



AXXESS GROWTH INNOVATION & LEADERSHIP EXPERIENCE

2026

HOME CARE EDGE GUIDEBOOK



EXECUTIVE SUMMARY

Home care is facing accelerating demand, regulatory intensity, workforce instability, reimbursement pressure, and rising expectations for measurable outcomes. Agencies are being asked to do more than deliver tasks: they must demonstrate impact, consistency, and value across compliance, care delivery, technology adoption, and growth.

The Home Care EDGE 2026 framework was designed for this moment. EDGE integrates regulatory excellence, age-friendly, person-centered care, responsible use of innovation and AI, and disciplined growth execution into a unified operating model. Rather than treating compliance, quality, and growth as competing priorities, EDGE aligns them as mutually reinforcing drivers of sustainable performance and long-term resilience in a rapidly evolving care-at-home landscape.





HOMECARE EDGE EXECUTIVE INSIGHTS

ESSENTIAL 1: REGULATORY AND COMPLIANCE



Establish a Compliance Control Tower that operates with discipline, oversight, ownership and signals that drives confidence and not last minute surprises

Key Elements if a Compliance Control Tower

- ☐ A single compliance owner (COO or Compliance Officer)
- ☐ Create a Compliance Risk Dashboard
- ☐ Automated alerts instead of manual chasing

Core Signals to Monitor

- ☐ EVV exception rate (<10–15%)
- ☐ Authorized vs. delivered hours variance
- ☐ Documentation timeliness
- ☐ Credential expirations (90/60/30 days)
- ☐ Overtime trending (>12%)
- ☐ Missed or late supervisory visits

Executive Outcome

- ☐ Predictable compliance posture
- ☐ Fewer operational disruptions
- ☐ Stronger payer and regulator confidence

REFLECTION WORKSHEET

Where do we currently have real confidence in our compliance posture — and where are we relying on hindsight or luck?

Most Confident : _____

Least Confident : _____

If a regulator asked us today how we know we're compliant, what signals would we show them first?

Signals : _____

What recurring compliance issue would leadership most like to eliminate permanently?

Signals : _____



[Download Innovation Insight: Compliance Control Tower](#)



HOMECARE EDGE EXECUTIVE INSIGHTS

ESSENTIAL 2: PATIENT-CENTERED CARE



Embed the 4Ms (What Matters, Medication, Mentation, Mobility) into daily workflows, not just clinical documentation.

Build 4M into Daily Workflows

- ☐ Intake & assessment
- ☐ Caregiver instructions
- ☐ Scheduling and supervision
- ☐ Quality and outcomes review

Mindsets Shifts in Your Organization

- ☐ Document What Matters once—and make it visible everywhere
- ☐ Prompt caregivers with simple, repeatable 4Ms cues
- ☐ Review outcomes against what matters to the client, not just tasks completed

“Organizations that align daily care delivery with the 4Ms see improved satisfaction, retention, and referral loyalty.”

Executive Outcome

- ☐ Clear differentiation with referral sources in a crowded market
- ☐ More engaged caregivers
- ☐ Higher client and family satisfaction

REFLECTION WORKSHEET

Across the 4Ms, which M is most vulnerable to being missed by your current operating model—and why?

Selected M : _____

Reason : _____

If we could only optimize for one M over the next year, which would meaningfully change outcomes? What is the first step we need to take in implementing this one M?

Selected M : _____

One Key Action : _____

How can we use the 4M to create a differentiation?

Differentiation : _____



[Download Innovation Insight: Embedding 4Ms into Everyday Operations](#)



HOMECARE EDGE EXECUTIVE INSIGHTS

ESSENTIAL 3: INNOVATION AND AI



Apply predictive insight to one problem where earlier action changes outcomes.

