
PS Suite EMR Guide for Reducing the Impact of Financial Strain

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Panel Segmentation & Marking the Record

Establishing and maintaining an accurate panel is a critical step to leveraging the EMR for managing patient care. Please refer to the Panel Identification and Panel Maintenance sections of EMR Guide for Patient’s Medical Home and other PS Suite EMR resources as needed.

Managing a patient panel to reduce harms associated with experiencing financial strain begins with the identification of patients who are experiencing financial strain. The process of identifying a sub-group of patients within the panel is panel segmentation. Marking the patient record identifies the panel segment by using a standardized term to facilitate the use of searches and applicable point-of-care reminders.

The panel segment of interest for this population is **patients who are experiencing financial strain**. This panel segment includes all patients who respond “Yes” to the screening question “Do you ever have difficulty making ends meet at the end of the month?” This is the recommended standardized RIFS screening question, but clinic teams may choose to ask patients additional screening questions at their own discretion.

Identifying and maintaining a list of patients who are experiencing financial strain requires an active screening process and review to ensure accuracy of information. The next three sections will provide recommendations for developing a screening process. As you read through these sections, please keep in mind that there are several methods to facilitate the development of a panel segment patient list. Clinic teams are, therefore, encouraged to consider their clinic’s context and explore other methods as appropriate.

Identifying the Screening Patient Population

Recommended method: Start by identifying the patient population the clinic team would like to screen for patients experiencing financial strain. Here are some examples:

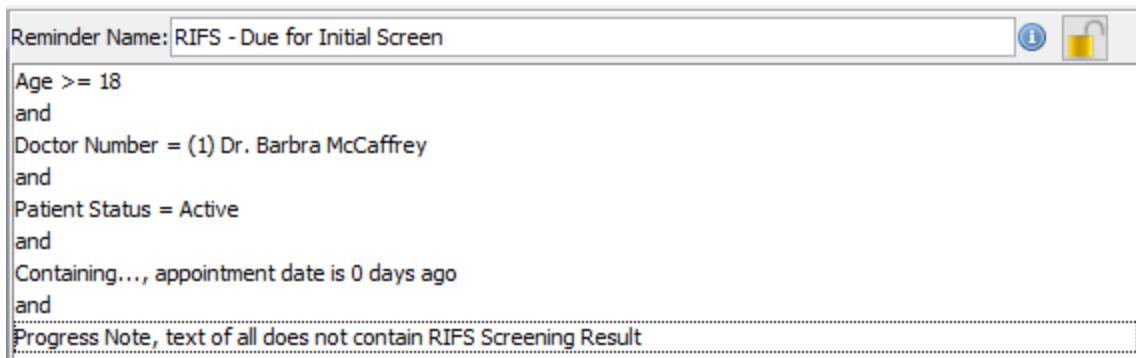
All patients 18 years and older:

- who have never been screened for experiencing financial strain.
- participating in a particular initiative like Patients Collaborating with Teams (PaCT).
- with a specific complex health need (e.g. patients with multiple chronic conditions, patients taking multiple medications).
- who have an appointment with a specific physician or other healthcare provider.

Once the screening patient population has been identified, it is suggested that the clinic team create **point of care reminders** to flag patients who should be offered the screening question. Point of care reminders can be used to remind clinic staff to perform a certain action when a patient visits the clinic.

TIP: Experiencing financial strain is a common occurrence for many people. We want to normalize the screening process as much as possible, so patients don’t feel like their selection was targeted. This could make them feel even more shame and stigma for experiencing financial strain.

Global Visit Reminders – Global reminders for patient recall/outreach can be used to flag patients who meet the criteria of the screening population. For example, below is a screenshot of a reminder that can be used as an alert to flag Dr. McCaffrey’s adult patients who have an appointment booked “today” and have never completed a screening questionnaire. If your clinic is concerned that adding RIFS patient reminders will impact patient confidentiality or clutter patient charts, consider running a reminder report every morning to identify patients due for screening.



