

HYPERTENSION BEST PRACTICES SYMPOSIUM

Hypertension Best Practices

RIVERSIDE MEDICAL GROUP
NEWPORT NEWS, VA



Medical Group



ORGANIZATION PROFILE

Based in Newport News, Virginia, Riverside Medical Group (RMG) is one of the largest and most diverse multispecialty group practices in the state. The organization, which serves the Hampton Roads area, comprises 150 physician practices staffed by 450 providers in 28 specialties. The group provides approximately 1.5 million patient visits annually. In 2007, 26 RMG physicians earned recognition by the National Committee for Quality Assurance (NCQA) for delivery of quality cardiovascular and cerebrovascular care.

RMG uses the Centricity Physician Office electronic medical record system and SciHealth software for designing scorecards.

PROJECT SUMMARY

The RMG project was initiated to make hypertension a higher priority for primary care physicians, who were distracted with other responsibilities, and to support the group's care standardization goals.

GOALS AND OBJECTIVES

After the Quality Committee agreed to make hypertension a top goal for the group, the physician champion (vice president of clinical innovation) assembled a project team that drew up objectives for improved management of simple HTN:

- Create a database that automatically extracts and stores pertinent HTN data from the EMR
- Create an HTN scorecard within SciHealth and import the data into the scorecard on a monthly basis

- Provide monthly reports to providers
- Conduct educational sessions on JNC 7 guidelines, and train providers and practice personnel on the use of forms and tools within the EMR to facilitate appropriate management of HTN
- Use automated calling to follow up with patients who have not been actively seen in practice for HTN management

HTN POPULATION

Patients with simple HTN: n = 41,408

Demographics

Age <65	45%
Age 65 and over	55%
Female	57%
Male	43%

Major ethnic groups:

Caucasian (60%); African-American (26%)

Baseline BP readings

<140/90	57%
Stage 1 HTN	30%
Stage 2 HTN	13%

IMPROVEMENT MODEL

At the time RMG began its HTN initiative, blood pressure control was not a top priority for the group. Primary care physicians were overwhelmed with other requirements, such as a planned diabetes care pathway that was slated to be rolled out in 2011. Several events changed this situation.

The vice president of clinical innovation lobbied the Quality Committee to make HTN control a strategic goal. Physician compensation was being restructured, and the doctors agreed to begin including HTN outcomes in the formula. Also, RMG joined the American Medical Group Association's HTN collaborative to learn new approaches for better HTN management.

The HTN project focused on staff competency in BP, use of the EMR and SciHealth to generate timely reports on practice results for HTN, and encouragement of home BP measurement by patients. RMG uses the HEDIS HTN measurement and the definition of *active patient* as agreed upon by the AMGA HTN collaborative.

COMMUNICATIONS

Internal communication with providers and staff takes several forms. The SciHealth monthly scorecard provides HTN results by practice, provider, and patient. The group's internal electronic newsletter provides highlights and successes regarding the project.

For patients, RMG offers an online tool called myHealth eLink, which enables secure communication between patients and providers. The project team plans to set up e-mail reminders about HTN and send health tips via the system. The group also uses Phytel automatic calling to contact HTN patients about appointments.

LEADERSHIP SUPPORT

The vice president of clinical innovation is the physician champion for HTN and head of the project team. The group's leadership team has funded several positions that support HTN control: an RN who travels to the practice locations to evaluate their prioritization of HTN management; and a director of quality and education to update staff on best practices.

In addition, the group's leadership is considering establishing a metabolic weight center that would include HTN patients, many of whom have a body mass index of 30 or 35.

STAFF COMPETENCY

Competency in taking BP was an important aspect of the program. Medical assistants were required to demonstrate their competency, and the program may be expanded to nursing staff. All new employees are evaluated for BP technique and other skills before hire. Existing medical assistants are tested by teams of RNs who travel to the practice locations and conduct certifications.

This training is part of the group's overall standardization initiative as well as the HTN management effort.

HTN SCORECARD AND REPORT

Reporting is an important tool for supporting physicians in their ongoing management of HTN and for creating friendly competition that encourages improvement. A scorecard generated from the EMR lists all RMG locations and indicates where each practice falls: below, at, or above the target percentage of patients at goal. This report also drills down by physician and by individual patient.

Another tool is a Hypertension Management report sent to physicians and office managers each month. This report lists all HTN patients, their most recent appointment and next scheduled appointment, and whether they are at goal for BP. Using a best practice from the AMGA collaborative, the form highlights non-compliance in red and compliance in green so providers can see at a glance which individuals need to be scheduled or contacted. Previously, it was difficult for physicians to recall and monitor a patient's previous BP and last appointment; this simple, intuitive report serves as a handy reminder.

PATIENT COMMUNICATIONS AND EDUCATION

The myHealth eLink online communications tool is a highly secure, web-based system that enables patients to communicate with their physician team 24 hours a day, 7 days a week. Developed by a Riverside Medical Group physician, this system enables patients to request non-emergency services including routine appointments, prescription refills, referrals and billing assistance, and receive diagnostic test results.

Patients can also access their electronic medical record and obtain diet and other health information via the EMR.

RMG plans to add e-mail reminders about appointments and home BP monitoring to this system, as well as proactive health tips and advice for patients.

OUTCOMES

RMG's HTN initiative has achieved its goal of 71% of HTN patients at goal of <140/90 (the HEDIS 90th percentile).

Hypertension has been added to the internal quality dashboard—updated weekly to assist the providers with managing patients with hypertension. Staff are being educated on how to monitor this system and contact patients for blood pressure monitoring.

Providers have requested a “Hypertension Management” form that facilitates following the RMG hypertension pathway, similar to the one that was developed for diabetes. This will include a care plan aggregated across comorbid conditions.

OVERCOMING BARRIERS

- Lack of practice knowledge about performance improvement methods
- Lack of time/resources within the practice
- Continuing of patient education

LESSONS LEARNED

- Performance improvement on any chronic disease requires a multi-faceted approach.
- Reporting results, in itself, can only get you so far.
- Clinical skills must be evaluated annually. You cannot assume everyone knows how to take blood pressures appropriately.
- Staff education on the importance of accurately documenting vitals and on the importance of patient education was key.



Provided as an educational service by AMGA. Daiichi Sankyo, Inc. provided financial support for development of the materials but did not provide input into the content or the design of the materials.

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