Nebraska DATABANK User Guide

for the
Nebraska Hospital Association
DATABANK Program

www.nhanet.org/databank.htm
www.databank.org

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Welcome

Thank you for your participation in the DATABANK Program! This is your guide to successfully navigating the DATABANK Web Site. We hope the documentation answers your questions and makes the web site useful and informative as you provide information to your hospital colleagues, your state hospital association and ultimately, to the American Hospital Association. This data is critical in representing hospital interests across America. Thank you!

Software Requirements

You probably already have a web browser and even the recommended viewer. However, these are the recommended elements for successfully accessing the DATABANK Web Site.

Web Browsers

- Netscape 6.0 or above

- Internet Explorer 5.5 or above

- Firefox 1.0 or above

File Viewer

- Adobe Acrobat Reader 6.0 or higher

Internet Connection

- 28K modem or faster
- T-1
- ISDN
- DSL
- Cable Modem

Hardware Requirements

An up to date, Windows compliant computer is fairly typical in hospitals. However, if you have any doubts, we recommend the following hardware:

Personal Computer

- Pentium II 333 MHz or faster
- 10 Gigabyte hard drive
- 256 MB of Ram

Downloading Software

Netscape, Internet Explorer and Adobe Acrobat Reader can be downloaded from the **DATABANK Web Site** free of charge. Just click the graphical buttons on the left side of the main screen to download the software you need (pictured below). Please note that the data entry portion of the web site will perform significantly faster when using the **Netscape** browser.

If you have questions about downloading the browsers or Adobe Acrobat Reader, please see your hospital system administrator. If you need further assistance, please call your association.

Checking Your Browser's Version

Microsoft Internet Explorer

In **Internet Explorer**, click the Help menu option then click About Internet Explorer. The version number is the first line displayed.

Netscape

In **Netscape Communicator** or **Netscape Navigator**, click the Help menu option then click About Netscape Navigator or Netscape Communicator. The version number will be listed in large bold type.

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Logging On to the DATABANK Web Site

Once you have acquired the above software and are running it on the appropriate hardware, you access the DATABANK Web Site by typing in the address area of your browser, **www.databank.org**. This will take you to the only public page of the web site. Click on the words "**Click here to enter. (Password protected).**" A dialog box will appear. Enter your **user name**, press the tab key to move to the password field and enter your **password**. Press the enter key to proceed or click the **OK** button.

Note: Always enter your user name and password in lower case.

If you have not been assigned a user name and password, call your state hospital association.
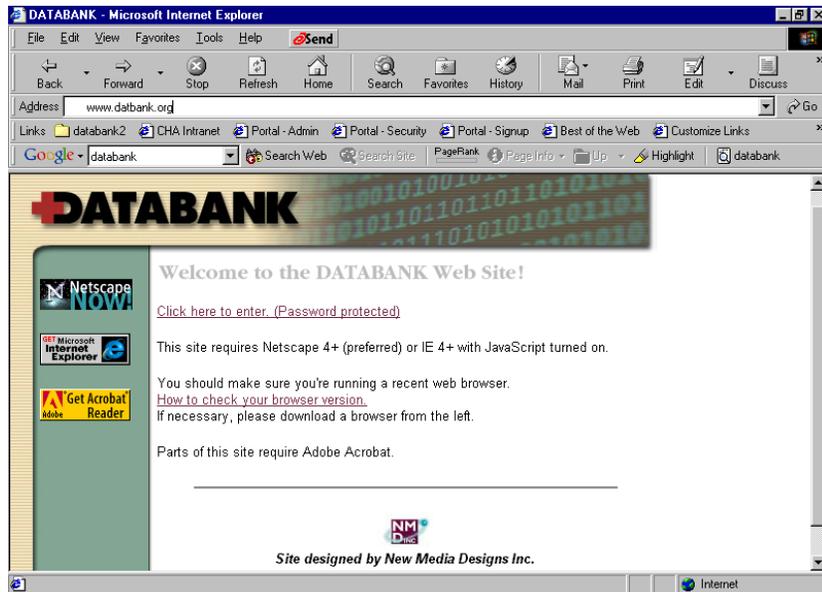
Once you have successfully authenticated to the DATBANK Web Site, the site will display "*Welcome John*". Your state hospital association's logo and graphic will be displayed at the top of the page.

A welcome message from you hospital association is displayed on the page. This message is specific to your state *but not to your hospital.* This message is generated by your association to keep you abreast of DATABANK events.

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User Names and Passwords

Your hospital association has assigned one employee of each hospital as the **Primary DATABANK Contact Person.** This person is responsible for the following:

1. To create and maintain user names and passwords for other users in the hospital.
2. To change his/her password on a regular basis to ensure a high level of security.
3. To assign different levels of access to the DATABANK Web Site. Some users need to have access to the data entry screens. Other users only need access to the reports.
4. To delete users from the system when they are no longer authorized to have access to the DATBANK Web Site.

User Name and Password Format

User Name:
Initially, your state hospital association will assign your user name and password. Your user name will in most cases be in the following format; the first initial of your first name, your full last name followed by your state code. Thus, Kevin Conway as a user in Nebraska would be "kconwayne".

Password:
Again, this is assigned to you as part of your setup process by the state association. Unless specifically instructed not to change the password, you should, on a regular basis, change your password. To do this, click on **Access Control** and follow the prompts. Make sure you click the checkbox marked "**Change user's password:**" and enter a new password for the user. Type in the password again to confirm and click "**Modify User**".

Passwords must be at least five characters. They can be any combination of alphanumeric characters.

Tip: Passwords are more secure if you use numbers for vowels. For instance, "a" would be 1, "e" would be 2, "i" would be 3, "o" would be 4 and "u" would be 5. Also, use non-words for your password. Using the above method will accomplish this.

Reminder: User names and passwords must be entered in lowercase.

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Web Site Contents

Association Logo

Your association's logo and graphic will appear at the top of the web page.

