Table of Content (click to jump to section)

- 1. "Stay at Home" Considerations
 - a. Faulkner Home Lab Draws
- 2. Durable Medical Equipment
 - a. BP Cuff Size Measurements
 - b. Sullivan's Pharmacy (eRx for BMCHP patients)
- 3. Patient Self-Assessment / Education
 - a. Home BP Measurement (How To)
 - b. Home Glucose Measurement (How To)
 - c. How to send a MyChart Attachment
- 4. VNA services
 - a. How to input VNA information into EPIC Care Team
- 5. Care Management / Clinic Resources
 - a. GIM PharmD
 - b. BMC SCO Nurse Practitioner
 - c. Complex Care Management (CCM)
 - d. Pharmacy Care Management (PCM)
 - e. IBH Team
- 6. eSignatures in EPIC
- 7. MyChart

pg. 1 [5.8.2020]

"Stay at Home" Considerations

- DME (See Durable Medical Equipment)
- If lab draws are needed:
 - Consider other lab draw needs or other reasons that they're coming into BMC and ordering labs and asking patients to get labs drawn when they come. For example, patient's coming in for Chemo, labs for CHF management ordered by Cardiology, Anticoagulation INR check, etc.
 - Faulkner Home Labs:
 - Contact Information:

o Phone: 781-322-8502 o Fax: 781-322-8032

- Insurance Coverage:
 - Accepted: Medicare, Medicaid (not limited though), Harvard Pilgrim, Aetna, Federal BlueCross (\$25 co-pay), Regular BlueCross (No co-pay), Harvard Pilgrim, Tuft Medicare Preferred
 - o Not Accepted: Medicaid limited, Cigna
 - o Others would need to call Faulkner prior to ordering.
- Fill out form attached and fax (Clinic vs App-based Fax):

https://www.faulknerlabs.com/resources/FaulknerLabs_NPF_Fill.pdf

- o To have the clinic send the fax. Go through the PDF file with the patient and message your Suite's Forms and Fax Pool with all of the required information. They will then print, fill out the form with the information provided and fax it to Faulkner.
- Disclaimer/FYI:
 - o Do NOT need to fill out SSN on the application
 - Average time of lab draw is about 1 week at this time. Consider calling the lab after to confirm order received and get anticipated collection date to inform patient of time.
- Already existing VNA services (See VNA) if VNA agency can utilize lab draws
- New starts: Consider starting medications that don't require lab monitoring
 - HTN: Consider CCB vs ACEI or Thiazide
 - DM: Consider waiting on new SGLT2 inhibitors starts. Could consider Linagliptin instead.
- Chronic Pain Management
 - https://www.dea.gov/press-releases/2020/03/20/deas-response-covid-19. Disclaimer: May not be
 most up to date release by time of reading, please reference the actual DEA website for most up to
 date information.
- O Utilize Telemedicine / TeleVideo as an opportunity to have unique access into patient's home environment: Med rec with meds on hand, discuss lifestyle modifications within their currently home environment, etc.
- Population Health
 - Use HTN and DM provider panels to ensure proper follow up for patients with chronic diseases especially those in whom the routine q3-4 month follow up schedule was interrupted.
 - The provider panel for DM HTN will include: last A1C/BP, Last and Next Visits (currently only in person clinic visits count but working on including Telemedicine encounters), Insurance Coverage (to help with potential resources available for patients See Care Management / Clinic Resources)

• Durable Medical Equipment

- o Findings Information on a Patient's DME in EPIC Flowsheets:
 - https://share.bmc.org/emerge/AmbulatoryOutpatient/3.%20Tip%20Sheets/Flowsheets/BMC%20
 Documenting%20Durable%20Medical%20Equipment%20Information.pdf
- o BMCHP (BMCHP Community Alliance) Patients
 - Who is a BMCHP patient?
 - Look on the EPIC Banner and hover over/click "Coverage" and it should include "BMCHP" in it. For example, "BMC HP ALLI ACO COMM STANDARD".
 - Diabetes Supplies: Use Freestyle Supplies <- Can send to BMC Pharmacy
 - BP Cuff Sizes:

General guidelines: Length is >80% of arm circumference, Width is >40% of arm circumference.

pg. 2 [5.8.2020]

Size* (Width x Length in cm)	Arm Circumference (cm)	Arm Circumference (in)	
Small (12x22)	22 - 26	8.7 - 10.2	
Medium (16x30)	27 - 34	10.6 - 13.4	
Large (16x36)	35 - 44	13.8 - 17.3	
X-Large (16x42)	45 - 52	17.7- 20.5	

^{*}These are general guidelines and may vary based on company.

