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# **Buyer Review Transcript**

Product Reviewed	Elation
Integrations Reviewed	Candid, Commonwell, Carequality, Quest, Labcorp, SureScripts
Other Products Mentioned	Canvas, Healthie, Zus
Date	July 6, 2023
Expert Role	Product Manager
Specialty	Virtual Oncology and Primary Care
Payment Model	Value-Based Care

We're talking about Elation and how it's being used at your company. Before we jump into that, can you give a brief overview of your company and your role there?

Yes. I'm a product manager at an oncology care navigation company that is exploring the virtual healthcare space and has recently launched a provider group.

### When did you purchase Elation? And how long have you been using it in production?

We signed the contract in the spring of 2023. We were up and actually running very quickly in terms of basic functionality. Due to some constraints internally, we didn't actually see our first patient until May, but we were ready to go with bare-bones functionality by early April.

### How do you use Elation?

There are two main types of users. We have providers that work primarily in Elation, and we really try to keep them focused on one product. We also have an administrative team that straddle both our internal product and Elation. We really want our providers to be focused solely on patient care, and so they don't do any of the scheduling. Their workflows are primarily pre-charting, charting, prescribing, referrals, and sign-offs. Because we don't have as much bandwidth on the admin side, they are doing some administrative duties but they are mainly clinical. Our admin team is exporting documentation, they're helping with referrals, dealing with cancellations, and they're working across both our internal platform and Elation at the moment.

What features are your providers using and what what's their feedback?

We're using e-prescribing, which was a must-have for our workflows. We also have lab integrations, which took a little bit of time to get launched, but our providers needed the ability to send and receive labs. In our day-to-day workflow, we're using the "Outside Care" feature, which is a big bonus for our providers, because we do all of our charting beforehand, so it will automatically pull medication and patient history through Carequality and Commonwell. Although not all of the data will be there, it's still really nice to have, especially in an initial meeting with a member. During enrollment, our clinicians really only use one type of visit note, so they are consistently following the same sort of patterns. Also, they do a lot of messaging back and forth with our billing team,

# You mentioned you were using Candid for billing?

Yes. It's technically bi-directional, but only in that tasks flow back to Elation from Candid. And so what we do is we have our internal billing person review all bills, and then we have a delayed billing feature on and they will manually send them once they are approved. If something's wrong, we'll get a notification, and then we can adjust it. It's actually been pretty seamless thus far.

### Are you also doing all your task management workflows within Elation?

They are not great at task management. Tasks are kind of like messages. And that's all you get, which is a bit of a challenge. Luckily, our internal platform has a strong task management component, so we're able to do most of our tasking there.

#### What made Elation stand out from the pack during your search?

We were looking for strong API capabilities, because the one thing that we didn't want to do is create two big silos between our non-clinical care team and our clinical users. We really needed bi-directional APIs to be able to sync data back and forth between our internal product and Elation. We were looking at different vendors and they had the best solutions by far. The ability to have Commonwell and Carequality integrated without us having to do anything was also really nice, because we normally only get claims information on members, which doesn't give a detailed picture of the patient. The other big selling point for us was that they were ONC-certified, and we wanted to make sure that base was covered.

# Are there features that you don't use either because you don't need them, or perhaps because they don't really work the way that you need them to.

They have a lot of orders that we're probably never going to use because we are a virtual practice. There are also some we don't use right now just because we haven't had the time to implement. We do all patient forms through our other platform, which has actually been really nice to not have to do those through Elation. Otherwise, we're using most of the features that a virtual practice can use.

### What made you want to use forms on a separate platform?

We invested in building out our own really robust system, because we're collecting information on patients before they even see the provider. It's a lot easier for us to do that in the flow of our care, rather than having providers fill it out or sending it to patients via email. We're working with a lot of Medicare Advantage members right now, and a lot of them don't want to be filling out forms online - they would rather talk on the phone and have someone do it for them or something along those lines.

# Got it, and that's part of what drove the importance of the bi-directional APIs for you. Beyond that, have you been building on top of Elation's API?

Yeah. So when we started, just to get us off the ground, we did a very basic setup, pushing our internal platform's data into Elation. So, you know, everything around insurance and demographics, that kind of stuff. And that's sort of where we left it to start.

