



Texas eReferral Project with Lonestar Circle of Care, NextGen, Alere Wellbeing and University of Texas at Austin

Update Date: October 2014

Quitline Service Provider	Alere Wellbeing	Seattle, WA	Technical assistance for the vendor and file requirements for the transfer.
Key Quitline Funder(s)	State of Texas		Fund evidence-based cessation treatment program for referred patients (counseling plus pharmacotherapy)
eReferral Funding	State of Texas		Funding for this piece was a \$5000 assistance package to the participating healthcare systems. The assistance package has since changed to \$2500 per healthcare system.
EHR Vendor	NextGen		
Process Facilitator/negotiator	University of Texas at Austin	Austin, TX	UT was in charge of connecting with the systems, creating buy-in from the systems and collaborating with all appropriate parties to make sure the process is complete.
Other			

Technology

Provide a list of the key technology vendors and resources used to build your eReferral system. Note whether you are using HL7 2.x or HL7 3.x (cCDA) as your interoperability standard. Describe your HIE framework.

Technology	Vendor Name	Software Description (eg, name, version, type)
EHR	NextGen	
Quitline System	Alere Wellbeing	
Interoperability Standard		
Interface Engine		
Health Information Exchange (HIE)		
Other		

Key Work

Please breakdown the project into key areas of work or milestones that must be completed so that readers have an understanding of the project framework and complexity.

Key Area / Milestone	Description of Project Steps
Health Systems Change	Create relationship/buy in with healthcare system. This could take many contact attempts. Once buy-in is established, have the healthcare system present the idea and specs to the EMR vendor and connect UT-Austin with the vendor to begin building the process into the system.

<p>EHR Integration</p>	<p>View tobacco templates to establish what, if anything needs to be built into the system to establish referrals to the Quitline. UT facilitated calls between the healthcare system, the Quitline, and the vendor to assure the process was in place for integration. The vendor then built necessary screens, established the connection and submitted test files. Test files took a minimum of 4 weeks to complete. At this point the system was up and running.</p>				
<p>UT Austin</p>	<p>Once the system integration was complete, training materials in the form of a customized video, a one page trainer with screen shots for use to assure the healthcare system was aware of what the Quitline is and how to refer patients through the electronic tool.</p>				
<p>eReferral Program Funding</p>	<p>The program had some funds to offset the charges from the EMR vendor. In this case, the vendor charged only what we could reimburse.</p>				
<p>Privacy/Security</p>	<p>Confirmed with the Quitline, the vendor and the Healthcare system that information is being exchanged among HIPAA complaint organizations.</p>				
<p>Other: Training videos created so far. More to follow as new systems are on board.</p>					
<table border="1"> <thead> <tr> <th data-bbox="121 1423 357 1465">Videos</th> <th data-bbox="381 1423 868 1465">Description</th> </tr> </thead> <tbody> <tr> <td data-bbox="121 1472 357 1957">  <p>NOEP-Helping My Patient Quit Tobacco – A Nurse’s Guide</p> </td> <td data-bbox="381 1472 868 1957"> <p>This course was developed for the Nurse Oncology Education Program to equip all nurses with knowledge and skills to appropriately address tobacco cessation and coach patients through quit attempts. The module discusses and provides scenarios for a variety of healthcare and patient health issues, including mental health and substance abuse. This course can be taken for FREE CNE credit by viewing it at the following site: http://www.noep.org/nursing-cne/preview/76-helping-my-patient-quit-</p> </td> </tr> </tbody> </table>	Videos	Description	 <p>NOEP-Helping My Patient Quit Tobacco – A Nurse’s Guide</p>	<p>This course was developed for the Nurse Oncology Education Program to equip all nurses with knowledge and skills to appropriately address tobacco cessation and coach patients through quit attempts. The module discusses and provides scenarios for a variety of healthcare and patient health issues, including mental health and substance abuse. This course can be taken for FREE CNE credit by viewing it at the following site: http://www.noep.org/nursing-cne/preview/76-helping-my-patient-quit-</p>	
Videos	Description				
 <p>NOEP-Helping My Patient Quit Tobacco – A Nurse’s Guide</p>	<p>This course was developed for the Nurse Oncology Education Program to equip all nurses with knowledge and skills to appropriately address tobacco cessation and coach patients through quit attempts. The module discusses and provides scenarios for a variety of healthcare and patient health issues, including mental health and substance abuse. This course can be taken for FREE CNE credit by viewing it at the following site: http://www.noep.org/nursing-cne/preview/76-helping-my-patient-quit-</p>				

