



Technology for Healthcare **Enterprise Scheduling Client/Server Version**

This application provides intelligent rule-based scheduling for every service within the healthcare network. The Client/Server version, operating in a Windows environment and utilizing Microsoft SQL Server, can be interfaced with any hospital information system utilizing HL7, or used as a standalone if preferred.

Highlights:

- Ensures seamless tracking of the patient encounter
- Eliminates redundancy in data collection between the registration and scheduling processes when integrated with HL7
- Minimizes scheduling errors and missed appointments
- Performs conflict checking by patient, resource, personnel, equipment, and appointment type
- Maximizes managed care contracts by improving scheduling efficiency and resource allocation
- Eliminates lost revenue due to insurance denials by automatically tracking the approvals as they are utilized and warning the scheduler if the authorizations have run out
- Eliminates lost revenue due to lost or late charge entry by automatically sending the charges attached to the scheduled event to billing and auditing for charge completion

Detailed Feature List

Enterprise Scheduling

Procedure-based and rule-based scheduling allows rapid scheduling and excellence in customer service across the entire network.

- Allows both centralized or decentralized scheduling
- Schedule via procedure using the search engine
- Schedule complex procedures requiring time lags and specific sequences using the search engine, from one screen
- Schedule via single service or into specific provider using calendar book style
- Access unlimited locations from one desktop
- View multiple providers' schedules, from multiple departments, on one screen in order to coordinate appointments, using search engine
- Access all related scheduling functions, e.g., cancel, uncancel, reschedule, view detail, view all patient appointments, etc. are accessed on one screen
- Attach Questions and Text per procedure/appointment type that are automatically prompted during the scheduling process—the user has the ability to cancel the scheduling action if the information necessitates this
- Copy existing appointments and blocks from one resource to another maintaining all information
- Track and store the last change to the Patient, Appointment, Charge, and Insurance Authorization files by User Id

- Schedule directly from the Wait List to avoid lost revenue from unfilled timeslots
- Ensure maximum efficiency in utilization of your resources by scheduling "First Available" or "Most Available"
- Time increments that appear on the schedule view are user-defined per service
- Ability to add blocks in resource calendars for meetings, patient rounds, etc.
- Proactive management is facilitated with end-user access to real-time management reports
- Manage resources and schedule via specialty, being presented with only the providers credentialed for certain appointment types. Procedure/appointment types can be color coded for a quick visual cue to the scheduler and resource
- Security based on user profile allows access to all components and each feature within the component

Conflict Checks and Flags

- Resource conflict checks are based on availability and blocks
- Patient conflict checks based on scheduled visits, insurance authorization dates and number of visits
- Procedure/appointment type conflict checks including "must" and "must not" rules and procedure availability
- Conflicts indicating that the patient cannot be double-booked

- Conflict checks when “undoing” a cancellation
- Conflict checks for gender when assigning a patient to a room and bed
- Conflict checks when adding a patient to Group Appointments
- Conflict checks when canceling an appointment that has charges attached or notes attached
- Flags for patients with special notes attached, patients with transportation needs, interpreter needs, and more
- Internal personnel are assigned as the responsible party for ensuring any patients that are at or past threshold receive proactive intervention
- Accountability is established
- Tracks denial reasons
- Tracks all contact with insurance carriers to be used in contract negotiation
- Creates user-defined insurance library notes for easy reference

Referral Management

Provide real-time reports about where your business is coming from, and more importantly, where it is not coming from, for proactive management, marketing and outreach.

- Automatically retrieves patient’s existing demographic and insurance records from registration history
- Quick access to a list of patient’s current appointments, history of appointments, cancellations and deleted appointments
- Ability to enter an Alias for patient confidentiality
- Ability to attach Referral Notes to a patient record with an indicator so anyone viewing that record is alerted
- Facility-defined requirements per referral status: New, Preadmission, and Admission
- Ability to cancel a referral created in error
- Ability to discharge a patient, delete any future appointments
- Track and report on volume of user-defined referral sources per service
- Identifies demographics of patients per service and identifies trends in referral patterns for proactive marketing and outreach
- Tracks referral trends per service per payer sources
- Use data to negotiate with 3rd party payers

Insurance Case Management

- Ensure that all services requiring pre-authorizations have them in place before the services are provided, eliminating added bad debt due to denial of payment.
- Provides a user-defined tickler system for making sure authorizations are in place prior to scheduling and providing a service
- Flags visits that require insurance authorization
- Stores the number of approved visits, approved date range and approved dollar limits, and counts down as authorized services are used
- Alerts when user-defined thresholds are reached, and will send a message if the scheduler attempts to schedule an unauthorized visit

Charge Entry

- Eliminate lost revenue due to lost or late charges by creating an audit trail to ensure all charges are submitted for all services provided
- Charge Entry by resource
- Creates a charge ticket for every scheduled event
- Eliminates duplicate data entry of charges; pass charges directly to your billing system via our established interfaces
- May be activated for some and not all departments, based on your facilities preference
- Charge codes and descriptions are user-defined and are copied from and maintained on the HIS charge master files
- Enter daily treatment codes for progress notes
- Enter equipment and supply charges

Suggested Integration

Integration with your A/D/T, Registration and MPI

The user may take initial patient data at the time of scheduling or registration. The scheduling record can trigger the automatic creation of a pre-registration or automatically populate the registration. If scheduling patients who have had a previous registration, the scheduler may choose the existing patient from the Registration list or Master Patient Index.

Integration with Billing

Charges are sent daily to your Billing system, and the Charge Master file is maintained only on the HIS side. Users may activate the scheduling system’s Charge Entry feature for only some or for all services. Creates an audit system for ensuring all charges are captured and submitted.