



Effective Strategies to Help Customers Use Their EHR to Improve Quality of Care

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Technology is transforming healthcare

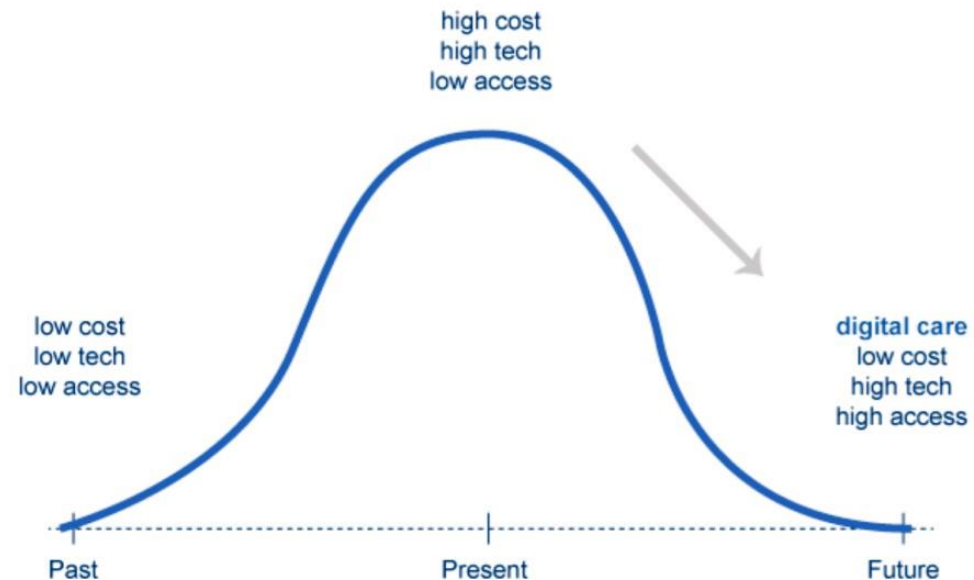
Health technology will
continue to diffuse

Practical applications
increase

Costs decrease

Digital health promises affordable, highly efficacious, and easily accessible patient solutions

