Fresno County-Wide E-Consult Collaboration Roundtable

November 20, 2020

e-consult WORKGROUP

Fresno County E-Consult Roundtable Agenda

Activity	Description	Time
Partner Introductions	Fresno program stakeholder introductions	10 minutes
Program Overview	• Goals and objectives for Fresno County program • Program Approach • Roles and Responsibilities	10 minutes
Project Milestones	• Landscape assessment • Provider organization engagement • Dashboard of program metrics • Spread of payer collaboration to additional counties	10 minutes
Provider Engagement and Support Needs	Provider perspectives: Family HealthCare Network Key tenets: • Specialty access needs • Workflow and technology needs • Organizational support needs • Provider user engagement	30 minutes
Measures of Success: Dashboard	• E-consult data to drive program participation • Examples of payer success • Patient engagement and equity • Community-wide measures of success	20 minutes
Roundtable Vision and Next Steps	Monthly Roundtables to engage Fresno County providers – provider engagement, outreach and alignment	10 minutes

Partner Introductions

Provider Organizations
- Camarena Health
- Clinica Sierra Vista
- Community Regional Medical Center
- Family HealthCare Network
- Omni Family Health
- United Health Centers

IPAs and Networks
- CCIPA
- Central Valley Health Network
- First Choice/Babylon
- La Salle Medical Associates
- Sante Health

Health Plans
- Anthem Blue Cross
- CalViva
- Health Net

ConferMED
- Daren Anderson, MD
- Agi Erickson
- Maryann McGuire

Project Management
- BluePath Health

Roundtable Objectives

- Establish key stakeholder commitment for Fresno community-wide effort

- Commit to key program principles and desired outcomes

- Identify other organizations who should be at the table

- Discuss provider readiness and rollout phases

- Identify provider champions

- Determine how we can measure success

Program Overview: Approaches to E-Consult Collaboration

**Vision:
Transform specialty care through e-consult**

County-wide collaboration aims to incorporate e-consult as a first step towards a routine, non-urgent specialty referral across Medi-Cal providers in Fresno county

Collaborating with existing e-consult programs

E-consult programs exist across California but have not yet been scaled to maximize impact. This collaboration will complement existing e-consult systems to improve access for Medi-Cal managed care members.

Implementing new e-consult programs

Many providers have not implemented e-consult despite evidence that shows it can improve access and reduce costs. The initiative aims to engage payers to scale a platform and provide county-wide support.

Aligning payment and incentives for e-consult sustainability

Payer reimbursement and incentive alignment initiative will lead policy and systems transformation to promote e-consult sustainability and overall improvements in access.

Sustainability of e-consult programs will be achieved through collaboration between plans to standardize program components

Fresno County E-Consult Collaboration Project Milestones

The Fresno County-Wide E-Consult Collaboration effort will engage providers to launch e-consult in 2020-2021, holding monthly Round Tables to increase engagement, and reporting county-wide activity using a shared dashboard.

Task	1-Oct	5-Oct	12-Oct	19-Oct	26-Oct	2-Nov	9-Nov	16-Nov	23-Nov	30-Nov	7-Dec	14-Dec	21-Dec	28-Dec	Jan	Feb	Mar
Project Kickoff	■																
County Landscape Assessment																	
Synthesize findings and share to develop rollout plan		■	■	■	■	■											
Payer Engagement																	
Develop county-specific E-Consult Strategy and Engagement Plan							■	■	■	■							
Provider Engagement																	
Collaborate with vendors to launch provider sites									■	■	■	■	■	■	■	■	■
County-Wide Round Tables																	
Hold monthly stakeholder engagement sessions to address challenges									■			■			Monthly	■	■
County-Wide Dashboard																	
Develop dashboard of shared county-wide metrics for program success							■	■	■	■	■	■	■	■	Ongoing	■	■

Fresno E-Consult Collaboration: Program Stakeholder Roles

	Payer Organization	Provider Organization
Identify specialty access needs	✓	✓
Cover specialty consults for plan members regardless of payer or platform	✓	
Offer preferred e-consult platforms to providers where needed	✓	
Communicate and promote program to providers	✓	✓
Engage provider users, identify program champions and engage local specialists		✓
Consider and align primary care provider incentives	✓	
Participate in Roundtables to track progress and problem solve	✓	✓

