

Survey of Patient Utilization of Web-Based Health Data Management Technology in an Outpatient Ophthalmology Practice Setting



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OBJECTIVE Our study assesses how retinal patients currently use digital tools to manage their healthcare as well as their preferences for using telemedicine or other remote monitoring devices in the future.

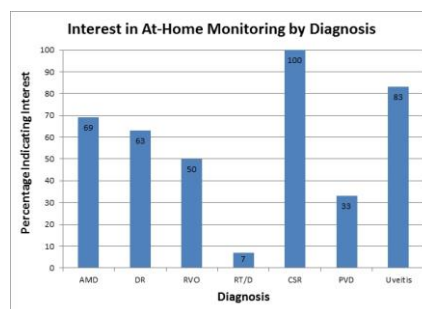
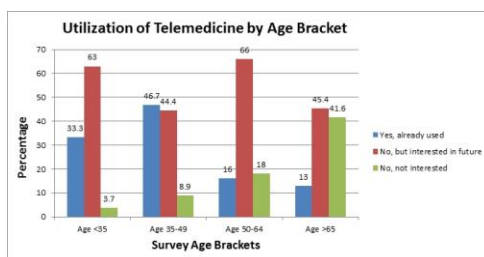
PURPOSE In today's evolving healthcare environment, technology has improved patients' access to medical services from remote locations outside of the physician's office. We performed a survey to assess our patients' preferences and utilization patterns of web-based technology in managing their ocular disease.

METHODS A fourteen question survey of 283 patients was conducted at a single, outpatient, private retina practice. The questions were designed to assess demographics, patients' utilization of a smartphone, tablet, or personal computer (PC) to manage their personal health with regards to scheduling an appointment, pay medical bills, browse online physician reviews, or to research a medical condition within the past six months, patients' interest in participating in telemedicine, using a wearable device, and using an at-home monitoring device for their ocular condition. Groups were compared across age (<35, 35 to 49, 50 to 64, and >65 years) and diagnosis.

RESULTS 200 of 283 subjects completed the survey for a response rate of 71%. Age groups reflected those of a typical retina practice: Age <35 years (13.5%), age 35-49 (22.5%), age 50-64 (25.5%) and age >65 (38.5%). Younger patients use a smartphone, tablet or PC to manage or track their health (age <35, 74%; 35-49, 40%) more than older patients (age 50-64, 14%; >65, 12%). 77% of patients have either already used or were interested in using telemedicine in the future in lieu of a doctor's visit to manage their healthcare. Nearly all younger patients (age <35, 93% and 35-49, 93%) and the majority of older patients (age 50-64, 66%; and >65, 56%) were interested in using a wearable device to monitor their health. Interest in using an at-home monitor device was fairly even across age groups (age <35, 74%; 35-49, 68%; 50-64, 56%; and >65, 62%). Of these, 100% of central serous retinopathy and 69% of macular degeneration patients expressed interest.

CONCLUSION Younger patients, and some older patients, are currently using web-based technology to manage their health care and are interested in remote-based monitoring via telemedicine or wearable devices in the future. Most patients expressed interest in using at-home monitoring devices especially when central vision is at risk. These findings may help guide which services to offer patients in the future.

TAKE HOME MESSAGE The majority of patients express interest in using web-based services including telemedicine and remote patient monitoring. Retinal physicians may benefit by providing these services to our patients.



HUMAN RESEARCH This study involves human research.

IRB Approval Status: Exempt from approval

Retina PractiCare: Coding Benchmarks for Retina Specialists



- John T. Thompson, MD

OBJECTIVE To describe how Retina PractiCare, a free coding analysis service for ASRS members can help retina practices assess and adjust coding practices and avoid costly audits

PURPOSE To help ASRS members compare their individual coding patterns to their peers at the practice, regional and national level.

METHODS Retina specialists have experienced large decreases in surgical reimbursements for all vitrectomy and retinal detachment procedures over the past 2 years. Office based examinations, testing and procedures are becoming an increasingly important source of revenue as surgical reimbursements decline. Retina PractiCare collects anonymized billing data from participating retina specialists and compares individual physician coding patterns to their partners, regional and national benchmarks. This information is provided confidentially to participating ASRS members to help protect against audits, like those recently initiated by the Office of Inspector General (OIG) against several retina practices.

RESULTS Retina PractiCare has collected over 722,000 claims and analysis of coding patterns has been provided to participating ASRS members. This includes distribution of office exam coding, diagnostic testing, physician administered pharmaceuticals and

use of modifiers such as -25 modifier combined with intravitreal injections. Retina PractiCare has downloaded billing data from 20 different practice management systems. All protected health information (PHI) is removed before the data is uploaded to the Retina PractiCare secure servers. The most common procedure performed by a retina specialist is an optical coherence tomography (92134) in over 40% of all office visits, followed by intravitreal injection (67028) in over 25% of office visits and level 2 return patient eye exam (92012) in 25% of claims. There are substantial variations in coding practices by individual retina specialists. Knowledge about the coding patterns of your peers is essential to protect your practice.

CONCLUSION Retina PractiCare provides confidential comparison of your coding with your peers to help identify opportunities to enhance your coding practices and minimize the likelihood of being targeted for audits.

TAKE HOME MESSAGE Retina PractiCare, a free service for ASRS members can help improve their coding practices by providing comparisons with their retina specialist peers