

# How to Identify Your Top Post-Acute Performers

A Step-by-Step Guide from Ensocare

With the increased emphasis on quality of care, preventing readmissions and tying Medicare payments to meeting certain standards, it's increasingly important for hospitals to have confidence in the post-acute care (PAC) facilities they send their patients to for care.

Identifying which facilities make great partners and which ones need a re-evaluation can be difficult. In this guide, we'll look at the types of statistics you should be paying attention to, how to partner with high-performing partners in the post-acute space, how to work with under-performing facilities to improve care and why it's important to bring payers into the discussion.

By following these guidelines, you'll have taken important steps in establishing a narrow network you and your patients can rely on.



## Start Tracking the Right Data

This is the most important step, as you can't really do anything else until you've begun the hard work of tracking the very data that shows the level of care your patients receive.

But not just any data will suffice. It's important to track the right data, the metrics that truly signify whether or not a string of post-acute readmission episodes is a temporary anomaly or the norm at a given facility.

Here are the metrics you'll want to analyze carefully:

- **Readmissions:** This is the most critical guidepost for identifying post-acute excellence as well as shortfalls. Is there a facility that always seems to be sending patients back to you? Is there one that rarely does? Start here and then branch out to the other metrics.
- **Patient Satisfaction Scores:** When you're acquiring patient satisfaction scores related to your own organization, you can also ask patients about the quality of the care they received at the PAC facility. It goes deeper than publicly reported Medicare Star ratings. A series of first-person positive scores or scathing reviews will tell you a lot about a facility that other types of data cannot.

- **Response Rates:** You want to measure how often a facility, ward or agency responds to your requests for post-acute placement. Those that respond consistently, no matter the patients' insurance plan, can be valuable partners, while those whose responses are sporadic may not be.
- **Response Times:** Perhaps more important than response rates is the response time of those persons who are getting back to you. A PAC facility that always responds, but does so 3 days after your inquiry, may not be as valuable of a partner as the organization that responds just 75% of the time, but when they do, it's within 15 minutes of your inquiry.
- **Response Result:** Who is saying no, and who is saying yes.
- **Capacity:** Who has space for your patients, even the tough-to-place ones, and who doesn't.
- **Capabilities:** Who can take your most complicated cases, and who can't.

It's important to categorize all this information so you can act accordingly and so that none of your personnel are wasting time trying to place patients in a facility they can't reasonably expect to receive care from.



## Analyze the Data

Collecting the data is one thing; you also need informatics specialists onboard who are capable of tracking the data you've collected.

Think of it this way; maybe there's a nursing home whose care has led to precisely zero readmissions in the last year. That could be because they provide excellent care; **it could be because all those patients are dead.**

Okay, that's an extreme example, but it's still a critical distinction that needs to be made!

It's important to carefully analyze the data and draw the right conclusions from what's available. Sometimes, this requires a combination of insightful analytics programs and old-fashioned research. Pick up the phone, speak with the people at those facilities, question the numbers and extrapolate reasons why one facility overperforms while another underperforms.

Let's say that you've been sending patients to a rehabilitation facility and, for the most part, recovery has gone great for those persons placed there, with only a small percentage of individuals requiring readmission at your hospital. But upon closer inspection, you may discover that most of these patients share a common trait; they have a knee injury requiring a specific therapy or piece of equipment for optimum recovery, and you come to find out the PAC facility simply doesn't have the equipment available or a qualified individual who can administer the treatment.

This insight was only possible because you carefully analyzed the available data and drew the right conclusion. And it gives you a lot of negotiating power...



## Extend Olive Branches

The negotiating power you attain from data analysis can help you improve the care of your patients even at the facilities that aren't performing. Once you've determined potential areas of deficiency, it's important to explore potential solutions in conversations with your under-performing PAC providers.

Let's go back to the knee rehabilitation example for a second. Because you have an insight based on data, you also have an unassailable stance from which to bargain, and you can do it in the right way so as not to offend those you want and need to ultimately work with.

