

Welcome



Our Presenters

Christopher J Fellenz, MD

Family Physician, Colorado Permanente Medical Group
Medical Director, Safety Net Partnerships, Community
Health & Engagement, Kaiser Permanente Colorado
Physician Partner, Community Health, Kaiser National
Program Office

Matt Thompson, MBA

Operations Administrator
Peer Mentored Care Collaborative | ECHO Colorado
University of Colorado Anschutz Medical Campus

Beth Neuhalfen

Denver Health, Associate Director of Quality/Ops
American College of Physicians, Faculty

Laurie Gaynor

Patient Perspective

Katie Broeren

Patient Perspective

Kaiser Permanente of Colorado

Specialty Care e-Consult

Christopher J Fellenz, M.D
e-Consult Webinar Series
August 26th, 2020

KPCO Safety Net Specialty Care e-Consult Program

- Partner with 8 community health centers – Clinica FHS, Salud, STRIDE, Clinica Tepeyac, Inner City, Mission Medical, Summit, Mountain Family
- 8 specialties– Dermatology, Gastroenterology, Ophthalmology, Rheumatology, Neurology, Allergy, Pulmonology, Endocrinology
- Over 3,500 e-consults completed, plus 860 face-to-face visits
- Most used medical specialties: Dermatology, Endocrinology, Cardiology
- Turnaround time : 1-4 days depending on specialty

KPCO Safety Net Specialty Care e-Consult Program Evaluation

- Referring physicians, specialists and patients all agreed that the program was valuable:
 - Delivered timely responses
 - Often prevented the need for an in person specialty evaluation
 - Several patients reported the program was life changing
 - Promoted collegiality among providers
 - Allowed specialists to donate their time when it was convenient for them to do so

KPCO Safety Net Specialty Care e-Consult Program Evaluation “Cont'd”

- Internal e-consults at KPCO are used for all specialties:
 - Reduce need for in person evaluation
 - Very quick turnaround time
 - Allow Primary Care to work at higher scope
 - Integral to the team-based health care approach

Project CORE

(Coordinating Optimal Referral Experiences)
A Value Add to Patients and Providers

Aurora Health Alliance
ASC Webinar 2: eConsults in Colorado
August 26, 2020

Matthew A. Thompson, MBA
Operations Administrator, Peer Mentored Care Collaborative
University of Colorado, School of Medicine



