

MD OPTIONS

EMR Fosters Eye Clinic Growth

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Technology

During our search for an electronic medical record (EMR) system, we stumbled across an anomaly—a solution that defied the lengthy timeline typically associated with adopting an EMR. Historically, the timeline required to install and use an EMR can delay the rewards a practice can realize from a fully digitized environment. Those rewards include growth, return on investment, increased productivity, and efficiency.

The story of our success shows how the solution we selected for the Wheaton Eye Clinic shortened that timeline. In less than a year, the clinic achieved a fully digital environment, gained efficiencies, enhanced productivity, improved patient care, grew the practice, and increased revenue.

360,000 Charts

Wheaton Eye Clinic is the largest private ophthalmology practice in Illinois. It has four satellite offices, 24 board-certified ophthalmologists, and seven licensed doctors of optometry. Founded more than 60 years ago, the clinic is a major provider of eye care services and a resource for referring physicians whose patients have eye care needs. We have about 115,000 clinic visits per year, and maintain some 180,000 active charts and another 180,000 inactive patient charts. In addition to our highly trained and experienced medical staff, Wheaton Eye also provides full vision correction services, contact lens specialists, and a designer eyewear studio.

For over six decades, Wheaton Eye endured the costs and delays of a paper-based chart environment. The challenges of dealing with paper charts represented minor annoyances, but became major obstacles as the clinic grew. Lost or misplaced charts prevented us from having access to pertinent patient information when it was needed most. Incomplete charts forced us to search for missing information and delayed our response time to our patients. Shrinking chart-storage capacity ate away at our revenue producing real estate. The effect on our business showed up in the added cost of these delays and the financial penalties that resulted from improper or incomplete coding.

With the addition of each new satellite office, it became more costly to maintain patient records on paper. Processing roughly 1,800 to 2,000 charts weekly, we began to hit our labor, finance, and real estate capacity. Although we experienced growth, the cost of that growth was substantial. We had to hire additional labor to transport, file, and maintain medical records, and we were incurring extra expenses to facilitate communication across our growing practice.

A Hybrid Solution

After evaluating the available technologies and systems, Wheaton Eye selected, implemented, and has had great success with a hybrid EMR solution. A hybrid EMR is a scalable scanning solution that gives a practice the option to add workflow and data management modules, such as digital messaging, electronic prescriptions, referral order management, integrated transcription services, and customized flow sheets. Hybrid EMRs are designed to fit a

variety of needs and specialties without negatively affecting physicians' productivity or changing their preferred ways of practicing medicine.

For our clinic, we wanted simplicity but by saying that we do not mean to imply a basic system. To us, simplicity means the system has straightforward, uncomplicated software and even the most robust features are simple and easy to learn. Historically, the most time-consuming phases of an EMR adoption are training and implementation. However, with the solution we selected, training and implementation were non-events. We were able to choreograph the handoffs between the three phases of selection, training, and implementation with weekly conference calls. The training itself was easy because the product was intuitive and we got a lot of support from our EMR vendor, SRSsoft, a company in Montvale, N.J., that produces hybrid EMRs. The process took so little time that we were able to achieve a return on investment within the first year.

Support for Growth

One aspect of the software that we value highly is its ability to support practice growth. We would not be growing at the same speed and scope if we had retained our paper-based system.

With all of the advancements in efficiency and productivity gained from our hybrid EMR, we were able to add six new exam rooms and launch a new surgical center as well. Last year, we hired three partners and are planning to add two more this year. Although we did not need a hybrid EMR to hire new partners, the system allowed us to hire these additional physicians without having to invest in extra support staff. Additionally, our superbills are scrubbed and cleaned in less time than it took to do so with paper claims, and our claims-denial rate is much lower than it was.

Since we installed this system, our optical revenue also has improved because our throughput and charge-capture rates have increased. When our physicians finish an eye exam, they print the eyeglass prescription to a laser printer in the optical shop, thus increasing internal referrals.

Using this new system has saved a significant amount of staff and physician time that previously was devoted to finding lost or misplaced charts. Plus, we no longer need to pull hundreds of charts each day. Even though some of our staff are now devoted to scanning paper charts so that physicians can view these records electronically, we still have more staff time available to respond to patients and referring physicians faster and more accurately.

One interesting advantage of the hybrid EMR is its ability to connect a non-related application easily. The potential of this one benefit is limitless. We integrated our peripheral diagnostic equipment into our digital environment, for example, and doing so gave our physicians ready access to more patient information at the point of care.

In the past, our physicians had to wait for costly diagnostic image reports that were slow to print. Simply printing these reports slowed our physicians and forced our patients to wait. With the diagnostic equipment now integrated with our hybrid EMR, we can quickly call up image reports from any one of our multiple locations, and the images have great clarity as well. As a result, we have eliminated the need to print these image reports, cutting the associated costs.

