## Optimizing eConsults with NYC H+H

### **Executive Summary**

New York City Health + Hospitals (NYC H+H) is the comprehensive public safety net health care system of New York City. As the largest of such systems in the nation, NYC H+H serves over one million patients annually, a majority of whom are from marginalized and underserved populations. The health care system provides its patients with integrated medical services across a multitude of hospitals, neighborhood health clinics, long-term care facilities, nursing homes and home care. As part of its portfolio, H+H boasts access to a variety of specialty care services (e.g., cardiology, neurology, orthopedics etc.). However, patient wait times for a given specialty appointment can be exceedingly long, sometimes surpassing 90 days. Such extensive delays can negatively impact patient clinical outcomes and generate dissatisfaction among patients and providers alike.

To help combat these lengthy wait times, NYC H+H implemented the eConsults (electronic consultations) program in 2017 with the overarching goal of increasing patient access to specialty services. An eConsult is an asynchronous electronic communication between a primary care provider and clinical specialist which can be used to indirectly initiate specialist level care. If executed effectively, the eConsult clinical tool has the potential to mutually benefit all stakeholders involved in the care pathway while creating a more efficient health care platform. These key stakeholders include primary care providers, clinical specialists, and the patient population. The potential benefit of the eConsult system has been acknowledged by hospital leadership and to that effect, an effort has been placed on expanding the program over the past several years. Despite this effort, the eConsult system remains underutilized when compared to other health systems. Furthermore, the health system has yet to establish what constitutes an appropriate use of an electronic consultation.

#### WHAT WE DID

We developed a set of recommendations and strategic guidelines aimed at successfully improving the eConsults system. We feel that implementation and adoption of these principles will ensure appropriate utilization by providers in a way that increases patient access to specialty care. These guidelines were synthesized via an in-depth analysis of three primary sources: historical eConsult utilization data, clinical provider interviews and an extensive literature review. Our analysis resulted in four primary recommendations for H+H to successfully improve its current eConsult system. These include fostering learning and development, adjusting the referral/eConsult interface, improving staffing conditions, and monitoring overall progress. Each respective guideline consists of various initiatives that the health care system should implement to improve the eConsults program. These initiatives were categorically rated on a feasibility and impact matrix. Using this matrix, we recommended the hospital system adopt these initiatives in two waves, the first of which is focused on those that are highly feasible and highly impactful.

# A COLLABORATIVE CASE STUDY SPONSORED BY COLUMBIA UNIVERSITY'S H+MDS COURSE

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#### **OUR RECOMMENDATIONS**

**During Wave I,** we recommend H+H formulate guidelines and train healthcare providers to facilitate optimal eConsult utilization. Referrals should then be standardized across the health system by instituting uniform referral templates to guide PCPs and specialists on what to include in their free text spaces. Finally, the range of "urgency levels" for specialist review, should be adjusted for better prioritization of pending consults in the EMR. **During Wave II**, we suggest H+H focuses on capacity building of the staff as well as monitoring and annually evaluating the impact of eConsult utilization.

#### CONCLUSION

The electronic consultation program initiated by NYC H+H has the potential to positively impact key stakeholders throughout the hospital system in several ways. First, it has the potential of improving specialist utilization rates by reducing the number of lower acuity visits to specialists. Second, proper eConsult application would also allow primary care providers to expediently initiate a clinical care plan under expert level guidance. As a result, all clinicians involved would be working to the top of their licenses. Finally, and most importantly, eConsults may readily provide patients with the specialist level care they need and deserve. Through the implementation of our aforementioned recommendations, we believe that the hospital system can realize these benefits. By first standardizing eConsult usage and subsequently improving the utilization of the system, patients throughout the hospital network will have expedited access to specialist level care.