Note that it is important to choose “does not contain” when adding the reminder criteria identifying patients who do not have a RIFS screening result in their progress notes and, therefore, have not yet been offered the screening question. It is also important to include “Active” as the patient status (see the “Patient Status” line in the above query). This will ensure that only active patients are included in the query.

See these useful resources for additional information on creating and managing reminders:

- PS Suite EMR Help Files:
 - [Reminders](#)
 - [Defining Global Reminders](#)
 - [Creating Reminder Reports](#)

Screening Patients

Recommended method: Work as a clinic team to determine how the screening question will be offered to and completed by patients.

1. Consider using the using the RIFS scripting samples when **offering the screening question to patients**.
2. Consider using one or more of the following methods to **administer the screening question**:
 - i. Create the screening question as a handout and print it out for patients to complete with a pen or pencil. See these useful resources for additional information on printing handouts from the EMR and attaching files to patient charts:
 - PS Suite EMR Help Files:
 - [Handouts](#)
 - [Attaching Files to a Note](#)
 - ii. Provide patients with a laminated copy of the screening question to be completed with a whiteboard marker.
 - iii. Have a clinic team member complete the screening question with the patient and record the response directly in the EMR. See the [Reviewing and Recording the Screening Question Result](#) section below for more information about where the result can be recorded.

TIP: When considering how the screening question will be administered, please keep in mind that personal finance is a sensitive topic for many patients. The screening process should therefore ensure that patient privacy and confidentiality are maximized. For example, consider offering patients the screening question while in a private exam room.

Reviewing and Recording the Screening Question Result

Recommended method: A healthcare provider reviews the screening question result with the patient and records the result in the EMR.

1. Consider using the using the RIFS scripting samples to guide providers with their **conversations when responding to patients** after the screening has been completed.
2. Recording the screening question result
 - a. Consider recording the following four types of question results in a searchable field in the EMR (see step 2b below):
 - i. Positive: patient responds “Yes” to the question “Do you ever have difficulty making ends meet at the end of the month?”
 - ii. Negative: patient responds “No” to the question “Do you ever have difficulty making ends meet at the end of the month?”
 - iii. Unable to Complete: patient is unable to complete the screening question (e.g. due to illiteracy, a language barrier, a mental health barrier such as dementia, etc.). Please note that, to make the screening process more efficient, this result can be recorded in the EMR by the clinic staff member who offers the patient the screening tool.
 - iv. Declined: patient declines to complete the screening question. Please note that, to make the screening process more efficient, this result can be recorded in the EMR by the clinic staff member who offers the patient the screening tool.

- b. Consider recording the four types of screening question results in one of the following searchable fields in the EMR:

Stamp Name: RIFS

RIFS Screening Result
 «RIFS Positive», «RIFS Negative», «RIFS Declined», «RIFS Unable to Complete»

