



# DIAGNOSTIC TESTING AT THE POINT-OF-CARE:

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## EXECUTIVE SUMMARY

The expanding presence of in-office physician-owned laboratories (POLs) clearly demonstrates that diagnostic testing at the point-of-care (POC) can improve patient outcomes while reducing practice costs. The POL is an integral component of the Patient Centered Medical Home model adopted by Miramont Family Medicine. It has enabled Miramont to deliver just-in-time test results, ensure the quality of diagnostic testing, and improve the speed and ease of medical decision-making for physicians and patients. The overall goals are better patient outcomes and greater convenience, efficiency, and productivity.

### WHY CONSIDER A POL?

The increased efficiency achieved with diagnostic testing at the POC has had multiple ramifications. It allows the practice to function more efficiently by replacing a centralized testing scenario—which involves collecting a sample, preparing it for delivery to a lab, waiting for the analysis, and reconnecting with the patient to report the results—and, at best, next-day results, with quick-turnaround testing and result reporting during the same patient visit. This translates to greater staff efficiency, saving the time needed to package a sample for delivery, communicate with a centralized lab, and contact the patient to share the results in a HIPAA-compliant manner or to arrange for a follow-up patient visit.

Given the fact that most tests performed in a POL require only a 15-40 minute turnaround time, in-house testing offers healthcare providers access to test results while the patient is still in the office. A physician may be able to

see another patient while a sample is being analyzed, and then return to the first patient with the test results to discuss them. This test-and-treat approach can eliminate the risk that a patient does not return in a timely fashion to begin necessary treatment. It may also improve quality of care, for example, facilitating repeat testing when needed, such as in patients with diabetes who require monitoring of their HbA1C levels to assess their blood glucose control over time.

Just-in-time testing allows the physician to deliver results in person, face-to-face, which can foster better patient understanding, retention, and compliance. It is also easier for the physician, who does not have to review the patient's record to recall the previous visit and reason for ordering a test. Patients appreciate getting their test results more quickly, and like the convenience of receiving services from one location.

In addition to the gains in quality of care, efficiency, and convenience, a POL can provide a competitive advantage for a practice and help to differentiate it from others in a competitive marketplace. Furthermore, the ability to generate revenue from a POL means that it can also contribute to practice sustainability.

## HOW A POL WORKS

Every practice is different, but all you need to set up and operate a successful POL is the interest and desire, appropriate space, staff to train and allocate, and a sufficient testing load to make it feasible and profitable. Another key factor is having access to the initial funds needed to purchase the necessary equipment. Some training, support, and knowledge about regulatory requirements are also helpful.

**→ SPACE** First, consider whether or not your practice has an appropriate space to house a POL. It need not be a large space—even a big closet will do. However, it must have electrical outlets and running water and not be situated where food is prepared or consumed. There needs to be enough room for a person to maneuver, ideally with the array of tabletop instruments, a sink, and a refrigerator in easy reach to optimize efficiency.

**→ STAFF** Does your practice have staff that is interested and able to learn to operate the equipment and perform the test protocols? Adding a POL to your practice does not necessarily imply the need for additional staff. At Miramont, we have found that POL leads to an overall increase in labor efficiency, lowering labor costs, which represent the largest percentage of a practice's overhead costs.

Using the old model, based on sending samples to a centralized lab and receiving next-day results, we estimated staff time per test to be 20 minutes. With the new model of POL testing and results available in 15-40 minutes, staff labor per test is only about 10 minutes. Thus, more efficient results reporting saved our practice about 10 minutes of staff time per patient. This is non-revenue-generating time. By bringing technology in-house to perform diagnostic testing, we are making better use of our staff to save time.

**→ TESTS** Miramont offers a standard menu of tests that are ordered routinely in a general medical practice:

- ✓ General chemistry: CMP, BMP, lipid profile, CPK, phosphorus, magnesium, lipase, iron panel, uric acid, HbA1C, urine microalbumin
- ✓ Hematology: CBS, PT/INR, D-dimer, ESR
- ✓ Immunochemistry: TSH, free T4, PSA, testosterone, vitamin D, troponin, myoglobin, BNP, RPR, HIV, Hep-C, urine drug screen

To optimize the patient workflow, our physicians developed "standing orders" designed to empower the medical assistant to be able to order particular tests in specific circumstances, even before a physician would enter a patient's room. This can shorten the cycle time for testing and the patient's wait time for test results.

## REAL-LIFE IMPACT OF JUST-IN-TIME RESULTS

A good example of the positive impact just-in-time testing can have on improving patient care and outcomes relates to the diagnosis of vitamin D deficiency. When people undergo bone density testing and receive a diagnosis of osteoporosis, they have the option of treatment with a variety of often very expensive medications, which their insurance may or may not cover. Miramont began a protocol in which patients diagnosed with osteoporosis also had their vitamin D levels checked. We found a significant vitamin D deficiency burden in this patient population.

We have been able to use the bone scores together with the vitamin D test results to convince more patients to improve their vitamin D levels by taking relatively inexpensive supplements. Tracking these patients for about the last 15 years has shown that vitamin D supplements alone can often have a significant benefit on measures of osteoporosis. This finding may help improve outcomes for people who cannot afford expensive medications to treat osteoporosis.

## HOW TO GET STARTED

A simple business tool known as a SWOT Analysis can help you determine if a POL is right for your practice. SWOT stands for Strengths, Weaknesses, Opportunities, and Threats. Among the factors to consider are whether your practice orders enough tests to warrant the investment in a POL and has favorable contracts that will pay for tests performed by a POL.

### **BELOW ARE SOME THINGS YOU SHOULD KNOW ABOUT TESTING IN THE POL:**

- ✓ The new tabletop instruments for clinical testing are easier to use than earlier versions, require less technical skill to operate, and offer simplified quality control and troubleshooting.
- ✓ Tabletop equipment prices are generally cost effective for POLs. To minimize risk, use a cost-benefit analysis tool in advance to determine feasibility, a break-even point, and potential profitability based on your practice's actual test volume data.
- ✓ Support and training in setting up and operating a POL is available from COLA ([www.cola.org](http://www.cola.org)).

**The full webinar provides a step-by-step guide to lab set-up. This includes working with COLA to become a lab director. The guide also offers advice on purchasing equipment, writing a lab policy manual, preparing for inspections, marketing your POL to patients, and tracking metrics.**

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