



Breakfast of Champions—PCP/Specialist Forum

September 13, 2024

Care Transformation Collaborative of RI





Agenda

Topic		Presenters	Duration
Welcome and Introductions	Introductions & brief overview of CTC-RI	Pano Yeracaris, CTC-RI	7:30 – 7:35 AM
eConsult/Enhanced Referral Project Background and Experience and discussion	 Project overview and Lifespan Experience Integra/CNE Experience Specialist Experience Update on use of HIE for EHR agnostic eConsults 	Paul Larson, Lifespan Joseph Diaz, Integra/CNE Kevin Bail (Psych) & Teresa Slomka (Cardiology) Integra Emily Rowland (Psych) & Marilyn J. Weigner (Cardiology) Lifespan	7:35 - 8:30 AM
Engaging Specialist in value-based care and discussion	 Overview of BCBSRI's approach to engaging specialists Prospect efforts to impact specialist practice pattern variation across groups and engagement in shared savings initiatives 	Cathleen Newman, BCBSRI Marty Kerzer, CharterCare Physician Group RI	8:30 – 8:55 AM
Discussion & Next Steps			





Announcements

- Clinical Strategy Committee, September 20th, 2024
 - 7:30-9:00am
 - Addressing alcohol use disorder in patients
- CTC-RI Annual Conference, October 31st, 2024
 - Register here: https://bit.ly/CTCRIConference2024
- Breakfast of Champions, December 13th, 2024
 - 7:30-9:00am





Objectives

- Lear about and discuss the results of a successful project to implement eConsults in two large RI Systems of Care
- Reflect on viewpoints of involved specialists
- Discuss approaches to improve primary care-specialist collaboration and engage specialists in shared savings





CTC-RI Conflict of Interest Statement

If CME credits are offered, all relevant financial relationships of those on the session planning committee have been disclosed and, if necessary, mitigated.

Claim CME credits here:

https://www.surveymonkey.com/r/ZDZS5HG



The AAFP has reviewed 'Advancing Comprehensive Primary Care Through Improving Care Delivery Design and Community Health,' and deemed it acceptable for AAFP credit. Term of approval is from 03/18/2022 to 03/18/2023. Physicians should claim only the credit commensurate with the extent of their participation in the activity. NPs and RNs can also receive credit through AAFP's partnership with the American Nurses Credentialing Center (ANCC) and the American Academy of Nurse Practitioners Certification Board (AANPCB).



Care Transformation Collaborative of Rhode Island



AAMC Project CORE – Rhode Island

Paul Larson MD, MS, MBA, CPE Co-chair CTC PCP/Specialist Oversight Committee



Problems in need of a Solution





Communication, Access, Quality, & Cost

What is Missing?

A clear clinical question

...referrals have become an administrative task

Alignment of primary care evaluation with specialist needs ...leading to risk of wasted initial visit with specialist

Longitudinal co-management agreement ...who does what over time?



AAMC CORE in Rhode Island

With multi-payer funding, CTC-RI engaged AAMC to implement CORE program as critical strategy to improve primary care and specialty collaboration and alignment on value. Goal to support statewide adoption including exploring HIE for non-Epic EHRs.

- Health Plans; United HealthCare, BCBS RI, Tufts
- Lifespan (LPG, Coastal Medical) & Brown Physicians Inc.
- Integra Community Care Network (CareNE. RI-PCPC, South County)
- CTCRI CORE Oversight Committee Facilitates program goals, template development, specialty engagement, outcome measurement & payer engagement for sustainable funding.















eConsult Overview:

- Implemented in the EMR alongside the referral workflow
- Condition specific templates
- Initiated by a PCP to a designated specialist colleague
- Typically, straight forward, lowacuity issues (answerable with data available in the EMR)
- < 3 business day response
- If too complex, specialist can recommend in-person visit

Implementing CORE eConsults





Project Goals

Improve communication, coordination and culture between primary care providers and specialists:

- Timely access to specialty care
- Improve quality and experience for patients and providers
- Enhance primary care comprehensiveness
- Control costs of care



AAMC Project CORE @ Lifespan CTC Report 9.13.24

Paul Larson MD, MS, MBA, CPE
Chief Primary Care & AAMC Project Core Lead, Lifespan

Project Support

Care Transformation Collaborative Rhode Island (CTC-RI)

 Leads the transformation of primary care in Rhode Island in the context of an integrated health care system. CTC-RI networks critical stakeholders to implement, evaluate and spread innovation in primary care.

