



AXXESS GROWTH INNOVATION & LEADERSHIP EXPERIENCE

2026

HOME HEALTH EDGE GUIDEBOOK



EXECUTIVE SUMMARY

Home health operates in an environment defined by heightened CMS oversight, reimbursement pressure, workforce strain, and rising patient complexity. Regulatory changes, value-based purchasing, and accelerating technology have risen expectations across the board—requiring agencies to deliver stronger outcomes with greater accountability and fewer margins for error. In this landscape, compliance alone is no longer enough.

The Home Health EDGE 2026 framework exists to meet this moment. EDGE brings regulatory excellence, patient-centered care, responsible innovation, and sustainable growth into a single, integrated approach. Rather than treating quality, compliance, and growth as siloed efforts, EDGE aligns them as interconnected levers that drive resilient performance and long-term success.





HOME HEALTH EDGE ACTION GUIDE & COMPLIANCE CHECKLIST

Home health agencies face mounting pressure around regulatory compliance, clinical documentation quality, operational integrity, and patient experience, as oversight intensifies and reimbursement becomes increasingly performance-based. EDGE offers a practical framework to manage risk, elevate patient-centered outcomes, and demonstrate consistent, defensible quality at scale.

ESSENTIAL 1: REGULATORY AND COMPLIANCE

High-Risk Areas to Act on Now:

- ☐ Monitor compliance with OASIS E2 and OASIS for all payers
- ☐ Track HHVBP measure performance and understand financial impact
- ☐ Validate Face-to-Face encounter documentation and timeliness
- ☐ Evaluate AI use cases for HIPAA, security, bias, and fraud risk
- ☐ Confirm staff understanding of AI-assisted documentation limitations

Governance Must-Haves:

- ☐ AI included in enterprise risk assessments
- ☐ Clear human oversight for AI-assisted outputs
- ☐ Defined accountability—AI supports decisions, clinicians make them
- ☐ Vendor transparency on accuracy, validation, and retraining cadence
- ☐ Policies addressing privacy, security, bias, and professional judgment

▶ [Download Innovation Insight: The 5-Minute Compliance Huddle](#)

ESSENTIAL 2: DELIVERING PATIENT-CENTERED CARE

Foundations of High-Quality Care Plans

- ☐ Individualized goals aligned with what matters most to the patient
- ☐ Solid baseline functional status established at start of care
- ☐ Interdisciplinary input reflected—not siloed documentation
- ☐ Care plan treated as a living document, not a checkbox

Care Execution & Adaptation

- ☐ Translate care plans into coordinated action
- ☐ Adjust interventions based on real-time patient response
- ☐ Use documentation to drive communication and continuity, not just compliance

▶ [Download Innovation Insight: QAPI Oversight Checklist](#)



HOME HEALTH EDGE ACTION GUIDE & COMPLIANCE CHECKLIST

ESSENTIAL 3: INNOVATION & ARTIFICIAL INTELLIGENCE

AI Enabled Care

- ☐ AI supports documentation efficiency and clinical summarization
- ☐ AI assists intake workflows while preserving human review
- ☐ Predictive tools used to support—not dictate—staffing and visit planning
- ☐ Workforce trained on why AI is used, not just how

Critical Evaluation Questions

- ☐ How is accuracy validated (precision, recall, real production data)?
- ☐ Where does human review occur?
- ☐ How often is the model audited and retrained?

