

Where the Rubber Meets the Road

Perhaps you have heard some of the nightmare stories about EMR implementations. You have certainly heard about the disasters and train wrecks. It seems the negative gets the most press.

In reality, however, thousands of EMR installations have been successful and are providing increased productivity and revenue to physicians' practices. So it is of critical importance that we identify the necessary factors for a successful EMR implementation.

Obviously, each EMR vendor will promise their product is the best solution and their team is the best. But if we take a step backward, we can identify the characteristics of a successful and effective EMR implementation.

- 1. Speed** – If you are constantly waiting for your vendors' response, or for an answer to a configuration question, you cannot be productive. Therefore it is critical that both your vendor, and their product, can move quickly. However, keep in mind that during an implementation, your vendor will also need your attention – Vendors can only move as quickly as your participation allows. So although up front some time is required, your continuous involvement will ensure that the implementation will move along quickly.
- 2. Quality** – Every EMR requires considerable customization to effectively serve the specific needs of each practice. Because each office sees “quality” and “need-to-haves” differently, you will need to articulate clearly to your vendor what is critical to you and your practice. Frequently physicians become frustrated when they don't like how the EMR operates, but do not clearly define exactly what has to be changed to make it acceptable for them. The better you can communicate your needs to your vendor, the higher the quality of the customized result.
- 3. Cost** – Often physicians are frustrated because the price quote they receive differs from the actual cost of implementation. Although vendors can do their best to estimate what an implementation will cost, there are too many variables (Scope Creep) at a practice that may affect the actual price. Actual implementation costs are most often affected by unforeseen complications such as faulty or imperfect wiring, networking gear, internet connections, and the quality of existing computers and their software and security configurations. Once a vendor gets onsite, the true nature and scope of the needed customization will become clear, and is often more extensive than the physician communicated or understood. Vendors also must estimate training costs, but more extended training may be necessary based on the skills and participation of those in the office. Although costs are a painful reality, it is important that a physician focus more on the return than the cost. A truly effective EMR will not cost you anything in the long run – by lowering the cost per encounter, and increasing your revenue per encounter your profitability should improve. [See Sidebar to calculate how much you can save]
- 4. Participation** – The real implementation killer, unfortunately, is generally the office's unwillingness to participate. If anyone in a practice actively or passively refuses to participate in the EMR implementation, it is quite possible that the entire EMR implementation is destined to failure. Very often, those who are afraid of change and resistant to “fix what isn't broken” can be a hindrance in the implementation. This feeling can be avoided but you must identify the “non-believers” and work with them through their fears. They simply need to understand how this implementation will make their jobs easier!

Critical Success Factors

1. **Attitude** – Like all things in life, a positive attitude is required for success. Check in regularly with your staff and your vendor during the implementation process. A great question is to ask them to rate the progress on a scale of 1 to 10. If your vendor says 10 and your staff says 3, there is a breakdown in the process, and an issue that needs to be addressed.
2. **Implementation Team** – Your vendor is only as good as their most recent implementation experiences. Ask your vendor to provide you a few names of physicians who are currently in the implementation process. Call them, and ask how well the implementation is going. Not all implementation teams are created equal. You may choose to postpone your implementation until your chosen vendor, and the best team is available.
3. **Technical Competence** – Each implementation team will have technical competence that varies by experience and talent. There will likely be a mix of novice and experts on your team. This is normal; all vendors are continually adding new quality people to be trained for successful implementations. If a team member is causing concern and you feel the implementation is in jeopardy, raise your concerns to the vendors' organization.
4. **Planning and Project Management** – Coordination, communication, and performance all must be actively managed throughout the implementation project. The expense of project management may seem unnecessary, but having a competent project manager will contribute more to your success than nearly anything else. Without a competent project manager overseeing all aspects of the implementation, your transition is likely to be more complicated, unnecessarily time consuming and certainly more costly.

Off the Rails? Indications of an Implementation Gone Wrong -

1. **Ask your Staff** – Your staff will be the ones using this solution every day - ask them how they think things are going. If you hear low scores and low confidence, dig deeper. If the problem lies in fear or misunderstanding, it is important to reiterate the purpose of the implementation – to make the office more productive, and their work easier and less time consuming. If it is simply not working, the vendor should be called in to discuss solutions.
2. **No Visible Progress on the Priorities** – Insist on weekly project meetings. Issues should be discussed and agreements made on what is to be accomplished in the ensuing week. Careful notes of agreed upon deliverables should be taken and reviewed each week. If critical things slip more than 2 or 3 weeks, your concern is merited.
3. **Accountability and Attention** – It is vital that a project manager or team leader be identified. This person is one you can call at a moments notice to discuss concerns, issues, or progress. A qualified project manager will communicate with you promptly and courteously as to status and current progress. If no one person is willing to take full accountability for your project, your project is likely “off the rails”...or soon will be.

How do you define success? Be SMART and define your measures.

1. **Specific** – Be specific about your measure and define it clearly. Example: “We need to chart and bill all encounters in 5 minutes or less.”
2. **Measurable** – Have the ability to measure the quantifiable value of each measure. Example: “Today we did 45 encounters in 7hrs and 45 minutes, that’s 10 minutes per encounter.”

3. **Attainable** – Each measure must be attainable, setting expectations that cannot be met is counter-productive. Be willing to set aggressive goals - but they must also be attainable. Example: “5 minute averages is reasonable but we should expect 10 minutes on comprehensive physicals.”
4. **Reproducible** – One shot goals are often achievable in special conditions, but long term goals must be something you can reproduce with good results over the long term. Example: “We can easily achieve 5 minute encounters on Wednesdays before 8am, but on Fridays the system slows to about 11 minutes per encounter.”
5. **Timely** – Make sure each goal is time bound. Delays will occur, and should be expected to a point; but it is important to identify a desired goal time, as well as a deadline which must be met or the measure is disqualified. Example “We have been working on achieving 5 minute encounter averages for about 6 months now, how much longer will this take?”

In summary, an implementation is a partnership between your team (staff) and your vendor’s team.

Your vendor needs you for their success, and you need them to successfully implement your EMR. Be flexible and understanding throughout the process. Your vendor cannot perform their desired function if your office resents them being there; by the same token your vendor needs to be sensitive to the ongoing business of the practice, and the discomfort a complete change of procedure can bring. As a team, you and your vendor are asking an entire operation to change their habits and mindset – a challenge in any environment. But with partnership and teamwork, your EMR implementation will be successful. And that is good for everyone.

Determining Savings - Average Cost per Encounter / Average Revenue per Encounter.

Establish a Base-Line - Ascertain Total Gross Revenue, Total Expenses and Total Claims filed for the previous year.

Divide Expenses by Encounters to determine Average Cost per Encounter.

Divide Revenue by Encounters to determine Average Revenue per Encounter.

These numbers will vary greatly from practice to practice. It is very important is to determine your baseline numbers, then track your progress weekly to measure your success.

About the Author

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