

Canvas

by Product Manager

Claims Management





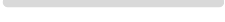


Electronic Health Record

Headless EHR

Details

Review Date	10/02/2023
Purchase Date	Q3'22
Implementation Time	10-12 weeks
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		4.0
Ease of Use		4.5
API		5.0
Integrations		N/A
Support		5.0
Value		4.0

About the Reviewer

Implementation Team

Product Oversight

Reviewer Organization

Specialty Practice

Nephrology

Reviewer Tech Stack

ClaimMD

Other Products Considered

eClinicalWorks

Summary

- **Product Usage:** Canvas's EHR is used for scheduling patient appointments, logging activities such as phone calls, visits, changes to a patient's profile, condition and history, and it is also used for telehealth appointments and claims generation and management.
- **Strengths:** Canvas's strengths lie in its flexibility and customization capabilities, its functionality that allows users to create automations based on actions or notes in a patient's chart and its robust API documentation and integration features.
- **Weaknesses:** Areas where Canvas falls short include the management and generation of claims, tracking patient risk adjustment and quality measures, and also navigating their backend data for reporting purposes; additionally, the system sometimes experiences bugs and freezes.
- **Overall Judgment:** Despite some limitations and issues, Canvas is a generally stable Electronic Health Record system that provides a higher degree of customization and flexibility than other comparable systems, and it is well suited to those with technical know-how who are comfortable with configuring a system to suit their needs.

Review

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

We partner with specialists to provide case management and wraparound care to physicians working with patients who have chronic disease. That allows these physicians to enter into risk-bearing contracts and fully capitated contracts to manage those patients. I'm part of the product team, currently concentrating on Canvas.

What drove you to look for a solution like Canvas?

We were implementing eClinicalWorks as our EHR system, but we encountered some major challenges: eClinicalWorks' implementation model wasn't well-suited to our unique organizational structure. We needed more hands-on support, especially since our organization doesn't fit traditional healthcare models like fee-for-service providers or health plans. We're more of an add-on service to primary care providers and specialists. As a result, finding workflows and configurations within eClinicalWorks that met our needs was difficult.

We also found eClinicalWorks to be less customizable than we needed. Our organization doesn't align with the fee-for-service models that many EHRs, including eClinicalWorks, are designed for, so we were looking for a platform that allowed for greater customization and flexibility.

What key requirements did you have?

We needed a solution that offered more flexibility and closer collaboration during the implementation process. One thing that stood out about Canvas was that it was much more open to customers leveraging their own technology resources to build on top of the platform.

Another key consideration was the system's ability to track patient risk adjustment and quality measures. While this isn't Canvas's strong suit, its flexibility made it possible to overcome that hurdle. Accurate risk adjustment and quality measures are crucial for correct coding and ensuring optimal patient care, especially in areas where specialists may need additional support.

Another requirement was the EHR's support for documentation and its adaptability to our unique provider structure. We were interested in how different types of users, particularly care teams rather than traditional primary care providers, could engage with the platform. We needed a system that allowed for easy logging, tracking, and access to patient information by a diverse care team.

Revenue cycle management was also a consideration. We looked at how claims are processed, tracked, and executed within the system.

How did Canvas compare to other vendors in terms of features and pricing?

The decision-making process was quite rapid, so we primarily focused on comparing Canvas with eClinicalWorks. Canvas does fall short on some scores compared to eClinicalWorks. For instance, eClinicalWorks offers out-of-the-box features for managing risk assessment and quality that Canvas lacks initially.

Canvas's revenue cycle management and claims review capabilities are also not as robust as we had hoped.

As for pricing, I can't provide a direct comparison with eClinicalWorks, but the cost of switching to Canvas wasn't a significant issue for us.

What was your experience with implementation and setup?

Canvas has an Implementation Manager who is specifically responsible for overseeing the implementation process. We also opted for a Collaboration Manager, for whom we pay extra. That person essentially acts as an enhanced Account Manager – their role is to understand the nuances of the project and serve as a liaison between our team and Canvas's support and customer success teams, while the Implementation Manager focuses primarily on gathering the necessary information and guiding us in configuring Canvas to meet our needs. Canvas was very thorough in explaining the prerequisites and inputs that were necessary to set up the system.

From my experience, it seems common for EHRs to require a significant amount of manual setup, so it took a lot of time to implement our workflows. I was surprised at the degree of manual setup required for multiple environments. For example, in Canvas, if you want a development, staging, testing, and production environment, each has to be configured manually; there's no option to push configurations across environments or share versioning.

Despite the setup process, Canvas was good at taking the time to understand our specific needs and going beyond the basic setup to align their product offering with our requirements. Some of their functionalities may be limited, but that's understandable given that they're a relatively new EHR provider.

What set them apart, and why we enjoyed the implementation experience with them, was their hands-on approach to understanding workflows. The communication was streamlined, and they were helpful and supportive throughout the implementation process.

What are your primary use cases for Canvas within your practice, and how do you leverage its functionalities for patient care, engagement and reporting purposes?

We have a team consisting of a social worker, an advanced practice provider (usually a nurse practitioner or a physician assistant), and a care navigator, who work together to care for patients. They use Canvas to schedule patient appointments, log activities like phone calls and visits, and record changes to the patient's profile, medical condition, and history. We also log any social determinants of health in Canvas.