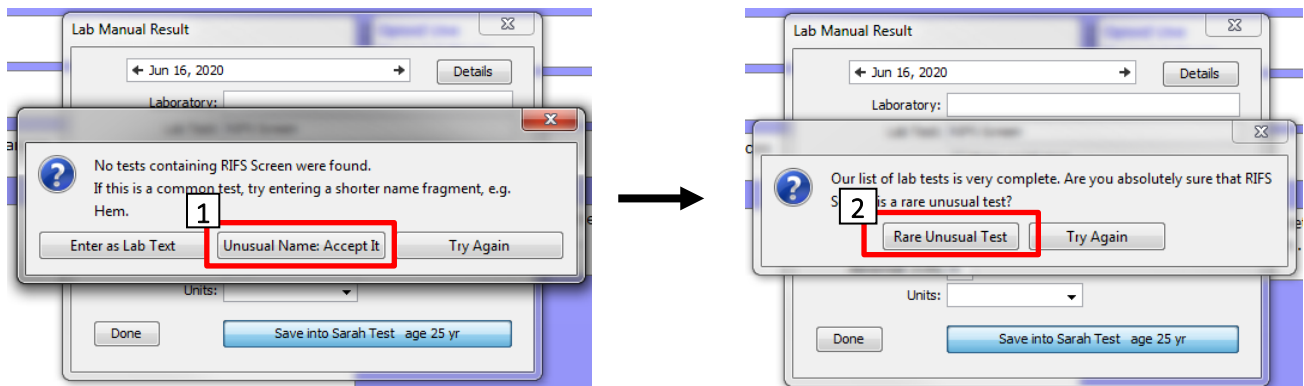
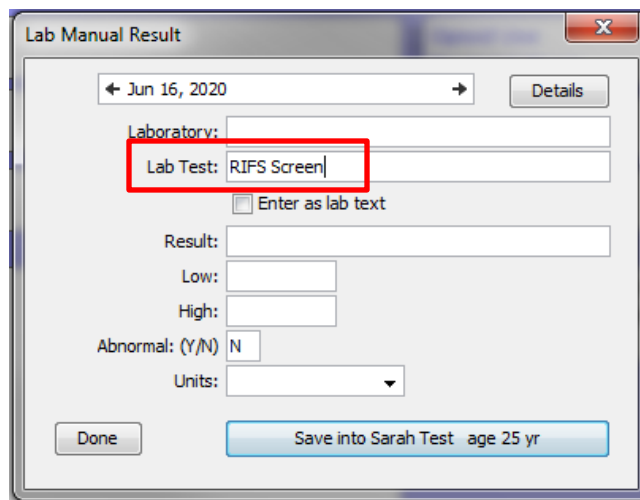
- i. *Stamps*: The recommended method is to create a simple stamp to record the screening result (see screen shot below)

See these useful resources for additional information on configuring and using Stamps:

- PS Suite EMR Help Files:
 - [Stamps](#)
 - [Creating and Editing Stamps](#)
 - [Inserting a Regular Stamp](#)

- ii. *Encounter Assistant*: If your clinic screens patients using a more extensive questionnaire than just the one recommended screening question, an Encounter Assistant can reproduce your clinic’s RIFS Screening Questionnaire and provide drop down menus and radio buttons to avoid variation in data entry. Creation of encounter assistants is an advanced EMR skill. Ask the vendor for a demonstration if considering this approach.

- iii. *Manual Lab Result:* An alternative is to enter the screening result as a manual lab result. Note, however, that PS Suite cannot configure the Manual Lab Options to make data entry more efficient or standardized. Only free text is available for a Manual Lab Result.
 1. To enter a new manual lab result, go to a patient’s chart → Click “Data” above the chart → Click “Lab Manual Result”
 2. In the new window that appears, type “RIFS Screen” (or the standard name your clinic team has decided to name the lab entry) into the “Lab Test” field.



3. Since the RIFS Screen lab name is not in the EMR’s list of common lab tests, you will be prompted to verify that you would like to add the ‘unusual’ lab text name. Accept the prompts as shown in the screen shots below.

Enter the screening result in the "Result" field. Note that you may want to abbreviate the results as follows to minimize data entry errors:
 Positive = +
 Negative = -
 Unable to Complete = UTC
 Declined = D

You may decide to enter "Y" in the abnormal field if the screening result is "+" (i.e. positive)

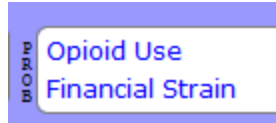
- Once you have verified that you would like to add the 'unusual' lab test name, complete the rest of the Lab Manual Result fields as show below.

- The new manual lab result will then be entered in the patient's chart as shown below.

See these useful resources for additional information on configuring and adding manual lab results:

- PS Suite EMR Help File:
 - [Entering Lab Results Manually](#)

3. It is recommended that the healthcare provider **record 'Financial Strain' in the patient's "Problem List"** if the result is positive (i.e. patient responds "Yes" to the question "Do you ever have difficulty making ends meet at the end of the month?"). This will allow the clinic to follow-up as appropriate with patients who are experiencing financial strain. Once added to the problem list, "Financial Strain" will appear in the patient's chart as shown below.



See these useful resources for additional information on configuring and adding problems to the Problem List:

- PS Suite EMR Help File:
 - [Entering a Current Problem](#)

Care Management

The following section outlines some follow-up processes and EMR reminders that can be enabled but this does not replace clinical judgement or consideration of individual patient circumstances. It is intended to provide a 'safety net' to alert the clinic team to considerations in managing patients who are experiencing financial strain.

