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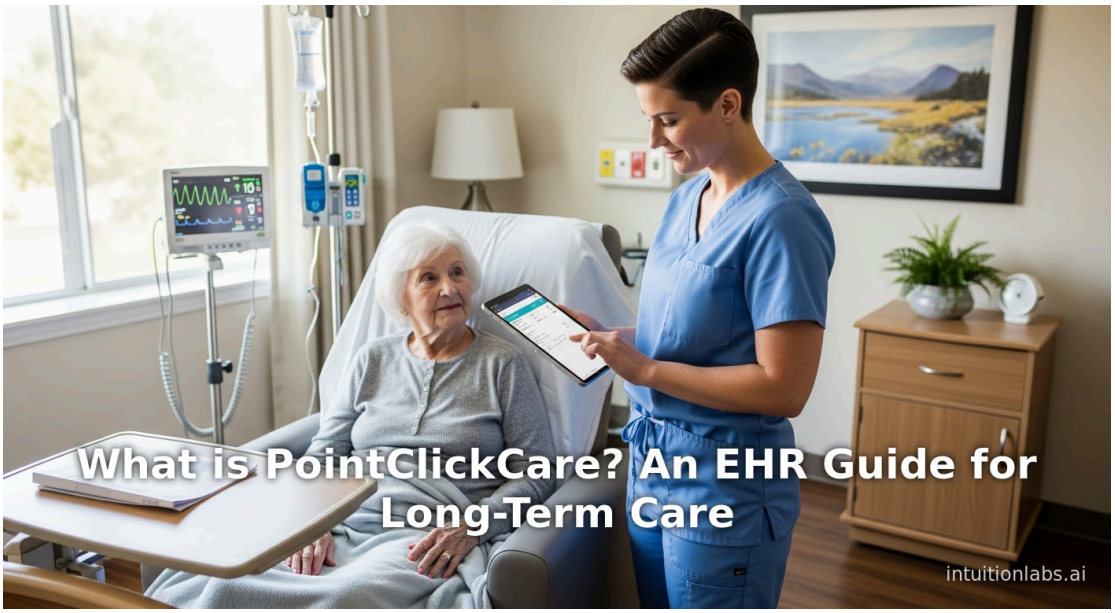
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PointClickCare Explained: Features, Users & 60% Market Share

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Executive Summary

PointClickCare (PCC) is a cloud-based *electronic health record (EHR)* platform specifically designed for the **long-term and post-acute care (LTPAC)** sector. Founded in 2000, this software-as-a-service (SaaS) system functions as a “system of record” for senior care facilities, integrating clinical documentation, medication management, financial billing, analytics, and interoperability features (www.sec.gov) (www.sec.gov). PointClickCare serves skilled nursing and senior living providers; the adoption evidence is summarized by source and unit in Table 1. Its filings identify facility-based providers in the United States and Canada as its core target market (PointClickCare 2015 filing).

Update (October 2026): PointClickCare is still led by co-founder and CEO Dave Wessinger (executive team). It filed a Form F-1 for a U.S. initial public offering in September 2015, then withdrew it on February 1, 2017, citing market conditions, with no shares sold (SEC Form RW); its about page describes “20+ years of independent, founder-led innovation” and cites more than 30,000 provider organizations (about page). In February 2026, PointClickCare reported its seventh consecutive Best in KLAS win in the Skilled Nursing Facilities: Long-Term Care category and a first win in Senior Living: Assisted Living & Memory Care (PointClickCare). AI tools are now part of the platform rather than only a plan: the June 2, 2026 Advisor Suite release states that Billing Advisor is available to all skilled nursing providers, alongside the earlier Chart Advisor and Referral Advisor (Advisor Suite release), and the Vox Advantage voice documentation app, announced August 12, 2026, is scheduled for commercial availability in October 2026 (Vox Advantage release). The purpose-built senior living EHR announced in November 2025 launched earlier in 2026, according to a May 12, 2026 release (senior living release).

Comparisons with other vendors and customer research should be read in their original dated scope.

This report presents a comprehensive overview of PointClickCare EHR: its origins and evolution, core capabilities and use cases, market position and adoption statistics, real-world outcomes, and future directions. We draw on public financial disclosures, industry research (e.g. KLAS, Forrester), news sources, and vendor documentation to substantiate claims. In particular, the report cites multiple perspectives (customer research

surveys, press releases, and analytics firms) to triangulate PointClickCare's prominence in long-term care software. The conclusion highlights key implications for senior care providers, health networks, and policymakers.

