

The Future is Now Physician Centric EHR

Mark R. Anderson, FHIMSS, CPHIMS
CEO of AC Group, Inc.

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Healthcare IT Futurist



- CEO of AC Group
 - National Speaker on EHR > 800 sessions since 2001
 - Semi annual report on Vendor product functionality and company viability
- 36+ Years In Healthcare IT
 - CIO Position at Three Multi Facility Regional IDN's
 - Installed over \$1B in technologies since 1972
 - Provided EHR information to over 25,000 Physicians
 - Over 400 EHR Search and Selection Projects and 12 community HIE projects.
 - Former CIO of a 2,300+ physician (500+ Practices) IPA

The Problem Today

- Referral tracking is paper based
- Patient's must register each time they see a new Physician
- Patients must provide each provider duplicate information:
 - Social History, Medical History, Family History
 - What Medications are you on?
- Physicians do not have adequate and timely information about the patient

What the community needs is a new way of connecting and sharing timely patient information.

**EHR
Information
Overload**

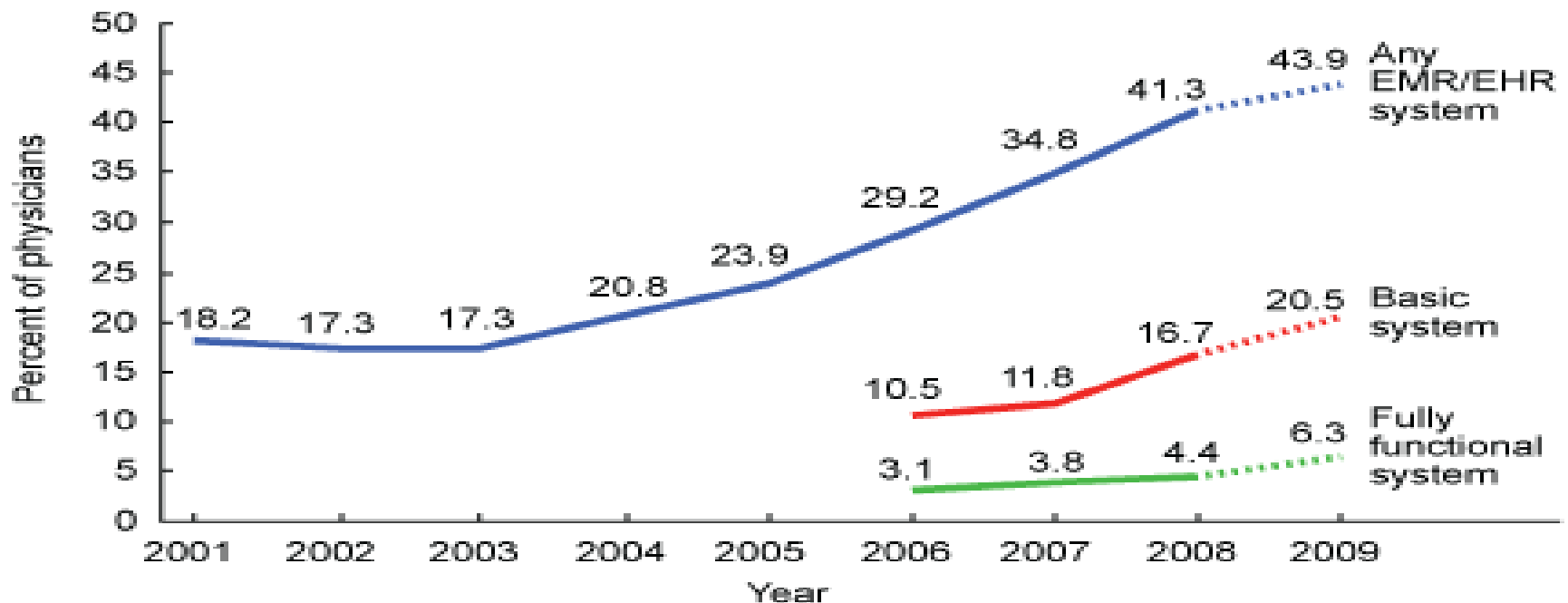




Electronic Health Record (EHR) Marketplace

Why are Practices not using what they Purchased?

