Tips & Tricks to Improve Efficiency, Patient Management, & Cash Flow

- Block & Biggs Road Show
  - For copy of presentation go to:

www.BlockAndNation.com/BlockAndBiggs

Bradley M. Block, M.D. & William “Reddy” Biggs, M.D.

Who Are We?

- Bradley M. Block, M.D., FAAFP
  - Family Physician in independently owned, four physician Family Medicine group in Oviedo, Florida
  - eCW User for 14 years
- William “Reddy” Biggs, M.D., FACE, ECNU
  - Endocrinologist in independently owned, forty-five provider Internal Medicine Multi-Specialty group in Amarillo, Texas
  - eCW User for 12 years
  - Board Certified in Clinical Informatics
  - CPT reviewer for AMA

Why Were We Asked to Speak?

- Both of us:
  - Spoken together at NUC since 2008
  - "eClini-Geeks" on the eCW Web User's Forum for assisting users w/ expert eCW advice
    - Dr Block – written over 1,600 posts
    - Dr Biggs – written over 3,000 posts & is a Forum Moderator
  - Beta testers for new modules & versions of eCW
  - No Financial Incentives for anything we present

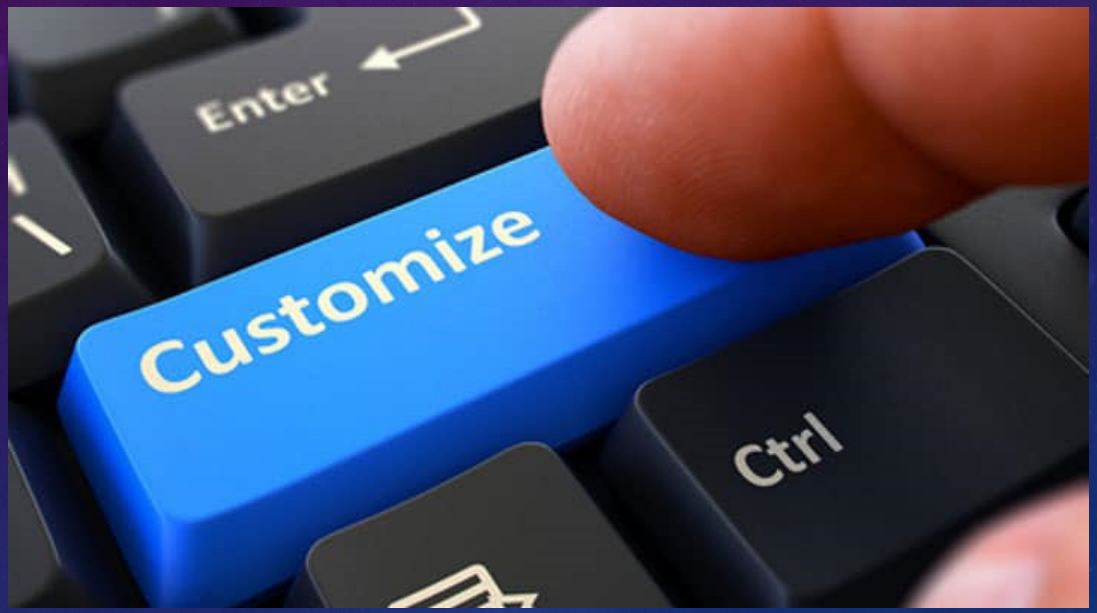
Goal of Our Talk –
Provide Beneficial Ideas You Can Implement Using Tools Available Through eCW

- Increase Efficiency of Providers & Staff
- Improve Documentation of Care
- Enrich Quality of Patient Care
- Enhance Patient Engagement & Satisfaction
- Improve the Health of your Patient Population
- Save Money & Boost Income

Overview of Our Presentation

- Full Hour of Tips, Tricks & Examples
  - Mostly for Medical Providers but include Front Office & Billing
- Lots of new ideas & some from last year
- Make Note of at least 3-5Things Presented
- Question & Answer Session at the End
  - We'll stay after as long as it takes
  - We have slides from old presentations
  - Make notes so you don't forget!

Our Theme:
Customize Your Daily Workflow in eCW



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Front Office & Mid Office of the Past

Front Office & Mid Office of the Future

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Customize Your Patient Interactions - TeleVisits are Calling for You

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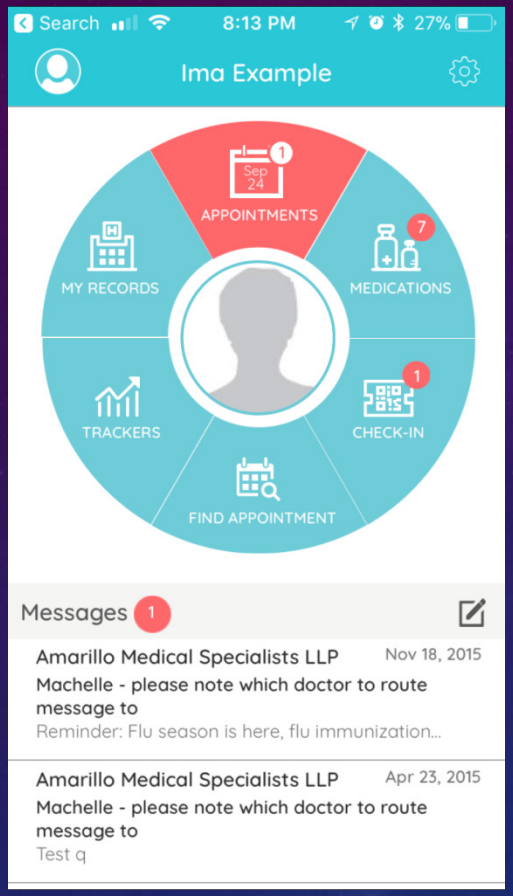
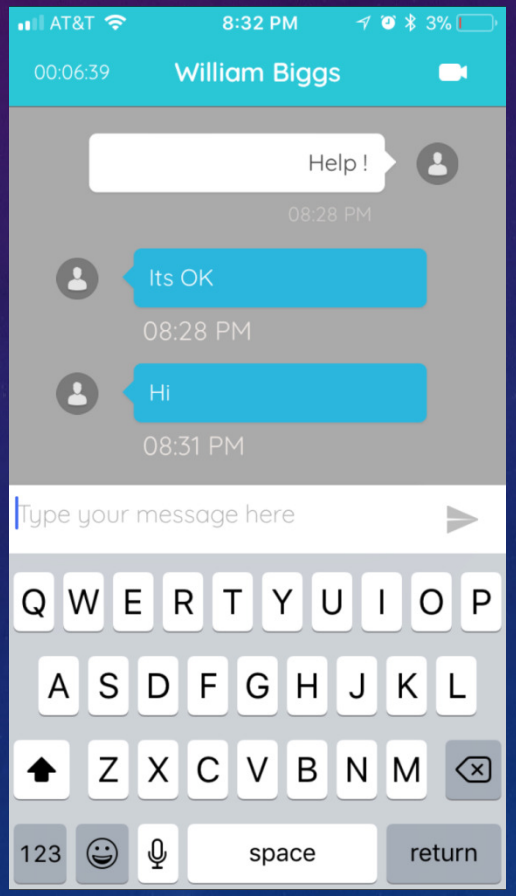
TeleVisits - A Healow Perspective





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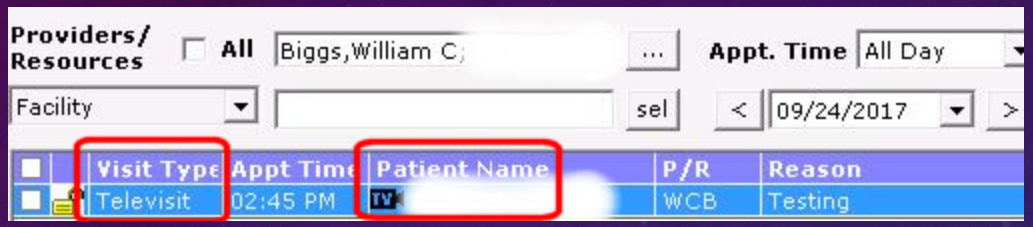
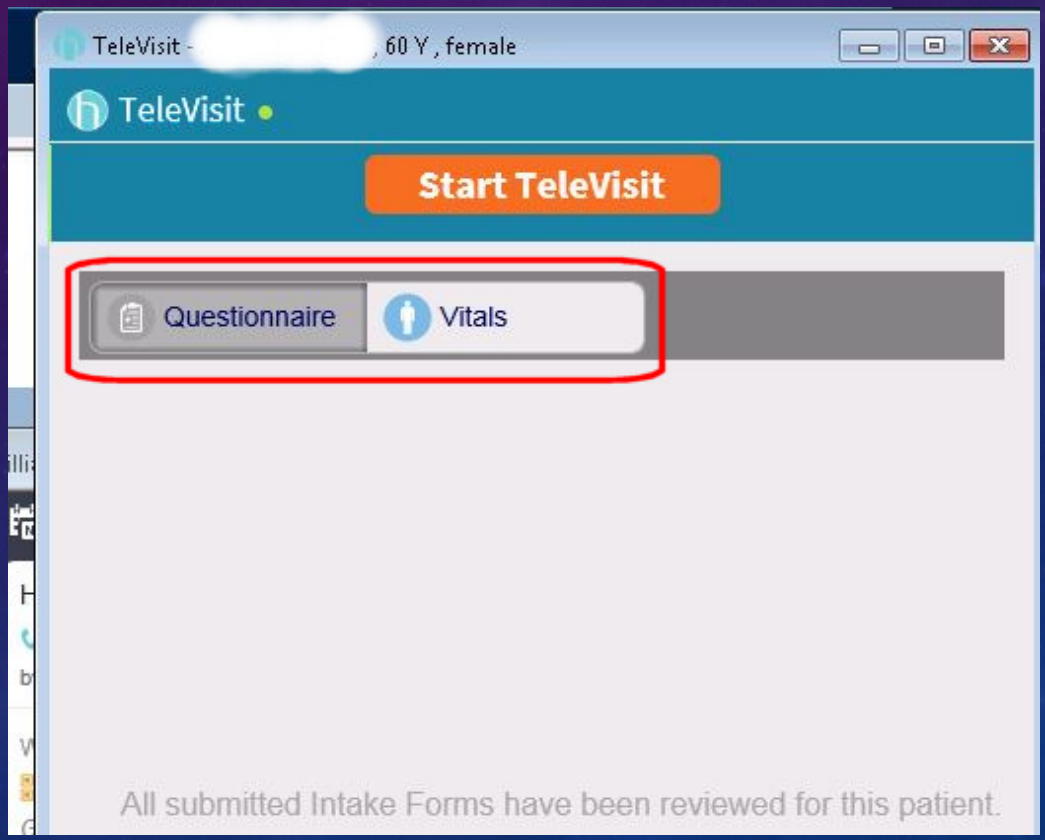
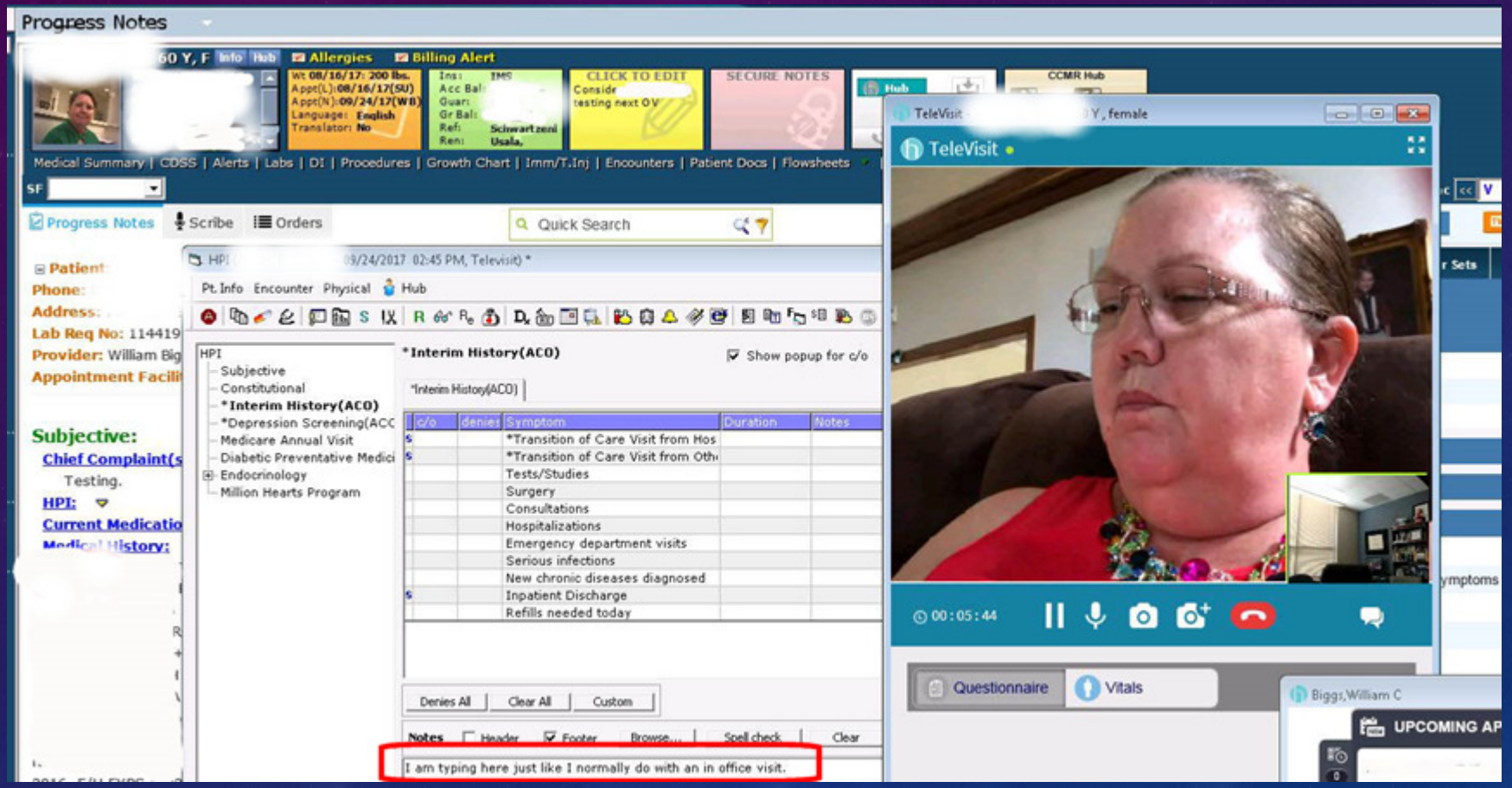
TeleVisits – Ready, Set, Go





Telehealth Visits in Action



This is New - Make a Handout for Patients

Amarillo Medical Specialists, LLP
1215 S. Coulter Street
Amarillo, Texas 79106

Welcome to TeleHealth !
USING THE HEALOW APP on your iPhone or Android
for remote Tele Health visits

BEFORE YOU START

1) **Verify** that you can use your Healow app to connect to our patient portal. Can you see your labs, and your appointments ?

2) **Check** to see if the TeleVisit appointment is on your list. It will say 'Televisit' toward the right. If you tap Televisit, you can choose to set a reminder 1 hour ahead so your phone will remind you close to when its time for your appointment.

3) Telehealth visits contain the same content as a regular visit, and we put them on our schedule just like a regular visit in person. **Please log in on time so that we can see you.**

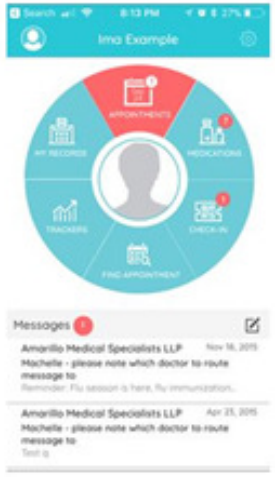
4) Healow Telehealth uses your phone, screen, network connection, microphone and camera ALL AT THE SAME TIME. It uses up a lot of battery life sometimes, **so please have your phone charged up, or plug your phone into a power source!**

5) **If you have diabetes,** our office would like for you to share your blood glucose meter, insulin pump or artificial pancreas information. If you subscribe to Glooko, Medtronic CareLink, or Roche AccuChek connect, please upload at least 30 minutes before your visit. That way it will be available for us to view.

STARTING THE VISIT

7) You can log in up to 15 minutes before your scheduled appointment time. Go to the Healow app on your phone and log in. Go to the appointments area, which should be in RED for your visit today. Tap on Appointments.

AMS Telehealth Visit Instructions v0.9 09/24/2017



Copy of this available on our website

8) You should see the todays visit. Tap on the icon of a TV camera where it says Televisit. You will then see 'Appointment Details' at the top. At the BOTTOM , there is an orange band where you can tap "Start Televisit". Tap there when you are all ready to start.

