

#### 58A Key Health Care Trends Using Data

Chad D. Kunze, CPA - Principal

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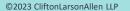
#### Presenter

#### Chad D. Kunze, CPA

Principal – Health Care and Life Sciences

Chad focuses his time on serving senior living health care organizations. He leads the health care and life science practice in Greater Chicagoland, Illinois and surrounding states. Chad also leads CLA's national Affordable Housing practice. Chad is a certified public accountant with more than 28 years of experience in public accounting, auditing, and business consulting devoted entirely to the health care and life science industry. He also provides regular consultation regarding financial client service, strategic planning and Medicaid/Medicare reimbursement consulting for various senior living health care providers around the country.

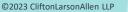




### **Objectives Today**

- Review key health care trends and how they continue to cause operational and financial challenges in senior living
- Impact of current trends within the skilled nursing and longterm care industry
- Demonstrate how industry-focused-data-driven insights can provide skilled nursing/long-term care organizations clarity and actionable information for strategic, operational, and financial improvement





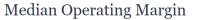


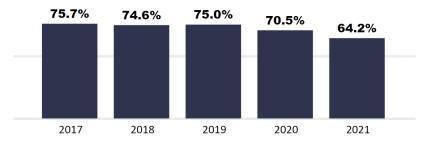
#### Key Health Care Trends

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#### **Skilled Nursing Facility Trends**

Median Occupancy Rate



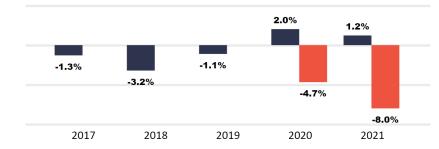


#### Median Payor Mix

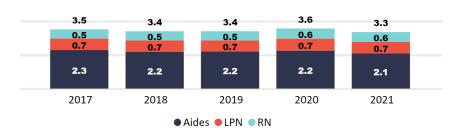


Medicaid
Other
Medicare

• Operating Margin (median) • Excluding PHE Funding



Median Paid Nursing Hours Per Day

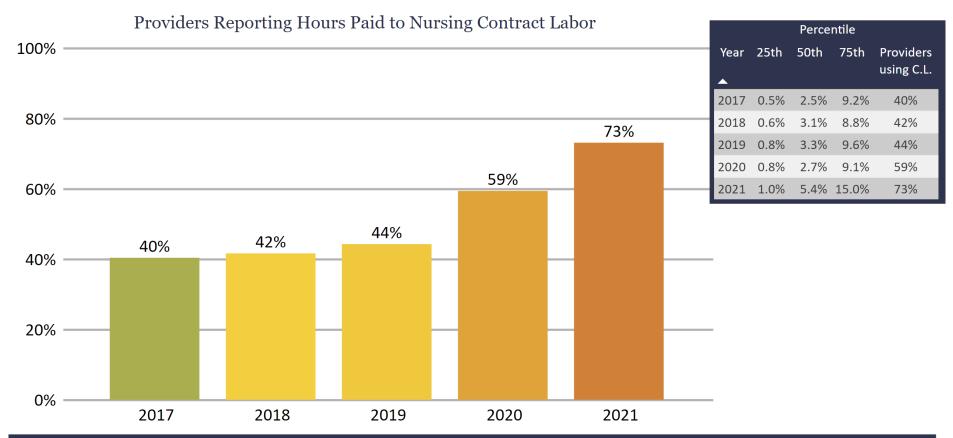


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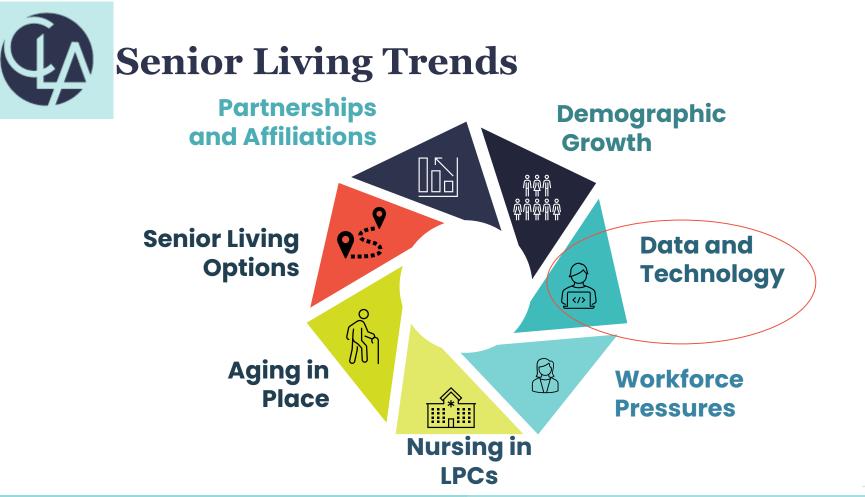
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#### **Nursing Contract Labor Utilization**