Disruptive Innovation in Healthcare



Source: Goldman Sachs Global Investment Research

EHRs are a real world example

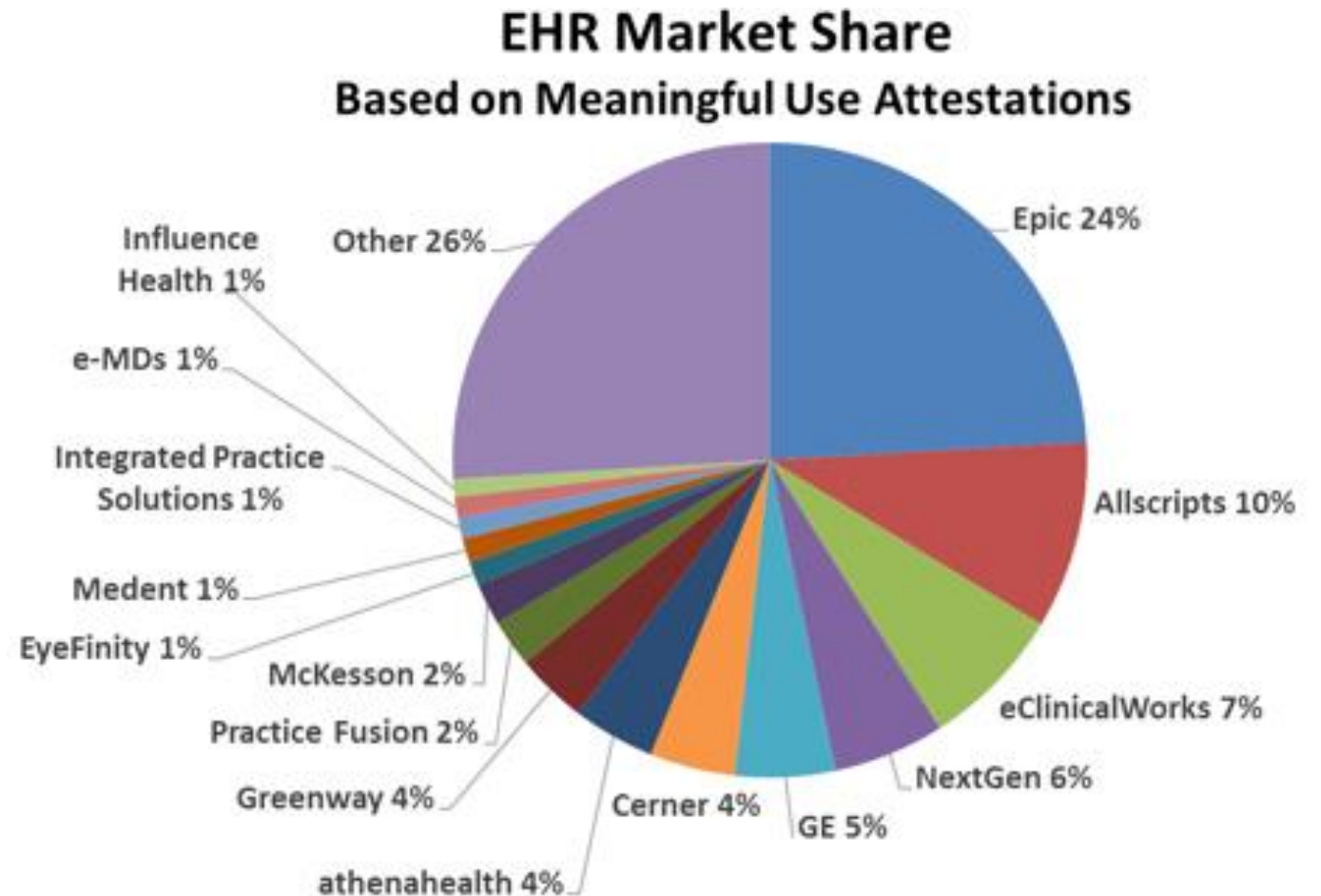
HCPs have fully adopted basic EHR functions... and they are satisfied

Adoption and Perceived Ease of Use of EHR Functionalities	Adoption	Ease of Use
Documentation		
Recording a patient problem list	94%	86%
Recording a comprehensive list of the patient's medications and allergies	98%	84%
Recording clinical notes	97%	83%
Ordering		
Ordering prescriptions electronically (sending a prescription directly to a pharmacy at the point-of-care)	91%	88%
Ordering lab tests electronically at point-of-care	72%	80%
Viewing results and quality measures		
Viewing lab results	88%	91%
Viewing imaging reports	82%	85%
Viewing data on quality-of-care measures	62%	63%
Decision support		
Clinical decision support (eg, alerts for drug interactions or contraindications)	86%	84%
Providing reminders for guideline-based interventions or screening tests	64%	69%
Patient engagement		
Providing patients with clinical summaries for each visit	75%	80%
Exchanging secure messages with patients	42%	68%
Clinical data exchange		
Exchanging patient clinical summaries with other physicians	77%	76%
Public health reporting	40%	49%

Physician Attitudes on Ease of Use of EHR Functionalities Related to Meaningful Use, American Journal of Managed Care, Dec 2015

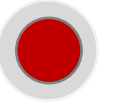
Health System Population Health Capabilities Vary

- Practice size
- How long the EHR is in place
- Health system control
- Number of EHRs in the Health System
- Specialty EHR use



Source: CMS Attestations June 2016

Identifying Patients in Need of New Therapies



Existing tools in EHRs can be configured by health systems to identify patients:

