Clinicians in the US are under increasing pressure due to excessive administrative burdens. Studies have shown that clinicians in medium-sized hospitals spend on average 44% of their time on documentation and only 24% on direct patient contact. This is in great part attributable to the Medicare Physician Fee Schedule (MPFS), which is the primary method of payment for enrolled healthcare professionals. To verify billing to payers, including Medicare and Medicaid, clinicians must specify diagnoses from long and confusing arrays of choices relating to each test or procedure and document a clinically irrelevant number of elements for the history of present illness, review of systems, and physical examination.

For each service, a payment for must contain three RVU's:

1. Clinician Work= 50.9%
2. Practice Expense= 44.8%
3. Malpractice Expense = 4.3%
This system has turned highly trained clinicians into data-entry clerks, required to document not only diagnoses, clinician orders, and patient visit notes, but also an increasing amount of low-value administrative data. Such was the case at Kittitas Valley Healthcare.

### About Kittitas Valley Healthcare

Situated in the heart of Washington State, Kittitas Valley Healthcare (KVH) provides patient-centered care through its hospital, clinics and specialty services. KVH Hospital provides 24-hour emergency care and offers inpatient and outpatient hospital services. KVH also provides care through clinics and specialty services in both Upper and Lower Kittitas County. KVH sees 400 patients per day in its clinics.

### Challenge

As a small regional rural health system, KVH understands the importance of providing its clinicians with the support they need to maintain quality outcomes, reduce costs, and improve the patient experience—the Triple Aim of health care. KVH also understands the importance of providing a healthy work-life balance for its clinicians by reducing administrative burdens. As part of that effort, KVH uses scribes to assist providers with documentation and entering data into the EMR. Because of its rural location, KVH found itself struggling to recruit and retain high-performing scribes. While some were medical students from a local college, others had little to no experience in a clinical environment, which made training essential. That training, however, could take six to eight months and, in the end, wasn't very effective in reducing high scribe turnover rates. Carrie Barr, Chief of Clinic Operations for KVH, wanted to continue offering scribes to KVH clinicians but knew she needed a different approach.

Leveraging virtual scribes can save each clinician up to three hours a day, improve productivity by 20%, and increase provider work-life satisfaction by 40%. And that means less turnover and reduced costs associated with recruiting and training.

### Solution

KVH chose to use virtual scribes from Augmedix. Augmedix virtual scribes are specially trained to work in both acute and non-acute environments, acting as an always-present assistant to the
Clinician, converting real-time clinician-patient conversations into precise medical documentation. Augmedix virtual scribes are experienced in most EMRs, which improves accuracy, increases quality of documentation, and ensures timely charge capture for faster reimbursement. Virtual scribes can also place orders for testing, medications, and labs to keep patients moving along the care continuum.

An aggregated study of 136 providers across three healthcare systems using the Augmedix platform found:

- 10.4% increase in hourly productivity (clinician work RVU)
- Decrease in time spent in the EMR from more than 20 minutes to 14.5 minutes (Practice Expense RYU)

KVH created a unique model to begin the roll-out of virtual scribes through a “memorandum of understanding” with its clinicians. In order to qualify for a scribe, clinicians must become productive enough to cover the cost of the service creating a dual incentive. The system also created a work group to present the clinicians the financial case around the business of healthcare to clinicians. Lightbulbs went off and this has helped them take ownership of the support. Per Barr, “From the employment side of things, it's been so nice, we don’t want to coach someone through performance improvement.”

Augmedix virtual scribes eliminated in person scribe turnover and training challenges.

Results

KVH appreciates how easy it was to implement Augmedix virtual scribes and how quickly its clinicians have adopted their use. KVH saw an almost immediate impact with virtual scribes. Most were up to speed within just a couple of weeks—much faster than the six to eight months with an in-person scribe.

Augmedix virtual scribes have enabled KVH to:

- Quickly work down a backlog of overdue charts
- Reduce the number of people needed in the hospital's small rooms and clinical areas
Augmedix virtual scribes allow clinicians time to see more patients, which supports the KVH strategic focus of expanding access to care for patients and the communities it serves. Likewise, faster turnaround of documentation enables more timely referrals for patients who need other services.

“The clinicians are able to get out on time, tasks are completed, it makes them feel like they have a handle on things, and if there is an issue they can send a quick email and things are addressed.” - Carrie Barr, Chief of Clinic Operations for Kittitas Valley Healthcare

Providers Using Augmedix Virtual Scribes Experience:

- 2 – 3 hours saved per day
- 20% increase in productivity
- 4.8 out of 5 Star Provider Satisfaction Score
- 40% increase in provider work-life satisfaction
- Cost savings from reduced churn

“When we do rounding in clinics we always check in on Augmedix and so far it’s been nothing but super positive!”

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