

### Learning Objectives

- Analyze recent census tends in long-term care facilities, including changes in resident demographics and accupancy rates.
- Explore the shifts in payerso urces and their effects on revenue streams from Me dicare, Me dicaid, private pay, and managed care.
- Review regulatory changes influencing census management and player considerations, particularly in the context of value-based care.
- Develop strategies for improving census mana gement through effective marketing, community outre ach, and enhanced care services.
- $\begin{tabular}{ll} \textbf{Discuss} \ market \ dynamics, including competition \ and evolving \ consumer \ pre \ ferences, \ and \ their impact \ on \ census \ and \ p \ ayer \ strategies \ \ \end{tabular}$

- $\begin{tabular}{ll} \textbf{Pre-dict} & future trends in census and payer considerations based on aging populations, technological advancements, and he although policy changes. \end{tabular}$
- Highlight the role of data analytics in making informed decisions regarding census and player management.





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- · Rising Acuity
- Increase in HCBS, Aging in Place

· Reduced Short Term Census Ne ed to Rebuild LTC



- · Work Force Shortages
- · Clinical Competencies · Provider Collaboration



· Required Shift in Mindset



### Current Census Trends

 $\label{eq:Aging Population: The U.S. is witnessing a substantial increase in its elderly demographic. By 2030, the number of individuals aged 65-74 is projected to double, and those over 80, who are primary users of LTC services, are expected to tiple$ 

**Increased Demand for Services.** Approximately 70% of adults aged 65 and older will require long-term care at some point in their lives. The average length of stay in long-term care is 3.2 years, with just ove 20% of residents requiring care for 5 years or longer.

**Rising Costs.** Americans spend \$475.1 billion annually on long-term care. Medicaid covers only 54% of these costs, highlighting the financial burden on individuds and families

Employment Growth: Employment in home and community-based care industries has grown damatically from 1990 to 2024, adding 2.3 million jobs in services for the elderly and people with ds doilifles, and 1.5 million in home health care services. This trend is expected to confirue, with a poileded 26.5% increase in employment in services for the elderly and persons with dischilifles from 2023 to 2033



### Current Census Trends

Work force Shortages: The LTC sector faces a recruitment crisis, with a significant shortage of caregivers. This shortage is exacerbated by an aging population and a diminishing supply of cares, leading to increased reliance on informal care

Shift Toward Home-Based Care: Many dider adults prefer to age at home, leading to increased demand for home health aides. However, the high costs and emotional tall associated with in-home care present significant challenges for families

Luxury Care Options: There is a growing trend toward high-end care homes that offer hotel-like amentiles, calering to diffuent serios seeking upscale living arrangements integrated with competensive care









Shifts in Payer Sources	
Medic aid's Dominance  Primary Payer: As of July 2024, Medicaid was the primary payer for 65% of ruising facility residents, with Medicare covering 13%, and the remaining 24% having other primary payers such as private insurance or auto-lo-packet payments  Financial implications: Medicaid's reimbursement rates are often lower than the actual cost of cane, leading to financial challenges for facilities. This disportly can affect the quality of care and the facility's ability to maintain operations.	
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Shifts in Payer Sources	
Medic are's Limitations  Short-term Coverage: Medicare generally covers up to 1 00 days of skilled nursing bacility care following a qualifying haspital stay. However, it desent a over long-term austradial care, which is a significant portion of LTC services  Impact on Fadility Census: Facilities with a higher proportion of Medicare residents may experience furch undirect in occupancy rates due to the limited duration of Medicare coverage. This can lead to periods of low occupancy and financial instability.	

### Shifts in Payer Sources

### Private Pay & Other Sources

Private Pay Challenges: Private pay residents often have higher acuity levels, in creating the cost of care. Additionally, the financial burden on families contead to quicker transitions to Medicaid, affecting facility revenue streams

**Oher Payers**. Other sources, including private insurance and out-of-packet payments, account for a smaller portion of LTC funding. The variability in these sources can lead to unpredictable revenue for facilities

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### Regulatory Changes & Value-Based Care

Changes in payer sources, including shifts in Medicaid and Medicare policies, the financial challenges of private pay residents, and state-specific funding mechanisms, are significantly impacting the census and financial health of long-term care facilities.

