



Home Health Agency State-Level Target Area Summary Report

Q4CY21

The bottom section of the page features several abstract, light green geometric shapes, including rectangles and curved lines, arranged in a scattered pattern.

State-Level Home Health Agencies Q4CY21 Target Area Summary

1

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area Summary - Alaska, 16 Agencies

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Low Comorbidity	Periods with a Low Comorbidity adjustment	*	2,866	3,196
	All periods	*	7,756	8,566
	Proportion/Rate of Target to Denominator Discharges	*	37.0%	37.3%
	Average Length of Stay for Target	*	26.8	26.1
	Average Medicare Payment for Target	*	\$2,198	\$2,193
	Sum of Medicare Payments for Target	*	\$6,299,481	\$7,008,236
High Comorbidity	Periods with a High Comorbidity adjustment	*	1,479	1,468
	All periods	*	7,756	8,566
	Proportion/Rate of Target to Denominator Discharges	*	19.1%	17.1%
	Average Length of Stay for Target	*	27.6	27.3
	Average Medicare Payment for Target	*	\$2,417	\$2,330
	Sum of Medicare Payments for Target	*	\$3,574,987	\$3,420,114
Functional Impairment Medium	Periods with a Functional Impairment Level of Medium	*	2,200	2,429
	All periods	*	7,756	8,566
	Proportion/Rate of Target to Denominator Discharges	*	28.4%	28.4%
	Average Length of Stay for Target	*	26.5	25.8
	Average Medicare Payment for Target	*	\$2,235	\$2,153
	Sum of Medicare Payments for Target	*	\$4,916,147	\$5,228,689
Functional Impairment High	Periods with a Functional Impairment Level of High	*	3,370	3,998
	All periods	*	7,756	8,566
	Proportion/Rate of Target to Denominator Discharges	*	43.5%	46.7%
	Average Length of Stay for Target	*	26.8	26.1
	Average Medicare Payment for Target	*	\$2,417	\$2,370
	Sum of Medicare Payments for Target	*	\$8,145,582	\$9,474,783
Average Case Mix	Sum of case mix weight excl LUPA/PEP	3,542	6,225	6,262
	Count of Periods excl LUPA/PEP	3,403	5,504	5,499
	Proportion/Rate of Target to Denominator Discharges	1.04	1.13	1.14
Average Number of Periods	Count of periods	3,993	7,756	8,566
	Count of beneficiaries served	2,543	2,859	3,369
	Proportion/Rate of Target to Denominator Discharges	1.57	2.71	2.54
	Average Length of Stay for Target	45.4	26.5	26.1
	Average Medicare Payment for Target	\$3,460	\$2,214	\$2,164

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Average Number of Periods	Sum of Medicare Payments for Target	\$13,817,097	\$17,172,847	\$18,538,971
Periods with Low Visits	Periods with Low Visits	352	95	127
	All periods	3,993	7,756	8,566
	Proportion/Rate of Target to Denominator Discharges	8.8%	1.2%	1.5%
	Average Length of Stay for Target	34.2	22.8	24.1
	Average Outlier Payment Amount	\$1,707	\$3,070	\$3,005
	Sum of Medicare Payments for Target	\$600,871	\$291,621	\$381,602
Non-LUPA Payments	Periods w/o LUPA payment	3,473	5,589	5,527
	All periods	3,993	7,756	8,566
	Proportion/Rate of Target to Denominator Discharges	87.0%	72.1%	64.5%
	Average Length of Stay for Target	47.7	28.4	28.3
	Average Medicare Payment for Target	\$3,898	\$2,564	\$2,518
	Sum of Medicare Payments for Target	\$13,539,242	\$14,327,670	\$13,918,102
Outlier Payments	Dollar amt of outlier payments	\$311,058	\$472,019	\$305,850
	Dollar amt of total payments	\$13,817,097	\$17,172,847	\$18,538,971
	Proportion/Rate of Target to Denominator Discharges	2.3%	2.7%	1.6%
	Average Length of Stay for Target	57.6	29.7	29.6
	Average Medicare Payment for Target	\$1,044	\$690	\$628
Admission Source	Count of periods where admission source is Institutional	*	2,002	2,138
	All periods	*	7,756	8,566
	Proportion/Rate of Target to Denominator Discharges	*	25.8%	25.0%
	Average Length of Stay for Target	*	26.6	26.5
	Average Medicare Payment for Target	*	\$2,940	\$2,877
	Sum of Medicare Payments for Target	*	\$5,886,693	\$6,151,371

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

3

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area Summary - Alabama, 120 Agencies

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Low Comorbidity	Periods with a Low Comorbidity adjustment	*	80,040	75,131
	All periods	*	208,281	195,878
	Proportion/Rate of Target to Denominator Discharges	*	38.4%	38.4%
	Average Length of Stay for Target	*	27.9	27.7
	Average Medicare Payment for Target	*	\$1,388	\$1,430
	Sum of Medicare Payments for Target	*	\$111,115,205	\$107,440,581
High Comorbidity	Periods with a High Comorbidity adjustment	*	29,123	25,307
	All periods	*	208,281	195,878
	Proportion/Rate of Target to Denominator Discharges	*	14.0%	12.9%
	Average Length of Stay for Target	*	28.2	28.1
	Average Medicare Payment for Target	*	\$1,563	\$1,624
	Sum of Medicare Payments for Target	*	\$45,525,125	\$41,086,177
Functional Impairment Medium	Periods with a Functional Impairment Level of Medium	*	60,708	55,819
	All periods	*	208,281	195,878
	Proportion/Rate of Target to Denominator Discharges	*	29.1%	28.5%
	Average Length of Stay for Target	*	27.6	27.4
	Average Medicare Payment for Target	*	\$1,346	\$1,371
	Sum of Medicare Payments for Target	*	\$81,718,955	\$76,548,262
Functional Impairment High	Periods with a Functional Impairment Level of High	*	103,294	104,941
	All periods	*	208,281	195,878
	Proportion/Rate of Target to Denominator Discharges	*	49.6%	53.6%
	Average Length of Stay for Target	*	27.6	27.4
	Average Medicare Payment for Target	*	\$1,555	\$1,580
	Sum of Medicare Payments for Target	*	\$160,637,891	\$165,760,554
Average Case Mix	Sum of case mix weight excl LUPA/PEP	124,215	146,449	131,345
	Count of Periods excl LUPA/PEP	116,052	134,182	120,070
	Proportion/Rate of Target to Denominator Discharges	1.07	1.09	1.09
Average Number of Periods	Count of periods	129,579	208,281	195,878
	Count of beneficiaries served	69,751	63,589	61,519
	Proportion/Rate of Target to Denominator Discharges	1.86	3.28	3.18
	Average Length of Stay for Target	49.7	27.6	27.4
	Average Medicare Payment for Target	\$2,450	\$1,389	\$1,430

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Average Number of Periods	Sum of Medicare Payments for Target	\$317,420,648	\$289,295,493	\$280,065,337
Periods with Low Visits	Periods with Low Visits	8,559	2,248	2,168
	All periods	129,579	208,281	195,878
	Proportion/Rate of Target to Denominator Discharges	6.6%	1.1%	1.1%
	Average Length of Stay for Target	35.2	24.8	24.6
	Average Outlier Payment Amount	\$1,174	\$2,036	\$2,089
	Sum of Medicare Payments for Target	\$10,048,022	\$4,577,551	\$4,529,608
Non-LUPA Payments	Periods w/o LUPA payment	118,586	136,381	120,771
	All periods	129,579	208,281	195,878
	Proportion/Rate of Target to Denominator Discharges	91.5%	65.5%	61.7%
	Average Length of Stay for Target	51.7	28.8	28.7
	Average Medicare Payment for Target	\$2,644	\$1,607	\$1,643
	Sum of Medicare Payments for Target	\$313,589,431	\$219,102,010	\$198,472,934
Outlier Payments	Dollar amt of outlier payments	\$1,279,056	\$2,785,014	\$1,927,274
	Dollar amt of total payments	\$317,420,648	\$289,295,493	\$280,065,337
	Proportion/Rate of Target to Denominator Discharges	0.4%	1.0%	0.7%
	Average Length of Stay for Target	57.7	29.8	29.8
	Average Medicare Payment for Target	\$680	\$433	\$412
Admission Source	Count of periods where admission source is Institutional	*	44,876	40,957
	All periods	*	208,281	195,878
	Proportion/Rate of Target to Denominator Discharges	*	21.5%	20.9%
	Average Length of Stay for Target	*	27.0	26.8
	Average Medicare Payment for Target	*	\$1,939	\$1,988
	Sum of Medicare Payments for Target	*	\$87,022,760	\$81,405,834

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

5

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area Summary - Arkansas, 99 Agencies

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Low Comorbidity	Periods with a Low Comorbidity adjustment	*	42,216	41,306
	All periods	*	109,699	107,971
	Proportion/Rate of Target to Denominator Discharges	*	38.5%	38.3%
	Average Length of Stay for Target	*	27.6	27.4
	Average Medicare Payment for Target	*	\$1,472	\$1,503
	Sum of Medicare Payments for Target	*	\$62,149,119	\$62,091,931
High Comorbidity	Periods with a High Comorbidity adjustment	*	16,957	15,952
	All periods	*	109,699	107,971
	Proportion/Rate of Target to Denominator Discharges	*	15.5%	14.8%
	Average Length of Stay for Target	*	28.0	27.8
	Average Medicare Payment for Target	*	\$1,629	\$1,689
	Sum of Medicare Payments for Target	*	\$27,620,018	\$26,947,344
Functional Impairment Medium	Periods with a Functional Impairment Level of Medium	*	34,251	32,872
	All periods	*	109,699	107,971
	Proportion/Rate of Target to Denominator Discharges	*	31.2%	30.4%
	Average Length of Stay for Target	*	27.2	27.1
	Average Medicare Payment for Target	*	\$1,468	\$1,479
	Sum of Medicare Payments for Target	*	\$50,273,192	\$48,617,931
Functional Impairment High	Periods with a Functional Impairment Level of High	*	48,994	50,368
	All periods	*	109,699	107,971
	Proportion/Rate of Target to Denominator Discharges	*	44.7%	46.6%
	Average Length of Stay for Target	*	27.4	27.2
	Average Medicare Payment for Target	*	\$1,666	\$1,692
	Sum of Medicare Payments for Target	*	\$81,640,049	\$85,244,787
Average Case Mix	Sum of case mix weight excl LUPA/PEP	64,425	79,425	73,650
	Count of Periods excl LUPA/PEP	60,687	71,901	66,653
	Proportion/Rate of Target to Denominator Discharges	1.06	1.10	1.10
Average Number of Periods	Count of periods	67,733	109,699	107,971
	Count of beneficiaries served	39,389	36,645	37,279
	Proportion/Rate of Target to Denominator Discharges	1.72	2.99	2.90
	Average Length of Stay for Target	48.6	27.3	27.1
	Average Medicare Payment for Target	\$2,559	\$1,485	\$1,512

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Average Number of Periods	Sum of Medicare Payments for Target	\$173,309,167	\$162,955,540	\$163,199,739
Periods with Low Visits	Periods with Low Visits	4,429	1,106	1,037
	All periods	67,733	109,699	107,971
	Proportion/Rate of Target to Denominator Discharges	6.5%	1.0%	1.0%
	Average Length of Stay for Target	35.2	25.6	25.8
	Average Outlier Payment Amount	\$1,209	\$2,112	\$2,164
	Sum of Medicare Payments for Target	\$5,355,177	\$2,335,983	\$2,243,861
Non-LUPA Payments	Periods w/o LUPA payment	61,982	72,973	67,113
	All periods	67,733	109,699	107,971
	Proportion/Rate of Target to Denominator Discharges	91.5%	66.5%	62.2%
	Average Length of Stay for Target	50.3	28.7	28.6
	Average Medicare Payment for Target	\$2,761	\$1,720	\$1,745
	Sum of Medicare Payments for Target	\$171,151,932	\$125,509,524	\$117,090,689
Outlier Payments	Dollar amt of outlier payments	\$1,349,981	\$1,518,347	\$1,117,770
	Dollar amt of total payments	\$173,309,167	\$162,955,540	\$163,199,739
	Proportion/Rate of Target to Denominator Discharges	0.8%	0.9%	0.7%
	Average Length of Stay for Target	58.1	29.7	29.7
	Average Medicare Payment for Target	\$793	\$494	\$464
Admission Source	Count of periods where admission source is Institutional	*	26,603	25,292
	All periods	*	109,699	107,971
	Proportion/Rate of Target to Denominator Discharges	*	24.3%	23.4%
	Average Length of Stay for Target	*	27.2	27.2
	Average Medicare Payment for Target	*	\$2,059	\$2,090
	Sum of Medicare Payments for Target	*	\$54,767,058	\$52,854,820

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

7

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area Summary - Arizona, 158 Agencies

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Low Comorbidity	Periods with a Low Comorbidity adjustment	*	41,446	41,477
	All periods	*	116,732	118,151
	Proportion/Rate of Target to Denominator Discharges	*	35.5%	35.1%
	Average Length of Stay for Target	*	25.8	25.8
	Average Medicare Payment for Target	*	\$1,818	\$1,817
	Sum of Medicare Payments for Target	*	\$75,335,095	\$75,368,950
High Comorbidity	Periods with a High Comorbidity adjustment	*	15,427	15,110
	All periods	*	116,732	118,151
	Proportion/Rate of Target to Denominator Discharges	*	13.2%	12.8%
	Average Length of Stay for Target	*	26.8	26.9
	Average Medicare Payment for Target	*	\$1,990	\$2,014
	Sum of Medicare Payments for Target	*	\$30,701,293	\$30,435,062
Functional Impairment Medium	Periods with a Functional Impairment Level of Medium	*	37,174	36,547
	All periods	*	116,732	118,151
	Proportion/Rate of Target to Denominator Discharges	*	31.8%	30.9%
	Average Length of Stay for Target	*	25.2	25.3
	Average Medicare Payment for Target	*	\$1,824	\$1,808
	Sum of Medicare Payments for Target	*	\$67,800,224	\$66,087,606
Functional Impairment High	Periods with a Functional Impairment Level of High	*	50,380	54,459
	All periods	*	116,732	118,151
	Proportion/Rate of Target to Denominator Discharges	*	43.2%	46.1%
	Average Length of Stay for Target	*	25.8	25.9
	Average Medicare Payment for Target	*	\$1,972	\$1,970
	Sum of Medicare Payments for Target	*	\$99,372,668	\$107,264,775
Average Case Mix	Sum of case mix weight excl LUPA/PEP	72,120	92,070	86,922
	Count of Periods excl LUPA/PEP	67,608	79,989	75,534
	Proportion/Rate of Target to Denominator Discharges	1.07	1.15	1.15
Average Number of Periods	Count of periods	77,328	116,732	118,151
	Count of beneficiaries served	54,491	50,711	51,808
	Proportion/Rate of Target to Denominator Discharges	1.42	2.30	2.28
	Average Length of Stay for Target	41.4	25.6	25.6
	Average Medicare Payment for Target	\$2,970	\$1,805	\$1,808

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Average Number of Periods	Sum of Medicare Payments for Target	\$229,688,028	\$210,754,856	\$213,639,243
Periods with Low Visits	Periods with Low Visits	5,667	1,711	1,793
	All periods	77,328	116,732	118,151
	Proportion/Rate of Target to Denominator Discharges	7.3%	1.5%	1.5%
	Average Length of Stay for Target	26.6	22.4	23.1
	Average Outlier Payment Amount	\$1,528	\$2,511	\$2,510
	Sum of Medicare Payments for Target	\$8,659,401	\$4,297,159	\$4,500,060
Non-LUPA Payments	Periods w/o LUPA payment	70,081	81,318	76,138
	All periods	77,328	116,732	118,151
	Proportion/Rate of Target to Denominator Discharges	90.6%	69.7%	64.4%
	Average Length of Stay for Target	43.3	27.7	27.8
	Average Medicare Payment for Target	\$3,231	\$2,097	\$2,095
	Sum of Medicare Payments for Target	\$226,425,959	\$170,524,997	\$159,541,271
Outlier Payments	Dollar amt of outlier payments	\$2,400,632	\$2,638,013	\$1,993,214
	Dollar amt of total payments	\$229,688,028	\$210,754,856	\$213,639,243
	Proportion/Rate of Target to Denominator Discharges	1.0%	1.3%	0.9%
	Average Length of Stay for Target	55.8	29.5	29.6
	Average Medicare Payment for Target	\$906	\$556	\$513
Admission Source	Count of periods where admission source is Institutional	*	37,145	36,204
	All periods	*	116,732	118,151
	Proportion/Rate of Target to Denominator Discharges	*	31.8%	30.6%
	Average Length of Stay for Target	*	25.5	25.8
	Average Medicare Payment for Target	*	\$2,332	\$2,344
	Sum of Medicare Payments for Target	*	\$86,615,973	\$84,864,965

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

9

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area Summary - California, 1,788 Agencies

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Low Comorbidity	Periods with a Low Comorbidity adjustment	*	335,337	354,632
	All periods	*	1,057,489	1,139,787
	Proportion/Rate of Target to Denominator Discharges	*	31.7%	31.1%
	Average Length of Stay for Target	*	27.1	27.1
	Average Medicare Payment for Target	*	\$2,375	\$2,394
	Sum of Medicare Payments for Target	*	\$796,552,572	\$848,930,761
High Comorbidity	Periods with a High Comorbidity adjustment	*	107,087	109,893
	All periods	*	1,057,489	1,139,787
	Proportion/Rate of Target to Denominator Discharges	*	10.1%	9.6%
	Average Length of Stay for Target	*	27.5	27.5
	Average Medicare Payment for Target	*	\$2,709	\$2,747
	Sum of Medicare Payments for Target	*	\$290,138,676	\$301,917,229
Functional Impairment Medium	Periods with a Functional Impairment Level of Medium	*	397,650	439,919
	All periods	*	1,057,489	1,139,787
	Proportion/Rate of Target to Denominator Discharges	*	37.6%	38.6%
	Average Length of Stay for Target	*	27.2	27.3
	Average Medicare Payment for Target	*	\$2,327	\$2,306
	Sum of Medicare Payments for Target	*	\$925,206,291	\$1,014,374,508
Functional Impairment High	Periods with a Functional Impairment Level of High	*	325,899	370,791
	All periods	*	1,057,489	1,139,787
	Proportion/Rate of Target to Denominator Discharges	*	30.8%	32.5%
	Average Length of Stay for Target	*	26.7	26.9
	Average Medicare Payment for Target	*	\$2,661	\$2,669
	Sum of Medicare Payments for Target	*	\$867,080,601	\$989,736,873
Average Case Mix	Sum of case mix weight excl LUPA/PEP	557,289	764,800	766,659
	Count of Periods excl LUPA/PEP	583,468	731,806	737,724
	Proportion/Rate of Target to Denominator Discharges	0.96	1.05	1.04
Average Number of Periods	Count of periods	644,864	1,057,489	1,139,787
	Count of beneficiaries served	386,860	362,221	382,318
	Proportion/Rate of Target to Denominator Discharges	1.67	2.92	2.98
	Average Length of Stay for Target	46.1	27.0	27.1
	Average Medicare Payment for Target	\$3,680	\$2,302	\$2,309

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

10

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Average Number of Periods	Sum of Medicare Payments for Target	\$2,372,787,826	\$2,433,834,532	\$2,631,864,263
Periods with Low Visits	Periods with Low Visits	38,151	13,878	15,182
	All periods	644,864	1,057,489	1,139,787
	Proportion/Rate of Target to Denominator Discharges	5.9%	1.3%	1.3%
	Average Length of Stay for Target	27.3	23.7	24.6
	Average Outlier Payment Amount	\$2,071	\$3,211	\$3,213
	Sum of Medicare Payments for Target	\$79,026,728	\$44,556,258	\$48,784,588
Non-LUPA Payments	Periods w/o LUPA payment	599,554	746,718	742,533
	All periods	644,864	1,057,489	1,139,787
	Proportion/Rate of Target to Denominator Discharges	93.0%	70.6%	65.1%
	Average Length of Stay for Target	48.0	28.5	28.6
	Average Medicare Payment for Target	\$3,913	\$2,600	\$2,599
	Sum of Medicare Payments for Target	\$2,346,071,475	\$1,941,247,115	\$1,929,998,025
Outlier Payments	Dollar amt of outlier payments	\$83,113,233	\$76,831,721	\$71,579,611
	Dollar amt of total payments	\$2,372,787,826	\$2,433,834,532	\$2,631,864,263
	Proportion/Rate of Target to Denominator Discharges	3.5%	3.2%	2.7%
	Average Length of Stay for Target	57.0	29.6	29.6
	Average Medicare Payment for Target	\$2,487	\$1,382	\$1,452
Admission Source	Count of periods where admission source is Institutional	*	204,604	202,104
	All periods	*	1,057,489	1,139,787
	Proportion/Rate of Target to Denominator Discharges	*	19.3%	17.7%
	Average Length of Stay for Target	*	25.9	26.1
	Average Medicare Payment for Target	*	\$3,173	\$3,206
	Sum of Medicare Payments for Target	*	\$649,210,473	\$647,960,197

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

11

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area Summary - Colorado, 157 Agencies

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Low Comorbidity	Periods with a Low Comorbidity adjustment	*	26,033	26,639
	All periods	*	74,765	75,948
	Proportion/Rate of Target to Denominator Discharges	*	34.8%	35.1%
	Average Length of Stay for Target	*	25.5	25.6
	Average Medicare Payment for Target	*	\$1,892	\$1,902
	Sum of Medicare Payments for Target	*	\$49,257,106	\$50,657,556
High Comorbidity	Periods with a High Comorbidity adjustment	*	9,447	9,062
	All periods	*	74,765	75,948
	Proportion/Rate of Target to Denominator Discharges	*	12.6%	11.9%
	Average Length of Stay for Target	*	26.7	26.6
	Average Medicare Payment for Target	*	\$2,078	\$2,070
	Sum of Medicare Payments for Target	*	\$19,631,198	\$18,756,228
Functional Impairment Medium	Periods with a Functional Impairment Level of Medium	*	24,270	24,892
	All periods	*	74,765	75,948
	Proportion/Rate of Target to Denominator Discharges	*	32.5%	32.8%
	Average Length of Stay for Target	*	24.8	24.9
	Average Medicare Payment for Target	*	\$1,912	\$1,906
	Sum of Medicare Payments for Target	*	\$46,406,819	\$47,437,057
Functional Impairment High	Periods with a Functional Impairment Level of High	*	25,608	30,596
	All periods	*	74,765	75,948
	Proportion/Rate of Target to Denominator Discharges	*	34.3%	40.3%
	Average Length of Stay for Target	*	25.3	25.3
	Average Medicare Payment for Target	*	\$2,094	\$2,083
	Sum of Medicare Payments for Target	*	\$53,618,337	\$63,742,677
Average Case Mix	Sum of case mix weight excl LUPA/PEP	51,154	60,081	57,608
	Count of Periods excl LUPA/PEP	45,497	53,045	50,484
	Proportion/Rate of Target to Denominator Discharges	1.12	1.13	1.14
Average Number of Periods	Count of periods	51,479	74,765	75,948
	Count of beneficiaries served	36,441	32,940	33,440
	Proportion/Rate of Target to Denominator Discharges	1.41	2.27	2.27
	Average Length of Stay for Target	39.9	25.2	25.3
	Average Medicare Payment for Target	\$3,260	\$1,872	\$1,885

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

12

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Average Number of Periods	Sum of Medicare Payments for Target	\$167,828,972	\$139,984,364	\$143,132,313
Periods with Low Visits	Periods with Low Visits	3,710	1,472	1,475
	All periods	51,479	74,765	75,948
	Proportion/Rate of Target to Denominator Discharges	7.2%	2.0%	1.9%
	Average Length of Stay for Target	24.7	20.7	21.6
	Average Outlier Payment Amount	\$1,583	\$2,540	\$2,611
	Sum of Medicare Payments for Target	\$5,873,012	\$3,738,252	\$3,850,548
Non-LUPA Payments	Periods w/o LUPA payment	46,900	54,417	50,853
	All periods	51,479	74,765	75,948
	Proportion/Rate of Target to Denominator Discharges	91.1%	72.8%	67.0%
	Average Length of Stay for Target	41.5	27.2	27.5
	Average Medicare Payment for Target	\$3,533	\$2,156	\$2,170
	Sum of Medicare Payments for Target	\$165,678,689	\$117,317,376	\$110,334,480
Outlier Payments	Dollar amt of outlier payments	\$3,766,065	\$4,214,358	\$2,989,977
	Dollar amt of total payments	\$167,828,972	\$139,984,364	\$143,132,313
	Proportion/Rate of Target to Denominator Discharges	2.2%	3.0%	2.1%
	Average Length of Stay for Target	56.6	29.6	29.6
	Average Medicare Payment for Target	\$1,459	\$748	\$717
Admission Source	Count of periods where admission source is Institutional	*	23,495	22,839
	All periods	*	74,765	75,948
	Proportion/Rate of Target to Denominator Discharges	*	31.4%	30.1%
	Average Length of Stay for Target	*	24.9	25.1
	Average Medicare Payment for Target	*	\$2,406	\$2,429
	Sum of Medicare Payments for Target	*	\$56,530,254	\$55,478,971

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

13

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area Summary - Connecticut, 86 Agencies

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Low Comorbidity	Periods with a Low Comorbidity adjustment	*	38,836	38,413
	All periods	*	105,413	104,229
	Proportion/Rate of Target to Denominator Discharges	*	36.8%	36.9%
	Average Length of Stay for Target	*	25.9	25.6
	Average Medicare Payment for Target	*	\$2,081	\$2,092
	Sum of Medicare Payments for Target	*	\$80,821,608	\$80,376,253
High Comorbidity	Periods with a High Comorbidity adjustment	*	15,485	15,946
	All periods	*	105,413	104,229
	Proportion/Rate of Target to Denominator Discharges	*	14.7%	15.3%
	Average Length of Stay for Target	*	27.0	26.8
	Average Medicare Payment for Target	*	\$2,297	\$2,315
	Sum of Medicare Payments for Target	*	\$35,568,639	\$36,909,782
Functional Impairment Medium	Periods with a Functional Impairment Level of Medium	*	35,918	35,568
	All periods	*	105,413	104,229
	Proportion/Rate of Target to Denominator Discharges	*	34.1%	34.1%
	Average Length of Stay for Target	*	25.3	24.9
	Average Medicare Payment for Target	*	\$2,114	\$2,108
	Sum of Medicare Payments for Target	*	\$75,933,191	\$74,981,805
Functional Impairment High	Periods with a Functional Impairment Level of High	*	37,680	40,479
	All periods	*	105,413	104,229
	Proportion/Rate of Target to Denominator Discharges	*	35.7%	38.8%
	Average Length of Stay for Target	*	25.8	25.7
	Average Medicare Payment for Target	*	\$2,338	\$2,342
	Sum of Medicare Payments for Target	*	\$88,102,109	\$94,809,543
Average Case Mix	Sum of case mix weight excl LUPA/PEP	67,143	87,666	82,802
	Count of Periods excl LUPA/PEP	65,980	78,282	73,436
	Proportion/Rate of Target to Denominator Discharges	1.02	1.12	1.13
Average Number of Periods	Count of periods	76,000	105,413	104,229
	Count of beneficiaries served	49,293	43,578	43,680
	Proportion/Rate of Target to Denominator Discharges	1.54	2.42	2.39
	Average Length of Stay for Target	41.5	25.5	25.2
	Average Medicare Payment for Target	\$3,305	\$2,088	\$2,100