Welcome Message

A message appears in the middle of you screen. This is a message your association enters to alert you to upcoming events or certain situations that you need to be aware of.
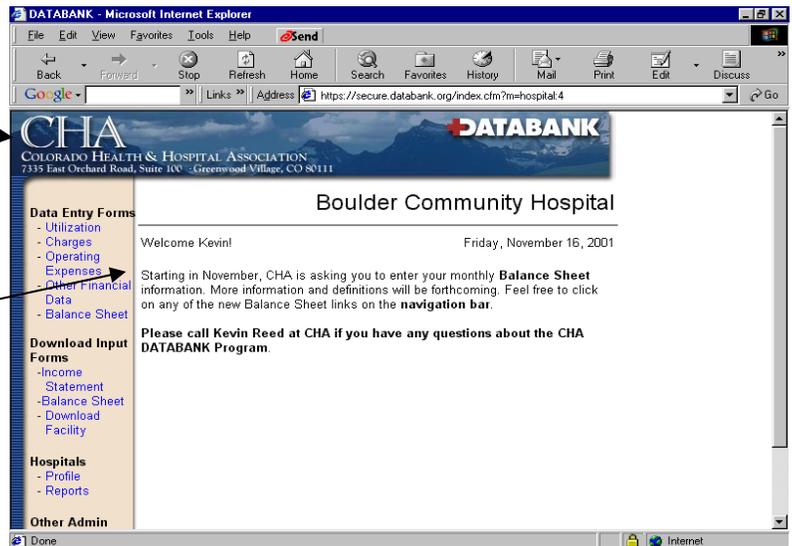
Navigation Bar

The bar down the left side of screen is called the navigation bar. The nav bar should look like this:

Data Input Forms

- Utilization
- Charges
- Operating Expenses
- Other Financial Data
- Balance Sheet Data

Download Input Forms

- Income Statement
- Balance Sheet
- Download Facility

Hospitals

- Profile
- Reports

Other Admin

- Access Control
- Peer Group Manager *

* -NHA has elected to not make the Peer Group Manager available to their member hospitals.

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Detail Overview of Navigation Bar Functionality

Data Input Forms
- Utilization - *Lines 1 – 12 of the DATBANK Input Form*
- Charges - *Lines 13 - 23*
- Operating Expenses - *Lines 24 - 31*
- Other Financial Data - *Lines 32 - 37*
- Balance Sheet Data - *Lines 1 – 31 of Balance Sheet Input Form*

Download Input Forms
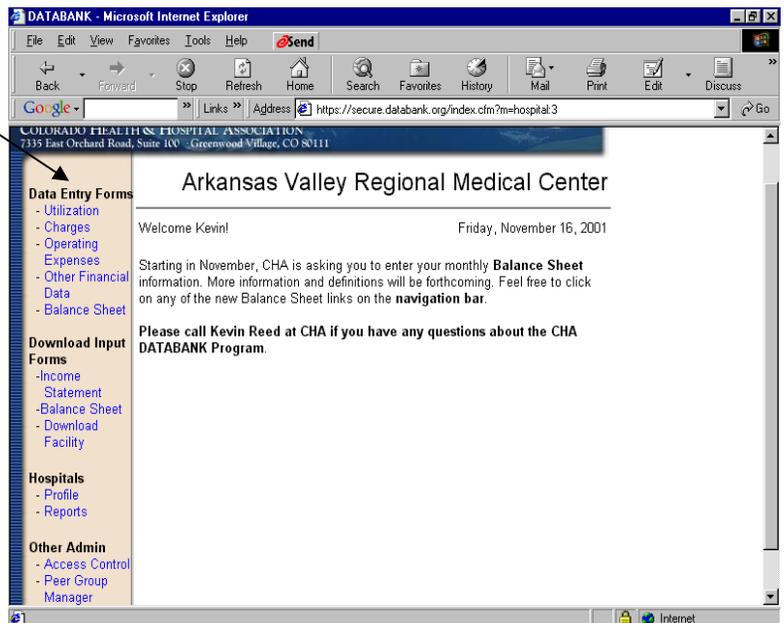- Income Statement – **Portable Document Format (PDF) of a blank Input Form.**
- Balance Sheet – **PDF of a blank Input Form.**
- Download Facility – **Allows you to download your hospital's data into a spreadsheet. If you choose to aggregate the data, be sure to click the check box next to the words "Check here to aggregate hospital data". For example, if you wanted to sum the data for the months January through December, then check the box. The result would be one spreadsheet line for the months that you selected. Unaggregated would show you one line per month.**

Hospitals
- Hospital Profile **– Allows you to keep names, titles, addresses, phone numbers and other descriptive information current for your hospital.**
- Reports **– Custom reports can be run for your hospital. Other reports that compare your hospital's data to peer groups can also be run. The following reports can be run; Missing, Participation, Edit/Review, Balance Sheet, Balance Sheet Peer Group, Balance Sheet Ratios, Balance Sheet Ratios Peer Group, Monthly, Trend, Comparative and Accumulation Reports**

Other Admin
- Access Control - **This screen allows you to manage users in your facility. Please remember, if you want to setup other users with access to the DATABANK web site, you can assign the user names and passwords from this screen.**
- Peer Group
  Manager – **This may or may not appear on your screen. Your association has the ability to turn this feature on or off depending on the confidentiality of data in your state. This feature allows you to add custom peer groups.**

Access Control

Setting Up a New User

Click the following; "**Access Control**" then "**Manage Users in Hospital**" then "**Add User To This Hospital**".

Enter the first name, press the tab key and enter the last name. Notice that the full name and the User ID are automatically built. ***Even though the state code (i.e. "CO") is in upper case, do not enter it as upper case when you log on.*** If you do not like the user name, you can change it. Leave the state code intact. You must be identified as a user from a state.

If you want to check if the user id is still available (chances are it is), click the button, "**Check User ID**". If it is already in use, enter more characters in the User ID field in order to uniquely identify yourself.

"Allow user to add/edit/delete users in their own Hospitals?" Prompt

Check the appropriate answer, "Yes" or "No", depending on how much access you want the user to have. For the DATABANK Contact Person, it should be set to "Yes" and others, who do not perform the data entry tasks, should have it set to "No". If it is set to "No", the user can only edit their user profile.

Enter the password and verify it by re-entering the same password. The password must be five or more alphanumeric characters.

Click the "**Add User**" button. You will be notified that the user has been successfully added.

