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Number 35

January 2005

Electronic medical records: What to consider

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Electronic medical records ... not just the wave of the future. In fact, more medical offices use some form of a computerized medical record to document patient care, scheduling, and/or billing than ever before. The current administration wants a national electronic health information system that maintains accessible and accurate health information for every patient. Until the system is in place, physicians must use their own resources to determine what EMR system will work in his/her practice. This newsletter is in response to numerous queries received from policyholders about electronic medical records (EMR), and will focus on electronic medical records in an office practice; questions to ask potential vendors; a checklist of things to consider if you plan to buy an electronic medical record program, and more.

National health information technology update

Federal officials' efforts to get physicians to adopt and use a national health information infrastructure that will include electronic medical records continues to be debated by the House, Senate and physicians. Legislation introduced in January 2004 is intended to create a national system, through the adoption of national health information technology, that will allow medical entities to communicate efficiently and securely, and allow patients' medical histories to travel with them, rather than remain in a physician's office. Currently, no regulations have been finalized. The Centers for Medicare and Medicaid Services is also working on electronic prescribing criteria with hopes of launching a voluntary standard in early 2006. Also of note: Medicare reform legislation of 2003 will require a Medicare electronic prescribing program by 2009.

The President's 10-year plan to initiate personal electronic health records for every American is headed by newly-appointed Coordinator of National Health Information Technology David Brailer, MD, Ph.D. Dr. Brailer

recently announced several key initiatives that he hopes will drive the effort to expand the use of health information technology. Exactly how nationally accessible electronic health records will evolve is an unknown. Until there are concrete guidelines, physicians will have to find programs that comply with established guidelines for well-documented care.

Fourteen medical societies recently created Physicians' Electronic Health Record Coalition (PEHRC)¹ with the goal of advising physicians on how to determine which EMR program will best suit their practices. Likewise, three nonprofit industry groups, the Healthcare Information and Management Systems Society (HIMSS), the American Health Information Management Association, and the National Alliance for Health Information Technology², have an EMR program underway. The American National Standards Institute has delegated HIMSS to lead an effort to develop voluntary certification standards to help physicians evaluate and compare EMR programs. Some of the services will require a fee before access to information is granted.

But, what about **now**? What if you are thinking about an EMR today, and don't want to wait for the industry groups to make their recommendations? What do you need to know to begin the process? Consider the following:

How many patients do you routinely treat?

If you are a physician who treats a large number of patients, you may benefit from an EMR program that helps manage your patient load and helps you document more effectively, accurately and defensively. Using an EMR program to document your care and treatment of patients may reduce the amount of time you spend writing, will improve the quality of your documentation, may reduce your staff's workload, and will reduce the amount of physical space you need to store paper charts. When you evaluate an EMR, ask yourself: (1) What features does the EMR have that are unavailable in a paper chart? (2) Which features are important to you? (3) Which features would help you practice more efficiently and effectively? (4) What features would make your professional life easier?

What are the documentation needs of your specialty?

Imagine if, in a keystroke, you could retrieve a single patient's medication history; identify patients with a specific condition or taking a specific medication; be warned of allergy or drug contraindications when prescribing; be alerted of outstanding lab, consultative, or radiology reports; and print and document the patient educational materials you give patients. An EMR program may help monitor specific patient populations in minutes and allow you to identify like patients faster than your staff could complete the same or similar query by hand. Most EMR programs will allow you and your staff to completely document telephone calls to and from patients and other treating physicians, and store this important information in a dedicated section of the electronic chart for easy retrieval. Because you regularly receive test results or correspondence to enter in patients' charts, ask EMR vendors how text is imported into their systems, what text formats the

software can read, and whether additional hardware and software is required to integrate scanned information into the system. If you use images (e.g., digital camera, scanners) to supplement your written documentation, be sure to ask what image formats the system supports and how much space is required. The more file formats the system allows, the more choices you have regarding how many images may be integrated into the EMR program. Ask the vendor what printers support the EMR system and ask the vendor to demonstrate the system's printing abilities prior to (and during) installation.

What is the dollar amount you are willing to invest in an EMR?

There are a number of factors that need to be considered when investing in an EMR program. First, the number of terminals, palm pilots, or laptops needed for your practice should be considered. Many programs run on existing computer equipment, but you may need to purchase additional EMR terminals for partners, staff, or examination rooms. Will your current computerized record-keeping system (accounting, scheduling, etc.) interface with your new EMR program? Will you be able to add the EMR system to your current programs? How often are system upgrades provided and how much do they cost? Will you need a networking program? And if so, what are the anticipated time and dollar expenditures?

How much time are you willing to invest in the transition to an EMR program?

EMR training for you and your staff should also be considered, as some EMR vendors provide live-on-site training, while others provide online training. Initially, there may be a sharp learning curve for all users; then, ongoing staff training at appropriate intervals will ensure up-to-date knowledge of the program. Incorporating an EMR program into your practice will require a commitment from you and your staff to make time for the transition from paper to electronic charts. Consideration must also be given to the time it will take for you to "transition" your charts. Physicians are responsible for the information in both the paper and electronic charts during the necessary transitional period between the two. Making time for evaluation, selection, transition, installation, and training on the EMR is paramount if you want to successfully incorporate an EMR program into your practice.