	<p>tobacco-a-nurses-guide.</p> <p>Link: https://www.youtube.com/watch?v=Z-LX9Rkh9G8&feature=youtu.be</p>	
 <p>Helping Our Patients Quit Using Tobacco</p>	<p>This video is designed to promote the eTobacco protocol, increase awareness of the Texas Quitline, and encourage healthcare providers to use the Ask, Advise, Refer process for counseling patients on tobacco cessation. The module provides a generic electronic referral option to show clinic systems how the process could be integrated into the respective systems for broader integration.</p> <p>Link: http://youtu.be/qqNhyfXbEvg</p>	
 <p>Helping our Patient Quit Using Tobacco – WellnessPointe</p>	<p>This video is designed to train staff on the Ask, Advise, Refer process within the eTobacco protocol specific to Wellness Pointe and the vendor GE Centricity. It introduces the eTobacco templates used by the healthcare system and walks the provider through the referral process. The video also provides information on the Texas Quitline to assure that the patient will respond to the proactive outreach from the quitline staff.</p> <p>The second link is specific training developed for Lonestar Circle of Care</p> <p>Link: http://youtu.be/0f1WDJy0lz0 http://youtu.be/Scgn4bzwRIg</p>	



Texas eReferral Project with Lonestar Circle of Care, NextGen, Alere Wellbeing and University of Texas at Austin

Update Date: October 2014

Project Outcomes

Please note progress to date on project implementation and outcomes. If eReferrals are being made, please describe whether they are bi-directional and whether information is being passed as discrete data or unformatted text. How many eReferrals are generated in a given timeframe?

Key Challenges / Lessons Learned

Quitline referrals increased from 7 paper-based referrals in one year to over 1256 in the second year after the implementation of the electronic referral occurred.

