

### POST ACUTE PROVIDERS

### **HEALTH INFORMATION TECHNOLOGY USER EHR/HIE SURVEY RESULTS**

**NOVEMBER 2017** 

This survey is designed to help stakeholders of post-acute provider industry identify what strategies and solutions are developing to address the higher growth/demand for post-acute services in the challenging environment of lower fee-for-service reimbursements and impending valued-based payment models from all payers: government and commercial. The purpose of the survey is to determine if there are more efficient ways to improve post-acute patient care and keep providers accountable for improving quality and reducing costs through effective use of health care information technology, specifically: health information exchanges (public and private), quality reporting, health analytics, workflow and care coordination, as well as patient engagement software/systems.

Black Book polled the leadership from 490 post-acute providers to ascertain the need for information platforms to support the exchange of information and provision and coordination of the most appropriate health care delivery, supplies, equipment and venue of services, as well as the operational, technological and financial road blocks, both current and projected.

### TOTAL RESPONDENTS: 545 SURVEYED POST-ACUTE PROVIDERS BY RESPONDENT TITLE:

259 CHIEF EXECUTIVE OFFICER/EXECUTIVE DIRECTOR/CHIEF OPERATING OFFICER/ADMINISTRATOR (55.2%)

70 CHIEF FINANCIAL OFFICER/CONTROLLER (8.8%)

54 CHIEF INFORMATION/TECHNOLOGY OFFICER (10.1%)

48 CHIEF CLINICIAN/NURSING OFFICER/MEDICAL DIRECTOR (6.5%)

114 OTHER MANAGER/DIRECTOR/LEADER (19.4%)



### CHIEF EXECUTIVE OFFICER/EXECUTIVE DIRECTOR/CHIEF OPERATING OFFICER/ADMINISTRATOR RESPONDENTS BY PROVIDER/FACILITY TYPE: 259 TOTAL

120 NURSING HOME/SKILLED NURSING FACILITY (SNF)/ LONG TERM REHABILITATION FACILITY

10 DURABLE MEDICAL EQUIPMENT (DME) DISTRIBUTORS

40 HOME HEALTH &/OR HOME INFUSION

16 HOSPICE

16 POST ACUTE PROVIDER CHAIN/CORPORATE LOCATION

**32 HOSPITAL SNF & SUBACUTE** 

23 SHORT TERM REHABILITATION FACILITY

**2 OTHER POST ACUTE PROVIDER TYPE** 

#### CHIEF EXECUTIVE OFFICER/EXECUTIVE DIRECTOR/CHIEF OPERATING OFFICER/ADMINISTRATOR RESPONDENTS BY PROVIDER/FACILITY TYPE:

46.3% NURSING HOME/SKILLED NURSING FACILITY (SNF)/ LONG TERM REHABILITATION FACILITY

3.7% DURABLE MEDICAL EQUIPMENT (DME) DISTRIBUTOR

15.4% HOME HEALTH &/OR HOME INFUSION

2.3% HOSPICE

6.1% POST ACUTE PROVIDER CHAIN/CORPORATE LOCATION

**16.1% HOSPITAL SNF & SUBACUTE** 

8.8% SHORT TERM REHABILITATION FACILITY

0.7% OTHER POST ACUTE PROVIDER TYPE



### 1. WHAT DO YOU CONSIDER YOUR THREE MOST PRESSING ISSUES FACING POST-ACUTE PROVIDERS IN 2018?

RESPONDENTS	DECLINING REIMBURSEMENTS	VALUE-BASED ACCOUNTABLE POST ACUTE CARE	DENIALS/RCM	LACK OF INFORMATION TECHNOLOGY	LACK OF DATA SHARING/HIE/ INTEROPERABILITY	LACK OF CARE COORDINATION/ QUALITY REPORTING	OTHER ISSUE NOT LISTED
NURSING							
HOME/SKILLED	84%	17%	46%	50%	64%	55%	5%
NURSING FACILITY							
(SNF)/ CORP/LONG	(n=201)	(n=40)	(n=115)	(n=120)	(n=153)	(n=133)	(n=11)
TERM REHABILITATION							
FACILITY							
(Total Respondents n= 240)							
HOSPITAL POST-ACUTE							
CARE/SHORT TERM	86%	37%	22%	57%	83%	40%	1%
REHABILITATION							
	(n=94)	(n=40)	(n=24)	(n=62)	(n=91)	(n=44)	(n=1)
(Total Respondents n=109)							
HOME HEALTH							
	71%	78%	20%	<b>72</b> %	84%	29%	4%
	(n-2C)	(=-40)	(n=10)	(27)	(m - 42)	/n=15)	/m-2\
(Total Respondents n = 51)	(n=36)	(n=40)	(n=10)	(n=37)	(n=43)	(n=15)	(n=2)
DME/OTHER POST							
ACUTE	100%	36%	29%	32%	82%	42%	0%
	(n=38)	(n=14)	(n=11)	(n=14)	(n=31)	(n=16)	(n=0)
(Total Respondents n= 38)							
ALL POST ACUTE							
PROVIDERS	84%	31%	37%	53%	72%	48%	10%
<b>/-</b>	(n=369)	(n=134)	(n=160)	(n=233)	(n=318)	(n=208)	(n=43)
(Total Respondents n= 438)							



