# Integrating Patient-Reported Outcomes into Electronic Health Record Systems in Oncology

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#### Disclosures

**Employer**: University of North Carolina

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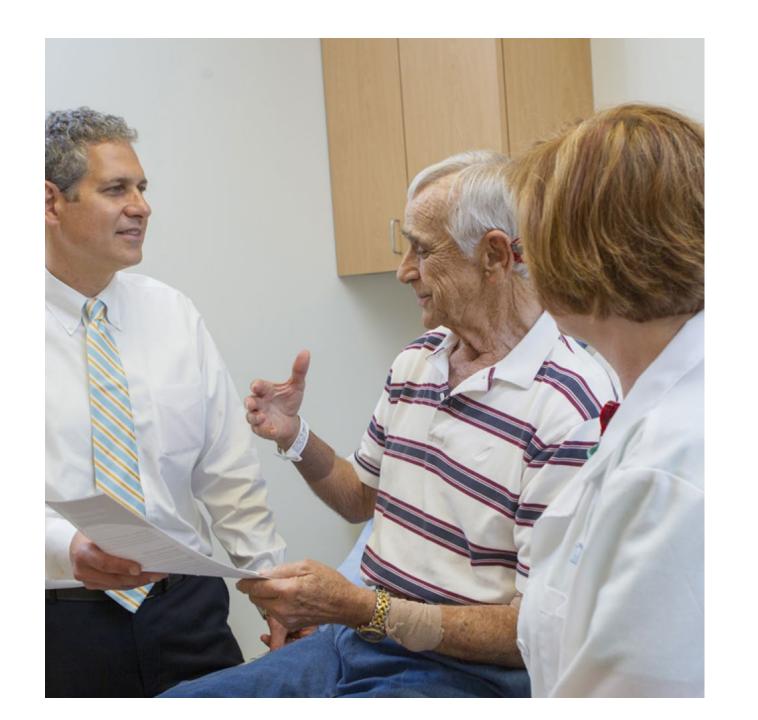
Outcomes Research Institute

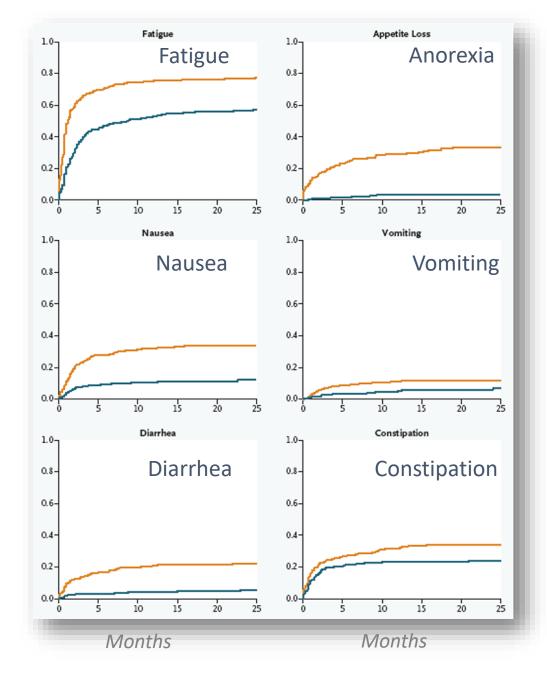
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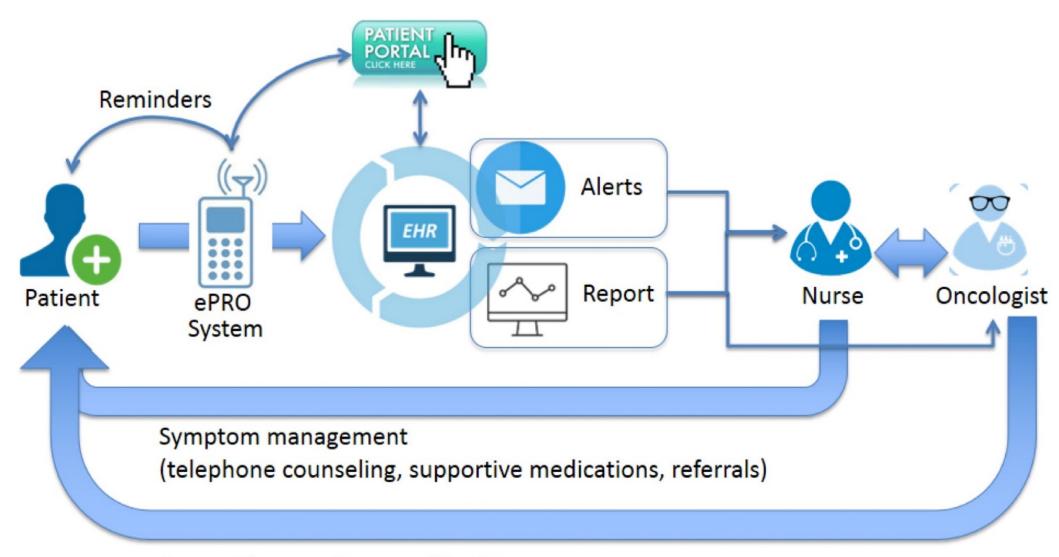




