Canvas
by Product Manager

Claims Management   Electronic Health Record   Headless EHR

Details

Review Date	09/14/2023
Purchase Date	Q1'22
Implementation Time	6 weeks
Product Still in Use	Yes
Purchase Amount	N/A
Intent to Renew	65%
Review Source	Elion

Product Rating

Product Overall		3.5
Use Case Fit		3.0
Ease of Use		3.0
API		3.0
Integrations		2.0
Support		4.0
Value		4.0

About the Reviewer

Purchasing Team   Product Oversight

Reviewer Organization

Virtual-First Provider   Neurology

Reviewer Tech Stack

Candid Health   ClaimMD   SFax

Other Products Considered

Athenahealth   Elation   Healthie

Summary

- **Product Usage:** Canvas is primarily used by the customer's care coordination team, social workers, and nurses, as well as insurance navigation staff and genetic counselors for structured and unstructured documentation.

- **Strengths:** Canvas's strengths lie in its customization and flexibility, Canvas's attentive responses to customer feedback, and impressive ongoing efforts to improve features and customer experience.

- **Weaknesses:** Despite its strengths, Canvas has some limitations, such as its handling of reporting features, integration with Claim.MD, a not fully-featured scheduling and messaging platform, and a manual provider directory feature.

- **Overall Judgment:** Overall, Canvas has been a good choice for the company, providing valuable features and demonstrating strong product growth over time.

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?

Yeah, absolutely. I work at a telemedicine company that focuses on providing care for patients with neurodegenerative diseases. We have a presence in all 50 states, which allows us to reach patients in rural areas who usually don't have access to quality healthcare.

In my role at the company, I'm responsible for setting our product vision and working with our engineering and design teams to deliver the tools and infrastructure needed to execute on it. Additionally, we work on creating workflows that align with those needs, ensuring we deliver a positive patient and clinician experience across the board.

How long have you been using Canvas?

About a year and a half.

What caused you to look into purchasing Canvas in the first place?

I had known about Canvas since around the time they launched, however, their pricing at that time was too high for my former company, so we didn't proceed. When I joined my current company, we revisited Canvas and found that they had updated their pricing to be more friendly for startups, with a lower minimum patient volume in the EHR. So it was an easy decision for us. We felt that Canvas shared our vision for building a personalized, flexible care model, and we wanted maximum flexibility for our workflows. It was important to us that we could customize, build on, and integrate with other systems and their API enabled that. We were also Canvas's ideal customer profile, unlike some of the other EHRs that were built for in-person models.

What set of requirements did you have in place when you were thinking through EHRs?

As a product person, my first priority was determining the basic requirements of our patient engagement and clinical care model. This included understanding things like how we would triage messages to specific care team members and support multi-provider, multi-state scheduling requirements. I worked closely with the operations, RCM, care coordination and physician team to comb through each requirement - from intakes, to documentation, to tasking, to billing and beyond. We knew that we couldn't anticipate all of our future needs, which is why a robust API was critical for us. The engineering team played a key role in evaluating the tool and the API.

What other vendors did you look at?

We evaluated vendors that digital health companies can use and customize, such as Elation, Athena, and Healthie. Ultimately, the decision came down to whether we felt it was the right fit for our company at that stage. At the time, we were a two-person company with a small patient panel, so moving to Athena felt like we would be getting functionality we didn't need at the time and be adding unnecessary overhead, maintenance, and complexity.

Furthermore, we had heard that with more established, larger vendors our requests might end up sitting in a backlog indefinitely and not being addressed. We knew that Canvas was smaller and more nimble, and we put a lot of faith in them being willing to work with us. They listened to our requests, and if other customers made the same request, they took it into consideration during roadmap sessions. So, in that aspect, they delivered as we expected.

In the end, when making such a decision, it's important to recognize that no solution will be perfect. Customization and dealing with integrating 3rd party tools that we wish were table stakes in an EHR like a virtual-care scheduling tool seems to be unavoidable in the current EHR market, in a startup-reasonable price range. Every EHR will have something that doesn't perfectly fit your workflow, so, at some point, rather than overthinking it, you just have to pick the lesser of the evils and make it work.