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

ESSENTIAL 4: GROWTH THROUGH QUALITY

What Drives Scalable Growth

- ☐ Regulatory compliance functions as guardrails, not obstacles
- ☐ Patient-centered care creates predictable outcomes and demand
- ☐ Innovation expands capacity without adding burnout

Metrics That Matter

- ☐ Functional improvement
- ☐ Patient satisfaction
- ☐ Operational efficiency indicators tied to HHVBP performance
- ☐ Hospital admission rates
- ☐ Length of stay

[Download Innovation Insight: Growth Monitoring Dashboard](#)

90-DAY ACTION PLAN

Month 1

- Complete a compliance and AI risk review
- Identify gaps in care planning, documentation, or workforce execution

Month 2

- IPilot standard workflows and governance controls
- Educate staff on core EDGE principles and expectations

Month 3

- Integrate findings into QAPI and performance monitoring
- Align innovation initiatives with measurable outcomes



OUR APPROACH

REGULATORY
AND
COMPLIANCE

PATIENT
CENTERED
CARE

INNOVATION
AND
ARTIFICIAL
INTELLIGENCE

THE NEW
GROWTH
MODEL

ESSENTIAL 1

REGULATORY & COMPLIANCE EXCELLENCE

WHY THIS MATTERS

As home health faces tighter CMS oversight and rapid AI adoption, organizations must balance innovation with compliance. Understanding AI risks, governance, privacy, bias, and accountability protects patients, safeguards reimbursement, and ensures technology works alongside clinical judgment.

REGULATORY LANDSCAPE

“How can I meet all our regulatory demands with the same resources?”

- OASIS required for ALL payers
- OASIS-E2 Update
- HH Value-Based Purchasing (VBP) measure modifications
- 1.3% overall payment reduction

AI RISK

“How can I utilize AI to help improve efficiency despite all the risks?”

- Hallucinations - Confident but wrong outputs
- Drift - Accuracy reduces over time
- Bias - Skewed outcomes
- Black Box - Outputs lack explainability



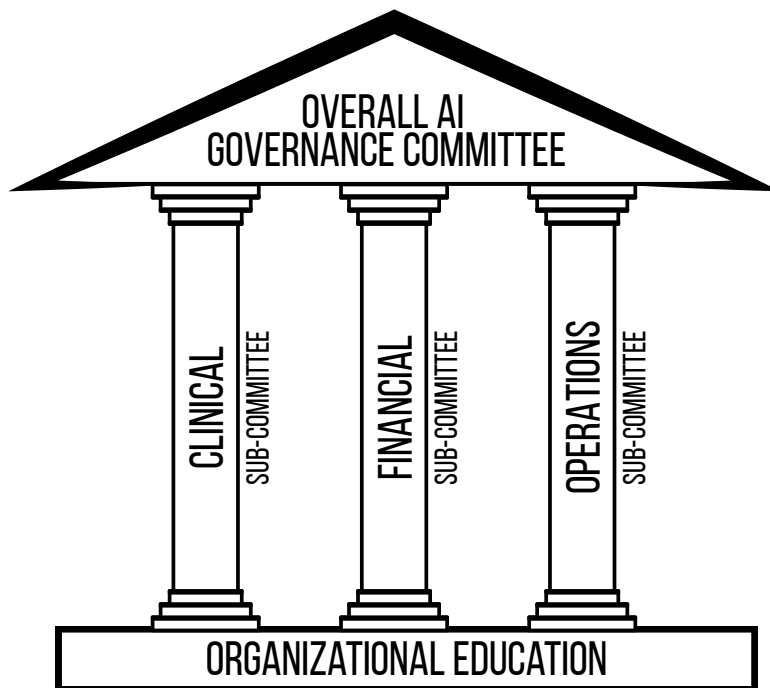
“The goal is to understand how to implement AI in an accountable manner to drive stronger outcomes.”

ESSENTIAL 1

REGULATORY & COMPLIANCE EXCELLENCE

GOVERNANCE & COMPLIANCE

AI Governance is the structured framework organizations use to ensure AI is safe, reliable, explainable, fair, accountable, and compliant. It defines oversight roles, decision rights, risk management, and alignment with standards like NIST to responsibly manage AI across clinical, operational, and technical domains.



