



Arista|MD

Case Study

North County Health Services



A FEDERALLY QUALIFIED HEALTH CENTER



ABOUT NORTH COUNTY HEALTH SERVICES

Private, non-profit Federally Qualified Health Center with 13 clinical care sites serving over 65,000 patients per month in North County San Diego, California

Over 85% of NCHS' patients are either insured by Medicaid, Medicare or are uninsured

Population served is relatively young, but with advanced chronic disease due to long-deferred care or inaccessibility to care

Averages over 300,000 visits per year, with increased demand in recent years

Averages over 3,000 referrals per month

Most frequently used specialties for referrals: dermatology, orthopedic surgery, endocrinology, diabetes and metabolism

The Challenge

North County Health Services has a distinguished, nearly half-century-long history of serving the primary care needs of a largely low-income, working-poor population in North San Diego County, California. NCHS' mission is to address disparities in care confronted by those in lower socioeconomic groups, ensuring access to high-quality, effective primary care services.

The results exceeded our expectations in terms of the ease of adopting AristaMD's service into the primary care workflow.

Like many non-profit Federally Qualified Health Centers that work with underserved patient populations, NCHS faces significant challenges in obtaining specialty care for its patients. Reasons that vulnerable patients – a group that includes the elderly, rural residents and immigrants – experience difficulty in accessing specialty care include a scarcity of specialists who accept Medicaid due to low reimbursement, and patients' own difficulty in arranging childcare and/or transportation. This leads to long wait times for appointments, reduced access to care and deteriorating health for Medicaid patients unable to obtain needed specialty care.

A 2014 survey by consulting firm Merritt Hawkins starkly illustrates the difficulty that Medicaid and Medicare patients in 15 major U.S. cities, including San Diego, face in accessing specialty care. For example, the survey found that such patients in San Diego endure longer wait times on average (18 days) for appointments with an orthopedic surgeon than any of the other 14 cities surveyed. For dermatology appointments, the average wait time in San Diego was 14 days, but just 10 percent of the San Diego dermatologists surveyed accepted Medicaid patients.

At NCHS, monthly demand for specialty care averages between 2,500 and 3,000 referrals per month, but only about 35 percent of patients ever end up obtaining that specialty care for a number of these reasons – affordability, access, geography – so the health center's patients often don't receive the level of care they require.

Further, these access issues are occurring at a time when the nation confronts a looming peril: a specialist shortage, which The Association of American Medical Colleges predicts be between 28,000 and 64,000 by 2025.

The Solution

With the knowledge that patients' challenges in obtaining specialty care would likely persist in the future, NCHS physicians began the process of exploring technology solutions that could alleviate the problem. After a thorough evaluation period, NCHS selected AristaMD, whose Smart Care Platform facilitates communication between primary care physicians (PCPs) and specialists by leveraging eConsults. An eConsult is an asynchronous, digital consultation between the PCP and the specialist that provides timely access to high-quality specialty care guidance through seamless, secure online communications and information exchange. The HIPAA-compliant Smart Care Platform connects PCPs to specialists, leveraging a national, board-certified panel that addresses 34 specialty and subspecialty areas with consultations often delivered within a few hours.

My question to payers is: 'What's your solution to the problem of specialty care access for underserved populations?'

Additionally, AristaMD's Smart Care Platform offers more than 200 clinical work-up checklists created by clinicians at the University of California at San Francisco. These checklists feature proven clinical guidelines that prompt valuable next steps for further evaluation and treatment, ensuring the appropriate workup is completed every time.

In June 2016, after gaining familiarity with AristaMD's platform and processes, NCHS launched a pilot of the program at three clinics involving approximately 10 providers. The pilot's goal was to provide answers to two questions: First, "Are eConsults a useful approach to improving quality and access to specialty-guided care?" and second, "Is the AristaMD Smart Care Platform adaptable and acceptable to busy primary care providers in a community medicine practice?"

The Results

NCHS was so pleased with the results of the pilot that the health system's leadership decided – after just four months – to expand the use of AristaMD's Smart Care Platform to 13 clinics from the initial three.