- Sullivan's Pharmacy and Medical Supply
 - No PA required for certain supplies: Blood Pressure Cuff, Oximeters, Scales for BMCHP
 - Electronic Prescriptions Accepted: Yes
 - How to Order for BMCHP patients
 - Order the actual DME need in EPIC (not Durable Medical Equipment order)
 - Change the Pharmacy to "Sullivan's Pharmacy". Can input MA in State to narrow down choices
 - Needs to include ICD 10 code in the signature
 - NPI number of Provider is required but should be associated with the order.
 - For BP Cuffs: Need to indicate size (see above)
 - Home Medical Equipment Contact Info:

Phone: 617-325-0013Fax: 617-687-8507

- o All other Insurers:
 - Currently still same process as usual through nursing. Contact Suite Nurse for further details.

• Patient Self-Assessments / Education

- o Sample Online Assessments/Logs for printing (Send link through MyChart or provide website information)
 - Blood Pressure Log
 - CDC: https://www.cdc.gov/heartdisease/docs/My_Blood_Pressure_Log.pdf
 - AHA: https://www.heart.org/-/media/files/health-topics/high-blood-pressure/my-blood-pressure-log.pdf
 - Blood Glucose Log
 - ADA: https://professional.diabetes.org/sites/professional.diabetes.org/files/pel/source/sci-advisor 2018 blood glucose log.pdf
 - Walgreens: https://www.walgreens.com/images/pdfs/healthshops/bloodglucoselogsheetenglish.pdf
 - Converting Glucose Averages to A1C
 - https://professional.diabetes.org/diapro/glucose_calc
 - https://professional.diabetes.org/sites/professional.diabetes.org/files/media/average_glucose_flyer.pdf
- MyChart Assessments
 - Can send an attachment of one of the above or a self-made logs through MyChart. Directions on how to send an attachment below:
 - https://share.bmc.org/emerge/COVID19%202020/Epic%20MD%20MyChart%20Attachments.pdf
 - Future possibility Patient Entered Data Assessments directly through MyChart
- Patient Education on use of DME
 - MyChart: If available send a link of the device company's video on how to use device
 - Can walk someone through use of DME during TeleVideo visits
 - See Appendix A for How to Guide on Home Blood Pressure Monitoring
 - See Appendix B for How to Guide on Home Blood Glucose Monitoring

VNA services

- o Most VNA services are "business as usual". Particular considerations include physical examination, vitals monitoring, patient education and some VNA services can use utilized for lab monitoring
- O VNA Contact Information in EPIC
 - IT put in a space in the Care Team section in EPIC for VNA contact information
 - Forms and Fax staff will eventually start (start date TBD) to put the VNA contact information into EPIC as VNA Faxes are received for providers.

pg. 3 [5.8.2020]

•	Providers should also access this and put in VNA information if known to provider. • See Appendix C: How to input VNA information in EPIC Care Team

pg. 4 [5.8.2020]

Care Management / Clinic Resources

- o GIM PharmD
 - Appropriate Referrals
 - New Device Teaching: Injectable medications, Glucometers, Inhalers
 - Chronic Disease: Diabetes, HTN (more difficult unless they have a home cuff), Cholesterol, Asthma/COPD/Smoking Cessation
 - Medication Education/Management/Reconciliation
 - How to refer a patient
 - Flag the PharmD:

Katelyn O'Brien, Anthony Giuliani, Michael Takash, Justine Dickson, Kyle Bertram

	Monday	Tuesday	Wednesday	Thursday	Friday Katelyn (0272)	
SHA 5	Katelyn (0272)	Katelyn (0272)	Katelyn (0272)	Katelyn (0272)		
	Anthony (3480)	Anthony (3480)	Anthony (3480)	Anthony (3480) Kyle (9173)	Anthony (3480)	
CRO 6	Michael (4330)	Michael (4330)	Michael (4330)	Justine (4154)	Michael (4330)	
		Kyle (9173)			Justine (4514)	

