# Identifying Open and Active Patients using Azara Data



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Care

#### **Azara Introduction**



- Azara is a software vendor focused on FQHCs and population health analytics
- The Primary Care Association in NY, CHCANYS, has developed the Center for Primary Care Informatics (CPCI)
  - A priority goal in the CHCANYS Strategic Plan
  - To support improvements in quality, patient and population health outcomes
  - To help control costs
  - To support growth & success in a changing environment
- + As a central CPCI strategy, CHCANYS has implemented a statewide reporting and analytics solution for NY's FQHCs
  - The Azara DRVS product, rebranded as CPCI, is the analytic engine
  - Collects and normalizes data from multiple sources to create an integrated database for enhanced analysis & reporting
  - Provide actionable data and valuable reporting at individual health centers

#### HIV Reporting / HIVQual at FQHCs



A partnership was formed between the AI, CHCANYS and Azara Healthcare in early 2015

The NYSDOH, **AIDS Institute** Azara **CHCANYS** Healthcare

#### eHIVQUAL - Particpating Center



- 1. Acacia Network
- 2. APICHA Community Health Center
- 3. Bedford Stuyvesant Family Health Center
- 4. Betances Health Center
- 5. Brightpoint Health
- 6. Brownsville Community Health Center
- 7. Callen-Lorde Community Health Center
- 8. Community Health Center of Buffalo
- 9. Cornerstone Family Healthcare

- 10. Harlem United Health Center
- 11. Housing Works East New York Community Health Center
- 12. Hudson River Healthcare
- 13. Lutheran Family Health Centers
- 14. Morris Heights Health Center
- 15. Open Door Family Medical Center
- 16. Settlement Health
- 17. Syracuse Community Health Center
- 18. Whitney M. Young Health
- 19. William F. Ryan Community Health Network

## **Azara HIV Reporting**



- + Azara presents data in variety of ways including Dashboards, Scorecard Reports, the Measure Analyzer and Registries
- The following page lists measures developed for the AIDS Institute and in support of eHIVQUAL
- The following pages illustrate some examples of Dashboards and Registries
  - The application is flexible allowing for custom configuration to share information and results in the manner most suited to your center, users and needs

#### **HIV Reporting Measures**

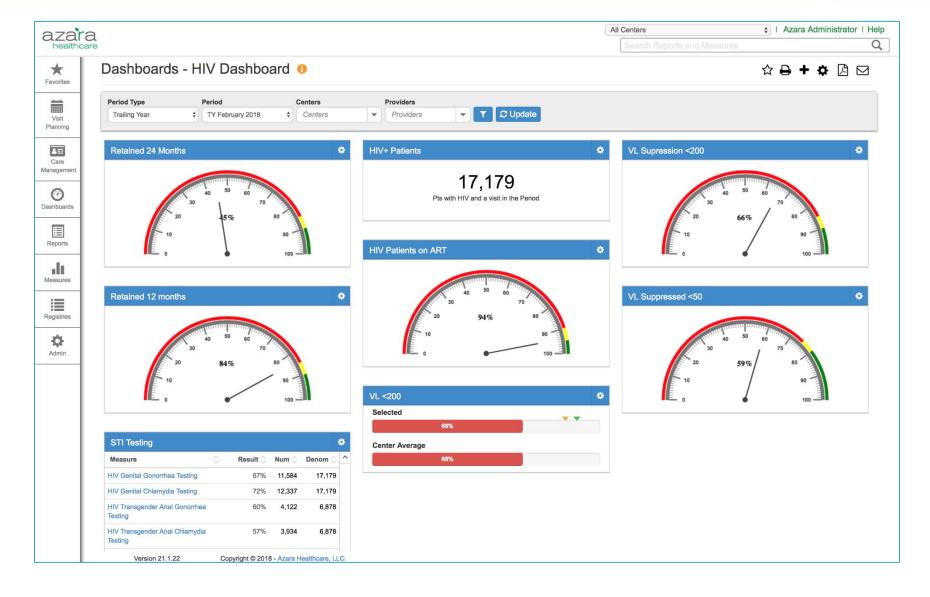


- 1. New Patient Visit Frequency
- 2. Visit Frequency (12 Month)
- 3. Visit Frequency (24 Month)
- 4. Viral Load Monitoring
- 5. Viral Load Suppressed < 200
- 6. Viral Load Suppressed < 50
- Viral Load Always Suppressed < 200</li>
- Viral Load Always Suppressed < 50</li>
- 9. CD4 Monitoring
- 10. PCP Prophylaxis

