

The Key to Care Continuity -

Improved Document Exchange
and Clinical Notifications

*Better patient and provider satisfaction leads to better
health outcomes*



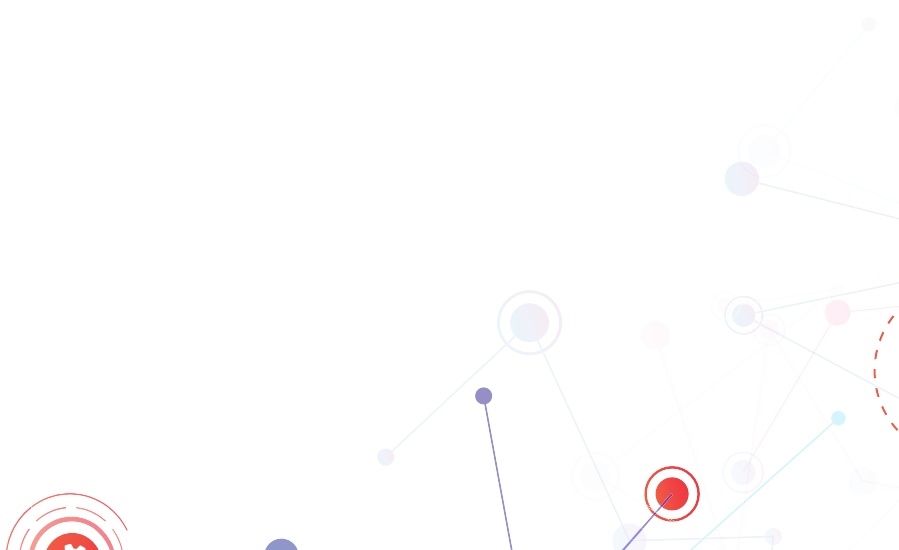
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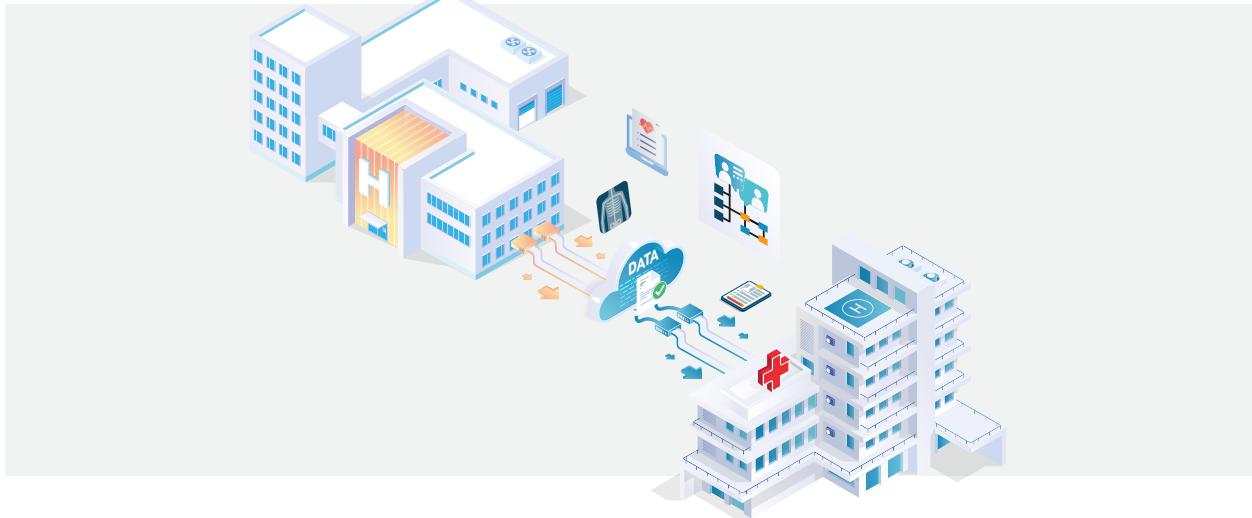


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Improved Document Exchange and Clinical Notifications



There are a number of industry drivers compelling hospitals, providers, payers, and care teams to improve how, and when, they're sharing patient event information and communicating about care transitions. While these goals are evident, we have still not been able to achieve adequate and timely data sharing.

To control costs, and deliver better care the biggest hurdle is the handoff of patients from one care setting to another. This is where mistakes happen. To effectively manage discharges and transfer of care, healthcare organizations must actively and efficiently manage those patients at their highest level of acuity from acute to post-acute. As CMS noted in their mandatory ADT ruling effective May 2021, this begins with updating current processes and investing in technology that fully supports proactive notifications and document sharing, with the goal of working collaboratively with all care members.

