

# 2023 LONG TERM CARE QUALITY ASSURANCE PERFORMANCE IMPROVEMENT PROGRAM



CONTRA COSTA  
**HEALTH**



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# 1 INTRODUCTION

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CCHP’s goal is to provide accessible, affordable, and high-quality care. Following state guidelines, we have developed a comprehensive Quality Assurance Performance Improvement Program (QAPI) to ensure members receiving care in Skilled Nursing Facilities (SNF) Long Term Care (LTC) receive high quality services. This report evaluates data from sources, including the California Department of Public Health (CDHP), Centers for Medicare and Medicaid Services (CMS), and the Department of Healthcare Services (DHCS). We also utilized internal sources such as SNF QAPI programs to determine how each facility is assessing quality and addressing areas of improvement.

As part of the CalAIM initiative, which aims to streamline Medi-Cal by reducing complexity and standardizing benefits across the state, significant changes have been made to the provision of institutional LTC services. Effective January 1, 2023, the Department of Health Care Services (DHCS) has mandated that most non-dual and dual LTC members, including those with a Share of Cost, must be enrolled in a managed care plan (MCP) for SNF services. This shift, designed to enhance consistency and reduce county-to-county variations, replaces the previous system where members in 31 counties were transitioned to Medi-Cal Fee-For-Service (FFS) after one month of SNF care. Beginning January 1, 2024, this requirement extended to institutional LTC members in Subacute Care Facilities and Intermediate Care Facilities for the Developmentally Disabled (ICF/DD).

Through our evaluation, we also identified areas of improvement that will drive our quality improvement initiatives. This report demonstrates our commitment to improving the quality of care our members receive, especially those who are most vulnerable to health problems such as SNF residents.

## 2 SNF PLACEMENT

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### 2.1 BACKGROUND

On a quarterly basis, DHCS collects a SNF Monitoring report from all health plans, which covers topics such member placements to in-network and out-of-network placements, grievances, continuity of care, and transportation. Data sources for this report include authorizations, claims, grievances, non-medical transportation (NMT), and Continuity of Care requests.

### 2.2 METHODS

For this analysis, CCHP modified the run dates for the quarterly report to cover the calendar year to identify unique member placements by facility in the calendar year. CCHP collected the total member placements by identifying a claim by type of bill code attributed to a member at a given facility.

## 2.3 RESULTS

In 2023, CCHP had 1,882 members placed during the reporting period, for a total of 2,139 facility placements. 1,750 members were placed into an in-network SNF and 168 members were placed out-of-network.

In, 2023, CCHP had members placed at 49 in-network SNF and 83 out-of-network SNF. Of the 132 unique SNF facilities, 26 facilities had more than 20 CCHP members placed. Amongst these facilities, 25 were in-network and one out-of-network (Table 1). Appendix 10.1 and 10.2 provide placement level data for all CCHP SNF facilities.

*Table 1. 2023 SNF Placements*

Facility	Facility Address	In -Network/Out of Network	2023 Placements
San Miguel Villa (Concord Post Acute)	1050 San Miguel Rd, Concord, Ca 94518	In-Network	222
Lone Tree Post Acute	4001 Lone Tree Way, Antioch, Ca 94509	In-Network	142
Diablo Valley Post Acute	3806 Clayton Rd, Concord, Ca 94521	In-Network	140
Tampico Terrace Care Center	130 Tampico Way, Walnut Creek, Ca 94598	In-Network	130
Delta View Post Acute	1210 A Street, Antioch, Ca 94509	In-Network	120
Vale Healthcare Center	13484 San Pablo Avenue, San Pablo, Ca 94806	In-Network	112
Diamond Ridge Healthcare Center	2351 Loveridge Road, Pittsburg, Ca 94565	In-Network	102
Bayberry Skilled Nursing Center	1800 Adobe Street, Concord, Ca 94520	In-Network	91
Legacy Post Acute Care	1790 Muir Rd, Martinez, Ca 94553	In-Network	82
Ghc Of Walnut Creek LLC	1224 Rossmoor Parkway, Walnut Creek, Ca 94595	In-Network	62
Willowpass Health Care Center	3318 Willow Pass Rd, Concord, Ca 94519	In-Network	54
La Casa Via Transitional Care Center	1449 Ygnacio Valley Rd, Walnut Creek, Ca 94598	In-Network	53
San Pablo Healthcare & Wellness Center	13328 San Pablo Ave, San Pablo, Ca 94806	In-Network	52
Creekside Healthcare Center	1900 Church Lane, San Pablo, Ca 94806	In-Network	48
Martinez Healthcare Center	331 Ilene St, Martinez, Ca 94553	In-Network	47
Shields Nursing Center	606 Alfred Nobel Dr, Hercules, Ca 94547	In-Network	47
Pleasant Hill Post Acute	1625 Oak Park Blvd, Pleasant Hill, Ca 94523	In-Network	46
Mchs Walnut Creek SNF	Dept L 2653, Columbus, Oh 43260	In-Network	45
Richmond Post Acute Care	955 23rd St, Richmond, Ca 94804	In-Network	39
Moraga Post Acute	348 Rheem Bl, Moraga, Ca 94556	In-Network	36
Manorcare Health Services	Dept L 2653, Columbus, Oh 43260	In-Network	34
Windsor Rosewood Care Center	1911 Oak Park Blvd, Pleasant Hill, Ca 94523	In-Network	30
Stonebrook Health Care Center	4367 Concord Blvd, Concord, Ca 94521	In-Network	28
Orinda Care Center	11 Altarinda Road, Orinda, Ca 94563	In-Network	26
Grey Pine Holdings LLC	2765 Mitchell Dr, Walnut Creek, Ca 94598	Out-of-Network	22
Pittsburg Skilled Nursing Center	535 School Street, Pittsburg, Ca 94565	In-Network	21

## 2.4 DISCUSSION

Over 93% of member placements occurred in in-network facilities, indicating that CCHP has successfully maintained a strong network for SNF placements, which allow for better continuity of care and improved health outcomes as these facilities have established relationships with the health plan.

Twenty-six facilities were responsible for 86% of CCHP members' placement. These "high volume" facilities are particularly significant for CCHP and will be the focus of further analysis in this quality monitoring report. By concentrating on these high-volume sites, CCHP aims to enhance quality oversight and ensure that the care provided at these key facilities meets the organization's standards and expectations.

## 3 CDPH SURVEY DATA

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### 3.1 BACKGROUND

The California Health Facility Information Database (CalHealth Find) provides information about healthcare providers and facilities in California. The database includes facility compliance history for the current year and within the three past calendar years. Specifically, it provides survey deficiency results, site visit findings, inspections, complaints, and facility reported incidents. Survey deficiencies are categorized by severity as outlined in Table 2.

*Table 2. Level of Severity*

	Description
Level 1	No actual harm with potential for minimal harm
Level 2	No actual harm with potential for more than minimal harm that is not immediate jeopardy.
Level 3	Actual harm that is not immediate jeopardy.
Level 4	Immediate jeopardy, a situation in which immediate corrective action is necessary because the facility's noncompliance with one or more requirements of participation has caused, or is likely to cause, serious injury, harm, impairment, or death to a resident receiving care in a facility.

### 3.2 METHODS

CCHP reviewed each SNF's data on the CalHealth Find website, focusing on survey deficiencies, complaints and incidents. Facility deficiencies were reviewed and those with level 3 and level 4 deficiencies were flagged for further review. CCHP compared the total number of survey deficiencies for each facility to the state average and identified those with deficiencies above the state average. The total complaints and facility reported incidents for each facility were also compared to the state average.

### 3.3 OVERALL RESULTS

CCHP identified 13.8% of our facilities had survey deficiencies above the state average and approximately 5.2% were significantly above average (more than 50% above the state average). Three of our highest volume SNF had higher than average survey deficiencies. For complaints and facility reported incidents, 20.7% of CCHP facilities were above average and approximately 5.2% were significantly above average. Five of our highest volume SNF had complaints and facility reported incidents above the state average. Tables 3 and 4 below highlight these facilities, with high volume facilities indicated with an asterix. Appendix 10.3 provides individual level data for all CCHP SNFs.

*Table 3. 2023 CCHP SNF Survey Deficiencies*

Facility	State Average	Survey Deficiencies
North Park Post Acute	16	32
Lake Merritt Healthcare Center	14	31
La Casa via Transitional Care Center*	16	20
Hayward Healthcare & Wellness Center	16	22
Orinda Care Center*	14	16
Windsor Elmhaven Care Center	19	52
Windsor Hampton Care Center	19	37
Shields Nursing Center*	14	21

\*High volume facilities

*Table 4. 2023 CCHP SNF Complaints and Facility Reported Incidents*

Facility	State Average	Complaints/Incidents
Diamond Ridge Healthcare*	60	63
Lake Merritt Healthcare Center	16	36
Delta View Post Acute*	38	52
Oakland Healthcare & Wellness Center	38	52
Orinda Care Center*	16	34
Princeton Manor Healthcare Center	38	46
Redwood Healthcare Center	16	23
The Rehabilitation Center of Oakland	38	59
Vale Healthcare Center*	60	91
Windsor Vallejo Nursing and Rehabilitation Center	60	120
Windsor Elmhaven Care Center	60	81
San Miguel Villa (Concord Post Acute)*	60	69

\*High volume facilities

## 3.4 DISCUSSION

The findings indicate that a subset of CCHP facilities significantly deviates from state averages in both survey deficiencies and reported complaints. Although some of these facilities are high volume, only Orinda Care Center had a significantly higher average than the state average in complaints and facility reported incidents. However, it is important to note that only 1 of the 34 facility reported incidents was substantiated, meaning CDPH surveyors found evidence that the alleged action in the complaint occurred. Facilities with high levels of deficiencies and complaints may be experiencing systemic issues such as staffing challenges that impact care quality. Addressing these areas is crucial for enhancing overall performance and ensuring compliance with state regulations.