Technical support

You should also inquire about accessibility of technical support. Find out what is included with the purchase of the EMR program and the cost of extended support services. Some companies offer 24-hour support, while others offer assistance during regular business hours. Ask about how time zones affect your access to technical support. For example, if you practice in the Pacific time zone and the EMR technical department is in the Eastern time zone, with Eastern business hours, you may have to wait until the next business day for technical assistance after 2:00 p.m. Pacific time. Remember to ask how much technical services will cost. Be very clear about your technical support needs and ask the vendor to put in writing what services

your fees entitle you to receive. Also find out if the support department is automated or answered by a live person. Ask the vendor for references to other users and ask them specific questions about their experiences with technical assistance. For example: How long did it take to reach a real person when you had a problem? How long did it take to obtain a solution to solve the problem? Did the solutions offered actually solve the problem?

How is the product licensed?

Be sure you know and understand what the licensure entails and what each license provides. Some companies provide a “site license” that enables you unrestricted use for any number of users, while other companies require you to pay a license fee “per user.” Some companies require separate licenses for various components of their system (i.e., billing and scheduling). For example, will your receptionist need a license to add an e-mail telephone message to a patient’s chart? Delays in system access can result in office inefficiency.

Security

The final standards of the HIPAA Security Act were published in April 2003; most “covered entities (CE)” will have until April 25, 2005, to comply with the standards. Be specific with your questions to potential vendors about how their product complies with the Security Act. Ask about the Administrative, Physical, and Technical Safeguards of the system, as these safeguards are required by the Act³.

Determine how system back-up is performed and what access you will have to the system during the back-up. Where is the back-up information stored and how easy will it be to access? (If there is an individual in your practice responsible for daily back-up of information, ensure that the staff member has a clear understanding of the importance of the back-up system, and the consequences for failing to do so.)

Ask about how information is saved to the system and the process for making changes and preventing alteration of the record. A secure system should allow you to create, review, and approve chart entries that you then finalize, rendering them unalterable. Additions to the original entry should be included as an amendment in a separate chart entry that once finalized also becomes unalterable.

Determine who in your office would use the EMR program and need to access patient-specific information. How does the potential system limit access to information on a “need to know” basis? If the EMR program has a tracking system, it will be easy to determine when someone accesses and attempts to alter patient information. Make certain the program allows you to set user security levels. Determine the level of access required to perform job duties (i.e., does your scheduler need access to progress notes?).

How would disputes between you and the EMR company be handled?

Could you continue to access the electronic records if you and the vendor have a billing dispute? What is the EMR vendor's policy for dispute resolution, and will a dispute compromise or restrict access to patient information? You should also inquire about the status of your medical charts should the EMR contract be broken or if you decide to switch vendors. Vendors unwilling to discuss this matter may not be the appropriate vendor for your practice. **Before you buy a system, be sure that you can access your data and transfer it to a new system should you decide to switch to another company.**

Remember that all documentation essentials required in paper charts must also be included in an electronic medical record. The information necessary for optimal care must be documented no matter what type of charts is used: paper, electronic, or hybrid. Finally, when considering an EMR program, make sure you know what questions to ask before you buy. Be specific, clear, and get every promise in writing.

That's how you begin the process of deciding if an EMR is an investment you want to make now. When the answer is "yes," keep asking questions and "stay tuned" for future developments on the national front.

Quick Checklist of Questions to Ask an EMR Vendor:

Vendor: _____

EMR System: _____

- Does the program have user-defined templates?
- Does the program have default prompts (for essential information) that cannot be over-ridden?
- Would the program alert you to medication contraindications based on allergies or other drugs?
- Are chart entries alterable? If yes, are alterations detectable? Dated?
- Describe the patient education materials available within the system, (Can they easily be printed?) and how you will document that information was dispensed.
- Describe the access to aggregate information. (Examples: all patients on a specific medication; lab values for a single patient within a specified time; all patients with a specific diagnosis; chronological list of medications prescribed for a patient over a specified time).
- Where and how are telephone communications documented?
- What capacity does the system have for interface with hospitals, labs, other doctors' offices, pharmacies, and/or PDAs?
- How does this system interface with your currently installed programs?
- How and where are referrals documented in the system?
- What prompts or reminders are available for return appointments?... the return of ordered lab, consultative, or radiology results?
- Describe the "user-friendliness" of the system.
- How are medication orders printed or faxed from the system?
- What is the learning curve (time and degree of difficulty) for new system users?

- How are new users trained?
- What technical support is available for users?
- What happens to your access to the EMR should a billing dispute arise between you and the EMR company?
- What and how are updates available to users? At what cost?
- How is written material from outside the system entered into the EMR?
- Is there a capacity to scan materials? How is such information retrieved?
- What type of back-up does the system have? At what frequency is it backed-up?
- What are the available levels of security?
- What other systems are compatible with this system? (PDA, billing software, scheduling software, etc.)
- How are attempts at unauthorized access detected?
- What anti-virus software is incorporated in the system?
- What encryption, if any, is either installed with or available to the system?

How to reach MIEC

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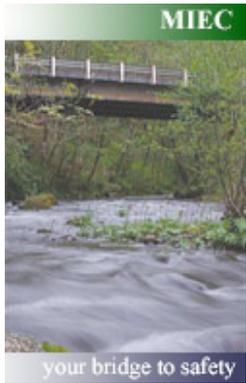
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