Notable Findings

65%

65 percent of AristaMD's eConsults resolved patients' issues, rendering a specialist visit unnecessary



Nearly **two-thirds** of patients received the answers they needed within **four hours**, without the need for an in-person visit with a specialist

55%

55 percent of eConsults resulted in specialty-guided care, with specialist documentation in the patient's chart, in the primary care setting



Increased patient satisfaction, as patients gain greater access to specialty care without having to leave the comfort and familiarity of their own PCP's office, further sparing them the time and expense of transportation to a specialist's office

91%

91 percent of providers said the eConsult program had a significant influence on their patients' care plans



Increased provider satisfaction, with providers able to evolve relationships with specialists, and work in a "virtual multispecialty group practice," which improves the scope of practice, enhances real-time learning and enriches the professional experience

By delivering access to specialty care to patients who likely would've gone without, the Smart Care Platform holds strong potential to reduce hospital admissions and emergency room visits among patient populations that obtain specialty care through eConsults. Similarly, AristaMD's solution is likely to reduce hospital and ER admissions by accelerating access to specialty-guided care. In essence, the Smart Care platform enables in as little as a few hours the delivery of specialty care that otherwise may have taken months.

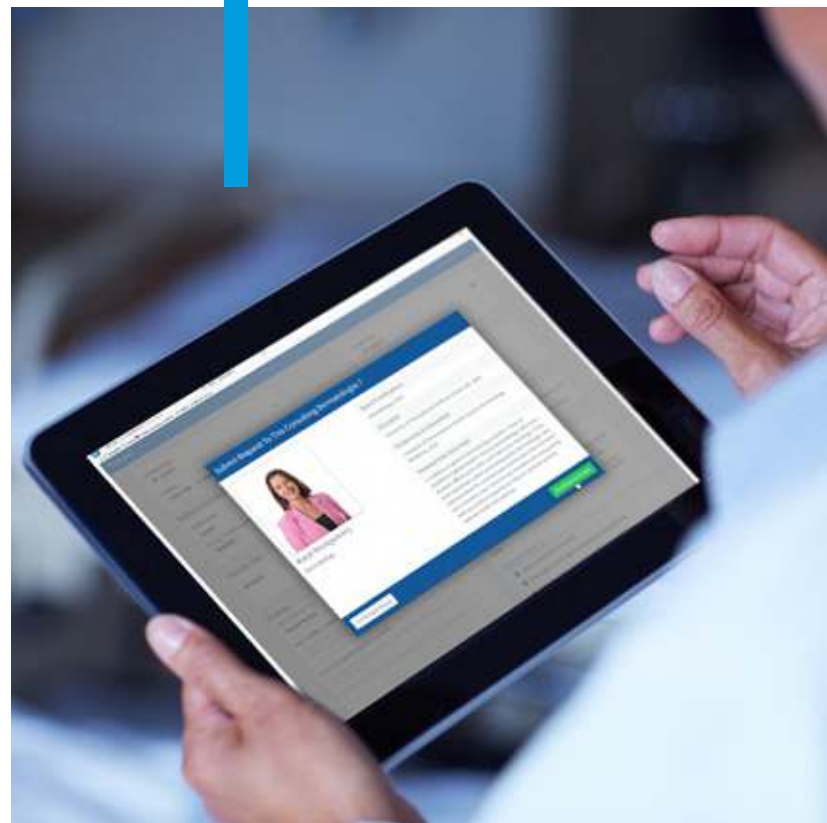
Also notable is that AristaMD's solution helped NCHS to continue leveraging the talents of mid-level providers, such as nurse practitioners and physician assistants, in delivering primary care. The Smart Care Platform's workup checklists are of particular value to the mid-level practitioners for ensuring that all necessary tests are completed prior to referral and all appropriate information is sent to the specialist – quickly and securely.

Additionally, NCHS providers benefitted from AristaMD's white-glove service, which enables providers to seamlessly order eConsults through the clinic's electronic health records platform with minimal workflow disruption and time investment.

What's Next?

With AristaMD's Smart Care Platform, NCHS has extended the capabilities of its primary care providers and expanded access to specialty care for its patients. The health system's next step is to expand its use of AristaMD's white-glove concierge service, ensuring the service's availability to providers at all clinical sites. Because the service enables providers to quickly and nearly effortlessly order eConsults, NCHS officials expect increased utilization of eConsults upon completion of the concierge service's rollout. NCHS anticipates that the convenience that the white-glove concierge service adds to the process will result in increased provider satisfaction and a greater return on investment in the Smart Care Platform as more patients benefit from wider access to specialty care. [MD](#)

Payers need to take a hard look at eConsults. They need a good reason **not to do it.**



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