## 4 CMS CARE COMPARE

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### 4.1 BACKGROUND

Centers for Medicare and Medicaid Services (CMS) oversees the quality of nursing homes through a combination of quality reporting, surveys and inspections, a quality rating system, and enforcement and improvement initiatives. The CMS Care Compare website provides information about the quality of care in healthcare facilities. It presents an overall star rating for all facilities that are calculated based on: health inspections, staffing, and quality measure ratings.

The quality measure star rating is calculated from a Minimum Data Set (MDS) and Medicare claims. The rating is based on eleven measures that cover a range of functional and health status indicators. These measures are categorized into measures for long-stay residents (residents who are in the nursing home for more than 100 days) and short stay residents (residents who stayed in a nursing home for 100 days or less).

While the facility quality measures are applicable to the resident population as a whole, and are not exclusively representative of CCHP members, they provide a useful perspective on the quality of care that CCHP members receive in the facilities in which they are receiving care.

### 4.2 METHODS

CCHP reviewed each SNF's data on the CMS Care compare website and recorded the ratings for each facility in the overall, health inspections, staffing, and quality measures categories. The following eleven quality measures for each SNF were also reviewed:

1. Percentage of long-stay residents who have or had a catheter inserted and left in their bladder

2. Percentage of long-stay residents with a urinary tract infection
3. Percentage of long-stay residents experiencing one or more falls with major injury
4. Percentage of long-stay residents who got an antipsychotic medication
5. Number of hospitalizations per 1,000 long-stay resident days
6. Number of outpatient emergency department (ED) visits per 1,000 long-stay resident days
7. Percentage of Skilled Nursing Facility (SNF) residents with pressure ulcers/pressure injuries that are new or worsened
8. Percentage of short-stay residents who got antipsychotic medication for the first time
9. Percentage of short-stay residents who were re-hospitalized after a nursing home admission
10. Percentage of short-stay residents who have had an outpatient emergency department (ED) visit
11. Rate of successful return to home and community from a SNF

According to the CMS five-star quality rating system, nursing homes with 5 stars are considered to have much above average quality and nursing homes with 1 star are considered to have quality much below average. CCHP identified SNFs with 1- and 2-star ratings, as well as those cited for abuse. These facilities were further examined, including a review of the most recent inspection reports, deficiencies, and summary statements.

### 4.3 RESULTS

The average overall SNF rating was 3.94 which is higher than the state average of 3.2. There was a total of eight facilities (13.8%) with an overall 1- and 2-star rating as shown in Table 5. Two of CCHP's high volume SNF had a 2-star rating. Diamond Ridge Healthcare was the only facility with an abuse icon on their CMS care compare profile.

*Table 5. Overall CMS Rating*

Facility	Overall Rating
Diamond Ridge Healthcare*	2
Berkeley Pines Skilled Nursing Center	2
The Rehabilitation Center of Oakland	2
Willow Pass Health Care Center	2
Windsor Vallejo Nursing and Rehabilitation Center	2
Martinez Healthcare Center*	2
Windsor Elmhaven Care Center	1
Princeton Manor Healthcare Center	1

\*High volume facilities

In addition to the overall rating, CCHP looked at the individual ratings for each facility. Our average health inspections rating and staffing rating were above the state average. Our quality measure rating was slightly below the state average.

Table 6. CMS Star Ratings

	Overall	Health Inspections Rating	Staffing Rating	Quality Measure Rating
CCHP Average	3.9	3.6	3.3	4.3
CA Average	3.2	2.7	3.1	4.4

When looking at the individual quality measures, CCHP was above the state average in 8 of the 11 measures, but fell below in two measures related to emergency department visits, and one related to antipsychotics (Table 7).

Table 7. Quality Measure Performance Ratings

	CCHP Average	CA average	
Percentage of short-stay residents who were re-hospitalized after a nursing home admission	22.1	22.4	Lower percentages are better
Percentage of short-stay residents who have had an outpatient emergency department (ED)	13.5	11.5	Lower percentages are better
Percentage of short-stay residents who got antipsychotic medication for the first time	1.0	1.4	Lower percentages are better
Percentage of Skilled Nursing Facility (SNF) residents with pressure ulcers/pressure injuries that are new or worsened	1.5		Lower percentages are better
Rate of successful return to home and community from a SNF	51.7		Higher rates are better
Number of hospitalizations per 1,000 long-stay resident days	2.0	2.1	Lower numbers are better
Number of outpatient emergency department (ED) visits per 1,000 long-stay resident days	1.4	1.0	Lower numbers are better
Percentage of long-stay residents who got an antipsychotic medication	17.0	11	Lower percentages are better
Percentage of long-stay residents experiencing one or more falls with major injury	1.6	1.7	Lower percentages are better
Percentage of long-stay residents with a urinary tract infection	.8	1.4	Lower percentages are better
Percentage of long-stay residents who have or had a catheter inserted and left in their bladder	.8	1.2	Lower percentages are better

Appendix 10.4 includes quality measure data for each facility.

## 4.4 DISCUSSION

The CMS Care Compare data reveals that CCHP facilities generally perform above the state average in overall ratings and most quality measures, particularly in health inspections and staffing. Only two of our high-volume facilities had a star rating of 2 or below. Diamond Ridge Healthcare Center and Martinez Health Center both had low health inspections ratings which is the most important dimension in determining their overall rating.

Certain areas, such as emergency department visits and antipsychotic medication usage, indicate performance below the state average. Our performance in the “Percentage of residents who got an antipsychotic medication” measure was particularly lower and was analyzed further given the importance of this measure. Antipsychotic drugs have been found to be used in nursing homes to manage symptoms associated with dementia. Reducing the rate of antipsychotic medication use has been the focus of several CMS initiatives due to the significant adverse health effects associated with them. A high percentage in this measure could indicate concerns of over-prescription for patients with dementia or other mental health symptoms as well as insufficient staff training and assessment procedures. 11 of the 26 high-volume facilities had a poor performance on this measure. Further investigation is needed to determine whether the facilities with high rates of medication use have higher rates of patients with behavioral health symptoms and whether they are ensuring use of this medication is well documented and justified.

Addressing these measures, especially in facilities with the lowest ratings, is crucial for improving care quality and ensuring safer, more effective patient outcomes.

## 5 MCAS QUALITY MEASURES

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### 5.1 BACKGROUND

The Managed Care Accountability Sets (MCAS) is a set of performance measures that DHCS requires managed care health plans to annually report on. The following three measures are specific to long term care facilities:

- Healthcare-Associated Infections Requiring Hospitalization (HAI)
- Number of Out-patient ED Visits per 1,000 Long Stay Resident Days (OED)
- Potentially Preventable 30-day Post-Discharge Readmission (PPR)

Overall, lower SNF HAI scores and PPR rates indicate better quality of care among SNF providers. Additionally, higher values of the long-stay outpatient ED visits measure represent a worse performance on this measure.

Table 8. LTC MCAS Measures

Measure	Acronym	Data Source	Numerator	Denominator
Skilled Nursing Facility Healthcare-Associated Infections Requiring Hospitalization	LTC HAI	Administrative	Number of stays with an HAI acquired during SNF care and resulting in an acute inpatient hospitalization	SNF stays during the measurement period for Medi-Cal members and those who are dually eligible for Medi-Cal and Medicare
Number of Out-patient ED Visits per 1,000 Long Stay Resident Days	LTC OED	Administrative	Number of visits to an ED occurring while the individual is a long-term nursing home resident	Medi-Cal members and dually-eligible members with a single stay or sequence of stays during which the individual resides in the nursing home for a total of 101 days or more without a gap of 30 contiguous days living in the community or other institution.
Potentially Preventable 30-day Post-Discharge Readmission	LTC PPR	Administrative	SNF admission must have occurred within up to 30 days of discharge from a prior proximal hospital stay (including IPPS, CAH, or a psychiatric hospital). Hospital readmissions include readmissions to a short-stay acute-care hospital, with a diagnosis considered to be unplanned and potentially preventable	Eligible SNF stays at each facility.

## 5.2 METHODS

CCHP calculated individual rates for each SNF, utilizing the MCAS measure specifications developed by the DHCS External Quality Review Organization (EQRO). CCHP contracted with a certified HEDIS vendor to complete the measure calculation and rates were certified by the EQRO auditor in June 2024.

CCHP aggregated MCAS results for each measure and calculated a single rate for each measure as shown in *Table 13*.

## 5.3 RESULTS

In 2023, CCHP had better LTC-HAI and LTC-PPR rates compared to the national average for these measures. CCHP had a worse performance in the LTC-OED measure compared to the

state and national average. Calculated measure rates for individual SNFs can be found in Appendix 10.6.

Table 9. 2023 CCHP MCAS LTC Measures Results

	LTC-HAI	LTC-OED	LTC-PPR
CCHP Rate	5.45%	1.86	.77%
CA	NA	1.38	NA
National Average	6.9%	1.65	10.5%

## 5.4 DISCUSSION

The analysis of Managed Care Accountability Sets (MCAS) measures reveals that CCHP outperforms national averages in both Healthcare-Associated Infections (LTC-HAI) and Potentially Preventable 30-day Post-Discharge Readmissions (LTC-PPR), indicating strong quality of care in these areas. However, CCHP’s performance on the Out-patient ED Visits per 1,000 Long Stay Resident Days (LTC-OED) measure is below both state and national averages, suggesting a need for targeted improvements in reducing unnecessary emergency department visits among long-term care residents.

