

Sending a P2P – A Better Option Than Faxing

Provider to Provider electronic communication (P2P) is a better way to send information between primary care and specialty offices. Prima CARE stands to lose 5% of Medicare payments if we fax notes rather than use P2P. Each year, the percentage of loss increases – strong motivation to start using P2P as much as possible. One problem I have found with P2P is that some local providers are not on our P2P network. This can be easily remedied – if you can't find the person you are trying to communicate with in the P2P directory, email or clinical message me or Mary Jane, and we will get that provider in our directory.

P2P does require a few more clicks than faxing, but it is far more reliable than faxing.

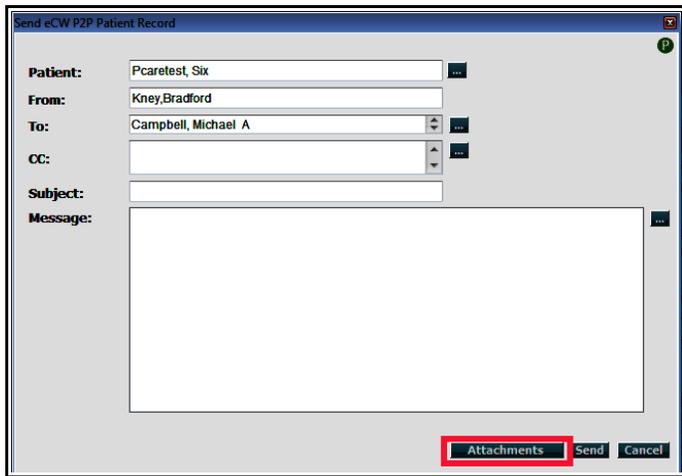
In the Hub, click on the “Share” button and choose “Send eCW P2P Patient Record”.

The screenshot shows a patient record interface with tabs for T.Inj, Referrals, Allergies, CDSS, Alerts, and Notes. The patient information includes Home: 401-555-1818, Work, Cell, Email: Primaoffice@yahoo.co, Insurance: Medicare Mass Part B, PCP: Willis, Sam, and Default Facility. A 'Share' button is visible, and a dropdown menu is open with options: Create eCW P2P Appointment, Send eCW P2P Patient Record (highlighted), and Send eCW P2P referral/Consult. A separate window titled 'Send eCW P2P Patient Record' shows fields for Patient (Pcaretest, Six), From (Kney,Bradford), To, CC, Subject, and Message. A red box highlights the ellipsis button next to the 'To' field.

Now click on the ellipsis.