Figure. Percentage of office-based physicians using electronic medical records/electronic health records (EMRs/EHRs): United States, 2001–2008 and preliminary 2009



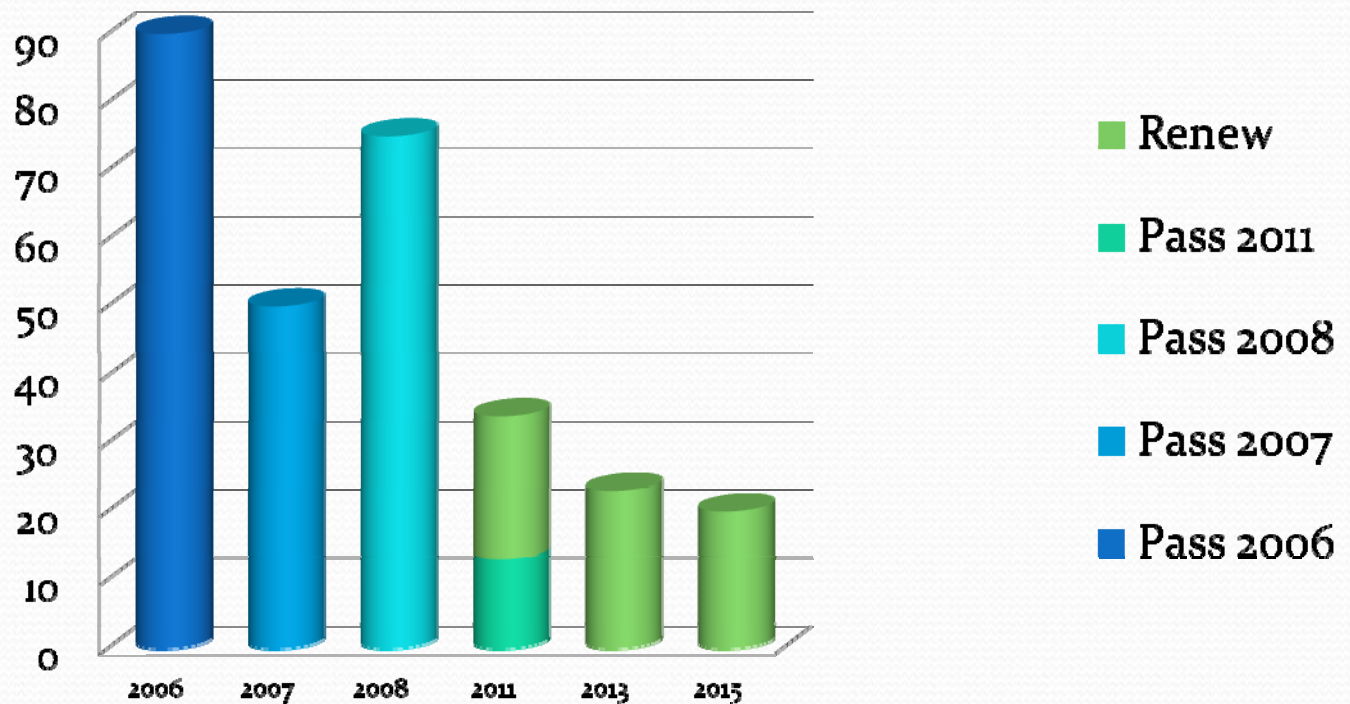
NOTES: Any EMR/EHR is a medical or health record system that is either all or partially electronic (excluding systems solely for billing). The 2009 data are preliminary estimates (as shown on dashed lines), based only on the mail survey. Estimates of basic and fully functional systems prior to 2006 could not be computed because some items were not collected in the survey. Starting in 2007, the skip pattern after the all or partial EMR/EHR systems question was removed. Includes nonfederal, office-based physicians. Excludes radiologists, anesthesiologists, and pathologists.
SOURCE: CDC/NCHS, National Ambulatory Medical Care Survey.

So why are physicians not embracing EHR?

