.com
	A Report Dashboard	User Profile ome Page
Provider	Registration	

Logout: Select the **Click to Edit** link, and then select **Logout** from the drop-down to log out of the System.



Email Verification

When a valid email and password have been entered and Sign-Up for the System is successful, a verification email is sent from the System to the email address used to sign up.

New message		
Favorites	Secused Other	
Inbox 3	MPF-CRS	Verify your email Verify Your Account our account information



Click the **Verify Link** or **Verify Your Account** button in the email to complete the verification process.

A browser will open, and a message will display with the verification result.



Manage Your User Profile

The **Manage Your User Profile** page shows if the email address has been verified and allows for the verification email to be resent if needed. The page also allows for a **First Name** and **Last Name** to be entered.

To go to the **Manage Your User Profile** page, select the **Click to Edit** link in the top right corner under the user email address, and then select **User Profile** from the dropdown list.



Manage Your User Profile	
This page allows for the user to verify their email address and update their profile	information
How to Use This Screen	Your Personal Information
This screen displays the personal information associated with your account registration. The email address shown is linked to your user account and cannot be changed. If a different email address needs to be used. Sign Up for a new user account with the preferred email address, and go through the process of requesting access to the desired Providers.	First Name Last Name Registration Email Address dusumers?@butlook.com
When you click the Save Changes button, the system will automatically log you out, and require you to log back in. It may take up to 5 minutes for the Profile to update, but in the meantime your account will continue to function normally.	Save Changes
Email Address Verification	
The email address used to access the System has not yet been verified. Verification is required, and access to the System may be limited (or even denied) until the verification process is completed.	
Please check the Inbox for dyoungers2@outlook.com for an email from our authentication provider requesting that you Verify Your Account.	
Keep in mind that this message may have gone to the Spam or Junk Mai folder if the verification email cannot be located, click the builton below to request a new email. <i>Note:</i> It may take up to 30 minutes for the system to process the request and generate a new verification message.	
Resend Email Verification Message	

If the email address has been verified successfully, the page will display a confirmation message.



In addition, the indicator in the top right corner will display green with a check mark.



Note: The email from the System could go to Spam or Junk Mail, so those folders should be checked if the email fails to come to the Inbox.

If verification has not been done, the page will display the description and instructions, and provide a way to resend the verification email.

If the email cannot be located, click the **Resend Email Verification Message** button and another email will be sent to the email address used to sign up.



Once the email is received, complete the *Email Verification Process*.

When the System is first accessed, the email address used to sign up displays in the top right corner, and the First and Last Name are empty in the **Your Personal Information** box.

			dmc.young@comcast.net dmc.young@comcast.net criek to Edit
Provider Access	警 Manage Regi	rations	📀 Go to AHCA's Hom
n.			
Your Personal	Information		
	First Name		
	Last Name		
Registration	Email Address	dmc.young@comcast.net	
		Save Changes	

After the First Name and Last Name are entered, click the Save Changes button.

Your Personal Information	
First Name	Donna
Last Name	Young
Registration Email Address	dmc.young@comcast.net
	Save Changes

The System will automatically log out and require that the user log back in.



When the System opens, the user's name will display in the top right corner above the email address.

Provider Data Submission System	example@test.com example@test.com • click to Eat
Report Dashboard	Go to AHCA's Home Page
Provider Registration	

The Name will also display throughout the System for the Administrator, Agency staff, and on the Submissions that the user "Owns" or is assigned.

Contact Info	
Current Owner Change Owner	Donna Young dmc.young@outlook.com
Analyst Assigned	none assigned

Provider Registration

The registration process starts from the **Provider Registration** page. Provider users select the FNHURS Report Nursing Home(s) and FNHURS Home Office Report they need to have access to for creating and/or working on financial information and audited financial statement Submissions. Once the Providers are selected and saved by a user, notifications will be sent to the Agency or Provider Administrators, as applicable, for them to review and respond by granting access as needed.

Until a user has selected and been given access to at least one Nursing Home Provider or Home Office, they will only be able to see the Provider Registration page.

Report Dashboard		Go to AHCA's Home Page
Provider Registration Use the lists on this acreen to request access to a provider for the purpose of submitti How to Use This Screen	ng cost data to the agency Current Registration Requests	Available Providers
Preservoter your browservel automatically bring you to the screen until you have been granted access to at lead one provider. You can return to this screen and your carrier of providers in the proper velocity of the provider of the provider and the screen and your carrier of providers. You can active the provider is a screen and the provider is the provider is a screen and the provider is a screen and the provider is the provider is the provider is the provider is a screen and the screen and the screen and the provider is the screen and the scre	Drag entries here to request access and click Save Save Changes to send your request.	Select a Program

Select Providers

When access to a Nursing Home Provider or Home Office needs to be requested, click the little arrow to the right under the **Select a Program** in the **Available Providers** box on the far right of the screen.

Available Providers	
Select a Program	
	•

The options available will be Nursing Home Provider, NHP Home Office, **FNHURS Report**, and **FNHURS Home Office Report**. Selecting an option from the drop down will then generate a list of Providers, either Nursing Home Providers or Home Offices, to choose from based on that selection.

Available Providers
Select a Program
▼
Nursing Home Provider
NHP Home Office
FNHURS Report
FNHURS Home Office Report

The **FNHURS Report** should be selected for requesting access to licensed Nursing Homes for the Florida Nursing Home Uniform Reporting (FNHUR) of financial information and audited financial statements.

The **FNHURS Home Office Report** should be selected for requesting access to Home Offices for the Florida Nursing Home Uniform Reporting (FNHUR) of financial information and audited financial statements.

Once a **Program** is selected, the list of **Available Providers** will populate based on that Program selection.

	iect a Flografii	
F	NHURS Report	٠
va	ailable Providers	
E	Enter text to search by name, license or provider number.	
А С Л 9	ABBEY DELRAY DELRAY BEACH, FL Aedicaid Number: 0 D, License Number: 1201098, File Number: 15051	•
А С Л 9	ABBEY DELRAY SOUTH DELRAY BEACH, FL Aedicaid Number: 0	
A S N 5	ABBEY REHABILITATION AND NURSING CENTER SAINT PETERSBURG, FL //edicaid Number: 0:0, License Number: 10010981, File Number: 15201	
A C N 5	ADVANCED CARE CENTER CLEARWATER, FL //edicaid Number: 0), License Number: 11290961, File Number: 15219	

Drag the desired Nursing Home Provider(s) and/or Home Office(s) from the list on the right to the **Current Registration Requests** box on the left.

Current Registration Requests	Available Providers
Drag entries here to request access and click Save Charges to send your request.	Select a Program FNHURS Report Available Providers
	Enter text to search by name, license or provider number. ABBEY DELRAY DELRAY DELRAY BEACH, FL Medicaid Number: 0 0, License Number: 1201098, File Number: 95051
	ABBEY DELRAY SOUTH DELRAY BEACH, FL Medicaid Number: 0 0, License Number: 1198088, File Number: 96062
	ABBEY REHABILITATION AND NURSING CENTER SAINT PETERSBURG, FL Medicaid Number: 0. License Number: 10010081, File Number: 56201
	ADVANCED CARE CENTER CLEARWATER, FL Medicaid Number: 0 , License Number: 11290961, File Number: 55219
	ADVENTHEALTH CARE CENTER APOPKA NORTH

There is a search field that can be used to find **Available Providers**.

Available Providers	
Select a Program	
FNHURS Report	•
Available Providers Enter text to search by name, license or provider number.	
ABBEY DELRAY DELRAY BEACH, FL Medicaid Number: 0 D, License Number: 1201098, File Number: 95051	
ABBEY DELRAY SOUTH DELRAY BEACH, FL Medicaid Number: 0 0, License Number: 1199098, File Number: 95052	
ABBEY REHABILITATION AND NURSING CENTER SAINT PETERSBURG, FL	

Note: If the search field is used, at least three (3) characters must be entered into the field, and the list will filter with any names that contain those characters anywhere in the name.

elect a Program	
FNHURS Report	
vailable Providers	
palm	
BROOKDALE PALN SARASOTA, FL Medicaid Number: 0 35960954	IER RANCH SNF 0, License Number: 130471010, File Number:
CONSULATE HEAL WEST PALM BEAC Medicaid Number: 0 95032	TH CARE OF WEST PALM BEACH H, FL 0, License Number: 15950961, File Number:
COURT AT PALM AI POMPANO BEACH, Medicaid Number: 1 100839	RE, THE FL 0, License Number: 15550982, File Number:
GLENRIDGE ON PA SARASOTA, FL Medicaid Number: null,	ALMER RANCH INC. License Number: 130471031, File Number:

If a user needs to request access to multiple Nursing Home Providers and/or Home Offices, drag each to the **Current Registration Requests** box prior to saving and sending the requests.



Note: The **Save Changes** button must be clicked for the Request(s) to be sent to the Provider's Admin(s) (or Agency if it is the first Admin requesting access).

Once the **Save Changes** button is clicked, an email will be sent from the System to the Provider Admin(s) for the requested Provider(s) or to AHCA Admins if no Provider Admin exists.



Registration Request Status

Each of the Providers in the **Current Registration Request** box will have a message for the current status of the request. The message will change as the request moves through the process. The steps of the process include selecting a Provider, sending the request to an Administrator, and receiving the role assignment for the Provider.

The **Click here to remove** link will always be available for each of the Providers. There is a message displayed when a user clicks the link, and the Provider will be removed from the **Current Registration Requests** list when the **Save Changes** button is clicked.

Initial Status

When a Provider is first dragged over, before the **Save Changes** button has been clicked, the status will be **A request will be sent for access to this provider**.

Current Registration Requests	
Drag entries here to request access and click <i>Save</i> <i>Changes</i> to send your request.	Save Changes
Bon Secours Health System, Inc	
Marriottsville, MD Home Office Code: BON	
A request will be sent for access to this provider.	Click here to remove.

Access Requested

Once the **Save Changes** button has been clicked, notification is sent to the Administrator(s) of the Provider(s) and the message will be **You have requested access to this provider**.

Current Registration Requests	
Drag entries here to request access and click Save Save Change Changes to send your request.	
Bon Secours Health System, Inc	^
Marriottsville, MD	
Home Office Code: BON	
You have requested access to this provider.	Click here to remove.

Access Messages

Once access to a Provider has been given, the level of that access is disclosed in the message.

Current Registration Requests		
Drag entries here to request access and click Save Changes to send your request.	Save Chang	es
BON SECOURS MARIA MANOR NURSING CARE CENTER SAINT PETERSBURG, FL Medicaid Number: (0, License Number: 1055096, File Number	r 55232	^
You have been assigned administrative access to this provider.	Click here to remove.	
BRIDGEWATER PARK HEALTH & REHABILITATION CENTE OCALA, FL Medicaid Number: 0 0, License Number: 130471062, File Numb	ER ber: 35961055	
You have been granted access to this provider.	Click here to remove.	
CARROLLWOOD CARE CENTER TAMPA, FL		
Medicaid Number: 0 0, License Number: 1077095, File Number	: 62920	
You have been granted read-only access to this provider.	Click here to remove.	J
CLARIDGE HOUSE NURSING & REHABILITATION CENTER NORTH MIAMI, FL	ર	
Medicaid Number: 0 0, License Number: 1090096, File Number	: 111306	
Your access to this provider was denied.	Click here to remove.	

For Provider Admins, the <u>Manage Registrations</u> page has a list of the roles and the description of their access. The descriptions for the roles are also in the <u>Permissions</u> section of this document.

Removing Providers

Since some of the Providers have similar names, it is important to verify when requesting access that the correct Provider is chosen. If the wrong Provider is added to the **Current Registration Request** box, it can be taken out by selecting the **Click here to remove** link in the bottom right corner of that Provider entry. Access to a Provider can be removed at any time, even after the access request has been sent or a role has been assigned.