## 6 WQIP SNF DATA

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### 6.1 BACKGROUND

The Workforce and Quality Incentive Program (WQIP) was developed by DHCS to improve quality of care, advance equity in healthcare outcomes, and invest in workforce at skilled nursing facilities. It provides directed payments to facilities based on their performance on WQIP metrics. An aggregate performance metric is calculated by DHCS and payments amounts are calculated by DHCS for managed care plans to distribute. The WQIP composite metrics is comprised of the following domains and measurement areas:

- Workforce Metrics Domain
  - Acuity-Adjusted Staffing Hour Metrics Measurement Area
  - Staffing Turnover Metric Measurement Area
- Clinical Metrics Domain
  - Minimum Data Set (MDS) Clinical Metrics Measurement Area
  - Claims-Based Clinical Metrics Measurement Area
- Equity Metrics Domain
  - Medi-Cal Disproportionate Share Measurement Area
  - MDS Racial and Ethnic Data Completeness Measurement Area

DHCS utilizes the CMS Care Compare metrics data for the workforce metrics domain and the MDS 3.0 national database to calculate the MDS clinical metric measures. For claims-based clinical metrics, DHCS uses audited claims-based metrics reported by managed care plans as part of the MCAS measures. The Medi-Cal Disproportionate Share metric measures

the proportion of Medi-Cal patients within each facility during the measurement year and compares each facility’s Medi-Cal share to the other facilities within its peer group. It is intended to incentivize SNFs to accept Med-Cal patients and improve access for this population. Similarly, the MDS Racial and Ethnic Data Completeness metric aims to eliminate health disparities by assessing the gap closure between the care and experience of the general population and marginalized populations. This metric represents the completeness of the race and ethnicity fields for each resident.

## 6.2 METHODS

For this analysis, CCHP focused on the Equity Metrics domain given workforce and clinical measures were covered through the CMS Care Compare data review and our reported claim-based metrics as part of MCAS. We looked at the Workforce & Quality Incentive Program Quarterly Performance Reports (WQIP) for PY 1, 2023, focusing on the Medi-Cal Disproportionate Share Unweighted Measurement Area and MDS Racial and Ethnic Data Completeness Measurement Area scores. Facilities with a Medi-Cal disproportionate share metric score below or equal to .2 were identified. We used the DHCS performance target of 90% for the MDS Racial and Ethnic Data Completeness score.

The following tables represent the benchmarks for each metric:

*Table 10. Medi-Cal Disproportionate Share Metric*

Points	Achievement Benchmark
5	90th percentile
4	80th percentile
3	70th percentile
2	60th percentile
1	50th percentile
0	<50th percentile

*Table 11. MDS Racial and Ethnic Data Completeness Metric*

Points	Achievement Benchmark
10	>99%
9	98%
8	97%
7	96%
6	95%
5	94%
4	93%
3	92%
2	91%

Points	Achievement Benchmark
1	90%
0	<90%

## 6.3 RESULTS

In our review of the Medi-Cal Disproportionate Share metric for performance year 1, we found that 58.9% of CCHP SNFs were above the 50<sup>th</sup> percentile. Those that fell below this threshold are listed in Table 12. Our analysis also found that 89.3% of CCHP SNFs were above DHCS performance target of 90% for the MDS Racial and Ethnic Data Completeness score. Those that did not meet this benchmark are listed in Table 13. Points and scores for each SNF are included in the appendix of this report for both measures.

*Table 12. WQIP CCHP SNF Equity Metrics Domain Scores*

Facility	Medi-Cal Disproportionate Share Score	Achievement Benchmark
BAY AREA HEALTHCARE CENTER	0	<50th percentile
CRESTWOOD MANOR- Stockton	0	<50th percentile
CRESTWOOD MANOR- Modesto	0	<50th percentile
CRESTWOOD MANOR - FREMONT	0	<50th percentile
DELTA VIEW POST ACUTE*	0	<50th percentile
GREENRIDGE POST-ACUTE	0	<50th percentile
LA CASA VIA TRANSITIONAL CARE CENTER*	0	<50th percentile
LONE TREE POST ACUTE*	0	<50th percentile
RICHMOND POST ACUTE CARE*	0	<50th percentile
VALE HEALTHCARE CENTER*	0	<50th percentile
WINDSOR HAMPTON CARE CENTER	0	<50th percentile
WINDSOR PARK CARE CENTER OF FREMONT	0	<50th percentile
WINDSOR VALLEJO NURSING & REHABILITATION CENTER	0	<50th percentile

\*High volume facilities

*Table 13. WQIP CCHP SNF Equity Metrics Domain Scores*

Facility	Racial and Ethnic Data Completeness Score	Achievement Benchmark
ALAMEDA HEALTHCARE & WELLNESS CENTER	0	< 90.00%
KYAKAMEENA CARE CENTER	0	< 90.00%
OAKLAND HEALTHCARE & WELLNESS CENTER	0	< 90.00%
PRINCETON MANOR HEALTHCARE CENTER, LLC	0	< 90.00%

Facility	Racial and Ethnic Data Completeness Score	Achievement Benchmark
THE REHABILITATION CENTER OF OAKLAND	0	< 90.00%
WINDSOR POST-ACUTE CARE CENTER OF HAYWARD	0	< 90.00%

\*High volume facilities

## 6.4 DISCUSSION

The analysis of the Workforce and Quality Incentive Program (WQIP) metrics highlights significant variability in performance across CCHP SNFs. While the majority of facilities excel in meeting the Medi-Cal Disproportionate Share metric, indicating a strong commitment to serving Medi-Cal patients, there are several facilities falling below the 50th percentile benchmark. Of these, five are high-volume facilities. The MDS Racial and Ethnic Data Completeness scores are notably high, with most facilities exceeding the 90% target, reflecting strong efforts to improve data accuracy and address health disparities. There were no high-volume facilities that fell below the benchmark in this area.

## 7 POTENTIAL QUALITY ISSUES/MEDICAL RECORD REVIEWS

### 7.1 BACKGROUND

A Potential Quality Issue (PQI) refers to a suspected deviation from the expected performance of a provider or system performance, clinical care or outcome of care that requires further investigation to determine if an actual quality of care concern exists. A Quality Issue (QI) is defined as a confirmed deviation and determined through the PQI process as being inconsistent with recognized standards of care. PQIs are identified through various methods including but not limited to, complaints, grievances, appeals, claims and encounter data and retrospective utilization review. Quality departments are required to review and evaluate potential quality issues and to direct the appropriate actions for improvement based on outcome, risk, frequency, and severity. CCHP nurses investigate all suspected cases and present their findings to the PQI Committee, a peer review committee of physicians. The committee then categorizes the cases based on severity, with Level 0 indicating no quality issue and Level 3 representing a significant quality issue. Cases categorized as Level 2 or Level 3 are addressed through a corrective action plan.

### 7.2 METHODS

CCHP reviewed a CRM PQI report with PQI details for CCHP facilities between 1/1/2023 and 12/31/2023. We first identified the total number of PQIs for SNFs and then determined whether it was defined as a quality issue. Finally, we reviewed the PQI level to

assess the severity of the incident. All quality issues were confirmed to be resolved. Table 14 defines the severity rating scale.

*Table 14. PQI Severity Rating Scale*

<b>PQI Level</b>	<b>Description</b>
Level 0	<b>No confirmed quality issue</b>
Level 1	<b>Confirmed minor quality issue</b>
Level 2	<b>Confirmed moderate quality issue</b>
Level 3	<b>Confirmed severe quality issue</b>

### **7.3 RESULTS**

CCHP identified 32 PQIs in the reported measurement period, with 17 being confirmed quality issues. The main source of identification for the PQIs was utilization review. Twenty-six were identified through this method, four were through complains, grievances, and appeals, and two QIs had a source of “other.” Table 15 details the severity level of the PQIs.

*Table 15. 2023 PQI Results*

<b>PQI Level</b>	<b>Number of CCHP SNFs</b>
Level 0	<b>15</b>
Level 1	<b>9</b>
Level 2	<b>4</b>
Level 3	<b>4</b>

Of those with confirmed quality issues, 15 were Quality of Care issues and 2 Provider Service/Treatment issues. Among the confirmed quality issues, a significant number involved falls. These cases are protected under California Evidence Code 1157, and so no further details can be shared.

### **7.4 DISCUSSION**

The findings demonstrate that Utilization Review is effectively identifying potential quality issues, as evidenced by the high number of PQIs flagged through this method. The majority of confirmed quality issues were related to quality of care, with falls being a significant concern. Despite some cases reaching higher severity levels, most issues were classified as Level 0 or Level 1, indicating that while utilization review is identifying possible issues, they are predominantly minor or moderate in severity.

## 8 QAPI PROGRAM DESCRIPTIONS

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### 8.1 BACKGROUND

CMS requires nursing homes to have a Quality Assurance and Performance Improvement (QAPI) program as part of a broader set of regulations aimed to improve the quality of care in these facilities. The QAPI program must include the following components:

- **Design and Scope:** The QAPI must be comprehensive should cover all systems of care and management practices including clinical care, quality of life, and patient choice.
- **Governance and leadership:** The program should consist of a governing body that oversees QAPI efforts and assures resources exist to carry out performance improvement plans.
- **Feedback, Data Systems and Monitoring:** The program has systems in place to collect and monitor data from various sources and is actively seeking feedback from staff, residents, families and other stakeholders as needed.
- **Performance Improvement Projects (PIPs):** The facility addresses specific needs and areas of improvement through PIPs.
- **Systematic Analysis and Systemic Action:** The facility uses a systematic approach to understand the root cause of a identified problems and carries out comprehensive systemic actions to develop continuous improvement.