Introduction

Healthcare has been progressively digitized over the past two decades, but early efforts focused on acute and ambulatory settings. Long-term and post-acute care (LTPAC) settings, including skilled nursing facilities (SNFs), assisted living, home health, and rehab, were slower to adopt modern EHRs. Historically, many nursing homes relied on paper records or very rudimentary software. PointClickCare emerged at the turn of the millennium to address this gap. Founded in 2000 by brothers **Dave Wessinger** and Mike Wessinger (executive team), PointClickCare developed a web-based EHR tailored to senior care. PCC has described itself as **"the leading cloud-based software vendor for the senior care market"** (www.marketscreener.com). Its about page now calls it the "#1 senior care EHR in North America" (about page). Its co-founder and CEO, Dave Wessinger, notes over 20 years of experience aiming to "transform the senior care technology industry" (pointclickcare.com).

PointClickCare is headquartered in Mississauga, Ontario, and primarily serves the U.S. and Canadian markets. In Enlyft's detected-company dataset, retrieved October 6, 2026, **85%** of detected PointClickCare customers are in the United States and **10%** are in Canada (Enlyft). This is a snapshot of Enlyft's detections, rather than a census of PointClickCare's full customer base. PointClickCare's target users include small family-owned nursing homes and large national chains alike. In fact, as of April 30, 2015, it reported 2,300 customer organizations (ranging from small providers to regional chains), covering about 10,900 care facilities and thereby serving roughly 850,000 residents per day (www.sec.gov). That year's SEC filings proudly noted that PCC's customers include *"nine of the ten largest skilled nursing providers and five of the ten largest senior living providers in the United States and Canada"* (www.sec.gov). These are historical figures, not current adoption counts.

The PointClickCare platform is **cloud-native and multi-tenant**, meaning that many customers share the underlying infrastructure while each has a secure, separate database. This architecture facilitates rapid deployment of updates and allows small providers to access cutting-edge features without maintaining their own servers (www.sec.gov) (www.sec.gov). PointClickCare provides an integrated suite of modules: a core EHR and billing/Revenue Cycle Management (RCM) system, plus specialized add-ons for care delivery, financial management, compliance, marketing, and business analytics (www.sec.gov). The vendor emphasizes that the integrated nature of its system makes it the "system of record" for senior care facilities (www.sec.gov), unifying clinical documentation (nursing notes, treatment logs, MDS assessments), medications (eMAR), scheduling, and reporting in one platform. These built-in capabilities help providers improve care quality and outcomes while streamlining operations and managing regulatory obligations (www.sec.gov).

Regulatory context is important. Long-term care providers in the U.S. undergo rigorous data reporting (e.g. the Minimum Data Set [MDS] to Medicare/Medicaid). Having data digitized supports compliance. PCC's platform explicitly aims to "simplify regulatory compliance" for senior care (www.sec.gov). It also enables integration with external health entities (such as hospitals, pharmacies, and health information exchanges) so that care can be coordinated across settings (www.sec.gov). For example, PCC notes that it "enables our customers to

communicate with physicians, hospitals, pharmacies and various *health information exchanges* (HIEs) electronically," thus providing actionable data across the entire continuum of care (www.sec.gov). In practice, this means a nursing home can receive hospital discharge summaries or lab results directly into the EHR, and send alerts or referrals to outpatient providers, reducing duplicative entry and preventing errors (www.sec.gov) (www.sec.gov).

Table 1 in the Market Share and Adoption section summarizes adoption evidence; Table 2 compares long-term care software vendors.

