A Day in the Life of a Dermatologist and Data

Data may be a way for physicians to enhance their practices, make life easier, and provide better care.

BY MICHAEL SHERLING, MD, MBA

Data revolution is underway. When you pull up your social media page or shop on Amazon, it’s as if the site already knows what you are looking for. The accuracy can be shocking, but as use of data becomes more commonplace, it should not only be a tool for the big corporations to utilize to market to their customers. Data is a way for physicians to enhance our practices and make our lives easier, and the care we provide better. As these data tools become more powerful and accessible, here’s what you should look for when approaching data collection and analysis.

PATIENT ANALYTICS

You wake up at 2 am in a cold sweat, heart racing. Mr. M. had come into the clinic several months prior for a routine skin check. You found a 6mm, dark, worrisome lesion on his left thigh and the biopsy showed a melanoma which had a Breslow Depth of 0.8mm. Mr. M had the lesion excised with appropriate margins and he was to make an appointment to follow up for a skin check three months later, but you can’t recall having done this. In fact, you think you might not have seen Mr. M. for quite some time.

As physicians we worry about our patients, sometimes at the most inconvenient times. And while no computer program will ever completely eliminate that, we can utilize resources to help relieve the burden of making sure our patients follow through on their follow up plans. Practice analytics can identify gaps in care by pulling a history of visits for our melanoma patients. Who missed appointments and needs follow up calls? Who might benefit from more careful reminders? By engaging dermatology EMR data analytics, we can help to improve patient adherence and save staff time.

Besides helping with patient adherence and follow up, analytics can also provide a mechanism for marketing to specific patient groups. As an example, for dermatologists who offer cosmetic services in their practices, analytics can generate patient lists of those who have not followed up in three to four months for their Botox or six months for their fillers. In doing this, physicians can use analytics to help our patients look their best while also helping to increase the number of products and services that we provide.

When selecting a data delivery solution, you should look for one that provides you with the flexibility and autonomy...
to analyze your own data in-house, as well as a vendor that offers assistance when you need help gathering or analyzing data. Dermatologists can choose solutions that conduct analysis in several ways, ranging from out-of-the-box versions to more flexible, customizable options. As you look for the right data collection and analysis program for your practice, find a solution that offers analysis tools that are intuitive enough that non-data experts can use them with little training. It’s important to find a solution that provides access for downloading data in a useable format, such as a CSV or Excel file.

**DATA EXPLORER**

Later in the day, you are sitting in your office (all charting done!) and start to wonder about the biopsy you did on Mrs. O. this afternoon. Her pruritic, papular eruption could be lichenoid dermatitis, lichen planus, or lichen amyloidosis. You are fairly certain it is lichen planus and wonder how many times you have had this differential and have been right.

Once residency is over, it is hard to get feedback on our differentials and results. We go through four years of intense learning and validation and are then left to decades of wondering if we are still getting it right. By harnessing the data in our own dermatology EHR system, we can get the feedback so important to keeping up our skills as physicians.

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**PRACTICE DATA EXTRACTS**

Back at home, you flip through your old journals and can’t help but notice the number of articles discussing how reimbursement is increasingly being tied to value-based measures. You are in charge of a 30-provider dermatology group. How will you be able to manage your practice to thrive in today’s and tomorrow’s healthcare environments?

Larger groups have different needs than smaller practices. A larger group may want to do data analysis across practice locations. Having the ability to request a data export to create operational dashboards to help you see if your practice is humming along is yet another way to get your data working for you instead of the other way around. From call backs for skin biopsies to making sure MIPS measures are being filled out, tracking data in real time can help large practices run smoothly and uniformly.

When looking for a dermatology EHR, prioritize one that can track and benchmark specialty-specific data, as many aspects of value-based care require this ability. Of course, since MIPS is based on benchmarking your practice’s performance versus that of all other providers, it’s important that you gather the needed structured data. Having a dermatology EMR that automatically collects and feeds forward as much structured data as possible can be critical in helping a practice to meet MIPS measures (or whatever comes after them).

Beyond the ability to track all of your providers’ measures, looking for efficiencies within a large practice is another function a large-practice dermatology EHR should be able to perform. Perhaps your practice could have call-backs done centrally, freeing up other staff to ensure the clinicians... (Continued on page 61)
can move more easily through their day. And when the day is done, make sure that unfinalized notes are caught early, maximizing revenue streams.

**HOW CAN DATA HELP IN THE FUTURE?**

Now completely at ease about your patients and your practice, you can’t help but wonder where dermatology will be in five years and beyond. There is a big push for healthcare to become leaner and that, logically, will translate into payment cuts.

Insurance companies, CMS, and others have been advocating payment cuts to physicians with dermatologists directly in the firing line. To combat this, the American Academy of Dermatology hopes to use aggregate data to advocate for dermatologists on a national level. It is anticipated that in 2019, Modernizing Medicine will have the ability to allow its customers to download their own data and share it with data registries or whomever can most help them.

**YOUR DATA IS YOURS**

Specialty registries are also an important means of benchmarking your performance against that of your colleagues, as well as for earning MIPS points for Public Health and Clinical Data Registry Reporting. Working with an EHR vendor that is familiar with dermatology-specific registries can help you avoid being forced into quality measures that pertain to another specialty.

As important as it is for your EHR to be at your side, it is also important that the EHR can get out of the physician’s way when the physician wishes to do something different with her or his data. Critically, your data is yours. Use it to improve patient care. Use it to improve your practice. Or use it to aggregate with others to try to advocate for our specialty. Data is powerful and as a sage once said, with great power comes great responsibility. Make sure your EHR vendor takes this responsibility seriously.

Michael Sherling, MD, MBA, is the co-founder and chief medical and strategy officer of Modernizing Medicine, Inc. Dr. Sherling is responsible for the strategy and medical innovation within Modernizing Medicine’s suite of products and services for dermatology, gastroenterology, ophthalmology, orthopedics, plastic surgery, otolaryngology, and urology specialties. With CEO Dan Cane, he has developed novel software solutions for EHR, MIPS and ICD-10 automation. Under his leadership, Modernizing Medicine has established a user base of over 14,000 providers and won several awards for #1 EMRs from Black Book.