

THE VOICE

 Home Care
Association of America

.....
SUMMER
2022
.....

A PUBLICATION OF THE HOME CARE ASSOCIATION OF AMERICA



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ABOUT HCAOA

As the industry's leading trade organization representing home care agencies and their suppliers across the country, the Home Care Association of America (HCAOA) strives to provide member agencies with practical resources to enhance operations and margins and improve training and quality within our industry.

MISSION, VISION, & PURPOSE

MISSION | The Home Care Association of America is the trusted voice of the home care industry, strengthening our members through advocacy, education and research.

VISION | Home care empowers all those in need to live their best lives wherever they call home.

PURPOSE | To provide leadership, representation, and education for the advancement of home care and provide a strong unified voice to speak to the issues of concern within the Home Care industry.

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Establishing National Standards of Care



Collecting, Evaluating and Utilizing Data to Validate the Value of Home Care



Embedding Home Care in the Healthcare Ecosystem



Supporting Caregivers: Recruitment, Training, Career Pathing



Financing Care in an Era of Rising Longevity



Addressing Immigration to Ensure the Caregivers We Need

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“In God we trust. All others must bring data.”

—W. Edwards Deming,
engineer and statistician

In the last issue of *The Voice*, we outlined HCAOA's mission to strengthen you, our valued members, through advocacy, education and research. We strive to provide member agencies with practical resources to enhance operations and margins and also improve training and quality within our industry. One of the best ways to accomplish those goals is through the collection, analysis and dissemination of data.

HCAOA BELIEVES IN THE POWER OF DATA.

Like the quote above, we know that good data helps businesses make better decisions, identify better solutions and improve processes in better ways.

To say this issue of *The Voice* is driven by data is an understatement. In the following pages, you will find insights from two distinct reports:

The 2022 State of Home Care: Industry at a Crossroads, our own report showcasing industry data and policy priorities concerning the state of home care in the United States.

The Home Care Pulse 2022 HCAOA Benchmarking Report, a report compiled from surveys submitted by HCAOA member agencies that provides reliable metrics to help you understand how your agency is performing in comparison to the industry.

“Nobody should try to use data unless he has collected data.”

Quoting again from Deming, data is not useful unless it is relevant. Market data is helpful in determining your priorities in comparison to industry standards, but information collected in your own agency can go

much further as you seek to discover how to best align your specific business goals.

We encourage HCAOA members who have not implemented data into their operations to take time to collect information that applies to your agency, employees, and clients. **If you are not sure where to start, or the idea of collecting data seems overwhelming, the articles in this issue will help.**

This issue of *The Voice* offers you the tools you need to understand:

- Why data collection matters,
- What data you should be collecting,
- How others in the industry are leveraging their data with success.

We know there are real people behind the numbers. The value you provide to clients and their families cannot be quantified. The compassion and support your caregivers give to the aging population is immeasurable.

However, we also know the demand for home care is growing more and more every day—straining home care providers' limited resources. We truly believe that data-driven strategies, like those shared in this issue, can address the challenges within your agency and enable you to provide the best outcomes for your clients and protect their quality of care.

I look forward to hearing what you learn.



Vicki Hoak

Vicki Hoak
HCAOA CEO



STATE OF HOME CARE INDUSTRY AT A CROSSROADS

Newly released report shares valuable information about the state of home care in the U.S. and six ways to address home care's greatest challenges



STATE OF HOME CARE

INDUSTRY AT A CROSSROADS

New Report Reveals Condition of Home Care in U.S.

Home care leaders and policymakers called to unite around industry-changing policy initiatives to enable Americans to age with comfort, safety and dignity

Last year, Home Care Association of America sent out a survey to our members. From COVID and caregiver shortages to wages and lost business, you shared your honest perspectives and insights. We thank you for your trust.

Informed by your responses, HCAOA set out to build the case for the growing need for and value of professional home care. With the “State of Home Care: Industry at a Crossroads,” HCAOA is taking the charge you have given us—to lead our industry into the future, grow our industry’s credibility and advocate for solutions to the challenges the home care industry faces.

Recently, the Home Care Association of America, in partnership with the Global Coalition on Aging (GCOA) released a new report “State of Home Care: Industry at a Crossroads.” The report clearly lays out the increasing need for and value of home care, the challenges the home care industry faces now and in the future, and new policy positions to address these issues.

Spotlighting faults in our long-term healthcare system, “State of Home Care: Industry at a Crossroads” calls on home care industry leaders and policymakers to unite around initiatives that address the rapidly growing demand for care and to help Americans age in comfort, safety and independence.

“With the growth of the Medicare population projected to increase by 75 percent in the next 30 years, coupled with increasing life expectancies and health complications, addressing the shortfalls in care for older Americans must begin now,” said HCAOA CEO Vicki Hoak. “This report provides policy positions home care leaders can champion to elevate the caregiving profession and provide Americans with the care they need, want and deserve in their homes.”

Report Is a Valuable Resource

The in-depth research, clearly defined industry challenges and attainable policy positions in the “State of Home Care” will benefit the home care industry as a whole.

Home care leaders and providers can use the information in the report to:

- Clarify and differentiate home care from other types of home health with helpful charts and visuals,
- Explain why the demand for home care is growing and the value of home care with statistics and well-thought-out rationale,
- Define the many challenges facing the home care industry,
- And join with other HCAOA members to advocate for vitally important changes in the long-term healthcare system with stakeholders, policymakers and other industry leaders.



Two Ways to Access Report!

Online: www.hcaoa.org/state-of-home-care-industry-at-crossroads.html

Order copies: membership@hcaoa.org

Home Care at a Crossroads—Policy Position Icons

HCAOA is leading the home care industry into the future with the policy positions in the “State of Home Care: Industry at a Crossroads” report. Each of the articles in this issue of *The Voice* relates to one or more of these policy positions, indicated by the icons below.



Establishing National Standards of Care



Supporting Caregivers: Recruitment, Training, Career Pathing



Collecting, Evaluating and Utilizing Data to Validate the Value of Home Care



Financing Care in an Era of Rising Longevity



Embedding Home Care in the Healthcare Ecosystem



Addressing Immigration to Ensure the Caregivers We Need

The importance of data in home care is a repeated theme members will see throughout this issue of *The Voice* and the Home Care Association of America's communications throughout the year.

HCAOA's policy priority to collect, evaluate and utilize data to validate the value of home care is not an empty platitude, but a serious appeal to members to see the vast potential to grow the home care industry.



Guy Tommasi, Jr., BS, MS | Managing Director

LIFETIME Care at Home, LLC | Guy Tommasi, Jr., BS, MS, is the Managing Director for LIFETIME Care at Home, LLC, a non-medical home care provider in Guilford, CT. His 40-plus-year background spans the fields of hospital, home health, and home care systems. Tommasi began collecting measurable data outcomes in 2016 as a competitive differentiator. This data has improved LIFETIME's bottom line with double-digit returns over the last 5 fiscal years and earned the company multiple awards.



Jeff Wiberg | Chief Executive Officer

Family Resource Home Care | Jeff Wiberg is the CEO of Family Resource Home Care, overseeing strategy, culture, and vision for the independently owned home care agency with over twenty locations across Washington, Oregon, and Idaho. Jeff has over a decade of experience in the healthcare continuum and is a nationally recognized thought leader in the home care industry.



Bob Roth | Managing Partner

Cypress HomeCare Solutions | Bob Roth is Managing Partner of Cypress HomeCare Solutions. Bob and his family created Cypress HomeCare Solutions in 1994. With nearly 38 years of consumer products, health care and technology experience, Bob has successfully brought the depth and breadth of his experience to the home care trade. Cypress HomeCare Solutions has received many awards over the years.



The Growing Urgency for DATA COLLECTION in Home Care

Without data, your home care agency may fall behind.

