

Dear Administrator,

Per 19 CSR 30-82.010 (8), every skilled nursing facility, intermediate care facility, residential care facility and assisted living facility issued a license or temporary operating permit by the department shall submit the required certificate of need quarterly surveys to the department on or before the fifteenth day of the first month following the previous Social Security quarter.

Please read the following information for completing the Certificate of Need (CON) Quarterly Survey. If you have any questions, please contact the Certificate of Need Program staff at 573-751-6403 or send an email to consurvey@health.mo.gov.

CON Quarterly Survey Timeline

1st Quarter Survey Opens **April 1** and due on the 15th- *facilities report occupancy during 1/1 to 3/31*

2nd Quarter Survey Opens **July 1** and due on the 15th- *facilities report occupancy during 4/1 to 6/30*

3rd Quarter Survey Opens **October 1** and due on the 15th- *facilities report occupancy during 7/1 to 9/30*

4th Quarter Survey Opens **January 1** and due on the 15th- *facilities report occupancy during 10/1 to 12/31*

****A facility that recently opened or closed will be surveyed only if it is operational for the full quarter. A facility that added or delicensed beds in the middle of a quarter will have those changes reflected on the next full quarter survey.**

A reminder will be sent on the 1st day of every Quarter, to the email address provided on the last survey, notifying the facility that the CON Quarterly Survey is now open. **Please let our office know of any changes to the facility contact information.** Otherwise, the facility may not receive the reminder email. The email will include the Facility Number and Personal Identification Number (PIN) to log in to the CON website, <https://consurvey.dhss.mo.gov/CONFacility/Login.aspx>.

Basic Instructions for Completing CON Quarterly Survey

Once logged in to the CON website, using the Facility Number and PIN provided in the reminder email, select the Quarterly Survey to be completed. This is an example of what the RCF/ALF survey will look like. The fields circled in red are required to be completed. Once all fields are completed, click "update survey" in the bottom right hand corner. ***Submit survey within 15 minutes of logging in or the system with time you out with no notification***

The screenshot shows a web form titled "CON SURVEY RCF/ALF". It contains several input fields and a "Update Survey" button. Red circles highlight the following fields: "Unavailable Licensed RODs" (value 0), "Number of Occupied RODs" (value 3330), the "CERTIFY THAT THE ABOVE INFORMATION IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE" checkbox, the "Name and Title" field, the "Telephone Number" field, the "E-mail Address" field, and the "Update Survey" button.

Capacity:	37	RCF Beds:	37	ALF Beds:	0	<input type="button" value="Update Number of Beds"/>	
Days In This Quarter:	90	Survey Quarter:	1				
A. Licensed RODs:	3330	Survey Year:	2017				
B. Unavailable Licensed RODs:	0	End Of Cycle:	3/31/2017				
C. Total Number of Licensed and Available RODs:	3330	Survey Not Submitted:	<input type="checkbox"/>				
D. Number of Occupied RODs:	3330						
E. Number of RODs Vacant and Available For Residents:	3330						
Occupancy Percentage:	%						
<input type="checkbox"/> CERTIFY THAT THE ABOVE INFORMATION IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE							
Name and Title: <input type="text"/>							
Telephone Number: <input type="text"/>		E-mail Address: <input type="text"/>					
<input type="button" value="Update Survey"/>							

By clicking the “RCF/ALF Help” in the top left hand corner, a box will appear as below explaining the fields. Or if you hover over the field you are questioning, a short explanation will pop up.