- 43% have some type of EHR in their Practice, but less than 7% fully use the product
- EHRs cost too much
- EHRs will slow me down
- EHRs have failed in other communities
- EHRs make me change the way I practice Medicine
- EHRs make me change the way I interact with my patients
- EHRs = less patients
- EHRs make the provider a “data entry clerk”

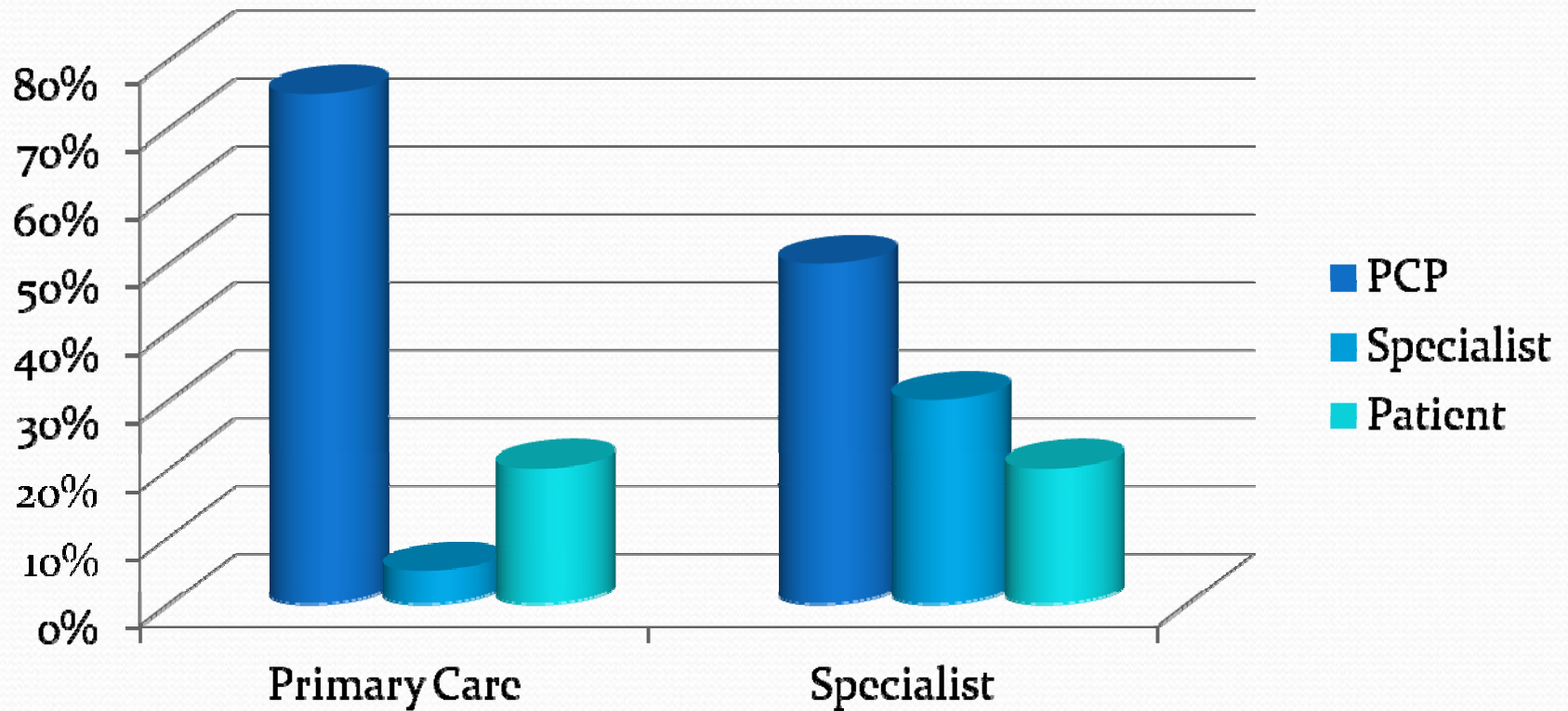
CCHIT Certified EHR Vendors

Certification is good for 2 years – but!!!!



