THIS WON'T HURT A BIT.
Clinical Engagement with SD Health Link
On site partnership to support your organization’s clinical programs and improve workflow efficiencies.

Our Goal:
Is to better understand your current clinical programs, initiatives and workflows and identify opportunities where aligning the services available through SDHL will support you in achieving your program goals and objectives as well as potential opportunities for improvement with current workflows.

Our Approach:
Our approach is tailored to understand the needs of your entire organization—from corporate Initiatives to front-line healthcare teams and workflows—we identify key areas where aligning the services of SDHL will support your needs.

Value of Clinical Engagement:
Our service increases awareness of available services and future plans related to SDHL. We answer your questions about who is contributing data and what they are contributing. We focus on your clinical workflows and identify challenges and opportunities to align with SDHL services. We identify use cases specific to your organization and tailored to each service line and role. This is relevant and of high value to clinicians.

Discovery Session:
SDHL discovery sessions are conducted in an open dialogue meeting with an overview of SDHL services. We review clinical workflows and current staffing models as well as current Strategic Initiatives/Metrics/Programs/Use Cases. Our team can also complete discovery through direct workflow observation. Sessions last roughly 60 minutes per department and members need only attend their specific departments session, often part of a session can be attended for busy providers.

Onsite Training:
We offer value based education and training aligning use case data with workflow integration support tailored to staffing roles and responsibilities. Our user guides and tool kits are provided at each training and offer another level of education and support. We are building credibility and trust by pulling from our clinical expertise and professional experience during training. Onsite training is completed in 45 minutes to one hour.

Ongoing Support:
Supportive follow up, education and training session will be provided at 1 week, 30, 60 and 90 days post go live. Use management reports available for troubleshooting and determination of utilization.

Contact:
Stacie Davis RN, BSN
stacie.davis@dsu.edu
605.291.2215
Clinical Event Notifications from SD Health Link

South Dakota Health Link Event Notification is a powerful new tool to help you stay in touch with your patients, prepare for pay for performance programs, and meet new and emerging alternative payment models.

What is Health Link Event Notification?

- Health Link Event Notification is a flexible, user-configured solution that puts the power of real-time notifications in the hands of clinicians and care managers for monitoring and reporting noteworthy care events.

Who would use Health Link Event Notification?

- Physicians, clinicians, case/care managers, and others who want to monitor the health status of their at-risk patients and follow up with these individuals during or after a significant care event takes place.

What types of Event Notifications can I receive?

- Emergency Department Admit/Discharge
- Inpatient Admit/Discharge/Transfer
- Inpatient Readmission
- Encounter Update
- Ambulatory Admit
- Patient Death

How does Health Link Event Notification work?

- Members subscribe to receive notifications ensuring the right health care decisions are made efficiently and effectively.
- They can customize their subscription to ensure that they receive the information they want, how they want it, and when they want it.

What are the benefits of Health Link Event Notification?

- **Enhance care coordination.** Better management of transitions from hospital to home, hospital to skilled nursing, emergency department to home and more.
- **Optimize reimbursement.** Thanks to new CPT codes for transition care, physicians can now be reimbursed for their efforts for timely follow-up with patients after a hospital event.
- **Maintain regulatory compliance.** CMS and other federal requirements.
- **Prepare for Pay for Performance.** Be equipped to meet the expected pay for performance requirements including practice transformation, MACRA, MIPS, and other alternative payment models.
- **Improve outcomes.** Notification about admissions and discharges help care teams follow up within hours of care instead of days.
What do I need to use Health Link Event Notification?

- Health Link Event Notification can be implemented as a stand-alone solution or can leverage your existing Point of Care Exchange connection.
- To use the secure messaging capability, Health Link Event Notification subscribers must have a Direct email address.
- Any standard text messaging or email account may be used to receive unsecure notifications.

Know when care events happen, so you can take action.

- Patient care doesn’t stop when patients leave your premises. Yet, oftentimes, physicians and care teams don’t know what happens to patients outside of their four walls. Too often, care is fragmented by transitions, collaboration and coordination is challenged, and patient care is compromised.

Stay apprised of patients’ health across the continuum.

