

# Maximizing Provider Engagement in Value Based Care

## Evidence-Informed Strategies to Enhance Provider Documentation

Anne McCaffrey, Judy Remz, George Higgins, Peggy Chou, John Zambrano



### IMPORTANCE

For value-based care to be financially viable, patients with chronic medical conditions must be seen on a regular basis and providers must maintain complete and specific records of these visits. Atrius Health currently employs multiple strategies to ensure this happens, yet despite these efforts there is still a gap. We investigated this problem using Implementation Science to determine barriers, and propose evidence-informed interventions to closing this gap.

### METHODS

- Inventory of all current efforts to maximize chronic disease management and provider documentation
- Focused review on Provider Engagement via 11 semi-structured interviews with providers on their understanding of the role of chronic disease management and specific documentation in value based care.
- Organized data using i-PARIHS framework to determine interventions likely to succeed.

### i-PARIHS Constructs/Provider Engagement

Current Efforts	Recipients		Context	Facilitators
	Values/motivators	Resources		
Education included in Billing/Coding training	As currently understood RAF-Capture* does not align with values	Limited access, visit length & multiple priorities	Requires leadership support	Knowledge
HCC SmartForm pop-up in Epic	Motivated to provide high quality care but don't equate with RAF-Capture	EMR Epic universally used	Lack proficiency	Know-how
RAF-Capture* rates tracked	Respond well to comparative numbers & goal setting	Limited exposure to rates	Challenging to pull rates Messaging unclear	Timely, clear feedback
No specific provider incentive	Respond well to financial incentives		Difficult to structure	Rewards

\* RAF-Capture describes the combined process of efforts of identification & outreach, chronic disease identification, and providers' assessment and documentation.

To maximize complete documentation of clinical encounters, provider engagement is imperative; it can be enhanced with these evidence-informed interventions:

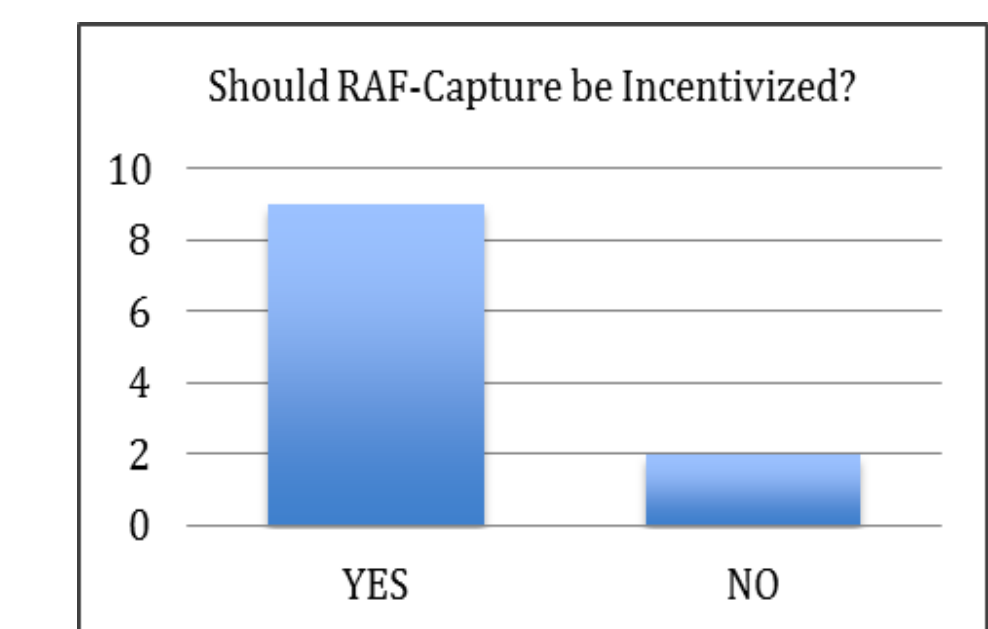
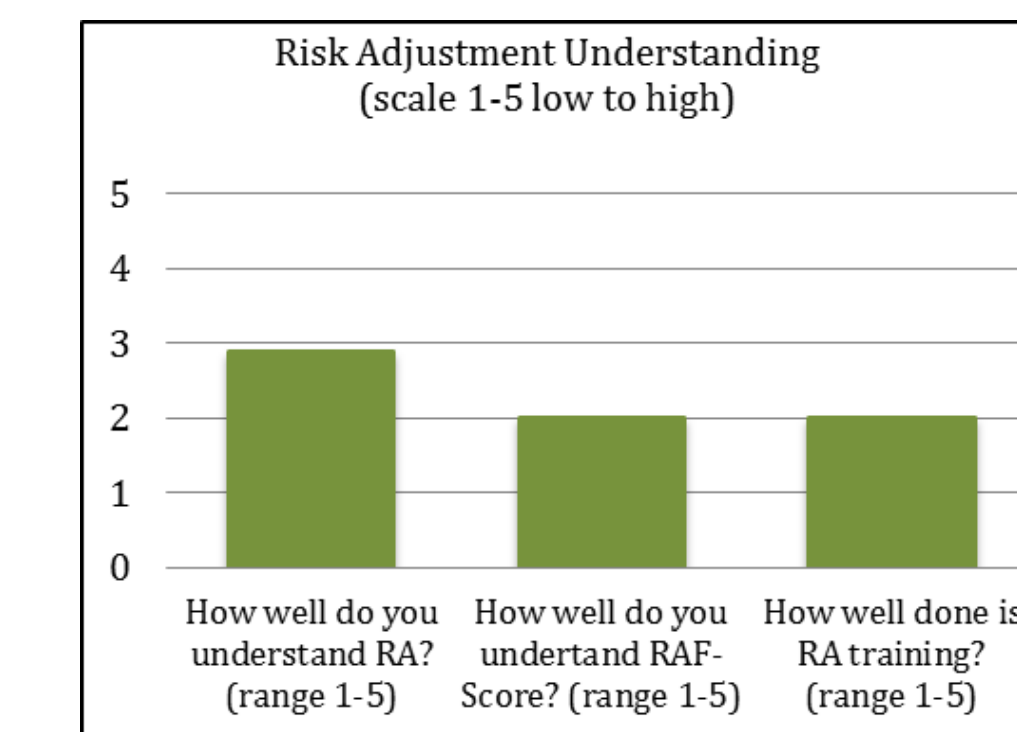
- Clarify process of cost-setting by health status (aka risk adjustment)
- Conduct targeted training on best-practices for health status documentation
- Provide regular audit and feedback on performance
- Create financial incentives