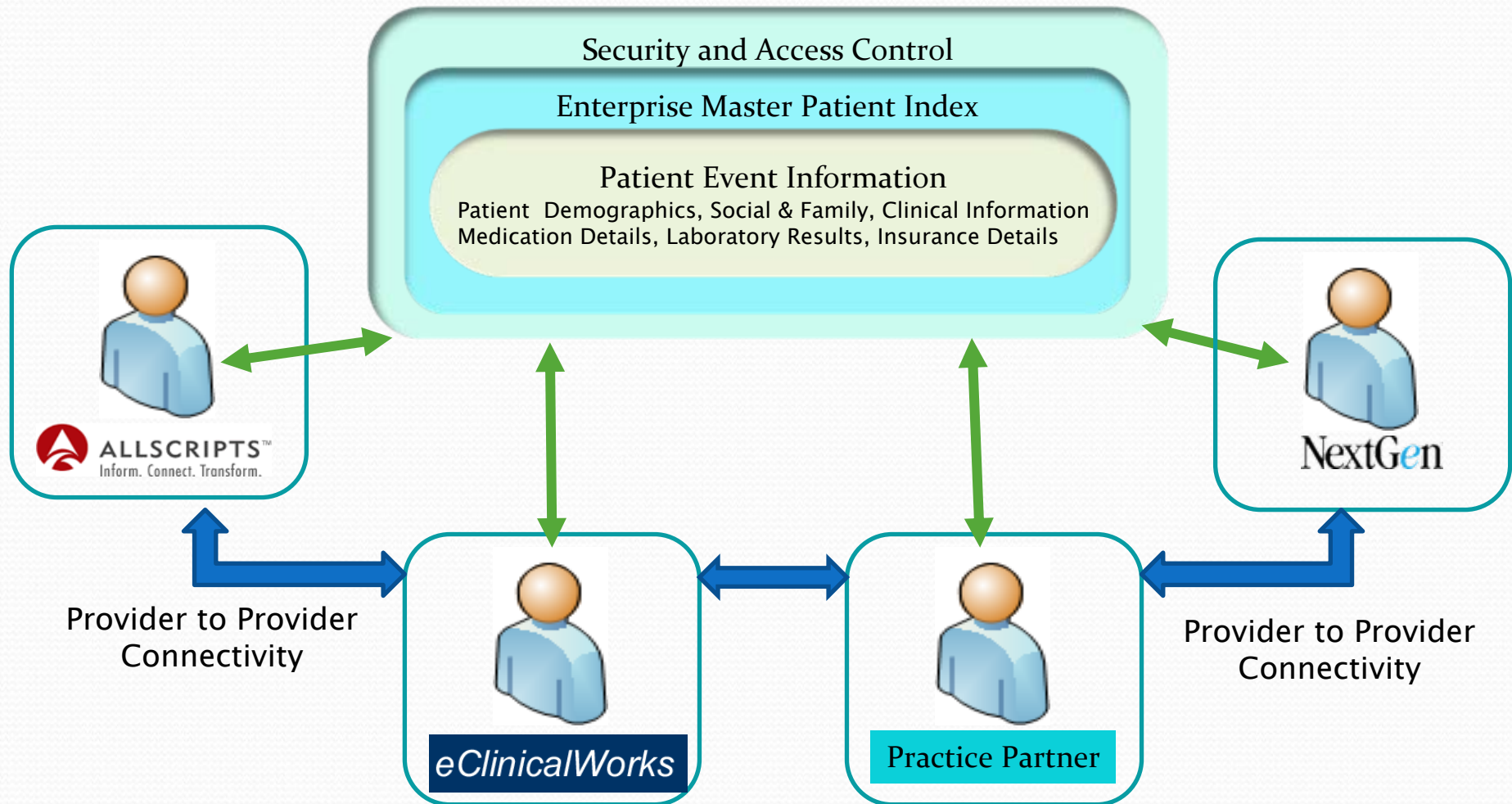
As of March 1, 2010, only 13 EHR products have been 2011 CCHIT Certification