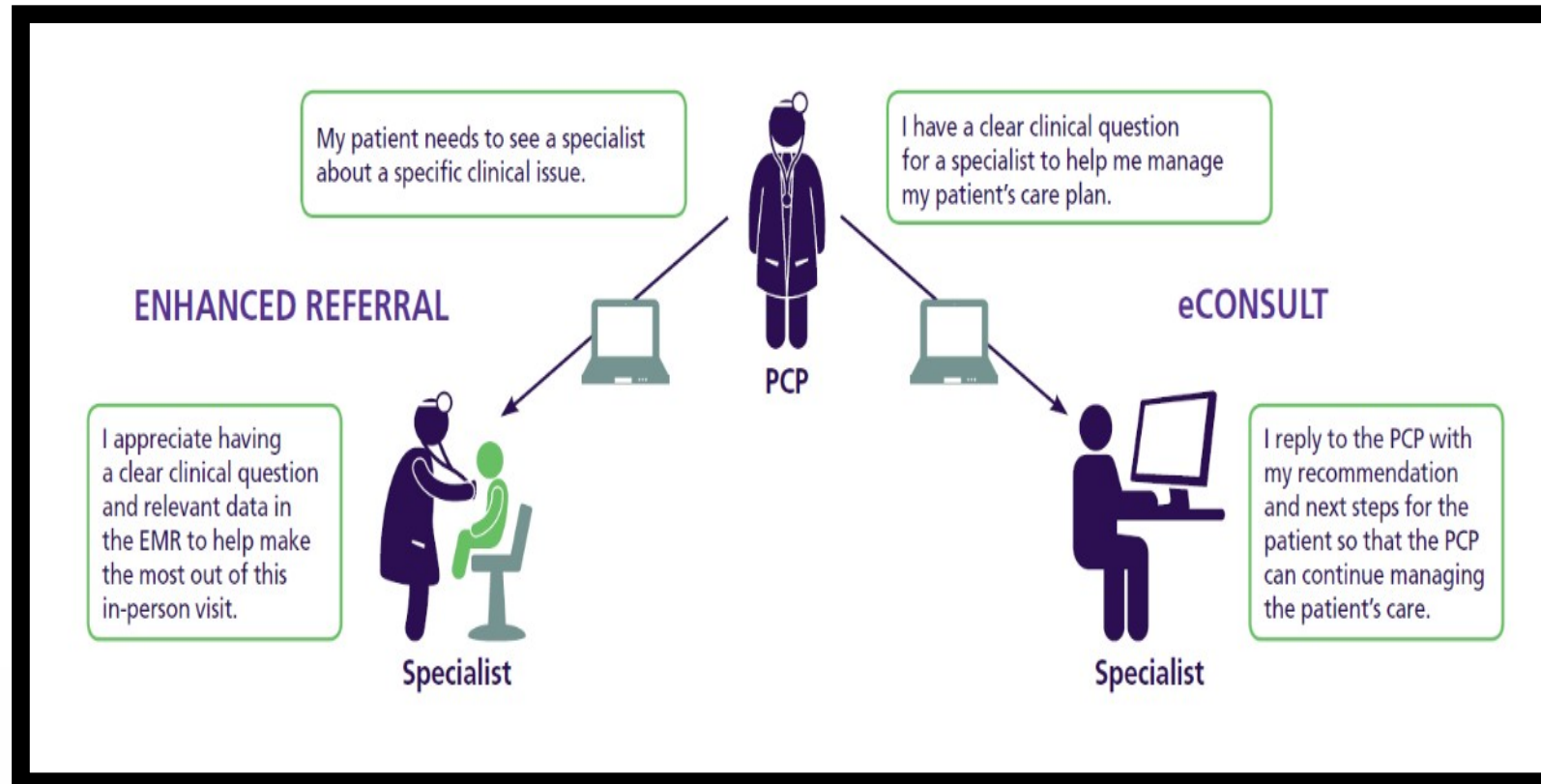
UNIVERSITY OF COLORADO MEDICINE

Background

- High demand for specialty care
 - Referrals have more than doubled over last decade
 - More than 1/3 of patients are referred to a specialist each year
- Provider shortage in the U.S.
- More than 40% of the U.S. population has one or more chronic conditions
- eConsults are an effective way to address these referrals without requiring that the patient be seen face-to-face

