



Texas Association for
Home Care & Hospice
Leading ★ Advancing ★ Advocating

56th Annual Meeting
Tuesday, August 26, 2025
4:30pm-5:30pm

PC4b. Home Monitoring, AI and Security – Partnership Driven Outcomes

Presented by:

Phil Beckett, Chief Executive Officer, Texas Health Services Authority
Shannon Calhoun, Board Chair for Texas Health Services Authority
and Chief Revenue Officer, IVEnsure

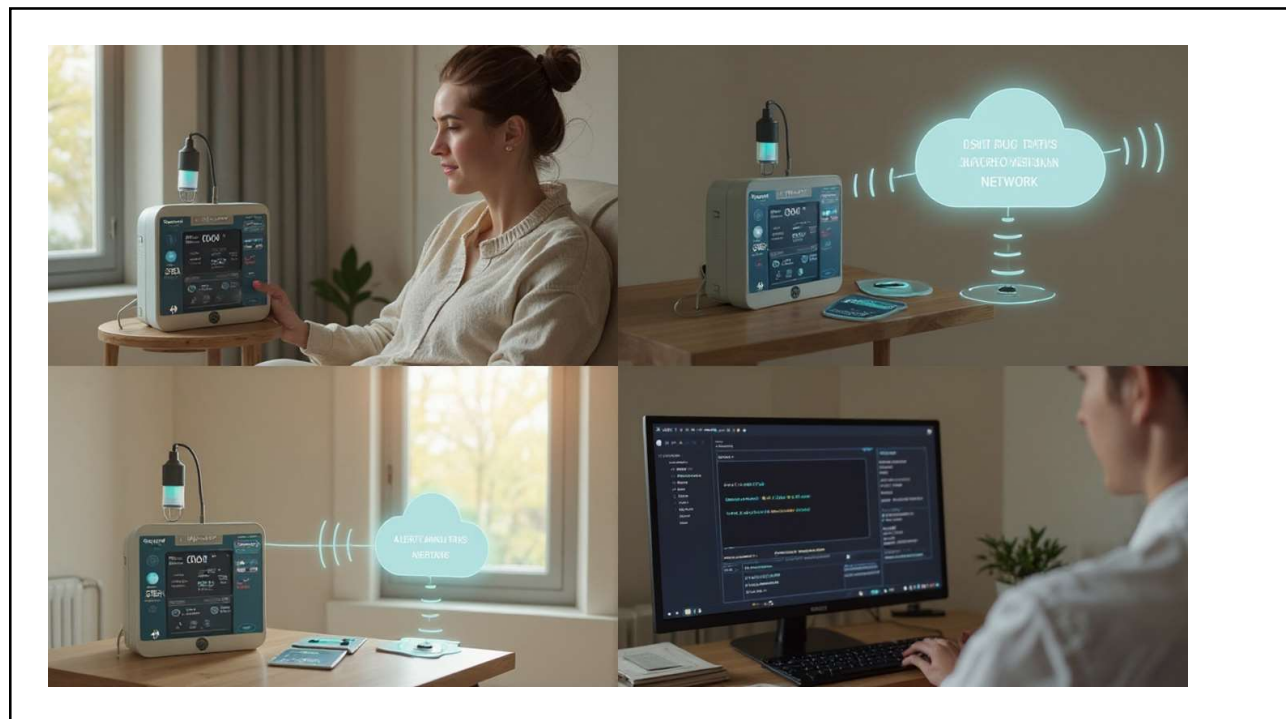
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Home Monitoring, AI, and Security - partnership driven outcomes

Shannon Calhoun – IVEnsure
Phil Beckett – Texas Health Services Authority

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The Need for Innovation

The migration of healthcare into the home is driven by the convergence of patient demand, cost efficiency, chronic care needs, and technology-enabled service delivery all reinforced by policy and value-based payment models.

This shift represents one of the most transformative trends in modern healthcare.

