Canvas

by Senior Director of Operations

Headless EHR Claims Management Electronic Health Record

Details

Review Date 09/22/2023

Purchase Date N/A Implementation Time N/A Product Still in Use Yes Purchase Amount N/A Intent to Renew 100% Review Source Vendor

Product Rating	
Product Overall	4.5
Use Case Fit	4.5
Ease of Use	4.5
API	5.0
Integrations	5.0
Support	5.0
Value	N/A

About the Reviewer

Implementation Team

Product Oversight

Reviewer Organization

Virtual-First Provider

Cardiology

Reviewer Tech Stack

N/A

Other Products Considered

Athenahealth

Summary

- · Product Usage: Canvas is being used as the company's electronic medical record for charts and billing, recent usage of its task management feature has been introduced, and scheduling feature is being considered.
- · Strengths: The interface is user-friendly, the task management feature is effective for managing workload and workflow, and the autosave feature is appreciated.
- · Weaknesses: The knowledge center is not as helpful as it could be, locating specific settings can be challenging for administrators, command-driven entries can slow down workflow for providers, and the limitation in dashboard field customizations obstructs quick information access.
- · Overall Judgment: Despite identified areas for improvement, majority feedback has been positive, particularly when considering a shift from their previous EMR system, Athena, and would recommend Canvas with noted considerations.

Review

So today we're chatting about Canvas and how it's used at your company. Before we jump into that, could you give a brief overview of the company and your role there?

We're a large specialty telehealth company. We do a myriad of things, from handling pre-operative authorizations for patients to managing patients longitudinally – diagnosing, prescribing, and following their health over an extended period. We also offer diagnostic services. I'm in operations, so I'm involved in a lot of different things. I manage the implementation team, which handles end-to-end client launches. My team includes medical assistants in the field and care coordinators. We're also preparing to onboard a third-party outsourced vendor, and I'll be managing that relationship as well. In addition, I'm involved in tech aspects – like implementing Canvas – to provide direction and support for the clinical team.

What is your reimbursement model?

Our reimbursement model varies by client. We offer fee-for-service, at-risk models, and value-based care – it just depends on the specific arrangement we have with each client.

Can you talk a little bit about the need that drove you to look for a new electronic medical record system like Canvas?

We're still considered a small company – some would still classify us as a startup because we're so small and we haven't been around that long, but we're evolved enough that others would disagree. So obviously we're cautious about our funding and finances, and Canvas offered a better financial fit for us. The previous EMR system we used was a bit clunky, and we had some issues with claims processing and billing, which led us to seek a better solution.

Which EMR were you transitioning from, and what were some of the specific challenges you faced?

We transitioned from Athena. I wasn't directly involved in the purchasing decision, but from a high-level perspective, the decision was based on both pricing and functionality.

Which aspects of implementation worked well and what could've been improved, focusing specifically on things Canvas had control over?

The frustration I've had is that when I ask questions, I'm always directed to their knowledge center, which I don't find very well-written. Nine times out of ten, it doesn't answer my questions. On the other hand, they're very responsive and engaged when it comes to implementation; we have weekly meetings and a question log I can use to submit questions, and they respond to those quickly. But as far as having a knowledge base that allows me to answer questions myself, their knowledge center is not very well-written or structured, so the implementation has taken a little longer than it should have – and again, I think the delay is partly our fault and partly theirs.

Can you talk about what you use Canvas for?

Right now, we're using it as our electronic medical record, predominantly for charts and billing.

Do you use any of its other functionality, like scheduling or task management, or is it just for charting and billing?



We've just started using the task management feature. Before, my team was trying to manage tasks in a Google sheet – which, as you can imagine, didn't work very well. I've just transitioned the team to the Canvas task management system. I really like it; I have a few staff who like it too, and then a few others who are still hesitant. We hadn't planned on using the scheduling feature because we intended to use our internal system, but that's not built out yet, so I'm now looking into using the scheduling feature as well.

Are there any other features that you're using or intend to use, beyond the ones we've discussed so far?

We'll probably build out some protocols for certain clients who'll really benefit from them. But we won't use Canvas for communication with patients because we do that using our own internal system.

Can you talk a little bit about your specific workflow? Who are the different users involved, and what actions are they taking in the system?

Our care coordinators create patient charts in the system. While we're transitioning, they're actually pulling in old information and entering that into the charts for the providers. The providers then add their notes when meeting with patients, and then this information flows into the claims system for billing purposes. We have physician's assistants using the system too, so it's used by both our clinical and our billing teams.

Do you use any other revenue cycle solutions as well? Or does Canvas handle all of your billing workflows, including your claims creation and claims submission?

We're doing it all through Canvas. Canvas is linked to Candid, so information flows from Canvas to Candid, where the actual invoicing takes place.

Regarding the features in Canvas, such as charting, billing, and task management, which aspects are working well and which areas do you think could be improved?