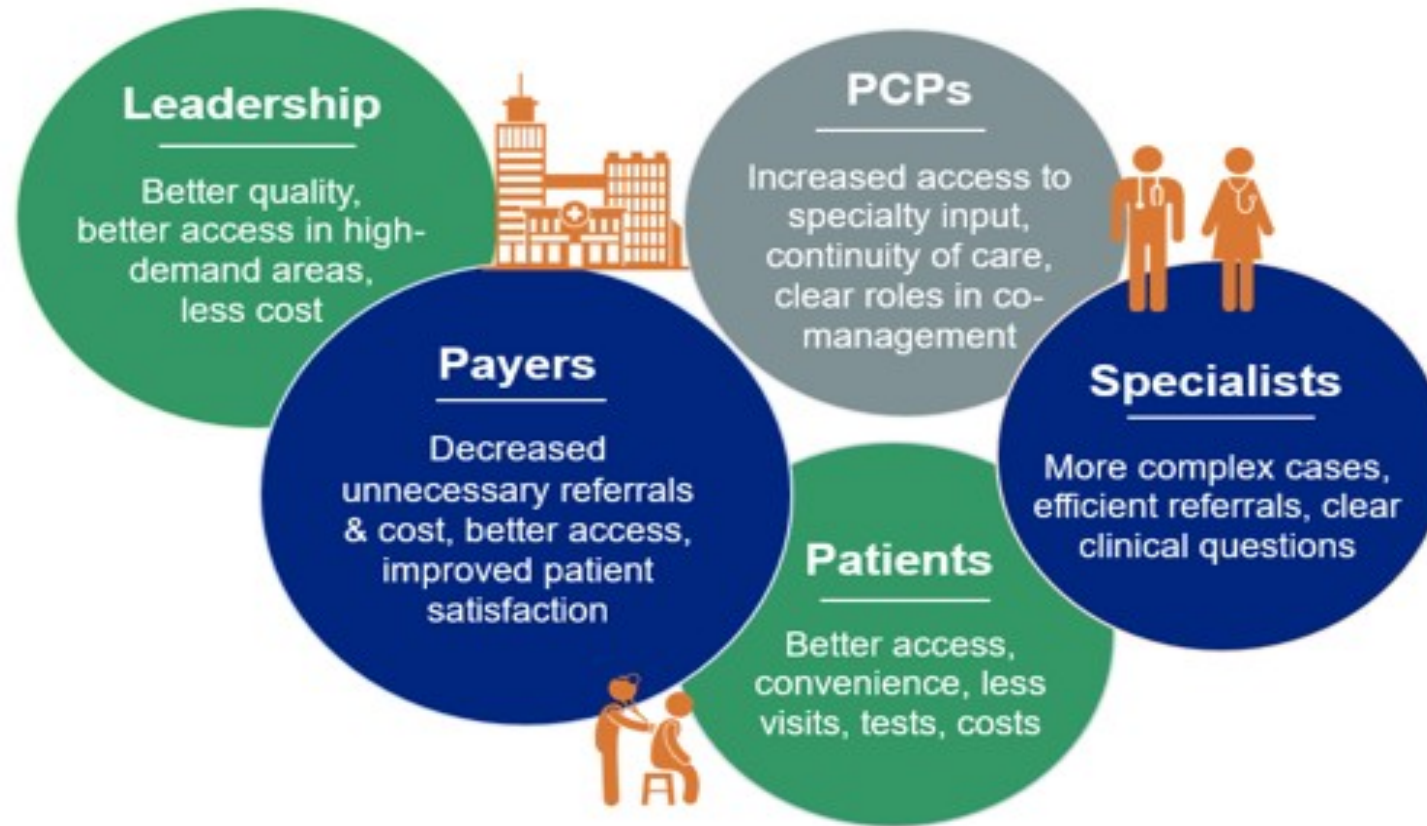
Project CORE

- Tools embedded in the Electronic Medical Record (EMR), that provide point-of-care decision support

