HomeCare®

FEBRUARY 2021

THE LEADING BUSINESS RESOURCE FOR HME & HOME HEALTH PROFESSIONALS

HOMECAREMAG.COM

WHAT'S YOUR PLAN?

3 strategies for getting the best out of your business in 2021

HME
Is a call center right for you?

IHC
Why digital communities matter

+ SPOT & STOP ELDER ABUSE

Split Decisions?

Sleep better together.

Signature Series

Large selection of headboard and foot board styles available in wood, metal and upholstery.

These images show the Hi-Low adjustable base <u>without</u> the mattress. Several mattress choices are available.

Signature Series' Split-King operates Hi-Low and Articulation features independently.

Platform Series

Padded side assist rails are available for help getting in and out of bed.

The Hi-Low feature, on all series, allows a 10" adjustment of the mattress height.

Platform Series' Split-King offers all great features and allows low 17" transfer height.

Mobile Series

Each bed side has an individual remote to control articulation and mattress height.

Articulation elevates knee section up to 40 degrees. The head section elevates up to 70 degrees.

This custom Mobile Series Split-King's units can physically split and separate from each other.

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ASSURED
COMFORT®
ADJUSTABLE BEDS

All beds are made to your specifications in Bassett, Virginia. Hundreds of bed combinations are available!

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Check 104 on index.

Dear HomeCare Readers,

Just before press time, Joseph R. Biden Jr. was sworn in as 46th president of the United States. It's a time of enormous change in Washington, including a shift in party power, and that could affect the homecare industry in many ways. In the coming months, we'll be keeping a close eye on the actions of lawmakers and regulators in order to keep you in the loop.

In general, the best way to be prepared for uncertainty is to have a plan. Our cover series this month offers three different approaches to planning for your business from experts in sales, small business administration and organizational transformation. You could pick one focus or combine all of them to find a strategy for success as we continue in the pandemic and hopefully emerge from it.

One change we know is coming is that more people will be vaccinated against COVID-19 in the coming weeks. Many of you may have already gotten your shot (or shots) as health care providers. Some may be encouraging your team to get on board. Others may be waiting because some locations have run into distribution snags. Still others may be helping senior clients who are eligible for the vaccine but trying to navigate complex online sign-up systems and shifting rules. Check out some updates we've gathered on page 6 that might be helpful.

We're discussing our travel calendar for 2021 and hoping to be able to see some of you soon. Meanwhile, stay safe out there.

Thank you for reading,

Hannah Wolfson

BE HEARD

We want to know what you think and how we can serve you better. Send your comments and feedback to Managing Editor Kristin Easterling at keasterling@cahabamedia.com. We'd love to hear from you!

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VOLUME 43 NUMBER 2

HomeCare
The Leading Business Resource for HME & Home Health Professionals

Senior Engagement Technology Can Improve Your Bottom Line

Discover options for growing market share & improving patient quality of life

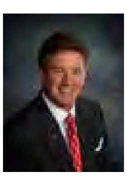
Tuesday,
February 16
2 p.m. Eastern

There's an epidemic of isolation among seniors—and a pandemic has made the problem worse. Fighting loneliness helps with patients' quality of life and keeping them connected can improve outcomes. But introducing new technology can have hurdles. In this webinar, you will learn about how bringing simple, affordable senior engagement options to your clients can make your team's job easier and help you capture more market share.

This webinar will help you:

- Discover a bedside technology option that reduced staff stress by 20% in a university study
- Learn how evidence-based senior-friendly technology can improve patient outcomes
- Understand how you can support virtual care for your patients, especially during COVID-19 restrictions that may prohibit in-person care

Presented by:



J. BENJAMIN "BEN" UNKLE, JR.
Chief Executive Officer
Westminster-Canterbury on Chesapeake Bay
and Senior Options LLC

Since Ben Unkle became CEO in 2009, WCCB has grown to serve over 8,500 people through its expanded home and community-based services. The organization is a leader in exploring digital engagement tools as a way to raise the standard of care nationally. Under its award-winning Birdsong Initiative, WCCB formed a partnership with Eastern Virginia Medical School and Virginia Wesleyan College to conduct a series of rigorous academic studies on the impact of increased engagement via technology upon the mood and mind of people suffering with dementia.

Before joining WCCB, Unkle was senior vice president of operations for the western region of Erickson Living, including eight Erickson Life Plan Communities in Texas, Kansas, Colorado, Illinois and Michigan. He started out practicing law before joining the senior living industry through Erickson Living's Executive Development Program.

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FEBRUARY 2021

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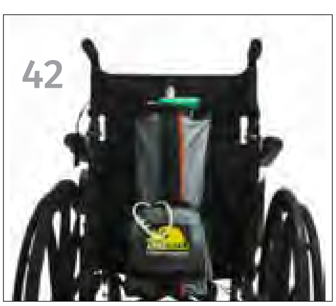


IN EVERY ISSUE

MARKET-LEADING PRODUCTS

INDUSTRY NEWS

Interim HealthCare Names Therapist of the Year

Interim HealthCare Inc., a national franchise network of homecare, senior care, home health, hospice and health care staffing services, has named physical therapist Ethan Sowell 2020 Therapist of the Year. Sowell earned widespread appreciation from patients and leaders for his commitment to delivering compassionate care and supporting the mission of Interim HealthCare of the Upstate in South Carolina.

The award is given to an individual who is determined to embody Interim HealthCare's core values of integrity, compassion and customer focus.

Physical therapists, occupational therapists, speech language pathologists, physical therapy assistants and certified occupational therapy assistants were all eligible for the award.

Since joining Interim HealthCare of the Upstate in 2018, Sowell quickly advanced to become a therapy lead. He also trains new therapists on home health care essentials, the importance of following orthopedic physician protocols and how to use the company's electronic medical record system.

This year, Sowell also helped patients and their families navigate the COVID-19 pandemic. This work included ensuring that a patient recovering from a brain tumor removal received the expert rehabilitation needed at home to prevent a transfer to a hospital or long-term care facility with higher infection risks.

interimhealthcare.com

317% **Google searches for "telehealth" surged by 317% in the United States after a the national public health emergency was declared March 13, 2020, according to a new report from OnlineDoctor.com.**

UPCOMING EVENTS

We want to make sure our readers know about upcoming event opportunities. Here is what is coming up in the next few weeks. Did we miss an event? Send info to keasterling@cahabamedia.com.

MAR 20–24 NHCPO Hospice & Palliative Care Leadership & Advocacy Conference
Virtual
nhcpo.org

APR 19 National Home Infusion Association Annual Conference
Virtual
nhia.org

APR 27–29 MAMES Spring Excellence in HME Midwest Conference
Des Moines, Iowa
mames.com

MAY 26–27 AAHomecare Washington Legislative Conference 2021
Washington, D.C.
aahomecare.org

Laiman Takes Reins at Merits

Mike Laiman has been named president of Merits USA and its sister brands Avid Rehab, Precision Comfort and Pilot.

Laiman, who is coming out of retirement to take on the position at Merits, has had a long history in the manufacturing industry, including time in aerospace manufacturing. Most notably, Laiman was with Pride Mobility for over six years as the senior vice president of operations.

"I'm excited to be here at Merits and back in the (durable medical equipment) industry," Laiman said. "It's always been a passion of mine to assist and improve mobility technology and improve quality of life."

meritsusa.com

ArchCare Launches Telehealth for PACE Participants

ArchCare, the Archdiocese of New York's health care system that cares for more than 9,000 seniors, economically marginalized people and those with special needs, announced that it will install MedSign's Qortex Telehealth System for all ArchCare Senior Life participants.

ArchCare Senior Life is a Program of All-inclusive Care for the Elderly (PACE), a community-based health care model created for people 55 and over who require nursing home-level care but prefer to receive it in their own home. Qortex is the first telehealth system that connects health care professionals to patients through their television set rather than via a computer or smartphone. The system was designed with seniors in mind for ease of use.

By allowing individuals to connect with doctors, nurse practitioners, nurses, social workers, therapists and other patient support personnel through their TV set at home, Qortex will enhance safety and well-being for ArchCare program residents and in turn reduce unnecessary emergency room visits and hospital admissions. The system also

As we go to print, the COVID-19 vaccine distribution is underway—and hitting snags in some locations. Here's a roundup of the latest.

Independent Pharmacies Key to Vaccine Distribution

Along with public health agencies, hospitals and national drugstore chains, independent pharmacies are gearing up to help vaccinate the masses, especially in rural areas.

Oswald's Pharmacy, a 145-year-old family-owned business in Naperville, Illinois, is just one of many community pharmacies that has signed an agreement with the federal government to provide the vaccine.

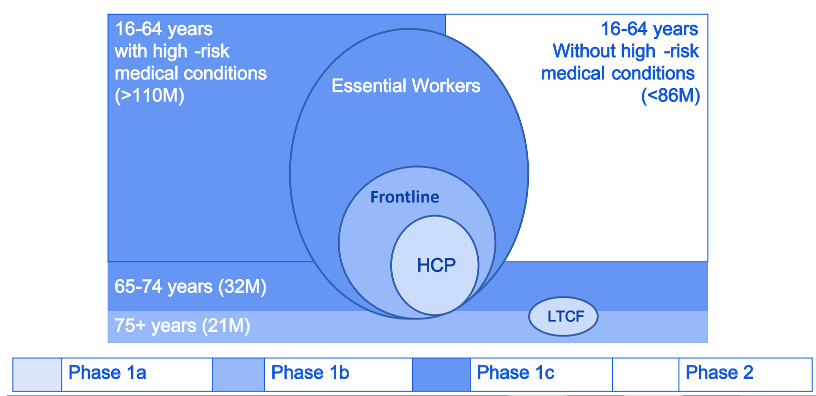
"Our pharmacy has done almost triple the number of flu shots this past year compared to last season," Bors told HomeCare. "I think if those numbers are any indication, I'm expecting that we will have a very high demand for the vaccine."

To meet demand, Oswald's owner Alex Anderson told HomeCare, the company:

- Plans to set up a sign-up page on its website, much as it has done for COVID-19 test appointments;
- Hopes to have at least three pharmacy techs become vaccine certified to help with demand; and
- Be a resource for community members with questions about the vaccine.

75% **of adults 65+ say they would definitely or probably get vaccinated, vs. 55% of those under 30, according to a Pew Research Center poll in December.**

Proposed Phases of COVID-19 Vaccination



#GetVaccinated & More

According to the Home Care Association of America, only about 34% of caregivers planned to get the COVID-19 vaccine. To help boost participation, several organizations have created awareness campaigns to encourage staff and patients to get the shot.

» The Centers for Disease Control and Prevention has released a COVID-19 Vaccination Toolkit for medical centers, clinics and clinicians, with tips for having effective vaccine conversations with patients and buttons and stickers for staff to wear, as well as explainers on the vaccine distribution plan.

» The Home Care Association of America offers caregiver-specific marketing tools (see button at left) to share vaccine info among caregivers and clients.

» The American Health Care Association and National Center for Assisted Living, representing more than 14,000 nursing homes and long-term care facilities across the country, launched a campaign to encourage long-term care residents and staff to get vaccinated against COVID-19.

allows video calls to be received through the television, which can reduce feelings of isolation and improve mental wellness.

ArchCare initiated a pilot program with MedSign in October 2020 in a number of PACE participant homes throughout the New York City area. Following positive data and survey results from the pilot, ArchCare Senior Life is now instituting an accelerated rollout. Specially trained MedSign technicians will install the Qortex system in the home of each ArchCare Senior Life resident and will teach the patient and their family members or caregivers how to operate the system using the easy remote control specifically designed for seniors.
archcare.org

13.6m

Number of people who had received one or more doses of the vaccine at press time, according to the CDC.

Drea Joins Axxess Leadership Team

Axxess, a provider of homecare technology, has hired private duty homecare expert Patricia Drea as senior vice president. Drea served a dozen years as chair of the board and chief operating officer at Visiting Angels and is a past chair of the National Association for Home Care & Hospice's Private Duty Home Care Association.

She has also been CEO of At Home Total Care, administrative director for homecare services at Tenet Hospital System's Piedmont Medical Center, and national director of provider relations for Staff Builders.
axxess.com

MERGERS & ACQUISITIONS

Jan. 4, 2021
CareXM Acquires TouchPoint Care

Jan. 4, 2021
Numotion Acquires Wheeler's Medical Supply

Jan. 6, 2021
Henry Shein, Inc. Acquires Prism Medical Products, LLC

Jan. 6, 2021
UnitedHealth Group Acquires Change Healthcare

Jan. 7, 2021
CareFinders Total Care Acquires ORI Homecare

Jan. 11, 2021
Thuasne Acquires Knit-Rite

Nori Joins NSM

National Seating & Mobility (NSM), a national provider of comprehensive mobility solutions, is pleased to announce the selection of Rick Nori as regional area director of Canada. Nori is the former vice president and general manager of KiMobility Canada, a key supplier partner to NSM.

Nori has 32 years of experience in the complex rehab and HME industries in sales and senior management positions. As regional area director, he will lead branch operations throughout Canada, replacing Darryl Mackie, who retired in January.

nsm-seating.com

Dina Announces Series A Funding Round

Dina, an artificial intelligence-powered care-at-home platform and network, announced that it has closed a $7 million Series A funding round led by Philadelphia-based Osage Venture Partners. Existing investors, strategic partners and Wheaton, Illinois-based First Trust Capital Partners, LLC also participated in the round.

Funding will be used to accelerate Dina's development of its care coordination platform and expansion of its national network to support the rapid transition to virtual and in-home care.

The company offers a category of solutions it refers to as "Care Traffic Control." It is designed to support hospitals and insurers as they shift from monitoring patients in hospital beds to monitoring patients at home and in other post-acute care settings.

Dina saw rapid growth in 2020 and increased revenue by 250%. Since the national COVID-19 health emergency was declared, it expanded its homecare network to 25 states, launched new digital products to remotely engage patients and homecare workers, and facilitated over 3.1 million "digital dialogues" to help providers manage symptoms and recovery.

dinacare.com

Sprockets Completes Venture Raise

Sprockets, a hiring- and workforce-related software as a service (SaaS) company serving the food service, health care and hospitality markets, announced the conclusion of a $3.4 million venture raise.

Due to growth before and during COVID-19, Sprockets showed strong demand from verticals dependent on the hourly workforce with high employee turnover. This raise sets the company up for significant expansion within its service markets.