Cumulative incidence of patient vs. clinician reporting of the same symptoms over time, showing under-reporting by clinicians compared to patient self-report



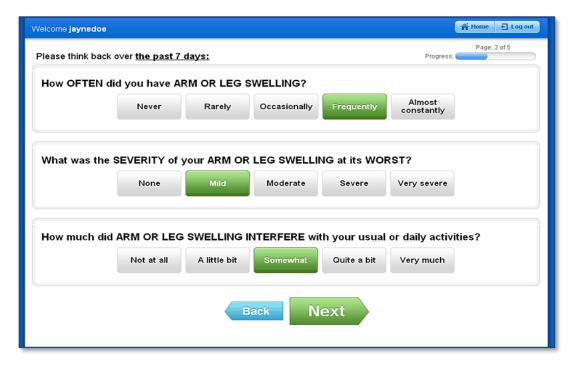
#### Solution: Integrate Patient Self-Reporting into EHR Workflow

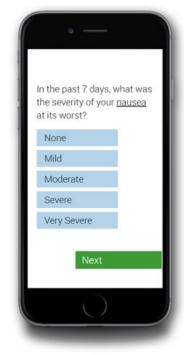


Cancer therapy dose modifications

# Examples of PRO Interfaces in Use

#### Example PRO Patient Interface (Free Standing PRO System)





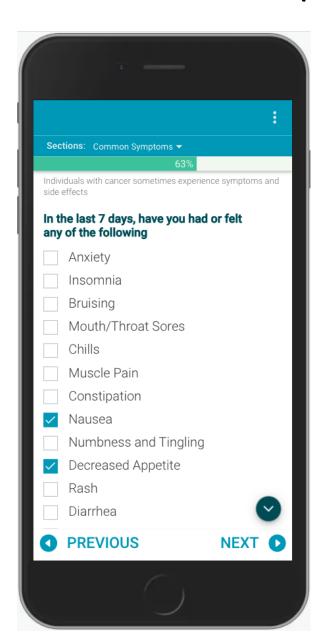
Mobile

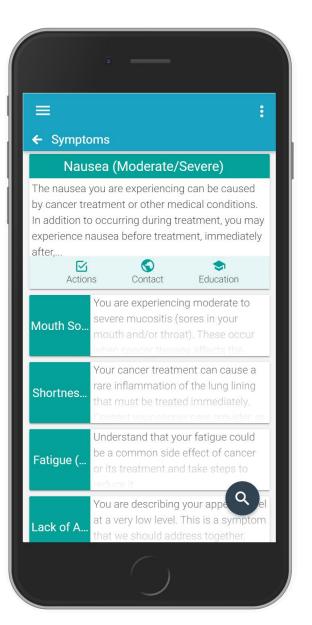


Automated Telephone Systems

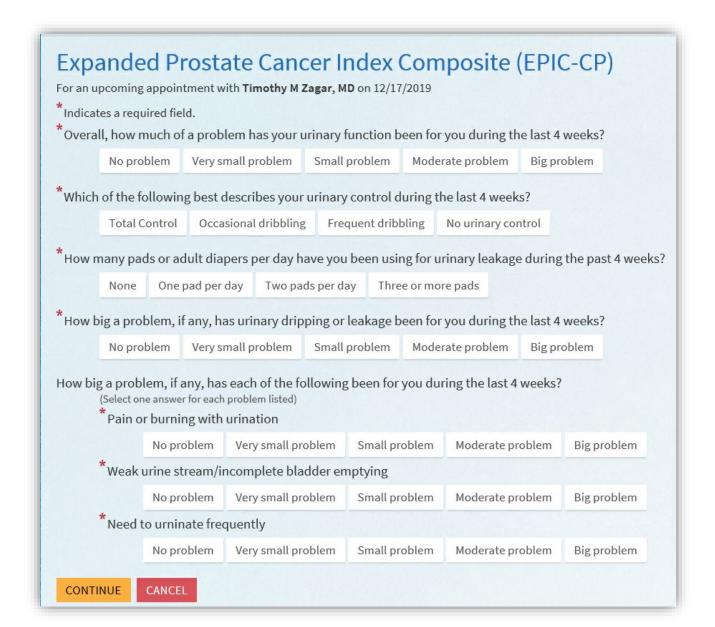
Web

#### Example PRO Patient Interface (PRO System Interfaced with EHR)



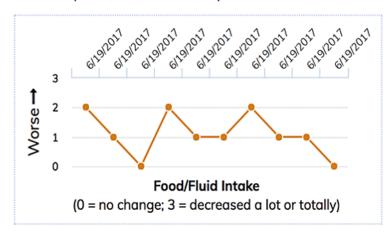