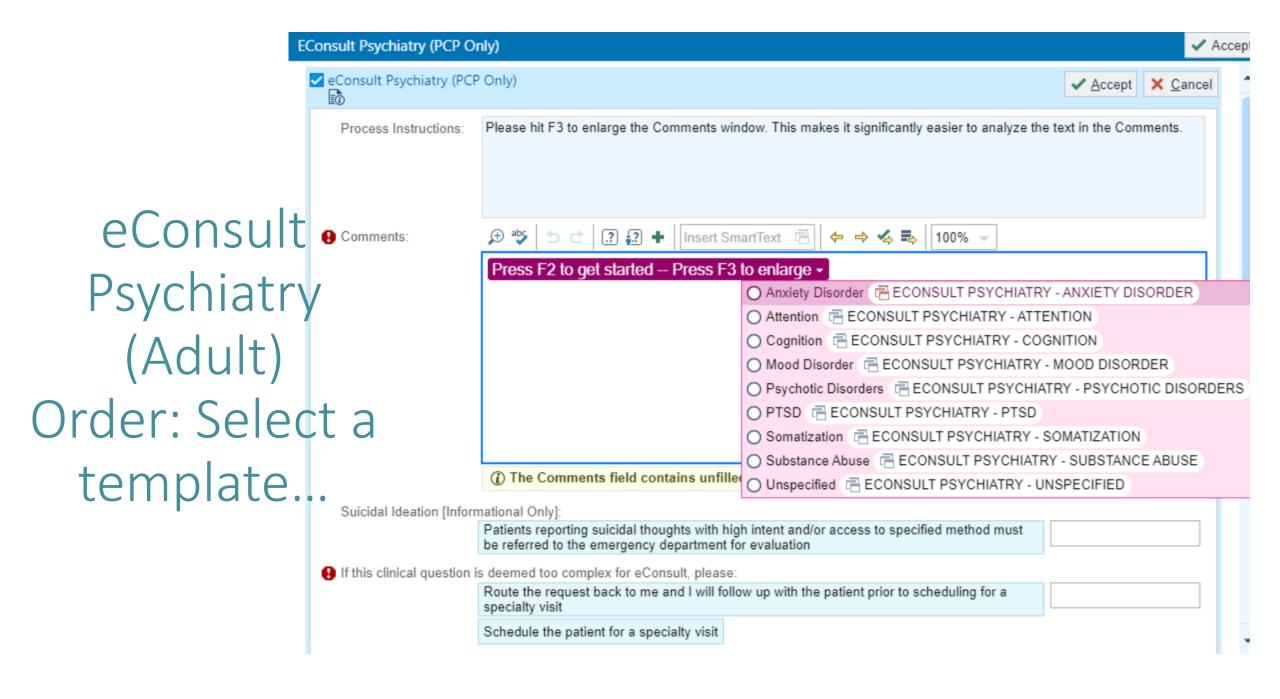
American Association of Medical Colleges (AAMC)

 Provides a structured, evidence-base implementation support program titled, Coordinating Optimal Referral Experiences (CORE). Funded through United Health Care, this program facilitates program implementation and the onboarding of specialists and primary care physicians within a shared electronic medical record (EMR)

Project CORE @ Lifespan Leadership Team

- Paul Larson MD MBA Clinical Lead
- Donna DiCenzo Blanchard Project Manager
- Doug Hopper IT Lead Analyst





Lifespan: 11 eConsult departments live

Department	Go-Live Date
Pedi Gastroenterology	June 6, 2022
Adult Gastroenterology	June 6, 2022
Psychiatry	June 6, 2022
Cardiology	December 1, 2022
Concussion	December 1, 2022
Neurology	December 1, 2022
Rheumatology	January 3, 2023
Hematology Benign	February 1, 2023
Obstetric Medicine	March 6, 2023 – On Hold
Physiatry / PM&R	May 10, 2023
Plastics - Hand	May 10, 2023
Pedi Psychiatry	September 4, 2024

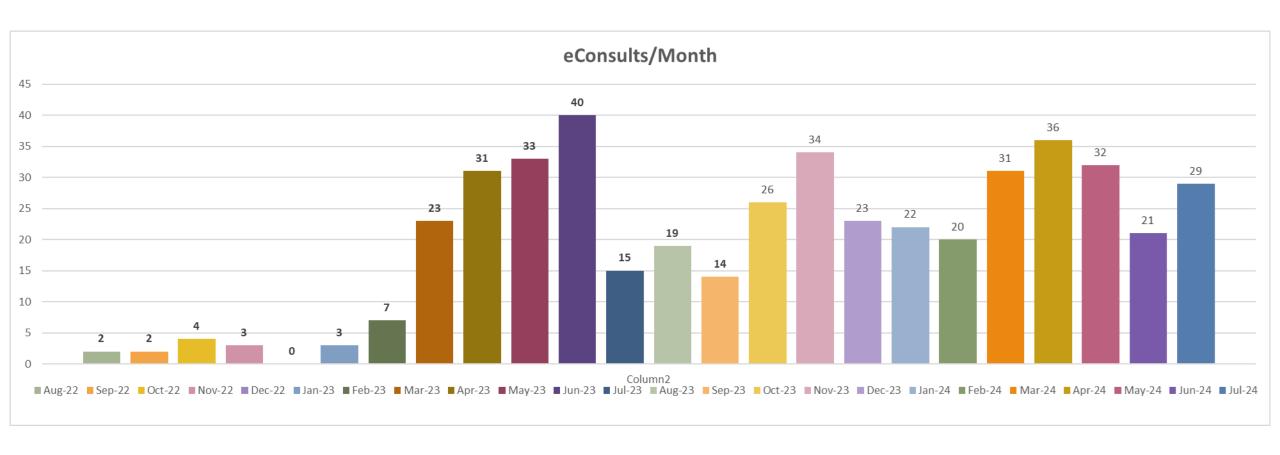
7 eConsult departments in development

- Nephrology (BPI-BM)(Oct Finalizing Billing)
- Endocrine (BPI-BM)(Oct Finalizing Billing)
- Neuro-Ophthalmology (Specialty Only)
- Pedi Infectious Disease (Template development)
- Pedi Developmental (Template development)
- Dermatology (BPI)(IS Build required)
- Urology (BPI)(IS Build required)