High Impact Areas for Predictive Analytics

- ☐ Hospitalization risk
- ☐ Missed visit risk
- ☐ Client or caregiver churn risk

Implementing Predictive Analytics

- ☐ Decide in advance what actions a “high-risk” signal triggers
- ☐ Use simple risk scores leaders can interpret quickly
- ☐ Define how your leaders will act upon different outputs from the models
- ☐ Operationalize the response across all touchpoints in your agency
- ☐ Partner with clinical and operation leaders to set guardrails

Executive Outcome

- ☐ Clear ROI from technology investments
- ☐ Faster, more confident decisions when clinicians are working in the field
- ☐ Better alignment between data and action

REFLECTION WORKSHEET

Where do we currently over-rely on personal expertise/experience when earlier signals could help us intervene sooner?

Answer: _____

How will we know that insight is improving decisions — not just producing more data?

Measures : _____

This is Actually Valuable When : _____

How will we respond when an insight-driven decision turns out to be wrong?

Answer : _____



[Download Innovation Insight: Turning AI Insight into Confident Executive Action](#)



[Download Innovation Insight: Home Care AI Prompting](#)



HOMECARE EDGE EXECUTIVE INSIGHTS

ESSENTIAL 4: GROWTH



Adopt a Growth Execution System anchored in lead measures—not just revenue.

Where To Focus

- ☐ Identify 1–2 Wildly Important Goals (WIGs)
- ☐ Reach – meaningful sales activity
- ☐ Frequency – relationship consistency
- ☐ Messaging – clarity of value

Establishing an Operating Rythm

- ☐ Weekly scoreboard with lead and lag measures
- ☐ Weekly accountability cadence
- ☐ Leaders coach performance—not just manage tasks

“Organizations that track effort before outcomes see more predictable growth and faster course correction.”

Executive Outcome

- ☐ Predictable referral flow
- ☐ Faster start of care
- ☐ Stronger cross-team alignment

REFLECTION WORKSHEET

What do referral sources consistently experience that truly differentiates us — not what we claim differentiates us?

Answer: _____

When growth underperforms, what tools do leadership use to diagnose execution gaps? What processes are in place to reset targets?

Tools : _____

Processes : _____

If demand doubled tomorrow, which internal constraint would break first?

Answer : _____



[Download Innovation Insight: Make Growth a Measured, Shared Responsibility](#)



OUR APPROACH

REGULATORY
AND
COMPLIANCE

PATIENT
CENTERED
CARE

INNOVATION
AND
TECHNOLOGY

GROWING
AND
PROFITABILITY

ESSENTIAL 1

REGULATORY & COMPLIANCE EXCELLENCE

WHY THIS MATTERS

Home care agencies face rising demand, tighter reimbursement, staffing shortages, and increased regulatory scrutiny. Success now depends on strong compliance, efficient staffing, reimbursement discipline, and smart use of technology—shifting from task completion to consistent and measurable outcomes.

HOME CARE MARKET SNAPSHOT

OVERVIEW

483K+

Home Care
Businesses in US

+6.4%

Projected Growth
Rate (2025-2035)

MARKET DYNAMICS

Increasing Private Equity
Investments

Growing Payer Options

DEMAND DRIVERS

CLIENTS/POPULATION

- Preference for home-based care
- Rising chronic conditions
- Aging population

PAYERS

- Expansion of Medicaid Home Based Community Service (HBCS)
- High institutional costs

