Experiences from the Field: Implementing the NAQC eReferral Standard

December 8, 2015
We’ll get started at 12:00 pm ET (9:00 am PT)
To mute your line: *6
To unmute your line: *6
For operator assistance: 00
DO NOT PUT YOUR LINE ON HOLD!
Housekeeping

- During the presentations, all participants will be in listen-only mode.
- Use the chat box to send questions at any time for the presenters.
- Press *6 to mute and *6 to unmute. Please mute your phones now and stay on mute at all times unless you are asking a question or participating in the discussion.
- This webinar is being recorded and will be available on NAQC’s website, along with the slides at http://www.naquitline.org/?page=EEC.
Acknowledgement of Support

This project is supported by an educational grant from Pfizer Independent Grants for Learning & Change, and is conducted in collaboration with the Smoking Cessation Leadership Center.

Disclosure

Evan Frankel has disclosed that he receives salary support from an educational grant from Pfizer Independent Grants for Learning & Change for this project.
Learning Objectives

After participating in this webinar attendees will understand:

• Learn how the Pennsylvania quitline and University of Pittsburgh Medical Center partnered to implement eReferral

• Discuss important lessons learned by the state funder regarding the role of the state funder in eReferral, selecting a healthcare partner, timeline for completion, cost and resources, and benefits of implementation.

• Discuss important lessons learned by the quitline service provider regarding the role of the service provider in eReferral, selecting a healthcare partner, timeline for completion, cost and resources and benefits of implementation.

• Discuss important lessons learned by the healthcare organization regarding the role of the healthcare partner in eReferral, making the case for referral with the quitline to the healthcare organization, timeline for completion, cost and resources, and benefits of implementation.
Agenda

1. Overview of Presentation and Panel
2. State Funders support of eReferral
3. The Role of the Quitline
4. The Healthcare Partner
5. Question and Answer
Quitline Funder Perspective:
Pennsylvania Department of Health

• Judy Ochs, Director of Tobacco Prevention and Control, Pennsylvania Department of Health

![Diagram showing connections between entities: PA Department of Health, National Jewish Health, UPMC, Tobacco Free Allegheny, and eReferral.]
Quitline Vendor Perspective: National Jewish Health

• Marty Maness, MBA, Systems Engineering Manager, National Jewish Health

Technology to implement

• HISP/Direct message platform to receive CCDA
• New interface engine to parse CCDA messages
• Triggers for feedback reports
Healthcare Organization Perspective: UPMC Presbyterian University Hospital

• Kristi Powers, MHA, Project Manager, UPMC Information Services Division

• Anna Schulze, MSW, Project Coordinator, UPMC Tobacco Treatment Service
UPMC eReferral Summary

Time
• ~2 years

Cost
• Operational costs only

Resources
• 28 Total Resources
  – 9 TTS
  – 15 ISD
  – 2 HSD/Division of General Internal Medicine
  – 2 Quality

Benefits
• Improved access to tobacco treatment post-discharge
• Enhanced inter-organizational relationships
• Improved interoperability
• Foundation for future innovation
• Compliance with Regulatory & Quality Initiatives
UPMC eReferral Pilot Activities

Resources

• Tobacco Treatment Service
• Health Services Division
• Division of General Internal Medicine
• Information Services Division
• Quality Improvement

Process

• Approvals
• Design/Vision
• Discovery
• Testing
• Implementation
• Follow-up/Support/Troubleshooting
12/2013
Planning Began

02/2015
ISD Workflow Finalized

03/2015
Pilot Launch

First Test Message 09/2014

EHR Training 02/2015
Insights into the Process

• Invest time in understanding the process
• Meet with stakeholders to ensure same expectations
• Academic detailing on the quitline
• Track and evaluate process measures
• Expect obstacles and challenges
• Start with a feasibility pilot
Challenges and Limitations

• Many competing projects/priorities
• Vendor document not customizable
• System errors/downtimes
• Manual process to send eReferrals (counselors must actually hit “send”)
• Data reconciliation of discrete elements & associated inbound/reconciliation policy limitations
• Lack of contact info/direct message info for sending feedback report to PCP post-referral/counseling
Questions and Discussion
CONTACT US!

If you have any feedback on this or future eReferral trainings, please contact Linda Bailey at lbailey@naquitline.org.

Additional eReferral resources available on NAQC’s eReferral webpage at http://www.naquitline.org/?page=EQR

Thank you for your participation!