

MedCompass

Issues Management Module



- **Benchmark and track member/provider feedback for patient and quality improvement.**
- **Automate Appeals & Grievances and Fair Hearing Request.**
- **Measure and improve incident management performance.**

Issues Management for Payers and Providers

Appeals and Grievances

Streamline appeals and grievances to speed up approval .

Fair Hearings

Escalate and process a Fair Hearing Request.

Benchmarking

Get data and analytics to measure incident management performance against industry standards.

Complete Care for the Patient

MedCompass delivers all Care Management functions in one system. Users benefit from a single source of truth to coordinate a patient's care.

The platform brings utility and efficiency by creating a member-centric solution for managing services and procedures.

MedCompass supports both manual and digital authorizations creating a centralized location eliminating the need for other external systems. The configurability streamlines the user's experience and automates unique client workflows, allowing users to optimize resources. Decisions, data, and care are seamlessly coordinated with all clinicians.

Built for Today and Tomorrow

MedCompass is a highly configurable, population health management platform. While the configuration is adaptable to meet client's needs, there are a series of clinical and user best practices that are implemented through the base configuration product design.

- Based on clinical best practices to optimize performance improvement.
- Provides complete interoperability with most EMR systems.
- Quickly deployed through standard implementation, training, and onboarding.

Benchmark, track, and improve procedural processes with integrated healthcare case management software.





The primary goal of MedCompass is to protect and secure client data. Embedded with the highest global standards, the HITRUST certification helps to achieve this goal by validating our platform is compliant to those benchmarks.

HITRUST
CSF Certified

Population Health Management Prevalidation is designed to help health plans and other organizations identify health IT solutions that alleviate or increase the efficiency of administrative tasks to meet Population Health Management requirements in Health Plan Accreditation.



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