Product and Platform Architecture

PointClickCare's core offering is an **Electronic Health Record and Revenue Cycle Management (RCM) platform** tailored to LTC workflows. According to company filings and marketing, the **core platform** includes the foundational EHR (physician orders, nursing documentation, assessments, care plans, MDS) and RCM for billing and claims. On top of this, PCC layers a suite of **add-on applications**: these extend functionality into specialized areas like advanced care coordination, clinician and family portals, analytics, staffing and scheduling, and enhanced reporting (www.sec.gov) (www.pointclickcare.com). Notably, PCC's medication module ("QuickMAR") is an integrated eMAR solution for documenting medication administration; the vendor claims that QuickMAR *"dramatically reduces medication errors, paperwork inefficiencies and administrative duties"*, and it connects tightly with pharmacy partners to streamline med ordering (www.pointclickcare.com). In practical terms, the EHR allows a nurse to e-chart vital signs, treatments, and wound checks alongside medications, all in one database, with built-in decision support (e.g. bar-code scanning, alerts for omissions) (www.pointclickcare.com).

The entire platform is delivered via web ("Software as a Service") under a **multi-tenant** architecture (www.sec.gov). This means each customer's data is kept logically separate, but the software updates and maintenance are centralized. Benefits cited include rapid rollout of new features, lower upfront cost, and easier scaling (for example, a chain can add new facilities without setting up new servers) (www.sec.gov). PointClickCare's own filings emphasize that their SaaS model and scaling is intended to grow "with our customers as they acquire or open new facilities" (www.sec.gov). For large corporate providers, the platform offers "roll up" reporting so that executives can view standardized financial and clinical metrics across all locations.

Integration and Partnerships. Recognizing that senior care often intersects with hospitals, labs, pharmacies, and community providers, PointClickCare provides built-in interoperability. Customers can exchange data with external systems via HL7 interfaces, APIs, and certified connectors. In fact, PCC has developed FHIR-based APIs (USCDI connectors) to share data in a standard format (under the 21st Century Cures Act initiatives). The acquisitions of **Collective Medical** (2020) and **Audacious Inquiry** (2022) highlight a strategic push into connected-care networks (pointclickcare.com) (pointclickcare.com). Original Collective Medical (now PCC-owned) is a real-time care collaboration network used by hospitals nationwide; combined with PCC's own patient data, it enables new capabilities for population health. Audacious Inquiry is a care-coordination platform emphasizing interoperability. PCC touts that these integrations create "the largest care collaboration network in North America," promising unified post-acute data and alerts for transitions of care (pointclickcare.com)

(pointclickcare.com). PointClickCare later acquired Patient Pattern, a value-based care EHR and care management platform, in March 2023 (acquisition release) and American HealthTech, a subsidiary of CPSI, in January 2024 (acquisition release).

In summary, PointClickCare's architecture is a **comprehensive, cloud-delivered LTC EHR/RCM suite** with modules covering essentially the full workflow of senior care facilities. It emphasizes a single-platform (one database), integrated user experience for caregivers, robust interoperability, and continuous upgrades. This breadth is a key selling point: customers often cite the value of having one system for clinical and financial functions, avoiding fractured point systems. As one company document states, the platform "manages the core functions of our customers' operations, making us their system of record" (www.sec.gov). Certification is scoped to a Health IT Module and its applicable criteria. ASTP/ONC's certification guidance describes certification as baseline assurance for specified clinical care and data exchange functions.

Use Cases and Functional Capabilities

PointClickCare's use cases span the daily workflows and strategic needs of senior care providers. Key functional domains include:

- **Care Documentation and Clinical Workflows.** Nurses and clinicians use PCC to document all aspects of resident care: admissions, initial assessments, daily progress notes, vital signs, treatments (e.g. wound care, physical therapy), condition changes, and discharges. The EHR supports structured data entry and templates tailored for LTC. It also handles mandatory assessments (e.g. MDS 3.0 in the U.S.) and creates care plans. By centralizing charting, PCC enables continuity: for example, multiple shifts can update a resident's record, and on-call medical staff can review up-to-date notes remotely. Integration with devices (like blood pressure monitors) can further streamline entries.
- **Medication Management (eMAR).** PointClickCare describes **QuickMAR** as an eMAR solution for medication and treatment administration, documentation, and pharmacy-connected workflows (QuickMAR product documentation). Documenting medication administration is distinct from electronic prescribing; the product page does not establish that nurses can prescribe through QuickMAR.
- **Care Coordination and Transitions.** A critical concern is exchanging information when residents move between settings (hospital ↔ nursing home). PointClickCare supports transitions-of-care by sending discharge summaries and receiving hospital notifications via interfaces. It includes tools for care managers to track hospital readmissions or pending transfers. PCC also offers specialized modules (often via acquisitions/partners) such as *PointClickCare Care Collaboration* which provides real-time alerts if a resident appears in any participating hospital. The goal is to avoid "care blind spots" when a resident goes to ER or returns home. Better coordination can reduce costly readmissions and ensure continuity (e.g. ensuring physical therapy orders at discharge are quickly initiated).
- **Revenue Cycle and Financial Management.** Unlike many clinical EHRs, PointClickCare combines billing and financial functions designed for the LTC business model. It handles claims to Medicare, Medicaid, and private insurers, including reimbursement workflows under the Skilled Nursing Facility Prospective Payment System (SNF PPS). The Patient Driven Payment Model (PDPM) is the case-mix classification model used under the SNF PPS for covered Medicare Part A stays. In 2021, PCC