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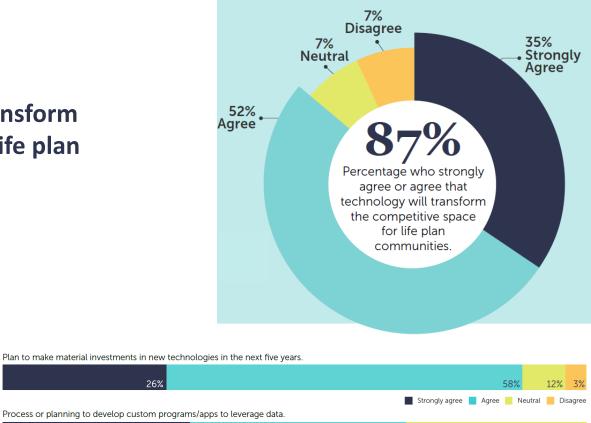


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#### Technology is likely going to transform the competitive landscape for life plan communities.

Technology has long held the potential to transform landscapes. Due to the tailored nature of technologies, our questions focused on the perception of how technology might impact communities' and providers' desire to embrace technology. Based on the survey responses, it appears that the appetite to invest in technologies matches the reflection that 87% believe technology will transform the competitive space for life plan communities.



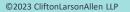




#### **CLA recommended action steps:**

- Elevate the use of technology as a strategic imperative and fund accordingly.
- Create a chief technology role within your organization to drive the transformation of processes and customer experiences.
- Map all processes and determine which can be improved through the use of technology.
- Maintain a clear vision of the customer experience and let that determine the value of technologies.
- Evaluate the risks and rewards of being an early adopter of new technologies.







# What is happening today and looking to the future of Digital

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# What is Digital?

CLA Digital uses business intelligence, data engineering, and data science to meet our clients where they are and help them make data driven decisions.

#### **Business Intelligence**

BI combines data visualization, data tools and infrastructure, and best practices to help organizations make more data-driven decisions. Anything from **general data analytics consulting, to developing user friendly dashboards**, to re-engineering how an organization measures itself to use KPI's better

#### **Data Engineering**

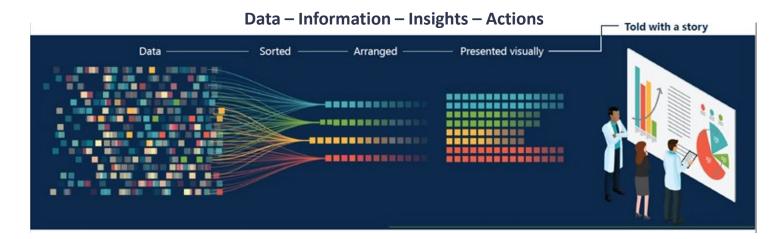
The process of using technology and automation to make raw data usable. Think Integration, Automation, Data Cleansing, Custom Development, usually as a means to a larger endpoint.

#### **Data Science**

Data science helps us use data to **predict** what is going to happen. Predictive Analytics, Machine Learning, artificial intelligence all fall under this purview. Here we answer the question "What is your data telling you?" AND "What to do about it?"



#### Health Care Business Insights Powered by Data to Take Crucial Actions





#### Automation:

#### Facilitates Accuracy and Efficiency

 Example: Automate manual functions to save staff time, save cost, and enhance accuracy.

#### **Analytics:**

Insights to Faster and Informed Decisions:

 Example: Visual performance dashboards that track operational functions and link with financial information





# Digital Modernization – Health Care:

- Health Care is continuing to focus on ways to <u>Modernize:</u>
  - <u>Create efficiencies</u> in operations and accounting processes
  - <u>Simplify</u> systems, operations and financial reporting
  - o <u>Streamline</u> processes so organization can become more efficient
  - <u>Automation</u> and <u>abundant data</u> are radically changing the world, and progressive health care organizations are responding to that challenge
- There are vast <u>opportunities</u> for health care organizations to *make better use of their data*.
  - Automating manual reporting
  - Technology-enabled workflows
  - Integrating disparate systems
- Health care organizations should consider:
  - Replacing obsolete technologies
  - Automating low-value-add activities