Repeat the process of additional hospital users. Using your browser's **back** button can help speed this process.
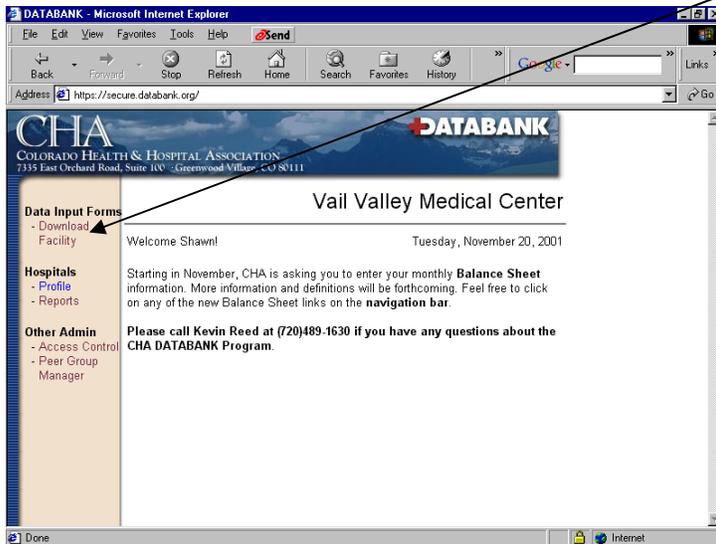
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"Allow user to access input forms" prompt

By selecting "No" for this prompt a user's screen will look like the screen shot below. Notice the Navigation Bar. It does not show the data entry forms or the input forms download.

Limited Navigation Bar with prompt set to "No".

Changing a Hospital User's Password

From the home page, click the following; "**Access Control**" then "**Manage Users in Hospital** ", select the user from the dropdown list next to the button "**Edit User**". Click that button to proceed.

Click the box marked "**Change user's password:**" and enter a new password for the user. Confirm the new password and click "**Modify User**".

Passwords should be changed on a regular basis to ensure security.

Deleting a Hospital User

The list of users of the DATABANK Web Site should be reviewed to make sure the access for individuals is appropriate. If you find an employee who no longer works at the hospital or for some reason no longer needs access, you should follow the steps below to remove them from the DATABANK Web Site.

From the home page, click the following; "**Access Control**" then "**Manage Users in Hospital**" then select the user from the list next to the button "**Edit User**". Click that button to proceed.
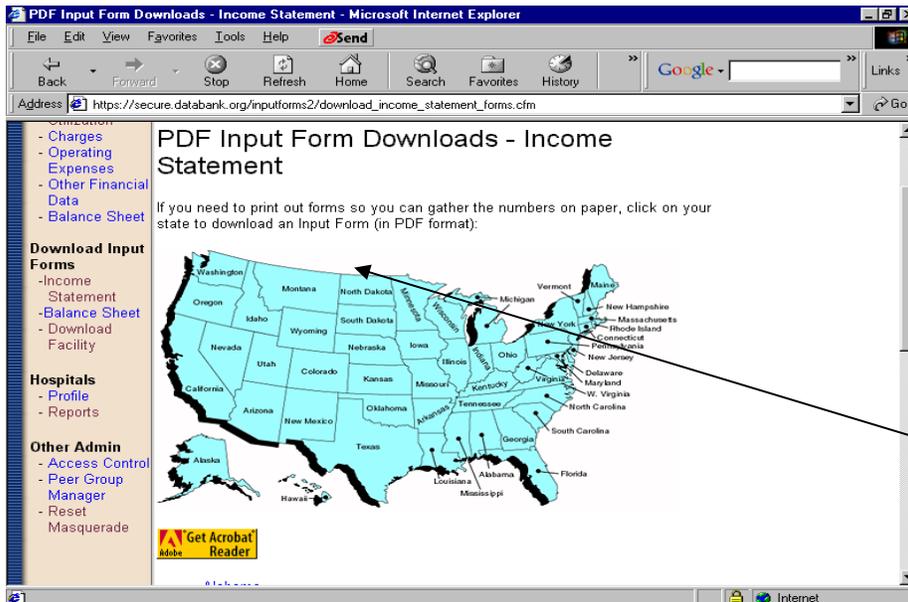
Click the button at the bottom (make sure you scroll down if you don't see it) marked "**Delete User**".

Input Forms

Before you input your data, you may want to collect the data on a blank **Input Form** as a worksheet for your monthly submission.

On the navigation bar, click on "**Download Input Forms**" and then click on Income Statement. A map of the United States will appear. Click on your state. Adobe Acrobat Reader will start and you will see a copy of the Input Form on your screen. Print a copy of this form and start filling out the information for the month that is due. Don't forget to fill in the month and year at the top, as you will keep a copy of this form in your files after you have successfully input the data over the web.

The Balance Sheet Input Form (if your state elects to collect Balance Sheet Data) works the same way as the Income Statement Input Form.

Hospital Profile

Most of the information in the **Hospital Profile** should be easy to complete for your hospital. Your hospital association may have filled in some of the basic information. However, some other areas of the profile may need you to complete. For instance, if you do not have the licensed and staffed breakouts of the hospital beds for your hospital, the **Med/Surg** bed numbers are the only required fields to properly complete the bed information. The important fields are the bed numbers under Total Licensed and Total Staffed.

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Data Entry

Once you've collected your hospital's data and completely filled out the Input Form, you can now enter it on the DATABANK Web Site.

Click "**Utilization**" on the navigation bar.

Step 1: Select the field size:

The options are small, medium and large. These sizes refer to the field size. Feel free to experiment to see which size fits best for your monitor. Small will usually accommodate most numbers. However, the charge numbers may exceed the width of the column (for display purposes only).

Step 2: Select a date for a new entry
or select an older entry date that was already made final:
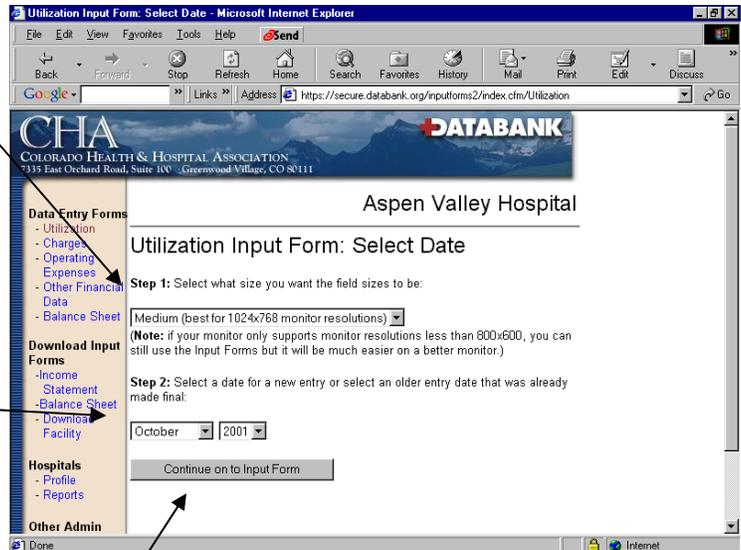
In the drop down list select the month and the year.