Source of Practice Clinical Data

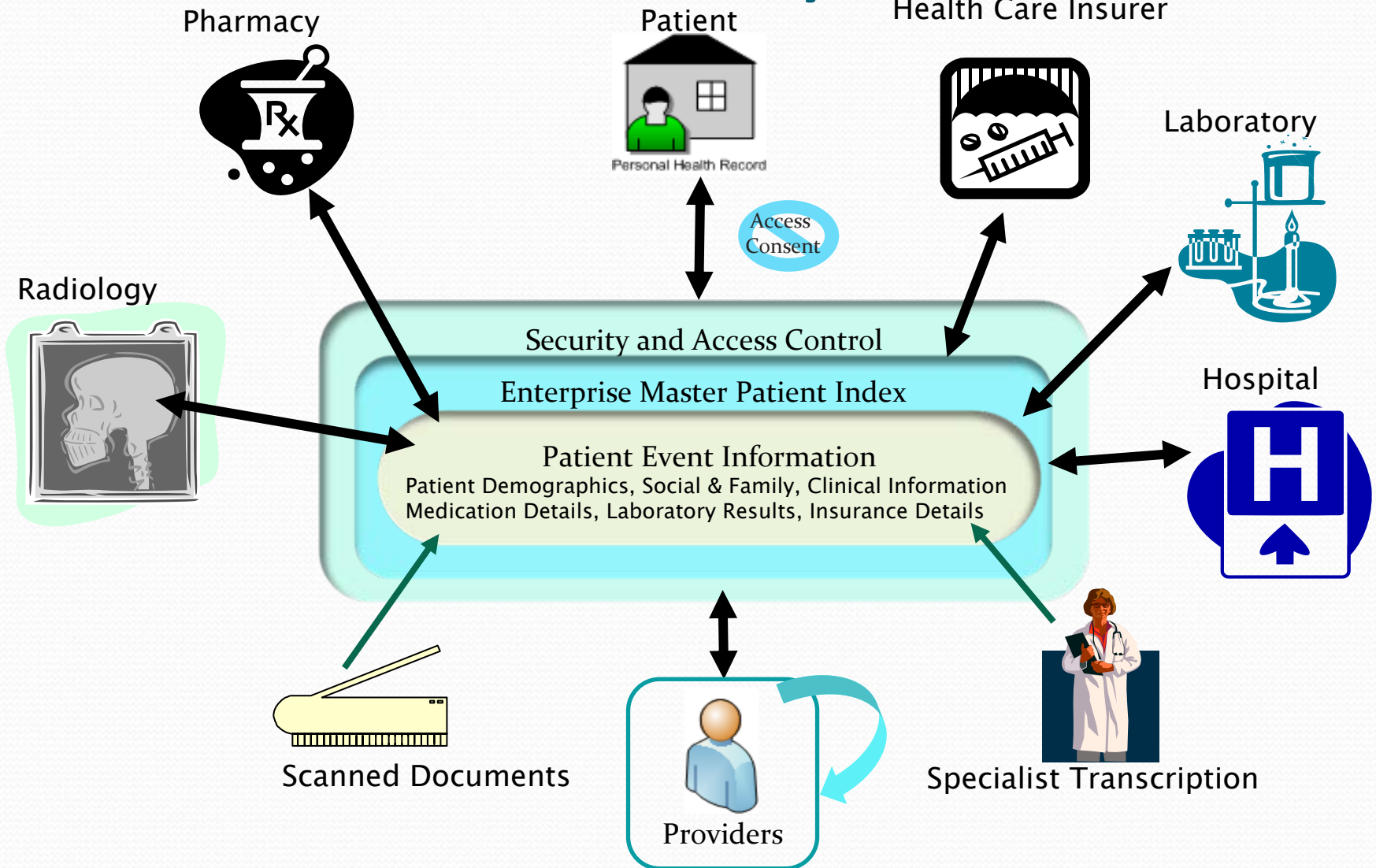



70% of Specialist data comes from PCP and Patient