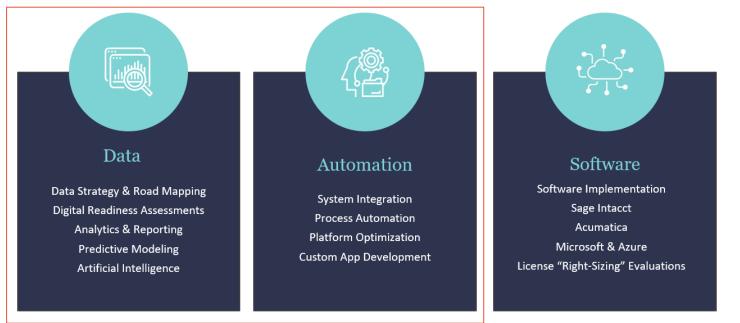






# CLA Digital – Empowering Health Care Business Success

As one of the largest health care practices in the country, CLA has the deep industry knowledge to help health care and life science through the challenges of today and seek opportunities for the future. Reach out if you would like help addressing your digital strategies.





# Digital -Bridge to Better Tomorrow

Strategy

Operations

Tactical

Infrastructure

Software







### Health Care's Modern Challenges

- Staffing
- M&A Transition Integration Complexity
- Rising Costs / Decreasing Revenue
- Disparate Systems with Siloed Data
- Complicated Rev Cycle
- Significant Lag in Trusted Reporting
- Data Overload
- Digital Vendor Confusion
- Covid Change Management
- Ever Changing Technology

#### "No Margin No Mission"





#### When does it Make Sense to Explore Digital Solutions?

#### Symptoms:

- Building key reports via manual data extraction
  - □ Then dumping into Excel or some "other Database"
- Disparate systems with disjointed data caused by growth
- □ Have outgrown current systems (accounting, budgeting, scheduling, rev cycle, etc)
- □ Need two Software Systems to talk to each other
- No Data Strategy in place today
- □ Want for more "real time" and actionable information Dashboard
- □ In your everyday work "there has to be a better way"





# Why & How: Disparate Systems

- Aggregate Data from disparate systems to help make IMPORTANT business decisions
- Convert a mountain of data into meaningful nuggets of information
- Dashboards (Power BI = How did we do today?)
- Build Confidence / Trust (verify data)
- Make quicker business and more informed decisions
- Data Continuity (comparing yesterday to today & predicting tomorrow)
- Comparison (How are we doing compared to others?)
- Efficiency
- <u>A "rifle" approach compared to a "shotgun" approach</u>













#### Industry Focused Data Driven Insights

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### Reasons for CLA Clarity

Do you have a concise, consistent, unbiased approach to assessing your SNF(s) Are you spending more time gathering and organizing data vs. identifying opportunities?

# What are your opportunities?

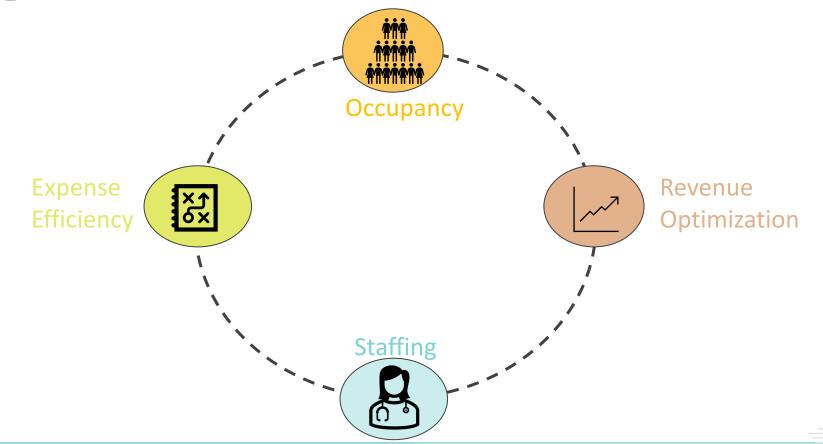
Which opportunities are most actionable?

What decisions/actions will capture the opportunity? What help is needed to execute on the opportunity?