The healthcare and health insurance reimbursement landscape are changing rapidly. From the changes in Medicare Advantage plans in 2018 to the spotlight on home care provided by the pandemic and our rapidly aging population, healthcare providers' and insurers' interest in the potential benefits of home care has grown and will continue. Home care providers who can empirically prove their value with data and speak the language of healthcare with numbers will surpass their competitors.

Additionally, the home care industry needs caregivers. Providers can use data to recruit them. Research shows that the desire to do meaningful work that helps others is a major characteristic of the millennial generation.

Now is the time to collect and use data to influence the future of our industry and those who we need to persuade – policymakers, Medicare, health insurance plans, healthcare referrers, families and prospective employees.

We interviewed three leaders of independent agencies about their perspective on home care data collection, the benefits of data collection and how to begin—including what data points to collect. The following insights will help as you consider collecting data.

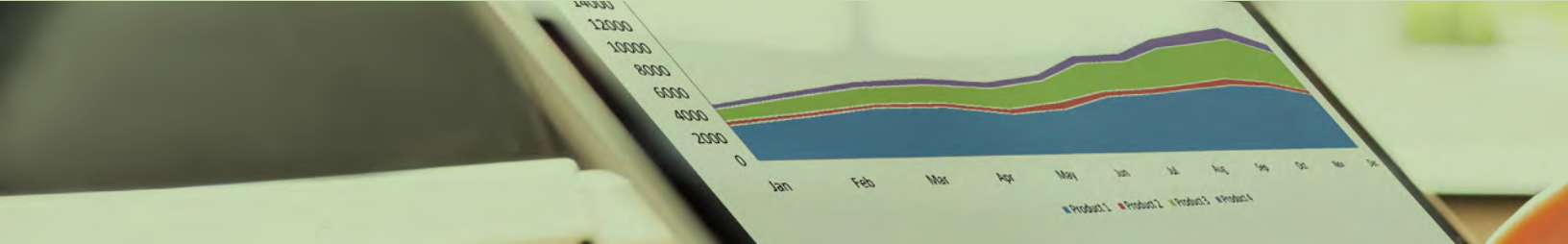
Data Makes a Difference

According to LIFETIME Care at Home's Managing Director Guy Tommasi, LIFETIME Care at Home got into data collection by accident. About six years ago, LIFETIME Care at Home needed to do something to differentiate themselves from their 700+ home care competitors in Connecticut.

Tommasi's careful research and foresight directed his team to focus on collecting data that could be applied to caregivers and clients and also the outcomes and pain points that challenged their stakeholders.

The move changed the trajectory of LIFETIME Care at Home, opening the door for growth and, most recently, a merger with Yale New Haven Health System—one of the largest healthcare systems in the state.

Jeff Wiberg, CEO of Family Resource Home Care, is a self-proclaimed "data nerd." He believes data informs better decision-making and indicates whether his organization is doing a good job. Family Resource Home Care has always collected data and key performance indicators so they could benchmark themselves against the rest of the industry.



Recently, Wiberg has noticed a strong trend of employees choosing their employer based, in part, upon their mission-oriented focus. Demonstrating the value of caregivers empirically through data, like satisfaction rates and estimated hospital admission preventions, has increased employee satisfaction rates and attracted caregivers.

Managing Partner of Cypress Home Care Solutions, Bob Roth, began his organization following a personal experience caring for his mother after a series of near-fatal heart attacks when she was just 48-years-old. His 28-year-old family business always collects data because of its importance in formulating care plans and providing high-quality services, he shared.

Roth believes data helps to substantiate his organization's place in the healthcare continuum. He sees the opportunity to persuade payers to focus more on the "pre-acute" value of home care to prevent hospital admissions altogether. He believes changing the view of home care to a more holistic approach would enable seniors and their families to have a better quality of life across the board.

The stress of family members caring for another family member 65 and older without the assistance of additional family members, neighbors, friends or professionals is immense, Roth shared. According to a [JAMA study](#), 63 percent of spousal caregivers pre-decease the care recipient and other family caregivers increases their risk for health problems.

"By providing pre-acute care, we are able to keep our clients and families together and extend one's ability to stay in the comfort of their own home," Roth stated.

Data Validates Home Care's Value

Why do home care agencies need to collect data?

"COVID introduced home care faster than we ever could have done on our own. Home care and home health was the core of the pandemic in the home," Tommasi stated. "But we have not done a good job of promoting and elevating the status of home care. Our industry was never challenged from a regulatory standpoint to produce the level of data that was needed in order to meet regulatory standards. Every other piece of the healthcare continuum [has that] with significant financial impacts."

"We're good at what we do. We just haven't told our

story [with data]," agreed Roth. "A label that was given to us many years ago was being called 'non-medical.' And when you refer to something as non-medical, you're telling the world what you are not, but not telling them what you are. We were put into a box of being non-medical, non-clinical, non-skilled."

"[So, the importance of data collection] has changed because we are beginning to recognize how the rest of the world has to look at us," shared Wiberg. "We don't have the advantage of having been validated for decades and decades like the medical industry, thereby equipping actuaries with information demonstrating [home care's value.]"

He added, "[Yet] we have started to see the evolution of Medicare Advantage or various state programs really starting to pay attention to home care... they have seen the need for home care is just huge."

Influencing Insurers, Persuading Policymakers and Reassuring Relatives with Data

Wiberg shared that Family Resource Home Care has used data to justify their services to insurance companies. Some simply do not understand the benefit of home care services and how it benefits clients. Yet, these are the same people who are tasked with providing good services and getting better outcomes for their policyholders.

"[LIFETIME Care at Home] stakeholders look more at satisfaction scores," shared Tommasi. "Medicare Advantage (MA) plans live and die by enrollment. Why? More than 80 percent of MA enrollees are in plans with 4 stars or better. A change by just 1 star has a direct impact on membership of 14-17 percent. MA and other insurance plans are turning to agencies with high levels of satisfaction."

"By capturing the right data—meaning what the pain points of the rest of the stakeholders are—and addressing those as an industry, we are starting to speak their language and we only have one place to go. That is straight up. The credibility becomes incredible," Tommasi emphasized.

Health insurers are not the only ones to persuade, though.

"We use data for referral partners all the time.



Specifically, legislative bodies and policymakers,” Wiberg shared. “When you have data, you are speaking a language that is more empirical and less opinionated. It is helpful for policymakers who are inundated by opinions all day long. [That empirical data] really demonstrates the value and therefore, sways policymakers towards your way of thinking.”

Referring agencies and families also feel more comfortable working with home care agencies whose data supports their claims of quality care.

“[When a home care provider is] able to take the data and go to a family member, it builds credibility and trust to keep their loved one at home. Data should support their outcomes, assertions, and reasons to step up care,” shared Tommasi. “If indeed 80 percent of medical outcomes are a result of social determinants of health, that is screaming, ‘Home care! Home care! Home care!’”

All three agreed HCAOA’s leadership in championing the cause for data collection in the home care industry is valuable to ensure consistency in the data collected.

“If we can provide a reputable, ordered magnitude of empirical data that is consistently collected with rigorous standards, then we will benefit as an industry,” shared Wiberg. “We won’t have to be the ones waving our own individual flags, but there will be a monstrous banner that represents the whole.”

“We have to solve this problem,” emphasized Roth. “We have to make care available to every American that wants it. And how do we get close to that? By telling our story and substantiating it by collecting data.”

What Data Should Home Care Providers Collect

Getting started can be the hardest part of any task, especially when faced with the urgent and important tasks involved in running a business.

“You can easily get inundated with data and be frustrated by it,” shared Tommasi. “[But] if agencies are going to jump in on this great opportunity, it has to start at the top. It has to be part of the daily routine... because consistency is critical. Stakeholders live and die by numbers and data. If you try to pass that off

and they see through it, your credibility is shot.”