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

14

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Average Number of Periods	Sum of Medicare Payments for Target	\$251,143,263	\$220,085,682	\$218,882,573
Periods with Low Visits	Periods with Low Visits	5,359	1,112	1,152
	All periods	76,000	105,413	104,229
	Proportion/Rate of Target to Denominator Discharges	7.1%	1.1%	1.1%
	Average Length of Stay for Target	24.9	20.3	20.1
	Average Outlier Payment Amount	\$1,621	\$2,814	\$2,809
	Sum of Medicare Payments for Target	\$8,688,219	\$3,129,269	\$3,235,691
Non-LUPA Payments	Periods w/o LUPA payment	68,410	79,965	73,969
	All periods	76,000	105,413	104,229
	Proportion/Rate of Target to Denominator Discharges	90.0%	75.9%	71.0%
	Average Length of Stay for Target	43.7	27.5	27.4
	Average Medicare Payment for Target	\$3,614	\$2,383	\$2,389
	Sum of Medicare Payments for Target	\$247,214,758	\$190,542,114	\$176,747,442
Outlier Payments	Dollar amt of outlier payments	\$5,963,556	\$6,774,260	\$4,839,133
	Dollar amt of total payments	\$251,143,263	\$220,085,682	\$218,882,573
	Proportion/Rate of Target to Denominator Discharges	2.4%	3.1%	2.2%
	Average Length of Stay for Target	57.4	29.6	29.5
	Average Medicare Payment for Target	\$1,236	\$731	\$682
Admission Source	Count of periods where admission source is Institutional	*	35,380	33,974
	All periods	*	105,413	104,229
	Proportion/Rate of Target to Denominator Discharges	*	33.6%	32.6%
	Average Length of Stay for Target	*	25.4	25.3
	Average Medicare Payment for Target	*	\$2,673	\$2,685
	Sum of Medicare Payments for Target	*	\$94,554,916	\$91,236,290

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

15

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area Summary - District of Columbia, 25 Agencies

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Low Comorbidity	Periods with a Low Comorbidity adjustment	*	3,341	3,481
	All periods	*	8,737	9,024
	Proportion/Rate of Target to Denominator Discharges	*	38.2%	38.6%
	Average Length of Stay for Target	*	25.9	25.6
	Average Medicare Payment for Target	*	\$1,899	\$1,881
	Sum of Medicare Payments for Target	*	\$6,345,091	\$6,548,657
High Comorbidity	Periods with a High Comorbidity adjustment	*	1,404	1,335
	All periods	*	8,737	9,024
	Proportion/Rate of Target to Denominator Discharges	*	16.1%	14.8%
	Average Length of Stay for Target	*	27.2	27.3
	Average Medicare Payment for Target	*	\$2,039	\$2,088
	Sum of Medicare Payments for Target	*	\$2,863,261	\$2,787,079
Functional Impairment Medium	Periods with a Functional Impairment Level of Medium	*	2,428	2,540
	All periods	*	8,737	9,024
	Proportion/Rate of Target to Denominator Discharges	*	27.8%	28.1%
	Average Length of Stay for Target	*	25.7	25.2
	Average Medicare Payment for Target	*	\$1,953	\$1,886
	Sum of Medicare Payments for Target	*	\$4,741,603	\$4,791,622
Functional Impairment High	Periods with a Functional Impairment Level of High	*	2,920	3,485
	All periods	*	8,737	9,024
	Proportion/Rate of Target to Denominator Discharges	*	33.4%	38.6%
	Average Length of Stay for Target	*	26.0	26.1
	Average Medicare Payment for Target	*	\$2,107	\$2,099
	Sum of Medicare Payments for Target	*	\$6,152,845	\$7,316,053
Average Case Mix	Sum of case mix weight excl LUPA/PEP	5,135	7,014	6,976
	Count of Periods excl LUPA/PEP	4,865	6,253	6,217
	Proportion/Rate of Target to Denominator Discharges	1.06	1.12	1.12
Average Number of Periods	Count of periods	5,630	8,737	9,024
	Count of beneficiaries served	4,072	3,824	3,979
	Proportion/Rate of Target to Denominator Discharges	1.38	2.28	2.27
	Average Length of Stay for Target	40.9	25.8	25.6
	Average Medicare Payment for Target	\$3,023	\$1,884	\$1,861

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

16

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Average Number of Periods	Sum of Medicare Payments for Target	\$17,021,615	\$16,457,511	\$16,792,208
Periods with Low Visits	Periods with Low Visits	400	82	78
	All periods	5,630	8,737	9,024
	Proportion/Rate of Target to Denominator Discharges	7.1%	0.9%	0.9%
	Average Length of Stay for Target	24.2	24.0	24.8
	Average Outlier Payment Amount	\$1,490	\$2,565	\$2,603
	Sum of Medicare Payments for Target	\$596,050	\$210,305	\$203,041
Non-LUPA Payments	Periods w/o LUPA payment	4,984	6,642	6,261
	All periods	5,630	8,737	9,024
	Proportion/Rate of Target to Denominator Discharges	88.5%	76.0%	69.4%
	Average Length of Stay for Target	43.8	28.2	28.4
	Average Medicare Payment for Target	\$3,357	\$2,138	\$2,144
	Sum of Medicare Payments for Target	\$16,731,764	\$14,199,651	\$13,424,863
Outlier Payments	Dollar amt of outlier payments	\$235,424	\$246,674	\$149,885
	Dollar amt of total payments	\$17,021,615	\$16,457,511	\$16,792,208
	Proportion/Rate of Target to Denominator Discharges	1.4%	1.5%	0.9%
	Average Length of Stay for Target	57.8	29.7	29.7
	Average Medicare Payment for Target	\$998	\$508	\$450
Admission Source	Count of periods where admission source is Institutional	*	2,811	2,633
	All periods	*	8,737	9,024
	Proportion/Rate of Target to Denominator Discharges	*	32.2%	29.2%
	Average Length of Stay for Target	*	26.3	26.2
	Average Medicare Payment for Target	*	\$2,366	\$2,355
	Sum of Medicare Payments for Target	*	\$6,651,974	\$6,200,814

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

17

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area Summary - Delaware, 18 Agencies

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Low Comorbidity	Periods with a Low Comorbidity adjustment	*	12,048	12,196
	All periods	*	31,139	31,468
	Proportion/Rate of Target to Denominator Discharges	*	38.7%	38.8%
	Average Length of Stay for Target	*	25.2	25.0
	Average Medicare Payment for Target	*	\$2,023	\$2,047
	Sum of Medicare Payments for Target	*	\$24,378,357	\$24,971,088
High Comorbidity	Periods with a High Comorbidity adjustment	*	5,060	5,248
	All periods	*	31,139	31,468
	Proportion/Rate of Target to Denominator Discharges	*	16.2%	16.7%
	Average Length of Stay for Target	*	26.6	26.7
	Average Medicare Payment for Target	*	\$2,188	\$2,251
	Sum of Medicare Payments for Target	*	\$11,072,948	\$11,812,888
Functional Impairment Medium	Periods with a Functional Impairment Level of Medium	*	10,508	8,679
	All periods	*	31,139	31,468
	Proportion/Rate of Target to Denominator Discharges	*	33.7%	27.6%
	Average Length of Stay for Target	*	24.4	24.5
	Average Medicare Payment for Target	*	\$1,959	\$1,950
	Sum of Medicare Payments for Target	*	\$20,588,501	\$16,926,575
Functional Impairment High	Periods with a Functional Impairment Level of High	*	15,108	18,247
	All periods	*	31,139	31,468
	Proportion/Rate of Target to Denominator Discharges	*	48.5%	58.0%
	Average Length of Stay for Target	*	25.1	25.2
	Average Medicare Payment for Target	*	\$2,210	\$2,211
	Sum of Medicare Payments for Target	*	\$33,392,781	\$40,342,915
Average Case Mix	Sum of case mix weight excl LUPA/PEP	19,917	27,160	26,266
	Count of Periods excl LUPA/PEP	19,144	22,660	21,837
	Proportion/Rate of Target to Denominator Discharges	1.04	1.20	1.20
Average Number of Periods	Count of periods	22,161	31,139	31,468
	Count of beneficiaries served	16,034	14,551	14,777
	Proportion/Rate of Target to Denominator Discharges	1.38	2.14	2.13
	Average Length of Stay for Target	37.5	24.6	24.6
	Average Medicare Payment for Target	\$3,044	\$2,022	\$2,052

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

18

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Average Number of Periods	Sum of Medicare Payments for Target	\$67,449,053	\$62,976,790	\$64,582,230
Periods with Low Visits	Periods with Low Visits	2,122	902	892
	All periods	22,161	31,139	31,468
	Proportion/Rate of Target to Denominator Discharges	9.6%	2.9%	2.8%
	Average Length of Stay for Target	21.4	14.5	13.3
	Average Outlier Payment Amount	\$1,659	\$2,691	\$2,647
	Sum of Medicare Payments for Target	\$3,519,914	\$2,427,405	\$2,361,065
Non-LUPA Payments	Periods w/o LUPA payment	19,752	23,093	21,963
	All periods	22,161	31,139	31,468
	Proportion/Rate of Target to Denominator Discharges	89.1%	74.2%	69.8%
	Average Length of Stay for Target	39.6	26.9	26.7
	Average Medicare Payment for Target	\$3,355	\$2,331	\$2,352
	Sum of Medicare Payments for Target	\$66,259,897	\$53,836,533	\$51,663,571
Outlier Payments	Dollar amt of outlier payments	\$889,892	\$1,182,117	\$987,204
	Dollar amt of total payments	\$67,449,053	\$62,976,790	\$64,582,230
	Proportion/Rate of Target to Denominator Discharges	1.3%	1.9%	1.5%
	Average Length of Stay for Target	56.9	29.4	29.4
	Average Medicare Payment for Target	\$1,119	\$695	\$624
Admission Source	Count of periods where admission source is Institutional	*	13,083	12,294
	All periods	*	31,139	31,468
	Proportion/Rate of Target to Denominator Discharges	*	42.0%	39.1%
	Average Length of Stay for Target	*	24.9	25.3
	Average Medicare Payment for Target	*	\$2,465	\$2,536
	Sum of Medicare Payments for Target	*	\$32,251,274	\$31,171,593

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

19

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area Summary - Florida, 952 Agencies

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Low Comorbidity	Periods with a Low Comorbidity adjustment	*	282,938	277,172
	All periods	*	827,572	816,781
	Proportion/Rate of Target to Denominator Discharges	*	34.2%	33.9%
	Average Length of Stay for Target	*	26.1	26.0
	Average Medicare Payment for Target	*	\$1,762	\$1,770
	Sum of Medicare Payments for Target	*	\$498,674,933	\$490,639,997
High Comorbidity	Periods with a High Comorbidity adjustment	*	92,980	87,715
	All periods	*	827,572	816,781
	Proportion/Rate of Target to Denominator Discharges	*	11.2%	10.7%
	Average Length of Stay for Target	*	26.8	26.7
	Average Medicare Payment for Target	*	\$1,947	\$1,969
	Sum of Medicare Payments for Target	*	\$181,031,316	\$172,725,434
Functional Impairment Medium	Periods with a Functional Impairment Level of Medium	*	281,553	271,391
	All periods	*	827,572	816,781
	Proportion/Rate of Target to Denominator Discharges	*	34.0%	33.2%
	Average Length of Stay for Target	*	25.4	25.3
	Average Medicare Payment for Target	*	\$1,715	\$1,704
	Sum of Medicare Payments for Target	*	\$482,735,270	\$462,460,578
Functional Impairment High	Periods with a Functional Impairment Level of High	*	379,175	397,235
	All periods	*	827,572	816,781
	Proportion/Rate of Target to Denominator Discharges	*	45.8%	48.6%
	Average Length of Stay for Target	*	25.8	25.7
	Average Medicare Payment for Target	*	\$1,914	\$1,910
	Sum of Medicare Payments for Target	*	\$725,591,554	\$758,570,962
Average Case Mix	Sum of case mix weight excl LUPA/PEP	554,341	669,092	627,650
	Count of Periods excl LUPA/PEP	498,978	599,859	564,611
	Proportion/Rate of Target to Denominator Discharges	1.11	1.12	1.11
Average Number of Periods	Count of periods	558,960	827,572	816,781
	Count of beneficiaries served	350,921	317,430	314,524
	Proportion/Rate of Target to Denominator Discharges	1.59	2.61	2.60
	Average Length of Stay for Target	42.2	25.6	25.5
	Average Medicare Payment for Target	\$3,043	\$1,743	\$1,748

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

20

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Average Number of Periods	Sum of Medicare Payments for Target	\$1,700,694,815	\$1,442,404,313	\$1,427,697,385
Periods with Low Visits	Periods with Low Visits	34,447	8,614	8,395
	All periods	558,960	827,572	816,781
	Proportion/Rate of Target to Denominator Discharges	6.2%	1.0%	1.0%
	Average Length of Stay for Target	23.9	20.6	20.9
	Average Outlier Payment Amount	\$1,443	\$2,312	\$2,352
	Sum of Medicare Payments for Target	\$49,723,839	\$19,917,616	\$19,747,695
Non-LUPA Payments	Periods w/o LUPA payment	521,358	618,109	571,090
	All periods	558,960	827,572	816,781
	Proportion/Rate of Target to Denominator Discharges	93.3%	74.7%	69.9%
	Average Length of Stay for Target	43.8	27.5	27.6
	Average Medicare Payment for Target	\$3,231	\$1,965	\$1,968
	Sum of Medicare Payments for Target	\$1,684,678,701	\$1,214,436,508	\$1,123,826,785
Outlier Payments	Dollar amt of outlier payments	\$54,895,635	\$49,828,998	\$40,001,212
	Dollar amt of total payments	\$1,700,694,815	\$1,442,404,313	\$1,427,697,385
	Proportion/Rate of Target to Denominator Discharges	3.2%	3.5%	2.8%
	Average Length of Stay for Target	56.2	29.5	29.5
	Average Medicare Payment for Target	\$1,457	\$728	\$726
Admission Source	Count of periods where admission source is Institutional	*	211,612	198,026
	All periods	*	827,572	816,781
	Proportion/Rate of Target to Denominator Discharges	*	25.6%	24.2%
	Average Length of Stay for Target	*	25.0	25.1
	Average Medicare Payment for Target	*	\$2,246	\$2,260
	Sum of Medicare Payments for Target	*	\$475,219,872	\$447,606,466

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

21

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area Summary - Georgia, 103 Agencies

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Low Comorbidity	Periods with a Low Comorbidity adjustment	*	91,582	87,685
	All periods	*	230,443	223,263
	Proportion/Rate of Target to Denominator Discharges	*	39.7%	39.3%
	Average Length of Stay for Target	*	27.2	27.1
	Average Medicare Payment for Target	*	\$1,606	\$1,654
	Sum of Medicare Payments for Target	*	\$147,085,418	\$145,041,993
High Comorbidity	Periods with a High Comorbidity adjustment	*	34,057	31,834
	All periods	*	230,443	223,263
	Proportion/Rate of Target to Denominator Discharges	*	14.8%	14.3%
	Average Length of Stay for Target	*	27.8	27.8
	Average Medicare Payment for Target	*	\$1,780	\$1,843
	Sum of Medicare Payments for Target	*	\$60,609,782	\$58,672,201
Functional Impairment Medium	Periods with a Functional Impairment Level of Medium	*	68,802	64,816
	All periods	*	230,443	223,263
	Proportion/Rate of Target to Denominator Discharges	*	29.9%	29.0%
	Average Length of Stay for Target	*	26.8	26.7
	Average Medicare Payment for Target	*	\$1,585	\$1,604
	Sum of Medicare Payments for Target	*	\$109,078,792	\$103,958,394
Functional Impairment High	Periods with a Functional Impairment Level of High	*	109,639	115,220
	All periods	*	230,443	223,263
	Proportion/Rate of Target to Denominator Discharges	*	47.6%	51.6%
	Average Length of Stay for Target	*	27.0	27.0
	Average Medicare Payment for Target	*	\$1,786	\$1,817
	Sum of Medicare Payments for Target	*	\$195,810,185	\$209,384,107
Average Case Mix	Sum of case mix weight excl LUPA/PEP	139,731	173,092	160,525
	Count of Periods excl LUPA/PEP	129,429	153,184	142,219
	Proportion/Rate of Target to Denominator Discharges	1.08	1.13	1.13
Average Number of Periods	Count of periods	145,954	230,443	223,263
	Count of beneficiaries served	90,943	83,166	81,530
	Proportion/Rate of Target to Denominator Discharges	1.60	2.77	2.74
	Average Length of Stay for Target	46.5	26.9	26.8
	Average Medicare Payment for Target	\$2,783	\$1,614	\$1,654

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Average Number of Periods	Sum of Medicare Payments for Target	\$406,161,094	\$371,825,089	\$369,272,009
Periods with Low Visits	Periods with Low Visits	9,799	2,573	2,507
	All periods	145,954	230,443	223,263
	Proportion/Rate of Target to Denominator Discharges	6.7%	1.1%	1.1%
	Average Length of Stay for Target	31.8	24.4	25.1
	Average Outlier Payment Amount	\$1,393	\$2,308	\$2,357
	Sum of Medicare Payments for Target	\$13,651,358	\$5,937,768	\$5,908,739
Non-LUPA Payments	Periods w/o LUPA payment	132,713	155,989	143,128
	All periods	145,954	230,443	223,263
	Proportion/Rate of Target to Denominator Discharges	90.9%	67.7%	64.1%
	Average Length of Stay for Target	48.4	28.5	28.5
	Average Medicare Payment for Target	\$3,020	\$1,880	\$1,913
	Sum of Medicare Payments for Target	\$400,814,857	\$293,224,877	\$273,843,237
Outlier Payments	Dollar amt of outlier payments	\$2,217,191	\$3,142,133	\$2,334,530
	Dollar amt of total payments	\$406,161,094	\$371,825,089	\$369,272,009
	Proportion/Rate of Target to Denominator Discharges	0.5%	0.8%	0.6%
	Average Length of Stay for Target	57.6	29.7	29.8
	Average Medicare Payment for Target	\$972	\$449	\$436
Admission Source	Count of periods where admission source is Institutional	*	61,759	57,233
	All periods	*	230,443	223,263
	Proportion/Rate of Target to Denominator Discharges	*	26.8%	25.6%
	Average Length of Stay for Target	*	26.7	26.8
	Average Medicare Payment for Target	*	\$2,155	\$2,206
	Sum of Medicare Payments for Target	*	\$133,078,466	\$126,245,278

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

23

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area Summary - Guam, 4 Agencies

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Low Comorbidity	Periods with a Low Comorbidity adjustment	*	1,222	1,353
	All periods	*	3,305	3,597
	Proportion/Rate of Target to Denominator Discharges	*	37.0%	37.6%
	Average Length of Stay for Target	*	28.4	28.4
	Average Medicare Payment for Target	*	\$1,577	\$1,650
	Sum of Medicare Payments for Target	*	\$1,927,081	\$2,231,779
High Comorbidity	Periods with a High Comorbidity adjustment	*	473	443
	All periods	*	3,305	3,597
	Proportion/Rate of Target to Denominator Discharges	*	14.3%	12.3%
	Average Length of Stay for Target	*	28.4	28.4
	Average Medicare Payment for Target	*	\$1,910	\$1,968
	Sum of Medicare Payments for Target	*	\$903,653	\$871,661
Functional Impairment Medium	Periods with a Functional Impairment Level of Medium	*	677	760
	All periods	*	3,305	3,597
	Proportion/Rate of Target to Denominator Discharges	*	20.5%	21.1%
	Average Length of Stay for Target	*	28.7	28.6
	Average Medicare Payment for Target	*	\$1,617	\$1,671
	Sum of Medicare Payments for Target	*	\$1,095,038	\$1,269,649
Functional Impairment High	Periods with a Functional Impairment Level of High	*	1,662	1,873
	All periods	*	3,305	3,597
	Proportion/Rate of Target to Denominator Discharges	*	50.3%	52.1%
	Average Length of Stay for Target	*	28.5	28.5
	Average Medicare Payment for Target	*	\$1,814	\$1,855
	Sum of Medicare Payments for Target	*	\$3,015,447	\$3,473,496
Average Case Mix	Sum of case mix weight excl LUPA/PEP	1,379	2,026	2,080
	Count of Periods excl LUPA/PEP	1,583	2,001	2,032
	Proportion/Rate of Target to Denominator Discharges	0.87	1.01	1.02
Average Number of Periods	Count of periods	1,818	3,305	3,597
	Count of beneficiaries served	749	759	809
	Proportion/Rate of Target to Denominator Discharges	2.43	4.35	4.45
	Average Length of Stay for Target	54.2	28.5	28.5
	Average Medicare Payment for Target	\$2,649	\$1,611	\$1,669

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Average Number of Periods	Sum of Medicare Payments for Target	\$4,815,560	\$5,323,439	\$6,004,330
Periods with Low Visits	Periods with Low Visits	109	16	29
	All periods	1,818	3,305	3,597
	Proportion/Rate of Target to Denominator Discharges	6.0%	0.5%	0.8%
	Average Length of Stay for Target	38.2	27.8	26.8
	Average Outlier Payment Amount	\$1,541	\$2,505	\$2,593
	Sum of Medicare Payments for Target	\$167,946	\$40,087	\$75,209
Non-LUPA Payments	Periods w/o LUPA payment	1,700	2,177	2,164
	All periods	1,818	3,305	3,597
	Proportion/Rate of Target to Denominator Discharges	93.5%	65.9%	60.2%
	Average Length of Stay for Target	55.9	29.4	29.3
	Average Medicare Payment for Target	\$2,803	\$1,856	\$1,898
	Sum of Medicare Payments for Target	\$4,764,477	\$4,039,790	\$4,107,571
Outlier Payments	Dollar amt of outlier payments	\$115,570	\$59,749	\$37,329
	Dollar amt of total payments	\$4,815,560	\$5,323,439	\$6,004,331
	Proportion/Rate of Target to Denominator Discharges	2.4%	1.1%	0.6%
	Average Length of Stay for Target	58.9	29.5	29.8
	Average Medicare Payment for Target	\$862	\$543	\$518
Admission Source	Count of periods where admission source is Institutional	*	446	512
	All periods	*	3,305	3,597
	Proportion/Rate of Target to Denominator Discharges	*	13.5%	14.2%
	Average Length of Stay for Target	*	27.8	28.1
	Average Medicare Payment for Target	*	\$2,456	\$2,460
	Sum of Medicare Payments for Target	*	\$1,095,578	\$1,259,551

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

25

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area Summary - Hawaii, 14 Agencies

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Low Comorbidity	Periods with a Low Comorbidity adjustment	*	3,514	3,837
	All periods	*	8,790	9,642
	Proportion/Rate of Target to Denominator Discharges	*	40.0%	39.8%
	Average Length of Stay for Target	*	25.3	25.0
	Average Medicare Payment for Target	*	\$2,348	\$2,307
	Sum of Medicare Payments for Target	*	\$8,252,156	\$8,850,643
High Comorbidity	Periods with a High Comorbidity adjustment	*	1,580	1,813
	All periods	*	8,790	9,642
	Proportion/Rate of Target to Denominator Discharges	*	18.0%	18.8%
	Average Length of Stay for Target	*	26.2	26.8
	Average Medicare Payment for Target	*	\$2,477	\$2,560
	Sum of Medicare Payments for Target	*	\$3,914,265	\$4,640,838
Functional Impairment Medium	Periods with a Functional Impairment Level of Medium	*	2,393	2,513
	All periods	*	8,790	9,642
	Proportion/Rate of Target to Denominator Discharges	*	27.2%	26.1%
	Average Length of Stay for Target	*	24.7	24.5
	Average Medicare Payment for Target	*	\$2,258	\$2,241
	Sum of Medicare Payments for Target	*	\$5,402,932	\$5,630,675
Functional Impairment High	Periods with a Functional Impairment Level of High	*	4,570	5,297
	All periods	*	8,790	9,642
	Proportion/Rate of Target to Denominator Discharges	*	52.0%	54.9%
	Average Length of Stay for Target	*	25.8	25.7
	Average Medicare Payment for Target	*	\$2,523	\$2,523
	Sum of Medicare Payments for Target	*	\$11,528,660	\$13,362,060
Average Case Mix	Sum of case mix weight excl LUPA/PEP	4,988	7,631	7,736
	Count of Periods excl LUPA/PEP	4,485	6,218	6,390
	Proportion/Rate of Target to Denominator Discharges	1.11	1.23	1.21
Average Number of Periods	Count of periods	5,267	8,790	9,642
	Count of beneficiaries served	4,125	4,268	4,510
	Proportion/Rate of Target to Denominator Discharges	1.28	2.06	2.14
	Average Length of Stay for Target	37.7	25.1	25.0
	Average Medicare Payment for Target	\$3,660	\$2,326	\$2,332

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

26

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Average Number of Periods	Sum of Medicare Payments for Target	\$19,279,693	\$20,443,637	\$22,480,538
Periods with Low Visits	Periods with Low Visits	462	150	186
	All periods	5,267	8,790	9,642
	Proportion/Rate of Target to Denominator Discharges	8.8%	1.7%	1.9%
	Average Length of Stay for Target	25.8	23.3	24.6
	Average Outlier Payment Amount	\$1,838	\$3,062	\$3,063
	Sum of Medicare Payments for Target	\$849,294	\$459,304	\$569,696
Non-LUPA Payments	Periods w/o LUPA payment	4,589	6,321	6,411
	All periods	5,267	8,790	9,642
	Proportion/Rate of Target to Denominator Discharges	87.1%	71.9%	66.5%
	Average Length of Stay for Target	39.7	27.6	27.7
	Average Medicare Payment for Target	\$4,121	\$2,763	\$2,759
	Sum of Medicare Payments for Target	\$18,910,770	\$17,467,859	\$17,688,179
Outlier Payments	Dollar amt of outlier payments	\$175,607	\$378,878	\$308,966
	Dollar amt of total payments	\$19,279,693	\$20,443,637	\$22,480,538
	Proportion/Rate of Target to Denominator Discharges	0.9%	1.9%	1.4%
	Average Length of Stay for Target	57.5	29.6	29.6
	Average Medicare Payment for Target	\$1,104	\$723	\$690
Admission Source	Count of periods where admission source is Institutional	*	3,111	2,839
	All periods	*	8,790	9,642
	Proportion/Rate of Target to Denominator Discharges	*	35.4%	29.4%
	Average Length of Stay for Target	*	26.3	26.4
	Average Medicare Payment for Target	*	\$2,922	\$3,000
	Sum of Medicare Payments for Target	*	\$9,089,637	\$8,518,391

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

27

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area Summary - Iowa, 140 Agencies