Sprockets' Applicant Matching System evaluates potential hires based on the traits of a company's best employees to determine if they will be the right fit for the organization. There is no guesswork, frustration or high turnover. The company has already helped numerous franchisees of companies such as McDonald's, Chick-fil-a and HomeWell.

This round of investment included Lytical Ventures, Thayer Venture, Healthy Ventures and VentureSouth.

sprockets.ai

Medical Guardian Gets Growth Investment

Medical Guardian announced it has received a growth investment from Water Street Healthcare Partners, a strategic investor focused exclusively on health care. The company will leverage Water Street's deep expertise in health care and significant capital commitment to pursue acquisitions and organic initiatives that will further its expansion and aggressively grow its leadership position in the personal emergency response system (PERS) industry.

Geoff Gross, Medical Guardian's founder and CEO, chose to partner with Water Street to advance the company's strategic expansion. The financial terms are not being disclosed.

With the number of Americans aged 65 years and older increasing along with seniors' desire to live in their own homes as they age, demand for Medical Guardian's medical alert services continues to rise. The company has more than 160,000 active PERS subscribers across the country. Its products are fully integrated with customer support services, providing seniors with 24/7 protection and deploying emergency personnel if an alert is received.

Medical Guardian, which sells direct to consumers, has grown rapidly since its founding in 2005 and has been named to Inc. Magazine's Fastest Growing Private Companies list for the past eight years. Working with Water Street, Medical Guardian will invest in acquisitions and organic initiatives to expand its health care partnerships and channels and extend into complementary services.

medicalguardian.com

GET MORE NEWS

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How the Latest Spending Bill Affects You

HR 133

The $1.4 trillion omnibus spending bill passed December 2020 is more than 5,600 pages long. The bill worked to keep the government running and provided $900 billion in additional COVID-19 relief; it also contained these big wins for the homecare industry.

STATUS » **Became public law 116-260 on Dec. 27, 2020.**

By Kristin Easterling

Medicare Sequestration Moratorium

Medicare sequestration was suspended during the coronavirus public health emergency. HR 133 extended the moratorium on the 2% sequestration through March 31, 2021. The National Association for Homecare & Hospice (NAHC) estimates this will save home health and hospice agencies $90 million. The package also provides for a one-time 3.75% increase in the Medicare Physician Fee Schedule for 2021, according to an analysis by Jeffry Baird, chairman of the health care group at Brown & Fortunato. This amount adjusts the effects of the fee schedule budget neutrality rules and provides additional assistance by way of payment to physicians and other clinics.

Occupational Therapy

The package included the Medicare Home Health Flexibility Act (HR 3127/S 1725), which allows occupational therapists to perform the comprehensive assessment for a home health episode—a change the industry has lobbied for.

Hospice Legislation

Hospice provisions include several items that the industry has been working on over recent years, including hospice survey reforms and the Rural Access to Hospice Act, which will allow physicians and practitioners at rural health centers and federally qualified health centers to serve as the hospice-attending physician for patients served by such centers. The package has been modified to keep routine hospice survey frequency at once every 36 months and focuses increased scrutiny on problem providers.

Oxygen

The bill provided a fix to budget neutrality provisions included in the 1997 Balanced Budget Act. These provisions were causing rural providers to receive less compensation for oxygen products. During the COVID-19 crisis, regulatory action set rural reimbursement to a 50/50 blended rate. The new law provides a permanent legislative fix. The Congressional Budget Office estimates this will put $650 million back into the pockets of rural oxygen providers.

Provider Support Relief Fund Payments

The legislation provides additional relief to health care providers, including making additional investments in the Provider Relief Fund and clarifying policies related to certain aspects of the program. It provides:

- $3 billion in new resources for the Provider Relief Fund, bringing the total to $178 billion;
- The possibility for nongovernment-financed homecare, which had been omitted, to receive some of the funding;
- Additional certainty to providers by clarifying that payments made before Sept. 19, 2020, must be calculated using the Frequently Asked Question guidance released by the Department of Health and Human Services on June 19, 2020; and
- Flexibility for providers by clarifying that eligible health care providers may transfer all or any part of such payments among the subsidiary eligible health care providers of the parent organization.

Medicaid

The legislation extends a number of expiring Medicaid programs and:

- Requires state Medicaid programs to cover nonemergency medical transportation to ensure that beneficiaries who lack access to regular transportation are able to travel to their medical appointments;
- Enhances protections for beneficiaries receiving home-and community-based services by authorizing Medicaid Fraud Control Units to investigate fraud and abuse in noninstitutional settings;
- Extends protections against spousal impoverishment for partners of recipients of home and community based services for three years; and
- Extends funding for the Money Follows the Person rebalancing demonstration for an additional three years while making program improvements.

LEARN MORE » **Find a more in-depth analysis at homecaremag.com.**

HME: AUDITS

By Kelly Grahovac

When You're Under the Microscope

Dissecting an OCR investigation

The Health Insurance Portability and Accountability Act (HIPAA), was established to protect individuals' medical records and protected health information (PHI) through its privacy and security rules. Health care providers that receive reimbursement for claims from federal programs are considered covered entities and are responsible for compliance with HIPAA regulations. In doing so, covered entities typically have an established HIPAA compliance program.

The Office of Civil Rights (OCR) is the federal agency responsible for enforcing HIPAA privacy and security rules. The OCR conducts routine audits of covered entities and their business associates to ensure compliance with HIPAA, although most of its investigative efforts are the result of reported offenses and complaints.

In most instances, OCR investigations result in technical assistance being given to the covered entity or business associate, including education and information on the appropriate actions to take to protect patient PHI. However, there are some instances that result in corrective actions, such as the OCR entering into settlement agreements with the covered entity or business associate under review.

The OCR reports a steady annual increase of complaints about violations, from 21,404 received in 2016 up to 28,261 complaints entered in 2019. Covered entities can fall victim to an OCR complaint from both internal and external threats. Patients—or their caregivers—are most often the source of a complaint to the OCR if they believe their health information privacy rights have been violated. Invalid recipients of PHI could also report your organization or your business partners to the OCR if they believe that a violation of the Privacy, Security or Breach Notification Rules has occurred. Internally, current and former employees could report your organization to the OCR if they believe that a violation of the rules has occurred. An investigation may also be a result of a complaint or referral from a government entity.

It is important to note that covered entities are required by law to cooperate with investigations. A complaint must allege an activity that, if proven true, would violate the Privacy or Security Rule.

28,261

OCR complaints were received in 2019

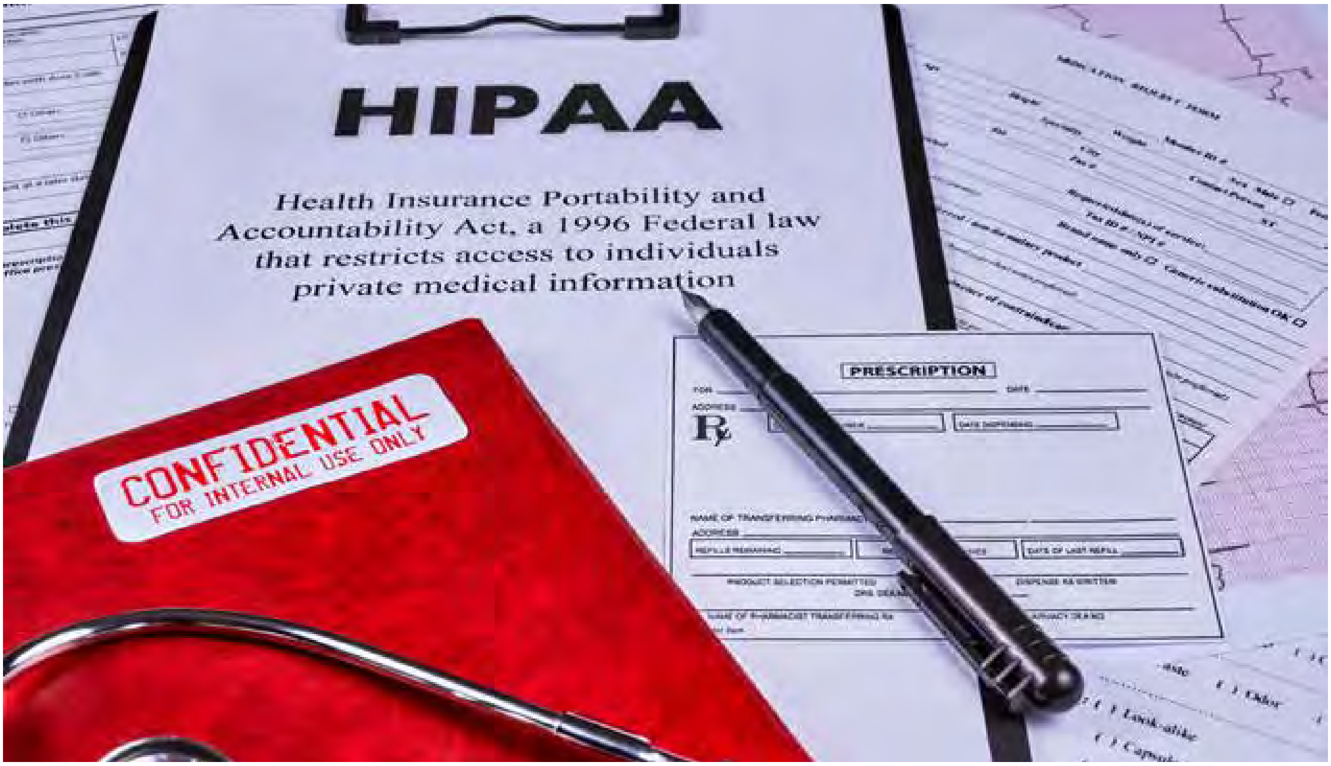
HIPAA Privacy & Security Rule Complaint Process

If the OCR accepts a complaint for investigation, the OCR will notify the person who filed the complaint and the covered entity named in it. Then the complainant and the covered entity are asked to present information about the incident or problem described in the complaint. The OCR may request specific information from each party to get an understanding of the facts. The OCR will review the evidence that it gathers to make a determination on whether or not the covered entity violated the requirements of the rules.

If the evidence indicates that the covered entity was not in compliance, the OCR will attempt to resolve the case with the covered entity by obtaining voluntary compliance, corrective actions, and/or a resolution agreement. Most Privacy and Security Rule investigations are concluded to the satisfaction of the OCR through these types of resolutions. If, however, the covered entity does not take action to resolve the matter in a satisfactory manner, the OCR may decide to impose civil money penalties.

Inside an OCR Investigation

As a health care consultancy, our company has worked with several clients undergoing OCR desk audits and investigations, all with positive outcomes. And while each investigation is different, there are commonalties. As detailed earlier, the HIPAA Privacy and Security Rules



complaint process follows a standard pathway that begins with a complaint that is reviewed by the OCR for validity before an investigation is initiated. If the OCR determines an investigation is warranted, the covered entity will be notified in writing of the data request. The notification will include the complainant's name and the allegations brought forth in the complaint. The OCR notification will also include a list of references to the applicable HIPAA Administrative Simplification Regulation (45 CFR §160, §162, and §164) that the covered entity may have violated.

It is the responsibility of the covered entity to respond to the data request within 30 days of receipt with all items requested. Typically, the length of the data request correlates with the number of alleged violations; it is not uncommon for a data request to include 20 or more items to be addressed, as many of the privacy and security requirements are overlapping.

A covered entity will be required to produce its HIPAA policies and procedures corresponding to the rule that was allegedly violated. This includes producing those that were in effect at the time of the incident and those currently in effect, including all revisions. Additional forms of documentation are also requested as evidence that privacy and security rules are followed. This could include employee training documents and logs, security and risk assessments, security agreements with business associates and other third-party vendors, and even internal memos and emails. Without a doubt, covered entities that had a comprehensive HIPAA compliance program in place were able to produce the documentation requested by the OCR much more easily than those that did not.

HIPAA Compliance Basics

All HIPAA compliance programs require four main components to be successful: a security and risk assessment, policies and procedures, employee training and business associate management.

Creating and maintaining a HIPAA compliance program does not have to be a daunting task. An organization can use internal and external resources to get started. Beginning the process with a risk analysis and management plan can make the task of drafting and implementing policies and procedures easier and pave the way for employee training.

Maintaining HIPAA compliance not only provides an organization's employees, business partners and patients with the assurance that it values the importance of protecting patient health information, but also gives it the ability to more easily conduct business functions. In the event your organization finds itself under the microscope of an OCR investigation, a fully implemented HIPAA compliance program will make the response time faster and easier—and is more likely to yield positive results. HC

Kelly Grahovac serves as the general manager for The van Halem Group, where she focuses on audits, appeals, education and training across multiple lines of business and various specialties. Grahovac uses her 15 years' experience in Medicare regulations to assist providers as they navigate the ever-changing health care payer landscape. Vist vanhalemgroup.com.

By Michael Becker

Patient Data at Your Fingertips

Tips for choosing and using an Sp02 monitoring device

Breathing brings oxygen into the lungs. From there, oxygen travels to the rest of the body via the hemoglobin in blood. Maintaining adequate oxygen delivery throughout the body is vital to healthy body function.

Oxygen saturation, or SpO2, is a measure of the percentage of oxygen-carrying hemoglobin in the blood. Without oxygen delivery, hypoxemia (low blood oxygen) and hypoxia (lack of oxygen in tissue) can occur—both of which can be life threatening and cause irreversible harm if not acted upon quickly. That's why measuring SpO2 can be important when assembling a full picture of a patient's status and assessing their care needs.

Pulse oximetry is commonly used to measure SpO2 levels; It's accurate, noninvasive and easy to use. Pulse oximeters can either provide continuous monitoring or spot-checking. Both types of measurement are useful, although continuous monitoring offers additional benefits that may help inform clinical assessments.

Know the Difference

Here are some different approaches to monitoring SpO2 levels. Knowing which is preferable helps detrmine which technology to use.

Spot-checking

Spot-checking SpO2 provides caregivers with a snapshot of a patient's blood oxygen status at the precise moment the measurement is made. This can be more convenient in situations where a patient may not need continuous surveillance, such as with stable, low-acuity or ambulatory patients. Many spot-check devices are portable and handheld, making them convenient for use on the go. However, through recent innovations, continuous monitoring is now available in wireless and tetherless forms that allow patients to move about freely while still being monitored—offering the best of both worlds.