FQHC Perspective – Family HealthCare Network

Matt Miller
Managed Care Manager
Family HealthCare Network
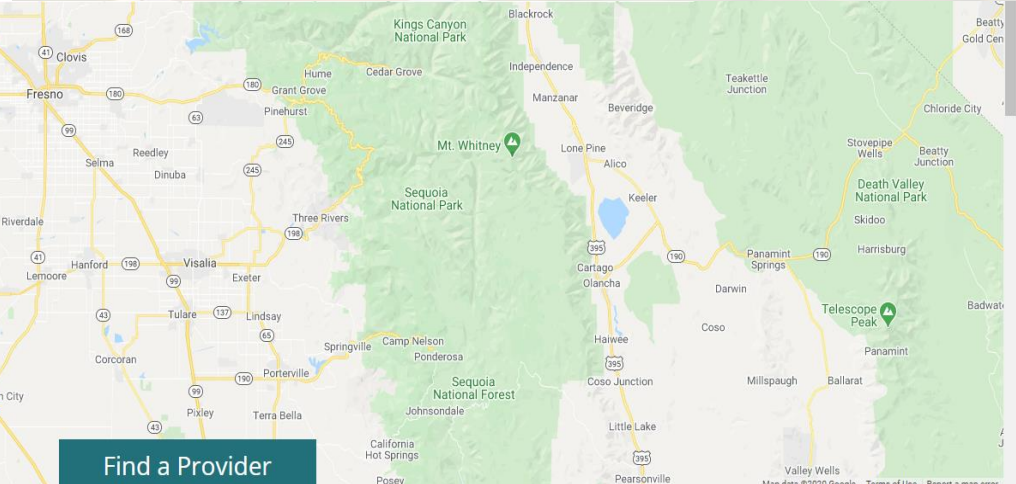
Project Engagement and Support Needs

What does the Fresno program need?

- Engaged leadership
- Established relationships between PCPs, specialists
- Intuitive technology
- Attention to workflow
- Dedicated project management team
- Funding mechanism

What challenges will the program address?

- Clinician resistance
  - PCP workload
  - PCP workflow
  - Specialist reviewer workload
- Lack of integration with EHR
- Liability concerns
- Lack of systems support
- Lack of reimbursement

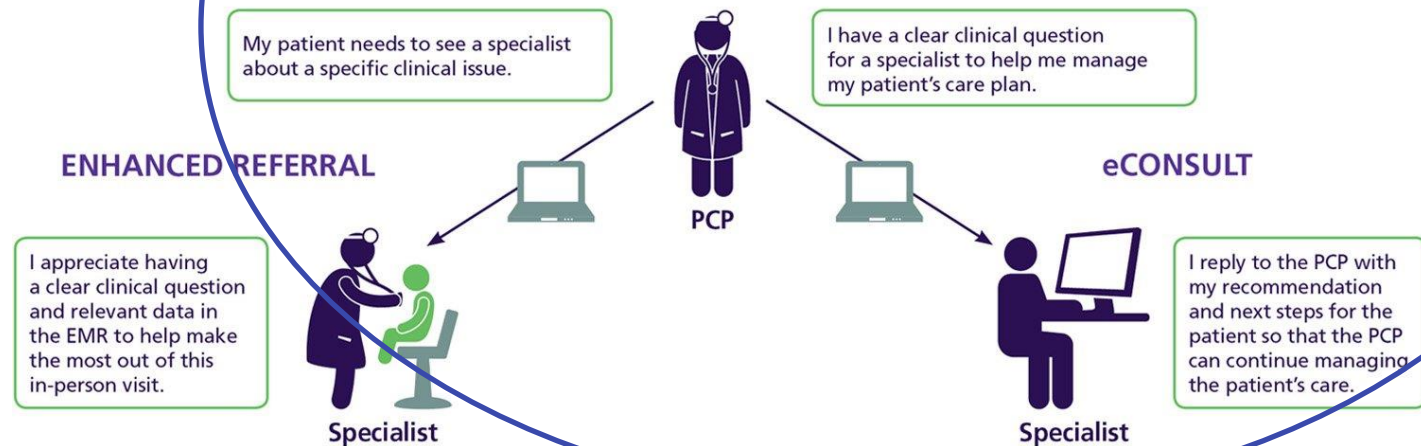Tuot, BMC Health Services Research, 2016.

