

Post-acute authorization:

A feature in CarePort[®] Care Management

Prior to a patient being discharged and transferred to a post-acute provider, a payer authorization may be required. The post-acute authorization feature in **CarePort[®] Care Management** can expedite and manage the payer authorization process, reducing avoidable delays and subsequent denials for a patient's admission.



Streamline workflows for all post-acute authorization requests

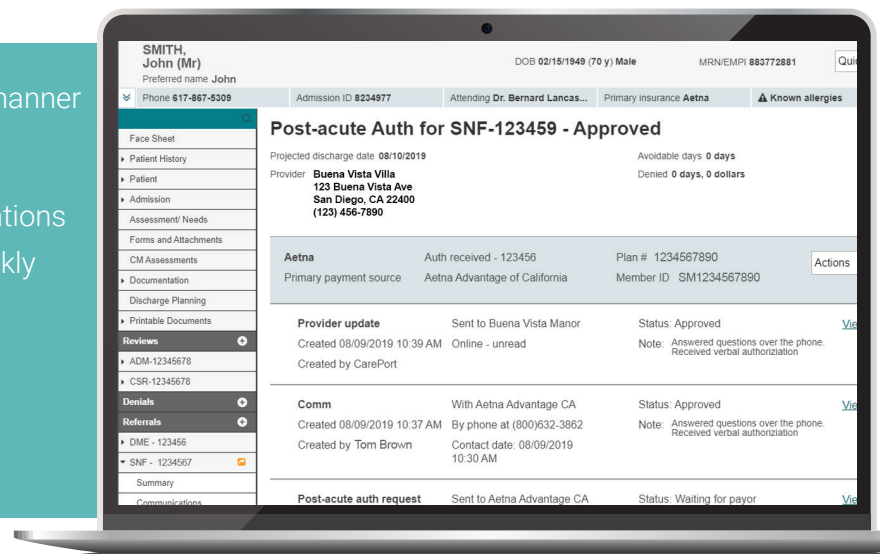


Improved visibility into your post-acute authorizations



Automatic notifications to payers and post-acute providers

- Obtain **post-acute authorization** in a timely manner before discharge, **reducing avoidable days**
- A **centralized location** to view all post-acute authorization requests and payer communications
- **Identify post-acute authorization status** quickly and efficiently
- **Leverage the address book** functionality for organized communication with payers
- **Easy documentation** to send to payers and providers



The screenshot displays the CarePort interface for a patient named SMITH, John (Mr). The interface shows a sidebar with navigation options like Face Sheet, Patient History, Patient, Admission, Assessment/Needs, Forms and Attachments, CM Assessments, Documentation, Discharge Planning, Printable Documents, Reviews, Denials, Referrals, and Summary. The main content area shows a 'Post-acute Auth for SNF-123459 - Approved' status. It includes details such as the projected discharge date (08/10/2019), provider (Buena Vista Villa), and payer (Aetna). A table lists communication events, including a provider update and a communication with Aetna Advantage CA, both with 'Approved' status. At the bottom, a 'Post-acute auth request' is shown with a status of 'Waiting for payor'.

Track key metrics

- Provide reporting capabilities in a centralized location
- Understand staffing needs to support this workflow
- Perform analysis on payers' responsiveness

Streamline requests

- Streamline workflows with a centralized location for all post-acute authorization requests
- Eliminate triple documentation to communicate the patient's post-acute authorization status

Communicate with payers and providers

- Differentiate between post-acute authorization communications and acute authorizations with payers

View timeline progression

- View all user activity from the first time a post-acute authorization request is sent to the payer all the way to when a user documents the approval and a notification is sent to the provider