### 2. IF "DECLINING REIMBURSEMENTS" WAS INDICATED IN QUESTION 1, WHICH PAYER TYPE REIMBURSEMENT IS MORE PRESSING TO YOUR ORGANIZATION?

RESPONDENTS	GOVERNMENT PAYERS	COMMERCIAL PAYERS	PROVIDER SPONSORED PAYERS
NURSING HOME/SKILLED NURSING FACILITY	070/	40/	40/
(SNF)/ LONG TERM REHABILITATION FACILITY	97%	4%	4%
	(n=202)	(n=17)	(n=21)
(Total Respondents n= 240)			
HOSPITAL POST-ACUTE CARE/SHORT TERM			
REHABILITATION	94%	6%	6%
	(n=93)	(n=15)	(n=2)
(Total Respondents n=110)			
HOME HEALTH			
	100%	0%	0%
	(n=31)	(n=8)	(n=6)
(Total Respondents n = 46)			
DME/OTHER POST ACUTE			
	100%	0%	0%
(Total Respondents n= 35)	(n=35)	(n=0)	(n=0)
ALL POST ACUTE PROVIDERS			
	84%	9%	7%
	(n=361)	(n=40)	(n=29)
(Total Respondents n= 431)			



### 3. IF INDICATED "DENIALS" IN QUESTION 1, WHAT ARE THE PRIMARY ROOT CAUSES OF YOUR DENIALS?

RESPONDENTS	POOR DOCUMENTATION/	INCOMPLETE OR	CONSTANTLY CHANGING	OTHER
	TECHNOLOGY	<b>INACCURATE BILLING</b>	PAYER RULES	
NURSING HOME/SKILLED NURSING				
FACILITY (SNF)/ LONG TERM	59%	4%	37%	0%
REHABILITATION FACILITY				
	(n =63)	(n =4)	(n =40)	(n =0)
(Total Respondents n=107)				
HOSPITAL POST-ACUTE CARE/SHORT				
TERM REHABILITATION & AFFILIATES	41%	36%	34%	0%
		, -,		
(	(n =9)	(n =8)	(n =5)	(n =0)
(Total Respondents n= 22)				
HOME HEALTH	****	2=0/	220/	201
	49%	25%	33%	0%
	(n -11)	(n -6)	(n =0)	(n =0)
(Total Respondents n = 24)	(n =11)	(n =6)	(n =8)	(n =0)
DME/OTHER POST ACUTE AFFILIATES				
DIME/OTHER POST ACOTE AFFICIATES	0%	100%	0%	0%
	070	10070	070	076
	(n =0)	(n =2)	(n =0)	(n =0)
(Total Respondents n= 2)	( 0)	(11 2)	(11 0)	( 5)
ALL POST ACUTE PROVIDERS				
	54%	13%	34%	-%
	(n =83)	(n =20)	(n =53)	(n =11)
(Total Respondents n=155)				



## 4. IN REGARDS TO QUESTION 2, TO WHAT EXTENT IS MEDICARE ADVANTAGE AND/OR MEDICAID MANAGED CARE A GROWING PORTION OF YOUR PAYER MIX?

RESPONDENTS	SIGNIFICANT	SOMEWHAT SIGNIFICANT	NOT SIGNIFICANT	NOT APPLICABLE
NURSING HOME/SKILLED NURSING				
FACILITY (SNF)/ LONG TERM	52%	39%	10%	3%
REHABILITATION FACILITY				
	(n =55)	(n= 40)	(n =9)	(n =3)
(Total Respondents n= 107)				
HOSPITAL POST-ACUTE CARE/SHORT				
TERM REHABILITATION & AFFILIATES	90%	5%	5%	0%
	(n =20)	(n =1)	(n =1)	(n =0)
(Total Respondents n= 22)				
HOME HEALTH				
	100%	0%	0%	0%
	(n =24)	(n =0)	(n =0)	(n =0)
(Total Respondents n = 24)				
DME/OTHER POST ACUTE AFFILIATES				
	100%	0%	0%	0%
	(n =2)	(n =0)	(n =0)	(n =-)
(Total Respondents n= 2)				
ALL POST ACUTE PROVIDERS				
	65%	26%	6%	2%
		4	4	,
	(n =101)	(n =41)	(n =10)	(n =3)
(Total Respondents n= 155)				



### 5. WHAT IS YOUR ASSESSMENT OF YOUR POST-ACUTE CARE ORGANIZATION'S INFORMATION TECHNOLOGY & ELECTRONIC PATIENT DATA EXCHANGES?

