CareForum 2022 The WellSky® Conference

Solution Roadmap: WellSky Home Health

Michelle Justiss

VP Solution Management

9/13/2022

The WellSky team



Michelle Justiss
Vice President, Solutions Management
Home Health & Hospice



Emily LarsonDirector, Solutions Management
Revenue Cycle Management



Anthony Trosky
Director, Solutions Management
Operations



Zac Davis
Solutions Manager
Business Intelligence



Four key challenges you must address to succeed in the next decade in healthcare...









Challenge #1
Finding & keeping
great staff

Challenge #2
Delivering
improved patient
outcomes

Challenge #3

Driving operational excellence

Challenge #4

Expanding referral & payer relationships

Your Opportunity
Create a competitive
advantage in staffing

Your Opportunity
Outperform market
in quality ratings

Your Opportunity
Increase & scale
operational
efficiency

Your Opportunity

Grow your census & revenue



Home Health and Roadmap 12 Month Priorities

Clinical and Operational Efficiency

- Referral Manager Integration
 - Demographics, Scheduling, Mileage
- Enterprise Referral Manager & Referral Import
- Clinical Quality Checks
- SSO/Okta/MFA
- Support Hub

Data and Analytics

- New Data Extract -Snowflake
- TeamInsights
- TapCloud

Revenue Cycle Management

- Medicare Secondary
- Global Payer Management
- Patient Ledger
- Remittance Management

Regulatory

- Oasis E
- Electronic Visit Verification

Clinical and Operational Efficiency

OASIS E

As finalized in the CY 2022 Home Health Rule, CMS will implement OASIS E on January 1, 2023

OASIS-E Start of Care: Weston, Joan (345)

Table of Contents

Patient Tracking	Assessed/Saved
Administrative	Assessed/Saved
Vitals	Assessed/Saved
Patient History and Diagnosis	Assessed/Saved
Hearing, Speach, and Vision	Not Started
Cognitive, Mood, and Behavior	Not Started
Preferences for Customary Routine Activities	Not Started
Environment Conditions	Not Started
Functional Status	Not Started
Functional Abilities and Goals	Not Started
Bladder and Bowel	Not Started
Active Diagnosis	Not Started
Health Conditions	Not Started
Swallowing/Nutritional Status	Not Started
Skin Conditions	Not Started
Medications	Not Started
Special Treatments, Procedures, and Programs	Not Started
Supplies	Not Started
Orders for Disciplines and Treatments	Not Started
OASIS Check has not been run. Submit	
Return to clinician for signature:	

What's New

New Look and Layouts

Reduced Unnecessary Documentation (Procedure Codes, Inpatient Diagnosis)

Improved Skip Pattern Logic (M1306, M1311, BIMS, N0415)

Added Quality Checks and More to come into 2023!

New Enhanced Psych Status, New Colors and Iconography

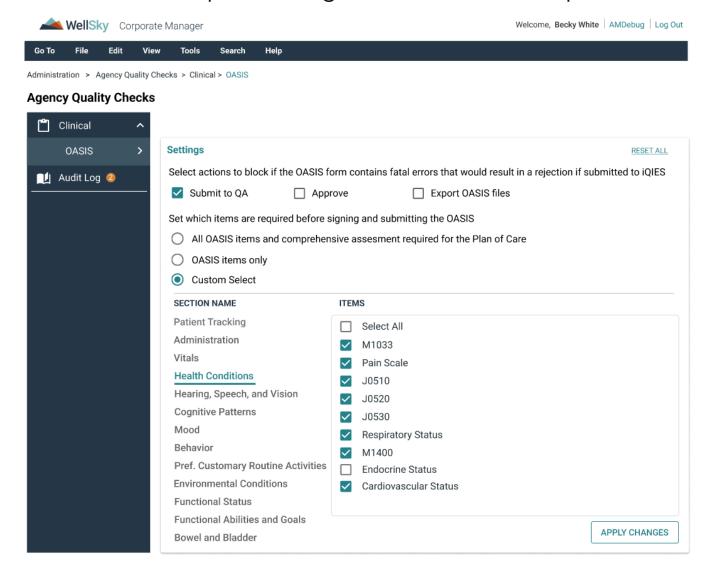
Mental Status 🖺					
Orientation Oriented (Person, Time, Place and Situation) Deficits noted in: Person Time Place Situation		Neurological No problems Short-term loss Seizures Spasms Long-term loss Asphasic Tremors Headaches			
Mood Appropriate (WNL) Apathetic Depressed Agitated Irritable Anxious Elated Hostile Pyschosocial: Document any psychosocial factors rearriticipate in his/her own care	Impaired judgement Evasive	Inappropriate Indifferent Assaultive Impulsive Poor coping skills Compulsive Poor decision making iving environment, impacts on the delivery of services or ability to			
Additional Information					
sychiatric Worksheet					

- New icons will indicate relation to reimbursement or plan of care versus pink and green colors.
- Upcoming Will add additional indicators for items related to value based care, process measures, quality measures, and CoP

(A1005) Ethnic ty 🖺 \$ (Mark all that apply)		
A. No, not of Hispanic, Latino/a, or Spanish Origin	D.	Yes, Cuban
B. Yes, Mexican, Mexican American, Chicano/a	E.	Yes, Another Hispanic, Latino, or Spanish origin
C. Yes, Puerto Rican	X.	Patient unable to respond

New Quality Checks

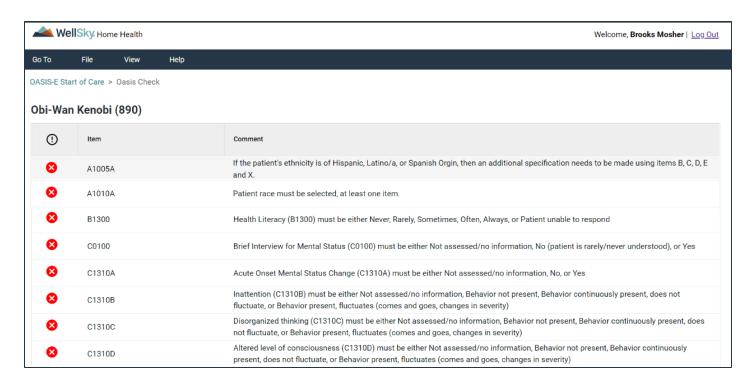
New hard stops configurable at the corporate level



In addition to OASIS items, we would have submission hardstops on the major CoP Plan of Care items:

- Homebound Status
- Vitals & Parameter for PO alert
- •Fall Risk Assessment (MAHC)
- Diagnosis Codes
- Mental Status
- Cognitive Status
- Psychosocial Status
- Supplies and DME
- Frequencies
- Prognosis
- Rehab potential
- Functional limitations
- Activities permitted
- Safety Measures
- •Risk for emergency visits rehospitalization
- Discharge planning
- Advance directives

