CS-Link Referrals & Tapestry Implementation

PROJECT OVERVIEW

Current State

Patient hand carries
In Basket Messages
On Paper
Phone Calls

CS Link Orders
Scheduled Appts
Email
Faxes

Referral Request

Shared Online Folders
Referrals Reports

Spreadsheets
Paper

Referral Tracking

NIA
Media Tab-Chart Review
Spreadsheets
On Paper
Documents Table

Nautilus
Appt Notes
HAR Notes
Email
Reg Notes

Auths & Scheduling

Encounter Notes

Telephone Enc.
Documents Table

Billing & Claim Follow-Up

Future State

This project will streamline referral and authorization processes, ensuring one place to look for referrals and authorizations.

CS-Link Orders → Referral Request

Manual Referral Entry (no order) → Referral Request

Referral Workqueue → Referral Tracking

Referral Record → Auths & Scheduling

Referral Record → Billing & Claim Follow-Up

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CS-Link Referrals Application

- Supports scheduling and authorization management for referral, procedure, and medication orders.

Communicate care handoffs or requests for specialty care
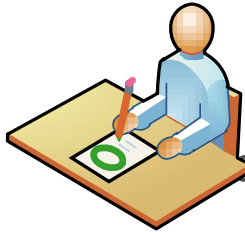
Record and track insurance authorizations, including procedures, surgeries, medications and inpatient auth/cert information.

Track scheduling status for referrals and orders to departments, programs, physicians, and procedures

CS-Link Tapestry Application

Tapestry is used by the Medical Network to support member enrollment, referral processing and claims payment for our managed care population (CSMG and CSHA HMO).

The Tapestry Application consists of the following modules

Member Management

- **Enrollment & Eligibility**: *Records coverage and benefit information*
- **Utilization Management**: *Coordinates referrals and authorizations*
- **Case Management**: *Tracks chronic health conditions*

Internal/External Communication

- **Customer Relationship Management**: *Supports interdepartmental & member inquiries*
- **CS CareLink**: *Supports employers and providers that don't use your instance of Epic*
- **MyCS-Link**: *Provides access to insurance information for your members*

Accounts Payable

- **AP Claims**: *Adjudicates and prices claims*
- **Accounts Payable**: *Processes checks, EFT payments, and EOB/RAs*
- **Capitation**: *Manages both incoming (out of scope) and outgoing capitation payments*

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Project Benefits

Standardized workflow for requesting and scheduling specialty services

Track and confirm patient care is delivered and the loop is closed

Reduce claim denials and simplify follow up

Facilitate communication between referral source and recipient

Robust data analytics to track patient care delivery and financial impacts

CS-Link Referrals & Tapestry Implementation

USABILITY TESTING OVERVIEW

Working a Referral Record
Completing Missing Information

- Any missing information in the referral record the Referred From department staff will need to complete the items before an appointment can be scheduled.
  - Referred to department, place of service, or provider
  - Procedure/CPT

Working a Referral Record
Provider Finder for Managed Care Population

- In the referral ordering and referral edit workflow, users have the option to search for a provider.

- *Provider Finder* makes it easy for physicians and referrals users identify and select refer-to providers based on preferred status.

  — Provider Finder is only set up for referrals for our Cedars Managed Care (HMO & ACO) Patient Populations

  — Provider Finder appears <u>ONLY</u> when using the Provider Search button. This workflow does not apply when users enter a refer-to providers name directly in the To Provider field.

Working a Referral Record
Provider Finder for Managed Care Population

- When searching for a refer-to provider, the system shows the highest tier (Emerald) in-network providers first.
  - Additional tiers (Sunflower, Ruby) may be accessed by selecting "Next Level."
  - Non-Cedars HMO providers that do not qualify for the three tiers will be listed as Out-of-Network.

Providers are bucketed into three tiers- *Emerald, Sunflower* and *Ruby*
- Emerald is most-preferred tier.
- Set up is consistent with current state AE configuration

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Usability Testing Goal

- Objectives: Validate critical task flows and scenarios against proposed navigation

- Methodology: Usability study with 5 to 7 users
  - 2-3 remote users
  - 2-3 in-person
  - Given a problem that affected 30% of our users base, we need to test on 5 to 6 customers
  - Recruitment: Manual or pool of users from the stake holders

- Measurement:
  - 1. Observation & Commentary
  - Quantifiable:
    - Task Completion Time
    - Time on Task
    - Completion Rate
    - SEQ (Single Ease Question)
    - SCQ (Single Confidence Question

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Results: Observation

- Observation:

    1. The Provider Finder icon did not present any usability issues, however we received feedback on aesthetics of the icon

        ""It doesn't scream "find" the provider to me"

        "I'm not sure it makes much sense," or

        "Process of elimination allowed me to find it"

    After a few minutes users came to rely on columns within Provider finder to locate the correct provider

    2. Users did not immediately see how to get to their provider by looking at the leveling. This could be three things:

        - Identifying the referral issue, as they did not recognize the referrals record.
        - Users expect leveling of provider to take them to selection of correct provider
        - All participants went from left to right reading the columns for leveling, name, address and specialties.

- Next Steps:

    - Research team is working with Navigation Team to resolve the issues

Results: from Data

- Completion Rate: **Overall, we can be 95% confident that the completion rate is between 67.7% and 92.5%**
- But…
- Completion Rate before discovering Provider Finder icon is between 18.8% and 81.2%
- Completion Rate After discovering the Provider Finder icon is between 55.7% and 100.0%

Results: from Data

SEQ: Single Ease Question

- On a scale of 1 to 7, how easy was the task to complete? (7 = Very easy, 1= Not easy)
- **Overall, we can be 95% confident that the mean is between 5.32 and 6.21 (Our current standard is 6.00)**

SCQ: Single Confidence Question

- On a scale of 1 to 7, how confident are you that you successfully completed task? (7 = Very confident, 1 = Not confident)
- **Overall, we can be 95% confident that the mean is between 5.50 and 6.55 (Our current standard is 6.32)**
- We had 4 high confidence of 5+ without completing the task successfully

Results: From Data

- Time on Task: General Form > Find Provider Finder Icon
- Overall:
- SEQ: 95% confident the mean is between 6.40 and 7.26
- SCQ: 95% confident the mean is between 6.40 and 7.26

- Between 14.93 and 29.20 to complete this task

- Provider Finder icon is the easiest task for users to complete and it has been a good benchmark during the system navigation studies.

Results: From Data

- Time on Task: General Form > Find Provider with Oncology Specialties who are leveled as Emerald
- Overall:
- SEQ: 95% confident the mean is between 3.62 and 7.05
- SCQ: 95% confident the mean is between 5.92 and 7.28

- Between 9.97 and 65.65 to complete this task

What's Next…

- ***Opportunities for Improvement***
  - The grouping of provider with ACO leveling appear to confusing and users were not confident that they were able to completed the tasks
  - Research team is to communicate with Training and operation about to define each levels of ACO
  - When provider has multiple specialties users were not able to select correct provider record. Research team is to work with Tapestry and security team to clean up the SER record.