Case study
Union Internal Medicine

From its office in Dover, Ohio, Union Internal Medicine focuses primarily on providing internal medicine services to a patient population age 18 and over. In addition, the practice provides specialty services in the areas of critical care, pulmonology and sleep medicine and a hospital service for a dozen family practice and primary care physicians in the area. With a total staff of 24, Union Internal Medicine has one part-time and four full-time physicians, one nurse practitioner and four nurses.

“The most significant impact of EMR on our practice is having the patient chart available at any time, with test results transferred directly to the patient’s chart and available immediately to physicians,” explains Jean Padro, Practice Manager at Union Internal Medicine. “It’s incredible how we can stay on top of everything in the practice, from knowing what meds a patient is taking, to being alerted if a payer is late in making payments, to knowing what procedures our physicians performed in the last month. We’ve become more efficient and decreased costs.”

CHALLENGES
Founded in 2000 by Dr. William Swoger and Dr. Michael McCombs, Union used Microsys software for billing and scheduling until 2007 when the volume of paper became unmanageable. They wanted a single, seamless system which would enable them to be more compliant with regulations and serve patients better.

SOLUTION
Union selected MEDENT Practice Management and EMR from Community Computer Service. The software was CCHIT Certified™ in 2006-2008.

“Community Computer helped create an interface so that results from our vitals machine, ECG and spirometry equipment go directly into the patient chart.”

Jean Padro, Practice Manager
Union Internal Medicine
Union Internal Medicine began using MEDENT in July of 2007. All new charts are now electronic, and all providers use triage and e-prescribing and sign documents electronically.

Union uses the Electronic Patient Statements service from Community Computer to create and mail patient statements. “Bills go out directly from the patient chart, and it’s very efficient,” states Jean. “With MEDENT we’re able to check patients’ eligibility with insurance carriers at the front desk. If a patient’s status with an insurance company changed some time ago, they may not remember to mention it. Also, we scan the insurance card into the patient chart and take a picture of each patient. Then if a patient calls, providers can click on the patient’s picture to be reminded of who the patient is. It provides a more personal touch.”

The practice has an in-house lab. “Community Computer helped create an interface,” describes Jean. “As soon as lab results are ready, they go directly into the patient chart.” Results from Union’s vitals machine, ECG and spirometry equipment also go directly into the patient chart.

Union has a Medical Content Library tailored for the practice, and they have developed some specialized templates. “Two of our doctors use templates and complete their documentation while with the patient,” states Jean, “and two dictate at the end of the visit.” Union has started using Disease Management (DM) formulas. “MEDENT builds formulas for DM,” states Jean. “It’s very physician specific and includes procedures such as mammograms and flu shots.”

As soon as a patient is seen, the charges are entered into the system. “In the past, the doctor would write a diagnosis on paper,” explains Jean. “It might be illegible, and staff had to try to identify a specific code for billing. Now doctors do their own coding which is more specific. For example, they indicate whether the patient’s hypertension is stable or malignant.”

“E-prescribing has had a notable impact on the efficiency and timeliness of refills,” explains Jean. “Physicians now order refills directly from their computer, and typically it takes five to ten minutes. In the past when office staff had to get up and pull the patient chart, it could easily be the end of the day before the person was free to leave their desk, pull the chart and give it to the physician.”

The practice makes extensive use of MEDENT’s reporting capabilities. “We run monthly reports for each doctor,” explains Jean, “to show how many patients they’ve seen in the hospital and in the office and what procedures by CPT code they’ve performed. This helps them understand why the financials are the way they are. Also, we track payers to be alerted if there are late payments or payments have been slow. The billing department then gives the payer a call.”

“The ability to rely on a single vendor for the software, hardware, networking and support has been part of the huge success we’ve had with MEDENT,” states Jean. “When we moved to a new office, Community Computer provided all the help needed to get us up and running at our new location. I was pleased they even worked with the copier people to be sure everything worked together.”
RESULTS

The impact of MEDENT on Union Internal Medicine has been significant in a number of major ways including making the patient chart available at any time, speeding the flow of information, and enabling the practice to stay on top of all that is occurring within the organization. Union has achieved greater efficiency, and cost reductions due to decreased use of paper have been substantial.

“Documentation is better because it’s much more specific,” states Jean, “and turnaround of lab results and tests is much faster. When a physician makes a referral for surgery, they can send the EKG, blood work and clearance for surgery directly to the surgeon from their computer. Previously, it would take a week or two to get the information to the surgeon. Similarly, when our pulmonologist evaluates a patient for a primary care doctor, the evaluation is back to the referring doctor in a couple of days vs. two to three weeks.”

“In 2009, we’ll increase of our use of the DM capabilities in MEDENT,” states Jean. “We’ll move to MEDENT V18 and begin doing pay-for-performance. There will be continued improvement in quality of patient care.”

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