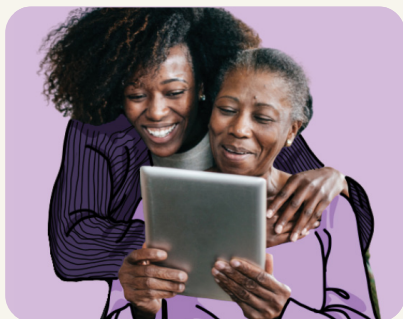




Activated Insights Benchmarking Report

2025

Home-Based Care: Home Care, Home Health, & Hospice



How to Reference the 2025 Activated Insights Benchmarking Report for Home Care, Home Health, and Hospice

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Thank you to all of our 2025 participating organizations for promoting national participation and furthering the purposes of this Report.

We also appreciate the support of many other industry leaders and, of course, all those who dedicated their time to participate in the national survey. Your support made this Report a success!

A Note About Survey Participation

Whether you are new to participating in the Benchmarking Report survey, or have been helping make the Benchmarking Report possible for years, we value your answers. As survey respondents come and go from year to year, please note that the data can be affected, and individual performance may vary. We are proud to have high participation in our survey; however, not every respondent answers each question, which can cause variations in the results throughout the Benchmarking Report. Thank you for your continued support and valuable contributions.

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Glossary



Lines of Business

This year's Benchmarking Report contains data from home care, home health, and hospice providers. Each figure has a label (as shown below) denoting whether the data refers to home care, home health, hospice, or a combination of the three.

Home Care **Home Health** **Hospice** **Overall**

Some participants may provide multiple types of service across two or more of the lines of business covered by this report.

Median data on points marked "Overall" include the entire participation sample regardless of lines of business. For this reason, an Overall Median would be different than the median of the median numbers for each line of business.

Roles

The Benchmarking Report uses umbrella terminology to refer to related roles across lines of business.

Care Professional – Refers to any direct care worker role, including professional caregivers, companions/homemakers, personal care attendants, Certified Nursing Assistants (CNAs), and Home Health Aides.

Clinician – Refers to a licensed medical care staff member, including registered nurses (RNs), Licensed Practical Nurses (LPNs), Licensed Vocational Nurses (LVNs), social workers, and therapists.

Office Staff – Refers to employees who do not provide direct care for clients and patients, such as schedulers, care coordinators, and other administrative staff.

Professional Caregiver – Refers to non-medical employees within home care specifically. Data referring to professional caregivers does not include data on HHAs and CNAs.

Clarifications

Client Growth Rates – Client growth rates are median growth rates from December 31, 2023 to December 31, 2024. It is important to understand that the smaller the agency, the easier it is to increase the percentage of client growth. For example, if an agency has 20 clients and grows to 30 in a year, they have achieved a 50% client growth rate. However, if an agency has 200 clients and grows to 210 clients (adding the same number of clients as the smaller organization), their growth rate is just 5%.

Financial Data – Financial data was only collected for home care organizations; any median financial data refers to home care only, rather than the industry as a whole.

Overall Satisfaction (OSAT) – Overall Satisfaction (OSAT) takes the average score of all rated questions in the Activated Insights Experience Survey. This metric is particularly useful for measuring satisfaction after a specific change or event.

Percentiles – Percentile graphs illustrate rankings on a scale from 1%–100%. For example, if your results, based on the value above, fall somewhere in the 75th percentile, you are exceeding 75% of the industry in that particular measurement.

Weighted Data – In certain data points, data from a large franchise with a high number of participants was weighted to provide a more accurate picture of the post-acute care industry. The following data points were affected by this weighted data: Client Growth, Revenue, and Professional Caregiver Turnover rates.

Calculations

Assessment to Admission Close Ratio – The percentage of performed assessments that became actual clients. (This number is found by dividing the number of admissions by the number of performed assessments.)

Inquiry to Assessment Close Ratio – The percentage of prospective inquiry calls that turn into a performed assessment. (This number is found by dividing the number of performed assessments by the number of inquiries.)



Inquiry to Admission Close Ratio – The percentage of service inquiries that became actual clients. (This number is found by dividing the number of admissions by the number of inquiries.)

Professional Caregiver Turnover Calculation – Professional caregiver turnover represents the percent of care professionals who quit or were terminated in 2024. Providers had to have been in business for at least one full year. Basic care professional turnover is calculated by taking the number of employees who quit or were terminated in the year and dividing that number by the average number of employees employed in the same time period.

Revenue per Professional Caregiver Employee Calculation (HC-specific) – To calculate the Revenue per Professional Caregiver Employee, divide your annual revenue by the number of care professionals employed in the same year.

Sales per Office Staff Employee Calculation – Sales per Office Staff Employee is calculated by dividing your annual revenue (or 12-month trailing revenue) by the number of office staff you employ, excluding caregivers, but including active owners. Part time employees count as .5 or 1/2.

Other Terms

Admissions – New customers who started services.

Assessments – Formal meetings to discuss the needs of the potential customer and the business's capabilities in meeting those needs.

Inquiries – Individuals who called in for services and provided some kind of contact information, such as a phone number, address, and/or email.

Masters – Masters are home care businesses that generated more than \$5M in revenue in 2024.

NPS/eNPS – Net Promoter Score® is based on one question: “How likely are you to recommend [company name] to others?” It is rated on a scale of 1–10, 10 being “highly likely to recommend.” Based upon the answer customers provide, they are categorized into three groups: 1. Promoters (score 9–10) are loyal enthusiasts who will keep using your services and refer others, fueling growth. 2. Passives (score 7–8) are satisfied but unenthusiastic customers who are vulnerable to competitive offerings. 3. Detractors (score 1–6) are unhappy customers who can damage your brand and impede growth through negative word-of-mouth.

Key Profit & Loss Notes

Profit & Loss statements display median values rounded to the nearest tenth. To find the dollar amount associated with each category, multiply the median revenue by the percentage of that category.

Direct Care Expenses – These are expenses directly related to caring for clients (not to be confused with the term “Variable Expenses,” which is a common accounting term used for expenses that fluctuate based on revenue). Though many Direct Expenses, such as Professional Caregiver Wages, are also “Variable Expenses,” we use the term “Direct Care Expenses” in order to make the financial data easy to understand and specific to the private duty home care industry.

Professional Caregiver Wages – These are strictly professional caregiver wages and do not include other employer expenses, such as payroll fees.

Other Direct Care Expenses – This includes any expense related to the direct care of clients that is not covered by the other main direct care categories, such as Professional Caregiver Training, Recruitment, Background/Screening Checks, Professional Caregiver Bonuses, and Client Supplies (such as gloves, etc.).

Professional Caregiver Recruitment & Retention – Includes all expenses related to acquiring professional caregivers including job ads, postings, and networking. Also included are team wages associated with recruiting professional caregivers, background checks, and screenings. Professional Caregiver retention expenses include recognition programs, bonuses, and efforts to retain professional caregivers.

Gross Profit Margin (GPM) – Percent of revenue left after Direct Care Expenses.

Indirect Care Expenses – Also known as Fixed Expenses, this includes all overhead expenses.

Other Marketing Expenses – Consulting and other expenses not captured in the main marketing categories.

Office Support Wages – Includes all office support staff (office managers, payroll, billing, schedulers, etc.).

Executive Team (Non-Owner) Wages – This category represents top management who are non-owners.

Other Operating Expenses – Includes miscellaneous software, travel, franchise fees (if applicable), staff benefits, etc.

Other Taxes – All other taxes that are non-employee related but related to the operation of the business. Usually these are taxes against profits earned by the business.

Net Profit or Net Ordinary Income – Net income is the profit after all expenses have been deducted from revenues. Net Ordinary Income refers to the ordinary income of the fund reduced by the expenses of operating the fund. These are not shown in the key profit and loss comparisons, as only key expenses are represented, rather than all expenses.



SUMMARY

Executive Summary

The Executive Summary provides an overview of key findings and trends from the 2025 Activated Insights Benchmarking Report. Bud Meadows, CEO of Activated Insights, discusses how to leverage these insights to make the most out of every interaction and enhance outcome-based care. Additionally, Jason Lee, CEO of the Home Care Association of America, and Kristen Wheeler, Executive Director of Private Duty at the National Association for Home Care & Hospice, offer their industry perspectives.

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KEY FINDINGS FROM THE 2025 REPORT

6 Key Findings to Help You Translate Data into Measurable Impact

Before the Benchmarking Report, comprehensive industry data was limited. Today, it's a trusted resource for home care, home health, and hospice leaders navigating a complex post-acute care landscape. As challenges grow, the report delivers clear insights and strategies to help providers strengthen performance and stay aligned.

Now in its 16th year, the **Activated Insights Benchmarking Report** remains the industry's most trusted resource for home care, home health, and hospice leaders. This annual report continues to set the standard—helping providers benchmark their performance, uncover key trends, and learn from the highest-performing agencies in the field.

This year we're seeing meaningful momentum: **turnover has hit a new low, customer and employee satisfaction are rising, and continued training is directly tied to higher revenue.** The 2025 Benchmarking Report captures these shifts—identifying the patterns, opportunities, and threats shaping the future of post-acute care.

Whether you're rethinking your hiring funnel, refining your training model, or turning satisfaction into sustainable growth, these insights are built to help you move forward—with data you can trust and actions you can take.

Sales & Marketing

Finding #1: Providers who double down on reputation and follow-through are seeing bigger wins—even as acquisition costs climb.

In 2024, **word-of-mouth referrals once again were the #1 source of new business—accounting for 50% of median revenue.** It's no surprise. When families have a great experience, they share it. And when people hear about care that made a real difference, they go looking

for it—often starting with a quick online search. That might explain why corporate web leads showed up in the top 10 for the first time this year. Families are hearing about great care—and going online to find a local branch or franchise near them.

12.9% When great experiences drive referrals, growth follows. In 2024, **home-based care saw a 12.9% median customer growth rate—the highest in six years.** Hospice growth held steady at 14.5%, maintaining strong momentum from last year.

But that kind of growth comes at a cost. Customer acquisition costs hit a six-year high, reaching \$845 per customer. That means every inquiry matters more—and agencies that track every lead are pulling ahead. Those who did brought in nearly \$1 million more in median revenue than those who didn't.

And when you layer in the right tools, that impact grows. **Agencies using Activated Insights products reported a median of 300 inquiries—more than 2x as many as those not using Activated Insights tools.**

When you build trust, follow through, and have the right tools to support you and your staff, growth follows.

Recruitment & Retention

Finding #2: Turnover is down—and agencies are leaning into what's working: happy employees, strong culture, and referrals that stick.

For the first time in years, **professional caregiver turnover is moving in the right direction—dropping from 79.2% to 75.0%** in 2024. It's not a dramatic shift, but in an industry where burnout has been the norm, it's a welcome one.



KEY FINDINGS FROM THE 2025 REPORT

Referral programs are likely part of the reason. They were the #2 recruitment source for both home-based care and home health & hospice—**holding steady at 14.7% in home care and jumping from 4.7% to 14.3% in home health and hospice.**

That growth points to more than just a hiring strategy. It may reflect growing employee satisfaction. When care professionals feel valued and aligned with their agency's mission, they're more likely to bring others in.

But while retention is improving, hiring is getting harder. **In 2024, applicant-to-hire ratios dropped sharply from 12.8% to 7.9%.** Even the best-performing agencies saw their conversion rates fall. Agencies are facing pressure mid-funnel. Fewer applicants are making it to the interview stage, whether due to ghosting, mismatched qualifications, or slow follow-up. And with care professional shortages still widespread, providers are feeling the strain—whether it's finding the right people or moving them through the process efficiently.

The real challenge isn't just attracting applicants—it's keeping them engaged and moving. In today's job market, great candidates don't stay available for long. If you're not first, you're often out. That's why speed and follow-through matter more than ever.

Tools like **Recruit**, from Activated Insights, help agencies stay ahead by simplifying scheduling, reducing no-shows, and making it easier to connect with the right talent.

Training

Finding #3: More training = more revenue. Agencies investing in both strong orientation and ongoing development are seeing the payoff.

In 2024, one thing became clear: training is an investment that pays off. **Agencies offering more than 8 hours of orientation reported a median revenue of \$2.4M—compared to just \$2.03M for those offering 3 hours or less.** That early investment helps new hires start strong, feel supported, and stick around longer.

\$55K But it doesn't stop at compliance training. **Agencies that offered more than 12 hours of ongoing training earned \$55K more than those offering 4 hours or less.** Even a small bump, from 8 hours or less to more than 8, was tied to an extra \$131K in revenue.

There's still work to do. Just 64.2% of agencies reported offering continuing education, and more than half still don't provide a training-based career ladder. That's a missed opportunity—especially when training is so clearly tied to performance, retention, and growth.

Most agencies are sticking with familiar formats. In-house classroom training is still the most common at 77.6%, with vendor-led online training close behind. And as we look at where agencies are focusing their specialty training, some new trends are emerging. But the topics are shifting. **For the first time, end-of-life care training made the top ranks, offered by 42.7% of agencies—up from almost none last year.** Dementia and Alzheimer's training also remained strong, offered by the vast majority.

This shift suggests that providers are looking to better equip all staff—not just specialists—with the skills needed to support clients and coworkers through end-of-life care. And with the aging population growing rapidly, what was once considered specialty training is quickly becoming part of the standard.

The right training partner helps ensure that both orientation and ongoing education cover all of these essential topics—meeting compliance requirements, supporting client needs, and keeping staff engaged and prepared.

Finance

Finding #4: Revenue is rising, and providers who align training, billing, and skill level are positioned to grow even faster.

In 2024, median revenue rose by \$291,315—reaching \$2.3M, the highest level in six years. But this growth didn't come from logging more hours. In fact, median weekly billable hours fell from 1,158 to 959.

Instead, providers are leaning into more strategic billing models that reflect the true complexity of care. **The number of agencies billing based on both visit length and care professional skill level increased to 32.3%, up from 29.0% the year prior.** And it's paying off. Rates for short-shift visits hit a new high of \$42.50, making them the most profitable visit type on the schedule.



KEY FINDINGS FROM THE 2025 REPORT

Payer diversification is also playing a role. **Private pay now accounts for 65.3% of revenue, up from 59.6%, while long-term care insurance, VA programs, and Medicaid Waivers remain essential contributors.**

It's a sign that providers are adapting—moving beyond flat-rate billing to better capture the value of skilled care. And for agencies that align this shift with structured training programs, there's even more upside: higher billing rates, better margins, and a clear path to rewarding the care professionals delivering that advanced care.

Operations

Finding #5: Customer turnover is down, lifetime value is up but gaps in goal alignment and outcomes tracking still put loyalty at risk.

\$2,280 Customer relationships are getting stronger. **In 2024, home care customer turnover hit a 7-year low, dropping to 45.5%. And as clients stayed longer, median lifetime value rose by \$2,280—the highest it's been in five years.**

Family members continue to play a central role in care decisions. In fact, 60.4% of clients began services at the request of a family member. And while 94.4% of providers say they involve the family in the care plan, only 26.7% completely met the family's care goals.

That disconnect could pose a risk. Nearly 20% of clients stopped services in 2024 because they needed a higher level of care—and 1.2% cited dissatisfaction with quality, a small but meaningful increase.

And while providers are consistently engaging families, many are missing critical pieces of the picture when it comes to outcomes. **Only 25.4% of agencies are tracking hospital admissions—meaning most providers lack data on how their care is truly impacting health, risk, and continuity.**

In a competitive, referral-driven market, that's a missed opportunity. Agencies that track outcomes can spot problems sooner, demonstrate value to referral partners more clearly, and build the kind of trust that keeps families coming back and referring others.

Customer & Employee Experience

Finding #6: Satisfaction is on the rise—and the agencies listening to both customers and employees, following through, and showing recognition are leading the way.

In 2024, both client and employee satisfaction continue to rise. **Net Promoter Scores (NPS) and Employee Net Promoter Scores (eNPS) improved this year, while overall satisfaction scores remain consistently high.** The message is clear: when agencies prioritize experience and reinforce it with regular feedback and follow-through, trust and loyalty grow.

Clients reported the highest satisfaction with care professional ability and compatibility. On the employee side, care professionals felt most positive about how well they were matched with clients—showing strong alignment between staff and those they care for.

But even with these gains, some gaps remain. **Communication was the lowest-rated category among clients. For employees, recognition was the lowest-scoring experience metric. Care professionals want to feel valued, not just supported.**

Real satisfaction comes from feeling seen, supported, and valued—and that's what keeps both clients and care professionals coming back.

Increase your credibility with referral sources by gaining a globally recognized and research-backed verification of a great employee experience. Great Place to Work Certification helps job seekers identify which companies genuinely offer the company culture everyone is talking about.



ARTICLE



Bud Meadows
Chief Executive Officer
Activated Insights

Making the Most of Every Interaction: Elevating Care with Outcome-Driven Insights

At Activated Insights, our mission is to improve outcomes for all stakeholders in the care continuum through mission-critical applications—our Benchmarking Report is one of the ways we do that.

For nearly two decades, Activated Insights Annual Benchmarking Report has become a critical resource for home-based care providers, offering invaluable insights into key industry dynamics and shaping industry conversations across the nation. These real-time business insights—shared by providers like you—fuel thought leadership discussions across North America at conferences, webinars, articles, and events alike.

In today's rapidly evolving healthcare landscape, the state of long-term and post-acute care looks very different from even a couple years ago. It's never been more essential for home-based care providers to make the most of every interaction to best position our industry along the care continuum. Our Benchmarking Report provides a comprehensive look at current trends and forward-thinking strategies for you to make data-driven business decisions that ultimately drive improved care outcomes.

This report helps you:

- **Benchmark** your performance against industry standards
- **Identify growth opportunities** in patient satisfaction, staff engagement, operational efficiencies, and technology adoption
- **Make data-driven decisions** that enhance care quality, boost staff engagement, and strengthen financial performance

As we move forward, our commitment remains the same—helping organizations transform care delivery by leveraging data in meaningful ways. By harnessing the power of data and applying it thoughtfully, we believe that together, we can create a future where long-term and post-acute care is more personalized, efficient, and impactful for everyone involved.

I invite you to explore this year's Benchmarking Report and use it as a tool to drive meaningful change in your organization. The insights within are designed to help you elevate care, achieve better outcomes, and continue to push the boundaries of what's possible in the care continuum.

Thank you for making one of the largest industry's reports possible and for your unwavering commitment to quality care outcomes. 

Bud Meadows
Chief Executive Officer, Activated Insights

ARTICLE

2025: A Year of Transition and Opportunities for the Industry



Jason Lee

Chief Executive Officer
**Home Care Association
of America**



This year, those in the home-based care industry are finding themselves in a new world of transition and opportunities—and the Home Care Association of America (HCAOA) is ready. With the new 119th Congress, a change in the White House administration, and an increasing spotlight on home care's integral role in our nation's healthcare infrastructure, 2025 could prove to be a landmark year for the home-based care industry. We already saw a significant policy victory for the industry with the enactment of Senator Elizabeth Dole 21st Century Veterans Healthcare and Benefits Improvement Act at the beginning of 2025. We continue to see workforce challenges and the need to find creative solutions to better serve our country's elderly, medically fragile children, veterans, and others in need. The HCAOA looks forward to addressing these issues and opportunities throughout the year.

In the past several years, the federal government has increasingly recognized the importance of supporting the home-based care industry. The passage of the Senator Elizabeth Dole 21st Century Veterans Healthcare and Benefits Improvement Act included a significant provision that raised the cap on home care costs covered by the Department of Veterans Affairs (VA). Under the recently passed law, the VA will now pay up to 100% of the cost of home-based care services (an increase from the previous 65% cap on those costs), matching the cost of nursing home care. This success highlights the power of our members' advocacy efforts. HCAOA members sent over 4,000 messages to Capitol Hill and held more than 100 meetings featuring providers from 30 states in 2024 alone. This dedication and passion played a pivotal role in securing this crucial victory for veterans, their families, and caregivers.



During the 2024 election, both presidential candidates campaigned on their proposals to enhance home-based care. These proposals elevated both the home-based care industry and the conversation around how we can assist families and those who need home care. It was a recognition that it is important to look at policies to support families and devise ways of helping them bear the costs of home-based care. This is critical on two levels: first, it is important to give family caregivers access to professional care staff, so they are not the only ones caring for their loved ones; and second, it is essential that we develop avenues to help families pay for the care of their loved ones. Data from the National Alliance for Caregiving and AARP indicates that the number of family caregivers increased from 43.5 million in 2015 to 53 million in 2020, with nearly one in five Americans (19%) providing care to an adult with health or functional needs.



To help families augment home-based care with professional care staff, President Trump's administration and Congress can enact some key policies to help Americans. With tax policy on the table in 2025, we have another avenue and opportunity to enact legislation to support home-based care and those benefiting from it. Policies such as new tax credits and the ability to

“The home care workforce more than **doubled in size over a ten-year span**, increasing from just over one million workers in 2010 to more than 2.4 million in 2020.”

use health savings accounts for home-based care are potential options for providing support to families and those in need of home care.

On the other side of the coin, the workforce continues to be top of mind for our industry. We currently do not have enough care staff to respond to the ever-growing need for the home-based care industry. The workforce think tank, Protected Health Information (PHI) reported that the home care workforce more than doubled in size over a ten-year span, increasing from just over one million workers in 2010 to more than 2.4 million in 2020. However, that increase alone is still not enough to meet the needs of the more than 12 million people of all ages who depend on these services.

One avenue for addressing our workforce needs is through common-sense immigration policies. Almost one-third of the home-based care workforce is composed of immigrants. Yet, according to the Immigration Policy Institute, the pandemic led to sharp drops in immigration to the United States, to levels not seen in decades. Issuance of visas for legal permanent residence fell 48% between fiscal years 2019 and 2020, while temporary visa issuances dropped 54%.

We believe that streamlining the existing EB-3 visa process and designating caregiving as a Schedule A occupation would create opportunities for employers to obtain visas for foreign-born workers and help address the workforce crisis for home-based care. We also believe that the creation of a home care visa, tailored to meet the unique needs of the home-based care industry, would also do much to solve this critical problem. We simply do not have enough professional care staff in America. These visa recommendations will create pathways for additional caregivers to fill the gap.

These are conversations that we will continue to have throughout 2025. We believe that there are many creative solutions on hand that we can implement to benefit those served by home-based care and their families. We hope that you will join us in these efforts. 

Jason Lee
Chief Executive Officer, HCAOA

ABOUT THE AUTHOR

Jason Lee brings more than 20 years of experience in advocacy and nonprofit management. His background includes tenures as Chief of Staff and Senior Advisor to the President at the American Dental Education Association (ADEA) and Chief Advocacy and Strategy Officer at the Association of Fundraising Professionals (AFP). Lee holds a Juris Doctor degree from The George Washington University Law School, a Master of Arts in English Literature from Binghamton University, and a Bachelor of Arts in English Honors and Plan II Honors from The University of Texas at Austin.

Benefits of HCAOA Membership

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Connect with other HCAOA members in your state chapter and across the country to share best practices and tools.



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\$888 ANNUAL DUES =
\$200,000
IN MEMBER BENEFITS!

HCAOA members have **45%** higher revenue than non-member agencies.



Home Care
Association of America

ARTICLE

Better Access to Care at Home: A Critical Issue for 2025



Kristen Wheeler

Executive Director, Private Duty Home Care

National Alliance for Care at Home



**National Alliance
for Care at Home**

As the demand for long-term and post-acute care services continues to rise, expanding access to care in the home has become one of the most pressing issues facing the healthcare system. For individuals and families, home-based care offers numerous benefits—enhancing independence, improving health outcomes, honoring participant preferences, and often providing a more affordable alternative to institutional settings. Yet, despite these clear advantages, a growing demographic shift, rising healthcare costs, and systemic policy barriers have created urgent challenges.

The United States' aging population, with adults aged 65 and older expected to double in the coming decades, is driving an increased need for home-based care services. At the same time, home-based care providers face

significant obstacles including workforce shortages, limited reimbursement, and outdated benefit designs, all of which threaten the ability to meet this rising demand.

Barriers to Access

Several critical issues have created barriers to accessing care at home:

1. Workforce Shortages

One of the most significant obstacles to expanding access to care at home is the shortage of willing and qualified home care workers. With the demand for home-based care services far outpacing the number of available caregivers, many organizations are forced to limit the number of individuals they can serve.

Low wages, high turnover, and inadequate training opportunities contribute to this shortage, making it difficult for home-based care organizations to recruit and retain workers. Without a stable and well-trained workforce, providers struggle to offer consistent, high-quality care, ultimately limiting access to care.

2. Outdated Benefit Designs

The current healthcare system has not kept pace with the rising demand for home-based care. Many insurance plans, including Medicare and Medicaid, are structured around institutional care models that do not adequately support home-based care services. For example, many patients in need of long-term care find themselves limited to short-term, episodic home health services, which are often insufficient for managing chronic conditions. Medicaid's home and community-based services (HCBS) programs also face restrictive eligibility criteria, waiting lists, and funding caps, preventing many individuals from accessing the care they need to remain in their homes.

3. Inadequate Payment Rates

Home-based care providers are further challenged by low reimbursement rates from both Medicare and Medicaid, which often do not reflect the true cost of delivering high-quality, patient-centered care in the home. Rising operational costs, including wages, training, and administrative overhead, make it increasingly difficult for home care agencies to remain financially viable. Without adequate reimbursement, agencies are unable to offer competitive wages or invest in workforce training, further exacerbating the shortage of qualified care staff.

4. Administrative Roadblocks

In addition to financial and workforce challenges, home-based care providers often face complex regulations and administrative burdens. Navigating a labyrinth of



“Fair reimbursement rates will help ensure that home-based care remains an **affordable and accessible option for all patients who need it.**”

federal, state, and local rules can be time-consuming and costly for agencies. These administrative obstacles divert resources away from patient care and hinder the providers' ability to expand services, limiting access to the care that patients need.

What Needs to Change?

To address these barriers, and expand access to care at home, significant policy reforms are necessary. As the unified voice of home-based care providers, the National Alliance for Care at Home is actively advocating for changes that will improve access to home-based care, strengthen the workforce, and ensure fair reimbursement rates. The Alliance is committed to driving these changes through the following key areas:

1. Investing in the Home-Based Care Workforce

The shortage of qualified care staff is one of the most urgent challenges facing our industry. The Alliance

is working tirelessly to advocate for policies that support workforce development, including funding for training programs, career advancement opportunities, immigration reforms, and financial incentives to retain caregivers. The Alliance also supports legislative efforts to raise wages and improve benefits for home-based care workers, recognizing that better compensation is critical to addressing turnover and attracting new talent to the field. By pushing for stronger workforce policies, the Alliance aims to ensure that providers can meet the growing demand for services while maintaining the quality of care that patients and clients deserve.

2. Updating Benefit Designs to Reflect the Need for Home-Based Care

The Alliance is advocating for updates to benefit designs that make it easier for individuals to access long-term care at home. Current systems often favor institutional settings and provide limited support for those seeking home-based care. The Alliance works with policymakers to expand coverage for home-based care services under



Medicare and Medicaid; ensuring that individuals with chronic conditions, disabilities, or complex needs can receive care at home without facing restrictive eligibility requirements. By modernizing benefit designs, the Alliance aims to create a more equitable healthcare system that gives patients the freedom to choose home-based care as a viable, long-term option.

3. Improving Reimbursement Rates for Home-Based Care Services

To make home-based care a sustainable option, reimbursement rates must reflect the true cost of care. The Alliance is advocating for increased reimbursement for home-based care services, especially under Medicare and Medicaid, to ensure that providers are financially able to offer high-quality care and pay competitive wages. The Alliance is also working to address payment discrepancies and streamline reimbursement processes, so providers can focus more on delivering care rather than navigating complex billing procedures. Fair reimbursement rates will help ensure that home-based care remains an affordable and accessible option for all patients who need it.

4. Reducing Administrative Burdens

Home-based care organizations often face complex and time-consuming regulations that drain resources and hinder their ability to serve more patients. The Alliance is advocating for the simplification of administrative processes, including reducing unnecessary paperwork and eliminating duplicative regulations. By working with policymakers to streamline compliance requirements, the Alliance is helping agencies focus more on patient care and less on managing red tape. These efforts are critical to enabling home-based care providers to scale their services and reach more individuals in need.

Looking Ahead: The Future of Home-Based Care

As we look ahead, the need for expanded access to care at home will only grow. The formation of the National Alliance for Care at Home—through the merger of the National Association for Home Care & Hospice (NAHC) and the National Hospice and Palliative Care Organization (NHPCO)—marks a pivotal moment in advocating for home-based care policies that will address these critical issues. As the unified voice for all providers of care at home, the Alliance is working diligently to push for the legislative and regulatory changes necessary to remove the barriers that currently limit access to care.

Together, the Alliance represents a collective force committed to ensuring that all Americans can access the care they need, in the setting they deserve: their own homes. Through continued advocacy and partnership with stakeholders, the Alliance will continue to push for a more sustainable, accessible, and equitable home-based care system. By addressing the challenges in workforce development, reimbursement, benefit design, and administrative burden, we can make care at home a more viable option for everyone who needs it. ■

Kristen Wheeler
Executive Director of Private Duty, NAHC

ABOUT THE AUTHOR

*With over three decades of experience in the healthcare industry, **Kristen Wheeler** has focused on private duty home care since 2004. Her journey began when she was entrusted with developing a private duty program for a Medicare-certified home care and hospice agency. Recognizing the importance of operational independence in private duty care, Kristen co-founded and co-owned a standalone private duty agency, gaining firsthand insights into the challenges and rewards of the field.*

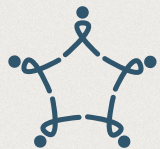
Kristen's commitment to advancing the private duty home care sector continued when she transitioned into the association world, beginning with her nearly six-year tenure at the Home Care Association of Florida (HCAF). In early 2022, she joined the National Association for Home Care and Hospice (NAHC), now the [National Alliance for Care at Home](#), where she continues to elevate the voice of home care providers. Kristen advocates for the essential role home care plays in enabling people to age with dignity in their own homes while receiving the quality support they need.

Your Resource. Your Advocate.

Your Network.

NAHC and NHPCO have come together to form a new organization – the National Alliance for Care at Home (the Alliance).

The Alliance is the leading authority in transforming care in the home – an inclusive thought leader, advocate, educator, and convener and the unifying voice for those providing and receiving healthcare through all stages of life.



**National Alliance
for Care at Home**

allianceforcareathome.org





SUMMARY

Sales & Marketing

The Sales & Marketing section explores the diverse strategies and channels that home-based care businesses are leveraging today, offering insights to help you assess the best approach for your organization. This section covers key data on acquisition and retention, including the most effective channels for consumer and referral marketing, as well as conversion rates and acquisition costs. Evaluate how your sales and marketing efforts compare to other businesses in your region and revenue bracket.

Section Contents

- 22 Marketing Sources
- 28 Inquiry Tracking
- 30 Median Sales Close Ratios & Numbers
- 32 Annual Number of Inquiries
- 33 Growth Opportunities
- 34 Top Threats
- 35 Client Growth Rates
- 37 Client Acquisition Costs

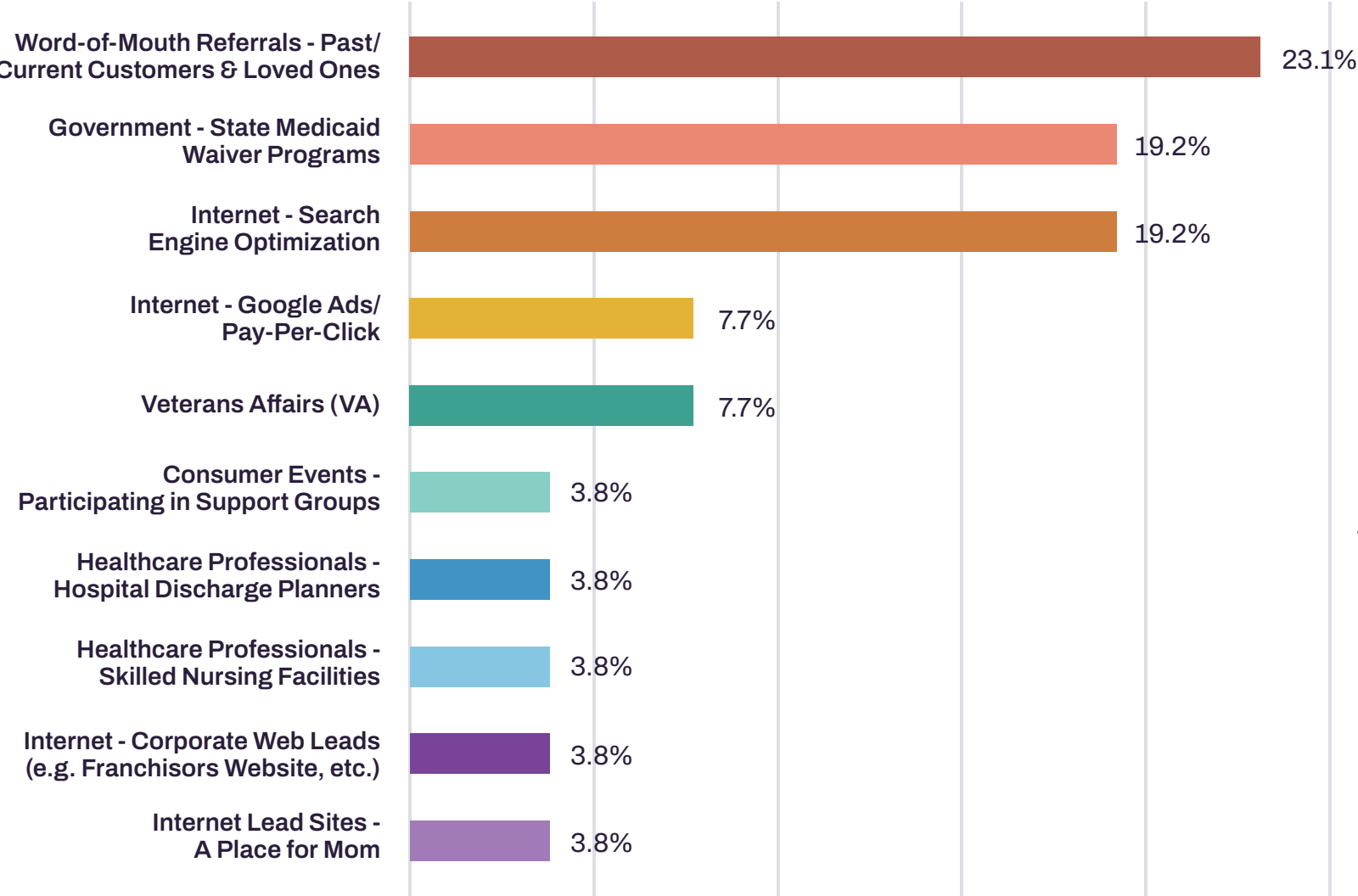
ARTICLES

- 40 *Breaking Down Silos: Elevating Home Care's Role in the Care Continuum*
- 42 *Tips to Hiring the Ultimate Business Development Professional*



MARKETING SOURCES

2.1 **Home Health Hospice** 2024 Top 10 Marketing Sources - #1 Source



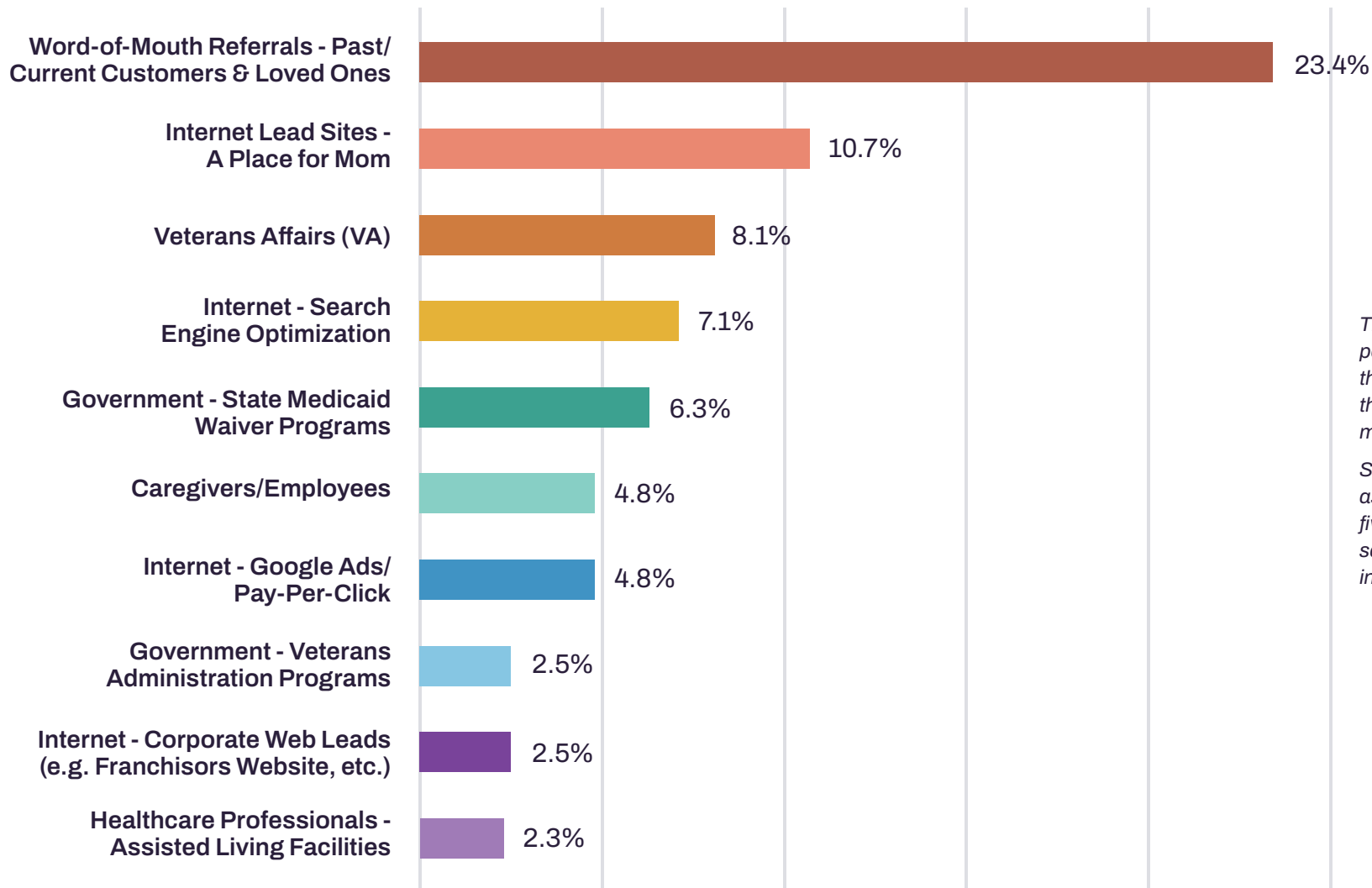
This graph shows the percentage of participants that chose each of these options as their #1 marketing source.

Survey participants were asked to, "Select your top five revenue-generating sales & marketing sources in 2024."



MARKETING SOURCES

2.2 Home Care 2024 Top 10 Marketing Sources - #1 Source



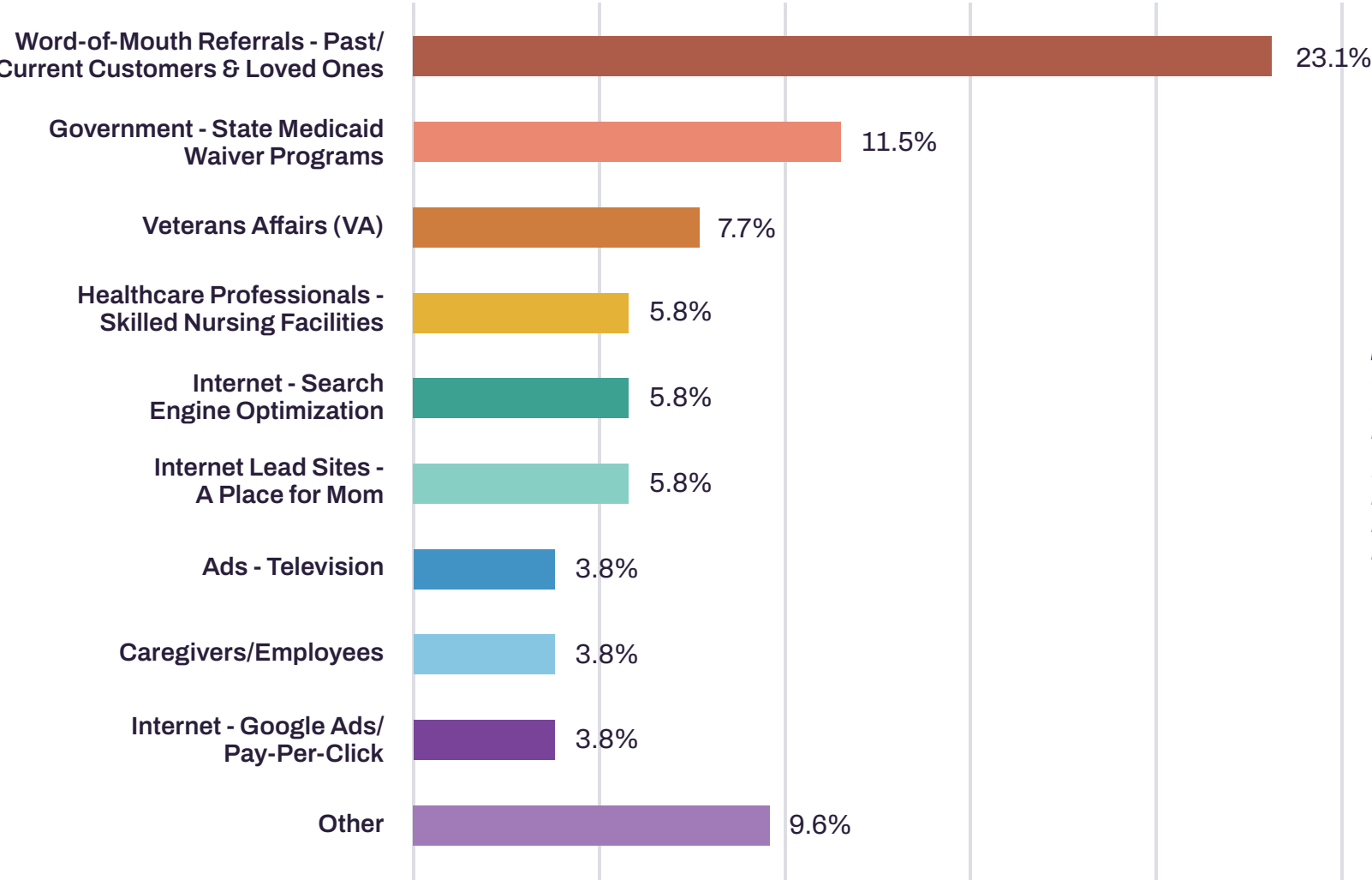
This graph shows the percentage of participants that chose each of these options as their #1 marketing source.

Survey participants were asked to, "Select your top five revenue-generating sales & marketing sources in 2024."



MARKETING SOURCES

2.3 Home Care 2024 Top 10 Marketing Sources - # 1 Source - Masters



This graph shows the percentage of participants that chose each of these options as their #1 marketing source.

Masters represent home care providers who billed \$5M+ in annual revenue in 2024.



MARKETING SOURCES

2.4 Home Care 2024 Top 20 Marketing Sources

Source	% of Participants	Median % of 2024 Revenue*	Median Revenue**	Median Customer Acquisition Costs**	Inquiry-to-Admission Ratio**
Overall Home Care Industry - 2024	—	—	\$2,301,086	\$845	29.3%
Word-of-Mouth Referrals - Past/Current Customers & Loved Ones	20.6%	51.53%	\$2,301,057	\$725	29.0%
Internet - Search Engine Optimization	7.3%	21.18%	\$2,400,000	\$789	29.0%
Veterans Affairs (VA)	5.4%	15.29%	\$2,416,000	\$647	33.4%
Caregivers/Employees	5.0%	9.88%	\$2,150,000	\$993	22.8%
Internet Lead Sites - A Place for Mom	5.0%	10.82%	\$2,100,000	\$1,046	22.1%
Healthcare Professionals - Hospital Discharge Planners	4.6%	11.53%	\$3,793,000	\$833	30.4%
Healthcare Professionals - Hospices	3.7%	10.59%	\$2,554,000	\$703	25.7%
Internet - Google Ads/Pay-Per-Click	3.7%	8.94%	\$2,174,000	\$820	30.0%
Government - State Medicaid Waiver Programs	3.0%	6.59%	\$2,809,402	\$624	41.7%
Healthcare Professionals - Assisted Living Facilities	2.8%	7.29%	\$2,100,000	\$872	28.1%
Internet - Corporate Web Leads (e.g. Franchisors Website, etc.)	2.7%	7.53%	\$2,141,708	Survey participants were asked, "Select your top five revenue-generating marketing sources in 2024. Then select the percentage of 2024 annual revenue for which each top method was responsible." * Median Percent of 2024 Revenue shown here represents the percentage of revenue that came from a given source. ** These data points represent the median revenue, customer acquisition costs, and inquiry-to-admission ratio for agencies who listed each given source as a top revenue-generating source.	
Healthcare Professionals - Home Health Agencies (Medicare-Certified)	2.4%	6.59%	\$2,308,057		
Healthcare Professionals - Rehabilitation Hospitals (Inpatient)	2.4%	6.59%	\$2,394,180		
Government - Veterans Administration Programs	2.3%	4.94%	\$2,100,000		
Healthcare Professionals - Skilled Nursing Facilities	2.2%	6.35%	\$2,400,000		
Government - Area Agency on Aging Case Managers	2.0%	4.94%	\$2,388,360		
Internet Lead Sites - Caring.com	1.9%	3.29%	\$1,337,154		
Healthcare Professionals - Independent Living Facilities	1.8%	4.47%	\$2,400,000		
Trusted Advisors - Geriatric Care Managers	1.8%	4.71%	\$3,557,666		
Other	3.9%	12.71%	\$2,723,729	\$877	33.0%



MARKETING SOURCES

Other Marketing Sources

This list provides some additional and lesser-known sources of new home care customers that you may like to review. **Options submitted under “Other” for the 2024 survey are highlighted in red.**

ADVERTISING

- Ads - Church Bulletins
- All Media, such as Brochures
- **Benefits Organizations**
- Billboards
- Brochures (Local Restaurants, Mailbox Drops)
- **Digital Marketing**
- Direct Mail
- **Google Ads**
- Local Newspaper/Magazines
- **Local Radio Advertisements**
- Mailers
- Office Sign/Walk-Ins
- **Postcards**
- **Radio**
- **Radio Interview**
- Radio/Local Radio Advertising
- Senior Directories
- **Signage**
- Television
- Wrapped Vehicle

COMMUNITY RESOURCES

- Adult Day Care
- **Alzheimer's Association**
- **Area Association on Aging & Independent Living**

- Church Bulletin
- **Community Leads**
- County-Level Respite Program
- Exhibiting at Health Fairs
- **Hospital Institution Website**
- Indigenous Tribes
- Information & Referral/Assistance (I&R)
- Jewish Social Service Community
- Local Alzheimer's Support
- Local Church
- **Local County Program**
- Local Senior Center
- MSSP Programs/Foundations
- Networking Group Member
- Networking in Local Business Community
- Non-Profits
- **Programs such as VA, A Place For Mom**
- **Self Help Group - Holocaust Survivor Network**
- Support Group Participation
- Transportation Center

CONSUMER EVENTS

- Exhibiting at Health Fairs
- Participating in Support Groups
- Public Speaking at Churches, Senior Centers, etc.

HEALTHCARE PROFESSIONALS

- ALCA (Aging Life Care Assn) Certified Care Managers
- ALS Association
- Auto Case Managers
- Care Managers
- Developmentally Disabled Community
- Doctor's Offices
- Elder Care Placement Agency
- Hospice
- Hospital Discharge Offices
- Hospitals
- Independent Physical/Occupational Therapists
- Intellectual or Developmental Disability (IDD) Services
- Johns Hopkins Health System
- Long-Term Care Insurance
- Medicaid MCO Case Managers
- Networking Groups (Senior Niche groups, Referral Partners)
- Nursing Center
- Other Case Managers
- Palliative Care Provider
- Parent Hospital
- Parish Nurse
- Physician Offices
- Placement Agency

- Power Partners
- Rehabilitation Centers (Outpatient)
- Rehabilitation Hospitals (Inpatient)
- Skilled Nursing Facilities
- Workers' Compensation Case Managers

INTERNET

- 5-Star Reviews
- Care.com
- CareAvailability.com
- CareInHomes.com
- Carepathways.com
- Caringforasenior.com
- Google My Business
- Indeed
- LinkedIn
- NextDoor: Online Word-of-Mouth
- NextDoor Recommendations (Not Ads)
- Paid Banner Ads on Other Websites
- Trusted Hands Network
- Website
- Website (No SEO)
- Yelp

**Continued on next page*



MARKETING SOURCES

PARTNERS

- CCRCs
- Commissioned 1099 Referral Partners
- Competing Home Care
- Hospices
- Partner Agencies
- Physicians Offices
- Placement Agency (Care Patrol)
- Referral Partners
- Referral Partner Sources

STATE SERVICES

- Federal Workers Comp - OWCP
- Government Contracts
- PACE
- Social Service Organizations
- State Service Coordinator
- State Workers Comp - Pinnacol
- Workers' Comp Case Managers

TRUSTED ADVISORS

- Attorneys, Conservators
- Bank Trust Officers
- Care Coordinators (Membership Programs)
- Care Managers
- Case Managers
- Certified Senior Advisors (CSAs)
- Clergy
- Concierge Doctors
- Elder Law Attorney
- Estate Planning Attorneys
- Fiduciaries, Bank Trust Officers

- Financial Managers & Legal Advisors
- Financial Planner
- Geriatric Care Managers
- Guardians/Conservators
- Insurance Agents/Companies
- LTCI Companies
- Managed Care Case Managers
- MCO Case Manager

OTHER

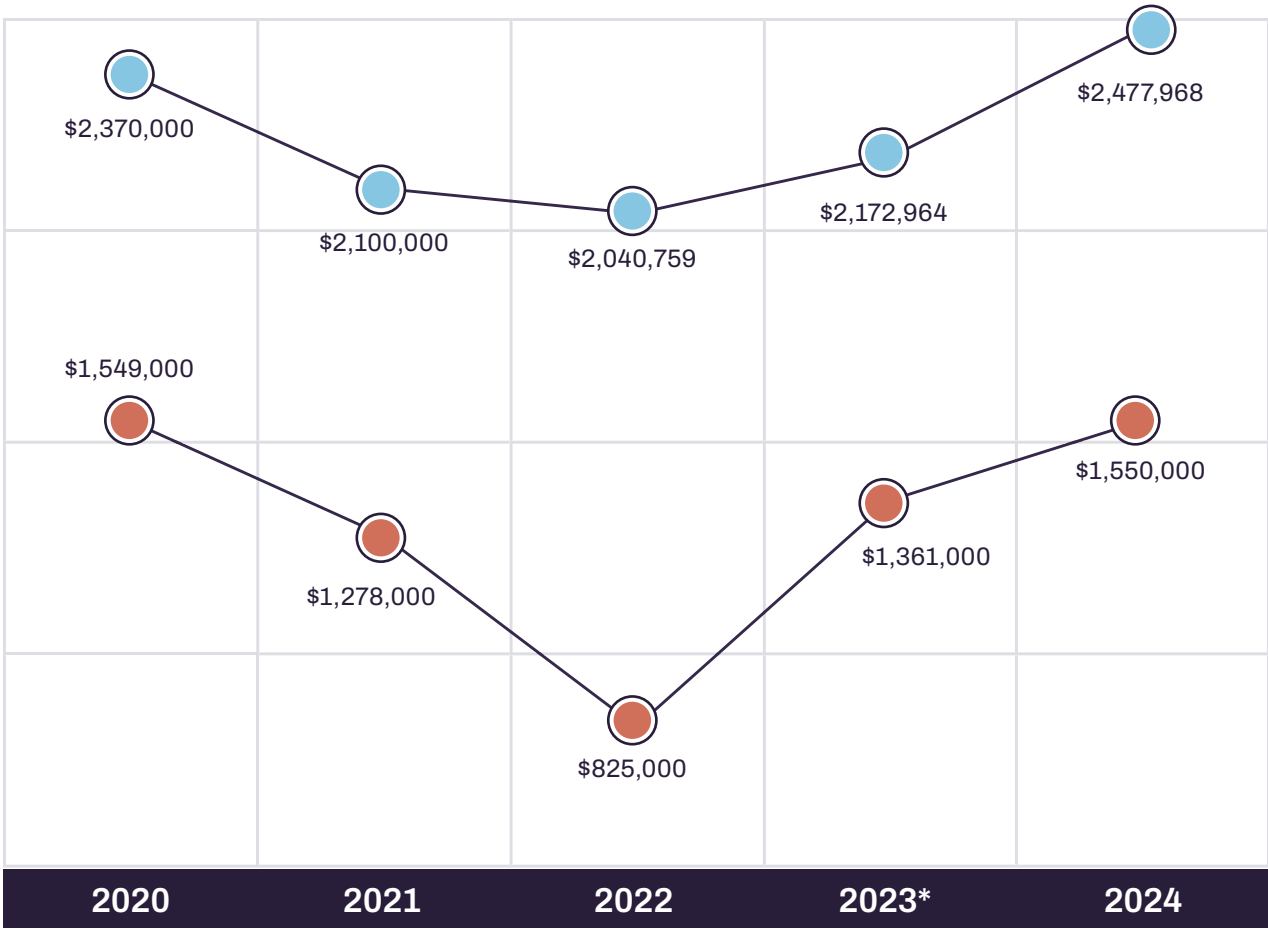
- Aid & Attendance Pension
- ARC-Respite Program
- Business Group
- Company Vendor(s)
- Competitors
- Contract such as SCAN Health Plan
- Corporate
- Employees
- Franchise Partners
- Friends of Employees
- Grants
- Hire Family Caregiver
- LTCI
- Managed Long-Term Care Plans
- Neighboring Franchise Offices
- Networking
- Non-Profit Grant Providers
- Office Spotting
- Other Franchises or Franchisor
- Owner/Founder

Partners

- Personal Family & Friends Network
- Private Customers
- Rackcard Holders
- Retail/Fast Food
- Retail Store
- Senior Placement Agencies
- Third-Party Aggregators
- Walk-In Inquiries at the Office

INQUIRY TRACKING

2.5 **Home Care** Historical Inquiry Tracking Comparison - Median Revenue



- Track Every Inquiry
- Do Not Track Every Inquiry

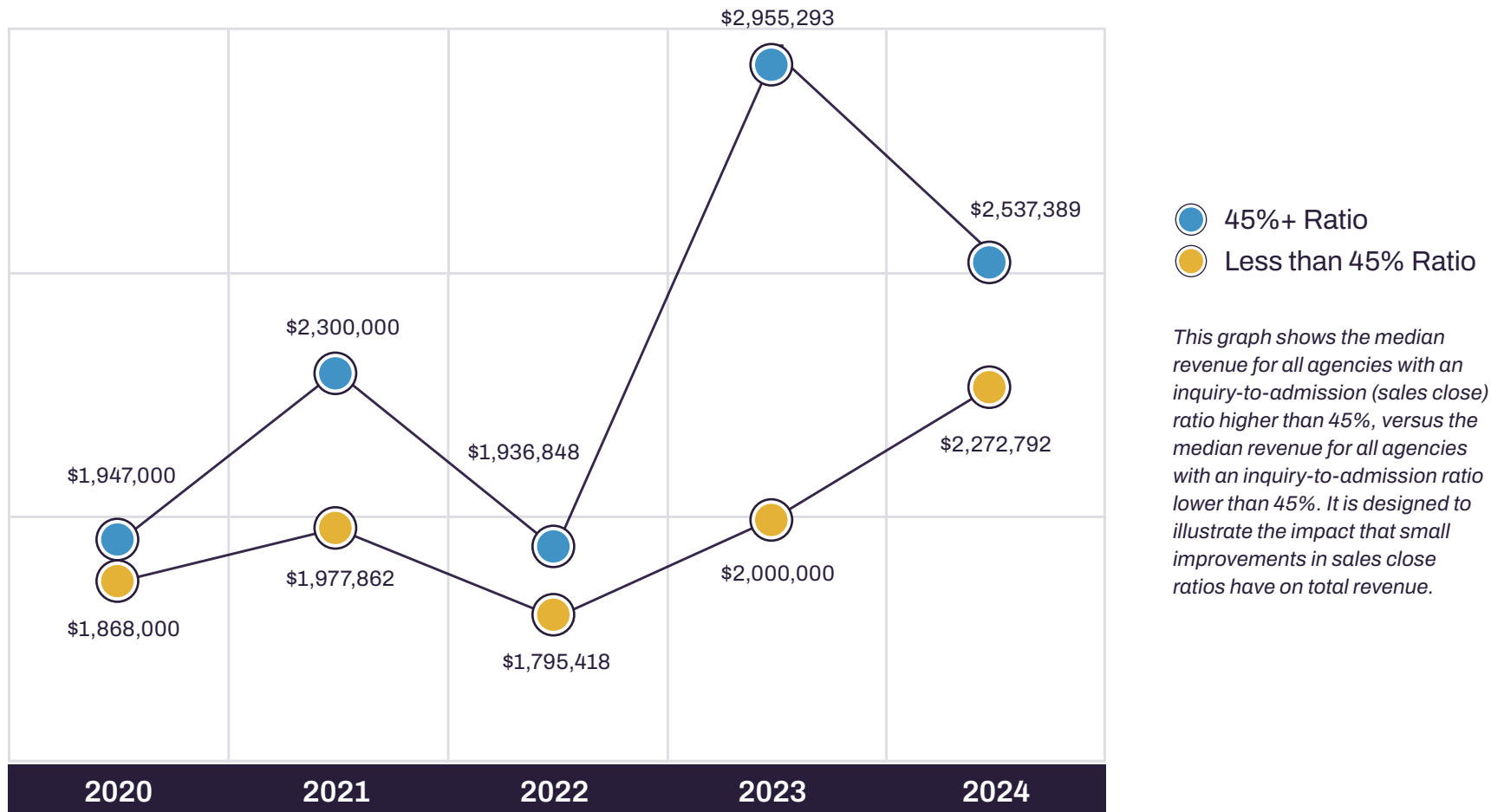
This graph shows the median revenue for those providers who track every inquiry about services versus those providers who do not track every inquiry about services.

*Previous years' data appears differently than in prior reports due to the inclusion of more accurately segmented historical data.



INQUIRY TRACKING

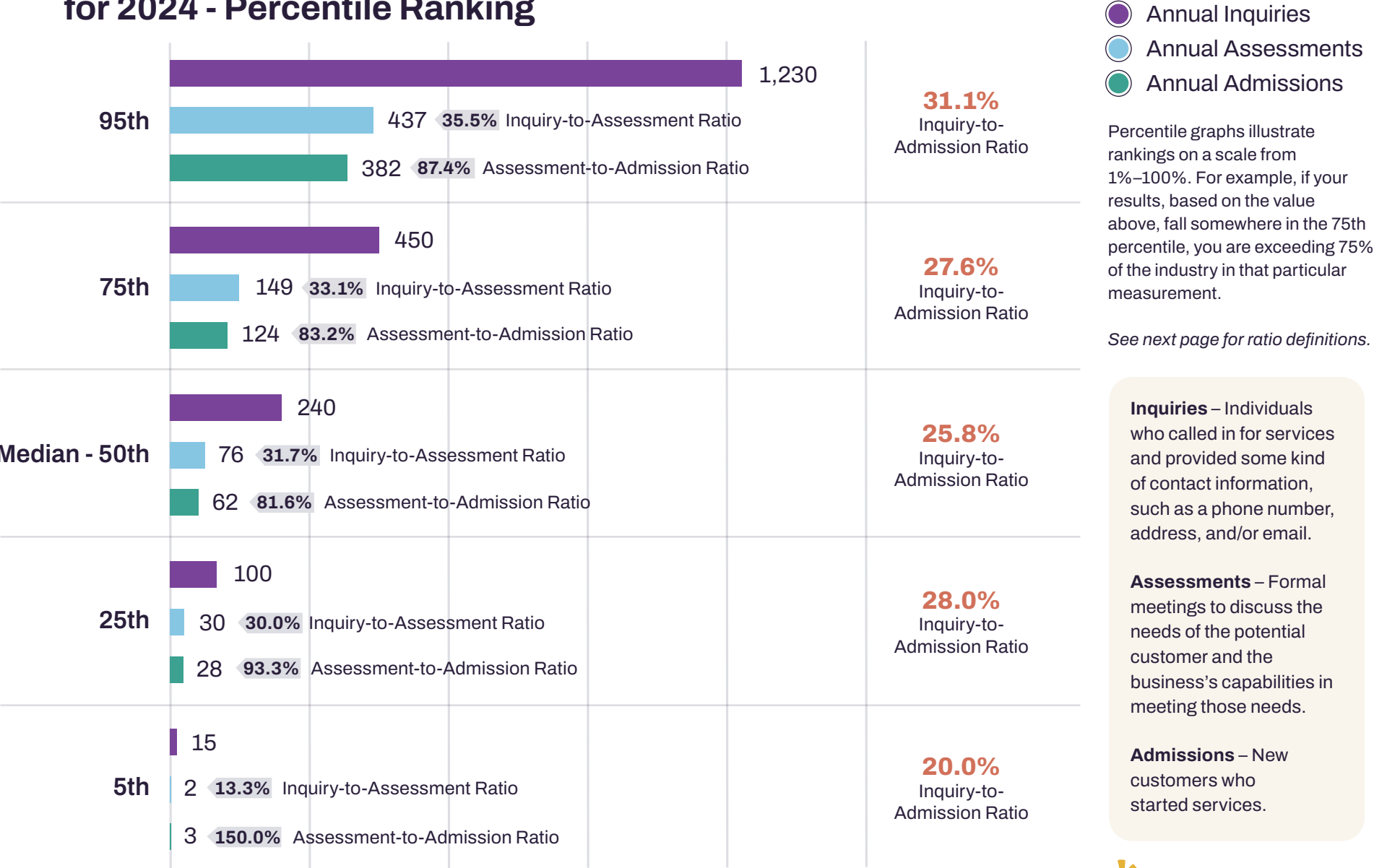
2.6 Home Care Historical High vs Low Inquiry-to-Admission Ratio - Median Revenue





MEDIAN SALES CLOSE RATIOS & NUMBERS

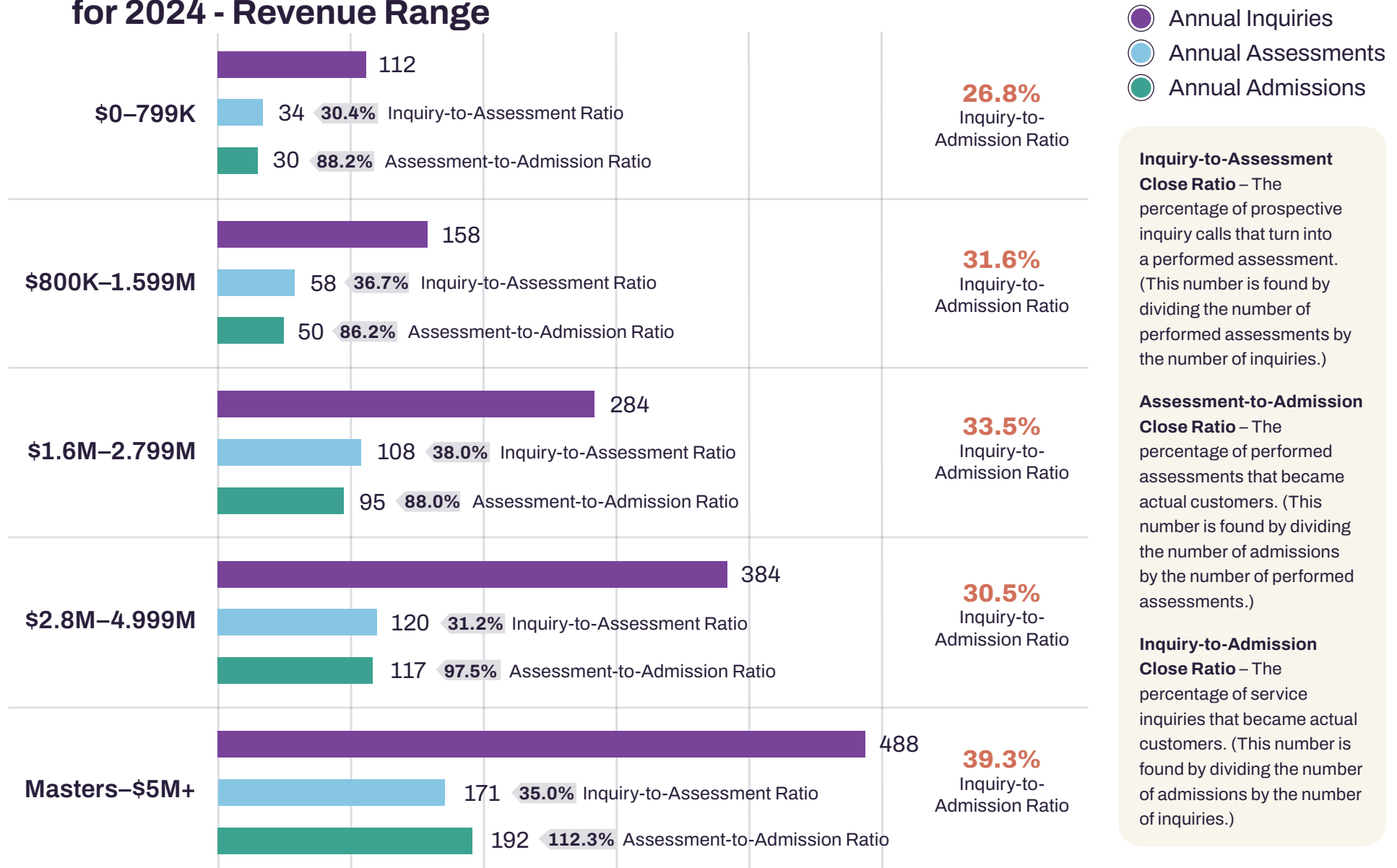
2.7 **Home Care** Median Number of Annual Inquires, Assessments and Admissions for 2024 - Percentile Ranking





MEDIAN SALES CLOSE RATIOS & NUMBERS

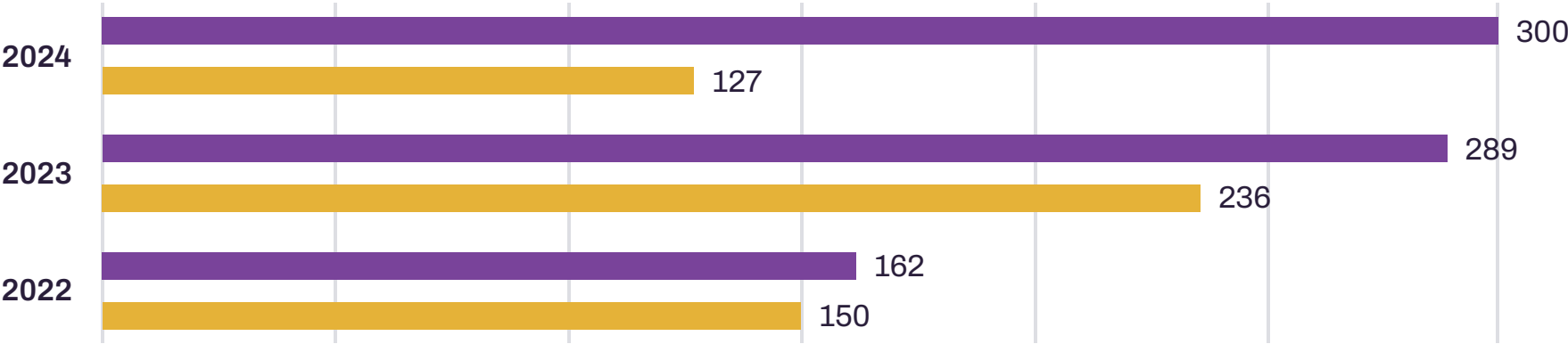
2.8 Home Care Median Number of Annual Inquires, Assessments and Admissions for 2024 - Revenue Range





ANNUAL NUMBER OF INQUIRIES

2.9 **Overall** Annual Number of Inquiries -
Businesses Using Activated Insights Products



- Use Activated Insights Products
- Do Not Use Activated Insights Products

Understanding the Data

Business using Activated Insights are equipped with the tools they need to help them stand out and deliver exceptional experiences. Activated Insights equips businesses with valuable tools to help them improve both customer and employee satisfaction, manage their online reputation, and provide employees with training to deliver the highest quality care.

Additionally, platform users are encouraged to utilize their customer and employee satisfaction scores in meetings with referral partners. Those that do so often report that this provides a clear competitive edge in securing partnerships.

Explaining the Gap

Businesses using Activated Insights are leveraging their results as proof of quality care to attract and earn more business and enhance their reputation, including more and better online reviews, more word-of-mouth referrals from loyal customers, and increased interest due to recognitions and awards like Great Place To Work® and Best of Home Care®.

To learn more about how Activated Insights can help your business grow, visit us at activatedinsights.com or contact us at (877) 899-9402.



GROWTH OPPORTUNITIES

2.10 Home Care Top 5 Growth Opportunities for 2025

Rank	Top Growth Opportunities	Percentage	Change from Previous Year
1	Strengthening relationships with referral sources	31.0%	▼ 2.1%
2	Care professional recruitment and retention program	14.0%	▼ 4.3%
3	Company expansion into a new market(s)	10.7%	▲ 0.7%
4	Increasing customer referrals by improving customer satisfaction	10.7%	▲ 4.3%
5	Strategic partnerships with continuum of care related companies	6.1%	▲ 1.1%

Survey participants were asked, "What do you see as your number one growth opportunity in 2025?"

GROWTH OPPORTUNITIES

2.11 Home Health Hospice Top 5 Growth Opportunities for 2025

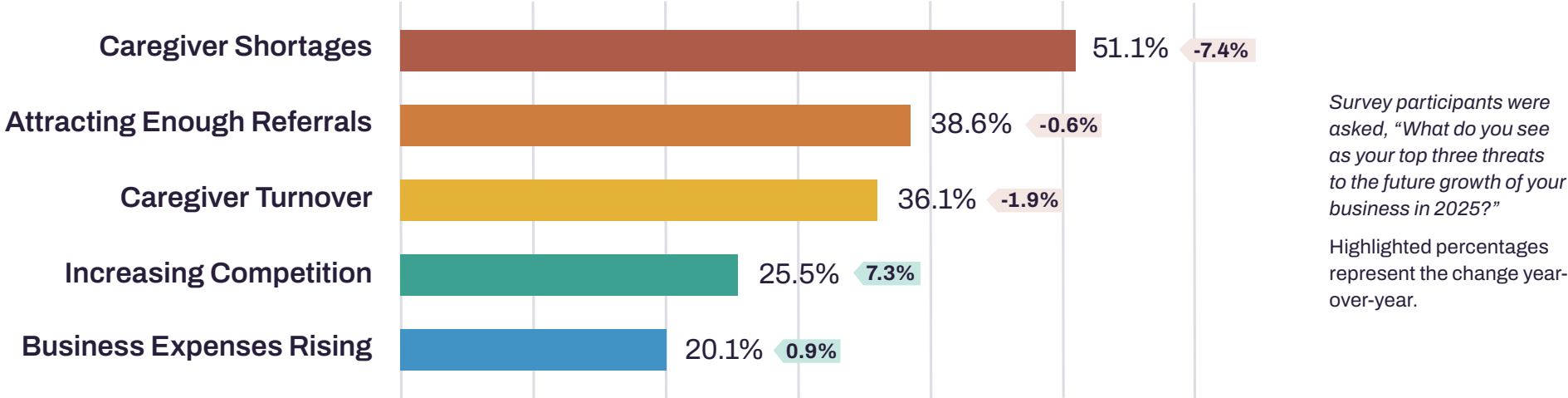
Rank	Top Growth Opportunities	Percentage	Change from Previous Year
1	New Referral Sources	22.1%	0.0%
2	Strengthening Relationships	16.9%	▲ 0.1%
3	Client/Family Referrals	13.0%	▼ 2.9%
4	New Partnerships	13.0%	▲ 1.5%
5	Recruitment/Retention	9.1%	▼ 0.6%

Survey participants were asked, "What do you see as your #1 growth opportunity in 2025 for your home health/hospice line of business?"



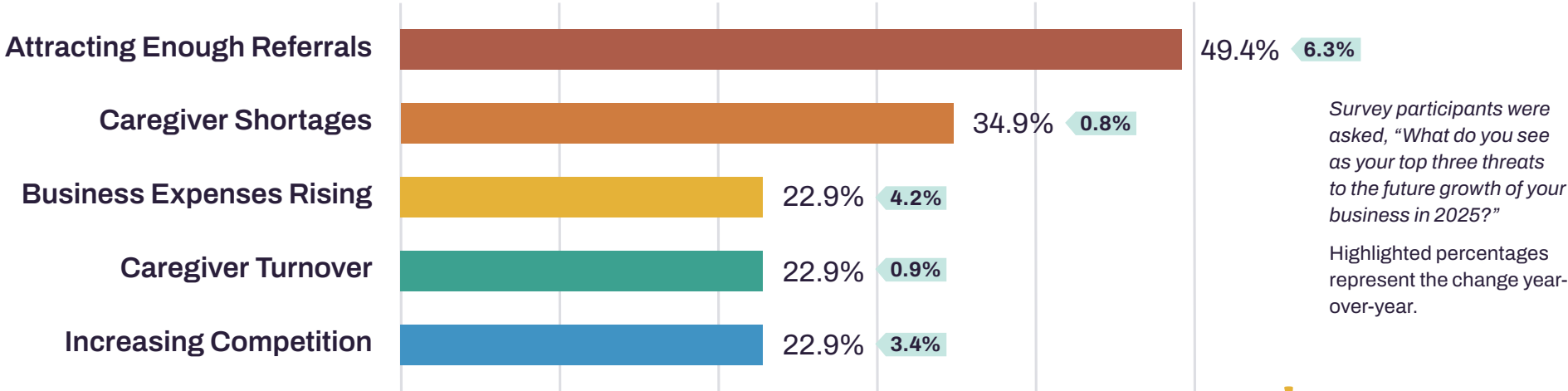
TOP THREATS

2.12 Home Care Top 5 Threats Facing Home Care Providers in 2025



TOP THREATS

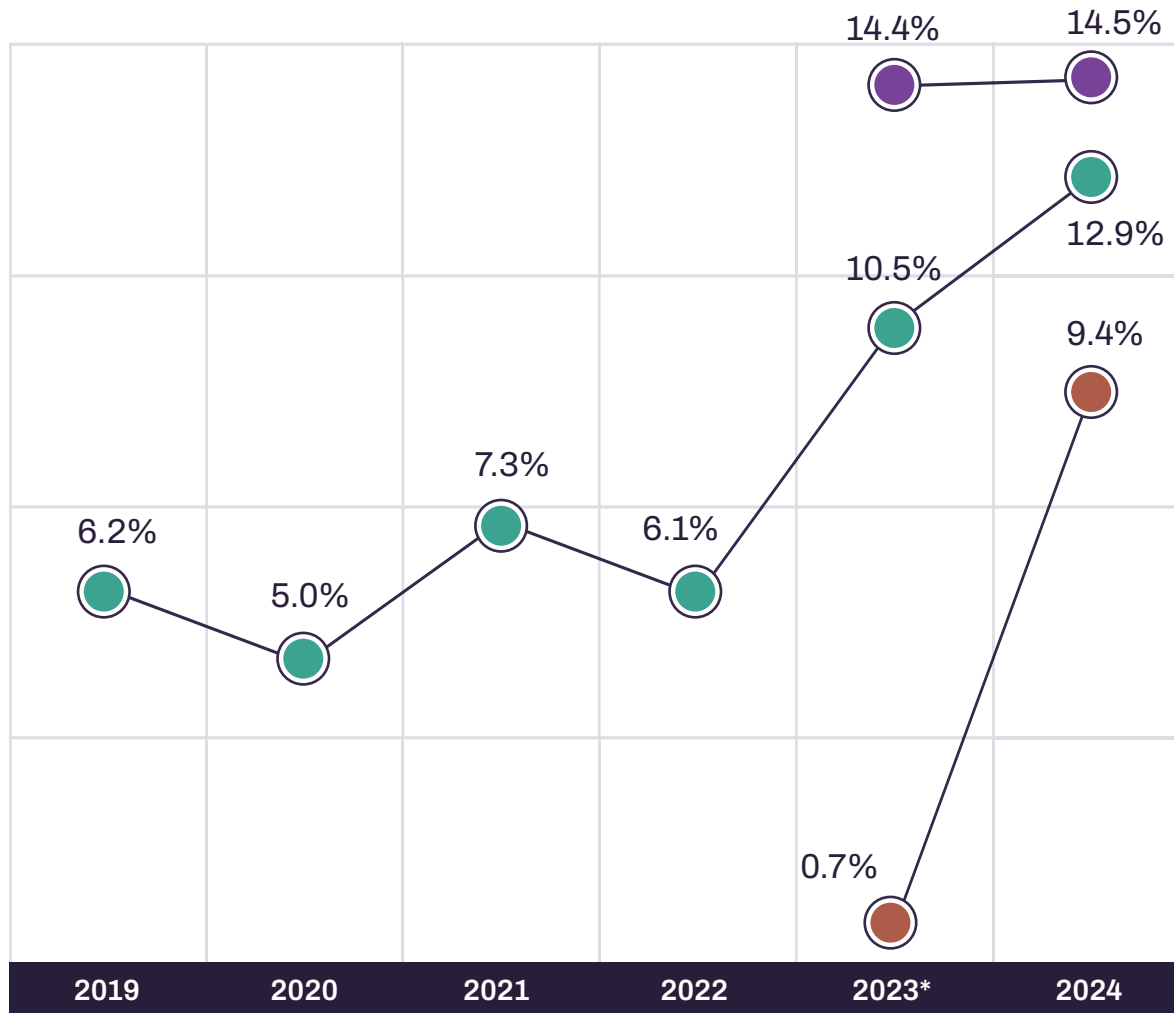
2.13 Home Health Hospice Top 5 Threats Facing Home Health & Hospice Providers in 2025





CLIENT GROWTH RATES

2.14 Overall Historical Median Client Growth Rates



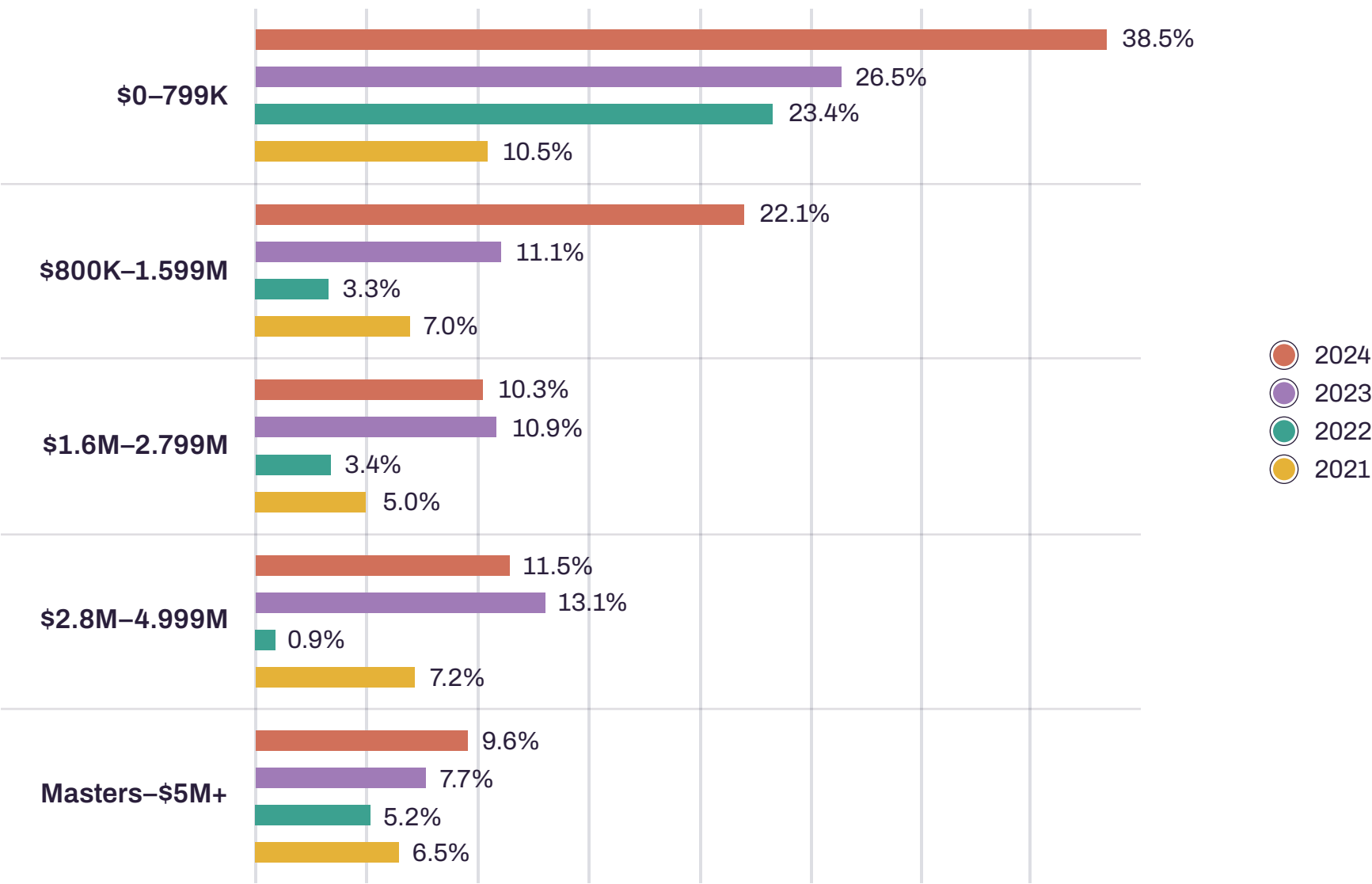
Client Growth Rates are median growth rates from December 31, 2023 to December 31, 2024. It is important to understand that the smaller the agency, the easier it is to increase the percentage of client or patient growth. For example, if an agency has 20 clients or patients and grows to 30 in a year, they have achieved a 50% client growth rate. However, if an agency has 200 clients or patients and grows to 210 clients or patients (*adding the same number of clients or patients as the smaller agency*) their growth rate is just 5%.

- Home Care
- Home Health
- Hospice

**Historical data was not collected until 2023 for Home Health and Hospice.*

CLIENT GROWTH RATES

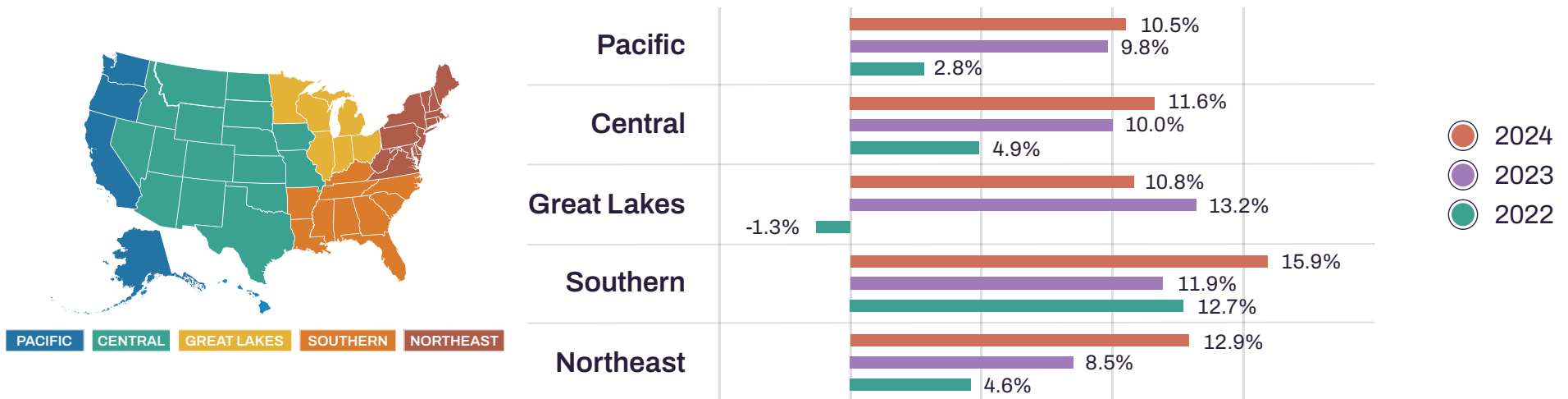
2.15 **Home Care** Historical Client Growth Rates - Revenue Ranges





CLIENT GROWTH RATES

2.16 Home Care Historical Client Growth Rates - Geographic Region



CLIENT ACQUISITION COSTS

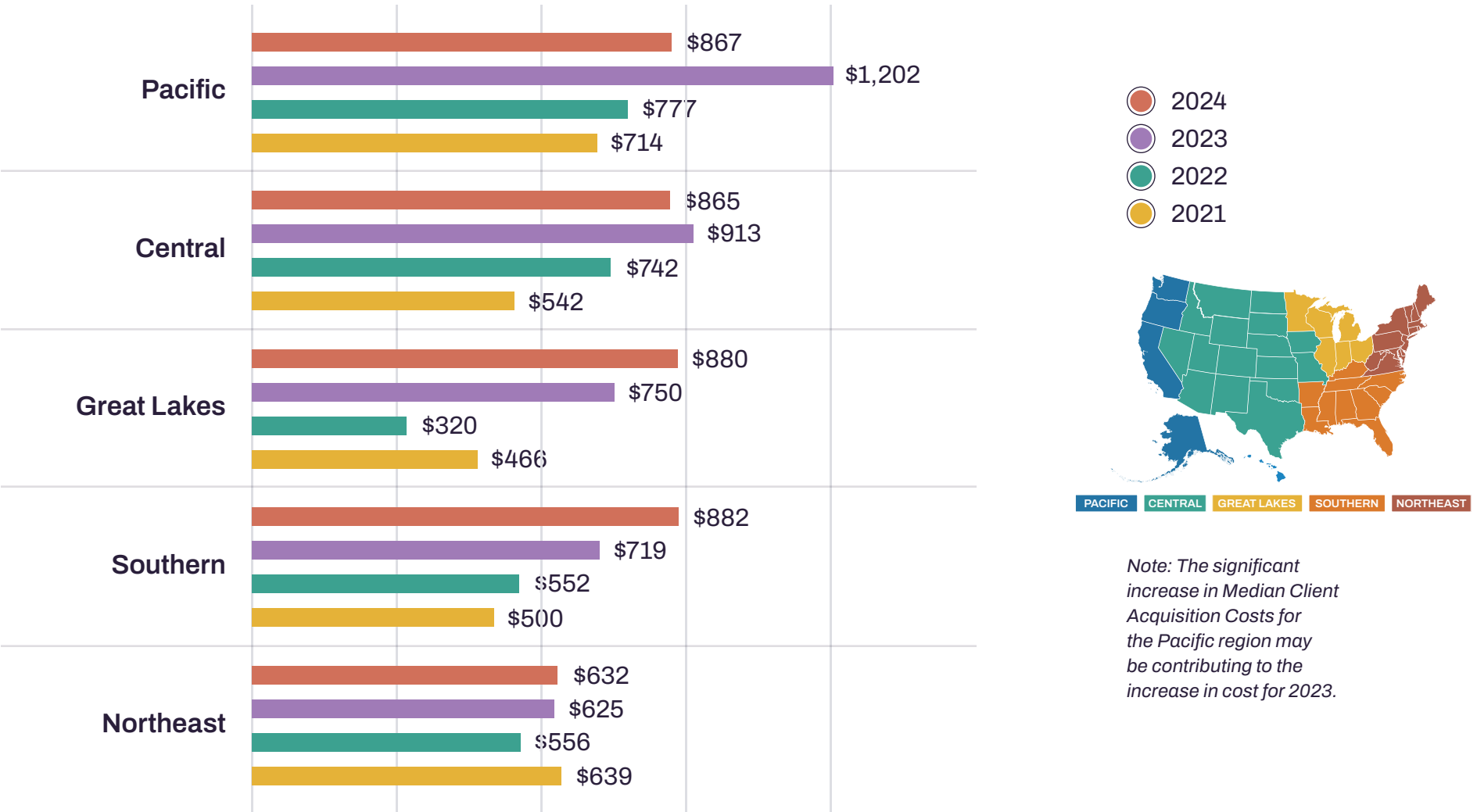
Median Client Acquisition Costs displays the cost of acquiring new clients in 2024. To calculate your client acquisition costs, add up your total sales and marketing expenses (including salaries and commissions associated with sales and marketing). Then, divide this total dollar amount by the number of new clients (admissions) you began servicing the same year. When considering different sales and marketing strategies, it is important to consider the impact these strategies will have on your average acquisition costs compared to this benchmark.