- **Patient Reports** use data captured to identify patients with gaps-in-care or in need of treatment intensification
- **Documentation Templates** can be created to capture structured data
 - Unlike standard practice of free text or scanned PDFs, this format allows data to be queried for identifying appropriate patients
- **Reminders and Best Practice Advisories** can utilize the data in documentation templates, and other discrete data remind HCPs about a need for treatment intensification
- **Order Sets** can expedite utilization of product and patient support materials
- **Patient Education** materials can be integrated into the workflow for consistent use
- **Patient Surveys** can screen patients for changes in their condition between visits, adding to the structured data collected

Partnering with health systems and practices to employ EHR tools and configure them represents a huge opportunity to improve population health

Every step in the pharmaceutical buying process flows through Health IT

<i>Steps in the Buying Process</i>	<i>Selected EHR and Health IT Function</i>
Origination	<ul style="list-style-type: none">• Patient Lists• Patient Outreach
Evaluation Diagnosis	<ul style="list-style-type: none">• Clinical Alerts• Clinical Decision Support
Treatment Choice	<ul style="list-style-type: none">• Clinical Quality Measures (eCQMs)• Order Sets
Brand Choice	<ul style="list-style-type: none">• ePrescribing• Formulary Indicators• Favorites
Prescription Fulfillment	<ul style="list-style-type: none">• ePrior authorization• Prescription Drug Monitoring Programs
Compliance Adherence	Clinical Summaries Patient Portals Electronic Patient Education

Origination - EHR functions to identify potential patients

Patient lists and patient outreach functions enable scalable identification of patient with *gaps-in-care*

The screenshot shows an EHR interface with various tabs at the top: Imm / T. Inj, Encounters, Structured Data, Structured Reports, Referrals, Reports, Allergies, Demographics, Vitals, Labs / DI / Proc., ICD, CPT, Rx, Chief Complaints, and Med. Below these, there are search filters including 'ICD Codes', 'Results Date Range', and 'Search Type' (with options for 'Search in Assessments' and 'Search in Problem List'). A 'Save' button is visible. The main section is titled 'Select Assessments' and includes a 'Switch To Classic Search' option, radio buttons for 'Problem List' and 'Previous Assessment', a 'Smart Search' section with a 'Real Time' checkbox and a 'Go' button, and a text input field containing 'Hyperlipidemia'. Below this, a table lists 'IMO' (ICD-10) codes and their corresponding diagnoses. The 'Selected Assessments' section shows a table with columns for Name - Full, MRN #, FIN #, Age - Years, City, State, Zip, E-Mail, and Nbr Orders. The table contains one row of patient data.

Code	Diagnosis	SNOMED
411.0	Postmyocardial infarcti	
411.1	Intermediate coronary	
411.81	Acute coronary occlusi	
411.89	Other acute and subacu	
413.0	Angina decubitus	
413.1	Prinzmetal angia	
413.9	Other and unspecified a	
414.0	Coronary atherosclero	
414.9	Other and unspecified a	

Name - Full	MRN #	FIN #	Age - Years	City	State	Zip	E-Mail	Nbr Orders
Last Name, First Name	987-65-4321	987-65-4321	57	Anytown	US	12345	patient@email.com	4

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Evaluation/Diagnosis - EHR functions to remind HCPs

Clinical Decision Support (CDS), alerts and reminders assist in the evaluation/diagnosis of patients

Recommendations (0 Overdue 7 Due)	
All Visits	
Expectation	Next Due
Alcohol Misuse Screen	06/28/12
Cervical Cancer Screen (if sexually active)	06/28/12
Depression Screen	06/28/12
HIV Screen (if sexually active)	06/28/12
STD Counseling (if sexually active)	06/28/12
Tetanus Vaccine	06/28/12
Tobacco Use Screen	06/28/12

▼

Edema

▲

Unprioritized

[Details](#) Code: R60.9 Noted: 04/04/2017 Share w/Pt: ☐

[Create Overview](#)

[Create Current Assessment & Plan Note](#)