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Low Comorbidity	Periods with a Low Comorbidity adjustment	*	20,253	21,460
	All periods	*	51,807	54,285
	Proportion/Rate of Target to Denominator Discharges	*	39.1%	39.5%
	Average Length of Stay for Target	*	25.3	25.2
	Average Medicare Payment for Target	*	\$1,694	\$1,698
	Sum of Medicare Payments for Target	*	\$34,311,543	\$36,429,367
High Comorbidity	Periods with a High Comorbidity adjustment	*	7,631	7,811
	All periods	*	51,807	54,285
	Proportion/Rate of Target to Denominator Discharges	*	14.7%	14.4%
	Average Length of Stay for Target	*	26.3	26.4
	Average Medicare Payment for Target	*	\$1,877	\$1,839
	Sum of Medicare Payments for Target	*	\$14,321,587	\$14,363,452
Functional Impairment Medium	Periods with a Functional Impairment Level of Medium	*	17,208	18,189
	All periods	*	51,807	54,285
	Proportion/Rate of Target to Denominator Discharges	*	33.2%	33.5%
	Average Length of Stay for Target	*	25.0	24.9
	Average Medicare Payment for Target	*	\$1,728	\$1,695
	Sum of Medicare Payments for Target	*	\$29,741,437	\$30,827,209
Functional Impairment High	Periods with a Functional Impairment Level of High	*	18,353	19,778
	All periods	*	51,807	54,285
	Proportion/Rate of Target to Denominator Discharges	*	35.4%	36.4%
	Average Length of Stay for Target	*	25.2	25.2
	Average Medicare Payment for Target	*	\$1,927	\$1,910
	Sum of Medicare Payments for Target	*	\$35,357,587	\$37,783,550
Average Case Mix	Sum of case mix weight excl LUPA/PEP	29,252	42,564	41,790
	Count of Periods excl LUPA/PEP	28,903	37,525	37,231
	Proportion/Rate of Target to Denominator Discharges	1.01	1.13	1.12
Average Number of Periods	Count of periods	32,978	51,807	54,285
	Count of beneficiaries served	23,210	22,876	23,721
	Proportion/Rate of Target to Denominator Discharges	1.42	2.26	2.29
	Average Length of Stay for Target	39.5	25.2	25.1
	Average Medicare Payment for Target	\$2,677	\$1,700	\$1,683

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Average Number of Periods	Sum of Medicare Payments for Target	\$88,266,533	\$88,063,896	\$91,372,830
Periods with Low Visits	Periods with Low Visits	2,504	521	534
	All periods	32,978	51,807	54,285
	Proportion/Rate of Target to Denominator Discharges	7.6%	1.0%	1.0%
	Average Length of Stay for Target	25.3	21.2	20.0
	Average Outlier Payment Amount	\$1,425	\$2,328	\$2,348
	Sum of Medicare Payments for Target	\$3,567,607	\$1,213,040	\$1,254,019
Non-LUPA Payments	Periods w/o LUPA payment	29,727	38,248	37,465
	All periods	32,978	51,807	54,285
	Proportion/Rate of Target to Denominator Discharges	90.1%	73.8%	69.0%
	Average Length of Stay for Target	41.4	27.3	27.3
	Average Medicare Payment for Target	\$2,924	\$1,959	\$1,934
	Sum of Medicare Payments for Target	\$86,914,532	\$74,933,142	\$72,450,986
Outlier Payments	Dollar amt of outlier payments	\$1,343,511	\$1,905,537	\$1,587,820
	Dollar amt of total payments	\$88,266,533	\$88,063,896	\$91,372,830
	Proportion/Rate of Target to Denominator Discharges	1.5%	2.2%	1.7%
	Average Length of Stay for Target	56.7	29.4	29.5
	Average Medicare Payment for Target	\$928	\$530	\$486
Admission Source	Count of periods where admission source is Institutional	*	17,802	16,994
	All periods	*	51,807	54,285
	Proportion/Rate of Target to Denominator Discharges	*	34.4%	31.3%
	Average Length of Stay for Target	*	25.2	25.4
	Average Medicare Payment for Target	*	\$2,211	\$2,221
	Sum of Medicare Payments for Target	*	\$39,364,464	\$37,745,353

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

29

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area Summary - Idaho, 54 Agencies

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Low Comorbidity	Periods with a Low Comorbidity adjustment	*	13,607	14,110
	All periods	*	39,230	39,862
	Proportion/Rate of Target to Denominator Discharges	*	34.7%	35.4%
	Average Length of Stay for Target	*	26.1	26.4
	Average Medicare Payment for Target	*	\$1,711	\$1,733
	Sum of Medicare Payments for Target	*	\$23,278,295	\$24,450,821
High Comorbidity	Periods with a High Comorbidity adjustment	*	5,049	5,168
	All periods	*	39,230	39,862
	Proportion/Rate of Target to Denominator Discharges	*	12.9%	13.0%
	Average Length of Stay for Target	*	27.0	27.0
	Average Medicare Payment for Target	*	\$1,883	\$1,906
	Sum of Medicare Payments for Target	*	\$9,508,735	\$9,850,024
Functional Impairment Medium	Periods with a Functional Impairment Level of Medium	*	13,297	12,526
	All periods	*	39,230	39,862
	Proportion/Rate of Target to Denominator Discharges	*	33.9%	31.4%
	Average Length of Stay for Target	*	25.7	25.8
	Average Medicare Payment for Target	*	\$1,764	\$1,743
	Sum of Medicare Payments for Target	*	\$23,453,376	\$21,827,524
Functional Impairment High	Periods with a Functional Impairment Level of High	*	12,125	14,680
	All periods	*	39,230	39,862
	Proportion/Rate of Target to Denominator Discharges	*	30.9%	36.8%
	Average Length of Stay for Target	*	26.1	26.4
	Average Medicare Payment for Target	*	\$1,910	\$1,912
	Sum of Medicare Payments for Target	*	\$23,152,926	\$28,064,692
Average Case Mix	Sum of case mix weight excl LUPA/PEP	25,611	30,587	29,106
	Count of Periods excl LUPA/PEP	22,866	28,096	26,687
	Proportion/Rate of Target to Denominator Discharges	1.12	1.09	1.09
Average Number of Periods	Count of periods	25,608	39,230	39,862
	Count of beneficiaries served	16,618	15,600	15,837
	Proportion/Rate of Target to Denominator Discharges	1.54	2.51	2.52
	Average Length of Stay for Target	43.5	25.9	26.0
	Average Medicare Payment for Target	\$3,048	\$1,699	\$1,711

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

30

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Average Number of Periods	Sum of Medicare Payments for Target	\$78,059,054	\$66,651,693	\$68,208,555
Periods with Low Visits	Periods with Low Visits	1,634	457	451
	All periods	25,608	39,230	39,862
	Proportion/Rate of Target to Denominator Discharges	6.4%	1.2%	1.1%
	Average Length of Stay for Target	27.1	24.6	23.6
	Average Outlier Payment Amount	\$1,353	\$2,297	\$2,309
	Sum of Medicare Payments for Target	\$2,211,130	\$1,049,871	\$1,041,495
Non-LUPA Payments	Periods w/o LUPA payment	23,491	28,785	26,828
	All periods	25,608	39,230	39,862
	Proportion/Rate of Target to Denominator Discharges	91.7%	73.4%	67.3%
	Average Length of Stay for Target	45.2	27.7	27.9
	Average Medicare Payment for Target	\$3,284	\$1,929	\$1,936
	Sum of Medicare Payments for Target	\$77,153,204	\$55,527,877	\$51,936,814
Outlier Payments	Dollar amt of outlier payments	\$2,874,415	\$2,571,287	\$2,065,152
	Dollar amt of total payments	\$78,059,054	\$66,651,693	\$68,208,555
	Proportion/Rate of Target to Denominator Discharges	3.7%	3.9%	3.0%
	Average Length of Stay for Target	56.4	29.6	29.5
	Average Medicare Payment for Target	\$1,816	\$813	\$881
Admission Source	Count of periods where admission source is Institutional	*	10,011	9,503
	All periods	*	39,230	39,862
	Proportion/Rate of Target to Denominator Discharges	*	25.5%	23.8%
	Average Length of Stay for Target	*	25.6	25.8
	Average Medicare Payment for Target	*	\$2,240	\$2,271
	Sum of Medicare Payments for Target	*	\$22,424,299	\$21,584,509

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

31

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area Summary - Illinois, 609 Agencies

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Low Comorbidity	Periods with a Low Comorbidity adjustment	*	153,227	152,585
	All periods	*	401,396	399,514
	Proportion/Rate of Target to Denominator Discharges	*	38.2%	38.2%
	Average Length of Stay for Target	*	26.7	26.6
	Average Medicare Payment for Target	*	\$1,800	\$1,844
	Sum of Medicare Payments for Target	*	\$275,855,880	\$281,396,660
High Comorbidity	Periods with a High Comorbidity adjustment	*	59,943	58,086
	All periods	*	401,396	399,514
	Proportion/Rate of Target to Denominator Discharges	*	14.9%	14.5%
	Average Length of Stay for Target	*	27.3	27.3
	Average Medicare Payment for Target	*	\$1,987	\$2,039
	Sum of Medicare Payments for Target	*	\$119,135,640	\$118,455,356
Functional Impairment Medium	Periods with a Functional Impairment Level of Medium	*	127,665	125,579
	All periods	*	401,396	399,514
	Proportion/Rate of Target to Denominator Discharges	*	31.8%	31.4%
	Average Length of Stay for Target	*	26.3	26.2
	Average Medicare Payment for Target	*	\$1,814	\$1,833
	Sum of Medicare Payments for Target	*	\$231,542,493	\$230,159,879
Functional Impairment High	Periods with a Functional Impairment Level of High	*	153,761	165,274
	All periods	*	401,396	399,514
	Proportion/Rate of Target to Denominator Discharges	*	38.3%	41.4%
	Average Length of Stay for Target	*	26.3	26.2
	Average Medicare Payment for Target	*	\$2,035	\$2,075
	Sum of Medicare Payments for Target	*	\$312,921,415	\$342,957,911
Average Case Mix	Sum of case mix weight excl LUPA/PEP	245,633	285,199	277,410
	Count of Periods excl LUPA/PEP	248,103	257,504	251,455
	Proportion/Rate of Target to Denominator Discharges	0.99	1.11	1.10
Average Number of Periods	Count of periods	275,170	401,396	399,514
	Count of beneficiaries served	161,159	142,314	142,194
	Proportion/Rate of Target to Denominator Discharges	1.71	2.82	2.81
	Average Length of Stay for Target	45.6	26.5	26.4
	Average Medicare Payment for Target	\$2,920	\$1,794	\$1,838

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

32

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Average Number of Periods	Sum of Medicare Payments for Target	\$803,615,023	\$720,064,314	\$734,360,800
Periods with Low Visits	Periods with Low Visits	16,577	7,083	6,453
	All periods	275,170	401,396	399,514
	Proportion/Rate of Target to Denominator Discharges	6.0%	1.8%	1.6%
	Average Length of Stay for Target	27.8	25.4	25.3
	Average Outlier Payment Amount	\$1,530	\$2,445	\$2,508
	Sum of Medicare Payments for Target	\$25,356,201	\$17,317,038	\$16,180,994
Non-LUPA Payments	Periods w/o LUPA payment	254,204	266,653	252,840
	All periods	275,170	401,396	399,514
	Proportion/Rate of Target to Denominator Discharges	92.4%	66.4%	63.3%
	Average Length of Stay for Target	47.4	27.9	27.9
	Average Medicare Payment for Target	\$3,123	\$2,065	\$2,096
	Sum of Medicare Payments for Target	\$793,922,232	\$550,551,682	\$529,966,305
Outlier Payments	Dollar amt of outlier payments	\$5,868,576	\$7,550,924	\$6,220,581
	Dollar amt of total payments	\$803,615,023	\$720,064,314	\$734,360,801
	Proportion/Rate of Target to Denominator Discharges	0.7%	1.0%	0.8%
	Average Length of Stay for Target	56.6	29.5	29.5
	Average Medicare Payment for Target	\$837	\$523	\$498
Admission Source	Count of periods where admission source is Institutional	*	103,270	100,223
	All periods	*	401,396	399,514
	Proportion/Rate of Target to Denominator Discharges	*	25.7%	25.1%
	Average Length of Stay for Target	*	25.3	25.2
	Average Medicare Payment for Target	*	\$2,411	\$2,462
	Sum of Medicare Payments for Target	*	\$249,016,344	\$246,795,817

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

33

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area Summary - Indiana, 193 Agencies

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Low Comorbidity	Periods with a Low Comorbidity adjustment	*	59,457	57,692
	All periods	*	147,369	142,575
	Proportion/Rate of Target to Denominator Discharges	*	40.3%	40.5%
	Average Length of Stay for Target	*	26.6	26.5
	Average Medicare Payment for Target	*	\$1,737	\$1,766
	Sum of Medicare Payments for Target	*	\$103,300,854	\$101,885,302
High Comorbidity	Periods with a High Comorbidity adjustment	*	24,778	24,059
	All periods	*	147,369	142,575
	Proportion/Rate of Target to Denominator Discharges	*	16.8%	16.9%
	Average Length of Stay for Target	*	27.4	27.3
	Average Medicare Payment for Target	*	\$1,917	\$1,952
	Sum of Medicare Payments for Target	*	\$47,507,750	\$46,955,780
Functional Impairment Medium	Periods with a Functional Impairment Level of Medium	*	47,191	43,989
	All periods	*	147,369	142,575
	Proportion/Rate of Target to Denominator Discharges	*	32.0%	30.9%
	Average Length of Stay for Target	*	26.3	26.2
	Average Medicare Payment for Target	*	\$1,761	\$1,769
	Sum of Medicare Payments for Target	*	\$83,121,207	\$77,829,496
Functional Impairment High	Periods with a Functional Impairment Level of High	*	56,963	60,477
	All periods	*	147,369	142,575
	Proportion/Rate of Target to Denominator Discharges	*	38.7%	42.4%
	Average Length of Stay for Target	*	26.4	26.4
	Average Medicare Payment for Target	*	\$1,950	\$1,974
	Sum of Medicare Payments for Target	*	\$111,081,161	\$119,381,048
Average Case Mix	Sum of case mix weight excl LUPA/PEP	93,985	115,237	105,599
	Count of Periods excl LUPA/PEP	87,025	102,544	93,991
	Proportion/Rate of Target to Denominator Discharges	1.08	1.12	1.12
Average Number of Periods	Count of periods	98,190	147,369	142,575
	Count of beneficiaries served	63,500	57,998	56,240
	Proportion/Rate of Target to Denominator Discharges	1.55	2.54	2.54
	Average Length of Stay for Target	44.7	26.4	26.3
	Average Medicare Payment for Target	\$2,973	\$1,743	\$1,770

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

34

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Average Number of Periods	Sum of Medicare Payments for Target	\$291,880,277	\$256,904,925	\$252,333,738
Periods with Low Visits	Periods with Low Visits	6,350	1,805	1,703
	All periods	98,190	147,369	142,575
	Proportion/Rate of Target to Denominator Discharges	6.5%	1.2%	1.2%
	Average Length of Stay for Target	29.3	23.0	23.6
	Average Outlier Payment Amount	\$1,430	\$2,417	\$2,467
	Sum of Medicare Payments for Target	\$9,079,448	\$4,363,432	\$4,200,527
Non-LUPA Payments	Periods w/o LUPA payment	89,217	104,103	94,476
	All periods	98,190	147,369	142,575
	Proportion/Rate of Target to Denominator Discharges	90.9%	70.6%	66.3%
	Average Length of Stay for Target	46.6	28.0	28.1
	Average Medicare Payment for Target	\$3,228	\$2,012	\$2,028
	Sum of Medicare Payments for Target	\$288,030,372	\$209,493,889	\$191,552,042
Outlier Payments	Dollar amt of outlier payments	\$3,383,485	\$4,440,926	\$2,953,049
	Dollar amt of total payments	\$291,880,277	\$256,904,925	\$252,333,738
	Proportion/Rate of Target to Denominator Discharges	1.2%	1.7%	1.2%
	Average Length of Stay for Target	57.5	29.5	29.5
	Average Medicare Payment for Target	\$850	\$554	\$522
Admission Source	Count of periods where admission source is Institutional	*	42,998	39,493
	All periods	*	147,369	142,575
	Proportion/Rate of Target to Denominator Discharges	*	29.2%	27.7%
	Average Length of Stay for Target	*	26.2	26.4
	Average Medicare Payment for Target	*	\$2,294	\$2,342
	Sum of Medicare Payments for Target	*	\$98,635,813	\$92,500,067

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

35

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area Summary - Kansas, 113 Agencies

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Low Comorbidity	Periods with a Low Comorbidity adjustment	*	33,355	35,830
	All periods	*	86,439	93,564
	Proportion/Rate of Target to Denominator Discharges	*	38.6%	38.3%
	Average Length of Stay for Target	*	27.0	27.0
	Average Medicare Payment for Target	*	\$1,649	\$1,635
	Sum of Medicare Payments for Target	*	\$55,002,078	\$58,595,427
High Comorbidity	Periods with a High Comorbidity adjustment	*	12,406	12,771
	All periods	*	86,439	93,564
	Proportion/Rate of Target to Denominator Discharges	*	14.4%	13.6%
	Average Length of Stay for Target	*	27.6	27.5
	Average Medicare Payment for Target	*	\$1,818	\$1,831
	Sum of Medicare Payments for Target	*	\$22,555,141	\$23,387,628
Functional Impairment Medium	Periods with a Functional Impairment Level of Medium	*	26,860	29,378
	All periods	*	86,439	93,564
	Proportion/Rate of Target to Denominator Discharges	*	31.1%	31.4%
	Average Length of Stay for Target	*	26.7	26.7
	Average Medicare Payment for Target	*	\$1,642	\$1,628
	Sum of Medicare Payments for Target	*	\$44,098,161	\$47,839,968
Functional Impairment High	Periods with a Functional Impairment Level of High	*	35,764	39,590
	All periods	*	86,439	93,564
	Proportion/Rate of Target to Denominator Discharges	*	41.4%	42.3%
	Average Length of Stay for Target	*	26.6	26.6
	Average Medicare Payment for Target	*	\$1,868	\$1,841
	Sum of Medicare Payments for Target	*	\$66,789,552	\$72,890,150
Average Case Mix	Sum of case mix weight excl LUPA/PEP	49,763	68,600	68,047
	Count of Periods excl LUPA/PEP	46,085	62,165	62,445
	Proportion/Rate of Target to Denominator Discharges	1.08	1.10	1.09
Average Number of Periods	Count of periods	51,579	86,439	93,564
	Count of beneficiaries served	32,579	31,866	33,611
	Proportion/Rate of Target to Denominator Discharges	1.58	2.71	2.78
	Average Length of Stay for Target	44.9	26.7	26.7
	Average Medicare Payment for Target	\$2,835	\$1,649	\$1,634

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

36

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Average Number of Periods	Sum of Medicare Payments for Target	\$146,231,661	\$142,504,919	\$152,929,411
Periods with Low Visits	Periods with Low Visits	3,112	734	732
	All periods	51,579	86,439	93,564
	Proportion/Rate of Target to Denominator Discharges	6.0%	0.8%	0.8%
	Average Length of Stay for Target	28.1	22.4	22.8
	Average Outlier Payment Amount	\$1,317	\$2,322	\$2,321
	Sum of Medicare Payments for Target	\$4,097,869	\$1,704,224	\$1,699,210
Non-LUPA Payments	Periods w/o LUPA payment	47,363	63,099	62,790
	All periods	51,579	86,439	93,564
	Proportion/Rate of Target to Denominator Discharges	91.8%	73.0%	67.1%
	Average Length of Stay for Target	46.6	28.2	28.3
	Average Medicare Payment for Target	\$3,050	\$1,872	\$1,856
	Sum of Medicare Payments for Target	\$144,470,001	\$118,116,447	\$116,531,789
Outlier Payments	Dollar amt of outlier payments	\$2,392,935	\$3,439,337	\$2,766,857
	Dollar amt of total payments	\$146,231,661	\$142,504,919	\$152,929,411
	Proportion/Rate of Target to Denominator Discharges	1.6%	2.4%	1.8%
	Average Length of Stay for Target	57.2	29.6	29.6
	Average Medicare Payment for Target	\$934	\$539	\$504
Admission Source	Count of periods where admission source is Institutional	*	23,556	23,090
	All periods	*	86,439	93,564
	Proportion/Rate of Target to Denominator Discharges	*	27.3%	24.7%
	Average Length of Stay for Target	*	26.3	26.4
	Average Medicare Payment for Target	*	\$2,238	\$2,243
	Sum of Medicare Payments for Target	*	\$52,728,088	\$51,787,006

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

37

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area Summary - Kentucky, 97 Agencies

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Low Comorbidity	Periods with a Low Comorbidity adjustment	*	58,600	54,883
	All periods	*	148,518	137,644
	Proportion/Rate of Target to Denominator Discharges	*	39.5%	39.9%
	Average Length of Stay for Target	*	27.2	27.1
	Average Medicare Payment for Target	*	\$1,558	\$1,596
	Sum of Medicare Payments for Target	*	\$91,278,269	\$87,599,654
High Comorbidity	Periods with a High Comorbidity adjustment	*	23,252	22,206
	All periods	*	148,518	137,644
	Proportion/Rate of Target to Denominator Discharges	*	15.7%	16.1%
	Average Length of Stay for Target	*	27.9	27.7
	Average Medicare Payment for Target	*	\$1,737	\$1,773
	Sum of Medicare Payments for Target	*	\$40,388,558	\$39,375,540
Functional Impairment Medium	Periods with a Functional Impairment Level of Medium	*	47,506	43,327
	All periods	*	148,518	137,644
	Proportion/Rate of Target to Denominator Discharges	*	32.0%	31.5%
	Average Length of Stay for Target	*	27.0	26.8
	Average Medicare Payment for Target	*	\$1,533	\$1,553
	Sum of Medicare Payments for Target	*	\$72,841,037	\$67,282,973
Functional Impairment High	Periods with a Functional Impairment Level of High	*	67,973	66,827
	All periods	*	148,518	137,644
	Proportion/Rate of Target to Denominator Discharges	*	45.8%	48.6%
	Average Length of Stay for Target	*	27.0	26.9
	Average Medicare Payment for Target	*	\$1,749	\$1,776
	Sum of Medicare Payments for Target	*	\$118,867,002	\$118,659,298
Average Case Mix	Sum of case mix weight excl LUPA/PEP	93,657	108,731	96,447
	Count of Periods excl LUPA/PEP	88,412	97,898	86,493
	Proportion/Rate of Target to Denominator Discharges	1.06	1.11	1.12
Average Number of Periods	Count of periods	101,023	148,518	137,644
	Count of beneficiaries served	58,297	50,695	48,330
	Proportion/Rate of Target to Denominator Discharges	1.73	2.93	2.85
	Average Length of Stay for Target	46.5	26.9	26.8
	Average Medicare Payment for Target	\$2,652	\$1,568	\$1,601

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

38

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Average Number of Periods	Sum of Medicare Payments for Target	\$267,902,554	\$232,804,578	\$220,303,653
Periods with Low Visits	Periods with Low Visits	7,528	1,755	1,774
	All periods	101,023	148,518	137,644
	Proportion/Rate of Target to Denominator Discharges	7.5%	1.2%	1.3%
	Average Length of Stay for Target	32.1	23.3	23.3
	Average Outlier Payment Amount	\$1,309	\$2,283	\$2,308
	Sum of Medicare Payments for Target	\$9,853,185	\$4,006,756	\$4,095,097
Non-LUPA Payments	Periods w/o LUPA payment	90,778	99,105	86,971
	All periods	101,023	148,518	137,644
	Proportion/Rate of Target to Denominator Discharges	89.9%	66.7%	63.2%
	Average Length of Stay for Target	48.4	28.4	28.4
	Average Medicare Payment for Target	\$2,907	\$1,826	\$1,852
	Sum of Medicare Payments for Target	\$263,892,235	\$180,967,899	\$161,055,925
Outlier Payments	Dollar amt of outlier payments	\$1,185,458	\$1,717,425	\$1,190,274
	Dollar amt of total payments	\$267,902,554	\$232,804,578	\$220,303,653
	Proportion/Rate of Target to Denominator Discharges	0.4%	0.7%	0.5%
	Average Length of Stay for Target	57.2	29.6	29.6
	Average Medicare Payment for Target	\$755	\$454	\$426
Admission Source	Count of periods where admission source is Institutional	*	37,247	33,971
	All periods	*	148,518	137,644
	Proportion/Rate of Target to Denominator Discharges	*	25.1%	24.7%
	Average Length of Stay for Target	*	26.4	26.5
	Average Medicare Payment for Target	*	\$2,140	\$2,183
	Sum of Medicare Payments for Target	*	\$79,703,388	\$74,157,315

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

39

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area Summary - Louisiana, 187 Agencies

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Low Comorbidity	Periods with a Low Comorbidity adjustment	*	91,775	84,859
	All periods	*	236,152	216,466
	Proportion/Rate of Target to Denominator Discharges	*	38.9%	39.2%
	Average Length of Stay for Target	*	28.5	28.3
	Average Medicare Payment for Target	*	\$1,379	\$1,411
	Sum of Medicare Payments for Target	*	\$126,557,406	\$119,707,180
High Comorbidity	Periods with a High Comorbidity adjustment	*	32,496	29,596
	All periods	*	236,152	216,466
	Proportion/Rate of Target to Denominator Discharges	*	13.8%	13.7%
	Average Length of Stay for Target	*	28.5	28.4
	Average Medicare Payment for Target	*	\$1,591	\$1,631
	Sum of Medicare Payments for Target	*	\$51,687,409	\$48,260,647
Functional Impairment Medium	Periods with a Functional Impairment Level of Medium	*	75,257	71,382
	All periods	*	236,152	216,466
	Proportion/Rate of Target to Denominator Discharges	*	31.9%	33.0%
	Average Length of Stay for Target	*	28.3	28.2
	Average Medicare Payment for Target	*	\$1,359	\$1,375
	Sum of Medicare Payments for Target	*	\$102,257,948	\$98,185,049
Functional Impairment High	Periods with a Functional Impairment Level of High	*	98,232	94,562
	All periods	*	236,152	216,466
	Proportion/Rate of Target to Denominator Discharges	*	41.6%	43.7%
	Average Length of Stay for Target	*	28.0	27.9
	Average Medicare Payment for Target	*	\$1,587	\$1,609
	Sum of Medicare Payments for Target	*	\$155,884,575	\$152,124,447
Average Case Mix	Sum of case mix weight excl LUPA/PEP	124,678	136,291	119,479
	Count of Periods excl LUPA/PEP	134,225	130,012	113,917
	Proportion/Rate of Target to Denominator Discharges	0.93	1.05	1.05
Average Number of Periods	Count of periods	146,435	236,152	216,466
	Count of beneficiaries served	64,544	58,804	54,994
	Proportion/Rate of Target to Denominator Discharges	2.27	4.02	3.94
	Average Length of Stay for Target	52.8	28.3	28.1
	Average Medicare Payment for Target	\$2,295	\$1,376	\$1,410

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

40

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Average Number of Periods	Sum of Medicare Payments for Target	\$336,083,299	\$324,986,500	\$305,232,251
Periods with Low Visits	Periods with Low Visits	11,846	2,000	1,555
	All periods	146,435	236,152	216,466
	Proportion/Rate of Target to Denominator Discharges	8.1%	0.8%	0.7%
	Average Length of Stay for Target	46.9	26.5	26.3
	Average Outlier Payment Amount	\$1,326	\$2,053	\$2,103
	Sum of Medicare Payments for Target	\$15,709,557	\$4,105,073	\$3,269,902
Non-LUPA Payments	Periods w/o LUPA payment	136,554	131,974	114,805
	All periods	146,435	236,152	216,466
	Proportion/Rate of Target to Denominator Discharges	93.3%	55.9%	53.0%
	Average Length of Stay for Target	54.3	28.9	28.9
	Average Medicare Payment for Target	\$2,435	\$1,613	\$1,640
	Sum of Medicare Payments for Target	\$332,462,388	\$212,854,118	\$188,244,680
Outlier Payments	Dollar amt of outlier payments	\$1,644,489	\$1,354,881	\$1,018,741
	Dollar amt of total payments	\$336,083,299	\$324,986,500	\$305,232,251
	Proportion/Rate of Target to Denominator Discharges	0.5%	0.4%	0.3%
	Average Length of Stay for Target	58.2	29.8	29.7
	Average Medicare Payment for Target	\$906	\$417	\$407
Admission Source	Count of periods where admission source is Institutional	*	37,066	32,832
	All periods	*	236,152	216,466
	Proportion/Rate of Target to Denominator Discharges	*	15.7%	15.2%
	Average Length of Stay for Target	*	26.9	26.9
	Average Medicare Payment for Target	*	\$2,031	\$2,070
	Sum of Medicare Payments for Target	*	\$75,279,342	\$67,970,938

