Making Healthcare Easier: Benefits of an Integrated Electronic Medical Record and Practice Management Sys-

An integrated practice management and electronic medical record (EMR) system refers to applications that are developed by the same vendor, share a single database or development platform, and are designed to share complex data between applications.

McKesson’s Practice Partner® Medical Billing, Practice Partner® Appointment Scheduler, and Practice Partner® Patient Records can be purchased individually as standalone applications; however, when deployed together, they function as an integrated system that we call Total Practice Partner.

Integration strategies vary among vendors depending on the history and origin of the individual applications. In many cases, applications that are owned by the same company may have originated as standalone applications developed by other companies or teams. In these cases, the vendor typically depends on interfaces to connect the applications because the applications do not share a single database or development platform.

Interfaced applications usually do not offer the full range of data sharing functionality or convenient setup and support as integrated applications because they do not share a single database.

All three of McKesson’s Practice Partner® applications were developed and designed to run on a single database. Therefore, McKesson has been able to provide a sophisticated level of integration functionality while providing a platform for additional features. This white paper will discuss some of the specific benefits of integration and the relevance to day-to-day practice workflow.

Benefits of Integration
This white paper will discuss the primary benefits of using an integrated EMR and practice management system, with a variety of specific examples that are relevant to the day-to-day workflow of ambulatory clinics. Specifically, integration provides the basis for:

- A common registration process that encompasses the financial, clinical and logistical aspects of patient care
- Enhanced ease of use and simplified training
- Information sharing between applications that improves efficiency and workflow
- Easier setup and support
Common Registration
Because all three Practice Partner applications reside on a single database, the boundaries that typically separate practice management and EMR systems are nonexistent. The Practice Partner system’s sophisticated integration allows medical practices to view and manage patient information from a financial perspective, which focuses on guarantors and insurance, and a social and clinical perspective, which focuses on the patient, family and social relationships – all from a common registration. From a practical perspective, this tremendously benefits how you register patients and update patient information.

From any of the three Practice Partner applications, you can:
- Register patients
- Access patient demographic and contact information
- Enter insurance billing information including account insurance plan billing order, relationship to insured party and default diagnosis codes for posting
- Indicate the patient’s primary provider and usual provider
- Edit patient data and have the edits automatically update the other two Practice Partner applications

Workflow Example: A patient checks in for her appointment. She notifies the front desk that her payor information has changed. The changes are made in the Practice Partner Appointment Scheduler module and are immediately available throughout the billing and EMR applications as well. During the patient’s visit, the provider writes a prescription in Practice Partner Patient Records and places orders in Practice Partner® Order Entry. Because the information entered in the scheduling system automatically updates the other applications, the scripts are checked against the newly corrected payor’s formularies and the orders are checked against the payor’s rules for those specific orders – in both cases eliminating redundant entry that might be required with less sophisticated integration.

The patient screen is identical in Practice Partner Patient Records, Practice Partner Medical Billing and Practice Partner Appointment Scheduler and is automatically updated when a change is made in any one of the applications. In addition, the patient screen can pull financial, clinical, and administrative information from all three applications. Individual users have access to information that would not be available in a non-integrated system.
Ease of Use
Because our company developed all of the Practice Partner applications, a set of common user conventions have been applied across all three applications that make training and the daily use of the three applications easier.

The Practice Partner system allows users to switch back and forth between charts, schedules and the ledger with a minimal number of keystrokes. This saves time that would otherwise be spent logging into different applications, or minimizing and maximizing screens.

All three Practice Partner applications use the same lookup screen to find patient data. This helps users quickly find charts, schedules or billing information.

**Workflow Example:** The physician needs to look at his schedule to identify his next patient. He opens his schedule from within the EMR. He then clicks on the name of his next patient and is taken directly to the patient’s chart.
The screen below shows the ease of toggling between the three applications. One click on the main toolbar allows users to switch between Practice Partner Medical Billing, Practice Partner Patient Records and Practice Partner Appointment Scheduler.

Information Sharing
Information sharing across applications makes each application more powerful. A single patient database provides the essential foundation for information sharing between applications. This allows each application to take advantage of information that typically would not be available in a non-integrated (interfaced) system.

This makes each individual application - medical billing, appointment scheduling or electronic medical records - more powerful because each application can access all patient information. Some specific Practice Partner examples of information sharing are discussed in the following sections.

