

CASE STUDY



Addison County Home Health and Hospice.

Deborah Wesley arrived at Addison County Home Health and Hospice (ACHHH) on the same day as MatrixCare. She took on her new role as vice president for clinical services on day one of the implementation of MatrixCare's Home Health and Hospice EHR solution, marking the beginning of the agency's transition to automation. "Addison was moving from a completely manual documentation process and had done extensive research to find a vendor that met the organization's needs exactly. I've been in home health for almost 30 years, and MatrixCare is the first vendor to go above and beyond throughout the entire process to ensure our success," Wesley said.



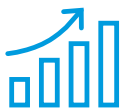
Challenges

- Previous failed EHR implementation forced the organization to go back to being paper based.
- Silos made it difficult to communicate with other units.



Solution

- MatrixCare is easy to use and can really improve the billing and reimbursement processes.
- A streamlined assessment process, means staff has more time to spend with patients.



Results

- Removed the silos and created transparency for all staff, from intake notes to final claims.
- Better equipped ACHHH to serve the needs of its patients across multiple care settings.
- Timely input of clinical data and a shorter close time for bills.

Challenge

There were many hurdles to EHR adoption at ACHHH. Several years ago, the agency had tried a different system. When it failed, they went back to paper, which meant a return to redundant processes, forms in triplicate, and poor inter-disciplinary communication. In addition to the inconvenience, this also exposed ACHHH to risk in case of an audit.

From that first day, I realized this was the perfect partnership for us.

Deborah Wesley, Vice President for Clinical Services

“Because we were 100% paper, referrals were written on paper and photocopied five times, and notes on the patient never came together,” said Wesley. “We were documenting in isolation. Home health used power books as typewriters with paper notes printed and filed, and our hospice team hand-wrote everything.”

ACHHH once again decided to begin evaluating an EHR system, but they knew that had to get it right this time to ensure clinician buy-in.

“The environment at the agency was similar to post-traumatic stress syndrome,” Wesley said. “The previous experience had been such a catastrophe that clinicians wanted nothing to do with computers or any automated process. They actually told us, ‘We’re not doing this.’”

Another challenge was that each ACHHH business unit—hospice, home health and long-term care—operated in its own silo and had no ability to communicate with other units.

“Even scheduling was done on paper and chalkboards. There was no dialogue between nurses, aides, PCAs and case management,” said Wesley. “We had many instances where PCAs were sent to a home where the patient had either died or been admitted to the hospital.”

Solution

After a year-and-a-half evaluation of EHR vendors, ACHHH selected MatrixCare because of its ease of use and ability to truly improve billing and reimbursement processes.

Because ACHHH was moving from a paper system, the implementation strategy included in-depth training for all staff. Every recertification and admission was loaded into the test unit, and every clinician used MatrixCare for their documentation before the “go live” date.



We haven't had one issue or challenge from intake to discharge.

Deborah Wesley, Vice President for Clinical Services

“This allowed maximum exposure for all staff, from intake notes to final claims,” said Wesley. “While it was labor-intensive, the payoff was great. When we were ready to go live, 100% of our clinicians and staff were proficient and comfortable in MatrixCare.”

And they’ve never looked back. Wesley said clinicians are ecstatic. Previously, every employee spent two hours in the office writing out a paper schedule, getting assignments and shuffling patients before going out into the field. Today, everyone syncs from home. That ability, plus a streamlined assessment process, means the staff has more time to spend with patients. The on-call process also has been overhauled now that the on-call nurse has up-to-the-minute information.

“Now nurses tell me, ‘I’m excited to be here,’” Wesley said. “MatrixCare has completely transformed every layer of our agency, from job satisfaction to patient outcomes.”

ACHHH executives are also thrilled with the home health and hospice solution because the MatrixCare data allows them to make budget decisions based on up-to-date information such as visit productivity. In addition, a billing interface with Optum makes timely billing easier.

“We can now accurately account for visits and can look at true costs of hospice in terms of medications and supplies,” Wesley said.

Results*

By streamlining workflow processes, including documentation at the point of care, MatrixCare Home Health and Hospice has better equipped ACHHH to serve the needs of its patients across multiple care settings.

“Most importantly, the quality of our patient care has been transformed by our EHR,” Wesley said. “MatrixCare allows real-time data to be shared among disciplines, which enhances communication and coordination of the care we provide our patients.”

That quality became apparent very quickly. Wesley said her facility had a state and federal hospice survey the second week they were live on the MatrixCare system. “The survey was scheduled for a week, but was completed in just three days. And on top of that, we were deficiency free,” she said. “The surveyors were so impressed with the solution and ease of access to review our records, they could not stop the praise.”

Financial outcomes are improving, too, with timely input of clinical data and a shorter close time for bills. Having nurses out in the field with mobile devices has cut mileage costs in half. And having accurate reports has reduced hospice care costs by 50%.

And when it comes to partnership, Wesley couldn't imagine a better one. “MatrixCare's responsiveness and attentiveness to our needs and anxieties was

We are seeing better outcomes... because we are delivering care more appropriately and more efficiently.

Deborah Wesley, Vice President for Clinical Services

a key piece to this success. They were there with best practices for all of our processes. They were there with what they've seen. They were there with what they knew. They were there with a system that makes sense to clinicians.”

*Results may vary based upon specific change in circumstances.

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