2020 North American Provider Performance Statistics

Uses real data from 100 providers with combined payroll of over $500,000,000 and 46,000+ employees

Interested to find out what happened to agency metrics during COVID-19 and the EVV roll out? We were!

AGENCY
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2020 North American Provider Performance Statistics

Table of Contents

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Welcome to the 3rd edition of the *North American Provider Performance Statistics*, a report of statistics and metrics based on real data from providers all over the USA.

The Goals Are To:

» Provide agencies with a reliable source of statistics and metrics against which providers can measure themselves
» Help provides understand what key metrics are important for improving effectiveness and efficiency
» Help providers avoid time and attendance fraud and leakage

This edition includes a review of trends comparing 2019 and 2020.

Unlike surveys, which rely on manual responses and interpretation, these statistics are based on hard facts – what actually happened at real providers in North America.

If you want more information about your state or about specific statistics, please contact MITC.

Demographics

» The providers managed all programs, including day, group home, HCBS, supported employment, AbilityOne programs and more.

» Where providers only used Agency Workforce Management to track clients or a small sub-section of employees for applications like myCheckIn, their data was excluded.

Number of typical providers included	100
Number of employees during 2020	46,301
Number of myMITC page views	69,033,862
Page views per employee per year	2,175
Page views per employee per month	181
Number of myMITCu training videos watched	11,662
Active employees at the end of 2020	31,731
Average number of active employees per provider	317
Smallest provider based on employee count registered in MITC	12
Largest provider based on employee count registered in MITC	2,016
Number of states (AK, AR, AZ, CA, CT, FL, IA, KS, LA, ME, MN, MO, NC, NE, NJ, NH, NY, OH, OR, TX, UT, VA, WI). *States were not a criteria for inclusion in the report*	23
Total payroll cost for all providers was over	$500,000,000
Full Time	20,758
Part Time	7,039
Hourly	28,922
Salaried	1,937
Number of states where providers submitted EVV records	13

As this is the 3rd year for the NAPPS report, it was interesting to compare the changes that occurred due to COVID-19 and EVV.
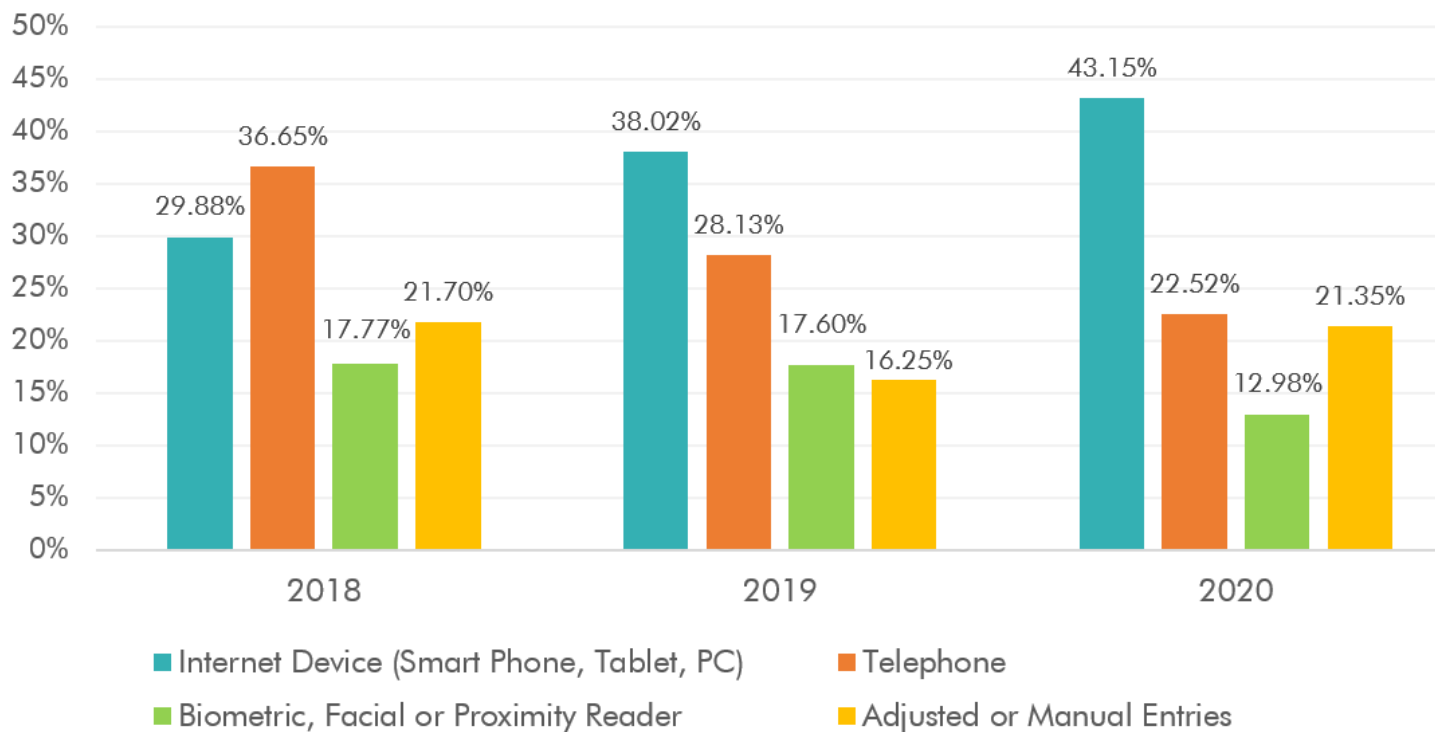
2019 vs. 2020 Highlights