- Health Link Event Notifications provide actionable information to move from reactive to proactive care delivery.
- Health Link Event Notification doesn’t require any additional investments in health IT systems, as you can leverage your existing data feeds.

Inform care with real-time event-based notifications.

- Choose where, when and how.
- Subscribe and receive notifications according to your preferences: via Direct secure message, text messaging, standard email or to an online notification worklist.
- Get notifications in real-time or in automated reports at specified times.
- Determine which patients to track based on diagnosis.
- Monitor your patients by loading a user-defined patient list.

Get reimbursed and comply with Governmental requirements.

- With Health Link Event Notification, you can better manage transitions of care and receive incentives for fulfilling all the components of CPT Transitional Care Management Services.
- In addition, you can proactively prepare for pay for performance programs, practice transformation, and accountable care organizations.

To get started using Health Link Event Notifications please contact our office at 605.256.5867 or via email at http://www.sdhealthlink.org/contact/.
FQHC PRACTICE
Improving Transitions of Care

THE CHALLENGE

One of the largest risks for readmission after hospital discharge is lack of timely follow-up with their PCP. A challenge is to know when a patient has been discharged in order to provide ongoing support during this critical time.

Without timely notifications of a hospital discharge, providers and care teams can encounter challenges with timely patient engagement to create the best outreach and treatment plan and results in a lot of administrative work for the practice and can put the patient’s safety at risk.

EVENT NOTIFICATIONS

BENEFITS:

Care Continuity

PCP/RN/Care Coordinator: Timely notification allows for the opportunity to outreach to the patient in order to review patient status and post-discharge instructions, and to schedule follow-up appointment to support continuity of care.

Transitions of Care

PCP: Provides notifications to support with ongoing medical management and scheduling of follow-up visit post discharge.

Chronic Care Management

RN/Care Coordinator: Enhances ability to spend less time on administrative work and more time on supporting and coaching the patient as event occurs.

Patient Safety

Timely patient follow-up after discharge improves patient safety and reduces exposure for adverse drug or medical events.

Patient Satisfaction

Improves patient satisfaction and comfort by showing care team is connected.

Financial

Allows for opportunities to increase reimbursement rates for chronic care management.
FQHC PRACTICE
Support Patient Routing to Appropriate Care Settings

THE CHALLENGE

A large number of ED visits are for non-urgent conditions. This can lead to increased healthcare costs, unnecessary testing, and weakened provider-patient relationships.

Without timely notification of an ED admission, a providers can encounter challenges identifying the need for patients seeking care in emergency settings and potential for redirection to appropriate care settings.

EVENT NOTIFICATIONS

BENEFITS:

Appropriate Level of Care
PCP/RN: Timely notification allows for the opportunity to outreach to patient in order to review patient status and to determine appropriate level of care.

Care Continuity
PCP: Identifying and targeting frequent utilizers can reduce costs and improve coordination and continuity of care.

Chronic Care Management
RN/Care Coordinator: Support patient by providing individualized care plans, intensive care management, and review of any barriers to care.

Patient Safety
Redirecting patient to the appropriate level of care can decrease exposure and risk for adverse events.

Patient Satisfaction
Improves patient satisfaction and comfort by offering other treatment options and showing care team is connected.

Financial
Allows for opportunities for lower healthcare costs and maximize reimbursements.
THE CHALLENGE

Oral health and dental teams play a critical role in patients overall care model. As a result, the need for improving communication and awareness for dental teams is essential for improving overall care coordination efforts.

A challenge for dentists is to know when a patient has received care in the community for dental related complaints or procedures. Without this vital information, dental teams encounter challenges with understanding the needs of their patients and why patients are seeking care outside in the community.

EVENT NOTIFICATIONS

BENEFITS:

**Coordination of Care**
Dentist/Oral Surgeon:
Timely notification of adverse events allows for improved transfer of information and coordination of care between specialties. Enhances ability to make any changes to treatment plan to provide ongoing support.

**Transitions of Care**
Dentist/Oral Surgeon:
Provides notifications to support with ongoing clinical management and scheduling of follow-up visit post-discharge to improve transitions of care.