Oasis Check Updates



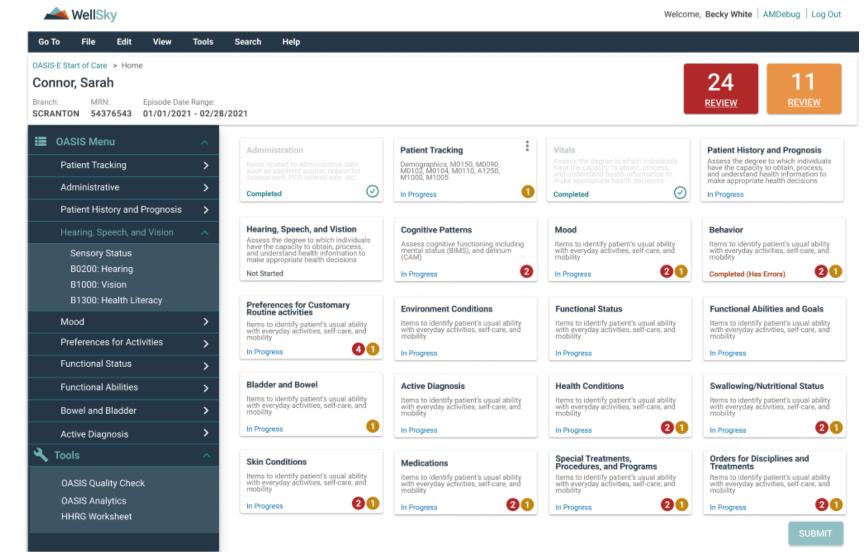
- Errors or warnings rendered into a new UI
- Updated messaging that is more descriptive of the error and what potential change is required.
- Error messages drill down to specific sub-items for larger items.
- Clicking or pressing the row will bring user back to the specific item instead of the OASIS page generically like the legacy version does.

Improved Printing

OASIS-D1 Start of Care	Addison, Betty B			
(M0102) Date of Physician-ordered Start of Care (Resumption of Care): If the physician indicated a specific start of care (resumption of care) date when the patient was referred for home health services, record the date specified.				
03/30/2022 [Go to M0110, if date entered]	☐ NA - No Specific SOC date ordered by Physician			
Comments: If the physician indicated a specific start of c patient was referred for home health services, r				
(M0104) Date of Referral: Indicate the date that the written or verbathe HHA. Comments:	al referral for initiation or resumption of care was received by			
This is where comments would go.				
(M0110) Episode Timing: Is the Medicare home health payment ep group an 'early' episode or a 'later' episode in the patient's current s episodes? ① 1-Early ① 2-Later				
○ UK-Unknown				
O NA-Not Applicable: No medicare case mix group	to be defined by this assessment			
(M0140) Race/Ethnicity: (Mark all that apply)				
■ 1-American Indian or Alaska Native 🗌 4-Hispan	ic or Latino			
☐ 2-Asian ☐ 5-Native	Hawaiian or Pacific Islander			
☐ 3-Black or African American ☐ 6-White				
(M0150) Current Payment Sources for Home Care: (Mark all that apply)				
☐ 0-None - No charge for current services	☐ 7 - Other government (for example,			
■ 1-Medicare (traditional fee-for-service)	TriCare, VA)			
☐ 2-Medicare (HMO/Managed Care/Advantage	● 8 - Private Insurance			
plan)	☐ 9 - Private HMO/managed care			
■ 3-Medicaid (traditional fee-for-service)	☐ 10 - Self-pay			
☐ 4-Medicaid (HMO/Managed Care)	☐ 11 - Other (specify)			
☐ 5-Worker's compensation	☐ UK - Unknown			
☐ 6-Title programs (for example, Title III, V, or XX)				

- Faster print rendering
- Improved legibility no more "addendums" where text overflows to the bottom
- Reduction of extra white space on pages due to no more addendums
- Reduction of page length by 40 50% in some instances saving costs
- Improved OCR for scanning

