

How a Kansas Home Health Agency Taught Its Clinicians to Trust Predictive Care Guidance

Douglas County VNA was making episode decisions on data that reached the team five to seven days late. Layering Mosai Pulse onto the MatrixCare record its clinicians were already keeping gave the agency a prioritized daily census — and, eventually, a clinical team that asks for it.

3 hours

from documented visit
to actionable insight*

12.7

visits per episode
(vs. 15-17 natl. avg.)*

5.3%

LUPA rate
(vs. 7% natl. avg.)*

CUSTOMER
Douglas County
VNA

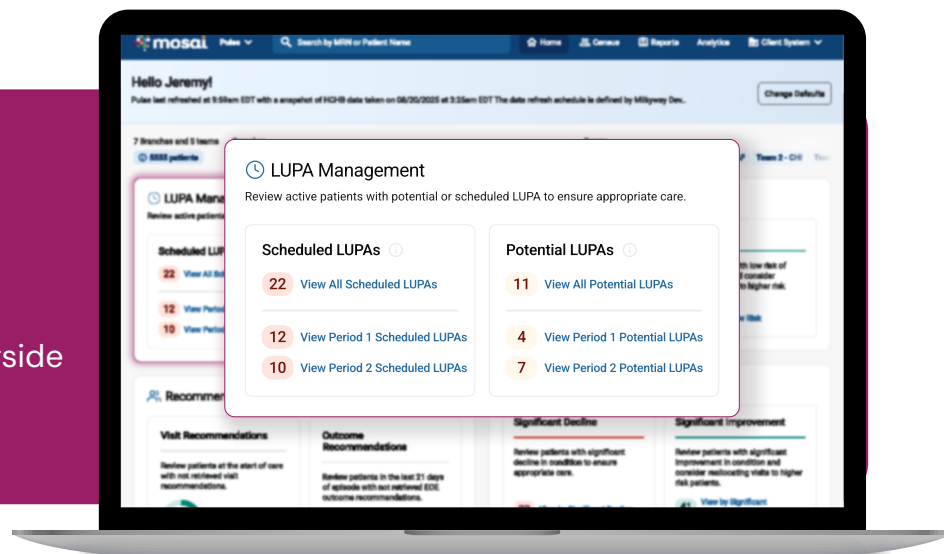
LOCATION
Lawrence,
Kansas

EHR
MatrixCare

CARE SETTING
Home Health,
Private Duty, Hospice

Inside Pulse: LUPA Management

The first thing a manager sees on the Pulse home page: scheduled and potential LUPAs, split by period, alongside patients at risk of transfer, significant decline, and gaps in care.



* Figures reflect Douglas County VNA performance across all home health episodes ending between November 2025 and January 2026 — the fully matured reporting period following the agency's Mosai Pulse go-live on September 19, 2025. Months from February 2026 forward are excluded as preliminary; home health billing cycles mean episode data continues to mature for approximately six months after a period closes. LUPA rate is calculated as episodes ending in the period with a LUPA status, divided by total episodes ended in that period. Visits per episode is the average number of billable visits for episodes ending in the period. National comparison figures reflect Mosai analysis of MedPAC and CMS data; visits per episode is stated per full 60-day episode. Individual agency results vary; these figures describe one agency's experience and are not a projection of results for any other organization.



“ At the start there was pushback from the clinicians. They were saying, wait a minute, you’re telling us this is AI? And then they understood that it’s what they’re putting into their notes that tells us where the patient is. And they said, well, this is amazing.”

Audrey Welch

Director of Therapy Clinical Services, Douglas County VNA

How it works

Start of Care

When the note closes, Pulse returns a visit recommendation for the certification period. It starts the case conference rather than replacing it.

Every day

A prioritized census surfaces LUPA exposure, declining patients, and gaps in care early enough to act on them.

Day 45

An episode analysis and AI summary of the team’s own documentation. It doesn’t make the call or write the justification — it surfaces what is already in the record.



“ Pulse makes us better at what we do. The real-time data gives us an opportunity to do the best for our patients every single day.”

Pam Morgan

Chief Financial & Compliance Officer, Douglas County VNA

Want to learn more?

Read the success story at
mosai.com/success-stories/douglas-county/vna