Ideas to Improve Your Workflow

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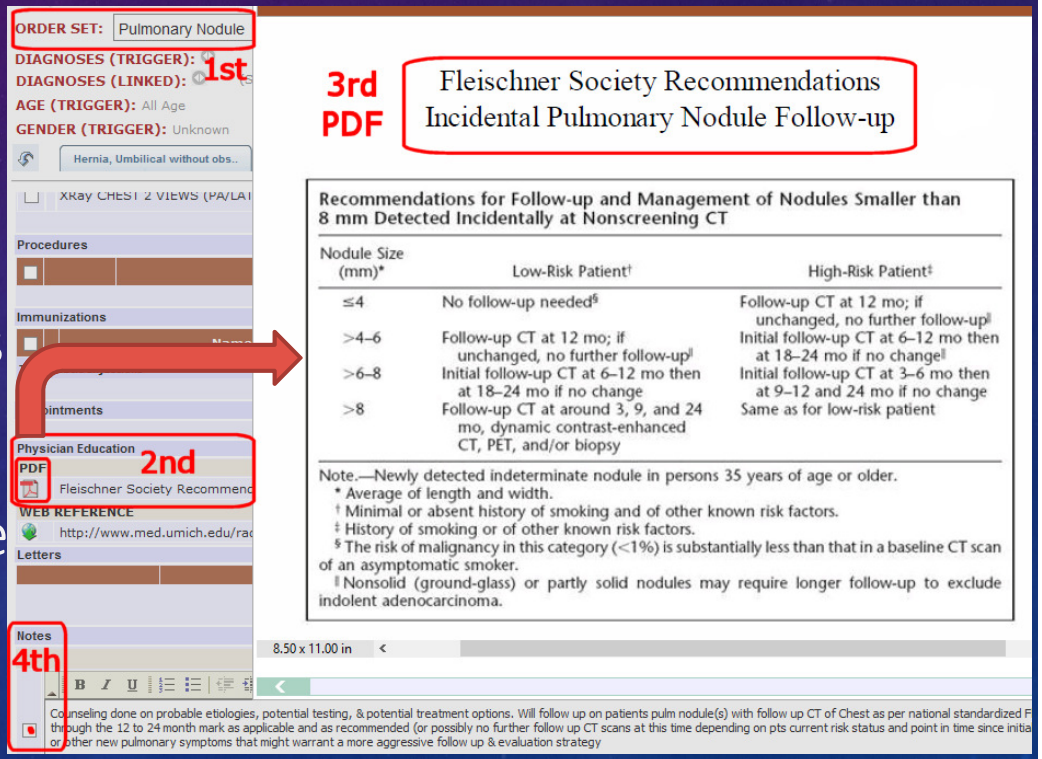
Order Sets:
Not Just for Documentation & Orders – Use for TX Plan Algorithms

- Great Option for Providing Medical Evidence Based & Nationally Standardized TX Protocols & Algorithms
- Example – Pulmonary Nodule Order Set - Includes national standardized recommendations for follow up based on multiple criteria parameters
- Add OS TX notes & test orders as applicable



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Templates:
Not Just for Documentation & Orders –
Use for TX Plan Safety Reminders

- Example – Eliquis Anticoagulant TX Template
- Inserts TX notes regarding care
- Most Helpful – Includes criteria for when dosage needs to be adjusted to avoid bad outcomes – no more having to look up PDR info regarding approp dosage
- Carry TX notes forward at F/U visits as continued reminders

Assessment:

Assessment:

- Long term ANTICOAGULANT use (current) - Z79.01 (Primary)

Plan:

Treatment:

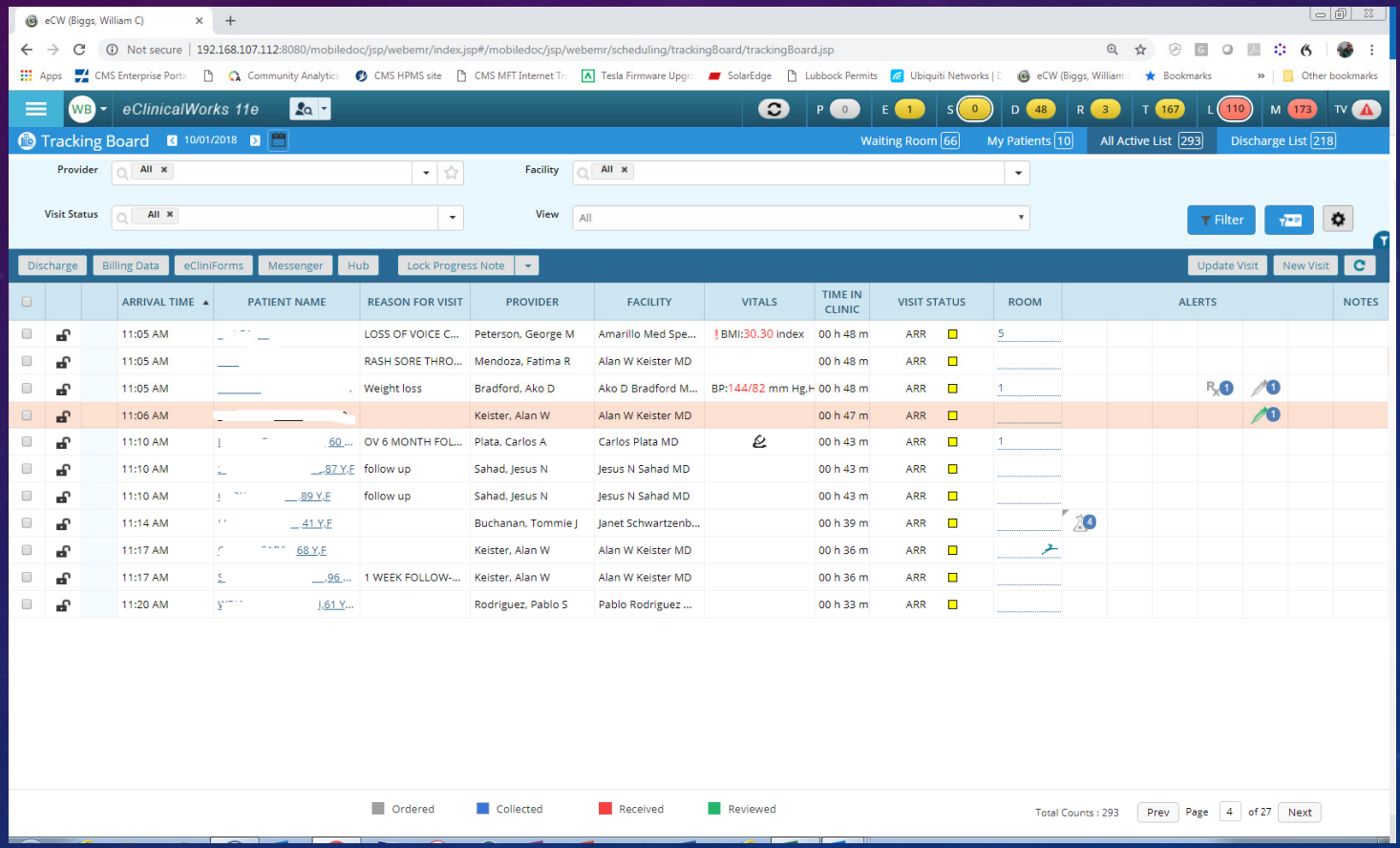
Long term ANTICOAGULANT use (current)

Start Eliquis tablet, 5 mg, 1 tab(s) for blood thinner, orally, 2 times a day, 30 day(s), 60, Refills 11

Notes: continue current anticoagulant therapy and educated on Pradaxa or Xarelto or Eliquis therapy as appropriate,, call if signs or symptoms of active bleeding or bruising problem, .Counseling done on risks/benefits/ advantages of patient's therapies & treatment options., Counseling done on probable etiologies, potential testing, & potential treatment options., Avoid all NSAID's OTC or prescription. Will use Eliquis b/c of better M&M risk reduction data versus other anti-coagulants. If on Eliquis, will monitor for 2 out of 3 criteria that warrants low dose therapy including age of 80 years old or older, body weight of 60 kg (132 lbs) or less, and/or serum creatinine of 1.5 or higher, Pt provided with RX Education materials including drug warnings, interactions, and potential side effects..

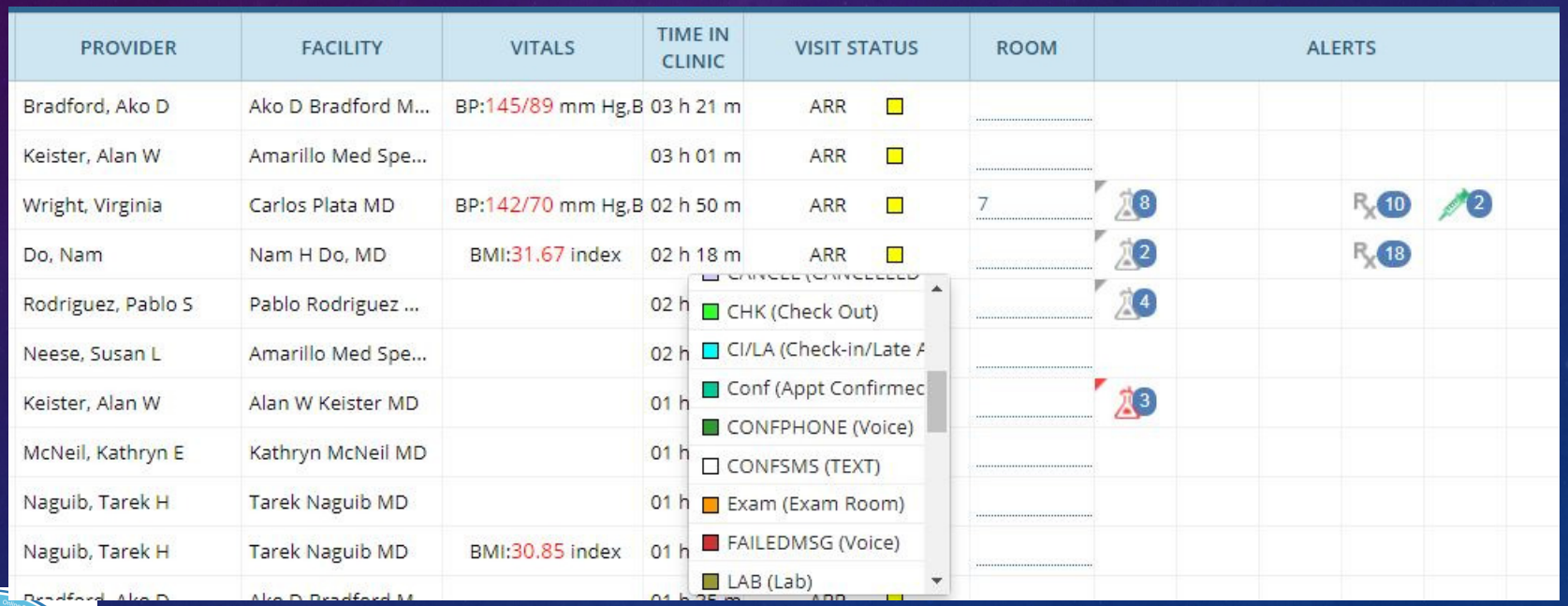
Take a Ride on the Tracking Board
(Chrome only) (v11)

- Patients dynamically appear and disappear as the come in



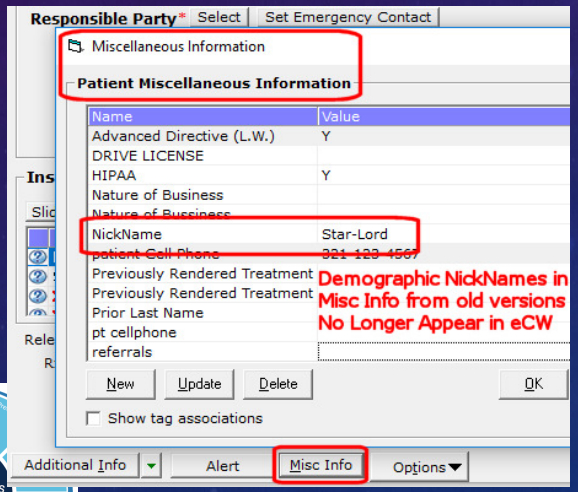
Tracking Board Experience

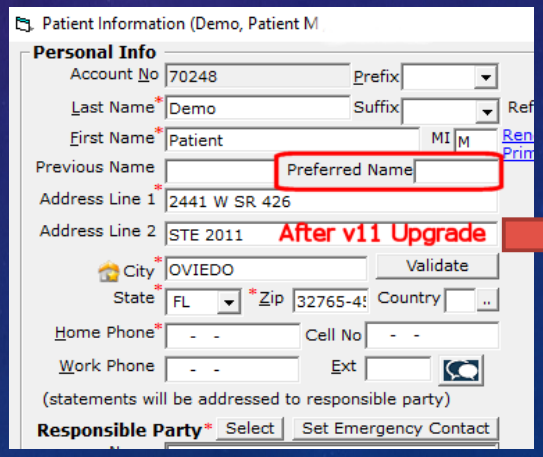
- Change visit status, provider, & room
- Can review lab & xray orders and eRx from here.
- Nurses / MA's should love this

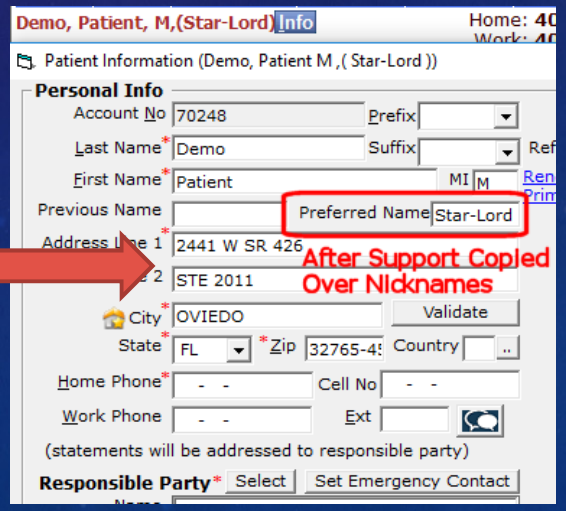


Nicknames (v11) - Quick Fix Needed in Patient Demographics After v11 Upgrade

- Demographics “Misc Info” “NickName” Box No Longer Functions in v11
- V11 Uses New “Preferred Name” box to display Nicknames/Preferred Names – but new box triggers name to appear in lots more places in eCW
- Support can run database query to copy all Nicknames from Misc Info NickName box to new Preferred Name box







Customize Lab & DI Workflow for Optimal Results

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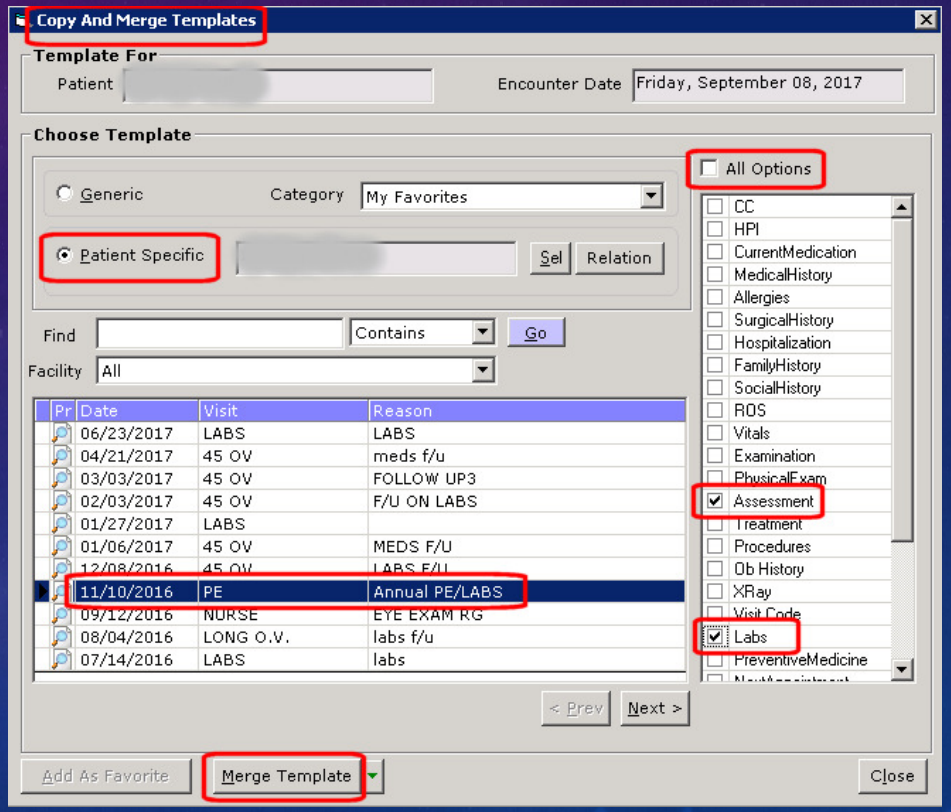
Use Patient Specific Templates to Order Long Lists of Labs Unique to that Patient with Just One Click

