

HHFMA Update with the Experts Benchmark of the Month:

- **Days to RAP/Final**
- **Staff Productivity**

November 21, 2018

Benchmark Summary

Days to RAP/Final

- **National Benchmark – 485 agencies**
- **Home Health Medicare only**
- **Calculation**
 - **Days to RAP – number of days between episode start date and RAP billed date**
 - **Days to Final – number of days between end of episode and final claim billed date**

Benchmark

- Industry Benchmarks (as of 12/31/17)
 - Days to RAP – 10 days
 - Days to Final – 14 days

*Benchmark source – Simione Financial Monitor

Potential Impacting Issues

- **RAP metric could be impacted by delays in:**
 - OASIS completion
 - SOC paperwork
 - Visit verification for initial episode visit
 - Billing schedule
- **Final claim metric could be impacted by:**
 - Unsigned 485/orders
 - Incomplete face-to-face documentation/requirements
 - OASIS submission/acceptance issues
 - Delays in visit verification
 - Discharge completion
 - Billing schedule

CMS Analysis

- 2019 Proposed Rule cites the below chart in CMS' analysis of provider RAP submissions
- This could potentially be a factor in CMS' long-term planning for RAPs under PDGM

Percentile	Number of days from the start of care to initial RAP submission
1	1
10	5
25	8
50	12
75	21
90	36
95	57
99	169

Source: Analysis of CWF data from July 1, 2015 through July 31, 2016 and HIGLAS payments and recoupments.

Benchmark Summary

Home Health

Productivity

- **National Benchmark – 485 agencies**
- **Home Health**
- **Calculation**
 - **Unweighted Visit Methodology**
 - **40 hour work week**

Home Health Productivity

Discipline	Productivity Visits Per Day
Skilled Nursing	4.6
Physical Therapy	5.4
Occupational Therapy	5.3
Speech Therapy	4.6
Medical Social Worker	3.7
Home Health Aide	4.9

Data Source: Simone Financial Monitor December 2017

Productivity

- **Technology/IT**
 - **Field Staff Training**
 - **Remote EMR updates**
 - **HIPPA secure messaging**
 - **WiFi Hot Spots, Tethering devices**
 - **Updated Hardware and cell phones**
 - **Outsource IT support via phone or online**
 - **Provide back up laptops**
 - **Clinical super users may carry less of a case load.**

Productivity

- **DME & Supply Ordering**
 - Easily and accessible for clinician in the field
 - Review what works best with current EMR
- **Teams**
 - Make sure teams are based on geography for scheduling purposes
- **Mileage/Transportation**
 - Mileage Softwares
 - Fleet Cars, etc.
- **Scheduling**
 - Geography
 - Start of Care vs Routine Visit

Productivity

- **What are the pitfalls of increasing productivity?**
 - **Incentives which reward the number of visits without considering outcomes**
 - **Cutting corners on patient care**
 - **Increased need for care**
 - **Readmissions to home care**
 - **Re-hospitalizations**
 - **Emergency room visits**
 - **Late documentation and unclosed visits**
 - **Impact on patient or consumer satisfaction**