
E-Consult News

February 2020

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Quality

Mayo Clinic Use of Infectious Disease E-Consults Reduces Mortality Risk

The first study of e-consult use for infectious disease (ID), published in January 2020, reports a 70% decrease of 30-day mortality rates. Conducted by The Mayo Clinic, the study assessed ID e-consult use by two small, rural Mayo Clinic Health System (MCHS) hospitals and compared the data to matched control data from 18 other hospitals.

The study also surveyed hospitalists and ID specialists who reported high satisfaction with their e-consults for 100 patients. A key element of this satisfaction was that all providers used the same electronic health record (EHR).



After receiving an e-consult, the ID specialist accessed the patient EHR and then placed recommendations for interventions, additional lab tests and consults with other specialists in the referring hospital's EHR.

In addition to the e-consults' quality care and provider satisfaction, the study's authors emphasize that asynchronous e-consult implementations are faster and simpler than those for synchronous

telehealth tools.

Education and Implementation

Patients Express Broad Acceptance of E-Consults in New Study



To assess patient perspectives on e-consults, [researchers conducted primary patient focus](#) groups at five academic medical centers to explore patient opinions about e-consults.

The academic medical centers are partners in AAMC's Project CORE: Coordinating Optimal Referral

Experiences, which uses e-consults to "improve the efficiency and effectiveness of clinical communication between primary care and specialty care clinicians."

"Nearly all focus groups responded positively to the idea of [e-consult] and were enthusiastic about its potential benefits...All focus groups felt that [e-consult] would result in better care, time and cost savings, and shorter wait times for appointments with specialists," the authors note.

Patients maintained a positive perspective on e-consults as long as they did not replace needed in-person appointments and that patients would not be charged a copay for their use. The focus group input revealed that "patient involvement in outreach and education efforts could help to improve [e-consult] models and enhance their uptake."

How-To: Scaling E-Consult to Include Neurology

A group of neurologists from Penn State Health piloting an e-consult neurology program have [published an overview of how to scale](#) e-consult programs to a new specialty. The authors describe five components: templates, emergent care, establishing framework, billing codes, and relative value units. The billing codes include CMS billing codes for Medicare beneficiaries, indicating that e-consult adoption is expanding as a result of reimbursement.

NEUROLOGY TEMPLATES

Neurology eConsult - Cognitive Decline or Dementia

I am requesting a neurology eConsult for Cognitive Decline or Dementia

If this clinical question is not appropriate or deemed too complex for an eConsult, please route this message back to me and/or schedule in-person referral.

My clinical question is: _____

- Please include relevant details related to imaging and evaluation by neurology in your clinical question.
- Onset of symptoms
- Objective evidence for cognitive decline and/or personality change (such as family history, difficulties at work)
- MoCA/SLUMS score

The most current assessment for this problem is included in my clinic note dated: _____

The following studies are required by neurology

- Vitamin B₁
- Vitamin B₁₂
- Methylmalonic acid
- TSH

Please enter your initials below

__ I affirm that I have informed the patient of the use of an e-consult which involves the electronic exchange of patient information through the electronic medical record to facilitate their care.

The authors also note that e-consult implementation requires serious commitment at both departmental and institutional levels “including a core implementation team, which includes an IT expert, a PCP champion and a specialist champion, development of fair reimbursement strategies for providers, and a commitment to system quality improvement.”

Evaluation of Advanced Practice Nurses' E-Consult Knowledge

The increase of patients with health insurance has increased the need for primary care providers. In rural and underserved areas, advanced practice nurses (APNs) are filling patients' primary care needs but do not have "quick and easy access" to specialists, notes a study on APNs and e-consult use. With Medicare e-consult reimbursement, APNs could use e-consults to provide specialty access for their patients.

However, a [survey of 147 APNs in Virginia](#) found that they "were not familiar nor did they have experience with e-consults." The study concludes that Medicare Advantage coverage of e-consults now makes them a "vital" part of APN training.

Access

Safety Net Hospital Urology Clinic Decreases In-Person Visits Through E-Consult Use

This January, researchers at University of Texas Southwestern Medical Center [published an assessment of e-consult](#) use by a safety net county hospital's urology clinic in Dallas, TX. The study analyzed data from 472 e-consults received between January and December 2018 for 454 patients. Among the e-consults, 69.1% were scheduled for in-person visits, 23.9% of which were for cystoscopies, and after an in-person appointment, 25% of patients did not require a follow-up visits. The researchers concluded, "Implementation of urology e-consult service is feasible and decreases the need for in-person clinic visits."

Events

E-Consult Workgroup March Webinar

Please join us for the March E-Consult Workgroup webinar on 3/4 from 12 to 1p.m. Pacific Time. This month's webinar will feature Lynnette Namba of Kaiser Permanente, Colorado, speaking to their safety net specialty care program.

- Webinar: <https://zoom.us/j/930145409>
- Dial-in: +16699006833,,930145409# US

To view past Workgroup webinar presentations, visit
https://econsulttoolkit.com/econsult_workgroup.

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