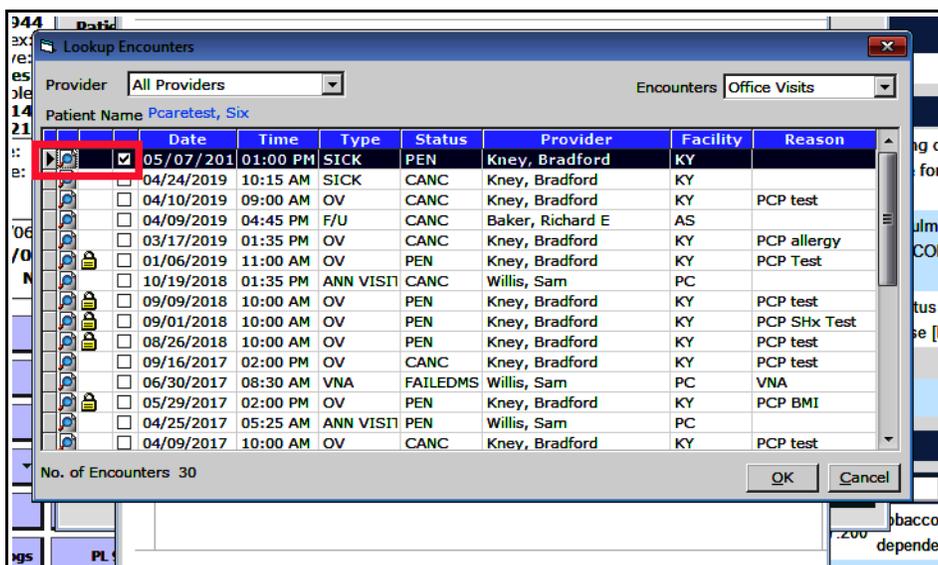
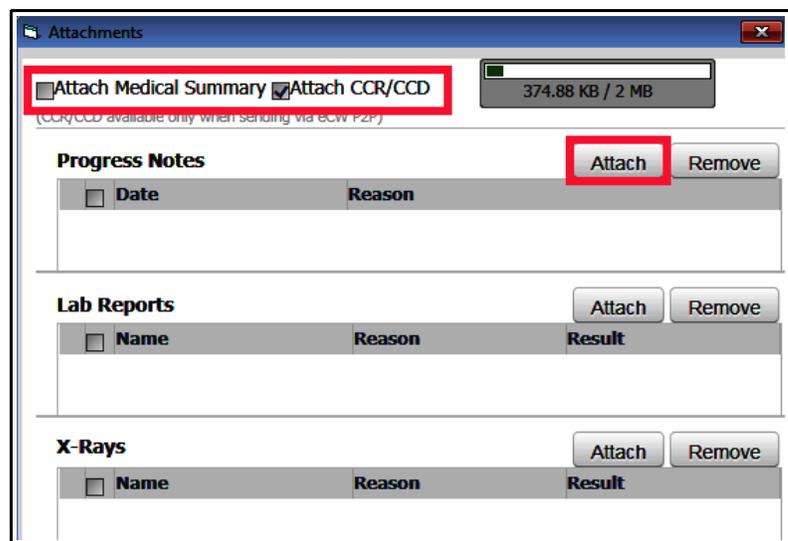
Next, choose the recipient. Always choose a “D” option rather than a “P” option if there is a choice - “D” is more secure. My screen opens to “My Favorites” by default, but choosing “All” vs “My Favorites” doesn't seem to make much difference.

The screenshot shows a provider search interface with tabs for My Favorites and All. Search filters include a search box with 'camp', City, MA, Zip Code, and Specialty or Classification. A list of providers is shown with columns for Name, Address, Specialty, and Contact Details. The providers listed are Campbell, Michael A (Available) and CAMPOS, CHRISTIAN T (Available). Both are located at 203 Plymouth Ave, FALL RIVER MA 02720. Campbell's specialty is Adult Medicine, Fami... and his contact details are (508) 235 5445. CAMPOS's specialty is Thoracic Surgery (Ca... and his contact details are (508) 679 7740 and (508) 679 7701. There are 'OK' and 'Cancel' buttons at the bottom.

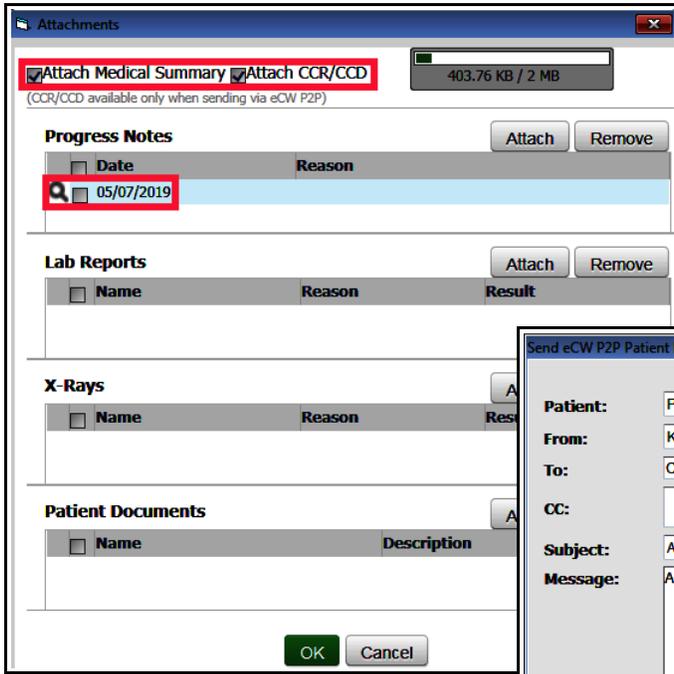


Now click the “Attachments” button.

