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Group building regional link leading to electronic medical records

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Brighton physician Andrew Kane is among a growing number of health care providers using electronic medical records. He can consult medical charts from home while on-call, and he can submit prescriptions to pharmacies electronically — a system that provides immediate warnings about allergies and drug interactions and eliminates errors from illegible handwriting.

But his system is not linked to any hospitals or practices beyond the Strong Health network. If his patients see an outside specialist, for example, that physician cannot consult Kane's e-records and Kane must still wait days to get a report by mail, phone or fax.

The use of electronic medical records and the creation of a nationwide information network for health care providers are key parts of the Obama administration's plans to overhaul the health care system. The \$800 billion federal economic stimulus bill, signed into law in February, includes \$19.5 billion in incentives for doctors and hospitals who see Medicaid and Medicare patients, as most do, to use electronic medical records. The incentives could be worth about \$44,000 per physician from 2011 to 2015, after which point providers who don't use e-records will be financially penalized.

Locally, the Greater Rochester Regional Health Information Organization, or RHIO, is coordinating efforts to create a digital network of patient information across a nine-county region.

The goal is to make patient information available wherever and whenever it's needed to provide the best care. Sharing information can avoid repeating tests, reduce the risk of mistakes and better inform care.

The challenges are to make the various systems communicate with each other, ensure patient privacy and pay for the initial and ongoing costs to providers to implement an electronic system.

So far, 11 area hospitals — including all five in Monroe County — are providing live data, such as lab results, through the network. The network now can share password-protected, encrypted records for more than 10,500 patients. Clifton Springs Hospital in Ontario County and United Memorial Medical Center in Batavia are the first to provide complete patient summaries. Every lab in the region is feeding results through the network. More than 1 million reports are added each month.

The RHIO, which formed in 2006 and has a staff of nine, has received \$4 million from New York state and \$2 million from insurers, hospitals and employers in the community for its work through 2011. The RHIO also is disbursing \$12.8 million in grants to help computerize medical offices, including Westside and Jordan health centers in Rochester and 225 community physicians so far. The RHIO is working to include elder services, home care, long-term care facilities and emergency medical responders.

Ted Kremer, executive director of Rochester RHIO, said 2009 will see the big push to encourage more doctors and patients to participate. The network had 900 nurses, doctors and other users as of March, up from 500 in January. Kremer admits he's still working on getting his own physician to join.

Rochester's RHIO is one of 12 that currently exist statewide. New York is also pushing to establish an electronic health care network. Gov. David Paterson on Thursday announced \$60 million in grants for health information technology projects.

Costs and concerns

The Rochester-area network, designed with the help of privacy officers and patient advocates, tracks what information has been viewed and by whom, when and for how long, said Kremer. Audits are run monthly and inappropriate users will be disciplined, he said. Kremer said the data being shared through the RHIO is limited to such things as test results, allergies, medications and physician summaries, not background details or information that patients may not want future health care providers to know, such as an abortion, genetic testing, how their child was conceived, or a family history of Alzheimer's.

Patients must give initial permission before their records are shared by a provider or a health system through the RHIO. So far, 93 percent of patients have given consent when asked.

A Kaiser Permanente hospital in California recently fired 15 employees and reprimanded eight for snooping into the medical records of the woman who gave birth to octuplets in January. That unauthorized access shows how records can be viewed widely within a health care system, but also that people can be caught and punished.

The cost of switching from paper to electronic recordkeeping is another issue for providers. A number of systems exist, and the costs can vary depending on the features and the extent of the services required. Dr. Eric Wilcox, who opened a solo practice in the Bushnell's Basin area in March 2008, spent just \$1,500 for a basic electronic charting system. A more complete system would cost him \$30,000 or more, he said.

Rochester Colon Rectal Surgeons, which has eight surgeons, four nurse practitioners and one physician assistant who travel among three offices, spent about \$150,000 in 2003 to equip everyone, including nurses, schedulers and billing staff, with computers and software. The group pays \$40,000 in annual fees and \$10,800 a year for high-volume data connections between offices. The system is a fabulous backbone that allows the practice to run smoothly, said Dr. Stephen M. Rauh, colorectal surgeon.

Before going digital, "I can remember driving in the office on a weekend to better understand a situation before an emergency surgery," said Rauh. "Now I can access that from the operating room."

Handling an after-hours call from one of his partner's patients, he can check records and judge whether a request for pain medication is reasonable or suggests a narcotics addiction. If an after-hours call needs follow-up by the office staff, he can send a digital note. "Documentation and communication are light years better," Rauh said.

The practice hasn't joined the RHIO yet, but Rauh said it would be ideal to connect to all hospitals and nursing homes. The only other solution he sees is for all patients to provide their own electronic medical record, such as on a compatible storage device. Companies such as Google, Microsoft and Aetna offer ways for patients to create a personal medical record stored online and accessed by anyone to whom the patient gives permission.

Health care providers who use paper medical charts can still use the RHIO. They just need Internet access. The RHIO also offers services and software, some free and some at low cost, to help medical offices go electronic.

Electronic advantages

Emergency rooms are one of the next e-record frontiers locally.

Without an electronic network of patient information, getting prior medical reports for emergency-room patients could take up to three hours, said Mary Milsom, an emergency care assistant at Clifton Springs Hospital in Ontario County. Patients have to sign a permission form, which has to be faxed to the previous hospital and then ER staff have to call to make sure it was received and wait for a fax back — assuming the records could be located.

Now, in minutes, Milsom and her colleagues can call up medical information about patients who've previously consented to have their information shared through the RHIO. "It's very vital to quick and immediate care without any guesswork," said Milsom.

At Rochester General's emergency department, computer screens display which provider is responsible for each patient, the severity of the case, how long the patient has been waiting and the status of orders for medication and tests. Those orders can be linked to a text pager to alert the practitioner when a patient has returned from radiology, for example, or when test results are abnormal.

Electronic charting, currently done at shared desks or using computers on wheels, takes longer than paper for the practitioner but provides much more data that can improve care, said Dr. Randal Christenson, an emergency room physician who also is involved in managing the information system. Rochester General's new emergency department, opening this fall, will have computers by each bed.

Many patients accept and welcome the technology. Eleanor Suter, 74, of Churchville, a patient of Kane's, is happy that computers have allowed new efficiencies. During a visit Monday, Kane electronically ordered a prescription and Suter expected to pick up the new pills on her drive home. "He's got everything right at his fingertips," said Suter.

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Includes reporting by The Associated Press and USA Today.

Additional Facts

For more

To contact the Greater Rochester RHIO, call (877) 865-7446 or go to www.grrhio.org.