

**So Much More
Than Just a
Documentation Issue**



- 30 year Home Health clinician/contractor
- 30 years Geriatric Rehab
- Home Health consultant, author, speaker
- Progressive programming/clinical delivery
- Progressive management systems
- Home Health coach/educator




**Medicare
Home Health**




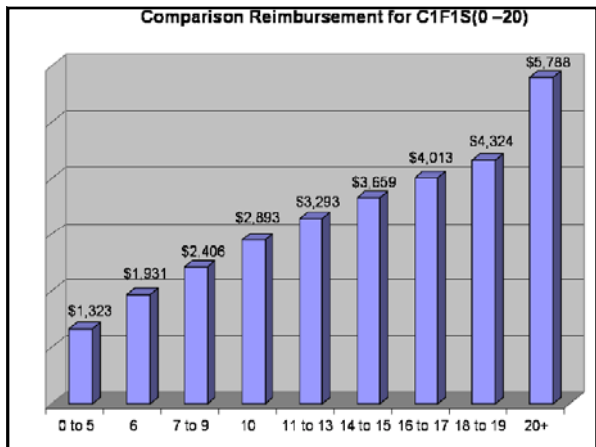
Future Changes?

- 2012 PPS Reforms
- Post-Acute Bundling
- Accountable Care Organizations
- Increased populations
- Shorter programs
- Emphasis on efficiency



2008 PPS REIMBURSEMENT





AUDIT / DENIAL FINDINGS




Audit / Denial Findings

- Improper med management
- Lack of objective OASIS ADL deficits for therapy
- Incomplete visit care delivery
- Early goal achievement
- Poor potential programs
- Orthopedic protocols



Audit / Denial Findings

- Plateau in progress
- Contradictory documentation
- Lack of post-SNF clinical needs
- Lack of OT focus
- Reasonable & Necessary
- Previous episodes
- Unnecessary Programming



The Lucky 7

Top 7 Home Health Care Compliance Risks for 2011




The Lucky 7

- Increased "Heat" Activity & Enforcement
- ZPIC/PSC/RAC
- Electronic Medical Records
- HIPAA/HITECH Privacy Violations
- Increased Over-payment Risk
- Employee Screening
- Payment Suspensions: ZPIC




2011 PPS FINAL RULE



FINAL 2011 CHANGES

- \$960 Million Funding Reduction
- Case Mix Changes
- Hypertension Change Rescinded
- Market Basket Update Reduction
- LUPA Alterations/Rural Add-ons
- Face to Face Requirements




FINAL 2011 CHANGES

- Enrollment/Ownership Limitations
- Quality Data Reporting
- Non-routine Medical Supplies
- Physician Certification
- Outlier Limits
- Therapy Coverage Requirements



THERAPY CHANGES - 2011

- Objective Eval Findings
- Objective Documentation Requirements
- Re-eval Requirements
- Transient Decline Non-coverage



OBJECTIVE EVAL FINDINGS

- Objective Tests & Measures
- Established At Evaluation
- Related to Functional Decline
- Easily Measurable



OBJECTIVE DOCUMENTATION

- In-episode Objective Documentation
- Measurable Progress Referenced to Evaluation Findings
- Focused Care Delivery



DOCUMENTATION STRATEGIES

- HEP w compliance & progression
- Caregiver involvement
- Skilled progression – esp. gait
- Eliminate high-level endurance
- Focus on function



RE-EVAL REQUIREMENTS

- Various re-evals during Episode
- 13th and 19th Visits
- 30-day Requirement
- Must re-establish Clinical Program and Potential



RE-EVAL STRATEGIES

- Weekly schedules in advance
- Scheduler responsible for count
- Therapists must validate schedule
- Continuation must address compliance, HEP, skilled program



2011 G-CODES

- G-Code 1 PTA
- G-Code 2 OTA
- G-Code 3 Maintenance by qualified PT
- G-Code 4 Maintenance by qualified OT
- G-Code 5 Maintenance by qualified STP



HOME HEALTH MANAGEMENT




HOME HEALTH MANAGEMENT

- Clinical Content
- Clinical Volume Utilization
- Care Delivery
- In-episode Management
- Schedule Control
- Productivity



CLINICAL CONTENT

- OASIS-based care
- PPS-based Programs
- Best practice care delivery
- Realistic clinical goals
- Expected and achieved clinical outcomes



CLINICAL VOLUME UTILIZATION

- Reliable Start of Care/Evaluation
- Home Program first visit
- OBQI-focused care
- Contemporary frequency/duration orders
- Contemporary program awareness



CARE DELIVERY

- Skilled progression
- Caregiver involvement
- Mandatory compliance
- Documentation for coverage
- Flexible program volumes



IN-EPISEODE MANAGEMENT

- Weekly clinical rounds
- Programming content
- Ongoing skill/OBQI-focus
- CMS coverage content



SCHEDULE CONTROL

- Weekly schedules – prior Friday
- Productivity
- Assertive scheduling
- Clinical responsibility to maintain current schedule in office
- Ongoing caseload management



PRODUCTIVITY

- Major concern in most agencies
- Travel, SOC vs Routine visits
- Missed visits/delayed care
- Patient cancellations
- Co-morbidities
- Traditional programming habits




OPERATIONAL OVERVIEW – SUCCESS IN 2011




Operational Overview

- SOC UR Control for all episodes
- Staff Productivity – Management/Clinical
- Back office efficiency
- Clinical control & responsibility
- Clinical content management
- Clinical staff management



Operational Overview

- Future refinement awareness
- Progressive programming
- Heightened care-delivery
- Focus on outcomes
- Identify success in objective clinical terms for survival



Administrative

- Insight into current/future CMS or MedPac initiatives
- Working knowledge of fiscal issues
- Clinical contemporary content
- Terms of success in Home Health
- Success-based mandate for Home Health directives