For patient outreach, we use the native email and texting functionality within Canvas to send reminders to patients about upcoming visits, and we also use Canvas for telehealth appointments and claims generation and management.

We use the data logged in the system to track our performance and patient engagement. Canvas provides a read-only replica of their database, which we leverage to generate reports that help us understand how we engage with our patient population and report to entities that need that information.

Which of these features work well, and which don't work that well?

While there is a learning curve with Canvas, especially for those accustomed to major EHRs like Epic or Cerner, documentation generally isn't an issue. There are some minor glitches, like needing to refresh pages or re-add information, but for our core needs, it works well.

Scheduling is all right; it works as expected. It used to be cumbersome because it required a Google integration, and we don't use Google Workspace. While that's improved, we still face challenges in coordinating various calendars. For example, we're trying to figure out how to schedule patient visits in one system while managing organizational

meetings in another. This doesn't seem to be unique to Canvas; it's unfortunate that you have so many different things to keep track of but you can't seem to get them all into one calendar.

One feature in Canvas that we're interested in using more fully is the "protocols" functionality. This allows us to create automations based on actions or notes in a patient's chart. For example, it can prompt providers to ask a patient a specific set of questions when they first join. This is easier to implement in Canvas compared to other systems, which sometimes don't allow for it at all. We plan to expand its use for better workflow support for providers when engaging with patients.

The claims review process in Canvas could be improved; the current system for generating claims, reviewing notes, and ensuring accuracy is not very user-friendly. It requires navigating multiple screens, and the communication features are limited. There's often back-and-forth about updating documentation before sending out a claim, which is not ideal. Managing claims within the system is also cumbersome.

Another challenge relates to risk management and properly coding patient diagnoses so that patients are risk-adjusted appropriately and get the right support. Canvas currently lacks out-of-the-box support for risk adjustment and diagnosis tracking, so we've had to manually handle these aspects and create our own processes to prompt providers within the limitations of Canvas's features.

The search results in general, including for diagnosis search queries, aren't great – it often requires multiple queries to find what you're looking for. While we leverage Canvas's backend data for reporting, navigating that data can also be challenging. Although this isn't necessarily a fault of Canvas, additional support or documentation could help teams better leverage their data.

How would you evaluate the overall performance and reliability of the Canvas platform?

Canvas is generally stable, but it's not without issues. The system occasionally freezes, or functions become temporarily unavailable. It's not always clear what's causing these issues, so we often have to create support tickets. Overall, the platform is relatively stable, but it has some odd bugs you wouldn't expect to encounter.

What has your experience been like with Canvas's API integrations and documentation?

Our experience with Canvas's API has been generally positive. The ability to integrate is far superior to other options like ECW, which is a significant advantage for us. The developer experience is also much better compared to other platforms in the EHR space.

Their API documentation is mostly up-to-date and thorough; we've found the occasional gap or inconsistency, but they're quick to make corrections, and they appreciate the feedback.

Overall, the API integration has been a positive experience, especially compared to our previous situation, which offered no integration options. It meets most of our use cases, and considering we've only been seeing patients for a year, it has fulfilled most of our needs so far.

Do you use Canvas to manage billing?

Canvas handles the initial claim submission, and we manage parts of the revenue cycle within Canvas. The claims are sent to Claim.MD, and that's where we manage denials and rejections. Currently, there's a manual reconciliation process between the two systems to ensure they align. We might be able to use APIs to connect the two, but we haven't implemented that yet. So, it's a manual process for revenue cycle management between these two systems.

What are your thoughts on the account management and support you've received from Canvas?

That's probably their best feature; the account management and support teams are very supportive and responsive. For the most part, they effectively address and resolve the issues we encounter.

Do you believe that choosing to work with Canvas was the right decision?

Yeah, I think so.

What would you identify as key areas for growth for the product?

Canvas seems to be geared more toward fee-for-service models than value-based care organizations. Their work-flows meet many of the needs that fee-for-service organizations have, but they fall short in areas that are crucial for value-based care, such as tracking risk adjustment, tracking quality management, and communication between providers.

In my research, I've noticed that other Electronic Health Records (EHRs) are trying to improve in these areas, and Canvas doesn't seem to be making those improvements, so I think that should be a focus for them.

Do you have any advice for potential buyers?

Our team is very tech-savvy; we're comfortable with customization and figuring out how to leverage Canvas's API to meet our needs. Canvas would not be a good fit for teams who want more of a plug-and-play solution that doesn't need a lot of configuration or teams that lack the resources or expertise for such customization.

Canvas has a strong focus on being customizable, and while some updates are rolled out to all users, other features are only available through their Software Development Kit (SDK), and some teams might not have the resources to fully utilize those features. They do have programs where you can purchase developer time within Canvas to implement customizations; their platform is very focused on being a platform that you use as a base and build on top of.

It's not necessarily as customizable as we thought it would be; there are still some limitations. Potential buyers need to be very clear about their EHR needs and expectations. The more you understand what you require in terms of customizations, integrations, and data access, the better you can assess whether Canvas meets those needs.