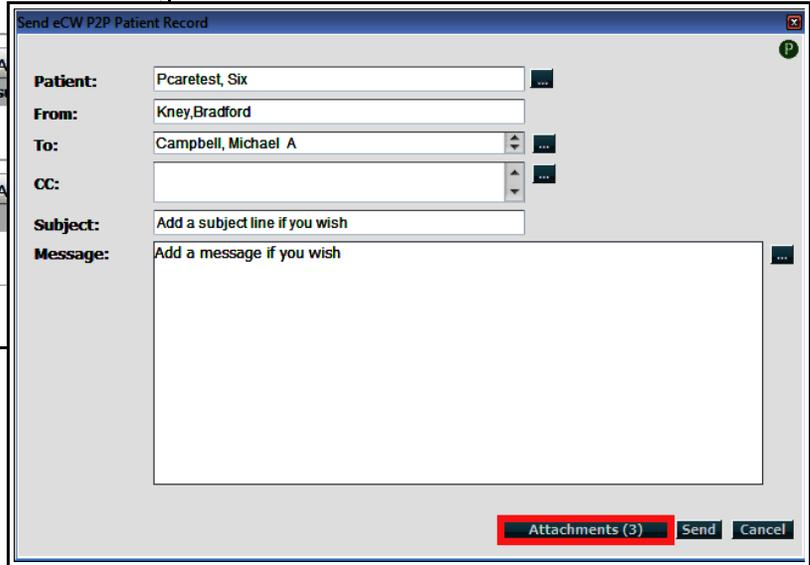
Both “Attach Medical Summary” and “Attach CCR/CCD” need to be checked to satisfy the P2P reporting benchmark. Click on “Attach” to find the note you want to attach (or the lab or X-ray reports).



Check the box next to the note you want to include. Clicking on the magnifying glass provides a preview of the visit.



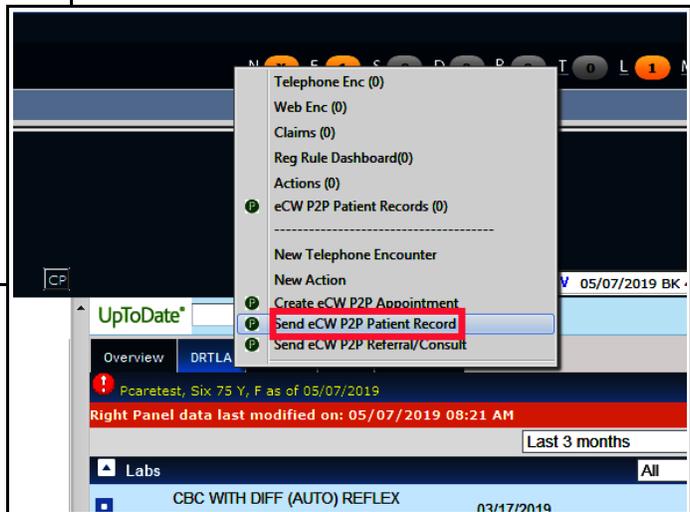
So, now you have the medical summary and CCR/CCD checked, and the note attached. Click "OK".



Make sure there are at least 3 attachments. If you see only 1 or 2, go back and make sure the medical summary, CCR/CCD, and note are attached. Then click "Send".



And the P2P is sent.



You can also start a P2P from the T jellybean (clicking on the "T", not on the jellybean itself). This does not pull in a patient name, so it is usually easier to start from the Hub in my opinion.

For providers who prefer to send their note immediately after locking it, click “Send”.

Father: deceased, at age 84, diagnosed with Heart Disease in 1969
 Mother: alive, HTN, Hypertension
 Sister(s): alive, HTN, colon cancer at age 45, Cancer in 2009
 Brother(s): HTN
 Paternal Grand Father: HTN
 Paternal Grand Mother: HTN
 1 brother(s) , 2 sister(s) . 1 son(s) , 1 daughter(s) - healthy.