expanded these offerings by launching **Revenue Cycle Management Services (RCMS)**, essentially outsourcing claims processing and collections to its experts for SNFs (pointclickcare.com). This service aims to ensure facilities are billed accurately and paid timely, addressing the tight-margin, government-driven reimbursement environment in LTC. Internally, the system tracks accounts receivable, produces standard reports, and integrates with general ledgers. PCC also includes tools for managing facility census, budgeting, and productivity analytics, thereby enabling operators to optimize occupancy and staffing.

- **Quality Measurement and Analytics.** PCC provides analytics dashboards and reporting to monitor clinical quality and business outcomes. This includes clinical alerts (e.g. pressure ulcer risk, fall risk), regulatory reporting (e.g. generating OASIS/MDS quality reports), and internal benchmarking. A dedicated product, *Market Insights*, benchmarks a facility's performance (e.g. rehospitalization rates, staffing levels, quality metrics) against peer groups and national averages in real time. By surfacing gaps, these analytics help administrators focus improvements. For example, providers can track their CMS 5-star rating drivers (such as staffing or value-based purchasing metrics) directly through the EHR portal.
- **Resident Engagement and Family Portals.** PointClickCare includes portals for families and residents in some settings. Through these, authorized family can check on care plans, dietary menus, activity schedules, or message staff. This enhances communication and transparency. Similarly, PCC offers a *Physician Portal* allowing attending physicians (often external or oversight docs) to view charts, sign orders, and approve meds electronically. This is vital in LTC where attending physicians may not be on-site daily. The combination of portals and secure messaging streamlines workflows that were once paper- or fax-based.
- **Emerging Capabilities (Telehealth, AI, Mobile, etc.).** More recently, PCC has introduced modules for telehealth, remote monitoring, and even cognitive care. For example, PointClickCare and Sound Physicians partnered to deliver integrated telemedicine ("Virtual Health") so that nursing staff can initiate one-click video consults with specialists (Virtual Health). The platform is mobile-friendly (used on tablets or smartphones) so nurses can chart at the point of care (bedside) or check resident records on the fly. On November 3, 2025, PCC announced a next-generation senior living platform with modern, purpose-built workflows (launch announcement). The announcement described commercial availability in 2026 and advanced AI capabilities as planned for future iterations. A May 12, 2026 release reported that the senior living EHR had launched earlier that year (senior living release).

Summary of Use Cases. In short, PointClickCare is used in LTC facilities for *everything from daily clinical charting to business analytics*. Its modules cover infection control, wound tracking, behavioral health notes (in some settings), scheduling staff shifts, and even marketing for occupancy. By unifying these functions, PCC enables LTPAC providers to move from fragmented manual systems (paper charts, separate billing software, etc.) to a single, integrated platform that increases efficiency and data accuracy.

Market Share and Adoption

PointClickCare's popularity in long-term care is evidenced by adoption metrics and independent market assessments. In the **LTC/post-acute niche**, PCC is widely regarded as the market leader. For instance, *KLAS Research* (a respected healthcare IT research firm) reported that PCC "dominates the long-term care market, boasting the largest market share" (hitconsultant.net). A 2023 KLAS summary noted that, among fully-rated LTC EHR vendors, PointClickCare not only has the largest market presence but also achieves the highest overall customer performance scores (hitconsultant.net). MatrixCare (a competitor) was identified as second in share, while Epic's LTC usage was mostly confined to facilities under integrated delivery networks (hitconsultant.net). PCC customers praise the balance of rich functionality and usability, and KLAS noted that PCC "outperforms all competitors for functionality and ease of use" in LTC assessments (klasresearch.com). In February 2026, PointClickCare reported its seventh consecutive Best in KLAS award in the Skilled Nursing Facilities: Long-Term Care category, with an overall score of 84.0 (PointClickCare).

