

CASE MANAGEMENT & UTILIZATION REVIEW



ENHANCE QUALITY CLINICAL OUTCOMES COST EFFECTIVELY

Managing numerous requests for medical treatment within a healthcare entity can be a challenge with big implications for cost and effectiveness. Finding a value-based approach to utilization reviews that approves the right, evidence-based treatments is critical. Managing unique cases and appeals process management through a strong provider network puts even more stress on your organization.

Harmony Healthcare's Case Management and Utilization Review solutions support the physician and interdisciplinary teams in the provision of patient care with the underlying objective of enhancing quality of clinical outcomes and patient satisfaction while managing the cost of care across the continuum and providing timely and accurate information to payers.

Our solutions will help you:

- Provide optimum quality of care
- Manage continuity and transition of care efficiently
- Reduce readmission risks
- Eliminate avoidable days
- Enhance claims management
- Improve organizational performance

CASE MANAGEMENT

Our Case Management solutions are a collaborative process of assessment, planning, facilitation, care coordination, evaluation, and advocacy for options and services to meet an individual's comprehensive health needs while ensuring that available resources are being used in a timely and cost-effective manner for both patient and the reimbursement source.

LEADERSHIP

CASE
MANAGEMENT

UTILIZATION
REVIEW

SOCIAL WORK

Our Case Management solutions include expertise in the following areas:

- Comprehensive and holistic patient assessment
- Facilitation of discharge transition to the appropriate level of service
- Alignment and coordination of post-discharge needs with the physician treatment plan and within the patient benefit structure
- Development, implementation, and ongoing monitoring of an individualized plan of care
- Licensed social work staffing

UTILIZATION REVIEW

Our Utilization Review solutions assist health plans by providing a multi-faceted approach to managing requests for medical services ensuring the services are medically appropriate and necessary using evidence-based clinical guidelines and physician input. While maximizing the quality and cost efficacy of healthcare services, our Utilization Review solutions keep your best interests at heart by ensuring expert clinical guidelines are followed and patient safety is always put first. Our Utilization Review solutions include expertise in the following areas:

- Medical necessity reviews
- HEDIS solutions
- Prior authorization, concurrent, and retrospective reviews
- Documentation and tracking of peer-to-peer conversations, reconsideration reviews, and multi-level appeal processes

Harmony will discover, develop, and deliver the finest talent available in case management and utilization review nationally enabling healthcare entities to enhance quality clinical outcomes cost effectively.

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Harmony Healthcare, a human capital management company, provides staffing and consulting solutions in Revenue Cycle Management and Population Health to a diverse range of healthcare organizations nationwide. The company's portfolio delivers quality solutions to empower healthcare organization success, enhance clinical and financial outcomes, and enable the transition to value-based healthcare.