COMMON WORKING GROUPS

- Legal/Compliance
- Medical Staff
- Peer Review/PSO
- Financial Integrity
- Procurement
- IT Review
- Security Review
- Privacy/Data Management

KEY POINTS TO CONSIDER

You will be held responsible for AI Outputs. Your AI Governance committee needs to implement a strong compliance program.

A strong AI Compliance program includes:

- Leadership and Oversight
- Continuous Training and Education
- Written Policies and Procedures
- Methodology to Enforce Set Standards
- Risk Assessment

ESSENTIAL 1

REGULATORY & COMPLIANCE EXCELLENCE

NIST RISK MANAGEMENT FRAMEWORK

National Institute of Standards and Technology (NIST) is a process that organizations can refer to as they embark on their AI governance journey.

STEP 1 - PREPARE

Establish Governance and Identify Key Roles

STEP 2 - CATEGORIZE

Categorize Systems and Determine Impact/Risk Level

STEP 3 - SELECT

Select Appropriate Security Controls by Categories

STEP 4 - IMPLEMENT

Implement the Selected Controls

STEP 5 - ASSESS

Test the Implemented Controls

STEP 6 - AUTHORIZE

Senior leaderships decision on Authorization to Operate

STEP 7 - MONITOR

Continuous monitoring of security systems

ESSENTIAL 1

REGULATORY & COMPLIANCE EXCELLENCE

KEY RISK AREAS

QUESTIONS TO ASK VENDORS



PRIVACY - HIPAA AND PHI

- Will the product ingest your PHI?
- How does the vendor safeguard PHI/EPHI
- Will the developer be treated as a business associate or covered entity?



DATA SECURITY

- How do you secure all your data?
- What is your security efforts?



BIAS/DISCRIMINATION/HALLUCINATIONS

- Tell me more about how you train your models.
- What is your models Accuracy/Precision/Recall score?
- How do you continuously monitor and improve?



BLACK BOX

- Can we audit or see explanations for the AI outputs?
- What are humans required to review? (Human in the loop features)

ESSENTIAL 2

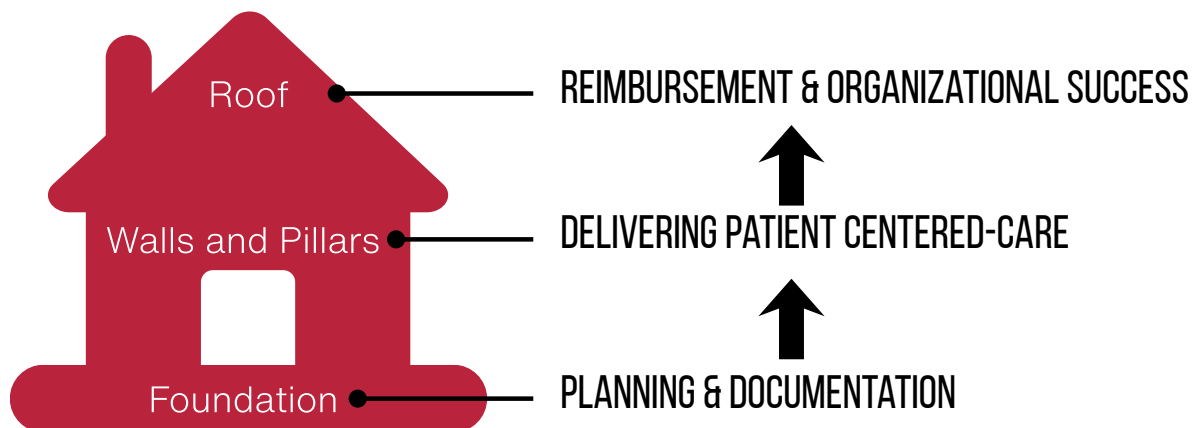
DELIVERING PATIENT-CENTERED CARE

WHY THIS MATTERS

Patient-centered care isn't just good practice—it drives outcomes, reimbursement, and sustainability. Strong care plans, real-time adjustments, effective documentation, and workforce support directly impact quality, financial performance, and retention. Organizations that connect clinical actions to business realities are better positioned to thrive in an increasingly value-driven home health environment.