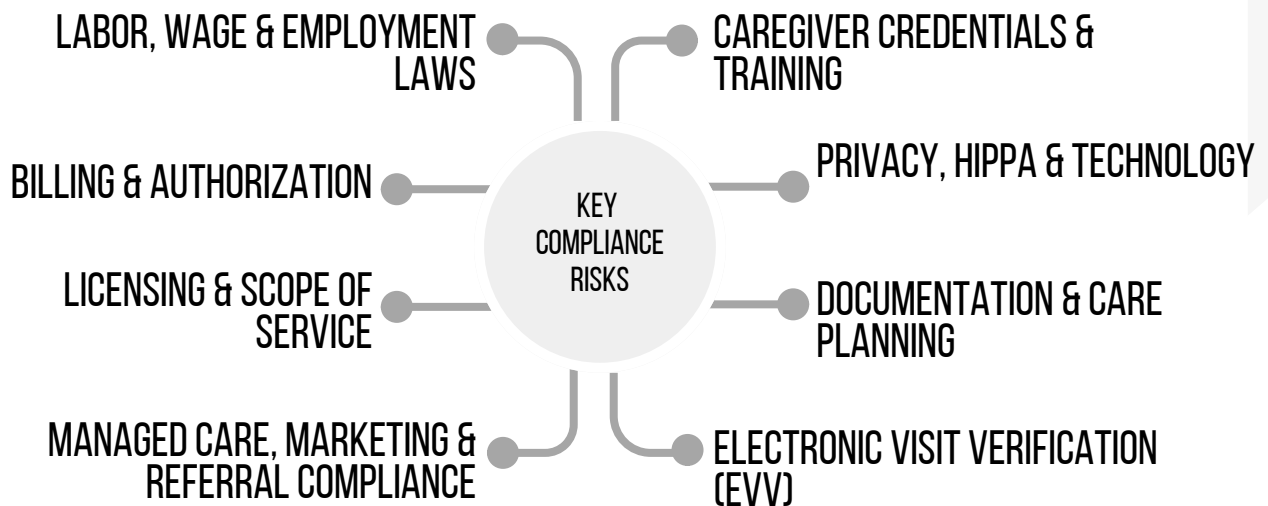
REFERRAL SOURCES

- Hospitals reducing length of stay and rehospitalizations
- Staffing shortages

ESSENTIAL 1

REGULATORY & COMPLIANCE EXCELLENCE

COMPLIANCE LANDSCAPE



KEY POINTS TO CONSIDER

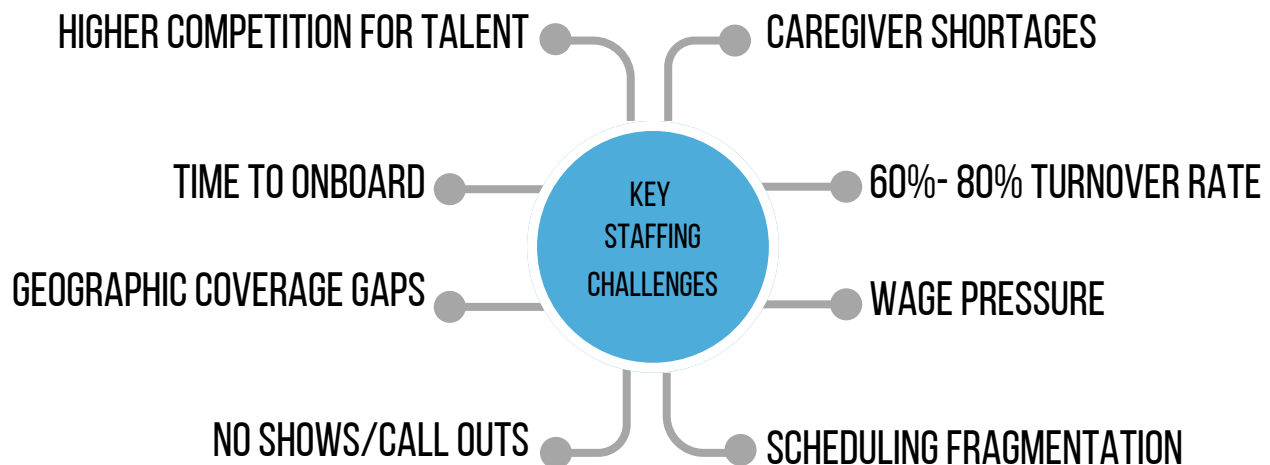
Have a documented annual compliance program that is reviewed quarterly by key stakeholders.

