Are Medical Scribes Right for Your Practice?

Washington State / Oregon Medical Group Management Annual Meeting - May 7, 2015

PRESENTED BY

WARREN JOHNSON, FOUNDER & CHIEF EXECUTIVE - SCRIBE-X NORTHWEST
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SAMANTHA BEATTY, DIRECTOR OF OPERATIONS - WOMEN’S HEALTHCARE ASSOCIATES
JILL ARENA, MANAGING PARTNER - HEALTH E PRACTICE SOLUTIONS
Presenters

Scribe-X Northwest

Warren Johnson, MN, RN (ret.)
Founder and Chief Executive, Scribe-X Northwest
- Founder of STAT Medical Services, Inc. (largest medical staffing company in the Pacific Northwest)
- Founder of ShiftWise (largest medical staffing Vendor Management Software company in the U.S.)
- Passion for refocusing the medical scribe industry around quality

Women’s Healthcare Associates

Samantha Beatty, CMPE
Director of Operations, Women’s Healthcare Associates, LLC
- 23 years practice operations experience – primary care and specialty care
- Expertise in practice start-up
- Clinician and staff recruitment
- Team development and strengths-based leadership

Scribe-X Northwest

Joshua Hurwitz, MD
Founder & Medical Director, Scribe-X Northwest
- Board-certified ER physician practicing in the Portland metro area
- Medical degree from Oregon Health and Science University
- Residency at Albany Medical College, NY
- Former software engineer

Health e Practices

Jill Arena, FACMPE
Managing Partner, Health e Practices
- Extensive experience in practice start up, workflow improvement and revenue cycle management
- EMR implementation expert
- Practice operations assessments
Medical Scribes - In The News

Studies cite impacts on the following:
- Physician and patient satisfaction
- Revenue
- Chart quality

In Praise of Medical Scribes
An old-fashioned remedy for the ills of electronic record-keeping.

By ALAN J. BANK
April 6, 2014 5:52 p.m. ET

We often think that a complex problem (such as health care in the U.S.) requires a complex solution (Obamacare). Yet some important issues that are not adequately addressed by the current health-care overhaul include decreased patient and physician satisfaction, increased access to care, and the increasing cost of care. For instance, the electronic medical record-keeping that has been mandated is part of a new health-care policy that has complicated the lives of doctors and has caused confusion and frustration. But medical scribes are a simple and effective way to solve this problem.

An ED scribe program is able to improve throughput time and patient satisfaction - 76%

The American Journal of Emergency Medicine, March 31, 2014

Scribes Are Back, Helping Doctors Tackle Electronic Medical Records

by LAUREN SILVERMAN
April 21, 2014 2:42 AM ET
1. 5 Key Questions Answered
   • *Are Medical Scribes Right For Your Practice?*

2. Case Study #1 – Samantha Beatty
   • *Setting A Program Up For Success*

3. Case Study #2 – Jill Arena
   • *Revenue Cycle Results*

4. Q & A
5 Key Questions –
Are Medical Scribes Right for Your Practice?

1. What is the genesis / evolution of medical scribes?
2. What do medical scribes actually do?
3. What problems medical scribes solve?
4. What results can you expect?
5. When does it make sense to have a medical scribe?

If it makes sense, what are next steps?
Medical scribes were adopted to better manage variable patient flow in Emergency Departments. Widely utilized for more than a decade.

**Key Challenges for ED:**
- Emergency Rooms are highly variable in terms of patient needs and volume
- The goal is to quickly triage and empty waiting rooms
- Results – increased RVUs, Press Ganey Scores, time savings, physician satisfaction

*Problem Solved.*

Our healthcare delivery systems already have developed complex systems to “leverage” physicians’ time and expertise. Medical scribes are a powerful resource as well.
Scribes have been successful in emergency departments. However, successful models differ in medical clinics:

- Assessment driven model
- Requires more focused scribe selection
- Requires customized training materials
- Requires 1:1 or 1:2 staffing model

One size fits all approach doesn’t fit the needs of the clinic
Q1 What is the genesis / evolution of medical scribes?

* For illustrative purposes only
Q2 What do medical scribes actually do?

**Typical activities of a Medical Scribe:**

- Chart Preparation
- Shadow
- Pull up previous visit information
- Cue physician – collaboration
- Take dictation – edit notes
- Order entry
- Finalize notes prior to physician approval
Q3 What problems can medical scribes solve?

“The primary reason we engage medical scribes is to improve physician satisfaction. It’s a life changer.....” Sarah Ahlschlager, Administrator, Sherwood Family Medicine

- Shift the documentation burden
- Restore focused patient visit
- Reduce overall time in the EMR
- Eliminate dictation
Q3 What problems can medical scribes solve?

