

BED BEACON OVERVIEW:

We are proud to introduce to you a novel patent-pending software platform that allows communication of CoVID19 cases and Bed availability as well as the first public health data analytics apprenticeship program registered in the US and likely the World.

Bed Beacon is a novel software **sorting platform for efficiently assessing bed availability at post-acute care facilities**. It's similar to Zillow - but for hospitals, nursing home beds, home health, inpatient psych, short-term care, long-term care and hospice. This **efficiently and effectively streamlines the search process for facilities while helping with compliance with CMS rules, CDC recommendations and National Patient Safety goals**.

In response to the **COVID-19 pandemic**, we have now built into our software system the **ability to screen patients and find facilities with CoVID-19 AIIR beds in a way that complies with as many of the new Medicare rules as possible and also the Medicare IMPACT Act**. We understand these are delicate times and can host teleconference training.

We can also discuss the **ways our software will reduce hospital length of stay and ER throughput to create more available beds, improved revenue and decreased operational expenses**. We recognize the strain CoVID19 may put on your systems, the public health needs to cohort hospitals and patients, as well as the importance of communicating consistently as CMS audits are on the horizon.

In addition, we have the **first public health data analytics apprenticeship program registered** in the US & possibly the world. The Dallas County Community Colleges have a grant to subsidize the start of the education. There are tax credits to reduce the cost of salaries for workers. It is registered in a way that all Texas hospitals can harness. Workers will train in CDC epidemiology, FEMA Incident Command systems, NIH research, health information tech and also data analytics so they can help in the response to this pandemic. We have **100 applicants ready to go forward** & DCCCD can start the coursework immediately.

BED BEACON BENEFITS IN RESPONSE TO COVID-19 PANDEMIC:

We would love to discuss how Bed Beacon can reduce hospital length of stay and ER throughput to create more available beds, improved revenue and decreased operational expenses during and after the COVID-19 pandemic. **We recognize the strain CoVID19 may put on your systems**, the public health needs to cohort hospitals and patients as well as the importance of communicating consistently as CMS audits are on the horizon.

Here are projections for the US about the readiness and likely consequence of COVID-19 for each state in the US. <https://covidactnow.org/>

We have several resources for the CoVID-19 pandemic:

- 1.** An ability for **post-acute care** facilities to answer **screening questions** *prior* to sending patients to your hospitals for streamlined communication
- 2.** Inclusion of the **CMS-recommended** questions for patients transitioning home with home health
- 3. Available links to CDC websites** CMS requires hospitals to check frequently
- 4. Communication of MDRO status** including CoVID-19 and PUI
- 5.** The ability for care transitions teams to **search for available PAC beds remotely** which means the ability to use remote care transitions workers
- 6.** The ability to **sort quality information** required by the **CMS Medicare Impact Act** at a time when CMS is likely to audit
- 7.** The ability to **communicate when your AIIR (negative pressure) rooms are full** to help with improved utilization of resources across the hospital community
- 8.** The ability to **improve patient satisfaction with care transitions** by giving valuable information about options at a time when PACs are not allowing visitors to create expedited decision-making **related to length of stay**

A memorandum released by the **Department of Health and Human Services** recently provides important detail with respect **to the temporary focus of surveys on infection control and other emergent issues**. Importantly, it notes that, in addition to the focused inspections, statutorily-required inspections will also continue in the 15,000 nursing homes across the country using the approximately 8,200 state survey agency surveyors.

From the CMS Memorandum to State Surveyors:

<https://www.cms.gov/files/document/gso-20-13-hospitalspdf.pdf-2>

CMS Guidance:

When a [hospital] patient is discharged, all necessary medical information (including communicable diseases) must be provided to any post-acute service provider. For COVID-19 patients, this must be communicated to the receiving service provider prior to the discharge/transfer and to the healthcare transport personnel.

Bed Beacon Response:

Hospitals using Bed Beacon have the ability to search for post-acute care services based upon communicable disease states of the patients. The type of bed request is done for ALL patients based upon their communicable disease type.

CMS Guidance:

The development of such policies and procedures require hospitals to focus efforts on preventing and controlling infections, not just between patients and personnel, but also between individuals across the entire hospital setting (for example, among patients, staff, and visitors) as well as between the hospital and other healthcare institutions and settings

and between patients and the healthcare environment. Hospitals should work with their local, State, and Federal public health agencies to develop appropriate preparedness and response strategies for communicable disease threats.

Bed Beacon Response:

The communication of bed requests based upon communicable disease state, ability to list cohorting of beds from post-acute care facilities is the Bed Beacon effort to help hospital customers "focus efforts on preventing and controlling infections "between the hospital and other healthcare institution and between patients and the healthcare environment."

CMS Guidance:

Hospitals should monitor the CDC website

<https://www.cdc.gov/coronavirus/2019ncov/index.html> for up to date information and resources.

Bed Beacon Response:

A link to the CDC website is in the resources links provided by the Bed Beacon platform.