- 10. Baseline Resistance Test
- 11. Genital Chlamydia Testing
- 12. Anal Chlamydia Testing
- 13. Chlamydia Treatment
- 14. Genital Gonorrhea Testing
- 15. Anal Gonorrhea Testing
- 16. Pharyngeal Gonorrhea Testing
- 17. Gonorrhea Treatment
- 18. Syphillis Testing
- 19. Syphillis Treatment

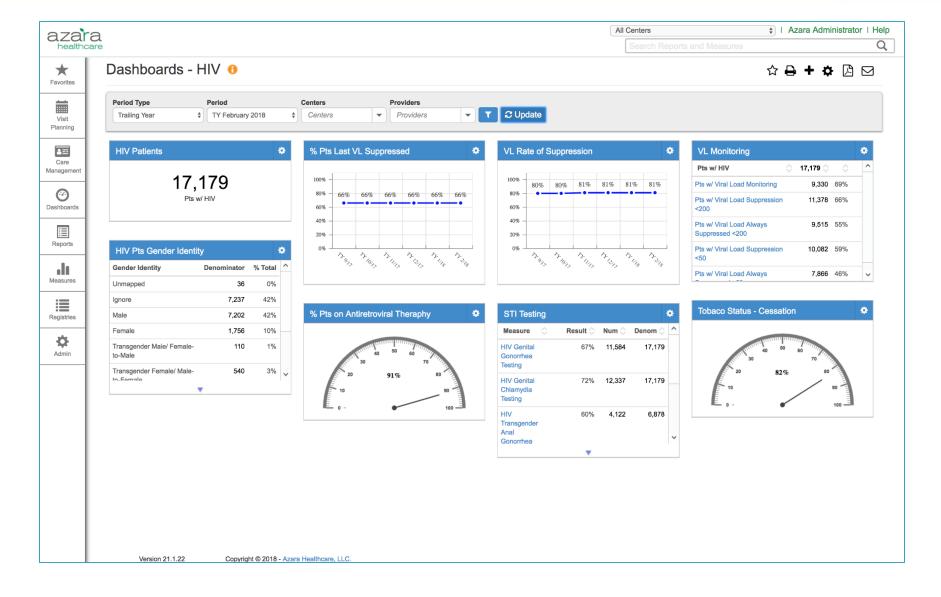
### Sample Dashboard #1





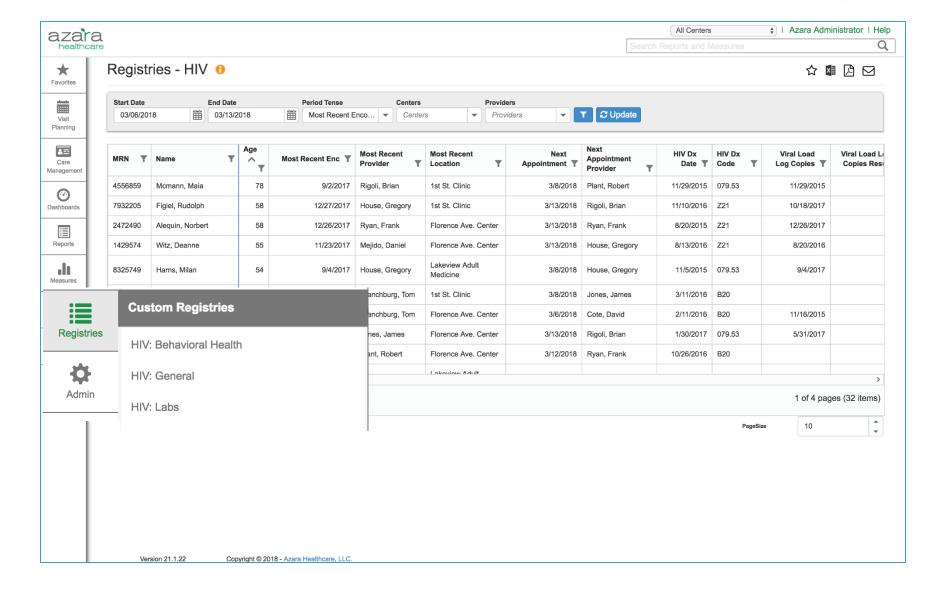
#### Sample Dashboard #2





# Sample Registry







Open

Use Azara Data to identify open patients (1175)

Active

Use internal registry data to identify active patients by "G-code" for that year. (995)

Compare

Create two lists in excel spreadsheet and filter

Engaged?

