REVIEWING THE PHC WORKFLOW IN IMPROVING THE QUALITY OF US HEALTHCARE

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INTRODUCTION

- The purpose of Physician Housecalls is to provide for the requirements of patients who are housebound. They exist to provide care for people in their homes, where they are most at ease and most vulnerable. Thereby giving everyone access to the assistance they require for a healthier and more contented life.
- Currently, their focus is caring for the ever-growing geriatric population in the USA. Most of this population have a substantial care problem since they can't get to the doctor because of transportation and mobility issues. They go a step further by collaborating with home health agencies, hospice agencies, mobile lab & x-ray services, and many other organizations to make sure patients have the assistance they require to continue living comfortably at home.
- Doctor alliance enters the picture to achieve the goals of physician housecalls and to provide patients with high-quality care. They offer free accounts to all agencies and their doctors so they can get going. They interface with any EHR, allowing for automatic distribution of all PHC papers with no more faxing or printing.
- Every physician receives every document automatically. For the CPO, and CCM services that PHC has been performing, Doctor alliance handles the billing. They bill for documents more quickly than ever and track them in real-time. Documents made more physician-friendly to boost patient referrals

- To better understand the workflow efficiently, multiple terms are explained –

1. Physicians Group
2. Ancillary Services
3. Care plan oversight
4. Chronic care management
5. Revenue cycle management
   - G0179
   - G0180
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   - G0182

RESEARCH METHODOLOGY

- **RESEARCH QUESTION:**
- 1. What is the current process of preparing orders and QC validation of errors?
- 2. What is the process of uploading conversations and signed documents on EHR?
- 3. How is CPO captured by care coordinators?
- 4. Analyzing the total number of patients are billable and efficiency of care provided to the patient?
- **OBJECTIVES:**

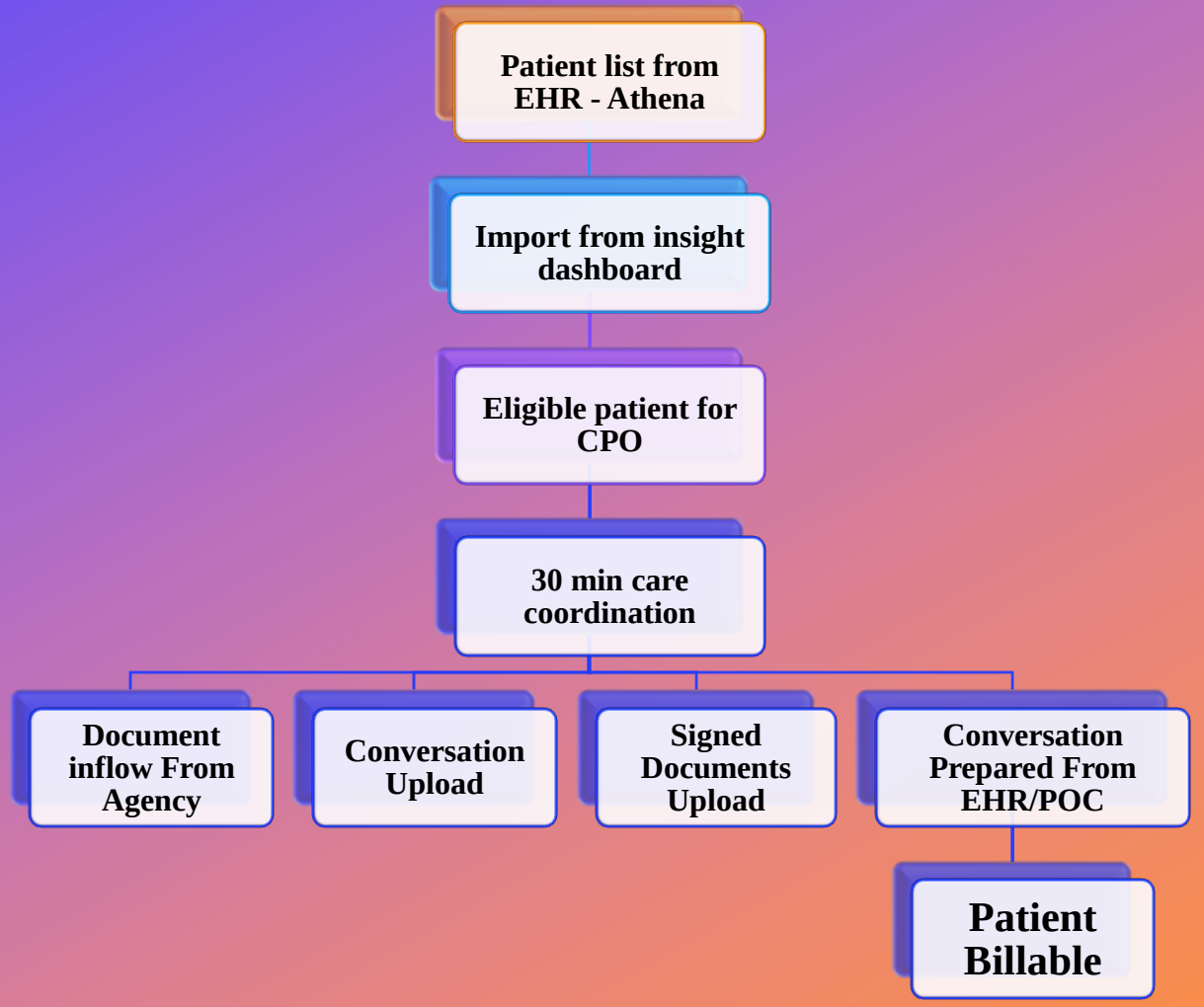
1. To evaluate the impact of the current management process on the care coordination provided to the patient.
2. Determine the errors which are affecting the efficiency of care provided to the patient.
3. Recommend improvements to the current process management.
4. Examine the handling of errors and discrepancies occurring during the workflow.