Upcoming: New Index Page UI with real-time Oasis Check Warnings

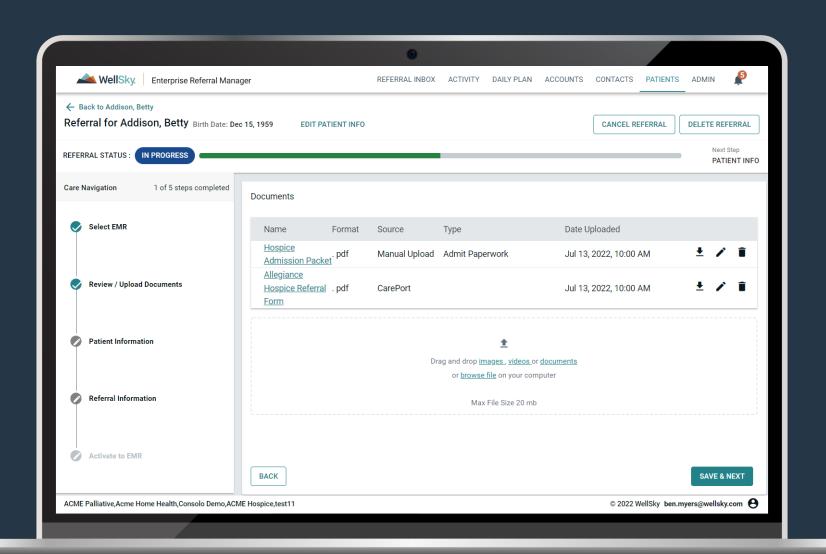


Will roll-out in Beta end of year into 2023

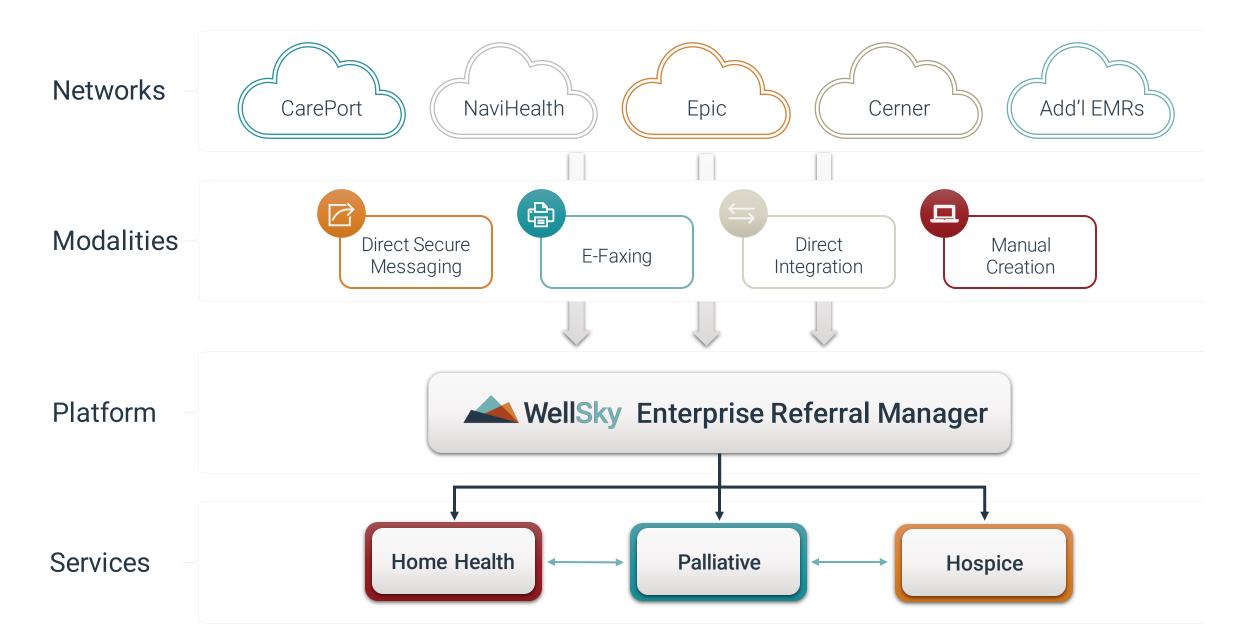
Now recruiting for Beta!

WellSky Enterprise Referral Manager

Empowers agencies to manage inbound referrals and customer relationships within a single, unified experience across all roles and service lines.



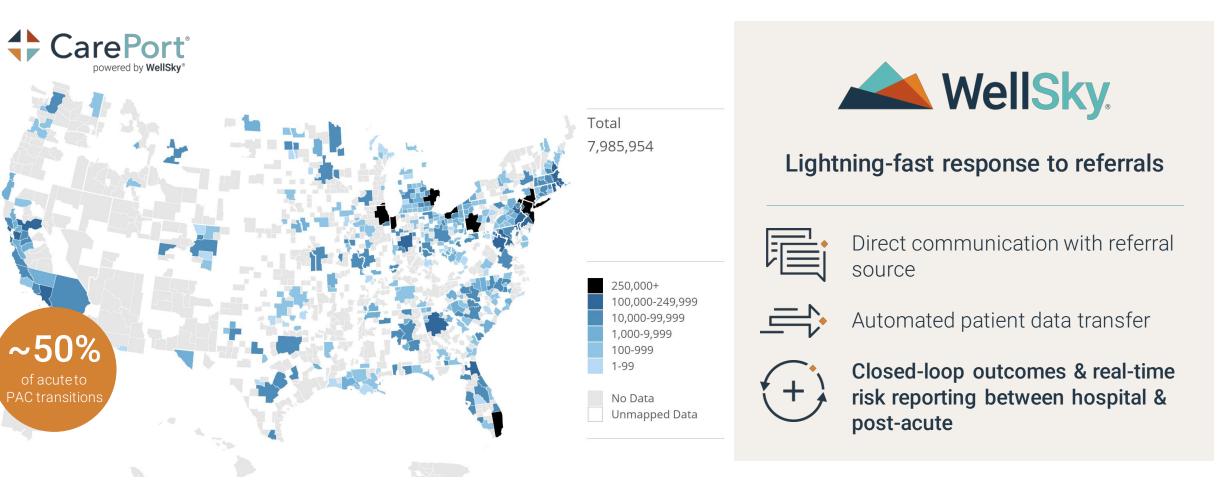
Manage your network of referral sources directly into a central inbox



WellSky Network: PAC Discharge

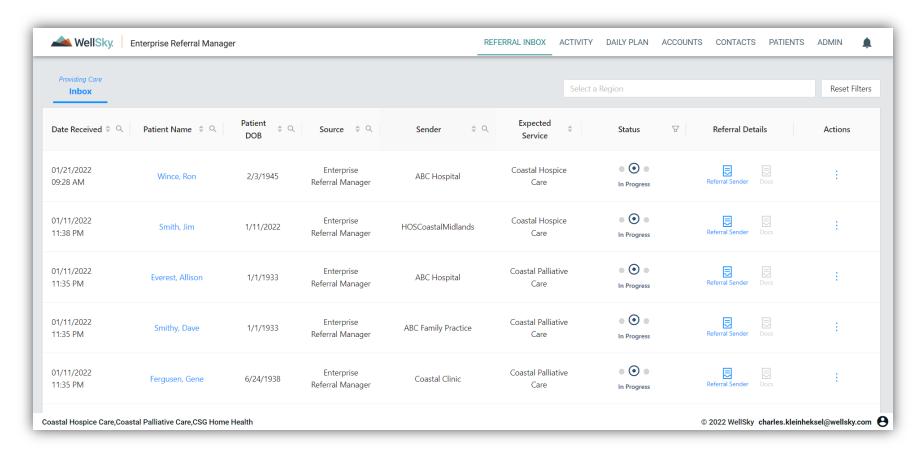
Proprietary connectivity with CarePort, the #1 PAC discharge platform

~8M unique hospital discharges per year; 2,000 hospitals



CarePort total discharges by provider MSA (12-month snapshot)

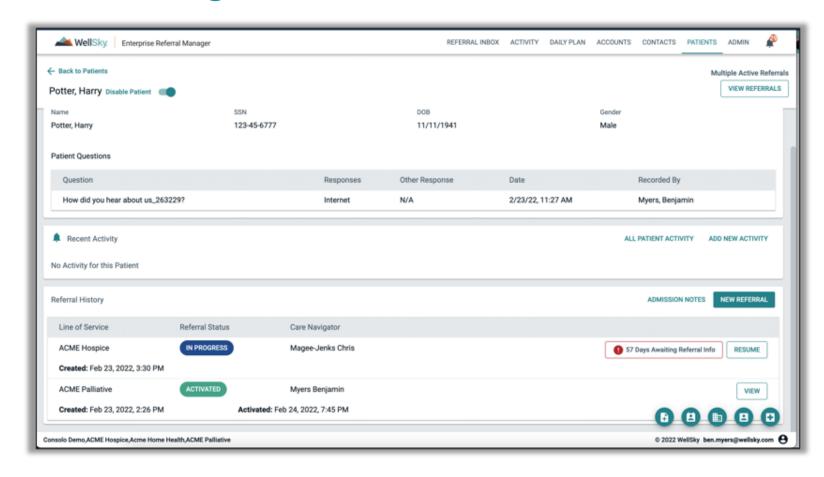
Centralized referral source connections





- Connections to community partners for digital exchange of referral data
- Proprietary connectivity with CarePort organizations for seamless referral routing
- Consolidation of all inbound and agency-created referrals
- Creation of a single, longitudinal record of referral activities

