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Technology Partners

The Home Care Efficiency Report

“AI, Automation, and Operational Intelligence for Home Care Leaders”



Inside this issue:

- The \$30K Leak You See... and the Six-Figure Loss You Don't
- Inside a 200-Caregiver Agency Losing \$10K Per Month
- How AI Is Changing Home Care Operations
- How Much Profit Is Leaking From Your Agency?

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QUICK PULSE ON HOME CARE

Some Key Developments Impacting Home Care Agencies

01 Home Care Is Getting More Expensive for Families

A federal lawsuit is challenging New York's transition of its consumer-directed home care program to a single administrator. The lawsuit alleges problems with the procurement process and claims the transition increased costs and created disruptions for caregivers and consumers. State officials dispute the allegations and maintain the changes improved oversight and reduced fraud. The case is being closely watched across the home care industry due to its potential impact on providers and consumers throughout the state.

02 Family Caregivers Are Carrying A Trillion-Dollar Load

CMS announced a nationwide six-month moratorium on new Medicare enrollments for home health and hospice providers. The action follows extensive fraud investigations, particularly in Los Angeles County, where Medicare home health payments reached \$1.7 billion in 2024. Existing providers are not affected, but agencies should expect heightened compliance oversight and increased scrutiny of enrollment and ownership changes.

03 CMS Is Tightening Oversight Of Home Health And Hospice

CMS released a new framework requiring certain Medicaid recipients ages 19–64 to complete 80 hours per month of work, education, training, or community service beginning January 1, 2027. While many home care clients and caregivers may qualify for exemptions, agencies should monitor potential impacts on both workforce coverage and Medicaid-funded services.

04 Fraud Enforcement Is Expanding Beyond Hospice

The National Council on Aging, supported by the Administration for Community Living, released a three-part report examining AI adoption in home and community-based services. The reports identify opportunities in scheduling, documentation, compliance, care coordination, and caregiver support while emphasizing the importance of human oversight, privacy protections, and bias prevention.

05 Ohio's Medicaid Action Shows States Are Getting More Aggressive

CMS announced tighter budget neutrality requirements for Section 1115 Medicaid demonstration projects beginning January 1, 2027. Since many Home and Community-Based Services (HCBS) programs operate under demonstration authority, agencies should closely monitor future state waiver renewals and funding changes.

06 Medicaid Work Rules Are Creating Concern For Home Care

CMS finalized sweeping changes affecting healthcare accrediting organizations. Home health agencies can expect more unannounced surveys, stricter conflict-of-interest rules, and the elimination of certain preparatory consulting activities by accrediting organizations. Agencies should maintain continuous survey readiness rather than relying on advance notice.

07 Medicare And Medicaid Pressure Are Shaping Admissions

A coalition representing more than 11,500 home health agencies welcomed new HHS Office of Inspector General findings showing Medicare Advantage plans continue creating barriers to post-acute care access. The coalition is urging CMS to standardize prior authorization requirements across plans to reduce delays and administrative burden.

08 Prior Authorization Is Still A Pain Point

Caregiver recruitment and retention remain among the most significant challenges facing home care agencies today. Data shows that agencies continue to experience substantial turnover, with many caregivers leaving within their first few months of employment. As demand for home-based care grows, attracting and retaining qualified caregivers has become a key factor in agency growth and stability. Emerging technologies such as AI-assisted scheduling, caregiver engagement platforms, predictive analysis, and documentation automation are helping agencies improve the caregiver experience, reduce administrative burdens, and support stronger workforce retention.

09 A Medicare Home Care Benefit Is Back In The Policy Conversation

Artificial intelligence continues to gain momentum across the home care industry as agencies increasingly explore ways to improve efficiency and streamline operations. Organizations utilizing AI report benefits such as reduced administrative burden, enhanced decision-making, improved scheduling, and greater operational efficiency. While interest in AI remains strong, agency leaders report that the primary obstacles to adoption are concerns around ethics, trust, and acceptance rather than limitations of the technology itself.

A word from CEO, David Adress...



After working with Home Care agencies for many years, one pattern has become clear:

Most agencies are not struggling because they lack compassion or dedication. They struggle because the operational systems supporting them were never designed for the complexity of modern Home Care.

Agencies today must manage scheduling, compliance, caregiver communication, EVV requirements, payroll coordination, and payer rules, all while delivering quality care in patients' homes. Yet many of these processes are still held together with spreadsheets, phone calls, paper forms, and disconnected software. The result is operational friction.

Coordinators chase missing timesheets. Compliance teams struggle to keep documentation current. Billing departments wait for incomplete visit data. Leadership teams are forced to make decisions without clear operational visibility.

This is not a reflection of poor management. It is the reality of an industry that has grown faster than its technology. Technology adoption in Home Care has historically been slow due to tight margins, heavy regulation, and constant staffing pressure. When agencies are focused on filling tomorrow's shifts, there is rarely time to rethink operational systems. **But that is beginning to change.**

Artificial Intelligence and automation are transforming what is possible in Home Care operations. Tasks like monitoring visits, tracking compliance, analyzing performance, and coordinating staff can now be supported by intelligent systems operating quietly in the background. **This does not replace the human side of care; It strengthens it.**

Over the past several years, my team and I have worked closely with agencies across the country building technology solutions for these challenges. **This report shares where agencies lose time, money, and efficiency as well as where technology can make the greatest impact.**

Our mission with this report is simple: to help agencies run more efficient, profitable, and sustainable operations. The future of Home Care will belong to organizations that combine compassionate care with intelligent operations.