RESPONDENTS	CURRENTLY NON-EXISTENT OR EXTREMELY POOR	CURRENTLY MINIMAL OR UNDERUTILIZED	CURRENTLY MODERATE OR OCCASIONAL UTILIZATION	CURRENTLY ADVANCED OR DAILY UTILIZATION
NURSING HOME/SKILLED NURSING			_	
FACILITY (SNF)/ LONG TERM	83%	13%	2%	2%
REHABILITATION FACILITY	(n=198)	(n=32)	(n=5)	(n=5)
(Total Respondents n= 240)	(11-130)	(11–32)	(11-3)	(11-5)
HOSPITAL POST-ACUTE CARE/SHORT				
TERM REHABILITATION & AFFILIATES	25%	38%	29%	8%
	( 20)	( 50)	( 44)	( 42)
(Total Respondents n=152)	(n=38)	(n=58)	(n=44)	(n=12)
HOME HEALTH				
	71%	10%	7%	7%
	(n=46)	(n=6)	(n=4)	(n=4)
(Total Respondents n = 60)	,	, ,	, ,	, ,
DME/OTHER POST ACUTE AFFILIATES				
	90%	6%	3%	0%
	(n=15)	(n=1)	(n=0)	(n=0)
(Total Respondents n= 16)	(11-13)	(11-1)	(11-0)	(11-0)
ALL POST ACUTE PROVIDERS				
	66%	27%	12%	5%
	(n=297)	(n=97)	(n=53)	(n=21)
(Total Respondents n= 448)		, ,	,	, ,

### 6. WOULD AN INFORMATION TECHCNOLOGY PLATFORM FOR PATIENT DATA SHARING & COMPREHENSIVE CARE COORDINATION IMPROVE YOUR ORGANIZATION'S FINANCIAL HEALTH AND <u>YOUR ABILITY TO THRIVE UNDER ACCOUNTABLE CARE</u> & LOWER FEE-FOR-SERVICE REIMBURSEMENTS?

RESPONDENTS	YES	NO	NOT SURE
CHIEF EXECUTIVE OFFICERS			
	91%	0%	8%
	(n=230)	(n=0)	(n=29)
(Total Respondents n= 259)			
CHIEF FINANCIAL OFFICERS			
	100%	0%	0%
	(n=70)	(n=0)	(n=0)
(Total Respondents n=70)			
CHIEF CLINICAL/MEDICAL/NURSING			
OFFICERS	44%	0%	46%
	(n=25)	(n=0)	(n=27)
(Total Respondents n = 54)			
ALL POST ACUTE PROVIDERS			
	85%	0%	14%
	(n=327)	(n=0)	(n=54)
(Total Respondents n = 383)		,	, ,

# 8. WHAT IS THE STATUS OF YOUR POST ACUTE ORGANIZATION'S <u>CAPABILITY TO INTERNALLY DEVELOP AND IMPLEMENT STRATEGIES TO SUCCEED</u> WITH INFORMATION TECHNOLOGY SOLUTIONS, TO SUPPORT DATA EXCHANGE NEEDED FOR, BUNDLED PAYMENTS, QUALITY REPORTING AND/OR CARE COORDINATION?

RESPONDENTS	NOT CAPABLE WITH OR WITHOUT EXTERNAL SUPPORT OF CONSULTANTS &/OR TECHNOLOGY VENDORS	CAPABLE WITH EXTERNAL SUPPORT OF CONSULTANTS &/OR TECHNOLOGY VENDORS	CAPABLE WITHOUT EXTERNAL SUPPORT OF CONSULTANTS &/OR TECHNOLOGY VENDORS
STANDALONE/SINGLE UNIT PROVIDER			
	11%	70%	18%
	(n=33)	(n = 204)	(n=53)
(Total Respondents n= 290)			
SMALL CHAIN (UP TO 5 UNITS)	704	740/	70/
OWNED OR ASSOCIATED WITH CORPORATE/CHAIN OF POST-ACUTE	7%	74%	7%
PROVIDERS	(n=9)	(n=51)	(n=9)
(Total Respondents n= 69)			
LARGE CHAIN (6+ UNITS)			
OWNED OR ASSOCIATED WITH	7%	67%	26%
CORPORATE/CHAIN OF POST-ACUTE PROVIDERS	(n=1)	(n=73)	(n=4)
(Total Respondents n= 78)			
ALL POST ACUTE PROVIDERS			
& AFFILIATES	10%	75%	15%
	(n=43)	(n=328)	(n=66)
(Total Respondents n = 437)	,	,	, ,