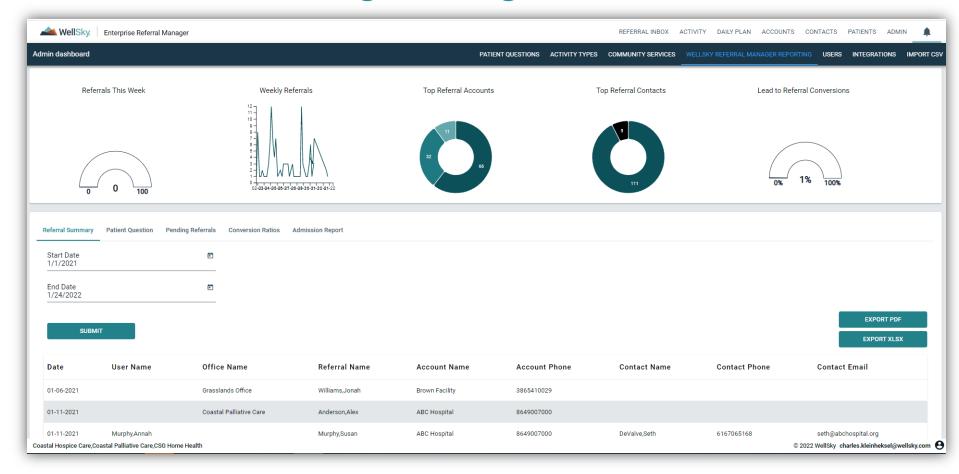
EMR integration & service line coordination





- Simplified creation of new patient records within the EMR based on existing referral data
- Seamless patient transitions across service lines based on current health status and clinical needs
- Complete, contextualized patient data to better inform care delivery

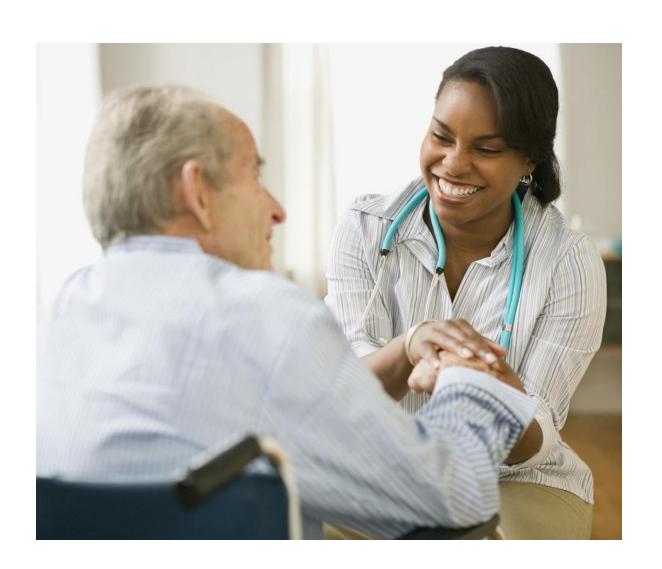
Referral marketing management





- Alignment of intake and CRM activities within a single system with cross-role visibility
- Tracking of community liaison contact activities and management of marketing objectives
- Insights into referral partner network performance and lead generation trends

- A Medicaid initiative intended to prevent fraud
- Verifies that a Home Health caregiver is providing care where and when that care is expected
- Information to be verified:
 - Type of service being performed
 - Individual receiving the service
 - Date of the service
 - Location of service delivery
 - Individual providing the service
 - Time the service begins and ends
- All states must comply by January 1, 2023



What is WellSky doing to address Electronic Visit Verification (EVV) requirements in Home Health?



Enhanced Visit Verify (formerly KVV) for integrated experience

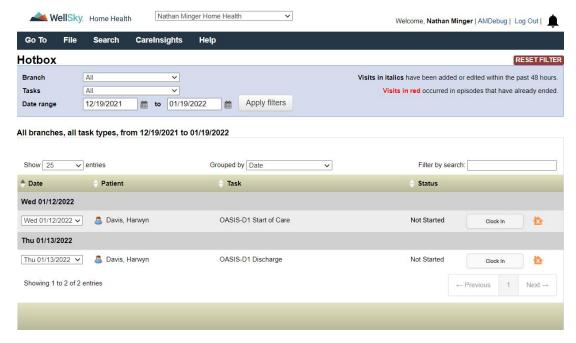


New Feature – Transaction List to manage the status of each visit

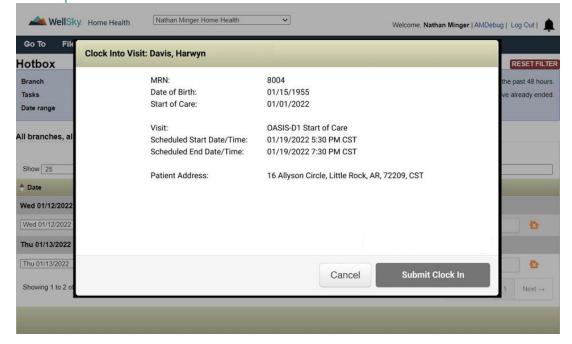


Services to support clients through EVV certification process

Step 1: Access Hotbox (via tablet)