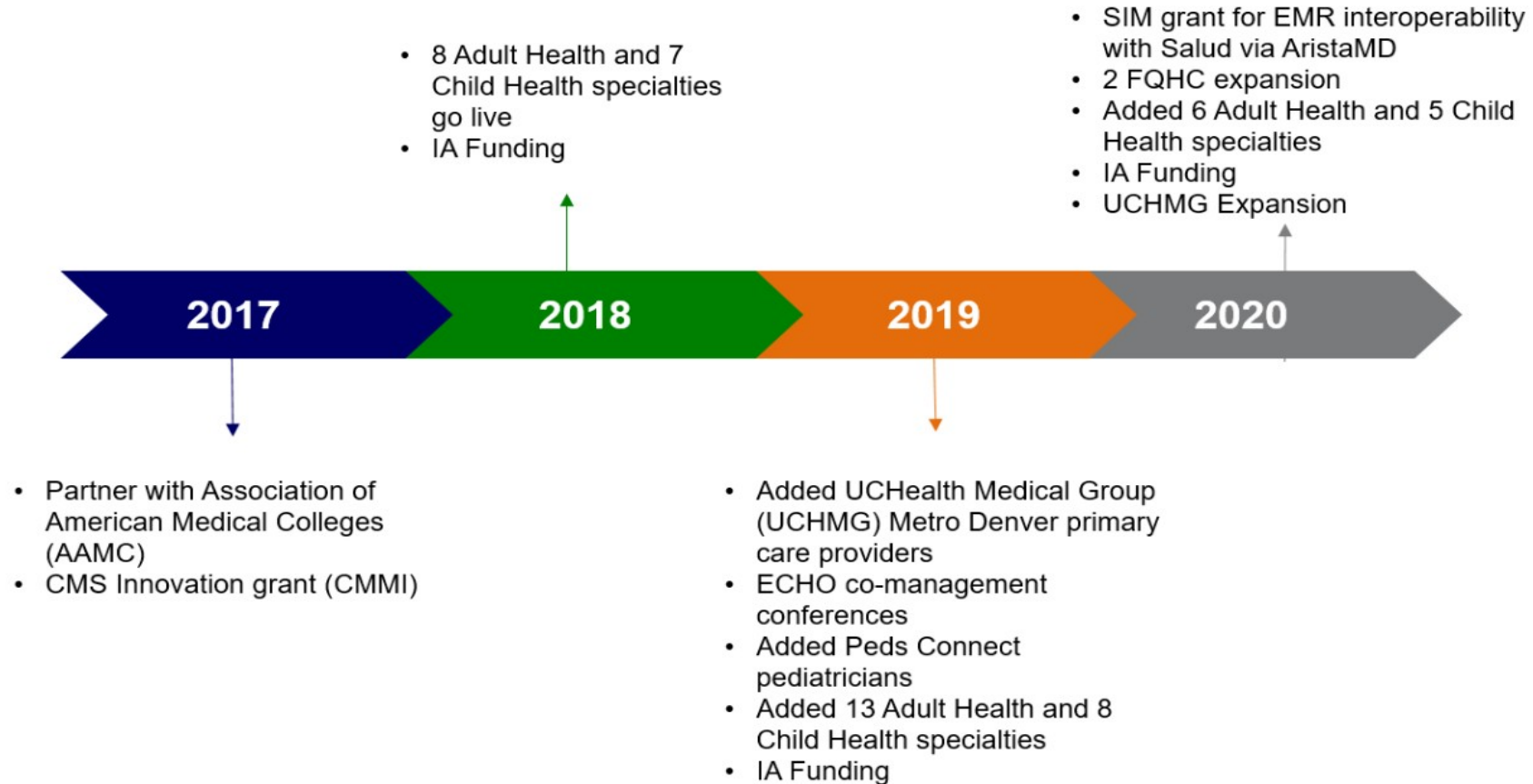


Project CORE

Stakeholder Benefits



Project CORE Timeline



Project CORE Participation

	Primary Care Providers	Specialties
Adult Health	~400 (Internal, UCHMG, STRIDE)	27
Child Health	~250 (Internal, Peds Connect)	21

81% of eConsults are answered within 2 business days

Specialty – Adult Health	Average Time to Appointment
Endocrinology	44 days
Rheumatology	24 days
Gastroenterology	28 days
Cardiology	87 days
Neurology	70 days

Project CORE Volume (adult health only)

- Nearly 6,500 eConsults placed
 - 74% completion rate
 - 17% conversion rate
 - 9% decline rate
- 36 Colorado counties
- 8.5% specialty contact of all CORE patient encounters are eConsults
- Over \$75,000 in projected gas savings to patients
- Consistent use through COVID

Community Impact (adult health only)

- STRIDE Community Health Center
 - 26 eConsults placed by 14 PCPs in July 2020 to 11 University speciality departments
 - 18 answered
 - Response time = less than 24 hours
 - 7 converted (primary recommendation = patient needs to be seen in clinic)
 - 1 declined (insufficient information)
- Salud Family Centers
 - Go-live September 2020

Outcomes - Patients

- Cost savings, average all payers
 - \$60 per eConsult direct cost savings to payers
 - \$40 per eConsult indirect cost savings to patients
 - Enhanced referrals increase first visit efficiency
- Quality
 - 2.5% of answered eConsults also had an in-person visit within 30 days
 - 0% of answered eConsult also had an ED visit within 30 day
- Plans to evaluate:
 - No-show rate improvements
 - Improvement in referral completion
 - Improvement in access