» Employee turnover fell nearly 18% from 27.69% to 22.83% due to the COVID-19 recession. This huge improvement in retention was welcome news to providers struggling with COVID-19 related disruption. However some providers had much higher rates. The highest was 102% and many were over 40%

» New hire rates were almost equal to termination rates, implying providers were able to replace all employees in 2020, which is what one would expect. Some positions in Day programs were lost.

» Average employee pay rose 4.64% or $0.66/hr. from $14.22/hr. to $14.88/hr. Including overtime pay, average pay was $15.20 per hour.

» Overtime rose by .77% to 10.25% from 9.48%, which is what one would expect given the disruption caused by COVID-19. Providers managing Group Homes had much higher overtime percentage, often above 20%.
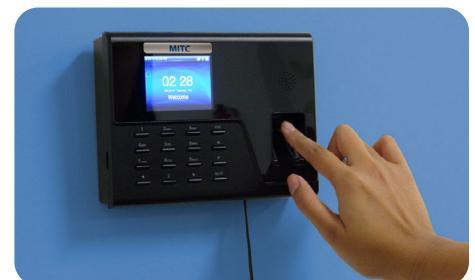
» PTO cost was 4.85% of payroll

Time & Attendance

» The majority of employees clocked-in/out using an internet device (PC, smart phone, tablets) but, partly due to EVV and internet limitations in rural areas, telephones continued to be a popular option

» Providers captured the vast majority of attendance in real time. Very little attendance was entered after-the-fact

How Attendance Was Captured

	2018	2019	2020
Internet Device (Smart Phone, Tablet, PC)	29.88%	38.02%	43.15%
Telephone	36.65%	28.13%	22.52%
Biometric, Facial or Proximity Reader	17.77%	17.60%	12.98%
Adjusted or Manual Entries	21.70%	16.25%	21.35%

Biometrics are mainly used in group homes, day programs and AbilityOne type contract sites.

Time & Attendance Compliance

The 40+ employees who stole $912,000 from a provider in 2017-2018 did so by altering time and attendance records. This fraud involved collusion between supervisors authorized to confirm changes and employees who initiated the change request.

[METRICS TRACKED: percentage of attendance edits vs. all records, percentage of attendance request changes vs. all records]

» The average compliance percentage (number of manual adjustments and missing records) was 84.25%. This was better than anticipated. However some providers are having real problems getting their employees to use real-time attendance properly, with some providers down in the 70%-80% range. For these providers, unless there are special reasons such as Self Directed programs where compliance is usually lower, there is a risk of payroll leakage from non-compliance. The top provider was 95%!

» Tracking time and attendance frequent offenders, overlapping shifts and unauthorized attendance remains a priority for providers.

» Experience indicates getting above 95% is very difficult as some employees will always forget to clock-in/out for one reason or another. Below 85% is worrisome. It could mask low level or significant fraud (employees deliberately "forgetting" or just requesting changes in their favor to earn more money). Providers need to be between 85%-95%

» Clearly some providers are doing fine but 50% are not (average was 84.25%). Unless there are other factors (Self Direction), providers need to make sure they understand how to track these metrics.

