Improving Access to Specialty Care with eConsults



Best Practices Forum Dr. Veena Channamsetty, MD Community Health Center Inc. February 20, 2015



The Weitzman Institute is a program of **Commun** ty Health Center, Inc.





Welcome to the Weitzman Institute

Committed to improving primary care for underserved populations by promoting research, training, education, and innovation

The Weitzman Institute is a program of **Commun** ty Health Center, Inc.

Background



- Specialty Access and Health Disparities
- One in four visits to a community health center results in a referral to a specialist¹
- Major imbalances in supply and demand for uninsured or publicly insured patients lead to long wait times²
- □ Limited access leads to delays in treatment, high no show rates, high emergency room utilization, and greater morbidity and mortality³
- Limited access to specialty care is a major contributor to ethnic and racial healthcare disparities⁴

- 1. Cook NL, Hicks LS, O'Malley AJ, Keegan T, Guadagnoli E, Landon BE. Health Aff (Millwood) 2007;26:1459-68.
- 2. Chen AH, Kushel MB, Grumbach K, Yee HF, Jr. Health Aff (Millwood) 2010;29:969-71.
- 3. Cook NL, Hicks LS, O'Malley AJ, Keegan T, Guadagnoli E, Landon BE. Health Aff (Millwood) 2007;26:1459-68.
- 4. Horner K, Wagner E, Tufano J. Issue Brief (Commonw Fund) 2011;23:1-14.



From: Sent: Wednesday, June 13, 2012 3:20 PM To: Subject: RE: Orthopaedic and Dermatology

Here is the latest greatest news:

Dr. Orthopaedics—states that ALL orthopaedic referrals from the Shoreline Area are to be scheduled locally. If no local orthopaedics, then they are to be referred to

Dr. —Dermatology—states that he will only see patients that live in the following areas, New London, Groton, Mystic, Gales Ferry and Ledyard. No where else.

For me, this means I have no where to send a managed healthcare patient when they need to see an Orthopaedic. (Unless they have Medicare as the primary coverage, then Orthopaedics will see them.)

As for dermatology, patients that live in Waterford have no where to go at this time.

Can my job get any harder to do??????????

The Weitzman Institute is a program of **Commun** ty Health Center, Inc.

Connecticut Health Foundation: CHC-UCONN Cardiology eConsult Trial



<u>Research question</u>: What is the impact of a cardiology eConsult system on access, efficiency, and clinical outcomes?

The Weitzman Institute is a program of **Commun** ty Health Center, Inc.

eConsults

PCP electronically submits consult with all relevant clinical information



Case warrants an in-person specialist visit – appointment made Specialist reviews eConsult within 2 business days

Specialist provides advice and guidance so PCP can manage the case in the primary care setting

Specialist requests additional labs/tests be performed – info sent to specialist for review

The Weitzman Institute is a program of **Commun** ty Health Center, Inc.

Research Plan



Target population	Primary Care Providers: Physicians Nurse Practitioners PAs Providers EXCLUDED from the study: Pediatric Only Part-time				
	Prospective, randomized controlled intervention trial				
Study Design	Blocked randomization				
	One-year intervention				
	Clinical, demographic, and utilization data for patients - at baseline, during the intervention, and for six months after the intervention. Pre/post providers' perceptions				
	eConsult pathway within the EHR				
Intervention	All consults MUST use this pathway EXCEPT for reasons of urgency or for patients who had an established relationship with a cardiologist				
	Cardiology team recommendations (3 possible reviewers)				
	PCPs responsible for following up and implementing the recommendations				

The Weitzman Institute is a program of Communtity Health Center, Inc.

					EHR			
🛢 Referral (O	utgoing)							
Patient	Test, Adult Imz:	l (863359)		<u>S</u> el <u>I</u> nfo		1		
Insurance			_	Sel P	os 🔲 🧾	How	v would you like to send the refe	erral?
🍰 [*] Ref From	Test, Test		* Ref To S Provider	Carter, Shanti	Clear		Print	
Facility From			Specialty	Cardiology	▼ Send to eHX			
Auth Code			E - siliku . T -		Clear		Print with Attachments (5)	
Shave Data	02/21/2012		Facility 10	ļ				
Defermed Date	02/21/2012		Auth Type			10	Гах	
Referral Date	02/21/2012		End Date	02/21/2013	<u> </u>	~	/	
Open Cases			Assigned to	wright, Naomi	<u> </u>	八	Fax with Attachments (5)	
Received Date	02/21/2012		Status					
Priority	Routine		Status			- 🌈	Send (EHX)	
Diagnosis /	/ Reason	Visit Details		Notes	Structured Data) 🚬	Fond instantly to at Cayton Sh	anti
* Reason				Ad	d Browse Remove		via eCW P2P	
SI. No	Description Econsult for pati	ient with identified te:	t nain. The FK	G. medical summary a	nd CCD are attached.		3 .	
				a) mostor sammary a				
Diagnosis	Previous D <u>x</u>	Add Rem	ove Proc	edures	Add Remove			
428.0 0	CHF [Congestive	heart failure], unspe	cified					
				.				
<u>S</u> can 🦉 i	Attachments (5)	Logs		icel	Send Referral 🜔			

The Weitzman Institute is a program of **Commun** (ty Health Center, Inc.