2 Enhanced Referral departments in development

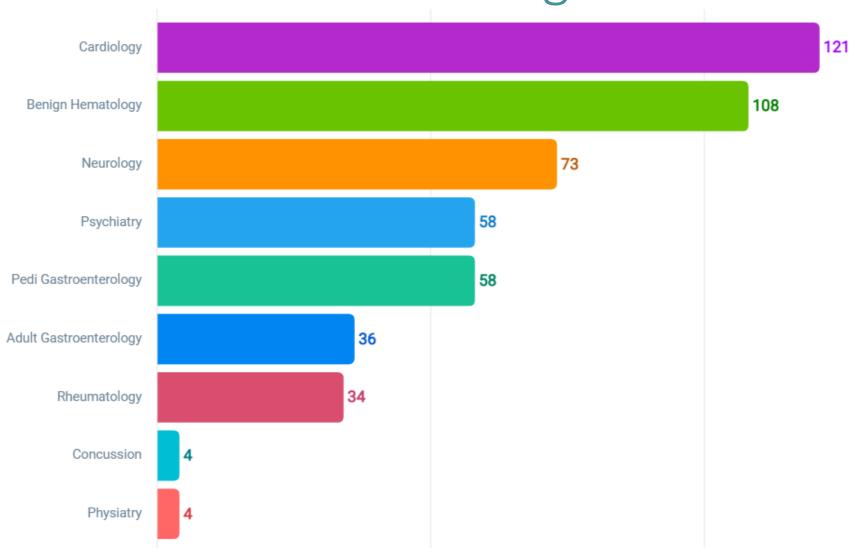
- Gastroenterology (Primary Care)
- Psychiatry (Primary Care)
- Cardiology (CVI) (Enterprise)
- Oncology (LCI) Template development/Access operations
- Behavioral Health (Psych/Gateway) Template development/Access operations

Lifespan: eConsult Monthly Volume

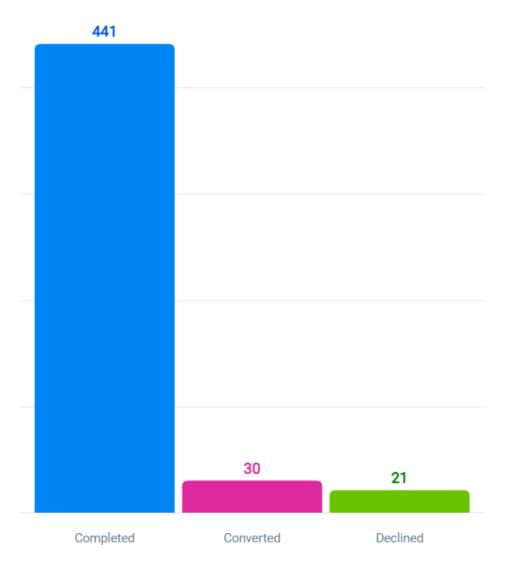




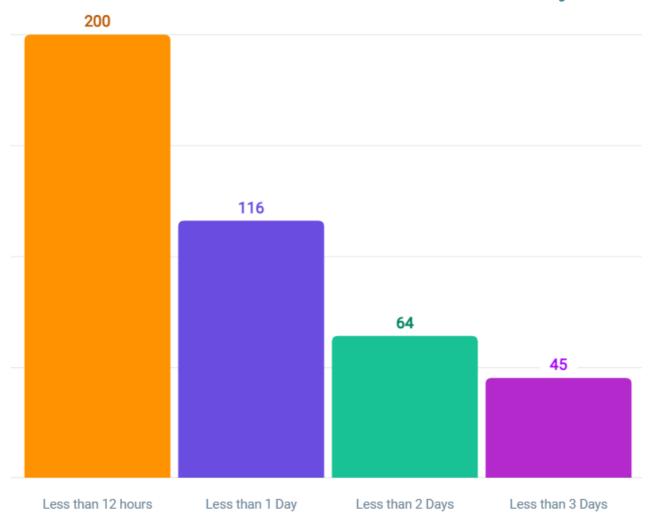
eConsult volume varies by specialty and time since go-live