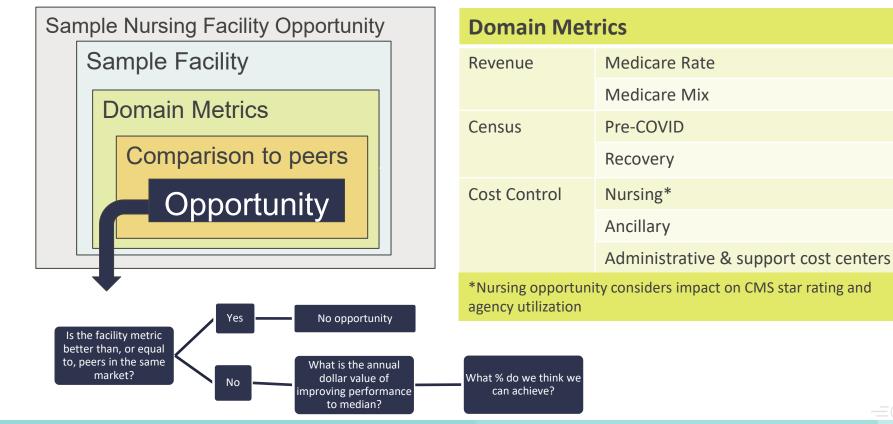


#### Response: Focus On The Fundamentals





# CLA Clarity – Definition of "Opportunity"

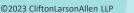




### Opportunity to Receive a Demo of CLArity

- 20 minute demo of CLArity focused on <u>YOUR</u> SNF
- March  $7^{th}$  and  $8^{th}$  from 7am 4:30pm
- A "snippet" from CLArity will be provided to those that sign up in advance (provided later if not in advance)
- Sign ups are available on-site at the conference
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#### About the Data