P2Poper	n dashboard	contacts messages records referrals	
Referrals	+ Back to Referrals	E Print Archive	
Referrals inbox	You have a new	w referral from	
Reformals Archived	From:		
quick links	To:		
Are Send a Message	Reason For Referre	at:	
40 Send a Patient Record	Authorization No: Reason: Diagnosis:	Authorization Type: Pt with 2 inconsistent urines. After second urine, she stated when she call the nurse that she had taken, dayguilinyquil. Is this what could be causing the abnormality. Her records are clear, she hasn't gotten, meds from anyone else, was willing, albeit upset, to reduce dose while I looked into it. Other issue is she, is on Gabapentin, effexor with some relief. But can't take NSAIDs due to HTN and n/vid with tramadol Help or insight about these urines would be great. Thank you. 724.3 - Sciatica 724.2 - Low back pain 278.00 - OBESITY	
	Procedures: Visits Allowed	Attachments	×
	Start Date: End Date:	Medical Summary/Download	×
	Notes:	DOB: Age: 41 Y Sex: female Primary Insurance: Home: PCP: Work: Cell: Email: Allergies : Shell Fish - Hives, shortness of breath, Tramadol - nausea/diziness/vomiting, perioillin - Hives, shortness of breath	
		Medications Name strength formulation, Sig: take route frequency Vicodin 500 mg-5 mg tablet, Sig: 1 tab(s) orally every 6 hours up to TiD as needed Metopeniol Succinate ER 200mg tablet, sig: 1 tab(s) orally every 6 hours up to TiD as needed Metopeniol Succinate ER 200mg tablet, sig: 1 tab(s) orally every 6 hours up to TiD as needed Metopeniol Succinate ER 200mg tablet, Sig: 1 tab(s) orally orally once a day Appir 31.81 mg enteric coated tablet, Sig: 1 tab(s) orally once a day Diovan 320 mg tablet, Sig: 1 tab(s) orally one a day fosinopril 40 mg tablet, Sig: 1 tab(s) orally one a day HCT2 25 (hydrachicorbinatide) 25 mg tab, Sig: 1 tab po daily for blood pressure Effect C 1. mg tablet, Sig: 1 tab(s) orally 3 times a day Globapentin 600 mg tablet, Sig: 1 tab(s) orally 3 times a day Globapentin 600 mg tablet, Sig: 1 tab(s) orally 3 times a day Stohns Wort POWD, Sig: as directed XX Audicogy Summary Test, Type	

The Weitzman Institute is a program of Communtity Health Center, Inc.

Patient Demographic Characteristics



Characteristic	Intervention	Control	
Patient	N=229	N= 361	
Age – Mean years (SD)	51.9 (15.8)	53.8 (13.3)	
Female gender - no. (%)	119 (52)	202 (56)	
Race: White	94 (41)	134 (37)	
Black	39 (17)	53 (15)	
Hispanic	68 (30)	140 (39)	
Insurance Status – no. (%)			
Medicaid	143 (62)	217 (60)	
Medicare	32 (14)	65 (18)	
Other Public	1 (0)	0	
Private	21 (9)	47 (13)	
Uninsured	32 (14)	32 (9)	

The Weitzman Institute is a program of **Commun** ty Health Center, Inc.

Patient Clinical Characteristics



Characteristic0	Intervention	Control
Patient	N=229	N= 361
Smoking Status – no. (%)		
Current Every Day Smoker	58 (25)	93 (26)
Current Some Day Smoker	2 (0.9)	1 (0.2)
Former Smoker	44 (19)	94 (26)
Never Smoker	94 (41)	144 (40)
Smoker, current status unknown	30 (13)	29 (8)
BMI – Mean (SD)	30.8 (8.4)	31.6 (7.8)
Total Cholesterol – Mean (SD)	192.5 (50.7)	188.4 (46.0)
Diagnosis of Diabetes – no. (%)	63 (28)	104 (29)
Framingham Risk Score – Mean (SD)	13.9 (10.4)	14.0 (10.1)

The Weitzman Institute is a program of **Commun** ty Health Center, Inc.

Cardiology Study Referrals



[†]Patient deceased due to a non-cardiac related event

The Weitzman Institute is a program of **Commun** ty Health Center, Inc.

