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An Austin physician's group adopts an EHR system to improve efficiency and patient care

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A patient arrives at your office complaining of chest pains. An EKG shows that she needs to get to the ER as soon as possible. While you get her safely into the ambulance, staff pull her records, including the EKG, which will arrive at the hospital by electronic transmission minutes before your patient gets there, allowing hospital staff time to review and prepare.

This is a scenario Dr. Eric Weidmann imagines as he talks about the benefits of the Health Information Technology for Economic and Clinical Health (HITECH) Act of 2009. HITECH encourages physicians to have an electronic health records (EHR) system in place, and stipulates that they must meet "meaningful use" criteria that show their physicians and nurses are using the system on a day-to-day basis or face financial penalties.

Dr. Weidmann, president and managing partner of the South Austin Medical Clinic, was an early adopter of HITECH. He led his practice in establishing an EHR system in February 2002 in anticipation of the long-term benefits he saw for his own practice and the industry as a whole. Because he was so quick to adopt an EHR system, he was also among the first in Texas — and in the nation — to participate in the Centers for Medicare & Medicaid Services (CMS) EHR Incentive Program. The incentive payments, notes Dr. Weidmann, helped to cover the costs of implementing the office's EHR system.

Throughout the process of implementing an EHR system into the practice, Dr. Weidmann and his practice partners always kept in mind what the end result of his EHR system would be.

"The focus remains on the time that providers and staff are face to face with patients," notes Dr. Weidmann, adding, "I don't want physicians or patients distracted by the technology. I want the experience enhanced by the technology."

Many Texas physicians not fully using EHRs

Texas physicians have known the change to EHRs is coming. A study published in the January/February issue of the *Annals of Family Medicine* shows that EHR adoption by family physicians has doubled since 2005, with researchers estimating that the adoption rate will exceed 80 percent by the end of 2013. The Centers for Disease Control and Prevention (CDC) reports that two out of three Texas office-based physicians are using some kind of EHR system, and 61 percent say they have attested to meaningful use or plan to participate in meaningful use incentive programs in order to avoid the impending 2015 penalty. Yet some Texas physicians are not using the EHR system to its full potential.

"Could I have done that with paper charts? Yes, but it would've taken a week or more of staff time to get the data pulled. I never would have done that."

Dr. Weidmann admits that he knows some physicians who see EHR adoption as an infringement on their patient

interactions and their professional life, and a few tell him they will retire rather than invest the financial and intellectual capital to adopt this technology in the late stages of their career. But Dr. Weidmann feels empowered by what EHR systems can help physicians do in the community, and works hard to encourage the reluctant to reconsider.

When used properly, Dr. Weidmann believes that EHRs have the ability to help physicians increase patient safety, enhance the quality of care, and reduce health care costs.

Everyday operations become more efficient

A glucose monitor provides a diabetes patient with minute-by-minute data that show the impact of his diet on his glucose levels — a powerful tool in changing behavior. But the monitor would cost the practice \$10,000. With an EHR, a doctor can run a database query to find out how many patients in the practice might benefit from the monitor, and the numbers present a good business case for making the investment.

This scenario is a good example of the kind of difference EHR systems can make in everyday operations.

"Could I have done that with paper charts?" asks Dr. Weidmann. "Yes, but it would've taken a week or more of staff time to get the data pulled. I never would have done that."

In addition to treating patients more efficiently, Dr. Weidmann's practice is now able to see more patients and streamline billing. The EHR system eliminated the practice's need for a chart storage area, so the space was converted into patient rooms, doubling the number of providers and patient encounters the practice could accommodate and reducing per-provider rent by 50 percent. Increased efficiency means the practice is less likely to "forget" to charge for services such as x-rays or vaccines. Historically, almost a third of those charges were never billed before the EHR system.

A high-tech solution needs high-tech backup

As the process moved forward, Dr. Weidmann also realized his practice would have to consider issues like security.

"Before we started converting to the EHR system in 2001, the idea that a fire may destroy all of our patient records was a horrific thought, but nobody kept duplicate records in another building across town," says Dr. Weidmann. "Now, the ability to have reproducible backups on and off site has become integral to our approach."

New thinking about security led to a re-examination of the practice's insurance coverage. The practice members began questioning their liability.

"This was at a time when the insurance companies were just beginning to write policies covering this type of liability and loss," he notes. "Once coverage was available for loss and privacy breaches and violations, we bought it."

Transforming to a paperless practice

Implementing an EHR system is a huge task, and making sure everyone is using it can be a challenge. In a recent study published by the *Journal of the American Medical Informatics Association*, researchers used interviews and direct observations of 28 physicians in a Texas multispecialty group to explore the reasons why some physicians used the practice's EHR system more than others did. The results showed that EHR use has less to do with physicians' tech savvy than how they deal with uncertainty.

Dr. Weidmann was aware that the key to successful conversion to an EHR system would be making the change easier for staff to embrace on an intellectual and even emotional level. For the transition, he selected team leaders for each practice area to help pave the way for change. When the system was ready to go live, some physicians reduced their patient load for a few weeks to leave room for the learning curve throughout the organization. The team spent extra time training physicians who were reluctant to convert, so they could adapt to the new system without compromising their approach to patient interaction or their style of care.

Helping office staff and physicians adapt to change was key to getting buy-in and ensuring meaningful use by the entire office. Dr. Weidmann's experience shows the transformation can be done.

"With the can-do attitude, if you commit to it, a broad range of providers — geeks and non-geeks — can become adroit with the system and thrive with it."

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