

Moore Regional Hospital Foundation funds effort

Nov.10, 2005 - Contributed- Pinehurst

In the alphabet soup of medical terminology, there's a new acronym that you may have not yet heard. But it's about to improve the quality of your health care significantly, and eventually lower its costs. The three letters are "EMR." For those outside the information technology community, that's "electronic medical record." Just as information technology changed the landscape of banking and commerce in the 1990s, communication systems in health care are finally being challenged to catch up.

In a collaborative effort, FirstHealth of the Carolinas, the Mid-Carolina Physician Organization and ProviderLink, a North Carolina company formed by a consortium of the state's health care leaders, have initiated a pilot project to bring entry-level electronic medical record sharing to 30 local physician practices. The pilot project is funded by a \$78,000 grant from the Moore Regional Hospital Foundation; however, long-term plans project that costs will gradually shift to participating health care providers as they become convinced of the clinical and financial merits of an EMR system.

It all sounds a little overwhelming, but it's really a very gradual transition, according to Dave Dillehunt, FirstHealth's chief information officer. "What is needed for success in moving to electronic health records is an approach that incorporates a migration strategy for paper-based providers," he says. Even as some large providers, such as Pinehurst Surgical, forge into a chartless medical practice, smaller providers will also be able to realize immediate practical value from a community-wide health information

organization.

ProviderLink can offer medical record-sharing among hospitals, medical practices, insurers and pharmacies without the need for expensive new equipment. Any health care provider with a PC and a fax machine can participate – and, if it chooses, continue to maintain its own paper record system. The shared information can be sent as a fax, or e-mail-style on a PC, and can be printed out.

When President Bush established a national goal in 2004 that "most Americans have electronic health records by 2014," Tommy Thompson, then secretary of the U.S. Department of Health & Human Services, was pleased. "Health information technology has the potential to greatly improve health care, even as it yields huge savings," he said. Still, Thompson warned health leaders at a health IT summit in Washington that "the benefits (of health information technology) are enormous." "But," he said, "the task is also enormously complex."

According to Dillehunt and Pinehurst Surgical CEO William Edsel, ProviderLink has simplified the task by offering an intermediate step to providers leery about moving their record-keeping into the Internet age in one leap. Pinehurst Surgical will open in its new building near Moore Regional Hospital without a huge room for medical records. All 80,000 medical charts will have been scanned into its new internal medical health records system, TouchWorks. Smaller medical practices will be able to share information right away without such a massive undertaking.

"ProviderLink is a communication tool," says Edsel, "and it will allow providers in this region to communicate with each other electronically." What ProviderLink won't do is establish a huge databank with everybody's medical records. "Instead, ProviderLink facilitates the exchange of your records between practices," says Dillehunt. What this means is that your primary care provider can refer you to a specialist, or send you to Moore Regional Hospital for an MRI without relying on telephone messages or faxes. Instead, a message will be sent electronically and tagged so that the sender will know who received it and when.

Your medical information will be forwarded to the referral clinic in advance of your appointment, and you won't have to fill out another health history form or dig into your wallet for your insurance card when you arrive. When the results of the referral or testing are completed, they can be sent directly back to your primary care provider. These same easy exchanges can take place between doctors and pharmacies, insurance companies and Medicaid.

ProviderLink is currently used in 65 N.C. hospitals. North Carolina Medicaid is also on the network, and the North Carolina Medical Society has agreed to provide a person to answer provider questions about the network and to promote it at physician events. "The fact that the Foundation has helped us set this pilot project up for 30 area medical practices who have agreed to step up to the plate is going to save our area physicians time and money," Dillehunt says. "FirstHealth is involved, because we like to take a regional view toward improving

health. It's simply the right thing to do. Beyond that, the benefit of anything that facilitates referral and pre-registration for the hospital is obvious. A lot can go wrong when you rely solely on paperwork."

In fact, "paper kills" is how former House Speaker (and current CEO of the Center for Healthcare Transformation) Newt Gingrich bluntly puts it, referring to national studies that estimate that 25,000 to

80,000 deaths occur each year because timely access to patient medical records is not available.

Government leaders are serious about making the change to electronic medical records. David J. Brailer, M.D., Ph.D., appointed by President Bush to serve as National Health Information Technology coordinator, may come to Pinehurst to look at the FirstHealth, Mid-Carolina Physician

Organization and ProviderLink project. "We've been told that if this project works, Dr. Brailer will want to come down and see it for himself," Dillehunt says. "It's wonderful to see excitement building from the physicians. If this model is successful, electronic medical record keeping will really take off."