



Central Neighborhood Health Foundation Uses Manifest MedEx To Improve Post- Discharge Follow-Up and Care for Underserved Communities

Founded in 1967, Central Neighborhood Health Foundation (CNHF) is a network of Medicare-certified, federally qualified health centers (FQHCs) that provide care in medically underserved areas (MUAs) in Los Angeles County and the Inland Empire. The mission of CNHF is to minimize disparities in healthcare access and outcomes by providing superior-quality, patient-centered healthcare through an integrated delivery system for the underserved and vulnerable multi-ethnic communities in the State of California. The network of health centers strives to provide culturally competent care to both insured and uninsured patients.

CNHF serves vulnerable and underserved populations who face a multitude of barriers in connecting with primary care and instead utilize the ER for issues that could have been addressed by the clinic. Affiliated with 17 hospitals, CNHF serves as a resource for their patients to coordinate timely follow up care. This can make it difficult and time-consuming for staff to track medical records and patient medical histories, including recent hospital visits, resulting in delayed care, even at the time of the visit. It is particularly challenging for vulnerable patients who may experience greater difficulties in returning for additional appointments (e.g., transportation, time off work). CNHF needed more timely access to longitudinal medical records to efficiently track and treat their patient population and achieve their mission.

Solution

To help their patients get the timely care they need, CNHF joined the Manifest MedEx (MX) nonprofit health data network in 2021 to access its longitudinal records through MX Access, as well as admission, discharge, transfer (ADT) notification services through MX Notify.

MX Access has enabled CNHF to provide better and more timely care for the patients they see, as well as save time and resources in gathering patient records – time and resources that can be better allocated to treating patients. Care coordinators report that they can access approximately 90 percent of the records from area hospitals on the MX platform. In addition to using the clinical data, CNHF obtains current contact information in the records and cross references the details against what they have in the patient's chart.

With MX's ADT alerts, CNHF's care teams are notified when their patients are discharged and can promptly schedule patients for post-discharge follow-up visits. This has reduced their readmission rates by half since the start of 2022, based on reporting provided by Inland Empire Health Plan (IEHP).

CNHF has also used MX Notify and MX Access to identify trends among patients with high ER utilization and repetitive diagnoses, indicating that the patient is not receiving the appropriate treatment for their chronic conditions. When these situations arise, care coordinators will flag this information for the provider to intervene during the patient's follow-up visit, building trust with the patients who are frequently utilizing the ER by consistently following up post-discharge and helping to manage costs for those with chronic conditions.

Joining MX has enabled CNHF to provide better, timely, and more culturally competent care to close health disparities, save time in collecting patient records, and reduce costs associated with readmissions and chronic care.

For more information on how federally qualified health centers can save time collecting patient records, improve post-discharge follow-up, and reduce readmissions, please visit us at www.manifestmedex.org or contact us at info@manifestmedex.org.

"The ease of obtaining records all in one place saves a significant amount of time and helps provide better care for our patients."

-Jannette Ruz, Transitional Care Coordinator, Central Neighborhood Health Foundation