2.17 Home Care Historical Median Client Acquisition Costs



CLIENT ACQUISITION COSTS

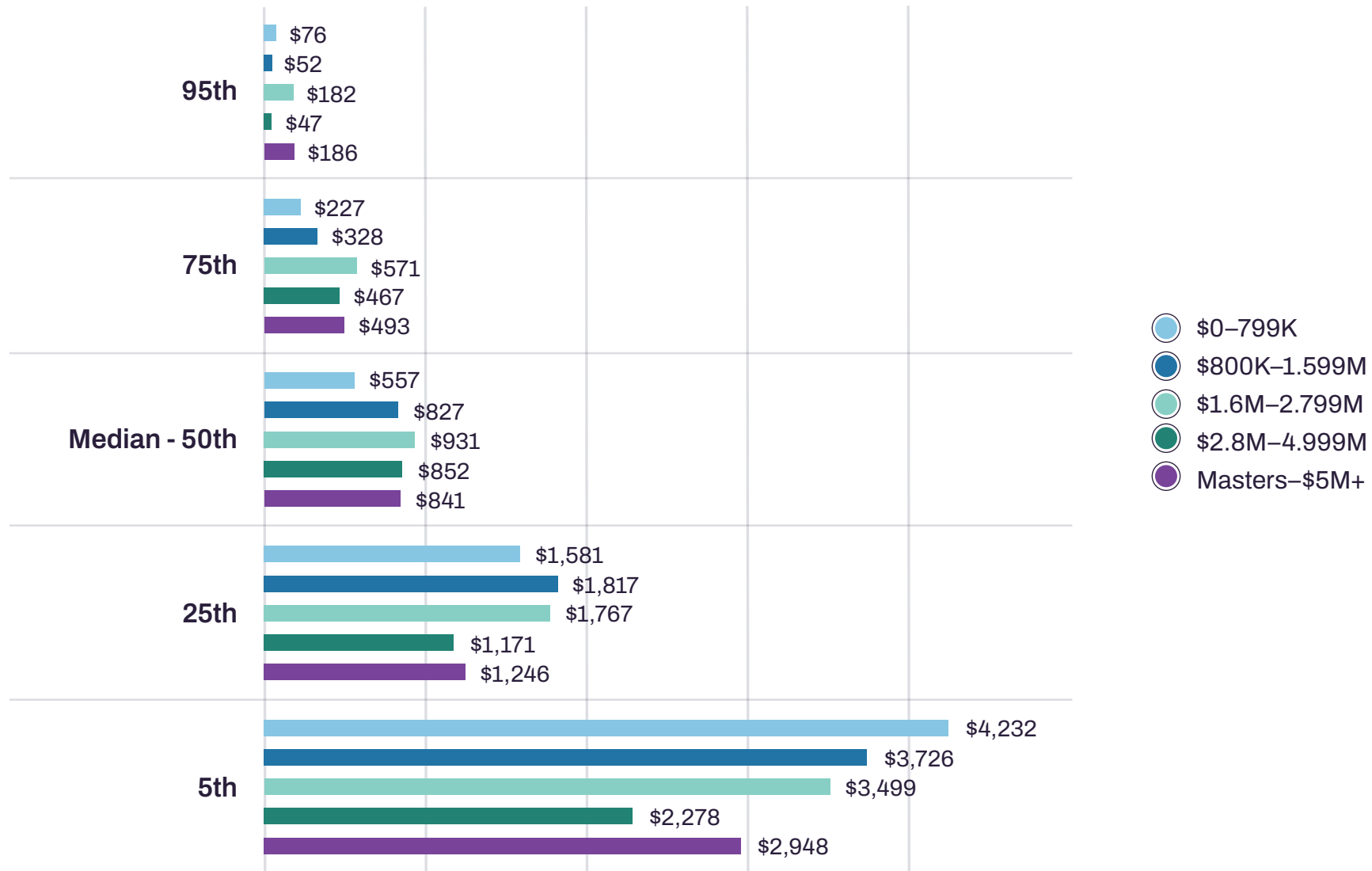
2.18 **Home Care** Historical Median Client Acquisition Costs - Geographic Region





CLIENT ACQUISITION COSTS

2.19 Home Care Client Acquisition Costs for 2024 - Revenue Ranges



ARTICLE

Breaking Down Silos: Elevating Home Care's Role in the Care Continuum



Melanie Stover,
OT, MBA, MS/ISM

Founder/Owner
Home Care Sales

HomeCareSales
•Driving Sales. Delivering Results. •

As we approach the changes in home health GG items, the integration of home care, home health, and hospice services has never been more critical. Yet despite universal agreement on the importance of continuity of care, most agencies remain functionally siloed—limiting patient outcomes and organizational growth. The solution, then, doesn't lie in more meetings about collaboration, but in a fundamental shift in how home care positions itself with Medicare partners.

The Status Frame Challenge

The core challenge isn't awareness—it's status. Home care agencies are often viewed as an afterthought, rather than a true care partner, by Medicare-certified organizations. This perception limits not just referrals, but also the quality of patient care across the continuum.

The transformation requires what we at Home Care Sales call a “radical status frame elevation,” a strategic repositioning that must start with leadership and extend through sales and marketing to operations.

The Power of Cross-Continuum Knowledge

Consider this scenario: As an occupational therapist in home health, I never once referred a patient to a home care agency. I would have told you I was a “good” therapist—yet I lacked the knowledge of when, and how, to leverage home care services to benefit my patients. I am not alone—this experience isn't unique; it represents a systemic gap in cross-continuum understanding that affects patient care daily.



“As the healthcare landscape evolves, home care agencies have a unique opportunity to position themselves as **essential partners in achieving quality outcomes.**”

The Total Patient Care Delivery Model: A Solution in Action

To bridge this gap, we've developed the *Total Patient Care Delivery Model*, which emphasizes comprehensive understanding across all service lines. This approach has consistently generated 20%+ increases in Medicare partner referrals. Here's why it works:

A recent case study from the Midwest illustrates the model's effectiveness. A home care agency had a long-standing but unproductive partnership with a home health organization. By equipping their sales representative with a working knowledge of home health's payment systems and priorities, they “moved” the relationship. Within two weeks of delivering a targeted presentation to home health clinicians, the agency received ten new referrals—all for patients who genuinely needed home care services as identified by the clinical team. Breaking down the silos between home health and home care helped both agencies, and most importantly, the patients/clients and families they serve.

Preparing for 2025: Home Care's Critical Role

As the healthcare landscape evolves, home care agencies have a unique opportunity to position themselves as essential partners in achieving quality outcomes. Success requires:

1. Leadership's commitment to elevating the agency's community status.
2. Sales and marketing teams equipped with cross-continuum expertise.

3. Operational alignment to support enhanced partnerships, including gathering data that positions the home care agency as an augmentation to supporting outcomes for Medicare-Certified Home Health.
4. Clear communication of value proposition in terms that resonate with Medicare partners.

Moving Beyond Silos

The presence of multiple service lines within an organization doesn't guarantee integration. Even agencies offering home care, home health, and hospice often operate in isolation, missing opportunities for collaboration that could benefit patients and providers alike. The solution isn't just structural—it's cultural and strategic.

The Path Forward

Success in breaking down silos between home health, hospice, and home care requires more than good intentions. It demands a systematic approach to status elevation, backed by comprehensive training and operational support. By empowering sales and marketing teams with deep knowledge across the care continuum, agencies can position themselves as true care partners rather than ancillary services.

It also takes focus. The results speak for themselves: increased referrals, improved patient outcomes, and stronger partnerships across the care continuum. As we move toward the future, the agencies that thrive will be those that successfully elevate their status and demonstrate their value as essential partners in the healthcare ecosystem. 

ABOUT THE AUTHOR

Melanie Stover, OT, MBA, MS/ISM, is the founder and owner of [Home Care Sales, LLC](#). Since founding Home Care Sales in 2001, Melanie has dedicated herself to ensuring patients receive the care they deserve by helping agencies build high-performing sales teams and sustainable referral streams. Her innovative Total Patient Care Delivery Model™ bridges the gaps between Home Health, Palliative, Hospice, and In-Home Care services, creating seamless care transitions that elevate patient outcomes.

Drawing from her hands-on experience in clinical care and business development, Melanie developed the High-Performance Sales Academy™, RoadMap to Referrals™, and Agency Ambassador™ programs, which have helped countless agencies achieve consistent growth through education-based marketing and strategic sales approaches. Her RepMastery framework has become the industry standard for results-driven sales coaching and management.

Melanie can be reached at Melanie@HomeCareSales.com or 888.451.1747.

Tips to Hiring the Ultimate Business Development Professional



Steve “The Hurricane” Weiss

President/CEO
Home Care Evolution



As per the Benchmarking Report, the number one way to grow your business is to strengthen relationships with referral sources. Since the pandemic, many companies have gotten away from this in the last five years. However, now everyone is looking to reengage with referral sources to generate professional inquiries! Here’s what we need to do when it comes to hiring a business development person to accomplish this goal.

1. Stop Hiring Marketers, Hire a Business Development Professional

Marketing is a very broad term. Many people include internet marketing, managing social media, website, Search Engine Optimization (SEO), email drip campaigns, even setting up artificial intelligence and

automation, as marketing. While these are all effective, and necessary, types of marketing... when it comes to developing relationships with referral sources, an external position is required for someone to spend 30 to 40 hours a week on the road outside of the office, not behind the desk on a computer.

When people hire marketing representatives, they’re getting people who are trained to do all of the online types of marketing, as opposed to direct, in-person referral relationship building. This is why we need to make sure that when we go to hire a professional, we put the correct title in the job description. Here are some suggestions: Business Development Coordinator or Specialist, Community Relations Coordinator, or Director of Business Development. Whatever title you settle on, just make sure to stop using the term marketing rep and start using the term business development.



Bonus Tip: Hire someone who has business development experience, but perhaps from another industry outside of healthcare. Try to find someone who was a decorated “champion” in their field, but their industry has gone away because of advancements in technology or how things are done nowadays. I have found great success in salespeople who have sold magazine or newspaper subscriptions, circular advertising, and door-to-door sales. These individuals have a high tolerance for rejection and are often a “former champion.” They know what it takes to be successful, and in turn, just need someone to give them a shot in a new industry.



2. Hire Someone Who is Teachable, Coachable, and Trainable

In today’s society, there are far too many people who think very highly of themselves where they feel that they know everything and are unwilling to accept training of any sort. In my profession as a coach and a consultant, I can tell you that about 25% of the people I’ve worked with in the last couple of years refuse training or taking accountability because they “know what they are doing”—yet they are unable to get results on their own. This is a trait you have to check for in the interview process. No matter what program you are engaged with, or which accountability measures you use, never hire someone who cannot be taught!

Make sure that you can coach them. Think about it from the perspective of every success story. Every sports team has a coach; and every championship team would not be a championship team if it wasn’t for that coach. When you hire someone who’s a business development professional, you as the owner of the company will be coaching this person and holding them accountable to growing your business. If they resist coaching from you, how can they help you reach your goals? (They won’t!)

Last comes the training. Think about the nature of your business where you have care staff, nurses, LPNs, etc. To maintain their licenses to practice medicine and care for the elderly, each role has to continually be trained and educated.

The same thing goes for our Business Development Professionals. The industry changes often and quickly these days, and there are always new ways of doing things. When we hire someone who is unable to be trained because they refuse, what does it say about that person? What does it say about your company? Remember, this person is representing you and your company when networking with referral sources—you need them to make a good impression on your behalf. In the end, make sure that when you hire someone, they are teachable, coachable, and trainable. A teachable, coachable, and trainable business development professional will enter your business with the right attitude and the right mindset so you can work with them as you grow your organization, together.

Bonus Tip: When interviewing a candidate for your company’s business development professional role, ask them questions like:

- What type of formal training have you had, and how was that experience?
- What have you done to continue developing your skills?
- What books have you read or are you reading to develop your skills?
- Do you consider yourself a competitive person?

These types of questions help you determine if someone is teachable, coachable, and trainable.

“A teachable, coachable, and trainable business development professional will enter your business with **the right attitude and the right mindset** so you can work with them as you grow your organization, together.”



“Every time I advised my client (the business owner) to **increase the compensation of a producing representative** and they didn’t, the rep went elsewhere for 25-50% more money!”

3. Understand That Top Producers Are Worth the Compensation

If you really want to develop referral sources, you’re going to have to open your wallet. This is going to be someone who will be working with you for a long period of time, putting in many hours developing relationships with referral sources who lead to professional inquiries. This is not a basic entry-level position. This is not a position where you can pay someone \$40,000 base, plus a high commission incentive. This is not a position where you can pay commission only, as it takes months to generate leads, and then convert them into paying customers.

The benchmark shows that the national average salary right now for professionals like these is \$65,000, give or take \$10,000–\$30,000, depending on the market you’re in.

For example, I have clients in higher income areas where compensation is at \$90,000 base salary with commission. Those business development professionals earn over a hundred thousand dollars in income with diligent work and results. That’s why you always need to put perspective into what you’re asking an employee to do. In this case, you’re asking them to:

- Spend 30 to 40 hours a week on the road
- Represent your company in a manner that leads to professional inquiries about your company’s services
- Build a trusting relationship with referral sources
- Essentially be a walking, talking billboard for your company

To be done properly, it will not come cheap. But the juice is worth the squeeze. Hire the right person, compensate them accordingly so they are happy, and watch your business grow. (Many of my top producers are bringing in \$2M+ in new business annually.)

Bonus Tip: Here’s the reality. When you hire the right person, but you underpay them, they always end up getting poached by another company who is willing to pay them more. In my last 12 years as a consultant, every time I advised my client (the business owner) to increase the compensation of a producing representative and they didn’t, the rep went elsewhere for 25–50% more money! You can start off small for a temporary probation period (like 90 days) to make sure you have the right person and then increase their compensation to a more competitive salary if they’re the right fit—just make sure you give them that increase when they are due.

In reading all this, when you’re ready to hire a business development professional, know what you’re doing. Find the Business Development Professional who is trainable, coachable, and teachable; and pay them accordingly. Hold them accountable for results, and work with them to produce those.

If you want help in hiring, training, coaching, and mentoring your representative, contact us at info@homecareevolution.com. We have interview packages, compensation plans, “ignite” courses, and ongoing guidance that has helped our clients grow by billions in revenue since 2012. Give your reps support, and watch your business grow! 📈

ABOUT THE AUTHOR

Steve “The Hurricane” Weiss is a dynamic and entertaining public speaker, known for his expert knowledge in all things sales and marketing. From a young age, Steve has been driven to succeed and excelled across vastly different industries. Steve founded [Hurricane Marketing Enterprises](#) in 2012 with a goal to help other business owners around the globe.

Steve’s passion is to lead business owners on the path to find people in need of their services and convert these prospects into clients. His company’s mission statement is to help business owners increase their census, revenue, and profits. With his dedication and hard work, Steve has developed a foolproof program that enables start-up companies to quickly get ahead of the competition while helping existing businesses experience an explosive transformation.

In 2016, he co-founded and is currently the President of the Institute for Dignity and Grace with Nicole Peretti. Steve continues his mission of advocacy for the senior population by providing education and resources. His passion is always helping the senior population stay in their homes safely and age in place with dignity and grace.



SUMMARY

Recruitment & Retention

Staff turnover has been a long-standing challenge in the home-based care industry, making recruitment and retention top priorities for providers. The Recruitment & Retention section delves into the top staff acquisition and retention practices, assessing their effectiveness and identifying the turnover challenges most relevant to your region. It also evaluates what makes a competitive compensation, benefits, and training package for your area, providing valuable insights to help you develop a tailored strategy for enhancing the employee experience.

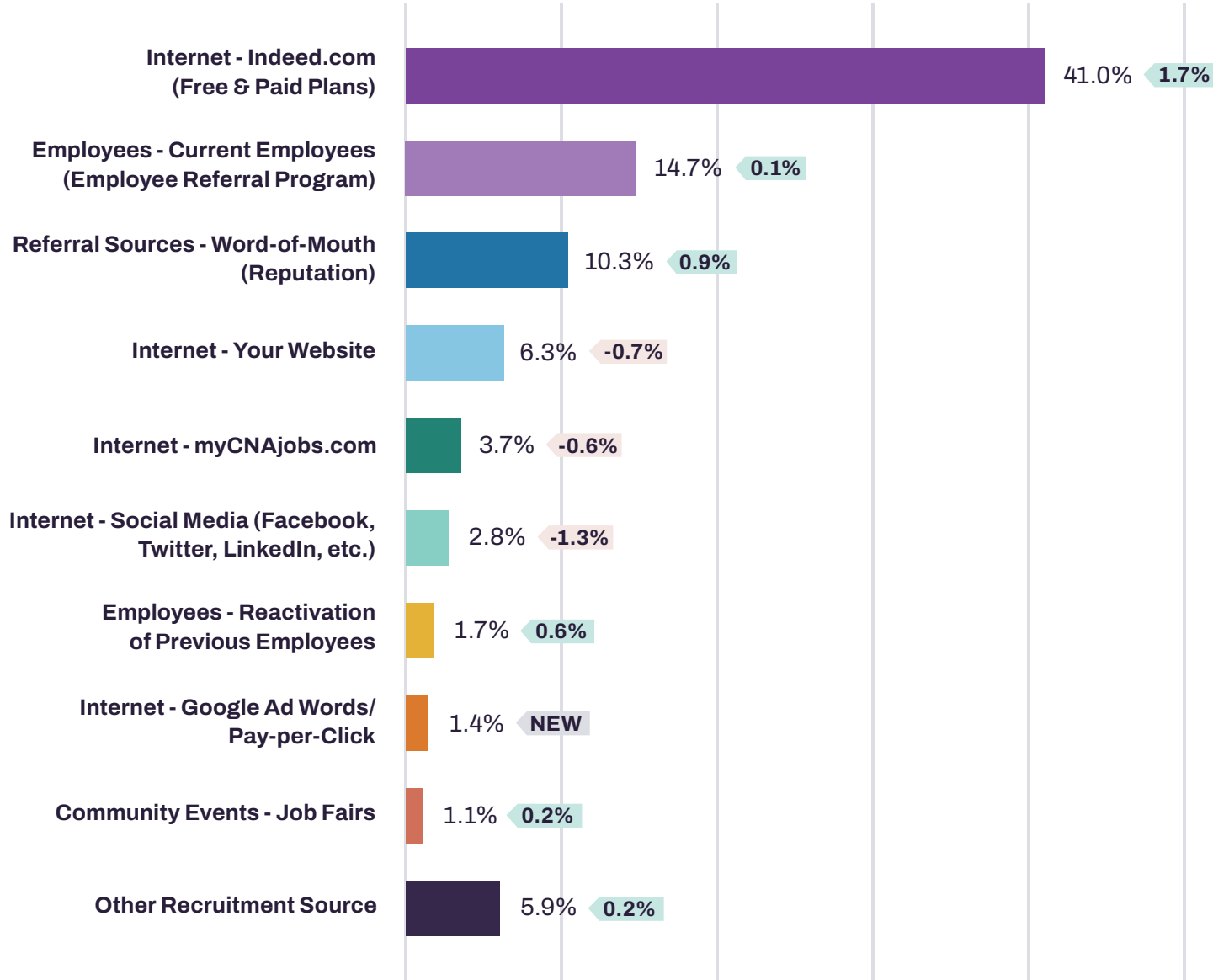
Section Contents

- | | | | |
|-----------|---|-----------------|---|
| 46 | Recruitment Sources | 82 | Clinician Benefits |
| 53 | Staffing Shortages | 83 | Professional Caregiver Benefits |
| 62 | Nurse Hiring Conversions | 84 | Number of Professional Caregivers Employed |
| 63 | Professional Caregiver Hiring Conversions | ARTICLES | |
| 65 | Professional Caregiver Turnover Rates | 86 | <i>The Onboarding Experience Report: Why Your Care Staff Are Really Leaving</i> |
| 71 | Revenue Per Professional Caregiver Employee | 89 | <i>The Loyal Healthcare Worker: Using the Role of Applicant Sentiment in Retaining Talent</i> |
| 74 | Care Staff Wages | | |
| 77 | Wages Comparison | | |



RECRUITMENT SOURCES

3.1 **Home Care** Top 10 Professional Caregiver Recruitment Sources/Methods for 2024



From a list provided, survey participants were asked to select their top two **most effective** professional caregiver recruitment sources and methods used in 2024.

Highlighted percentages represent the change year-over-year.

See **page 49** for a complete list of other recruitment sources/methods.



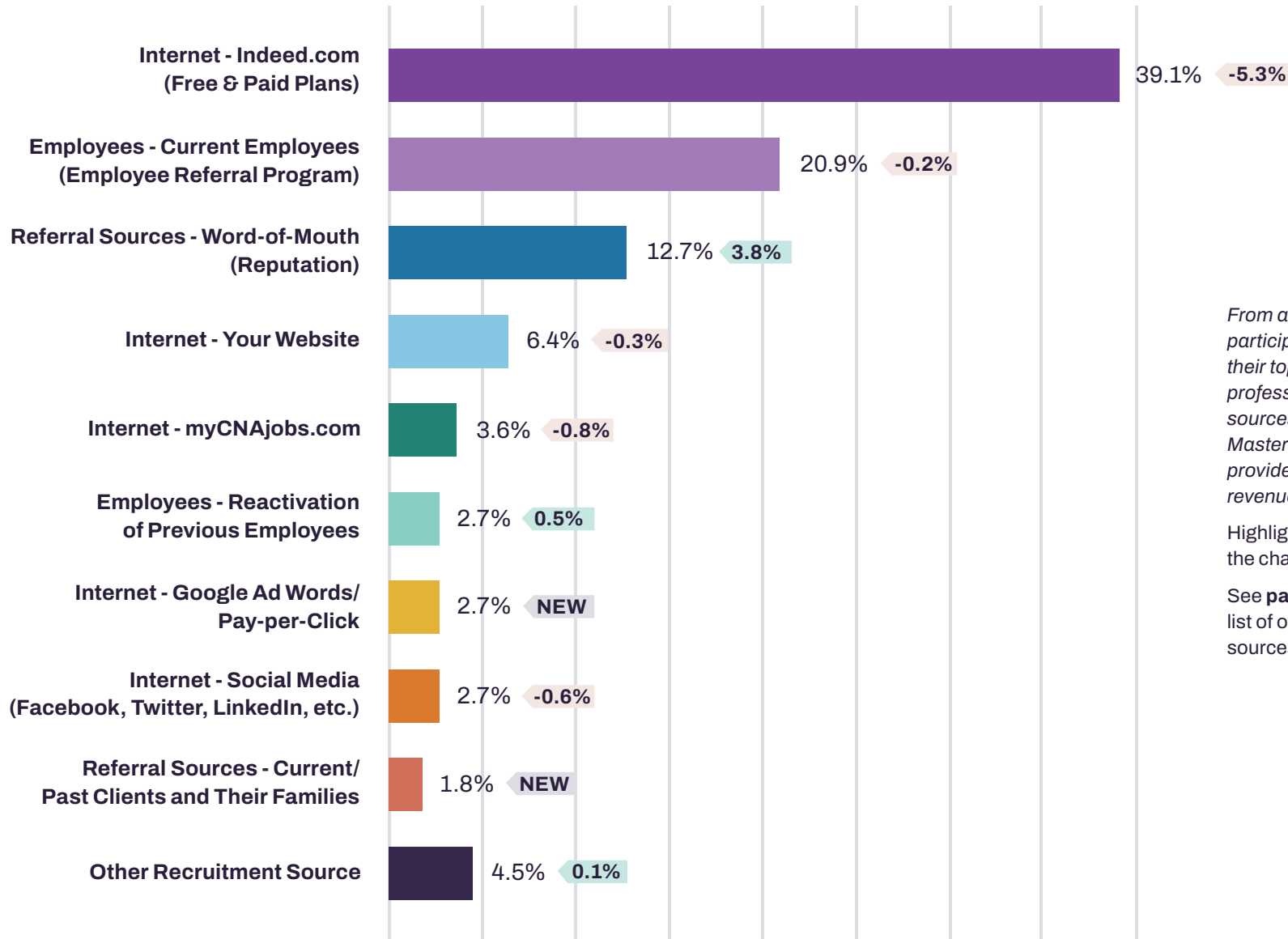
Attract Top Professional Caregivers

The best employees want to work for quality organizations. Use client and employee testimonials, satisfaction scores, awards and recognitions, and other resources to attract top employees to work for you. Learn more on **page 194**.



RECRUITMENT SOURCES

3.2 Home Care Top 10 Professional Caregiver Recruitment Sources/Methods for 2024 - Masters



From a list provided, survey participants were asked to select their top two **most effective** professional caregiver recruitment sources and methods used in 2024. Masters represent those home care providers who billed \$5M+ in annual revenue in 2024.

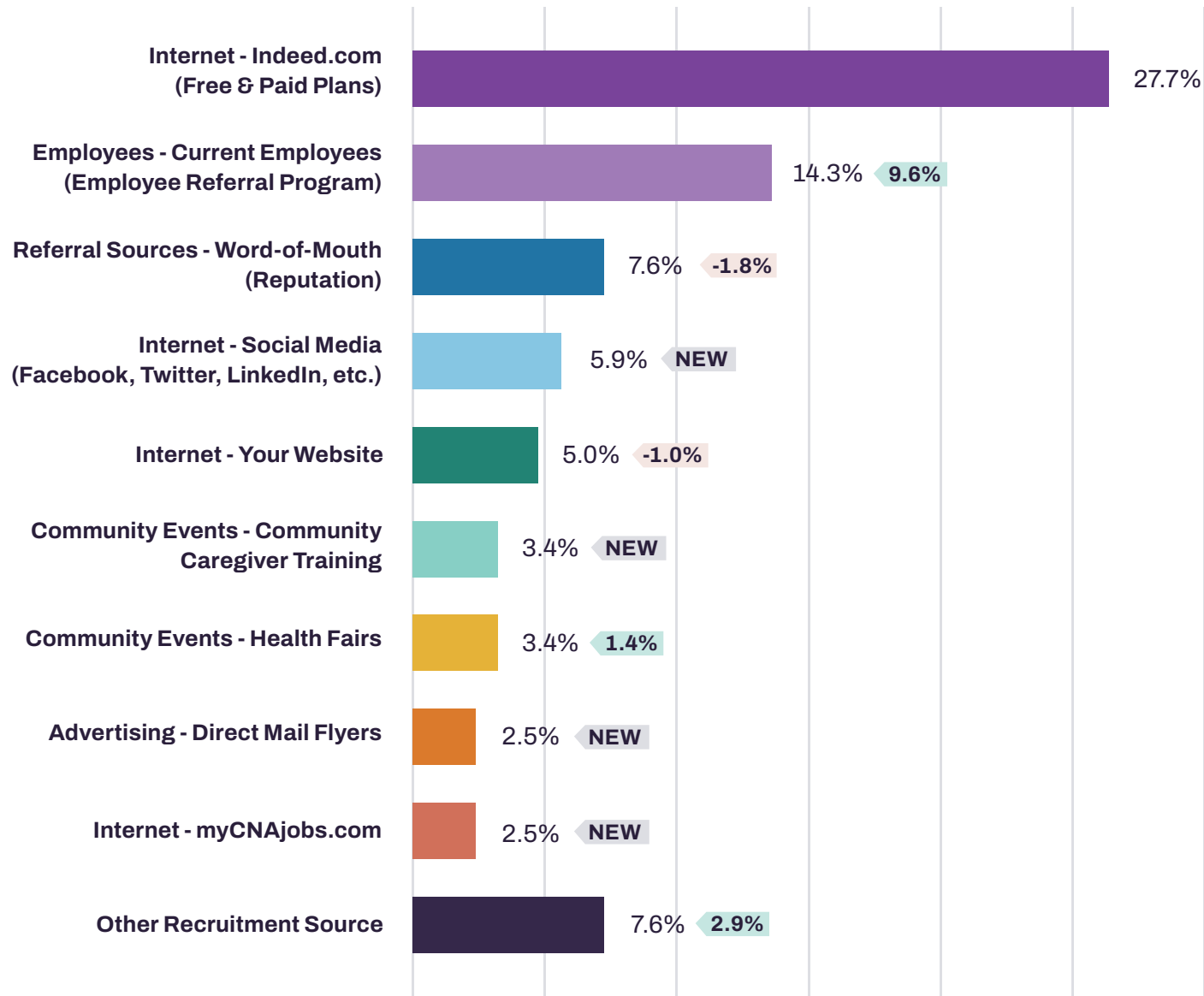
Highlighted percentages represent the change year-over-year.

See **page 49** for a complete list of other recruitment sources/methods.



RECRUITMENT SOURCES

3.3 **Home Health** **Hospice** Top 10 Care Professional Recruitment Sources/Methods for 2024



From a list provided, survey participants were asked to select their top two **most effective** recruitment sources and methods used to hire care professionals in 2024.

See **page 49** for a complete list of other recruitment sources/methods.



Attract Top Professional Caregivers and Clinicians

The best employees want to work for quality organizations. Use client and employee testimonials, satisfaction scores, awards and recognitions, and other resources to attract top employees to work for you. Learn more on **page 194**.



RECRUITMENT SOURCES

Recruitment Sources/Methods

This list is a compilation of the other great professional caregiver recruitment sources that providers have indicated they use. It can be a great resource if you're looking for other ideas of where you might try and recruit additional professional caregivers. **Options submitted under "Other" for 2024 are highlighted in red.**

ADVERTISING

- Church or Faith-Based Newspaper
- **Corporate Generated Leads**
- Corporate TV Ads
- College Job Boards
- **Country Wide Television Advertising by Franchise Home Office**
- Daily Newspaper Classified Ads
- Direct Mail Flyers
- Direct Mail Post Cards
- Ethnic/Foreign Newspapers
- Flyers - Leave at local businesses/Bus stops
- Geofencing (mobile ads)
- **Google Ads**
- Library Job Boards
- Newspaper - The Royal Gazette
- Outdoor (billboards, benches, signs, etc.)
- Penny Saver/Thrifty Nickel (or other free local paper)
- Radio - Christian or Faith-Based Stations
- Radio - Music Stations
- Radio - Talk Stations
- Regional Newspapers
- Senior Directory Ads
- Signs or Banners on Your Building

- Television - Cable/Satellite Stations
- Television - Primary Network Stations (ABC, NBC, CBS, FOX)
- Television - Public Broadcasting Station (PBS)
- Texting Program
- Text Message Blast
- **Veritone (Pandologic)**
- **Visiting Angels Corporate Leads**
- Weekly Newspaper Classified Ads
- Yard Signs Placed at Intersections
- Yellow Pages - Online

COMMUNITY

- **Case Management Agencies**
- Chamber of Commerce
- **Church**
- Church Clergy and Administrators
- Community Articles, etc.
- Community Professional Caregiver Training
- Four-Year Universities
- Hair Dressers and Beauty Salons
- Health Fairs
- Internal Contacts
- Job Fairs
- Junior or Community Colleges
- Local Schools

- Own Personal Network
- Speaking Engagements
- Sponsorships (e.g. Alzheimer's Walk)
- Vocational, Technical, or Trade Schools
- WIN Job Center
- Work Force Services Local Office

EMPLOYEES

- Current Employees (Employee Referral Program)
- Current/Past Staff
- Employee Referrals
- Reactivation of Previously Employed Care Professionals
- **Other Caregivers**

INTERNET

- **Adzuna**
- Agency Website (Johns Hopkins Health System)
- A Place For Mom
- **Applai**
- BetterTeam
- BSL Site
- Care.com
- Career Builder
- **Career Hub**
- Careerguru.com

- **CareerPlug**
- CaregiverHR.com
- Caregiverlist.com
- CareinHomes.com
- **Carework US**
- Choice Local
- Company Blog
- **Craigslist.org Job Ads**
- Email Campaigns to Referral Sources
- Engyj/Saba SEO
- GenerationsUnite.com
- GetHired.com
- Glassdoor
- **Google**
- Google Ad Words/Pay-per-Click
- Handshake
- Healthcare Source/Vikus
- **Hireology**
- Hotjobs.com
- Indeed.com
- **JazzHR**
- Jobing.com
- Jobs.com
- Jobsinme.com
- Jobs-to-careers.com
- Jobtarget.com
- **Keep Safe Care Direct**
- LDS Employment Services



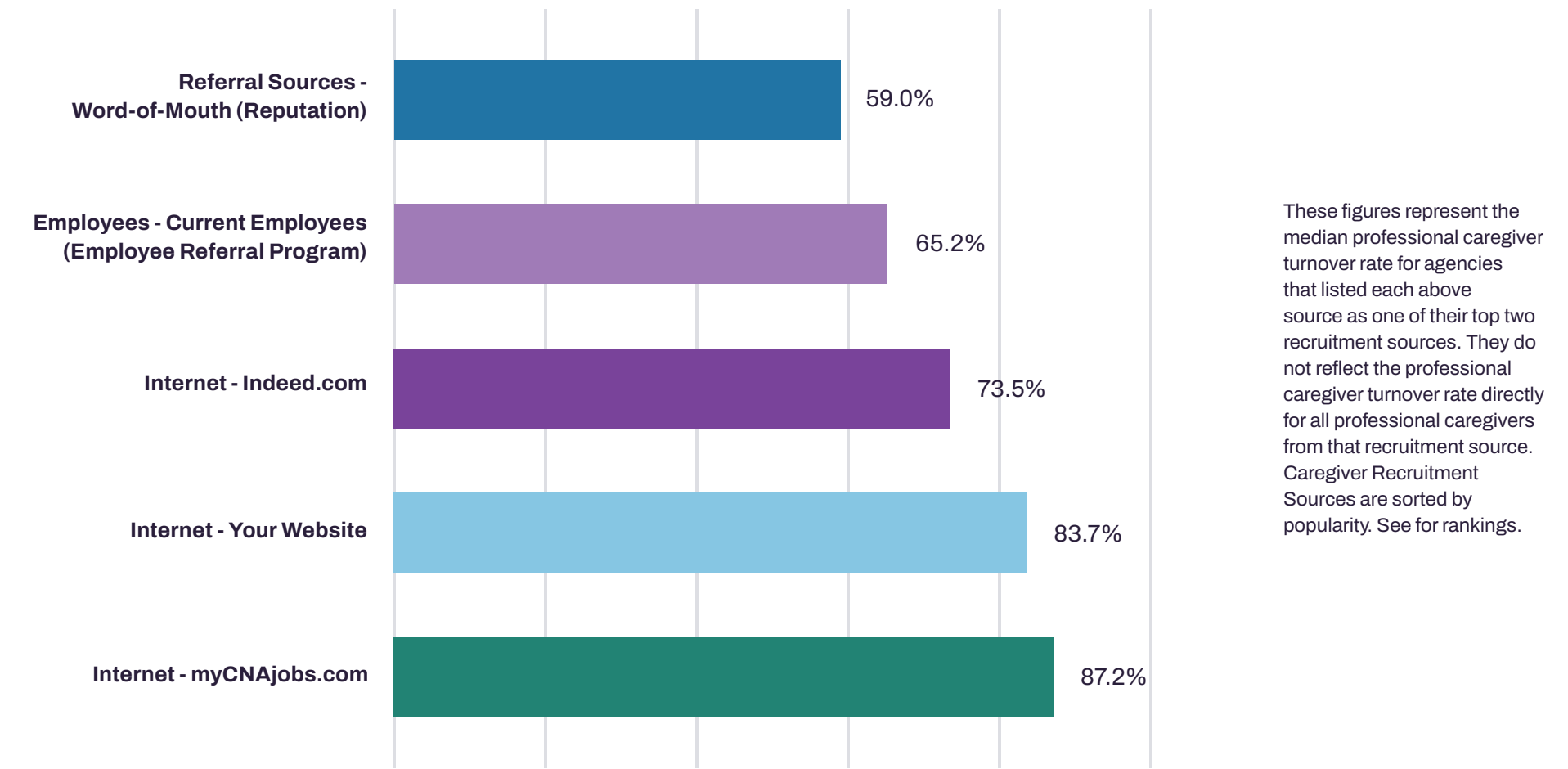
RECRUITMENT SOURCES

- Local Career Websites
 - Local TV Station Website Board
 - Monster.com
 - myCNAjobs.com
 - OnShift Platform
 - SEO
 - Snagajob.com
 - **Social Media (Facebook, Twitter, LinkedIn, etc.)**
 - Talroo
 - Werkberry
 - Workforce Services Website
 - Workstream
 - Yahoo! Jobs
 - Your Website
 - **ZipRecruiter**
- ### JOB BOARDS
- College Job Boards
 - Community Center Boards
 - Grocery Store Job Boards
 - Library Job Boards
 - Workforce Services Job Board
- ### REFERRAL SOURCES
- AARP
 - American Red Cross
 - **Ask NuCare**
 - Assisted Living Facilities
 - **Augusta Care**
 - CNA or Home Health Aide Training Schools/Programs
- Current/Past Clients and Their Families
 - Current/Past Employees
 - Employment Agencies
 - Franchisor
 - Home Health Agencies (Medicare Certified)
 - Hospice Agencies
 - Hospitals
 - Independent Living Facilities
 - Other Franchise Offices
 - Recruitment Agency
 - Referral from Friends
 - Referral from Current Caregivers
 - Referral from Other Caregivers
 - Schools of Nursing
 - Senior Centers
 - Skilled Nursing Facilities
 - State Home Care Association
 - Trade or Technical Schools
 - Word-of-Mouth (Reputation)
 - Work Force Services Local Office
- ### OTHER
- **Activated Insights Recruit (Formerly Pre-Intent)**
 - AidQuest
 - Apploi
 - CHHA = Certified Home Health Aide Corporate Office
 - Full-Time Recruiter
- Job Target
 - Personal Visits to Patients in Facilities
 - Reactivation of Previously Employed Professional Caregivers
 - Walk-Ins



RECRUITMENT SOURCES

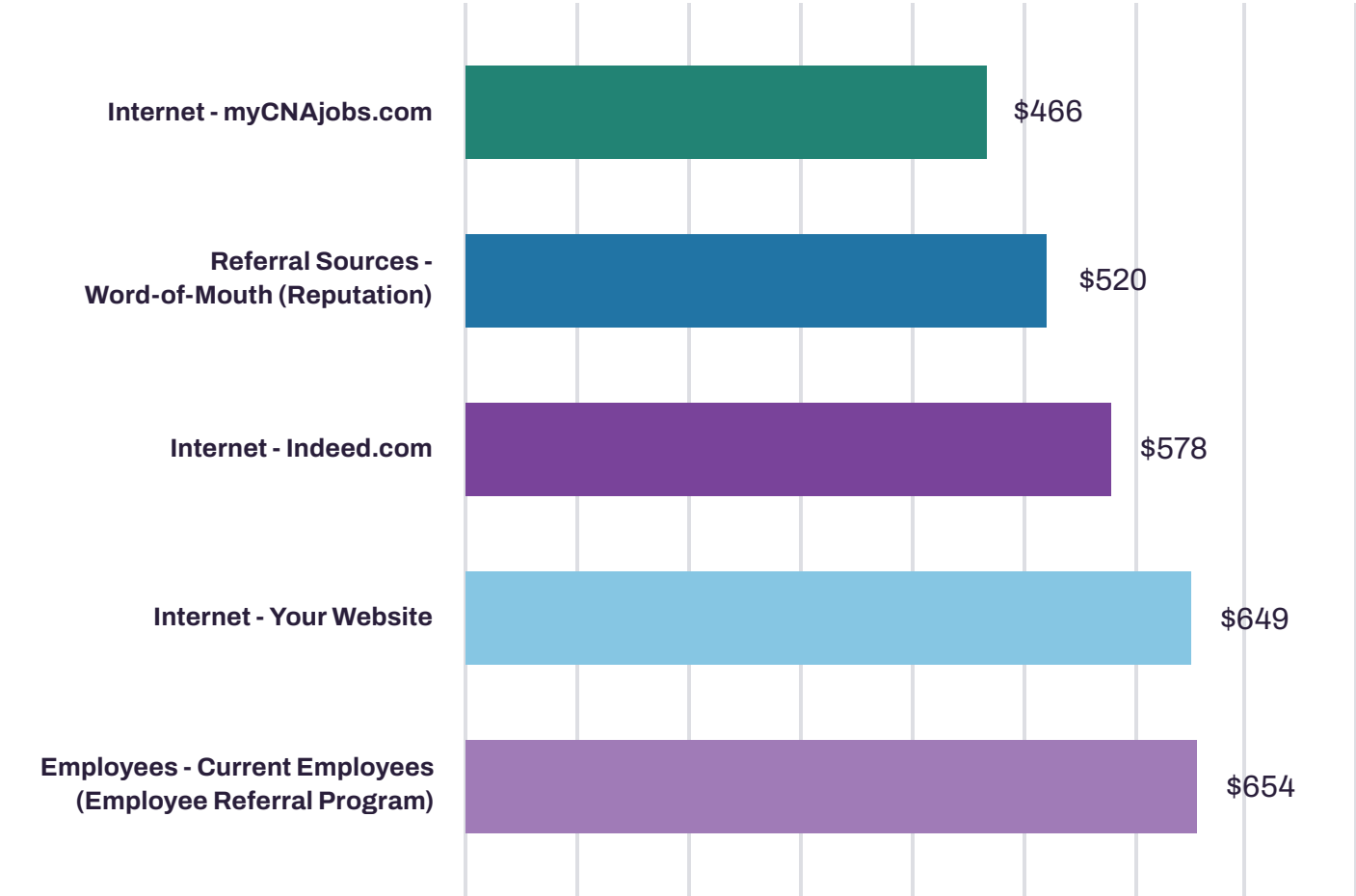
3.4 **Home Care** Top 5 Professional Caregiver Recruitment Sources for 2024 - Median Professional Caregiver Turnover





RECRUITMENT SOURCES

3.5 **Home Care** Top 5 Professional Caregiver Recruitment Sources for 2024 - Median Professional Caregiver Acquisition Cost



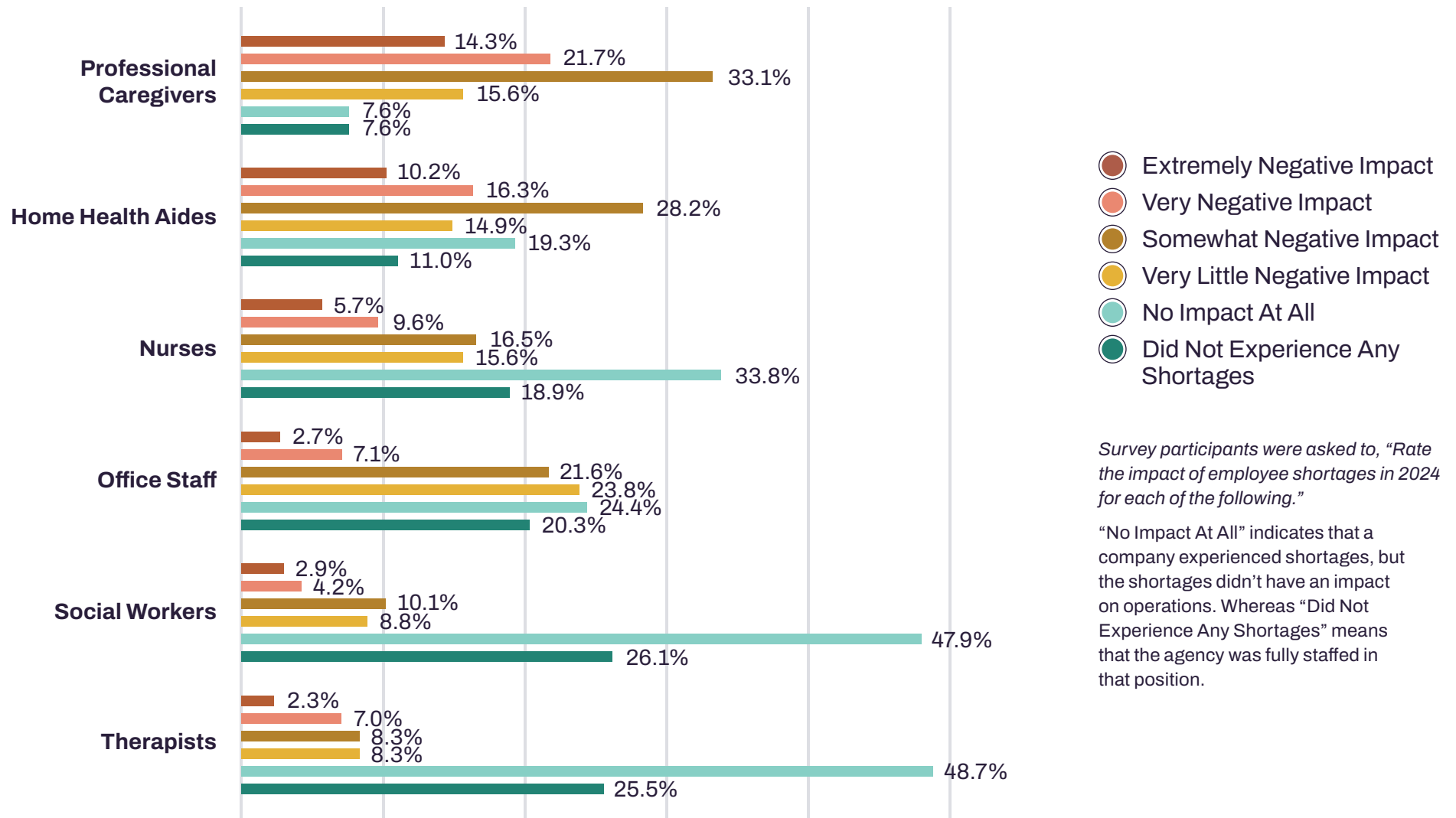
These figures represent the median professional caregiver acquisition cost for agencies that listed each above source as one of their top two recruitment sources. They do not reflect the professional caregiver acquisition cost directly for all professional caregivers from that recruitment source. Caregiver Recruitment Sources are sorted by popularity. See **page 46** for rankings.

Values may appear different from last year's data due to a change in the calculation method.



STAFFING SHORTAGES

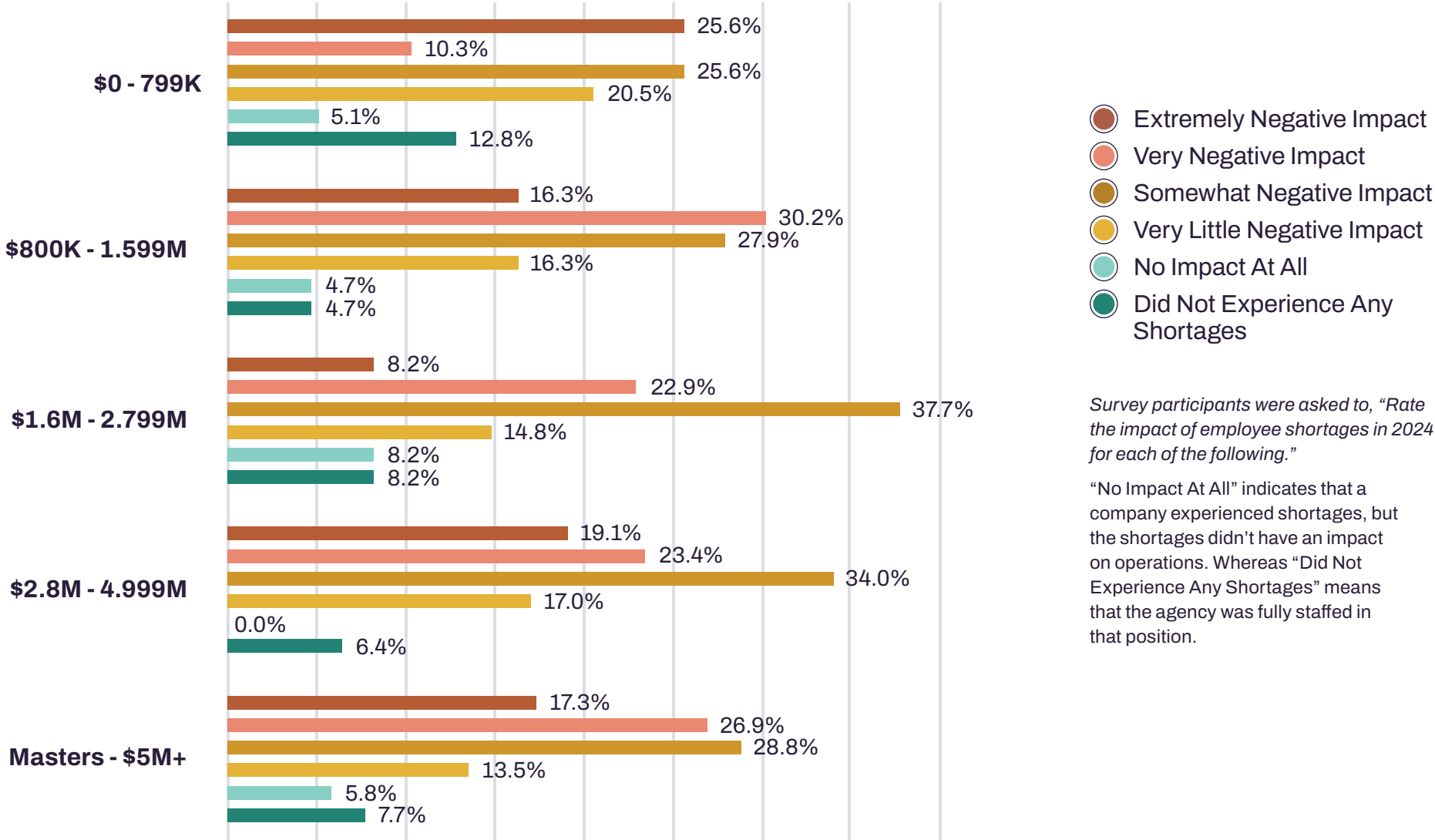
3.6 Overall Impact of Shortages by Role for 2024





STAFFING SHORTAGES

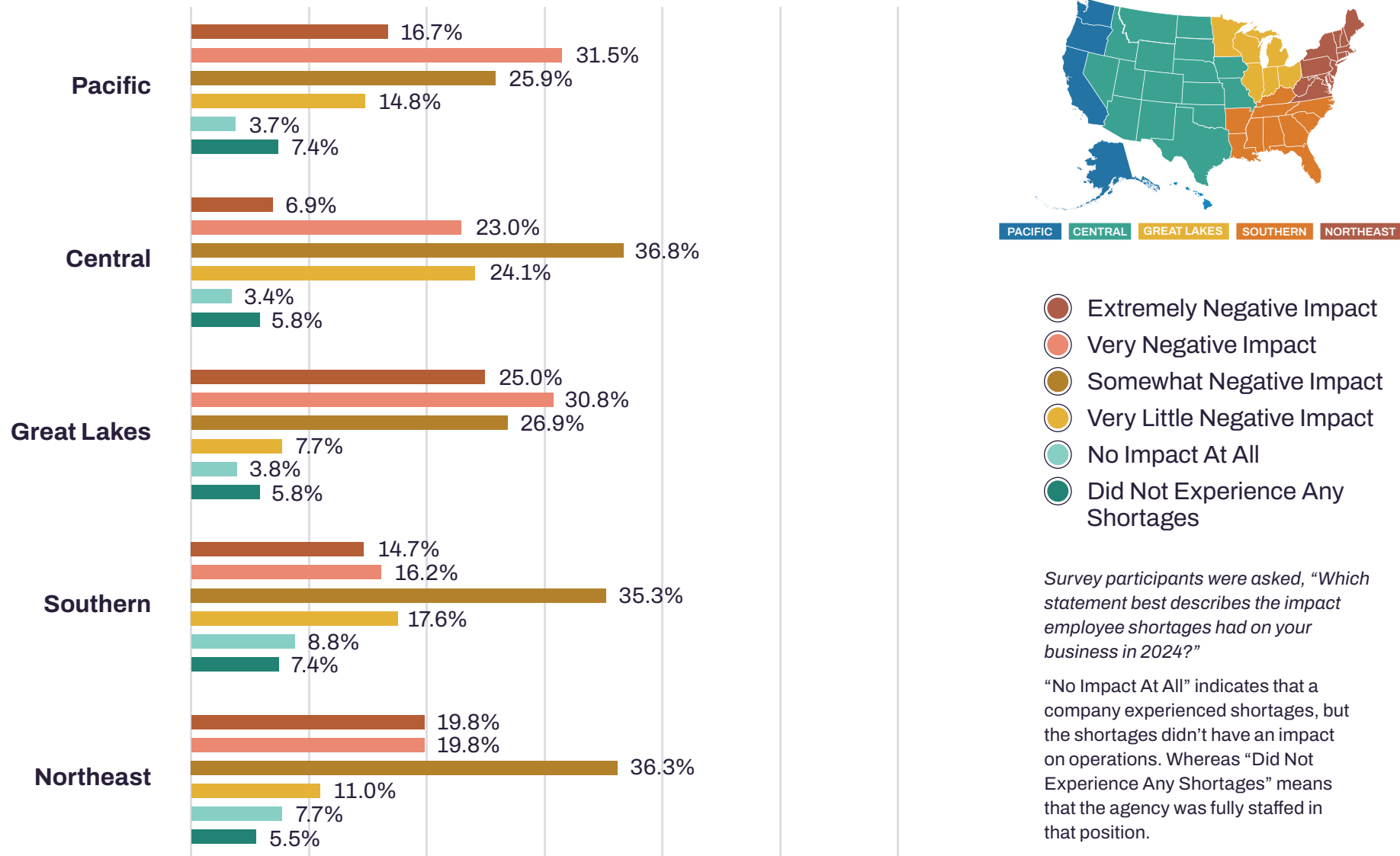
3.7 **Home Care** Impact of Professional Caregiver Shortages for 2024 - Revenue Range





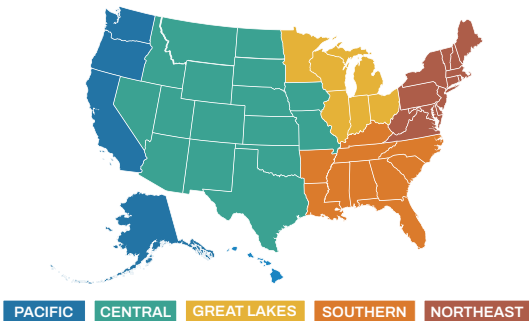
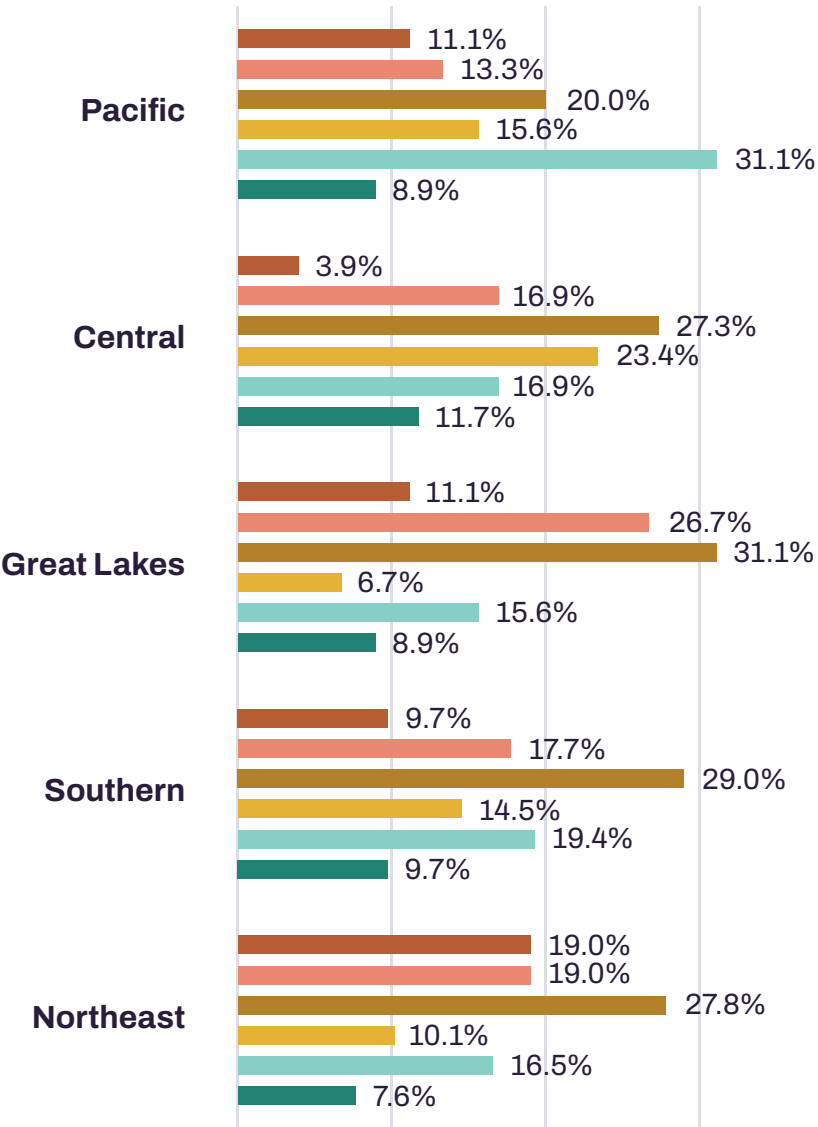
STAFFING SHORTAGES

3.8 Home Care Impact of Professional Caregiver Shortages for 2024 - Geographic Regions



STAFFING SHORTAGES

3.9 **Home Health** **Hospice** Impact of Home Health Aide Shortages for 2024 - Geographic Regions



- Extremely Negative Impact
- Very Negative Impact
- Somewhat Negative Impact
- Very Little Negative Impact
- No Impact At All
- Did Not Experience Any Shortages

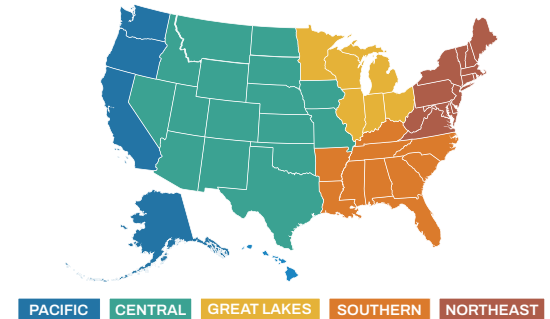
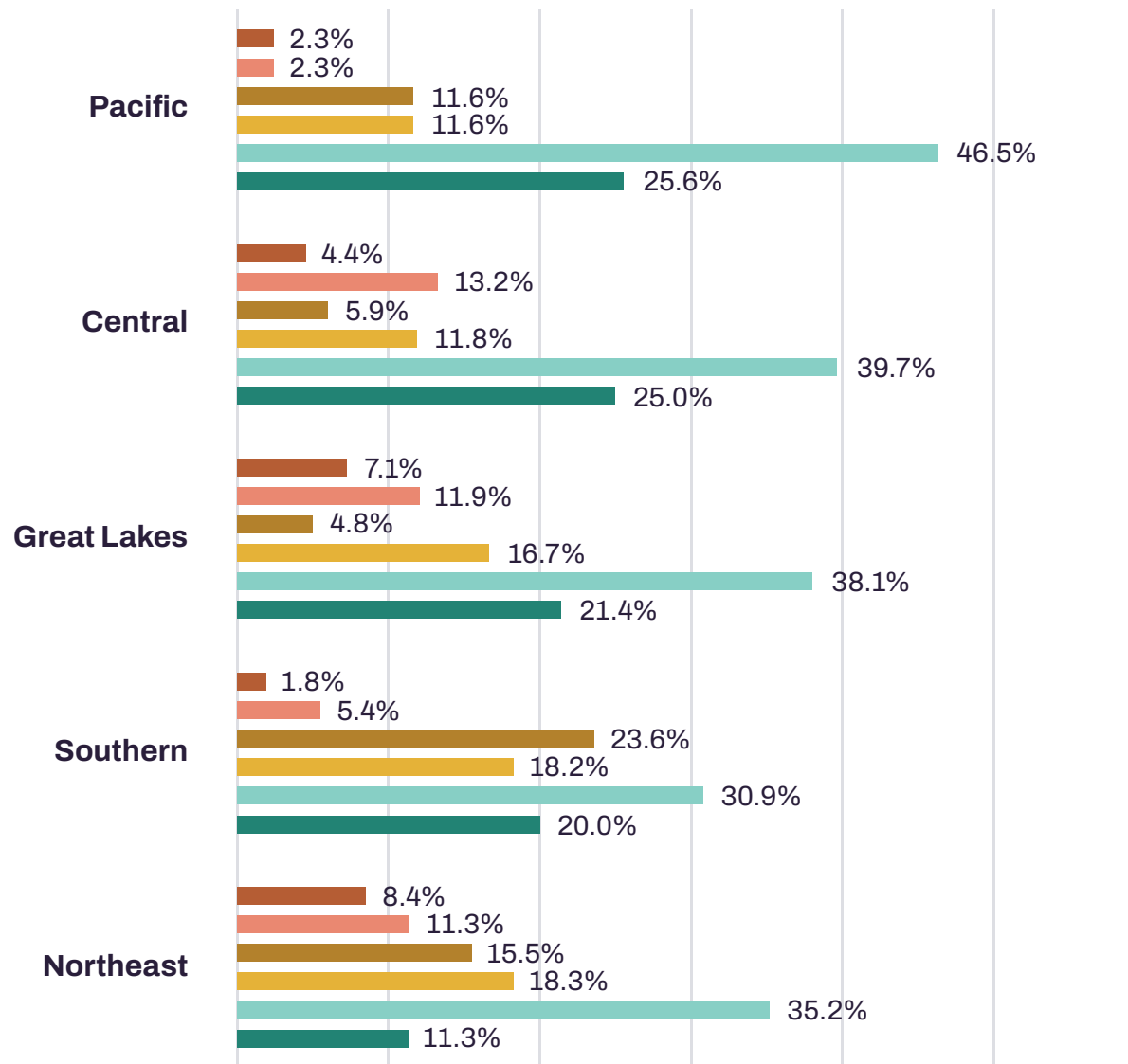
Survey participants were asked, "Which statement best describes the impact employee shortages had on your business in 2024?"

"No Impact At All" indicates that a company experienced shortages, but the shortages didn't have an impact on operations. Whereas "Did Not Experience Any Shortages" means that the agency was fully staffed in that position.



STAFFING SHORTAGES

3.10 **Home Health** **Hospice** Impact of Nurse Shortages for 2024 - Geographic Regions



- Extremely Negative Impact
- Very Negative Impact
- Somewhat Negative Impact
- Very Little Negative Impact
- No Impact At All
- Did Not Experience Any Shortages

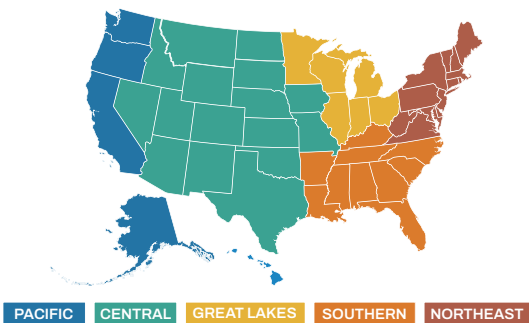
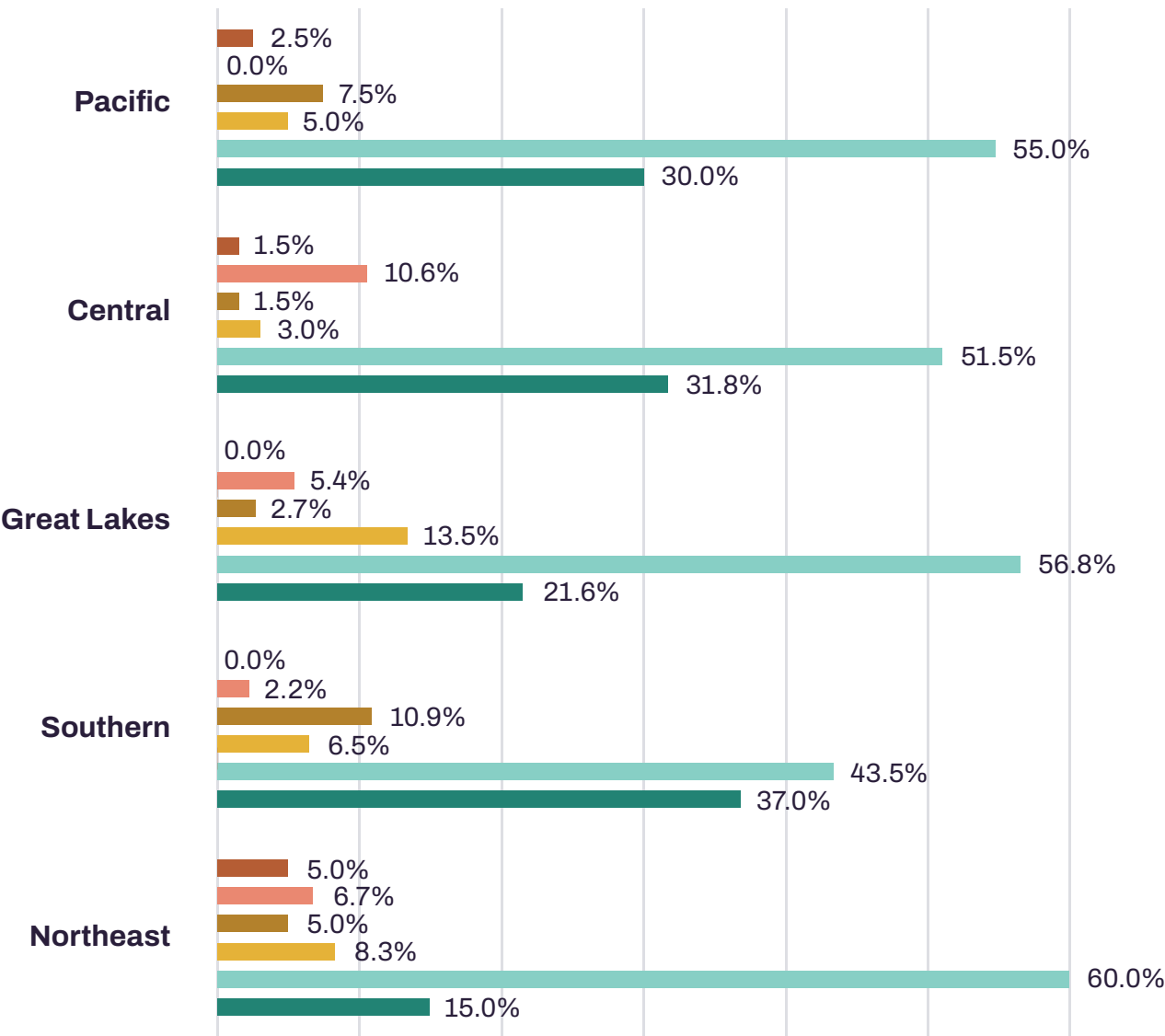
Survey participants were asked, "Which statement best describes the impact employee shortages had on your business in 2024?"

"No Impact At All" indicates that a company experienced shortages, but the shortages didn't have an impact on operations. Whereas "Did Not Experience Any Shortages" means that the agency was fully staffed in that position.



STAFFING SHORTAGES

3.11 **Home Health** **Hospice** Impact of Therapist Shortages for 2024 - Geographic Regions



- Extremely Negative Impact
- Very Negative Impact
- Somewhat Negative Impact
- Very Little Negative Impact
- No Impact At All
- Did Not Experience Any Shortages

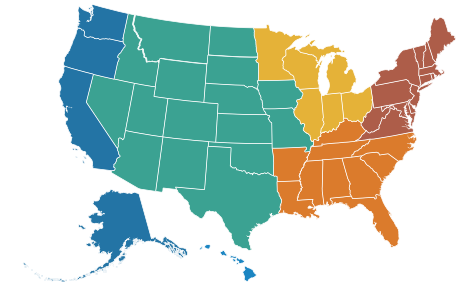
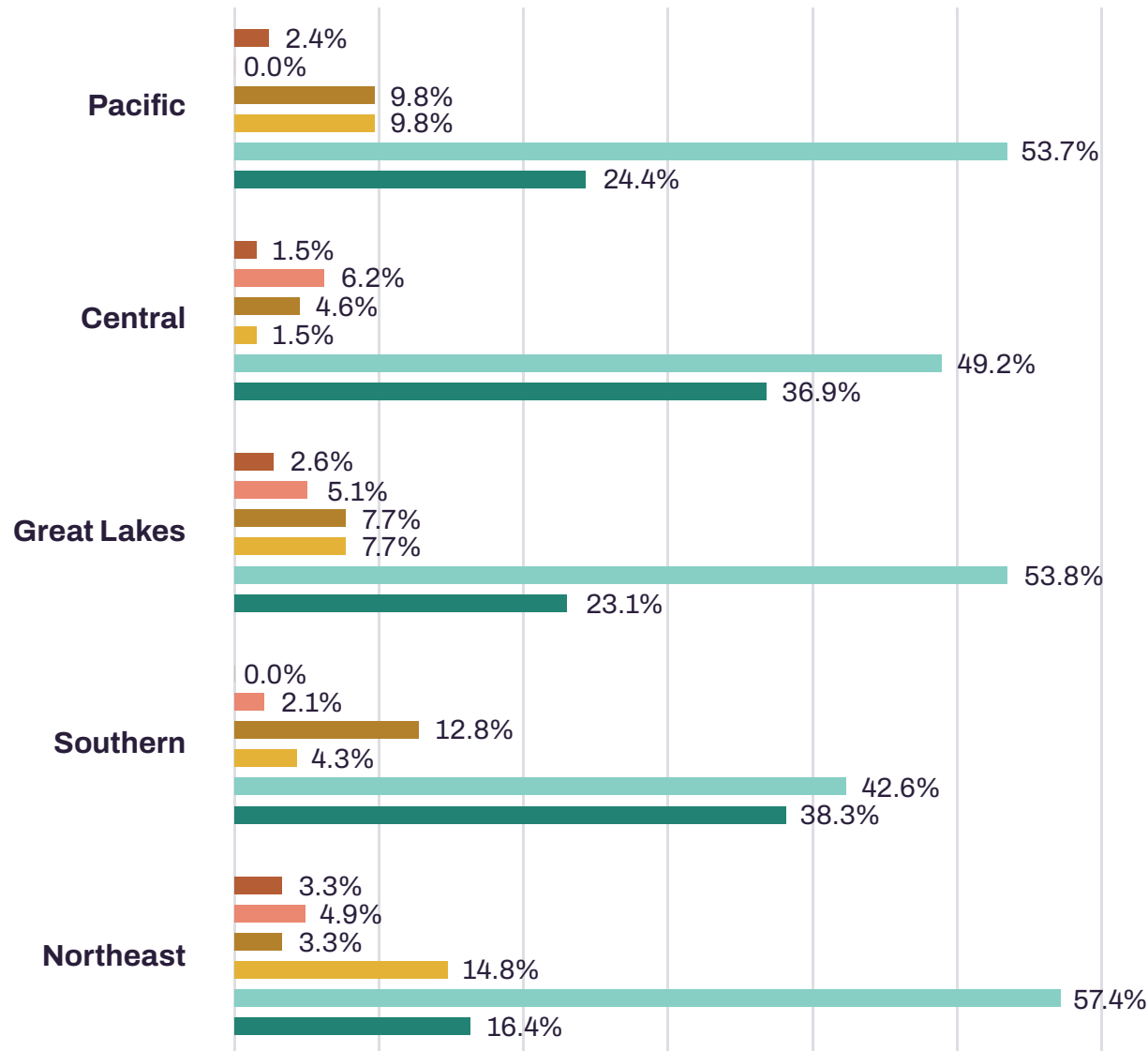
Survey participants were asked, “Which statement best describes the impact employee shortages had on your business in 2024?”

“No Impact At All” indicates that a company experienced shortages, but the shortages didn’t have an impact on operations. Whereas “Did Not Experience Any Shortages” means that the agency was fully staffed in that position.



STAFFING SHORTAGES

3.12 Home Health Hospice Impact of Social Worker Shortages for 2024 - Geographic Regions



PACIFIC CENTRAL GREAT LAKES SOUTHERN NORTHEAST

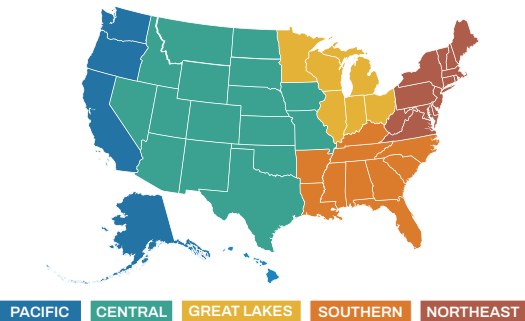
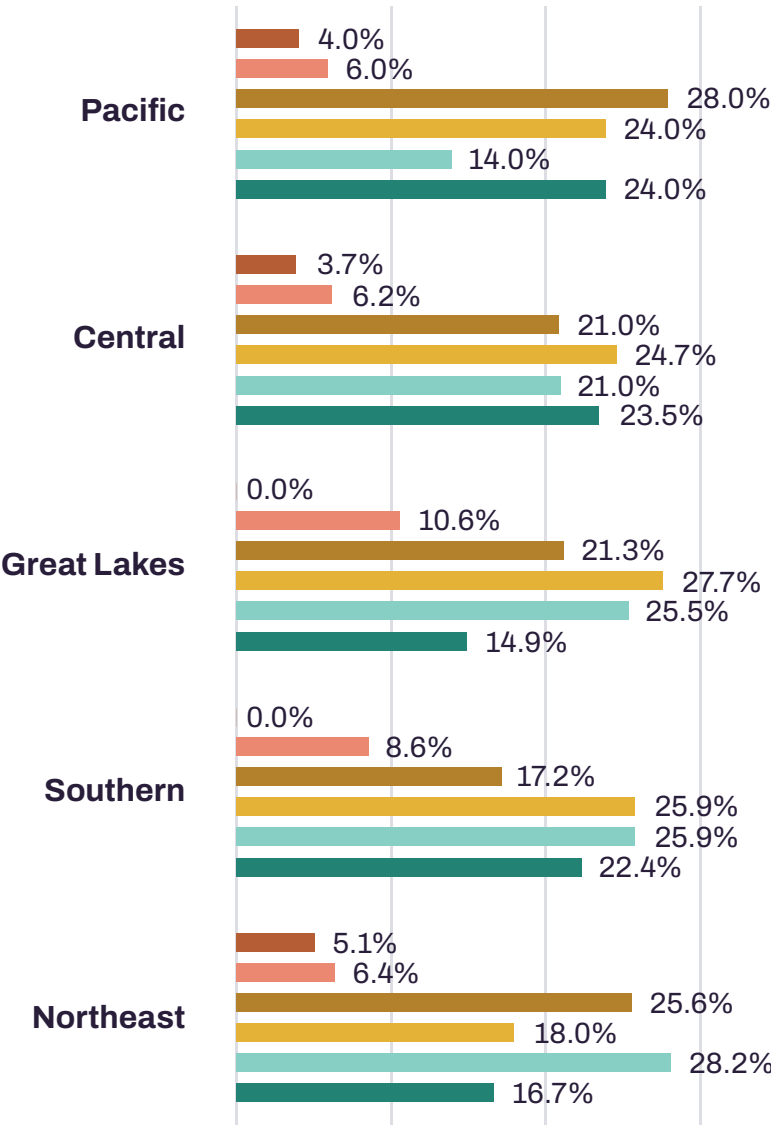
- Extremely Negative Impact
- Very Negative Impact
- Somewhat Negative Impact
- Very Little Negative Impact
- No Impact At All
- Did Not Experience Any Shortages

Survey participants were asked, "Which statement best describes the impact employee shortages had on your business in 2024?"

"No Impact At All" indicates that a company experienced shortages, but the shortages didn't have an impact on operations. Whereas "Did Not Experience Any Shortages" means that the agency was fully staffed in that position.

STAFFING SHORTAGES

3.13 Overall Impact of Office Staff Shortages for 2024 - Geographic Regions



- Extremely Negative Impact
- Very Negative Impact
- Somewhat Negative Impact
- Very Little Negative Impact
- No Impact At All
- Did Not Experience Any Shortages

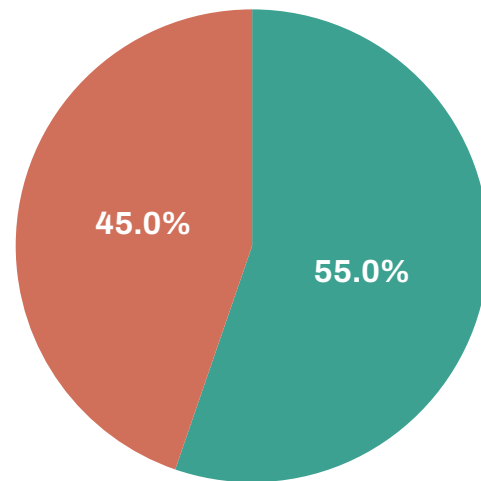
Survey participants were asked, "Which statement best describes the impact employee shortages had on your business in 2024?"

"No Impact At All" indicates that a company experienced shortages, but the shortages didn't have an impact on operations. Whereas "Did Not Experience Any Shortages" means that the agency was fully staffed in that position.



STAFFING SHORTAGES

3.14 **Overall** Percentage of Agencies That Turned Down Cases At Any Point in 2024 Due to Professional Caregiver Shortage

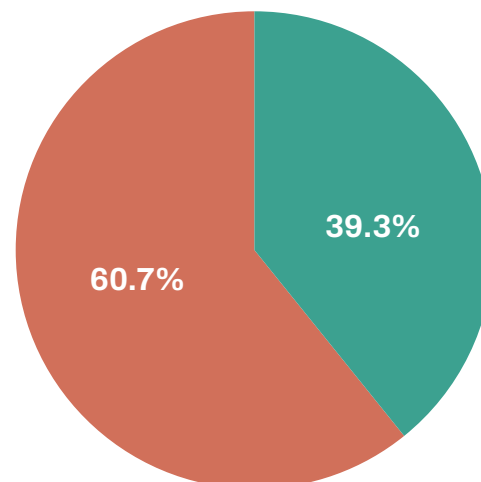


- Yes, Cases Were Turned Down At Any Point in 2024
- No, Cases Were Not Turned Down in 2024

Compared to 2023, there was a 8.3% decrease in those that said, "Yes, Cases Were Turned Down at Any Point in 2024."

STAFFING SHORTAGES

3.15 **Overall** Percentage of Agencies That *Consistently* Turned Down Cases Due to Professional Caregiver Shortages in 2024



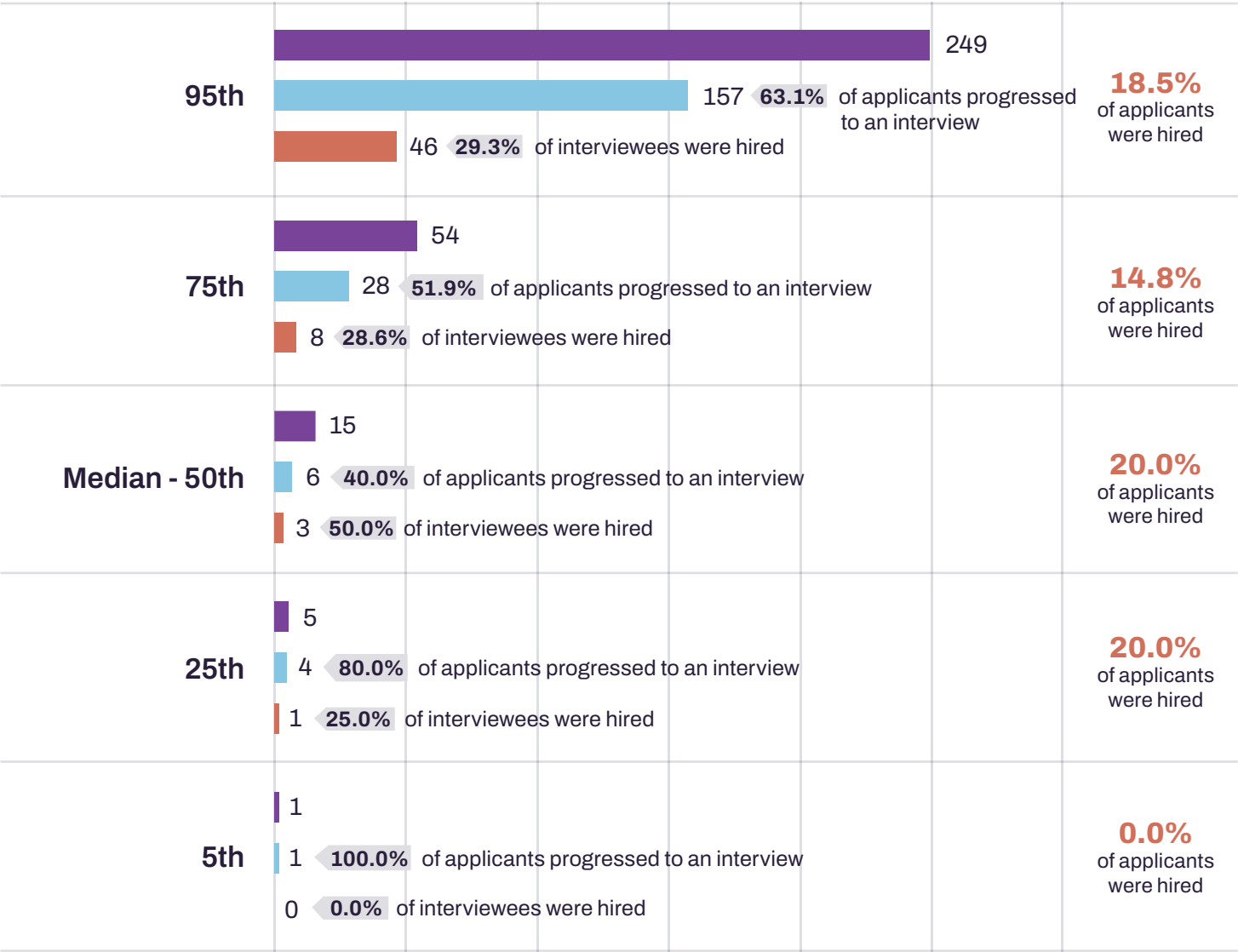
- Yes, Cases Were Consistently Turned Down Due to Professional Caregiver Shortages
- No, Cases Were Not Consistently Turned Down Due to Professional Caregiver Shortages

Compared to 2023, there was an 4.8% decrease in those that said, "Yes, Cases Were Consistently Turned Down Due to Professional Caregiver Shortages as of January 2024."



NURSE HIRING CONVERSIONS

3.16 **Home Health** **Hospice** Median Nurse Hiring Conversions for 2024 - Percentile Ranking



- Applicants
- Interviews
- New Hires

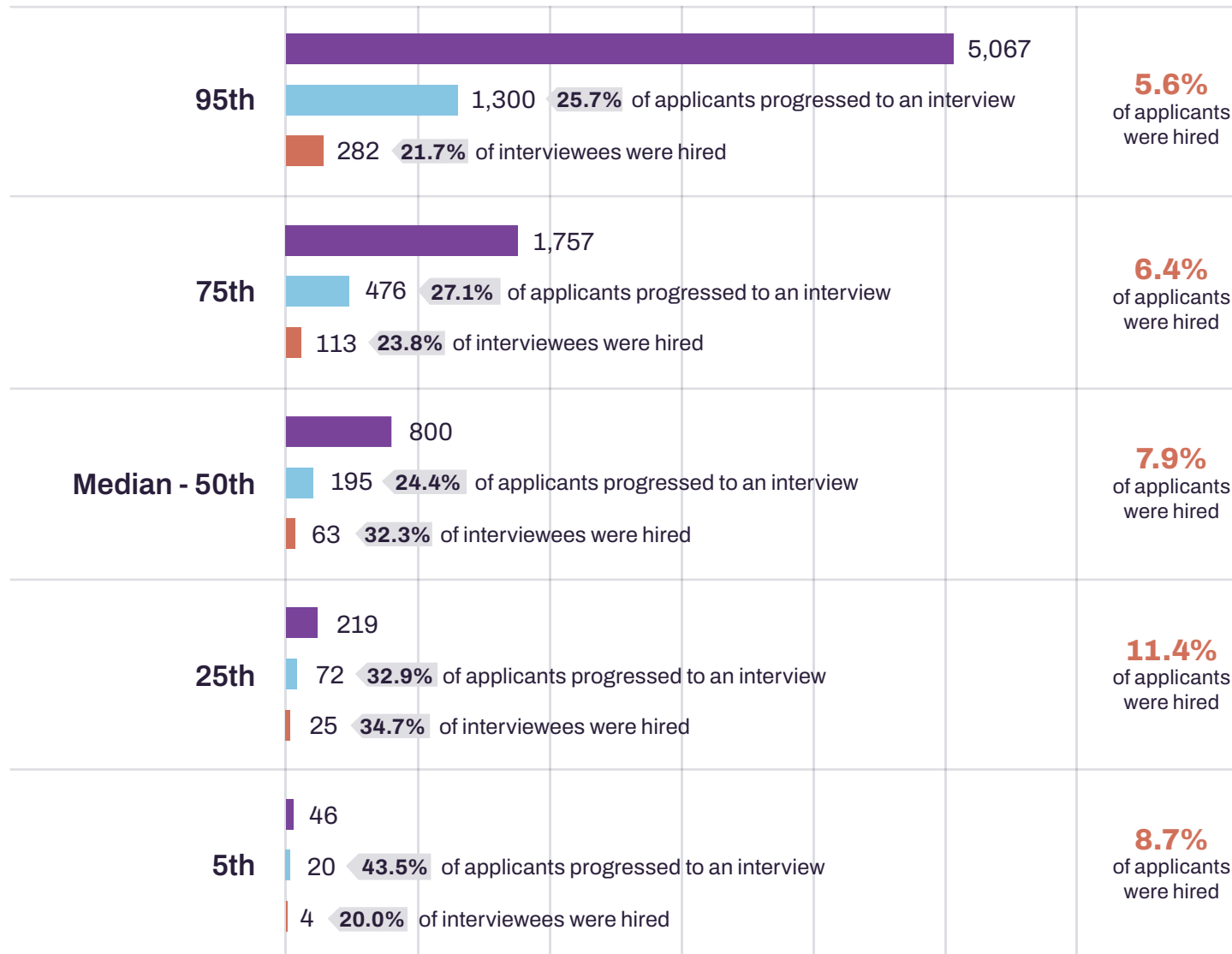
Percentile graphs illustrate rankings on a scale from 1%–100%. For example, if your results, based on the value above, fall somewhere in the 75th percentile, you are exceeding 75% of the industry in that particular measurement.

This graph indicates that a higher number of applicants does not always correspond to a higher percentage of applicants hired. This may be due to organizations needing a finite number of new hires, but could also indicate that, at a certain volume, quality of applicants or ability to handle application volume decreases. For more information on recruitment sources, go to **page 47**.



