

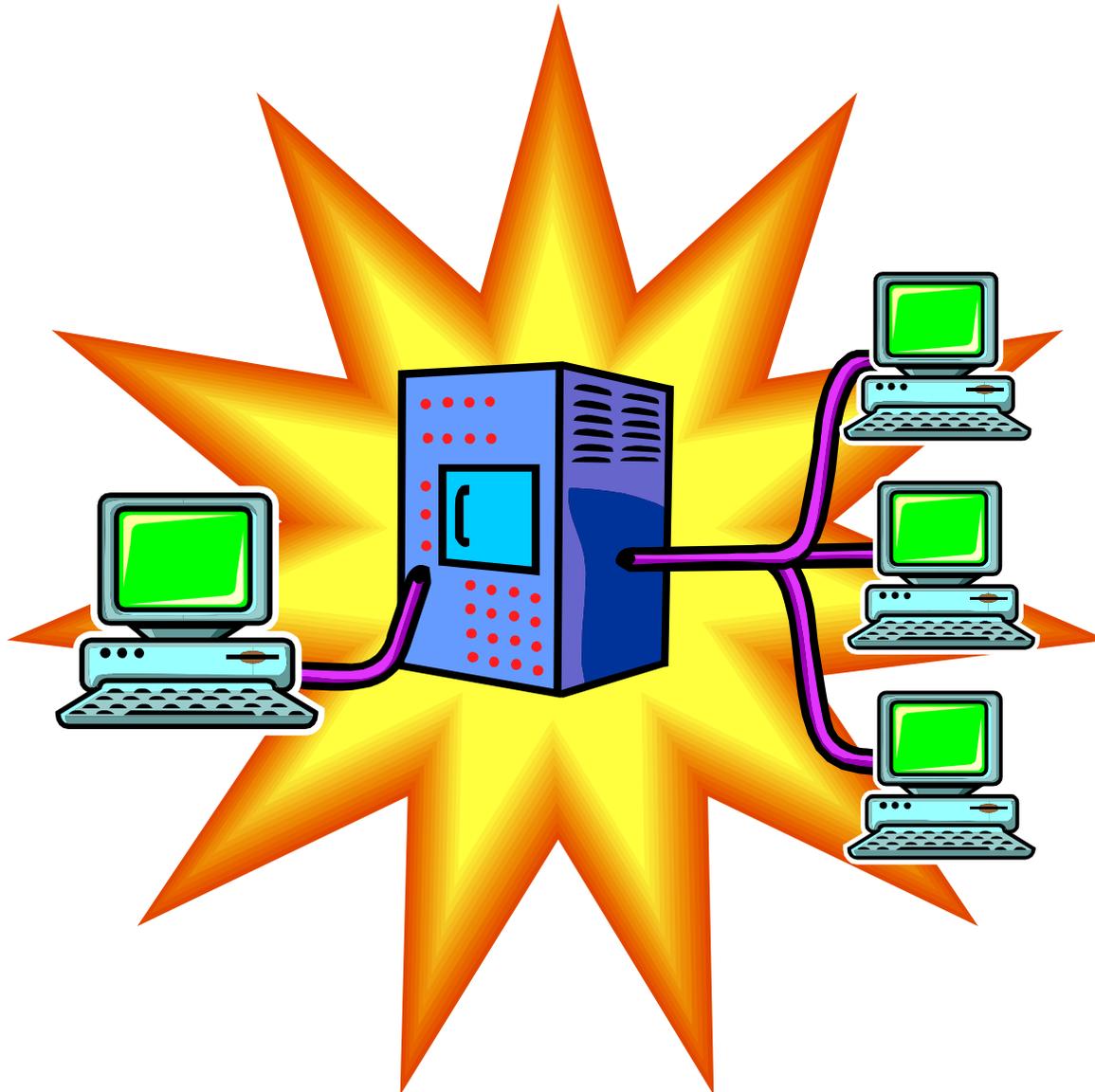


# Health IT and Improving Chronic Disease Outcomes

**Joel D. Hyatt, MD**  
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Kaiser Permanente Southern California  
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October, 2010

# What is Health Information Technology for Chronic Conditions Management?



# Who Are We?

## Kaiser Permanente California



**6.6 million** members

**12,416** physicians

**126,678** employees

**34** hospitals

**289** medical offices

**87,012** corporate customers

# KP Southern California



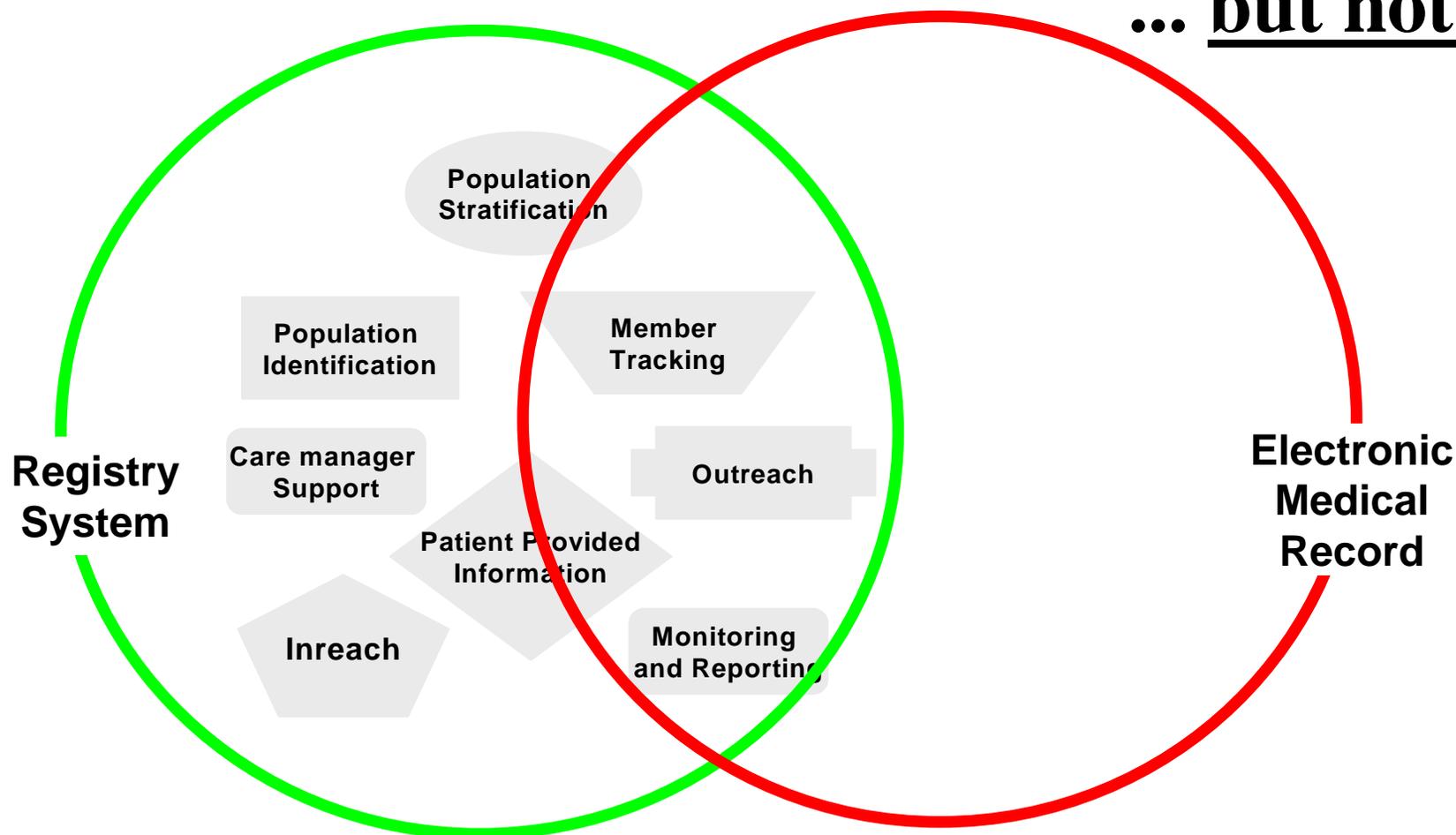
**3,312,972 members** in Los Angeles, Orange, Kern, Riverside, San Bernardino, San Diego, and western Ventura counties, and Coachella Valley



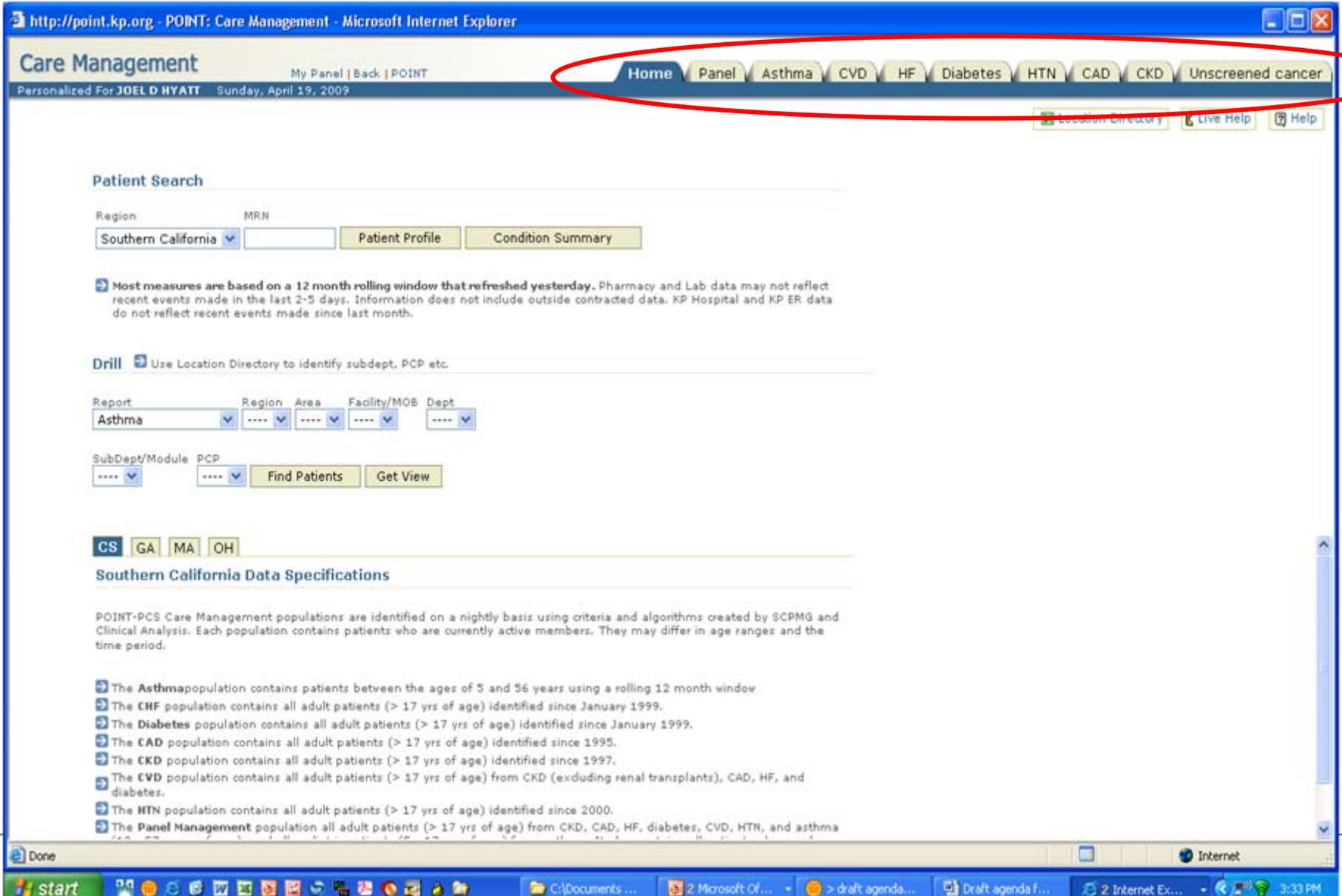
- **13 Medical Center Service Areas** with 12 **KFH Hospitals**
- **7 KFH Home Health** and **5 Hospice Agencies**
- Over 100 Kaiser Permanente owned and or operated **Medical Office buildings**
- **SCMPG** is composed of 6,441 physicians representing all specialties (3,279 partners, 1,370 associates, 1,690 affiliates and 2,354 per diems)

- ◆ Medical center (hospital and medical office)
- Medical offices
- ▲ Other facilities
- ★ Regional administrative offices

... but not all



# Care Management: Web Registry/Tracking System - SCAL



http://point.kp.org - POINT: Care Management - Microsoft Internet Explorer

## Care Management

My Panel | Back | POINT

Personalized For **JOELD HYATT** Sunday, April 19, 2009

Home Panel Asthma CVD HF Diabetes HTN CAD CKD Unscreened cancer

Location Directory Live Help Help

### Patient Search

Region MRN

Southern California  Patient Profile Condition Summary

Most measures are based on a 12 month rolling window that refreshed yesterday. Pharmacy and Lab data may not reflect recent events made in the last 2-5 days. Information does not include outside contracted data. KP Hospital and KP ER data do not reflect recent events made since last month.

### Drill

Use Location Directory to identify subdept, PCP etc.