Outcomes - Providers

- High levels of Primary Care Provider satisfaction
 - 100% described eConsults as advancing their clinical knowledge and practice
 - 95% described eConsults as easy to use and extremely valuable
 - 70% result in immediate changes to treatment plans including medication management or in-home self-care regimens
 - Rural providers can avoid telecommunication bandwidth issues
- High levels of specialist satisfaction
 - Complete an eConsult on average in 10-15 minutes
 - Preserves longer, in-clinic appts. for patients with higher acuity needs
- Patient care stays in their Primary Care Medical Home
- Right care, right place, right time

Opportunity for State-wide Rollout

- Strong community interest and demand
- Expand specialist access to areas outside metro-Denver
- CMS has created Interprofessional Internet Consultation (eConsult) codes and reimbursement
- Important option for Value-Based Payment models
- COVID response has increased visibility and value of electronic access to health care

Next Steps

- EHR interoperability
 - Patient information exchange
 - Bi-directional PCP and specialist communication
 - Revenue cycle information exchange
- Reimbursement strategies
 - Professional
 - Technical/Practice Expense
- Specialist recruitment
- Continuous QA to improve use of eConsults
- Expand scope of eConsults (i.e. IP eConsults, specialist to specialist)

Questions?



Contact:

Matt Thompson, MBA
Project CORE Operations Administrator
pmcc@cuanschutz.edu

Thank you to our partners





E-Consults at Denver Health

BETH NEUHALFEN
ASSOCIATE DIRECTOR QUALITY/OPS & FACULTY FOR ACP



- Denver Health Hospital Authority, in Denver, CO and was founded as City Hospital in 1860 to serve the health care needs of the rapidly developing city of Denver.
- We are Colorado's primary safety-net institution serving the needs of special populations such as the poor, uninsured, pregnant teens, persons addicted to alcohol and other substances, victims of violence and the homeless. Denver Health provides care to 33% of Denver's population and to one in three Denver-area children each year with nearly 930,000 total patient visits annually.
- 151,000 unique patients per year 2019 data

Unspecified 0%

CICP 2%

Commercial 12%

DFAP 6%

DH Medicaid Choice 25%

DHMP CHP 2%

DHMP Medical Care 5%

DHMP Medicare 3%

DHMP POS and Elevate 2%

Medicaid 31%

Medicare 6%

Self-pay 7%

Special billing 1%

Workers Comp 0%

BACKGROUND

2015

- Dermatology began eConsults
- Lived outside of medical record

2016

- Epic go-live April 2016
- InBasket workflow

2018

- Five new specialties began eConsults
- Order-based workflow
- wRVUs captured for specialists
- eConsult Workgroup established

2019

- Four new specialties began eConsults

E-CONSULT EARLY RESULTS:

	<i>eConsult Orders</i>	<i>F 2 F Visits</i>	<i>% of Visits needing F 2 F</i>	<i>Specialty visit avoided</i>	
Dermatology	1257	34	3%	1223	
Endocrinology	205	37	18%	168	
Neurology	173	65	38%	108	
Rheumatology	169	2	1%	167	
Otolaryngology	32	17	53%	15	
Ophthalmology	30	3	10%	27	

LEADING TO HEALTH
A New Approach To Care Coordination
— T. R. Goldman

NARRATIVE MATTERS
Telehealth Stops A Contagious
Outbreak — Cynthia Zettler-Greeley

REVIEW ARTICLE
The State Of Telehealth Evidence —
Erin Shigekawa et al.

AT THE INTERSECTION OF HEALTH, HEALTH CARE, AND POLICY

Health Affairs

Telehealth

Physicians' Use Remains Limited

Carol K. Kane & Kurt Gillis

PLUS *Estimating Patients' Use
In Minnesota*
Jiani Yu et al.

Page 1923

Using Telemedicine For Opioid Treatment

Haiden A. Huskamp et al.

Page 1940

Telestroke Improves Rural Quality Of Care

Donglan Zhang et al.

PLUS *Quality Of Telemedicine
For Respiratory Infections*
Zhao Shi et al.

Page 2005

Implementation

Large Health Systems
Chad Ellimoottil et al.

Oral Health For Children
Dorota T. Kopycka-Kedzierawski
et al.

Health Centers
Ching-Ching Claire Lin et al.

Page 1955

eConsults Cut Medicaid Costs

Daren Anderson et al.