- New Location and Change of Ownership (CHOW)
 - Strong Clarity on Federal and State Billing Requirements
- Licenses
 - 30,60,90 Day Alerts Near Expiration
 - Clarify Timing and Survey Requirements for Renewals
- EVV stays BELOW 10%-15%
- Supervisory Visits are Completed Timely
- Missed Visits are Accurately Documented and Reported
- Overtime is Maintained below 12%
- Training Schedules are created and not altered

ESSENTIAL 1

REGULATORY & COMPLIANCE EXCELLENCE

WORKFORCE AND STAFFING



KEY POINTS TO CONSIDER

Addressing staffing challenges require a balance between retaining and recruiting top talent!

RETAINING TALENT

- Invest in your people!
 - Continued training and education
- Wage tier by seniority
- Recognition programs
- Career Ladders
- Invest in Technology that elevates key pain points

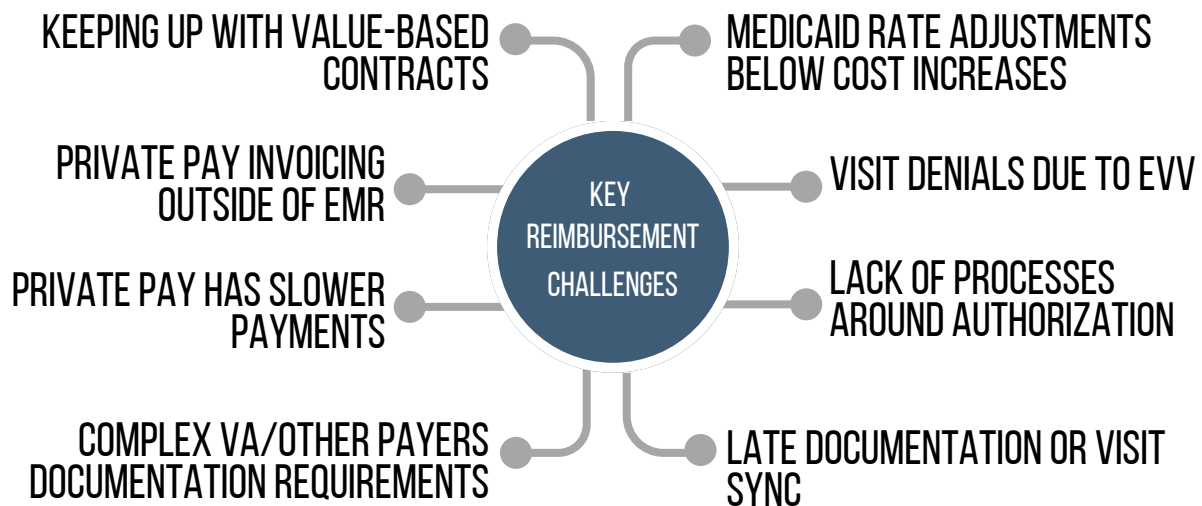
RECRUITMENT

- Build a Brand
 - Mission, Culture, Benefits
- Build Social Media Presence To Promote Your Brand
- Referral Programs
- Onboarding Process

ESSENTIAL 1

REGULATORY & COMPLIANCE EXCELLENCE

REIMBURSEMENT CHALLENGES



KEY POINTS TO CONSIDER

PAYMENT AND REIMBURSEMENT

- Payer Diversification and Rate Negotiation
- Expansion to Private Pay (when applicable)
- Service Diversification

STRONG PROCESSES AROUND

- EVV, Authorization, Verification, Scheduling, Documentation

FINANCIAL REPORTING DASHBOARDS

- Strategic views of financial performance broken down by Location, Service and Payer

“Partner with your EMR to ensure that payer setup is complete and optimized!”

ESSENTIAL 2

DELIVERING PATIENT-CENTERED CARE

WHY THIS MATTERS

Home care is uniquely positioned to improve outcomes where life happens most—at home. As care shifts from tasks to impact, Age-Friendly Care and the 4Ms framework enable consistent, person-centered care that improves outcomes, reduces cost, strengthens staff engagement, and differentiates agencies in a rapidly evolving care-at-home landscape.