Medicare ExpansionProposds: Recent proposids to expand Medicare to cover home-based lang-term care services could impact facility census by patentially reducing the number of residents requiring institutional care

Stde-Level Variations: Stde-specific programs and funding mech onisms can influence the payer mix in LTC facilities. For example, some states offer cach grants for ind viduals or their caregivers, affecting the number of residents relying on Medacid

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### Regulatory Changes & Value-Based Care

### Impact on Payer Considerations

Quality Metrics integral on: Payers are increasingly incorporating quality measures into reimbus ement models, incentivising LTC facilities to enhance care standards. For instance, CMS has implemented value-based payment models that link reimbus ement rates to quality performance, encouraging facilities to improve care to receive higher payments

Cod Efficiency Incentives: VBC models reward facilities that deliver care efficiently, potentially reducing unnecessiny haspital each missions and emegancy room visits. This approach aligns with payes goods to cantiol the delibrace expenditures while maintaining or improving care quality

Risk Shaling Arrangements: Payes are explaring risk-sharing agreements where LTC facilities assume some financial lisk far potient outcomes. Such arrangements can lead to shared saving if quality largets are met, but may discressful in financial pend test froutcomes fallshart for the control of the con



### Regulatory Changes & Value-Based Care

### Implications for Long-Term Care Facilities

Financial Sustainability: Adopting VBC models requires LTC facilities to investinguality improvement initiatives and data analytics to mori bripe formance. While this can lead to improved care and potential financial rewards, it also necessitates uptrant investments and may pose challenges for facilities with limited esources.

Care Coordination: To succeed in VBC models, LTC facilities must enhance care coordination, in legrating services across various providers to achieve better health outcomes. This callaborative approach is essential for meeting the comprehensive care expectations set by

**Policy Adaptation:** LTC provides need to stay informed about eval ving VBC policies and adapt their practices accordingly. Engaging in discussions with policymakers and participating in pilot pagams can help facilities navigate the complexities of VBC and dign with payer expectations





### Strategies for Improving Census Management

### Enhance Care Quality & Services

- Incorporate Wellness Programs: Integrate comprehensive wellness initiatives into daily activities to promote physical, mental, and emotional well-being. This holistic approach can attract potential residents seeking a balanced lifestyle
- Leverage Technology: Implement advanced technologies, such as vitual reality (VR), to offer immersive experiences that combat loneliness and stimulate cognitive function. For example, VR can enable residents to "trav et" or revisit nost algic places, enhancing their quality of life.

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### Strategies for Improving Census Management

### Strengthen Community Engagement

- Host Events and Seminars: Organize open houses, health fairs, and educational seminars to showcase your facility's offerings and build relationships with the local community. Encouraging current residents and their families to share positive experiences can also enhance your facility's reputation
- Develop a Strong Community Culture: Define and model core values that promote a positive environment. A strong, positive company culture can lead to higher resident satisfaction and attract new residents.

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### Strategies for Improving Census Management

### Optimize Marketing & Outreach

- Implement Effective Marketing Strategies: Utilize targeted marketing campaigns, including digital marketing and search engine optimization (SEO), to reach potential residents and their families. Personalized communication and show casing your facility's unique features can set you apart from competitors
- · Highlight Unique Amenities: Emphasize distinctive amenities and and services that cater for esidents' preferences, such as gournet dining, wellness programs, and social activities. For instance, some facilities offer luxury accommodations and personalized care to attract affluent seniors



### Strategies for Improving Census Management

### Adapt to Market Demands

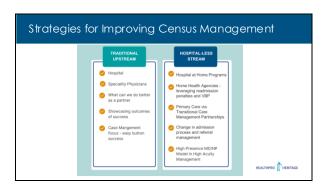
- Reconfigure Facilities: Consider redesigning older buildings to meet current preferences, such as combining smaller units into larger ones or updating interiors to appeal to modern tastes. Professional staging can help potential residents envision themselves in the
- Offer Flexible Care Options: Provide a range of care levels and services to accommodate diverse needs, from independent living to specialized dementia care. This flexibility can attract a broader demographic

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## Embracing Technology and Data Insights through mochine learning & artificial intelligence Change & tends in behaviors Transportation Perstavist Oxide activities Oxide activities Wellness & a childly participation Dining preferences "Medical Concierge" Communication to sup part seniors' engagement Predictive analytics Wear ables & RPM/RTIM

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## Insights Through Machine Learning & Artificial Intelligence Analyze changes & Irends in behavios Schedule transportation, Dentist visits, PCP visits, Ou bide activities Increase wellness & activity participation Nonator dring preferences Provide a "Medical Concierge" Communications technology to support seniors' engagement Predictive analytics Wearable Health Monitors Supervision Tech