- Page if urgent:
 - o 5th Floor # 3445
 - o 6th Floor # 6199
- Disclaimer:
 - PharmDs will do chart review, and triage referrals based on acuity. PharmDs will call the new
 referrals. Major med changes may be deferred until video visits or face to face visits can be
 resumed at BMC if deemed appropriate by PharmD assessment.
 - As the needs of the hospital continue to evolve during COVID19, ambulatory pharmacy is
 constantly looking at ways to support the health system as a whole. Clinical pharmacy
 support abilities may change over time depending on the overall needs of BMC. An updated
 would be made if GIM PharmD access for telemedicine/disease management is affected.
- o BMC SCO Insurer:
 - Who is a BMC SCO patient?
 - Look on the EPIC Banner and hover over/click "Coverage" and it should include "BMC SCO" in it. For example, "BMC HEALTHNET SCO MCR MNG"
 - Judy Tran (BMC SCO NP) can help in many functions with BMC SCO patients including getting DME.
 - Send message to SCO NP, Judy Tran, requesting specific DME
- o Complex Care Management (CCM):
 - Who is a CCM patient?
 - EPIC Banner is Green in color. Team is noted in the Patient Care Coordination note.
 - ACO Top 2% Risk Score If you believe your patient is a CCM patient but not currently enrolled message the appropriate contact noted below. The eligibility criteria are:
 - o 1) Must be enrolled in the BMCHP (MassHealth) ACO AND -
 - o 2) Must be high risk (determined by healthcare utilization/cost)
 - Providers don't have to know who is eligible, they can just refer and the teams will figure it out.
 - Contact Information
 - Suite Dyads:

Name	Role	Site	Email	
Jasmine Laguerre	RN	CRO 6B, some 6C	Jasmine.Laguerre@bmc.org	
Jocyline Correia	CHW	CRO 6B, some 6C	Jocyline.Correia@bmc.org	
(John) Hananiah Pierre-Louis	RN	CRO 6A, some 6C	Hananiah.Pierre-Louis@bmc.org	
Christine Coates	CHW	CRO 6A, some 6C	Christine.Coates@bmc.org	
Tyana Morgan	RN	SHA 5	Tyana.Morgan@bmc.org	
Michelle Gilchrist	CHW	SHA 5	Michelle.Gilchrist@bmc.org	

Merida Brimhall – Nurse Manager (Email: Merida.Brimhall@bmc.org

pg. 5 [5.8.2020]

- [CCM] How can they help?
 - Coordination of Care
 - o Ensures appropriate appointments are scheduled and patients make it
 - o Facilitate communication between patient, PCP, specialists
 - o Ensure tests ordered get scheduled and completed
 - o Work with Pharmacy to make sure medications are covered and accessible. Can also help obtain DME as they do have "Right Fax" on their phones.
 - o Connecting patients to behavioral health and substance use treatment PRN
 - Addressing SDOH: Assistance with transportation, housing, employment, access to food, access to childcare, etc.
- o Pharmacy Care Management (PCM):
 - Who is a PCM patient?
 - The Pharm Liaison will write a note when the patient is enrolled.
 - ACO Top 3-10% Risk Score
 - Contact Information:
 - Ad hoc liaison pharmacy requests (benefits investigation, prior authorizations, copay questions and assistance, general inquiries): Contact "BMC GIM PHARMACY LIASION POOL"
 - Each liaison will also still be available via phone or page (listed below):

Name	Clinic	Email	Pager	Extension
Ileana Carranza, CPhT	GIM	lleana.Carranza@bmc.org	0348	x85496
Ryan Gauthier, CPhT	GIM	Ryan.Gauthier@bmc.org	3171	x49186
Tereza Dosouto, CPhT	GIM	Terea.Dosouto@bmc.org	0589	x49187
Alexandria Akoumianakis	GIM CCM	Alexandria.Akoumianakis@bmc.org	3590	x49290
Javie McLean, CPhT	GIM	Javie.McLean@bmc.org	1409	x85819
Jenny Hak, CPhT GIM		Jenny.Hak@bmc.org	4169	x49103
Anita Palanukom, CPhT	GIM HepC	Anita.Palanukom@bmc.org	8325	x49255

