



Solutions for Clinical Management

Our solutions improve clinical accuracy for health plans and other Home & Community Based Services organizations providing Managed Long Term Services and Supports. We have carefully developed tools that review comprehensive assessments and task based tools for clinical inconsistencies. We configure these tools for each state market to appropriately reflect state specific regulations.

ASSESSMENT ANALYZER

Relational Review – Compare the answers of questions where performance or capacity may be impacted by a shared physical or cognitive impairment

Diagnosis Code Lookup and Flag – Look up ICD-10 codes based on text description; Flag codes not adhering to ICD-10 standards

Flag Quality Issues – Flag quality of care issues where a quality intervention may be required to improve outcome measures

Flag Diagnosis Issues – Flag questions that are not completed as expected based on the documented ICD-10 codes

Medication Review – Compare a member's medication list to disease responses to identify any diagnoses gaps

TASKING VALIDATOR

Discrepancy Review – Review task based assessment against comprehensive assessment to identify differences

Set Guidelines – Set internal plan guardrails for personal care or other services based on members level of functional impairment

Errors in Authorization – Automatically check for errors in service hour calculations

Identify Service Changes – Identify members where service levels have changed and flag whether a new comprehensive assessment should be completed based on change in condition

Assessment Review - Capability to track review process and support communication through compliant email notifications

ABOUT QCSS

Our mission is to integrate domain expertise with technology solutions to help make Managed Long Term Services and Supports successful. We seek to enable health plans and providers to improve health outcomes for their vulnerable populations and to thrive in a value-based healthcare system.

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