- **Inclusion criteria:** PHC patient base and home health agency of Oklahoma and Texas.
- **Exclusion criteria:** Patient who are not eligible for care plan oversight due to expiration of episode, deceased and no face-to-face encounters within 6 months.

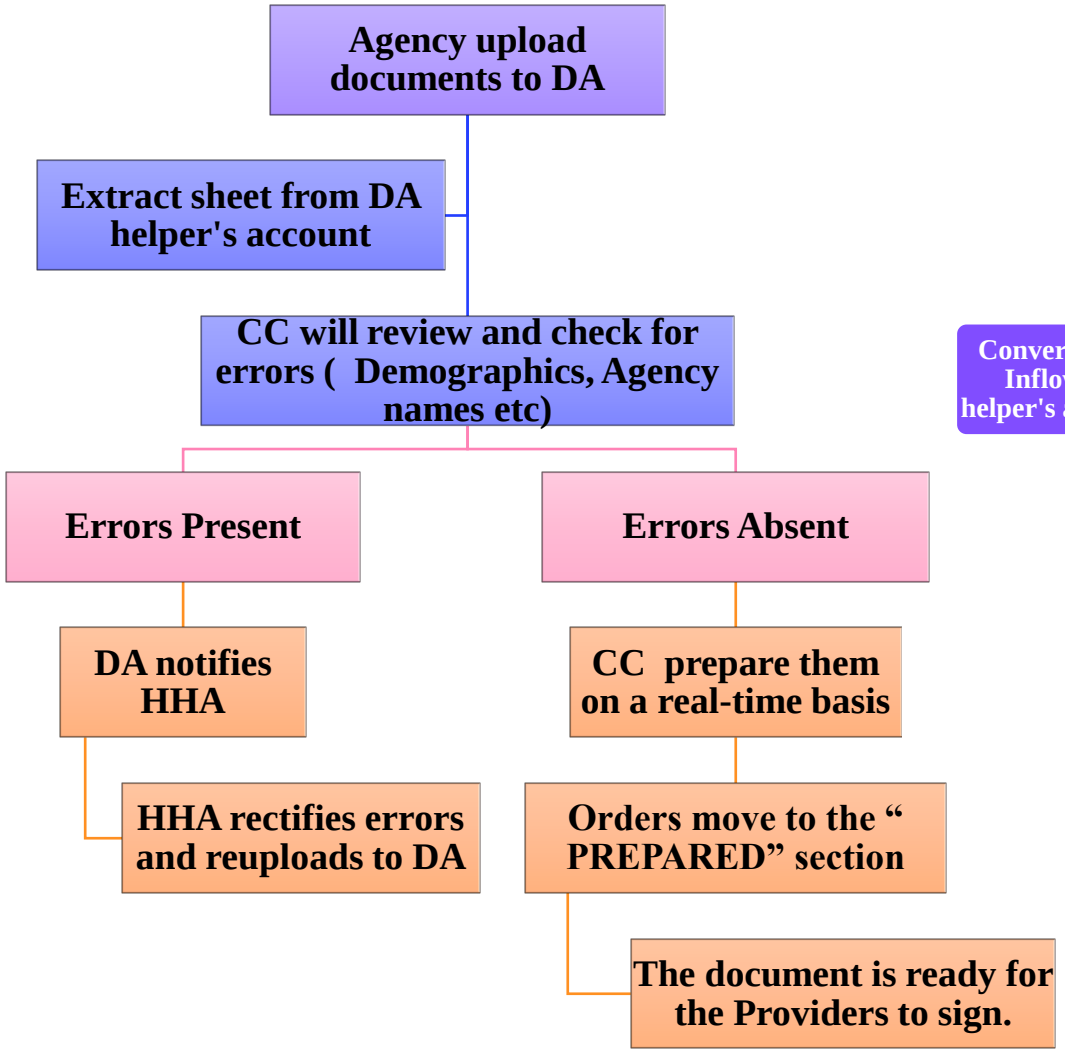
- **Source of data collection:**

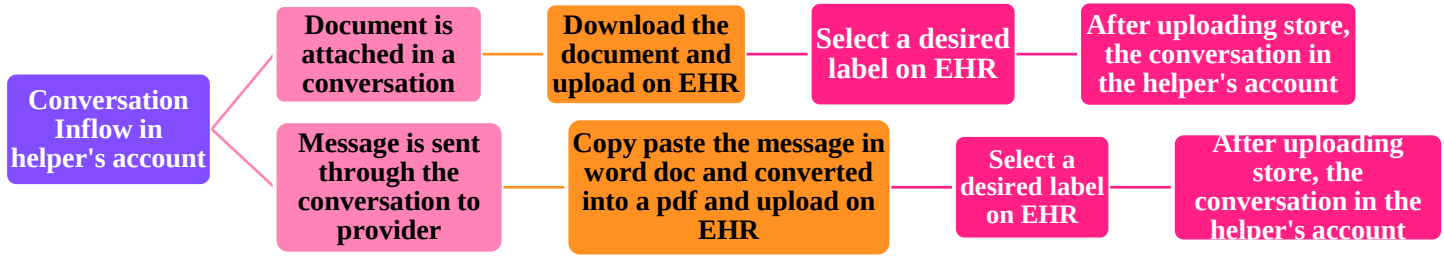
- Data was collected directly from the doctor's alliance back office and electronic health record (Athena) of patients with a timeframe of 10 April – 16 May. The data was collected by observing various workflows performed by the care coordinators. The responses obtained were collected, filtered, and statistically analyzed using tools like Microsoft Excel.