Documentation = billing/coding



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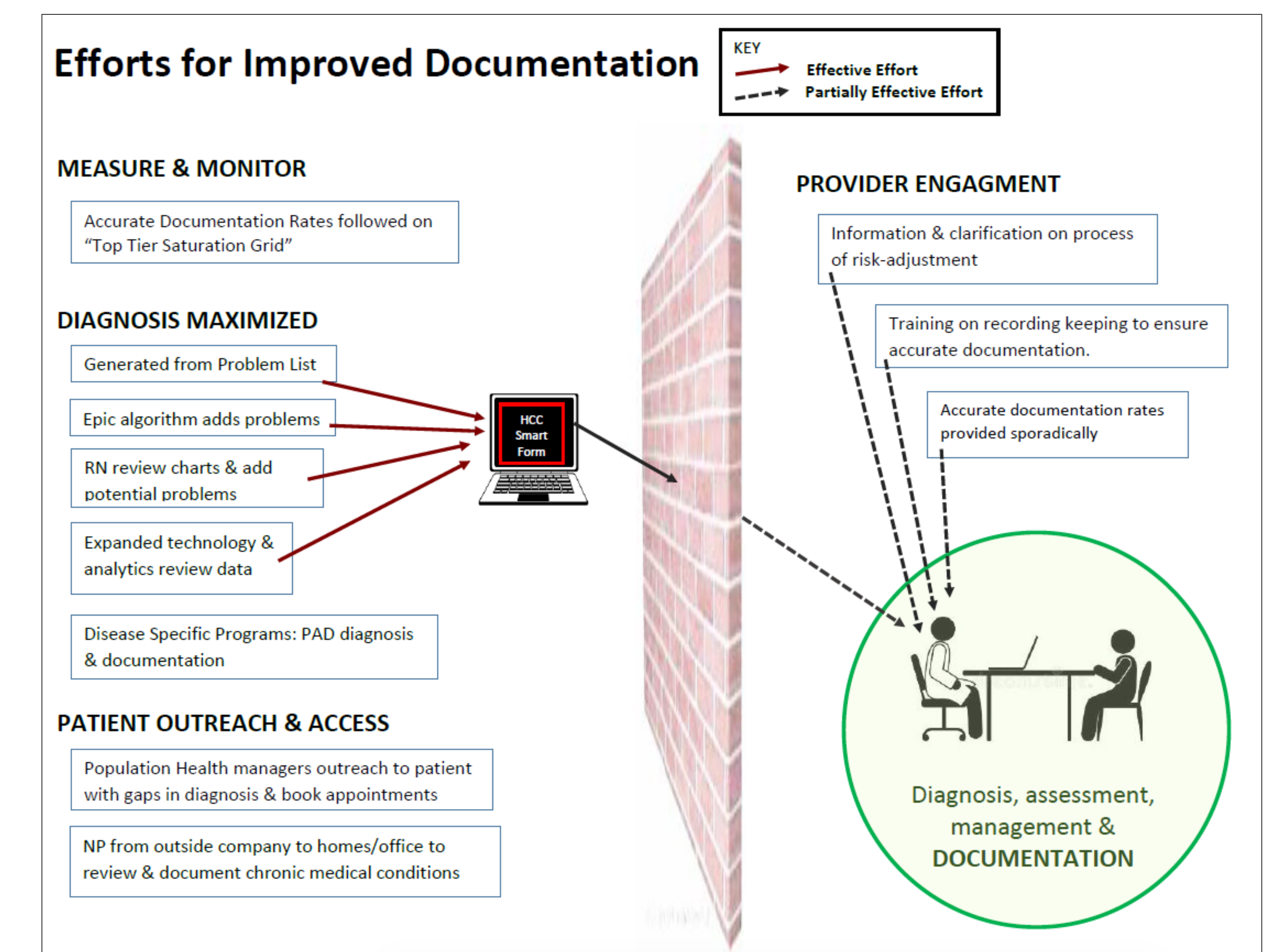
### INTERVIEW RESULTS



*“Until you explained this to me today, I did not understand the financial impact, I don't think lots of us know this”*

*“I'm not always sure what to do with the HCC form, or how to document”*

*“We need more regular feedback on rate”*



### DISCUSSION

Multiple strategies including monitoring rates of complete documentation, measures to ensure chronic diseases are identifiable, and pop-up reminders for clinicians are currently employed. Nonetheless, not enough effort is made to ensure providers understand the basis of risk-adjustment, importance of accurate record keeping or how to harness resources ease the process. Providers are also not being given sufficient feedback or incentivized to improve. Addressing these issues by Investing in provider engagement will improved financial stability and increase quality of care.