

# HANYS complex case discharge delay data collection pilot: Instructions

## 1. Collect data

Participants are strongly encouraged to use the [data collection tool](#) to collect case data internally first, then report cases into the HANYS portal.

HANYS is requesting data for cases that meet all of the following criteria:

- discharge delays >96 avoidable hours (>4 days) in the emergency department and/or >336 avoidable hours (>14 days);
- present in your hospital between April 1 and June 30; and
- not in a swing bed.

**Note:** You may choose to also report patients experiencing fewer avoidable days than in the inclusion criteria.

## 2. Establish access to HANYS' portal

- A. Request access to the application by emailing [complexcase@hanys.org](mailto:complexcase@hanys.org).
- B. Set up your HANYS portal account by clicking the “Activate Okta Account” link sent to you from [okta<noreply@okta.com](mailto:okta<noreply@okta.com). Please check your email spam folder if you do not receive the Okta email.

If your account is not activated within seven days of receiving the activation email, you will need to request a new email by emailing [complexcase@hanys.org](mailto:complexcase@hanys.org).

## 3. Report cases

HANYS is requesting that data be reported at least once a month: May 9, June 8 and July 8.

### How to add a case:

1. Sign in to [HANYS' complex case discharge delay pilot application](#).
2. Click “Case Management.”
3. Select your hospital name in the “Hospital Name” drop-down menu.
4. Click “Add New Case.”
5. Enter information as requested in the data collection tool.
6. Click “Save” at the bottom of the page.

► You will automatically be logged out after 15 minutes of inactivity.

► Incomplete cases will be highlighted in yellow on the homepage.

### How to edit a case:

1. Follow steps 1-3 in “How to add a case.”
2. Crosswalk the HANYS ID and/or characteristics for the case you are looking to edit.
3. Click “Edit” and proceed when adding a case or “Delete” to remove a case.

### Definitions:

**Avoidable hours/days:** hours/days when a patient is stabilized and ready for discharge but is unable to be discharged.

**Placement setting days:** number of days between the date the first request was submitted and the date of notice that placement is available to the patient.

**Insurance or financial coverage days:** number of days between the date the first request was submitted to the date the final determination notice was received.

**Agency service/program eligibility process days:** number of days between the date the first request was submitted to the date a final determination notice was received.

**Agency service/program referral process days:** number of days between the date the first request was submitted to the date a final determination notice was received.

**Placement setting screening days:** number of days between the date the screening process was initiated and the date a determination notice was received.

**Guardianship days:** number of days between the date the guardianship process was initiated and the date guardianship was finalized.

**Advanced care planning days:** number of days between the date planning was initiated and the date of completion, e.g., health proxy.

For technical questions, please email [complexcase@hanys.org](mailto:complexcase@hanys.org).

For questions about the initiative, please contact Sarah DuVall, director, behavioral health, at [sduvall@hanys.org](mailto:sduvall@hanys.org).