Report Region Area Facility/MOB Dept

Asthma

SubDept/Module PCP

Find Patients Get View

CS GA MA OH

### Southern California Data Specifications

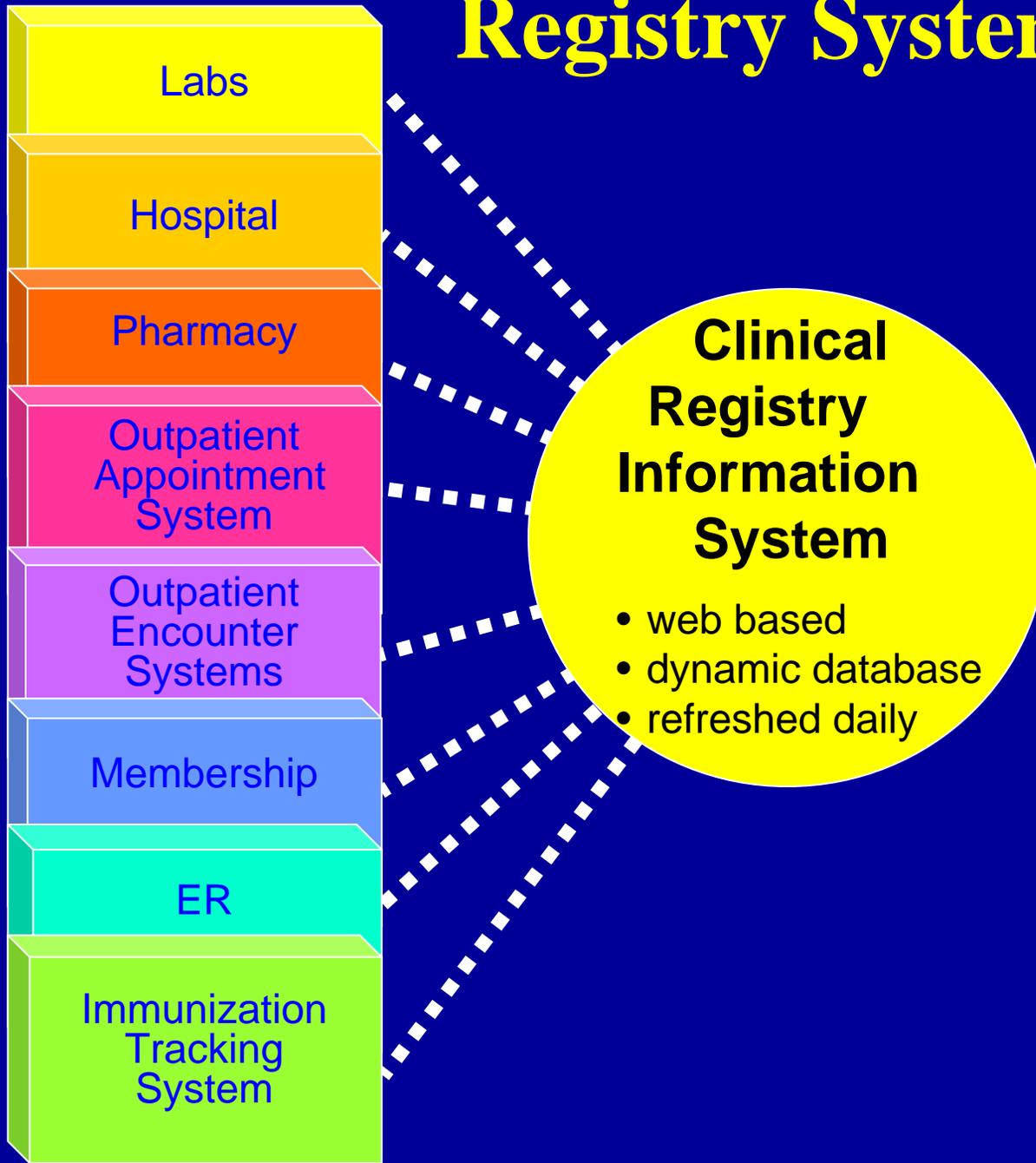
POINT-PCS Care Management populations are identified on a nightly basis using criteria and algorithms created by SCPMG and Clinical Analysis. Each population contains patients who are currently active members. They may differ in age ranges and the time period.

- The **Asthma** population contains patients between the ages of 5 and 56 years using a rolling 12 month window
- The **CHF** population contains all adult patients (> 17 yrs of age) identified since January 1999.
- The **Diabetes** population contains all adult patients (> 17 yrs of age) identified since January 1999.
- The **CAD** population contains all adult patients (> 17 yrs of age) identified since 1995.
- The **CKD** population contains all adult patients (> 17 yrs of age) identified since 1997.
- The **CVD** population contains all adult patients (> 17 yrs of age) from CKD (excluding renal transplants), CAD, HF, and diabetes.
- The **HTN** population contains all adult patients (> 17 yrs of age) identified since 2000.
- The **Panel Management** population all adult patients (> 17 yrs of age) from CKD, CAD, HF, diabetes, CVD, HTN, and asthma

Done Internet

start C:\Documents... 2 Microsoft Of... > draft agenda... Draft agenda f... 2 Internet Ex... 3:33 PM

# Registry Systems



# Care Management: Web Registry/Tracking System - SCAL



## Diabetes Patient Identification Inclusion Criteria (Date range may vary for other regions):

- Two or more outpatient ICD9 code of 250.xx (DIABETES MELLITUS) (Outpatient codes from ER, Obstetrics/Gynecology, Podiatry, and Ophthalmology are excluded) in the past 3 years **OR**
- Hemoglobin A1c > 7.5% or Fructosamine > 319 in the past 12 months **OR**
- A dispensing record for an oral hypoglycemic (excludes Metformin, Exenatide, Pioglitazone, Rosiglitazone, or Repaglanide only) or insulin in the past 3 years **OR**
- FBS > 126 **AND** on any oral hypoglycemic
- Placed on the diabetes-patient-addition list
- **AND** Member age ≥ 18 years (Not applicable to OH and MAS)
- **AND** is a current KP member

## Diabetes Patient Identification Exclusion Criteria:

- Member deceased according to patient demographics or hospitalization information **OR**
- Female member coded for PCOS and identified by Metformin, Pioglitazone or Rosiglitazone only **OR**
- Female member with a current Expected Delivery Date (EDD) in KPHC **OR** positive pregnancy test **OR** code for gestational diabetes 648.XX is temporarily excluded from the diabetes population for 18 months after the positive pregnancy test date or date of code (member will return to the diabetes population if the above inclusion criteria is dated after the 18 month period) **OR**
- Member with oral steroid Rx **OR** coded for pre-diabetes (790.22) or impaired glucose tolerance (790.29) in the last 12 months and no ICD9 code for diabetes is temporarily excluded for 12 months **OR**
- Member identified by a prescription for Metformin, Exenatide, Pioglitazone, Rosiglitazone or Repaglanide only **OR**
- Placed on the POINT Diabetes-patient-deletion list **OR**
- Member found in Hospice or under custodial care in Skilled Nursing facility (Not Applicable to Mid-Atlantic States)

## Re-entry into Diabetes Population Criteria:

- Any patient manually removed from the diabetes population who has been coded twice for diabetes will automatically re-enter into the population if he/she is a current member and the dates of both of the diabetes codes occurred after the manual deletion.

WOD-S*	12894	1474	11.4 %	2110	7789	3.7	5583	43.3 %	2232	18.4 %	5002	38.8 %	2202	18.1 %	11873	92.1 %	2356	18.3 %	6213	53.6 %	7666	59.5 %	6565	50.9 %
	226095	23712	10.5 %	35032	137225.7	3.9	107162	47.4 %	40581	19.4 %	89299	39.5 %	36683	17.5 %	208464	92.2 %	46659	20.6 %	127270	56.3 %	133765	59.2 %	113432	50.2 %

# Care Management: Web Registry/Tracking System - SCAL



## Drill Down to Facility

POINT: Care Management - Microsoft Internet Explorer

Care Management MPS | My Panel | Back | POINT

Personalized For **JOEL D HYATT** Thursday, December 28, 2006

Home Panel Asthma CVD HF **Diabetes** HTN CAD CKD

Live Help Help Print Export

Diabetes

Sorting Order: Ascending | Employer Group(s): None | Search Group

Region : CS | Area : WDH |

Clinic	Possible Diabetes Patients	Hospitalized		Total Hospital Discharges	Hospital Days	Length of Stay = Hospital Days / Nr. of Discharges	Missing Retinal Exams in last 12 mos		Missing Lipid lowering Rx for age 40+ in last 12 mos		Patients with Last LDL > 100 mg/dL		Missing ACEI/ARB Rx for age 55+ in last 12 mos		Having HgbA1C		HgbA1C > 9.0%		HgbA1C > 7.0%		No SM refills	
		Pats.	%	Freq.	Days	Days	Pats.	%	Pats.	%	Pats.	%	Pats.	%	Pats.	%	Pats.	%	Pats.	%	Pats.	
NA	<a href="#">158</a>	19	12 %	27	91	3.4	<a href="#">34</a>	21.5 %	<a href="#">52</a>	40.9 %	<a href="#">108</a>	128.6 %	<a href="#">36</a>	28.3 %	<a href="#">90</a>	57 %	<a href="#">77</a>	48.7 %	<a href="#">102</a>	64.6 %	<a href="#">114</a>	
COV	<a href="#">1253</a>	226	18 %	350	1091	3.1	<a href="#">199</a>	15.9 %	<a href="#">285</a>	24 %	<a href="#">545</a>	49.9 %	<a href="#">270</a>	22.7 %	<a href="#">1088</a>	86.8 %	<a href="#">245</a>	19.6 %	<a href="#">481</a>	38.4 %	<a href="#">805</a>	
ERW	<a href="#">1818</a>	334	18.4 %	529	1847	3.5	<a href="#">247</a>	13.6 %	<a href="#">457</a>	26.8 %	<a href="#">873</a>	54.9 %	<a href="#">420</a>	24.6 %	<a href="#">1568</a>	86.2 %	<a href="#">397</a>	21.8 %	<a href="#">832</a>	45.8 %	<a href="#">1096</a>	
GNZ	<a href="#">583</a>	38	6.5 %	67	294	4.4	<a href="#">20</a>	3.4 %	<a href="#">205</a>	40.9 %	<a href="#">377</a>	81.6 %	<a href="#">110</a>	22 %	<a href="#">448</a>	76.8 %	<a href="#">210</a>	36 %	<a href="#">310</a>	53.2 %	<a href="#">424</a>	
HRD	<a href="#">5</a>	1	20 %	1	0	0	<a href="#">0</a>	0 %	<a href="#">3</a>	60 %	<a href="#">5</a>	500 %	<a href="#">2</a>	40 %	<a href="#">1</a>	20 %	<a href="#">4</a>	80 %	<a href="#">4</a>	80 %	<a href="#">2</a>	
LPS	<a href="#">4</a>	1	25 %	1	1	1	<a href="#">0</a>	0 %	<a href="#">2</a>	66.7 %	<a href="#">4</a>	200 %	<a href="#">0</a>	0 %	<a href="#">2</a>	50 %	<a href="#">2</a>	50 %	<a href="#">3</a>	75 %	<a href="#">4</a>	
NRS	<a href="#">4236</a>	719	17 %	1139	4244	3.7	<a href="#">590</a>	13.9 %	<a href="#">1031</a>	26.7 %	<a href="#">2023</a>	54.8 %	<a href="#">900</a>	23.3 %	<a href="#">3625</a>	85.6 %	<a href="#">958</a>	22.6 %	<a href="#">2013</a>	47.5 %	<a href="#">2585</a>	
OXG	<a href="#">4</a>	0	0 %	0	0	0	<a href="#">0</a>	0 %	<a href="#">0</a>	0 %	<a href="#">4</a>	400 %	<a href="#">0</a>	0 %	<a href="#">0</a>	0 %	<a href="#">4</a>	100 %	<a href="#">4</a>	100 %	<a href="#">2</a>	
SIV	<a href="#">1543</a>	262	17 %	443	1557	3.5	<a href="#">291</a>	18.9 %	<a href="#">344</a>	23.9 %	<a href="#">734</a>	55.9 %	<a href="#">300</a>	20.9 %	<a href="#">1291</a>	83.7 %	<a href="#">366</a>	23.7 %	<a href="#">661</a>	42.8 %	<a href="#">1016</a>	
THQ	<a href="#">487</a>	88	18.1 %	132	436	3.3	<a href="#">57</a>	11.7 %	<a href="#">105</a>	22.1 %	<a href="#">232</a>	54.7 %	<a href="#">103</a>	21.6 %	<a href="#">415</a>	85.2 %	<a href="#">103</a>	21.1 %	<a href="#">198</a>	40.7 %	<a href="#">331</a>	
VAW	<a href="#">3</a>	0	0 %	0	0	0	<a href="#">0</a>	0 %	<a href="#">3</a>	100 %	<a href="#">2</a>	200 %	<a href="#">1</a>	33.3 %	<a href="#">1</a>	33.3 %	<a href="#">2</a>	66.7 %	<a href="#">2</a>	66.7 %	<a href="#">2</a>	
WOD	<a href="#">2294</a>	400	17.4 %	650	2086	3.2	<a href="#">309</a>	13.5 %	<a href="#">509</a>	23.8 %	<a href="#">1047</a>	51.2 %	<a href="#">450</a>	21 %	<a href="#">2006</a>	87.4 %	<a href="#">482</a>	21 %	<a href="#">979</a>	42.7 %	<a href="#">1365</a>	
		12388	2088	16.9 %	3339	11647	3.5	1747	14.1 %	2996	26.2 %	5954	55.6 %	2592	22.6 %	10535	85 %	2850	23 %	5589	45.1 %	7746

