MYSCRUBBER QA

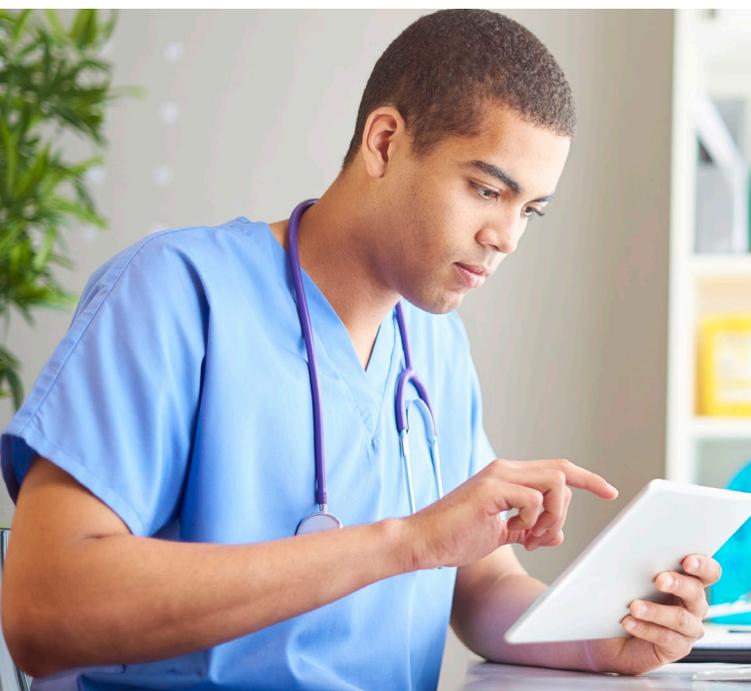# The expert solution to OASIS review and diagnosis coding.

Discover the powerful tool that can increase accuracy, maximize reimbursement and improve patient care.

Bringing accuracy and efficiency to OASIS review and diagnosis coding.

Current product

MyScrubber QA is a powerful tool that helps your organization complete comprehensive OASIS assessment reviews so you can improve performance, support CMS compliance, and follow best practices. Our automated, integrated internal scrubber identifies errors and inconsistencies both within and between OASIS assessments, and aligns with the patient's medications and plan of care. This eliminates the need for manual reviews and decreases the touch points between QA and the assessing clinician, shortening review time and improving OASIS submission times.

Our goal is to provide a solution that helps manage documentation accuracy and compliance while streamlining quality review processes. This empowers organizations to collect accurate patient care data, complete quality assessments, improve patient outcomes, and appropriately maximize reimbursement.

- Highlights alert severity for quicker prioritization and response.
- Identifies areas of impact: Process Measure, Avoidable Event, Reimbursement, Potential.
- Mismatch between OASIS/Plan of Care, VBP Measure, STAR Rating, OASIS/Coding Error, HHC, Regulatory Alert, Show if Improvement or Decline.
- Ability to make recommendations based on scrubber results and to see impact of recommendations.
  - Ability to see financial impact of recommendations – can recalculate as recommendations are made.
- Quick access to key patient information.
- Ensures that your agency is regulatory compliant and submitting clinically accurate OASIS documentation.
- Decreases QA Review time, thereby facilitating increased staff.
- Availability of day-to-day reporting.
- Analytics now available in MyAnalytics.

Key benefits

- Integrated with both mobile point-of-care and MyScrubber QA.
- Provides consistent, timely reviews.
- MyScrubber Clinical edits are integrated in real time into the QA Review process.

User workflow

Task list/dashboard: This main landing page will display those assessments that are "Available for Review." Reviewers can filter this view to support their workflow and complete timely reviews, as well as quickly see Completion and Received Dates, Assessment Type, Clinician Name, Patient Name and MR Number, and Status.

Integrated review process: The scrubber results are integrated into the review process. The reviewer has multiple options to filter the review display screen to support their workflow, and has access to pertinent patient information to support them in making the most appropriate recommendations—including:

- **Financial impact:** Users can view financial information based on clinician answers and re-calculate as the reviewer makes recommendations to see the impact to the agency's reimbursement.

- **Additional functions toolbar:** In the top right of the display screen, the user has access to additional functions to support and complete their review process.

- **Alerts by severity:** The user has the ability to filter and review alerts by severity or by clinical category.

- **Areas of Impact:** Areas of Impact are identified with icons for each alert to inform the reviewers how the alert impacts key areas for the agency.

- **Completing a recommendation:** When completing the review, the alert will be color-coded by severity and show the areas of impact in the header. The user will see the complete alert message and the clinician's original response. They can then enter a Recommendation Note.

- **Medications/diagnoses:** To ensure the reviewer is making recommendations based on all pertinent patient data, the user will also be able to review any active medications or diagnoses entered for the patient.

- **Day-to-day reporting:** The Report tab helps the review team manage their day-to-day workflow and complete their reviews timely. There are multiple filters to quickly see status and progress. As reviews are completed, data is fed to our Analytics department for additional reporting.

Trusted technology for accurate assessment reviews and diagnosis coding.

Accuracy and efficiency of OASIS review and coding of diagnoses are critical to obtaining quality outcomes and maximum reimbursement. Home health agencies need to ensure that there are consistent OASIS assessment reviews and that there is timely turnaround with the QA/Review process to be compliant and to meet regulatory submission guidelines. Our solutions ensure compliance while focusing on quality and results that lead to profitability.

MatrixCare®
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Call 866.469.3766 to learn more, or visit matrixcare.com