

Solo doc's meaningful use attestation mostly pain-free

Fueled by enthusiasm for technology, government-wary upstate New York family medicine doc becomes early stage 2 meaningful use attestation success story.

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This is the latest in an occasional series of meaningful use stage 2 attestation success stories. This installment features a Medent customer.

Sean Boyle, M.D., isn't part of the 99%. The upstate New York solo family medicine practitioner is a self-described "techie" and "gadget nerd," who, while not fond of government mandates, saw the meaningful use program as an opportunity to infuse his practice with even more technology.

As of July 2014, only several hundred individual physicians, or about 1% nationwide, have successfully achieved stage 2 meaningful use attestation, according to CMS.

But Boyle, 56, started techifying his Trinity Family Medicine practice 20 years ago, when he bought a payment and practice management system from a then-fledgling EHR vendor, Medent Community Computer Service Inc., based in his hometown of Auburn, N.Y. So, when it came time to go even further into the electronic realm, he was more than ready, having been an early adopter.

Quick 2014 certification for small EHR vendor

Twenty years later, Medent, a privately held, family-owned firm, has grown into a full-service, cloud-based EHR company with its own proprietary patient portal that is being rolled out now, in the fourth quarter of 2014, among some of its 1,500 customers and 10,000 doctors, most of whom are clustered in the Northeast and Mid-Atlantic states. Medent executives say they are moving into New England and the Midwest too, with the same focus on ambulatory practices.

Over the last 20 years Boyle also has upgraded to a full electronic records system, and finished attesting in June after Medent became certified for the ONC 2014 standards in March.

The biggest hurdle for Boyle – as it has been for many of the several hundred physicians who, like him, have already attested to stage 2 – was exchanging medical records electronically with a provider that's not on the brand of EHR system as required to prove meaningful use.

It took some legwork on the part of Boyle's business manager to iron out logistics with another provider, as well as some extra programming.

"We finally got it done, though that was our biggest headache," Boyle said.

Patient portal a hit

Fast-forward to Boyle's favorite topic: getting his 3,000 patients to buy into Medent's patient portal. This particular meaningful use criterion is widely considered a significant challenge.

For Boyle, however, it was surprisingly easy, he said. Even an 89-year-old woman is using the portal now, he said – which proves to him that some patients' advanced age doesn't excuse doctors from using technology to improve patient-doctor relationships.

Boyle said 71% of his patients have signed up for the portal, which allows them to send secure messages to him, look at their medical record or routine lab results, and re-up most prescriptions whenever they need to and wherever, whether on their tablet or PC at home or their smartphone on the go. That number far surpassed the 10% bar set by CMS for meaningful use.

"And a great majority of those who signed up are using it," Boyle said. "I sign 'em up myself. I have my spiel. People love it.

"This is bringing the patient into the mix," he added. "Now they can see their chart anywhere in the world."

EHR investment pays off

Although he invested much time, effort and money in buying software and hardware to automate his office more fully, it's already paying off for him, Boyle said. For example, if he's out to dinner and a patient calls after hours, he can pull up his chart on his iPhone.

"There's no more phone tag with the patient. It eliminates that," he said. His advice to other doctors trying to attest: designate a portal "guru" who can get patients and staff enthusiastic about using it.

Boyle said the primary reason he attested wasn't the up to \$43,000 in meaningful use incentive payments. Instead, it was to make his work more efficient. Similarly, he's not a fan of the complex ICD-10 coding system set to launch in October 2015, yet he's already coding all diagnoses and procedures in the new language and is ready for the transition when it eventually comes to U.S. healthcare. "The government has more and more things for you to do, and they're paying less," Boyle said.

As for Medent, it's "geared up for people to attest," and is responsive to loyal customers, Boyle said. "They've made it as simple as can be," he said.

Medent set up for meaningful use

George Cuthbert, vice president of Medent and one of four brothers who run the company founded by their father, Edward Cuthbert, said that once Medent's most recent version of the EHR system was certified by the ONC's 2014 standards, Medent moved quickly to get all its users updated to it.

The EHR platform has an attestation dashboard built in, and attestation how-to videos embedded in the program as well. Or customers can call up online video tutorials in the electronic user manual. Another feature geared to aiding physicians' meaningful use attestation process is creating data exchanges through the Direct messaging protocol.

Cuthbert said, however, that attestation is a team project. If customers need even more help, they are directed to Medent-approved consultants.

"We have lists of consultants certified by us that go above and beyond us," he said. "It's so [customers] have skin in the game. We've trained these consultants to the max in how to use our system for meaningful use."

Let us know what you think about the story; email Shaun Sutner, news and features writer or contact @SSutner on Twitter.