Continuous Monitoring

With more data comes the potential for more effective clinical assessment. Continuous monitoring offers trended data and configurable alarms, helping caregivers stay aware of patient progress and providing early indications that further intervention may be needed. Timely warnings or notifications about patient status are key to early intervention, which helps support better patient outcomes. For example, a high-risk, chronic care patient taking one or more medications can experience unexpected adverse events. With continuous monitoring, caretakers have greater visibility into their patient's condition and—with the aid of continuous, high-fidelity data—can make effective clinical judgements and care decisions.

Remote Monitoring

Remote continuous SpO2 monitoring is also growing in popularity. The COVID-19 pandemic and the need for telemedicine solutions have driven increased demand for SpO2 monitoring that conveys trended data from patients convalescing at home to clinicians off site. Remote monitoring solutions combine continuous SpO2 measurements with a secure patient surveillance platform, allowing physicians to review a patient's trended data remotely and communicate with them through a secure application in the event a return to the hospital is necessary.

Recommending the Right Pulse Oximeter

When monitoring patients at home, it's important to use a pulse oximetry solution that is light, comfortable, easy to use, durable and portable—keeping in mind that, as mentioned above, technological advancements have now made it possible to provide the benefits of continuous monitoring in a device that promotes patient comfort and allows freedom of movement as readily as fingertip spot-check devices.

But even when narrowing your selection to pulse oximeters with these physical attributes, there are many technological differences that separate good pulse oximeters from bad and reliable from unreliable. Be wary of inexpensive, unproven, nonhospital-grade devices that trade a low price for a lack of accuracy and reliability. Also avoid smartwatches and other fitness-focused devices that may claim to measure SpO2 but aren't actually medical devices.

Instead, consider these criteria when recommending a pulse oximeter:

- Has it received Food and Drug Administration clearance for reading (accurately measuring) through challenging conditions such as patient motion and low perfusion (decreases in arterial blood flow)? This is especially important for neonatal patients, who are often prone to involuntary movement. Low perfusion is also common, for example in elderly patients with vascular or cardiac conditions. Many of the cheap fingertip devices found readily online do not have such capabilities, lacking the advanced algorithms and signal processing that allow more sophisticated devices to separate noise from true arterial signal. Unreliable SpO2 readings under these

common conditions can lead to excessive false alarms and inaccurate data, delayed notifications, and an inability to obtain timely information about high-acuity patients.

- Has the technology been validated by a substantive body of clinical evidence drawn from objective, peer-reviewed studies?
- Has the device had its performance proven in hospital environments and been used on the sickest of patients, such as those in the intensive care unit or neonatal intensive care unit?
- Does it have validated accuracy specifications of 2% or less, even in challenging conditions?
- Was the technology developed and has it been shown to measure accurately on a variety of skin pigmentations? Because pulse oximeters depend on the passage of light through the skin, older technologies and those not developed or tested on a variety of pigmentations are often unable to accurately measure the SpO2 of patients with darker skin tones.

To sum up, it's important to seek out a pulse oximeter that can perform even when the patient is in motion, has cold hands and has darker skin or is in bright sunlight.

It's important to remember that the less direct clinician involvement in a patient's care—that is, the less time a patient spends being actively supervised—the more the patient and caregiver are reliant on the pulse oximeter to do its job accurately and reliably, with timely notifications and alarms when it matters most.

Keys to Success When Measuring SpO2

Proper patient preparation and sensor application are crucial for obtaining accurate readings. The ideal monitoring site is selected based on the perfusion of the digit or extremity. Perfusion readings are available on some pulse oximeters to help select a site with a strong signal. Before applying a sensor, prepare the monitoring site by making sure the skin is clean and dry.

Pulse oximetry sensors use an emitter to shine light through the application site and measure light that passes through the site using a detector. Upon sensor application, ensure that the optical components (the emitter and the detector) are aligned. Misapplied sensors or sensors that are not securely placed or have gaps where extraneous light might enter can lead to inaccurate readings and, in some cases, false alarms. Also, because sensors are designed for specific application sites and patient populations (e.g., adult versus pediatric), ensure that the appropriate sensor is being used. Proper application can also vary depending on the type of sensor being used; for example, when using a neonatal wrap sensor, it should be spiral-wrapped down the digit rather than wrapped around itself to help prevent pressure necrosis and ensure adequate blood flow.

Sensor sites should also be checked periodically, or per clinical protocol, to ensure adequate adhesion and circulation, skin integrity and correct optical alignment. Remember to be especially cautious in the case of poor perfusion; skin erosion and pressure necrosis can result if a sensor is not moved or readjusted regularly. To maximize sensor life, replacement tapes that replace only the adhesive components of the sensor can be extremely convenient and make rechecking and readjusting sensor sites relatively simple. HC

Michael Becker serves as the chief nursing executive/vice president of nursing at Masimo. Before Masimo, he was the chief nursing officer at Penn Presbyterian Medical Center in Philadelphia. Becker has extensive clinical operating and patient quality and safety experience. He has presented nationally and internationally on such topics as utilizing technology to enhance workflow, innovations in quality and safety and the patient experience. Visit masimo.com.

By Amy Selle

Maintaining Referral Relationships Through COVID-19

Use the downtime to boost your sales team

The COVID-19 pandemic has changed the world as we know it. Navigating a landscape that seems to change every day has led to a period of adjustment for everyone. There are vital steps your homecare company's sales and outreach team can take now to build and strengthen key relationships, stay productive, plan for the future and weather the ongoing COVID-19 crisis.

1 Stay in regular communication with your entire team.

Preparing your team, including your caregivers or technicians, with updated, dependable information is crucial, as it will ensure everyone is on the same page, build unity and morale, and, in particular, establish trust during this time of uncertainty. To implement internal communications that are effective:

- Put in place regular—even daily—communications to share changes or other important information with your team.
- Be sure to include your sales and intake team in operational meetings.
- Outline what your organization can and can't do on a daily basis regarding requests for services, enabling your sales team to focus outreach appropriately.
- Solidify a crisis communication plan so your sales team stays on message when talking with referral sources, clients, families and members of the community.

2 Place the focus on strengthening current referral relationships.

Due to the need for social distancing, your sales staff needs to work creatively, using the phone, email and other digital means of communication to showcase how your company is ready to meet needs and solve problems.

In the short term, your sales team should focus on strengthening existing relationships with referral sources and can place new prospecting on the back burner. Think about how your sales team can support these referral sources:

- ***Listen***—When referral sources contact your company, be sure to truly listen to their needs and be ready to work in new and creative ways to problem-solve together.
- ***Empathize***—Realize that referral sources are facing ever-changing demands and priorities. Make sure your actions validate the uncertainty we're all facing. Investigate opportunities to help and focus your interactions in a partnered way that takes into consideration their time and evolving needs.
- ***How can you help?***—For long-term, established referral source relationships, ask what you can do to help them meet their needs. Be ready to think outside the box to come up with a solution to the problems they're facing.

To preserve the relationship you've established with these referral sources, think about creative ways to provide support and to stay connected. For example:

- Make use of video calling applications for communications with your referral sources. If a referral source sends you an email, ask if you can arrange for a 10-minute meeting through Zoom or a similar platform to connect and discuss how to best offer assistance. However, if the issue is easily resolved via email, send the email. If possible, offer to host virtual activities for facility-based customers.
- Support your referral partners' volunteer endeavors and select opportunities in your community where you can contribute staff and/or expertise to fill a need for essential services for older adults and other vulnerable people.
- Use social media to share useful, factual and scientifically-sourced information, and to offer encouragement—not just targeted to referral sources and those on the front lines, but to seniors and their families as well.

> **One great way to take advantage of this time is to use it to plan and assess your current sales processes and strategies.**

3 Try having your team wear different hats.

Your sales team may find they are available to help your agency in other capacities during these times. This allows knowledgeable staff members to focus their talents on other areas of the business, and also provides opportunities for professional

growth and cross-training, helping your sales force to be more in touch with the services they are selling. Sales staff can:

- assist with operations where needed;
- contact clients and/or caregivers to check in with them about their services and overall well-being; and
- help with recruiting and the hiring and/or orientation process.

4 Make the most of this time.

One great way to take advantage of this time is to use it to plan and assess your current sales processes and strategies. What has been successful? Where might there be opportunities for growth or additional outreach? Focus any downtime on creating a plan that will allow you to hit the ground running after the current crisis is under control.

- Use this time to reflect on questions such as: What is working well? Where can we improve? What are three (or more) opportunities that are worth pursuing?
- Develop a sales SWOT (Strengths, Weaknesses, Opportunities and Threats) analysis.
- Build and populate your CRM.
- Evaluate and formalize your sales plan, to include a time and territory plan.
- Research and create a list of new prospects to target after the crisis has passed.
- Analyze the past three years' worth of sales data to identify trends and relationships you may want to rebuild.
- Develop a solid process for managing inquiries, including capturing all data in your scheduling system.
- Calculate your conversion rate and create a plan to improve it.

5 Plan ahead for what will come after the crisis.

After the immediate emergency has abated, homecare agencies need to be on the front lines, ready to provide care.

While travel and meetings are rarer, concentrate on using this time to:

- Develop a plan for an influx of new clients: Evaluate staffing needs, necessary training for staff, and care or product needs specific to patients who are recovering from COVID-19;
- Create a plan for outreach, extending beyond referral sources to those in need of care post-COVID-19; and
- Get ready to resume face-to-face sales as soon as social distancing and isolation guidelines are relaxed in your community, realizing that the rules may change regarding who is allowed to visit hospitals and care facilities and how often.

While none of us are able to pinpoint exactly when the crisis will end or what "normal" will look like, one thing is certain: Referral sources and members of your community will remember your agency's efforts to develop creative solutions and to offer a steadying hand throughout the pandemic. HC

Amy Selle is the vice president of corecubed, an in-home care marketing company that uses the best homecare sales and marketing talent to promote care companies. Selle acts as a strategic marketing partner to corecubed clients, helping them achieve results in an increasingly dynamic marketplace. To help ensure your agency stands out in the crowded aging care marketplace, contact the homecare marketing experts at corecubed by phone at (800) 370-6580 or email info@corecubed.com or visit corecubed.com.

WHAT'S YOUR PLAN?

5 Things You Should Do to Be Ready for the 2021 Gold Rush

Lay the foundation for scaling & success before the homecare boom hits full swing

By Lauren Davenport

Two thirds—a whopping 66%—of nursing homes say they will close in 2021 due to the pressures of COVID-19, according to a recent study released by the American Health Care Association and the National Center for Assisted Living.

What does that mean for homecare? Whether your organization is providing personal care, skilled nursing or home medical equipment, the demand for your services will likely be unlike anything you've ever experienced. Sounds exciting, right? It should be. But, like all exciting opportunities, there are risks.

The most dangerous scenario is taking on a massive influx of clients without developing the strategies needed to scale your organization. Is it possible to succeed without this critical planning? Sure, but it's a recipe for painful operational failures, brand-damaging online reviews, and, in the worst instances, it can even be the catalyst to your business going under.

The great news is that this doesn't have to be you. Developing the strategies and skills needed to successfully scale your organization won't happen overnight. But if you start laying the foundation now, you will be better prepared to take advantage of the changing homecare landscape as the year progresses.

66% **of nursing homes say they will close in 2021 due to the pressures of COVID-19**

Planning to Scale Your Organization in the Year Ahead

Ready to get started? Great! There are five foundational steps you should follow to thrive and scale.

If you don't have annual goals in place yet, begin by scheduling a meeting with your key leadership team.

1 Align your leadership team.

If you were to call your leadership team into a conference room and ask them about your organization's goals for 2021, what would they say? Would the answers be concise and consistent—or would you be greeted with a room full of blank stares?

If you think they would be concise and consistent, great job! You're already on the right track. Make sure that these goals weren't just written by the CEO and published in the annual company meeting. Having a list to recite isn't good enough. Your team needs buy-in with the goals too, or else they will never come to fruition.

On the other hand, if the answer is blank stares, know that you're not alone. It takes time and intentional planning to set benchmarks for your organization. It's easy to get caught up in the day-to-day of running your business, but it's definitely worth the time.

If you don't have annual goals in place yet, begin by scheduling a meeting with your key leadership team. Start by asking where they see the company in five years. Resist the temptation to dominate the conversation; let your leadership team talk. This will allow you to better understand how they see the organization's future, which will make it easier to create their buy-in in the long run.

2 Build a brand people trust.

In order to thrive in 2021, it's critical that your brand instills trust from the very first touch point. Due to the pandemic, it's unlikely that traditional in-person relationship building will be how new patients find you this year. When nursing homes start closing, their clients and clients' families will likely go online to research options for care.

Assuming they find your brand online, it's important that it your presence there is designed to evoke positive thoughts and feelings. When people see your logo and brand messaging, does it immediately tell them that you care about the work you do? Does it make your organization look professional and like a well-established entity they can trust? Or does it look outdated and offer little to no information about who you are, what you believe in and the services you provide?

The best way to gauge this is by continuing the discussion with your leadership team from Step 1. Google your top three to five competitors and talk about what they are doing well and what could be improved. Write your findings down. Then search for your organization. What do you see? If you were searching for your services, would you choose your company over your

Check 105 on index.

competition? Be honest with yourselves. If the answer is no, you've got work to do.

3 Modernize the patient experience. If you're going to scale, you can't just throw people at problems. You need to be efficient in everything you do. One of the easiest ways to improve efficiency is to look at all of the manual processes you have in your organization today.

Are new clients still processed over the phone? Do they have to fill out new client paperwork by printing it out and faxing it in? Modern technology can eliminate these outdated processes to make the patient experience easier for everyone. And a simple, easy-to-navigate client experience is one of the fastest ways to convert new clients into raving fans.

4 Proactively take steps to attract new business.

In step 2, the assumption was made that new clients would find you online. That can be a big assumption that you don't want to overlook.

Take a few minutes to open up an incognito tab in your web browser and pretend you're the loved one of a potential client looking for your services. What do you search for? Remember that in 2021, people typically search for questions. Gone are the days when people searched for a service and a location, such as, "homecare Memphis, Tennessee." Instead, they are more likely to search something like, "How do I choose a homecare provider for my mom?" Try multiple variations of searches. Does your organization show up? If not, it's time to evaluate your online marketing strategies to make sure you do.

In addition to your online strategies, to fully take advantage of your organization's growth potential in 2021, it's time to get to know the people leading the nursing homes in your community. Identify the top five to 10 that may run the risk of failing this year and look for ways to build relationships with them. If they do close, your organization will likely be at the top of the list when it comes time to refer their clients. It's important to note that these must be genuine connections if they are going to work. So look for creative ways to build a mutually beneficial relationship.