# Drill down to MD



POINT: Care Management - Microsoft Internet Explorer

## Care Management

MPS | My Panel | Back | POINT

Home Panel Asthma CVD HF Diabetes HTN CAD CKD

Personalized For JOEL D HYATT Thursday, December 2, 2009

### Diabetes

Live Help Help Print Export Provider Batch Export

Sorting Order: Ascending | Employer Group(s): None Search Group Region: CS | Area: WDH | Clinic: COV | Department: FAM |

PCP	Possible Diabetes Patients	Hospitalized		Total Hospital Discharges	Hospital Days	Length of Stay = Hospital Days / Nr. of Discharges	Missing Retinal Exams in last 12 mos		Missing Lipid lowering Rx for age 40+ in last 12 mos		Patients with Last LDL > 100 mg/dL		Missing ACEI/ARB Rx for age 55+ in last 12 mos		Having HgbA1C		HgbA1C > 9.0%		HgbA1C > 7.0%		No SMI strip refi last 4 n	
		Pats.	%	Freq.	Days	Days	Pats.	%	Pats.	%	Pats.	%	Pats.	%	Pats.	%	Pats.	%	Pats.	%	Pats.	
BESSEY, ADRIENNE	94	13	13.8 %	18	57	3.2	14	14.9 %	21	23.6 %	48	59.3 %	19	21.3 %	84	89.4 %	15	16 %	38	40.4 %	62	6
FALKENBACH, MARK A	162	33	20.4 %	45	130	2.9	27	16.7 %	46	29.7 %	73	52.1 %	44	28.4 %	137	84.6 %	32	19.8 %	64	39.5 %	110	67
HO, TRAN T	94	20	21.3 %	29	84	2.9	20	21.3 %	14	15.6 %	38	48.1 %	16	17.8 %	80	85.1 %	26	27.7 %	43	45.7 %	49	52
JORDAN, JONI L	108	16	14.8 %	27	99	3.7	22	20.4 %	19	18.3 %	50	52.1 %	21	20.2 %	94	87 %	20	18.5 %	35	32.4 %	65	60
LEPORATI, ADO P	148	23	15.5 %	38	116	3.1	23	15.5 %	37	26.1 %	68	53.1 %	33	23.2 %	128	86.5 %	28	18.9 %	55	37.2 %	100	67
LEVIN, DAVID A	161	32	19.9 %	52	129	2.5	26	16.1 %	33	22 %	57	41.3 %	36	24 %	140	87 %	29	18 %	56	34.8 %	103	6
LU, JELYN	26	2	7.7 %	3	7	2.3	1	3.8 %	5	23.8 %	12	52.2 %	3	14.3 %	23	88.5 %	10	38.5 %	13	50 %	15	57
MCCASKILL, REJAN C	108	25	23.1 %	44	114	2.6	13	12 %	25	24.5 %	51	53.7 %	21	20.6 %	95	88 %	20	18.5 %	40	37 %	72	66
OSMONOV, EDUARD	144	28	19.4 %	39	175	4.5	24	16.7 %	48	35.3 %	76	60.8 %	40	29.4 %	122	84.7 %	30	20.8 %	53	36.8 %	98	68
PANG, HYOSONG D	128	16	12.5 %	25	80	3.2	16	12.5 %	24	19.5 %	39	33.9 %	26	21.1 %	111	86.7 %	24	18.8 %	54	42.2 %	83	64
VOS, LAURIE L	51	11	21.6 %	18	45	2.5	8	15.7 %	8	17 %	24	53.3 %	6	12.8 %	46	90.2 %	9	17.6 %	22	43.1 %	32	62
	1224	219	17.9 %	338	1036	3.1	194	15.8 %	280	24.2 %	536	50.3 %	265	22.9 %	1060	86.6 %	243	19.9 %	473	38.6 %	789	64

# Care Management: Web Registry/Tracking System - SCAL

## Drill Down to MD Patient Panel

POINT: Care Management - Microsoft Internet Explorer

Care Management MPS | My Panel | Back | POINT Home Panel Asthma CVD HF Diabetes HTN CAD CKD

Personalized For **JOELD HYATT**

Diabetes View this criteria with other Population Live Help Help Print Export Batch Print Provider Batch Export

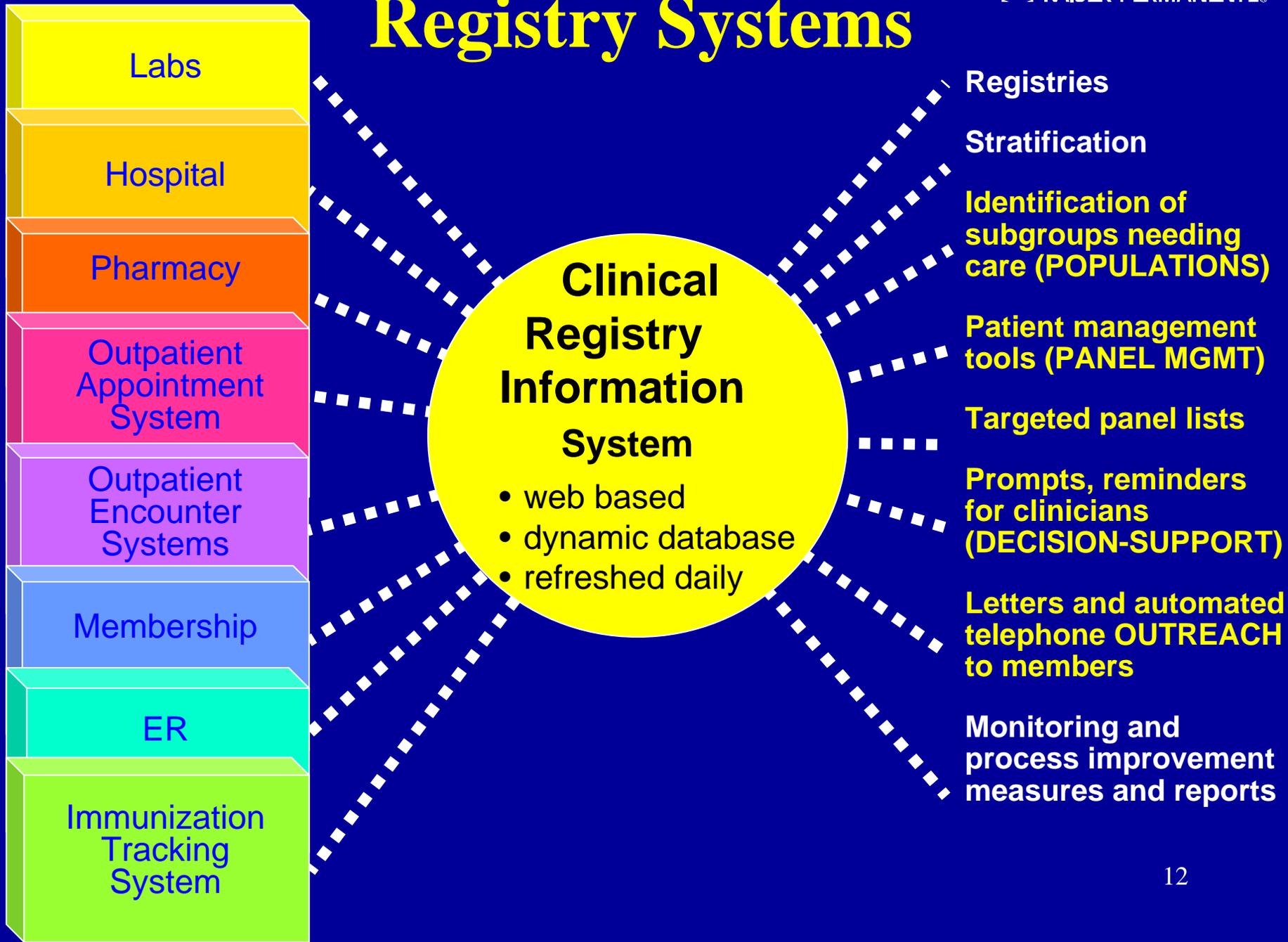
View Records: 1-50/161 | Sorting Order: Ascending | Region: CS | Area: WDH | Clinic: COV | Department: FAM | PCP: LEVIN, DAVID A

Find: Display Patients: ALL

Remove Patient	Patient Name	MRN	Age	Gender	Enrolled in MTM	Asthma	CVD	HF	CAD	CKD	HTN	Osteoporosis	Missing Lab	ACEI Rx Date	ACEI Intolerance flag	Last MA Date	Last MA	MA + Date	MA + Result	Last Serum Creatinine Date	Last Serum Creatinine		
X			56	M			CVD	HF	CAD		HTN			11/06		01/06	118.4	05/05	51.9	1/30/2006	1.5	12/	
X			71	M			CVD				HTN			12/06		08/06	12.0			8/25/2006	1.1	11/	
X			65	F			CVD		CAD		HTN			10/06		09/06	16.9			9/12/2006	0.8	11/	
X			77	F		Asthma	CVD		CAD	CKD	HTN			11/06		07/06	1236.0	05/06	237.2	9/28/2006	1.7	07/	
X			62	M			CVD				HTN			11/06		05/06	7.9	04/05	31.9	12/23/2006	1.3	12/	
X			86	M			CVD	HF	CAD	CKD	HTN		L	12/06						10/6/2006	2.8	12/	
X			80	M			CVD				HTN			09/06		06/06	13.2			6/12/2006	1.1	09/	
X			74	M			CVD		CAD		HTN	Y		06/06*		10/06	18.1	08/06	30.1	10/21/2006	1	10/	
X			54	M			CVD				HTN		HLM	09/06						8/3/2006	1	06/	
X			65	F			CVD		CAD	CKD	HTN			11/06	Y	10/06	135.0	07/06	113.1	10/30/2006	1.1	11/	
X			63	M			CVD		CAD	CKD	HTN			09/06		11/06	128.3	08/06	636.6	11/18/2006	2.4	10/	
X			82	M			CVD			CKD	HTN			11/06		07/06	49.2	01/06	81.8	7/13/2006	1.3	06/	
X			64	M			CVD	HF	CAD		HTN		HLM	10/06									12/

10:29 AM

# Registry Systems







# Patient Profile

Customized for POINT User JOEL D HYATT 07/21/2004

Exit Patient Profile

REGION CS MRN [redacted] Go

CMSS	Vitals	Office Visits
Demographics	Prescriptions	Out Patient
Clinic Progress Notes	Labs	Hospitalizations
Panel	Immunizations	Emergency

## Automated Point of Service Reminders & Prompts

DISEASES*	DM
RISK	MOD

### Recommendations

- Patient does not appear to have a KP drug benefit. Review medication use.
- High CVD risk: Should be on aspirin (81-325MG) daily unless contraindicated.
- High CVD risk: Start lisinopril (target 10 - 40 mg/D).
- High CVD risk: Start lovastatin 40mg daily and treat to LDL < 100 mg/dL.

# Decision Support



### All meds- last 20 dispenses in 12 mos

RX Date	DRUG	QTY	REF
07/13/04	GLYBURIDE TAB 5MG	200	2
07/13/04	ATENOLOL TAB 50MG	100	6
07/13/04	METFORMIN 500MG TABLET	200	2
07/13/04	HYDROCHLOROTHIAZIDE TAB 25MG	50	4
04/07/04	GLYBURIDE 5MG TAB	200	1
01/08/04	HYDROCHLOROTHIAZIDE 25MG TAB	50	2
12/04/03	ONE TOUCH ULTRA TEST STRIPS TES STRI	100	1
12/04/03	ONE TOUCH ULTRA SYSTEM KIT KIT ULTRA	1	1
12/04/03	ONE TOUCH ULTRASOFT LANCETS MIS LANC	100	1

### Cr, K, Microalb, A1c, ALT, Theophylline Last 2 labs in last 12 months

DATE	TYPE	RESULT
01/08/04	CR	1.2
01/08/04	K	4.3
01/08/04	A1C	11.2
01/08/04	MAU	4198.9
05/19/03	MAU	1410.5
01/13/04	ALT	20
01/08/04	ALT	24

### Last 2 lipid panels in last 12 months

DATE	CHOL	TRIG	HDL	LDL
01/08/04	257	199	47	170

### Asthma meds(last 12 mos)-excludes serevent

Controllers	B-AG	WTD RATIO
CANS 0	0	0.00
Nebis 0	0	

### Hospital/ER (related to Care Mgt) in last 12 months

DATE	HOSP/ER	CARE MGMT DX
------	---------	--------------

# Reminder letter: "Outreach" ...

SAMPLE SAMPLe



Southern California Permanente Medical Group  
Bellflower Medical Center

September 14, 2000

████████████████████  
████████████████████  
████████████████████

Dear Mr. ██████████

Our records indicate you have diabetes. If you do not have a history of diabetes, please call the Bellflower Call Center at 1-800-823-4040, so we can update our computerized records. To help you better manage your health and to help us detect potential health problems that may arise as a result of your diabetes, Kaiser Permanente and the American Diabetes Association now recommend you have specific laboratory tests performed each year.