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

41

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area Summary - Massachusetts, 210 Agencies

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Low Comorbidity	Periods with a Low Comorbidity adjustment	*	102,682	105,498
	All periods	*	274,415	280,327
	Proportion/Rate of Target to Denominator Discharges	*	37.4%	37.6%
	Average Length of Stay for Target	*	26.2	26.0
	Average Medicare Payment for Target	*	\$2,044	\$2,083
	Sum of Medicare Payments for Target	*	\$209,848,113	\$219,703,874
High Comorbidity	Periods with a High Comorbidity adjustment	*	36,840	37,177
	All periods	*	274,415	280,327
	Proportion/Rate of Target to Denominator Discharges	*	13.4%	13.3%
	Average Length of Stay for Target	*	27.2	27.0
	Average Medicare Payment for Target	*	\$2,266	\$2,306
	Sum of Medicare Payments for Target	*	\$83,482,089	\$85,747,882
Functional Impairment Medium	Periods with a Functional Impairment Level of Medium	*	86,223	87,676
	All periods	*	274,415	280,327
	Proportion/Rate of Target to Denominator Discharges	*	31.4%	31.3%
	Average Length of Stay for Target	*	25.8	25.5
	Average Medicare Payment for Target	*	\$2,028	\$2,028
	Sum of Medicare Payments for Target	*	\$174,887,442	\$177,778,592
Functional Impairment High	Periods with a Functional Impairment Level of High	*	117,943	133,643
	All periods	*	274,415	280,327
	Proportion/Rate of Target to Denominator Discharges	*	43.0%	47.7%
	Average Length of Stay for Target	*	25.9	25.8
	Average Medicare Payment for Target	*	\$2,287	\$2,299
	Sum of Medicare Payments for Target	*	\$269,715,068	\$307,189,808
Average Case Mix	Sum of case mix weight excl LUPA/PEP	168,898	216,805	212,375
	Count of Periods excl LUPA/PEP	165,090	192,287	185,817
	Proportion/Rate of Target to Denominator Discharges	1.02	1.13	1.14
Average Number of Periods	Count of periods	190,989	274,415	280,327
	Count of beneficiaries served	122,954	109,869	116,176
	Proportion/Rate of Target to Denominator Discharges	1.55	2.50	2.41
	Average Length of Stay for Target	42.3	25.9	25.6
	Average Medicare Payment for Target	\$3,247	\$2,040	\$2,070

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Average Number of Periods	Sum of Medicare Payments for Target	\$620,174,818	\$559,687,154	\$580,383,064
Periods with Low Visits	Periods with Low Visits	14,583	3,812	4,183
	All periods	190,989	274,415	280,327
	Proportion/Rate of Target to Denominator Discharges	7.6%	1.4%	1.5%
	Average Length of Stay for Target	25.5	23.0	23.0
	Average Outlier Payment Amount	\$1,681	\$2,816	\$2,828
	Sum of Medicare Payments for Target	\$24,510,314	\$10,735,063	\$11,830,162
Non-LUPA Payments	Periods w/o LUPA payment	170,619	195,705	186,934
	All periods	190,989	274,415	280,327
	Proportion/Rate of Target to Denominator Discharges	89.3%	71.3%	66.7%
	Average Length of Stay for Target	44.8	28.0	27.9
	Average Medicare Payment for Target	\$3,574	\$2,367	\$2,397
	Sum of Medicare Payments for Target	\$609,709,581	\$463,198,067	\$448,139,365
Outlier Payments	Dollar amt of outlier payments	\$10,698,438	\$10,525,135	\$7,672,981
	Dollar amt of total payments	\$620,174,818	\$559,687,154	\$580,383,064
	Proportion/Rate of Target to Denominator Discharges	1.7%	1.9%	1.3%
	Average Length of Stay for Target	57.7	29.7	29.7
	Average Medicare Payment for Target	\$1,144	\$690	\$637
Admission Source	Count of periods where admission source is Institutional	*	90,132	93,000
	All periods	*	274,415	280,327
	Proportion/Rate of Target to Denominator Discharges	*	32.8%	33.2%
	Average Length of Stay for Target	*	26.2	26.0
	Average Medicare Payment for Target	*	\$2,676	\$2,686
	Sum of Medicare Payments for Target	*	\$241,149,876	\$249,797,573

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

43

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area Summary - Maryland, 53 Agencies

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Low Comorbidity	Periods with a Low Comorbidity adjustment	*	60,348	62,920
	All periods	*	161,325	167,556
	Proportion/Rate of Target to Denominator Discharges	*	37.4%	37.6%
	Average Length of Stay for Target	*	25.7	25.7
	Average Medicare Payment for Target	*	\$1,870	\$1,882
	Sum of Medicare Payments for Target	*	\$112,862,971	\$118,413,630
High Comorbidity	Periods with a High Comorbidity adjustment	*	25,000	23,835
	All periods	*	161,325	167,556
	Proportion/Rate of Target to Denominator Discharges	*	15.5%	14.2%
	Average Length of Stay for Target	*	26.9	26.7
	Average Medicare Payment for Target	*	\$2,025	\$2,058
	Sum of Medicare Payments for Target	*	\$50,617,071	\$49,061,447
Functional Impairment Medium	Periods with a Functional Impairment Level of Medium	*	46,133	46,256
	All periods	*	161,325	167,556
	Proportion/Rate of Target to Denominator Discharges	*	28.6%	27.6%
	Average Length of Stay for Target	*	25.0	24.9
	Average Medicare Payment for Target	*	\$1,858	\$1,838
	Sum of Medicare Payments for Target	*	\$85,719,267	\$85,034,464
Functional Impairment High	Periods with a Functional Impairment Level of High	*	79,883	89,849
	All periods	*	161,325	167,556
	Proportion/Rate of Target to Denominator Discharges	*	49.5%	53.6%
	Average Length of Stay for Target	*	25.8	25.8
	Average Medicare Payment for Target	*	\$2,042	\$2,045
	Sum of Medicare Payments for Target	*	\$163,157,151	\$183,699,069
Average Case Mix	Sum of case mix weight excl LUPA/PEP	103,122	134,321	131,654
	Count of Periods excl LUPA/PEP	93,879	113,244	111,273
	Proportion/Rate of Target to Denominator Discharges	1.10	1.19	1.18
Average Number of Periods	Count of periods	106,131	161,325	167,556
	Count of beneficiaries served	77,529	71,830	74,626
	Proportion/Rate of Target to Denominator Discharges	1.37	2.25	2.25
	Average Length of Stay for Target	39.2	25.4	25.3
	Average Medicare Payment for Target	\$3,070	\$1,878	\$1,886

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Average Number of Periods	Sum of Medicare Payments for Target	\$325,835,185	\$302,925,368	\$316,087,233
Periods with Low Visits	Periods with Low Visits	7,000	2,202	2,234
	All periods	106,131	161,325	167,556
	Proportion/Rate of Target to Denominator Discharges	6.6%	1.4%	1.3%
	Average Length of Stay for Target	22.6	22.0	22.7
	Average Outlier Payment Amount	\$1,493	\$2,545	\$2,586
	Sum of Medicare Payments for Target	\$10,453,716	\$5,603,013	\$5,777,996
Non-LUPA Payments	Periods w/o LUPA payment	96,474	116,136	111,906
	All periods	106,131	161,325	167,556
	Proportion/Rate of Target to Denominator Discharges	90.9%	72.0%	66.8%
	Average Length of Stay for Target	41.3	27.5	27.6
	Average Medicare Payment for Target	\$3,332	\$2,172	\$2,189
	Sum of Medicare Payments for Target	\$321,434,648	\$252,236,399	\$244,956,177
Outlier Payments	Dollar amt of outlier payments	\$2,047,041	\$3,843,832	\$2,499,354
	Dollar amt of total payments	\$325,835,185	\$302,925,368	\$316,087,233
	Proportion/Rate of Target to Denominator Discharges	0.6%	1.3%	0.8%
	Average Length of Stay for Target	55.7	29.5	29.4
	Average Medicare Payment for Target	\$763	\$527	\$496
Admission Source	Count of periods where admission source is Institutional	*	59,195	57,897
	All periods	*	161,325	167,556
	Proportion/Rate of Target to Denominator Discharges	*	36.7%	34.6%
	Average Length of Stay for Target	*	25.7	25.7
	Average Medicare Payment for Target	*	\$2,371	\$2,395
	Sum of Medicare Payments for Target	*	\$140,336,618	\$138,634,652

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

45

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area Summary - Maine, 22 Agencies

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Low Comorbidity	Periods with a Low Comorbidity adjustment	*	14,065	13,389
	All periods	*	35,747	34,166
	Proportion/Rate of Target to Denominator Discharges	*	39.3%	39.2%
	Average Length of Stay for Target	*	25.9	25.7
	Average Medicare Payment for Target	*	\$1,762	\$1,787
	Sum of Medicare Payments for Target	*	\$24,784,072	\$23,922,812
High Comorbidity	Periods with a High Comorbidity adjustment	*	6,186	5,776
	All periods	*	35,747	34,166
	Proportion/Rate of Target to Denominator Discharges	*	17.3%	16.9%
	Average Length of Stay for Target	*	27.1	27.0
	Average Medicare Payment for Target	*	\$1,932	\$1,985
	Sum of Medicare Payments for Target	*	\$11,951,399	\$11,464,982
Functional Impairment Medium	Periods with a Functional Impairment Level of Medium	*	11,801	10,652
	All periods	*	35,747	34,166
	Proportion/Rate of Target to Denominator Discharges	*	33.0%	31.2%
	Average Length of Stay for Target	*	25.4	25.3
	Average Medicare Payment for Target	*	\$1,787	\$1,791
	Sum of Medicare Payments for Target	*	\$21,083,445	\$19,073,756
Functional Impairment High	Periods with a Functional Impairment Level of High	*	14,337	14,995
	All periods	*	35,747	34,166
	Proportion/Rate of Target to Denominator Discharges	*	40.1%	43.9%
	Average Length of Stay for Target	*	25.8	25.8
	Average Medicare Payment for Target	*	\$1,994	\$2,024
	Sum of Medicare Payments for Target	*	\$28,587,426	\$30,346,124
Average Case Mix	Sum of case mix weight excl LUPA/PEP	24,373	28,547	25,716
	Count of Periods excl LUPA/PEP	23,230	24,933	22,576
	Proportion/Rate of Target to Denominator Discharges	1.05	1.14	1.14
Average Number of Periods	Count of periods	26,685	35,747	34,166
	Count of beneficiaries served	18,169	15,056	14,493
	Proportion/Rate of Target to Denominator Discharges	1.47	2.37	2.36
	Average Length of Stay for Target	41.4	25.7	25.5
	Average Medicare Payment for Target	\$2,893	\$1,779	\$1,807

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

46

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Average Number of Periods	Sum of Medicare Payments for Target	\$77,205,719	\$63,607,049	\$61,735,293
Periods with Low Visits	Periods with Low Visits	2,214	587	571
	All periods	26,685	35,747	34,166
	Proportion/Rate of Target to Denominator Discharges	8.3%	1.6%	1.7%
	Average Length of Stay for Target	25.3	22.5	22.8
	Average Outlier Payment Amount	\$1,437	\$2,398	\$2,425
	Sum of Medicare Payments for Target	\$3,182,399	\$1,407,798	\$1,384,730
Non-LUPA Payments	Periods w/o LUPA payment	23,719	25,090	22,668
	All periods	26,685	35,747	34,166
	Proportion/Rate of Target to Denominator Discharges	88.9%	70.2%	66.3%
	Average Length of Stay for Target	43.8	27.8	27.8
	Average Medicare Payment for Target	\$3,198	\$2,091	\$2,118
	Sum of Medicare Payments for Target	\$75,856,907	\$52,475,262	\$48,008,272
Outlier Payments	Dollar amt of outlier payments	\$1,447,561	\$1,543,400	\$1,299,373
	Dollar amt of total payments	\$77,205,719	\$63,607,049	\$61,735,293
	Proportion/Rate of Target to Denominator Discharges	1.9%	2.4%	2.1%
	Average Length of Stay for Target	57.5	29.6	29.6
	Average Medicare Payment for Target	\$916	\$611	\$603
Admission Source	Count of periods where admission source is Institutional	*	11,059	9,985
	All periods	*	35,747	34,166
	Proportion/Rate of Target to Denominator Discharges	*	30.9%	29.2%
	Average Length of Stay for Target	*	25.9	25.9
	Average Medicare Payment for Target	*	\$2,328	\$2,346
	Sum of Medicare Payments for Target	*	\$25,744,817	\$23,426,340

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

47

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area Summary - Michigan, 450 Agencies

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Low Comorbidity	Periods with a Low Comorbidity adjustment	*	89,779	90,371
	All periods	*	235,394	236,080
	Proportion/Rate of Target to Denominator Discharges	*	38.1%	38.3%
	Average Length of Stay for Target	*	25.4	25.4
	Average Medicare Payment for Target	*	\$1,725	\$1,745
	Sum of Medicare Payments for Target	*	\$154,851,471	\$157,665,095
High Comorbidity	Periods with a High Comorbidity adjustment	*	38,407	38,552
	All periods	*	235,394	236,080
	Proportion/Rate of Target to Denominator Discharges	*	16.3%	16.3%
	Average Length of Stay for Target	*	26.5	26.6
	Average Medicare Payment for Target	*	\$1,879	\$1,917
	Sum of Medicare Payments for Target	*	\$72,166,277	\$73,917,054
Functional Impairment Medium	Periods with a Functional Impairment Level of Medium	*	85,210	86,599
	All periods	*	235,394	236,080
	Proportion/Rate of Target to Denominator Discharges	*	36.2%	36.7%
	Average Length of Stay for Target	*	24.8	24.9
	Average Medicare Payment for Target	*	\$1,729	\$1,733
	Sum of Medicare Payments for Target	*	\$147,350,453	\$150,052,122
Functional Impairment High	Periods with a Functional Impairment Level of High	*	91,367	96,936
	All periods	*	235,394	236,080
	Proportion/Rate of Target to Denominator Discharges	*	38.8%	41.1%
	Average Length of Stay for Target	*	25.2	25.4
	Average Medicare Payment for Target	*	\$1,900	\$1,919
	Sum of Medicare Payments for Target	*	\$173,637,146	\$185,980,249
Average Case Mix	Sum of case mix weight excl LUPA/PEP	169,913	179,984	172,169
	Count of Periods excl LUPA/PEP	161,618	155,330	149,141
	Proportion/Rate of Target to Denominator Discharges	1.05	1.16	1.15
Average Number of Periods	Count of periods	186,102	235,394	236,080
	Count of beneficiaries served	127,379	101,223	98,726
	Proportion/Rate of Target to Denominator Discharges	1.46	2.33	2.39
	Average Length of Stay for Target	39.6	25.0	25.1
	Average Medicare Payment for Target	\$2,798	\$1,723	\$1,743

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

48

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Average Number of Periods	Sum of Medicare Payments for Target	\$520,730,481	\$405,576,614	\$411,398,973
Periods with Low Visits	Periods with Low Visits	15,576	3,984	3,832
	All periods	186,102	235,394	236,080
	Proportion/Rate of Target to Denominator Discharges	8.4%	1.7%	1.6%
	Average Length of Stay for Target	26.6	22.5	22.6
	Average Outlier Payment Amount	\$1,510	\$2,370	\$2,409
	Sum of Medicare Payments for Target	\$23,515,206	\$9,442,819	\$9,232,980
Non-LUPA Payments	Periods w/o LUPA payment	167,452	159,394	150,199
	All periods	186,102	235,394	236,080
	Proportion/Rate of Target to Denominator Discharges	90.0%	67.7%	63.6%
	Average Length of Stay for Target	41.5	27.3	27.5
	Average Medicare Payment for Target	\$3,062	\$2,028	\$2,034
	Sum of Medicare Payments for Target	\$512,667,183	\$323,197,762	\$305,507,665
Outlier Payments	Dollar amt of outlier payments	\$3,301,908	\$4,236,958	\$3,004,648
	Dollar amt of total payments	\$520,730,481	\$405,576,614	\$411,398,973
	Proportion/Rate of Target to Denominator Discharges	0.6%	1.0%	0.7%
	Average Length of Stay for Target	55.4	29.4	29.5
	Average Medicare Payment for Target	\$779	\$501	\$466
Admission Source	Count of periods where admission source is Institutional	*	73,899	70,440
	All periods	*	235,394	236,080
	Proportion/Rate of Target to Denominator Discharges	*	31.4%	29.8%
	Average Length of Stay for Target	*	25.0	25.4
	Average Medicare Payment for Target	*	\$2,213	\$2,251
	Sum of Medicare Payments for Target	*	\$163,544,041	\$158,529,003

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

49

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area Summary - Minnesota, 151 Agencies

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Low Comorbidity	Periods with a Low Comorbidity adjustment	*	31,734	32,804
	All periods	*	76,372	78,868
	Proportion/Rate of Target to Denominator Discharges	*	41.6%	41.6%
	Average Length of Stay for Target	*	25.2	25.0
	Average Medicare Payment for Target	*	\$1,997	\$1,968
	Sum of Medicare Payments for Target	*	\$63,363,878	\$64,545,022
High Comorbidity	Periods with a High Comorbidity adjustment	*	12,483	12,582
	All periods	*	76,372	78,868
	Proportion/Rate of Target to Denominator Discharges	*	16.3%	16.0%
	Average Length of Stay for Target	*	26.6	26.4
	Average Medicare Payment for Target	*	\$2,178	\$2,161
	Sum of Medicare Payments for Target	*	\$27,188,149	\$27,187,833
Functional Impairment Medium	Periods with a Functional Impairment Level of Medium	*	24,553	24,589
	All periods	*	76,372	78,868
	Proportion/Rate of Target to Denominator Discharges	*	32.1%	31.2%
	Average Length of Stay for Target	*	25.1	24.9
	Average Medicare Payment for Target	*	\$2,031	\$1,986
	Sum of Medicare Payments for Target	*	\$49,874,059	\$48,843,958
Functional Impairment High	Periods with a Functional Impairment Level of High	*	31,242	33,437
	All periods	*	76,372	78,868
	Proportion/Rate of Target to Denominator Discharges	*	40.9%	42.4%
	Average Length of Stay for Target	*	25.3	25.2
	Average Medicare Payment for Target	*	\$2,190	\$2,174
	Sum of Medicare Payments for Target	*	\$68,426,429	\$72,701,487
Average Case Mix	Sum of case mix weight excl LUPA/PEP	45,387	63,200	60,936
	Count of Periods excl LUPA/PEP	42,645	54,063	52,678
	Proportion/Rate of Target to Denominator Discharges	1.06	1.17	1.16
Average Number of Periods	Count of periods	49,609	76,372	78,868
	Count of beneficiaries served	36,180	34,421	35,190
	Proportion/Rate of Target to Denominator Discharges	1.37	2.22	2.24
	Average Length of Stay for Target	38.3	25.2	25.0
	Average Medicare Payment for Target	\$3,167	\$1,995	\$1,962

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

50

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Average Number of Periods	Sum of Medicare Payments for Target	\$157,124,930	\$152,394,367	\$154,750,712
Periods with Low Visits	Periods with Low Visits	3,638	959	910
	All periods	49,609	76,372	78,868
	Proportion/Rate of Target to Denominator Discharges	7.3%	1.3%	1.2%
	Average Length of Stay for Target	24.7	22.0	23.3
	Average Outlier Payment Amount	\$1,584	\$2,641	\$2,677
	Sum of Medicare Payments for Target	\$5,760,851	\$2,532,421	\$2,436,357
Non-LUPA Payments	Periods w/o LUPA payment	44,111	55,812	53,099
	All periods	49,609	76,372	78,868
	Proportion/Rate of Target to Denominator Discharges	88.9%	73.1%	67.3%
	Average Length of Stay for Target	40.1	27.6	27.7
	Average Medicare Payment for Target	\$3,503	\$2,329	\$2,289
	Sum of Medicare Payments for Target	\$154,518,196	\$129,981,975	\$121,550,042
Outlier Payments	Dollar amt of outlier payments	\$2,885,789	\$3,797,641	\$2,878,790
	Dollar amt of total payments	\$157,124,930	\$152,394,367	\$154,750,712
	Proportion/Rate of Target to Denominator Discharges	1.8%	2.5%	1.9%
	Average Length of Stay for Target	55.5	29.5	29.5
	Average Medicare Payment for Target	\$1,058	\$639	\$583
Admission Source	Count of periods where admission source is Institutional	*	26,033	25,444
	All periods	*	76,372	78,868
	Proportion/Rate of Target to Denominator Discharges	*	34.1%	32.3%
	Average Length of Stay for Target	*	26.1	26.1
	Average Medicare Payment for Target	*	\$2,582	\$2,561
	Sum of Medicare Payments for Target	*	\$67,206,127	\$65,163,435

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

51

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area Summary - Missouri, 152 Agencies

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Low Comorbidity	Periods with a Low Comorbidity adjustment	*	46,510	44,648
	All periods	*	120,955	117,167
	Proportion/Rate of Target to Denominator Discharges	*	38.5%	38.1%
	Average Length of Stay for Target	*	25.4	25.3
	Average Medicare Payment for Target	*	\$1,725	\$1,730
	Sum of Medicare Payments for Target	*	\$80,251,304	\$77,232,529
High Comorbidity	Periods with a High Comorbidity adjustment	*	20,414	19,532
	All periods	*	120,955	117,167
	Proportion/Rate of Target to Denominator Discharges	*	16.9%	16.7%
	Average Length of Stay for Target	*	26.7	26.7
	Average Medicare Payment for Target	*	\$1,863	\$1,883
	Sum of Medicare Payments for Target	*	\$38,028,864	\$36,783,780
Functional Impairment Medium	Periods with a Functional Impairment Level of Medium	*	38,783	37,692
	All periods	*	120,955	117,167
	Proportion/Rate of Target to Denominator Discharges	*	32.1%	32.2%
	Average Length of Stay for Target	*	24.6	24.7
	Average Medicare Payment for Target	*	\$1,737	\$1,732
	Sum of Medicare Payments for Target	*	\$67,372,436	\$65,281,600
Functional Impairment High	Periods with a Functional Impairment Level of High	*	50,285	50,098
	All periods	*	120,955	117,167
	Proportion/Rate of Target to Denominator Discharges	*	41.6%	42.8%
	Average Length of Stay for Target	*	25.3	25.3
	Average Medicare Payment for Target	*	\$1,922	\$1,918
	Sum of Medicare Payments for Target	*	\$96,660,415	\$96,094,829
Average Case Mix	Sum of case mix weight excl LUPA/PEP	75,093	100,350	91,557
	Count of Periods excl LUPA/PEP	71,208	85,012	78,000
	Proportion/Rate of Target to Denominator Discharges	1.05	1.18	1.17
Average Number of Periods	Count of periods	83,186	120,955	117,167
	Count of beneficiaries served	60,635	56,154	54,574
	Proportion/Rate of Target to Denominator Discharges	1.37	2.15	2.15
	Average Length of Stay for Target	38.5	25.0	25.0
	Average Medicare Payment for Target	\$2,677	\$1,728	\$1,733

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

52

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Average Number of Periods	Sum of Medicare Payments for Target	\$222,651,830	\$209,050,840	\$202,996,309
Periods with Low Visits	Periods with Low Visits	7,448	1,960	1,773
	All periods	83,186	120,955	117,167
	Proportion/Rate of Target to Denominator Discharges	9.0%	1.6%	1.5%
	Average Length of Stay for Target	23.0	20.3	20.2
	Average Outlier Payment Amount	\$1,324	\$2,348	\$2,357
	Sum of Medicare Payments for Target	\$9,862,963	\$4,602,937	\$4,178,445
Non-LUPA Payments	Periods w/o LUPA payment	73,430	86,756	78,539
	All periods	83,186	120,955	117,167
	Proportion/Rate of Target to Denominator Discharges	88.3%	71.7%	67.0%
	Average Length of Stay for Target	40.6	27.0	27.0
	Average Medicare Payment for Target	\$2,973	\$2,015	\$2,010
	Sum of Medicare Payments for Target	\$218,295,815	\$174,798,482	\$157,859,221
Outlier Payments	Dollar amt of outlier payments	\$1,885,300	\$3,382,053	\$2,475,399
	Dollar amt of total payments	\$222,651,830	\$209,050,840	\$202,996,309
	Proportion/Rate of Target to Denominator Discharges	0.8%	1.6%	1.2%
	Average Length of Stay for Target	55.2	29.2	29.3
	Average Medicare Payment for Target	\$739	\$512	\$481
Admission Source	Count of periods where admission source is Institutional	*	44,957	41,846
	All periods	*	120,955	117,167
	Proportion/Rate of Target to Denominator Discharges	*	37.2%	35.7%
	Average Length of Stay for Target	*	24.7	24.8
	Average Medicare Payment for Target	*	\$2,207	\$2,222
	Sum of Medicare Payments for Target	*	\$99,198,948	\$92,975,295

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

53

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area Summary - Mississippi, 45 Agencies

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Low Comorbidity	Periods with a Low Comorbidity adjustment	*	84,389	79,684
	All periods	*	219,339	210,158
	Proportion/Rate of Target to Denominator Discharges	*	38.5%	37.9%
	Average Length of Stay for Target	*	28.2	28.1
	Average Medicare Payment for Target	*	\$1,420	\$1,449
	Sum of Medicare Payments for Target	*	\$119,794,498	\$115,498,172
High Comorbidity	Periods with a High Comorbidity adjustment	*	32,685	28,775
	All periods	*	219,339	210,158
	Proportion/Rate of Target to Denominator Discharges	*	14.9%	13.7%
	Average Length of Stay for Target	*	28.4	28.4
	Average Medicare Payment for Target	*	\$1,608	\$1,647
	Sum of Medicare Payments for Target	*	\$52,561,468	\$47,392,238
Functional Impairment Medium	Periods with a Functional Impairment Level of Medium	*	65,469	61,160
	All periods	*	219,339	210,158
	Proportion/Rate of Target to Denominator Discharges	*	29.8%	29.1%
	Average Length of Stay for Target	*	28.1	28.0
	Average Medicare Payment for Target	*	\$1,360	\$1,376
	Sum of Medicare Payments for Target	*	\$89,019,657	\$84,171,899
Functional Impairment High	Periods with a Functional Impairment Level of High	*	108,654	109,810
	All periods	*	219,339	210,158
	Proportion/Rate of Target to Denominator Discharges	*	49.5%	52.3%
	Average Length of Stay for Target	*	28.0	27.8
	Average Medicare Payment for Target	*	\$1,591	\$1,604
	Sum of Medicare Payments for Target	*	\$172,836,039	\$176,096,740
Average Case Mix	Sum of case mix weight excl LUPA/PEP	116,726	138,466	123,634
	Count of Periods excl LUPA/PEP	115,550	130,963	117,210
	Proportion/Rate of Target to Denominator Discharges	1.01	1.06	1.05
Average Number of Periods	Count of periods	127,087	219,339	210,158
	Count of beneficiaries served	60,338	57,720	56,197
	Proportion/Rate of Target to Denominator Discharges	2.11	3.80	3.74
	Average Length of Stay for Target	52.1	28.0	27.8
	Average Medicare Payment for Target	\$2,447	\$1,421	\$1,445