Patient and Member Needs:
E-Consult and Equity

Important to Consider…
- Provider-patient relationship & trust
- Communication mode (phone, virtual, in-person)
- Language access
- Health literacy
- Patient-centered strategies
- Patient preferences
- Shared decision making

To promote equity, you should center and support the provider-patient relationship, the patient, and communication

My patient needs to see a specialist about a specific clinical issue.

I have a clear clinical question for a specialist to help me manage my patient's care plan.

ENHANCED REFERRAL

eCONSULT

PCP

I appreciate having a clear clinical question and relevant data in the EMR to help make the most out of this in-person visit.

I reply to the PCP with my recommendation and next steps for the patient so that the PCP can continue managing the patient's care.

Specialist

Specialist

Source:
Denise Payan, PhD, UC Merced, E-Consult Workgroup Presentation 2020
https://www.aamc.org/news-insights/econsults-reduce-need-specialty-referrals

The Fresno County E-Consult Collaboration is Unique among California Managed Care Organizations' Programs

County Programs

County-Wide Collaboration

Measures of Success: E-Consult Programs
Deliver Efficiency, Cost Savings and Satisfaction

Specialist response times improve ranging from half a day to three business days.

Patients with eConsults are scheduled for face-to-face visits more quickly. Wait times for patients with eConsults range from 5 to 34 days, compared to 65+ days without…an average of 89.2% reduction in specialty care wait times.

Unnecessary face-to-face visits are reduced. eConsult programs have resulted in a 54.6% reduction of inappropriate referrals. An average of 69.2% of eConsult questions are resolved virtually.

No show rates are reduced. Visit completion rates following eConsult range from 64-88% as compared to 60-70% with traditional referrals.

PCP satisfaction is high with 70-100% of primary care providers expressing satisfaction with eConsult advice and patient care.

Specialist satisfaction is high with 50-95% of specialists satisfied with eConsult use.

Patient/member satisfaction is high with 78-96% of patients satisfied with eConsult quality, access and safety.

Econsults: A Triple Win for Patients, Clinicians and Payers, A Thielke, V King, June 2020
https://www.confermed.com/#how-works 2020

Inland Empire Health Plan: Local Specialist Engagement

Multi-County E-Consult Initiative (MCEI)

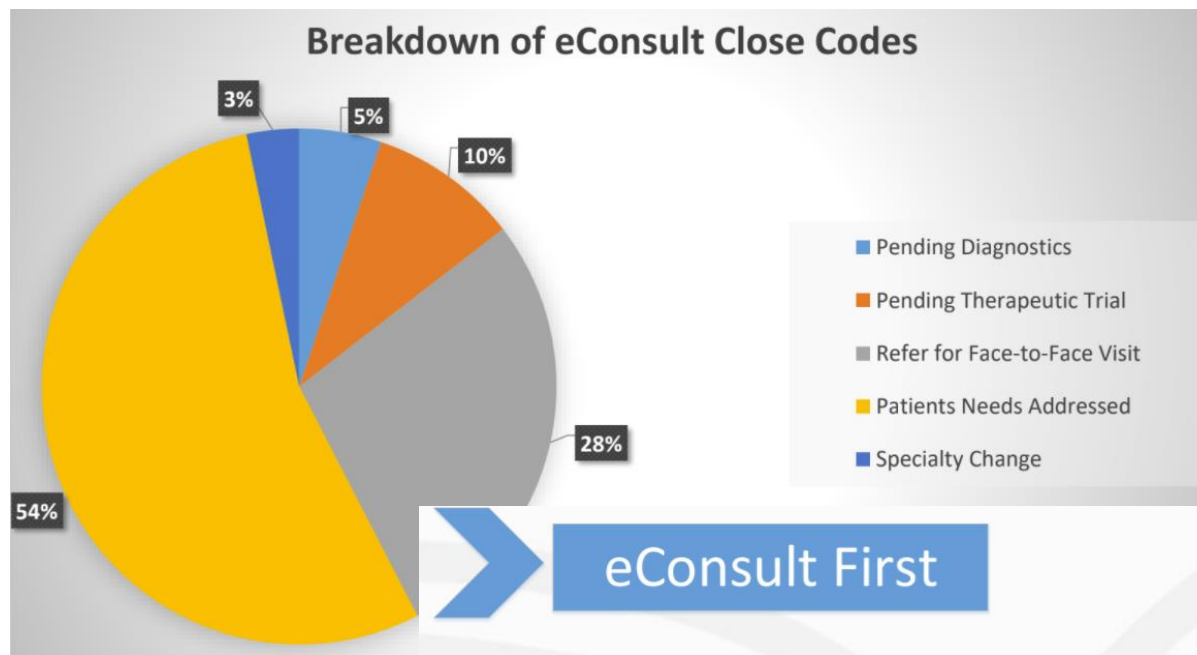| Metric	Current Number
# of eConsults	77,542 / 80,877
Clinic Sites	93
Specialties/Services	44
Primary Care Providers	569
Specialist Reviewers	100

