



The Agony

and



The Ecstasy

of

EHR
IMPLEMENTATION

First Requirement?

- A Champion who is ready to put on the armor and fight for the project.





The Agony –
It takes a
long time

The Ecstasy –
Finishing the Project
correctly, on time and
on budget



Sample EMR Implementation Timeline

Action	2008												2009						
	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	
Negotiate Contract	█																		
Identify Team Members	█																		
Leader Training		█																	
Design, Build, Test Practice Management System					█							<i>11/1 Implement Practice Management</i>							
Design, Build Test Clinical System											█					<i>04/01 Implement EMR</i>			
Follow-up Support →											█								



The Agony –
It needs to
be painfully
detailed

The Ecstasy –
Finishing the project
correctly, on time, and
on budget



Have a detailed Project Plan

- Hire a project manager
- System Specifications
- Complete a contract
- Hardware and technology
- Interfaces
- Review policies & procedures
- Education and training
- Review workflows
- Data conversion
- Accounts Receivable run-out plan



The Agony – Make sure you pay for a lot of personnel during go-live

The Ecstasy – Problems get addressed quickly



Going live with the new practice management system –APRIL 1

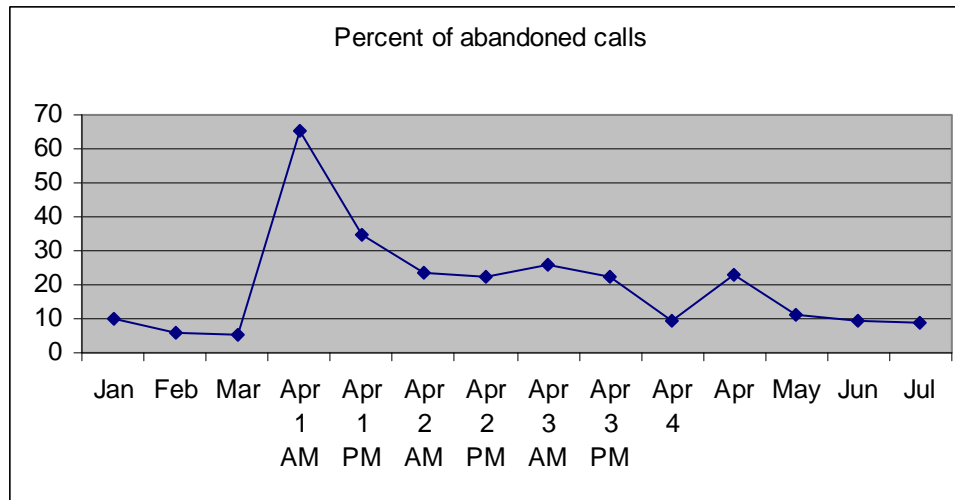
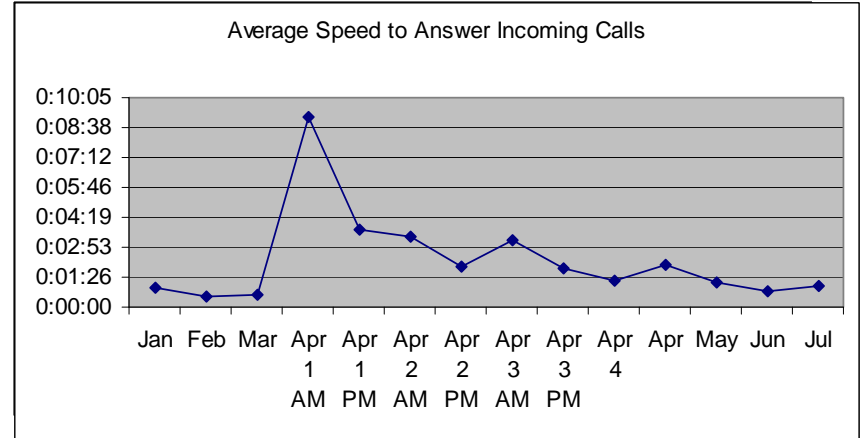
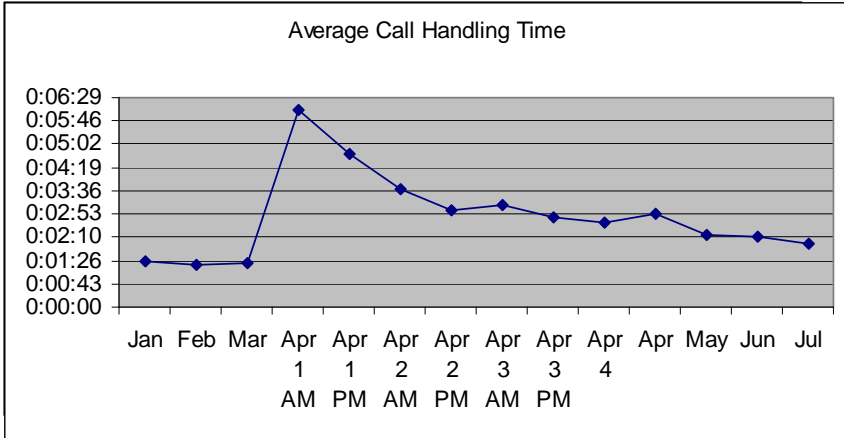
NorthPoint's
telephone
experience