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

54

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Average Number of Periods	Sum of Medicare Payments for Target	\$310,936,518	\$311,593,359	\$303,585,437
Periods with Low Visits	Periods with Low Visits	7,790	2,520	2,423
	All periods	127,087	219,339	210,158
	Proportion/Rate of Target to Denominator Discharges	6.1%	1.1%	1.2%
	Average Length of Stay for Target	38.8	27.2	26.3
	Average Outlier Payment Amount	\$1,266	\$2,062	\$2,106
	Sum of Medicare Payments for Target	\$9,860,579	\$5,196,243	\$5,103,547
Non-LUPA Payments	Periods w/o LUPA payment	117,268	132,307	117,751
	All periods	127,087	219,339	210,158
	Proportion/Rate of Target to Denominator Discharges	92.3%	60.3%	56.0%
	Average Length of Stay for Target	53.8	29.0	28.9
	Average Medicare Payment for Target	\$2,621	\$1,630	\$1,651
	Sum of Medicare Payments for Target	\$307,400,112	\$215,694,065	\$194,404,545
Outlier Payments	Dollar amt of outlier payments	\$1,088,927	\$1,741,362	\$1,073,571
	Dollar amt of total payments	\$310,936,518	\$311,593,359	\$303,585,437
	Proportion/Rate of Target to Denominator Discharges	0.4%	0.6%	0.4%
	Average Length of Stay for Target	58.1	29.5	29.6
	Average Medicare Payment for Target	\$659	\$468	\$416
Admission Source	Count of periods where admission source is Institutional	*	35,793	32,164
	All periods	*	219,339	210,158
	Proportion/Rate of Target to Denominator Discharges	*	16.3%	15.3%
	Average Length of Stay for Target	*	27.2	27.0
	Average Medicare Payment for Target	*	\$2,021	\$2,047
	Sum of Medicare Payments for Target	*	\$72,330,282	\$65,833,448

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

55

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area Summary - Montana, 27 Agencies

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Low Comorbidity	Periods with a Low Comorbidity adjustment	*	4,787	4,815
	All periods	*	13,132	13,561
	Proportion/Rate of Target to Denominator Discharges	*	36.5%	35.5%
	Average Length of Stay for Target	*	25.6	25.5
	Average Medicare Payment for Target	*	\$1,701	\$1,684
	Sum of Medicare Payments for Target	*	\$8,144,558	\$8,107,008
High Comorbidity	Periods with a High Comorbidity adjustment	*	2,062	2,221
	All periods	*	13,132	13,561
	Proportion/Rate of Target to Denominator Discharges	*	15.7%	16.4%
	Average Length of Stay for Target	*	26.9	27.0
	Average Medicare Payment for Target	*	\$1,849	\$1,780
	Sum of Medicare Payments for Target	*	\$3,812,517	\$3,952,389
Functional Impairment Medium	Periods with a Functional Impairment Level of Medium	*	4,132	4,300
	All periods	*	13,132	13,561
	Proportion/Rate of Target to Denominator Discharges	*	31.5%	31.7%
	Average Length of Stay for Target	*	25.4	25.6
	Average Medicare Payment for Target	*	\$1,750	\$1,714
	Sum of Medicare Payments for Target	*	\$7,230,575	\$7,368,316
Functional Impairment High	Periods with a Functional Impairment Level of High	*	4,878	5,115
	All periods	*	13,132	13,561
	Proportion/Rate of Target to Denominator Discharges	*	37.1%	37.7%
	Average Length of Stay for Target	*	26.0	25.9
	Average Medicare Payment for Target	*	\$1,871	\$1,837
	Sum of Medicare Payments for Target	*	\$9,127,674	\$9,394,977
Average Case Mix	Sum of case mix weight excl LUPA/PEP	7,749	10,519	9,917
	Count of Periods excl LUPA/PEP	7,300	9,054	8,679
	Proportion/Rate of Target to Denominator Discharges	1.06	1.16	1.14
Average Number of Periods	Count of periods	8,596	13,132	13,561
	Count of beneficiaries served	6,225	5,962	5,936
	Proportion/Rate of Target to Denominator Discharges	1.38	2.20	2.28
	Average Length of Stay for Target	39.8	25.6	25.6
	Average Medicare Payment for Target	\$2,678	\$1,707	\$1,675

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

56

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Average Number of Periods	Sum of Medicare Payments for Target	\$23,022,059	\$22,421,955	\$22,710,486
Periods with Low Visits	Periods with Low Visits	749	225	233
	All periods	8,596	13,132	13,561
	Proportion/Rate of Target to Denominator Discharges	8.7%	1.7%	1.7%
	Average Length of Stay for Target	28.5	22.2	23.7
	Average Outlier Payment Amount	\$1,352	\$2,266	\$2,321
	Sum of Medicare Payments for Target	\$1,012,355	\$509,848	\$540,713
Non-LUPA Payments	Periods w/o LUPA payment	7,450	9,146	8,711
	All periods	8,596	13,132	13,561
	Proportion/Rate of Target to Denominator Discharges	86.7%	69.6%	64.2%
	Average Length of Stay for Target	41.3	27.6	27.9
	Average Medicare Payment for Target	\$3,026	\$2,032	\$1,992
	Sum of Medicare Payments for Target	\$22,541,213	\$18,588,591	\$17,355,885
Outlier Payments	Dollar amt of outlier payments	\$244,374	\$487,858	\$350,135
	Dollar amt of total payments	\$23,022,059	\$22,421,955	\$22,710,486
	Proportion/Rate of Target to Denominator Discharges	1.1%	2.2%	1.5%
	Average Length of Stay for Target	56.5	29.4	29.5
	Average Medicare Payment for Target	\$807	\$520	\$456
Admission Source	Count of periods where admission source is Institutional	*	4,365	3,980
	All periods	*	13,132	13,561
	Proportion/Rate of Target to Denominator Discharges	*	33.2%	29.3%
	Average Length of Stay for Target	*	26.0	26.0
	Average Medicare Payment for Target	*	\$2,268	\$2,221
	Sum of Medicare Payments for Target	*	\$9,900,422	\$8,838,738

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

57

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area Summary - North Carolina, 167 Agencies

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Low Comorbidity	Periods with a Low Comorbidity adjustment	*	101,217	97,497
	All periods	*	259,407	248,301
	Proportion/Rate of Target to Denominator Discharges	*	39.0%	39.3%
	Average Length of Stay for Target	*	26.6	26.4
	Average Medicare Payment for Target	*	\$1,649	\$1,695
	Sum of Medicare Payments for Target	*	\$166,899,401	\$165,261,048
High Comorbidity	Periods with a High Comorbidity adjustment	*	42,477	39,158
	All periods	*	259,407	248,301
	Proportion/Rate of Target to Denominator Discharges	*	16.4%	15.8%
	Average Length of Stay for Target	*	27.5	27.3
	Average Medicare Payment for Target	*	\$1,815	\$1,871
	Sum of Medicare Payments for Target	*	\$77,101,945	\$73,270,246
Functional Impairment Medium	Periods with a Functional Impairment Level of Medium	*	75,692	72,939
	All periods	*	259,407	248,301
	Proportion/Rate of Target to Denominator Discharges	*	29.2%	29.4%
	Average Length of Stay for Target	*	26.3	26.1
	Average Medicare Payment for Target	*	\$1,648	\$1,681
	Sum of Medicare Payments for Target	*	\$124,708,962	\$122,579,279
Functional Impairment High	Periods with a Functional Impairment Level of High	*	117,831	118,262
	All periods	*	259,407	248,301
	Proportion/Rate of Target to Denominator Discharges	*	45.4%	47.6%
	Average Length of Stay for Target	*	26.4	26.3
	Average Medicare Payment for Target	*	\$1,845	\$1,885
	Sum of Medicare Payments for Target	*	\$217,380,850	\$222,910,408
Average Case Mix	Sum of case mix weight excl LUPA/PEP	156,737	195,378	180,895
	Count of Periods excl LUPA/PEP	146,394	169,325	157,382
	Proportion/Rate of Target to Denominator Discharges	1.07	1.15	1.15
Average Number of Periods	Count of periods	170,254	259,407	248,301
	Count of beneficiaries served	112,797	101,444	98,267
	Proportion/Rate of Target to Denominator Discharges	1.51	2.56	2.53
	Average Length of Stay for Target	43.1	26.4	26.2
	Average Medicare Payment for Target	\$2,716	\$1,647	\$1,693

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

58

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Average Number of Periods	Sum of Medicare Payments for Target	\$462,325,657	\$427,176,465	\$420,264,599
Periods with Low Visits	Periods with Low Visits	14,290	3,863	3,772
	All periods	170,254	259,407	248,301
	Proportion/Rate of Target to Denominator Discharges	8.4%	1.5%	1.5%
	Average Length of Stay for Target	29.1	22.6	23.2
	Average Outlier Payment Amount	\$1,377	\$2,339	\$2,414
	Sum of Medicare Payments for Target	\$19,671,243	\$9,034,186	\$9,103,897
Non-LUPA Payments	Periods w/o LUPA payment	150,153	174,975	158,091
	All periods	170,254	259,407	248,301
	Proportion/Rate of Target to Denominator Discharges	88.2%	67.5%	63.7%
	Average Length of Stay for Target	45.2	28.1	28.2
	Average Medicare Payment for Target	\$3,024	\$1,951	\$1,985
	Sum of Medicare Payments for Target	\$454,123,146	\$341,433,357	\$313,822,615
Outlier Payments	Dollar amt of outlier payments	\$2,056,221	\$3,460,036	\$2,236,289
	Dollar amt of total payments	\$462,325,657	\$427,176,465	\$420,264,599
	Proportion/Rate of Target to Denominator Discharges	0.4%	0.8%	0.5%
	Average Length of Stay for Target	57.7	29.6	29.6
	Average Medicare Payment for Target	\$664	\$476	\$433
Admission Source	Count of periods where admission source is Institutional	*	76,143	69,770
	All periods	*	259,407	248,301
	Proportion/Rate of Target to Denominator Discharges	*	29.4%	28.1%
	Average Length of Stay for Target	*	26.0	26.1
	Average Medicare Payment for Target	*	\$2,183	\$2,240
	Sum of Medicare Payments for Target	*	\$166,183,292	\$156,291,845

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area Summary - North Dakota, 18 Agencies

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Low Comorbidity	Periods with a Low Comorbidity adjustment	*	3,989	5,000
	All periods	*	9,165	10,718
	Proportion/Rate of Target to Denominator Discharges	*	43.5%	46.7%
	Average Length of Stay for Target	*	25.0	25.4
	Average Medicare Payment for Target	*	\$1,668	\$1,658
	Sum of Medicare Payments for Target	*	\$6,653,958	\$8,292,276
High Comorbidity	Periods with a High Comorbidity adjustment	*	1,452	1,666
	All periods	*	9,165	10,718
	Proportion/Rate of Target to Denominator Discharges	*	15.8%	15.5%
	Average Length of Stay for Target	*	26.4	26.9
	Average Medicare Payment for Target	*	\$1,820	\$1,846
	Sum of Medicare Payments for Target	*	\$2,642,519	\$3,075,968
Functional Impairment Medium	Periods with a Functional Impairment Level of Medium	*	2,675	3,359
	All periods	*	9,165	10,718
	Proportion/Rate of Target to Denominator Discharges	*	29.2%	31.3%
	Average Length of Stay for Target	*	24.3	25.2
	Average Medicare Payment for Target	*	\$1,743	\$1,743
	Sum of Medicare Payments for Target	*	\$4,663,162	\$5,854,165
Functional Impairment High	Periods with a Functional Impairment Level of High	*	2,992	3,448
	All periods	*	9,165	10,718
	Proportion/Rate of Target to Denominator Discharges	*	32.6%	32.2%
	Average Length of Stay for Target	*	25.3	25.4
	Average Medicare Payment for Target	*	\$1,875	\$1,927
	Sum of Medicare Payments for Target	*	\$5,609,062	\$6,643,432
Average Case Mix	Sum of case mix weight excl LUPA/PEP	4,812	7,420	8,045
	Count of Periods excl LUPA/PEP	4,688	6,423	7,104
	Proportion/Rate of Target to Denominator Discharges	1.03	1.16	1.13
Average Number of Periods	Count of periods	5,197	9,165	10,718
	Count of beneficiaries served	3,878	4,386	4,746
	Proportion/Rate of Target to Denominator Discharges	1.34	2.09	2.26
	Average Length of Stay for Target	39.1	25.0	25.4
	Average Medicare Payment for Target	\$2,664	\$1,677	\$1,678

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

60

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Average Number of Periods	Sum of Medicare Payments for Target	\$13,843,145	\$15,369,323	\$17,981,699
Periods with Low Visits	Periods with Low Visits	411	173	177
	All periods	5,197	9,165	10,718
	Proportion/Rate of Target to Denominator Discharges	7.9%	1.9%	1.7%
	Average Length of Stay for Target	26.7	21.4	22.6
	Average Outlier Payment Amount	\$1,432	\$2,223	\$2,258
	Sum of Medicare Payments for Target	\$588,616	\$384,548	\$399,684
Non-LUPA Payments	Periods w/o LUPA payment	4,776	6,472	7,129
	All periods	5,197	9,165	10,718
	Proportion/Rate of Target to Denominator Discharges	91.9%	70.6%	66.5%
	Average Length of Stay for Target	40.1	26.8	27.3
	Average Medicare Payment for Target	\$2,862	\$1,951	\$1,910
	Sum of Medicare Payments for Target	\$13,668,866	\$12,624,561	\$13,619,449
Outlier Payments	Dollar amt of outlier payments	\$206,199	\$327,987	\$299,768
	Dollar amt of total payments	\$13,843,145	\$15,369,323	\$17,981,699
	Proportion/Rate of Target to Denominator Discharges	1.5%	2.1%	1.7%
	Average Length of Stay for Target	55.5	28.7	28.9
	Average Medicare Payment for Target	\$849	\$514	\$536
Admission Source	Count of periods where admission source is Institutional	*	3,094	3,296
	All periods	*	9,165	10,718
	Proportion/Rate of Target to Denominator Discharges	*	33.8%	30.8%
	Average Length of Stay for Target	*	25.2	26.0
	Average Medicare Payment for Target	*	\$2,199	\$2,253
	Sum of Medicare Payments for Target	*	\$6,805,198	\$7,425,771

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

61

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area Summary - Nebraska, 70 Agencies

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Low Comorbidity	Periods with a Low Comorbidity adjustment	*	15,618	16,176
	All periods	*	39,391	39,954
	Proportion/Rate of Target to Denominator Discharges	*	39.6%	40.5%
	Average Length of Stay for Target	*	25.8	25.7
	Average Medicare Payment for Target	*	\$1,822	\$1,852
	Sum of Medicare Payments for Target	*	\$28,461,075	\$29,950,755
High Comorbidity	Periods with a High Comorbidity adjustment	*	5,619	5,346
	All periods	*	39,391	39,954
	Proportion/Rate of Target to Denominator Discharges	*	14.3%	13.4%
	Average Length of Stay for Target	*	26.6	26.6
	Average Medicare Payment for Target	*	\$1,976	\$2,033
	Sum of Medicare Payments for Target	*	\$11,105,046	\$10,867,238
Functional Impairment Medium	Periods with a Functional Impairment Level of Medium	*	11,474	11,971
	All periods	*	39,391	39,954
	Proportion/Rate of Target to Denominator Discharges	*	29.1%	30.0%
	Average Length of Stay for Target	*	25.5	25.4
	Average Medicare Payment for Target	*	\$1,839	\$1,855
	Sum of Medicare Payments for Target	*	\$21,098,542	\$22,208,136
Functional Impairment High	Periods with a Functional Impairment Level of High	*	15,923	17,026
	All periods	*	39,391	39,954
	Proportion/Rate of Target to Denominator Discharges	*	40.4%	42.6%
	Average Length of Stay for Target	*	25.8	25.9
	Average Medicare Payment for Target	*	\$2,008	\$2,027
	Sum of Medicare Payments for Target	*	\$31,972,765	\$34,518,176
Average Case Mix	Sum of case mix weight excl LUPA/PEP	25,086	32,242	31,057
	Count of Periods excl LUPA/PEP	22,699	28,360	27,298
	Proportion/Rate of Target to Denominator Discharges	1.11	1.14	1.14
Average Number of Periods	Count of periods	25,502	39,391	39,954
	Count of beneficiaries served	17,801	16,908	17,122
	Proportion/Rate of Target to Denominator Discharges	1.43	2.33	2.33
	Average Length of Stay for Target	40.9	25.7	25.7
	Average Medicare Payment for Target	\$3,068	\$1,800	\$1,826

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

62

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Average Number of Periods	Sum of Medicare Payments for Target	\$78,250,394	\$70,892,214	\$72,970,837
Periods with Low Visits	Periods with Low Visits	1,574	429	432
	All periods	25,502	39,391	39,954
	Proportion/Rate of Target to Denominator Discharges	6.2%	1.1%	1.1%
	Average Length of Stay for Target	26.2	21.9	22.5
	Average Outlier Payment Amount	\$1,433	\$2,386	\$2,448
	Sum of Medicare Payments for Target	\$2,255,538	\$1,023,634	\$1,057,336
Non-LUPA Payments	Periods w/o LUPA payment	23,318	28,820	27,433
	All periods	25,502	39,391	39,954
	Proportion/Rate of Target to Denominator Discharges	91.4%	73.2%	68.7%
	Average Length of Stay for Target	42.4	27.5	27.6
	Average Medicare Payment for Target	\$3,316	\$2,060	\$2,083
	Sum of Medicare Payments for Target	\$77,322,664	\$59,368,242	\$57,135,381
Outlier Payments	Dollar amt of outlier payments	\$1,312,231	\$1,790,091	\$1,279,700
	Dollar amt of total payments	\$78,250,394	\$70,892,214	\$72,970,837
	Proportion/Rate of Target to Denominator Discharges	1.7%	2.5%	1.8%
	Average Length of Stay for Target	55.9	29.5	29.4
	Average Medicare Payment for Target	\$923	\$590	\$545
Admission Source	Count of periods where admission source is Institutional	*	12,483	12,168
	All periods	*	39,391	39,954
	Proportion/Rate of Target to Denominator Discharges	*	31.7%	30.5%
	Average Length of Stay for Target	*	25.7	25.8
	Average Medicare Payment for Target	*	\$2,376	\$2,415
	Sum of Medicare Payments for Target	*	\$29,656,266	\$29,383,560

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

63

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area Summary - New Hampshire, 25 Agencies

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Low Comorbidity	Periods with a Low Comorbidity adjustment	*	16,514	16,629
	All periods	*	45,084	45,619
	Proportion/Rate of Target to Denominator Discharges	*	36.6%	36.5%
	Average Length of Stay for Target	*	25.4	25.2
	Average Medicare Payment for Target	*	\$1,875	\$1,882
	Sum of Medicare Payments for Target	*	\$30,970,960	\$31,289,192
High Comorbidity	Periods with a High Comorbidity adjustment	*	6,986	6,960
	All periods	*	45,084	45,619
	Proportion/Rate of Target to Denominator Discharges	*	15.5%	15.3%
	Average Length of Stay for Target	*	26.7	26.6
	Average Medicare Payment for Target	*	\$2,097	\$2,098
	Sum of Medicare Payments for Target	*	\$14,653,048	\$14,600,564
Functional Impairment Medium	Periods with a Functional Impairment Level of Medium	*	14,345	14,608
	All periods	*	45,084	45,619
	Proportion/Rate of Target to Denominator Discharges	*	31.8%	32.0%
	Average Length of Stay for Target	*	24.5	24.3
	Average Medicare Payment for Target	*	\$1,886	\$1,889
	Sum of Medicare Payments for Target	*	\$27,048,380	\$27,596,160
Functional Impairment High	Periods with a Functional Impairment Level of High	*	19,570	19,977
	All periods	*	45,084	45,619
	Proportion/Rate of Target to Denominator Discharges	*	43.4%	43.8%
	Average Length of Stay for Target	*	25.1	24.9
	Average Medicare Payment for Target	*	\$2,093	\$2,099
	Sum of Medicare Payments for Target	*	\$40,950,527	\$41,934,345
Average Case Mix	Sum of case mix weight excl LUPA/PEP	27,165	36,947	35,182
	Count of Periods excl LUPA/PEP	26,572	31,534	30,148
	Proportion/Rate of Target to Denominator Discharges	1.02	1.17	1.17
Average Number of Periods	Count of periods	30,640	45,084	45,619
	Count of beneficiaries served	20,921	19,907	20,635
	Proportion/Rate of Target to Denominator Discharges	1.46	2.26	2.21
	Average Length of Stay for Target	39.3	24.9	24.7
	Average Medicare Payment for Target	\$2,961	\$1,889	\$1,896

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

64

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Average Number of Periods	Sum of Medicare Payments for Target	\$90,713,227	\$85,164,600	\$86,486,986
Periods with Low Visits	Periods with Low Visits	2,619	806	835
	All periods	30,640	45,084	45,619
	Proportion/Rate of Target to Denominator Discharges	8.5%	1.8%	1.8%
	Average Length of Stay for Target	24.4	20.6	20.0
	Average Outlier Payment Amount	\$1,545	\$2,538	\$2,572
	Sum of Medicare Payments for Target	\$4,046,557	\$2,045,654	\$2,147,698
Non-LUPA Payments	Periods w/o LUPA payment	27,360	32,040	30,333
	All periods	30,640	45,084	45,619
	Proportion/Rate of Target to Denominator Discharges	89.3%	71.1%	66.5%
	Average Length of Stay for Target	41.5	27.2	27.2
	Average Medicare Payment for Target	\$3,257	\$2,231	\$2,243
	Sum of Medicare Payments for Target	\$89,120,190	\$71,468,959	\$68,027,099
Outlier Payments	Dollar amt of outlier payments	\$2,042,764	\$2,153,220	\$1,612,779
	Dollar amt of total payments	\$90,713,227	\$85,164,600	\$86,486,986
	Proportion/Rate of Target to Denominator Discharges	2.3%	2.5%	1.9%
	Average Length of Stay for Target	56.7	29.5	29.6
	Average Medicare Payment for Target	\$1,163	\$680	\$628
Admission Source	Count of periods where admission source is Institutional	*	16,212	15,824
	All periods	*	45,084	45,619
	Proportion/Rate of Target to Denominator Discharges	*	36.0%	34.7%
	Average Length of Stay for Target	*	25.1	25.2
	Average Medicare Payment for Target	*	\$2,426	\$2,428
	Sum of Medicare Payments for Target	*	\$39,322,825	\$38,424,517

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

65

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area Summary - New Jersey, 42 Agencies

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Low Comorbidity	Periods with a Low Comorbidity adjustment	*	62,317	64,443
	All periods	*	167,968	175,158
	Proportion/Rate of Target to Denominator Discharges	*	37.1%	36.8%
	Average Length of Stay for Target	*	25.0	24.6
	Average Medicare Payment for Target	*	\$2,185	\$2,241
	Sum of Medicare Payments for Target	*	\$136,176,483	\$144,418,211
High Comorbidity	Periods with a High Comorbidity adjustment	*	28,134	27,981
	All periods	*	167,968	175,158
	Proportion/Rate of Target to Denominator Discharges	*	16.7%	16.0%
	Average Length of Stay for Target	*	26.4	26.1
	Average Medicare Payment for Target	*	\$2,372	\$2,437
	Sum of Medicare Payments for Target	*	\$66,723,997	\$68,177,539
Functional Impairment Medium	Periods with a Functional Impairment Level of Medium	*	46,801	48,063
	All periods	*	167,968	175,158
	Proportion/Rate of Target to Denominator Discharges	*	27.9%	27.4%
	Average Length of Stay for Target	*	24.1	23.8
	Average Medicare Payment for Target	*	\$2,149	\$2,160
	Sum of Medicare Payments for Target	*	\$100,561,278	\$103,813,427
Functional Impairment High	Periods with a Functional Impairment Level of High	*	93,194	101,960
	All periods	*	167,968	175,158
	Proportion/Rate of Target to Denominator Discharges	*	55.5%	58.2%
	Average Length of Stay for Target	*	24.7	24.5
	Average Medicare Payment for Target	*	\$2,368	\$2,407
	Sum of Medicare Payments for Target	*	\$220,638,580	\$245,375,929
Average Case Mix	Sum of case mix weight excl LUPA/PEP	106,716	142,248	140,053
	Count of Periods excl LUPA/PEP	106,958	116,099	114,125
	Proportion/Rate of Target to Denominator Discharges	1.00	1.23	1.23
Average Number of Periods	Count of periods	126,866	167,968	175,158
	Count of beneficiaries served	91,661	80,302	84,306
	Proportion/Rate of Target to Denominator Discharges	1.38	2.09	2.08
	Average Length of Stay for Target	36.1	24.5	24.2
	Average Medicare Payment for Target	\$3,164	\$2,202	\$2,247

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

66

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Average Number of Periods	Sum of Medicare Payments for Target	\$401,399,857	\$369,824,398	\$393,581,050
Periods with Low Visits	Periods with Low Visits	10,882	2,702	2,780
	All periods	126,866	167,968	175,158
	Proportion/Rate of Target to Denominator Discharges	8.6%	1.6%	1.6%
	Average Length of Stay for Target	24.5	20.1	20.4
	Average Outlier Payment Amount	\$1,727	\$3,013	\$3,031
	Sum of Medicare Payments for Target	\$18,794,716	\$8,140,481	\$8,427,192
Non-LUPA Payments	Periods w/o LUPA payment	110,889	118,814	114,945
	All periods	126,866	167,968	175,158
	Proportion/Rate of Target to Denominator Discharges	87.4%	70.7%	65.6%
	Average Length of Stay for Target	37.9	26.7	26.7
	Average Medicare Payment for Target	\$3,542	\$2,605	\$2,659
	Sum of Medicare Payments for Target	\$392,783,130	\$309,526,666	\$305,623,074
Outlier Payments	Dollar amt of outlier payments	\$3,531,007	\$4,097,704	\$3,031,243
	Dollar amt of total payments	\$401,399,857	\$369,824,398	\$393,581,050
	Proportion/Rate of Target to Denominator Discharges	0.9%	1.1%	0.8%
	Average Length of Stay for Target	55.7	29.3	29.3
	Average Medicare Payment for Target	\$992	\$623	\$581
Admission Source	Count of periods where admission source is Institutional	*	70,083	73,735
	All periods	*	167,968	175,158
	Proportion/Rate of Target to Denominator Discharges	*	41.7%	42.1%
	Average Length of Stay for Target	*	24.4	24.4
	Average Medicare Payment for Target	*	\$2,703	\$2,736
	Sum of Medicare Payments for Target	*	\$189,417,489	\$201,727,915

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

67

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area Summary - New Mexico, 79 Agencies