### 8.2 METHODS

CCHP requested QAPI program descriptions from our contracted SNFs as part of our quality review process. We reviewed each SNF's QAPI using the general framework provided by CMS as a guide to ensure all five key elements of effective quality management were included.

### 8.3 RESULTS

CCHP received 14 QAPI program descriptions which account for a total of 19 facilities. There was some variation in the format used by each facility; however, all covered the five key elements on the CMS guide. Although the total number of QAPI programs received represent 34.5% of the total facilities, 68% of QAPI programs represent high volume SNFs (i.e. those SNF with 20 or members placed during the measurement year).

### 8.4 DISCUSSION

The review of QAPI programs showed that 68% of the high-volume facilities, where most members are placed, submitted QAPI plans that adhered to CMS's five key elements. Focusing on these facilities allows us to prioritize our efforts where they can have the most

significant impact on care quality. As this is our first year conducting this analysis, there is an opportunity to enhance participation from all facilities to ensure comprehensive quality management practices across the board.

## 9 CONCLUSION

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Our comprehensive QAPI program for LTC services provides an overview of the various data sources we used to analyze the quality of care provided by CCHP SNFs. It also includes our analysis of critical areas related to SNF quality of care such as healthcare staffing, health inspections and CMS identified quality measures. This analysis allowed us to identify potential areas of improvement and represents our commitment to ensure that members receiving care in SNF LTC receive high-quality services and improved health outcomes.

### 9.1 AREAS OF OPPORTUNITY

The report presents strengths and areas for improvement within the SNFs that serve CCHP members. The data shows CCHP has a strong in-network placements, ensuring continuity of care, improved health outcomes, and closer alignment with quality oversight activities. However, the evaluation also revealed a subset of facilities deviate from state and national averages in survey deficiencies, complaints, and CMS Care Compare ratings.

We identified high-volume facilities that had a poor performance across multiple areas. Vale Healthcare Center, Orinda Care Center, Delta View, Diamond Ridge HealthCare Center, Willow Pass Healthcare Center, and La Casa via Transitional Care Center had poor performance in two or more areas. Further analysis of these facilities is important to identify the root causes of deficiencies and to implement targeted interventions.

Based on our analysis of the quality of care in CCHP SNFs, we have identified areas of opportunity to ensure we are providing targeted high-quality care. Our review of the CMS Care Compare data indicates that three of our high volume SNFs had an overall star rating of 2, and one of these facilities had been cited for abuse. Improving the health inspection rating for these facilities should be prioritized. Additionally, further understand and education to SNF providers on the usage of anti-psychotic medications may be an area of opportunity. Our review of the WQIP equity metrics domain showed there were several facilities with a score below the 50<sup>th</sup> percentile, with five representing high-volume facilities. Ensuring these facilities increase their rate for this measure is critical to ensuring access to care for our members. Finally, improving our performance in the LTC-OED MCAS measure by targeting high volume SNFs with a poor rate, is critical in reducing unnecessary emergency department visits among long-term care residents. By addressing these areas of opportunity, performing targeted interventions, and continuing to monitor and review the quality of care in CCHP SNFs, we will work towards our mission of delivering high-quality, patient-centered care.

## 10 APPENDICES

### 10.1 2023 SNF PLACEMENT – IN NETWORK

<b>In-Network SNF</b>	<b>In-Network SNF Location/Address</b>	<b># of total members placed</b>
<b>TRANQUILITY INC</b>	1050 SAN MIGUEL RD, CONCORD, CA 94518	222
<b>CONTRA LOMA HEALTHCARE LLC</b>	4001 LONE TREE WAY, ANTIOCH, CA 94509	142
<b>WINDSOR MANOR REHAB CTR</b>	3806 CLAYTON RD, CONCORD, CA 94521	140
<b>J3TFZ INC</b>	130 TAMPICO WAY, WALNUT CREEK, CA 94598	130
<b>ANTIOCH DUNES HEALTHCARE LLC</b>	1210 A STREET, ANTIOCH, CA 94509	120
<b>VALE OPERATING COMPANY LP</b>	13484 SAN PABLO AVENUE, SAN PABLO, CA 94806	112
<b>DIAMOND RIDGE POST ACUTE LLC</b>	2351 LOVERIDGE ROAD, PITTSBURG, CA 94565	102
<b>GHC OF CONTRA COSTA LLC</b>	1800 ADOBE STREET, CONCORD, CA 94520	91
<b>LEGACY POST ACUTE CARE</b>	1790 MUIR RD, MARTINEZ, CA 94553	82
<b>GHC OF WALNUT CREEK LLC</b>	1224 ROSSMOOR PARKWAY, WALNUT CREEK, CA 94595	62
<b>WILLOWPASS HEALTH CARE CTR</b>	3318 WILLOW PASS RD, CONCORD, CA 94519	54
<b>AWCY LLC</b>	1449 YGNACIO VALLEY RD, WALNUT CREEK, CA 94598	53
<b>SAN PABLO HEALTHCARE &amp; WELLNES CENTER</b>	13328 SAN PABLO AVE, SAN PABLO, CA 94806	52
<b>CREEKSIDE HEALTHCARE CTR</b>	1900 CHURCH LANE, SAN PABLO, CA 94806	48
<b>POSITIVE &amp; VIGILANT HEALTHCARE</b>	331 ILENE ST, MARTINEZ, CA 94553	47
<b>SHIELDS NURSING CENTER</b>	606 ALFRED NOBEL DR, HERCULES, CA 94547	47
<b>PLEASANT HILL POST ACUTE</b>	1625 OAK PARK BLVD, PLEASANT HILL, CA 94523	46
<b>MCHS WALNUT CREEK SNF</b>	DEPT L 2653, COLUMBUS, OH 43260	45
<b>RICHMOND POST ACUTE CARE</b>	955 23RD ST, RICHMOND, CA 94804	39
<b>MORAGA POST ACUTE</b>	348 RHEEM BL, MORAGA, CA 94556	36
<b>MANORCARE HEALTH SERVICES</b>	DEPT L 2653, COLUMBUS, OH 43260	34
<b>WINDSOR ROSEWOOD CARE CENTER</b>	1911 OAK PARK BLVD, PLEASANT HILL, CA 94523	30
<b>STONEBROOK CONVALESCENT CENTER INC</b>	4367 CONCORD BLVD, CONCORD, CA 94521	28
<b>ORINDA CARE CENTER LLC</b>	11 ALTARINDA ROAD, ORINDA, CA 94563	26

<b>In-Network SNF</b>	<b>In-Network SNF Location/Address</b>	<b># of total members placed</b>
<b>PITTSBURG SKILLED NURSING GROUP INC</b>	535 SCHOOL STREET, PITTSBURG, CA 94565	21
<b>ARPD LLC</b>	28202 CABOT ROAD SUITE 412, LAGUNA NIGUEL, CA 92677	19
<b>THE REUTLINGER COMMUNITY</b>	4000 CAMINO TASSAJARA, DANVILLE, CA 94506	18
<b>ALAMEDA HEALTHCARE &amp; WELLNESS CENTER LLC</b>	430 WILLOW STREET, ALAMEDA, CA 94501	16
<b>ELMWOOD NURSING &amp; REHAB CENTER</b>	2829 SHATTUCK AVE, BERKELEY, CA 94705	16
<b>KYAKAMEENA CARE CENTER</b>	2131 CARLETON ST, BERKELEY, CA 94704	15
<b>WINDSOR CONVALESCENT &amp; REHAB</b>	2400 PARKSIDE DR, FREMONT, CA 94536	13
<b>DANVILLE LONG TERM CARE INC</b>	336 DIABLO RD, DANVILLE, CA 94526	12
<b>THE REHABILITATION CENTER</b>	210 4TH STREET WAY, OAKLAND, CA 94611	12
<b>OAKLAND HEALTHCARE &amp; WELLNESS CENTER LLC</b>	3030 WEBSTER ST, OAKLAND, CA 94609	9
<b>WINDSOR OAKRIDGE HEALTHCARE</b>	2919 FRUITVALE AVE, OAKLAND, CA 94602	5
<b>LAKE MERRITT HEALTHCARE CENTER LLC</b>	309 MACARTHUR BLVD, OAKLAND, CA 94610	3
<b>BERKELEY PINES SKILLED NURSING GROUP INC</b>	2223 ASHBY AVE, BERKELEY, CA 94705	2
<b>COMPREHENSIVE CARE OF OAKLAND LP</b>	1833 10TH AVE, OAKLAND, CA 94606	2
<b>PRINCETON MANOR HEALTHCARE CENTER</b>	2124 57TH AVENUE, OAKLAND, CA 94621	2
<b>WINDSOR ELMHAVEN CARE CENTER</b>	9200 WEST SUNSET BLVD, WEST HOLLYWOOD, CA 90069	2
<b>WINDSOR VALLEJO CARE CTR</b>	2200 TOULUMNE STREET, VALLEJO, CA 94589	2
<b>BELLAKEN HEALTH GROUP INC</b>	2780 26TH AVENUE, OAKLAND, CA 94601	1
<b>CRESTWOOD BEHAVIORAL</b>	PO BOX 7095, STOCKTON, CA 95267	1
<b>EXCELL POST ACUTE LLC</b>	3025 HIGH ST, OAKLAND, CA 94619	1
<b>HAYWARD HEALTHCARE AND WELLNESS CENTER LLC</b>	1805 WEST STREET, HAYWARD, CA 94545	1
<b>HELIOS HEALTHCARE LLC</b>	PO BOX 7095, STOCKTON, CA 95267	1
<b>REDWOOD HEALTHCARE CENTER</b>	3145 HIGH STREET, OAKLAND, CA 94619	1
<b>WINDSOR HAMPTON CARE CENTER</b>	442 EAST HAMPTON STREET, STOCKTON, CA 95204	1
<b>WINDSOR HAYWARD ESTATES</b>	25919 GADING ROAD, HAYWARD, CA 94544	1