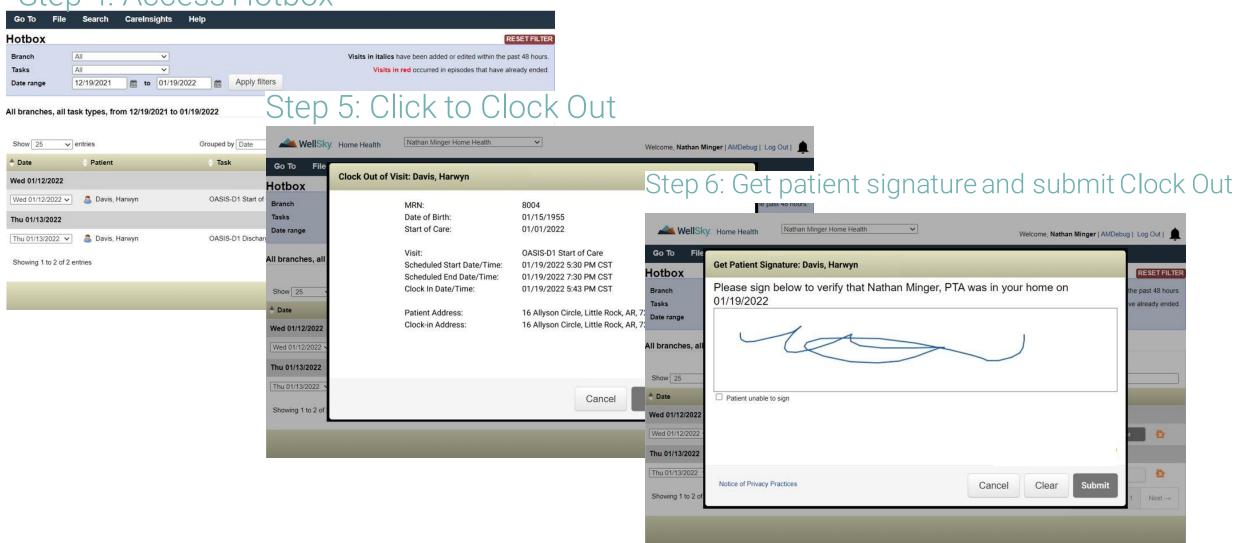


Step 2: Clock In

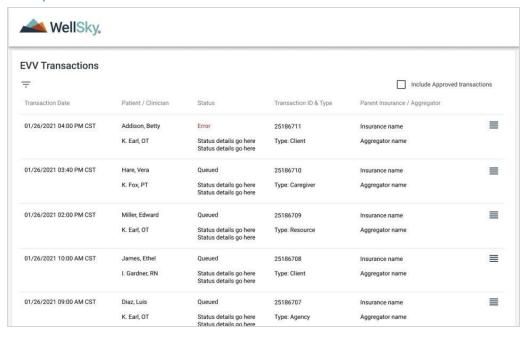


Step 3: Perform Care

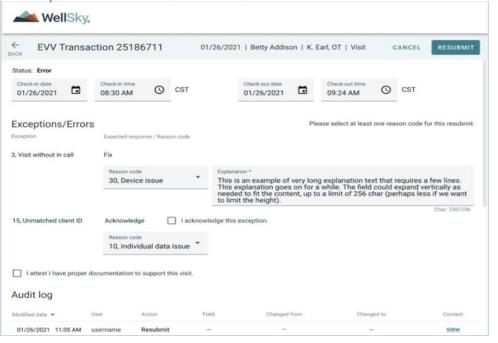
Step 4: Access Hotbox



Step 7: Review submitted EVV transactions



Step 8: View, edit, and resubmit transactions



Know your states EVV Model

Open Vendor

Providers can use state-sponsored vendor free of charge or work with another EVV vendor at their own expense

Provider Choice

Providers select vendors and cover the costs. (Some states that chose this model will raise reimbursement rates to help offset the cost to agencies.)

MCO Choice

Managed care organizations (MCOs) select the vendor and cover the costs, often with state support

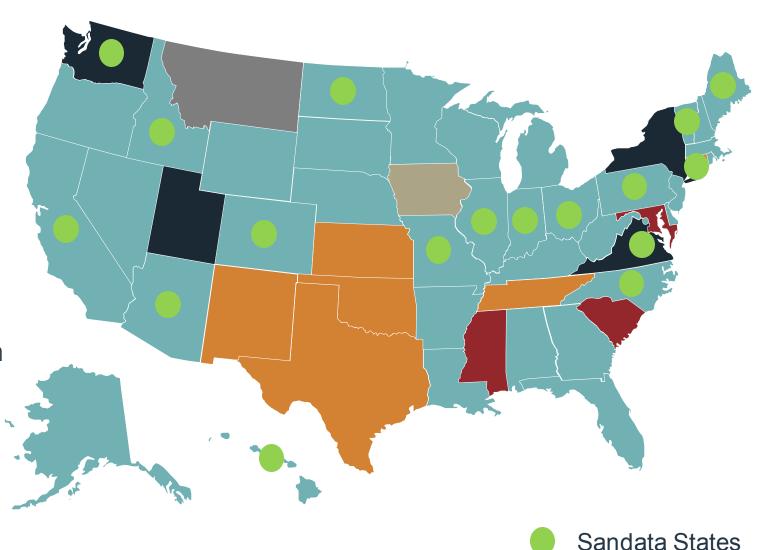
State-Mandated In-House System

States build and manage their own EVV system that all providers must use

State-Mandated External Vendor

Providers must use state-sponsored, state-funded vendor

Undecided or Unknown



Getting Started

Active Implementation States

- 1. Reach out to your aggregator to begin the testing process
- 2. Send an email to ccmedicaid@wellsky.com requesting EVV module activation.
- 3. Participate in aggregator training
- 4. Forward testing credentials to WellSky when you receive them
- 5. A WellSky specialist will be in touch with next steps

States Pending Implementation

- Reach out to your state, MCO and aggregator to understand timing and requirements
- 2. Email us any updates you receive at ccmedicaid@wellsky.com
- 3. Train your staff on EVV requirements
- 4. Ensure your staff is trained on the mobile application
- 5. Educate your client base
- 6. We will communicate the status and steps in the testing process as soon as we receive information

Closed States

- 1. We would like to hear from you about the process being used in your state
- 2. Help us advocate for open models by contacting ccmedicaid@wellsky.com
- 3. Contact your state and MCOs to let them know you have a system that is EVV ready!

Reach out to your Account Representatives for additional information and resources regarding EVV

Frequency Manager: Future Enhancements

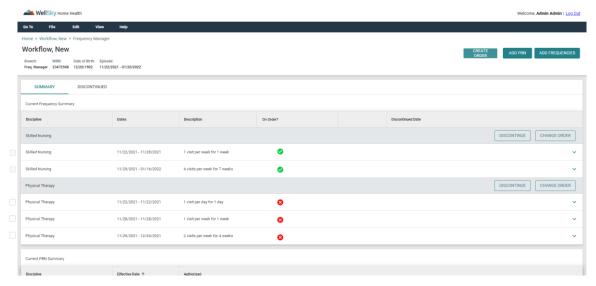
December 2022

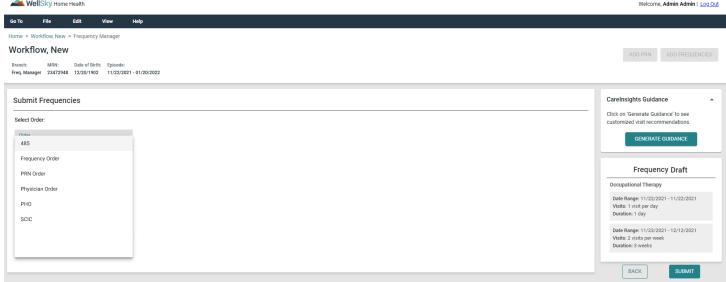
Order Creation Workflow Update:

- Update to the Order Creation process to allow users to create frequencies/PRN's however they want, edit them as needed, and add them to an order when they are ready.
- New column on the Frequency Manager homepage to indicate that the frequency/PRN is or is not on an order.
- We will be giving the user more options of orders to create during the Order Creation process.