OUR APPROACH

As each organization is looking to build a successful home-health business. We wanted to explore how patient centered-care rooted in a deep foundation of planning and documentation drives overall organization success.



ESSENTIAL 2

DELIVERING PATIENT-CENTERED CARE



PLANNING AND DOCUMENTATION

ASPECTS OF HIGH QUALITY CARE PLANS



PRIORITIZES PATIENT
GOALS AND PREFERENCES



INDIVIDUALIZED



BASED ON CLINICAL
ASSESSMENT



INCORPORATES
INTERDISCIPLINARY INPUT

WHY THIS MATTERS

Accurate Baseline Data In
Your OASIS



Accurate Functional
Status Captured At SOC



Accurate
Condition
Grouping Utilized
For Benchmarking



Ensures That
Patients'
Outcomes Aren't
Incorrectly
Skewed

PAUSE AND REFLECT

How do clinicians in your organizations view care plans and documentations? Is the mindset that documentation is just for compliance or that documentation can be a meaningful, living documentation throughout a patient's journey?

ESSENTIAL 2

DELIVERING PATIENT-CENTERED CARE



INTENTIONAL PATIENT-CENTERED CARE

“Care plans can NEVER be ‘set it and forget it’”

INTENTIONAL EXECUTION

- Execution means translating goals into specific, measurable actions at the visit level.
- Each clinician should know not just what to do, but why it matters for this patient.
- ONE shared care plan should be used to coordinate interdisciplinary care facilitated by clear hand-offs and efficient communication.

ONGOING ASSESSMENT AND ADAPTION

- Home health patients change quickly—care plans must evolve in real time.
- Clinicians should continuously assess response to treatment, new risks, and changes in condition.
- Updates should be timely, intentional, and clearly reflected in the care plan.

DOCUMENTATION THAT DRIVES CARE

- Documentation should tell the clinical story, not just satisfy a checkbox.
- Surveyors, payers, and leadership should be able to see:
 - The patient’s starting point
 - What interventions were provided
 - How the patient responded
 - Why changes were made

ESSENTIAL 2

DELIVERING PATIENT-CENTERED CARE



REIMBURSEMENT & ORGANIZATIONAL SUCCESS

“Clinical, operational and financial teams can’t operate in silos. Every team needs to understand the business of home health and how they individually impact overall success.”

EDUCATED AND STABLE WORKFORCE

Investing into workforce education and satisfaction ensures that only the highest-quality processes are adhered to.

OUTCOME-DRIVEN PLAN OF CARE AND DOCUMENTATION

Organizationally focused on driving care that is outcome driven with defensible and complaint documentation.

STRONG OUTCOMES THAT IMPROVE REIMBURSEMENT

Strong documentation ensure timely reimbursement and high quality scores.

REINVESTMENT INTO STAFF, PATIENTS AND COMMUNITY

Timely revenue streams and bonus payments allows for continuous reinvestment into better education and better care!

DID YOU KNOW?

The cost of replacing a clinician is estimated at \$40k - \$60k across the need for hiring, training, and replacing lost knowledge!

ESSENTIAL 2

DELIVERING PATIENT-CENTERED CARE

CONTINUOUS EDUCATION AND TRAINING



In today's competitive healthcare landscape, managing your workforce effectively is crucial for success. An LMS solution, like Axxess Training and Certification, is designed to build competencies, providing your employees with the confidence they need to execute their job with the highest level of quality. When employees feel empowered to perform at the top of their license or skill set, that positively impacts their attitude. Patients and families notice this attitude, which can impact outcomes. And improved outcomes are critical to scaling a business for growth.