## 10.2 2023 SNF PLACEMENT – OUT-OF-NETWORK

<b>Out-of-Network SNF</b>	<b># of total members placed</b>
<b>GREY PINE HOLDINGS LLC*</b>	22
<b>PACIFIC CARE SALLIDA</b>	13
<b>SAN MATEO MEDICAL CENTER</b>	7
<b>DRIFTWOOD HEALTHCARE</b>	5
<b>PACIFIC CARE II INC</b>	5
<b>ALAMEDA HEALTH SYSTEM</b>	4
<b>GHC OF PLEASANTON LLC</b>	4
<b>PROVIDENCE MCCLURE POST ACUTE LLC</b>	4
<b>THE VINEYARDS HEALTH CARE CENTER</b>	4
<b>ALL SAINTSIDENCE OPCO LLC</b>	3
<b>BAY VIEW REHAB HOSPITAL</b>	3
<b>CAREFRONT RESIDENTAL LIVI</b>	3
<b>COVENANT CARE CALIFORNIA LLC</b>	3
<b>EVERGREEN AT SPRINGS ROAD LLC</b>	3
<b>INTEGRITY CARE GROUP LLC</b>	3
<b>MERCY RETIREMENT &amp; CARE CENTER</b>	3
<b>OAKLANDIDENCE OPCO LLC</b>	3
<b>VALLEY POINTEIDENCE OPCO LLC</b>	3
<b>WEST SACRAMENTO NURSING AND REHABILITATION CENTER</b>	3
<b>WINDSOR CONVALESCENT AND REHABILITATION OF SALINAS LLC</b>	3
<b>14766 WASHINGTON AVENUE OPERATIONS LLC</b>	2
<b>ALL SAINTS MAUBERT</b>	2
<b>BILBERRY HOLDINGS LLC</b>	2
<b>CHILDRENS RECOVERY CENTER 2 LLC</b>	2
<b>FRUITVALE OPERATING COMPANY</b>	2
<b>G&amp;R ALAMEDA HEALTHCARE SERVICES LLC</b>	2
<b>NOVATO HEALTHCARE CENTER</b>	2
<b>PARKVIEW HEALTHCARE CTR</b>	2

<b>Out-of-Network SNF</b>	<b># of total members placed</b>
<b>SAINT MARIAM CONGREGATE</b>	2
<b>WELLBEING CARE MANAGEMENT INC</b>	2
<b>AG ARCADIA LLC</b>	1
<b>ALEXANDER Y CHAN MD INC</b>	1
<b>AOTN LLC</b>	1
<b>ATMC LLC</b>	1
<b>AVALON CARE CENTER</b>	1
<b>AVALON CARE CENTER SONORA</b>	1
<b>AVENIDA LIVING HOME INC</b>	1
<b>BLYTHE POST ACUTE LLC</b>	1
<b>BROADWAY MANOR CARE CENTER</b>	1
<b>CATHEDRAL PIONEER CHURCH HOMES NO. 2</b>	1
<b>CIRBY HOLDINGS LLC</b>	1
<b>COLONIAL CARE CENTER INC</b>	1
<b>CULVER WEST HEALTH CENTER LLC</b>	1
<b>CUPERTINO HEALTHCARE AND WELL</b>	1
<b>ESKATON PROPERTIES INC</b>	1
<b>FLETCHER COVE HOLDINGS LLC</b>	1
<b>FOUNTAIN VIEW SUBACUTE</b>	1
<b>FRESNO SKILLED NURSING &amp; WELLNESS</b>	1
<b>FULTON GARDENS POST ACUTE LLC</b>	1
<b>GHC OF DALY CITY 239 LLC</b>	1
<b>GHC OF SAN FRAN 180 LLC</b>	1
<b>GHC OF SUNNYVALE LLC</b>	1
<b>GLENDALE HOUSE CLHS INC</b>	1
<b>GOLDEN PAVILION OPERATIONS LLC</b>	1
<b>HAYWARD HEALTHCARE CENTER LLC</b>	1
<b>HB HEALTHCARE ASSOCIATE LLC</b>	1
<b>HEBREW HOME FOR AGED</b>	1
<b>HUMANGOOD NORCAL</b>	1
<b>LINCOLN GLEN SKILLED NURSING</b>	1
<b>LOS ANGELES CARE CENTER INC</b>	1
<b>MEK ARDEN LLC</b>	1

<b>Out-of-Network SNF</b>	<b># of total members placed</b>
<b>MERCED SNF OPERATIONS LLC</b>	1
<b>MID-WILSHIRE HEALTH CARE CENTER</b>	1
<b>NEWPORT LLC</b>	1
<b>OAKRHEEM INC</b>	1
<b>OCONNOR WOODS HOUSING CORPORATION</b>	1
<b>OLEANDER HOLDINGS LLC</b>	1
<b>OUR FAMILIES FOR SENIORS INC</b>	1
<b>RAY PROPERTIES KIT CARSON INC</b>	1
<b>REVIVE RENO LLC</b>	1
<b>RIVER BEND HOLDINGS LLC</b>	1
<b>ROYAL CONGREGATE LIVING LLC</b>	1
<b>SAN FRANCISCOIDENCE OPCO LLC</b>	1
<b>SAN RAFAEL HEALTHCARE &amp; WELLNESS CENTRE LP</b>	1
<b>SAN RAMON REGIONAL MEDICAL CENTER LLC</b>	1
<b>SOLNUS THREE LLC</b>	1
<b>SONOMAIDENCE OPCO LLC</b>	1
<b>ST VINCENT HEALTHCARE LLC</b>	1
<b>STOCKTON NURSING AND REHAB CENTER LLC</b>	1
<b>THE HERMAN SANITARIUM</b>	1
<b>TLC OF THE BAY AREA</b>	1
<b>UNITED HEALTH SYSTEMS</b>	1
<b>WHITE FIR HOLDINGS LLC</b>	1

## 10.3 CDPH SURVEYS BY FACILITY, 2023

Facility	State Average	Survey Deficiencies	Level 1	Level 2	Level 3	Level 4	State Average	Complaints/Incidents	Substantiated Complaints/Incidents with deficiency
Alameda Healthcare and Wellness Center	19	7	0	7	0	0	60	10	6
Bay Area Healthcare Center	16	15	0	15	0	0	38	0	0
Bayberry Skilled Nursing & Healthcare Center*	16	4	0	4	0	0	38	2	0
Diamond Ridge Healthcare*	19	7		6	0	1	60	63	13
Greenridge Post Acute	16	1	0	1	0	0	38	7	0
Legacy Post Acute Care*	16	0	0	0	0	0	38	19	0
North Park Post Acute	16	32	0	32	0	0	38	10	2
Lake Merritt Healthcare Center	14	31	1	30	0	0	16	36	0
Stonebrook Healthcare Center*	19	16	1	15	0	0	60	11	9
Delta View Post Acute*	16	1	0	1	0	0	38	52	2
La Casa via Transitional Care Center*	16	20	3	17	0	0	38	4	2
Bellaken Skilled Nursing Center	16	15	0	15	0	0	38	0	0
Berkeley Pines Skilled Nursing Center	14	4	0	4	0	0	16	0	0
Lone Tree Post Acute*	16	11	0	10	0	1	38	24	1
Creekside Healthcare Center*	16	1	0	1	0	0	38	15	1
Danville Post-Acute Rehab	14	0	0	0	0	0	16	9	0
Excell Health Care Center	16	12	0	12	0	0	38	20	0
Hayward Healthcare & Wellness Center	16	22	0	22	0	0	38	25	0
Idylwood Care Center	19	8	0	8	0	0	60	31	2
Tampico Terrace Care Center*	19	12	0	12	0	0	60	32	10
Moraga Post Acute*	14	10	1	9	0	0	16	9	0
Marina Garden Nursing Center	14	11	1	10	0	0	16	0	0

Facility	State Average	Survey Deficiencies	Level 1	Level 2	Level 3	Level 4	State Average	Complaints/Incidents	Substantiated Complaints/Incidents with deficiency
Oakland Healthcare & Wellness Center	16	11	0	11	0	0	38	52	0
Orinda Care Center*	14	16	0	16	0	0	16	34	0
Pittsburg Skilled Nursing Center*	14	3	0	3	0	0	16	5	0
Pleasant Hill Post Acute*	14	0	0	0	0	0	16	12	0
Princeton Manor Healthcare Center	16	5	0	5	0	0	38	46	1
Redwood Healthcare Center	14	2	0	2	0	0	16	23	
Richmond Post Acute*	14	9	1	8	0	0	16	5	0
San Pablo Healthcare & Wellness Center*	19	4	0	4	0	0	60	24	1
Kyakameena Care Center	16	14	0	13	1	0	38	30	6
Elmwood Care Center	16	5	0	5	0	0	38	39	0
The Rehabilitation Center of Oakland	16	11	0	11	0	0	38	59	1
The Reutlinger Community	16	1	0	1	0	0	38	28	0
Vale Healthcare Center*	19	7	0	7	0	0	60	91	3
Willow Pass Health Care Center	16	9	0	9	0	0	38	28	1
Windsor Post-Acute Care Center of Hayward	16	0	0	0	0	0	38	23	1
Windsor Rosewood Care Center*	19	12	1	11	0	0	60	59	1
Windsor Vallejo Nursing and Rehabilitation Center	19	19	0	16	3	0	60	120	30
Windsor Elmhaven Care Center	19	52	0	52	0	0	60	81	14
Windsor Country Drive Care Center	19	22	0	22	0	0	60	21	1
Windsor Hampton Care Center	19	37	0	37	0	0	60	54	6
Crestwood Manor Modesto	19	3	0	3	0	0	60	31	1
Crestwood Fremont	19	10	0	9	1	0	60	8	0
Crestwood Stockton	19	16	0	16	0	0	60	18	0
Crestwood Treatment Center	16	10	0	10	0	0	38	4	0

