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Tracking various data has become a common strategic tool for home health providers. In the process of examining data closely, providers have seen several stories emerge.

Intrepid USA is tracking data in a number of different areas, but namely in labor utilization.

While tracking labor utilization – particularly visits per episode and trend lines relative to labor dollars per patient census – Intrepid was able to see certain pain points come into full view.

What’s more, the company was able to discover the story behind why these challenges were occurring in the first place.

“You sit there and you go, ‘Why does this location have such higher labor dollars than other ones,’” John Kunysz, president and CEO of Intrepid USA, told Home Health Care News. “What you can find out is that you have inefficiencies in the way you’re deploying your labor. Maybe they’re using too many PRNs, or they have too many contract nurses, and clinical resources there that are skewing their labor dollars.”

Intrepid USA is a Dallas-based home health and hospice provider with more than 60 locations across 17 states.

Getting the story behind these findings is especially important because labor represents more than 50% of Intrepid’s costs within the company’s home health and hospice business, according to Kunysz.

“It’s the one where you can get out of control real quickly on your profitability,” he said.

Like Intrepid, VNS Health also tracks a variety of data. One set of data that has been a big area of focus for the company are patient outcomes.

“Based on our assessment at the start of care, we apply different interventions to help patients improve from their baseline,” Catherine Schaefer, associate vice president of quality assurance and performance improvement at VNS Health, told HHCN. “We monitor that at the patient level, and then we’re able to aggregate that data and look at it agency wide. We can align that data with different patient characteristics, like certain types of diagnoses and comorbidities. How many times the patient has been in the hospital, for instance. It gives us a lot of insight into our patient population.”

New York-based VNS Health is a full-service home health care organization. The company has almost 40,000 patients in its care on any given day.

The insights that VNS Health gathers from this data helps its clinicians determine what interventions to apply in order to see patient improvement.

A few years ago, VNS Health discovered some of their clinicians didn’t have a solid understanding of how to answer OASIS questions. The company has an analytics platform that generates alerts for inconsistencies in the assessment data.

This led to VNS Health implementing a targeted performance improvement project, according to Schaefer.

“We extracted that data,” she said. “We analyzed it. We identified this select group of clinicians, and then we conducted targeted re-training. We brought them in and we had classroom training. We had some people go out on co-visits with them, and provide coaching and more education. Because of that intervention, we were able to move our quality of care star ratings from three stars to four and a half stars.”

Data awareness

Frontpoint Health is a self-described “data thirsty company.”

“We want to be the most data-driven home health and hospice organization in the country,” Frontpoint Health CEO Brent Korte told HHCN in an email.

Dallas-based Frontpoint Health is a home health and hospice provider that specifically goes after Medicare Advantage (MA) patients.

The data topics Frontpoint Health looks at include quality of care, clinician production, back office support, patient experience, financial numbers and insurance and billing proficiency.

In general, data has helped Frontpoint Health shine a light on some weaknesses. For instance, when digging into Medicare financial data, PDGM emerged as a weak spot for the company.

“When we looked at our data, comparing it to industry benchmarks, we were somewhat behind in PDGM,” Alex Van Gundy, manager of data and business analytics at Frontpoint Health, told HHCN. “Being mainly a Medicare Advantage provider, we didn’t have as much experience with PDGM. We figured we could probably have the biggest impact in educating our staff on that model.”

Gundy believes that having data allows the company to be proactive, versus reactive, in its decision making.

Similarly, Kunysz pointed out that many view data through a retrospective lens.

“You should be tracking data and metrics that are, what I call, real-time metrics,” he said. “Data that is predictive of future results versus indicative of past performance. At the speed with which we have to adapt and adjust — the different kinds of patient mixes and labor utilization, and just the availability of limited resources and thin margins — you have to be really efficient and proactive.”

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