Click on the button "**Continue on to Input Form**". Please be patient while the form loads.

Fill in the "Beds Avail" and "Beds Lic" prompts. **To move between fields, press the tab key.**
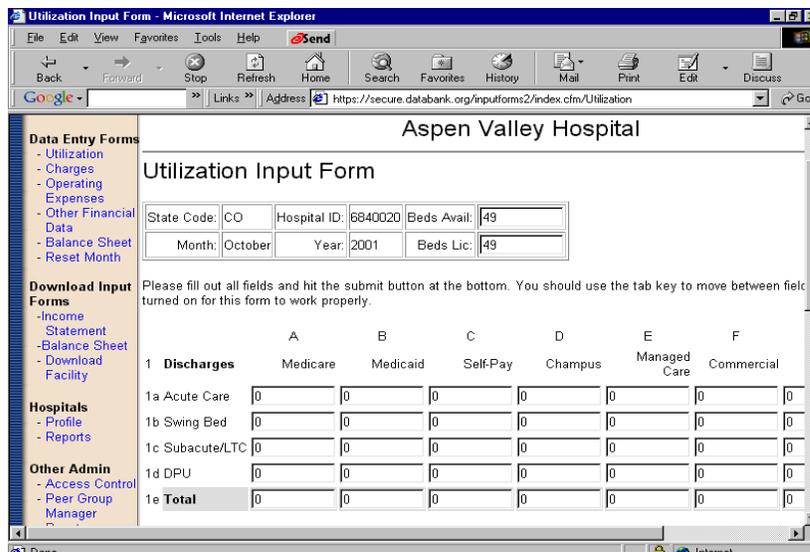
Notice that as you enter data (*whole numbers only*), the columns and rows total automatically. To move back to a previous field, click the field with your mouse or hold down the shift key and press the tab key. When you have entered discharges and patient days, enter the rest of the data on the form. Press the "**Submit**" button at the bottom of the form.

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At the top of the next form (Charges), you will receive a confirmation message that you were successful in submitting the previous form's data.

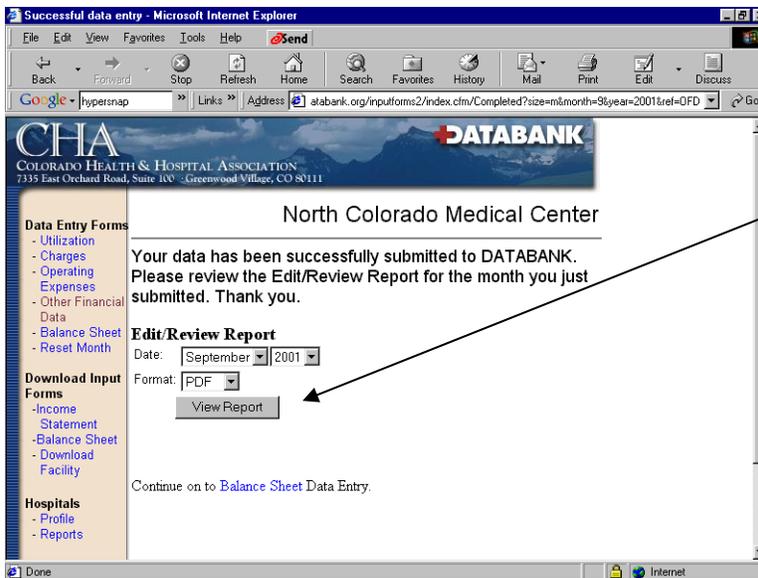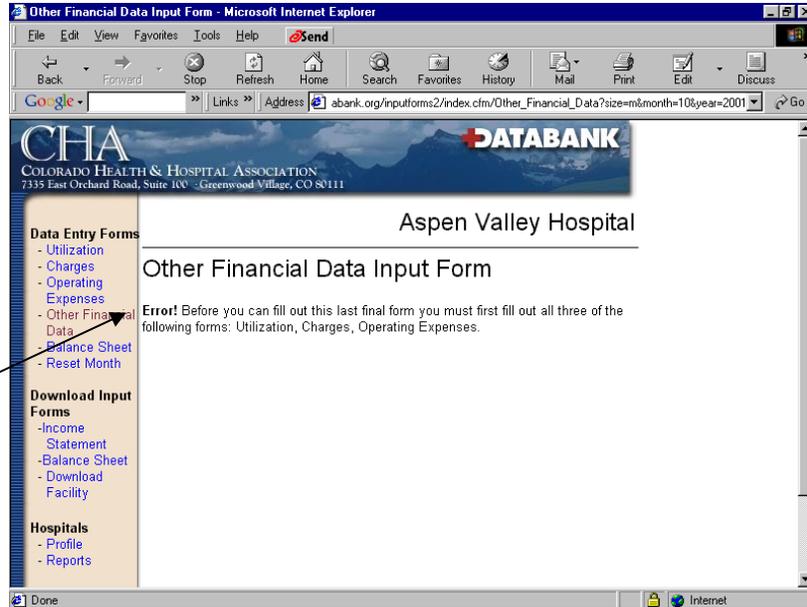Each form should be completed in order. **Utilization**, **Charges**, **Operating Expenses** and finally, **Other Financial Data**. **Note:** If you try to bypass the previous forms and move directly to **Other Financial Data**, you will receive an **error message.**

Note: Enter only whole dollars!

Reviewing Your Data
To print a copy of an Edit/Review Report comparing the data you just entered to a prior month, just click View Report. **This is an extremely important step and should not be skipped!**

Each of the four input forms works the same way; fill out the form, click the "**Submit**" button and the next screen appears. The data is not submitted to the "live" database until the last form of the Income Statement form is submitted successfully. Therefore, you can submit the forms all at once or one each day.

