



# Meaningful Connectivity

Transforming Intake for Improved  
Outcomes and Valued-Based Success

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# AGILE

AXXESS GROWTH INNOVATION & LEADERSHIP EXPERIENCE



## Objectives: Inform, Confirm and Enrich

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- The participant will explore key components of a successful intake
- The participant will understand the anatomy of a successful assessment and its value-based consequences.
- The participant will explore best practices using technology for successful discharge outcomes and increase revenue with options available today.



# Healthcare is on Life Support

## Silver Tsunami

## Homeward Bound

## Bleeding Red

## Chronically Ill

## Payments & Compliance

## Uncontrolled Spending

**By 2030**

Baby boomers all over age of 65  
71M or 20% of population  
Estimated Cost of Care: \$295B

**By 2025**

\$265B cost shift from traditional care settings to the home for Medicare Advantage and Medicare Fee for Service

**2023**

53% of health systems to lose significant revenue  
Healthcare costs will increase \$135B with staffing being \$86B

**By 2030**

42% increase in chronically cases  
230M or 65% of population

**NOW**

Meaningful use HITECH Cures Act Info Blocking CMS requirements New Care Models Patient Access USCDI

**By 2030**

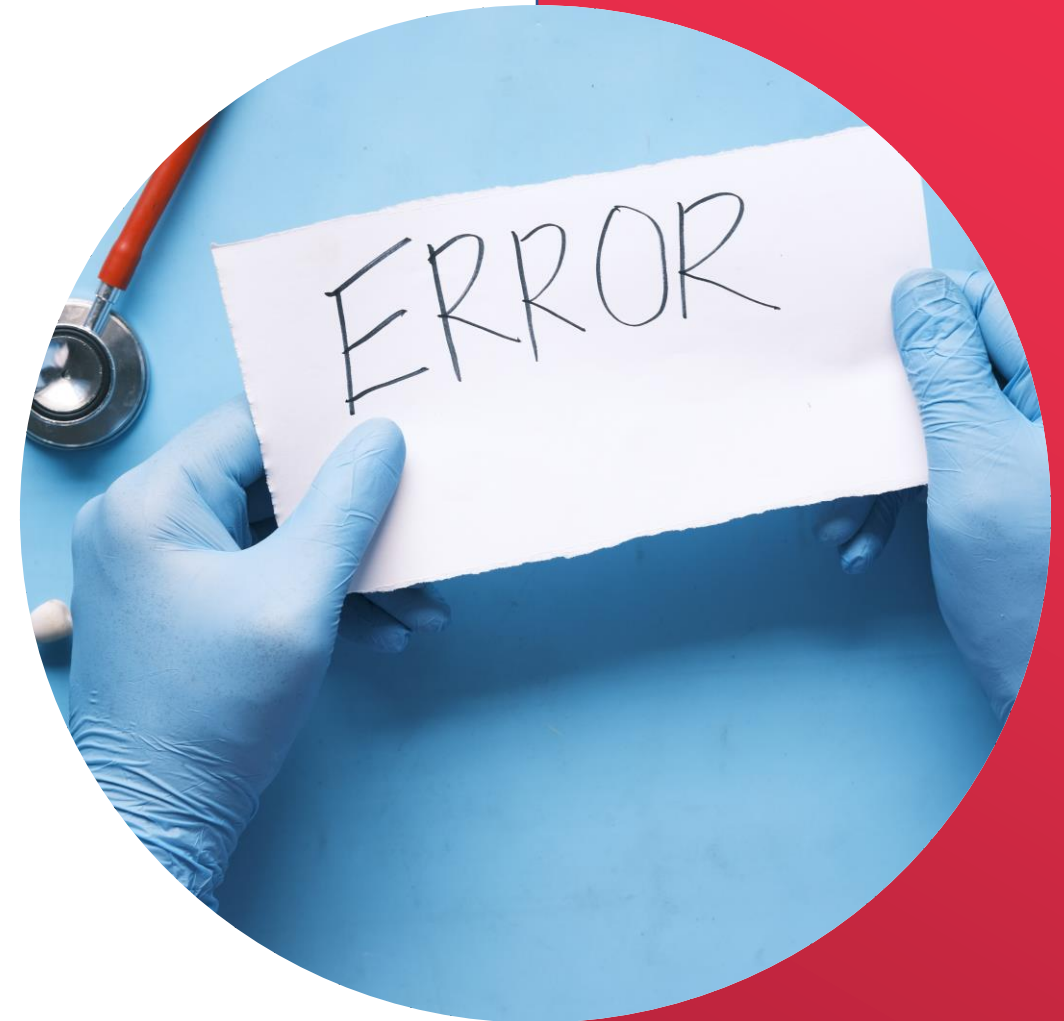
Total Major Health Care Programs (Medicare, Medicaid, etc) are estimated to rise from \$1.3 trillion to +\$2.5 trillion