Real-time event notifications and on-demand document access lead to significant improvements:

- Better care coordination
- Fewer avoidable readmissions
- Improved care quality and patient safety
- Increased reimbursement opportunities through early intervention
- Enhanced relationships among area clinicians, hospitals, and post-acute care facilities
- Significantly optimized processing of patient records for providers, lessening the burden on health information management (HIM) staff
- Heightened security and PHI protection (audited, encrypted data)

Data Exchange Challenges Still Exist Despite Value-Based Care Models Implemented Over the Last Decade

Over the past 10-plus years, healthcare has undergone a technology and interoperability revolution leading to improvements in quality, performance, and patient safety. EHR adoption and interoperability improvements have been driven by government regulations, changing reimbursement models, and overall market demands.

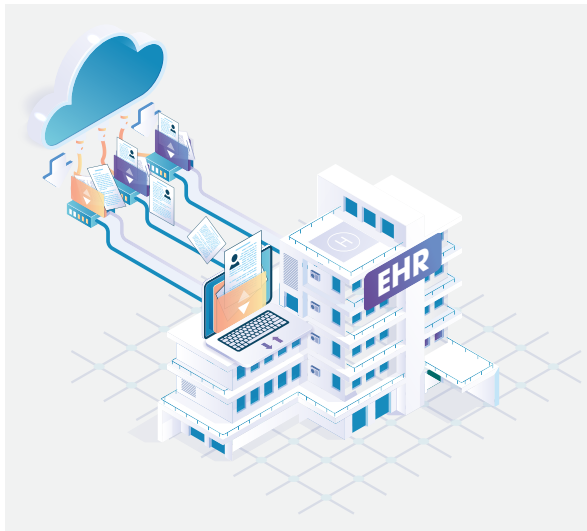
With billions of dollars of investment in digital tools, interoperability, and data sharing incentives, significant communication problems still persist. With care delivery becoming more specialized, patients may find themselves receiving care from a disjointed network of providers with a completely inadequate information-exchange system. This weak information integration can lead to care teams not being aware of patient hospitalizations, new diagnoses, and treatments. Studies show that coordination deficiencies, and particularly a lack of timely PCP notification

of a patient's treatment, are significant drivers of reduced health outcomes, preventable hospital readmissions, and the mounting cost of healthcare.^{1,2} Delayed communication leads to ineffective hand-offs, which have long been known as a significant patient disadvantage.

Awareness and engagement with a patient's PCP during transitions of care is critical to mitigate risk, improve compliance, and maximize reimbursement. When hospitals don't notify PCPs when patients enter the ED, this lack of communication can contribute to poor care continuity. Specifically, in the absence of notification or awareness of a patient's episode of care, it directly impacts a provider's ability to efficiently follow-up with a patient.² Patients lacking timely follow-up are more likely to be readmitted, some with an extended length of stay.³

Traditional ways of communicating to providers and payers about a patient's hospital event, including traditional paper faxing, scanning, and courier services, are expensive and time-consuming. Indeed, of the nearly \$4 trillion spent annually on healthcare in the US, one-quarter is administrative spending.⁶

The healthcare industry is making progress overall, adopting electronic processes to avoid around \$122 billion in administrative costs in 2020 by automating administrative transactions.⁷ But too often, providers are still communicating with internal and external care stakeholders using antiquated technologies. Delayed communication with incomplete or missing information means these legacy methods end up costing providers time and money, and they frequently impact patient care.



Clinical Event Notification and Data Exchange Case Study

A 200-bed community hospital in California uses a clinical data exchange platform (Consensus All Access from Consensus Cloud Solutions) to enhance the way it communicates with clinics and other ambulatory providers throughout its community, both in- and out-of-network.

In the past, physician practices called requests into the hospital's records office, and all patient documentation, including history and physical reports, lab and test results, summaries of care, transcriptions, face sheets, diagnostics, and radiology reports were paper faxed using a fax machine.

Today, clinical event notification and data exchange technology provides a proactive way for the hospital to put actionable information in the hands of the right care team, encouraging care coordination and consistent follow-up while reducing readmissions. Consensus All Access is a web-based application and rules engine that allows the hospital to deliver real-time patient-event data to its primary care partners through a variety of electronic communication pathways. The application's rules and integration engine, combined with account and subscription verification capabilities, ensure that the correct patient information is securely delivered to the correct care stakeholder in a timely manner.

Within a month of going live with Consensus All Access, the hospital had 315 area care providers connected and successfully receiving notifications and the corresponding documentation. This eliminated around 150 phone calls and paper faxes daily from the hospital's HIM department. In less than a year, the hospital delivered more than 1.4 million event and reporting notifications and shared more than 70,000 ED encounters, 57,000 outpatient encounters, and 50,000 pre-admit and admit encounters.

