

**Title: What Gets Measured Gets Done: SouthEast Alaska Regional Health Consortium Electronic Health Record paves the way for effective measuring of tobacco screening and counseling.**

SouthEast Alaska Regional Health Consortium (SEARHC) is a tribal health network with facilities across the archipelago of southeast Alaska. With over 10,000 patients, the need was clear for an electronic health record (EHR) to manage patient risk factors and care. This was especially true in our region. Southeast Alaska is vast, roughly the size of Florida, and inaccessible. The remote communities that make up SEARHC's coverage area are coastal, only accessible by boat or plane. Building the electronic system to link patients, providers and care across this landscape was a challenge. The SEARHC EHR implementation was a long process, coming together in 2012 and 2013.

The SEARHC tobacco team played a strong role in developing systems to screen and track tobacco referrals and counseling. The focus from October 1, 2012 to the present was preparing and addressing the implementation of the new Electronic Medical Record (EHR) system. The first clinic went to EHR in March 2013 with all clinics on EHR by September 2013. Multiple meetings were held with EHR staff to review how the system will work for tobacco including entering data and reporting. In preparation for the EHR, tobacco templates were researched among other Tribal health consortiums through contacts with State of Alaska and Alaska Native Tribal Health Consortium. The templates from Tanana Chiefs Conference were shared with SEARHC and downloaded into our EHR system. New templates were created to assist implementation. In April, the SEARHC tobacco program was ended due to the loss of funds by sequestration. This changed our focus from inputting tobacco cessation data to only working on the Meaningful Use measures that track tobacco screening and counseling. Every clinician is tracked for Meaningful Use measures in order to hold them accountable. Tobacco screening is located on the Wellness Tab and is required. The measures look at:

**Tobacco Use Assessment** - The percentage of patients aged 18 years and older who had been asked about tobacco use within 24 months of the latest encounter with the eligible provider during the reporting period.

**Tobacco Cessation Intervention** - The percentage of patients aged 18 years and older identified as tobacco users who had received tobacco cessation intervention within 24 months of the latest encounter date with the eligible provider during the reporting period.

A training tool was designed for providers so that they could successfully counsel and meet the Meaningful Use measure for known tobacco users. This training was delivered at medical staff meetings and must be regularly given because of staffing change over at the multitude of clinics in the region.

SEARHC also worked on addressing the formulary set up for prescribing nicotine replacement therapy within the EHR system. Nicotine patches (in three doses), lozenges and gum can now be prescribed and filled at an outside pharmacy. In Alaska, Pharmacists can bill for counseling for Medicaid reimbursement. We are in the process of working with the Medical Director to add in a note under prescriptions to request Pharmacist counseling as a standard of care (and a way to encourage tobacco counseling coverage).

Work was done with the EHR team member (who is a pharmacist) to create the order language seen below:

Mt Edgcombe Hospital 222 Tongass Drive Sitka, AK 99835 907-966-2411	
Issue Date: 01 Jul 2013	
Patient Name: DEMO,PATIENT KLW	Patient HRN: 91219
DOB: 08 Oct 1985	
Patient Address: po box 1911, KLAWOCK , ALASKA 99925	
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NICOTINE 7MG/24 HOUR PATCH (S)	
APPLY 1 PATCH TO SKIN EVERY DAY FOR NICOTINE WITHDRAWAL	
Comment: Please provide pharmacist tobacco cessation counseling with this medication.	
Indication: Tobacco Use Disorder	
Quantity: 14	
Days' Supply: 14	
Refills: 0	
DAW: No	
Signature of Prescriber: _____	
Provider: SKAN,ERIC C PHARM D	
Provider DEA#: B59689780	
Provider NPI: _____	
Provider Phone #: 907-966-2411	
Provider Electronic Signature: Electronic Signature on File	

A document was created to explain this new order on the prescription. The EHR staff member requested that the Clinical Care team (four providers) be contacted to get approval to the dosing of NRT based on the clinical guidelines.

By remaining flexible in the face of funding cuts and continuing to advocate for tobacco screening during the development of the EHR, SEARHC staff ensured that all patients will get meaningfully screened and referred for tobacco cessation. In this way, the stage is set to more effectively assist patients to manage their disease and measure progress for all.