



Transforming Health Care
through Electronic Health Records

EHRs in Clinical Practice



Illinois Health Information Technology Regional Extension Center

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Better patient care and better practice management

- Using Electronic Health Records in a meaningful way can help providers offer higher quality, safer care, and create tangible improvements to their practices, allowing them to:
 - **Make better clinical decisions** with more comprehensive information readily and securely available
 - **Provide more coordinated care** across multiple provider settings
 - **Increase efficiency** through enhanced practice management and communication
- Providers can face significant challenges in implementing an EHR system, including administrative, financial, operational, technical, and infrastructure
- An unprecedented window of opportunity exists to address these challenges right now to implement and meaningfully use certified* EHRs
- Help is available now: IL-HITREC is a trusted advisor, offering national insight, local support and scalable solutions throughout the entire EHR process
 - Trusted and non-biased advisor to help in EHR selection
 - Expertise in workflow design and practice change management
 - Project management support
 - Meaningful use technical assistance support

* Certification as defined by ONC-Authorized Testing and Certification Bodies (ONC-ATCBs). For more information on EHR certification, visit <http://onc-chpl.force.com/ehrcert>.



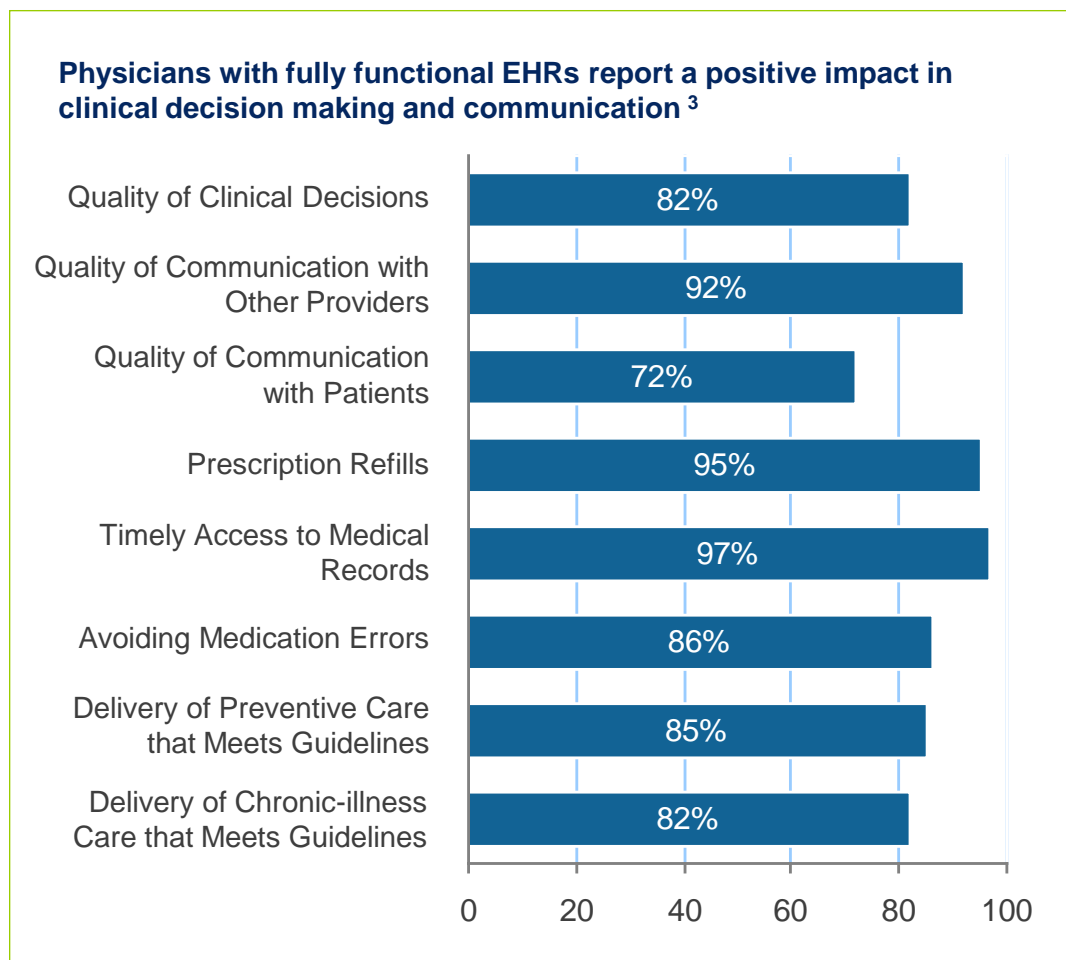
What are EHRs?

