

## EXPERTS: DIGITAL MEDICAL RECORDS ARE IN YOUR FUTURE

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**WINCHESTER** — Electronic health records (EHR) are coming soon to hospitals and physicians' offices near you, and Valley Health doctors and administrators got a primer on the hows and whys of the technological leap Saturday.

About 25 people affiliated with Valley Health system attended the second Winchester Medical Center (WMC) Medical Staff Physician Conference on Saturday at the George Washington Hotel. The half-day event was sponsored by the Winchester Medical Center Foundation and Project HOPE, the Millwood-based nonprofit dedicated to improving the health of people around the world.

The focus of the conference was coordination of patient care, and two of the four presentations dealt with the use of EHRs.

"Health care has been among the laggards in terms of adopting electronic records," Mark Merrill, Valley Health's president and CEO and WMC's president, said after the conference. "It's exciting that we're starting to catch up and advance in this domain."

The technological advancement didn't come without prodding from the federal government.

Catherine DesRoches, senior scientist for Mathematica Policy Research, reminded the attendees that the Health Information Technology for Economic and Clinical Health



*Catherine DesRoches, senior scientist for Mathematica Policy Research, talks about electronic health records at the Winchester Medical Center Medical Staff Physician Conference on Saturday. Valley Health, WMC's parent company, will go digital on Tuesday, starting with its doctors offices. The rest of Valley Health's operations will begin using electronic health records on May 30. Eventually, all medical records will be digital, panelists said.*



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(HITECH) Act, enacted as part of the American Recovery and Reinvestment Act of 2009, pushed attendees toward EHR implementation.

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The act, signed into law by President Barack Obama, provided up to \$44,000 per physician in incentives over five years to support the transition from paper to digital records. Those who haven't made the switch by 2015 face reduced reimbursements for services provided to Medicare patients.

HITECH essentially forced large health care systems to embrace digital records. Though Merrill said Valley Health will spend "millions of dollars" more switching to EpicCare's EHR system than it received in incentives, it couldn't afford the Medicare reimbursement penalties.

"I don't think it's going to pay for itself in the long run," he said.

The move to computerized health records was promoted by President George W. Bush in his 2004 State of the Union address. He called for all patient records to be electronic within 10 years to help "avoid dangerous medical mistakes, reduce costs, and improve care" and three months later launched a federal effort to promote EHRs, but he did not provide any money for the transition or penalties for noncompliance.

The health care industry as a whole won't meet that target date, but Valley Health will.

The nonprofit system's transition to EpicCare starts Tuesday, when its physicians offices start using it. Merrill said that part of its operations will be stabilized, and the rest of its operations will begin using EHRs on May 30.

Physicians with privileges at Valley Health hospitals also are required to make the transition, he said.

The digital patient records will be shareable with other hospital systems that use EpicCare. Merrill said that network includes the Inova Health System, Sentara Healthcare, and both the University of Virginia and West Virginia University health care systems.

Julia Adler-Milstein, an assistant professor at the University of Michigan's School of Information, studied the five-year EHR-transition cost to 83 physician practices in three Massachusetts communities that were part of a pilot program from 2005 to 2008.

Twenty-seven percent of the practices at least broke even, she determined, and more than half would have broken even had they captured all of the incentive payments available to them. Practices with six or more doctors were more apt to make money, while those with one to two physicians were more likely to lose money.

However, there were small practices that found ways to see a return on their investment.

The successful practices, Adler-Milstein learned, reduced the amount they spent on dictation and/or billing services, and some were able to decrease their support staff or even the number of physicians they employed. Some increased their billings either with proper coding or by being able to see more patients.

“The people who loved it tended to be the people who love technology,” she said, “and they really worked hard to find ways to make it work for them.”

The willingness to embrace technology and comfort level with it, DesRoches said, generally led to younger doctors being more enthusiastic about EHRs than older ones, but there were exceptions.

“I had older physicians who said they learned to use EHRs because they were competitive by nature and didn’t want the young doctors knowing something they didn’t,” she said.

Eventually, both presenters agreed, all health records will be digital because medical students will have been trained with them and will demand the technology.

In theory, DesRoches said, EHRs should result in cost savings, but that remains to be seen. If they do, then the question is who sees the savings.

“It should reduce the payers costs. That should reduce costs for the public,” she said. “But how long will that take? We don’t know.”

Added Adler-Milstein: “We’re still in this messy middle stage.”

Electronic records, however, have the potential to improve care in multiple ways, from warning a physician that a new drug he’s prescribing should not be used with a medication the patient is on to reminding them that it’s time for a patient to have a preventative medical procedure.

“There’s so much information for people to keep track of now,” Merrill said, “and this system will be a tool to help track that.”

Area residents will be encouraged to log into the system and enter their pertinent health information via the MyChart program, he said. The patient portal allows people log their allergies, medication use and health history for doctors to access.

Dr. William Shabb, one of the staff physicians who helped plan the conference agenda, said Project HOPE’s assistance with the event helped bring national-caliber speakers to Winchester.

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