Facility	State Average	Survey Deficiencies	Level 1	Level 2	Level 3	Level 4	State Average	Complaints/Incidents	Substantiated Complaints/Incidents with deficiency
Crestwood Wellness and Recovery Center	16	1	0	1	0	0	38	20	1
ManorCare Health Services (Tice Valley Post Acute)*	19	4	0	4	0	0	60	25	3
ProMedica Skilled Nursing Rehabilitation (Rossmoor)	19	6	0	6	0	0	60	35	1
Shields Nursing Center*	14	21	0	21	0	0	16	0	0
Shields Richmond Nursing Center	16	29	0	29	0	0	38	14	2
San Miguel Villa (Concord Post Acute)*	19	22	0	22	0	0	60	69	4
Windsor Manor Rehabilitation Center of Concord (Diablo Valley Post Acute)*	19	26	0	26	0	0	60	25	0
Windsor Park Care Center of Fremont (Mission Valley Post Acute)	16	0	0	0	0	0	38	19	0
Windsor Gardens Care Center of Hayward ( Hayward Gardens Post Acute)	16	20	0	20	0	0	38	13	2
Windsor Healthcare Center of Oakland (Brookdale Healthcare & Wellness Centre, LP)	16	37					38	58	4
Alhambra Healthcare and Wellness Center (Martinez Healthcare Center)*	16	27	2	25	0	0	38	7	4

## 10.4 CMS CARE COMPARE BY FACILITY, 2023

### 10.4.1 CMS Care Center Ratings

Facility	Overall Rating	Health Inspections Rating	Staffing Rating	Quality Measures Rating
Alameda Healthcare and Wellness Center	3	3	3	4
Alhambra Healthcare and Wellness Center (Martinez Healthcare Center)*	2	2	3	3
Bay Area Healthcare Center	5	5	3	5
Bayberry Skilled Nursing & Healthcare Center*	5	5	3	5
Bellaken Skilled Nursing Center	4	4	2	4
Berkeley Pines Skilled Nursing Center	2	3	1	4
Creekside Healthcare Center*	5	3	5	5
Crestwood Fremont	5	4	5	4
Crestwood Manor Modesto	4	4	4	3
Crestwood Stockton	5	4	5	5
Crestwood Treatment Center	5	5	5	5
Crestwood Wellness and Recovery Center	5	5	2	5
Danville Post-Acute Rehab	5	5	4	4
Delta View Post Acute*	4	4	2	3
Diamond Ridge Healthcare*	2	1	4	5
Elmwood Care Center	4	4	3	4
Excell Health Care Center	5	5	4	5
Greenridge Post Acute	5	5	4	3
Hayward Healthcare & Wellness Center	3	3	4	4
Idylwood Care Center	5	4	5	3
Kyakameena Care Center	3	3	3	3

Facility	Overall Rating	Health Inspections Rating	Staffing Rating	Quality Measures Rating
La Casa via Transitional Care Center*	5	4	3	5
Lake Merritt Healthcare Center	5	4	4	5
Legacy Post Acute Care*	5	5	3	5
Lone Tree Post Acute*	4	3	2	5
ManorCare Health Services (Tice Valley Post Acute)*	3	3	3	4
Marina Garden Nursing Center	5	5	2	4
Moraga Post Acute*	5	4	3	5
North Park Post Acute	3	3	4	4
Oakland Healthcare & Wellness Center	5	4	2	5
Orinda Care Center*	5	5	4	3
Pittsburg Skilled Nursing Center*	4	4	3	4
Pleasant Hill Post Acute*	5	5	3	5
Princeton Manor Healthcare Center	1	2	1	4
ProMedica Skilled Nursing Rehabilitation (Rossmoor)	5	4	4	5
Redwood Healthcare Center	5	4	4	5
Richmond Post Acute*	5	4	5	5
San Miguel Villa (Concord Post Acute)*	4	3	3	5
San Pablo Healthcare & Wellness Center*	4	4	4	3
Shields Nursing Center*	5	4	5	5
Shields Richmond Nursing Center	3	2	3	5
Stonebrook Healthcare Center*	5	4	4	5
Tampico Terrace Care Center*	3	3	4	3
The Rehabilitation Center of Oakland	2	2	2	3

Facility	Overall Rating	Health Inspections Rating	Staffing Rating	Quality Measures Rating
The Reutlinger Community	5	5	3	5
Vale Healthcare Center*	3	2	4	5
Willow Pass Health Care Center	2	2	4	4
Windsor Country Drive Care Center	4	3	3	5
Windsor Elmhaven Care Center	1	1	3	3
Windsor Gardens Care Center of Hayward	3	2	2	5
Windsor Hampton Care Center	3	2	3	5
Windsor Healthcare Center of Oakland (Brookdale Healthcare & Wellness Centre, LP)	4	4	3	4
Windsor Manor Rehabilitation Center of Concord (Diablo Valley Post Acute)*	5	4	4	5
Windsor Park Care Center of Fremont (Mission Valley Post Acute)	3	3	3	4
Windsor Post-Acute Care Center of Hayward	4	4	3	3
Windsor Rosewood Care Center*	4	4	3	4
Windsor Vallejo Nursing and Rehabilitation Center	2	1	3	5

#### 10.4.2 CMS Care Center Quality Measure Descriptions

Measure Title	Measure Description
Percent of Short-Stay Patients Re-Hospitalized	Percentage of short-stay residents who were re-hospitalized after a nursing home admission
Percent of Short-Stay Patients Outpatient ED	Percentage of short-stay residents who have had an outpatient emergency department (ED)

Measure Title	Measure Description
Percent of Short-Stay Patients First Antipsychotic Meds	Percentage of short-stay residents who got antipsychotic medication for the first time
Percent of SNF Residents with New/Worsened Pressure Injuries	Percentage of Skilled Nursing Facility (SNF) residents with pressure ulcers/pressure injuries that are new or worsened
Rate of Successful Return to Home/Community from a SNF	Rate of successful return to home and community from a SNF
No. of Hospitalizations per 1,000 Long-Stay Resident Days	Number of hospitalizations per 1,000 long-stay resident days
No. of Outpatient ED visits per 1,000 long-stay resident days	Number of outpatient emergency department (ED) visits per 1,000 long-stay resident days
Percent of Long-Stay Residents on Antipsychotic Meds	Percentage of long-stay residents who got an antipsychotic medication
Percent of Long-Stay Residents With One or More Falls With Major Injury	Percentage of long-stay residents experiencing one or more falls with major injury
Percent of Long-Stay Residents with a UTI	Percentage of long-stay residents with a urinary tract infection
Percent of Long-Stay Residents Who Have/Had a Catheter Inserted and Left in Their Bladder	Percentage of long-stay residents who have or had a catheter inserted and left in their bladder

### 10.4.3 CMS Care Center Quality Measure Figures: Short-Stay

Facility	Percent of Short-Stay Patients Re-Hospitalized	Percent of Short-Stay Patients Outpatient ED	Percent of Short-Stay Patients First Antipsychotic Meds	Percent of SNF Residents with New/Worsened Pressure Injuries	Rate of Successful Return to Home/Community from a SNF
Alameda Healthcare and Wellness Center	23.3	10.5	0.6	1.6	45.2
Bay Area Healthcare Center			0		
Bayberry Skilled Nursing & Healthcare Center*	12.8	18.3	1.4	0.7	62.5
Diamond Ridge Healthcare*	20.7	10.8	3.2	0.5	61.9

Facility	Percent of Short-Stay Patients Re-Hospitalized	Percent of Short-Stay Patients Outpatient ED	Percent of Short-Stay Patients First Antipsychotic Meds	Percent of SNF Residents with New/Worsened Pressure Injuries	Rate of Successful Return to Home/Community from a SNF
Greenridge Post Acute	30.8	24.5	0.2	2.4	65.8
Legacy Post Acute Care*	16.5	10.2	1.1	0	69.4
North Park Post Acute	29.3	16.6	0.9	0.9	65.5
Lake Merritt Healthcare Center	8.4	4.5	2.5	2.8	39.4
Stonebrook Healthcare Center*	19.9	3.2	0	0	57.3
Delta View Post Acute*	23.2	14.5	1.2	2	53.7
La Casa via Transitional Care Center*	15.7	11.5	1.5	0.9	55.5
Bellaken Skilled Nursing Center	21.4	18.4	0	0	48.7
Berkeley Pines Skilled Nursing Center				0	
Lone Tree Post Acute*	20.2	16.6	1	0	58.9
Creekside Healthcare Center*	18.2	11.6	0	3.1	59.1
Danville Post-Acute Rehab	21.5	7.7	0.5	0	58.3
Excell Health Care Center	23.9	15.9	0	0.4	47.4
Hayward Healthcare & Wellness Center	15.4	17.6	0	1.9	42.3
Idylwood Care Center					
Tampico Terrace Care Center*	30.2	17.1	1.2	2.2	57.2
Moraga Post Acute*	24.3	13.1	0.5	0.5	58.9
Marina Garden Nursing Center			0	0	46.5
Oakland Healthcare & Wellness Center	17.1	12.1	0	0.5	56.8
Orinda Care Center*	30.4	9.4	2.8	0	44.5
Pittsburg Skilled Nursing Center*			0	2.6	
Pleasant Hill Post Acute*	12.7	7.7	1.6	1	59.3
Princeton Manor Healthcare Center	24.9	24.5	1.7	1.7	37.1
Redwood Healthcare Center	17.6	9.5	0	0	39.6
Richmond Post Acute*	22.8	14.5	0.4	0	60.6
San Pablo Healthcare & Wellness Center*			1.1	6.3	41
Kyakameena Care Center	30	3.9	2.8	2.3	26.5
Elmwood Care Center	22.9	14.7	0.2	1.1	53.6
The Rehabilitation Center of Oakland	22.8	18.8	4.1	1.1	58.2
The Reutlinger Community	30.8	16.4	1.3	0.6	56.7
Vale Healthcare Center*	26.7	14	0	0	48.3