PLUS *Virtual Visits Replace
In-Person Visits In An ACO*
Sachin J. Shah et al.

Page 2031

Evolving Regulatory & Payment Policies

David Flannery & Robert Jarrin

PLUS *Less Restrictive State
Policies Do Not Promote Use*
Jeongyoung Park et al.

Page 2052

Patient Outcomes

Home Telemonitoring
Renee Pekmezaris et al.

Telehealth For Newborns
Jordan Albritton et al.

Tele-Triage For Patients With
Chest Pain
Dana R. Sax et al.

Page 1983

2020 ELECTION

Designing The Republican Plan

Lanhee Chen

Designing The Democratic Plan

Sherry Glied & Jeanne Lambrew

WWW.HEALTHAFFAIRS.ORG

TELEHEALTH

By Daren Anderson, Victor G. Villagra, Emil Coman, Tamim Ahmed, Anthony Porto, Nicole Jepeal, Giuseppe Maci, and Bridget Teevan

Reduced Cost Of Specialty Care Using Electronic Consultations For Medicaid Patients

ABSTRACT Specialty care accounts for a significant and growing portion of year-over-year Medicaid cost increases. Some referrals to specialists may be avoided and managed more efficiently by using electronic consultations (eConsults). In this study a large, multisite safety-net health center linked its primary care providers with specialists in dermatology, endocrinology, gastroenterology, and orthopedics via an eConsult platform. Many consults were managed without need for a face-to-face visit. **Patients who had an eConsult had average specialty-related episode-of-care costs of \$82 per patient per month less than those sent directly for a face-to-face visit.** Expanding the use of eConsults for Medicaid patients and reimbursing the service could result in substantial savings while improving access to and timeliness of specialty care and strengthening primary care.

RESULTS

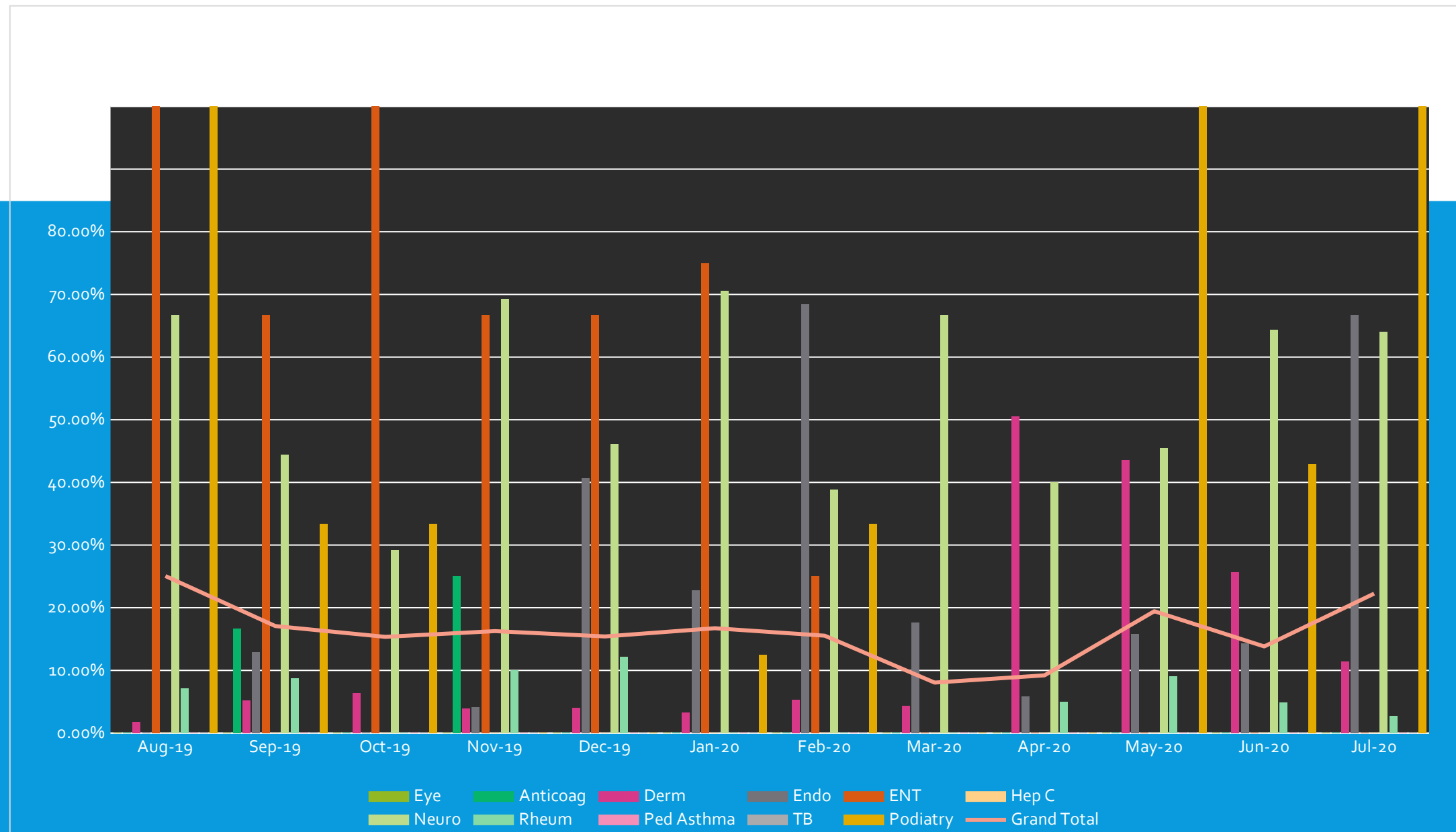
- 2018- Q2 2019 E-Consult Results across six specialties:
- 2,878 e-consults requested
- 2,481 avoided specialty visits
- **86% of the consults avoided a specialty visit.**
- **$2481 \times 82/\text{month} \times 12 \text{ months} = \$2.4 \text{ Million reduced cost of specialty care}$**