Next, Tommasi advises that agencies focus on what their stakeholders really want and need. Focus on things that elevate stress levels, pique pain points and cause challenges that face hospitals, home health agencies, physicians, Medicare Advantage and even families, he recommends.

To start, concentrate on collecting basic data—rehospitalizations, satisfaction, Emergency Department visits, and falls

“Simple is better. If we concentrate on some very basic data—rehospitalizations, satisfaction, Emergency Department (ED) visits, and falls—we can change the industry,” he shared. “Those four issues are the same four pain points that every single stakeholder is experiencing because of Centers for Medicare and Medicaid (CMS) [requirements]. Most of those are centered around functionality and satisfaction, which is what we have been doing for years.”

“And why use terms like that instead of saying activities of daily living (ADLs)? Because if you are going to be like them, you have to talk like them,” Tommasi added.

“Satisfaction scores are something we have long seen as a best practice in our industry,” Wiberg said. “That is so important [because] reimbursement for Accountable Care Organizations (ACOs), as well as MA plans, are in part based on patient satisfaction scores. If you can empirically demonstrate that your agency has highly satisfied clients, it’s going to be a better value proposition for your agency to partner with those plans, payers, ACOs or referral sources.”

“[Cypress Home Care] doesn’t always get people from hospitals,” shared Roth. “But we can track ER visits, falls, and the other piece that is really important—customer satisfaction. And, caregiver satisfaction too. We need that data to substantiate our purpose.”

How to Begin Collecting Data

Start by working with a software provider. HCAOA partners with various software vendors who serve the home care industry whose profiles are on the pages following this article.

"If members are using software that doesn't offer a mechanism to collect data, then they need to sit up and pay attention," Wiberg warned. "The days of 'mom and pop' home care agencies providing care in the same way they have always done it are going to wane. Eventually the funding dam is going to break and even those with means will want to lean into insurance."

HCAOA's Data and Research Committee Helps Members

"Data is really going to substantiate our place in the healthcare continuum," Roth said. "We need to earn our seat at the table. And we haven't quite earned

that because we don't all have the data. That is why Guy and I are co-chairing the HCAOA Data and Research Committee."

The HCAOA Data and Research Committee brings together home care owners and leaders, as well as software companies to bring benchmarks like readmission, ED visits, falls and satisfaction to data collection.

"Currently, we are looking for funding to conduct surveys to set those benchmarks," shared Tommasi. "If we can get this study done, the entire industry benefits and it will catapult the industry to a level that is competitive with everyone else. We just need the funding."

HCAOA members are encouraged to contact Vicki Hoak, Guy Tommasi or Bob Roth, if they would like to know more or participate in the HCAOA Data and Research Committee. Members can reach them by emailing info@hcaoa.org.


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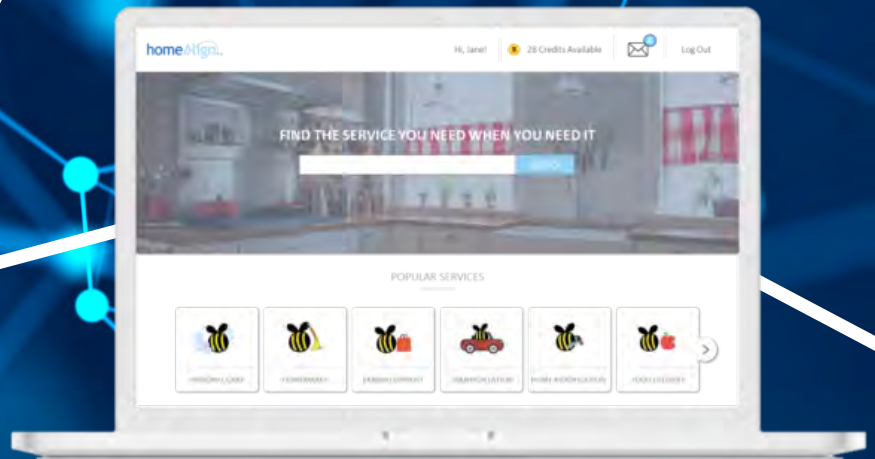
ACCREDITATION COMMISSION *for* HEALTH CARE



Software Solutions for Data Management Needs

Home Care Association of America has a number of associate members who provide software services for home care providers. To help your organization collect home care data to validate the credibility and value of the industry, contact one of the partners listed below to learn more about the services they offer.

 Smarter, Faster, Better The world's best scheduling software for home care agencies		
		
		
		
		
		
		



healthAlign's Model Connects Providers and Payers Easing Processes

While the home care industry faces some significant challenges, there are great opportunities as well.

Andy Friedell, healthAlign's founder and CEO, began the company within a national home care organization to help both providers and payers address issues in fulfillment of care and reimbursement. His model has successfully solved problems, attracting a growing number of payers and providers, as well as an acquiring partner to drive aging-in-place innovation.

In this article, Friedell shares more about changes in Medicare Advantage plans that may benefit home care providers, healthAlign's positive impact on the home care landscape, why home care providers should consider working with third party payers and how agencies can loosen the purse strings of payers by collecting simple home care data points.



Andy Friedell | Founder and Chief Executive Officer | healthAlign™

Andy provides strategic focus to healthAlign™, ensuring that the work of the team is properly aligned with the goals of payers, patients and caregivers. He brings over 20 years of healthcare experience to the job. As Senior Vice President of Strategic Solutions at Maxim Healthcare Services, Andy oversaw the company's nationwide Business Development across strategic accounts as well as program implementation and management for large-scale strategic engagements. His work driving the Product Development function there brought about a Community Based Care Management offering that has been shown to reduce readmissions by over 65% while also driving a 35% reduction in in-patient spending.

Andy came to Maxim from Medco Health Solutions where he worked on the development of the Medicare Part D drug benefit, the early launch of the internet pharmacy marketplace and the regulatory environment for mail service pharmacies. Andy began his career as an aide to former New Jersey Governor Christine Todd Whitman.





Fulfillment of home and community-based services is a challenge for health insurance plans. Their goal is to provide quality services to members, but the ordeal of finding a home care provider, contracting and credentialing them and ensuring service fulfillment are time-consuming tasks—especially when members require service in multiple locations around the country.

Health plans recognized that working with one large, national provider who would handle all of these tasks could provide sizable cost savings. They approached a national home care provider requesting a solution and healthAlign was formed.

Changes in Medicare Advantage Open the Door for In-Home Services

Founder and CEO Andy Friedell and his team made healthAlign into a single point of contact for health plans by building a tech platform to convene multiple providers in 2018. Their efforts could not have happened at a better time.

“In 2019/2020, Centers for Medicare & Medicaid Services (CMS) was loosening up things for Medicare Advantage (MA) plans about the services they can provide in the home, giving them a lot more flexibility,” Friedell explained. “Some [plans] were hesitant and some jumped right in. At healthAlign, we saw it as opening the door to allowing members to access some of the services needed for aging in place.”

Receiving one of the first MA nationwide contracts to start up home care visits in nine states built healthAlign’s credibility in the industry. After branching out as an independent company in 2020, and a recent acquisition by The Helper Bees earlier this year, healthAlign is well-positioned and growing.

Relationships with Insurers Based on Fulfillment of Services

Today, MA plans contract with healthAlign as a convener to bring home care into the home in 33 states.

The appeal of MA plans is growing. In the past year, the number of beneficiaries has increased by nearly 10 percent. Friedell believes the supplemental services that plans offer are the biggest attraction.

“Home care providers should realize that the [MA] plan is looking to build infrastructure support around the [health plan] member and [see] where there can be gaps in areas that they cover and how they can make sure those get covered,” Friedell shared. “There is often a misperception that more utilization is bad, but when [MA plans] look at home care services and choose to cover them, it is because they see the value of the service and they absolutely want the service fulfilled.”