Referral Coordination

Recommended method: A healthcare provider asks patients who are experiencing financial strain if they would like to be referred to another healthcare provider (e.g. social worker) and/or community resource to further discuss their options.

Consider recording the following outcomes of the referral offer:

- i. Accepted: patient accepts the offer for additional resources.
- ii. Declined: patient declines the offer for additional resources.
- iii. Deferred: patient is considering the offer for additional resources but has not yet accepted.

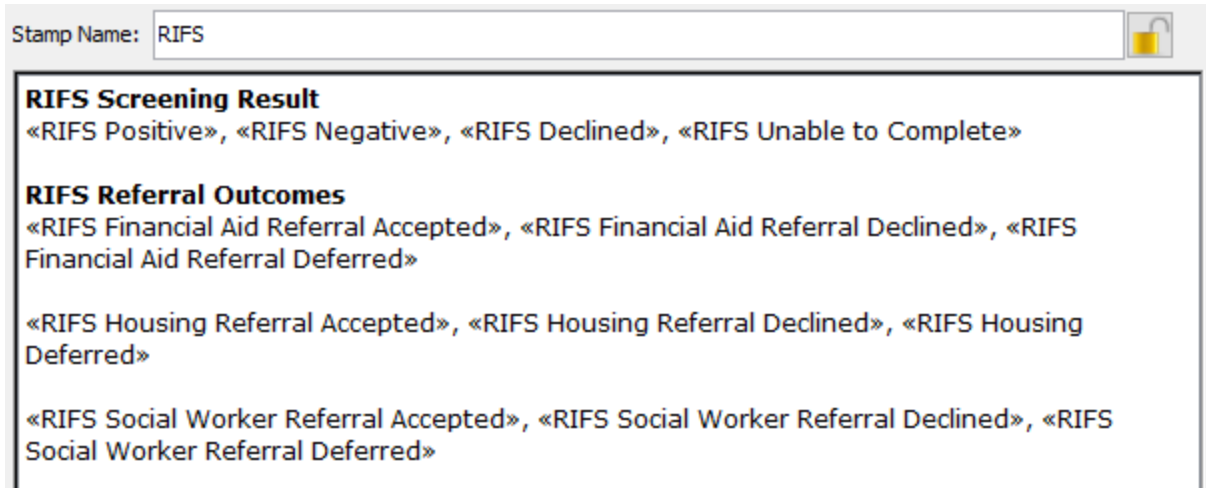
If a patient agrees to be referred to additional resources, consider providing them with a referral to the appropriate healthcare provider and/or a handout of available community supports.

If a patient declines the offer for additional resources, the clinic team can use their best judgement to determine whether or not to reoffer additional resources the next time the patient visits the clinic.

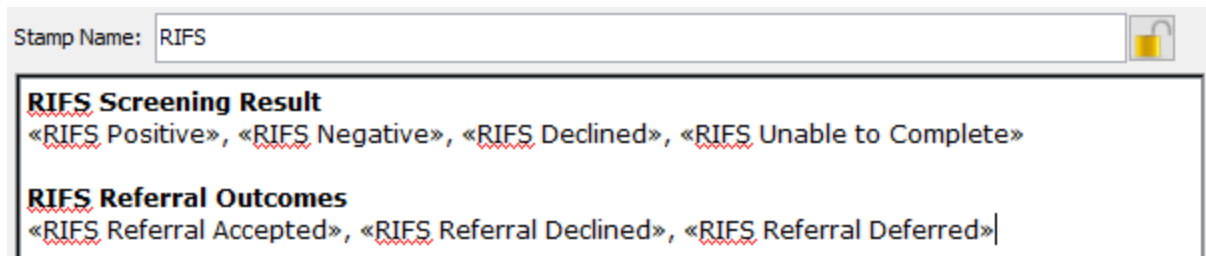
If a patient defers the offer for additional resources, the clinic team can create a reminder to reoffer additional resources the next time the patient calls and/or visits the clinic.