What pushed Canvas ahead of Healthie and Athena for you at that point in time?

I think knowing that the Canvas team was focused on digital health companies that offer remote care. It was important for us to have an EHR with an API with extensive functionality, and they provided that. They also had the least core missing pieces compared to the others. And lastly, they just felt like the right size for us at the time.

How did the different pricing models stack up?

Canvas was fairly on par with if not cheaper than the other vendors we evaluated

How did you feel about the sales process?

Yeah, their sales process was amazing. It felt really personal. But they were prompt in answering all our questions. They even connected us with a highly knowledgeable product person who could address all our technical queries. They went through different product workflows with us and discussed workarounds for areas where their solution didn't align with our needs. And I think that also made the decision really easy. Unlike some bureaucratic organizations where you don't even know who you're speaking to and they have no idea about you either, this was much more straightforward.

Did that excellence extend to the onboarding and the setup process as well?

I think their onboarding team is a bit understaffed and they are still working on how best to take care of customers longitudinally, but it's something they are working on. They have also been flexible with us and let us access really anyone on their team including product and engineering folks when we didn't have a dedicated support resource. I would say it took us longer than it should have to get up to speed during onboarding. In the early days, there were a lot of important configuration details for the instance that weren't covered in their training materials. We only discovered them by accidentally stumbling upon something and realizing it wasn't working because it wasn't enabled in our instance. So the whole process was a bit rough, and we're still dealing with the aftermath. We keep finding out new things even now. Although their documentation is improving, it's still a work in progress.

What are your specific use cases in using Canvas?

Our care coordination team, social workers, and nurses, as well as our insurance navigation folks and genetic counselors, all use Canvas for structured and unstructured documentation. They also use it to assign tasks to each other and keep track of their patient panels. We use it to code and receive faxes (but not send faxes). Regarding RCM, Canvas uses Claim.MD as their clearinghouse. We send out claims through that integration, but it's not great. There's

a lot of manual work involved in clearing out the claims queue, and there's a lot of unnecessary noise. Managing it within Canvas is not easy, and we often have to go into Claim.MD to make adjustments and get claims sent off. It's a highly manual workflow. Therefore, we're in the process of transitioning to Candid Health.

Another weak point, related to RCM, is eligibility checks. We don't use Canvas's eligibility check feature. Instead, we enter the patient information into their chart and then have to access payer portals directly to get a co-pay estimate. This is mainly because we're a specialty provider, so the information we receive back is often not straightforward for our care team to interpret or comprehensive. We don't feel comfortable giving that data to patients without verifying it. So we're also considering moving this function to Candid/Change Healthcare

Can you tell me about the features you're using with Canvas?

One thing Canvas deserves credit for is their ability to allow for highly customizable data capture, which is one of the reasons we chose them. Other EHRs have caught up in this aspect, but initially they didn't offer the same level of flexibility for non-technical users to create questionnaires with multiple choice or dropdown options, automate scoring, and seamlessly upload them to the EHR. Being able to make changes like that without involving Engineering has been incredibly beneficial for us as a small company that needs to move quickly. However, it does come with more overhead, especially in terms of permission control for clinical staff. Despite the potential messiness, we prefer this level of flexibility. It has helped us collect data thoughtfully, which is important for our future plans. If this feature were weak in another EHR, we couldn't switch to them.

As I mentioned earlier, the integrated faxing feature in Canvas is not very good, which is unfortunate because we rely on it a lot as healthcare providers. It may seem like a fully featured integration during the sales process, but in reality, it requires a lot of manual work.

The documentation process for physicians has had a learning curve. They are used to Epic and Cerner, where clicking dropdown menus is the norm. Canvas takes a different approach, encouraging users to simply start typing. This has been a challenge, especially for doctors who have been practicing for a long time. It's something to be cautious of, but with a younger workforce, it's probably fine.

Billing-related tasks are quite manual, which can even trip up physicians when they try to verify they're putting in the correct codes. It's a messy process. Additionally, reporting features in Canvas are lacking. There is no population health tool that allows for easy analysis of patient data. Due to this limitation, we export our data to a data warehouse and build analytics and reporting tools ourselves.