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Low Comorbidity	Periods with a Low Comorbidity adjustment	*	16,332	16,591
	All periods	*	48,988	49,582
	Proportion/Rate of Target to Denominator Discharges	*	33.3%	33.5%
	Average Length of Stay for Target	*	27.6	27.5
	Average Medicare Payment for Target	*	\$1,630	\$1,645
	Sum of Medicare Payments for Target	*	\$26,614,637	\$27,296,469
High Comorbidity	Periods with a High Comorbidity adjustment	*	6,022	5,893
	All periods	*	48,988	49,582
	Proportion/Rate of Target to Denominator Discharges	*	12.3%	11.9%
	Average Length of Stay for Target	*	28.0	28.0
	Average Medicare Payment for Target	*	\$1,853	\$1,878
	Sum of Medicare Payments for Target	*	\$11,161,651	\$11,068,614
Functional Impairment Medium	Periods with a Functional Impairment Level of Medium	*	14,755	15,928
	All periods	*	48,988	49,582
	Proportion/Rate of Target to Denominator Discharges	*	30.1%	32.1%
	Average Length of Stay for Target	*	27.2	27.4
	Average Medicare Payment for Target	*	\$1,658	\$1,633
	Sum of Medicare Payments for Target	*	\$24,467,984	\$26,016,551
Functional Impairment High	Periods with a Functional Impairment Level of High	*	15,940	18,382
	All periods	*	48,988	49,582
	Proportion/Rate of Target to Denominator Discharges	*	32.5%	37.1%
	Average Length of Stay for Target	*	27.4	27.4
	Average Medicare Payment for Target	*	\$1,879	\$1,864
	Sum of Medicare Payments for Target	*	\$29,945,749	\$34,271,482
Average Case Mix	Sum of case mix weight excl LUPA/PEP	29,050	35,154	34,776
	Count of Periods excl LUPA/PEP	28,236	33,728	33,244
	Proportion/Rate of Target to Denominator Discharges	1.03	1.04	1.05
Average Number of Periods	Count of periods	31,491	48,988	49,582
	Count of beneficiaries served	18,327	16,653	17,141
	Proportion/Rate of Target to Denominator Discharges	1.72	2.94	2.89
	Average Length of Stay for Target	48.5	27.3	27.3
	Average Medicare Payment for Target	\$2,796	\$1,625	\$1,636

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

68

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Average Number of Periods	Sum of Medicare Payments for Target	\$88,050,320	\$79,624,914	\$81,126,178
Periods with Low Visits	Periods with Low Visits	2,136	496	474
	All periods	31,491	48,988	49,582
	Proportion/Rate of Target to Denominator Discharges	6.8%	1.0%	1.0%
	Average Length of Stay for Target	34.8	24.4	24.6
	Average Outlier Payment Amount	\$1,394	\$2,334	\$2,330
	Sum of Medicare Payments for Target	\$2,976,909	\$1,157,575	\$1,104,630
Non-LUPA Payments	Periods w/o LUPA payment	28,721	34,609	33,423
	All periods	31,491	48,988	49,582
	Proportion/Rate of Target to Denominator Discharges	91.2%	70.6%	67.4%
	Average Length of Stay for Target	50.5	28.6	28.7
	Average Medicare Payment for Target	\$3,025	\$1,848	\$1,843
	Sum of Medicare Payments for Target	\$86,887,703	\$63,970,674	\$61,605,286
Outlier Payments	Dollar amt of outlier payments	\$1,195,565	\$1,641,300	\$1,366,013
	Dollar amt of total payments	\$88,050,320	\$79,624,914	\$81,126,178
	Proportion/Rate of Target to Denominator Discharges	1.4%	2.1%	1.7%
	Average Length of Stay for Target	58.0	29.7	29.7
	Average Medicare Payment for Target	\$969	\$577	\$544
Admission Source	Count of periods where admission source is Institutional	*	10,675	10,038
	All periods	*	48,988	49,582
	Proportion/Rate of Target to Denominator Discharges	*	21.8%	20.2%
	Average Length of Stay for Target	*	26.8	26.9
	Average Medicare Payment for Target	*	\$2,259	\$2,261
	Sum of Medicare Payments for Target	*	\$24,109,937	\$22,692,740

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

69

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area Summary - Nevada, 162 Agencies

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Low Comorbidity	Periods with a Low Comorbidity adjustment	*	35,428	36,775
	All periods	*	111,330	118,529
	Proportion/Rate of Target to Denominator Discharges	*	31.8%	31.0%
	Average Length of Stay for Target	*	27.7	27.8
	Average Medicare Payment for Target	*	\$1,974	\$1,970
	Sum of Medicare Payments for Target	*	\$69,933,840	\$72,462,269
High Comorbidity	Periods with a High Comorbidity adjustment	*	10,928	11,051
	All periods	*	111,330	118,529
	Proportion/Rate of Target to Denominator Discharges	*	9.8%	9.3%
	Average Length of Stay for Target	*	27.9	27.9
	Average Medicare Payment for Target	*	\$2,270	\$2,260
	Sum of Medicare Payments for Target	*	\$24,806,717	\$24,970,115
Functional Impairment Medium	Periods with a Functional Impairment Level of Medium	*	35,879	38,313
	All periods	*	111,330	118,529
	Proportion/Rate of Target to Denominator Discharges	*	32.2%	32.3%
	Average Length of Stay for Target	*	27.6	27.7
	Average Medicare Payment for Target	*	\$1,970	\$1,933
	Sum of Medicare Payments for Target	*	\$70,697,938	\$74,053,797
Functional Impairment High	Periods with a Functional Impairment Level of High	*	35,527	39,170
	All periods	*	111,330	118,529
	Proportion/Rate of Target to Denominator Discharges	*	31.9%	33.0%
	Average Length of Stay for Target	*	27.3	27.4
	Average Medicare Payment for Target	*	\$2,223	\$2,215
	Sum of Medicare Payments for Target	*	\$78,988,263	\$86,779,299
Average Case Mix	Sum of case mix weight excl LUPA/PEP	60,612	77,678	75,445
	Count of Periods excl LUPA/PEP	61,305	77,474	76,058
	Proportion/Rate of Target to Denominator Discharges	0.99	1.00	0.99
Average Number of Periods	Count of periods	66,980	111,330	118,529
	Count of beneficiaries served	36,731	33,151	34,432
	Proportion/Rate of Target to Denominator Discharges	1.82	3.36	3.44
	Average Length of Stay for Target	49.2	27.6	27.7
	Average Medicare Payment for Target	\$3,332	\$1,906	\$1,892

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

70

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Average Number of Periods	Sum of Medicare Payments for Target	\$223,157,001	\$212,153,317	\$224,262,596
Periods with Low Visits	Periods with Low Visits	3,234	1,032	1,058
	All periods	66,980	111,330	118,529
	Proportion/Rate of Target to Denominator Discharges	4.8%	0.9%	0.9%
	Average Length of Stay for Target	29.9	24.9	24.6
	Average Outlier Payment Amount	\$1,776	\$2,773	\$2,742
	Sum of Medicare Payments for Target	\$5,744,091	\$2,861,927	\$2,901,066
Non-LUPA Payments	Periods w/o LUPA payment	63,080	78,588	76,545
	All periods	66,980	111,330	118,529
	Proportion/Rate of Target to Denominator Discharges	94.2%	70.6%	64.6%
	Average Length of Stay for Target	50.9	28.8	28.9
	Average Medicare Payment for Target	\$3,508	\$2,112	\$2,095
	Sum of Medicare Payments for Target	\$221,304,219	\$165,992,412	\$160,367,717
Outlier Payments	Dollar amt of outlier payments	\$6,579,869	\$4,870,388	\$4,122,779
	Dollar amt of total payments	\$223,157,001	\$212,153,317	\$224,262,596
	Proportion/Rate of Target to Denominator Discharges	2.9%	2.3%	1.8%
	Average Length of Stay for Target	57.1	29.7	29.7
	Average Medicare Payment for Target	\$2,167	\$956	\$962
Admission Source	Count of periods where admission source is Institutional	*	20,552	20,240
	All periods	*	111,330	118,529
	Proportion/Rate of Target to Denominator Discharges	*	18.5%	17.1%
	Average Length of Stay for Target	*	26.1	26.3
	Average Medicare Payment for Target	*	\$2,637	\$2,623
	Sum of Medicare Payments for Target	*	\$54,202,861	\$53,089,727

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

71

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area Summary - New York, 117 Agencies

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Low Comorbidity	Periods with a Low Comorbidity adjustment	*	115,935	123,617
	All periods	*	327,103	343,622
	Proportion/Rate of Target to Denominator Discharges	*	35.4%	36.0%
	Average Length of Stay for Target	*	24.6	24.5
	Average Medicare Payment for Target	*	\$2,222	\$2,296
	Sum of Medicare Payments for Target	*	\$257,645,137	\$283,871,344
High Comorbidity	Periods with a High Comorbidity adjustment	*	51,446	51,593
	All periods	*	327,103	343,622
	Proportion/Rate of Target to Denominator Discharges	*	15.7%	15.0%
	Average Length of Stay for Target	*	26.2	26.2
	Average Medicare Payment for Target	*	\$2,405	\$2,487
	Sum of Medicare Payments for Target	*	\$123,702,162	\$128,289,137
Functional Impairment Medium	Periods with a Functional Impairment Level of Medium	*	104,178	112,209
	All periods	*	327,103	343,622
	Proportion/Rate of Target to Denominator Discharges	*	31.8%	32.7%
	Average Length of Stay for Target	*	24.0	24.0
	Average Medicare Payment for Target	*	\$2,195	\$2,268
	Sum of Medicare Payments for Target	*	\$228,660,586	\$254,450,364
Functional Impairment High	Periods with a Functional Impairment Level of High	*	164,575	175,340
	All periods	*	327,103	343,622
	Proportion/Rate of Target to Denominator Discharges	*	50.3%	51.0%
	Average Length of Stay for Target	*	24.4	24.2
	Average Medicare Payment for Target	*	\$2,419	\$2,498
	Sum of Medicare Payments for Target	*	\$398,143,854	\$437,997,279
Average Case Mix	Sum of case mix weight excl LUPA/PEP	200,680	280,921	280,100
	Count of Periods excl LUPA/PEP	209,560	231,251	231,533
	Proportion/Rate of Target to Denominator Discharges	0.96	1.21	1.21
Average Number of Periods	Count of periods	248,316	327,103	343,622
	Count of beneficiaries served	179,342	154,957	161,266
	Proportion/Rate of Target to Denominator Discharges	1.38	2.11	2.13
	Average Length of Stay for Target	36.1	24.3	24.2
	Average Medicare Payment for Target	\$3,094	\$2,232	\$2,309

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

72

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Average Number of Periods	Sum of Medicare Payments for Target	\$768,348,014	\$729,932,760	\$793,393,500
Periods with Low Visits	Periods with Low Visits	20,588	4,419	4,821
	All periods	248,316	327,103	343,622
	Proportion/Rate of Target to Denominator Discharges	8.3%	1.4%	1.4%
	Average Length of Stay for Target	23.7	20.3	20.4
	Average Outlier Payment Amount	\$1,703	\$2,906	\$3,038
	Sum of Medicare Payments for Target	\$35,070,125	\$12,842,173	\$14,646,341
Non-LUPA Payments	Periods w/o LUPA payment	218,472	237,202	233,383
	All periods	248,316	327,103	343,622
	Proportion/Rate of Target to Denominator Discharges	88.0%	72.5%	67.9%
	Average Length of Stay for Target	38.2	26.7	26.8
	Average Medicare Payment for Target	\$3,446	\$2,622	\$2,705
	Sum of Medicare Payments for Target	\$752,806,388	\$621,861,018	\$631,230,052
Outlier Payments	Dollar amt of outlier payments	\$31,856,167	\$23,896,017	\$20,200,478
	Dollar amt of total payments	\$768,348,014	\$729,932,760	\$793,393,500
	Proportion/Rate of Target to Denominator Discharges	4.1%	3.3%	2.5%
	Average Length of Stay for Target	52.4	29.2	29.3
	Average Medicare Payment for Target	\$1,777	\$1,040	\$1,037
Admission Source	Count of periods where admission source is Institutional	*	133,687	135,787
	All periods	*	327,103	343,622
	Proportion/Rate of Target to Denominator Discharges	*	40.9%	39.5%
	Average Length of Stay for Target	*	24.1	24.3
	Average Medicare Payment for Target	*	\$2,740	\$2,850
	Sum of Medicare Payments for Target	*	\$366,284,757	\$387,018,838

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

73

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area Summary - Ohio, 489 Agencies

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Low Comorbidity	Periods with a Low Comorbidity adjustment	*	104,503	102,579
	All periods	*	263,078	256,379
	Proportion/Rate of Target to Denominator Discharges	*	39.7%	40.0%
	Average Length of Stay for Target	*	26.2	26.1
	Average Medicare Payment for Target	*	\$1,685	\$1,698
	Sum of Medicare Payments for Target	*	\$176,040,959	\$174,167,208
High Comorbidity	Periods with a High Comorbidity adjustment	*	41,193	40,323
	All periods	*	263,078	256,379
	Proportion/Rate of Target to Denominator Discharges	*	15.7%	15.7%
	Average Length of Stay for Target	*	27.0	26.9
	Average Medicare Payment for Target	*	\$1,869	\$1,882
	Sum of Medicare Payments for Target	*	\$77,002,583	\$75,904,217
Functional Impairment Medium	Periods with a Functional Impairment Level of Medium	*	99,275	94,905
	All periods	*	263,078	256,379
	Proportion/Rate of Target to Denominator Discharges	*	37.7%	37.0%
	Average Length of Stay for Target	*	25.9	25.8
	Average Medicare Payment for Target	*	\$1,694	\$1,701
	Sum of Medicare Payments for Target	*	\$168,196,361	\$161,411,938
Functional Impairment High	Periods with a Functional Impairment Level of High	*	99,179	99,898
	All periods	*	263,078	256,379
	Proportion/Rate of Target to Denominator Discharges	*	37.7%	39.0%
	Average Length of Stay for Target	*	25.9	25.8
	Average Medicare Payment for Target	*	\$1,890	\$1,892
	Sum of Medicare Payments for Target	*	\$187,409,833	\$188,966,914
Average Case Mix	Sum of case mix weight excl LUPA/PEP	182,071	198,530	191,978
	Count of Periods excl LUPA/PEP	169,666	176,396	170,651
	Proportion/Rate of Target to Denominator Discharges	1.07	1.13	1.12
Average Number of Periods	Count of periods	191,826	263,078	256,379
	Count of beneficiaries served	121,493	105,436	105,036
	Proportion/Rate of Target to Denominator Discharges	1.58	2.50	2.44
	Average Length of Stay for Target	43.8	26.0	25.8
	Average Medicare Payment for Target	\$2,843	\$1,694	\$1,704

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

74

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Average Number of Periods	Sum of Medicare Payments for Target	\$545,387,767	\$445,568,714	\$436,840,703
Periods with Low Visits	Periods with Low Visits	13,347	2,978	3,146
	All periods	191,826	263,078	256,379
	Proportion/Rate of Target to Denominator Discharges	7.0%	1.1%	1.2%
	Average Length of Stay for Target	28.8	21.5	21.3
	Average Outlier Payment Amount	\$1,398	\$2,317	\$2,371
	Sum of Medicare Payments for Target	\$18,664,991	\$6,898,552	\$7,459,838
Non-LUPA Payments	Periods w/o LUPA payment	174,120	187,785	171,908
	All periods	191,826	263,078	256,379
	Proportion/Rate of Target to Denominator Discharges	90.8%	71.4%	67.1%
	Average Length of Stay for Target	45.9	27.7	27.7
	Average Medicare Payment for Target	\$3,091	\$1,957	\$1,965
	Sum of Medicare Payments for Target	\$538,131,232	\$367,449,878	\$337,796,136
Outlier Payments	Dollar amt of outlier payments	\$10,885,548	\$10,576,655	\$7,070,839
	Dollar amt of total payments	\$545,387,767	\$445,568,714	\$436,840,703
	Proportion/Rate of Target to Denominator Discharges	2.0%	2.4%	1.6%
	Average Length of Stay for Target	57.4	29.5	29.5
	Average Medicare Payment for Target	\$1,096	\$594	\$535
Admission Source	Count of periods where admission source is Institutional	*	83,186	79,769
	All periods	*	263,078	256,379
	Proportion/Rate of Target to Denominator Discharges	*	31.6%	31.1%
	Average Length of Stay for Target	*	25.8	25.6
	Average Medicare Payment for Target	*	\$2,219	\$2,220
	Sum of Medicare Payments for Target	*	\$184,568,322	\$177,091,913

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

75

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area Summary - Oklahoma, 247 Agencies

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Low Comorbidity	Periods with a Low Comorbidity adjustment	*	117,443	112,864
	All periods	*	296,291	285,174
	Proportion/Rate of Target to Denominator Discharges	*	39.6%	39.6%
	Average Length of Stay for Target	*	28.7	28.7
	Average Medicare Payment for Target	*	\$1,423	\$1,453
	Sum of Medicare Payments for Target	*	\$167,170,548	\$163,983,390
High Comorbidity	Periods with a High Comorbidity adjustment	*	40,756	38,098
	All periods	*	296,291	285,174
	Proportion/Rate of Target to Denominator Discharges	*	13.8%	13.4%
	Average Length of Stay for Target	*	28.8	28.7
	Average Medicare Payment for Target	*	\$1,634	\$1,683
	Sum of Medicare Payments for Target	*	\$66,602,336	\$64,114,746
Functional Impairment Medium	Periods with a Functional Impairment Level of Medium	*	101,352	97,875
	All periods	*	296,291	285,174
	Proportion/Rate of Target to Denominator Discharges	*	34.2%	34.3%
	Average Length of Stay for Target	*	28.5	28.5
	Average Medicare Payment for Target	*	\$1,430	\$1,433
	Sum of Medicare Payments for Target	*	\$144,890,541	\$140,227,548
Functional Impairment High	Periods with a Functional Impairment Level of High	*	105,365	115,770
	All periods	*	296,291	285,174
	Proportion/Rate of Target to Denominator Discharges	*	35.6%	40.6%
	Average Length of Stay for Target	*	28.3	28.3
	Average Medicare Payment for Target	*	\$1,673	\$1,669
	Sum of Medicare Payments for Target	*	\$176,315,872	\$193,207,420
Average Case Mix	Sum of case mix weight excl LUPA/PEP	150,464	174,389	158,005
	Count of Periods excl LUPA/PEP	164,619	175,483	158,030
	Proportion/Rate of Target to Denominator Discharges	0.91	0.99	1.00
Average Number of Periods	Count of periods	177,837	296,291	285,174
	Count of beneficiaries served	72,722	67,366	65,319
	Proportion/Rate of Target to Denominator Discharges	2.45	4.40	4.37
	Average Length of Stay for Target	53.6	28.5	28.5
	Average Medicare Payment for Target	\$2,413	\$1,428	\$1,457

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

76

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Average Number of Periods	Sum of Medicare Payments for Target	\$429,177,948	\$423,016,124	\$415,544,505
Periods with Low Visits	Periods with Low Visits	12,281	2,001	1,824
	All periods	177,837	296,291	285,174
	Proportion/Rate of Target to Denominator Discharges	6.9%	0.7%	0.6%
	Average Length of Stay for Target	46.6	26.0	25.9
	Average Outlier Payment Amount	\$1,365	\$2,155	\$2,206
	Sum of Medicare Payments for Target	\$16,758,858	\$4,311,508	\$4,022,992
Non-LUPA Payments	Periods w/o LUPA payment	167,287	178,719	158,874
	All periods	177,837	296,291	285,174
	Proportion/Rate of Target to Denominator Discharges	94.1%	60.3%	55.7%
	Average Length of Stay for Target	55.0	29.2	29.1
	Average Medicare Payment for Target	\$2,542	\$1,634	\$1,657
	Sum of Medicare Payments for Target	\$425,197,369	\$292,058,680	\$263,260,719
Outlier Payments	Dollar amt of outlier payments	\$11,473,153	\$8,889,151	\$6,248,657
	Dollar amt of total payments	\$429,177,948	\$423,016,124	\$415,544,505
	Proportion/Rate of Target to Denominator Discharges	2.7%	2.1%	1.5%
	Average Length of Stay for Target	58.4	29.8	29.8
	Average Medicare Payment for Target	\$1,764	\$813	\$758
Admission Source	Count of periods where admission source is Institutional	*	40,888	37,828
	All periods	*	296,291	285,174
	Proportion/Rate of Target to Denominator Discharges	*	13.8%	13.3%
	Average Length of Stay for Target	*	27.1	27.0
	Average Medicare Payment for Target	*	\$2,122	\$2,153
	Sum of Medicare Payments for Target	*	\$86,779,664	\$81,425,992

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

77

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area Summary - Oregon, 56 Agencies

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Low Comorbidity	Periods with a Low Comorbidity adjustment	*	23,579	24,155
	All periods	*	60,188	62,302
	Proportion/Rate of Target to Denominator Discharges	*	39.2%	38.8%
	Average Length of Stay for Target	*	26.3	26.3
	Average Medicare Payment for Target	*	\$1,963	\$2,012
	Sum of Medicare Payments for Target	*	\$46,281,748	\$48,606,103
High Comorbidity	Periods with a High Comorbidity adjustment	*	11,799	12,526
	All periods	*	60,188	62,302
	Proportion/Rate of Target to Denominator Discharges	*	19.6%	20.1%
	Average Length of Stay for Target	*	27.4	27.3
	Average Medicare Payment for Target	*	\$2,157	\$2,208
	Sum of Medicare Payments for Target	*	\$25,456,146	\$27,656,389
Functional Impairment Medium	Periods with a Functional Impairment Level of Medium	*	17,407	17,824
	All periods	*	60,188	62,302
	Proportion/Rate of Target to Denominator Discharges	*	28.9%	28.6%
	Average Length of Stay for Target	*	26.2	26.0
	Average Medicare Payment for Target	*	\$1,998	\$2,034
	Sum of Medicare Payments for Target	*	\$34,778,257	\$36,250,512
Functional Impairment High	Periods with a Functional Impairment Level of High	*	24,992	27,110
	All periods	*	60,188	62,302
	Proportion/Rate of Target to Denominator Discharges	*	41.5%	43.5%
	Average Length of Stay for Target	*	26.5	26.6
	Average Medicare Payment for Target	*	\$2,182	\$2,218
	Sum of Medicare Payments for Target	*	\$54,535,821	\$60,136,093
Average Case Mix	Sum of case mix weight excl LUPA/PEP	32,303	44,871	43,725
	Count of Periods excl LUPA/PEP	31,923	39,086	38,375
	Proportion/Rate of Target to Denominator Discharges	1.01	1.15	1.14
Average Number of Periods	Count of periods	37,753	60,188	62,302
	Count of beneficiaries served	25,274	24,290	24,886
	Proportion/Rate of Target to Denominator Discharges	1.49	2.48	2.50
	Average Length of Stay for Target	44.3	26.3	26.2
	Average Medicare Payment for Target	\$3,112	\$1,977	\$2,017

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

78

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Average Number of Periods	Sum of Medicare Payments for Target	\$117,500,154	\$118,992,976	\$125,654,672
Periods with Low Visits	Periods with Low Visits	3,549	1,108	1,135
	All periods	37,753	60,188	62,302
	Proportion/Rate of Target to Denominator Discharges	9.4%	1.8%	1.8%
	Average Length of Stay for Target	31.8	25.2	25.6
	Average Outlier Payment Amount	\$1,695	\$2,799	\$2,827
	Sum of Medicare Payments for Target	\$6,013,918	\$3,100,742	\$3,208,939
Non-LUPA Payments	Periods w/o LUPA payment	32,616	39,691	38,536
	All periods	37,753	60,188	62,302
	Proportion/Rate of Target to Denominator Discharges	86.4%	65.9%	61.9%
	Average Length of Stay for Target	47.0	28.4	28.4
	Average Medicare Payment for Target	\$3,522	\$2,368	\$2,393
	Sum of Medicare Payments for Target	\$114,880,138	\$93,968,725	\$92,214,522
Outlier Payments	Dollar amt of outlier payments	\$1,380,084	\$1,384,517	\$1,083,540
	Dollar amt of total payments	\$117,500,154	\$118,992,976	\$125,654,672
	Proportion/Rate of Target to Denominator Discharges	1.2%	1.2%	0.9%
	Average Length of Stay for Target	57.9	29.7	29.7
	Average Medicare Payment for Target	\$896	\$578	\$549
Admission Source	Count of periods where admission source is Institutional	*	15,906	15,114
	All periods	*	60,188	62,302
	Proportion/Rate of Target to Denominator Discharges	*	26.4%	24.3%
	Average Length of Stay for Target	*	26.8	26.8
	Average Medicare Payment for Target	*	\$2,636	\$2,689
	Sum of Medicare Payments for Target	*	\$41,927,231	\$40,646,325

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

79

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area Summary - Pennsylvania, 322 Agencies

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Low Comorbidity	Periods with a Low Comorbidity adjustment	*	118,202	122,830
	All periods	*	312,655	317,865
	Proportion/Rate of Target to Denominator Discharges	*	37.8%	38.6%
	Average Length of Stay for Target	*	25.6	25.5
	Average Medicare Payment for Target	*	\$1,810	\$1,841
	Sum of Medicare Payments for Target	*	\$213,960,042	\$226,080,991
High Comorbidity	Periods with a High Comorbidity adjustment	*	50,149	49,615
	All periods	*	312,655	317,865
	Proportion/Rate of Target to Denominator Discharges	*	16.0%	15.6%
	Average Length of Stay for Target	*	26.8	26.7
	Average Medicare Payment for Target	*	\$1,985	\$2,037
	Sum of Medicare Payments for Target	*	\$99,539,453	\$101,076,931
Functional Impairment Medium	Periods with a Functional Impairment Level of Medium	*	98,877	99,906
	All periods	*	312,655	317,865
	Proportion/Rate of Target to Denominator Discharges	*	31.6%	31.4%
	Average Length of Stay for Target	*	25.1	25.0
	Average Medicare Payment for Target	*	\$1,816	\$1,823
	Sum of Medicare Payments for Target	*	\$179,607,889	\$182,148,746
Functional Impairment High	Periods with a Functional Impairment Level of High	*	133,750	147,154
	All periods	*	312,655	317,865
	Proportion/Rate of Target to Denominator Discharges	*	42.8%	46.3%
	Average Length of Stay for Target	*	25.5	25.4
	Average Medicare Payment for Target	*	\$2,004	\$2,028
	Sum of Medicare Payments for Target	*	\$267,999,364	\$298,385,396
Average Case Mix	Sum of case mix weight excl LUPA/PEP	194,131	256,136	247,003
	Count of Periods excl LUPA/PEP	186,970	220,421	212,376
	Proportion/Rate of Target to Denominator Discharges	1.04	1.16	1.16
Average Number of Periods	Count of periods	216,947	312,655	317,865
	Count of beneficiaries served	147,234	133,288	136,685
	Proportion/Rate of Target to Denominator Discharges	1.47	2.35	2.33
	Average Length of Stay for Target	40.6	25.3	25.2
	Average Medicare Payment for Target	\$2,830	\$1,809	\$1,838

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

80

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Average Number of Periods	Sum of Medicare Payments for Target	\$613,907,691	\$565,471,148	\$584,353,695
Periods with Low Visits	Periods with Low Visits	17,157	4,108	4,355
	All periods	216,947	312,655	317,865
	Proportion/Rate of Target to Denominator Discharges	7.9%	1.3%	1.4%
	Average Length of Stay for Target	25.2	20.9	21.0
	Average Outlier Payment Amount	\$1,449	\$2,430	\$2,472
	Sum of Medicare Payments for Target	\$24,868,398	\$9,984,049	\$10,767,353
Non-LUPA Payments	Periods w/o LUPA payment	193,920	224,718	213,946
	All periods	216,947	312,655	317,865
	Proportion/Rate of Target to Denominator Discharges	89.4%	71.9%	67.3%
	Average Length of Stay for Target	42.6	27.3	27.4
	Average Medicare Payment for Target	\$3,114	\$2,104	\$2,131
	Sum of Medicare Payments for Target	\$603,876,273	\$472,879,257	\$455,982,819
Outlier Payments	Dollar amt of outlier payments	\$9,238,837	\$11,884,650	\$9,598,919
	Dollar amt of total payments	\$613,907,691	\$565,471,148	\$584,353,695
	Proportion/Rate of Target to Denominator Discharges	1.5%	2.1%	1.6%
	Average Length of Stay for Target	56.4	29.4	29.5
	Average Medicare Payment for Target	\$990	\$606	\$574
Admission Source	Count of periods where admission source is Institutional	*	114,022	112,047
	All periods	*	312,655	317,865
	Proportion/Rate of Target to Denominator Discharges	*	36.5%	35.2%
	Average Length of Stay for Target	*	25.3	25.4
	Average Medicare Payment for Target	*	\$2,308	\$2,353
	Sum of Medicare Payments for Target	*	\$263,143,545	\$263,634,003