5 Track your progress. If you're committed to scaling your organization in 2021, nothing is more critical than tracking. The more you measure, the more data points you will have to determine where things are wildly successful and where they fall through the cracks. Have weekly meetings with your leadership team to review data points. How many new clients did you acquire this month? How many new caregivers did you hire? How many people came to your website this week? Determine the most important metrics to your organization's success and track them meticulously.

2021: The Year Your Organization Can Thrive

Put all five steps into action and this year will be one for the record books. The best part? The work you do to better align your organization with these key steps will benefit you for years to come. HC

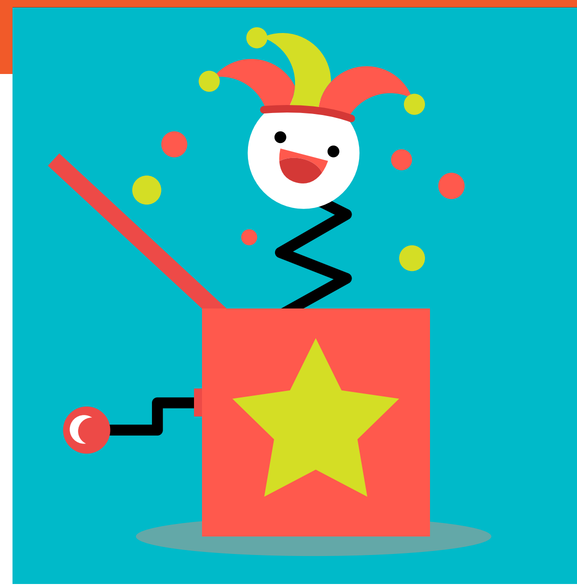
Founder of the award-winning health care communications firm The Symphony Agency, Lauren Davenport leads organizational transformation workshops across the country focused on ensuring companies have the best chance of scaling successfully. She is a contributor for the New York Daily News and has been featured on Forbes, PBS, ABC Action News, iHeartRadio, AMEX OPEN and more.

WHAT'S YOUR PLAN?

Expecting the Unexpected

4 sales realities to plan for in 2021

By Ty Bello



Well, you survived the unexpected events of 2020. Good job! While there may be some lingering effects, now it's time to prepare for both the expected and unexpected encounters in sales.

Let's address the most obvious element for success in 2021—the strategic sales plan. Ideally, this plan should have been developed and reviewed toward the end of 2020, and key to-do elements would include:

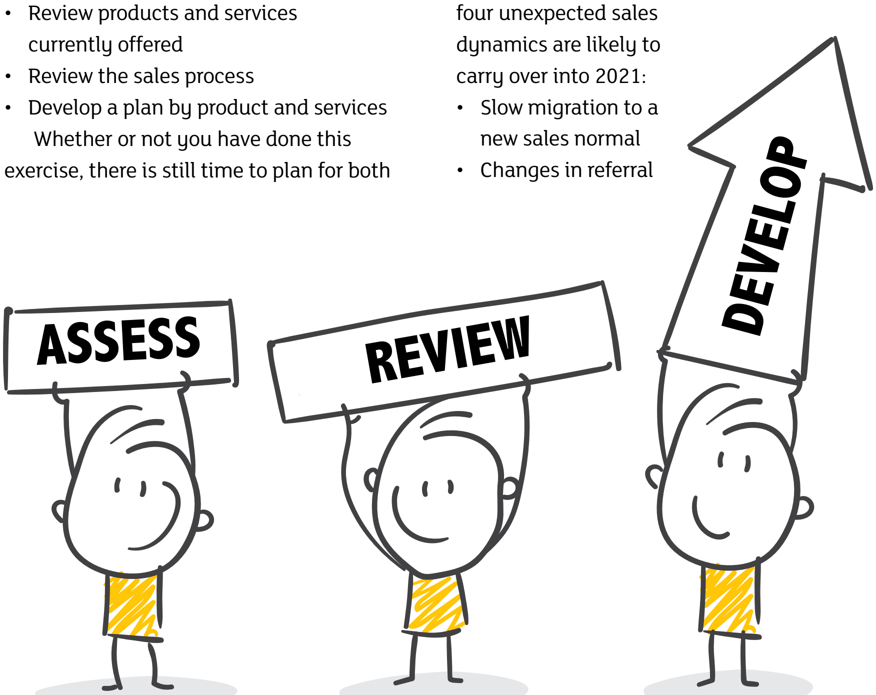
- Assess the current market and referral accessibility
- Review products and services currently offered
- Review the sales process
- Develop a plan by product and services

Whether or not you have done this exercise, there is still time to plan for both the expected and unexpected. We all know that old quote, "Expect the unexpected." Does this mean that if we plan, we can be better prepared for the unexpected? That is how we are going to approach it.

The sales path of 2020 was like nothing anyone had ever experienced. What did you learn from this experience that can better prepare your business for some unexpected but highly likely changes in the sales approach to the referral community?

A closer review of 2020 has revealed four unexpected sales dynamics are likely to carry over into 2021:

- Slow migration to a new sales normal
- Changes in referral source accessibility
- An increased need to call on the right referral source
- More emphasis on content for sales engagements



Let's address these one at a time and consider how to plan for each.

Slow Migration to a New Sales Normal

Moving through 2020 has proven to be challenging for sales professionals in home medical equipment (HME) and home health and hospice. The challenges faced in 2020 subsided slightly early in the fourth quarter, but ramped back up toward the end of the year and continued into 2021.

As a sales professional, you must realize that you are on a journey to normality but have not yet reached the destination. Many changes are still ahead and the best way to address the current sales environment is on a monthly basis.

You cannot control the elements surrounding the medical referral community; however, you must look for opportunities to infiltrate this community while differentiating your offering.

Changes in Referral Source Accessibility

Accessibility was one of the biggest changes for most sales professionals in 2020. The ability to speak with and engage a referral source basically disappeared and sales professionals scrambled for a solution.

We learned that accessibility isn't limited to a face-to-face sales call; the use of technology and even social media platforms afforded increased touch points that were otherwise a minor emphasis before the pandemic.

There are strong indications that accessibility will remain a challenge for sales professionals this year, but this, too, can be planned for by examining all options for making contact with the referral community. A review of what worked for you in 2020 and what challenges exist in your marketplace will provide great insight and help develop your accessibility plan.

An Increased Need to Call on the Right Referral Source

Sales professionals have always striven to call on the right referral sources—but let's be realistic and pull back the curtain. Sales professionals don't have a crystal ball, nor can they predict who the high prescribers will be. Please understand that for the past few decades, the only way to understand the level of market intelligence was by being on the street. This accuracy was subjective at best.

This year can be a standout year for every provider with the use of market data. The market data offered to our industry through outlets like Playmaker Health will provide

There are strong indications that accessibility will remain a challenge for sales professionals this year, but this, too, can be planned for.

a clear understanding of high prescribers and competitive dynamics in the referral community and can help drive sales professionals to call on the right referral sources.

More Emphasis on Content for Sales Engagements

Content was a key driver for accessibility in 2020. Those sales professionals who provided strong and reliable content to the referral community seemed to have more access than those that did not.

Moving into 2021, sales professionals must embrace their knowledge of products, services, diagnoses and outcomes to achieve increased access and trust with the referral community. A well-designed marketing strategy that incorporates messaging, education and information will be a notable differentiator amongst the medical referral community.

Developing a Plan

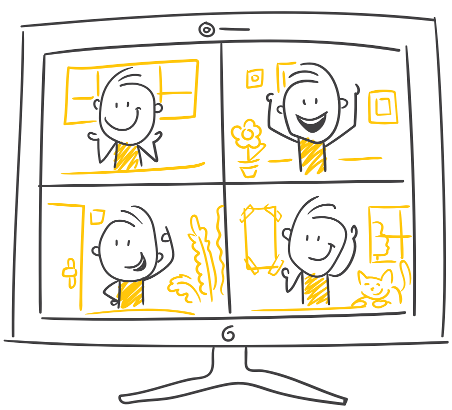
The expected sales dynamics may seem very obvious; however, they must be respected as important elements of your success in 2021. You must develop a plan if you want to achieve excellence.

Here is what to expect and plan for in 2021:

1 There will be a continued need for services.

Of course, patients and the referral community will still need your services. But what will change in the way these services are offered and referred—the process, delivery, education and compliance?

How you use your business experience from 2020 to address these questions in



2021 is critical. Many providers adapted well to these elements with the patient and referral community. But what will you do differently in 2021?

Understanding what the patient, caregiver, family member, significant other, referral coordinator, nurse, physician, physician assistant, etc. need and want from us has always been important. In today's environment, it is essential for success.

2 Telehealth is here to stay.

What role did telehealth play in your sales efforts in 2020? How did you adapt to these new opportunities to connect with the referral community and with patients?

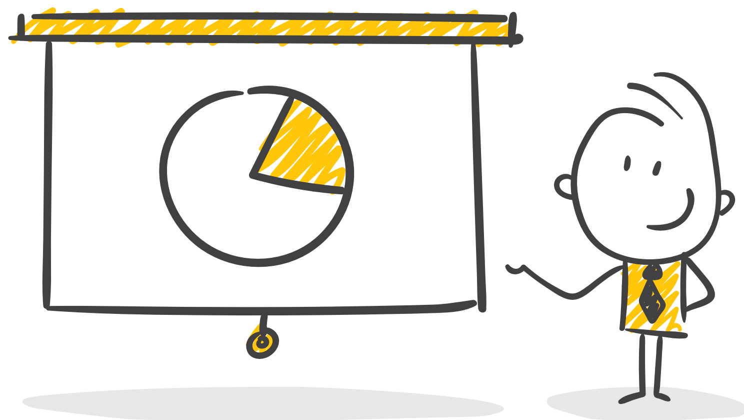
In 2021, there will likely be yet another shift in what the industry does with virtual in-services and telehealth. As an example, virtual services will continue to increase as the referral community travels toward its new normal. How will you continue to adapt to this and what will differentiate your business and offering from other providers through this venue? Virtual in-service is very

different from in-person service. Has your team risen to a new level of expectations and are they capturing the referral source through these or not?

Telehealth, while not universally used during the pandemic for HME and home health, must be explored as an opportunity for your business. HME providers used telehealth for setups and even compliance checks. Similarly, home health adopted telehealth for patient interactions, which proved to be valuable.

Telehealth also proved to be both an outstanding service and a differentiator for complex rehab providers in 2020. By using telehealth, an assistive technology professional can schedule patient evaluations on behalf of a clinician and then upload patient medical documentation. The evaluations are then confirmed by the clinician and the report is completed. During the pandemic, the standard operating procedure for this service was severely impacted, but telehealth for complex rehabilitation using a service like those offered by the company Telehealth Clinical Evals proved to be the right solution.

So, how will you adopt telehealth for your business this year?



3 Success is in the branding.

If we learned anything from 2020, it may be that people only know about our business if and when they need it. For the past two decades, the homecare industry has done a very good job of raising awareness of our businesses. This industry has embraced branding and marketing like never before—but the events of 2020 proved that although these efforts were good, they were not quite enough.

When access to the referral community shrank and patients were still being identified for homecare services, the medical community referred to providers that were top of mind and with whom they had previous relationships. There are fewer opportunities to be the last one in to trigger someone's memory before their next referral.

A more robust branding and marketing campaign with specific referral community and patient targets must be adopted for the continued success of your business.

4 A sales process is required.

The sales process was radically transformed by the pandemic. There were many providers who adapted and an equal number who didn't.

Those who merely survived in 2020 simply did not do enough to adapt to this new environment and to fully understand how to approach the medical referral community. For many, the pandemic exposed the harsh reality that the sales perks used before did nothing more than provide calories through the offering of food, candy, snacks and coffee, as opposed to content such as education, patient compliance reporting, referral process information and much more.

Those sales professionals who provided content and not just calories still had access. These same professionals who had a sales process for account management, prospecting, territory management, messaging and value proposition maintained the high majority, if not all, of the referrals from the medical community.

In Conclusion

The creation, adoption and execution of a sales process is paramount for sales success in 2021. The adoption of both market data and a customer relationship management software are critical.

We can try to just expect the unexpected, but this is only a glass-half-full approach. Moving into 2021 with sales success requires knowing both the unexpected and what to expect. It is never too late to plan, so why not start today?

This year has already proven to be different. Are you ready? HC

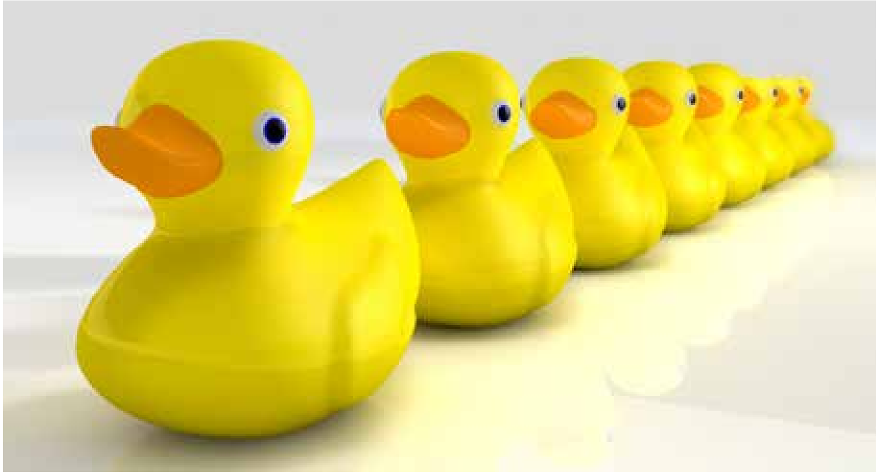
Ty Bello, RCC, is the president and founder of Team@Work, LLC. He is an author, communicator and registered coach. The team at T@W has over 50 years of combined experience in assessing, developing and coaching sole proprietorships, sales teams, C-suite executives, individuals and teams in a variety of industry settings. Contact Bello at ty@teamatworkcoaching.com for your sales and management coaching needs or visit teamatworkcoaching.com.

WHAT'S YOUR PLAN?

Get Your Ducks in a Row

The "A-B-C" keys to small business success during & after COVID-19

By Heather Bain



Gaining a clear understanding of your cash and working capital needs is the most important and first step in any cash flow management strategy.

