

# NETSMART

FOUNDED IN 1968

BUILDING TOMORROW'S SOLUTIONS TODAY

1000+ ASSOCIATES



500,000 PROVIDERS  
24,000+ CLIENT ORGANIZATIONS  
25 MILLION+ CONSUMERS

## ADVANCING HEALTH & HUMAN SERVICES:


  
\$209M+ in MU Funding Achieved

  
1M+ CareConnect™ Transactions

  
\$27B+ Billed

  
9M+ e-Prescriptions Written

  
7M+ Treatment Plans Created

  
54M+ Progress Notes Written

2015 Statistics

#1

IN HEALTH & HUMAN SERVICES



SOLUTIONS FOCUSED  
— ON DRIVING —  
HEALTHCARE FORWARD



Behavioral Health



Public Health



Home Health and Hospice

COMMUNITIES WE SERVE

Child & Family Services



Addictions Treatment



Intellectual & Developmental Disabilities



# What is CAREMANAGER?

## THE SOLUTION COMPONENTS



# CAREMANAGER

- Enables Direct Data Entry & Collection from Providers
  - ✓ Assessments, standard data sets, claims, EMR clinical data,
- Supports automated exchange of data via industry standards or custom interfaces
- Permissions based access enabling aggregation of data set
- Analytics and reports can be generated via the system or imports to other analytics systems
- Foundational system that enables support of many coordinated care and value based care models
  - ✓ Health Homes, Transitions of Care, Child Welfare Models, Data Aggregation & Assessments

Client List

[+ New Client](#)

Search all clients...

Caseload

Recent

Client Search

Assigned

Name Risk



**Adams, Jack**

DOB: 07/04/2008 Client ID: 157



[Chart](#) [Notes](#)



**Anderson, Paula**

DOB: 02/11/1950 Client ID: 161



[Chart](#) [Notes](#)



**Anderson, Tom**

DOB: 07/01/1971 Client ID: 101



[Chart](#) [Notes](#)



**Baker, Bill**

DOB: 08/01/1979 Client ID: 153

[Chart](#) [Notes](#)



**Brown, Todd**

DOB: 01/10/1952 Client ID: 102



[Chart](#) [Notes](#)



**Craddock, Bill**

DOB: 09/12/1973 Client ID: 142



[Chart](#) [Notes](#)

Dashboard

Appointments

Alerts

**5** ER Visits

**2** Hospitalization

**0** Medicaid Plan Expiration

**0** Metabolic Screening Metric Past Due

**0** Metabolic Screening Metric 30 Days Expire

**3** Missed Medication Refills

**0** Arrests

**0** Missed Appointments

**5** Potential Gaps In care/Other Health Factors


Tasks

Filter by  Include Status


Due Date ▾	Task	Contact(s)	Activity ⇅
02/03/2014	Follow up on contact note.	Bill Baker (153)	<a href="#">Contact Note</a>


**Adams, Jack**  
 Client ID: 157    DOB: 07/04/2008    Status: **Enrolled**

 Alerts **1**

 Tasks **1**

 Coordination

 Notes

 Plan

Episode: 1 - Current

- Facesheet**
- Demographics
- Programs
- Claims
- Consent Forms
- Eligibility
- Assessments
- Problems
- Care Coordination
- CareManager Plan
- Notes
- Social Support Contacts
- Physical Health
- Health Factors
- Hallmark Events
- Documents
- CareConnect

### Facesheet

- Alerts**
- 0 ER Visits
  - 1 Hospitalization
  - 0 Medicaid Plan Expiration
  - 0 Metabolic Screening Metric Past Due
  - 0 Metabolic Screening Metric 30 Days Expire
  - 0 Missed Medication Refills
  - 0 Arrests
  - 0 Missed Appointments
  - 0 Potential Gaps In care/Other Health Factors

✓ **Tasks**

Filter by All My Tasks Include Status All Open
Search Tasks..

