Industry Decomposition: Long Term Care

I. InVitro Criteria Scoring

Filter	Score (1–3)	Justification
Tech-starved	3	Most LTC providers still operate on paper or use generic tools like Excel. Purpose-built software penetration is low, especially outside skilled nursing.
Labor-intensive	3	The sector is heavily dependent on human labor for daily care, administration, compliance, and communication. Labor shortages are a persistent issue.
Fragmented	3	Includes thousands of independent facilities (e.g. RCFE, assisted living, home health). No dominant national platforms outside large SNFs or REITs.
Overlooked	2	While private equity is active in SNFs, smaller segments (e.g. board & care, independent assisted living) receive little venture or product attention.
Capital-efficient	2	Software purchases are often small-ticket and cash-constrained, but operators are willing to spend if the ROI is clear and staffing time is saved.

II. MECE Subsegmentation of the Industry

Subsegmentation by Setting

Subsegment	Description	Notes
Skilled Nursing Facilities (SNFs)	Medical care + custodial care, often reimbursed via Medicare/Medicaid. Heavily regulated.	Large PE-backed operators exist; most tooling targets this group.
Assisted Living Communities (AL)	Non-medical support for ADLs. Usually private-pay. Wide range of facility sizes.	Fragmented. Staff-constrained.
Board & Care Homes	Small (6–10 beds), residential facilities often run by independent owners.	Typically paper-based. Nearly zero software penetration.
Home Health Agencies	Provide care in a patient's home (e.g. nursing, therapy).	Heavily regulated. Some workflow digitization exists.
Hospice & Palliative Care	End-of-life care, often delivered in-home or within LTC facilities.	Specialized workflows. Less tooling outside billing.

III. Workflow Decomposition

A. Master Workflow List

Workflow Name	Description	Current Tooling	Known Vendors / Tools
Care Plan Documentation	Create and update individual care plans.	Paper, EHRs, Word Docs	PointClickCare (SNF), ALIS, ClearCare
Staff Scheduling	Match caregivers to shifts, handle last-minute call-outs.	Paper, Excel	OnShift, Smartlinx, When I Work
Medication Management	Track prescriptions, administer meds, refill requests.	Paper MARs, basic EMRs	MedPass, QuickMAR
Incident Reporting	Record falls, adverse events, notify families.	Paper, email	iCareManager, internal forms
Family Communication	Share updates, schedule visits, message family members.	Phone, email, SMS	CareMerge, LifeLoop, Cubigo
Intake & Assessment	Admit new residents, complete initial evaluations.	Paper packets, PDFs	Yardi, PointClickCare
Billing & Collections	Generate invoices, handle Medicaid/Medicare, follow up on payments.	Excel, legacy billing software	MatrixCare, Netsmart, AlayaCare
Staff Onboarding & Training	Hire, train, and certify care workers.	Manual, LMS	Relias, CareAcademy, IntelyCare
Inventory / Supply Ordering	Track supplies (e.g., gloves, meds, food) and reorder.	Clipboards, paper logs	Vikor Scientific, Medline
Regulatory Compliance	Survey readiness, policy updates, form management.	Binders, generic doc storage	PolicyStat, Symplr

B. Functional Groupings

1. Care Delivery & Resident Management

2. Labor & Scheduling

3. Compliance & Documentation

4. Admin Ops (Billing, Inventory, Intake)

5. Family & External Communication

C. Workflow Matrices by Subsegment

Category: Care Delivery & Resident Management

Workflow	SNFs	AL	Board & Care	Home Health	Hospice	Competitors
Care Plan Documentation	Vertical SaaS	Manual/PDF	Paper	Vertical SaaS	Vertical SaaS	PointClickCare, ClearCare
Medication Management	Vertical SaaS	Excel/paper	Paper	Vertical SaaS	Vertical SaaS	QuickMAR, MedPass
Intake & Assessment	SaaS or hybrid	Paper	Paper	SaaS	SaaS	Yardi, MatrixCare

Incident Reporting	Vertical SaaS	Paper/email	Paper	SaaS	SaaS	iCareManager

Category: Labor & Scheduling

Workflow	SNFs	AL	Board & Care	Home Health	Hospice	Competitors
Staff Scheduling	OnShift-type	Excel, manual	Manual	Some SaaS	SaaS	OnShift, Smartlinx, IntelyCare
Staff Onboarding	LMS / HRIS	Ad hoc	Not done	SaaS	SaaS	Relias, CareAcademy
Training Compliance	SaaS or HRIS	Manual	Not done	LMS	LMS	Relias, HCP

Category: Compliance & Documentation

Workflow	SNFs	AL	Board & Care	Home Health	Hospice	Competitors
Regulatory Compliance	Vertical SaaS	Binders	Binders	SaaS	SaaS	PolicyStat, SimpleLTC
Incident Reporting	SaaS	Manual/email	Paper	SaaS	SaaS	iCareManager, in-house

Category: Admin Ops & Communication

Workflow	SNFs	AL	Board & Care	Home Health	Hospice	Competitors
Billing & Collections	SaaS	Manual	Manual	SaaS	SaaS	AlayaCare, MatrixCare
Inventory Management	SaaS/manual	Manual	Manual	Manual	Manual	Medline (not software)
Family Communication	Cubigo-type	Phone/SMS	Phone only	Manual	Manual	Cubigo, LifeLoop, CareMerge

IV. Evaluate Top Subsegment × Workflow Pairs

1. Board & Care × Staff Scheduling

Criteria	Notes
Product whitespace	No purpose-built tools; most use paper calendars or ad hoc texting.
Business whitespace	Not targeted by incumbents due to small ACVs.
Operational leverage	High — saves hours weekly and improves shift coverage.
ACV estimate $	$500–$2,000 annually depending on feature depth.
# customers at scale	~10,000+ board & care homes in U.S.
Market size	$5M–$20M (conservative)
Price sensitivity	High, but willingness if tied to labor cost savings.
Known competitors	None that serve this specific niche.

2. Assisted Living × Family Communication

Criteria	Notes
Product whitespace	Weak penetration; mostly phone/email.
Business whitespace	Families are a key differentiator — customer satisfaction hinges on communication.

Operational leverage	Medium. Automates a stressful, manual process.
ACV estimate $	$3,000–$6,000 annually depending on size.
# customers at scale	~30,000 facilities
Market size	$100M–$200M
Price sensitivity	Moderate. Framed as retention tool.
Known competitors	Cubigo, LifeLoop (but adoption is light outside large chains).

3. Home Health × Regulatory Compliance

Criteria	Notes
Product whitespace	Some tools exist but often built for SNFs.
Business whitespace	Operators juggle multiple portals, requirements.
Operational leverage	High — audit prep, inspection avoidance.
ACV estimate $	$4,000–$8,000 annually.
# customers at scale	~11,000 Medicare-certified agencies
Market size	~$50M–$90M
Price sensitivity	Low-medium — tied to reimbursement.
Known competitors	SimpleLTC, PointClickCare (partial coverage).

V. Buyer Personas

Buyer Title / Role	Workflow Owned	Context of Pain	Budget Control	Notes
Owner-Operator (Board & Care)	Staff Scheduling	Constant call-offs, can't find coverage, no software	Yes	Tech-averse but open to low-friction tools.
Executive Director (Assisted Living)	Family Communication	Pressure from families, calls interrupt operations	Yes	Seeks differentiation via family satisfaction.
Compliance Manager (Home Health)	Regulatory Compliance	Frequent audits, overwhelmed by documentation tasks	Partial	Wants integrations with EMR and billing.