Scheduling in Canvas has its limitations, especially for practices with a complex national fleet of doctors that require multi-provider scheduling. For example, an MA may need to see both their own calendar and the schedules of the physicians when scheduling patient appointments through the app. This can be a complex matter for some users.

What is Canvas's greatest strength?

Their biggest strength lies in their consistent efforts to develop features based on customer requests. It seems that their main challenge is resource related, determining how quickly they can implement these requests. I think they have a clear understanding of what customers want. For instance, they recognize the importance of after-visit summaries and notes, even though it is a technically complex task to customize them for all customers. They're trying to put this in the hands of their customers by allowing them to design their own after-visit summaries. Thoughtful things like that may not be found in larger EHR systems, which tend to prioritize compliance initiatives over direct customer interactions. Overall, we find their roadmap exciting, pending its successful execution.

Would you characterize the platform as being relatively reliable and stable?

We had some issues in the past, but I haven't heard anything about it in the past few months.

How would you characterize the documentation and developer experience?

There are some key things missing that we've reached out to them about. And other things that don't work as intended. They continue to develop the API and make it better, so it is going in the right direction.

Do you have any tactical advice for other organizations that might want to build with Canvas APIs?

I would say try to work with them, reach out to them and express your goals. Ask for their suggestions on how to achieve them. In my experience, they are usually receptive and willing to have a product expert hop on a call. The problem lies in the fact that there is so much to their product and not everyone fully understands it. But it's there, just waiting to be uncovered. If you can connect with a real person, you can usually work through it together, and they're usually pretty reasonable. So my advice would be to focus on building a relationship with them and discussing solutions to satisfy your desired workflows.

Have you integrated Canvas with any other products?

Yes, we plan to integrate with Candid Health. We've been using the Claim.MD integration, but it doesn't seem as strong as Candid. Although Claim.MD is included with Canvas, we didn't actively choose them, and we're opting to go with Candid instead, since it meets all of our requirements and will significantly reduce our reliance on Canvas for RCM.

How were their integrations otherwise?

We checked out the Zus Health integration, but it didn't meet our requirements. Their Health Gorilla integration for labs seems like it could be more built out.

How is their support and account management?

They are quite responsive and willing to cooperate. We don't have a dedicated account manager at the moment. Our original point of contact left the company, then there were RIFs, and our main point of contact changed again. So currently we don't have a specific person assigned to us. However, if we were to contact their CTO or someone else, I'm confident they would assign a product person to work with us.

As for their basic support, we communicate with them through chat, and they respond on the same day. They are very responsive. I don't personally interact with their support team as much. It's mostly the clinicians who report issues. But based on my previous experiences, they were pretty good.

Looking back, do you feel like you made the correct decision to go with Canvas?

Yeah, I think we did. At the time, Canvas was a good fit for our needs. There will be a question in the future if they can scale with us, though.

Do you see any areas for growth for Canvas?

Ideally, it would be great if they had a more fully-featured scheduling and messaging platform and API. They should also work on improving their care management and care navigation features such as provider referrals so that users don't have to integrate other products. I believe they are aware of these areas for improvement and are actively working on them.

Their reporting capabilities could be improved, which is a challenging aspect. Many EHRs tend to focus on making data available, leaving the analysis to be done using separate BI tools. However, I think they could provide more customization options for patient lists and allow clinicians to access some of the data themselves.

Regarding RCM, their integration with ClaimMD really lacks automation and it seems most people end up integrating their own RCM system with Canvas.

The faxing is also a pain point. It would be helpful to have a provider directory where we don't have to manually enter contact information every time. They started building this feature, but it didn't work properly. It would save a lot of time for everyone.

Do you have any advice for buyers who are selecting their EHR right now?

Be prepared for the fact that this may not be a permanent solution. At some point, you may need to switch to a different EHR and/or build on top of it to make it something that really works for you. You'll have to integrate with many third-party systems, so go into this with your eyes open. Don't expect one EHR to solve everything, as I have never heard any digital health product person claim that it could.