Homecare business owners around the world continue to be vulnerable to the COVID-19 pandemic, with 79% of in-home care agencies applying for the Paycheck Protection Program or Economic Injury Disaster Loan in 2020 to stay in business. It is critical for homecare business owners to reshape their concepts of what it means to be prepared for an ongoing emergency.

Some specific resources apply to homecare. For example, the Centers for Disease Control and Prevention (CDC) has provided interim guidance on homecare for COVID-19-positive patients. Homecare providers should determine the risks and benefits of taking advantage of opportunities presented by the pandemic.

The Institute of Management Accountants Small Business Committee addresses issues that impact small- and medium-sized organizations and suggests that small businesses apply a three-step assess-build-communicate—or ABC—recovery planning framework as a starting point for business continuity in a time of crisis. That is:

- **A: Assess the current situation**, preferably with a team of experts.
- **B: Build a plan** by brainstorming with your team of experts (and create a Plan B as well if you have the resources).
- **C: Communicate calmly**, clearly and continuously.

Let's look closer at each component.

1 Assess the current situation.

First, dig into your current situation to determine the starting point for planning. Because the present economic environment is unprecedented, there are many areas in which business leaders are unprepared. Just how long we'll experience the impact of the COVID-19 pandemic is unknown, but it is relatively certain that the economic effects will continue for the next six months or longer.

The best place to start is an assessment of cash flow. Small businesses should ask the following questions:

- Based on our cash flows, can we function for six months?
- If not, is it time to shut down operations or segments of our operations?
- Based on cash flow, is the continuation of the business or segment for the next 12 months probable?

Managing cash flow is a challenge for most small businesses even in the best of times. With the novel coronavirus sweeping the globe, managing cash flow is critical for survival. Gaining a clear understanding of your cash and working capital needs is the most important and first step in any cash flow management strategy. It is vitally important that you, the small business owner, to fully picture what your cash flow

looks like, especially in the short term. Consider assessing your cash flow situation for multiple time frames, such as 60 days, 90 days and six months. Each of these time frames may require you to consider different scenarios.

Depending on your situation, you probably have less time than usual to devote to your business operations and tasks such as accounts receivable and sales. Take a few minutes and identify the 20% of customers that account for 80% of your revenue and focus your attention on collecting what you can from them. Prioritize existing and long-term relationships over newer ones; those are the customers who are most likely to understand and be willing to work with you.

Sadly, personnel changes are the most painful transitions to tackle, but they are necessary for small business owners. As personnel is often the largest expense most small businesses have, it must be addressed. Some items to consider include a reduced (three-day) work week and salary cutbacks for senior personnel, including reduced benefits such as deferred retirement plan payments. Be strategic in reducing payroll costs and become fully aware of available government assistance programs—federal, state and local—for obtaining assistance to help your employees.

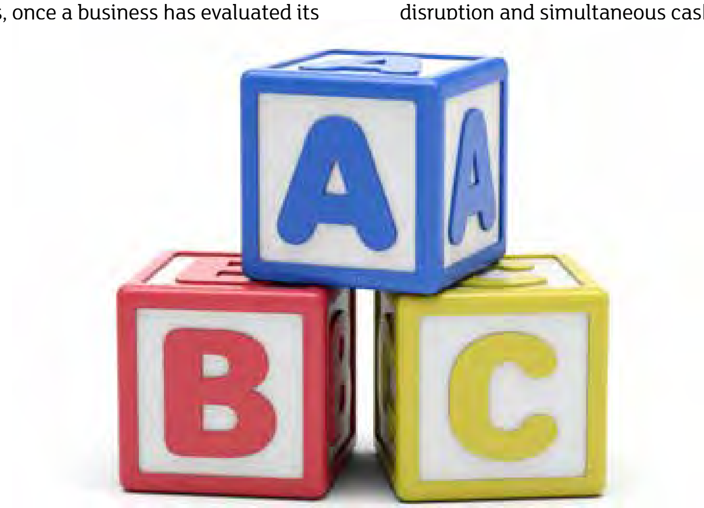
2 Build a plan.

The process of assessing cash flows allows a finance professional, along with the right experts, to build the plan. In other words, once a business has evaluated its cash position, leaders must gather all financially relevant data points to create a clear picture of reality versus expectation. Many of the safeguards that business leaders have used for risk management are ineffective when a pandemic happens.

Succession plans, buy-sell agreements, insurance policies, contracts with suppliers and loan agreements must be evaluated immediately. Understanding the practical effects of contracts and renegotiating terms can pose challenges for small business owners. In particular, there can be pitfalls in negotiating commercial real estate leases that disproportionately affect small business owners. This is why it is critical to plan and understand your needs. If necessary, reach out to competent legal counsel, who can quickly pinpoint key concerns with real property or commercial transactions and help you reduce your risk in negotiations.

Discuss with an attorney whether the effects of COVID-19 are included in the contracts under the definitions of force majeure and what remedies are available if it applies. An attorney may advise that any pending contracts should be revised to include specific force majeure language to protect the parties from unforeseen effects of nonperformance and liability.

Some types of insurance may exempt certain claims under the force majeure clause or other language, and others may simply not be enforceable or applicable in times of public emergency. These types of potential scenarios of business disruption and simultaneous cash drain must be considered when evaluating operations and cash flow scenarios. Now is the time to contact landlords, insurance companies, loan relationship managers, vendors and government agencies to determine contractual terms and possibly renegotiate them. Many lending institutions are allowing extensions on loans, credit increases and loan payment deferrals.



3 Communicate.

Once planning has been developed to a reasonable amount of detail, communicate the plan, identifying each initiative, the person accountable for the initiative, and the actions and budgeted cash flow for the initiative. Specify the goals and objectives of each initiative.

For instance, some projects like internet marketing may continue contact with customers, while others, such as discontinuing business segments, will preserve cash and other resources. Since communication is a two-way stream, create media that will allow for feedback and monitoring. Have your team update your plan with information gathered from outside sources—such as the government, the U.S. Small Business Administration, the Department of Labor, bank contacts or vendors—to help manage supply lines, unexpected sources of financial assistance and so on. Document all communications.

The ABC framework is designed to move small businesses forward in a time of uncertainty. After this emergency is resolved, the leaders of many homecare businesses will be more aware of how to consider preparations for other types of business interruptions. Deliberate planning and action may prove to be the keys to building a stronger business capable of withstanding the test of time. HC

Heather Bain, CPA, CMA, MBA, is the owner of Bain CPA Business Strategies, LLC, a small business management advisory firm in Houston, Texas, and accounting professor for the University of Phoenix there. Bain serves as chair of the Institute of Management Accountants Small Business Committee and program director of the Newspring Business Edge Program.

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Check 101 on index.

Making the Call

How contact centers can improve productivity & your bottom line

By Kristin Easterling

As of 2018, there were 7,400 call centers or contact centers employing 50 or more workers in the United States. These centers handle everything from your lost Amazon package to major technology issues. But for health care providers seeking to improve care to their patients, contact centers can help take some of the burden off customer care.

Monica Dotson, senior director of customer care at McKesson, recently sat down with HomeCare to share more about how contact centers work and how customer service has evolved in the age of COVID-19.

HC: What do providers need to know about choosing a contact center partner?

DOTSON: I would say the first thing that they should know is that contact center partners are their first point of contact. Our customers have support needs that include product support, post-sales support, account management and customer onboarding.

From a McKesson standpoint, our strategy is really to provide an effortless customer experience for our customers' needs through representatives who are specialized in their specific type of health care practice. These representatives have received extensive training so that they can really be experts when they are assisting those customers—handling their concerns quickly and identifying tailored solutions with the ability to be a liaison with internal experts. These contact center teams work hand in hand with our distribution centers and our field sales teams to ensure that the needs of each of our customers are met.

HC: What questions should providers ask themselves before moving to a contact center?

DOTSON: They should first determine what their specific needs are and determine if that specific provider can meet those needs, including the customer support that's going to be provided from that call center.

They should also ask themselves about what type of programs that contact center has to ensure that they're going to get the most reliable and the best customer experience that they can. We follow standard operating procedures. And we consistently maintain quality assurance procedures, where we have a quality assurance program where we monitor employees. We do customer surveys to get feedback directly from them, just so that we can ensure that we understand how we're doing and how we can make improvements. And we found this to be successful in achieving a higher level of customer satisfaction.

Finally, I would say that these customers should also ask themselves if that partner's mission and core value aligns with theirs.

HC: Are there misconceptions about contact centers?

DOTSON: Yes. I would say one of those is that contact centers only handle incoming calls. And that may be one reason we've kind of moved away from calling it a contact center and more specifically titling it by the type of support that we're providing, such as customer support or tech support. And that's because that support goes beyond just handling incoming calls. We support customers through email and through chat. We provide specialized support services based on the needs of that customer, including specialized types of account management. We also provide dedicated support if they're needing to work with one specific person, instead of working with different individuals from different departments.

I would say the other misconception is that some people feel like the call center industry has no future and that it's going to go away. We believe our call centers or customer support or technical support are extremely important to our customers. And I feel I can help them achieve their goals and service their patients. They are an easy way for customers to reach the company for their day-to-day support needs. From that perspective, I feel like there's definitely a future and that they will always be needed.

HC: What are the advantages of using a contact center?

DOTSON: I would say being able to reach someone quickly and to reach a specialized representative who understand that customer's practice or health system and is able to answer their questions quickly. We understand that our customers are very busy. They are trying to provide better health to their patients. We want to make sure that we have the tools available to help, whether it's providing responses through interactive voice response and updating that or providing different ways for the customer to communicate with us. We've gotten feedback that customers are open to chat. Customers told us they would like to email

with us more, so we provided more support so that they can email us and we can provide quick responses.

HC: What are the challenges of using a contact center?

DOTSON: There's not a real challenge other than customers not really understanding the true capabilities of a contact center and the services available to them. So if a customer has a misconception that this is all that this contact center can do, then that can be a challenge because they may miss out on all of these other things that are services and support that a contact center provide them with.

That's why I said the contact center label has become hard to just wrap everything that we do in. We also onboard customers. If we have a new customer coming in, or they have what we call a "change size," which means they're adding a new location, we support them with that. That may almost seem like a mini-project manager, but those are additional services that we provide to our customers post-sale support.

HC: How can partnering with a contact center improve a provider's bottom line?

DOTSON: If we are able to answer their questions quickly and efficiently around product support and get them what they need quickly, then a provider's bottom line improves. So if they're calling us for certain products and they need an emergency order, for example, being able to provide them with those services helps them meet their patients' needs quicker and helps them with their bottom line, which is ultimately servicing and providing better health to their patients. That is what we are in the business of doing in our contact centers. That includes proactively tracking their packages for them and letting them know if something may be delayed so that they can be aware and prepare for whenever that patient comes in. So we just want to reduce the customer's level of effort so that they can then provide better health to their patients.

HC: How are call centers changing?

DOTSON: With COVID-19, McKesson had to make a quick shift in how we were doing business. The good thing is that we, like most companies, had great business continuity plans in place to be prepared and to be able to go from having all of our employees within a contact center to all of our employees working from home within 48 hours. So, we have had to change by doing virtual training. We onboard employees virtually and train them virtually, and we've had to shift in how we normally train employees or even interview or recruit for them. [And, like other companies,] our employees are now working from home.

It's even changing in terms of how we collaborate with our employees—we are accustomed to gathering in a conference room or training room. Now we're collaborating through technology such as Microsoft Teams and Chatter and where we can still have strong collaboration without necessarily having to actually be face to face. And in doing these things, I'll say I'm pleased that we haven't seen a negative impact on the customer experience or on productivity or employee morale. We've just had to think about how we can do things differently and still be able to provide the highest level of customer experience for our customers. But things are also changing with our customers in terms of how they service their patients and what the services that they need from us and making sure that we can modify what we're doing based how their needs are changing. HC

Kristin Easterling is managing editor of HomeCare magazine.

Walking in the Footsteps of (Retail) Giants

Follow Amazon & others to learn the secrets of patient engagement & how to better manage care

By Nupura Kolwalkar

As a homecare provider, you know that higher levels of patient engagement mean better patient outcomes and better business. When patients are engaged in managing their own health, they gain a sense of ownership over their care and demonstrate improved adherence to medication or device use, leading to higher patient loyalty, lower patient attrition and—most importantly—better health.

But what is the best way to drive patient engagement?

The answer is simple: Provide an exceptional patient experience—but not just with aesthetic bells and whistles or trendy interfaces. Studies of consumer-facing companies show the key to customer experience—and to enhanced loyalty—is simply solving the problems at hand and reducing customer effort in doing so. With that in mind, follow the lead of consumer-facing technology providers like Amazon, Netflix or online banking platforms and focus on making your patients' experience as transparent, consistent and effortless as possible.

With the COVID-19 pandemic ushering in rapid adoption of digital innovation, health care providers have the opportunity to give customers an effortless experience. This article will highlight how patient engagement will create better business for you and will advise you how to thoughtfully design experiences for the patients you serve.

Building Transparency & Trust

Within the evolving insurance landscape, high deductibles are pushing patients to act like consumers in their care journeys. That means they want a full view into their financial responsibility: how much they owe, for what and to whom.

Care providers have an opportunity to develop trust by offering transparency into the patient's estimated financial responsibility early in the relationship. Complementing this transparency on the financial side, providers can highlight ease and convenience in the patient onboarding process with effective digital touch points with updates on order tracking, delivery details and appointment reminders, such as via text. Providers can offer financial ease as well by keeping a payment method on file for resupply efficiency.

The best way to achieve this is to choose technology that automates these business processes, creating coordinated transitions from one phase of a patient's care journey, like leaving a hospital, to the next, such as beginning at-home treatments. With a multi-channel communications strategy that includes a patient portal, mobile apps, digital reminders and automated phone call solutions such as interactive voice response, you can provide thoughtful and effective communication during these early stages, build trust with your patients and engage them when they are most willing to be proactive in the process.

> Establishing this emotional connection with patients demonstrates your investment in their care and health—beyond your own business needs.

Designing a Thoughtful Patient Experience

As a care provider, there are a range of communications you need to have with your patients and a number of modalities you can use for each of those touch points. Using each of these thoughtfully will allow you to build trust with the patient early on and demonstrate your effectiveness.

Steps for crafting a thoughtful, engaging patient experience include:

1 Make the most of your first outreach to a new patient.
From the start, establish an open line of communication and provide an element of

choice in the relationship with the patient. For instance, if the new intake involves order processing, let your patient know you received the order from their clinician, tell them what to expect next and ask how they would like to be notified for future updates.