Connecting the Providers



Community HIE



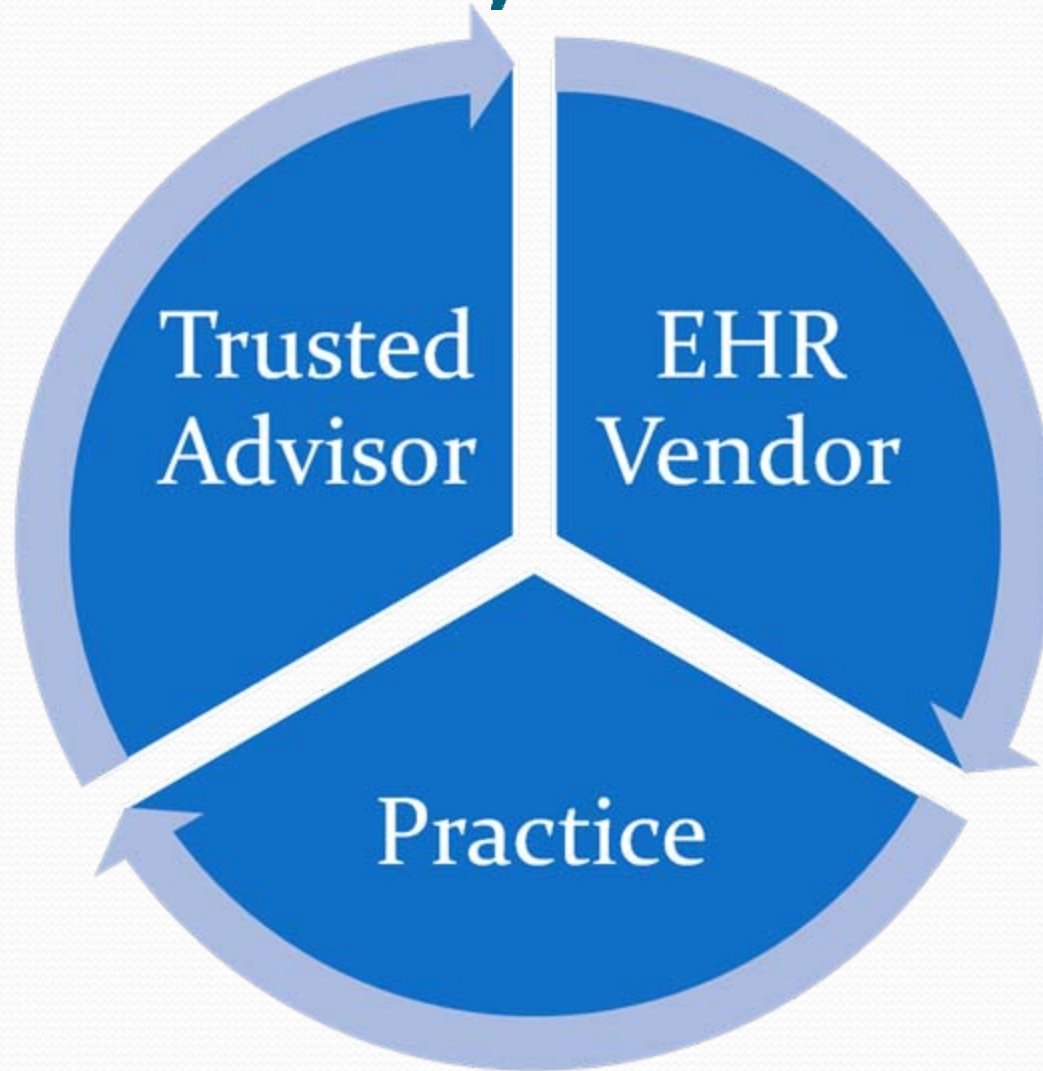


What do Physicians need
to do to begin preparing
for EHR?