Fulfillment is a main goal of healthAlign. As MA plans continue to grow, the marketplace becomes more and more competitive. If providers are not fulfilling visits under one MA plan, members may become frustrated and choose to move to another plan.

“The plans are actively choosing to cover [home care] benefits,” Friedell emphasized. “They think about home care as an investment and want to see the return on that investment in the form of fulfilled services.”

The Changing Landscape – Acknowledging the Value of Home Care

Other health insurance plans have observed the role healthAlign fills and have hired the organization to take a similar approach.

healthAlign's Referral Growth

2019	150
2020	1,000
2021	2,000
JAN–APR 2022	5,000

This is likely due to insurers' growing acknowledgement of the value of home care.

"We see it from two sides—public growth in plans offering services and beginning to offer more of them . . . [and] a behind-the-scenes growth rate that is actually faster and steeper," he shared. "It is similar to Medicaid's adoption of home care services."

"Since Medicaid launched home and community-based services waivers roughly 40 years ago, the in-home share of all long-term spending has grown from nothing to roughly 60 percent," Friedell said. "During that same period, long-term care spending shrank from half to roughly one-third. That was a 'quiet earthquake.' In 2019, Medicare started allowing plans greater flexibility to cover services in the home. Is this another quiet earthquake?"

The changing landscape can be observed in healthAlign's referral numbers over the past 4 years.

Connecting Health Plans and Home Care Providers

Home care providers have taken notice as well. While some agencies are reticent to work with third-party payers due to past experiences with the onerous process of credentialing, submitting claims or concern about low rates, healthAlign's approach is changing minds.

"healthAlign created the business around making it easier for health plans to connect with in-home providers and making it easier for in-home providers to do work for health plans," Friedell shared. "We are basically a big network of providers—6,500+ providers—with a custom-built technology platform that brings all those providers into one common environment."

healthAlign's technology platform allows home care providers to access multiple health insurance plans with one common workflow—one credentialing environment, one encounter documentation, one invoicing system and one check covering multiple health plan invoices. Friedell says their rates are better than Medicare rates and providers are paid within 14 days by healthAlign, who handles submission of claims to the health plans.

"It benefits both sides. healthAlign works with the plan on their own terms and obtains payment from the plan. If healthAlign doesn't get paid by the plan, we absorb that and the provider doesn't have to," said Friedell. "This approach gives providers a level of safety. They don't have to worry that they won't get paid or have the headache of dealing with payers."

The safety for health care plans comes in the form of fulfillment of services through healthAlign's large network of home care providers. This prevents problems, like staffing issues, from having an impact on the services health plan members receive.

"In healthAlign's system, this is a big part of what we have tackled in our software. Our system watches fulfillment . . . and escalates situations when care is not happening. Then healthAlign team members drill down to find out what happened, getting ahead of turbulence that could exist if the member doesn't get service started when they need it," explained Friedell. "Without fulfillment monitoring, the normal reality is that there are factors that affect receiving care and the health plan may not know what is going on until the member is frustrated and unhappy with the health plan."



healthAlign's common platform also aggregates data collected from all the systems into one common report for health plans—a helpful benefit.



Data Makes a Difference

Friedell strongly believes the collection of data points on the services home care organizations provide will drive the growth of home care reimbursement.

"[Lack of data is] probably one of the biggest barriers preventing plans from more rapidly growing the level of coverage and services in the home. [Health plans] have to associate it with a return on those dollars," shared Friedell. "Intuitively, we know it's there. As an industry, home care has done a phenomenal job of telling the story of our value. We all believe the value, but more needs to be done to empirically demonstrate that. Good work is being done, but more work needs to be done there."



"[Lack of data is] probably one of the biggest barriers preventing plans from more rapidly growing the level of coverage and services in the home."

In conversations with health plans, Friedell finds that insurers want more access to home care data.



Starting with Data that Matters

Adding the job of data collection to all the work a home care agency already does may feel overwhelming, but it could be easier than agencies think, according to Friedell.

"When I was inside of a home care company, my initial belief was that the most important information to a plan was avoidable utilization—like what's the impact we are having on bringing down your costs, readmission rates and things like that," shared Friedell. "Those are important data points, but what was surprising to me was that plans are also interested in data points that sometimes are much easier for providers to gather—like fulfillment rates."

Fulfillment rates are very important to health plans, so Friedell advises beginning there.

Start tracking data by collecting and tallying information on the following:

- How many referrals does your agency accept?
- How quickly do you accept referrals?
- How promptly do you have your first visit?
- Of the referrals you accept, how many of the total number of visits do you fulfill?

"All of that data is very valuable to payers and it resides in the systems of home care agencies," stated Friedell. "Outcomes and clinical data, readmission rates and cost of care are important too, but [fulfillment data] is an easier starting point."

Friedell shared, "I think HCAOA members could absolutely improve their positioning with payers simply by packaging [their fulfillment data] up better and positioning themselves to a payer, saying, 'When you give me referrals, I will accept X percent of them or fulfill X percent.' That is really meaningful to a payer. They really don't want to assign stuff to providers who can't or don't fulfill it."

As home care agencies adjust to the changing landscape, consider how your organization will navigate new health care plan relationships and the collection of data.



Making the Case for Home Care:

New Analysis by BrightStar Care and Avalere

..... Shows Impact of Caregiving on Healthcare



**Shelly Sun,
Founder & CEO,
BrightStar Care**

Shelly Sun is the Founder and CEO of BrightStar Care, a nationwide home health care and medical staffing franchise that provides medical and non-medical care to clients within their homes. Since finding the home care brand 20 years ago, Shelly has transformed BrightStar Care from a single location in Chicago to a \$639M national enterprise. Under Shelly's leadership, BrightStar Care has grown to more than 365 locations nationwide, and its locally owned and operated locations employ more than 16,000 caregivers and 5,700 nurses. By franchising the concept, Shelly was able to diversify and localize the brand's operations and offer an outlet for aspiring and seasoned entrepreneurs to manage their own in-home care businesses.



Overcoming the stereotypes surrounding personal care has been a long-standing hurdle for home care providers. For years, the home care industry has battled public perceptions and fought to prove their value.

As home care agencies have begun tracking data points and utilizing healthcare industry language and measurements, potential partners, payers and clients have begun to pay attention.

Validating Value Propositions with Data

Shelly Sun founded BrightStar Care in 2002 after a first-hand experience with home care. In response, she developed the BrightStar Care model, which centers around registered nurse-led teams operating under Joint Commission standards. Today, the national home care franchise employs more than 16,000 caregivers and 5,700 nurses at more than 365 locations around the U.S.

Sun's team wanted to differentiate BrightStar Care from competitors, but they needed data and analysis to substantiate findings.

"Demonstrating superior clinical outcomes has been a long-standing challenge for the home care industry due to fragmented care standards across states, the lack of standardized measures in personal care, and the lack of visibility home health care agencies have on claims data for patients," shared Sun. "Our team monitored, tracked and collected our own data for months, then we partnered with Avalere Health to measure our data against a matched control group of Medicare Beneficiaries."

Gleaning Insights from BrightStar Founder and CEO, Shelly Sun

In December 2021, BrightStar Care and healthcare analytics firm Avalere Health released findings from an analysis of BrightStar Care's client outcomes and cost benefits.

We caught up with Shelly Sun, founder & CEO of BrightStar Care, to discuss the findings, the value of data, how BrightStar Care is leveraging data and why all home care agencies should collect data.

HCAOA: Why did you feel it was important to do research on BrightStar Care’s services?

Sun: We wanted to highlight our unique value propositions and the positive impact our work has on our clients and their families. With our commitment to push for the future of health care to be in the home, we wanted to show our clients and prospective clients why BrightStar Care is the preferred personal care agency of choice.

