

Eli's Rehab Report

Home Health: Try Something Different in 2017

Emphasize how your therapy work keeps patients out of Acute Care, SNFs.

"In rehab, we tend to stay in our safe zone of just dealing with patients' functioning," says **Cindy Krafft, PT, MS-HCS-O** and educator of documentation, regulation, therapy utilization, and OASIS for home health practices nationwide. But now more than ever, it's time for therapists to step up and demonstrate the value they provide beyond helping patients move better.

The newly released final 2017 home health rule reduces Medicare payments to home health by \$130 billion and creates four new quality measures (replacing the current six), pushing therapists to focus less on the number of visits they give to patients and more on the value of care they provide during the limited amount of time they are with them.

Aside from being a revenue contribution for their agency, therapists need to show how they help patients achieve health outcomes. How do they do this? When working with a patient, Krafft recommends that therapists ask themselves the following questions:

- How am I keeping this patient out of the hospital or a skilled nursing facility (SNF)?
- Why does it matter that I help this patient improve his/her mobility and functioning?

Krafft reminds therapists that while they do bring in money for their agencies, that revenue link won't last forever, given the impending pay cut in Medicare reimbursement that home health will see in 2017. That means that therapists have to demonstrate their value in other ways. "Home health is being pushed hard to reduce hospitalizations, and the final 2017 rule went further and said to reduce admittance to SNFs," says Krafft, so therapists must demonstrate how they are directly contributing to those goals.

To survive and thrive in 2017, home health therapists need to be intentional when they work with patients. So a therapist helped a patient walk twice as far as he could before receiving care. So what? Why is that important? Because that patient is now more independent, which keeps him out of the hospital or SNF.

What else can therapists do differently to make 2017 a great year for their agency and the home health industry as a whole? Smile more when talking about the final rule. Krafft says, "We tend to be a doom and gloom industry, especially when rules come out." She urges therapists to talk about the positives, such as the opportunity to be more purposeful and reflective than ever when caring for patients.

There's a lot happening in the home health world right now, a lot that can be easily seen as disappointing, like downward payment adjustments and changing payment models. But Krafft urges therapists to be optimistic. If therapists start thinking now about how they directly contribute to keeping patients out of higher cost care (hospitals and SNFs), then they'll be in good shape to thrive financially and clinically in 2017.