SNF/ICF Help








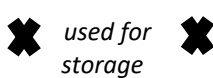
- **A. Licensed RODs:** The number of licensed beds is pre-filled above line A and multiplied by the number of days in this quarter. The resulting number of **Resident Occupancy Days (RODs)** is pre-filled on line A.
- **B. Unavailable RODs:** Enter the number of RODs in which the beds are not available for immediate occupancy. During this quarter, if you had converted double-occupancy rooms(s) to single-occupancy, or changed residents room(s) to another use such as office or storage space, or otherwise not allowed residents to occupy beds, enter the number of unavailable days. This can be determined by either counting the number of days each bed was unavailable and entering the total here, or, if the same beds were unavailable for the whole quarter, multiply that number by the number of days in the quarter, and enter that number here.
- **C. Total Licensed RODs:** Unavailable RODs (line B) is subtracted from the licensed RODs on line A and automatically calculated on line C. Line C will equal line A if ALL licensed beds have been available during the quarter.
- **D. Occupied RODs:** Enter the total RODs (24-hour period) for all days a resident occupied a bed during this period. Include beds held for residents who were hospitalized or who were on therapeutic leave during this quarter.
- **E. Vacant RODs:** Occupied RODs (line D) is subtracted from Total RODs (line C) and automatically calculated on line E. Line E represents vacant but available RODs during this period.
- **F. Medicaid Certified RODs:** The number of Medicaid beds is pre-filled above line F and multiplied by the number of days in this quarter. The resulting number of Medicaid RODs is pre-filled on line F.
- **G. Unavailable Medicaid RODs:** Same definition as line B above, except applied to Medicaid certified beds.
- **H. Total Medicaid RODs:** Unavailable Medicaid RODs (line G) is subtracted from the Medicaid certified RODs (line F) and automatically calculated on line H. Line H will equal line F if ALL Medicaid certified beds have been available during the quarter.
- **I. Occupied Medicaid RODs:** Enter the total RODs (24-hour period) for all days a Medicaid resident occupied a Medicaid bed during this period. Include beds held for residents who were hospitalized or who were on therapeutic leave during this quarter.
- **J. Occupied Non-Medicaid RODs:** Enter the total RODs (24-hour period) for all days a private pay or other Non-Medicaid resident occupied a Medicaid bed during this period. Include beds held for residents as described in occupied Medicaid RODs (line I).
- **K. Vacant Medicaid RODs:** Occupied Medicaid RODs (line I) and occupied Non-Medicaid RODs (line J) are subtracted from Total RODs (line H) and automatically calculated on line K.

Below is an illustration of a 12-bed LTC Facility with 6 rooms to help you better understand available and unavailable beds. (all rooms built to double-occupancy standards)

Key

-  Resident
-  Available Bed
-  Unavailable Bed






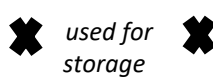
DAY 1

<p>Room #1 Semi-private room</p>  <p>Licensed beds- 2 Occupied beds- 2 Available beds- 2 Unavailable beds- 0</p>	<p>Room #4 Private room</p>  <p>Licensed beds- 2 Occupied beds- 1 Available beds- 1 Unavailable beds- 1</p>
<p>Room #2 Semi-private room</p>  <p>Licensed beds- 2 Occupied beds- 2 Available beds- 2 Unavailable beds- 0</p>	<p>Room #5 Semi-private room</p>  <p>Licensed beds- 2 Occupied beds- 0 Available beds- 2 Unavailable beds- 0</p>
<p>Room #3 Semi-private room</p>  <p>Licensed beds- 2 Occupied beds- 1 Available beds- 2 Unavailable beds- 0</p>	<p>Room #6 Semi-private room</p>  <p>Licensed beds- 2 Occupied beds- 0 Available beds- 0 Unavailable beds- 2</p>

Totals for Day1

Licensed Beds: 12
 Available Beds: 9
 Unavailable Beds: 3
 Occupied Beds: 6
 Occupancy: 66.7% (6 occupied/9 available)







Day 2

<p>Room #1 Semi-private room</p>  <p>Licensed beds- 2 Occupied beds- 2 Available beds- 2 Unavailable beds- 0</p>	<p>Room #4 Private room</p>  <p>Licensed beds- 2 Occupied beds- 2 Available beds- 2 Unavailable beds- 0</p>
<p>Room #2 Semi-private room</p>  <p>Licensed beds- 2 Occupied beds- 2 Available beds- 2 Unavailable beds- 0</p>	<p>Room #5 Semi-private room</p>  <p>Licensed beds- 2 Occupied beds- 1 Available beds- 2 Unavailable beds- 0</p>
<p>Room #3 Semi-private room</p>  <p>Licensed beds- 2 Occupied beds- 1 Available beds- 2 Unavailable beds- 0</p>	<p>Room #6 Semi-private room</p>  <p>Licensed beds- 2 Occupied beds- 0 Available beds- 0 Unavailable beds- 2</p>