If the **Click here to remove** link is selected before the **Save Changes** button is clicked, the Provider will immediately be taken off the list.

Current Registration Requests							
Drag entries here to request access and click <i>Save Changes</i> to send your request.	Save Changes						
BALANCED HEALTHCARE SAINT PETERSBURG, FL							
Medicaid Number: 0 , License Number:	1252096, File						
Number: 55229							
A request will be sent for access to CI this provider.	ick here to remove.						

After the access request has been sent to the Admin(s), a Provider can still be removed from the **Registration Requests** by selecting **Click here to remove** and then **Save Changes**.

Current Registration Requests
Drag entries here to request access and click Save Changes to send your request.
DELTONA HEALTH CARE DELTONA, FL Medicaid Number: 0 0, License Number: 1125096, File Number: 46408 You have requested access to this Click here to remove.
EMERALD COAST CENTER FORT WALTON BEACH, FL Medicaid Number: 0 0, License Number: 11410961, File Number: 14602 You have been granted access to this provider.
Current Registration Requests
Drag entries here to request access and click Save Changes to send your request.
LIFE CARE CENTER OF PALM BAY PALM BAY, FL Medicaid Number: 0 0, License Number: 130471030, File Number: 35960988 Your request for access to this provider will be cancelled.

Current Registration Requests	
Drag entries here to request access and click Save Changes to send your request.	
RULEME CENTER EUSTIS, FL Medicaid Number: (0, License Number: 11450961, File Number: 33501	•
Your access to this provider will be removed.	

Until a User Role has been assigned to at least one of the requested Providers or Supervisory Authorities, the System will continue to return a user to the **Provider Registration** page.

When access has been given, the user will receive an email detailing the Provider(s) and level(s) of access they have received. The levels of access include Provider Administrator, Provider Access, Read-Only Access, and Access Denied.

Your	our access has been updated.					
0	This message has been marked as Confidential.					
N	no-reply@ahca.myflorida.com Tue 12/1/2020 10:57 AM To: You	5		\rightarrow		
	An administrator has reviewed your registration request and taken the following actions:					
	Access Granted to PALM GARDEN OF SUN CITY (009858900). Access Granted to CARROLLWOOD CARE CENTER (026387700).					
	Please visit the Medicaid Provider Cost Reporting System to review your registration details or begin using the system to submit cost reporting data.					

Once access has been given to at least one Provider or Supervisory Authority, additional tabs will be available depending on the level of access given.

If at any point in time a user's access level is changed, they will receive an email notifying them of the change.



Users can return to the **Provider Registration** page via the **Request Provider Access** tab at any time to drag Providers and/or Supervisory Authorities over and request access to them or remove registrations for Providers and/or Supervisory Authorities that are no longer needed.



Provider Administrator

The primary Provider Administrator users will be invited to sign up for the System by AHCA staff. Once users select FNHURS Report Nursing Home(s) and/or FNHURS Home Office Report and click **Save Changes** to send the request(s), AHCA staff will receive the pending registrations for review. They will assign access, selecting the Role of **Admin Access Granted**.

Once a user has been given **Admin Access** to a Provider and/or Supervisory Authority, all the other tabs for the System will become available. The tabs across the top of the screen are general and applicable across the whole System, they are not specific to individual Providers or Submissions. They include the <u>Report/Submission Dashboard</u>, <u>Search</u>, <u>Provider Data</u>, <u>Request Provider Access</u>, and <u>Manage</u> <u>Registrations</u> (Provider Admin access only).

Provider Data Submission System							
	Report Dashboard	Q Search	III Provider Data	Request Provider Access	Manage Registrations		

Note: Depending on when access is given, users may need to log out and log back in to see the tabs across the top of the page.

After access has been given, the landing page after logging in is the <u>Submission Dashboard</u>.

Manage Registrations

The **Manage Registrations** tab will only be available to Provider Administrator users. Provider Admins will manage access requests from other users for the Providers they are Admins for in the System. When another user requests access to a Provider, the Administrator will be notified. The Admin will receive an email letting them know another user is requesting access to a Provider they manage.

There is no limit to the number of users that can have access to the Providers and Supervisory Authorities.

Access requested for provider MAG.						
no-reply@ahca.myflorida.com To • Young, Donne; O dum, Richard; • Day, Zainab; O Falk, Rebekah; • Hatcher, Toriano; • Webb, Dary!; • Shelton, Sarah; • Caldwell, James ① Prese treat this as Confidential.	← Reply	≪ Reply All				
Phish Alert						
Magnolia Health Care Group (MAG)						
A user has requested access to this provider. You should review this request carefully and assign the appropriate access or set the user's access to denied if you believe this request is incorrect						
Note: You are receiving this notification because there is currently no administrative user assigned to Magnolia Health Care Group. You should consider working with the provider to identify an administrative	or to take over u	ser management.				
Please visit the Medicaid Provider Cost Reporting System to review this submission as soon as possible.						

In addition, the System displays messages on the **Submission Dashboard** in the **Your Recent Notifications** box.



Click the little arrow at the end of the notification sentence to be taken to the **Manage Registrations** page **Showing Active Registrations Only**,

OR

Click the Manage Registrations tab to display Showing Active Registrations Only.

ABNOT		4			
	Report Dashboard	Q Search	Provider Data	Request Provider Access	Manage Registrations

The button at the top of the list in the **User Registration Profiles** box allows for the list to be toggled back and forth between **Showing Active Registration Requests Only** and **Showing All Registration Requests**.



Showing Active Registration Requests Only

Showing Active Registration Requests Only displays users who have sent a request for access to a Provider you manage and are still "active" or pending role assignment.



Showing All Registration Requests

Showing All Registration Requests displays all the users who have sent a request for access to a Provider that you manage. It includes all the users that have already been assigned a role beyond **Access Requested**, along with those users that are still "active" or pending role assignment.

Note: Provider Admin users will only see users/requests for those Providers they are Admins for in the System. For additional details, please see <u>Appendix A</u>.

Assigning User Roles

The roles and their abilities are listed on the left side of the Manage Registrations page.

- Admin Access Granted = The user has been given administrative access to the provider. This user has the same access as ar-granted, with the ability to update and submit any of the submissions for the provider. They are also able to assign Roles and re-assign submissions to another 'owner', or provider user.
 Access Denied = The user has been refused access to, or had access removed from, the provider. This user can still log into the system, but they do not have any access to the
- provider(s) they have been denied access to.
 Access Granted = The user has been granted access to the provider. This user can create submissions. They can view all the submissions for the provider, but only update and submit the submissions they 'own', or are assigned to.
- Read Only Access Granted = The user has been given read-only access to the provider. This user cannot create submissions, nor enter (or change) information on the worksheets. They can view all the worksheets and Reports, and enter Comments from any of the worksheets.
- Access Requested = The user has requested access to the provider. This user will not have access to the system beyond the *Request Provider Access* page until a Role has been assigned.

Once on the Manage Registrations page, click the little arrow to the left of the user/email address.

Us	User Registration Profiles									
	Showing All Registration Requests									
	Email	Last Name 🌱	First Name 🌱	Date Registered						
•	caldwell0414@comcast.net	Caldwell	James	06/24/2020 10:34 AM						
	dmc.young@outlook.com	Young	Donna	07/27/2020 03:56 PM						

Click directly on the User Role field next to the Requested Provider to highlight the field.

•	dyoungtest2@test.com	Young	Donna
	✓ Save changes ♦ Cancel changes		
	User Role		Requested Provider / Identifier 🕇
	Access Requested		LOURDES-NOREEN MCKEEN RESIDENCE FOR GERIATRIC CARE, INC.

Click the User Role field again to open the list of Roles.

	Young	Donna
O Cancel changes		
		Requested Provider / Identifier †
	\rightarrow .	LOURDES-NOREEN MCKEEN RESIDENCE FOR GERIATRIC CARE, INC.
	Young	Donna
O Cancel changes		
		Requested Provider / Identifier †
	•	LOURDES-NOREEN MCKEEN RESIDENCE FOR GERIATRIC CARE, INC.
nted Granted		
	 ♥ Cancel changes ♥ Cancel changes Inted Granted 	Young Cancel changes Young Young Cancel changes for a chan

Click on the desired **User Role** to select it and click the **Save Changes** button to complete the assignment. There can be more than one Administrator for a Provider, so the Provider Admin can assign **Admin Access Granted** to another user. The Administrator may assign roles for multiple requests and then **Save Changes**.

•	dyoungtest2@test.com	Young	Donna
	✓ Save changes		
	User Role		Requested Provider / Identifier 🕇
	Access Granted		LOURDES-NOREEN MCKEEN RESIDENCE FOR GERIATRIC CARE, INC.

Submission Dashboard

Once access to the System has been given, the **Submission Dashboard** will be the landing page when a user logs into the System. It is also the page that opens from the **Report Dashboard** tab. The page has two main sections, with one for Submissions <u>In Progress</u> at the top and one for Submissions <u>Under Agency Review</u> at the bottom.

Submissions **In Progress** are those that Providers are currently working on. The Submissions that Providers have completed and submitted to the Agency are in the **Under Agency Review** section.

Provider Data Sul	bmission S	System					Exam exam	ple Provider ple@test.com
Report Dashboard	Q Search	III Provider Data	Request Provider Access	Manage Registrations			G	Go to AHCA's Home Page
Submission Dashboard This page contains information and funct Create New Submission	tions that have	been fillered based or In Progress	n the current user role.					
Your Recent Notifications O No pending notifications.		No submissions f	N T Id T	Pr Y Start Date	End Date Due Date	Revision	Date Creat Recent Co.	
How to Use This Screen Submissions for the Providers that you have to access to will display in the main sections on applicable based on their current status. If the Submissions started for a Provider, or the Sub- have been Accepted and Committed by the Aj section lists will be empty. To view completed Submissions, please use the Search tab at the page to go to the Search Submissions page. Note: for each entry in the lists, you can click to view the user assignments for the submission	the page, as the page, as re are no missions gency, the and Accepted e top of the on the ▶ icon on.							
In Progress This list contains Submissions that have be and are all being worked on by the Provide These Submissions have not yet been sent Agency for review and are considered unsu	en created er users. I to the Jomitted.							÷
Under Agency Review	2	H 4 0	▶ ¥ 10 ▼ item	is per page			No il	ems to display
complete and have been sent to the Agency review. They will remain under review unlet returned to Provider user for additional acti- they have been Accepted and Committed b Agency. Once they have been accepted by Agency leases use the Gastrich bet the other	y for ss they are on, or until iy the the	Under Agency	Review Name T Ide T	Pro Y Start Dat	te End Date [Due Date Rev	rision Date Create	Recent Com
page to go to the Search Submissions page	e.	No submissions f	found matching this review status.					*

Note: If there are not any Submissions that have been created and are **In Progress** (or **Under Agency Review**) for any of the Providers a user has access to, the Submission Dashboard will be empty because there is nothing to display.

The information for each Submission that is displayed on the page is the Name, Identifier, Start Date, End Date, Revision number, Date Created, and Recent Comments.

Name is the name of the nursing home provider or home office.

Identifier is a unique number or code the Agency uses to identify the provider or home office. For Providers it is their Medicaid Number or licensing file number and for Home Offices (Supervisory Authorities) it is a three characater alpha code that is generated by and for the Agency.

Start Date is the Fiscal Year Begin Date for the Submission.

End Date is the Fiscal Year End Date for the Submission.

Revision is a number that signifies which Submission for a facility with a specific Start Date and End Date is currently In Progress or Under Agency Review. The first Submission for a specified Start and End Date will have a Revision number of zero (0). Once a Submission is Accepted by the Agency, it is removed from the Submission Dashboard. If another Submission for the same facility with same Start and End Dates is created, the Revision number will be one (1).

Date Created is the date the Submission was created.