Your primary care physician has determined it is time for you to have the following yearly tests:

Hemoglobin A1c Lipid profile Microalbumin

If you have recently had these tests done, they do not need to be repeated. These tests have been shown to delay or prevent complications of Diabetes. With proper testing, the appropriate medications can be ordered for you which will help lower these risks.

Please take this letter to the lab and have the tests done. Lab locations and hours are included for your convenience. The results will be sent to your primary care physician and any needed follow up will be determined at that time. Thank you for making this part of your diabetes care a priority. We look forward to being partners with you in promoting your good health.

Sincerely,

████████████████████  
Physician Director, Diabetes Care Program  
Bellflower Medical Center

\*\*\*\*\* TAKE THIS PAGE TO ANY KAISER LAB \*\*\*\*\*

Patient Name: ██████████ Medical Record Number: ██████████  
 Provider: ██████████ Provider Code: ██████████  
 Location: BE IMP INT Location Code: 059

[LABORATORY: PLEASE ASK IF THE PATIENT IS FASTING, IF SO, DRAW THE FASTING TEST. IF NOT FASTING, DRAW THE NON-FASTING TEST]

✓ Fasting-Diabetes Panel ( Procedure Code: 8371580 )  
 Fasting Panel includes: Microalbumin - Random, Hemoglobin A<sub>1c</sub>, and Lipid Profile

OR

✓ If patient is Not Fasting, order Non-Fasting Diabetes Panel ( Procedure Code: 8371570 )  
 Non-Fasting Panel includes: Microalbumin-Random, HbA<sub>1c</sub>, D-HDL, and D-LDL

Specimen Requirements ( Fasting or Non-Fasting Diabetes Panel ):  
 Random Urine, Red Top, and EDTA Whole Blood

SAMPLE SAMPLe



Southern California Permanente Medical Group  
Bellflower Medical Center

For the nearest Bellflower Laboratory location near you, please refer to the table below .

LABORATORY	LOCATION	HOURS
Bellflower Medical Center (562) 461-4967	5400 E. Rosecrans North wing, First floor	7:30 a.m. to 6:00 p.m. Mon - Fri Saturday: 7:30 a.m. to 1:00 p.m.
Cudahy Medical Office I (323) 562-6477	7825 Atlantic Ave. 1 <sup>st</sup> floor	8:45 a.m. to 5:00 p.m. Mon - Fri
Imperial Medical Office I (562) 907-5525	5445 E. Imperial Hwy. Building A, First floor, Suite 105	7:30 a.m. to 6:00 p.m. Mon - Fri
Whittier Medical Office I (562) 907-5525	12470 E. Whittier Blvd. 1 <sup>st</sup> floor	8:45 a.m. to 5:00 p.m. Mon - Fri

In addition, Kaiser Permanente and the American Diabetes Association recommend a yearly eye examination or a retinal photograph to check the retinas of the eyes to prevent blindness. If you have not had an eye examination or retinal photograph in the past 12 months, please plan to have a retinal photograph performed by either calling the phone number below for an appointment or coming to a walk-in visit. (It is possible to arrange having this important screening test on the same day that you come for your laboratory tests.)

#### Retinal Photographs:

Appointment or Walk-In Ball:	Phone Number:
Diabetes Clinic Imperial Medical Office I 5445 E. Imperial Highways; Downey, Ca. 90242 3 <sup>rd</sup> Floor, Building B, Suite 327	Call 1 (800) 823-4040 for Walk-In Clinic Hours or Appointment

By Appointment Only:	Phone Number:
Bellflower Rosecrans Medical Office I Ophthalmology and Optometry Department 5353 E. Rosecrans Avenue, Bellflower, Ca. 90706	Call (562) 461-3084 for an Appointment
Cudahy Medical Office I 7825 Atlantic Avenue, Cudahy, Ca. 90201	Call (323) 562-6400 for an Appointment
Whittier Medical Office 12470 Whittier Blvd., Whittier, Ca. 90602	Call (562) 907-5525 for an Appointment



KAISER PERMANENTE.  
CLINICAL STRATEGY & OPERATIONS  
393 EAST WALNUT STREET  
PASADENA CA 91188

Agosto 2007

FIRSTNAME LASTNAME  
315 E BELLFLOWER BLVD  
BELLFLOWER CA 90941-2154

En Español

Estimada Firstname,

Alimentarnos bien, hacer ejercicios y descansar suficiente. Es mucho lo que podemos hacer para cuidar nuestro cuerpo. No obstante, hay otra medida fácil de tomar e igual de importante: las mamografías hechas regularmente pueden detectar el cáncer del seno.

**Nuestros datos indican que le corresponde hacerse su Mamografía.** Si se hizo recientemente este examen, está programada para hacerse uno o tuvo una mastectomía bilateral, por favor llene la *Hoja de Actualización para el Examen de Mamografía* que se incluye con esta carta y envíela por correo en el sobre adjunto con franqueo pagado.

Con el examen de mamografía, podemos detectar el cáncer del seno antes de que usted o su médico pueda detectarlo con sus propias manos. En Kaiser Permanente, recomendamos exámenes regulares de detección del cáncer del seno junto con el examen de mamografía, por lo menos cada 2 años para las mujeres de 50 a 69 años.

**Si no ha tenido este examen en el último año, por favor llame a nuestro centro de citas al (800) 823-4040 para programar una cita en Radiología.** Para su conveniencia, ofrecemos citas en Bellflower, Whittier, Cudahy y Downey. Si ya tiene programada una cita para una consulta regular, llame por favor para una cita para su mamografía ese mismo día.

Puede llamar al 1-888-4KP-TEST (1-888-457-8378) en aproximadamente 10 días hábiles después de su mamografía para obtener los resultados.

Le rogamos que tome unos minutos en el día de hoy para programar su examen de Mamografía- Puede salvarle su vida. Y recuerde, viva bien y manténgase saludable!

Atentamente,

*Diana T. Wang, M.D.*

Breast Cancer Screening Champion  
Bellflower Medical Center

Telephone

IVR

Texting

Mail

E-mail

# KP HealthConnect Electronic Medical Record (Epic)



KAISER PERMANENTE  
HEALTHCONNECT™



# EMR Documentation + Decision-Support Alerts

Epic Hyperspace - FAMBECUD FAM - PSUP - KTAZQ2828 PSUPTCM

Desktop Action Patient Care Billing CRM/CM Reports Report Mgmt Tools Admin Help

Back Forward Home Schedule In Basket Chart Encounter Tel Enc Message Enc Patient Lists Secure Track Board Print Log Out

Epic Home Kphc,Kp Healthconnect Te... EpicCare

**Kphc, Kp Healthconnect Tr\*** MRN: 000006216534 Age: 53 year Sex: F PCP: Wade, Christopher Lee \* Allergies: Ativan Alert: FY Spec Feat: N kp.org: Inactive

6/3/2008 visit with Ambphys 2-5 P3 Provider

Images Questionnaires Admin Benefits Inquiry References SmartSets Open Orders Print AYS

Allergies: Last Vitals: BP: 167/99 P: T: T Src: Resp: W: H: BMI: , BSA:

**Charting**

- Chief Complaint
- Nursing Notes
- CMSS
- Vitals
- Med. Document
- BestPractice**
- History
- Progress Notes
- SmartSets
- Dx and Orders
- Pt. Instructions
- LOS
- Follow-up
- Close Encounter

**BestPractice Alerts**

**DISEASE MANAGEMENT:** Patient is in the DIABETES registry and has a blood pressure greater than 129 systolic and/or greater than 79 diastolic. ACTION: Inform patient. Diagnose and/or treat (use SmartSet below), then follow up within 6 weeks or make appropriate referral.

Acknowledge Reason:

Open SmartSet: HYPERTENSION CONTROL CLINICIAN PCM SCAL

**PREVENTION REMINDER:** Patient is a member of the DM registry and is due/overdue for yearly monofilament check with reflexes, pulses, and skin evaluation. ACTION: Open the mini-SmartSet below to code diabetic foot exam. If foot exam deferred today, select appropriate acknowledge reason below and add comment.

(DIABETIC FOOT EXAM last satisfied: Not on file)

Acknowledge Reason:

Open SmartSet: Diabetes Foot Exam DS SCAL

**History**

Mark as Reviewed Last Reviewed by LINDA TIEU on 2/2/2008

**Medical History**

Past Medical History	Date	Comments
HX OF ALCOHOLISM [V11.3A]		
HISTORY OF DEPRESSION. [V11.8Z0]		
HX OF GERD. [V12.79G]		
OBSTRUCTIVE SLEEP APNEA [327.23D]		

Hotkey List Exit Workspace Navigator Hotkeys

# KP HealthConnect: Best Practice Alerts (for MD)



Epic Hyperspace - FAMBPK FAM1 1 - WITS - KTAZD1910 WITSTCM

Desktop Action Patient Care Billing Reports Report Mgmt Tools Admin Help

Back Forward Home Schedule In Basket Chart Encounter Tel Enc Message Enc Secure Support Print Log Out

Home Kangaroo, Karen Kelly

**Kangaroo, Karen Kelly** MRN 000016932126 Age 53 year Sex F PCP Abadir, Janet (m.d.) PCP Loc Baldwin Park Medir\* Allergies Codeine And Opiate Derivatives, \* Alert HM Spec Feat N KP.org Inactive

Visit Navigator (4/26/2006 visit with QUESADA) - Viewing

Images Questionnaires Admin Benefits References SmartSets Scans Open Orders Print AYS

**Epic**

Charting

- Chief Complaint
- CMSS
- Vitals
- BestPractice**
- Nursing Notes
- Progress Notes
- SmartSet

**Allergies:** «Reviewed on 1/23/2006» Codeine And Opiate Derivatives, Aspirin Child, Amoxicillin

**Vitals** : (Last filed) BP: 145/99 P: 67 T: T Src: Resp: W: H:  
BMI: , BSA:

**BestPractice Alerts**

Action(s)

- PREVENTION REMINDER: Patient is overdue for Pap Test/HPV. ACTION: Review MA documentation, pending**

**PATIENT SAFETY: Patient blood pressure is >139 systolic and/or >89 diastolic. ACTION: Inform patient. Diagnose and/or treat, then follow up within 6 weeks or make appropriate referral.**

Open SmartSet: HYPERTENSION SCREENING (DSSC - SCAL) (Last done by Najma( M. D.) Qamar at 1017 on 4/26/06)

mammogram. ACTION: Review MA documentation, pending orders, and codes.  
(MAMMOGRAM SCREENING last satisfied: Not on file)

Hotkey List Exit Workspace Nav Hotkey List

Start Cat... Met... Met... EpicHy... Mic... F:\ 2:14 PM

# KP HealthConnect: Best Practice Alerts (for Nurse)

The screenshot displays the Epic Hyperspace interface for a patient named Karen Kelly Kangaroo. The patient's MRN is 000016932126, and she is 53 years old, female. Her PCP is Janet Abadir, M.D., at Baldwin Park Medical Center. Allergies include Codeine and Opiate Derivatives. The interface shows a visit navigator for a visit on 4/26/2006 with QUESADA. The left sidebar lists various charting options, with 'BestPractice' highlighted. The main content area displays 'Allergies' and 'Vitals' (BP: 145/99, P: 67, T: T, Resp: W, H: H). Below this, a section titled 'BestPractice Alerts' contains three alerts:

- PREVENTION REMINDER: Patient is overdue for Pap Test.** ACTION: Open SmartSet below for coding, notes, and pending orders. Last PAP: Not on file.
  - Open SmartSet PAP TEST SCREENING (BOS - DSSC - SCAL) (Last done by Jaymie( M. A.) Quesada at 0936 on 4/26/06)
- PREVENTION REMINDER: Patient is overdue for mammogram.** ACTION: Open SmartSet below for coding, notes, and pending orders. (MAMMOGRAM SCREENING last satisfied: Not on file)
  - Open SmartSet MAMMOGRAM SCREENING (BOS - DSSC - SCAL) (Last done by Jaymie( M. A.) Quesada at 0936 on 4/26/06)
- DISEASE MANAGEMENT: Patient BP is >139 systolic and/or >89 diastolic.** ACTION: Repeat BP once and enter in the vitals section under 'new readings.' Tell member their BP value.
  - Open SmartSet BLOOD PRESSURE >139/89 (BOS DSSC - SCAL) (Last done by Jaymie( M. A.) Quesada at 0936 on 4/26/06)

# Nurse Actions to Prep & Pend Orders (Teamwork)

Epic Hyperspace - PEDBPBK PED1 1 - WITS - KTAZD1910 WITSTCM

Desktop Action Patient Care Scheduling Billing Reports Report Mgmt Tools Admin Help

Back Forward Home Schedule In Basket Chart Encounter Tel Encounter Patient Lists Secure Print Log Out

Home Kangaroo, Karen Kelly

**Kangaroo, Karen Kelly** MRN 000016932126 Age 53 year Sex F PCP Abadir, Janet (m.d.) PCP Loc Baldwin Park Medi Allergies Codeine And Opiate Derivatives, \* Alert HM Spec Feat N KP.org Inactive

### SmartSet - Decision Support

Association Primary Dx Edit Item Favorite Pharmacy Questionnaire Health Maint **Accept/Pend** Accept/Sign Cancel

- DIABETES SCREENING AH (DSSC SCAL) - SmartSet # 3010**
  - DISEASE MANAGEMENT REMINDER: Patient may be overdue for A1c test. Check date of last A1c. ACTION: If last A1c was performed more than 12 months before today's date, use SmartSet to stage orders and document in nursing note.
  - Last HGA1C=8.2 on 2/2/2002
  - Trigger diagnosis
    - Uncomplicated, Diabetes Mellitus Type 1 [250.01A]
- NURSING NOTES - Please go to Nursing Notes Activity and Use SmartPhrase .SCRNHBA1C
- DIAGNOSIS
  - Diagnosis (multiple)
    - DM SCREENING (aka Diabetes Mellitus Screening) [V77.1A]
- ORDERS - HbA1c Defaulted, Stage for Provider
  - Laboratory (multiple)
    - HEMOGLOBIN A1C [83036B]
    - DIABETES PANEL, FASTING (MICROALBUMIN, HBA1C, CHOL, TRIG, D HDL, CHOL/HDL) [208237]
    - DIABETES PANEL, NON-FASTING (MICROALBUMIN, HBA1C, D HDL, D LDL) [208238]
- Patient Instructions
  - Patient Instructions (multiple)
    - DIABETES PI NATL [10957]

Authorizing Provider: LIN, TONY K (M.D.) [1000 ...]