- Fast way to order labs linked to multiple DX codes – i.e.- Medicare pts or complex pts w/ lots of medical DX's
- Choose past visit and merge DX codes & Lab Orders



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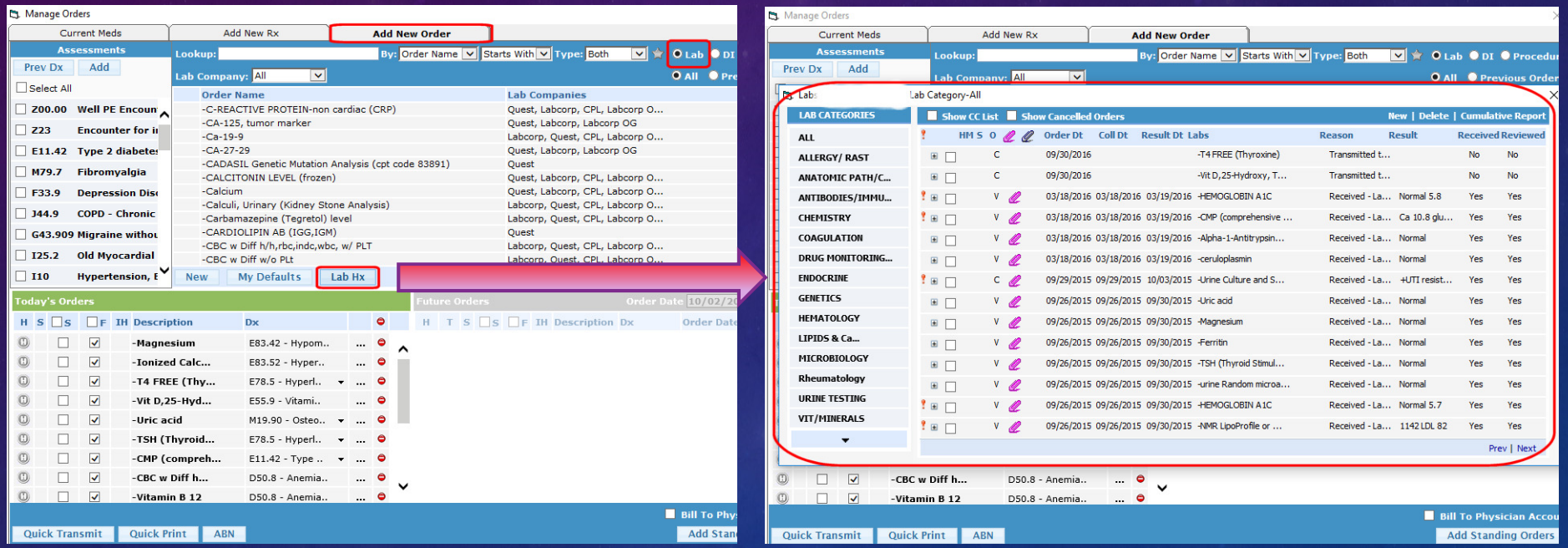
When Choosing New Tests to Order in the Test Order Screen – Get Quick Refresher for Past Testing via "Hx" Button

- Link for Labs, DI, & Procedures



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Just the Right Medicine to Customize Your Rx Workflow

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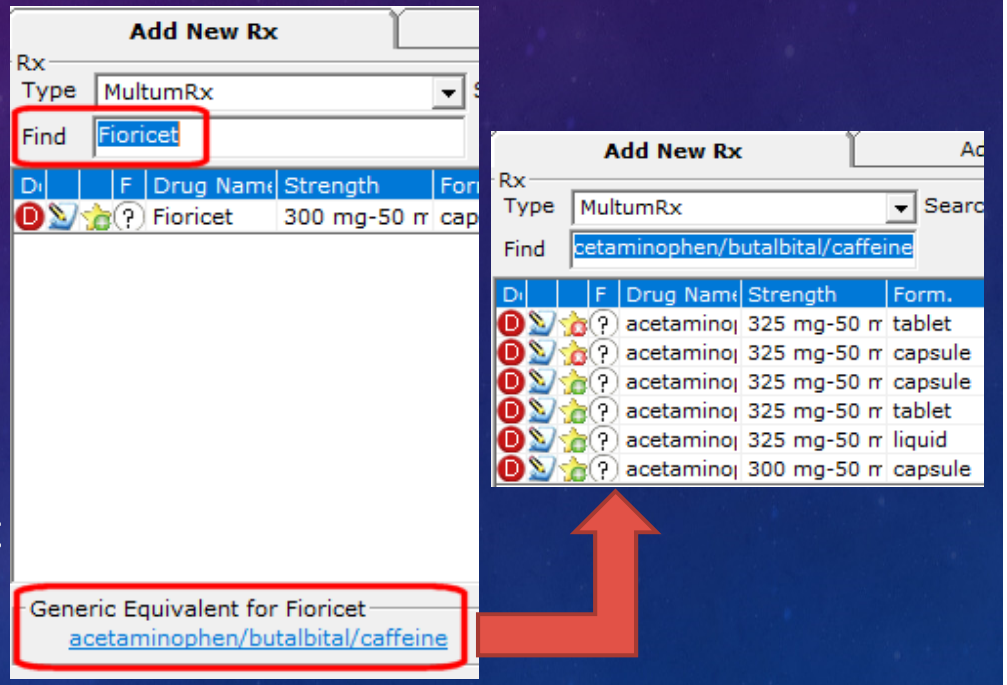
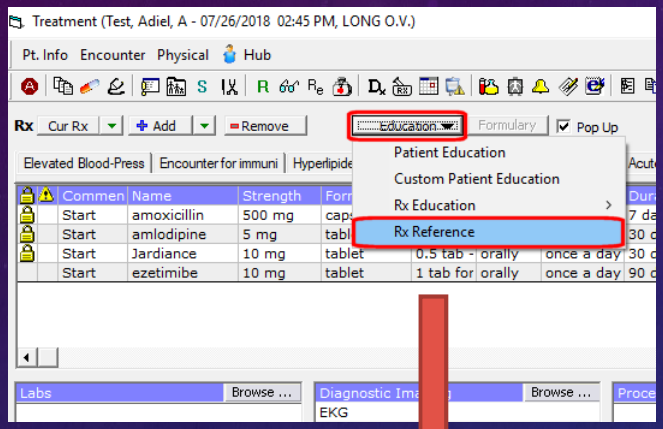
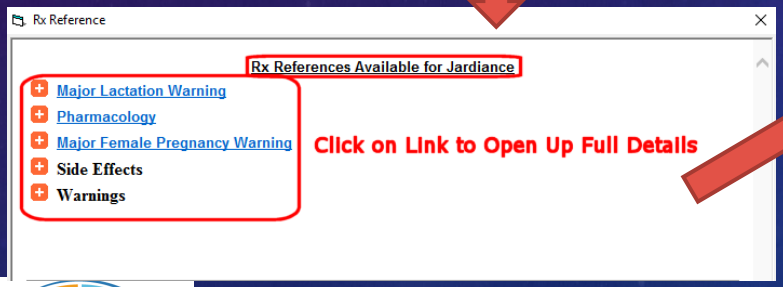
Tired of Searching for Those Complex Generic Combination Drug Names When Selecting an RX – Find & Prescribe Faster!

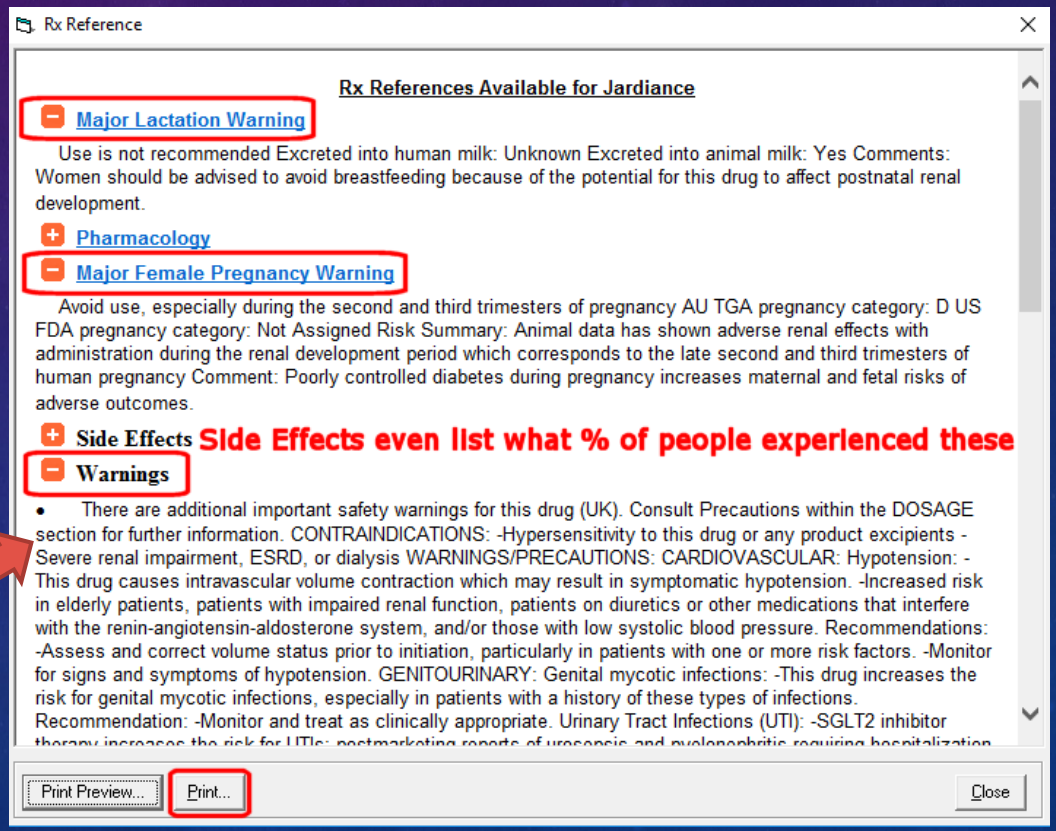
- Generic combination meds often listed backwards compared to norm (or listed with unusual abbreviations)
- Examples - pain meds containing acetaminophen or BP meds with hydrochlorothiazide
- TRY: Search for the brand name, then click on "Generic Equivalent" blue link at the bottom of the screen to jump to the desired med



How about a PDR at your fingertips every time you prescribe a drug?
New RX Reference Tool
in the TX Screen for Visits (& TE V.V.'s) (v11)







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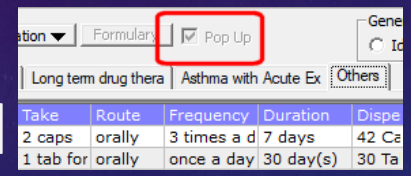
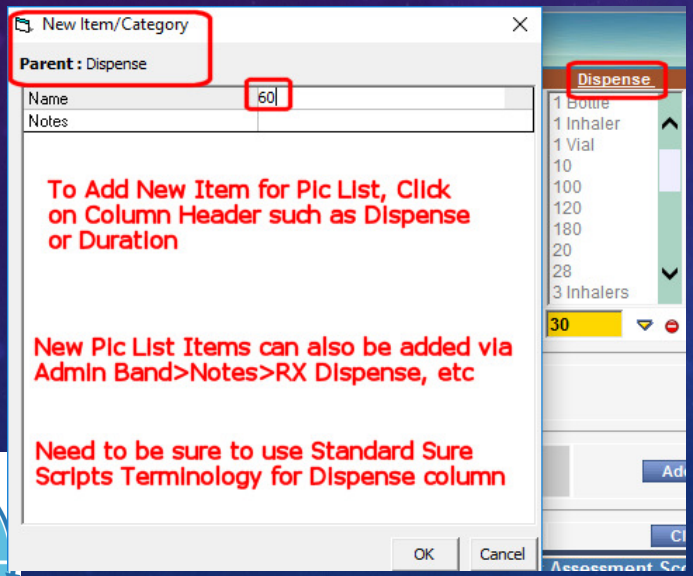
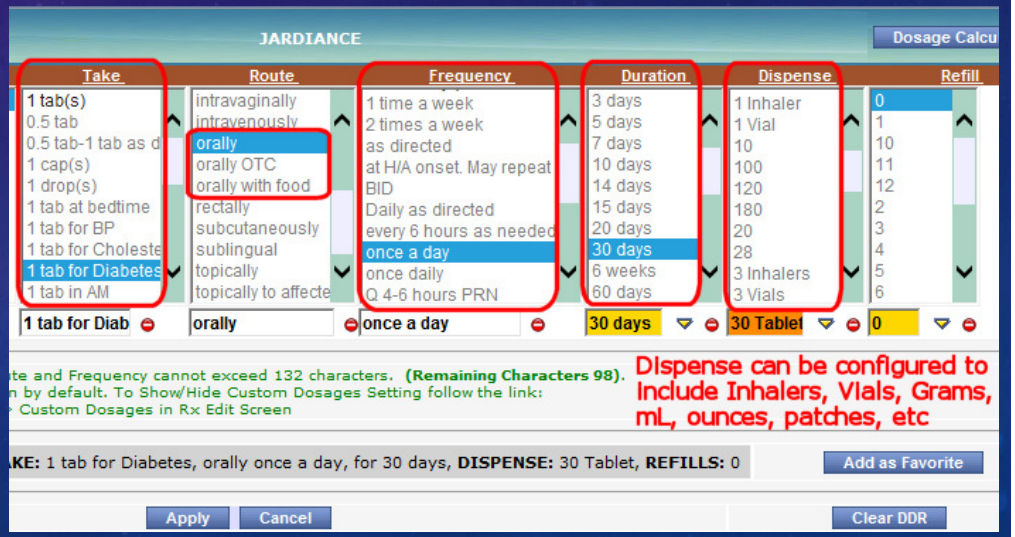
Customize RX Edit Screen Pic Lists – Add Commonly Used Items/Phrases to Pic Lists

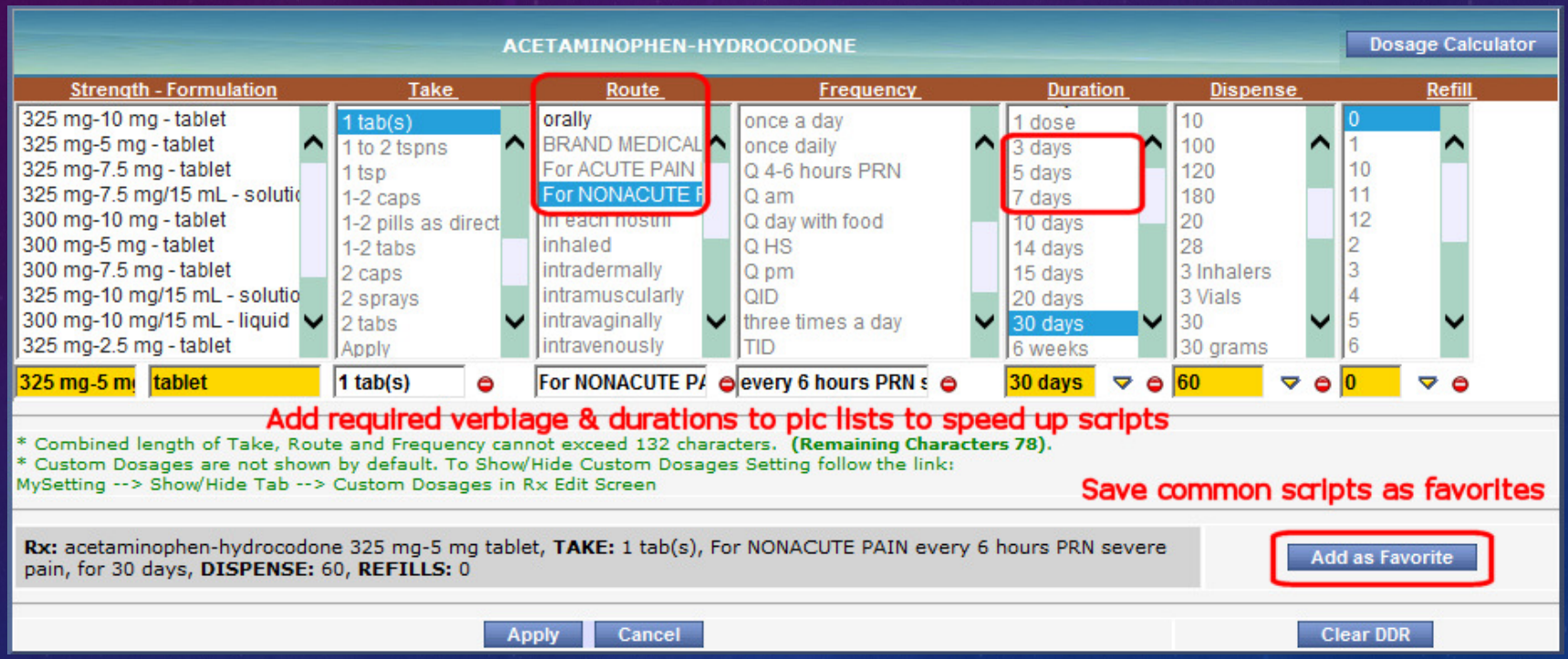
- Forced to use pop-up RX Edit screen in v11 b/c non-pop-up free text option is disabled
- Add Duration/Dispense/Refill Choices to avoid using pop-up calculator window
- Add common instructions in Take/Frequency/Route