» *Agency Workforce Management provides a great tool to track compliance called the Executive Usage Trend Report. This one page report provides Agencies with a six month snapshot of key statistics from turnover percentage, overtime percentage and edit percentage.*

» Providers have very different practices and procedures surrounding time and attendance which may explain the wide range of outcomes:

   » This metric is important not just because of potential payroll leakage or fraud, but because states are starting to use this metric to trigger audits and review reimbursement with EVV

   » The volume of requests to change or add time and attendance records was about the same but again was much higher at some providers, indicating problems with employee compliance at those providers. Some providers were in the 15-20% range for requests while other providers were well below 10%

   » Some providers using biometric fingerprint readers had a lower than average percentage of manual edits. This may be because these providers are more focused on buddy punching and time and attendance fraud than other providers

   » Technology can contribute to non-compliance if deployed inappropriately. Erratic internet access for PC's ("the internet was down"), shared PC's ("someone was using the PC"), GPS geo fencing being used inappropriately ("I picked the client up from the doctor so I could not clock-in") and weak enrollment procedures with biometric fingerprint readers ("It said invalid") can all cause problems

Scheduling: Big Increase in Group Home Programs

There was a big increase in the number of schedules maintained by providers. The labor shortage stimulated a lot of extra interest in 2018/19 in scheduling. In addition several large providers started using mySchedules and were included in the 2020 report.

Overall there was a 30% increase in the number of Schedules per employee for the providers included in the 2020 survey vs. 2019. Over 50% of the 100 providers included in the survey used scheduling. Typically these providers managed group home and HCBS programs.

Employee Self-Service

The average employee using self-service jumped to 181 from 70 times a month or 159. This excludes records generated by employees who used biometric or telephones to clock-in/out. The vast majority of provider employees made use of Employee Self-Service to:

a. Review their timesheets
b. Submit requests for missing attendance records or changes to record
c. Request PTO
d. Check their PTO balance
e. Check their schedule
f. Request extra shifts
g. Update their availability preferences and restrictions
h. Review payroll check stubs
i. Miscellaneous

» The jump is probably a result of providers making more use of Agency Workforce Management, more providers tracking documentation and EVV.
» The American Payroll Association estimated that effective employee self-service can increase productivity per employee by up to $250.00 a year per employee.

PTO

PTO costs rose slightly as a percentage of overall payroll.

The average employee made 12.33 PTO requests up from 10.12 PTO requests in 2019.

Payroll Integration

100% of providers using time and attendance, created records for uploading into payroll, indicating that all these providers had largely eliminated the costs and risks of manual procedures although it is not possible to know if all payroll rules had been fully automated.

Billing Integration

It is not possible to understand what proportion of providers use these records, or what portion of the records, for billing or EVV as well as payroll. Providers with HCBS programs tend to use Time and Attendance records for billing as well as payroll.

*Providers only using Agency Workforce Management for client attendance were not included

EVV

EVV records were created by providers in:

- » Arizona
- » Colorado
- » Indiana
- » Maine
- » Nebraska
- » New York
- » Ohio
- » Oklahoma
- » Pennsylvania
- » Virginia
- » Wisconsin

Looking Forward Into 2021/2022

Predicting the future at any time is a risky business! COVID-19 makes the future even more uncertain. However based on today's information:

1. We continue to anticipate providers will experience an improvement in employee retention especially because new hire rates were equal to termination rates in 2020. At this time providers may find it helpful to reassess their hiring process from applicant tracking to training systems, in order to cope with the demand for employment.

2. Due to the continued disruption caused by COVID-19 we expect many providers to battle with various scenarios that ultimately lead to overtime. The first step in combating overtime is to look to reduce and not eliminate it. An effective scheduling solution is a great place to start, if you haven't already done so.

3. As average employee pay and overtime rose slightly in 2020, overall payroll costs may increase by 2021.

4. Priorities to keep in mind as we move into this year should focus on tight control of labor costs, effective management of service delivery and revenues. The agency that goes into 2022 with the best systems in place for service delivery, cost control and productivity will have fewer problems than providers whose operations are not as efficient.

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BY MITC