WORKFLOW

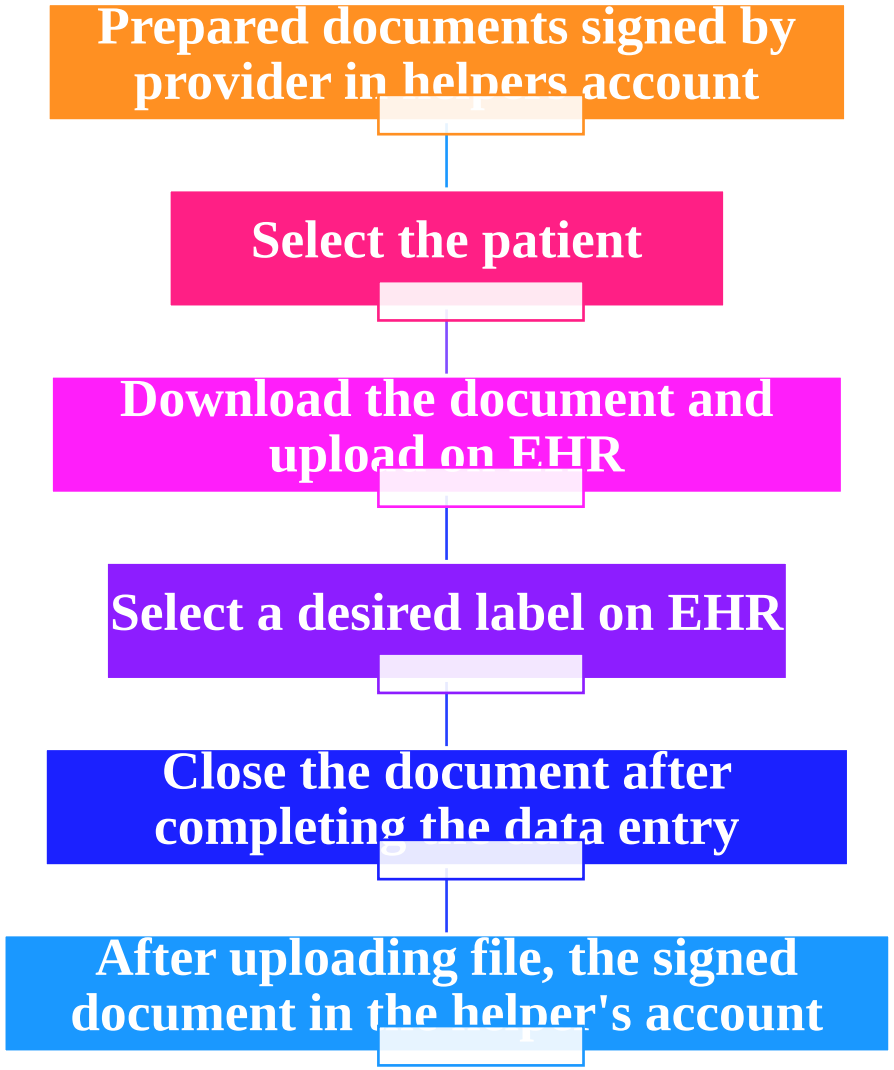

Patient list from EHR - Athena
Import from insight dashboard
Eligible patient for CPO
30 min care coordination
Document inflow From Agency
Conversation Upload
Signed Documents Upload
Conversation Prepared From EHR/POC
Patient Billable

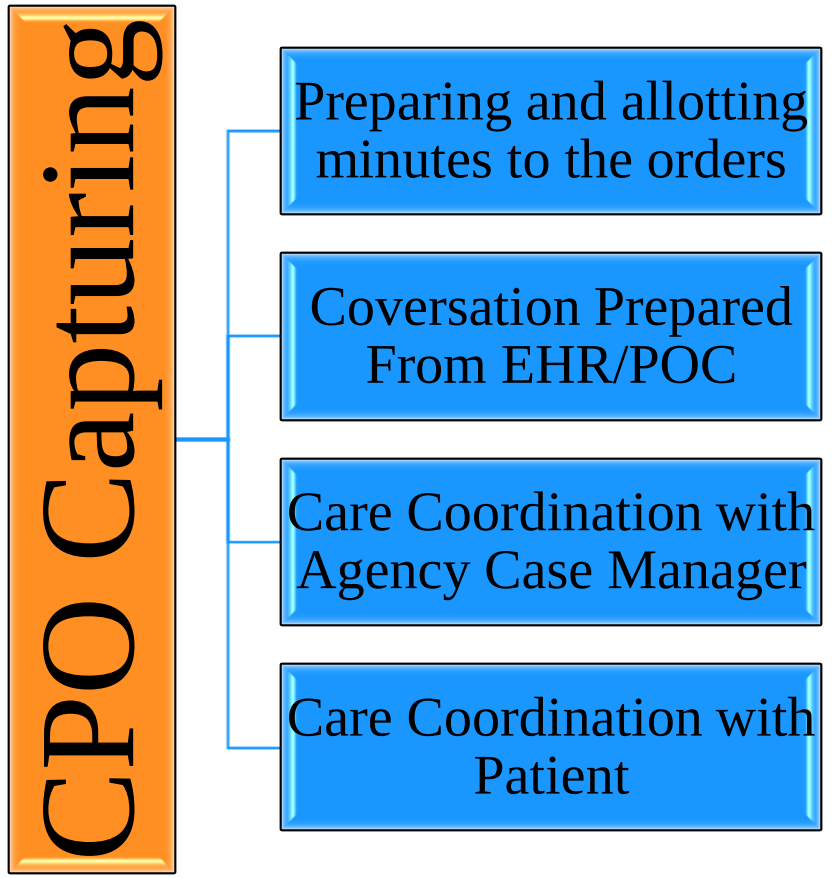
- **Order Preparation & Conversation Uploading**