Once you have reviewed the Income Statement data that you entered, please continue on to the **Balance Sheet** data input. Proceed in the same manner as you did for the **Income Statement** data.

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Reporting Facility

Reporting on-line by any user within the hospital is a built in feature of the DATABANK Web Site. This section will describe the reporting process. To access the available reports, click "**Reports**".

Missing Report

This report lists the hospitals that have not submitted data for the selected time periods. This report can be run for a peer group or individual facilities, but not both.
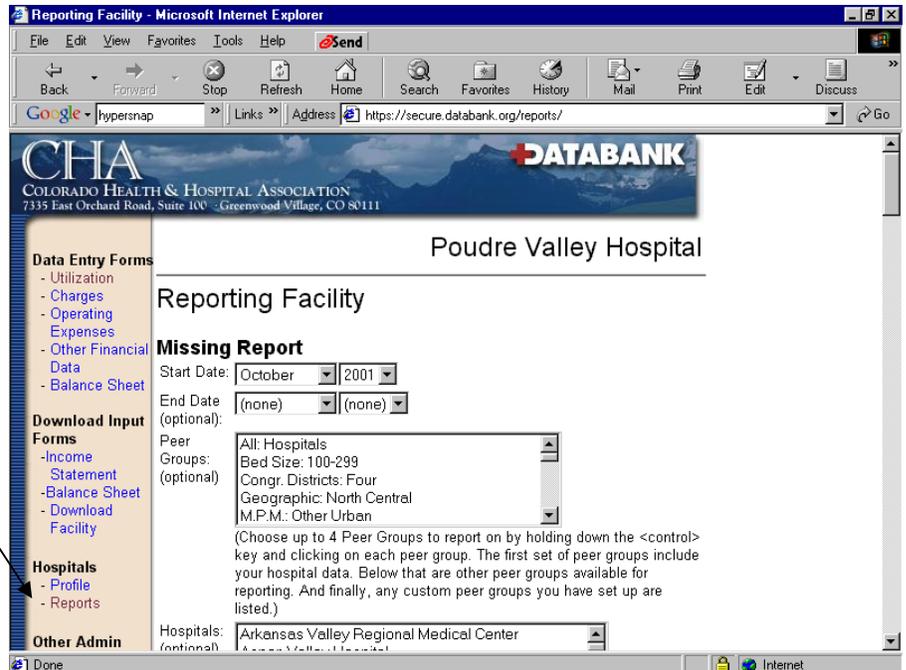
NHA does not offer this report at this time.

Participation Report

This report lists the hospitals that have submitted data for the selected time periods. It also displays the peer groups it is included in. Like the Missing Report, you can run this report for a peer group or individual facilities, but not both.

NHA does not offer this report at this time.

Edit/Review Report

As described above, this report allows the hospital DATABANK Contact Person to compare the hospital's data submission for a month compared to the previous month. Two months of data are required to run this report (i.e. February compared to January).

Balance Sheet Report

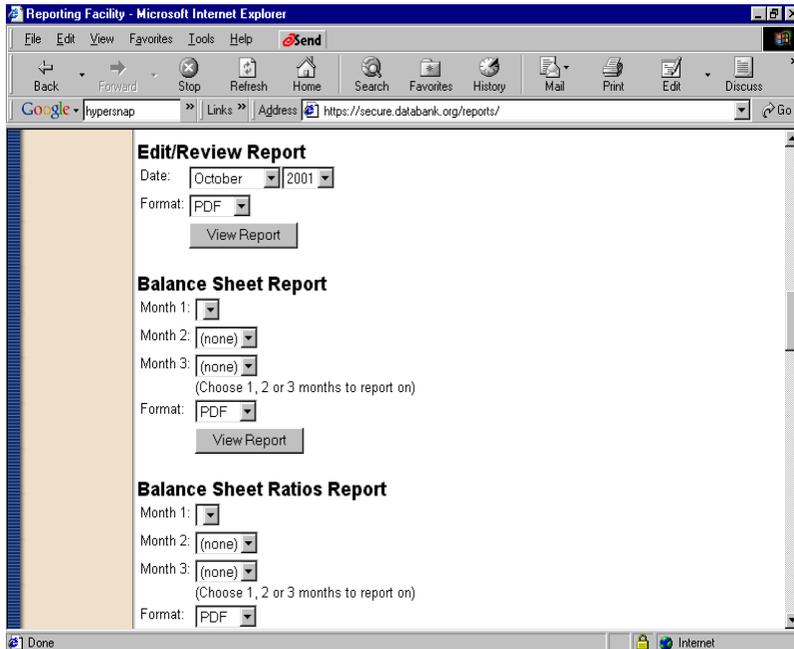Select the month(s) you have entered for the Balance Sheet information. Only the months you have entered in the system will appear in the drop down box. This report will allow you to compare the values entered for up to three months

Balance Sheet Peer Group Report

Select a month and select one or two peer groups to report on. Only the months you have entered in the system are available for reporting. This report will allow you to compare your values entered and the values for up to two peer groups.

Balance Sheet Ratios Report

Select the month(s) you want to compare. Only the months you have entered in the system will appear in the drop down box. This report will allow you to look at eighteen different ratios for your hospital.

Balance Sheet Ratios Peer Group Report

Select a month and select one or two peer groups to report on. Only the months you have entered in the system are available for reporting. This report will allow you to compare eighteen different ratios for your hospital and the ratios for up to two peer groups.

Monthly Report

The Monthly Report allows the user to compare its performance to peer groups.

Select a **Start Date** for the Monthly Report. The **End Date** is optional. The pictured selection would generate a year to date September report.

Select the **Report Type.** The choices are **Payors and Levels of Service**, **Payers** only or **Levels of Service** only.

Check the **Sections** of the report you want to run by using your mouse. On the keyboard, the space bar selects a section.

You must select **one** to **four Peer Groups** for the report to run. The peer groups are listed in a list box.
1. The first peer groups in the list box are the standard association peer groups that the hospital's data is aggregated in.
2. Below the first set are standard peer groups that the hospital is *not* aggregated in.
3. The last peer groups listed are any custom peer groups created for the hospital. These peer groups are specific to the individual hospital user and are not visible by other hospitals. If NHA has created custom peer groups, these will be listed in this section of the **Peer Group** dropdown box.