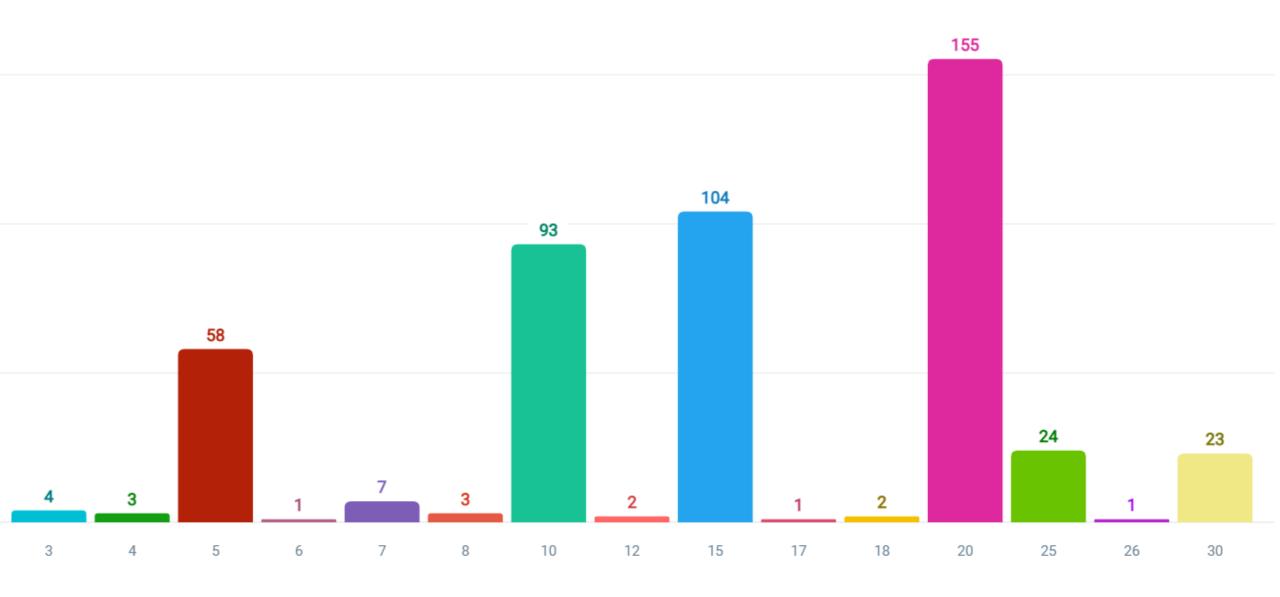
Less than 7% converted to referral Less than 5% declined



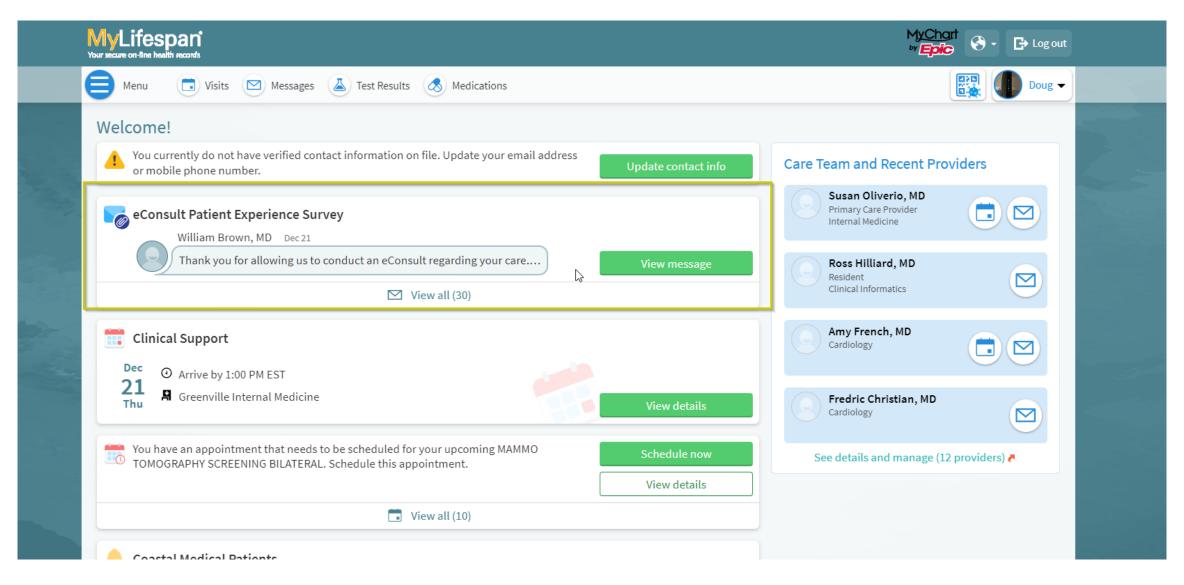
eConsultants respond in less than 3 days and 75% the same day!



eConsultants spend 10-20 min completing reply



Patient Exp myChart Questionnaire - Day 4



The eConsult was an effective alternative to an in-person specialist visit I noticed the following by participating in an eConsult compared with an in-person specialty visit	Yes Yes Saved time (by not having wait to get in, or travel to
Communication from my primary care team about the specialist's recommendations was prompt.	
Question	7/31/2024 9:19 AM EDT - Filed by Patient Yes

e E-Consuit Patient Experience Survey

Question

My primary care team discussed the eConsult process with me:

Communication from my primary care team about the specialist's recommendations was prompt. Yes

I'm satisfied with the specialist's recommendations

The eConsult was an effective alternative to an in-person specialist visit

I noticed the following by participating in an eConsult compared with an in-person specialty visit

Saved time (by not having to wait to get in, or travel to and from an appointment)

Saved money (gas, no time off work, no need to arrange for someone to come with

7/30/2024 9:20 AM EDT -

7/20/2024 10:46 AM EDT -

specialists

Saves time! Saves money! Better coordination!