Program measurement timeframe: July 2019- October 2020

Membership: ~300k lives

Percent of eConsults Referred Non Face-to-Face (IEHP)

2020

Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov
13.6%	13.0%	14.7%	27.8%	17.1%	17.6%	12.7%	12.0%	13.3%	13.5%	15.2%
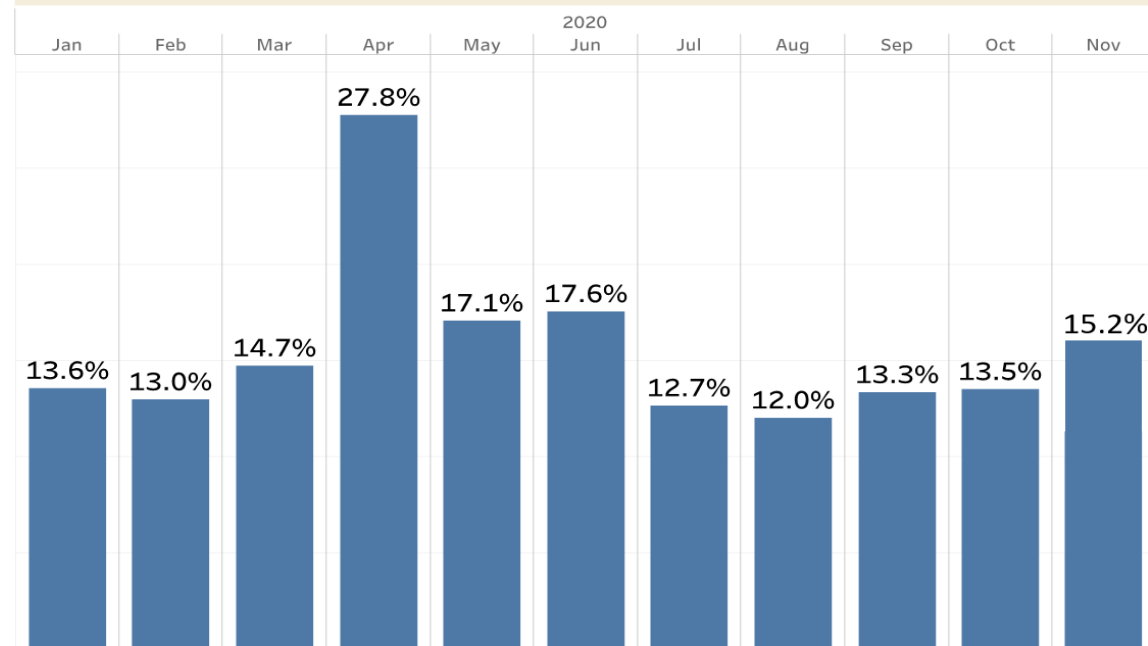
*Does not include ophthalmology eConsults and requests for GI procedures. eConsult Non Face-to-Face calculation only includes: face-to-face, specialty change, pending diagnostic, pending therapeutic trials, patient needs addressed and patient declined care. Does not include drafts.

Partnership Health Plan: E-Consult to Live Video

Breakdown of eConsult Close Codes

- 3%
- 5%
- 10%
- 28%
- 54%

Legend:
- ■ Pending Diagnostics
- ■ Pending Therapeutic Trial
- ■ Refer for Face-to-Face Visit
- ■ Patients Needs Addressed
- ■ Specialty Change

eConsult First

- 54% patient needs addressed without referral
- Patient time to care – average 4 days vs 51 days for traditional specialty appointment
- Reduced travel out of area and travel cost
- Reduced cost of care - 25% cost of traditional out of area specialty services
- PCP/Patient relationship – patient history and local care
- Referrals for face to face visits based on assessed need (pull versus pushed referrals)
  - Continuity of care – same specialist for eConsults as live video
  - More productive clinic
- Opens capacity for specialty face to face visits through improved referral management
- HIPAA compliant platform and specialist network costs paid directly by PHC

