eConsult Update: Utilizing Technology to Bridge the Integration Gap

Christopher Benitez, MD
Clayton Chau, MD, PhD
Ricardo Mendoza, MD
Gary Tsai, MD,
Disclosure

Drs. Benitez, Chau, Mendoza and Tsai have no relevant financial relationships with commercial interests to disclose.
L.A. Care’s eManagement Program

Clayton Chau, MD, PhD
Senior Medical Director, Health Services, L.A. Care
Associate Clinical Professor of Psychiatry, UCI
cchau@lacare.org
TRIPLE AIM

- Improve the health of the population
- Enhance the patient experience of care (including quality, access, and reliability)
- Reduce the per capita cost of total healthcare
Overview

- Medi-Cal carve in mild to moderate mental health benefit implemented 2014
- PCP responsible for mental health care within her/his scope of practice cannot refer out
- Shortage of mental health providers
- Triple aim push for collaboration of care in medical homes
What It Is

✓ PCP and psychiatrists co-manage depression, anxiety and SUD
✓ Uses screening tools, treatments plans, consultative services
✓ Simple web-based software
✓ Stand-alone or with EHR
✓ Does not interfere with patient visit
✓ PCP incentive program for implementation
✓ L.A. Care Medi-Cal members only
Benefits to Patients and Practices

- Includes clinical consultation, medication management, screening and treatment planning
- Supports whole person
- Provides solution to challenges
Clinical Management

- Contracted specialty network with DMH
- 2-3 psychiatrists assigned
- Replies to PCP dialogue within 24-48 hours
- DMH understands mental health needs
- Acts in best interest of patient; may not be referral
- Expertise of head of DMH telehealth program
2016/2017 Rollout

- 200 providers including LAC direct network, network partners, and other underserved areas
- Start with solos – greatest need for mental health resources
- Will serve up to 300,000 members
- Rollout in phases, 25 providers at a time. Current PCP enrollment - 42
- Free on-site technical assistance, software, support
- Free CME dinners for recruitment, education, networking
- Participation in workgroup meetings as needed
- Blue Shields/CHCF funding for evaluation
Christopher Benitez, MD
Program Director, DHS Behavioral Health eConsult Initiative
Coordinator of Behavioral Health Special Projects
Los Angeles County Department of Health Services
cbenitez@dhs.lacounty.gov
DMH/DHS eConsult LA Collaborative Initiative: Goals

• Build on the success of the DHS eConsult experience

• Provide support to PCPs treating patients with mild to moderate depression and anxiety

• Improve access to mental health services

• Establish mechanisms to safely and securely exchange health information between the two departments
### Creating MH eConsult LA

<table>
<thead>
<tr>
<th>Year</th>
<th>Event</th>
</tr>
</thead>
<tbody>
<tr>
<td>2011</td>
<td>Planning begins ($1.5 million)</td>
</tr>
<tr>
<td>July 2012</td>
<td>Launch of eConsult platform (&gt;100 sites, 2 specialties)</td>
</tr>
<tr>
<td>October 2014</td>
<td>Preparation for mental health</td>
</tr>
<tr>
<td>October 2015</td>
<td>Launch of eConsult Mental Health</td>
</tr>
</tbody>
</table>
Principles and Process

Guiding Principles
- Responsiveness
- Equity
- Relationship/continuity
- Coordinated DHS-wide launch

Requirements
- Homepage
- Specialty reviewers
- Appointments to schedule

Process
- Specialty Primary Care (SPC) Workgroups
## eConsult LA DHS: Key Statistics

<table>
<thead>
<tr>
<th><strong>Patient Population:</strong></th>
<th>&gt;500,000</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Network:</strong></td>
<td>DHS, DPH, DMH, Jails, Juvenile Courts, +180 Community partners</td>
</tr>
<tr>
<td><strong>Sites:</strong></td>
<td>&gt;400 distinct sites</td>
</tr>
<tr>
<td><strong>Total staff:</strong></td>
<td>6000+ (medical and support staff)</td>
</tr>
<tr>
<td><strong>Submitted by:</strong></td>
<td>4000+ providers</td>
</tr>
<tr>
<td><strong>Submitted to:</strong></td>
<td>64 portals</td>
</tr>
<tr>
<td><strong>Staffed by:</strong></td>
<td>500+ specialty reviewers</td>
</tr>
</tbody>
</table>
eConsult Mental Health in LA

