

Real-Time Notifications HealthShare Care Management Notifications Solution Pack



The essence of effective care management is doing the right thing, at the right time, for the right patient or health plan member. This holds true whether you are optimizing preventive care or managing long-term chronic conditions. Yet clinical staffing is in short supply, and demand is huge, which makes it all too easy to miss the window for action.

Consider:

- The average care manager manages the care of 40-200 individuals per month, depending on setting
- Staffing shortages are significant and growing. The US alone is [on track](#) for a deficit of 54-139 thousand physicians by 2033
- Primary care providers spend an average of only 18 minutes with their patients
- A [study](#) by the University of Chicago found that it would take a PCP more than 27 hours per day to deliver all care recommended by established guidelines
- An Annual Wellness Visit (AWV) was associated with significantly reduced spending on hospital acute care and outpatient services. Patients who received an AWV in the index month experienced a 5.7% reduction in adjusted total healthcare costs over the ensuing 11 months.

Software can't solve the staffing shortage, but it can help caregivers and care managers focus on what matters so that they are, in fact, delivering and coordinating the right care at the right time to the right individuals. InterSystems Care Management Notifications are designed to help you enhance outcomes, increase clinician efficiency, and optimize financial performance by harnessing intelligent business logic to inform providers and care managers when action is needed.



MISSED WELLNESS VISITS COULD EQUATE TO AS MUCH AS \$4.7 MILLION PER YEAR.

Real-Time Actionable Intelligence

A well-established body of research has demonstrated the value of timely alerts and notifications in improving communications during transitions of care, reducing missed follow-up appointments, capturing missed revenue opportunities from Medicare wellness visits, reducing readmissions, and improving performance on the quality measures for value-based care programs. Notifications help teams focus care delivery on those most in need of attention so health systems and payers can enhance both clinical and business outcomes.

Care Management Notifications Solution Pack

The HealthShare Care Management Notifications solution pack is deployed as a comprehensive fully managed service to support:

- Reductions in readmissions
- Increase in Wellness Visits
- Smoother transitions of care

The Solution Pack leverages standard Admission, Discharge, and Transfer (ADT) messages for continuously monitoring against a set of clinical business rules which identify relevant clinical events or gaps in care and alert interested care managers. Notifications can be seamlessly integrated into an electronic medical record (EMR) or care management system, ensuring accessibility within established workflows. Alternatively, clinicians can access notifications through a web or mobile interface on the InterSystems hosted portal.

A Fast & Lightweight Cloud Solution

The Solution Pack is a fully managed service - InterSystems handles software implementation, hosting and updating so you don't need to purchase, operate, secure, and maintain infrastructure yourself. You can concentrate on providing the right care to your patients and members.

Once you provide a roster file of clinicians and patients in a specified format, along with integration specifications for your ADT system, and optionally your EMR(s), we take care of the rest.

- Configuration and implementation services to bring the solution live, including building connections
- All data center resources, including hosting, hardware, and network capacity needed to run the solution
- Ongoing maintenance for all solution components
- 24/7 support for the solution including real-time monitoring
- Sophisticated security and data protection programs

Providers and payers can focus core activities with the confidence of knowing that InterSystems will provide a fully managed service without hidden operating costs.



Return on Investment

Doing the right thing for patients and members not only helps providers and health plans fulfill their missions, it pays financial dividends. For example, missed Medicare wellness visits equate to missed revenue for patients in traditional Medicare plans. For a large academic medical center serving over 2 million patients annually, missed wellness visits could equate to as much as \$4.7 million per year. Similarly, a drop in STARS ratings below 4 STARS can cost plans between \$400 and \$500 per member per year. For a 400,000 member MA plan that's over \$160 million.

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