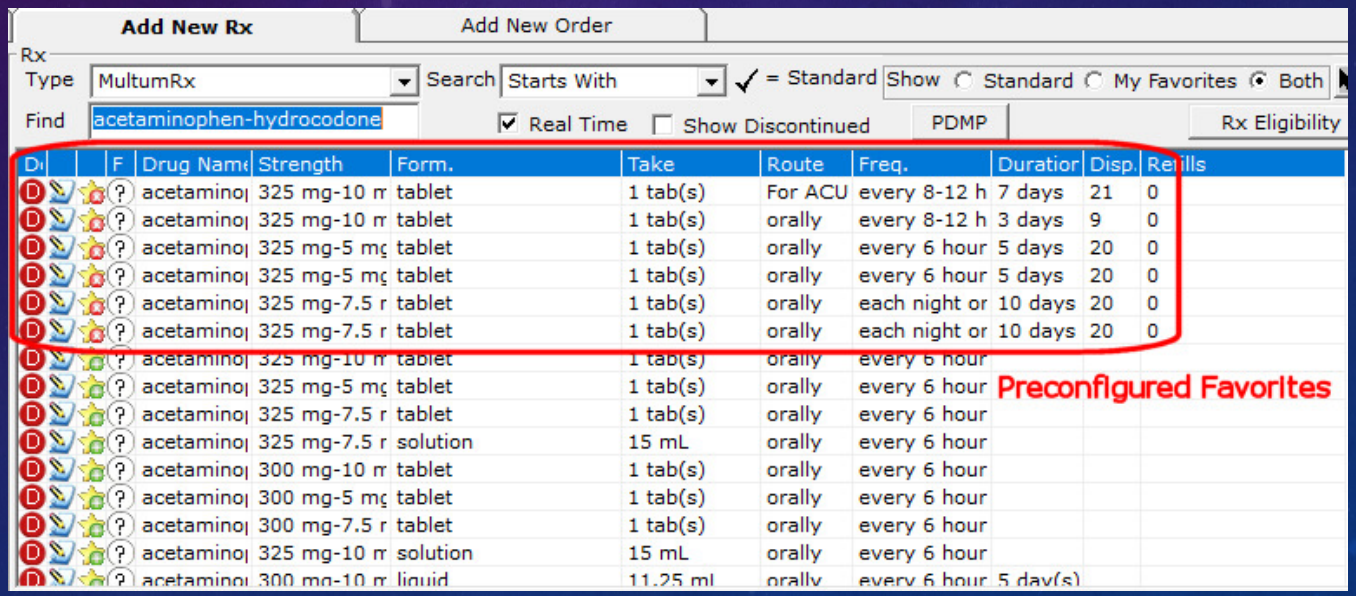


Need Any Special State/Insurance/Pharm Specific RX Requirements – i.e.- Opioid or Brand Name Scripts



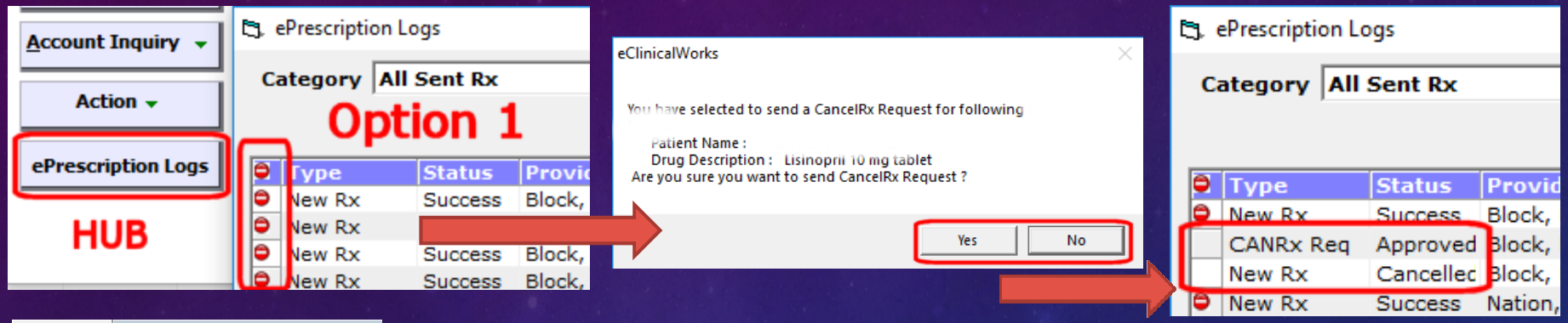
Customized & Preconfigured "Favorites" Avoid RX Edit Time for Quick &Easy Prescribing in Future

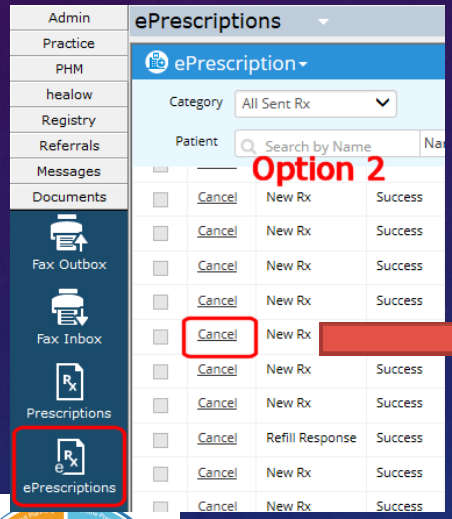
- Can have multiple preconfigured Favorites for each drug – shows up as more options to click under single drug name

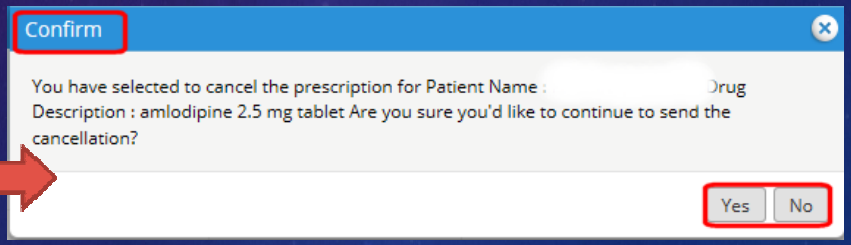


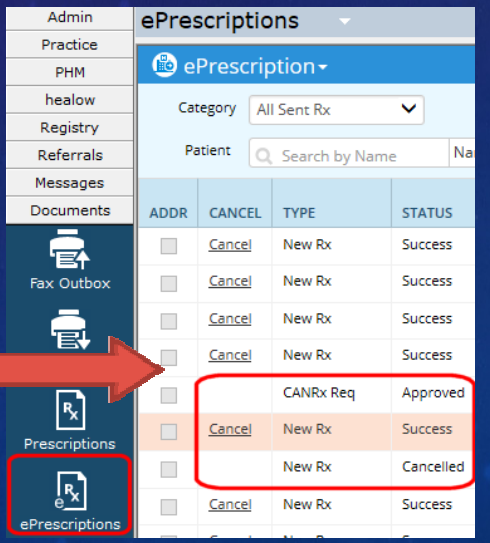
Di	F	Drug Name	Strength	Form.	Take	Route	Freq.	Duration	Disp.	Refills
		acetamino	325 mg-10 m	tablet	1 tab(s)	For ACU	every 8-12 h	7 days	21	0
		acetamino	325 mg-10 m	tablet	1 tab(s)	orally	every 8-12 h	3 days	9	0
		acetamino	325 mg-5 mg	tablet	1 tab(s)	orally	every 6 hour	5 days	20	0
		acetamino	325 mg-5 mg	tablet	1 tab(s)	orally	every 6 hour	5 days	20	0
		acetamino	325 mg-7.5 r	tablet	1 tab(s)	orally	each night or	10 days	20	0
		acetamino	325 mg-7.5 r	tablet	1 tab(s)	orally	each night or	10 days	20	0
		acetamino	325 mg-10 m	tablet	1 tab(s)	orally	every 6 hour			
		acetamino	325 mg-5 mg	tablet	1 tab(s)	orally	every 6 hour			
		acetamino	325 mg-7.5 r	tablet	1 tab(s)	orally	every 6 hour			
		acetamino	325 mg-7.5 r	solution	15 mL	orally	every 6 hour			
		acetamino	300 mg-10 m	tablet	1 tab(s)	orally	every 6 hour			
		acetamino	300 mg-5 mg	tablet	1 tab(s)	orally	every 6 hour			
		acetamino	300 mg-7.5 r	tablet	1 tab(s)	orally	every 6 hour			
		acetamino	325 mg-10 m	solution	15 mL	orally	every 6 hour			
		acetamino	300 mg-10 m	liquid	11.25 ml	orally	every 6 hour	5 day(s)		

“Oh, wait that’s the wrong pharmacy” Answer - Cancel It! (v11)









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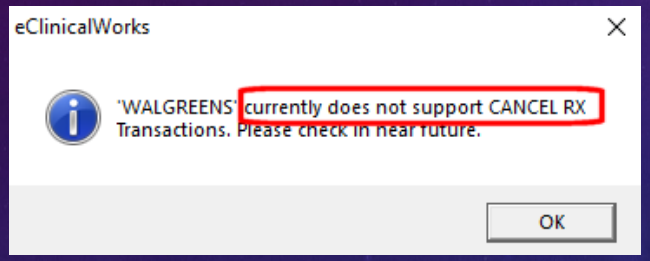
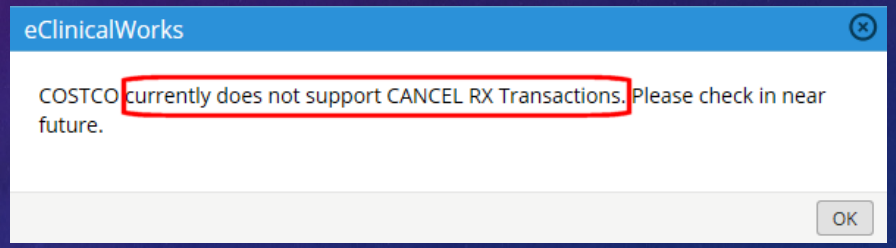
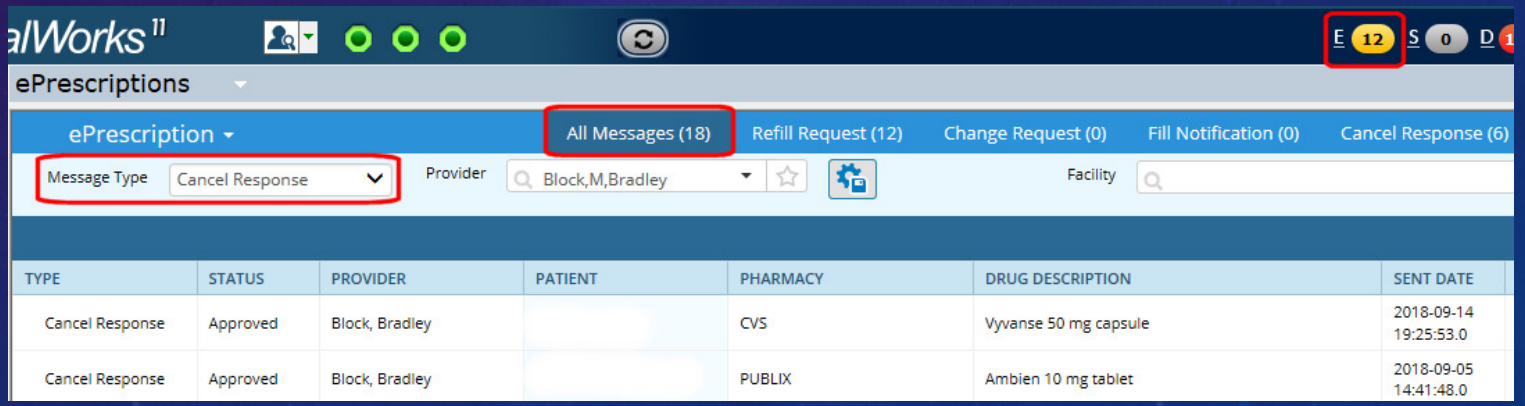
Cancel RX Tips

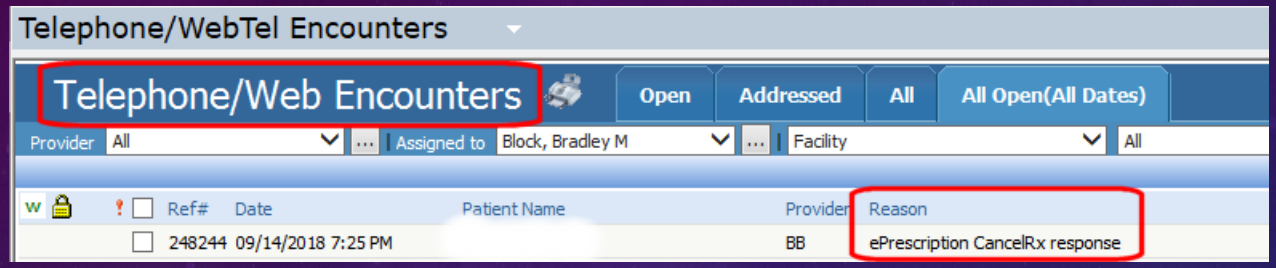
- Currently works for CVS, Publix, Express Scripts, Humana Pharmacies
- Not for Walgreens, Walmart, Sam's, Costco, Optum, Caremark