CMS Guidance on Screening of Patients:

How should facilities screen visitors and patients for COVID-19? Hospitals should identify visitors and patients at risk for having COVID-19 infection before or immediately upon arrival to the healthcare facility. They should ask patients about the following: 1. Fever or symptoms of a respiratory infection, such as a cough and sore throat. 2. International travel within the last 14 days to restricted countries. For updated information on restricted countries visit: <https://www.cdc.gov/coronavirus/2019-ncov/travelers/index.html> 3. Contact with someone with known or suspected COVID-19.

Bed Beacon Response:

The screening questions must be answered for patients that are doing searches in the system to facilitate this screening for the post-acute care facility compliance. A link to the countries with coronavirus is provided in the reference section of Bed Beacon's platform.

CMS Guidance:

They should contact their local health department if they have questions or suspect a patient or healthcare provider has COVID-19.

Bed Beacon Response:

The local health department phone number is listed on the Bed Beacon platform.

CMS Guidance:

Hospitals should contact their local health department for questions, and frequently review the CDC website dedicated to COVID-19 for health care professionals.

<https://www.cdc.gov/coronavirus/2019-nCoV/hcp/index.html>

Bed Beacon Response:

The website hospitals should regularly review has a link from the Bed Beacon resources page.

CMS Guidance:

The decision to discharge a patient from the hospital should be made based on the clinical condition of the patient. If Transmission-Based Precautions must be continued in the subsequent setting, the receiving facility must be able to implement all recommended infection prevention and control recommendations. Although COVID-19 patients with mild symptoms may be managed at home, the decision to discharge to home should consider the patient's ability to adhere to isolation recommendations, as well as the potential risk of secondary transmission to household members with immunocompromising conditions. More information is available here:

<https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-home-care.html>

Bed Beacon Response:

On the home health section of Bed Beacon, we will list the considerations that hospitals should make including the following to remind workers at Bed Beacon hospital facilities to improve compliance.

1. The patient is stable enough to receive care at home.
2. Appropriate caregivers are available at home.
3. There is a separate bedroom where the patient can recover without sharing immediate space with others.
4. Resources for access to food and other necessities are available.
5. The patient and other household members have access to appropriate, recommended personal protective equipment (at a minimum, gloves and facemask) and are capable of adhering to precautions recommended as part of home care or isolation (e.g., respiratory hygiene and cough etiquette, hand hygiene);
6. There are household members who may be at increased risk of complications from 2019-nCoV infection (.e.g., people >65 years old, young children, pregnant women, people who are immunocompromised or who have chronic heart, lung, or kidney conditions).

CMS Guidance:

<https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-home-care.html>

For patients going home, a healthcare professional should

Provide CDC's Interim Guidance for Preventing 2019 Novel Coronavirus (2019-nCoV) from Spreading to Others in Homes and Communities to the patient, caregiver, and household members.

Bed Beacon Response:

This reminder and link will be provided on the home health section of the Bed Beacon platform.

BED BEACON BENEFITS TO HOSPITALS:

1. **Significantly Increase revenue** through a reduction in ambulance diversion status
2. **Reduce direct expenses** by decreasing length of stay
3. **Decrease re-hospitalization rates** by helping patients search for optimal resources
4. **Improve value-based purchasing scores** by allowing sorting of facilities on VBP
5. **Increase HCAHPS patient satisfaction** of care transitions by bringing quality information
6. **Optimize work flow** for your staff creating better worker satisfaction & retention
7. **Decrease Medicare fines** by helping with compliance with the IMPACT Act.

BED BEACON BENEFITS TO POST-ACCUTE CARE FACILITIES:

1. Provides an **online platform that provides available bed information** from post-acute care facilities to care transition teams at hospitals
2. Allows **Hospital teams to sort through the options available in the database** using criteria filters and post-acute care quality information.
3. **How it works:**
 - a. Nursing Home administrator uploads the availability information into the database.
 - b. Hospital transition team goes into the system and finds the relevant option.
 - c. Nursing Home administrator receives the placement request.
 - d. Patient arrives the same day.
4. **HIPPA compliant mechanism.**
5. **Benefits for joining our network:**
 - a. Decrease time of empty beds
 - b. Lower your marketing expense
 - c. Lower phone calls volume
 - d. Increase your revenue
 - e. System compliant with the Medicare Impact Act, Reducing Medicare Audits

BED BEACON PUBLIC HEALTH, DATA ANALYST APPRENTICESHIP PROGRAM BENEFITS:

- 1. First public health, data analytics apprenticeship program in Texas – and likely the US.**
- 2. Designed to increase the availability of employees with expertise in public health and data analytics.**
- 3. Plan for expanding the program nationwide, with a goal of 50,000 apprentices by 2030**
- 4. Provides a healthcare technology solutions to:**
 - a. Address the Medicare Impact act** (and other regulatory changes), providing hospitals with post-acute care quality metrics.
 - b. Improve speed of discharge to increase hospital profitability and efficiency** – to put the *right patient*, in the *right bed*, with the *right care*.
 - c. Meet the growing demand for healthcare technology solutions** by training an employee population in healthcare data analytics.
 - d. Increase the ability to track and create comprehensive healthcare data analytics.**