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Best Practices for EMR Configuration: Meeting Quality Requirements

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Participants Chat

Agenda

- White Paper
- Updates
- Previous Recommendations
 - Top 10 recommendations
 - Additional recommendations for non-PPS providers
 - Alerts and Workflows
 - Templates and Order Sets
 - Misc. recommendations

White Paper

- Written with input from advisory committee
- Attached to this webinar

2021 Updates

- Pediatric measures
- NCQA Changes
- Asthma Controller Medications
- Social Determinants of Health/ACES
- Screening for Alcohol and Drugs
- Remote Patient Monitoring
- Capturing Covid Vaccination Data
- Partnership Medical Equipment Distribution

Pediatric Measures

- Lead screening: new regulations around screening and documenting refusal
- Tobacco screening and counseling if positive: link to 4004F
- Fluoride varnish: 9 months-5 years of age; use 99188

NCQA Changes

- Gender Identity/Sexual Orientation make it a core demographic field (see best practice in white paper)
- Electronic Clinical Data System (ECDS) measures
 - Depression Screening and follow up (capture actual score on PHQ9 or equivalent).
 - Breast Cancer Screening
 - Follow up for Attention Deficit disorder (capture phone follow up)
 - Screening for Alcohol Misuse. (one questions screen and AUDIT-C: capture actual score).

Asthma Medication Ratio

- New medications added:
 - Levalbuterol
 - Theophylline
 - Budesonide
 - Beclomethasone
 - Triple combination medications
 - Inhaled tiotropium

Social Determinants of Health/ACES Codes

- See list of ICD10 codes in white paper
- Ideally would be linked with ACES screening results, if that can be programmed.

Screening for Alcohol and Drugs

- New codes:
 - H0049: To be used for Drug use screening with valid tool (for example DAST-20 or the NM-ASSIST or TAPS or NIDA or 4Ps)
 - H0050: To be used for either Drug and/or Alcohol misuse counseling, for each 15 minute period of time
- Continue to use this code:
 - G0042: Alcohol misuse screening (for example AUDIT-C)
- Stop using this code:
 - G0043: Brief intervention for alcohol misuse (switch to H0050)
- Recommendation: add the G0042 for **all** well-adult visits where the Staying Healthy Assessment is administered, which includes the one question screen for alcohol misuse.
- Important Note: MediCare and Commercial Insurance use different codes, so these would require different templates

Testing Remote Patient Monitoring



- Most important for BP and blood sugar
- Covered in 2022 for MediCal: ADD CODES (already covered by Medicare)
- Test first before implementing (on your Medicare population)
- Consider testing different remote monitoring models before selecting one to implement widely

Capture COVID Vaccine Data in EMR

- Ensure your EMR has a two way CAIR interface
- Problem: CAIR not matching patients.
- When you identify a patient you think does not have vaccination (not coming over from CAIR interface).
 - Check EMR
 - Check CAIR
 - Call patient and gather evidence of vaccination: enter manually into EMR (should upload into CAIR)

Partnership Medical Equipment Distribution

- Equipment available, mailed directly to member
 - BP Monitors
 - Pulse oximeters
 - Humidifiers
 - Vaporizers
 - Nebulizer
 - Thermometer
 - Scales
 - Soon: Lock Boxes for Prescriptions
- Best practice: Integrate fillable form in EMR

Top 9 Recommendations

- Apply to all primary care practices!

Best Practice 1

Set up new telephone and video visit codes

- Since April 2020, under COVID flexibilities, a .95 modifier should be added to outpatient visits conducted virtually
- These visits are between patients out of the office and clinicians typically in the office, and need to be documented in your EMR.
- Additional rules about use of codes apply (see CMS instructions and Medi-Cal rate information)
- Specific billing codes for minimal visits, not qualifying as virtual visits:
 - For FQHCs and Rural Health Centers: G0071
 - For all other providers: G2012

Best Practice 2

Update all Well-Child Templates

- Standards based on the American Academy of Pediatrics Bright Futures program. Especially check the following:
 - All ages: Document education on physical activity and diet
 - Newborns: Documentation of review of newborn screening results
 - Two blood lead test results between ages 1 and 3. Larger health centers may consider obtaining lead tests at the point of care to increase screening rates.
 - Fluoride varnish application to teeth at the time of the well child visit (age 1 to 5)
 - **Screening for tobacco and vaping**
 - Lipid screening (at least once after age 8)
 - Screening questions for risk of TB (all ages)
 - Skin cancer behavioral counselling starting at age 6 months.
 - Blood pressure screening starting at age 3.
 - Prescription of fluoride vitamin supplement (if living in location with non-fluoridated water).
 - Documented referral or recommendation for routine dental hygiene care (every visit, starting at age 6 months).
- Additional recommendations in other parts of white paper.