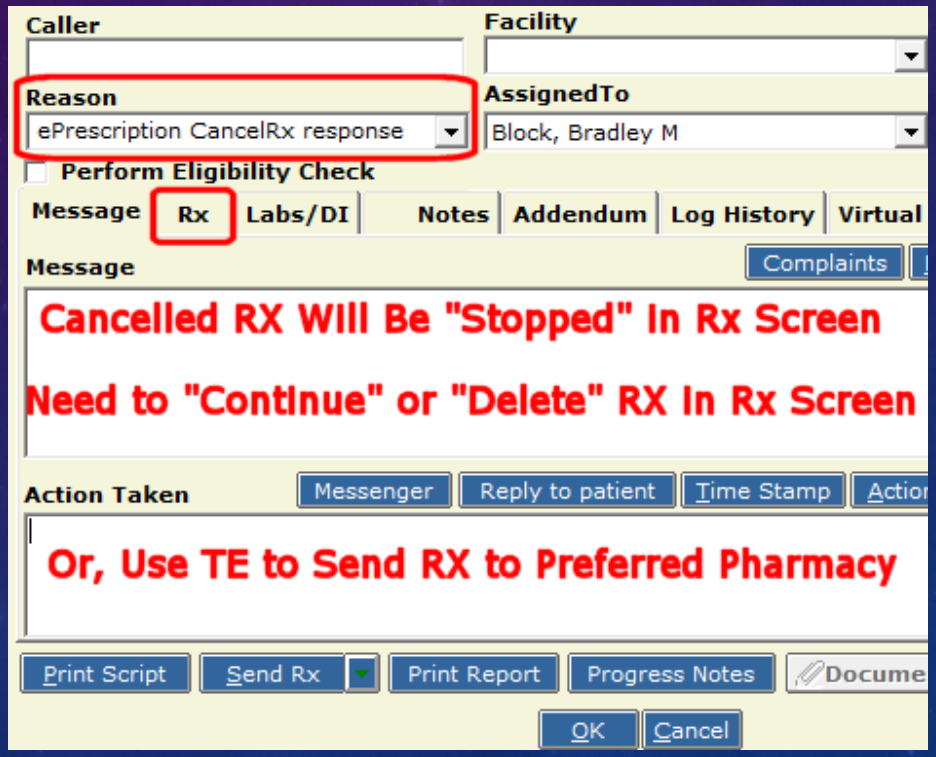






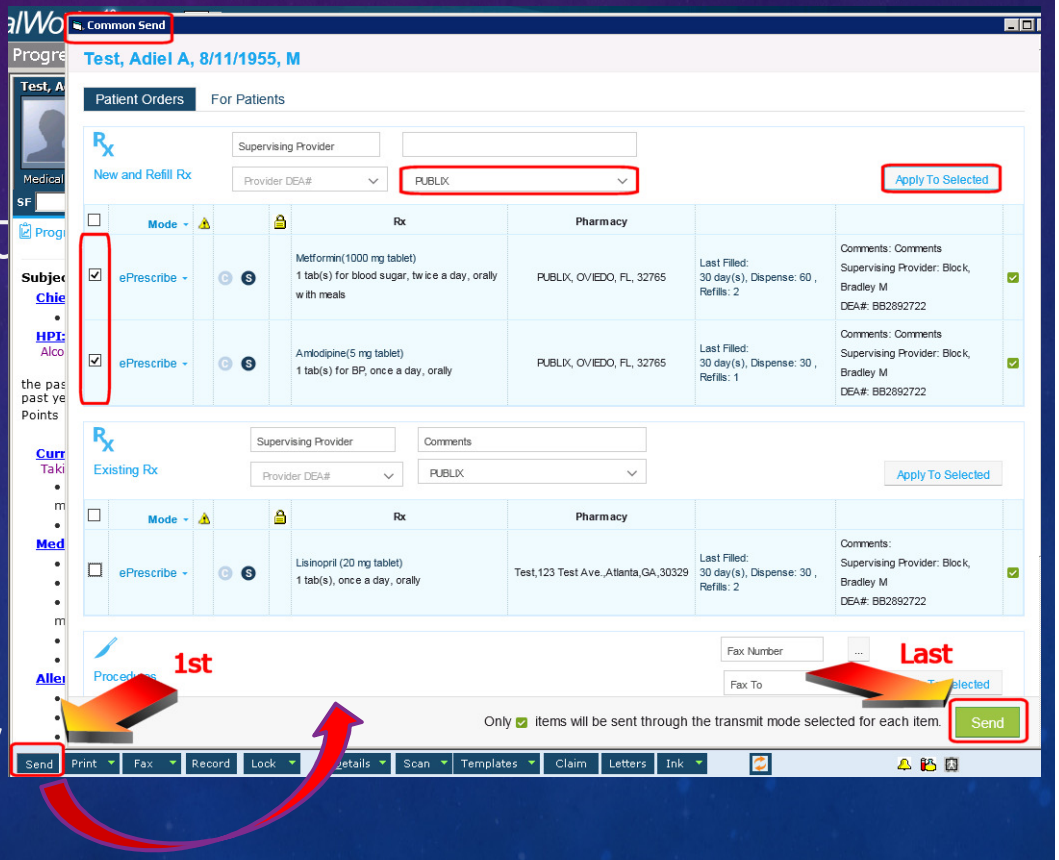
Important Cancel RX Workflow Tip





Send Locked RX to Different Pharmacy w/o a New TE and w/o Cancelling (espec if not on v11) - STOP Singing the Locked RX Blues

- Use the "Common Send" button to Resend locked RX's
- Be sure to link correct pharmacy, and uncheck other Rx's/labs/DI/PtEd
- Not for EPCS
- Works with TE's from Progress Note View



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Controlled Drugs
- Get Hooked on New Habits -

New EPCS Tools

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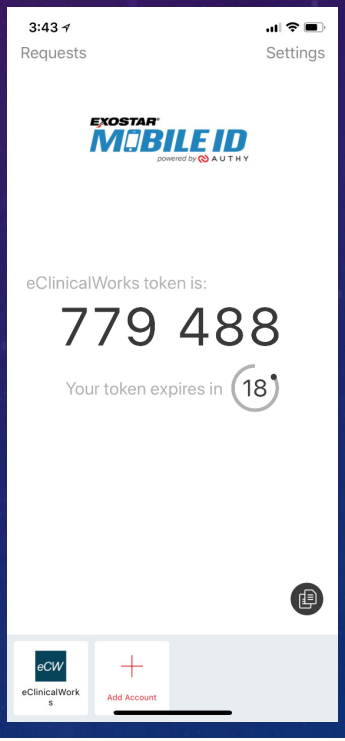
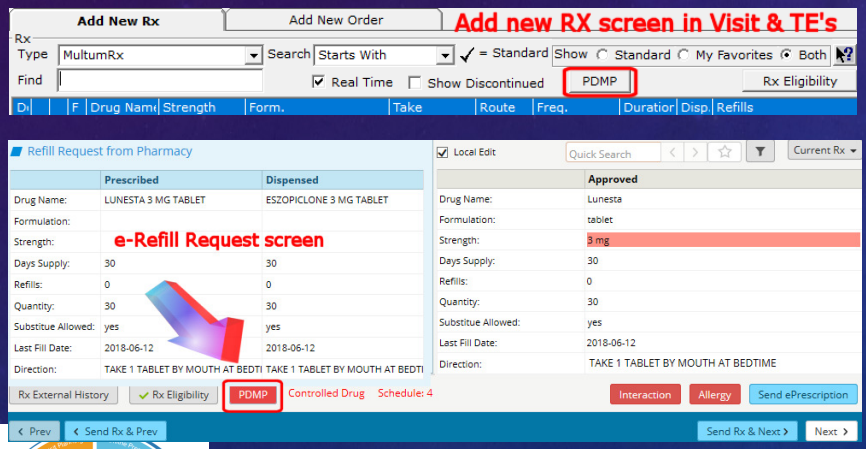
Tired of Carrying your EPCS Token Everywhere – Try "Authy" App for Smart Phones & Watches (v11)

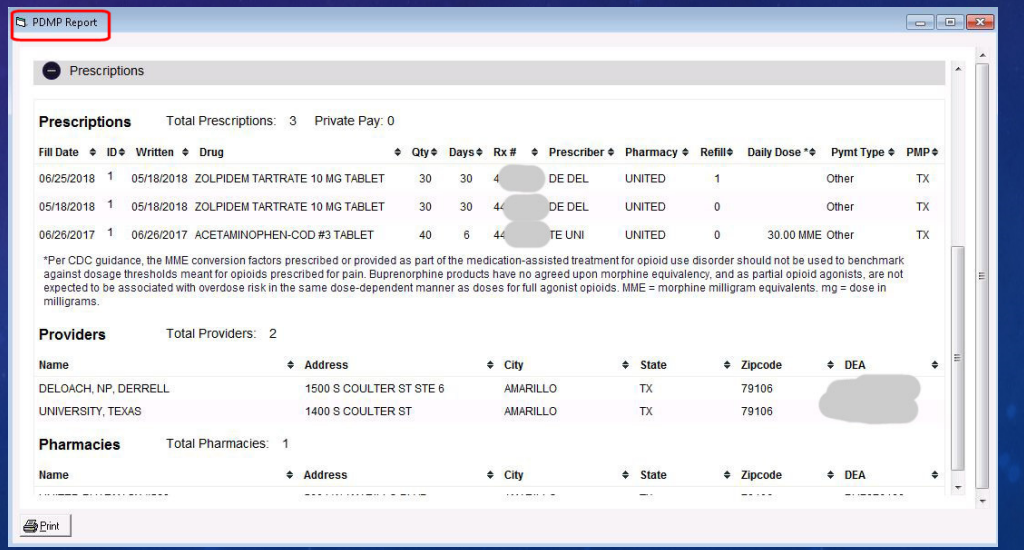
- Download & Install "Authy" App from app store
- Activate in eCW via Tools>ePrescription>EPCS Register Prescriber>Manage Account>Manage Mobile Credential>Add Credential & Follow Instructions to "Bind" App



Does Your State Have Strict Opioid Prescribing Laws - Try the new PDMP Function to Verify Controlled Drug Scripts Filled by Patients (v11)

- Activate APPRISS to connect to your state specific PDMP directly from eCW via PDMP links present in all prescribing screens
- Tip #1: Can request APRISS to show PDMP data from all states they service - no extra cost & no hit to performance
- Tip #2: APRISS Settings in eCW - Uncheck option “Enable Popup Reminders” to skip unnecessary Provider “Reminder Alerts”





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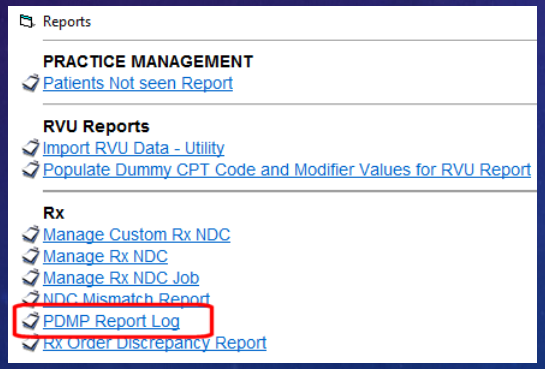
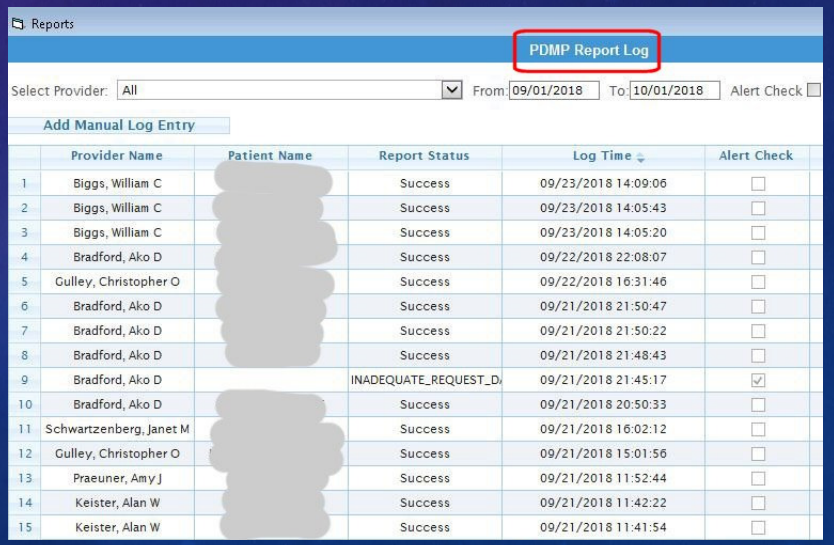
APPRISS PDMP Functionality Keeps Required Logs

- eCW maintains logs verifying providers checked state Prescription Drug Monitoring Program Gateway
- Logs of all PDMP use found in Reports Console
  - (via: Reports>Report Console>PDMP Report Log)
- FYI – APPRISS has annual cost which varies by state
- Use of PDMP Functionality will Boost MIPS score in 2019





	Provider Name	Patient Name	Report Status	Log Time	Alert Check
1	Biggs, William C		Success	09/23/2018 14:09:06	
2	Biggs, William C		Success	09/23/2018 14:05:43	
3	Biggs, William C		Success	09/23/2018 14:05:20	
4	Bradford, Ako D		Success	09/22/2018 22:08:07	
5	Gulley, Christopher O		Success	09/22/2018 16:31:46	
6	Bradford, Ako D		Success	09/21/2018 21:50:47	
7	Bradford, Ako D		Success	09/21/2018 21:50:22	
8	Bradford, Ako D		Success	09/21/2018 21:48:43	
9	Bradford, Ako D		INADEQUATE_REQUEST_D	09/21/2018 21:45:17	☑
10	Bradford, Ako D		Success	09/21/2018 20:50:33	
11	Schwartzenberg, Janet M		Success	09/21/2018 16:02:12	
12	Gulley, Christopher O		Success	09/21/2018 15:01:56	
13	Praeuner, Amy J		Success	09/21/2018 11:52:44	
14	Keister, Alan W		Success	09/21/2018 11:42:22	
15	Keister, Alan W		Success	09/21/2018 11:41:54	

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Be a Star Performer in Your ACO & Insurance Networks & MIPS While Making More $ and Boosting Patient Satisfaction

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Customize Interoperability Options – Help Yourself While Helping Patients

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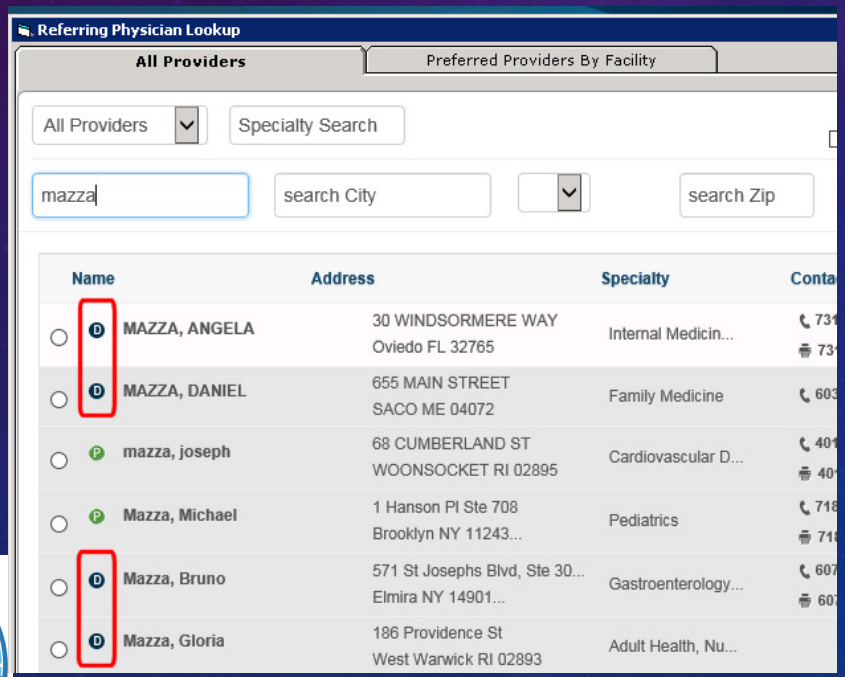
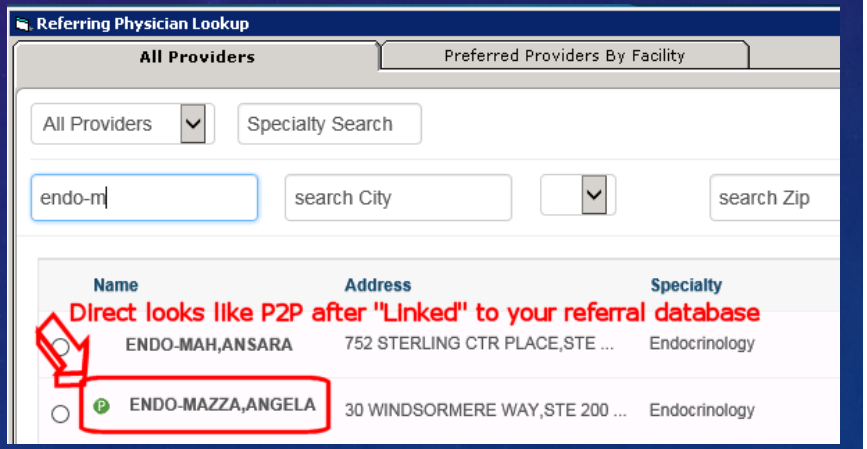
Coordinate Care Better with non-eCW Providers while Boosting MIPS Score

- National interoperability network exists outside of eCW's P2POpen for connecting EMR's
- Works just like sending a referral to any P2P provider
- Connect to non-eCW Providers (not on P2POpen)
- Accurate & Reliable Data Sharing on Patients
- Boost MIPS Score for electronic referrals
  - up to 10% of MIPS ACI/PI score

Sign Up for “Direct Plus”

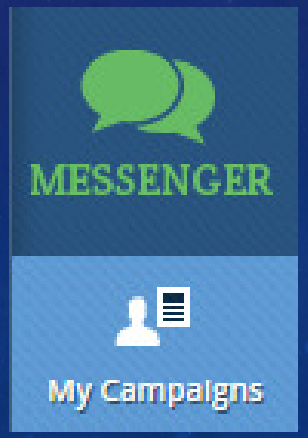
- Through eCW Support - Small cost per provider
- Significantly expands list of providers for sending electronic referrals
- “Direct Trust” Providers automatically show up in Referring Physician Look Up screen





Messenger Campaigns for Care Reminders – I'm Now a Believer

- Previously ONLY sent "free" care reminders via the portal from Registry generated lists since most pts web enabled
- Last spring tried Campaigns for Well PE Reminders for overdue Adults 40 yrs old
- Later added Well PE Reminders for 5-18 y/o's
- Sent only Email Reminders
- Instantly generated more visit volume
- Helps Boost P4P Preventive Care Scores



