



Healthcare IT News

PHYSICIAN PRACTICES & AMBULATORY CARE

NEWSBRIEFS

ILLINOIS CLINICS TO INSTALL ELECTRONIC PATIENT KIOSKS

The Carle Clinic Association, one of the largest private physician groups in the United States, plans to implement an electronic kiosk-based patient check-in program at its 11 branches in Central Illinois. The clinics will use the My Patient Passport ExpressT kiosk from Mequon, Wis.-based D2 Sales. The association is made up of more than 300 physicians practicing in more than 50 specialties and subspecialties. All clinic locations are now using an integrated electronic medical record system, with portable tablets in patient care rooms.

TENN. DOCS JOIN FREE E-PRESCRIBING PILOT PROGRAM

Rural physician practices in Tennessee are receiving free electronic prescribing tools thanks to a pilot program launched in March by the Bureau of TennCare and Shared Health, the state's largest public/private health information exchange. TennCare is the state's managed-care Medicaid program. Fifty practices across 13 counties are participating in the e-prescribing pilot program. The program provides physicians with free equipment, software, Internet access, training and support.

IOWA PHYSICIANS CHOOSE ELECTRONIC HEALTH RECORD

MercyCare Community Physicians of Cedar Rapids, Iowa, plans to implement an integrated electronic health record and practice management system to support 74 providers at 15 clinical sites. The practice will also provide EHR access to an additional 20 physicians at other sites through their managed services organization. MercyCare Community Physicians is associated with Mercy Medical Center, a 445-bed regional hospital. The implementation will include bidirectional interfaces between the practice and the hospital's information system.

ACP WILL USE GRANTS TO DEVELOP PHYSICIAN TOOLS

The United Health Foundation and drug manufacturer Pfizer have each awarded \$50,000 unrestricted grants to the American College of Physicians. ACP officials say they will use the money to develop physician IT tools in support of the "medical home" model. "The grants will help ACP to continue designing and implementing resources that help internists assess potential quality gaps and strengthen their performance on nationally accepted quality measures," said John Tooker, MD, ACP's executive vice president and CEO.

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EMR vendors will offer "PHYSICIAN-FRIENDLY CONTRACTS" to OSMA members.
 - Craig Anderson, MD

Reduced EMR risk for Ohio docs

BY RICHARD PIZZI, Associate Editor
 COLUMBUS, OH – The Ohio State Medical Association is launching a "Standards of Excellence" program to help reduce the financial risk for physicians who wish to adopt an electronic medical record system for their practices.

The Standards of Excellence Program, which is available exclusively to OSMA members, will identify vendors who have

voluntarily agreed to include "physician-friendly" terms in their contracts with medical practices, including preferred pricing.

The OSMA – which represents more than 20,000 Ohio physicians – claims the program is the first of its kind in the United States. The association worked with the Atlanta-based Coker Group, a healthcare consulting firm, to identify terms

and conditions that would help protect physicians' rights in the EMR contracting process.

"We are very pleased to be able to offer this ground-breaking program to our members," said Craig W. Anderson, MD, president of the OSMA. "Not only will members have access to EMR vendors that have physician-friendly contracts, but these vendors also have

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If leaders "manage change" well, physicians will adapt to EMRs

Florida academic practice takes pens from docs' hands.

BY RICHARD PIZZI, Associate Editor
 TAMPA, FL – As many CIOs and practice managers know, training physicians at a large group practice to accept and use electronic medical records can be a daunting experience. But the challenge can be made easier, says a medical school administrator.

Stephen Klasko, MD, the dean of the University of South Florida College of Medicine and vice president of USF Health, says that understanding physician biases is critical to transforming a paper-based practice and building a new business environment.

"When physicians encounter conflict, they usually become either hyper-competitive or



William Marshall, MD, and Valeria Williams, RN, review an electronic health record online at the University of South Florida's South Tampa Center for Advanced Healthcare.

try to avoid the situation," said Klasko. "We wanted to shift our physicians toward collaboration and accommodation."

Klasko described how USF's research into physician biases

helped design a high-tech academic group practice built around an EMR system.

The USF Physicians Group, a multi-specialty group practice, **CHANGE** see page 18

Online network sends instant drug alerts to U.S. physicians

BY RICHARD PIZZI, Associate Editor
 SAN FRANCISCO – A new network to deliver drug safety alerts online to U.S. physicians was launched in March, replacing a decades-old system based upon paper and U.S. mail.