Recent Comments is the number of comments that have recently been added to the Submission.

Create New Submission

To enter financial information, a FNHURS Submission "shell" of the Worksheets must be created. FNHURS Submissions can be created for Home Offices and Nursing Home Providers. Click the **Create New Submission** button on the **Submission Dashboard** page to open the **Create Submission** page.

Submission Dashboard	1	
This page contains information and f	y dons that have been filtered based on the c	current User Role.
Create New Sub	In Progress	
Create Submission		
This page allows you to start a new submission for one of your auth	ed providers.	
Instructions	Create a New Submission for Provider	
How to create a new submission:	Select a Program	
 Select a program type from the list to access your authorized providers. 		
 Select one of your authorized providers from the second list. This list will automatically update to show you your authorized providers from the selected program. 		
Use the calendar date picker at the right to select the fiscal year Start and End dates.		
4. Click Save to create a new submission.		

Click the little arrow to the right of the **Select a Program** field to display the list of Program selections.

Create Submission									
This page allows you to start a new submission for one of your authorized providers.									
Instructions	Create a New Submission for Provider								
How to create a new submission:		Select a Program	→·]						
 Select a program type from the list to access your authorized providers. 									

The current options to submit a FNHURS report are **FNHURS Report** and **FNHURS Home Office Report**. Selecting an option from the drop down will show a list of Nursing Home Providers or Home Offices to choose from based on that selection.

Create a New Submission for Provider									
Select a Program	•								
3	Nursing Home Provider NHP Home Office FNHURS Report FNHURS Home Office Report								

The **FNHURS Report** should be selected for starting a Submission for a licensed Nursing Home for the Florida Nursing Home Uniform Reporting (FNHUR) of financial information and audited financial statements.

The **FNHURS Home Office Report** should be selected for starting a Submission for a Home Office for the Florida Nursing Home Uniform Reporting (FNHUR) of financial information and audited financial statements.

Once a **Program** is selected, only **Providers** or **Home Offices** for which the user has **Admin Access Granted** or **Access Granted** will be available for selection. Click the little arrow to the right of **Select an Authorized Provider** field to display the list of available Providers.

Select a Program	FNHURS Report
Select an Authorized	OLD COUNTRY HOME (: 3)
Trovider	EMERALD COAST CENTER (0 0)
	S EMERALD SHORES HEALTH AND REHABILITATION (0 0)
Enter Start Date	GRAB THE BULL (3 2)
Enter End Data	HOWDY NEIGHBOR (3 6)
Enter End Date	OLD COUNTRY HOME (: 3)

Once a provider is selected, enter the Submission Start Date and End Date, and click the Save button.

Create a New Submission for Provider									
Select a Program	FNHURS Report	•							
Select an Authorized Provider	an Authorized OLD COUNTRY HOME (3 3) Provider								
	Submissions must cover a minimum of 6 and a maximum of 18 months.								
Enter Start Date	1/2/2021								
Enter End Date	1/1/2022	Ë							
	Save								

When the **Save** button is clicked, and if the creation was successful, the <u>Submission Tracking Dashboard</u> for the Provider Submission will open.

Note: There can only be one "active" (either In Progress or Under Agency Review) Submission for Providers for a given Start and End Date period at a time.

Submissions In Progress

Once a Submission has been created, it will be listed in the **In Progress** section at the top of the Submission Dashboard.

In Pr	In Progress											
		N Y	I T	P T	Start Date	End Date	Due Date	Revision	Date Cr	Recent		
•	Open	Sample Home Office	TST	FNHURS Home Office Report	01/01/20	12/31/20	04/30/20	0	03/06/20 08:30 AM	0	Ê	*
•	Open	HOWDY NEIGHB	35961116	FNHURS Report	01/01/20	12/31/20	04/30/20	0	03/06/20 08:08 AM	0	Î	

While all the users who have access to a Provider can **Open** and view any Submission for that Provider, only the user who "Owns" a Submission (along with the Admin(s) for the Provider) can make modifications to the Worksheets and submit to the Agency for that Submission.

The user who creates a Submission is considered the **Owner** of that Submission. If the user's Provider Admin reassigns the Submission to another user, that new user becomes the **Owner**. One way to see the Owner and their email address is on the Tracking Dashboard for the Submission itself.

Contact Info	
Current Owner	Example Provider
Change Owner	example@test.com

The **Contact Email** for the Provider User who owns a Submission can be seen on the Submission Dashboard.

Click the little arrow to the left of the Provider Name to see the email address for the Provider User assigned to it.

In P	In Progress											
		N ▼	I Y	P Y	Start Date	End Date	Due Date	Revision	Date Cr	Recent		
•	Open	Sample Home Office	TST	FNHURS Home Office Report	01/01/20	12/31/20	04/30/20	0	03/06/20 08:30 AM	0	Î	*
	Open	HOWDY NEIGHB	35961 1 16	FNHURS Report	01/01/20	12/31/20	04/30/20	0	03/06/20 08:08 AM	0	Ô	

In Pi	In Progress											
		N T	Id 🝸	P 🕈	Start Date	End Date	Due Date	Revision	Date Crea	Recent Co		
•	Open	Sample Home Office	TST	FNHURS Home Office Report	01/01/2021	12/31/2021	04/30/2022	0	03/06/2023 08:30 AM	0		*
•	Open	HOWDY NEIGHBOR	35961116	FNHURS Report	01/01/2021	12/31/2021	04/30/2022	0	03/06/2023 08:08 AM	0		
	Date Assigned 🕇			Assignment Typ	nt Type		itact Email		Is Active	Is Active		
	03/06/20	23		Provider User		example@test.com true						

There is also the ability to delete Submissions that are In Progress. Click the **red trash can icon** to the far right of a Submission to remove it.

In i	In Progress											
		N T	I T	P Y	Start Date	End Date	Due Date	Revision	Date Cr	Recent		
•	Open	Sample Home Office	TST	FNHURS Home Office Report	01/01/20	12/31/20	04/30/20	0	03/06/20 08:30 AM	0	Î	•
•	Open	HOWDY NEIGHB	35961116	FNHURS Report	01/01/20	12/31/20	04/30/20	0	03/06/20 08:08 AM	0	Î	

Only the user who owns a Submission or the Admin(s) for the Provider can delete a submission that is In Progress.

In Progress											
		N Y	ld 🝸	P T	Start Date	End Date	Due Date	Revision	Date Crea	Recent Co	
•	Open	Sample Home Office	TST	FNHURS Home Office Report	01/01/2021	12/31/2021	04/30/2022	0	03/06/2023 08:30 AM	0 💼	•
•	Open	HOWDY NEIGHBOR	35961116	FNHURS Report	01/01/2021	12/31/2021	04/30/2022	0	03/06/2023 08:08 AM	0	
Date Assigned 🕇		Assignment Type	ssignment Type Contact Em		lact Email Is		Is Active	e			
	03/06/20	23		Provider User		exa	mple@test.com		true		

Oops, something went wrong!	×
Internal ServerError (500) occurred	
Request: https://dev.apps.ahca.myflorida.com/restservices-crs/v1/DeleteSubmission	
Message Current user is not allowed to perform this action.	
Date/Time: 11/06/2020 11:55:09	
URL: https://dev.apps.ahca.myflorida.com/Crs/Home/AjaxGridDestroy	
Referrer: https://dev.apps.ahca.myflorida.com/Crs/	
Any changes made on the current so	reen may have been lost. Please check your inputs.
	Close

If a user that does not own a Submission attempts to delete it, the message above will be received.

Click the **Open** button to the left of the Provider Name to open the <u>Submission Tracking Dashboard</u> for

the Submission.

In Progress											
	N T	I T	P Y	Start Date	End Date	Due Date	Revision	Date Cr	Recent		
► Open	Sample Home Office	TST	FNHURS Home Office Report	01/01/20	12/31/20	04/30/20	0	03/06/20 08:30 AM	0	Ē	*
Open	HOWDY NEIGHB	35961116	FNHURS Report	01/01/20	12/31/20	04/30/20	0	03/06/20 08:08 AM	0	Î	

Submissions Under Agency Review

Once a Submission has been submitted to the Agency, it will be listed in the **Under Agency Review** section at the bottom of the **Submission Dashboard** page.

If not already on the Submission Dashboard, click the **Report Dashboard** tab at the top of the page.



When the page displays, the **In Progress** section will be at the top, and the **Under Agency Review** section will be toward the bottom of the page.

n Progr	ess										
		N T	I Y	P ▼	Start Date	End Date	Due Date	Revision	Date Cre	Recent	
• 0	pen	Sample Home Office	TST	FNHURS Home Office Report	01/01/2021	12/31/2021	04/30/2022	0	03/06/2023 08:30 AM	0	Ê
• 0	pen	HOWDY NEIGHB	35961116	FNHURS Report	01/01/2021	12/31/2021	04/30/2022	0	03/06/2023 08:08 AM	0	a
• 0	pen	Allegro Senior Living, LLC	ASL	FNHURS Home Office Report	11/01/2021	11/01/2022	03/01/2023	0	03/05/2023 12:41 PM	0	ê
• 0	pen	EMERALD SHORES HEALTH AND REHABI	0 0	FNHURS Report	03/06/2022	03/05/2023	07/03/2023	0	03/05/2023 12:23 PM	0	Î
H A 1 D T items per page 1-4 of 4 items C											
Jnder A	gency	Review									

Once a Submission has been sent to the Agency for review, no updates or modifications can be made to any of the information.

If an AHCA Analyst has a question or finds an issue with a Submission, they can return it to the Provider user to follow-up. When a Submission is returned, it reverts to **In Progress** and displays in that section of the page.

Submission Tracking Dashboard

After the **Save** button on the Create New Submission page is clicked, the **Submission Tracking Dashboard** page for the individual Submission will open. The page also displays when the **Open** button is clicked for a Submission on the Submission Dashboard.

The Submission Tracking Dashboard is specific to the selected Provider or Home Office and the dates of the Submission.

FNHURS Nursing Home Provider Dashboard

The Nursing Home Provider Tracking Dashboard displays the information specific to an individual Provider/Facility Submission.

\bigcirc	Provider Data Su	bmission S	System						Example P example@te	st.com Cick to Edit
	🖀 Report Dashboard	Q Search	III Provider Data	Request Provider Access	嶜 Manage Registrations				😔 🛛 Go to A	HCA's Home Page
EMERAL	D SHORES HEA	LTH AND		TION - 006097200 - 0)3/05/2023 [⊄]	5)	6	Actions	🔒 Reports -	
w c	START Vorksheets Vick to Open	DA	Additional Informa	ECK FOR ERRORS SUBMIT F	OR REVIEW UNDER AGE	ICY REVIEW	RESUBMIT	ACCEPTED Contact Info		
c	iontact Info		The due date for this	s report is 7/3/2023.				Current Owner Change Owner	Example Provider example@test.com	
	Assets							Analyst Assigned	none assigned	
	Expenses							03/05/2023: Unsubmit	ted	
Expense	ss - Additional Info		Reminders			Recent Col	llaboration		show all comments	
	Audit		• 07/03/2023: E	Due date to certify this submission fo	r agency review.	L				J

The **Provider Name** and **Medicaid Number** or **licensure file number**, along with the **Submission End Date**, will display across the top of the page.

Submission Start and End Dates

If the Submission Start Date and/or End Date were entered incorrectly when the Submission was created, they can be modified by clicking the little **pencil icon** after the Submission End Date at the top of the page.



Enter the correct date(s) and click the **Save** button.

Update	Start and End D	ate for this S	Submission	n	×
Start Date	1/1/2021	Ë	End Date	12/31/2021	
				Save	Close

Provider Submission Worksheets

The **Worksheets** listed down the left side of the page allow for the financial information to be entered, modified, and/or reviewed. In addition, each Account Number on the Worksheet allows for **Comments** in reference to information entered in that row for that Account Number.

