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WHITE PAPER

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MASTERING THE EMR SELECTION PROCESS: *Impetus to Adopt Electronic Medical Records*

The promise of a digitized clinical environment, driven by the adoption of Electronic Medical Records (EMR), is a goal shared by many. The complexity, however, of reaching EMR critical mass has dampened the speed of adoption. The New England Journal of Medicine published an article¹ on use of EMRs in the ambulatory setting. According to the study, in 2008 only 4% of physicians had an “extensive fully functional electronic record system.” Spurred by incentives, regulation, and market forces, providers are facing a delivery system that is migrating from a volume-based transactional system (i.e. fee-for-service) to a value-based, outcomes-driven model. EMRs will play an increasingly central

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¹ <http://www.nejm.org/doi/full/10.1056/NEJMsao802005>

role in driving value and serving as a platform for evidenced-based care by connecting disparate trading partners, promoting the use of a “health care team,” and engaging patients in their care.

While the EMR landscape is still maturing, the push for EMR will not subside. Purchasers, regulators and patients expect the delivery system to upgrade its ability to capture, manage, and report on the quality of care. With the influx of some \$30 billion in government incentives (and future penalties) for EMRs, the uptake of EMR is expected to rise. With an expanding EMR market, the risk of selecting the wrong system is also compounded. A recent KLAS publication reported more than a third of ambulatory practices (ranging from small to large) will replace their current EMR system. Why? Poor functionality, sun-setting products, and concerns about the corporate viability drive replacement needs. KLAS notes that while providers are still evaluating niche EMR products, many organizations are seeking the stability of established vendors. With Health Information Technology, especially EMR, moving from “nice to have to need to have,” selecting the right EMR has become a mission critical business driver.

Lessons Learned: Validated Knowledge Gained Through Experience

Navigating the EMR marketplace can be daunting. As of August 2011, there are nearly 700 modular or complete EMRs certified by the Office of the National Coordinator (ONC). This number may seem shocking; however, there is good news: In 2011, successful EMR selection is no longer only the domain of trailblazers. There are a handful of trustworthy steps and readily accessible documents to guide the process from organizations like the [Center for Health IT](#) (American Academy of Family Physicians). The following pillars will guide your organization to a successful implementation process.

ESTABLISH A SELECTION TEAM: Understanding the impact of adopting EMR on the entire practice is critical. Representatives from each clinical area, in addition to administrators, should participate in the process. Unlike technology improvements of the past, such as practice management systems, providers moving to an electronic documentation process are “key stakeholders.” Their involvement is imperative as a successful EMR selection directly impacts the change management process and physician workflows. In addition, support staff leaders will have valuable input into system requirements and workflow improvements. Creating decision making guidelines, i.e. requiring simple/super majorities, is critical for transparent decisions. The experience gained by the selection team will pay dividends upon implementation.



CREATE REQUIREMENTS DEFINITIONS: Discuss how you envision the EMR working in your practice. What interfaces will be needed for key partners, i.e. labs? Will you use dictation? Do you need a Patient Portal? Will you host the technology or employ a Software-as-a-Service (SaaS) model? Once you complete your requirements study, you will be prepared to engage vendors. Be mindful that you may see many “bells and whistles” throughout demonstrations. While these may be appealing, the organization may be better served by defining the EMR requirements on 90% of your typical needs as opposed to 10% of your “wish list.”

NARROW THE VENDOR FIELD: There are hundreds of ONC-certified EMR systems. Realistically you will be able to adequately assess just a handful of products. Use reference agencies, such as KLAS and specialty medical associations, to eliminate vendors with bandwidth or certification issues. Assure that the vendors have scalability and offer a full EMR suite of services. Best practices show greatest success with vendors that have large development departments, a documented history of technology installation, and financial sustainability. The Selection Team will agree on a few vendors to pursue for a full review.

REQUEST FOR PROPOSAL: Create and evaluate a Request for Proposal (RFP) for your “short list” that includes costs over five years. Formally score the responses with your selection team. Be careful to assess “apples to apples.” Some vendors do not include Electronic Data Interchange (EDI), scanning solutions, or adequate implementation services in their quotes. Eliminate lower scoring vendors, and refine the list further to your top three or four.

Selection Success Factors

- Commit to collaborative/structured process
- Agree on practice requirements for technology
- Narrow the field of vendors
- Send an RFP (Request for Proposal) to your “short list”
- Elicit staff and provider feedback by holding a “vendor day”
- Visit live practice sites for your vendor finalists
- Negotiate and contract with vendors



Mastering the EMR Selection Process

VENDOR DAY AND SITE VISITS: If possible, elicit staff and provider feedback by holding a “vendor day.” Invite the final contenders to demonstrate for all key staff, and have staff evaluate their feedback on a standard form that can be scored for quantitative and qualitative aspects (*Sample Vendor Day Scoring Form*). Given staff appeal and scoring, narrow your vendor list to two finalists. For the finalists, visit “live” practice sites that are using the EMR to evaluate key components such as implementation success, downtimes, ease of use, and vendor responsiveness.

VENDOR DEMONSTRATIONS

[Rank criteria listed from 1 (worst) to 5 (best) for each vendor]

System Functionality and Ease of Use	Vendor 1	Vendor 2	Notes
1 View information on a patient chart (problem list, medication list, test results, etc.).			
2 Understand the meaning of menu categories, graphics, icons, and symbols.			
3 Document the visit and record pertinent information in a logical and readable format.			
4 Identify clinical issues by means of alerts and reminders.			
5 Prescribe and manage prescription refills, assess insurer formulary information, and review drug interaction databases.			
6 Order labs, imaging, diagnostic tests, and other ancillary services.			
7 Communicate with colleagues via email, notes and alerts, as well as, structure patient communications to aid in decision making and treatment planning.			
8 Triage documentation and routine for rooming patient.			
9 Input information using a variety of methods, i.e. dictation, tablet, and cut and paste.			
10 Customize the sequence of activities, tasks, and screens to suit personal workflow preferences and accommodate new users and specialties.			
11 Access the same record simultaneously by multiple users.			
12 Transition between activities. Can you move easily between one function and another (e.g., between documentation and prescribing)?			
13 Are the built-in visit templates appropriate for your documentation needs?			
14 How well does the EMR integrate with other core systems, such as Practice Management?			
Name:		Role:	



NEGOTIATION AND SELECTION: You are now ready to move to best-and-final-offers (BFOs). Begin parallel discussions with the finalists. Clarify any concerns or contractual arrangements that are unclear. Ask for their BFO. The Selection Team will present final offers and a recommendation to final decision makers. Remember that all systems and all vendors are not created equal. The vendor's technology is one piece of the selection, but your vendor's wherewithal completes the full perspective. While there are numerous organizations that are now certified, the flurry of mergers, acquisitions, and product failures in the health care information technology market place will most likely lead to further consolidation. Do not underestimate the importance of not only the products you evaluate but your vendor. In an age of heightened regulation and the move to a quality-based delivery system, your vendor and their EMR will increasingly be a cornerstone of your practice.

In making your final decisions, select a vendor partner that supports your goals, understands your implementation needs, and has the resources to keep your project on track. Select a partner that can both grow with your practice and innovate for the complexities of the changing health care delivery landscape.

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