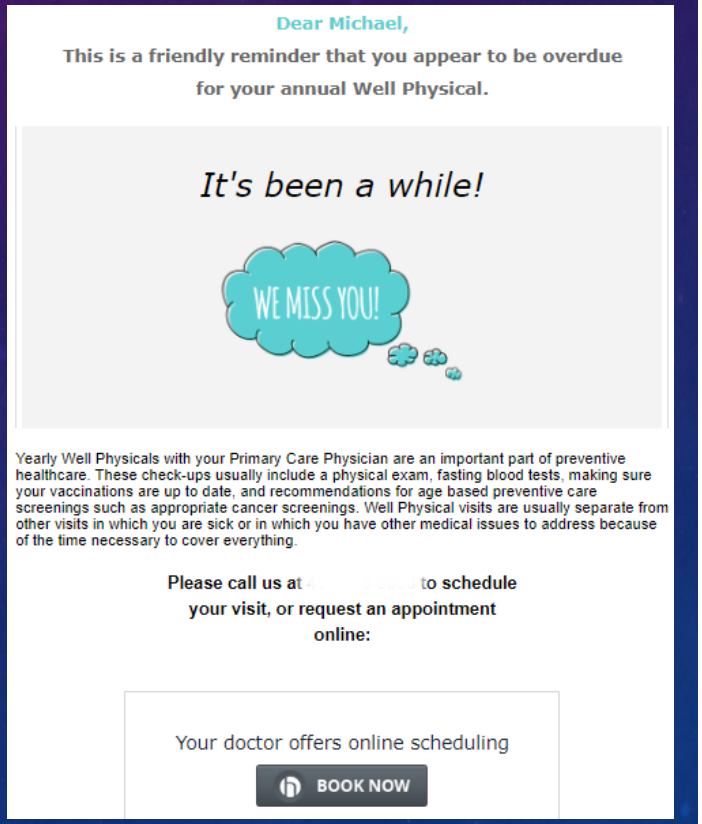
Messenger Campaigns
= Money Campaign$

- Dr #1:
- May 2018 worked 3 less days than April
- Had 21% more total visits in May than April (& similar jump vs May 2017)

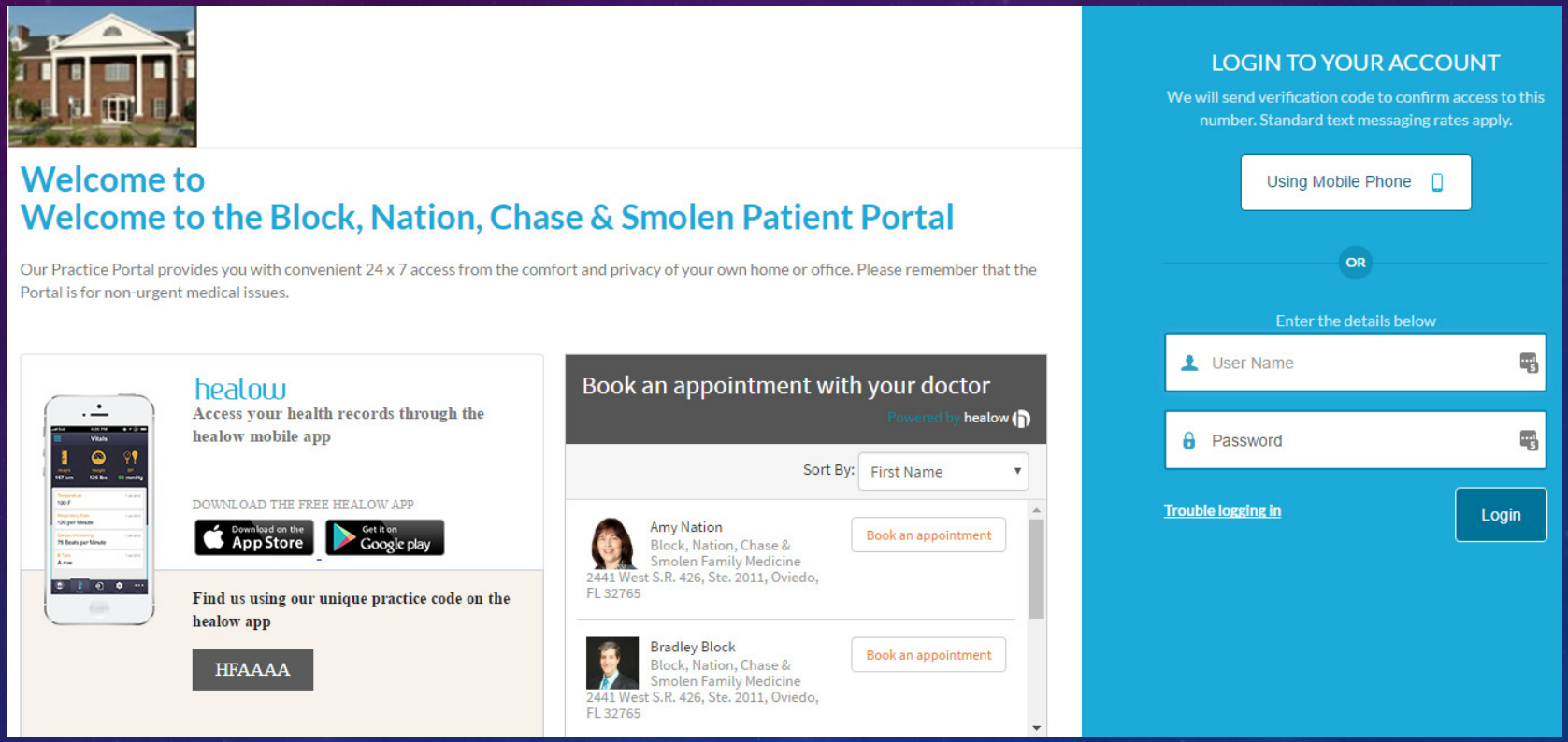
- Dr #2:
- May 2018 worked 1 less day than April
- Had 10% more total visits in May than April (& similar jump vs May 2017)

Messenger Campaign Tips

- Emails & Texts generate more responses than Portal Messages – Patients can instantly read message & request/make appts – No logging in required - No delays or forgetting to F/U
- Besides phone #, Included Healow Scheduling Widget for easy access to schedule appts anytime of day or night
- Preconfigured Campaigns can all be customized – text & graphics can all be edited and copied & pasted including from one Campaign to another



Prioritize & Improve Patient Engagement with Portal & Healow to Boost MIPS & P4P Scores



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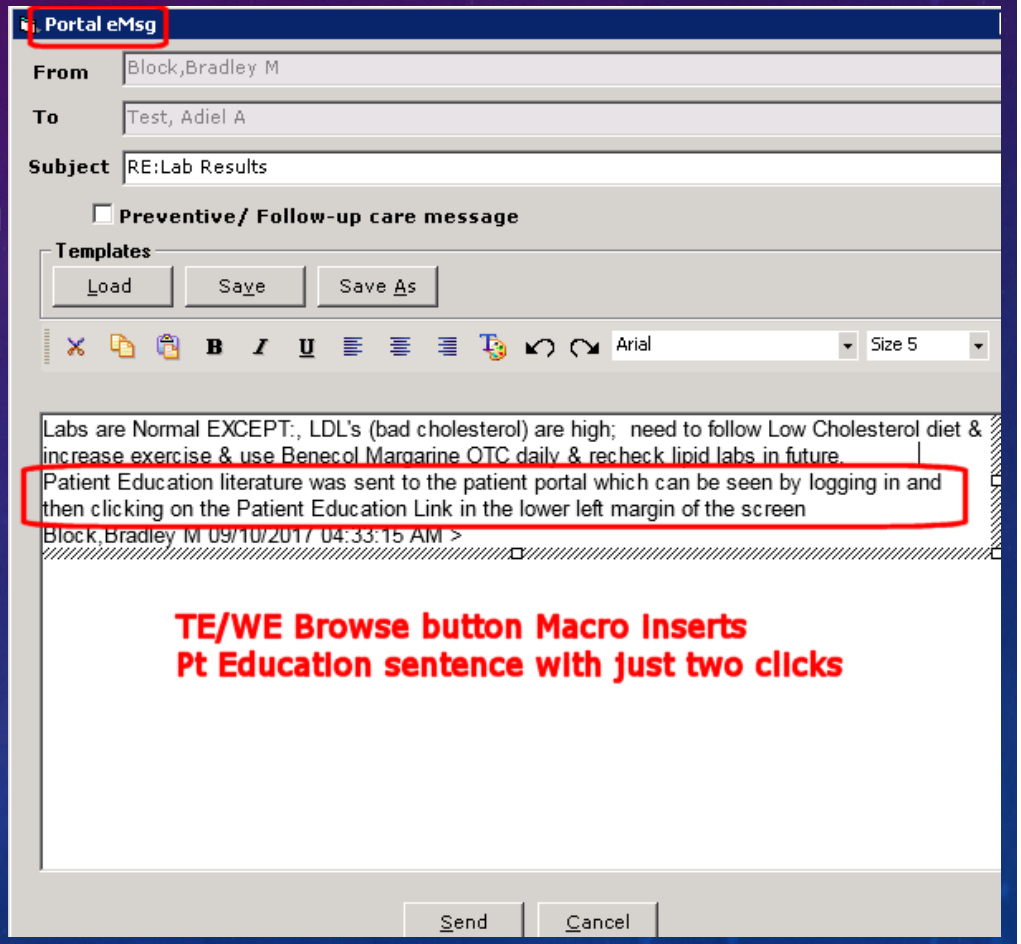
Web Enabled Patient Stats for Patients Seen in Past Year

- Dr Block's own Patients = 96% (toddlers-94 yrs)
- Dr Bigg's own Patients = 90%
- Dr Block's Family Medicine Group = 95%
- Dr Bigg's Multi-Specialty Group = 81%

Push Patient Education through Portal

- Use paid services to send Pt Ed thru Portal
- Boost Patient Satisfaction
  - Use TE/WE Macro to send reminder & instructions for finding Pt Ed in Portal
- Improve MIPS ACI Score
  - for Pt Ed, Secure Messaging, AND Portal use @10% each= up to 30% of MIPS ACI/PI score
- Now Can be viewed from Healow App



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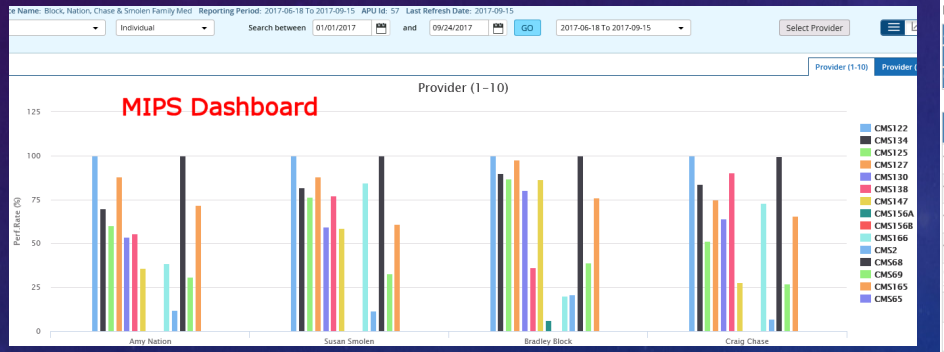
EVERYONE Is Keeping Score on Us These Days….

- Get list from every Performance Program of what providers will be judged on for Bonuses - such as M/C ACO GPRO
- Use MIPS Dashboard & Insurance Score Card results to make changes in workflow to boost future scores



GPRO Patient Details

Total Percentage	97.12%

2017 M/C ACO GPRO Score

Domain Percentage

At-Risk Population	69.38%
Preventive Health	98.13%
Care Coordination/Patient Safety	100.00%

Domain	Practice Name	Measure Description	2017 Reporting	Total Percentage	Percent Bracket
At-Risk Population	BLOCK, NATION, CHASE & SMOLEN FAMILY MEDICINE	HTN-2 (NQF 0018) : Controlling High Blood Pressure	P	68.75%	60%
At-Risk Population	BLOCK, NATION, CHASE & SMOLEN FAMILY MEDICINE	IVD-2: Ischemic Vascular Disease (IVD): Use of Aspirin or Another Antiplatelet	P	100%	90%
At-Risk Population	BLOCK, NATION, CHASE & SMOLEN FAMILY MEDICINE	MH-1 (NQF 0710): Depression Remission at Twelve Months	Y	0%	<30%
At-Risk Population	BLOCK, NATION, CHASE & SMOLEN FAMILY MEDICINE	DM DIABETES CARE: Composite : Hba1c Poor Control & Eye Exam	P	83.33%	90%
Care Coordination/Patient Safety	BLOCK, NATION, CHASE & SMOLEN FAMILY MEDICINE	CARE-2 (NQF 0101): Falls: Screening for Future Fall Risk	P	100%	90%
Preventive Health	BLOCK, NATION, CHASE & SMOLEN FAMILY MEDICINE	PREV-13: Statin Therapy for the Prevention and Treatment of Cardiovascular Disease	Y	100%	90%
Preventive Health	BLOCK, NATION, CHASE & SMOLEN FAMILY MEDICINE	PREV-8 (NQF 0043): Pneumonia Vaccination Status for Older Adults	P	93.33%	90%
Preventive Health	BLOCK, NATION, CHASE & SMOLEN FAMILY MEDICINE	PREV-10 (NQF 0028): Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention	P	100%	90%
Preventive Health	BLOCK, NATION, CHASE & SMOLEN FAMILY MEDICINE	PREV-12 (NQF 0418): Preventive Care and Screening: Screening for Clinical Depression and Follow-Up Plan	P	100%	90%
Preventive Health	BLOCK, NATION, CHASE & SMOLEN FAMILY MEDICINE	PREV-6: Colorectal Cancer Screening (COL)	P	86.67%	80%
Preventive Health	BLOCK, NATION, CHASE & SMOLEN FAMILY MEDICINE	PREV-7 (NQF 0041): Preventive Care and Screening: Influenza Immunization	P	100%	90%
Preventive Health	BLOCK, NATION, CHASE & SMOLEN FAMILY MEDICINE	PREV-5: Breast Cancer Screening (BCS)	P	88.89%	80%
Preventive Health	BLOCK, NATION, CHASE & SMOLEN FAMILY MEDICINE	PREV-9 (NQF 0421): Preventive Care and Screening: Body Mass Index (BMI) Screening and Follow-Up Plan	P	100%	90%

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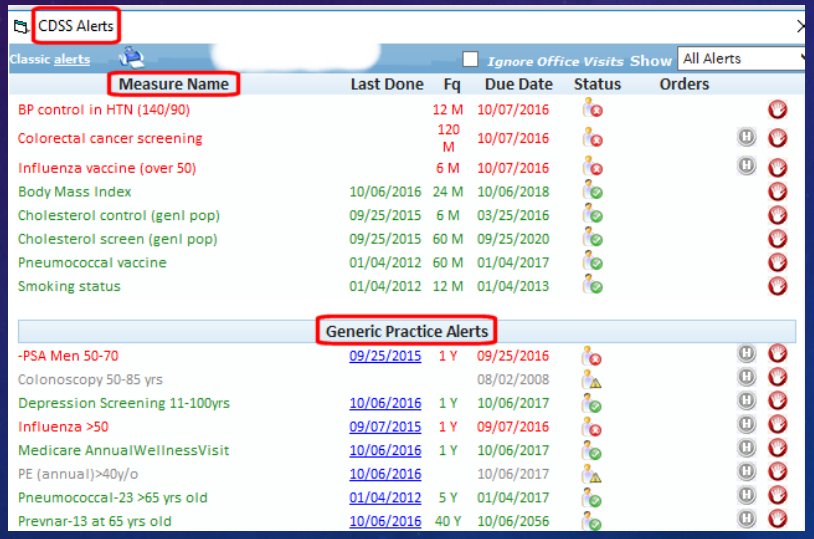
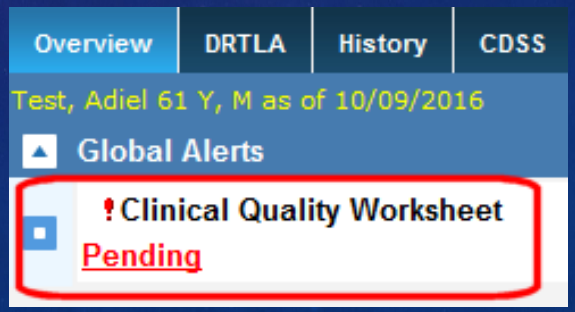
The Key to Success – Use eCW to Implement Changes