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Industry Challenges in Home Care

- **Fragmented Care Coordination**
 - Multiple providers (primary care, specialists, home health agencies, pharmacies) often operate in silos.
 - Limited data sharing leads to gaps in medication management, duplicative services, or missed follow-ups.
- **Workforce Shortages**
 - High turnover among nurses, aides, and caregivers.
 - Growing demand due to aging populations outpaces available staff.
 - Burnout and limited training opportunities exacerbate the issue.
- **Quality & Safety Concerns**
 - Inconsistent standards of care compared to hospitals or skilled nursing facilities.
 - Preventable readmissions due to poor adherence, infection, or complications.
 - Lack of real-time monitoring of high-risk patients.
- **Reimbursement & Regulatory Complexity**
 - Varying policies across Medicare, Medicaid, and commercial payers.
 - Limited reimbursement for non-medical home care (e.g., social support, transportation).
 - Shifting to value-based care requires stronger measurement and reporting.
- **Technology Gaps**
 - Many home care providers still rely on paper or outdated systems.
 - Limited integration with hospital EHRs.
 - Patients and caregivers may lack access to easy-to-use digital tools.
- **Patient Engagement & Adherence**
 - Difficulty ensuring patients take medications correctly or follow care plans.
 - Limited health literacy and social determinants of health (e.g., transportation, food insecurity).

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Role of Health Information Exchange (HIE)

- **Improved Data Sharing**

- Enables real-time access to hospital discharge summaries, lab results, and medication lists.
- Reduces duplicative tests and prevents missed diagnoses.
- Supports care transitions, especially after hospitalizations.

- **Population Health Insights**

- Aggregated HIE data helps identify high-risk patients for home monitoring.
- Supports reporting for quality programs (e.g., readmission rates, HEDIS measures).

- **Closing Gaps in Care**

- Alerts home care providers if a patient visits the ER or is readmitted.
- Improves follow-up and reduces preventable readmissions.

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How HIEs work Who they connect with

- Bidirectional data sharing based on relationship to patient/client with:
- Hospitals
- Clinics
- Health plans
- Community based organizations
- Public Health
- Personal health records
- Monitoring data

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Role of Health Tech in Supporting Home Care

- **Remote Patient Monitoring (RPM)**
 - Devices track vitals (blood pressure, glucose, weight) in real time.
 - Early detection of deterioration to avoid costly hospital stays.
- **Medication Adherence Tools**
 - Smart pill dispensers, infusion pump monitoring, or adherence apps.
 - Data integrates back into care teams for proactive intervention.
- **Telehealth & Virtual Care**
 - Reduces the need for travel.
 - Expands access to specialists and behavioral health support.
- **Care Coordination Platforms**
 - Centralized dashboards integrate with EHRs and HIEs.
 - Provides caregivers with real-time updates, task lists, and communication tools.
- **AI & Predictive Analytics**
 - Identifies patients at risk of falls, readmissions, or non-adherence.
 - Supports staffing optimization and personalized care planning.
- **Integration with Social Determinants of Health (SDOH) Data**
 - Connects patients to food delivery, transportation, or housing resources.
 - Expands beyond clinical care to whole-person support.

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Security for HealthTech

- Trust – for data sharing
- Internet of Things - manipulation
- Artificial intelligence - manipulation
- Loss of data - breaches

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Leveraging HIE & Health Tech to Overcome Current Challenges

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Strengthen Financial Resilience Through Data

- **Why:** Medicaid cuts, Medicare recalibrations, and value-based models demand proof of cost-effectiveness.
Actions:
 - Connect to state/regional HIEs to **document avoided readmissions and ED visits**.
 - Use predictive analytics to flag **high-cost, high-risk patients** for proactive management.
 - Create payer-facing dashboards showing **ROI of home care** (e.g., “\$X saved per patient through avoided hospitalizations”).
 - **Outcome:** Protects reimbursement, strengthens payer negotiations, and positions home care as a cost-saving partner.

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Automate Compliance & Reporting

- **Why:** HHS downsizing and shifting Medicare rules increase compliance risks.
Actions:
- Integrate HIE feeds into agency EHR to **auto-populate patient records** (labs, meds, discharge notes).
- Adopt **audit-ready documentation systems** with built-in alerts for missing signatures, visit notes, or quality measures.
- Automate quality measure submission (e.g., Home Health Quality Reporting Program, HEDIS metrics).
- **Outcome:** Reduces administrative burden, avoids reimbursement penalties, and ensures regulatory readiness.

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Strategic Takeaways

- **Protects Revenue:** Automated reporting and proof of value help navigate reimbursement cuts.
- **Eases Workforce Strain:** Digital tools offset staffing shortages, allowing fewer workers to support more patients safely.
- **Drives Compliance & Efficiency:** HIE reduces administrative overhead, keeping agencies in alignment with evolving regulations.
- **Expands Care Models:** Tech enables Hospital-at-Home, telehealth, and value-based partnerships—positioning home care as central to cost containment.

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