Transforming Orders Processing

About Cornerstone

Founded in 1913, Cornerstone Visiting Nurses Association (Cornerstone) has care programs that transition patients from birth to death – perinatal care, palliative care, a private duty program, hospice, and home health, among others. Its clinical employees are out on the road in New Hampshire and Maine, touching Cornerstone's patients as they move from program to program. All together, Cornerstone serves over 5,000 patients with about 160 employees in the two states.

Overview

Taking action to be prepared for PDGM in 2020, Cornerstone realized they needed better insight into where bottlenecks and inefficient processes were wasting expensive staff time and duplicating tasks that frustrated providers - and choking off cash flows. Orders were paper-based and tracking them was difficult and labor-intensive. No one could readily audit what actions had been taken against unsigned orders, and repeated agency requests to referral sources created an unfavorable image with their network. These factors were not just relevant for PDGM, they were preventing Cornerstone from scaling their business and meeting the growing demand for post-acute services in their region. Cornerstone found their solution in Forcura, which provided transparency into not only

what orders were outstanding and why, but which physicians held the highest volume for targeted outreach. Forcura also collaborated with Cornerstone to implement streamlined workflows and new processes for getting orders signed and returned. The collaboration has been so successful that this post-acute provider is fully PDGM-ready six months before the regulation goes live. Now, Cornerstone can focus on expanding their business and improving patient outcomes because their staff is equipped with the appropriate people, processes, and technology.

The Issues

Prior to the Forcura orders optimization project, Barbara Boulton RN, MSN, Program Support Director at Cornerstone VNA, recalled there were more than 1,000 outstanding orders totaling more than $500,000 at any given time - a considerable accounts receivable for any provider to bear. The issue was vastly compounded because Cornerstone still relied on paper orders, leaving staff uncertain which order had even made it as far as the EHR. Boulton states, "we were processing roughly 600 orders per week, and had no idea how many of those actually made it out of the building and how many came back into the building without doing a lot of work. I had to run three or four reports and compare those reports and merge spreadsheets."

"Our orders just wouldn't be coming back the way they needed to for PDGM," adds Boulton. "With 30-day billing periods we'd be in a hot mess."

"We were looking at the financials and the workflows and we had billing department staff saying, 'I cannot send out half of our homecare Medicare final claims because there are no orders back.'"

- BARBARA BOULTON RN, MSN, Program Support Director at Cornerstone VNA.

The reality of moving to two 30-day billing cycles under PDGM was troubling, too. If inefficient processes made it nearly impossible to track orders now, how would they manage when billing cycles double? Cornerstone projected having to hire more full-time employees, but also feared having requests for payment (RAPs) pulled back, going out of compliance and eventually facing fines.

Cornerstone's leaders knew these issues had to be addressed and corrected, because short-term revenue shortfalls would also stymie their long-term growth ambitions. They already were refusing new patients because their staff was overwhelmed with the workload for their current census.

The Solution

In June 2019, Cornerstone made two important changes within the organization to prepare for PDGM: it went paperless and, at the same time, hired Forcura to optimize their use of the Forcura platform, with special attention paid to orders processing. The day before the project implementation, Cornerstone measured the number of outstanding orders older than fifteen days as a benchmark. The total was 661, representing more than $500,000 in held claims. Andrew Ostrander, Forcura's Relationship Manager overseeing the Cornerstone account, set the project goals.

Project Goals

Reduce and maintain the number of orders outstanding greater than 15 days

- Reduce current backlog by 25% within 30 days of the June 26 project go-live date
- Develop and implement best practices for orders tracking and follow up
- Optimize process for signing hospice orders

Optimize the Forcura platform for ongoing orders management and PDGM success.

Moving from paper to digital was not just a technology shift, it required that Cornerstone staff be trained on a workflow that maximized the volume of orders returned within 30 days. Here, Ostrander collaborated with the Cornerstone team to create an entirely new process that ensured every single order was accounted for, with labelling that categorized specific processing stages.

*"**I was confident** that Forcura's partnership with Cornerstone would get them results quickly, and set them up for **ongoing success in their market.**"*

- ANDREW OSTRANDER, *Forcura Relationship Manager*

Orders Aged 30 Days and Over...

Decreased from

422 to 1

in less than 3 weeks

88%

were **reduced**
within one week

Recovered

$500,000

in **outstanding claims**

The Results

The effect was almost immediate:

- By the end of Week 1, Cornerstone's outstanding orders aged 30 days and older dropped from 422 to 52, a whopping 87.6% reduction.

- By Week 4, total orders inventory 15 days and older dropped by 92%, with just one order older than 30 days. Cash flows have improved dramatically.

- Cornerstone's back office can now sort outstanding orders by how many days old they are – zero to seven days, eight to 15 days, and so on -- and by care provider.

- With targeted outreach, Cornerstone eliminates duplicate tasks, allowing them to cut one FTE and bolstering their reputation as an efficient provider with their referral network.

- Cornerstone is PDGM-ready and secure that their processes are auditable, compliant with regulations and the best for their patients.

Best of all, Cornerstone is free to scale and grow the business, something that was nearly impossible to do before moving to Forcura. Kerrie Landry, Cornerstone VNA Chief Financial Officer, states "with increased cash flow we're in a good place to handle that growth at a decent pace. We can start to do things like adding sign-on bonuses and referral bonuses to grow the business, and we're prepared for changes that come down from Medicare and Medicaid."

"Ultimately, we are very grateful that we've had the opportunity with Forcura because again, going into 2020 and PDGM, I'm not sure we would be as well off and as prepared as we are if it had not been for the platform."

- KERRIE LANDRY, *Chief Financial Officer, Cornerstone VNA*