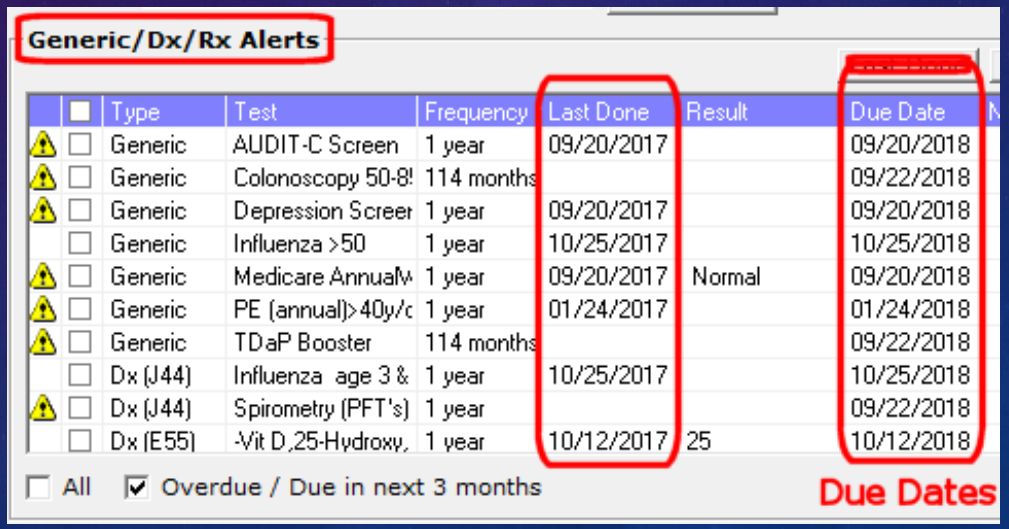
- CDSS, Classic Alerts, Clinical Quality Worksheets
- Pick one format - Train Staff & Providers to use this
- One click from Visit notes, TE's, HUB to see all due & overdue care items
- Create DI or Procedure Orders for Tracking Purposes

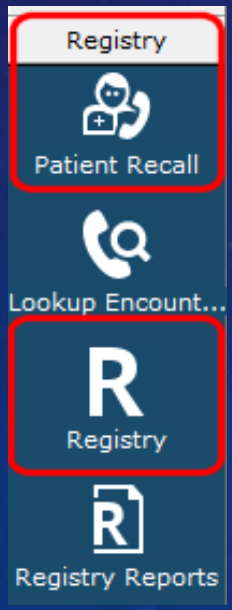




Remind Patients when Care is Due

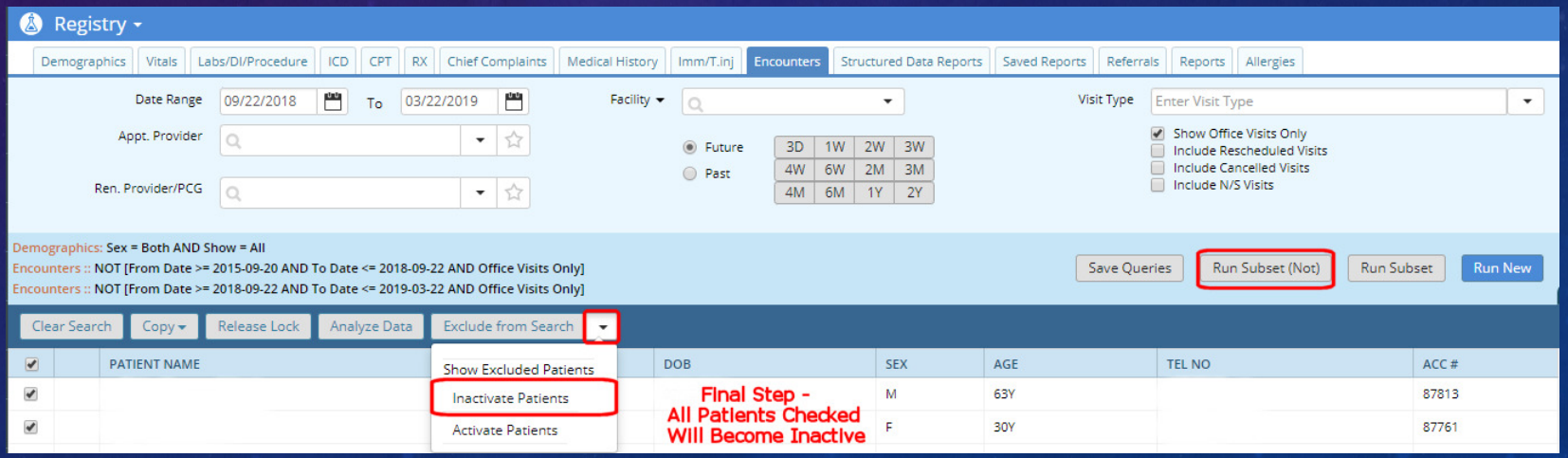
- Train Providers & Staff to Check Alerts or CQW Every Visit – Need to make it a habit
- Use Messenger Campaigns or Registry or Patient Recall Function to Generate Patient Lists to send Portal & Messenger Reminders – i.e.- Flu Vax's, PE's/Paps, Diabetic Care, Colonoscopies





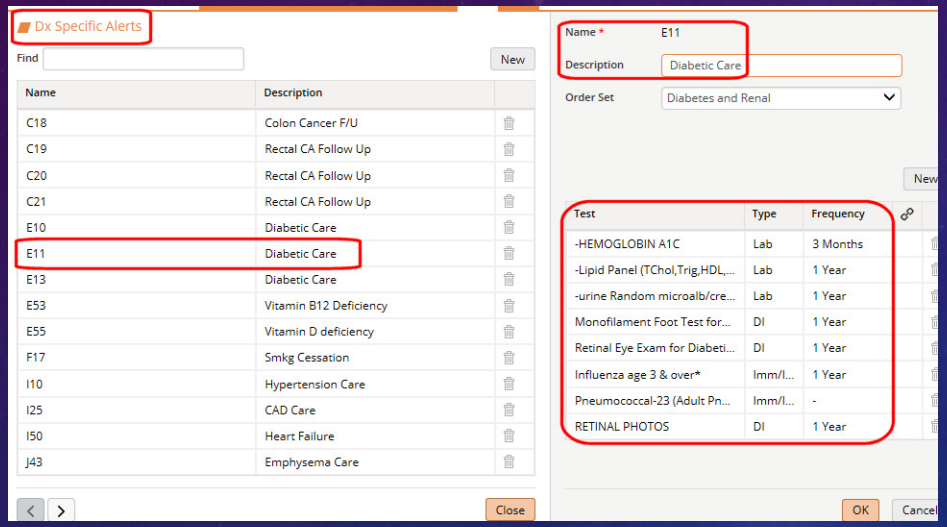
Don’t Waste Time or $ Chasing Inactive Patients - Spring Cleaning - Tidy Up Your List of Active Patients in One Foul Swoop

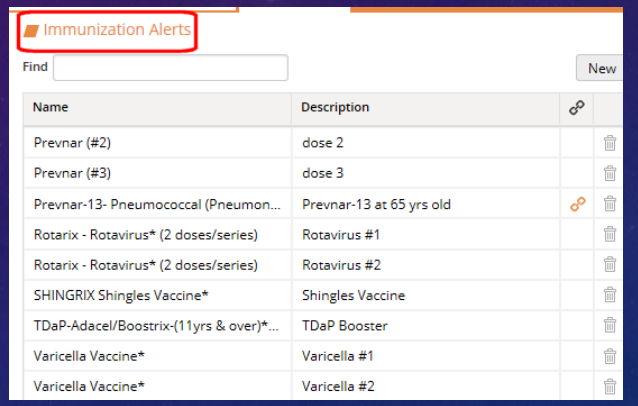
- Use Registry to make patients Inactive en masse
- Improves usefulness of Registry Searches, espec for Patient Reminders, & reduce costs by limiting reminders to active pts
- Helps front office identify patients with out of date information
- In Registry Demographics Run New list for All Active Pts> Run Subset(Not) of Pts w/ Encounters in past time range (ie-3 yrs) (or any desired parameter)> Run Subset(Not) of Pts w/ Encounters in future time range (ie-6 mos)> Click on “Inactivate Patients”

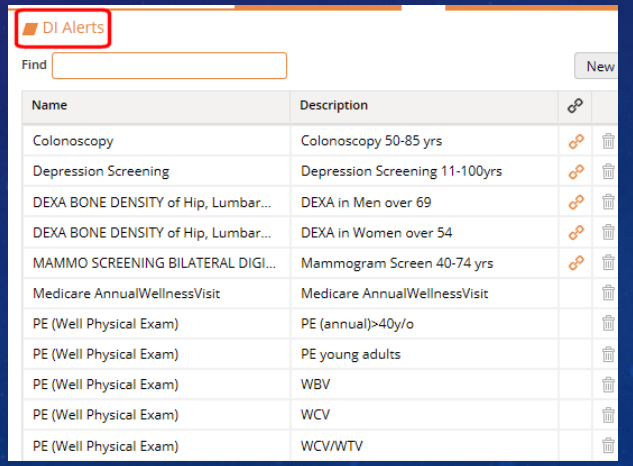


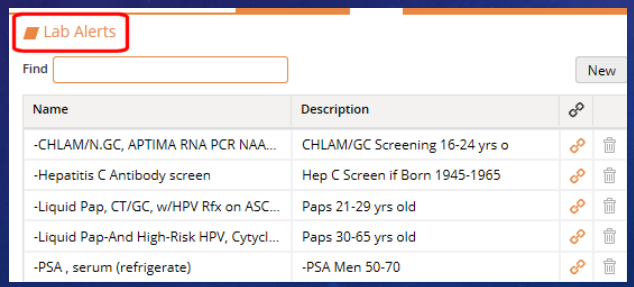
Next Step –
Customize CDSS & Classic Alerts

- Create "Generic Practice Alerts" based on DX, RX, and Age based Vax, Lab, DI, Procedures & other QOC Performance Tracking Measures



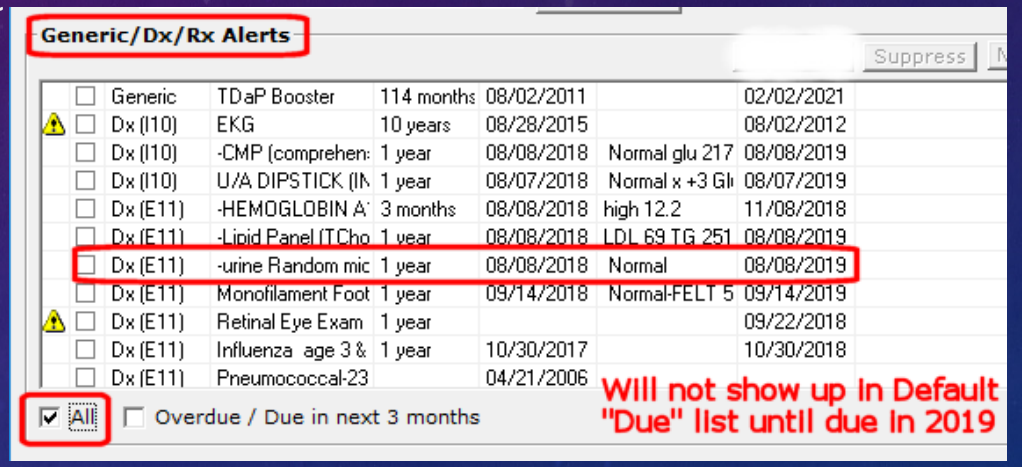


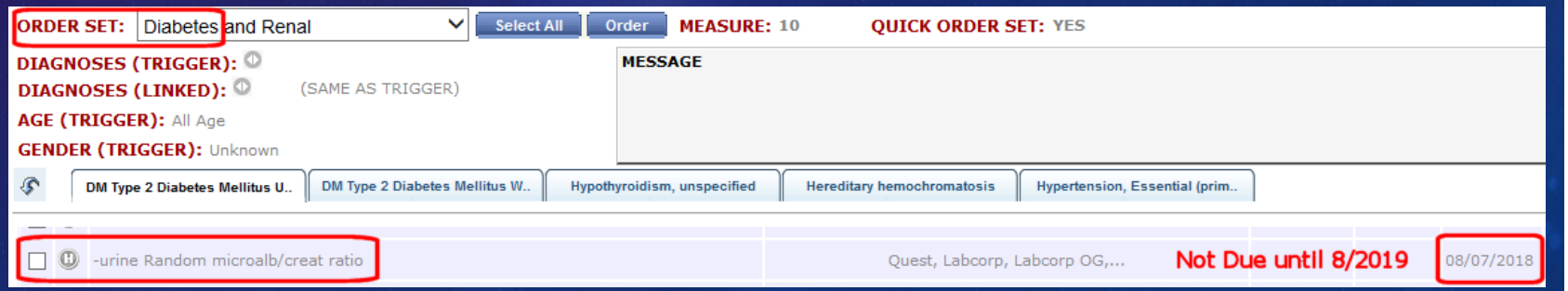




Example of Implementing Protocol to Simplify Tracking & Testing – Annual Diabetic Nephropathy Screening

- Create DX Specific annual alert for Diabetics b/c Not included in standard CDSS Alerts
- Alert seen in CDSS & Classic Alerts
- Lab Results automatically satisfy alert & track when due
- Order Lab & Track from within Order Sets





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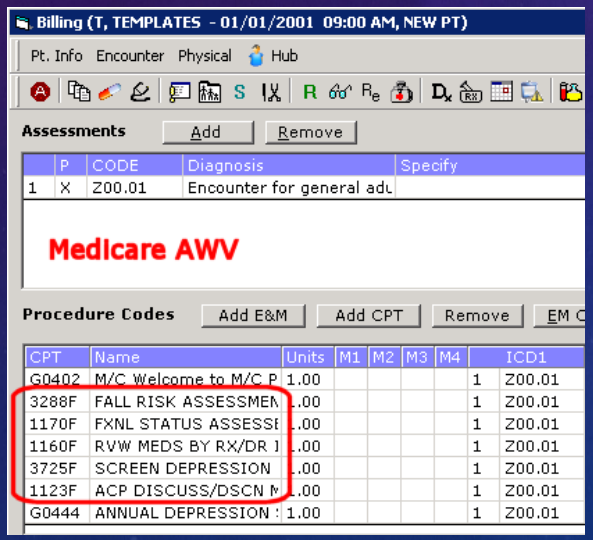
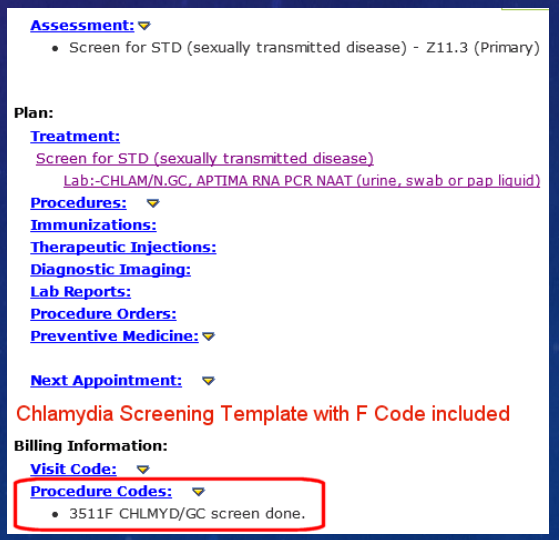
Get Credit for What You Do – Include CPT "F" Codes in your Templates

- CPT "F" codes strictly for reporting info regarding Quality of Care measures to plans
  - Depression Screening, Fall Risk Screening, Chlamydia Screening, DM eye exams, Beta Blocker use in CHF pts, Statin TX in CAD pts
  - No charges/payments directly assoc with F codes
- Build F codes into templates to automate reporting





