NEXACC

Billing, Books, and Payroll for Home Health and Hospice Agencies

Phoenix, Arizona - serving healthcare clients nationwide since 2021

Episode timing, face-to-face documentation, and payroll that spans visits, mileage, and states.

Home health and hospice revenue depends on documentation that happens in someone's living room. Missing face-to-face encounters, late OASIS submissions, and episodes billed outside the payment window are the three failures that hold the most cash, and all of them are calendar problems before they are billing problems.

BENCHMARKS

Days in A/R target: Under 45

Medicare-heavy agencies settle slower

Documentation compliance: 100% target

Face-to-face on file before billing

Denial rate benchmark: 8-12%

Most home health denials are documentation, not coding

Where the money leaks

Face-to-face documentation

A missing or late physician encounter voids the episode. We track the requirement per admission.

Episode and RAP timing

Periods billed outside the payment window are reduced or denied outright.

Visit-to-payroll mismatch

Clinicians paid for visits that were never billed, or billed at the wrong discipline rate.

How we run it

01 Admission documentation check

Face-to-face, plan of care, and certification verified before the first billable visit.

02 Episode calendar

Every period tracked to its payment window with alerts before the deadline.

03 Visit reconciliation

Scheduled visits matched to completed visits matched to billed units, weekly.

04 Multi-state payroll

Field staff wages, mileage, and per-state withholding handled with the billing so both agree.

05 Cost report support

Books structured so the annual cost report is an export, not a reconstruction.

Payers we bill every month

- Medicare
- Medicare Advantage plans
- State Medicaid waiver programs
- Managed long-term care plans
- Private pay and long-term care insurance

State rules we work under

Medicaid programs, payer portals, and payroll rules change at the state line.

Arizona (AZ)

AHCCCS (Arizona Health Care Cost Containment System) - AHCCCS

Metros: Phoenix, Scottsdale, Mesa, Tempe

Maine (ME)

MaineCare - Maine Department of Health and Human Services (DHHS)

Metros: Portland, Bangor, Lewiston-Auburn, Augusta

New Jersey (NJ)

NJ FamilyCare - New Jersey Department of Human Services

Metros: Newark, Jersey City, Princeton, Cherry Hill

North Dakota (ND)

North Dakota Medicaid - North Dakota Health and Human Services (ND HHS)

Metros: Fargo, Bismarck, Grand Forks, Minot

Oregon (OR)

Oregon Health Plan (OHP) - Oregon Health Authority (OHA)

Metros: Portland, Salem, Eugene, Bend

Washington (WA)

Apple Health - Washington State Health Care Authority (HCA)

Metros: Seattle, Bellevue, Tacoma, Spokane

Texas (TX)

Texas Medicaid - Texas Health and Human Services Commission (HHSC)

Metros: Houston, Dallas-Fort Worth, Austin, San Antonio

Questions we get

Do you handle Medicare episode billing and the payment window?

Yes. We track each period against its payment window and alert before a deadline that would reduce the payment, because the reduction is not appealable after the fact.

Can you run payroll for field clinicians across states?

Yes. Visit-based pay, mileage, and per-state withholding are handled alongside the billing, which is what keeps paid visits and billed visits reconciled.

What do you need for a face-to-face requirement?

The physician encounter documentation tied to the admission. We verify it is on file before the first billable visit rather than discovering it missing at claim submission.

Do you support annual cost reports?

We structure the ledger so cost report categories map directly out of your books, which turns the annual report into an export instead of a reconstruction.

Run your own numbers

Estimate recoverable revenue for your home health / hospice at https://www.nexacc.com/estimators/healthcare?facility=home-health-hospice

Book a free 30-minute consultation: https://www.nexacc.com/schedule

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