

White Paper - Fostering Hospital Relationships with Community Physicians through the Implementation of Interoperable Electronic Health Records

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Introduction:

This paper is written to assist hospital executives who are interested in developing an outreach program for community-based physicians and helping physicians finance the transition from paper-based records to electronic health records and patient portals to improve patient and operational outcomes.

Now is the Time for Donations under OIG and CMS Safe Harbor Rules

There is no better time for community hospitals to begin strategically planning for interoperability with referring community physicians. Anxious to promote these arrangements, the federal government has removed some obstacles that had previously hindered this type of hospital-physician cooperation. Specifically, the Centers for Medicare and Medicaid Services (CMS) and the Office of the Inspector General (OIG) of the U.S. Department of Health and Human Services (HHS) issued rules that create exceptions under the physician self-referral prohibition law (Stark) and similar safe harbors under the anti-kickback act. These changes allow hospitals, hospital systems, and health plans to provide electronic health record (EHR) software, systems, and services to medical staff physicians. To qualify, the EHR systems must be “interoperable,” i.e., able to communicate and exchange data with other technology systems, software applications, and networks. This allows hospitals the opportunity to help community physicians acquire electronic health records at a reduced and affordable cost—health systems may subsidize up to 85% of the cost—while also providing connectivity to crucial hospital and ancillary data for true interoperability.

According to a survey of 2,758 physicians published in the July 3, 2008, edition of the *New England Journal of Medicine*, only a small minority of U.S. physicians have embraced electronic health records (EHR) as a routine part of practice. The study shows that only 4 percent have a

fully functional EHR system and 13 percent have a basic one. Fully 88% of physicians indicated that capital requirements were a barrier to EHR adoption, with 66% indicating that this is a major barrier. Lead study author Catherine DesRoches, an assistant in health policy at Massachusetts General Hospital, indicated that getting more physicians to embrace EHRs is critical to breaking down the resistance to using the technology. The study, titled "Electronic Health Records in Ambulatory Care: A National Survey of Physicians," notes that physicians who use EHR systems tend to like them, even though one in five had expressed reservations about the ease of use and reliability of their systems. The study found that 82 percent of those surveyed who were using a fully functional EHR indicated that they improved the quality of clinical decisions; they also reported that they were increasingly able to meet clinical guidelines for preventive care (85 percent) and chronic care (82 percent). Of the users of fully functional EHRs, 80 percent reported that the system had helped them to prevent a drug allergy, and 71 percent said the system had prevented a potentially dangerous medication interaction.

"Those numbers are huge and very encouraging," said David J. Brailer, M.D., Ph.D., the former National Coordinator for Health Information Technology and current chairman of Health Evolution Partners. The *New York Times* article in which he was quoted (Steve Lohr, "Most Doctors Aren't Using Electronic Health Records," *New York Times*, June 19, 2008) goes on to say that a major barrier to adoption of medical records is the fact that existing products tend to be designed for hospitals—big customers—instead of small practices. "We see a deficit in innovation," said Dr. Brailer, "and that is something innovators and the capital markets can address."

Offering choice will give hospitals respect and grow adoption rates

Giving community physicians products that work well in their practice environments, that can be easily implemented, and that are affordable will be key to accelerating the EHR adoption process. Hospitals looking to partner with community physicians to strengthen their relationship and improve their interactions often need to look at multiple offerings as part of their interoperability strategy. Many physicians are skeptical if hospitals offer only one choice in their EHR partnership programs. Developing an interoperability strategy that includes multiple choices of EHR systems will help the health system secure higher rates of EHR adoption and strengthen the portability of patient information for improved outcomes. Unfortunately, the cost of acquiring in-house EHR systems from multiple vendors can be cost-prohibitive. However, by partnering with a company that offers multiple EHR products via the Software as a Service (SaaS) or Application Service Provider (ASP) model, hospitals can offer affiliated physicians an EHR choice without a multi-million dollar up-front expense. Integrated systems benefit everyone—the hospital, the physician practice, and the patient. The collaboration provided through interoperable community-based systems ensures that medical practices, regardless of their size or location, will have immediate

access to a patient's health records and can electronically share information to the entire team that is charged with providing care to the patient.

Turn to a trusted resource for ASP EHR Interoperability and your community-based solution

When selecting SaaS/ASP EHR models, it is important to find a resource that offers multiple choices and that is willing, not just to sell the product, but to stand by their implementation process as well. Most adoption failures of EHR systems occur because the systems have not been adapted to the practice's workflow, not because of deficiencies in the products themselves.

MED3000 offers several SaaS/ASP EHR options. We help our groups select the best choice for them based upon how the system will automate the workflow in their practice and how well it has been "tuned" to their specialty. Some EHRs are more intuitive than others, while some systems offer more advanced specialty and/or reporting tools. Allowing physicians to evaluate and select the best EHR product for their practice's workflow will help secure buy-in and increase acceptance.

Turning to an expert in implementation and practice operations like MED3000, who can offer you multiple choices in ASP EHR models for your interoperability strategy, can give your hospital the confidence that choice is being offered to your community physician referral base and assurance that the implementation will be successful and physician adoption secured. By presenting an ASP model to your community physicians, you will be offering a choice of turn-key EHR products that are implemented and managed by experts at providing hosted computer solutions to medical communities of all sizes. MED3000's approach provides HIPAA-compliant security, redundancy, and reliability without requiring additional staffing or infrastructure costs within the hospital. Software updates as well as integration services are provided as part of the service, thereby ensuring that the systems that you choose continually meet the latest standards in EHR functionality and interoperability, as required by the Certification Commission on Health Information Technology (CCHIT). By employing hosted solutions from MED3000, you can be assured that your community-based physicians will have a wide choice of systems that exchange standards-based information over a secure network to support your vision of a community health record that truly improves the care of your patient population.

CCHIT Certification

MED3000 offers three CCHIT-certified EHRs in a SaaS/ASP hosted model, including InteGreat IC-Chart®, Allscripts Enterprise® (formerly Touchworks) and Misys EMR®. CCHIT certification represents the acceptance of a common set of standards for the industry and is a significant step

toward accelerating industry-wide adoption of EHRs. When purchasing CCHIT-certified EHR solutions, physicians can be assured they are purchasing a quality product that delivers functionality to create and manage electronic patient records while also automating physician office workflow, that their patients' information is safe, and that the EHR has interoperability to receive and send electronic data. CCHIT provides that standard for interoperability. All of the MED3000 products have the approved interoperability required to be compliant with Stark and anti-kickback rules.