SmartSet Notes: SmartSet : HBA1C MA (DSSC - SCAL)(3010) No notes defined for this SmartSet.

Legend:  
● Standing order  
■ Future order

Hotkey List

# MD Finalizes and Signs Orders (Teamwork)

Epic Hyperspace - PEDBPBK PED1 1 - WITS - KTA2D1910 WITSTCM

Desktop Action Patient Care Scheduling Billing Reports Report Mgmt Tools Admin Help

Back Forward Home Schedule In Basket Chart Encounter Tel Encounter Patient Lists Secure Print Log Out

Home Kangaroo, Karen Kelly

**Kangaroo, Karen Kelly** MRN: 000016932126 Age: 53 year Sex: F PCP: Abadir, Janet (m.d.) PCP Loc: Baldwin Park Medi\* Allergies: Codeine And Opiate Derivatives, \* Alert: HM Spec Feat: N KP.org: Inactive

Order Entry (Encounter Date: 03/13/2006) - Weight: 165 lbs (74.844 kg) Height: 5' 6" (1.676 m) BMI: 26.63 kg/m<sup>2</sup> BSA: 1.87 m<sup>2</sup>

Association CodeSearch Pref List Interactions Pharmacy Providers References Open Orders **Sign** Financial Routing

Order:   Both  Medication  Procedure

This patient has open orders.

Take	Req	F/S	Order	Dx	Detail
			DIABETES PANEL, (MICROALBUMIN, HBA1C, LIPID PANEL) [215591]		Routine
			XR MAMMOGRAPHY SCREENING BILATERAL 2 VIEWS EACH BREAST [76092A]		Routine
			LDL DIRECT [83721C] [83721C]	2	Routine

New Order Status Modifiers Cancel/Delete Select All Med Class Benefit CC Results  Show placed orders F7 - Prev order F8 - Next order

Association: Selected Grid Clear Replace LOS:

Diagnosis:

P	Encounter Diagnoses (right-click dx for more options)
1	DIABETES MELLITUS TYPE 1, UNCOMPLICATED. [25...
2	SCREENING FOR HYPERLIPIDEMIA [V77.91D]

Add Add

Link	Problem List (right-click problem for more options)	Status
	ABDOMINAL PAIN, CHRONIC [789.00L]	Activ
	AA AMYLOIDOSIS [277.3D]	Activ
	ABDOMINAL COLIC [789.00B]	Activ
	ABDOMINAL PAIN, PERIUMBILICAL [789.05A]	Activ
	ABDOMINAL PAIN [789.00E]	Activ
	DIABETES MELLITUS TYPE 1, UNCOMPLICATE...	Activ

New Problem Edit Problem Resolve Now  Show resolved

Auth Prov: LIN, TONY K (M.D.) [10009188] Pharmacy: BP BALDWIN PK MOB 1ST - 1 order

ERIN STONE

My Open Charts, Open Orders, Staff Message

11:46 AM

# Proactive Encounter Experience



Pre Encounter	Office Encounter	Post Encounter
<p><u>Proactive Identification</u></p> <ul style="list-style-type: none"> <li>• Identify missing labs, screening procedures, access management, kp.org status, etc.</li> <li>• Provide member instructions prior to visit</li> <li>• Contact member and document encounter in KP HealthConnect™</li> </ul>	<p><u>Office Encounter Management</u></p> <ul style="list-style-type: none"> <li>• Vital sign collection / documentation</li> <li>• Identify and flag alerts for provider</li> <li>• Room and prepare patient for necessary exams</li> <li>• Pre-encounter follow-up</li> </ul>	<p><u>Immediate</u></p> <ul style="list-style-type: none"> <li>• After visit summary, after care instructions, follow-up appointments, Health Ed materials, how to access info on kp.org</li> </ul> <p><u>Future</u></p> <ul style="list-style-type: none"> <li>• Follow-up contact and appointments per provider</li> </ul>
<p style="text-align: center;"><b>Message Support</b></p> <ul style="list-style-type: none"> <li>• Phone calls</li> <li>• Letters</li> <li>• E-mail</li> </ul> <div style="display: flex; justify-content: space-around; align-items: center;">   </div>		

# Pre-Visit (ProActive Encounter Support)

http://point.kp.org - POINT: Panel Management - Microsoft Internet Explorer

## Proactive Encounter Patient List

Criteria  Today  Tomorrow  One Week  Two Weeks  Custom 7/5/2007 7/12/2007 Find Patients

Region: CS | Area: SGV | Clinic: MONU | Department: FAMILY PRACTICE-MONFAM\*-1201702300007

Pre-Encounter Checklist  View Records 1-50/111

Action	MRN	Patient Name	Age	Gender	Day phone number	Evening phone number	PCP Name	Appt Date & Time	Appt with Provider
	[REDACTED]		49	M	[REDACTED]	[REDACTED]	LEE, MICHAEL L	07/12/2007 09:30 AM	IVY, DAWN LEE (M.A.)
	[REDACTED]		57	M	[REDACTED]	[REDACTED]	DOERNING, BRIAN J	07/10/2007 08:40 AM	HERNANDEZ, GERARDO (L.V.)
	[REDACTED]		55	F	[REDACTED]	[REDACTED]	STEPHENS, PHILIP K	07/06/2007 01:40 PM	HERNANDEZ, GERARDO (L.V.)
	[REDACTED]		52	F	[REDACTED]	[REDACTED]	LEE, MICHAEL L	07/06/2007 10:00 AM	HERNANDEZ, GERARDO (L.V.)

http://point.kp.org - POINT: Panel Management - Microsoft Internet Explorer

## Proactive Encounter Patient List

Criteria  Today  Tomorrow  One Week  Two Weeks  Custom 7/5/2007 7/12/2007 Find Patients

Region: CS | Area: SGV | Clinic: MONU | Department: FAMILY PRACTICE-MONFAM\*-1201702300007

Pre-Encounter Checklist  View Records 1-50/111

Care Gaps	Mammo Due	Pap Due	Colorectal screening due	LDL Due in CVD	A1c Due	Microalbumin Due	Chlamydia screening due	Pneumovax Due	Flu Vaccine due (seasonal)	Adult Tdap(Tetanus) Vaccine 10-year Due	Smoking Status - Never asked	Smoker -Yes	HTN	DM	"Persistent" Asthma	Needs KP.org sign-up	KPHC area desc	KPHC clinic desc	KPHC department label ID
4				Y	Y	Y								Y	Y	LOS	LA/MONTEBELLO PAYROLL ONLY MOB U		1216525
4			Y	Y	Y	Y						Y	Y	Y	Y	SGV	MONTEBELLO MEDICAL OFFICES U		1203594
3			Y			Y					Y	Y	Y	Y	Y	SGV	MONTEBELLO MEDICAL OFFICES U		1203594
3	Y		Y							Y	Y				Y	LOS	LA/MONTEBELLO PAYROLL ONLY MOB U		1216525

[Linked to Profile](#)

javascript:OpenProfile('000016834696')

# ProActive Encounter Checklist (Medical Assistant)

MRN  
Evening Phone

Patient Name Day Phone  
PCP Name: P-----, E---- D----- (M.D.)



Appointments: All Appointments between 02/01/08 and 02/15/08

## Member with Chronic Condition(s):

- **Diabetes** - (Goal Alc < 7; LDL < 100 mg/dL, Microalbumin urine test < 30 mg, Diabetes Retinal Screening yearly; BP  $\leq$  129/79)
  - \* Checked BP (if BP is greater than or equal to 130/80, repeat and notify provider)
  - \* Set out the meds the patient brought or the medication list out for the provider to review
  - \* **Got meter from patient and downloaded SMBG numbers or asked patient for their log book and gave to provider**
  - \* **If member does not have a meter, pended order for Ultra Smart 2 meter start-up kit and kit and informed provider patient has not been monitoring.**
  - \* **If member does not have a meter, gave member the number for either Health Ed Class, , Nurse Clinic, or other local procedure for meter class to call for a meter class - if needed**
  - \* Removed shoes for exam
- **Hypertension** - (Goal 139/89 for uncomplicated HTN or 129/79 for members with Diabetes or Chronic Kidney Disease)
  - \* Took BP (Repeat if above or equal to 140/90 for uncomplicated HTN or above or equal to 130/80 for members with Diab or Chronic Kidney Disease)
  - \* **Ask member if they brought home BP readings (if so give to provider)**

# Proactive Care Encounter Checklist Display

Epic Hyperspace - FAMSCALPAS FAM (TR) - TRNGSC4 - KTAZP3356 TRNGSC4

Desktop Action Patient Care Scheduling Billing Reg/ADT CRM/CM Reports Report Mgmt Tools Admin Help

Back Forward Home Schedule In Basket Chart Encounter Tel Enc Message Enc Secure

Epic Home Chicken-Prac, Sarah

**Chicken-Prac, Sarah** MRN: 305003005806 Age: 17 year Sex: F PCP: Bronze-prac, Kelly Allergies: Penicillins Class Alert: FY HM

**Proactive Care**

**CMSS Viewer** Care Management Summary Sheet **Primary Encounter** Specialty Encounter Pediatrics Encounter

**Encounter Checklist** Links to POE Checklists Print

Generated on 02/03/2009

Patient Name: [REDACTED] [SHOW CMSS details](#)

MRN: [REDACTED] PCP: [REDACTED]

DOB: 01/05/1951 Day Phone: (000) 000-0000

Age: 58 yrs Evening Phone: [REDACTED]

Gender: M Address: [REDACTED]

Language: ENGLISH

Appointments: PCP appointments only for 03/17/09

Appt Date / Time	Dr. Appt with	Appt Type	Appt Location
03/17/09 09:00 AM		CON40	NEPHROLOGY-KMRNEP*

**Missing Care Gaps**

- A1C Due
- Retinal Exam Due
- Microalbumin Due
- Lipid Profile Due
- Dm Health Education Class Needed
- Pnuemovax Due
- Colorectal Cancer Screening Due
- Hypertensive

**Care Gaps Due**

**Colorectal Cancer Screening Due**

**Recommendations**

**Actions to Be Taken**

- Inform provider member is due for colorectal cancer screening
- Assist provider with referral as necessary
- Pend FOBT/iFOBT order and provide kit
- If available, send evaluation for providers code

# After office visit summaries - for the patient

Printed paper copy handed to the patient or family at the end of every visit.

Visit record is also available in the online health record.