- 55% of home health and hospice staff feel completely prepared to take care of a new client
- On average new hire receives five hours of orientation
- On average employees receive eight hours of ongoing training
- 40% of younger leaders described their organizations learning and development programs as excellent
- 39% of providers have an established training program to retain long-term employees
- 44% struggle with upskilling employees

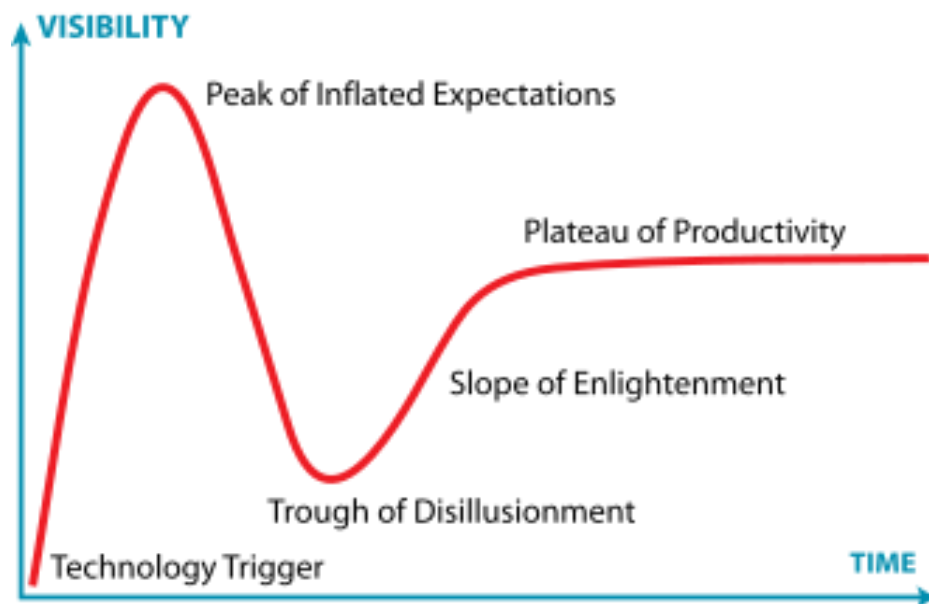
ESSENTIAL 3

INNOVATION AND ARTIFICIAL INTELLIGENCE

WHY THIS MATTERS

AI in home health is moving from experimentation to real operations. When applied to coding, intake, scheduling, and patient monitoring, it can free clinician time, accelerate admissions, reduce costs, and improve outcomes—but only if accuracy, human judgment, and real-world performance are proven.

THE AI INFLECTION POINT



“AI is across many headlines, saying that AI can unlock clinician time back for patient care, faster revenue cycle and many other benefits. But the question is - How do we use AI to actually reduce costs, and not just add new costs?”

ESSENTIAL 3

INNOVATION AND ARTIFICIAL INTELLIGENCE

KEY CONSIDERATIONS FOR AI IN THE REAL WORLD

1. CODING AUTOMATION

Home health ICD-10 coding and OASIS QA allows better billing outcomes but only impactful when accuracy is high.



Key concerns:

- Low precision: Adding diagnoses that are not supported by documentation, creating compliance and audit risk.
- Low recall: Missing valid diagnoses, leading to under-coding, lost revenue and incorrect OASIS outcomes.

2. INTAKE AUTOMATION

Automating intake can shorten time-to-admit and reduce manual work.



Key functionalities to note:

- How are edge cases and limited documentation handled?
- What human reviews are involved to ensure no downstream clinical and billing impact?

3. WORKFORCE OPTIMIZATION

Tools such as staff scheduling can improve capacity, reduce mileage and lower overtime.



AI over-optimizes without context for information like:

- Clinician preferences or fatigue.
- Real-world variability that's not captured as data.

ESSENTIAL 3

INNOVATION AND ARTIFICIAL INTELLIGENCE

KEY CONSIDERATIONS FOR AI IN THE REAL WORLD

4. COMPANION CHECK-INS & REMOTE MONITORING

AI-driven patient touchpoints can extend care beyond visits and enable earlier intervention which can result in reduced hospitalizations.