Additional Enhancements

- Discontinue Workflow
- Change Order Error Correction Workflow
- Physician Order/Therapy Eval and ReEval - Incorporation into Frequency Manager
- PRN Alerts
- Corporate Level Frequency Manager Alerts Report
- Hard Stops for Scheduling based on Frequency and PRNs Ordered





Rollout starting Feb 2023

WellSky Resource Manager Driving Operational Excellence









Appointment / Staff Scheduling

Staff Credentialing

Labor Management

Time & Attendance

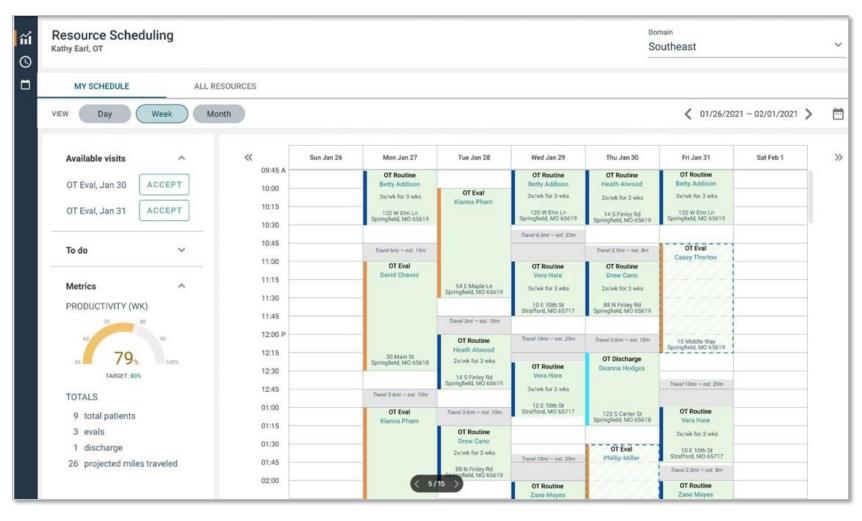
Streamlined processes & predictive insights to optimize staffing efficiency

Manage credentialling to assure appropriate staff is scheduled for patient need

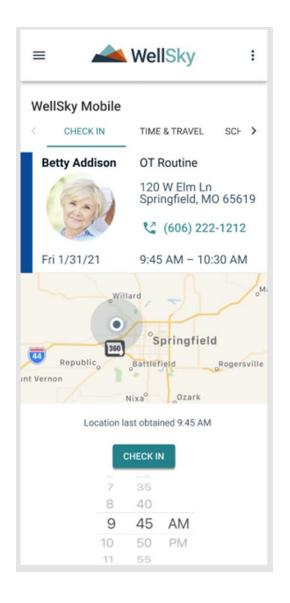
Analyze resource costs & make changes in real time to maximize productivity & profitability

Track staff time & mileage along with EVV capabilities to drive visit compliance

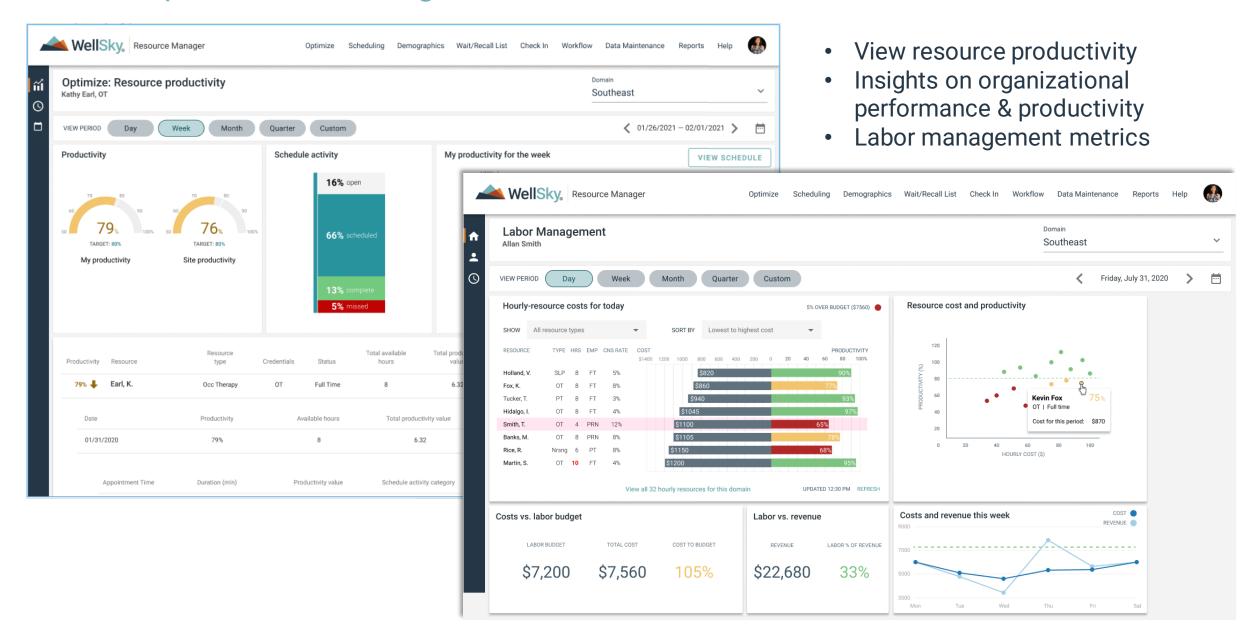
Enterprise scheduling capabilities that optimize staff and compliance for patient care