## Know Your Patient



*250K – 400K deaths  
annually caused by medical  
mistakes*







# Meaningful Connection: Inform, Confirm, and Enrich

# Key Components of a Successful Intake



## Know your patient

- Get data
- Talk to Caregivers



## Provider communication

- Enable electronic communication with the referring provider



## Patient notifications

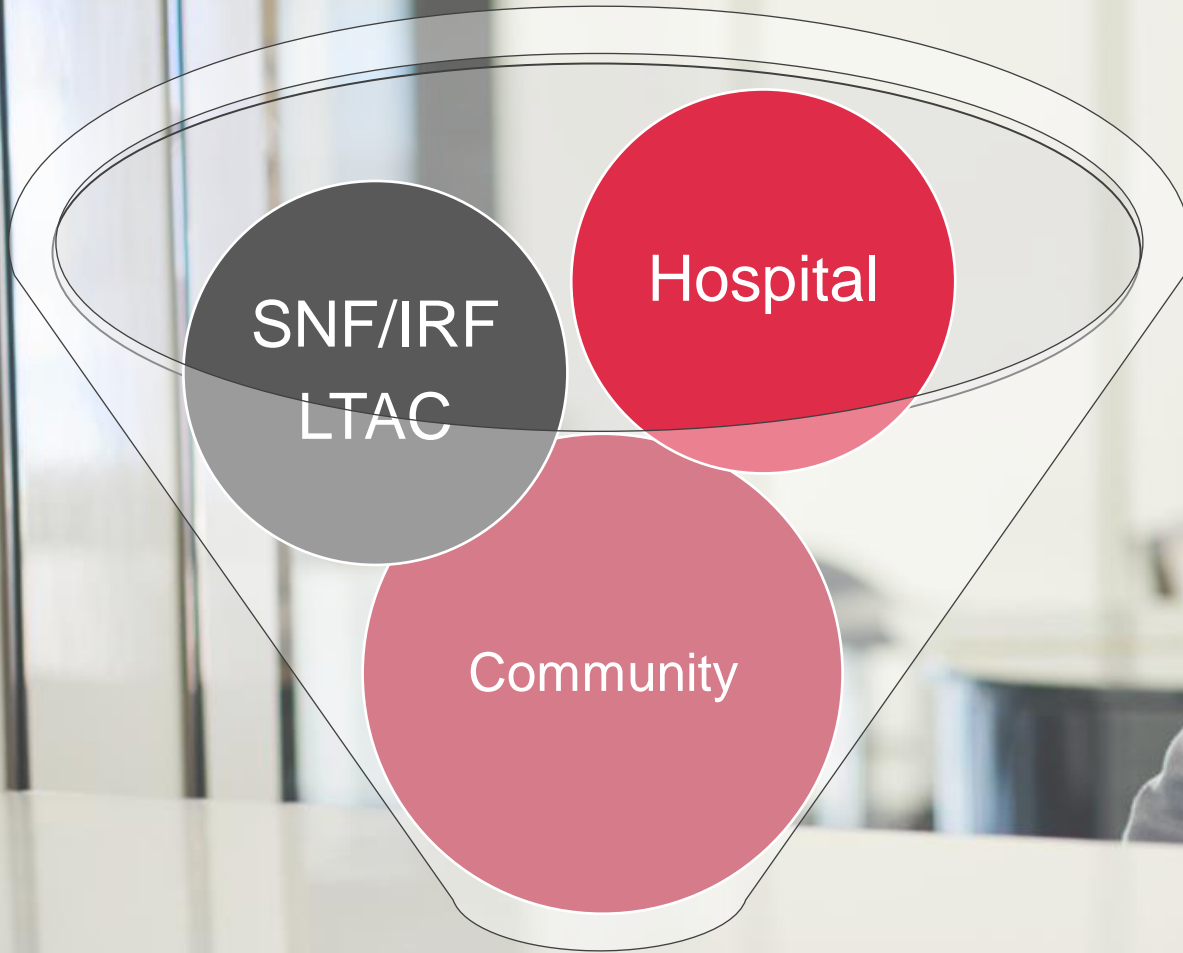
- Hospital
- HIE
- Patient Ping
- Collective Medical