The interface is user-friendly – it's clean to look at and fairly easy to navigate. However, there are areas that could be improved. For administrators, it can be challenging to locate the specific settings they need to adjust. Providers have expressed difficulty with the command-driven nature of chart entries, especially during tasks like medication reconciliation. The system requires them to enter one command at a time, which really slows providers down during patient visits. The lack of customization on the patient dashboard also hampers the clinical team's ability to quickly access crucial information – there's information that the clinical team would like to see on that dashboard, but we can't change the fields. The system does offer label features, which are useful, but you're very limited in terms of how you can use and automate those labels. Those are the main areas we've identified for improvement.

You mentioned earlier that the user interface is a strength. Are there other features or qualities that you appreciate?

I do like the task management feature – I think it's a great way to manage workload and workflow. The left navigation panel is also a useful element. One of the challenges there is that if you document something within a chart and want it to appear on the left navigation pane, it only displays the answers and not the corresponding labels. So it just dumps data over there, which then becomes useless. So it's a great concept, but they didn't follow through. Another positive aspect is the autosave feature. Overall, though, I've had positive feedback from all of our users, other than these minor things that I've mentioned.



How would you characterize the overall sentiment about the product?

The issues I've mentioned aren't significant enough to deter someone from using the system; they're just things that I think users should be aware of before implementation. For example, the limitations around command-driven entries are something that might not be immediately apparent unless you consult with the clinical team. In our case, our product team didn't discuss this with the clinical team prior to purchasing the system, which led to some surprises when it came to implementation. Overall, none of these are glaring issues – they're just areas that, if addressed, would make for a better user experience.

You haven't touched on the billing aspect of the platform yet. Do you have any feedback on that?

We're still struggling with our billing – it's been a challenge for us to get that set up – but I don't want to necessarily attribute that to Canvas. We're a national telehealth company, so our structure is very complex, and that makes our billing requirements very complex. I'm not quite sure that Canvas was built to manage an organization with our level of complexity. We're still working with them to find a way to get the necessary information into the system to allow us to automate our billing processes. Right now, we rely on a lot of manual back-end review, which is not sustainable as we scale. For organizations with a simpler structure – perhaps a brick-and-mortar operation or an organization with a few clinics in a single state – I think Canvas is fantastic. We've had challenges just because of our complexity.

Is your team building any integrations or custom functionalities on top of Canvas?

We are; we have an internal system in development that will eventually serve as our all-inclusive solution for electronic medical records (EMR), billing, and other functionalities. Because we have this internal system where we track patients, we have an API integration that's limited right now but that will expand in time. It has the capacity to feed patient data into Canvas and to create charts, which works for us.

My follow-up question is about the developer experience: How smoothly has the integration process gone for your team? Specifically, how would you rate the quality of their API documentation?

Our team was able to build the integration pretty quickly, so it must have been a fairly good partnership to allow them to do that. The Canvas team has met with our product team when they've had questions about the API and to discuss potential solutions to our billing challenges. We've actually just had a conversation with them today about our specific needs, so overall, they've been very collaborative when you're trying to problem-solve.

Are you using any out-of-the-box integrations with Canvas, such as prebuilt integrations with third-party tools?

Yes, we've integrated with Quest and LabCorp for prescriptions and imaging orders. Canvas helped us partner with them to get all of that connected, and then we've also connected with Candid. So they set up all of those integrations for us.

Did those integrations generally go smoothly, or were there any challenges?

I'd give them a 90% rating on the integration process; I think it went pretty well. Sometimes it feels like Canvas is still in a development phase, evolving in response to the needs and questions we bring to them, so it's always interesting to see how they respond when we start asking questions.

Can you talk a little bit about your experience with their account management and support?



It's been really good – they're very collaborative; they're great partners. We keep asking for help, and they're very responsive. The only frustration I have is when I'm directed to a knowledge center article that doesn't effectively address our specific issues.

I know it's still relatively early in your experience, but how confident are you so far that choosing Canvas was the right decision for your organization?

We're definitely much happier with Canvas than we were with athenahealth. Once we get these billing issues resolved, I think we'll be in an excellent position.

Are there specific areas where you think Canvas could improve or grow?

I think the main areas for improvement are the documentation – and then maybe the onboarding process, although we had the added complexity of my joining in the middle of the transition, which made our experience a little more disjointed perhaps than is the norm.

Do you have any general advice, based on your own experience, for those going through the EHR selection process right now?

Talk to your clinical teams and talk to your operations teams. The clinical team needs to provide feedback on what they need, and the operations team needs to provide feedback on how your teams are going to use it and what the workflows look like. If you can have those conversations upfront, then you're going to have a much higher adoption rate. We all know that change management can be challenging, so I would advise making sure that all of your stakeholders are involved in the conversation.

