

Background

- ✓ Multi-specialty group practice with over 250 providers
- ✓ Affiliated with CHW
- ✓ Ten ambulatory clinic locations in the greater Sacramento region

EHR Implementation

- ✓ August 2006 implemented Allscripts Touchworks EMR (Upgrade May 2011)
- ✓ Big bang approach
 - Paperless overnight
 - E-Prescribing, chart notes, interfaces with Mercy lab and radiology for results
 - CPOE for labs and x-ray after 6 months
- ✓ Incentives for completing active medication and problem lists

The Refill Revolt

- ✓ Receiving 87% or more renewal requests via fax
- ✓ Duplicate requests
 - Multiple faxes
 - Multiple e-renewals
 - Multiple faxes and e-renewals both
- ✓ Increase in provider workload
 - Diversion of work from staff to provider
- ✓ Turn off electronic renewals!!

Rethinking the Refill Process

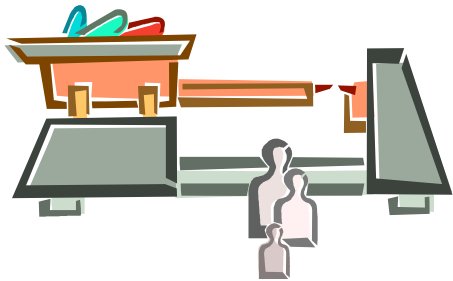


Patient requests medication refills from pharmacy

Pharmacy calls doctor's office for medication renewal

Doctor's office authorizes refill.

E-Fill Service as the Front Door to Medical Home



Renewal requests arrives at the clinic

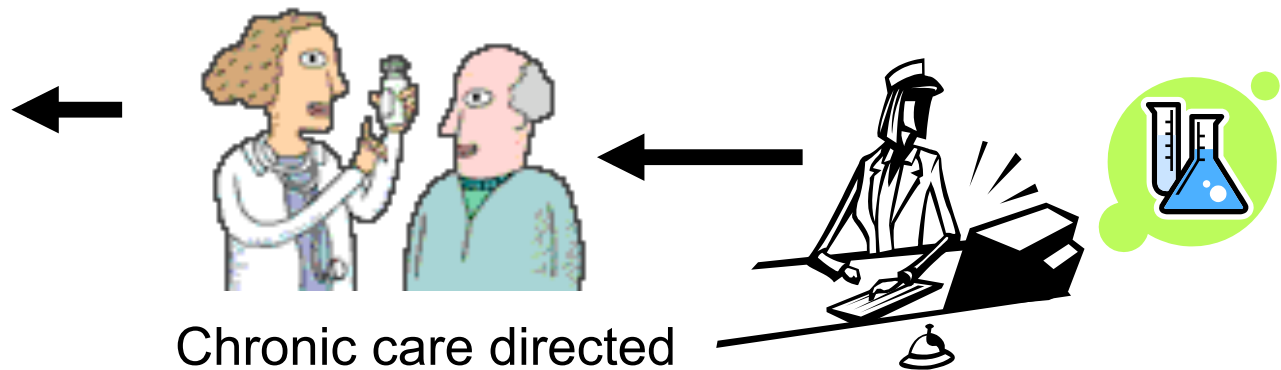


Office staff receives task from E-fill Team that pt needs follow up.

- Calls patient with pre-visit instructions and schedules appt.



Educational visits and maintenance by health team.



Chronic care directed by PCP.