## Availability electronically

- Be easy to access and do business with

# Referral Sources - Inform



Intake Collection

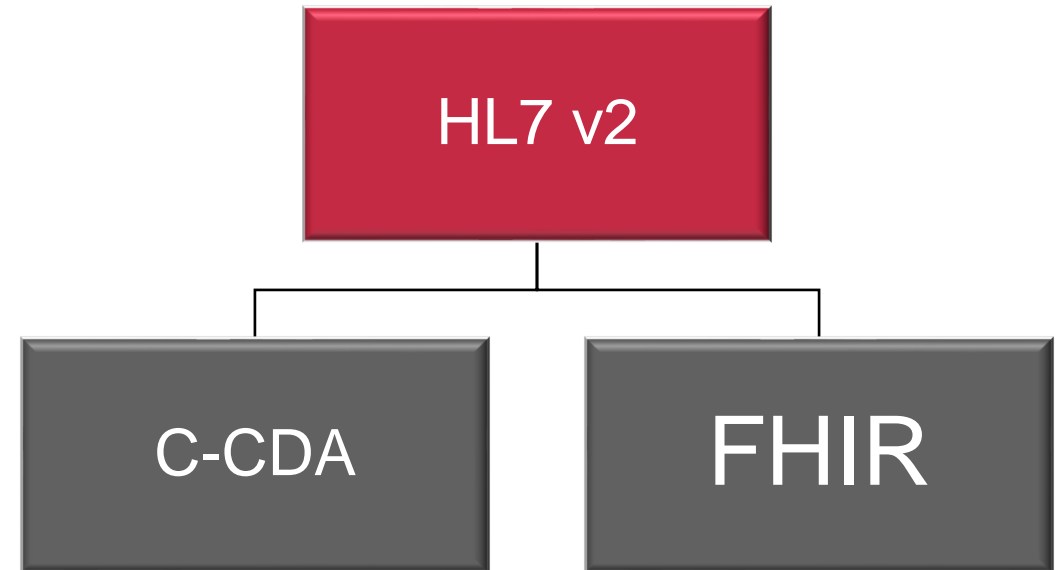




# Intake: USCDI

The United States Core Data for Interoperability

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Health information Exchange



# USCDI Data Elements

## Data Collection

### Examples:

- Medications
- Religion
- Allergies
- Problem Lists
- Advance Directives
- Face to Face Encounter
- Language

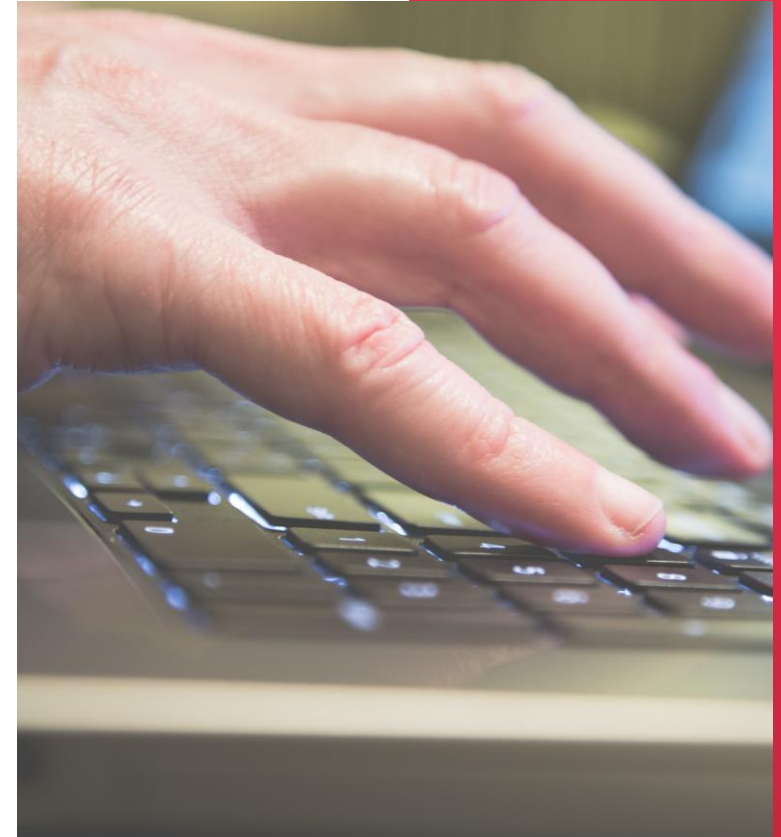


## Corresponding Assessment Data

All pertinent OASIS-E items complete and accurate

# Additional Intake Information

- Signing preference of provider
- Preferred method to share patient information
- Prior Authorizations
- Coordinate family/caregiver to be at the assessment
- Recertification consideration



# Best Practices Using Technology

- Connectivity basics
- EHR (connectivity, workflows, feedback opportunity)
- Query/direct message when possible
- Shared Identity
- Use notifications
- Signing preferences





# Meaningful Connection: Confirm and Enrich





# Meaningful Connections: OASIS E SOC Boost



## Collaboration

- Consider information from anyone that has direct contact (clinical or non-clinical)
- M0090 is the last date information is used
- Collaboration must occur in the assessment time frame



# Summary – Key Take Aways

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Intake Process: Gather as much information as possible

Appropriate staffing to gather data

Involve the team, caregivers and family

Know your patient

Leverage technology: Connectivity, communication, notifications, signatures



# References

[Outcome and Assessment Information Set OASIS-E Manual \(cms.gov\)](#)

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# Thank You

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