HOME HEALTH+

KanTime Agency Management Software

KanTime is a device and OS agnostic compatible with any windows, apple, or android device. KanTime is optimized for the Google browser because it is free and available for any device, but KanTime is also compatible with any browser.

Due to its configurable role-based dashboards, KanTime can be configured to virtually any role in the post-acute Home Healthcare industry. Configurations, as well are driven at its core by a rules engine focused on Payor, Line of Business, and Service. The dashboards can be configured to present the equivalent of over 200 near real-time reports and associated alerts, with click-through technology employed to permit direct drill down to the root cause of the presented alert. No longer must the user collect and cross-compare multiple reports from various areas of the software to determine what's driving the issue.

A key differentiator that cannot be overlooked however is that the dashboards and software access is configurable by role. Only those areas associated with that staff or clinical persons' responsibilities are then presented which further drives unmatched efficiency of operations.

Some example functionality groupings and features associated are as follows:

Operational Management

- Further dashboard configurations that group data by Business Unit, Branch, Line of Business, or Team bring an unmatched clarity of focus on areas that are causing bottlenecks in your organization.

- In addition to dashboard-driven alerting and reporting, nearly 300 analytical reports are accessible from the menu bar.

- Executive dashboard and trending analytic reporting available from Data Sciences.

- Real-Time HIPPA compliant direct messaging to all users from KanTime Office Mail.

Financial Management

Dashboard alerts for what's ready to bill, what's not and why. KanTime's rules engine knows the intricate details of Authorization, Eligibility, billing units, rounding, claim form configuration, and more to the highest percentage of first-pass billing success.

Lockable month-end or weekend configurable financial engine

Configurable Journal Entry GL reporting

P&L, AR, Cost reporting, and more.

Intake

Upon initial intake, selection of Payor and Line of business determine what will be presented to the intake staff and what will be required before the patient is admitted for scheduling of services.

Agency configurable checklists and customizable patient data fields ensure the collection of the required information so that services provided will be paid for.

For clinical care, diagnosis information populated during intake from the HNP can be flown to the assessment note for clinical review vice requiring a full population of the data during the visit.

Medication information can also be documented in the intake record and "flown" to the assessment note to further reduce the documentation required at the time of service.

Attempts to admit early will result in a detailed list of items remaining eliminating the guesswork of what is still required and inappropriate admits.

Scheduling

Agency configurable patient/clinical attribute matching engine to ensure the right field staff is paired with the right patient.

Multiple configurations for repeat schedules such as weekly, every two, three, or four weeks as well as custom and visit plan scheduling that also validate against available authorizations, service requirements, and field staff availability.

Change schedules one at a time, by drag and drop or in bulk while all rules validations remain in force.

Call-outs are easily managed thru access to the field staff search engine from within each individual schedule screen in addition to a role-based capability to adjust pay rate if needed to fill the visit.

Automated authorization allocation within schedules that permit utilization in sequential order with the ability to split authorizations within a single visit to ensure proper utilization.

Configurable hard and soft stops and overrides by role for scheduling outside the authorization, clinician availability, Overtime, and more.

Planned schedules can be split for payroll or by payor and automate invoice splitting at service completion.

Dashboard alerts for patients without schedules, and authorizations remain to ensure optimal patient service within available funding.

Clinical

Line of business, Payor and Service configurations that ensure the correct note type is presented for every scheduled service.

Role-based configurable dashboard alerts for newly assigned patients, notes returned for correction from QA, HR-related documents coming due and more.

Change orders over the course of treatment automatically update future follow up visit notes with required actions – if it is included in the POC, it's included in the note. No need to exit the note to view orders or POC.

Clinical validations ensure that all POC-required actions are documented on every visit.

The entire MAR and the ability to generate change orders are accessible from within the clinical note maximizing clinical efficiency and patient care awareness.

Adult, Pediatric, Clinical, non-clinical, therapies and more with specific note types built for the specific visit types.