Saved money (gas, no time

off work, no need to are-



Question	
My primary care team discussed the eConsult process with me:	Yes
Communication from my primary care team about the specialist's recommendations was prompt.	Yes
'm satisfied with the specialist's recommendations	Yes
The eConsult was an effective alternative to an in-person specialist visit	Yes
I noticed the following by participating in an eConsult compared with an in-person specialty visit	I appreciated the coordination between my primary care team and the specialists
would participate in an eConsult again for a similar issue	Yes
Please describe any additional feedback you'd like to share here	

My primary care team discussed the eConsult process with me:

Communication from my primary care team about the specialist's recommendations was prompt. Yes

I'm satisfied with the specialist's recommendations

The eConsult was an effective alternative to an in-person specialist visit

I noticed the following by participating in an eConsult compared with an in-person specialty visit

Saved time (by not having to wait to get in, or travel to and from an appointment)

I appreciated the coordination between my primary care team and the

Clinician Experience 2 Question Survey

- 1. Please rate your satisfaction with this eConsult response.
 - Very satisfied
 - Satisfied
 - Neutral
 - Dissatisfied
 - Very dissatisfied
- 2. In the absence of an eConsult, what would have been your first step in addressing this question?
 - Contact specialist via pager/phone.
 - Contact specialist via Secure Chat or Inbox message in Epic/EHR.
 - Contact specialist via email (outside of Epic/EHR).
 - Search medical reference/clinical guidelines.
 - Order a standard referral visit to the specialist.
 - Other: Insert textbox.

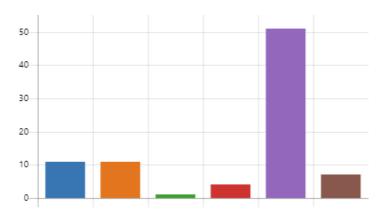
PCPs are very satisfied & referrals reduced

95% of PCP very satisfied/satisfied with eConsult response.

60% of eConsults would have been referrals.







PCP Engagement

Co-Management Conferences

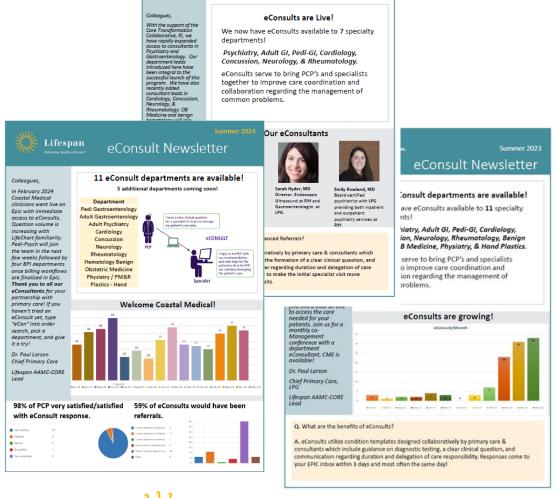
- Completed Monthly; Mar Nov 2023
- CME Available
- Ongoing March Nov 2024

eConsult Newsletters

- Winter 2022, Summer 2023
- Fall 2023, Summer 2024

Resources

- Workflow Tip Sheets PCP & Specialist
- FAQ Billing & General
- Patient Education Brochure & pdf



eConsults Newsletter



Specialist 99451 Claim Submission

Currently payable:

- BCBS RI Commercial & Medicare (No cost sharing)
- NHP RI Medicare
- United Health Care Commercial, Medicare, RiteCare.
- Medicare
- Tufts/US Fam & Commercial
- HPHC
- Cigna
- Aetna Commercial & Medicare

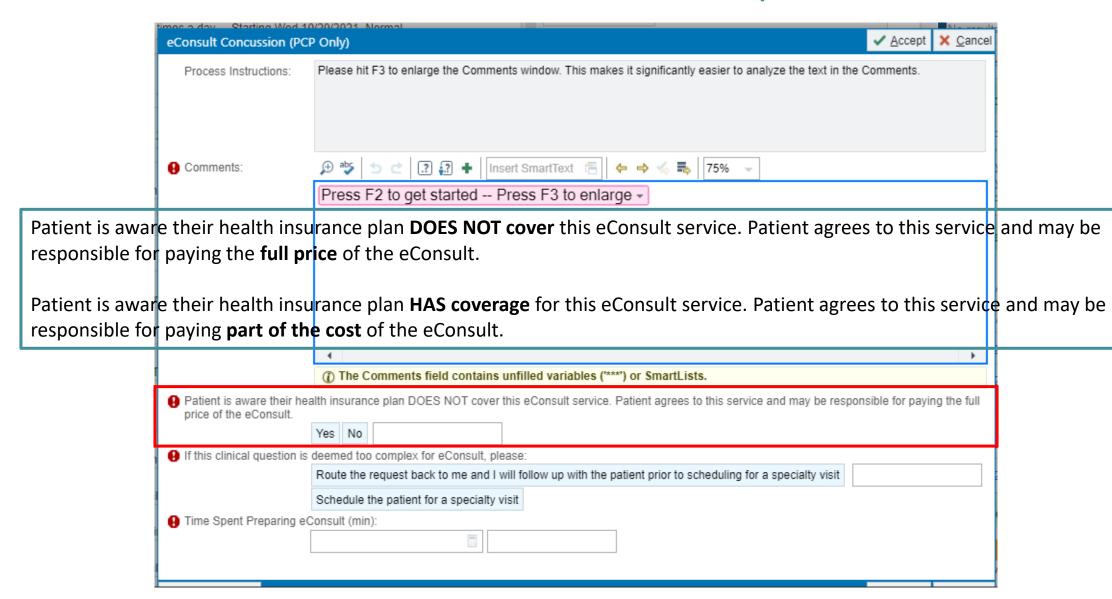
NOT payable:

- RI Medicaid
- NHP RI Medicaid & Commercial [Patient Billed]

99452 PCP Claims:

- Require 16-minute front-end work
- Actively monitoring PCP reported time
- AAMC CMS Considering definition changes

Verbal Consent is Required



Provide Patient Education Brochure



What is an eConsult?