From an Ethical perspective we should consider:

- Process for patients to opt-in to AI engagement?
- Accountability for AI-missed warning signals?

LEADERSHIP CHECKLIST TO MITIGATE AI RISKS:



Keep Humans in the Loop



Define Clinical Accountability



Audit Outputs Regularly



Avoid Full Automation Too Early



Document Oversight Processes

ESSENTIAL 3

INNOVATION AND ARTIFICIAL INTELLIGENCE

VENDOR TRANSPARENCY

QUESTIONS TO ASK EVERY AI VENDOR

- ☐ How does your AI model work?
*High Level concepts is fine, secrecy is a red flag
- ☐ What data was used to train your mode?
*Did they use generic data or home health domain specific data?
- ☐ What is your REAL Accuracy?
*Don't just ask for accuracy, ask for details like precision, recall, F-score
- ☐ How often is your model re-evaluated?
- ☐ Who audits your model? How often is it audited?
- ☐ What happens when the output is wrong?
- ☐ Can we see performance benchmarks from actual clients?
- ☐ Where does the human review sits?
- ☐ What liability protections exists?
- ☐ How would I integrate this workflow with my EMR?

“Vendors should be willing to partner with you throughout the discovery process. Overly vague answers should be a red flag for you to walk away!”

ESSENTIAL 4

THE NEW GROWTH MODEL

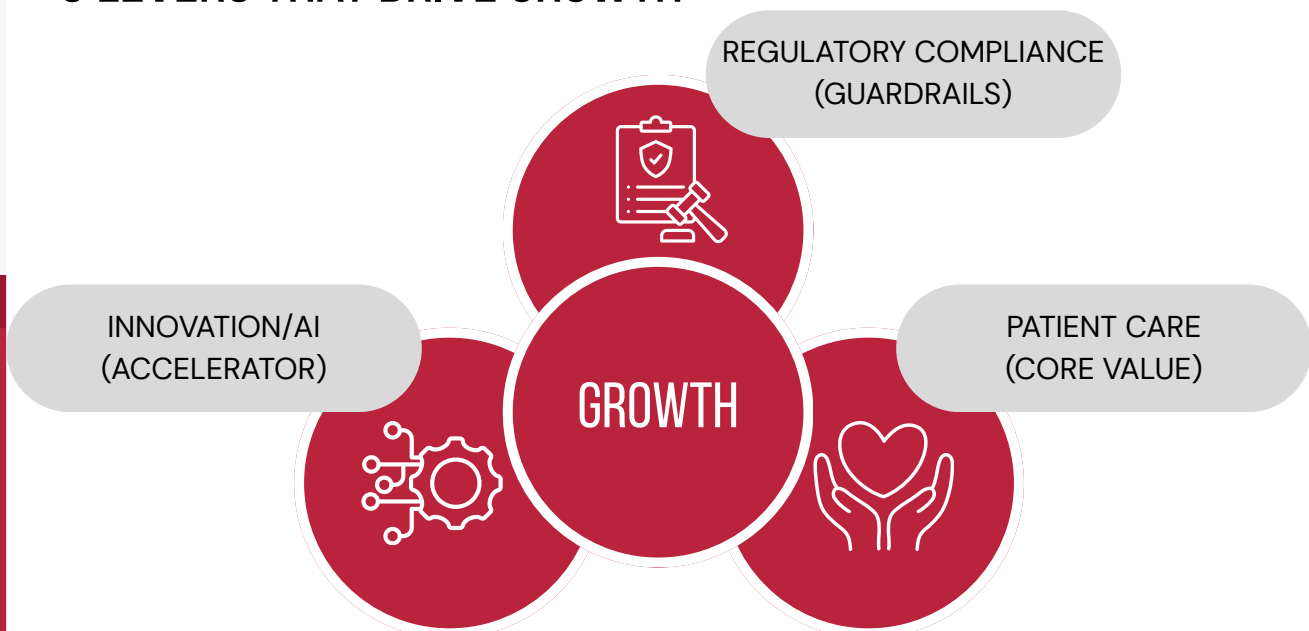
WHY THIS MATTERS

Growth in home health now depends on aligning compliance, patient-centered care, and innovation. Agencies that use data, outcomes, and technology to expand capacity, earn stronger referrals, payer trust, and sustainable margins in an increasingly value-driven, regulated environment.