Our agencies across the country had been tracking our own clinical outcomes for months. [By analyzing this information, Avalere Health’s findings] suggest that BrightStar Care’s interventions were correlated with lower rates of inpatient admissions, emergency department visits, home health and skilled nursing facility utilization for clients diagnosed with certain chronic conditions. The analysis also concluded that our home care services offer lower costs to payers overall.

HCAOA: How was the analysis performed?

Sun: To reach these results, Avalere Health compared our clients to a matched control group of Medicare beneficiaries and assessed the relative utilization of Medicare services between the two populations for different health care conditions. The average age of the population was 80 years old.

Avalere’s analysis revealed that the change (baseline vs. follow-up) in the total cost of care was up to \$29,902 lower for patients who received BrightStar Care services when compared to patients who did not receive services.

HCAOA: What were three main takeaways from the analysis for your team?

- Sun:** The analysis
- Provided tangible evidence that personal care services, such as medication management, meal preparation, personal care assistance and patient education, can have a positive impact on overall health, resulting in a reduction in healthcare costs and value creation for payers.
 - Demonstrated the important role personal care providers can play in the healthcare ecosystem as patient care shifts to the home and payers optimize their highest-cost beneficiaries by providing supplemental services to address all the social determinants of health.
 - Reinforced recent research from Moving Health Home that showed home-based care can reduce the likelihood of hospital readmissions and reduce mortality for seniors and those with chronic health conditions.

HCAOA: Shelly, you have been quoted as saying, “Data will separate us from the pack.” How has data been a differentiator for BrightStar Care?

Sun: As I mentioned, [data collection] has been a longtime hardship for personal care agencies. Measuring their own clinical outcomes and cost benefits [is challenging] due to major preventing factors that exist in the health care industry.

Avalere’s analysis [of the data we collected] helped highlight the value of outstanding personal care, clinical programming and attentiveness in delivering a higher caliber of care and safety to our clients.

Through this study, we now have tangible findings to demonstrate our superior outcomes to our current and prospective clients—a value proposition other home care brands simply do not have in their arsenal.

HCAOA: One of the Home Care Association of America’s policy priorities for 2022 focuses on the collection, evaluation and utilization of data to validate the value of home care. Do you believe your report with Avalere has validated the value of BrightStar—both as a company and its services?

Sun: Absolutely. This analysis has allowed us to showcase our superior clinical outcomes and cost benefits as value propositions. Although we always possessed the means to measure our own data, partnering with Avalere allowed us to highlight our value propositions on a wider scale due to Avalere acting as a third-party validator of our claims.

HCAOA: Do you believe that all home care organizations would benefit from tracking data points? What are the top 5 data points all home care organizations should track?

Sun: Yes, all home care organizations would benefit if they tracked their own data.

Below are 4-5 points that all home care agencies should be tracking:

- Clinical patient outcomes
- Number of hospital readmissions and ER visits among client populations
- Number of accidental falls and infections among client populations
- Progression of treatment across clients with chronic conditions
- Costs for payers



HOME CARE WORKERS IN THE UNITED STATES

Home care workers, also known as professional caregivers, personal care aides or direct care workers, are an essential part of long-term care for aging adults in the United States. The demand for home care is growing more every day as baby boomers age, live longer and desire to spend their days at home rather than in residential care.

Home Care Worker Profile

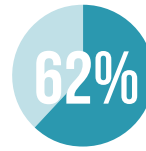


Nearly 90 percent of professional caregivers are **women**



MEDIAN: 47
1/3 ARE 55+

The **median age** of home care workers is 47 years old—nearly 1/3 are 55 or older



More than half of home care workers are **people of color** (62 percent)



Almost 1/3 of home care workers were **born outside the U.S.**

Professional Caregiver Compensation

The demand and opportunities for home care workers have grown significantly in the last decade, but the **compensation for professional caregivers has increased by less than a dollar per hour in the same timeframe.**



Median hourly wage of \$12.12 in 2019—up from \$11.21 in 2009



In every state, the direct care worker **median wage is lower than all other occupations** with similar entry-level requirements



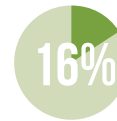
1/3 of home care workers **lack affordable housing**



Nearly half of **caregiver households live below the federal poverty level** and rely on some type of public assistance



Direct care workers rely on **public healthcare** (43 percent), most commonly Medicaid.

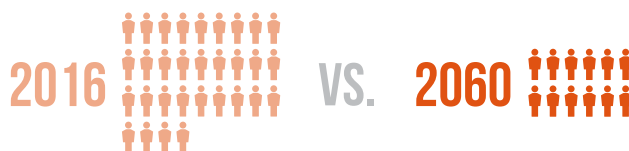


16 percent have **no healthcare coverage**

The Future of Home Care



Declining caregiver support ratio—61 percent fewer people of working age for every adult over 85 by 2060



8.2 MILLION

Increasing demand—8.2 million professional caregiving jobs projected to open between 2018 and 2028 due to attrition (6.9 million) and growth in demand (1.3 million)

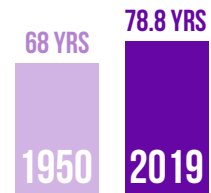
The “Silver” Tsunami in the U.S.



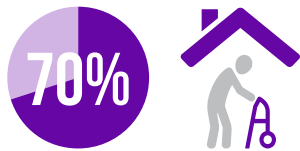
About 10,000 people
turn 65 each day in the U.S.



By 2060, the number of
people aged 65 and over will
grow by 75 percent from 54.1
million to almost 95 million



Average US life expectancy is
increasing—from 68 years in
1950 to 78.8 years in 2019



Someone turning 65 today has a
nearly 70 percent chance of needing
long-term care and support



1 in 5 people over
65 will need care for
more than 5 years



33 percent increase in
demand is projected for
home health and personal
care aides from 2020 to 2030

By 2034, there will be more older adults in the U.S.
than children under age 18 for the first time in history



Information from:

AARP

HCAOA—“State of Home Care: Industry at a Crossroads Report”

Leading Age Report—“Feeling Valued Because They Are Valued”

PHI—“Direct Care Workers in the U.S.—Key Facts”

Census Bureau

U.S. Bureau of Labor Statistics

Administration for Community Living—Administration on Aging

Advocating for HCAOA Member Needs – Caregiver Shortage

Home Care

WORKFORCE ACTION ALLIANCE

In-home care is at a critical point in time and is an issue that can affect all American families. The Home Care Workforce Action Alliance is dedicated to raising public and policymaker awareness around home care workforce issues.

The Alliance is a partnership between the Home Care Association of America and the National Home Care and Hospice Association. Other stakeholder organizations will be invited to join the Alliance to address the several factors contributing to the home care worker shortage.

Voices for Care at Home is a campaign to amplify the stories and voices of millions of America families who are struggling to get the critical care that their families need.

www.homecareaction.com



Caregiver of the Year Award Nomination Deadline July 15



The prestigious HCAOA Caregiver of the Year Award honors the best caregivers across the nation for their tireless work of providing care in clients' homes. These inspiring individuals provide high quality care, dedication to the profession and compassion to their clients, enabling them to live as independently as possible in their own homes.

Nominations for the Caregiver of the Year Award are open through July 15, 2022. All home care agencies are invited to nominate a caregiver for the award. The 2022 Caregiver of the Year will be recognized at this year's HCAOA Annual Leadership Conference in September at a recognition luncheon.

Nominating a Caregiver Benefits Your Business

Besides increasing employee morale, nominating a home care worker for the 2022 HCAOA Caregiver of the Year award gives some nice promotion to caregivers and home care providers.

The recipient of the Caregiver of the Year Award will receive a cash prize of \$1,000 and an all-expense paid trip to the 2022 Annual Leadership Conference in Orlando, FL, as well as special recognition for both the recipient and his or her agency throughout the entire year on HCAOA's website, weekly newsletter and a feature article in *The Voice* e-magazine. The benefits of applying are worthwhile.

