

HM HCS Bulletin

Issue 3

How CarePort Technology Is Transforming Transitions in Post-Acute Care

Transitions to post-acute care (PAC) have long been a challenge in health care. Physicians and patients often lack the information they need about PAC providers to make timely, informed decisions. Additionally, PAC providers lack information about the patients transitioning to their care.

In 2013, CarePort Health, a care transitions software company, set out to address these issues. “We realized that people could get more information about a hotel or restaurant halfway around the world than the skilled nursing facility down the street,” said Lissy Hu, MD, MBA, founder and CEO of CarePort.

Their initial software solution, CarePort Guide, helps patients make informed decisions about PAC care. CarePort also offers additional solutions, like CarePort Connect, that aid in all aspects of care coordination.

How HM Home & Community Services (HMHCS) Uses CarePort Solutions

The goal is to transform home and community care by improving transitions of care across the continuum. For HMHCS, CarePort Guide and CarePort Connect offer a way to achieve that goal. In 2018, HMHCS helped Allegheny Health Network (AHN) by implementing CarePort solutions. Before using CarePort’s solutions, AHN did not have a comprehensive and interoperable data source to quickly identify transitions of care, according to Alex Brennsteiner, manager of network performance for HMHCS.

“CarePort is a technology solution that provides primary care providers throughout AHN’s clinically integrated network (CIN) to receive an automated and comprehensive feed of a patient’s transitions of care in real time,” Brennsteiner said. With CarePort in place, AHN’s CIN has experienced an almost 50 percent increase year over year in its ability to successfully coordinate patient transitions.

Here are the ways HMHCS has seen CarePort Guide and CarePort Connect improve PAC transitions for hospitals, patients, and providers.

Gives Patients Informed Freedom of Choice for Post-Acute Care

CarePort Guide delivers an electronic provider database to hospitalized patients who need continued medical care, either at home or in a SNF/LTAC/IRF. AHN case managers are using CarePort Guide to improve patients’ freedom of choice. Families and case managers view each provider’s clinical capabilities and preferred network status to make an informed decision about PAC.

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“Patients and families can see valuable information about preferred PAC providers,” Hu said. “With these providers, patients don’t have to take a chance. They can count on coordinated, in-network care and the quality they’ve come to expect from their health plan.”

CarePort Guide’s success, according to Brennsteiner, relies on the accuracy of providers’ profiles. “Facilities we work with have made Guide successful by their diligence in updating their profiles,” he said. “Most providers in the network update their Guide profiles two to three times per week.” These regular updates benefit both patients and the caseworkers recommending PAC facilities.

Provides Post-Acute Care Provider Availability in Real Time

Case managers no longer need to call multiple PAC providers to find available care for their patients. PAC profile updates in CarePort Guide appear in real time so there is no delay in transitioning patients to the next level of care.

For many hospitals, this information is proving to be extremely helpful during the COVID-19 pandemic. Hospitals can quickly see which PAC facilities are accepting COVID-19 patients. They can see who has beds available, whether those beds are designated for men or women, and the capabilities of those providers.

“There are sections within each profile where facilities can note if they have active COVID-19 within the building or are willing and able to accept a COVID-19 patient,” Brennsteiner said. “Providers can list out for 72 hours what their projected bed availability will be.” These details are invaluable in situations like the COVID-19 pandemic, when hospital space may be limited.

Facilitates Smooth Patient Transitions of Care

To assist AHN’s CIN in sharing health information and improving transitions, HMHCS relies on widespread integration of CarePort Connect. “Working with CarePort, we were able to integrate over 100 skilled nursing facilities (SNFs) throughout western Pennsylvania,” Brennsteiner said. “That accounts for approximately two-thirds of all facilities across western Pennsylvania.”

CarePort Connect integrates with acute and post-acute electronic health records (EHRs) and health plan information, pushing the admission, discharge, and transfer (ADT) feed from the hospital to the PAC provider. Connect may also pull in the patient’s admitting diagnosis for providers, offering a full picture of the patient entering their care.

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"Instead of data from various sources being siloed or isolated, PAC providers have access to information from the hospital and the health plan," Hu said. "Having that information helps providers create a comprehensive and holistic picture of the patient transitioning to their care."

Updates Primary Care Providers Automatically

Hu recognizes that the transition out of PAC is just as important as the transition into that care. "Any time transitions in care happen, it's an opportunity for patients to slip through the cracks and for errors to occur," she said.

Using CarePort Connect, providers ensure that each patient's care continues seamlessly. Physicians are alerted immediately when a patient is discharged from a PAC. This system helps to reduce readmissions by facilitating follow-up appointments, services, and medication.

"Physicians can reach out to patients in a timely fashion, because they know when a patient transitions between levels of care," Hu says. "When health networks can coordinate a patient's care, it naturally improves the patient's experience."

How to Get the Most Out of CarePort

HMHCS is here to assist you in using CarePort solutions:

- CarePort Guide: Your CarePort Guide profile should be actively maintained and updated two to three times a week. If you don't already have a CarePort Guide profile, we can help you create one.
- CarePort Connect: If you are within the AHN care network and have not yet integrated with CarePort Connect, let us help you with that process.

For all assistance with CarePort solutions, reach out to Alex Brennsteiner at alex.brennsteiner@hmhcs.com.