**Assets**
- Infrastructure = eConsult
- Organizational experience
- Vision/Leadership
- Collaboration
- Risk tolerance

**Barriers**
- No model
- History
- Target populations
- Resources
- Organizational structure
  - Different operations/EHR’s
  - Eligibility/Funding streams
  - Privacy/Security issues
- Philosophical divide
- Problem-solving
- Unknowns and risk tolerance
- Anticipated changes
- Legal concerns
eConsult Mental Health in LA DHS: Utilization

Monthly eConsults for Mental Health

# of eConsults

<table>
<thead>
<tr>
<th>Oct '15</th>
<th>Nov '15</th>
<th>Dec '15</th>
<th>Jan '16</th>
<th>Feb '16</th>
<th>Mar '16</th>
<th>Apr '16</th>
<th>May '16</th>
<th>Jun '16</th>
<th>Jul '16</th>
<th>Aug '16</th>
<th>Sep '16</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>50</td>
<td>100</td>
<td>150</td>
<td>200</td>
<td>250</td>
<td>300</td>
<td>350</td>
<td>400</td>
<td>450</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Health Services
LOS ANGELES COUNTY
eConsult in LA: Tale of the Tape

All Specialties
Avg eConsults/month: 16,000
Avg approved for Face-To-Face: 74%
Avg response time: 3.0 days
Avg “Intensity of Touch”: 2.7

Mental Health
Avg/month: 350*
Avg approved for Face-To-Face: 86%
Avg response time: 3.8 days*
Avg “Intensity of Touch”: 2.4
MH eConsult: Successes

• MH eConsult has been implemented

• Interdepartmental collaboration

• Lever for system change

• Developing a platform from which to evaluate practice
eConsult Mental Health in LA DHS: Where are we coming up short?

1) Performance metrics
   a) Quality of care
   b) Administrative efficiency
2) Value assessment

3) Leveraging technological opportunities
4) Persistent organizational challenges
5) Culture
Opportunities and Future Directions

• Further Integration

• Align with other care-delivery initiatives

• Novel uses
  Sub-specialties
  New system interfaces
  Leverage with other efforts

• Leveraging cultural capacities
ECONSULT REFERRALS TO DMH: ENHANCING ACCESS AND DRIVING HEALTH INFORMATION EXCHANGE

Ricardo Mendoza, MD
Chief Mental Health Psychiatrist
LA County Department of Mental Health
Professor of Psychiatry, David Geffen School of Medicine, UCLA

Rmendoza@dmh.lacounty.gov
LAC DHS/DMH eConsult Collaboration: DMH’s Overarching Goals

• Join DHS in Commitment to Enhancing Population Health
• Clarifying Roles and Deliverables
• Minimize Clinical Entanglements for SRs
• Timely Access to Appointments for DHS Clients (better transition of care)
• Health Information Exchange Wins
• Safeguarding Protected Health Information
SR Client Look Up Web Portal

• Allows Role Based View Only Access, in a secure, selective and authenticated manner, of a client's CCD and Relevant Information

• Functionalities of User Interface
  – Provider Login/Authentication
  – Search Client
  – Select Client
  – View Client CCD
Continuity of Care Document (CCD)

- Industry standard for encoding, structuring, and semantics of a patient care summary for Health Information Exchange (HIE)
- No patient consent required; considered Care Coordination under HIPAA – “minimal necessary”
- Usually contains Problem List, Service Location, Treatment Provider, Current Medications and Laboratory Data
UI Web Portal and CCD: Lessons Learned

• Pre-meet in order to ESTABLISH WHAT DATA is MOST RELEVANT

• Where is data being pulled from in your EHR to provide functionality?
  – Correlation to Service Data is Critical
  – May require an update to EMR with potential cost implications
  – LEGACY DATA
  – Beta Testing and Mid Course Corrections
USE THE CRS DATABASE TO SIZE THE MARKET.

THAT DATA IS WRONG.

THEN USE THE SIBS DATABASE.

THAT DATA IS ALSO WRONG.

CAN YOU AVERAGE THEM?

