

Responding to Referrals via naviHealth 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 (“QuickCase”) with a patient-specific referral code and PIN.

Your Response Matters!

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

How Does It Work?

① Step One

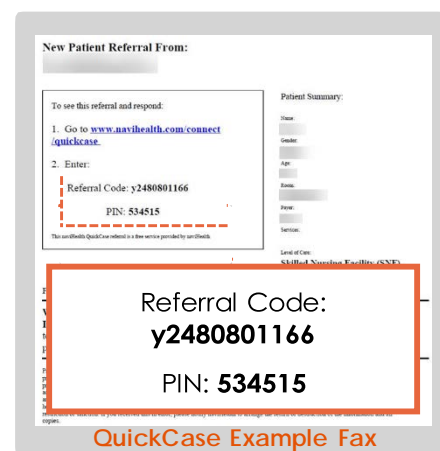
Go to naviHealth.com/Connect/QuickCase and select *Get Referral* or search online for “naviHealth QuickCase.”

② Step Two

Follow the step-by-step instructions - Enter the one-time referral code and PIN, then verify your name, email address, and facility name.

③ Step Three

Click **View Referral** to download and review the referral packet.



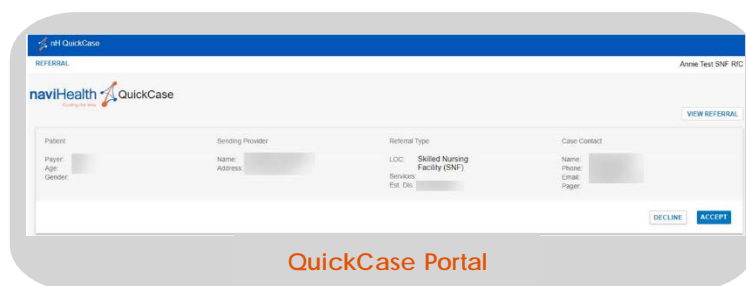
The following steps are important!

④ Step Four

Click **ACCEPT** or **DECLINE**.

⑤ Step Five

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!

Connect to the naviHealth Network, Anytime

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

Simply email us at ndminfo@navihealth.com to learn more.

Available Decline Reasons for naviHealth QuickCase

- **Known with Other Agency/Facility:** The patient currently has services with another known healthcare provider.
- **No Bed Available:** No beds that meet the patient's needs are currently available.
- **Limited Staffing:** The healthcare provider declines the referral request due to limited staffing at the facility.
- **Limited Equipment Resources:** The healthcare provider declines the referral request due to limited equipment at the facility.
- **Hospital Cancellation:** The hospital that generated the referral has now cancelled the referral.
- **Patient Too Complex:** The declining healthcare provider cannot meet the needs of this patient.
- **Patient/Family Declined or Refused Care:** The patient's family has declined or refused care.
- **No Following Physician:** There is no physician/LIP following the care of the patient post discharge.
- **Does Not Meet Admission Criteria:** The patient does not meet the declining healthcare provider's admission criteria.
- **Level of Functioning Too High:** The patient does not qualify for the level(s) of care provided at the declining healthcare provider.
- **Level of Functioning Too Low:** This is not the right level of care for the patient.
- **Concern About Transition to Next Level of Care:** The declining healthcare provider has concerns that the patient would be transitioned too early.
- **No Secure Units Available:** There are no "locked down" units available to address the psychological/cognitive needs of the patient with continuous supervision.
- **Noncompliant with Agency/Facility Policy:** The patient does not meet the declining healthcare provider's policies.
- **No Home Health Order:** There is no physician/LIP order to support home health care.
- **Payer Not Accepted:** The declining healthcare provider does not accept the referred patient's payer.
- **No Payer Source:** The patient does not have any insurance.
- **Insurance Denial:** Pre-authorization was denied for the level of care.
- **Issue with Cost of Care:** The patient has an issue with the cost of care.
- **Issue with Cost of Medications:** The patient has an issue with cost(s) of the medications.
- **Bad Debt/Owes Facility Money:** The patient is known to have bad debt/owes the declining healthcare provider money.
- **Out of Service Area:** This patient falls out of the declining healthcare provider's service area.
- **Discharged to Another Facility:** This patient has been discharged to another healthcare provider in the naviHealth network.
- **Behavioral/Mental Health Concerns:** There are behavioral/mental health concerns for this patient.
- **Not Homebound:** The patient does not need home services.
- **Patient Has Expired:** The patient has expired.
- **COVID-19:** Please select best option for COVID-19 declination.