The next chapter was making sure all of our clinical documentation could actually go from Elation to our internal platform. So we would basically take all the outputs and then reformat them to either the after-visit summary or the full visit notes and referrals. With the API, it has actually been pretty painless. Every now and then, we find a bug that seems like someone else should have found it, and we're kind of confused why it's us. But they have pretty good documentation. And I would say their team is pretty supportive. And then in terms of data that we would also want in our warehouse, they have a hosted database. That was in beta when we first started, but it's a Snowflake database. We use that to get all of our analytics and do connections that way. And, you know, there are pros and cons with that sort of setup, but it seems to be working at the moment.

That makes sense. I'd be curious to chat about integrations that you have with Elation. So you mentioned labs, you mentioned e-prescription, some clinical data sharing. Maybe we could talk through, at a high level, how Elation seems to do with integrations and also dive into some of the individual integrations.

Truthfully, they have really taken the reins with most of it, which has been great for us because the last thing we wanted to do was build any of our own integrations on top of already having to integrate with Elation itself. So for example, the Candid integration was very painless. A big reason why we partnered with the two of them was because they already had that integration. Same thing with e-prescribing: we had to do very, very little (just making sure our providers' information was in there) and they got it going from there. Labs have taken longer, but that is not necessarily Elation's fault. We partnered with Quest and we wanted to get Labcorp as well. Overall, it's been a relief for us for not having to do anything with these integrations, and then with Outside Care, being able to get clinical information and not have to do that ourselves has been really helpful.

Did you have to write code for any of the integrations?

# Do you have any thoughts on the quality of the integrations?

Prescriptions have been seamless. I think the Carequality and Commonwell integration itself has been seamless, but the way it's displayed could be much more efficient for providers. That's a separate issue though, from the integration itself. The one I had to stay on top of was Candid. There were a few instances where we were getting errors and we didn't know why and getting in touch with support took a little bit of time. But in general, it was us flagging an error and not us fixing it, which has been very helpful.

# That makes sense. Regarding the procurement decision itself, how did you find the sales process overall?

We were looking at Canvas, Elation, and Healthie. We thought about Athena for a minute. We thought about Medplum for a minute, but Athena is very expensive and Medplum just wasn't where we wanted it to be. The best sales process, by far, was Canvas. They were really on top of it and really great to work with, whereas Elation was a bit more scattered. Part of this, I think, is that they're a little bigger, and we're a small practice, so we were very much small fish in their big pond. So they care a little less about us, which also meant negotiating contracts was a little bit harder. We got there eventually. Most of the decision-making was done because we did a lot of research and asked a lot of questions, rather than the sales process being amazing.

### How did Canvas, Healthie, and Elation stack up for you?

With Canvas, our providers really loved the UI at first and thought it was very unique on that front, but they didn't get a chance to use it too much, and I've heard that the UI may not be as great as it seems. However, the biggest issue was their lack of write APIs. Their sales process was so good. You didn't even know it until you started digging in a little bit. So that was a little bit difficult on the Canvas side. They seemed to have a very robust task management system, so we thought it would be easy to take tasks on our platform and integrate them with tasks in Canvas. After doing some digging, we realized that, although we could make it work, the technical lift would be very high. There were also questions around how we would actually do the video visits, and whether we would have to bring our own account or use what they provide. At the time, they did not have any HIE integration. They were working with Zus, but Zus was building directly in their APIs, and it was unclear as to what was happening on that front.

With Healthie, they had a lot of things that we were looking for, but they seemed to be more directed at therapy or wellness visits, and we're very much doing more primary care and urgent care. We had some questions around not being ONC-certified when we were looking at them and that being a problem. They also did not have the HIE integration. I think they have Zus now, but they did not at the time. The biggest red flag for me was for the referral workflow. You had to bring your own directory. Because we only have claims data, and not all of our members are

going to see the same provider, it was very complicated for us to bring our own referral directory. It was much easier for us to use an existing directory, and if we needed to add, to be able to do that. Those were the main issues with Healthie.

### Do you recall how those three compared on price?

Canvas' pricing was very interesting because it was based on active patients, which is how we think about our own enrollment structure. It's all about who you're actually interacting with. It felt very easy to understand and translate to what we were actually doing. And so, I think that ended up because we were going to start small, seeming much cheaper. Elation was, by far, the most expensive, especially because they add a charge if you want the APIs. If you want these other things, it costs extra. Healthie landed in the middle between the two.