Facility	Percent of Short-Stay Patients Re-Hospitalized	Percent of Short-Stay Patients Outpatient ED	Percent of Short-Stay Patients First Antipsychotic Meds	Percent of SNF Residents with New/Worsened Pressure Injuries	Rate of Successful Return to Home/Community from a SNF
Willow Pass Health Care Center			0.8	13	50.8
Windsor Post-Acute Care Center of Hayward	24.3	13.5	0	0	45
Windsor Rosewood Care Center*			3.4	3.2	38.6
Windsor Vallejo Nursing and Rehabilitation Center	22.7	20.4	0.3	0	49.7
Windsor Elmhaven Care Center	19.6	12	3.7	2.5	29.1
Windsor Country Drive Care Center	27.3	5.6	0.8	0.6	57
Windsor Hampton Care Center	20.9	19.3	1.1	0.5	55.8
Crestwood Manor Modesto					
Crestwood Fremont					
Crestwood Stockton					
Crestwood Treatment Center					
Crestwood Wellness and Recovery Center					
ManorCare Health Services (Tice Valley Post Acute)*	24.9	15.1	1	1.7	55.6
ProMedica Skilled Nursing Rehabilitation (Rossmoor)	18.1	12.3	0.4	3.8	57.2
Shields Nursing Center*	25.9	10.3	0	1.4	47.1
Shields Richmond Nursing Center	16	30.1	1.3	4	59.2
San Miguel Villa (Concord Post Acute)*	18	18.7	1.4	1.3	51.1
Windsor Manor Rehabilitation Center of Concord (Diablo Valley Post Acute)*	16.6	11.5	1.2	1	45.7
Windsor Park Care Center of Fremont (Mission Valley Post Acute)	28.3	5.4	0	1.4	56.2
Windsor Gardens Care Center of Hayward	21	19.4	1.6	0.8	57.5
Windsor Healthcare Center of Oakland (Brookdale Healthcare & Wellness Centre, LP)	25.5	4.6	0.6	2.2	44.3
Alhambra Healthcare and Wellness Center (Martinez Healthcare Center)*	27.6	8	0	2.4	45.8

#### 10.4.4 CMS Care Center Quality Measure Figures: Long-Stay

Facility	No. of Hospitalizations per 1,000 Long-Stay Resident Days	No. of Outpatient ED visits per 1,000 long-stay resident days	Percent of Long-Stay Residents on Antipsychotic Meds	Percent of Long-Stay Residents With One or More Falls With Major Injury	Percent of Long-Stay Residents with a UTI	Percent of Long-Stay Residents Who Have/Had a Catheter Inserted and Left in Their Bladder
Alameda Healthcare and Wellness Center	1.8	1.4	12.1	1.7	0	0
Bay Area Healthcare Center			1.1	0	0.5	0.9
Bayberry Skilled Nursing & Healthcare Center*	2.9	2.3	8.3	2.8	0.5	0.5
Diamond Ridge Healthcare*	1.6	1.1	11.5	0.6	0	0
Greenridge Post Acute			6.6	6.4	1.4	2.5
Legacy Post Acute Care*	0.7	1.1	4.2	0.9	0	0
North Park Post Acute	2.24	2.05	5.9	3.1	0.4	0.2
Lake Merritt Healthcare Center	1.55	1.8	9.6	2.8	0	0.6
Stonebrook Healthcare Center*			13.2	7.5	0	0
Delta View Post Acute*	1.4	1.3	11.4	2.1	0.5	0.7
La Casa via Transitional Care Center*	2.10	0.7	6.2	0	1.5	0.4
Bellaken Skilled Nursing Center	2.1	1.6	4.1	0.4	1.4	0.3
Berkeley Pines Skilled Nursing Center	2.6	0.7	5.5	0.8	0	5.8
Lone Tree Post Acute*	1.2	1	7	0	0	1.8
Creekside Healthcare Center*	1.2	0.8	13.7	1.9	0.4	0.8
Danville Post-Acute Rehab	4.3	1.9	4.8	0	0	1.3
Excell Health Care Center	1.25	0.72	0.8	3.4	0	0
Hayward Healthcare & Wellness Center	2.09	1.96	3.5	3.3	0.7	0
Idylwood Care Center	2.21	1.93	20	1.1	0.7	0.3
Tampico Terrace Care Center*	2.52	2.12	9.8	0.8	2.5	0.4
Moraga Post Acute*			5.1	1.1	0	0
Marina Garden Nursing Center	1.49	1.84	3.6	0	4.6	1.3
Oakland Healthcare & Wellness Center	1.09	0.56	10	1.1	0.4	0.4
Orinda Care Center*	1.74	1.97	23.7	1.4	2.1	0
Pittsburg Skilled Nursing Center*			34	2.6	1.4	1.2
Pleasant Hill Post Acute*			2.4	0	0	0
Princeton Manor Healthcare Center	0.78	1.04	22.9	2	0	0

Facility	No. of Hospitalizations per 1,000 Long-Stay Resident Days	No. of Outpatient ED visits per 1,000 long-stay resident days	Percent of Long-Stay Residents on Antipsychotic Meds	Percent of Long-Stay Residents With One or More Falls With Major Injury	Percent of Long-Stay Residents with a UTI	Percent of Long-Stay Residents Who Have/Had a Catheter Inserted and Left in Their Bladder
Redwood Healthcare Center	3.26	2.04	8.1	0	0	0.6
Richmond Post Acute*			8.3	0	0	0
San Pablo Healthcare & Wellness Center*	1.56	1.83	16	1.1	0.3	0.5
Kyakameena Care Center			2.3	0	0.6	3.8
Elmwood Care Center			5.1	1.1	0	3.5
The Rehabilitation Center of Oakland	1.62	2.96	18.2	0.9	2.3	0.9
The Reutlinger Community	2.15	0.94	3.7	0.9	2	0
Vale Healthcare Center*	2.09	1.18	11.3	1.3	0	0
Willow Pass Health Care Center	1.93	1.44	22.7	1.6	2.8	1.2
Windsor Post-Acute Care Center of Hayward	3.14	2.37	5.6	2.2	0.7	0.9
Windsor Rosewood Care Center*	2.82	2.49	10.6	2.5	0	1
Windsor Vallejo Nursing and Rehabilitation Center	1.27	1.72	12.4	0.6	0	0.3
Windsor Elmhaven Care Center	1.8	1.57	7.9	0.5	0.3	2.2
Windsor Country Drive Care Center	3.17	1.06	9	2	0.3	0
Windsor Hampton Care Center	2.11	2.17	5	2.4	0.3	0.3
Crestwood Manor Modesto	2.33	1.87	88.1	2.6	1.3	1
Crestwood Fremont	1.14	1.25	75.8	0.9	1.1	0.5
Crestwood Stockton	1.59	0.67	100	0.7	2	0.9
Crestwood Treatment Center	2.46	0.33	72.6	4.6	0.5	0
Crestwood Wellness and Recovery Center	0.82	0.58	97	0	1.4	0.3
ManorCare Health Services (Tice Valley Post Acute)*			10.5	3.6	2.3	0.2
ProMedica Skilled Nursing Rehabilitation (Rossmoor)	3.47	1.17	9.1	5.9	0.9	0
Shields Nursing Center*			10.4	0	1	0.6
Shields Richmond Nursing Center	2.25	0.78	12.4	0	0	1.7
San Miguel Villa (Concord Post Acute)*	1.68	1.47	18.6	2.1	0	0.3
Windsor Manor Rehabilitation Center of Concord (Diablo Valley Post Acute)*	1.6	1.21	9.2	1.9	0.4	0.1
Windsor Park Care Center of Fremont (Mission Valley Post Acute)	2.25	0.93	10.4	0	1.2	1.6

Facility	No. of Hospitalizations per 1,000 Long-Stay Resident Days	No. of Outpatient ED visits per 1,000 long-stay resident days	Percent of Long-Stay Residents on Antipsychotic Meds	Percent of Long-Stay Residents With One or More Falls With Major Injury	Percent of Long-Stay Residents with a UTI	Percent of Long-Stay Residents Who Have/Had a Catheter Inserted and Left in Their Bladder
Windsor Gardens Care Center of Hayward	2.12	1.13	7.9	2.5	0.5	1.2
Windsor Healthcare Center of Oakland (Brookdale Healthcare & Wellness Centre, LP)	3.02	1.42	20.3	2.3	0.7	1.6
Alhambra Healthcare and Wellness Center (Martinez Healthcare Center)*			20.2	0	2.4	2.8