Thank you for the work you do every day serving patients and families.

David Adress
CEO | Imperial Technology Partners

The \$30K Leak You See... and the Six-Figure Loss You Don't

Why Home Care agencies are quietly losing hundreds of thousands and what the most sophisticated operators are doing differently

By any measure, Home Care is one of the most mission-driven sectors in healthcare. Agencies exist to serve vulnerable individuals, allowing them to remain safely in their homes with dignity and independence. For many owners, this isn't just a business. It's a calling.

And yet, behind that mission, a different reality is unfolding. Margins are tightening. Staffing challenges are intensifying. Regulatory demands continue to grow. Administrative complexity has become part of daily operations.

Ask most agency leaders where the pressure is coming from, and the answers are familiar: Reimbursement rates. Caregiver shortages. Compliance requirements.

But after working closely with agencies across the country, a different, and far more costly, pattern emerges:

Many agencies are not losing money because of rates. **They are losing money because of what they cannot see.**



The Leak That Starts After the Visit

To understand the problem, you have to look closely at what happens after a caregiver completes a visit. In theory, the process is simple: Documentation is submitted, reviewed, and billed. In practice, it rarely is.

In practice, documentation arrives late or incomplete. Office staff follow up. Compliance teams review and return corrections. Billing is delayed while issues are resolved.

Each step feels minor, a missing duty, an incorrect timestamp, or a signature that wasn't captured, **but scale changes everything.**

Across hundreds or thousands of weekly visits, these small breakdowns create **constant friction**, and that friction **carries a cost.**



When Minutes Turn Into Thousands

Take a mid-sized agency: 200 caregivers, 1,200 visits per week, \$110 average reimbursement. If staff spend just three minutes per visit chasing documentation:

- **60 administrative hours per/week**
- **Nearly \$6,000 per month in cost.**

On its own, this doesn't seem catastrophic. That's exactly why it gets ignored.

The Cash Flow Problem Few Agencies Track

Now layer in billing delays. If just 10% of visits are delayed in billing by one week, the financial impact is significant. 120 visits at the rate of \$110 per visit.

The revenue eventually arrives. But the operational impact is real:

- Cash-flow pressure
- Increased reliance on credit
- Slower reinvestment
- Administrative backlogs

The business doesn't break; it slows.



Compliance Rework: The Silent Drain

Add compliance requirements:

- EVV discrepancies
- Missing duties
- Signature gaps
- Audit preparation

Even conservative estimates:

**\$5,000–\$10,000
per month in rework.**

At this point, many agencies believe they understand the problem. **They don't.**

The Hidden Truth:

Most agencies track revenue. Very few track **leakage.**

That's where the real money disappears.

THE \$30K LEAK IS ONLY THE SURFACE

Documentation inefficiencies, billing delays, and compliance rework can easily total \$20,000–\$30,000 per month. But this is only one layer.

When you step back and evaluate the entire operation, a more concerning reality emerges:

Every department experiences some form of operational leakage every day. Almost none of it is measured.

When Delays Turn Into Permanent Loss:

Most agencies understand delayed documentation slows billing. What they often don't fully appreciate is what happens when those delays cross a critical threshold: timely filing limits.

At that point, revenue is no longer delayed. It is lost permanently. But the cost doesn't stop there. Because even if the visit cannot be billed... The caregiver still gets paid.

The Double Loss Most Agencies Miss

Using the same agency:

- 1,200 visits per week, \$110 per visit.

Assume just 5% of visits fall outside timely filing due to late timesheets, EVV issues, or unresolved documentation.

That's:

- 60 visits per week lost, \$6,600 lost revenue per week
- \$26,400 per month in unrecoverable revenue

Now add payroll. If each visit averages 4 hours at \$18/hour:

- **240 hours per week**
- **\$4,320 in weekly payroll still paid**
- **\$17,280 per month in payroll expense**

**5% Failure =
\$500,000+ Annual Loss**

**Lost Revenue:
\$26,400/month**

**Payroll Still Paid:
\$17,280/month**

**Total Impact:
\$43,680/month**

**Annual Estimated Impact:
\$524,000+**

It Starts with Something Small

These losses rarely come from major failures. They start with:

- A caregiver submitting a timesheet late
- Missing EVV verification
- A coordinator chasing documentation too late
- A claim sitting unresolved
- system that doesn't flag risk early

By the time leadership becomes aware, it's already unbillable.

Where the Real Losses Occur

Across agencies, the same hidden leaks appear repeatedly:

Staffing & Scheduling	Unfilled shifts, late fills, overtime inefficiencies
Intake & Growth	Lost leads, slow conversions, delayed starts
Billing & Revenue Cycle	Denials, rebilling, underbilling, prebilling backlogs
Documentation & EVV	Late submissions, missing data, manual corrections
Compliance	Training gaps, incomplete files, audit rework
Caregiver Workforce	Turnover, no-shows, poor utilization
Operations	Constant schedule changes and reactive coordination
Customer Experience	Missed visits, complaints, patient churn
Management Visibility	Time spent chasing data instead of making decisions

A More Realistic Financial Picture

Now revisit that same agency:

- Staffing inefficiencies: \$8K – \$15K
- Documentation & EVV: \$4K – \$8K
- Billing delays & denials: \$7K – \$20K
- Intake conversion loss: \$5K – \$15K
- Caregiver turnover: \$5K – \$12K
- Compliance rework: \$3K – \$10K
- Coordinator inefficiency: \$4K – \$9K

Total monthly leakage:

\$40,000 – \$90,000

Annual impact:

\$500,000 – \$1,000,000+



Why Smart Agencies Still Miss This:

This isn't a competence issue, it's a visibility issue.
If you can't measure it, you can't fix it.