# The Acuity & Occupancy Equation Industrial the financial impact & available to the financial formula. Industrial the financial f

## The Acuity & Occupancy Equation Understand the financial impact and success drivers of YOUR Occupancy Formula - Thoughtful Level of Care Placement with Focus on Wellness and Lifestyle Offerings - Preventdive Health Services - Anallary Services and Partneships - Integrated H+W Models - Pupposet Markeling Shift - Help independent adults "aspire to refire" - Promate the benefits of community vs stoying home - Carabal foreitness & improve social lifestyle - Create a "One Stap Shap" Community

## Strategies for Improving Census Management

- Standardized Communication Tools:
   Utilize EHR with the ability to cross-communicate with other providers, use secure messaging systems or centralized care platforms.
- Routine Touchpoints
   Establish points of contact with key players at each care setting.
- Multidisciplinary Team Meetings:
   Hold internal meetings with all relevant caregivers to align goals and ensure all transitional data paints a clear picture.



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### Strategies for Improving Census Management

### Offer Comprehensive Services

- Falls Programming
   Memory Care Programming
   Transitional Care Management
- Pharmacy
- Rehab/Therapy
- Wellness/FitnessHome Health

Advanced Clinical Programming: UI, Parkinson's, PainManagement, Post-Operative Recovery, CHF/COPD, and MORE





### Market Dynamics & Their Influence

### **Market Dynamics**

- Technological Integration: The adoption of advanced technologies, such as telehealth and health monitoring systems, is becoming a competitive differentiator. Facilities integrating these technologies can offer enhanced care and attract tech-savvy.
- Consumer Expectations: There is a growing preference for high-quality, personalized care. Facilities offering upscale amenities and services are attracting affluent seniors seeking a higher standard of living. For example, KYN Hurlingham in London provides luxury accommodations, including a spa, private cinema, and Michelinstarred restaurant, catering to this demand

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### Market Dynamics & Their Influence

### Competitive Landscape

- Market Fragmentation: The LTC market is highly fragmented, with numerous providers ranging from small, family-owned facilities to large, corporate chains. This fragment ation intersilies competition, making differential tion crucial
- Emerging Comp efitors: New entrants, including luxury care homes and innovative service models, are challenging traditional lacilities. For instance, the Iloura Village in Chinchilla, Australia, is a state of the art facility offering 81 beds and creating 20-30 new jobs, high Highling the trend toward modern, well-equipped care environments.
- Consumer-Centric Models: There is a shift towards models that priori fize consumer choice and flexibility, such as assisted living and home care services, which can impact traditional nursing home census





### Financial Impact of Payer Shifts

### Impact on Reimbursement Rates

- Medicaid Adjustments: Medicaid is a primary payer for LTC services, but reimbursement rates often lag behind the actual cost of care. Recent reports indicate that states are facing substantial increases in Medicaid costs due to a sickenhan-expected population post-pandemic. For example, Pennsylv anial proported as \$2.5 billion increase in Medicaid spending to address the se challenges
- Medicare Payment Models: Medicare's fee-for-service system pays separately for acute and post-acute care, which can lead to longer stays in skilled nursing facilities than optimal. This payment structure may not always align with the actual cost of care, a flecting for ally revenues
- Private Insurance Variability: Private insurers may offer higher reimbursement rates compared to Medicaid, but these rates can vary widely. Facilities with a higher proportion of private-pay residents may experience more favorable cash flow, while those reliant on Medicaid may face financial strain due to lower reimbursement rates.

### Financial Impact of Payer Shifts

### Impact on Cash Flow

- Delayed Payments Medicaid and Medicare often have longer reimbusement cycles, leading to cash flow challenges for LTC facilities, Facilities may need to manage operational costs without timely payments, affecting their financial stability
- Regulatory Changes: Alterations in healthcare regulations and policies can impact LTC revenue cycles. For instance, changes to Medicare and Medicaid reimbursement policies could a ffect revenue streams, necessitating facilities to adapt their financial strategies accordingly
- Payer Mix Management: A facility's payer mix—the proportion of reverue from Medicaid, Medicare, and private insurance—directly influences cash low. A higher percentage of Medicaid residents can strain finances due to lower reimbursement rates, while a balanced mix may offer more financial stab lity

### Financial Impact of Payer Shifts

### Strategies to Mitigate Financial Impact

- Diversity Payer Sources: Increasing the proportion of private-pay residents can enhance cash flow, as private insurance and out-of-pocket payments typically offer higher reimbursement rates.
- Optimize Operational Efficiency: Implementing cost-effective practices and improving operational efficiencies can help offset lower reimbursement rates from public payers
- Advocate for Policy Changes: Engaging in advocacy efforts to influence Medicaid and Medicare reimbusement policies can lead to more forvorable rates for LTC facilities.