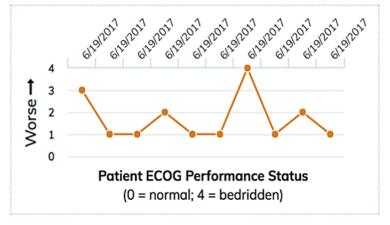
#### Example PRO Patient Interface (PRO in Native EHR Functionality)

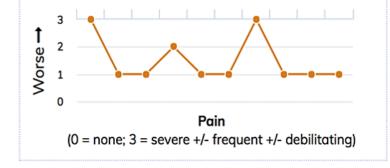


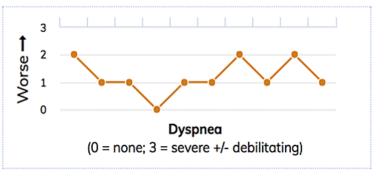
#### Example Clinician Visualization of PRO Data (Free Standing System)

- Severe symptoms on 6/19/2017: Activity Level, Appetite, Nausea, Vomiting, Dyspnea, Diarrhea, Constipation, Pain, Insomnia, Depression.
- Worsened symptoms between 6/12/2017 and 6/19/2017: Activity Level, Appetite, Nausea, Vomiting, Dyspnea, Diarrhea, Constipation, Pain, Insomnia, Depression.
- Improved symptoms between 6/12/2017 and 6/19/2017: Activity Level, Appetite, Nausea, Vomiting, Dyspnea, Diarrhea, Constipation, Pain, Insomnia, Depression.