The Most Dangerous Part

These losses don't show up as "leakage." They show up as, "We need more staff," "Margins are tight," "We're overwhelmed!" So agencies respond by hiring more people, adding more process, or working longer hours instead of fixing the underlying issues.

What Leading Agencies Are Doing Differently

The most sophisticated operators are shifting from reactive operations to operational intelligence. They are:

- Measuring leakage across departments
- Identifying root causes
- Tracking recoverable revenue
- Automating workflows
- Predicting risk before it becomes loss

They don't guess. They measure.

Most agencies don't have a revenue problem. They have a visibility problem. Until that changes, the losses continue quietly, consistently, and expensively.

Find Your Hidden Operational Leak

We created a simple assessment that analyzes your agency in under 3 minutes. It reveals:

- Missed revenue
- Staffing inefficiencies
- Billing leakage
- Turnover cost
- Administrative drag

Most agencies uncover
\$300K-\$700K+
in hidden
annual loss



**The question is no longer whether leakage exists.
The question is whether you can afford not to see it.**

Take the Home Care Operational Leak Assessment

Home Care Module ShowCase: Digital Timesheet System

Once submitted, timesheets can be reviewed by office staff, approved, and automatically pushed into your EMR like HHAExchange, where the system updates the visit record and optionally stores a PDF copy for documentation and audit purposes.

With built-in automation, communication tools and configurable compliance rules, agencies can dramatically reduce administrative workload while improving caregiver accountability and documentation accuracy.

Caregivers receive secure links (via SMS or email) to complete their timesheets on any mobile device. Visit details and plan-of-Care tasks are automatically pre-populated, allowing caregivers to simply enter clock-in/out times, complete required duties, and capture digital signatures.

<p>Automated Timesheet Collection</p> <ul style="list-style-type: none"> Send timesheets automatically based on HHAExchange pre-billing visits Deliver secure timesheet links via SMS or email Caregivers can complete visits on any device 	<p>Mobile-Friendly Caregiver Experience</p> <ul style="list-style-type: none"> PIN-based access using Attendance PIN/DOB Pre-populated visit details + plan of Care tasks Digital caregiver and patient signatures Complete multiple visits in one session 	<p>Seamless EMR Integration</p> <ul style="list-style-type: none"> Pull visits directly from pre-billing Push completed timesheets back into EMR Automatically update visit records Attach PDF documentation to patient records
<p>Advanced Compliance Controls</p> <ul style="list-style-type: none"> Enforce minimum required tasks + personal Care duties Require documentation for missing EVV clock-in/out Capture patient signature exceptions Maintain full audit logs for compliance reviews 	<p>Real-Time Dashboard & Reporting</p> <ul style="list-style-type: none"> Timesheets sent, received, and completed Caregivers with incomplete timesheets Visits approaching timely filing deadlines Performance trends by coordinator/discipline 	<p>Built-In Communication Tools</p> <ul style="list-style-type: none"> Chat directly with caregivers from the timesheet screen Send secure links via SMS or email Use message templates for quick responses Maintain communication history for audits
<p>Automation & Workflow Management</p> <ul style="list-style-type: none"> Automatically send timesheets off schedules Send reminders for overdue submissions Automatically push completed visits to HHAExchange Workflows for edit requests and rejections Role-based access permissions and Full audit logging of user activity 	<p>Fully Customizable Timesheets</p> <ul style="list-style-type: none"> Caregiver information fields Patient Medicaid and contract details Coordinator information Attendance PIN and identifiers Custom instructions for caregivers Training video links for help and onboarding 	<p>Agency-Level Configuration</p> <ul style="list-style-type: none"> Agency branding and logos Custom messaging and templates HHAExchange integration settings Task completion requirements Visit visibility rules for caregivers

Agency	Office	Visit ID/Date	Admission ID	Patient Name	Patient Phone	Caregiver Name	Caregiver Phone	Attendance Pin	DOB	Discipline	Caregiver Code	Coord Name	Contract Name	Schedule Time	Visit Time	SE	TS	MS	Comments
PHca	NY Location	2226 12/16/2022	1226	Gerardo Toranzo	953-247-7055	Smith Sarah	953-254-4665	9225	07/06/1974	NA	120026	James Barron	Practical Financial	08:00 AM 10:00 AM	08:00 AM 10:00 AM	NA	NA	NA	
PHca	NY Location	2226 12/16/2022	1226	Gerardo Toranzo	953-247-7055	Goffa Nicole	953-252-8442	9302	06/7/2002	NA	120026	James Barron	Practical Financial	08:00 AM 10:00 AM	08:00 AM 10:00 AM	NA	NA	NA	
PHca	NY Location	2226 12/16/2022	1226	Melinda David	953-252-8444	Adams Marie	953-254-7352	7634	03/24/1982	NA	120024	Billy Jones	Site Insurance	08:00 AM 10:00 AM	08:00 AM 10:00 AM	NA	NA	NA	
PHca	NY Location	2227 12/16/2022	1227	Lyndi Jeffrey	953-241-0268	Adams Marie	953-254-7352	7634	03/24/1982	NA	120024	Christ Corabito	The Heartland	08:00 AM 10:00 AM	08:00 AM 10:00 AM	NA	NA	NA	
PHca	NY Location	2228 12/16/2022	1228	Aly Taylor	953-252-8558	Johnson Christopher	953-252-8272	8776	03/27/1988	NA	120022	Brian Jackson	The Heartland	08:00 AM 10:00 AM	08:00 AM 10:00 AM	NA	NA	NA	