CURRENT CLINICS WITH ECONSULTS

- Dermatology
- Anticoag
- Podiatry
- Eye
- Endocrinology
- ENT
- Hep C
- Neurology
- Rheumatology
- Pediatric Asthma
- Tuberculosis

New in 2020

- . Pulmonology
- . GI
- . Breast
- . Vasc Surg
- . Urology
- . OBHS



DATA

	Podiatry	Eye	Anticoag	Derm	Endo	ENT	Hep C	Neuro	Rheum	Ped Asthma	TB	Grand Total
Aug-19	1	2	13	170	18	2	10	21	42	0	0	279
Sep-19	9	6	6	153	31	3	6	18	23	0	0	255
Oct-19	9	1	3	173	26	3	3	24	28	1	0	271
Nov-19	5	1	4	153	24	3	4	13	30	0	1	238
Dec-19	2	1	3	149	32	3	2	13	33	0	1	239
Jan-20	8	4	4	183	22	4	6	17	42	0	0	290
Feb-20	3	0	3	171	19	4	2	18	39	0	1	260
Mar-20	1	2	4	115	34	3	4	12	41	0	0	216
Apr-20	2	0	3	101	17	6	2	15	20	0	0	166
May-20	1	3	2	140	19	3	3	22	33	0	0	226
Jun-20	7	3	3	175	21	3	2	14	41	0	0	269
Jul-20	2	5	2	167	24	3	3	25	36	0	1	268
TOTAL	50	28	50	1850	287	40	47	212	408	1	4	2977

SUCCESSSES AND CHALLENGES

Successes

- Patient-centeredness
- Preserving specialty appointment access
- Enhanced learning for PCPs
- Documentation of provider-to-provider exchange in patient's chart
- Specialist productivity captured

Challenges

- Capturing wRVUs for PCPs
- Outgoing and incoming eConsults across community health systems and EHRs
- Value-based payment for eConsults

QUESTIONS?
[HTTPS://](https://)

Patient Perspective

Laurie Gaynor

Katie Broeren

Questions?

Thanks for joining us!

Next Event: Wednesday, September 2, 12pm – Patient Perspective



Video will be posted soon on AHA YouTube Channel