PROFESSIONAL CAREGIVER HIRING CONVERSIONS

3.17 **Home Care** Median Professional Caregiver Hiring Conversions for 2024 - Percentile Ranking



- Applicants
- Interviews
- New Hires

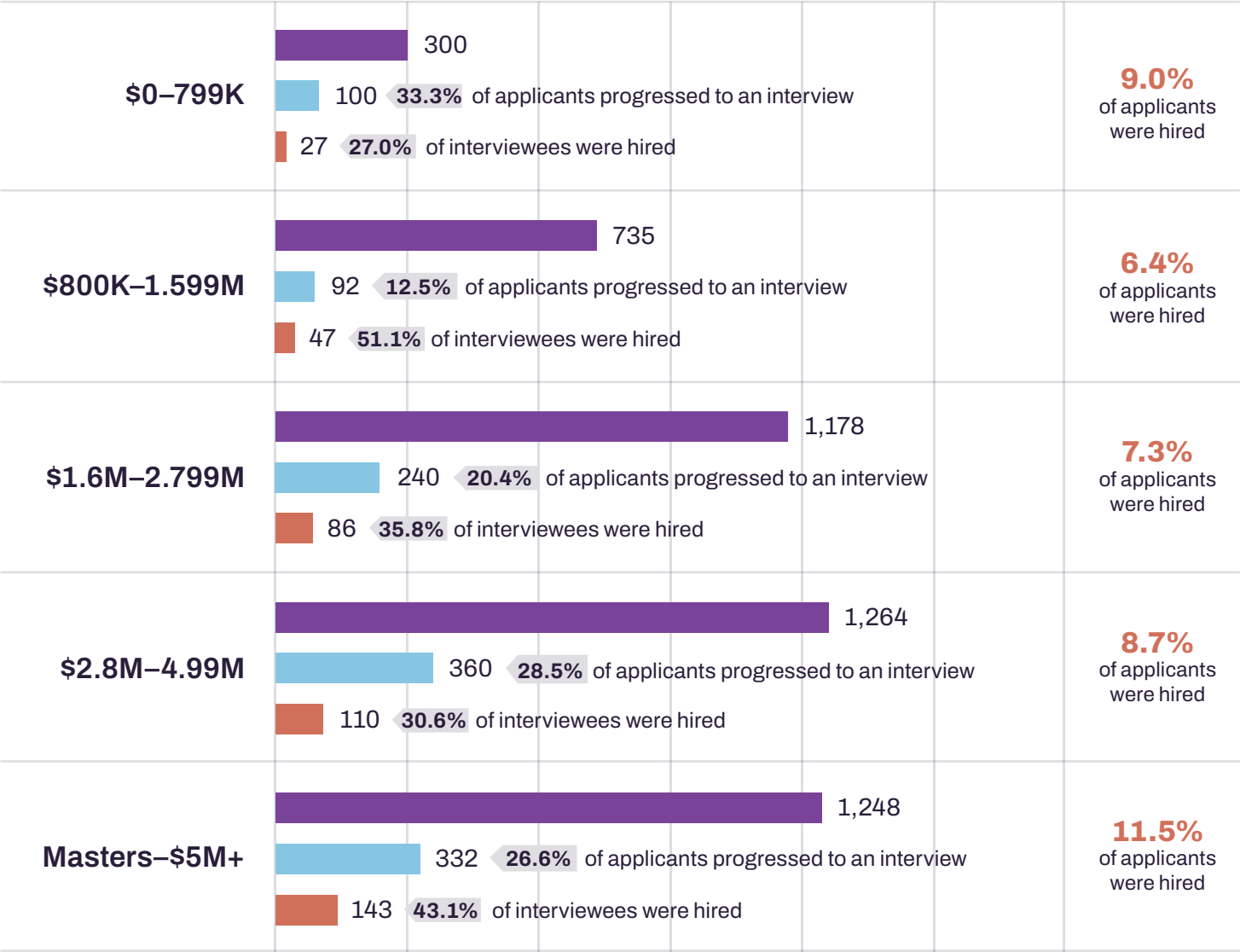
Percentile graphs illustrate rankings on a scale from 1%–100%. For example, if your results, based on the value above, fall somewhere in the 75th percentile, you are exceeding 75% of the industry in that particular measurement.

*This graph indicates that a higher number of applicants does not always correspond to a higher percentage of applicants hired. This may be due to organizations needing a finite number of new hires, but could also indicate that, at a certain volume, quality of applicants or ability to handle application volume decreases. For more information on recruitment sources, go to **page 46**.*



PROFESSIONAL CAREGIVER HIRING CONVERSIONS

3.18 **Home Care** Median Professional Caregiver Hiring Conversions for 2024 - Revenue Range

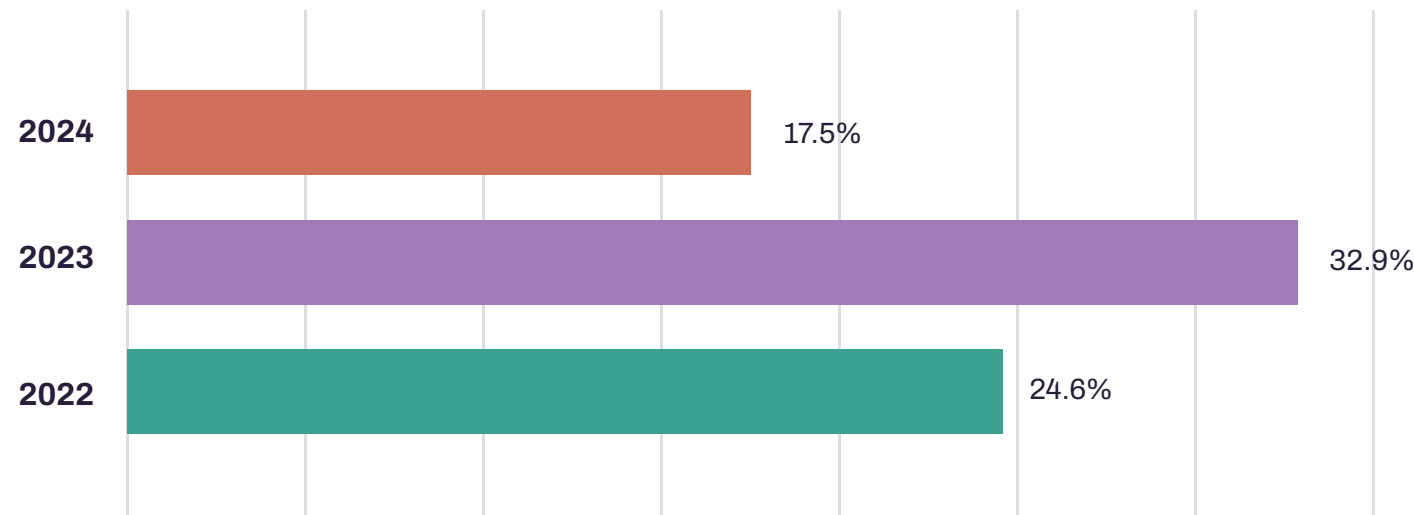


- Applicants
- Interviews
- New Hires



PROFESSIONAL CAREGIVER TURNOVER RATES

3.19 **Home Health** **Hospice** Historical Median Professional Care Staff Turnover Rate



Professional Care Staff Turnover Calculation

Professional Care Staff Turnover represents the percent of clinicians and aides who quit or were terminated in 2024. Providers had to have been in business for at least one full year. Basic professional care staff turnover is calculated by taking the **number of professional care staff who quit or were terminated** in the year and dividing that number by the **average number of professional care staff employed** in the same time period.

of Professional Care Staff Quit/Terminated

÷

Avg. # of Professional Care Staff Employed*

=

Professional Care Staff Turnover Rate

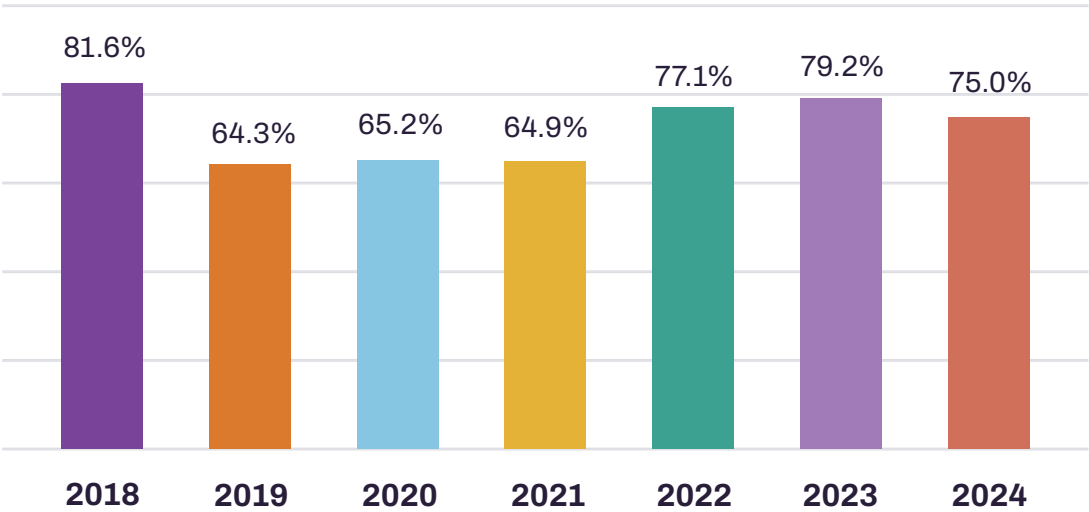
**To calculate your average number of professional care staff employed during a year, take the sum of the number of professional care staff employed at the end of one year (e.g. Dec. 2023) and at the end of the next year (e.g. Dec. 2024) and divide that number by 2.*

of Professional Care Staff employed (Dec. 2023) + # of Professional Care Staff employed (Dec. 2024) ÷ 2 = Avg. # of Professional Care Staff Employed



PROFESSIONAL CAREGIVER TURNOVER RATES

3.20 **Home Care** Historical Median Professional Caregiver Turnover Rate



Professional Caregiver Turnover Calculation

Professional Caregiver Turnover represents the percent of professional caregivers who quit or were terminated in 2024. Providers had to have been in business for at least one full year. Basic professional caregiver turnover is calculated by taking the **number of professional caregivers who quit or were terminated** in the year and dividing that number by the **average number of professional caregivers employed** in the same time period.

of Professional Caregivers Quit/Terminated

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Avg. # of Professional Caregivers Employed*

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Professional Caregiver Turnover Rate

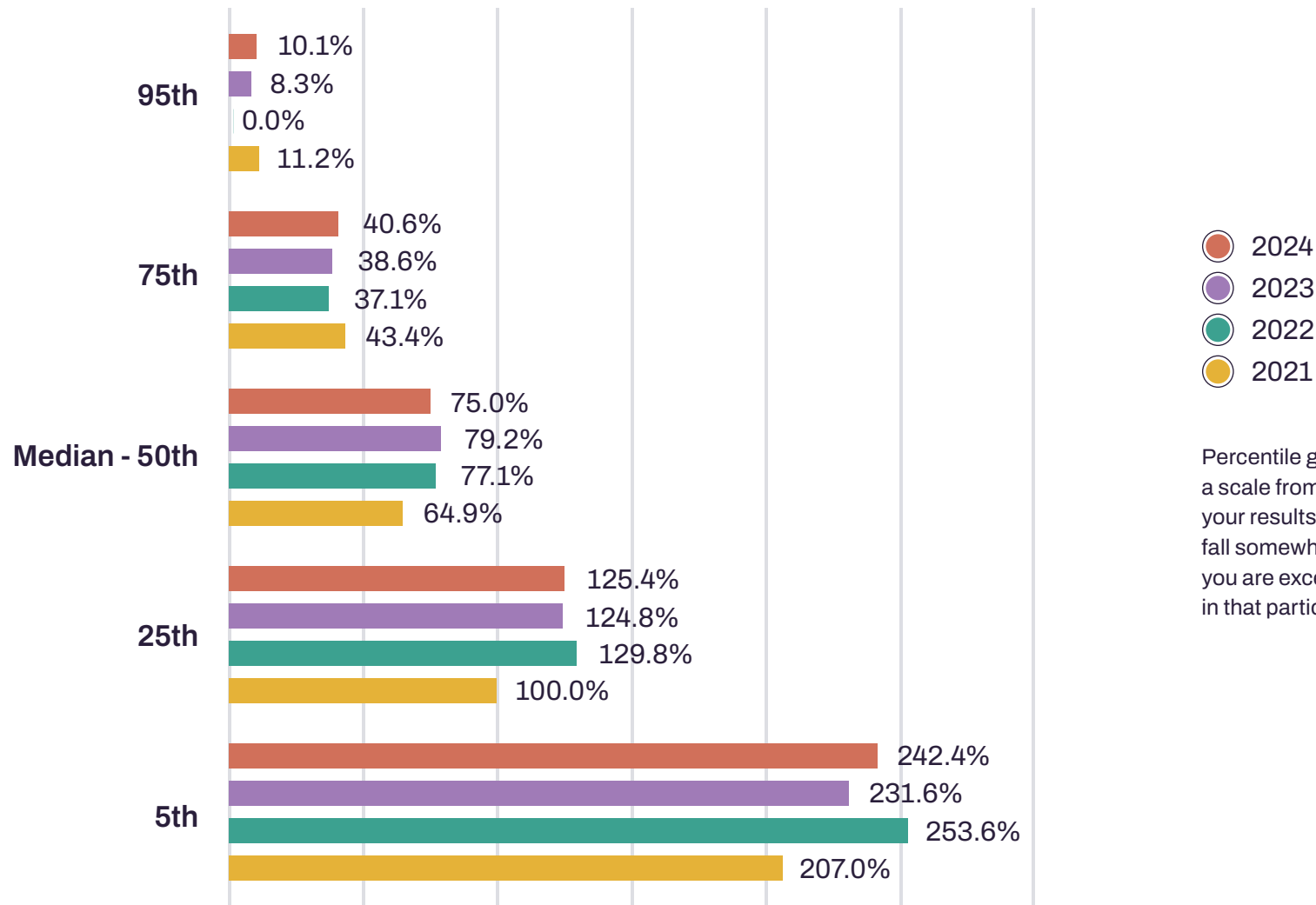
**To calculate your average number of professional caregivers employed during a year, take the sum of the number of professional caregivers employed at the end of one year (e.g. Dec. 2023) and at the end of the next year (e.g. Dec. 2024) and divide that number by 2.*

of Professional Caregivers employed (Dec. 2023) + # of Professional Caregivers employed (Dec. 2024) ÷ 2 = Avg. # of Professional Caregivers Employed



PROFESSIONAL CAREGIVER TURNOVER RATES

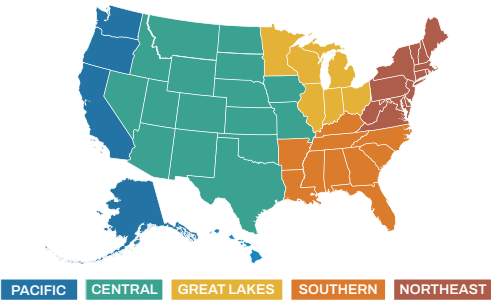
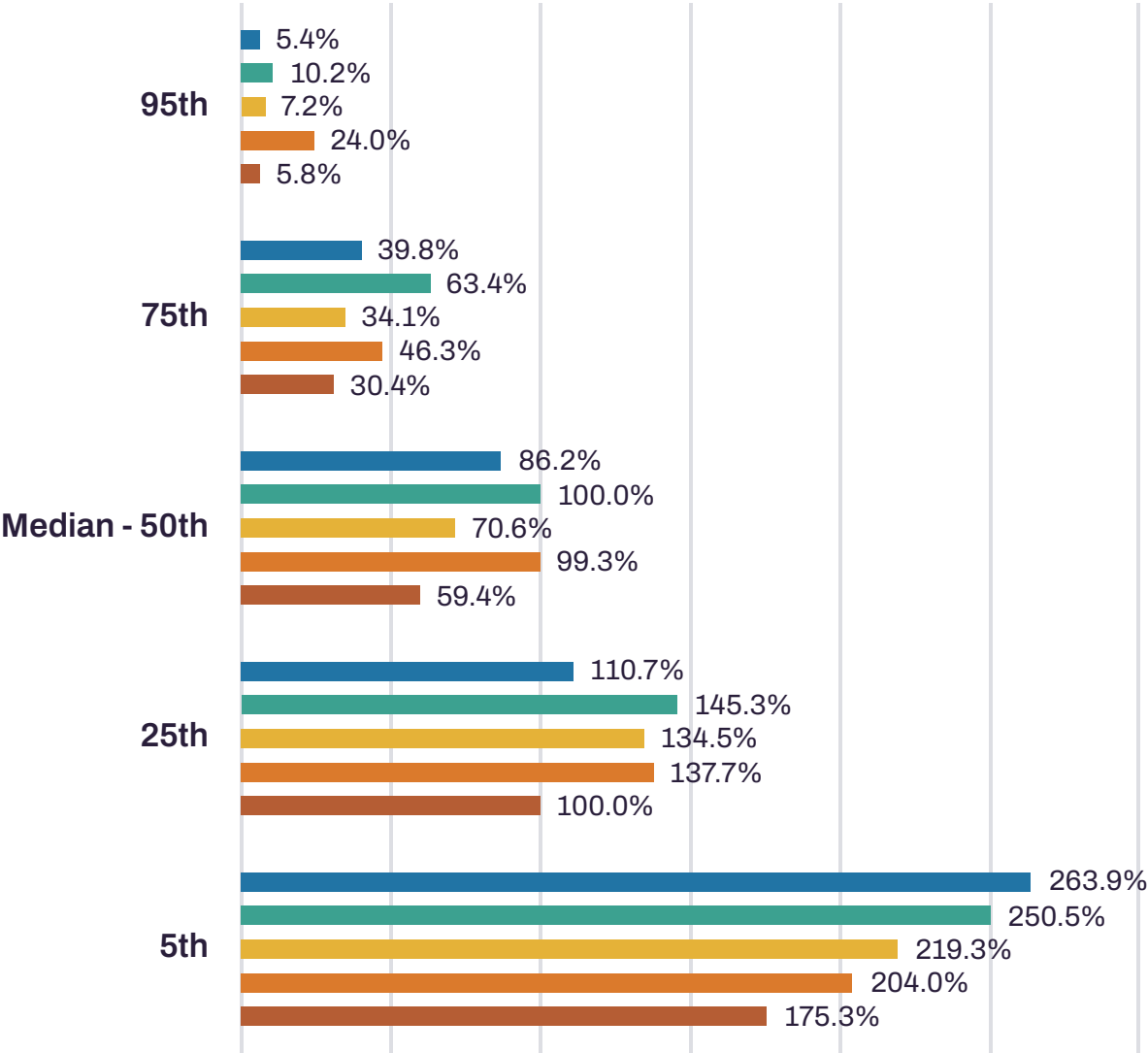
3.21 **Home Care** Historical Professional Caregiver Turnover Rate - Percentile Ranking





PROFESSIONAL CAREGIVER TURNOVER RATES

3.22 **Home Care** Professional Caregiver Turnover Rate by Percentile Ranking for 2024 - Geographic Region

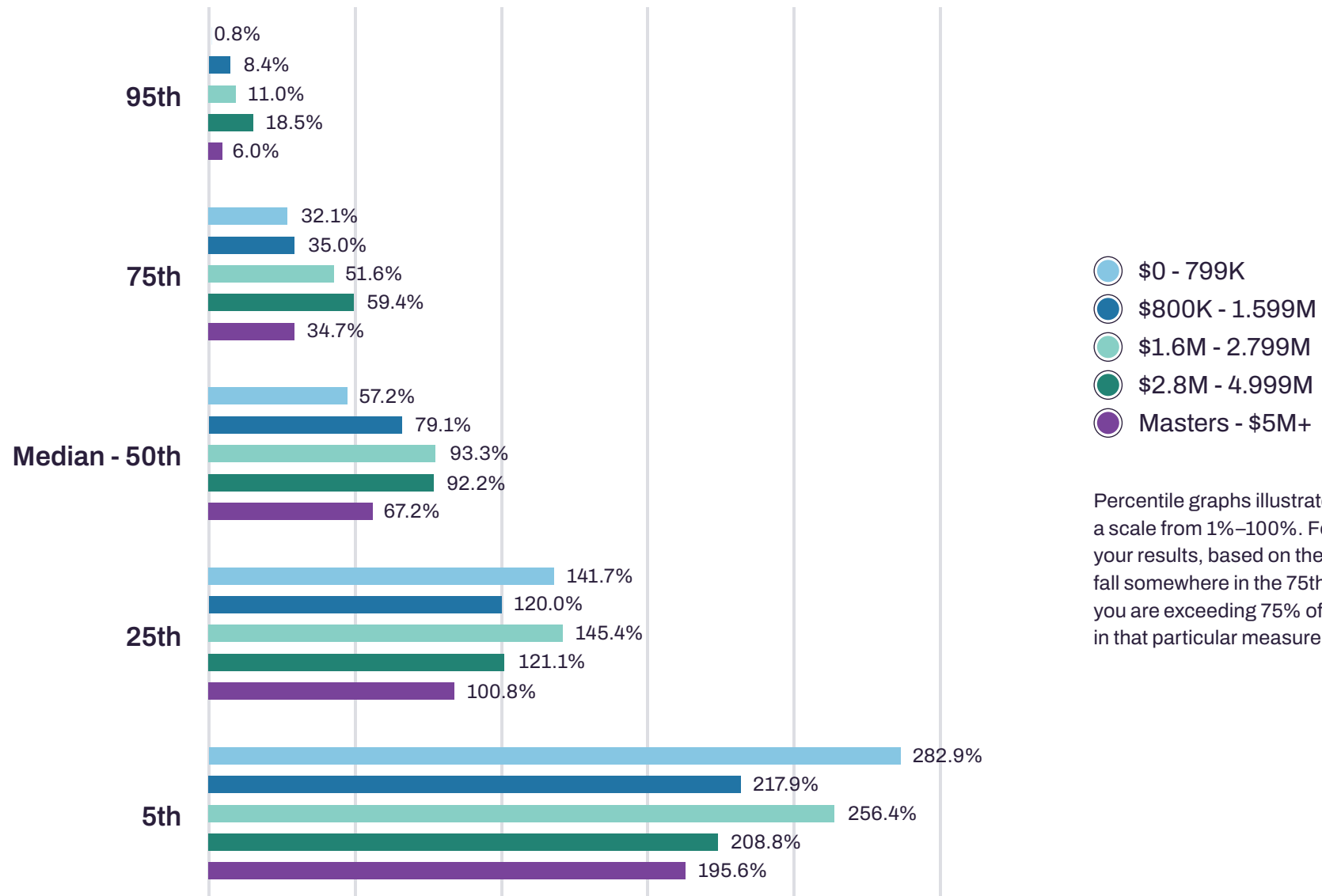


Percentile graphs illustrate rankings on a scale from 1%–100%. For example, if your results, based on the value above, fall somewhere in the 75th percentile, you are exceeding 75% of the industry in that particular measurement.



PROFESSIONAL CAREGIVER TURNOVER RATES

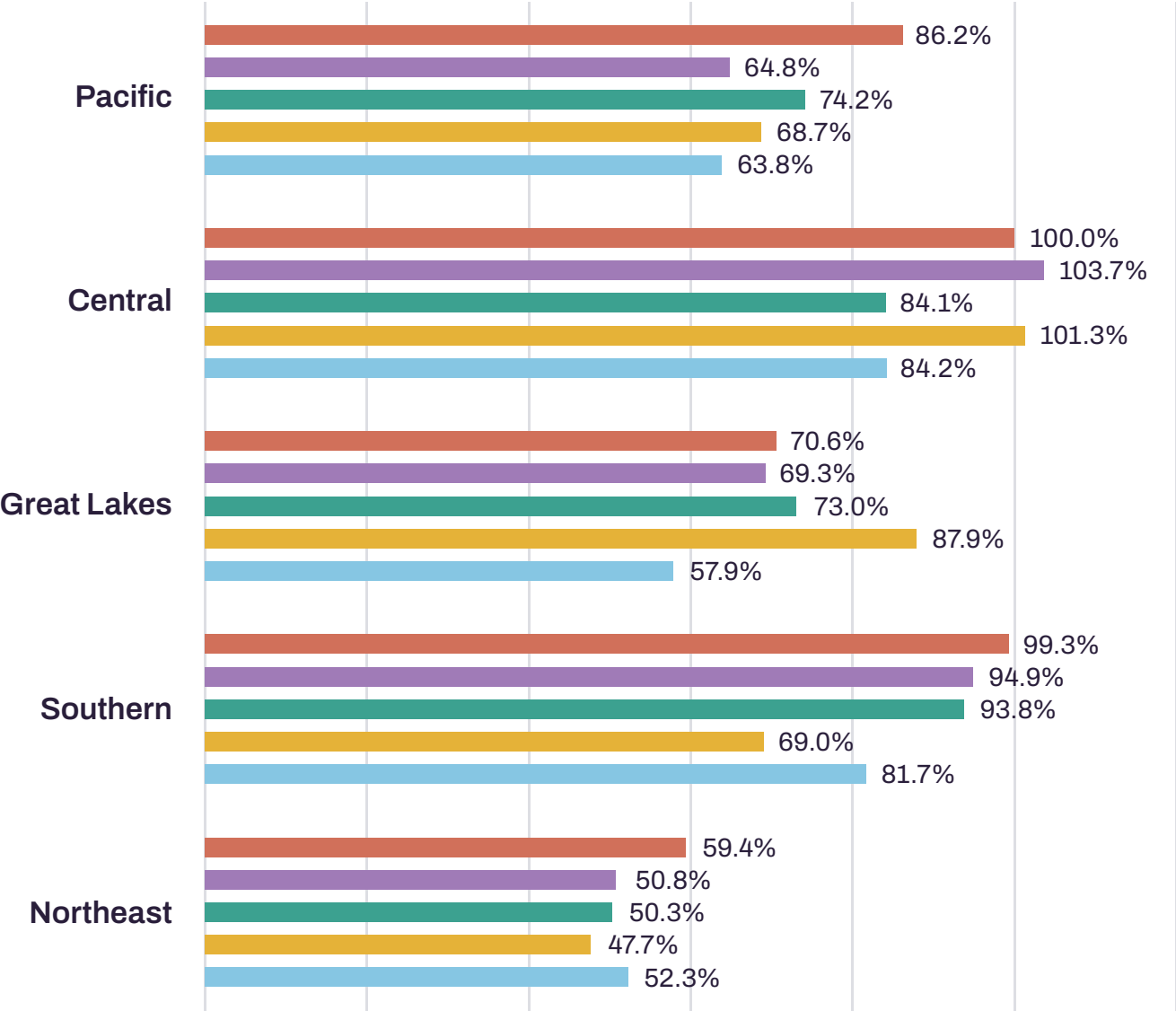
3.23 Home Care Professional Caregiver Turnover Rate for 2024 - Revenue Range



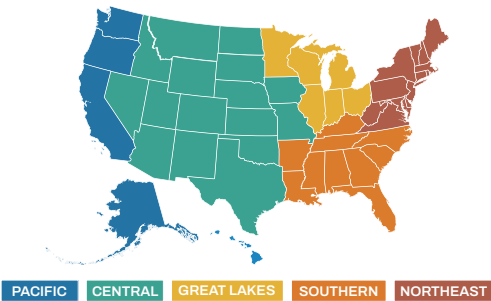


PROFESSIONAL CAREGIVER TURNOVER RATES

3.24 **Home Care** Historical Median Professional Caregiver Turnover Rate - Geographic Region



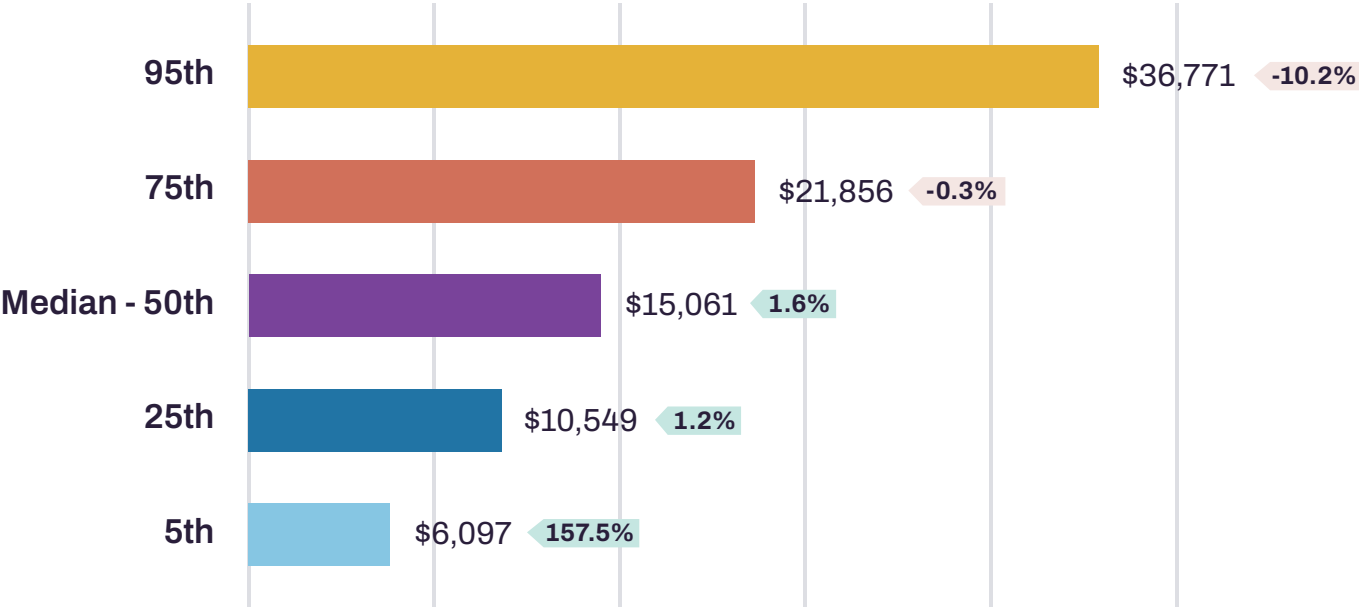
- 2024
- 2023
- 2022
- 2021
- 2020





REVENUE PER PROFESSIONAL CAREGIVER EMPLOYEE

3.25 **Home Care** Revenue Per Professional Caregiver Employee for 2024 - Percentile Ranking



Percentile graphs illustrate rankings on a scale from 1%–100%. For example, if your results, based on the value above, fall somewhere in the 75th percentile, you are exceeding 75% of the industry in that particular measurement.

Highlighted percentages represent the change year-over-year.

Revenue Per Professional Caregiver Employee Calculation

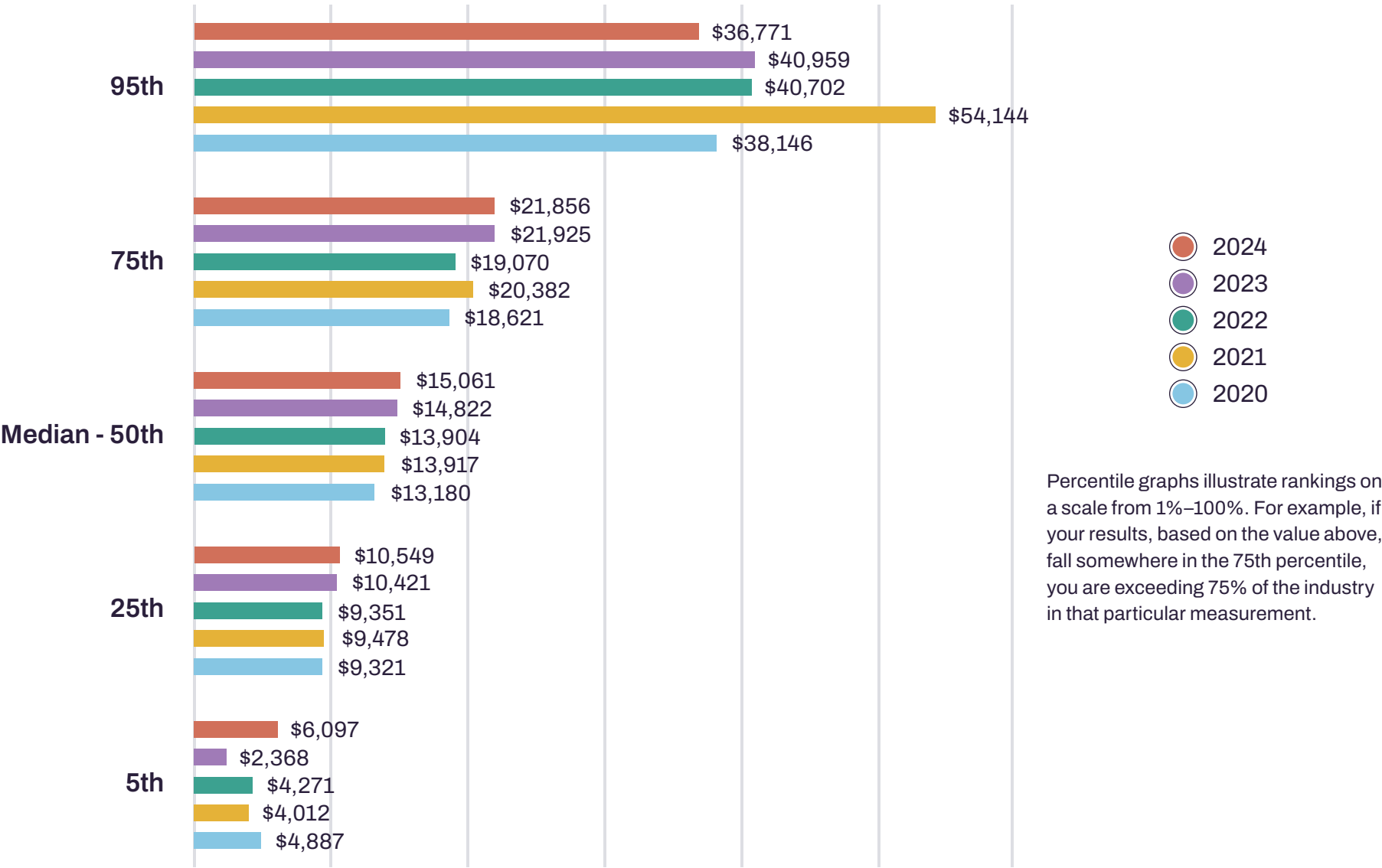
To calculate the Revenue Per Professional Caregiver Employee, divide your **annual revenue** by the **number of professional caregivers employed** in the same year.





REVENUE PER PROFESSIONAL CAREGIVER EMPLOYEE

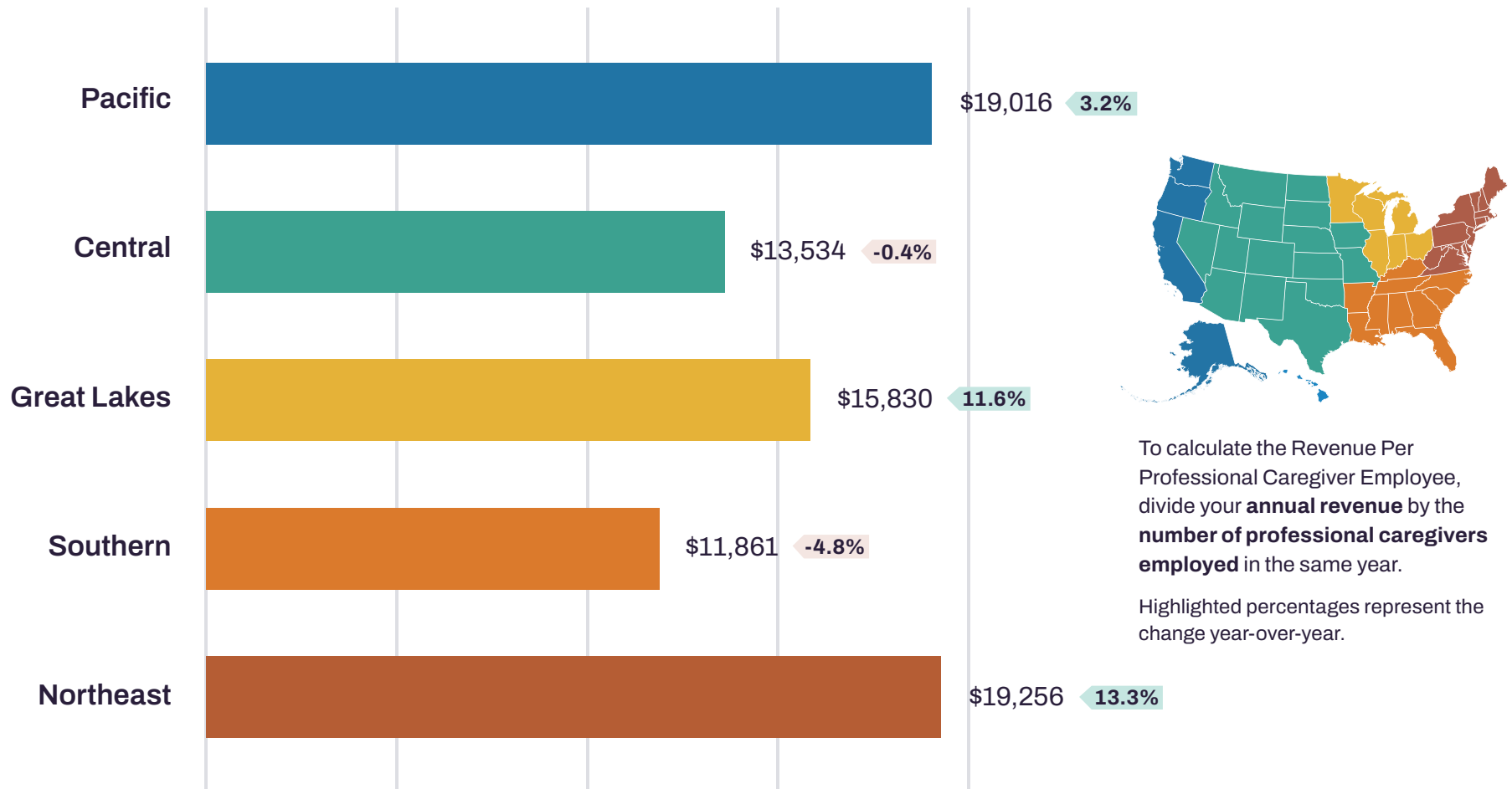
3.26 **Home Care** Historical Revenue Per Professional Caregiver Employee - Percentile Ranking





REVENUE PER PROFESSIONAL CAREGIVER EMPLOYEE

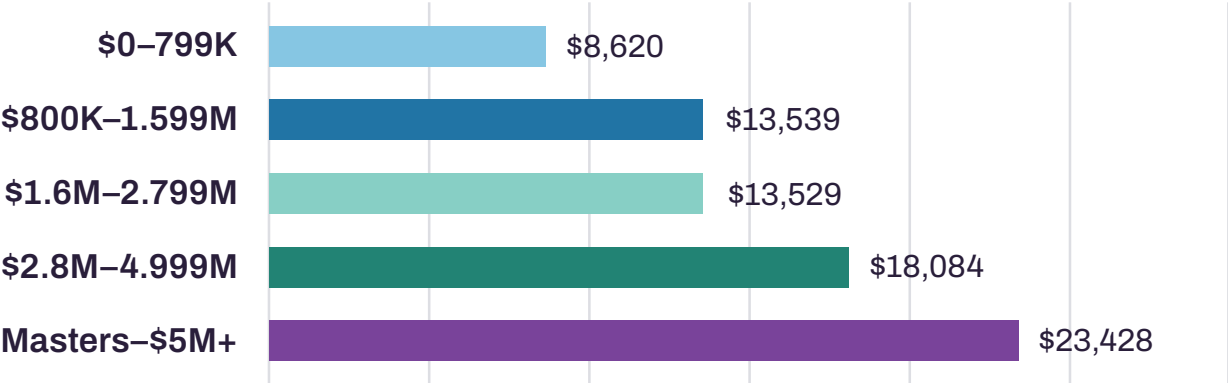
3.27 Home Care Median Revenue Per Professional Caregiver Employee for 2024 - Geographic Region





REVENUE PER PROFESSIONAL CAREGIVER EMPLOYEE

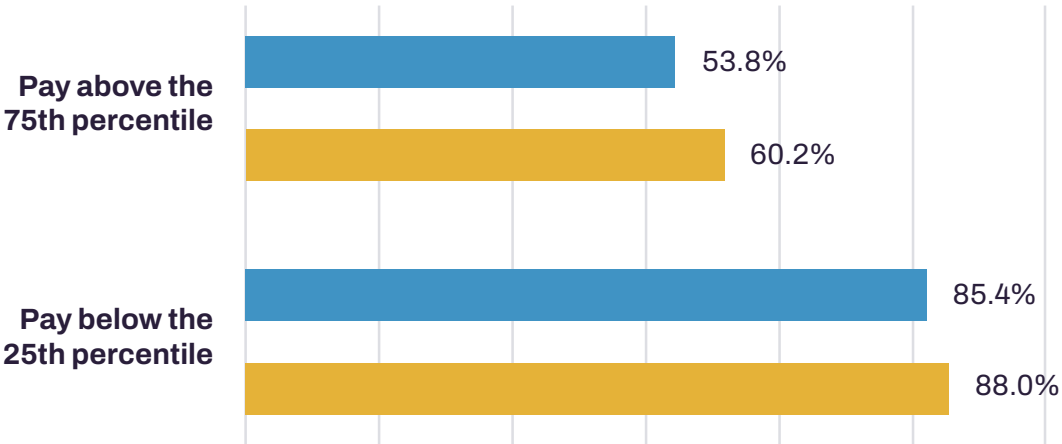
3.28 **Home Care** Median Revenue Per Professional Caregiver Employee for 2024 - Revenue Ranges



To calculate the Revenue Per Professional Caregiver Employee, divide your **annual revenue** by the **number of professional caregivers employed** in the same year.

CARE STAFF WAGES

3.29 **Home Care** Median Turnover - Professional Caregiver Wages Comparison



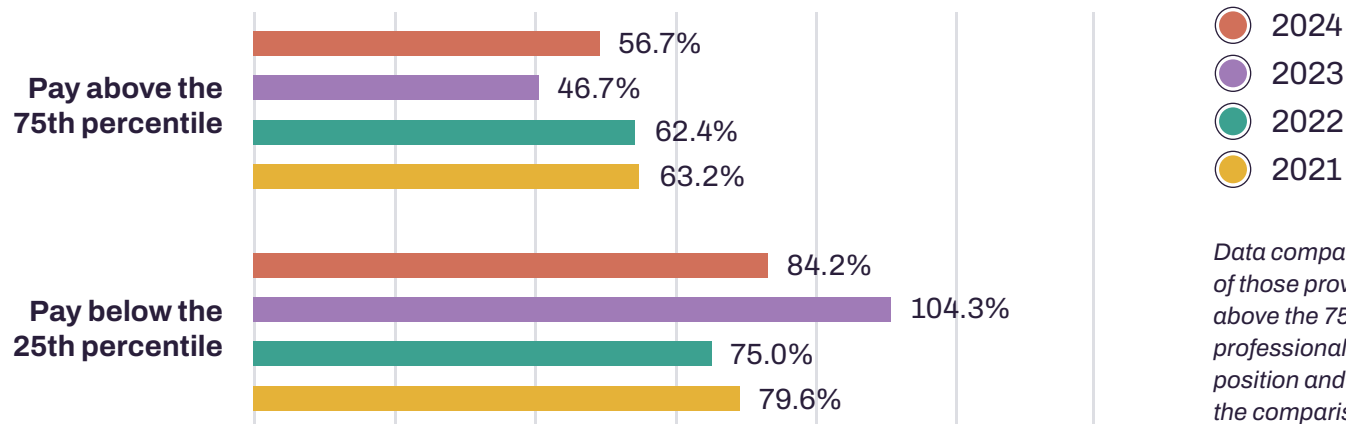
- Companion/Homemaker
- Personal Care Attendant

Data compares the professional caregiver turnover rate of those providers who pay their professional caregivers above the 75th percentile to those who pay their professional caregivers below the 25th percentile for their position and region. To find your local median wages, go to the comparisons starting on **page 77**.



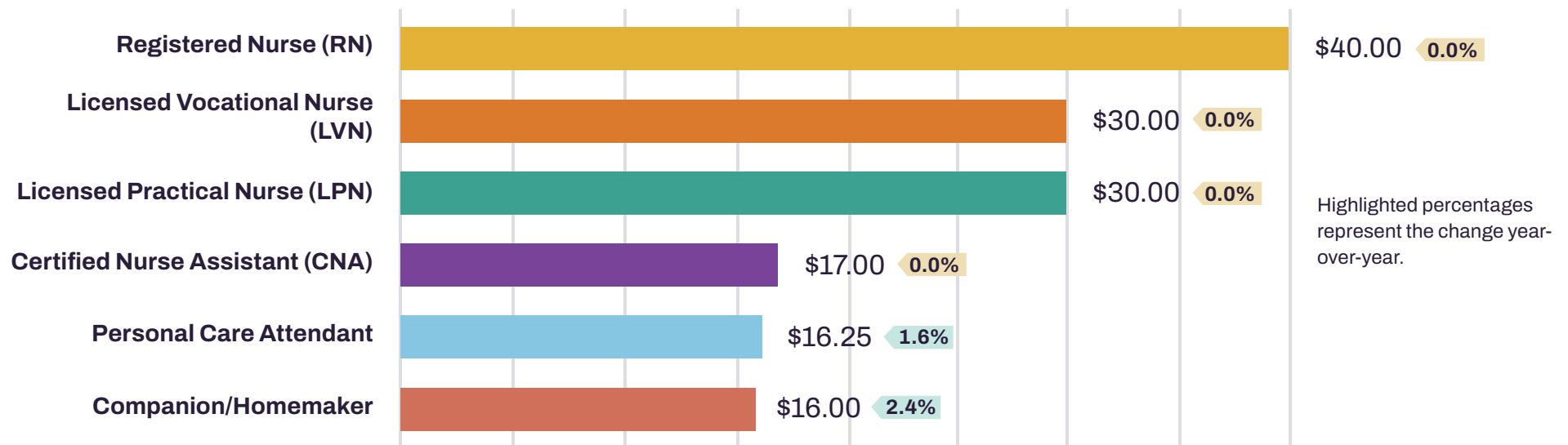
CARE STAFF WAGES

3.30 **Home Care** Historical Median Professional Caregiver Turnover - Professional Caregiver Wages Comparison



CARE STAFF WAGES

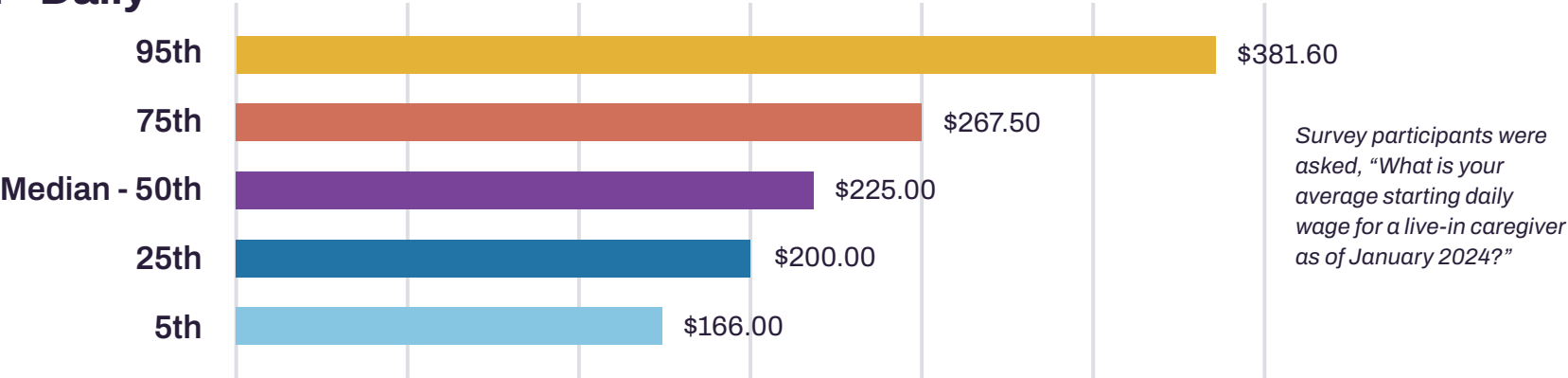
3.31 **Overall** Median Hourly Care Staff Wages by Role





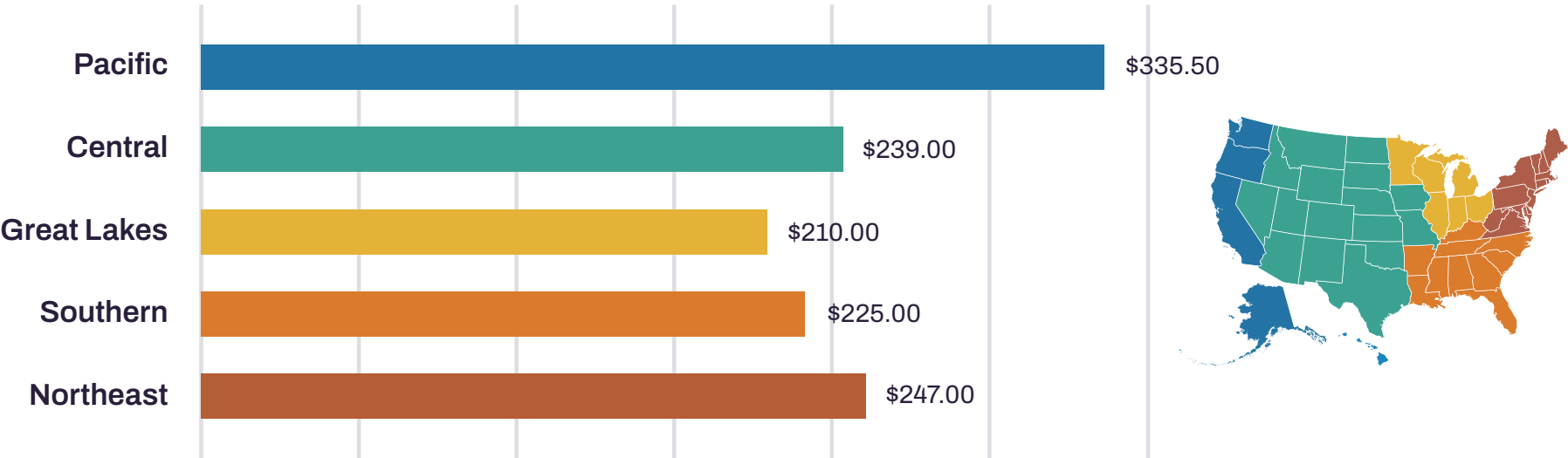
CARE STAFF WAGES

3.32 **Home Care** Live-In Professional Caregiver Wages per 24-Hour Shift for 2024 - Daily



CARE STAFF WAGES

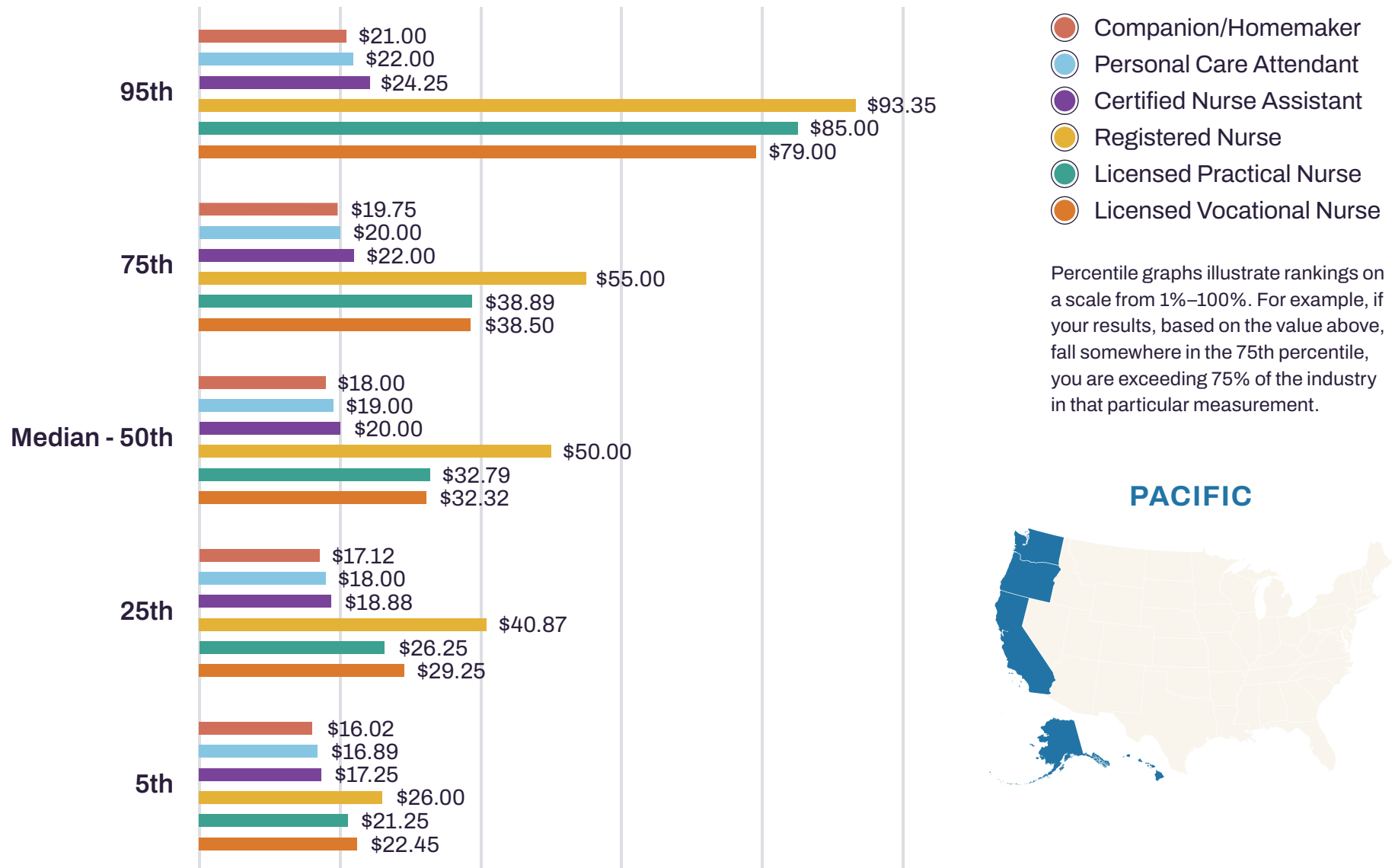
3.33 **Home Care** Live-In Professional Caregiver Wages per 24-Hour Shift for 2024 - Geographic Regions - Daily





WAGES COMPARISON

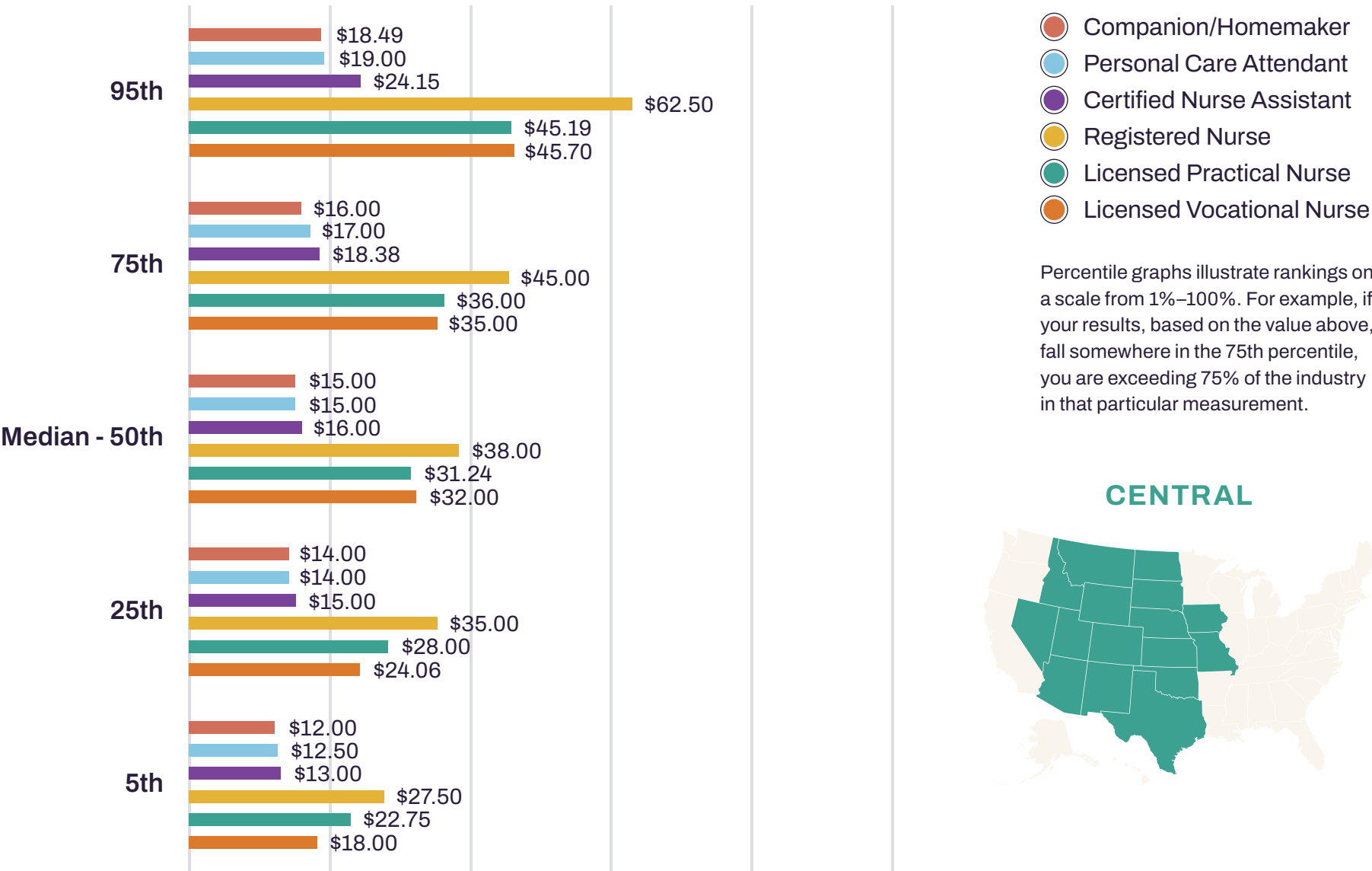
3.34 Overall Wages by Geographical Region for 2024 - Pacific





WAGES COMPARISON

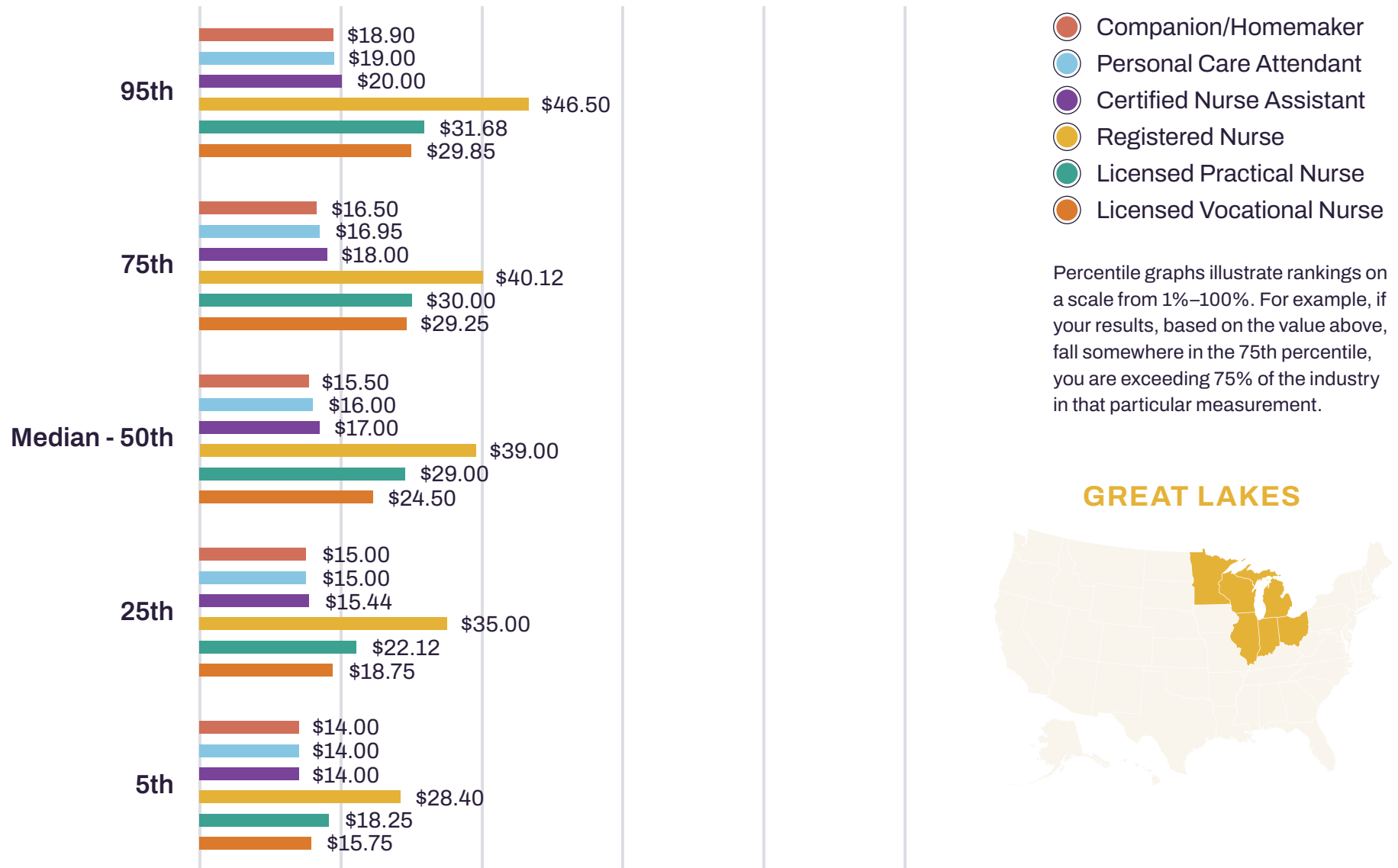
3.35 Overall Wages by Geographical Region for 2024 - Central





WAGES COMPARISON

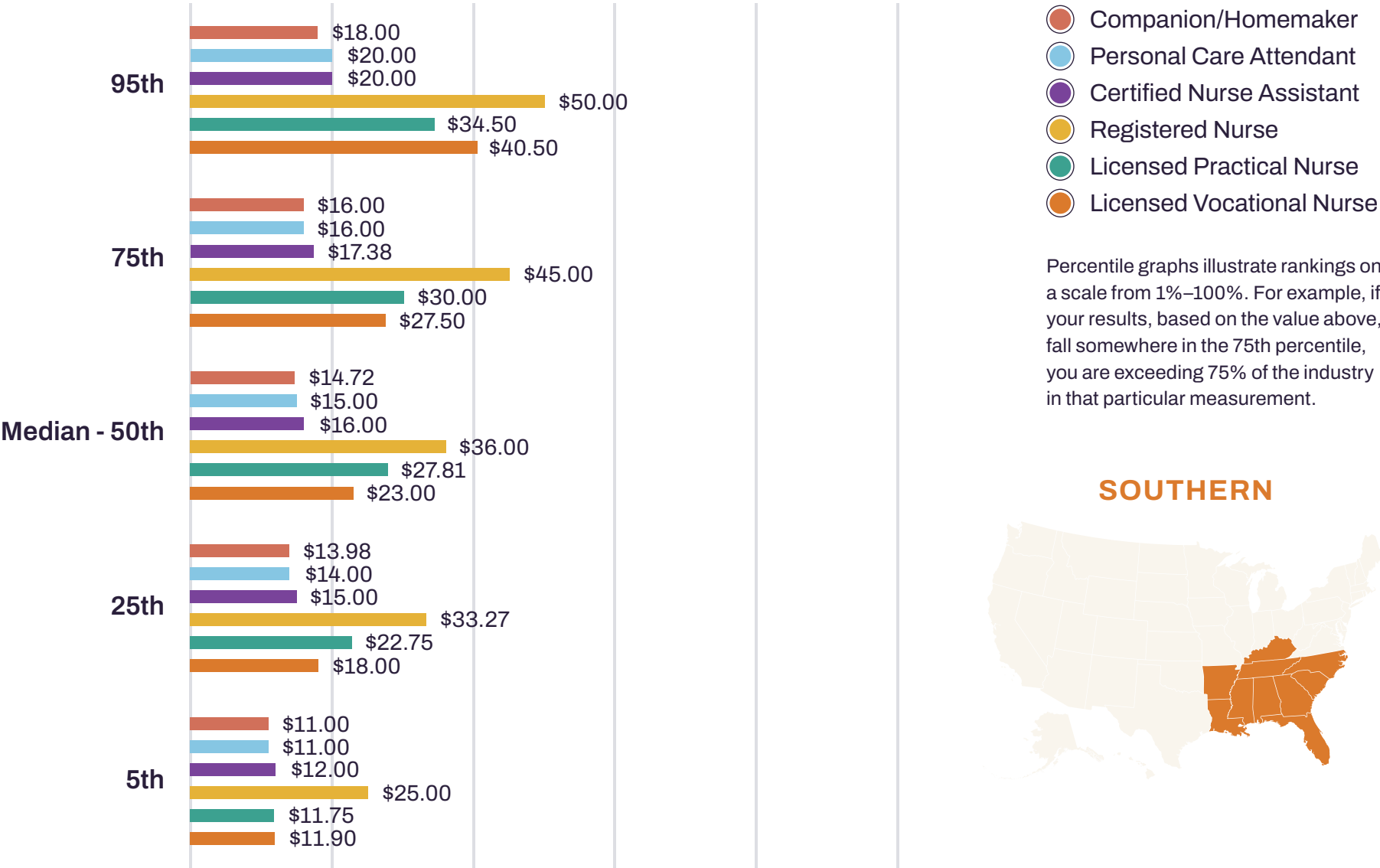
3.36 Overall Wages by Geographical Region for 2024 - Great Lakes





WAGES COMPARISON

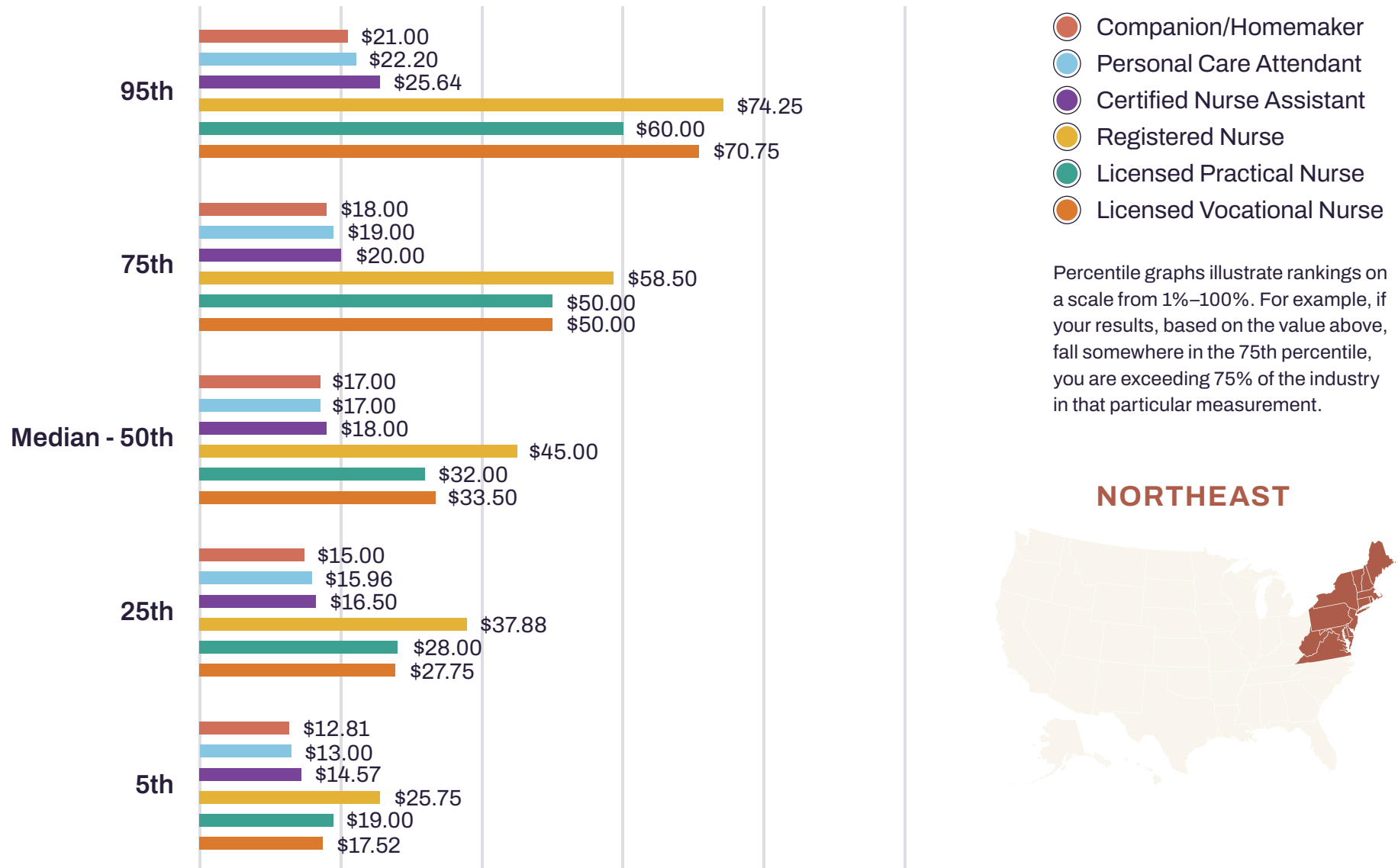
3.37 Overall Wages by Geographical Region for 2024 - Southern





WAGES COMPARISON

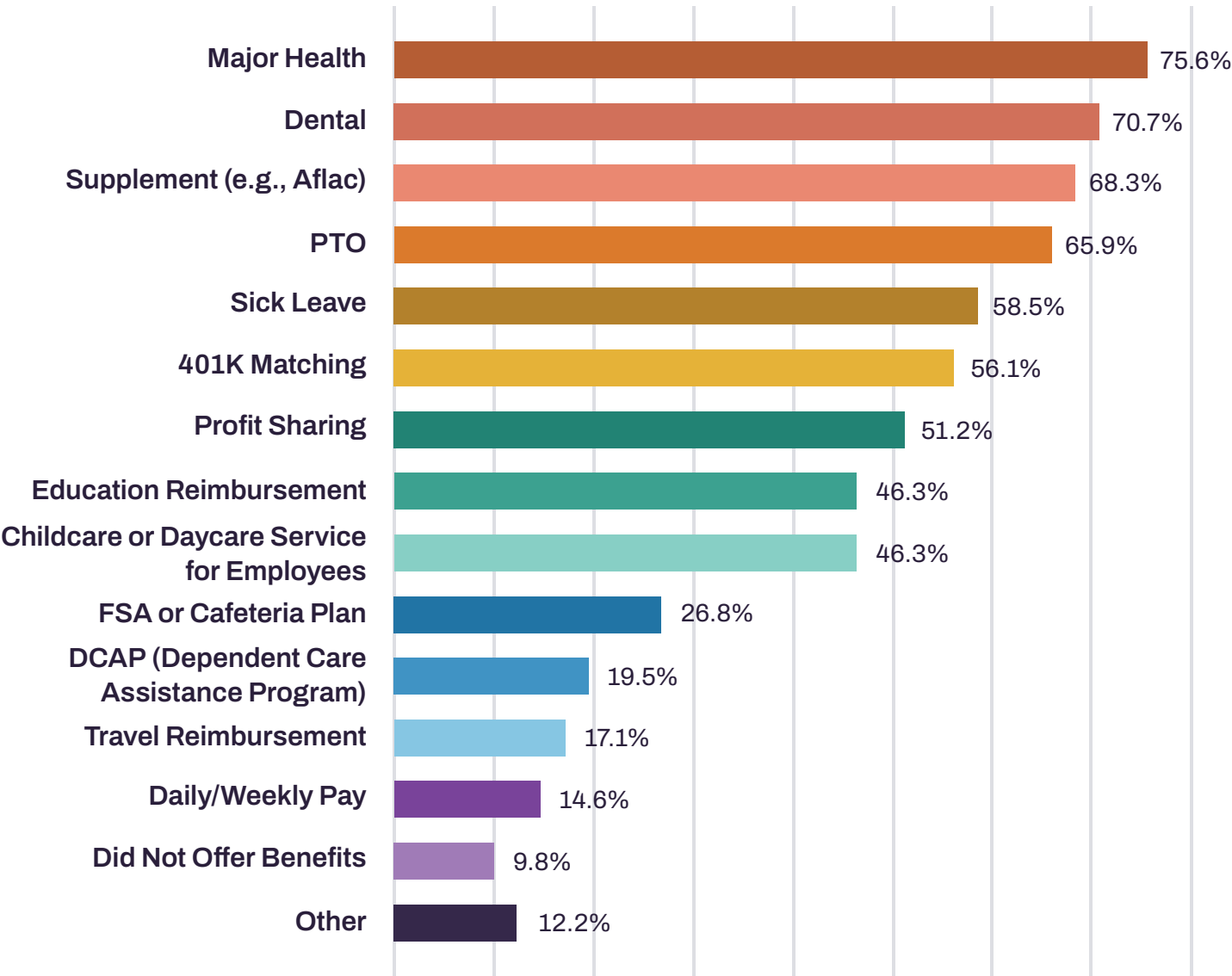
3.38 Overall Wages by Geographical Region for 2024 - Northeast





CLINICIAN BENEFITS

3.39 **Home Health** **Hospice** Clinician Benefits Provided for 2024

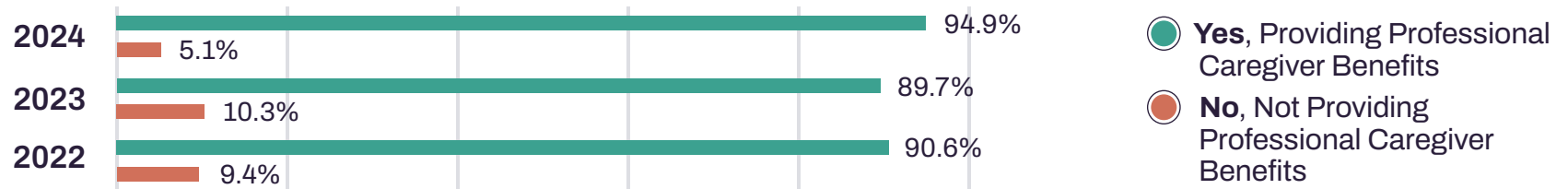


Survey participants were asked, "What types of benefits do you offer your full-time care professionals and office staff?"



PROFESSIONAL CAREGIVER BENEFITS

3.40 Home Care Historical Percentage of Agencies Providing Professional Caregiver Benefits



PROFESSIONAL CAREGIVER BENEFITS

3.41 Home Care Professional Caregiver Benefits Provided for 2024 - Overall & Revenue Ranges

Type of Benefit	\$0-799K	\$800K-1.599M	\$1.6M-2.799M	Leaders - \$2.8M-4.999M	Masters - \$5M+	2024 Overall
Daily/Weekly Pay	14.1%	26.0%	36.4%	37.5%	40.3%	30.8%
PTO	19.2%	21.9%	34.3%	32.5%	38.9%	29.2%
Dental	9.0%	16.7%	31.3%	33.8%	58.3%	28.9%
Major Health	10.3%	12.5%	28.3%	36.2%	58.3%	28.0%
Travel Reimbursement	16.7%	20.8%	31.3%	30.0%	31.9%	26.1%
Supplement (i.e., Aflac)	15.4%	16.7%	24.2%	30.0%	47.2%	25.9%
Sick Leave	20.5%	16.7%	33.3%	25.0%	34.7%	25.9%
401K Matching	12.8%	9.4%	23.2%	40.0%	43.1%	24.7%
Education Reimbursement	9.0%	13.5%	13.1%	7.5%	20.8%	12.7%
FSA or Cafeteria Plan	6.4%	3.1%	2.0%	2.5%	8.3%	4.2%
Profit Sharing	5.1%	5.2%	2.0%	3.8%	4.2%	4.0%
DCAP (Depend Care Assistance Program)	3.8%	2.1%	0.0%	0.0%	1.4%	1.4%
Childcare or Daycare Service for Employee Benefits	3.8%	2.1%	0.0%	0.0%	0.0%	1.2%
Other	2.6%	2.1%	7.1%	6.2%	12.5%	5.9%



NUMBER OF PROFESSIONAL CAREGIVERS EMPLOYED

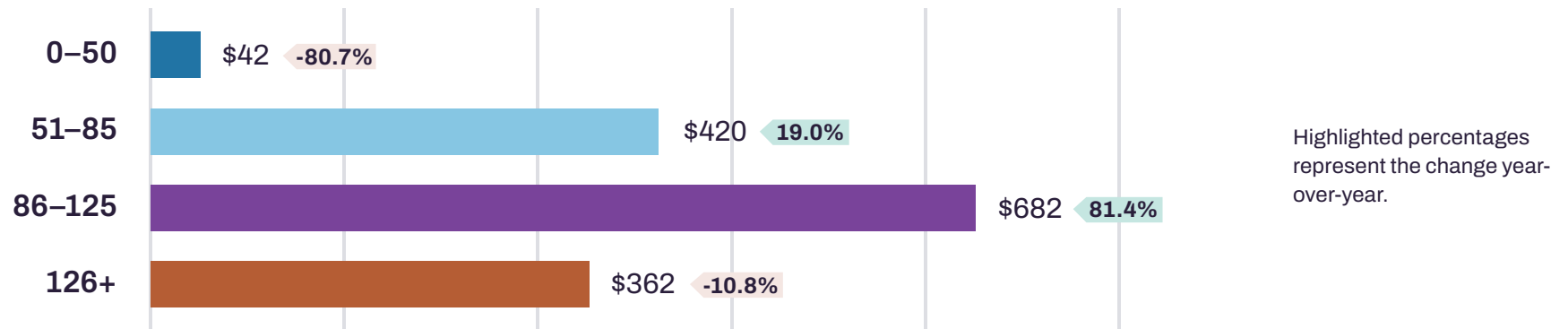
3.42 **Home Care** Professional Caregiver Benefits Provided for 2024 - Number of Professional Caregivers Employed

Type of Benefit	0–50	51–85	86–125	126+
Major Health	23.7%	46.1%	56.5%	64.2%
Dental	24.3%	46.1%	60.9%	55.2%
Supplement (i.e., Aflac)	20.2%	40.8%	47.8%	49.3%
PTO	29.5%	50.0%	52.2%	53.7%
Sick Leave	30.6%	40.8%	50.0%	40.3%
401K Matching	19.1%	39.5%	56.5%	52.2%
Profit Sharing	5.8%	3.9%	6.5%	7.5%
Education Reimbursement	15.6%	23.7%	21.7%	16.4%
Childcare or Daycare Service for Employee Benefits	5.2%	1.3%	4.3%	0.0%
FSA or Cafeteria Plan	6.9%	3.9%	8.7%	6.0%
DCAP (Depend Care Assistance Program)	2.9%	1.3%	4.3%	0.0%
Travel Reimbursement	35.8%	39.5%	39.1%	35.8%
Daily/Weekly Pay	35.8%	50.0%	54.3%	53.7%
Other	7.5%	7.9%	13.0%	10.4%



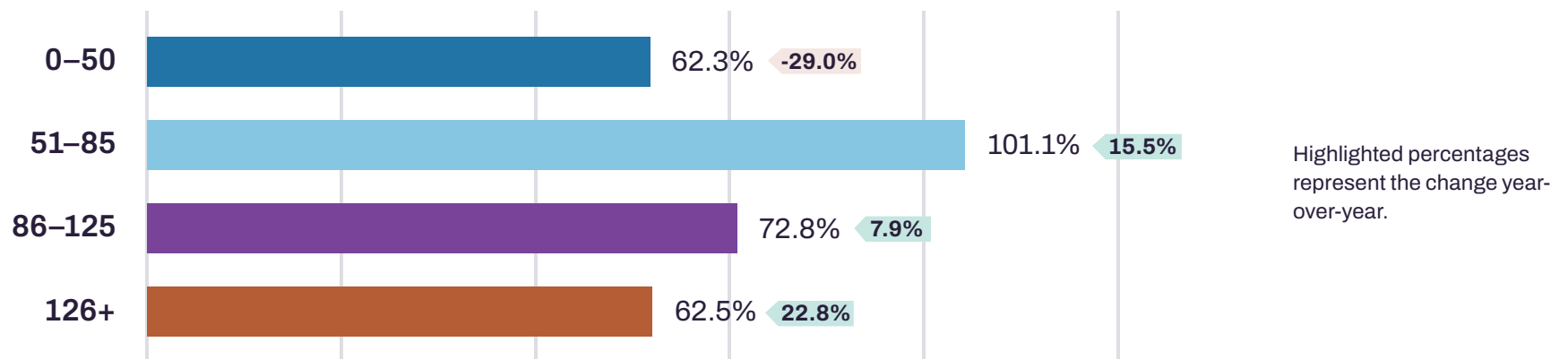
NUMBER OF PROFESSIONAL CAREGIVERS EMPLOYED

3.43 Home Care Median Professional Caregiver Acquisition Cost for 2024 - Number of Professional Caregivers Employed



NUMBER OF PROFESSIONAL CAREGIVERS EMPLOYED

3.44 Home Care Median Professional Caregiver Turnover Rate - Number of Care Professionals Employed



ARTICLE

The Onboarding Experience Report: Why Your Care Staff Are Really Leaving



Terra Vicario

Chief Client Officer
Viventium



Let's talk about care staff retention. It's not just a problem; it's a crisis in home-based care. The numbers paint a stark picture: according to the Activated Insights Benchmarking Report, almost four out of every five care employees turnover each year. Let that sink in for a moment. Now, compare that to the average [13.5% turnover rate across all US industries](#). The difference is alarming. It's a clear signal that something needs to change, and fast.

So, what can agencies do? How do we stop this worrying trend of care staff leaving the industry? How do we attract and, more importantly, retain the dedicated individuals who provide such essential care to our most vulnerable?

The First 90 Days: A Make-or-Break Period

When looking into some of the factors that have a significant impact on long-term employee retention, the first 90 days of employment are absolutely critical. Research shows that employees who have a positive onboarding experience in their first three months are [10 times more likely to stay with the organization](#) long-term—it's a powerful indicator of the impact onboarding has on retention. A well-structured, supportive onboarding process isn't just a nice-to-have; it's a must-have for any agency serious about retaining its care staff.

But what does "good" onboarding really look like in the world of home-based care? That's the question that drove [our Viventium Onboarding Experience Report](#).



Providers know that exceptional onboarding is important in theory, but until now, there was no research on the specific challenges and opportunities within the home-based care industry. So, we decided to dig deeper and find some real answers.

As the leader in home care payroll and HR, we suspected that there was a significant disconnect between how care staff and administrators perceive the onboarding process. We hypothesized that while admins might believe they're providing a good onboarding experience, caregivers might feel differently. To test this theory, we conducted a comprehensive survey of 175 administrators and 220 caregivers working in the healthcare industry across the United States. We wanted to gain real, actionable insights into the current state of onboarding and identify specific areas where we can make things better for *everyone* involved.

The Shocking Truth: “Good” Isn’t Nearly Good Enough

Our research ended up revealing a concerning truth. While 63% of care staff initially described their onboarding experience as “good” or “excellent,” a deeper analysis revealed a startling reality: the bar for

“A well-structured, supportive onboarding process isn’t just a nice-to-have; **it’s a must-have for any agency serious about retaining its care staff.**”

what was considered “good” was alarmingly low. Only 41% of surveyed care staff reported even receiving a warm welcome during the onboarding process. This lack of a welcoming atmosphere sets a negative tone from the very beginning and can significantly impact an employee’s sense of belonging and value within the organization.

Our survey also revealed that only 40% of care staff felt that communication during onboarding was clear and transparent. This lack of clear communication leads to confusion, frustration, and a feeling of being unprepared for the job. As a result, only 38% of caregivers believed that their questions were answered promptly and helpfully, which can create a sense of isolation and a lack of support. Finally, only 29% of employees felt that their onboarding process was structured and well-organized, leading to feelings of chaos and uncertainty.

These numbers paint a clear picture: even when care staff say their onboarding was acceptable, the underlying standards are simply not high enough.

And this low bar is hurting everyone involved—caregivers, organizations, and, ultimately, the people they serve.

Onboarding: The Key to Unlocking Retention

So, does onboarding *really* have a significant impact on care staff retention? The answer is a resounding YES!

Our research revealed that how care staff perceive their onboarding experience has a huge influence on their long-term perception of their employer and their likelihood of staying with the company.

To further analyze this connection, we divided the agencies surveyed into two groups: “Onboarding Leaders” (agencies where care staff reported positive onboarding experiences) and “Onboarding Laggards” (agencies with less positive feedback). The differences between these two groups highlighted the significant impact of effective onboarding:

- **Sense of Security:** A remarkable 83% of care staff in the Onboarding Leaders group reported feeling “secure” or “very secure” in their employment, compared to a mere 44% of those in the Onboarding Laggards. A strong onboarding process instills a sense of stability and confidence in employees from the outset.
- **Work-Life Balance:** An impressive 90% of care staff in the Onboarding Leaders group felt they had a good work-life balance, compared to only 34% of those in Onboarding Laggards. Providers that prioritize a well-structured and communicative onboarding



“Only 41% of surveyed care staff reported even receiving a warm welcome during the onboarding process.”



experience see care staff who understand the benefits of working for them, and how to begin utilizing those benefits right away.

- **Active Job Searching:** Only 29% of care staff in the Onboarding Leaders group were actively or passively searching for new jobs, which is significantly lower than the 46% of those in Onboarding Laggards. Effective onboarding not only significantly reduces turnover, it also increases employee loyalty.

Onboarding isn't just a formality used to sign legal documents; it's a powerful tool for building a strong, engaged, and stable workforce. It sends a clear message to your employees from day one that your company is invested in their success and well-being.

Taking Action: Control What is In Your Control

While industry-wide retention problems might sometimes feel out of your control, you have the power to control your onboarding process and create a positive experience for your care staff! Investing in onboarding isn't just about improving numbers on a spreadsheet; it's about investing in the people who dedicate their lives to caring for others.

When your care staff feel valued, supported, and prepared, they are proven to be better equipped to provide high-quality care to your clients—creating a ripple effect for everyone in your company and community.

The care staff retention crisis is a complex challenge, but it's not insurmountable. By taking control of your onboarding process and prioritizing the well-being and success of your employees, you can make a significant difference. You can create a culture of support, engagement, and retention that not only benefits your business but also elevates the entire home-based care industry. 

ABOUT THE AUTHOR

Terra Vicario is the Chief Client Officer at [Viventium](#). With 20 years of experience in the HCM industry, she's held various leadership positions in go-to-market functions. Terra has spoken on a variety of topics surrounding caregiver workforce trends, like pay, onboarding, training, culture, and more. She has made guest appearances on webinars and interviews hosted by Polsinelli, MissionCare Collective, McKnights, PHA, SNN, and DailyPay. She has hosted countless other Viventium webinars, including a three-part series entitled *The Hierarchy of Caregivers Needs*. Terra has published articles in *Fast Company*, *TLNT*, and *Recruiting Daily*. She believes an employee's work experience significantly impacts their overall well-being and is confident that helping agencies and facilities raise the bar will have a lasting impact on the post-acute care industry.

The Loyal Healthcare Worker: Using the Role of Applicant Sentiment in Retaining Talent



Alex Nault

Director of Healthcare
Business Development
Hireology



“89% of healthcare job seekers are **actively exploring** new roles.”

This year, healthcare organizations are navigating an increasingly competitive hiring market. As we wrapped up 2024, we saw demand soar for skilled healthcare professionals in the [Bureau of Labor Statistics \(BLS\) Report](#). Today, healthcare leaders continue to face immense pressure to attract and retain top talent. The stakes couldn't be higher—staffing shortages don't just impact operations; they affect the quality-of-care patients receive, organizational growth, and financial success.

At [Hireology](#), we've spent years studying the mindset of healthcare job seekers and how their expectations shape the talent landscape. In our most recent report, [The Loyal Healthcare Worker](#), we uncover trends and actionable strategies to help healthcare organizations

better understand applicant sentiment, refine hiring processes, and meet job seeker priorities. This guide offers a roadmap for healthcare leaders to attract and retain the best people in 2025 and beyond.

Let's dive into these key findings and strategies to help your organization stay ahead of the healthcare industry's ever-increasing supply and demand:

1. Healthcare Job Seekers Are Loyal but Selective

Healthcare professionals are deeply committed to their industry—95.5% of candidates express loyalty to the healthcare field, and 77% feel loyal to their current employer. But here's the catch: many are still open to

“Today’s healthcare job seekers aren’t just browsing job boards—they’re conducting **detailed research across multiple platforms** to find the right fit.”

new opportunities. In fact, 89% of healthcare job seekers are actively exploring new roles. However, they’re not just looking for a paycheck—they’re being selective and strategic, prioritizing roles and organizations that align with their values and goals.