Consider recording the three types of referral outcomes in one of the following searchable fields in the EMR:

- i. *Stamp:* The recommended method is to create a simple stamp to record the referral outcome. This may mean adding fields to the RIFS screening result stamp or creating a completely new stamp. In the below example, a “RIFS” stamp is used to record both the RIFS screening result and RIFS referral outcomes.



Note that, in the above example, separate fields have been created for each type of referral offered. Your clinic team may instead choose to track overall referral outcomes and only



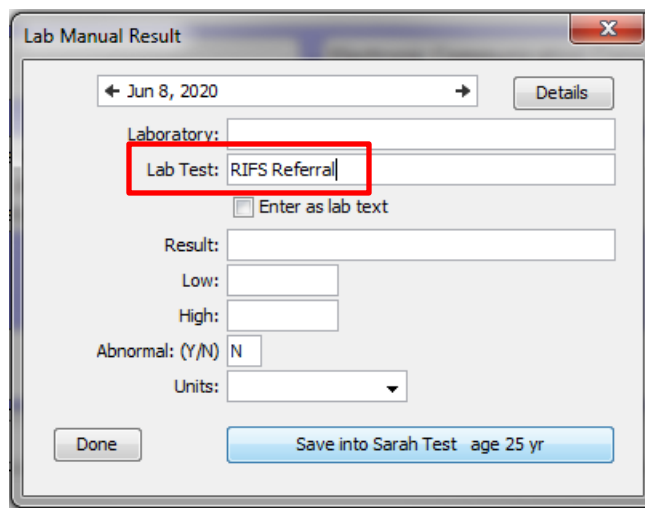
create the following three fields: “RIFS Referral Accepted”, “RIFS Referral Declined”, and “RIFS Referral Deferred”, as shown in the below example.

See these useful resources for additional information on configuring and using Stamps:

- PS Suite EMR Help Files:
 - [Stamps](#)
 - [Creating and Editing Stamps](#)
 - [Inserting a Regular Stamp](#)

- ii. *Encounter Assistant:* To standardize RIFS referral outcome documentation, an Encounter Assistant can reproduce a RIFS referral questionnaire and provide drop down menus and radio buttons to avoid variation in data entry. Creation of encounter assistants is an advanced EMR skill. Ask the vendor for a demonstration if considering this approach.

- iv. *Manual Lab Results:* An alternative is to enter the referral outcomes as a manual lab result. Note, however, that PS Suite cannot configure the Manual Lab Options to make data entry more efficient or standardized. Only free text is available for a Manual lab Result.
 1. To enter a new manual lab result, go to a patient’s chart → Click “Data” above the chart → Click “Lab Manual Result”
 2. In the new window that appears, type “RIFS Referral” (or the standard name your clinic team has decided to name the lab entry) into the “Lab Test” field.



3. Since the RIFS Referral lab name is not in the EMR’s list of common lab tests, you will be prompted to verify that you would like to add the ‘unusual’ lab text name. Accept the prompts as shown in the screen shots below.

4. Once you have verified that you would like to add the ‘unusual’ lab test name, complete the rest of the Lab Manual Result fields as show below.

Enter the referral outcome in the "Result" field. Note that you may want to abbreviate the outcomes as follows to minimize data entry errors:
 Accepted = +
 Declined = -
 Deferred = Def

5. The new manual lab result will then be entered in the patient's chart as shown below.

Jun 8, 2020	Lab Manual Result (Updated)
RIFS Screen	IITC
RIFS Referral	-



See these useful resources for additional information on configuring and adding manual lab results:

- o PS Suite EMR Help File:
 - [Entering Lab Results Manually](#)

TIP: It is important to ensure that clinic team members record information in the EMR in a standardized way. For guidance on standardizing data entry in the EMR, please refer to pages 5 and 6 of the [Guiding Principles to Effective Use of EMR for Patient's Medical Home Work](#) document.

Opportunistic and Outreach Screening - Following Up with Patients Experiencing Financial Strain

Establishing EMR reminders can support the clinic team by identifying tasks that may be appropriate to be completed during a patient encounter (i.e. opportunistically) or a recommendation to reach out to a patient (i.e. outreach).