Tip: To select more than one peer group, hold the Ctrl key after clicking the first peer group. Then, while holding down the Ctrl key, click any other peer group then release the Ctrl key. To deselect a peer group after selecting it, hold down the Ctrl key and click the peer group.

Lastly, select the format of your choice. Select **HTML** if you choose to view the report in this format. Select **PDF** (Portable Document Format) if you need a printed copy. Again, you will need *Adobe Acrobat Reader* installed on your computer in order to use the PDF format.
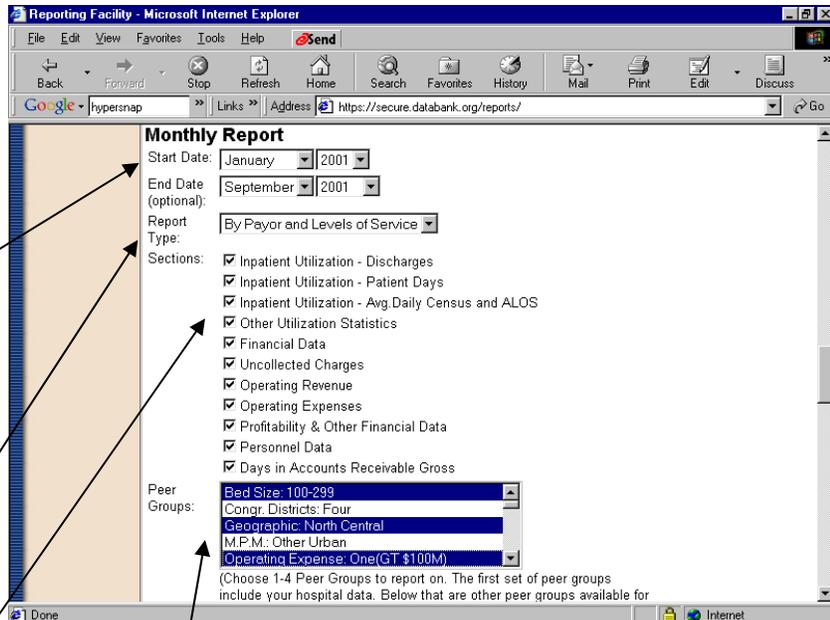
Trend Report

The Trend Report allows the user to trend their data using a **one-month** format (12 months report) **three- month** format (quarterly report) or even a **twelve-month**, annual report. The default is one month, which will report twelve months of data, one month per column for the same indicators as the Monthly Report. The screen shot shows the format of a report run in HTML with a start date of September 2001, using a **twelve-month** format.

	1	2	3	4	5	6	7	8	9	10	11	12
	September 2001	August 2001	July 2001	June 2001	May 2001	April 2001	March 2001	February 2001	January 2001	December 2000	November 2000	October 2000

INPATIENT UTILIZATION DISCHARGES

Please Note: This format generally follows the Input Form. Where averages are displayed they are noted.

Discharges
As a Percent of Total Discharges
By Payor

Medicare	53.1%	49.5%	49.8%	52.0%	49.7%	48.5%	51.0%	48.4%	48.7%	155.0%	45.9%	53.6%
Medicaid	6.2%	5.5%	7.6%	7.0%	5.9%	6.9%	6.4%	5.0%	5.8%	-60.0%	7.9%	5.5%
Self Pay	1.4%	2.3%	3.5%	3.9%	2.1%	2.6%	1.5%	1.4%	2.0%	-62.5%	2.9%	2.8%
Champus	0.2%	0.6%	0.0%	0.2%	0.5%	0.4%	0.2%	0.4%	0.7%	-5.0%	0.2%	0.0%
Managed Care	30.7%	28.1%	26.5%	22.1%	29.1%	29.9%	27.0%	29.4%	30.9%	205.0%	24.8%	23.5%
Commercial	8.4%	14.0%	12.5%	14.8%	12.7%	11.8%	14.0%	15.4%	11.9%	-157.5%	18.2%	14.6%
Others	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	25.0%	0.0%	0.0%

By Levels of

Tip: If you choose HTML as the format, you can save the report by selecting **F**ile, **S**ave As. Choose an appropriate directory where you save spreadsheets. When you open the report in Excel, the formats of the report are preserved.

Comparative Report

The Comparative Report allows users to compare their data to a prior period in addition to displaying peer group data for the period. This report displays the same calculated indicators as the Monthly Report and Trend Report.

Select a **Start Date** and **End Date**. The Comparative Report requires a comparative start date. The **Comparative Start Date** can be any date prior to the **Start Date**.

First Quarter 2002 vs. First Quarter 2001 Example: Start Date: *January 2002*, **End Date:** *March 2002*, **Comparative Start Date:** *January 2001*.

> **Note:** For a hospital to be included in the Comparative Report, the hospital must have submitted the requested months.

> **Example:** if you have requested the third quarter, 2001 compared to the third quarter. 2000, then hospitals are required to submit July – August for each quarter requested. If a hospital in this example has not submitted the required six months, it will not be included in the peer group's results. The report below shows this hospital's performance compared to one peer group. Up to three peer groups can be selected for the comparative report.

HTML Comparative Report comparing Third Quarter 2001 to Third Quarter 2000.

Accumulation Report

The Accumulation Report allows hospitals to display the data they have submitted to the **DATABANK** Program in an Input Form, format. The example below was run in HTML for nine months ending in September 2001. The header information was left off to conceal the hospital's identity. This report can be run for one month or YTD, 12 months.

Utilization - Inpatient								
1. Discharges	Medicare	Medicaid	Self Pay	Champus	Managed Care	Commercial	Others	Total
a. Acute Care	1,916	306	113	17	1,302	589	0	4,243
b. Swing Bed	0	0	0	0	0	0	0	0
c. Subacute/LTC	493	0	0	0	69	31	0	593
d. DPU (Distinct-Part Unit)	336	35	8	1	177	52	0	609
e. Total Discharges	2,745	341	121	18	1,548	672	0	5,445
2. Patient Days	Medicare	Medicaid	Self Pay	Champus	Managed Care	Commercial	Others	Total
a. Acute Care	7,399	841	300	44	3,704	1,809	0	14,097
b. Swing Bed	0	0	0	0	0	0	0	0
c. Subacute/LTC	2,856	0	0	0	300	133	0	3,289
d. DPU								

Peer Groups

Standard Association Defined Peer Groups

The Nebraska Hospital Association has defined several peer groups to accumulate hospitals data. Each hospital's data will be included in:

1. Statewide
2. M.P.M. (**M**edicare **P**ayment **M**ethod)
3. Congressional District
4. Urban/Rural Referral
5. Medicaid PPS
6. Other peer groups defined by NHA.

