

■ ProVation[®] MD

Leading the Way in Procedure Documentation and Coding



With locations in Boulder, Lafayette, Longmont and Louisville, Colorado, Gastroenterology of the Rockies is growing as quickly in size as it has in reputation.

CASE STUDY

COMBINED PROVATION[®] MD/MULTICAREGIVER SOLUTION BRINGS INCREASED THROUGHPUT, SIGNIFICANT COST AND TIME SAVINGS TO GASTROENTEROLOGY OF THE ROCKIES FACILITIES

Situated on the eastern slope of the Rocky Mountains, Boulder County, Colorado is both large and diverse – the site of everything from national parks and farmland to one of the nation's largest concentrations of research laboratories and high-tech industry. As its population has grown, so too has its need for high-quality health care. In the world of GI/Endoscopy, this means one thing – Gastroenterology of the Rockies, the area's preeminent gastroenterology/endoscopy group.

Since 1984, when its first facility opened in the city of Boulder, the center has grown steadily – adding endoscopy center sites in Lafayette and, most recently, Longmont, CO. Its rapid growth can be attributed to many factors – not the least of which is the group's commitment to improving procedures, processes and, above all, patient care.



Wolters Kluwer
Health

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CASE STUDY

GASTROENTEROLOGY OF THE ROCKIES

To this end, Gastroenterology of the Rockies embraced the “paperless” initiative long before many of its contemporaries. “We wanted to spend less time juggling paper and more time focusing on patients,” said Dr. Joel Montbriand, president and managing partner of Gastroenterology of the Rockies. Dr. Montbriand and his management team went looking for an IT solution in 1999. They had three main objectives:

- 1) Embrace the Electronic Medical Record (EMR) idea and go paperless, through electronic filing for all patient records
- 2) Streamline patient information and data
- 3) Improve patient tracking through the continuum of care

What they found was a software and solution provided by ProVation® Medical, Inc. The ProVation® MD and ProVation® MultiCaregiver software suite offers hospitals and endo centers a significant return on investment (ROI) by allowing physicians to create medically rich, billing-ready, image and diagram-enhanced notes with correct CPT/ICD codes – all in minutes.

At the Longmont and Lafayette sites, ProVation MD/MultiCaregiver runs on several wireless laptops and is used by all physicians and staff for image-capture and procedure documentation. The software gathers information such as ECG, SpO2, blood pressure, and respiration levels from vitals monitors. The two facilities currently perform over 575 procedures a month – and Dr. Montbriand expects this number to hit 600 by the end of the summer. “As we continue to ramp up at the Longmont facility, our efficiencies combined with those of the software and monitors will no doubt cause this number to keep climbing,” he predicted.

General Hospital – Sample GI Note

ProVation® MD

Patient Name: Mabel Davis	Gender: F
Procedure Date: 01/02/2008 10:30:00	MRN: 584585
Date of Birth: 12/25/1972	Age: 35
Admit Type: Outpatient	Account #: 508545
Room Status: Finalist	Attending MD: John H. White

Procedure: Colonoscopy
Indications: Hematochezia, Personal history of colonic polyps
Providers: John H. White MD, Kavin P. Taylor MD (Fellow)
Referring MD: William Jones, MD
Medications: Midazolam 2 mg IV, Fentanyl 100 mcg IV
Preceptor:

A History and Physical has been performed, and patient medication allergies have been reviewed. The patient's tolerance of previous anesthesia has been reviewed. The risks and benefits of the procedure and the sedation options and risks were discussed with the patient. All questions were answered and informed consent was obtained. Mental Status Examination: alert and oriented. Airway Examination: normal oropharyngeal airway and neck mobility. Respiratory Examination: clear to auscultation. CV Examination (R/R): no murmurs, no S3 or S4. ASA Grade Assessment: P1 A normal healthy patient. After reviewing the risks and benefits, the patient was deemed in satisfactory condition to undergo the procedure. The anesthesia plan was to use conscious sedation. Immediately prior to administration of medications, the patient was re-assessed for adequacy to receive sedatives. The heart rate, respiratory rate, oxygen saturations, blood pressure, adequacy of pulmonary ventilation, and response to care were monitored throughout the procedure. The physical status of the patient was re-assessed after the procedure. After I obtained informed consent, the scope was passed under direct vision. Throughout the procedure, the patient's blood pressure, pulse, and oxygen saturations were monitored continuously. The colonoscope was introduced through the anus and advanced to the cecum, identified by appendiceal orifice & IC valve. The quality of the prep was good. The patient tolerated the procedure well.

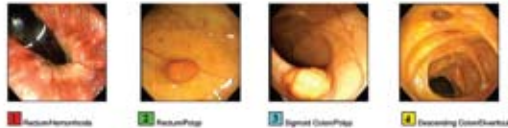
Findings:

A sessile, non-bleeding polyp was found in the rectum. The polyp was 5 mm in size. Polypectomy was performed with a hot biopsy technique using the hot anos. Resection and retrieval were complete. Estimated blood loss was minimal.

One pedunculated, non-bleeding polyp was found in the sigmoid colon. The polyp was 7 mm in size. Polypectomy was performed with a hot biopsy. Resection and retrieval were complete. Estimated blood loss was minimal.

Multiple large-mouthed diverticula were found in the descending colon.

Internal, non-bleeding, protruded with spontaneous reduction (grade II) hemorrhoids were found on retroflexion.



1 Rectum Hemorrhoids 2 Rectum Polyp 3 Sigmoid Colon Polyp 4 Descending Colon Diverticula

Dr. Montbriand says he saw results immediately after the installation of ProVation at the Lafayette facility, and some nine months later, the results were truly dramatic.

- Scheduled time for colonoscopies decreased from 45 to 40 minutes; scheduled time for EGD has decreased from 30 to 20 minutes
- The center saves at least 20 minutes previously spent on paper charting per case
- The center's nurse to patient ratio has gone from 1:2 to 1:4 – yet nurses are able to spend more time with patients
- Pre-ProVation procedures called for the attending physician plus one nurse and one technician. These procedures no longer require the presence of a technician – a significant cost savings

Additionally, there are benefits that don't have a "hard" value, but add up to make a significant, positive workflow impact. Nurses have more time to spend with patients instead of on paperwork, and the centers are now more efficient in their tasks overall – from patient care to billing to data reporting. Even more significant, Dr. Montbriand estimates that ProVation's reporting has actually increased the number of referrals into the center. "We've had great feedback from both physicians who have used the system and referring doctors who've received the notes and accompanying letters. They think the images look fantastic, and they really appreciate having immediate access to documentation at the end of the procedure," he said.

ProVation software provides hospitals and Ambulatory Surgery Centers (ASCs) with increased patient throughput and cost savings, complete procedure documentation, and accurate charge capture and coding – everything needed to improve workflow and increase revenues and department net profit. Moving forward, Dr. Montbriand anticipates even more growth – with ProVation as a part of each additional endoscopy center they open. "It's an easy, effective tool," he summarized. "It makes the staff happy, and it has paid for itself in efficiencies and streamlined workflow."

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YOU DO THE MATH: HOW DOES PROVATION PROVIDE SUCH SIGNIFICANT ROI?

If a surgical center can perform an average of 14 cases per day, and they save an average of 10 minutes of procedure time per case by implementing ProVation, that's 140 minutes per day. If they schedule cases with an average length of 40 minutes, that's 3.5 more cases they are able to perform per day. If net collections are \$350 per case,* this is an increase of \$1,225 more per day, or \$318,500 per year (assuming 260 working days).

**Estimated Medicare Reimbursement; reimbursement rates vary by region*