Best Practice 3

Acute Visit to Well-Child Visit Conversion Template

- Key elements needed:
 - Age appropriate Staying Healthy Assessment
 - Complete physical exam
 - Review of past medical history/social history
 - Review of immunization status (order age appropriate vaccinations)
 - ICD10 code for well-child visit: Z00.121
 - Overall, use CPT code for health maintenance visit for the converted visit

Best Practice 4

Use preventive visit codes for well child visits

- 99381-99385 for new patients
- 99391-99395 for established patients (probably best for templates)
- If done virtually, the .95 modifier must be added to the CPT code.

Best Practice 5

Build in screening for tobacco use into well-adult and well-adolescent templates.

- Use HCPCS code 4004F in these templates
- 4004F: Screening for tobacco use, and if positive, counselling to quit
- Will meet HRSA requirements, we believe

Best Practice 6

Standardize Hysterectomy Documentation Format in Patient Medical History

- Not acceptable: “Hysterectomy”
- Acceptable: Total hysterectomy, Total Abdominal Hysterectomy (TAH), Total Vaginal Hysterectomy (TVH), Total Abdominal Hysterectomy with salpingo-oophorectomy (TAH-BSO), Radical Hysterectomy
- Acceptable for medical record documentation, but will not allow patient to be excluded from cervical cancer screening denominator: Supracervical (sometimes called “sub-total”) Hysterectomy, Supracervical Abdominal Hysterectomy (SAH)

Best Practice 7

Include screening for chlamydia and gonorrhea into family planning templates and well-woman exam templates

- Default for family planning and well-woman exam templates for women under age 25
- Option for templates for women age 25 and older
- Option for teen girl well-child template (indicated if sexually active)

Best Practice 8

Standardize refills for asthma medications:

- 3 months with 3 refills for controllers.
- 1-2 rescue inhalers with 1 refill for rescue medications.
- Will help ensure optimum ratio of controller medications to all medications for asthma (Asthma Medication Ratio)
- See white paper for detailed list

Best Practice 9

Incorporate the Ages and Stage Questionnaire (ASQ) into at least the 9 month, 18 month, and 2-year-old well child visit templates.

- Include the CPT code 96110 on these templates
- If the M-CHAT is also used for autism screening at ages 18 months and 2 years of age, the 96110.KX code would be added, as well, to those two templates.

Recommendations for Non-PPS Providers

- Five recommendations based on new Prop. 56 Value-Based Payment Program (VBPP) measures
- FQHC, Rural Health Centers, and Tribal Health Centers NOT eligible

VBPP: Recommendation 1

Set up a system to allow ICD10 codes for social risk factors to be easily added to claims for most visits.

- Includes three classes of codes: Substance Use Disorder, Serious Mental Illness (Schizophrenia, Bipolar Disorder, Major Depression), Homelessness (Z59.0) or risk of Homelessness (Z59.1)
- Any one of these codes will boost any VBPP eligible measure billed on the same claim
- Full list of allowable codes: <https://www.medicaid.gov/license-agreement.html?file=%2Fmedicaid%2Fquality-of-care%2Fdownloads%2F2019-adult-value-set-directory.zip> under “AOD Abuse and Dependence” and “Schizophrenia,” “Bipolar,” “Other Bipolar Disorder,” and “Major Depression” Value sets

VBPP: Recommendation 2

If at all possible, automate conversion of the adult patient's best blood pressure into the CPT-2 codes added for the visit with includes a diagnosis code of I10 (essential hypertension)

- Controlled Systolic:
 - CPT 3074F (systolic blood pressure less than 130)
 - CPT 3075F (systolic blood pressure less than 130-39)
- Controlled Diastolic:
 - CPT 3078F (diastolic blood pressure less than 80)
 - CPT 3079F (diastolic blood pressure less than 80-89)
- Note: MediCare incentives are also available for the use of these CPT-2 codes for hypertension.