It is recommended that the clinic team **establish reminders** to follow-up with patients, as follows, based on the patient's last screening result:

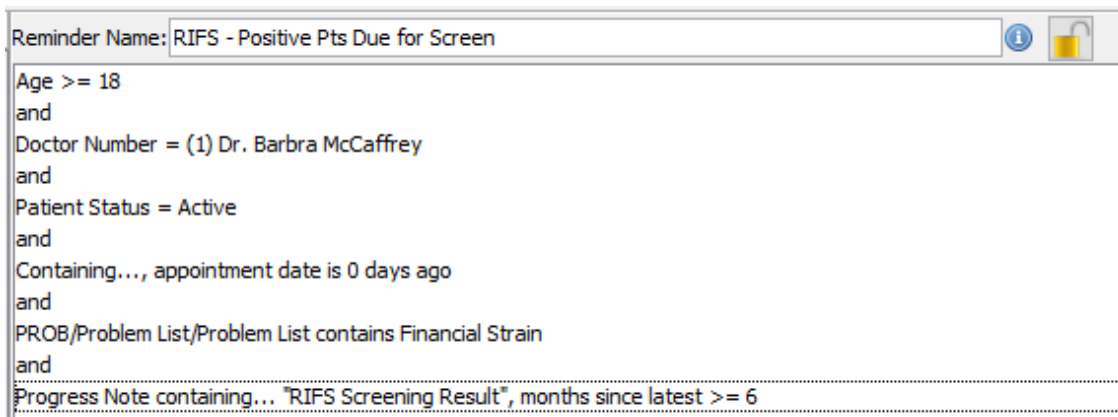
- i. Positive: follow-up at every patient encounter until the patient no longer screens positive, or as appropriate given a specific patient's context
- ii. Negative: follow-up every 18 months, or as appropriate given a specific patient's context
- iii. Unable to Complete: follow-up at every patient encounter until the patient is able to complete the questionnaire, or as appropriate given a specific patient's context
- iv. Declined: follow-up every 18 months, or as appropriate given a specific patient's context

Opportunistic Care

Consider using one or more of the following options to flag patients who come to the clinic for an appointment and have ‘Financial Strain’ in their “Problem List”.

1. Create a global reminder to flag patients who come in for an appointment, have ‘Financial Strain’ in their problem list/profile and have not had their screening result reviewed in more than six months. Note that clinic teams are encouraged to choose the screening time interval that makes the most sense given their context (e.g. review positive screening results every three months).

Below is an example reminder. Note that it is important to choose “does not contain” when adding the search criteria identifying patients who have been offered the screening question in the last six months. This will ensure that only patients who have not been offered the screening question in the last six months are flagged for screening (in the screen shot below, the last “Progress Note



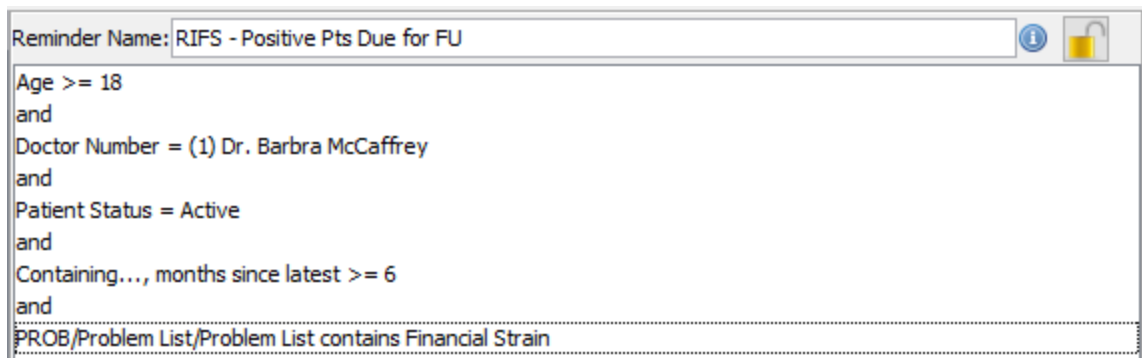
containing...” row indicates that patients with a RIFS screening result in their progress notes within the last six months will be excluded from the query).