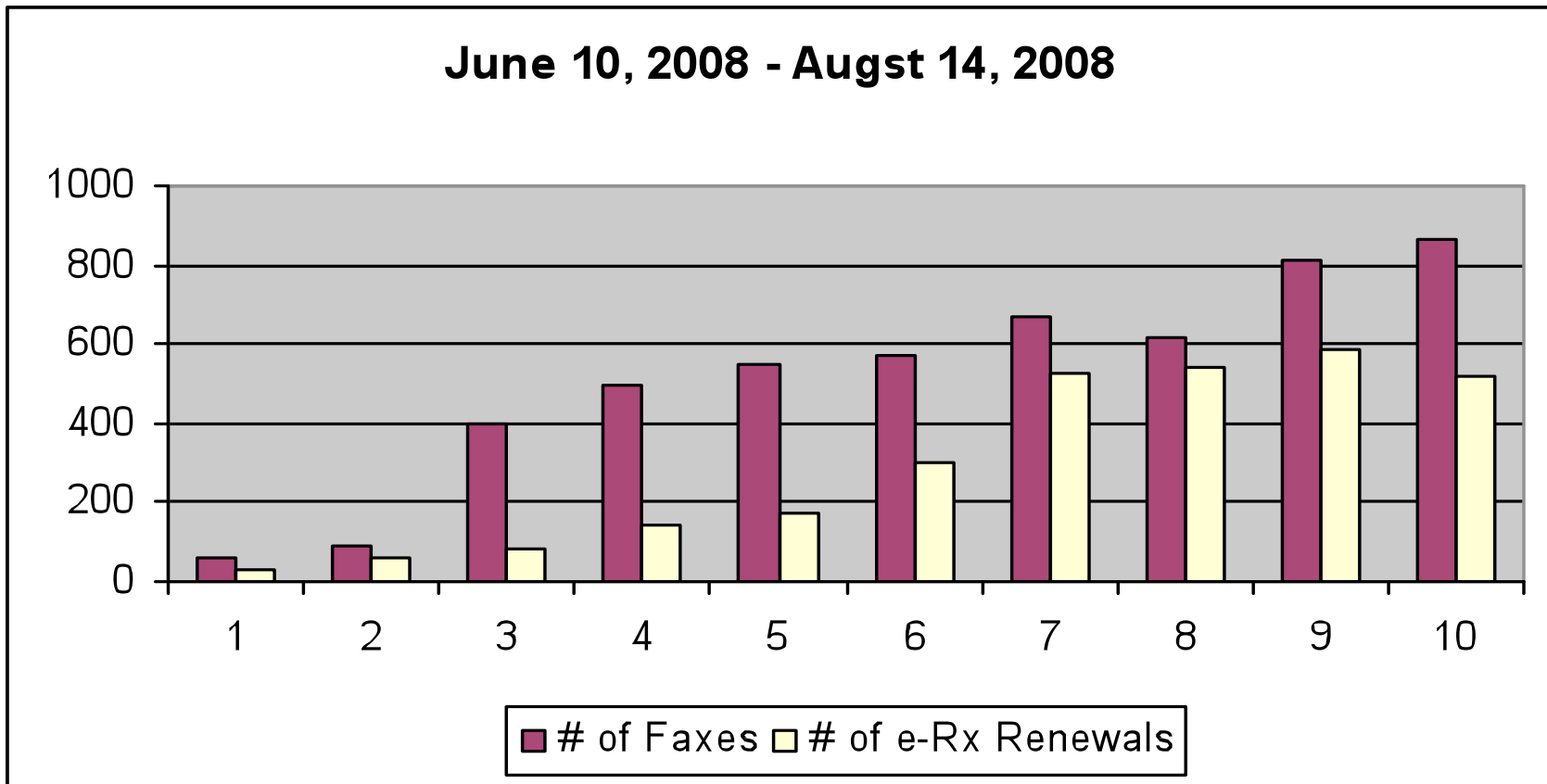
Medication e-Fill Service 2008

- ✓ Pilot program to save e-prescribing implemented June 2008
- ✓ Staffing
 - 1 pharmacy technician
 - 1 pharmacy clerk
 - 1 fax machine
- ✓ Authorize continuation of therapy under protocol
- ✓ Begin with ten physician pilot in one location and expand