Change Dx

Resolve

Steps in the Buying Process	Selected EHR and Health/IT Function
Origination	• Patient Lists • Patient Outreach
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Treatment Choice - EHR functions to standardize care

Clinical Guidelines and Order Sets enable evidence based treatment pathways

File Edit Default View Tools Admin Utilities Window Help

Care Guidelines Page 1 of 4

Panel Control: Toggle Cycle

Measure status: OQM Check

Clinical Guidelines

Show: ☒ Orderables ☒ Recommended care (medications) ☒ Recommended care (non-medications) ☐ Additional

Guideline	Next Due	Status	Last Completed
<input type="checkbox"/> Cognitive assessment (≥ 43 Year, 63 Years and up)	10/26/2014	due	10/26/2013
<input type="checkbox"/> Depression screening (≥ 2 Year, 12 Years and up)	10/26/2014	due	10/26/2013
<input type="checkbox"/> Influenza vaccine (≥ 1 Year, 0 yrs and up)	10/26/2014	due	10/26/2013
<input type="checkbox"/> Dental exam (≥ 2 Year, 0 yrs and up)	01/06/2015	due	01/06/2014
<input type="checkbox"/> Dilated eye exam (≥ 1 Year, 0 yrs and up)	01/26/2015	due	01/26/2014
<input type="checkbox"/> Foot exam (≥ 1 Year, 0 yrs and up)	02/01/2015	due	02/01/2014
<input type="checkbox"/> Lipid panel (≥ 1 Year, 0 yrs and up)	06/26/2015	due	06/26/2014
<input type="checkbox"/> Hemoglobin A1C (≥ 7 Months, 0 yrs and up)	10/10/2015	due	07/10/2013

Add Orderable Add/Update Reminders Page 1 of 4 Place Order

ORDER SET

HEART FAILURE

FOR PHYSICIAN USE ONLY

Heart failure

Please select a risk category

- ☐ RISK CATEGORY: NO RISK/LOW RISK SURGERY
Routine, ONGOING, Starting 3/20/14, Age less than 40, No additional risk factors
- ☐ RISK CATEGORY: AT RISK MEDICAL
Routine, ONGOING, Older patients (age greater than 40) or those with restricted mobility

PACU

PACU

- ☒ Vital Signs per Protocol
STAT, ONGOING, Starting Today at 1045 Until Specified
- ☒ Neurovascular Checks with Vital Signs
STAT, ONGOING, Starting Today at 1045 Until Specified
- ☐ Complete Blood Count (CBC)
STAT, ONCE, Starting 3/20/14

GENERAL POST OP ORDERS

ADMIT

- ☐ Admit to Inpatient
- ☐ Refer for Observation
- ☐ Outpatient in a Bed

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Brand Choice - EHR functions for ePrescribing

Favorites, Pick Lists and Formulary Indicators drive brand choice

Add New Rx **Add New Order**

Rx Type: Search: ☒ = Standard Show ☒ Standard ☐ My Favorites

Find: ☒ Real Time ☐ Show Discontinued

Dt	F	Strength	Form.	Take	Route	Freq.	Duration	Disp.	Refill
		20 MG	Tablet	1 tablet	Orally	Once a day	30 day(s)	30	
		10 MG	Tablet	1 tablet	Orally	Once a day	30 day(s)	30	
		40 MG	Tablet	1 tablet	Orally	Once a day	30 day(s)	30	
		5 MG	Tablet	1 tablet	Orally	Once a day	30 day(s)	30	
		2.5 MG	Tablet	1 tablet	Orally	Once a day	30 day(s)	30	
		30 MG	Tablet	1 tablet	Orally	Once a day	30 day(s)	30	
			Powder	as directed					

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Name	Formulary Status
Product 1	Preferred Level 3
Product 2	Preferred Level 1
Product 3	Preferred Level 1
Product 4	On Formulary, Non-Preferred
Product 5	Non Formulary
Product 6	Unknown