Operational Benefits

- ✓ Faster documentation completion
- ✓ Reduced billing delays
- ✓ Improved EVV and compliance tracking
- ✓ Less administrative follow-up with caregivers
- ✓ Better audit readiness and documentation quality

Home Care Module ShowCase: AI Compliance System & Follow Up Agent

The AI Compliance System is a centralized portal designed to manage and track caregiver compliance requirements. All compliance-related submissions are handled through the portal, allowing administrators to easily view documentation, update the EMR, approve or reject submissions, and review communication logs between coordinators and caregivers.

The system provides full visibility and control over the compliance process in one place. It also allows agencies to customize compliance schedules and configure AI-driven outreach through automated calls or SMS reminders.

Once documentation is reviewed and approved in the portal, the system can push updates directly to the EMR, mark the compliance item as completed, and automatically generate the next pending requirement based on the defined schedule.

The screenshot displays the AI Compliance System interface. On the left, there's a 'Current Balance' section showing 2.00 credits. Below it are three 'Purchase Credits' options: \$10 (10+ minutes of call time), \$20 (200+ minutes of call time), and \$50 (Almost 3 hours of call time). There's also a 'Custom Amount' section and 'Credits Alert Settings' for critical and custom alerts. On the right, a 'Caregiver Profile' for Kelvin Smith is shown with details like code (79563), compliance item (CPR Certification), date (10/10/2024), duration (2:45), and status (Completed). Below the profile is a chat log showing a conversation between Robert and a User.

Call Logs:

Caregiver Name	Code	Compliance Item	Date & Time	Follow-up	Status	Action
Kevin Smith	79935	Annual Health Assessment	10/15/2024 10:30 AM	Yes	Completed	
James Anderson	92345	Background Check	10/15/2024 10:30 AM	No	Failed	
Emily Johnson	89645	CPR Certification	10/15/2024 10:30 AM	Yes	No Answer	
Michael Brown	75845	Annual Health Assessment	10/15/2024 10:30 AM	No	Sent	
Sarah Davis	40245	CPR Certification	10/15/2024 10:30 AM	Yes	Completed	

Call Configuration

Compliance Name	Configuration	View
Flu Vaccine	<input type="checkbox"/>	
Annual Health Assessment	<input type="checkbox"/>	
Flu Vaccine	<input type="checkbox"/>	
Annual Health Assessment	<input type="checkbox"/>	

Home Care Module ShowCase:

AI Agent Staffing System

3 powerful tools in one

#1. Smart Broadcast Staffing: Text and Logic

Instantly broadcast open cases or shifts via text using advanced filters and logic pools, such as:

- Caregivers who haven't worked recently
- Aides with less than 24 hours scheduled
- Caregivers whose current shift is ending soon

Language, location, and custom agency rules. The system automatically identifies the best candidates and sends targeted messages. No spreadsheets, no mass guessing.

#2. Cluster Map & Geographic Optimization

Visualize where caregivers and patients are located in real time:

- View clusters by zip code and radius
- See available caregiver hours by area
- Identify nearby aides to reduce travel time

Maximize coverage using caregivers already in the neighborhood. This ensures shifts are filled by the closest, most efficient caregiver, improving reliability and reducing cancellations.