GROWTH TACTICS MUST ALIGN WITH INDUSTRY SHIFTS

PREVIOUSLY		NOW
Volume	Financial	Value Based
# Vists	Performance	Patient Outcomes
Manual	Workflows	Automated
Reactive	Patient Care	Predictive

3 LEVERS THAT DRIVE GROWTH



ESSENTIAL 4

THE NEW GROWTH MODEL

PATIENT CARE - YOUR CORE VALUE

“Referral sources choose agencies that delivery predictable outcomes and exceptional patient experience.”

1. WHAT ARE PREDICTABLE OUTCOMES?

Referral sources wants to ensure that patients who go to your agency get the best quality care. They want to know how you benchmark on different metrics like:

- Functional Improvement
 - OASIS Assessments and Quality Star Ratings
- Patient Satisfaction
 - CAHPS Survey
- Hospital Admission Rates
 - EMR Tracking
- Length of Stay
 - EMR Episode Analytics on LOS

2. WHAT IS PATIENT-CENTERED CARE?

Patient centered care focuses on every individuals unique needs, preferences, and goals.

- Purposeful, Individualized Care Plans
- Caregiver Involvement
- Cultural Responsiveness
- Technology Enabled Touchpoints

ESSENTIAL 4

THE NEW GROWTH MODEL

REGULATORY COMPLIANCE - YOUR GUARDRAILS

Compliance fuels scale because it protects revenue, reduces risk, and builds the trust required for agencies to grow volume, expand partnerships, and operate confidently without regulatory setbacks.

KEY ACTIONS TO TAKE

- ☐ Always Prepare with Audit Readiness In Mind
- ☐ Accurate Coding Optimizes Reimbursements
- ☐ Precise Documentation Reduces Denials
- ☐ Tracking Competency Reduces Risks
- ☐ Accurate OASIS Ensures True Outcomes Are Reflected

PAUSE AND REFLECT

Has your agency ever grown in census while revenue stayed flat? Or even worse, profits declined?

Strategic growth is about understanding how to stay compliant to ensure that you get compensated for every additional patient you serve!

