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# Centralized Home Health Intake Cheat Sheet

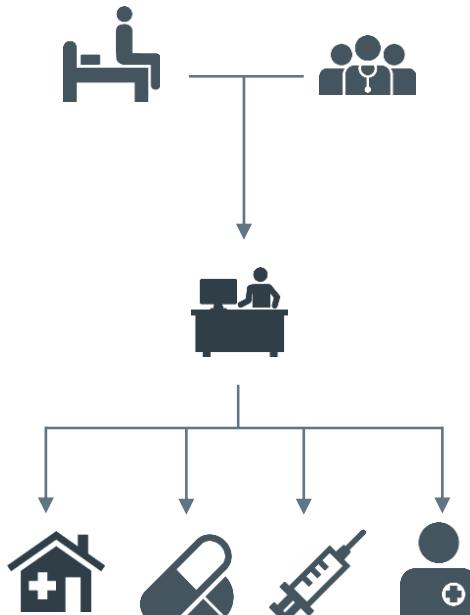
## What is Centralized Home Health Intake?

Centralized intake provides patients and health care providers with a single point of contact, such as a facility or phone number, through which they can access home health services by completing assessments and receiving referrals.

Home health agencies, through centralized intake can compile referrals and patient information from different points of contact within a home health system in an integrated, easily accessible fashion.

This also allows patients and families to receive information and access to the most appropriate level of care through screenings and referrals sent to a unified point of contact.

## Centralized Home Health Intake Process



## Centralized Intake from the Patient Perspective

Patients and referrers can contact either a phone line, online portal, or a physical location that collects referrals, patient background, and information about clinical condition. Based on the information provided, home health agencies can coordinate care with the appropriate services offered by the home health provider.

## Centralized Intake Can Help if your Agency is Struggling With:



### Redundancies During Intake

If patients and health care providers must contact several different home health points of contact within the same agencies and complete similar, time consuming screenings for each potential intake, centralized intake can help by organizing the intake process into a single point of contact.



### Underutilization of Services Due to Lack of Awareness

If a home health agency is struggling to encourage use of its lesser known services, then a centralized intake process can increase utilization by matching patients with underused but appropriate services. This is mutually beneficial as patients receive specialized care while home health agencies improve use of offered services.



### Meeting Increased Patient Demand

If the number of patients who transition to home health is small in a particular region, then a decentralized intake may not be time consuming on a systemic level. However, if the number of patients who transition to home health is significant, then a fragmented intake process may delay a patient's care delivery as home health staff spend more time performing intake duties. Centralized intake can help mitigate this impact by quickly and efficiently matching patients to the right services in their area.

Source: "Centralized Intake Best Practices Guide" Early Childhood Iowa Quality Services and Programs Component Group, Feb 2011. [http://www.igrowillinois.org/wp-content/uploads/2015/06/1\\_Coordinated\\_Intake\\_Best\\_Practices\\_-\\_Iowa.pdf](http://www.igrowillinois.org/wp-content/uploads/2015/06/1_Coordinated_Intake_Best_Practices_-_Iowa.pdf); Pfeffer, David. "What is driving Central Intake adoption," enTouch, Apr 2018. <http://news.entouchnetwork.com/what-is-driving-central-intake-adoption>; Post-Acute Care Collaborative Interviews and analysis.

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## Keys to Successful Implementation



### Adequate Funding

Whether the centralized intake is a phone line or an actual physical location, home health agencies should have appropriate funding to acquire necessary technology and resources for a successful system.



### Time to Develop the Program

Home health providers should be able to dedicate extensive time to relationship building between involved parties, staff education, training, and spreading awareness about the program.



### The Right Staff

Home health agencies should have means to train and retain intake staff since they have many tasks including verifying payments and patient eligibility, scheduling, and serving as a liaison between involved parties.

## Benefits of Centralized Home Health Intake

### ► Efficient and Timely Start of Care Delivery



Central intake has a single, uniform screening process so patients and providers don't have to undergo duplicative screenings that gather the same information at different home health points of contact. This removes redundancy during intake and ensures a timely start of care delivery.

### ► Improved Accuracy in Matching Patients to Appropriate Services



Individual providers may not be fully informed about all the educational and therapeutic resources offered by a home health organization, and may not recommend the most appropriate type of care. However, central intake staff will be better informed by the variety of services provided. Therefore they can recommend services that a patient or provider may not have considered before, but still provide the most appropriate, cost-effective care.

### ► Emphasis on Consistency and Uniformity



By coordinating referrals through a central system, referrers can reduce variation in the home health services patients receive, standardize intake screenings, and implement uniform follow up procedures. The combined effect of these changes ensures that care delivery is consistent for patients.

### ► Increased Focus on Patient Care



Because intake, screening, and referral responsibilities can be delegated to a particular group, home health staff can dedicate more time and efforts towards clinical duties. The resulting effect is less emphasis on administrative tasks and increased time spent on patient care.

### ► Increased Referrals and Specialized Care



By tracking common sources of referrals through a centralized intake system, home health agencies can work to partner with these upstream providers, thereby improving overall relationships and increasing the frequency of referrals from such sources. Similarly, agencies can track data regarding the types of patient conditions they treat, and tailor services for the most common patient characteristics and conditions.



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#### TO LEARN ABOUT

patient discharge trends in your area, visit  
[The Post-Acute Pathways Explorer](#)

Source: "Brandy, K. et. al, "Analysis of the Central Intake Process at University of Michigan Home Care Services," University of Michigan Health System. 23 Apr. 2010. [http://www.umich.edu/~ioe481/oe481\\_past\\_reports/W1006.pdf](http://www.umich.edu/~ioe481/oe481_past_reports/W1006.pdf); Post-Acute Care Collaborative interviews and analysis..