HOME CARE BRIDGES THE GAP

PROVIDING CARE

Growing concerns of fragmented care driven by misaligned goals between clients, providers and payers

HOME CARE



MEASURING OUTCOMES

Health systems are pressured to be accountable for patient outcomes that are out of their control

WHY HOME CARE?



Ongoing presence, not episode driven



Care plans are reinforced daily



Early Identification of Changes

ESSENTIAL 2

DELIVERING PATIENT-CENTERED CARE

AGE-FRIENDLY CARE

Age-Friendly Care addresses the unique needs, preferences, and goals of older adults through evidence-based care centered on the 4Ms framework. Age-Friendly Care is a fundamental shift in how care is delivered, focusing on consistency, person-centered practices, and improved outcomes for older adults.

TRADITIONAL CARE	AGE-FRIENDLY CARE
Illness-Focused	Person-Focused
Disease-Driven	What Matters Most-Driven
Inconsistent	Reliable and Repeatable

“Age-Friendly Care is about knowing your patients first before rushing into treatment”

BREAKING STEREOTYPES

How many of these statements have you heard?

- “Mom isn’t going to use the mobile tablet; she can barely work a remote!”
- “We market to under 45, old ladies don’t wear makeup and don’t care about fashion.”
- “We don’t offer annual packages to seniors; we don’t want to be known as that kind of gym.”
- “Don’t try to explain heart disease to my mom, she’s 70 and it will confuse her.”

ESSENTIAL 2

DELIVERING PATIENT-CENTERED CARE

AGE-FRIENDLY CARE

4M FRAMEWORK



Know and align care with specific health outcome goals and care preferences.

Ask - What Matters Most To You?



Monitor for depression, dementia and delirium.

Identify and manage factors contributing to depression and cognitive impairment.



Ensure that older adults can move safely every day to maintain function and do What Matters.



If medication is necessary, use age-friendly medication that does not interfere with What Matters to the older adult, Mobility, or Mentation across settings of care.

LEARN MORE

CHAP created a first-in-class certification program to bring Age-Friendly Health Systems and the 4Ms framework to the home setting.

[Click Here for Resources](#)



ESSENTIAL 2

DELIVERING PATIENT-CENTERED CARE

AGE-FRIENDLY CARE

APPROACHES TO UNDERSTANDING OUR PATIENT

TRADITIONAL	AGE-FRIENDLY CARE
Ms.Chase is 73 years old, 5'2", 195 pounds	Ms.Chase is 73 years old, hobbies are cooking and pottery.
DME in home: cane and walker	Used a walker and cane after hip was fixed, now in closet
Only sleeps 6 hours per night; Uses restroom once or twice at night	Sleep is unchanged, has always been about 6 hours
New to cardiac medication	What Matters: Strengthening heart to get back to pottery club

ADDITIONAL BENEFITS



STAFF IMPACT

- Purpose driven and satisfying work
- Increased engagement and retention



COST IMPACT

- Asking "What Matters" Ensures care is necessary and high quality
 - Lowers inpatient utilization 54% Decline
 - ICU Stays 80% Decline
 - Increasing hospice use 47% Increase

ESSENTIAL 3

INNOVATION AND ARTIFICIAL INTELLIGENCE

WHY THIS MATTERS

Innovation and AI support—not replace—human care by helping clinicians spot risk sooner, think clearly, and spend more time with patients. When used well, technology reduces overload and supports better decisions when time matters most. When understood well, we are able to truly identify the right technology for the right task.