The Health Care Notification Network, or HCNN, is the result of a three-year effort and collaboration between U.S. medical society leaders, liability carriers, health plans, consumer advocacy

groups, government leaders and industry, including pharmaceutical companies.

The network is free to all licensed U.S. physicians, and is used solely for patient safety alerts, not for advertising or promotion. The HCNN will also be available for rapid communication with physicians in the event of emergency public health or bio-terror events.

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Diagnostic software aids rural providers

BY MOLLY MERRILL, Associate Editor
 AUGUSTA, ME – A physician in rural Maine has begun to use a software program that provides visual images of diseases to train residents in diagnosing dermatology cases.

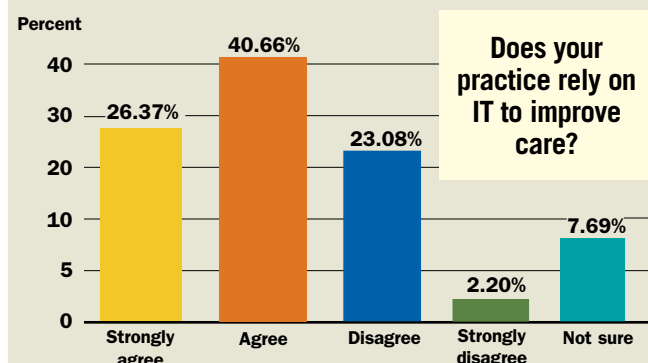
Logical Images, which makes the software – called VisualDx – says the Maine provider illustrates a booming demand among rural physicians everywhere for this type of software.

Logical Images has experienced a 42 percent growth in rural/family physicians using visual diagnostic programs over the last 36 months, according to company executives.

Daniel Onion, MD, is the faculty member in charge

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Top Performing Practices and Healthcare IT



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committed to offering our members discounts on their EMR products. We are very appreciative of the fact that this group of vendors are willing to work with us to encourage the use of EMRs in Ohio."

Anderson said the new program would give practices more confidence in their decision to purchase an EMR.

Jeffery Daigrepoint of the Coker

Group said 30 percent of the firm's projects are spent reinvigorating or removing failed EMR systems. He believes the Ohio program would help avert much of the risk associated with some of these failures.

"It says a lot about the vendors who are willing to step up and participate in a program like this," Daigrepoint said. "It truly helps level the playing field for physicians."

Anderson and Daigrepoint both warned that, regardless of the new

program's importance, Ohio physicians should still review each EMR contract thoroughly, as it may need to include practice-specific objectives that would be impossible to cover in a standard contract.

To help with this, the Coker Group is providing an initial contract and quote validation review at no charge to OSMA members.

"I would like to commend the OSMA for developing such a tremendous program that will help physicians purchase EMR

systems," said Troy Simon, CEO of Midwest Community Health Associates, a multi-specialty medical group in Bryan, Ohio. "Because EMR systems are such a critical and costly decision, physicians cannot afford to get it wrong."

To be recognized as a participant in the OSMA program, vendors must agree to meet the Standards of Excellence criteria. This includes such items as transfer of ownership of software licenses, amount and timing of

deposits and payments, and the cost of future licenses.

EMR vendors participating in the program must also offer products certified by the Certification Commission for Healthcare Information Technology.

The healthcare IT vendors currently signed onto the OSMA program include Allscripts, e-MDs, Greenway Technologies, iMedica Corp., Misys and Sage.

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of dermatology at the Maine-Dartmouth Family Medicine Residency, a family practice residency program that serves rural and underserved areas in Maine.

The MDFMR program requires training in dermatology, which Onion says can be difficult because residents have access to so few dermatologists. The program had used slides and other online resources until Onion discovered an article in *The Journal of the American Medical Association* about VisualDx.

VisualDx is a clinical decision support software system that provides more than 30 modules covering a different area of visually diagnosable medicine. The modules offer access to more than 16,000 images to help diagnose more than 900 visually identifiable diseases, drug reactions or infections.

The software "is not telling them how to diagnose, but rather it provides additional tools to work with in order to hone in for a more accurate diagnosis," says Richard Cohan, CEO of Logical Images.

