

These are **example reports**. The agency, staff, patients and scores are **fictional**. [Request your free sample](#) · [Back to NoteGrade Hospice](#)

What you get

Three things NoteGrade sends you. Each one is shown here exactly as it arrives by email.

[1. Free sample results](#) · [2. Daily or weekly leadership report](#) · [3. Physician & NP review \(add-on\)](#) · [Download all as PDF](#)

EXAMPLE 1 OF 3

Your free sample results

Sent after we review 2–3 randomly chosen staff. Includes trends and a recommended plan.



FREE SAMPLE RESULTS
Sample Hospice, LLC · Notes 9/6–10/5/2026

Dear Jordan,

Thank you for trying NoteGrade. We randomly selected **3 staff members** and reviewed **41 of their notes** from the last 30 days, comparing each one with published CMS requirements and the LCDs. Below you'll find their scores, how their documentation trended over the month, what we found, and the plan we'd recommend for your agency, with our reasons.

58 Sample average / 100	+9 Change, week 1 → week 4	12% Notes unsigned after 24 hrs
-----------------------------------	--------------------------------------	---

OUR RECOMMENDATION

Daily for 2 weeks, then Plus (3× a week)

+ Physician & NP Certification Review

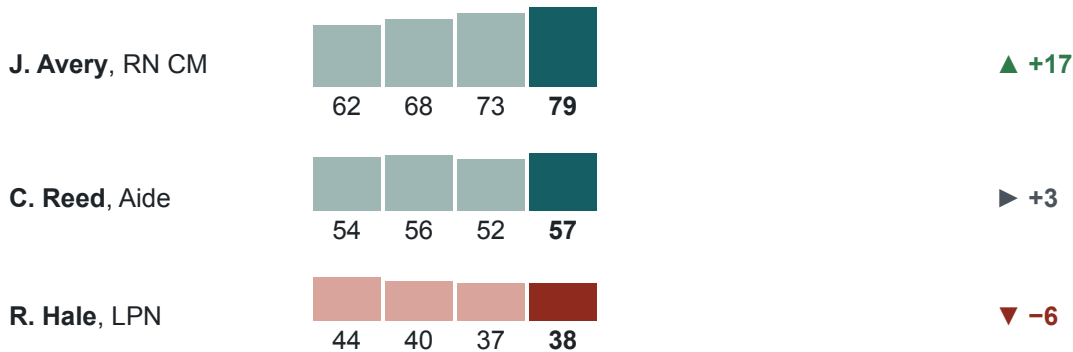
Why:

- Your sample average of 58 is below 60, and one staff member scored 38. Daily feedback for two weeks gives staff fast correction while habits are forming.
- 12% of sampled notes were still unsigned after 24 hours. Daily review catches these while they can still be completed the same week.
- Two sampled charts had a recertification narrative that closely matched the nursing summary. The certification add-on reviews those every month.

Estimated cost at your census of 48: Daily for the first 2 weeks (about \$960), then Plus at \$1,200/month, plus the add-on at \$240/month. One-time setup \$1,000.

Trends over the 30 days

Average note score by week, per staff member. Each bar is one week.



Measure	Week 1	Week 4
Notes showing measurable decline vs. prior visit	18%	31%
Notes signed within 24 hours	84%	91%
Aide tasks consistent with the narrative	78%	71%

What we found

J. Avery, RN Case Manager: 79 (up 17). Strong recent notes with PPS, MAC and intake compared with the prior visit. Earlier notes repeated "unchanged since last visit" on a long-stay dementia patient. *Example of a clearer note:* "MAC 22.5 cm (23.0 on 9/12); intake ~25% of meals per caregiver, down from 50%."

C. Reed, Hospice Aide: 57 (flat). Real visit times and answers to the pain questions on every note. Points were lost because showers were marked DONE on two visits where the narrative says the patient declined, and 5 of 14 notes had no observations.

R. Hale, LPN (on-call): 38 (down 6). 4 of 9 notes were unsigned after 24 hours. Two after-hours calls had no assessment and no record of physician notification.