**Patient Safety**
Improves patient safety and reduces exposure for further adverse events by providing notification to dentist of complications.

**Patient Satisfaction**
Improves patient satisfaction by allowing for clinically connected care team.
CORRECTIONAL HEALTH
Improved Tracking and Medical Management for Work Release Programs

THE CHALLENGE
Inmates in work release programs may present to the hospital for a variety of reasons. Lack of timely notifications and complete medical event information can lead to disjointed health care services for individuals in the correctional health system.
Correctional health staff need to be aware of any medication changes or treatment orders in order to provide safe and effective care to their patients.

BENEFITS:
Care Delivery
Correctional Health Provider/Nurse
Provides event notification and can help achieve more efficient and better coordinated care, significant health care cost savings, and improvements in both public health and public safety.

Transitions of Care
Correctional Health Patient
Assists with transitions of care from hospital to correctional health setting by providing a notification that an event has occurred.

Patient Satisfaction
Correctional Health Patient
Enhances patient satisfaction by enabling correctional health staff to more quickly identify and focus on barriers/issues

Staff Satisfaction/Workflow Efficiencies
Correctional Health Staff
Improves staff satisfaction by providing timely notification and event detail that may not have been reported by the inmate.

Having event detail can save time in creating better care or treatment plans
**THE CHALLENGE**

The decision to transport critically ill or patients with health status changes is a common occurrence within acute care facilities.

To improve communication and care coordination for the inmates entire care team, timely notifications for health status changes are essential to provide status changes for inmates receiving care in inpatient acute care settings.

When an inmate transfers from one unit of the hospital to another, there is an increase risk for communication breakdown which can result in lack of awareness for the inmates Health Services Team.

**EVENT NOTIFICATIONS**

**BENEFITS:**

**Care Delivery**
**Correctional Health Provider/Nurse**
Transfer event notification and can help achieve more efficient and better care delivery, and provide improvements in both public health and public safety by informing care team of patient’s exact location.

**Coordination of Care**
**Correctional Officers/Correctional Health Provider/Nurse**
Allows for improved transfer of information for security and safety purposes so that appropriate protocols are followed.

Informing care team of changes in medical condition and status allow for improved coordination of care among specialists.

**Patient Satisfaction**
**Correctional Health Patient**
Enhances patient satisfaction and comfort by showing care team is connected.

**Staff Satisfaction/Workflow Efficiencies**
**Correctional Health Staff**
Improves staff satisfaction and workflow efficiencies by informing them of patient status changes and exact location for safety purposes.
EMERGENCY DEPARTMENT
ACCURATE CLINICAL DOCUMENTATION
Poor Historians

THE CHALLENGE
Trying to capture accurate medical histories from poor historian patients takes tremendous time and effort. Often, it requires clinical teams to go through the manual process of multiple phones calls and faxing to receive accurate medical information for patients who are not able to provide accurate information themselves.
Without this vital information, it can delay care and result in exposure for the clinical care teams and patients to medical errors due to incomplete and inaccurate information.

BENEFITS:
Care Delivery
ED Triage:
Provides immediate and expanded access to community clinical data to assists with accurately capturing medical history information.
ED Provider:
Assists with Medical Decision Making by providing access to recent visit histories, testing and results data.

Patient Safety
ED Patient:
Assists with capturing accurate medication histories for patients who are not able to verbalize. Reducing potential for adverse events due to inaccurate or missing information.

Patient Satisfaction
ED Patient:
Enhances patient satisfaction by decreasing the stress level for patients who are not able to recall accurate medical history information.

Staff Satisfaction
All ED Staff:
Improves staff satisfaction by eliminating the phone and fax process to obtain a patient medical record and results.

Workflow Efficiencies
ED LOS:
Improves patient throughput by providing immediate electronic access to a patients medical information. Reducing resource time & efforts to obtain this information manually.
EMERGENCY DEPARTMENT TIMELY CARE DELIVERY
Incapacitated/Unresponsive Patient

THE CHALLENGE
Clinical care teams are unable to acquire medical history information by traditional methods for incapacitated patients who may be unable to speak for themselves.
Patients presenting in these clinical situations require teams to intervene and act quickly with medical decisions and treatment. Medical history information is not always readily available and can require a manual process of multiple phones calls and faxing to receive accurate medical information.
Without this vital information, healthcare providers often are required to intervene without having accurate and complete information about the patient.