An eConsult is a question about your care that your provider sends to a specialist electronically. You and your provider then use the specialist's response to choose the best care for you.

This is a way for you and your provider to take advantage of the expertise of a specialist while keeping your care with your primary care provider.

How do I benefit from an eConsult?

With an eConsult, you get care from a specialist without having to schedule a separate appointment. That saves you time, even while you're getting the best care possible.



Wouldn't it be better for me to see a specialist in person?

Your health is very important to your primary care provider. An eConsult will only be used when your provider is confident that a specialist can make helpful recommendations about your care without seeing you in person.

In some cases, the specialist may decide that an in-person appointment is necessary and will make that recommendation in their response to your provider. But most of the time, the specialist will be able to give your provider helpful answers without seeing you in person.

Who pays for an eConsult?

As with any service you receive as part of your health care—like an X-ray or a blood test—you may pay part of the cost of an eConsult. You're portion of the cost depends on your health plan. The eConsult is typically lower than the cost of an in-person appointment with the specialist.

If the specialist recommends you make an in-person appointment, you will only be charged a co-payment for the in-person visit. You won't be charged for the eConsult.

If the specialist declines the eConsult or doesn't provide an answer, you won't be charged.

How do I learn more about eConsult?

Your primary care provider can answer your questions about eConsults.

Consent

Your primary care provider will ask you for your consent to use this service.

eConsults have lessened patient wait times, reduced unnecessary referrals, and improved collaborative efforts amongst providers. Hope to see all specialties utilizing eConsults in the future.

- AMC PCP participating in Project CORE





Care New England/Integra Community Care Network Project Core: eConsults & enhanced Referrals

Joseph Diaz, PCP Clinical Lead

Integra: Accountable Care Organization







200+ primary care providers in 100 practice locations



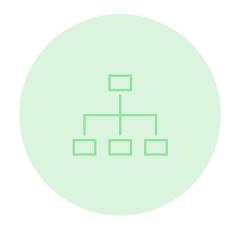
800+ specialists

9/12/2024 PROPRIETARY **34**

Our CORE Team







KAILA DEFOSSE, PROGRAM MANAGER



RICARDO PEREZ, SR. DATA ANALYST

9/12/2024 PROPRIETARY **35**

Integra's Achievements

Implemented 9 specialties, totaling 500 eConsults since July 2022

eConsult dashboard, along with the creation of multiple metrics, to monitor success

Implemented a PCP response survey

Demonstrating low declined and conversion rates

Took the program from pilot to fully operational (including billing)

Engaged 74/109 PCP's

9/12/2024 PROPRIETARY **36**

Integra's Overall Performance

eConsults



- 68% of PCPs have placed at least one econsult
- 8 Specialties currently operational
- 1 Discontinued: Endocrinology
- 9% of all specialty contact

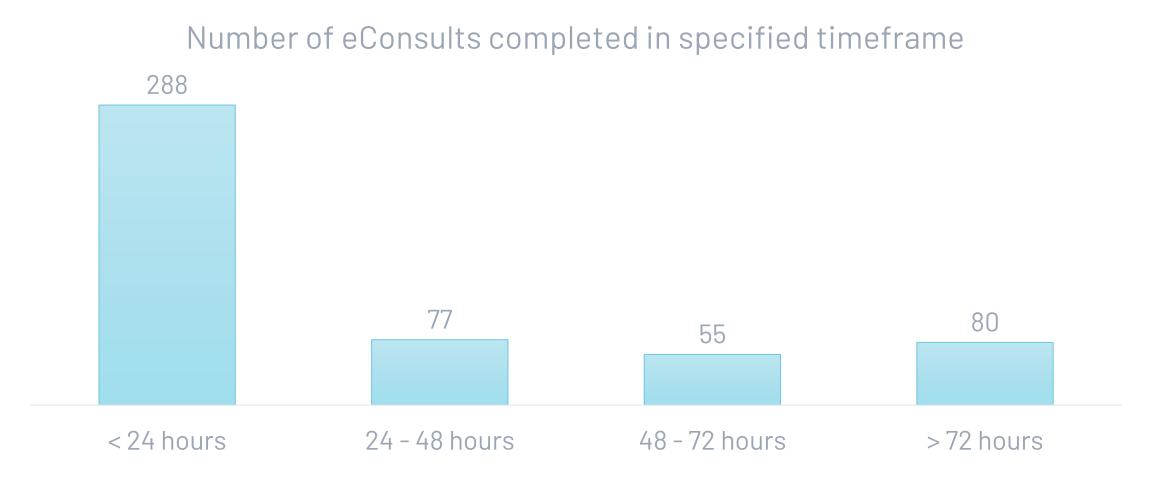
89% completed within 72 hours

- 69% of those completed in less than 72 hrs., have been completed in less than 24hrs.
- 84/471 (18%) of eConsults resulted in an inoffice visit within 60 days

