Easing the way in digital therapeutics

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Digital innovation to improve caregiver and patient experience

I was brought on board the Providence Digital Innovations Group two years ago to represent the voice of our providers to the team and to help understand how technology could improve caregiver and patient engagement. Our thesis was that we may be able to use technology to connect patients to their caregivers in a meaningful way.

Two such technologies that achieve this that I am most excited about are Xealth, a platform developed in-house by our entrepreneurs-in-residence, and Omada, a CMS-approved online diabetes prevention program that is part of our portfolio through Providence Ventures, our venture capital fund established in 2014.

Xealth

Ninety percent of patients say that they would be willing to use health care apps to help manage their chronic condition if the apps were prescribed by their doctor. However, most providers indicate they aren’t comfortable recommending digital health products because they have little visibility into a patient’s engagement with and adherence to these prescribed solutions. It becomes challenging to follow a patient’s progress outside of the electronic medical record.

Xealth was developed to solve this problem. With Xealth, clinicians can prescribe and track the use of educational health content, apps for disease management and devices to help monitor care from their EMR charting interface in Epic. Xealth aggregates and filters a variety of content sources in a provider’s existing EMR workflow within Epic, which simplifies the ability to create a customized experience for the patient.

Clinicians can discuss these digital health tools with their patients during appointments, track usage afterward, and schedule reminders to ensure patients use them. On their end, patients can access these digital health prescriptions online from their health system’s secure patient portal, such as Epic’s MyChart.

Omada

Omada is a digital health app meant for patients at risk of diabetes, heart disease and other obesity-related chronic conditions. A prescription gives them online access to a robust prevention program that combines digital health tools (such as wireless digital scales and online courses) with Omada’s coaches to help older adults improve their health and reduce their risk.

Evidence of success

Omada and Humana published a study in January in the Journal of Aging and Health that examined outcomes of a Medicare population who participated in the program. The study followed a total of 501 patients with Humana Medicare Advantage insurance and an average age of 68.8 years who were at high risk of developing Type 2 diabetes.

Six months after beginning the Omada program, participants lost an average of 8 percent of their body weight. Twelve months after enrolling, participants had lost an average of 7.5 percent of their body weight, which translated to an average of 13 to 14 pounds lost from an average initial weight of 208 pounds.

Xealth and apps like Omada are a means of expanding the reach and expertise of the care team in a way that is engaging for patients. Both Xealth and Omada are being launched in Oregon and give our system an opportunity to learn how digital health tools can help us to create better health in our communities.

Circle by Providence

app for moms and moms-to-be

Providence Health & Services offers a free smartphone app for moms and moms-to-be called Circle by Providence. The app provides women with personalized pregnancy and parenting information and convenient access to care and relevant services.

Circle offers:

• Answers to frequently asked questions about pregnancy and parenting from Providence experts
• Ability to track more than one child
• Breastfeeding support via articles, videos and connections to local resources
• Information about local classes and groups
• A-to-do checklist designed by Providence experts to guide women through every stage of pregnancy and parenting
• Tracking tools to share with providers during appointments
• Appointment reminders when patients connect to MyChart through Circle

Circle personalizes the information patients see based on their estimated due dates or child’s age and insurance type. Feedback from women who use the app suggests they like how the tool helps them find local resources, both from inside the health system and from community partners.

“Also allows us to build an ongoing relationship with a family as it grows and grows up,” says Sunita Mishra, M.D., internist and medical director of innovation for Providence.

Circle by Providence is available for iPhones and Android devices. Patients can download it by going to the App Store or Google Play.

For more information, contact Casey Bass, consumer innovation manager, at Casey.Bass@providence.org.
Electrodiagnostic services update

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A number of investments have been made recently to enhance electrodiagnostic services in the form of physician expertise, facilities and equipment.

We now have 10 neurologists and two physiatrists performing electromyography (EMG) as part of their practices in the Portland area. With this expansion in physician availability, additional equipment was purchased for several neurology and physiatry clinics.

“Epicly” easier

In addition, we are spearheading two projects to improve the processes around ordering an EMG and receiving the report.

The first is a new order in the Epic electronic health record, which allows ordering clinicians to request an EMG just as they may order a radiographic study. A separate referral will no longer be necessary, and location preference can be indicated. This order will be sent directly to Providence Brain and Spine Institute clinic staff, significantly streamlining the ordering process and reducing delays for patient scheduling.

The second project is a direct software interface between the EMG machines and Epic, which will allow direct importation of an EMG report into a patient’s chart and automatic routing to the Epic inbox of an ordering clinician. This solution will eliminate steps that delay reporting or result in misdirected or lost reports.

Accreditation

Lastly, the outpatient neurologists located in our west neurology clinic are piloting a project to form an accredited EMG laboratory with the goals of improved and consistent service to patients and referring physicians. Accreditation of laboratories is relatively new in electrodiagnostics. Accreditation by the American Association of Neuromuscular & Electromyography is an essential tool in the diagnostic evaluation of peripheral neurological disorders. The exam is composed of two subtests, which allow for a diagnostic conclusion when they are analyzed together:

- A nerve conduction study involves electrically stimulating a nerve and recording its response or that of the muscle it innervates.
- A needle electrode examination involves placing a small needle directly into muscles and recording the electrical activity generated by the muscle at rest and with voluntary activation.