VBPP: Recommendation 3

Create three diabetes templates, based on the degree of control of the diabetes:

- Well controlled: most recent HbA1c < 7.0%, using CPT: 3044F
- Moderately controlled: most recent HbA1c 7.0 to 9.0%, using CPT: 3045F
- Poorly controlled: most recent HbA1c >9.0%, using CPT 3046F
- MediCare incentives are also available for diabetes testing

VBPP: Recommendation 4

Create tobacco use/nicotine use screening and counseling templates

- Use the following code: 4004F
- There are other options, but this meets all reporting requirements best

VBPP: Recommendation 5

Insert depression screening into new OB visit, postpartum visit, well-woman visit and other adult preventive health templates.

- One of the following codes should be submitted in a claim to document screening:
 - G8431 – Positive screen with plan
 - G8510 – Negative screen
- Consider also a depression counseling template using these codes which could be added to other visits.

Alerts and Workflows

- Six Recommendations
- Apply to all provider types, including PPS providers

Alerts and Workflows

1. Preventive reminders whenever chart is open.
2. Reminder to recheck high blood pressure reading (greater than 140/90)
3. Trigger to alert children of coming birthday, to schedule well-child visit
4. Ensure outside vaccinations are entered into CAIR
5. Alert for all patients for influenza vaccination
6. Process for encouraging performing cervical cancer screening when an acute visit is scheduled, or converting appointment to well-woman visit.

Templates and Order Sets

- Six recommendations

Template 1

1. Screening for psychological trauma

- Include PEARLS screening annually into well-child templates to age 19. Look into integration with EHR.
 - Different screening tool starting at age 12
 - Two different HCPCS code options:
 - G9919 for score of 4 and greater
 - G9920 for score 0-3
- For adults, ACES screening is done, with a score, once per patient per provider: consider template or workflow.

Template 2

2. Two postpartum visits are now recommended, one **for 7 - 21** days postpartum, the second for 22-84 days postpartum. Consider different templates for each of these.

- Both should address family planning, lactation status, depression screening
- If virtual postpartum visit, use .95 modifier

Template 3

3. Have MA assess each well-child visit for history of asthma. If child has asthma, merge asthma template with well-child template.

Template 4

4. Create an asthma order set to incorporate best practices in asthma care.

- Guidelines on step therapy
- Preferred controller medications
- Testing recommendations

Template 5 (PHC-specific)

5. Create a template for a medication assisted therapy (MAT) visit for treating opioid use disorder and alcohol use disorder.

- Diagnosis Code: F11.2x for opioid use disorder
- Diagnosis Code: F10.2x for alcohol use disorder
- Include toxicology screen, screening for signs of diversion, screening for side effects.

Template 6

6. Detailed template for performing medical clearance exam for alcohol withdrawal management

- See Appendix A of White Paper for details.
- PHC webinar on principles of this medical clearance exam:
<http://www.partnershiphp.org/Providers/HealthServices/Documents/First%20Do%20No%20Harm%20v3%20with%20minor%20changes.pdf#search=medical%20clearance>

Misc. Billing and EMR Configuration

- Seven recommendations



Misc. Recommendations

1. Buy NCQA Specifications and Value Set
2. Include titles in EMR signatures (e.g. last name Smith RN)
3. Set up referral tracking in the EMR to include elements listed in the White Paper.
4. If you have an integrated dental-medical electronic health record, record dental blood pressures differently.

Misc. Recommendations

5. Ensure EMR documents BMI percentile for children as a number (having access to the graph is not enough).
6. When capturing previous cervical cancer screening results (done outside your organization), capture the exact type of study done (e.g. thin prep with high risk HPV screening) at least the month it was completed and a summary of the results.
7. Ensure refill protocol by nurse/pharmacist does not auto refill rescue MDIs (e.g. albuterol etc.) without a chart review (evaluate for controller medication use and need for appointment)



Contact Us

- Send questions or suggestions to Dr. Moore at:
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