Improving e-Prescription Use by Patients

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About Mercy Physician Community PHO

- Primary care office
- Two doctors for internal medicine

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The Project Team

- One office manager **(project leader)**
- Two medical assistants
- Two receptionists
- One quality improvement coach (QIC – facilitator)

The Problem

- At the time of this project, this doctor's office had been using e-prescriptions for one year.

- Up to 50% of patients were still calling the doctor's office for prescription refills when they should have been calling their pharmacies.

- The team identified two scenarios:

  1.) The patient calls the pharmacy and is instructed to call the doctor.

  2.) The patient calls the doctor's office first instead of the pharmacy.

- Conservatively, staff spend about 60 minutes per day talking to patients who call for prescription refills. The two doctors spend about 15 minutes per day talking to patients about this or advising staff.

Project Goals

Reduce the percentage of patients calling the doctor's office for prescription refills from about 50% to about 10%, recognizing that some older patients will continue to call the doctor's office.

Root Cause Analysis

- The problem needed to be broken into two halves, with different root causes. The "Five Whys" and the "Is-Is Not" problem solving methodologies were used.

- The root causes:

  1. Lack of training or diligence at the pharmacies.

  2. Lack of awareness among patients and a leniency in the office to enforce these requirements out of a motivation by staff to be patient-focused. This leniency is exaggerated by a lack of a consistent message from staff to patients when they call.

Addressing Root Causes

Root Cause 1

- Staff advise patients that their pharmacy made an error and ask for the name of the pharmacy.

- For repeat offenders, pharmacy names are elevated to the PHO level for follow-up with management.

Root Cause 2

- All staff and the two doctors use a consistent message to gently reinforce the idea of refills through e-prescriptions.
  - A flow chart was created and distributed to all staff and doctors.
  - Training was conducted on how to use the consistent message.

- Added a reminder message to the answering machine to reinforce to patients that refills should be made through their pharmacies.

Return on Investment

Savings total $37,500 per year (staff time).

- Receptionist, MA time taking phone calls:
  - Approximately 300 minutes/week or 250 hours/year.
  - If staff overhead = $75 per hour, **cost = $18,750 per year.**
  - Members of the practice staff also report increased satisfaction as they are not filling their days with these unnecessary telephone calls.

- Physicians instructing staff or taking phone calls:
  - Approximately 75 minutes/week or 62.5 hours/year.
  - If physician overhead = $300 per hour, **cost = $18,750 year.**
  - ***More important: 62.5 hours per year of physicians' time translates to 250 more patient visits per year.***

Monitoring and Evaluating Over Time

- The quality improvement coach has been following up with each receptionist and office manager every Friday for the past three months to assess progress.

- Each member of the staff reports significant reductions and satisfaction that the consistent message and new answering machine language have solved the problem. Staff members report that calls have dropped to no more than six per week.

For More Information

- Learn more about Mercy Physician Community PHO: www.opns.org/?id=10&sid=1.

- More case study presentations are available from the ASQ Healthcare Division: www.asq.org/health/quality-information/library.

- Read healthcare case study articles from ASQ: www.asq.org/healthcare-use/why-quality/case-studies.html.

- To find articles, books, courses, and other resources on healthcare quality, search the ASQ Knowledge Center:

  www.asq.org/knowledge-center/search.