Requested F2F → Live Video

California Health & Wellness: Resolution of E-Consults
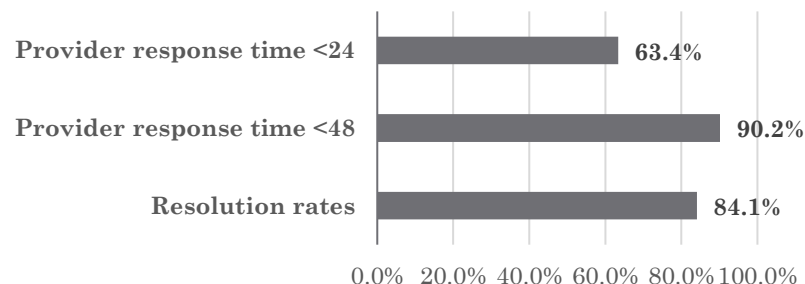
Average resolution of eConsults 2019 YTD

➢ 84.1% of referrals = no specialty care needed

➢ August 2019 100% of referrals returned within 48 hrs.

➢ 100% of PCP referrals go to eConsult first
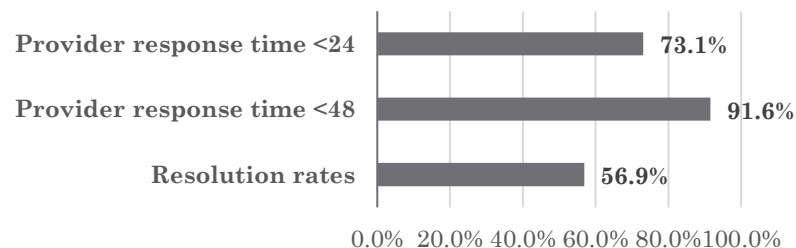
2020 Updates

➢ 653 eConsults

➢ 64.6% closed as PCP recommendations

➢ 98.1% of eConsults returned within 3 business days

Chapa-De metrics YTD 2019

Provider response time <24	63.4%
Provider response time <48	90.2%
Resolution rates	84.1%

0.0% 20.0% 40.0% 60.0% 80.0% 100.0%

Chapa-De metrics since inception (2016)

Provider response time <24	73.1%
Provider response time <48	91.6%
Resolution rates	56.9%

0.0% 20.0% 40.0% 60.0% 80.0% 100.0%

CHAPA-DE
INDIAN HEALTH

california
health & wellness™

Community Dashboard Vision: Discussion

What can be tracked initially across Fresno county provider organizations?

- PCP users engaged
- Specialists engaged
- E-consult volume per organization (by month, over program)
- E-consult volume per user (PCP and specialist, by month, over program)
- E-consult volume by payer
- Avoided unnecessary face-to-face visits
- Specialist advice within 5 calendar days (ConferMED averages 17 hours)
- HEDIS measures
- CAHPS scores
- E-Consults by specialty (e.g. select "top 10" to track):
    - Cardiology
    - Dermatology
    - Endocrinology
    - Gastroenterology
    - Infectious Disease
    - Nephrology
    - Neurology
    - Pain management
    - Psychiatry
    - Rheumatology

Reporting Goals:
Patient/Member and
Primary Care Provider Satisfaction

Key Metric of PRIME Programs using E-Consult to Achieve Access Goals

Percentage of requests for specialty care expertise, regardless of patient age, for which an individualized response was sent to the referring provider and/or the referring provider's care coordination team within 5 calendar days.