When information has not been entered on a Worksheet, the button to open it will remain white. Click the button with the Worksheet name on it to open it.

Worksheets Click to Open
Facility Info
Contact Info
Utilization
Assets
Liabilities & Equity/Fund Bal
Expenses
Expenses - Additional Info
Staffing
Revenue
Audit

When a Worksheet has been selected and is open, the button on the left has a highlight around it.

	Worksheets Click to Open	_
	Facility Info	
	Contact Info)
\square	Utilization)
\geq	Assets	ļ

Information can be entered directly into the fields, and once there have been changes to the page, a message will display letting the user know there have been changes and reminding them to save those changes.



The **Save**, **Previous**, and **Next** buttons, which are at the top and bottom right of each page, will save the current Worksheet.

<u>Save</u>

Clicking the **Save** button will save the changes made and remain on the current Worksheet.

<u>Previous</u>

Clicking the **Previous** button will save any changes made and open the Worksheet listed before the current one. If a user is on the first Worksheet and the Previous button is clicked, the last Worksheet will open.

<u>Next</u>

Clicking the **Next** button will save any changes made and open the Worksheet listed after the current one. If a user is on the last Worksheet and the Next button is clicked, the first Worksheet will open. Once at least one piece of information has been entered and the **Save** or **Previous** or **Next** button has been clicked, the Worksheet button will turn blue.



<u>Comments</u>

All the Worksheets (pages) allow for **Comments** to be entered. The comments are for explaining an entry, or for providing additional information about an Account Number (row), to the Agency Analyst(s) who will be reviewing the Submission. Note: some Accounts require comments.

The new comments can be entered for accounts as applicable.

Current Assets - 1xxxxx					1
Account Name	Account Number	Skilled Nursing Facility	Non-SNF	Total	
Cash	110000				9
Investments	120000				ø

The text boxes allow for a fairly large amount of text to be entered into the field.

Id New Comment for Worksheet Ent	ry ×
Creating a new comment entry for Month: Ja	n 2018, Account Code: sb000_1
This is a comment for the month of Janua	ary 2018 on the Patient Day Stats Worksheet.
Save	Cancel

Click the **Save** button to keep the Comment that was entered.

Note: clicking the bubbles open the boxes to create a new comment each time. To see the comments already entered, select **Comments** from the **Actions** drop-down button at the top right of the page to view the <u>Comments</u> page.

Recent comments (and communications) will display on the Submission Tracking Dashboard in the **Recent Collaboration** box.

Dates and Deadlines	Recent Collaboration	show all comme
 05/31/2019: Due date to certify this submission for agency review. 04/30/2020. The date to certify a submission for inclusion in this year's rate calculation has passed. 04/30/2021. Last day to certify a submission for inclusion in next year's rate calculation. 	Donna Young Curabitur fauchus pretium massa nec viverra. Praesent vitae nunc eu interdum purus.	(32 minutes ago) ismod, congue justo a Worksheet Entry Comment
	Donna Young Aliquam erat voultpat. Pellentesque ipsum mi, euismod ut dolor in, ma sem. Proin aliquet efficitur rhon 🗢	(33 minutes ago) lesuada convallis Worksheet Entry Comment

Comments will only display on the page for a limited time, but they will not be removed from the Submission. For lengthly comments, only the first 120 characters will be displayed in the **Recent Collaboration** box. The comments can be viewed at anytime, and in full length, via the <u>Comments</u> selection in the **Actions** drop down.

ADJUSTMENTS

The Audit Worksheet allows for **Adjustments** to be entered. The Adjustments are entered for each Account Number as needed. The FNHURS reporting is designed to reconcile directly to audited financial statements. The need to make adjustments to the data entry from the audit should be minimal if any. However, in the event that an adjustment is necessary, the FNHURS allows for adjustments to be made to the entry. To make an Adjustment for any of the applicable Account Numbers, click the plus sign to the right of the amount field in the applicable column on the Worksheet.



Another screen will open for the Categories and Amounts.

Entry #	Category		Amount
1	To remove non-allowab	ble balance sheet amounts	(\$25,960)
	ľ	There are 5 accounts currently using this category.	<i>ℤ</i> ry.
2	To offset revenue again	nst related expense	\$0
	Ľ	There are 15 accounts currently using this category.	<i>ℤ</i> ry.
3	To remove non-allowal	ble expense per the Medicaid program	\$0
	ľ	There are 5 accounts currently using this category.	Z ry.
4	To remove 90% of pha	rmacy costs	\$0
	ľ	/// There are 2 accounts currently using this category.	Z ry.
5	To record shared fixed	assets	\$0
	ľ	There are 15 accounts currently using this category.	li) ry.

Additional Categories can be entered by scrolling down, if applicable, and entering the information into the empty field.

Adjustm	nent for Current Assets (_100000)		×
No ca Each	tegories have been defined for this submission. Please use the box provided below to add a ne category that you add will be available for all accounts.	w category.	•
Entry #	Category	Amount	
	Enter a reason category up to 50 characters in length.		-
Click rer	Update Account to close this form and update the account item on the worksheet, but member that you must also click Save, Previous or Next on the worksheet to save the updated account entry.	Update Account Close	

After a Category has been entered into the field, click the **Create New Category** button.

Adjustn	nent for Current Assets (_100000)		×
No ca Each	ategories have been defined for this submission. Please use the category that you add will be available for all accounts.	box provided below to add a new category.	
Entry #	Category	Amount	
1	Test Category	Create New Category Clear	
	Enter a reason category up to 50 characters in length.		
		1	~
Click rer	Update Account to close this form and update the account item member that you must also click Save, Previous or Next on the u	on the worksheet, but worksheet to save the pdated account entry.	:

The cursor will then be in the Amount field, ready for an amount to be entered.

nury #	Category	Amount	
1	Test Category	500	
	Enter a reason category up to 50 characters in length.	1	

Once an amount has been entered, click the **Update Account** button. When clicked, the information will be saved and the window will close.

There will be a notification at the top of the Worksheet page letting the user know that a change has been made and the **Save** (**Previous** or **Next**) button must be clicked to keep those changes.

Data has changed. Click Save, Previous or Next to save changes.	Save O Previous Next
Audit	🖶 Print Worksheet

Once a Category has been entered for Adjustments on any of the Account Numbers, that Category will be available in the Adjustment window for any of the subsequent Account Numbers selected.

Once a Category is being used, there will be a message under it in the Adjustment window letting the user know how many Account Numbers are using it.

Entry #	Category	Amount
1	To properly present Agency Costs There are 3 accounts currently using this category	\$0
2	To adjust for Non-Allowable Revenues and Expenses	\$0

A Category name can be modified or changed by clicking the little pencil icon under it.

Entry #	Category		Amount
1	To properly present Agency Costs		\$0
	There are 3 accounts currently using this category.	5	

Note: If a Category name is changed, it will be changed for all the Account Numbers in the applicable Adjustment windows that are using it, not just the Account Number being changed.

Categories can be deleted as long as they are not being used on any of the Account Numbers. Click the little **trash can icon** under the applicable Category to remove it. The **Update Account** button in the window, and the **Save**, **Previous**, or **Next** button on the Worksheet must be clicked to keep the changes made.

Entry #	Category	Amount
1	Adding a category for test purposes	\$0
	There are 0 accounts currently using this category.	
	Enter a reason category up to 50 characters in length.	
Clic	k Update Account to close this form and update the account item on the worksheet, but reme also click Save, Previous or Next on the worksheet to save the upd	ember that you must dated account entry. Close

Provider Submission Reports

The System allows for the information from the Worksheets to be viewed and printed and/or saved in report form to PDF.

Click the **Reports** button in the top right corner of the page to show the list of reports.

HOWDY NEIGHBOR -	35961116 - 12/31/2	2021 🖻			Crictions	🖨 Reports -
1 START	2 DATA INPUT	3 4 CHECK FOR ERRORS SUBMIT FOR REVIEW	5 UNDER AGENCY REVIEW	6 RESUBMIT	7 ACCEPTED	Facility Info Contact Info Utilization Assets Liabilities & Equity/Fund Bal
Click to Open Facility Info	Facility Info				_	Expenses Expenses - Additional Info
Contact Info	Provider DBA Name	HOWDY NEIGHBOR				Staffing Revenue
Utilization		₽				Audits Certification Statement
Assets	License Number	130471092				Print All Reports
	Street Address	7015 W US Hwy 90				Errors and Reminders

The names of the reports match the names for Nursing Home Provider FNHURS Worksheets.

Note: All reports are displayed in landscape orientation.

- The **Certification Statement** selection is the Certification Page that must be printed, signed, scanned, and attached via the Attachments selection in the Action drop-down list.
- The **Print All Reports** selection will include the Cover Page and all the reports for the Submission in one document.
- The **Errors and Reminders** selection will generate a report of the error and reminder items for the Submission. Along with the errors and reminders, these items include informational messages, comments, error messages, and communication between Provider users and Agency staff.

Click the desired report to open a **Report Preview**. All the reports have a preview.

Utilization (Report Preview)	×
Beds	*
Licensed Beds at Beginning of Reporting Period	0
Licensed Beds at the End of Reporting Period	0
How Many total Bed Days were available during the reporting period?	0
Total Beds	0
Beds Occupied by Payor Type	
Medicaid - Bed Days	0
Medicare - Bed Days	0
Private Pay - Bed Days	0
Managed Care Insurance - Bed Days	0
Hospice - Bed Days	0
Other Payors - Bed Days	0
Non-SNF Revenue - Bed Days	0
Total Beds by Payor Type	0
	· · · · · · · · · · · · · · · · · · ·
4	
Report Preview	may display differently based on either screen size or resolution. Please click Save to Print to generate a printable E Effocument.
	Note:Unsaved changes will not appear the report.
	Close Save to Print

Click the **Save to Print** button at the bottom right of the **Report Preview** to generate a **PDF** document to be saved or printed as needed.

EMERALD SHORES HEALTH AND REHABILITATION (006097200) 626 N TYNDALL PKWY CALLAWAY, FL 32404-6132 Region: 02		Florida Medicaid Program	Agency for Health Care Administra	
		ENHURS Report	Tallahassee, FL 323	
			,,,.,	
			Utilizatio	
Beds				
	Licensed Beds at Beginning of	0		
	Reporting Period			
	Licensed Beds at the End of	0		
	Reporting Period			
	How Many total Bed Days were	0		
	available during the reporting			
	period?			
	Total Beds	0		
Beds Oc	cupied by Payor Type			
	Medicaid - Bed Days	0		
	Medicare - Bed Days	0		
	Private Pay - Bed Days	0		
	Managed Care Insurance - Bed Days	0		
	Hospice - Bed Days	0		
	Other Payors - Bed Days	0		
	Non-SNF Revenue - Bed Days	0		

Provider Submission Actions

The **Actions** button in the top right of the Submission Tracking page allows for the selection of additional functions and the steps to move the Submission through the entire process. Certain steps will not become available until a preceeding step has been completed.

While information is being entered and reviewed, and Comments are being entered, the **Actions** selections are limited to the Submission Dashboard, <u>Comments</u>, <u>Attachments</u>, <u>Submission Errors</u>, and <u>Request 30-day Extension</u>.



PROVIDER SUBMISSION DASHBOARD

When information is being entered on the Worksheets, or when other pages like the **Comments** or **Submission Errors** are being viewed, selecting **Submission Dashboard** from the **Actions** list will return the System to the Submission Tracking Dashboard for the current Submission.



PROVIDER COMMENTS

Selecting **Comments** from the **Actions** list will open the page showing all the comments for the Submission. These include comments entered for Accounts and any communication between the Provider users and the Agency staff.

