

Project CORE: Coordinating Optimal Referral Experiences

Improving Care at the Interface of Primary and Specialty Care

Building into Year 2

Maturing Phase 1 of implementation



- Roll-out to all "major" specialties within the system
- Roll-out to all PCPs using same instance of EMR
- Sustained messaging, socializing eConsults
- Ongoing QA, targeted QI
- Building bridges between PCPs and specialists
- Shifting from active implementation to program maintenance

Phase 2: Scaling & sustaining the model



- Consider additional value-added use cases within the system
- Target the "external pivot" of eConsults
- Payer engagement and optimizing payment policy for eConsults
- Approaches to billing for eConsults
- Measuring impact of the CORE model
- Expand to adjacent priorities at the primary care
 - specialty care interface







Epic Link

Cloud-based platform

HIE

HL7 DaVinci Project on interoperability

Demonstrating the ROI Case for eConsults

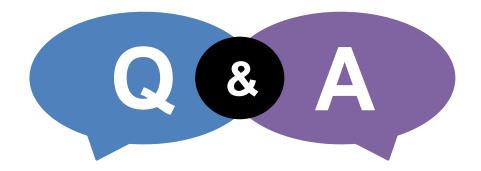


- Year 1 focused on implementation
 - Uptake of eConsults relative to specialty referral patterns across primary care
 - Averted referrals and decreases in specialty visits
 - Impact on timelier specialty input
 - Patient and provider experience and satisfaction

Years 2 & beyond – impact of the model

 As # of specialties increases, and PCP utilization increases: impact on specialty utilization and associated costs, timely access, PCP comprehensiveness





Scott Shipman, MD, MPH sshipman@aamc.org

Meaghan Quinn, MHSA mquinn@aamc.org

www.aamc.org/projectcore







Learn Serve Lead

Association of American Medical Colleges