MatrixCare®
by ResMed

CHALLENGES:

- Time-consuming, manual data process using multiple platforms
- Inability to keep up with company-wide data needs
- Data inaccuracies in key metrics like readmission rate

SOLUTION:

MyAnalytics
A powerful and flexible suite of long term care analytics products.

RESULTS:

- Automated data reports, leading to a $100,000 savings in opportunity costs for each report automated
- Freed staff time for higher-value tasks
- Improved accuracy of key business data, resulting in better care

American Senior Communities

When Mike Easley was hired as the Chief Information Officer (CIO) for American Senior Communities (ASC) in 2016, the company's leadership knew it needed to change the way we were collecting and analyzing data.

"We were using a manual process wherein we pulled data from multiple platforms and multiple areas within each platform, and trying to marry that data together," said Easley. "It was time consuming, and we knew we could improve our accuracy."

ASC's data gatekeeper, Director of Electronic Medical Records, Kevin Clark, was ready for a new data management approach too. He could no longer keep up with data requests from ASC's corporate leadership and its 95 individual facilities.

"In my first conversation with Mike I said, 'Mike, I need help. I can't do all this on my own.' Our leadership changed, the data needs changed and there was a tidal wave of requests. So, the manual process really didn't work with that model," said Clark.

American Senior Communities began using MatrixCare analytics tools in 2010. But in 2017, the company upgraded to MatrixCare's newest and most comprehensive analytics solution, MyAnalytics.

MyAnalytics is healthcare analytics software designed for long-term and post-acute care (LTPAC) businesses. It includes informative dashboards with prebuilt visualizations for easy data monitoring. Plus, it allows users to create custom reports in key areas like census, accounts receivable and readmissions.

Before American Senior Communities started using MyAnalytics, the company created all reports manually, including census reports. Census data was entered at each individual facility, sent to the home office and recompiled for a corporate-wide view.

But through MyAnalytics, ASC was able to automate census and other reporting.

For daily reports, I estimated that it saves about $100,000 in opportunity costs for each report that we automate.

Mike Easley, CIO at American Senior Communities

"And it frees up our staff's time to do the things that they're supposed to be doing, rather than manually compiling reports," said Easley.

When you're manually processing data, it's hard to maintain perfect accuracy. One metric that ASC continuously struggled to measure accurately was readmission rate.

Readmission rate tracks the number of people readmitted to a hospital within 30 days of an initial hospital visit. Prior to using MyAnalytics, American Senior Communities was tracking it manually at the facility level. That led to inconsistencies, because it's a complicated metric with a lot of exemptions. Emergency room visits, for example, don't count as readmission. Neither do observation periods. But facility staff struggled to consistently recognize readmission exemptions and accurately enter the data.

"It took a long time organizationally for us to find a product or a way to track readmission rate where everybody was on the same page—one that was easy enough to explain and maintain on a daily basis from

data entry to reporting," said Clark. "That's probably been the number one benefit of MyAnalytics."

With easier access to data about where admissions come from, where discharges go, the length of their stay, what payer sources people use and other key metrics, ASC's leadership can make better business development decisions and serve customers better.

The ability to track admissions and discharges, where they came from, and why they left has directed us to go to those people and specifically work on our length of stays and our readmission rates.

Kevin Clark, Director of Electronic Medical Records

According to Easley, tracking these data points also has the future potential to help ASC's transitional care team know exactly when people are being discharged to home or other care settings and reach out to them to prevent a return to the prior level of care.

The American Senior Communities team is optimistic about a future that includes easier access to the data

needed to make the best decisions for their business and customers, especially as ASC prepared for the implementation of the Patient Driven Payment Model (PDPM).

PDPM is a Medicare reimbursement model that went into effect for skilled nursing facilities on October 1, 2019. Using MyAnalytics PDPM simulator report tool, ASC was able to dive into the PDPM calculation and key performance indicators (KPIs) associated with PDPM prior to its introduction.

"We used data from a bunch of different estimators. Our therapy group had an estimated impact. Our point rank system had an estimated impact. And we had a third data point with MatrixCare that used realtime data," said Easley. "It was extremely helpful to triangulate all three of those models and understand in detail which buildings we needed to focus on to ensure they didn't take a massive revenue hit when PDPM came out."

So, it's safe to say, the American Senior Communities team was much better prepared for PDPM with MyAnalytics on their side. But more importantly, they're better prepared for any future data or reporting challenges that come their way. They're equipped with the tool they need to confidently, efficiently and accurately analyze the data that truly matters to their business and their customers.

Call 866.469.3766 to learn more, or visit matrixcare.com