PointClickCare's care-collaboration blog states that **more than 60% of skilled nursing facilities in the United States** utilize PointClickCare (vendor statement). This is a vendor-reported facility figure, retrieved October 6, 2026, rather than an independently measured market census. It is supported by the blog's explicit facility wording, rather than an extrapolation from the nursing-home campaign's differently scoped provider percentage.

The historical SEC disclosure gives a separate facility-based snapshot for April 30, 2015. Enlyft and 6sense publish technology-detection estimates with different category denominators. Treat their figures as estimates within those providers' datasets, rather than overall global EHR installation or revenue shares, or PointClickCare's complete customer base.

Table 1. PointClickCare Adoption Evidence

Metric and scope	Value	Source
U.S. skilled nursing facilities; vendor blog retrieved October 6, 2026	More than 60% of facilities, vendor-reported	PointClickCare
Provider organizations; vendor about page retrieved October 10, 2026	More than 30,000 provider organizations, vendor-reported	PointClickCare
Senior care facilities in the U.S. and Canada, April 30, 2015	Approximately 10,900 facilities	2015 filing
Residents served daily, April 30, 2015	Approximately 850,000 residents per day	2015 filing
Companies detected by Enlyft; retrieved October 6, 2026	3,071 companies	Enlyft
Enlyft Healthcare category estimate; retrieved October 6, 2026	About 1.1% within that category	Enlyft
Geographic distribution in Enlyft's dataset; retrieved October 6, 2026	85% U.S.; 10% Canada	Enlyft
6sense Electronic Health Records category estimate; retrieved October 6, 2026	2.51% within that category	6sense

Table 1 separates provider organizations, facilities, residents and detected companies. These measures answer different questions and should not be combined into a single market-share calculation.

Table 2. Comparison of Long-Term Care Software Vendors

The long-term care software market includes specialized vendors and products serving different care settings. Table 2 identifies vendors without asserting a current numerical market-share ranking.

Vendor or product	Context
PointClickCare	Integrated LTC EHR and revenue-cycle platform.
MatrixCare	A separate vendor included in KLAS long-term care research.
Epic	Included in KLAS post-acute research; suitability depends on the care setting.
Netsmart / HealthMEDX	Separate from Experience Care / NetSolutions.
Experience Care / NetSolutions	WellSky announced its acquisition of Experience Care in August 2023; NetSolutions is Experience Care's EHR platform.

Sources: KLAS Post-Acute Care 2020, KLAS Long-Term Care 2024 and WellSky's Experience Care announcement.

Table 2 is a vendor and product overview, not a current market-share census. Product scope, implementation needs and integrations should guide a provider's comparison.

Data Analysis and Evidence-Based Performance

KLAS's 2020 report described PointClickCare's balance of functionality and usability and customer reports of stability through upgrades (KLAS 2020 report). Its 2024 follow-up examines product development, integration quality and customers' sense of value (KLAS 2024 report). These findings concern the interviewed organizations and the reports' dates, rather than every customer or a permanent ranking.

PointClickCare commissioned Forrester Consulting's April 2020 *Total Economic Impact* study, based on interviews with four customer organizations. Forrester constructed a modeled composite skilled nursing facility and reported a **418% three-year ROI** under the model's assumptions (commissioned report). This is a modeled result, not an independently observed or typical return for all customers. PointClickCare announced the study on August 26, 2020 (vendor announcement). Providers should use their own costs and expected benefits when evaluating an investment.

Adoption and satisfaction research address different questions from financial or clinical outcomes. Providers should evaluate expected results in their own setting.

Workflow Examples

The following is an illustrative workflow, not a measured customer case study: a nurse uses an eMAR to document medication administration and treatment delivery while the facility coordinates with its pharmacy. QuickMAR documentation describes administration and documentation workflows. This example makes no claim about prescribing authority, error reductions or financial returns.