Communication Advantages

One of the most significant features of our hybrid EMR is that it allows us to improve communication within and outside of the practice. We can now service referring physicians more efficiently, for example, because dictation is now done right after we see a referred patient, decreasing turn-around time. We no longer have waist-high piles of charts awaiting transcribed dictations.

In addition, the hybrid EMR's communication module ensures that all messages get collected, stored, and tracked. By using the communication module, we can respond to patients' inquiries quickly, and when physicians talk with or meet with patients, they have all pertinent information at hand. The module also allows us to communicate efficiently among all of our offices while also helping us to be more organized because we no longer rely on spiral log books or notepads.

When installing any new system, physicians are likely to be most concerned about its effect on patient care. The hybrid EMR has had a positive effect on our patient service and care, because our patients are directly affected by the control and access our physicians have over their medical records. The system allows us to respond to patients faster than before, and we are no longer spending time looking for lost charts. The control we have over our practice has allowed us to make more informed business and operational decisions and eliminate the bottlenecks paper charts created.

Although every practice has its own unique demands, we all essentially share the same challenge to do more with less whenever possible. As we learned, it is possible to install an EMR system at a reasonable cost that affords physicians control over their workflow, allows them to maintain their preferred way of practicing medicine, and that facilitates practice growth.



Wheaton Eye Clinic at a Glance

The Wheaton Eye Clinic (at www.wheatoneye.com) is the largest private ophthalmology practice in Illinois. In addition to its office in Wheaton, the clinic has three other offices in Illinois: Hinsdale, Naperville, and Plainfield. The clinic has 24 board-certified ophthalmologists and seven licensed doctors of optometry. It also has 115,000 clinic visits per year. The Wheaton Eye Clinic provides full vision correction services, contact lens specialists, and a designer eyewear studio.

Seeking a Solution, Team Settles on Hybrid

When the Wheaton Eye Clinic began seeking a solution to the problems inherent in using paper charts, the staff found the market for electronic medical record (EMR) systems to be confusing and muddled. To sort through the options, the staff put together a research team of physicians, clinical administrators, and key supervisors from core departments. The knowledge this assorted group brought to the process was reflected in their familiarity with their roles and the ways in which the technology would affect the practice.

The team investigated the various technology choices and vendors. During site visits with practices using the various systems we were considering, the team members compared their experience with that of our specialty, volume, and goals. We asked the physicians in these other groups about support, upgrades, and whether they had any say in the enhancements of the technology.

We found that the easiest way to categorize the different EMR technologies was simply by how physicians enter patient data into the system. The patient data entry method affects both how that data are represented in the system

and how the system outputs data.

The input method has a significant effect on physicians and staff. We discovered three main methods of data input: discrete data entry, scanning, and a hybrid between the two.

Discrete data entry EMRs require physicians to click through multiple screens to enter data terms into rigid templates. At one time, EMR developers believed physicians needed software that collected—through data entry—and stored discrete information to achieve the goals of an EMR system. As the industry evolves, however, our team members found that entering all the information from our paper charts would take too much time. Plus, it would turn our physicians into data-entry clerks. In our fast-paced environment, this solution was not possible or desirable.

On the opposite end of the spectrum are systems that allow physicians to scan paper charts. Called document management solutions, these systems do not require physician data entry. When a document is scanned, the system takes a digital image of the document and files it within the appropriate patient record. Document management solutions use barcode technology and can be configured to mirror a paper chart. These systems also offer optional, customizable input templates.

After considering the advantages and disadvantages of these systems, the team decided that the most impressive innovation was in the middle of the spectrum: hybrid EMRs.

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Digitized Charts Don't Get Lost

As many physicians know, having piles of charts poses two significant problems. First, charts stacked on a desk are out of circulation, meaning other departments cannot find them in the file room. Second, the time it takes physicians to go through stacked paper charts decreases their response time to patients and ties them to the office.

Once the Wheaton Eye Clinic installed an electronic medical record (EMR) system, all of our charts were digitized, meaning we no longer needed paper charts. Having digital charts solved both of these problems and liberated our physicians so that they could work from anywhere and still have access to patient records as long as they have a computer and an Internet connection. All patients' charts are now stored in one location.

Since physicians have access to patients' charts 24 hours a day and seven days a week, they update their charts more efficiently and within a timely manner because they are no longer tied to a physical location. Also, physicians and staff no longer have to call up the main office and have someone get the paper chart, disassemble it, fax it, and reassemble it for a physician in another office.

Additionally, our billing office no longer waits for charts. If the billing staff needs patient information from a chart to submit or resubmit a claim, the information is available immediately.

Our on-call physicians have gained peace of mind with universal access to patients' complete charts. Even when a physician is answering a call from a patient who may be unfamiliar, the physician can use the EMR to read the entire medical record, including medications, allergies, and the most recent diagnosis and plan of care.

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