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

81

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area Summary - Puerto Rico, 36 Agencies

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Low Comorbidity	Periods with a Low Comorbidity adjustment	*	3,373	3,074
	All periods	*	12,027	12,030
	Proportion/Rate of Target to Denominator Discharges	*	28.0%	25.6%
	Average Length of Stay for Target	*	26.7	27.1
	Average Medicare Payment for Target	*	\$1,047	\$1,029
	Sum of Medicare Payments for Target	*	\$3,532,292	\$3,163,263
High Comorbidity	Periods with a High Comorbidity adjustment	*	1,387	1,289
	All periods	*	12,027	12,030
	Proportion/Rate of Target to Denominator Discharges	*	11.5%	10.7%
	Average Length of Stay for Target	*	27.1	27.6
	Average Medicare Payment for Target	*	\$1,174	\$1,163
	Sum of Medicare Payments for Target	*	\$1,627,898	\$1,499,686
Functional Impairment Medium	Periods with a Functional Impairment Level of Medium	*	2,100	2,189
	All periods	*	12,027	12,030
	Proportion/Rate of Target to Denominator Discharges	*	17.5%	18.2%
	Average Length of Stay for Target	*	26.0	26.1
	Average Medicare Payment for Target	*	\$1,051	\$1,028
	Sum of Medicare Payments for Target	*	\$2,206,901	\$2,249,872
Functional Impairment High	Periods with a Functional Impairment Level of High	*	6,016	5,873
	All periods	*	12,027	12,030
	Proportion/Rate of Target to Denominator Discharges	*	50.0%	48.8%
	Average Length of Stay for Target	*	26.6	26.8
	Average Medicare Payment for Target	*	\$1,114	\$1,078
	Sum of Medicare Payments for Target	*	\$6,698,969	\$6,328,356
Average Case Mix	Sum of case mix weight excl LUPA/PEP	6,294	9,628	9,683
	Count of Periods excl LUPA/PEP	6,582	8,323	8,456
	Proportion/Rate of Target to Denominator Discharges	0.96	1.16	1.15
Average Number of Periods	Count of periods	7,823	12,027	12,030
	Count of beneficiaries served	5,060	4,710	4,594
	Proportion/Rate of Target to Denominator Discharges	1.55	2.55	2.62
	Average Length of Stay for Target	46.0	26.3	26.4
	Average Medicare Payment for Target	\$1,543	\$1,034	\$998

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

82

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Average Number of Periods	Sum of Medicare Payments for Target	\$12,072,330	\$12,437,979	\$12,008,892
Periods with Low Visits	Periods with Low Visits	833	90	88
	All periods	7,823	12,027	12,030
	Proportion/Rate of Target to Denominator Discharges	10.6%	0.7%	0.7%
	Average Length of Stay for Target	43.4	23.3	24.0
	Average Outlier Payment Amount	\$707	\$1,435	\$1,312
	Sum of Medicare Payments for Target	\$589,120	\$129,144	\$115,460
Non-LUPA Payments	Periods w/o LUPA payment	6,766	8,927	8,502
	All periods	7,823	12,027	12,030
	Proportion/Rate of Target to Denominator Discharges	86.5%	74.2%	70.7%
	Average Length of Stay for Target	47.8	28.0	28.2
	Average Medicare Payment for Target	\$1,745	\$1,194	\$1,147
	Sum of Medicare Payments for Target	\$11,804,079	\$10,655,371	\$9,747,584
Outlier Payments	Dollar amt of outlier payments	\$287,508	\$323,905	\$272,676
	Dollar amt of total payments	\$12,072,330	\$12,437,979	\$12,008,892
	Proportion/Rate of Target to Denominator Discharges	2.4%	2.6%	2.3%
	Average Length of Stay for Target	56.4	29.5	29.5
	Average Medicare Payment for Target	\$643	\$433	\$459
Admission Source	Count of periods where admission source is Institutional	*	2,655	2,568
	All periods	*	12,027	12,030
	Proportion/Rate of Target to Denominator Discharges	*	22.1%	21.3%
	Average Length of Stay for Target	*	26.9	27.3
	Average Medicare Payment for Target	*	\$1,412	\$1,360
	Sum of Medicare Payments for Target	*	\$3,748,258	\$3,492,470

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

83

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area Summary - Rhode Island, 22 Agencies

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Low Comorbidity	Periods with a Low Comorbidity adjustment	*	10,139	10,748
	All periods	*	28,220	29,077
	Proportion/Rate of Target to Denominator Discharges	*	35.9%	37.0%
	Average Length of Stay for Target	*	25.8	25.6
	Average Medicare Payment for Target	*	\$1,991	\$1,976
	Sum of Medicare Payments for Target	*	\$20,185,712	\$21,234,408
High Comorbidity	Periods with a High Comorbidity adjustment	*	3,929	3,843
	All periods	*	28,220	29,077
	Proportion/Rate of Target to Denominator Discharges	*	13.9%	13.2%
	Average Length of Stay for Target	*	26.9	26.6
	Average Medicare Payment for Target	*	\$2,176	\$2,195
	Sum of Medicare Payments for Target	*	\$8,550,725	\$8,434,814
Functional Impairment Medium	Periods with a Functional Impairment Level of Medium	*	9,152	9,612
	All periods	*	28,220	29,077
	Proportion/Rate of Target to Denominator Discharges	*	32.4%	33.1%
	Average Length of Stay for Target	*	25.2	25.1
	Average Medicare Payment for Target	*	\$1,965	\$1,933
	Sum of Medicare Payments for Target	*	\$17,982,788	\$18,580,529
Functional Impairment High	Periods with a Functional Impairment Level of High	*	12,616	13,989
	All periods	*	28,220	29,077
	Proportion/Rate of Target to Denominator Discharges	*	44.7%	48.1%
	Average Length of Stay for Target	*	25.2	25.0
	Average Medicare Payment for Target	*	\$2,207	\$2,187
	Sum of Medicare Payments for Target	*	\$27,846,559	\$30,598,271
Average Case Mix	Sum of case mix weight excl LUPA/PEP	18,234	24,267	23,560
	Count of Periods excl LUPA/PEP	17,133	21,287	20,515
	Proportion/Rate of Target to Denominator Discharges	1.06	1.14	1.15
Average Number of Periods	Count of periods	19,558	28,220	29,077
	Count of beneficiaries served	13,248	11,726	12,292
	Proportion/Rate of Target to Denominator Discharges	1.48	2.41	2.37
	Average Length of Stay for Target	40.6	25.4	25.1
	Average Medicare Payment for Target	\$3,192	\$1,993	\$1,983

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

84

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Average Number of Periods	Sum of Medicare Payments for Target	\$62,427,575	\$56,252,338	\$57,664,388
Periods with Low Visits	Periods with Low Visits	1,329	357	385
	All periods	19,558	28,220	29,077
	Proportion/Rate of Target to Denominator Discharges	6.8%	1.3%	1.3%
	Average Length of Stay for Target	22.0	19.7	20.3
	Average Outlier Payment Amount	\$1,526	\$2,663	\$2,679
	Sum of Medicare Payments for Target	\$2,028,646	\$950,861	\$1,031,508
Non-LUPA Payments	Periods w/o LUPA payment	17,717	21,845	20,649
	All periods	19,558	28,220	29,077
	Proportion/Rate of Target to Denominator Discharges	90.6%	77.4%	71.0%
	Average Length of Stay for Target	43.0	27.4	27.4
	Average Medicare Payment for Target	\$3,474	\$2,244	\$2,246
	Sum of Medicare Payments for Target	\$61,544,127	\$49,015,319	\$46,380,374
Outlier Payments	Dollar amt of outlier payments	\$1,478,531	\$1,809,127	\$1,309,312
	Dollar amt of total payments	\$62,427,575	\$56,252,338	\$57,664,388
	Proportion/Rate of Target to Denominator Discharges	2.4%	3.2%	2.3%
	Average Length of Stay for Target	57.0	29.5	29.5
	Average Medicare Payment for Target	\$1,035	\$633	\$595
Admission Source	Count of periods where admission source is Institutional	*	9,710	9,784
	All periods	*	28,220	29,077
	Proportion/Rate of Target to Denominator Discharges	*	34.4%	33.6%
	Average Length of Stay for Target	*	25.3	25.1
	Average Medicare Payment for Target	*	\$2,538	\$2,526
	Sum of Medicare Payments for Target	*	\$24,643,200	\$24,713,121

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

85

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area Summary - South Carolina, 75 Agencies

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Low Comorbidity	Periods with a Low Comorbidity adjustment	*	65,822	68,721
	All periods	*	175,668	182,014
	Proportion/Rate of Target to Denominator Discharges	*	37.5%	37.8%
	Average Length of Stay for Target	*	26.9	26.9
	Average Medicare Payment for Target	*	\$1,631	\$1,666
	Sum of Medicare Payments for Target	*	\$107,338,386	\$114,522,898
High Comorbidity	Periods with a High Comorbidity adjustment	*	26,142	24,734
	All periods	*	175,668	182,014
	Proportion/Rate of Target to Denominator Discharges	*	14.9%	13.6%
	Average Length of Stay for Target	*	27.6	27.6
	Average Medicare Payment for Target	*	\$1,798	\$1,858
	Sum of Medicare Payments for Target	*	\$47,013,990	\$45,950,646
Functional Impairment Medium	Periods with a Functional Impairment Level of Medium	*	52,748	54,998
	All periods	*	175,668	182,014
	Proportion/Rate of Target to Denominator Discharges	*	30.0%	30.2%
	Average Length of Stay for Target	*	26.3	26.3
	Average Medicare Payment for Target	*	\$1,628	\$1,634
	Sum of Medicare Payments for Target	*	\$85,886,783	\$89,889,923
Functional Impairment High	Periods with a Functional Impairment Level of High	*	81,121	89,925
	All periods	*	175,668	182,014
	Proportion/Rate of Target to Denominator Discharges	*	46.2%	49.4%
	Average Length of Stay for Target	*	26.7	26.7
	Average Medicare Payment for Target	*	\$1,830	\$1,840
	Sum of Medicare Payments for Target	*	\$148,418,083	\$165,431,299
Average Case Mix	Sum of case mix weight excl LUPA/PEP	101,534	136,483	130,793
	Count of Periods excl LUPA/PEP	93,764	120,031	114,536
	Proportion/Rate of Target to Denominator Discharges	1.08	1.14	1.14
Average Number of Periods	Count of periods	106,414	175,668	182,014
	Count of beneficiaries served	69,588	65,980	68,659
	Proportion/Rate of Target to Denominator Discharges	1.53	2.66	2.65
	Average Length of Stay for Target	44.2	26.6	26.5
	Average Medicare Payment for Target	\$2,753	\$1,639	\$1,665

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

86

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Average Number of Periods	Sum of Medicare Payments for Target	\$292,979,332	\$287,947,322	\$303,079,226
Periods with Low Visits	Periods with Low Visits	7,913	2,295	2,675
	All periods	106,414	175,668	182,014
	Proportion/Rate of Target to Denominator Discharges	7.4%	1.3%	1.5%
	Average Length of Stay for Target	27.5	22.9	23.9
	Average Outlier Payment Amount	\$1,338	\$2,303	\$2,368
	Sum of Medicare Payments for Target	\$10,586,540	\$5,285,342	\$6,335,195
Non-LUPA Payments	Periods w/o LUPA payment	96,088	122,007	115,291
	All periods	106,414	175,668	182,014
	Proportion/Rate of Target to Denominator Discharges	90.3%	69.5%	63.3%
	Average Length of Stay for Target	46.4	28.2	28.2
	Average Medicare Payment for Target	\$3,004	\$1,894	\$1,933
	Sum of Medicare Payments for Target	\$288,635,536	\$231,024,094	\$222,841,520
Outlier Payments	Dollar amt of outlier payments	\$1,056,440	\$2,015,845	\$996,008
	Dollar amt of total payments	\$292,979,332	\$287,947,322	\$303,079,226
	Proportion/Rate of Target to Denominator Discharges	0.4%	0.7%	0.3%
	Average Length of Stay for Target	57.0	29.6	29.6
	Average Medicare Payment for Target	\$667	\$429	\$376
Admission Source	Count of periods where admission source is Institutional	*	49,425	48,517
	All periods	*	175,668	182,014
	Proportion/Rate of Target to Denominator Discharges	*	28.1%	26.7%
	Average Length of Stay for Target	*	26.1	26.1
	Average Medicare Payment for Target	*	\$2,164	\$2,207
	Sum of Medicare Payments for Target	*	\$106,942,711	\$107,071,732

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

87

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area Summary - South Dakota, 28 Agencies

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Low Comorbidity	Periods with a Low Comorbidity adjustment	*	4,244	5,133
	All periods	*	10,972	12,621
	Proportion/Rate of Target to Denominator Discharges	*	38.7%	40.7%
	Average Length of Stay for Target	*	24.2	24.5
	Average Medicare Payment for Target	*	\$1,684	\$1,678
	Sum of Medicare Payments for Target	*	\$7,147,911	\$8,611,910
High Comorbidity	Periods with a High Comorbidity adjustment	*	1,400	1,564
	All periods	*	10,972	12,621
	Proportion/Rate of Target to Denominator Discharges	*	12.8%	12.4%
	Average Length of Stay for Target	*	25.4	26.0
	Average Medicare Payment for Target	*	\$1,761	\$1,765
	Sum of Medicare Payments for Target	*	\$2,465,078	\$2,760,368
Functional Impairment Medium	Periods with a Functional Impairment Level of Medium	*	2,993	3,700
	All periods	*	10,972	12,621
	Proportion/Rate of Target to Denominator Discharges	*	27.3%	29.3%
	Average Length of Stay for Target	*	23.5	24.1
	Average Medicare Payment for Target	*	\$1,751	\$1,717
	Sum of Medicare Payments for Target	*	\$5,240,237	\$6,351,165
Functional Impairment High	Periods with a Functional Impairment Level of High	*	3,877	4,324
	All periods	*	10,972	12,621
	Proportion/Rate of Target to Denominator Discharges	*	35.3%	34.3%
	Average Length of Stay for Target	*	23.8	24.2
	Average Medicare Payment for Target	*	\$1,881	\$1,878
	Sum of Medicare Payments for Target	*	\$7,291,171	\$8,119,068
Average Case Mix	Sum of case mix weight excl LUPA/PEP	6,592	9,288	9,781
	Count of Periods excl LUPA/PEP	6,267	7,917	8,433
	Proportion/Rate of Target to Denominator Discharges	1.05	1.17	1.16
Average Number of Periods	Count of periods	7,008	10,972	12,621
	Count of beneficiaries served	5,539	5,526	6,110
	Proportion/Rate of Target to Denominator Discharges	1.27	1.99	2.07
	Average Length of Stay for Target	33.8	23.9	24.2
	Average Medicare Payment for Target	\$2,671	\$1,678	\$1,662

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

88

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Average Number of Periods	Sum of Medicare Payments for Target	\$18,716,256	\$18,414,630	\$20,971,632
Periods with Low Visits	Periods with Low Visits	492	150	176
	All periods	7,008	10,972	12,621
	Proportion/Rate of Target to Denominator Discharges	7.0%	1.4%	1.4%
	Average Length of Stay for Target	21.0	20.6	21.9
	Average Outlier Payment Amount	\$1,401	\$2,208	\$2,167
	Sum of Medicare Payments for Target	\$689,212	\$331,221	\$381,358
Non-LUPA Payments	Periods w/o LUPA payment	6,436	8,046	8,488
	All periods	7,008	10,972	12,621
	Proportion/Rate of Target to Denominator Discharges	91.8%	73.3%	67.3%
	Average Length of Stay for Target	34.6	26.4	26.8
	Average Medicare Payment for Target	\$2,871	\$1,930	\$1,918
	Sum of Medicare Payments for Target	\$18,475,836	\$15,527,007	\$16,276,494
Outlier Payments	Dollar amt of outlier payments	\$263,867	\$502,960	\$394,806
	Dollar amt of total payments	\$18,716,256	\$18,414,630	\$20,971,632
	Proportion/Rate of Target to Denominator Discharges	1.4%	2.7%	1.9%
	Average Length of Stay for Target	52.8	29.2	29.4
	Average Medicare Payment for Target	\$825	\$527	\$483
Admission Source	Count of periods where admission source is Institutional	*	4,259	4,419
	All periods	*	10,972	12,621
	Proportion/Rate of Target to Denominator Discharges	*	38.8%	35.0%
	Average Length of Stay for Target	*	25.1	25.6
	Average Medicare Payment for Target	*	\$2,152	\$2,176
	Sum of Medicare Payments for Target	*	\$9,166,099	\$9,616,177

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

89

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area Summary - Tennessee, 118 Agencies

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Low Comorbidity	Periods with a Low Comorbidity adjustment	*	93,029	94,698
	All periods	*	235,266	240,310
	Proportion/Rate of Target to Denominator Discharges	*	39.5%	39.4%
	Average Length of Stay for Target	*	27.6	27.6
	Average Medicare Payment for Target	*	\$1,506	\$1,525
	Sum of Medicare Payments for Target	*	\$140,110,690	\$144,397,235
High Comorbidity	Periods with a High Comorbidity adjustment	*	36,098	34,841
	All periods	*	235,266	240,310
	Proportion/Rate of Target to Denominator Discharges	*	15.3%	14.5%
	Average Length of Stay for Target	*	28.0	28.1
	Average Medicare Payment for Target	*	\$1,680	\$1,706
	Sum of Medicare Payments for Target	*	\$60,646,990	\$59,426,893
Functional Impairment Medium	Periods with a Functional Impairment Level of Medium	*	70,119	69,238
	All periods	*	235,266	240,310
	Proportion/Rate of Target to Denominator Discharges	*	29.8%	28.8%
	Average Length of Stay for Target	*	27.5	27.5
	Average Medicare Payment for Target	*	\$1,433	\$1,440
	Sum of Medicare Payments for Target	*	\$100,476,366	\$99,732,063
Functional Impairment High	Periods with a Functional Impairment Level of High	*	128,155	136,488
	All periods	*	235,266	240,310
	Proportion/Rate of Target to Denominator Discharges	*	54.5%	56.8%
	Average Length of Stay for Target	*	27.6	27.5
	Average Medicare Payment for Target	*	\$1,645	\$1,655
	Sum of Medicare Payments for Target	*	\$210,828,059	\$225,924,665
Average Case Mix	Sum of case mix weight excl LUPA/PEP	143,799	177,956	168,729
	Count of Periods excl LUPA/PEP	129,430	162,268	155,146
	Proportion/Rate of Target to Denominator Discharges	1.11	1.10	1.09
Average Number of Periods	Count of periods	143,767	235,266	240,310
	Count of beneficiaries served	75,990	71,496	71,967
	Proportion/Rate of Target to Denominator Discharges	1.89	3.29	3.34
	Average Length of Stay for Target	49.3	27.5	27.5
	Average Medicare Payment for Target	\$2,697	\$1,502	\$1,521

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

90

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Average Number of Periods	Sum of Medicare Payments for Target	\$387,710,653	\$353,467,160	\$365,434,869
Periods with Low Visits	Periods with Low Visits	8,301	2,045	1,993
	All periods	143,767	235,266	240,310
	Proportion/Rate of Target to Denominator Discharges	5.8%	0.9%	0.8%
	Average Length of Stay for Target	32.0	25.0	25.8
	Average Outlier Payment Amount	\$1,241	\$2,143	\$2,182
	Sum of Medicare Payments for Target	\$10,305,556	\$4,382,639	\$4,349,479
Non-LUPA Payments	Periods w/o LUPA payment	132,565	164,120	156,016
	All periods	143,767	235,266	240,310
	Proportion/Rate of Target to Denominator Discharges	92.2%	69.8%	64.9%
	Average Length of Stay for Target	51.1	28.8	28.9
	Average Medicare Payment for Target	\$2,893	\$1,700	\$1,717
	Sum of Medicare Payments for Target	\$383,544,781	\$278,926,276	\$267,820,586
Outlier Payments	Dollar amt of outlier payments	\$1,499,421	\$2,506,200	\$1,670,121
	Dollar amt of total payments	\$387,710,653	\$353,467,160	\$365,434,869
	Proportion/Rate of Target to Denominator Discharges	0.4%	0.7%	0.5%
	Average Length of Stay for Target	57.3	29.7	29.7
	Average Medicare Payment for Target	\$662	\$411	\$388
Admission Source	Count of periods where admission source is Institutional	*	49,681	46,958
	All periods	*	235,266	240,310
	Proportion/Rate of Target to Denominator Discharges	*	21.1%	19.5%
	Average Length of Stay for Target	*	26.9	27.0
	Average Medicare Payment for Target	*	\$2,060	\$2,092
	Sum of Medicare Payments for Target	*	\$102,340,866	\$98,236,454

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

91

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area Summary - Texas, 1,922 Agencies

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Low Comorbidity	Periods with a Low Comorbidity adjustment	*	380,892	362,289
	All periods	*	1,020,800	974,598
	Proportion/Rate of Target to Denominator Discharges	*	37.3%	37.2%
	Average Length of Stay for Target	*	28.5	28.5
	Average Medicare Payment for Target	*	\$1,601	\$1,624
	Sum of Medicare Payments for Target	*	\$609,727,976	\$588,509,764
High Comorbidity	Periods with a High Comorbidity adjustment	*	132,503	119,802
	All periods	*	1,020,800	974,598
	Proportion/Rate of Target to Denominator Discharges	*	13.0%	12.3%
	Average Length of Stay for Target	*	28.6	28.5
	Average Medicare Payment for Target	*	\$1,835	\$1,864
	Sum of Medicare Payments for Target	*	\$243,137,151	\$223,304,068
Functional Impairment Medium	Periods with a Functional Impairment Level of Medium	*	336,591	318,566
	All periods	*	1,020,800	974,598
	Proportion/Rate of Target to Denominator Discharges	*	33.0%	32.7%
	Average Length of Stay for Target	*	28.3	28.2
	Average Medicare Payment for Target	*	\$1,574	\$1,574
	Sum of Medicare Payments for Target	*	\$529,698,239	\$501,300,039
Functional Impairment High	Periods with a Functional Impairment Level of High	*	400,439	422,502
	All periods	*	1,020,800	974,598
	Proportion/Rate of Target to Denominator Discharges	*	39.2%	43.4%
	Average Length of Stay for Target	*	28.1	28.1
	Average Medicare Payment for Target	*	\$1,821	\$1,822
	Sum of Medicare Payments for Target	*	\$729,049,669	\$769,708,042
Average Case Mix	Sum of case mix weight excl LUPA/PEP	616,065	651,674	604,128
	Count of Periods excl LUPA/PEP	630,619	645,881	596,560
	Proportion/Rate of Target to Denominator Discharges	0.98	1.01	1.01
Average Number of Periods	Count of periods	680,332	1,020,800	974,598
	Count of beneficiaries served	296,979	260,417	250,913
	Proportion/Rate of Target to Denominator Discharges	2.29	3.92	3.88
	Average Length of Stay for Target	53.0	28.3	28.2
	Average Medicare Payment for Target	\$2,745	\$1,588	\$1,610

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

92

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Average Number of Periods	Sum of Medicare Payments for Target	\$1,867,846,306	\$1,621,482,804	\$1,569,348,875
Periods with Low Visits	Periods with Low Visits	38,836	7,698	7,636
	All periods	680,332	1,020,800	974,598
	Proportion/Rate of Target to Denominator Discharges	5.7%	0.8%	0.8%
	Average Length of Stay for Target	42.2	24.5	24.2
	Average Outlier Payment Amount	\$1,431	\$2,345	\$2,402
	Sum of Medicare Payments for Target	\$55,593,278	\$18,050,573	\$18,341,922
Non-LUPA Payments	Periods w/o LUPA payment	642,409	669,525	599,772
	All periods	680,332	1,020,800	974,598
	Proportion/Rate of Target to Denominator Discharges	94.4%	65.6%	61.5%
	Average Length of Stay for Target	54.4	29.0	29.0
	Average Medicare Payment for Target	\$2,884	\$1,789	\$1,805
	Sum of Medicare Payments for Target	\$1,852,440,988	\$1,197,969,784	\$1,082,679,534
Outlier Payments	Dollar amt of outlier payments	\$43,013,571	\$37,424,087	\$27,970,924
	Dollar amt of total payments	\$1,867,846,306	\$1,621,482,804	\$1,569,348,875
	Proportion/Rate of Target to Denominator Discharges	2.3%	2.3%	1.8%
	Average Length of Stay for Target	58.4	29.8	29.8
	Average Medicare Payment for Target	\$1,467	\$720	\$665
Admission Source	Count of periods where admission source is Institutional	*	156,641	145,047
	All periods	*	1,020,800	974,598
	Proportion/Rate of Target to Denominator Discharges	*	15.3%	14.9%
	Average Length of Stay for Target	*	26.8	26.8
	Average Medicare Payment for Target	*	\$2,301	\$2,322
	Sum of Medicare Payments for Target	*	\$360,359,765	\$336,831,867

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

93

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area Summary - Utah, 91 Agencies

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Low Comorbidity	Periods with a Low Comorbidity adjustment	*	21,831	23,459
	All periods	*	60,935	63,954
	Proportion/Rate of Target to Denominator Discharges	*	35.8%	36.7%
	Average Length of Stay for Target	*	25.9	26.0
	Average Medicare Payment for Target	*	\$1,810	\$1,779
	Sum of Medicare Payments for Target	*	\$39,519,672	\$41,744,829
High Comorbidity	Periods with a High Comorbidity adjustment	*	8,038	8,446
	All periods	*	60,935	63,954
	Proportion/Rate of Target to Denominator Discharges	*	13.2%	13.2%
	Average Length of Stay for Target	*	26.9	26.9
	Average Medicare Payment for Target	*	\$2,022	\$2,021
	Sum of Medicare Payments for Target	*	\$16,253,058	\$17,071,334
Functional Impairment Medium	Periods with a Functional Impairment Level of Medium	*	23,110	24,778
	All periods	*	60,935	63,954
	Proportion/Rate of Target to Denominator Discharges	*	37.9%	38.7%
	Average Length of Stay for Target	*	25.3	25.3
	Average Medicare Payment for Target	*	\$1,844	\$1,801
	Sum of Medicare Payments for Target	*	\$42,615,260	\$44,613,887
Functional Impairment High	Periods with a Functional Impairment Level of High	*	19,730	22,301
	All periods	*	60,935	63,954
	Proportion/Rate of Target to Denominator Discharges	*	32.4%	34.9%
	Average Length of Stay for Target	*	25.7	25.8
	Average Medicare Payment for Target	*	\$2,019	\$1,988
	Sum of Medicare Payments for Target	*	\$39,844,543	\$44,333,780
Average Case Mix	Sum of case mix weight excl LUPA/PEP	38,916	51,018	50,324
	Count of Periods excl LUPA/PEP	36,144	46,796	46,387
	Proportion/Rate of Target to Denominator Discharges	1.08	1.09	1.08
Average Number of Periods	Count of periods	40,435	60,935	63,954
	Count of beneficiaries served	26,103	24,738	25,894
	Proportion/Rate of Target to Denominator Discharges	1.55	2.46	2.47
	Average Length of Stay for Target	41.4	25.5	25.5
	Average Medicare Payment for Target	\$3,064	\$1,803	\$1,783