The software program is simple to use and requires little training, Cohan says. Clinicians enter a patient's symptoms and other clinical findings. The system then displays photographs and key clinical information on all relevant diagnoses for side-by-side comparison. It also presents multiple images of each disease, showing how each might look at different stages and in people of different ages and races.

Cohan says VisualDx can be integrated with an electronic health record system, which makes the tool even more effective.

Rural and community health customers receive a reduced rate for the software of around \$1,500, Cohan says. Logical Images will also soon begin to sell individual modules of the software. ■

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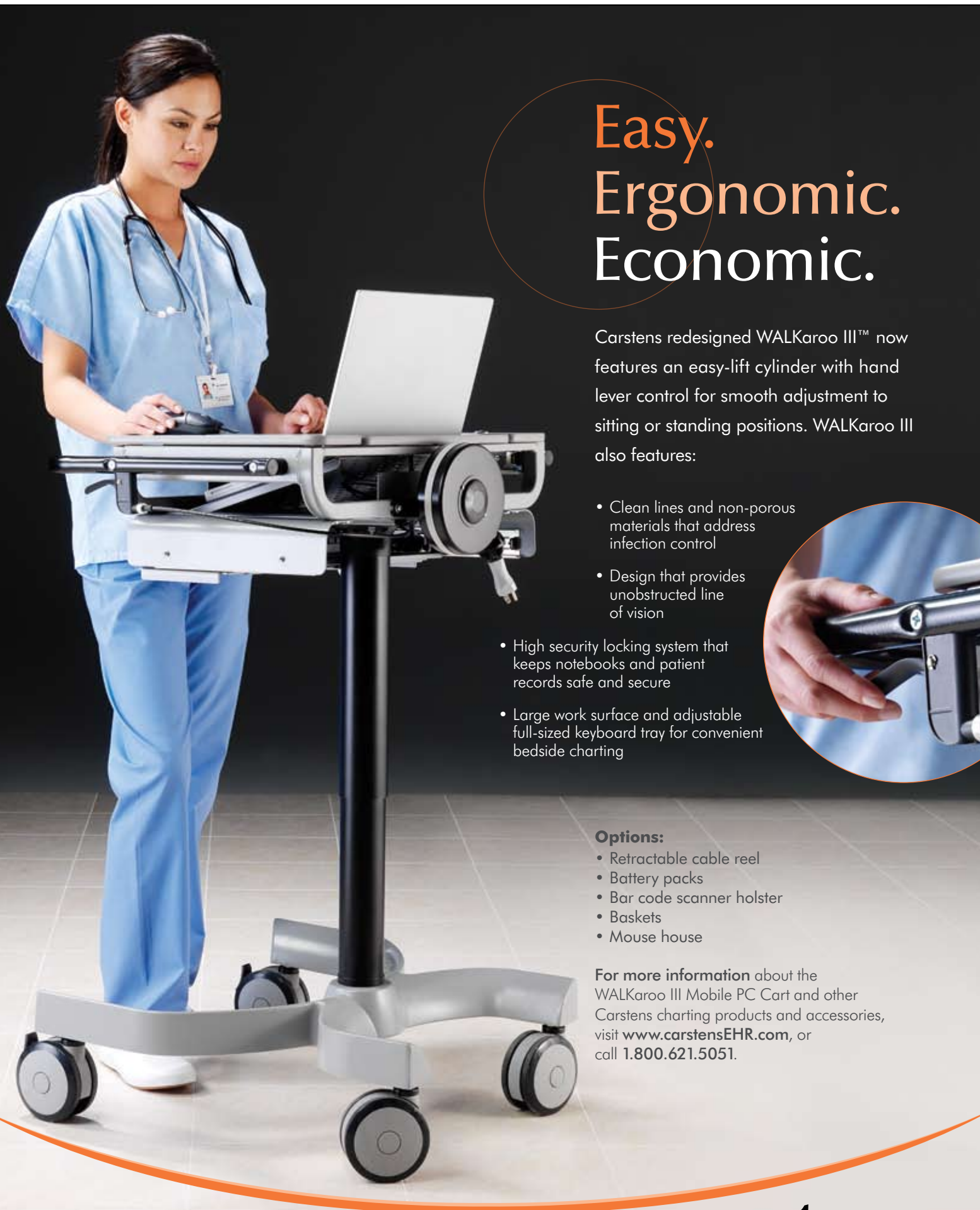
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