# Medicare Cost Reports

# Nursing Home Compare

# Hospital Discharge Data

#### **PBJ Data**

### **PDPM Data**

# And continues to evolve





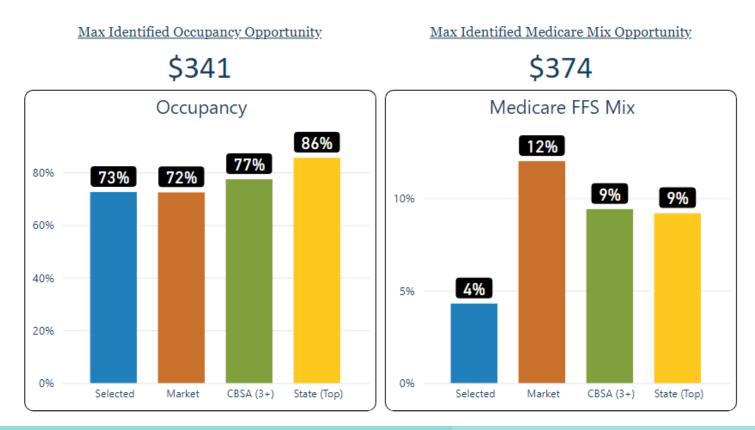
#### How Peer Groups are Determined



Customization is available to focus peers to compare to



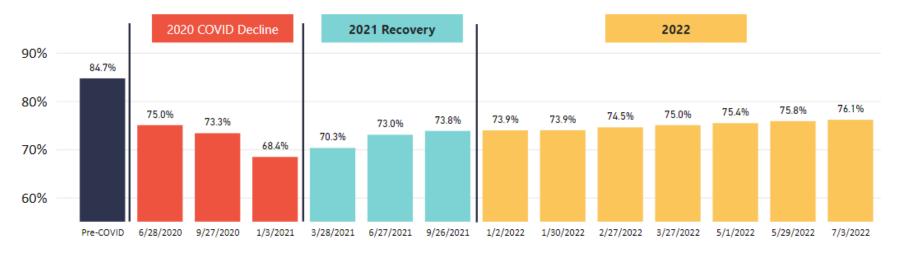
### **Revenue Opportunities**



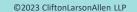


**Occupancy** Trend

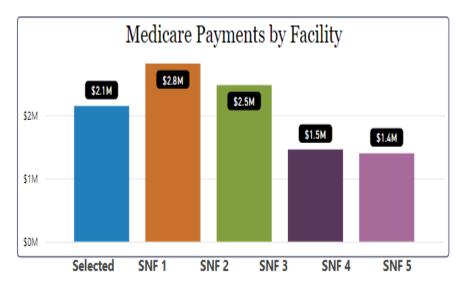
#### Median Occupancy

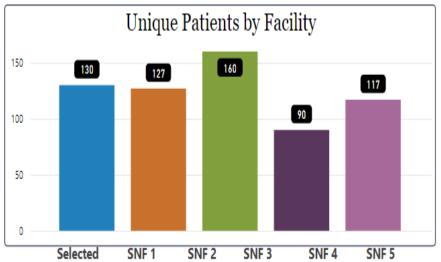






### Medicare Part A Referral Data by Facility



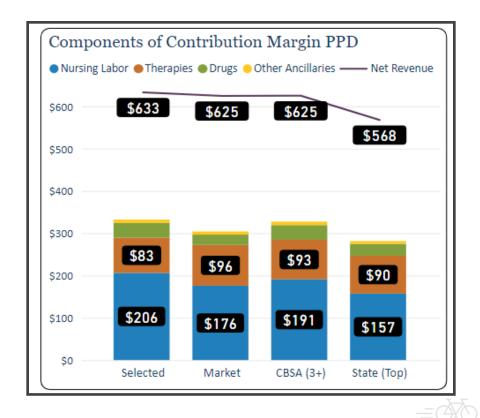






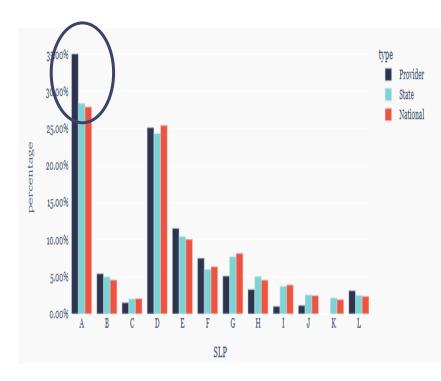
### **Revenue Optimization**

- Do the components make sense for the acuity of residents served?
- Can nursing labor be controlled with decreased agency usage?
- How will PDPM parity adjustment impact contribution margin?



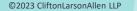


#### **Revenue Optimization**

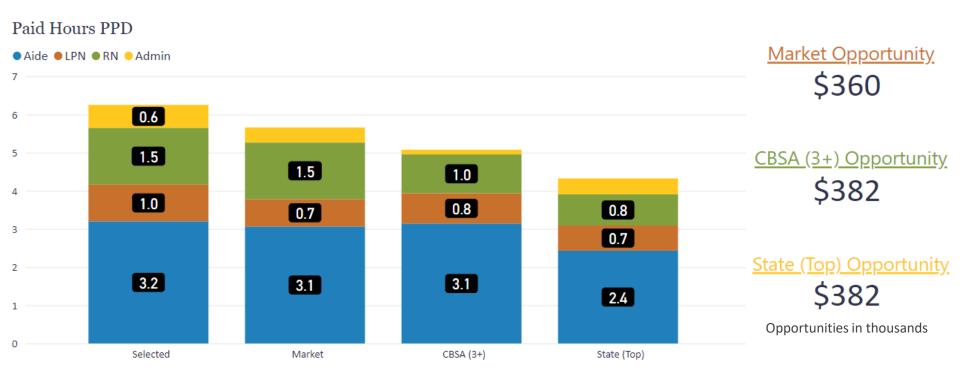


- Focus on capturing all of the quality care services provided to residents
- Ability to review detail of rate calculations for both Medicare and Medicaid





