

VHA OPES



Announcements

FY 2010 Physician Productivity Cube Update: The cube was updated on Nov 30, 2010 and is now current through September 2010 (pay period 19).

FEATURED SITES



Productivity

- Cube Authorized Users by VISN
- Physician Productivity Cube & Reports
- Physician Productivity Study Data



Efficiency

- Stochastic Frontier Analysis Efficiency
- Efficiency Opportunity Grid
- ACSC
- Emergency Department ED Model
- Fee Care Model
- Pharmacy Model
- Operating Room (OR) Efficiency



Staffing

- Specialty Physician Workforce
- Dialysis



Other Products

- Tertiary Facility Informatic
- Analytics Academy
- Facility Complexity Levels
- DUSH/OM Cluster Reports

Directives & Guidance

- Related VHA Directives

Resource Links

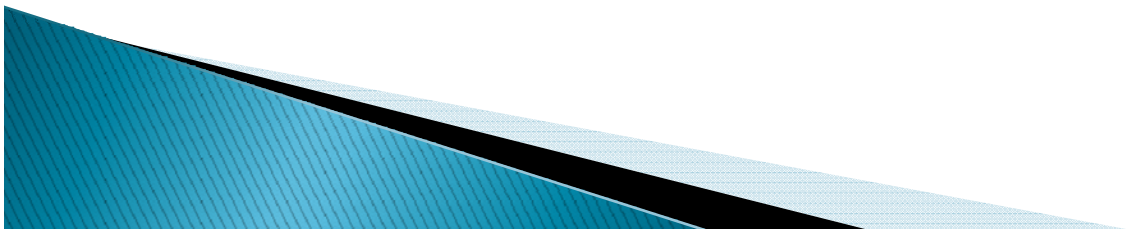
- CMS Physician Fee Schedu files
- NPI Registry
- Primary Care Panel Manag (PCMM)
- Inpatient Evaluation Cent (IPEC)
- OPES Org Chart

Useful Web Links

- ▶ OPES Web Portal: <http://opes.vssc.med.va.gov/Pages/Default.aspx>
- ▶ Physician Specialty Workforce & Support Staff Reports:
<http://opes.vssc.med.va.gov/Pages/SpecialtyPhysicianWorkforce.aspx>
- ▶ Productivity Benchmark Reports:
<http://opes.vssc.med.va.gov/PhysicianProductivityStudyData/Pages/default.aspx>
- ▶ Physician Cube Authorized User List:
<http://opes.vssc.med.va.gov/Cube%20Authorized%20Users%20by%20VISN/Forms/AllItems.aspx>
- ▶ Labor Mapping, Person Class, Productivity, & other related guidance & directives:
<http://opes.vssc.med.va.gov/Pages/vhadirectives.aspx>
- ▶ Link to find Provider's name by their Provider Internal Entry Number – reporting tool available on the VSSC website:
- ▶ The report option below has another intended purpose but may be of assistance in terms of identifying and validating person classes. Another local option would be to have a data person at your facility run a VISTA fileman report off of the New Person file that gives you the Name and Provider Internal Entry number.
[Wait Time Provider Detail History Report](http://vssc.med.va.gov/WaitTime/Provider_Detail.asp)
http://vssc.med.va.gov/WaitTime/Provider_Detail.asp
Report displays a historical list of all providers for each facility by name, VistA provider ID, corresponding Person Class codes, effective dates for those Person Class codes, and whether this provider is classified as “Qualified” for wait time reporting purposes.
- ▶ CMS Physician Fee Schedules (RVUs):
<http://www.cms.gov/PhysicianFeeSched/PFSRVF/list.asp>
- ▶ NPI Registry: <https://nppes.cms.hhs.gov/NPPES/NPIRegistryHome.do>

Local Monitoring

- ▶ Thanks to
 - June Malone
 - Russell Lemle and David Greer
 - Miles McFall



ACRP Report Process

- ▶ Select Mental Health Clinician's Menu Option: **^ACRP**
- ▶ ACRP Ad Hoc Report Menu [SCRPW AD HOC RPT MENU]
- ▶ ACRP Reports Menu [SCRPW ACRP REPORTS MENU]
- ▶ ACRP Ad Hoc Report [SCRPW AD HOC REPORT]
- ▶ Type '^' to stop, or choose a number from 1 to 3 :1 **ACRP Ad Hoc Report Menu**
- ▶ Select ACRP Ad Hoc Report Menu Option:
- ▶ AAH ACRP Ad Hoc Report
- ▶ DTP Display Ad Hoc Report Template Parameters
- ▶ PAH Print from Ad Hoc Template
- ▶
- ▶ Select ACRP Ad Hoc Report Menu Option: **AAH**
- ▶
- ▶ Select one of the following:
- ▶ D DETAILED
- ▶ S SUMMARY
- ▶
- ▶ Select report format: SUMMARY// **D**