Reduction in F2F visits





The Weitzman Institute is a program of **Commun** ty Health Center, Inc.

	MEDICAL HO
	NCQA
7	RECOGNIZED PRACTICE

		Control		
	Total N=229	Traditional Pathway N=109	eConsults Pathway N=120	N=361
		no. (%)		no. (%)
Death from any Cause	0	0	0	1 (0.3)
Death from Cardiovascular Causes	0	0	0	0
Myocardial Infarction	0	0	0	0
Coronary Artery Bypass Surgery	0	0	0	0
Catheterization with Stenting or Angioplasty	3 (1.3)	1 (0.9)	2 (1.7)	2 (0.6)
Diagnostic Catheterization	1 (0.4)	1 (0.9)	0	6 (1.7)
ED Visits with Possible Cardiac Symptoms*	4 (1.7)	3 (2.8)	1 (0.8)	21 (5.8)
Hospitalization for Arrhythmia	2 (0.9)	2 (1.8)	0	5 (1.4)
Hospitalization for Atypical Chest Pain	6 (2.6)	4 (3.7)	2 (1.7)	10 (2.8)
Hospitalization for Syncope or Near Syncope	0	0	0	4 (1.1)
Hospitalization for Congestive Heart Failure	2 (0.9)	1 (0.9)	1 (0.8)	0

* p= 0.02 for ED Visits with Possible Cardiac Symptom. No other end points were statistically different.

The Weitzman Institute is a program of Communtity Health Center, Inc.

Clinical End Point

Provider Satisfaction



Providers reported being completely satisfied with ease of the eConsult process

The majority of providers (66.9%) reported that eConsults did not increase their workload

The Weitzman Institute is a program of Communt ty Health Center, Inc.

Economic Analysis



Methods:

- Claims data analysis for all patients in the CHF eConsult Study with Medicaid insurance
- All claims for 658 days pre Consult through 180 days post consult
- Claims broken down by cost categories: Hospital, ER, outpatient primary care, specialty care, pharmacy, outpatient cardiac testing, lab
- Intention to treat analysis

eConsults Background Cardiology Pilot Financial Outcomes



Per-Patient Costs **Cost Categories** eConsult F2F Δ All Inpatient \$ 1.039 \$ 1.702 -39% \$ All Emergency Room 37 \$ 75 -50% \$ \$ All PCP Office Visits 564 485 16% **All Specialist Visits** \$ \$ 893 1.188 -25% \$ \$ Labs 48 41 17% Cardiac OP Procedures \$ \$ 101 179 -43% **OP** Prescriptions \$ 2,282 \$ 1,970 16% \$ \$ Total 4,730 5,295 -11%

*: Sum of unaccounted and double-counted claims due to coding

The Weitzman Institute is a program of **Commun** ty Health Center, Inc.

eConsult– Cost Savings



Per Member Per Month (PMPM) Cost Savings Estimates			
Medicaid population in intervention group:	10,665		
Post Intervention Costs (per patient)			
- Control Group:	\$5,295		
- Intervention Group:	\$4,730		
Average cost savings per patient	\$ 565		

Cost Per Member Per Month (PMPM)			
Number of months:	6		
Total cost difference between post intervention groups:	\$75,710		

PMPM Estimated Savings \$1.18

The Weitzman Institute is a program of **Commun** ty Health Center, Inc.

Key Lessons Learned



69% of eConsults did not require a face to face specialty visit



The Weitzman Institute is a program of **Commun** ty Health Center, Inc.

New England eConsult Network



The Weitzman Institute is a program of **Commun** ty Health Center, Inc.

eConsult Specialty Care:



 Cardiology
Orthopedics
Dermatology
Neurology
Pain Management (future)



NEECN: eConsult Workflow

Referral Coordination Model



The Weitzman Institute is a program of **Commun** ty Health Center, Inc.

New England eConsult Network: Payer Update



23

Commitments from:

- Medicaid (DT-CSS / CHCl only)
- Anthem (Connecticut only)
- HealthyCT
- Maine Community Health Options (ME only)

Discussions/expressions of interest:

- Humana (ME)
- Cigna Maine Medicaid (for Penobscot CHC)
- □ Harvard-Pilgrim

New England eConsult Network: Project Timeline



Phase 1: Implementation planning, set up, preparation for roll out: March 2014 through December 2014

Phase 2: Implementation Ramp Up January 2015 – February 2016

Platform development: January 2015

Platform testing: February 2015

Training and Launch: March 2015

PCP training (1 hour)

Referral coordinators (2 hours)

First eConsult for the NEECN: March 11, 2015

Phase 3: Full Implementation and Evaluation: March 2016 – February 2017



Questions?

The Weitzman Institute is a program of **Commun** ty Health Center, Inc.