

HealthCare Connection

COPYRIGHT © 2010
<http://www.HCC.md>



for more information contact Kurt Wyman
(877) 878-5478 ext 801
Kurt@HCC.md

Introduction to HealthCare Connection

A simple, web based software system designed to simplify the communication process between care facilities, healthcare services, diagnostic services, and equipment providers. It is a low-cost, fee-per-use system that uses a secure HIPAA compliant database to store, manage, disseminate, and report patient information. The system is a suite of programs that are customized for each node or process in the discharge chain: hospital, provider and physician.

- **Eliminates faxing and refaxing**
- **Matches providers with insurance and case needs**
- **Tracks discharge status**
- **Facilitates communication with family and doctor**
- **Simplification of reports**
- **Fee-per-use eliminates large capital outlay**

Eliminates faxing and refaxing

It goes without saying that faxing case information and waiting for a response wastes a great deal of time. It can also pose HIPAA security risks.

The **Discharge Manager** allows relevant case information to be input once and then sent to providers who have been matched by insurance, needs, and if necessary, distance. Manual overrides are allowed. No identifying information is included with the email notification – It's purpose is to allow the provider to quickly respond and accept or reject the specific request. Once the case discharge needs have been defined, a simple click of a button begins the process of matching providers and making requests for Medical Equipment (HME | DME), Home Health, Hospice, Pharmacy, Medical Transport, Extended Care Facilities, Therapy and Treatment.

Providers have software specifically designed to make it easier for them to respond 24/7 to discharge requests.

Physicians have their own software making it easy to review patient's discharge status, confirm or comment on discharge plans, from home or office.

When a patient's discharge needs change, for whatever reason, it's a simple click of a button to initiate updated requests to the providers.

Matches providers with insurance and case needs.

Case managers spend too much time matching patient needs to providers insurance and ability. The **Discharge Manager** handles this automatically, but allows manual override when necessary.

During the setup process, each provider is identified as to their services and products, as well as the insurance they accept. Providers are able to use their application to make adjustments to their profile at will.

Discharge Manager will list the providers and facilities in “Best Match First” order, a selection that considers patient’s insurance, aftercare needs and provider location and ability. From this list case managers can select which providers they choose to communicate with and can quickly set schedules.

Tracks discharge status

At any time, a case worker (or any authorized person) can see the status of a case. At a glance, you can see which items have been resolved, and which are pending. In addition, the admin tab will show a summary status of all case workers and their cases.

Facilitates communication with family and doctor

A single click will send an email notification to the doctor that the patient is ready for discharge. This includes the status of all the discharge requirements to enable the doctor to assess that all discharge issues are resolved.

Family members can also be notified.

Simplification of reports

State agencies may require various discharge reports, such as MIRcal for California. **Discharge Manager** provides administrators with tools and reports to quickly inform, update, and review the status of a single patient, list of patients, or every patient added to the database. The reporting function is customizable and among other uses it can monitor patient progress, case manager work flow, provider status, or provide reports based on diagnosis, physician, medication, or assigned provider to mention a few. Reports can be generated at anytime for any reason; **Discharge Manager** can generate reports and manually or automatically send them out individually or to an email list. Administrators can be informed about the details of a patient’s condition, diagnosis, and discharge status by simply logging into the system. Administrators also have global overview reports to review data common to all patients like length of stay and discharge ready status, **Discharge Manager** improves administrative oversight of the entire discharge process.

Fee-per-use eliminates large capital outlay

Because you pay only \$14 per discharge (\$2 per simple discharge) there is no “hit” to your budget. You pay only for discharges that you use.

If you want to be able to produce all the discharge reports, you will need to enter all discharges through the system, including “simple” discharges. A “simple” discharge is one that does not require case needs to be matched to a provider, and no provider is involved.