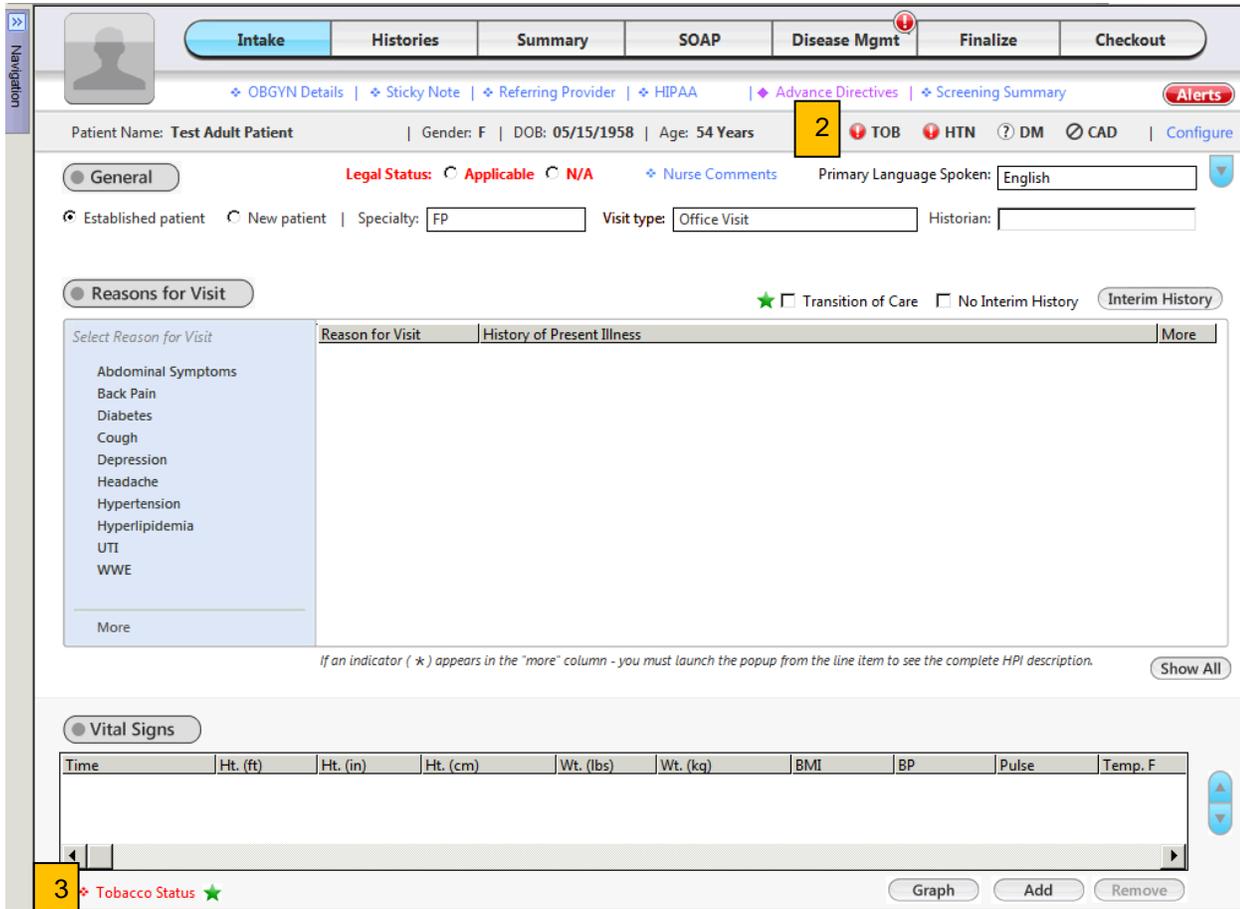
Attachments

Please include any supporting documentation that will help others to learn from your eReferral project. Examples include practice workflows, technology diagrams, order sets, discharge instructions, EHR screen shots, and other practical applications of your eReferral process. List below:

Tobacco Status Alerts and Cessation Referral Workflow Customized by CSSS Process in place at Lone Star Circle of Care, People's Community Clinic, and El Buen Samaritano

The tobacco status review begins with the Medical Assistant (MA) workflow. The series of screenshots and steps described below pertain to the MA role.

1. The MA rooms the patient and begins entering data in the *Intake* template (see image below)
2. Note that any user on any main template will see a red alert icon near the top of the chart if the patient is known to be a current tobacco user. (Similar alerts adjacent to that one notify clinicians of the presence of hypertension, diabetes, and coronary artery disease.)
3. As the MA works through the *Intake* template, a red hyperlink alerts him/her that the tobacco status has not yet been reviewed/updated during this encounter.



Navigation

Intake | Histories | Summary | SOAP | Disease Mgmt | Finalize | Checkout

OBGYN Details | Sticky Note | Referring Provider | HIPAA | Advance Directives | Screening Summary | Alerts

Patient Name: Test Adult Patient | Gender: F | DOB: 05/15/1958 | Age: 54 Years | **2** | TOB | HTN | DM | CAD | Configure

Legal Status: Applicable N/A | Nurse Comments | Primary Language Spoken: English

Established patient New patient | Specialty: FP | Visit type: Office Visit | Historian:

Reasons for Visit ★ Transition of Care No Interim History Interim History

Select Reason for Visit

- Abdominal Symptoms
- Back Pain
- Diabetes
- Cough
- Depression
- Headache
- Hypertension
- Hyperlipidemia
- UTI
- WWE
- More

Reason for Visit	History of Present Illness	More

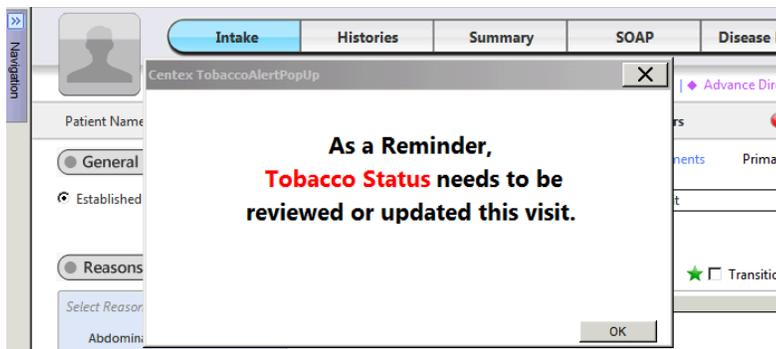
If an indicator (★) appears in the "more" column - you must launch the popup from the line item to see the complete HPI description. Show All

Vital Signs

Time	Ht. (ft)	Ht. (in)	Ht. (cm)	Wt. (lbs)	Wt. (kg)	BMI	BP	Pulse	Temp. F

3 [Tobacco Status](#) ★ Graph Add Remove

4. If the MA ignores the **Tobacco Status** hyperlink and attempts to navigate away from the *Intake* template, a pop-up alert serves as a reminder to complete the tobacco status review/update (see image below). The MA will see this pop-up reminder a single time per patient. If the MA bypasses that alert without addressing tobacco status, the provider will get the same pop-up alert when s/he opens the encounter. In addition, there are several “hard stops” that will prevent the provider from finalizing the encounter documentation (ie, until the tobacco status update is performed, the provider is prevented from entering an E/M billing code or generating a Patient Plan or Chart Note document).

