

HiMS Health Information Management Systems



to many behavioral health clinics. In an industry where technology implementation typically takes nine months or more, smaller clinics were forced to immediately adopt telehealth solutions. Not only was this an unrealistic task for most health care technology providers, but clinics that failed to instantly implement telemedicine were at high risk of going out of business. In an industry where technology adoption is a slow and arduous process, clinics that relied on inflexible. hardware-driven systems noticed sharp declines in revenue.

Telehealth previously existed as an ancillary care service, but the pandemic launched the technology to the forefront of care coordination. For example, the Oregon Health & Science University's number of telehealth visits skyrocketed from 1,100 in February to nearly 13,000 in March. Nearly overnight, behavioral health clinics were expected to have a plan to address the preexisting challenge of rising patient population and declining provider availability—all without coming into contact with patients. COVID-19 forced clinics to rely on technology more than ever before.

Launching telehealth services was an especially difficult task for community clinics in particular. An analysis by Health Affairs stated that just 56% of community clinics had telehealth capabilities in 2018, and 47% of those clinics only used it to speak with other clinical specialists—not with patients. With most community clinics facing a life or death situation, implementing patient-focused telehealth became non-negotiable.

REASSURANCE IN THE FACE OF ADVERSITY

COPE Community Services is a private, nonprofit health care provider that offers integrated health care services throughout multiple outpatient clinics in Tucson, Arizona. As a long-time highly-regarded organization devoted to offering effective treatment services to its patients and serving as a catalyst for recovery, the organization is well-known for its commitment to patient care. COPE's mission is to provide best practice-based, integrated physical and mental healthcare to improve the health and well-being of each person and community they serve.

When COVID first made an appearance locally, many providers were completely unprepared for the new reality they were faced with. Suddenly, delivering care seemed like an insurmountable obstacle, but in many ways, COPE was already ahead of its competition. But just like most health care providers during COVID-19, COPE needed a way to quickly ramp up its telemedicine services for its 19 clinics across Southern Arizona. COPE was already providing telemedicine for patients with substance abuse issues in rural areas, but the need for the service exploded during the onset of COVID-19. Telemedicine went from being a small portion of COPE's services to its primary source of revenue in less than a month. However, the widespread telemedicine adoption introduced new challenges for maintaining the revenue cycle. COPE needed an efficient way to ensure payment for virtual claims—something that can be difficult to achieve through legacy technology. As an organization with more than 450 employees and 15,000 patients, this was no easy undertaking. For this reason, functionality and ease-of-use were paramount for COPE.

"WE KNEW WE NEEDED A
TECHNOLOGY PROVIDER THAT COULD
SEAMLESSLY INTEGRATE TELEHEALTH
WITH ITS REVENUE CYCLE WITHOUT
MISSING A BEAT," SAID ROD COOK,
CEO OF COPE COMMUNITY SERVICES.
"WE HAD TO FIND A WAY TO
PROVIDE TELEHEALTH SERVICES, BILL
ACCURATELY AND RECEIVE PAYMENT
WITHOUT LOSING BILLABLE HOURS."

Having technology manage the health care revenue cycle can alleviate stress from clinics, but only when it's done properly. When technology fails to deliver, clinics can risk spending hours on the phone clarifying insurance claims. More time spent on administration means less time and resources available for patients.



TWO-DAY TURNAROUND ACHIEVES SEAMLESS RCM

Since COPE was already using Axiom software, the provider looked to HiMS to ensure a stress-free telemedicine experience. To address COVID-19, Axiom needed to be updated with the latest Healthcare Common Procedure Coding System (HCPCS) codes for certain COVID-19 diagnostic tests, as well as Current Procedural Terminology (CPT) codes for testing purposes. COPE also needed a way to bill for services that weren't previously provided via telehealth.

To achieve this, HiMS worked closely with COPE to add the updated billing code modifiers for virtual care, and this task was completed in just 48 hours. COPE was then able to bill for its influx in telehealth services quickly and accurately without downtime. Because Axiom is entirely cloud-based without

reliance on clunky and outdated hardware, it was able to update COPE's code modifiers remotely without issue.

Another thing HiMS did was purchase laptops with VPN access for COPE so its employees could work remotely during COVID-19. HiMS had a handful of laptops in stock, but the company needed to purchase 50 laptops to meet COPE's needs. During a time when supply chains were disrupted, the company found a way to have 50 laptops delivered to COPE in only three short days.

Because HiMS already had the software and vendor relationships in place to make device deployment easy it took just 72 hours total for shipping, inventory, software downloads, creating VPN access and deploying to staff.



In addition, there was a short learning curve for COPE's staff, since everyone had complete access to their files at home through the VPN. HiMS's IT department also conducted Zoom tutorials with clinicians to eliminate any technical issues. Having email, Zoom and everything preconfigured was critical for alleviating the transition burden.

COPE's clinics' use of all HiMS services made its transition to a virtual care model significantly faster than it would've been using multiple technology providers. The reason for this is HiMS's prioritization of interoperability. Through Axiom, all of COPE's technologies, including its telehealth and Revenue Cycle Management (RCM) can communicate with each other seamlessly. When a telehealth appointment ends, Axiom enables COPE to collect that patient data and bill automatically without the risk of human error. This feature allowed COPE to be among the few nonprofit health care providers that didn't experience a revenue decrease during the pandemic.

"DURING THE FIRST MONTHS OF THE COVID PANDEMIC, CLINICS WERE REPORTING A 65-70% LOSS IN BILLABLE HOURS, BUT COPE'S BILLING ACTUALLY INCREASED," SAID COOK. "WE ARE ONE OF THE FEW ORGANIZATIONS THAT CAN SAY THAT AND THE HIMS AXIOM EHR PLATFORM IS A BIG REASON."

Not only was COPE's technology implementation completed significantly faster than the industry average, it was also customized to meet its unique needs. HiMS guided COPE through a custom programming process that allowed the organization to decide how its data was displayed and loaded. This is in addition to other robust features that COPE enjoys through Axiom, including custom form builders, user-friendly EHR interface and little to no learning curve for staff members.

A new website to accept online enrollments for COPE was also created. This turnkey solution ensured continuity and helped ease the pandemic-related stress staff members were experiencing. Because of the interconnected technology, clinical teams were able to focus on quality of care rather than on their technology.



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TELEHEALTH IN A POST-COVID WORLD

COVID-19 launched telehealth to the forefront of care, and it's here to stay. Before the pandemic, U.S. telehealth services were estimated at \$3 billion, with the largest players focused on virtual urgent care. Since the acceleration of telehealth adoption, it's now estimated that a staggering \$250 billion of U.S. health care spend could be spent on virtual services.

Because of this acceleration of use, clinics should optimize their telehealth solution to maximize ROI. Behavioral and low-acuity health care like cough, cold and flu are two avenues worth planning for. Telehealth options make patients more likely to engage with providers for conditions they previously ignored. As these patients are now being deterred from visiting in-person clinics, effective telehealth can help maximize revenue.

When COPE needed a quick, effective and easy telehealth implementation without losing revenue, HiMS exceeded all expectations.

For more information on how HiMS can help your clinic implement advanced and user-friendly health care technology solutions, please visit HMSFIRST.COM and contact us today.