

OASIS Alert

News You Can Use :HHAs RELY SIGNIFICANTLY ON NON-HOSPITAL REFERRALS

Negative pressure wound therapy wins kudos.

Beneficiaries who need help with three or more activities of daily living make up only 7 percent of the Medicare population but consume up to one-quarter of all Medicare Part A and B spending, according to a study conducted by **Avalere Health** for the **SCAN Foundation**.

"These beneficiaries consume nearly 4.5 times more per person in Medicare spending (\$18,902) than those without disabilities (\$4,289)." the study determined.

The study defines Part A services as those provided after an acute hospital stay and Part B services as those ordered by a physician but not following a hospital stay.

While most Medicare home health spending was expected to be financed through Part A, recently the portion financed by Part B is larger and growing faster than that financed by Part A and will continue to explode, the study shows.

"Some post-acute care services may fill-in for long-term care needs," the study concludes.

Lesson learned: Informing physicians about your home health agency and how you can help their patients is important now and will become increasingly so in the next few years.

To see the Avalere study go to www.avalerehealth.net/research/index.php and scroll down to The Alliance for Home Health Quality and Innovation, Medicare Spending and Rehospitalization for Chronically Ill Medicare Beneficiaries: Home Health Use Compared to Other Post-Acute Care Settings.

- **Multiple studies presented at the 22nd Symposium on Advanced Wound Care/Wound Healing Society** meeting in Dallas support negative pressure wound therapy, notes V.A.C. therapy device maker **Kinetic Concepts Inc.** in a release.

One of the studies compares negative pressure wound therapy versus advanced moist wound therapy. During the active treatment phase, patients receiving V.A.C. therapy had fewer hospital admissions and amputations, a **Boston University School of Medicine** researcher says in the study.

To learn much more about NPWT order a CD or transcript of **Dorothy Doughty's** May 20 **Eli**-sponsored audioconference Negative Pressure Wound Therapy: Cost Effective and Clinically-Sound Best Practices.

More information is at www.audioeducator.com/industry_conference.php?id=1455 or call 1-800-508-2582.

- At the April 1, 2009 Home Health Open Door Forum, Division of Recovery Audit Operations (DRAO) staff provided an update on the Recovery Audit Contractor (RAC) Program. On April 14, DRAO staff clarified statements made about home health and hospice data and RAC audit activities for home health and hospice. RACs have been receiving home health and hospice data over the last few weeks, but CMS does not anticipate any RAC review of home health or hospice claims until sometime this summer, DRAO clarifies.

Note: For weekly information and analysis to ensure your agency's success, subscribe to Eli's Home Care Week at www.elihealthcare.com or call 800-874-9180 for your subscriber-only discount.

- **More chronic conditions translates to longer home care stays** for patients, says a new study by the **VNSNY**

Center for Home Care Policy & Research.

For example: Patients who had hypertension plus three or more other chronic conditions, such as diabetes, heart disease, and arthritis, had nearly 22 days more (78 days total) of home care on average than patients with only hypertension (56 days total), says the study published in the Journal for Healthcare Quality.

Adding cognitive impairments to chronic conditions also increases the length of stay, the study found. Patients with hypertension and cognitive impairment used home health care for 20 days longer than patients without cognitive impairment.

Bottom line: The OASIS assessment needs to more accurately assess chronic conditions and cognitive impairments, the study authors suggest.