Recognizing the Value of Home Care Workers



**Scott Hill, Owner
Right at Home**

Scott Hill is the owner of the Right at Home franchise, in Grand Blanc, Michigan. His team took a few weeks to narrow down potential candidates. They shared that the nomination form was easy to complete. The hard part was selecting which caregiver to recognize!

Hill invested in the Caregiver of the Year nomination process because "the work that our caregivers do is so important to so many families. We wanted to...provide some well-deserved recognition [for their work]. Nominating caregivers for this award is an opportunity to show our caregivers how much we appreciate them."

Hill shared, "It was great to see our story [about the award] on local TV news shows, and in newspapers

and other publications. It was also very exciting that the award was presented [to Greg] at the State Capitol in Lansing in front of some members of Congress."

More Organizations Are Nominating Caregivers

In 2021, more than 250 home care aides were nominated for the award—the largest number of nominees in the award's history.

From the ten finalists, the nominee selected by Scott's team—Greg Gorton—was chosen as the Caregiver of the Year.



**2021 Caregiver of the Year Greg Gorton
receives HCAOA Caregiver of the Year award,
Proclamation and prize monies at the Michigan
State Capitol building**



**CLICK HERE
to Nominate a
Caregiver before
July 15, 2022, on
HCAOA's website!**





HCAOA's Commitment to Advocacy

HCAOA continues to grow in both membership and influence as members become more engaged in advocacy efforts. To support these efforts at both the federal and state levels, HCAOA created a new position—vice president of government relations—and hired Eric Reinarman to fill the role.

According to HCAOA CEO Vicki Hoak, this was a natural next step, as the association has witnessed the growing importance of state and federal advocacy efforts.

"Whether it's promoting a state Medicaid reimbursement rate or meeting with Congressional staff on the importance of supporting families with a tax credit for home care, a trade association's primary role is to advocate on behalf of its member agencies and the people they serve," stressed Hoak. "Adding another staff person who is focused solely on state and federal relations is another indication of HCAOA's strong commitment to advocacy."

Federal Bills

- Elizabeth Dole HCBS for Veterans and Caregivers Act (H.R. 6823) would expand the funding for in-home care to 100 percent of nursing home costs. Currently, funding for home care can only be 65 percent of the cost for care in a nursing home.
- Credit for Caring Act (H.R. 3321/S.1670) would support family caregivers by giving them a tax credit for the cost of home care.
- The Home Care for Seniors Act (H.R.2898/S.1399) would permit individuals to use funds from their Health Savings Account to pay for home care.

On the State Front

State chapters continue to monitor and advocate on issues in their respective states.

Illinois Chapter leaders were instrumental in expanding the scope of services permitted by home

services agencies. This team effort took several months, but most of their recommendations were accepted by the Illinois Department of Public Health.

The Michigan Chapter continues to fight for a fix to the auto no-fault reforms that were implemented in 2019. These reforms inadvertently included the home care industry and resulted in dramatic cuts in reimbursement—of up to 45 percent!—for providers that care for those who have been seriously injured in catastrophic car accidents.

Several states are actively advocating for Medicaid rate increases, citing the need to increase rates to supplement several states' minimum wage increases. Members are also emphasizing the workforce shortage and the increased interest in and preference for receiving care in one's home as justification for the need to raise wages.

HCAOA continues to support not only state licensing for home care, but also the development of national care standards. This is just one of six priorities for HCAOA, which are featured in HCAOA's recent report, "State of Home Care: Industry at a Crossroads."

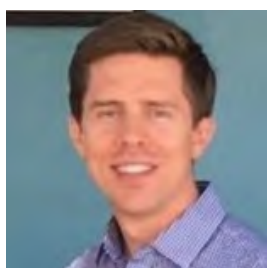
Advocacy: Do Your Part

The best time to get involved in HCAOA's advocacy efforts is right now! The policy issues that address home care are discussed in various capacities every day on Capitol Hill, in the White House and federal agencies, and by state and local decision-makers.

Without your voice, the legislation, regulations and other policy decisions made may not reflect what is best for our clients, our caregivers and your business.

We urge you to respond to our calls to action. Visit the Legislative Action Center at

<https://www.hcaoa.org/legislative-action-network> to stay informed about legislative advocacy efforts on your behalf.



**Eric Reinarman, Vice President,
Government Relations, eric@hcaoa.org**

Eric manages lobbyists in state capitals across the country to ensure they remain focused on HCAOA's legislative priorities. He tracks key legislation at the federal, state and local levels to keep members informed about laws and policies that could impact their businesses. Prior to joining HCAOA, Eric was Policy Counsel and Director of State and Local Government Affairs for one of the largest hotel owners' associations in the country.





New Home Care Trends Heavily Influenced by Mergers and Acquisitions

The COVID-19 pandemic changed many things, including how Americans received healthcare. As hospitals and other medical facilities closed down, the home care industry ramped up, delivering care at home.

Today, as more than ten thousand baby boomers step into the Medicare system each day, they are planning how and where they want to age. Many plan to remain in their homes.

By 2030, the demand for home health and personal care aides is projected to grow by 33 percent, according to the U.S. Bureau of Labor Statistics. The field of professional caregiving is forecasted to add 1.3 million new jobs, in addition to the 6.9 million job openings that will come from retirement or turnover.

The home care industry has been valued at \$500 billion. The lucrative opportunities generated by growing demand, changes in reimbursement and industry upheaval have private equity firms, health care systems, technology firms and other players vying for market share.

In-Home Care Mergers and Acquisitions Surge Above COVID Slow-Downs

Mergers and Acquisitions (M&A) activity in the home care industry was strong in 2018–2019. Then, a worldwide pandemic struck.

"Everyone thought that once COVID hit that there would be a drop off in M&A activity," shared Mark Kulik, Managing Director for The Braff Group. "It did pause for a couple of months but continued strong and we finished 2020 with a record number of transactions leading into 2021."

The growth of the U.S. economy over the last 15 years has funneled more money into the marketplace, fueling private equity firms and their ability to invest. Strategic partners and healthcare systems have played a part as well.

In 2021, certified home health transactions increased by nearly 50 percent—from 55 in 2020 to 82 in 2021. Hospice transactions also grew by 50 percent from 2018 to 2020. Private pay care, including home care services, fluctuated more, ending with 50 transactions in 2021—a 40 percent increase year over year, according to Kulik.

▶ What's Next? Five Trends Expected to Shape the Home Care Industry

Attempts to Consolidate a Fragmented Industry

Since the home care industry is both highly fragmented and highly appealing for strategic disruptors, expect to see attempts to consolidate through mergers and acquisitions.

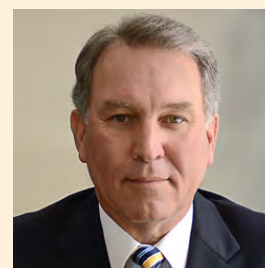
"Consolidation opportunities exist," shared Robert Holly, Managing Editor of Home Health Care News and Hospice News. "A lot of spaces are highly fragmented and were started by someone who was passionate years ago and now is looking for an exit. Others are interested in rolling up these businesses. Unlike some heavily consolidated parts of the U.S. economy, there is opportunity that is simply out there."

Home care agencies are some of the forces working to capitalize on these opportunities.

"What we are seeing today is consolidation of flagship companies growing via acquisitions," stated Kulik. "They're buying locations across the country for delivery of care [based on] strategy, relative to the country's [aging] population and what kind of coverage they have in those areas."

Beyond just home care and home health companies, health systems are looking for ways to combine complementary capabilities, diversify operations and succeed in new models of care.