 Actions - 	Ð						
Submission Dashbo Comments	eard						
Attachments							
Submission Comments The grid below shows comments entered by both provider users and agency reviewers. Click on the Show Full Comment if you need to see additional text in the comment that does not fit in the column below.							
	Created By	Туре	Message	Date Created	Expiration Date		
Show Full Comment	Donna Young	comment	Lorem ipsum dolor sit amet, consectetur adipiscing elit. Sed volutpat lorem quis justo egestas sodales. Ut sed velit fri	03/01/2021	03/06/2021		

Note: Comments are displayed on the Submission Tracking Dashboard for a limited amount of time, but they will remain on the Submission. The **Expiration Date** is the date they will no longer display on the Submission Tracking Dashboard page. They will continue to appear in the Submission Comments.

If a comment is not fully displayed in the list on the page, clicking the **Show Full Comment** button next to it to open a box showing the complete comment.

Submission Comments									
The grid below shows comments entered by both provider users and agency reviewers. Click on the Show Full Comment if you need to see additional text in the comment that does not fit in the column below.									
	Created By	Туре	Message	Date Created	Expiration Date				
Show Full Comment	Donna Young	comment	Lorem ipsum dolor sit amet, consectetur adipiscing elit. Sed volutpat lorem quis justo egestas sodales. Ut sed velit fri	03/01/2021	03/06/2021				
From: Donna Young	Comment Details × From: Type: When: Vung Comment 4 minutes ago								
Lorem ipsum dolor sit amet, consectetur adipiscing elit. Sed volutpat lorem quis justo egestas sodales. Ut sed velit fringilla, lobortis mi a, auctor nisi. Ut aliquet risus elit, ut viverra risus malesuada a. Ut at mauris augue. Nam sed augue eu ante ornare aliquam et in nulla. Nulla et turpis tortor.									
Click here to zoom to t	Click here to zoom to the worksheet entry								
		Close							

When the **magnifying glass icon** is clicked, the System will go to the Worksheet and Account where the comment was entered.

Depreciation Expense - Equipment and Furniture	930450	\$142,924	\$6,111	S0 S0 Worksheet Entry Comment for 930499
Depreciation Expense - Vehicles	930460			Aliquam erat volutpat. Pellentesque ipsum mi, euismod ut dolor in, malesuada convallis sem. Proin aliquet efficitur rhoncus.
Depreciation Expense - Other Fixed Assets	930499			

Comments can also be seen in full, and download or printed, from the **Errors and Reminders** selection in the **Reports** drop-down list.

Errors and Reminders (Report Preview)								
The grid below shows all of the action items generated for this submission. These may include simple informational messages, communication between users and agency staff and submission errors that must either be corrected or deferred by the agency before the submission can be accepted.								
Action Item Type Important Date	Message Due date to certify this submission for agency review.	Current Status Created	Worksheet	Date Created 6/9/2021				
Important Date	The date to certify a submission for inclusion in this year's rate calculation has passed.	Created		6/9/2021				
Important Date	Last day to certify a submission for inclusion in next year's rate calculation.	Created		6/9/2021				
Reminder	If a Grouper Report was used for this submission, please attach it using the Attachments selection from the Actions menu.	Created		6/9/2021				
Comment	Lorem ipsum dolor sit amet, consectetur adipiscing elit. Duis cursus felis vel tortor mollis, ac tempus lacus dictum. Sed vitae ex dictum sapien cursus mollis sed ut arcu.	Created	Facility Stats	6/14/2021				
Comment	Duis leo enim, imperdiet sit amet augue a, venenatis rhoncus orci. Quisque iacuis, arcu in fauchos fauchos, uma erat accumsan justo, vel lacinia josum risus interdim libero. Nalta facilis. Curabituri d'elementum leo, quis fauchous lectus. Nam phareta pellentesque convallis. Etiam sit amet consecteur sapien, at incidunt risi.	Created	Revenues	6/14/2021				

PROVIDER ATTACHMENTS

The System provides for Attachments to be added to a Submission.



Submission Atta	chments							
+ New								
	Description	T	Attachment Type	T	Processing Status	T	Date Created	
No records four	nd matching specified criter	ia.						*

Click the **+ New** button at the top left of the screen to add documents to a Submission.

s	ubmission Atta	achments							
	+ New <	<u> </u>							
		Description	T	Attachment Type	•	Processing Status	T	Date Created	
	No records fou	nd matching specified criter	ria.						<u>ـ</u>

Another smaller window will open with fields to enter the details for the attachment.

Su	ibmission Atta	achments									
	+ New										
		Description	T	Attachment Type	T	Processing Status	T	View Document	T	Date Created	
	🥒 Edit			Edit Attachment			×			06/14/2021 09:05 AM	Î
				Description							
				Attachment Type							
							•				
				Select File for Upload	i						
						✓ Update	ancel				

Enter a **Description**, select an **Attachment Type** from the drop-down list, and click the button to **Select File for Upload**.

Edit Attachment ×	Edit Attachment ×
Description	Description
	Signed Certification Page
Attachment Type	Attachment Type
Certification Audited Financial Statement Other	Select File for Upload
✓ Update 🛇 Cancel	✓ Update 🚫 Cancel

Once a file has been selected from the local computer, click the Update button, and the document will be added to the Submission.

Edit Attachment		×		
Description				
Signed Certification Page				
		1		
Attachment Type				
		•		
Select File for Upload				
021013700 2020-12-31	Certification.pdf	<		
PDF 384.64 KB				
\longrightarrow	✓ Update 🚫 Cance	el		
Submission Attachments				
+ New				
Description	▼ Attachment Type ▼	Processing Status T	View Document T	Date Created
✓ Edit Signed Certification Page	Certification	Created	021013700_2020-12- 31_Certification.pdf	06/14/2021 12:15 PM

The **Description** and **Document Type** can be modified by clicking the **Edit** button next to the applicable document, and documents can be deleted by clicking the **red trash can icon** to the far right of the line.

s	ubmission Atta	chments										
	+ New											
		Description	T	Attachment Type	T	Processing Status	T	View Document	T	Date Created		
-	🔪 🥒 Edit	Signed Certification	Page	Certification		Created		021013700_2020-12- 31_Certification.pdf		06/14/2021 12:15 PM	_	→ 💼

To view the documents themselves, click the document name in the **View Document** column.

S	ubmission Attachments										
+ New											
		Description	T	Attachment Type	T	Processing Status	T	View Document	T	Date Created	
	/ Edit	Signed Certification F	'age	Certification		Created	_	021013700_2020-12- 31_Certification.pdf		06/14/2021 12:15 PM	1

PROVIDER SUBMISSION ERRORS

Selecting Submission Errors from the Actions list will open the Submission Errors page.



Click the **Run Error Checks Now** button to perform edits and validations that have been programmed into the System.

Submission Errors									
Use the grid below to run error checks on this submission and review the results. If you need to print this list, click on the <i>Errors and Reminders</i> link under the Reports menu.									
Run Error Checks Now Showing Unresolved Entries Only									
Туре	Message	Status	Worksheet	Date Created					

A list of messages will display as applicable. If a message pertains to a specific Account, it can be accessed directly from the page. Click the **magnifying glass icon** next to the desired message and the System will go directly to the Account. Updates can be made on the Worksheets to resolve the issues.

	Туре	Message	Status	Worksheet	Date Created
٩	Data Missing	The revenue account Gain / Loss on Sale of Assets on the Revenues worksheet requires an offsetting adjustment to the expense acount Other Nursing Service Expense on the Indirect Patient Care worksheet, or a comment must be made to explain why none was made.	Created	Revenues	06/14/2021

Note: Each of the display panels only show a certain number of rows at a time. While there is a scroll function for some of them, there is also a paging bar at the bottom of the screen showing the number of items per page (which can be adjusted) and the total number of items in the list.



To return to the Submission Errors page, select **Submission Errors** from the **Actions** list drop down. The **Run Error Checks Now** button must be clicked again to re-run the edits and validations in order to determine any outstanding issues. Messages for items that have been fixed will have **Resolved** in the Status column.

The **Showing Unresolved Entries Only** at the top is a toggle button. When it is clicked, the page will redisplay **Showing All Entries**.

Run E	rror Checks Now Showing A	Il Entries			
	Туре	Message	Status	Worksheet	Date Created
		why none was made.			
٩	Data Missing	The revenue account Interest Revenue on the Revenues worksheet requires an offsetting adjustment to the expense acount Interest Expense - Non-Related Party on the Administration worksheet, or a comment must be made to explain why none was made.	Resolved	Revenues	06/14/2021
٩	Data Missing	If an entry is provided for Beauty and Barber Revenue on the Revenues worksheet, Beauty and Barber Expenses on the Nonreimbursable Costs worksheet or Beauty and Barber Shop on the Square Footage By Cost Center worksheet then an entry must be provided for all, or a comment must be entered to explain why.	Created	Revenues	06/14/2021

The Error Check can be run as many times as needed while working on the Submission.

PROVIDER SUBMISSION EXTENSION

For each FNHURS Report or FNHURS Home Office Report, a one-time 30-day extension may be requested. To submit the extension request to the Agency, select **Request 30-day** Extension from the menu.



A pop-up will appear where you may select **Request Extension** or **Cancel** if an extension is not needed.



PROVIDER SUBMIT FOR REVIEW

The Submit for Agency Review sends the Submission to AHCA staff so they can begin their initial review of the information.

Click the Actions list drop down and select Agency Review.



If there are unresolved issues, they will display on the page, but will not stop Providers from being able to submit to the Agency.

AHCA staff have the same view of a Submission as the Providers. They will see the same list of errors and issues, including outstanding items.

When ready to send a Submission to the Agency, enter any additional comments needed, click the **Submit for Review** button at the top right, and then click **Submit Now**.

Submit for Agency Review								
Review the grid below for any unresolved action items flagged for this submission. Any entries not marked as <i>Deferred</i> may delay acceptance by the agency. When you are ready to submit your information to the agency for review, add an optional message for the analyst and click the <i>Submit for Review</i> button.								
Add Your Comments Here								
Submit to Agency for Review								
Your submission data will be sent to the agency for	review and acceptance.							
During this time, you will still be able to review your								
Submit Now	Don't Submit Yet							

Once a Submission has been sent to the Agency, the System will return to the Submission Tracking Dashboard for that Submission. The Submission will be locked, meaning no further changes can be made while the Submission is under review by AHCA Staff.

HOWDY NEIGHBOR - 359611	16 - 12/31/2021	Actions - Actions - Accepted
Worksheets Click to Open	This submission is now 318 day(s) overdue.	Contact Info
Contact Info	Additional Information	Current Owner Example Provider Change Owner example@test.com
Utilization	This submission is either locked or you do not have permission to enter or upload data at this time.	Analyst Assigned none assigned
Assets		Review History
Expenses		03/06/2023: Unsubmitted
Expenses - Additional Info		US/14/2023. Under Review
Staffing	Reminders Recent Collaboration	show all comments
Audit	04/30/2022: Due date to certify this submission for agency review. Example Provider Test Submission	(18 minutes ago) Submit for Review

When a Submission has been sent to the Agency for review, it will be listed in the <u>Under Agency Review</u> section of the Submission Dashboard accessed via the **Report Dashboard** tab at the top of the page.

FNHURS Home Office Dashboard

Create a Home Office Submission with the same <u>Create New Submission</u> button on the Submission Dashboard (from the Report Dashboard tab), but select **FNHURS Home Office Report** from the **Select a Program** drop-down list.

The **Home Office Name** and Agency **Home Office Code**, along with the **Submission End Date**, will display across the top of the page.

