



**2026 ANNUAL
CONFERENCE & EXPO**
Celebrating 60 Years
Then. Now. Next.

**HIGH PERFORMANCE
ISN'T ACCIDENTAL**
The 90-Day Formula for Sales Team Results

Casey Rausin, RN, CCM
Business Development | Home Care Sales
May 22, 2026

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**"Raise your hand if you have a rep
who is not hitting their referral goals."**

Keep it up if you've had that conversation more than twice.
Keep it up if you're not totally sure what to do differently.

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**You don't have a system.
You have hope.**

High-performing sales teams don't happen because you hired someone motivated.
They happen because someone built the conditions for performance. On purpose.
In sequence. With accountability wired in from day one.


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YOUR GUIDE TODAY

Casey Rausin, RN, CCM

I've been the referral source and the rep. I know both sides.
 RN + Certified Care Manager working in business development.
 I know what it takes to earn trust from a physician, a discharge planner, a case manager.
 I know what it looks like when a rep walks in without the tools to do it.


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THE 90-DAY FORMULA

The patterns a rep develops in the first 90 days are the patterns they keep.

01 HIRE RIGHT Fit, drive, learnability	02 ONBOARD FAST 30 days to build the foundation	03 COACH EFFECTIVELY Structured weekly rhythm	04 HOLD THE LINE Accountability that sticks
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PILLAR 1

HIRE RIGHT

Most agencies hire for personality.

Top agencies hire for fit, drive, and learnability.


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PILLAR 1

What Top Producers Actually Have

- ✓ **Clinically Curious**
They want to understand the diagnosis, the care plan, the referral source's world.
- ✓ **Rejection-Resistant**
The discharge planner doesn't return calls for three weeks. They keep showing up.
- ✓ **Self-Directed**
Nobody follows them into the hospital. They own their territory and make it happen.

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PILLAR 1

The Questions That Tell You Everything

- 1 "Walk me through how you would approach a discharge planner who has never referred to your agency."
- 2 "A physician's office has told you no four times. What do you do on the fifth visit?"
- 3 "How do you decide which accounts to prioritize in a new territory?"

A rep who fumbles here is going to fumble in the field.

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PILLAR 2

ONBOARD FAST

You have 30 days to build the foundation. Not 90. Thirty.

Onboarding is not orientation. Orientation is paperwork.

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PILLAR 2

The Clinical Language Problem

THE REP WHO LOSES

"Do you have any patients who need home health?"

Can't name your top diagnoses.
Can't speak to care outcomes.
Can't connect the patient to your service.

THE REP WHO WINS

"I know you're seeing CHF patients post-discharge. Here's what our team does in the first 48 hours."

Speaks by diagnosis. Knows outcomes.
Connects patient needs to your services

That rep wasn't born knowing that. Someone taught them.

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PILLAR 2

The 30-Day Onboarding Framework

WEEK 1	WEEK 2	WEEK 3	WEEK 4
<p>Clinical / Care Immersion</p> <p>Shadow Caregivers. Learn top 5 diagnoses. What makes your care different.</p>	<p>Territory Mapping</p> <p>Top 10 + Target 10. Build referral partner profiles. Know their priorities.</p>	<p>Messaging + Role Play</p> <p>Articulate value in outcome language. Practice, Record, Critique.</p>	<p>Supervised Field Visits</p> <p>Rep goes on calls with a coach. Real feedback. Real adjustments.</p>

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PILLAR 3

COACH EFFECTIVELY

Accountability without coaching is just pressure.

Pressure without coaching creates turnover.

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PILLAR 3

Coaching Is Not Checking In

NOT COACHING: *Calling your rep on Friday and asking how many visits they made. That's a check-in. It might feel like management. It is not coaching.*

REAL COACHING: *Scheduled. Structured. Looks at behavior, not just outcomes.*

What happened in the field this week, and what do we do differently next week?"

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PILLAR 3

The Weekly Coaching Rhythm

- 1 Rep Self-Assessment**
What went well. What didn't. Where they need help.
- 2 Activity Data Review**
Quality of conversations. Accounts penetrated. New contacts.
- 3 Skills Focus**
One thing to work on this week. Specific script or approach.
- 4 Follow-Up Commitment**
What the rep will do differently before the next session.

"Think about care planning. You assess, Intervene, reassess. Sales performance works the same way."

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PILLAR 4

HOLD THE LINE

Accountability is not punishment.

It is the structure that makes performance possible.

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PILLAR 4

What Holding the Line Looks Like

- ✓ **Clear Benchmarks from Day One**
Specific numbers. Visits per week. New accounts per month. Conversion rates.
- ✓ **Written 90-Day Performance Agreement**
The rep signs it. You sign it. It is not punitive. It is a commitment.
- ✓ **Milestones at 30, 60, and 90 Days**
Documented check-ins. Is this working? Are we on track?
- ✓ **A Clear Decision Point at Day 90**
Is this the right person? Course-correct or make a change?

"When you let underperformance slide, you tell your best reps the standard doesn't matter. They leave."

