

Premiere Issue

# Spine



B i z      B e y o n d

Summer 2008

Vol. 1; No. 1

**EMR:** The Vehicle  
for Your Medical  
Practice





**Who Should Drive?** Which physicians should use an EMR? Any new physician or new practice absolutely should because of the efficiencies that will be reaped for years. The EMR creates a synergy of medical billing, transcription, and charting solutions in one comprehensive package.

Using an EMR vs. staying with paper charts and superbills is analogous to using email vs. writing letters. Through an EMR, your practice will achieve savings in cost, time, and office space due to:

- multiple users accessing and updating data,
- instant transmission of data to colleagues, other providers, and insurers, and
- effective management of care and business processes through sophisticated reporting.

Mature practices should also convert to a paperless environment and an EMR, but with a very big caveat...

**Before You Leave on the Family Trip, Make Sure All Your Kids are in the Car.** In other words, before you "drive" your new EMR, make sure all relevant patient records have joined you, because transitioning to a paperless environment is just as important as the EMR itself. Let's say you, a spine surgeon, have 5,000 patients. Your charts and records may amount to 100,000 pages, not including film. That's a daunting amount of paper to scan and index—even more so if you have partners with their own equivalent numbers of patients and records.

It's good business to devise a strategy and cost analysis for this transition. Here are steps to consider:

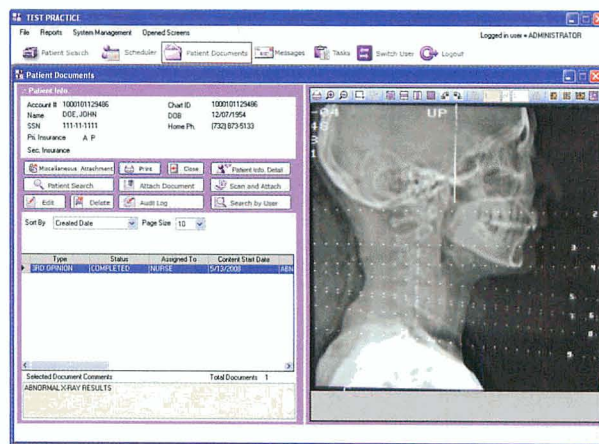
- First, and most important, you will decide to what extent you will scan only part of each patient's chart, such as the most recent encounters. Limiting the number of records to be scanned (20 pages per patient is a typical benchmark) significantly reduces expenses and facilitates access of relevant data in your new EMR system,
- Your staff will prepare the charts for scanning (taking them out of folders, removing staples, pre-scan sorting, and ultimately reinserting them into folders),
- An outside vendor (or perhaps your staff) will scan the pages,
- The vendor or staff will download the files and index them, attaching records to the appropriate patient, and
- The vendor or staff will perform quality assurance and then upload the files into the EMR.

So how much should this painstaking, critical process cost? If you're looking for an outside vendor, ask for a rate of approximately 10 cents per page. For the surgeon with 5,000 patients, opting to scan 20 pages per patient, that comes to \$10,000. (This is the rate MTBC charges, not including travel, room and board, and related expenses.)

### \$0 or \$50,000—How Much Should You Pay?

When the Ford Model T, the exemplar of affordability and dependability, debuted in 1908 it cost \$850. By 1922, Ford's improved manufacturing efficiency had brought the price to less than \$300. We see a similar pricing drop with EMR's focused on core functionality, with a major difference—the price has dropped to \$0.

Building on software platforms for both PC's and Mac's, companies like MTBC ([www.mtbc.com](http://www.mtbc.com)) have developed free EMR's with excellent performance. In the IT industry "free" can have different meanings—in MTBC's case there is no signup fee, no licensing fee, and no hosting fee. MTBC's EMR is available to all practicing physicians; support is available and free for clients of its billing service.



Another free, extremely functional EMR, from Practice Fusion ([www.practicefusion.com](http://www.practicefusion.com)) is supported by advertisers. There is a nominal support fee for this web-based software.

One of the best known affordable EMR's in the country, Amazing Charts ([www.amazingcharts.com](http://www.amazingcharts.com)) enjoys a large user base. Clients of Amazing Charts host their own annual conference to exchange practice management and IT tips and guidelines. The EMR's price begins at \$1,000.

These EMR's all deliver core functionality. Here's an easy reference list of features you should demand of any EMR:

- automated billing,
- scheduling,
- claims tracking,
- document management,
- fax functionality,
- voice recognition compatibility,
- prescription management,
- template modules, and
- electronic encounter documentation.

As with automobiles, there are “luxury” EMR’s. Prices can begin at \$50,000 or more, and typically escalate markedly with additional users. There are usually other fees for maintenance, renewal and other services.