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### Future Trends in Census & Payer Considerations

### Technological Advancements

- Predictive Analytics: Utilizing machine learning algorithms, predictive analytics can
  analyze data to forecast health issues before they become serious. For instance,
  data from wearable devices can detect early signs of health concerns, enabling
  proactive care
- Teleheath Integration: The adoption of telehealth services allows for remote monitoring and consultations, enhancing care accessibility and efficiency. This integration is particularly beneficial for managing chronic conditions prevalent among the elderly
- Robotics and Automation: The use of robotics in LTC facilities can assist with tasks such as medication management and mobility support, improving operational efficiency and resident well-being

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### Future Trends in Census & Payer Considerations

### Other Trends

- Community Integration: There is a growing trend towards integrating LTC facilities with the broader community to combat loneliness and enhance the quality of life for residents. Peson-centered models that connects enforhomes with community resources are becoming more prevalent
- Policy Adaptation: LTC facilities are adapting to policy changes by implementing value-based care models and complying with new regulations. This adaptability ensures confinued funding and aligns care practices with current standards
- Technological Integration: The incorporation of advanced technologies, such as predictive analytics and telehealth, is becoming standard practice. These technologies improve care delivery, operational efficiency, and resident so listaction.







### The Role of Data Analytics

- Predictive And ytics for Demand Forecasting: By analyzing his brical data, demographic trends, and seasonal patterns, data analytics can forecast future patient admissions and discharges. This breight allows LTC facilities to anticipate occupancy levels, adjust staffing, and manage resources efficiently
- Resource Allocation and Staffing Optimization: Data analytics assists in determining optimal staffing levels based on patient actify and cersus frends. By analyzing historical data an patient needs and staffing levels, facilities can ensure appropriate staffing, enhancing patient care and operational efficiency.
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  Qually improvement initialives. By monitoring key performance indicators (KPs) such as hospital 
  readmission rates, infection rates, and patient satisfaction scares data and yits helps identify 
  areas for improvement. This information supports targeted quality improvement initiatives, 
  leading to be the patient outcomes and higher accupancy rates.

  Financial Performance Analysis: Data analytics enables facilities to assess financial metrics, 
  including revenue per patient day and poyer mix. Undestranding these financial aspects aids in 
  pricing strategies, identifying prafitable payer sources, and improving overall financial health.

### The Role of Data Analytics

- Enhancing Patient Care and Satisfaction: By analyzing patient data, faailities can tailor care plans to individud needs, improving patient satisfaction and outcomes. Satisfied patients are more likely to recommend the lacility, positively influencing census numbers
- Compliance and Risk Management: Data analytics helps identify and mitigate is is related to reguld only compliance, billing errors, and fauld. By analyzing data from electroric health read as [Res] and claims, footifies can detect anomalies and ensure adherence to regulations, avaiding penalties and maintaining a positive reputation.
- Makel Analysis and Competitive Positioning Analysis market data allows facilities to understand local demographics, competitor offerings, and market demand. This insight supports strategic decisions on service offerings, pilcing and marketing efforts to attract and retain residents.

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### Meaningful Metrics: Understand the Impact 94 ALOS by Care Setting + Pt Risk Info Occupancy, Inquiry + Move In/Out Stats Staffing Needs WHY: Highlight impact of services on successful WHY: Monitor impact of services on occupancy growth + \*closing the HOW: Billing Office + Transitional Care Tea HOW: Admissions + Marketing HOW: Executive Direct + Team HEALTHPRO PHERITAGE

### Leveraging Your EMR Assessment Plan -Point of Care Tasks Unscheduled Services Service Plan of Care Intervention Planning/ At risk Document scheduled tasks Timeline for prior level Provide interventions as appropriate Track compliance Track compliance Possible change in level of care & payment Will show insight into unscheduled services/tasks At any time of a change in function Communication HEALTHPRO THERITAGE

### Final Thoughts



- Census management is an ever-evolving process which requires continual monitoring and adjustment based on current and future trends
- Utilize all available resources to manage your census in a way that works for you





### Questions?

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