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PILLAR 4

The 90-Day Milestone Map

WEEK 1 10 Qualified Accounts	DAY 30 1 Partner Activated	DAY 60 2 Partners Activated	DAY 90 3 Partners Activated
Territory mapped. First meeting booked.	First referral source sending patients.	Pipeline building. Coaching adjusting.	Decision point. System validated.

Build the right habits from day one or spend the next year managing underperformance.

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Let me be direct.

Everything I walked you through today makes sense.
You're nodding. You're taking notes.

When you get back to the office Monday, one of two things happens:

1. You try to build all of this from scratch while running operations programs, managing staff, and handling compliance.
2. It goes in a folder and never gets done.

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The agencies that get this right don't build it alone.
 Here is what it looks like when the system is working.

+21%

Growth in 3 months

Non-Medical Home Care, Virginia

3

New referral partners

Opened in 60 days

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PILLAR 4
Non-Medical Home Care, Virginia
 Two new sales reps. Onboarded with the system. Here is what happened.

+20%

Agency Growth

In 3 months

3

New Referral Partners

Opened in 60 days

2

Brand New Reps

No prior home care sales exp.

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YOUR 90-DAY ROADMAP
What to Do This Week

- ✓ **Audit your hiring process.**
Do you have scenario-based questions for your next sales hire?
- ✓ **Write a 30-day onboarding plan.**
Clinical immersion first. Field visits last. No more "here's your territory, go."
- ✓ **Schedule weekly coaching.**
Put it on the calendar. 20 minutes. Every week. Non-negotiable.
- ✓ **Set 30/60/90-day milestones.**
Specific numbers. Written down. Signed by both parties.
- ✓ **Decide if you need help.**
Not every agency can build this system alone. There is support available.

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High performance is not a personality trait.
 It is not luck.
 It is not finding the magic hire.

It is a system.

Hire right. Onboard fast. Coach effectively. Hold the line.

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"Your Mission Is Bigger Than Their No."

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**2026 ANNUAL
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 Celebrating 60 Years
 Then. Now. Next.

**STOP GUESSING,
 START GROWING**
 KPIs That Move the Needle

Casey Rausin, RN, CCM
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How many referrals did your team get last month?

How many became admissions?

Right now. Without looking it up.
 If you hesitated, you are not alone.
 But that hesitation is costing you money.

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**Your team is busy.
Your numbers are flat.
Here is why.**

WHAT MOST TEAMS TRACK

*"How many visits did you make?"
"How many calls did you log?"
"How many in-services this month?"*

WHAT TOP PERFORMERS TRACK

*"How many referrals came in?"
"How many turned into admissions?"
"Am I opening new doors?"*

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Your Presenter
Casey Rausin, RN, CCM

- ✓ Registered Nurse and Care Manager
- ✓ Lives these metrics every single week
- ✓ HCS the same scorecard you will walk away with today

"I am a clinician who learned to sell. These numbers changed how I work."

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The Mindset Shift

<p>ACTIVITY</p> <p><i>How many visits? How many contacts? How many brochures?</i></p> <p>= Busy</p>		<p>OUTCOMES</p> <p><i>How many referrals? How many admissions? How many new sources opened?</i></p> <p>= Productive</p>
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"You cannot manage what you do not measure. And you cannot grow what you do not track."

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5 NUMBERS THAT PREDICT REFERRAL GROWTH

Track these. Coach to these. Watch your numbers move.

01 SALES CALLS The leading indicator	02 REFERRALS What is coming in	03 PENDING What is in the pipeline	04 ADMISSIONS Revenue on the board	05 NEW REFERRAL SOURCES Prospecting
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KPI 1 Sales Calls

32 documented sales calls per week

This is the floor. Not the ceiling.

- ✓ Not visits. Not drive-bys. Documented calls with an educational/ outcome purpose.
- ✓ Every call uses a Dx Sell™ message a weekly educational topic that speaks the language of your referral sources.
- ✓ When call volume drops, everything else drops 2-3 weeks later.

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HOW THE CALL WORKS

Not just any call. The right call.

Your rep can make 32 calls a week to the right accounts.
If she is talking about your agency instead of their patients, nothing will change.

Dx Sell™ Speak the clinical language of your referral sources.

1 Speak Their Language Bring a weekly clinical message tied to a diagnosis or outcome your referral source manages. Not a brochure. Not your census.	2 Make It Educational Teach them something useful about patient outcomes in their own caseload. The rep becomes a resource, not a vendor.	3 They Identify the Patient The referral source connects your message to a patient already in their caseload. The referral comes from them, not from your ask.
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KPI 2

Referrals

What is actually coming in the door. Track by source, by week, by month.

HOME HEALTH

*How many referrals MTD?
Where are they coming from?
Which sources are growing vs. flat?*

HOME CARE

*How many referrals MTD?
Family? Discharge planner? Direct?
What is the trend week over week?*

**"If referrals are flat, your activity is not working.
Do not "just" add more visits. Fix the message and the target."**

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KPI 3

Pending

What is sitting in your pipeline right now. This is where revenue gets stuck.