Research in *The Loyal Healthcare Worker* identified three key motivators driving healthcare job seekers to make a move:

- Better Pay (60%)
- Career Growth or Skill Development (46%)
- Schedule Flexibility (29%)

This selectiveness speaks to a broader trend: healthcare professionals are no longer willing to compromise on what matters most to them. Whether it’s salary, growth opportunities, or work-life balance, job seekers seek roles that reflect their priorities.

Actionable Strategies for Healthcare Administrators:

Ensure your business is reflecting the priorities of your top candidates on the market:

1. **Promote Your Employer Brand:** Consider how you market your healthcare services to patients, and market your workplace to potential talent the same way. Highlight what makes your organization unique, including your career growth opportunities, supportive work culture, and flexibility.
2. **Revamp Your Benefits Packages:** Salary is important but not the only factor. Consider offering benefits that address work-life balance, career development, and recognition. Use job postings, and your career site, to showcase these offerings in a way that resonates with candidates.

3. **Tailor Your Job Descriptions:** Craft job postings that reflect the values and priorities of today’s candidates. Use inclusive, engaging language that reflects your organization’s mission and commitment to employee well-being.

2. Providers with Speed and Streamlined Communication Have a Competitive Edge

Healthcare job seekers are eager to find their next role quickly, but lengthy, inefficient hiring processes are turning them off:

Our research in *The Loyal Healthcare Worker* found that:

- 65% of healthcare job seekers have abandoned a job application because it took too long to complete.
- 90% want to be interviewed within a week or less after applying.
- 67% expect active employer communication at least every two to three days.
- 58% of healthcare job seekers use smartphones as their primary tool for job searching.
- 60% of applicants check text messages more frequently than email.

These findings underscore the importance of creating a seamless, candidate-friendly hiring experience. Considering this applicant feedback, explore strategies to act quickly and provide a positive candidate experience. Our research should serve as a wake-up call for healthcare administrators.

Actionable Strategies for Healthcare Administrators:

To attract and retain top talent in 2025, the hiring process needs to be improved to provide a seamless, candidate-friendly experience:

1. **Streamline Your Application Process:** Cut unnecessary steps from your application process, such as requiring users to create accounts or re-enter the same information multiple times.





2. **Optimize for Mobile:** Ensure your application system is mobile-friendly and intuitive. Many candidates expect their job search experience to mirror the convenience of other mobile apps they use daily.
3. **Communicate Regularly:** Use text messaging, in addition to email, to keep candidates engaged throughout the process. Set clear expectations for response times and follow up consistently.
4. **Identify Bottlenecks:** Use hiring analytics to determine where candidates drop out of your application process and quickly address these barriers to improve conversion rates.

3. Enhanced Sourcing Tactics and Employer Branding Boost Candidate Engagement

Today's healthcare job seekers aren't just browsing job boards—they're conducting detailed research across multiple platforms to find the right fit. In our *The Loyal Healthcare Worker Report*, we found that:

- 85% of healthcare job seekers use job boards like Indeed or ZipRecruiter as part of their search.
- 52% name the prospective company's website as their top source of information.
- When deciding whether to apply, job seekers consider several key factors:
 - 74% of job seekers rely on clear job descriptions
 - 50% consider overall company benefits
 - 44.5% evaluate career growth opportunities

In other words, your organization's online presence matters. Whether scrolling through job boards or visiting your career site, candidates expect to see detailed, compelling information about what you offer as an employer.

“To attract and retain top talent in 2025, **the hiring process needs to be improved** to provide a seamless, candidate-friendly experience.”



Actionable Strategies for Healthcare Administrators:

In 2025, it will be crucial for healthcare administrators to grasp the importance of their employer branding, and the need to enhance their online presence to attract top talent:

1. **Enhance Your Career Page:** Showcase your job descriptions while prominently explaining your company's benefits and career growth opportunities. Your website should answer the candidates' questions and demonstrate why your organization is the best choice.
2. **Create a Multi-Channel Strategy:** Use job boards, social media, and email newsletters to reach diverse talent pools. Consistency across channels is key—ensure your messaging reflects your employer brand no matter where candidates encounter your organization.

4. Tapping into Talent Networks Harnesses the Power of Referrals

Referrals remain one of the most effective ways to source talent in healthcare. Candidates trust recommendations from people they know, and positive experiences can turn current employees into powerful advocates for your organization. According to our *The Loyal Healthcare Worker*:

- 93% of candidates would refer a friend or family member to an organization where they've had a positive experience.
- 80% would consider returning to a previous employer.
- 93% are more likely to apply for a job if a trusted contact recommends the company.



Actionable Strategies for Healthcare Administrators:

Prioritize building your network of referrals:

1. Implement an Employee Referral Program: Reward current employees for referring qualified candidates. Referral programs pack a one-two punch: strengthening your talent pipeline and boosting morale among your existing team.
2. Maintain a Deep Talent Pool: Keep track of past applicants and employees for future opportunities. A strong database of qualified candidates can save time and reduce recruitment costs.

Looking Ahead: Shaping the Future of Hiring

The challenges of hiring in the healthcare workforce aren't going away, but they do present a window of

opportunity for organizations willing to adapt. Not only are modern healthcare job seekers tech-savvy, selective, and value loyalty, they expect employers to meet them halfway with transparency, speed, and meaningful benefits. For healthcare administrators and CEOs, this means taking a pause to revamp hiring strategies to better align with candidate expectations in 2025.

With these insights, your organization can build a skilled team that is ready to drive improved patient outcomes and long-term organizational success. By understanding healthcare applicant sentiment, embracing data-driven hiring processes, and investing in your employer brand, your organization can meet the challenges of today's hiring landscape and prepare for the future.

Take the first step today—and start [building a workforce](#) that will power your organization into the future. 

ABOUT THE AUTHOR

As Director of Healthcare Business Development at [Hireology](#), **Alex Nault** leads efforts to drive growth and build partnerships in the post-acute care sector. He works closely with key accounts, develops strategies for business expansion, and represents Hireology at industry events. In addition, Alex manages the full deal process, nurtures strategic partnerships, and collaborates across departments to contribute to the company's success.



“Healthcare professionals are **no longer willing to compromise on what matters most** to them. Whether it's salary, growth opportunities, or work-life balance, job seekers seek roles that reflect their priorities.”



Struggling to hire fast enough?

Top candidates don't wait. If your hiring process is slow, you're losing talent before you even get a chance to connect.

Recruit automates the heavy lifting—outreach, scheduling, and follow-ups—so you can focus on what really matters: hiring the *right* people. With a **70% faster hiring process**, Recruit ensures you connect with top talent before the competition does. No more delays, no more missed opportunities—just the right people, in the right roles, when you need them.



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SUMMARY

Training

Until recently, the biggest complaint in home-based care centered around a lack of adequately trained employees. Now, while customers praise the skill and dedication of your care staff, many employees still feel unprepared to meet increasingly complex patient needs. The Training section is designed to help you benchmark your program against industry standards, pinpoint areas for improvement, and ensure your team is fully supported. By harnessing these insights, you can ensure that your training plan drives compliance, boosts staff confidence, curtails turnover, and ultimately elevates care outcomes.

Section Contents

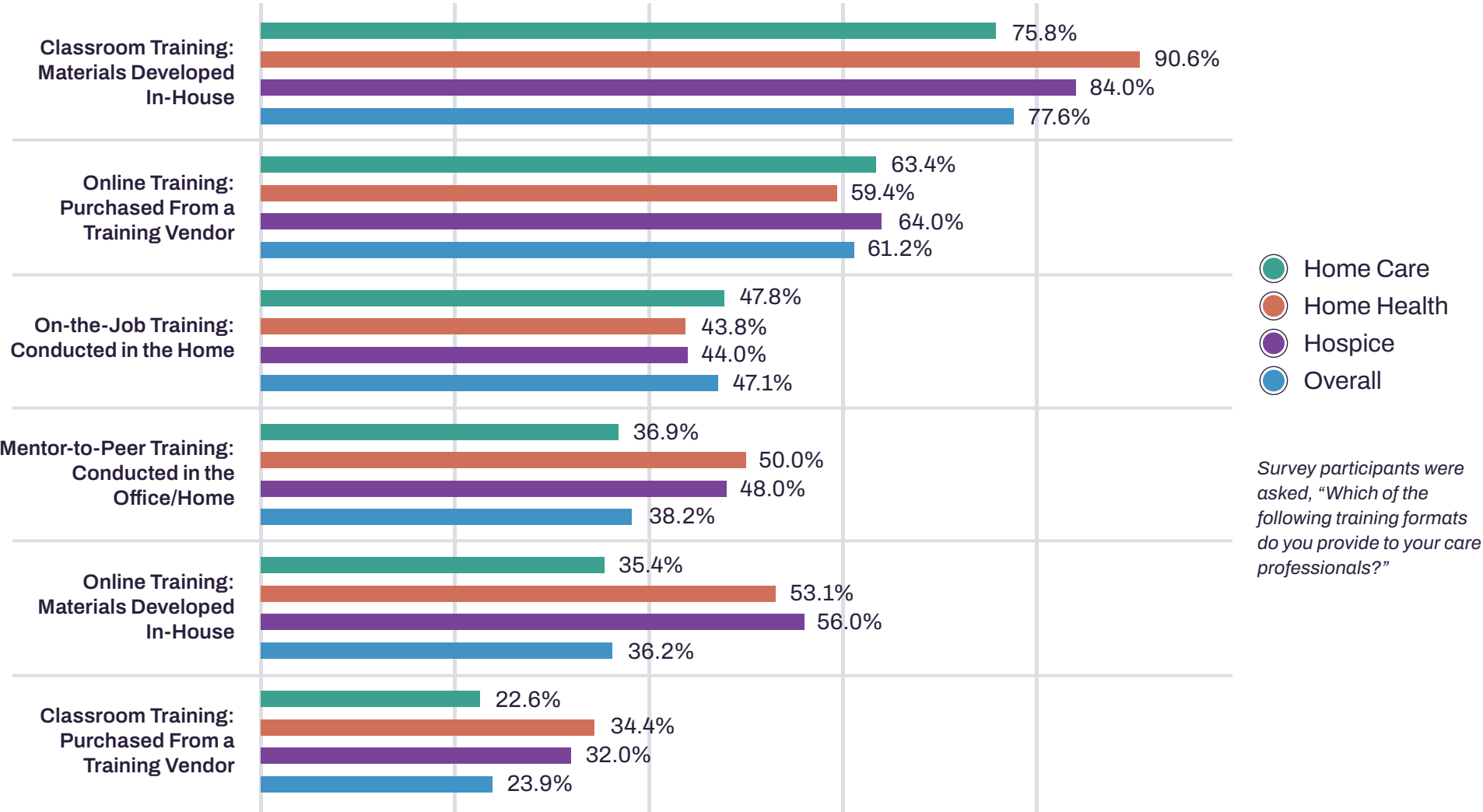
- 96** Training Type Used
- 100** Professional Training Programs
- 101** Training Hours
- 109** Training Topics
- 110** Continuing Education
- 110** Patient-Centered Care
- 111** Training Plan
- 111** Career Ladder
- 112** Care Staff Preparation

ARTICLE

- 114** *Training That Bridges Recruitment to Retention and Drives Agency Success*

TRAINING TYPE USED

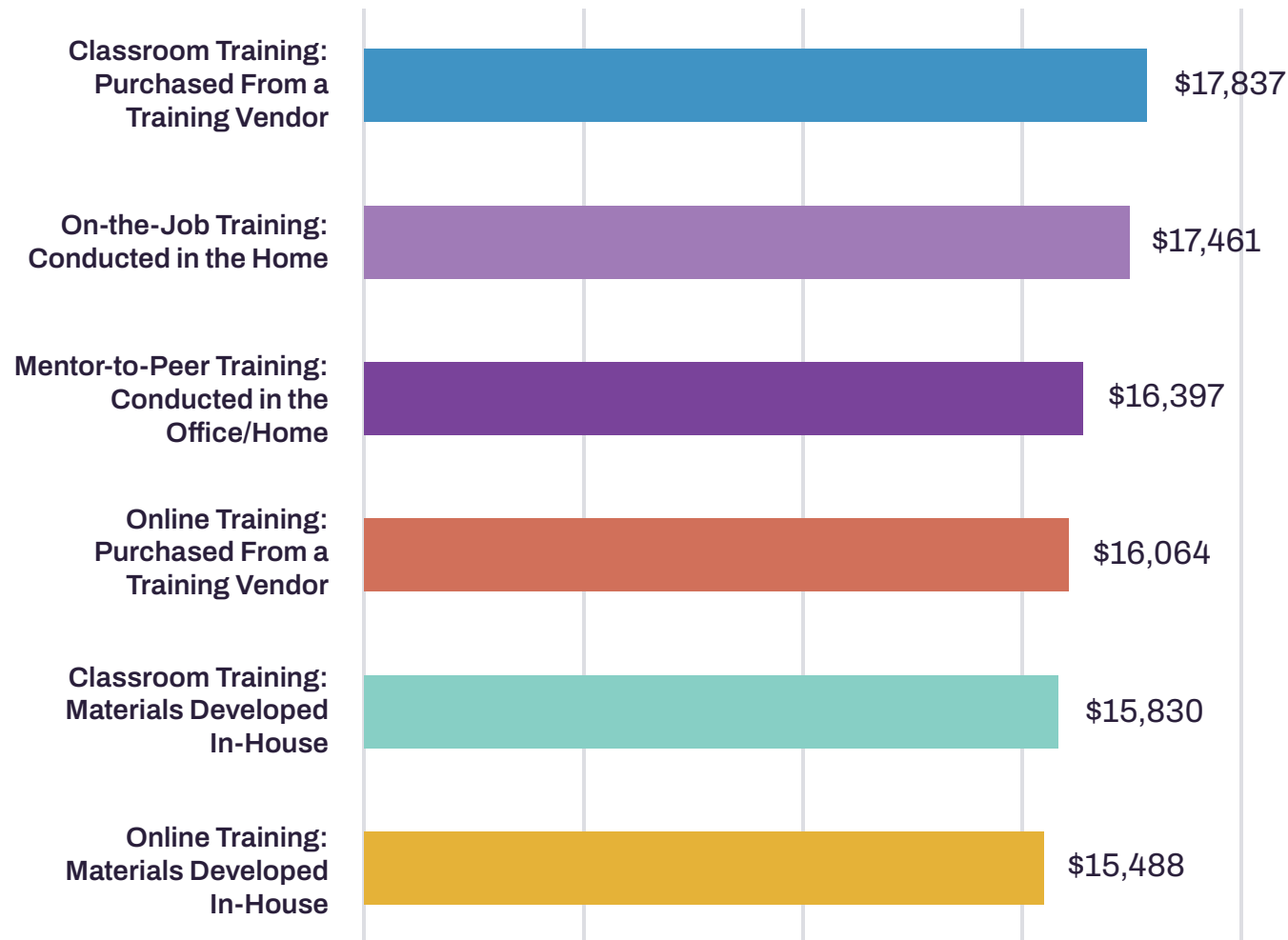
4.1 Overall Training Type Used in 2024 - Line of Business





TRAINING TYPE USED

4.2 **Home Care** Median Revenue Per Professional Caregiver Employee - Training Type Used in 2024



To calculate the Revenue Per Professional Caregiver, divide your **annual revenue** by the **number of care professionals employed** in the same year.

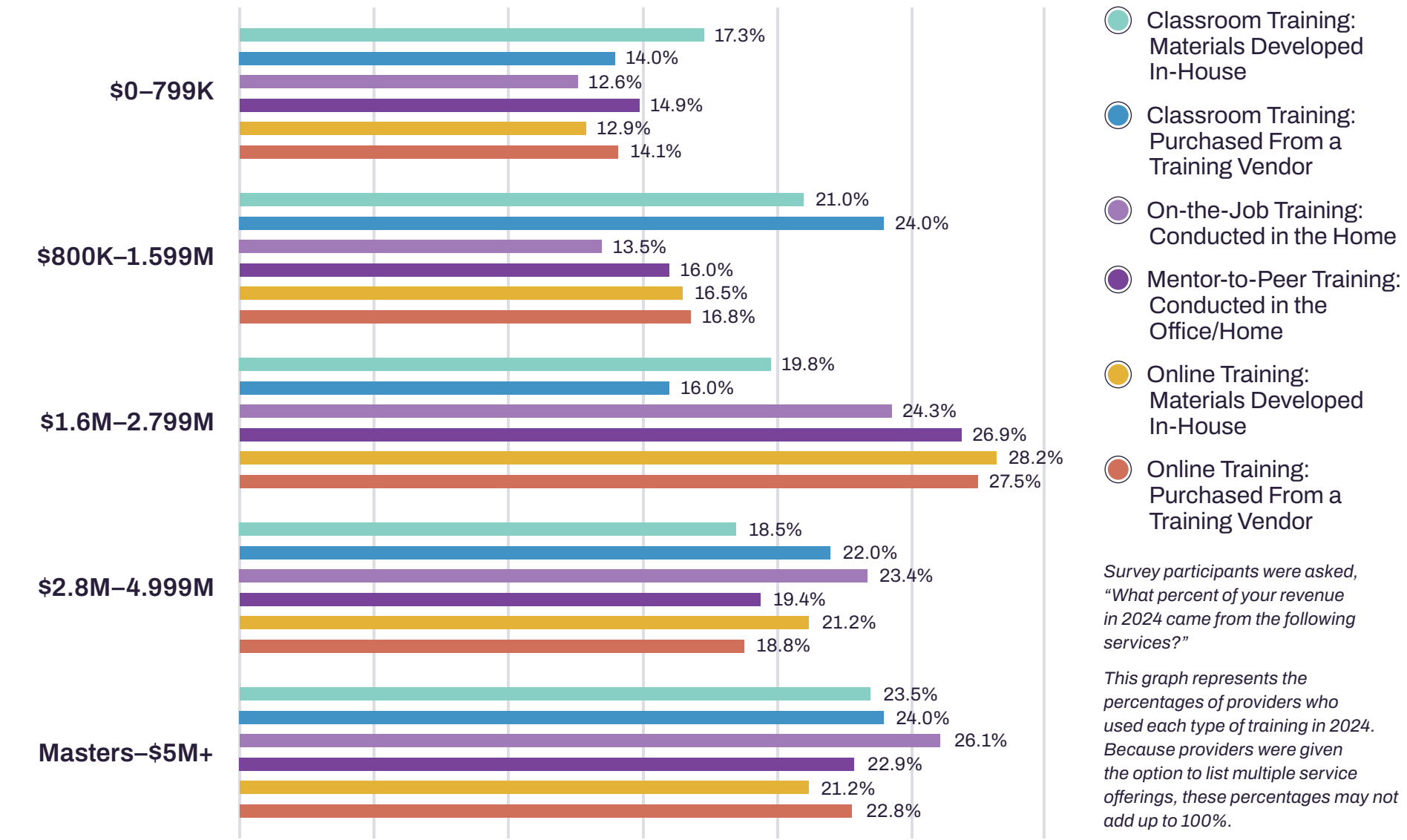
See **page 8** for a definition of Revenue Per Professional Caregiver Employee Calculation.

TRAINING TYPE USED

4.3

Home Care

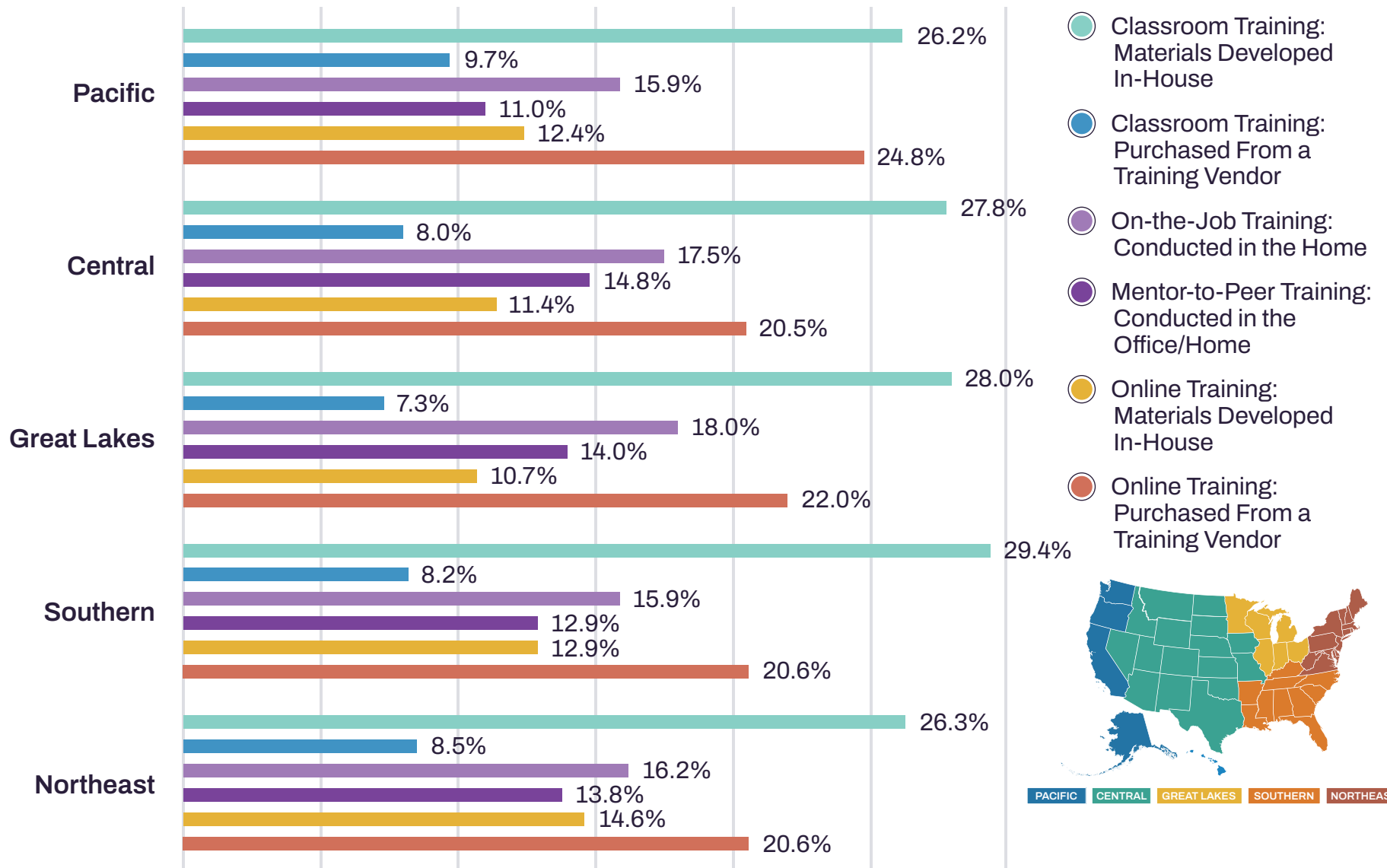
Training Type Used in 2024 - Revenue Range





TRAINING TYPE USED

4.4 Overall Training Type Used in 2024 - Geographic Regions



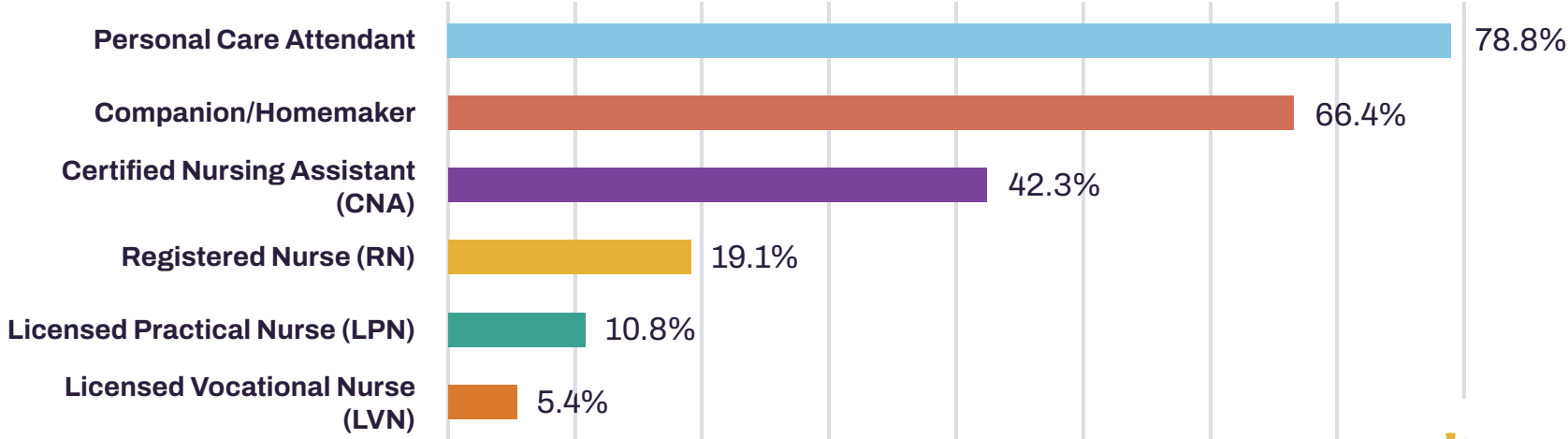
PROFESSIONAL TRAINING PROGRAMS

4.5 Overall Percentage of Agencies Who Used a Professional Training Program in 2024 - Line of Business



PROFESSIONAL TRAINING PROGRAMS

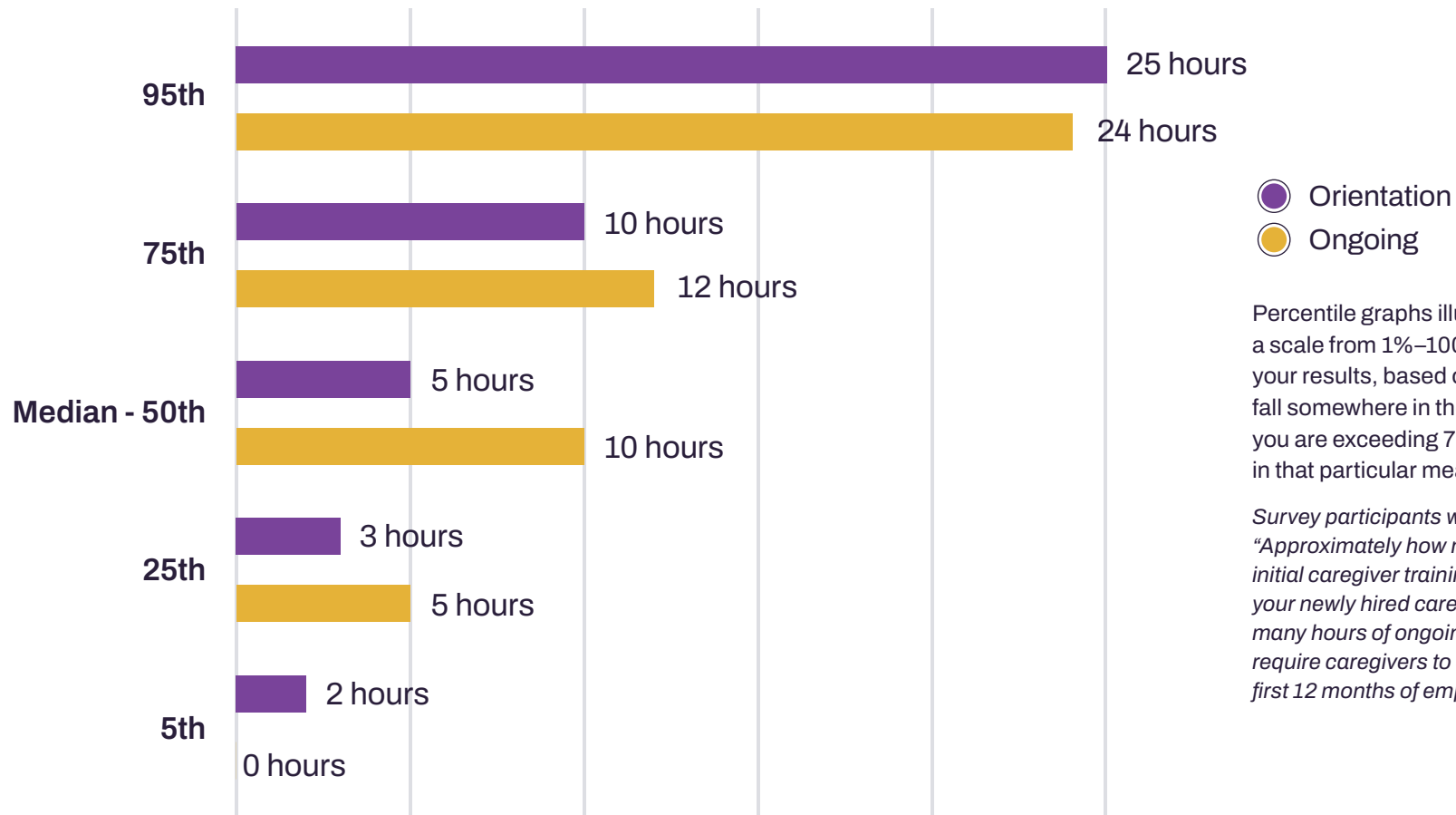
4.6 Overall Percentage of Agencies Who Used a Professional Training Program in 2024 by Role





TRAINING HOURS

4.7 Home Care Number of Professional Caregiver Training Hours for 2024 - Percentile Ranking

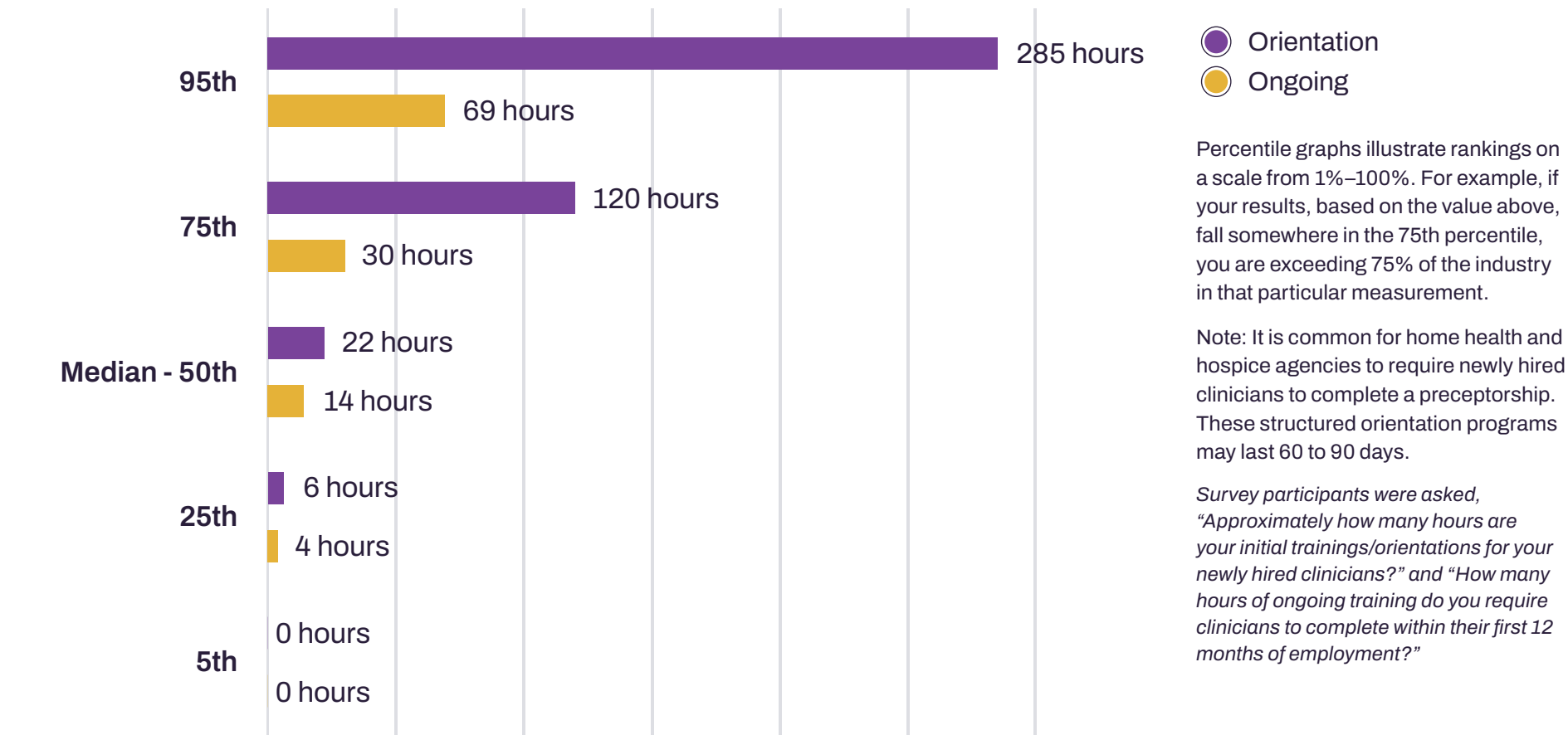


Percentile graphs illustrate rankings on a scale from 1%–100%. For example, if your results, based on the value above, fall somewhere in the 75th percentile, you are exceeding 75% of the industry in that particular measurement.

Survey participants were asked, "Approximately how many hours are your initial caregiver trainings/orientations for your newly hired caregivers?" and "How many hours of ongoing training do you require caregivers to complete within their first 12 months of employment?"

TRAINING HOURS

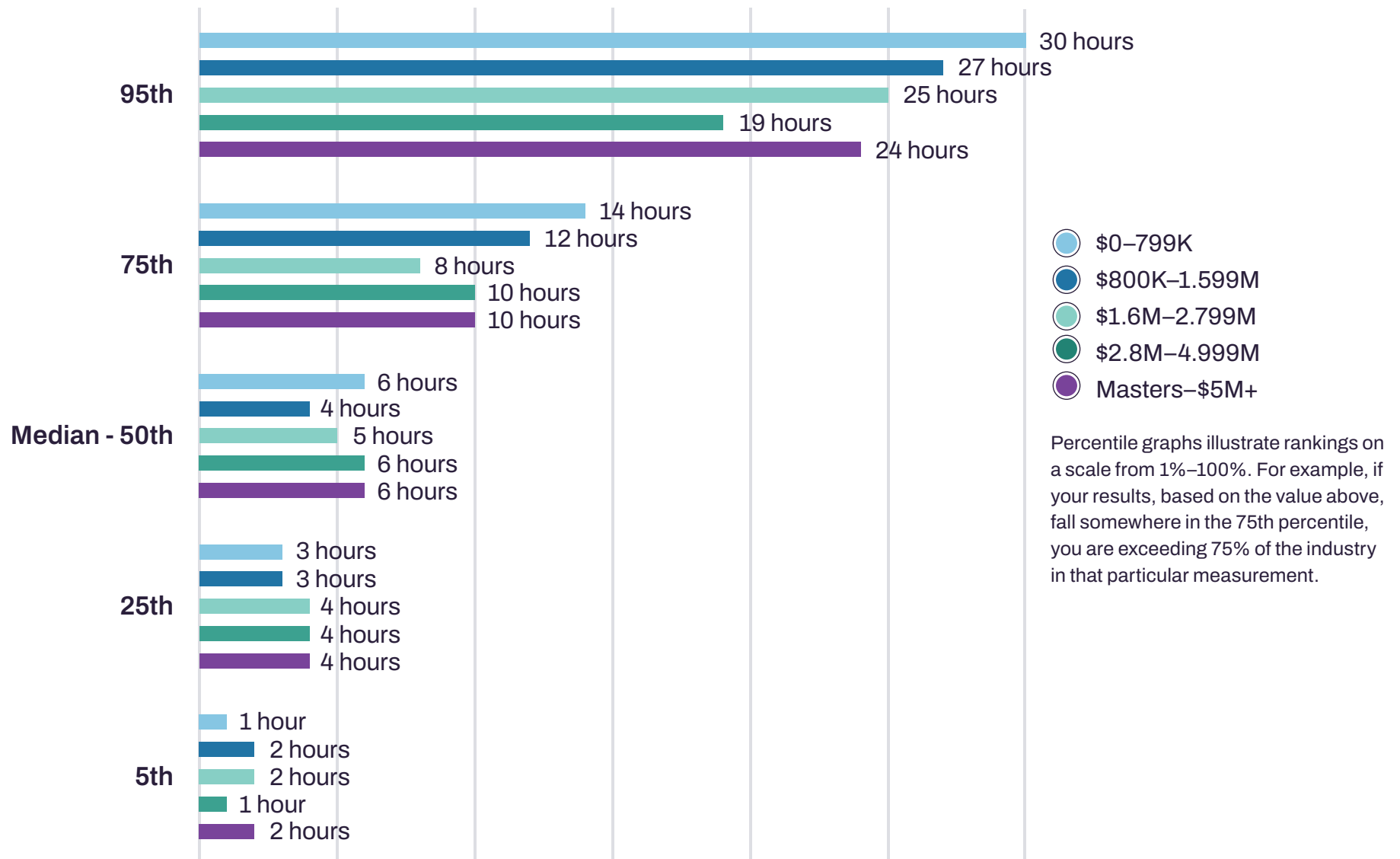
4.8 **Home Health** **Hospice** Number of Clinician Training Hours for 2024 - Percentile Ranking





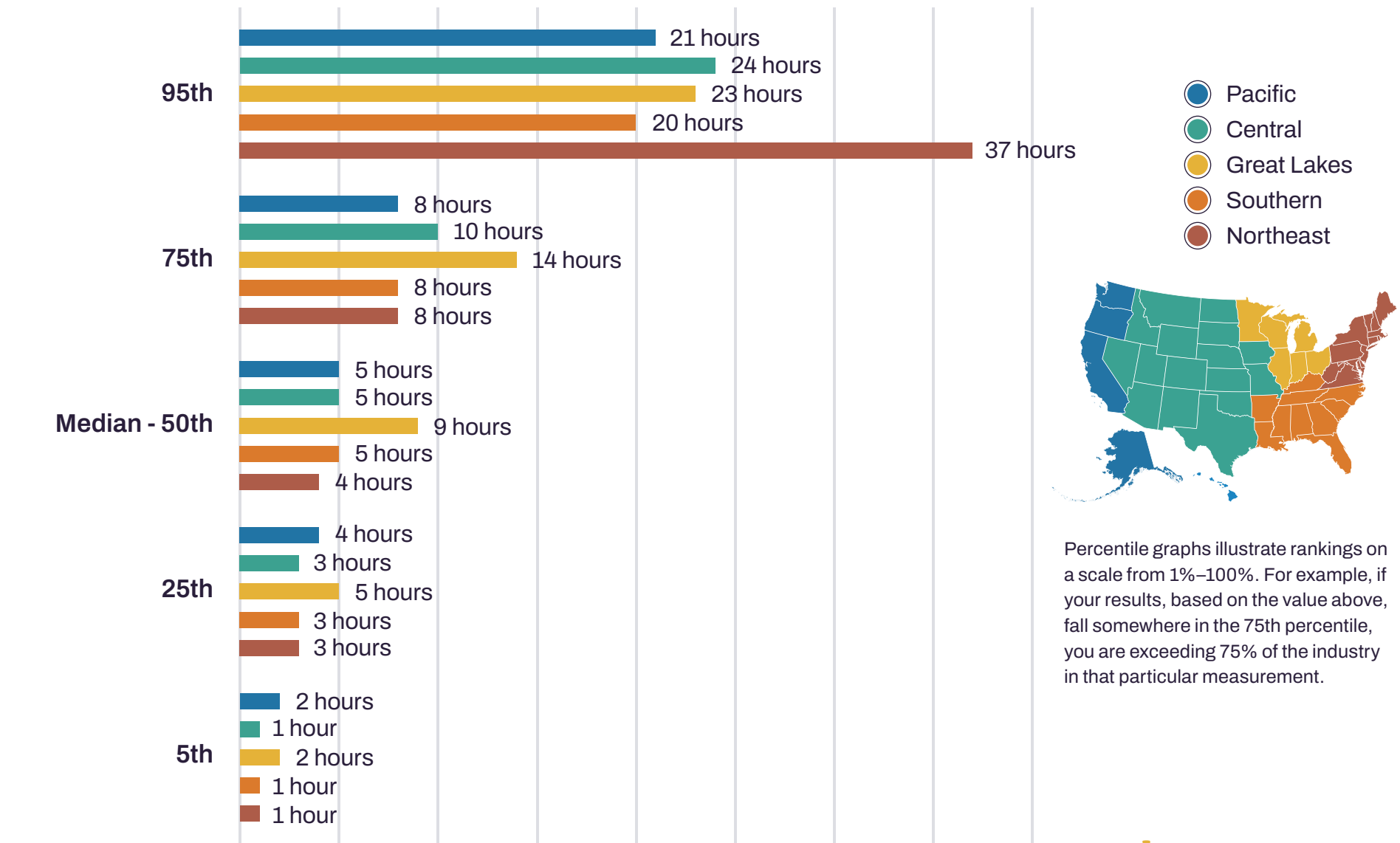
TRAINING HOURS

4.9 Home Care Number of Professional Caregiver Orientation Training Hours for 2024 - Revenue Range



TRAINING HOURS

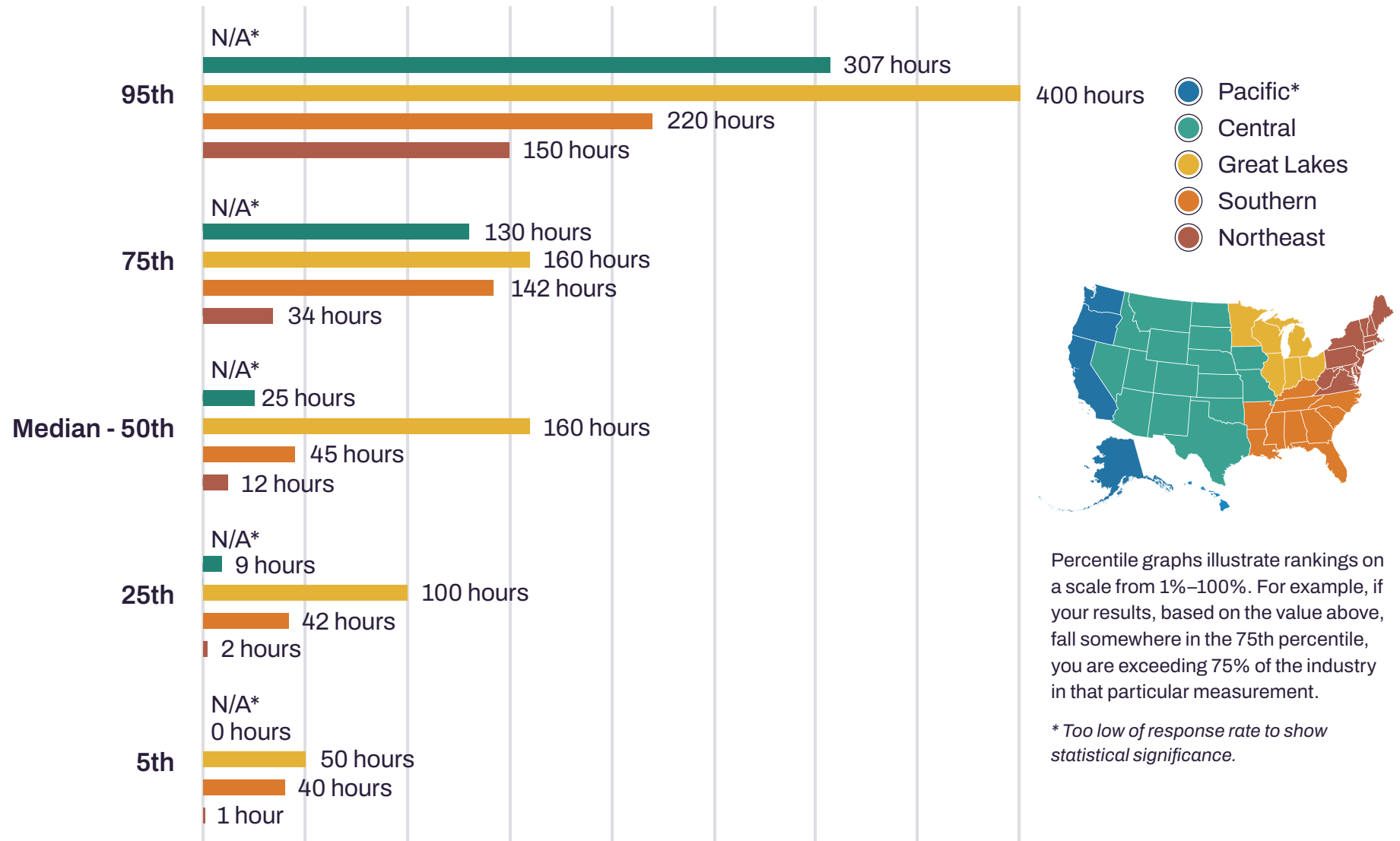
4.10 **Home Care** Number of Professional Caregiver Orientation Training Hours for 2024 - Geographic Regions





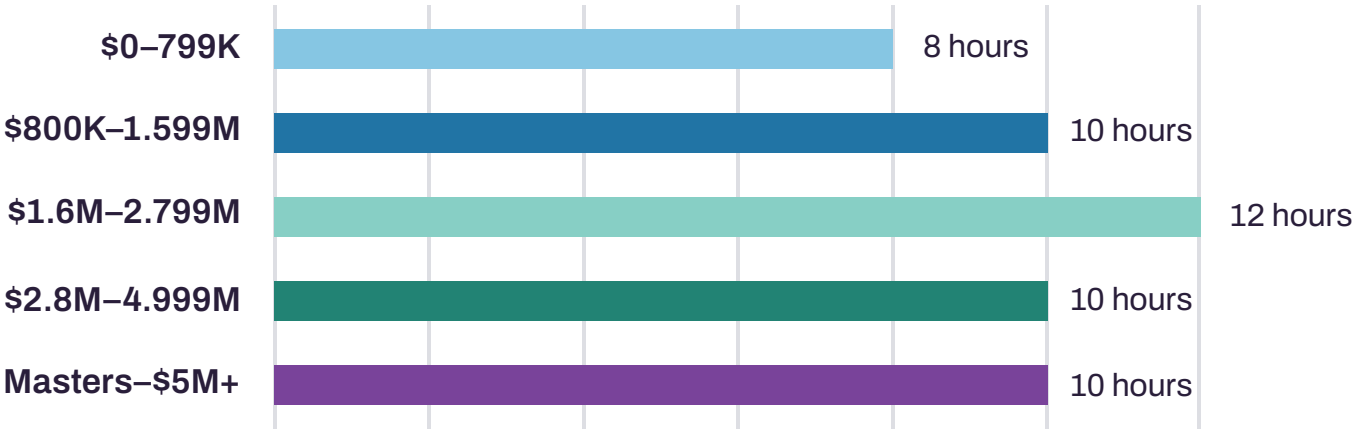
TRAINING HOURS

4.11 **Home Health Hospice** Number of Clinician Orientation Training Hours for 2024 - Geographic Regions



TRAINING HOURS

4.12 **Home Care** Median Number of Ongoing Professional Caregiver Training Hours for 2024 - Revenue Range

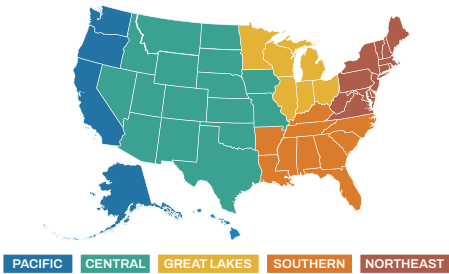
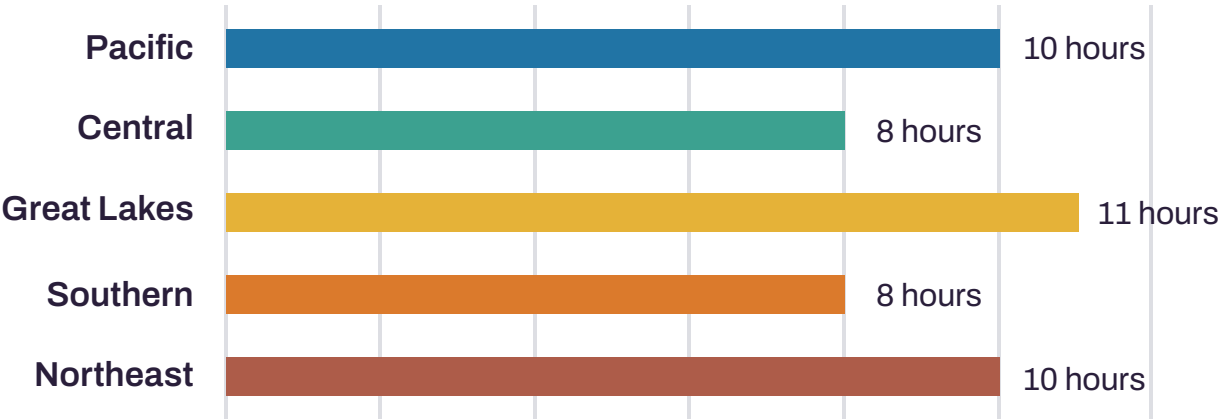


Beyond the Data

Each home care agency has a unique combination of training requirements based on state, federal, accrediting body, and payor source regulations. Activated Insights Training monitors these regulations continuously and builds each agency a highly customized training curriculum. You can [download your state regulations report](#) and discuss any additional training needs with your Activated Insights Training advisor.

TRAINING HOURS

4.13 **Home Care** Median Number of Ongoing Professional Caregiver Training Hours for 2024 - Geographic Region

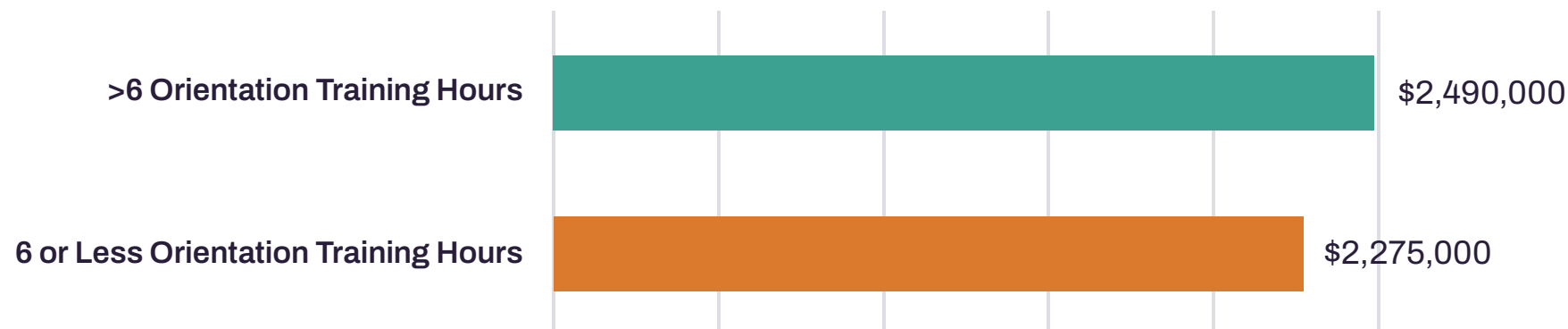


Since there is no federal requirement for professional caregiver training, training requirements vary widely by state, from no requirement at all up to 75 hours. This wide variance in requirements likely affects the median orientation and ongoing training hours for each region.



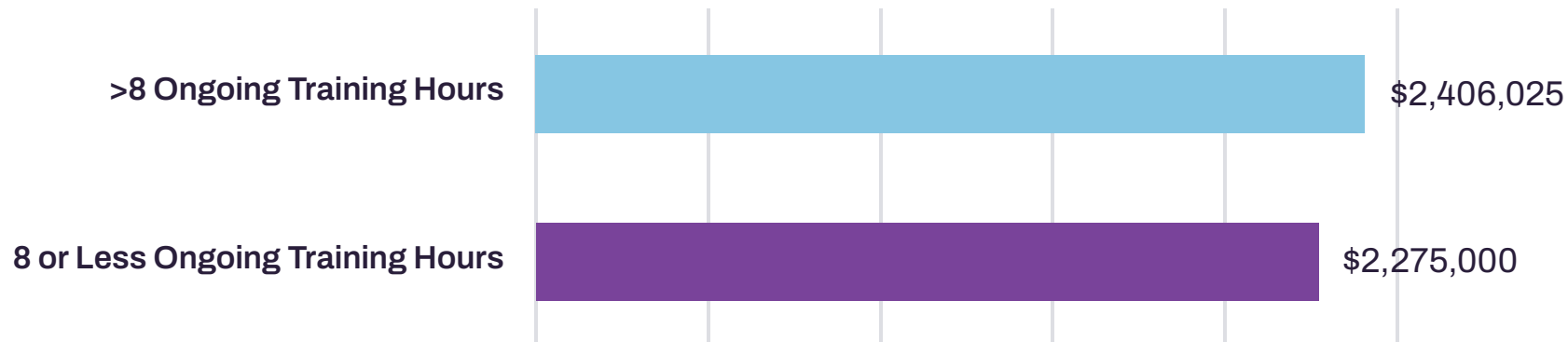
TRAINING HOURS

4.14 Home Care Median Revenue by Orientation Training Hours for 2024



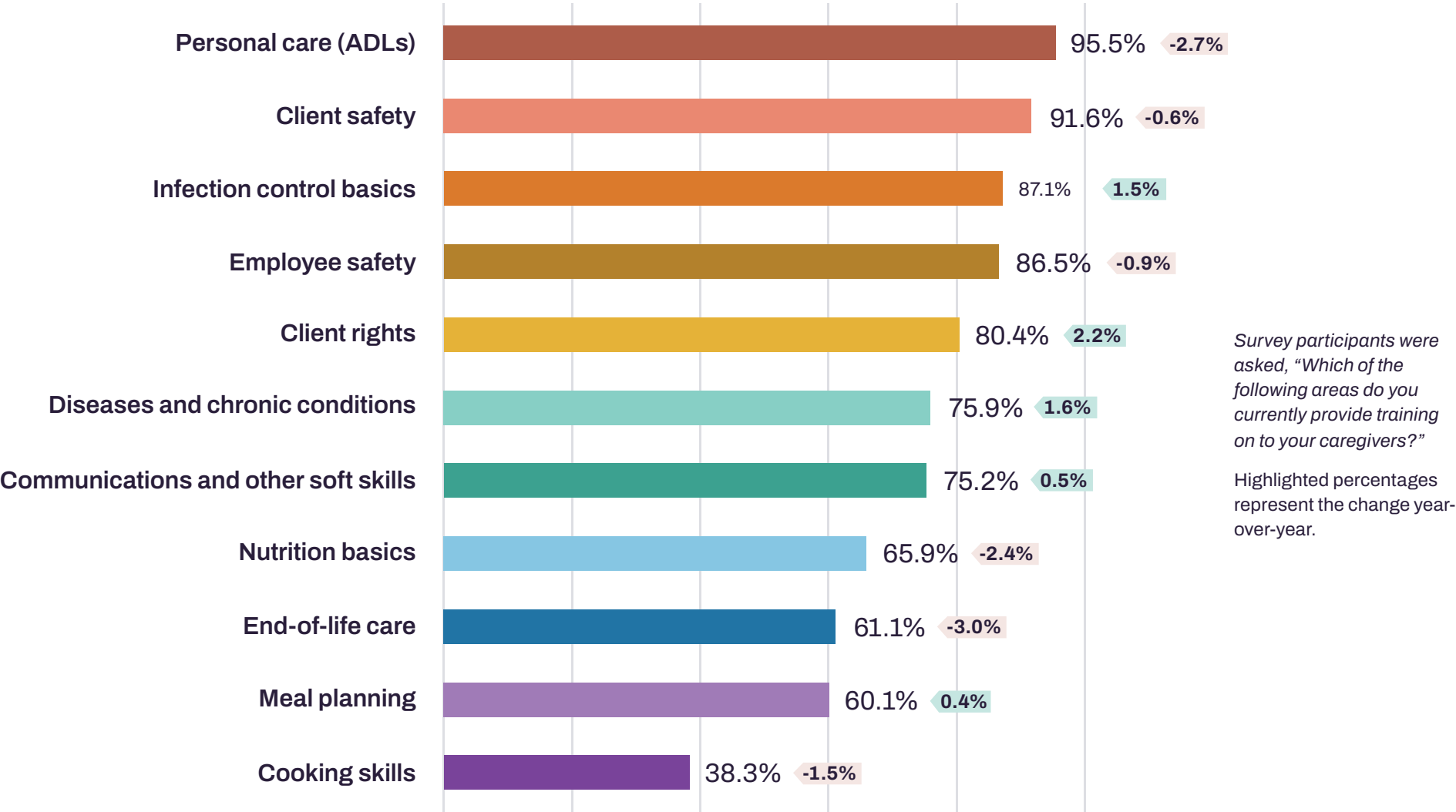
TRAINING HOURS

4.15 Home Care Median Revenue by Ongoing Training Hours for 2024



TRAINING TOPICS

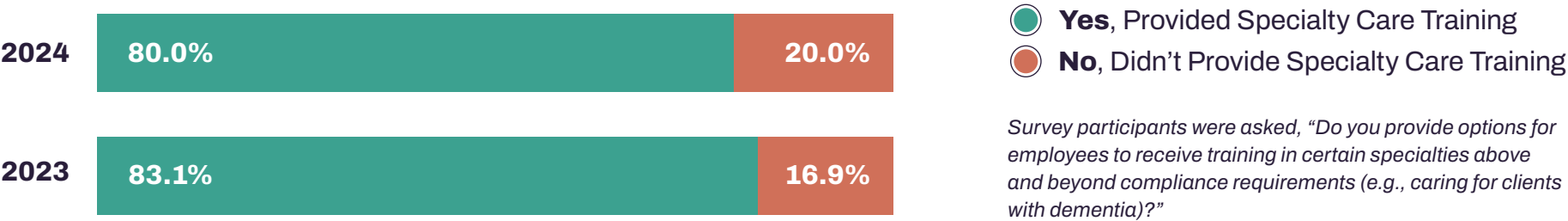
4.16 **Home Care** Percentage of Agencies That Provide Training By Topic





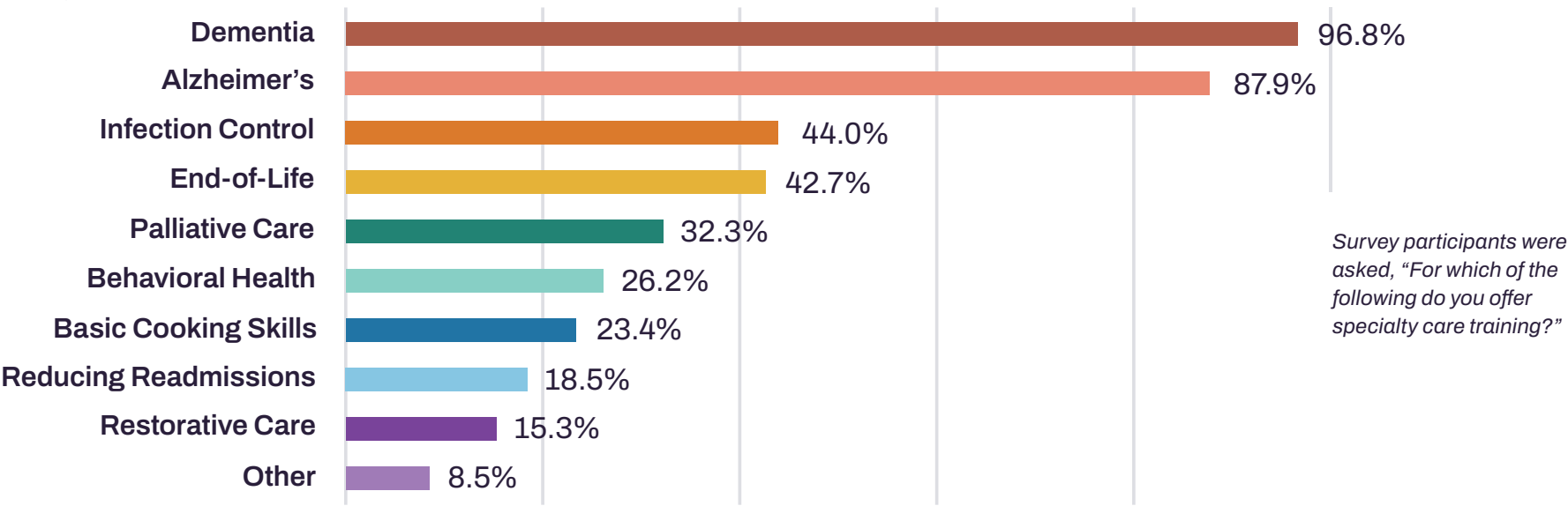
TRAINING TOPICS

4.17 **Home Care** Historical Percentage of Agencies That Provided Specialty Care Training



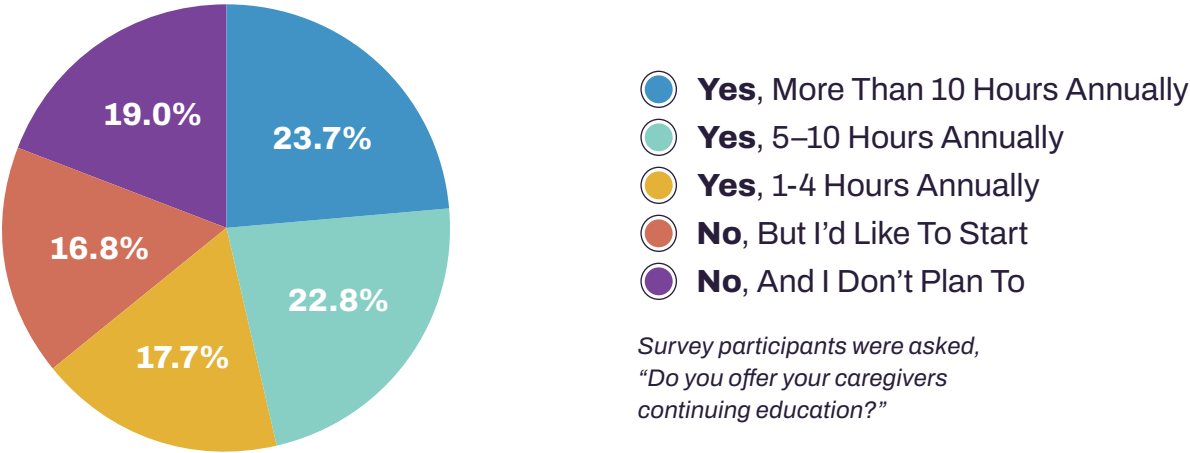
TRAINING TOPICS

4.18 **Home Care** Percentage of Agencies That Provide Specialty Care Training By Topic



CONTINUING EDUCATION

4.19 **Home Care** Percentage of Agencies That Provided Continuing Education in 2024

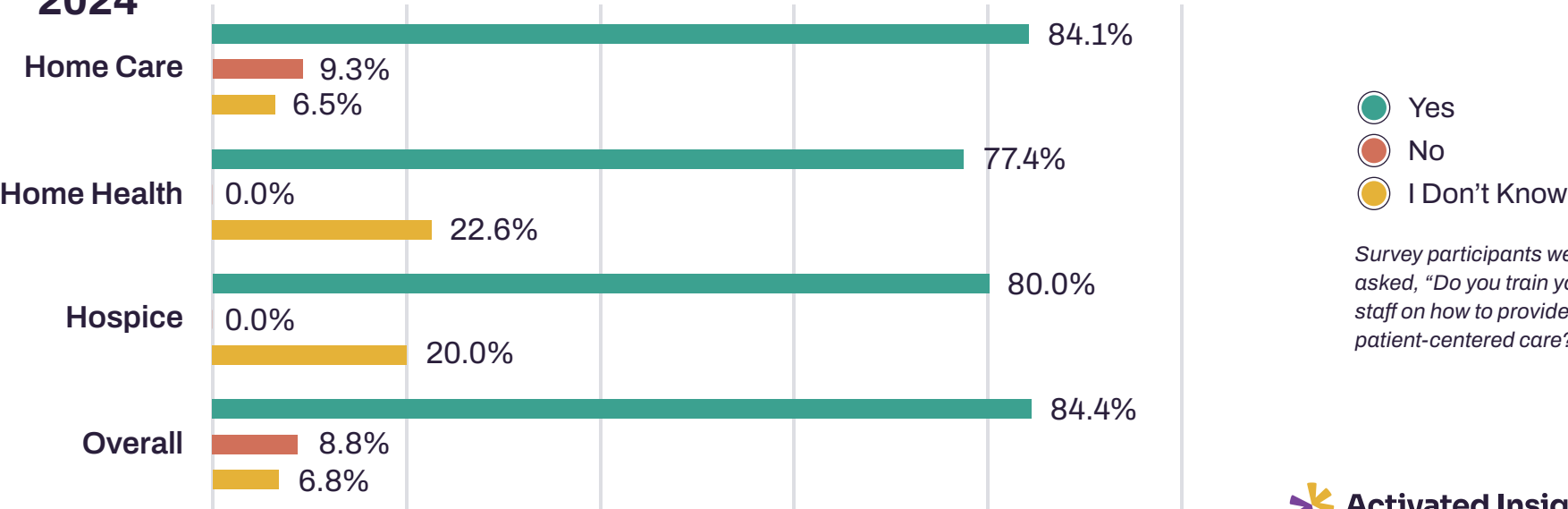


64.2%

of agencies provide some continuing education annually.

PATIENT-CENTERED CARE

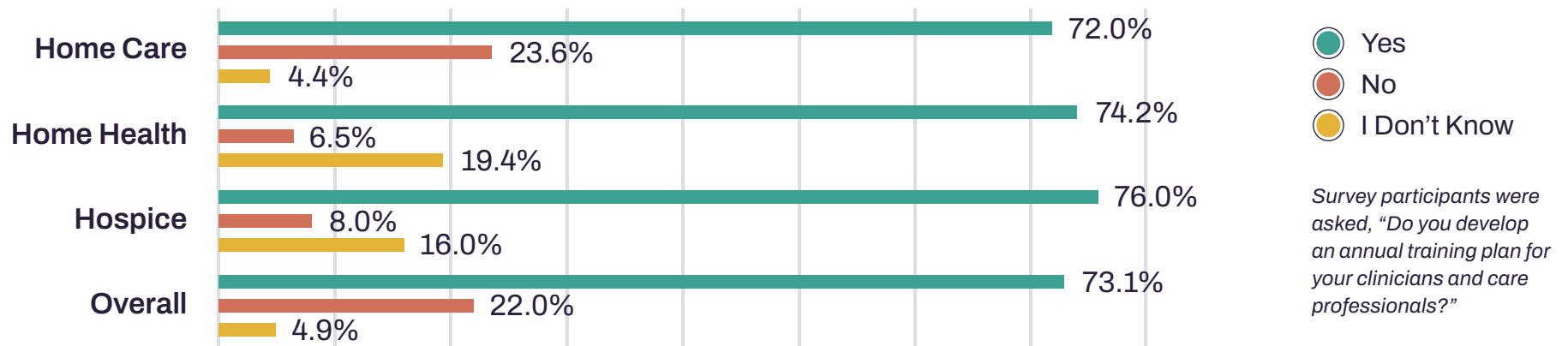
4.20 **Overall** Percentage of Organizations That Train on Patient-Centered Care in 2024





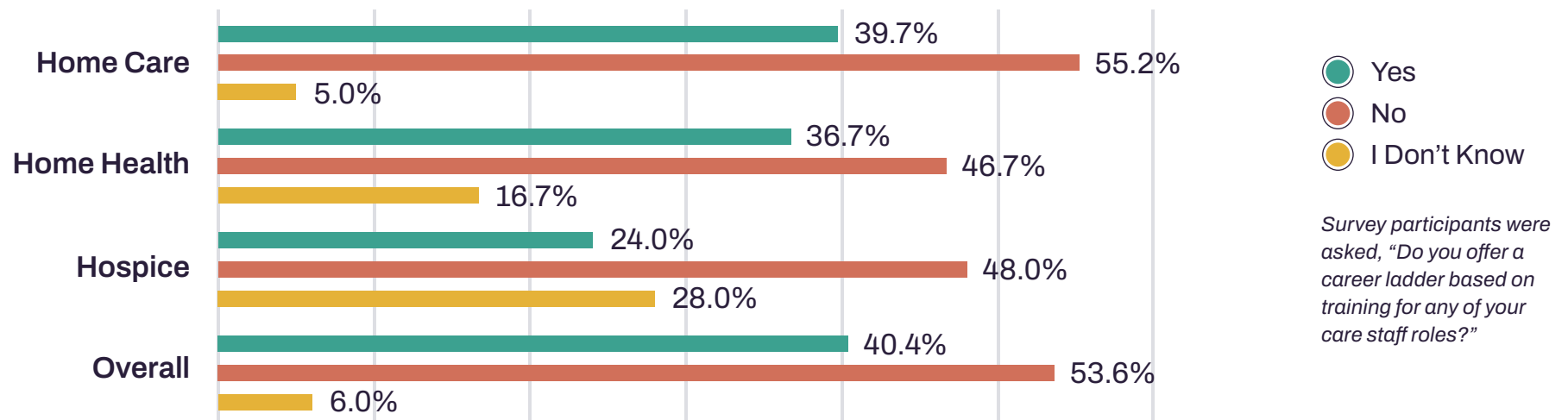
TRAINING PLAN

4.21 **Overall** Percentage of Organizations that Develop an Annual Training Plan in 2024 - Line of Business



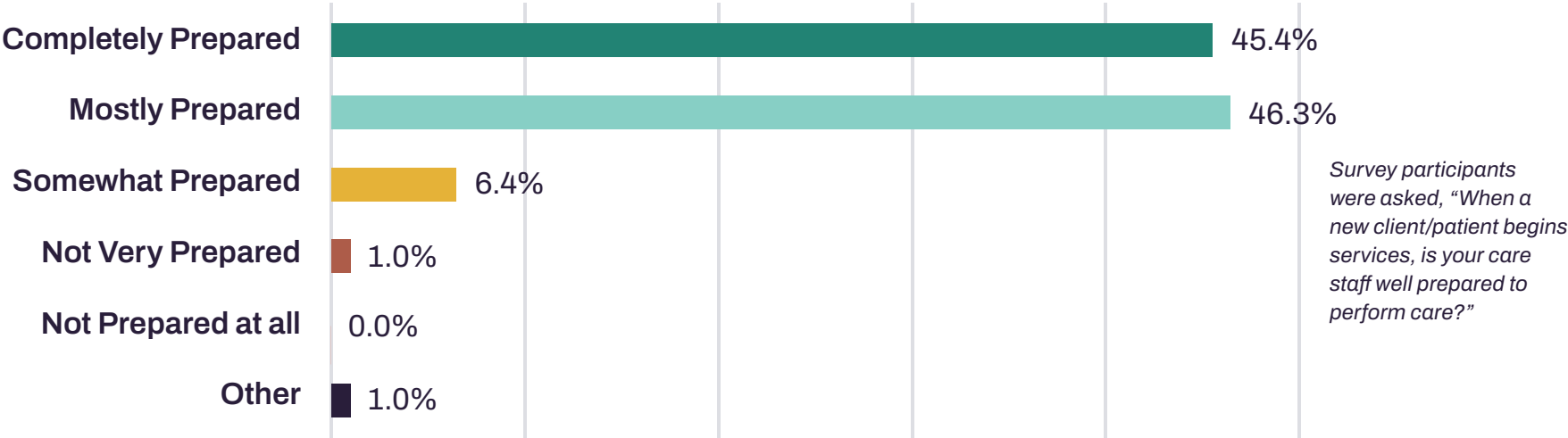
CAREER LADDER

4.22 **Overall** Percentage of Organizations that Offer Career Ladder Based on Training in 2024 - Line of Business



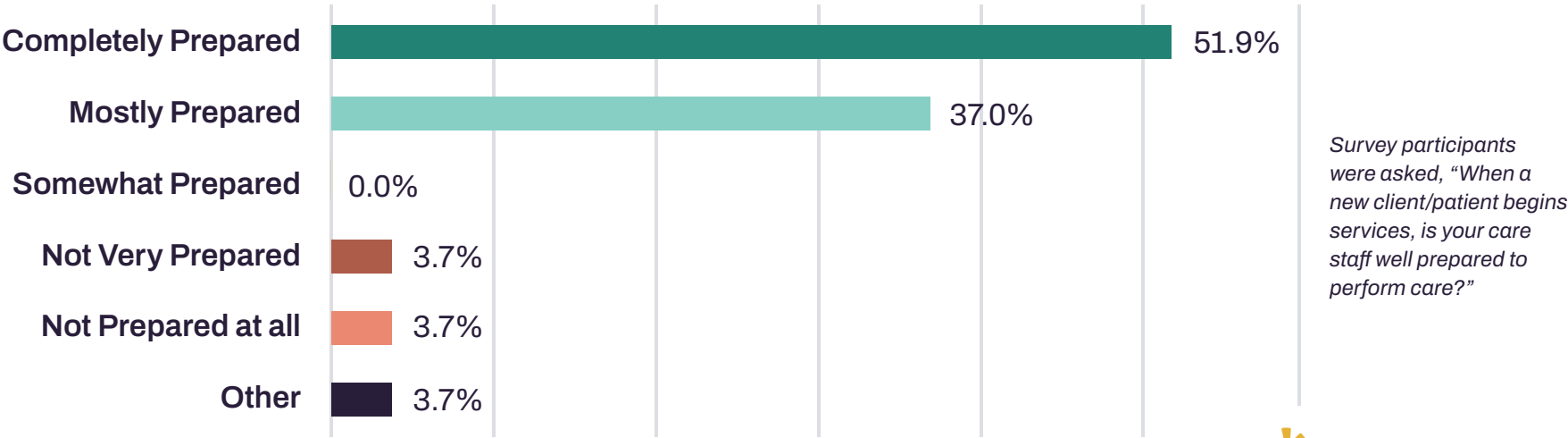
CARE STAFF PREPARATION

4.23 Home Care Care Staff Preparation



CARE STAFF PREPARATION

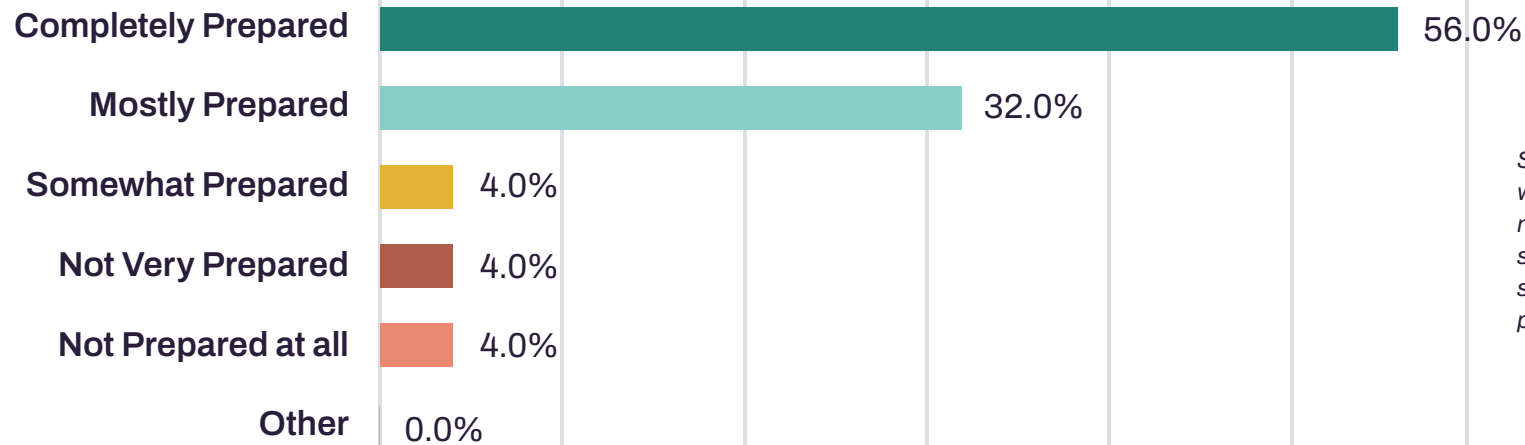
4.24 Home Health Care Staff Preparation





CARE STAFF PREPARATION

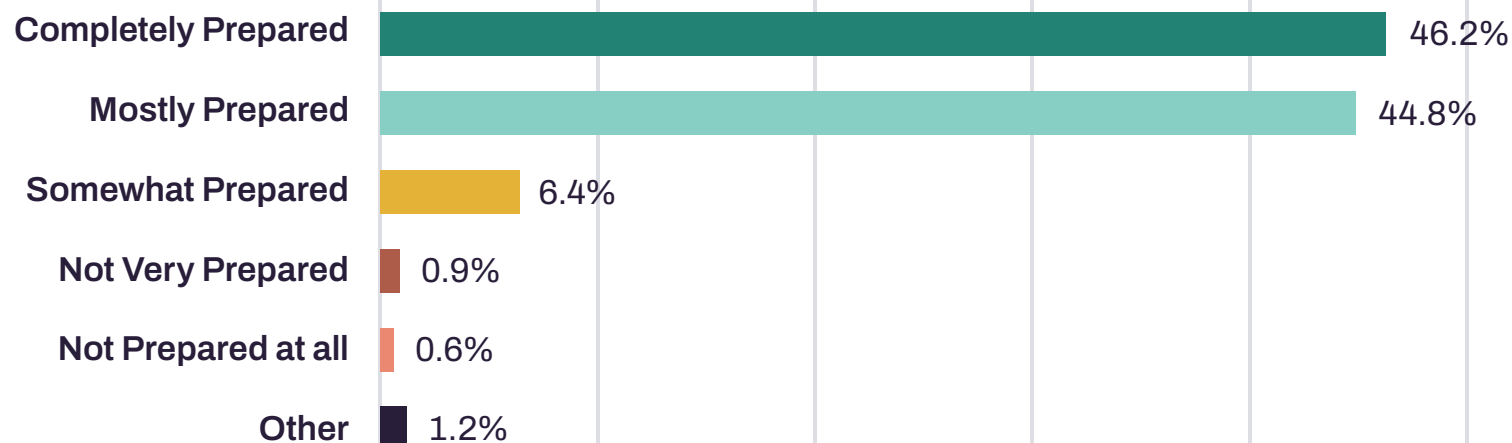
4.25 Hospice Care Staff Preparation



Survey participants were asked, "When a new client/patient begins services, is your care staff well prepared to perform care?"

CARE STAFF PREPARATION

4.26 Overall Care Staff Preparation



Survey participants were asked, "When a new client/patient begins services, is your care staff well prepared to perform care?"

ARTICLE

Training That Bridges Recruitment to Retention and Drives Agency Success



Megan Teis

Vice President of Course Development

Activated Insights



Polly adjusted her name tag as she sat across from the agency's owner, Grace, on her first day as a care professional. The office was warm and inviting, but what stood out most was Grace's energy.

Polly thought back to her interview—Grace had spoken with the same passion about helping new employees feel confident and supported as they stepped into their roles. Even then, Polly knew this wasn't just another job; it was the start of a career.

"Welcome, Polly," Grace began. "I'm thrilled you're here. Let me tell you a bit about what we do differently. From your first day, we want to ensure you feel ready and supported in your role. We want to know what makes you tick, and what makes you feel fulfilled. Whether it's building confidence, growing skills, or finding a sense of purpose in your work, we're here to help you every step of the way."

Polly smiled, feeling her nerves melt away. Grace's enthusiasm and clear support made Polly feel like she belonged. For the first time, Polly could see a vision of her future: not just a job, but a career where she could thrive.

Do you feel the same passion for career development as Grace does? What if training wasn't just a task to check off but the key to turning new hires into long-term advocates? Too often, care professionals start their role unprepared, undervalued, and, unfortunately, on their way out. But imagine a different path—where training is the catalyst that builds confidence, fuels growth, and keeps employees engaged.

In this article, we'll follow Polly's employee journey and provide four actionable steps that can help you activate training in your organization.



1. Recruit With Purpose

Attracting the right talent begins with offering a clear path to success. A well-designed training program signals to candidates that your organization is invested in their future. Keep reading to see if you recognize Polly's attitude among your newly hired care professionals.

"I could tell during my interview that your agency was different," Polly said, recalling her conversation with Grace. "You kept talking about how you want to help me grow through professional development... to not just boost my skills but also kickstart my career."

Grace nodded with a smile. "Polly, it's something we're passionate about. Did you know that according to a recent Benchmarking Report, just under 40% of agencies offer a clear career ladder tied to training? That means most employees don't see a clear path forward. Here, we want every employee to know exactly how they can grow and succeed."

"That's exactly why I chose this agency," Polly replied. "Where do we start?"

How To Activate Your Training During Recruitment:

- **Define Opportunities:** Structured career ladders that incorporate training show potential employees the long-term value of joining your team. Clearly define these growth opportunities in your recruitment marketing strategy. For example, "Start as a Caregiver, advance to a Dementia Care Specialist, and beyond—all with our step-by-step career support program."
- **Boost Hiring Rates:** Utilize testimonials from well-trained, satisfied employees to attract quality talent within the community.



"Training is the catalyst that builds confidence, fuels growth, and keeps employees engaged."

- **Build Your Reputation:** Emphasize growth opportunities in recruitment messaging to position your organization as the place to build a career.

2. Retain Your New Hires With Supportive Training

Grace leaned forward with a smile. "First, we'll focus on orientation to make sure you feel confident and ready for your clients. Our orientation consists of an online, scenario-based learning program tailored to what you'll face on the job. You'll go through interactive modules designed to help you handle real-world situations. You'll cover essential topics like performing Activities of Daily Living (ADLs), proper transfer techniques, and basic safety protocols. And I'm assigning you a "buddy" who will be there for you, providing support as you put what you've learned into practice."

Polly nodded, excited by the plan. "That sounds great. You know at my last job I was sent to see my first client within an hour of showing up. With no

training. I'd never worked as a caregiver before. I was so overwhelmed and scared that I had no choice but to quit."

Grace understood. "I hear about that happening all too often. But don't worry, Polly. Here we have systems in place to make sure you feel confident and comfortable before you're out there providing care. For example, in addition to your buddy guiding you, you and I will have quarterly check-ins to discuss how things are going."

Once employees are onboarded, training becomes the anchor that keeps them engaged. Turnover in home-based care is a significant challenge, with nearly 75% of care professionals leaving their roles in 2024—and 40% departing within their first 100 days on the job.

Why are they leaving? As Polly shared, many feel overwhelmed by unrealistic demands, disorganized administration, and lack of training opportunities.

Formalized Training Reduces Turnover By:

- Building Confidence:** Development programs help team members feel capable and well-prepared in their roles. In fact, in home care, less than 44% of staff report feeling fully prepared to care for new patients, highlighting the critical role structured support plays in building readiness and assurance in their work.
- Reducing Strain on Teams:** Confident, well-trained employees are more likely to stay, reducing turnover and easing workloads, which helps prevent burnout and keeps teams focused on delivering quality care.



“Once employees are onboarded, **training becomes the anchor that keeps them engaged.**”

Investing in additional training hours doesn’t just support employees—it directly impacts organizational growth by reducing turnover costs. In fact, home-based care agencies offering eight or more hours of orientation see significant revenue boosts, partly because structured support helps retain staff, preventing the financial losses associated with high turnover.

3. Boost Satisfaction With Customized Specialty Training

“Polly, tell me,” Grace began during one of their scheduled check-ins. “What client care areas interest you the most? Do you see yourself specializing in something, or is there a skill you feel would make you even stronger?”

Polly thought for a moment. “I’ve always been interested in dementia care. I see how much of a difference it makes for clients and their families, and I want to be better at helping them.” She paused, then added, “I also think communication is a strength of mine, but I know there’s always room to improve.”

Grace nodded, “Dementia care is such an impactful area, and we’ve invested a lot in specialized training for it. I love that you see communication as a strength—it’s one of the most valuable skills in our field. Let’s make sure we build on that and create opportunities for you to grow into the areas you’re passionate about.”

Specialized training helps employees sharpen their skills in areas they care about, boosting confidence and strengthening their connection to their role. LinkedIn’s 2023 Workplace Learning Report reported that 94% of workers would stay at a job that offered them development opportunities.

Specialty Training Activates:

- Increased Engagement:** Employees who feel their unique skills are valued and developed are more likely to stay engaged and motivated—reducing burnout and turnover.
- Loyalty Through Investment:** Employees are more likely to stay with an organization that actively invests in their future, viewing it as a partner in their career journey rather than just an employer.
- Elevated Client Outcomes:** Specialized training leads to better service delivery, which boosts employee satisfaction as they witness the tangible impact of their work on clients and families.

4. Keep Employees Satisfied Long-Term

Polly stepped into Grace’s office for her annual review, a mix of pride and anticipation in her chest.

“Polly, I can’t believe it’s been a year,” Grace said warmly. “You’ve become an essential part of the team. Looking back, what’s mattered most to you?”

“The support,” Polly said with a smile. “From training to check-ins, I’ve always felt valued. That’s been life changing.”

Grace nodded. “That’s exactly our goal. Speaking of growth, how was the dementia care training?”

“Incredible,” Polly said. “The tools help me every day, and families have noticed—they’ve even thanked me.”

“I’ve seen that feedback myself,” Grace said. “Which is why I’m thrilled to offer you a promotion to



Dementia Care Specialist. Your skills and leadership have made a real impact.” Polly’s eyes lit up. “Thank you! I’ve loved every moment of learning.”

“What’s next for you?” Grace asked.

“End-of-life care. I want to support families through every stage.”

“We’ll make that happen,” Grace said.

Polly turned to leave, then paused. “Oh! I always rave about my job, and some friends are interested in applying. Want their info?” Grace grinned. “If they’re anything like you? Absolutely.”

Activate Your Agency’s Success Story

Training isn’t just a box to check—it’s the spark that transforms jobs into careers and employees into advocates. Think about Polly’s journey: with the right training and support, she didn’t just stay—she thrived, grew, and became a leader. From recruitment to retention, from building career ladders to creating lasting satisfaction, training connects every step of the employee experience and positions an organization as an employer of choice. So, what steps will you take to activate training, transform your team, and enhance your agency’s future? 

ABOUT THE AUTHOR

Megan Teis is a leader in training strategy and product development, specializing in post-acute and long-term care. She has been instrumental in building the Activated Insights training library from the ground up, ensuring every course is relevant, relatable, and ROI-driven. As Vice President of Course Development, she works closely with the clinical team, fostering unique cross-functional collaboration to create training that meets both regulatory and real-world care needs. With deep expertise in instructional design principles and 18 years of experience, she has developed and managed 500+ courses, leveraging microlearning and mobile-first solutions to enhance accessibility and engagement. Her strategic approach drives innovative learning experiences that empower care professionals, clinicians, and organizations while delivering measurable outcomes.



“Specialized training helps employees **sharpen their skills** in areas they care about, **boosting confidence** and **strengthening their connection** to their role.”



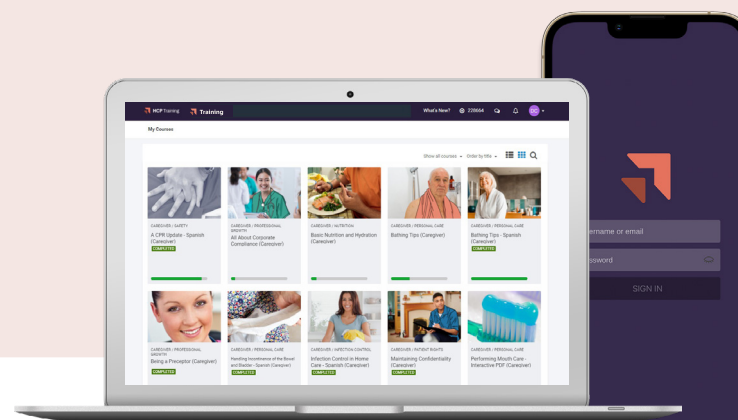
Clinical & Non-Clinical Training

What keeps staff confident? Simplified compliance training.

Staying compliant shouldn't be complicated. Activated Insights Training (formerly *In the Know Caregiver Training*) makes it easy to assign and track training that meets state-specific compliance requirements for the roles and care settings you support. Designed for real-world care, our courses help staff feel confident, stay longer, and deliver better outcomes—while ensuring you're prepared when auditors come calling.