2 Keep your patient in the loop. As the order gets processed, if the patient opted to be notified, ensure the technology you are using provides full transparency into how the order is progressing and when that patient should expect to receive their product. (Again, consider Amazon as a model: The ability to check on order status at any point in the process increases consumer engagement with the purchasing process and confidence in the platform.)

3 Use the very first order to demonstrate financial transparency. Research shows that a customer is most engaged during their first order and, in the case of health care, most inclined to set up features like card on file or auto-refill. Encourage your patient to sign up for these features early to save hassles for everyone involved when it comes to collections. This will contribute to a smoother and more trusting relationship, create that financial transparency patients are looking for and drive higher profitability down the line.

4 Don't underestimate the importance of emotional touch points. Even after an order is delivered and set up, engage with your patient and show them that the care experience is centered on them. Use your touch points to confirm delivery with a photo of the driver, check in on how they are doing with their new product soon after it arrives, ask if they have questions about their care and send appointment and resupply reminders. Establishing this emotional connection with patients demonstrates your investment in their care and health—beyond your own business needs.

5 Ask for feedback and keep the patient in the fold. Lastly, when one leg of the care journey is completed—whether a first order, appointment, nurse call or resupply order—ask the patient how you did. This reminds them you are there to support them and make their care as smooth and supported as possible.

As you follow these guidelines, consider timeliness, personalization and modality. Overall, you should drive patients toward a patient portal, which allows them to have greater control over and insight into their care processes in the long term. But keep convenience in mind, too; the first resupply order confirmation is a good time to encourage the patient to enroll in a portal, not when sending an appointment reminder.

Looking at the Long Term

As many of us have experienced firsthand, the pandemic has driven consumers towards digital platforms and the same is true of patients. Even as we start to see normalcy resume in other parts of our lives, patients are going to demand the convenience of digital relationships as they take a more proactive role in managing their own care.

With that in mind, care providers should think carefully about how to create the best possible experience for their patients now and into the future. This will require not just strong technology, but also a thoughtful and committed approach to centering each patient in their care journey and experience.

Amazon has demonstrated the most consistent consumer loyalty statistics in history, with Amazon Prime memberships at a 93% retention rate in the first year and above 98% after two years. In the new era of virtual and connected business models, patient loyalty can be achieved if every care provider can create the low-effort, efficient and transparent processes that consumers—and now patients—have come to expect.

With these thoughtful approaches, you will see higher patient loyalty, better therapy adherence, improved patient outcomes and better business overall. HC

Nupura Kolwalkar, chief product officer at Brightree, has almost two decades of experience developing and managing health care technologies in the pharmaceutical industry. With previous leadership roles at Purdue, Pfizer and McKesson, Kolwalkar brings a wide range of strategic backgrounds to her new role at Brightree.

Tracking Patient Meds Can Be Easier With Technology

More options & more connectivity to help handle complex conditions

By Omri Shor

Six in 10 Americans live with a chronic condition, and 40% have two or more. Patients with multiple chronic conditions routinely use, on average, five medications to manage their symptoms. From a numbers perspective alone, managing a chronic condition is a juggling act. Home medical equipment (HME) providers can help by offering the right digital tools for better medication management.

Various Doctors, Various Meds

A patient who is managing a chronic condition is also often working with multiple physicians and a range of medications to treat conditions, including drug side effects in some cases. Understanding all of a patient's medications helps create a broader view into their health and how they are being treated. But it can be quite taxing for patients to need to recall their exact medication, dosage and frequency, as well as any previous medications that may have been used in treating their chronic condition. In many instances, staying on top of the medications required to treat chronic conditions can be as complex as managing the condition itself.

For patients managing a chronic disease, taking and managing medication becomes part of their daily routine for the foreseeable future. Medication therapy becomes the new norm, as does managing side effects and contraindications. But remembering all the do's and don'ts can be hard for even the most attentive patient.

In many instances, staying on top of the medications required to treat chronic conditions can be as complex as managing the condition itself.

Patient interactions in the physician's office are typically brief, and the pharmacy experience may be even more so; it's usually transactional in nature beyond the well-intended "Do you have any questions?" What's left is a patient trying to navigate their life with the small amount of information given—and often with a whole host of questions that arise later. In many cases, what results is a guessing game of pills and self-medication and ineffective results.

Digital Companions Present a New Option

As patients struggle to manage their chronic conditions, a better solution has emerged to help them regulate their drug therapy: the rise of digital companions. These devices use a smartphone application and digital platform to connect users with their own drug treatment guide. Users can input their medications into their personalized app and receive instructions, support and guidance on when and how to take their medication. This can include time of day, with or without food, what other medications it can or cannot be taken with and anticipated side effects.

Increasingly, patients are using apps, smartphone lists and digital companions to help manage their health. In this era of digital health advancements, companions aren't just pill reminders; rathery, they are tools to drive engagement with patients to become their own advocates and improve medication adherence. These digital companions also create a digital log of medication history. When given access by a patient, providers can review medication patterns, track treatment progression and use the data as a reference against any issues a patient may indicate during follow-up visits.

Timely Guidance, Prompt Interventions

The latest advancements in digital companions work to connect users with individualized support that delivers guidance specific to each user. This could mean tutorials on how to administer medications, patient education materials on titration schedules, or even chat rooms that connect other patients using the same medication. Companies like Omada Health, Happify and Medisafe have the ability to connect users with friends, family and clinicians to provide support for treatment continuation. This level of personalization and incorporation of human support has proven to increase engagement and support drug adherence.

The Future of Condition Management

Digital health has made many enhancements to help patients manage chronic conditions, helping fill in the gaps where traditional medical settings leave uncertainty and questions. Through the thoughtful use of artificial intelligence, digital companions are becoming more personal and more comprehensive to assist patients throughout their journey. Since no two patients are alike, the guidance and information should resemble their uniqueness and individual lifestyles—and artificial intelligence is making that more of a reality.

With an aging population—and a growing number of younger Americans coping with chronic illness—the need for better support in managing chronic conditions is at an all-time high. Fortunately, seniors seem to be more engaged in their health and are embracing digital tools to stay connected. I believe we will see an increased adoption of digital companions, with future iterations incorporating health and wellness elements to support healthy lifestyle choices to further enhance chronic condition management.

While the incidence of chronic conditions is unlikely to change, how the industry helps patients manage them presents an opportunity to rethink the patient journey. By embracing the innovations of digital health and understanding the complexities of living with a chronic condition, we can design a better experience that enables patients to feel empowered to live life according to their terms. HC

Omri Shor is the CEO of Medisafe, a digital companion platform that provides personalized treatment support to more than 7 million users. He is an expert in digital medicine applications and works closely with major pharmaceutical companies in developing and guiding direct connection to patients via innovative platforms to support improved health. Visit medisafe.com.

Keeping Eyes on Patients at a Distance

How RPM can reduce unnecessary hospitalizations

By Tiffany Horn

Remote patient monitoring (RPM) programs are leading the charge to leverage mobile technology and portable digital devices to successfully monitor patients outside of the hospital. At first glance, remote patient monitoring programs offer an inventive, innovative solution to reduce hospital admissions and overall health care costs; however, the role clinicians play by assessing and evaluating patient data to increase patient engagement is essential to yielding better health care outcomes.

Discovering Opportunities to Improve Patient Engagement

According to a 2015 paper by Faith Birnbaum et al., patient engagement is a term that describes enhancing a patient's ability to fully participate in their own care by equipping them with extensive knowledge and support, resulting in better health outcomes. Patient engagement plays an integral role in health care simply because the more that patients know about their respective diagnoses and condition, the better equipped they are to make the changes needed or recommended to improve their health or to slow the progression of disease.

Remote patient monitoring, along with the use of digital devices, is progressively marketed as a method to facilitate patient engagement. Digital devices can effectively help a patient self-monitor, which improves the patient's understanding of their health because of the dynamic exchanges between the clinician and the patient. The clinical data obtained from a remote patient monitoring program gives clinicians the opportunity to encourage patients to change their behaviors—all while empowering patients to take ownership of their health care journey.

Effective Use of Clinical Support & Data-Driven Coaching

While many patients can implement positive changes while under a doctor's care or in the hospital, they fail to maintain their health care plans once they return to their home environment. Remote patient monitoring programs give patients the opportunity to stay engaged and offer them a regular pathway to obtain consistent, quality health guidance. The use of digital devices provides patients with an overview of their health, while the relationship with their clinician provides patients with the guidance to better understand how the data impacts their specific diagnoses.

RPM-driven encounters give clinicians the opportunity to provide education about the proper usage of digital devices to collect patient data. Patients need to not just understand what the data collected implies about their health; they also need to understand how to properly use their digital devices, since the data will be used to make decisions for and about their ongoing health care. By focusing on patient engagement, clinicians can positively impact how patients view their situation while also providing the means to help patients actively improve their health.

Remote patient monitoring programs give clinicians the opportunity to provide clinical oversight to high-risk or compromised patients, especially those patients who transition from hospital to home. By empowering and supporting patients in disease self-management, clinicians can help patients gain a better understanding of their disease, prognosis and treatment plans. RPM programs provide a pathway for clinicians to focus on improving patient engagement in between doctor's visits, treatment procedures and hospitalizations. It has been proven that patients who are actively involved in their own health care are more likely to adhere to treatment regimens which decreases hospitalizations—especially readmissions—and improves their overall quality of life.

Clinicians can easily review patient data, then use the clinical data to provide specific clinical guidance. If patients are noncompliant, clinicians will be alerted and have an opportunity to take the appropriate action by collaborating with the patient to change undesirable behaviors. The goal is to better understand why the patient is not following the proper steps, as well as to pinpoint any barriers that may be influencing compliance.

By building and maintaining a healthy relationship with the patient, the clinician can proactively address concerns as well as provide education about the importance of collecting the necessary data to improve outcomes. Ultimately, having an easy-to-use pathway to remain connected to

patients between their in-office visits allows clinicians to educate and empower patients to adhere to their agreed-upon treatment regimen, thus improving patient engagement and eventually yielding better patient outcomes.

Understanding RPM Programs

Many RPM programs use Bluetooth-connected devices such as blood pressure devices, blood glucose meters, scales and spirometers to collect patient data in the home, which is then relayed to the care provider and uploaded to a web-based clinical dashboard.

Althought the relationship between health care and technology has evolved over the last couple of decades, it is apparent there is still an opportunity for the health care industry to improve health care delivery and outcomes with the use of digital health devices. The use of digital devices adds great value to care delivery by providing the necessary data for clinicians to use as a part of their efforts to connect with patients about their health.

Many high-risk patients participate in remote patient monitoring programs with the hope of improving one or more of their diagnoses; however, clinicians can use this as an opportunity to meaningfully improve the overall health and wellness of patients in a managed population. Reviewing vital signs and care plans and addressing noncompliance alerts offer up entry points for skillful clinicians to discuss other critical aspects, such as: improving exchanges between clinicians and patients to improve communication; educating patients about how to successfully navigate the health care system; using clinical data to collaborate with patients to lessen symptomology and disease progression; and helping patients engage in their own health while showing them the importance of daily self-management.

A solid remote patient monitoring program should go beyond just obtaining a blood pressure or blood glucose reading to provide clinical data. Remote patient monitoring should allow clinicians to sustain healthy relationships with patients with the goal of improving patient engagement and outcomes while reducing health care costs. In these trying times, it is even more apparent that health care organizations must reframe their care model and their approaches to care to better serve their patients and achieve positive outcomes. Although there are many ways to accomplish this goal, remote patient monitoring programs have proven to be an effective way for clinicians to simply do what they do best—improve the lives of their patients. HC

GET MORE INFO

To learn more about remote patient monitoring, visit homecaremag.com/tags/remote-patient-monitoring.

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Building a Social (Media) Circle

4 ways digital communities help seniors aging alone

By Carol Marak

Older adults have lived with the adverse effects of aging alone for decades. Some have learned to accept and adjust to being alone, while others are more susceptible to the negative consequences like poor sleep patterns, depression, cognitive decline, impaired immunity and unhealthy habits.

The COVID-19 pandemic has highlighted these hidden effects. Solo agers already know about the risks because they have battled them for decades, but it took a virus to awaken society in general to the consequences of sheltering alone at home.

Aging alone does bear hardships if a person isn't prepared. However, each of us can modify our lifestyle to better adjust for what's to come. And it is becoming more important to do so, since solo agers are the fastest growing segment in America.

In a 2017 AARP study, researchers found the leading American household to be people living alone, making up 28% of the housing market. The nuclear family—typicaly two partners with two children—came in second at 20%. This growth in the singles segment is surprising because we're often led to believe that households are made up of families. The figure also means the cohort of solo agers will only grow in the years to come.

The Communication Problem

What can people at risk for aging alone do to better prepare for the concerns of isolation and loneliness? The coronavirus pandemic and the need to socially isolate shed light on the worst condition that aging alone creates—having no one to talk to or discuss worries and problems with. How do people find mutual aid or groups to serve their social and other needs if they aren't able to communicate or help each other in a meaningful way?

Is there a way to get the same type of camaraderie using digital means? Is there a virtual support network that seniors can create for themselves, so they have people to help with their needs as they age?

Digital Communities

There are a few digital platforms that have developed or deepened during the pandemic to offer communities of support. Some websites offer games, discussion groups and classes. Here are some of the platforms used by seniors, which you may want to share with patients and clients.

Facebook Groups

Over 50% of people on Facebook are 65 and over. People over 50 are the fastest-growing demographic on the platform. Seniors originally joined Facebook to interact with their kids and grandkids. Now, they also are using it to form digital bonds with those their age who have similar interests. There are thousands of Facebook groups for retirement, aging alone, chronic illness, grief, being an empty nester, senior fitness and more.

Highway61

Highway61 provides real-time conversations throughout the day focused on those over 50. This platform was launched by another senior to combat pandemic-induced depression because she missed her friends at the local senior center. Discussions include live games such as trivia and charades, travel, classic movies and music, as well as grief, aging alone and chronic illness support groups. Highway61 provides a social circle for seniors to interact with and support one another.

There is an active aging alone discussion where solo agers share their stories, provide each other with support and guidance and discuss various solutions on how to properly plan for a life by themselves. The weekly discussion group is an example of a digital community of support that allows people from all over the United States to feel connected to each other over being in a similar situation.

Nextdoor

Nextdoor is an easy way for seniors to communicate with other people in their neighborhoods, and not just other seniors. It links people by location rather than age. Nextdoor allows you to ask questions, ask for resources and generally help one another out.