## Appointment Information

**Date:** 11/06/2003  
**Time:** 10:30 AM  
**Visit Type:** Clinic Visit  
**Visit with:** Grant Petersen, MD  
Campbell Medical Offices  
**Reason for Visit:** Diabetes

## Vitals

**Blood Pressure:** 110/60  
**Respirations:** 26  
**Pulse Rate:** 72  
**Height:** 5' 8"  
**Temperature:** 99  
**Weight:** 188 lbs  
**Temp Source:** Oral  
**SAO2:** 98%

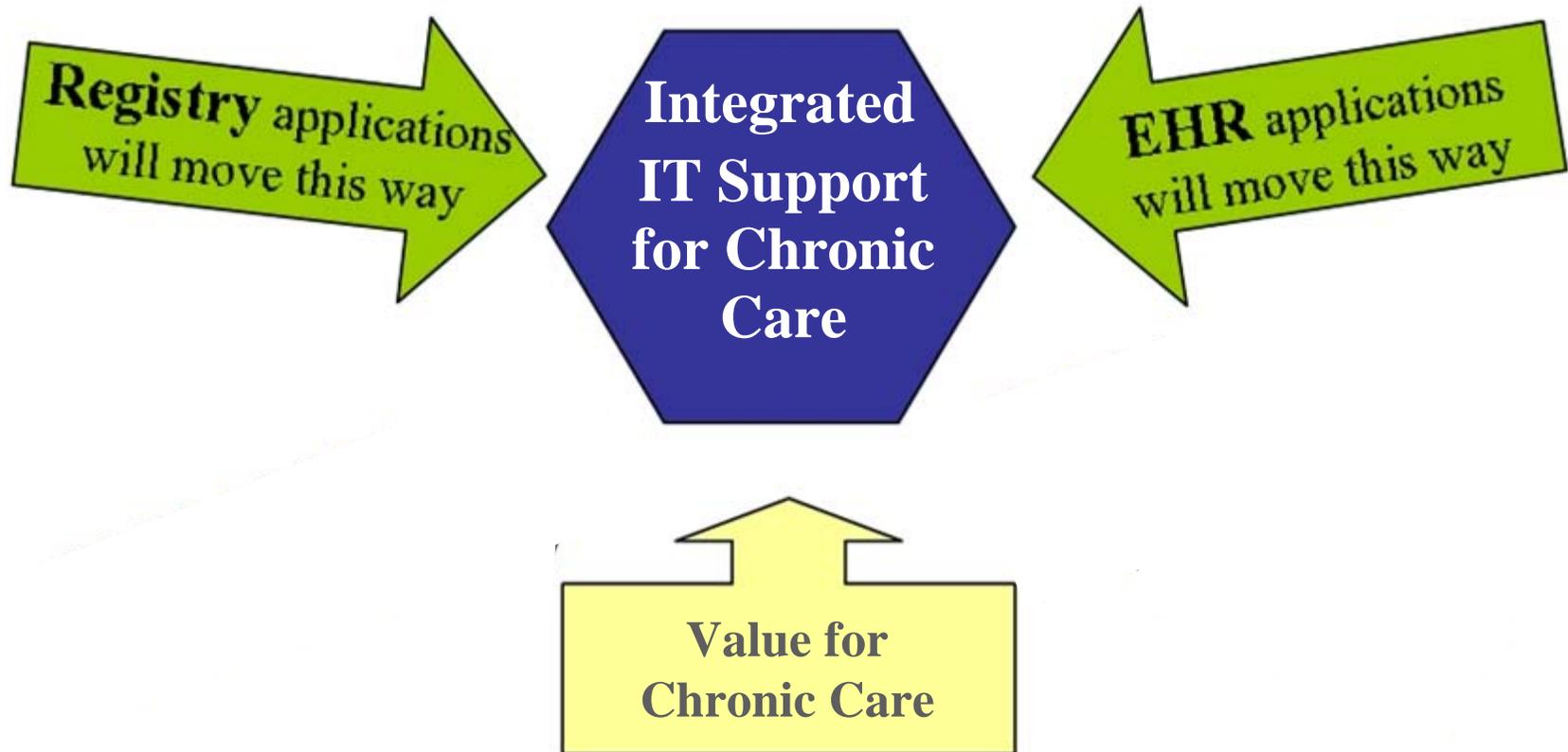
## Lab Orders

HBA 1C

## Patient instructions

Please check your blood sugar twice a day, before breakfast and dinner, for three days. Send the results by e-mail message to me next week. See the Diabetes featured health topic on kp.org for more information on diet and diabetes.

## The Path to Integrated Electronic Information System Support



# MD Panel Management Support Tool



http://point.kp.org - POINT: Panel Management - Microsoft Internet Explorer

**Panel Management** Select Provider | Back | POINT Panel Views Populations Search Reports

Personalized For **JOEL D HYATT** Wednesday, July 04, 2007

Provider View | All Opportunities View | High CAD Risk | ER visit in 7 days | No PCP visit in 12 mos | Monthly Birthday | Upcoming Visit in 2 weeks

Provider View Other Populations Live Help Help Export Batch Print

View Records: 1-50/21132 Region: CS | Area: PNC | Clinic: PAN | Department: FAM

Print CMSS Print Generate Letters Reviewed/Re-Review

Action	MRN	Patient Name	Age	Gender	Gap Score	CDCF	Breast Cancer Screening Due	Cervical Cancer Screening Due	Colorectal Screening Due	Pneumovax Due	Diabetes	CAD	CVD	HF	HTN	CKD	Asthma	Missing Lab	Missing Rxs	10 year CVD risk	Last PCP Appt Date
<input type="checkbox"/>			60	F	2	Y	Y	Y	Y		MOD		LOW		NoBP			CA1LK	AL	21.6	5/15/2006
<input type="checkbox"/>			62	F	2	Y	Y	Y	Y		MOD		LOW		STG2			CAA1LK	AL		
<input type="checkbox"/>			66	F	2	Y	Y		Y	Y	MOD		LOW					CAA1LK	A		5/7/2007
<input type="checkbox"/>			66	F	2	Y	Y		Y	Y	MOD		LOW		NoBP			A1L	AAcL	8.8	1/26/2006
<input type="checkbox"/>			54	F	2													A1L	AL	15.1	
<input type="checkbox"/>			61	F	6										STG2			A1L	AL		3/27/2007
<input type="checkbox"/>			53	M	6										STG1			A1L	AL	29.4	3/15/2007
<input type="checkbox"/>			55	M	6										STG1			A1L	AL	9.6	
<input type="checkbox"/>			57	M	6						MOD	LOW	MILD					A1L	AAcBL	22.5	
<input type="checkbox"/>			64	F	6	Y			Y		MOD		LOW					A1L	AcL		4/2/2007
<input type="checkbox"/>			59	F	6	Y	Y		Y	Y	MOD	LOW	MOD		STG1			A		22.2	4/16/2007
<input type="checkbox"/>			64	F	6	Y	Y	Y	Y		MOD		LOW		CTL			CA1LK	AL	10.6	9/29/2005

Missing A1C Gap Number 1  
 Missing Diabetes Retinal Exam Gap Number 1  
 Missing MAU Gap Number 1  
 Missing LDL Gap Number 1  
 Colorectal screening due Gap

JavaScript: OpenLiveHelp() Internet

start Joel D Hyatt - Care M... NBCHeValue8UserGro... 2 Internet Explorer 9:10 PM

# Panel Management

Select Provider | Back | POINT

Panel Views

Populations

Search

Reports

Personalized For JOEL D HYATT Wednesday, July 04, 2007

Provider View | All

http://csdownpanb001.dwny.ca.kp.org/pointletter/web/pst/customletter.aspx?uToken=nnlidfmlfccfjpo - ...

Select Letter : LAB ORDERED 2

Preview Letter

Approve Letter



Individual or Batch Letters

Greeting Dear [Redacted]

Text-Block(s)

**B** *I*

We are writing to let you know it is time for you to have the following laboratory tests done:

Lab Ordered: \*\*\*\*\*

Taking the time to have these tests done will give your doctor information to help keep you as healthy as you can be. Some of these tests help monitor your health condition. Others help show how your body is responding to the medicines you are taking.

Even if you had some of these tests done within the last few months, please be sure to have all the tests that are listed above done at this time. If you had all of the tests done within the past few weeks, then there is no need for you to repeat them now.

- Please take this letter to your Kaiser Permanente laboratory to have these tests done.
- If the laboratory test "Lipid Profile" is listed above, please do not eat or drink anything, except your medications and water, for 12 hours before you go to the laboratory.

Birthdays for Ju

View Records 1-50/17

Print CMSS

<input type="checkbox"/> All	Action	MRN
<input checked="" type="checkbox"/>		00000344
<input type="checkbox"/>		00000344
<input type="checkbox"/>		00001526
<input type="checkbox"/>		00001698
<input type="checkbox"/>		00001193
<input type="checkbox"/>		00001647
<input type="checkbox"/>		00001235
<input type="checkbox"/>		00001743
<input type="checkbox"/>		00001486
<input type="checkbox"/>		00001721
<input type="checkbox"/>		00000618
<input type="checkbox"/>		00001717

Batch Print

Department : FAM

Last PCP Appt Date
5/15/2006
12/20/2005
3/23/2006
9/20/2006
6/14/2007
5/24/2007
7/1 10
2/7/2007

javascript:openView("VIS

Done

Internet

Internet

# Personal Health Record: Self-Management Support via Internet



- **My Health Manager** is comprised of many tools we have available to members on [www.kp.org](http://www.kp.org)
- Your health record: test results, immunizations, allergies, previous visits, reminders, and more
- Act for a family member
- Email your doctor
- Appointments, Rx refills
- Total Health Assessment
- Behavior change tools/programs
- Managing my plan (benefits/eligibility)
- And more....

Members sign on

User ID

Password

Sign on

Forgot your [user ID](#) or [password](#)?

[Online security](#)

Just mousing around?

- Site improvements—take a look!
- Register to get a user ID

Prospective Members Employers/Administrators Media Representatives Brokers Job Seekers

## My health manager

Ready for a new you? Take a [total health assessment](#), get a custom action plan.

- [E-mail your doctor](#)
- [Refill prescriptions](#)
- [My test results](#)
- [View past visits](#)
- [Schedule appointments](#)
- [More...](#)

Enrich your care

Be choosy: [Select a personal physician.](#)  
[View plan information, print forms, and more.](#)

# KP HealthConnect Online (kp.org): Past Office Visit Information

Same as After Visit Summary, but online

**Past office visit information**

- Help
- About this feature

Related links:

- Health encyclopedia

**A convenient history of previous visits**

This page displays basic information about your recent visits. If you need more information please contact your Permanente facility. If you have any questions about this page, please call 1-800-123-4567.

Date	Time	Provider	Department	Details
11/06/2003	10:30 AM	Grant Petersen, MD	Campbell Medical Offices	<a href="#">Details</a>
09/03/2003	2:45 PM	Grant Petersen, MD	Campbell Medical Offices	<a href="#">Details</a>

**Appointment Information**

**Date:** 11/06/2003  
**Time:** 10:30 AM  
**Visit Type:** Clinic Visit  
**Visit with:** Grant Petersen, MD  
 Campbell Medical Offices  
**Reason for Visit:** Diabetes

**Vitals**

**Blood Pressure:** 110/60  
**Respirations:** 26  
**Pulse Rate:** 72  
**Height:** 5' 8"  
**Temperature:** 99  
**Weight:** 188 lbs  
**Temp Source:** Oral  
**SAO2:** 98%

**Lab Orders**

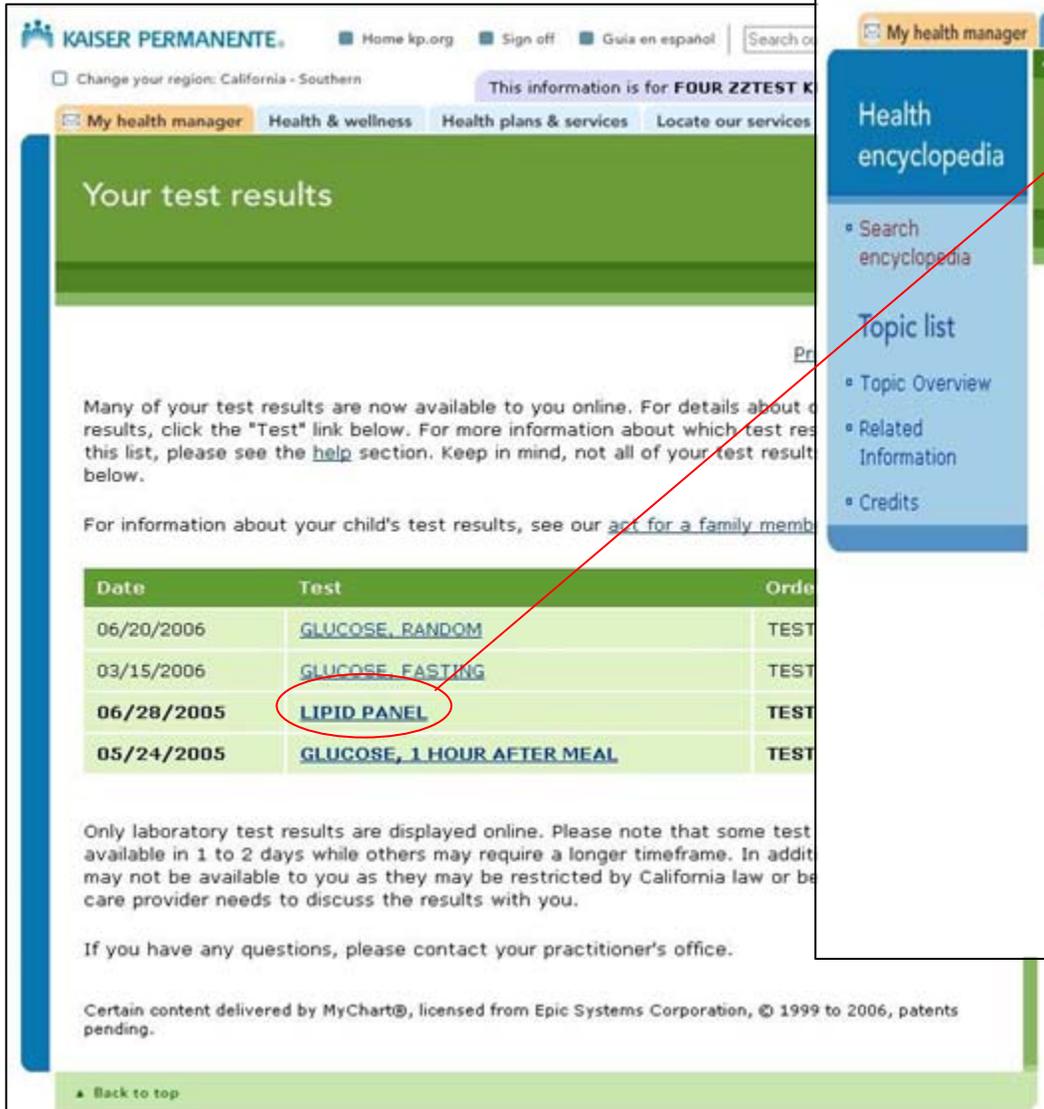
HBA 1C

**Patient instructions**

Please check your blood sugar twice a day, before breakfast and dinner, for three days. Send the results by e-mail message to me next week. See the Diabetes featured health topic on kp.org for more information on diet and diabetes.

