

ELECTRONIC HEALTH RECORDS IMPLEMENTATION

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Community Health Center- CHC Federal Qualified Health Centers-FQHC

- ❑ Largest Delivery System in US – 26 million served
- ❑ Affordable Care Act - 40 Million ?
- ❑ Approximately 1.25 million yearly visits in Connecticut

Electronic Medical Records

- ❑ Experience = 4 years +
- ❑ Paper to Electronic
- ❑ Efficiency – Quality- Clinical Reasons
- ❑ Billing System/Clinical Management
- ❑ Selected Intergy by SAGE

Considerations

- Clinical Needs
- Disease Management
- Local control of Server
- Training
- Upgrades
- IT Infrastructure

Implementation-Suggestions

- ❑ Convert entire practice
- ❑ Expect 15-20% drop in productivity
- ❑ Training – never enough
- ❑ Changes in workflow, position redesign.
- ❑ Review before and after coding.

Medical Records

- Work change – Workflow impact
- Scanning
- Billing
- Point of Service – close the transaction
- Day of Service Submission

Paper Records

- ❑ Only for historical record
- ❑ Training when system fails
- ❑ Upgrades are not easy

Planning

- 6 months
- Implementation
- Physician Champion (s)
- Troubleshoot