GetSetUp

GetSetUp.io offers Zoom classes every day to help seniors brush up on important skills ranging from tech tips ("iPhone Basics: All You Need to Know," is one example) to cooking and diet to virtual travel. The platform also has discussion groups on a variety of topics.

It took a virus to awaken society in general to the consequences of sheltering alone at home.

Lifelong Learning Institute

The Lifelong Learning Institute in Chesterfield, located in the Virginia county of the same name, provides online classes on intellectual and cultural subjects and other ways to share experiences and talents in a welcoming atmosphere.

The Benefits of Digital Bonds

There are many benefits to building virtual relationships with others in an online circle. Here are four basics:

1 Similar interests
No one you know may like to play video games or watch classic movies. By using digital means, you are able to find others who like to talk about the same topics as you for hours and develop a friendship based around your similar interests.

2 Similar feelings/circumstances
The internet allows us to find others who feel the same way we do. If you live in a small town, you may not know anyone who has experienced loss of a sibling. By turning to the internet, you are able to find support groups or forums with many people who understand what you are going through. Using digital means to connect with people allows you to feel less alone in whatever you are feeling.

3 Easier connections
The other benefit is that forming virtual bonds with other individuals may be easier for people who are homebound or are more introverted. Many people only have online connections with other people and rely on those relationships to get them through the day. With COVID-19, many people don't have the ability to sustain relationships in person, so forming bonds with people online is the only way to sustain the desire to connect with other humans.

4 Resources
If you have a question or want to know how other seniors have handled a given situation, asking the question online will result in answers from people all over, rather than simply asking the one or two people you know locally.

Whether it's COVID-19 or a mobility issue keeping a senior at home, it's imperative that seniors have a backup for support and someone to check in on them. Growing older and sometimes alone puts people at an increased risk of depression, isolation, cognitive decline and other health issues. Developing a digital community of support can help with all of these things. HC

Carol Marak is an adviser on aging alone and founder of the Elder Orphan Facebook Group. She has earned a certificate in the fundamentals of gerontology from the University of California, Davis School of Gerontology. Visit carolmarak.com.

The Right Stuff

Choosing the right RCM partner for your home health or hospice agency

By Jeremy Crow

A year has passed since one of the most significant changes to payment models in decades took effect—and, 11 months into the COVID-19 pandemic, home health and hospice agencies are continuing to wade through a number of challenges and economic pressures.

The introduction of the Patient Driven Groupings Model (PDGM) in January 2020 affected tens of thousands of agencies that maintain the delicate balance of running a business and providing the care their patients need. On top of these changes, the pandemic has shaken the health care industry and altered the way care is delivered to patients both in and out of the hospital.

In today's environment, homecare and hospice agencies are facing a reimbursement squeeze from the Centers for Medicare & Medicaid Services (CMS), a sharp decline in census due to widespread cancellations of elective surgeries, cancelled visits in general and restrictions on where existing visits can take place.

Managing cash flow—the lifeline for any business—has become more important than ever. However, no one gets into home health or hospice because they want to spend their days crunching numbers, filling out forms or keeping up with ever-changing reimbursement requirements; those who join the industry do so to provide high-quality, high-touch care to patients. Outsourcing billing and coding needs to a third party will not only free up valuable time that can be directed back to patient care or other strategic initiatives, but can also help agencies become more profitable overall.

A healthy relationship with an RCM partner is the same as any other business partnership.

Building a Relationship

A successful relationship with a revenue cycle management (RCM) partner allows an agency to forgo the day-to-day administrative tasks behind billing and coding, leading to a number of agency-wide benefits. Outsourcing RCM also allows agencies to focus on recruiting top clinical talent, rather than filling administrative roles. An RCM partner employs top-notch talent, trained on an ongoing basis and coached specifically in how to help agencies achieve maximum reimbursement and cash flow within a changing regulatory landscape. A scalable partner is also able to follow an agency's journey as it contracts—and ideally expands—to adapt to changes in the industry, such as COVID-19, by providing the necessary talent to meet evolving workloads. As a leader, one of the most challenging responsibilities is to get the best return on your organization's assets. Partnering with RCM services enables a potentially greater return with one of an organization's most valuable assets—people.

The key to picking the right RCM partner is to consider several aspects that help define success for a homecare or hospice agency, including:

1 Performance Indicators

A straightforward indicator of a partner's success is to look at industry standard performance areas, such as days to claim, accounts receivable days by payer type, collection rates by payer and percentage of write-offs by revenue.

The quality of an RCM partner's work will directly affect a business's cash flow and would be properly reflected in their data.

2 Expertise

As a direct extension of an agency's billing and coding department, it's important that potential partners demonstrate expertise in regulatory affairs and customer success. A dedicated regulatory team that maintains a pulse on the industry and liaisons with their agency partner to communicate key changes will help guarantee more short- and long-term success in a rapidly evolving regulatory landscape. Another aspect to consider is how long the RCM service provider has been in business, as its history and relationships could be an indicator of its expertise.

3 Timing

In addition to its knowledge on the latest regulatory changes and the industry overall, a partner should be able to adapt quickly to any changes.

The turnaround time it takes to get coding done directly impacts an agency's success. Timeliness to submit claims, address errors and post payments also impacts an organization's health. From day-to-day operations to industry-defining policies, agencies should be able to expect their revenue cycle services to work congruently with the pace of their needs.

4 Quality Assurance

Along with providing timely service and industry expertise, a good RCM partner can also augment an agency's quality and education program. When thinking about Outcome and Assessment Information Set (OASIS) documentation, it's critical to ensure that every answer is as accurate as possible, as OASIS recording directly impacts both payment and star ratings on medicare.gov's home health agency comparison tool.

For example: What "M" questions do your clinicians most often struggle with or need guidance on? Are they competent on the "GG" and "J" items? How often does the primary diagnosis need to be changed? Are you capturing all pertinent diagnoses to maximize PDGM clinical grouping as well as low and high co-morbidities? With PDGM, all the rules have changed. These are key inputs into your ongoing training and quality program—and elements an RCM partner can help address.

Measuring Your Relationship

A healthy relationship with an RCM partner is the same as any other business partnership. It should have clearly defined roles, processes and handoffs so agencies know who is doing what at what time and how that information will be communicated back and forth.

Success can also be defined by measuring the key performance indicators mentioned above, like days to claims, aging percentage of write-offs and turnaround time. Days to claims is a strong indicator of cash flow and how well the agency and partner are working together, as both the RCM provider and agency are dependent on one another for positive outcomes. The aging percentage of write-offs and turnaround time are factors in how RCM partners measure themselves and also directly impact the success of the partnership. A helpful RCM provider can be expected to provide these metrics proactively via a report card of sorts.

Managing Risk

As with every business relationship, there is always perceived risk in pursuing a new partnership. However, revenue cycle services are a good, low-risk way to offload day-to-day responsibilities so agency-centric talent can work on more specialized tasks, including freeing up time for management to dedicate to strategic and long-term initiatives.

Evolving for Success

Today's agencies need to be agile in order to best meet evolving industry demands, from redefining care visits to staying up-to-date on regulatory and policy chances. Outsourcing day-to-day tasks like billing and coding to an RCM partner creates more time and energy to focus on caring for patients, while providing more resources and opportunities to maximize reimbursement and cash flow.

While current business models may work for many agencies right now, a major takeaway from 2020 is that adapting to sudden and unexpected change is what truly defines the success and longevity of a business.

While a system may not be broken, there is always room to make it better. HC

Jeremy Crow, PMP, is director of revenue cycle services at HEALTHCAREfirst. He has more than 15 years of experience supporting clinical and financial operations for a range of healthcare organizations, most recently consulting for home health and hospice businesses at Simione Healthcare Consultants. He has served as a senior software executive, information technology consultant and certified project manager.

Time to Step Up

Understanding & preventing elder abuse in the home

By Kristin Easterling

Elder abuse can happen anywhere—including in a person's home. Older adults may be mistreated by family members, caregivers, strangers or friends. An estimated 1 in 10 Americans older than 60 have experienced some form of abuse, according to Julie Schoen, deputy director of the National Center on Elder Abuse, which is housed at the Keck School of Medicine of USC. And that may be a low number, as elder abuse is thought to be underreported.

A study in New York state found that for every elder abuse case known to programs and agencies, 23 cases were unknown. When it came to financial exploitation, for every case that reached authorities, 44 went unreported. A national elder abuse incidence study published in 2003 estimated that only 1 in 14 cases of elder abuse ever comes to the attention of authorities.

One high-profile case emerged in 2007, when Brooke Astor, the wife of the late billionaire Vincent Astor (a member of the prominent Astor family), was financially abused by her son, Anthony Marshall. He not only siphoned off millions through his power of attorney but also reduced Astor's care level, resulting in neglect. Astor's grandson, Philip Marshall, filed for guardianship and eventually testified against his father in the case.

> **1 in 10** **estimated Americans older than 60 have experienced some form of abuse**

Elder abuse is a hard topic to tackle. Seniors can face a variety of abuse, from neglect to physical abuse to sexual abuse. This can affect their ability to age at home, as the trauma from the abuse may exacerbate cognitive decline or send the victim to the hospital. If experiencing financial abuse, seniors may find themselves unable to keep up with bills and other obligations, forcing a move to a facility.

Home health agencies can help by training caregivers to watch for signs of abuse, said Schoen. Social isolation contributes to abuse, and if a senior is being cut off from others by a family member or friend, staff members should be on the alert.

A Funding Problem

Preventing elder abuse and enforcing the laws around it requires funding. The Elder Justice Act was passed as part of the Affordable Care Act (ACA) in 2010, which authorized $720 million over four years to fund different programs, including the state

Social isolation contributes to abuse, and if a senior is being isolated by a family member or friend, staff should be on the alert.

Adult Protective Services agencies that serve as investigators for accusations. The program has received just $50 million in the 10 years since the ACA was passed, according to Robert B. Blancato, national coordinator for the Elder Justice Coalition (EJC), an advocacy group dedicated to raising the profile of elder abuse through the passage of legislation.

“One of the lessons that you learn in [Washington] is that there a big difference between what you get authorized in the passage of the law and what you get appropriated, which are real dollars that go into programs,” said Blancato.

The EJC is pushing for more funding to back the Elder Justice Act. In addition, in 2020, Rep. Ann Wagner of Missouri introduced HR 8114, the Emergency Support for Nursing Homes and Elder Justice Reform Act of 2020. The act legislates nearly $225 million in funding for elder abuse prevention and services for victims, including $60 million for adult protective services between 2020 and 2023.

In a bill related to the Elder Justice Act, funding was provided for criminal background checks for people seeking employment in long-term care facilities. The pilot program demonstrated a high success rate—but less than half of states implemented the program after the law was passed.

“One of the big reasons the states didn’t take advantage of the program was a matching requirement,” said Meredith Whitmire, federal policy and media coordinator for the EJC. “For any funding the feds put up, the states had to match it, and it’s always hard to find money within a state budget.” Whitmire added that some states also had laws prohibiting a background check and an unwillingness to go through the lawmaking process to change it.

The Need for Data

The Elder Justice Act did create a national reporting system for instances of elder abuse, the National Adult Maltreatment Reporting System (NAMRS). The goal is to get wider reporting of elder abuse and a more accurate picture of the problem.

Before NAMRS, states reported their own data in different ways, often leading to confusion, said Whitmire. There were also outdated reporting systems nationwide.

Adult abuse prosecution lacks the resources and forensic investigative power that agencies working to prevent child abuse have, according to Blancato. Seniors often enter the hospital with

REPORTING ELDER ABUSE: TIPS TO KEEP SENIORS SAFE

- Before beginning your interview, get in the right mind frame. Take a moment to clear your mind of stereotypes—good and bad—about older adults.
- Like victims of other domestic violence, treat older victims of abuse with respect. Conduct their interviews with the gravity their situations deserve.
- Know that people with memory problems can still tell you what happened—especially if an event made an emotional impact.
- Believe their story unless you have specific evidence to the contrary.

a bruise that is automatically assumed to have been caused by a fall. Better forensic investigation could help stop and prevent abuse. A forensics center at the University of California in Irvine acted as a model in investigating elder abuse, exploring how to improve on forensic work in the space. The Elder Justice Act is designed to fund six additional centers that would conduct forensic work specific to older adults.

Without data, Whitmire and Blancato said, the funding isn't coming for the programs to prevent abuse.

Collaborative Efforts

In addition to NAMRS, the Elder Justice Act created the Elder Justice Coordinating Council out of 15 federal agencies that have some role in preventing elder abuse. The secretary of the Department of Health and Human Services acts as chair of the council. The council is charged with identifying and proposing solutions to the problems surrounding elder abuse, neglect and financial exploitation. The council is a permanent group that meets twice a year with the goal of better coordinating the federal response to the elder abuse problem. The council has enjoyed wide bipartisan support—probably because it doesn't require much funding, said Whitmire. The participating agencies don't have to carve out part of their budget in order to participate in a meaningful way.

Blancato noted that there are 64,000 people working for the Social Security Administration who can help prevent financial abuse, but they need guidance and training on what to spot. Coordination with other federal agencies could help improve results.

Finding a Solution

While many of the issues around elder abuse prevention center on future funding, home health providers can help today—both within their agencies and in their communities.

"Constructing community supports and human services for caregivers and older adults can alleviate risk factors tied to elder abuse," said Schoen. "Increased funding can support efforts to train practitioners in aging-related care. Identifying ways to empower older adults will reduce the harmful effects of ageism. And leveraging expert knowledge can provide the tools needed to identify, address and ultimately prevent abuse."

That's especially critical because 95% of seniors live in their own homes, Blancato said.

"Elder abuse occurs in the community, and we need to be sensitized and provide the on-the-ground community-based services that are necessary to prevent the elder abuse that occurs in the home or in the community," he added.

When a homecare provider invests in training to help caregivers identify and report elder abuse, it helps build trust in its services—and can save lives.

"Homecare workers are the eyes and ears when they go into the home," said Schoen. "Whether they notice neglect or see that's there no food in the fridge; noticing bills on the table. Just bringing it to someone's attention and being observant can make all the difference." HC

go online **GET MORE INFO**

To learn more about efforts to prevent elder abuse, visit ncea.acl.gov or elderjusticecoalition.com.

Kristin Easterling is managing editor of HomeCare magazine.

