

HOME CARE ANSWERS: CLINICAL VALIDATION TRIAL

A Retrospective Audit of 50 Charts vs. Automated Scrubbers and Offshore Review Teams

Executive Summary: A mid-sized home health agency operating in Texas recently initiated a retrospective validation trial with Home Care Answers. Prior to this trial, 100% of the agency's patient charts were processed using a combination of a prominent automated AI OASIS scrubber and an offshore coding team based in the Philippines. The goal of the trial was to determine if automated algorithms and low-cost offshore labor were adequately capturing clinical severity and protecting the agency's revenue line under current CMS oversight.

TEXAS AGENCY VALIDATION TRIAL: CASE STUDY

Why Accuracy Scales Profitability Over Cheap AI & Offshore Reviews

A retrospective audit of 50 patient charts previously completed by a Philippines offshore agency and an AI OASIS scrubber.

TOTAL REVENUE UNCOVERED

\$18,535.73

50 Charts Combined

AVERAGE REVENUE LIFT / CASE

\$370.71

+8.41% Reimbursement Lift

HHVBP ADJUSTMENT IMPACT

+5.618%

Offsets -2.8% VBP Penalty

CRITICAL CLINICAL INSIGHTS

• **High-Acuity Blindness:** Agencies routinely absorb the high operational cost of treating high-acuity patients but fail to properly document clinical severity on the initial OASIS, leaving rightful reimbursement behind.

• **AI Limitations:** Automated scrubbers missed an average of 2 core clinical errors per chart. Human experts identified systematic omissions in functional items like Bathing and Lower Body Dressing.

• **Baseline Integrity:** HCA recommended 105 structural adjustments across the cohort. Correcting items like Toileting Hygiene (GG0130 changed 53% of the time) establishes the necessary baseline for tracking true clinical success.

FORWARD FINANCIAL PROJECTION (929 CASES/MO)

• **Monthly Lift:** Scaling this accurate framework across a mid-sized agency's typical volume of 929 monthly OASIS files uncovers \$344,574.95 in legitimate capital.

• **Expense vs. Investment:** Shifting management focus from the review line-item expense (\$49k/mo) to the overall revenue recovery line (\$344k/mo) turns an overhead cost into a strategic profit center.

• **Annualized Profit Impact:** Operating with this level of accuracy injected \$3.543 Million in direct, bottom-line net profit on an annual administrative spend of \$591,162.

Home Care Answers | 100% US-Based | 100% Human Intelligence | 1 Denial in 23+ Years of Operation

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Key Insights & Methodology

1. The Myth of the 'Correct' Algorithm: Automated AI models operate strictly on rigid mathematical algorithms. While they can catch basic typographic discrepancies, they cannot apply clinical judgment. The Home Care Answers trial revealed that the AI model consistently missed an average of two critical clinical modifications per chart. By evaluating the holistic patient profile—including diagnostic coding, age, co-morbidities, and narrative nursing notes—our human experts aligned documentation with strict Medicare guidelines that algorithms overlooked.

2. High-Acuity Blindness: The audit demonstrated that the agency was frequently admitting higher-acuity, high-cost patients. However, the clinicians were not accurately documenting the patients' true structural limitations at the time of the Start of Care (SOC) or Resumption of Care (ROC). Consequently, the agency was absorbing the high operational

cost of field care for complex cases while accepting baseline, low-acuity reimbursement. *Reimbursement naturally follows accuracy.*

3. Structural Mistakes in HHVBP Questions: Across the cohort, HCA recommended 105 specific adjustments directly impacting Home Health Value-Based Purchasing metrics. Correcting functional parameters like Toileting Hygiene (GG0130 changed 53% of the time) establishes the precise clinical baseline needed. Without accurate documentation at the start, agencies fail to capture and claim credit for subsequent patient improvement, erasing future VBP bonus potential.

The Forward ROI at Scale

Many home care executives focus strictly on minimizing review line-item expenses without measuring the massive revenue leakage occurring downstream. Based on 650 active patients, a 30% recertification rate, and a 10% ROC frequency, an agency processes roughly 929 OASIS files per month. Partnering with Home Care Answers at this volume yields a monthly bill of \$49,263.50, but recovers \$344,574.95 in missed reimbursement—leaving **\$295,311.45 in monthly net new profit**. Over a 12-month period, spending \$591,162 on elite human intelligence delivers **\$3.543 Million in direct, bottom-line revenue** back to the agency.