"Health systems, home health providers and others strategically see home care as a way to fill gaps in care to ensure their patients don't end up in costlier settings," Holly explained. "For the new types of care delivery models—hospital at home, skilled nursing facility (SNF) at home, acute care at home—home care holds those things together. You need eyes and ears in the home and that's exactly what home care agencies do."

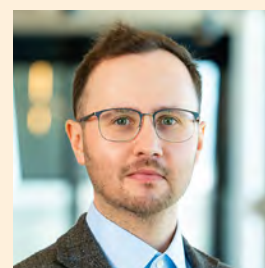


Mark Kulik
Managing Director
for The Braff Group

Mark joined TBG in 2008 as a Managing Director and has successfully completed nearly \$1.5 billion dollars in transactions. His experience spans close to 40 years in the health care, home care and home health care industries. He ranks among less than 100 U.S. professionals certified as a Merger & Acquisition Master Intermediary. He also is a Certified Merger & Acquisition Professional.



1



Robert Holly
Managing Editor of
Home Health Care News
and Hospice News

Robert Holly is the managing editor of Home Health Care News and Hospice News. Before covering home-based care and end-of-life care, he wrote about Chicago startups and U.S. agribusiness.

 **Home Health Care News**

2

The demand for home health and personal care aides is projected to grow by 33 percent by 2030

Private Equity Involvement and Continued Interest in the Industry

Expect private equity's (PE) interest in the home care sector to remain high and attention to last longer than in the past.

"Private equity has been really active in the marketplace. It's not just the people in the field buying companies, but investors outside the industry buying more companies as well," said Kulik. "In 2021, there were roughly 220 transactions and of those, just under 125 were funded by private equity. They were a major driver."

Kulik believes PE involvement is based on the growing demand for home care over institutional services.

"If you look at the increasing numbers of people turning 65 every day, coupled with their desire for care in the home versus institutions, as well as the rise of long-term care insurance policies and payouts, you'll see staggering growth," Kulik added. "Why is PE investing? They see the same trend. There is a guaranteed demand for hospice and other home health."

Holly notes that PE has played a major part in large franchise systems and thinks they will continue to be interested in home care based on available capital and growth potential.

"Traditionally, a PE firm would acquire a home care business, invest in it and then in five years, look for an exit," explained Holly. "Now you're starting to see these firms hold on to their stake of the business. They are not getting out completely. That speaks to the long-term opportunity that they see in home care."

3

People are viewing home-based care as the glue that holds everything together . . . enabling everything across the board

Shifting View of Home Care as a Pre-Acute Service

Healthcare providers and payers are beginning to see home care as a pre-acute option, focused on prevention of ER visits or hospital stays.

"People are viewing home-based care as the glue that holds everything together. Whether it is for pre-acute and preventative care, post-acute care or whether it is for palliative and more advanced illness care. Care in the home is enabling everything across the board," said Holly.

Kulik agrees, "For many, many years home care was viewed as post-acute care. The shift has now gone to pre-acute care and how to prevent unanticipated ER visits or overnight stays. Home care is perfect. You've got a person going in to [a client's] home who can see if that client is lethargic or isn't eating. Left unattended, those things lead to emergencies, which are very expensive . . . and it could have been prevented."

Reimbursement Streams Gradually Changing

4

Home care is traditionally either a Medicaid or a private-pay service, but with some of the new Medicare Advantage programs and payers' growing awareness of potential cost savings, the market is changing.

"In the past, healthcare providers followed specific rules that dictated the services provided at a certain cost, so there was little incentive to provide care in other areas," Kulik stated. "Medicare Advantage allows commercial insurance companies to care for Medicare beneficiaries and provide more services for reimbursement. Changing reimbursement rules change where the incentives lie, how patients and their care is viewed and insurer habits."

Medicare Advantage plan enrollment has seen a 9 to 10 percent increase in beneficiaries in the past year. In 2021, about 42 percent of the total Medicare population—more than 26 million people—were enrolled in a Medicare Advantage plan.

Will reimbursement finally reach the coffers of home care agencies, though? That is yet to be seen.

"The need and effectiveness of home care has without a doubt been validated over the past two years, but there are still challenges with providers working with private insurers," shared Holly. "Payers are starting to understand they need to build trusted relationships with providers and compensate fairly. In conversations I have had with executives from large payers, they publicly say they understand the value of home care and that it is something they want to invest in more."

Even if insurers finally recognize the value and cost savings of home care, there may still be challenges to overcome.

According to an [article](#) written by Holly for *Home Health Care News* about the home health industry, Holly wrote, "Because there are so many providers looking to make managed care inroads, the rates home health operators receive from Medicare Advantage sources are typically far below what they get from fee-for-service Medicare."

Continued Service Diversification to Care for More Medically Complex Clients

5

As M&A continues through 2022, Holly believes providers will continue to prioritize service diversification.

"For non-medical home care providers, that might mean becoming more clinical to care for higher acuity patients and for some of the more clinical home health care players, it could mean focusing more on social determinants of health and ADLs. The lines are blurring between different sub-sectors of home care," he said.

As the demand for care at home grows and the U.S. population continues to age and live longer, the number of more medically complex clients – those with multiple comorbidities—will also continue to grow.

"As you look at the population of adults in the US, people are sicker and more medically complex than ever before," shared Holly. Providers are going to have to figure out a way to care for some difficult people, especially if families are trying to keep them at home."





Four New Findings from the 2022 Home Care Pulse Benchmarking Report May Benefit HCAOA Members

You make thousands of decisions a day for your home care agency. But without data to back up your actions—a decision is really just a guess.

Are you making guesses or data-driven business decisions within your agency? Home Care Pulse surveyed more than 760 home care providers, representing over 1,460 locations, to find out what exactly is and isn't working for Home Care Association of America (HCAOA) members across North America—and the results may surprise you.

Home Care Pulse believes these three new findings from their 2022 Benchmarking Report will help you make more data-driven business decisions this year.



Julie Redd, Content Marketing Specialist, Home Care Pulse

Julie Redd is a Content Marketing Specialist at Home Care Pulse with experience in public relations and marketing. She has a background in speechwriting for over a thousand presentations, directing a center of public speaking coaches and increasing social media engagement through digital media strategy. She is passionate about influencing public opinion to give a voice to the most vulnerable and seeks to help tell the story behind home care communication. management, visit www.homecarepulse.com.



1 HCAOA Members Are Potentially Five Training Hours Away from an Increase in Revenue

The data gleaned from the 2022 Home Care Pulse Benchmarking Report proves that HCAOA members recognize the value of training. More than 75 percent of members use a professional training program—nine percent above the industry average.

Offering caregivers an additional five hours of training could potentially make your organization more profitable.

HCAOA members currently offer five hours of orientation and ten hours of ongoing training. However, data from the Home Care Pulse Benchmarking Report shows that agencies who offer at least eight hours of orientation training and twelve ongoing training hours in a caregiver's first twelve months make an average of \$701,072 more in revenue each year.