Here's a sample dialogue you can and should be having with a facility that maybe isn't performing:

"You've been providing excellent results for so many patients over the years and I can't thank you enough. But I see that you're sending a lot of knee patients back our way; I'm sure you know, too, that there's a therapy that's been shown to get 90% positive results. What do you need to get that type of care going? Is there anything we can do? We want to keep sending these patients your way because you're great at so many things, but I also need to know these knee patients are getting the best just like every other patient you treat."

That kind of honest conversation can open up brand new partnerships and show your PAC community that you truly care about patients and you're willing to work together to make things happen. But it also demonstrates that you take this seriously and you're willing to wield your considerable influence and power if their facility is not going to do everything they can to provide for patients.



## Solidify Your Best Relationships

Alternately, you want to always solidify those relationships that pay the highest dividends for your patients. You don't necessarily want to spend so much time on the under-performing PAC facilities that you take the best performers for granted.

Make sure to regularly touch base with the facilities that achieve the best results. Ask them if there's anything you can do to help, what they've got coming up in the future and whether there are ways to further improve the processes you've established between your two organizations.



## Consult Your Case Managers

Case managers are the secret weapon in identifying your top post-acute performers.

After all, it's case managers who have regular interactions with the many facilities where you place patients. They may have relationships with persons at those facilities based off of years of rapport, they know who responds quickly and efficiently and they understand the various idiosyncrasies of each facility's response process better than perhaps anyone else.

It's the case manager who may know that, while Facility A is fantastic at responding to your patient placement inquiry on weekdays, they have a skeleton crew at night and on weekends, requiring your organization to work harder to place patients during those times. That could lead to an increase in length of stay and ultimately have an effect on quality of care.

Case managers are also the folks who are able to say what the data cannot. They may know that a post-acute facility has a new manager who is revamping all the processes, and therefore you can anticipate that response times will be improved in the coming months. Similarly, they can point to potential interpersonal problems at the organization that can hinder productivity.



## Have Your Case Managers Reach Out to Patients

You can also get great insights into your post-acute providers by reaching out to patients at regular intervals to see how they're doing.

For many organizations, this is part of the job of the case manager: checking in with patients to make sure they're showing up to all the necessary appointments, prescriptions are being filled and recovery is going as planned.

Using technology to track this information can give you the insights you need to identify whether or not the post-acute provider is meeting the threshold necessary for aiding the patient on their road to recovery. And the case manager follow-up with patients can provide the essential context that shows what's really going on.

While tech can give you data on patient vitals and appointments being met, the patients themselves relate other critical information.

“How’s your stay going?”

“Well, it’s going great, but…”

The information that follows that ‘but’ will provide you with more knowledge about a PAC than just about anything else you could imagine.

OR

“How’s your stay going?”

“I love it. The staff are really attentive and I’m recovering faster than I would have expected.”

Those simple conversations can yield a ton of information about the quality of the PACs you’re sending patients to upon discharge.



## Open Up a Dialogue with Payers

The final piece of the puzzle is the payer.

Payers have insights into post-acute providers that you may not have access to. In some cases, they may have built out their own narrow networks based on deals they’ve negotiated and the quality of care provided by each facility.

You might have a conversation with a payer representative where they tell you why a certain organization isn’t covered by their plan. This can lead to some surprising insights. A payer pulling out of an agreement could be the first signal that something is amiss, even if other payers have opted to leave

that facility in-network. This may even lead you to revisit your own narrow network agreements with facilities to ensure your patients are getting the care they need.

Whether that happens or not, you should absolutely keep the payer in the conversation. Their relationships with various PAC providers will be a goldmine of insight for your organization.



## Your Narrow Network Awaits

By using the strategy outlined in this guide, you should be able to establish a narrow network that creates confidence in the care your patients receive when they’re discharged from your facility.

Healthcare is evolving rapidly, and the facilities that take the time to collect and analyze the data, loop in case managers and have the tough conversations between PACs and payers will be the ones that find success. Not just financial success, but better patient recovery rates and satisfaction ratings.

You have a unique position and considerable power in this situation. Using the steps above, you can use that position to provide the best experience for your patients.

### *Need a Hand Putting This Process in Place?*

Learn more about Ensocare Transition and Sync & Connect, which can streamline the discharge process and help you monitor patient care post-discharge.