- View scheduled visits
- Accept new assignments
- Mobile app capabilities

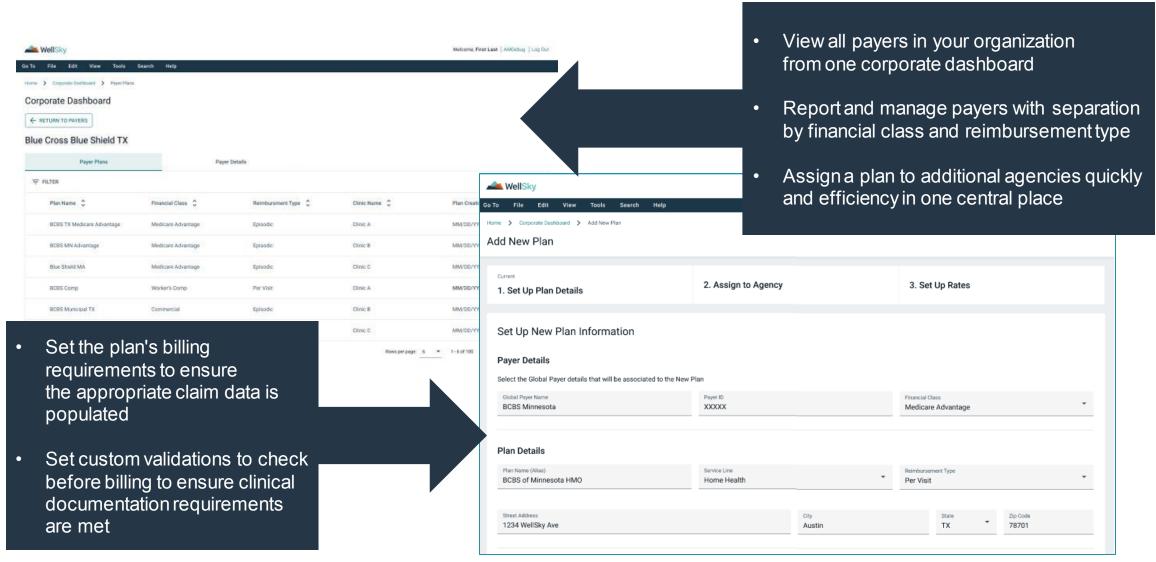


Tools to optimize and manage labor at scale



Revenue Cycle Management

Global payer management for centralized administrative set up



Scheduling validations synchronize data to prevent user error in data entry for downstream billing

Only allowing one active admission per patient

Admission dates cannot overlap

Only one OASIS SOC allowed per admission

OASIS is final source of truth for Start of Care date

Auto-aligned Admission and episode start dates once OASIS is saved

Episode

Discharge

Admission

Start of Care

Preset episode to 60 day intervals

Lock episode start date for all subsequent episodes

Only one OASIS DC or Death per admission

Automatically truncate episode end date to align with discharge date documented

Medicare Secondary Billing

NOA

Generates
 upon Start of
 Care when
 Medicare is
 selected as
 primary or
 secondary

Primary Payer

Document
 primary
 payment and
 select "Forward
 to Secondary"

Medicare Final Claim

 Auto generate EOE after the primary payer has paid

Reporting

 Report any additional revenue expected based difference between HIPPS and previous reimbursement

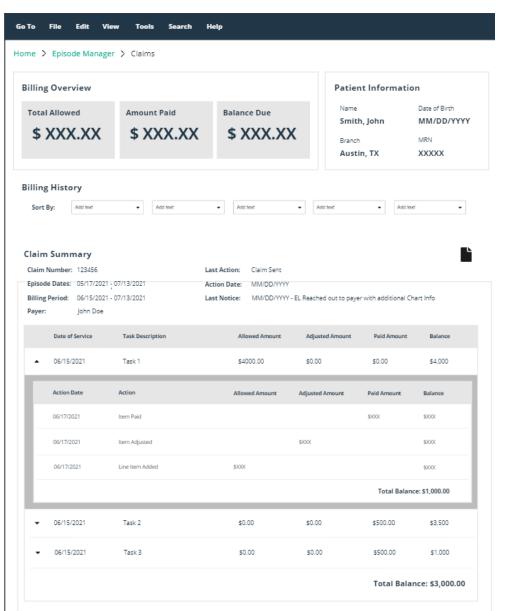
Streamlined payment and adjustment posting

New write off process

- Standalone ability to create a write off without generating a \$0 remittance and adjustment
- Additional customization of write off codes
- Automated small balance adjustments
- Setting available to auto-adjust any remaining small balance after a claim is paid
- Improved payment posting
- Increased speed and load times for remittances with a high volume of claims
- Additional information populated from the 835 file (I.e. HIPPS from Medicare)
- Improved usability and navigation
- Focus group research in August and September 2022. Development targeted to begin in winter 2022/2023.

The next phase of Financials – the patient billing history

- A unified and comprehensive transactional ledger of the patient's full billing history
- Summary header for an at a glance understanding
- Claim details including recent follow up notes
- Activity history shows timeline of claim actions and adjustments
- Full list of claims to view patient billing history over time



RCM Office Hours

The RCM team holds monthly Office Hours on the first Wednesday of every month at 11am CT.

Presenters

- Solutions
- Support
- Revenue Cycle Services

Agenda

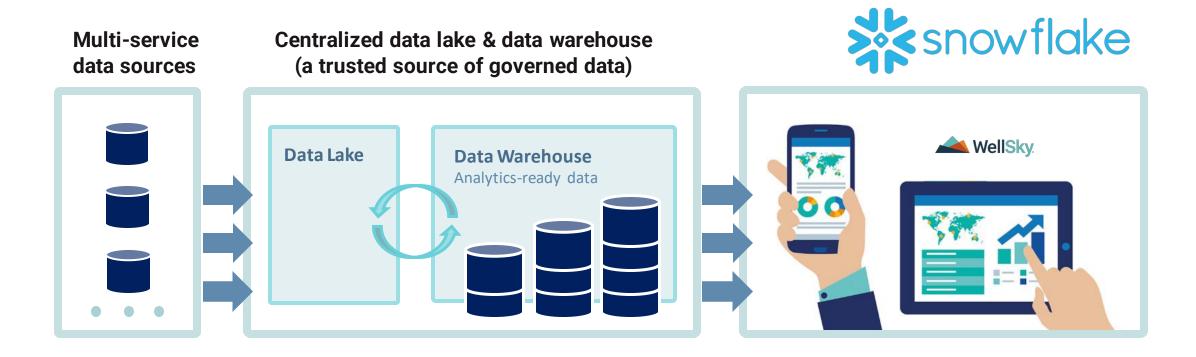
- Recent enhancements or bug fixes
- Upcoming enhancements and known issues
- Solutions research questions and focus group opportunities

Access

 WellSky users can access Office Hours from the link in Online Help under Financials > RCM Office Hours