# KP HealthConnect Online (kp.org)

## Lab Test Results Online



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### Your test results

Many of your test results are now available to you online. For details about your test results, click the "Test" link below. For more information about which test results are available, please see the [help](#) section. Keep in mind, not all of your test results are available online.

For information about your child's test results, see our [art for a family member](#).

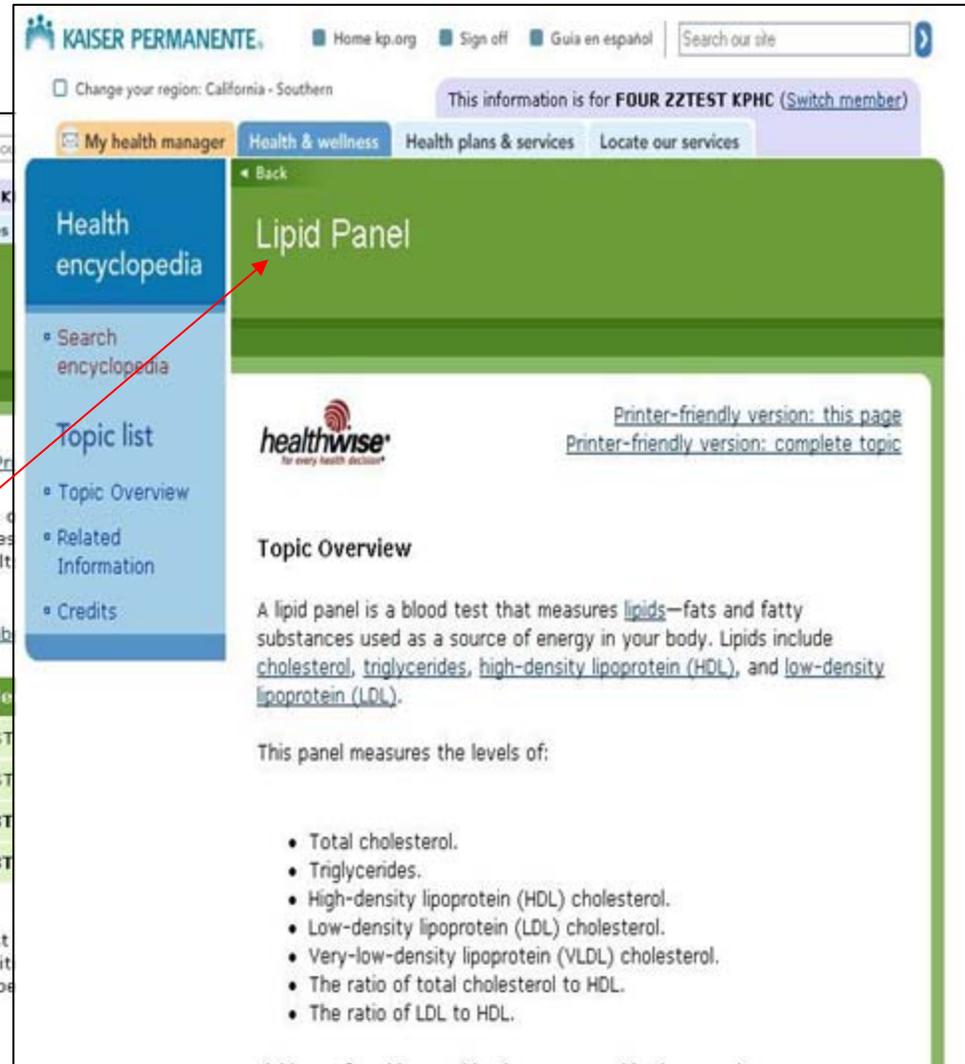
Date	Test	Order
06/20/2006	<a href="#">GLUCOSE, RANDOM</a>	TEST
03/15/2006	<a href="#">GLUCOSE, FASTING</a>	TEST
06/28/2005	<a href="#">LIPID PANEL</a>	TEST
05/24/2005	<a href="#">GLUCOSE, 1 HOUR AFTER MEAL</a>	TEST

Only laboratory test results are displayed online. Please note that some test results are available in 1 to 2 days while others may require a longer timeframe. In addition, some test results may not be available to you as they may be restricted by California law or because your care provider needs to discuss the results with you.

If you have any questions, please contact your practitioner's office.

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### Health encyclopedia

- Search encyclopedia
- Topic list
  - Topic Overview
  - Related Information
  - Credits

## Lipid Panel

healthwise® for every health decision®

Printer-friendly version: [this page](#)  
Printer-friendly version: [complete topic](#)

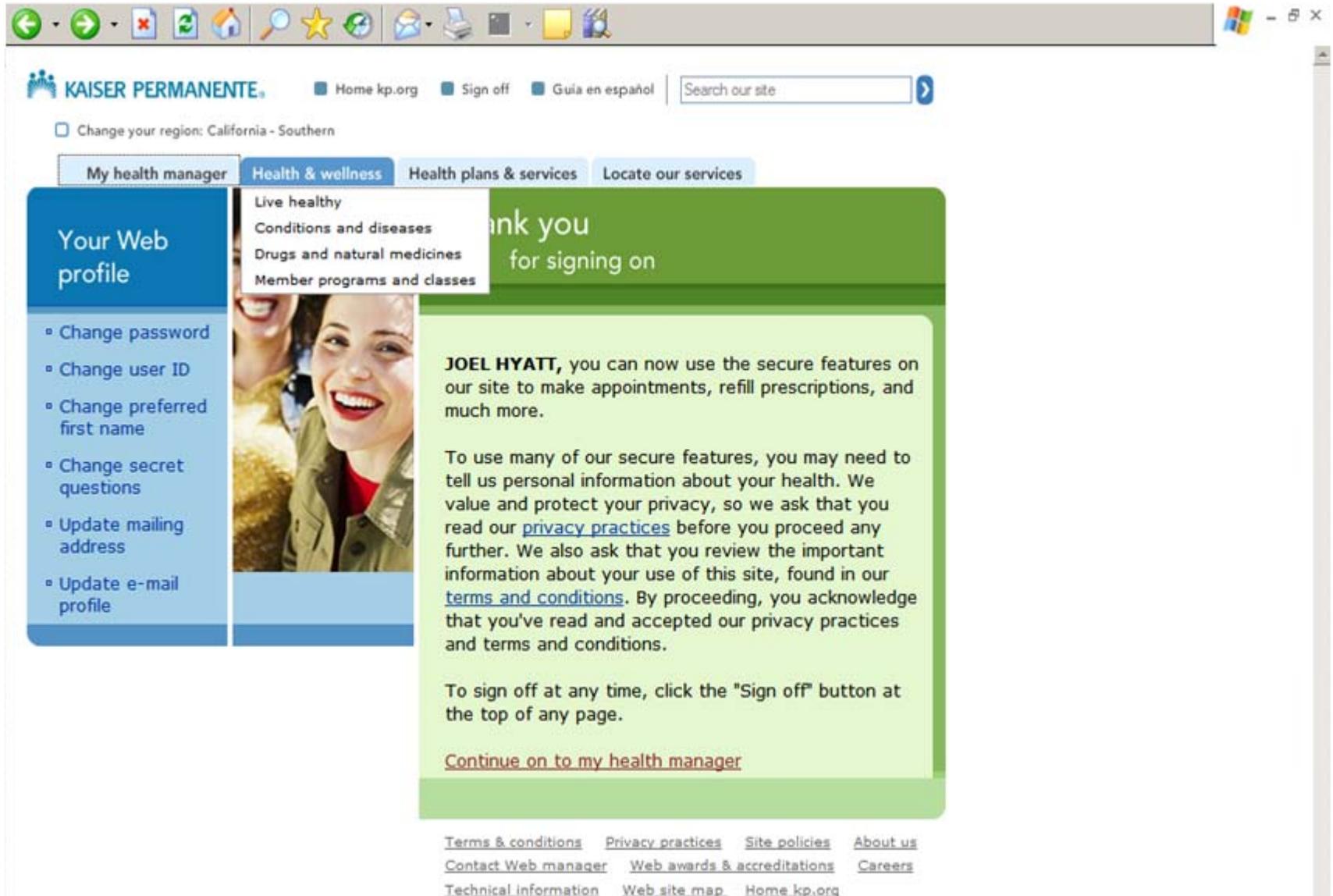
### Topic Overview

A lipid panel is a blood test that measures [lipids](#)—fats and fatty substances used as a source of energy in your body. Lipids include [cholesterol](#), [triglycerides](#), [high-density lipoprotein \(HDL\)](#), and [low-density lipoprotein \(LDL\)](#).

This panel measures the levels of:

- Total cholesterol.
- Triglycerides.
- High-density lipoprotein (HDL) cholesterol.
- Low-density lipoprotein (LDL) cholesterol.
- Very-low-density lipoprotein (VLDL) cholesterol.
- The ratio of total cholesterol to HDL.
- The ratio of LDL to HDL.

# Internet Enabled Self-Management Support



The screenshot shows a web browser window displaying the Kaiser Permanente website. The browser's address bar and navigation icons are visible at the top. The website header includes the Kaiser Permanente logo, navigation links for 'Home kp.org', 'Sign off', and 'Guía en español', and a search bar. Below the header, there are tabs for 'My health manager', 'Health & wellness', 'Health plans & services', and 'Locate our services'. A dropdown menu is open under 'Health & wellness', listing 'Live healthy', 'Conditions and diseases', 'Drugs and natural medicines', and 'Member programs and classes'. On the left side, there is a 'Your Web profile' section with a list of options: 'Change password', 'Change user ID', 'Change preferred first name', 'Change secret questions', 'Update mailing address', and 'Update e-mail profile'. The main content area features a green banner with the text 'Thank you for signing on'. Below this, a message reads: 'JOEL HYATT, you can now use the secure features on our site to make appointments, refill prescriptions, and much more.' This is followed by a paragraph explaining that users may need to provide personal health information to use secure features, and that the site values privacy. It asks users to read the 'privacy practices' and 'terms and conditions' before proceeding. A link to 'Continue on to my health manager' is provided. At the bottom of the page, there are several links: 'Terms & conditions', 'Privacy practices', 'Site policies', 'About us', 'Contact Web manager', 'Web awards & accreditations', 'Careers', 'Technical information', 'Web site map', and 'Home kp.org'.

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Your Web profile

- Change password
- Change user ID
- Change preferred first name
- Change secret questions
- Update mailing address
- Update e-mail profile

Live healthy  
Conditions and diseases  
Drugs and natural medicines  
Member programs and classes

Thank you for signing on

**JOEL HYATT**, you can now use the secure features on our site to make appointments, refill prescriptions, and much more.

To use many of our secure features, you may need to tell us personal information about your health. We value and protect your privacy, so we ask that you read our [privacy practices](#) before you proceed any further. We also ask that you review the important information about your use of this site, found in our [terms and conditions](#). By proceeding, you acknowledge that you've read and accepted our privacy practices and terms and conditions.

To sign off at any time, click the "Sign off" button at the top of any page.

[Continue on to my health manager](#)

[Terms & conditions](#) [Privacy practices](#) [Site policies](#) [About us](#)  
[Contact Web manager](#) [Web awards & accreditations](#) [Careers](#)  
[Technical information](#) [Web site map](#) [Home kp.org](#)

# Information

## Engages patient as partner

Change your region: California - Southern

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### Diabetes

- Topic overview
- Basic facts
- Are you at risk for diabetes?
- Do you have diabetes?
- Caring for your diabetes
- Medications
- Complications
- Classes & programs in Southern California

Related links:

- Featured health topics
- Healthy lifestyle programs
- Healthy living classes

◀ Back

## Healthier living with diabetes

### [Información en español sobre la diabetes](#)

Diabetes is a rapidly growing health problem. Currently, more than 18 million people in the United States have diabetes.

Although diabetes is a life-long condition, you can still lead a healthy life and avoid complications. These actions are key: [a meal plan to help you eat well](#), [staying active](#), [keeping your blood sugar \(glucose\) levels](#) as close to normal as possible, and [monitoring your blood pressure](#).

If you don't have diabetes, find out if you are [at risk for developing it](#).

So, in addition to the care and guidance you receive from your physician, select any of the diabetes-related topics on the left to learn more, or continue on to [basic facts about diabetes](#).

Reviewed by Jim Dudl, MD, July 2007

[Complete list of reviewers](#)

©2009 Kaiser Permanente

### Complete Care for Diabetes



Kaiser Permanente's Complete Care for Diabetes program helps you live healthier. [Learn more...](#)

### Be in the know



▫ [Get a personal plan: HealthMedia@Care™ for Diabetes.](#)

▫ [ACE Inhibitors, statins, and daily aspirin lowers risk of heart attack and stroke. Learn more.](#)

Spanish version

# Managing Your Asthma: Connecting to Appropriate Actions

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## Asthma



- Topic overview
- Basic facts
- Could you have asthma?
- Managing your asthma
- Children with asthma
- Asthma medications
- Related topics
- Healthy living resources in Southern California

### Related links:

- Allergies
- Featured health topics
- Drug encyclopedia
- Healthy living classes
- Colds and flu

## Managing your asthma

With the help of your physician, you can be in control of the day-to-day management of your asthma.