SURE. I CAN MULTIPLY THEM TOO.
Direct Messaging and eConsult Collaboration

• LAC DHS and DMH each obtained DirectTrust Certification
• HISP Accounts were established to provision provider Direct email addresses with respective EHR vendors.
• CCDs are now being successfully and bi-directionally exchanged between DHS and DMH providers through Direct Messaging
ENHANCING ACCESS

• Timely Access to Appointments
  – Updates to Appointment Policy
  – Dedicated Appointment Line in Referral Unit
  – Establishing Workflows
  – Emphasis on Minimizing the No-show Rate
Access to Appointments

• Since 12/14/2015:
  
  – 546 Appointments have been granted to DHS

  – 335 of which have been directed to the DMH/DHS Collaboration Program
Summary

• Technology was the vehicle that allowed two large systems of care to come together to better serve patients

• Early results point to use of the platform and enhanced access to both specialty and non-specialty MH services
Summary

• HIE efforts succeeded because EHR vendors were open, flexible and both financially and organizationally aligned/incentivized

• HIE will lead to better care coordination with improved quality of care and decreased costs
Department of Public Health/Substance Abuse Prevention & Control’s eConsult Program

Gary Tsai, MD, FAPA, FASAM
Medical Director & Science Officer
Substance Abuse Prevention and Control
Los Angeles County Department of Public Health
gtsai@ph.lacounty.gov
Participation in California’s Medi-Cal 2020 Drug Medi-Cal Organized Delivery System (DMC-ODS) Waiver is the greatest opportunity in recent history to design and implement a substance use disorder (SUD) system of care that has the financial and clinical resources to more fully address the complex needs of all our patients.
DRUG MEDI-CAL ORGANIZED DELIVERY SYSTEM (DMC-ODS) WAIVER

• Foundational elements:
  – Fuller continuum of care for SUD treatment services
  – More local control and accountability ➔ Selective contracting
  – Greater administrative oversight ➔ Quality Improvement and Utilization Management Programs to improve care and ensure efficient use of resources
  – Implement evidence-based practices (MAT & psychosocial interventions) for SUD care
  – Care coordination with other systems of care

KEY GOAL ➔ Provide the right services, at the right time, in the right setting, for the right duration
DMC REIMBURSABLE SERVICES

The DMC-ODS Waiver expands DMC reimbursable services to create a fuller continuum of care.

<table>
<thead>
<tr>
<th>Current DMC SUD System</th>
<th>New DMC-ODS SUD System</th>
</tr>
</thead>
<tbody>
<tr>
<td>✓ Outpatient</td>
<td>✓ Outpatient</td>
</tr>
<tr>
<td>✓ Intensive Outpatient</td>
<td>✓ Intensive Outpatient</td>
</tr>
<tr>
<td>✓ Residential (Perinatal Patients Only)</td>
<td>✓ Residential (All Populations – 3 LOCs)</td>
</tr>
<tr>
<td>✓ Opioid Treatment Program</td>
<td>✓ Opioid Treatment Program</td>
</tr>
<tr>
<td>✓ Individual Sessions (Crisis Only)</td>
<td>✓ Individual Sessions (No Limits)</td>
</tr>
<tr>
<td>✓ Group Sessions</td>
<td>✓ Group Sessions</td>
</tr>
<tr>
<td></td>
<td>✓ Family Therapy</td>
</tr>
<tr>
<td></td>
<td>✓ Case-Management/Care Coordination</td>
</tr>
<tr>
<td></td>
<td>✓ Recovery Support Services</td>
</tr>
</tbody>
</table>
eConsult for Substance Use Disorders

• 2 main uses of eConsult for SUDs
  – Consultation
  – Initiate referrals into the specialty SUD system
Current eConsult Process for SUDs

• Currently, eConsult for SUDs is purely informational and focuses on clarifying the referral process into the specialty SUD system — 2 main ways to refer into SAPC’s network of specialty SUD care
  • Call 888-742-7900, which routes to SAPC’s Community Assessment Service Centers (CASC) that conduct an in-person initial assessment to determine the most appropriate SUD level of care.
  • Refer directly to SUD providers by locating SUD provider on Google Maps database: https://www.google.com/maps/d/viewer?mid=1C77Yr7iHzW_6THBlRf3aspg-uR4
In the future, eConsult for SUDs would ideally allow for both consultations as well as referrals into the specialty SUD system:

- **Consultations** → Access to an addiction specialist
  - DMC-ODS - Physician Consultation Service
- **Referrals** → Same processes, except instead of calling CASCs, a Beneficiary Access Line will be triaging cases to appropriate levels of care for SUD treatment
In the Meanwhile...

- 2 useful SUD resources for clinical consultations
  - UCSF Clinician Consultation Center for Substance Use
    • Substance use warmline: 855-300-3595
      http://nccc.ucsf.edu/clinical-resources/substance-use-resources/
  - Providers’ Clinical Support System
    • National training and mentorship program to give prescribers the tools and knowledge to be able to prescribe MAT
      http://pcssmat.org/mentoring/

- Both resources are asynchronous, but response times may be as short as several hours and allows front line health providers to access addiction expertise
Discussion