#### Do you feel like you made the correct assessment at the time?

I think Elation has things that you wouldn't know could be better until you work with it. I've been hearing a lot more about Healthie lately, and I'm wondering if that could have been a good option for us as well, but in general, I do think that for scaling and what we're trying to do, Elation got us up and running really, really quickly under a tight timeline. And they have very good support for implementation. I would say being able to get all of our data out very easily has just been more helpful than I would have guessed. So, I think that we did make the right decision.

# Once you've made the purchase decision, how was the onboarding process?

We were assigned an onboarding person, who walked through every single detail of what we would need to set up. It was really, really easy. And once we got all of that set up, and we had timelines and were ready to start training, they built our providers a full training guide from front to back on everything they would ever need to do. This was really, really helpful. We're only a couple of months in, but we still have support and we still meet weekly. We have a Slack channel. I would actually say that despite the sales process not being that great, they have definitely been supportive in terms of getting us up and running, and making sure things are going well. The one thing that has been challenging is getting attention from the actual support team. They seem very backed up, so you're not going to get answers as quickly as you would like. But with the account managers, you do have an advocate pushing things through for you.

### What do you like most about the product with Elation?

I like that our API integration possibilities are kind of endless. Everything that goes in can come out, and we push a lot of data into Elation. I mentioned this earlier, but we're focused on gathering the full picture of a patient's health, and a lot of that comes down to correctly capturing risk. Elation has the ability to push our own risk apps into the system. And that's just an example of the API system that they built out. The HIE integration is, again, really huge. All of that stuff has played a big role. E-prescribing, getting all of the medication information, Outside Care. The

referral workflow has been a huge time-saver for our providers. I genuinely don't know what we would do if we couldn't get Surescripts info into the system, because it sets our providers up to have the most efficient, in-depth conversations with our members as possible.

### What do you dislike about the product?

Scheduling visits is a bit of a pain. We initially started off by having our team use their booking site, which seems great in theory, but we really want to win on user experience, and we don't want our patients to have to sign up for their passport account. As a result, when we're booking, members get created and duplicates can occur, because they're not linked in the system, or there's some misalignment in patient email addresses. And that's a little bit tricky. As we're expanding states, we're going to run into more issues because we're a virtual practice. A provider could be licensed in both Georgia and New Jersey, but they haven't really built their product in a way that makes it easy to set that up.

Another thing we think a lot about as a virtual practice is predicting volume and utilization rates, so we need an easy way to determine how many appointment slots are actually available. Elation doesn't have a very easy way for you to do that. With Canvas, it was very much a slot-by-slot configuration, whereas with Elation, it's more "Here's the five hours you're free", not X amount of 30-minute and Y amount of 15-minute slots. That makes it a lot harder to get the data out and predict capacity utilization.

There's not much reporting out-of-the-box, and that would be really great to have. If you go to Candid, they give you so much reporting, it's almost a little overwhelming. Elation's reports are very bare bones. It's like, "Here's a list". So those are the things that come to mind. Right now, scheduling is one of the things I care about a lot because I'm focused on finding a solution for it.

### What's the likelihood of you continuing to use the product in the 18 to 24 months?

High.

### Is anything Elation can do to definitely keep you as a customer?

If they fixed their scheduling and made that a much easier process, that would be really huge. They have issues with multiple locations, and they tell you it's great for virtual practices, but in reality, they're not building with that use case fully in mind. Getting those two things fixed would be a really, really big win for us. Also, they're doing a Zus integration, which would make the HIE a lot more useful for us. Finally, if they can improve their task management product, that would also be incredibly helpful. Those are the main things in my opinion.

# Do you have any advice for someone selecting this type of product right now?

I would recommend thinking holistically around not what you want in the short term, but what you really want in the long term. This was our first EHR, which is way easier than having to

move from one EHR to another one. But I also knew that moving from EHR to EHR was going to be a nightmare. And so we really wanted to think, what is our dream state and can we possibly figure out a way to do it with this? And that was really the main thing that I was thinking through. If you want to integrate with your own product, make sure you really check every API to make sure it has the ability to do what you need, because you don't want to be let down on that front.