Oral Surgery Coding & Reimbursement Alert

Electronic Health Record: Get a Better Grip on Your EHR System Using These 3 Tips

Surprisingly, EHRs adding to difficulties instead of reducing workload, says study.

If you are struggling to get used to your electronic health records (EHR) system, you are not alone. A new study has made some astonishing revelations regarding how the transition to EHRs actually added to costs without decreasing workloads or improving efficiency.

The **American Medical Association** (AMA) and **AmericanEHR Partners** performed a joint study asking physicians how satisfied they are with their EHR systems, and the results were surprising. Compared to doctors' responses to similar questions in 2011, "more physicians are reporting being dissatisfied or very dissatisfied with their EHR system," AmericanEHR said in an Aug. 10 summary of the report.

Among the 940 physicians who completed the survey, a startling 72 percent said that their EHR system's ability to cut down on their workload was difficult or very difficult, and another 42 percent of doctors "thought their EHR system's ability to improve efficiency was difficult or very difficult," AmericanEHR noted.

Surprisingly, the organization found that 22 percent of practices are satisfied with their EHR system □ a significant drop from the 39 percent of doctors who were satisfied with their systems just five years ago.

Compounding physicians' frustration is the fact that the EHR systems are tough to use despite being quite costly for medical practices. Some 54 percent of doctors polled "found their EHR system increased their total operating costs," the report added. This appears to contradict what some physicians were initially led to believe, since many EHR vendors indicated early on that using an electronic record would actually cut costs.

Take These 3 Tips to Heart

If you, like the physicians polled, are finding it harder rather than easier to keep up with your EHR as time marches on, consider the following three tips that can help you make the most of your electronic system.

1. **Stay Ahead of Updates**

   You've learned the nuances of your EHR and trained your staff on how to use it □ only to find that an automatic update loads overnight and your entire staff is once again in the dark about how to use the system. Unfortunately, this is a common problem □ and one that you can avoid with careful implementation.

   Your best bet is to "take a more gradual approach for updating the system," said the **Office of the National Coordinator** (ONC) with **HealthIT.gov** in a tip on its website. "Try to keep changes to a minimum. Introduce system changes in versions (phases) and allow sufficient time between changes for staff to adapt to the new system."

   This means that you should talk to your vendor about how often updates can take place in your system, and whether you can schedule them rather than having the software automatically update unexpectedly. This would allow you to test the updates ahead of time, so you can effectively train your staff on how to handle them before they are implemented. For example, if an update appears to wipe out a patient's prior medication list, you can find the problem and see whether the medication

   list is simply "hidden" within the EHR, and then train the physicians on how to un-hide it after the update takes

place.

Bottom line: Your EHR vendor should send you an update schedule as often as possible, so you know ahead of time when the updates are expected, and what they include.

2. **Maintain Patient Interaction**

One frustration of EHR use is that doctors often find that burying themselves in an EHR system can help them access patient information, but it may hinder them from having meaningful interactions with patients, the ONC found. For instance, the government says, "physicians might get so wrapped up in simply filling in all the checkboxes on an EHR form that they don't take the time to ask their patients open-ended follow-up questions."

One way to overcome this issue is to strategically place your EHR workstation in such a way that the doctor can continue eye contact with the patient, the ONC advises. "The clinicians should also engage the patient when they are reviewing relevant sections of the EHR, such as the problem list, or patient education materials," the ONC advises.

If your doctor is using a tablet, for instance, she can place it on the table between her chair and the patient's ⬜ that way, the doctor will check a box, look up at the patient to ask follow-up questions, and then look back down at the EHR. This is more interactive than keeping the EHR on a desk that requires the doctor to turn her back on the patient to check the boxes..

3.**Keep a Log of Issues**

The best way to fix problems within the EHR is to maintain a log of problems as they arise, the ONC advises. Whether you encounter software glitches, missing information, unreadable notes, or other problems, you should have one central person in your organization to whom EHR users can go to report issues. That person should keep a running log of problems, which can then be reported to the vendor or the organization's IT director for remediation.

You can also keep a list of corrective actions in the log showing how you fixed previous issues. That way, if another practitioner encounters the same problem in the future, you can look back at how the problem was fixed previously and enact the same response to help remediate the problem.

Resource: To read more about the AMA/AmericanEHR study, visit
www.americanehr.com/research/reports/Physicians-Use-of-EHR-Systems-2014.aspx.