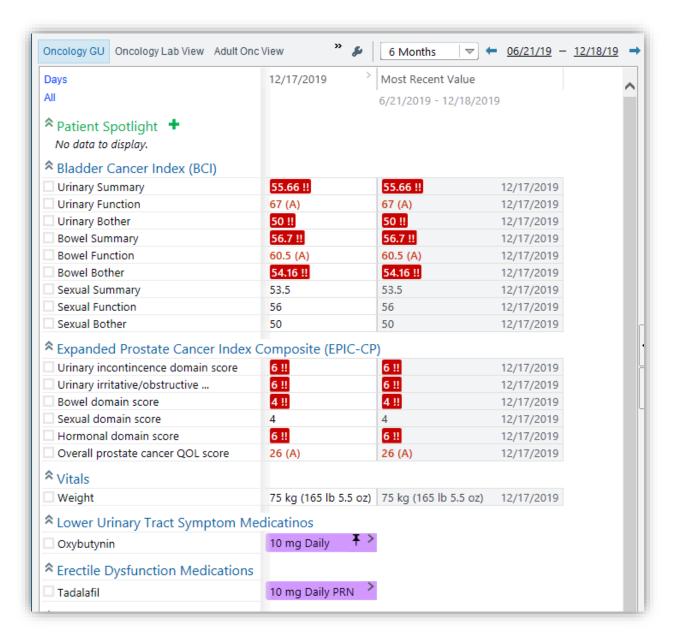




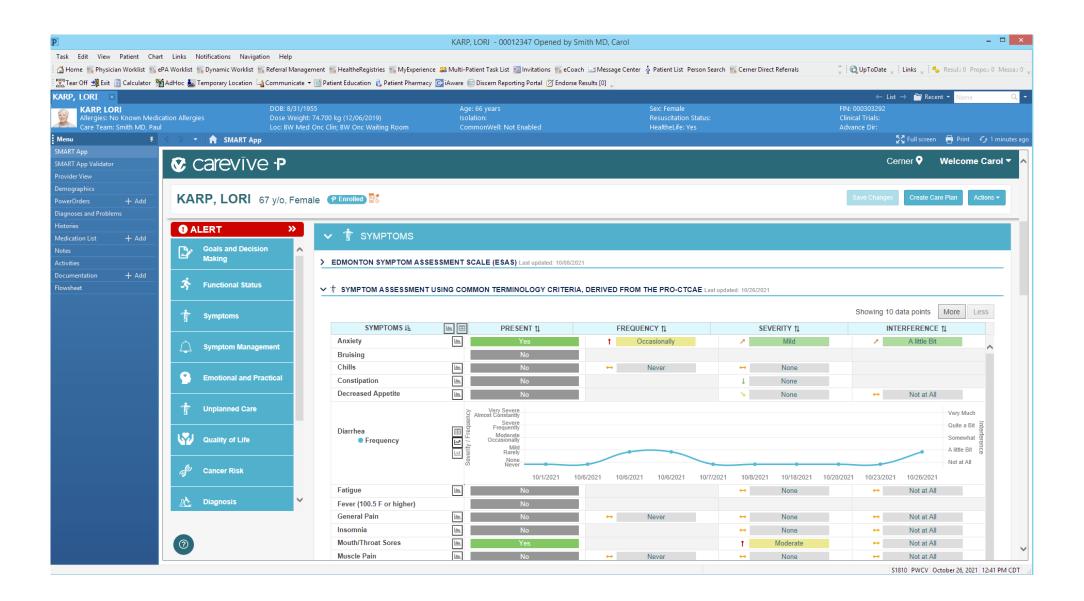




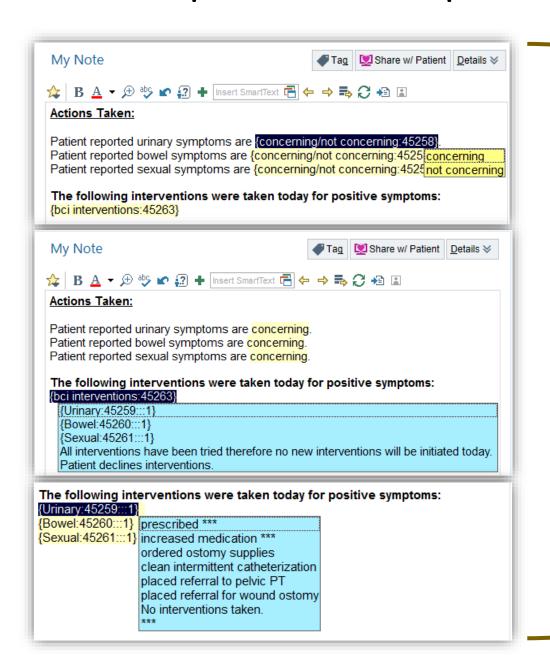
#### Example Clinician Visualization of PRO Data in EHR

