Michiana Finds Clear Value in Implementing Clear Value Plus™

Clear Value Plus (CVP) is a regimen support tool for physicians that highlights evidence-based treatment options and provides financial information at the point of care. The technology helps practices provide high-quality treatment to patients, evaluate cost-effectiveness and efficiently document delivery of evidence-based care.

Enhancing the Patient Experience

Dr. Mohamed Farhat, Medical Oncologist at Michiana and Assistant Professor at Rush University Medical Center has fully embraced CVP. Using CVP has accelerated predetermination and prior authorization which results in patients receiving treatment sooner. “The software helps me quickly see what treatments are available, which is particularly useful in third- to fifth-line treatment. It also gives me immediate visibility into regimens covered by the patients’ insurance,” noted Farhat.

CVP’s functionally has improved the care and treatment experience for Dr. Farhat’s patients. Prior to using CVP, Dr. Farhat faced greater risk that a treatment might not be covered, that payer authorization would be denied or that he would have to bring the patient in again for additional consultation.

“CVP has enabled more efficient use of my time, back office time and most importantly—the patient’s time,” said Farhat.

Enabling More Focus on Patient Care

Nursing staff at Michiana have also benefited from CVP. They can access physician orders, dosing and scheduling easily within the tool to counsel patients on their care plans. Using CVP saves nursing staff time by providing an accurate and easily accessible record of regimen and prior authorization details, thereby removing the tasks of following up with back office staff and physicians for this information. Easing the administrative burden on nurses has freed them to focus more of their time on patient care.

Faster Prior Authorizations, Reduced Staff Turnover and Simple IT Support

After experiencing how CVP could simplify the authorization process—by presenting easy to access clinical summaries—office staff mandated that prior authorizations would only happen if a complete entry had been made into CVP.

Because of this, the back office now has all relevant information captured in one place and in the language required by payers for prior authorization. Without CVP, back office staff spent more time chasing down physicians for additional details or asking nurses to translate clinical language. Denial rates have gone down.
CVP saves both time and staffing resources for the back office. There is now lower turnover for the prior authorization team as the software does a lot of the legwork, enabling the team to focus on their primary responsibilities and increasing job satisfaction.

From an IT perspective, CVP was easy to launch. Michiana Informatics Manager Neal Connolly noted, “CVP is a well-designed, stable platform with minimal effort required on my part to support.”

With an intuitive and user-friendly interface, minimal training is required. Maintenance and support has not been a burden for the practice, as updates to clinical content and the web-based application are made centrally.

“CVP helps us manage the intersection of regulatory considerations and patient care. It has helped validate that what we have been doing all along is the right thing and now we know that our physicians will be paid for it. We are on guideline just by doing what we thought was right and best for the patient—reports from CVP confirm that,” concluded Michiana Chief Clinical Officer Kim Woofter.

For more information about Clear Value Plus for your practice, email our team at msh.cvp@mckesson.com.

CVP KEY BENEFITS

For physicians:
• Access to NCCN Guidelines at the point of care
• Visibility into treatment cost and coverage for patients
• Accelerated prior authorization and faster reimbursement

For patients:
• Not offered unaffordable or uncovered treatments
• Faster time to treatment
• Reduces additional visits for reconsultation

For nurses:
• One-stop access to physician orders, dosing and scheduling for care plan counseling

For back office staff:
• Information captured as required by payers for prior authorization submissions
• Reduced staff turnover and required staffing support
• Reduced number of first claim submission denials, positively impacting cash flow
• Intuitive interface for real time pathways compliance reporting

Most importantly for the back office staff, clinical staff and patients, CVP has sped up turnaround for prior authorizations on average from three or four days to one or two days—which means patients can be treated more quickly and reimbursement arrives sooner.