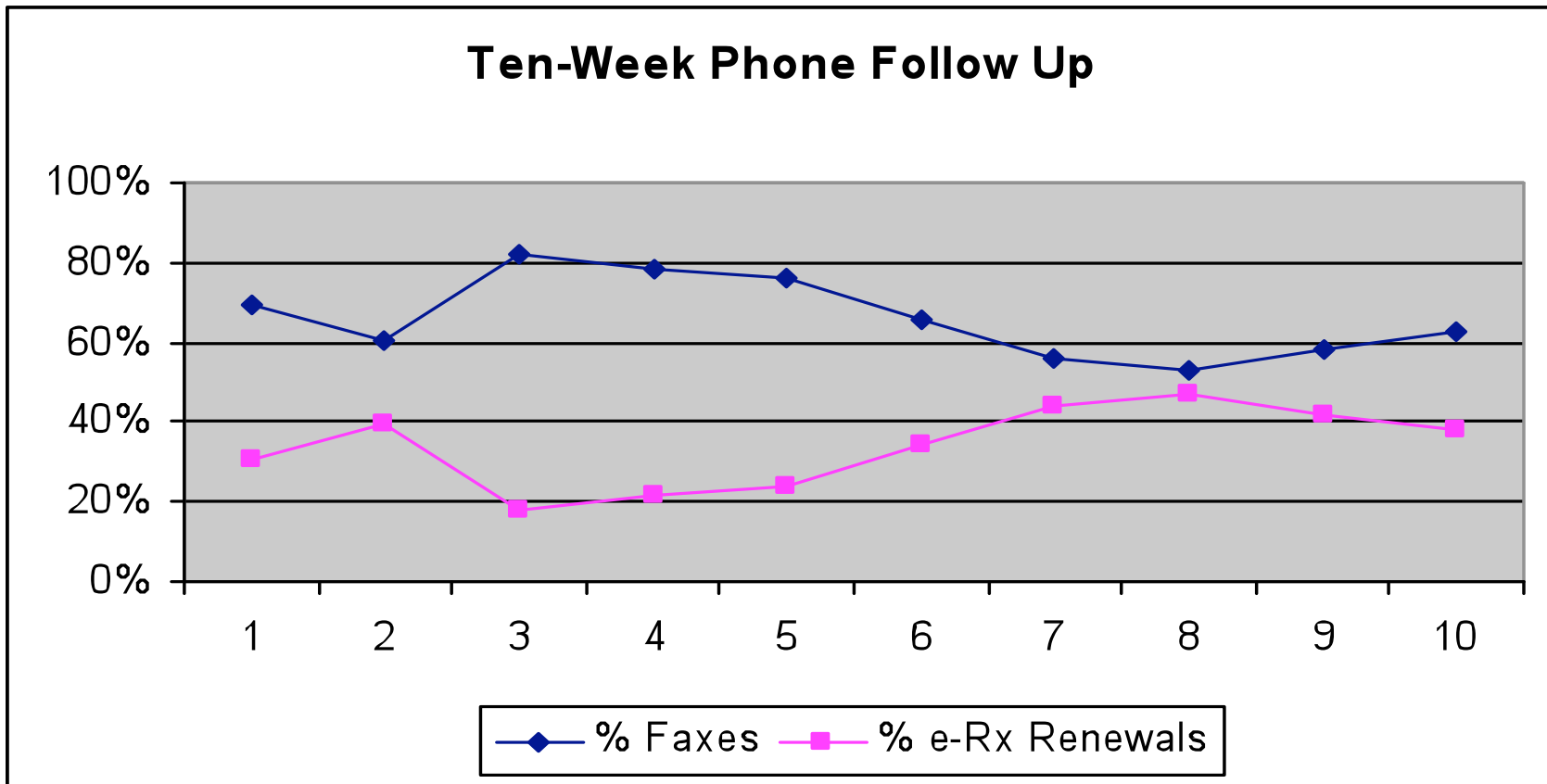
Medication e-Fill Service 2011

- ✓ 8 licensed pharmacy technicians
- ✓ 1 pharmacy clerk
- ✓ 1 industrial size fax machine with 2 back ups
- ✓ 80+ primary care physicians
- ✓ 11 locations (including Grass Valley)