## 10.5 WQIP BY FACILITY, 2023

Facility	Medi-Cal Share Area Score	RE Completeness Area Score
ALAMEDA HEALTHCARE & WELLNESS CENTER	0.6	0
ALHAMBRA HEALTHCARE & WELLNESS CENTRE, LP	1	0.9
BAY AREA HEALTHCARE CENTER	0	0.9
BAYBERRY SKILLED NURSING & HEALTHCARE CENTER*	0.8	0.4
BELLAKEN SKILLED NURSING CENTER	0.4	1
BERKELEY PINES SKILLED NURSING CENTER	0.8	1
BROOKDALE HEALTHCARE & WELLNESS CENTRE, LP	1	0.4
CREEKSIDE HEALTHCARE CENTER*	0.8	1
CRESTWOOD MANOR- Stockton	0	1
CRESTWOOD MANOR- Modesto	0	1
CRESTWOOD MANOR - FREMONT	0	1
CRESTWOOD TREATMENT CENTER	0.2	1
DANVILLE POST ACUTE REHABILITATION	0.4	1
DELTA VIEW POST ACUTE*	0	0.9
DIAMOND RIDGE HEALTHCARE CENTER*	0.8	1
ELMWOOD CARE CENTER	0.2	0.6
EXCELL HEALTH CARE CENTER	0.2	1
GREENRIDGE POST-ACUTE	0	0.5
HAYWARD HEALTHCARE & WELLNESS CENTER	0.6	0.9
IDYLWOOD CARE CENTER	0.8	1
KYAKAMEENA CARE CENTER	0.8	0
LA CASA VIA TRANSITIONAL CARE CENTER*	0	0.9
LAKE MERRITT HEALTHCARE CENTER LLC	0.8	1
LEGACY POST ACUTE CARE*	0.6	0.9

Facility	Medi-Cal Share Area Score	RE Completeness Area Score
LONE TREE POST ACUTE*	0	0.7
MARINA GARDEN NURSING CENTER	0.2	0.9
MORAGA POST ACUTE*	0.2	1
NORTH PARK POST-ACUTE	0.4	1
OAKLAND HEALTHCARE & WELLNESS CENTER	1	0
ORINDA CARE CENTER, LLC*	0.8	1
PITTSBURG SKILLED NURSING CENTER*	0.6	0.7
PLEASANT HILL POST ACUTE*	0.4	1
PRINCETON MANOR HEALTHCARE CENTER, LLC	1	0
PROMEDICA SKILLED NURSING AND REHABILITATION (ROSSMOOR)	0.2	1
PROMEDICA SKILLED NURSING AND REHABILITATION (TICE VALLEY)	0.4	1
REDWOOD HEALTHCARE CENTER LLC	0.8	1
RICHMOND POST ACUTE CARE*	0	0.9
SAN MIGUEL VILLA*	1	1
SAN PABLO HEALTHCARE & WELLNESS CENTER*	0.8	0.6
SHIELDS NURSING CENTER*	0.2	0.8
SHIELDS RICHMOND NURSING CENTER	0.8	0.8
STONEBROOK HEALTHCARE CENTER*	0.4	1
TAMPICO TERRACE CARE CENTER*	0.4	0.7
THE REHABILITATION CENTER OF OAKLAND	0.8	0
THE REUTLINGER COMMUNITY	0.2	1
VALE HEALTHCARE CENTER*	0	1
WILLOW PASS HEALTHCARE CENTER	0.8	0.1
WINDSOR COUNTRY DRIVE CARE CENTER	0.2	0.4
WINDSOR ELMHAVEN CARE CENTER	0.4	0.8
WINDSOR GARDENS CARE CENTER OF HAYWARD	0.2	0.9

Facility	Medi-Cal Share Area Score	RE Completeness Area Score
WINDSOR HAMPTON CARE CENTER	0	0.4
WINDSOR MANOR REHABILITATION CENTER OF CONCORD	0.6	1
WINDSOR PARK CARE CENTER OF FREMONT	0	1
WINDSOR POST-ACUTE CARE CENTER OF HAYWARD	0.4	0
WINDSOR ROSEWOOD CARE CENTER*	0.6	0.8
WINDSOR VALLEJO NURSING & REHABILITATION CENTER	0	0.1

## 10.6 MCAS BY FACILITY, 2023

- *Skilled Nursing Facility (SNF) Healthcare-Associated Infections Requiring Hospitalization (LTC-HAI) Rates*
- *Number of Outpatient Emergency Department (ED) Visits per 1,000 Long-Stay Resident Days (LTC-OED) Rates*
- *Potentially Preventable 30-Day Post-Discharge Readmissions (LTC-PPR) Rates*

Provider	LTC-HAI Rate	LTC-OED Rate	LTC-PPR Rate
14766 WASHINGTON AVENUE OPERATIONS LLC	0.00%	-	0.00%
ALAMEDA HEALTHCARE & WELLNESS CENTER LLC	36.36%	-	0.00%
ALL SAINTS MAUBERT	0.00%	72.65%	-
ANTIOCH DUNES HEALTHCARE LLC	7.25%	1.16%	0.00%
AOTN LLC	100.00%	-	0.00%
ARPD LLC	0.00%	0.00%	0.00%
ATMC LLC	100.00%	-	-
AWCY LLC	3.57%	2.10%	0.00%
BAY AREA HEALTHCARE CENTER	0.00%	-	0.00%
BERKELEY PINES SKILLED NURSING GROUP INC	0.00%	-	-
CREEKSIDE HEALTHCARE CTR*	11.76%	0.00%	16.67%
DANVILLE HEALTHCARE	0.00%	-	0.00%
DIAMOND RIDGE POST ACUTE LLC*	1.45%	3.80%	0.00%
DRIFTWOOD HEALTHCARE	0.00%	-	-
ELMWOOD NURSING & REHAB CENTER	20.00%	-	0.00%
FOUNTAIN VIEW SUBACUTE AND NURSING CENTER LLC	100.00%	-	-
FULTON GARDENS POST ACUTE LLC	0.00%	-	-
GHC OF CONTRA COSTA LLC	0.00%	6.49%	0.00%
GHC OF SUNNYVALE LLC	0.00%	0.00%	-
GHC OF WALNUT CREEK LLC*	0.00%	0.00%	-
GREY PINE HOLDINGS LLC*	4.76%	-	0.00%

Provider	LTC-HAI Rate	LTC-OED Rate	LTC-PPR Rate
HAYWARD HEALTHCARE CENTER LLC	0.00%	-	0.00%
HB HEALTHCARE ASSOCIATE LLC	0.00%	-	-
HELIOS HEALTHCARE LLC	0.00%	-	-
INTEGRITY CARE GROUP LLC	0.00%	-	-
J3TFZ INC	5.56%	2.43%	0.00%
KYAKAMEENA SANITORIUM	0.00%	-	0.00%
LEGACY NURSING & REHAB CT	5.71%	3.73%	0.00%
LONETREE CONV HOSP	5.48%	4.53%	0.00%
LOS ANGELES CARE CENTER LLC	0.00%	0.00%	-
MANOR CARE OF WALNUT CREEK CA LLC	0.00%	0.00%	0.00%
MCHS TICE VALLEY	0.00%	0.00%	0.00%
MID-WILSHIRE HEALTH CARE CENTER	100.00%	-	-
MORAGA POST ACUTE*	0.00%	-	0.00%
OAKLAND HEALTHCARE & WELLNESS CENTER LLC	0.00%	-	0.00%
OAKLANDIDENCE OPCO LLC	0.00%	-	0.00%
ORINDA CARE CENTER LLC*	0.00%	2.54%	0.00%
PACIFIC CARE SALLIDA	33.33%	-	0.00%
PARKVIEW HEALTHCARE CTR	0.00%	-	0.00%
PITTSBURG SKILLED NURSING GROUP INC*	14.29%	0.00%	-
PLEASANT HILL POST ACUTE*	6.67%	5.85%	25.00%
POSITIVE & VIGILANT HEALTHCARE	7.14%	8.26%	0.00%
PRINCETON MANOR HEALTHCARE	0.00%	-	0.00%
RAY PROPERTIES KIT CARSON INC	0.00%	0.00%	-
REDWOOD HEALTHCARE CENTER	0.00%	-	-
RICHMOND POST ACUTE CARE LLC.*	8.00%	0.00%	0.00%
SAN FRANCISCOIDENCE OPCO LLC	0.00%	-	-

Provider	LTC-HAI Rate	LTC-OED Rate	LTC-PPR Rate
SAN PABLO HEALTHCARE & WELLNESS CENTER*	0.00%	0.00%	0.00%
SONOMAIDENCE OPCO LLC	0.00%	-	-
SPRINGS ROAD HEALTHCARE	0.00%	0.00%	-
STONEBROOK HEALTHCARE CENTER*	0.00%	-	0.00%
THE HERMAN SANITARIUM THE HERMAN SANITARIUM	0.00%	-	-
THE REHABILITATION CENTER OF OAKLAND LLC	0.00%	-	0.00%
THE REUTLINGER COMMUNITY	0.00%	3.28%	-
THE VINEYARDS HEALTH CARE CENTER	0.00%	-	0.00%
TRANQUILITY INC	4.88%	2.29%	1.96%
VALE OPERATING COMPANY LP	0.00%	3.60%	0.00%
VALLEY POINTEIDENCE OPCO LLC	33.33%	-	0.00%
WILLOWPASS HEALTH CARE CTR*	8.57%	3.82%	0.00%
WINDSOR CONVALESCENT & REHAB	0.00%	-	0.00%
WINDSOR MANOR REHABILITATION CENTER OF CONCORD	7.14%	0.88%	0.00%
WINDSOR OAKRIDGE HEALTHCARE	0.00%	-	-
WINDSOR ROSEWOOD CARE CENTER*	11.11%	9.09%	0.00%