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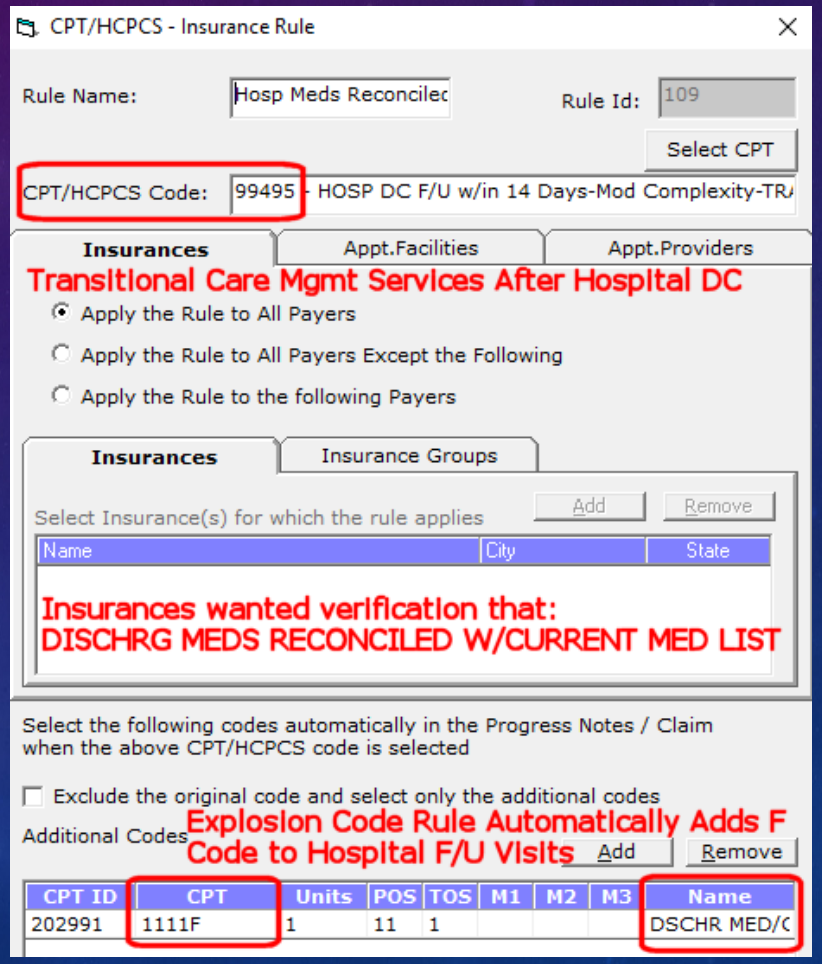
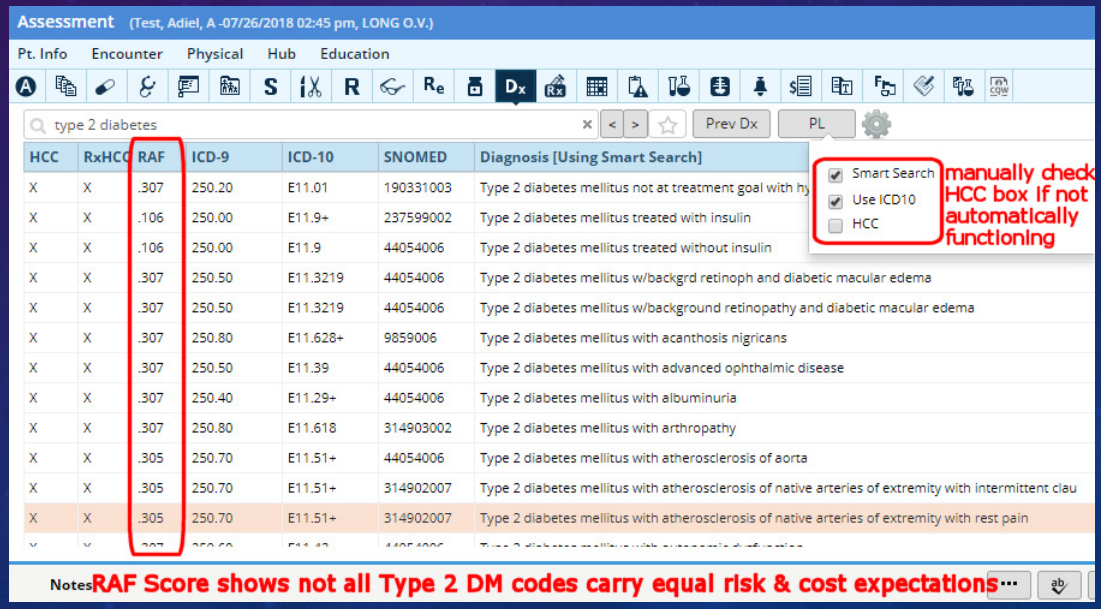
Get Even More Credit for What You Do – Use Exploding CPT "F" Codes

- Create CPT Explosion Codes via: Billing> CPT> CPT Explosion Codes
- Configure CPT Rules to trigger F Codes to be billed based on services performed which don't fit template parameters



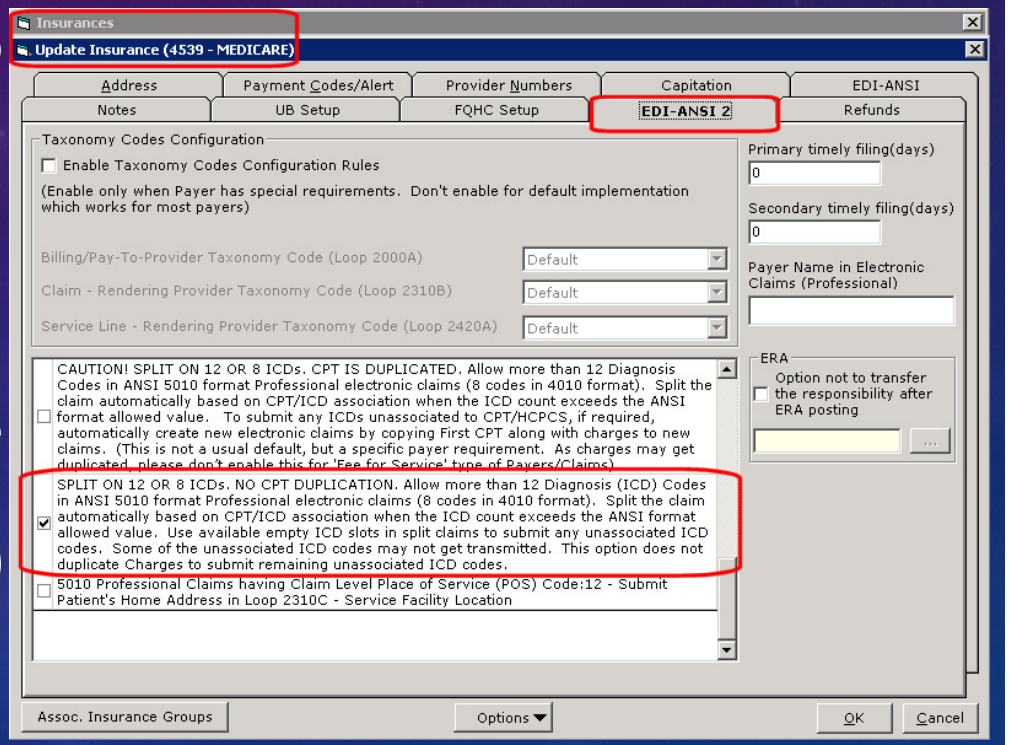
Improve Your Expected Cost of Care Stats – Find & Use HCC Codes w/o Fancy Modules

- HCC "High Risk DX " Codes boost expected cost of care stats for ACO & P4P shared savings bonus programs
- IMO Smart Search includes HCC data at no extra cost - needs Item Key turned on & have it set to automatically appear
- Choose DX Codes w/ the highest approp RAF score to get the highest expected cost of care index scores



Another Way to Improve Your Insurance Plan Cost of Care Index – Customize Claims to Send More HCC DX Codes per Claim

- Insure your complex pts get all their HCC DX codes reported to boost their "risk" score & expected cost of care
- Improves your Cost of Care status for M/C ACO & other Shared Savings Programs
- Go into each & every Insurance plan>Update
- Customize claims (in ANSI 5010 format) to **automatically** send in DX codes #13-20 every claim to report more DX's per claim (w/o assoc CPT codes)

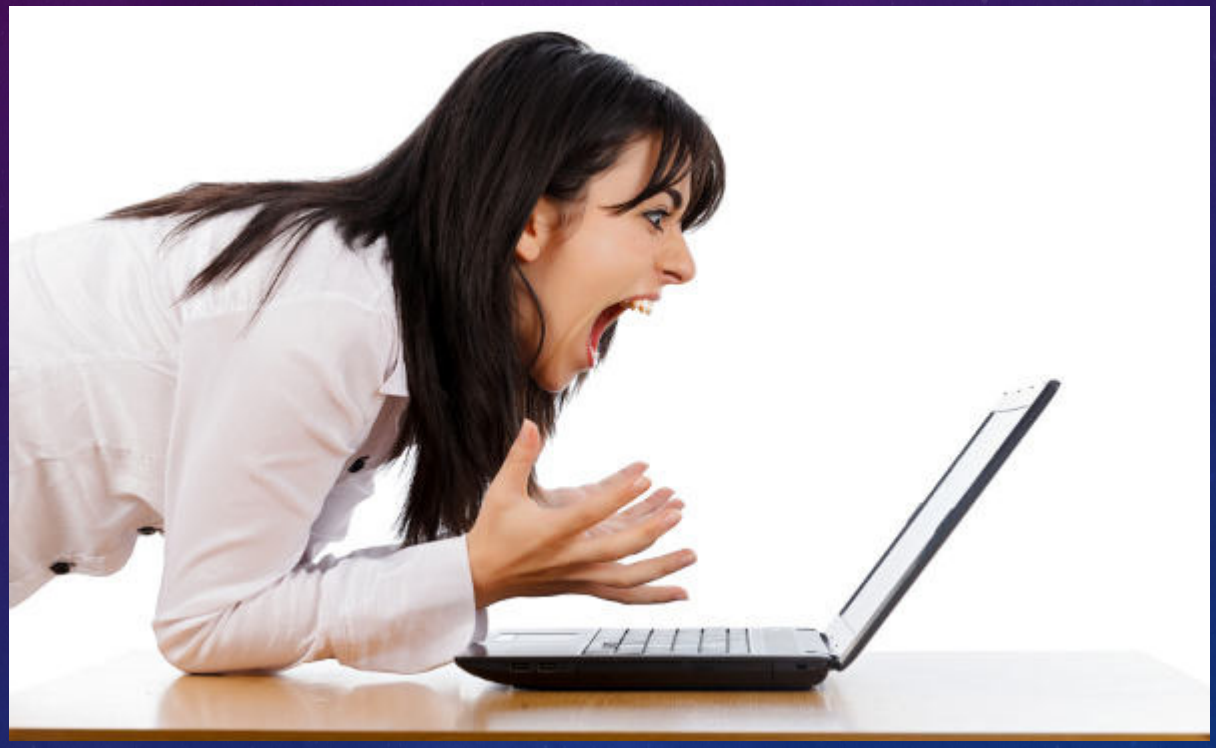


Using Alerts, Reporting Quality, & Billing HCC Codes Pays Off

- Dr Block's Practice:
  - Top end GPRO & AWV scores in M/C ACO
  - ACO MIPS Adjustment= 1.32% for 2019
  - High QOC scores for other plans
  - Consistent Performance Bonuses
- Dr Bigg's Practice:
  - ACO MIPS Adjustment= 1.45% for 2019
  - High Performer with multiple insurance plans
  - CQW Alert Data helped insurance negotiations
  - ACO -multiple Commercial Contracts w/Higher Fee Schedules
- All Offices:
  - Extra Income from services performed (espec M/C AWV)
  - & Higher MIPS Scores

	Florida	Central	Independent	Block, Nation Family Medic	Target*	Units
FHPN-FH Quality - Inform	58.3	62.7	66.2	75	64.01	ghted
FHPN FH Employee Chronic Disease	67.1	69	72	79	64.61	ghted
HEDIS - CDC: HbA1c Control less than 8% (2017 Rolling Custom)	62	65.4	70	89	72	%
HEDIS - CDC: Hemoglobin A1c Testing (2017 Rolling Custom)	86.7	88.6	92.9	100	95	%
HEDIS® - CDC: Diabetes Care - Medical Attention for Nephropathy(2017 Rolling Custom)	91.3	92.8	94.4	100	90	%
HEDIS® 2017 Rolling - Comprehensive Diabetes Care (CDC) - Eye Exam	30.7	31.4	33.7	44	0	%
FHPN FH Employee Health and Wellness	51.4	57.6	61.2	73	63.7	ghted
ACO - 19: Colorectal Cancer Screening(2017 Rolling Generic)	55.1	59.2	61.2	70	60	%
ACO - 20: Breast Cancer Screening(2017 Rolling Generic)	45	54.8	61.2	78	70	%

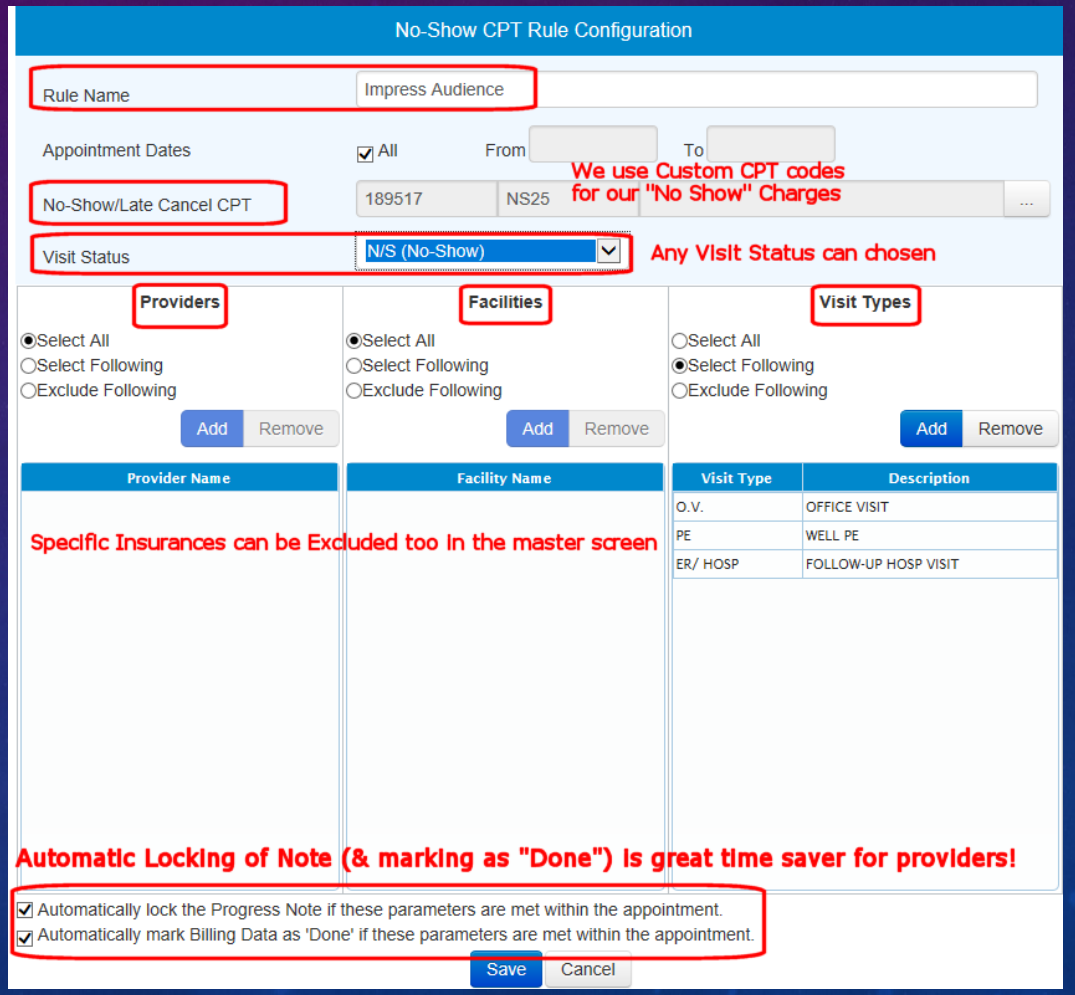
Billing & Finances of the Past



Billing & Finances of the Future

Tired of having to Lock Notes & Create Claims for No Shows or Cancellations – Configure Automated Charges & Claims (v11)

- Go to Billing>CPT>No Show CPT Rules
- Create multiple rules for practice
- Be sure to check box to "Show Invalid CPT codes" when linking Custom codes
- Fully Automated once Visit Status is updated to configured status in rules
- Our Biller Loves this!



eClinicalWorks

Bradley M. Block, M.D. & William "Reddy" Biggs, M.D.

Take Home Message

- Customize Your Workflow in eCW to Optimize Your Efficiency & Patient Care
  - Improve Patient Engagement & Satisfaction
  - Boost Income & P4P/SSP Bonuses
  - Boost your MIPS score
- <u>Refer to your notes & Implement the 3-5 Ideas</u>

Questions?

- Bradley M. Block, M.D.
- William “Reddy” Biggs, M.D.

- If earning CME/CE Credit this is session ID “1895”
- We welcome feedback via the eCW Events App survey
- For copy of our current & past presentations

and our eCW Letters go to:

www.BlockAndNation.com/BlockAndBiggs