ACRP Report Process (2)

- ▶ Select one of the following:
 - ▶ E ENCOUNTER/VISIT/UNIQUE LIST
 - ▶ D DIAGNOSIS/PROCEDURE RANKING
 - ▶ B BOTH ACTIVITY & DX/PROC. LISTS
- ▶
- ▶ Select type of detail: B
- ▶ Select one of the following:
 - ▶ E ENCOUNTER
 - ▶ V VISIT
 - ▶ U UNIQUE
- ▶
- ▶ List activity by: E
- ▶
- ▶ Limit Dx/procedure list to most frequent: (1-999): 50// (Enter)
- ▶ Select one of the following:
 - ▶ F FORMATTED TEXT
 - ▶ D DELIMITED VALUES FOR EXPORT TO SPREADSHEET

Produce output as: FORMATTED TEXT// (Enter)

ACRP Report Process (3)

- ▶ Select one of the following:
 - ▶ CL CLINIC
 - ▶ SC STOP CODE
 - ▶ PR PROVIDER
 - ▶ DX DIAGNOSIS
 - ▶ AP AMBULATORY PROCEDURE
 - ▶ VF V FILE ELEMENT
 - ▶ PD PATIENT DEMOGRAPHICS
 - ▶ PE PATIENT ELIGIBILITY
 - ▶ PC PRIMARY CARE
 - ▶ EH ENROLLMENT (HISTORICAL)
 - ▶ EC ENROLLMENT (CURRENT)
 - ▶ OE OUTPATIENT ENCOUNTER
 - ▶ PM PERF MONITOR
 - ▶
- ▶ Select report perspective: **PR**

ACRP Report Process (4)

- ▶ Select one of the following:
 - ▶
 - ▶ PP PRIMARY PROVIDER
 - ▶ SP SECONDARY PROVIDER
 - ▶ AP ALL PROVIDERS
 - ▶ PC PRIMARY PROVIDER PERSON CLASS
 - ▶ SC SECONDARY PROVIDER PERSON CLASS
 - ▶ AC ALL PROVIDERS PERSON CLASS
 - ▶
- ▶ Select PROVIDER category: **AP**

- ▶ Select one of the following:
 - ▶ L LIST
 - ▶ N NULL (NO DATA VALUE)
 - ▶
- ▶ Limit this factor by: **L**

ACRP Report Process (5)

- ▶ Select NEW PERSON NAME: **(Last Name, First Name)**
- ▶ Select NEW PERSON NAME: **(Enter when last name submitted)**
- ▶ Beginning date: 1/1/10 (JAN 01, 2010)
- ▶ Ending date: T (JAN 11, 2011)
- ▶ Select additional output limiting factor: (optional) **(Enter)**

- ▶ Select one of the following:
 - ▶ CL CLINIC
 - ▶ SC STOP CODE
 - ▶ PR PROVIDER
 - ▶ DX DIAGNOSIS
 - ▶ AP AMBULATORY PROCEDURE
 - ▶ VF V FILE ELEMENT
 - ▶ PD PATIENT DEMOGRAPHICS
 - ▶ PE PATIENT ELIGIBILITY
 - ▶ PC PRIMARY CARE
 - ▶ EH ENROLLMENT (HISTORICAL)
 - ▶ EC ENROLLMENT (CURRENT)
 - ▶ OE OUTPATIENT ENCOUNTER
 - ▶ PM PERF MONITOR
- ▶ Select limiting factor: **(Enter)**

ACRP Report Process (6)