Why it works:

- ✓ Built by nurses – Aligned with real-world care
- ✓ Compliance-ready – Meets state training mandates
- ✓ Role-based – Tailored paths for each position
- ✓ Instructor-led or online – Flexible formats for every team
- ✓ Multilingual + mobile – Supports your whole workforce
- ✓ Outcome-focused – Boosts confidence, retention, and care



See why caregivers, clinicians, and administrators trust Activated Insights Training — Learn more: activatedinsights.com/training



SUMMARY

Finance

The Finance section provides a detailed look at the average balance sheets of businesses within your region, revenue range, and across the industry. It includes key data on revenue, expenses, payer sources, and profit and loss benchmarks for home-based care organizations. With these insights, you can compare your business expenses to the industry, pinpoint areas of potential overspending, and optimize your financial strategy. Additionally, this section offers median billing rates by region to help you maintain competitive pricing.

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- 124** Revenue Percentile Rankings
- 129** Profit & Loss Comparisons
- 132** Other Expenses
- 134** Revenue Generated by Service Offerings
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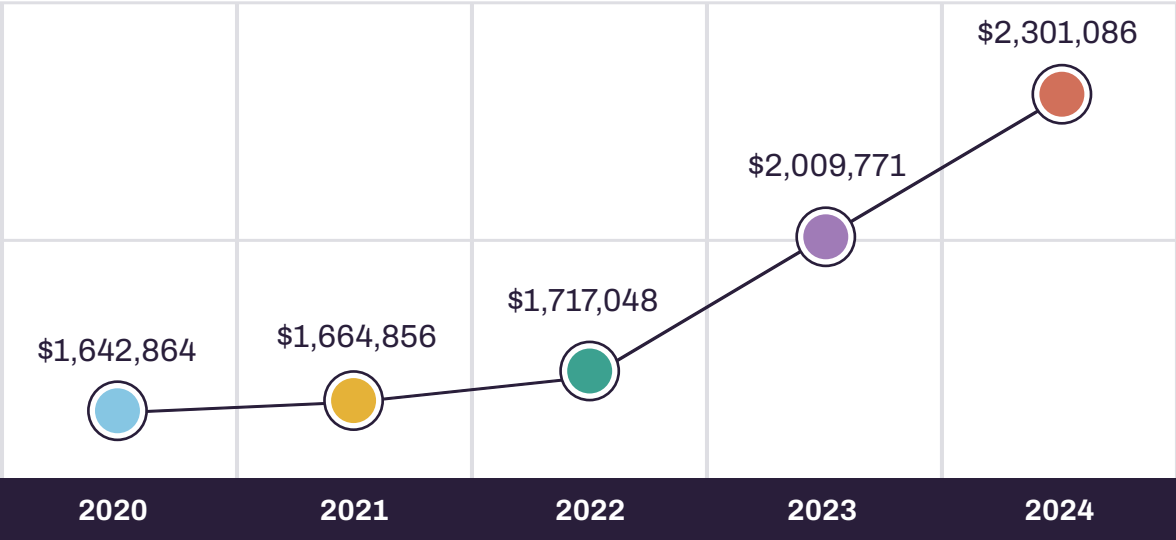
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- 141** *Demystifying Medicaid: A Guide to Home-Based Care Services*
- 145** *Using Data to Forecast the Future of Your Business*
- 149** *Preparing Your Home-Based Care Agency for Sale: How to Maximize Value in a Transaction*

MEDIAN REVENUE

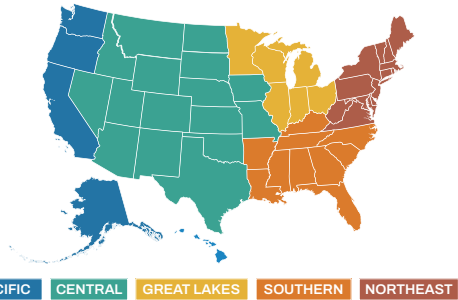
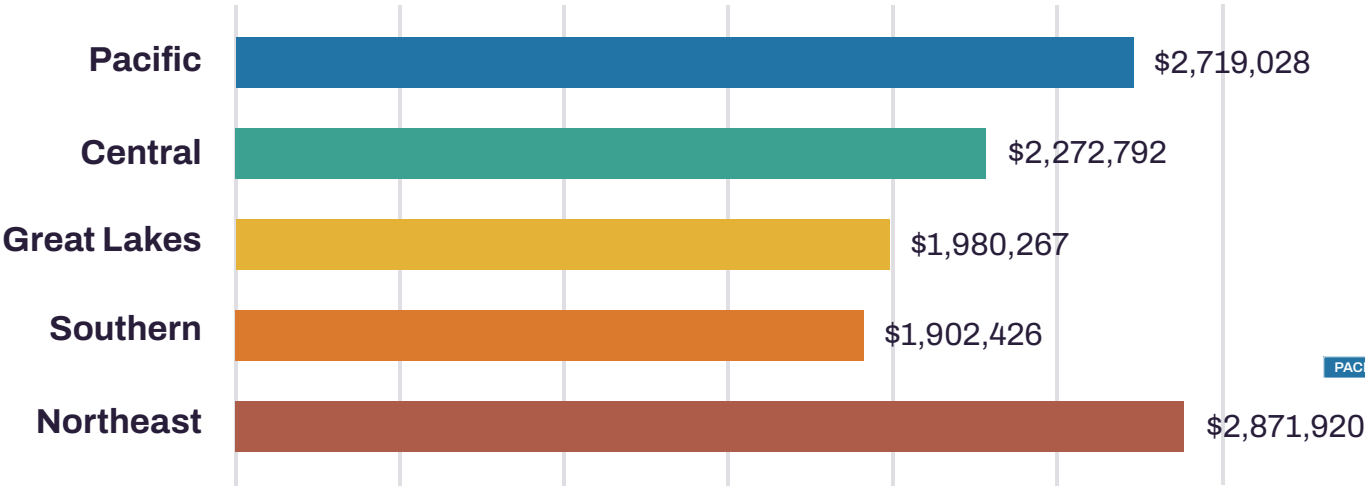
5.1 Home Care
Historical Median Revenue

Median Revenue for the industry has grown by 40.1% over the past 5 years.



MEDIAN REVENUE

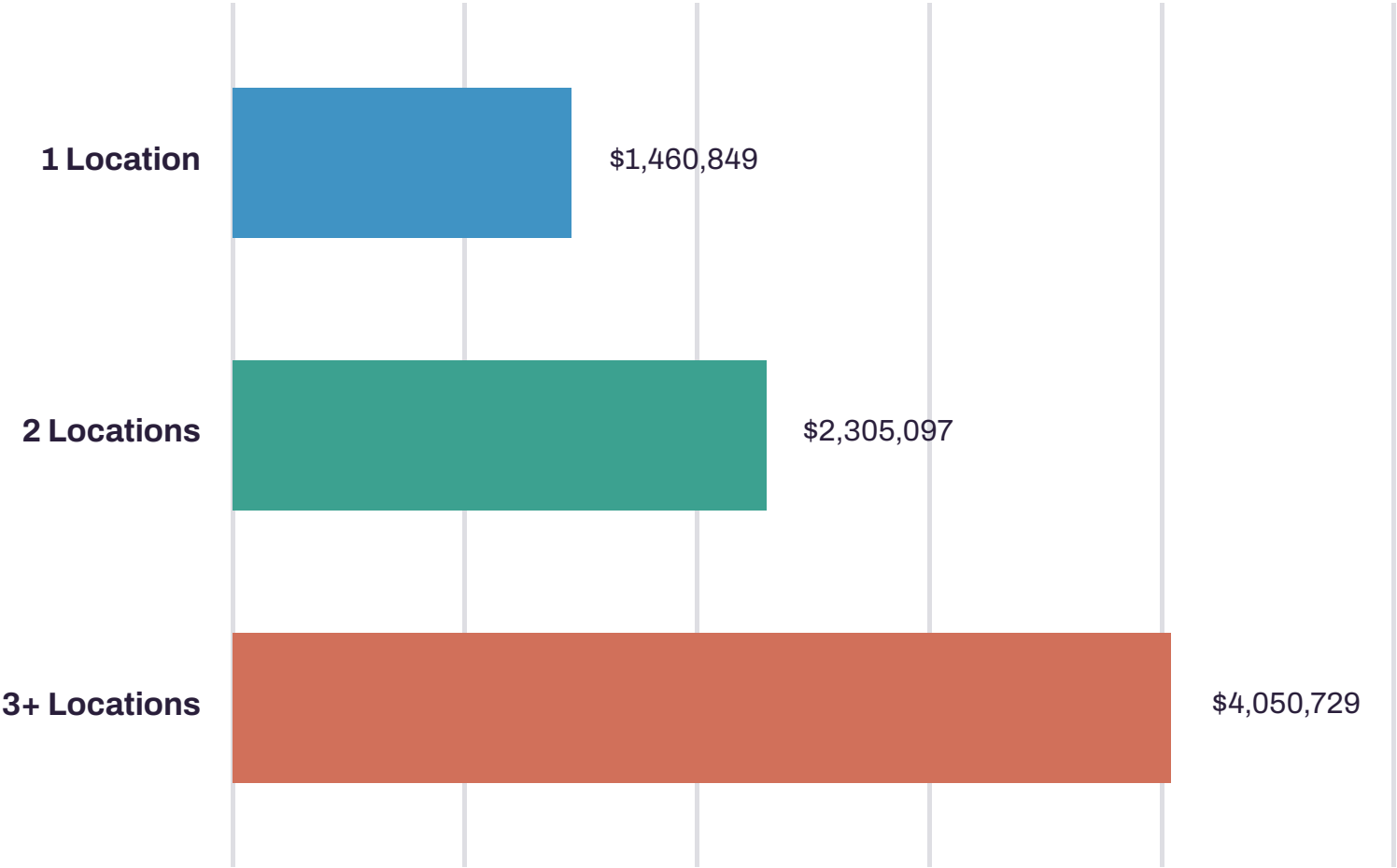
5.2 Home Care Median Revenue for 2024 - Geographic Region





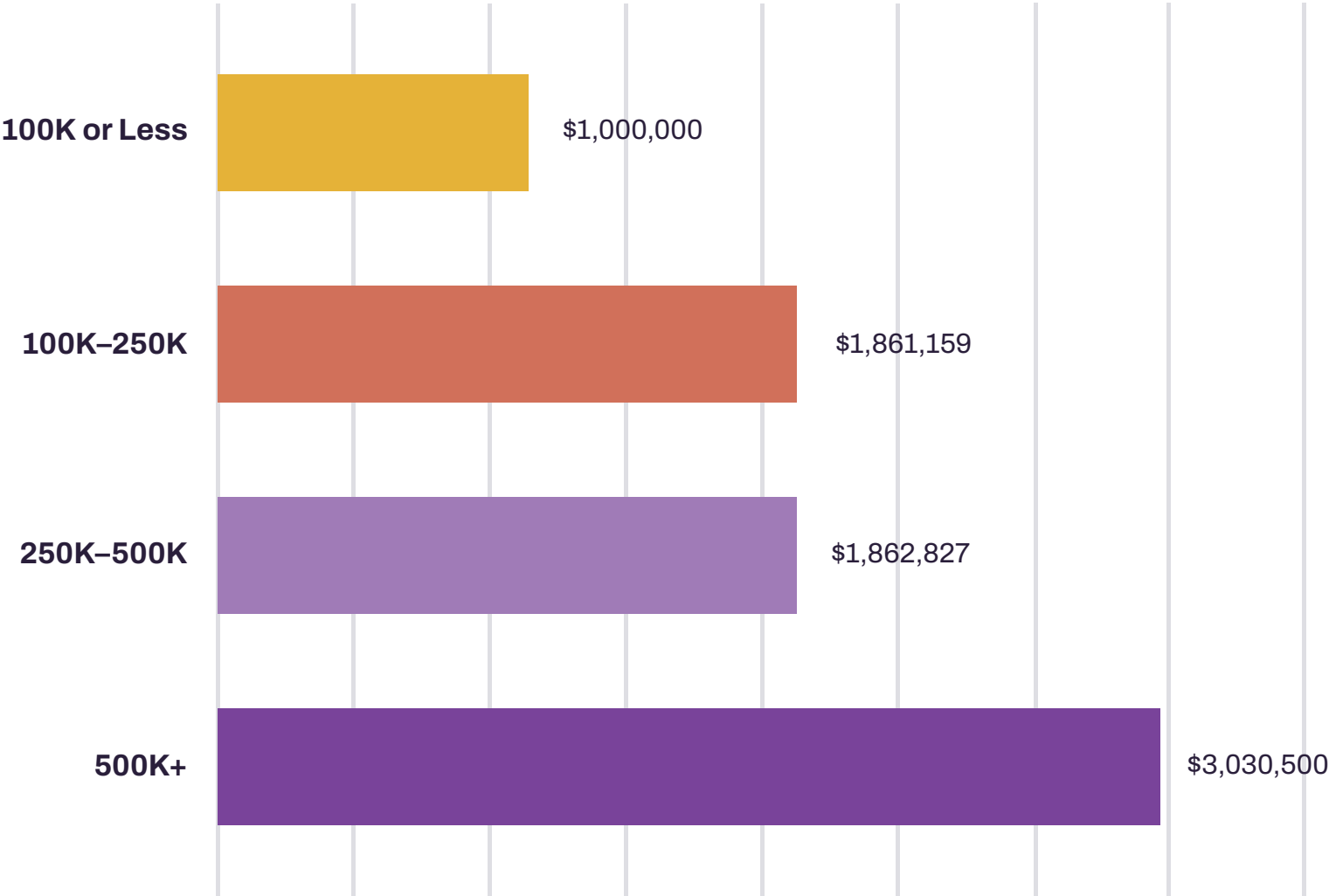
MEDIAN REVENUE

5.3 **Home Care** Median Revenue for 2024 - Number of Locations



MEDIAN REVENUE

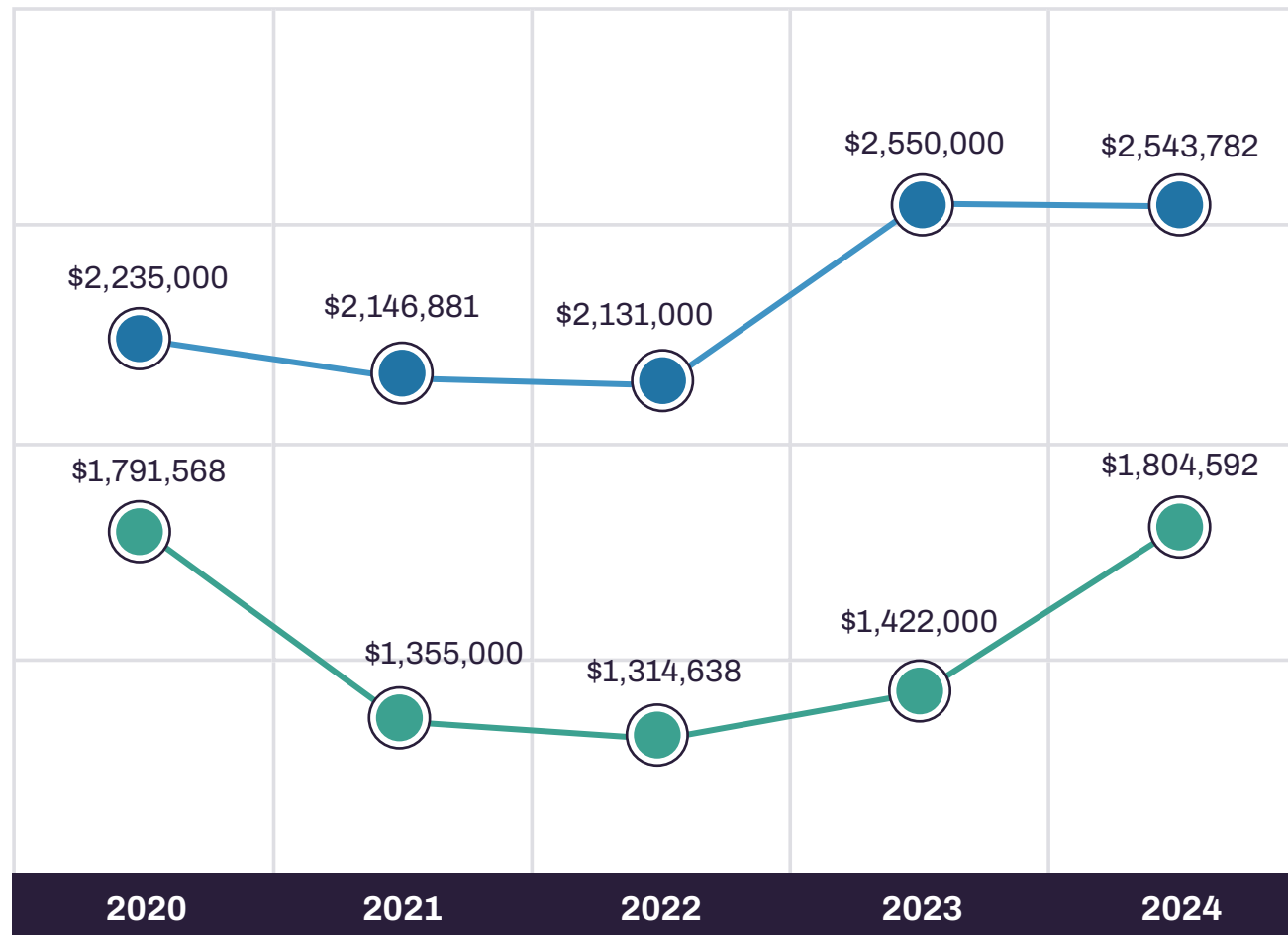
5.4 **Home Care** Median Revenue for 2024 - Population Served





MEDIAN REVENUE

5.5 Home Care Historical Median Revenue - HCAOA Members vs. Non-Members



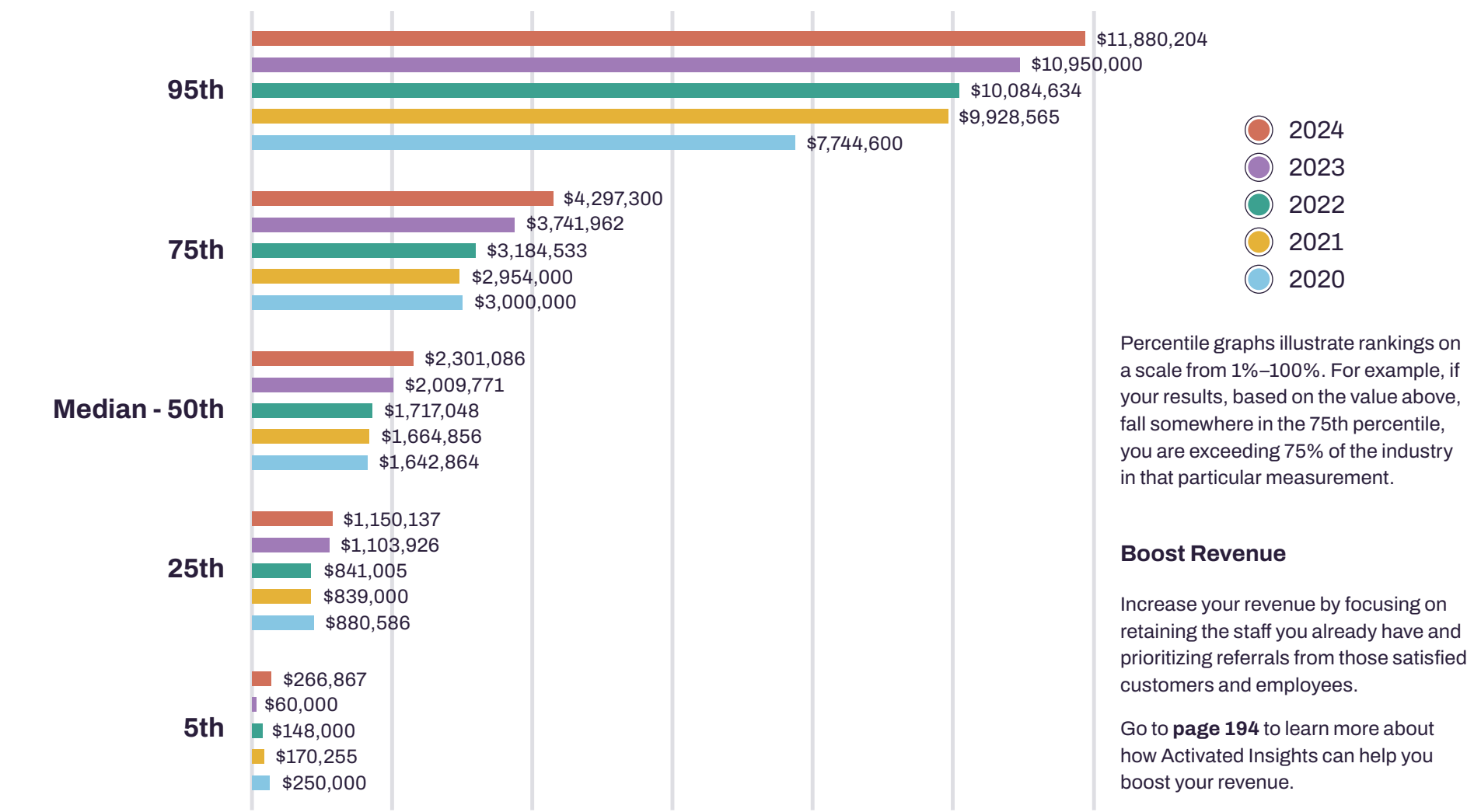
- HCAOA Members
- Non-HCAOA Members

Non-HCAOA Members includes all industry revenue except that of HCAOA members.

For more information about the HCAOA, refer to Jason Lee's article, **"2025: A Year of Transition and Opportunities for the Industry"** on page 14.

REVENUE PERCENTILE RANKINGS

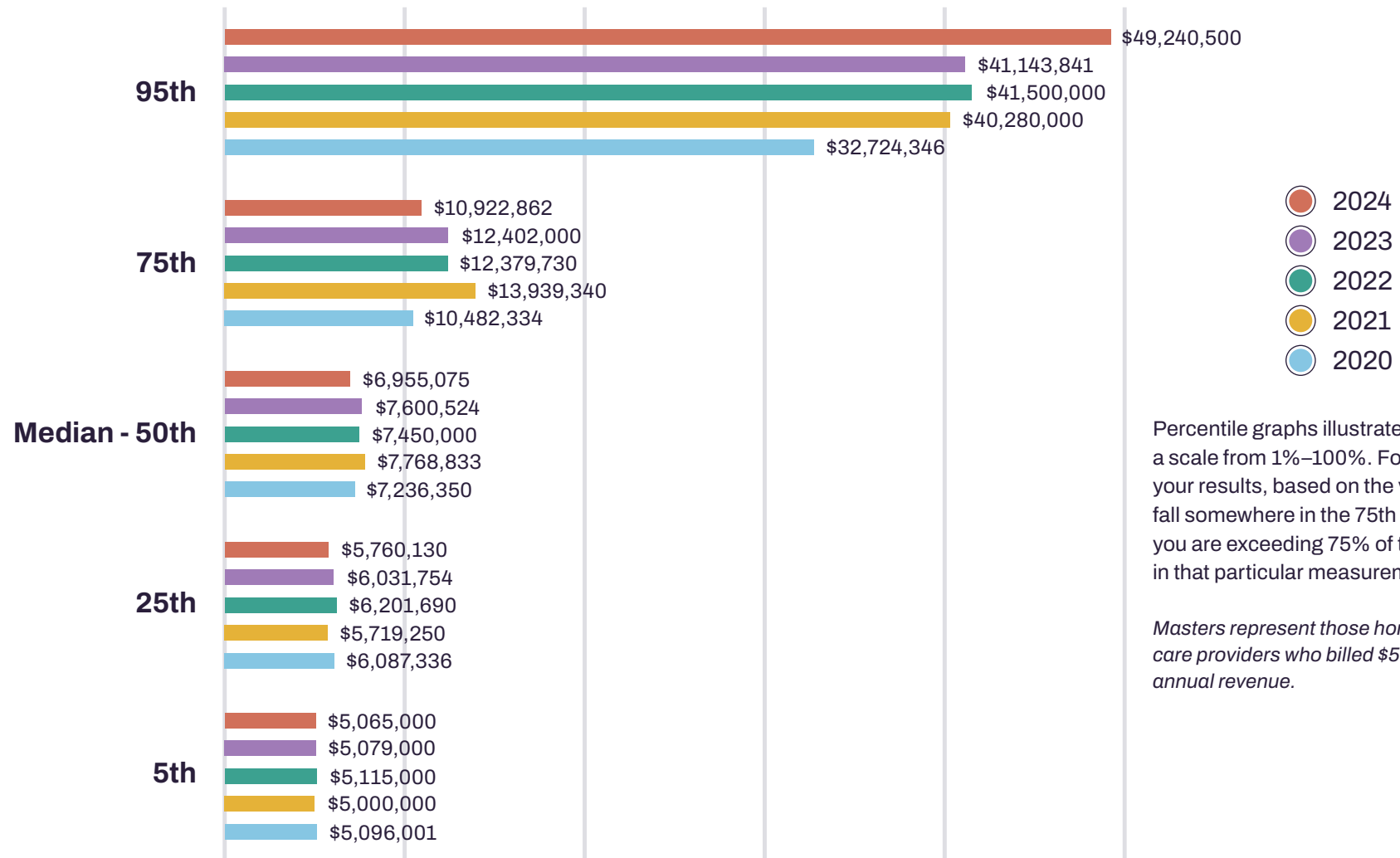
5.6 Home Care Historical Revenue Percentile Rankings





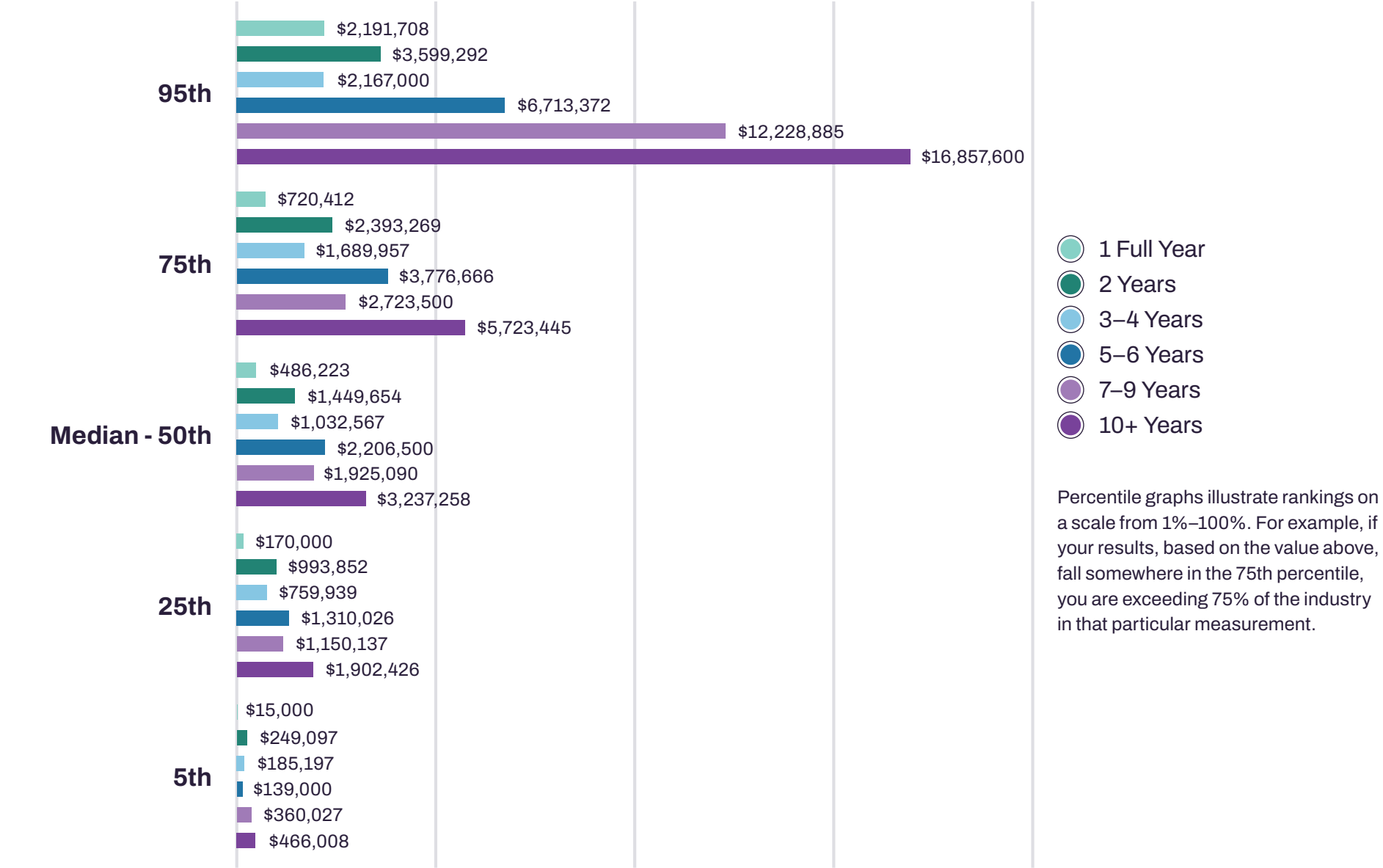
REVENUE PERCENTILE RANKINGS

5.7 Home Care Historical Revenue Percentile Rankings - Masters



REVENUE PERCENTILE RANKINGS

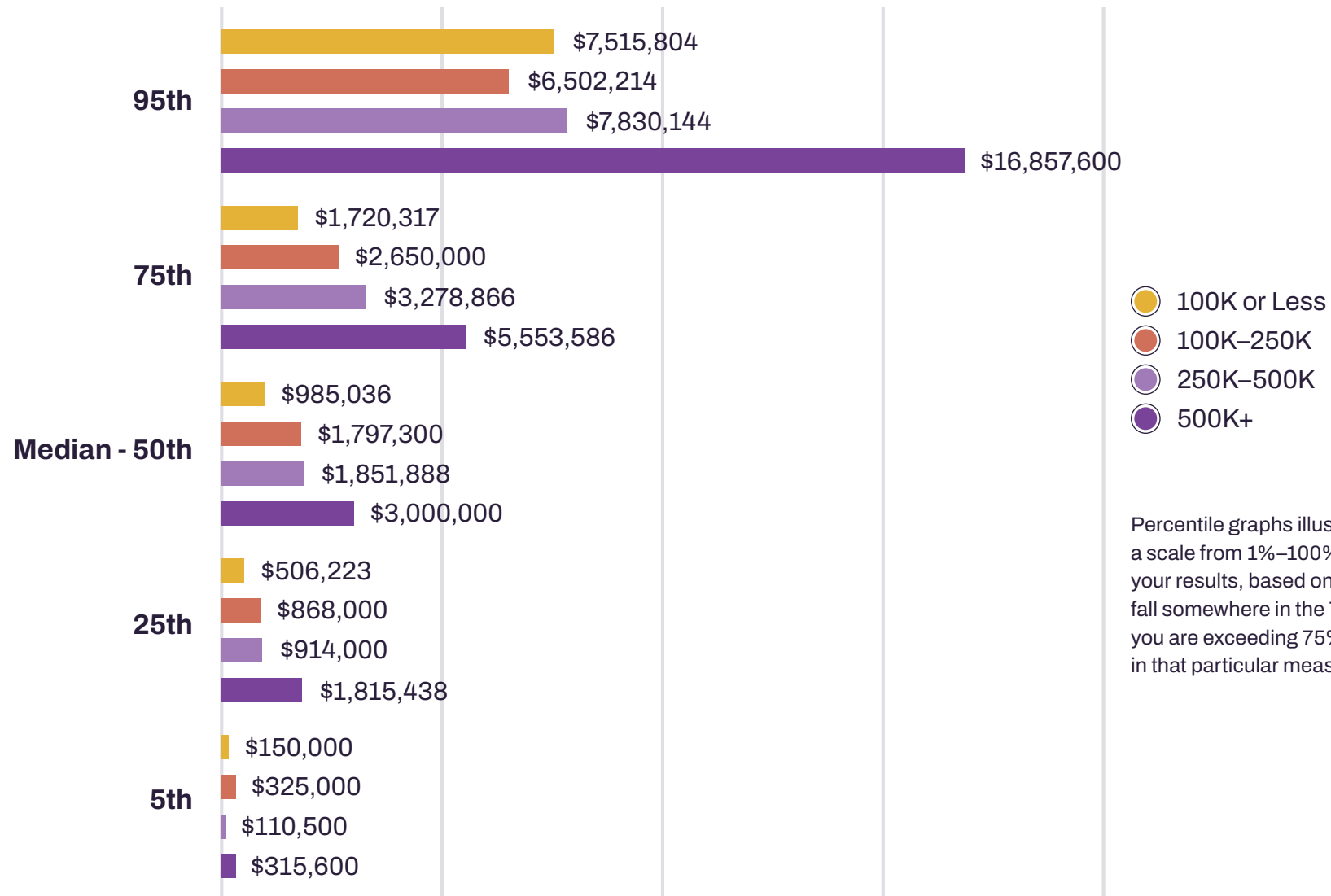
5.8 **Home Care** Revenue Percentile Rankings for 2024 - Years in Business





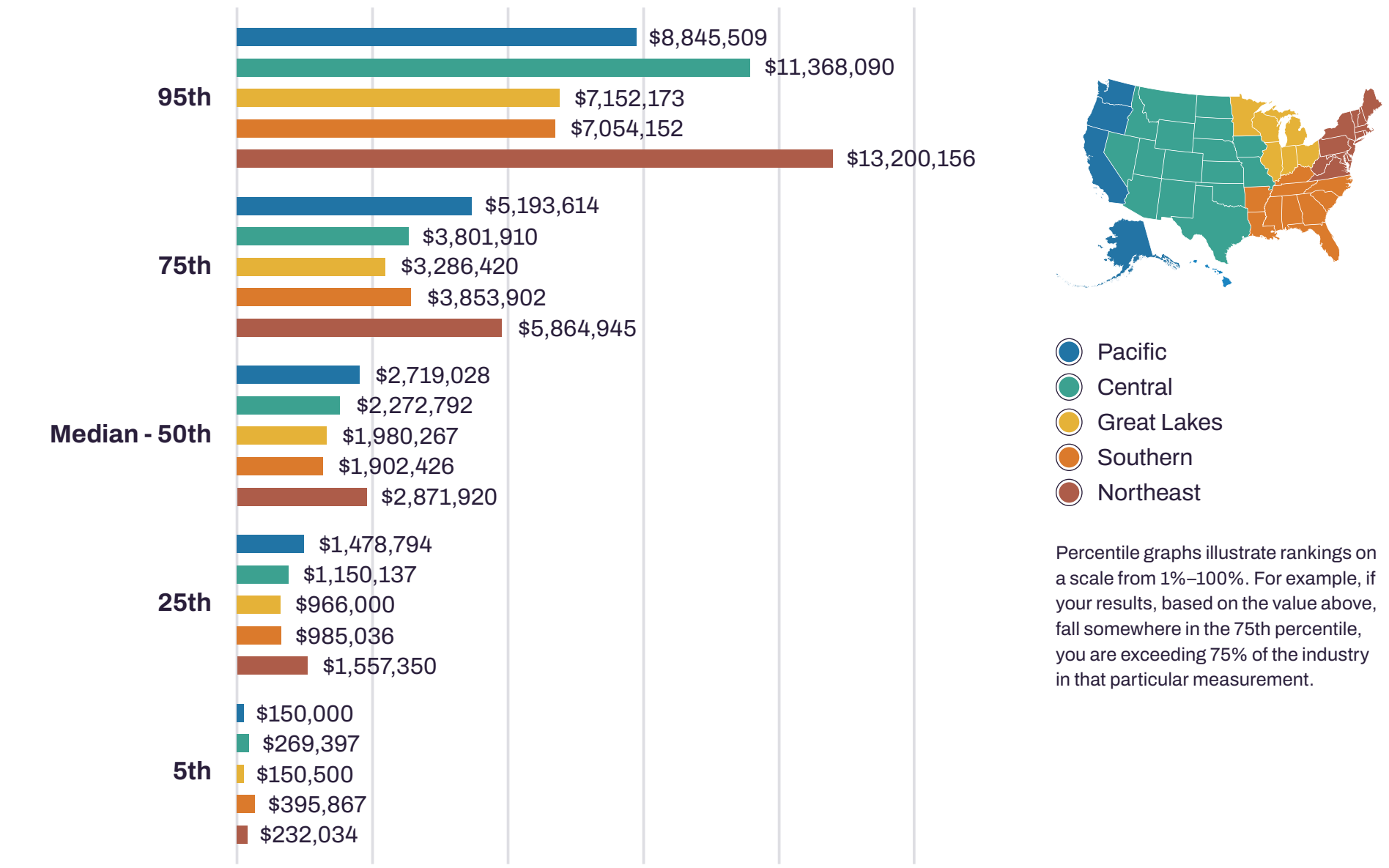
REVENUE PERCENTILE RANKINGS

5.9 Home Care Revenue Percentile Rankings for 2024 - Population Served



REVENUE PERCENTILE RANKINGS

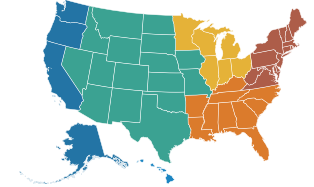
5.10 **Home Care** Revenue Percentile Rankings for 2024 - Geographic Region





5.11 Home Care Profit & Loss Comparison for 2024 - Geographic Region

Geographic Region (U.S.)	Pacific	Central	Great Lakes	Southern	Northeast
Median Annual Revenue	\$2,719,028	\$2,272,792	\$1,980,267	\$1,902,426	\$2,871,920
Direct Care Expenses					
Professional Caregiver wages	49.7%	51.1%	50.1%	51.1%	54.3%
Workers' Comp insurance	1.9%	0.8%	0.7%	0.9%	1.0%
Professional Caregiver benefits (health, 401k, supplemental, etc.)	1.0%	0.8%	1.3%	0.7%	0.8%
Professional Caregiver payroll taxes (employer taxes, etc.)	5.1%	5.1%	4.8%	4.5%	5.5%
Professional Caregiver reimbursements (mileage, meals, etc.)	0.6%	0.5%	0.6%	0.4%	0.4%
Professional Caregiver ongoing training (not initial training)	0.2%	0.2%	0.2%	0.1%	0.2%
*Other direct care expenses not listed	0.4%	0.3%	0.3%	0.1%	0.4%
Total Direct Care Expenses	58.9%	58.8%	57.9%	57.9%	62.6%
Professional Caregiver Recruitment & Retention Expenses					
Professional Caregiver job ads, online recruitment sites, postings, etc.	0.4%	0.4%	0.3%	0.4%	0.3%
Professional Caregiver background checks and screenings	0.1%	0.2%	0.2%	0.2%	0.1%
Professional Caregiver retention (bonuses, recognition program, etc.)	0.3%	0.3%	0.3%	0.3%	0.3%
Professional Caregiver onboarding and initial training	0.3%	0.2%	0.3%	0.2%	0.1%
Team wages associated w/ recruiting/retaining professional caregivers	1.8%	1.9%	1.6%	2.1%	1.6%
Pre-employment assessments	0.0%	0.1%	0.2%	0.3%	0.2%
All other expenses related to recruiting/retaining professional caregivers	0.1%	0.1%	0.3%	0.2%	0.1%
Total Caregiver Recruitment & Retention Expenses	2.9%	3.2%	3.2%	3.6%	2.6%
Sales & Marketing Expenses					
Traditional advertising (radio, print, etc.)	0.4%	0.4%	0.3%	0.3%	0.3%
Internet advertising (Google Ads, paid ads on Facebook, etc.)	0.2%	0.1%	0.9%	0.2%	0.3%
Networking and events (community, gifts, etc.)	0.3%	0.2%	0.2%	0.2%	0.2%
Search Engine Optimization (SEO)	0.3%	0.5%	0.3%	0.3%	0.2%
Sales rep salaries	2.6%	2.5%	2.4%	2.7%	2.0%
Sales rep bonuses and perks	0.2%	0.4%	0.1%	0.2%	0.2%
Lead Generation websites (Caring.com, etc.)	0.3%	0.2%	0.7%	1.4%	0.4%
All other marketing-related expenses (consulting, etc.)	0.5%	0.2%	0.4%	0.3%	0.2%
Total Sales & Marketing Expenses	4.6%	4.6%	5.2%	5.5%	3.8%
Operating Expenses					
Rent, maintenance, and utilities	1.8%	1.6%	1.5%	2.1%	1.5%
Office support wages (admins, schedulers, HR staff, nurses)	8.3%	8.1%	9.0%	7.0%	8.1%
Executive team wages (exclude all owners)	3.1%	4.4%	4.1%	5.7%	3.1%
Scheduling software, including telephony	0.5%	0.5%	0.7%	0.7%	0.3%
Franchise royalty fees (if applicable)	5.0%	5.0%	4.8%	4.8%	3.7%
Association/membership dues (if applicable)	0.1%	0.1%	0.1%	0.1%	0.1%
Travel/meals/entertainment expenses	0.3%	0.3%	0.4%	0.4%	0.3%
*Other operating expenses (exclude owners' salary and benefits)	5.5%	3.6%	5.0%	4.4%	2.1%
Total Operating Expenses	24.7%	23.6%	25.5%	25.1%	19.2%



Net Profit or Net Ordinary Income is not shown in the key profit and loss comparisons, as only key expenses are represented, rather than all expenses incurred.

*Expense Examples

Professional Caregiver payroll taxes - *employer taxes, unemployment insurance, etc.*

Professional Caregiver retention - *bonuses, recognition program, satisfaction management, etc.*

Networking and events - *community, gifts, conventions, trade shows/ marketing to clients, etc.*

5.12

Home Care

Profit & Loss Comparison for 2024 - Number of Locations

Net Profit or Net Ordinary Income is not shown in the key profit and loss comparisons, as only key expenses are represented, rather than all expenses incurred.

***Expense Examples**

Professional Caregiver payroll taxes - *employer taxes, unemployment insurance, etc.*

Professional Caregiver retention - *bonuses, recognition program, satisfaction management, etc.*

Networking and events - *community, gifts, conventions, trade shows/ marketing to clients, etc.*

Number of Locations	1 Location	2 Locations	3+ Locations
Median Annual Revenue	\$1,836,729	\$3,083,972	\$4,435,820
Direct Care Expenses			
Professional Caregiver wages	52.2%	49.8%	50.4%
Workers' Comp insurance	0.9%	1.2%	0.9%
Professional Caregiver benefits (health, 401k, supplemental, etc.)	0.9%	0.8%	1.2%
Professional Caregiver payroll taxes (employer taxes, unemployment insurance, etc.)	5.2%	5.1%	4.7%
Professional Caregiver reimbursements (mileage, meals, etc.)	0.4%	0.6%	0.4%
Professional Caregiver ongoing training (not initial training)	0.2%	0.2%	0.1%
*Other direct care expenses not listed	0.3%	0.8%	0.4%
Total Direct Care Expenses	60.1%	58.4%	58.2%
Professional Caregiver Recruitment & Retention Expenses			
Professional Caregiver job ads and networking	0.4%	0.2%	0.3%
Professional Caregiver background checks and screenings	0.2%	0.1%	0.1%
Professional Caregiver retention (bonuses, recognition program, satisfaction mgmt)	0.3%	0.4%	0.2%
Professional Caregiver onboarding and initial training	0.2%	0.2%	0.2%
Team wages associated with recruiting and retaining professional caregivers	1.8%	1.5%	1.6%
Pre-employment assessments	0.2%	0.2%	0.0%
All other expenses related to recruiting and retaining professional caregivers	0.2%	0.1%	0.1%
Total Professional Caregiver Recruitment & Retention Expenses	3.4%	2.7%	2.5%
Sales & Marketing Expenses			
Traditional advertising (radio, print, etc.)	0.4%	0.1%	0.3%
Internet advertising (Google Ads, paid ads on Facebook, etc.)	0.2%	0.3%	0.3%
Networking and events (community, gifts, conventions, etc.) clients, etc.	0.2%	0.2%	0.2%
Search Engine Optimization (SEO)	0.4%	0.2%	0.2%
Sales rep salaries	2.3%	2.3%	2.3%
Sales rep bonuses and perks	0.2%	0.1%	0.4%
Lead generation websites (Caring.com, etc.)	0.4%	0.4%	0.3%
All other marketing-related expenses (consulting, etc.)	0.4%	0.2%	0.2%
Total Sales & Marketing Expenses	4.4%	3.9%	4.1%
Operating Expenses			
Rent, maintenance, and utilities	1.6%	1.9%	1.6%
Office support wages (admins, schedulers, HR staff, nurses)	8.5%	8.4%	7.1%
Executive team wages (exclude all owners)	4.6%	3.8%	3.1%
Scheduling software, including telephony	0.5%	0.3%	0.4%
Franchise royalty fees (if applicable)	4.9%	5.0%	4.4%
Association/membership dues (if applicable)	0.1%	0.1%	0.1%
Travel/meals/entertainment expenses	0.3%	0.3%	0.2%
*Other operating expenses (exclude owners' salary and benefits)	3.6%	3.3%	4.5%
Total Operating Expenses	24.1%	23.2%	21.4%



5.13 Home Care Profit & Loss Comparison for 2024 - Revenue Ranges

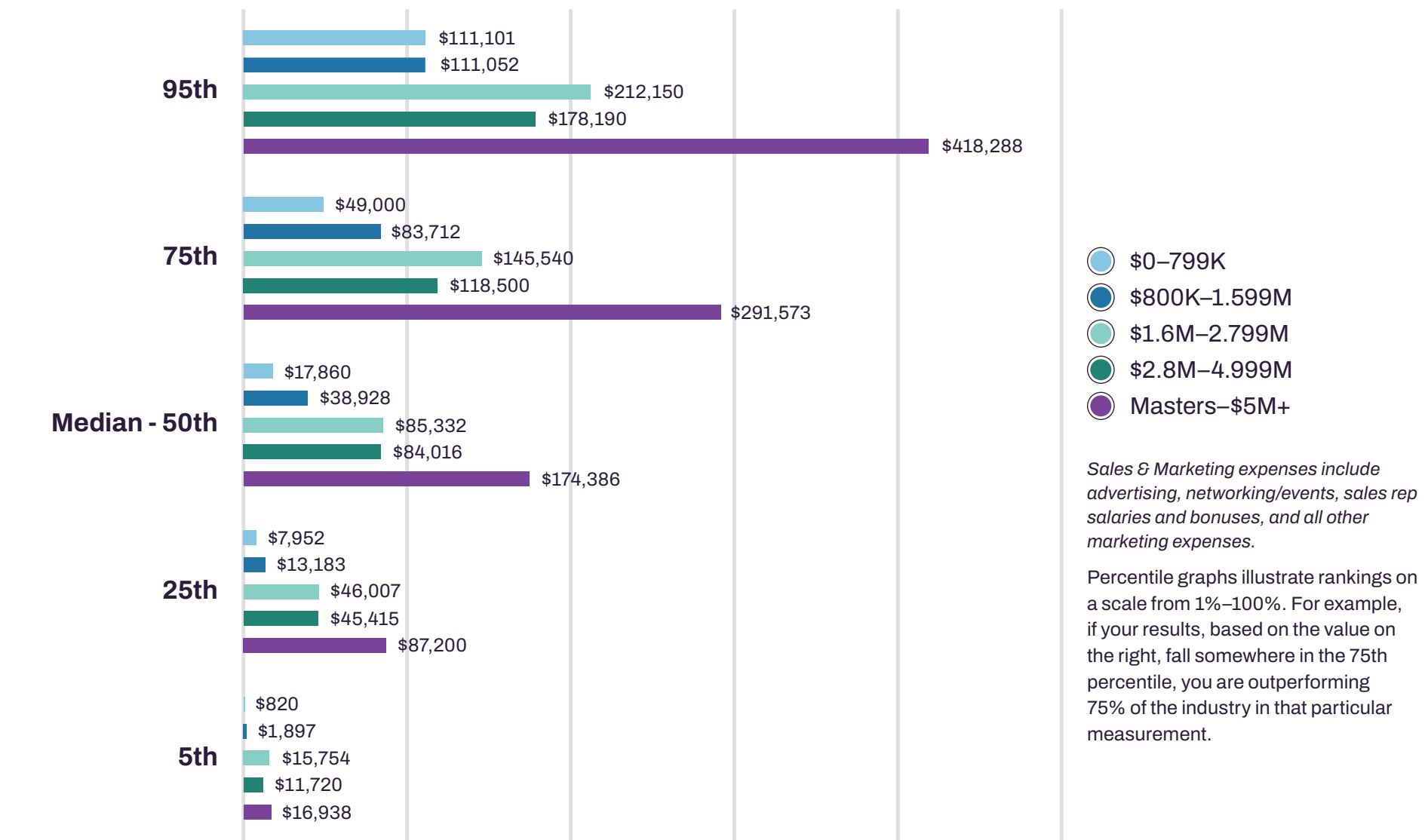
*See previous page for expense examples.

Masters

Revenue Range	\$0-\$799K	\$800K-\$1.599M	\$1.6M-\$2.799M	\$2.8M-\$4.999M	\$5M+
Median Annual Revenue	\$385,274	\$1,153,540	\$2,205,290	\$3,775,366	\$6,955,075
Direct Care Expenses					
Professional Caregiver wages	61.9%	50.3%	51.9%	50.7%	50.6%
Workers' Comp insurance	1.3%	1.0%	0.8%	0.9%	0.9%
Professional Caregiver benefits (health, 401k, supplemental, etc.)	2.3%	0.9%	0.7%	1.3%	0.9%
Professional Caregiver payroll taxes (employer taxes, insurance, etc.)	6.7%	5.3%	5.1%	4.5%	4.9%
Professional Caregiver reimbursements (mileage, meals, etc.)	0.9%	0.6%	0.3%	0.5%	0.4%
Professional Caregiver ongoing training (not initial training)	0.6%	0.3%	0.2%	0.1%	0.1%
*Other direct care expenses not listed	0.8%	0.6%	0.2%	0.1%	0.2%
Total Direct Care Expenses	74.4%	58.9%	59.1%	58.2%	58.1%
Professional Caregiver Recruitment & Retention Expenses					
Professional Caregiver job ads, online recruitment sites, postings, etc.	0.6%	0.5%	0.4%	0.3%	0.2%
Professional Caregiver background checks and screenings	0.5%	0.2%	0.1%	0.1%	0.1%
Professional Caregiver retention (bonuses, recognition program, etc.)	0.5%	0.3%	0.3%	0.2%	0.3%
Professional Caregiver onboarding and initial training	0.5%	0.4%	0.2%	0.2%	0.1%
Team wages associated w/ recruiting/retaining professional caregivers	2.8%	2.9%	2.0%	1.8%	0.9%
Pre-employment assessments	0.3%	0.2%	0.2%	0.3%	0.0%
All other expenses related to recruiting/retaining professional caregivers	0.4%	0.5%	0.1%	0.2%	0.1%
Total Professional Caregiver Recruitment & Retention Expenses	5.7%	5.1%	3.3%	3.1%	1.7%
Sales & Marketing Expenses					
Traditional advertising (radio, print, etc.)	0.6%	0.4%	0.3%	0.2%	0.3%
Internet advertising (Google Ads, paid ads on Facebook, etc.)	0.5%	0.4%	0.5%	0.2%	0.2%
Networking and events (community, gifts, conventions, etc.)	0.5%	0.2%	0.2%	0.2%	0.2%
Search Engine Optimization (SEO)	1.0%	0.6%	0.5%	0.2%	0.2%
Sales rep salaries	4.6%	3.5%	3.2%	1.7%	1.4%
Sales rep bonuses and perks	0.4%	0.7%	0.3%	0.1%	0.3%
Lead generation websites (Caring.com, etc.)	1.4%	0.3%	0.6%	0.2%	0.1%
All other marketing-related expenses (consulting, etc.)	0.8%	0.6%	0.2%	0.3%	0.2%
Total Sales & Marketing Expenses	9.8%	6.7%	5.7%	3.1%	2.7%
Operating Expenses					
Rent, maintenance, and utilities	3.2%	1.8%	1.8%	1.5%	1.1%
Office support wages (admins, schedulers, HR staff, nurses)	11.5%	9.1%	9.2%	7.1%	6.4%
Executive team wages (exclude all owners)	8.3%	10.3%	4.0%	4.6%	2.8%
Scheduling software, including telephony	0.8%	0.5%	0.4%	0.3%	0.3%
Franchise royalty fees (if applicable)	5.4%	4.9%	5.0%	4.7%	4.0%
Association/membership dues (if applicable)	0.3%	0.2%	0.1%	0.1%	0.1%
Travel/meals/entertainment expenses	0.6%	0.6%	0.3%	0.3%	0.2%
*Other operating expenses (exclude owners' salary and benefits)	5.1%	4.0%	4.4%	3.2%	3.4%
Total Operating Expenses	35.3%	31.4%	25.0%	21.6%	18.1%

OTHER EXPENSES

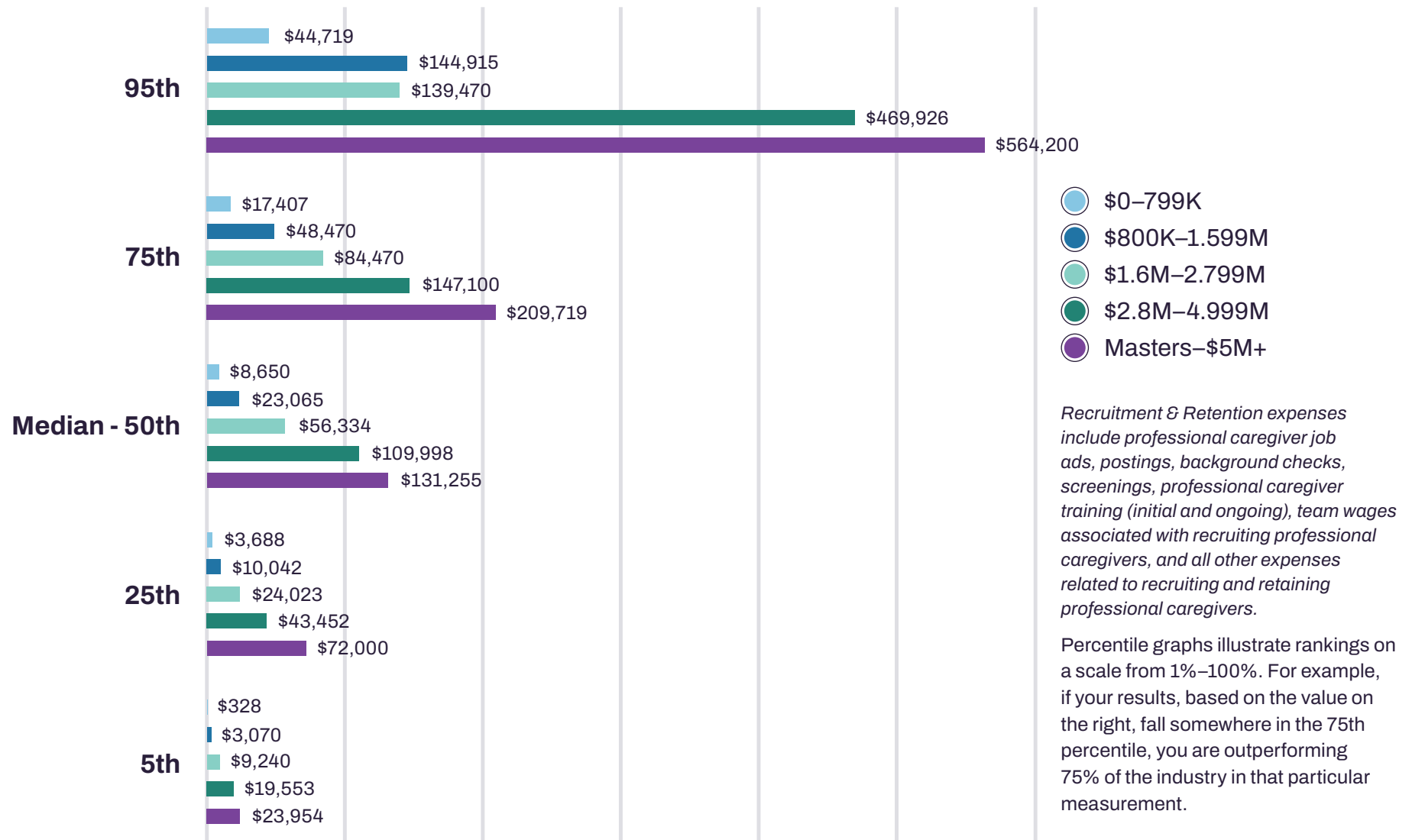
5.14 Home Care Sales & Marketing Expenses Percentile Ranking for 2024 - Revenue Ranges





OTHER EXPENSES

5.15 Home Care Recruitment & Retention Expenses Percentile Ranking for 2024 - Revenue Ranges



REVENUE GENERATED BY SERVICE OFFERINGS

5.16

Home Care

Historical Revenue Generated by Service Offerings

Service Offerings	2024	2023	2022	2021
Hourly Care	89.7%	85.6%	86.3%	86.9%
Live-In Care	5.5%	8.3%	7.4%	7.1%
Skilled Nursing	1.1%	1.4%	1.5%	2.1%
Health Care Staffing Services	0.7%	0.7%	1.3%	1.3%
Medicare Home Health	0.6%	0.5%	1.3%	0.3%
Geriatric Care	0.5%	0.2%	0.5%	0.9%
Alert Monitoring Services	0.2%	0.3%	0.1%	0.3%
Other Services	1.7%	1.2%	1.6%	0.9%

Survey participants were asked, “What percent of your annual revenue came from the following service offerings?”

Other Service Offerings Mentioned:

- Adult Foster Care
- Case Management
- Concierge-drop-in Visits
- Consulting Fees
- Independent Living Services
- MEALS
- Medication Management
- Non-Emergency Medical Transportation
- Nurse Assessments
- Placement
- Transportation, Home-Delivered Meals
- Veteran Administration
- Well-Being & Essentials Programs



PAYER SOURCE PERCENTAGES

5.17 Home Care Historical Payer Source Percentage of Revenue

Service Offerings	2024	2023	2022	2021
Private pay	65.3%	59.6%	64.3%	64.6%
Long-term care insurance	10.3%	10.0%	10.9%	11.6%
Veterans Administration programs	9.3%	9.7%	7.1%	6.1%
Medicaid Waiver program	5.6%	3.9%	7.1%	6.8%
Billed Medicaid directly	2.5%	1.5%	2.6%	3.3%
Area Agencies on Aging (AAA)	1.4%	0.5%	0.1%	0.4%
Managed Care Organization (MCO)	1.2%	0.9%	1.5%	1.6%
Workers' Compensation	1.2%	0.8%	1.7%	1.2%
Trusts/banks	0.5%	0.2%	0.1%	0.2%
Other Insurance	0.5%	0.6%	0.7%	1.1%
Medicare reimbursement	0.3%	0.3%	0.4%	0.6%
Billed hospitals directly	0.3%	0.5%	0.2%	0.3%
Medicare Advantage reimbursement	0.2%	0.3%	0.7%	0.5%
Accountable Care Organization (ACO)	0.0%	0.2%	0.5%	0.1%
Other	1.4%	1.1%	2.2%	1.3%

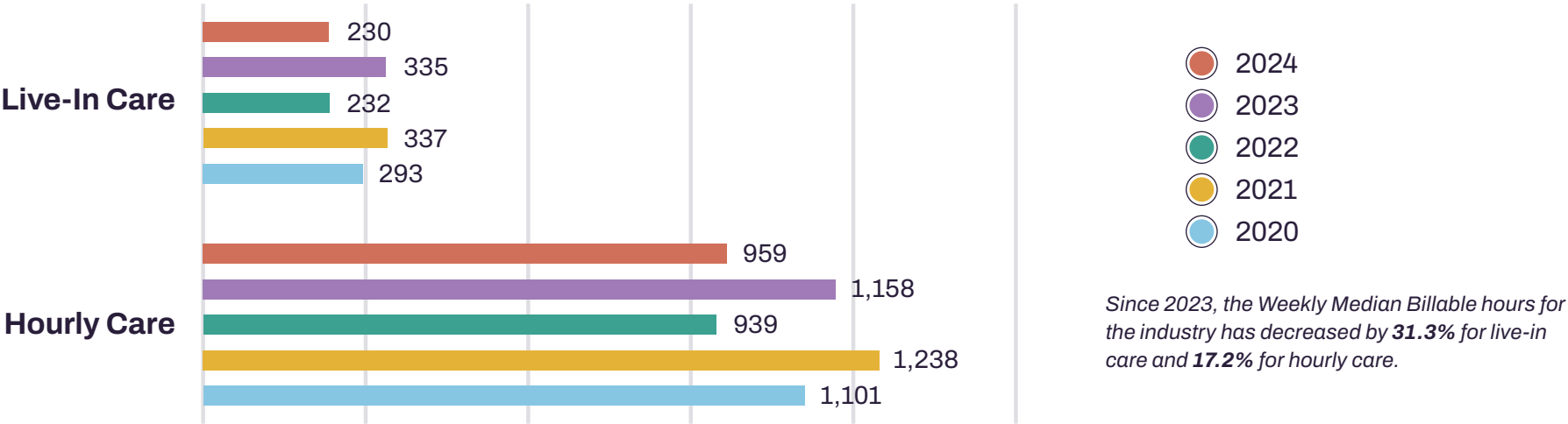
Survey participants were asked, "What percent of your annual revenue came from the following payer sources?"

Other Payer Sources Mentioned:

- Aid & Attendance Pension
- ALS Organizations
- Bright Horizons
- Care.com
- County Department on Aging
- Developmentally Disabled Homes
- FMHC
- Grants
- Local Hospital
- Non-Profit Grant Providers
- PACE Program
- Regional Center – LVN Respite for Developmental Disabilities
- Self-Help Group – Holocaust Survivor Agency
- Third-Party Insurance Payee
- Third-Party Payers (e.g., Partners in Care, Jewish Family Services)
- VA A&A Pension Program

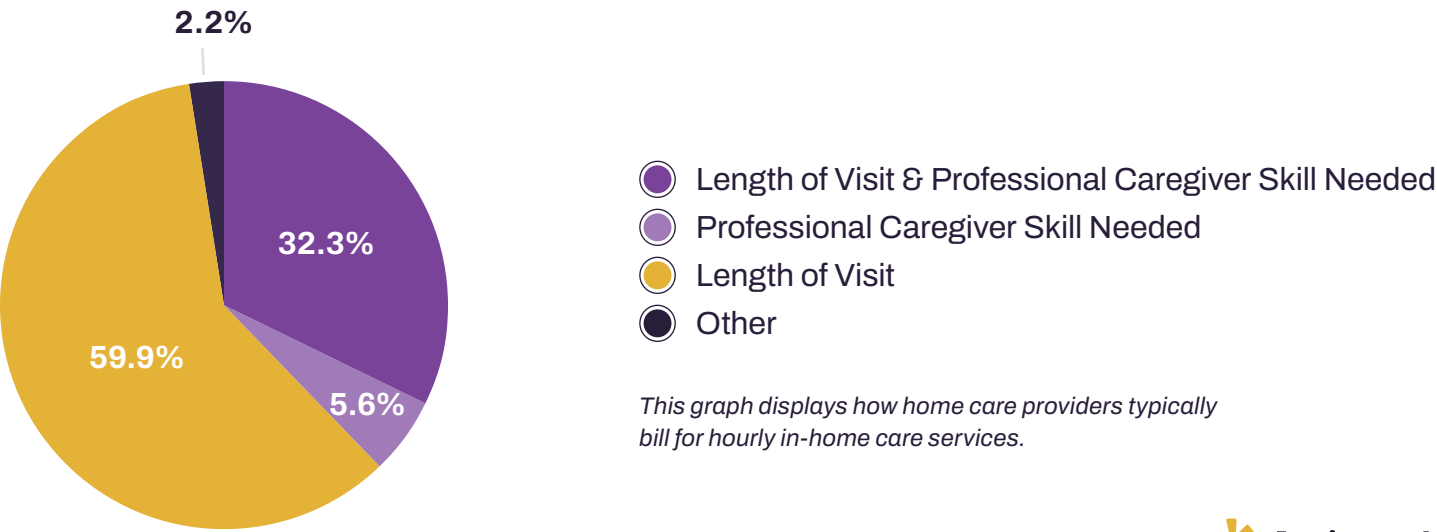
BILLING METHODS

5.18 Home Care Historical Median Weekly Billable Hours



BILLING METHODS

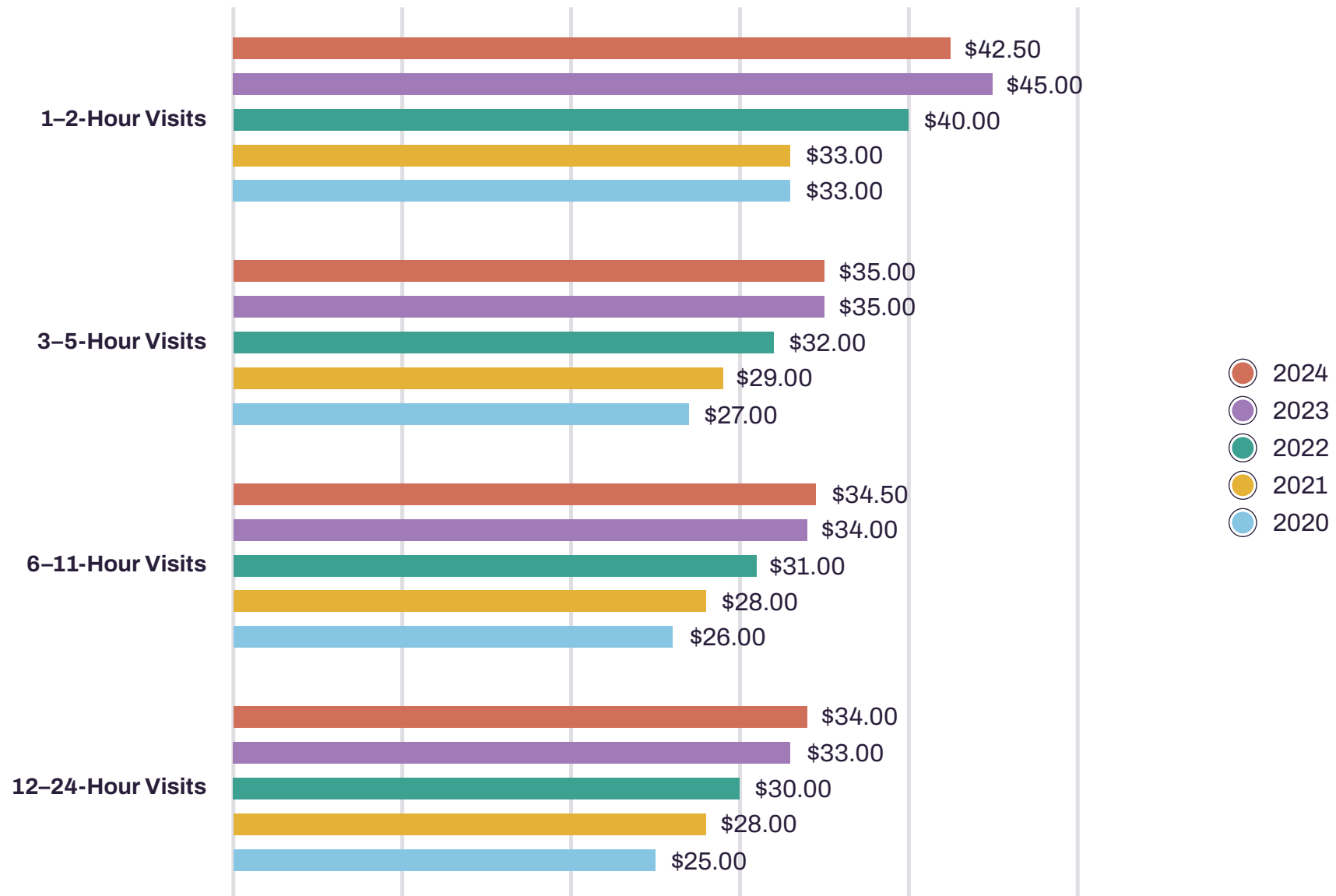
5.19 Home Care Service Billing Methods for 2024





BILLING RATES

5.20 Home Care Historical Median Billing Rates by Length of Visit



BILLING RATES

5.21 **Home Care** Median Billing Rates by Length of Visit for 2024 - Geographic Region





BILLING RATES

5.22 **Home Care** Median Billing Rates by Care Professional Skill Level for 2024 - Percentile Ranking



BILLING RATES

5.23 **Home Care** Care Professional Skill Level Billing Rates for 2024 - Geographic Region



ARTICLE

Demystifying Medicaid: A Guide to Home-Based Care Services



Jacob Taitel

Director of Research & Strategy
Paradigm Senior Services

❖Paradigm.

We've heard it all before: "Our agency is private pay only," or "We take some Medicaid, but not much," or even, "We'd consider Medicaid if we understood it better." The truth? Medicaid is one of the most misunderstood resources in the home-based care industry.

While Medicaid plays a critical role in providing healthcare for millions, its potential as a driver of growth and stability in home-based care often goes overlooked. Many agencies shy away from Medicaid due to its perceived complexity, missing out on opportunities to expand their client base, diversify revenue streams, and make a real difference in their communities.

Understanding Medicaid for home-based care starts with separating fact from fiction. This article will provide you with the clarity you need to make informed decisions about incorporating Medicaid into your business.



Understanding the Basics

Medicaid’s structure and administration vary significantly by state, creating a diverse landscape of programs and requirements. This state-level control enables programs to be tailored to local needs while ensuring that certain benefits are always available. Some of the mandatory benefits include:

- Transportation to Medical Care (1902(a)(4))
- Inpatient Hospital Services (1905(a)(1))
- Physician Services (1905(a)(5))
- Home Health Services (1905(a)(7))

Two notable omissions from this list of mandatory services are [Home and Community Based Services \(HCBS\)](#) and Hospice Care, which are technically optional for each state to provide. HCBS are available through either state Medicaid programs or Medicaid waivers, with the most relevant waivers for our industry being the 1915(c) waivers and the 1115 Demonstration waivers.

Medicaid Waivers and State Programs

Medicaid waivers serve as specialized programs that allow states to customize how they deliver services. These waivers, named after specific sections of the Social Security Act, create flexibility in service delivery and eligibility requirements.

State Plans

States can offer home-based care services through their standard Medicaid State Plans. These services:

- Require no special federal approval
- Must be available to all eligible Medicaid recipients
- Follow standard federal guidelines for service delivery



“Medicaid is one of the most **misunderstood resources** in the home-based care industry.”

- Include [mandatory benefits](#) like home health care
- Can incorporate [optional benefits](#) such as personal care services

1915(c) Home and Community Based Services Waivers

The 1915(c) waiver, often called the [HCBS waiver](#), represents the most common pathway for home-based care service delivery. [These waivers](#):

- Allow states to provide long-term care services in home and community settings rather than institutional settings
- Set specific financial eligibility criteria for participants
- Allow for states to provide services to specific populations (ex. Persons Who are Elderly, Persons with Developmental Disabilities, Persons with HIV/ AIDs, etc.)
- Define service packages that can include personal care, home health, adult day care, and other support services

- Establish provider requirements and reimbursement rates
- Require regular renewal and reporting to maintain federal approval

1115 Demonstration Waivers

The [1115 waivers](#) serve as innovation platforms for states to test new approaches to service delivery. Key features include:

- Temporary nature, typically lasting five years for the initial waiver and then renewing for three years
- Broader flexibility to experiment with service delivery models
- Ability to expand eligible populations
- Requirements for evaluation and outcome reporting
- Option to test new payment methodologies



The Growing Role of Managed Care Organizations (MCOs)

States increasingly rely on MCOs to separate the financing of Medicaid from direct service delivery—allowing specialized private organizations to manage care while the state maintains oversight and accountability ([MacPac](#)), transforming Medicaid service delivery. According to recent data from the Kaiser Family Foundation, over 70% of Medicaid beneficiaries now receive care through MCO models ([KFF](#)). This shift toward managed care brings both opportunities and challenges for providers.

MCOs aim to improve care coordination and cost efficiency, but they require specific contracting and credentialing processes. Providers must understand

“This shift toward managed care brings both **opportunities and challenges** for providers.”

each MCO’s unique requirements, authorization procedures, and billing protocols. Success often depends on building strong relationships with MCO partners while maintaining compliance with their distinct requirements.

Electronic Visit Verification

The [21st Century Cures Act](#) mandates EVV implementation for personal care and home health services, marking a significant shift in how home-based care is documented and validated. This federal requirement aims to reduce fraud, improve service accountability, and ensure beneficiaries receive their authorized services as planned.

EVV systems track service type and location, recording precise details of care delivery including care employee and recipient identification, start and end times, and date of service. These systems must integrate seamlessly with state aggregators and MCOs, often requiring sophisticated data matching and reconciliation processes. Many states have also added optional elements like tasks completed and electronic signatures to enhance oversight.

Family Caregiving Programs

Medicaid’s approach to [family caregiving](#) includes both structured and unstructured options. Structured Family Caregiving (SFC) programs, available in eight states with Nevada joining in 2025, provide comprehensive support including financial compensation, professional training resources, and ongoing support services.

Eligibility requirements for SFC typically include income limits for care recipients (generally \$2,829/month) and asset limits (\$2,000). Caregivers must pass background checks and meet state-specific requirements. While rules vary regarding spousal caregivers and outside employment, these programs represent an important option for families seeking to provide care at home.

Unstructured programs simply allow for family members to serve as caregivers that the agency must hire. The main difference from an agency standpoint is that in SFC programs, providers will be required to bill different codes and likely are paid on a per diem basis for the services, whereas unstructured programs function like any other Medicaid client. SFC programs also do not regularly require EVV.

Getting Started Right

Before you accept any clients, make sure you:

- Use an EVV system that meets state requirements
- Complete Medicaid credentialing and MCO contracting
- Put authorization verification processes in place
- Train your team on proper documentation

Mastering Billing

Accurate billing keeps your operation afloat. Here’s what to focus on:

Understand Payer Requirements

- Each payer (state or MCO) has unique rules and timelines
- Align your billing workflow to each payer’s standards
- Keep payer-specific billing guides and payer contracts handy

Prevent Denials Through Quality Control

- Regularly audit coding and documentation
- Stay current on code changes
- Track common denial reasons to catch issues early

Managing EVV Data Quality

- Match EVV and billing data daily
- Sync systems often and resolve discrepancies quickly
- Validate service delivery data before submitting claims

Navigating Eligibility Changes

Medicaid eligibility can shift at any time. Protect your revenue by:

- Verifying eligibility before taking on new clients
- Scheduling regular eligibility checks
- Setting alerts for triggers that could affect coverage
- Staying in touch with care managers

The Authorization Process

Most HCBS waivers and services require prior authorization. Remember:

- Confirm you have a valid authorization before providing care
- Ask the case manager if you’re unsure about anything
- Track authorization expiration dates and renew them promptly

Key Tip: Never start services without confirmed authorization. If Medicaid doesn’t pay, you can’t bill clients for the difference—you take the loss.

Looking Ahead

Medicaid rules change often, so stay informed, keep your systems flexible, and always prioritize compliance. While it may seem overwhelming, Medicaid exists to serve those who need it most. With the right preparation, you can meet these challenges and continue providing high-quality care to your community. 

ABOUT THE AUTHOR

***Jacob Taitel**, Director of Research and Strategy at [Paradigm](#), is a recognized authority on Medicaid, waivers, and other third-party payers in the home care industry. Having consulted with hundreds of providers nationwide, he is widely regarded as a go-to expert for navigating complex payer landscapes and optimizing reimbursement strategies in home care.*



ARTICLE

Using Data to Forecast the Future of Your Business



Robin Tuck

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The saying, “go with your gut,” does not apply to every situation. When it comes to running a business, “feelings” should not have the final say in decision-making; that way lies madness.

In this modern age where technology is literally at our fingertips and data is readily available, sometimes instincts need to take a back seat to what the numbers are telling us.

Your gut may say one thing, but the data may say another. Home-based care providers should never assume they know how every aspect of their business performs. Here’s how to use data to back up any feelings about your business to ensure you’re steering it in the right direction.



The Bottom Line: It’s All About ROI

Home-based care providers should strive to have a margin that allows for continued growth—the most important piece of determining your return on investment (ROI).

The first step in this process is to ascertain what you’re doing right now and what the current margins are. After this data has been collected, look at the numbers and decide whether or not you’re happy with the results.

If the current margins are good, then aim for those same margins when adding additional service lines or diversifying payor sources.

Examples of additional service lines may include:

- Turndown service
- Respite care
- Holistic therapy
- Nutritional consultations
- Care management
- New Medicaid Waiver Programs

For private pay agencies, additional payor sources could include:

- Veterans Administration
- Long-Term Care Insurance
- Medicaid
- Worker’s Compensation

Begin with a handful of new clients through your additional channels to implement new services and payor sources. As your agency provides services to those new clients, study the results and check your margins and make sure they’re holding steady with your expectations.



Next, check your staffing capabilities, and take the following factors into account when looking at your margins: Are your service lines or new payor sources more difficult to staff or are they similar to current operations? Does staffing those shifts require additional care staff or a higher level of pay?

As you’re testing out new channels, be sure to regularly review their ROI, and not just at the very beginning, as there can often be front-loaded expenses when starting a new service line or pay source.

Calculating Your ROI

To calculate ROI, you need to know your net income and total costs:

- **Net Income:** Your business’ profit after all expenses have been paid.
- **Total cost:** Include the initial investment like any licenses or supplies as well as any ongoing costs, such as insurance or marketing.

Measure ROI as follows:
 $(\text{net income} \div \text{total costs}) \times 100 = \text{ROI} \%$

To determine your agency’s margin, you need to know your net profit and your revenue:

- **Net Profit:** The money you get to keep after all expenses and taxes are paid.
- **Revenue:** The total amount of income generated by the sale of your services.

Measure your margin using this formula:
 $(\text{net profit} \div \text{revenue}) \times 100 = \text{Net profit margin} \%$

Measuring Your Recruitment and Retention

As your company grows, it is crucial to understand where that growth comes from. Are you recruiting and retaining the “right fit” staff and clients at a high enough rate to positively influence your bottom line?

Home-based care providers should consider instituting care staff reward platforms to help boost retention and employee morale. Performance-based incentives, gas cards, staff lunches, and other office-wide events can help strengthen your staff’s sense of community, thereby increasing retention rates.



When recruiting candidates, track where new care staff are coming from. Determine how much it's costing your business to invest in recruitment to make sure you're spending your budget wisely and in the right places.

Ask yourself important questions, like:

- How much are you getting back on that investment?
- Are referral bonuses working?
- Are new employees staying on board and working all the hours they initially said they would when hired?
- Are the care staff working out according to both your needs and agency standards?



Calculating Turnover and Lost Revenue

Be aware of turnover rates and lost revenue from callouts and late clock-ins. Look at the data frequently, especially if you have sudden turnover events.

For example, if three or more care employees leave your company around the same time, it's a good time to look at turnover events to determine what caused the mass exodus.

The formula for calculating turnover is to take the number of employees who quit or were discharged during a specified period (typically a month or a year) and divide it by the average number of active care staff. Then multiply that number by 100, and you have your turnover percentage.

Example: For an agency with 40 active care employees on average, if 14 people left in one month, then the monthly turnover formula would look like this:
 $(14/40) \times 100 = 35\%$

Lost revenue can be calculated by adding the total billing amount of each canceled or no-show shift.

Example: For an agency with 10 canceled four-hour shifts in a month at an average billing rate of \$25 per hour, the total Lost Revenue formula would look like this:
 $(4 \times 25) \times 10 = \$1,000$ in lost revenue for the month.

Performing a Client Review

Sometimes, it's not you, it's them. If you have high caregiver turnover for a specific client, that information

might go a long way in helping your business administrators determine if the cost of caring for that client is worth it.

Does your company have consistent cancellations for one particular client? Do your care staff frequently complain about them? How many employees has your agency rotated through that client?

When looking at the data, if you find that these numbers are higher than normal, it may be time to move on from that particular client. If you have a difficult client who's not worth the time, effort, and frustrations of your staff, then firing that client to retain care staff is always an option.

This might be a new perspective for your company, but you can't wait until the client in question has burned through half of your caregiving staff to determine if they're the best fit for your agency. Watch your data consistently.

When to Pull Your Data

At a minimum, you should be pulling your home-based care company's data quarterly. For some reports like overall revenue, you may want to review your data quarterly and year-over-year to get a better sense of trajectory.

Regardless, the point is to pull your business' data often enough to see patterns going on in the business. This may mean creating reports as often as monthly over the course of a year to see how holidays and seasons affect revenue and turnover rates.

“If you have high caregiver turnover for a specific client, that information might go a long way in **helping your business administrators determine if the cost of caring for that client is worth it.**”



“Watch your data points month-over-month, quarter-over-quarter, and year-over-year to better **forecast exactly how your business is going to perform so you can make adjustments** to policy, processes, service lines, etc. and change the trajectory of your business.”

By collecting data points like these, you'll be able to make forecasts for what to expect over the next year. Compare those expectations to your company's data to improve forecasting moving forward. Let the data prepare you for growth with a great next month, next quarter, and next year.

Watch your data points month-over-month, quarter-over-quarter, and year-over-year to better forecast exactly how your business is going to perform so you can make adjustments to policy, processes, service lines, etc. and change the trajectory of your business.

As a home-based care provider, it's never been more important to home in on your company's data to determine what actually happened in your business versus what you thought would happen. By digging deeper into the numbers, seasonality reports, trends, and unexpected fluctuations, you'll be able to better forecast the future, and position your business for success.

ABOUT THE AUTHOR

Robin Tuck is the Senior Product Owner and Project Manager at [Rosemark](#), a home care management software provider. A seasoned veteran in the home care technology space, Robin is passionate about finding creative solutions to help her customers get the most out of their software, so they can focus more on their caregivers and clients. When she's not working, she's probably writing, taking walks, or stripping 800 layers of paint off every inch of her 140-year-old house.

ARTICLE

Preparing Your Home-Based Care Agency for Sale: How to Maximize Value in a Transaction



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Gunville**

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How do I sell my business?" This is a question we frequently get from our clients. Helping our clients navigate through such an exciting, career-defining, major life milestone is one of the great joys of our practice. However, as well-intentioned as sellers are, many are surprised by the intensity of due diligence, and learn of potential issues that negatively impact the value of their business for the first time during the due diligence process of a deal.

There are certain steps business owners with plans to sell their agencies should be taking now to maximize the value of their business, and achieve a multiple worthy of the blood, sweat and tears shed to build an amazing business. This article offers a high-level roadmap of the considerations and steps that potential sellers should take leading up to a potential sale, with a particular focus on the due diligence process, and the avoidance of pitfalls that have commonly ensnared first-time sellers.

Doing Your “Due Diligence”

Most everyone has heard of the “due diligence” process in transactions; however, like packing for Bermuda and being diverted to Iceland, the experience for the unprepared can be quite unpleasant.

Due diligence, put simply, is the process by which a potential buyer analyzes the practices and procedures of an agency or asset that is the target of an acquisition. While some basic or preliminary diligence is often conducted to determine interest, the real action usually begins after the parties sign a “letter of intent” defining the terms of an exclusive review and negotiation period to determine if the potential deal will move forward—and at what price.

Below is a “playbook” of seller considerations leading up to and during the diligence process:

1. Evaluate if the Operational Structure Optimizes Value

“The house don’t fall when the bones are good.” One of the first considerations for a seller is whether their business is structured in a fashion that heightens their success in a transaction and optimizes value. For example, are there separate business lines under the same entity with one being more marketable than the other? Are there multiple owners with different equity percentages?

Consider forming a holding company with separate entities for each service line, as many strategic buyers want a “tuck in” to expand their market presence by adding a specific service line without having to go through the arduous process of developing it themselves. How your business is structured, and transactional flexibility has a considerable impact on your overall value to potential buyers. These are all items that you need to address on the front end with your trusted legal counsel.

2. Perform an Organizational “Health Check” Early in the Process

While transactions vary in many regards, acquirers utilize a checklist of largely universal diligence items to collect required information from the seller. Sophisticated buyers often use narrowly tailored, targeted, industry-specific diligence requests that prevent diligence from becoming overly burdensome.

The first step to proactively prepare for due diligence is to conduct a “health check” of your business using a blueprint that mirrors the diligence process to learn about your points of leverage and your areas of opportunity for improvement.



“Sellers should conduct an internal audit to **determine any areas of non-compliance** and work to **correct these issues** prior to beginning the transaction process.”

This “health check” can help prepare for the diligence process by collecting as many relevant company documents as possible, including: contracts with third parties (from payor contracts, staffing contracts to client and caregiver contracts), the financials of the business, loans and other debt documents, organizational documents, employment agreements and company handbooks and policies, licenses, governmental and commercial payor enrollments and contracts.

Savvy buyers have major concerns regarding successor liability. Nothing will compress your multiple like potential successor liability.

Successor liability is when the acquiring company is held liable and responsible for the obligations of the former owner. While most business owners know the concept, there are many myths regarding successor liability. The general assumption is that an asset acquisition cuts off successor liability while a stock purchase results in the buyer assuming the liabilities of the seller.

However, when liability arises from certain sources, such as some labor or pay practice violations, the courts **do not permit the buyer to disclaim successor liability. Multiple court holdings exist where the buyer was held to multiple millions of liabilities** under a successor liability theory.

When it comes to due diligence, labor and employment-related issues are major risk areas regarding successor liability. This is significant given that your workforce makes up nearly all of the value of your business. A savvy buyer will focus carefully on compliance with labor laws and carve any potential liabilities out of the purchase price or hold the potential liability amount in escrow, so the risks associated with past non-compliance will remain with the seller. Sellers should conduct an internal audit to determine any areas of non-compliance and work to correct these issues prior to beginning the transaction process.



“The deal making process is just as much about you **analyzing your buyer** as it is about the **buyer analyzing you**.”



3. To Broker or Not to Broker?

Many sellers are weary of using a broker during their transactions; however, you should not be. In fact, the right broker can change your life—literally. **Here are some questions for you to consider when evaluating whether you should use a broker:**

- How would you negotiate your deal differently if you had a home health vs. a home care business?
- How does your business size, geography, and licensing impact your deal?
- How well connected are you to potential buyers?
- How sophisticated are you with the deal process?

Industry expertise is a must for choosing the right broker, and different brokers have different sweet spots based on geography, deal size, business model, and a variety of other factors. We work with a lot of broker firms and can help you identify the right one for your business if you are unsure.

4. It Takes Kissing a Lot of Frogs to Find Your Prince

The sales lifecycle is a long and winding road that varies from transaction to transaction. To best tackle the road unknown, we must begin by thinking about your best assets, i.e., what do you bring to the table that is unique? The next task is to identify the buyer(s) who are looking for this type of asset. For example, are you more valuable as an add-on to a strategic buyer who is looking to penetrate a new market, or do you have a service line or license that can help a strategic buyer add a new dimension to their payor mix? We have seen more service line diversification in transactions than ever before as private equity and strategics face increasing pressure to scale rapidly.

A successful outcome can be achieved by taking your time, planning carefully, and avoiding artificial deadlines.

Timing is also a critical factor in transactions. Sometimes the timing isn't right but will be later, or sometimes the potential buyer passes but has someone else for you to talk to. For example, Polsinelli provides a complimentary service where we maintain a database of the home-based care buyers and sellers we work with so that we can assist in identifying possible buyers, but the seller (or the broker) will have to do its own due diligence about choosing the right deal and the right buyer. As a firm specializing in supporting home-based care industry providers, we work with thousands of providers and

offering this service to our client base is a value add most firms do not have the bench to support. If you would like our help, just pick up the phone!

5. “You Lookin’ at Me, Lookin’ at You”

Many sellers think they are the only ones under the microscope during a transaction. That is not true. The deal making process is just as much about you analyzing your buyer as it is about the buyer analyzing you.

It is best to address the big-ticket terms (i.e. the deal-killers) up front to ensure everyone is on the same page before getting too far into the weeds.

Below is a list of issues we suggest you address from the start:

- Are all owners in agreement to sell?
- Who are the decision makers on the buy side and what factors inform their decision?
- Are there any big-ticket issues or deal breakers that need to be discussed in advance (i.e. not willing to stay on for more than six months, etc.)
- What is the scope of diligence and data to be collected?
- What is the target close date and post-close obligations?
- What is the ideal structure of the deal and process for transferring the agency license and payor contracts to the new owner?
- Are there state notice obligations and, if so, the timing requirements for the same?
- What type of support/involvement does the buyer anticipate from the owner(s) and management team?
- Who makes up the control group with knowledge of the potential deal and what protections will be put in place to ensure confidentiality?

