

The State of Medical Practice Systems

Written by Pam Baker

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The medical business isn't what it used to be. The pressures on doctors are steadily bearing down, all but crushing the independent practice out of existence and stifling the aspirations of larger firms. "Physicians have a fairly depressing view of medicine," says Dr. Thomas Handler, a physician himself who is now an analyst at Gartner Research. "Sixty-percent in a recent poll said that if they could turn back the clock, they wouldn't be a doctor at all. Thankfully, technology has the potential to relieve some of that pressure and depression."

Even so, too few doctors see the benefit in most technologies, at least those beyond diagnostics, and front and back office billing, scheduling and accounts receivable management. It is this clouded view that is slowing the uptake of technologies that will eventually give doctors a much-needed break.

"Doctors have to have confidence to do what they do and they don't want to think they are capable of making mistakes. So, any pitch that a technology will prevent physician error is repugnant to them," says Handler. "Many also fear that technologies like e-prescribing will reduce them to practicing 'cookbook medicine.'"

Demand for, and Pay for Performance

Paper-based performance is driving that perception. As more insurance companies push for metrics to weigh actual physician performance, doctors feel they will have to forfeit their independence in order to measure up. "Doctors are not rewarded for doing the right thing," says Handler. "I think there will be a sea change in adoption rates when there's a real change in reimbursement schemes for doctors rather than just the technology availability itself."

According to Gartner, very few doctors are adopting the Electronic Medical Records (EMR) piece of the equation; only 10% in the country have done so. Of those, 95% are large practices; less than 10% are practices with fewer than five doctors. "The problem is that many doctors are afraid of productivity losses from implementation and training through to everyday use of the technology," says Handler.

Costs are also a prohibitive factor. "It costs \$5,000 to \$25,000 per doctor just for the software," says George Hill, analyst, Leerink Swann & Co. "That's a big deterrent for a lot of doctors out there."

Given the direction medicine is taking, however, systems that integrate EMR with Electronic Practice Management (EPM) can deliver an eventual pay-off. "Any functionality that helps providers participate in paper-based reward systems or HMO collections is worth its weight in gold," says Hill.

Make no mistake, paper-based metrics will pick up steam and doctors will eventually have no choice but to conform. "It would take forever to go through paper records and pull the information needed for paper-based requirements," says Handler. "Frankly, it probably wouldn't be worth it."

This, of course, helps explain the large uptake by big multi-discipline practices.

Systems are Available

Case in point: The Doctors Clinic, a physician-owned multi-specialty medical group with more than 75 physicians in Kitsap County, Washington. The group has a network of seven clinical locations through the Kitsap Peninsula with a variety of ancillary services including full service imaging and lab. The medical group includes more than 30 specialties. The group recently deployed Sage Software Healthcare's Intergy.

When asked why they deployed the technology at all and why they chose the brand they did, the answer is both preventative and curative. "We desired a single database that combines practice management and electronic health records including radiology and other analytical data; a partnership with a stable vendor, one who will be able to support us for years to come; and, most critical in our selection, was how user-friendly the system is and how quickly will we be able to get everyone up to speed," says Angela Henderson, marketing manager for The Doctors Clinic.

At the end of the day, that's what it's all about: physicians healing themselves from HMO woes and malpractice afflictions. "You want to eliminate duplicate data entry, and you want everything running off the same database because there is so much on the line now," says Hill.



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About the author:

Pam Baker, an American writer, is the author of six books and numerous analytical studies on various technologies for VisionGain Research, headquartered in London. Her published credits also include hundreds of articles for national and international media such as Wireless IQ, Telematics Journal, IT Business Insider, Institutional Investor Magazine (covering the U.S., UK, Belgium, Ireland, Brazil and Turkey), Success Magazine, E-Commerce Times, I Six Sigma Magazine, CIO Today, NewsFactor.com, Enterprise I.T., BPM Today, MacNewsWorld, LinuxInsider, CRM Buyer, CRM Daily, SCI-Tech Today, TechNewsWorld, Georgia Trend Magazine, Economist International Business Magazine, and Knight-Ridder/McClasky newspapers.

Baker was nominated for the 2004 Templeton-Cambridge Journalism Fellowship in Science and Religion in the UK, and is a member of the National Press Club in Washington, D.C.

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