Patient documentation gaps (initials)

- Q.R.: dementia, 14 months on service. No weight or MAC in the last 3 visits; the dementia LCD describes nutritional decline as a supporting factor.
- T.U.: recent narrative closely matches the nursing summary (about 70% overlap).

Ready to start? Choose your plan, accept the terms and pay online. That's it. We already have your read-only access from the sample, so your first review starts as soon as payment goes through, and your staff get the charting refresher right away.

[Start with the recommended plan →](#)

Questions? Reply to this email or contact Henry Mason, henry@precioushospice.com

These results reflect a small random sample and are educational feedback based on publicly available CMS regulations, LCDs and guidance. They are not legal, billing, coding or medical advice, do not determine hospice eligibility, and do not guarantee the outcome of any review. All clinical decisions remain with your agency. Patients are identified by initials only. This email is confidential and intended for the agency named above.

EXAMPLE 2 OF 3

Your daily or weekly leadership report

Sent on your plan's schedule: weekly, 3 times a week or daily. Every staff member gets a grade.

Daily Documentation Review: notes of Tuesday 3/10

Sample Hospice, LLC (fictional) · 28 notes from 5 staff · read-only review · patients by initials only



Sample Hospice, LLC
AGENCY GRADE · 5 STAFF

Notes worth a second look

- **Task boxes conflict with the narrative.** Two aide notes mark Shower: DONE where the narrative says the patient declined (M.N. 3/10, T.U. 3/10).
- **No decline documented on a long-stay patient.** Q.R. (dementia, 14 months) has no weight or mid-arm measurement in the last three RN visits.
- **On-call follow-up not documented.** A 2:40 AM fall call for V.W. has no assessment, no physician notification time and no incident form.

Scores

Staff	Role	Score	Change	Follow-up
Jordan Avery	RN Case Manager	B 86	+4	Feedback
Pat Morgan	Social Worker	C+ 79	+6	Feedback

Casey Reed	Hospice Aide	 64	+7	Feedback
Robin Hale	LPN · On-call	 41	-3	1:1 + spot-check
Drew Lane	Hospice Aide	 33	new	Immediate 1:1 + 100% review

Per person



Casey Reed
HOSPICE AIDE

Why: Real visit times and pain answered on every note. Points lost for showers marked DONE when declined, and no observations on 5 of 8 notes.

A clearer note: "Pt declined shower, stated too tired; bed bath given. Skin intact, ate ~25% of breakfast, more drowsy than last visit, reported to RN J. Avery at 10:40."

Supervisor: verbal feedback; dated late entries to correct the two shower boxes.



Robin Hale
LPN · ON-CALL

Why: 4 of 9 notes unsigned after 24 hours; two after-hours calls with no assessment or notification time.

Questions for a late entry (if accurate): "For the 3/10 call about V.W., what did you assess or learn, and who was notified, and when?"

Supervisor: 1:1 this week, then spot-check 3 notes.

Visit frequency vs. plan of care

31 of 34 patients met their ordered frequencies this week. Below: L.M. (aide 3/wk ordered, 1 done, no missed-visit note), P.S. (RN 1/wk, none since 3/2).

Educational feedback based on published CMS regulations and LCDs. Not legal, billing, coding or medical advice.

EXAMPLE 3 OF 3

Physician & NP Certification Review

Add-on, monthly. Every CTI, recertification and face-to-face compared with 42 CFR 418.22.

Physician & NP Certification Review: March

Sample Hospice, LLC (fictional) · 18 certifications and 9 face-to-face encounters



Dr. Alex Rivera
CERTIFYING PHYSICIAN

- Three recertification narratives closely match the nursing summary (over 60% overlap). 42 CFR 418.22 describes the narrative as composed by the certifying physician.
- One recertification appears signed 19 days before the period; the published window is 15 days.
- Strength: narratives cite PPS, FAST and weight with dates.



Morgan Diaz, APRN
FACE-TO-FACE ENCOUNTERS

- Detailed, patient-specific findings with a clear 6-month prognosis link.
- The attestation that findings were provided to the certifying physician is missing on 9 of 9.

Open items that appear past due (for your team to verify): 1 initial certification, 2 face-to-face encounters.

Educational feedback based on published CMS regulations. Your physicians make every clinical determination.

[Request your free sample](#)