Between Practice Partner Patient Records and Practice Partner Appointment Scheduler
This section summarizes some examples of information sharing between Practice Partner Patient Records and Practice Partner Appointment Scheduler.

Accessing Provider Schedules in Practice Partner Patient Records – Because providers use Practice Partner Patient Records as their primary tool for providing patient care, integrating scheduling information into Practice Partner Patient Records is a very useful tool for workflow productivity. From a simple drop-down menu in Practice Partner Patient Records, providers can view their entire schedule, including which patients have checked in, are late, are no-shows, have canceled or double-booked. This information is automatically updated as the schedule changes. A simple click on the patient name from the provider’s view of the schedule opens the patient’s chart, eliminating the need for a separate patient “lookup.”

Scheduling Overdue Health Maintenance or Tests – When scheduling an appointment, the scheduling application automatically alerts the scheduler that the
patient has overdue preventative or protocol-based health measures. These are measures based on age/sex recommendations, diagnosis, medication or individual requirements; all of which are part of the Practice Partner Patient Records health maintenance feature. This alert feature helps the scheduler book the appropriate amount of time for the patient’s visit, which in turn leads to healthier patients and perhaps even a boost in practice revenue.

**Documenting No-Shows or Cancellations** – By linking scheduling data to the progress note section of the patient’s electronic chart, Practice Partner automatically generates a progress note each time a patient does not show for or cancels an appointment.

The appointment screen in Practice Partner Appointment Scheduler provides the scheduling staff with valuable patient and account information from all three applications. Product integration allows information from Practice Partner Patient Records and Practice Partner Medical Billing to display in the scheduling screen. The scheduling screen below shows specific examples of the integration features.
Running a Missing Progress Note Report – This report is another example of linking the schedule with patient documentation. Practice Partner provides a report comparing the provider’s schedule with the EMR to determine if any scheduled visits were undocumented by a progress note. The missing progress note report also automatically takes into account no-shows and cancellations. From both a financial and Medicare compliance perspective, this report provides an internal quality control tool that takes advantage of the integration of the two applications.

Checking Patients In and Tracking Time – To analyze and improve patient satisfaction, you can track the amount of time that patients are in the waiting room and the duration of the overall visit. This requires the interplay of both the front desk and the clinical staff. The Practice Partner Appointment Scheduler check-in feature allows your registration staff to easily time stamp the patient check-in.

As the patient moves through the office, the clinical staff can use Practice Partner Patient Records to time stamp the progress of the patient. This information is available on a real-time basis to identify either the location or status of a patient. You can also use this information for reporting purposes, such as finding the average time in the waiting room and average time of visit. This information can be used to help better understand the flow and logistics of your office.

Creating Electronic Encounter Forms in Practice Partner Appointment Scheduler – From Practice Partner Appointment Scheduler, the front office staff can create blank electronic encounter forms (EEFs) – an electronic version of the superbill that is explained in greater detail below -for all the patients scheduled on a given day. The EEF is automatically available to the clinical staff as they see patients, eliminating the need to print, distribute and collect the paper superbills. In addition, completed EEFs are automatically sent to Practice Partner Medical Billing.

Between Practice Partner Patient Records and Practice Partner Medical Billing
This section summarizes some examples of information sharing between Practice Partner Patient Records and Practice Partner Medical Billing.

Generating Electronic Superbills – The electronic superbill, also known as the EEF, is one of the most powerful timesaving integration features of the Practice Partner system.

After the encounter, ICD-9 and Physicians’ Current Procedural Terminology (CPT™) codes are automatically transferred to the billing system, either by completing the progress note or simply by filling out the EEF manually. The transfer of CPT codes also occurs when orders are created during the encounter. In either situation, the electronic transfer of CPT codes from provider to the billing system eliminates the need for the creation, management and redundant entry involved with paper superbills. The billing clerk can quickly review the EEF, including relevant notes made by the physician, and post the charge with a minimal number of keystrokes.
When the physician initiates orders using Practice Partner Order Entry, a procedure code can be attached to the order automatically creating a billing entry in the EEF. Automating the transfer of procedure codes helps you more accurately bill services because everything ordered is noted on the EEF.

From the electronic encounter screen, the billing specialist can review charge information for each visit and quickly post a charge to the patient ledger with minimum keystrokes.