- How can they help:
 - Patient Assessment: Pharmacy and Medication adherence, Ambulatory engagement, Health related social needs
- o IBH Team (During Pandemic)
 - 1) Use the warm hand-off pager (PREFERRED option between warm hand-off and EPIC referral)
 - Page 3040 (SHA 5th floor) or 4050 (CRO 6th floor) with:
 - o Patient Name and MRN
 - o Patient MRN
 - o Reason for referral
 - o Call back number and pager
 - o Specify if you would like a call back to discuss or simply reach out to patient
 - IBH clinician will reply to page within 5 min to confirm they received the page, and call you/patient within 60 min (usually much faster)
 - After evaluating the patient, the IBH clinician will schedule the patient for any needed follow up (e.g. Telehealth visit with IBH)
 - Use this for ALL referrals, regardless of urgency, as it connects our patients to care the most quickly. Patients are very receptive and welcoming of having this real-time outreach and support.
 - 2) Use the IBH EPIC referral:
 - Type "IBH" in the order field and the order will come up
 - Specify IBH clinician type and reason for referral
 - Intervention/Maintenance: Liaison drives ongoing coordination of care, Emerging needs identified (Liaison completes pharmacy needs, Referrals to nursing, navigators and schedulers for social, SODH and ambulatory needs).
 - Medication Consultation Pager: 0237
 - Emergency: Call BEST 800-981-4357

pg. 6 [5.8.2020]

• eSignatures in EPIC

- o How to create your eSignature in EPIC
 - Sign a blank white paper with a dark pen
 - Scan the signature. You can either:
 - Use a personal scanner at home
 - Use your phone by utilizing a scanning application (e.g. GeniusScan) and then email the file to yourself.
 - Crop the image so that it's just the signature showing with as little white space as possible
 - Save as a .JPG or .JPEG file on your computer.
 - Open SmartPhrase Manager in EPIC
 - Start a New Smart Phrase with any title that you can remember
 - Click the Star -> Go to "All Other Tools" -> "Insert Image"
 - Find your image from your computer and insert
 - Save the SmartPhrase and you can now put this signature at the end of your letters
- o Disclaimer
 - Anyone with access to EPIC may have access to your eSignature if they access your SmartPhrases
 - Could consider having the image saved on your personal private computer and then creating and deleting the SmartPhrase when signature is needed if security is a concern

MyChart (EPIC)

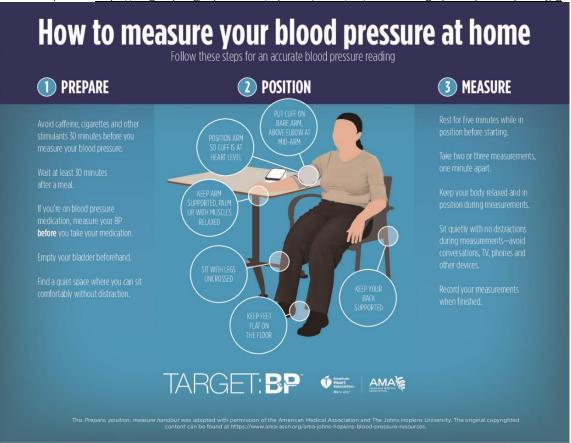
- MyChart Sign Up
 - Encourage patients to sign up during Telemedicine visits if not yet signed up. Currently only "45"% of clinic signed up for MyChart.
 - Send an email to the patient with instructions for sign up:
 - [More → Rarely Used → MyChart Administration then use the MyChart Email Signup button in the upper left hand corner]
 - Patient can sign up by going to a website:
 - https://mychart.bmc.org/mychart/signup and fill out the form.

 For assistance they can call 1-844-635-1390 or email mychart.help@bmc.org

pg. 7 [5.8.2020]

APPENDIX A: How to Monitor Blood Pressure at Home

- How to measure blood pressure:
 - o Avoid taking blood pressure on arm with fistula and/or on the side of mastectomy if applicable
 - English: https://targetbp.org/wp-content/uploads/2017/07/How-to-measure-your-blood-pressure_patient-pdf.jpg
 - o Spanish: https://targetbp.org/wp-content/uploads/2018/04/SMBP-Infographic-Spanish-pdf-1.jpg



Disclaimer: Each blood pressure cuff may be slightly different, so always refer to your user's manual for specific instructions on how to place each cuff.