- ▶ Select one of the following:
 - ▶
 - ▶ A ALPHABETIC
 - ▶ E ENCOUNTER TOTAL
 - ▶ V VISIT TOTAL
 - ▶ U UNIQUE TOTAL
 - ▶
- ▶ Select report print order: ALPHABETIC// **(Enter)**
- ▶ Report descriptive title (optional): **(Enter)**
- ▶ Select additional print fields for patient detail: (optional) **(Enter)**
- ▶ Select one of the following: **(Enter)**
 - ▶ CL CLINIC
 - ▶ SC STOP CODE
 - ▶ PR PROVIDER
 - ▶ DX DIAGNOSIS
 - ▶ AP AMBULATORY PROCEDURE
 - ▶ VF V FILE ELEMENT
 - ▶ PD PATIENT DEMOGRAPHICS
 - ▶ PE PATIENT ELIGIBILITY
 - ▶ PC PRIMARY CARE
 - ▶ EH ENROLLMENT (HISTORICAL)
 - ▶ EC ENROLLMENT (CURRENT)
 - ▶ OE OUTPATIENT ENCOUNTER
 - ▶ PM PERF MONITOR
 - ▶
- ▶ Specify additional print field: **(Enter)**

ACRP Report Process (7)

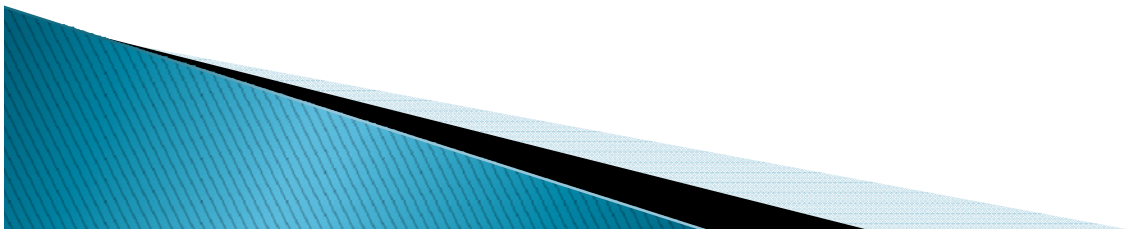
- ▶ Report output format: DETAILED
- ▶ Type of detail: BOTH ACTIVITY & DX/PROC. LISTS
- ▶ List activity detail by: ENCOUNTER
- ▶ Limit Dx/Proc. list to most frequent: 50
- ▶ Produce output as: FORMATTED TEXT
- ▶ Perspective category: PROVIDER
- ▶ Perspective sub-category: ALL PROVIDERS
- ▶ Detail list:
 - ▶ Starting date: JAN 1,2010
 - ▶ Ending date: JAN 11,2011
 - ▶ Output order: ALPHABETIC
 - ▶ Select one of the following:
 - ▶ C CONTINUE
 - ▶ E EDIT PARAMETERS
 - ▶ R RE-DISPLAY PARAMETERS
 - ▶ P PRINT PARAMETERS
 - ▶ Q QUIT
 - ▶
- ▶ Select report action: CONTINUE// **(Enter)**
- ▶ DEVICE: HOME// PSYLJ3
- ▶ Requested Start Time: NOW// **(Enter)**

Individual Provider Productivity

NAME:	Dr. Psychology									
			Q1		Q2		Q3		Q4	
CPT Code	DESCRIPTION	RVUs	#	RVUs	#	RVUs	#	RVUs	#	RVUs
90801	Psy Interview/Dx	2.80	80	224		0		0		0
90804	Psytx, office, 20-30 min	1.21		0		0		0		0
90806	Psytx, off, 45-50 min	1.86	42	78						
90808	Psytx, off., 75-80 min	2.95								
90853	Group tx	.59	301	178						
	TOTALS			480						
	Target			500		500		500		500
	% of Target			96%						

Utilization Metrics– Another Alternative?

- ▶ The closest thing to a productivity metric adopted (nearly) universally by VHA is an accounting of provider time and clinic utilization rates, rather than counting uniques and visits. In our VISN, measuring uniques and visits for productivity is old news and leadership doesn't pay attention to it any more. Decisions to hire staff are based mostly on a "capacity analysis" rather than number of patients seen or visits.
- ▶ It boils down to mapping provider time in DSS so leadership can see where time is going (direct care, administration, teaching, research). Hours of clinic time is fit into "grids" and the Clinic Utilization and Statistical Summary (CUSS) tells us percent of clinic time scheduled and percent of time actually spent seeing patients. These numbers need to be at least 80–85%. And that's it.



Thanks

