

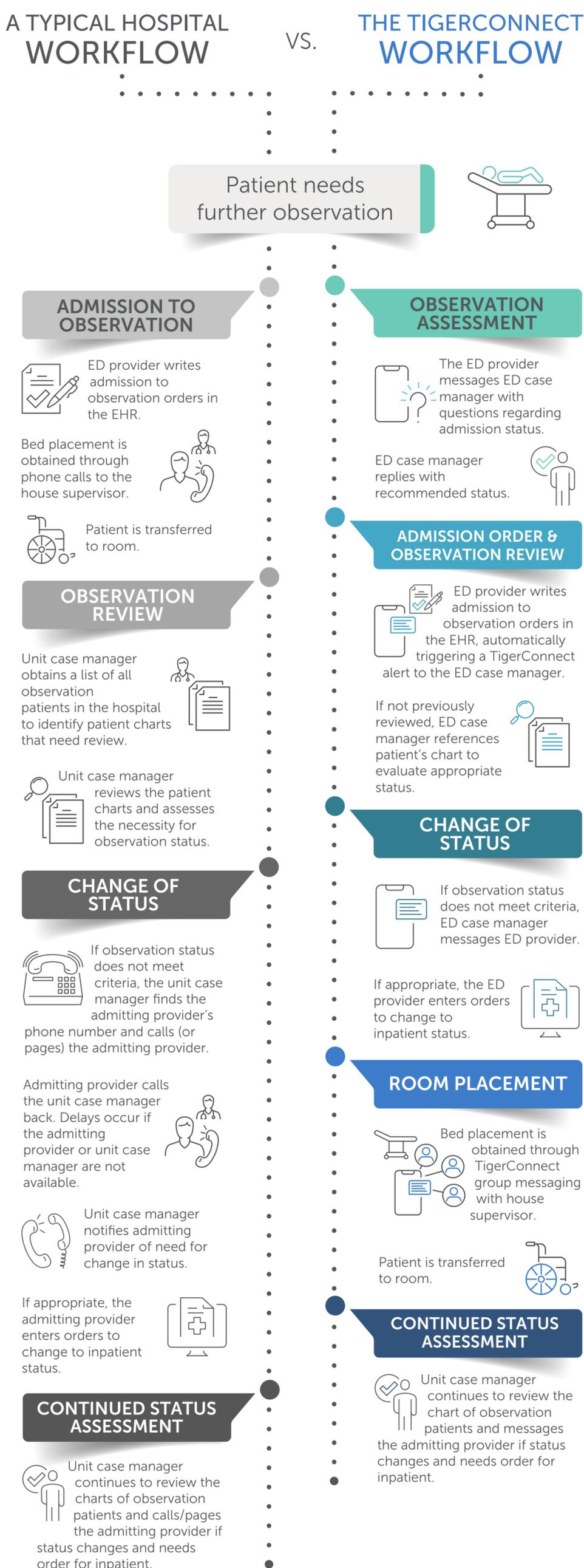
The True Cost of High Observation Rates

When deciding whether to admit a patient to observation or inpatient care, determining the correct status is important—if a patient is admitted to observation when they should have been admitted to inpatient care, hospitals can lose out on \$5,950 in revenue.¹

In order to determine the correct status, the emergency department (ED) provider needs to collaborate with the case manager. But if the case manager is not stationed in the ED, the provider will often have to make admission decisions on their own, which increases the risk of incorrect patient status upon admission. Admitting a patient with an incorrect status can lead to lost revenue through decreased reimbursement.

Communication gaps between the provider and case manager have repercussions for the patient, too. Delays in correcting a patient’s admission status can lead to higher medical bills and insurance denials.

See how real-time messaging with TigerConnect enables the ED provider and ED case manager to easily discuss the patient and determine appropriate status prior to admission.



A TYPICAL HOSPITAL WORKFLOW

48

Minutes

VS.

THE TIGERCONNECT WORKFLOW

23

Minutes

Real-time messaging enables the ED provider and case manager to easily determine correct status prior to admission, eliminating the need to course-correct after the patient is already in observation.

By enabling the ED provider and case manager to collaborate on patient status, hospitals can decrease observation rates, reduce observation hours, and minimize costs associated with incorrect status.

To learn more about admitting patients from the emergency department, download the ED to Inpatient Transfers Workflow Infographic.

[Download Infographic](#)

¹ Estimated additional revenue for inpatient admission vs observation. Inpatient reimbursement data available at <https://hcup-us.ahrq.gov/reports/statbriefs/sb225-Inpatient-US-Stays-Trends.jsp> Observation reimbursement data available at <https://theshift.usacs.com/observation-medicine-good-bad-ugly/> Disclaimer: time savings using TigerConnect are based on internal clinical data