- Improve charge capture
- Increase the number of visits each week
- Ensure timeliness of patient records

*Improve Clinic Revenue*
Q3 What problems can medical scribes solve?

**Improve Compliance / Reduce Risk**

- Assure the patient visit is fully documented
- Ensure essential charting elements are being completed for optimal coding
- Meet meaningful use requirements
- Chaperone
- Timely completion of patient visit – real-time
Q3 What problems can medical scribes solve?

- Reduce appointment wait times
- Reduce waiting room time
- Restore more face-to-face time during the visit
- Improve quality of the follow-up
What problems can medical scribes solve?

Key Challenges for the Clinic

- **In primary care** – complexity
- **In specialties** – speed
- Deliver high quality care and stay on time
- Performance – mixed depending on the solution used

“The differences in how physicians practice aren’t obvious until you work side-by-side with them in a clinic.” *Daphnee Berteau-Pavy, Scribe Educator*
What results can you expect?

The best results come from customized outsourced solutions

### Key Metrics

<table>
<thead>
<tr>
<th>Metric</th>
<th>Description</th>
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</thead>
<tbody>
<tr>
<td>Time Savings</td>
<td>1 – 4 hours / day, &lt;60 minutes</td>
</tr>
<tr>
<td>Productivity</td>
<td>15 – 79%</td>
</tr>
<tr>
<td>Physician Satisfaction</td>
<td>Consistently High</td>
</tr>
<tr>
<td>Patient Satisfaction</td>
<td><strong>Trends up</strong> Rarely decreases</td>
</tr>
<tr>
<td>Chart Quality</td>
<td>More complete, more compliant</td>
</tr>
<tr>
<td>Timeliness</td>
<td>Very, consistently complete same day</td>
</tr>
</tbody>
</table>

### Financial Impact

<table>
<thead>
<tr>
<th>Metric</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Breakeven</td>
<td>17 days</td>
</tr>
<tr>
<td>Return on Investment</td>
<td>2 – 10x</td>
</tr>
<tr>
<td>Revenue</td>
<td>Net gain $44K - $384K</td>
</tr>
<tr>
<td>Charge Capture</td>
<td>Increase up to 27%</td>
</tr>
<tr>
<td>Risk Mitigation</td>
<td>Chaperone, nothing is missed</td>
</tr>
<tr>
<td>Dictation</td>
<td>Eliminated</td>
</tr>
</tbody>
</table>
### When it makes sense
1. Seeking quality of life
2. Charting >2 hours per day
3. Want to return focus to patient
4. Patient back log
5. See more patients
6. Increase clinic revenue
7. Post-pone retirement

### When it doesn’t make sense
1. Doesn’t want to change workflow
2. Wants the documentation to sound exactly like dictation
3. Doesn’t want to coach a scribe
4. Very difficult personalities
5. Wants program to pay for itself, but doesn’t have enough patients
6. Works in the clinic <12 hours per week
Pulling it all together

**Dr. Knopf - Case Study**
**Internal Medicine**

**Why he uses a scribe**
1. Improve quality of life / pursue hobbies
2. Get charts completed on time
3. Capture key charting elements
4. See more patients
5. Increase clinic revenue
6. Post-pone retirement

**Impact on his practice**
1. Leaves clinic at 5:15 pm every day (doesn’t take work home)
2. All charts completed on time
3. Charge capture increased 27%
4. Sees 10 more patients per day (50% increase)
5. Clinic revenue increased by ___
6. Having fun practicing again. Not retiring any time soon
Case Study # 1
Implementing a Scribe Program

Key Learnings

SAMANTHA BEATTY, CMPE

IMPLEMENTED SCRIBE PROGRAMS AT THE VANCOUVER CLINIC AND WOMEN’S HEALTHCARE ASSOCIATES, LLC
Case Study # 1
Implementing a Scribe Program – Key Learnings

How do you ensure that you set up a successful scribe program?