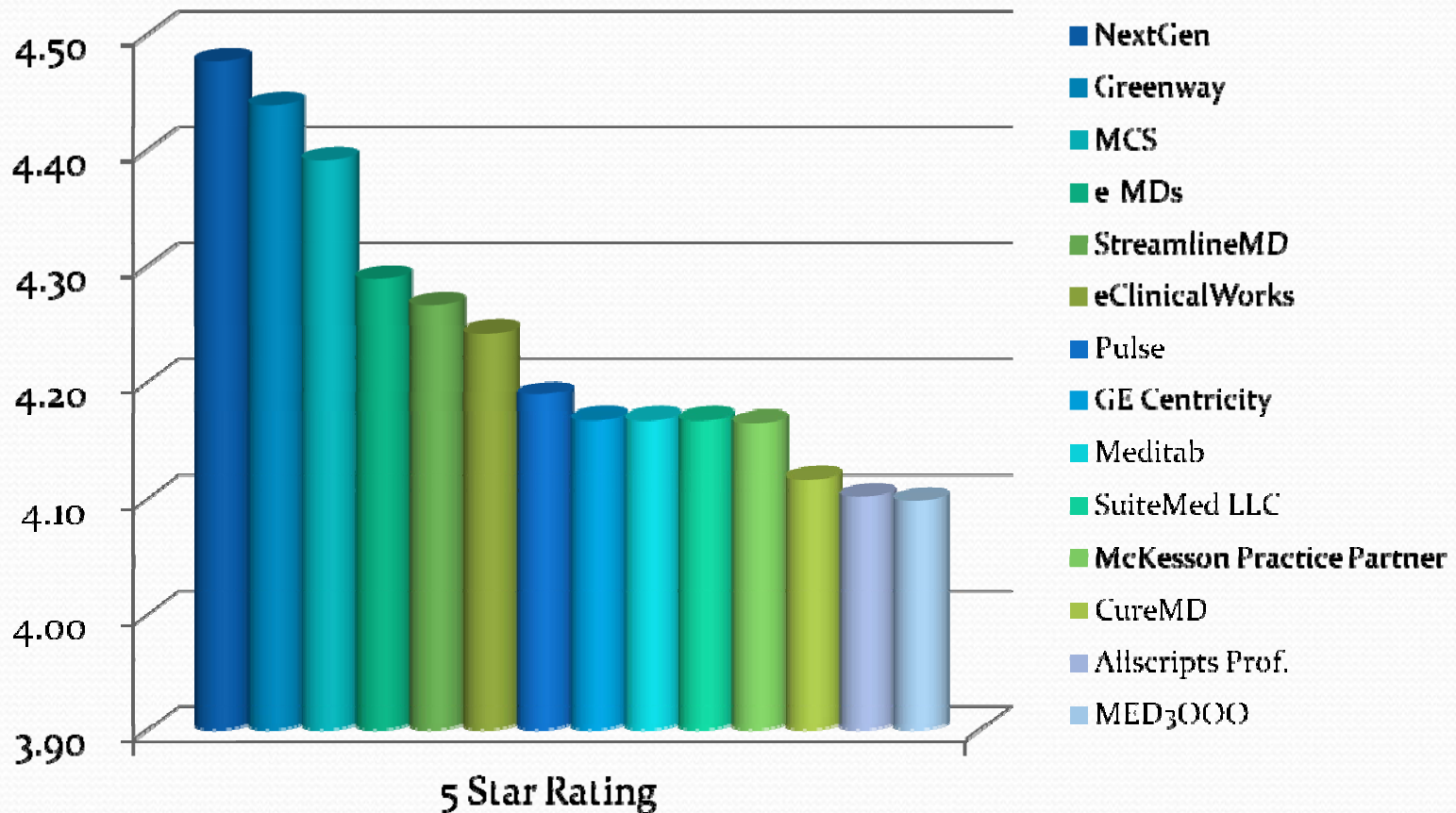
How to Succeed

- Locate a “Trusted Advisor”
- Do your research on usability
- Partner with local IPAs and MSOs
- Partner with Hospitals
- Partner with local HIEs
- Partner with State RECs
- Don’t buy “Technology”
- Don’t try to make a decision on your own
- Don’t always believe what the vendors tell you

Three way interaction



Top EHR vendors for Small Practices



Functionality, Company Viability, Implementation, Training, Client Base, End-User Satisfaction, Pricing, and Contracting

Take Home Message

- EHRs Can Improve Patient Service and Provide Financial Benefits.
- Physicians need help
- Physicians need a “trusted advisor”
- EHR Implementation is a “Bet the Practice” Proposition That Requires Adequate Resources and Investments to Achieve Success.
- Don't try to implement an EHR on your own! 😊



For More Information

Mark R. Anderson, FHIMSS, CPHIMS

CEO and Healthcare Futurist

AC Group, Inc.

118 Lyndsey Drive

Montgomery, TX 77316

(281) 413-5572

eMail: mra@acgroup.org

Web Site: www.acgroup.org