#3. AI Calling Agent Fill & Assign Automatically

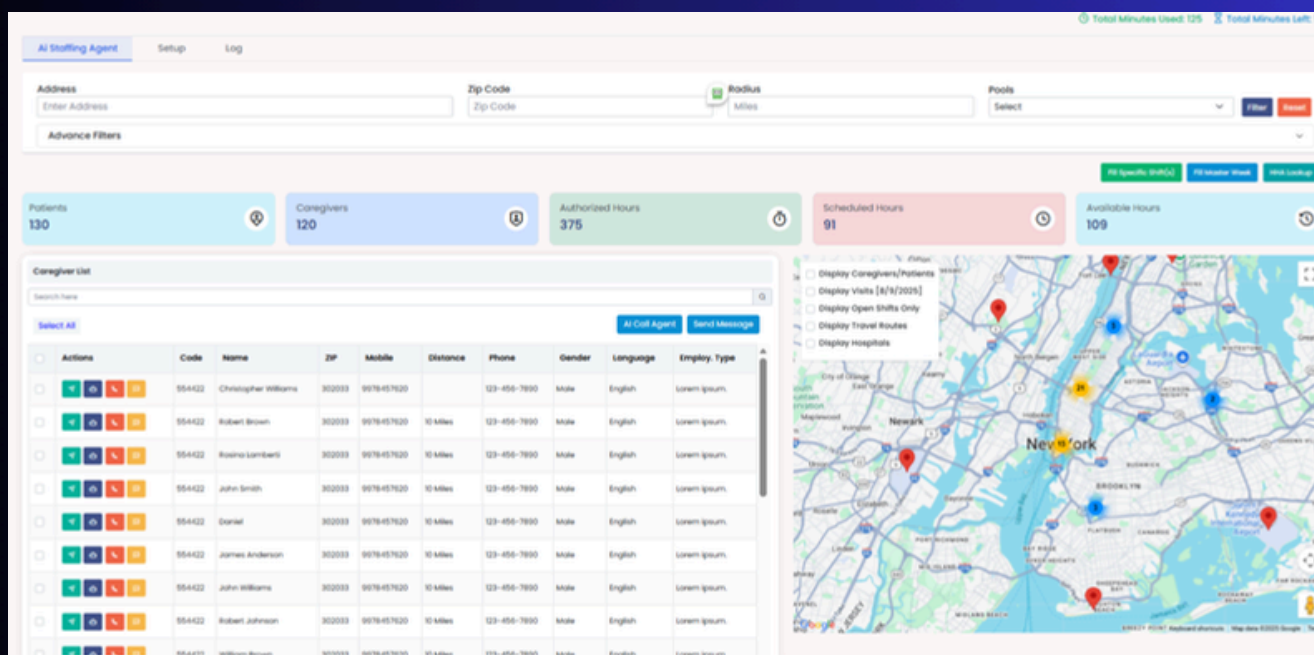
For urgent, hard-to-fill shifts, an AI agent can:

- Call eligible caregivers in their preferred language
- Confirm availability and acceptance
- Assign the caregiver to the visit

Send instant confirmation once accepted.

Once a shift is selected, the system applies your criteria, contacts candidates by call or text, and attaches the accepted caregiver directly to the visit, end to end, fully automated.

One system.
Three staffing tools.
Faster fills.
Less coordinator burnout.



Your Process Isn't Broken... So Why Are You Still Losing Money?

The Gap Between Process and Reality

By now, most Home Care agencies understand the importance of process. Many are even running on systems like EOS, with clear accountability, documented workflows, and structured meetings. They have invested time documenting workflows. They have trained staff. They have implemented systems to standardize operations.

In many cases, those processes are not broken. They work. So why do inefficiencies and unnecessary costs continue to show up? Because even when a process is correct, execution is never perfect.

Every agency has a version of this scenario:

1. A coordinator enters incorrect information
2. The visit moves forward
3. Billing processes the claim
4. A denial or issue occurs

Now the cleanup begins:

1. Billing reaches out to the coordinator
2. The claim is unbilled
3. The service code is corrected
4. The claim is rebilled

No single step is catastrophic. But none of it was necessary.

The Cost of Small Mistakes

Assume this issue happens just a few times per week across your agency. Each incident may involve coordinator time, billing time, and reprocessing. Even if the total effort is modest, say a few hours per month, the cost is real. At an average salary of \$50,000 per year, that equates to roughly \$25 per hour. If just 10 hours per month are spent fixing avoidable issues, **you spend \$250 per month and \$3,000 per year.**

Now multiply that across the organization. Incorrect billing codes, missing or mismatched authorizations, visits left in incorrect statuses, EVV inconsistencies, compliance follow ups, scheduling mismatches, data entry errors.

Each one repeats. Each one requires manual intervention. Each one consumes time. Each one adds friction. Individually, they feel small but, collectively, they create constant operational drag.

MULTIPLY THAT ACROSS THE ORGANIZATION

Now consider how many similar issues exist across departments. Incorrect billing codes, missing or mismatched authorizations, visits left in incorrect statuses, EVV inconsistencies, compliance follow ups, scheduling mismatches, data entry errors.

Each one repeats. Each one requires manual intervention. Each one consumes time. Each one adds friction. Individually, they feel small. Collectively, they create constant operational drag.

The Compounding Effect Most Agencies Miss

Let's stay conservative. If your agency has: 10 recurring issues, each costing between \$250 and \$1,000 per month, that equals: **\$2,500 to \$10,000 per month, \$30,000 to \$120,000 per year.**

In many agencies, the number is significantly higher. Not because of major failures but because of hundreds of small inefficiencies happening every day.

When Process Isn't the Problem

Most organizations respond to inefficiency by improving process. More training, more oversight, more policies, more accountability. Even agencies running on EOS often double down here, tightening processes, adding scorecards, and reinforcing accountability.

But this approach has limits. Because the issue is not always the process. The issue is this: People will always make small mistakes and most systems are not designed to catch them in real time.

Where Simple Technology Changes Everything

This is where forward thinking agencies take a different approach. Instead of trying to eliminate human error, they design systems that absorb it.

A Simple Example:

Take the billing code scenario: Instead of allowing an incorrect code to move through the system and be corrected later, a simple logic check can be applied. If the service code does not match authorization or contract rules, automatically correct it or flag it before billing.

Now the error never reaches billing.

No rework. No delay. No wasted time.