SCOOTERS & POWER CHAIRS

In this directory, HomeCare delivers a monthly breakdown of crucial sections of our annual Buyer's Guide, providing the most up-to-date information on the products and services your business needs. This month, we're covering power mobility products. Here and on homecaremag.com/buyers-guide, you can find the essentials to help your business thrive. HC

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snsscooters.com

NEW ON THE MARKET

Hand-picked by the editors of HomeCare & our team of industry experts, these products are the newest frontrunners shaping the homecare marketplace. Stay tuned in every issue for more industry-leading solutions.

1

1 Oxygen Tank Holder

ARMADILLO MOBILITY ACCESSORIES

The Armadillo Oxygen Tank Holder is made of durable fabric that holds both E- and D-cylinder oxygen tanks. The three-pocket design provides extra compartments to hold personal belongings or tank supplies. The adjustable straps allow users to customize the position of the tank on a mobility device to suit their comfort needs. The holder has a convenient carry handle at the top of the bag to allow for easy carrying when not attached to a wheelchair. Available in grey or white.
Visit worldsbestaccessories.com.

Check 200 on index.

2

2 Caregivers Calendar

CAREGIVERS' COMFORT

Caregivers Calendars began in 2013 and provides exclusive features and benefits to all caregivers. Calendars are downloadable and printed and include a second monthly calendar for patient appointments and medications, resources, inspirational messages and monthly to-do items, making the caregiver the priority. The calendar is 28 pages total.
Visit caregiverscomfort.com.

Check 201 on index.

3

3 Wheelchair & Rollator Carrier

STEADY ENTERPRISES

Wheelchair and rollator-walker carriers from Steady Enterprises are a convenient way to take a rollator walker or wheelchair wherever you go. They work well on cars, trucks, vans, SUVs, ATVs, golf carts and even motorized scooters. The wheelchair carrier will also accommodate side-to-side folding walkers, upright walkers and transport chairs. Both carriers accommodate regular and bariatric sizes. Carriers fit into a standard 1.25-inch hitch receiver.
Visit steadycarriers.com.

Check 202 on index.

4

4 Medication Management App

UNITED MEDICAL EQUIPMENT BUSINESS SOLUTIONS NETWORK, INC.

The medication management app from United Medical Equipment Business Solutions Network is designed specifically for caregivers and seniors. This tool is great for medication management and to have information at your fingertips when you're on the go. Available on the AppleStore or GooglePlay.
Visit medicationmanagement.app.

Check 203 on index.

LIFTS & TRANSFER DEVICES

1

2

3

4

1 Beasy Transfer Boards

BEASYTRANS SYSTEMS

BeasyTrans Systems has designed a premium quality transfer system. With this "no-lift" transfer system, caregivers can glide patients from one location to another without lifting, twisting or pulling. The design of the gliding, rotating seat allows the friction of the move to remain on the seat instead of on the patient's skin and bones. Some patients are even able to use these transfer systems independently. Consistent safe transfers will eliminate stress and encourage patients to get out and do things they thought they could never do again; they allow them to remain in their own home. Visit beasyboards.com.

Check 204 on index.

2 AP Series Portable Ceiling Lifts

HANDICARE

The AP Series of Portable Ceiling Lifts from Handicare are designed for in-home caregivers who require a reliable, worry-free portable lifting solution where safety matters. Built using the same technology found in lifts in hospitals and long-term care facilities, with a streamlined and portable form factor designed for homecare. The AP-300 will appeal to customers with an immediate need for an entry-level ceiling lift, while the AP-450 matches all the same features of its younger brother but adds complete lift data and diagnostics through an advanced digital handset with an increased safe working load. Visit handicareusa.com.

Check 205 on index.

3 Lavin Lift Straps

LAVIN LIFT STRAPS

Lavin Lift Straps are an accessory to patient lifters used in institutions and homecare. These straps are perfect for homecare and bariatric patients, wound care, catheter insertion and procedures requiring the secure lifting of the limbs or lower body. Hospice, extended care and others will be able to have one caregiver safely treat patients. Caregivers will no longer be required to logroll and lift incontinent patients or hold limbs for treatment. Visit lavinlift.com.

Check 206 on index.

4 Protekt Take-A-Long Folding Electric Patient Lift

PROACTIVE MEDICAL PRODUCTS

The Protekt Take-A-Long Folding Electric Patient Lift represents a new standard in full-body lifts for individuals who travel or have storage issues in their homes. The small footprint is ideal for home use. It easily folds up to fit in most automobile trunks for transport or travel and is lightweight and easy to move at 84 pounds. Visit proactivemedical.com.

Check 207 on index.

CPAP

1 Wizard 310/320

APEX MEDICAL

Mask selection is a critical element when it comes to CPAP therapy. With a user-centered design philosophy in mind, the Apex Wizard 310 and 320 feature an ergonomic cushion design, a flexible mask frame with soft forehead support and breathable headgear, delivering effective therapy performance along with superior comfort and convenience. Visit apexmedicalcorp.com.

Check 208 on index.

1

2 Z2 Auto CPAP

BREAS

At just 6.48 inches by 3.30 inches by 2.02 inches and 10.5 ounces, the Z2 Auto CPAP allows patients to take their sleep apnea therapy anywhere they want to go. The Z2 Auto does not require a special mask or tube. Any mask can be used as long as it does not have a proprietary connection. The Z2 Auto CPAP is data-capable and records all information on events and compliance. The free Nitelog 2.0 mobile app for iOS or Android syncs with the Z2 Auto via Bluetooth for reviewing sleep data. Visit breas.us.

Check 209 on index.

2

3 SleepWeaver Prevent

CIRCADIANCE

The SleepWeaver Prevent, which uses an integrated KN95 Mask to filter exhaled air, provides filtration of airborne particles for patients with possible respiratory infections, reducing risks to staff and others around the patient. Circadiance is offering this new combination CPAP and filter mask to address risks to health care personnel and visitors from PAP therapy during the COVID-19 public health emergency. Visit circadiance.com.

Check 210 on index.

3

4 Evora

FISHER & PAYKEL HEALTHCARE

Introducing the F&P Evora, Fisher & Paykel Healthcare's new compact nasal mask for the delivery of PAP therapy to treat obstructive sleep apnea, featuring CapFit headgear, which is designed to be put on like a cap. The floating seal and stability wings are Fischer & Paykel's next generation of Dynamic Support Technology, allowing freedom of movement while keeping the mask in place comfortably throughout the night. Visit fphcare.com.

Check 211 on index.

4

5

6

7

5 DreamWear Silicone Pillows

PHILIPS RESPIRONICS

Aiming to address mask refit and therapy compliance challenges for both patients and providers, DreamWear Silicone Pillows is the latest addition to Philips' modular DreamWear system, which is designed to simplify setup by offering multiple cushion options on one mask frame. This helps drive business efficiencies for providers by allowing for easy exchange of cushions during titration with minimal disruptions, while offering renewed freedom of choice to patients with a new, lighter pillow option. Now, with three cushion options sized the same way against one mask frame, providers can serve more patients with less inventory. Visit philips.com/sleep.

Check 212 on index.

6 AirSense 10

RESMED

ResMed's AirSense 10 is one of the world's most commonly used CPAP and APAP machines. Each machine is cloud-connectable and compatible with ResMed's patient engagement app, myAir, which provides nightly myAir score reports, personalized coaching and more. A user-friendly device, it includes a built-in humidifier, as well as a climate control auto setting to make breathing more comfortable. Its AutoRamp feature provides low airflow pressure to help patients fall asleep, then steadily increases to the user's unique prescribed level. The AirSense 10 Series includes four therapy modes: CPAP, Elite, AutoSet and AutoSet for Her. Visit resmed.com.

Check 213 on index.

7 Adjustable Deluxe CPAP Masks

SUNSET HEALTHCARE SOLUTIONS

Patients can rely on Sunset's Adjustable Deluxe CPAP Masks for customizable comfort and great value. The Adjustable Deluxe CPAP Masks are the perfect option for those seeking hard-to-find adjustable forehead support. Available in Full Face and Nasal versions, the masks feature an adjustable T-piece for enhanced fit, more support and reduced pressure points. Both masks include 360-degree dual swivel elbows and ultra-lightweight, replaceable silicone cushions for optimal seal and comfort. Sunset also offers a Deluxe CPAP Mask for those seeking a clear line of view during treatment. Visit sunsethcs.com.

Check 214 on index.

BEDS

1

1 Hi-Low Adjustable Beds

ASSURED COMFORT

Assured Comfort Hi-Low Adjustable Beds promote wellness and provide comfort while watching television, reading or recovering. The hi-low feature is perfect for those requiring therapy, allowing the bed surface to be raised for therapist convenience or allowing for easier transfers in and out of bed. Choose from three models in twin, full, queen and split-king sizes. Beds feature quiet remote-control operation. Select a premium mattress that works just for you. Assured Comfort Hi-Low foundations can typically retrofit an existing bed frame or choose from an extensive line of headboards and footboards.
Visit assuredcomfortbed.com.

Check 215 on index.

2

2 Adjustable Bed

FLEXABED

Flexabed's top-quality adjustable beds are handcrafted and completely customizable to meet various sleep needs and preferences for the best sleep success. All orders are also processed and shipped within five working days. Flexabed offers comfort and convenience, with precise support, effortless touch controls, and a form that adjusts to fit your body so you can achieve the best rest. Visit flexabed.com.

Check 216 on index.

3

3 Rotor Assist Bed

GREAT LIFE HEALTHCARE

In keeping with Great Life Healthcare's goal of returning dignity to clients, it has introduced the newest version of the Power Rotor Assist Bed with enhanced remote with lockout function. The rotor assist combines the powered head and foot sections of other beds with a revolutionary power rotation of the main surface to allow easy exit and entrance for patients and their caregivers. Users can also enjoy rotation to have conversations with loved ones, eat or have personal therapy. The bed comes standard with large 6-inch casters with central lock, side rails and honeycomb gel mattress. Visit greatlifehealthcare.com.

Check 217 on index.

4

4 Kalmia Perfect Height Bed System

PARKS HEALTH PRODUCTS

Meet the Kalmia Perfect Height Bed System. Perfect for short, tall or in-between, this bed features an automated control—enter and exit at the optimum comfort level. It's got all the adjustable features: head and foot elevation, zero gravity to reduce muscle pain and sleep apnea, a massage feature and a climate-controlled mattress. It comes in multiple sizes and looks like any premium bed. Visit parkshealth.com.

Check 218 on index.

5

5 Step2Bed

STEP2HEALTH

The step2bed is a bedside-assist device designed to reduce the risk of falls and help seniors age in place. A safer way to get in and out of bed with the safety of a perpendicular handrail and the utility of an extra-wide step. It also features motion-activated LED lighting and adjustable step height. Made of steel to support up to 400 pounds, it is height adjustable from 2.5 inches to 7.5 inches. Visit step2health.com.

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- ◯ 05 Home Health Agency/Nursing (Medical)
- ◯ 16 Hospice Agency
- ◯ 12 Personal Care/Home Care Services (Non-Medical)
- ◯ 14 Long Term Care Facilities (SKNF, Assisted Living)
- ◯ 08 Physical Therapy/Occupational Therapy
- ◯ 07 Manufacturer/Manufacturer's Rep Firm/Distributor
- ◯ 10 Other *(Please Specify)* ______________________

3. What other areas of business is your company involved in? *(Check all that apply)*

- ◯ 41 Home Medical Equipment Provider
- ◯ 42 Hospital with HME
- ◯ 43 Independent Pharmacy/Chain Drugstore
- ◯ 44 Specialty Pharmacy (Compounding/Infusion)
- ◯ 45 Hospital with Home Health Agency
- ◯ 46 Home Health Agency/Nursing (Medical)
- ◯ 47 Hospice Agency
- ◯ 48 Personal Care/Home Care Services (Non-Medical)
- ◯ 49 Long Term Care Facilities (SKNF, Assisted Living)
- ◯ 50 Physical/Occupational Therapy
- ◯ 98 None
- ◯ 99 Other (Please Specify)______________________

PROVIDER PROFILE

Giving New Meaning to 'Just Checking In'

Company provides health care IT support & caregiving for patients

By Kristin Easterling

There are doctors who specialize in everything from allergies to urology. And then there are MDs who focus instead on data. Afua Aning is one of those.

Aning is a physician informaticist and founder of My Just Checking In, a company based in Darien, Illinois, that specializes in information technology support for health care organizations—and also in providing part-time caregivers for welfare checks, companion care and other services. The company's caregivers work in nine counties in Illinois and six in Indiana.

The organization's unusual name was inspired by the way providers check in on patients and IT providers check in on their customers. It's sometimes called at-the-elbow support, or ATE.

When she started the company, Aning drew on her own experience working as a part-time caregiver while studying for her medical board examinations.

"I realized the importance of this role and how there is a need for caregivers with today's huge baby boomer generation," she said. "However, I had an opportunity to get into the IT field based upon my medical education. With today's aging society and technological advancement, there is an increased need for information technology and a medical background, but I still wanted to help serve the growing homecare market."

Aning emigrated from Ghana with her family. She received a bachelor's of science from the University of Illinois at Urbana-Champaign and her medical degree at Central America Health Sciences University.

"Being from Africa and seeing my parents go through the transition of integrating into a new country has really given me the determination and drive to succeed," Aning told HomeCare. "I try to model myself after driven people like Steve Jobs or Elon Musk. However, the money or success are not apparent yet in my life, but definitely the determination and willingness to sacrifice are."

Aning worked in physician support and as an IT consultant before founding the company in 2018. Then, 2020 happened.

The organization's unusual name was inspired by the way providers check in on patients and IT providers check in on their customers.

"Even from just a year ago, COVID-19 has changed how seniors are interacting with medical providers through information technology," she said. "People that previously would only go to their doctor are now seeing their doctors online. This increases the need for doctors to be able to see clients online, give lab results and do consultations that previously would not have been possible. Payers, such as Medicare, have also changed to allow more compensation for internet visits. In addition, more families would rather have their loved ones stay at home instead of nursing homes because of Covid-19. There has been increased need for caregivers nationwide."

All of those online connections mean additional needs for IT support and has made compliance even more important, Aning explained.

"Compliance is important because in today's increasingly technological environment, health care providers, payers and users need to stay abreast of the latest technology and systems. New government mandates require the IT professional to be knowledgeable about compliance as well as be capable, flexible and reliable."

"Our IT team brings all these capabilities to our clients; therefore, providing them peace of mind," she added. HC

Kristin Easterling is managing editor of HomeCare magazine.