Implications and Future Directions

The success of PointClickCare reflects broader trends in healthcare IT and senior care. As populations age, demand for high-quality post-acute care grows. Providers face pressure to contain costs, improve outcomes, and demonstrate value, all of which require robust data platforms. By uniting clinical and financial data, PCC positions itself as an enabler of **value-based care** models in LTC. For example, reducing hospital readmissions (a key quality metric) is easier when a skilled nursing facility has instantaneous access to patient histories and can coordinate with hospitals via PCC's network.

Looking ahead, several emerging directions are evident:

- **Artificial Intelligence and Analytics:** The November 3, 2025 senior-living announcement described advanced AI capabilities as a future enhancement (release). Planned features should be distinguished from capabilities documented as available in a dated product release. The June 2, 2026 Advisor Suite release is one such dated release: it states that Billing Advisor is available to all skilled nursing providers and that MDS Advisor will enter beta in 2026 (Advisor Suite release).
- **Virtual Care and Telehealth Integration:** The COVID-19 pandemic accelerated telemedicine in every setting, including nursing homes. PCC's partnerships for virtual care allow remote clinician consults directly inside the platform. Future plans may involve more robust patient and caregiver engagement tools (e.g. apps for families, remote monitoring devices integrated with the EHR).
- **Value-Based Payment Models:** CMS's BPCI Advanced model completed its performance period on December 31, 2025. It is a historical example of bundled-payment care coordination, rather than a current participation opportunity. CMS's mandatory TEAM model for selected acute care hospitals runs from January 1, 2026, to December 31, 2030, with episodes that include lower extremity joint replacement and hip femur fracture treatment. Effective evaluation of value-based arrangements requires careful tracking of outcomes and costs.
- **Market and Competitive Dynamics:** While PCC currently leads, competitive pressure is intensifying. Large hospital EHR companies (like Epic and Oracle Health, which Oracle built on its acquisition of Cerner) are watching post-acute markets, and other niche vendors (MatrixCare, Netsmart) continue to evolve. New entrants (e.g. point-of-care mobile solutions, digital therapeutics) could nibble at specific functions unless PCC stays ahead. However, PCC's scale and head-start in network effects (largest care coordination network) create high switching costs for customers.

In the technology domain, interoperability and analytics remain important areas for evaluation. PointClickCare's filings describe an interoperability engine that connects customers with external entities (2015 filing). Providers should assess the specific native functions and integrations needed for their workflows.

Regulatory and Policy Implications

Future requirements around resident privacy, data security and reporting will remain relevant to LTC software procurement. Certification should be checked for the specific product, version and applicable criteria; it should not be treated as a general compliance guarantee (ASTP/ONC guidance).

Global Expansion

International expansion would depend on local clinical workflows, payment systems and regulatory requirements. The evidence discussed here should not be used to infer a documented international expansion plan.

Conclusion

PointClickCare is an integrated EHR and revenue-cycle platform designed for senior care (company filing). The adoption figures in Table 1 should be read according to their source, date and unit. Vendor campaign figures, historical facility counts and technology-detection estimates are different types of evidence.

The commissioned Forrester model discussed above offers an investment-evaluation framework, rather than a guaranteed customer outcome. PointClickCare's November 2025 senior-living announcement described advanced AI as a future enhancement (announcement). Providers should distinguish announced plans from documented availability when assessing the platform; by June 2026, PointClickCare documented Billing Advisor as available to all skilled nursing providers (Advisor Suite release).

For providers, PointClickCare's prominence means that proficiency with it is often a de facto requirement in the long-term care field. For other stakeholders (health systems, insurers, regulators), its large network can be leveraged for data-driven quality improvement in elder care. Given the trends (aging populations, integrated care pathways, value-based payment), the role of an effective LTC EHR will only grow. PointClickCare's continuing innovation and market leadership suggest it will remain a central platform in this sector. As the company likes to say, it is "enabling meaningful collaboration and access to real-time insights" in senior care (pointclickcare.com), a mission likely to gain momentum in the years ahead.

References: Authoritative sources for the above include SEC filings of PointClickCare (www.sec.gov) (www.sec.gov), KLAS Research reports (hitconsultant.net) (klasresearch.com), vendor press releases and product documentation (pointclickcare.com) (www.pointclickcare.com), as well as industry analytics (6sense, Enlyft) (6sense.com) (enlyft.com). Read historical disclosures, vendor statements, customer research and technology-detection estimates within their respective scopes.

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