ESSENTIAL 4

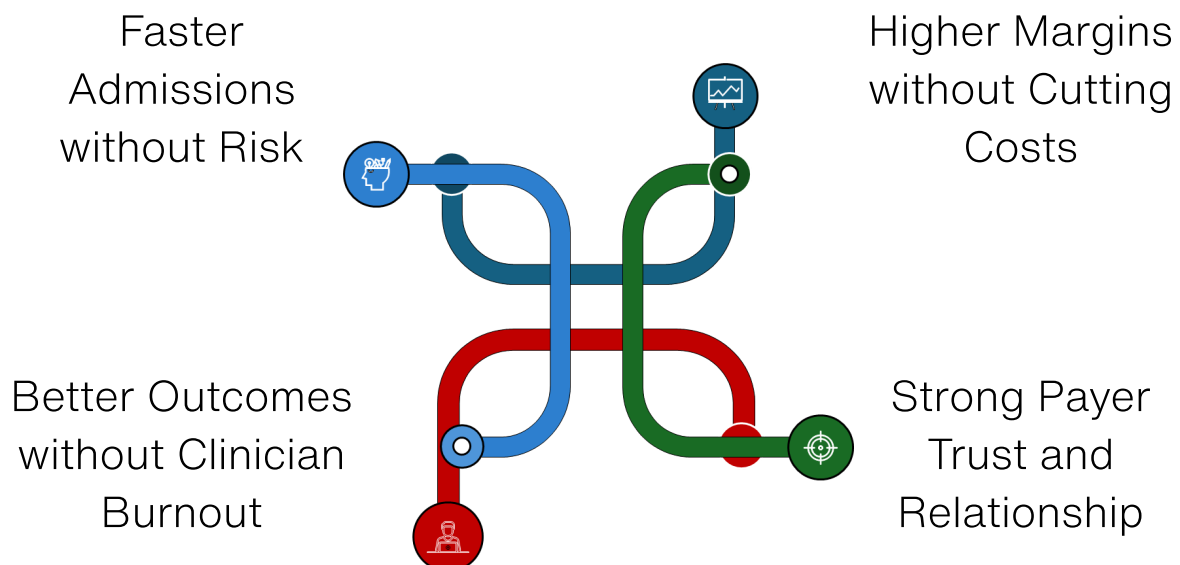
THE NEW GROWTH MODEL

INNOVATION/AI - YOUR ACCELERATOR

AREAS TO FOCUS AI ACCELERATION

- ☐ Clinicians Admit Time
- ☐ Number of Total Admissions
- ☐ Number of Visits Completed Without After-Hours Documentation
- ☐ Increased Staff/Patient/Family/Referral Satisfaction
- ☐ Reduced Hospitalizations

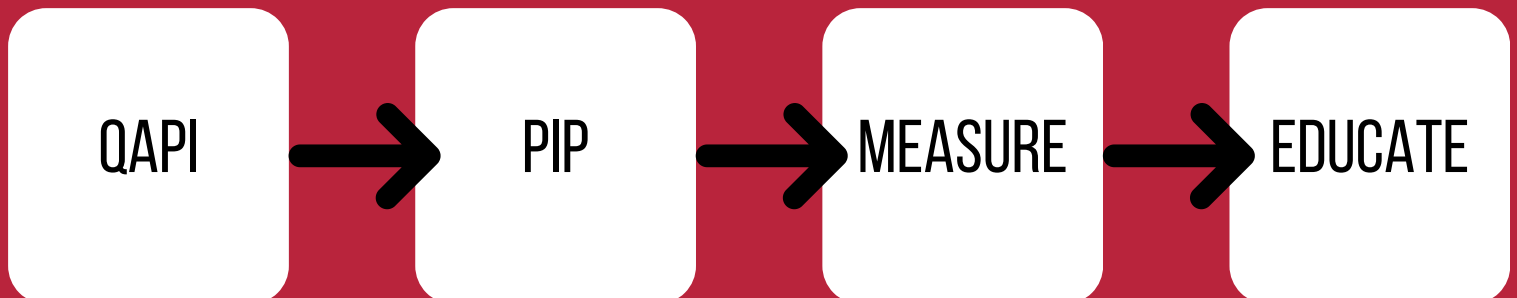
WHERE GROWTH HAPPENS



THE EDGE FLYWHEEL



WHERE TO USE EDGE?



ACRONYMS AND DEFINITIONS

AI	Artificial Intelligence
CAHPS	Consumer Assessment of Healthcare Providers and Systems
CMS	Centers for Medicare & Medicaid Services
EDGE	Essentials in Driving Growth and Excellence
EMR	Electronic Medical Record
EPHI	Electronic Protected Health Information
HH	Home Health
HIPAA	Health Insurance Portability and Accountability Act
ICD-10	International Classification of Diseases, 10 th Revision
LMS	Learning Management System
LOS	Length of Stay
NIST	National Institute of Standards and Technology
OASIS	Outcome and Assessment Information Set
PHI	Protected Health Information
PIP	Performance Improvement Plan
QA	Quality Assurance
QAPI	Quality Assurance and Performance Improvement
SOC	Start of Care
VBP	Value-Based Purchasing



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