Data and Analytics

Direct Data Access to your data through Snowflake

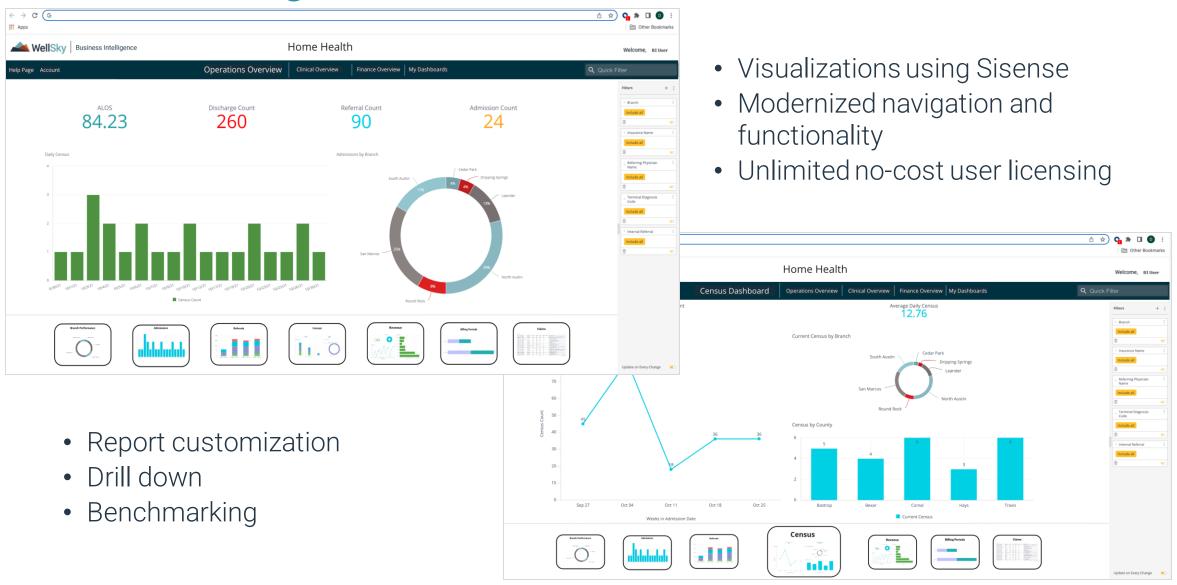


Key Capabilities

- Near Real-time insights
- Agile data delivery (efficient process and flexible enterprise-grade tools)
- Faster processing and delivery of data

Coming 2023

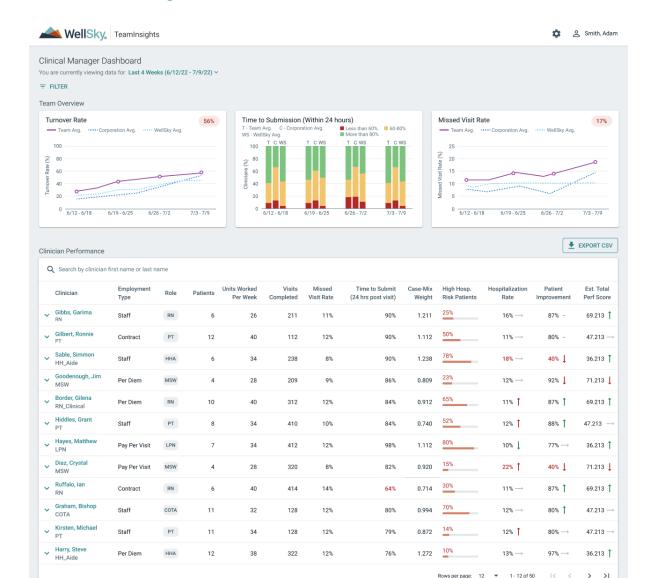
Business Intelligence



Now Available

TeamInsights Clinical Manager Dashboard Front-line Clinician Performance Analytics

- Compare recent clinician performance across key workload, quality, and outcome metrics
- Detect workload and quality tradeoffs where overstaffed clinicians may be more likely to miss visits or take longer to submit documentation
- Identify clinicians who may be below workload, documentation, or patient improvement targets, so you can engage them proactively

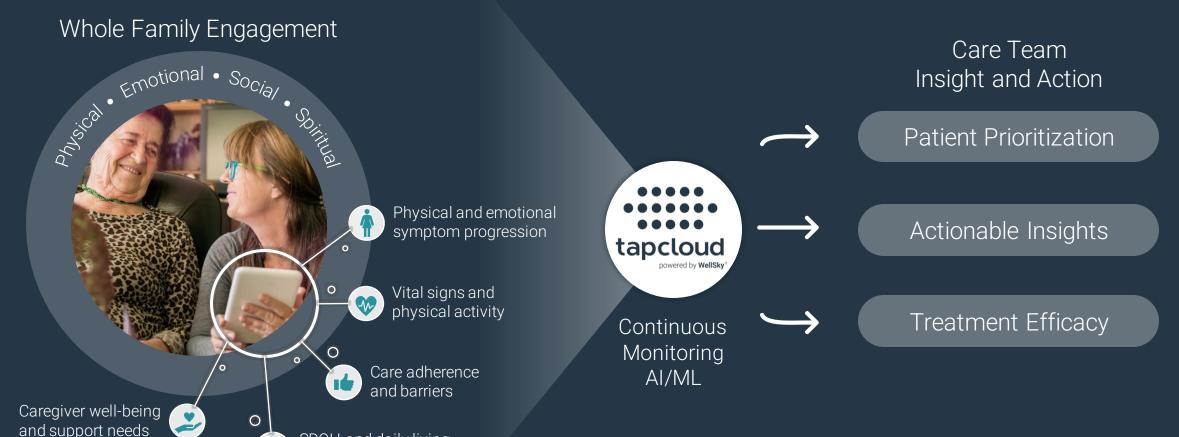


TapCloud: Patient & family engagement designed for home-based care

SDOH and daily living

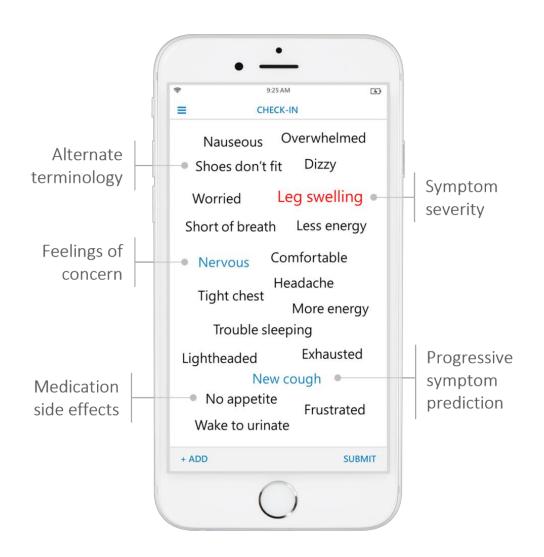
support needs

Now Available





TapCloud Connect the dots – drive outcomes



- Check in with patients between clinical visits and capture symptoms through a patient-specific word cloud symptom tracker
- Quickly identify when patients are in need with real-time insights that enable you to deploy care interventions to reduce preventable hospital readmissions
- Keep patients, their loved ones, and the care team connected with daily care reminders and secure communication, video visits, and messaging

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Thank you.

Contact us:

Michelle Justiss
VP Solution Management
Michelle.justiss@wellsky.com





Request a consultation today!