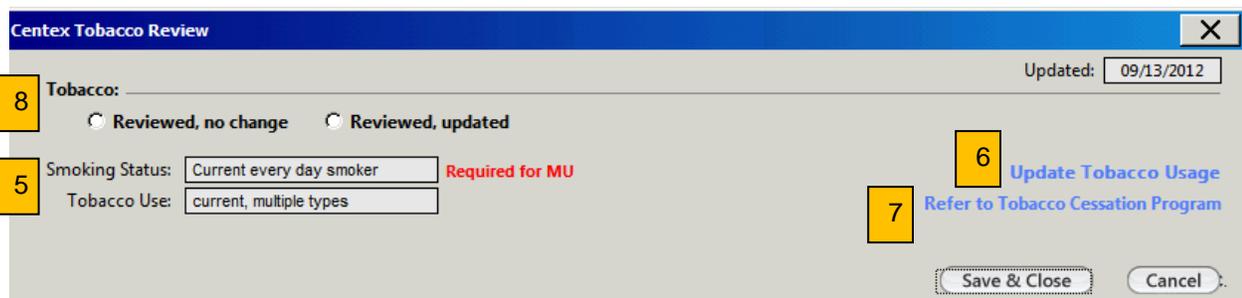


Centex TobaccoAlertPopUp

As a Reminder,
Tobacco Status needs to be reviewed or updated this visit.

OK

5. When the MA or provider clicks the **Tobacco Status** hyperlink, the *Tobacco Review* pop up template opens (see image below). The user is presented with the most-recently known Smoking Status. For example, the “Current every day smoker” notation in the image below is not entered into this field by the user; it is existing data that is pulled forward and displayed.
6. The user verifies with the patient that the status is correct. If a correction is needed, the user clicks the **Update Tobacco Usage** link, which opens the *Tobacco Use* template, where the data can be updated.
7. If the patient’s status is that of a Current Smoker, the user can choose to click the **Refer to Tobacco Cessation Program** hyperlink, opening the *Tobacco Intervention* template (which is described in a later step).
8. After the tobacco status is reviewed (and updated as needed), the user clicks either the **Reviewed, no change** or **Reviewed, updated** radio button (a required field), then clicks **Save & Close**.



9. If the patient is a current smoker and the user attempts to **Save & Close** the *Tobacco Review* template without first documenting cessation counseling and/or a referral, the *Tobacco Intervention* template will automatically open (see next image).
10. The *Tobacco Intervention* template requires the user to ask and document whether the patient is currently interested in quitting (see the red “*Ready and willing to quit tobacco?*” question in the image below). If the patient indicates a readiness to quit within 30 days, the user must either document patient refusal of a referral OR place an order for a referral to the Seton Tobacco Resource Center and/or the Quit Line. [Note: The red “*Consent to referral*” line only appears when the readiness question is answered as “*Ready to quit within 30 days*”.]



Texas eReferral Project with Lonestar Circle of Care, NextGen, Alere Wellbeing and University of Texas at Austin

Update Date: October 2014

Centex Tobacco Intervention

Tobacco Use
Tobacco Intervention

Tobacco Cessation Intervention:
Ready and willing to quit tobacco?
 Ready to quit within 30 days
 Thinking about quitting at some point
 Not interested in quitting

10 sent to referral to
 Refused Referral
 Quit Line
 Tobacco Resource Center

Print Education:
 Tobacco cessation discussed
12

Cessation Counseling:

Education Date	Class Outcome	Counseled By	Education Materials/Service	Referred To	Reason For Refusal	Service
09/25/2013		Tracy Angelocci				Cessation Discussed
09/03/2013		Tracy Angelocci	Tobacco Cessation Information English			Cessation Discussed

Assessment/Plan:

History of Tobacco use (V15.82)
 Tobacco use disorder (305.1)

Tobacco use disorder complicating pregnancy (649.01)

Techniques Discussed:

Aversive Conditioning
 Delaying tactics
 Mentor program
 Smoke free car
 Substituted behavior

Daily diary
 Literature given
 Remove triggers and cues
 Smoke free house
 Support program

Patient education:

Benefits of quitting
 Nicotine dependance
 Secondhand smoke (passive smoking)