Allegro Senior Living, Ll	LC - ASL - 11/0)1/2022 [@]				Actions -	🖶 Reports -
1	2	3	4	5	6	7	
START	DATA INPUT	CHECK FOR ERRORS	SUBMIT FOR REVIEW	UNDER AGENCY REVIEW	RESUBMIT	ACCEPTED	
Worksheets Click to Open	This sub	mission is now 10	5 day(s) overdue.	Request one-time 30-	day extension	Contact Info	
Facility Info	Additional	Information	Current	Example			
Contact Info	The due da	te for this report is 3/1/	Owner	Provider example@test.			
Assets						Analyst	none assigned
Liabilities & Equity	Related P	roviders				Assigned	
Revenue & Expense See the Provider Info tab to manage this list.						Review History	
Audit	Provider	Name Identifier	Last Submission End I	Date Last Submission	Current Stage	03/05/2023: Unsu	bmitted

Submission Start and End Dates

If the Submission Start Date and/or End Date were entered incorrectly when the Submission was created, they can be modified by clicking the little **pencil icon** after the Submission End Date at the top of the page.



Enter the correct date(s) and click the **Save** button.

Update Start and End Date for this Submission							
Start Date	01/01/2018		End Date	12/31/2018	t.		
				🖺 Save	Close		

Home Office Submission Worksheets

The Home Office Submission has fewer Worksheets than the Provider Submission. The **Worksheets** listed down the left side of the page allow for the cost reporting information to be entered, modified, and/or reviewed. In addition, each field or group of fields on the Worksheets allows for comments in reference to those fields to be entered.

When information has not been entered on a Worksheet, the button to open it will remain white. Click the button with the Worksheet name on it to open it.



When a Worksheet has been selected and is open, the button on the left has a highlight around it.

	Worksheets Click to Open
	Facility Info
	Contact Info
(Assets
	Liabilities & Equity
	Revenue & Expense
	Audit

Information can be entered directly into the fields, and once there have been changes to the page, a message will display letting the user know there have been changes and reminding them to save those changes.

ſ	Worksheets	Data has changed. Click Save, Previous or Next to save changes.	Bave Previous Nex
	Facility Info	Contact Info	🔒 Print Worksheet
	Contact Info		

The **Save**, **Previous**, or **Next** buttons, which are at the top and bottom right of each page, will save the current Worksheet.

<u>Save</u>

Clicking the Save button will save the changes made and remain on the current Worksheet.

<u>Previous</u>

Clicking the **Previous** button will save any changes made and open the Worksheet listed before the current one. If a user is on the first Worksheet and the Previous button is clicked, the last Worksheet will open.

<u>Next</u>

Clicking the **Next** button will save any changes made and open the Worksheet listed after the current one. If a user is on the last Worksheet and the Next button is clicked, the first Worksheet will open.

Once at least one piece of information has been entered and the **Save** or **Previous** or **Next** button has been clicked, the Worksheet button will turn blue.

Comments

All the Worksheets allow for **Comments** to be entered. The comments are for explaining an entry, or for providing additional information about an Account Number to the Agency Analyst(s) who will be reviewing the Submission. Note: some Accounts require comments.

The new comments can be entered for each Account Number/row.

Current Assets - 1xxxxx								
Account Name	Account Number	Home Office	Non-Home Office	Total	+			
Cash	110000				ø			
Investments	120000				ø			

Note: clicking the bubbles open the boxes to create a new comment each time. To see the comments already entered, select **Comments** from the **Actions** drop-down button at the top right of the page to view the <u>Comments</u> page.

Click the Comment Bubble for any of the fields to enter a comment. The text box allows for a fairly large amount of text to be entered into the field.

d New Comment for Worksheet Entry	
creating a new comment entry for Month: Jan 2018	8, Account Code: sb000_1
This is a comment for the month of January 201	18 on the Patient Day Stats Worksheet.
¥ Save	Cancel

Click the **Save** button to keep the comment that was entered.

Recent comments (and communications) will display on the Submission Tracking Dashboard in the **Recent Collaboration** box.

	Actions -	e Reports -
	\bigcirc	
Y REVIEW RESUBMIT	ACCEPTED	
	Contact Info	
rksheet entries	Current Owner	Marie Alexander dmc.young@outlook.com
ta.	Analyst Assigned	none assigned
101 and cr0002 match the dates	Review History	
	06/14/2021: Unsubmitted	
t submissions will be matched act Cost Allocations and Indirect		
ion Current Stage		
Recent Collaboration		show all comments
Marie Alexander Nunc sit amet fringilla mi, ut finibus ante	e. Nam odio leo, iaculis eget auc	(a few seconds ago) tor sit amet, rutrum a nulla.
maun's hendren 🛩		comment
Marie Alexander Pellentesque accumsan eros nulvinar s	agittis dapibus.	(a minute ago)
		comment

Comments will only display on the page for a limited time, but they will not be removed from the Submission. For lengthly comments, only the first 120 characters will be displayed. The comments can be viewed at anytime, and in full length, via the <u>Comments</u> selection in the **Actions** drop down.

ADJUSTMENTS

The Audit Worksheet allows for Adjustments to be entered. The Adjustments are entered for each Account Number as needed.

To make an Adjustment for any of the applicable Account Numbers, click the plus sign to the right of the amount field in the applicable column on the Worksheet.

Total Adjustments
0

Another screen will open, allowing for Categories and Amounts to be entered.

Adjustn	nent for Cash: General (111100)		×
No ca Each	ategories have been defined for this submission. Please use the box provided below to add a new category. category that you add will be available for all accounts.		
Entry #	Category	Amount	
	Enter a reason category up to 50 characters in length.		
Clic	ek Update Account to close this form and update the account item on the worksheet, but remember that you must also click Save, Previous or Next on the worksheet to save the updated account entry.	Jpdate Account Close	

After a Category has been entered into the field, click the **Create New Category** button.

Adjustn	nent for Cash: General (111100)	×				
No ca Each	ategories have been defined for this submission. Please use the box provided be category that you add will be available for all accounts.	low to add a new category.	4			
Entry #	Category	Amount				
	To remove Nonallowable Costs Enter a reason category up to 50 characters in length.	Create New Category Clear				
Click Update Account to close this form and update the account item on the worksheet, but remember that vou must also click Save. Previous or Next on the worksheet to save the updated account entry. Update Account Close						

The cursor will then be in the Amount field, ready for an amount to be entered.

Adjustr	nent for Cash: General (111100) ategories have been defined for this submission. Please use the box provided by	elc	ow to add a new category.	×
Each	category that you add will be available for all accounts.			
Entry #	Category	1	Amount	
1	To remove Nonallowable Costs		2000	
	C 🖞			
	Enter a reason category up to 50 characters in length.			
				-
Click L	Ipdate Account to close this form and update the account item on the workshee you must also click Save, Previous or Next on the worksheet to save the up	t, t da	but remember that ted account entry.	

Once an amount has been entered, click the **Update Account** button. When clicked, the information will be saved and the window will close.

There will be a notification at the top of the Worksheet page letting the user know that a change has been made and the **Save** (**Previous** or **Next**) button must be clicked to keep those changes.

Data has changed. Click Save, Previou	us or Next to save changes.					🖹 Save 🛛 🛛 Previous 🖉 Next
Current Assets						Print Worksheet
	Account Number	Original Amount	Total Adjustments	Total Reclassifications	Adjusted Balance	
Cash - 11xxxx						
Cash: General	111100		(\$500)	•	(\$500)	

Once a Category has been entered for Adjustments on any of the Account Numbers, that Category will be available in the Adjustment window for any of the subsequent Account Numbers selected.

Once a Category is being used, there will be a message under that Category in the Adjustment window letting the user know how many Account Numbers are using it.

Adjustn	ent for Cash: General (111100)	
Entry #	Category	Amount
1	To properly present Agency Costs	\$0
	There are 3 accounts currently using this category.	
2	To adjust for Non-Allowable Revenues and Expenses	\$0
	There are 14 accounts currently using this category.	

A Category name can be modified or changed by clicking the little **pencil icon** under it.

Adjustn	nent for Cash: General (111100)	
Entry #	Category	Amount
1	To properly present Agency Costs	\$0
	There are 3 accounts currently using this category.	

Note: If a Category name is changed, it will be changed for all the Adjustments that are using it, not just the Account Number being changed.

Categories can be deleted as long as they are not being used on any of the Account Numbers. Click the little **trash can icon** under the applicable Category to remove it. The **Update Account** button in the window, and the **Save**, **Previous**, or **Next** button on the Worksheet must be clicked to keep the changes made.

Adjustn	nent for Cash: General (111100)			×
Entry #	Category	1	Amount	
1	Adding a category for test purposes		\$0	
	There are 0 accounts currently using this category.			
	Enter a reason category up to 50 characters in length.			
Clic	k Update Account to close this form and update the account item on the worksheet, but reme also click Save. Previous or Next on the worksheet to save the upd	en	mber that you must ated account entry.]

Home Office Submission Reports

The System allows for the information from the Worksheets to be viewed and printed and/or saved in report form to PDF.

Allegro Senior Living, I	LLC - ASL - 11/0	1/2022 CHECK FOR ERRORS	SUBMIT FOR REVIEW	UNDER AGENCY REVIEW	6 RESUBMIT	7 ACCEPTED	A Reports - Facility Info Contact Info Assets Liabilities & Equity Revenue & Expense
Click to Open	This sub	mission is now 10	5 day(s) overdue.	Request one-time 30-	day extension	Contact Info	Audits
Facility Info	Additional	Information				Current	Certification Statement
Contact Info	The due da	te for this report is 3/1/	2023			Owner	Print All Reports
Assets						Analyst r	Errors and Reminders
Liabilities & Equity	Related P	roviders				Assigned	

Click the **Reports** button in the top right corner of the page to show the list of reports.

The names of the reports match the names for Nursing Home Provider FNHURS Worksheets.

• The Certification Statement selection is the Certification Page that must be printed, signed,

scanned, and attached via the Attachments selection in the Action drop-down list.

Note: All reports are displayed in landscape orientation.

- The **Print All Reports** selection will include the Cover Page and all the reports for the Submission in one document.
- The **Errors and Reminders** selection will generate a report of the error and reminder items for the Submission. Along with the errors and reminders, these items include informational messages, comments, error messages, and communication between Provider users and Agency staff.

Click the desired report to open a **Report Preview**. All the reports have a preview except the Export Accounts.

				^
Account Name	Account Number	Home Office	Other	Total Assets
Current Assets - 1xxxxx				
Cash Investments Receivables Inventory Prepaid Expenses	110000 120000 130000 140000 150000	\$0 \$0 \$0 \$0 \$0 \$0	\$0 \$0 \$0 \$0 \$0 \$0	50 50 50 50 50
Resident Trust Account Other Current Assets Total Current Asset	s 160000 190000 s 100000	\$0 \$0 \$0	\$0 \$0 \$0	\$0 \$0 \$0
Non ourrant Assats 2xxxxx				
Non-current Assets - 2XXXX	220.000	<u>co</u>	<u>co</u>	CO
Property, Plant, Equipment	240000	50 50	50 50	50 50
Accumulated Depreciation	250000	\$0	\$0	\$0
Deposits	260000	\$0	\$0	\$0
Resident Trust Account	s 270000	50	\$0	50
Other Long-Term Asset	s 290000	50	50	50
Assets	200000	\$0	\$0	\$0
Total Assets	B\$A01	\$0	\$0	\$0
4	Report Preview	may display differently based on either s	creen size or resolution. Please click Save to P Note:Uns	trint to generate a printable FDF document. aved changes will not appear the report. Close \bigcirc Save to Print

Click the **Save to Print** button at the bottom right of the **Report Preview** to generate a **PDF** document to be saved or printed as needed.

S Actions - B Reports -

ro Senior Living, LLC (ASL) S. Central Avenue 9 301 ouis, MO 63105		Florida Medicaid Prog FNHURS Home Office Re	gram ^{port}	Agency for Health Care Administra 2727 Mahan D Tallahassee, FL 32 Ass
Account Name	Account Number	Home Office	Other	Total Assets
Current Assets - 1xxxxx				
Cash	110000	\$0	\$0	\$0
Investments	120000	\$0	\$0	\$0
Receivables	130000	\$0	\$0	\$0
Inventory	140000	\$0	\$0	\$0
Prepaid Expenses	150000	\$0	\$0	\$0
Resident Trust Acc	ounts 160000	\$0	\$0	\$0
Other Current Asse	ts 190000	\$0	\$0	\$0

Home Office Submission Actions

The **Actions** button in the top right corner allows for the selection of additional functions and the steps to move the Submission through the complete process. Certain steps will not become available until a preceeding step has been completed.