See these useful resources for additional information on creating and managing global reminders:

- PS Suite EMR Help Files:
 - [Reminders](#)
 - [Defining Global Reminders](#)
 - [Responding to Reminders](#)
2. Create individualized patient reminders or alerts to flag patients who come in for an appointment, have ‘Financial Strain’ in their problem list/profile and require an individualized follow-up plan. See the following PS Suite EMR Help Files for additional information on creating and managing individual patient reminders and alerts:
 - [Setting an Individual Reminder](#)
 - [Creating a Patient Alert](#)

Outreach Care

Consider using the following options to flag patients who have ‘Financial Strain’ in their “Problem List” and have not come to the clinic for an appointment in more than six months. Note that clinic teams are encouraged to choose the screening time interval that makes the most sense given their context.



Reminder Name: RIFS - Positive Pts Due for FU

Age >= 18
and
Doctor Number = (1) Dr. Barbra McCaffrey
and
Patient Status = Active
and
Containing..., months since latest >= 6
and
PROB/Problem List/Problem List contains Financial Strain

1. Create a global reminder to flag patients who have ‘Financial Strain’ in their “Problem List” and have not visited the clinic in more than six months.

2. Create individualized patient reminders or alerts to flag patients who have ‘Financial Strain’ in their “Problem List” and have not visited the clinic as outlined in their individualized follow-up plan. See the following PS Suite EMR Help Files for additional information on creating and managing individual patient reminders and alerts:
 - [Setting an Individual Reminder](#)
 - [Creating a Patient Alert](#)

3. A list of patients requiring outreach care can be printed off as a report and used to call patients to book a follow-up appointment. This creates a ‘safety net’ for follow up on the patient’s financial strain goals or an opportunity to remove ‘Financial Strain’ from the patient’s “Problem List”.

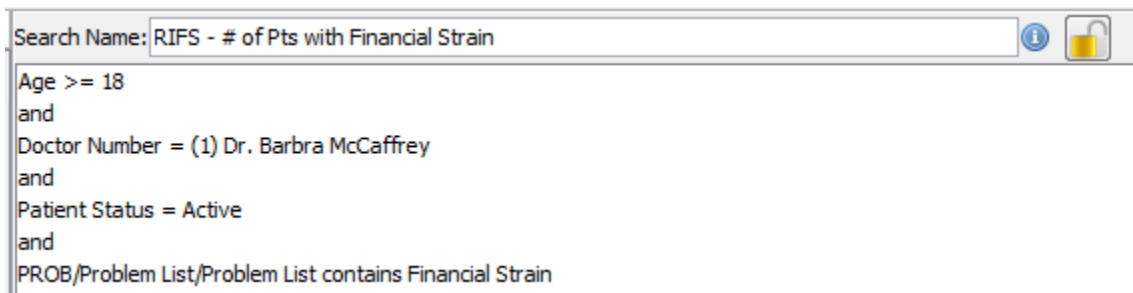
See the [Creating Reminder Reports](#) PS Suite EMR Help File for additional information on creating a list of patients due for a specific reminder.