BENEFITS:
Timely Care Delivery
ED Triage: Provides immediate and expanded access to community clinical data to assist with accurately capturing medical history information.
ED Provider: Assists with timely intervention and medical decision making by providing access to recent visit histories, testing, and results data.
Pharmacist: Provides medication history information to support medication reconciliation efforts, eliminating the need to contact retail pharmacies for information.
ED Admissions: Provides immediate access to demographic, insurance, and PCP information to expedite ED chart creation in EMR.
Transitions of Care
ED Discharge/Case Managers: Assists with identifying patients care team
Patient Safety
ED Patient: Improves patient safety and reduces medical errors by providing expanded access to clinical data for patients who are not able to verbalize medical history information.
ED Staff Satisfaction
Improves staff satisfaction by eliminating the phone and fax process to obtain a patient medical record and results
Workflow Efficiencies
Improves patient throughput by providing immediate access to a patients medical information. Reducing time spent obtaining this information manually.
EMERGENCY DEPARTMENT CARE MANAGEMENT
ED Utilization for Chronic Pain Management

THE CHALLENGE
Recent current events and the opioid epidemic impacting the nation have highlighted the need for appropriate chronic pain management. With options to receive care at multiple end points in the community, a patient’s drug regime can change frequently.

The ability to access a patient’s entire medication regime from multiple endpoints can be very complex and challenging, requiring a great deal of time and manual intervention from ED staff and providers.

THE BENEFITS:
Medication Reconciliation
ED Triage:
Provides immediate and expanded access to community clinical data to assist with accurately capturing medication fill and encounter history

ED Provider:
Assists with Medical Decision Making by providing access to recent visit histories, testing and results data to avoid unnecessary duplicate testing and identify and intervene with drug seeking behaviors

Pharmacy Team:
Supports with accurate data access medications reconciliation for patients

Transitions of Care
Community Care Teams:
Provides access to summary of care documents on demand to support with evaluation and ongoing medical management post discharge and early identification of misuse and substance abuse issues

Staff Satisfaction
All ED Staff:
Improves staff satisfaction by eliminating the phone and fax process to obtain a patient medication history information.

South Dakota HealthLink
Exchanging information. Changing lives.
Patients requiring inpatient admission can have difficulty remembering current medications, procedures and/or treatments. Due to the patient’s condition upon admission, it may not always be possible to obtain this information directly from the patient, requiring clinical teams to spend a great deal of time obtaining information by consent, multiple phones calls and faxing with long wait times.

Without this information, it can result in additional time and effort needed to complete admission assessments and turnaround times.

**THE CHALLENGE**

**BENEFITS:**

**Care Delivery**

Inpatient/Admission RN:
Provides immediate and expanded access to community clinical data to assist with accurately capturing medication history information.

**Hospitalist:**
Assists with Medical Decision Making by providing access to recent visit histories, testing and results data to avoid unnecessary duplicate testing upon admission

**Medication Reconciliation**

Pharmacist:
Supports accurate data capture for medication reconciliation efforts reducing the need to contact retail pharmacies

**Admissions Registration:**
Provides expanded access to patient demographic, insurance and care team information.

**Patient Safety**
Improves patient safety by providing accurate medication and clinical histories by reducing exposure for adverse drug events

**Staff Satisfaction**
Improves staff satisfaction by eliminating the phone and fax process to obtain a patient medication history information.
THE CHALLENGE
Medication Therapy Management Programs (MTMP) are designed to help patients and doctors make sure that medication therapies are working to improve the overall health of patients. Pharmacists or other health professionals are required to give patients a comprehensive review of all medications to ensure successful outcomes with the following:

- How patients get the most benefit from the drugs prescribed
- Patient Safety concerns with drug allergies, contraindications and reactions
- Indication for Use
- Adherence and Compliance

Currently, Pharmacy teams have limited access to clinical data to support with MTM program goals. As a result, pharmacy teams spend a great deal of time obtaining information manually, requiring multiple phone calls and faxing with long wait times for this critical information.

