SOCIAL DETERMINANTS OF HEALTH
The Social Determinant of Health (SDoH) module adds a dashboard, registry, and the SDoH triggers on the Patient Visit Planning and Care Management Passport. This module is mapped from a standardized template (i.e. PRAPARE) within your EHR to expand on the normal UDS data collected.

Social Determinants of Health: Understanding Your Population

REFERRAL MANAGEMENT
The Referral Management module assists with improving referral completions by identifying open referrals and by specialists, monitoring impacts of workflow changes, stat and urgent closure rate, and more to enhance care coordination.

DRVS Module Referral Management
Optimizing the Use of Referral Management in DRVS

CONTROLLED SUBSTANCE
The DRVS Controlled Substance Module provides health centers with tools to better manage populations at risk – those in treatment for substance use disorder, those at risk for developing a disorder and those with chronic pain.

DRVS Module Controlled Substance
Risky Populations: Tools to Manage HIV, Hepatitis C & Substance Use

FINANCE AND OPERATIONS
The Finance and Operations Module includes tools to facilitate practice operation including the management of patient and encounter visit activity, provider and panel management, cycle times and claims management.

DRVS for Community Health Center Operational Management

EHR PLUG IN
The EHR Plug-In allows for DRVS data to be accessible within the EHR. The data that is available includes: outstanding care gaps, pre-visit planning alerts, and open referrals.

DRVS Module DRVS EHR Plug-In

For more information contact Jessica Schaner at jschaner@ohiochc.org
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HEPATITIS C
This module includes additional Hep C measures to follow the Hep C cascade from screening to treatment to cure and includes barriers to treatment.

HIV
This module is designed to improve the tracking and care of HIV patients and simplify the statutory reporting associated with providing HIV patient care. DRVS includes a base set of quality measures and a composite patient registry relating to HIV, a larger set of measures and an extended patient registry are available for those practices specializing in the care and treatment of HIV patients.

OBSTETRICS
The OB module incorporates nearly 100 data points in the prenatal passport and detailed registries to review various screenings, labs, demographics, birth details, test dates and results and more.

EDR INTEGRATION
Enhances the ability to consolidate patient information from both the EHR and EDR to have a unified patient view of applicable services. The dental integration adds a set of measures, registries, and dashboards.

AZARA CARE MANAGEMENT
Azara Care Management allows the Care/Case Management and Care Coordination staff to manage and monitor patient panels by tracking day to day tasks and follow ups related to the patient’s care. It is a separate application that leverages the data within DRVS and requires a setup, configuration, and separate subscription.

For more information contact Jessica Schaner at jschaner@ohiochc.org