Hazards of tobacco
 Nicotine withdrawal
 Ways to quit tobacco

Recommended Treatment:

Acupuncture
 Hypnotherapy
 Nicotine lozenge
 Nicotine Inhaler

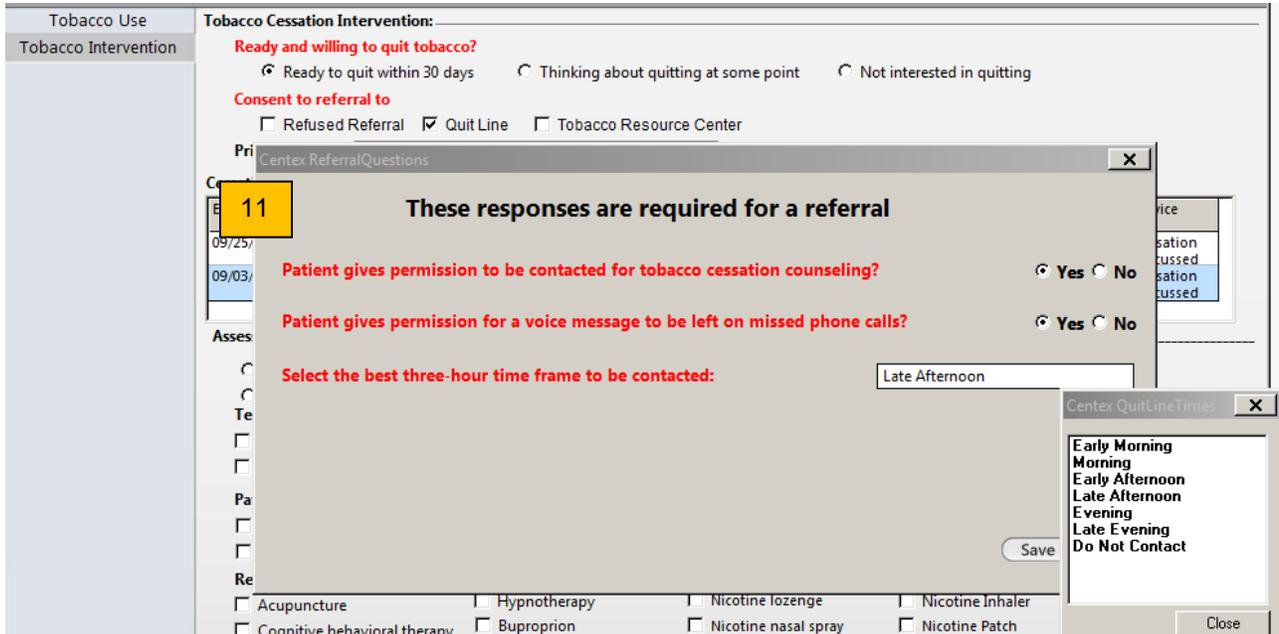
Cognitive behavioral therapy
 Bupropion
 Nicotine nasal spray
 Nicotine Patch

Counseling
 Varenicline/Chantix
 Nicotine Gum
 None

Other Method:

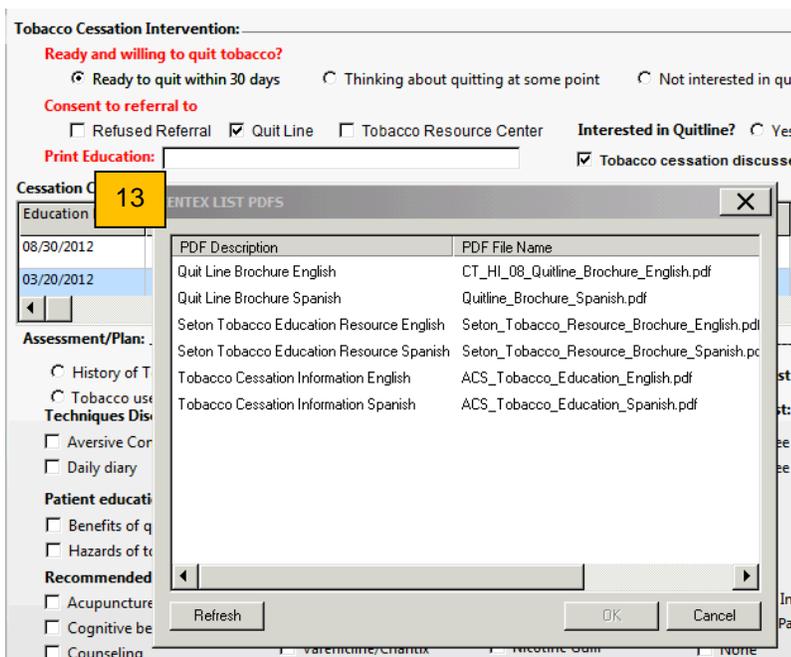
Return to office in:

11. If the patient agrees to either referral, a pop up appears requiring collection of the following data: patient's permission to be contacted by Seton or the Quit Line, permission to leave a voice mail message, and best timeframe to call. These questions were added to improve the contact rates.