Sample Home Office TST 01/01/2022 3

While information is being entered and reviewed, and Comments are being entered, the **Actions** selections are limited to the Submission Dashboard, <u>Comments</u>, <u>Attachments</u>, <u>Error Check</u>, and <u>Request</u> <u>30-day Extension</u>.



HOME OFFICE SUBMISSION DASHBOARD

When information is being entered on the Worksheets, or when other pages like the **Comments** or **Error Check** are being viewed, selecting **Submission Dashboard** from the **Actions** list will return the System to the Submission Tracking Dashboard for the current Submission.



HOME OFFICE COMMENTS

Selecting **Comments** from the **Actions** list will open the page showing all the comments for the Submission.

Actions Submission Dasht Comments Attachments	Doard				
Submission Comments					
The grid below shows Click on the Show Full Comment if y	s comments entered b ou need to see additional text in the c	y both provider users omment that does not fit in the colum	and agency reviewers		
	Created By	Туре	Message	Date Created	Expiration Date
Show Full Comment	Donna Young	comment	Lorem ipsum dolor sit amet, consectetur adipiscing elit. Sed volutpat lorem quis justo egestas sodales. Ut sed velit fri	03/01/2021	03/06/2021

Note: Comments are displayed on the Submission Tracking Dashboard for a limited amount of time, but they will remain on the Submission. The **Expiration Date** is the date they will be taken off the Submission Tracking Dashboard page. They will continue to appear on the Submission Comments.

If a comment is not fully displayed in the list on the page, clicking the **Show Full Comment** button next to it will open a box showing the complete comment.

on the Show Full Comment if y	/ou need to see additional text in th	re comment that does not fit in the colu	mn below.	Date Created	Expiration Date
Show Full Comment	Donna Young	comment	Lorem ipsum dolor sit amet, consectetur adipiscing elit. Sed volutpat lorem quis justo egestas sodales. Ut sed velit fri	03/01/2021	03/06/2021
omment Details	i				×
					1
From:		Туре:	W	/hen:	

Q	Click here to zoom to the worksheet entry	
	Close	

When the **magnifying glass icon** is clicked, the System will go to the Worksheet and Account where the comment was entered.

Depreciation Expense - Equipment and Furniture	930450	\$142,924	\$6,111 Workshee	
Depreciation Expense - Vehicles	930460		Aliquam er euismod u sem. Proin	at volutpat. Pellentesque ipsum mi, t dolor in, malesuada convallis i aliquet efficitur rhoncus.
Depreciation Expense - Other Fixed Assets	930499 🗭			

HOME OFFICE ATTACHMENTS

The System provides for Attachments to be added to a Submission.

Submission Dashboard Comments
Comments
Attachments (

S	ubmission Atta	chments							
	+ New								
		Description	T	Attachment Type	T	Processing Status	T	Date Created	
	No records four	nd matching specified crite	ria.						<u>ـ</u>

Click the **+ New** button at the top left of the screen to add documents to a Submission.

4	Submission Atta	achments							
	+ New <	<u> </u>							
		Description	Y	Attachment Type	T	Processing Status	T	Date Created	
	No records fou	nd matching specified criteria							~

HOME OFFICE ERROR CHECK

Selecting Submission Errors from the Actions list will open the Submission Errors page.



Click the **Run Error Checks Now** button to perform edits and validations that have been programmed into the System.

Submission Error Check										
Use the grid below to If you need to print this list, click on t	Prun error checks or the Errors and Reminders link und	n this submission and re er the Reports menu.	eview the results.							
Run Error Checks Now	Run Error Checks Now Showing Unresolved Entries Only									
Type Message Status Worksheet Date Created										
No errors have been identified for th	is submission.			· · · · · · · · · · · · · · · · · · ·						

A list of messages will display as applicable. If available for a message, the Worksheet and field can be accessed directly from the page. Click the **magnifying glass icon** next to the desired message and the System will go directly to the field. Updates can be made on the Worksheets to resolve the issues found.

Submission Error Check									
Use the grid below to run error checks on this submission and review the results. If you need to print this list, click on the <i>Errors and Reminders</i> link under the Reports menu. Run Error Checks Now Hide Resolved Entries									
Туре	Message	Status	Worksheet	Date Created					
Q Data Missing	Account Codes are required if salaries or hours are entered.	Created	Direct Care Costs	12/01/2020					
Q Data Missing	Account Codes are required if salaries or hours are entered.	Created	Direct Care Costs	12/01/2020					

Note: Each of the display panels only show a certain number of rows at a time. While there is a scroll function for some of them, there is also a paging bar at the bottom of the screen showing the number of items per page (which can be adjusted) and the total number of items in the list.

							· · ·
нч	2	M	10	item	ns per page	1 - 10 of 19 items	Ċ

To return to the Submission Errors page, select **Error Check** from the **Actions** list drop down. Click the **Run Error Checks Now** button and the issues that have been resolved will show in the Status column.

Run E	rror Checks Now Hide Resolved	Entries			
	Туре	Message	Status	Worksheet	Date Created
٩	Data Missing	Account sf012 requires a comment to identify source.	Resolved	Square Footage By Cost Center	12/04/2020
٩	Out of Balance	The amount entered for account 730560 must match the total of Accounting Fees listed on the Professional Fees worksheet.	Created	Administration	12/01/2020

The Error Check can be run as many times as needed while working on the Submission.

HOME OFFICE SUBMISSION EXTENSION

For each FNHURS Report or FNHURS Home Office Report, a one-time 30-day extension may be requested. To submit the extension request to the Agency, select **Request 30-day** Extension from the

menu.



A pop-up will appear where you may select **Request Extension** or **Cancel** if an extension is not needed.

Request 30-day Extension	×
Providers can request a one-time of this submission.	30-day extension of the due date
Request Extension	Cancel

HOME OFFICE SUBMIT FOR REVIEW

The Submit for Agency Review sends the Submission to AHCA staff so they can begin their review of the information.

Click the Actions list drop down and select Agency Review.



Unresolved issues will display on the page, but will not stop Providers from being able to send Submissions to the Agency.

e ready to submit your information to the	agency for review, add an optional message for the analyst and click the Submit	for Review button.	ibmit för Revie					
Add Your Comments Here								
Туре	Message	Status						
Out of Balance	The amount entered for account 930940 cannot exceed total allocated for Property Costs for all supervisory auth listed on the Related Party Costs worksheet.	the norities Unresolved						
Dut of Balance	The total amount entered for accounts 911379 and 9119 cannot exceed the total allocated for indirect Nursing C all supervisory authorities listed on the Related Party Co worksheet.	199 Isst for Unresolved Unresolved	\longrightarrow					
Dut of Balance	The amount entered for account 730500 cannot exceed total allocated for Admin / Operation Costs for all super- authorities listed on the Related Party Costs worksheet.	the isory Unresolved						
	The amount entered for account 730500 must match th	e total						

Note: There is a scroll bar to view the messages on the page. In addition, there could be multiple pages of messages, so be sure to look at the bottom of the list for that information so items do not get missed.

AHCA staff have the same view of a Submission as the Providers. They will see the same list of errors and issues, including outstanding items.

When ready to send a Submission to the Agency, enter any additional comments needed, click the **Submit for Review** button at the top right of the screen, and then click **Submit Now**.



Once a Submission has been sent to the Agency, the System will return to the Submission Tracking Dashboard for that Submission. The Submission will be locked, meaning no further changes can be made while the Submission is under review by AHCA Staff.

Sample Home Office - TST - 1	2/31/2021				O Actions - ↔ Reports -		
1 START	2 DATA INPUT CHECK FO	RERRORS	4 SUBMIT FOR REVIEW	5 JNDER AGENCY REVIEW	T ACCEPTED		
Worksheets Click to Open	This submission is no	ow 318 day	y(s) overdue.		Contact Info		
Facility Info	Additional Information	Current Owner Example Provider					
Contact Info	This submission is of	ther lockey	d ar you do not have normi	issian to onter or unload data	Change Owner example@test.com		
Assets	at this time.	at this time.					
Liabilities & Equity							
Revenue & Expense	Related Providers				Review History		
Audit	See the Provider Info tab to	manage this	ist.		03/06/2023: Unsubmitted		
	Provider Name	Identifier	Last Submission End Date	Last Submission Current Stage	03/14/2025. Onder Review		
	HOWDY NEIGHBOR		12/31/2021	Under Agency Review			
		10	 items per page 	1 - 1 of 1 items 💍			
	Reminders			Recent Collaboration	show all comments		
	• 04/30/2022: Due dat	e to certify th	is submission for agency review.	Example Provider Test Home Office Submissi	(a few seconds ago) 01 Submit for Review		

When a Submission has been sent to the Agency for Review, it will be listed in the <u>Under Agency Review</u> section of the Submission Dashboard accessed via the **Report Dashboard** tab at the top of the page.

Search

The Search page allows for users to look for Submissions based on different criteria.

\bigcirc	Provider Data Submissio	n System									Example example	Provider @test.com
	A Report Dashboard Q Searc	h 🛄 Provid	er Data 📓	Request Provid	er Access 🗧 🏝	🕴 Manage Reg	istrations				🚱 Go	to AHCA's Home Page
Search Submissions Complete one or more of the fields below to refine the list based on your criteria. The list will automatically change as you adjust the fields.												
Search Cri	iteria	Search F	Results									
Program	•		Name	Identifier	Program	Start Date	End Date	Due Date	Revision	Current St	Date Crea	
Name Identifier	Enter text to search by provider na Enter text to search by identifier.	Open	Sample Home Office	TST	FNHURS Home Office Report	01/01/2021	12/31/2021	04/30/2022	0	Under Agency Review	03/06/2023	*
Current Stage	•	Open	HOWDY NEIGHBOR	3 3	FNHURS Report	01/01/2021	12/31/2021	04/30/2022	0	Under Agency Review	03/06/2023	
Started After Ended	Enter a date for the earliest	Open	Allegro Senior Living, LLC	ASL	FNHURS Home Office Report	11/01/2021	11/01/2022	03/01/2023	0	Data Input	03/05/2023	
By Clear Sea	urch Criteria	Open	EMERALD SHORES HEALTH AND REHABILI	0 0	FNHURS Report	03/06/2022	03/05/2023	07/03/2023	0	Data Input	03/05/2023	
How to Use At least three entered in the narrow base automatically the fields.	e This Screen te (3) letters and/or numbers must be the Name and Identifier fields for the list to ad on those values. The Results list will by change based on the values entered in lates: the data is estend in the Started (Africe	H	1 1 H	10	items per pa	ge					1-1	t of 4 items 💍

Provider Data

Provider Data is information pertaining to individual Providers, and not to the individual Submissions. The page currently provides the ability to enter, modify, and delete FVRS Project information; this section does not apply to FNHURS. It also displays the Related Parties, Related Providers, and Chain Component providers for Nursing Homes and NH Home Offices; this section applies to FNHURS submissions if applicable. NH Home Offices shall use this section to add all related Florida licensed Nursing Homes.

Related Parties

The **Provider Data** tab has a **Manage Related Parties** section to view the Supervisory Authorities, the Related Providers, and the Related Parties and Chain Components.

Select the **Provider Data** tab at the top of the page to view the Related Parties information.