An EMG is a helpful diagnostic adjunct when there is concern about mononeuropathy (carpal tunnel syndrome, wrist drop, foot drop); polyneuropathies; radiculopathies (when MRI does not identify clear nerve root compression); disorders of the neuromuscular junction (myasthenia gravis); and myopathies or muscular dystrophies.

The new EMG order in Epic will go live this summer. When ordering an EMG, it is important to specify the clinical syndrome of concern and the limb to be studied (e.g., carpal tunnel syndrome, right arm). It is also helpful to briefly review the test with the patient so they know what to expect, given that some people find it uncomfortable. If it is not clear that an EMG would help, a neurological consultation can always be requested instead.

To contact EMG services, call Providence Brain and Spine Institute at 503-216-1055.

Advantages of EMG

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The MACRA clock is ticking down

We are halfway through the first MACRA performance year. While some practitioners may qualify under an Advanced Payment model, most will find themselves in the Merit-based Incentive Payment System. MACRA applies to any practitioner who bills Medicare, including advanced practice nurses.

In 2019, Medicare payments will be adjusted based on this year’s performance in three categories: Quality, clinical practice improvement and advancing the use of health information. Although cost is a fourth category under MIPS, it will not count for 2019 payment.

Meeting quality performance goals counts for 60 percent of the overall score. The practice improvement goal counts for 15 percent, and advancing health information, similar to meaningful use requirements, counts for 25 percent. Remember, MIPS scoring is based on median performance of all clinicians. So, by definition, half of all providers will be eligible for a 4 percent “bonus,” while the other half will realize a decrease in payment rate in 2019.

If you have been participating since the beginning of the year, you’re probably in good shape. If not, you still have a chance to fully participate. For this initial performance year, CMS modified the proposed rules to allow practitioners to participate for a partial year.

The minimum requirement for full participation is 90 consecutive days of data. If you submit less than 90 days of data, CMS has indicated it will not penalize practices, but if you do not submit any data, you will automatically be penalized 4 percent.

There is still plenty of time to meet requirements for this performance year. CMS gave practitioners a break this year in an effort to smooth the implementation and help all of us participate. Act now before time runs out!

– James Tuchschmidt, M.D., chief executive, Providence Clinical Programs and Physician Strategy

RESOURCES

For easy-to-understand documents on preparing for MACRA, visit cms.gov and enter MACRA as the search term.

For questions related to Providence, please contact:
- LAURA BUTCHER, Medicare strategy leader, Population Health Division, at Laura.Butcher@providence.org
- RAY MANAHAN, director of government programs, Providence Population Health Division, at Ray.Manahan@providence.org
FOCUS ON: Total knee replacement

Manuel vs. Mako

In a recent study comparing Mako robotic-arm assisted total knee replacement versus traditional manual total knee replacement, Mako demonstrated on average cuts that were four times more accurate and implant placement that was three times more accurate.

New website eases access to trials

With thousands of active clinical trials and research studies available throughout Providence, finding the right study can be overwhelming. The Providence Research and Clinical Trials website is a one-stop resource aimed at making it easier for both patients and providers to learn about, access and participate in a wide range of clinical trials and groundbreaking therapies. The site pulls together studies available across our regions and partner organizations, drawing data from the standardized Velos Clinical Trials System. Users can search for open and enrolling clinical trials by geographic location, keyword or clinical areas. They may also contact the Patient and Provider Engagement Center (PEC), which has a dedicated team to help patients and providers find a study, navigate the process, and connect with appropriate research experts.

To visit the site, go to Research.Providence.org. To reach the PEC, call 844-552-2734.

**noteWorthy**

**New website eases access to trials**

**Providence Bridge Pedal is Aug. 13**

On one pedal-friendly Sunday morning each summer, cars are sidelined as thousands of people on bicycles take over Portland’s Willamette River bridges. This popular event attracts riders of all ages, abilities and bicycle styles.

The 22nd Providence Bridge Pedal features multiple rides, from the free Kids Pedal to the 30-mile Marquam Express, which crosses nine spans from the Sellwood to the Fremont. There’s also a 7.5 mile walk that crosses both the Marquam and Fremont bridges.

To learn more and to register, visit ProvidenceBridgePedal.org.
Prescribe a visit to Basecamp

Basecamp is an innovative new space at Providence Heart Institute on the Providence St. Vincent Medical Center campus. Our name reflects the starting point where great adventures and great achievements begin in heart disease prevention and wellness.

Basecamp offers cardiac rehabilitation and diagnostic services, educational information, cooking demonstrations and exercise classes – both for patients undergoing cardiac rehabilitation and for members of the public who simply want to get healthier.

Make a referral at 503-216-0880 • WelcomeToBasecamp.org