Supervisory

- Insight into current PPS clinical/program requirements
- Connection to CMS mandated care content and volumes
- Skill in clinical staff management and control
- Ability to elicit successful outcomes



Fiscal

- Working knowledge of PPS-based finances
- Experience with audit-era scrutiny levels
- Insight into other provider fiscal protocols
- Knowledge of future CMS changes
- Connection to clinical requirements




Clinical

- What is our clinical DNA?
- Why Homecare?
- Efficiency? Productivity? Manageability?
- Experience – Does it help or hurt?
- Point of Care, progressive programming, MD education, patient-caregiver compliance




Home Health Success

- Productive and Successful staff
- Efficient care
- Satisfied patients, caregivers, physicians
- Good/Excellent clinical outcomes (OBQI)
- Decreased re-hospitalizations
- Financial health



CLINICAL MANAGEMENT SYSTEMS FOR 2011



SERVICE UTILIZATION REVIEW for CARE in the HOME (S.U.R.C.H.)



S.U.R.C.H.

PLAN OF CARE

Create clinical expectations for programming based on QA identified clinical concerns or deficits – share expectations with front line clinical staff prior to care initiation.

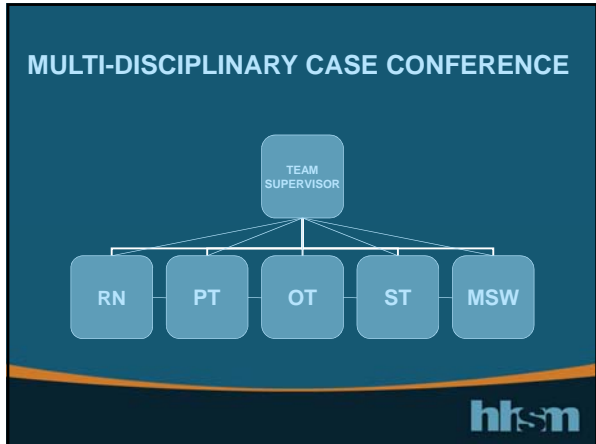


OBQI CASE CONFERENCE



CASE CONFERENCE FORMATS









- ### CONFERENCE DIALOGUE
- Objective Findings/Programming
 - Skilled Care Plan
 - Skilled Programming
 - Home Program/Compliance/Caregiver
 - Clinical Education
 - Skilled Progression/Documentation
 - Skilled Discharge/Care completion
-

Critical Steps in Efficient Therapy Production



- ## Critical Steps
- OASIS-based referrals
 - Skilled Evaluation
 - Care Plan Production
 - Frequency/Duration
 - Compliance
 - Caregiver Participation
- 

- ## Critical Steps
- Routine Visit Skill
 - Skilled Progression
 - Skilled Documentation
 - Re-evaluation
 - Discharge/Post-discharge
- 

OASIS-based Referrals

- Start of Care Reliability
- Consistent Programming Approach
- Deficit Based Care
- Focus on Function, Safety and Outcomes



Skilled Evaluation

- Experience-based Plan of Care
- Objective Tests and Goals
- Functional/Patient Identity to Program
- Initial Home Program
- Caregiver Involvement



Care Plan Production

- Objective Test-based
- Focus on Clinical Issues
- Progress to Functional Focus
- Compliance via Home Program
- Improvement Between Visits



Frequency/Duration

- Proportion of Intensity Based on Declines
- Safe vs. Unsafe Ambulation
- Fluent Understanding of PLOF
- Missed Visits or Frequency Denials



Compliance

- Based on Clinician Level of Skill
- Interprets Value of Home Episode
- Caregiver Can Play a Role
- Noncompliant Means Nonpatient



Caregiver Participation

- From First Visit
- Demo Compliance During Routine Visits
- Connect to Progression or Lack of
- It's a Team Effort



Routine Visit Skill

- Eliminate Wasted Time
- Reproduce Home Program
- Progress When Possible
- Transfer/Skill/Gait Progression
- Address Lack of Progression



Skilled Progression

- Demo Between Visit Compliance
- Find Where to Move Forward
- Engage Client with Progress to Date
- Employ Progress to Prompt Further Care



Skilled Documentation

- Prove it to Me
- Objective in Consistent Entries
- Clear and Legible
- Defendable as Reasonable & Necessary



Re-evaluation

- Prove Skilled Delivery to Date
- Prove Compliance to Date
- Demo Patient Improvement
- Validate Continuation, Change of Course, Discontinuation



Discharge/Post-discharge

- Compliance Post-discharge
- Progression Post-discharge
- Address Frequent Fliers
- Post-discharge Home Programs



HOME HEALTH THERAPY MANAGEMENT

2011 & BEYOND



Therapy Management

- Programming Content
- Therapy Utilization
- Care Delivery
- In-episode Management
- Schedule Control
- Productivity




Programming Content

- OASIS ADL-based Therapy
- Function-based Programs
- Objective tests/measures
- Clinical/Functional goals
- Expected and reasonable clinical outcomes



Therapy Utilization

- Progressive/skilled evaluations
- Home Program first visit
- OBQI-focused care
- Contemporary therapy frequency/duration orders
- Re-evaluation requirement awareness



Care Delivery

- Skilled progression
- Caregiver involvement
- Mandatory compliance
- Documentation for coverage
- Flexible program volumes



In-episode Management

- Weekly clinical rounds
- Programming content
- Ongoing skill/OBQI-focus
- Re-evaluation compliance
- CMS coverage content
- Therapy grid




Schedule Control

- Weekly schedules – prior Friday
- Productivity
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Productivity

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WHAT IF THE PATIENT WAS YOUR AUNT?



Home Health Strategic Management

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