Provider benefits include:

- Simple technical-support model
- Improved operational model
- Self-managed system by the subscribed provider or their designated administrator
- Satisfactory results concerning reduction in readmissions

Benefits to area providers, offices, and groups include:

- On-demand, 24/7 access
- Real-time alerts via secure texting
- Patient and information tracking through web portal

Conclusion



On-demand access to critical patient information for providers through a solution like Consensus All Access can enable appropriate interventions, improving the care process for everyone. It's especially useful for reducing the amount of unplanned, high-cost care for high-need patients. The platform gives community providers data access without allowing full EHR permissions, while ensuring that all processed data is automatically encrypted to HIPAA standards.

The benefits of real-time event notifications and document exchange via secure messaging include:

- Care managers are immediately alerted that a high-need patient has presented for care in the ED or is in transition from acute care, enabling providers to engage the entire care team in an intervention plan.
- PCPs and all care-team members are immediately alerted to patient events, driving best practices around post-discharge follow-up care.
- Patient-centric care-team communication results in increased collaboration, reducing the number of patients that slip through the gaps.
- Labor-free processing of patient records helps to reduce the paper transaction costs of traditional faxing and mailing; lessens the burden on HIM staff to manage high volumes of phone calls and offers a streamlined, secure approach to exchanging patient data.
- Delivery and read receipts can be used where applicable to ensure key stakeholder engagement. The audit trail can be used to track provider responsiveness and identify gaps in care delivery.

"The Consensus All Access platform is an easy-to-implement solution for managing patient data availability throughout the hospital and entire healthcare enterprise."

Components of the platform include:

- **Signal** for ADT event notifications
- **All Access Community** for access to corresponding critical patient data
- **All Access Downtime** for distribution of electronic patient data in the event of network or EHR downtime

About Consensus

Consensus Cloud Solutions, Inc. (NASDAQ: CCSI) is the world's largest digital fax provider and a trusted global source for the transformation, enhancement and secure exchange of digital information. We leverage our 25-year history of success by providing advanced solutions for regulated industries such as healthcare, finance, insurance and manufacturing, as well as state and federal government. Our solutions consist of: cloud faxing, digital signature, robotic process automation, interoperability and workflow enhancement; and intelligent data extraction using natural language processing and artificial intelligence that result in improved outcomes. Our solutions can be combined with best-in-class managed services for optimal implementations. For more information about Consensus, visit consensus.com and follow @ConsensusCS on Twitter to learn more.



Meyers, David, and Jeff Brady. "Rethinking the Role of Primary Care in Reducing Hospital Readmissions." AHRQ, 12 March 2020. <https://www.ahrq.gov/news/blog/ahrqviews/rethinking-role-of-primary-care.html>

² Moscovitch, Ben. "Improved Provider Coordination Can Reduce Health Care costs." PEW, 9 December 2019. <https://www.pewtrusts.org/en/research-and-analysis/articles/2019/12/09/improved-provider-coordination-can-reduce-health-care-costs>

³ "Inadequate Hand-Off Communication." Sentinel Event Alert, Joint Commission, 12 September 2017. [https://www.jointcommission.org/-/media/tjc/documents/resources/patient-safety-topics/sentinel-event/sea_58_hand_off_comms_9_6_17_final_\(1\).pdf](https://www.jointcommission.org/-/media/tjc/documents/resources/patient-safety-topics/sentinel-event/sea_58_hand_off_comms_9_6_17_final_(1).pdf)

⁴ Bhandari, Neeraj, et al. "Post Discharge Transitional Care Program and Patient Compliance With Follow-Up Activities." Journal of Patient Experience, 14 March 2022. <https://journals.sagepub.com/doi/full/10.1177/23743735221086756>

⁵ Anderson, Andrew, et al. "Follow-Up Post-Discharge and Readmission Disparities Among Medicare Fee-for-Service Beneficiaries, 2018. Journal of General Internal Medicine, 30 March 2022. <https://link.springer.com/article/10.1007/s11606-022-07488-3>

⁶ "Administrative Simplification: How to Save a Quarter-Trillion Dollars in US Healthcare. McKinsey & Company, 20 October 2021. <https://www.mckinsey.com/industries/healthcare-systems-and-services/our-insights/administrative-simplification-how-to-save-a-quarter-trillion-dollars-in-us-healthcare>

⁷ "CAQH 2020 Index: Automating Healthcare Administrative Transactions Has Reduced Annual Costs by \$122 Billion, \$16.3 Billion More Can Be Saved Through Further Automation." CAQH, 3 February 2021. <https://www.caqh.org/about/press-release/caqh-2020-index-automating-healthcare-administrative-transactions-has-reduced>