Step 1: Identify clinicians who will benefit the most:

• Full panels
• Open to doing work differently
• Spend a lot of time documenting
• Inefficiency with the EMR
• Open to giving regular feedback to the medical scribe
Case Study # 1
Implementing a Scribe Program – Key Learnings

Step 2: Set clear expectations for clinicians:

• Timeline for implementation and training
• Minimum 6 months experience documenting in the EMR
• Review plan for how they will “pay” for the scribe after initial training
• Baseline data
  o Number of patients seen per day
  o Time spent documenting
Case Study # 1
Implementing a Scribe Program – Key Learnings

Step 3: Understanding your EMR’s work flow for CPOE until scribes are certified:

Certification Process for Scribes
• Review initial materials
• Take certification exam
• Complete 200 hours of scribing
• Secure certificate

Workflow during 200 hours of scribing
• First 100 hours – with preceptor and clinician
• Second 100 hours – solo with clinician
Case Study # 1
Implementing a Scribe Program – Key Learnings

Step 4: Team communication:

• Communicate early
• Help MAs understand the role of a scribe
• Determine who will introduce the scribe to the patient
• Shift chart prep from MAs to scribes as soon as possible
• Look for opportunities for scribes to do other supportive clerical or administrative work when they have “down time”
Case Study # 1
Implementing a Scribe Program – Key Learnings

Step 5: Five strategies to pay for the service and optimize ROI:
1. Increase patient visits per clinic day
2. Increase patient contact hours by 1-hour per clinic day
3. Shorten the length of the visit to accommodate more patients in the same hours
4. Increase the number of patient visits during the implementation phase
5. Clinician agreement that acknowledges commitments
Case Study # 1
Implementing a Scribe Program – Key Learnings

Our measurable outcomes:

• Clinician Satisfaction
• Improved access
• Increased efficiency
• Patient Satisfaction
Case Study # 1
Implementing a Scribe Program – Key Learnings

Patient Satisfaction Feedback:

“...I especially appreciated the scribe so that the physician’s attention was fully directed to me -- the patient -- and not the computer...”
Case Study # 2
Revenue Impact of a Medical Scribe Program

JILL ARENA, FACMPE
Case Study # 2
Revenue Impact of a Scribe Program

*Practice Demographics*

- 5 provider practice, in business for 23 years
- Opened second location in March 2014
- Services:
  - Digital x-ray
  - In-house lab
  - Cardiac stress testing
  - Certified by the AADE as a Diabetic Center of Excellence
- Two physicians, Two FNPs, and One PA-C
  - Founding physician in practice for over 35 years
  - Second physician joined the practice 11 years ago
Case Study # 2
Revenue Impact of a Scribe Service

Why Medical Scribes?

• Try something new!
• Initial goals for scribe program:
  o Increase patient visits
  o Increase patient satisfaction
  o Decrease the amount of time spent on the computer
  o Work down patient backlog
Case Study #2
Revenue Impact of a Scribe Service

Implementation Data

• Physician #1 After Scribes:
  o Changed most appointments to 15 minutes
  o 53% increased patient visits per day (from 15 to 23)
  o Monthly production increased 37%
  o Length of work day stayed the same
  o Patients are happier and feel that the quality of their visit has improved
  o Visit summaries are complete and actually a value add
  o Desktop is better 😊
Case Study # 2
Revenue Impact of a Scribe Service

Implementation Data

- Physician #1’s experience was so great that Physician #2 added a medical scribe
- Physician #2 after implementing medical scribes:
  - Monthly production increased 36%
  - Charting quality increased dramatically
  - Physician removed his “admin” time from his schedule
  - Chart notes are completed when he leaves the exam room
  - Added back a 5th day in the office because….

“This is so much fun! I will never not have a scribe”
**Case Study # 2**
**Non-Revenue Impact of a Scribe Service**

*Implementation Data*

- Case Study Clinic After Medical Scribes
  - Monthly production increased 22% YOY
  - Patient surveys reflect they feel the physician listens to them more
  - Chart documentation has improved
  - Provider job satisfaction has improved
  - Added “same day” appointment slots
Case Study # 2
Revenue Impact of a Scribe Service

BEFORE SCRIBES

Charges: $285,841
Visits: 2,918
Avg. Charge / Visit: $97.99

AFTER SCRIBES

Charges: $398,031 (39% increase)
Visits: 3,759 (29% increase)
Avg. Charge / Visit: $105.89 (8% increase)
Case Study # 2
Revenue Impact of a Scribe Service

Cost, Quality & Access

• **Cost**
  - Training time slight impact to schedule at first
  - Salary + benefits

• **Quality**
  - Physicians feel like their workload has decreased
  - Chart documentation has improved
  - Patient satisfaction has improved
  - Visit summaries are more complete – it’s now a value-add document

• **Access**
  - Forced to add “same day” appointments
  - Physician #2 added another work day
  - 53.8% increase in patient visits/day avg. for clinic (26 to 40)
Q&A

Question 1 – How do they fit in the exam room?

Question 2 - What are the most common objections?

Question 3 – What qualifies a scribe to do this job?

Question 4 – If I’m interested what are my next steps?
Presenters’ Contact Information

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