Checking Formularies and Entering Orders — As previously noted, sharing a single database helps eliminate redundant entry and makes information instantly available from other parts of the application. For example, the formulary checking feature of the Patient Records prescription writer and Practice Partner’s integrated order entry system both use the patient’s insurance information, which is typically entered and updated in the medical billing application. With Practice Partner integration, insurance information entered in Practice Partner Medical Billing automatically updates the formulary and order entry links, eliminating the need to manually update the information for these specialized functions and thus ensuring that providers are using the most up-to-date administrative information.

Between Practice Partner Appointment Scheduler and Practice Partner Medical Billing

This section summarizes some examples of information sharing between Practice Partner Appointment Scheduler and Practice Partner Medical Billing.

Viewing Billing Information while Scheduling Patients — In addition to preventative health information, the scheduler can view billing information such as the patient’s co-pay amount and balance. This information helps the scheduler keep patients aware of overdue fees and leads to more timely collections.
**Tracking Insurance Authorization** – Billing applications track insurance authorizations for worker’s compensation and specialist referrals; scheduling applications track the number of appointments that a patient has made towards the authorized number of visits. When both applications are integrated, users are alerted if the scheduling application makes an appointment that exceeds the authorized number of appointments stored in the billing application. Without integration, both applications store numbers that are never cross-checked and staff members fail to receive warnings about unauthorized visits.

**Between Practice Partner Patient Records, Practice Partner Appointment Scheduler and Practice Partner Medical Billing**

This section summarizes some examples of information sharing between Practice Partner Patient Records, Practice Partner Appointment Scheduler and Practice Partner Medical Billing (Total Practice Partner).

**Unified Messaging** – An integrated application has the power to link all members of the physician’s office, from the front desk, to providers, to the billing clerks. Unlike stand-alone applications, the messaging system allows all Practice Partner users to communicate with each other. With an integrated system, intra-office messages can be sent between staff members regardless of their function or the application they are using. Furthermore, if the recipient switches to a different application, the message will be available from that application as well. Furthermore, if the recipient switches to a different application, the message will be available from that application as well, ensuring that messages reach their intended recipients as soon as possible. Staff members can easily communicate amongst themselves without the aid of post-it notes or a separate e-mail messaging application.

**Unified Flagging/Notes System** – Many systems, including Practice Partner, allow users to insert patient-specific notes or reminders (flags) that may be applicable to all members of the office or to specific members, such as the clinical or billing staff. These flags are triggered as you access information about a particular patient or account. As a powerful by-product of integration, Practice Partner allows a practice to specifically designate where these flags appear – across all applications or confined to specific sections of the individual application, depending on the nature of the flag. This is simply another tool to facilitate intra-office communication.

**Easier Setup and Support**

There are many practical advantages of Practice Partner’s integration that make setup and support much easier than non-integrated applications.

**Installation on a Single Application Server** – You can install all of McKesson’s Practice Partner applications on a single server; making the installation process both easier and less expensive and simplifying the administration and backup process.
**Easier User Setup** – Integrated operator login (operators are the people actually using the applications) allows the practice to setup user names, passwords and security levels for all of the applications from a single configuration menu. This is particularly useful for staff members who may need access to all three of the Practice Partner applications. In non-integrated systems, this setup task has to be completed independently for each operator for each application.

**Easier Printer Setup** – Practice Partner’s integrated printer controls allow you to setup your practice printers for any Practice Partner application from a central configuration setup. Again, non-integrated applications require an often-tedious printer configuration for each application.

**Centralized Technical Support and Problem Solving** – Because McKesson’s Practice Partner applications are created by the same development team and supported by a single technical support team, you only have to call one number, regardless of the application. Having the entire development team under one roof helps simplify both feature requests and advanced problem solving.

**Easier Update Installation** – Integration also simplifies the update process because all updates are shipped as unified applications with the same version number (as opposed to managing separate updates for each individual application).

**Integrated Provider, Practice, Insurance, Procedure and Diagnosis Tables** – Because these tables are shared across all applications, you only need to set them up once. As you update the information in these tables, it automatically updates across all applications. This eliminates errors and inconsistencies from having to enter information twice.