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

94

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Average Number of Periods	Sum of Medicare Payments for Target	\$123,892,425	\$109,878,086	\$114,055,087
Periods with Low Visits	Periods with Low Visits	2,225	628	708
	All periods	40,435	60,935	63,954
	Proportion/Rate of Target to Denominator Discharges	5.5%	1.0%	1.1%
	Average Length of Stay for Target	24.8	19.4	19.7
	Average Outlier Payment Amount	\$1,403	\$2,357	\$2,324
	Sum of Medicare Payments for Target	\$3,121,822	\$1,480,203	\$1,645,554
Non-LUPA Payments	Periods w/o LUPA payment	37,515	47,908	46,942
	All periods	40,435	60,935	63,954
	Proportion/Rate of Target to Denominator Discharges	92.8%	78.6%	73.4%
	Average Length of Stay for Target	42.6	27.2	27.2
	Average Medicare Payment for Target	\$3,268	\$2,005	\$1,972
	Sum of Medicare Payments for Target	\$122,593,450	\$96,050,815	\$92,590,408
Outlier Payments	Dollar amt of outlier payments	\$4,535,363	\$4,286,822	\$3,391,364
	Dollar amt of total payments	\$123,892,425	\$109,878,086	\$114,055,087
	Proportion/Rate of Target to Denominator Discharges	3.7%	3.9%	3.0%
	Average Length of Stay for Target	57.5	29.6	29.6
	Average Medicare Payment for Target	\$1,553	\$794	\$703
Admission Source	Count of periods where admission source is Institutional	*	14,617	14,105
	All periods	*	60,935	63,954
	Proportion/Rate of Target to Denominator Discharges	*	24.0%	22.1%
	Average Length of Stay for Target	*	24.6	24.6
	Average Medicare Payment for Target	*	\$2,344	\$2,314
	Sum of Medicare Payments for Target	*	\$34,256,671	\$32,637,088

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area Summary - Virginia, 248 Agencies

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Low Comorbidity	Periods with a Low Comorbidity adjustment	*	94,738	93,442
	All periods	*	249,407	248,366
	Proportion/Rate of Target to Denominator Discharges	*	38.0%	37.6%
	Average Length of Stay for Target	*	26.2	26.2
	Average Medicare Payment for Target	*	\$1,734	\$1,756
	Sum of Medicare Payments for Target	*	\$164,258,586	\$164,103,046
High Comorbidity	Periods with a High Comorbidity adjustment	*	39,586	37,606
	All periods	*	249,407	248,366
	Proportion/Rate of Target to Denominator Discharges	*	15.9%	15.1%
	Average Length of Stay for Target	*	27.1	27.1
	Average Medicare Payment for Target	*	\$1,901	\$1,948
	Sum of Medicare Payments for Target	*	\$75,262,913	\$73,263,850
Functional Impairment Medium	Periods with a Functional Impairment Level of Medium	*	79,430	76,901
	All periods	*	249,407	248,366
	Proportion/Rate of Target to Denominator Discharges	*	31.8%	31.0%
	Average Length of Stay for Target	*	25.9	25.8
	Average Medicare Payment for Target	*	\$1,728	\$1,732
	Sum of Medicare Payments for Target	*	\$137,284,285	\$133,166,586
Functional Impairment High	Periods with a Functional Impairment Level of High	*	111,501	116,189
	All periods	*	249,407	248,366
	Proportion/Rate of Target to Denominator Discharges	*	44.7%	46.8%
	Average Length of Stay for Target	*	26.1	26.1
	Average Medicare Payment for Target	*	\$1,912	\$1,938
	Sum of Medicare Payments for Target	*	\$213,221,008	\$225,186,235
Average Case Mix	Sum of case mix weight excl LUPA/PEP	159,270	200,244	189,903
	Count of Periods excl LUPA/PEP	146,308	174,352	166,092
	Proportion/Rate of Target to Denominator Discharges	1.09	1.15	1.14
Average Number of Periods	Count of periods	167,824	249,407	248,366
	Count of beneficiaries served	112,178	100,538	100,906
	Proportion/Rate of Target to Denominator Discharges	1.50	2.48	2.46
	Average Length of Stay for Target	42.6	26.0	25.9
	Average Medicare Payment for Target	\$2,871	\$1,734	\$1,755

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

96

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Average Number of Periods	Sum of Medicare Payments for Target	\$481,816,680	\$432,482,590	\$435,876,102
Periods with Low Visits	Periods with Low Visits	12,317	3,207	3,237
	All periods	167,824	249,407	248,366
	Proportion/Rate of Target to Denominator Discharges	7.3%	1.3%	1.3%
	Average Length of Stay for Target	26.9	22.0	22.0
	Average Outlier Payment Amount	\$1,398	\$2,397	\$2,446
	Sum of Medicare Payments for Target	\$17,218,868	\$7,688,684	\$7,918,518
Non-LUPA Payments	Periods w/o LUPA payment	150,634	178,572	167,046
	All periods	167,824	249,407	248,366
	Proportion/Rate of Target to Denominator Discharges	89.8%	71.6%	67.3%
	Average Length of Stay for Target	44.9	27.9	27.9
	Average Medicare Payment for Target	\$3,150	\$2,006	\$2,025
	Sum of Medicare Payments for Target	\$474,466,106	\$358,178,138	\$338,239,617
Outlier Payments	Dollar amt of outlier payments	\$5,221,093	\$8,075,412	\$5,977,038
	Dollar amt of total payments	\$481,816,680	\$432,482,590	\$435,876,102
	Proportion/Rate of Target to Denominator Discharges	1.1%	1.9%	1.4%
	Average Length of Stay for Target	57.5	29.6	29.6
	Average Medicare Payment for Target	\$860	\$570	\$525
Admission Source	Count of periods where admission source is Institutional	*	77,991	73,982
	All periods	*	249,407	248,366
	Proportion/Rate of Target to Denominator Discharges	*	31.3%	29.8%
	Average Length of Stay for Target	*	25.7	25.7
	Average Medicare Payment for Target	*	\$2,271	\$2,291
	Sum of Medicare Payments for Target	*	\$177,094,966	\$169,526,100

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

97

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area Summary - Vermont, 10 Agencies

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Low Comorbidity	Periods with a Low Comorbidity adjustment	*	10,999	11,613
	All periods	*	30,448	31,818
	Proportion/Rate of Target to Denominator Discharges	*	36.1%	36.5%
	Average Length of Stay for Target	*	26.6	26.3
	Average Medicare Payment for Target	*	\$1,754	\$1,781
	Sum of Medicare Payments for Target	*	\$19,289,895	\$20,678,384
High Comorbidity	Periods with a High Comorbidity adjustment	*	4,865	4,952
	All periods	*	30,448	31,818
	Proportion/Rate of Target to Denominator Discharges	*	16.0%	15.6%
	Average Length of Stay for Target	*	27.3	27.5
	Average Medicare Payment for Target	*	\$1,976	\$2,068
	Sum of Medicare Payments for Target	*	\$9,614,039	\$10,240,530
Functional Impairment Medium	Periods with a Functional Impairment Level of Medium	*	9,827	10,477
	All periods	*	30,448	31,818
	Proportion/Rate of Target to Denominator Discharges	*	32.3%	32.9%
	Average Length of Stay for Target	*	26.0	25.7
	Average Medicare Payment for Target	*	\$1,789	\$1,798
	Sum of Medicare Payments for Target	*	\$17,583,387	\$18,833,222
Functional Impairment High	Periods with a Functional Impairment Level of High	*	12,056	13,063
	All periods	*	30,448	31,818
	Proportion/Rate of Target to Denominator Discharges	*	39.6%	41.1%
	Average Length of Stay for Target	*	26.1	26.3
	Average Medicare Payment for Target	*	\$1,977	\$2,014
	Sum of Medicare Payments for Target	*	\$23,840,320	\$26,309,142
Average Case Mix	Sum of case mix weight excl LUPA/PEP	16,451	22,563	22,211
	Count of Periods excl LUPA/PEP	17,085	19,961	19,794
	Proportion/Rate of Target to Denominator Discharges	0.96	1.13	1.12
Average Number of Periods	Count of periods	20,004	30,448	31,818
	Count of beneficiaries served	12,425	11,413	11,797
	Proportion/Rate of Target to Denominator Discharges	1.61	2.67	2.70
	Average Length of Stay for Target	43.4	26.2	26.1
	Average Medicare Payment for Target	\$2,782	\$1,768	\$1,800

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

98

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Average Number of Periods	Sum of Medicare Payments for Target	\$55,660,631	\$53,822,125	\$57,284,551
Periods with Low Visits	Periods with Low Visits	1,972	697	771
	All periods	20,004	30,448	31,818
	Proportion/Rate of Target to Denominator Discharges	9.9%	2.3%	2.4%
	Average Length of Stay for Target	30.0	23.4	23.9
	Average Outlier Payment Amount	\$1,569	\$2,500	\$2,597
	Sum of Medicare Payments for Target	\$3,093,981	\$1,742,453	\$2,001,953
Non-LUPA Payments	Periods w/o LUPA payment	17,435	20,311	19,868
	All periods	20,004	30,448	31,818
	Proportion/Rate of Target to Denominator Discharges	87.2%	66.7%	62.4%
	Average Length of Stay for Target	45.6	28.3	28.4
	Average Medicare Payment for Target	\$3,122	\$2,120	\$2,150
	Sum of Medicare Payments for Target	\$54,428,773	\$43,063,313	\$42,724,438
Outlier Payments	Dollar amt of outlier payments	\$1,530,241	\$1,063,645	\$867,924
	Dollar amt of total payments	\$55,660,631	\$53,822,125	\$57,284,551
	Proportion/Rate of Target to Denominator Discharges	2.7%	2.0%	1.5%
	Average Length of Stay for Target	58.6	29.7	29.8
	Average Medicare Payment for Target	\$1,275	\$692	\$692
Admission Source	Count of periods where admission source is Institutional	*	8,903	8,622
	All periods	*	30,448	31,818
	Proportion/Rate of Target to Denominator Discharges	*	29.2%	27.1%
	Average Length of Stay for Target	*	26.0	25.9
	Average Medicare Payment for Target	*	\$2,320	\$2,362
	Sum of Medicare Payments for Target	*	\$20,653,826	\$20,369,232

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

99

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area Summary - Washington, 66 Agencies

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Low Comorbidity	Periods with a Low Comorbidity adjustment	*	47,027	51,338
	All periods	*	118,146	127,357
	Proportion/Rate of Target to Denominator Discharges	*	39.8%	40.3%
	Average Length of Stay for Target	*	26.4	26.4
	Average Medicare Payment for Target	*	\$2,008	\$2,034
	Sum of Medicare Payments for Target	*	\$94,434,912	\$104,416,308
High Comorbidity	Periods with a High Comorbidity adjustment	*	22,573	23,299
	All periods	*	118,146	127,357
	Proportion/Rate of Target to Denominator Discharges	*	19.1%	18.3%
	Average Length of Stay for Target	*	27.3	27.3
	Average Medicare Payment for Target	*	\$2,169	\$2,221
	Sum of Medicare Payments for Target	*	\$48,957,081	\$51,754,725
Functional Impairment Medium	Periods with a Functional Impairment Level of Medium	*	31,351	33,596
	All periods	*	118,146	127,357
	Proportion/Rate of Target to Denominator Discharges	*	26.5%	26.4%
	Average Length of Stay for Target	*	26.1	26.3
	Average Medicare Payment for Target	*	\$1,967	\$1,976
	Sum of Medicare Payments for Target	*	\$61,653,068	\$66,373,345
Functional Impairment High	Periods with a Functional Impairment Level of High	*	63,462	71,298
	All periods	*	118,146	127,357
	Proportion/Rate of Target to Denominator Discharges	*	53.7%	56.0%
	Average Length of Stay for Target	*	26.4	26.4
	Average Medicare Payment for Target	*	\$2,191	\$2,218
	Sum of Medicare Payments for Target	*	\$139,065,081	\$158,113,839
Average Case Mix	Sum of case mix weight excl LUPA/PEP	71,277	93,233	92,028
	Count of Periods excl LUPA/PEP	63,735	79,331	78,906
	Proportion/Rate of Target to Denominator Discharges	1.12	1.18	1.17
Average Number of Periods	Count of periods	73,326	118,146	127,357
	Count of beneficiaries served	49,983	47,155	49,638
	Proportion/Rate of Target to Denominator Discharges	1.47	2.51	2.57
	Average Length of Stay for Target	43.2	26.3	26.4
	Average Medicare Payment for Target	\$3,450	\$2,013	\$2,040

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

100

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Average Number of Periods	Sum of Medicare Payments for Target	\$252,988,221	\$237,819,685	\$259,862,524
Periods with Low Visits	Periods with Low Visits	5,823	2,424	2,739
	All periods	73,326	118,146	127,357
	Proportion/Rate of Target to Denominator Discharges	7.9%	2.1%	2.2%
	Average Length of Stay for Target	29.9	24.7	25.9
	Average Outlier Payment Amount	\$1,727	\$2,842	\$2,895
	Sum of Medicare Payments for Target	\$10,053,930	\$6,889,152	\$7,930,595
Non-LUPA Payments	Periods w/o LUPA payment	64,962	80,349	79,171
	All periods	73,326	118,146	127,357
	Proportion/Rate of Target to Denominator Discharges	88.6%	68.0%	62.2%
	Average Length of Stay for Target	45.2	28.4	28.5
	Average Medicare Payment for Target	\$3,830	\$2,374	\$2,394
	Sum of Medicare Payments for Target	\$248,789,253	\$190,767,602	\$189,500,087
Outlier Payments	Dollar amt of outlier payments	\$1,685,481	\$1,624,731	\$1,075,869
	Dollar amt of total payments	\$252,988,221	\$237,819,685	\$259,862,524
	Proportion/Rate of Target to Denominator Discharges	0.7%	0.7%	0.4%
	Average Length of Stay for Target	58.1	29.7	29.8
	Average Medicare Payment for Target	\$881	\$528	\$474
Admission Source	Count of periods where admission source is Institutional	*	31,995	30,928
	All periods	*	118,146	127,357
	Proportion/Rate of Target to Denominator Discharges	*	27.1%	24.3%
	Average Length of Stay for Target	*	26.7	26.9
	Average Medicare Payment for Target	*	\$2,663	\$2,705
	Sum of Medicare Payments for Target	*	\$85,203,567	\$83,660,501

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

101

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area Summary - Wisconsin, 105 Agencies

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Low Comorbidity	Periods with a Low Comorbidity adjustment	*	33,684	34,387
	All periods	*	80,080	83,188
	Proportion/Rate of Target to Denominator Discharges	*	42.1%	41.3%
	Average Length of Stay for Target	*	25.1	25.1
	Average Medicare Payment for Target	*	\$1,809	\$1,876
	Sum of Medicare Payments for Target	*	\$60,944,863	\$64,496,126
High Comorbidity	Periods with a High Comorbidity adjustment	*	16,608	16,665
	All periods	*	80,080	83,188
	Proportion/Rate of Target to Denominator Discharges	*	20.7%	20.0%
	Average Length of Stay for Target	*	26.7	26.7
	Average Medicare Payment for Target	*	\$1,962	\$2,011
	Sum of Medicare Payments for Target	*	\$32,578,017	\$33,513,005
Functional Impairment Medium	Periods with a Functional Impairment Level of Medium	*	24,128	25,217
	All periods	*	80,080	83,188
	Proportion/Rate of Target to Denominator Discharges	*	30.1%	30.3%
	Average Length of Stay for Target	*	24.9	24.8
	Average Medicare Payment for Target	*	\$1,859	\$1,909
	Sum of Medicare Payments for Target	*	\$44,844,158	\$48,147,964
Functional Impairment High	Periods with a Functional Impairment Level of High	*	32,208	35,094
	All periods	*	80,080	83,188
	Proportion/Rate of Target to Denominator Discharges	*	40.2%	42.2%
	Average Length of Stay for Target	*	25.2	25.2
	Average Medicare Payment for Target	*	\$2,007	\$2,066
	Sum of Medicare Payments for Target	*	\$64,628,564	\$72,513,145
Average Case Mix	Sum of case mix weight excl LUPA/PEP	47,915	67,122	66,680
	Count of Periods excl LUPA/PEP	46,564	57,142	57,134
	Proportion/Rate of Target to Denominator Discharges	1.03	1.17	1.17
Average Number of Periods	Count of periods	53,933	80,080	83,188
	Count of beneficiaries served	38,136	36,146	37,255
	Proportion/Rate of Target to Denominator Discharges	1.41	2.22	2.23
	Average Length of Stay for Target	39.8	25.1	25.1
	Average Medicare Payment for Target	\$2,851	\$1,829	\$1,883

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

102

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Average Number of Periods	Sum of Medicare Payments for Target	\$153,759,719	\$146,478,395	\$156,679,478
Periods with Low Visits	Periods with Low Visits	4,457	1,176	1,315
	All periods	53,933	80,080	83,188
	Proportion/Rate of Target to Denominator Discharges	8.3%	1.5%	1.6%
	Average Length of Stay for Target	25.5	20.8	21.4
	Average Outlier Payment Amount	\$1,478	\$2,449	\$2,506
	Sum of Medicare Payments for Target	\$6,585,860	\$2,879,443	\$3,295,375
Non-LUPA Payments	Periods w/o LUPA payment	47,747	58,060	57,453
	All periods	53,933	80,080	83,188
	Proportion/Rate of Target to Denominator Discharges	88.5%	72.5%	69.1%
	Average Length of Stay for Target	41.6	27.4	27.5
	Average Medicare Payment for Target	\$3,162	\$2,142	\$2,178
	Sum of Medicare Payments for Target	\$150,995,077	\$124,392,016	\$125,151,115
Outlier Payments	Dollar amt of outlier payments	\$2,769,074	\$3,137,973	\$2,917,070
	Dollar amt of total payments	\$153,759,719	\$146,478,395	\$156,679,478
	Proportion/Rate of Target to Denominator Discharges	1.8%	2.1%	1.9%
	Average Length of Stay for Target	56.8	29.5	29.5
	Average Medicare Payment for Target	\$1,003	\$600	\$586
Admission Source	Count of periods where admission source is Institutional	*	27,092	27,196
	All periods	*	80,080	83,188
	Proportion/Rate of Target to Denominator Discharges	*	33.8%	32.7%
	Average Length of Stay for Target	*	25.6	25.6
	Average Medicare Payment for Target	*	\$2,352	\$2,421
	Sum of Medicare Payments for Target	*	\$63,721,494	\$65,847,239

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

103

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area Summary - West Virginia, 62 Agencies

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Low Comorbidity	Periods with a Low Comorbidity adjustment	*	26,981	26,383
	All periods	*	68,045	66,621
	Proportion/Rate of Target to Denominator Discharges	*	39.7%	39.6%
	Average Length of Stay for Target	*	27.2	26.9
	Average Medicare Payment for Target	*	\$1,525	\$1,560
	Sum of Medicare Payments for Target	*	\$41,140,227	\$41,146,053
High Comorbidity	Periods with a High Comorbidity adjustment	*	12,229	11,319
	All periods	*	68,045	66,621
	Proportion/Rate of Target to Denominator Discharges	*	18.0%	17.0%
	Average Length of Stay for Target	*	27.6	27.4
	Average Medicare Payment for Target	*	\$1,689	\$1,744
	Sum of Medicare Payments for Target	*	\$20,656,486	\$19,735,824
Functional Impairment Medium	Periods with a Functional Impairment Level of Medium	*	19,985	19,422
	All periods	*	68,045	66,621
	Proportion/Rate of Target to Denominator Discharges	*	29.4%	29.2%
	Average Length of Stay for Target	*	26.8	26.6
	Average Medicare Payment for Target	*	\$1,482	\$1,519
	Sum of Medicare Payments for Target	*	\$29,614,610	\$29,503,751
Functional Impairment High	Periods with a Functional Impairment Level of High	*	35,545	34,854
	All periods	*	68,045	66,621
	Proportion/Rate of Target to Denominator Discharges	*	52.2%	52.3%
	Average Length of Stay for Target	*	27.2	27.0
	Average Medicare Payment for Target	*	\$1,679	\$1,718
	Sum of Medicare Payments for Target	*	\$59,684,514	\$59,891,324
Average Case Mix	Sum of case mix weight excl LUPA/PEP	44,468	52,182	48,453
	Count of Periods excl LUPA/PEP	38,991	45,898	43,058
	Proportion/Rate of Target to Denominator Discharges	1.14	1.14	1.13
Average Number of Periods	Count of periods	43,795	68,045	66,621
	Count of beneficiaries served	26,424	23,366	23,563
	Proportion/Rate of Target to Denominator Discharges	1.66	2.91	2.83
	Average Length of Stay for Target	47.8	27.0	26.8
	Average Medicare Payment for Target	\$2,772	\$1,532	\$1,563

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

104

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Average Number of Periods	Sum of Medicare Payments for Target	\$121,411,398	\$104,258,408	\$104,113,509
Periods with Low Visits	Periods with Low Visits	2,619	628	654
	All periods	43,795	68,045	66,621
	Proportion/Rate of Target to Denominator Discharges	6.0%	0.9%	1.0%
	Average Length of Stay for Target	31.4	25.3	26.2
	Average Outlier Payment Amount	\$1,197	\$2,190	\$2,247
	Sum of Medicare Payments for Target	\$3,134,569	\$1,375,292	\$1,469,288
Non-LUPA Payments	Periods w/o LUPA payment	39,979	46,954	43,401
	All periods	43,795	68,045	66,621
	Proportion/Rate of Target to Denominator Discharges	91.3%	69.0%	65.1%
	Average Length of Stay for Target	49.6	28.6	28.5
	Average Medicare Payment for Target	\$3,001	\$1,774	\$1,802
	Sum of Medicare Payments for Target	\$119,957,929	\$83,303,806	\$78,215,102
Outlier Payments	Dollar amt of outlier payments	\$816,684	\$895,902	\$791,830
	Dollar amt of total payments	\$121,411,398	\$104,258,408	\$104,113,509
	Proportion/Rate of Target to Denominator Discharges	0.7%	0.9%	0.8%
	Average Length of Stay for Target	56.9	29.6	29.5
	Average Medicare Payment for Target	\$800	\$442	\$459
Admission Source	Count of periods where admission source is Institutional	*	18,929	17,722
	All periods	*	68,045	66,621
	Proportion/Rate of Target to Denominator Discharges	*	27.8%	26.6%
	Average Length of Stay for Target	*	27.2	26.9
	Average Medicare Payment for Target	*	\$2,058	\$2,096
	Sum of Medicare Payments for Target	*	\$38,953,157	\$37,152,088

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area Summary - Wyoming, 29 Agencies

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Low Comorbidity	Periods with a Low Comorbidity adjustment	*	3,922	4,623
	All periods	*	11,537	13,050
	Proportion/Rate of Target to Denominator Discharges	*	34.0%	35.4%
	Average Length of Stay for Target	*	26.2	26.3
	Average Medicare Payment for Target	*	\$1,898	\$1,780
	Sum of Medicare Payments for Target	*	\$7,443,924	\$8,228,641
High Comorbidity	Periods with a High Comorbidity adjustment	*	1,344	1,506
	All periods	*	11,537	13,050
	Proportion/Rate of Target to Denominator Discharges	*	11.6%	11.5%
	Average Length of Stay for Target	*	27.3	26.9
	Average Medicare Payment for Target	*	\$2,109	\$2,008
	Sum of Medicare Payments for Target	*	\$2,834,750	\$3,023,925
Functional Impairment Medium	Periods with a Functional Impairment Level of Medium	*	3,433	3,836
	All periods	*	11,537	13,050
	Proportion/Rate of Target to Denominator Discharges	*	29.8%	29.4%
	Average Length of Stay for Target	*	26.0	25.9
	Average Medicare Payment for Target	*	\$1,901	\$1,826
	Sum of Medicare Payments for Target	*	\$6,526,235	\$7,003,128
Functional Impairment High	Periods with a Functional Impairment Level of High	*	3,734	4,219
	All periods	*	11,537	13,050
	Proportion/Rate of Target to Denominator Discharges	*	32.4%	32.3%
	Average Length of Stay for Target	*	26.3	26.2
	Average Medicare Payment for Target	*	\$2,091	\$2,021
	Sum of Medicare Payments for Target	*	\$7,806,434	\$8,524,726
Average Case Mix	Sum of case mix weight excl LUPA/PEP	5,749	9,341	9,609
	Count of Periods excl LUPA/PEP	5,303	8,599	9,049
	Proportion/Rate of Target to Denominator Discharges	1.08	1.09	1.06
Average Number of Periods	Count of periods	6,038	11,537	13,050
	Count of beneficiaries served	4,073	4,490	5,088
	Proportion/Rate of Target to Denominator Discharges	1.48	2.57	2.56
	Average Length of Stay for Target	42.6	26.1	26.1
	Average Medicare Payment for Target	\$3,102	\$1,852	\$1,758

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022

State-Level Home Health Agencies Q4CY21 Target Area Summary

106

Statistics are only displayed when there are 3 or more HHAs in the state and the numerator count is 11 or greater.

Target Area	Data for four quarters ending	CY 2019	CY 2020	CY 2021
Average Number of Periods	Sum of Medicare Payments for Target	\$18,731,166	\$21,364,730	\$22,945,002
Periods with Low Visits	Periods with Low Visits	433	131	117
	All periods	6,038	11,537	13,050
	Proportion/Rate of Target to Denominator Discharges	7.2%	1.1%	0.9%
	Average Length of Stay for Target	27.6	22.1	21.5
	Average Outlier Payment Amount	\$1,477	\$2,439	\$2,456
	Sum of Medicare Payments for Target	\$639,355	\$319,471	\$287,402
Non-LUPA Payments	Periods w/o LUPA payment	5,431	8,731	9,109
	All periods	6,038	11,537	13,050
	Proportion/Rate of Target to Denominator Discharges	89.9%	75.7%	69.8%
	Average Length of Stay for Target	44.3	27.9	28.0
	Average Medicare Payment for Target	\$3,399	\$2,107	\$1,988
	Sum of Medicare Payments for Target	\$18,460,350	\$18,400,506	\$18,108,538
Outlier Payments	Dollar amt of outlier payments	\$739,754	\$1,255,717	\$845,430
	Dollar amt of total payments	\$18,731,166	\$21,364,730	\$22,945,002
	Proportion/Rate of Target to Denominator Discharges	3.9%	5.9%	3.7%
	Average Length of Stay for Target	54.7	29.5	29.6
	Average Medicare Payment for Target	\$1,355	\$783	\$662
Admission Source	Count of periods where admission source is Institutional	*	3,361	3,522
	All periods	*	11,537	13,050
	Proportion/Rate of Target to Denominator Discharges	*	29.1%	27.0%
	Average Length of Stay for Target	*	25.8	25.8
	Average Medicare Payment for Target	*	\$2,433	\$2,351
	Sum of Medicare Payments for Target	*	\$8,177,312	\$8,279,147

*Not available. Statistics are only available for periods paid under the Patient-Driven Groupings Model, implemented Jan. 1, 2020.

Data Source: Medicare PPS Claims

For Target Area definitions, please see PEPPER User's Guide.

Date prepared: 22JUN2022