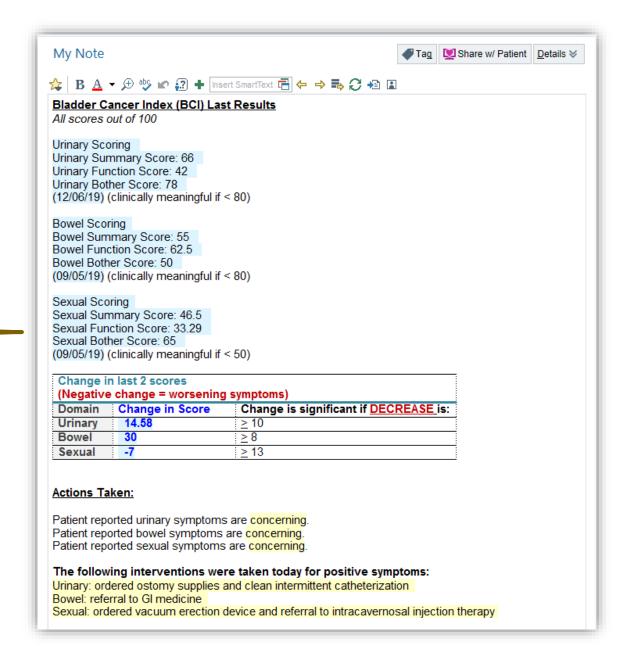


#### Example Clinician Visualization of PRO Data in EHR



#### Example Clinician Importation of PRO Data into EHR Clinic Notes



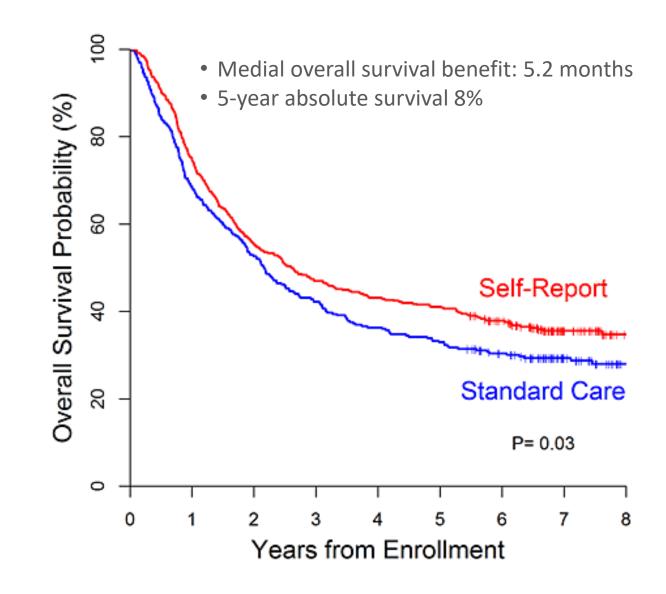


#### **Multiple Uses of PRO** Data in the EHR **SELF-PATIENT EFFICACY PRO SYSTEM RESEARCHERS/** ADMINISTRATORS/ **HOSPITALS CLINICIANS COORDINATORS PAYERS INDIVIDUAL LOCAL QUALITY REAL WORLD POPULATION PATIENT HEALTH DATA DATA MANAGEMENT**