DPH Use of E-Consult to Meet PRIME Goals

Legend: AHS, SFHN, LACDHS, UCSF, CCRMC, SJGH
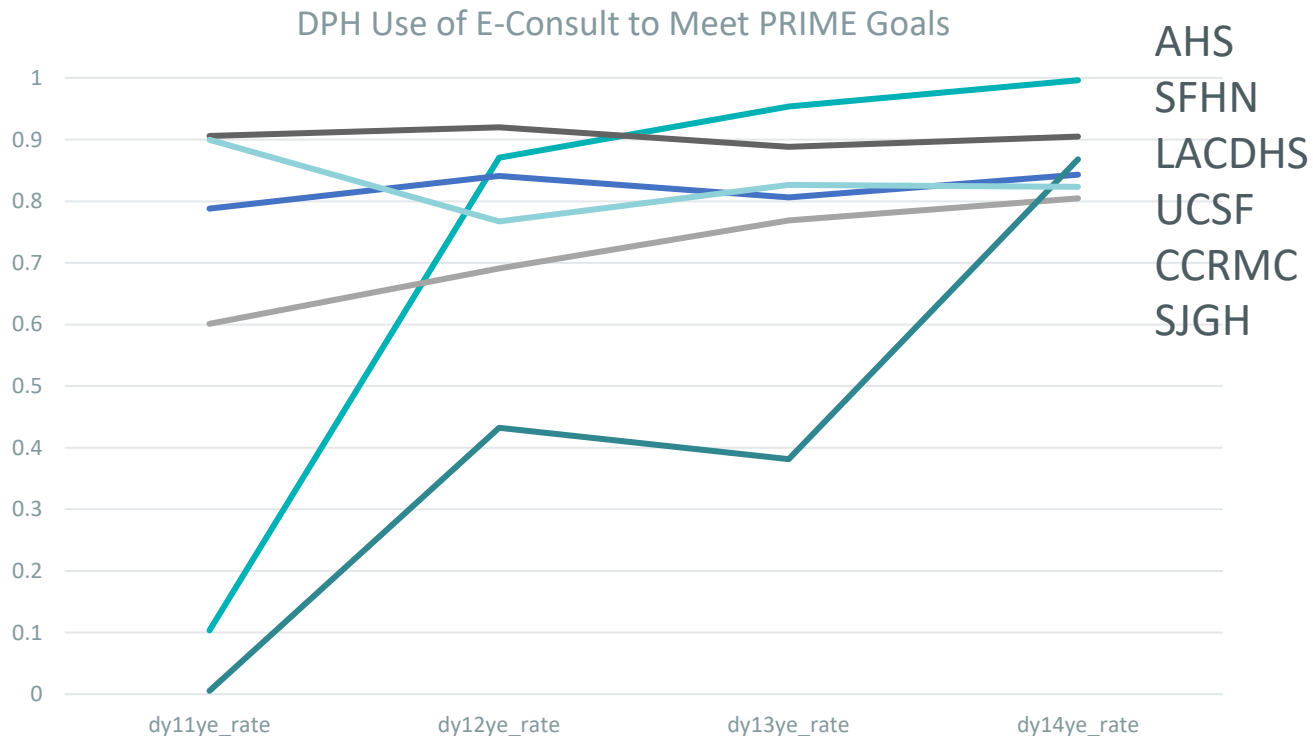
Roundtable Vision and Next Steps

What are future topics for monthly stakeholder roundtables?

- How do we think of consult as a result of the COVID-19 pandemic?

- Provider-to-provider communications improvement

- Addressing gaps in care

- Improved quality of care

Next Fresno County-Wide E-Consult Roundtable
Tentative Date: December 15, 11:30-1

Join us for the December 16 E-Consult Workgroup Webinar

The December E-Consult Workgroup webinar will feature Amber Larson, MHA and James (Jesse) Wheeler, DO, presenting their NEJM publication, <u>E-Consult Innovation: A Middle-Ground Model To Enhance Adoption and Improve Care.</u>

E-Consult Workgroup Webinar
December 16, 12-1 PT
https://us02web.zoom.us/j/9689264532