Social History
Tobacco Use:
 Tobacco Use/Smoking
 Patient is a: *current smoker*
 How often do you smoke? *every day*
 How many cigarettes a day do you smoke? *11-20*
 Are you interested in quitting? *Not ready to quit*

Drugs/Alcohol:
 Alcohol Screen
 Did you have a drink containing alcohol in the past year? *No*

Lungs clear to auscult
 Heart regular rhythm
 Abdomen soft, nonter
 Extremities no edema
 Psychiatric cooperati

Assessments
 1. Mild intermittent asthr
 2. Chronic cough - Ro5
 3. Pulmonary emphysem
 4. Essential hypertension

Treatment
 1. **Mild intermittent a:**
 Clinical Notes: Blood pres
 effects. Continue current

Send Print Fax Play Addendum Details Scan Templates

Patient Orders For Patients

Progress Notes

Mode	Send To	Visit date	Vi
Fax	[Redacted] ...	10/21/2019	F/

Fax
eTransmit

Change the mode to “eTransmit”.

Then click on the ellipsis to locate to recipient of the note.

Choose the recipient.

If the recipient has one entry with a “P” before the name and another entry with a “D” before the name, choose the version with the “D” - it is more secure.

When everything is completed, just hit the “Send”.

Referring Physician Lookup

All Providers Preferred Providers By Facility

All Providers Specialty Search Accept Pa

campbell search City search Zip search Af

Name	Address	Specialty	Contact Details
Campbell, Diane Sharon	525 Long Pond Dr Harwich MA...	Family Medicine	5084324100 5084328951
Campbell, S, Lauren	1340 Boylston Street Boston...	Student in an Organized Hea...	1-617-267-0900 1-617-247-3912
Campbell, Michael	203 Plymouth Ave Fall River...	Family Practice	508-235-5445 508-235-5594
Campbell, Michael	203 Plymouth Ave Fall River...	Family Medicine	508-235-5445 508-235-5594
Campbell, Nathalie	215 Toll Gate Road Suite 10...		401-821-4707 401-921-6627

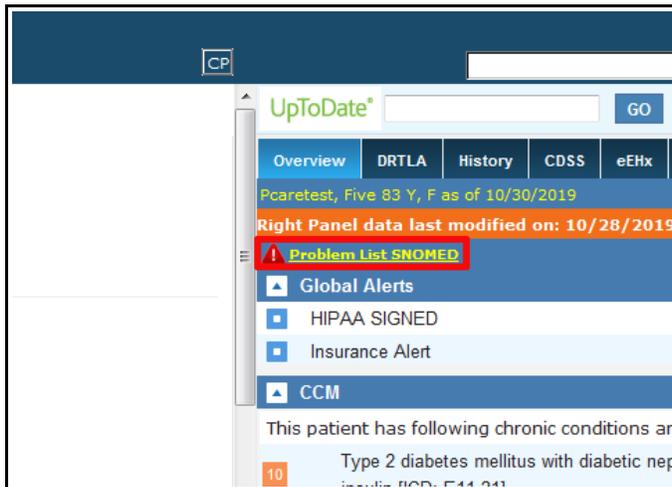
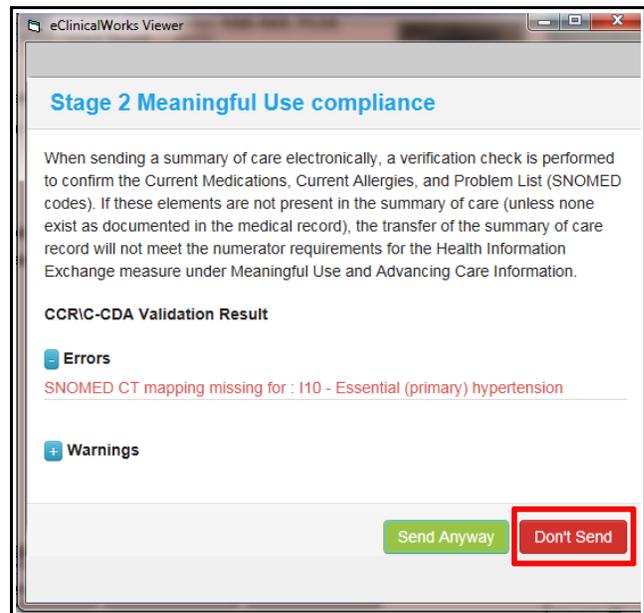
Patient Orders For Patients

Progress Notes

Mode	Send To	Visit date	Visit type
<input checked="" type="checkbox"/> eTransmit	Campbell, Michael ...	10/21/2019	F/U (Follow Up Visit) <input checked="" type="checkbox"/>

Note that if the patient's problem list contains SNOMED errors, this message appears.