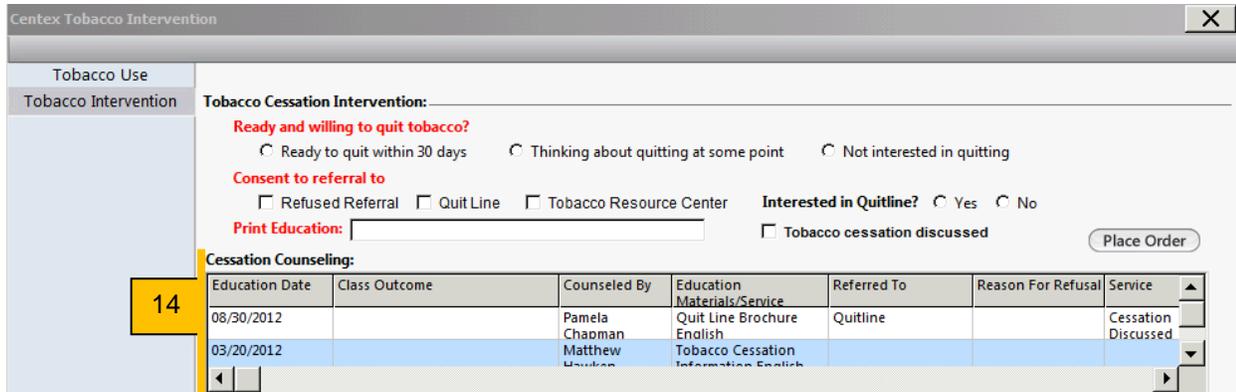


12. The user clicks the **Place Order** button to initiate the referral process. Every night, an automated backend business process runs, generating a report containing patient contact information for each of the referrals ordered that day. The report is automatically sent via secure email to program registration specialists at the Quit Line and the Seton Tobacco Education Resource Center, who then call and enroll the patients.

13. When referring the patient to either tobacco cessation program, the user can click into the Print Education field to select an appropriate program brochure to print for the patient (see image below).



14. The Cessation Counseling grid in the *Tobacco Intervention* template shows the user a reverse chronological history of all cessation counseling attempts and prior referrals to the Quit Line or Seton Tobacco Education Resource Center (see image below). Centex receives patient enrollment and completion data back and an automated script inserts that data into the Class Outcome column of the grid.



The screenshot shows a web form titled "Centex Tobacco Intervention". It includes sections for "Tobacco Use", "Tobacco Intervention", and "Tobacco Cessation Intervention". The "Cessation Counseling" section contains a table with the following data:

Education Date	Class Outcome	Counseled By	Education Materials/Service	Referred To	Reason For Refusal	Service
08/30/2012		Pamela Chaoman	Quit Line Brochure English	Quitline		Cessation Discussed
03/20/2012		Matthew Houston	Tobacco Cessation Information English			

15. Because the smoking status verification and referral process is in the Medical Assistant workflow, we've added a pop up in the provider workflow, with the following information: Readiness to Quit, Referrals Place (or Refused), and Education handouts provided. The hope is that additional reinforcement from the provider will encourage a patient to follow through with class enrollment, or convince a patient who initially refused a referral to reconsider. The provider notification is a pop up that appears one time, upon initial opening of the SOAP template (which is the template where providers do most of their encounter documentation).



Texas eReferral Project with Lonestar Circle of Care, NextGen, Alere Wellbeing and University of Texas at Austin

Update Date: October 2014

Smoking Cessation

TOBACCO QUIT LINE

Ambulatory Referral to Tobacco Quit Line
External Referral, Routine

Accept Cancel

Class: External Ref

Referral Priority: Routine **Routine** Urgent Elective Less than 1 week Less than 2 weeks Less than 4 weeks

RefType: Consultation

Comments (F6):
Patient would like counseling

Questions:	Prompt	Answer	Comments
1.	Was consent received for the Tobacco Quit Line	Yes No	
	Single response		