Quality Improvement and Measurement

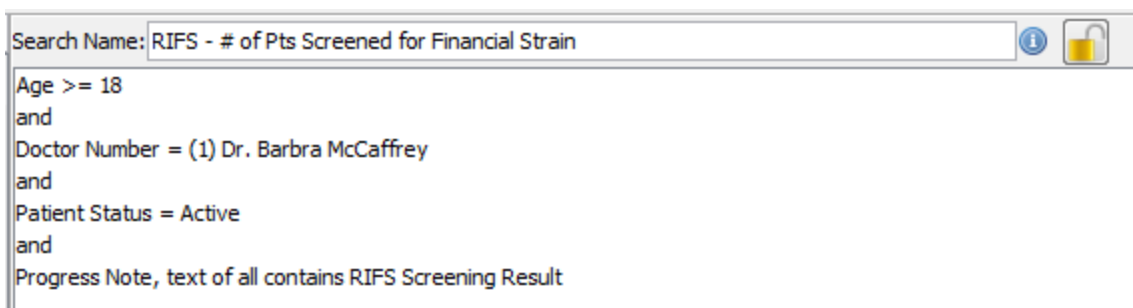
Quality improvement (QI) is a systematic approach to monitoring practice efforts, reviewing and reflecting on the current state and looking for opportunities to improve. Measurement can be a way to monitor clinic operations and improvement. How and why the team uses measurement may require a discussion with the clinic team and practice facilitator. Consider the reason for measurement; is it a spot check or long term monitoring? A team can benefit from reflecting on data produced from the EMR to help inform next steps, focused follow-up or ongoing patient monitoring.

The following examples are searches that a team may wish to perform in their EMR for their patients who are experiencing financial strain:

- Number of active patients experiencing financial strain



- The number of active patients who have been screened for financial strain



- Number of patients experiencing financial strain who have been offered a RIFS referral.
Note that there is no recommendation that clinics record referral outcomes by the type of referral offered. For clinics that choose to do so, however, please refer to Example 2 below.

Example 1 – Use if not recording referral outcomes by type of referral.

Search Name: RIFS - # of Financial Strain Pts with Referral Offer

Age >= 18
 and
 Doctor Number = (1) Dr. Barbra McCaffrey
 and
 Patient Status = Active
 and
 PROB/Problem List/Problem List contains Financial Strain
 and
 Progress Note, text of all contains RIFS Referral

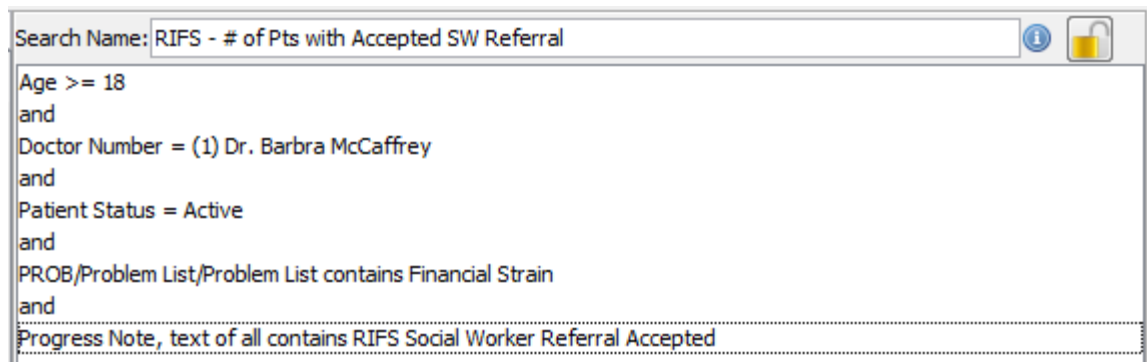
Example 2 – Use if recording referral outcomes by type of referral offered.

Note that there is no recommendation for which types of referrals should be recorded. These will depend on which ones your clinic team decides are important to capture.

Search Name: RIFS - # of Financial Strain Pts with Referral Offer

Age >= 18
 and
 Doctor Number = (1) Dr. Barbra McCaffrey
 and
 Patient Status = Active
 and
 PROB/Problem List/Problem List contains Financial Strain
 and
 Progress Note, text of all contains RIFS Financial Aid Referral
 or
 Progress Note, text of all contains RIFS Housing Referral
 or
 Progress Note, text of all contains RIFS Social Worker Referral

- Number of active patients who are experiencing financial strain and have accepted a referral ex. a social worker referral



Decide what measures are meaningful to the team. Keep it simple by choosing 1 or 2 measures at the start and then add and remove measures as the work evolves over time.

TIP: Were some queries unable to be performed because the data was not standardized in the EMR?

- Promote discussion at the outset to avoid standardization challenges rather than having to clean them up later.
- Discuss as a team what documentation/charting may need to change moving forward for the purpose of patient population monitoring and process improvement.