Please DO NOT SEND a record with SNOMED errors – this will count against Prima CARE for Meaningful Use compliance. Please FIX the SNOMED errors, THEN send the P2P record.



Go to the Hub or a progress note and click on “Problem List SNOMED” in the Overview tab of the right panel.

The simplest way to fix the error is to accept eCW's choice for the SNOMED code. In this case, it is the essential hypertension code that needs to be confirmed.

Just hit “Save” and the SNOMED error will disappear.

Type	Problem Description	Problem Code	SNOMED Description
10	Essential (primary) hypertension	I10	* Essential hypertension
10	Coronary artery disease involving native coronary artery of native heart without angina pectoris	I25.10	
10	Nonrheumatic aortic valve stenosis	I35.0	
10	Intractable episodic tension-type headache	G44.211	
10	Rash	R21	
10	Type 2 diabetes mellitus with diabetic nephropathy, without long-term current use of insulin	E11.21	
10	Abnormal chest xray	R93.89	
10	Dysuria	R30.0	
10	Alcohol dependence in early full remission	F10.21	
10	Chronic cough	R05	
10	Idiopathic chronic gout of multiple sites without tophus	M1A.09X0	
10	Heart palpitations	R00.2	
10	Pulmonary emphysema, unspecified emphysema type	J43.9	
10	Other emphysema	J43.8	

* Indicates Auto assigned SNOMED Codes and Description in this session. ** Indicates assignment from custom mapping table. Users maintain responsibility for selection and/or verification of correct SNOMED codes. Clicking on 'Save' will save the SNOMED codes locally.

Alternatively, you could select “Assign” to see all the SNOMED codes that might pertain to essential hypertension.

SNOMED Description	SNOMED Code	Clear	Assign
* Essential hypertension	59621000		Assign
	1641000119107		Assign
	194984004		Assign
	230470007		Assign
	271807003		Assign
	44054006		Assign

eCW chose 59621000 – which is a fine choice. Another good choice would be benign essential hypertension. Click the circle next to that code, click “Apply” and it replaces the 59621000 SNOMED code linked to I10 in the eCW problem list.

ICD to SNOMED CT Conversion

Map Type: All Mappings Sort By: Name

ICD-10 Code : I10 (Essential (primary) hypertension)

Problem Code: I10 SNOMED Description: * Essential hypertension

Find/Filter: Search Clear

SNOMED Code	Concept	SNOMED Name
<input type="radio"/> 1201005		Benign essential hypertension
<input type="radio"/> 198945003	I35.0	Benign essential hypertension complicating pregnancy, childbirth and the puerperium - delivered with postnatal complication
<input type="radio"/> 10725009	I10	Benign hypertension
<input type="radio"/> 720568003	R01	Brachydactyly and arterial hypertension syndrome
<input type="radio"/> 63711009	E11.01	Brachydactyly syndrome type E
<input type="radio"/> 8762007	R03.00	Chronic hypertension in obstetric context
<input type="radio"/> 48146000	R03.0	Diastolic hypertension
<input type="radio"/> 762463000	R03.0	Diastolic hypertension and systolic hypertension
<input type="radio"/> 59621000	I10	Essential hypertension
<input type="radio"/> 72022006	R05	Essential hypertension in obstetric context
<input type="radio"/> 170577003	M14.00000	Good hypertension control
<input type="radio"/> 717824007		Grange syndrome
<input type="radio"/> 461415008	R00.2	Hereditary dysplasia of blood vessel
<input type="radio"/> 19769006	M3.0	High-renin essential hypertension

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Apply Cancel

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Either way, the SNOMED error is fixed, and the P2P document can now be sent.

Brad Kney, MD
5/14/19
Updated 10/30/19