### 9. HAS YOUR POST ACUTE ORGANIZATION BUDGETED MONIES FOR HEALTH TECHNOLOGY PURCHASES/ IMPROVEMENTS IN 2018?

RESPONDENTS	YES	NO	NOT SURE
STANDALONE/SINGLE UNIT PROVIDER			
	7%	87%	6%
	(n=19)	(n=240)	(n=18)
(Total Respondents n= 277)	-,	,	, -,
SMALL CHAIN (UP TO 5 UNITS)			
OWNED OR ASSOCIATED WITH	77%	10%	13%
CORPORATE/CHAIN OF POST-ACUTE			
PROVIDERS	(n=30)	(n=4)	(n=5)
(Total Respondents n= 39)			
LARGE CHAIN (6+ UNITS)			
OWNED OR ASSOCIATED WITH	87%	1%	10%
CORPORATE/CHAIN OF POST-ACUTE	37,73	1,0	10/0
PROVIDERS	(n=26)	(n=1)	(n=3)
(Total Respondents n= 30)			
ALL POST ACUTE PROVIDERS			
	22%	71%	7%
	(n=75)	(n=264)	(n=26)
(Total Respondents n = 346)	·		, , ,

### 10. AMONG FORWARD-THINKING PROVIDERS OF POST ACUTE PROVIDERS, WHAT DO YOU PREDICT IS THE <u>DIRECTION POST ACUTE PROVIDERS WILL</u> TAKE IN 2018 TO ADDRESS LOWER FEE-FOR-SERVICE REIMBURSEMENTS & <u>ACCOUNTABLE CARE REFORMS</u>?

RESPONDENTS	ATTEMPT NON-TECHNOLOGY  BASED COLLABORATION  BETWEEN ACUTE AND POST  ACUTE PROVIDERS	PARTICIPATE IN PUBLIC & OR PRIVATE HIE	ACQUIRE CLINICAL WORKFLOW TOOLS & HEALTH DATA ANALYTICS	IMPLEMENT PATIENT ENGAGEMENT SOLUTIONS
CHIEF EXECUTIVE OFFICERS				
	43%	40%	10%	4%
	(n=93)	(n=88)	(n=21)	(n=11)
(Total Respondents n= 220)				
CFO/CIO/CMO/OTHER				
POST ACUTE CARE LEADERSHIP	27%	28%	20%	4%
(Table Bases and Salar and A00)	(n=29)	(n=30)	(n=22)	(n=4)
(Total Respondents n= 109)				

### 11. HOW MUCH OF YOUR <u>POST-ACUTE BUSINESS</u> DO YOU PREDICT <u>SHIFTING TO VALUE-BASED REIMBURSEMENT/ACCOUNTABLE CARE</u> MODELS IN THE NEXT 18-24 MONTHS?

RESPONDENTS	NONE	RELATIVELY SMALL	SIGNIFICANT	VERY SIGNIFICANT
	(0%)	(UP TO 5%)	(BETWEEN 5% & 20%)	(OVER 20%)
NURSING HOME/SKILLED NURSING				
FACILITY (SNF)/ LONG TERM	49%	42%	6%	1%
REHABILITATION FACILITY				
	(n=113)	(n=98)	(n=18)	(n=3)
(Total Respondents n= 232)				
HOSPITAL POST-ACUTE CARE/SHORT				
TERM REHABILITATION	2%	31%	38%	10%
	(n=3)	(n=44)	(n=54)	(n=15)
(Total Respondents n=143)	( 3)	()	(1. 3.1)	(11 13)
HOME HEALTH				
	11%	22%	58%	10%
	(n=6)	(n=12)	(n=32)	(n=5)
(Total Respondents n = 55)	, ,	, ,	, ,	, ,
DME/OTHER POST ACUTE AFFILIATES				
	6%	14%	40%	40%
	(n=1)	(n=2)	(n=6)	(n=6)
(Total Respondents n= 15)	(·· –)	( –)		
ALL POST ACUTE PROVIDERS				
	33%	34%	24%	6%
	(n=150)	(n=156)	(n=110)	(n=29)
(Total Respondents n= 455)	( 256)	( 133)	( ===)	( =5)

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