Small Fixes, Real Impact

This same concept applies across the organization. Imagine automating:

- Removing visits that were never staffed
- Correcting invalid visit statuses
- Flagging missing documentation before submission
- Placing caregivers on hold when compliance rules are not met
- Auto discharging patients after extended hospitalization
- Validating authorizations before scheduling
- Cleaning up data inconsistencies in real time

None of these require replacing your system. They are small, targeted fixes. Each one **eliminates repeated manual work.**

Small Fixes, Real Impact

Most agencies think in terms of big transformations. New systems. New platforms. Major process redesign.

But some of the highest return opportunities come from something much simpler: Fixing small, repeatable breakdowns with small, intelligent automation.

The Real Shift

This is not about replacing your system, it's about enhancing it.

- Adding logic where there is none
- Adding automation where there is friction
- Adding safeguards where mistakes happen repeatedly

**Because the goal is not perfection.
The goal is reducing the cost of
imperfection.**



The Bottom Line

Your process may not be broken. Your team may be doing their job. Your systems may be functioning as designed.

You can still be losing money. Not from major failures. From small mistakes that repeat every day.

**If a mistake happens once,
it is a training issue.**

**If it happens repeatedly,
it is a system opportunity.**

**And in Home Care operations,
there are hundreds of these
opportunities waiting to be solved.**

100 AI/Automation Ideas for Your Home Care Agency

Most Home Care agencies don't have a process problem. They have an execution problem at scale.

Too many small tasks, too many manual follow ups, too many repeated mistakes, individually, they seem manageable, but collectively, they are expensive.

Why This Matters More Than You Think

Every item on this list replaces:

- A phone call
- A follow up
- A correction
- A delay
- A missed opportunity

And most agencies are doing dozens of these manually, every single day. The result is not just inefficiency. It is:

- Slower billing
- Higher administrative cost
- More compliance risk
- Lost revenue
- Staff burnout

The Reality

Most Agencies Miss

You don't need a massive system overhaul to improve operations. Some of the highest ROI improvements come from small, targeted automation fixes that eliminate work that should never exist in the first place.

DOCUMENTATION, EVV & BILLING

1. Automatically follow up on missing timesheets
2. Detect visits nearing timely filing deadlines
3. Auto correct billing codes before claim submission
4. Block incomplete documentation from reaching billing
5. Automate EVV follow ups for missing clock ins or outs
6. Auto push only compliant visits to billing
7. Track visits stuck in prebilling
8. Auto validate POC duties before submission
9. Auto generate timesheets from visit schedules
10. Auto attach completed documentation to EMR
11. Auto detect underbilling or incorrect units
12. Auto audit claims before submission
13. Auto flag authorization mismatches
14. Auto detect duplicate visits
15. Auto clean invalid or incomplete visits

CAREGIVER MANAGEMENT & COMPLIANCE

16. Auto terminate aides with no activity for 90 days
17. Automate compliance document follow ups
18. CHRC form submission and fingerprint reminders
19. Auto track expiring certifications
20. Auto place caregivers on hold for compliance failures
21. Auto send inservice reminders
22. Auto track caregiver compliance status
23. Auto follow up on onboarding documents
24. Auto verify licenses and credentials
25. Auto update compliance status into EMR
26. Auto track training completion
27. Auto notify caregivers of compliance gaps
28. Auto generate compliance audit reports
29. Auto assign compliance tasks
30. Auto track caregiver incidents

SCHEDULING & OPERATIONS

31. Auto fill open shifts
32. Auto notify caregivers of open shifts
33. Auto assign last minute call outs
34. Auto detect missed visits in real time
35. Auto mark visits as missed after X days
36. Auto fix shifts that span 24 hours incorrectly
37. Auto create visits based on scheduling rules
38. Auto clean up unstaffed visits
39. Auto detect scheduling conflicts
40. Auto track shift gaps
41. Auto notify coordinators of scheduling issues
42. Auto optimize caregiver assignments by location
43. Auto track overtime thresholds
44. Auto detect underutilized caregivers
45. Auto reassign shifts based on availability

INTAKE, ELIGIBILITY & PATIENT FLOW

46. Auto intake data collection
47. Auto follow up on application process documents
48. Auto verify eligibility more frequently
49. Auto notify eligibility changes
50. Auto discharge patients for inactivity or cleanup
51. Auto track referral conversion
52. Auto follow up on MD orders and faxes
53. Auto create intake records in system
54. Auto assign intake follow up tasks
55. Auto detect delays in start of Care
56. Auto track missing intake documentation
57. Auto notify staff of patient status changes
58. Auto track authorization expirations
59. Auto outreach to contracts for authorizations
60. Auto monitor patient onboarding flow

100 AI & AUTOMATION IDEAS FOR YOUR HOME CARE AGENCY

COMMUNICATION & ENGAGEMENT

61. Auto send reminders via SMS or email
62. Auto notify caregivers of schedule updates
63. Auto notify patients of caregiver arrival
64. Auto send surveys to patients and caregivers
65. Auto detect sentiment from calls and notes
66. Auto escalate unhappy patients
67. Auto notify families of updates
68. Auto chatbot for caregiver questions
69. Auto multilingual communication
70. Auto call blast notifications
71. Auto follow up on missed calls
72. Auto track complaints and resolution
73. Auto notify caregivers of missing tasks
74. Auto send policy updates
75. Auto notify staff of emergencies

