Practice Transformation: A Personal History

eHealth Initiative: Connected Communities Learning Forum April 10, 2006 Joe Heyman, MD Secretary, American Medical Association





Influences





- Bridges to Excellence (Employers, "Providers", Plans)
- P4P
- DOQ-IT
- AHRQ



Massachusetts eHealth Collaborative





Progress









- Great software and hardware
- Clinician comfort with computers and internet
- Easy set up of hard wired and wireless networks







- Phone calls
- Appointments
- Changing Demographics
- Problem Lists















- Medication Lists
- Record Requests
- Reports
- Prescriptions by phone and in office
- Checkout and billing







- Unreadable
- Tiny writing on charts
- Lost and scattered data
- Wrong office







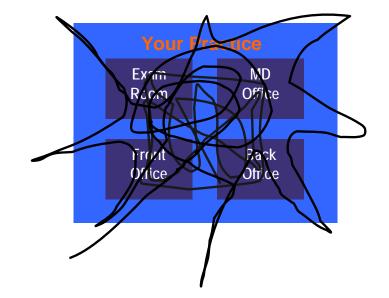








Think about this!













As much as \$16 per chart pull?



Disturbing Concerns









- Our experiences in practice include
 - Incomplete information
 - Alarming error rates
 - Expense of time, energy, and money seemingly way out of proportion to benefits
 - Decisions based on gut or tradition
 - Malpractice claims that are related to documentation some 90% of the time



HIT Happens!





- January 2001
- April 2001
- Fear
- Courage







Why EMR a must for me







- Efficiency
- Image







When?









Immediately!



Why?









Cost

- Office Equipment
- Rent
- Employees
- Patient notification
- Reassurance to patients
 - Up to date
 - Unique



Who?







- Google
- Tom Sullivan
- Jeannie Marcus
- Massachusetts Medical Society
 - Michael Kelly
 - PIAM





What?









My Software

- Desktops
- Scanner
- Laser Printer
- Medem
 - Library of info
 - Encrypted email
- PC Anywhere



How?





- Network Router
- DSL
- Clearinghouse







Disaster!







- March 5, 2002
- A day that shall live in infamy!
- The Agony
 - Paper . . . yuch!
 - A hard day's night
 - Cynthia
 - ActionFront.com
 - The Cuban Missile Crisis, October 26 and 27, 1962
 - Office Insurance
- The Ecstasy





More recent major setback





- Hard Drive Failure in a RAID system 2/06
- What happens with your service contract
- Next steps







This Weekend!!!!





- Laptop drive failure
- No Medem
- No way to contact my office computer
- No way to write this speech







My System









- Digital filing of everything
 - EOBs
 - Contracts
 - Invoices
 - Receipts
 - Correspondence
 - CME certificates
 - Fee Schedules

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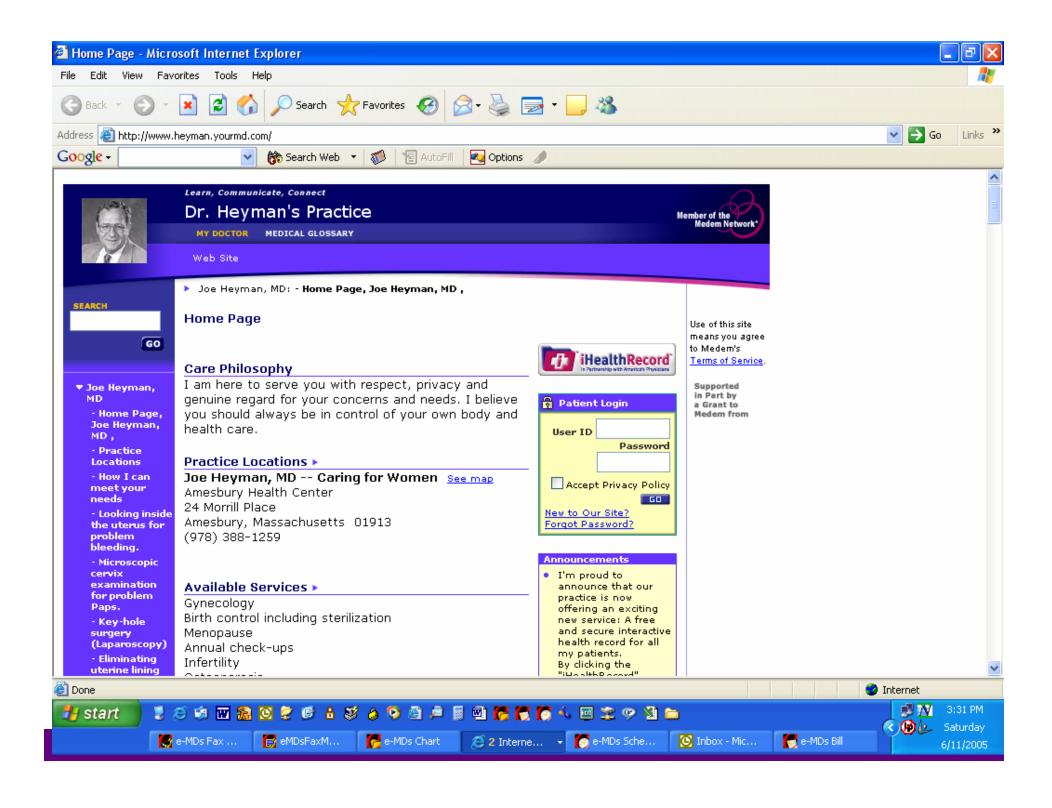