https://econsultworkgroup.com/
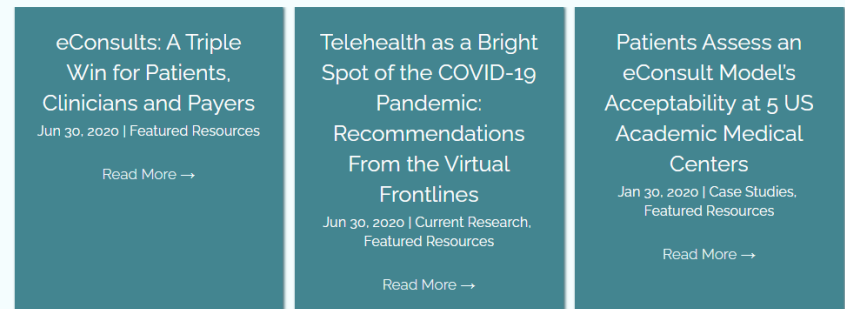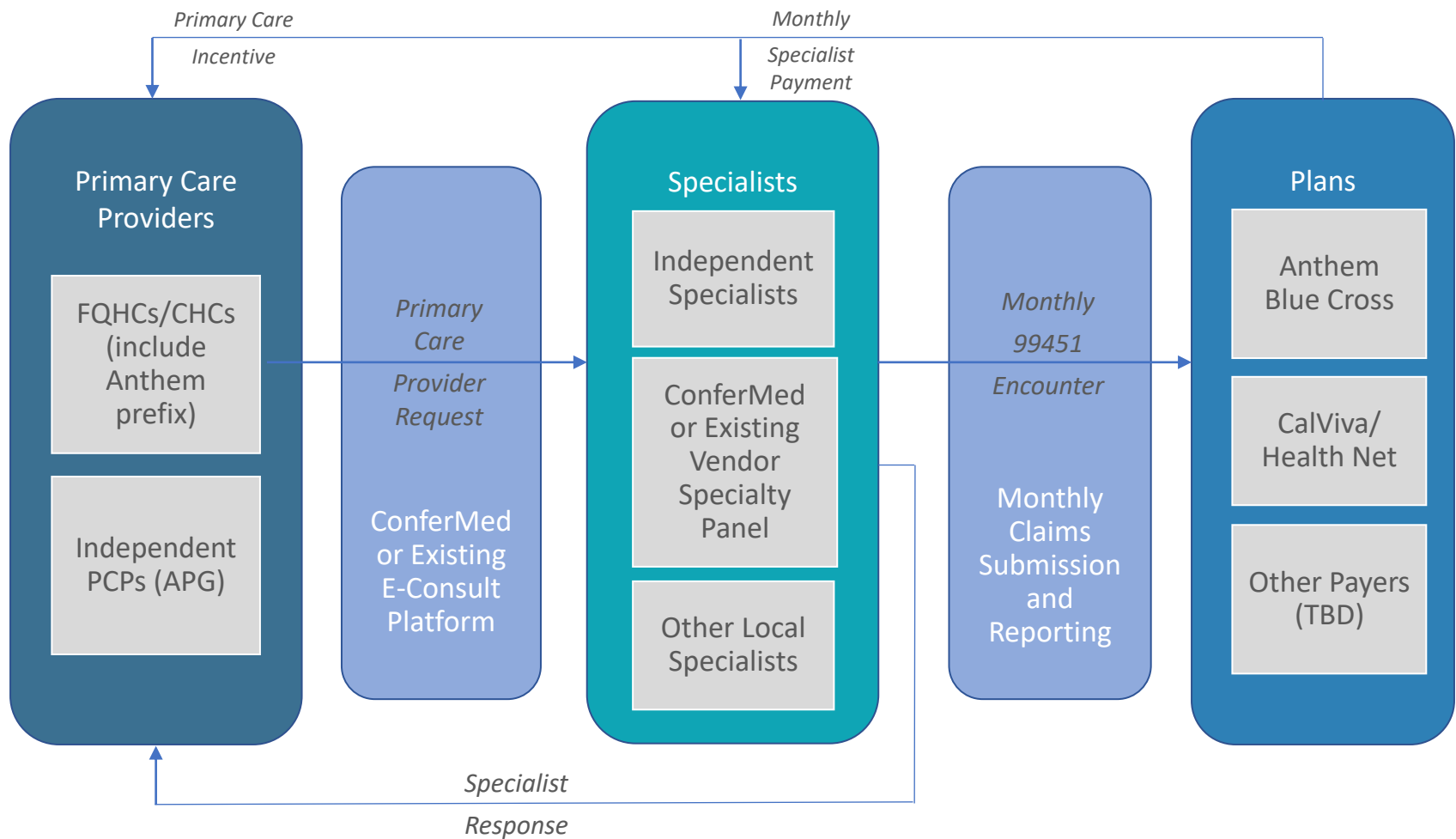
Appendix

E-Consult Program Data Transmission and Reporting:
Vision for Provider and Payer Collaboration
to Streamline Access to Specialty Care

Primary Care Incentive

Monthly Specialist Payment

Primary Care Providers

FQHCs/CHCs (include Anthem prefix)

Independent PCPs (APG)

Primary Care Provider Request

ConferMed or Existing E-Consult Platform

Specialists

Independent Specialists

ConferMed or Existing Vendor Specialty Panel

Other Local Specialists

Monthly 99451 Encounter

Monthly Claims Submission and Reporting

Plans

Anthem Blue Cross

CalViva/ Health Net

Other Payers (TBD)

Specialist Response

Prefixes used when PCP generates e-consult to identify payer