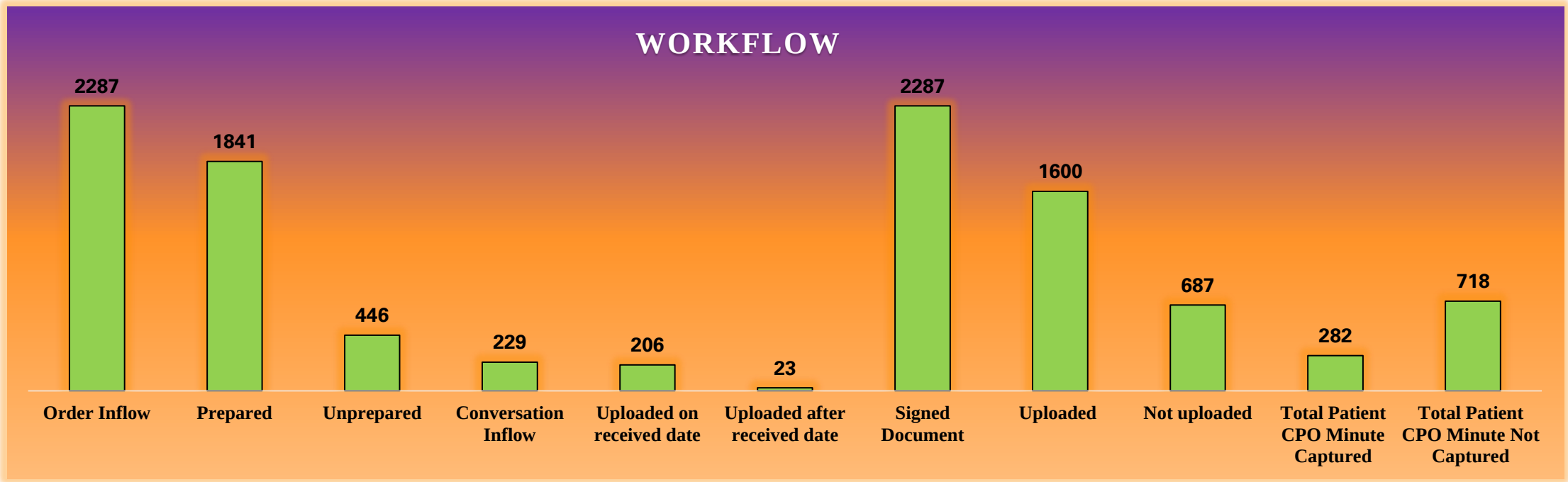
- **Signed Documents Uploading & CPO Capturing**





INTERPRETATIONS

- Physician Housecalls proceeds with an aim of providing great quality of care to patients by coordinating with home health agencies.
- Various pain points occur while coordinating like no real time access to documents of patient, no immediate care to the patient, 20-25 days turn around time for signed documents which have a greater impact on billing of the patient and faxes are used to send a verbal order.
- Doctor alliance bridge this gap by providing these services and ensure quality of life is maintained.



CONCLUSION

- An extensive review of literature, data analysis and examination of a range of variables influencing quality of life has led to some important conclusions.
- Firstly, the quality of care applies to a series of elements, including physical, mental, and social dimensions. An interaction of these factors with their effects on the patient's general health cannot be underestimated.
- All parts of the PHC workflow involve patient centered care, clear communication and cooperative decision making. In this workflow process, there are numerous procedures that lead to many difficulties and a subsequent decrease in the quality of life.
- These bottlenecks have been identified and solutions can be found through a multidisciplinary approach involving more resources, using automation to carry out processes that are not part of the clinical process, thorough verification of patient data and better communication between the home health agency and the doctor alliance.
- In the end, it is important to continue with research, cooperation, and innovation within this field so that patients are granted the best quality of healthcare enabling them to lead fulfilling lives when faced with health challenges.

THANK YOU