BENEFITS

Medication Reconciliation:
Pharmacist, Pharmacy Technicians & Medication Reconciliation Team:
Provides immediate and expanded electronic access to community medical history data which can assist in identifying potential compliance issues and barriers with access to accurate medication fill histories. Supports with aligning disease and medication management processes. Eliminates the need for phone calls to retail pharmacies to obtain accurate medication histories.

Transitions of Care
Assists with transitions of care to accurately capture medication history for appropriate ongoing outpatient management.

Patient Satisfaction
Provides electronic access to a patient medication history, eliminating stress for patients with poor recall.

Patient Safety
Reduces the potential for adverse drug events due to incomplete or inaccurate data capture.

Staff Satisfaction/Workflow Efficiencies
Pharmacy Team:
Improves staff satisfaction by eliminating the phone and fax process to obtain a patient medication record.
THE CHALLENGE

Although pharmacies, hospitals, clinics, and doctor’s offices take many steps to provide good quality care and keep their patients safe, medication management and the ability to obtain accurate and complete medication histories can often be challenging. With aging populations, patients with multiple chronic complex medical conditions and complicated medication regimes, medication management is now a vital component of the patients overall care management process. This is also magnified by the use of multiple prescribers, such as Primary Care Physicians, Mid-Level Providers and Specialists, as well as use of multiple pharmacies (i.e.-Community, Mail Order, and Internet).

BENEFITS

Medication Reconciliation:
Pharmacist, Pharmacy Technicians & Medication Reconciliation Team:
Provides immediate and expanded electronic access to community medical history data which can assist in identifying potential compliance issues and barriers with access to accurate medication fill histories
Eliminates the need for phone calls to retail pharmacies to obtain accurate medication histories

Transitions of Care
Assists with transitions of care to accurately capture medication history for appropriate ongoing outpatient management

Patient Satisfaction
Provides electronic access to a patient medication history, eliminating stress for patients with poor recall.

Patient Safety
Reduces the potential for adverse drug events due to incomplete or inaccurate data capture

Staff Satisfaction/Workflow Efficiencies
Pharmacy Team:
Improves staff satisfaction by eliminating the phone and fax process to obtain a patient medication record
PHARMACY CARE MANAGEMENT
Supporting Management of High Risk Populations

THE CHALLENGE
With aging populations, patients with multiple chronic complex medical conditions and complicated medication regimes, this population can be at high risk for readmission rates due to improper medication management. The need for expanded access to a patient’s medication history is vital to the patient overall care management.

With Pharmacist and Medication Management incorporated as part of the patient care model, the need for technology to support these efforts is in high demand.

BENEFITS
Medication Reconciliation
Pharmacist:
Pharmacy Technician:
Medication Reconciliation Team:
Provides immediate and expanded electronic access to community medical history data which can assist in identifying potential compliance issues and barriers with access to accurate medication fill histories

Care Delivery
Pharmacist:
Allows the ability to not only access accurate medication histories, but also align disease management and medication management to support patient care and drive better patient outcomes.

Staff Satisfaction/Workflow Efficiencies
Pharmacy Team:
Improves staff satisfaction by reducing the phone and fax process to obtain a patient medication histories from retail pharmacies and outside sources.

Patient Satisfaction
Provides electronic access to a patient medication history, eliminating stress for patients with poor recall.
THE CHALLENGE

More people died from drug overdoses in 2014 than in any year on record. The majority of drug overdose deaths (more than six out of ten) involve an opioid. 78 Americans die every day from an opioid overdose.

The ability to access a patient’s up-to-date medication history is not only critical to the treatment rendered, it can also be helpful in supporting identifying potential misuse and abuse of medications impacting this national epidemic.

BENEFITS

Medication Reconciliation
Pharmacist:
Pharmacy Technicians:
Medication Reconciliation Team:
Provides immediate and expanded electronic access to community medical history data which can assist in identifying compliance issues and early detection for identifying potential drug seeking behaviors.