Totals for Day 2

Licensed Beds: 12
 Available Beds: 10
 Unavailable Beds: 2
 Occupied Beds: 8
 Occupancy: 80% (8 occupied/10 available)

DAY 3

<p>Room #1 Semi-private room</p>  <p>Licensed beds- 2 Occupied beds- 2 Available beds- 2 Unavailable beds- 0</p>	<p>Room #4 Private room</p>  <p>Licensed beds- 2 Occupied beds- 1 Available beds- 1 Unavailable beds- 1</p>
<p>Room #2 Semi-private room</p>  <p>Licensed beds- 2 Occupied beds- 2 Available beds- 2 Unavailable beds- 0</p>	<p>Room #5 Semi-private room</p>  <p>Licensed beds- 2 Occupied beds- 2 Available beds- 2 Unavailable beds- 0</p>
<p>Room #3 Semi-private room</p>  <p>Licensed beds- 2 Occupied beds- 1 Available beds- 2 Unavailable beds- 0</p>	<p>Room #6 Private room</p>  <p>Licensed beds- 2 Occupied beds- 1 Available beds- 1 Unavailable beds- 1</p>

Totals for Day 3

Licensed Beds: 12

Available Beds: 10

Unavailable Beds: 2

Occupied Beds: 9

Occupancy: 90% (9 occupied/10 available)

OCCUPANCY FOR ALL 3 DAYS

Licensed RODs: 36

Available RODs: 29

Unavailable RODs: 7

Occupied RODs: 23

Occupancy: 79.3% (23 occupied days/29 available)

Commonly Asked Questions

What is a ROD (Residence Occupancy Day)?

A ROD is a day that a bed is licensed. (For example, a facility that is licensed for 25 beds would have 2,300 RODs for a quarter that consists of 92 days. (25 x 92.)

What is an Unavailable Licensed ROD?

An Unavailable Licensed ROD is a licensed bed that was unavailable for occupancy (of any resident) on a given day. If a room is licensed for 2 beds and a resident is occupying that room as private, there would be 1 unavailable bed for the duration of that residents stay. If a licensed rooms or rooms are undergoing renovations or are temporarily converted office space the # of beds licensed in those rooms are considered unavailable. (# unavailable beds x # of days = # entered into Line B.

How is the day counted if the licensed bed is occupied by a resident? The day is counted as an Occupied ROD and Available.

How is the day counted if the resident is in the hospital or in physical therapy?

The day is counted as an Occupied ROD and Available if the resident is still paying for that bed. If the resident is not paying to hold that bed while they are away but the facility is holding the bed and/or would not place a new resident in the room, it would be counted as an Unavailable Licensed ROD.

How is the day counted if the resident has left or has become deceased?

If the resident occupied the licensed bed for a part of the day and billed for that day, it would be counted as an Occupied ROD. If the bed was not occupied for a part of the day, not billed, and is not available for occupancy within 24 hours, it is counted as an Unavailable Licensed ROD.

How is the day counted if the licensed bed is not being utilized because the room which is licensed for two beds is being used as a private room? It is counted as an Unavailable Licensed ROD.

For Medicaid/Medicare questions please call MoHealthNet at 573-751-5663

To Revise or Correct a Submitted Survey:

****Facilities only have log in access to the survey from the first day to the last day of the month when the survey opens. Any changes after must be submitted to ConSurvey@Health.Mo.Gov****

- Log into the CON online survey system
- ***Submit survey within 15 minutes of logging in or the system with time you out with no notification***
- A system message will appear: "Survey for this quarter has been submitted".
- Press "OK".
- Press "Open" on the SNF/ICF or the ALF/RCF survey bar, whichever is applicable.
- Correct your occupancy data figures.
- Make sure the information is accurate, the check the "I Certify..." box. Enter your Name/Title, Telephone Number, and Email Address.
- Press the "Submit Survey" button.
- A confirmation message will appear and the survey will close.
- Press the "Open" button and the press the "Print Survey" button to print a copy for your records.