

Responding to referrals via QuickCase

Many hospitals and health systems use **nH Discharge** to transition patients to other levels of care. When these organizations send you a referral, you will receive a one-page fax with QuickCase, which includes a patient-specific referral code and PIN. You also have the option to receive an email notification with the same information.

Your response matters

It is **critical** that you respond to referrals electronically via the QuickCase portal — and **not** via the phone. Calling to respond to referrals can create problems.



Disrupts the hospital workflow



Creates issues with data and hospital reporting



Hinders transparency and communication within the hospital

These instructions & subsequent declination definitions will help you respond and appropriately market your organization to patients and their care teams.

How does it work?

1. Go to **naviHealth.com/connect/quickcase** and select *Get Referral* or search online for “naviHealth QuickCase.”
 2. Follow the step-by-step instructions: Enter the one-time referral code and PIN. Then, verify your name, email address and facility name.
 3. Click *View Referral* to download and review the referral packet.
- The following steps are important**
4. Click **ACCEPT** or **DECLINE**
 5. If declining a referral, please select a reason for declination. A list of decline reasons can be found at the end of this document.

Your role is critical to the hospital's success with this workflow.

New Patient Referral From:
[Redacted]

To see this referral and respond:

1. Go to www.navihealth.com/connect/quickcase.
2. Enter:
Referral Code: y2480801166
PIN: 534515

This naviHealth QuickCase referral is a free service provided by naviHealth.

Referral Code: y2480801166
PIN: 534515

Copyright © 2022 naviHealth, Inc. All Rights Reserved.

QuickCase example fax

naviHealth QuickCase

Referral Type: Skilled Nursing (SNF)

Case Contact: Jane Beaton

Phone: 617 234-5678

Email: jbeaton@navihealth.com

Project: 617 234-5678

Decline Reason: [Redacted]

Accept

Decline

Want more features or mobile access?
800 446-9614

Our Essential Service includes referrals electronically or communication directly with the discharge staff. You must also be referred and will have access to ongoing care.

State: [Redacted]

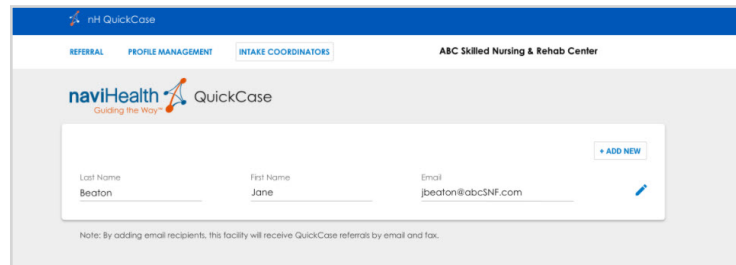
Support: [Redacted]

QuickCase portal

How do I receive email notifications?

1. Follow the first three steps from page one
2. Click the Intake Coordinator tab
3. Enter your organization's intake coordinator's email addresses

**Please note that you must receive a one-page fax from a referral partner to gain access to the email option. If you choose to receive emails, you will still receive a fax notification for new referrals and referral updates.*



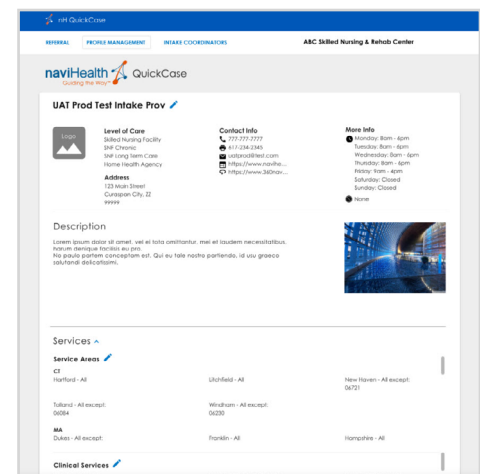
Intake Coordinator

Support patient choice with QuickCase

As a post-acute provider, the best way you can help patients make informed decisions is by keeping your provider profile up to date. This will allow patients and their care teams to have the most accurate understanding of the services you provide.

How do I update my profile?

1. Follow the first three steps from page one
2. Click the Profile Management tab
3. Select the pencil icon next to any subsection



Profile Management

Connect to the naviHealth network, anytime

If you decide you need an easier, more efficient workflow for managing referrals, you can connect to the naviHealth network with **nH Intake** at any time.

Simply email us at postacute@naviHealth.com to learn more.

Available decline reasons for naviHealth

- **Known with other agency/facility:** Patient currently has services with another known provider
- **No bed available:** No beds available to meet patient's needs
- **Limited staffing:** Provider declines referral request due to facility staff shortage
- **Limited equipment resources:** Provider declines referral request due to limited facility equipment
- **Hospital cancellation:** Referring hospital cancelled the referral
- **Patient too complex:** Declining provider cannot meet the patient's needs
- **Patient/family declined or refused care:** Patient's family has declined or refused care
- **No following physician:** No physician/LIP following the care of the patient post discharge
- **Does not meet admission criteria:** Patient does not meet declining provider's admission criteria
- **Level of functioning too high:** Patient does not qualify for the level(s) of care at the declining provider
- **Level of functioning too low:** Incorrect level of care for patient
- **Concern about transition to next level of care:** Declining provider has concerns of premature patient transition
- **No secure units available:** No "locked" units with continuous supervision available to address patient's needs
- **Noncompliant with agency/facility policy:** Patient does not meet the declining provider's policies
- **No home health order:** No physician/LIP order to support home health care
- **Payer not accepted:** Declining provider does not accept patient's payer
- **No payer source:** Patient does not have any insurance
- **Insurance denial:** Pre-authorization was denied for the level of care
- **Issue with cost of care:** Patient has an issue with the cost of care
- **Issue with cost of medications:** Patient has an issue with cost(s) of the medications
- **Bad debt/owes facility money:** Patient owes money (bad debt) to the declining provider
- **Out of service area:** Patient falls out of the declining provider's service area
- **Discharged to another facility:** Discharged patient to another provider in the naviHealth network
- **Behavioral/mental health concerns:** Behavioral/mental health concerns for this patient
- **Not homebound:** Does not need home services
- **Patient has expired:** Patient has expired
- **COVID-19:** Please select best option for COVID-19 declination