Early Detection of Misuse & Abuse
Pharmacist:
Supports accurate medication histories, for facilities and providers that are located close to bordering states where medication information may not be included in South Dakota State Prescription Monitoring Service.

Staff Satisfaction/Workflow Efficiencies
Pharmacy Team:
Improves staff satisfaction by reducing the phone and fax process to obtain a patient medication record from retail pharmacies or additional outside sources.

Patient Safety
Improves patient safety by providing accurate medication and clinical histories by reducing exposure for adverse drug events.
THE CHALLENGE

Members of care management teams often do not have access to timely clinical information to help identify members who may be high risk or rising risk.

A lack of collaboration tools with community providers and quick access to clinical histories impacts the ability to proactively identify barriers to care and access to care issues.

There may be delays in outreach by care managers for educational purposes when timely clinical information is not available.

BENEFITS:

Care Delivery
Case Manager:
Provides immediate and expanded access to community clinical data to assists with decision making and outreach frequency.

Enables tracking medical management across the community to identify potential barriers to care or access to care issues and removal of them

Transitions of Care
Case Manager:
Provides access to summary of care documents on demand to support with ongoing medical management post discharge.

Enables secure electronic collaboration with community services and providers

Patient Engagement
Care Management Patient:
Increase contact rates with better access to current demographic information.

Improve engagement and coaching with a more complete picture of medical history including, utilizations, test results and filled medications

Staff Satisfaction
Care Management Staff:
Reduce level of effort including phone and fax tag to obtain a patient medication history information.

Enable better patient engagement with a greater ability to know and discuss details surrounding recent utilizations
QUALITY MANAGEMENT
PROACTIVE PATIENT ENGAGEMENT
Improving Care Plans

THE CHALLENGE

A vital step to being effective is being able to engage patients. It’s a challenge when I am asking questions the patient feels that I should know as part of the care team.

Additionally, lack of access to community clinical activity results in spending a lot of administrative time trying to get a better clinical picture by making phone calls and faxing requests for information.

A lack of collaboration tools with community providers and quick access to clinical histories impacts my ability to proactively identify barriers to care and spot problems that others on the care team may not see.

BENEFITS:

Care Delivery
Registered Nurse:
Provides immediate and expanded access to community clinical data to assist with accurately capturing medication history information. Enables tracking medical management across the community to identify potential barriers to care and remove them.

Transitions of Care
Social Worker:
Provides access to summary of care documents on demand to support ongoing medical management post discharge. Enables secure electronic collaboration with community services and providers.

Patient Engagement
Quality Improvement-RN:
Increase contact rates with better access to current demographic information. Improve engagement and coaching with a more complete picture of medical history including test results and filled medications.

Staff Satisfaction
Director:
Reduce level of effort including phone and fax tag to obtain a patient medication history information. Enable better patient engagement with a greater ability to know and discuss details the patient believes should be known as a member of care team.
CORRECTIONAL HEALTH CONTINUITY OF CARE
Improving Intake Process

THE CHALLENGE

Lack of timely and complete medical histories can lead to fragmented health care delivery and delays in treatment for individuals in the correctional health system.

Inaccurate or incomplete information for identifying and treating underlying health conditions can lead to increased costs and poor patient outcomes.

Complete medical history information is not always readily available and can require a manual process of multiple phones calls and faxing to receive accurate medical information.

BENEFITS:

Care Delivery
Correctional Health Provider/Nurse:
Provides immediate and expanded access to community medical history data to support with intake processing. Allows for more efficient and better coordinated care, potential health care cost savings, and improvements in both care delivery and safety.

Transitions of Care
Correctional Health Patient:
Assists with transitions of care for patients seen by outside community providers back to the correctional health setting by providing an accurate medical history information.

Creates better collaboration with the community providers resulting in safer transitions post incarceration.

Patient Satisfaction
Correctional Health Patient:
Enhances patient satisfaction by enabling correctional health staff to more quickly identify chronic medical conditions.

Staff Satisfaction/Workflow Efficiencies
Correctional Health Staff:
Improves staff satisfaction by eliminating the phone and fax process to obtain a patient medical record and results.
Enables quick access to medical history and creating better care or treatment plans.