The Agony – Learning to make appointments with the new system causes long phone queues

The Ecstasy – There is a quick learning curve



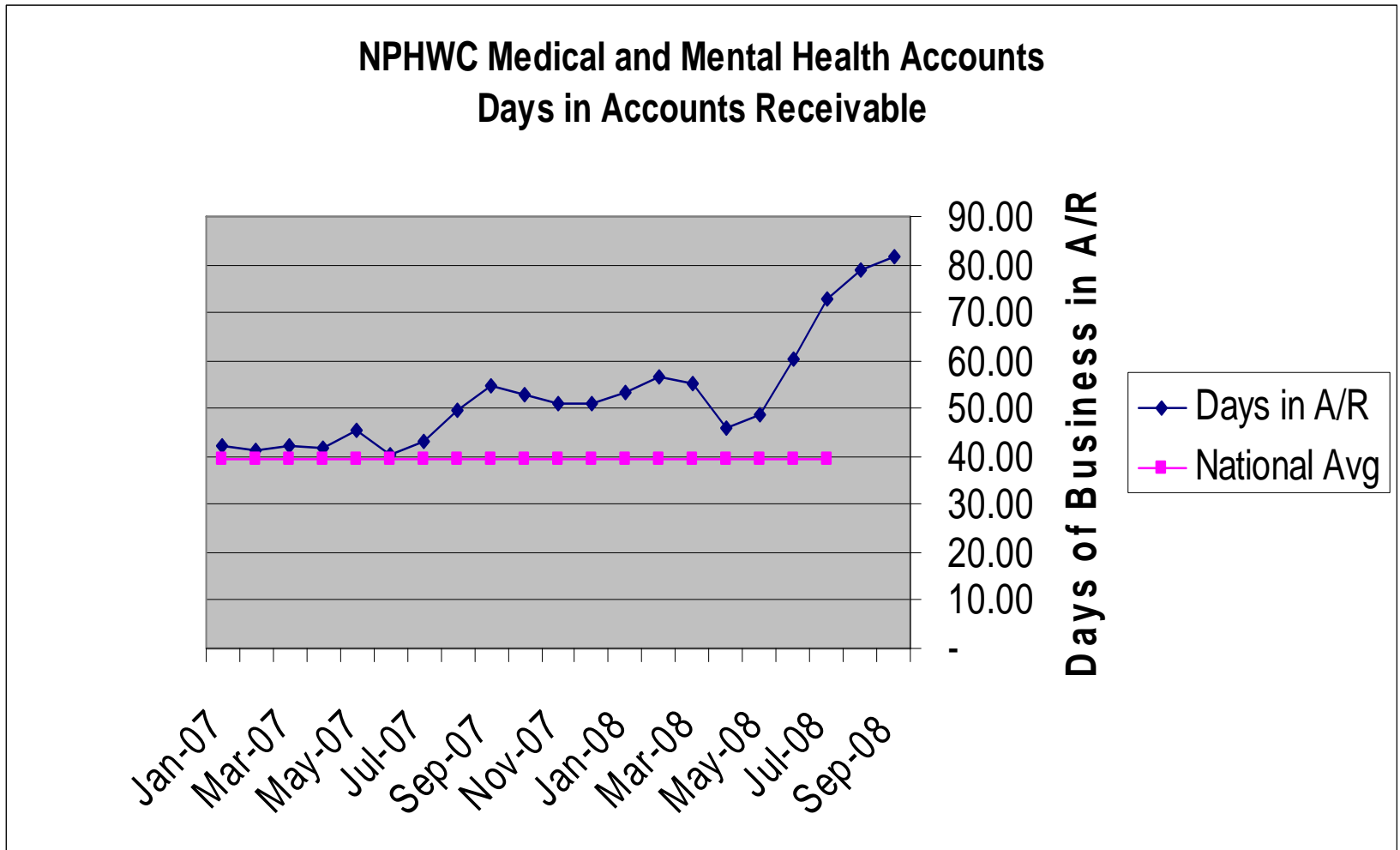
Going live
with the new
practice
management
system –
APRIL 1