• <u>Call clinic:</u> if the top number (Systolic) is:

- Greater than 180
 - Hypertension is often times asymptomatic, however, can lead to some emergency conditions.
 Symptoms can include but are not exclusive to: chest pain, shortness of breath, nausea/vomiting, visual changes, confusion, seizures, headaches, speech changes, numbness/tingling or extremity weakness
- Less than 100 +/- symptoms of low blood pressure
 - Symptoms of low blood pressure can include but are not exclusive to: dizziness, lightheadedness, nausea, fainting, weakness, lack of concentration, confusion, blurred vision, cold/clammy/pale skin, fatigue

pg. 8 [5.8.2020]

APPENDIX B: How to Monitor Blood Glucose at home

How to measure blood glucose

- o After washing your hands in warm water, insert a test strip into your meter.
- o Use your lancing device on the side of your fingertip to get a drop of blood
 - Use the side of fingertips (less nerve endings)
 - Do it quickly but get deep enough (slow insertions hurt more)
 - Rotate fingers that are utilized
- o Touch and hold the edge of the test strip to the drop of blood and wait for the result.
- o Your blood glucose level will appear on the meter's display
- o English: https://www.diabeteseducator.org/docs/default-source/living-with-diabetes/tip-sheets/blood-glucose-monitoring/insidertipstricks-final.pdf

Spanish: https://www.diabeteseducator.org/docs/default-source/living-with-diabetes/tip-sheets/blood-glucose-monitoring/insidertips-amp-tricks 2019spanish.pdf



Disclaimer: Each glucometer may be slightly different, so always refer to your user's manual for specific instructions on use.

- Check blood sugar according to how frequently your provider has instructed.
 - o This will vary based on your medication requirements.

• <u>Call clinic</u> if blood sugar:

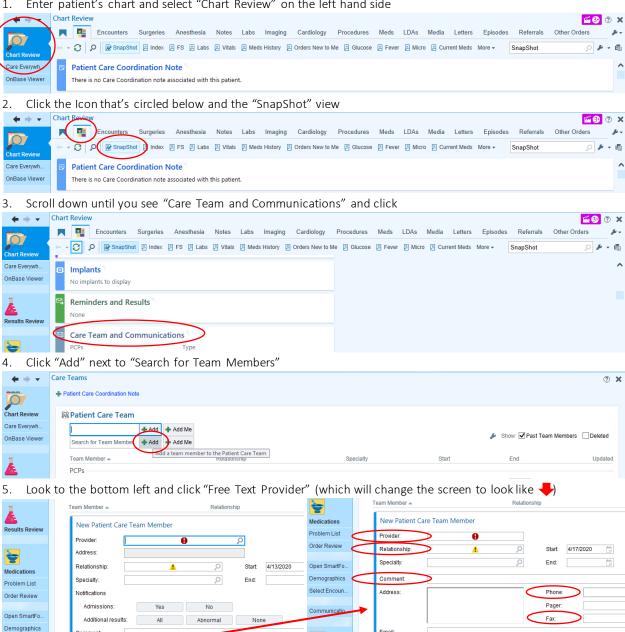
- Less than 70 once +/- symptoms of low blood sugars.
 - Symptoms of low blood sugar can include but are not exclusive to: shakiness, sweating, feeling clammy, mood changes (irritable and short tempered), hunger, nausea, restless sleep, fast heartbeat, blurred vision, pale skin or feeling anxious
- o Greater than 350 for three or more times
 - Symptoms of high blood sugar can include but are not exclusive to: dry mouth, increase thirst, weakness, headache, blurred vision, frequent urination, nausea/vomiting, abdominal pain, confusion

pg. 9 [5.8.2020]

^{*}Photo from ADA Website: <u>https://www.diabetes.org/sites/default/files/styles/full_width/public/2019-06/Bloodglucosetesting_50%2050.jpg</u>

APPENDIX C: How to Input VNA Information in EPIC Care Teams

Enter patient's chart and select "Chart Review" on the left hand side



Fill in VNA Contact Information:

Free Text Provider

Comment

Select Encoun...

Communicatio.

Provider: Write VNA agency name

Switch to entering a free text provider (Alt+P)

- b. Relationship: VNA
- Phone and Fax: VNA agency phone number and fax information
- d. Comments: If available write Agency contact name for patient (e.g. Nurse's name) and phone number

Patient Station

Select Provider

7. Accept and exit patient's chart

pg. 10 [5.8.2020]