• Website (Medem)

- Interactive Health Record
- Appointments
- Prescription refills
- Online Consultations



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	Concomitant use of Atorvastatin Calcium and Cyclosporine can potentiate some adverse effects.	
	Recommendations: Carefully monitor patients receiving these two drugs	
	Cyclosporine interacts with Estrogens	ls, fever, flank
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	Estrogens can increase the serum levels of Cyclosporine and increase the risk of toxicity.	
	Recommendations: Avoid this combination if possible. Monitor	
/ РМН/ЕМН /	CYCLOSPORINE level and renal and hepatic functions. Adjust CYCLOSPORINE dose as needed.	
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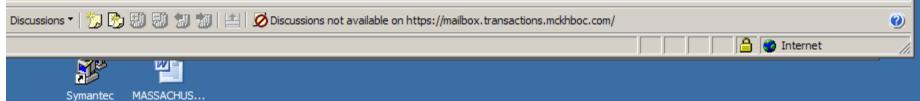
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Directory	t332030	91,800	CR332030.KR	Jul 21, 2005	
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My System









- Electronic record
 - Scheduling
 - Documenting
 - Receiving reports
 - Scanning
 - Coding
 - Billing



How much?







- Somewhere between \$15,000 and \$30,000 per physician on initial purchase including setup software and hardware.
- Return on investment usually within two years.
- Maintenance fees of about \$3000 to \$9000 per physician





How much?



Other choices

- Buy and run remotely
- Subscribe and run remotely







Performance









- Transcription Elimination
- Reduced paper management (chart pulls)
- More usable office space per square foot
- Error-free legible prescriptions
- Improved coding



Performance









- Lab Interfaces
- Referral Management
- Guideline Compliance
- Quality Reporting
- Search by diagnosis, procedure, drug



Performance





- Increased office efficiency
- Patients' happiness
- Lower costs
- Accessibility











AMA

Lessons Learned

Do it now!

- Hardware a bargain!
- Software increasingly more robust and expensive
- Many fantastic EMRs available
- One patient at a time
- Don't duplicate paper world











- Before you decide on anything, understand where you are today.
- Tour your practice and make sure you understand it all.
- Find out all the irritants you and your staff endure in the paper world.
- The worst thing you can do is recreate your present environment electronically!









- Make sure the system you choose gets rid of as many of those irritants as possible.
- Visualize your future state before you decide.
- It's just software and it's constantly changing.
- It isn't perfect.













- Correlation between a particular vendor and success is not as important as the correlation between the office culture and success.
- Once you understand that, selection of vendor can be quick and easy.
- Most people don't use all the capabilities of their software.











- Connectivity will soon be very important.
- Every physician will use an EMR in less than a decade.
- The Electronic Health Record is a constantly changing organism with standards still developing.









- Consider the advantages and disadvantages of system in your own office on your own server.
- Consider the advantages and disadvantages of system on the web.
- Company and support more important than software.









- Workflow more important than nifty features.
- Use available resources.
- Get help from knowledgeable friends.
- You need a champion.









- It's great fun and exciting.
- It gives you more freedom, income, and joy in practicing.









Backup!

Backup!!

BACKUP!!!













 Don't underestimate the value of joining and supporting your county, state, specialty society – and, of course...



The American Medical Association





Together we are stronger!



Joe Heyman email









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- joseph.heyman@verizon.net
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