Name	Formulary Status
Product 1	\$ 4 copay
Product 2	\$30 Copay
Product 3	\$30 Copay
Product 4	\$80 Copay
Product 5	50% Co-insurance
Product 6	Unknown

Fulfillment - EHR functions for prior authorization

Majority of prescriptions are electronic... ePA is removing barriers

The screenshot shows a web-based form titled "ePA Questions - Levenox PA Form". At the top, a warning message states: "Please provide all information requested. Failure to complete this form in its entirety may result in delayed processing or an adverse determination for insufficient information".

The form contains the following fields:

- Patient:** 11, 11
- Medication:** M2 Calcium
- Requested by:** Manager, Mr. System

The main section is titled "Question: (2/9) Indicate whether the patient exhibits an inadequate response to treatment with at least a 30 day trial of any of the following medications (select all that apply)".

The "Answer:" section shows a checked checkbox for "Flovent". Below this is a text area for "Additional Comments:". Further down, there are checkboxes for "Asmanex" and "Qvar", each followed by its own "Additional Comments:" text area.

At the bottom of the form, there is a green progress bar and three buttons: "<< Discard & Start Over", "Save and Finish Later", and "Next >>".

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Compliance/Adherence - EHR functions for patient engagement

Patient Education and Engagement are now delivered through the EHR. Providing quality branded and unbranded materials is welcomed and allowing unbranded modifications is helpful. (Your company is partnering with the practice in communicating to the patient.)

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Medicare Wellness Recommendations for:

Health Advice - The items that apply to you are marked below.

Current Medications
Macrobid (100MG Capsule, 1 capsule(s) Oral every 12 hours for 7 days with food for urinary tr, Taken starting 03/30/2017) Active.
Lisinopril (30MG Tablet, 1 Tablet Oral daily, Taken starting 03/31/2017) Active.

Weight Management
Your Body Mass Index (BMI) today was:
22.6 kg/m²

This falls into the range of...

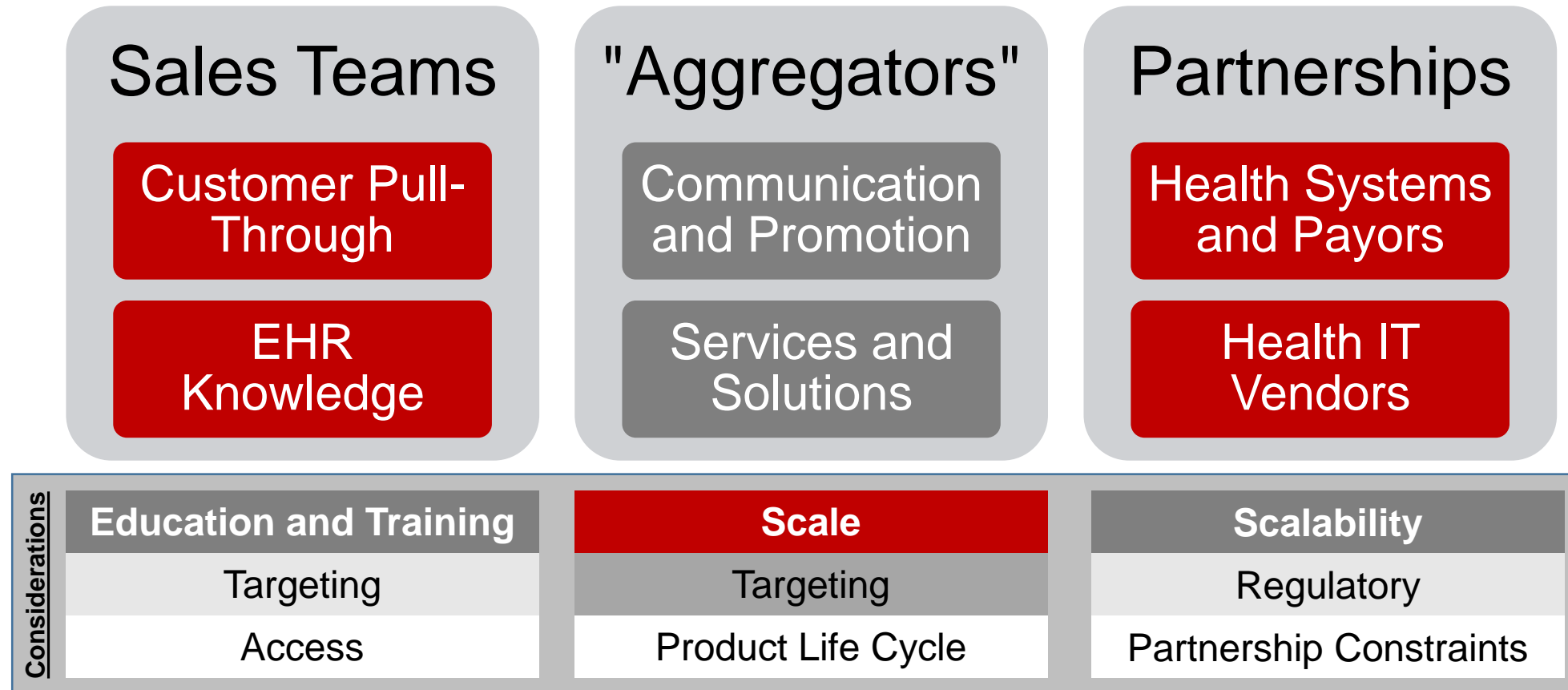
☐ Low (<18) - Please work on increasing your health caloric intake to bring your weight u range.