TECHNOLOGY OPTIMIZED AREAS



Scheduling and
Geo-Clustering



EVV Exception
Dashboards



Voice-to-Text
Documentation



Resume Screening
and Interviews



Revenue Cycle
Automation



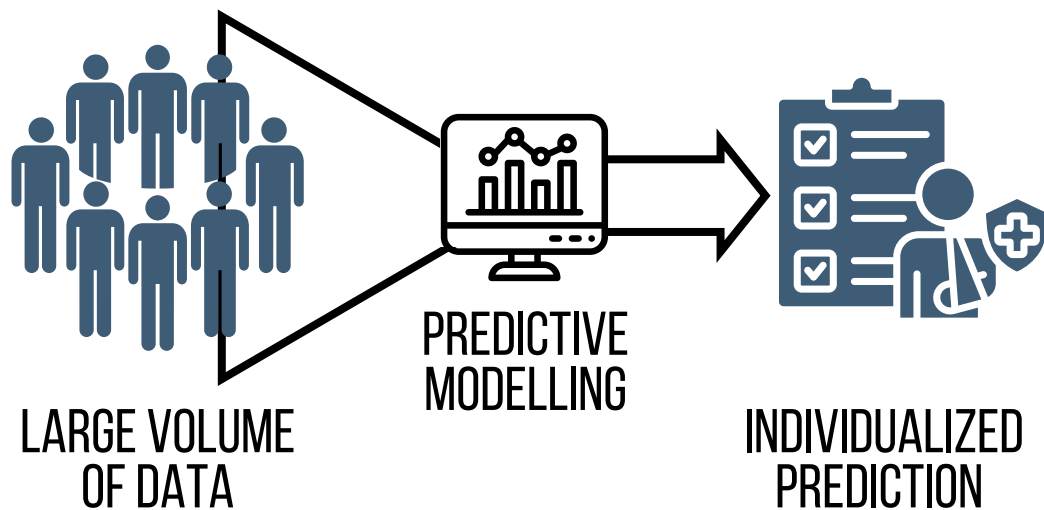
Business
Intelligence Reporting

ESSENTIAL 3

INNOVATION AND ARTIFICIAL INTELLIGENCE

PREDICTIVE ANALYTICS

Predictive analytics is a subsection of AI that uses historical and ongoing healthcare data to identify patterns, estimate risk, and forecast future patient outcomes so organizations can proactively target interventions and make data-driven decisions.



DESCRIPTIVE ANALYTICS	VS	PREDICTIVE ANALYTICS
Historical/Backward Looking		Future/Forward Looking
Explains what happened and how performance compares with others		Forecasts future outcomes to enable proactive action
An agency reviews last quarter's data and see's its hospitalization rate rose to 18% higher than peer agencies	EXAMPLE	An agency utilizes predictive analytics to identify the top 5% of patients most likely to be hospitalized next month and the major risk drivers. Allowing them to intervene and proactively act upon risk drivers

ESSENTIAL 3

INNOVATION AND ARTIFICIAL INTELLIGENCE

PREDICTIVE ANALYTICS

UNDERSTANDING PREDICTIVE ANALYTICS IMPACT

	Predicted to Hospitalize	Predicted Not to Hospitalize
Actually Hospitalized	True Positive	False Negative
Actually Not Hospitalized	False Positive	True Negative

When Making A Yes/No Prediction. We want to dig deeper and ask our vendors for other metrics such as Accuracy, Precision, Recall and ROC AUC.

We can be right in two ways:

- True Positive (We predicted it, and the patient has it)
- True Negative (We didn't predict it, and the patient doesn't have it).

We can be wrong in two ways:

- False Positive (We predicted it, and the patient doesn't have it)
- False Negative (We didn't predict it, and the patient does have it).

PAUSE AND THINK

For every use case, we need to think about our tradeoffs and risk of getting things wrong. Is it better to provide unnecessary care or miss providing care when needed?

ESSENTIAL 4

GROWTH AND PROFITABILITY

WHY THIS MATTERS

Demand alone no longer guarantees growth. Organizations must overcome internal barriers by executing with discipline, accountability, and disciplined sales strategies. In today's margin-pressured market, growth happens only when strategy is executed consistently, visibly, and by everyone.

