

GRIPA CLINICAL Integration

Over 520 physicians on the Rochester General Health System (RGHS) medical staffs have currently signed up for Clinical Integration (CI). These forward looking individuals, early on, recognized the movement of payers toward a different reimbursement model for health care. This movement is gaining significant strength and momentum in the Halls of Congress as legislators hammer out the details for a Medicare model and from past experience, we all know that local payers take their own cue from Medicare.

When you read some of the reports on these committees in Washington, it is evident that efforts will be directed at data sharing among care givers, performance will be monitored, and payment will be connected to performance measures.

GRIPA's Clinical Integration model offers participants the collective advantage to contract with various insurers with data to back up performance claims. It offers, through the GRIPA Connect Portal, access to a wide range of patient related

information with rich areas of physician support in the effort to improve quality outcomes in care, currently:

- Specific disease/condition, evidence based, guidelines
- Secure messaging among care givers
- Patient care management services
- Referral services
- Electronic prescribing
- Patient Care Alerts

In planning is:

- Access to RGHS CCS reports through GRIPA Connect
- Medication Reconciliation between CCS and the GRIPA Connect Portal

This whole effort is directly guided by physician input and all members are invited, actually required, to participate.

Accountability is another key element of CI. We physicians have always recognized this aspect of our care of patients but society is demanding more transparency now; with us as with business. The internet has physician rating websites and they wouldn't exist if there wasn't a demand. By measuring outcomes and

alerting physicians where they need to improve (or where they excel) we can be proactive in this accountability arena.



T. Jeffery Dmochowski, MD

As physicians we all prize our individuality but healthcare is a collective effort. It cries out for smooth integration. GRIPA's Clinical Integration Portal offers a strong backbone on which to build our system. Don't we owe it to ourselves, our patients mostly, and society in general to actively participate in this effort?

Please feel free to contact me directly at 585-922-1532 or by email at Jeffrey.Dmochowski@rochestergeneral.org with questions.



Physicians coming together for all the right reasons

GRIPA ePrescribing

Medication History – Frequently Asked Questions

UNDERSTANDING MEDICATION HISTORIES

Q CAN I SEE MEDICATIONS PRESCRIBED BY OTHER PHYSICIANS?

A key safety feature in GRIPA's electronic prescribing application is that the medication history is available at the point of care, both from external sources, such as SureScripts-RxHub, and internally as updated by all users of the application prescribing for any one patient.

GRIPA connect ePrescribing maintains a single record for the patient. The primary care physician sees the same information as the cardiologist. If the cardiologist adds aspirin to the medication profile, it is visible to every other provider within the clinical integration program that also cares for the patient. The medication history from external sources may be downloaded by clicking the PBM request

button; the medication history generated by the CI physicians is active and updated on the patient's active medication list.

Q HOW ARE MEDICATION HISTORIES BEST USED?

A It really depends on needs and situation.

• **Building a Medication List:** Check the external sources, Pharmacy Benefit Managers through SureScripts-RxHub, for past filled prescription medications. Accepting electronic renewal requests from pharmacy is another way of populating a medication list

• **Adherence:** Check the external sources when patient adherence needs to be evaluated. The active medication list indicates when a prescription medication was last prescribed, but the

external source indicates when it was last dispensed.

• **Reconciliation:** Use the active medication profile when medication reconciliation needs to be done. This list should reflect the medications the patient is actively taking Supplement with external sources if there is a concern the patient's current active medication list is lacking any medications.

As of May 2009 we have over 50 physicians who are using electronic prescribing. GRIPA is offering all of its physician members who participate in Clinical Integration the opportunity to begin using electronic prescribing through the GRIPA Connect Portal.

Call GRIPA Provider Relations at 585-922-1525 to get started.