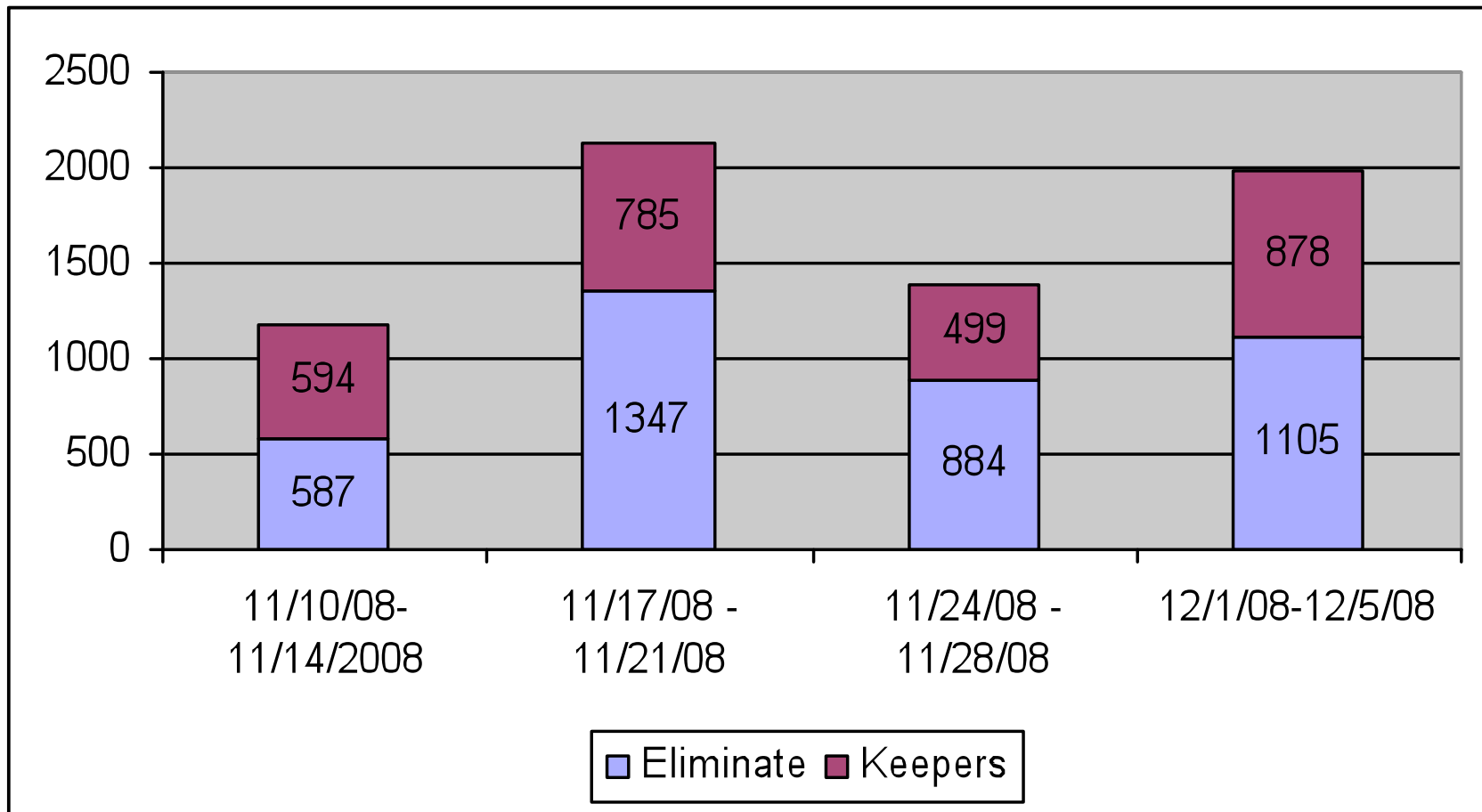
Phase I: Focus on Efficiency



50:50 e-Rx to Fax Ratio



“Valley of Despair”



January 2008: Fax Workflow Change

- ✓ High Priority
 - Controlled substances
- ✓ Medium Priority
 - Pharmacies that are not participating in e-prescribing
 - Mail Order Pharmacies
 - Independent pharmacies (20% of retail)
- ✓ Low Priority
 - Pharmacies participating in e-prescribing
 - Most major chains and some independents
 - Identified on SureScripts-RxHub Website

Education and Outreach

- ✓ Provider newsletters and face-to-face communications
- ✓ Patient education newsletter and waiting room campaign
- ✓ Worked with individual chain pharmacies directly
- ✓ Convene a local stakeholder meeting
 - Promoting a community of Health-e Connections

“Best Friends” Pharmacy



- ✓ Need someone to like us.
- ✓ Work through technical issues
 - Disable faxes
 - Use NPI for matching
- ✓ Advertise to patients who are dissatisfied with refill process at other pharmacies.
- ✓ Be a friend in return.
 - Direct line for pharmacy to call e-Fill Team
 - Prioritize e-renewals and faxes

Focus on Quality

✓ Phase II

- Quality monitoring for Pay-for-Performance
 - Monitoring for Patients with Chronic Medications
 - LDL monitoring
 - Chronic medications in the treatment of asthma

✓ Phase III

- Therapeutic conversion initiatives
 - Proton Pump Inhibitors
 - ...and more

Don't Give Up

- ✓ e-renewals not ready for primetime
- ✓ Considered turning off renewals in February 2010
- ✓ “Hot fix” gone wrong in March 2010
 - No e-renewals for 3 months
- ✓ Be careful what you wish for...
 - Medication renewal turnaround increased from 24 – 48 hours to over a week.
- ✓ Stay focused on what can be fixed