☒ Normal (18 - 25) - Please maintain your current weight

Patient Education

Patient Education was published to portal for

Three Approaches

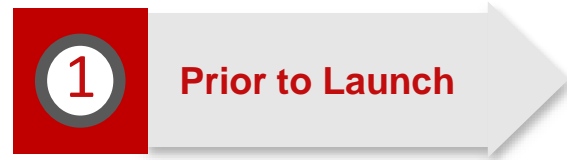


POCP EHR Launch Action Plan

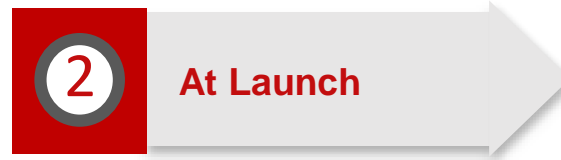
a Tested Sequence Timed to Launch Milestones

POCP Has Executed Over 105 Brand Launches for Many of the Leading Pharmaceutical Companies

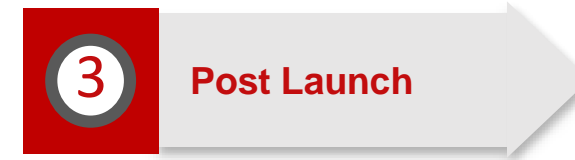
Point-of-Care Partners EHR Navigator®



- Map EHR Landscape to Brand Strategy and Target Market
- Research & Build EHR Timetable
- Prepare Compendia Drug File Submission
- Develop Internal Plans and Communications
- Develop Customer Resources
- Develop and Execute Training Curricula
- Prepare Helpdesk