GROWTH BARRIERS ARE USUALLY INTERNAL

LEADERSHIP AND DIRECTION



Strong sales leadership, clear value proposition to drive differentiation

TALENT MANAGEMENT



Identifying, hiring and retaining top salespeople

STRATEGIC PLANNING



Strategic business plans and ability to adapt to market changes

OPERATIONAL EFFICIENCY



Weekly cadence of accountability and strategic review

CULTURE AND ENGAGEMENT



Bad culture leads to turnover and lower staff morale

MARKET INTELLIGENCE



Failure to effectively utilize market data and establish differentiators

ESSENTIAL 4

GROWTH AND PROFITABILITY

GROWTH CONCEPTS

DIFFERENTIATORS

These are unique characteristics of your agency that separate you from your competition that every team member must know.

Measure	Impact
Timely Admissions	People remember who responds quickly and those agencies tend to receive repeat referrals.
Patient Updates	Timely, consistent updates builds trust, especially for families who are anxious and overwhelmed.
Specialty Programs	Programs like Age-Friendly Care show that you're not just staffing shifts, you're providing expertise.
Customer Service	How the phone is answered, how quickly calls are returned, and how families are followed up with.
Partnerships	Strong partnerships with health systems, physicians, care managers, SNFs, ALFs, home health, hospice, DME, and community organizations expand your visibility.
Making it Easy	People avoid working with partners who make the process difficult. Every extra form, delay, or unclear process is a barrier to referrals.

ESSENTIAL 4

GROWTH AND PROFITABILITY

REACH + FREQUENCY + MESSAGING

1. REACH

- Measure the total number of sales calls
- Have a documentation capability - CRM tools or Call logs
- Set a goal for your team. e.g. 50-65 calls a week
- Hold your team accountable to the set goals

2. FREQUENCY

- Measure the number touchpoints with each account
- Ensure you optimize for territory size - number of accounts under a single sales person
- Use mapping tools to align territory geographically to reduce unnecessary drive time
- Identify high-value accounts and provide them elevated service

3. MESSAGING

- What your customers are hearing
- Craft your message by doing pre-work to understand your customers
- Utilize a consultative sales approach that focuses on relationship building

ESSENTIAL 4

GROWTH AND PROFITABILITY

4 DISCIPLINES OF EXECUTION

1. FOCUS ON THE WILDLY IMPORTANT

- FOCUS and emphasize your most critical goals
- Keep critical goals to only 1-2 at a time
- Goals Format: “Starting Point to Ending point by Date”

2. ACT ON THE LEAD MEASURES

- Leverage REACH + FREQUENCY + MESSAGING as LEAD measures that influence your goals