# Benefits of PROs in Clinical Practice

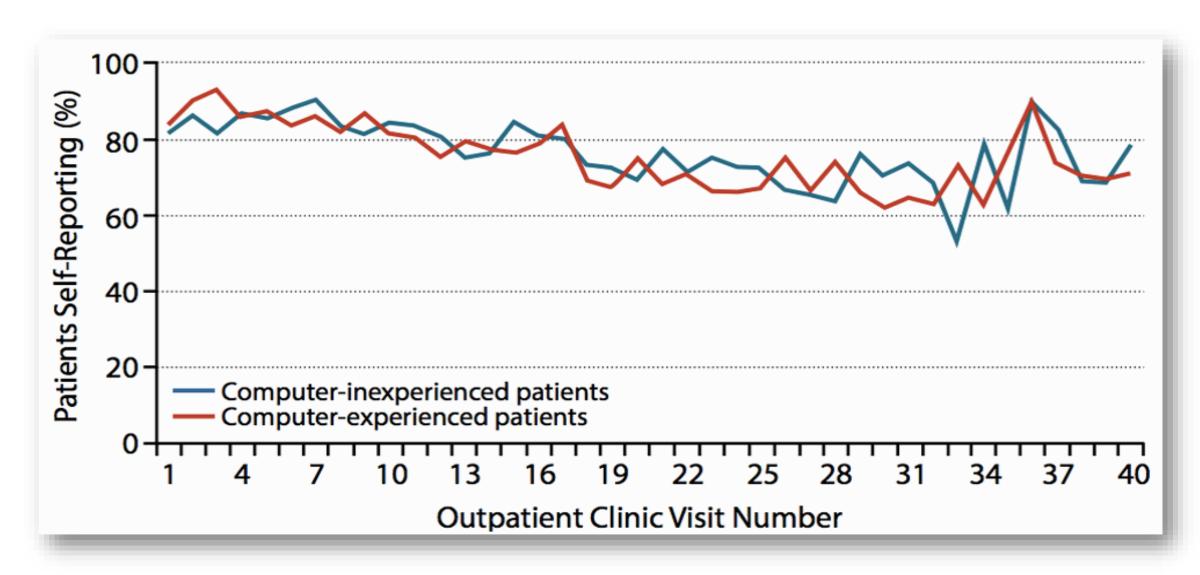
Prior RCTs and population research demonstrate statistically significant and clinically meaningful improvements in:

- Symptom control
- Quality of life
- Physical function
- Communication
- ER visits
- Hospitalizations
- Overall survival



### Feasibility of Collecting PROs in Clinical Practice





## Key Technical Functions for PROs in EHRs

- Administrative interface
  - Registration form to enroll patient to initiate PRO reporting
  - Dashboard showing patient/panel compliance with PRO reporting
- Clinician interface
  - Alert notifications: Inbasket receipt of notifications, with audit trail for clearing alerts
  - Data visualization: Ability to view longitudinal data in <u>table</u> and <u>line graph</u> formats
- Patient interface
  - Automated e-prompts reminding when to self-report (email, text, phone call)
    - Follow up e-prompt(s) if don't self-report in response to initial e-prompt
  - PRO surveys with easy access (this is a major pitfall of native EHR PRO systems)
  - Alert notifications triggered to clinicians for severe/worsening symptoms