Provider Data Submission System											
	Report Dashboard	Q Search	III Provider Data	Request Provider Access	Manage Registrations						
Manage Select from	Manage Data for Registered Providers Select from one of your registered providers below to manage data specific to that provider.										
Mana Select fro	Manage Data for Registered Providers Select from one of your registered providers below to manage										
Select	a Program and Pro	vider									
Select	a Program										
Nur	Nursing Home Provider										
NHI	P Home Office										
FN	HURS Report										
FN	HURS Home Office Re	port									

Click the little arrow to display the list for the **Select a Program** field under **Select a Program and Provider**. Select the desired program.

Only Providers for which the user has **Admin Access Granted** or **Access Granted** will be available for selection. Click the little arrow to the right of **Select an Authorized Provider** field to display the list of available Providers based on the Program selected.

Manage Data for Registered Provide Select from one of your registered providers below to m	ers nana
Select a Program and Provider	
Select a Program	
FNHURS Home Office Report	
Select an Authorized Provider	
•	
Allegro Senior Living, LLC (ASL)	

Click the **Manage Related Parties** heading to expand that section of the page.



To add a **Related Party**, select the **+ New** button.



Select the **Relationship** from the dropdown.

Edit Related Party		×
Relationship		4
Name		•
		//
Friendlyldentifier		
OwnershipCode		
Owned		
O Managed		
U Leaseu		
IsRelated		
	✓ Update	O Cancel
		•

Relationship				
Supervisory Authority				
Chain Component				
Related Provider				
Related Party				

Select **Related Provider** to link a licensed Nursing Home to a NH Home Office or another licensed Nursing Home.

Select **Supervisory Authority** to link a NH Home Office to a licensed Nursing Home.

Select the licensed Nursing Home from the dropdown for **Select Related Provider**.

Select Related Provider				
	•			
ABBEY DELRAY (0)0)	-			
ABBEY DELRAY SOUTH (C 0)0)				
ABBEY REHABILITATION AND NURSING CENTER (C))				
ADVANCED CARE CENTER (0 0)				

Information will populate once a licensed Nursing Home is selected. Select the **Ownership Type** if applicable.

Make sure to check the box for **IsRelated** to create the relationship between the Nursing Home and the Home Office or Nursing Home.

Edit Related Party	×
Relationship	
Related Provider	
Select Related Provider	
HOWDY NEIGHBOR ()	,
Name	
HOWDY NEIGHBOR	11
Friendlyldentifier	
OwnershipCode	
Owned Managed	
○ Leased	
IsRelated	
✓ Update 🛇 Cano	:el
	- P

Once complete, select **Save** or **Update** to save the changes. The relationship will now display in the **Manage Related Parties** section.

lanage Related Parties								
+ New	Provi Ť	identif T	Relationship	Owne ¥	Relat Y	Last Y	Last Y	
/ Edit	WINTER PARK CARE AND REHABILITATI	0)	Related Provider	c				8
🖊 Edit	TERRACES OF LAKE WORTH CARE CENTER	01 0	Related Provider	м	true			
/ Edit	EMERALD SHORES HEALTH AND REHABILITATI	00	Related Provider	o	true			8

A relationship may be edited by clicking the **Edit** button.

A relationship may be removed by clicking the **red trashcan** button.

Appendix A: Manage Registrations

Provider Administrator users will only see the other users who have, or have requested, access for those Providers they are Admins for on the Manage Registrations page.

If an Admin for one Provider also has Access Granted to a different Provider, they will not be able to see the other users for the Access Granted Provider.

AHCA Administrators have a complete view of the users and their access. The user below has Admin Access Granted and Access Granted to several Providers.

	Email	Last Name 🔻	First Name	T	Date Registered	
• (example@test.com	Provider	Example		03/05/2023 11:51 AM	^
	✓ Save changes	changes				
	User Role	Requested Provider / Identifier 🕇	T	Date Requested 📍	Provider Status 🝸	
	Access Granted	Allegro Senior Living, LLC (ASL)		03/06/2023 07:14 PM	Active	
	Access Denied	Ascension Senior Living (ASC)		03/06/2023 07:14 PM	Active	
	Access Requested	BALANCED HEALTHCARE (0 0)		03/06/2023 07:14 PM	Active	
	Access Denied	BISHOPS GLEN RETIREMENT CENTER (C	D)	03/06/2023 07:14 PM	Active	
	Access Requested	BROOKDALE PALMER RANCH SNF (0 0)		03/06/2023 07:14 PM	Active	
	Access Requested	CALUSA HARBOUR (0 0)		03/06/2023 07:14 PM	Active	
	Access Requested	DAYTONA BEACH HEALTH AND REHABILITATION	CENTER (0 0)	03/06/2023 07:14 PM	Active	
	Access Requested	DELTONA HEALTH CARE (0 0)		03/06/2023 07:14 PM	Active	
	Access Granted	EMERALD COAST CENTER (0 0)		03/06/2023 07:14 PM	Active	
	Admin Access Granted	EMERALD SHORES HEALTH AND REHABILITATION	N ((0)	03/06/2023 07:14 PM	Active	-
м	< 1 ► H10 ▼	items per page			1 - 2 of 2 items	Ċ

The Manage Registrations page for the user above shows their Admin Access, along with another user that has Access Granted to one of the Providers.

Зу	/stem	ı					dmc.y	Donna Young oung@outlook.com Guick to Edit
Jer	Data	🛱 Request Provider Access	Manage Registrations					Go to AHCA's Ho
u h	nave be	en authorized to manage.						
ſ	User I	Registration Profiles						
	st	nowing All Registrations						
		Email	▼ Last Name	T	First Name	T	Date Registered	
	• (dmc.young@outlook.com	Young		Donna		07/27/2020 03:56 PM	
		✓ Save changes ♦ Cance	l changes					
		User Role		Requested Provider / Ide	ntifier 🕇		Date Requested	
		Admin Access Granted		ADVENTHEALTH CARE C	ENTER ORLANDO NORTH (032043900)		11/04/2020 01:44 PM	
		Admin Access Granted		LOURDES-NOREEN MCK	EEN RESIDENCE FOR GERIATRIC CARE	, INC. (020592300)	11/04/2020 01:44 PM	
	•	dyoungtest2@test.com	Young		Donna		05/12/2020 10:03 AM	
		✓ Save changes ♦ Cance	l changes					
		User Role		Requested Provider / Ide	ntifier 🕇	٣	Date Requested	٣
		Access Requested		LOURDES-NOREEN MCK	EEN RESIDENCE FOR GERIATRIC CARE	, INC. (020592300)	11/04/2020 02:19 PM	

The user below has access to Providers for which the above user only has Access Granted, but they cannot be seen by that user on their Manage Registrations page.

• (webbd@crstest.com	Webb		Daryl	07/23/2020 02:11 PM
	✓ Save changes ♦ Cancel changes				
	User Role			ntifier 🕇	
	Read Only Access Granted		A.D.M.E. Investment Partner	rs, Ltd. (ADM)	10/21/2020 07:34 PM
	Access Granted		Advent Christian Village, Ind	2. (ACV)	10/21/2020 07:34 PM
	Admin Access Granted		BON SECOURS MARIA MAR	NOR NURSING CARE CENTER (020010700)	10/21/2020 07:34 PM
	Access Granted		CARROLLWOOD CARE CEM	ITER (026387700)	10/21/2020 07:34 PM
	Access Granted		CLARIDGE HOUSE NURSING	3 & REHABILITATION CENTER (020850700)	10/21/2020 07:34 PM

Appendix B: Notes on Specific Account Numbers

FNHURS schedules utilize the Medicaid Cost Report Chart of Accounts required in Title XIX Long-Term Care Reimbursement Plan authorized in section 409.908, FS. The plan is available at: https://ahca.myflorida.com/medicaid/cost-reimbursement/nursing-home-rates. The Medicaid Cost Report Chart of Accounts is used in lieu of creating a separate chart of accounts for the FNHURS report.

In order to collect all the data necessary and identify it with an account number, the Agency created additional account numbers/names. Account numbers on the Staffing Tab associated with licensed or certified staff positions are for reference purposes only and the meaning is defined by the position type and column header. The following accounts were created for the purposes of the FNHURS report and are in addition to the standard Medicaid Cost Report chart of accounts:

BSE001	Total Equity/Fund Balance	This is the sum of all 5xxxx Equity and Fund Balance
		Accounts
EXOP01	Total Operations	This account is sum of following expense accounts on the
		FNHURS report 710000, 720000, 730000, 916000, 918000
EXDC01	Total Direct Care	This account is sum of following expense accounts on the
		FNHURS report 810000, 912000, 921000, 922000, 923000,
		924000, 927000, 928000
EXIC01	Total Indirect Care	This account is sum of following expense accounts on the
		FNHURS report 911000, 914000, 915000, 917000, 925000,
		926000, 929000, 940000, 941000, 942000
EXPR01	Total Property	This account is sum of following expense accounts on the
		FNHURS report 930100, 930200, 930300, 930400, 930900
EXNA01	Total Other Expenses	This account is sum of following expense accounts on the
		FNHURS report 995000, 998000, 999000
EXI001	Extraordinary Items	Gains or losses from events that were unusual and
		infrequent in nature that were separately classified,
		presented and disclosed on companies' financial
		statements.
ITX001	Income Taxes	For tax paying entities, the Federal income tax expense
		reported on the income statement of the audited financial
		statements. For cost report purposes this amount would
		have been recorded in 999003; however, for FNHURS
		purposes it should be recorded here.
GR0001	Gross Revenue/Charges	This account represents the total of unadjusted charges
		for revenue categories 601000, 602000, 603000, 604000,
		605000, 606000, 607000, 608000, 609000, 610000,
		611000, 613000, 619000
AGR001	Adjustments to Gross	This account represents the total of adjustments to
	Revenue	charges for revenue and includes categories 670000 and
		680000
NR0001	Net Revenue	This account is the sum of Gross Revenue/Charges
		(GR0001) and Other Revenue (690000) less Adjustments
		to Gross Revenue (AGR001)
EX0001	Total Expense	This account is the sum of expenses: Operations (EXOP01),
		Direct Care (EXDC01), Indirect Care (EXIC01), Property
		(EXPR01) and Other Expenses (EXNA01)

NIC001	Net Income	This account represents total profitability and is the combination of Net Revenue (NR0001) less Total Expenses (EX0001) plus the impact of Extraordinary Items (EXI001) and Income Taxes (ITX001)
CF0001	Net Cash Provided by Operating Activities	Represents the net cash from Operating Activities Section of the standard Cash Flow Statement included in a set of audited financial statements.
CF0002	Net Cash Provided by Investing Activities	Represents the net cash from Investing Activities Section of the standard Cash Flow Statement included in a set of audited financial statements.
CF0003	Net Cash Provided by Financing Activities	Represents the net cash from Financing Activities Section of the standard Cash Flow Statement included in a set of audited financial statements.

In addition to the above explanation of new accounts, to eliminate confusion between the cost report and FNHURS, account names with the terms "Allowable", "Non-Allowable", or "Non-Reimbursable" are excluded from FNHURS. This terminology is specific to cost reimbursement and is not relevant to FNHURS data reporting. As the FNHURS report utilizes the Medicaid Cost Report Chart of Accounts, we have provided the crosswalk below of where the values of those accounts should be included in the FHURS report.

- 929000 Other Allowable Ancillary Costs
 - The term "Allowable" removed from the title
 - Should include any costs associated with 943000 Other Non-Allowable Ancillary Costs
- 999000 Other Non-Allowable Costs
 - The term "Non-Allowable" removed from the title
 - Should include any costs associated with 990000 Non-Reimbursable Costs
- 619000 Other Allowable Ancillary Cost Centers
 - The term "Allowable" removed from the title

Home Office Revenue & Expense Worksheet and Nursing Home Expenses Worksheet

- Account 943000 should be included in Account 929000
- Account 990000 should be included in 999000

Nursing Home Worksheets

• Assets should equal Liabilities & Equity/Fund Balances