Enhanced referrals

- 6,493 enhanced referrals placed
- 10 Specialties operational:
 - Cardiology, Endocrinology, Infectious Disease, Pulmonary, Sleep Medicine, Psychiatry, Geriatrics, Orthopedics, Ob-Gyn, Rheumatology

Average eConsult response time was 1.9 days



Performance by Specialty

	Cardiology	Psychiatry	Infectious disease	Pulmonology	Sleep medicine
Go-live date	7/5/2022	11/29/2022	6/28/2023	8/17/2023	7/11/2023
Total orders	318	63	19	21	7
% completed in 11- 20 minutes	85%	83%	53%	14%*(30% were completed in <10min)	71%
Converted	0	2	1	2	0
Declined	12	4	0	4	0
Average response time	1.6 days	1 day	2.1 days	1.5 days	2.5 days
% within 24 hours	55%	81%	58%	76%	29%
% within 72 hours	84%	90%	79%	86%	86%
Top conditions	"Other" Arrhythmia- Palpitations- Abnormal ECG	Anxiety "Other" Depression	Lyme Disease Latent TB	COPD "Other"	Sleep Apnea Confirmed Restless Leg Syndrome

Provider, Patient, and Specialist Engagement

Engagement Strategies

Collaborated with a dedicated Primary Care Working Group for program development

Physician and Practice Champions

Provider POD Meetings

Front end office staff meetings

Patient Rack Cards

Provider performance reports

Newsletters

Embedded PCP Survey

Patient Brochures

An **eConsult** can be part of your care.





Care New England

Your doctor wants the best care for you.

Hello, eConsult.

An eConsult is a way for your primary care provider (PCP) to ask an Integra/Care New England expert input regarding your care. You and your PCP use the information from the eConsult to choose the best care option.

How do I benefit from an eConsult? With an eConsult, you receive care from a specialist without having to schedule a separate appointment. This saves you time without compromising care.

Would it be better to see a specialist in person?

An eConsult is only used when your PCP is confident a specialist can make recommendations about your care without seeing you in person. In some cases, the specialist may decide that an in-person appointment is necessary and will make that recommendation to your PCP.

Who pays for an eConsult? As with any healthcare service you receive, you may have to pay part of the cost of an eConsult, depending on your insurance coverage. The eConsult is typically lower than the cost of an in-person appointment with the specialist. You will not be charged if the specialist does not complete the eConsult.

How do I learn more about eConsults? Your PCP can answer questions about eConsults.



Care New England

Provider Automated Survey Responses

Q. Please rate your satisfaction with this eConsult response.

95% "Very Satisfied"

5% "Satisfied"



Q. In the absence of an eConsult, what would have been your first step in addressing this question?

78% "Ordered a standard referral"

11% "Contacted the specialist via pager/phone"

11% "Contacted specialist via secure chat or inbox message in EPIC/EHR"

Overall feedback from PCPs is very positive

"I have found the eConsults very helpful to my practice!... I find patients have been very satisfied with this type of consult as it helps them to avoid unneeded visits, especially for those patients who have limitations like lack of transportation to appointments."

"Responses from specialists have been fast. Lack of timely access to see specialists in person is frustrating so this helps some ... Would love to see more specialties with eConsults." "All the specialists I've communicated with have been prompt and knowledgeable and I'm excited to continue to use this program to improve patient care and gain quicker access to specialist input."

"I also see it being able to reduce some of my office based clinical referrals if I am able to quickly get an answer to a clinical question."

Positive feedback from specialist surveys



"very good experience"



"steady (volume) but not overworked"



"could use it more" – many patients that could easily be eConsults



Areas for increased use: palpitations, abnormal holter, lipid control, HTN management, etc.



'Would be helpful for someone to triage consults' and provide eConsult option

eConsult QA

Continuous manual monitoring of all eConsults monthly, for appropriate questions, accurate documentation, and timeliness of completion

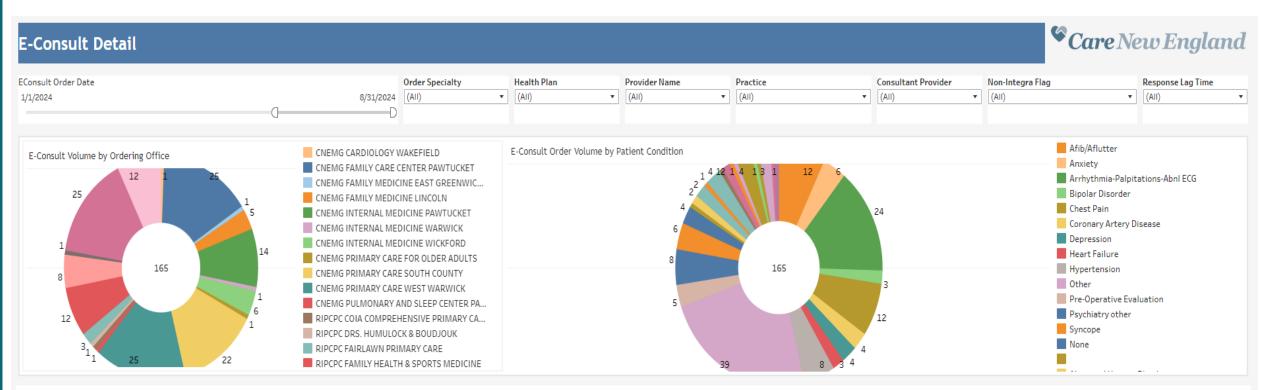
Epic generated billing reports for patient expense, specialty in-office referrals following an eConsult, etc.

