



PREPARE FOR IMPACT

Get the PDGM Analysis Tool to Assess and Plan for New Payment Requirements

Simione Healthcare Consultants has long recognized that tracking Key Performance Indicators (KPI) is the path to success in driving results for your business. That is why we developed **Simione Financial Monitor** to provide benchmarking and reporting across all payors focused on productivity and performance. Originally designed for our consultants, it quickly became the go-to solution for our clients. Being a data-driven organization is critical to recognizing how to navigate every new obstacle in your path. The Patient Driven Groupings Model (PDGM) is the latest of those obstacles.

More than 45% of home health providers will experience a decrease in reimbursement before the inclusion of the -4.36% behavioral adjustment under PDGM. Are you one of those providers?

Even in states where PDGM is expected to have a positive impact, it will not mean the same thing for every provider. It's time to assess the impact and prepare for the changes in your care delivery model.

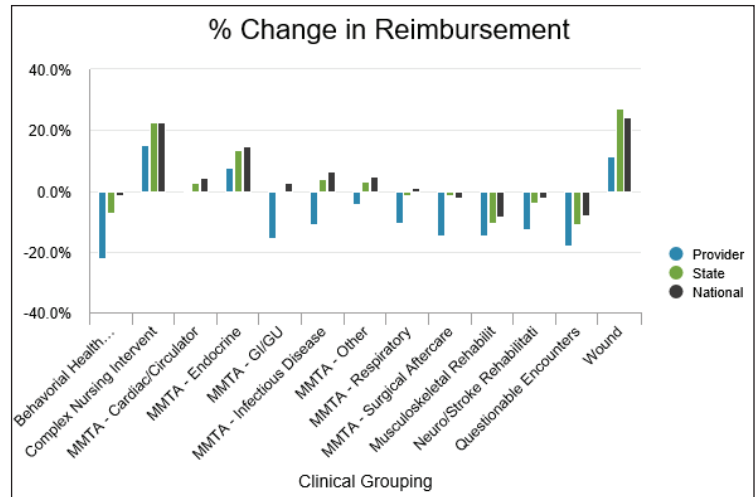
The **PDGM Analysis Tool by Simione Healthcare Consultants** will provide a clear view of what is coming and what to do to effectively handle the specific circumstances in your home health organization.

Based on the data CMS released in the PDGM final rule, Simione brings significantly more insight for analysis, offering:

✔ In-depth views of episode and reimbursement by:

- Admission source
- Admission timing
- Clinical group
- Episode type (LUPA)
- Episode length
- Nursing utilization
- Therapy utilization
- Gross and net margin

✔ Questionable encounters and the resulting reimbursement changes (Episodes with a primary diagnosis not classified into a clinical group under PDGM will be returned to the provider and may not qualify for reimbursement.)



✔ Dashboards for a visual perspective on your agency's impact, including comparison to state and national benchmarks.

ICD 10 Code	ICD 10 Description	PPS Episodes	60 Day PPS Reimbursement	1st 30 Day PDGM Reimbursement	2nd 30 Day PDGM Reimbursement	Total Reimbursement	Change in Reimbursement
1. I11.0	Hypertensive heart disease with heart failure	50	\$118,583	\$71,240	\$47,444	\$118,683	\$100
2. I13.0	Hyp hrt & chr kidney dis w hrt fail and stg 1-4/unsp chr kidney	50	\$138,684	\$79,233	\$57,681	\$136,914	(\$1,770)
3. I12.9	Hypertensive chronic kidney disease w stg 1-4/unsp chr kidney	21	\$54,768	\$27,879	\$22,536	\$50,415	(\$4,354)
4. I87.2	Venous insufficiency (chronic) (peripheral)	17	\$47,196	\$26,414	\$22,634	\$49,048	\$1,852
5. I25.10	Atheroscl heart disease of native coronary artery w/o ang pacts	11	\$25,813	\$15,325	\$10,561	\$25,886	\$73

Simione's PDGM Analysis Tool provides the most in-depth analysis available. So, what do you do with the data? How do you prepare? Simione will guide you down a path of success with the following services and solutions:

- Data review and identification of areas requiring further analysis and need for process change
- Assessment of current care model and performance based upon clinical groupings and 30-day periods, including therapy utilization
- Data analysis of timing and discipline approach and impact of PDGM LUPA changes
- Development of a care delivery model tailored for your success under PDGM
- Training for clinical managers and staff
 - LUPA management oversight
 - Staffing impacts (caseload, team size)
 - Impact of clinical actions on results
- Quality reporting and outcomes
 - Guidance for successful clinical outcomes
 - QAPI under PDGM
 - PDGM and Value Based Purchasing
 - Outcomes improvement through enhanced data analysis, training & oversight
- Financial management – maintain cash flow, budgeting, dashboards, data analysis and revenue validation under PDGM
- Electronic Health Record review – readiness assessment and revenue validation



FREQUENTLY ASKED QUESTIONS

What is the data source and what is required to get the data into the PDGM Analysis Tool?

Simione is utilizing 2017 and 2018 CMS claims data, therefore no resource is required on your part to upload data or set up an interface. The data includes traditional Medicare claims only. It does not include Medicare Advantage claims.

What is the basis for the reimbursement change and are behavioral adjustments included?

The reimbursement methodology uses the finalized 2020 rule as of October 2019. Behavioral adjustments are not included in the Simione data analysis but Simione will model the behavioral adjustment upon request.

What access will I have to multiple provider numbers and how many users can I have?

You will have access to the Medicare provider numbers within your agency. This includes both national and state benchmark data. You

will have unlimited user access from within your agency.

Is there any HIPAA information in this tool?

No, all information has been de-identified.

If I have multiple providers, can I view them in one report?

Yes, Simione can customize a report tailored to your needs. Fees will vary based on the number of providers.

Is this a one-time fee and when does my subscription end?

The PDGM Analysis Tool includes a subscription through January 2020 at a one-time fee.

Is there consulting time included in the subscription fee?

Consulting services and solutions are tailored to your needs and will be quoted separately. We do recommend a review with your