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Driving Physicians' Practices towards Accelerated EMR Implementation [by Job Thomas](#)

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“Notwithstanding the incentive bait for “Meaningful Use”, and penalty threat for “Non-compliance”, has an encouraging statistics about migration from manual to digital form of healthcare practice management. But, considering the quantum of target to be reached to meet Macro EMR/EHR objectives, we are miles away from the originally conceived vision of idealizing healthcare management processes.”

There has been an unprecedented impetus on EMR/EHR system since the recent Healthcare Reforms promulgated by the Federal Government. While the decision to emphasis on EMR/EHR stems out of the overriding necessity of providing a controllable and qualitative medical care to the growing population base, the healthcare fraternity itself is going to be the beneficiary at large. Eventually efficient EMR/EHR system implementation will bring about a transformational change in capturing, processing, and collaborating clinical data for enriching quality medical care as well as efficient practice management that augment practitioners' operational efficiency and revenue maximization.

Notwithstanding the incentive bait for “Meaningful Use”, and penalty threat for “Non-compliance”, has an encouraging statistics about migration from manual to digital form of healthcare practice management. But, considering the quantum of target to be reached to meet Macro EMR/EHR objectives, we are miles away from the originally conceived vision of idealizing healthcare management processes.

In view of this prevailing scenario, physicians' practices that are apprehensive of joining the EMR/EHR bandwagon should be taken into confidence, and be familiarized with the efficacy of migrating to the digital form. The following list of potentially transformational advantages will make a world of good to dispel clouds of apprehension amongst physicians:

EMR/EHR as a means of improving Patient Care:

The ultimate goal of an EMR is to improve patient care by offering physicians and clinical staff a consolidated view of relevant patient information and enabling immediate EHR access to the data. By digitizing and making patient information available online, there are fewer paper records in circulation and, therefore, less risk of lost records and incomplete data at the point of care.

Leveraging Record Storage Facility:

EMR/EHR platforms provide unimaginable the quantum of data storage for future clinical reference and collaboration; physicians would do well to benefit from such technology installations.

Increased Physician Productivity:

Physicians can sign deficient records online “ increasing productivity while reducing record delinquencies and administrative costs associated with retrieving and processing incomplete medical records.

Enhanced Turn-Around Times:

Electronic, secure and centralized patient records result in a more efficient process for responding

to audit requests – improving turn-around times, reducing costs and minimizing the risk of audit-related penalties.

Increased Patient Throughput:

Many functions of medical record processing, such as assembly, filing and manual retrieval, can be eliminated – improving overall processing time and patient throughput.

Improved Revenue Cycle:

A consolidated electronic medical record minimizes the time necessary to collect patient information after discharge and enables bills to be dropped faster – improving accounts receivable (AR) days and discharged-not-final-billed (DNFB) accounts.

Centralized Coding:

Digitizing patient records upon discharge enables healthcare providers to leverage offsite coders – centralizing coding functions for multi-facility organizations and further reducing the revenue cycle.

As practitioners embark on these transformational practices, they are bound to encounter the decision on choosing apt EMR/EHR installations from amongst innumerable available in the market. And, with their limited to core-medical practices, such decisions are not going to be easy and can sometimes be repenting. But, with competent service providers at their disposal, practitioners can easily off-load such risky decisions to the providers who possess the requisite credentials.

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The Meaningful Use mandate, which is part of the American Reinvestment and Recovery Act of 2009 (ARRA)

The requirement to adopt ICD-10-CM [International Classification of Diseases, Clinical Modification/Procedure Coding System (ICD-10)]

HIPAA 5010 standards (Health Insurance Portability and Accountability Act of 1996)

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