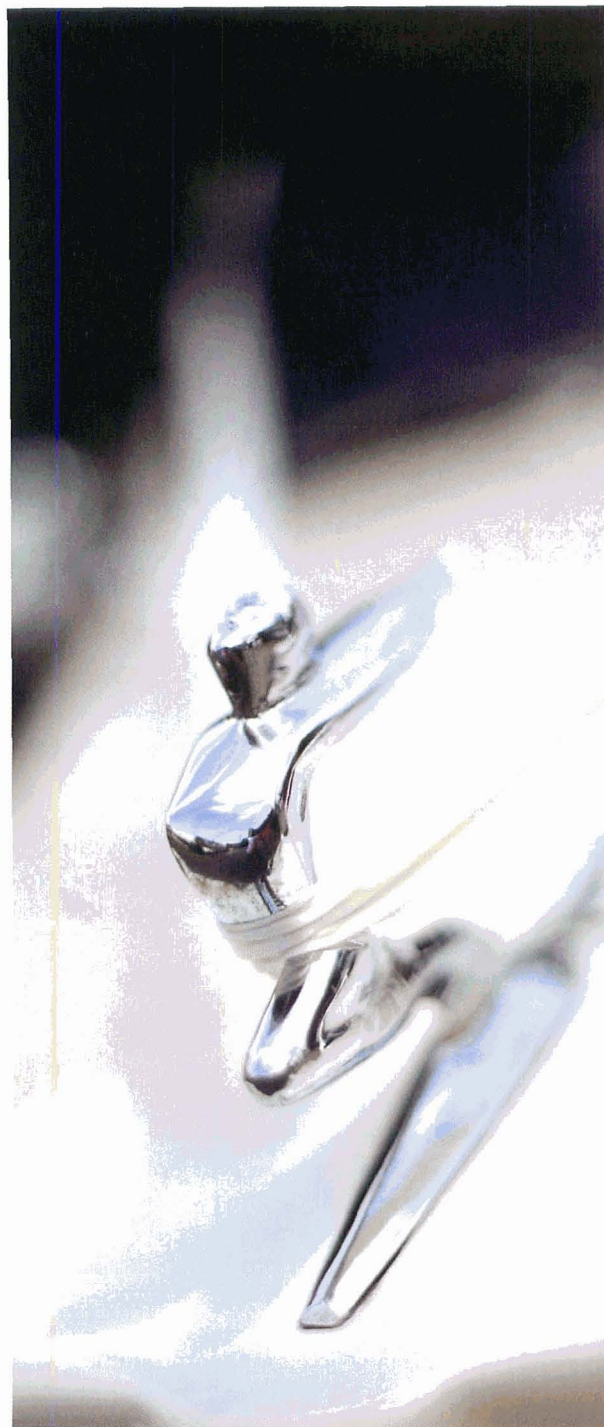
One way to assess this class of EMR’s is through the Certification Commission for Healthcare Information Technology (CCHIT, [www.cchit.org](http://www.cchit.org)), self-described as “an independent, voluntary, private-sector initiative.” Companies pay as much as \$30,000 to submit an EMR to this certification process, which addresses IT issues such as the interoperability of e-prescribing and of lab requisitions.

**A Honda or a Rolls?** The very first car you drive should not be a Rolls. The same principle applies to EMR’s. Your first EMR in private practice should be easier to use and entail less economic risk if it is damaged, like a Honda.

Many spine surgeons, during their residency or internship, will already have encountered the Rolls Royce’s of EMR’s. Such software, with elaborate features and designed for the many-user, many-specialty environment of hospitals, is likely far from ideal for a private practice. Moreover, a surgeon often interacts with the hospital’s EMR in a limited fashion, such as simply entering progress notes. The “heavy lifting” related to the EMR—updating and transmitting data such as CPT codes—is performed by the hospital’s billing department and other staff members. Consequently, many surgeons will not have been exposed to the fundamentals of data storage and retrieval. When they move into private practice, they are, therefore, ill-equipped to properly evaluate EMR’s.

As we’ve emphasized, the risk of EMR failure is real and relatively common. By observing the above principles and thinking strategically and economically about your practice, you’ll be prepared to get from Point A to Point B.

**Drive safely.**



MTBC performs revenue cycle and practice management for healthcare providers in all specialties. The standard service, billed at 4% of collections, includes a free EMR, practice management tools, financial reporting capabilities, online patient scheduling and office forms, and online access to billing and scheduling information. The premium service, billed at 5% of collections, includes full integration with third-party EMR’s, real-time eligibility verification, digital prescribing and electronic lab requisitions. To learn more about MTBC’s EMR, medical billing, scanning and indexing services, and medical transcription, visit [www.mtbc.com](http://www.mtbc.com).