The following table displays Nebraska's peer groups and the "sub peer groups":

Peer Group	Statewide	M.P.M.	Congressional District	Urban/Rural Referral	Medicaid PPS
Sub Peer Groups	Acute Care	Rural	One	Urban/Rural Referral	Medicaid PPS
Sub Peer Groups		Rural Referral	Two		
Sub Peer Groups		Urban	Three		
Sub Peer Groups		CAH			

Hospitals are placed in sub peer groups by their association. The Statewide, M.P.M. and Region peer groups generally will not change. However, hospitals in Congressional peer groups (and possible others) can and will move from group to group and the flexibility of the DATABANK Program allow for these changes. If you dispute your hospital's peer groups, please contact your association.

Thresholds and Minimum Peer Group Participation

In order for the peer group data to be displayed on your reports, a threshold must first be met. NHA determines the threshold percentage for each peer group. For example, if your state has 84 hospitals included in the **Statewide Acute Care** sub peer group and the threshold has been set at 25%, then 21 hospitals must have reported data for the requested time period.

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In addition to the threshold, NHA has determined the minimum number of hospitals in order to maintain confidentiality. If hospitals would like to share information, NHA peer groups containing one hospital per sub peer group can be set up.

The PDF report below illustrates the result of a peer group's threshold not being met.

This example shows a peer group's threshold not being met.

Contacting Your State Hospital Association

If you have additional questions or need technical support, please contact the Nebraska Hospital Association at 402-458-4900. You can also contact Kevin Conway at kconway@nhanet.org, or Karen Peppmuller at kpeppmuller@nhanet.org.

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Troubleshooting

Connections, Web Browsers

Problem: I cannot connect with my web browser. The message says that it cannot find www.databank.org.

Solution: Try another web site such as www.cnn.com or some other web site you know should be accessible.

If you **cannot** reach one of those sites then it isn't a problem with www.databank.org. Parts of the Internet network can go down and this will cause a disruption in your Internet service.

If you *can* get to those sites but you still can't reach www.databank.org, then either wait an hour or so, or contact your state hospital association and ask if they know of a problem with the DATABANK Web Site.

> **Note:** The DATABANK Web Site is monitored 24x7. If it is not accessible, there is a problem that is being worked on and it will be accessible as soon as possible. Occasionally, the DATABANK Web Site will be brought down for maintenance and upgrades. Your association will be notified ahead of time and you will be notified of the planned downtime.

Problem: I cannot logon to the site with my user name and password.

Solution: The user name and password must be entered in lower case. If you still cannot logon, call your association to verify your user name and password.

Problem: When I'm entering data, it's very slow response after I press the tab key to move to the next field.

Solution: Try using Netscape Navigator or Netscape Communicator instead of Internet Explorer (IE). Later versions of IE, 5.0 and higher are typically faster than older versions. If you are still experiencing slow response times, it may be that you are connected to the Internet with a modem and it takes time for the information to transfer back and forth from the server. Contact your Information Technology department (if your hospital has one) and see if they can speed things up for you.

Data Entry

Problem: When I am entering data, I can't see all the fields of the input form.

Solution: Use the slider bar at the bottom of the browser screen and slide it to the right to view all the data entry fields. You can also adjust the width of your fields in **Step 1**. Described on page 13 of the data entry process.

Problem: After I enter my data on the Charges screen, my computer locks up.

Solution: It may be that you are entering decimal places. Try entering only whole numbers. When this happens, reboot your computer and try it again. If it still locks up, check with your IS department and have them check your computer to see if it meets the minimum requirements.

Problem: I've entered my **Utilization**, **Charges** and **Operating Expenses** but my hospital still appears on the **Missing Report**.
Solution: Your data is not complete until you have submitted all four forms of the Income Statement data entry submission process. Once you have done so, run the report again and it will not appear on the Missing Report but it will appear on the Participation Report.

Problem: The data I entered for my hospital a few months ago is incorrect. How do I make my corrections to the data?
Solution: In Step 2. of the data entry process (described on page 13), just select the month and move to the field and enter the correct numbers. If these are financial numbers that affect the operating and total margins, you should verify that these match your numbers. If you don't view the margins, the numbers calculate even though you don't view the fourth screen with the margins.

Reports

Problem: When I run a report with peer groups, I don't see any numbers in the peer group columns.
Solution: This means that that the peer group thresholds have not been met for that month or time period. To find out what the peer group thresholds are for the peer groups in your state, call your association.

Your other option is to try an earlier **Start Date**.

Problem: How do I know which hospitals are included in the peer groups listed on my Monthly or Comparative Reports?
Solution: The Participation Report lists the hospitals in each of the standard peer groups.

Problem: When I run a report in PDF format, I don't see a report.
Solution: Download and install Adobe Acrobat Reader. Go to www.databank.org and click on the yellow, "**Get Acrobat Reader**" button. If you need assistance with this process, contact your IS staff.

If you need the report right away, just change the format to **HTML** in the dropdown **Format** box (described on page 17). You can print this report but it won't have the nice formatting of the PDF reports.