As you can see, there are many factors at play in home-based care transactions. The brokers can help get you the best deal; however, you need your legal team for the blocking and tackling as they help ensure everything runs smoothly during the transaction. You do not want to lose out on a deal because you did not negotiate the correct terms; or because you did not properly plan for a license transfer or timely notify the necessary third parties of the transaction.

Selling your business is one of the most rewarding and incredible endeavors of your professional career. While it can be stressful, if you find the right partners to help you navigate the waters, and if you plan your work and work your plan, this process will be well worth it. Remember: **YOU CAN DO IT!** You've got an army cheering you on as you run this race. Now it is time to finish strong. Go get 'em!



ABOUT THE AUTHORS

*With two decades of legal experience, **Angelo Spinola** specializes in employment litigation, focusing on the home health, home care, and hospice industries. He represents a range of clients, from Fortune 500 companies and franchisors to small businesses and franchisees. Angelo also advises private equity firms and investment groups on labor and employment issues during acquisitions and related activities.*

Angelo builds coalitions that provide comprehensive legal support to home-based care clients. He leverages legal expertise that is tailored for franchise systems and home care providers, offering industry insights, compliance, and direct access to critical legal resources.

His experience includes wage and hour investigations, pay audits, M&A due diligence, joint employment risk mitigation, and compliance strategies to minimize legal exposure. He also represents management in grievance arbitrations and drafts restrictive covenant agreements.

Beyond litigation, Angelo helps employers foster issue-free workplaces through counseling, training, and compliance programs. A sought-after speaker, he frequently presents on employment law topics to business organizations and HR professionals nationwide.

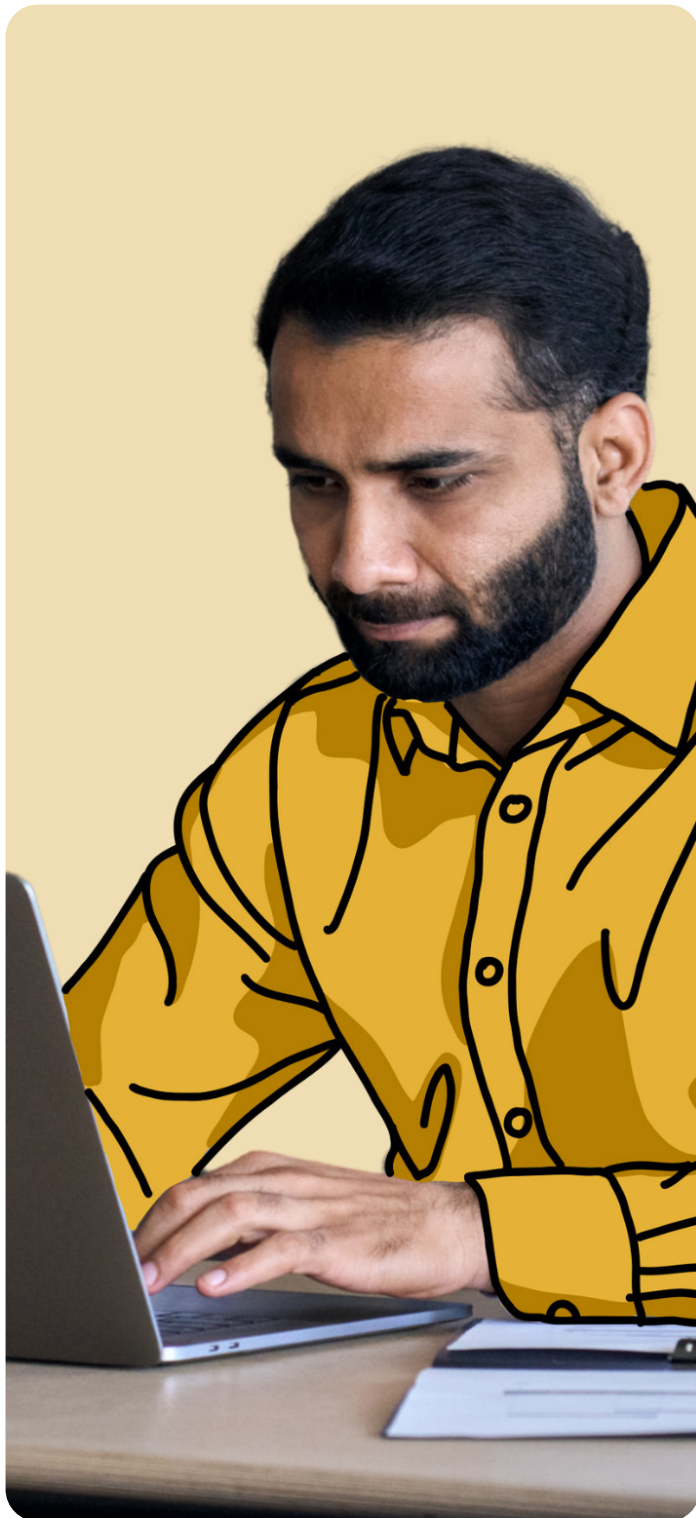
Clayton Nedza is an attorney for an Am-Law 100 law firm. Clayton has a broad entrepreneurship background, ranging from co-founding a

technology company to driving another technology company's client acquisition and retention strategy in the franchise space, resulting in a successful exit to one of the largest private equity firms in the world. Today, he uses his entrepreneurial background to assist clients in implementing practical solutions for their various legal needs. His practice focuses on transactions and litigation with a special interest in the franchise industry. Clayton works with an array of clients, including Fortune 500 organizations and franchisors, small businesses, and franchisees across multiple industries.

Jeanna Palmer Gunville focuses on corporate healthcare transactions and regulatory matters, helping clients navigate legal, business, and operational challenges.

She advises hospitals, health systems, academic medical centers, surgery centers, and post-acute care providers on mergers, acquisitions, joint ventures, clinical integration, cost-saving initiatives, outsourcing, and compliance with laws such as the Anti-Kickback Statute and Stark Law. She also provides guidance on licensure, governance, and general corporate matters.

Before practicing law, Jeanna served as a law clerk in the Consumer Protection Division of the Illinois Attorney General's Health Care Bureau and as a judicial extern for the U.S. District Court for the Northern District of Illinois.



SUMMARY

Operations

The Operations section highlights the biggest threats your business may face in the coming year (based on the latest data) and outlines steps you can take to prepare. It provides critical insights to help you assess your daily operations, pinpoint areas for improvement, and develop strategies for enhanced performance. In this section, you'll find valuable information on turnover rates, staffing levels, salaries and benefits, and readmission rates, enabling you to evaluate your company's internal management effectively.

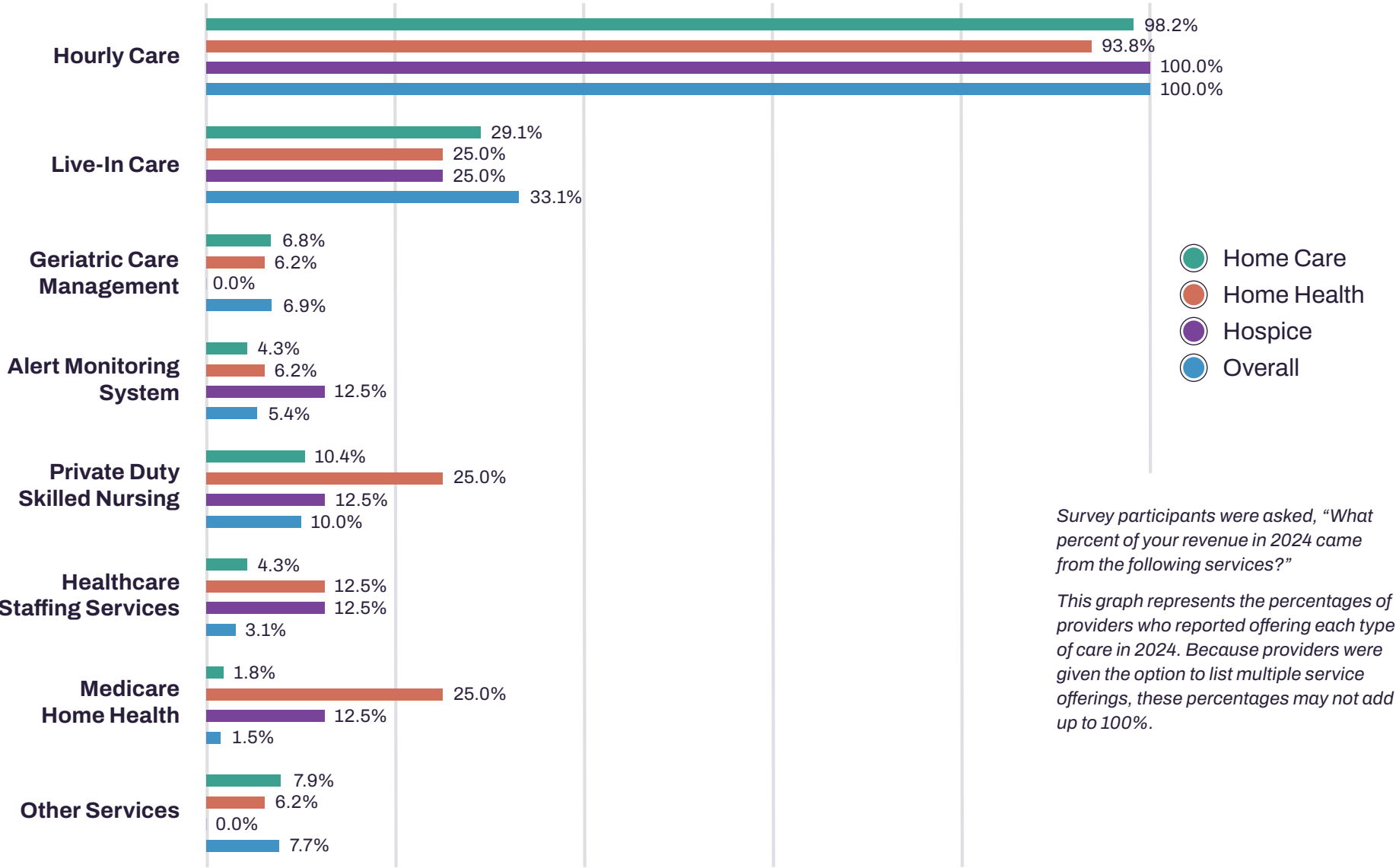
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| 157 Care Plans | 180 Business Accreditations |
| 159 Client Turnover Rates | 180 Live-In Care |
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SERVICE OFFERINGS

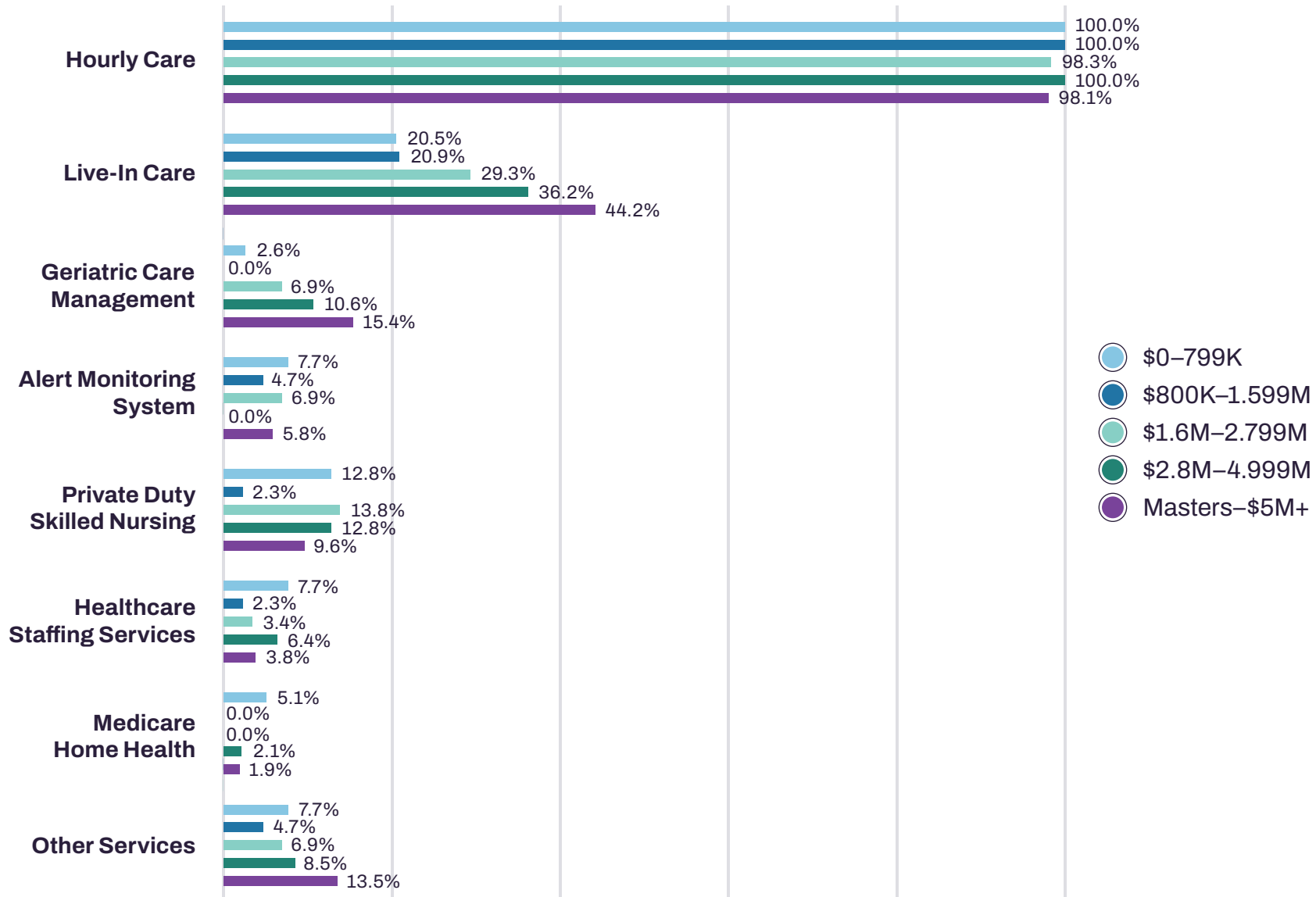
6.1 Overall Service Offerings for 2024 - Line of Business





SERVICE OFFERINGS

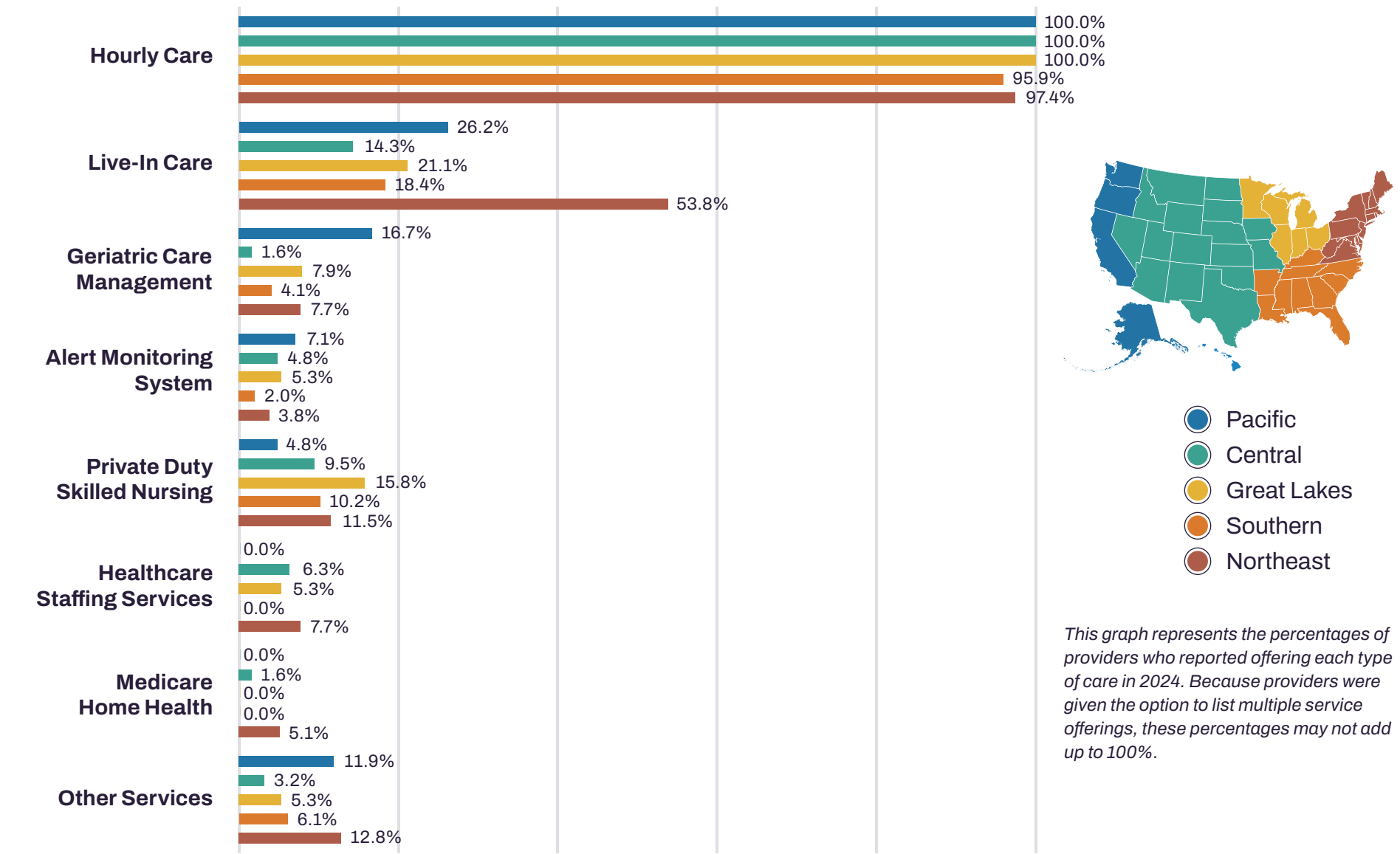
6.2 Home Care Service Offerings for 2024 - Revenue Ranges





SERVICE OFFERINGS

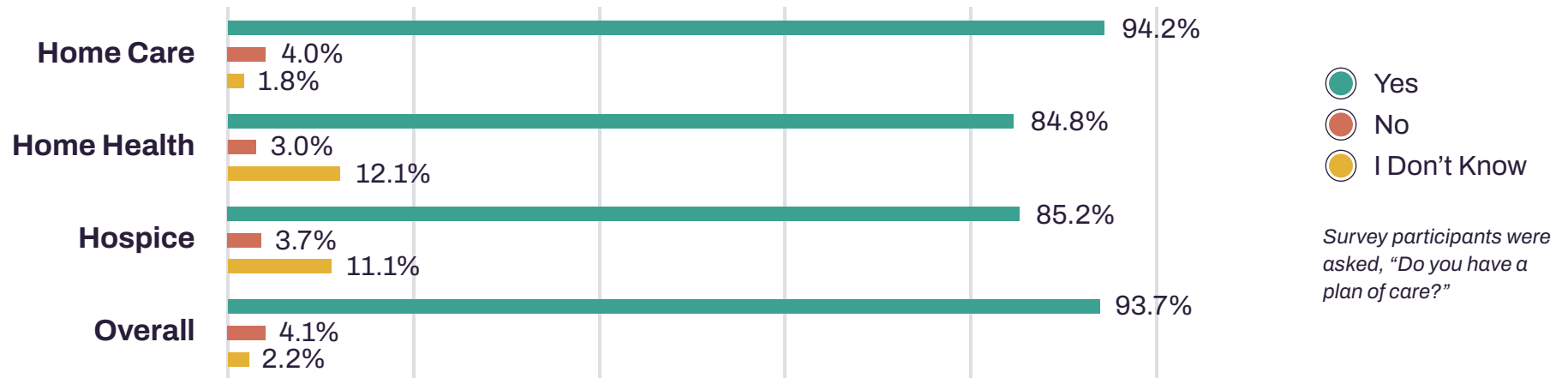
6.3 Home Care Service Offerings for 2024 - Geographic Regions





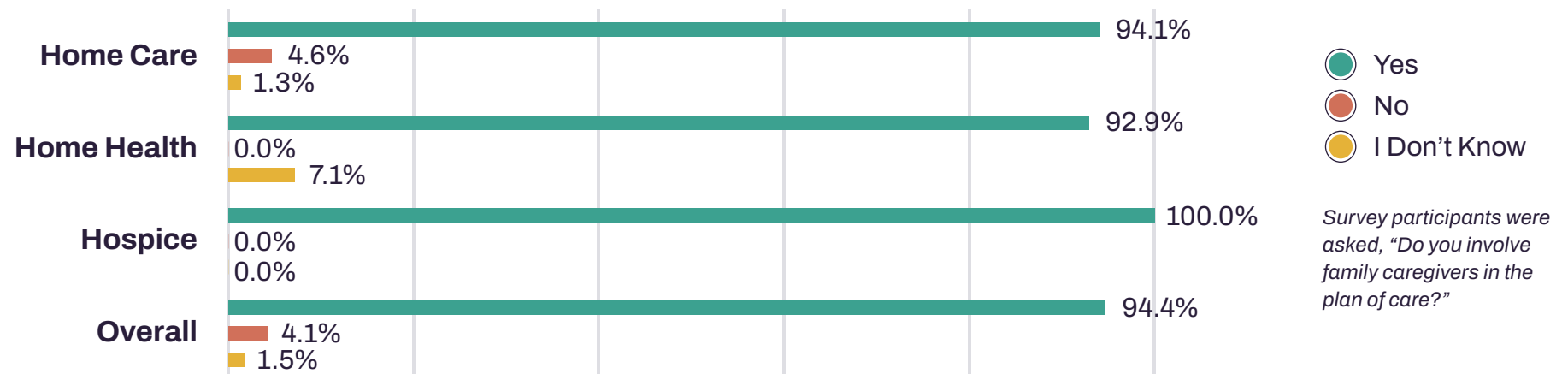
CARE PLANS

6.4 Overall Percent of Providers Having a Plan of Care - Line of Business



CARE PLANS

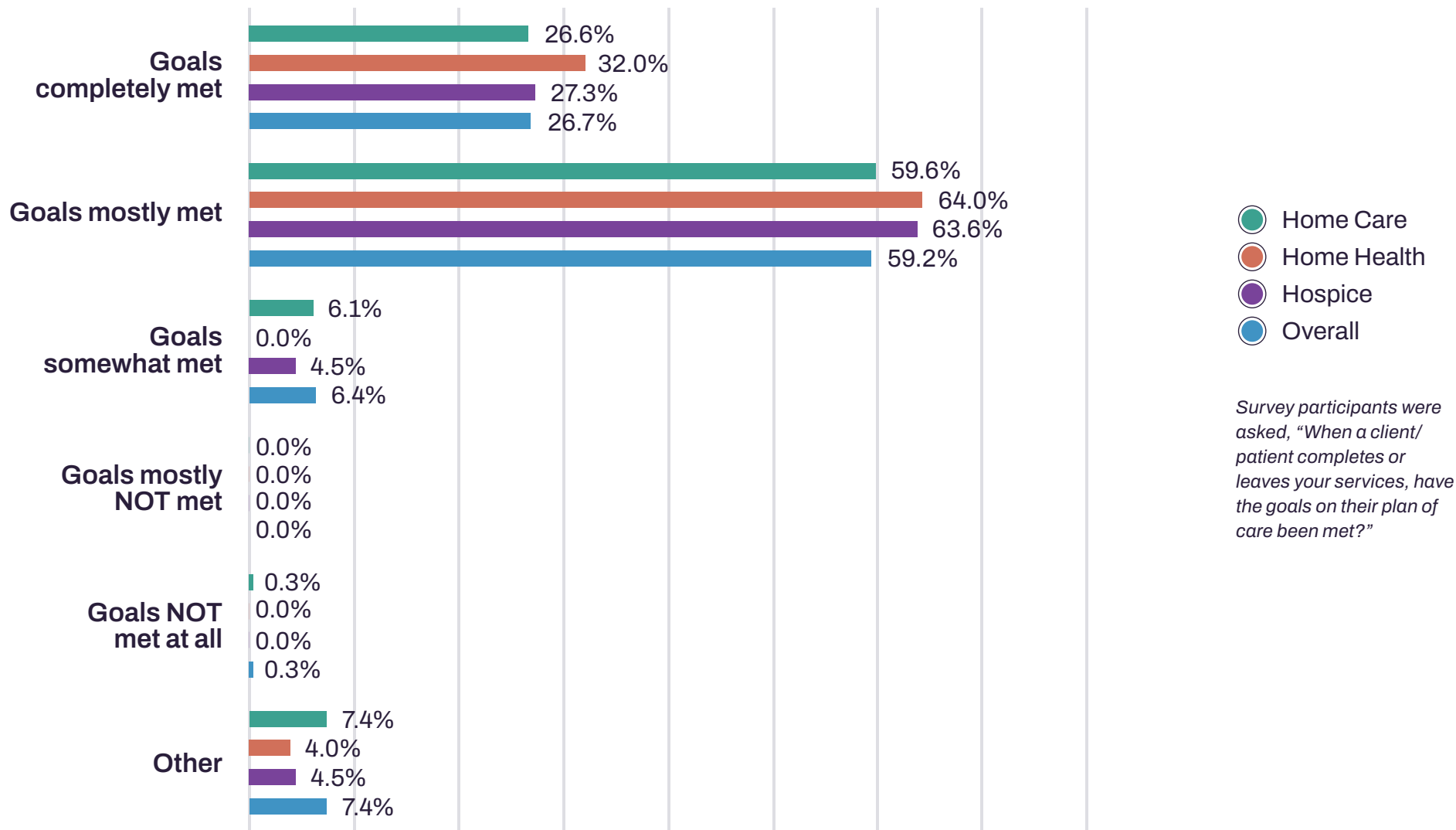
6.5 Overall Percent of Providers Having a Plan of Care - Family Involvement - Line of Business





CARE PLANS

6.6 Overall Percent of Providers Having a Plan of Care - Goals Met - Line of Business





CLIENT TURNOVER RATES

6.7 Home Care Historical Median Client Turnover Rate



Client Turnover Calculation

A provider has to be in business for one full calendar year to be included in the turnover calculations. Basic client turnover is calculated by taking the **number of clients who stopped services** in 2024 and dividing it by the **average number of clients serviced** in 2023.

$$\frac{\text{\# of Clients Stopped Services}}{\text{Avg. \# of Clients Serviced*}} = \text{Client Turnover Rate}$$

**To calculate your average number of clients serviced during a year, take the sum of the number of clients serviced at the end of one year (e.g. Dec. 2023) and at the end of the next year (e.g. Dec. 2024) and divide that number by 2.*

$\text{\# of Clients Serviced (Dec. 2023)} + \text{\# of Clients Serviced (Dec. 2024)} \div 2 = \text{Avg. \# of Clients Serviced}$

CLIENT TURNOVER RATES

6.8 Overall Median Client Turnover Rate - Line of Business

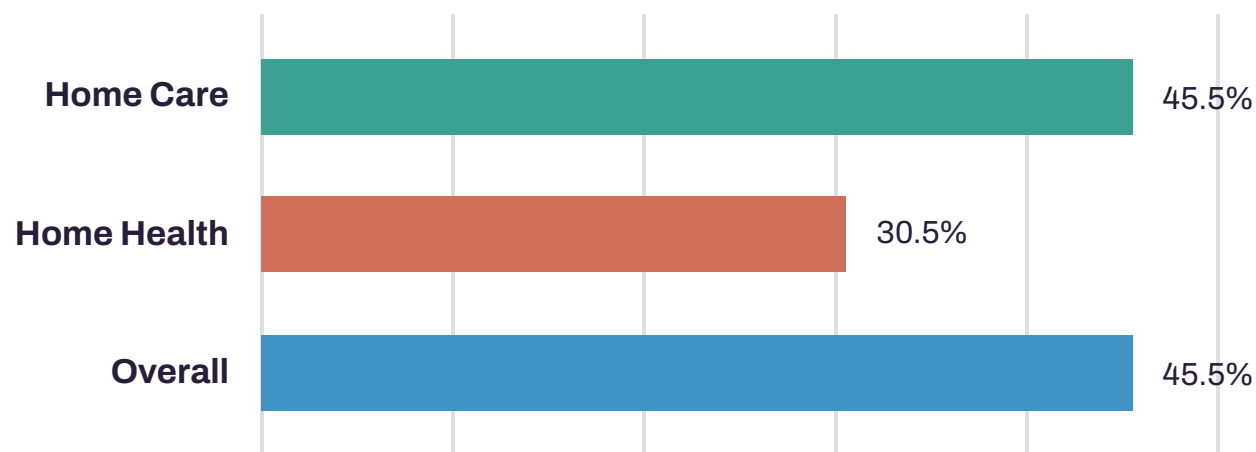


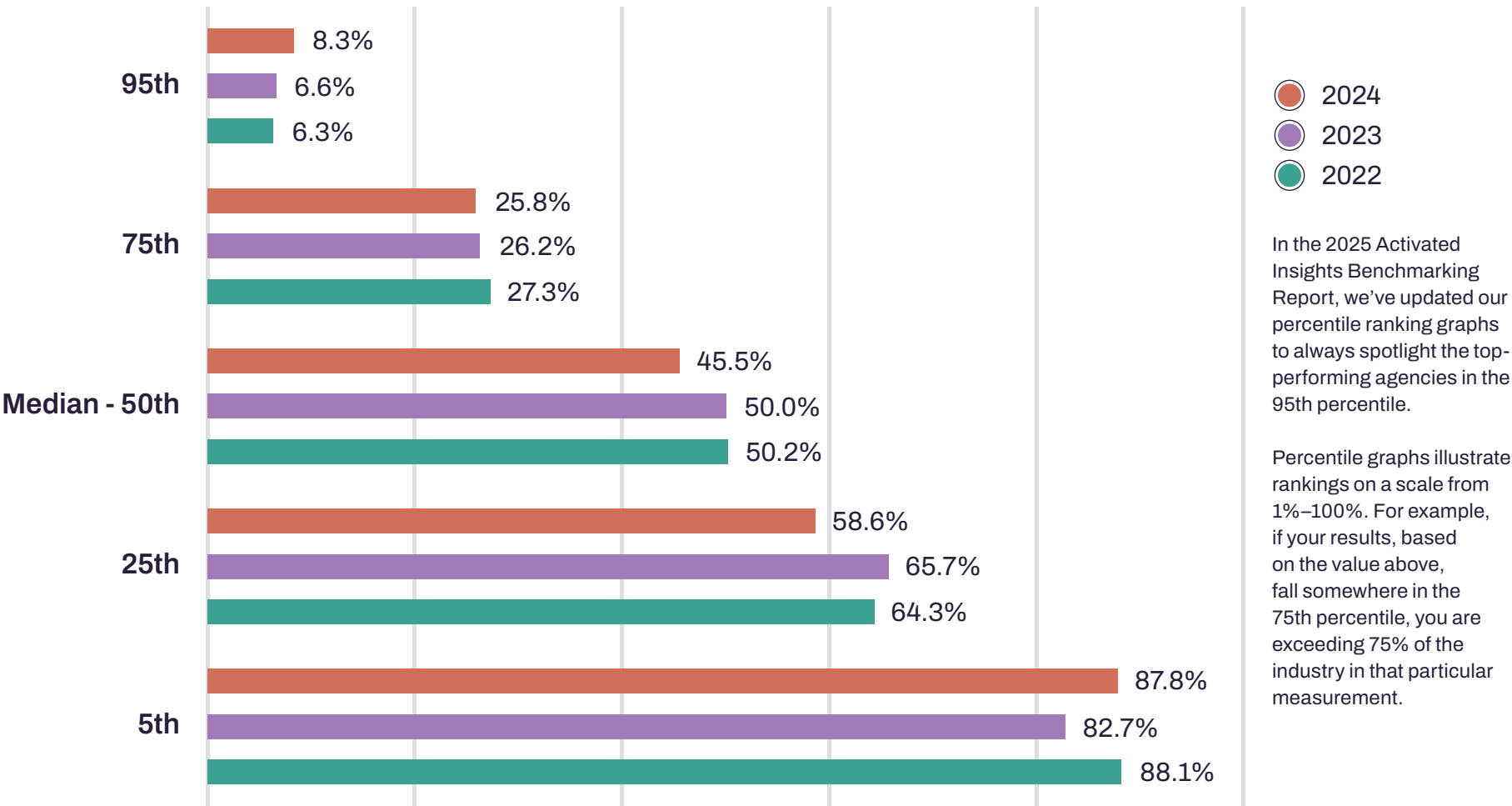
Figure 6.8 on page 159 refers to clients who voluntarily chose services elsewhere.

Due to the nature of hospice care, we did not track hospice client turnover rate.

Median data on points marked "Overall" include the entire participation sample regardless of lines of business. For this reason, an Overall Median would be different than the median of the median numbers for each line of business.

CLIENT TURNOVER RATES

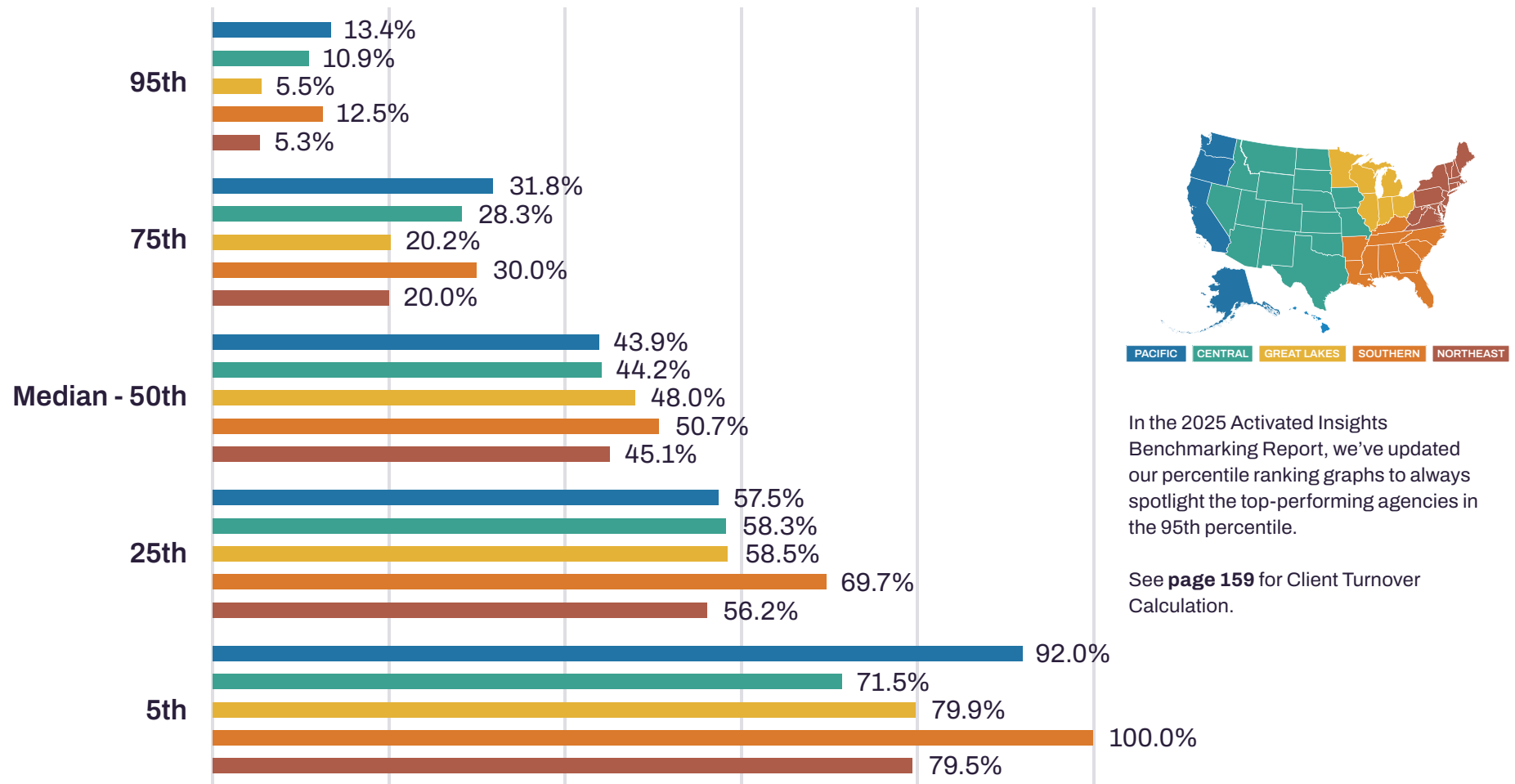
6.9 Overall Historical Client Turnover Rate - Percentile Ranking





CLIENT TURNOVER RATES

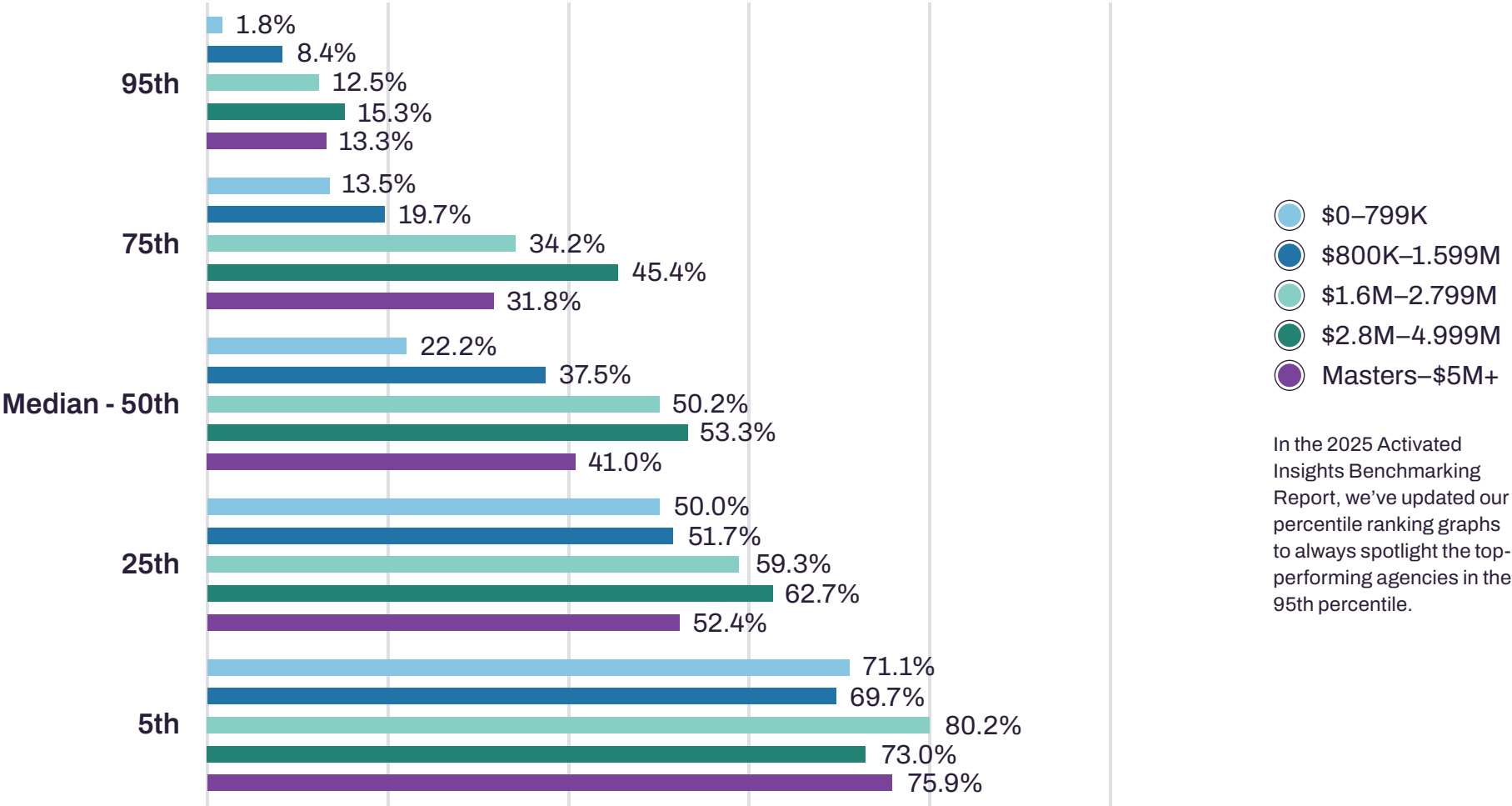
6.10 Overall Client Turnover Rate for 2024 - Geographic Region by Percentile Rankings





CLIENT TURNOVER RATES

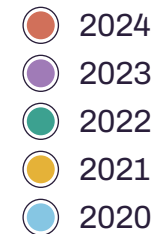
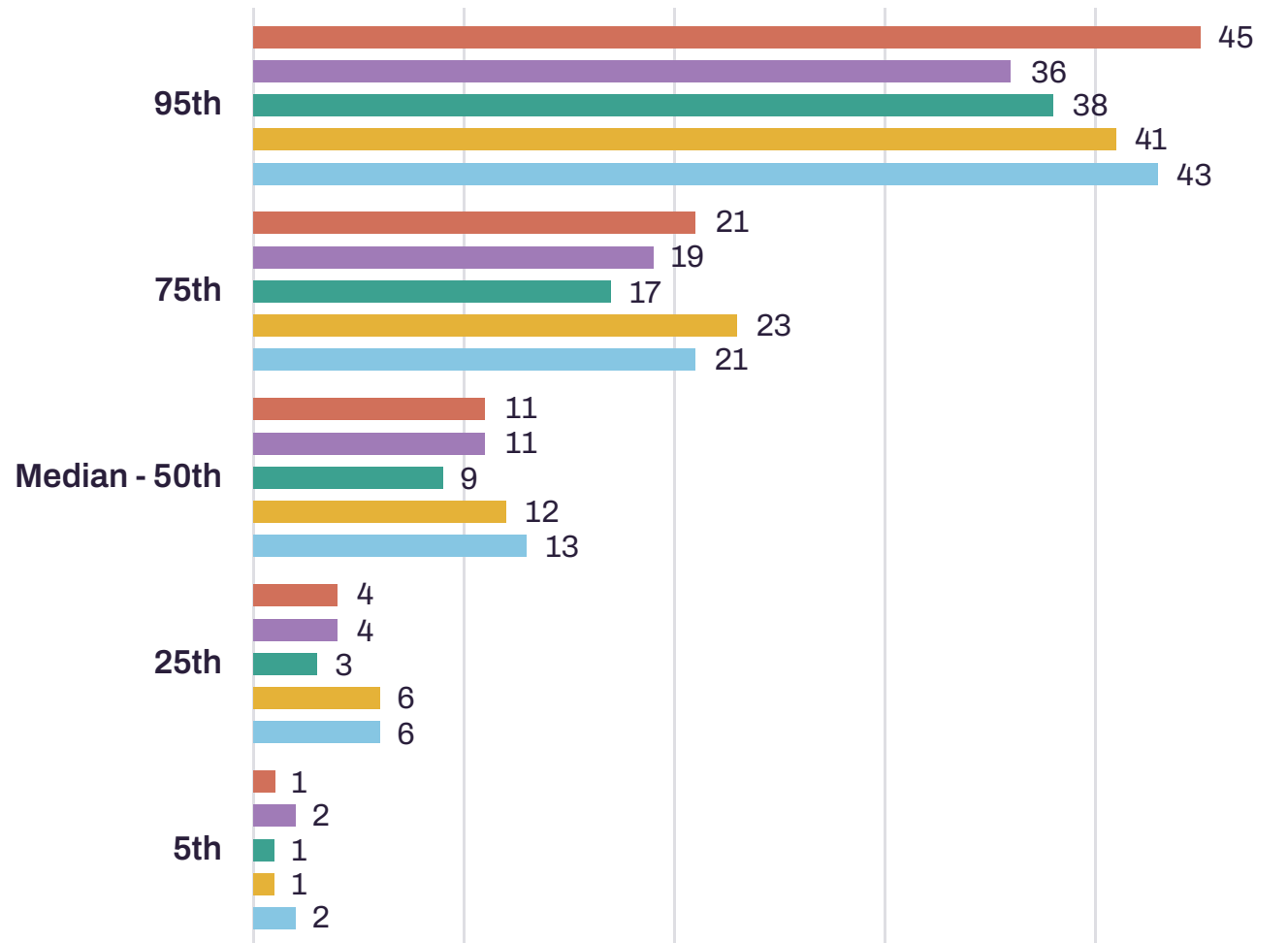
6.11 **Home Care** Client Turnover Rate for 2024 - Revenue Ranges by Percentile Rankings





CLIENT AVERAGE LENGTH OF SERVICE

6.12 **Home Care** Historical Client Average Length of Service (In Months) - Percentile Ranking

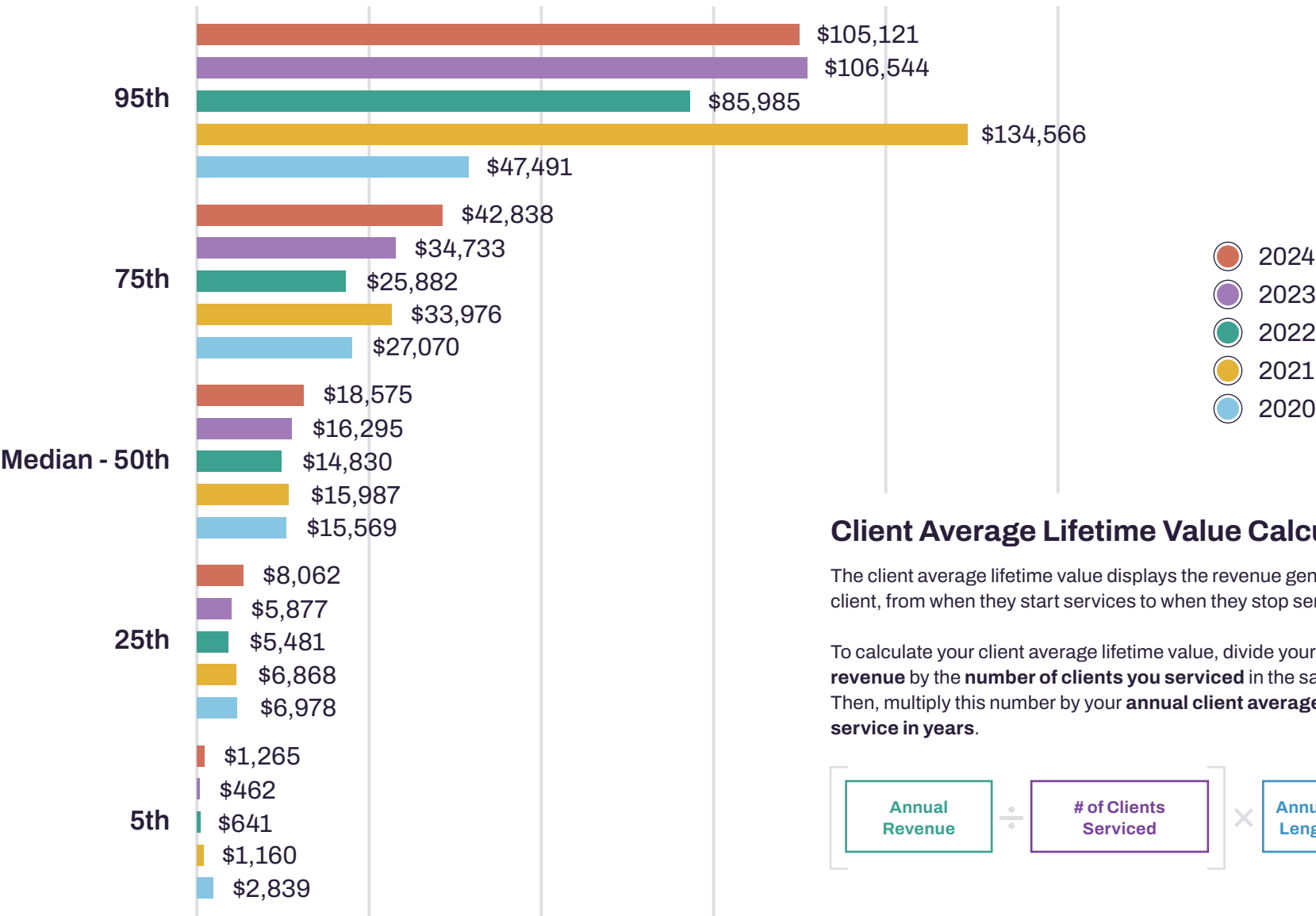


Percentile graphs illustrate rankings on a scale from 1%–100%. For example, if your results, based on the value on the right, fall somewhere in the 75th percentile, you are outperforming 75% of the industry in that particular measurement.



CLIENT AVERAGE LIFETIME VALUE

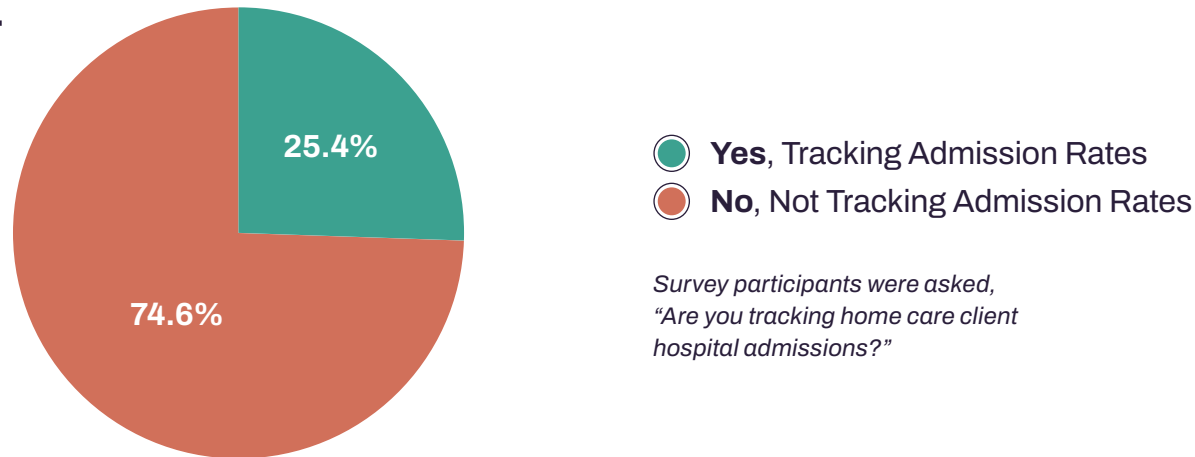
6.13 Home Care Historical Client Average Lifetime Value - Percentile Ranking





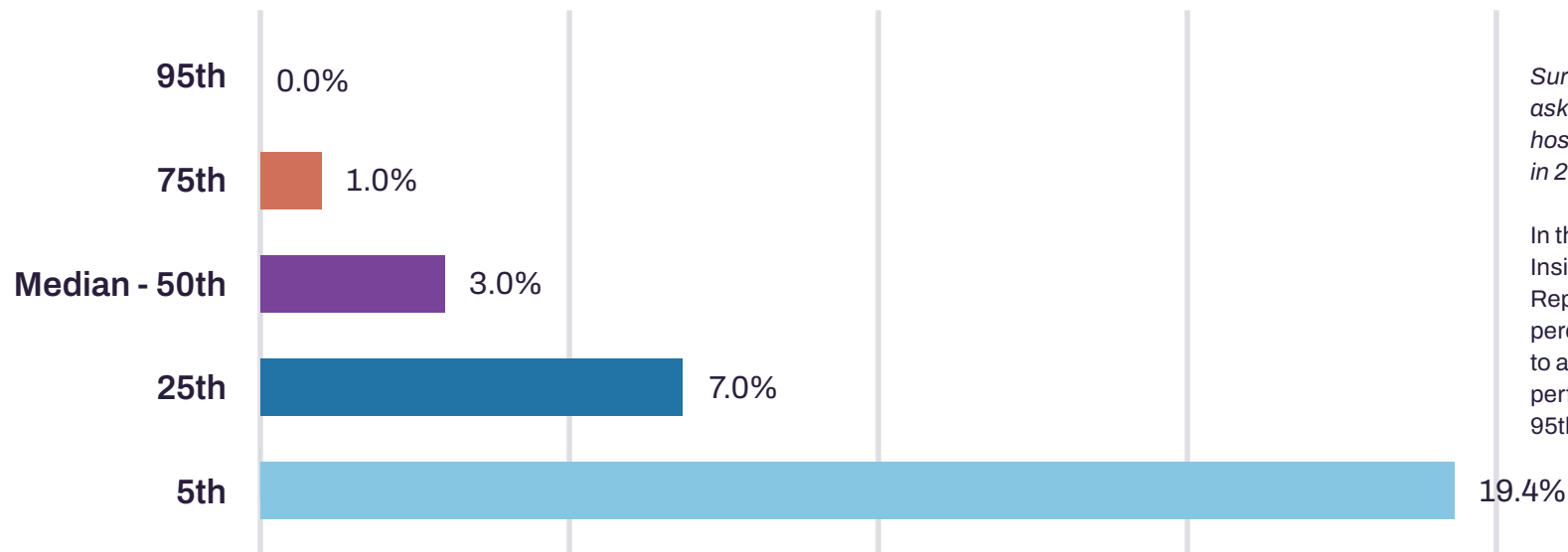
ADMISSION RATES

6.14 Home Care Percentage of Providers Tracking Hospital Admission Rates for 2024



ADMISSION RATES

6.15 Home Care Hospital Admission Rate for 2024 - Percentile Ranking



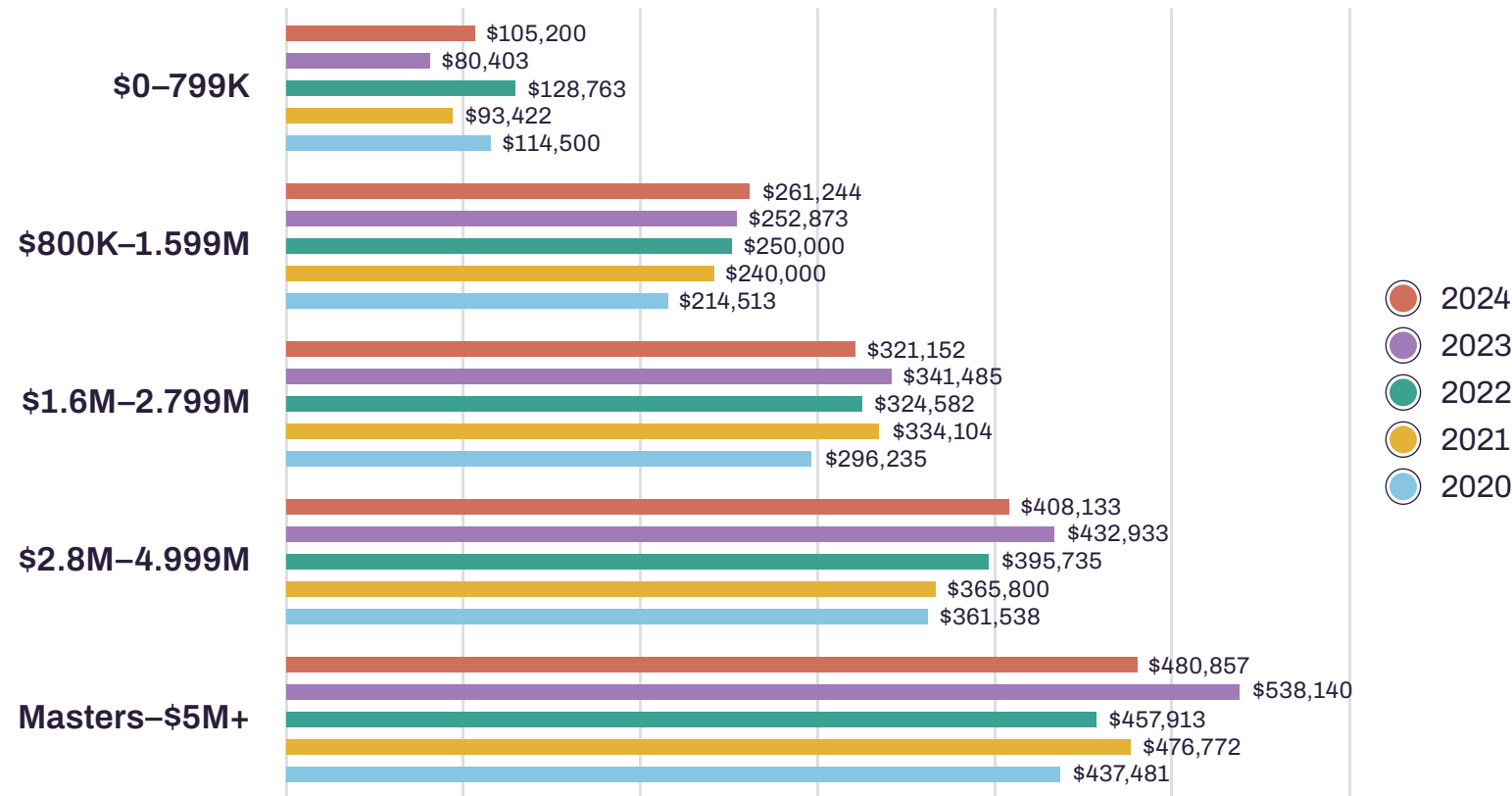
Survey participants were asked, "What was your hospital admission rate in 2024?"

In the 2025 Activated Insights Benchmarking Report, we've updated our percentile ranking graphs to always spotlight the top-performing agencies in the 95th percentile.



SALES PER OFFICE STAFF EMPLOYEE

6.16 Home Care Historical Sales per Office Staff Employee - Revenue Ranges



Sales per Office Staff Employee

This benchmark emphasizes getting the most out of each employee. Leaders tend to have higher Sales per Office Staff Employee as they learn to run more efficiently on less overhead. However, if sales per office staff employee is too high, your business may be sacrificing quality to save money. This figure represents a benchmark to compare your company against. Sales per Office Staff Employee is calculated by dividing your **annual revenue** (or 12-month trailing revenue) by **the number of office staff** you employ, excluding caregivers, but including active owners. Part-time employees count as .5 or 1/2.

Annual Revenue

÷

of Office Staff

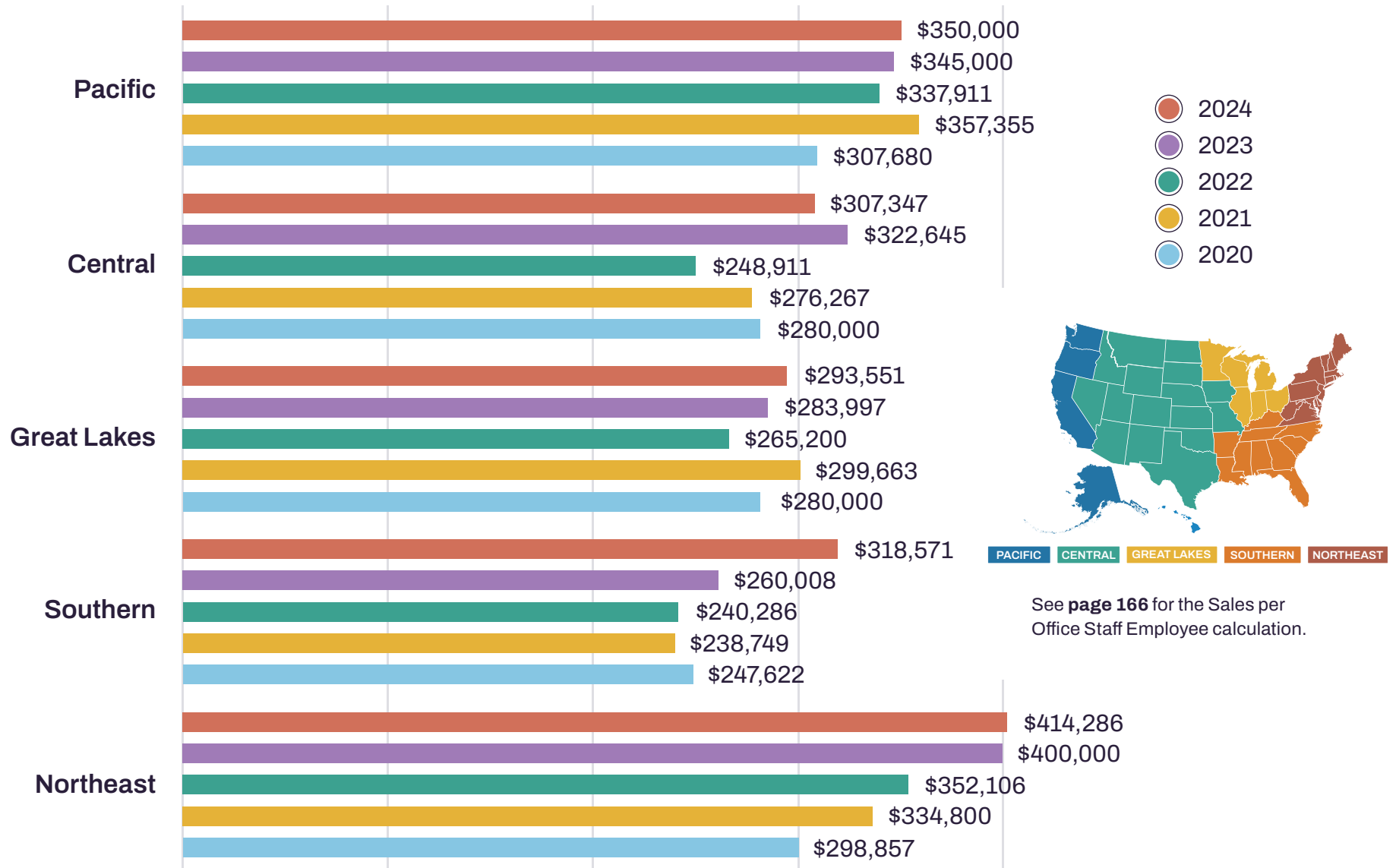
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Sales per Office Staff Employee



SALES PER OFFICE STAFF EMPLOYEE

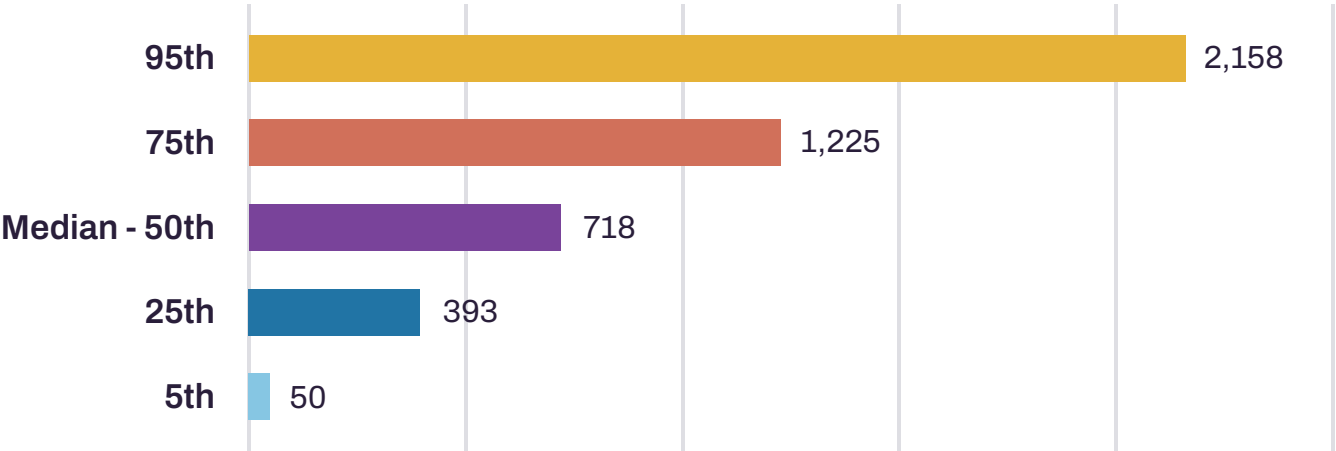
6.17 Home Care Historical Sales per Office Staff Employee - Geographic Region





WEEKLY BILLABLE HOURS

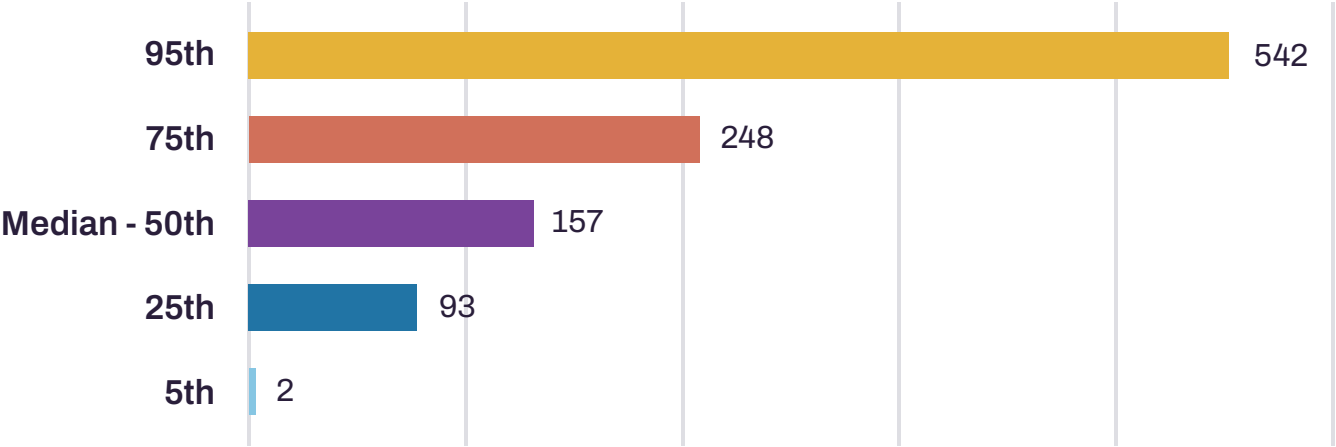
6.18 Home Care Weekly Billable Hours per Care Coordinator for 2024



This means the median agency **bills 718 hours weekly** for every care coordinator, which is 56 less billable hours than in 2023 per care coordinator.

WEEKLY BILLABLE HOURS

6.19 Home Care Weekly Billable Hours per Office Staff Employee for 2024

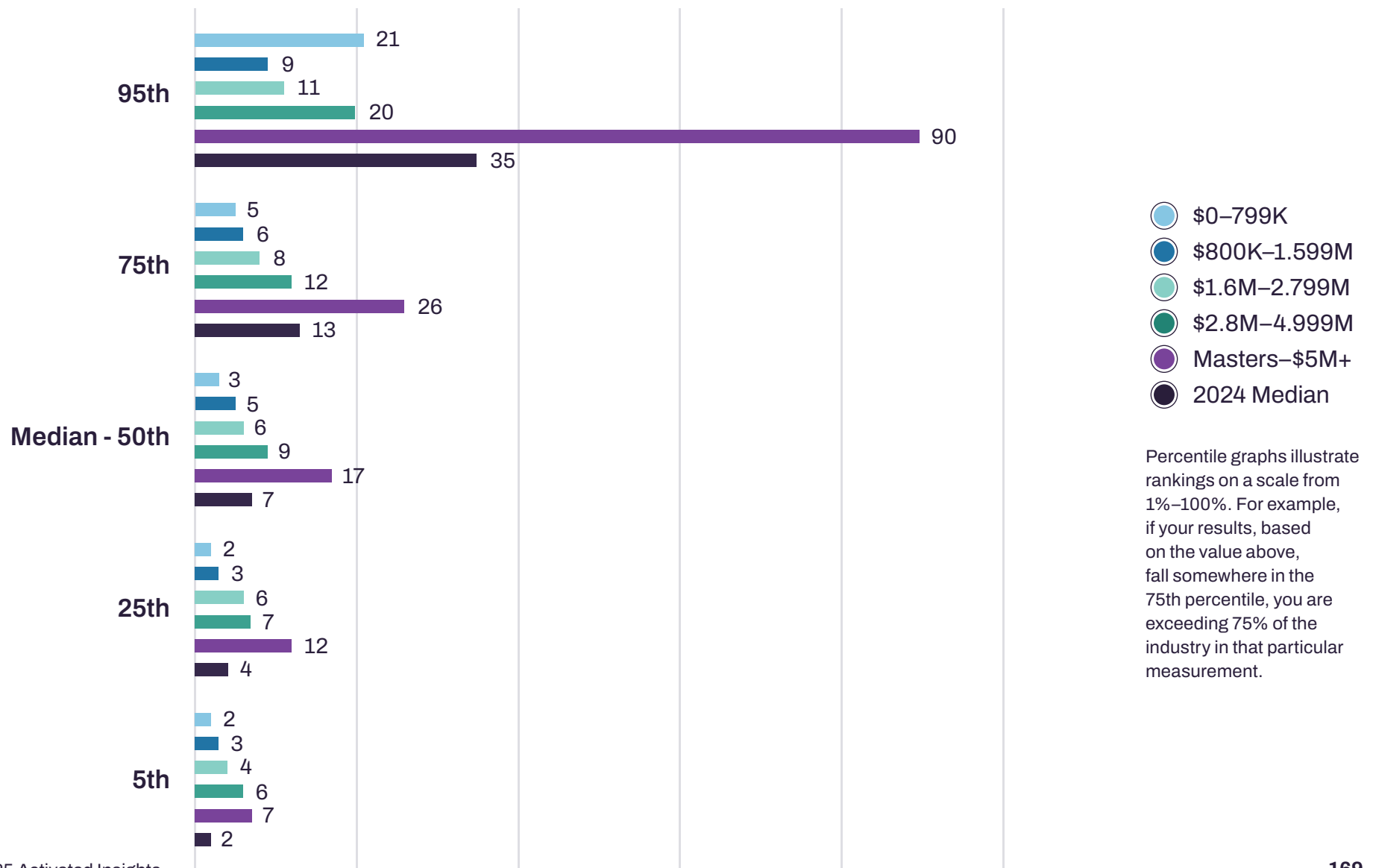


This means the median agency **bills 157 hours weekly** for every non caregiver employee, which is 39 less billable hours than in 2023 per office staff employee.



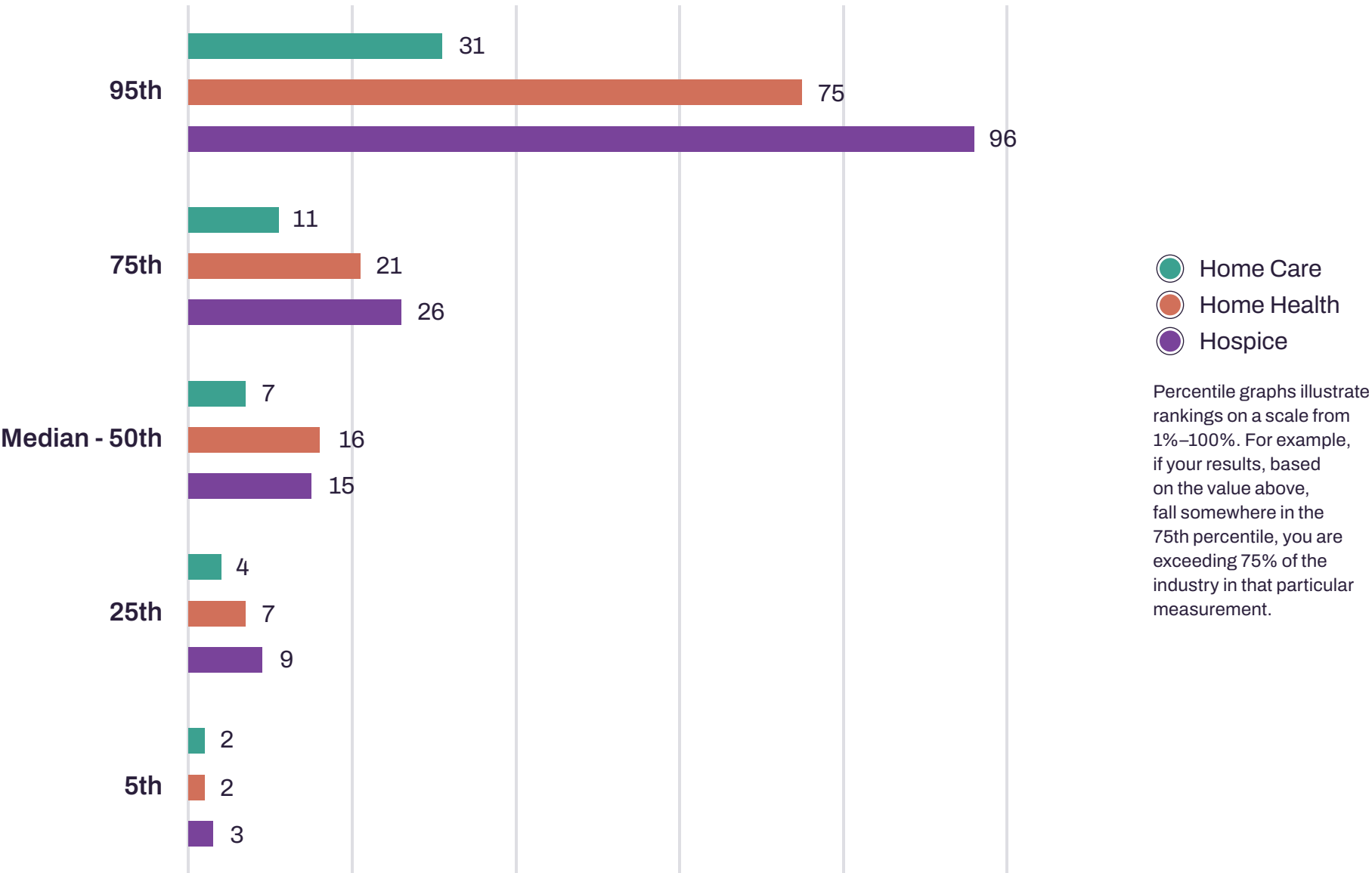
STAFFING SUMMARY

6.20 Home Care Median Number of Office Staff Employed for 2024 - Revenue Ranges



STAFFING SUMMARY

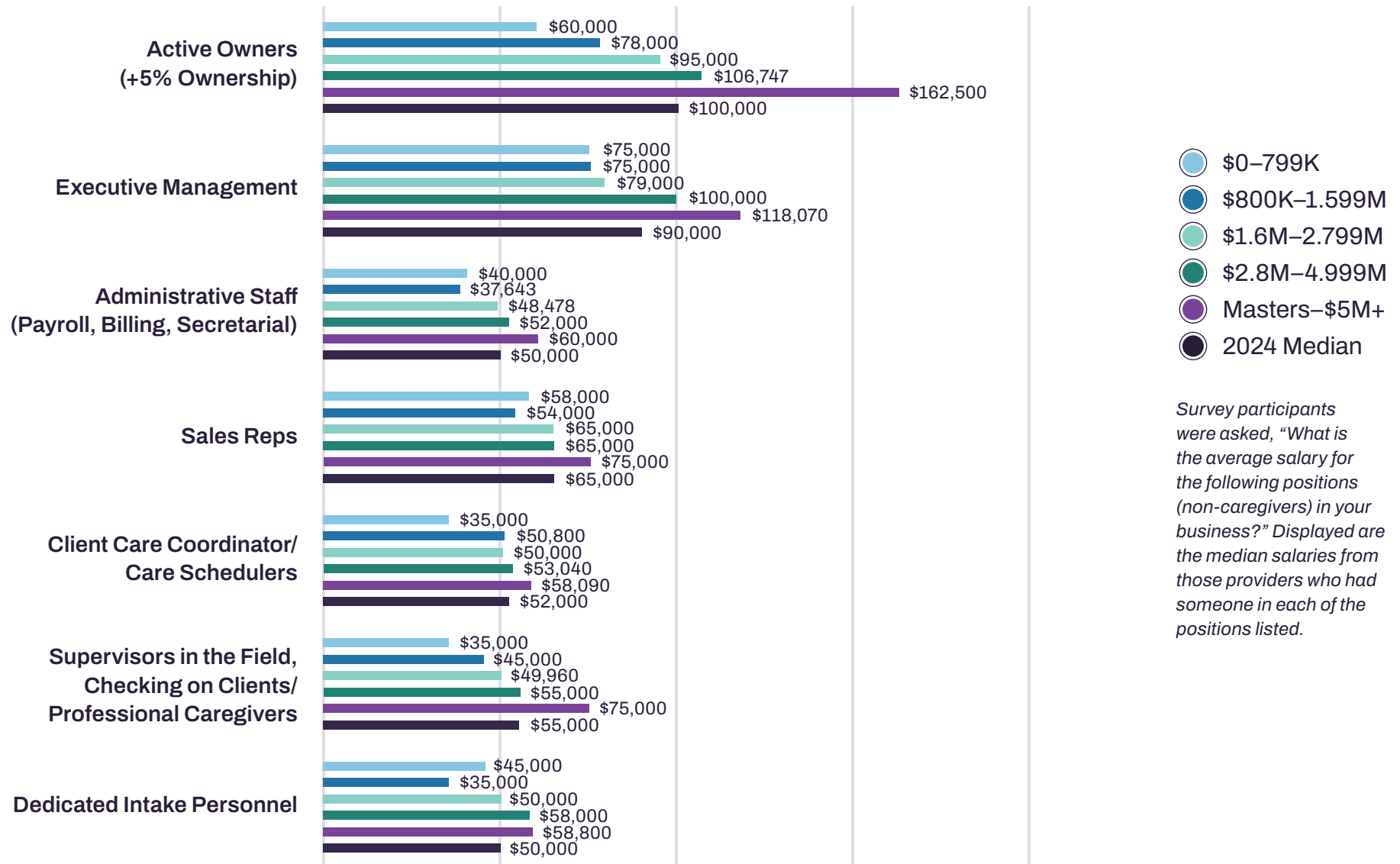
6.21 **Overall** Median Number of Office Staff Employed for 2024 - Line of Business





STAFFING SUMMARY

6.22 Home Care Median Office Staff Annual Salaries for 2024 - Overall & Revenue Ranges



STAFFING SUMMARY

6.23 Overall Median Office Staff Annual Salaries for 2024 - Line of Business

Position	Home Care	Home Health	Hospice	Overall
Active Owners (+5% Ownership)	\$100,000	\$149,917	—*	\$100,000
Executive Management	\$90,000	\$109,250	\$120,000	\$90,000
Administrative Staff (Payroll, Billing, Secretarial)	\$50,000	\$54,000	\$50,000	\$50,000
Sales Reps	\$65,000	\$88,380	\$77,500	\$65,000
Care Coordinator/Care Schedulers	\$52,000	\$53,004	\$48,890	\$52,000
Supervisors in the Field, Checking on Clients/Professional Caregivers	\$53,068	\$86,470	\$99,146	\$55,000
Dedicated Intake Personnel	\$50,000	\$55,000	\$47,500	\$50,000

Survey participants were asked, “What is the average annual salary for the following office staff positions (non-care professionals) in your business?”

*Due to low sample size, we are unable to provide a reliable median for this data point.

STAFFING SUMMARY

6.24 Home Care Median Staffing Summary for 2024 - Overall & Revenue Ranges

Position	\$0–799K	\$800K–1.599M	\$1.6M–2.799M	\$2.8M–4.999M	Masters–\$5M+	2024 Median
Active Owners (+5% Ownership)	1	1.5	1	1	2	1
Executive Management	1	1	1	2	2	1
Administrative Staff (Payroll, Billing, Secretarial)	1	1.5	1	2	3	1.8
Sales Reps	1	1	1	1	1.8	1
Care Coordinator/Care Schedulers	1	1	2	2	4	2
Supervisors in the Field, Checking on Clients/Professional Caregivers	1	1	1	1	3	1
Dedicated Intake Personnel	0	1	1	1	1	1

Survey participants were asked, “How many office staff members (non-care professionals) occupied each of the following positions in your business as of December 31, 2024?”



STAFFING SUMMARY

6.25 Overall Median Staffing Summary for 2024 - Line of Business

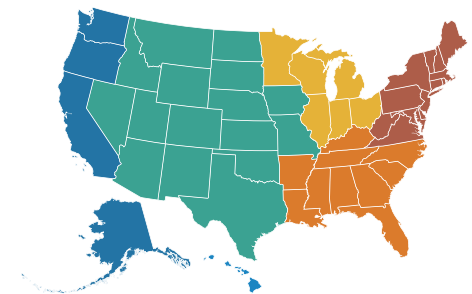
Position	Home Care	Home Health	Hospice	Overall
Active Owners (+5% Ownership)	1	2	1	1
Executive Management	1	2	2.5	1
Administrative Staff (Payroll, Billing, Secretarial)	1.5	4	3	1.8
Sales Reps	1	1	2	1
Care Coordinator/Care Schedulers	2	2	2	2
Supervisors in the Field, Checking on Clients/Professional Caregivers	1	2	2	1
Dedicated Intake Personnel	1	1.5	1	1

Survey participants were asked, "How many office staff members (non-care professionals) occupied each of the following positions in your business as of December 31, 2024?"

STAFFING SUMMARY

6.26 Overall Median Staffing Summary for 2024 - Geographic Regions

Position	Pacific	Central	Great Lakes	Southern	Northeast
Active Owners (+5% Ownership)	1	1	2	1	1
Executive Management	2	1	1	2	1
Administrative Staff (Payroll, Billing, Secretarial)	2	2	2	1	1
Sales Reps	1	1	1	1	1
Care Coordinator/Care Schedulers	2	1.5	2	1	2
Supervisors in the Field, Checking on Clients/Professional Caregivers	1.5	1	2	1	1
Dedicated Intake Personnel	1	1	1	1	1

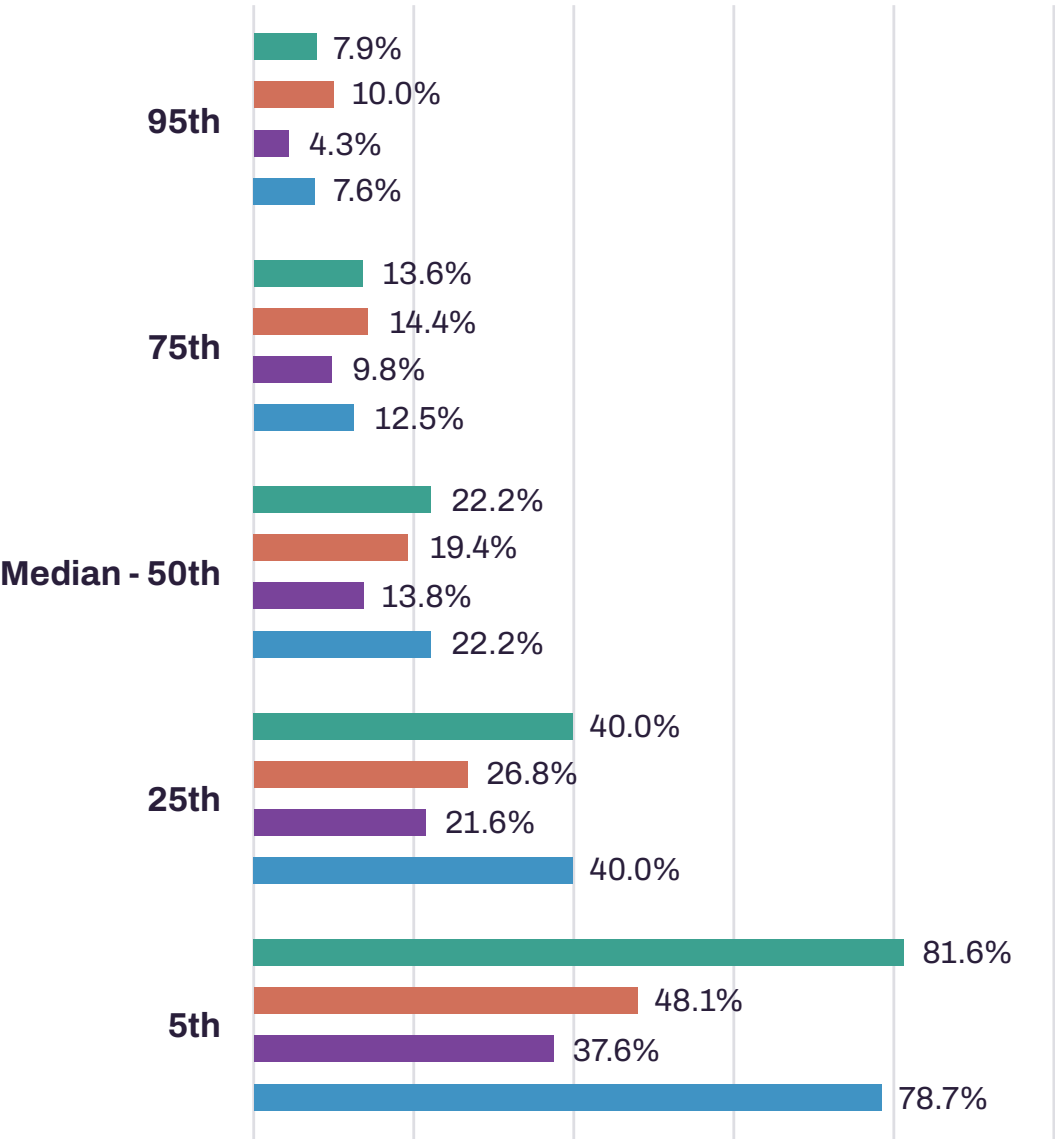


Survey participants were asked, "How many office staff members (non-care professionals) occupied each of the following positions in your business as of December 31, 2024?"



OFFICE STAFF TURNOVER

6.27 Overall Office Staff Turnover for 2024 - Line of Business



- Home Care
- Home Health
- Hospice
- Overall

Office Staff Turnover Calculation

Office Staff Turnover represents the percent of office staff who quit or were terminated in 2024. Providers had to have been in business for at least one full year. Basic office staff turnover is calculated by taking the **number of office staff who quit or were terminated** in the year and dividing that number by the **average number of office staff employed** in the same time period.

of Office Staff
Quit/Terminated

÷

Avg. # of Office
Staff Employed*

=

Office Staff
Turnover Rate

*To calculate your average number of office staff employed during a year, take the sum of the number of staff employed at the end of one year (e.g. Dec. 2023) and at the end of the next year (e.g. Dec. 2024) and divide that number by 2.

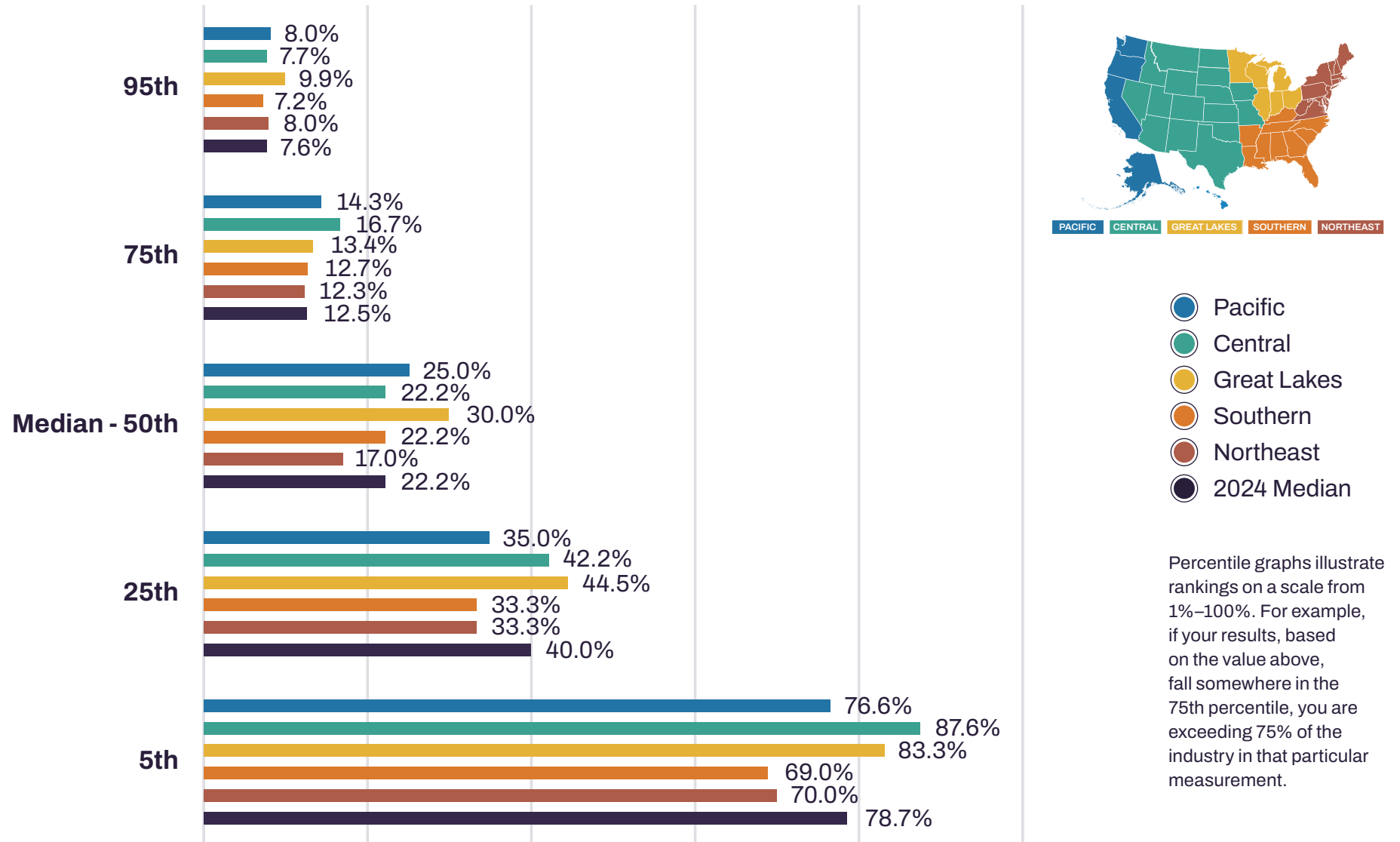
of office staff employed (Dec. 2023) + # of office staff employed (Dec. 2024) ÷ 2 = Avg. # of Office Staff Employed

Percentile graphs illustrate rankings on a scale from 1%–100%. For example, if your results, based on the value above, fall somewhere in the 75th percentile, you are exceeding 75% of the industry in that particular measurement.