# Key Barrier to Integrating PROs in Cancer Clinical Care: Reimbursement

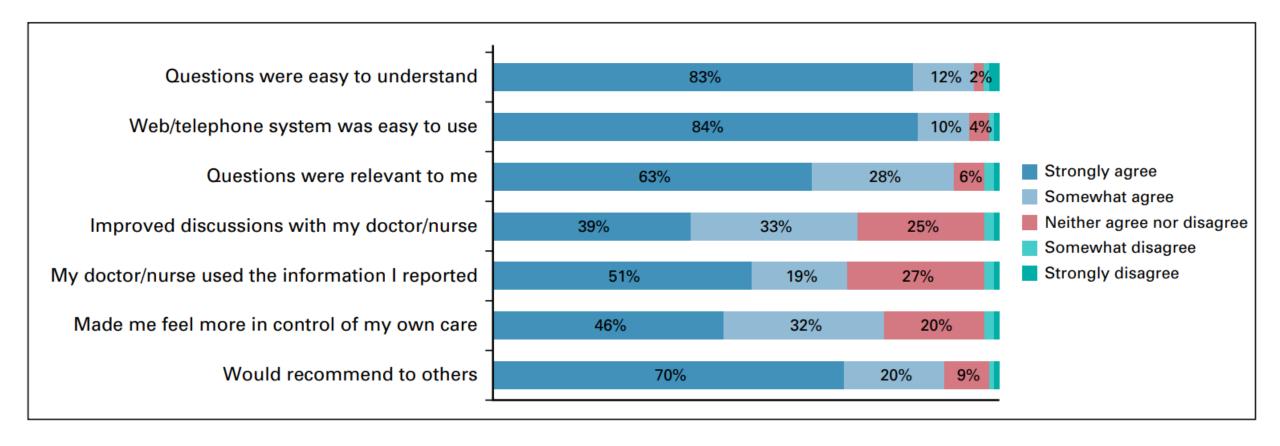
- New CPT codes for Remote Therapeutic Monitoring (98975, 98976, 98977, 98980, 98981)
- Cover use of software or connected devices that collect and transmit data to practices, and monitoring by supervised clinical personnel (e.g., navigators)
- Limitations that currently preclude covering PROs in oncology:
  - Currently restricted to respiratory and musculoskeletal conditions
  - Require at least 16 transmissions of data/month which is more than typical for oncology PRO systems (usually ~4/month)
  - Require direct MD supervision of personnel, which is unrealistic in oncology

# Thank You

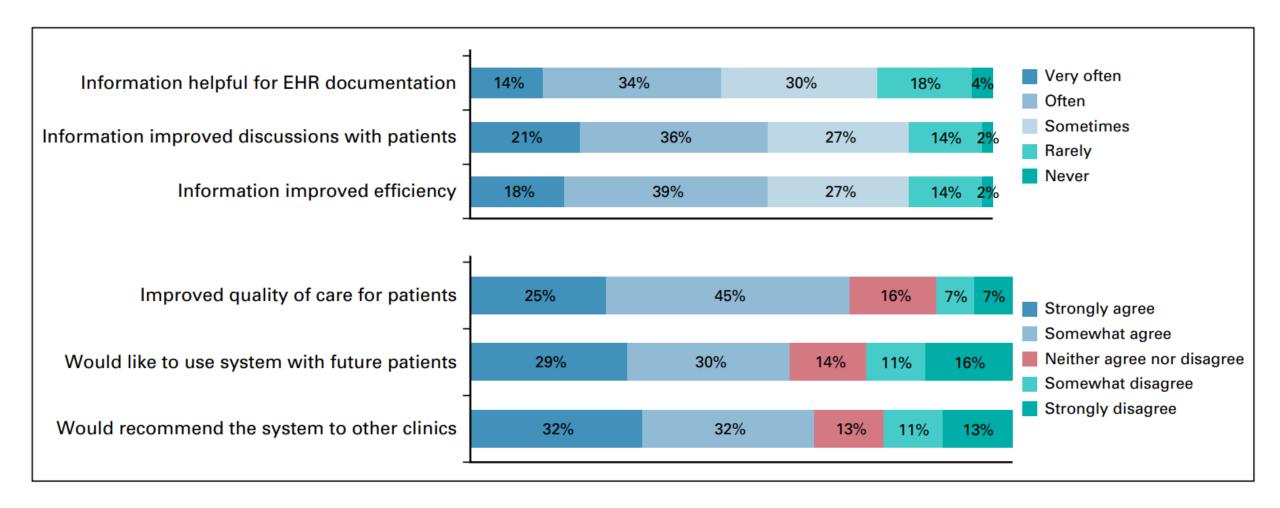


# Appendix: Additional Background Slides

## Patient Satisfaction with PRO Digital Monitoring



# Nurse Impressions of PRO Digital Monitoring



#### Integration with Consumer PGHD Technologies