Every referral sitting in pending/follow up is revenue that has not hit your books.

- ✓ Know your pending number every single week. No guessing.
- ✓ Every pending referral gets a next action and a date.
- ✓ Review the list in coaching. What is the hold-up on each one?
- ✓ A pending list that is not managed is a list of lost revenue.

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KPI 4

Admissions / New Clients

Revenue on the board. Two different funnels. Know yours.

HOME HEALTH

Referral → Admission

*Track admissions (starts of care)
Track non-admits and document why
Conversion = referrals to admissions*

Non-admits: Know the reason for every one.

HOME CARE

Referral → Assessment → Client

*Track new clients started + new hours
Track non-clients and document why
Conversion at each step of the funnel*

Non-clients: Know the reason for every one.

"You cannot fix what you do not track. Every non-admission has a reason. Find it."

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KPI 5

New Referral Sources

Prospecting. Are you growing your territory or just maintaining it?

The Rule: 2+ qualifying calls per week to sources who have not referred in 6+ months

Red flag: All referrals come from the same 3-5 sources

Yellow flag: No new qualifying calls logged this week

Green flag: New referral sources activated every month

"If you are not opening new doors, you are slowly shrinking. Attrition is silent."

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YOUR SCORECARD

Home Health

What is sitting in your pipeline right now. This is where revenue gets stuck.

Metric	Target	Actual	% to Goal	Status
Sales Calls / Week				
Referrals (MTD)				
Pending				
Admissions				
Non-Admits (with reasons)				
New Sources Activated				

WEEKLY COACHING (GROW)

G All referrals come from the same 3-5 sources **R** What was the win? **O** Greatest opportunity? **W** Move the needle?

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YOUR SCORECARD

Non-Medical Home Care

Metric	Target	Actual	% to Goal	Status
Sales Calls / Week				
Referrals (MTD)				
Assessments				
Pending				
New Clients				
Non-Clients (with reasons)				
New Hours				
New Sources Activated				

WEEKLY COACHING (GROW)

G All referrals come from the same 3-5 sources **R** What was the win? **O** Greatest opportunity? **W** Move the needle?

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The Weekly Coaching Rhythm
 The scorecard means nothing without a rhythm to use it.

Every referral sitting in pending/follow up is revenue that has not hit your books.

- 1 Review the Numbers** Sales calls. Referrals. Pending. Admits. New sources. Data only.
- 2 Confirm Activity** 32 documented calls? 2+ calls to new or dormant sources?
- 3 Review the Calendar** Scheduled this week? In-services? Meetings? Follow-ups?
- 4 Confirm the Dx Sell™ Message** Weekly diagnosis topic. Handout. Educational question tied to referral source outcomes.
- 5 GROW Coaching** Goal. Reflection. Opportunity. Way Forward. Commit.
- 6 Call Out the Number** "How many referrals will you get this week?" Say it out loud.

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THE GROW MODEL
 Every coaching session. Every week. No exceptions.

G GOAL What are the numbers? Last week and month to date.	R REFLECTION What was the win since last session? Any challenges to problem solve?	O OPPORTUNITY What is your greatest upcoming opportunity?	W WAY FORWARD What is the one thing you will do this week to move the needle?
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"Call out your number. How many referrals will you get this week?"

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Now you have the metrics.
 You have the scorecard.
 You have the coaching rhythm.

But knowing what to measure is not the same as building the system to sustain it.

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The agencies that turn these metrics into results don't do it alone.
 Here is what happens when owners and managers commit to the system.

\$30K+

New revenue in 8 weeks
Non-Medical Home Care

+20%

Admissions in 12 weeks
Medicare Certified Home Health

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CASE STUDY
Non-Medical Home Care
 What 8 weeks of commitment looks like.

\$30,000+

New Revenue
In just 8 weeks

200+

New Hours Added
To active caseload

8 weeks

Time to Results
From system launch

One seasoned rep. One new rep. Same system. Same scorecard. Same rhythm. Hours billed up over 200. The revenue followed.

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CASE STUDY
Medicare Certified Home Health
 12 weeks. Old partners. New results.

+22%

Admissions Increase
In 12 weeks

- ✓ Reactivated referral partners who had gone silent.
- ✓ No new accounts. No new territory. Same market.
- ✓ Consistent Dx SelTM messages. Weekly calls. Tracked and coached.
- ✓ Old relationships became active referral sources again.


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YOUR MONDAY MORNING

5 Things to Do This Week

- 1** Pull your numbers. Referrals in, pending, admissions. Know where you stand.
- 2** Confirm 32 documented calls last week. If not, that is Monday's coaching topic.
- 3** Review every pending referral. Assign a next step and a deadline to each one.
- 4** Schedule 2 qualifying calls to sources who have not referred in 6+ months.
- 5** Print the scorecard. Use it in your first coaching session this week.

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Stop guessing.
Start measuring.
Start growing.

**5 numbers. 1 scorecard.
Every week.**

Sales calls. Referrals. Pending. Admissions. New referral sources.


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Thank You!

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