

BETTER CARE THROUGH SMARTER CLINICAL ENGAGEMENT.



DATA-DRIVEN PREVENTIVE ENGAGEMENT.

CARE GAPS

THE COST OF GAPS

One of the challenges faced by healthcare organizations and networks is identifying care gaps and managing risk-inducing factors. Care gaps are costly, they compromise health outcomes and limit an organization's ability to properly manage chronic conditions and treat acute illnesses.

Organizations dedicate valuable resources to closing these gaps.

Physicians and staff spend an average of 15 hours per week closing gaps in care and satisfying quality measures, while provider organizations spend an average of \$40,000 per physician per year to satisfy their quality initiatives—and that cost is expected to go up due to the prevalence of risk-based contracts.*

Data-driven preventive engagement strategies provides a proactive solution to automatically identify and reconcile care gaps.

CLINICAL RISK FACTORS

UBIQUITOUS DATA

CLOSING THE GAP

Data-driven preventive engagement allows health care organizations to reconcile gaps in care and implement year-round strategies to maximize preventive service opt-in.

Giving healthcare organizations the capability to dynamically identify care gaps and potential risk is an invaluable resource in improving health outcomes and lowering overall care costs.

Ubiquitous clinical data points from EHRs and clinical applications provide a wealth of discoverable data that can be leveraged in identifying care gaps and potential at-risk patients in a population.

CLOEE

PROACTIVE CLINICAL ENGAGEMENT

Novatross provides a tool to implement comprehensive, data-driven preventive engagement strategies. Our Clinical Outreach and Engagement Engine (CLOEE), identifies gaps in care and potential risk factors in a patient population. CLOEE's built-in logic analyzes various clinical data points from EHRs and clinical applications to identify gaps in care and stratify at-risk patients.

CLOEE is a full cycle engagement tool, it not only detects potential risk factors and care gaps it also implements ad-hoc patient engagement campaigns. CLOEE uses dynamic communication protocols to reconcile care gaps and mitigate potential clinical risk.

LEVERAGING UBIQUITOUS CLINICAL DATA



DISCOVERABLE CLINICAL DATA

CLOEE's logic engine is able to analyze a broad spectrum of clinical data points to identify potential risk factors and care gaps. Identifying these factors allows physician networks to implement clinical quality measures that align with the organization's overall performance objectives.



CLINICAL RISK CRITERIA

Clinical quality measures are directly tied to organizational and network performance. CLOEE allows organizations to prioritize which measures to aggressively implement in order to reconcile clinical risks, through comprehensive preventive service engagement.



PREVENTIVE ENGAGEMENT

The most effective strategy to reconciling care gaps is face-to-face contact. Preventive service campaigns are geared towards bringing the patient in for recommended screenings. CLOEE is the optimal tool for maximizing preventive service care and implementing evidence based measures.

FULL CYCLE ENGAGEMENT

DEFINING RISK CRITERIA

Healthcare organizations and networks place emphasis on pertinent measures that best satisfy their organizational goals. The first step in the CLOEE engagement cycle is defining risk criteria and target care gaps e.g congestive heart failure, hypertension and hypotension, diabetes, etc. Using clinical data points, CLOEE identifies patients who fall within the determined risk criteria. CLOEE then automatically launches engagement campaigns geared at reconciling risks with evidence-based interventions.

CLINICAL DATA POINTS

CLOEE's open connectivity supports seamless integration with EHR's and clinical applications. These integrations allow CLOEE to extract an expansive range of clinical data points. These data points include problem lists, labs, dfts, etc, which give an accurate snap-shot of applied and pending treatments and procedures. Analyzing clinical data points allows CLOEE to identify care gaps and potential risk conditions.

PATIENT OPT-IN

CLOEE's open connectivity supports dynamic patient enrollment into preventive engagement campaigns. CLOEE uses calculated risk criteria and imminent care gaps to stratify patients into ad-hoc preventive service campaigns. Each engagement campaign is configured using organizational risk reconciliation and intervention strategies.

PATIENT OUTREACH & ENGAGEMENT

The most effective patient engagement occurs in an exam room. Face-to-face patient engagement surpasses mobile apps, patient portals, social media, or surveys in efficacy. CLOEE is developed to maximize face-to-face clinical encounters. CLOEE's features and protocols are built to subsequently lead to that face-to-face interaction with healthcare professionals. Automating and personalizing this process improves organizational efficiency by proactively identifying risk and care gaps, and implementing evidence based reconciliation measures.



SMARTER CLINICAL ENGAGEMENT

Let your clinical data, drive preventive service screenings & treatments. our predictive Clinical Outreach and Engagement Engine (CLOEE™) uses data from your EHR to identify care gaps, potential at-risk patients and generate subsequent dynamic, ad-hoc, preventive service clinical outreach campaigns.