### Demographics

Primary CIN: AA11111A

#### Personal

**Name**  
 Adams, Jack

**Gender**  
 Male



<b>Date of Birth</b>	<b>Age</b>
07/04/2008	7

**SSN**  
 548-97-9879

**Primary CIN**  
 AA11111A

Identifiers

Identifier	Type



Adams, Jack  
Client ID: 157 DOB: 07/04/2008 Status: Enrolled

Alerts 1

Tasks 1

Coordination

Notes

Plan

Episode: 1 - Current

Assessments

+ New Assessment + New Task

- Facesheet
- Demographics
- Programs
- Claims
- Consent Forms
- Eligibility
- Assessments**
- Problems
- Care Coordination
- CareManager Plan
- Notes
- Social Support Contacts
- Physical Health
- Health Factors
- Hallmark Events
- Documents
- CareConnect
- Discharge

- + Acuity Score
- + AUDIT
- + CAM
- + Comprehensive
- + CPA/CSS
- + Crisis/Relapse Plan
- + DAST
- + Eligibility Screening
- + FACT-GP
- + FLACC Behavioral Pain
- + GAD-7
- + General Assessment
- + HAP Client Introduction

End Date   Filter by All

Assessment Name	Type	Assessment Score	Assessment Status	Entered By	Action
PAM		0.4		Janet Gibson	<a href="#">View</a>
HAP Client Introduction				Janet Gibson	<a href="#">View</a>
General Assessment	CANS-NY	99		Janet Gibson	<a href="#">View</a>
General Assessment	AUDIT	Moderate		Janet Gibson	<a href="#">View</a>
General Assessment	PAM	Approaching		Janet Gibson	<a href="#">View</a>
General Assessment	Wong-Baker Faces Pain Rating Scale	Low		Janet Gibson	<a href="#">View</a>
PHQ-9		26		Janet Gibson	<a href="#">View</a>

Adams, Jack Client ID: 157 DOB: 07/04/2008 Status: Enrolled

Alerts 1

Tasks 1

Coordination

Notes

Plan

Episode: 1 - Current

Assessments

New Assessment New Task

Save Save & Close Cancel

- Facesheet
- Demographics
- Programs
- Claims
- Consent Forms
- Eligibility
- Assessments
- Problems
- Care Coordination
- CareManager Plan
- Notes
- Social Support Contacts
- Physical Health
- Health Factors
- Hallmark Events
- Documents
- CareConnect
- Discharge

Housing

5. How satisfied are you with your current living situation? ---

6. If currently homeless, are you on the street, living in a car, in a shelter, with a friend? [Text Area]

7. Do you want to remain where you are? ---

8. Do you feel safe at your current place? ---

If no, why? [Text Area]

If yes, what makes you feel that way? [Text Area]

If no, what makes you feel unsafe? [Text Area]

9. What needs to be around you to feel good about where you live? [Text Area]

10. How well do you know your neighborhood? Who do you know in your neighborhood? What places do you go to? [Text Area]

Common Selectors

Populations

Agency

Provider

Last Refreshed: 2/12/2016 13:39:06

From: 01/01/2015



To: 01/01/2016



Reset Date Range

#	Description	%	Managed Population	Goal
(i) NQF 0036	Asthma Medication Adherence (Adult)	78%	$\frac{7}{9}$	78% Goal: 70%
(i) NQF 0036	Asthma Medication Adherence (Youth)	78%	$\frac{7}{9}$	78% Goal: 70%
(i) NQF 0059	Blood Pressure Control for Diabetes (Adult)	40%	$\frac{2}{5}$	40% Goal: 65%
(i) NQF 0018	Blood Pressure Control for Hypertension (Adult)	17%	$\frac{1}{6}$	17% Goal: 60%



Back

Common Selectors

Populations

Agency

Provider

From: 01/01/2015



To: 01/01/2016



Reset Date Range

Last Refreshed: 2/12/2016 13:39:06

Asthma Medication Adherence (Adult) Measure Details

<p>Description</p> <p>% of patients 18-64 years of age who were identified as having persistent asthma and were appropriately prescribed medication during the measurement period.</p>	<p>Persons Flagged</p> <p>Persons flagged have a diagnosis of persistent asthma and are not currently prescribed a controller medication</p>	<p>Eligible Population</p> <p>Persons with at least one ED visit with asthma as the principle diagnosis OR at least one acute inpatient encounter with asthma as the principle diagnosis OR at least four outpatient asthma visits with an asthma diagnosis and two asthma medication dispensing events OR at least four asthma medication dispensing events. Excluded are persons with emphysema, COPD, cystic fibrosis or acute respiratory failure.</p>
<p>Managed</p>	<p>Intervention</p>	<p>Population</p>

Intervention

Key	Last Name	First Name	Gender	Age	County of Residence	Care Manager	Encounter Date	Result	Campaign
1130	Porter	Linda	Female	33	Jefferson	-	2015-05-31	No	None
1128	Carroll	Janice	Female	52	Jefferson	Christopher Walkin	2015-11-27	No	None

Campaign

- None
- Asthma Education
- Smoking Cessation
- Nutritional Education
- Medication Education

Submit

# CAREMANAGER INTEGRATION

## State Level Aggregation

## Quality Measures & Reporting

