

Right EMR Solution Can Improve Hospitals' Care, Enhance Decision Support

Choosing and implementing an electronic medical record (EMR) solution that meets hospital, physician and patient needs is not an easy task, especially at a time when hospital resources are strained and budgets are stretched thin. However, eliminating costly manual and paper processes while making sure data is easy to access, transfer and research "will add beneficial science to the art of medicine," according to Glenn Galloway, senior vice president of Ingenix Consulting and leader of its provider practice. And, according to Galloway, cost-effective EMR implementation is a reality in 2009.

"EMRs are important to health care in general," Galloway said. He asserted that integration of a patient's health care dossier ultimately is an exercise in efficiency. "My healthy, nine-year-old daughter has 14 separate medical records – more than one record for each year of her life – which is redundant, unwieldy and costly," he noted.

Interestingly, although the United States has the highest health care costs globally, its levels of health care quality and safety only rank in the middle of the pack. A study on technology's effects on health care published in the *Archives of Internal Medicine* found that this disparity "has led to intense interest in approaches to improve quality and safety and reduce costs, and increased use of health information technology (HIT) has emerged as one of the key tools for addressing these issues¹."

Slow adoption hinders progress

Indeed, according to the Healthcare Information and Management Systems Society (HIMSS), a recent study by Johns Hopkins School of Medicine found a 15-percent reduction in mortality rates associated with hospitalization at centers that use computers instead of paper.² "Doctors and nurses already recognize that EMRs have administrative, patient care and safety benefits," Galloway said.

However, although many hospitals are attempting to

move EMR plans forward, they are having difficulty achieving their goals. "Hospitals frequently struggle with the operational disruptions and level of complexities associated with EMRs, in addition to the costs associated with purchasing, implementing and getting people trained on the right system," Galloway explained.

In the current economic environment, some hospitals may be tempted to put EMR plans on hold. "Hospitals are strapped for capital and resources, so they may choose to remain in a holding pattern," Galloway noted. "But doing nothing to forward EMR initiatives will leave many hospitals unable to ramp up when necessary and unable to compete with other facilities."

Momentum for electronic records growing

However, momentum is growing for more comprehensive application of EMR technologies and systems. HIMSS predicts that by Dec. 31, 2014, "with the proper incentives and funding ... it is reasonable to expect that all non-federal U.S. hospitals can reach Stage 4" of an EMR adoption model HIMSS devised.³

This level of engagement calls for computerized practitioner order entry (CPOE) for use by clinicians and advanced evidence-based medicine protocols. The net benefit of Stage 4 implementation is improved patient safety, billing functions, outcomes and formulary compliance, the HIMSS report states.

On Feb. 17, President Barack Obama signed the 2009 American Recovery and Reinvestment Act into law. Within this stimulus package, \$19 billion was allocated for health care information technology under the HITECH Act. Hospitals that implement certified electronic record systems will be eligible for IT payments over a maximum period of four years. Applying a tiered-payment model based on the total number of discharges, inpatient days for Medicare and Medicare Advantage patients, total inpatient days and total hospital charges, hospitals using meaningful electronic records during fiscal 2011 through 2013 will

be eligible for the maximum payments available.

Hospitals that implement after 2013 will be eligible for a lower payment, with penalties kicking in and payment eligibility ceasing completely if implementation is delayed until 2015 or later. The certification requirements and other compliance demands of the program will not be finalized until Dec. 31, 2009.

Successful EMR systems involve strategic approach

There are multiple elements to consider when devising EMR strategy and integration, and external expertise in planning and implementation can help bring the project to fruition and ensure that desired results are achieved. "Hospitals don't have to jump in without a life preserver. Ingenix Consulting can help hospitals select and implement the right EMR system the first time, avoiding costly 'do-overs' that could undermine a hospital's credibility," Galloway said.

Specifically, Ingenix Consulting can assist hospitals with pre-contract planning and contract negotiation, pre-implementation (process and project planning and tools development), implementation (testing, training and support) and ongoing optimization (post-implementation review to include value audits and process enhancement). "Ingenix has great solutions on the consulting side," Galloway said. "We have a unique blend of management consultants, world-class subject matter experts and implementation specialists to assist at every stage of an EMR system project."

"We offer hospitals the ability to determine priorities and strategy for their projects, to best optimize their assets and make sure that the big-picture results are achieved," Galloway said. "Often, hospitals have not completed many such large-scale technology projects, so it can be difficult for them to maintain focus through the many phases of implementation, which include

preparing and training those staff members who will interface with the EMR system," according to Galloway.

Physician practice support

Recent estimates of the adoption of electronic records by physicians range from 9 percent to 29 percent, according to a national survey conducted in late 2007 and early 2008.⁴ Physician practice rates of adoption also are expected to accelerate in light of the recent signing of the HITECH Act. Hospitals now can expand their efforts to further integrate clinical connectivity with affiliated practices in addition to advancing internal EMR efforts.

Ingenix offers CareTracker EMR - a CCHIT-certified,⁵ Web-based EMR application that allows physician practice electronic records to be accessed seamlessly from any location through a secure and centralized gateway.

Ingenix provides full-service EMR support

Ingenix Consulting can save hospitals effort, time and money by defining the objectives of information technology, recommending architecture, developing expense models and timelines, and developing governance and organizational plans that hospitals can use going forward. "Further, after a hospital's system is in place, we can help them leverage their investment by optimizing the data they've collected for research," Galloway added.

"Some hospitals make the mistake of treating their EMR project as if it is only an IT or systems initiative," he said. "Ingenix Consulting makes sure that their strategies acknowledge and address that the project will significantly change the workflow for their health care professionals."

Hospitals working with Ingenix Consulting will find that

its consultants are experienced, goal-oriented and practical. “We understand that funds are limited and resources are scarce,” Galloway said, “but we also can keep hospitals moving toward their goals at a pace that is comfortable and makes sound business sense.”

About Us

Ingenix Consulting is a premier, data-driven health and human services consulting organization. We have over 1,000 consultants with experience working with hospitals, physician practices, health plans, employers, government agencies, and pharmaceutical companies. This scale and exclusive health and human services focus set us apart.

Endnotes

¹ Bates, David W., M.D., MSc., “The Effects of Health Information Technology on Inpatient Care,” *Archives of Internal Medicine* (Jan. 26, 2009).

² “Electronic Health Records: The Time Is Now,” HIMSS press release (Jan. 28, 2009).

³ “Enabling Health Care Reform Using Information Technology,” HIMSS (Dec. 17, 2008).

⁴ DesRoches, Catherine M., Dr.P.H., Campbell, Eric G., Ph.D., Rao, Sowmya, R., Ph.D., Donelan, Karen, Sc.D., Ferris, Timothy G., M.D., M.P.H., Jha, Ashish, M.D., M.P.H., Kaushal, Rainu, M.D., M.P.H., Levy, Douglas E., Ph.D., Rosenbaum, Sara, J.D., Shields, Alexandra E., Ph.D., and Blumenthal, David, M.D., M.P.P. “Electronic Health Records in Ambulatory Care – A National Survey of Physicians,” *New England Journal of Medicine* (July 3, 2008).

⁵ CCHIT (The Certification Commission for Healthcare Information Technology) confirms that Ingenix CareTracker, Version 6.2 from Ingenix is a CCHIT Certified Ambulatory EHR product for 2007.