Internal report using structured data

- No longer contacting patients directly
- Put in "sticky" If no data..

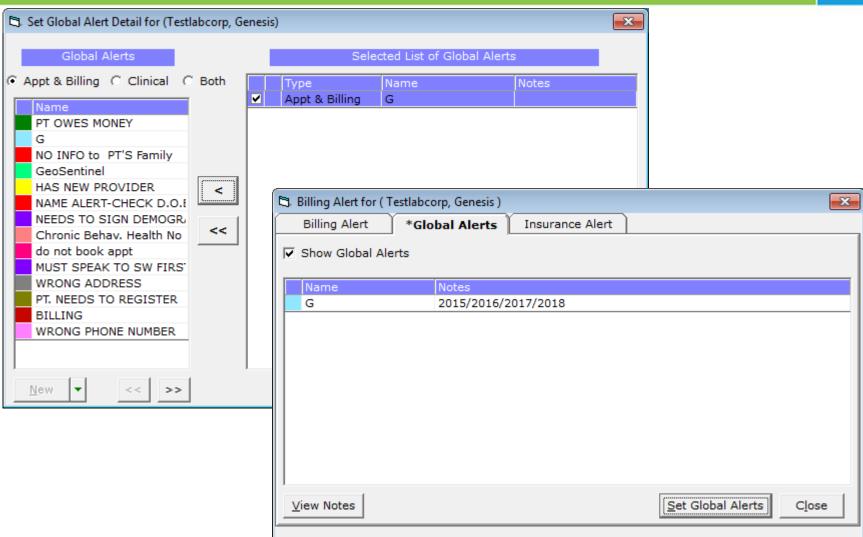
#### G-code



- + A code in our "Global Alert" that we can update yearly
- + Allows us to identify active patients
- + Requires manual entry every year.
- Audited several times a year by report that shows people who have visit coded for HIV Diagnosis and do not have G-code

#### G-Code

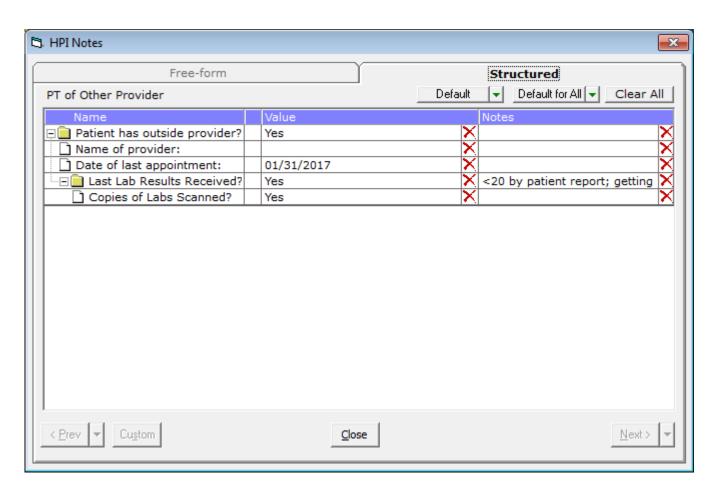




#### Structured data



+ "Patients of other provider"



# Refining algorithm



- Creating one master list of open patients and one master list of active patients.
- + Feedback to both of what works and what doesn't.

#### **Pitfalls**

HRHCare COMMUNITY HEALTH

- + How do you make the lists all line up?
- + Patients didn't want to be called directly if they weren't engaged
  - Most patients who did not come to our center did so because of confidentiality issues
  - Working on provider end to identify patients
    - Best practices meetings
    - Work with site medical directors
    - "sticky note" and putting in chief complaint prior to visit to remind providers

#### Coding errors

Encouraged better coding and worked with Azara to troubleshoot

#### What are next steps?



#### + Cumbersome work-around

- Discussions with Azara to identify "Active patient cohort"
  - Would be able to filter by cohort and generate list of patients who were Open but not Active

#### Improving data

 Identification within our system of patients who are patients of other providers and continued discussion with providers to complete structure data

#### **THANK YOU!**

# **Christine Kerr and Greg Augustine**



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