eConsult Dashboard

Monitoring of PCP and Specialist Surveys

eConsult Dashboard





E-Consult Volume by Ordering Provider



Health plans/payors covering eConsults

Blue Chip

Blue Chip for Medicare

Blue Cross Healthmate

Blue Cross RI Commercial Blue Cross RI for Duals

Medicare Parts A&B

UHC Seniors

UHC Dual Medicare Complete

UHC Commercial





ADVANCING INTEGRATED HEALTHCARE

Specialist Experience

Kevin Bail (Psych) & Teresa Slomka (Cardiology) Integra Emily Rowland (Psych) & Marilyn J. Weigner (Cardiology) Lifespan

Care Transformation Collaborative of RI

eConsult EHR HIE Interoperability Solution

Paul Larson MD, MS, MBA, CPE Chief Primary Care & AAMC Project Core Lead, Lifespan

Neil Sarkar PhD, MLIS, ACHIP, FACMI, FAMIA President and Chief Executive Officer of the Rhode Island Quality Institute



External Pivot

- eConsults remains limited to PCPs and specialists on Epic-based EHRs.
- An interoperable solution is required to facilitate eConsult between any EHR platform.
- Existing solutions from Epicare Link and AristaMD do not meet workflow requirements due to PCPs order in third-party platform external to their EHR.
- Engage with RIQI and other technical experts from Lifespan IS, Care New England/Integra IS, Epic and other EHR vendors for project discovery/technical feasibility leading to RIQI proposal to develop, implement, and support such a capability.





eConsult External Pivot Project Subcommittee

- CTC Pano Yeracaris, Sue Dettling
- AAMC Meaghan Quinn,
- RIQI Neil Sarkar, Scott Young, Bhawna Sehgal, Andréa Levesque, (HIE vendor project manager)
- Lifespan Paul Larson, Doug Hopper, Donna Blanchard
- Integra Kaila Defosse
- Thundermist Mice Chen, Matthew Malek













HIE CurrentCare & CRISP

- Contemporary HIE technology (as implemented for CurrentCare) can support **SMART-on-FHIR applications** within its clinical viewer application and serve as FHIR endpoint for such applications.
- RIQI can acquire the capability to design, develop, and support a SMART-on-FHIR application to facilitate eConsult data transfer between vendor EHRs.
- Solution will be designed to be EHR-agnostic, using standard interfaces through FHIR.
- Proposal will include description of scope, estimates of build, implementation, & maintenance cost, and proof of concept for use of SMART on FHIR between community based EHRs and Epic.
- HIE is transitioning to a new vendor CRISP. Project discovery to proceed.
- Focus on SOC alignment for standard templates







ADVANCING INTEGRATED HEALTHCARE

Blue Cross Blue Shield of RI

Cathleen Newman

Care Transformation Collaborative of RI



Engaging Specialists in Value-Based Care

Martin Kerzer, D.O.
Senior Medical Director CPGRI

CPGRI Value-Based Care Model

- ☐ In 2022, CPGRI entered into a fully capitated arrangement with BCBSRI for 13,000 BCBS Medicare Advantage members
- ☐ CPGRI is the only system of care to have full risk arrangement and with UM/CM delegation
- ☐ Historically, Specialists have participated in shared savings along with our PCPs but without the understanding of "why"
- Our mission became focused on education around high quality network performance

Specialist Engagement

Monthly PCP POD meetings were expanded to include Specialists
In 2023, met with multiple specialties in network group for IPA education and review of cost efficiency data
Dermatology pharmacy spend main cost driver in 2023
Dr. Kerzer, Matt Brazier (Dir of Pharm) and BCBS Specialty Pharmacist Carmen Oquendo met with individual dermatology groups to review BCBSRI MA cost efficiency reports with prescribing patterns and associated medication costs, and to formally develop practice protocols
Sidenote: After initial meeting and review of the main cost drivers and prior to developing a formal practice protocol around high-cost medications, one group had already changed their practice internally, leading the way towards more cost-effective care
Will review claims data every 6 months to see if prescribing protocols are effective in improving quality of care and cost efficiency

Developing a High Performing Network

- ☐ Initial success with dermatology is the **blueprint for expansion** to other specialties where total cost of care is noticeably above average compared to other SOCs (GI next)
- ☐ Will continue to review cost effective opportunities whether it be pharmacy, site of care or access issues
- ☐ PCP retention to our in-network specialists is another focus area
- ☐ Expanded our Network and Retention Committee to include specialists



WIN for Specialists
WIN for PCPs

WIN for CPGRI =

WIN for PATIENTS!



ADVANCING INTEGRATED HEALTHCARE

CME Credits & Evaluation

Reminder to please complete the evaluation in order to claim CME credits!

Claim CME credits here: https://www.surveymonkey.com/r/ZDZS5HG



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ADVANCING INTEGRATED HEALTHCARE

THANK YOU

Debra Hurwitz, MBA, BSN, RN dhurwitz@ctc-ri.org

