

# THE Remington Report

## INDUSTRY INSIGHT REPORT

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### Home Health Innovations In Motion

▶ Smart Solutions ... For Better Outcomes

# Attention Home Health Leaders: Work Smarter, Not Harder!

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With healthcare reform, regulatory changes and home health innovations in motion, it can be challenging for leaders to understand and align multiple initiatives, and then decide which areas to focus on. Outcomes, patient experience, five stars, value based purchasing, quality, compliance, performance, cash flow – the list goes on and on. Where do you start? What if there was a way to impact more than one focus area at a time so you can work smarter and not harder?

While reviewing your overwhelming “to do” list, organizing priorities into two project categories which have overlapping goals can be very helpful. By doing this, you are creating an opportunity for a consolidated work plan, with an organized tool box, helping you to achieve efficiencies and save time. The first project category is *Outward Focus*, which includes outcomes, patient experience, five stars, and value based purchasing. The second project category is *Internal Focus*, which includes quality, compliance, performance and cash flow. With a simultaneous balance in both areas, your agency is on its way to being strong, valued and sustainable.

The *Outward Focus* category requires internal strategies to achieve goals. Amidst your many challenges, you are no doubt concerned about your Five Star rating made visible by the Centers for Medicare and Medicaid Services (CMS) last July. On the tail of this change, CMS launched the Home Health Value Based (HHVBP) Model, which is being piloted in nine states since January. All indications are that HHVBP will be strategically rolled out to all states. Were you aware that all but one of the star rating measures (timely initiation of care) are included in the HHVBP measures? By strategically working toward improving your star ratings, you will be preparing for HHVBP.

When CMS expands this program nationally to achieve the Triple Aim of high quality care, improved patient experience, and lower cost – you can be ready. By organizing your efforts you are simultaneously impacting your outward scorecard and improving your position for being paid for value at the same time. Through dashboard data from CASPER, Home Health

Compare, HHCAHPS and your OASIS scrubber, you can work smarter and not harder. Evaluation of this data can help you focus your energies in areas that will strategically make the most difference. Once you determine your focus areas, you can identify and direct short, effective improvement cycles using a PDSA quality improvement process.

In addition to *Outward Focus*, your tool box for *Internal Focus* must also be as efficient and directed as possible. Monitoring and improving quality, compliance, performance and cash flow are often cumbersome and seemingly uncoordinated. Consistently, agency leaders describe these efforts as including a paper auditing process, completed within agency departmental silos. Duplicate efforts with disconnected data contribute to inefficiency, increased cost, lost time and lost opportunities for improvement.

There is a way to reduce redundancy, automate the paper process and connect/act on data. Improved efficiency starts by using, analyzing and re-purposing the data gathered when completing your mandated clinical record review. According to the Medicare Condition of Participation (CoP) 484.52, clinical record review is required quarterly (at a minimum) to determine compliance with the CoPs and agency policies. Imagine how efficient it would be to use this data to measure quality and compliance, assess case manager performance, and track cash flow through effective billing. Streamlining could offer a tremendous opportunity for increased productivity and improved performance.

Efficiency, improvement and standardization in staff documentation are common themes throughout this process, making web-based automation appealing and preferable. A new tool called SMARTAUDIT™ is the first web-based platform that audits and analyzes Medicare (CoP) compliance. By transitioning paper auditing to web-based automation, SMARTAUDIT increases efficiency, saves time and reduces cost. SMARTAUDIT identifies areas of non-compliance in real time enabling home health and hospice agencies to identify deficiencies immediately and develop focused and timely corrective action plans to avoid costly penalties. This automated

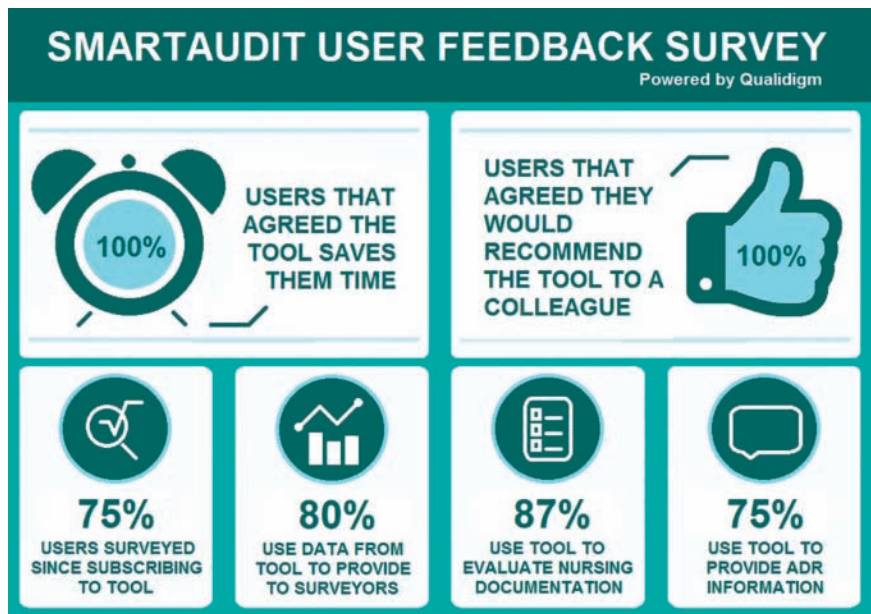


clinical record review process can glean efficient data collection and identify focus areas across multiple departments.

A recent survey of Home Health leaders using SMARTAUDIT revealed their satisfaction with survey readiness, time savings and improved clinical and billing documentation performance.

In addition, the tool offers standardization and educational opportunities through an efficient hyperlink to the Federal Register for each question as it relates to a corresponding CoP. Having this information at your fingertips can save time and frustration and becomes the basis for your plan of correction. The tool offers a focused audit capability and free text option allowing you to customize and drill down data to monitor real-time progress with performance improvement plans. Whether you're focusing on case manager performance or billing/cash flow efficiencies by addressing ADRs and RAC audits, SMARTAUDIT provides the platform to accomplish your goals. Adding SMARTAUDIT to an immediate plan of correction for deficient findings is like having a consultant with you on site to help you navigate these challenging waters.

Given the challenges that have been thrust upon home health in recent years, agency leaders must be focused and efficient to address multiple priorities. Thankfully, there are tools available to help. The first step is to organize your efforts and then use available resources and efficiency tools to accomplish your goals. SMARTAUDIT can help your *Internal Focus* to achieve desired outcomes efficiency across all departments. The tool can also function as a complement to your *Outward Focus*, adding value to your star rating / HHVBP efforts and other



outcomes based software, to facilitate regulatory compliance and quality outcomes. Through your leadership, each department and role within the agency can use the audit data retrieved once, to positively impact performance within the scope of their role and responsibilities. This saves time – working smarter, rather than harder, to efficiently drive success.

As an agency leader, you are charged with countless priorities. With more changes on the horizon, with HHVBP expanding, revised CoP's and OASIS C2, the time to act is now. You can coordinate and achieve your goals through automation, integration and data analysis. Your focus will result in improved outcomes, patient experience, star rating, value based purchasing, quality, compliance, performance and cash flow. Being time challenged, your agency can achieve sustainable growth with lower risk with a simultaneous and efficient balance in both your *Outward and Internal Focus* areas.