Wound documentation that flows from a visit to visit with body map and associated images to efficiently manage the healing process across multiple wounds, disciplines, and visits.

Vital sign alerts for exceeding agency set or patient-specific parameters as well as trending within the note.

IDT documentation forced within the notes that is automagically flown to the IDT note for periodic review. (Hospice Specific)

Billing

Dashboard alerts for what's ready to bill, what's not and why. KanTime's rules engine knows the intricate details of Authorization, Eligibility, billing units, rounding, claim form configuration, and more to the highest percentage of first-pass billing success.

Seamless integrations with numerous Clearinghouses to allow multi-payor batch electronic claims submission.

Remittances are automatically brought in through integrated clearinghouses and automatically match to submitted invoices for one-click posting.

Automated Batch Eligibility submissions with alerts for those with changed eligibility ***(available? Through integration with clearing house?)***

Manual claims submission or invoice generation is available for those remaining payors that require it or agencies that still prefer this process.

Non-electronic remittance receipt and posting procedures.

Patient ACH/Credit Card claims and remittance processing available.

HR and Payroll

Dashboard alerts for both management and staff awareness of items expiring in the next 30 days ensuring staff are engaged in managing their required documents.

Enhanced management automation is available to identify actions required when an item expires such as removal of the field staff from the schedule and/or removal of their ability to document care. This can eliminate audit-driven recoupment actions for unqualified non-compliant care.

Enhanced management reporting with drill-downs available to any date range and various team/branch/discipline groupings. Communication automation can be actioned directly from within HR management reports.

Limited applicant tracking support is provided with agency configurable status types applied by agency users as applicant statuses change.

Field staff productivity tracking can be configured to modify payroll.

Pay rates are configurable by service and associated payor. Pay rates can additionally be configured by the client and can be overridden within each staff record by those with the appropriate role authority.

PTO accrual and utilization can be tracked and managed while approved vacation time will alert to any needed schedule changes and block from schedule availability

Overtime protection can be configured to soft warn or hard stop at agency discretion.

Automated overtime calculation is available to support various state-mandated methodologies including the overtime averaging model of California.

Weekend and Holiday pay types as well as configurations to determine whether these pay periods are to be included in overtime are available and automated.

Configurable mileage and travel time tracking with automated remittance to payroll and associated reporting is supported.

KanTime does not track benefits, calculate withholding or generate checks but has formatted exports to over 35 payroll vendors to ensure the efficiency of payroll processing.

KanTime ICE

Clinical Point of Care documentation when connectivity is not available

Users Synchronize to KanTime Online daily to gain schedules updates so electronic documentation can still be performed should connectivity be a challenge that day.

If schedules change during the day, Synchronization is performed again at a Wi-Fi-enabled location to upload the new schedules. KanTime encryption allows this to be safely achieved at any Wi-Fi enabled or depending on the device used cellular internet-accessible location.

Optimizations and automation that are dependent on online connectivity are not included but this application eliminates the need for paper documentation when connectivity is unavailable.

KanTime Cures Act Compliant EVV

Fully integrated KanTime proprietary and Cures Act Compliant EVV is approved as an alternate EVV vendor in multiple states and growing.

EVV options for non-clinical care include Telephony and GPS smartphone app.

EVV for clinical care required in a few states currently with the remainder coming due in 2023 includes GPS functionality within the clinical documentation process.

Several states require EVV vendor selection based on service and payor resulting in a state-provided model that requires staff training on more than one system simultaneously. KanTime's integrations and approval as an alternate EVV vendor allow agencies to instead focus on just one EVV methodology.

KanTime Mobile

- SmartPhone application that is compatible with any Apple or Android smartphone.

- Developed primarily for non-clinical task collection and documentation to replace paper timesheets while concurrently providing Cures Act compliant GPS EVV.

- Disconnected care documentation for non-clinical services is supported without GPS capture.

- Additionally provides HIPPA compliant communications outside the KanTime Online system for enhanced field communications.