**A Day in the Life: Workflow Examples of Integration**
Practice Partner applications are designed to improve efficiency at the daily workflow level. As noted in the examples in the previous section, integration is a powerful tool to achieve this objective. Let’s pull some of these together to see how they impact the practice in the context of a typical day.

**The patient calls for an appointment...**
The scheduling screen displays information contained in other applications to facilitate better patient care, such as overdue health maintenance items from the EMR that are age/sex, medication and disease specific. Additionally, you can reserve special resources, such as an ECG or procedure room, to ensure the patient receives the appropriate care.

From the same screen, Practice Partner Appointment Scheduler also shows important financial information from Practice Partner Medical Billing, such as type of account, patient
balance and co-pay amount. The person answering the telephone can remind the patient about a past due balance and/or their co-pay amount. This lowers A/R by actively helping to collect money upfront and also provides a mechanism to flag accounts when patients call.

**The patient cancels or no-shows...**
If a patient cancels or no-shows, Practice Partner Appointment Scheduler automatically triggers a progress note in the patient’s EMR, documenting the no-show. As the front desk updates the daily schedule, information becomes immediately available to a provider through a schedule view in the EMR, providing real-time notification of changing appointments, patient load and the status of double bookings.

**The patient arrives...**
When the patient enters the clinic, the front desk staff can use the Practice Partner Appointment Scheduler check-in feature to time stamp the patient’s arrival in the clinic. This allows the clinic to monitor patient flow and location in the clinic.

As you pull up the patient’s account in Practice Partner, the front desk staff is flagged that the patient is hearing impaired. Because the applications are integrated, the provider would be flagged with the same message as the front desk staff when opening the patient’s chart.

**Or the patient calls and says she will be late...**
As the front desk updates the daily schedule, information becomes immediately available to a provider through a schedule view in the EMR, providing real-time notification of changing appointments, patient load and the status of double bookings.

**While the patient is in the waiting room...**
When the patient enters the waiting room the front desk staff will use the Practice Partner Appointment Scheduler check-in feature to time stamp the arrival of the patient. Because the scheduling system is integrated with Practice Partner Medical Billing, office staff can view insurance and co-pay eligibility information without leaving the check-in screen. Unified messaging across all three applications allows front desk staff, billing clerks, providers and nurses to communicate about the daily clinic activities, regardless of what Practice Partner application they are using. Having the ability to send messages between staff members with the chart attached, record messages into the chart and set future reminders is a powerful communication tool that will save your staff time.

**The physician enters the room...**
Using the schedule’s provider view in the EMR, the physician simply double clicks the patient name on the schedule to open the patient’s chart. As the patient waits in the exam room, the physician can use the integrated timing feature in Practice Partner Patient Records to note the start time of the physician portion of the visit.
The physician finishes the exam and the progress note...

The physician documents the visit in Practice Partner Patient Records and, using the electronic encounter form feature (either directly or within the progress note), sends the billing data (ICD9/CPT codes contained in the progress note and any relevant notes) directly to the billing staff, eliminating the paper superbill. As the patient leaves the exam room, the physician can time stamp the end of the physician portion of the visit. The clinic will use the check-in statistical report to determine the average amount of time patients spend in the waiting room and with providers.

And the billing clerk...

After the encounter, ICD-9 and Physicians’ Current Procedural Terminology (CPT™) codes are automatically transferred to the billing system, either by completing the progress note or simply by filling out the EEF manually Orders are also created during the encounter so that in either case, the need for the creation, management and redundant entry involved with paper superbills is eliminated. The billing clerk can quickly review the EEF, including relevant notes made by the physician, and post the charge with a minimal number of keystrokes.

When the physician initiates orders using Practice Partner Order Entry, a procedure code can be attached to the order automatically creating a billing entry in the EEF to help you more accurately bill services because everything ordered is noted on the EEF.

Now, do all of last week’s visits really have progress notes?...

The Missing Progress Notes Report compares last week’s appointments with progress notes in the EMR to provide a list of any visits that are not documented.

Summary

Increasingly, the boundaries that have separated the clinical, financial and logistical aspects of physicians’ practices are being lowered as physicians and their staff seek methods to improve customer service while maintaining a healthy business. Integrated systems provide a tool for linking all of the complex aspects of a practice together in ways that improve both office efficiency and patient care and service. The Practice Partner integrated system offers the advantages of a single database and development organization, providing both a rich set of integration features plus a robust platform for future development.