

## Part B Insider (Multispecialty) Coding Alert

### Practice Management: Health IT Doesn't Solve Problems At 'Dysfunctional' Practices

#### 40 percent of organizations fail to implement electronic solutions

If you just install enough information technology in your office, it will magically solve all your organizational problems - right?

Wrong, say experts. Moving small physician practices over to computerized healthcare runs the risk of "digitizing dysfunctional systems," according to one physician at an April 5 Washington forum on IT in physician offices convened by the **National Institute for Health Care Management**.

The road to IT for small physician practices is "fraught with peril," said National Health Information Technology Coordinator **David Brailer**.

Around 40 percent of medical organizations try and fail to implement clinical IT systems. And most organizations haven't even tried yet. At the same time, a huge proportion of care to Medicare patients comes from small practices, noted **Agency for Healthcare Research and Quality** chief **Carolyn Clancy**.

Successful IT implementation in physician practices is the basis for development of a robust market that can actually produce appropriate, effective clinical IT technologies, added Brailer.

One major problem with IT: computers proceed step-by-step in a process that goes the same way every time. In real life, however, things don't always work that way. Can healthcare and practice management adapt to this step-by-step approach?

Especially in small practices, IT means "engineering processes that were never thought through" in the first place, said Brailer. Also, e-healthcare creates an audit trail of who did what when, and adjusting to that culture of accountability may be hard for people.

Doctors may have a harder time adjusting than other professionals, such as nurses, Brailer said. "I've seen nurses be much...more willing" to adapt to the demands of the e-world than doctors, he added. "I hope the nurses will help physicians along."

#### Small Offices In Danger

Small physician practices may find themselves squeezed out of the electronic healthcare world unless they receive some help, warned **Robert Wah**, information management director for the **Defense Department's TRICARE** health program. Small doctor's offices may not even "be able to practice medicine in the future," he added.

But stripped-down versions of systems designed for hospitals may be too structured and bureaucratic for physician offices, where patient visits often disrupt staff workflow, said **David Kates**, vice president for clinical product management with **WebMD Practice Services**.

**Drawback:** No matter how small your practice is, you'll almost certainly find yourself dealing with multiple vendors, said **Vanderbilt University School of Medicine** Professor **Nancy Lorenzi**. "There is not one vendor out there who said, 'We have it all,'" notes Lorenzi, who spent the past five years computerizing nearly 100 small practices in several clinical networks.

Also, practices aren't eager to share IT information with each other. "When I tried to get the practice down the street from us that bought from the same vendor to come talk to us" about their IT-adoption process, "they weren't interested," said **Richard Baron**, founding physician of Philadelphia's **Greenhouse Internists**.

The downside to tailoring: IT shouldn't just reflect how your practice works now. Instead, IT should make improvements. After all, the goal of electronic healthcare is to improve the quality and safety of medicine, said several speakers.

Don't put in a clinical computer system until you've clearly articulated "your vision" of how your practice will be different - and better - afterwards, said Lorenzi. Otherwise, you can't make smart choices among products.

**Action point:** Get your staff on board. If your staff isn't invested in the new computer system, you'll never succeed. There is a 35-percent sabotage rate in healthcare IT implementation, Lorenzi said. "You can have the best hardware and software," but if the entire staff doesn't take "ownership" of the new system and commit to it, your IT changes will never take flight.

**Where's the money?** Currently Medicare and other payers don't reward people for using electronic health records and other improvements, participants noted.

Implementing IT is expensive, and doctors who take that step will find themselves in a cash crunch unless the payment systems are improved, said participants.