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Glossary of Terms

- **Browser:** A *Client* program (software) that is used to look at various kinds of Internet resources. Usually Microsoft's **Internet Explorer** or Netscape's **Communicator** or **Navigator**.
- **CHA:** Colorado Health & Hospital Association
- **Cookie:** The most common meaning of "Cookie" on the Internet refers to a piece of information sent by a Web *Server* to a Web *Browser* that the Browser software is expected to save and to send back to the Server whenever the browser makes additional requests from the Server. Depending on the type of Cookie used, and the Browser's settings, the Browser may accept or not accept the Cookie, and may save the Cookie for either a short time or a long time. Cookies might contain information such as login or registration information, online "shopping cart" information, user preferences, etc. When a Server receives a request from a Browser that includes a Cookie, the Server is able to use the information stored in the Cookie. For example, the Server mightcustomize what is sent back to the user, or keep a log of particular user's requests. Cookies are usually set to expire after a predetermined amount of time and are usually saved in memory until the Browser software is closed down, at which time they may be saved to disk if their "expire time" has not been reached. Cookies do not read your hard drive and send your life story to the CIA, but they can be used to gather more information about a user than would be possible without them. *(DATABANK does not use cookies)*
- **DSL:** (Digital Subscriber Line) - A method for moving data over regular phone lines. A DSL circuit is much faster than a regular phone connection, and the wires coming into the subscriber's premises are the same (copper) wires used for regular phone service. A DSL circuit must be configured to connect two specific locations, similar to a leased line. A commonly discussed configuration of DSL allows downloads at speeds of up to 1.544 megabits (not mega**bytes**) per second, and uploads at speeds of 128 kilobits per second. This arrangement is called ADSL: "Asymmetric" Digital Subscriber Line. Another common configuration is symmetrical: 384 Kilobits per second in both directions. In theory ADSL allows download speeds of up to 9 megabits per second and upload speeds of up to 640 kilobits per second. DSL is now a popular alternative to *Leased Lines* and *ISDN*, being faster than ISDN and less costly than traditional Leased Lines.
- **FASB:** Financial Accounting Standards Board
- **GAAP:** generally accepted accounting principles
- **Gigabyte:** 1000 or 1024 *Megabytes*, depending on who is measuring
- **HTML:** (HyperText Markup Language) - The coding language used to create *Hypertext* documents for use on the *World Wide Web*. HTML looks a lot like old-fashioned typesetting code, where you surround a block of text with codes that indicate how it should appear. Additionally, in HTML you can specify that a block of text, or a word, be linked to another file on the Internet. HTML files are meant to be viewed using a *World Wide Web browser* program, such as *Netscape* or *Microsoft IE*.
- **IE:** Microsoft Internet Explorer

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- **Internet (Upper case I)** - The vast collection of inter-connected networks that all use the TCP/IP protocols and that evolved from the *ARPANET* of the late 60's and early 70's. **internet:** (Lower case i) Any time you connect 2 or more *networks* together, you have an internet - as in inter-national or inter-state.
- **Intranet:** A private *network* inside a company or organization that uses the same kinds of software that you would find on the public *Internet*, but that is only for internal use. As the Internet has become more popular, many of the tools used on the Internet are being used in private networks; for example, many companies have web servers that are available only to employees.
  Note that an Intranet may not actually be an [internet](#) - it may simply be a [network](#).
- **ISDN:** (Integrated Services Digital Network) – A way to move more data over existing regular phone lines. It can provide speeds of roughly 128,000 bits-per-second over regular phone lines. In practice, most people will be limited to 56,000 or 64,000 bits-per-second.
- **ISP:** (Internet Service Provider) - An institution that provides access to the Internet in some form, usually for money.
- **Login:** Noun or a verb. Noun: The account name used to gain access to a computer system. Not a secret (contrast with *Password*).
  Verb: The act of entering into a computer system, e.g. *Login to the DATABANK Web Site and then click on Utilization.*
- **LOS:** length of stay
- **LTC:** long term care
- **Modem:** (MOdulator, DEModulator) - A device that you connect to your computer and to a phone line, which allows the computer to talk to other computers through the phone system. Basically, modems do for computers what a telephone does for humans.
- **M.P.M.:** Medicare Payment Method
- **Netscape**: A *WWW Browser* and the name of a company. The Netscape (tm) browser was originally based on the *Mosaic* program developed at the National Center for Supercomputing Applications (NCSA).
  - Netscape has grown in features rapidly and is widely recognized as the best and most popular web browser. Netscape Corporation also produces web *server* software.
  - Netscape provided major improvements in speed and interface over other browsers, and has also engendered debate by creating new elements for the *HTML* language used by Web pages -- but the Netscape extensions to HTML are not universally supported.
  - The main author of Netscape, Mark Andreessen, was hired away from the NCSA by Jim Clark, and they founded a company called Mosaic Communications and soon changed the name to Netscape Communications Corporation.
- **Password:** A code used to gain access to a locked system. Good passwords contain letters and non-letters and are not simple combinations such as *virtue7*. A good password might be: Hot$1-6
- **PDF:** Portable Document Format
- **SNF:** skilled-nursing facility

- **SSL:** (Secure Sockets Layer) - A protocol designed by Netscape Communications to enable encrypted, authenticated communications across the Internet.
  SSL used mostly (but not exclusively) in communications between web *browsers* and web *servers*. *URL*'s that begin with "https" indicate that an SSL connection will be used.
    - SSL provides 3 important things: Privacy, Authentication, and Message Integrity.
    - In an SSL connection each side of the connection must have a *Security Certificate*, which each side's software sends to the other. Each side then encrypts what it sends using information from both its own and the other side's Certificate, ensuring that only the intended recipient can de-crypt it, and that the other side can be sure the data came from the place it claims to have come from, and that the message has not been tampered with. ***The DATABANK Web Site uses the SSL protocol.***
- **T-1:** A *leased-line* connection capable of carrying data at 1,544,000 *bits*-per-second. At maximum theoretical capacity, a T-1 line could move a *megabyte* in less than 10 seconds. That is still not fast enough for full-screen, full-motion video, for which you need at least 10,000,000 bits-per-second. T-1 is the fastest speed commonly used to connect *networks* to the *Internet*.
- **URL:** (Uniform Resource Locator) -- The standard way to give the address of any resource on the Internet that is part of the World Wide Web (WWW). A URL looks like this: http://www.matisse.net/seminars.html or telnet://well.sf.ca.us etc. The most common way to use a URL is to enter into a WWW browser program, such as Microsoft Internet Explorer or Netscape.
- **WWW:** (World Wide Web) - Frequently used (incorrectly) when referring to "The Internet", WWW has two major meanings - First, loosely used: the whole constellation of resources that can be accessed using *Gopher, FTP, HTTP, telnet, USENET, WAIS* and some other tools. Second, the universe of hypertext servers *(HTTP servers)*, which are the servers, that allows text, graphics, sound files, etc. to be mixed together.

Thank you for your participation and support of the DATABANK Program!