#### Workforce





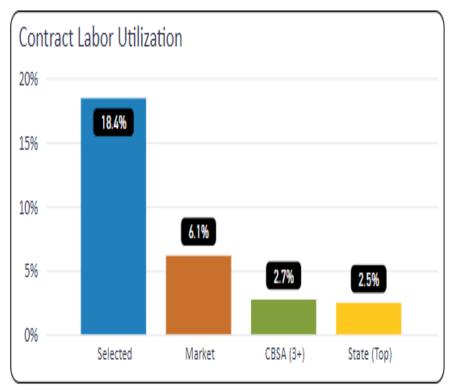
### Hours per Resident Days Trend







### Average Hourly Rates









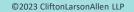
### **Financial Impact**

	Total									
RN	Min HRD	2.747	3.03	3.248	3.445	3.653	3.869	4.105	4.429	4.954
Į (	0.261	\$1,793,993	\$1,557,669	\$1,375,625	\$1,211,126	\$1,037,429	\$857,060	\$659,989	\$389,430	(\$48,964)
(	0.352	\$1,759,337	\$1,523,019	\$1,340,981	\$1,176,466	\$1,002,778	\$822,407	\$625,333	\$354,771	(\$83,619)
	0.426	\$1,731,156	\$1,494,842	\$1,312,793	\$1,148,287	\$974,594	\$794,221	\$597,148	\$326,605	(\$111,803)
	0.505	\$1,701,070	\$1,464,750	\$1,282,712	\$1,118,205	\$944,519	\$764,151	\$567,072	\$296,516	(\$141,893)
	0.591	\$1,668,328	\$1,432,004	\$1,249,960	\$1,085,461	\$911,773	\$731,398	\$534,323	\$263,762	(\$174,643)
	0.692	\$1,629,864	\$1,393,546	\$1,211,506	\$1,046,997	\$873,309	\$692,929	\$495,868	\$225,308	(\$213,109)
	0.819	\$1,581,504	\$1,345,177	\$1,163,133	\$998,628	\$824,941	\$644,574	\$447,502	\$176,936	(\$261,461)
	0.992	\$1,515,622	\$1,279,304	\$1,097,257	\$932,758	\$759,059	\$578,686	\$381,613	\$111,058	(\$327,338)
	1.298	\$1,399,089	\$1,162,777	\$980,733	\$816,224	\$642,542	\$462,160	\$265,091	(\$5,469)	(\$443,868)
		2.350	2.613	2.810	2.985	3.174	3.382	3.623	3.896	4.328
		Constant and								

Detential cavings (costs) vs surrent HDD

W/E

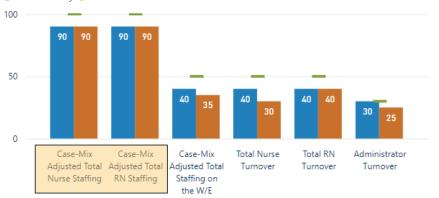




### **CMS Star Ratings**

Current Staffing Measure Scores

Selected Facility Market — Max

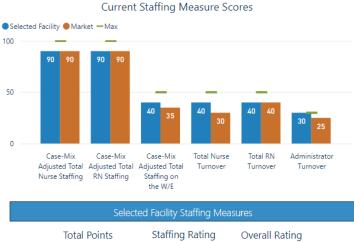


Selecte	Selected Facility Staffing Measures						
Total Points	Staffing Rating	Overall Rating					
330	5	2					
Point Floor: 320 (-10pts.)	Point Ceiling: 380 (+50pts.)						



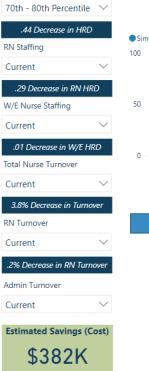


# **Staffing Rating**



10101101113	Stannig Rating	Overall Natility
330	5	2
Point Floor: 320 (-10pts.)	Point Ceiling: 380 (+50pts.)	

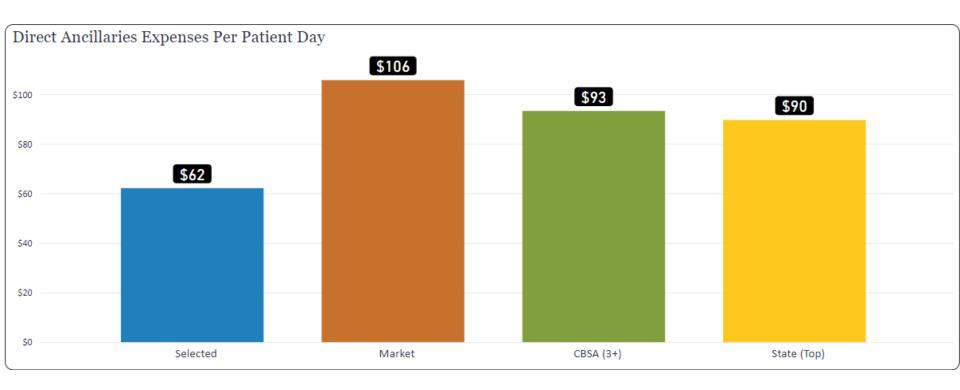
#### Total Nurse Staffing



#### Simulated Staffing Measure Scores Simulated Selected Facility Market — Max Case-Mix Case-Mix Case-Mix Total Nurse Total RN Administrator Adjusted Total Adjusted Total Adjusted Total Turnover Turnover Turnover Nurse Staffing RN Staffing Staffing on the W/E Simulated Staffing Measures Total Points Overall Rating Staffing Rating 320 5 2 Point Floor: Point Ceiling: 320 (-0pts.) 380 (+60pts.)



# Therapy Expense





# Dietary Expense





### Opportunity to Receive a Demo of CLArity

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- March  $7^{th}$  and  $8^{th}$  from 7am 4:30pm
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