OFFICE STAFF TURNOVER

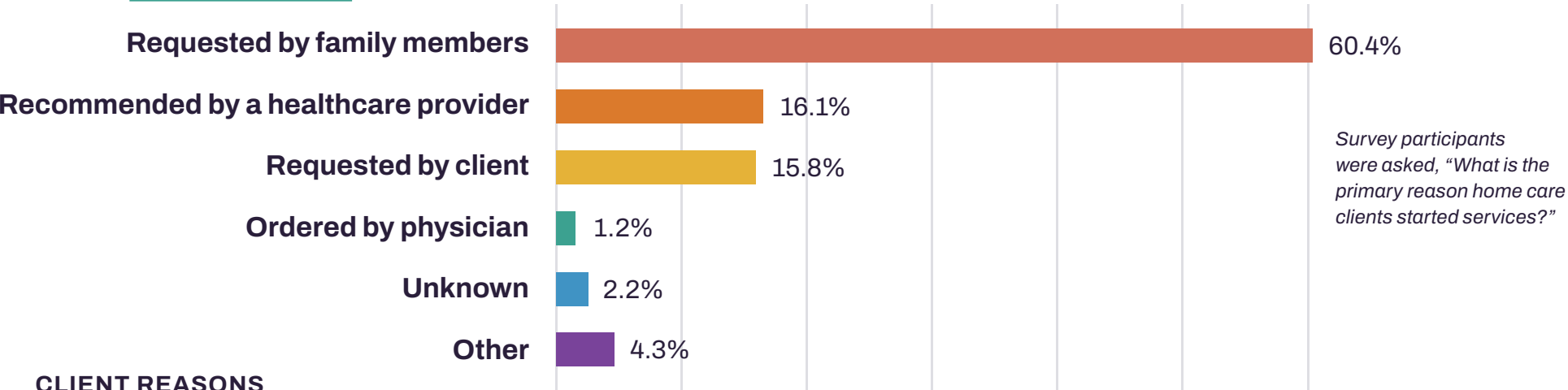
6.28 Overall Median Office Staff Turnover - Geographic Regions and Percentile Ranking





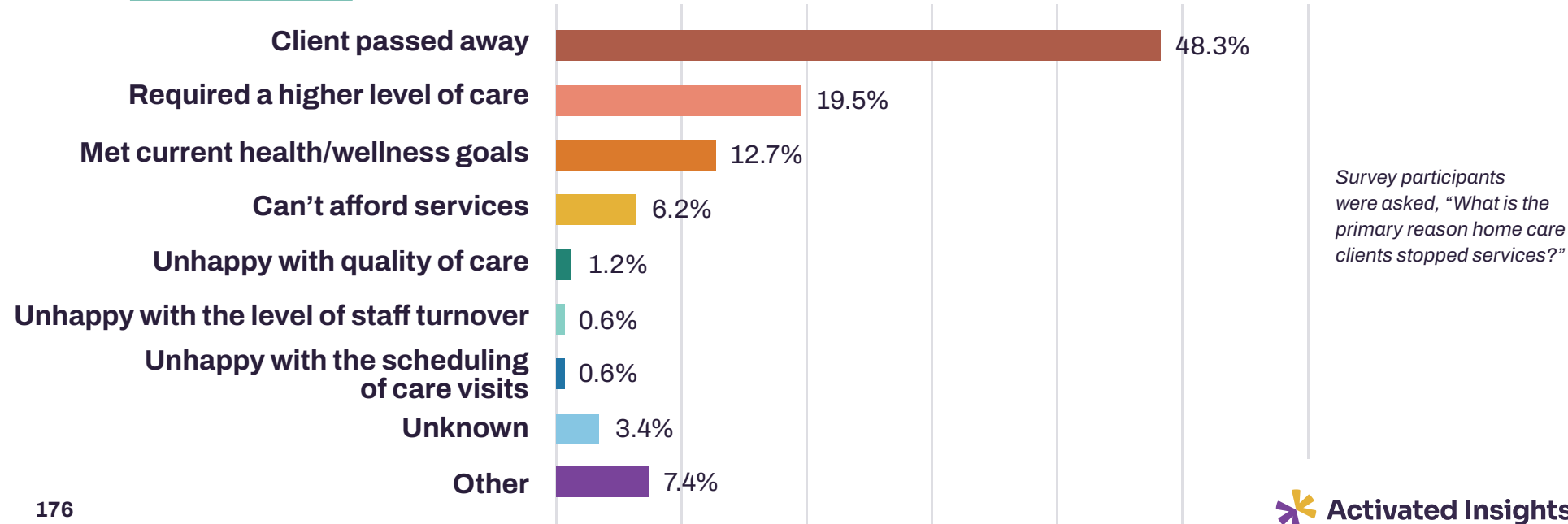
CLIENT REASONS

6.29 Home Care Primary Reason for Clients Starting Services



CLIENT REASONS

6.30 Home Care Primary Reason for Clients Stopping Services





OFFICE STAFF BENEFITS

6.31 Overall Provided Office Staff Benefits in 2024



OFFICE STAFF BENEFITS

6.32 Overall Office Staff Benefits Provided in 2024 - Line of Business

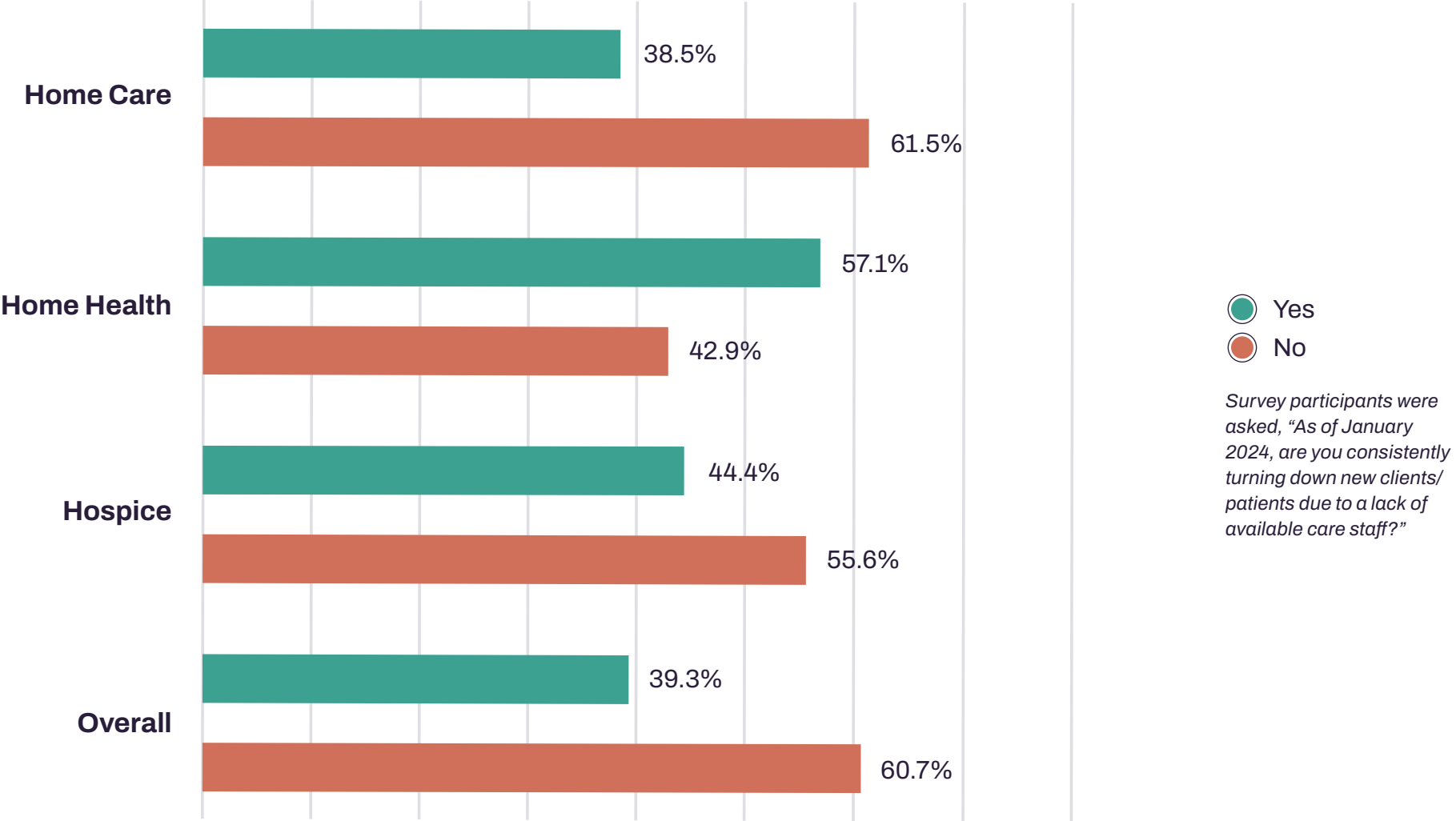
Benefits	Home Care	Home Health	Hospice	Overall
PTO	82.3%	81.2%	84.6%	82.3%
Major Health	63.5%	75.0%	92.3%	66.6%
Dental	60.9%	75.0%	80.8%	63.3%
Sick Leave	59.8%	53.1%	65.4%	59.7%
Travel Reimbursement	54.5%	46.9%	53.8%	54.4%
401K Matching	48.5%	68.8%	76.9%	50.5%
Supplement (e.g., Aflac)	48.9%	68.8%	73.1%	50.2%
Daily/Weekly Pay	47.0%	31.2%	26.9%	44.9%
Education Reimbursement	24.4%	53.1%	53.8%	27.5%
Profit Sharing	18.8%	9.4%	15.4%	18.0%
FSA or Cafeteria Plan	12.0%	46.9%	46.2%	17.0%
Childcare or Daycare Service for Caregivers	3.8%	9.4%	7.7%	4.3%
DCAP (Dependent Care Assistance Plan)	3.8%	15.6%	15.4%	4.3%
Other	11.7%	12.5%	19.2%	11.8%

Survey participants were asked, "What types of benefits do you offer to the following full-time employee types? [Office Staff (including Administrative RNs, supervisors, etc.)]"



TURNING DOWN CLIENTS

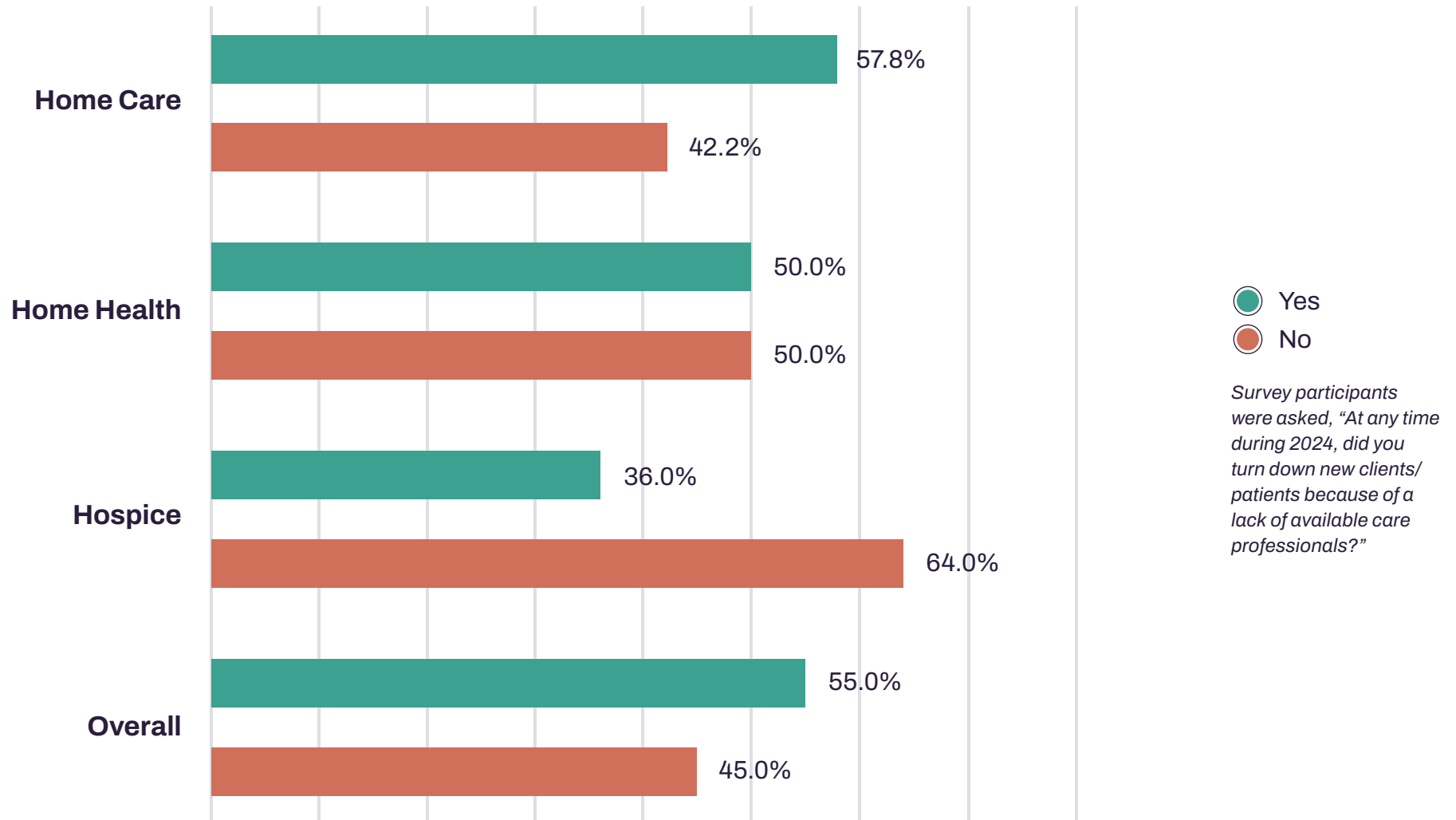
6.33 **Overall** Consistently Turning Down New Clients or Patients Due to a Lack of Care Professionals - Line of Business





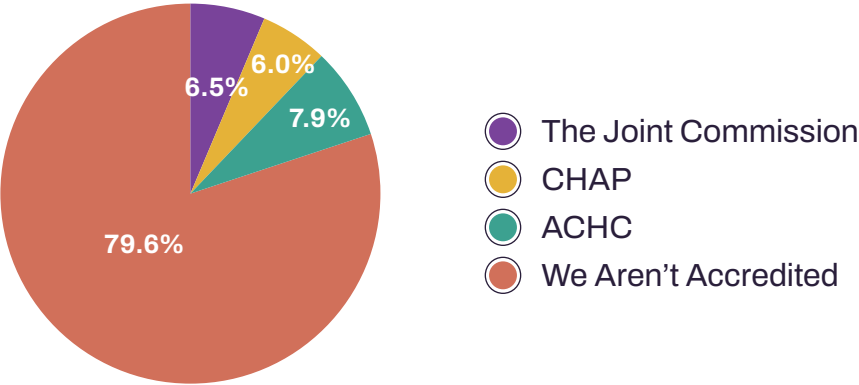
TURNING DOWN CLIENTS

6.34 **Overall** Turning Down New Clients or Patients at Any Time Due to a Lack of Care Professionals - Line of Business



BUSINESS ACCREDITATIONS

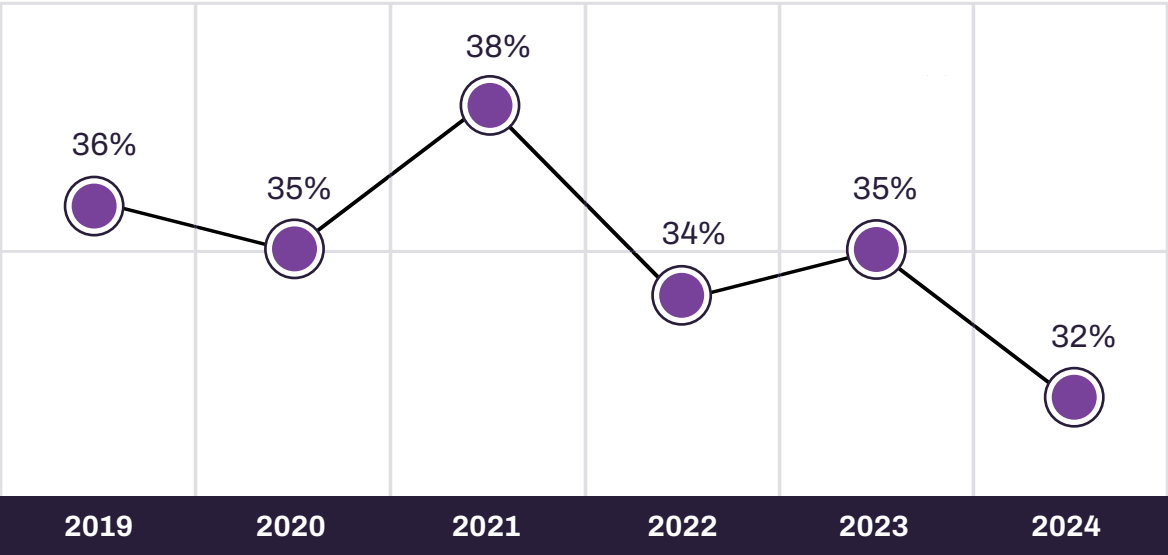
6.35 Overall Business Accreditations for 2024 Report



Survey participants were asked, "Is your business accredited by any of the following?"

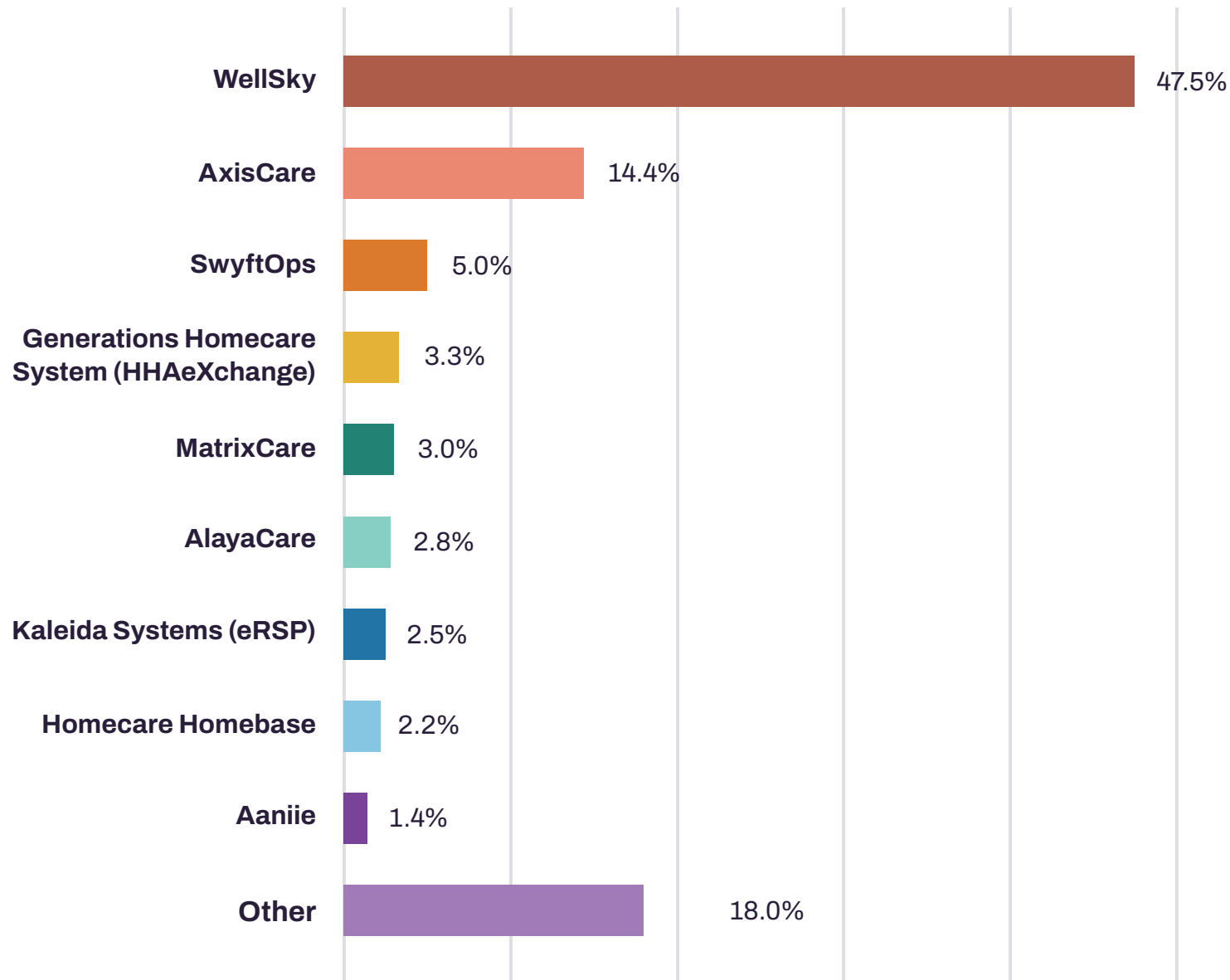
LIVE-IN CARE

6.36 Home Care Historical Percent of Providers Offering Live-In Care





SCHEDULING SOFTWARES

6.37 **Overall** Top 10 Scheduling Softwares Used by Providers in 2024

Survey participants were asked, "Which scheduling software do you use?"

Reclaiming Your Day: Five Time-Saving Tips for Home-Based Care Leaders



Stephen Vaccaro

President
HHAExchange



As a leader in home-based care, every hour of your day matters. With countless responsibilities pulling you in different directions, finding time to focus on what truly matters—delivering exceptional care and supporting your team—can feel impossible. The key to reclaiming those precious hours? Cutting back on time-consuming administrative tasks with smart strategies and effective tools.

Time is your greatest asset. Here, we explore how to work more efficiently and get more of it back in your day.

Tip #1: Streamline Compliance Management

Compliance is one of the most critical, yet time-intensive, aspects of home-based care business management. With the Office of the Inspector General (OIG) ramping

up audits, and state oversight agencies scrutinizing adherence to Electronic Visit Verification (EVV) mandates, many providers are being fastidious about their EVV compliance. But it isn't just EVV compliance tasks that take up time. Providers often find themselves spending hours on care staff compliance tasks like training hours, medical checks, and HR documentation, in addition to managing EVV requirements.

Utilizing compliance management software can simplify this burden. These tools can store and organize care staff documentation, alert you to upcoming deadlines, and flag missed compliance requirements. When it comes to EVV, look for software with a real-time dashboard that offers insights into caregiver check-ins and check-outs, flags discrepancies, and allows for manual edits to reflect the actual care provided. These features ensure your agency stays audit-ready while significantly reducing the hours spent on oversight.



Tip #2: Understand and Automate Your Revenue Cycle

If your agency is still managing billing manually, you're not only consuming hours of valuable administrative time, but also risking costly errors. According to the Council for Affordable Quality Healthcare, Inc. (CAQH), the healthcare industry could save \$16.4 billion annually by automating everyday administrative tasks, including back-end revenue cycle operations.

The first step is to map your revenue cycle process from intake to month-end close. Understanding payer requirements, claims timelines, and common denial reasons is essential for maximizing cash flow. Once you've mastered these details, you can implement billing software that automates repetitive tasks.

For example, software with pre-billing verification can ensure visits align with contracts, authorizations, and care plans. This not only reduces the risk of denials but also saves hours of manual documentation review each week. Automating your revenue cycle can free up significant time, allowing you to focus on strategic growth and care quality.

Tip #3: Match Care Staff to Clients Thoughtfully

In the people-centered world of home-based care, care employee to client matching can make or break your organization's efficiency. Misaligned matches lead to dissatisfaction, increased turnover, and last-minute scheduling chaos—all of which waste time.

The solution lies in thorough employee and client profiles. Collect detailed information including medical needs, allergies, travel times, cultural preferences, and even personality traits. Matching the right care employee

“The healthcare industry could save \$16.4 billion annually by automating everyday administrative tasks, including back-end revenue cycle operations.”

to the right client upfront fosters stronger bonds and reduces administrative juggling. In fact, the 2024 HHAeXchange Homecare Insights Survey found that 91% of care staff feel increased job satisfaction when they form meaningful relationships with their clients.

While perfect matches aren't always possible, technology can help. An employee to client matching tool can automatically pair care staff and clients based on preferences, saving time and enhancing satisfaction for both parties.

Tip #4: Leverage Data for Quick Decision-Making

Data isn't just for financial analysts—it's the key to unlocking efficiency and the foundation for any forward-thinking home-based care organization. In an industry where margins are tight, the ability to transform raw data into actionable insights is a competitive advantage. By analyzing metrics like EVV compliance percentages, staffing trends, and reimbursement rates, you can find patterns that drive better outcomes for clients, save you time, and improve your operations.

For instance, tracking EVV compliance by care employee can give you insight into any individuals who may need some extra training. Beyond compliance, looking at metrics like overtime usage and client satisfaction doesn't just help you address operational bottlenecks; these metrics can inform broader strategies for workforce management and service delivery.

However, data only becomes valuable when it's accessible and actionable. Organizations that invest in data visualization and analytics tools can shift from reactive problem-solving to proactive planning. Imagine spotting emerging trends—such as rising care staff turnover or being able to spot expiring authorizations—before they impact your bottom line. This predictive approach not only saves time but also helps your company make informed, data-driven decisions.





“91% of care staff feel **increased job satisfaction** when they form **meaningful relationships** with their clients.”

Tip #5: Prioritize Robust Training

Your team is the backbone of your agency. Investing in training equips your staff with the skills and knowledge they need to provide care with empathy and confidence. That is why it's so critical that you provide them with robust high-quality onboarding and ongoing training. According to the 2025 Activated Insights Benchmarking Report, while in-person training has the highest upfront costs, it yields the greatest revenue per care employee, averaging \$17,837.

Specialized training—such as dementia care—not only enhances staff competency but also serves as a differentiator in recruitment efforts. Well-trained employees are more likely to feel valued and prepared, leading to higher retention rates. This reduces the time spent on hiring, onboarding, and handling client complaints.

When your team is equipped to handle their roles effectively, you'll experience fewer scheduling disruptions, greater client satisfaction, and a better

work environment. Investing time in training now pays dividends in operational efficiency down the line.

Reclaiming Your Day: A Roadmap for Home-Based Care Leaders

The day-to-day challenges of running a home-based care business can feel overwhelming, but with the right strategies, you can reclaim valuable time and focus on what truly matters. Here's how you can put these time-saving tips into action:

- **Adopt a Unified Platform:** Consolidate compliance, scheduling, billing, and data analytics into a single software solution. An all-in-one platform reduces the need to juggle multiple systems and streamlines your workflows.
- **Schedule Regular Check-Ins:** Dedicate time weekly or monthly to reviewing key metrics such as EVV compliance, billing accuracy, and staff performance. This ensures you stay on top of trends and address issues before they escalate.

- **Empower Your Team:** Delegate tasks effectively and ensure your staff has access to the tools and training they need. Empowered employees can take ownership of their roles, freeing you to focus on strategic priorities.
- **Prioritize High-Impact Activities:** Identify tasks that directly impact client satisfaction and business growth. Allocate your time accordingly and eliminate or delegate lower-priority activities.
- **Leverage Automation:** Whether it's automating billing processes, scheduling, or care employee-client matching, automation can significantly reduce administrative burdens and improve accuracy.

Time is a finite resource, but with intentional planning and the right tools, you can reclaim your day and focus on leading your organization to success. By streamlining operations, leveraging data, and investing in your team, you'll create a thriving environment where exceptional care and business growth go hand in hand.

ABOUT THE AUTHOR

Stephen Vaccaro serves as president at [HHAExchange](#), the leading provider of homecare management solutions for providers, managed care organizations, and state Medicaid agencies. He leads the market strategy and national expansion of HHAExchange's state, payer, provider, and self-direction purpose-built technology solutions.



ARTICLE

Minimizing Penalty Risks: Navigating ACA Compliance for Home Care Agency Owners



Joseph Kitonga

CEO
Vitable



As the home care industry continues to evolve, so do the regulatory requirements that govern it. But one critical compliance requirement that often flies under the radar for many home care owners is the **Affordable Care Act (ACA)**.

In 2023, more than one in four businesses were audited by the IRS for ACA non-compliance.

Home care agencies were among the most likely to be audited by the IRS for non-compliance due to a high number of hourly employees and common data collection issues that plague the industry.

For home care agencies, this presents a perfect storm of risk and complexity—one that demands clear awareness of the requirements, rigorous attention, and proactive measures.

A Brief Overview of the Affordable Care Act

The Affordable Care Act (ACA) was signed into law in 2010 with the goal to improve access to healthcare, enhance quality, and reduce costs. The law addresses health insurance reforms, tax provisions and penalties, the individual mandate, and employer-shared responsibility.

Due to its complexity and frequent changes, many business owners often mistakenly believe that “the ACA is no longer in effect” or “the ACA mandate ended.” However, only the tax penalty for the individual mandate under ACA was terminated by Congress in 2019. The employer mandate and responsibilities still exist today. In fact, the IRS Section 4980H penalties for non-compliance have steadily increased every year.

A Few ACA Terms Every Home Care Owner Needs to Know

1. **Applicable Large Employer (ALE):** An applicable large employer is an employer with over 50 full-time or “full-time equivalent” employees. An ALE may be a single entity or may consist of a group of related entities (e.g. common ownership).
2. **Employer Shared Responsibility Provision (ESRP) or Employer Mandate:** ALEs must offer minimum essential coverage (MEC) that meets minimum value (MV) and is affordable to at least 95% of their full-time employees (and their dependents); or be subject to IRS penalties.
3. **Affordable Coverage/Affordability:** The total employee contribution to enroll in an employer-sponsored plan (health insurance) cannot exceed 9.02% of the employee’s annual income.
4. **Minimum Value:** An employer-sponsored plan must cover at least 60% of the total allowed cost of health benefits that are expected to be incurred under the plan. And the plan must include physician & preventative care services.
5. **Reporting Provision:** Employers must provide information about health coverage offered to employees through annual reporting using Forms 1094-C and 1095-C.

IRS Section 4980H Penalties for Non-Compliance

Part (a): \$2,900/employee

This is incurred when the employer fails to offer Minimum Essential Coverage (MEC) to at least 95% of their employees and their dependents, and any full-time employee that obtains coverage through the marketplace. The 4980H(a) penalty is issued for every

full-time equivalent employee (FTE) minus the first 30 employees (e.g. if you have 64 FTEs, you’ll be fined for 34 employees).

Part (b): \$4,350/employee

This is incurred when the employer-sponsored plan is unaffordable or does not provide minimum value, and if one or more full-time employees receive subsidized coverage through the marketplace. The 4980H(b) penalty is issued if one or more full-time employees receive a premium tax credit.

Home Care Agencies and ACA Compliance

Home care agencies have had a particularly difficult time when it comes to ACA compliance. We often see agencies that experience rapid growth in a short period of time who are then met with an IRS audit and hundreds of thousands of dollars in penalties.

Below are some of the main reasons why home cares are more likely to become ACA non-compliant than other businesses.

1. The Hourly Workforce Challenge

Home care agencies predominantly employ hourly workers such as caregivers, aides, and nurses who provide essential services to vulnerable populations. Home care agencies also often operate on tight margins, making ACA compliance a delicate balancing act:

- **Full-Time Equivalent Calculation:** The ACA’s definition of full-time equivalents (FTEs) can be tricky. FTEs are defined as those working an average of 30 hours/week. Many home care providers don’t properly account for hourly workers and part-time employees in their FTEs calculation.
- **Data Collection Complexity:** Hourly employees’ fluctuating schedules and varying work hours make accurate data collection challenging. Tracking eligibility, hours worked, and benefits becomes intricate.



“In 2023, **more than one in four businesses** were audited by the IRS for ACA non-compliance.”



2. The Unawareness Gap

Many home care owners are **unaware** of their ACA obligations and assume that ACA compliance only applies to large corporations or office-based settings. This leads to over 62% of home care agencies exposing their business to large IRS penalties by failing to offer any major health benefits to their caregivers.

- **Penalties for Non-Compliance:** The IRS actively audits home care agencies for ACA compliance. Penalties for non-compliance can be substantial, impacting an agency's financial stability.



“Over **62% of home care agencies** expose their business to large IRS penalties by failing to offer any major health benefits to their caregivers.”

- **Risk of Misclassification:** Misclassifying workers (e.g., treating them as independent contractors) can lead to severe consequences. Home care agencies must correctly classify employees to avoid legal pitfalls.

How to Calculate Full-Time Equivalents

1. Aggregate total hours worked by all part-time or hourly employees in a week.
2. Divide that number by 30 (for 30 hours per week) to identify FTEs.
3. Add this FTEs number to your actual full-time employee count.

***Example:** ABC Home Care has 15 full-time employees and 50 part-time workers who average 25 hours/week. Following the steps above, in the eyes of the IRS this is actually 56 FTEs. ABC Home Care is now considered an ALE and can be fined for ACA non-compliance.*

But ensuring ACA compliance does not have to be so complex, even for agencies with tight budgets, if you follow these three steps.

1. **Gain a thorough understanding of the ACA internally.** Familiarize yourself with concepts like IRS Approved Measurement Methods, Affordability Safe Harbors, and Limited Non-Assessment Periods as this knowledge may empower you to minimize or eliminate penalty risks.
2. **Accurately collect the correct data about your business.** ACA compliance relies heavily on the proper collection of the right data. Required data including census information, employment type, payroll, billed hours, time, contribution structures, and benefit enrollments must all be accurately tracked.

Try implementing a new tool or software to help you better track billed hours and employee census.

3. **Assess and immediately address any non-compliance with the ACA.** Minimize IRS audit risk by keeping track of important documents such as medical invoices, enrollment forms, waiver forms, and acknowledgment of offers to

The Path Forward

With the [Congressional Budget Office](#) estimating to collect over \$228 billion in ACA compliance penalties between 2017-2026, the stakes for ACA compliance are higher than ever.

“ACA compliance isn’t just about ticking boxes; it’s about **safe-guarding the well-being of those who rely on home care services.**”



employees must be meticulously stored. Accurate reporting of forms 1094-C and 1095-C is crucial.

Vitable can help with census management, waiver collection, benefit administration, and 1094 and 1095-C tax filings.

Elevate the Industry Through Compliance

ACA compliance isn’t optional—it’s a legal and ethical obligation that home care agencies must proactively address. By staying informed, leveraging technology, and collaborating with industry peers, agencies can navigate the complexities and ensure quality care for both their employees and clients.

Remember, ACA compliance isn’t just about ticking boxes; it’s about safeguarding the well-being of those who rely on home care services. Let’s embrace it as a shared responsibility and elevate the standards of our industry.

Disclaimer: The information provided in this article is for general informational purposes only and does not constitute legal advice. Consult with legal professionals for specific guidance related to ACA compliance.

Vitable Health is an employee health benefits company that works closely with hundreds of home care agencies to deliver ACA compliance and provide delightful health benefits designed for home care employees. As an industry thought leader in home care ACA compliance, Vitable Health partners with different associations, partners, and home cares to build and provide the most affordable and delightful ACA-compliant health benefits. From Minimum Essential Coverage plans to automated 1094-C and 1095-C filing, Vitable Health is the only health plan built from the ground up to serve home care agencies. 

ABOUT THE AUTHOR

Joseph Kitonga is the founder & CEO of [Vitable Health](#), a company designed to help home care agencies that are frustrated with expensive and complex health insurance plans.

Joseph, whose parents run a home care agency in Pennsylvania, saw firsthand the struggle that countless agencies face: how to offer affordable health care that can attract and retain employees while simultaneously navigating complicated ACA compliance requirements to avoid costly fines. This led him to create Vitable, which now partners with home care agencies across the country to offer delightful, ACA-compliant health benefits to their employees and their families.

ARTICLE

Strategic Planning in Home Health and Hospice Care: A Six-Step Approach



Daniel Stephens

Senior Vice President
CHAP

CHAP Growth Solutions

Home health and hospice care offer a unique blend of growth opportunities and innovation, accompanied by their own set of challenges. Leaders often find themselves juggling operational demands while keeping an eye on long-term goals amidst constantly shifting market and regulatory dynamics. A well-thought-out, data-driven strategic plan isn't just helpful—it's essential for navigating this complexity.

Unfortunately, many leaders find strategic planning intimidating, time-intensive, or overly theoretical for their organization's immediate needs. But the truth is, creating and executing an effective strategic plan doesn't have to be a Herculean task. With the right approach and tools, it can become a seamless, empowering exercise, providing clarity and direction for your organization. By prioritizing key elements like setting priorities, focusing on achievable objectives, and fostering accountability, strategic planning can become a powerful mechanism for driving growth and ensuring sustainability.

Why Strategic Planning Matters in Home Health and Hospice

Strategic planning gives organizations the ability to look beyond day-to-day operations and prepare effectively for the future. With a clear plan in hand, stakeholders can more efficiently allocate limited resources, focus on key growth opportunities, and make data-driven decisions that align with organizational objectives.

Without a plan, organizations risk losing competitive advantages. A Harvard Business Review study revealed that about 67% of strategic failures are due to poor implementation, not bad strategy. This underscores the importance of creating not just well-conceived plans but ones that are also built for action and measurable outcomes.

Breaking Down the Basics of a Strategic Plan

At its core, a strategic plan outlines what your organization aims to achieve, why those goals are important, and how to reach them. Successful plans have the following elements in common:

- **Clarity and Focus:** A strategic plan narrows the organization's focus to a few clear, impactful goals.
- **Data-Driven Foundation:** By utilizing tools like market analysis, Strengths Weaknesses Opportunities and Threats (SWOT) analysis, and competitor benchmarking, a good plan is informed by hard data.
- **Flexibility:** With the fast-paced nature of healthcare, a plan must allow for quick pivots while aligning with long-term organizational goals.
- **Measurability:** Key Performance Indicators (KPIs) ensure progress can be assessed and strategies adjusted in real-time.

Planning Made Simple: Key Steps to Build Your Strategic Plan

1. Start with a Vision

A strategic plan begins with defining a vision. Where do you want your organization to be in three, five, or even 10 years? For home health and hospice care providers, this might include becoming the go-to provider in your region, improving patient outcomes, or operationalizing innovative service models. Vision statements act as guiding stars, aligning efforts across teams.

2. Conduct a SWOT Analysis

A comprehensive SWOT analysis helps assess strengths, weaknesses, opportunities, and threats. For example, you might identify strengths in clinical

expertise but a weakness in operational efficiency. This analysis offers a realistic snapshot of where you stand and where adjustments are needed.

3. Set SMART Goals

Goals need to be SMART—Specific, Measurable, Attainable, Relevant, and Time-Bound. Instead of vague objectives like “increase referrals,” aim for specific outcomes such as “grow monthly physician referrals by 15% over six months through targeted outreach.”

4. Prioritize Growth Areas

Decide where your organization will focus its energy. Opportunities could include expanding service lines, building partnerships with local hospitals, or revamping your patient experience strategy. For example, targeting high-value accounts like healthcare providers responsible for the majority of your organization's referrals (often known as the 80/20 rule) can yield significant results.

5. Develop Tactical Execution Plans

Breaking down your overarching goals into actionable steps ensures day-to-day alignment. For instance, if your goal is to increase referrals, tactical plans might include developing training materials for sales staff, scheduling weekly sales calls, and implementing a customer relationship management (CRM) tool.



“67% of strategic failures are due to **poor implementation**, not bad strategy.”

6. Facilitate Accountability and Communication

Clear communication and ownership are vital for an effective strategy. Assign clear roles and responsibilities for each initiative. Regular check-ins on progress ensure accountability and allow for swift course corrections where needed. For example, host bi-weekly meetings to assess accomplishments against KPIs.

Common Challenges and How to Overcome Them

1. Poor Execution

Even the best strategy will fail without disciplined implementation. Build a culture of accountability by aligning your team with clearly defined goals and individual contributions.



“Strategic planning doesn’t stop at profit margins. When done well, its **benefits ripple across every function** of an organization.”

Tip: Regularly review progress and celebrate milestones to keep momentum up and teams engaged.

2. Lack of Clarity

Vague plans hinder execution. Avoid creating plans that are too theoretical or overly broad. They should speak directly to your organization’s unique goals and barriers.

Tip: Success starts with a communication plan that ensures every employee understands their role in realizing the strategy.

3. Resistance to Change

Human nature often resists change, making implementing new processes difficult for some teams.

Tip: Shift mindsets by explaining not just what changes are happening, but why. Show how each person benefits from the new direction.

Areas Where Strategic Planning Delivers Impact

Strategic planning doesn’t stop at profit margins. When done well, its benefits ripple across every function of an organization. Here’s where it can make an immediate difference:

- **Customer Experience:** A renewed focus on patient satisfaction helps organizations stand out amidst fierce competition. Whether through enhanced communication protocols or personalized care offerings, improvements in patient experience foster loyalty.
- **Data Analysis and Growth Opportunities:** Harnessing analytics tools enables organizations to identify new revenue streams, geographic expansion opportunities, and underperforming areas.

- **Partnerships:** Strategic plans often identify potential collaborations with hospitals, nursing facilities, and community organizations. These partnerships result in expanded reach and added credibility.

- **Differentiation:** By promoting specialized services or adopting technology like remote monitoring, providers can distinguish themselves in increasingly crowded markets.

Transforming From Plan to Progress

Strategic planning is a conversation starter, not just a document. For long-term results, integrate it into ongoing operations. Quarterly reviews, regular team updates, and KPIs ensure it evolves with your organization and market landscape.

Additionally, consider seeking expert guidance to build a strong foundation. Partnering with organizations like [CHAP Growth Solutions](#) can streamline this process, offering tools and expertise to create bespoke action plans. CHAP’s proven track record includes features like SWOT analysis, account prioritization, and coaching for execution, helping organizations realize tangible growth that aligns with their missions.

An effective strategic plan is not a luxury—it’s a necessity. But it doesn’t have to be overwhelming. Empower your teams by starting small, remaining open to change, and leveraging industry experts to guide the way.

Take a closer look at your existing strategies, covering all critical aspects from territory mapping to leadership development using our [Stress Test Your Business Plan Tool](#). 

ABOUT THE AUTHOR

Daniel Stephens is Senior Vice President for [CHAP](#)’s Center for Excellence. In his last role, he led a large sales team across seventeen states to quadruple annual revenue. His unique approach to business development ensures that the pursuit of new business is strategic, qualified, and ethical. He creates strategies and plans that set the standard for excellence across industries.

Stephens enjoys helping community-based healthcare advocates increase their impact and ability to help more patients receive care. He is passionate about helping healthcare leaders grow their businesses and advance their mission through strategy, innovation, and efficiency.

All this is possible through his extensive experiences in business development leadership and sales experience in the healthcare industry, focusing on DME/respiratory, home infusion, home health, hospice, and palliative care.

Stephens graduated with honors from Liberty University with a focus in Healthcare Management.



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SUMMARY

Customer & Employee Experience

With over 1 million customer and employee satisfaction surveys conducted in the past year alone, Activated Insights has a deep understanding of both customer and employee experiences. Much of this section is informed directly from our survey data to guide you through these experiences. This section includes an overview of industry benchmarks for satisfaction, Net Promoter Score (NPS), and Employee Net Promoter Score (eNPS), along with actionable strategies to help improve your company's own performance.

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ARTICLES

- 211** *Analyzing Your Organization's Online Reputation: How to Drive the Greatest Impact from Reviews*
- 214** *Beyond the Exit Strategy: How a Hospitality Mindset Transformed Our Home-Based Care Agency*



IMPACT ON CUSTOMER & EMPLOYEE EXPERIENCE WITH ACTIVATED INSIGHTS

Organizations that manage their customer and employee experience using Activated Insights...

2.4x

generated 2.4x as many annual inquiries*

9%

achieved 9% higher profit margins*

67%

recorded 67% more in annual revenue*

2.3x

hired 2.3x as many care professionals in 2024*

Businesses that actively manage their customer and employee experience, staff training, and employer brand are seeing long-term business growth.

By prioritizing the customer and employee experience and using data to drive decisions, our customers build stronger reputations, see greater business growth, and consistently attract and retain both clients and care professionals.

**These numbers were calculated by comparing agencies using two or more of our products to agencies not using any Activated Insights product.*

Drive long-term growth and become the business where employees want to work.

Improving your customer and employee experience affects every part of your organization. Get the tools you need to actively manage customer and employee experience, turn good care teams into great care teams, take control of your online reputation, and accomplish your business goals.

For more information on the products we offer, visit activatedinsights.com.

Request a Demo:

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info@activatedinsights.com



ACTIVATED INSIGHTS EXPERIENCE MANAGEMENT & RECRUIT CASE STUDY

Griswold: How Data-Driven Feedback Helped Transform a Franchise Network



Griswold Home Care
Blue Bell, Pennsylvania

The Power of Experience Management

With a decade of experience in home-based care, Matt Ericksen understood the value of gathering insights from clients and caregivers. Before joining Griswold in 2020, he helped build a successful multi-million-dollar franchise location by leveraging experience management surveys and Best of Home Care awards.

When the pandemic hit in 2020, while many agencies saw declining customer and employee satisfaction, data revealed that organizations adapting to feedback maintained stronger retention. Franchise owners, previously indifferent to surveys, quickly recognized their ROI—resulting in longer client tenure and reduced employee turnover.

As a result, Griswold's new franchise owners evolved from industry novices to nationally recognized award winners within just three years.

“Our new franchise owners don’t know any world other than franchise ownership with **Experience Management**.”

Ericksen notes, “Our new franchise owners don’t know any world other than franchise ownership with Experience Management. I believe there is a true correlation between Griswold’s climbing 176 spots to #206 since 2021 on the Entrepreneur Magazine’s Franchise 500 list and a 76% increase in the strategic implementation of the Experience Management tool by a growing number of our franchise owners since 2021.”

Another franchise was struggling with declining sales and deteriorating business conditions. “We got them signed up for Experience Management and Training because we were able to show them the value of utilizing the feedback loop to grow their business—and now they’re award winners.”

Measurable Results

Griswold franchise owners who utilize Experience Management achieved a **16.5% increase in sales growth**, significantly outperforming the industry average of just 5.3%.

In the past year, Griswold has seen a record number of **Franchise Business Reviews** awards including Top Franchises for Satisfaction, Most Profitable Franchises, and Top Franchises for Veterans.

Ericksen emphasized, “This recognition from our franchise owners is exciting to see affirming their satisfaction with unit profitability and the unique operating formula prescribed for their success, of which Experience Management is a critical piece.”

Success Stories

One new franchisee stands out as a powerful example. In 2021, they embraced Experience Management as new owners. By leveraging insights from monthly reports, they introduced rewards tied to positive customer feedback. This data-driven strategy paid off—2022 became a record-breaking year, earning them Griswold's New Franchise of the Year Award. By the following year, they ranked tenth on the Best of Home Care **Top 100 Leader in Experience Award** list.

Griswold Home Care for Berks County, which adopted Experience Management just 18 months ago, is now ranked ninth on the Top 100 Leader in Experience Award list—making them the only nationally ranked provider in their county.





ACTIVATED INSIGHTS EXPERIENCE MANAGEMENT & RECRUIT CASE STUDY

In 2024 alone, Griswold has witnessed a **22% increase in Best of Home Care Award winners** among franchise owners, with 32 winning awards this year, including five ranking in the **Top 100 list**, being the only home care brand to have two locations rank in the Top 10 of the Top 100.

“Our owners show resiliency and consistency in their quality of care, which has helped them stay ahead of the competition despite the influx of money and new players in the industry over the last five to eight years. Best of Home Care Awards have been key differentiators they’ve used to demonstrate their ability to deliver positive experiences for clients and caregivers.”

Griswold award winners produce a **13% higher Employee Net Promoter Score (eNPS)** and **15% higher Net Promoter Score (NPS)** from their clients and families compared to industry averages—creating concrete evidence of quality care outcomes.

“By increasing transparency on Best of Home Care award winner performance annually and highlighting the benefits of Experience Management, our owners are seeing better overall business, client, and caregiver outcomes. Our credibility and trust continue to grow as franchisees see the value and results.”

“In 2020, while many agencies saw declining customer and employee satisfaction, data revealed that **organizations adapting to feedback maintained stronger retention.**”

Coaching Rather Than Commanding

Griswold’s Home Office team capitalizes on marketing opportunities from these awards. Each year, Ericksen analyzes the **200+ page Activated Insights Benchmarking Report**, identifying unique trends in the data and opportunities for each franchisee based on their financial position, geography, and length of ownership.

Armed with these insights, Griswold Franchise Business Coaches conduct one-on-one strategy calls with each franchise owner, empowering them to review their monthly reports with their office teams.

“We encourage our franchise owners to be transparent about their monthly reports with their teams. Ensuring that office staff are empowered through a positive team review instills a sense of ownership in the outcomes. Taking a holistic approach to analyzing these reports uncovers patterns in their performance, revealing revenue opportunities while identifying key areas for improvement.”

For example, one franchisee identified a \$100,000 variance in their business costs due to higher payroll expenditures than competitors in a similar revenue range. By analyzing their location’s monthly reports,

feedback trends, and client and employee responses, Griswold helped them pinpoint exactly where they could improve profitability by managing monthly overtime expenses.

Leveraging AI for Competitive Advantage

Griswold is also leveraging AI to optimize client and employee satisfaction. Through proprietary AI models created by Ericksen, Griswold Franchise Business Coaches provide valuable insights utilizing benchmarking data. One franchisee learned they were one of only two providers in their state to win the **Leader in Experience Award**, which became a key differentiator in their marketing strategy.

Griswold provides franchisees with auto-populated, customizable collateral to highlight their awards and boost localized marketing efforts. As a result, providers are now excited and proud to announce their awards, increasing their social media presence and use of marketing materials for referral sources.

This hands-on, proactive approach to Experience Management has empowered each franchise owner to identify their unique differentiator, enabling them to stand out in the industry while crafting their own compelling narrative.



ACTIVATED INSIGHTS EXPERIENCE MANAGEMENT & RECRUIT CASE STUDY

Streamlining Recruitment

As Griswold's customer and employee satisfaction grows, so does their need for staff. To help meet this demand, Griswold is utilizing Recruit, Activated Insights' recruiting software that automates outreach and engagement during the hiring process.

In the early months of implementation, productivity improvements are already apparent. The software has eliminated common bottlenecks in the hiring funnel, such as manually following up with no-calls and no-shows. Instead, owners can focus on conducting group interviews, enabling the company to surpass their hiring goals for the year within just a few months.

"Recruiters no longer face historical bottlenecks of manually scheduling interviews and following up with no-shows—they're focusing on candidates who are scheduled. As part of our industry-leading tech stack, Recruit is pivotal in helping us increase our applicant flow while eliminating choke points in the process."

Recruit has helped Griswold navigate through high-growth periods without sacrificing the satisfaction of their care staff.

"We want new hires who are happy they made the right choice by choosing to work at Griswold, and Recruit has been able to do that for us."

The Key to Success: A Feedback-Driven Culture

Griswold's success can be attributed to one simple but powerful principle: nurturing an effective feedback loop. Through Activated Insights' **Experience Management** and **Recruit** software, Griswold has been able to:

- ✔ **Eliminate hiring bottlenecks** and engage top-quality candidates faster with automated tools.
- ✔ **Maintain high client and employee satisfaction** by consistently acting on feedback.
- ✔ **Drive exceptional ROI** through data-driven decision-making and individualized coaching.

Griswold has set a new standard in the industry, and their approach is one that other agencies are beginning to follow.

Why Customer & Employee Satisfaction Begins With Franchise Owners

The home care industry is evolving, and only those who harness the power of data will rise to the top. In a competitive market where referral sources are constantly being approached by marketers, Griswold stands out through superior service, real results, and measurable success. 

"Griswold's hands-on, proactive approach to Experience Management has **empowered each franchise owner to identify their unique differentiator**, enabling them to stand out in the industry while crafting their own compelling narrative."



CUSTOMER SATISFACTION

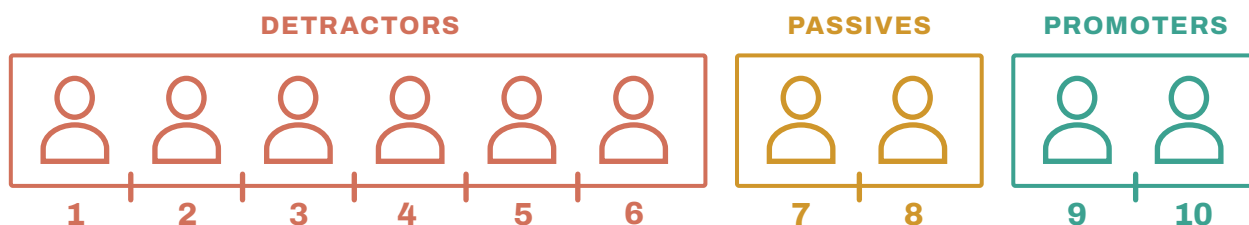
7.1 Net Promoter Score® (NPS) Calculations

Net Promoter Score is based on one question:

“How likely are you to recommend [company name] to others?”

It is rated on a scale of 1–10, 10 being “highly likely to recommend.”

Based upon the answer customers provide, they are categorized into three groups:



1. Promoters (score 9–10) are loyal enthusiasts who will keep using your services and refer others, fueling growth.

2. Passives (score 7–8) are satisfied but unenthusiastic customers who are vulnerable to competitive offerings.

3. Detractors (score 1–6) are unhappy customers who can damage your brand and impede growth through negative word-of-mouth.

How do I use Net Promoter Score?

A Net Promoter Score isn't the end goal in and of itself—customer growth and satisfaction are. Using NPS to track your progress helps you identify whether you're truly making progress at improving the experience you provide your customers.

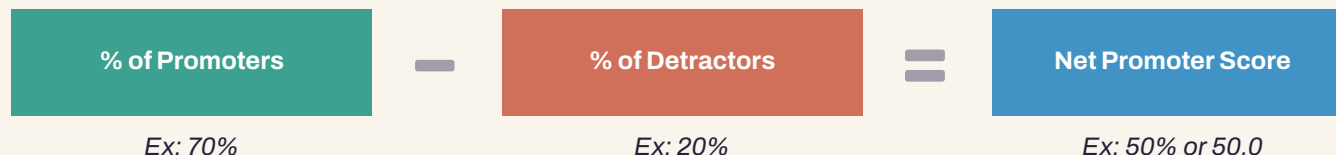
NPS won't help you much if you only occasionally check it. You need to track it closely, gather feedback as to why customers give the answers they do, and use it to power decisions. The most successful agencies are those that track trends over time and use this data to influence decisions, including compensating their care professionals based on customer satisfaction scores.

If you would like to see how your Net Promoter Score® compares to that of the industry, contact Activated Insights at info@activatedinsights.com or 877.307.8573.

® Net Promoter Score and NPS are Registered Trademarks for Bain & Company, Fred Reichheld and Satmetrix Systems, Inc.

NPS Calculation

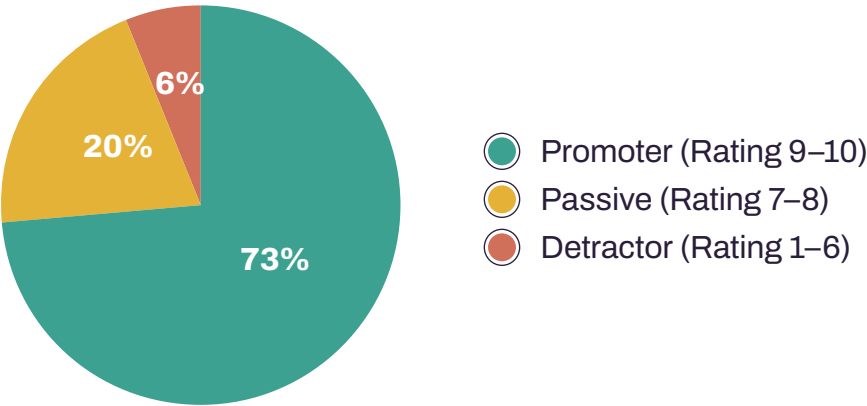
To calculate your Net Promoter Score, take the percentage of customers who are promoters and subtract the percentage who are detractors.





CUSTOMER SATISFACTION

7.2 Home Care Customer Net Promoter Score® (NPS) Breakdown



2024 Net Promoter Score

6.7

This data is taken from over 120,000 Activated Insights Experience Surveys with home care customers in 2024.

Why is Net Promoter Score important?

Companies with high Net Promoter Scores grow at more than twice the rate of their competitors on average. Achieving and maintaining a high NPS can help you turn your customers into your marketing department by ensuring they're promoters. It also helps you keep your services top-notch and facilitate growth and referrals.

Using NPS allows you to segment your customers into promoters, passives, and detractors so you know who to approach for referrals, who needs a little extra "wow" factor, and who is vulnerable to leaving your services.

See how your Net Promoter Score® compares to the industry. Talk with a client/care professional experience expert at info@activatedinsights.com or 877.307.8573.

www.netpromotersystem.com/about/how-is-nps-related-to-growth.aspx

CUSTOMER SATISFACTION

7.3 Home Care Historical Customer Net Promoter Score® (NPS)

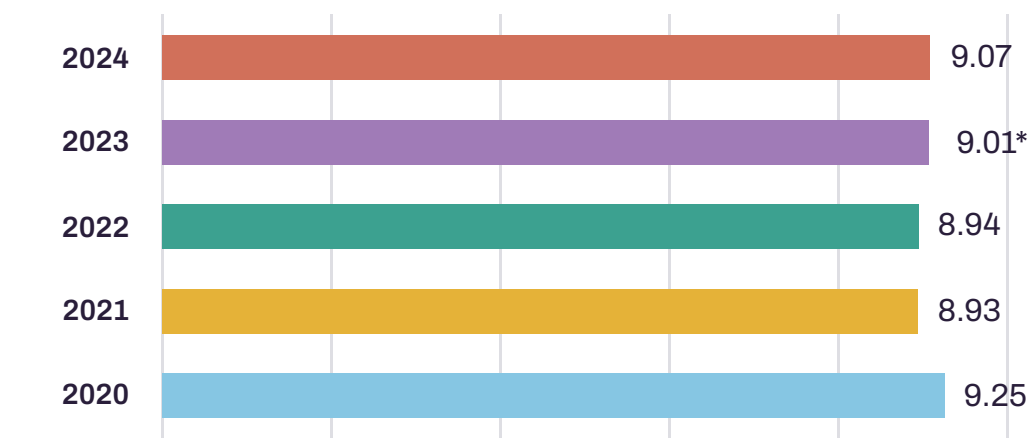


This data is taken from over 120,000 Activated Insights Experience Surveys with home care customers in 2024.



CUSTOMER SATISFACTION

7.4 Home Care Overall Customer Satisfaction - Historical



2024 Overall Customer Satisfaction

9.07

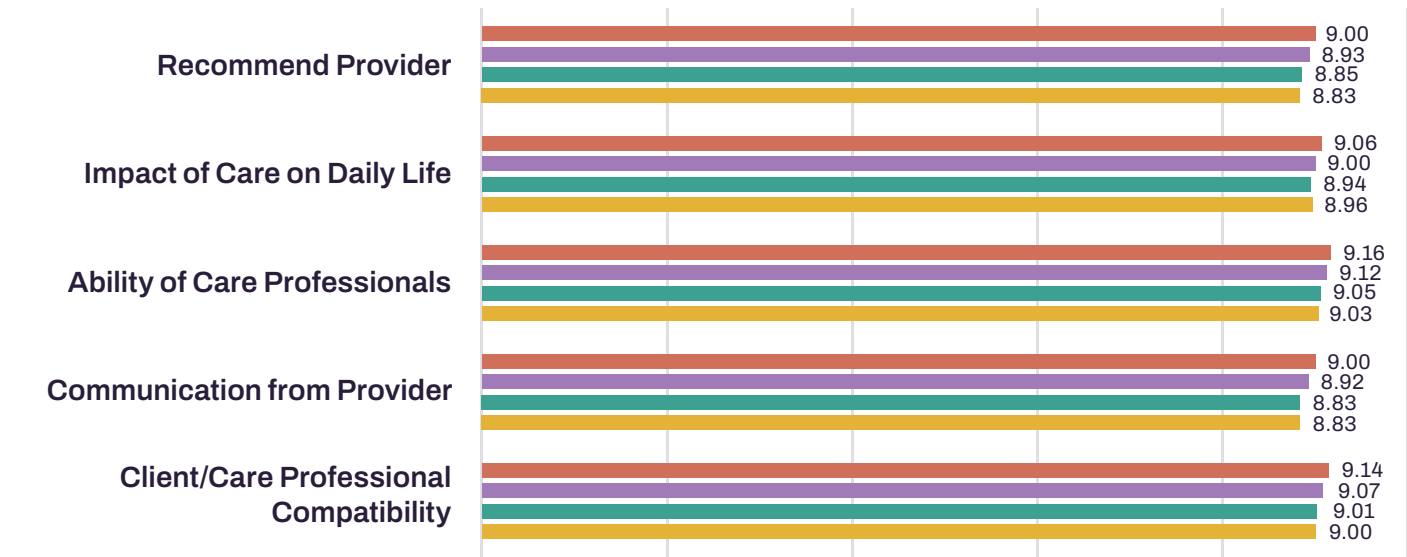
Overall Customer Satisfaction (OSAT) takes the average score of all rated questions in the Activated Insights Experience Survey. This metric is particularly useful for measuring satisfaction after a specific change or event.

This data is taken from over 120,000 Activated Insights Experience Surveys with home care customers in 2024.

**Data point for 2023 was previously reported incorrectly. Updated to reflect corrected value.*

CUSTOMER SATISFACTION

7.5 Home Care Historical Industry Average Customer Satisfaction Scores - Category



- 2024
- 2023
- 2022
- 2021

The 2024 data is taken from over 120,000 Activated Insights Experience Surveys with home care customers. Displayed are the average satisfaction scores for the rated categories.



EMPLOYEE SATISFACTION

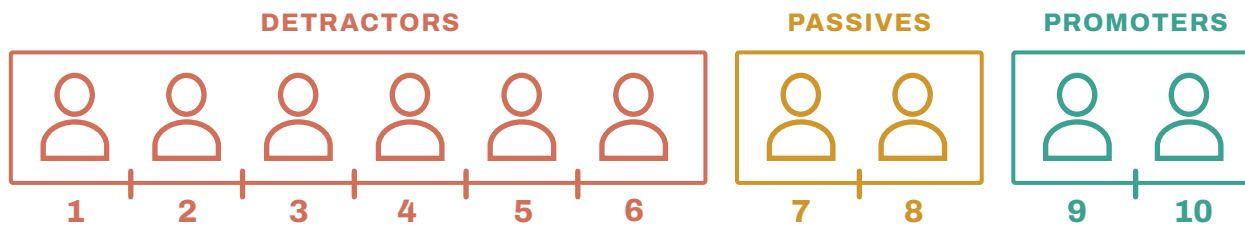
7.6 Employee Net Promoter Score® (eNPS) Calculations

Employee Net Promoter Score is based on one question:

“How likely are you to recommend [company name] to others?”

It is rated on a scale of 1–10, 10 being “highly likely to recommend.”

Based upon the answer customers provide, they are categorized into three groups:



1. Promoters (score 9–10) are loyal and enthusiastic employees who will promote you as a potential employer.

2. Passives (score 7–8) are satisfied but unenthusiastic employees who are vulnerable to competitive offerings.

3. Detractors (score 1–6) are unhappy employees who can damage your brand and impede growth through negative word-of-mouth.

Why is Employee Net Promoter Score (eNPS) important?

As long as the staffing shortage continues, eNPS will be particularly important because it can help you measure and improve your ability to recruit new care professionals through referrals from existing employees.

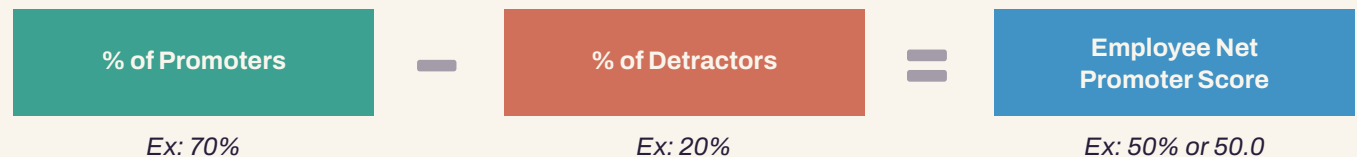
Employee Net Promoter Score helps you generate more employee referrals by tracking how your current efforts and new initiatives are influencing the likelihood of your workforce recommending you to others.

Care professionals recruited through employee referrals typically have the lowest turnover rates of any recruitment source.

If you would like to find out how your Employee Net Promoter Score® compares to that of the industry, contact Activated Insights at info@activatedinsights.com or 877.899.9402.

eNPS Calculation

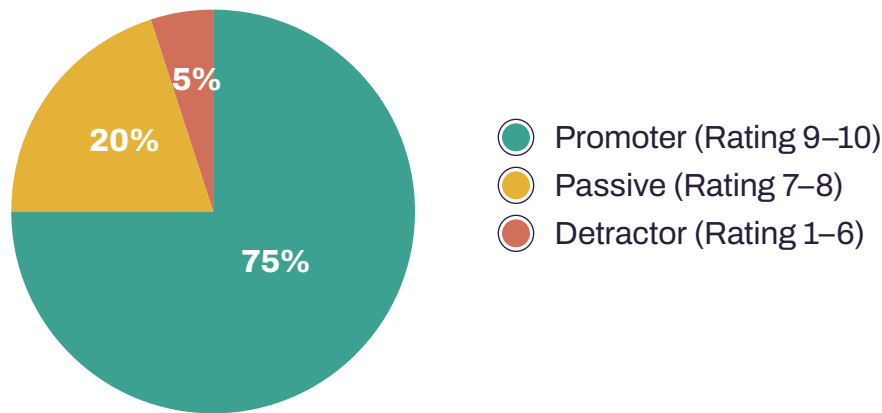
To calculate your Employee Net Promoter Score, take the percentage of care professionals who are promoters and subtract the percentage who are detractors.





EMPLOYEE SATISFACTION

7.7 Home Care Employee Net Promoter Score® (eNPS) Breakdown



2024 Employee Net Promoter Score

7.0

This data is taken from over 96,000 Activated Insights Experience Surveys with care professionals in 2024.

EMPLOYEE SATISFACTION

7.8 Home Care Historical Employee Net Promoter Score® (eNPS)



This data is taken from over 96,000 Activated Insights Experience Surveys with care professionals in 2024.

If you would like to see how your Employee Net Promoter Score compares to that of the industry, contact Activated Insights at info@activatedinsights.com 877.899.9402.



EMPLOYEE SATISFACTION

7.9 Home Care Overall Care Professional Satisfaction - Historical



2024 Overall Satisfaction

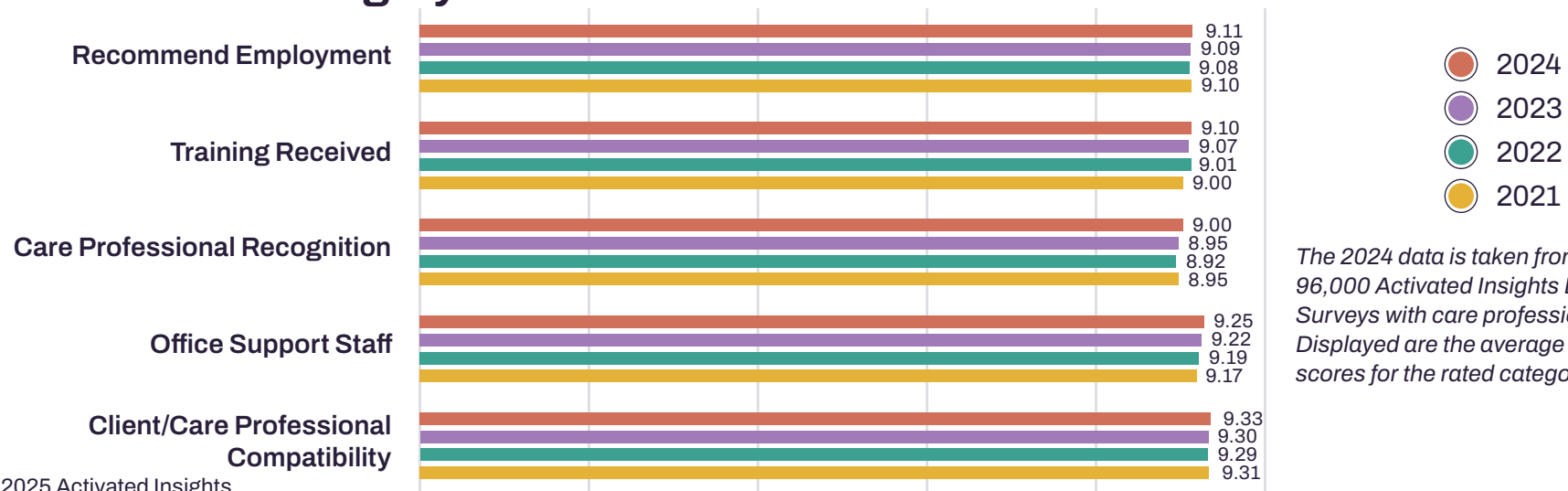
9.16

Overall Satisfaction (OSAT) takes the average score of all rated questions in the Activated Insights Experience Survey. This metric is particularly useful for measuring satisfaction after a specific change or event.

This data is taken from over 96,000 Activated Insights Experience Surveys with care professionals in 2024.

EMPLOYEE SATISFACTION

7.10 Home Care Historical Industry Average Care Professional Satisfaction Scores - Category

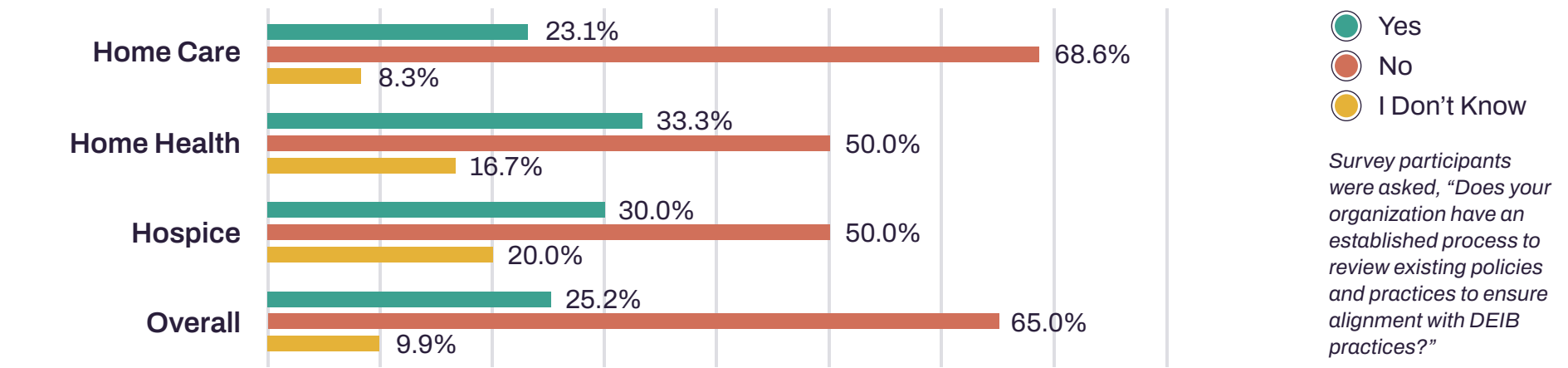


The 2024 data is taken from over 96,000 Activated Insights Experience Surveys with care professionals. Displayed are the average satisfaction scores for the rated categories.



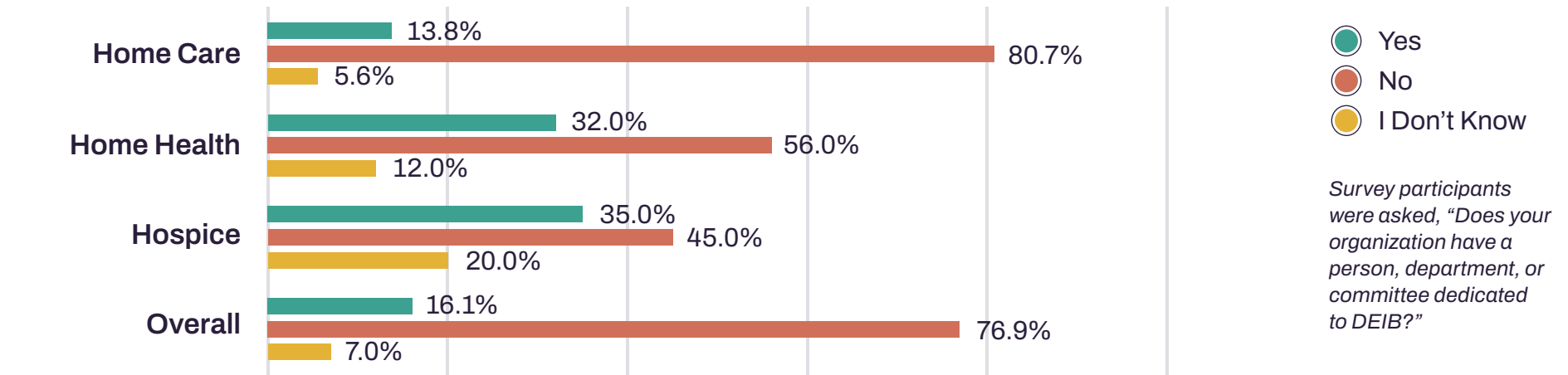
DIVERSITY, EQUITY, INCLUSION, & BELONGING

7.11 Overall Organizations With an Established Process for Diversity, Equity, Inclusion, & Belonging (DEIB) Practices



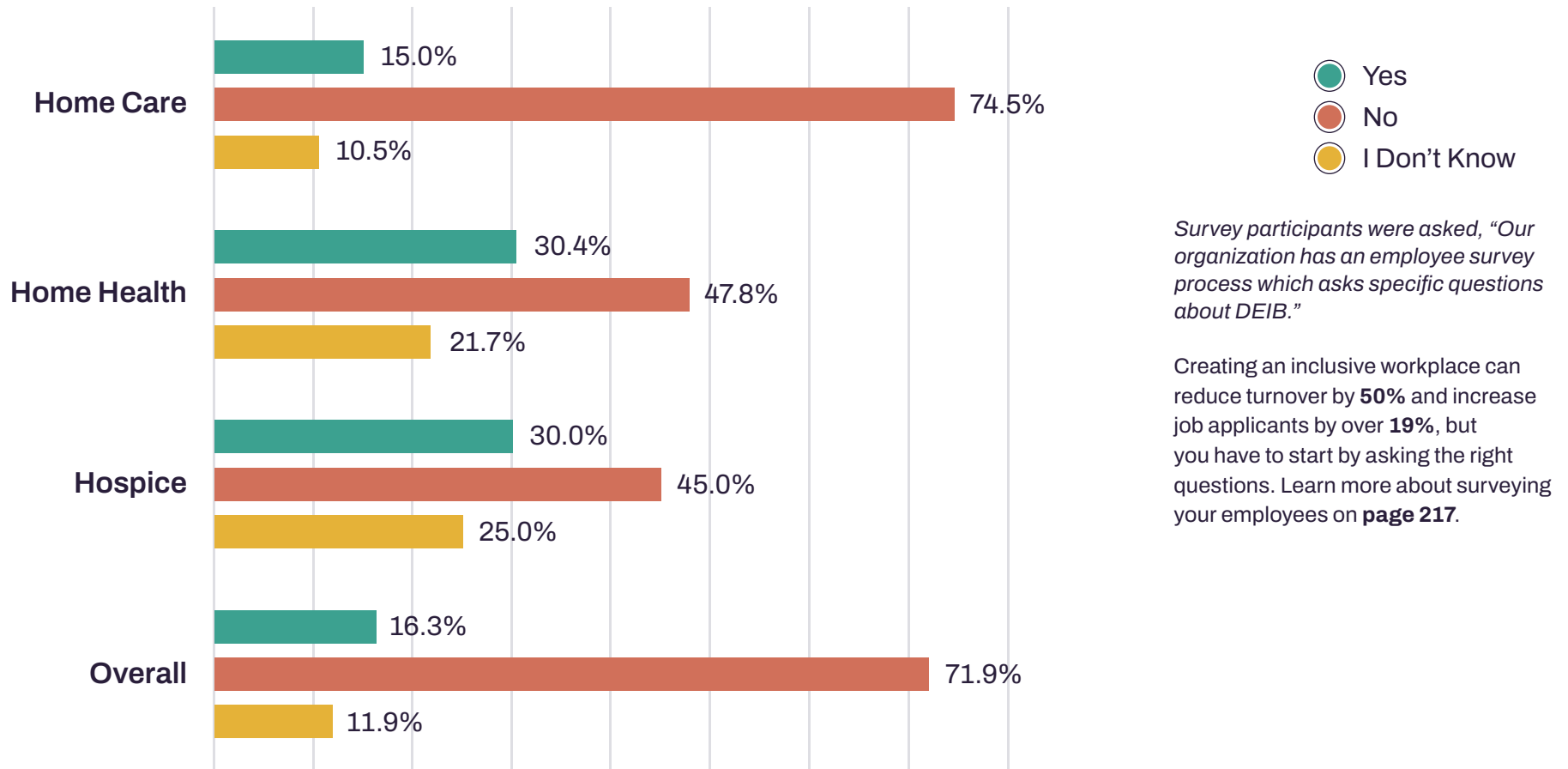
DIVERSITY, EQUITY, INCLUSION, & BELONGING

7.12 Overall Organizations With a DEIB Department





DIVERSITY, EQUITY, INCLUSION, & BELONGING

7.13 Overall Organizations That Ask DEIB Questions in Their Survey Process



Key Statistics from the
2025 Best of Home Care®
Top 100 in Experience Award



Total Leader in Experience award-winning locations:

100

States with the most Top 100 in Experience award-winning providers:



- Top States**
Texas: **18**
Pennsylvania, Georgia: **8**
Florida: **7**
Illinois: **6**
Michigan, New Jersey: **5**

Out of the Top 100, the Average OSAT score in 2024:

9.48

First-time award-winning locations in 2024:

43

Number of repeat award-winning locations: *(from last year)*

44



Key Statistics from the
2025 Best of Home Care®
Leader in Training Award



Total Leader in Training award-winning locations:

445

State with the most Leader in Training award-winning providers:



Top States
Illinois: **28**
Oregon: **27**
Georgia: **26**
Virginia: **25**
Washington: **23**

Average number of coursework hours by learner in 2024:

54.66

Hours of completed courses across all winners in 2024:

404,894

Number of repeat award-winning locations: *(from last year)*

231



Key Statistics from the
2025 Best of Home Care®
Leader in Experience Award



Total Leader in Experience award-winning locations:

556

States with the most Leader in Experience award-winning providers:



- Top States**
Texas: **73**
California: **45**
Florida: **37**
Pennsylvania: **29**
Georgia: **26**

Number of agencies that have earned five or more years total:

91

First-time award-winning locations in 2024:

142

Number of repeat award-winning locations: *(from last year)*

331



Key Statistics from the 2025 Best of Home Care® Provider of Choice Award



Total Provider of Choice award-winning locations:

1,495

States with the most Provider of Choice award-winning providers:



Top States

Texas: **151**
Pennsylvania: **125**
Florida: **120**
California: **116**
New Jersey: **83**

Number of agencies that have earned five or more years total:

341

First-time award-winning locations in 2024:

197

Number of repeat award-winning locations: *(from last year)*

1,099



Key Statistics from the
2025 Best of Home Care®
Employer of Choice Award



Total Employer of Choice award-winning locations:

1,213

States with the most Employer of Choice award-winning providers:



Top States
Texas: **139**
California: **103**
Florida: **92**
Pennsylvania: **71**
New Jersey, Illinois: **47**

Number of agencies that have earned five or more years total:

342

First-time award-winning locations in 2024:

125

Number of repeat award-winning locations: *(from last year)*

990

Analyzing Your Organization's Online Reputation: How to Drive the Greatest Impact from Reviews



Denise Grabb

Director of Reviews
and Marketing
Caring.com



“Reviews serve as ‘social proof’—either **reinforcing the most valuable attributes of your services** (why you’re worth consideration) or conversely, undermining your ability to attract and convert new customers.”

It’s been nearly 20 years since consumer reviews about agencies first started appearing publicly on the web—with the oldest home care agency review on Caring.com dated August 2008. In 2025, online reviews are now one of the most influential ways seniors and their families find and choose in-home senior care services, relying on the opinions and experiences of ‘others like me’ to make informed decisions.

As this audience becomes more digitally savvy and more discerning of online content, it’s crucial for home-based care providers to focus not just on the volume of reviews, but also on their credibility, quality, and recency. Building and managing a strong online reputation like this can significantly boost your company’s sales and marketing success.

Assessing and Building the Credibility of Reviews

Reviews serve as “social proof”—either reinforcing the most valuable attributes of your services (why you’re worth consideration) or conversely, undermining your ability to attract and convert new customers. However, for reviews to effectively build trust, they need to appear authentic and credible. If reviews don’t seem genuine, potential clients will be less likely to trust them—and in turn, may lose confidence in pursuing your services.

1. Earn Verified Reviews on Trusted Platforms

It’s essential to ensure your reviews come from legitimate, verified sources. This should be a key focus in building your online review collection and when analyzing your company’s reputation. Focus on platforms that rank high in search results and are well-regarded within the industry.

For example, the [Activated Insights integration with Caring.com](#) ensures that your customers’ reviews are published publicly on an authoritative third-party website



“When reviews are connected to actual clients, **potential customers can trust that the reviews reflect real experiences, not marketing spin.**”

prominently featured in Google’s “Reviews from the web” module, and in other search results easily found and highly used by seniors and their families. Because these reviews are sourced to your client roster, you’re not only building confidence in their validity, you also know more context behind the feedback—being able to add more insight for the potential customer in how you respond to and promote the reviews. When reviews are connected to actual clients, potential customers can trust that the reviews reflect real experiences, not marketing spin.

2. Review Content and Volume

While having a good number of reviews is important, the quality and content of those reviews matter most. Care seekers are often wary of businesses with only positive reviews or those that seem too generic or too good to be true. For example, having 50 five-star reviews without a single criticism is likely to be suspicious to potential clients—no business is perfect. Similarly, if reviews are too brief (e.g., “They’re great!”), they won’t provide valuable insights about your services.

The best reviews contain multiple, specific details about the service experience. For example, a review that highlights a care employee’s punctuality, their ability to handle complex needs, or the ways they improved a senior’s life can help prospective customers see the value your services provide.

3. Avoid Fake and Incentivized Reviews

The most impactful reviews aren’t written by your marketing team, aren’t bought or paid for, aren’t published under false pretense, and don’t include incentives. These tactics can actually lead to poor quality reviews, hurt your reputation, lower your credibility, and in some cases [be federally illegal and lead to significant fines](#).

A genuine review from a satisfied customer, written in their own words, can resonate more than one prompted by a gift card or employee bonus. For example, “I’m writing this review so Julia gets the \$50 bonus — she deserves it!” is far less compelling than, “Julia has been helping my dad for two years now; taking him to the store, cooking meals, and just spending time listening to his stories. She’s become like a member of our family.”

Improving the Quality of Reviews

While having a large volume of reviews is helpful, the quality of those reviews is what can truly set your business apart. High-quality reviews include useful, personalized and specific feedback.

1. Encourage Detailed Feedback

When requesting reviews, ask your customers to describe their experiences with your services and share specific examples. Encourage them to list some reasons why they chose your services and why they gave the rating they did. Reviews that mention how their caregiver supported daily tasks, your staff’s approach to companionship, or how the services met or exceeded family expectations for senior safety, comfort and quality



“Constructive criticism can help **strengthen the credibility and quality of the reviews**, while helping your organization optimize its offering.”

of life are particularly valuable. Remind them that their review is most important for those who are unfamiliar with your services—so they should share what they think would be most helpful in choosing your business over others.

2. Request Constructive Criticism

Not every review needs to be overwhelmingly positive. In fact, constructive criticism can help strengthen the credibility and quality of the reviews, while helping your organization optimize its offering. Ask potential reviewers to share if there's anything you can do to further improve your services, and then follow up to address concerns, communicate changes, and respond publicly to negative reviews in a professional manner. When current and potential customers see that you value service input and act on it, it builds trust and strengthens relationships.

Maintaining Recency of Reviews

In the 2024 Consumer Review Survey from BrightLocal, 93% of consumers said that the recency of a company's reviews impacted their decision-making when researching a local business. They also said that “sort by newest” is one of the most useful review functions when reading reviews. Additionally, for the Caring Stars 2025 award on Caring.com, agencies and large communities needed at least five recent reviews to be considered for the service excellence honor. For these reasons and more, your company should ensure that reviews about your services are showcasing enough recent feedback.

1. Encourage Timely Reviews Regularly

Create a company culture where service feedback is highly valued. Educate staff members about the importance of asking customers for reviews about their care experience. Using a service like [Activated Insights](#) can automate much of this process, making it easy to request feedback from customers at the right moments. You may also have access to similar review generation services via enhanced profiles on review platforms.

2. Prompt Reviews After Significant Events

Ask customers to leave a review after they experienced a positive milestone, such as an employee going above and beyond, or when a major care plan improvement is made. Prompting reviews shortly after noteworthy events, including at contract completion, helps ensure that the feedback is fresh, relevant, and accurate.

3. Make it Easy

The simpler you make it for your customers to leave a review, the more likely they are to follow through. Send a direct link to your business' review profile or an easy-to-use review submission form. Consider using phone-based review systems, which may be especially helpful for some seniors who aren't as comfortable with online forms and enjoy talking on the phone. Providing clear instructions, such as the best times to reach review agents or tips for giving a helpful review, makes the process as simple as possible.

Your Online Reputation Matters

Online reviews are now a critical part of your home-based care organization's success. By focusing on the **credibility, quality, and recency** of your reviews, your company can stand out for the right reasons.

Credible reviews build trust, quality reviews offer valuable insights, and recent reviews reflect your organization's current services. Regularly encouraging customers to leave thoughtful, specific reviews on trustworthy platforms with high visibility ensures your online reputation is optimized for savvy searchers, attracts new customers, and ultimately builds a stronger, more trusted brand. ■

ABOUT THE AUTHOR

Denise Graab is Director of Reviews and Marketing at [Caring.com](#), a leading senior care referral service and top site for consumer reviews. She has three decades of marketing communications experience, with a focus on social media and online reviews for the past 17 years. Since joining Caring in 2010, she's helped establish and manage the longest-running, highest-integrity senior care reviews program on the web, and oversees the Caring Stars award. To receive more online reputation guidance from her, and grow your reviews profile on Caring.com: please contact reviews@caring.com or (650) 762-8190.