ADMIN, HR & BACK OFFICE

76. Auto create tickets based on rules
77. Replace email tasks with ticketing system
78. Auto track PTO requests
79. Auto generate productivity reports
80. Auto reconcile data between systems
81. Auto detect payroll anomalies
82. Auto generate audit logs
83. Auto track administrative workload
84. Auto notify missing data
85. Auto detect denied entries
86. Auto clean system data inconsistencies
87. Auto generate internal alerts
88. Auto track employee performance
89. Auto create reports for compliance
90. Auto manage internal workflows

DATA, REPORTING & INTELLIGENCE

91. AI reporting using natural language queries
92. Auto generate dashboards for each role
93. Auto detect operational inefficiencies
94. Auto highlight top problem areas
95. Auto track KPIs in real time
96. Auto identify revenue leakage patterns
97. Predict caregiver churn
98. Predict missed visits
99. Predict compliance failures
100. Auto trigger actions based on data insights

What This Actually Means for Your Agency

Here's the part most agencies never calculate:

If you're doing 5-10 of these...

**You are saving \$2,000 – \$5,000 per month,
\$25K – \$60K per year**

*You've eliminated some manual work,
but most inefficiencies still exist.*

If you're doing 15-30 of these...

**You are saving \$5,000 – \$15,000 per month,
\$60K – \$180K per year**

*Now you're reducing real operational
drag and improving margins.*

If you're doing 30-60 of these...

**You are saving \$15,000 – \$40,000 per month,
\$180K – \$500K per year**

*At this level, you're no longer reacting,
you're operating efficiently.*

If you're doing 60+ of these...

**You are saving \$40,000+ per month,
\$500K+ per year**

*This is where agencies become, highly scalable,
operationally disciplined, significantly more profitable*

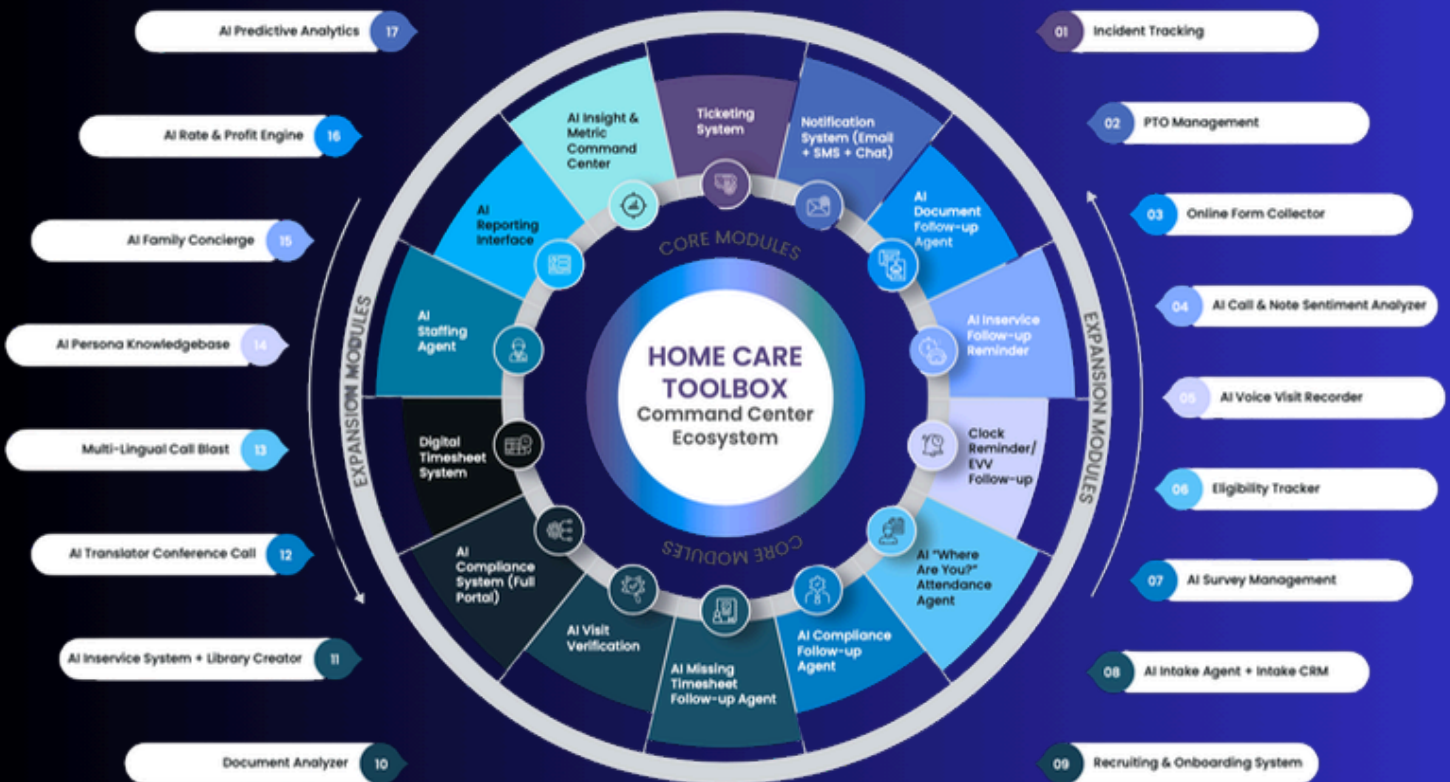
Most agencies don't fail because of big problems. They struggle because of hundreds of small inefficiencies happening every day.

Each one feels minor. Together, they define your margins.