ELECTRONIC HEALTH RECORDS (EHRs) are longitudinal electronic records of patient health information generated by one or more encounters in any care delivery setting. Included in this information are patient demographics, progress notes, problems, medications, vital signs, past medical history, immunizations, laboratory data and radiology reports.

The EHR automates and streamlines the clinician's workflow because it generates a complete record of a clinical patient encounter. EHRs can also support the collection of data for uses other than clinical care, such as billing, quality management, outcome reporting, public health disease surveillance and reporting.¹

Better decisions and more coordinated care with EHRs

WITH MORE COMPLETE PATIENT INFORMATION, providers improve their ability to make well-informed treatment decisions quickly and safely. In fact, a literature review of 125 studies of outpatient settings with EHRs found significant improvements in processes of care delivery.²





More efficient practices

EHR-ENABLED MEDICAL PRACTICES report:

- Improved practice management through integrated scheduling systems that link appointments directly to progress notes, automate coding and provide claims management
- Time savings with easier centralized chart management, condition-specific queries and other shortcuts
- Enhanced communication with other clinicians, labs and health plans through:
 - Easy access to patient information from anywhere
 - Tracking electronic messages to staff, other clinicians, hospitals, labs, etc.
 - Automated formulary checks by health plans
 - Order and receipt of lab tests and diagnostic images
 - Links to public health systems such as registries and communicable disease databases
- Better risk management through:
 - Clinical alerts and reminders
 - Improved aggregation, analysis, and communication of patient information
 - Support for diagnostic and therapeutic decisions
 - Built-in safeguards against potential adverse events⁴

Efficiencies gained by using EHRs

- Improve practice management
- Save time
- Enhance communication
- Enable better risk management

An investment that can save time and money

WHILE EHRs DO REQUIRE AN INITIAL INVESTMENT of time and finances for the technology and training, a fully functional, certified EHR system* can lead to long-term savings in a variety of areas. Early adopters of EHRs report costs savings associated with:



Time savings, less chart chasing & fewer calls



Better coding accuracy & reduced reporting burden



Quick access to patient records



Easily tracked health maintenance reminders



Legible, complete records, facilitating accurate billing



Performance-improving tools, real-time reporting⁵

* Certification as defined by ONC-Authorized Testing and Certification Bodies (ONC-ATCBs). For more information on EHR certification, visit <http://onc-chpl.force.com/ehrcert>.



Medical Practice Case Study Valdez Family Clinic

Solo family practice reports a 26% increase in revenue per patient and a net ROI of 325% after one year⁶

EHR Objectives:

- Improve office efficiency
- Realize clinical benefits of complete, current patient data
- Move third-party billing in-house without adding to staff
- Reduce work week to 4 days, while seeing same number of patients

Implementation Process:

- Training was remotely hosted via web 3 weeks before trainers arrived on-site
- On the “go-live” date, the clinic scheduled 1 patient/hour/provider; increased the patient load as the week progressed
- By week’s end, clinic approached its normal patient capacity
- When problems were identified, forms and protocols were tweaked by the trainer and tested on the next patient

Results:

- All objectives were achieved/exceeded within 4 weeks after “go-live”
- Return to pre-implementation patient flow just 2 weeks after on-site training
- Billing moved in-house, netting a savings of \$31,000 per year
- Coding improvements led to annual increase of \$210,528 in reimbursements; return on investment after one year was \$187,118

Practice Profile:

- Family practice in underserved Texas community
- 1 MD, 2 medical assistants, 3 front office, 1 collections
- 9,000 annual patient encounters