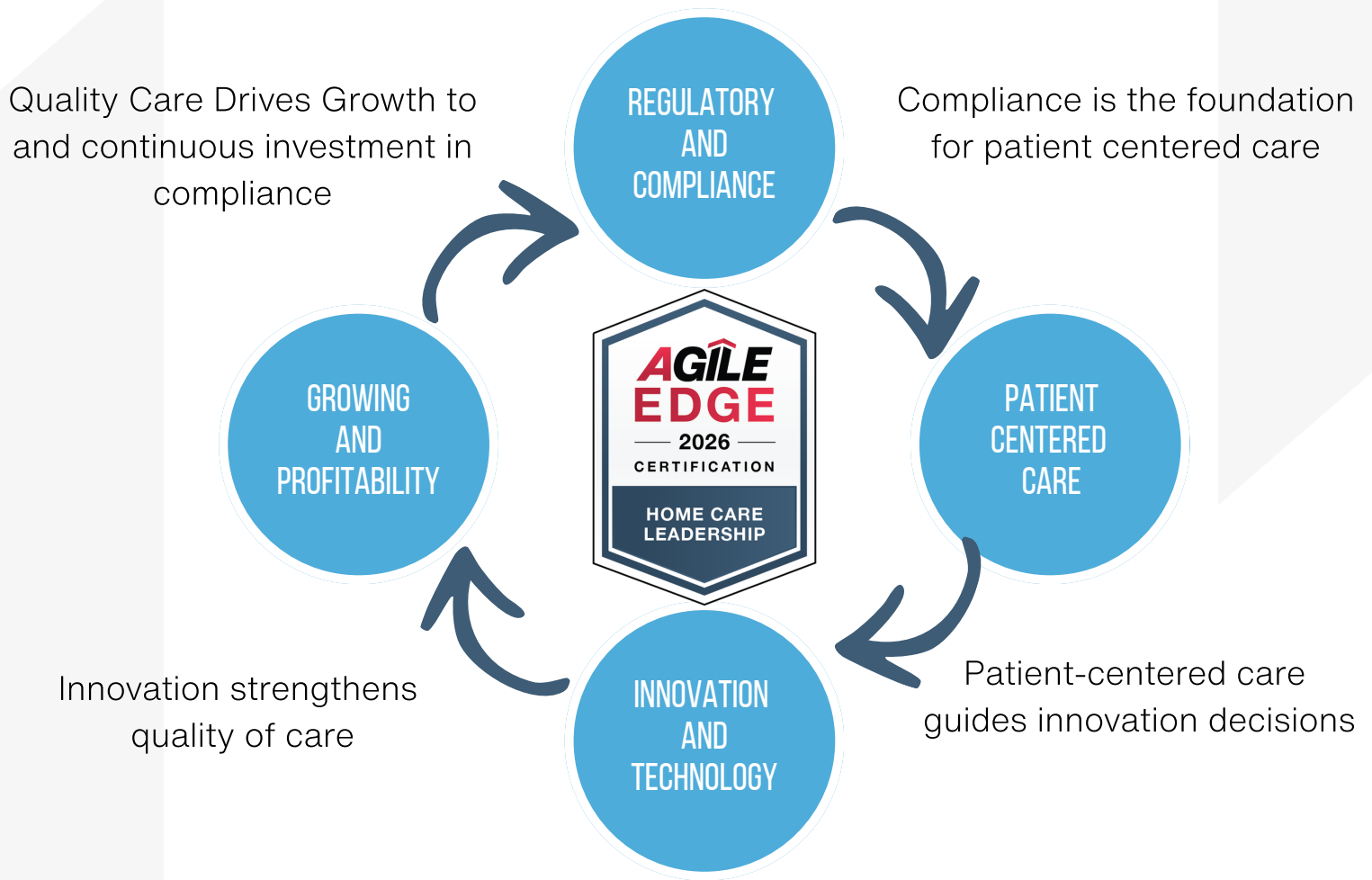
3. KEEP A COMPELLING SCOREBOARD

- Utilize scoreboard to engage your team with a visual representation of progress
- Scoreboard must be simple, easy to read and shows at a glance if the team is winning or losing

4. CREATE A CADENCE OF ACCOUNTABILITY

- Highly recommended for weekly cadence.
- each meeting should include:
 - Account: report on last week's commitments
 - Review Scoreboard
 - Plan: Pathway forward and commitments

THE EDGE FLYWHEEL



WHERE TO USE EDGE?



ACRONYMS AND DEFINITIONS

AI	Artificial Intelligence
ALFs	Assisted Living Facilities
AOC	Areas Under the Curve
CHAP	Community Health Accreditation Partner
CHOW	Change of Ownership
CRM	Customer Relationship Management
DME	Durable Medical Equipment
EDGE	Essentials in Driving Growth and Excellence
EMR	Electronic Medical Record
EVV	Electronic Visit Verification
HBCS	Home Based Community Service
HIPPA	Health Insurance Portability and Accountability Act
ICU	Intensive Care Unit
QAPI	Quality Assurance and Performance Improvement
PIP	Performance Improvement Plan
ROC	Receiver Operating Characteristic
SNFs	Skilled Nursing Facilities
VA	Veterans Affairs



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