NorthPoint's cash
flow experience





The Agony – Accounts
Receivable can take a real
battering



The Ecstasy – New data and new reports helping to investigate the battering those receivables are taking



AR Snapshot (as of 07/08/2008 10:01 AM)			
	Count	Amount	Percent
Outstanding insurance debits			
Claims pending	95	4,537.50	1.99%
Claims error ¹	123	16,870.20	7.39%
Claims outstanding	831	107,527.51	47.08%
With insurance balance but no claim status	68	15,170.29	6.64%
With insurance credit balance	145	-1,331.96	-0.58%
Outstanding insurance debits total	1262	142,773.54	62.51%
Outstanding self-pay debits			
Self-pay pending statement	1064	38,096.45	6.68%
Self-pay outstanding statement	1151	67,718.38	9.65%
With self-pay credit balance	215	-3,577.82	-1.57%
Outstanding self-pay debits total	2430	102,237.01	44.76%
Outstanding debits (Insurance + Self-pay)²	2656	245,010.55	107.27%
Undistributed credits		16,603.32	7.27%
AR (Outstanding debits - undistributed credits)		228,407.23	100.00%
AR Snapshot for Locations Show all locations			
⊕ Location: NGH LOCATION A			

**% of Total
AR owed by
insurance**

Pre AR Snapshot (as of 11/17/2006 1:14 AM)

	Count	Amount	Ratio to AR
Pre AR			
Charges in charge review ³	76	20,812.70	
Pre AR total	76	20,812.70	9.11%
Pre AR + AR		249,219.93	

Pre AR Snapshot for Locations [Show all locations](#)⊕ **Location:** NGH LOCATION A**Charge Review Detail by Rules ([Back](#))**

	Count	Amount	Percent
1 - DEFAULT SERVICE DATE CANNOT BE IN THE FUTURE	1	162.68	2.75%
2 - PROCEDURE SERVICE DATE CANNOT BE IN THE FUTURE	1	162.68	2.75%
33 - DIAGNOSIS MUST BE ENTERED	5	393.76	6.65%
53 - DEPT OF DEFAULT SVC PROV MUST MATCH DEPT OF CHARGE	7	71.53	1.21%
58 - GENERIC PENDED CHARGES {BE}	1	63.00	1.06%
72 - DEPT OF BILLING PROVIDER MUST MATCH THE DEPARTMENT OF A CHARGE	114	3,775.66	63.80%
73 - REQUIRE ENCOUNTER SPECIALTY	109	4,067.94	68.74%
86 - DEPT OF PROCEDURE SVC PROV MUST MATCH DEPT OF CHARGE	7	71.53	1.21%
100214 - MODEL AR CLINICAL CHARGE SOURCE(BE)	25	1,239.96	20.95%
Unknown	4	273.90	4.63%

Lessons Learned

Hardware & technology

- Budget enough dollars for installation of computers into rooms
- Set up a test exam room with equipment and turn staff loose on it
- Printers – what kind, how many, where
- Connectivity for web based programs

Lessons Learned

Interfaces

- Keep to a minimum
- Communicate clear expectations on who is to do what, when and where

Lessons Learned

Security/HIPAA

- Where are computers/printers located
- What are your time-outs
- Audit trails of users accessing the system
- Log-on ID's and passwords

Lessons Learned

Report development

- Start early
- Need an experienced report writer or report analyst
- Data is changing
- Network with other users and find out what is working for them

Lessons Learned

Education & Training

- Staff need basic computer skills – typing, Windows, keyboarding
- Site visits and shadowing other clinics with the same software is helpful
- Set up a training center room

Lessons Learned

Build and Test cycles

- Builds are complex, perhaps much more complex than previous systems
- Complete thorough testing with all kinds of patient permutations – involve your staff
- Testing does not insure implementation
- Testing does not insure smooth sailing in a real environment

EMR Implementation

Perhaps not the stuff of Hollywood

But it will still be an adventure for clinics going through it and beyond.