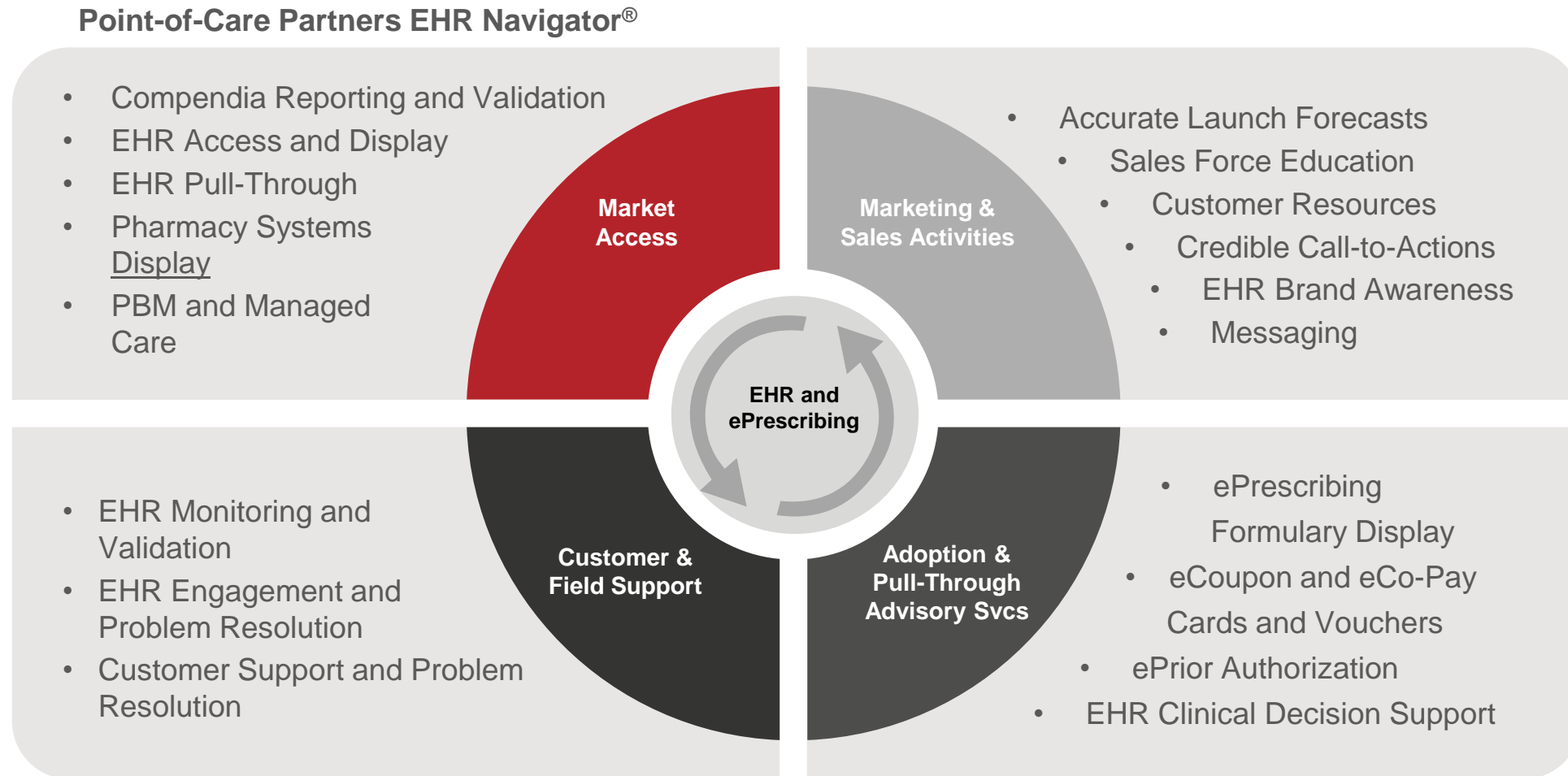


- Submit Compendia Drug File
- Engage EHRs
- Monitor & Communicate Updates to Timetable
- Launch Helpdesk, Track & Resolve, FAQs



- EHR Pull-Through
- Brand Awareness EHR Messaging
- Target Specific Patients with Clinical Decision Support
- Improve EHR Patient Engagement & Compliance
- ePrescribing Formulary Pull-Through
- eCoupon and Co-Pay

Comprehensive and Multifaceted EHR Engagement Program





www.pocp.com