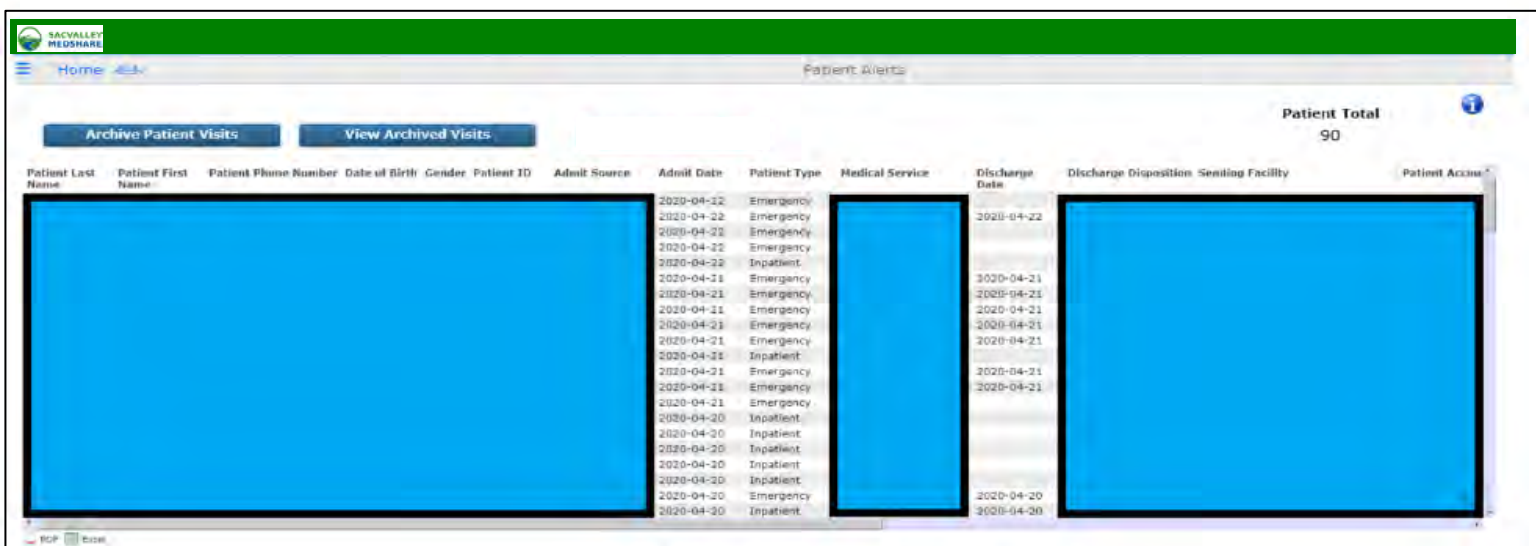


Know when your patient has a visit somewhere else in real-time!

Starting in Spring of 2021 (twelve months after the publication of the final rule), CMS's Medicare CoPs for hospitals and CAHs will require that they send electronic patient ADT event notifications to other health care facilities or community providers.

Alerting reduces readmissions (inside and outside of your system) and avoidable ED visits, improves the quality of care for at-risk patients during transitions of care, and reduces overall healthcare costs.

- The AcuteAlerts notification includes the patient's name, the treating provider's name, sending institution's name and admit, transfer and discharge date and time, meeting CoP requirements.
- The AcuteAlerts is sent electronically to the patient's care provider/practice, applicable post-acute care provider, or other providers identified by the patient.
- Provider(s) are notified by email that they have received an AcuteAlerts for their patient. They are directed to a secure website to view the patient information. The Admission, Discharge and Transfer (ADT) feed from the hospital is utilized to electronically identify patients and alert their providers.
- AcuteAlerts provides the alerts in near real-time by leveraging existing capabilities in the SacValley MedShare health information exchange platform.
- AcuteAlerts inform transitions of care in clinical workflow, so care teams can proactively engage and monitor patients after they are discharged from the hospital or admitted to an ER.
- Alerts can be delivered to a patient's established PCP, established primary care practice group, or other practitioners/groups identified by the patient as primarily responsible for his or her care.



Patient Last Name	Patient First Name	Patient Phone Number	Date of Birth	Gender	Patient ID	Admit Source	Admit Date	Patient Type	Medical Service	Discharge Date	Discharge Disposition	Sending Facility	Patient Account
							2020-04-22	Emergency					
							2020-04-22	Emergency					
							2020-04-22	Emergency					
							2020-04-22	Emergency					
							2020-04-22	Inpatient					
							2020-04-21	Emergency					
							2020-04-21	Emergency					
							2020-04-21	Emergency					
							2020-04-21	Emergency					
							2020-04-21	Emergency					
							2020-04-21	Emergency					
							2020-04-21	Emergency					
							2020-04-21	Emergency					
							2020-04-21	Emergency					
							2020-04-21	Emergency					
							2020-04-21	Emergency					
							2020-04-21	Emergency					
							2020-04-20	Inpatient					
							2020-04-20	Inpatient					
							2020-04-20	Inpatient					
							2020-04-20	Inpatient					
							2020-04-20	Inpatient					
							2020-04-20	Inpatient					
							2020-04-20	Emergency					
							2020-04-20	Inpatient					