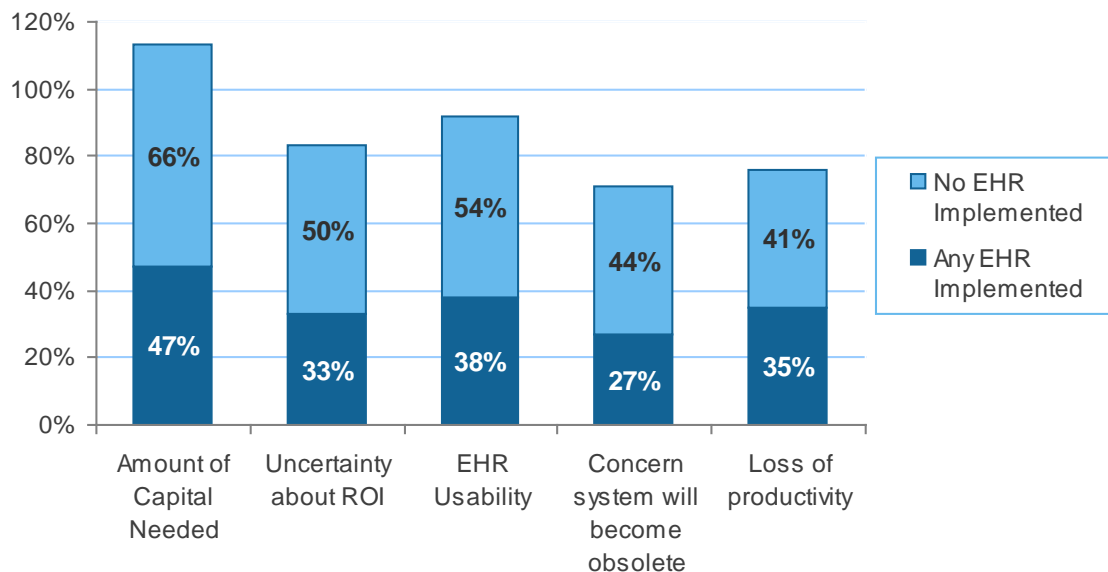
Source: http://www.himss.org/content/files/davies/2007/amb/ValdezFamilyClinicDaviesApp041807_3.pdf

EHR implementation can present significant challenges

FOR PRIMARY CARE PROVIDERS, EHR implementation can seem like a daunting task, taxing an already overburdened practice. Below is a review of many of the top concerns providers have expressed about EHRs. While they are significant considerations, these challenges are not insurmountable.

Financial	<ul style="list-style-type: none"> ● Uncertainty around return on investment (ROI) ● Provider and staff productivity ● Uncertainty about financial incentives
Technical	<ul style="list-style-type: none"> ● Concerns about technically supporting a system ● Lack of necessary computer skills ● Finding the right EHR to suit practice needs (“usability”) ● Having the right IT staff in place ● Possibility of information overload
Organization Change	<ul style="list-style-type: none"> ● Disruption of workflow and productivity ● Privacy and security concerns ● Maintaining patient centeredness and satisfaction

Leading barriers for EHR adoption cited by providers, whether they have no EHR or an existing EHR (partial or fully functioning)³





Medical Practice Case Study Family Medical Specialists of Texas

Despite not having an office manager, a small family practice still improves clinical quality, exceeds ROI expectations in 18 months⁷

EHR Objectives:

- Improve business efficiency, customer service, clinical quality, staff and physician satisfaction
- Achieve financial return on investment

Implementation Process:

- Without office manager, EHR-experienced physician champion led the process, working after hours and on weekends to meet six-week implementation deadline
- Steepest part of learning curve planned for slowest time of year
- Priority placed on securing staff buy-in, incorporating their views in all decisions
- New workflow processes determined collectively, tested before implementation
- Preloading patient information at point of care helped physicians master system

Results:

- Changes in prescription workflow alone saved 50 calls/day/doctor
- Improved Current Procedural Terminology (CPT) coding resulted in \$25,000/doctor additional income annually
- Improved blood pressure control from below national average to above
- > 90% of patient satisfaction surveys rated practice “excellent”
- 18 month payback period; physicians make about \$60,000 to \$80,000 more per year, credited specifically to EHRs

Practice Profile:

- Family practice in suburban Texas
- 3 MDs, 3 RNs, 3 front office, 1 collection
- 10,000 annual patient encounters

Source: http://www.himss.org/content/files/davies/2007/amb/FamMedSpecialistsTX_17.pdf



Why EHRs now?

NOW IS THE TIME to take advantage of a unique opportunity to implement and meaningfully use EHRs. The federal government is committing unprecedented resources to supporting the adoption and use of EHRs. Delaying implementation now may cause complications later. Why is the installment of an EHR system now a solid investment for the future?