Beyond the Exit Strategy: How a Hospitality Mindset Transformed Our Home-Based Care Agency



Becky Reel

Director of Reviews
and Marketing
Reel Consulting



In 2013, I took over our family's home care agency with what I thought was a straightforward plan: build it up, sell it, secure my parents' retirement, then head back to the world of corporate. Armed with 15+ years of marketing and sales experience, I assumed my background would give me the edge needed to quickly scale the business. What I didn't expect was that the real differentiator wouldn't come from my marketing expertise at all—it would come from completely reframing how we viewed our industry.

While my marketing background certainly helped us craft compelling messages and build strong brand awareness, the breakthrough came when we stopped thinking of ourselves as just a home-based care agency and started operating with a hospitality mindset. In hindsight, this shift transformed every aspect of our

business and ultimately led to us being named Activated Insights #1 ranked agency in North America in 2022.

In the hospitality industry, every interaction is an opportunity to create an exceptional experience. We applied this same principle to home-based care, treating each touchpoint—whether with care staff, clients, families, or community partners—as a chance to exceed expectations. This wasn't just about providing care; it was about creating an experience that made everyone feel valued, supported, and truly cared for.

We developed what we called our “boutique approach” which challenged the traditional agency model. Rather than focusing primarily on marketing and sales, we heavily invested in what I call the three pillars of sustainable care.



The Three Pillars of Sustainable Care

1. **Care Staff Investment and Development:** Like the finest hotels invest in their staff, we reimagined our care staff support system. We created a multi-tiered professional development program that included paid training beyond state requirements, a mentorship program pairing veteran employees with new hires, and a clear career advancement pathway. We implemented a “Caregiver Success Program” that provided quarterly bonuses tied to client satisfaction, continuing education completion, and perfect attendance. Similar to how luxury hotels offer employee perks, we provided our care staff with comprehensive benefits including health insurance, paid time off, and emergency assistance funds. Perhaps most importantly, we established mentorship programs that met with leadership to provide direct input on agency policies and procedures. This investment resulted in our turnover rate dropping to less than 20% annually—significantly below the industry average of 79%.
2. **Family-Centered Care Innovation:** We developed a comprehensive family support system that went far beyond basic care services. Our “Family Connect” program provides monthly support group meetings for family caregivers, offering both in-person and virtual options. We prided ourselves on real-time updates on their loved one’s care, including mood tracking, activity completion, and direct communication with their care staff. Understanding that families often struggle with difficult decisions, we established a network of trusted elder law attorneys, financial planners, and healthcare advocates who could provide expert guidance. Our care managers



“By focusing on being a **valuable resource first and a service provider second**, we built trust that naturally led to deeper community connections and organic growth.”

conducted “Quality of Life” assessments that went beyond medical needs to include social engagement, nutrition, and overall well-being, ensuring we were proactively addressing all aspects of our clients’ lives.

3. **Community Integration:** We planted deep roots in our community through strategic partnerships and Community Integration. We positioned ourselves in the community as more than just another home-based care agency—we became a trusted resource and educational partner for seniors and families navigating the aging journey. We created a welcoming environment where anyone could come for guidance, whether they needed our services or not. Our office became known as a community hub where families could attend free educational workshops on topics ranging from “Understanding Dementia” to “Navigating Medicare,” and “Planning for Long-Term Care.”

From Service Provider to Trusted Community Resource

We developed strong relationships with local physicians, social workers, and senior living communities—not by selling our services, but by becoming their go-to resource for helping families in transition. When hospitals or physicians encountered families struggling with aging-related decisions, they would send them to us knowing we would provide honest guidance—even if that meant referring them to other services better suited to their needs.

Our team regularly participated in community health fairs, senior center events, and local aging conferences, not as vendors but as educators. We created practical resources like our “Aging Well Guide” and “Family Caregiver Toolkit” that became widely used throughout our community. By focusing on being a valuable

“It’s about understanding that **we’re in both the care business, and the hospitality business.** Every interaction, every touchpoint, every decision should be viewed through this dual lens.”



resource first and a service provider second, we built trust that naturally led to deeper community connections and organic growth.

This approach transformed how our community viewed us. We weren’t just another home care agency—we became the first call people made when they needed guidance about aging issues. This positioning not only generated consistent referrals but also created a network of strong partnerships with other senior service providers who shared our commitment to community education and support. The results of this approach were transformative. Our referral rates soared, with over 80% of new clients coming from word-of-mouth recommendations. Caregiver turnover dropped significantly below industry averages, and client satisfaction scores consistently exceeded benchmarks. While my marketing background helped us tell our story effectively, it was our hospitality-focused approach that gave us a story worth telling.

When the time came to consider selling the agency, we found ourselves in an enviable position with multiple options. The value we had built wasn’t just in our revenue numbers—it was in our reputation, our team stability, and our deep community relationships. These intangible assets proved to be incredibly valuable to potential buyers.

From Exit Strategy to Lasting Impact

The greatest lesson from my decade-long journey is this: success in home-based care isn’t about finding shortcuts to growth or focusing solely on exit strategies. **It’s about understanding that we’re in both the care business, and the hospitality business.** Every interaction, every touchpoint, every decision should be viewed through this dual lens.

For agency owners focused on growth, I offer this advice: shift your metrics and your mindset. While revenue and client numbers matter, it’s important to also measure care staff satisfaction, family engagement levels, and community impact. Think like a hospitality professional—because at the end of the day, we’re not just providing care, we’re creating experiences that impact lives.

Looking back, my “naive” plan to quickly build and sell was transformed into something far more valuable—the creation of a sustainable care model that continues to serve our community and could be replicated by others in the industry. Sometimes the best exit strategy is discovering you’re exactly where you need to be. ■

ABOUT THE AUTHOR

Becky Reel understands the highs and lows of running a home care agency because she’s lived them firsthand. As a mother of two young children, she intimately knows the delicate balance of growing a business while treasuring precious moments at home. She built her agency into North America’s #1 ranked organization by Activated Insights, achieving remarkable 300% year-over-year growth. Under her leadership, [Reel Consulting](#) maintained its position in Activated Insights’ Top 100 for seven consecutive years.

After a successful private equity acquisition, Becky embraced her passion for helping fellow agency owners and operators thrive. She deeply understands that success in home care extends beyond revenue and operations – it’s about building a business that enhances your life, not consumes it. Her mission centers on guiding home care leaders through their journey, whether it’s optimizing operations, building strong caregiver teams, or creating more time for life’s meaningful moments.

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- ✓ Improve care outcomes
- ✓ Boost customer and employee satisfaction
- ✓ Leverage your strengths to drive success
- ✓ Address challenges head-on before they become problems
- ✓ Uncover opportunities for growth



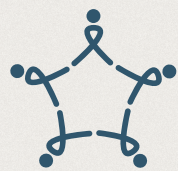
Your reputation is your future. Take charge of your company's story with Experience Management.

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The Alliance is a member-driven organization transforming care in the home by supporting and fighting for home health, hospice, palliative care, home care, Medicaid HCBS, and pediatric care providers.

Learn more about member benefits at
AllianceForCareAtHome.org/Membership



**National Alliance
for Care at Home**

allianceforcareathome.org





SUMMARY

Participation Summary

The Participation Summary offers an overview of the participants whose data contributed to the Benchmarking Report, highlighting factors such as years in business, provider type, geographic location, and annual revenue. This section provides valuable insight into the composition of the survey respondents who helped shape this year's edition of the Benchmarking Report.

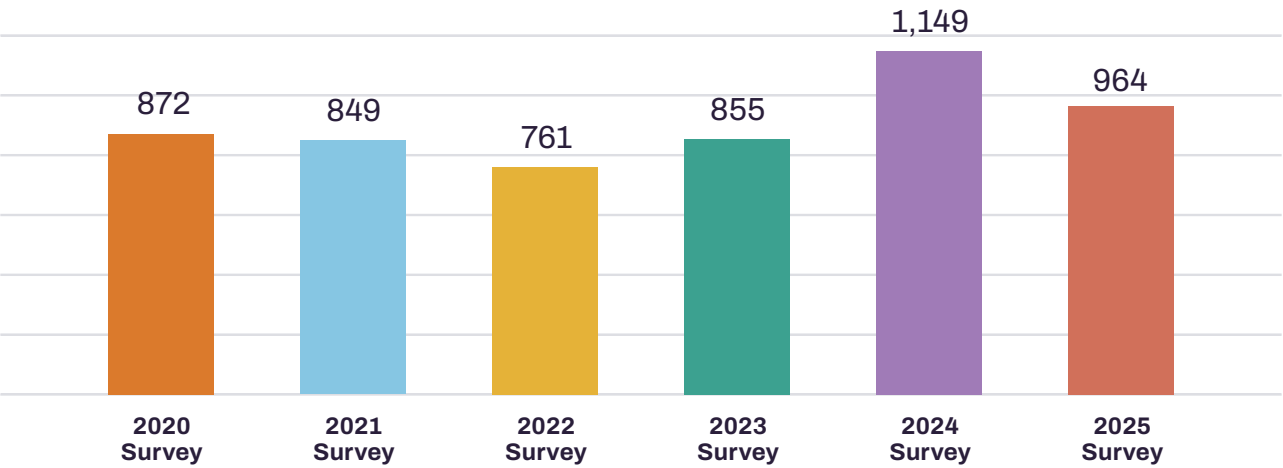
Section Contents

- 220** Overall Survey Participation
- 226** Member Association Sources
- 227** Survey Participation by Lines of Business
- 235** Masters Definition
- 236** Home Care Masters Survey Participation



OVERALL SURVEY PARTICIPATION

8.1 Historical Total Participation - Providers

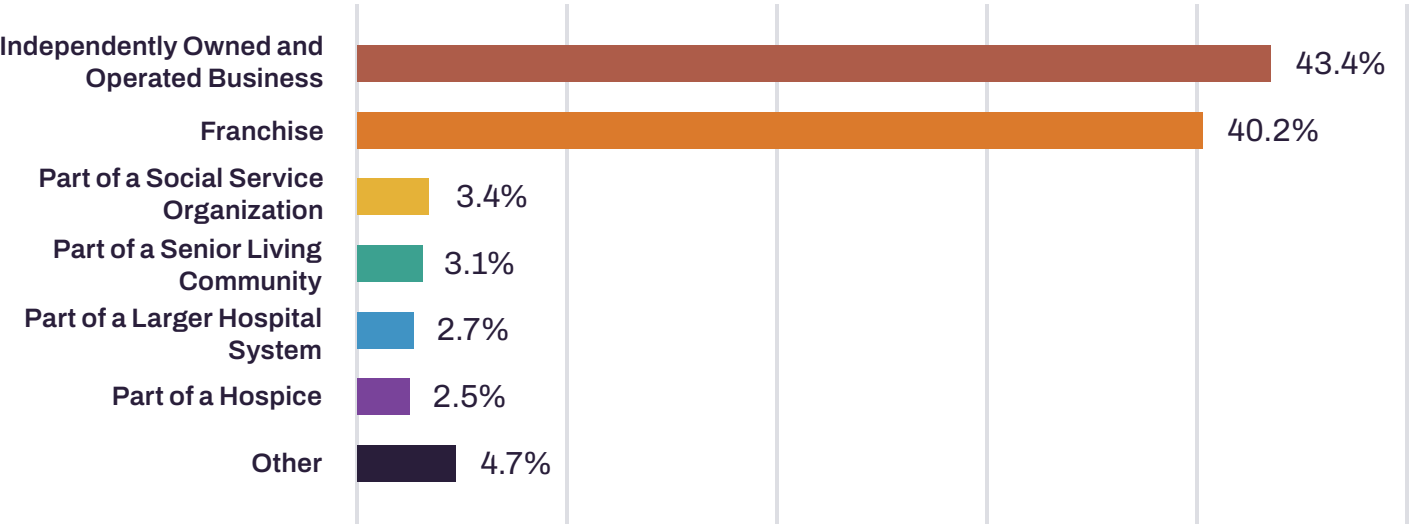


Total Providers Participated represents those businesses who shared financial, sales and marketing, operations, and care staff training information for all of the locations in which they operate.

For the 2025 survey, we made enhancements to survey questions and increased the number of required questions. This lead to a slight decrease in participations, but also allowed us to collect, on average, **12.7%** more data points per participant than the previous year.

OVERALL SURVEY PARTICIPATION

8.2 Participation by Provider Type for 2025 Report

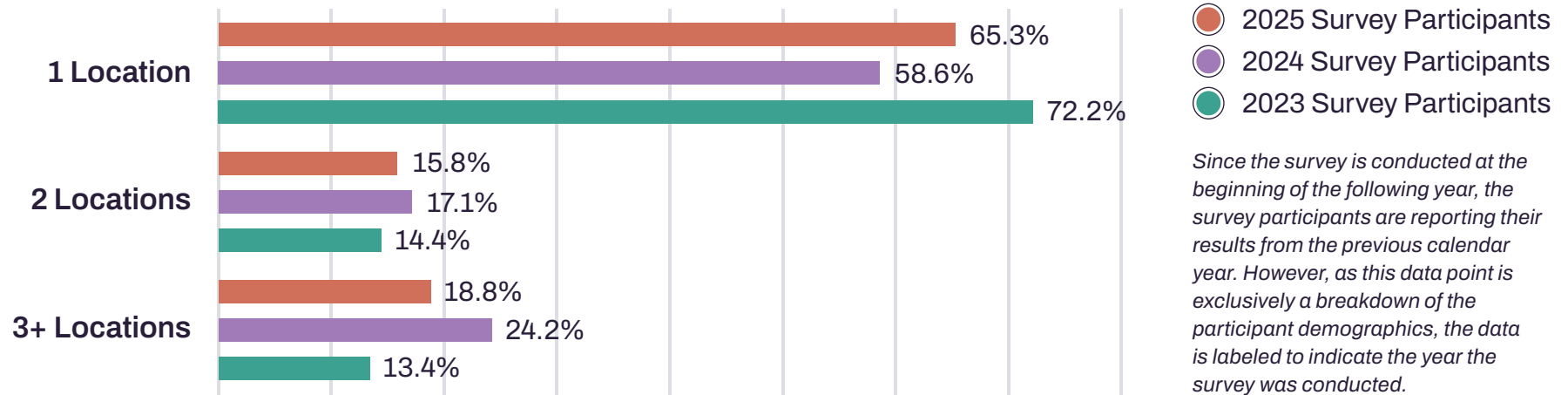


Survey participants were able to select all the business types that applied to their business. For example, a business could be both an independent provider and a member of a membership network.



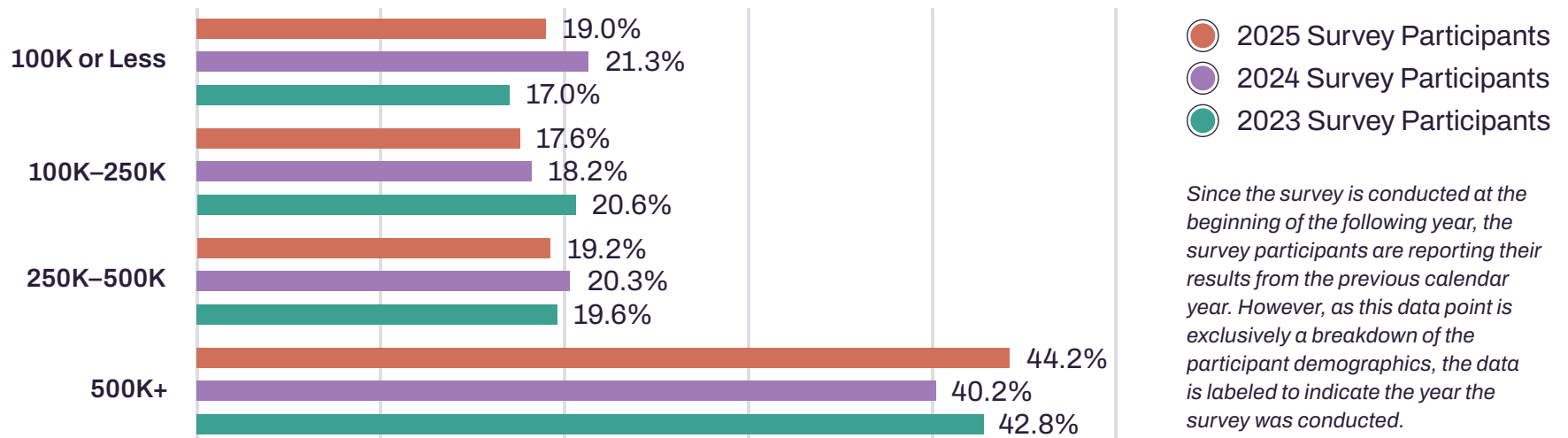
OVERALL SURVEY PARTICIPATION

8.3 Historical Participation by Number of Locations



OVERALL SURVEY PARTICIPATION

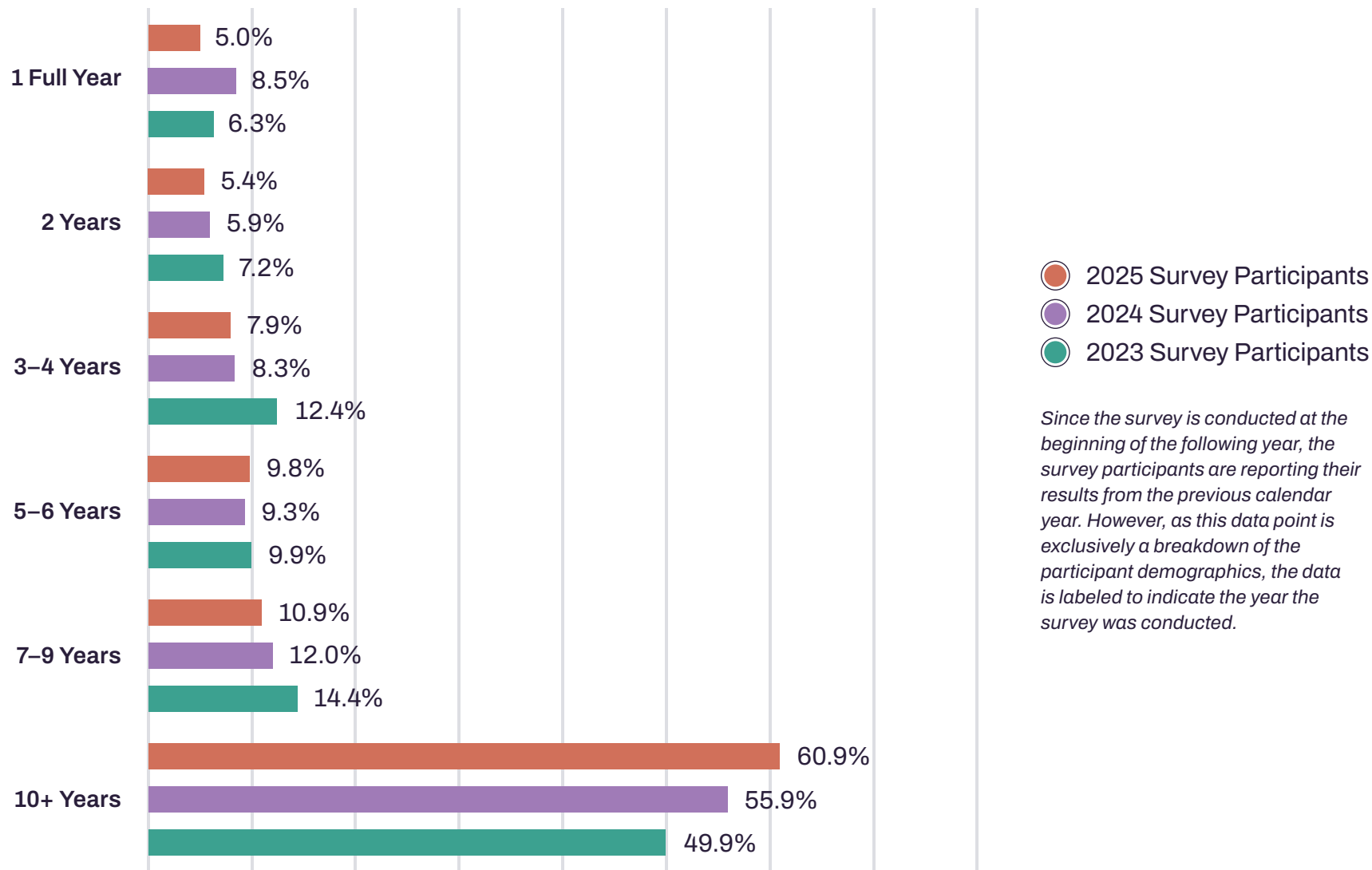
8.4 Historical Participation by Populations Served



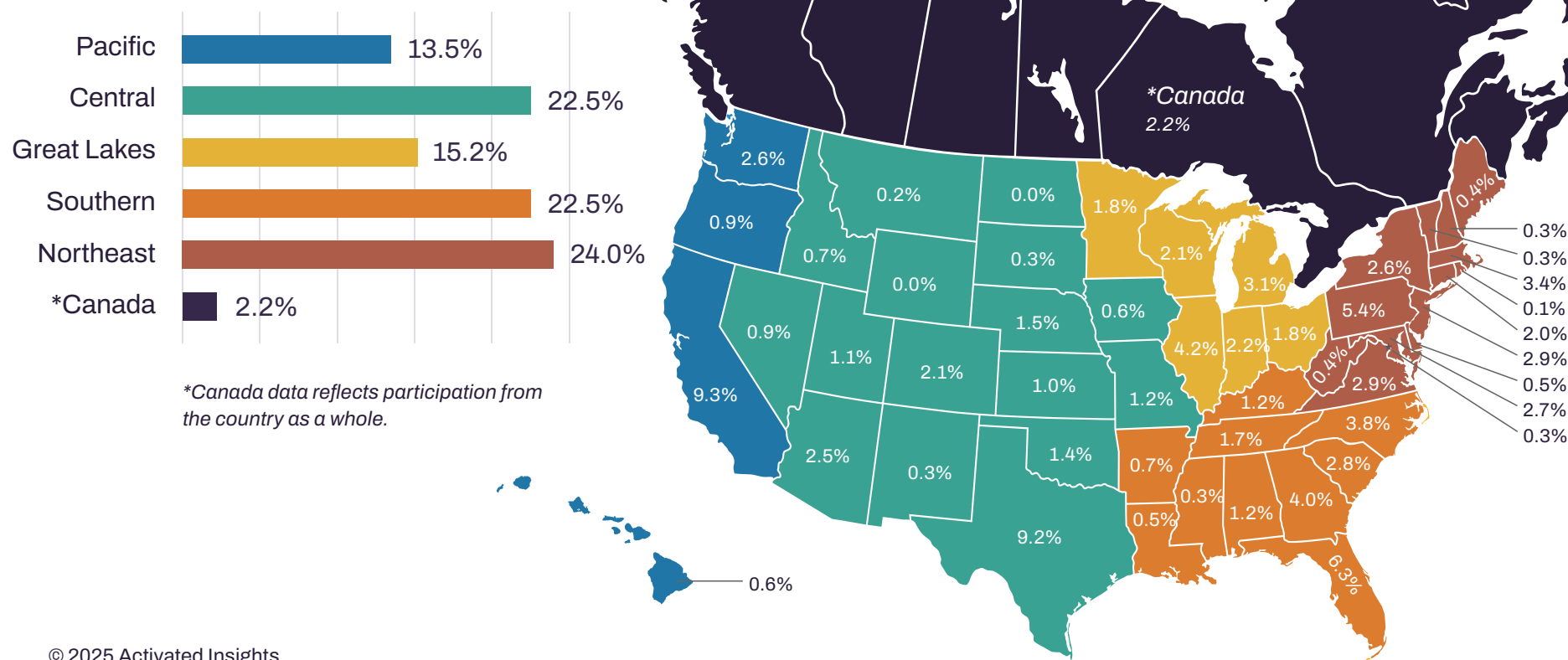


OVERALL SURVEY PARTICIPATION

8.5 Historical Participation by Years in Business



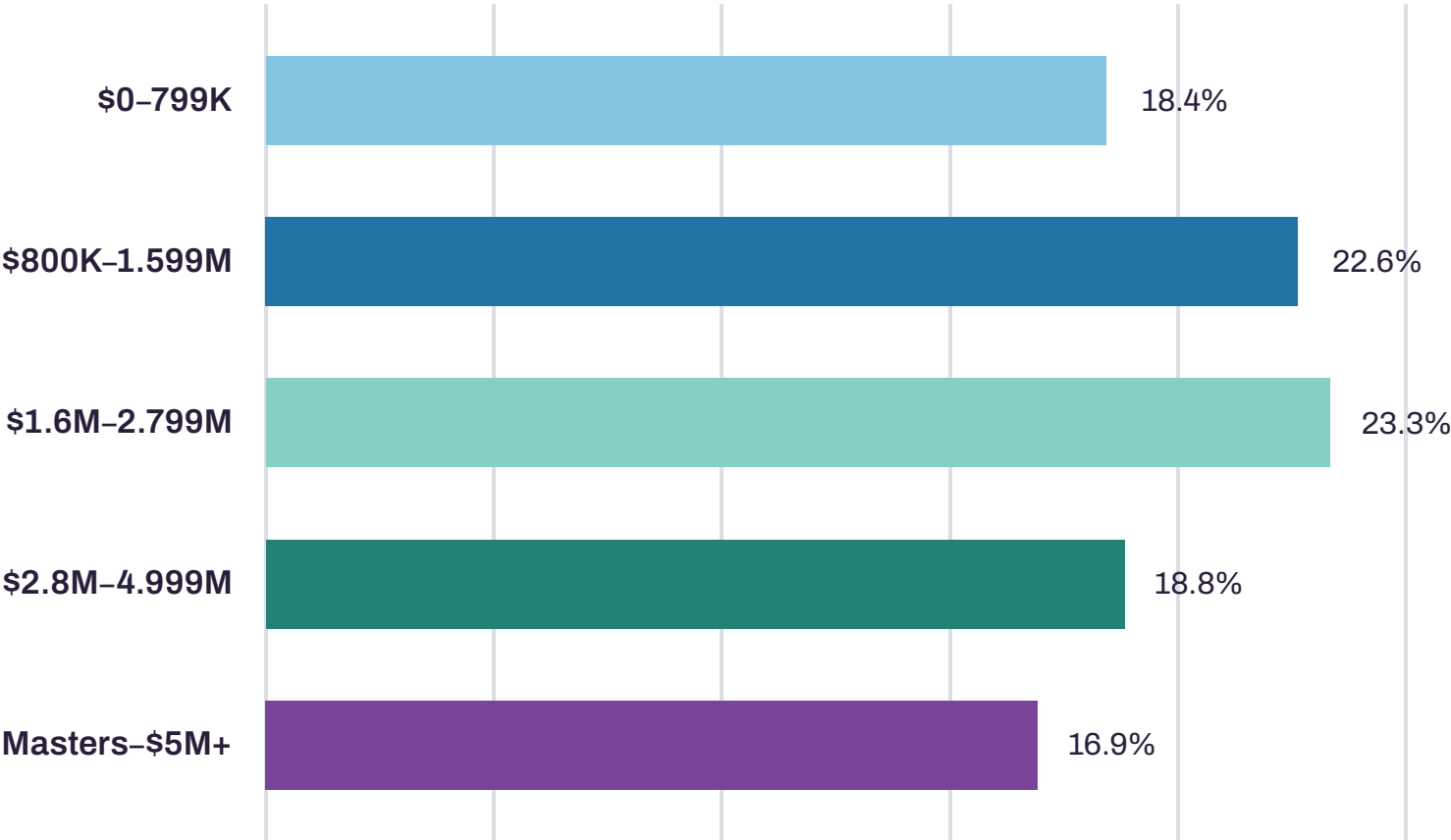
8.6 Participation by U.S. State & Canada for 2025 Report





OVERALL SURVEY PARTICIPATION

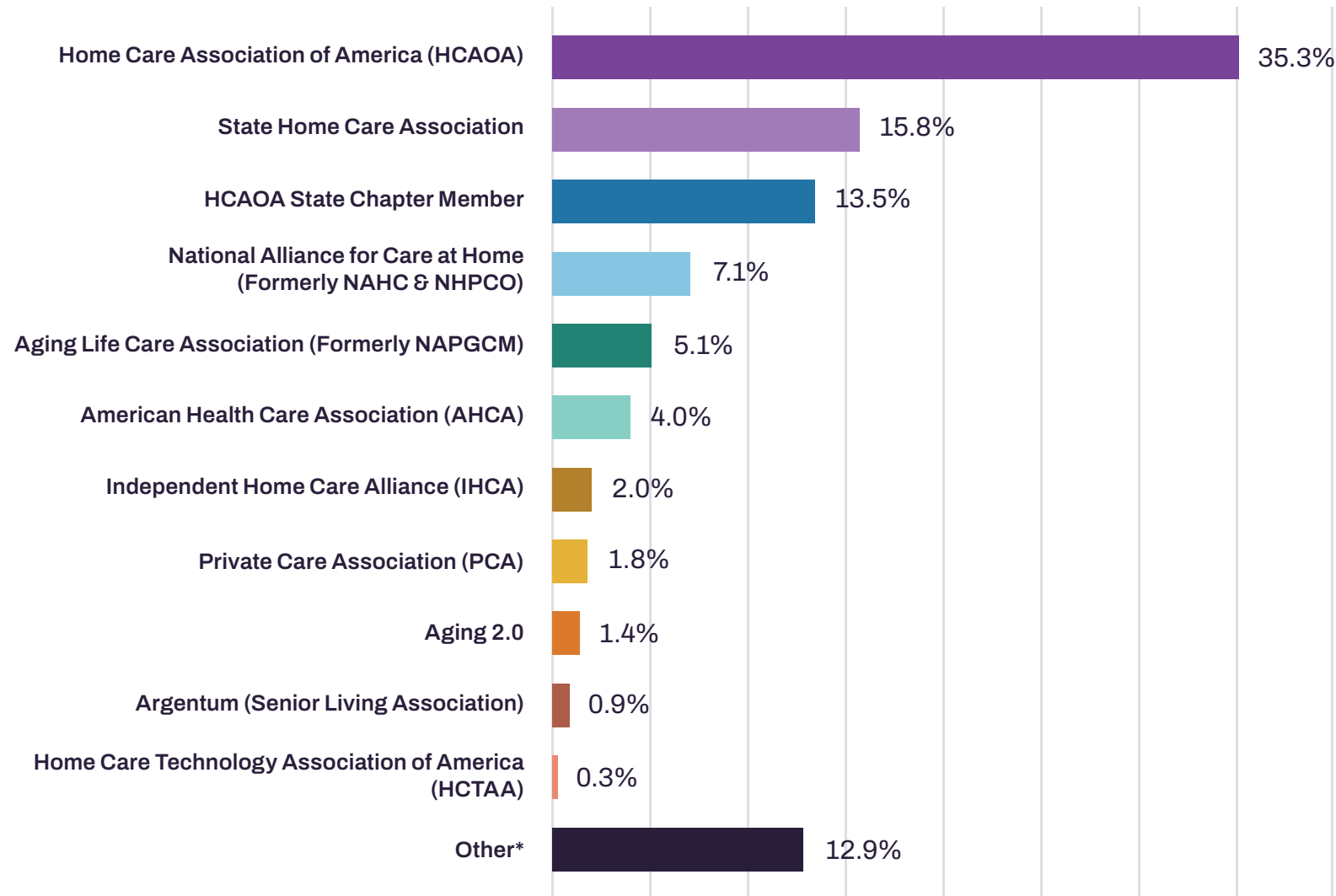
8.7 Participation by Revenue Range for 2025 Report





OVERALL SURVEY PARTICIPATION

8.8 Membership Associations for 2025 Report



This graph represents those providers who are part of a membership association. From a list of associations, survey participants were asked to "select all that apply."

*Other Member Association sources mentioned are listed on the next page.



MEMBER ASSOCIATION SOURCES

Other Member Associations Mentioned

This list provides some additional member association sources for the 2025 survey that you may like to review.

CERTIFICATIONS & ACCREDITING BODIES

- AAFD – American Association of Franchisees & Dealers
- Certified Senior Advisors (CSA)
- HIMSS – Healthcare Information and Management Systems Society
- Home Care Standards Bureau
- NYCHH – NYC Home Health
- TDMHSAS Licensed Personal Support Services Agencies

LOCAL NETWORKING GROUPS

- City Chamber of Commerce
- Gwinnett Senior Providers Network
- Guilford Dental and Medical Association
- Houston Area Continuity of Care
- Houston Gerontological Society
- IAHHC
- Lehigh Valley Aging in Place
- Lowcountry Network
- Naperville/Lisle Triad
- Northern Westchester Geriatric Committee
- San Diego Regional Home Care Council
- Senior Action Network
- Senior Provider Group (Anne Arundel County, MD)
- Severna Park Chamber
- SWFL Guardian Association
- Triad Retirement Living Association

NATIONAL ASSOCIATIONS

- AAFP – American Academy of Family Physicians
- AAPACN – American Association of Post-Acute Care Nursing
- ABHC – American Board of Home Care
- AOTA – American Occupational Therapy Association
- CAPC – Center to Advance Palliative Care
- CHAP – Community Health Accreditation Partner
- CMSA – Case Management Society of America
- HPNA – Hospice and Palliative Nurses Association
- HFA – Hospice Foundation of America
- LeadingAge
- NADSP – National Alliance for Direct Support Professionals
- NCCDP – National Council of Certified Dementia Practitioners
- Orion Resource Group
- Society of Certified Senior Advisors (CSA)
- The Joint Commission
- WPO – Women Presidents Organization

PROFESSIONAL & INDUSTRY NETWORKS

- Alzheimer's Foundation of America
- ANCOR – American Network of Community Options and Resources

- Better Living For Seniors of Polk County
- Care Providers of Minnesota
- Continuity of Care, Senior Service Coalition
- Elder Resource Association
- EO – Entrepreneurs' Organization
- Gentiva
- Hearts For Home Care
- Home Care CEO
- Infusion Nurse Society
- Lincoln Group/Homecare 100, Innovation Forum
- Positive Approach to Care
- Senior Umbrella Network – Suffolk NY
- The Senior Estate Concierge

STATE & REGIONAL ASSOCIATIONS

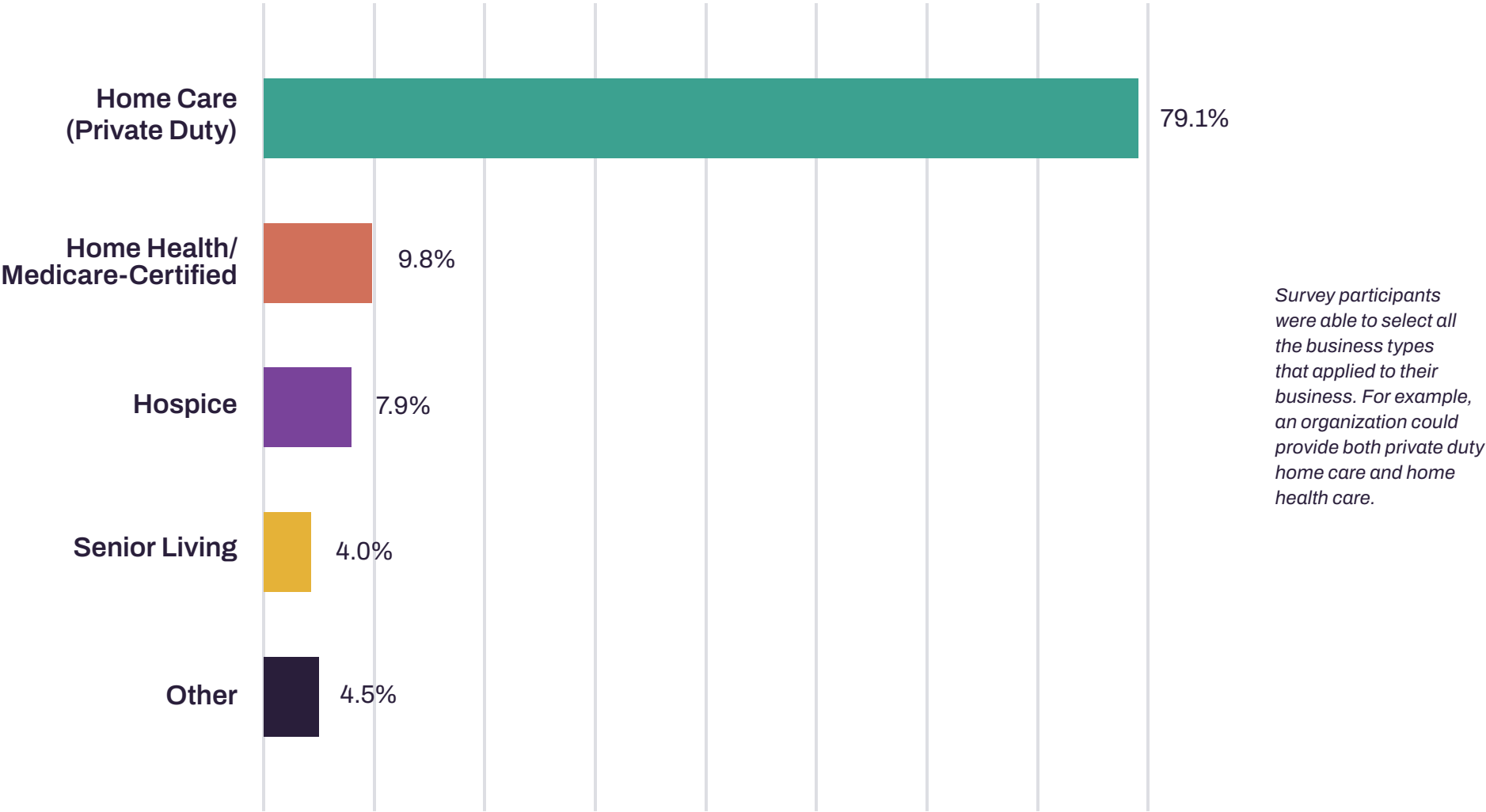
- AZNHA – Arizona In-Home Care Association
- BC Care Providers Association (Canada)
- CAHSAH – California Association for Health Services at Home
- CASPH – California State Provider Hotline
- CCDRA – California Coalition of Domestic Referral Agencies
- CT Association for Healthcare at Home
- DAHCC – Delaware Association for Home & Community Care
- HCAF – Home Care Association of Florida
- Home Care Alliance of MA

- Home Care Hospice Association of New Jersey
- Hospice Federation of MA
- Maryland-National Capitol Homecare Association
- Michigan HomeCare & Hospice Association
- MNCHA – Maryland-National Capital Homecare Association
- OHCA and OHPCA – Oregon associations
- State Home Health Care Association
- Tennessee Homecare Association
- Texas-New Mexico Hospice and Palliative Care Organization



SURVEY PARTICIPATION BY LINES OF BUSINESS

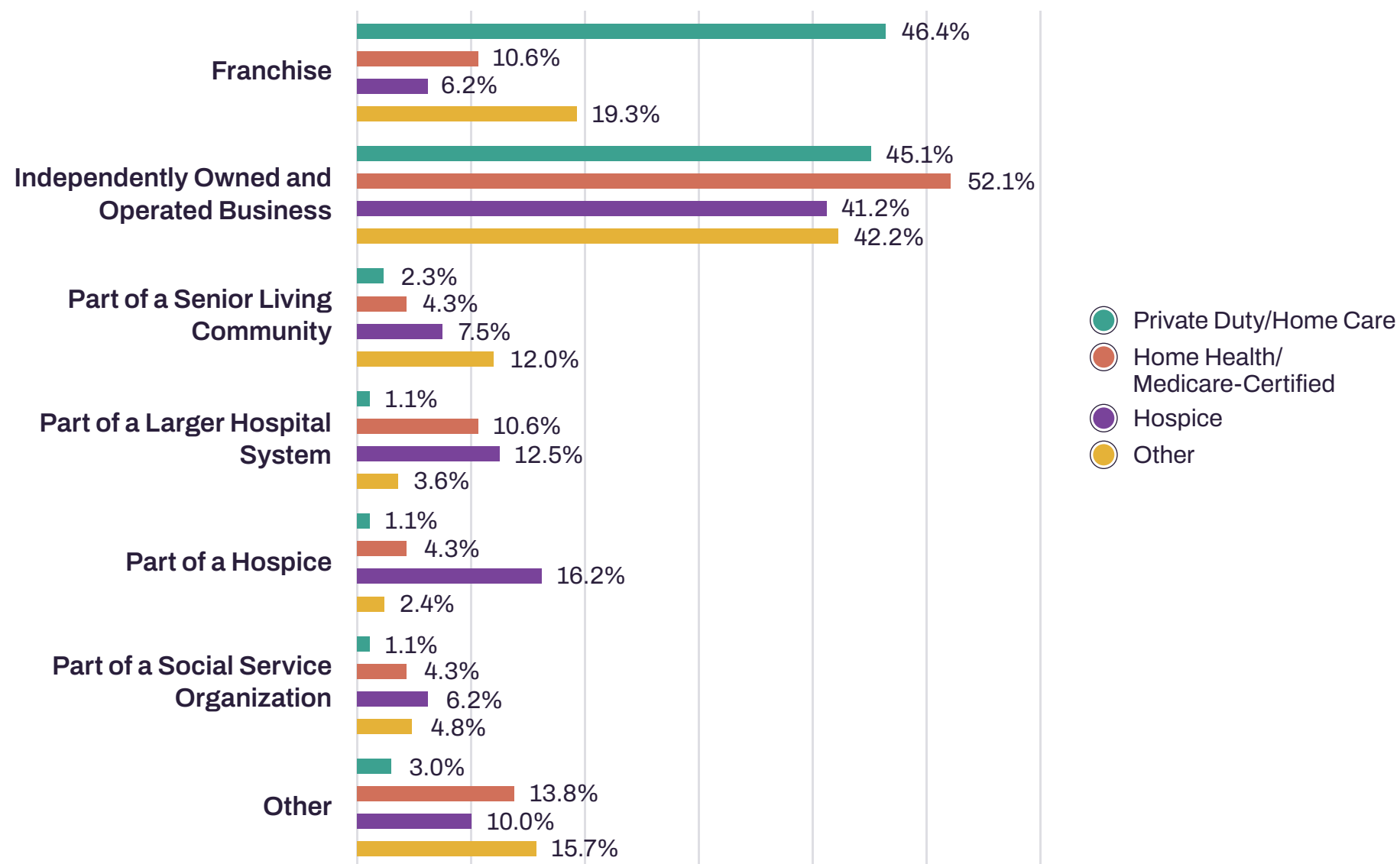
8.9 Survey Participation by Lines of Business Provided in 2025 Report





SURVEY PARTICIPATION BY LINES OF BUSINESS

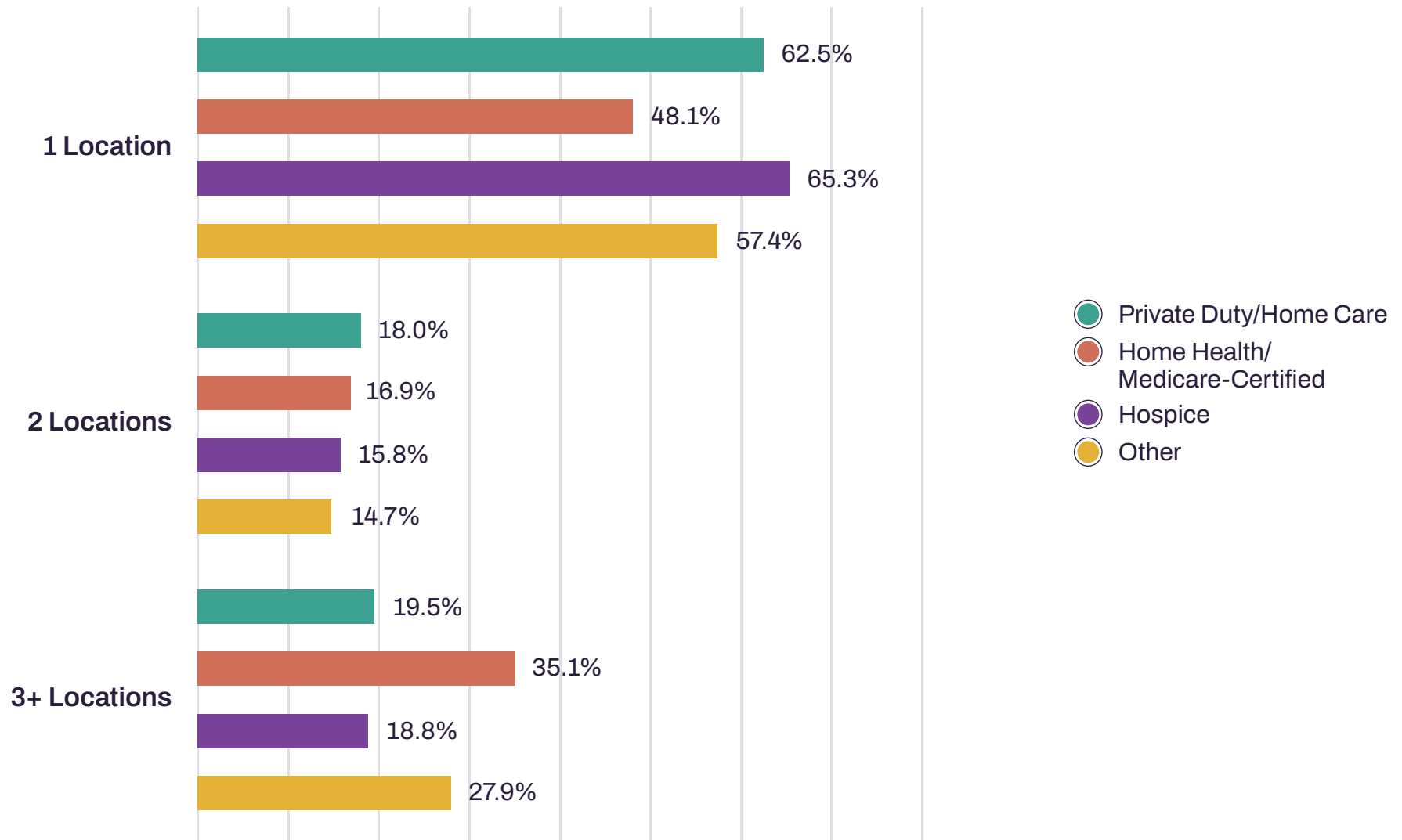
8.10 Survey Participation by Lines of Business Provided in 2024 - Provider Type





SURVEY PARTICIPATION BY LINES OF BUSINESS

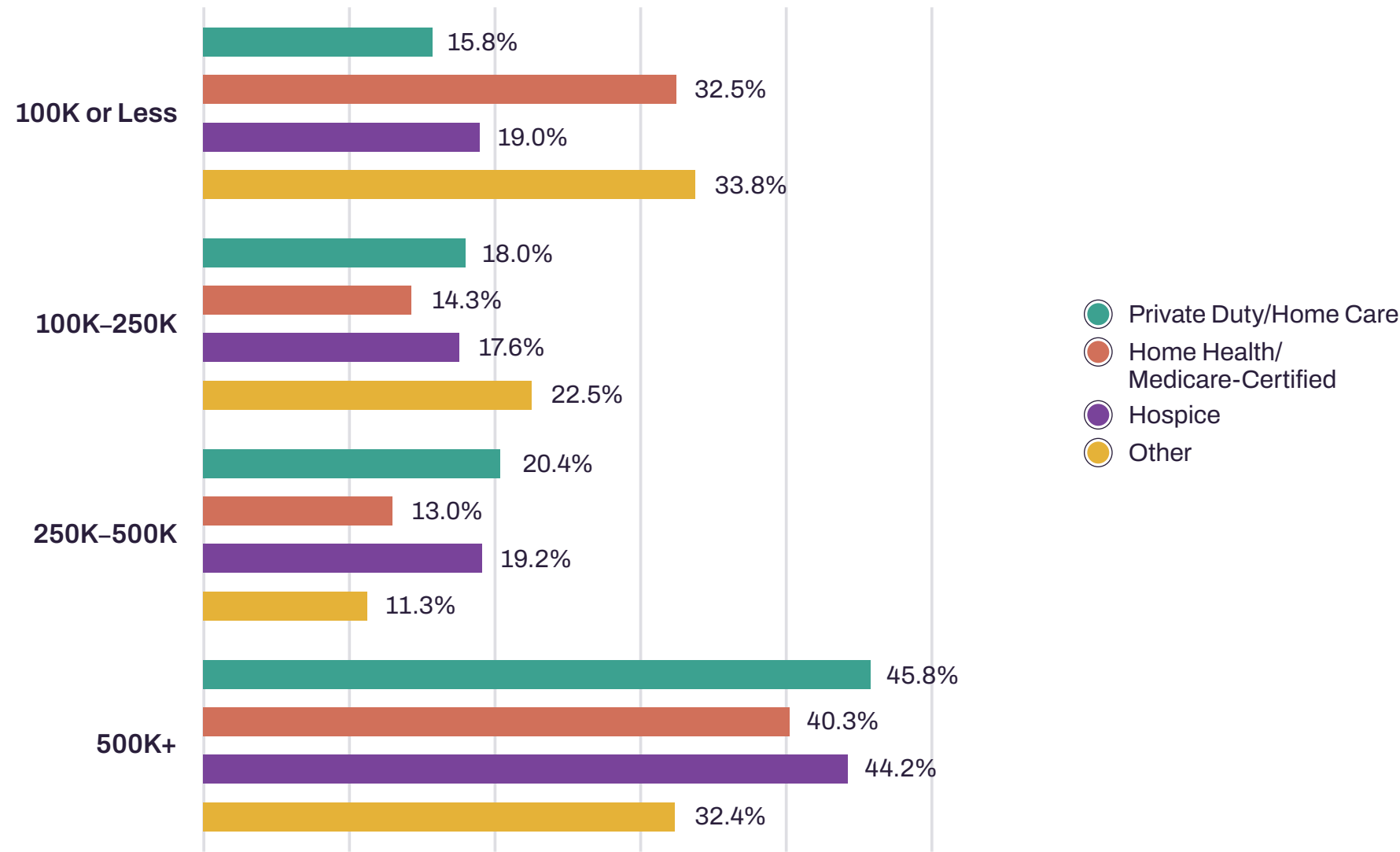
8.11 Survey Participation by Lines of Business Provided in 2024 - Number of Locations





SURVEY PARTICIPATION BY LINES OF BUSINESS

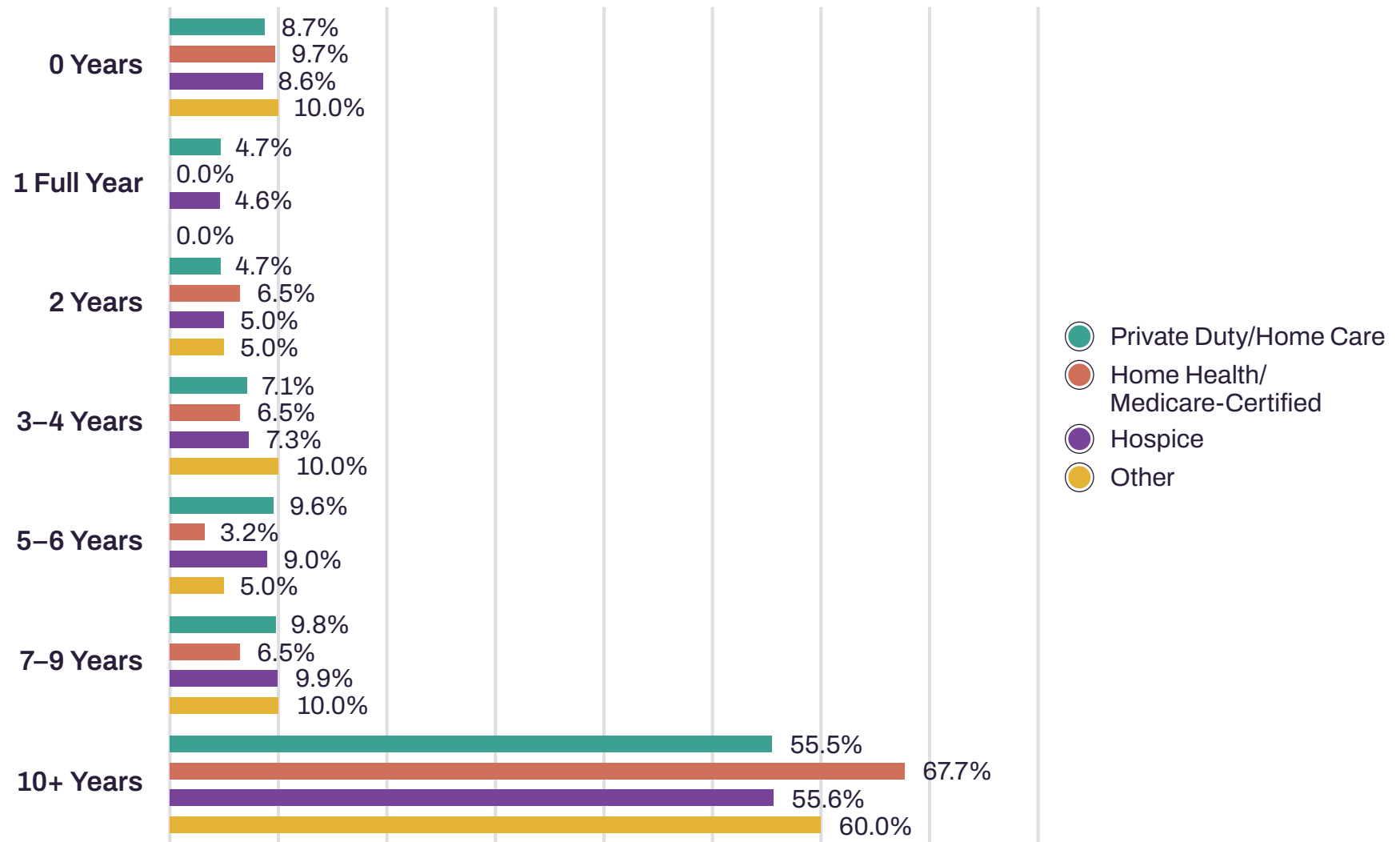
8.12 Survey Participation by Lines of Business Provided in 2024 - Population Served





SURVEY PARTICIPATION BY LINES OF BUSINESS

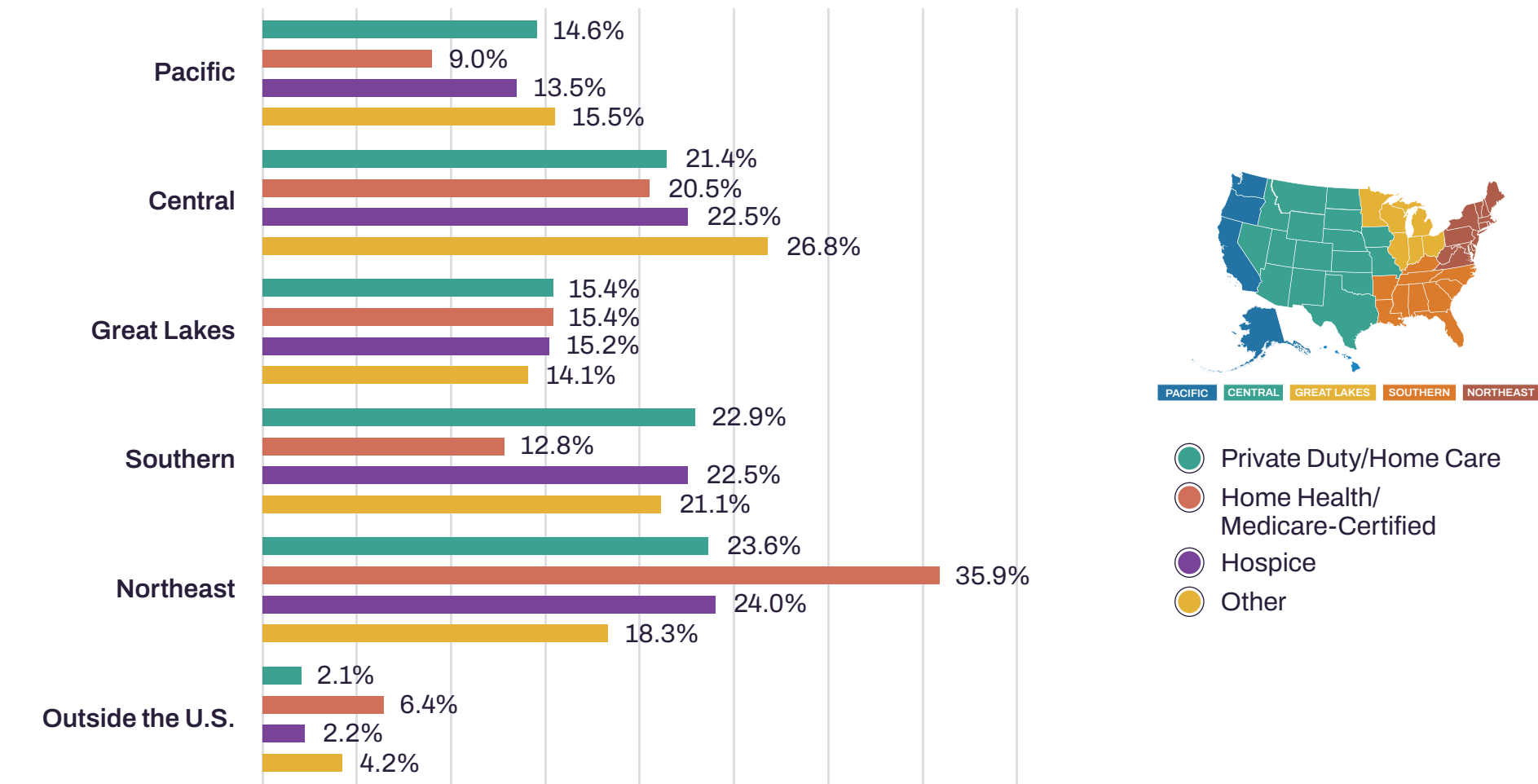
8.13 Survey Participation by Lines of Business Provided in 2024 - Years in Business





SURVEY PARTICIPATION BY LINES OF BUSINESS

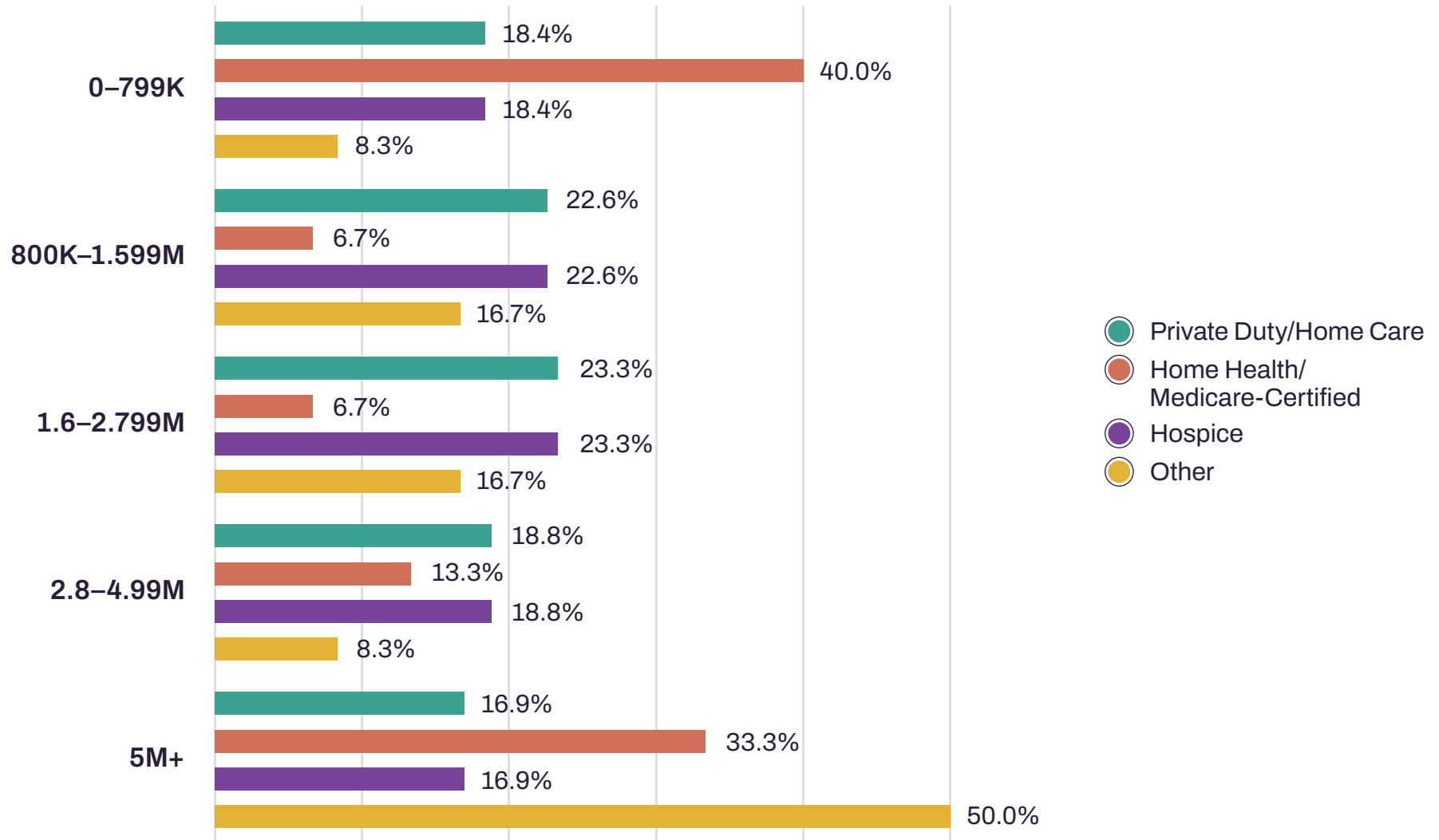
8.14 Survey Participation by Lines of Business Provided in 2024 - Geographic Region





SURVEY PARTICIPATION BY LINES OF BUSINESS

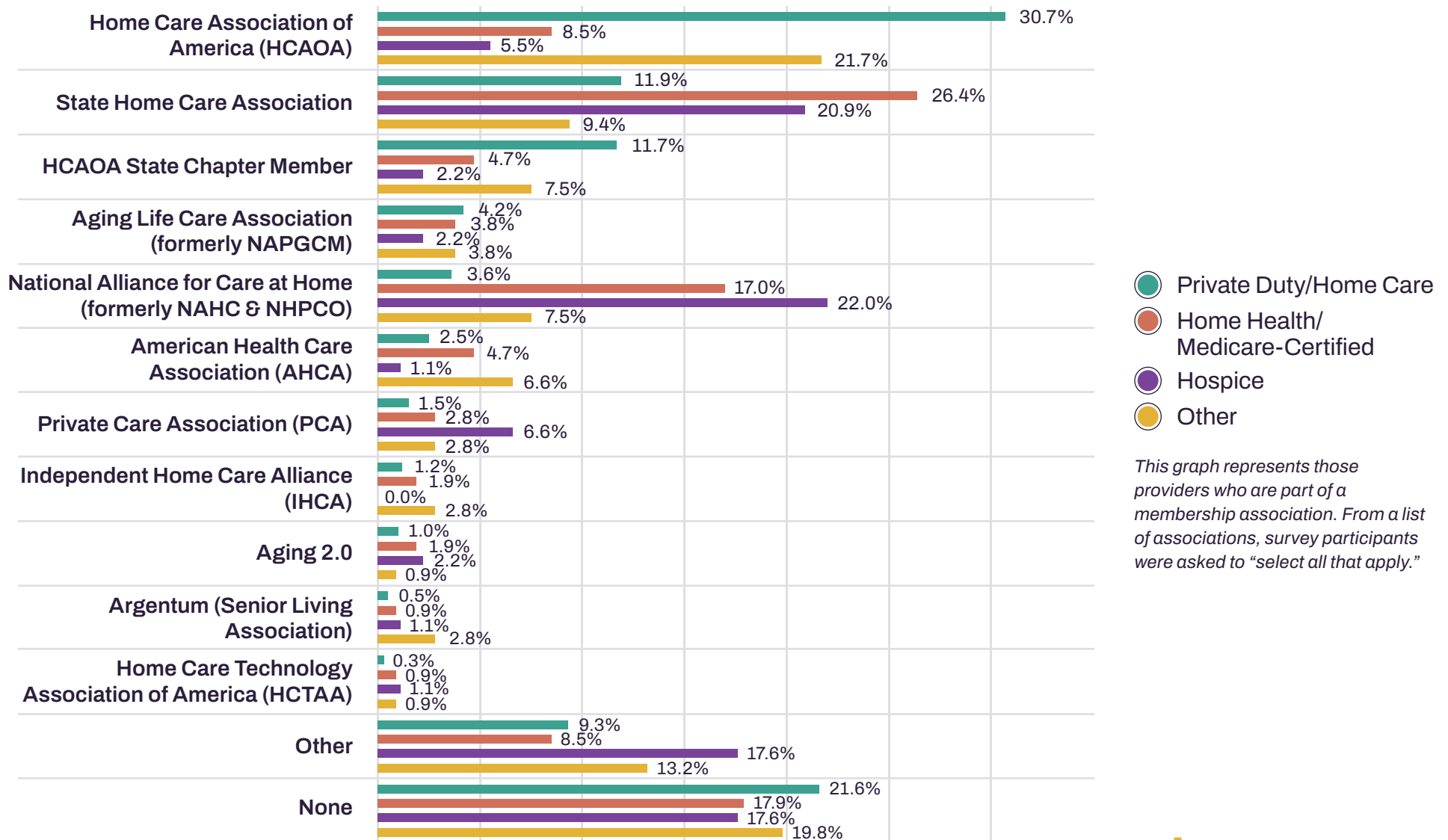
8.15 Survey Participation by Lines of Business Provided in 2024 - Revenue Range





SURVEY PARTICIPATION BY LINES OF BUSINESS

8.16 Survey Participation by Lines of Business Provided in 2024 - Membership Association





Home Care Masters Survey Participation

MASTERS DEFINITION

The Masters were determined based upon the most accurately tracked criterion: annual revenue. All participating home care companies that billed more than **\$5 million in 2024** qualified and are represented here. As the industry grows, the Masters criteria adjusts to represent home care agencies in the top 25% of the industry.

Become a Home Care Master

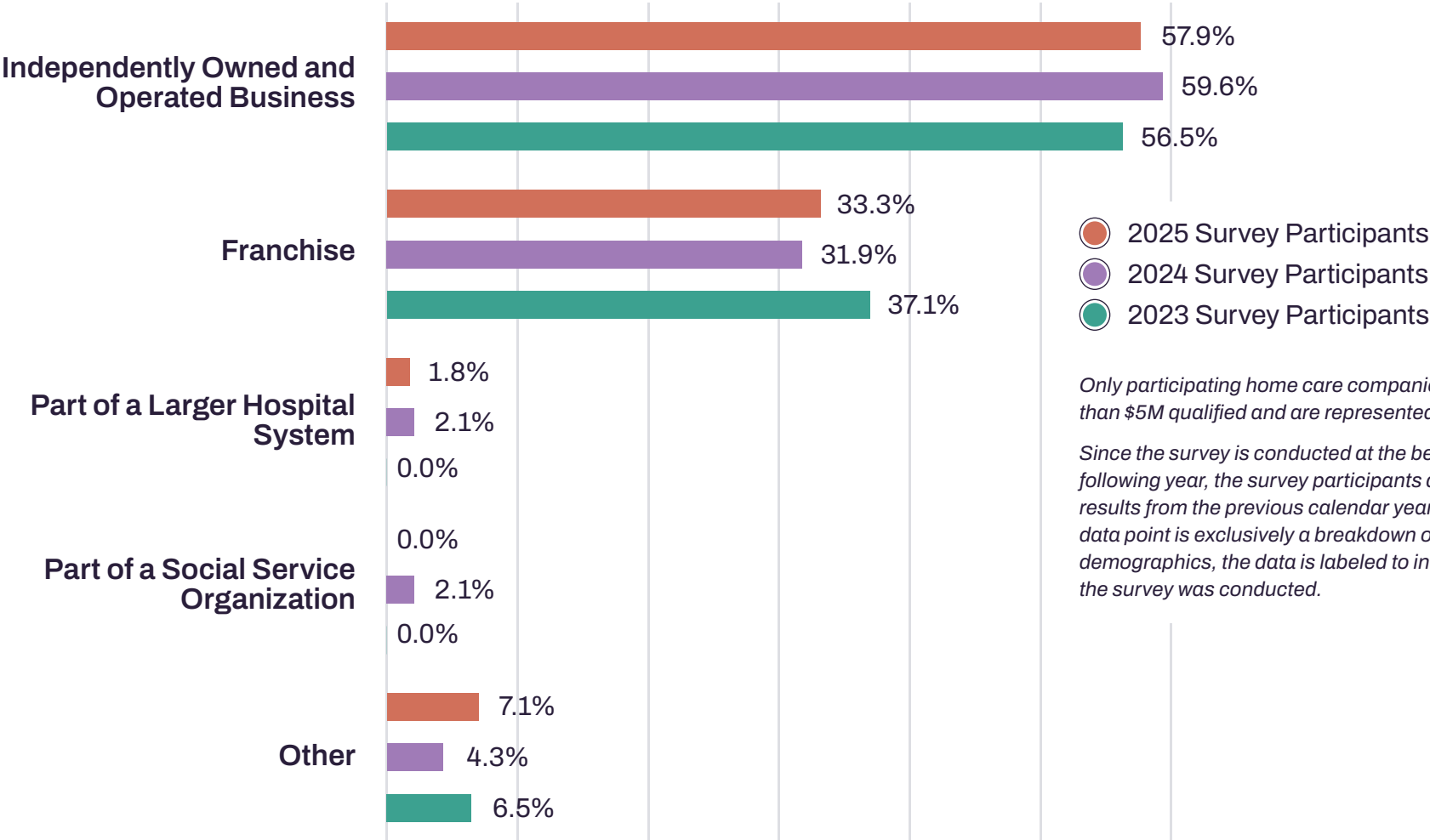


Grow your business with Activated Insights and become a home care master. Learn more on **page 194**.



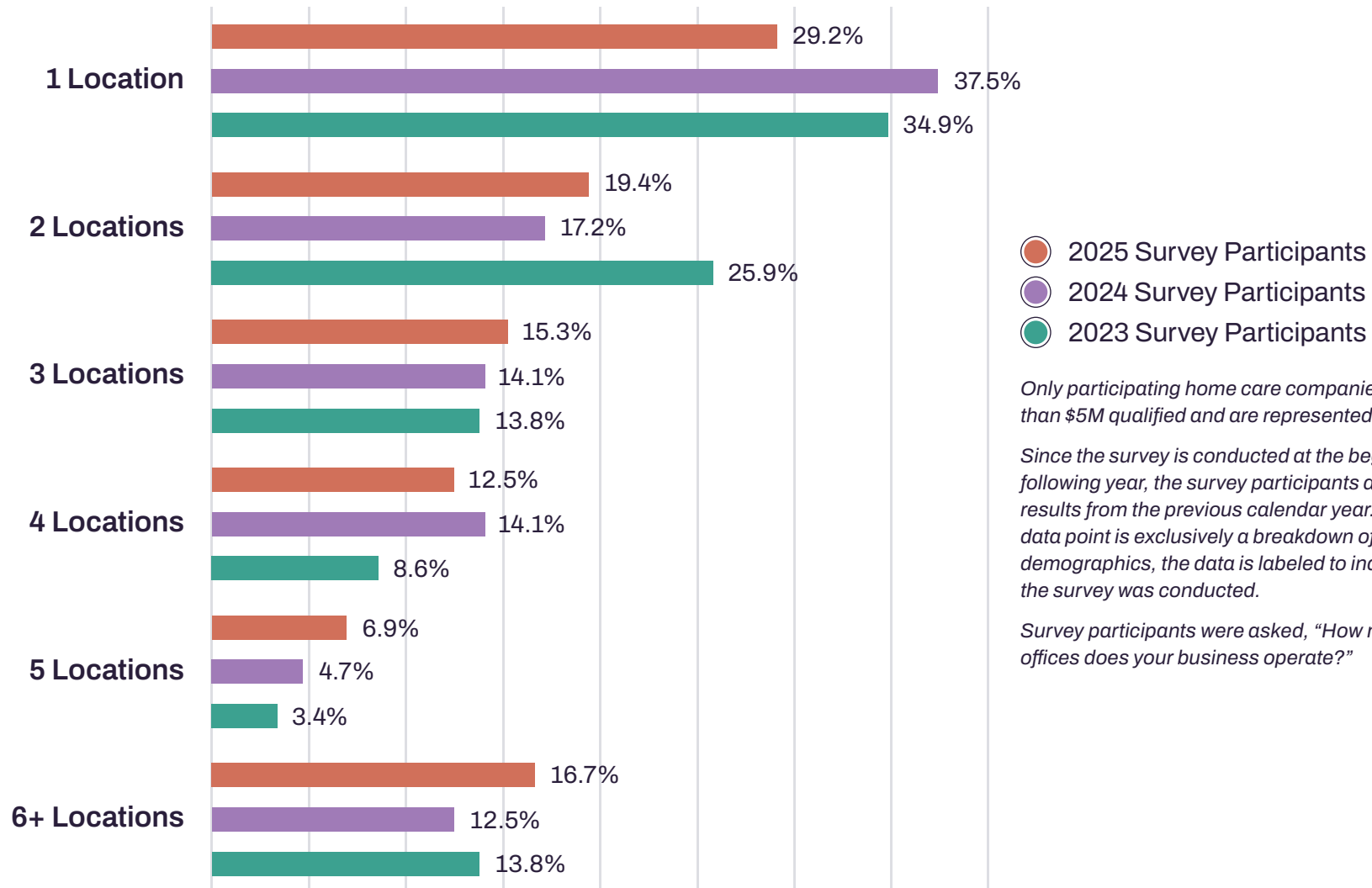
HOME CARE MASTERS SURVEY PARTICIPATION

8.17 Home Care Masters Participation by Provider Type for 2025 Report





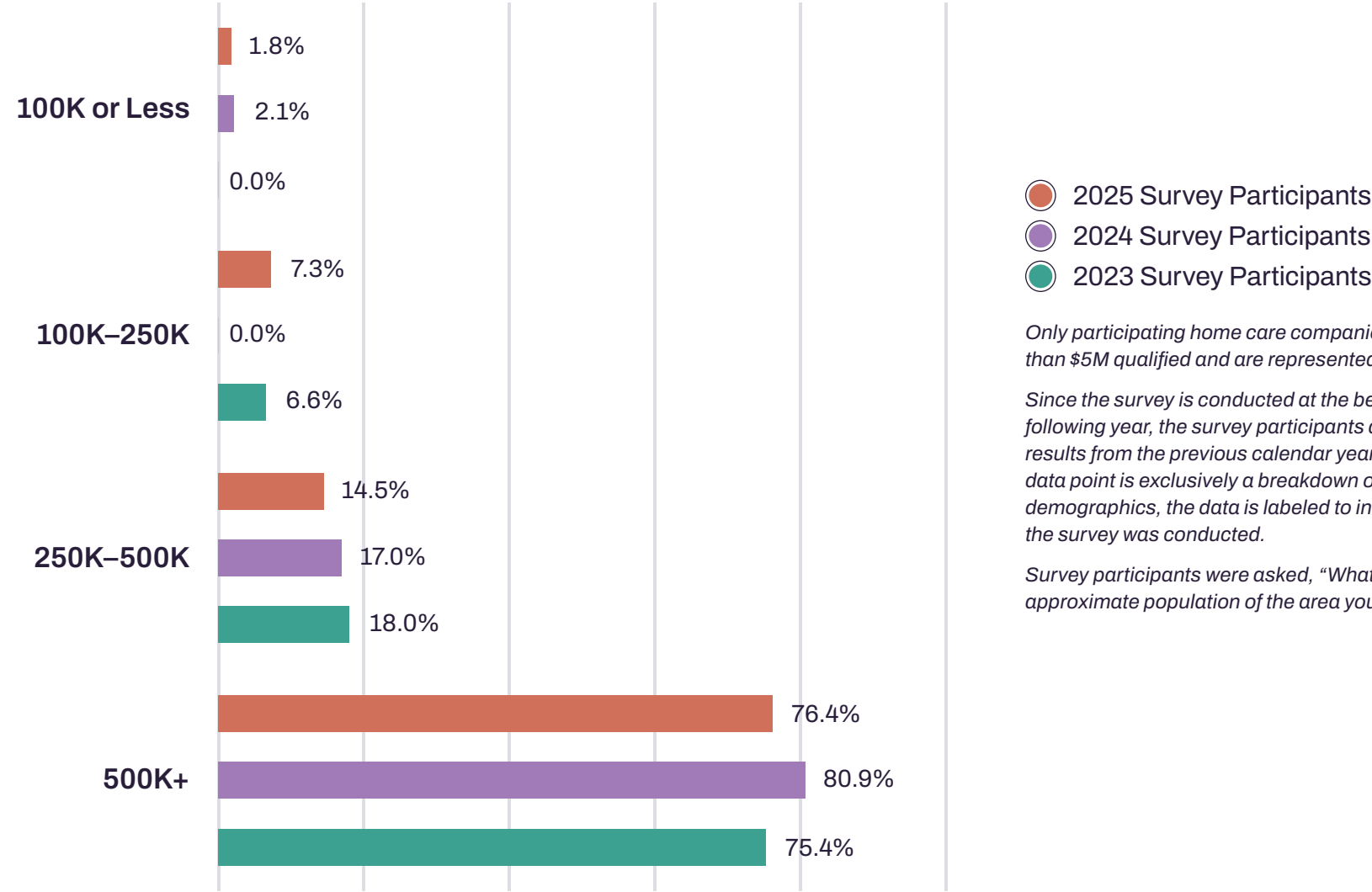
HOME CARE MASTERS SURVEY PARTICIPATION

8.18 **Home Care** Historical Masters Participation by Number of Locations



HOME CARE MASTERS SURVEY PARTICIPATION

8.19 Home Care Historical Masters Participation by Population Served



Only participating home care companies that billed more than \$5M qualified and are represented here.

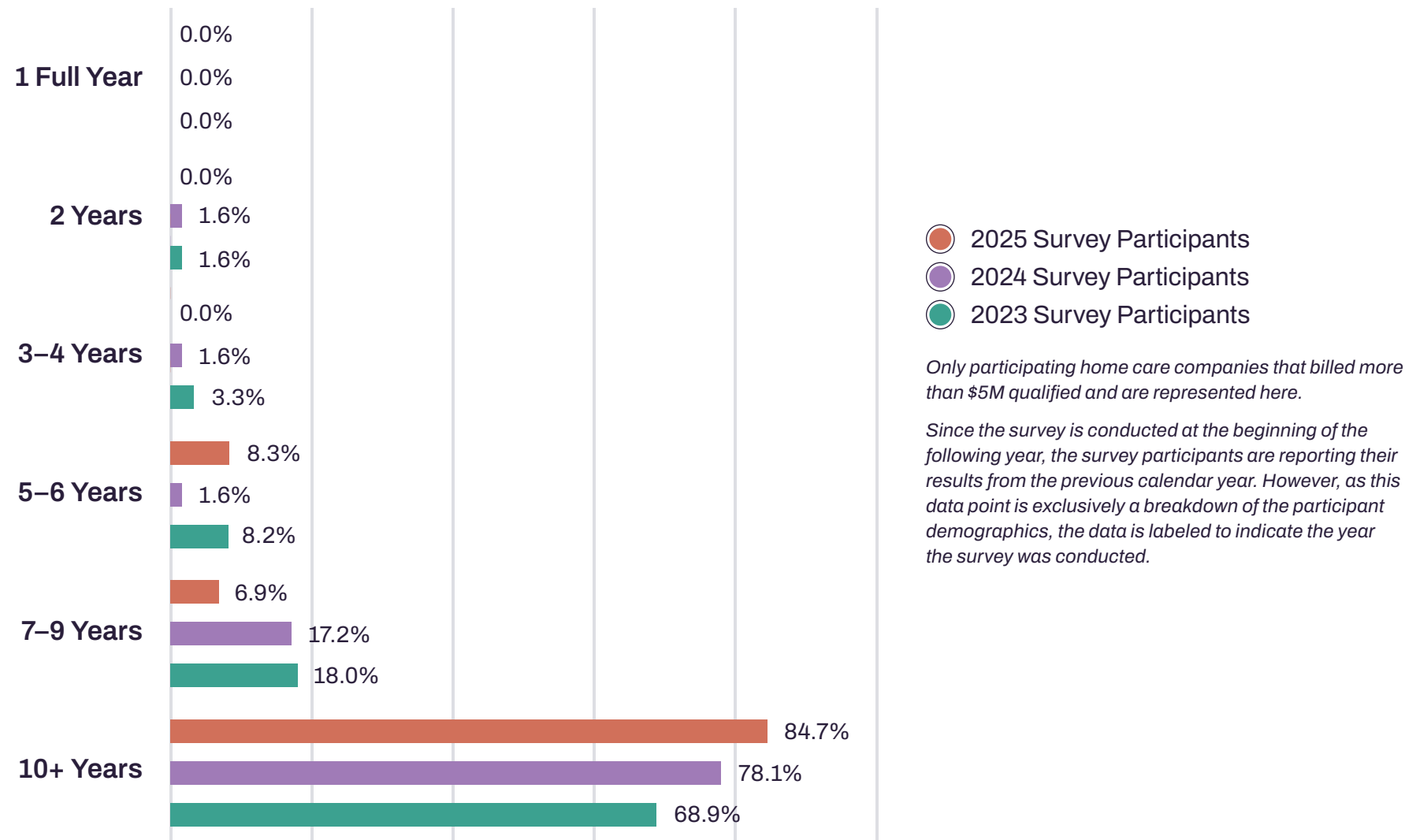
Since the survey is conducted at the beginning of the following year, the survey participants are reporting their results from the previous calendar year. However, as this data point is exclusively a breakdown of the participant demographics, the data is labeled to indicate the year the survey was conducted.

Survey participants were asked, “What is the approximate population of the area you serve?”



HOME CARE MASTERS SURVEY PARTICIPATION

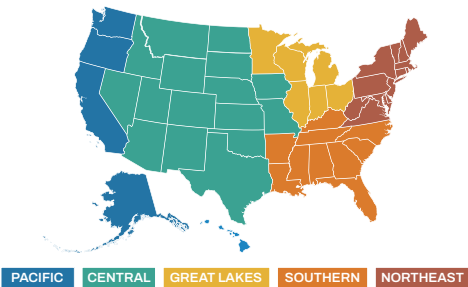
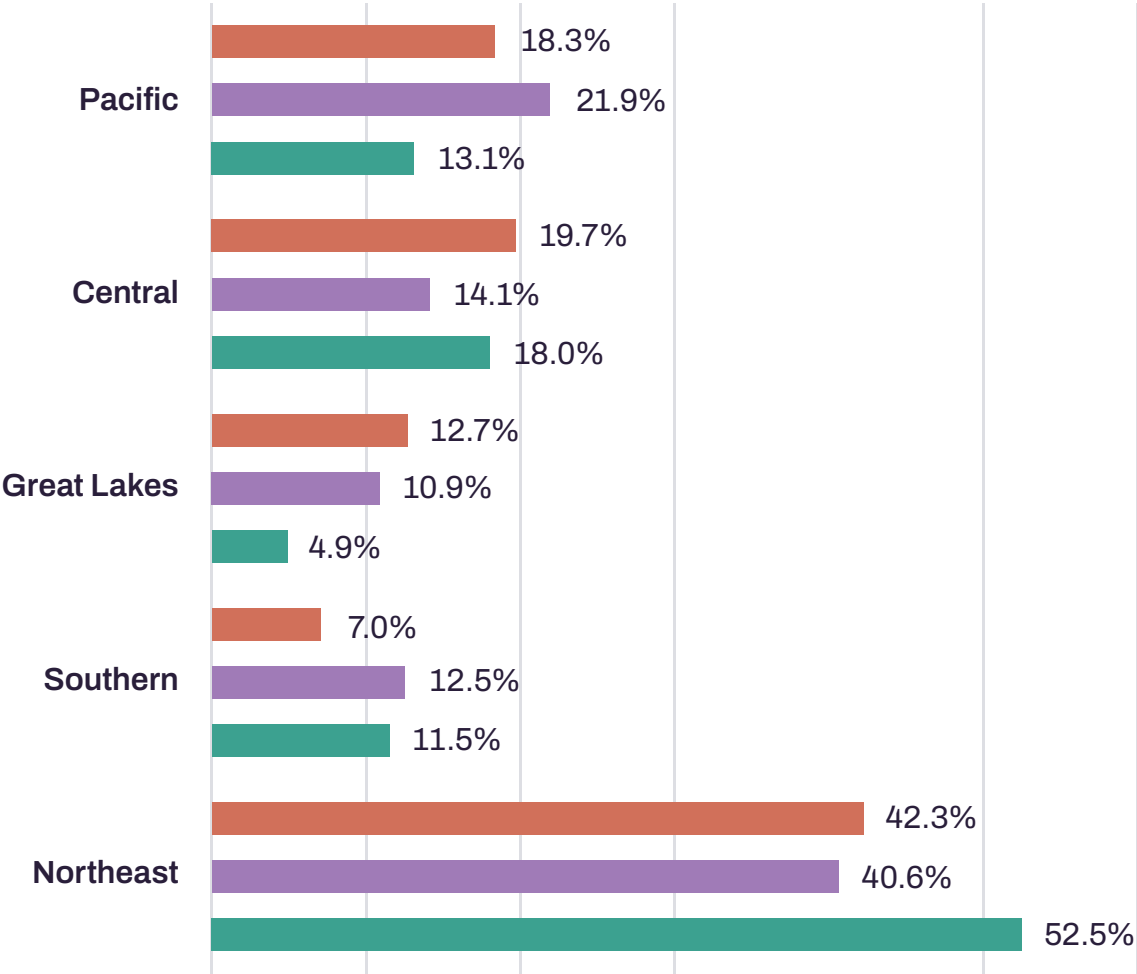
8.20 **Home Care** Historical Masters Participation by Years in Business





HOME CARE MASTERS SURVEY PARTICIPATION

8.21 **Home Care** Historical Masters Participation by Geographic Region



- 2025 Survey Participants
- 2024 Survey Participants
- 2023 Survey Participants

Only participating home care companies that billed more than \$5M qualified and are represented here.

Since the survey is conducted at the beginning of the following year, the survey participants are reporting their results from the previous calendar year. However, as this data point is exclusively a breakdown of the participant demographics, the data is labeled to indicate the year the survey was conducted.

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humanly possible**

- Simplify your talent recruitment
- Actively engage candidates any day of the week
- Automate outreach and interview scheduling for candidates
- Hire more candidates faster
- Fast and easy integration with popular applicant sources



Training

**Training that builds
better care teams**

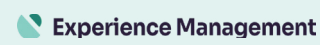
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- Specialized courses for senior living, LTC, and home care
- Compliance and state regulations training
- Automated course assignments and completion certificates
- Courses offered in multiple languages



Retain

**Reduce employee
turnover**

- Automate employee engagement efforts
- Manage employees from a single dashboard
- Reduce employee turnover in the first 100 days
- Generate actionable insights to improve employee experience
- Track and compare your scores to the national benchmarks



Experience Management

**Get actionable insights
from feedback**

- Conduct lifecycle surveys for clients and staff
- Data insights, NPS®, and eNPS® scoring with dynamic reporting
- Compare scores to industry benchmarks and trends
- Create action plans to boost engagement, culture, and satisfaction
- Mixed mode survey participant engagement



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**Be recognized as an
industry leader**

- Enhance recruitment with Great Place To Work Certification
- Eligibility for the Fortune Best Workplaces in Aging Services
- Boost visibility and market appeal with U.S. News Best Senior Living
- Improved visibility into review and SEO data with site widgets
- Analyze and act on your online reviews

The Playbook for High-Performing Care Teams:

Recruit. Retain. Train.



1

Step 1: Find the Right People—Fast

Top candidates don't wait. If your hiring process drags, you lose them. **Recruit** automates outreach, scheduling, and follow-ups so you connect with the best 70% faster—before your competitors do.



Recruit

2

Step 2: Keep Them From Leaving

New hires don't quit overnight—there are warning signs. **Retain** spots them early with automated check-ins at 15, 30, 60, and 90 days, helping you cut turnover by **up to 65%** and keep staff engaged.



Retain

3

Step 3: Train for Long-Term Success

Great hires won't stay if they don't feel prepared. Activated Insights **Training** gives your care team real-world skills through expert-led, mobile friendly courses—so they feel confident, stay longer, and provide better care for those they serve.



Training



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