### Here are some steps you can take to make managing your asthma easier:

- Have a plan. If you have asthma, one of the first steps in managing it is making sure you have your own physician who can help you develop an [asthma action plan](#)—and keep it up to date. Your action plan tells you how to care for your asthma at home. If you haven't seen your doctor within the past year, make an [appointment](#). If you don't have your own physician, you can use our [medical staff directory](#) to help select one.
- Check your breathing every day. Monitor your [peak flow](#) daily to help you know when a flare-up is coming on and the steps you should take to manage it. Your action plan may include the peak flow numbers for your color "zones": green (good control), yellow (losing control), and red (having a flare-up).
- Stop flare-ups before they start. [Identify and control the triggers](#) that can make your asthma worse.
- Use your [metered-dose inhaler](#) (MDI) properly, so that you get the most benefit from your medication.
- If you smoke, [get help quitting](#). We have tools, tips, and information that can help. Also, read about the role that [nicotine replacement therapy](#) and Zyban ([bupropion](#)) play in quitting smoking.
- If [exercise triggers your asthma](#), talk to your physician about using medicine before you start. This way, you can enjoy exercising without worrying about having an asthma flare-up.
- Being depressed or anxious can make it harder for you to manage your asthma. Talk with your

Link to  
asthma action plan

Physician  
Follow-up

Self  
Management

Link to Asthma  
Triggers tool

# Interactive Online Healthy Living Programs (HealthMedia, Inc)



[Home](#) [Programs](#) [My Account](#) [Log Out](#)

## Choose a Program

Ready to take the first step toward a healthier, happier you? Start one of the MyHealthMedia programs listed below, and discover the benefits of healthy living!



### Weight Management

Finally, a weight management program that really works!

[About This Program](#)



Start This Program

### Nutrition Improvement

Healthy eating can be fun and fit your lifestyle.

[About This Program](#)



Start This Program

### Managing Chronic Health Conditions

Confidence, skills, & knowledge to manage chronic conditions.

[About This Program](#)



Start This Program

### Chronic Pain Management

Act now to get your pain under control.

[About This Program](#)



Start This Program

### Managing Diabetes

Act now to get your diabetes under control.

[About This Program](#)



Start This Program

# National Market Leading Performance: Prevention and Chronic Conditions



## Top 10 Among All Health Plans Nationally (2010 NCQA)

Kaiser SCAL Rank	Measure Name
1	Appropriate Treatment for Children With Upper Respiratory Infection
1	Comprehensive Diabetes Care - Blood Pressure Control (<130/80)
1	Comprehensive Diabetes Care - Medical Attention for Nephropathy
2	Adult BMI Assessment
2	Controlling High Blood Pressure - Total
3	Antidepressant Medication Management - Effective Acute Phase Treatment
3	Comprehensive Diabetes Care - Blood Pressure Control (<140/90)
5	Chlamydia Screening in Women - Total
6	Chlamydia Screening in Women (Lower Age Stratification)
6	Chlamydia Screening in Women (Upper Age Stratification)
6	Comprehensive Diabetes Care - LDL-C Screening
6	Well-Child Visits in the 3rd, 4th, 5th, and 6th Years of Life
7	Antidepressant Medication Management - Effective Continuation Phase Treatment
7	Comprehensive Diabetes Care - LDL-C Controlled (LDL-C<100 mg/dL)
9	Cervical Cancer Screening
9	Cholesterol Management for Patients with Cardiovascular Conditions: LDL-C Screening
10	Appropriate Testing for Children With Pharyngitis

Kaiser NCAL Rank	Measure Name
1	Antidepressant Medication Management - Effective Acute Phase Treatment
3	Comprehensive Diabetes Care - Blood Pressure Control (<130/80)
3	Comprehensive Diabetes Care - LDL-C Controlled (LDL-C<100 mg/dL)
3	Controlling High Blood Pressure - Total
4	Adult BMI Assessment
4	Breast Cancer Screening - Total
5	Antidepressant Medication Management - Effective Continuation Phase Treatment
6	Appropriate Treatment for Children With Upper Respiratory Infection
7	Cholesterol Management for Patients with Cardiovascular Conditions: LDL-C Control (<100 mg/dL)
7	Comprehensive Diabetes Care - Blood Pressure Control (<140/90)
8	Avoidance of Antibiotic Treatment in Adults with Acute Bronchitis
8	Use of Imaging Studies for Low Back Pain

# California Office of the Patient Advocate

## HMO Ratings at a Glance (2/2010)



Meeting National Standards of Care  
And  
Members Rate Their HMO

Kaiser Permanente  
#1 in CA

Excellent  
(4 stars)

Address: [http://dev.opa.ca.gov/report\\_card/hmorating.aspx](http://dev.opa.ca.gov/report_card/hmorating.aspx)

Skip to: [Content](#) | [Footnote](#)



California  
Office of the Patient Advocate

[Home](#) [About OPA](#) [How to Use Your Health Plan](#) [Quality Report Card](#) [Contact Us](#)

[Health Plans](#) [Doctors and Medical Groups](#) [Hospitals and Long-Term Care](#) [Language Services](#) [Research and Background](#)

### Page tools

- Print this chart
- Print all HMO Ratings charts

### Related links

- [Language services for commercial HMO members](#)
- [DMHC Health Plan Information](#)
- [About the HMO Ratings](#)
- [What is an HMO?](#)
- [How to choose an HMO?](#)
- [About the Health Care Quality Report Card](#)

[Health Plans](#) ▾

## HMO Ratings At-a-Glance

- ★★★★★ Excellent
- ★★★★ Good
- ★★★ Fair
- ★ Poor

Meeting National Standards of Care

<a href="#">Aetna Health of California, Inc.</a>	★★★★★
<a href="#">Anthem Blue Cross - HMO</a>	★★★★★
<a href="#">Blue Shield of California - HMO</a>	★★★★★
<a href="#">CIGNA HMO</a>	★★★★★
<a href="#">Health Net of California, Inc.</a>	★★★★★
<a href="#">Kaiser Permanente - Northern California</a>	★★★★★
<a href="#">Kaiser Permanente - Southern California</a>	★★★★★
<a href="#">PacifiCare of California</a>	★★★★★
<a href="#">Western Health Advantage</a>	★★★★★

# Systems Approach to Managing Care

## Chronic Care Model

### **Community**

*Resources and Policies*

**SELF-MANAGEMENT  
SUPPORT**

### **Health System**

*Organization of Health Care*

**DELIVERY  
SYSTEM  
DESIGN**

**DECISION  
SUPPORT**

**INFORMATION  
SYSTEMS  
SUPPORT**

**Informed  
Activated  
Patient**

**Productive  
Interactions**

**Prepared,  
Proactive  
Practice Team**

**Clinical & Functional Outcomes**

# Conclusions & The Future

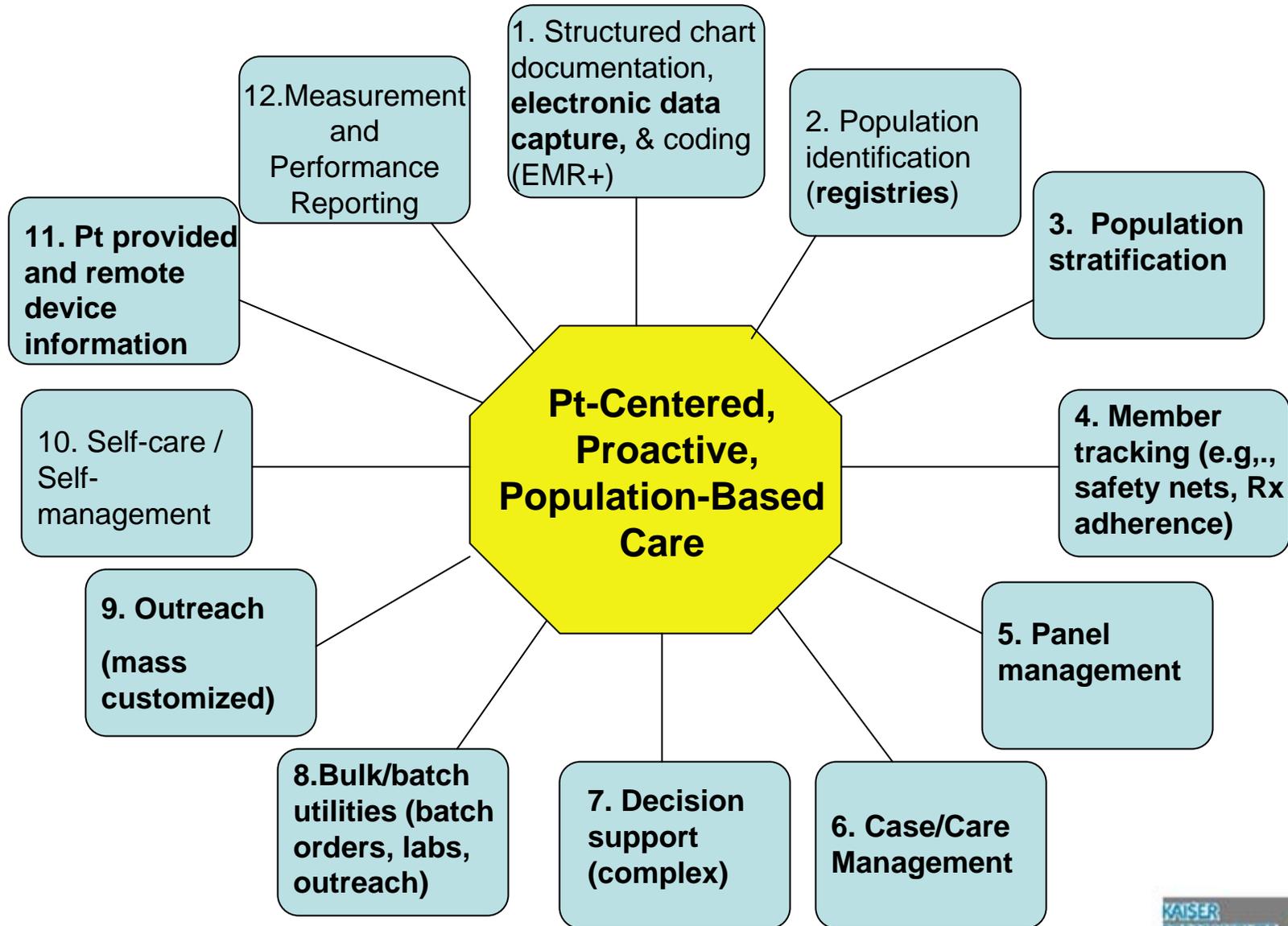
## Integrated IT Systems Support Across the Continuum



# Appendix

# 11 Functions needed to support KP Complete Care

(aka Population-based Care Management)



# Obstacles

- Inconsistent data formats, coding schemes, and timing of information delivery
- Complexity and cost of matching up information about patients from different sources (lack of uniform pt. identification)
- Incomplete data in existing electronic health information systems
- Limited functionality in existing disease registries

# Accelerating Application of Clinical IT to Chronic Disease Care

- Develop standard formats on data exchange
- Create community infrastructure for health information
- Develop guides to help providers integrate clinical IT and chronic DM
- Create collaborative forums on applying clinical IT to chronic DM
- Develop approaches to activate consumer/patient

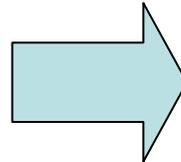
# Barriers to Transformation

- Fragmented health care system
- Perverse incentives and reimbursement
- IT costs and limitations
- Politics – competition vs. collaboration
- Lack of access to timely data
- MD culture
- Lack of evidence
  - Cost savings? ROI or not?
- Disease-centered not patient-centered

# Registry Evolution

## Aggregate Population Data

- Population-level information only
- Electronic feeds from lab, pharmacy, encounters (aggregation of utilization data +/- clinical info)
- Retrospective reporting on paper at infrequent intervals
- Requires little change to provider work flow



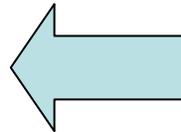
## Disease Registry

- All of aggregate reporting functions, plus:
  - Ability to produce individual pt reports at the POS
  - Inclusion of key clinical markers/data at pt level
- Limited integration with some part of practice workflow, such as scheduling
- Moves beyond population level information

# EMR Evolution

- **Structured Electronic Medical Record**

- Electronic charting
- Structured data formats allow cross-practice analysis
- Automatic generator of reminders



- **Basic Electronic Medical Record**

- Electronic charting
- Individual-level information is main focus
- Proprietary formats: little adherence to data
- Text-based notes
- Few cross-practice analytic functions

# Integrated Electronic Clinical Support System

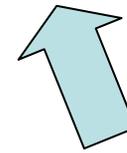


Disease  
Registry



Aggregate  
Population  
Data

- Electronic charting with electronic feeds from lab/pharmacy
- Integration with major practice-management functions
- Individual-level automated reminders (decision-support)
- Population level analysis
- Ability to add to registry data elements/ad hoc querying



Structured  
EMR



Basic EMR