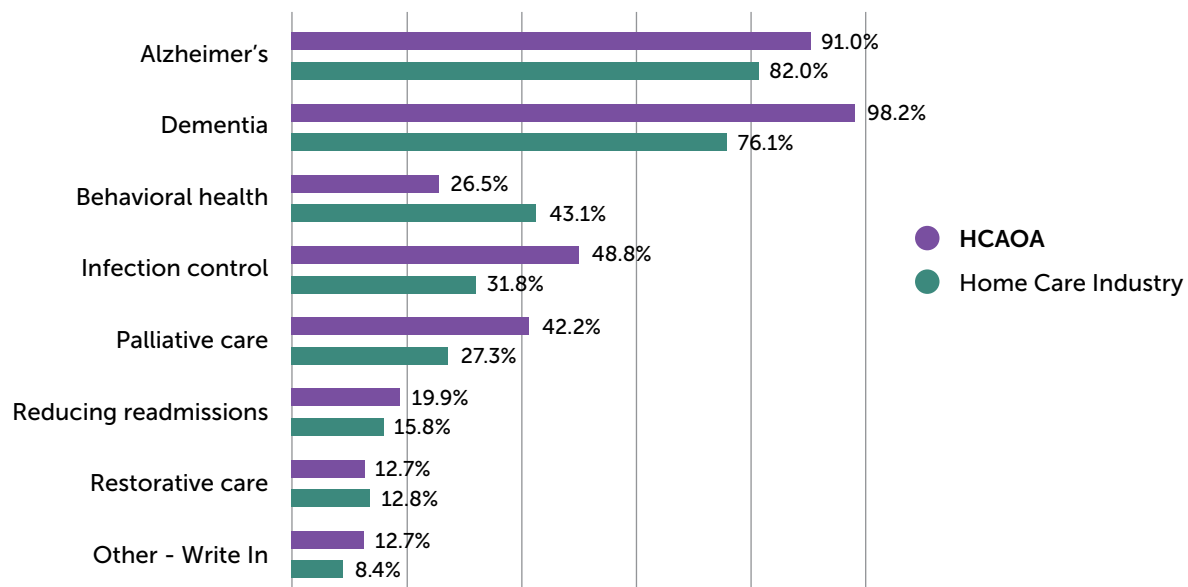
It's no secret to HCAOA members that offering specialty training courses to caregivers increases retention. More than 90 percent of member agencies offer specialized training courses to their caregivers.

While Alzheimer's and dementia training seem to be the most frequently offered courses, home care agencies and their caregivers could benefit from training in behavioral health, infection control, palliative care, reducing readmissions and restorative care.

Overall, the most important aspect of training is to blend learning options to include both online and hands-on learning to appeal to all employee learning styles and schedules.

Home Care Pulse's research shows that online training correlates to a lower turnover rate while producing more revenue per caregiver per year. Include online training options in your training program to improve employee retention.

Percent of Agencies that Provided Specialty Care Training by Topic in 2021



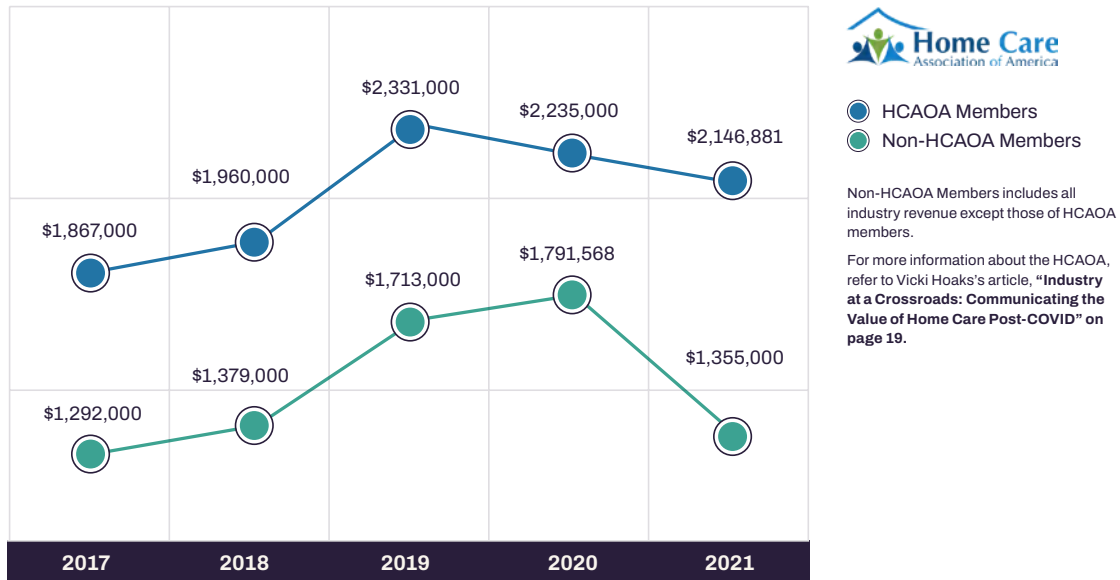
2

HCAOA Members Have a Stronger-than-Industry-Average Employer Brand

There's a reason HCAOA members make \$791,881 more than non-HCAOA members on average—you invest in your employer brand! Can you hear the crowd cheering?

Historical Median Revenue

HCAOA Members vs Non-Members



HCAOA members offer their employees more caregiver benefits than the rest of the industry.

HCAOA members also invest \$11,000 more in sales and marketing and \$12,000 more than non-member competitors in recruitment and retention advertising.

HCAOA Members Offer More Caregiver Benefits Across the Board

Caregiver Benefit	Industry	HCAOA	
Travel Reimbursement	38%	47%	+9%
PTO	38%	45%	+7%
Major Health	32%	38%	+6%
Dental	31%	33%	+2%
Supplement (i.e. Aflac)	31%	39%	+8%
Sick Leave	30%	39%	+9%
Daily Weekly Pay	29%	37%	+8%
401k Matching	29%	38%	+9%

3 HCAOA Members Recruitment Sources Could Benefit From an Adjustment

However, one top recruitment source may be costing you.

Indeed.com remains the number one recruitment source in home care. Yet, it has the second highest median caregiver acquisition cost at \$561 and produces the highest turnover rate at 84.5 percent—that's higher than the industry average rate of 65 percent.

Top 5 Recruitment Sources	Rank*	Recruitment Sources	Median Caregiver Acquisition Cost	Median Caregiver Turnover
	1	Internet - Indeed.com (Free & Paid)	\$561	84.5%
	2	Employee - Current (Employee Referral Program)	\$837	31.6%
	3	Internet - myCNAjobs.com	\$440	77.4%
	4	Referrals - Word of Mouth (Reputation)	\$167	23.4%
	5	Internet - Social Media (Facebook, Twitter, LinkedIn, etc)	\$363	60.1%

**From a list provided, survey participants were asked to select their top two most effective caregiver recruitment sources and methods used in 2021.*

If agencies use Indeed as their sole recruitment source, they may experience increased industry caregiver turnover and more problems in the long run.

Choose instead to save time and money by investing in the source with the least expensive acquisition cost and lowest turnover rate—referrals.

Stand out in a competitive hiring market by continuing to focus on building a strong employer brand and considering different recruitment sources.

4 HCAOA Members Must Begin Tracking Critical Data Points to Prove Their Value

While HCAOA home care agency members have consistently produced results at the top of Home Care Pulse's Benchmarking Result charts, we found that only 26 percent tracked hospital readmissions last year.

Preventing hospital readmissions needs to be one of the top priorities on your to-do list in 2022. Readmission rate is a key metric for measuring the quality of care provided. Regularly tracking and measuring that metric will enhance your client referrals.

Using data to prove that the care provided by your home care agency reduces readmissions is also one of the best ways to validate your value when building referral partnerships.

So, start tracking your home care agency's hospital readmission rates each week.

Todd Austin, President of Home Care Pulse, explains, "We've got to continually work on improving the tracking of readmission rates because that's going to keep us at the table in both the acute and post-acute spaces moving forward. I think a lot of it is [centered] around software utilization. Most major EMRs have that capability."

Begin tracking, improving and utilizing hospital readmission rates as a simple way to let your data do the talking and prove your home care agency's value to clients, families and referral partners.

More Findings and Industry Insights in Home Care Pulse's 2022 HCAOA Benchmarking Report

The findings from Home Care Pulse's Benchmarking Report can help home care agencies make significant enhancements to their businesses.

For more research and data from the report, Home Care Pulse has created a special report comparing HCAOA members with other home care providers. Access the 2022 [HCAOA Benchmarking Report](#) here.

With these top industry insights to guide your everyday business decisions, we trust your business will grow to help shape the industry's latest home care trends in next year's report.

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