The real question is not, "Should we automate?"
The real question is, **"How much are we losing by not doing it?"**

Imperial Technology Partners: Home Care Modules

Looking to save even more money for your agency? Imagine partnering with an IT provider that not only manages your security, network and helpdesk but also brings deep expertise in **HHaExchange** all bundled together with our powerful **Home Care Toolbox modules**.



Stop losing thousands in hidden operational leaks.

- ✓ Stop missing revenue from incomplete visits
- ✓ Stop wasting hours on the phone
- ✓ Stop chasing caregivers
- ✓ Stop compliance penalties

TAKE BACK CONTROL

Schedule a Demo

Home Care Toolbox Modules



Ticketing System

Centralize & track all tasks across departments with full accountability



Notification System

Communicate with targeted groups based on real-time data



AI ChatGPT Reporting Interface

Ask questions in colloquially and instantly generate reports from data



AI Insight & Metric Command Center

Turn real-time data into actionable tasks for every role in your agency

AI Document Follow-up Agent

Automate document collection & eliminate manual follow-ups

AI Inservice Follow-up Reminder

Automatically remind caregivers to complete required trainings

Incident Tracking

Log, manage, & report incidents in a structured system

PTO Management

Track and manage caregiver and staff time off efficiently

Clock Reminder/ EVV Follow-up

Send automated reminders to clock in & out on time

AI "Where Are You?" Attendance Agent

Detect and respond to missed or late visits in real time

Online Form Collector

Create + distribute forms to collect data from caregivers or patients

AI Call & Note Sentiment Analyzer

Analyze calls and notes to detect tone, risk, and service issues

AI Compliance Follow-up Agent

Automatically chase missing compliance items via calls and texts

AI Missing Timesheet Follow-up Agent

Complete outstanding timesheets without staff involvement

AI Voice Visit Recorder

Turn voice captured visit details to structured documentation

Eligibility Tracker

Monitor patient eligibility and receive alerts on coverage changes

AI Visit Verification

Follow up on incomplete visits and update missing duties in the EMR

AI Compliance System

Centralize and track all tasks across departments with full accountability

AI Survey Management

Collect + analyze feedback from patients & caregivers automatically

AI Intake Agent + Intake CRM

Automate intake, data collection, and onboarding from first contact

Digital Timesheet System

Replace paper timesheets with EMR-integrated digital workflows

AI Staffing Agent

Fill shifts using intelligent matching, automation, and real-time outreach

Recruiting & Onboarding System

Manage hiring, document collection, and onboarding in one workflow

Document Analyzer

Extract and organize data from documents without manual review

AI Inservice System + Library Creator

Generate multilingual training content and track completion

Multi-Lingual Call Blast

Send automated voice messages to caregivers/patients in their language

AI Family Concierge

Provide families with instant answers via voice, text, or video AI assistant

AI Persona Knowledgebase

Build profiles for interaction with caregivers and patients

AI Translator Conference Call

Enable real-time multilingual conversations across participants

AI Predictive Analytics

Identify risks like compliance failures, & missed visits before they happen

AI Rate & Profit Engine

Analyze margins and flag unprofitable cases automatically



**Built specifically for Home control
Integrates with your EMR**

HHA Exchange Power Services

We Extend HHA Exchange Beyond What It Was Built To Do

HHA Exchange is a **powerful foundation** for home care operations.

We've spent over a decade inside HHA Exchange — implementing it, optimizing it, and building systems around it.

As agencies grow, the need for deeper visibility, faster workflows, and more automation increases.

That's where we come in.

 **We don't replace HHA Exchange. We unlock its full potential.**



WHAT THIS MEANS FOR YOUR BUSINESS



Capture More Revenue Opportunities

Reduce missed visits, close EVV gaps, and accelerate documentation workflows.



Gain Real-Time Operational Visibility

See what's happening across staffing, compliance, and billing — as it happens.



Increase Team Efficiency

Automate repetitive follow-ups, exception handling, and coordination tasks.

EXPLORE POWER SERVICES



Connect HHA Exchange to Everything Else

Seamless API integrations across your entire tech stack.



Turn Your Data into Real-Time Insights

Advanced reporting beyond standard HHA dashboards.



Access Your Data Outside the System

Full database replication for analytics, automation, and AI.



Automate Processes HHA Can't Handle Natively

Custom workflows built around your operations.



Leverage AI with HHA Exchange

AI Calling Agents, AI Compliance Agents, and more.

AI LAYER – NEXT-LEVEL EFFICIENCY



AI Calling Agents

- Follow up automatically when caregivers don't clock in
- Fill open shifts by calling caregivers in their preferred language
- Confirm, assign, and notify — instantly



AI Compliance Agents

- Detect EVV and documentation gaps
- Trigger alerts and resolution workflows in real time
- Stay proactive and audit ready



AI Data & Document Intelligence

- Analyze notes, forms, and operational data
- Turn unstructured data into actionable insights
- Drive better decisions faster



THE OPPORTUNITY

If you're only using HHA Exchange out of the box — **there's significant untapped efficiency and revenue potential.**



BOTTOM LINE

- We help you:**
- Get more out of HHA Exchange
 - Automate what slows your team down
 - Turn your operations into a more efficient, scalable system



Stronger Operations



Smarter Automation



Better Insights



More Revenue



For more info
info@itptek.com



Contact the expert:
David Adress