- **It's where the profession is going:** 90% of medical students consider it important or very important to have an EHR where they choose to practice.⁸
- **It's what patients want:** Four out of five adults believe that online personal health records would be beneficial in managing their health and health care.⁹
- **It makes coordinated care a reality:** EHRs are an essential component of health care innovation efforts such as the Patient Centered Medical Home and Accountable Care Organizations.
- **Incentives now available:** For providers that are eligible (see pg 13), there is a limited window of opportunity to take advantage of Medicare and Medicaid EHR Incentive Programs designed to support the implementation of certified EHRs. A fully functional certified EHR will be essential to participation in both public and private pay-for-performance programs expected in the future. Additionally, eligible Medicare providers without a fully functional, certified EHR will face payment reductions to their Medicare reimbursement in 2015.
- **Help is available now:** A national network of regional extension centers (RECs) have been selected by the U.S. Department of Health and Human Services (HHS) and the Office of the National Coordinator (ONC) for Health Information Technology to help providers understand and realize the benefits of health IT adoption and achieve meaningful use.

IL-HITREC's scalable support will help providers get there efficiently and effectively.

How IL-HITREC helps



Illinois Health Information Technology Regional Extension Center

About IL-HITREC

IL-HITREC is a collaboration of several healthcare and educational organizations that are focused on providing education, outreach and technical assistance to priority primary care providers within the state of Illinois, outside the City of Chicago. IL-HITREC is funded through the Health Information Technology for Economic and Clinical Health (HITECH) Act (Title IV in Division B of the American Recovery and Reinvestment Act).

IL-HITREC is headquartered at Northern Illinois University in DeKalb, Illinois. In order to provide local services throughout the State of Illinois, delivery of these services is provided through satellite offices located in northeast, northwest, central, and southern Illinois.

IL-HITREC'S mission is to leverage expertise and resources to implement the outreach, education, and technical assistance program necessary to assist Illinois primary care physicians to advance toward the goal of improving the quality and value of the care they provide by attaining or exceeding meaningful use of electronic health records.

If providers haven't started EHR implementation, we support:

- Practice readiness assessment
- EHR vendor selection, identification, evaluation and negotiation
- Needs prioritization and practice workflow redesign
- Assistance with provider-patient communications
- Best practices for privacy-security of personal health information
- Ongoing technical assistance

If EHR implementation is already underway, we support:

- Achievement of meaningful use
- Maximized incentive payments with minimized hassle
- Health Information Exchange (HIE) partnerships and preparations
- Preparation for pay-for-performance
- Continued practice transformation

Our areas of expertise

IL-HITREC SERVES AS A SUPPORT CENTER to make EHR implementation easier for providers throughout the entire process, or at any point along the way. We are not a vendor. Our support extends from EHR readiness assessment to EHR system selection to practice workflow redesign and ultimately to achieving meaningful use.

Planning

During the initial planning phase, IL-HITREC will work side by side with you and your team to conduct an **EHR readiness assessment** and develop the **EHR project management plan**. We assist with:

- EHR review of your practice
- EHR vendor selection, identification, evaluation and negotiation

Implementation

Our goal is for you to achieve effective implementation of your certified EHR product. We assist with:

- System implementation support
- Hosting
- Troubleshooting
- Requirements refinement
- HIE partnerships and preparations

Transition

We will lead you in transitioning from a paper-based health record environment to an interconnected, patient-centric care system. We assist with:

- Practice workflow redesign
- Needs prioritization
- Functional requirements
- Provider-patient communications
- Best practices for privacy-security of personal health information

Operations & Maintenance

We will continue to support your practice and keep you informed about national developments that may impact you as you work toward achieving meaningful use of your certified EHR system. We assist with:

- Successfully demonstrating meaningful use
- Maximizing Medicare and Medicaid EHR incentive payments while minimizing hassle
- Preparing for pay-for-performance
- Continuing to support practice transformation and EHR usability through all stages of meaningful use



“I wouldn't go back to paper. My desk is messy enough. Documentation has improved immensely as has our access to information.”

— Dr. Warren Hayes, Montgomery County Memorial Hospital (Critical Access Hospital), Red Oak, Iowa¹⁰

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Summary

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Or visit our website at: www.ilhitrec.org